INTRODUCTION

It has been reported in a range of publications that smoking among adolescents in the Western world is not, unlike adult smoking, declining, and that among adolescent girls in particular, there is an increase in smoking prevalence (Pedersen, 1998; Hampl and Betts, 1999; Pearson and Michell, 2000; Denscomb, 2001; Moffat and Johnson, 2001). While there is little difference in smoking prevalence between boys and girls under the age of 13 years in Northern Ireland [Health Promotion Agency for Northern Ireland (HPANI), 2000], this difference widens with age. By the age of 15 years, 24% of girls and 16% of boys are smoking on a daily basis. This difference between boys and girls is greater than that of anywhere else in Europe, with the exception of Greenland [World Health Organization (WHO), 2000]. Such differences between gender groups at different stages may indicate that there is an inherent gender dimension to smoking and that boys and girls may think, feel and act differently in relation to smoking.

It is well established that young people choose to smoke despite knowledge of the health risks. Recent research has therefore moved beyond the idea that adolescents are passive in relation to the uptake of smoking, towards an appreciation of young people as agents who actively choose to smoke, and towards a new focus upon the perceived benefits of smoking in terms of self
and social identity (Michell and West, 1996; Pavis et al., 1998; Denscomb, 2001; Rugkåsa et al., 2001a; Rugkåsa et al., 2001b). Since gender is an important part of both personal and social identity, it is crucial to gain deeper understanding of the relationship between smoking and gender ideology among different age groups. In this paper we investigate how 10- to 11-year-olds perceive such relations through analysis of how they express aspects of gender identity whilst talking about smoking. A higher prevalence of smoking among girls does not appear to emerge until after the age of 13 years (Pearson and Michell, 2000). This implies that it is important to interact with pre-teens on issues to do with smoking and gender in order to determine possible psychological, social and cultural mechanisms through which adolescents become regular smokers.

Qualitative studies have indicated that for young people, the decision to smoke is related to issues of self and social identity (Lloyd and Lucas, 1998; Denscomb, 2001; Rugkåsa et al., 2002a; Rugkåsa et al., 2002b) and is often associated with positive aspects of self-image such as confidence, attractiveness and relaxation (Allbutt et al., 1995). Presenting the right image, through smoking and other risky behaviours, is one mechanism through which young people negotiate status in their social world (Pearson and Michell, 2000; McCool et al., 2001). Smoking as a means to achieve status within the peer group has been found to become increasingly important at around the age of 13 years (Pearson and Michell, 2000). That peer groups tend to be segregated by gender at this age implies separate gender-related identities, and may indicate that males and females take up smoking for different reasons.

**Gender identity**

‘Gender’ commonly refers to how a given culture interprets or conceptualizes sex. Gender may thus be described as the cultural expression of biological differences. Cultural notions and expressions of gender commonly present exclusive male or female identities. For the purpose of this paper it is not necessary to engage in debate on the topic of sex and gender (Moore, 1994), or whether or not being male or female are constant social statuses (Wikan, 1977). It can be assumed that female and male identities develop and change throughout life and that individuals at different stages have different ways of expressing and negotiating both personal and social gender identity.

From an early age, children encode cultural notions of masculinity and femininity from sex-differentiated practices occurring within their social world (Nihilen, 1988; Fagot and Leinback, 1989; Yee and Brown, 1994). Children develop ideas of femininity and masculinity, which, accordingly, affect how they themselves as boys or girls think and behave. Marked gender differences have been observed in children’s attitudes as early as 5 years of age, including a tendency to view their own gender more favourably, with girls making more negative comments about boys than the other way round (Yee and Brown, 1994). While boys tend to be more oriented towards performance, girls appear to orient themselves more towards social relations. This is hardly surprising since girls are commonly socialized to see themselves as integrated members of groups, often with responsibilities for domestic concerns, while boys are expected to be more independent (Ely et al., 1998).

### Smoking and gender

There is a long established link between smoking, sexuality and gender ideology in our Western society. The idea that smoking is ‘glamorous’ or ‘cool’, reflects maturity and enhances social esteem has been exploited in the promotion and advertising of cigarettes. Such media have portrayed a glamorous image of smoking (Amos, 1998), which has become deeply rooted in our cultural notion of tobacco consumption. This notion is reflected in brand names such as ‘Happiness’, ‘Life’, ‘President’, ‘Fiesta’, etc. (Colors, 1997; Tobakkskaderådet, 1999). The ways in which these associations are expressed are also often fundamentally gendered. Tobacco promotion has specifically targeted women, not only through advertising, but also through the presentation of positive images of smoking in fashion magazines, sponsorships and the production of ‘feminine’ cigarette brands (Amos and Bostock, 1992; Amos, 1996; Amos, 1998). Advertisement may also be tailored for male consumption. There is, for instance, nothing feminine about the ‘Marlboro’ man. He is portrayed as the ultimate masculine figure: strong, handsome and Marlboro. Brand names, packaging and marketing strategies have in most cases been found to be aimed at either
men or women (Jacobsen, 1988). Such ‘gendered’ images of smoking may partly form the basis upon which young adolescents explain gender specifics in the uptake of smoking.

Cigarette smoking and gender ideology can also be interlinked in ways that are far from glamorous. Statistics from all over the world indicate that smokers increasingly belong to the poorer part of populations (Marsh and McKay, 1994; Pedersen, 1998; Wiltshire et al., 2001). Particularly in the UK, women not only tend to be poorer but they also constitute a larger proportion of smokers than men (Graham, 1994; Marsh and McKay, 1994). In view of this, it is not surprising that women frequently explain that they use cigarettes as a coping mechanism when facing difficult life events such as sadness, loneliness, stress and depression (Jacobsen, 1988; Barr, 1996; Pedersen, 1998).

This study forms part of a larger project involving longitudinal qualitative data collection with young people, seeking to determine and understand social and cultural factors related to smoking uptake in adolescence. Parallel studies are underway in Northern Ireland, the Republic of Ireland [see (Hyde et al., 2000)] and Spain, and findings will eventually be compared cross-culturally. This analysis is based on the first of 3 consecutive years of interviews carried out within Northern Ireland, when the participants were between 10 and 11 years of age, prior to transfer from primary to secondary education. A relatively large sample of 85 in-depth interviews provided a rich body of data which gave insight into the thinking of a relatively under-researched but important age group. Of the 85 participants, only 16 had experimented with tobacco, while two were regular smokers. Unlike previous studies of smoking in adolescence, most of the participants in this research (75%) had not yet experimented with tobacco. This research therefore provides a unique insight into the thinking of young people before they have had any direct experience of tobacco. This is also one of only a few studies that have considered how the perceptions of gender in early adolescence may relate to perceptions of smoking, which in turn may help us to develop theories about why some young people eventually choose to smoke.

METHODS
The 41 male and 44 female participants were approached and interviewed within local youth clubs, situated in economically deprived areas throughout Northern Ireland. That the young people interviewed were from less privileged areas mean that they do not constitute a representative sample of their age group in Northern Ireland. They do, however, represent those who are most likely to take up smoking in the future (Marsh and McKay, 1994) and therefore those we should aim to target in health promotion efforts.

The children volunteered to participate in the study, after which parental written approval was obtained. The interviews, conducted on a one-to-one basis, lasted from 20 min to ~1 h. The qualitative nature of the study, allowing free expression rather than direct questioning, and the relaxed context of the interviews, within youth clubs rather than schools, aimed at minimizing potential social desirability bias. The interviewers always emphasized that they were there to learn from the children and not the other way around. It is, however, possible that the children could have influenced one another prior to or following interview. Unfortunately it is impossible to control completely for such ‘contamination’ of data.

Departing from a topic guide, the children were asked to elaborate on themes related to health, home and school environment, as well as perceptions and experiences of smoking, drugs and alcohol. Gender issues were not included as distinct topics in the interview guide, but were among the themes that emerged from the data analysis. The interviews were taped and transcribed, and a thematic content analysis was conducted. This technique entails breaking down the interviews to group and re-group the data so that distinct, yet interrelated themes emerge (Burnard, 1991). After initial analysis the data was imported in to the software package Nud*ist (Qualitative Solutions and Research Pty Ltd, 1997) for data storage and retrieval.

RESULTS
Perceived gender specifics in adult smoking
Based on the children’s estimates, the smoking rates among their parents appear to be well over the national average, yet they are roughly in correspondence with the population of comparable deprived areas in the UK as a whole (Marsh and McKay, 1994). The majority of the children in our study experienced men and
women smoking on a daily basis. Such first-hand experience is likely to have an important influence upon the development of the children's perceptions of gender and gender differences related to smoking.

Information on how the children perceive adult smoking came through their comments on their own parents/step-parents; the girls made most of these comments. In general, many more comments were made regarding adult female smoking than adult male smoking, and these views commonly reflected cultural gender stereotypes of 'emotionally charged' women engaged in domestic chores, and 'strong' independent men. The mother's smoking habits were perceived by the young people (whether they had tried smoking or not) as something that enabled their mothers to cope with stress:

She stopped once and then went back on them again. Looking after us is terrible for her because my little sister tries to talk to her when I'm trying to talk to her and she just has to take a cigarette (respondent 52a, female, never-smoker).

She's on them a long time, she's addicted and can't go off them...cos she doesn't get out much and all she has is the fags and she is happy as long as she has a fag. And if she was depressed she could take a fag and it would help her...it eases you down. If you are addicted to them and you have nothing, like it is better than taking a tablet (51a, female, ever-smoker).

If they were banned, my mummy would be like a bear. She wouldn't be able to get a cigarette (36a, male, never-smoker).

The children, both boys and girls, frequently singled out particular reasons why women smoke (as the statements above illustrate), but they rarely did so in relation to men. The comments on men most often entailed a comparison between men and women, or they addressed both parents, such as 'they can't stop' or 'it helps them calm down'. The different concerns given to male and female smoking may partly be explained by the fact that one-fifth of the children did not live together with their fathers, or simply that the young people see much more of their mothers. However, it still seems as if male smoking did not need to be justified in the same way as female smoking, nor did men appear to explain their smoking habits to children to the same extent as women:

My mum said she started because all her friends were taking them...I don't know why my daddy started (28a, female, never-smoker).

My mummy would smoke quite a lot. She says it calms her down. And daddy, I really don't know, for he would smoke when he's out with the cows (41a, female, ever-smoker).

I don't know why he started smoking (53a, female, never-smoker).

**Perceived gender specifics in adolescent smoking**

Just as young people perceive adult male and adult female smoking as different from one another, they also appear to perceive the intended messages of smoking behaviour in boys and girls as being different. Girls made more comments linking smoking and gender than did the boys. Cultural notions of femininity emphasize the importance of appearing attractive to males, and female adolescent smoking was frequently seen by girls, whether they had smoked themselves or not, as related to attachment and romance:

I heard in the news that a lot of young girls start smoking to try to keep their weight off them...Just younger ones (smoke to lose weight)...Because they think the boys would tease them (43a, female, never-smoker).

She thinks she's cool. She runs around with boys and that (47a, female, never-smoker).

[Girls] probably think that they'll get more boys doing it (41a, female, ever-smoker).

Male adolescent smokers were perceived by other boys as conveying their masculinity, and, in particular, as displaying that they were 'hard' and 'big':

[They smoke] just to be big men, to try to look big. They want to be in gangs and all and to act big and they want to boss people around (57a, male, never-smoker).

They think I'm a poof and all (for not smoking) (63a, male, one-time smoker).

Probably because you think you are a big fella to smoke, cos you smoke and you think you are mad and all (76a, male, never-smoker).

This may be because so few had any actual personal experience with smoking, and simply associate smoking with being 'bad' (Rugkåsa et al., 2001b). Again, among boys, the association between being a smoker and being 'bad' is alluded to:

They [smokers] knock windows and run away. And they start fights and argue a wild lot. Some of them might play games, but they are not my friends. They're not the one's that you'd call on to go out with (76a, male, ever-smoker).
I think boys would smoke more because girls can back out of it more than boys can. Because boys have an argument and start a fight, if boys back out of things. But girls don’t really fight that much (34a, male, never-smoker).

Both boys and girls perceived that members of their own sex would take up smoking if they were attracted to a member of the opposite sex who smoked:

No, if their girlfriend smoked, then they’d have to do it, cos she would think he was an oddball (84a, male, never-smoker).

If they fancy a wee boy that’s smoking, they might start smoking to look cool (59a, female, never-smoker).

The views girls held of boys who smoked appear to be similar to those held by boys:

All the boys that smoke think that they are hard men, that it makes them grown-up (41a, female, ever-smoker).

I think more boys smoke because they see their best friend smoking (45a, female, never-smoker).

Boys did not say very much about girls’ smoking. That girls never mentioned themselves that they thought girls would smoke to appear ‘hard’ may imply that this young male has imposed a male rationale for smoking onto girls:

It’s just daft stupid, they (girls) think they’re hard and all, walking around with a fag in their mouth. They know they’re going to kill themselves one of these days, but they just keep doing it to impress their friends and other people who smoke (5a, male, never-smoker).

Other boys, however, echo the rationale given by females themselves for their own smoking: a rationale apparently associated with attracting the opposite sex and the female domestic role of child-rearing:

Well, if they fancy a wee boy that’s smoking, they might start smoking to look cool (59a, male, never-smoker).

It’s bad because they’re having a wean (baby), it could kill the wean (78a, male, tried smoking).

Perceptions of smoking prevalence

Girls almost systematically claimed that boys smoked more than girls, irrespective of whether or not they themselves smoked:

I think more boys than girls smoke because they want to act cool. But they’re not hard at all; they’re just wee softies (42a, female, ever-smoker).

More boys than girls smoke because boys get into it and then they try to commit suicide and all that (31a, female, never-smoker).

Boys, on the other hand, claimed that girls smoked more than boys, again irrespective of their own smoking behaviour:

I think more girls than boys smoke. Half the girls would smoke instead of drinking (76a, male, never-smoker).

More girls than boys smoke…I see more girls than boys smoking (37a, male, never-smoker).

Girls smoke more, boys are more into football (60a, male, never-smoker).

More girls than boys smoke…because I hardly ever see men smoke (32a, male, never-smoker).

DISCUSSION

The rhetoric applied to smoking may serve to express gender ideology and gender identities. Previous research has indicated that young people perceive their own smoking as different to that of others (Allbutt et al., 1995). Although few of the young people in this study had experienced smoking, they construed child and adult smoking as well as female and male smoking within each category as different. Gender characteristics of smokers were available for both boys and girls, and these were used to explain and describe smoking behaviour.

Adolescent smoking

Smoking has clear gender-specific dimensions in various cultural expressions, which are reflected in the comments young people make on smoking in adolescence. That the girls (and the boys when referring to girls) point out links between smoking and romance may indicate that femininity and smoking is viewed in terms of relations with the opposite sex. This corresponds with wider cultural notions of femininity emphasizing the importance of appearing attractive to males. On the other hand, smoking among boys, even when linked to romance, was explained in terms of attempts at being ‘hard’ and ‘cool’, corresponding with cultural notions of masculinity (a young version of the ‘M Marlboro’ man). This is consistent with the research outlined in the Introduction, which concluded that socialization of young girls in general seems to make them concerned with social relations, whereas young boys are more oriented towards performance (Yee and Brown, 1994).
(Cotterell, 1996), and, as previously mentioned, it is common at this stage to favour one’s own gender (Yee and Brown, 1994). Our findings imply that 10- to 11-year-olds attribute adolescent smoking among girls and boys to different motives. Indeed, moral superiority on behalf of their own gender is alluded to through their negative assessment of the smoking habits of the opposite sex. Since smoking generally is associated with being ‘bad’, pointing out the over-representation of the opposite sex makes one’s own sex appear morally superior, which, of course, also reflects favourably upon the individual.

When describing same-sex adolescent smokers, both boys and girls almost exclusively referred to what has been described in the Introduction as the ‘glamorous’ side of smoking, often conveyed in advertising, rather than the ‘unglamorous’ (and more realistic) side of smoking, more in correspondence with the behaviour of smoking adults encountered in everyday life. Yet it is clearly evident from the dialogue relating to adult smoking that children of this age are fully aware of the ‘unglamorous’ side of smoking. This may be related to the way the young people perceive addiction in children and adults. Moffat and Johnson present clear evidence from narratives that young people who experiment with tobacco do not anticipate that they will become addicted (Moffat and Johnson, 2001). Initially, they perceive themselves to be ‘invincible’ to addiction, followed by a period of ‘giving in’ to the urge to smoke and eventually addiction, at which time young people finally assume the identity of a smoker. For the majority of our respondents, who did not smoke, addiction was clearly conceptualized as part of adult but not child smoking (Rugkäså et al., 2001a). As long as young people do not perceive themselves or their agemates to be addicted, or consider the potential for addiction, there is no reason why their conceptualization of adolescent smoking should not revolve exclusively around the ‘glamorous’, and vastly more attractive aspects of smoking.

That the young people were better able to express reasons why females smoked than why males smoked may reflect exposure to images in the media that glamorize and promote smoking, particularly in magazines targeted at young people. Such magazine images of females smoking tend to be more persuasive than portrayals of male smokers (Amos et al., 1998). Also, as this and previous findings imply, the inherent ‘badness’ associated with smoking can be understood as an attraction to take up the habit (Allbutt et al., 1995; Denscomb, 2001). Accordingly, adolescent smokers appear to be more attracted to ‘negative’ images of smoking than non-smokers (Amos et al., 1998). It has recently been suggested that girls are now adopting a male rationale for smoking, smoking less to enhance attractiveness and more to appear ‘hard’ and equal to boys (Denscomb, 2001). These data do not appear to support this idea, however, it is likely that as our respondents grow older and as more of them gain personal experience of smoking, the meanings they attach to smoking and gender may change to become similar to those described by others among older children.

Adult smoking

Mothers (but not fathers) apparently give children detailed explanations as to why they smoke. That women feel a need to explain their smoking habit may be associated with the cultural notion of femininity and domestic responsibilities (Ortner, 1974; Cecil, 1989), and that putting one’s health (and family budget) at risk may be seen as inconsistent with these responsibilities and therefore in need of justification. In any case, female smoking has become associated with coping with the stress these responsibilities entail, and as the data presented show, mothers appear to talk about this with their children. If talking about smoking and explaining why one smokes is seen as ‘feminine’ (i.e. something mothers, but not fathers do), boys may be reluctant to avail themselves of this rhetoric device, which again may limit the communicative potential of male adolescent smoking when compared with that of females. This may explain why girls made more gender-specific comments compared with boys. Elaborate descriptions were given by both boys and girls of how mothers use smoking to cope with stress and difficult circumstances. Male adult smoking, on the other hand, was not explained in such depth. This lack of focus on understanding male smoking is also reflected in the paucity of qualitative research relating to male adult and adolescent smoking.

That smoking may hold greater communicative potential for females may help to explain why smoking rates for women remain high, while those for males are declining. Consistent with this idea, girls appear particularly likely to take up smoking if their mothers smoke (Amos, 1996). Expressing gender identity, which is a central part...
of personal identity, through smoking-related behaviour (including talking about smoking) may therefore be something that becomes more readily available to girls throughout adolescence. (This is supported by data gathered in pilot focus groups with 16-year-olds conducted in order to design this study.) This tentative hypothesis will be considered through subsequent interviews, as the participants grow older.

CONCLUSION

The reasonably large sample of interviews has provided a rich body of data providing insight into the thinking of a relatively under-researched but important age group. Adolescents perceive that young people smoke for very different reasons to adults, and these reasons are gender specific. There was a high degree of consensus among the respondents in relation to explanations of adult smoking. There was particularly close correspondence among girls and boys in relation to their perceptions of their age mates of the opposite sex. The results show that understanding and interpretation of adolescent smoking depend on the gender of the smoker.

Findings from other studies stress that interventions should be targeted so that young people are reached before they get addicted, at which time smoking becomes an integral part of the young person’s individual and social identity (Amos, 1996; Moffat and Johnson, 2001). Given that gender identity is at the very core of personal identity, and, as the data presented above have shown, that gender ideology and identity impact upon health-related attitudes, it becomes important to integrate this perspective into early health promotion interventions. Issues surrounding gender, individual and group identity provide a context within which to target smoking prevention initiatives. Interventions may need to target narrower age groups than is commonly the case, specifically addressing one gender and taking into account how that group view themselves and their peers as females and males.

ACKNOWLEDGEMENTS

The authors wish to thank the anonymous reviewers for helpful comments. This study was funded by the European Commission DGV.

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