

“Gotta Light?”
Canadian Women’s Cigarette Smoking
as a Social and Communicative activity

by

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ABSTRACT

Smoking research has focused on the incidence and public health issues associated with smoking or on the deficiencies of the individual smoker. This thesis examines women smokers' experiences of cigarette smoking in face-to-face interactions, that is the overt actions, verbal and non-verbal, that create the behaviour.

Seventeen women smokers and five ex-smokers ages 19 to 53 provided the data through in-depth interviews about their smoking interactions. Smokers' perceptions of non-smokers' views of them was also examined. Feminist thinking informed the analysis of the participants' narratives.

The complexity of the communicative interactions inextricably tied to cigarette smoking reveal an appealing, supportive side to smoking that extends beyond what is presently discussed in the literature. For public policy and practice my goal is to link the personal experiences of these women smokers with a prevention and/or cessation program.

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CHAPTER 1

Significance/Relevance of the Study

The original stimulus for this study came out of my forty year experience as a cigarette smoker. During this time, my smoking partners and I experienced varying degrees of solidarity and marginalization. Frequently we felt guilty and powerless over our 'addiction.' But there is another side to the act of smoking...

My early experiences of cigarette smoking definitely lay on the intimacy side of relationships. When I was a little girl I remember loving the smell of my mother's purse, a pungent mixture of cosmetics and fresh tobacco. Twenty years after her passing, an old purse still retains that wonderful smell. When the fitness craze started, and cigarette smoking began its decline, my mother would come home from work disgusted. "All they're going to end up with is a bunch of better looking corpses," was her reaction to a boss who said she should quit smoking and walk up the 25 floors to her office. She was in her twenty-third year with the company by then. My mother was a kind, gentle, cultured woman who in her younger days, was a Catholic nun. She was also independent, strong, a single parent and an early feminist who tricked her way into a male dominated supervisory position with a Canadian railway. She got the job by using an initial only for her first name on the application, they assumed she must be a man simply because she had applied. Much of my adult relationship with her was spent sitting around the table talking and smoking. Although she didn't begin until her early thirties, I never knew my mother as a non-smoker or thought of her as deficient or deviant in any way because she was a smoker.

My first conscious involvement of being educated in the finer points of smoking was when, as a child, my cousins and I would vie to put our fingers into the incredible smoke-rings that my uncle could produce. We were all awe inspired by this creation and would beg my uncle to blow smoke-rings for us. Playing with smoke-rings was a fun communicative activity. By looking at smoking as a communicative social interaction, I

hope to find some clues to its attraction and persistence.

At eleven, just prior to my first puff, I had a sleep-over party for about half a dozen young girls. We dressed in our frilly baby-doll pyjamas and posed with a cigarette in our hand for my camera. We sure thought we were something - and the cigarette wasn't even lit. We had so much fun; looking at the photos today always brings a smile to our faces. Most of my early associations with tobacco and smoking were attached to close relationships, strong characters (my favourite aunts) and fun.

Twenty years after I began smoking, I attempted to stop. I found out what a difficult task this was and I spent the next twenty years thinking about stopping and attempting to actually stop. Most of my smoking interactions during this time were with my female friends and our talk about smoking centred on quitting. We were told that cigarette smoking was as addictive as heroin (Immen, 1996). This kind of talk only confirmed our inability to quit was valid, and did little to change our smoking behaviour. We believed we were controlled by a drug.

In Canada over the last ten years, anti-smoking forces have gained momentum. Many businesses, stores, educational institutions, and all government offices have been designated as non-smoking areas. New laws and rules have marginalized smokers and forced them outside to congregate in little pockets around the periphery of buildings. Many smokers have had to stop smoking in their own homes due to pressure from family members. They often sneak away or stand outside, on their own back porches feeling unacceptable, afraid for their health and unable to quit. They blame the tobacco companies for their 'addiction' and their own ignorance for starting smoking in the first place.

Four years ago, with the help of the nicotine patch, I successfully stopped smoking. My smoking friends were very supportive of my accomplishment, however, our relationships were not the same. For instance, when we were at a function in a non-smoking building, they would quickly gather together at the break, so they could go outside for a smoke. They would not seek me out and ask me to go with them, as was the case before I stopped and even if I went outside and joined their circle, I would sense their uneasiness at my being there. They would move away from me, albeit to save me

from the smoke, and the talk would change to how they should quit smoking. When I reacted to feeling left out, the rumour went around that I must be menopausal. About a year and a half after I stopped, I had a hurtful argument with my beau at the time. He asked me to pick him up a pack of cigarettes and come over to his house so we could talk. By the time I got to his door I was smoking and have continued smoking. It was like 'coming home'. My relationships with my female friends returned to normal, I felt at peace. I was huddling, hiding, bonding, grouping, and smoking again.

Last year our staff Christmas party was chaotic. We arrived at the hall and to our surprise discovered that it was a non-smoking building. Our CEO, who is a smoker, was very upset. She said she would never have agreed to have the party in this hall if she had known. "It's a Christmas party" she exclaimed "and I want to relax and smoke where and when I feel like it". Reluctantly, she donned her jacket and trudged outside to the designated smoking area. Next we were told that the hall had been double booked and that another staff party was due to arrive at any time. In anticipation of their arrival we moved our tables to one side of the room. There was tension in the air when the other party arrived and discovered the predicament. They set up their tables as far away as possible. Inside, there was little interaction between the two groups.

Outside, the smokers from both parties began meeting and talking to each other. In this tight circle (no one strayed far from the door as it was so cold) there was laughter and intermingling of the two gatherings. After initial introductions, the conversation generally centred on the act of smoking. Talk on the topic included different methods for quitting, the ever increasing expense, and where to purchase the cheapest smokes. Humorous discussions ensued about the sayings on cigarette packages and how they could be changed to reflect smoker's thoughts, "Smoking can kill you" should read "Smoking is great after sex" for example. One woman suggested that smokers were society's rebels. The man who stated that "smokers are a dying breed" produced wails of laughter from the shivering group. Many of the participants stayed around for the talk long after they had butted out. Inside, the two office parties remained separate and strained. Since this occasion, Star Schiphorst Enterprise have manufactured stickers that cover-up health warnings on cigarette packages (Appendix A).

At a more recent gathering a rebellion took place. The hall was designated as non-smoking so the smokers grabbed their drinks and went outside to smoke. Once out there, they were told that they could not bring their drinks outside according to the liquor license. This pushed the smokers too far and they took it upon themselves to designate one of the hallways in the building as a smoking section. There they could drink and smoke at the same time. No one complained.

The above two anecdotes reflect several of the concepts that I will be examining. The first scenario describes smoking as a social elixir, which alleviates some of the awkwardness between strangers by producing a common ground, common topic, normalising conversation (gotta light?) and a common activity that facilitates smooth and successful social interaction. The second illustrates how smokers can 'construct' themselves through their conversation and behaviour as a marginalized or poorly treated group and then collectively act on this definition. People with little else in common develop a quick, action oriented, and combatant solidarity. What is it about smoking that appears to tie strangers so easily? At what point will smokers rebel against their status as a sequestered group?

Recently, I was employed as a Child and Youth Care Worker. As my own children did not smoke, I assumed that smoking had lost its popularity among young people and it was only those of us who were unknowingly 'addicted' that were still smoking. I was shocked to find out this was not the case. Many of my young clients, particularly the girls, were starting to smoke, despite all the education they had received about its adverse effects to health. Since these girls are warned about the dangers of smoking and they are not 'addicted' before they start, and because of my own experience, I chose to study smoking in face-to-face interaction, in an effort to better understand its persistence.

The catalyst to launch this study came from the tracking of media reports about cigarette smoking, coupled with the personal experiences of myself and my smoking friends. Scholarly awareness about cigarette smoking has been developing since the U.S. Surgeon General's report connecting it to cancer in 1964. This thesis provides evidence that more work needs to be done on the ways in which smoking is experienced by

women. As will be shown in Chapter Two, there is a gap in the literature with respect to the social and communicative aspects of women's cigarette smoking. Accordingly, this study seeks to contribute to the existing body of knowledge.

Problem Statement

Despite clear evidence of health risks, threats of social exclusion, expense, and ever-diminishing smoking zones, people continue to smoke and new smokers are lighting up for the first time everyday. The stock explanations/theories cannot adequately account for the persistence of smoking or its appeal to young people. It is unpleasant to begin, it is unhealthy and expensive. The 'addiction' theory of smoking persistence does not account for the fact that many so-called addicted individuals have managed to quit without problems or how some people smoke only occasionally, once every few weeks or months. The 'peer pressure' explanation of why people begin to smoke fails to account for the fact that many people exposed to this pressure do not begin. Social learning theory cannot account for why some children of smokers are adamantly opposed to it. These theories/explanations tend to view smoking as an unwanted effect of physiological or social-psychological processes. Few, if any, studies have examined the activity of smoking in its own right, as a social interaction, as part of the physical language of communication. The questions usually asked are: what are the effects of smoking on health, what constitutes a smoker's personality, and/or why do people smoke?. As it is impossible to observe intentions or the rationale behind them, since these are not available to the observer (Leeds-Hurwitz, 1972; Geertz, 1988), I am asking instead, how do people smoke, and how do smokers understand and interpret their smoking?

PURPOSE AND CONTEXT OF THE STUDY

Millions of people smoke and smoking is a nuisance if not a health threat to millions of others. The tobacco industry is an important contributor to the Canadian economy accounting for billions in tax dollars. There is growing interest in the health

care problems associated with smoking and legislation to ban the behaviour is restricting smoking venues. Since the 1960's, the Canadian government has sponsored an ever increasing public health campaign about the dangers of smoking to health. Health Canada states that tobacco kills over 40,000 Canadians every year, three times more people than alcohol, AIDS, illicit drugs, car accidents, murder and suicide all combined (Westworld, 1995). In 1989, in British Columbia alone, there were 4,285 deaths related to smoking as well as an increase in people taking their first puff (Jorgensen,1993). Approaching smoking strictly as a negative health problem, or a personality deficiency ignores the fact that smoking is a gratifying social experience for many people. This failure to take into account all the functions involved in smoking persistence has ignored the 'attractive' aspects of smoking. The major purpose of my study was to uncover the intricate and complex nature of women's smoking interactions, so that I could develop a better understanding of their lived experience.

My non-smoking experience illuminated the importance of interpersonal relationships in cigarette smoking. I began to focus on the behaviours involved in public smoking and not on the abstract ideas or attitudes associated with the tobacco itself (Rivers, 1995). Some examples of each will illustrate the distinction. An attitude would be a stereotypical idea some people hold about smokers, such as "smokers have no willpower" or the abstract idea many smokers have about themselves that they cannot quit because they are "addicted". A face-to-face interaction could be a non-smoker saying to a smoker "Why don't you just quit?", or the smoker saying, "Gotta light?" so she could light up her cigarette with a friend. Note that the actions involved in these interactions include nonverbal features such as body language and tone of voice. There can be many different kinds of face-to-face interactions among smokers: smokers may experience interactions that are supportive, bonding, non-verbal, isolating and oppressive. Smoking is not only a personal activity and a physical or physiological phenomenon, it is also a social activity, an interpersonal activity, and a communicative symbolic phenomenon.

Symbolically the activity of smoking can be used to establish and signify affiliations and loyalties. Smokers use the act of smoking to define themselves as a group, a subjugated and marginalized group, with values and actions which more and

more contradict conventional norms (Willis, 1978). Smoking facilitates relationships and acts as a social elixir.

Cigarettes are used as exchange by the poor and in the underground economy of institutions including schools, prisons, homes for the aged and psychiatric hospitals (Goffman, 1961; Diamond, 1992; Willis, 1978; Peterson, 1995). Inmates use available artifacts, in every social establishment, for an end not officially intended, thereby modifying the conditions of the life programmed for them. The smoking of cigarettes enhances the creativity of these make-do's `a la Robinson Crusoe. Cigarettes are lit by a number of means - a match split into quarters, sparking an electric light outlet, or a home-made tinderbox (Goffman, 1961 p. 187).

People who live in poverty obtain cigarettes by swapping transportation, child minding, lighters, or the promise of future smokes for today's supply. If they have only loose change and cannot afford a full pack, they can usually buy single cigarettes from other smokers whether they know them or not. If they see a particularly interesting smoker and want to meet them, smoking easily provides that introduction. By examining smoking as a social and communicative act/art/practice, I hope to draw attention to an alternative explanation for its persistence which may be used to intervene to prevent and/or control it. While there are individual differences among smokers, smoking behaviour has many similarities.

Objectives and Research Questions

The objectives of this study were: (a) to find out about women's experience of smoking interactions, (b) to learn how women experience the relationship between smokers and non-smokers, (c) to develop an understanding of the factors which influence women's persistence at public smoking behaviour.

Specific research questions for this study were as follows:

1. What are the smoking interactions of the participants?
2. What makes smoking a gratifying social experience for women?
3. How do the social components of smoking identify it as a

communicative act?

4. What role does smoking play in relationships, identities, and to the positioning of women in relation to social institutions and values?
5. How did some participants return to smoking and how did others continue to stay away?
6. What is it that former smokers miss most about smoking? How/if at all are their relationships different now that they are not smoking?

Conceptually, this study defines smoking as face-to-face communication and can be divided into two parts: (a) women's experiences of the face-to-face activity between smokers over time and in different contexts, and (b) women's experience of the communication between smokers and non-smokers from the perspective of both present day smokers and ex-smokers (those who have quit for more than a year before the interview).

Researcher's Values, Beliefs and Experiences

By focusing attention on the perceptions and experiences of the participants, I attempted to develop a unique understanding of smoking communications. I did this work based on several assumptions: that when two or more people are together they cannot not communicate (Watzlawick, Bavelas, & Jackson, 1967); that people make sense out of their experiences and create their own reality (Locke, Spirduso, & Silverman,1987); and that when people are badly treated they will resist (Wade, 1992). I also assume that women smoke differently than men and as a woman my 'epistemic privilege' as an insider was most effective in researching the activity of women smokers (Narayan, 1988; Greaves, 1995). My presence as part of the research process meant that my assumptions, values, beliefs, experiences, and perceptions became potentially relevant to all stages. As the investigator, I was a primary research instrument.

I did not strive to erase my personal viewpoint from the study as I considered myself to be a valuable resource that I brought to the study setting. My task was to ensure that my personal attributes were used in a way that illuminated the data, rather than distort

it. Therefore, I had to develop an awareness of what I brought to the study setting (Locke, et al., 1987). By documenting my thoughts and emotions at the start of the research, I established a strategy to allow me to determine, on an on-going basis, whether my assumptions or preconceived ideas were influencing the research (Kirby & McKenna, 1989).

VALUES AND BELIEFS

I approached the research problem from a human rights perspective which gave me the drive and energy to go forward with this project (Taylor, 1995). Since I value every human being's right to self-determination and self-worth, I instinctively resist the presumption that an act that I have engaged in, with such pleasure, for so many years, with old friends and new acquaintances, reflects some sort of physiological or psychological deficiency in me. It is important to me to gain a full picture about the function of smoking as a communicative act. The questions that I asked and the way in which I analyzed the data were influenced by this perspective.

I believe that cigarette smoking is physically unhealthy and that supportive relationships are physically and psychologically very healthy (Littlejohn, 1983; Newsweek, 1973) and for many people this latter component of smoking interactions in the present is far more important than future physical health problems. I believe that more people from marginalized and subjugated groups smoke because it is one of their few accessible forms of resistance. It provides entertainment, exchange and a hedge against boredom. I believe that cigarette smoking is a communication issue and not a private pathology (Peele, 1992; Laing & Esterson, 1964).

For public policy and practice my goal is to link the personal experiences of these women smokers with a prevention and cessation program that will allow smoking to be more easily alleviated if it was so desired. By being informed about the communicative aspects of smoking, critical non-biological parts of the beginning and/or letting go process can be examined and a better understanding of women's cigarette smoking result. Information regarding the symbolic and communicative nature of smoking behaviour lessens the mystique attached to beginning the act and forewarns the smoker of possible

pitfalls they might encounter should they wish to refrain.

The rest of the thesis is organized as follows. Chapter Two, provides a review of the literature on cigarette smoking as it is generally studied. I then present studies on smoking that include talk about the communicative interactions involved in obtaining the cigarettes, performing the act and how it is symbolized. This research combined with literature on addiction and communication form the conceptual framework for my study and note the difference between my study and what is common in the literature. Chapter Three is a discussion of the research design, participants, data collection, data analysis and ethical considerations. In Chapters Four, Five, Six, and Seven I present my findings. Chapter Eight supplies insights from the study within the context of the literature, implications for prevention and cessation, and recommendations for future inquiry.

CHAPTER 2

Review of Literature on Cigarette Smoking

I approached the literature on cigarette smoking with some questions in mind. How does the literature portray and examine smoking, what are the prevailing theories or explanations and what are the gaps in understanding cigarette smoking? The purpose of the literature review was to stimulate questions about the topic and to suggest concepts for the analysis. The literature on the subject of cigarette smoking is ubiquitous. Most studies are quantitative in their analysis and focus on smoking as a public health issue.

SMOKING AND SOCIAL LEARNING

A variety of studies focused on the occurrence of smoking in children whose parents are smokers (U.S. Department of Health, Education and Welfare, 1979) and generally concluded that children of smokers are more likely to smoke and that parents' permissive attitudes toward smoking are a risk factor for their children to take up the habit (Murray, Swan, Johnson, & Bewley, 1983). Bandura says that much social learning takes place through observation; people, especially children, see what other people, especially their parents do and what happens as a result, and they learn new responses by watching this process take place. Some behaviours such as tying shoe laces may be deliberately demonstrated but the vocal inflections or facial expressions used in the demonstration are simply imitated. The behaviours of people important to us can be very powerful social reinforcers. Social learning theory emphasizes the role of social behaviours in the learning process (Vander Zanden, 1987). However, this theory fails to explain why some children of smokers are adamantly opposed to it and others, whose parents are non-smokers, begin.

As smoking usually begins in early adolescence, peer influences or psychological factors in the adolescent (e.g. low self-esteem and rebelliousness) are often cited as a reason for initiation (Clausen, 1968; U.S. Department of Health and Human Services,

1987). These studies do not take into account why adolescents with the same peer influences do not begin or why all youths who exhibit the psychological factors of rebelliousness and low self-esteem are not smokers. A recent (1994) six year longitudinal study found that family functioning is a better predictor of adolescent cigarette smoking than if the parents or peers smoked (Doherty & Allen, 1994).

SMOKING, DRUGS AND ADDICTIONS

Literature on cigarette smoking is often included in studies on drugs and addictions (Israel, Glaser, Kalant, Popham, Schmidt, & Smart, 1981; Donovan and Marlatt, 1988; New Horizons, 1992). The drug nicotine is contained in tobacco and is considered a psychoactive euphoriant like morphine and cocaine. Physical dependence and tolerance are produced by repeated drug use. Tolerance means that it takes more of the drug to produce the same "feel-good" effect, therefore smokers go from a couple of cigarettes a day to a pack a day or more. Farquhar and Spiller in their book, *The Last Puff* state that the addiction to nicotine is as strong as the addiction to heroin in that the relapse rate is on the same curve. Webster's New International Dictionary defines the word addict as follows: to apply habitually; to give (oneself) up or over as a constant practice; to habituate. It takes six months to a year to get hooked on nicotine (Farquhar & Spiller, 1990).

The addiction to cigarettes can be broken down into two parts, psychological addiction and physical addiction. Psychological addiction is interwoven with lifestyle and smokers develop their own smoking habits such as with coffee, alcohol, talking on the phone and after a while like Pavlov's dogs certain activities associated with smoking become in themselves a stimulus to smoke. Physical addiction occurs because nicotine interferes with certain neurotransmitters in the brain causing the user feelings of tranquillity and alertness, when nicotine in the brain is depleted the user craves a new supply as they have become accustomed to these artificially produced feelings. After you take the addicting substance regularly for a long period of time, you become so used to it that you slowly find you need more and more of the substance to get the same effect. Many pack-a-day smokers only really enjoy three or four cigarettes in a day, the others are

smoked to keep the blood level of nicotine up, that is, to satisfy the physical addiction. Another aspect of nicotine addiction is that people will continue their dangerous behaviour despite known harm to their health, even when they have personally experienced the devastating consequences of emphysema or a cancerous lung removed (Farquhar et al., 1990).

The Disease theory of addiction has three main contentions 1) that the addiction is a separate part of the person's life and indeed drives all their choices; 2) that it is irreversible and progressive, meaning that the addiction inevitably worsens unless the person seeks treatment either medical or an AA type support group; 3) that the addiction renders the person powerless meaning they are incapable of controlling their behaviour in relation to the addictive objective itself or-when the person is in pursuit of the addiction or intoxicated, in relation to the person's dealings with the rest of their environment. In his book *The Diseasing of America* Peele (1992) opposes this disease theory of addiction and maintains that people are active agents in, not victims of their addictions. Looking at addiction within the larger context of a person's life and not regarding it as an explanation of that life (ie excuse compulsive gamblers when they embezzle money to gamble) is the difference between his approach and that of the disease theory.

SMOKING AND PERSONALITY

Another group of studies researched smoking in relation to personality (Patton, Barnes, & Murray, 1992; Pritchard & Kay, 1992; Kumar, Pekala & Cummings, 1992; Kreitler, Kreitler & Weissler, 1992). These studies lend support to Eysenck's provocative thesis that "smoking and personality form a synergistic relationship" (Eysenck, 1988, p.460). It implies that smoking affects health negatively only in conjunction with other factors, and runs counter to the commonly accepted view that smoking tobacco itself is the most important cause of certain diseases and premature mortality. One study concluded that smokers are 'more motivated' on a variety of dimensions, most related to psychological benefits derived from smoking (e.g. anger control), rather than being 'more addicted' (Pritchard et al., 1992).

In the above personality studies using the Eysenck scales, one reported that smokers rated high on sensation seeking (Pritchard et al., 1992), another thesis concluded that rating high on sensation seeking is a correlate to rating high on paranormal beliefs and experiences (Kumar et al., 1993). In many First Nations communities it is very impolite to refuse the offer of tobacco. It is considered a sacred commodity and smoking it provides the pipe carrier (medicine man) with a connection to the spirit world (Ceneman, personal interview March, 1995).

Cigarette smoking in the literature has been studied from many varied perspectives including its relationship to health, to addiction, to social learning, and to personality. Generally these studies are quantitative, have moralistic overtones, discuss cigarette smokers as a deviant group and do not study the genders separately. A few studies look at the importance of social interaction and womens' issues in beginning and persisting at cigarette smoking.

WOMEN AND SMOKING

Rising concerns about women's cigarette smoking have been reflected in the media, indicating that this study deals with an important and timely issue. In May 1987, the federal government launched Canada's Drug Strategy in an effort to reduce the harm caused by alcohol and other drug use including tobacco. *Horizons 1994: Alcohol and Other Drug Use in Canada* is the most recent research-based publication to emerge from this directive. It examines alcohol and other drug use and related health and social problems in Canada and cites women, among others, at particular risk of harm. The publication states that the National Health Research and Development Program (NHRDP) along with The Studies Unit and the Alcohol and Other Drugs Unit of the Health Promotion Directorate, Health Canada, are encouraging a variety of research methods in order to ensure a more comprehensive approach to what have been traditionally, hard-to-reach populations. Although I did not find any studies on women's smoking using an ethnomethodological approach, there were two studies on other 'addictive' substances that used this method. One looked at the use of alcohol in the First Nations population, *Indians On Skid Row*, (Brody, 1970) and the other, *Outsiders* researched marijuana

smokers (Becker, 1963). More recently a theory of the meaning of smoking to women has evolved through a qualitative feminist study. It states that:

Smoking is an important means through which women control and adapt to both internal and external circumstances. Smoking is a means of mediating between the world of emotions and outside reality. It is a means of reacting to and/or acting upon social reality and a means of defining the self in relation to lived experience (Greaves, 1995 p.208).

SMOKING AND SOCIAL INTERACTION

Some studies point to the connection of cigarette smoking and social interaction. Smoking cessation can be used as a common ground between strangers and the resulting bond makes quitting possible. Women patients on a psychiatric ward have better social relations and display less intense symptoms of their labelled disorders if they are cigarette smokers. In fiction novels, cigarette smoking is written about as an acceptable drug for relieving stressful social situations.

When examining the effects of a meditation program on drug use including smoking, Ganguli (1985) hypothesized that the program's functioning as a subculture for its members, rather than the meditation itself, resulted in drug use reduction. By substituting supportive social interaction for drug use, the participants' psychological needs were met.

Kushnir (1986) analyzed 250 fiction novels and found that smoking occurred most often in social situations in which intense negative emotions were aroused. The behavioural and emotional consequences of consumption were usually positive. These fiction writers tend to attribute two main functions to smoking--facilitation of skilled performance (either social, technical or cognitive) and as a psychological tool used to cope with emotionally stressful situations. Occurring in stressful situations, smoking is often portrayed as an act of drug prescription, either by self or others.

Another study focused on female smoking behaviours and compared smokers and non-smokers who were psychiatric inpatients. The results showed that the symptoms and degree of diagnostic disturbance were significantly milder in smokers. Schizophrenia was four times as frequent in non-smokers. Smokers enjoyed better social relations, had fewer difficulties in treatment, participated more willingly in ward activities, and were

more co-operative (Niskanen, Tamminen, and Sakki, 1978).

Conceptual Framework

The following discussion assists in viewing smoking as a symbolic act, as a commodity in the underground economy, as a sign of connectedness, and as an inextricable part of the communication between smokers and between smokers and non-smokers.

SMOKING AND SYMBOLISM

The bonding which smoking facilitates works to separate this group from the non-smokers and becomes a symbol of their non-compliance, of their cultural background, and of their lifestyle choice. Working class British school boys (lads) valorise their culture by being seen to smoke cigarettes. This public act of insurrection is a matter of honour for 'the lads' as a reaction to the strict rules about smoking at school (Willis, 1977).

Smoking communication is often a dichotomy and symbolizes both intimacy and rebellion, affiliation and isolation. In the cinema, for example, there are contradictory images of smoking which portray it as both a defiant and intimate act: a criminal blows smoke in the face of his arresting officer; a soldier holds his dying buddy in his arms as they share a final smoke; a man places two cigarettes in his mouth at the same time, lights them, and then hands one over to his lover in the afterglow of intimacy.

A 1985 study in England wanted to illuminate current social interpretations of female smoking behaviour. The participants, young women who were training to be nurses and teachers, believed that overall a negative cultural stereotype of female smoking was currently operating. Non-smoking subjects viewed non-smoking females clearly as more 'feminine' and expressed that smoking is 'unladylike'. Smokers perceived smoking as a symbol of independence and social change and did not believe that women who smoked differed in terms of sexuality (Elkind, 1985).

In the popular press, Virginia Slims ad campaigns symbolize the desire for women to be seen as attractive and independent. A well dressed, beautiful, slim model with a cigarette in her hand announcing “You’ve come a long way baby” and offering a catalogue of clothes and accessories which can be obtained free with enough package facsimiles, gives the message that the more a woman smokes, the more autonomous, fashionable and glamorous she will appear (Phillip Morris Inc., advertisement in *Self*, 1995).

SMOKING AND EXCHANGE/UNDERGROUND ECONOMY

In many institutions, inmates' “make-do's” (getting more than is provided by the institution) are characterized by the fact that to use them means very little involvement with the official world of the establishment. Cigarettes are payment for such things as getting asylum seamstresses to tailor shirts and pants to a good fit (Goffman, 1970). In nursing homes where health care needs outlast personal resources, cigarettes are often shared and ashtrays are searched daily in an effort to secure the longest butts (Diamond, 1992). Inmates of the Canadian prison system are sold government subsidized (tax free) cigarettes which are used to buy “almost anything”. Riots broke out when talk of banning smoking in jail was overheard by the prisoners (personal interview, July 1995).

SMOKING AND COMMUNICATION

Like other forms of ‘disturbed’ behaviour, smoking can be seen as a communicative reaction to a particular situation rather than evidence of the disease (addiction) of an individual (Watzlawick et al., 1967; Laing & Esterson, 1964). Smoking becomes part of the physical language of communication and is expressed spontaneously between smokers. When one of the communicators is an ex-smoker, and the other is smoking, there is a lack of synchronicity which can leave both feeling socially incompetent. Body language, including smoking behaviour, become an inseparable part of verbal communication and cannot be performed consciously (Bavelas, 1996). Public speakers who have been coached and are trying to make the correct hand movements, look artificial. When a smoker is concerned about how she is smoking (which way the

smoke is going) the viability of the conversation suffers.

Investigation of social communication through the natural history of an interview (NHI) marked a turning point in the history of communication. It is highly significant in several ways including being a milestone in the development of both kinesics and paralanguage. Body motion was coded and this code had to be learned for successful communication:

It is true that the more directly and intently we examine the behaviour of single human beings, the more we see. A single glimpse in sharp focus can make the investigator stand aghast, if not petrified; he may decide for the sake of his own ego, not to look again. But if he can persevere, in due time he discovers that the complexity, no matter how incredible is not random but patterned (Pittenger, R., Hockett, C., & Danehy, J., 1960 in Sigman, 1987 p.25).

The view of communication that NHI provided suggests:

that it is patterned (non-random, rule-governed, predictable, and therefore analyzable); learned (not inborn, and therefore different for each culture); context-bound (behaviour has meaning only in a specific context); multi-channel (more than just words, communication is a complex combination of words, use of space, movements, etc.) and continuous (it never stops) (Leeds-Hurwitz in Sigman, 1987 p. 31).

An ethnographic study in women's communication cited the critical need for explicit articulations on experiences of identity, marginalization and sexuality in the lesbian community. The thesis asks, how lesbians are negotiating their positions in safer sex within a discourse that is saturated with representations of lesbians as invisible, stereotypes and/or essential identities and demonstrates some of the communication issues involved when lesbians speak to each other (Luinenburg, 1994).

SMOKING AND CONNECTEDNESS

Phenomenology is a study of people's perceptions of their interactions. In his thesis, *The Effective Child and Youth Care Intervention*, Garfat (1995) using an ethnographic phenomenological method, interviewed both Child Care Workers and the youth whom they work with. He discovered that smoking together was mentioned by both as part of an effective intervention. It appeared to aid connectedness. The Child and Youth Care Workers utilized the opportunities offered by daily life activities for

therapeutic purposes (Guttman, 1991 & Maier, 1987 in Garfat, 1995). Discussions of relationship are one of the most common subjects in the literature on Child and Youth Care (Fewster, 1990 & Triesman, Whittaker & Brendtro, 1969 in Garfat, 1995). The worker must feel that she is connected with the youth in such a way that the intervention has the greatest chance of succeeding, smoking can be part of this process (Garfat, 1995). Doherty's (1994) family functioning as predictor of adolescent cigarette use study suggests connectedness can prevent smoking however, it appears that smoking can also produce connectedness.

Indians on Skid Row, Brody (1970) is an ethnographic study which looks at life on skid row of a metropolitan Canadian city. The study concludes that for migrant Indians skid row life is the most appealing way to live in the city as racism and upward mobility are not important issues there. Indeed, social success and advancement entail integration into non-Indian society. For many Indians that is neither a realistic hope nor a pleasing prospect. The majority of Indians on skid row find there a welcoming and gratifying environment. They have little difficulty in adopting to its mores. Alcohol is an inseparable part of this lifestyle and plays a major role in interpersonal relationships. The skid row Indians have more to gain, in social terms, than they have to lose by drinking. Defined by the author as lumpenproletarian the urban Indian does not have a socio-economic base, has neither enduring role nor persistent resource in mainstream or traditional economic forms. It follows that for the lumpenproletarian no bourgeois ethic can find substantial rationalisation. He is remote from the morality which sees heavy drinking as sinful and unlikely to find in standard or mainstream arguments against drinking any strength until his own socio-economic situation is radically altered. At present drinking is or seems to be more pleasant than not drinking (Brody, 1970).

Outsiders, (1963) is a classic study in the sociology of deviance by Becker. The book features examples of social deviance and includes both homosexuality and marihuana use as deviant behaviours. The author states that in the case of marihuana use the premise commonly believed is that an individual's deviant behaviour is best explained by some kind of deficient psychological trait which motivates his actions. An example for marihuana users is that they need fantasy to escape psychological problems they

cannot face. Becker did not feel that these theories adequately accounted for marihuana use:

...instead of the deviant motives leading to the deviant behavior it is the other way around; the deviant behavior in time produces the deviant motivation. Vague impulses and desires - in this case, probably most frequently a curiosity about the kind of experience the drug will produce - are transformed into definite patterns of action through the social interpretation of a physical experience which is in itself ambiguous. Marihuana use is a function of the individual's conception of marihuana and of the uses to which it can be put, and this conception develops as the individual's experience with the drug increases (Becker, 1963 p. 42).

CONCLUSION

Cigarette smoking is an inextricable part of the interpersonal interactions of smokers and between smokers and non-smokers. For the smoker, it is part of the gestures of verbal communication, it symbolizes various attributes depending on cultural norms, and is used as a medium of exchange in their social support system. The meaning of an action is determined by the context within which it is situated (Bateson, 1958 in Sigman, 1987). Smoking behaviour is situated in a variety of contexts.

The difference between my study and what is common in the literature involves three changes in perspective: I was interested in smokers' perspectives on the experience of smoking, rather than outsiders' perspectives and judgements about smoking from a public health or personal deficiency point of view. Second, I was curious about smokers' accounts of their own behaviour while smoking rather than attitudes about the activity of smoking. Finally, I assumed that a more detailed picture of smoking as a social and communicative activity would better facilitate efforts targeted at changing that is, reducing the behaviour.

CHAPTER 3

Methodology

RESEARCH DESIGN

As I studied smoking as discourse, I analyzed it as conversation and communicative behaviour. I conducted an exploratory study informed by ethnography, and feminist research perspectives about the role of social factors in beginning, persisting, and stopping smoking. I used open ended questions in conducting one-on-one interviews to gain access to the participants' experiences of smoking as a communicative activity, over time, and across many different settings.

Research is performed by using in-depth interviews to gather information about how people live and give meaning to their everyday lives. Themes and characteristics of the particular group, in this case cigarette smokers, come from the data itself. Another feature of both phenomenography and feminist research is to include the original voice of the people interviewed (Tesch, 1990). Feminist research treats the interviewees as active participants in developing an understanding of social phenomenon, in this case that of cigarette smoking from smokers' and ex-smokers' point of view (Patton, 1980). It is also a feminist belief that the researcher must include their own understanding and experience in the process of creating knowledge (Kirby & McKenna, 1989).

My background with the subject studied includes professional and personal experience in addition to exposure to the literature. As mentioned earlier, I have been a smoker and an ex-smoker and these experiences precipitated my interest in doing this study. The researcher's personality is a key factor in qualitative research, the skills of empathy and intuition must be cultivated by researchers and deliberately used (Burns & Grove, 1987).

I have over 40 years of experience in smoking behaviour. This background was an asset in conducting the research. As an investigator, I possessed credibility which facilitated the carrying out of the study, including access to participants willing to talk

about their personal experiences and potential acceptance of my findings by those who work in addictions programs. Since I was interviewing women of different ages, I had to strive to remember that the reality of these women could be quite different from the reality that I experienced as a woman smoker. Rather than attaching my own meaning to their experiences, I needed to shelve my previous experience so that I could remain open to the perceptions of the participants (Burns & Grove, 1987).

I enlisted the help of a colleague with whom to cross-check my perceptions and decisions as a means to control for the influence of my personal standpoint during data gathering and data analysis. I recognized as well that my subjectivity is valuable in this type of research and my role was to acknowledge the complexities involved with the closeness of my relationship to the participants (Sandelowski, 1986).

PARTICIPANTS

I interviewed 22 women between the ages of 19 and 52, all were cigarette smokers although 5 of them had not been smoking for a least a year before the interview and most had spent some time during their smoking career as non-smokers. Either I asked them if they wanted to participate or they approached me to be part of the process. I purposefully selected women from different social economic and cultural groups. Some of the women were married with children, others were single parents, some were married with no children at home and there were those who were single and lived alone or with roommates. I interviewed women from each of the age groups 20's, 30's, 40's and 50's who were either heterosexual or lesbian and who began smoking in different contexts (city, rural) within Canada. By using various ages, I broadened my focus to establish if/how smoking interactions changed over time. The 19-year-olds have information on how to begin smoking in the 1990's. One women did not begin smoking until she was in her thirties and therefore illuminated the initial attraction from an adult point of view. I interviewed all the participants in the Cowichan Valley, however only five women actually began their smoking experience in the area. I limited my participants to those who began smoking in Canada.

Most long-term smokers have spent time as ex-smokers and will have experiences

regarding any changes in their social interactions when smoking and not smoking. These women will also be able to provide information as to how they were able to return to and/or how they continue to stay away from smoking. I interviewed women smokers as well as ex-smokers (those who stopped for more than a year before the interview). I believe that ex-smokers can add to my discoveries by informing the study about what it is they miss most about smoking. I limited my interviews to women for the following reasons: (a) several medical doctors told me that when they advise their patients to quit smoking, their female patients usually have more difficulty quitting than their male patients do (Harris, Phillipson, & Young, personal interviews March, 1995); (b) because my own experience comes from a female perspective; (c) because of my previously mentioned assumptions and feminist theory; (d) because tobacco death rates among women are catching up with those of men; (e) because of the growth in lung cancer in women and (f) because of the higher prevalence of smoking in 15-19 year old females as compared to males (Health Canada, 1995).

Although I did select each participant, this did not insure that these particular participants were objectively typical in any generalizable way as this was not the purpose of my study. The women smokers I interviewed assisted me in developing an understanding of smoking communication.

Data Collection

I conducted private, in-depth interviews with twenty-two women who were either smokers or ex-smokers. As I was interested in the description of smoking behaviours of people interacting in a close proximity to one another, I felt conversational interviews were appropriate (Rubin & Babbie, 1989). Interviews are helpful in gaining a full picture of narratives as they include gestures and intonation not available on questionnaires. As well as being private, I chose a relaxing smoking environment for these women and we would often smoke together during the interview. I felt that joining in smoking behaviour with the participants while exploring their experiences would lessen their tension and

would enhance my empathy and intuition with an overall benefit to the research process (Burns & Grove, 1987). When interviewing the ex-smokers I refrained from smoking.

PROCEDURES

I gathered the data by using open-ended interviews guided by a general list of questions (see Appendix B). Pretending to use a video camera to capture the beginning smoking behaviours came from communications specialist J. B. Bavelas. The rest of the interview used ideas from Michael White's narrative therapy landscape of action and landscape of consciousness questions. The interviews were informal and lasted from 45 minutes to two hours. The individual determined the length of the interview by how much each wanted to talk. I interviewed each woman separately. All of the participants consented to being audiotaped and formally indicated as to which uses of the tape they agreed to (Appendix C).

FORMAT OF THE INTERVIEW

The informants understood the project was about cigarette smoking before they came to the interview. First, I told them that the study was about actual interactions and that I would ask them about specific experiences. I then used the analogy of a video-camera to assist people in understanding the information I was interested in regarding their initial smoking experience: I told them to pretend that they were videotaping their first puff and to describe for me all the actions involved including what was said, how it was said, and their body language. The participants remembered and talked about what was important to them, as a result they controlled the structure and flow of the interview.

Next, I began to ask a series of questions about their persisting at, present day, stopping and/or stopping and returning cigarette smoking. These questions were designed to elicit smoking interactions about each of these time frames (Appendix B). The questions served as a guideline to help the women think of examples. Although I did vary the order and use of these questions depending on the interviewee and the direction of the interview, I always began this portion of the interview with the question, "Who is the best smoker you know?" This question seemed to relax the participants, many of

whom had mentioned how guilty they felt about smoking, and set the tone for this part of the interview in a light-hearted manner.

As the women related their experiences, I questioned them about all the behaviours involved. I asked them to expand on their descriptions by saying such things as, "What did they do to make you think that?", "How did they say that?", "What did you do after they said that?" These questions help focus the interview on the actual behaviours involved in the smoking interactions.

Because of the nature of the subject, people spoke openly and appeared to leave the interview on a positive note. Many of them remarked that they had never thought about smoking in terms of communication and seemed to like having been asked for their side of the story.

Data Analysis

My preliminary analysis began during the time that I was conducting the interviews. I did not force events into categories and kept in mind what people had said in the interviews to help me sort out the experiences. My field notes included evolving trends, relationships and concepts that unfolded as natural groupings. Social phenomena, including cigarette smoking, are complex, therefore, there are no hard and fast rules for qualitative analysis, simply general guidelines for effective analysis (Strauss, 1987). My data analysis strategy reflected my beliefs, values and experiences, and adopted techniques used by other feminist researchers to honour women's voices.

The "discovery of regularities" is a category of research interest employed by Tesch (1990 p. 78) in terms of commonalities or discerning patterns in the data. I instituted this category in selecting my process of analysis. In this type of research, conceptual categories of organizing data come from the data--rather than being pre-established--and the primary goal is systemic description of the phenomenon, with the goal of generating theory being secondary.

Phenomenography is used to chart the different ways in which people experience their reality, perceiving and conceptualizing the phenomena in their world. By

questioning these women on their smoking social interactions I was able to hear their experiences, perceptions and explanations of these interactions. In phenomenography, the emphasis is on the 'way things work' in a person's world (Tesch, 1990).

Another type of research approach that Tesch (1990) describes as "discerning patterns as deficiencies", is used for scrutinizing peoples' situations and for devising strategies for making changes in practice where problems exist. To some extent, my research fell into this category as I hoped to identify ways that might prevent women from beginning smoking, as well as ways for those who wanted to quit to experience less problems and more success.

PROCEDURES

Following Hycner's (1985) procedure for phenomenologically analyzing interview data, I transcribed the talk about smoking social interactions from each interview. I re-read the data several times to become very familiar with them. A colleague also read through the data to see if he could discover any unique elements that I had missed. Hycner's technique of phenomenological reduction was useful. This technique involves "opening ourselves to the phenomenon as a phenomenon...not to see this event as an example of this or that theory... but as a phenomenon in its own right, with its own meaning and structure" (p.27).

I analyzed and coded my own data. The beginning stories and each of the time frames were analyzed separately. I immersed myself in the data and using my insight and intuition gradually developed concepts and propositions that began to make sense out of it (Taylor & Bogdan, 1984). I developed a categorizing system from the women smokers' patterns of behaviour, words, and ways of thinking (Tesch, 1990).

The units of analysis were a word, phrase, sentence or paragraph that later served as the basis for defining categories (Merriam, 1988). I selected these units based on several factors: it was a recurring idea, it intrigued or surprised me, it related to my research questions, or it was consistent with what I had read in the literature. I colour coded the data according to explicit criteria, such as situational factors, emerging patterns, and concepts with each group of quotes constituting a category (Merriam, 1988).

Phenomenographers call these 'illustrative utterances' and sort them based on their similarity (Tesch, 1990).

I developed conceptual categories that captured the meaning of the womens' stories by using my intuition. Concepts are abstract ideas derived from empirical facts, and are used to illuminate social phenomena that are not readily visible in written text (Taylor & Bogdan, 1984). I looked for underlying similarities between themes and recurring regularities in the data. When I noted a pattern in the data, I compared quotes to determine if a concept tied them together. Devising categories was systematic work informed not only by the participants' input, but by the aims of my study, my intuition and also my prior knowledge of the phenomenon (Merriam, 1988). During my analysis, I referred to the literature to relate my findings to what other writers have said (Taylor & Bogdan, 1984).

As a final stage of analysis, Taylor and Bogdan (1984) suggest interpreting the data in the context in which they were collected. This means removing extraneous influences, such as my own personal views of the world, and honouring the data. I took into account several considerations, including a critical reflection on how my own assumptions, beliefs and biases influenced the analysis, as well as how the influence of myself (or others') presence in the interview setting may have influenced the data itself. I provided interviewees with a list of the common threads and asked them to assess whether these accurately reflected the experiences they had shared with me. I asked colleagues to read the transcripts and my list of common threads to check for missing items and for bias. These steps are helpful in assessing the validity and credibility of the analysis (Taylor & Bogdan, 1984). In the discussion section, "Out of respect for the women's voices and to reduce possible errors in communicating the thoughts of others" (Reinharz, 1992, p. 9), I integrated quotes from the transcripts with my analysis and connections to the literature, in order to give these women an opportunity to have their own voices heard.

AUTHENTICITY OF THE RESULTS

The results of this study are not intended to be generalizable but rather authentic

and credible. I chose a design that would facilitate interpreting the phenomenon of public smoking through hearing the stories of women smokers' experiences of smoking interactions which were truthful and meaningful to them. In a study of this nature, the investigation can be deemed credible if (a) the readers would recognize the phenomenon of public smoking, if confronted with a situation similar to that of the women studied, with no prior exposure to the phenomenon apart from reading this study and if (b) the study provides interpretations of these public smoking experiences that the women smokers would immediately recognize as their own descriptions (Sandelowski, 1986).

This study examined a variety of ways in which women smokers experience their public smoking. It is expected that other women smokers who read the results will recognize themselves in the study, for their accounts will tend to be similar. The results may be transferable to women with other 'addictive' behaviours such as drug users or alcoholics. What I learned from the stories of the women smokers in this study may be quite similar to what I would hear from women about social interactions that involved the use of a 'addictive' substance or other 'deviant' behavior. Although generalizability is usually informal in this type of study, a depth of understanding of an individual participant's situation can aid in informal generalization (Reichardt and Cook, 1979).

While not representative in the quantitative sense, a woman smoker belonging to a specified group of smokers is considered to represent that group. Her experience represents a "slice of the world" (Sandelowski, 1986, p.32) in which women smokers function. The participants were chosen for their potential to illuminate the phenomenon of public cigarette smoking.

ETHICAL CONSIDERATIONS

I informed the potential participants both verbally and in writing about the nature and purpose of the research. They were informed verbally during our initial discussion of the research and in writing at the beginning of the interview in the form of a letter of consent (Appendix C). Their participation was voluntary, they could withdraw at anytime, and they could refuse to participate in any particular section of the interview. After I transcribed the interview, I gave it to the participant to read. They were able to

approve what had been said and to expand on their stories if they felt important information was missing. I followed this procedure to honour the ethical principle of respect for individuals and their capacity for self-determination (Burns & Grove, 1987).

Informed consent was obtained from the participants prior to their taking part in the study. Each participant signed a consent form at the interview before we began taping. I followed the guidelines set out by the university in its Request Form for Ethical Approval of Proposed Research involving Humans in constructing the form.

During the data collection phase, the identities of the participants were linked to their responses because of the methodology being used to gather the data (taped personal interviews). However, I immediately took steps to protect the participants' anonymity by using a coding system to separate the subjects' name from the data, once the interview had been conducted. No names appeared on the audio tapes and the signed consent forms were stored separately from the raw data in a secure manner (Burns & Grove, 1987). I used fictitious names for the participants' on the data transcriptions and in the reporting of results in the next chapters.

CHAPTER 4

Results of the First Puff

The women I interviewed talked about a wide range of social interactions associated with their early and present day smoking activities. Starting with their first puff, they described interpersonal interactions involved in the process of persisting at, stopping and returning, as well as ending their smoking career. In this and the following three chapters I present, in their own words, examples of smoking social interactions about each of these time frames. The interview questions were designed to elicit social interactions. In the reality of the lives of these women their smoking social interactions are not abstract, but an important and continually evolving part of their everyday life (Taylor, 1994). I grouped comments on interactions into the time frames beginning, persisting, present day, and stopping and/or stopping and returning, and presented the themes that arose from each of these time frames separately. The final part of the interview focused on the participants' perceptions of how they are viewed by non-smokers and how they resist these often moralistic judgements.

This chapter focuses on the first puff and persisting behaviour and is separated from the other time frames because the interview was guided from a video taping perspective and long term memory was involved. Information from this chapter will assist in creating holistic prevention programs, a topic I discuss in the final chapter.

Beginning

In an effort to capture all the face-to-face interactions associated with this first very important step into cigarette smoking, I asked the participants to pretend they were videotaping the event. Most, 19/22 were able to easily describe this moment and I used the information from these stories to further my understanding of the phenomena. The following patterns arose from the data created by these narratives.

It was clear from the comments of the participants that their first puff on a cigarette was an important social event. *Madeline* summed it up by saying "there was a kind of excitement about having your first cigarette and being able to say that you just smoked. All I remember is walking away feeling that I had really accomplished something". Most of the women I interviewed easily and fondly remembered the act even if it took place more than forty years ago. They often laughed as they talked about this occasion and usually included plenty of detail in their descriptions; "it was foggy", "it was summer", "there was snow on the ground". For their first puff the participants varied in age from eight to thirty-two with the most common age being eleven. From this writer's experience with the data, a typical profile of the participants' beginning smoking behaviours shows "cool", eleven-year-old girls, all cuddled together, bonding and sharing and is an important point of entry in the social construction of a smoker. The first puff of a cigarette was a memorable, exciting, intimate, social occasion according to these participants.

A consistent feature of the first occasion was the presence of others. (*Hannah*, was a kind of an exception that was not really an exception, in that she smoked her first cigarette in front of a mirror, she said "I took one of my mothers cigarettes into the bathroom by myself and was mimicking her and watching myself in the mirror". (This implies a virtual other was present). *Andrea*, *Toni*, and *Jane* could not distinctly recall their very first drag, but they remembered they were not alone at the time. All of the women described their initial smoking experience as including one or more persons, usually female. One of my assumptions was that most women would have experienced their first puff in a similar manner as I did, with a male, and that males would be highly influential in their persisting. My data did not agree with this assumption.

As well as involving another, much of the talk describing the first puff centred on the physical closeness of the smokers. The intimacy of this moment was described by many of the participants. Statements such as: "we were huddled together", "there was a group of us", "(I) sat on a couch with a bunch of people", there was a "bunch of us girls and guys in this little alcove", "(we'd) sit in the washroom and smoke, all girls", and "we were all sharing it (the cigarette)", mark the physical closeness and sharing that took place.

Pat's first smoking incident highlighted this point, "we took these cigarettes and we went into this little cave, it wasn't very big, it was only big enough for two of us to squash in there. We shared the one cigarette".

Four women talked about beginning to smoke with family and extended family members.

Anne: My sister, three years older, was smoking and she desperately wanted to tell someone that she was smoking but was afraid I'd rat her out so she made me have a cigarette while she told me about it. We stood face to face and she told me she had a secret she was going to tell me but she was only going to tell me after I had a cigarette.

A participant named *Bess* also had an older sister play a part in her first cigarette:

My sister coerced me, she said 'Do you want to go and do some thing bad?' and I said 'Sure' so I followed her and we went to this sports area where we used to hang out and she had a package of cigarettes and she said "we're gonna smoke" and I said "okay" and we did.

Elise: "My niece got them and handed them out to all of us, there was about five of us, all girls, a couple of friends and my sister". *Rita:* "I had one of my cousins, my brother and sister and a few of my friends over and we stole some smokes off of my dad and that's what we were smoking".

Often the act was perpetrated by the participants and their best friends either spontaneously or planned and they began their smoking career together:

Carrie: This girl, who was the first girlfriend I ever had, I use to be a real tomboy, and her friend, we were out running around in the fields and one of her friends, whose parents were both smokers, had a couple of cigarettes with her and "hey, let's smoke these."

Sharon: Me and my best friend were alone at my apartment, we dressed up really crazy, we put like tons of makeup on, did our hair really wacky, dressed in wild clothes and then, my sister smoked at the time, so we got a cigarette and we went on the balcony in these crazy whacked out clothes and lit it up.

Jane: "I was with my best friend Angela we were in the grandstands around Beacon Hill Park and I had stolen some cigarettes off my mom and we went and smoked them".

While peer pressure is often cited as one of the main causes for starting smoking only three of the twenty-two women said they began smoking in an effort to become part

of a particular group.

Amanda: I had a hard time fitting in and I felt that the only way I could fit in was if I went and had a cigarette with them, the popular girls. Only while we were smoking the cigarette, I could associate with somebody. I wanted to fit in somewhere.

Lisa: I was wanting to do something to fit in, it was something different. I was definitely an oddity, I was in a very upper middle class school which was mainly Anglo Saxon and I was from an ethnic background so I was a bit different and my name and colouring was different.

Darlene: I was working at a trail riding stable which also functioned for a foster home for girls, a lot of tough girls there, it was part of the whole peer pressure of being one of the other trail guides.

A big feature of the first puff was how the participants purposely mislead others in order to partake. Plenty of surreptitious behaviour accompanied both the procuring and smoking of cigarettes which created further closeness and titillation. The more deceptive, the deeper and more serious the bond (Brody, 1970). Many of the participants planned their first cigarette, sometimes they stole to get it, and used toothpaste as a cover-up.

Elise: "After we finished the first one we were scared, washing up, brushing our teeth, so they wouldn't smell it on us". *Morgan:* "We snuck down the trail, took toothpaste wrapped in toilet paper and we split a cigarette. We ran back to the house, washed our hands and that was it.

Janet: My initial instance is, I can picture my grandfather, elderly in a chair, and behind him on the bookcase was a carton of cigarettes, Sportsman Plain with the little fishing lure. I can remember going in behind him and taking a cigarette package and then sort of moving the other ones, they were on their side, sort of moving them so it looked as though I hadn't taken one out. There was always a feeling of sneakiness around that, stealing from my grandfather.

The location of the beginning smoking rituals was generally talked about because of its privacy status, "caves", "little alcoves", "behind the portables", "down in the basement" were the sanctuaries for this nefarious behaviour:

Amanda: "Behind the backstop, in the bushes behind the school". *Carrie:* "We were hiding in some little bit of the bush, hoping no adults were on a walk. We'd go off and hide behind buildings or hide in little spots in the woods around the school".

Although the first puff stories from these women spanned a forty year period, the themes that arose out of this occasion differed very little: It was an intimate, exciting, titillating, rebellious, bonding occasion recalled with affection and humour.

Talk about early smoking days often included the statement "it was cool". Referred to as the 'in crowd' or the "cool" kids, the smokers were a cohesive unit and they did set themselves apart from others. The definitions these women provided for 'cool kids' and 'in crowd' varied little over time and included the following: "it was the smoking group that got together between classes" (1956); "if you smoked you were accepted by the crowd that was probably a lot less desirable to our parents"(1958); "they were the rebels absolutely"(1958); "they were the bad girls" said with laughter (1982); "the kids who were popular, weren't teased, who were accepted and welcomed within the group of kids" (1987); "the cool people all smoked and hung out at the smoking doors and if you didn't hang out there, there was really nothing to do" (1988).

Persisting

After the women had described their first puff, I would ask them "how did you go about persisting at smoking after this first puff?". For all of these woman, this first puff eventually lead to their buying cigarettes and smoking on their own. The time between the first puff and solitary smoking was anywhere from a few weeks to several years after the first puff. I found it notable that the talk about this gradual process began with the pronoun we, which was used to describe their first puff and early smoking days, "we use to just have them whenever we could get a cigarette", and would change to the pronoun I as soon as they started smoking on their own, "By about the summer before high school I was buying cigarettes." So while first puffs and early smoking days were always inclusive of others, eventually all these women began solitary smoking and purchasing cigarettes.

Persisting at smoking stories included more talk about stealing. Grandfathers were not the only target for these young thieves; sisters, brothers, mothers, fathers or both

parents could have their cigarettes pilfered and if smokes were not easily available from these sources, spare change in dad's pocket or the grocery store fell prey to these small but light-fingered adventurers:

Amanda: It was not a big deal to go into your dad's pants and steal a quarter, he'd never miss it. I mostly just stole the odd cigarette and then I moved into the big time and started stealing the money to buy cigarettes or stealing packages but at that time we were all experimenting and we had an agreement that somebody would go in there and steal a package of cigarettes and we ended up all stealing a pack of cigarettes and we got caught. There was like four packages of cigarettes missing out of the carton.

Only one of the participants actually spent time in prison for theft (more than cigarettes) even though the majority of these women admitting to stealing cigarettes. Two women are still in the closet when it comes to smoking in front of their parents, one of them is a grandmother herself. Persisting at smoking sometimes involved having a boyfriend who smoked; for these women early smoking included mainly female friends.

CHAPTER 5

Results of Present Day Interactions

The information about present day public smoking, was gleaned from a series of open ended questions about the face-to-face conversations and communicative behaviours involved. See Appendix B for a list of the questions that were available. I consistently began this section with, "Who is the best smoker you know?" The rest of the questions flowed from the interview and were not necessarily presented in the interview in the order in which they appear. I will present the themes that resulted from each question separately. The women who were not at present smoking could choose to answer these questions about their past smoking and not all of the women spoke to all of the questions, it was definitely their choice. Before each question listed in Appendix B, I indicate how many women out of the total twenty-two interviewed made reference to the question.

Present Day

Cigarette smoking has received plenty of negative talk and new government policies are banning smoking in an increasing amount of places. Perhaps, as a result of this context the question, "who is the best smoker you know?" caused plenty of laughter, usually needed to be repeated, and was followed by "what a dumb question", or "what do you mean best?" which I would counter with "it's what you mean as best". Although most of the women commented on the fact that they had never thought about smoking in this way, many were quick to answer. There were two types of answers to this question, the most popular one centred on style, while the other had to do with the amount smoked.

STYLE OF SMOKING

Eight women mentioned style as a factor in being the best smoker. "A person who looks like they're really enjoying it," was the most common comment of these women.

Amanda's best smokers were her parents, "I idealized my mom and dad, I thought they were so cool when they smoked." Other best smokers included statements such as "glamorous Hollywood star, cigarette and bright red lips, glamour lady."

How well people perform smoking or creatively prepare the cigarettes also plays a part in being considered the best. *Morgan* decided the best smoker she knew was her girlfriend: "since she smoked since she was 11 she knew how to do it perfectly". *Hannah* said "the most interesting is (a girlfriend), she rolls her own and has a little twist on the end". *Lisa* recalled how "recently I met a woman who can roll the most amazing rollies and I think that's a good trait, a very talented smoker, I'd say she's pretty good."

AMOUNT SMOKED

The theme of amount smoked had opposing ideas that split into time frames. Women over thirty-five said the best smoker smoked the least while younger women said the best smoker smoked the most. Five women believed that the best smoker is one who smokes the least, is controlled about their smoking and smokes mainly "if the social situation indicated it". *Pat* talked about a friend who "has one cigarette a day at ten o'clock at night and has done so for years and years" as the best smoker she knows. The best smoker according to *Janet* was "a friend, because she has control over it. She doesn't have to smoke during the day and she chooses not to. She feels it's a time waster yet when she goes out in the evening she will smoke." *Andrea* specified " a friend who smokes three to five cigarettes a day and has done for 20 years" as the person she would consider the best smoker. *Rita* said "my boyfriend because he doesn't smoke that much unless he's drinking."

Three women stated that the best smoker they knew was one who always had cigarettes, smoked a lot, and who had been doing it for a long time. *Bess* told the story of her best smoker as follows:

a girlfriend I had was an avid smoker. She'd get up in the morning and light a cigarette first thing, she loved her cigarettes. She smoked with everything, she'd be ironing, she'd smoke, there was a cigarette attached to every event. I always thought of her as a real smoker because she just loved it and she smoked all the time.

Jane's story was similar, she said:

my best friend, she's a couple of years younger than me, but she always been the bad girl, she was a punk rocker and all that and she's smoked since she was about ten and she smokes Dunhill and special blend and she can walk up a mountain with a cigarette hanging out of her mouth, not even breathing hard, and I'm behind her gasping whether I'm smoking or not. She's the best smoker I know, she can smoke doing anything and it doesn't seem to phase her one bit. She'll probably live to be a hundred.

Elise decided her dad was the best smoker she knew because:

he's smoked all his life, right from when he was a teenager, even though its bad for his health he still smokes. He always has them, all the time and he'll share them with me, anytime I want a smoke he'll give me one.

The best smoker, according to these women, looks like their enjoying the act, is likened to an idol who knows how to perform smoking perfectly and either smokes all the time, if she's younger, or hardly any at all, if she's older.

FROM "UNNATURAL AND STUPID" TO "KATHERINE HEPBURN"

Style, according to these women had to do with three different themes: how they went about the act; how they felt in relation to others while they were smoking; and how they looked performing smoking, as a reflection of their smoking idol. Five women described their style in terms of how they go about smoking. *Pat* considered her style as:

a mooch. Having started so late I've never really reconciled the fact that I am a smoker, so I'm great at bumming cigarettes cause that way I can pretend that I'm not buying them and it doesn't really count. Sort of like when you eat cookie crumbs and you don't have any calories.

Letty said her style is "individualistic" and *Sky* called her style "sporadic, conservative." *Lisa* talked of her style as "chain smoking. It was sort of like binge smoking, I would smoke one and have to have another automatically." *Andrea* called her style the "dragon lady...good lung capacity, draws so hard can blow out a big cloud...an aggressive smoker."

Five women spoke of style with reference to how they feel about themselves when they're smoking. *Elise* stated "I feel funny sometimes, smoking in public or around my family". *Sharon* said her style is "awkward, cause I don't feel comfortable doing it, so I

think I reflect that". *Margie's* style was "uncomfortable, I feel guilty when I smoke, I'm always kinda looking over my shoulder checking to see if the kids are watching." *Morgan* felt "unnatural and stupid, never got the hang of sexily flicking the ashes or whatever" and *Hannah* was just plain "nervous".

Two of the women described their style as "deceptive" and both talk about how badly they feel for deceiving. *Jane* said:

I'm a closet smoker. Lately I've come more out of the closet cause I feel so bad, cause I do it on and off and then, if I'm not, people know me when I'm not, and then when they see me smoking they say 'Oh, your smoking now what are you doing and vice versa.' Yeah, I'm a lazy smoker for sure.

Janet described herself as:

sneaky, it's not so bad now but I still feel badly about it. I have spent probably 15 years quitting and assuming that my husband thinks I've quit and then I have sneaked. I've walked the dog, fed the ducks, watered the garden, gone for walks and always sneaking even just a couple of drags.

Three of the participants described their style with reference to someone else's. *Bess* said her style is like that of "Katherine Hepburn. I got her bio and there is a neat picture of her sitting there with a cigarette and it looks cool (cool means she looks sophisticated)." *Anne* described her style as "hard core, rough smoker. I don't smoke elegantly. I don't get all dressed up and glamorous looking and then go and look witty and intelligent and smoke a la Dorothy Parker, I'm a ragged smoker." *Bobbie* called her style "glamorous, enjoy having bright red lipstick on the cigarette, people would know mine because of the red lipstick."

These women described their style of smoking in three different manners: (a) how they performed smoking; (b) how they felt about themselves or others while they were smoking; (c) how they looked while they were smoking in comparison to someone whose smoking style they admired. These descriptions added to the importance of others in creating smoking style.

"I THINK I SMOKE MORE LIKE A MAN DOES"

My experience in watching women smoke, is that all of them hold their cigarette in a similar way, between the index and middle finger, often balancing it with their

thumb. They use either hand, in the same manner, but favour the one they write with. Often the elbow is bent and the hand, with the cigarette, floats in an area about four inches from the side of the face, parallel to the mouth, until the participant is ready to puff. The open palm, which holding a cigarette in this manner effects, is described as part of the body language of desiring affiliation (Schefflin, 1974). It is my belief that an awareness of how you do something is important if you wish to stop doing it. Some men I have observed, hold their cigarette differently from women but similar to each other.

During all the interviews with present day smokers, we would both smoke during the interview, and I would know we were holding our cigarettes alike when I asked “who else holds their cigarette the way you do?”. Four of the women answered either “lots of people” or “the interviewer” in response. Two participants believed they held their cigarettes like their mother and two others stated they held their cigarettes similar to another woman either a sister or a close friend.

Five of the interviewees felt they held their cigarettes like a man either a brother or a boyfriend, *Amanda* expanded on this idea by saying “I think I smoke more like a man does, I am quite masculine about it I think, more than a feminine thing, I don’t think I find smoking a feminine thing”. None of the women who thought they smoked like men held their cigarette any different from myself or each other and definitely not like the male characteristic I have observed of holding the cigarette between the thumb and index finger, palm closed and flicking it with the middle finger. *Janet* and *Margie* both said that they didn’t pay any attention to how they or anyone else held their cigarettes. Many of the participants did not realize how similarly they held their cigarettes and referred to specific interpersonal relationships to produce meaning for their actions.

“COMMITMENT FOR MEETING MY OWN NEEDS”

Ten of the women described themselves as committed smokers. *Andrea* expanded on the committed theme by saying:

funny words, I think committed smokers buy lighters and cartons and I won’t, their is no doubt I’ll drive, will go anywhere and under any circumstances, to buy a pack of smokes. I’ll get up and hit the instabank in order to drive two miles to 7-11 to pay \$8.00 for a pack of smokes. Commitment for meeting my own needs is tremendously high, never thought about myself as a committed smoker.

Anne stated:

smoking isn't something that I'm casual about. When I'm smoking I'm completely smoking and I'm a smoker. I know when I'm a smoker and I know when I'm not. It doesn't have anything to do with whether I've got a cigarette in my hand, it's that I've had a cigarette. Until I consciously quit and become a non-smoker again, I'm a smoker, I'm a committed smoker.

Elise considered herself; "more committed than casual, (but) I try to be casual to save on expenses."

Four participants called themselves definite casual smokers, those who smoke mainly if "the social context dictates it". Three talked of being both, as in "casually committed", and "committed, casual, I'm very casual but I can't seem to give it up, so I'm kinda committed". *Pat* emphasized this position saying, "I would like to think that I was a casual smoker...I don't know that I would consider myself a committed smoker but my family probably would".

REWARDED RELAXED "QUALITY TIME" THAT'S "COOL" INDEPENDENT AND "SHINY"

Eight women talked about their favourite cigarette being after something. Examples included "after supper", "after the kids are in bed", "after work", "after sex", "at the end of the day with friends". Only two women stated their favourite cigarette was before something, *Elise* said "before bed" and *Margie* was most specific by saying "before I swallow my last bite of supper, have the cigarette lit up, take a drag and then swallow it, it's my favourite, always has been". Five women mentioned "first thing in the morning" or "at morning coffee break" as their favourite. *Rita* and *Andrea* said they don't have a favourite cigarette of the day. The majority of these women reward themselves with a cigarette after they have completed some other task and this is thought of as their favourite smoke.

Nine of the participants mentioned "calming, relaxing and something to do" as the appealing part of smoking. *Morgan* said "it's something to have in your hand, worried, fidgety or anything, I'd pick up a cigarette to relax, almost for something to do". *Pat* said "I'll smoke if I get wrought up or whatever and it tends to calm me down". *Letty*

talked about the appeal as “the calming effects it has, being in a relaxed state, it’s the drug”. *Janet* stated that:

probably nothing (is appealing). I’m addicted to the substance, I know that because I crave it so much in the morning and I’m bitchy until I get it. I find it very relaxing, I feel fidgety at times when I’m due for a cigarette and I’m always thinking of it at that point and it is very hard to get rid of that thought.

Bobbie said it appeals to her because “her belief system says it’s a stress reliever”. *Sharon* finds “it’s fun, I don’t know, I enjoy just having a cigarette and mellowing out. I guess it’s cool though I’m starting to doubt that”. *Elise* mentioned the appeal of the calming effect “it settles down my nerves when I’m around kids too much and they’re noisy”. *Amanda* expanded on these themes by saying:

the idea that I have that it’s a relaxing thing to do. I have that idea in my mind that if you sit down to have a cigarette, that it’s a relaxing thing to do and it justifies you sitting down to relax so that it doesn’t seem like I never do. It’s contradictory, the idea that it could perhaps be relaxing but it isn’t. If you want to look at the true reason for going outside in the first place, it’s to escape what’s going on in the inside, it’s not for the cigarette, it’s for the escape. You can always tell your kids get in the house, because you don’t want your kids around the smoke, so, ‘you get back in that house until I finish my smoke’. How would you do that if you didn’t have the cigarette? I couldn’t, I couldn’t justify it. It appeals to me to be able to escape whatever is going on in the house, if I don’t particularly care for what’s going on in the house, my kids fighting or whatever, I can just walk away for a minute and justify it.

Andrea added a sense of independence to her appeal:

I like to know I can make my own choices, I like to know I can take care of myself. Sitting around the table and enjoy what I’m doing when smoking, more than the smoking, maybe it’s just an excuse to sit down and talk to people. The friendship and communication that comes from it especially now, your all bad and your all outlaws and you’re out the back of some building and its just the two of you, it’s so friendly, lots of laughter, feels like non-smokers are definitely missing out. (Smokers) have a camaraderie, we’re fighting the same thing, I don’t know what it is, its the establishment, its saluting, its a way to not salute really clearly.

Three women mentioned the packaging as what appeals most to them. *Madeline* said “I think it was the packaging that attracted me more than anything, Rothmans, Matinee, I’m sure I tried them all.” *Bernice* liked the “little boxes and shiny foil paper.” *Lisa* expanded on the packaging appeal:

I think that I was drawn to the packaging. I switched from smoking very generic DuMaurier to Belmont Milds which had the charcoal filter, a very nice simple package and tasted very nice, never sort of gave me a raunchy headache or American cigarettes which I really liked the packaging as well, the soft packs. The thing I like the most would be the combination, it's a very nice way to complete something and to tie something in. Nice feeling of having a cigarette and something to do with your hands. I like the taste, the feeling, the gesture, the whole thing I guess.

Three of the women find their appeal in a combination of smoking and conversation *Jane* said:

It's a habit, it's more the conditioning, I'm stimulated by my surroundings in that way so when I'm at work and everybody is smoking around me and I'm out in the bush and it's rough I'll smoke, usually when it's cold outside or when I'm drinking. I think it's a social thing too, when we're in the office we'll say let's go have a smoke, let's go hang out, another term for that. If you sit down and have a smoke with somebody it's like spending quality time together.

Sky talked explicitly about how smoking adds to a conversation which she finds appealing:

during a conversation it (smoking) gives you time so you can think before you talk, gives you time to ruminate. It adds apostrophes and question marks to situations that wouldn't be there maybe if you were free to speak at every single moment.

Everyday conversation has silences and it depends where these occur as to how they get treated. Research has shown that participants' perceptions of communicative competence and the viability of their conversation is related to the way they manage conversational silence (Nofsinger, 1991). Smokers may use smoking as part of the way they manage their conversational silences and therefore find more communicative competence talking with other smokers.

My observation of smoking dyads revealed many similarities with respect to the use of the cigarette, the light, and the smoke itself as conversation contributors. Locating and getting the cigarette ready to be lit can be part of a conversational silence or can create one. Lighting up is always a silent time for the puffer and is generally a sequential (first one, then the other) behaviour that stops both parties from speaking until both cigarettes have been lit. If they are sharing a light, the smoker's hands may touch each

other during this lighting-up process and add further intimacy to the conversation. The smoke is often blown out forcefully and/or in a specific direction in order to emphasize a feeling or a verbal point. Butting out can indicate other conversational nuances, such as the talk (break) is over or that intense emotions such as frustration or anger have been aroused. In the latter case the smoker will pound the cigarette into the ashtray with short powerful strokes. These reciprocal communicative behaviours, performed so smoothly as to be invisible, are what I call “the smoking dance”. When asked to go on a smoke break, the smoker can usually count on a 10 to 15 minute dance/encounter as walking away in the middle of a cigarette is an unusual occurrence.

Anne finds smoking appealing because:

it gives me time to catch my breath. I’m really conscious of the fact that when I smoke I breathe very deeply. So that’s a really big part of it. I think that’s why I do it when I tense because I forget to breathe. So when I have a cigarette I take a long deep puff and feel it just suck right into my belly.

Rita and *Hannah* found nothing appealing about smoking, *Rita* just does it and *Hannah* said “nothing really other than the addiction part”.

Many things about smoking appealed to these women; the ‘idea’ that it relieves stress, the part it plays in conversation and enjoying other social activities such as drinking alcohol and meeting new people, the independence and rebellion it shows, the attractive packages, the private time and break time it facilitates and its helpfulness in controlling breathing.

YOU WERE KIND ENOUGH TO LAUGH ABOUT MY JOKE

I BUMMED A SMOKE TO HIDE THE WAY I FELT

‘CAUSE I WAS READY TO MELT - Lyrics to “You” by B. Snider

Twelve participants believed that smoking was helpful to them at parties or social gatherings. Their reasons varied but generally centred on having a common ground with strangers. *Pat* emphasized the helpful aspects of smoking saying:

it’s one way of getting to meet people or whatever, the smokers all tend to have to go outside and so there’s a group of people there and your sharing your nefarious behaviour. I’m being bad out here. It is a very social thing I guess that’s back to the appeal question that’s a little bit of it, that it is social.

Bobbie talked about the social interaction of smoking, "everybody lights up and we're sharing, it offers security in a social situation". *Sharon* said, "it's a good way to meet someone, go up and ask them for a cigarette or offer them one". *Rita* talked about this aspect also, she said smoking is helpful "at parties, you can meet new men by going up to them and bumming a smoke or a light".

Maybe if you want to think about it, on a social level, it could help you just by feeling the same way, like bonding, because when you're in a social environment you want to bond with a couple of people here and there, you go and talk and stuff and then you go have a smoke together, it's like a bonding thing, was *Jane's* approach.

Bess felt that "it goes good with a drink and its part of the ritual."

Four of the women who found smoking helpful at parties or social gatherings focused on smoking as giving them something to do. *Lisa* said she definitely found it helpful, "it was easy to sort of give you something to do, focus your attention. Just the physical action allows your mind to wander and to contemplate, so it was very meditative". *Andrea* agreed with this idea by saying "you can use it to have something to do, get nervous, its something to do next, cause for a pause". *Amanda* said "it's crucial actually, it gives me something to do with my hands, I feel awkward". *Janet* felt the same "it gives me something to do with my hands, seems to fill in gaps between conversations. Its not so much being part of the group anymore because so many people don't smoke

Sky said it is important for her, "especially in new situations, it kind of sets you apart, you can be apart a little bit from the general thing that's happening and it kind of puts a distance between you and what's happening so you can get into it slowly". Similarly, *Morgan* said, "it helped me because all my friends didn't smoke so I could be outside having a cigarette and I didn't have to worry about anyone looking at me or what to say or anything, cause I had smoke going out of my mouth. I can't talk, I'm smoking".

Four women decided smoking was not helpful for them at parties or social gatherings. *Elise* expanded on this by saying "it gets too smoky sometimes at parties, like your inhaling all this smoke of theirs". *Hannah* said "it's not helpful at parties or social gatherings now because its so unacceptable". *Anne* said "not anymore, god were pariahs, its only helpful in social gatherings to find another pariah. You go out onto the balcony

and up to the patio and hang off of the back and you see someone else doing the same thing and then you've got something to talk about".

Margie was different she said, "I find it's something I don't have to think about, I just can do it. When you get into a good situation that's probably the first thing you do is light up a cigarette".

SMOKING PARTNERS AND CLOSE FEMALE FRIENDS SHARE MOST SMOKING MOMENTS

All of the women who had a mate that smoked, (five participants) smoked the most with that person. *Elise* said she smokes the most, "with my husband and my sister-in-law. Every time I go there we sit and have a smoke, we sit around talking, smoking". *Sharon* said she smokes the most with a couple she knows because, "they're chain smokers and when I'm not around them I don't smoke nearly as much but since they smoke so much I tend to". (She is not *Elise's* sister-in-law.) *Andrea* smoked the most with, "any friends, like my whole family for sure, who still sit around the kitchen table and talk about the world and what's going on and drink tea and smoke cigarettes, anybody who likes to do that kind of socializing". *Lisa* said she, "smokes the most with myself or circle of friends. Smokers tend to attract smokers so I smoke with both my girlfriends and male friends". *Janet* added to the attraction idea, she smokes the most with, "women generally. I tend to think I might choose friends because of my smoking habits as well as many of my friends do smoke".

Like *Janet*, the majority of the women said they smoked the most with other women. Eight of the participants made reference to this question by mentioning one specific other women, whom they smoked the most with or close girlfriends. *Anne* added to this by saying she smoked the most with "female friends who are in and out of my life on a daily basis, not like a professional thing or a casual thing. Having a cigarette is like taking time to be with somebody". Similar to their first puff, most of these women still smoke the most with other women who are important to them.

"IT'S FUN TO BE IN THE GROUP THAT GOES OUTSIDE"

Ten women said they preferred to smoke with others. *Bess* added that she

“usually smokes with others, if my husband is not around I don’t smoke as much”. *Pat* said, “prefer, probably with others just cause of the whole social thing”. *Morgan* agreed “with others, it’s more fun”. *Margie* added “quite often, if I’m by myself, I won’t even think about it, it’s when I’m with other people, it’s the social thing definitely”. *Lisa* stated that “for a long time with others and then I sort of got into it on my own”.

Four of the women said they have no preference between solitary or public smoking although *Hannah* said, “It’s fun to be in the group that goes outside, its like you’re doing something illegal. The social part is fun because the smaller group breaks away from the bigger group and you seem to laugh a little more and that because your all out there freezing or whatever”.

Three participants preferred to smoke on their own. *Elise* said, “on my own cause I don’t like being around the smoke too much or the smell of the smoke that gets on me”. Of the seventeen present day smokers who made reference to this question, the majority, ten, preferred smoking with others.

“I WOULD NOT GO TO A NON-SMOKING RESTAURANT”

Twelve women said smoking had a lot to do with who they hung out with and where they went. Eight of these twelve mentioned not going to restaurants where they couldn’t smoke. *Lisa* explained it this way:

It definitely dictates a major part of your social group and social setting. You wouldn’t go to cafes that were non-smoking. I guess it becomes routine and we develop patterns and just sort of automatically go to certain places that you feel comfortable smoking. You meet a lot of people smoking, its a very social activity and you get put into the outskirts of a social situation. Like your pushed outside to smoke or your pushed to a specific room or outside in the winter having a cigarette, great people, who I would never have met otherwise. It becomes a common ground that at times becomes frowned upon in society so it relieves that sense of alienation to find someone else who has a common vice and feels great about it.

As far as who you hang out with, *Elise* put it this way, “ I hang with my sister-in-law cause she has smokes all the time and my other sister she don’t smoke, so I hardly go see her”. *Janet* said, “it has a fair bit, I hang out with both smokers and non-smokers but I would not go to a non-smoking restaurant”. *Amanda* said, “Oh, lots to do with it. I mean

everybody that goes for morning coffee pretty much all smoke. If I weren't smoking I couldn't go there, it makes a big difference". *Anne* said:

It has a lot to do with who I hang out with I guess. I really notice it because after six years of non-smoking most of my friends are non-smokers, so I really do feel banished a lot of the time. I'm aware that when I'm with those people that smoking is frowned upon and it's not something that you can actively do and enjoy around them because their always nit nit nitting at you. I'm conscious of it when I'm in a restaurant that is non-smoking. It doesn't mean that I won't go their but I'm conscious of it. If I'm on my way to one of these places I'll have a cigarette on the way because I know I can't smoke once I'm there.

Margie stated, "it (smoking) dictates the restaurants you go to, it dictates who you feel comfortable being with". *Morgan* said, "if I'm with friends that don't smoke I could find a way to smoke." *Bobbie* said even though she smokes less when she hangs out with people who don't smoke, "I enjoy being with people who smoke because it gives me permission to smoke. I hate going to someone's house where you cannot smoke but I'll do it".

Four of these twelve women added to the idea of whether smoking has anything to do with who they hang out with or where they go, in unique ways:

Andrea I am reluctant to go to peoples houses where I can't smoke for a committed length of time. I would prefer a man who is a non-smoker cause I want to be the only person who smokes, so no one would bum and then I would slow down. It's easy to hang around people who don't smoke and not smoke.

Pat It has certainly something to do with who I hang out with. (My friend) quit smoking and so it's been hard to be around her because she can't stand being around the cigarette smoke, so I don't hang around with her quite so much as I use to since she quit smoking.

Sharon A lot, definitely. A few weeks back I climbed Mount Tzouhalem for a few days and didn't have any cigarettes and I didn't even notice that I hadn't smoked a cigarette for three days until I came down. There, was no one around and I didn't feel the need to.

Hannah A lot to do with it because it's not being accepted, so I would feel uncomfortable and I just wouldn't smoke, but I do know if your going somewhere and there's somebody in the car that smokes you go 'all right, this is okay, I'm relaxed' so you prefer to go with those people and go to places that you can smoke rather than others.

The above information is very important if you are considering stopping smoking. If your close friends find out that you have stopped, they may feel uncomfortable around you and will not choose to hang out with you as much or come to your house for visits. When you finally do get together, your conversation may feel artificial and unfamiliar as you won't be playing your part in "the smoking dance" and they may be so worried about the smoke bothering you that the viability of the conversation will suffer. As important relationships are an essential part of any support system, this part of the withdrawal from a smoking lifestyle can be threatening. If not recognized as a critical part of the letting go process, the discomfort caused from these communication breakdowns could be attributed to the drug nicotine itself and further its reputation as a controlling agent.

Four of the women said smoking had very little to do with who they hang out with and where they go. *Jane* said "smoking doesn't effect that much who I hang out with or where I go. I go to the bar to play pool." *Letty* said it "does not interfere with who I hang out with but I prefer to visit homes where I can smoke. *Sky* said "it will affect where I go when I'm with others who smoke but not by myself". She will hang out with both smokers or non-smokers, but will not smoke in a new social situation until someone else does and will not ask.

"HAVE A CIGARETTE AND HAVE A CHAT. IT'S ALMOST AN INTIMATE THING"

Five of the interviewees mentioned how smoking fit into their relationships as part of a conversation. *Jane* said, "Every time we are around each other we smoke. We meet, light up, sit down and start to gab". *Morgan* added, "I would spend more time sitting and talking and smoking, (I) still have better relationships with people who I smoked with than friends I didn't, even when I'm not smoking". *Anne* repeated this idea:

When I'm visiting with somebody who is a smoker I find that sort of a cosy thing. You sit and have a cigarette and have a chat. It's almost an intimate thing. I feel very subjected to disapproval with my non-smoking friends, again it doesn't feel as intimate, if your not accepted when you smoke, you're not accepted.

Bess said "it's a ritual thing, when I quit it was hard to be around smokers, they respect that I've quit but it just makes it more difficult for me to quit if (friend) is still smoking and were doing the same things hanging out and talking or whatever. *Hannah*

believed that "if friends smoke it is more of a relaxed rapport".

Bobbie said not all friendships involve smoking but it is a common ground with smoking friends, 'are you still smoking? yeah...great' then laugh together. *Pat* and *Amanda* said it fit into their friendships because "it's the social thing to do" or "it just does (fit) cause everybody smokes pretty much". *Letty* stated, "it doesn't matter" and *Sharon* felt, "it can sometimes be a pain because a lot of the time none of us has cigarettes and were all like scrounging and bumming off each other and you know it's sort of kept track of and other times it's no big deal". As far as new friendships are concerned *Margie* said, "it wouldn't deter me from having a friendship with somebody if they didn't smoke, its not the be all, end all, if somebody wasn't smoking perhaps I wouldn't smoke around them".

Cigarette smoking is a form of communication in most of the friendships of these women. It communicates time-out, conversation time or quietly being together in close relationships. These women would stop other activities in order to partake in smoking behaviour and conversation, often breaking off from the larger crowd and relocating the smaller more intimate group to a smoking designated area.

Eight of the participants simply said that it was not important to smoke to be part of their group. Four others believed it wasn't really important but added statements such as "it makes it easier for me to smoke if all in the group smoke". *Amanda* added that, "it's not important if they don't smoke to be part of my group although if they choose to be there and they whine about the smoking, that pisses me off. I don't like that. You come there knowing full well what's going to be going on, why complain about it. I just don't like whiners that's all". *Hannah* said:

it's not important that people smoke to be part of my group, I can accept anybody. However, if I was to join a group of non-smokers I might feel uncomfortable. I am a shy person I would not walk into a group and pull out a cigarette and not give a dam. I am very conscious about what people think about me and I respect their feelings.

Lisa said it's not important. "You become more accepting, not smoking doesn't really effect me whereas smoking can effect someone else".

Two of the women said it was important, *Elise* remarked, "I sort of feel funny smoking around them if they don't smoke. I try to cut down when I'm around them. I

have one before I go see them and then sit with them for an hour and not have one, have half and put it out". *Anne* added to this by saying, "I'm just aware of a real dissonance there when I'm with a group of people when some of them smoke and some of them don't. I'm aware of which way my cigarette smoke is going so I do gravitate towards people who are smoking".

Women smokers are an accepting bunch. You can join their group if you don't smoke as long as you don't whine about their smoke and don't mind if they get closer to each other than to you. If you don't smoke and feel that they are distracted or not listening to what you have to say, it could be they are worried about the direction of the smoke more than the content of your speech. These women smokers are extremely concerned about their smoke bothering other people.

"I DECIDED NOT TO BE A LESBIAN AND TOOK UP SMOKING"

Because of the power differential between the sexes and because of my own experience, I thought the participants would have a different relationship with men and smoking than they do with women and smoking. As most of the participants had male partners I wondered how/if at all, smoking played a particular part in that relationship. Nine of the women I interviewed felt smoking had a problematic part in their relationships with men. One woman in fact blamed men on her persisting at smoking, "it's all because of them (men) that I started again, well like I said before, I decided not to be a lesbian and took up smoking. That's my option over men". *Letty* said "it's a hindrance to be a smoker if they do not smoke". *Sharon* expanded on *Letty's* idea by saying "it's pretty major when they don't, my longest lasting relationship was a non-smoker and I tried to quit for him and he really wanted me to, but I couldn't do it. I tried and tried. He was totally repulsed by it and said he would even consider ending the relationship because of it, it was a pretty heavy issue." *Anne* was a non-smoker when she met her present non-smoking boyfriend. she said he:

is allergic to everything and asthmatic and he disapproves grievously of it. It becomes a real source of contention. I can play along with it for awhile and then when things get tense I want a cigarette. My reaction to tension is having a cigarette and his reaction to tension is 'Oh Jesus, now your gonna' have a cigarette'. It becomes a real issue. I have to admit because I haven't been smoking

for years I wouldn't go out and find somebody who smokes. I wouldn't be thrilled to go out with a smoker.

Margie agreed on how problematic it can be:

My first husband never smoked, it was always a big bone of contention. When I met my present husband one of the first things I felt good about was 'good he smoked' and about four months later he quit and he hasn't smoked since, many years later, he is going to grind his teeth right off but he won't say too much.

Janet talked about a long-term relationship and the problems smoking has caused:

It has a great effect on my relationship with my husband, particularly our sexual relationship because for years when I was sneaking I wouldn't go near him if I thought I smelled of cigarettes so I wouldn't kiss him, I wouldn't hug him, I would avoid him and I think that built up a pattern of avoidance. We are not overly affectionate anyway, but I think that's a long term barrier that is still there when it comes to immediate touching and intimacy. He said "it doesn't bother me if others smoke but with you I find it absolutely repulsive and disgusting". With me I think it's my whole body odour and aroma about it and I think its played a big part in our relationship. We both smoked when we first met but he stopped many years ago and I continued it, often sneaking.

Lisa also talked about the problems of having non-smoking boyfriends:

I've dated some men who would easily say that they would not date a smoker and at first overlooked it or thought that I would quit eventually and quite often I did. I'd quit for awhile and I'd end up sneaking cigarettes, you know, and having to hide my habit... it never actually really went away, maybe for a spell but, and I don't like to hide things from people so it was problematic if they didn't smoke. If they smoked it was great it was something we could go do together, you know, someone to go stand outside with.

Madeline, who has stopped smoking for four years, talked about smoking and relationships with men in the following manner:

They were all smokers, (my) present husband did not smoke when we first started going out although he was an ex-smoker. He took up smoking when we first started dating, he never bought them, just bummed them, but he still smoked. Then he started giving me a lot of pressure about my smoking, that I should quit smoking. I didn't quit smoking because he pressured me, it was something I wanted to do it, I quit smoking for me.

Three of the women interviewed said they had relationships with men who didn't smoke. *Hannah* said, "my boyfriend is a non-smoker so I didn't smoke around him for a long time, unless it was an appropriate social situation. Not living together, so not so

much of a problem". *Rita* said when she's in a relationship with a man who doesn't smoke she still smokes but "just not around them". *Jane* found that "most of the men I've been attracted to don't smoke, so I don't smoke when I'm around them and I don't crave it. It all depends on the stimulus that I'm in".

For *Bobbie*, *Morgan*, *Bess* and *Sky* smoking has not been much of an issue in their relationships with men. *Bess* has "never been with a man who objected to my smoking or anything" she and her husband are "smoking partners". *Bobbie* felt smoking was, "a common ground, helps relieve anxiety, (and she has) never (been) with a man that didn't smoke". According to *Morgan*, "lots of guys think it's gross but I've always been my own person and not given a crap, so I smoke anyway. I smoke more when I'm with a guy who smokes".

Andrea, *Elise* and *Amanda* have only gone out with men who were smokers. *Andrea* believes "smokers and non-smokers assume that smokers go together and non-smokers go together so, right from the start, you validate each others chosen manner of life, you find the person attractive, you understand, you're a smoker, they're a smoker." *Elise* said she "wouldn't go out with one (a man) that didn't smoke. It would be no fun if you're with someone who didn't smoke, they'd be nagging about it". *Amanda* thinks that smoking and relationships with men are:

Very important, one of the reasons I chose my present man is because he did smoke. I didn't want anything to do with a non-smoker in a relationship. That was one of the major points I find. I could not feel comfortable kissing a man that didn't smoke cause I'd know darn well what my breath would smell like and what it would taste like to kiss me having just had a cigarette. I wouldn't want that but if he's a smoker, you can't tell. So I would be very self-conscious being with a non-smoker in a relationship. I get nervous even talking close to somebody who doesn't smoke because I know, I quit for seven weeks, I know what smokers smell like, they stink.

Most of these women were heterosexual and their relationships with men were generally adversely affected by smoking, unless they were 'smoking partners'.

“NOT ME, I’M NOT A QUITTER”

Smoking, like gestures, is an unspoken part of conversation. Talk about smoking, however, can be used to gain entry into a conversation with another smoker, even a stranger. The majority, eight women, said they spend very little time talking about smoking. Three of these said this minor talk included talk about quitting. *Letty* added "we have to quit at some point in our lives, we get too old for it, had enough". *Margie* said she talks about it "very little" the talk is about "whose trying to quit, the little sayings on cigarette packages, restaurants you can't smoke in and things like that". *Morgan* said she talks "very little, about not enough money to buy more. We should really quit and imagine all the money we could save if we did quit. Why do I have his horrible cough?"

Three of these participants who said they talk very little about smoking say the talk is about "trite things, like another nail in the coffin, I'm going to smoke myself to death here, I'm so frazzled out". *Lisa* said she talks about it "maybe just as much as you would about going for coffee, let's go for a smoke or I guess you say I need a smoke every once and awhile, let's have a smoke break...one liners". *Hannah* said "not very much, more (talk) within the last year about how unaccepted we are, how there seems to be no place for us anymore, kind of a defensive attitude, feeling guilty at the same time".

Rita and *Jane* said they don't talk about smoking at all, *Jane* said "if so (it's) just stuff like 'gotta light?' or did you think to bring the zig-zags".

Four of the participants said there is often some talk about smoking usually around quitting. Said *Bess*, "with various friends it's always an issue about quitting and how hard it is and we all try to encourage each other to do it and never do and light up another cigarette". *Anne* commented:

the talk is about quitting, whether or not you should quit, whether it is the time to quit, that magic 'the time'. How expensive they are, justifying it, well at least I'm doing this or not doing that, I would have quit except this and that's why I'm smoking again, it's justification.

Janet agreed that, "often some small talk and probably the same things. Oh, are you still smoking or may I have a cigarette or jeez I'm going to try and quit on a Monday when I've got no cigarettes and no matches left, small talk, but still acknowledging the fact that were still smoking".

Three women said talk about smoking often comes up in their conversation while smoking. *Pat* said, "it generally comes up in conversation about how we're all going to quit. When we're all going to quit and what pariahs we are because we still go outside and smoke and not smoke in front of our families and friends. Then we light up another cigarette and talk some more". *Sharon* added " we spend a fair amount (of time talking about smoking), now that you mention it, about the different kinds (of cigarettes) or how you look smoking or whatever, lighters, these child-proof lighters, or just anything that goes along with it". *Elise* said she talks "quite a bit to the ones who don't need it, who shouldn't be even having it, they're sick and they still smoke, I bug them when they light up".

Bobbie and *Amanda* said they talk about smoking a lot. *Bobbie* went on to say that the talk is about:

How many times we've quit, how we can't quit, how were going to try again, how much we hate it, how much we need it, why we smoke, what other people say about it, what we think about what other people say about it, how we started. Almost always in a large social situation the talk inevitably comes up about smoking, about wanting to quit, with the exception of one or two friends all other smokers are struggling to quit.

Amanda added to this by saying, "All of us smokers talk a lot about quitting. How bad it is for you, the health hazards, your desire to quit and how we are all experts at it, at quitting, someone whose tried it a thousand times could be considered an expert at quitting. Not me, I'm not a quitter!".

For these women, most of their talk about smoking is about quitting (not about being non-smokers). There was a difference over time in the amount of talk, with younger women (under 35) talking less or not all about the smoking act.

"I WOULD LEAVE A FEW AND THEY WOULD DO IT FOR ME"

Cigarettes can buy you a wide range of items according to these women. I found several surprising responses related to the word buy, including permission to breath, break time, and both isolation and camaraderie. My idea about the word buy when I was creating this question was based on using cigarettes like money and trading them to buy goods or services as in the underground economy of institutions. The unusual comments

these women made about the word buy, that included time and control over the self, highlight the array of frames used to describe each person's experience of a phenomena.

Four of the women believed that cigarettes can buy almost anything. *Morgan* relayed a story about arriving home broke from a trip and getting ferry fare by running around the terminal selling the cartons of cigarettes she brought back. *Bess* said you can, "trade them for whatever you need, wherever your are. I don't need to do that lots, I guess you could use it. I think of institutions where they use cigarettes to get things or they do things to get cigarettes". *Anne* expanded on this:

My God, in institutions, almost anything. They can buy you a lot of people who want to be smokers, but don't have any cigarettes. They buy you a certain amount of belonging, at least to that group and more opportunity to socialize with the group banished to the stairs at work.

Sharon also agreed that "you can trade cigarettes.. cigarettes can buy you almost anything".

Four other women emphasised the relationships that cigarettes can buy. *Pat* said "I don't know that they can buy me anything, some friendships I suppose". *Janet* believed that cigarettes can buy you:

companionship perhaps, in a way. Other than if I ask for a cigarette, I always feel cheap, I don't mind giving them but I don't like asking for them or I would like to pay for one. If I go into a bar with somebody and neither of us had a cigarette I would go to another table and offer them a quarter and buy a cigarette and I would cheapen myself, I would feel very cheap and sleazy for doing that, and I would feel that they would think that so it doesn't buy me respect. It buys me rest time and time by myself, it creates thought, not the cigarette themselves but the whole package of time alone and the smoking, its like taking a huge deep breath.

Toni, who has stopped smoking, talked about cigarettes buying comradeship:

With all this ban on smoking now and you're out in tiny little places so there these little enclaves that are like...I identify with the rebels or something, like nobody's going to tell us what we can do, so we'll show them, we're out there killing ourselves. So that kind of fanned that for me, that outlaw rebellious kind of attitude, even though they (non-smokers) think you've got us corralled, but we're out there having a really good time. I'm pretty shy in a social situation, so that kind of forced the issue, so it was easier for us to all be at one place, for a specific reason, and then we could just start talking about that. So I miss that in a way, sometimes I look at groups of people smoking and the non-smokers all kinda wandering around not talking to anybody and like the smokers are just having a

hoot, I miss it.

Lisa talked about cigarettes buying relationships:

when I worked in restaurants and everyone there smokes, it became a bartering system in terms of drinks, like someone buy the coffee and you supply the cigarettes, and it's generally unspoken, it just sort of happens. If you knew that the person coming on to shift when you were leaving didn't have any, you would leave a few and they would do it for me. You develop really good bonding with people like token sharing. I've never thought twice about giving up my last cigarette because I know another will come along but I know there are some people who are a bit more stingy or careful with them.

Andrea, *Bobbie* and *Amanda* mentioned that cigarettes bought them break time, "a conversation break". For *Bobbie*, it bought her "security and permission to breathe otherwise (she) holds (her) breath a lot". *Amanda* said that, other than break time, cigarettes cost her. "It costs me more than it buys me, because I go out for coffee and a lot of our smoker friends don't have any, and they always take mine because I smoke their brand right, so it costs me".

One women said that cigarettes can buy "relaxation, focus and direction or you can exchange cigarettes for lights or rides"; and another said they bought "calm nerves, hidden shadows that need to be looked at in order to face reality, your abusing yourself, hides some reason, you do get addicted but there's some underlying reason that's more important". Only *Margie* said that cigarettes bought "yellow teeth" and "peace of mind".

Elise said cigarettes buy:

happiness I guess, cause you sit there and have a smoke, you finally got it. Cause you run out of money and you have to run around trying to get it, make sure you have it all the time. (I) have traded bread for smokes or I'll give them my lighter and they'll give me ten smokes, that's enough for a few days.

Two of the women said that cigarettes bought them "nothing". Then one of them remembered that the bartender will buy her beer if she gets her tax free cigarettes. This participant has her First Nations status card and with it she can obtain cigarettes that are not taxed and therefore cost about half of what the white bartender pays. The bartender still saves money if she pays for the tax free smokes and the beer and both get what they want.

Most of the women felt that cigarettes could buy them something which generally included interpersonal relationships. Smokes could be used to barter for time, (baby-sitting, smoke break) or personal merchandize (a light) or to buy a physical sensation (happiness or relaxation).

“GOTTA LIGHT?”

The majority of women who made reference to the etiquette and rituals associated with smoking, ten of them, mentioned enjoying the ritual of lighting up or of having someone else light their cigarette.

Morgan said "even if foreign men didn't smoke they would light your cigarette, it was really cool". *Toni* liked the ritual of "touching of the hand while lighting your cigarette, if they touched your hand then you knew possibly there would be some physical contact occurring at some point during the evening". *Bess* also said "it's nice to have your cigarette lit, or just sort of using them for a reward, things to give yourself if you're feeling tough or whatever and you want to take a smoke break. "I like that", *Amanda* agreed, "when someone lights my cigarette". *Hannah* added I like "coffee and a cigarette, telephone and a cigarette, driving the car and a cigarette, conversation and a cigarette, beer and a cigarette and someone else lighting your cigarette". *Anne* replied, "the first lighting up I enjoy, shaking out the match and you have the cigarette there and it looks all new and everything, by the time you are half way through it looks all weak and tired". *Lisa* also enjoys the ritual of "lighting cigarettes, lighting someone else's first and then lighting yours or them lighting yours. I always tap the pack before I open it to pack them down and I then pack the cigarette on my thumbnail before I smoke it". *Sharon* mentioned "the ritual of lighting up together and sharing a cigarette is kind of nice once and awhile, sharing with a friend" as one she enjoys. *Janet* liked "to have a nice lighter, I stole one, I got it from somewhere and it's got a different little hole in there, that's a nice lighter, I enjoy using a lighter (more) than I do matches. I always open this side first and am aware that something's not right if the other side is opened first".

Two of the women mentioned other social rituals as ones they particularly enjoy. For *Jane*, "the ritual is going to talk to somebody"; *Sky* said, "it's a sharing kind of

thing... I like to share them, very social thing, it gives you something to offer".

Margie, Andrea and *Bobbie* talked of different kinds of rituals they enjoyed. *Andrea* said "it's got to do with my purse, for me I like knowing I have something, I bring the bag, it's with me, there's always a red package in there, doesn't matter what bag, I can count on it". *Bobbie* liked "the red lipstick, likes to have people comment on the colour on the cigarette and know that it is her cigarette. I always pull off left flap first, opposite to husband. When we open each others, I have to switch it around so opened on the 'correct' side. Will not smoke without something to drink, tea, coffee, alcohol, but not water". *Margie's* favourite ritual was having a cigarette "with a glass of wine". Two of the participants said they didn't have any rituals or etiquette that they particularly enjoyed.

The women discussed several rituals and etiquette that enhanced the act of smoking for them. For many, lighting their own or other's cigarettes or having their cigarette lit played a part in their enjoyment of smoking behaviour.

"I WOULD HIDE IT TO A POINT"

Cigarette smoking is hidden most from family members and the majority (nine) of these women hide it from all or some their family. *Pat*, hides it from, "my mother and my son". *Hannah* said she hides it from "lots of people, my mother. In a business situation, I'll go totally out of my way, out the building and around the corner, if I'm at a business conference or something, trying to make a good impression, especially if no one else smokes". *Morgan* said she hides it from "everyone, aunt, parents, nanny, baby-sitters, people I worked for". *Bobbie* said "clients or strangers and family of origin" are who she hides it from. *Sharon* said "people that I can tell are uncomfortable about my smoking, my parents". *Margie* said she hides it from "children, my family, brothers, sisters etc.". *Lisa* said she also hides it from her:

parents off and on. They thought I quit a few years back and were really happy about it, it put them at peace. They were really against my smoking to the point that when I was in high school they would write things on my pack like, you're going to die, don't take us with you. My mom never smoked in her life, they were really anti with constantly derogatory remarks and constantly battling with them. It just got to a point where, them not knowing, worked out just as well. I had no problem hiding it, they live in a different country.

Anne added that she hides it from:

people who are in a position of authority. I don't like supervisors seeing me smoking. I used to hide it from my family, when I first started again, I used to hide it from my child, but now she knows, so she can nag at me too. The sister that got me started is terrible now, you can't even find an ashtray in her house, you can't even smoke in her back yard. My dad.

Janet talked about who she hides it from:

My husband. He would probably see me smoke one cigarette a day perhaps, and that's only recently, because I'm trying to take control over my life and be an adult. If I want to smoke in my house I will. I would certainly hide it at work with customers. If my parents were still alive I would hide it from them.

Sky hides it from "children". *Letty* hides it from "non-smokers". *Andrea* hides it from "new men, as long as possible, non-smokers who don't respect smokers in illogical ways. Smoking wouldn't interfere with this, but they think you would not be as good at it because you are a smoker. Smoking comes with an image, it's not a good one, so when I want to leave a better impression I would hide it to a point." *Elise* said she hides it from "most people who drink all the time and they're always out of smokes or my neighbours, they never have their own smokes. I don't smoke around my mom, I'll go outside. I don't hide the fact that I smoke only that I have them". Three of these women said they didn't hide cigarette smoking. *Jane* and *Rita* said they hid it from "nobody". *Rita* said her non-smoking boyfriend "knows I smoke but I don't do it around him". *Bess* said, "I use to (hide it) from my mom; nobody, not anymore, that's the beauty of being a grown-up".

Many of these women hide their smoking behaviour in some manner, often this is because they do not wish to upset someone else or they are afraid to lose the respect of another. The women spoke of the guilt attached to this deception however, there were also those who would be disappointed if they stopped smoking.

"CLOSE FRIENDS WHO YOU HAVE LONG CONVERSATIONS WITH WHILE YOUR SMOKING"

Six of the participants said they didn't think anyone would be disappointed if they stopped smoking, three were very definite and said no one. *Sharon* said "I don't think anyone would be disappointed, maybe, I don't know". *Letty* felt that "none (would be

disappointed), all will give you support and confidence and whatever you need to do something good for yourself". *Jane* said, "my friends wouldn't be disappointed, if they are really my friends they would respect it".

Five of the women felt that probably no one would be disappointed if they quit smoking and then decided that maybe someone would be. *Janet* is a good example of this, she said "The girl next door maybe because most of our relationship is coffee and cigarette and talk". *Sky* also said "no one would be disappointed if she quit" and then mentioned her best friend "who is really restricted at home and usually hands me a cigarette the minute I get into the car with her, she might be disappointed". *Elise* said "I don't think anybody, maybe my sister-in-law". *Bess* replied similarly, "I don't think any of them, I think they would be glad to see that I quit. Maybe (a girlfriend) might be uncomfortable with the change in the relationship".

Six participants immediately spoke of at least one person who would be disappointed if they quit. Two of these six mentioned that the one person who would be disappointed if they quit was a male friend. *Amanda* explained it this way: "he's the one that gives you the least amount of reinforcement to carry on when you quit, he doesn't give you much encouragement". *Hannah* said "It's close friends who you have lengthy conversations with while your smoking together". *Morgan* said "the one (she) started with and the one that always bummed them off her " were most disappointed when she stopped. *Lisa* described friends who were the most disappointed when she stopped in the following manner:

Two people in particular, my boss, a women who I worked with and lived with. When I first started working there I smoked and she really didn't and she really liked my Belmont cigarettes and would have one with me occasionally and then she had a thing for Americans so again she started smoking and every time I'd go for a cigarette she came out more frequently. She began to buy packs and she'd be asking me to go for the smoke break and she became the smoker. I quit and she really resented it and she blamed me quite often. Then I have another very close women friend who we spend a lot of time together talking, smoking and drinking coffee or going out to dinner and it was very much something we did together and I think she was really disappointed and the reflection for her was difficult because it made her become more aware of her smoking. It almost changed it to the point that a couple of times I think I could go back, but really know that I quit for myself.

The majority of these women, especially those who had stopped sometime during their smoking career, realized that discontinuing smoking would be disappointing to some of their social relationships.

HUMOUR, COMPLIANCE AND DEFIANCE

Only two women said that they had never been in a situation where people disapproved of their smoking. *Jane* said "people tease me all the time, never somebody really, seriously disapproved. I handle it by laughing and go have a cigarette".

Sixteen of the participants felt they had been in a situation where people disapproved of their smoking. They handled the disapproval in three different ways; humour, compliance, and defiance.

Hannah and *Elise* both used humour when people disapproved of their smoking. *Hannah* said "I made a joke". *Elise* said "my sisters" disapproved "I just laugh, yeah, whatever, it's me".

Eight of these sixteen women used varying degrees of compliance once their smoking had been disapproved of. *Bobbie* said she "was discreet or didn't smoke". *Andrea* remarked that she "will not smoke or will wipe the air in front of her from people, would not leave garbage around, silver paper, empty packs etc.". *Letty* mentioned she will "roll down windows in the car to get air flowing and can say she has quit before and will quit again". *Sky* said her family of origin disapproves so she "would not smoke around them. Reformed smokers (are) usually the worse", she would just put it out. *Margie* said, "I handle it a lot better than I use to. I use to be just totally offended to the point that I would never, even when I was not smoking, I would never, ever tell somebody to not smoke in the house, because I felt very offended by that. Now, I would just go outside and have it and not make a big to-do about it". *Anne* told a story of complying and still being disapproved of:

I was standing in an arena in a pit area that had a rope around it that was strung together by ashtrays with a great big sign over my head that said smoking in designated areas only with signs everywhere else with round circles with a cigarette and a great big line through them and I was sitting there in this ring looking like a penned animal, smoking this cigarette and there were no other animals in the ring at that time so I was really pretty evident and the kids were

sitting outside the ring watching me and a woman came barrelling up, one of these psycho women, just appeared out of nowhere, strange people. And she came running up to me and she said 'standing right there having a cigarette' and I said 'I beg your pardon' and she said 'can't you read the sign?' and I said 'the sign says smoking in designated areas' and she said 'see' and walked off. I felt like I'd been run over by a truck, I felt really disapproved of. I've had people come up to me and strike up a conversation about the carcinogens, scarring off the birds and wrecking the habitat and things like that.

Pat and *Bess* usually complied and didn't smoke when people disapproved although *Pat* said, "either I don't smoke but then I have this really perverse streak in me that if people start really bugging me about it, I'll just dig my heels and light one up, whether I want to or not. Don't push me". *Bess* said, "I always ask and I know people appreciate that. It depends on how they handle it, if they are real rude or ignorant about it then I'll probably get my back up and light up, the rebel in me".

Five of the sixteen participants who talked about being disapproved of said they defied this disapproval in some manner. *Sharon* and *Lisa* felt that they should not be judged. *Sharon* said, "just do your own thing, if you don't like my smoking then I'll go away or you can go away, it's not really a big deal to me never really got offended I just sort of respect that they don't like it and go my own way". *Lisa* added:

I really have to say I don't interfere in other peoples lives, I don't pass judgement and I'd ask them to do the same. Although, I've had occasions with friends, especially people who were older, who assumed some sort of reverence because they had more experience than I did, and who would be derogatory and put me down for smoking and I have a very sharp tongue. It's hard when someone is handling you with power to try and handle them in a very positive way and I've tried to... I have my days.

Morgan, *Amanda* and *Janet* got angry when cigarette smoking met with disapproval. *Morgan* said she, "smoked anyway. I'd get angry and upset and then be mad at them and say stick it". *Amanda* said "I got pissed off, I got choked and smoked anyway". *Janet* said:

I got my nose in the air, I got into a bit of a snit because I was at a banquet and I was at a table with some people who lit up, I wasn't smoking at the time, and somebody came over asked them if they would put out their cigarettes and they were upset because they said there was ashtrays on the table and nobody told us it was a non-smoking banquet and I didn't light up a cigarette but I was really in a snit and I agreed with those people completely, if it was a non-smoking banquet

then I would want the option of choosing whether or not I went.

Most of the participants have met with disapproval for their smoking behaviour. The majority will comply to varying degrees and not smoke if asked. However, some will rebel and smoke more if severely oppressed.

“MY SISTER SAID GO AHEAD, GO AHEAD YOU’LL GET USE TO IT”

Eight of the participants felt that they had experienced pressure to smoke. *Anne* and *Letty* said they were "only pressured to have the first cigarette after that no". *Morgan* said her girlfriend's image pressured her the first time "she was my idol, if she was doing it I should too". *Elise* said "after the first time when we had it I didn't like it, I didn't want any more, but my sister said go ahead, go ahead, you'll get use to it, took me about three days to get use to it but after that I couldn't quit". *Sharon* said "early smoking days and trying to fit in, just people would hand you a cigarette and just you know, 'smoke it' just be like us sort of thing and I didn't really have the will to say no".

Jane, *Janet* and *Pat* mentioned feeling peer pressure although *Jane* said "in high school probably peer pressure, it was never really pressured, it was just done". *Pat* said "well, a little past peer pressure in the sense that teens, how they generally smoke so that they can be accepted by they're particular group. I think that probably having started later in life I'm past that, but when I have had to act as a foil there are times when I've not wanted to smoke but I've had to because I'm her foil". *Janet* talks about:

minor pressure other than being a teenager, peer pressure at that point. As an adult only when somebody passes me a cigarette, I might have just finished one but they are lighting a cigarette and they pass me one and I sort of feel like 'all right I'll take one and have one with them'. It's my own pressure not their pressure.

Nine of participants felt they had never been pressured to smoke. Three answered simply "no". *Amanda* said "I don't think so". *Lisa* said "indirectly perhaps, not directly". *Bess* said "not really, unless I look at it as peer pressure from my sister or whatever, I didn't look at it that way, I didn't feel pressured, I mean I was game, my older sister was letting me into her little circle, hey, I'm in there. I don't feel like I've ever been pressured." *Hannah* also said she didn't feel pressured "except wanted to hang out with

certain kids, they smoked, so I did too". *Bobbie* said she was "never pressured, although feels stressed about not smoking when husband and friends still smoking and she feels they are limiting their smoking because of her".

"AFTER AWHILE, I MIGHT NOT LIKE TO GO THERE"

Five of the participants felt if they did not smoke it would make no difference to their social life, they could go to the same places. Four women said their social life would be better because they "could go anywhere" as well as the places they are frequenting now. Four others said that it would be difficult initially to go to the same places and socialize with the same people but "eventually, once I felt strong in what I was doing I could go to the same places". One explicitly said that "I have no will power whatsoever if I'm around people who smoke. So, I would have to be well into not smoking to go to the same places". *Bobbie* said she "could go to the same places, except a couple of restaurants that I associate with smoking". *Sharon* said, "I would (go to the same places with the same people) and I would feel tempted but deeper I would feel a lot stronger and better about myself if I could resist". *Andrea* said she "could go to the same places but would have a different experience. After awhile I might not like to go there. I would still go there for awhile out of habit or stubbornness but I might not be able to tolerate some of the environments that I am presently willing to put myself into as a smoker".

All of the present day non-smokers (those who had stopped for at least a year before the interview) mentioned that they did not continue the same relationships to the same degree with their friends who were smokers or go to the same places as frequently, now that they were not smoking. Women who had stopped for sometime during their smoking career but who had returned to smoking generally answered that quitting would not change their relationships or the places they frequent.

"I WOULDN'T HAVE WANTED TO BE IN THE GEEKY GROUP"

Six women felt that if they had never started smoking their social life would not have been any different. *Amanda* said "my starting smoking didn't really change things

either. I don't know that if I would have changed at all because I still am me right, although I smoke I still have the same insecurities and that as if I didn't smoke. Those feelings are still there, I'm still the same person, I just smoke". *Janet* added:

I don't think it would have been any different at all, I would have sought out that group. I wouldn't have wanted to be in the geeky group there were the geeks and the 'in group' and the geeks didn't smoke. And I wasn't a geek. I wasn't right in the 'in group' I was just trying to be there. I probably would have done something else if I hadn't smoked, suppose I was asthmatic or something I probably would have shoplifted fuzzy sweaters or screwed around to be part of the 'in group', smoking was probably the least offensive I could have done to be part of the group.

The majority of the participants, eleven, felt that if they had never started smoking their social life would have been different. Four believe they lost something by smoking. *Letty* said if she had never smoked she would have "more non-smoking friends, more money, more things to wear and go out to dinner more often". *Andrea* felt if she had never smoked she would be:

rich and famous, had more to do with singing. Good excuse not to go professional. Friends would be different, first boyfriend didn't smoke. It would have been different in my family, they would have thought I was trying to be better than them. I can't imagine how my family would have coped if I hadn't been a smoker.

Sharon said, "I would have been a more stronger person...right now I would feel better about myself" if she had never started smoking. *Morgan* said if she didn't start to smoke she would have:

met more people and socialized more because at parties and stuff I would always be outside with maybe one or two other smokers. I might have continued with the track and field. It wasn't a matter that I couldn't still be athletic, it's just that the girl I smoked with was a couch potato and I just started losing interest in sports and gained more interest in sitting around and smoking and drinking. That's when I started drinking too, just Friday nights, but I'd rather be doing that and hanging out with cool people than going to track practice.

Pat said, that its "certainly changed (her social life) because all the people that didn't smoke that I use to hang out with, (before she returned to smoking) I don't hang out with so much anymore". *Elise* said it would be different "with my one sister cause she don't smoke".

Five of the eleven who felt their social life would have been different if they had not started smoking, felt they had gained from the difference in their social life by smoking. *Margaret* felt that smoking made her more "worldly", *Bobbie* felt that she "might not have known that wilder side of life" if she had not been a smoker. *Anne* said:

I wouldn't have got to know a lot of the people that I got to know because there was a real division in school between the people who did the bad things that they weren't supposed to do and the people who didn't and I never had a problem talking to the people who didn't. I don't think I would have been accepted in the crowd of the people who did those things if I didn't (smoke) so therefore, I got to have acceptance in both crowds.

Lisa, on a similar note, said:

I think that I probably would not have socialized with as many eccentrics and really cool people because I met a lot of people in high school through the smoking area, not mainstream, very alternative. Another thing I've found about smokers is that their generally individuals because they have chosen to do something that's frowned upon by the majority of society and if your willing to do something, there's generally an inner strength.

Jane felt she would be a totally different person if she never smoked. I'd probably be working at McDonald's right now, wondering what else there is to life, but instead I'm making over a thousand bucks a week and loving life in a hard physical job.

"I'M COOL"

Eleven women said that smoking makes a statement of independence, rebellion, sophistication, and maturity. *Sky* summed it up this way: "I am a person of the world, sophisticated, I make my own decisions about myself". *Amanda* believed the statement is that of "the rebel, going against everything. It goes against everything that we know. Although when I started smoking we didn't know that, those who smoked were bad kids, you weren't squares, you were considered one of the popular kids, one of the bad kids, rebellious". *Lisa* said something similar: "you're cool, you've come a long way baby, you've chosen to do something that's frowned upon by the majority of society". *Pat* said, "revolting against society in general". *Morgan* said smoking means "I don't give a dam about anything, its cool". *Bobbie* added "I believe that I am in control by smoking, that I have a handle on things, that I'm cool and I'm tough, I've got it all worked out, like my

shield". "For my age group", (she is in her early 20's) one participant said, "it's probably the whole rebel anarchist society, I'm cool, I'm alternative, I'm a rebel, I'll do what I want". *Margie* believed that smoking makes the statement of "not really a fatalist but you are going to live the way you want for whatever reasons or like tomorrow you could go out and get hit by a car so whatever I do enjoy it and if it kills me somewhere down the road, I hope it's quick".

Six women said that their statement about smoking had changed over time. For instance when *Madeline* began:

It was the thing to do, everybody smoked and if you smoked you were just that much more grown up and sophisticated and with the in crowd. They were taking part in something that, at that time, was quite acceptable and in fact it was almost like a fashion statement. If you smoked you were accepted by the crowd that was probably a lot less desirable to our parents, they were the rebels absolutely.

Madeline said that now, "anyone who smokes today knowing the health hazards are probably foolish". *Hannah* said that in the past the statement was one of "independence, women have grown, pictures in magazines of women smoking as opposed to the Marlboro man" Now she felt that it "shows that many more women are out in the work force, more stress than when women at home. Seems to be more women smoking than men when I go to an event, especially if you don't know anybody, you'll notice that mostly its the women who smoke". *Janet* agreed, the statement has changed over time for her:

It would, at one time, made the statement that I was grown up and a women and a person who could handle their own destiny but now a statement that a person makes... I think a person who smokes is to be pitied and I will see somebody pulling out a cigarette and see them drawing it in and blowing it out and I feel a bit sorry for them. I assume when I smoke people feel sorry for me so that's why I like to have 'Smoking is addictive' on my cigarette package then people look at me and say, of course, smoking is addictive not that 'Smoking gives you cancer' then they look at me and think 'Oh what a fool'. Now the statement is they're addicted, they're foolish, they're stupid, they're messy, dirty, smelly all those things that's what the statement is now.

Sharon said, "I think it says, I'm weak and I have pain, personally. I see that now. I think it's just something foolish, at the time it doesn't seem like a big deal but... I guess they're (smokers) rebellious and went against what everyone thought they should be and I was

attracted to that". *Andrea* said that the statement smoking makes:

today, an addiction statement, funny because other people do, in the closet, painkillers or other addictions. At least smokers are out in the street right in front of you not afraid to let you know. A person who is quite willing to be visible, it shows the kind of person they are, it is a person to me that's willing to air their own shit because its not pretty and nobody that I know, that's in their right mind, has tried to represent smoking as a positive role model thing to do in any context and yet smokers are willing to do it. Your not afraid to display and be visible about the truth about yourself.

Anne said:

I usually see habitual smokers as being unhealthy somehow, that they're not able to deal with their problems whether they're not able to deal with their problems or not, that's how I see it and I see people who are smoking, who are stressed out, as people who are trying to hang on and not break down and knuckle under their problems and that this is a coping mechanism.

Rita said smoking makes the statement of "socializing and having fun".

"I THINK THAT WE ARE ALWAYS ABLE TO QUIT"

All but one of the nineteen women said that they had thought about quitting smoking. Ten women said they felt unwilling to quit. *Sharon* added, "I think that if you have the will you can do anything". *Pat* said, "probably more unwilling than I am unable. It's the old rebel still hanging in there. I'm perfectly capable of quitting smoking it's just the why". *Morgan* said, "unwilling, not much else going on in my life. When I wanted to win this bike race I thought it would help my performance to quit so I took this full package of cigarettes I hadn't even had one, and just ripped it up". *Jane* said, "when I think about quitting, I quit. Lately I've been thinking about it and I still haven't quit. I'm unwilling, there's not a question of being unable to do it".

Five of the participants felt they were unable to quit. *Janet* told of her situation and why she felt unable:

If there is a big uproar around here and I haven't been smoking for awhile I'll say 'that's it, I'm going to buy cigarettes', then I'm smoking in defiance. But when I say I'm going to quit I just find myself in the middle of the day in the car buying cigarettes. I think I can quit anytime or I can quit tomorrow, I'm just going to buy one more. I think to myself, one day I'll fly away and visit foreign countries for about six months and I'll quit eating and quit smoking while I'm gone. I know

inside me if I'm going to stop I'm going to stop now. However, maybe I need to set up special situations for me.

Amanda felt:

unable, when it comes right down to where all on my own, and that's how I'm taking your question, on my own initiative, where I haven't talked about it and nobody's pressured me into it and (I) thought, well geez, I'm going to do it tomorrow, all on my own, I've felt unable. But if somebody says to me, like my mate, you're going to quit, you've gotta do that, I'm unwilling, darn rights, no one's gonna tell me what to do.

Lisa and *Bess* answered both unwilling and unable to this question, *Lisa* said, "generally both, when I was unwilling to, I felt unable, when I was willing to, I felt very able. I asked for it and it happened. So its unwilling". *Bess* said:

a combination of both unable and unwilling. Unable because maybe I wasn't totalling willing to quit in some sub-conscious way or addictive way or whatever. I think we are always able to quit if we are really willing and ready and want it badly enough and or get the steps to help you like get the patch and or do whatever.

Andrea said "I'm able, (I) did quit for a year and nine months".

CHAPTER 6

Results of Stopping and/or Stopping and Returning to Smoking

For those participants who were currently not smoking and who had stopped smoking for at least a year before the interview and for those who had stopped smoking for at least a month during their smoking career, the interview focused on their non-smoking time and was directed by the questions listed in Appendix B.

Nine women talked about what they missed most about smoking, five are currently not smoking. Some said that they missed most the physical aspects of the habit, "having something to do with your hands or your mouth, the actual motions of it. The physical feeling of inhaling and exhaling". *Anne* added "I missed taking a deep breath sometimes. I missed it after meals and I missed having a few minutes of quiet, I really had to work at giving myself that quiet time and time to just breath and not listen to anything because smoking to me is always a break". *Toni* mentioned "the actual inhalation, the having it in my fingers, sucking it into my lungs, blowing it out" as what she missed most about smoking.

Two of the participants mentioned that they missed most social drinking and smoking, *Lisa* said "I quit smoking and drinking together, I had to do them both, they just went so well together, hand in hand". *Darlene* missed the "chit chat" most and *Jane* said "there's sort of a comfort level that comes with smoking, I think I missed that". *Andrea* said she "didn't miss smoking when she wasn't smoking".

A few weeks after the interview *Toni* came back to me and said she had changed her mind about what she really missed most about smoking. She told me she had attended a conference alone and wanted to talk with others in attendance. She felt very uncomfortable approaching strangers and knew how much easier it would be if she could just go and join the smokers. She wanted me to know that she misses this aspect of smoking behaviour more than the actual physical part of smoking she mentioned

previously.

Of the women who felt their relationships were different when they stopped smoking, three different themes arose as to how these relationships were different; seclusion/isolation, less talk/more active and internal not external change.

SECLUSION/ISOLATION

Five of the women said their relationships were different because they felt they had to remove themselves at least initially from their usual social network when they stopped smoking. *Bess* said, "in the beginning you change your routines by just removing yourself from situations or (who you're) hanging with or that might mean not seeing people as much". *Toni* said "I noticed for awhile I certainly avoided my friends who smoked cause I just couldn't be around them". *Andrea* agreed, "at first I couldn't hang out with heavy smokers". *Madeline* on the other hand "gradually started avoiding places that had a lot of smoke". *Darlene* said her relationships were different because she was "not connected to same group of people in and around my work environment as I had been cause I didn't go outside with the smokers anymore at work". *Anne* said when she quit smoking her relationships were different:

because I could go to different places and I could still be friends with people who were smokers but I felt more accepted by non-smokers and I felt that I didn't have to cut short what I was doing (going for a three mile run etc.) to stop and have a cigarette. So I didn't feel my activities were curtailed because I didn't have to stop and go somewhere where I could have a smoke and then come back, sort of disruptive.

LESS TALK/MORE ACTIVE

For *Morgan*, *Sky*, *Toni* and *Lisa* becoming more active when not smoking was how their relationships were different. *Morgan* said "I don't want to sit around her smoked filled room anymore like we use to. We probably don't talk as much because we get up and do things". *Sky* said she becomes busier when she's not smoking "I find that smoking tends to make you more social, more thinking about the times that you can sit and talk to friends and stuff. I see people less and for lesser periods of time because I'm busier". *Toni* said "I don't just hang out as much as I used to". *Lisa* said my relationships are

different:

There is a bit of distance, it's slight but I still notice it. Interestingly enough I think it drove a really large wedge between the women that I worked with and I. It was something we did together and also when I quit smoking I also became quite active so I didn't sit around and smoke. Friends of mine who didn't smoke were much more inclined to invite me on long road trips. Did not hang out with same people and at the same places as much.

INTERNAL NOT EXTERNAL CHANGE

Amanda, Bobbie, and Letty felt that although their relationships were different, the actual relationships weren't different, it was them who were different and this would be reflected in their relationships. *Letty* said she "would bark at things and wonder where its coming from". *Bobbie* said when she stopped she felt more positive, good about herself, she felt strong and in control. Her relationships were strong and benefited from her attitude about herself. *Amanda* said "I felt different, therefore, I approached it (relationships) differently, I had more energy, I felt clearer, I felt brighter, more patience, more well-rested, I just felt better all the way around so my attitude was a little healthier I think. My interactions were a little more up, more energy filled than usual".

Hannah said how her relationships were different when she stopped smoking, "One friend made it difficult because she would never smoke anywhere else but my house and she would come to visit and leave her cigarettes. Eventually that was my undoing because she always left these cigarettes behind". *Margie* was alone in saying that when she stopped smoking her relationships were not any different.

Eight of the women said that they hung out in the same places and with the same people while they were not smoking, some said that initially they had to stay away from smoking friends and certain places but after awhile "life went on and hung out with same people". All of these women had returned to smoking by the time of the interview.

Five of the participants said they did not go to the same places or hang out with the same people as much since they stopped smoking. All five of these women were not smoking during the time of the interview and had not smoked for at least a year previous to the interview.

Eleven of the participants had stopped for more than a month and then returned to

smoking. The main themes that arose from how they went about returning were: desire for affiliation, just one puff, and high stress.

DESIRE FOR AFFILIATION

The majority (five) of the participants returned to cigarette smoking because they were lonely or didn't want to be rude. Two of the women were in foreign countries when they began smoking again. *Andrea* told her story, "I was in a youth hostel, a Dutch woman offered me a Greek cigarette, it was a friendly gesture with a stranger cause I wanted to meet a stranger cause I was feeling a little lonely and out of sorts, insecure. I didn't want to refuse the gesture and that was just a slow crawl to a full smoke". *Margaret* told a similar story about being in foreign country and wanting to share with a stranger. *Margie* "felt comfortable having one in social situations" and *Sky* persisted because her "close girlfriend smoked and would give her a cigarette in the car when they went somewhere". *Toni* said "I had been in a relationship and had separated and then started smoking".

JUST ONE PUFF

Bess and *Amanda* felt similar. *Bess* said "I just thought, well, I had it beat so I could just have one here or there and not worry about it but it didn't work." *Amanda* reported "Oh I thought I could mess with it, I thought that I had it well under control and then I could have that odd one and say no to the rest, flirted with it and I lost".

HIGH STRESS

Anne was having relationship problems and *Bobbie* was moving with two children to a place where she knew no one, both talked about money problems and how "ridiculous it is to spend \$5.00 on cigarettes when you only have \$10.00 to your name". *Anne* added that her thinking went something like "Yes, I am now stressed enough that I can justify smoking again, it was almost like a recognition factor for me that I was under that much stress".

CHAPTER 7

Perceptions and Resistance

"To knock a thing down especially when it is cocked at an arrogant angle is a deep delight to the blood" - George Santayana

The final part of the interview discussed how these women perceived others (non-smokers) perceiving them and how they resisted these often oppressive perceptions. The following themes arose from this part of the data and centre around the questions listed for this section in Appendix B.

GENERAL PUBLIC

Twenty-one of the participants talked about the general public and their thoughts on smoking. The information clustered into two categories, (a) the physical aspects of smoking eg "the smell/stink", "the expense", and "the filth", and (b) the personal weaknesses of the smoker. *Bobbie* said, "people in the general public cannot understand why smokers can't quit, 'Why don't they just do it?' 'How hard can that be?' which implies how weak we (smokers) are". Other participants said the general public called them "fools", "self-centred", "rude" and "that (smokers) should be ashamed of themselves, there are 'shoulds' and there are shames". *Lisa* said that "quite often non-smokers voice their opinions very loudly. I've had people come up to me and say things about my smoking, older men would come up to me and say 'a pretty women like you shouldn't be smoking'. I've had people giving snide remarks in a queue, 'It's going to kill you '". *Jane* and *Bess* also remarked about non-smokers saying, "its terrible, your going to die" or "how can they do it when they know its going to kill them". *Sharon* said, "they hate us, don't want anything to do with us". *Elise* agreed with *Sharon* she said, "nowadays its a hazard, non-smokers don't like smokers one bit, they would say that smokers are irresponsible". *Anne* is more explicit she said:

I think the general public is probably more receptive to IV drug users and opium smokers, it's everything from killing yourself, blame, blame, shame, shame, you smell like cigarette smoke which I guess is a terrible foul odour. Killing your kids, that's the reason that your plants aren't living longer, your wrecking your environment, they don't want to sit in your car, ashes are all over the place, just that its a really, really, filthy habit.

WORK OR SCHOOL

Fifteen of these women talked about what the non-smoking people at work or school had to say about smokers. Overall, the people that these women work with are not as condemning of them as what they say the general public is. Five participants commented such things as, "associates are generally non-condemning", "they try and be polite about it" or that there are "hardly any" comments about the smokers. *Madeline* said we "don't really discuss it, it's not allowed in the building and you must go far away". *Jane* agreed saying at her workplace non-smokers are not affected by smokers "because we are outdoors all the time".

Darlene said that at work non-smokers say smokers are "silly", *Amanda* said her "boss just says I look stupid". *Hannah's* boss joked he can't have coffee with her because she is always in the smoking section. *Bobbie* said at her work "smokers sat with smokers and non-smokers with non-smokers and occasionally the two mixed up but the non-smokers always knew not to bug the smokers otherwise they would have to move to another table". *Sky* said at her work non-smokers thought it was "wrong that the establishment allows smoking, unfair that smokers waste time smoking rather than performing duties". One woman, who works in an institution and is having problems about smoking at work, said:

They (non-smokers) have successfully started a campaign to drive people (smokers) out, they have the staff room now and they sit around talking about all these jockey things, like how they are bench pressing the weight of their house and the poor miserable skinny, scrawny little smokers are off hiding in the corner, out of the building, through several locked doors. They were sitting on the front steps smoking and the director got word of that 'can't have smokers on the front steps, doesn't look professional' so now we have been banished to a side door. They had a near riot when they tried to stop smoking, it's one of those last bastions, maybe I'll end up becoming an inmate.

PEOPLE YOU SOCIALIZE WITH/NON-SMOKING FRIENDS

Sixteen of the participants answered this question. Half said the non-smokers that they socialize with will say derogatory things about smokers. One woman said, "they don't like it, it stinks, la tee da, you know, you can't smoke in their house and all of that, which I can respect totally" or "they can be brutal, feel they're (smokers) are rude". *Jane* said they say to her it's, "gross, how can you do that and all that self-righteous sort of stuff". *Madeline* and *Hannah* said their non-smoking friends mind only if a place is particularly smoky or if they have to sit in the smoking section of a restaurant and can't complain "you just put up with it, its not pleasant". *Anne* said she feels "very subjected to disapproval with my non-smoking friends, it doesn't feel as intimate, if your not accepted when you smoke, you're not accepted". *Letty* said, "if it's a close friend they'll say 'you shouldn't smoke'". One friend believes that if a man is a smoker he is an ass, their are smokers in the world and non-smokers and she is intolerant."

The other eight women said that their non-smoking friends are non-condemning although "they would certainly like to see me not smoking, none of them seem to mind". Three of these eight said talk of smoking or smokers does not come up at all with the non-smoking people they socialize with. *Janet* said, "even if they don't smoke they have smoking designated areas in their homes". *Sharon* said, " the non-smoking friends that I have hang around with smokers all the time so they are use to it, and they accept it". *Andrea* said most of the non-smokers she socializes with are "reformed smokers who have found a way to quit and they tell me ways that I can quit.

FAMILY

Seventeen women answered this question, although not all families or family members were against smoking, those that were made very strong statements of their opposition according to these women. Eleven of them said that members of their family would say things like they were "endangering their lives, (and) being inconsiderate of the rest of the family". *Lisa* said her parents would be "vehemently saying or writing and mocking me". *Amanda* said her family said she's "a woos, weak, going to die, do it for your kids, guilt, guilt, guilt". *Toni* said her "son absolutely totally hates it, he just thinks

it's one of the most disgusting, vile, acts of oppression that a person could do to another person ie him". *Jane* said her "brother hates it, tries to nab the pack". *Bobbie* said "family say they hate it, son doesn't say much but looks at her a lot and moves away to get away from the smoke. Daughter comments that I shouldn't be smoking, it stinks in here, you know your killing us too, disgusting and gross".

If family are reformed smokers they are "very against" it and it is also common that "all children wish parents didn't smoke". *Pat* said her boyfriend is concerned:

I think in his case he's more concerned about my health and I think probably kids because of all the warnings and everything I think they have sort of a fear that because their parent is smoking they're going to die at any moment. So I think that probably it is just more worrisome for them than anything else.

Janet said her husband said her "smoking is worse than anybody else's smoking. It's not just the smoking it's the smell about myself, so maybe its just close personal contact that makes it more noticeable to him or maybe its because he's more concerned about me that it makes it that much worse with me". *Elise* said, "I go to Bingo with my mom and she don't smoke. She 's always laughing at me, bugging me when I go out for a smoke. Asking me if I'm dying or something cause I take off as soon as its break".

For six of these women the non-smokers in their family don't talk about smokers. In *Morgan's* family her grandma "quit but she has a lung disease, nobody talks about it. All the rest smoke, so don't talk about it". *Margie* said her family "don't know I smoke again, husband is just going to grind his teeth right off but he won't say too much". *Sharon* said her family "think it's just a phase, I'll get over it". *Anne* said:

My father is one of those people who can smoke for twenty years stop for five and then pick it up for a year and then put them down, he has no problem with it. I think he sees it as being sort of an acceptable adult thing to do. My brother is in advertising, he realizes that all the advertising is angled at low income, low brain people, so if you smoke then you are a low social economic, no brainer, so its unfashionable. It's not what the right people are doing.

Six of the participants said that when they were non-smokers they "didn't say much about smokers", or that they were "very non-judgemental" or they "felt sorry for them (smokers)". Five of these six mentioned that even if they "didn't come down hard on smokers" that the smell bothered them. *Amanda* said "I think that's probably one of

the reasons that motivated me to smoke again so I wouldn't have to smell that. It was very offensive". *Andrea* said when she was a non-smoker she "wouldn't date a man who was a smoker". *Anne* said:

It was just my assumption that people wanted to quit. I felt that if people were smoking they were looking for the right time to quit. I never felt the need to despise them quite so much as seems to be the case now. I wasn't aware that most people did despise us til I became a smoker again and I realized that their had been a big shift from when I first quit smoking. It was considered racy and sophisticated and a little wild and reckless and now all of a sudden its just blah, horrible, terrible.

Letty's attitude about smokers now that she is a non-smoker is "that everybody has their own mind to do what their going to do and let them do what they want but its not me. I'm working on myself and I'm the one that's taking the initiative and whatever their going to do that's up to them to decide".

Darlene, Toni and *Amanda* said when they were non-smokers they talked about smokers in terms of being able to quit smoking. "One day you'll get to the point that you decide not to do it, you too can do it" or "don't give up trying to quit" and "you can quit, you can do it".

Sky and *Pat* said they talked about smokers in a put down manner when they were non-smokers. *Pat* would say that smokers were "filthy, dirty, disgusting people". *Sky* said she "wanted to go around with a pair of scissors and cut the ends of peoples cigarettes off, thought it was terrible". *Margie* said she "didn't" talk about smokers at all when she was a non-smoker.

RESISTANCE

It is important to see strength in peoples reactions to oppression (Wade, 1992). Four of the participants said that even though non-smokers say nasty things about them they still feel pretty good about themselves. *Bess, Toni* and *Amanda* said they "could have worse habits" and *Margie* said, "if they don't want to know me because I'm having a cigarette, I'm sorry, that's their problem not mine". *Pat* and *Bobbie* don't feel good about themselves when they smoke. *Pat* said:

I feel like a filthy, dirty, disgusting person every time I light up. Every time I light

a cigarette I think this is horrible, this is stinky, this is unhealthy for me all those things that are very valid and yet I'll still light up a cigarette. I have this dig my heels in stubbornness that's within me that has very little to do with smoking and a lot to do with people telling me what I should and shouldn't do and if they tell me I shouldn't smoke then I will smoke just to defy them.

Bobbie said:

I know that I'm a good person who has a weakness for nicotine. I started smoking real young to relieve stress and be part of a culture and it was a way for me to survive, it got me through. I won't be around nasty petty people. Others can say stuff, it doesn't lower my self-esteem other than being controlled by a substance.

Sky said she resists believing non-smokers put-downs of smokers because she knows she doesn't have to have a cigarette, (she) likes them but doesn't have to have them. *Anne* said she resists by "clustering, bonding, and (feeling) solidarity" with other smokers. *Sharon* said, "I guess it's just when I smoke I think it doesn't really matter on the grand scale of things. I like it and if I want to quit, I know I will. So I just keep thinking that and one day I will. I enjoy it, right, just to sit back (pause) and have a cigarette, (pause) there's nothing like it you know".

PACKAGE HEALTH WARNINGS

On all packages of cigarettes sold in Canada there are warnings about risks to health related to smoking. These warnings are printed in large bold letters surrounded by a border of either black or white and cover about one third of the package. They are written in English on one side and French on the other. I have seen people turn their package around so that the language they don't understand is on the part they view most often. Others will ask for a warning that does not apply to them. For instance, if they know for sure they are not pregnant they might ask the shopkeeper for the package with the warning 'smoking during pregnancy could harm your baby'. As I mentioned earlier in the paper, smokers often discuss these health warnings amongst themselves.

Three women felt that the health warnings on cigarette packages were a good thing. *Bobbie* said, "we need to be reminded, pay attention, putting it front and centre gets it out to first time smokers perhaps. People may shut it off more because its out there. I read the cigarette package and immediately turn it off but it does make me more

aware that I am causing harm to myself". *Sky* agreed with the warnings on cigarettes though she does not believe its the tobacco but the chemicals that are the problem. She said primitive tribes were more pure in their use of tobacco, gathered the leaves etc. and only used it on special occasions, spiritually oriented not like some peoples' abuse of cigarettes. "That's all right," said *Elsie* "because least they're trying to show what it does to you".

Ten women dislike the health warnings of cigarette packages. *Sharon* said "I think that no matter what, you'll smoke anyway but its the subliminal message that irks you every time you buy a pack you know". *Amanda* expanded on the subliminal idea "I think it makes matters worse, I think it's a bad thing to do because every time I pick up a cigarette I look at that and it just reinforces it somehow, it reinforces the potential for that to happen. Its like an affirmation that cigarettes cause cancer." *Margie* and *Jane* saw them as a joke "anybody who buys a package of tobacco knows all this shit, knows they're totally detrimental. They're going to really attract the non-smoker but I don't think they do anything for a smoker other than give a chuckle". *Janet*, *Hannah* and *Lisa* said that either nobody sees them or they consciously ignore them therefore they 're not doing the job. *Lisa* felt "the warnings are one more dig that a non-smoker or someone who is pious, who think that their doing something for their own good and your own good, that's just one more step into your personal space. I really resent that because your paying for the cigarettes and that's your decision. *Morgan* and *Bess* got angry at the warnings, *Morgan* said "(they) pissed me off... it was kind of embarrassing when I go to the states people would read 'Cigarettes can kill you' ..it doesn't make much difference whether I'm going to smoke or not cause I've known that cigarettes cause cancer and cigarettes are going to kill me, I mean you could drown in a puddle, what doesn't cause cancer lately". *Bess* agreed "don't like them there, a little too blunt, it's there for the whole world to see". *Rita* said she reads the warnings but she doesn't think about it.

HEALTH WARNING COVER-UPS

Appendix A includes some but not all of the possible health warning cover-ups that are available in the stores. I used the cover-ups in Appendix A as an example to the

interviewees and we talked about their reaction. As these cover-ups are a new phenomena most of the women were not familiar with them. All eleven who talked about the cover-ups enjoyed the humour. *Bobbie* said she liked them "because it shows that there are a lot of other things that are bad too and maybe support would be more helpful than constant put-downs". *Toni* said "it shows that people still have spirit. Some where along the line because of the legislation, non-smokers think that they really are superior and they have a right to make judgements about smokers and its a real violation of fundamental rights there because of that". *Sky* said, "we know this really is not a good habit, humour does not have any harm", but (I) do not like the abusiveness of some of the sayings, 'Kiss my butt' for example.

Thirteen participants choose specifically some of the sayings. The most popular, four women choose it, was 'Avoid inhaling, green shag carpets, religious cults and non-dairy whitener'. Three women choose the 'Michael Angelo' picture of sharing the cigarette. *Lisa* said the "Image of the female hand passing to the male hand illustrates one of the main things about smokers which is the sharing aspect and also because it doesn't take the defence". Another favourite was 'non-smokers die too', three of the participants chose this.

CONCLUSION

The results of the interview data reveal the complexity of women's public cigarette smoking. Beginners usually smoke in same gender groups or dyads and are very conscious of how they perform the act. They will practice smoking with a friend, watch themselves in a mirror or attempt to mimic their smoking heroes. Seen as a symbol of "being cool" (dare to be seen to go against the mainstream), and perceived as a threat to institutional power, smokers are initially labelled "bad girls" alienating them further from non-smokers while adding to their mystique. The smoking 'bad girl' is portrayed as glamorous and independent by the tobacco industry who add credence to the "in crowd" image in their media campaigns. Like Brody's lumpenproletarian the smoking 'bad girl' has neither enduring role nor persistent resource in mainstream or traditional economic forms. She is unlikely to find in mainstream arguments against smoking any strength

until her own socio-economic situation is radically altered. She has more to gain in social terms, than she has to lose by smoking. Indeed advancement entails integration into institutional power which for many is neither a realistic hope nor a pleasing prospect.

For present day smokers, locations and relationships that include smoking are considered most appealing. Smoking is used to create new relationships, or to remove oneself from uncomfortable interpersonal situations. The act of public smoking is usually performed in conjunction with something else, smoking and drinking, smoking and talking, taking a break and smoking. All of these women smokers and ex-smokers believed that the general public is universally critical of smokers. The people in their lived experience, however, the non-smokers that they know, those in their family, and those that they work or socialize with, are often seen as understanding and considerate of their smoking lifestyle. If a family member gets too critical, it may cause the smoker to hide their habit from this person. If a stranger is unnecessarily rude to a smoker, she is likely to become defiant and smoke more.

These themes represent how the participants began and continue to perform public smoking. They are like pieces of a puzzle that show the many aspects of communication involved in choosing a smoking lifestyle, I put them together one piece at a time, often I was awed.

CHAPTER 8

Discussion and Implications

The purpose of this study was to explore how women smoke in face-to-face interactions. This question appropriately formed the basis of the study and directed the interview guide. I situated the question at different time periods in a smokers experience focusing on beginning and present day behaviours. The data revealed the complex and inter-related behaviours and perceptions involved in beginning and persisting at women's public cigarette smoking and gave me a much richer understanding of the phenomena. I used tables to summarize the data for a reporting form.

BEGINNING

The first puff was most helpful in determining the role smoking plays in relationships, identities, and how it contributes to the positioning of women in relation to social institutions and values. Beginning behaviours were performed in various locales both urban and rural across Canada and in different decades and I was curious what, if any, influence this had on the experience. The participants remembered what this public act of smoking communicated to teachers, parents, and peers and they weren't addicted before they began.

The results confirm that social learning theory and peer pressure do not adequately explain the beginning behaviours involved in female cigarette smoking. The participants began smoking regardless of whether their parents smoked and rarely because they wanted to be accepted by a particular group. Either spontaneously or planned they often began with one other friend when neither of them had smoked before and mainly they said they did not feel pressured by peers.

As shown in Table 1, for those participants who could easily recall their first cigarette (20/22), the beginning act of smoking was (1) in the presence of others, (2) usually females (14/20), and (3) most often with one best female friend or with a group of

girls that included their female friends.

Table 1

First Puff Companions: Who the women had their first cigarette with (n=20)

One on One		Groups	
Brother	0	incl relatives- niece, siblings, cousins males & females	1
Sister	2	inc. relatives as above - all female	1
Boyfriend	1	male & female	4
Best Friend(female)	5	All female	5
Parent/Grandparent	1 (mimicked mother in mirror)		

The literature reports that cigarette smoking usually begins in early adolescence (Clausen, 1968; Health Canada, 1995; U.S. Department of Health, 1987). The average age for starting to smoke is 12 according to a Canadian Cancer Society advertisement (Appendix D). My data fit with this, as presented in Table 2. Indeed, (7/22) of these women reported they began smoking at age eleven.

Table 2

Age when women started smoking (n=22)

Under 10	10-16	17-21	22-29	30 and over
5	16	0	0	1

The literature notes that psychological factors in the adolescent (e.g. rebelliousness) is often cited as a reason for initiation (Clausen, 1968; U.S. Department of Health and Human Services, 1987). Rebelliousness is considered a psychological deficiency in the adolescent according to these researchers. However, the participants of my study talked of rebelliousness as a positive psychological trait. They were and

continue to be positive about being considered the rebels. The data show this as a consistent trait across all ages, they were “the rebels, absolutely” recalled with pride and laughter. The smokers were the “cool kids” in 1950 when public health concerns were not connected with smoking and they are the “cool kids” in 1990 after extensive education about health risks associated with smoking. “Cool kids” were usually defined by these participants as the rebels, the group that got together, and the interesting group that was made up of all different types (multi-racial, all social economic levels) not just mainstream academics (those who excel within the institution).

As well as separating themselves from the mainstream by daring to smoke publicly, these students were seen by school authorities as more popular and social than other students (Willis, 1978). My data agree with the idea that smokers are more social/popular than if they didn’t smoke. The participants rarely smoked alone in the early days of smoking and continue to smoke more with others. These women also made statements which showed the importance of the social part of smoking and how it increased popularity. They said if you smoked you could (a) get to know people from all the crowds; (b) that the smokers were the ones who got together at breaks; and (c) that the smokers were the rebels, the alternative people, the misfits, the oddballs, the ugly ducklings who ultimately turned out to be the more interesting people.

There were several things that came up in the data on beginning cigarette smoking that I had not seen in the literature. This included how fondly and humorously the women talked about their first puff (we shared plenty of laughter during the interviews). My data also pointed out the physical closeness, the sharing and the deception that supported this act and the heart pounding excitement involved in doing something “bad”.

PRESENT DAY SMOKING

The following discussion involves a weaving a several themes presented in Chapters Four, Five, Six and Seven into a picture of women’s experiences of the face-to-face activity involved in cigarette smoking over time and in different contexts. It ends with these smokers subjective interpretation of their relationship to non-smokers.

The nicotine in tobacco has been called an addictive drug and people say they

continue to smoke because they are “addicted”. The disease theory of addiction states that a drug addiction can only be cured by going into treatment, yet 95% of all ex-smokers quit without assistance (Peele, 1992). Although nicotine may affect different people differently, it is totally removed from the body within three days to two weeks after the last puff (Farquhar et al, 1990). How then would ex-smokers begin smoking again after this two week period, not to maintain drug levels in their body? If a couch potato decides on an exercise routine, he will feel a difference in his body, possibly aches and pains and he may go back to the couch potato lifestyle in order not to feel uncomfortable but he would not talk about the process such as, “I couldn’t keep exercising because I felt awful, I’m so addicted to couchpotatoing”. Even though there is actual physical uneasiness in changing any behaviour, the returned couchpotato may perceive and talk about himself as lazy but he would not think or say he was addicted. The difference in the way a process is talked about determines what questions are asked and what behaviours are performed. Talk about smoking as communication changes how it is viewed by the smoker. My study casts another perspective on the self-reliant, powerful, resistant, active agent narrative on addiction by highlighting the communicative nuances that smoking behaviour elicits.

Many of the participants were comfortable talking about their first puff. However, when I suggested we talk about present day smoking I got a big sigh. I discovered during my pilot interviews that the women talked about feeling very guilty about smoking and believed that there was something wrong with them because they had been unable to quit. They thought I was looking for a psychological deficiency in them I could label, and often they would help me by saying they had an “addictive personality”. After I asked the question, “who is the best smoker you know”, they would relax. As a result of this discovery I began the present day section of the interview with this question. It set the tone for the interview, alleviated the fear of reprisal and opened up a new way to view smoking performance. It was also one of the questions that was answered differently according to age in that women over thirty-five spoke about their best smoker as one who smoked only a little while younger women’s best smoker smoked a lot.

The word best when applied to a smoker mainly referred to smoking style.

Several of the interview questions received replies that added to the list of smoking styles mentioned by these women. Several styles are listed and described briefly in Table 3.

Table 3

Women's Styles of Smoking

Style	Behaviour
1. Dragon Lady	Blows big clouds of aggressive smoke
2. Defiant	Demands rights and/or purposefully smoke when oppressed
3. Closet Smoker	Sneaks puffs. Careful not to let certain others see
4. Talented	Rolls cigarettes with a creative twist, smokes it all without touching it
5. Awkward, Unnatural, & Nervous	Handles cigarettes uncomfortably, can't sexily flick ashes
6. Chain Smoker	Binges, smokes one and then has another automatically
7. Sporadic	Smokes only if social occasion warrants
8. Rough, Ragged Smoker	Grasps at smokes feeling tough, strong
9. Glamour Lady	Mouths bright red lipstick on her smoke
10. Rebellious	Displays independence by visibly going against what everyone said they should be
11. The Mooch	Bums cigarettes rather than buy them, so not really a smoker
12. Masculine	Imitates males, not dainty, grabs pack

These styles relate to the functions of smoking I outlined in the literature review; communication, addiction, exchange and symbolism. Styles 1, 2 and 3 highlight the communication aspect of smoking. The Dragon Lady and Defiant smoker communicate a lack of fear in being seen as smokers and in the possible negative judgements that go with

the act. The Closet Smoker communicates a willingness to please others and to practice deception in order to maintain respect and harmony (do not want negative judgements or loved ones to worry about their health). Styles 4 and 7, the Talented and Sporadic smokers, are reminiscent of the symbolic historical use of tobacco when it was handled as a sacred commodity and smoked only on special ceremonial occasions. The Awkward smoker, number 5, accents the normally hidden rituals and etiquette that belong with smoking that some people feel they can never master. Style 6, the Chain smoker, describes possible actions involved in creating the concept of 'addicted'. She is smoking automatically, she is not choosing to smoke, it is as if she has no control. However, when she talks about the situation she does take credit for control, albeit without awareness, she does not say I smoke one and then I have no choice I must smoke another.

When performed professionally, smoking symbolizes attributes that women find desirable. It is advertised as a social norm for independent, glamorous, rebellious women (see Appendix E: Why a women with all these attributes would have to save package logos to buy clothes to fit the lifestyle is left unexplained). In table 3, numbers 8, 9 and 10 describe styles that emulate this media created heroine. Rough, glamorous, and rebellious women.

The Mooch, number 11, stylizes the exchange aspects of smoking behaviour. This woman cannot smoke at all unless another smoker co-operates and gives her a cigarette. Finally, style 12, the Masculine style agrees with my opening assumption that women smoke differently than men and therefore separate gender studies are valid.

Only a few of the women mentioned their parents as role models when discussing smoking style, which agrees with the Doherty & Allen's 1994 longitudinal study that says family functioning has more to do with the onset of smoking than whether parents smoked. Several women mentioned that their parents were very much against smoking.

SMOKING TALK

Younger women spoke very little, if at all, about smoking whereas women over 35 included some talk about smoking in their everyday conversations. Talk about smoking seemed to be about six topics:

1. quitting smoking/trying or wanting to;
2. the health hazards of smoking;
3. the price and expense of cigarettes;
4. “gotta light”/“can I bum a smoke?”/“let’s have a smoke break”;
5. brands of cigarettes and types of lighters; and,
6. places (eg restaurants) you can’t smoke.

Smokers’ conversations about quitting smoking are problem saturated. The talk includes lots of frustrating failure and pain descriptions. With everyone searching for the least painful cure, both talk about quitting and of the health hazards, relate to the communication theme in that they involve the sharing of information and experiences.

Topics number 3, 4, and 5 speak to the exchange part of smoking. A smoker must exchange money or time in order to obtain and smoke cigarettes, much of this exchange involves social interactions, the giving of a light for instance or the smoke break which may include leaving the present location and going en masse to another location and talking together while performing the act. The many varieties of cigarettes and lighters add to the exchange theme. Oddly enough, close friends and intimate smoking partners may not smoke the same brand of cigarette, therefore, a change of brands must take place if they are to exchange cigarettes. This exchange involves talk about the different brand which is most often a put down of the brand (therefore the person who smokes it?) simply because it is not their usual. Smokers are very committed to their current brand and nothing else is quite as good although most have reluctantly (ran out of their own) switched brands a few times during their smoking career.

For smokers, the stories of lighter exchanges could fill books. I told my crowd of smoking friends that we would have to exchange something else, if as a group we stopped smoking, because the lighter narratives made for such mysterious and humorous conversations that they would be sadly missed.

A brief example:

I found a lighter lying on the floor at a wedding reception. I picked it up and asked the people around the area if it was theirs. Several people jokingly pretended it was their lighter because it was so attractive but no one truly claimed

it. I put it in my pocket intending to give it to one of the organizers so they could make an announcement. There were more than fifty people at the gathering and I didn't know everyone. Just then an emergency happened and I had to leave the party. The next day a close friend called and during the conversation he mentioned his disappointment in losing his new lighter at the party. He described it and sure enough it was the one I had found. We were both surprised and delighted.

The final topic that came up in the talk about present day smoking relates to the theme of symbolism. In Canada smoking is a behaviour that is banned in many places and so is a symbol for social exclusion and of feeling unaccepted. Although it is not part of their lived experience, these women smokers believed that non-smokers in the general public (strangers) are universally critical in their remarks about them.

Table 4

Types of Comments by Groups of Non-Smokers about Smokers (n=21)

		Comments	
Group	Responses	Critical	Non-critical
General Public	21	21	--
Work or School	15	10	5
Friends	16	8	8
Family Members	17	11	6
Total	69	50	19

Including the general public (strangers), a substantial majority of comments by non-smokers (50/69) directed towards these women smokers were critical. Non-smoking people who they actually communicate with, colleagues, friends and family members are more mixed in making critical and non-critical comments. When strangers are removed from this equation, only (29/48) of the real comments made by non-smokers to these women are critical. This perception, assuming all non-smoking strangers are going to be critical of them (smokers), although it has no basis in fact, could lead to misguided rebellious behaviours by the smokers.

Overall the interview material pointed to the communicative importance of beginning, and persisting at cigarette smoking. Some talk connected smoking to the historical, aboriginal uses of tobacco while the discussion around rituals focused mainly on the actual lighting up. It was brought to my attention that this, carrying of the fire, would have been a very powerful position in the days before electricity and that fire could still represent power to an ancient part of the human psyche.

The most shocking remark I heard while conducting this study was that women smoke to breathe. The first time this statement was mentioned I thought it to be a very unique idea. The thought that something connected to lung cancer could be used as a breathing tool amazed me. However, after I heard the connection for the third time, I believed it to be an important enough component to be incorporated into a cessation program. Women may not be aware that they are using smoking to stop them from holding their breath or to regulate their breathing. It was not something I was aware I was doing until it was brought to my attention.

During the process of preparing this paper I began changing the word quit, which was used extensively throughout the thesis, to the word stop when referring to smoking cessation. For many of these women the word quit was used as a negative trait within their culture. A quitter was seen as weak person. Now they are told to quit smoking and it goes against their grain. "I'm not a quitter!", Amanda sarcastically announced. Other themes such as exchanging, sharing, bonding, and relaxing are considered positive social attributes and are difficult to give up.

IMPLICATION FOR PROGRAM DESIGN

In distilling the data I was looking for unique and different concepts that would be useful in the applied sense. This redefinition of smoking as a social issue invokes the presentation of different experts with different solutions. Non-medical or non-biological factors may have the greatest influences on critical aspects of the problem. Therefore a relatively straightforward public health approach becomes politicized. To be effective, programs for tobacco control for women must take into account their subjectively based meanings as well as the specific cultural significance of smoking. Women's smoking

would be reframed as a social issue, not an individual deficiency (Greaves, 1995). As a social choice the participant learns the effects the drug will produce through the social interpretation of the physical experience (Becker, 1963).

PREVENTION

The Cowichan District Hospital Community Health Connections uses the population health approach to help people either avoid or reduce behaviour that places them at risk of developing health or social problems. Prevention activities, evaluation and strategies are conducted with input from the target population. A program for tobacco prevention, according to my data, must be gender specific to account for the female experience and subjective interpretations. The action plan for the exclusively female audience would target girls and young women between the ages of eight and sixteen, the usual time of initiation. Strategies and activities would include information, education, social competency skills, and alternative behaviours. Rationale for these strategies and activities come from information in this thesis and include ideas such as: women from all age groups called smokers the 'cool kids'; younger women said they talked little if at all about the act. Dialogue about smoking communication, symbolism and exchange, including on-going participant definitions for 'cool kids', would be a necessary part of the program. Evaluation methods would include both a process and impact component with the objective to alleviate the personal and interpersonal distress often cited as the cause for substance use. Primarily people smoke as a reward, prevention methods must address this issue.

CESSATION

While total abstinence is the ultimate goal of all stop smoking programs, specific woman-focused messages that take into account the impact of inequality or gender on health or on the experience and meaning derived from smoking are an important initial understanding the letting go process. Data from this study would be useful in potential programs. For example, the use of smoking in determining styles and relationships must be exposed before it can be replaced. Social pressure and social institutions which

develop women's image to include cigarette smoking as a positive attribute (movies, fashion magazines, books and cigarette advertisements) must be examined. Smoking is written about as a self-medication coping mechanism for stress and negative emotions, and although the results are similar to psychotropic drug use, smoking is seen as a preferred substance from a social viewpoint. Information connecting smoking to its social constructions allows women to see how smoking is not only controlling in a biological sense.

Women-positive programs that measure success beyond cessation should be established. Goals such as unveiling of the social and economic benefits women give to society by their smoking behaviour will heighten their awareness in measurable ways.

According to Greaves (1995 p. 207)

Society benefits from women's smoking in that women's full expression of discontent, the unscreened response to the realities of oppression, stress, and conformist pressure, is muted and siphoned off through the addiction to and the act of smoking.

Temporary cessation and/or reduction are goals that contain narratives around pre-existing abilities and are successful stepping stones. I agree with Greaves (1995) that a holistic approach to women's smoking that emphasizes the importance of how women smoke and de-emphasizes cessation and allows these goals to be counted as success in further understanding women's programming needs to be developed.

The research reported here sought to discover the possible subjective benefits of women's smoking which tobacco control has neglected. According to my data women benefit from smoking in several different ways: smoking together sets up an atmosphere where bonding can take place; it allows comfortable access to both familiar and new smoking locations and the social support and exchange systems attached to these environments; and it contributes to their identity and sense of personal agency.

As smoking is a dynamic activity, it must be recognized that these benefits are constantly evolving in response to identity definitions of the self and of the act. At present giving up smoking would constitute a process with losses attached for these women. By demonstrating their personal agency in part through smoking, they would experience a decrease in their ability to negotiate their social life and a void in their sense

of self. When questioned how their social life might be different if they no longer smoked, many of these women believed that there would be no difference. However, the women who were presently successful ex-smokers stated that their social life was different including who they associated with, where they went and what they did.

Nicotine has stolen the credit for making women feel frightened and miserable should they choose to abandon him. While no one can deny there are physical withdrawals attached to smoking cessation (nicotine flu), this thesis points to understanding some of the uncomfortable feelings as part of the adventure of learning new communication skills, and places the learner in the position of active agent rather than powerless addict. As a feminist I began to see that my smoking contributed to the power of the tobacco industry. The creation of an outdoor culture in which smokers obediently accept the rules and go outside to smoke without demanding “a room of their own” deserves further investigation.

Future qualitative studies that focus on smoking communication within particular communities, such as mental health consumers, prisoners, and First Nations people could give a voice to these participants and add insight into implementing an effective, sensitive action plan against problem tobacco use.

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Appendix A

The first three cover-ups are shown in the order of preference of the participants.

Avoid inhaling, religious cults, green shag carpet, non-dairy whitener...



Non-smokers die too

RE-USABLE COVER-UPS
Schiphorst Enterprise
Order 1-800-470-6611 ©

RE-USABLE COVER-UPS
Star Schiphorst Enterprise
To Order 1-800-470-6611 ©

RE-USABLE COVER-UPS
Star Schiphorst Enterprise
To Order 1-800-470-6611 ©

Give me a light not a lecture

Keep your laws off my lungs

Warning: Avoid the Surgeon General

Smoking is blah blah blah to your health

Kiss My Butt

Guns Kill Non-Smokers

Cardio-vascularly challenged

Life is a Carcinogen

Just say no, you can't bum a smoke

Linoleum causes cancer

I'm a NUN, this is my HABIT

Sticks and stones may break my bones but smoking calms my nerves

Coughing intensifies ORGASMS

I AM THE SMOKING SECTION

Warning: non-smokers may be dangerous to your health

Appendix B

Interview Questions

I grouped the questions into categories; beginning, persisting, present, and stopping and/or stopping and returning smoking social functions. The final section of the interview was about perceptions and resistance to oppression by non-smokers.

Beginning

I began the interviews by asking the participants to pretend that they were videotaping their first cigarette and to describe what they see and hear. The following questions were used to guide the interview from this initial question.

Persisting

Did you persist at smoking right after this or how did you persist?

The number of participants who responded to each question are indicated in brackets.

Present Day

(17/22) Who is the best smoker you know?

(18/22) How would you describe your style of smoking?

(17/22) Who else do you know holds their cigarette like you do?

(17/22) Are you a committed or casual smoker?

(17/22) When is your favorite cigarette of the day?

(16/22) What is it about smoking that appeals to you?

(17/22) Do you find smoking helpful at parties or social gatherings?

(18/22) Who do you smoke with the most?

(17/22) Do you prefer to smoke on your own or with others?

(16/22) How much does smoking have to do with who you hang out with, where you go?

(12/22) How does smoking fit into your friendships?

(14/22) How important is it that people smoke to be part of your group?

(19/22) What role does smoking play in your relationship with men?

(19/22) When you are with people who smoke, how much time do you spend talking about smoking? What is the talk about?

(16/22) What can cigarettes buy you?

(17/22) Are there any rituals that go along with smoking that you particularly enjoy?

(16/22) Who do you hide it from?

(17/22) Which of your friends would be most disappointed if you quit?

(18/22) Have you ever been in a situation where people disapproved of your smoking, if so, how did you handle it?

(17/22) Have you ever smoked because you were pressured to?

(17/22) What difference would it make to your social life if you no longer smoked, could you go to the same places?

(17/22) If you had never started smoking how would your social life have been different?

(18/22) What kind of statement does smoking make?

(19/22) Have you ever thought about quitting, if so, did you feel unable or unwilling?

Appendix B cont.

Stopping and/or Stopping and Returning

(9/22)What did you miss most about smoking?

(15/22)When you stopped smoking, how were your relationships different?

(13/22)Did you hang out in the same places and with the same people?

(11/22)How did you go about persisting at smoking after you had stopped?

Perceptions and Resistance

(21/22)What do you hear non-smokers in the general public, where you work or go to school, that you socialize with, and in your family say about smokers?

(12/22)What did you say about smokers when you were a non-smoker?

(9/22)When you are oppressed by non-smokers, how do you resist?

(13/22)What do you think about the health warnings on cigarette packages?

(11/22)What do you think about the cover-ups (See appendix A) for these warnings?

(13/22)Which if any do you prefer?

Interviews with ex-smokers (those who had not smoked for more than a year before the interview) used mainly the beginning, stopping and perception/resistance questions.

Appendix C

Consent Form

This research project is studying cigarette smoking by women in daily, face-to-face interactions. You will be asked questions about your personal experiences of smoking. Your participation is entirely voluntary and you can withdraw from the study at any time without explanation.

All data obtained in any form, tapes, transcriptions, etc. will be kept confidential; all interview data and results will be kept secure in a locked filing cabinet in a locked office. Only the researcher will have access to the data. Your name will not be attached to any published results, and your anonymity is guaranteed by using code letters or numbers to identify the results obtained from individual participants.

Your interview will be audio-taped, and the tape will be erased as soon as the pertinent information has been written down, unless you have stated otherwise below. If you do not want your interview taped, you can refuse this as well.

Permission for Uses of Audio-tape

I am asking about your consent to the following uses of the audio-tape. Please indicate your choices by checking the options which you agree to. You may check some and not others—or none at all. Ultimately, five years after the completion of the project, all the data will be destroyed. The researcher will answer any questions you may have about these options:

- _____ audio-tape can be transcribed by
researcher only into written form.
- _____ segments of audio-tape can be played
to researchers supervisor.
- _____ segments of audio-tape can be played for
other researchers
(faculty or graduate students).
- _____ none of the above; please erase the tape.

Signature _____

Date _____

Code # _____

Appendix D

Photography - Edward Gajdos

You're probably thinking that children like this don't smoke, not at that age.

Meet Jessica Macks, one of 373,175 12-year olds who could start smoking this year.

But don't kid yourself. The average age for starting to smoke is 12. And by the age of 13, those who have started are smoking regularly.

And this isn't a handful of kids either. Every year, over 100,000 children start smoking, many of whom never quit.

The Canadian Cancer Society realizes that to keep a kid smoke-free

for life, you have to keep them from starting. That's why we've been doing everything in our power to keep kids away from cigarettes. Everything from going directly into the schools with our anti-smoking education programs to lobbying government for legislation that makes it tougher for young people to buy tobacco. If you want to find out more, contact us.

It's one of the Canadian Cancer Society's most important programs. Because we hate seeing lives as promising as Jessica's go up in smoke.



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VIRGINIA SLIMS

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Glamour...Gotta Have It.

Get our new catalog
where fashion's FREE with pack UPCs.
Call 1-800-TO-V-WEAR.
(1-800-868-9327)

Virginia Slims

V
wear



Appendix E

8 mg "tar," 0.7 mg nicotine av per cigarette by FTC method. © Philip Morris Inc. 1995

SURGEON GENERAL'S WARNING: Smoking

From the
Fall '95 Collection:
Signature Camel Coat



VITA

Surname: Shivel

Given Names: Mary Margaret

Place of Birth: Vancouver, British Columbia, Canada

Educational Institutions Attended:

University of Victoria

1988 to 1997

Malaspina University College

1985 to 1988

Degrees Awarded:

B.A. (with distinction)

University of Victoria

1990

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Title of Thesis: "Gotta Light?" Canadian Women's Cigarette Smoking as a
Social and Communicative activity

Author _____


(Signature)

MARY M. SHIVEL

(Name in Block Letters)

September 22/97
(Date)