

# Edinburgh Research Explorer

# Student perceptions of smoke-free school policies in Europe – a critical discourse analysis

Citation for published version:

Hewer, RMF, Hill, S & Amos, A 2020, 'Student perceptions of smoke-free school policies in Europe – a critical discourse analysis', *Critical Public Health*, vol. N/A, pp. 1-14. https://doi.org/10.1080/09581596.2020.1856332

#### Digital Object Identifier (DOI):

10.1080/09581596.2020.1856332

#### Link:

Link to publication record in Edinburgh Research Explorer

#### **Document Version:**

Peer reviewed version

#### Published In:

Critical Public Health

#### **Publisher Rights Statement:**

This is an Accepted Manuscript of an article published by Taylor & Francis in Critical Public Health on 22 December 2020, available online: https://www.tandfonline.com/doi/full/10.1080/09581596.2020.1856332

#### **General rights**

Copyright for the publications made accessible via the Edinburgh Research Explorer is retained by the author(s) and / or other copyright owners and it is a condition of accessing these publications that users recognise and abide by the legal requirements associated with these rights.

Take down policy

The University of Édinburgh has made every reasonable effort to ensure that Edinburgh Research Explorer content complies with UK legislation. If you believe that the public display of this file breaches copyright please contact openaccess@ed.ac.uk providing details, and we will remove access to the work immediately and investigate your claim.



Student Perceptions of Smoke-Free School Policies in Europe – a Critical Discourse Analysis

Rebecca MF Hewer<sup>1</sup> PhD, Sarah Hill<sup>2</sup> PhD, Amanda Amos<sup>1</sup> PhD, SILNE-R consortium\*

<sup>1</sup>Usher Institute, University of Edinburgh, Edinburgh, UK.

<sup>2</sup> Global Health Policy Unit, University of Edinburgh, Edinburgh, UK

\*SILNE-R consortium: Anton E Kunst, Michael Schreuders, Luke Clancy, Elisabeth Breslin,

Jaana M Kinnunen, Joana Alves, Teresa Leao, Martin Mlinaric, Laura Hoffmann.

**Correspondence to:** Prof Amanda Amos, Usher Institute, University of Edinburgh, Old Medical School, Teviot Place, Edinburgh, EH8 9AG. E-mail: amanda.amos@ed.ac.uk

Key words: adolescents, school, smoke-free policy, qualitative

# Student Perceptions of Smoke-Free School Policies in Europe – a Critical Discourse Analysis

#### **Abstract**

Smoke-Free School Policies (SFSP) are primarily designed to ensure educational spaces remain free of second-hand smoke, whilst contributing to a reduction in adolescent smoking by challenging the practice per se. Evidence regarding the latter goal is inconclusive, however, with most studies suggesting SFSPs are ineffective in reducing smoking prevalence. A dearth of qualitative research limits our understanding of why this inefficacy persists and how it might be addressed. This paper addresses this lacuna through a critical discursive analysis of data from 56 focus groups, generated with adolescents across 17 schools in seven European cities. It reveals that, while smoking is banned on school premises in most European countries, young people experience wide variation in implementation. Despite this, participants framed SFSPs in remarkably similar ways. Among young people most likely to smoke, representations of SFSPs often undermined their efficacy, leading to the displacement of smoking (outside the school grounds) rather than a reduction in prevalence. We argue that, policy effectiveness could be improved if schools worked collaboratively with students to develop positive collective beliefs and understandings about SFSPs, but caution realism about the potentially limited power of schools to reduce adolescent smoking prevalence.

#### Introduction

Reducing adolescent smoking is a global public health priority. In Europe, a range of youth smoking prevention policies have been implemented of which Smoke-Free School Policies (SFSPs) are a key element (Papanastasiou, Hill, & Amos 2018). The goals of SFSPs are twofold, they aim: to prevent smoking on school grounds (thereby ensuring students are educated in smoke-free environments); and, ultimately, to reduce adolescent smoking prevalence by challenging smoking as a practice per se (Schreuders 2017; Trinidad 2005). While there is evidence that well-enforced SFSPs can reduce smoking *at school* (Kuipers 2016), their effectiveness in reducing adolescent smoking prevalence generally is contested, with studies showing mixed findings (Galanti et al. 2014). It is unclear which aspects of SFSPs are most relevant in reducing adolescent smoking prevalence, and how these might be strengthened to improve the policy's broader goal (Piontek et al. 2007; Lee et al. 2007).

Previous research has highlighted several factors that may undermine SFSPs' effectiveness in reducing adolescent smoking. These include: visible teacher smoking (Trinidad 2005; Piontek et al. 2007; Murnaghan et al. 2009); weak or overly punitive enforcement (Turner 2004b; Pentz et al. 1989; Schreuders 2017): and student resentment regarding attempts to curtail their 'freedom' (Turner 2004b; Unger 1999; Schreuders 2017). Policies that primarily focus on preventing school site smoking (rather than smoking per se) may result in smoking displacement, rather than desistance (Schreuders 2017). A range of broader social and environmental factors (e.g. peer and community norms) are key mediators of adolescent smoking (Lipperman-Kreda & Grube 2009; Piontek et al. 2007), making it important to analyse SFSPs within the wider context of their realisation (Piontek et al. 2007; Murnaghan et al. 2009). Qualitative studies with young people have generated important insights into the role and

meaning of smoking in their lives. This includes how smoking can play a significant role in

peer relationships and socialising in school and other social contexts (Amos and Bostock 2007,

Fletcher and Bonnell 2007; Nichter et al 1997; Wiltshire et al 2005, Walsh and Tzelepsis 2007). For some young people, creating a smoking identity is important in building cultural and social capital among their peer group and negotiating social hierarchies (Hefler and Chapman 2015; Michell and Amos 1997; Tjelta et al 2017). In these contexts, smoking is used both to project an identity, to distinguish between peer sub-groups in school and to build internal group bonds through spending time together smoking and sharing cigarettes (Ioannou and Pike 2010; Stewart-Knox et al 2005; Tjelta et al 2017). The increasing denormalisation of smoking in many countries, and associated declines in smoking prevalence, have increased the stigmatisation of smoking (Graham 2012; Ritchie et al 2010), with young non-smokers often describing young smokers in negative and disparaging terms as being, for example, more disruptive, less intelligent and likely to use other substances (Turner et al 2006; Fletcher & Bonell 2013; Brown et al 2020). However, for some young people this appears to enhance some of the perceived positive attributes of smoking, e.g. that it makes one 'hard' or constitutes a form of rebellion, including against teachers (Brown et al 2020; Hilton et al 2016). Indeed, feeling excluded and stigmatised for smoking in school can encourage bonding around smoking with smoking peers (Johnston et al 2012). While young people often acknowledge the importance of peer influence in their smoking behaviour, they generally resist notions of coercion, rather presenting smoking and starting to smoke as an individual, autonomous choice (Turner et al 2006; Hefler and Chapman 2015). However, there is a lack of qualitative research exploring how SFSPs interact with these social meanings, norms and other key factors (Schreuders 2017; Papanastasiou, Hill, & Amos 2018).

To date, most research examining SFSPs has employed quantitative, deductive, and quasi-experimental designs, with few inductive, qualitative studies. This is particularly true in Europe where qualitative research exploring adolescent targeted tobacco control is rare, and few studies have explored smoking in the school context (Papanastasiou, Hill, & Amos 2018).

Adolescent perceptions and attitudes are likely to be important determinants of the effectiveness of SFSPs (Unger 1999), yet we know very little about adolescent experiences, interpretations and engagement with SFSPs in Europe.

Here we explore how European adolescents perceive their school's smoke-free policies, focusing on two questions:

- How are SFSPs interpreted and represented by adolescents most likely to smoke?
- How might these interpretations and representations mediate the impact of SFSPs on adolescent smoking prevalence?

We draw data from 56 focus groups (FG) undertaken by the SILNE-R consortium; a multi-institutional research project exploring adolescent targeted tobacco control in seven cities in Europe (SILNE-R, 2018). Using the analytical lens of critical discourse analysis (CDA), we conclude that even well enforced SFSPs may struggle to influence youth smoking rates because of the way they are interpreted and represented by students.

In what follows, we outline the central tenets of CDA, before discussing our methodological approach. Thereafter, we discuss our findings, exploring the plurality of narratives which contribute to student understandings of SFSPs.

# Critical Discourse Analysis (CDA)

CDA is premised on the ontological claim that, whilst an objective world exists, it cannot be straightforwardly known. Rather, subjects are involved in collaborative meaning making: conceptualising, representing, and subsequently contributing to the creation of social worlds (Fairclough 2010). Importantly, localised communicative acts are *dialectically related to externalities*, including practices, institutions and expressions of power (e.g. ideology) (Fairclough 2010). Consequently, researchers should situate localised communicative acts in the conditions of their production, tracing the relationships which shape spoken/written texts.

Given this, CDA presents a sociologically valuable lens through which to explore SFSPs by reference to their social context.

Discursive analytical methods are increasing within tobacco control (Gilbert 2008; Lamerichs, Koelen, and te Molder 2009; Triandafilidis et al. 2017; Thompson, Pearce, and Barnett 2007). Many studies utilising this approach seek to describe localised narratives or identify discursive strategies and effects, framing spoken texts as relatively atomised (Lamerichs, Koelen, and te Molder 2009). This approach highlights the 'work' speakers can do, with discourse, in localised spaces, but largely fails to address the role context can play in discursive formations. A limited (albeit growing) public health literature offers a more critical socio-political analysis (Gilbert 2008; Triandafilidis et al. 2017). This paper contributes to this literature.

In accordance with CDA, we understand narratives regarding SFSPs - espoused within our focus groups - by reference to the materiality and practice of school, as well as legal discourse and liberalism. We highlight how pluralistic, contradictory, and complementary narratives together create representations of SFSPs, school and the self. We posit that these policy interpretations will guide responses to them (Piontek et al. 2007). Importantly, CDA frames the subject as (primarily) formed through, rather than as an active user of, discourse (Fairclough 2010; Bacchi 2005). Thus, when we speak of participants 'drawing on' dominant discursive trends, we do not suggest that they do so strategically, but rather pre-reflexively and in ways which reflect their immersion in social spaces.

#### Methods

# Participants and recruitment

During 2016-17, seven SILNE-R research teams conducted 56 FGs with 319 adolescents aged 14-19. Participants were recruited from 17 schools located in seven European cities: Namur (Belgium), Tampere (Finland), Hannover (Germany), Dublin (Ireland), Latina (Italy), Amersfoort (the Netherlands) and Coimbra (Portugal). These cities were chosen as they are median-sized and approximated national averages in terms of socioeconomic demography and non-foreign population. The schools were selected to represent the different school types in each country (e.g. in Germany a 'Gymnasium' and a 'Hauptschule') and catchment areas with different socioeconomic status (SES). Participants were sampled purposively: teachers identified students whom they perceived to be smokers or at risk of becoming smokers (i.e. known to have smoking friends/family members), from classes of predominantly 15-year-olds. This is a well-established method for selecting participants in qualitative research on adolescent smoking (Sluijs et al. 2016). To minimise selection bias and coercion, researchers briefed teachers regarding the importance of ethical recruitment e.g. ensuring students participated voluntarily and were treated with dignity and respect. Half the FGs were with girls and half with boys; half involved schools serving predominantly low SES populations, and half predominantly high SES populations. This aspect of our purposive sampling was adopted as gender and SES can mediate perceptions and/or experiences of smoking (Amos & Bostock 2007; Fletcher & Bonnell 2013; Hefler & Chapman 2015). In general terms, this observation was born out in our data. However, as discussed in more depth below, participants represented SFSPs in remarkably similar ways – regardless of gender, SES, and location. Our analysis therefore does not focus on these distinctions.

A mini-questionnaire collecting basic participant demographic data was distributed at the beginning of each FG. Half the participants identified as current or ex-smokers and 43% as never smokers, although several self-identified 'never smokers' subsequently reported having smoked during FG discussions. Smoking status was not recorded for 7%. Ethical approval was

obtained from all the institutions where research teams were based. Participants' parents were sent opt-out consent forms in all sites except Hannover, where the school required opt-in consent from parents (a standard practice in German schools). Participants were given an information sheet and asked to provide affirmative consent prior to their involvement in FGs, i.e. an opt in approach.

#### Data Collection

Local research teams received facilitator training at a workshop (led by AA and SH), where they were familiarised with a collaboratively generated topic guide covering smoking experiences, familial and peer smoking, tobacco access, and smoking at school (including SFSPs). The topic guide was initially developed by the authors, received comments from the local research teams, and finalised during the workshop. Eight FGs of 3-9 participants were held in each of the seven cities in school but without school staff present. FGs were conducted, recorded, and transcribed in local languages before translation into English for analysis by the authors.

# Analysis

In what follows we explore how participant narratives regarding SFSPs were dialectically related to (and shaped by) the materiality and practices of their schools, discourses of law, and the liberal conceit of individualism. Our findings highlight how these narratives might influence the effectiveness of SFSPs. We present our analysis as *one* possible interpretation of available data, which provides a fresh vantage point from which to consider the nature and efficacy of SFSPs.

We performed an immersive read of 24 transcripts and subsequently created a coding framework by deductively identifying salient themes within relevant theoretical and substantive literature and inductively identifying themes emerging from the data. This

framework was iteratively developed following an immersive reading of the remaining transcripts. Transcripts were uploaded to the qualitative analysis software NVivo and coded by RH. Data were read critically, with a view to exploring the social and political conditions of discursive production. Common and recurring narratives were explored in light of the various practices, institutions, and power relations observable across field-sites.

In what follows, we briefly describe the policy and school environments that contextualise our data, before discussing our most salient findings. Quotes refer to country, sex, SES status and facilitator (F) or participant (P)>

#### **Results**

#### Context

All field-sites, apart from those in Germany and the Netherlands, had national legislation prohibiting smoking on school premises (WHO and Bloomberg Philanthropies 2017). Lower Saxony (where the German schools were located) had a state-level ban (Smoke-Free Partnership 2018). However, there is some legislative ambiguity regarding what constitutes school premises, and our findings suggest significant variation regarding where and when SFSPs were enforced, how, and against whom. While participants from some schools (e.g. Irish, high SES) reported heavily enforced SFSPs, prohibiting smoking on all school grounds and peripheral areas, others indicated that their schools (e.g. Belgium, low SES) barely enforced SFSPs, effectively permitting smoking on school grounds and in buildings. Most participants reported policy implementation somewhere between these extremes – e.g. SFSPs enforced on school grounds, but not in school peripheries (e.g. Portugal, high and low SES). In general, participants' accounts echoed previous research which indicates that SFSPs

enforced consistently by all teachers, against all students, in all school areas, prevented on-site

smoking; whilst poorly enforced SFSPs did not (Schreuders 2017).

However, despite this significant material variance – and the significant variation in students'

social and geographic positions - participants from across field-sites represented and evaluated

SFSPs in *normatively* similar ways. In what follows, we demonstrate this striking consensus,

by exploring a range of findings regarding: the perceived purpose of SFSPs, the jurisdiction of

'school', personal autonomy, considerate smoking, and the age of capacity. We highlight how

materiality, practice, and dominant ideological/discursive trends (e.g. liberalism) could be

understood to exist in dialectic relationship with, and thus formative of, participant

perspectives.

The Purpose of SFSPs

While a handful of participants across field-sites suggested that some teachers (particularly

those involved in pastoral care) might enforce SFSPs to protect student health, most believed

that SFSPs served less compassionate means. Many participants from across field-sites

speculated that, when implementing and enforcing SFSPs, teachers were largely motivated by

a desire to protect their school's reputation.

F: And teachers, does [student smoking] interest them as well?

P: Yeah, it does.

P: Some teachers.

P: Because, you know, they don't want the school to look bad either.

Germany, Boys, Low SES

F: Yeah so if you get caught outside school, if a teacher sees you outside

school do they -

P: I don't think they'd care.

*F*: *No*.

P: I'd say in [the shopping centre] they might...

P: I'd say in [the shopping centre] you would cause they –

F: Ok yeah, yeah, yeah. So, is it just if you're in uniform over there or?

10

P: Yeah

P: Yeah, because they just care about the image

P: Yeah actually I'd say it is just if you're in uniform.

Ireland, Girls, High SES

As these excerpts demonstrate, participants believed smoking was banned not because it was problematic *per se*, but because it could harm a school's reputation. This can be interpreted in two (arguably interrelated) ways: either students believed their schools feared judgment merely for failing to enforce the rules, or they believed schools feared stigmatisation because of student smoking. Certainly, and in concert with previous research (Turner et al 2006; Fletcher & Bonell 2013; Brown et al 2020), numerous participants indicated that, within schools, smoking was stigmatised - associated with poor educational and behavioural outcomes, by either teachers, peers, or themselves:

P: The problem is that when they talk about it, you're all of a sudden framed. Well, not to that extent, but when correcting exams, they'll be like: "these are smokes and delinquents" ....

F: Do you guys think it has an impact? On what?

P: The exams when they correct them, it depends on who it is.

Belgium, Boys, High SES

P: At my school? Yeah, there were [smokers] down the street, but that was like people that... that already, let's just say, didn't have a future... because they already had, like, their share of fails.

P: They failed, failed, failed, and failed, failed.

*F*: *OK*.

P: They didn't care about school, that's it.

Portugal, Boys, High SES

*I:* Do you think kids who smoke, do better or worse in school?

P: No, worse

Ireland, Boys, Low SES

These excerpts indicate that smoking has been stigmatised in these spaces i.e. marked as undesirable (Triandafilidis et al. 2017), and may illuminate why participant's felt schools would 'look bad' if they failed to enforce SFSPs. The stigmatisation of smoking exists ambivalently with smoking behaviour, however, as young people may negotiate smoking in

diverse ways (e.g. desisting or smoking covertly) to avoid projecting morally questionable identities (Barnett et al. 2016; Triandafilidis et al. 2017). Furthermore, stigma can deepen pre-existing social schisms. In countries where smoking prevalence is higher in marginalised communities, the burden of stigma falls heavily on the socially excluded (Graham 2012). This can further polarise marginalised groups (spatially and socially), creating 'smoking islands' which normalise or reinforce smoking (Thompson, Pearce, and Barnett 2007). Thus, if students understand SFSPs are motivated by a desire to avoid the stigmatisation of schools, this could prove counterproductive, particularly for those vulnerable to smoking uptake/continuation. In short, it may encourage rather than discourage smoking and ingrain health inequalities (Graham 2012; Johnston et al 2012; Barnett et al. 2016).

Building on this, several participants argued that teachers were merely 'following orders' when enforcing SFSPs: acting out of an obligation to do so rather than a genuine commitment to their goals.

F: What do you think, what kind of attitude do teachers have towards smoking?

P: Well, they probably don't like it because it's against school regulations and they have to obey those.

# Finland, Boys, Low SES

*F:* Why do you think that the staff and the teachers care about that?

P: At school? Because supposedly they are school employees and they have laws. If the law says that you can't smoke...

*T: They have to enforce it.* 

P: Yes, they have to enforce it.

P: That's why there are employees, to observe the law.

# Portugal, Boys, Low SES

Again, this representation of SFSPs weakens challenges to smoking *per se*, problematising smoking where and when it is 'against the rules'. Representations of SFSPs as in the interests of reputation and rule-following occlude public health motivations, framing these policies as

arbitrary, authoritarian, and moralistic, and potentially undermining their capacity to challenge smoking per se.

# Bounded jurisdiction

Another dominant narrative regarding SFSPs pertained to the 'jurisdiction' of a school and its staff. Many participants, across sites, argued that a teacher's responsibility or 'right' to prohibit smoking was temporally and spatially bounded.

F: Would the teachers care if they saw you smoking outside the school, on your way home or on the weekend?

P: I don't think so.

P: They wouldn't care.

*P*: *No*.

*F*: *Okay, so they wouldn't care about it?* 

P: Yeah

F: And why is that? Why wouldn't they care if they do care about it here in school?

P: It's not their job to look after us outside of school hours. Or I mean, I don't know if they're really looking after us now but we're not their responsibility.

# Finland, Girls, High SES

P: We're outside [the school] so they don't really have a say in the matter, really.

P: Some of them have already seen us, yes, but they have absolutely no say in the matter, it's none of their business.

# Belgium, Girls, Low SES

The proposition that school-staff might intervene outside the scope of their jurisdiction occasionally elicited an emotive response.

F: But imagine they see you smoking... would they say something about it?

*P:* No...wow, if they would do that, I would get really angry.

*F*: You would get angry with them?

*P*: They don't have any jurisdiction outside of school.

# Netherlands, Girls, High SES

This arguably demonstrates a particular conception of what constitutes 'school', as well as a normative judgment regarding the relationships 'school' should engender. School, according to many participants, is a socio-spatial entity made up of buildings, fences, and grounds. The

jurisdiction of school staff ceases as one crosses a physical border e.g. the school gates. Conversely, school was sometimes conceived in temporal terms with teacher authority perceived as limited to 'school hours'. In both instances, it is evident that physical materiality and institutional practices exist dialectically with participant representation of institutional authority. Moreover, when taken together, these understanding of jurisdiction may work to displace smoking, rather than to challenge it.

These conceptions also appeared to guide participant behaviour. Spatial interpretations of school jurisdiction frequently appeared to create contexts in which students congregated outside the school gates to smoke – a practice compounded by a lack of enforcement in these areas. Consequently, several participants represented their schools as conducive spaces for smoking. Take for instance, this excerpt from a Portuguese participant, reflecting on his experience of a school which enforced SFSPs on school grounds, but did not police the immediate periphery – resulting in considerable peripheral smoking.

I thought that since I've switched to another school, I thought that in this school things were different, that my colleagues wouldn't smoke, that I was going to reduce, but after all when I got here everybody smoked and well, usually... in order not to be alone... I would go with them... so I smoke.

Portugal, Boys, Low SES

This demonstrates how some areas – often just outside the school sites – can become 'smoking islands', "spatialized outcomes of behaviour regulation" (Barnett et al. 2016, 134) which resist attempts to challenge smoking by nurturing social networks and transgressive smoking subcultures. Participants indicated that these islands encouraged them to smoke more at school than they did at home (where smoking was usually condemned). Some schools prohibited peripheral smoking, however, usually leading to a dispersal of smokers – occasionally creating more distal islands.

In contrast, 'home' was not represented as temporally or spatially bounded. Numerous participants described going to great lengths to avoid parental censure regarding their smoking, in ways which transcended spatial and temporal demarcation. This was typified eliminating traces of third-hand smoke prior to seeing parents. Take, for instance, the following excerpt, in which one participant from Ireland described their first cigarette.

P: There was this girl who lived like up the road and she's so scary... I was so scared of her, and we were out one day and she's real manly or something and she was out and she had a smoke and she's like- and it was right outside my house- and I was like- didn't know what to do, and she just like did it and there were loads of people and I was so scared, but I still like- I wanted to like- I was dying on the inside like, like ohhhhh...

P: Like oh my God, what if my Ma sees!

*F*: *Yeah*, *were you worried about that?* 

P: Yeah, I do be spraying like water and perfume and all this, that and the other.

#### Ireland, Girls, Low SES

This differentiation between teachers and parents, home, and school is illuminated by reference to the public/private spheres binary. This ostensibly liberal dichotomisation is used to demarcate the proper reach of the state: whilst public bodies are required to desist from paternalistic interventions, private relationships can function according to agreed normative standards (e.g. parental expectations). Through this lens, we can understand 'school' as engendering public relationships, subject to limitations ascribed to similar governing bodies. Thus by failing to address smoking beyond the school gates, SFSPs could neglect those most at risk of smoking (e.g. those permitted to smoke at home) and subsequently reinforce inequalities. By placing the 'private sphere' beyond the reach of institutional authority, SFSPs may fail to respond to the politicality of the personal.

This may be compounded by the primary mechanism via which schools tended to sanction students found violating SFSPs, i.e. informing their parents. This approach – which is arguably designed to mitigate school limitations by drawing on the power of the 'private sphere' - only

works if parents disapprove of, and react to, knowledge that their children smoke. This was not always the case, as some participants explained:

P: My mother knows that I smoke. Actually, both my parents are aware of it; I usually smoke in their presence.

P: Even I smoke in my mom's presence; I think it's safer...

P: My mother says smoking is not so bad. She also thinks that smoking is probably better than other things that I shouldn't do.

Italy, Girls, Low SES

Moreover, not all parents feel equally able to develop a positive relationship with their child's school, particularly socio-economically and ethnically marginalised parents (Kainz and Aikens 2007). This may compound the disadvantage of adolescents already occupying less privileged social spaces. By reading interpretations of school and family jurisdiction as dialectically formed through the liberal dichotomisation of spheres, we can develop a sense of how dominant (liberal) ideological trends might function to shape participant representations and behaviours.

The autonomous self

In a similarly liberal move, which echoes findings from previous research (Turner 2004a; Unger 1999), smoking participants routinely justified their smoking behaviour by reference to the normative significance of their autonomy.

P: [Smoking is] kind of something that the headmaster can't forbid because everyone does it of his own free will. It's the person's decision.

Belgium, Girls, High SES

P: I just don't think the school should have a say in what you're taking because it's your body. I know it's their premises but I don't really know P: Yeah, I don't think you should be allowed to do it in the school but outside, if you want to then it's your choice, like they can't really do anything about it

P: Yeah like they try and suspend a person that's doing it outside, that doesn't make sense

Ireland, Boys, High SES

Participants suggested that their school lacked the authority to impede their autonomous decision to smoke. This conceptualisation of the 'self' can be best understood by situating it

within prevailing ideologies of individualism and the related notion that personal choice is

sacrosanct (Rajczi 2016; Buchanan 2008). This perspective ordains that rational individuals be

minimally governed so long as they do not harm others (Rajczi 2016; Buchanan 2008). Even

when the exercise of autonomy compromises one's physical self, the individual should remain

free from paternalistic intervention. By invoking concepts like 'free will' and bodily

ownership, participants appear to reproduce this highly individualised, fundamentally liberal,

conception of the self.

Discourses of individualism informed a broad array of participant representations, which

extended beyond discussions of SFSPs. Narratives of personal choice were invoked in

discussions of smoking uptake and social relationships, obfuscating structural and social

determinants of smoking. This prompted some participants to articulate seemingly

contradictory narratives, simultaneously demonstrating consciousness of peer influence, while

remaining committed to individualistic accounts of smoking.

F: But what about... What are your thoughts on a 12-year-old person who

smokes?

P: It's their own choice and we, as non-smokers, have no right to say anything about that. It's their own choice to smoke and so I have no right to

talk about it.

F: So you think that 12 year olds are old enough to make decisions such as this? As you just said that you had people around you who basically forced

you to.

P: Yes.

Netherlands, Girls, Low SES

Moreover, reverence towards autonomy spread beyond conceptions of the self and influenced

how participants represented their relationships with others. Many non-smoking participants

claimed to respect their peers' 'right' to smoke, disavowing acts of interference.

F: Any other thoughts on this, should people be allowed [to smoke]?

P: I don't care...

P: You're allowed to smoke, if you want.

P: It doesn't ruin my health, if a friend of mine smokes.

17

Finland, Boys, High SES

P: If someone really wants to do it and they are still a nice person, then I'd probably leave them alone. Because, you know, it's legal. If it were against the

law, that would be different, but this kind of thing is legal.

P: To me it's not that big a deal, because they don't force me to smoke. It's

their thing. As long as I'm not hurt or affected by it.

Germany, Girls, High SES

Discourses of autonomy and personal choice undermine the capacity of SFSPs to challenge

smoking as a practice per se, as they challenge the right of public bodies (e.g. schools), to

intervene in individual behaviours undertaken in ostensibly private spaces. In this sense,

discourses of individualism complement, and are complemented by, the similarly liberal

dichotomisation of spheres and the subsequent commitment to the bounded authority of

schools. This is no accident, but rather reproduces liberalism as an ideology of limited states

and 'free' citizens.

Considerate smoker

In keeping with liberal conceptions of autonomy – which stress the inviolability of the body -

participants routinely framed their smoking as acceptable only if it did not harm others. This

framing often manifested in the adoption of a 'considerate smoker' narrative, a much theorised

discursive trend (Poland 2000; Thompson, Pearce, and Barnett 2007).

F: And do you think that students should be allowed to smoke in school?

*P: Like in the grounds and all?* 

P: No

*F*: *Whv not?* 

P: Cos it like affects other peoples' health and all

P: Yeah, like their asthma and all and they would smell of smoke and all that.

Ireland, Girls, Low SES

Here, participants argued that smoking should take place off school premises in the interests of

non-smoking students. These discourses simultaneously support the SFSP goal of purifying

school spaces, whilst undermining their aim to challenge smoking. This tension is reflected in

a growing literature addressing considerate smoker narratives, which argues that they reflect

18

both a form of compliance with, and resistance to, smoking regulation (Poland 2000; Barnett et al. 2016; Thompson, Pearce, and Barnett 2007). Individuals internalise regulatory norms and self-govern (e.g. remove themselves from smoke-free spaces) whilst simultaneously forming new, resistant subjectivities (e.g. smoking elsewhere). Consequently, smokers draw on considerate smoker narratives to represent themselves as responsible citizens, whilst engaging in behaviours represented as irresponsible (Poland 2000). By articulating these narratives, participants demonstrate a continued negotiation of their liberal subjectivity in a way which supports ongoing smoking practices.

Legality and age

In narratives which similarly supported the SFSP aim to purify educational spaces of smoking, whilst undermining the problematisation of smoking per se, many participants argued that they *should not* be permitted to smoke on *school grounds* because they were underage.

F: Do you guys all think that smoking should be permitted on the school grounds? Should everyone have the freedom here to smoke if he wants to?

P: If you're 18, sure.

*F: If you're 18?* 

P: Yeah

F: So, if you're under 18, not.

P: Under 18, then no.

Boys, Germany, Low SES

F: Well, do you think that people should have a right to smoke here in school if they wanted to?

P: If they're over 18, go right ahead.

F: So people who are over 18 should have the right?

P: Mm. Yeah.

*F*: *And why not before that?* 

P: It's illegal.

Finland, Boys, Low SES

Participant understandings of SFSPs appeared to exist dialectically with legal norms regarding the age of majority, if not dogmatic law (age is used to regulate who can purchase cigarettes not smoking). This prohibitive perspective did not extend to smoking in general, e.g.

participants did not feel their age should prevent them from smoking elsewhere. This representation of SFSPs undermines their potential to influence smoking *per se*, as it problematizes *under-age* smoking only, at least in or near school. The use of age as a classificatory boundary again arises from liberal conceptions of the rational individual, where one's autonomous desires should be respected *unless* compromised by a lack of capacity e.g. childhood (Rajczi 2016). Some participants appeared to support the proposition that age undermined capacity, albeit only in particular contexts, arguing that younger adolescents lacked capacity to choose or the normative right to do so.

P: Yeah, I already saw some people, little ones who were ten years old. They were in a group and started smoking, at ten...

P: He's not even done shaping up and he's already smoking...

P: It's a bit disappointing, even. They're young and they're already smoking and destroy their health.

P: They might not be aware of what they're doing, like we do.

Belgium, Boys, Low SES

P: And there are others, the younger ones; it makes me sick to see kids that are even younger than me smoking. I think that it's just to "show-off".

*F*: *OK*.

P: Yes, it's just for a question of self-assertiveness and...

P: Yeah, "I'm grown-up".

Portugal, Boys, High SES

These excerpts demonstrate how, rather than simply rejecting age as a legitimate category of discrimination, participants sought to 'move the goal posts' – setting the age of capacity significantly lower than legal norms. This represents a similar combination of acquiescence and resistance exhibited via the adoption of a considerate smoker status: it accepts the prevailing legal and liberal view (e.g. children lack capacity) while subverting its full realisation in ways that permit continued smoking (e.g. I'm not *really* a child). Thus, it demonstrates the complex dialectic relationship between legal discourses, dominant ideology, social practices, and local communicative acts.

#### **Discussion**

Based on analysis of FG data from 17 schools in seven European cities, we explored the diversity of narratives contributing to and reflecting conceptions of SFSPs amongst adolescents most likely to smoke. Drawing on the principal tenets of CDA, we argued that these policies existed in a complex web of dialectic relationships with materiality, prevailing ideologies, legislation, and school practices. We demonstrated that – regardless of differences in enforcement, gender, SES and geographic locale – adolescents in these European cities interpreted and represented SFSPs in remarkably similar ways.

Participants conceived of teacher authority as bounded by the spatial materiality and temporal practices of school. Moreover, the motivations participants ascribed to teachers in enforcing SFSPs framed them as arbitrary – an exercise in rule following, motivated by reputation control. We have argued that participant understandings of SFSPs as associated with 'reputation control' may stem from a broader stigmatisation of smoking – the reproduction of which can produce and reinforce inequalities. Certainly, ample evidence suggests smoking was stigmatised *within* schools. In response to these findings, and in concert with the tenets of CDA, we have argued that socio-spatial and temporal aspects of school, the dichotomisation of spheres, and normative narratives regarding hypocrisy and discrimination are dialectically related to, and formative of, adolescents' narratives. Consequently, such narratives undermine the capacity of SFSPs to challenge smoking per se.

We also explored how participants conceived of themselves in relation to SFSPs. Participants sought to assert their right to choose, so long as they did not compromise the health rights of others. Furthermore, participants referenced the age of majority as a legitimate measure of who should smoke, whilst rejecting the notion that *all* under-age adolescents lacked capacity. Here, participants exhibited both compliance with and resistance to prevailing ideological and legal norms, drawing on liberal arguments regarding harm, autonomy, choice and capacity – as well

as smoke-free regulatory frameworks – to make sense of adolescent smoking at school. The resultant narratives produced responses to SFSPs in ways which partially endorsed their goal of creating smoke-free educational spaces, while undermining their goal of reducing smoking prevalence by challenging smoking per se. Insofar as interpretations are understood to be behaviour guiding, we suggest that this provides some insight into why SFSPs can struggle to influence smoking prevalence among adolescents.

Accordingly, these representations of SFSPs may serve to displace – rather than holistically challenge and discourage – adolescent smoking. Our study has limitations. The relationship between SFSPs, their interpretation, and the behaviour they elicit are bound together in mutually productive relations, making it difficult to tease apart how one affects the others. Future research might consider qualitative longitudinal studies, spanning the implementation and enforcement of SFSPs, to explore these dynamics more closely. Furthermore, our study focused on adolescent smokers and those at higher risk of smoking. We therefore have limited insights about how SFSPs might influence adolescents at lower risk of becoming smokers. In addition, while we recruited a diverse range of adolescents across and within distinct geographical spaces, we only included participants in one city in each country. Thus, the generalisability of our findings is somewhat limited. However, our results arguably demonstrate analytic generalisability and allow for case transferability (Polit & Beck 2010). By bringing rich and nuanced data, which demonstrated consistency across field sites, into dialogue with critical discursive analysis, we provided a compelling intellectual framework with which to understand this field of study. The relative uniformity of participant representations- regardless of gender, SES, locality or policy enforcement- provides compelling evidence that dominant discursive trends regarding school jurisdiction and individualism play a role in shaping responses to SFSPs in seemingly diverse spaces. Researchers working in similar fields may be able to apply our framework to explore the degree

to which our higher-order conceptualisations shed light on their localised research settings (Polit and Beck 2010). In concert with others (Unger 1999; Turner 2004a), we would argue that the perspectives and attitudes of adolescents most at risk of smoking likely play a significant role in the impact and effectiveness of SFSPs. This highlights the need for future research to consider the broad socio-political conditions within which school policies are enacted.

Our analysis points to several practical steps that may improve SFSP outcomes: intervening in smoking which takes place peripherally to school grounds, communicating clear messages about the purpose of SFSPs, and considering how a student's home life may mediate their attitudes to school-time smoking. Discourses of autonomy, consideration and jurisdiction may be more difficult to address – as they are formed by powerful discursive forces out-with 'school'. Schools might therefore consider deploying a critical pedagogical or participatory approach to challenge the discursive trends which limit their institutional reach and promote narratives which challenge smoking (Turner 2004a; 2004b; Unger 1999; Clark et al. 2002). A positive example of this approach is the Scottish 'Lothian Tobacco Free Schools Project' which aimed to implement and evaluate supportive, collaboratively designed and health-focused SFSPs (NHS Lothian & ASH Scotland 2018). In adopting such an approach, schools could work to imbue SFSPs with more positive and health-salient messages, whilst simultaneously mobilising young people's autonomous capacities. By demonstrating respect for adolescent capacities, autonomy, and power, rather than working against these qualities, schools *might* be able to create more effective ways to influence student norms and behaviour. However, in light of our findings, we would caution some realism. As localised institutions, situated within a complex web of formal and informal governance structures, schools possess relatively limited power to challenge the influence of dominant ideological and legal norms or, indeed, the impact of familial relations – so often shaped by socio-economic factors. Whilst these more distal and

macrosystemic forces persist, SFSPs may remain limited in their capacity to challenge young peoples' relationship to smoking per se.

# **ACKNOWLEDGEMENTS**

We thank the schools and students who participated in the focus groups, Irene Miller and Natalie Papanastasiou who were involved in the workshop training, and our SILNE-R colleagues who facilitated focus groups and translated the transcripts into English. The study was part of the SILNE-R project, funded by the European Commission Horizon2020 program, Grant Agreement no. 635056. RH was in part supported by the Wellcome Trust (grant number 209519/Z/17/Z).

# References

Amos, A., & Bostock, Y. (2007) Young people, smoking and gender- a qualitative exploration. *Health Education Research*, 22, 770-781.

Bacchi, C. (2000). Policy as discourse: What does it mean? Where does it get us? Discourse:

Studies in the Cultural Politics of Education, 21, 45–57.

doi.org/10.1080/01596300050005493

Barnett, R., Moon G., Pearce, J., Thompson, L.& Twigg, L. (2016). *Smoking Geographies:*Space, Place and Tobacco. Chichester, UK; Wiley-Blackwell.

Buchanan, D., R. (2008) Autonomy, paternalism, and justice: ethical priorities in public health. *American Journal of Public Health*, 98, 15–21.

Brown, R., Bauld, L., de lacy, E., et al (2020) A qualitative study of e-cigarette emergence and the potential for renormalisation of smoking in UK youth. *International Journal of Drug Policy*, 75, 102598. doi.org/10.1016/j.drugpo.2019.11.006

Clark, V., L., P., D, Miller, L., Creswell, J., W., McVea, K., McEntarffer R., Harter, L., M, & Mickelson, W., T. (2002). In conversation: high school students talk to students about tobacco use and prevention strategies. *Qualitative Health Research*, 12, 1264–83.

Fairclough, N (2010). Critical Discourse Analysis: The Critical Study of Language. London: Routledge.

Fletcher, A., & Bonnell, C. (2013) Social network influences on smoking, drinking and drug use in secondary school: centrifugal and centripetal forces. *Sociology of Health and Illness*, 13, 699-715.

Galanti, M., R., Coppo, A., Jonsson, E., Bremberg, S., & Faggiano, F. (2014). Anti-Tobacco policy in schools: upcoming preventive strategy or prevention myth? A review of 31 studies. *Tobacco Control*, 23, 295–301.

Gilbert, E. (2008) The art of governing smoking: discourse analysis of Australian anti-smoking campaigns. *Social Theory & Health*, 6, 97–116.

Graham, H. (2012) Smoking, stigma and social class. *Journal of Social Policy*, 41, 83–99.

Hefler, M., & Chapman, S. (2015) Disadvantaged youth and smoking in mature tobacco control contexts: a systematic review and synthesis of qualitative research. *Tobacco Control*, 24, 429-435.

Hilton, S., Weishaar, H., Sweeting, H., et al (2016) E-cigarettes, a safer alternative for teenagers? A UK focus group study of teenagers' views. *BMJ Open*, 6, e013271

Ioannou, S., & Pike, J. (2010) Young Cypriots' perspectives of the symbolic values of smoking. *Critical Public Health*, 20, 373–384.

Johnston, V., Westphal, D., Earnshaw, C., et al. (2012) Starting to smoke: a qualitative study of the experiences of Australian indigenous youth. *BMC Public Health*, 12, 963.

Kainz, K., & Aikens, N., L. (2007) Governing the family through education: a genealogy on the home/school relation. *Equity & Excellence in Education*, 40, 301–10.

Kuipers, M., A., G., de Korte, R., Soto, V., E., Richter, M., Moor I., Rimpelä; R., H., Pelmen, J., Federico, B., Kunst, A., E., & Lorant, V. (2016) School smoking policies and educational inequalities in smoking behaviour of adolescents aged 14–17 years in Europe. *Journal of Epidemiology and Community Health*, 70,132–139.

Kumar, R., O'Malley P. M, & Johnston L. D. (2005) School tobacco control policies related to students' smoking and attitudes toward smoking: national survey results, 1999-2000. *Health Education & Behavior* 32: 780–94.

Lamerichs, J., Koelen, M., & Molder, H. (2009) Turning adolescents into analysts of their own discourse: raising reflexive awareness of everyday talk to develop peer-based health activities. *Qualitative Health Research* 19: 1162–75.

Lee, P-H, Wu D-M, Lai H-S, & Chu N-F. (2007) The impacts of a school-wide No Smoking strategy and classroom-based smoking prevention curriculum on the smoking behavior of junior high school students. *Addictive Behaviors* 32: 2099–2107.

Lipperman-Kreda, S, & Joel W. Grube. 2009. Students' perception of community disapproval, perceived enforcement of school antismoking policies, personal beliefs, and their cigarette smoking behaviors: results from a structural equation modeling analysis. *Nicotine & Tobacco Research* 11: 531–39.

Michell, L., & Amos, A. (1997) Girls, pecking order and smoking. *Social Science and Medicine* 44, 1861-1869.

Murnaghan, D. A., Sihvonen M, Leatherdale S T, & Kekki. P. (2009) School-based tobacco control efforts and the smoking behaviour of high school students in Prince Edward Island, Canada: examining differences. *Primary Health Care Research & Development* 10 (2): 117 129.

NHS Lothian, & ASH Scotland. (2018) NHS Lothian and ASH Scotland Tobacco-Free Schools pilot. https://www.ashscotland.org.uk/what-we-do/children-young-people-and-tobacco-free-schools/nhs-lothian-and-ash-scotland-tobacco-free-schools-pilot/accessed on 17/5/20

Nichter, M., Nichter, M., Vuckovic, N., Quintero, G., Ritenbaugh, C. (1997) Smoking experimentation and initiation among adolescent girls: qualitative and quantitative findings. *Tobacco Control*, 6 (4), 285–95. doi: 10.1136/tc.6.4.285

Papanastasiou, N., Hill. S., & Amos, A. (2018) "Evidence from qualitative studies of youth about the impacts of tobacco control policy on young people in Europe: a systematic review. *Nicotine & Tobacco Research.* 21, 863–870.

Pentz, M., A., Brannon, B R, Charlin, V, L., Barrett, E, J., MacKinnon, D., P., & Flay, B., R. (1989) The power of policy: the relationship of smoking policy to adolescent smoking.

American Journal of Public Health 79: 857–62.

Piontek, D., A. Buehler, U. Metz, R., K., Kroeger, C., Gradl, S., Floeter, S., & Donath, C. (2007) Social contexts in adolescent smoking: does school policy matter? *Health Education* 

Research 23: 1029-38.

Poland, B., D. (2000). The 'considerate' smoker in public space: the micro-politics and political economy of 'doing the right thing.' *Health & Place* 6: 1–14.

Polit, D., F., & Beck, C., T. (2010) Generalization in quantitative and qualitative research: myths and strategies. *International Journal of Nursing Studies*, 47, 1451-1458.

Rajczi, A. (2016) Liberalism and public health ethics. *Bioethics* 30: 96–108.

Ritchie, D., Amos, A., Martin, C. (2010) 'But it just has that sort of feel about it, a leper'-stigma, smoke-free legislation and public health. *Nicotine and Tobacco Research*, 12, 622–629.

Schreuders, M., Nuyts, P., A., W., den Putte, B., & Kunst, A., E. (2017). Understanding the impact of school tobacco policies on adolescent smoking behaviour: A realist review. *Social Science and Medicine*, 183 (June), 19-27.

SILNE-R (2018) Enhancing the effectiveness of programs and strategies to prevent smoking by adolescents: a realist evaluation comparing seven European countries. ENSP. <a href="http://ensp.network/projects/silne-r/">http://ensp.network/projects/silne-r/</a> accessed on 17/5/20

Sluijs, W., V., D., Haseen, F., Miller, M., MacGregor, A., Sharp, C., Amos, A., Best, C, et al. (2016). 'It looks like an adult sweetie shop': point-of-sale tobacco display exposure and brand awareness in Scottish secondary school students. *Nicotine and Tobacco Research* 18: 1981-88

Smoke-Free Partnership. (2018). *Smoke-Free Map*. https://smokefreepartnership.eu/smokefree-map accessed on 17/5/20

Stewart-Knox BJ, Sittlington J, Rugkåsa J, et al. (2005) Smoking and peer groups: results from a longitudinal qualitative study of young people in Northern Ireland. *British Journal of Social Psychology*, 44, 397–414.

Thompson, L., Pearce, J., & Barnett, J., R. (2007). Moralising geographies: stigma, smoking I islands and responsible subjects. *Area* 39: 508–17.

Tjelta, T., Ritchie, D., Amos, A. (2017) "It's easy to get fags": A qualitative study of disadvantaged young people's perspectives on cigarette availability and access. *Nicotine and Tobacco Research*, 19 (12), 1434-40.

Triandafilidis, Z., Ussher, J., M., Perz, J., & Huppatz, K. (2017). An intersectional analysis of women's experiences of smoking-related stigma. *Qualitative Health Research* 27: 1445–

Trinidad, D., R. (2005) Compliance and support for smoke-free school policies. *Health Education Research* 20: 466–75.

Turner, K., M. (2004a). Butt in, butt out: pupils' views on the extent to which staff could and should enforce smoking restrictions. *Health Education Research* 19: 40–50.

Turner, K., M. (2004b). A fresh perspective on a rank issue: pupils' accounts of staff enforcement of smoking restrictions. *Health Education Research* 19: 148–58.

Unger, J., B. (1999). Attitudes toward anti-tobacco policy among California youth: associations with smoking status, psychosocial variables and advocacy actions. *Health Education Research* 14: 751–63.

Walsh, R., A., & Tzelepis, F.(2007) Adolescents and tobacco use: systematic review of qualitative research methodologies and partial synthesis of findings. *Substance Use and Misuse*, 42, 1269–321.

WHO. (2017). WHO Report on the Global Tobacco Epidemic, 2017: Monitoring Tobacco Use

and Prevention Policies. WHO. https://www.who.int/tobacco/global\_report/2017/en/accessed on 17/5/20

Wiltshire, S., Amos, A., Haw, S., McNeill, A (2005). Image, context and transition: smoking in mid-to-late adolescence. *Journal of Adolescence*, 28, 603-617.