# SOCIOLOGY OF HEALTH & ILLNESS

# Becoming a 'real' smoker: cultural capital in young women's accounts of smoking and other substance use

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**Abstract**     This paper draws from a qualitative study of tobacco use by young women in Toronto, Canada. Narrative interviews were used to understand the multiple roles and functions of smoking within the everyday lives of female adolescents. Guided by a Bourdieusian theoretical framework this study employed the core construct of cultural capital in order to position tobacco and other substance use as field-specific capital that young women accumulate while navigating the social worlds of adolescence. Departing from the psychosocial or peer-influence models that inform the majority of tobacco research with young people, this analysis provides a nuanced understanding of how smoking, drinking, using drugs are much more than simple forms of teenage experimentation or rebellion, but can also serve as key resources for defining the self, acquiring status and making social distinctions within adolescent social worlds. In this context it is also argued that initiation into substance use practices is a way that young women demonstrate and develop social and cultural competencies.

## Introduction

Despite previous work citing the need for critical social science approaches to female adolescent tobacco use, sociological engagement with the topic of young women's smoking remains scarce (Daykin 1993, Wearing *et al.* 1994, Eakin *et al.* 1996). Even though the qualitative research literature on smoking by girls and young women has expanded considerably within the last decade, there is a lack of empirical work which employs social theory (for exceptions see Jetté *et al.* 2007, Gilbert 2005, 2007). This gap within tobacco research stands in contrast to the critical literature addressing young adult women's use of illicit drugs and alcohol, in particular research that examines gender and substance use through the lenses of youth cultural and post-structuralist theories (*e.g.* Measham 2002, Hutton 2006). Contrary to the developmental and risk-behaviour orientations of psychosocial research, this scholarship positions young women's substance use as a collective social practice, linked to their expressive cultures, consumption styles, and leisure activities (Room and Sato 2002). Although tobacco researchers have long recognised that adolescent smoking is primarily socially motivated, there is still a sense that not enough is known about the cultural aspects of youth tobacco use (Tilleczek and Hine 2006), and that more

explicit theorisation of the cultural symbolism (Nichter 2003) and social contexts of smoking are required (Poland *et al.* 2006).

The need for greater elaboration on how social and cultural contexts shape smoking status is a particularly salient issue for adolescent smoking research, where it has been demonstrated that school-based prevention focused on information-giving and developing student social competencies has limited long-term efficacy in reducing smoking initiation (Thomas and Perera 2002, Wiehe *et al.* 2005). The general failure of the health education and promotion fields to apprehend the social landscape of contemporary adolescence has also been evident in gender-specific tobacco programming, as prevention directed towards girls operated under a misguided assumption that female adolescents smoked because they lacked self-esteem or social skills (Gray *et al.* 1997, Michel and Amos 1997). Rather than positioning young women as the passive recipients of peer-influences, the decision to smoke can be seen as an active choice that demonstrates one's social competence in navigating the terrain of peer relationships (Poland 1995, Baillie *et al.* 2005), and as a powerful identity tool that 'both conveys information about who you are and who you are not – contingent on when and where you smoke and with whom' (Nichter *et al.* 2006: 234). In extending the theoretical underpinnings of these earlier critiques, we pay particular attention to calls to consider the capital and strategy present in women's substance use, and seek to challenge views of tobacco and other drug use as a necessarily disempowering female social practice (Ettorre 2007, Rajah 2007). We propose that Bourdieu's theory of cultural capital may broaden our understanding as to why young women initiate smoking, and why these behaviours are sustained over time in spite of their exposure to considerable messaging about the health consequences of tobacco use.

Drawing on narrative interviews with young female smokers aged 16 to 19, we develop a Bourdieusian analysis of young women's smoking practices and the social logic of their substance use. Following an introduction and overview of how Pierre Bourdieu's sociology of capital has been applied in other research on youth smoking, we show empirically how identifying as a smoker operates as a source of cultural capital and marker of social distinction. This begins with a consideration of the narratives around learning to smoke and findings that emphasize the imperative of presenting oneself as a natural and authentic smoker during adolescence. In addition to exploring how participants frame their efforts to moderate their tobacco use, findings on young women's experiences with other drug dependency show how addiction was recast by some participants, so that it confers identity, capital and status during the transition to adulthood. In conclusion, we discuss implications of our work for tobacco research and prevention efforts directed towards adolescent women.

## Theoretical positioning

### Habitus and field

In Bourdieu's framework, socialisation occurs through the habitus, inculcated through experience, habit, or gentle and repetitive actions; as unconscious social conditioning rather than deliberate indoctrination (Bourdieu 1984). Dispositions and tastes are not norms to be internalised, but are embodied schemes of classification brought to life through people's practices and ways of being in the world (Bourdieu 1990). In addition to viewing collective social distinctions as generated through practice, Bourdieu's social praexology entails a view of habitus as reproducing dynamics within relatively autonomous fields of social action (Williams 1995). Fields are defined by sets of historical relations between social

positions, anchored in certain forms of power and capital (Bourdieu and Wacquant 1992). Internal to each field there are unacknowledged assumptions or 'rules of play' that structure action therein. To this end, there is an implicit logic to practice, as all action 'makes sense' when considered within the context of habitus and field (Bourdieu 1990). For the purposes of our work, we take field to include the social context of adolescence, constituted by young women's relationships, informal group distinctions, and practices around smoking and other substance use. As such, we argue that tobacco use entails social distinction and capital specific to adolescent social fields.

*Cultural and subcultural capital*
In Bourdieu's (1986) model of capital, less tangible sources of advantage such as knowledge and skill are incorporated into an economic framework (Brown 2005: 90). Cultural capital encompasses 'educational capital, social background and the cultural tastes fostered in personal and parental educational experiences' (Veenstra 2007: 16), and is a capital 'whose acquisition is disguised, making it difficult to determine how one acquired it' (Clay 2003: 1349). When recognised by others as aligned with the values of the field, cultural capital takes on a symbolic form, producing bearers of said capital as 'visible, admired and invited', as social leaders or 'taste-makers' (P. Bourdieu 2000 cited in Jarvinen and Gundelach 2007, Allaste 2005). While seemingly transparent, the acquisition of cultural capital is not a passive process of accumulation as there are struggles for capital and status, with dominant groups invested in securing their ascendancy within a field (Bourdieu 1986). Acts of consumption are then very much socially-loaded for Bourdieu, as 'taste classifies' (1984: 6) by enforcing social boundaries and legitimating power.

Repositioning Bourdieu to allow for 'a system of meaning and values that operates according to an alternative teen rationale' (Forman 2004: 73), Thornton (1996) developed the notion of *subcultural capital* to explain how youth cultures produce social distinctions that are unique to adolescence. For Thornton, capital is not tied to elite cultural competencies, family background, or education. Rather, it is 'hipness' or being 'cool' that is the major currency amongst adolescents; a somewhat elusive and symbolic capital present in multiple signifiers and scenes (see also Danesi 1994). Hence, acquiring subcultural capital is not about adopting a singular style or practice, but is produced by demonstrating that one is 'in the know' (*i.e.* au courant, in style). Just as Bourdieu's elites deploy cultural capital to distinguish themselves from the undifferentiated masses, youth cultural distinctions also entail acts of symbolic domination, as one social group asserts authority and superiority over another (Thornton 1997: 201). Put simply, it is through separating the cool from the 'uncool' that young people jockey for power and demonstrate their competency in particular social fields (Forman 2004). This kind of dynamic was revealed by Michel and Amos (1997), who showed how young female social leaders used tobacco to cement a top position within the adolescent social hierarchy or 'pecking order'. In critiquing the traditional social deficit approach to smoking prevention with teen girls Michel and Amos's paper echoed previous insights of youth culture research, wherein tobacco use was viewed as a consumption practice or 'style tool' that communicated identity and status amongst adolescents.

*Social theory in research on adolescent smoking*
Willis's (1977) study of working-class young men in Britain was perhaps the first attempt to unpack the symbolic dimensions of smoking through the lens of youth culture theory. Alongside clothing styles and drinking practices, cigarettes were tools used by the 'lads' to demonstrate masculinity, and as stylistic resistance to the school culture (Scheffels and Lund 2005). With the notable exception of two Canadian ethnographies (McCracken 1992,

Connop *et al.* 1999), the influence of youth cultures has been conceived of simplistically in most tobacco research, as identity categories or group labels used to classify smokers in the context of school-based surveys (*e.g.* Van der Rijt *et al.* 2005).

Interest in Bourdieu's work has been growing amongst tobacco researchers. His work on social distinctions (Bourdieu 1984) has been used to advance an understanding of the cigarette as a symbol, fashion or taste that demarcates group boundaries (Pampel 2006: 21). Similarly, Quintero and Davis (2002) view smoking as a consumption practice that 'generates symbolic capital and social position within adolescent cliques and crowds' (2002: 453). Measures of cultural capital have also been employed in tobacco surveys designed to model youth smoking as a culturally conditioned preference. Focusing on differences between recreational and regular smokers (Krange and Pedersen 2001), or occasional and daily smokers (Scheffels and Lund 2005), this research has provided empirical evidence for the differentiated meanings of tobacco use, and how smoking frequency and intensity can vary according to personal and parental indicators of cultural capital. Key to all of this work is the finding that for young people from comparatively advantaged family contexts, smoking is an exercise in both social distinction *and* self-control. Smoking occasionally allows privileged teens to display an anti-establishment sensibility (Krange and Pedersen 2001), and also to distance themselves from the marginality they associate with being a regular or addicted smoker (Scheffels and Lund 2005: 453). But whereas tobacco researchers have recognised the value of Bourdieu's theoretical perspective, his work has yet to be applied in qualitative research capable of further unpacking the social and cultural context of tobacco and other substance use (Nichter *et al.* 2004). The broad theoretical objective of our research was to adapt and assess the contributions of Pierre Bourdieu to theorise young women's smoking as social practice, employing concepts including habitus, cultural capital, and symbolic violence in analysing young women's narratives. Drawn from a larger qualitative study termed the *Smoke In My Eyes* project, this paper reports on findings that suggest how female adolescent smoking can be a form of cultural capital.

## Study description

### Sampling and recruitment

Ethical approvals for the project were granted by the University of Toronto and the Hospital for Sick Children. Data collection took place from April 2005 to February 2006. The sample was purposive and theory-driven, seeking to include a range of adolescent smoking experiences and participants (Patton 1990, Creswell 1998). We targeted girls aged 16 to 19, who had smoked in the last 30 days, and had consumed at least 100 cigarettes in their lifetime. The recruitment strategy was adapted from an urban marketing technique known as the 'Street Team', employing a young female recruiter to hand out flyers at events and public places where young people congregated. Flyers were also placed at organisations including a youth employment centre, a community centre, and in one case a high school. This was supplemented with snowball sampling as participants referred their friends to the researchers.[1]

### Data collection and analysis

Both narrative and visual methods were employed in this project. Each young woman (n = 25) participated in a semi-structured in-depth interview, which typically lasted 45–60 minutes. Open-ended probes were used to solicit descriptions of smoking in relation to family, friendships, romantic relationships, and informal social groups. Interviewees were also given the opportunity to take part in a photography component, using an approach

adapted from the participatory action research method 'Photovoice' (Wang and Burris 1997). Using simple digital cameras (provided), participants were asked to take pictures about how smoking fits within their lives. They were then invited to attend a follow-up group to discuss common themes in their imagery. Analysis of the visual data is being written up for publication elsewhere.

Following data collection, audio recordings of the discussion group and the individual interviews were transcribed verbatim and checked for accuracy. Electronic coding of the transcripts and other textual data (*i.e.* participant photograph captions) progressed from seven broad parent nodes based on the general interview topics and core Bourdieusian concepts guiding this research (*e.g.* habitus, capital), to a more complex system of almost 50 child and grand-child nodes organising sub-categories within the data.

*The participants*

Over half the young women recruited for this study were in their late teens (18–19 years) and 10 were in their mid-teens (16–17 years). In a brief pre-interview survey, the majority identified as white, with one participant who identified as Asian, and another who stated she was multiracial. All but three participants indicated that they were born in Canada, and only one had a first language that was other than English or French. Most young women (18) were living with their parent(s) full time when they participated, and the remainder were living independently outside their family homes, cohabitating with a partner, or temporarily staying with a relative or friends. No data were collected about the participants' or their families' socio-economic status. However, based on details shared in their narratives and photographs, we subjectively characterised most participants as coming from family backgrounds of mid- to high social and economic status (19), and the remainder as lower status, or comparatively disadvantaged.

That our study recruited more young women who were in their later teens may reflect recent national survey data from Canada, which indicate that females aged 18–19 are more likely (17.6%) to be current smokers than those aged 15–17 (11%) (Health Canada 2006). Nevertheless, there was a range of daily smoking levels in this group, from a single cigarette to a package per day, with most participants reporting smoking about 12 cigarettes per day. The age at which participants had first tried smoking ranged from nine to 16 years, but many had had their first cigarette between the ages of 12 and 14. Almost all the young women had been smoking for more than two years, and only three had been smoking for less than one year when they participated. Most participants (20/25) stated that they had at least one immediate family member who was a current smoker, and several claimed that they were also permitted to smoke inside their family homes, regardless of whether their parents were also smokers. Without diminishing the potential roles played by family relationships and the domestic field in shaping young women's tobacco use, our analysis sought to understand how the social relations and cultural contexts of adolescence shaped smoking initiation and status.

## Adolescent substance use as cultural capital

*Becoming a smoker*

Generally, young people demonstrate their possession of cultural capital and secure their position within social hierarchies on the basis of what and how they consume (Thornton 1996). To this end, young women's narratives of learning to smoke and their attempts to embody 'smoking cool' can be read as the accrual of capital, or the acquisition of social skills and

competencies that serve as markers of distinction (Bourdieu 1986). Some young women portrayed themselves as coming to smoking with an existing cultural knowledge or 'smoker's capital', a natural affinity for smoking thought to occur by virtue of one's previous exposure to tobacco in their home or community environments. Likewise, through their experiences and interactions with other young tobacco users adolescents described building up their smoking identities and the capital which resulted from being recognised as skilled or 'real' smokers (Quintero and Davis 2002).

In the interviews, participants were asked to recall the memory of their first cigarette and to tell the story of how they began to smoke. Given the adolescent imperative to portray oneself as above overt social influences (Jetté *et al.* 2007), it was not surprising that there were few descriptions of having consciously to learn or be taught how to smoke. On the contrary, many stated that smoking came to them easily through watching others:

> At first I wasn't sure if I was like inhaling it properly so I was like . . . okay, this is how. Nobody really just taught me how. I just learned it with time by myself I guess . . . I usually watched other people how they smoked, definitely. I was like, okay . . . That's pretty simple (Danielle, 17).

The narratives reinforced the idea of being a self-taught smoker, learning through observation and repetition, rather than active instruction. As explained by one participant, this might take place privately in the company of a friend who was also a new smoker, who provided a type of social mirror and peer mentorship. Tanya described a more self-directed process of experimentation:

> I can't really remember . . . I probably did (practise) though . . . Like making sure I held it right and making sure I ashed properly and like all the different ways to hold it and the different ways to ash your cigarette, and like the different ways to put it out and like everything, like. And I guess after a while I just out formed my own way about how I smoke and how I put it out and everything else (Tanya, 19).

Seventeen-year-old Brynne also described learning to smoke as incorporating unconscious bodily competency through practice, as: 'I think it just came with time, like the more I smoked, like you learn how to inhale . . . like now it's just to the point that you don't even notice'. This process of moving from beginner to experienced smoker relies heavily on exposure to the range of practices associated with tobacco use, and also on access to informal cultural knowledge about how smoking is 'done' in adolescence. As described by participants, learning to smoke involved a subtle or gradual inculcation into a 'smoker's habitus', through observing other smokers in their families and social networks. Although some projected a sense of nonchalance about their first experiences with tobacco, others were more forthcoming about their desire to be seen as smoking correctly, especially by adolescents they viewed as possessing greater smoker's capital:

> I would sit there in the room, we were all sitting there and I would like kind of light a cigarette, but I knew, it was really like nerve-wracking for me because I didn't know how to do it and everyone else had been doing it already and I kind of just looked stupid . . . I knew they noticed . . . but they didn't really say anything (Renée, 18).

Renée highlights the need for new smokers to develop smoking skills quickly and quietly, to avoid 'getting caught' and receiving a dreaded social corrective from peers (Banwell

and Young 1993). As told by Kyra, once she had established competency she could easily recognise an inexperienced smoker:

> I was a painfully awkward smoker for the first while because you can tell by looking at someone if they have just started smoking . . . Like they don't really inhale and you can see in the smoke that they don't inhale and they hold it really awkwardly . . . You could completely tell, I was like that for like a week . . . It's hilarious now because when I see people like that I'm thinking, I was like you (Kyra, 16).

As we have argued previously, 'smoking is not only a social practice but also a bodily one, in that how the cigarette is held and smoked can demonstrate bodily competence . . . that must be acquired through practice' (Poland *et al.* 2006: 61). The need to be seen as a 'real' smoker is particularly evident in the narratives of younger tobacco users, some of whom are still struggling with their smoking technique and comportment, attempting to 'get it right' and pass as more relaxed, competent and experienced. In Renée's case (quoted above), age and gender differences contributed to her initial awkwardness with cigarettes, as a new smoker amongst a group of older males, friends of her then-new boyfriend.

In considering the distinctions young women made between themselves and more experienced smokers, a Bourdieusian analysis further illustrates how adolescents signify cultural capital through mastering the largely unspoken knowledge around the correct way to smoke (McCracken 1992, Plumridge *et al.* 2002). Likewise, smoking can also symbolise one's initiation of 'grown up' practice as 'the subtle *bodily schemas* incorporated in the cultural practice of smoking [are] *osmotic reflexes* of the transition into adulthood' (R. Danesi 1993 cited in Krange and Pedersen 2001: 170, emphasis in original). For Mackenzie, this consisted of moving from what she termed 'fake' smoking when first experimenting during pre-adolescence (*i.e.* not really inhaling), to 'real' and regular smoking as a teenager. Although not everyone would admit to smoking incorrectly or to faking it, this fake/real distinction points to the imperative of demonstrating a seemingly effortless skill with cigarettes as a key aspect of the cool adolescent's social repertoire. Consequently, smoker's capital is not only about doing it right, but is also about doing it for real, as self-conscious smoking does not carry much weight among adolescents.

As stated previously, among this group there were those who came to the field with greater initial smoker's capital, stemming mainly from cigarette use in their home environments. As shown by Moffat and Johnson's (2001) narrative study, female adolescents may have strong recollections of watching their mothers smoke, and therefore view their own smoking as a family-based practice or as 'history repeating itself'. For example, in our study two participants described being influenced by their mothers, and mimicking their smoking as children using crayons or pencils. Michelle also said she was smoking 'fluently' by the age of 12 or 13, attributing this to growing up in a home where both parents smoked. Likewise, Winona who had begun to smoke at age fourteen stated:

> I'd been around smoke like a lot in my life. My mom smokes and like her boyfriend smokes, so like, I don't know. And I'm just like walking around, like everyone's smoking like outside like around the neighbourhood. So I guess it's not like I really like looked and like sat down and like watched them smoke, but like just something like on TV and movies, like you just see it, pick it up . . . I was pretty, like I knew what I was doing the first time I did it. It's not like anyone like taught me how (Winona, 16).

Winona draws from multiple sources to establish her smoker's capital, including her family, neighbourhood, media exposure, making a case for smoking as something that came to her naturally given the circumstances of her childhood upbringing within a relatively privileged context. While the focus of this paper is the adolescent social field, it should be emphasised that in Bourdieu's social praexology, the domestic field functions as the primary arena for the transmission of capital, with resources passed from parent to child to ensure the social reproduction of the family and its members (Bourdieu and Passeron 1977). This does not imply a deterministic model of socialisation, or that young people are cultural dupes who blindly adopt the social and health practices present within their families of origin. On the contrary, in the domestic or family field, habitus reproduces certain practices as normal and natural for its members (*i.e.* what is right for us, what 'we' always do).

Outside the family context, another teenager (Wanda) described smoking initiation as a major social activity for young people in the government-subsidised housing project where she grew up:

> Whoever got a cigarette from wherever, we'd all come together and we would smoke it. And it would be like a social event. We'd all get into like a crowd and we'd be hiding somewhere, you know, smoking our cigarette and we'd learn different things, especially from the older people who were there, who were the more experienced smokers. We would learn like how to hold a cigarette in our mouth without using our hands and how to blow smoke out your nose and things like that . . . (Wanda, 19).

Wanda was one of only a few participants who spoke of receiving direct instruction from peers. Yet as she suggests, an important aspect of this teaching and learning dynamic among adolescents is that older or more experienced smokers might also derive status and capital by having younger teenagers emulate them, and through being sought after to share their skill in smoking. In this way, a Bourdieusian reconsideration illustrates that learning to smoke may not be the product of overt peer pressures, but is a much subtler process of adolescents acquiring capital specific to their social and domestic fields.

*The capital in addiction*

While adolescents are exposed to significant cultural rhetoric regarding smokers as stigmatised and morally deficient (Bottorff *et al.* 2004), in this study the 'addict identity' associated with smoking was recast by some to take on more positive connotations. As the qualitative tobacco literature has shown, young women's descriptions of tobacco addiction are more fluid than adults', as they tend to move between different categories of smoking (Moffat and Johnson 2001). For teenage smokers, adoption of the 'addicted smoker' label is linked to the degree that tobacco use has been integrated into their daily lives and identities, rather than to actual physical dependence (Johnson *et al.* 2003).

Participants made frequent reference to addiction, although the interviewer was careful not to introduce this terminology. A range of viewpoints was expressed concerning what constituted addiction and the implications of being an addicted smoker. Below, one young woman expresses ambivalence:

> I don't feel like, some days like, when I work, I don't need one all day. Like I don't physically need a cigarette. But sometimes, it's like I'm not addicted but I am. Like, sometimes I do like, I feel that I need it . . . I think it's all about how, like your willpower.

> I don't know, 'cause like, I think I could easily quit if I wanted to, like right now. But it's just like when you're around it, it's the type of thing that once you've been doing it for a while . . . like you want to stop and then you see somebody smoking or just like, 'I'll just have a cigarette' (Renée, 18).

Other participants explicitly labelled themselves as addicts, or employed language that referenced dependency. This included speaking of being 'in need of a fix' to describe nicotine withdrawal, or needing to 'kick' the tobacco habit. The notion of addicted smoker as a capital-bearing identity was a subtle thread present in the findings, as there were young women who appeared to relish their experiences of craving or 'fiending' for cigarettes. Just as learning to smoke with minimal effort was central to smoker's capital, some also seemed to view addiction as a marker of authentic smoking. Winona explained her rationale for feigning addiction as a beginning smoker:

> Like, I liked it and I enjoyed it, it was like, socially. And I guess I just like kind of pretended I was addicted, like, 'Oh I need a cigarette.' but it's all like, 'I'm a smoker now I need a cigarette.' But now that I think about it, I think it actually took me a year and a half to get addicted. Like the stupid year and a half (Winona, 16).

Based on their descriptions, one can assume that many participants would not meet formal criteria for nicotine dependence, given that their smoking was often episodic, punctuated by interruptions, limited supply, and tied to sporadic social engagements. Regardless of the presence of physiological dependence, these data highlight the social significance of addiction, whereby adopting the identity and practices of an *addicted* smoker confers legitimacy and status in the eyes of others.

Although addiction was typically portrayed as a loss of control, there were some who indicated that learning to manage addiction was a valuable skill acquired through practice. As suggested by Johnson *et al.* (2004), young and beginning smokers actively engage with strategies to limit or moderate their tobacco use. Below is Morgan's account of this process:

> I don't want to be smoking for the rest of my life, even if I don't feel like I am addicted. Like right now I feel addicted. But when I quit last time I didn't feel addicted, it's just that I would, (then) one weekend I had, like from Friday night to Saturday night I had like a pack and then I also bummed so I probably had like a pack-and-a-half, a pack and like a quarter or something. So like 32, 33 cigarettes. And I felt that was too much. That wasn't how much I wanted to be smoking, so I quit for a while because I didn't want to be smoking six packs a week (Morgan, 16).

In addition to highlighting fears about becoming permanently addicted, Morgan's narrative suggests awareness that smoking may no longer be a source of capital as she grows older. Similarly, another participant made the astute observation that contemporary anti-smoking messaging works to diminish smoker's capital, perpetuating the view that smokers are powerless in the face of their addiction:

> I think one of the major problems with or reasons that smoking persists in society is the fact that people are telling them how hard it is to quit. 'Oh, my God, it's so addictive', blah, blah, blah. So people get it in their heads as soon as they start smoking, 'Oh, God, I'm an addict, I'm never going to be able to quit' (Yvette, 18).

As Yvette suggests, definitions of addiction employed by tobacco and health campaigns may lack resonance for many young people and may undercut their sense of agency by denying or ignoring their skill in managing their lives. In addition to being somewhat out-of-step with the cultural currency of addiction within adolescence, the promotion of abstinence-only approaches also fails to capitalise on opportunities for tobacco harm minimisation, and strategies that build upon young people's existing efforts to monitor, reduce and control their smoking (Johnson *et al.* 2004).

In relation to the theme of addiction, some participants disclosed other substance use, and described how trajectories from dependence to recovery provided them with valuable life experience or adult survival skills. About a quarter of the young women said they had experienced significant problems with the use of other drugs or alcohol. Within this group, two participants had recently been in residential drug treatment programmes, and the rhetoric of addiction and sobriety figured prominently within their narratives (*e.g.* 12-steps recovery principles such as, 'one day at a time') (Warhol 2002). For one young woman, the recovery experience entailed status and a profound sense of accomplishment:

> I'm turning 17 soon, so I grew up really, really fast. But um, but it's really cool because I experienced it and like, even though it's not a good experience, and I regret it every day for like going through that, but it's like a really big like, like achievement . . . None of my friends have been through what I've been through (Bronwen, 16).

Despite drawing strength and self-insight from recovery, Bronwen also described the stigma and moral judgments she encountered:

> And it sucks because like now that you have, like a 'recovering drug addict' is like a title. It's like people don't look at you the same. Like some people still don't respect me for what I did, but it's okay. I don't have to gain their respect, I have my own respect . . . Or when you're trying to have a serious conversation with them, they'll treat you like you're invisible. 'Cause like 'Oh, she doesn't know what she's talking about' . . . I'm like 'I may not be like book smarts and all that, but I know myself and know how you people are'.

Not all narratives of addiction included a redemptive discourse of recovery as personal achievement, as this appeared to be limited to young women from families with increased access to economic and social capital. For some such participants, addiction was framed as a minor derailment typical in adolescence:

> And so we went to parties and stuff and it just happened that I started doing drugs and they took over because everyone was doing them. And so I was like 11 and I was doing acid and I was, later on I was selling stuff and I was sleeping around to get money for stuff. Like I went through that horrible 'Montel' (television talk-show) stage for years of my life. I'm 17 and I can say I've gone through all that and I don't do it any more (Danika, 17 years old).

For Danika, it appeared that her path to becoming an adult involved 'messing up,' going through a 'bad' stage, before getting her life back on track. So while status as a recovering addict might provide a sense of accomplishment and life experience, the ability to draw from other hard sources of capital undoubtedly plays a role in orienting young women towards a successful and addiction-free future. For example, Danika's parents were able to send her on a student exchange overseas once she had completed drug rehabilitation, to 'try and straighten me out', as she described it.[2]

Finally, there were also participants who intuited that the cultural capital associated with substance use was perhaps limited to adolescence, and that modifying their smoking, drinking or drug use would be prudent as they moved into adulthood. In her last year of high school, a participant from a higher-status family background described her experiences navigating between different groups of 'normal' versus 'party' friends:

> I have only two girlfriends that I'm best friends with going to university next year, and they're the ones who aren't smokers . . . And tend to not smoke marijuana and tend to not go out every night drinking. So I'm really proud of them for that, but all of my other close friends are the people that I hang out with in the neighbourhood aren't going to university, and not really excelling in school. So I wouldn't classify them as anybody. They're good people but . . . I think 'cause we all like to, we're all used to the old like, young party age, so we've kind of grown up being around that (Carrie, 18).

By contrast, although Wanda was from a very disadvantaged family context and had left secondary school early on, she held views similar to Carrie's regarding the social distinctions between smokers and non-smokers:

> Well, back then I wouldn't have looked at it as oh, the 'bad crowd,' but now, 'cause I'm older, and I realise that education is everything, you can't do anything without education. That's why I look at them and I categorise them as the 'bad crowd' because you know, they're not doing good if they're out, you know, smoking and hanging out and, you know, just talking and you know, I guess partying when they're supposed to be in school . . . (Wanda, 19).

These excerpts suggest that the factors linked to young women's social success and status in adolescence can run counter to the cultural capital typically theorised as contributing to their academic achievement and upward social mobility. Outside the educational field, learning how to juggle social and academic roles, and having the ability to party without having it interfere with school and other responsibilities is another way that young people's substance use can entail a field-specific capital and skill. Yet there is also a need to consider that for those with diminished access to other capitals, tobacco and other substance use might function as identity resources they are reluctant to leave behind as they become adults. As argued by Pilkington (2007) there are ongoing tensions between structural and cultural explanations within sociological research on youth cultures and drug use, and a need for an approach that considers substance use as socially embedded practice that 'individuals and groups enact, not only as responses to, but as strategies for negotiating and shaping, their structural contexts' (2007: 223).

## Discussion

Employing a Bourdieusian approach in this research provided a way to theorise the enduring – and yet context- and field-dependent – status associated with smoking for young women, while anchoring tobacco and other substance use within the field of adolescence. This approach poses a challenge to mainstream social deficit or deviance models, which posit a lack of competence (to understand the risks, to say no, to resist peer pressure) amongst young people. In contrast, the young women in our study clearly comprehend and mobilise themselves around a logic of substance use practices and an understanding of the

benefits afforded to young people who can demonstrate smoker's capital. Rather than a practice that is subcultural or counter to the mainstream values, it is perhaps more useful to see adolescent substance use as generating a capital that operates within a specific social field, albeit one that lacks legitimacy in the adult world. Indeed, as Thornton's work recognises, the logic of subcultural capital as an alternative hierarchy is intended to keep adult sources of social distinction such as class, income and occupation at bay (1996: 105). While providing a useful consideration of the meaning and value of smoking, the paradox is that young women's possession of cultural capital around substance use also has the potential to contribute to forms of future health and social disadvantage (Jetté *et al.* 2007), and is a capital that has little symbolic trade value in other contexts (Jensen 2006: 268). Competence in tobacco and other substance use also requires of adolescents that they learn to navigate the boundaries between safe and risky use, pleasure and harm, recreation and addiction – issues faced by persons of all ages who smoke, drink, or use drugs. Another, subtler point raised by these findings, is that young women were engaged in a process (as are all smokers) of determining when smoking is likely to function as capital, and when it is likely to be a stigmatising liability. Thus, beyond the potential ageing-out of smoker's capital, in the context of their current interactions with adult authority figures, with non-smokers, or with other 'anti-smoking' youth, young women may feel obligated to demonstrate their fidelity to discourses of smoking as unhealthy, and as a 'bad' habit or an 'ugly' addiction. As other results of this study have demonstrated, young women position their smoking as a socially distinct and embodied source of pleasure (Haines 2008), flagging the need for tobacco control and health promotion efforts to give greater consideration to how young female smokers perceive the positive and pleasurable aspects of their tobacco use (Gilbert 2005, Scheffels and Schou 2007).

Counter to the logic of increasing formal, school-based tobacco and drug education initiatives for adolescents, our Bourdieusian interpretation suggests that skillful substance use is not formally taught, but is knowledge and experience that circulates within informal social fields. Thus, we contend that interventions based on 'denormalisation' or stigmatisation may prove ineffective in disrupting the cultural capital of tobacco use among adolescents. Indeed, anti-smoking messaging and representations of smoking as unhealthy and dangerous may actually reinforce the allure of this practice for some young people. Especially for those that may be socially or economically disadvantaged, universal efforts to denormalise tobacco can have the effect of further entrenching smoking in the lives of adolescents who may find themselves excluded or alienated by social practices which are typically linked to health, success and social mobility. However, to the extent that young women in our sample indicated that social capital was also acquired through status as an ex-addict, there may be opportunities for cultivating an 'ex-smoker' identity for adolescents.

In conclusion, we believe that a key implication of Bourdieu's (2001) theoretical stance is that research, practice and policy that fail to be reflexive about the social context of people's lives, or that demean or otherwise neglect the value and function of peoples' situated practices can constitute a type of 'symbolic violence'. On the other hand, treating young people as socially competent individuals, responsive to the exigencies of their (sub)cultural field, may be counter-intuitive for a field that has vested so much energy in casting smokers as lacking in knowledge, skills or willpower or as victims of the tobacco industry (Poland 2000, Poland *et al.* 2006). Through a Bourdieusian lens, recognising the socially embedded and status-bearing nature of substance use (Westhaver 2005) requires increased reflexivity on the part of tobacco researchers, in terms of how we conceive of youth 'at risk' for substance use and the assumed irrationality in their smoking initiation. Rather than positioning cigarettes as *only* risky and unhealthy, contemporary anti-tobacco

messaging must also account for the subtle social and cultural benefits that young people derive from smoking (Krange and Pedersen 2001).

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## Notes

1   Participants were able to contact the investigator by telephone, text messaging and email, and a website was also developed <www.smokeinmyeyes.ca>
2   As Danika's reference to 'sleeping around to get money' suggests, young women's substance use practices involve forms of gender domination, sexual exploitation and violence in their relationships to men. Although not the focus of this paper, the research entailed substantive focus on the female body-for-others, and gendered symbolic violence in young women's public encounters about smoking (Bourdieu 2001).

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