Contributors

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HOW PEOPLE STOP SMOKING: AN EXPLORATORY STUDY

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Mid-American Review of Sociology, 1978, Vol. 3, No. 1:1-15

What happens as people successfully attempt to quit smoking is analyzed with the aid of data from a pilot survey of thirty ex-smokers supplemented by other types of materials. It becomes apparent that stopping smoking was, for most of the respondents, a private and individual process involving conscious self-direction and self-manipulation. From this process the individual emerged as a new person who (1) has completely lost interest in smoking or (2) knows that he will never smoke again.

If the essence of addiction is the difficulty, or inability, of the consumer to discontinue his usage of the drug, then tobacco is surely among the most addictive of practices. The typical smoker can narrate a number of attempts to quit (Sencer, 1976:45), and even some attempts that seemed to be successful for days, weeks, or even months, only to be followed by relapse and a continuation of the practice that is then sustained at a level as high or higher than initially (Brecher, 1972:214-215, 220-228; Hunt and Matarazzo, 1970:76). Under the circumstances it is noteworthy that a significant proportion of smokers do manage to quit, but it is regrettable that there have been so few studies of how these fortunate individuals managed to liberate themselves, for this would add, not only to our knowledge of how to assist others in quitting smoking, but also to an understanding of the mechanisms of human addiction (Schwartz and Dubitzky, 1968; Tamerin and Eisinger, 1972).

Perhaps because smoking tobacco does not seem to offer much intrinsic satisfaction, much traditional inquiry has focused on why people smoke. But the theories which claim to answer "Why?" do not seem to assist those who would not desist.

As with all drug addiction, the investigator encounters a phenomenon that, on the one hand, involves a bioactive substance with physiological effects, and, on the other hand, is associated with pleasant and rewarding social events. If only the former were involved, we could speak of physiological habituation, which could be resolved by abstinence, however enforced, or by aversive conditioning (Gendreau and Dodwell, 1968) or interrupting the conditioning process (Shapiro, et al., 1971). But as smoking is a social activity charged with affect and accompanied by complex symbolism and ritual, *stopping* smoking may become a process of equal or greater complexity.

Recognizing the social nature of drug addiction, much recent innovation has involved the use of groups: for alcohol, Alcoholics Anonymous; for hard drugs, Synanon and kindred systems. While there are some instances of the use of groups to assist participants in quitting smoking (Tamerin 1972), we have not so far encountered reliable evaluations of them, and our efforts to conduct studies of some local groups-for-profit were rebuffed. The study of seventeen "smoking clinics" conducted by Hunt and Matarazzo (1970:76) indicates that the relapse rate among those who attended the clinics was very high. Meanwhile, it remains a fact that a significant number of persons have discontinued smoking on a solo basis and that some persons have abstained for many years and have no intention of resuming the practice.

Most people learn to smoke in a social context, and much smoking continues to occur in such a context. In many work and sociable activities, the cigarette break is normal, and participation in smoking is a sign that one is an accepted member of the group. For many adults, smoking also becomes an essential part of certain particular pleasant and rewarding social events of their lives. In consequence and in contrast, the process of quitting is usually a lonely or private one in which the smoker himself makes the initial and the ultimate decision and in which he finds himself dependent entirely on his own resources. For some the process is so private that they tell no one of their intent until they feel sure that they are never going to smoke again.

For the truly addicted (as contrasted to those who might possibly be only habituated), quitting cannot be approached as the termination of a mechanical habitual act. Given that smoking is a social activity that has rich cultural connotations and that has acquired deep roots in the personality, smoking can only be stopped by a process of willful control (Premack, 1970:114). He who would quit must manipulate, shape, change, or transform himself. It is this process of dealing with the self, rather than with the body as a reluctant but plastic vehicle, that makes quitting such a personal and individualized process. Onlookers to the process may offer encouragement or may scoff and tempt, but control of the process of quitting is not in their hands.

SOURCES OF DATA1

Primarily, the present essay reports upon an exploratory study in which a sample of ex-smokers were interviewed about the process of smoking. The sample is nonrandom but adventitious: graduate students and research assistants interviewed anyone they could contact who qualified: these were persons who had smoked at least one pack of cigarettes daily for three or more years and who had stopped smoking for at least one year. The interview schedule was structured but open-ended and took about half an hour. Thirty-two persons were interviewed and their responses analyzed in depth.

In addition, we have utilized whatever other sources were available in the professional literature. A valuable supplement to the data of our own sample was constituted by the volunteered accounts of ex-smokers that were published since 1973 in the American Journal of Public Health. While these accounts were less detailed than those obtained via interviewing, they did provide materials for comparison.

Our sample of thirty-two persons was composed of 18 women and 14 men; in age ranging from 20 to 74 with a median age of 37. The period during which they defined themselves as "smokers" ranged from three to 35 years, the median being 16 years. Half of our respondents said they had been smoking from two to three packs of cigarettes daily when they decided to quit. Sixty percent said they had made several attempts to cut down before they finally stopped, and about a third said they had

stopped at some earlier period in their lives—for six months to a year—but had resumed smoking until they "quit for good." Thirty-one had stopped as individuals. One woman participated in the "Five Day Plan to Quit Smoking" of the Seventh Day Adventists, and had found it helpful. Seventy-three percent of our respondents said they had not smoked for three or more years.

Our interview schedule was structured on the assumption that quitting smoking was a process that in effect extended over a considerable period of time, given that so many persons who do attempt to quit later resume the activity. We felt that, if the respondent had quit for at least one year, he could then be regarded as someone who had strong likelihood of remaining an ex-smoker. The schedule inquired into some of the following factors: how long the person had smoked; whether he had tried to taper off; etc. We then inquired about the events that led him to quit (this most recent time), and about what had happened during the first few days, weeks, and months of abstinence. Whether anyone had helped or encouraged, scoffed or discouraged. How he felt about those who continued to smoke, and how he felt about himself as a person when he realized he no longer cared or needed to smoke.

While most ex-smokers did agree on a number of points, no two persons described their experiences in exactly the same way. In the process of quitting, there was room and opportunity for considerable diversity.

Because our respondents (and other ex-smokers) are recalling events from the past, there is opportunity for selective memory and forgetting. Unless an investigator has the privilege of following currently active smokers through a process of quitting and then for some months and even years thereafter, there is no way to circumvent this unreliability of recollection. Moreover, the investigator who did follow persons from the status of smokers to ex-smokers might by his very interrogatories affect the process. Of such dilemmas are made the trials of social investigators: no single procedure is perfect, and the present investigation claims only to be exploratory and helpful.

THE DECISION TO QUIT

Many respondents related their final, and ultimately successful, decision to quite smoking to a particular event. For about 23 percent, this event was a serious illness in which their physicians recommended emphatically that they stop smoking, or, told them that smoking would drastically affect their health or shorten their lives. An additional 20 percent stopped because they found that smoking was perceptibly affecting their respiratory system: predisposing toward coughs, aggravating colds and infections, curtailing endurance and decreasing stamina.

About half of our sample related their decision to quit to an event or circumstance not directly related to their immediate condition of health. A young man (husband and father) found that cigarettes cost too much for the family budget, a middle-aged woman stopped after conversion to the Pentacostal religion. Some men and women stopped after reading the celebrated Report of the Surgeon General, or the reports of other research. A woman decided to stop because she could not stand the way her hair and body smelled. Another woman stopped because a friend had died of lung cancer. A woman (who has not smoked for 29 years) explained that she began smoking heavily because she hated her job as a waitress.

The first step was getting a new job and getting out of that atmosphere. I worked as a secretary for a book publisher and in three months I was promoted to working for an executive...I loved my work so much I'd go hours without even thinking of smoking. My image of myself changed too. I felt embarrassed to smoke now.... I really got a good look at myself (as a smoker) and I didn't like what I saw. I had a good job now, nice friends, good social life. What did a cigarette give me?

Another woman, who has not smoked for four years explained that she stopped when she became a member of the Bahai faith "I had new interests in life and my attention was diverted." Subsequently she was helped by going on a field trip to a country where cigarettes were scarce. "I lived down there for two years and had a new style of life."

For several respondents, the process was cumulative:

I had smoker's cough, and my husband didn't like my smoking. Also, the price of cigarettes went up. So I woke one morning, and I just decided to quit.

Finally, there were a few respondents who explained that there had not been a crucial decision or event. Instead, they had debated the pros and cons of stopping with themselves, sometimes over a period of several years, during which time they weighed the evidence and eventually made up their minds that "it wasn't worth the price" or that they no longer "cared to smoke."²

THE INITIAL PERIOD-HEAVILY ADDICTED

Many habitual, heavy smokers described their first weeks or months of abstinence as a period of acute discomfort, using terms like "terrible," "awful," "hell," or, "I went up the wall!" Some added that they were extremely irritable and hard to live with. Nevertheless, it is in this state of misery that these persons resolved—or stiffened the resolve—that they were not going to resume smoking—Come Hell or High Water!—and that somehow they were going to kick this habit and become nonsmokers (Tamerin, 1972). To achieve this transformation, they devised and rigorously imposed upon themselves a "program," that is a discipline, or set of rules, often personal and private or secret.

Usually, they practiced avoidance, staying away from social situations which, they believed, might tempt them to resume smoking. For some, this meant avoiding any sociable gathering where liquor was consumed. Some recognized the temptation to smoke after a heavy and relaxing meal; thereupon, they devised substitute activities, chewing breadsticks or mints; or, in the case of one respondent, giving up dining and subsisting on snacks. Some students or professionals avoided work situations or demanding projects which subjected them to a stress which previously they had handled by smoking. In addition, some combined avoidance with aggression; turning off the TV set when a cigarette commercial appeared; one accepted the cigarettes offered by airline hostesses and then ground them under his heel.

Avoidance has to be combined with more positive measures. Sometimes, these were semi-voluntary, as in the case of the eighteen-year-old highschool girl (not included in this sample) who found that she had to avoid the highschool "smokehole" and could do so only by spending her time in the school library. Not only did she stop smoking, but she improved her grades. Many other individuals reported that they handled the physiological tensions of non-smoking by adopting regimes of physical exercise, or even of taking long brisk walks. Others encouraged themselves at regular intervals by reminding themselves of the monies they were saving, and some spent their "cigarette money" on conveted luxury items or recreational treats.

An integral part of the program involves finding a device to suppress the urge or impulse to smoke. Some persons did this by reminding themselves of the pain in their throat when they had last smoked. Others said that whenever they felt like smoking they consciously put the idea out of their minds. One man said: "I told myself-No! Don't do that!" Several men said: "You've got to watch yourself all the time and be on your guard." Others reminded themselves of the agonies of withdrawal: "I told myself, 'You'll have to do it all over again.' And it was so hard." A woman said, "I feel so good about not smoking that when I think about smoking, I just tell myself how good I feel." One man asked himself: "Who's superior, the cigarette of you?" In like manner a woman would ask herself, "Are you going to be a slave?" A middle-aged man whose physician had told him that continued smoking would jeopardize his health said: "I was driving home from the office and I lit a cigarette and I thought, 'It's not fair to my family '" (c.f. Premack, 1970:115).

That the process of becoming an ex-smoker is, for most people, a lonely and private experience was most strongly reflected in the responses elicited by the question: "Did anyone help or encourage you in your effort to stop smoking?" Many respondents bluntly said "No," and added statements like: "I didn't ask for any (help) nor was any volunteered"; "I was on my own"; "It was my own determination that really saw me through on this matter"; "A person has to decide alone—to quit"; "The only one who helped me was God."

Others said that their spouse or family had supported and encouraged them but, in their other responses, these persons indicated that the initial and ultimate decision to quit was theirs alone, that it was they who deserved the credit for the accomplishment. A few respondents said that they had been helped by the scepticism or the incredulity of their friends and acquaintances. "They didn't think I could do it. Maybe I stopped to show them I did have a little bit of will power." An older woman said that her smoking friends helped her, "Because I didn't want to go back to where they were."

Only a very few people said that their smoking friends had teased them or made fun of them; but, this teasing, they said, had only strengthened their resolution.

THE INITIAL PERIOD-OTHERS

While the distress which we have briefly characterized in the preceding section appears to be typical and normative, we did encounter materials that indicated that some persons had evidently managed to have an easier time. These were the respondents who had spent weeks, months, or years, convincing themselves that they should quit, and who came to an unambivalent decision that smoking was a dangerous, foolish and expensive habit which was not indulged by sensible, responsible, and self-directed persons:

For about two years before I quit, I built into my thinking that this was harmful to me and the prudent thing would be to do without it. There were all the advertisements about smoking being unhealthy. I decided it was a lousy habit, and I was going to quit. I knew (then) I was never going to smoke again. I realized it was a bad habit. I wanted to quit.

These respondents went out of their way to emphasize that they had lost the desire to smoke while they were in the process of composing their minds to quit. Once having so decided, they did not find the quitting particularly difficult. As one put it: "Once I decided to quit the battle was over."

Given the limitations of our data, it is hard to be sure about these folk. None seems to have been a really heavy smoker, and their consumption seems to have been under a pack and a half per day. But, whatever the nature of their smoking, they report that during the first few days of abstinence, they suffered only mild tensions and discomforts, and that they had completely lost the desire to smoke within the succeeding three to six months. Thus, by very definition, these people cannot be said to have been much addicted, at the time that they technically quit smoking; what is unknown, concerning them, is whether or not they would ever have been classified as significantly addicted. If, indeed, they had once been addicted, then we would be encountering the case where a person was able to disrupt the sociopsychological mechanisms of addiction while he was at the same time continuing to consume the drug and therefore maintaining a physiological habituation. In the abstract, this does sound implausible, but so intricate are the operations of the human personality that this sort of case cannot be dismissed as impossible.

Between those persons of the previous section who quit while heavily addicted and those just described seem to be a third group of persons whose withdrawal distress was moderate. Although they had been moderate to heavy smokers, they had wanted to quit for a long time but had been afraid of trying and failing (Tamerin and Eisinger, 1972; Tamerin, 1972). When they found themselves confronting a period of life with less personal stress, they decided to gamble on an attempt to quit, and then to their surprise found that they could maintain their abstinence:

I didn't really want to (set a goal) and then perhaps find myself having to fail because of new demands. I just said, 'Well, let's stop smoking now that the heavy stuff (doctoral dissertation) is over'.... There's something I haven't resolved yet about my attitude and that is, I believe I sort of feared the return if I let myself think about it to much....

A NEW SELF-IMAGE

All successful ex-smokers appear to have acquired a new and

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highly complimentary conception of themselves. We asked them: "When the realization that you not longer cared to smoke struck you, how did you feel about yourself as a person?" Here are some of the responses:

I liked myself as a person when I knew I'd beaten it.

It was a real ego trip for me. I felt really superior (to people who still smoke) because I could sit there and listen to all their rationalizations and realize that they were just so much bullshit.

I feel free; I've found strength in myself I never thought I had.

I was really proud of myself. It was a great feeling of accomplishment.

I felt proud all right. I was thankful for having the strength not to smoke.

I feel wonderful, physically and psychologically... I really feel great because I know I can control what happens to my life to some extent.

I felt like I'd accomplished something. Most people say you can't do it.

I felt great. I had kicked a hard-to-kick habit.

I felt I overcame my worst habit and had complete control of myself.

I said: "Damn! I've beat it!" I don't need it anymore.

It felt good to master it. It was like, "Who's superior, the cigarette or me?" I proved I was.

I felt Super! I conquered an ancient enemy.

Successful ex-smokers responded with derision to a story (within the interview) about a person, who, having resolved to stop smoking, suddenly found himself with a cigarette in his hand, smoking away. This kind of experience, they insisted had never happened to them. Besides, some explained, if that person had really wanted to stop he would have thrown away all his cigarettes (Premack, 1970:117). Some continued:

From the first time I quit I never picked up a cigarette again. . . I have resolved in my mind that I will never do that again.

You have to make a conscious decision.

You know when you want to smoke and you know when you're going to smoke. You have to control yourself.

When ex-smokers were asked what advice they would give to a person who is thinking about giving up smoking, many explained that advice would not be useful because "Everyone must find out what works for him," or "Each person must find the program that is right for him." "What worked for me may not work for the next guy." Most respondents emphasized that one must quit "cold turkey" and a number made statements endorsing self-knowledge and self-direction:

Tell yourself it's what you're going to do. Make every action an action to accomplish your goal to stop.

Be aware of all the habit associated with smoking and be on your guard.

Smokers should think of their self-image, how it has changed with smoking and how it will change when they quit.

Tell them it's not as hard to quit as you imagine. That if you make a determined effort to quit in your mind, it's rather easy to quit.

THE LATER PERIOD AMONG THE ADDICTED

When we talked with our respondents about how they felt long after they had quit the habit, we found that of those who had been clearly addicted, almost half said that they now had no desire whatsoever to smoke. Most of these fortunate individuals could not remember when they became aware that they had lost the desire. A few recalled a specific social occasion where to their astonishment and joy, they realized that they did not want to smoke. On the other hand, many respondents explained that while the intense craving or "physical desire" of the withdrawal period had disappeared, they still felt an occasional urge, particularly at a pleasant social gathering or after a meal. "There are twinges or flashes but they get fewer each year. Sometimes a little something in me tempts me . . . but I don't want to smoke anymore."

Many ex-smokers report that they have lost their tolerance of cigarette smoke and, as the years pass, they tend more and more to avoid situations where other people will be smoking. Some will not eat with people who insist on smoking at dinner. "(After I stopped smoking) I began to realize even more what an obnoxious habit it was. I also realized that smokers are very rude people. I was rude also (when) I forced my habit on others who didn't smoke."

CONCLUSIONS

Other studies have confirmed that many smokers do wish to rid themselves of the habit of smoking and that most have tried several times to free themselves and have failed. Yet, even if tobacco smoking is that strongly addictive, it is also true that a significant minority of persons do manage to kick the habit and achieve this on a solo basis. Our pilot study indicates that there is no easy way to achieve this victory and no simple formula. But it does direct attention to the inner dramatic scenarios which underlay the activity of smoking and to the activities and imageries which are used by those who successfully liberate themselves.

Perhaps the clearest strategy is that which combines the struggle to quit smoking with changes in life style, social status, and social relations. A change in life style can easily be integrated with a change in the image of the self and in the dramatic scenarios by which the person conceptualizes his activites. If the new self is visualized as a non-smoker, the activity of smoking is more easily brought under control and terminated. Most persons who commence a campaign to quit smoking do not begin with such a clear image of the task to be performed, but, we would hazard that most who succeed do so, because in extremis, when they discover how addicted they have been and are, they mobilize their psychic energies to manipulate and transform their selves. At this point they manage to convince themselves that smoking is not only unattractive, unenjoyable and stupid, it is also an activity which persons of their status, caliber, and intelligence, do not condescend to perform (c.f. Premack, 1970:115, 117). To confirm this new imagery, they devise a discipline which they impose rigorously upon themselves, and so, in a few months, they discover that they have liberated themselves both physiologically and psychologically. As they perceive themselves being victorious, they reinforce their discipline, and they take pride in their demonstration of control over themselves and their fate.

Our small survey and these speculations leave unresolved as many questions as they raise. The present would seem an excellent time to conduct further investigations among those who are trying to quit smoking.

But for those who do make the attempt, we would suggest that they be guided by the following advice. While the process of quitting is difficult, so many have achieved it that almost anyone else can also do so. Quitting smoking is more than the discontinuation of a habit, it is the piecemeal and difficult construction of a new self, which requires care, planning, vigilance, and forethought. Because quitting smoking requires the creation of a new self-image, the task cannot be done for the individual by another, or on the orders of another, but must involve the inner resources of the actor himself. "One must agree with oneself to stop smoking" (Sideman, 1976). During the period of quitting, there are a graded series of difficulties and temptations; the task is

not achieved in one day, or one week, or even one month, but requires weeks and months of effort, although the earliest days are indeed the most difficult. But, if one perceives the process as emerging a new person with new control over one's self, then one can accomplish the goal. If this advice sounds akin to that directed toward a religious conversion, this parallelism is the case; quitting smoking is akin to a private rite of passage, in which the individual emerges as a new person.

NOTES

- 1. The authors acknowledge the assistance of Greg Carlson and Shirley Wesley: Carlson conducted many of the interviews; both he and Wesley assisted in the bibliographic search.
- 2. Only one of our respondents said he had stopped smoking because an acquaintance had been adversely affected by smoking. However, one person said he was influenced by the fact that both his father and grandfather had suffered from emphysema.

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