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Author(s): Hannah Bradby

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Watch out for the Aunties! Young British Asians' accounts of identity and substance use

Hannah Bradby

Department of Sociology

University of Warwick

Coventry

CV4 7AL

Telephone 024 76524771

Email H.Bradby@warwick.ac.uk

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Abstract

This paper considers how young people able to trace their origins from Pakistan or India (henceforth 'Asians'), discuss their use of, or abstention from alcohol and tobacco in terms of religious and cultural tradition. The role of religion, ethnicity, gender and generation in the uptake or avoidance of alcohol and tobacco was explored in 19 qualitative group and individual interviews with 47 Asians aged 16-26 years and analysed in terms of pioneering and conservative forms of tradition. Religious proscriptions on alcohol and tobacco were reported to be formally gender blind, but concerns about reputation and future marriage chances, sanctioned by gossip, meant that women's behaviour was consistently more constrained than men's. Muslims' abstinence from alcohol was tightly linked with an Islamic identity in that drinking jeopardised one's claim to being a Muslim, whereas cigarette smoking was tolerated among young men. Sikhs' and Hindus' avoidance of tobacco was strongly sanctioned, but smoking did not strongly jeopardise a religious identity. Sikh men's abstention indicated manly strength central to a devout identity. Some experimentation was possible out of view of the older generation, especially the aunties, but the risk of gossip damaging young women's reputations was keenly felt. While damage to women's reputations was hard to un-do, men's reputations tarnished by substance-use, could be compensated for by their parents' honourable status. Discussion of tradition as innovation was rare and met with resistance. Tradition was largely experienced as a constraint to be circumvented.

Introduction

Voluminous discussion and searching critique suggests that the concept of identity is simultaneously necessary and impossible. Despite its impossibility 'the question, and the theorization of identity' is of 'considerable political significance' (Hall 1996:16) and Hall

locates the irreducibility of the concept of identity around the question of agency (Hall 1996: 2). Agency has been over-looked in the study of ethnicity and health in two ways. First, epidemiological work that explains ethnic health differentials in essentialist terms has had a strong influence (Sheldon and Parker 1992) and, second, where structural health effects are considered, the socioeconomic position of minority ethnic groups has been the main focus of research (Harding and Maxwell 1997, Nazroo 1997), although racism has also received attention (Karlsen and Nazroo 2002a,b Kreiger et al 1993, Nazroo 2003). Essentialism has been repudiated with the call to consider ethnicity as identity and not just as structure (Smaje 1996) and to see minority ethnic status as more than simply a category implying disadvantage and poverty-related insults to health, has been well made (Nazroo 1998). Ethnic identity has been described as a potential 'source of pride and political power' which could contribute to the development of communities with strong identities, protective of health (Nazroo 1998: 14).

Identity is increasingly recognised as contextual, contingent, neither secure nor coherent and open to strategic manipulation (Hall 1992). While 'no amount of strategic manipulation alters the direction of the racist's fist' (Smaje 1996: 143), the division of voluntary aspects of identity that demonstrate agency from involuntary aspects that imply structural constraint is inadequate. The tension between structural discrimination along dimensions of identity such as gender and ethnic group that are also associated with the mobilisation of power and solidarity makes the analysis of constrained yet strategic social agents complex.

The children of labour migrants are in a pivotal position from which to view both the circumstances of their parents' migration and the contemporary constraints and possibilities for their own identities. The immigrant's structural position may be highly constrained in terms of housing, occupation and material circumstance such that considerable deprivation and discrimination may be experienced, albeit offset by support from fellow migrants. The subsequent generation is often expected to succeed in

education and employment in mainstream society to justify previous privation, and to maintain continuity with their parents' cultural identities.

Identity and tradition

British children of migrants from South Asia face a range of overlapping and cross-cutting normative values and expectations: British assimilationist attitudes towards minority cultures; migrant parents' culture which may claim for its authority the way of life in South Asia and yet differ markedly from contemporary experience in India, Pakistan or Bangladesh. The new alliances and cultures hybridising in the British urban context may challenge norms and values of British and of South Asian origin (Baumann 1997). Cultures are not delimited and the process of reinvention and renegotiation hybridises ideas and practice. 'Tradition' is a prime means whereby the perpetuation of a particular practice is asserted, often in the face of counter-claim. The contested nature of tradition is such that, while certain practices take on an exaggerated significance for the maintenance of ethnic boundaries (Barth 1969), the 'traditional' cannot be straightforwardly equated with stability or longevity (Brubaker 1992, Hobsbawm and Ranger 1983).

A willingness to subsume individual success to the greater good of the family has been identified as a particular feature of migrants from South Asia from the British ethnic majority (Jeffrey 1976, Werbner 1990). Cultural traditions attribute identity to individuals by constraining choices with regard to consumption of foods, marriage patterns and acceptable occupation. The conservative tendency to preserve and replicate cultural practices represents the culture's past and asserts its future as continuous with that past (Nash 1989). But there are also pioneering traditions of adapting to new circumstances, whereby reinvention is positively viewed and transmitted as a value. South Asian migrants to Britain have created self-employment in occupations in which they had little previous experience (retail, catering and mini-cab driving); their children have frequently remained in self-employment, but in higher status occupations (pharmacy, dentistry and

accountancy). Respect for integration and assimilation into new settings is a tradition of self-created rather than group-attributed identity, with change and hybridisation playing a central and valued role in the associated cultural identity. Tradition constitutes both a structure that constrains agency and a cultural resource allowing groups and individuals to reinvent identity and also tradition.

Traditions of stereotyping and discrimination may inform group identity: institutional racism and sexism transmit inequalities down the generations. Withstanding, resisting or subverting discrimination can be important to the identity of a beleaguered minority group and give rise to new cultural forms. Identity can be simultaneously a resource around which to organise resistance and solidarity and an effect of discrimination.

This paper considers cultural traditions encompassing religious and ethnic dimensions of a shared understanding and daily practice of a community founded by migrants from Indian and Pakistani Punjab. These migrants share religious, ethnic and usually caste background and exchange gossip which defines who is regarded as honourable (Bradby 1999). The British-born generation's responses to their elders' expectations through the adoption of, resistance to and redefinition of cultural logic and practice is the focus of this paper.

Substance use and Punjabis

Cultural groups vary in their use of alcohol and tobacco and its regulation with gender, age and religion influencing what constitutes socially acceptable drinking and smoking (O'Connor 1975). The permissive attitude of the British ethnic majority to substance-use contrasts with the abstinence or ambivalence of minorities with a recent history of immigration. Alcohol use has become the norm among majority ethnicity teenagers who are too young to drink legally and rates of cigarette smoking have increased among boys and girls (Miller and Plant 1996). The failure of health education to stem the increase in substance use by young people (Walker et al 2002) has directed research towards the role that consumption plays in identity formation and other group processes (Amos et al

1998, Heaven 1996, Hendry et al 1993, Michell and Amos 1997, Wearing and Wearing 2000). The role of abstinence in young people's developing sense of themselves has attracted little attention, but could be relevant for the children of abstinent migrants.

Compared to the general population, lower rates of alcohol and tobacco use have been found for some Asian adults (Balarajan and Yuen 1986, Jackson et al 1981, Williams et al 1994), young people (HEA 1992a) and children (HEA 1992b, Karlsen et al 1998, Kohli 1989, Turtle et al 1997), with variation by gender (Jackson et al 1981, Williams et al 1994, Nazroo 1997), and by national (McKeigue et al 1988, Nazroo 1997) and religious group (Nazroo 2001). Viewing alcohol or tobacco use as an individual 'lifestyle' choice is highly contested (Macintyre 2001) and 'culture' has been discredited as an adequate explanation for inequalities between ethnic groups (Nazroo 1998). Patterns of drinking and smoking are neither a result of unfettered individual choice, nor are they simply prescribed by cultural or religious rules. Patterns of drinking and smoking by age, ethnicity, gender and class are significant in terms of their consequences for rates of morbidity and mortality, as symbolic markers of ethnic boundaries and as indicators of social change.

The complex religious, generational, gendered and ethnic boundaries demarcated by differential drinking and smoking rates among young British Asians have been shown quantitatively (Bradby and Williams 2006, Karlsen et al 1998). At 14-15 years old Asians reported significantly lower use of alcohol, cigarettes and illegal drugs compared with their general population counterparts: the abstinence reported by the mainly British-born young Asians mirrored that of the migrant generation, with girls' and women's abstinence being even more marked than boys' and men's (Williams and Shams 1998). A follow-up survey four years later showed the erosion of abstinent behaviour had begun and was most marked among men and among non-Muslims (Bradby and Williams 2006). The influence of religious proscription and gendered expectations of behaviour was discernible in the marked avoidance of alcohol by Muslims and the rejection of cigarettes by Hindu and Sikh women and, to a lesser extent, by Muslim women. Reported use of illegal drugs was so low compared to the general population sample that analysis by

religion was not possible. Although taking place at a slightly older age compared with the ethnic majority, some experimentation with alcohol and tobacco nonetheless accompanied young Asians' graduation to adulthood (Bradby and Williams 2006, Karlsen et al 1998).

The current qualitative study describes how the sons and daughters of migrants manage the multiple and sometimes contradictory effects of gendered expectations, religious and family roles and their Scottish identities as they negotiate higher education and employment. An understanding of how tradition and identity play out in young people's smoking and drinking behaviour may offer some clues as to the likely direction of future trends and whether any space exists for consideration of health effects to inform those developments.

The study was carried out in Glasgow, a city on the west coast of Scotland, in which approximately 3% of the population identify as Asian. Glasgow Asians are overwhelmingly Punjabi, tracing their origins to the region of the Indian subcontinent that was partitioned between India and Pakistan. Sikhs, Muslims and Hindus are spatially integrated with one another and anti-Asian racism (Dunlop and Miles 1990) may have forced Asians to dwell on the traditions they have in common (Bradby 2002b), contributing to the concentration of Asians in specific localities within the city.

Previous research has shown how young women adopt strategies that work within the economic, symbolic and religious constraints combining aspects of minority and majority culture in creative and innovative ways to keep various aspects of identity in play (Bradby 1999, 2002a). The current study describes how the changing drinking and smoking behaviour amongst the British-born cohort can be understood as part of this complex picture by answering the general question: what is the influence of dimensions of identity, including religion, gender and generation, on the meaning and consequences of drinking alcohol and smoking tobacco for young Asians? The role of tradition as a rhetoric for describing and justifying the patterns of consumption and abstention is of particular interest.

Methods

Forty-seven people, all of whom identified as Asian and lived in Glasgow, were interviewed during the first five months of 1999 in a mixture of individual and group interviews. Young Sikh, Muslim and Hindu community contacts convened group interviews, some of which gave rise to further contacts. Interviews were also arranged via secular organisations, including two University student groups and community education classes. Having finished most of the interviewing, non-Muslim men in employment were recruited to ensure adequate representation in the sample. The minimal criteria for inclusion in the study – being young and identifying as Asian – meant, in practice, that only unmarried people were included. (The only woman who had been married had also been widowed and was living as a single person when interviewed.) Glasgow's population of South Asian origin is small in size and was established slightly later than that of other British cities and births of mixed parentage remain rare. Hence 'being Asian' meant having grandparents and usually parents who were born in the Indian subcontinent.

Of the nineteen semi-structured interviews conducted, five were individual interviews and the remaining fourteen included between two and five participants. Interviews with existing groups of friends were preferred so as to elicit stories of the contrasts between the formal codes maintained by elders and actual behaviour among trusted peers. One-to-one interviews were undertaken when individuals were unwilling to talk in company. Four group interviews included people from different religions who were friends and two groups included men and women together. Participants' choice of interview location included their own home, the researcher's place of work, a café and a pub.

A semi-structured interview schedule was derived and included questions about the influence of age, gender, religion, ethnicity and elders' opinions on young people's use of alcohol, tobacco and drugs. It was discussed with community contacts, piloted with a group of young people and amended. The style and pace of the interviews varied with the all-male groups involving bravado story-telling of others' substance use and good

humoured teasing of the protagonist who usually sought to cast the episode as out of character and not-to-be-repeated. Women teased each other, but with less braggadocio, and individual interviews were more sober. While the tone of the interviews varied there was remarkable consistency in what was reported. The contrition and mild shame of almost all those admitting to substance use suggests that exaggeration was not a major feature of these interviews; indeed the opposite may have been the case, as stigma persuaded people to under-play their own experience.

The interviews were conducted in English, with occasional short bursts of Punjabi, which the interviewer (a white, Anglo-Saxon, Protestant) could understand and respond to. The effects of the differences and similarities between researcher and researched are hard to assess: as a pregnant, modestly dressed woman, associated with the University, participants may have allied the researcher with the parental generation, inhibiting confessions. Pale skin, pale short hair and an uncovered head may have lead participants to assume that the researcher had no moral or religious objections to cigarette and alcohol use, possibly promoting discussion of prohibited behaviour. Being trusted by the young people who arranged the interviews was probably the most important factor in making the discussions frank, funny and informative.

Permission to conduct the study was granted by the University of Glasgow research ethics committee. Participants gave oral consent to the group interview at the outset and signed consent forms once the interview was finished. All but one interview was audio-recorded and the transcripts, together with additional field notes, were coded and analysed using techniques of logical and inductive analysis. Participants' descriptions of general prohibitions, in terms of religious doctrine, the older generation's ruling or one's own identity and reputation were of interest (e.g. 'women drink less than men because...') especially where such generalisations were compared with actual behaviour (for instance 'Sikhs never drink.' 'What about last night Daljit?'). Shared understanding of the general rules governing substance use, such as 'we are a teetotal people' were collated in the first stage of analysis, since even if routinely flouted, these are important for

identity. The second phase of analysis was to amend such generalities by including all the exceptions to the rules, paying particular attention to the form of justification to the exception and the extent to which this was granted legitimacy by others. The generalisations described in individual and group interviews alike were more likely to be immediately challenged in group interviews . But even interviews with young people who conformed with abstinent traditions gave rise to some stories of behaviour which disregarded the rules. Accounting for the logic of the generalisation and the exceptions was the central process of analysis. The near universal disapproval of alcohol and cigarette smoking among Asians, young and old, perhaps accounts for the tentative, fragmented and qualified style of talk: there was very little extended, coherent story-telling.

Participants were unmarried and aged between 16 and 26 years, with the majority between 18 and 21 years. The diversity of the Asian diaspora in Scotland was represented in terms of birth-place, parents' birth place and religion. Men and women in education, graduate and non-graduate employment were included and, while experience of drinking, smoking or drugs was not sampled for, the achieved sample included a range of substance-use reported by men and women.

Table 1: Characteristics of the participants

Gender	Women	20
	Men	27
Age in years	under 18	5
	18-21	35
	over 21	7
Birth place	Britain	39
	Indian subcontinent	6
	Elsewhere	2

Mother's birth place	India	32
	Pakistan	11
	Elsewhere	4
Father's birth place	India	28
	Pakistan	11
	Elsewhere	8
Religious background	Sikh	24
	Muslim	15
	Hindu	8
Highest educational qualification	Degree	5
	Highers/A-levels	31
	Lower qualification	11

Interviewees talked of a distinctively 'Asian' identity and experience of substance use, compared with their non-Asian peers, on account of the keenly felt and strongly sanctioned nature of elders' proscriptions on a range of behaviour. Men discussed their non-Asian Scottish identities more than women, but still very little. Women described gender qualifying religious and ethnic identity whereas men left this unspoken, for instance referring to 'Sikhs' when the context suggested that they meant 'Sikh men'.

Individualised characteristics are not attached to quotations shown below, except where specifically relevant, given the consistency of reasoning offered. Anything shown in inverted commas is a quotation. Names and some details have been changed to ensure confidentiality.

Gendered drinking

Women were thought to drink less than men and, while 'white women's' consumption might approach that of 'white men', it was agreed that Asian women abstained and no-one could name an 'Asian lassie who drinks'. By contrast alcohol was regarded as 'manly' or 'machismo' for non-Muslim men with 'sinking pints and pulling birds' the behaviour of a Punjabi 'big man'. 'I drink, but it's different in a girl' said one man and women

agreed that any woman would have to drink 'sneakily' in hiding. Officially religious prohibitions (Islamic, Sikh and Hindu), applied universally, regardless of age, gender or marital status and although Hinduism was described as the most liberal religion, 'even Hindu women can't drink'. Women's abstention, compared with Hindu and Sikh men's ability to drink, was described as 'cultural' rather than religious. Women avoided drink because of the dire and irreversible consequences for their own and their families' reputations. To be seen with a drink, even if it was only once and even if the woman was not intoxicated would jeopardise a good match at marriage. As custodians of the family honour, women were said by men and women to be 'more sensible' and to have 'more brains' and 'maturity' than men, since they did not 'take to drink in times of trouble'.

The condemnation of the rare (and much discussed) case of a 'wild' woman who went out clubbing, so who could have been a drinker, was not in terms of her actual consumption, but of what her behaviour implied. It was agreed that she probably 'doesn't care about her parents' and would 'do everything else too.' To be seen out-and-about un-chaperoned was discussed as being in itself shaming and negligent of the family's reputation, with the specificities of alcohol consumed apparently irrelevant.

Drinking to inebriation was condemned, but this was seen as largely a white problem and not something that affected Asians. The few Sikh and Hindu women who admitted to drinking did so in moderation, sipping rather than 'getting bladdered'. Despite the lack of sightings of Asian women drinkers, even by those who reported drinking themselves, and the expressed disapproval of any spread in Asian women's drinking, there was agreement that abstinence was likely to erode soon. An increase in Asian women's drinking, especially for non-Muslims, was said to be the inevitable outcome of greater integration with non-Asian society. Drinking was thought particularly likely to increase among women in higher and further education where 'drink is part of student life' and 'experimenting and partying is obligatory.'

Religious affiliation and drinking

‘Muslims cannot drink’, ‘it’s a big no-no’: ‘you can’t be a Muslim and take a drink.’ Alcohol is so forbidden, so ‘haram’ under Islam, that even passing someone a glass of wine was said by one Muslim woman to be unacceptable, although opinions on the extent of Muslims’ culpability for supplying alcohol to non-Muslims varied. Ideally Muslims should not supply or serve alcohol, but self-employment in shops and licensed restaurants serving the ethnic majority made this difficult. Particular contempt was expressed for Muslims who wore gloves when handling alcohol, since this attempt at self-protection contravened the spirit of Islam’s prohibition.

For Muslims drinking could lead to one’s prayers being rejected by God and disqualification from claiming to be a Muslim on earth and in the after-life: ‘drink and you can’t even smell heaven.’ Worldly consequences included ostracism and being viewed as a hypocrite – a strong insult in this context. Teetotalism was described as ‘rational’ and ‘logical’ by Muslims, since many negative aspects of non-Muslim society were attributed to the disinhibiting effect of drink, including violence, prostitution, fornication, pre-marital pregnancy and the spread of HIV. Any drinking among Muslims was presumed to take place in great secrecy ‘behind closed doors’. The centrality of teetotalism to Islamic identity led some Sikhs and Hindus to suggest that Muslims were generally ‘more religious’ since ‘even the guys don’t drink.’

Alcohol was described as forbidden for Sikhs and Hindus since any substance potentially harmful to one’s God-given body should be avoided. However, Sikhism was ‘more relaxed’ than Islam over alcohol and it was observed that ‘the Sikh community definitely like their drink’, despite this contradicting the gurus’ teaching. One Sikh man drew a direct comparison with Islam:

The beauty of Sikhism is that you don’t have to convert to it...so you can delay giving up [drink] until later.

Otherwise respectable male figure-heads such as temple elders were known to drink, and while this was not well-regarded, any condemnation was tempered by the recognition that drinking was not unusual for men; 'Sikhs drink at weddings' especially 'ordinary folk' who were not devout or high status. Men who did not wear the symbols of Sikhism were thought more likely than 'turbans' (baptised, Khalsa Sikhs) to drink in public. While Sikh men were 'top-drinkers' compared to other religious groups, this licence was not open to women as a Sikh man said: 'Sikhism says don't drink ... it's OK for boys to have a few beers'. While men's drinking was tolerated, genuine abstinence on religious grounds nonetheless merited respect as an indication of moral strength and piety. A teetotal Punjabi could nonetheless be seen as strong and masculine through pious abstinence.

The Hindu holy text (*Gita*) was not thought to proscribe alcohol, so for Hindu men and to a lesser extent women, there was some individual choice as to whether to drink. The only two women who reported regular (albeit moderate) drinking were Hindu.

Generation and drinking

While women generally avoided drink, older women were thought to be utterly teetotal: imagining 'an Auntie with a breezer' produced gales of laughter. (In this context 'Auntie' is a generic term for an older, married woman, described as a 'respect term, better than Mrs or the first name.' For added respect the honourific suffix -ji would be added: Aunti-ji.) The older generation was thought to drink even less than the younger generation, with the exception of a few old men. However, when migrant men first arrived in Glasgow, the lack of family, the need to integrate and find company in pubs and the cold weather all encouraged some to take a drink. The arrival of men's families made drinking less necessary and less acceptable. The only report of an older woman drinking was a Hindu whose mother had once tasted alcohol at home during a Christmas celebration, but this daring experiment was only witnessed by her immediate family.

Young men's drinking tended to happen at bhangra events in halls and clubs. (Bhangra is a traditional Punjabi folk dance, music and song form, reinvented as party music, popular

with young British Asians.) Regardless of views on the propriety of drinking, it was agreed that it was never acceptable to drink in front of elders. Although most people had never seen other Asians drinking they thought that it might be happening discreetly and they were right. Rina occasionally drank with her father (but without her mother's consent), in a pub where they were sure to avoid other Asians. Kulvinder drank at bhangra gigs, and while his parents disapproved, his behaviour was tolerated. Vish, a student, was able to drink since his family lived in southern England (where he was teetotal), and he had no elders in Glasgow.

Drinking and identity

Respectable Asian women did not drink as a woman thought to be a drinker was dishonoured and her morality called into question. Taking alcohol would amount to forfeiting one's claim to being Muslim, however for non-Muslim men there was greater leeway to experiment with alcohol without jeopardising a religious or ethnic identity. Providing Sikh and Hindu men did not indulge in the regular, sustained drinking associated with the ethnic majority, occasional and discreet celebratory drinks supported a worldly, manly image. Teetotal Sikh men demonstrated their religious devotion and a principled masculine strength.

Gendered smoking

Smoking was even rarer than drinking among Asian girls and women, whereas numerous men were public smokers. In a community regulated by honour 'image counts' and particularly a girl's image. Young women wanted to retain the 'respect of the house' of their parents, which they knew was difficult because if 'girls put a foot wrong they bring shame'. The community 'says girls should be purer, clean and quiet' compared with boys so that it was 'worse for girls to smoke than boys'. Smoking would make 'a girl look a tart'. 'Community mentality' viewed smoking as 'not etiquette, not ladylike' since 'if she smokes, what will her children do?'

Girls don't smoke in public. [They] must be pure and perfect. It's a marriage thing - image. If seen smoking then [she] must be doing everything else too.

Parents would be more upset to discover their daughter smoking than their son, and this differential was attributed to 'culture not religion'.

Muslim women confessed to smoking 'in private in my bedroom with plenty of air freshener' or 'hanging right out the window' to relieve stress or boredom. In all-women groups a few women admitted trying cigarettes, but these, and other groups said that they would not think highly of an Asian girl who smoked openly as she would be a 'slapper' who was 'trying to look cool' and probably trying to fit into non-Asian society, which was seen as craven.

Girls were felt to have very little opportunity to experiment with tobacco compared with boys. As one man reported: 'girls don't smoke because they're kept at home and have no freedom'. Young men's smoking was not welcomed, but working in family restaurants or takeaways, in contact with older boys made it possible. The back door of the kitchen onto the alley, hidden by the bins, was a key location for boys' initiation into smoking.

Religious affiliation and smoking

A Sikh explained that 'the Asian religion says smoking is poisoning the body', so he and other Asians did not smoke. However, within the broad disapproval of smoking, there were degrees of religiously attributed censure, with Islam being the most tolerant of tobacco and Sikhism the least.

'Smoking is bad, but at least it's not drink' was the Muslims' explanation of their elders' tolerance of cigarettes, and non-Muslims said 'Muslims smoke because they can't drink'. The observation that so many of 'my Muslim pals smoke' led a non-Muslim to suggest that tobacco might not be forbidden under Islam. Adult Muslim men hid their drinking but not their smoking because 'smoking is not intoxicating', 'it doesn't do anything to your mind... you're still in control' so you do not lose sight of God's laws. However, a

religious obligation to guard one's health and to steward one's finances was acknowledged to mean that ideally Muslims should avoid cigarettes as well as alcohol.

In contrast with the uniform accounts of the unacceptable nature of alcohol, Muslims offered a range of opinions on smoking: social smoking with friends and 'to look cool' or due to boredom were described, in positive ('I just enjoy it') and in negative terms ('it's for the weak minded'). People saw smoking as a 'dirty habit' or a 'cry for help', as a relaxing private distraction and as a way of socialising with the ethnic majority, especially when drinking was not possible. Some Muslim parents were absolutely against their children smoking and some tolerated it as a more-or-less acceptable expression of youthful rebellion.

Hinduism was thought to have little to say about smoking, beyond a general disapproval of using potentially harmful substances. Sikhism was said to be definitely against tobacco-use since 'it harms the body.' The religious proscription meant that according to a Sikh 'in Glasgow Sikhs don't smoke, well maybe twelve, but lots of Muslims do'. Despite Sikhism 'saying not to smoke' men 'still do it', and at wedding parties 'open boozing and fly fags' was the norm. 'A turban' (baptised Sikh) would not smoke, although plenty drank. For 'Indian girls' smoking was described as 'very bad' and 'out' whereas some parents 'don't mind a glass of wine' (not that these liberal parents could be named).

The contradiction that 'all intoxicants' (explained as meaning 'things that are toxic to the body') were forbidden for Sikhs, yet smoking was more frowned upon than alcohol, was not explicable in terms of the character of Sikhism or the specifics of its doctrine.

Particular disapproval of cigarettes was attributed to the attitudes of older Sikhs and their desire to distinguish themselves from Muslims.

Generation and smoking

Muslims reported that their (male) elders smoked whereas Sikh elders did not: 'the older generation of Sikhs didn't smoke, only Muslims did'. Older women never smoked,

except, perhaps for a rare hookah in Pakistan, which, for Muslims at least, was not shameful like cigarette-smoking. An 'Auntie with a wee cigarette' just wouldn't happen. 'No-one smokes in front of their parents' and the strength of the older generation's disapproval was part of the pleasure for those who did smoke. A Muslim occasional secret smoker described how her tension dissipated just holding an unlit cigarette because of the rebelliousness of the act. She described lighting cigarettes 'just to annoy my mother' but if she had been caught she felt her parents 'wouldn't **totally** flip', whereas being discovered with alcohol or a boyfriend would lead to a 'total flip'.

Smoking and identity

Asian women had to avoid being seen smoking to maintain a stake in the group identity: there was no space for being an honourable, 'good Asian woman' and a smoker.

Smoking was proscribed for men, but the sanctions were weaker: it was seen as a bad habit, a sign of weakness and for non-Muslims, a lack of religious commitment, but not a source of shame. Muslim men were seen smoking in public, but this had no implications for an honourable Islamic identity. Men, including Muslims, would not smoke in front of their elders since this would imply extreme disrespect.

Surveillance

Considerations of respect and reputation aside, young people reported having very little opportunity to drink and smoke. Since parents were largely abstinent, and even when fathers smoked or drank, they did so outside the house, young people said they had no access to cigarettes or alcohol for experimentation. Not being allowed out unaccompanied until their late teenage years was not uncommon for women and, while less closely chaperoned, men felt that their prospects of getting beyond family surveillance were curtailed compared with non-Asians. Working part-time and going to college were legitimate ways of getting beyond parental supervision and both were more available to boys than to girls. But even when working and going to college the Auntie-jis' surveillance network was said to be ever present. Usama's brother, smoking at a bus

stop was seen by an Auntie on a passing bus. When they returned home, both Usama and his brother faced severe reprimands from their father. The small number of Asians in Glasgow made anonymity impossible: 'In London no-one knows you but in Glasgow you recognise every Sikh'. Asians' behaviour in other cities was 'more relaxed' and 'wild' with English cousins even kissing in public. A Sikh man illustrated the outrageous ways of Asians from England, by describing having seen a young Asian woman lighting up without shame, only to be further shocked that her older companion, also an Asian woman, had a cigarette in her mouth. Vish, the drinking student, illustrated that surveillance was crucial to young people's behaviour, since he was at liberty to do as he pleased in Glasgow where he had no family connections, whereas in his small hometown in England, his arrival at the bus stop would be reported to his parents before he had reached their front door. Glasgow was unfavourably compared with big Indian and Pakistani cities where 'girls wearing almost nothing, smoking and drinking' were not uncommon and religious devotion was seen as 'old fashioned'.

Avoiding or hiding substance use was motivated by the fear of discovery by elders and the consequent gossip. 'It isn't religion, but listening to what parents and grand-parents say' explained one person: 'that's the way we Asians think: disrespect to the family' [is to be avoided], confirmed another.

Reputation and gossip

The close surveillance in Glasgow led Maninder to say 'Scotland is backward'. She pointed out that false rumours could be put about by 'the community talking' and this 'gossip ruins marriage chances – people can say **anything**.' Maninder had her parents' permission to go clubbing providing she 'didn't flaunt it'. While her (non-Asian women) friends drank and smoked, Maninder 'got high' on excitement and was still able to put her drunken pals into a taxi at the end of the night. Maninder's sobriety was demonstrated by her friends' reliance on her giving their addresses correctly to the taxi driver, however, being seen 'out and about' in town meant that Maninder's reputation

was disparaged and Sikh men referred to her knowingly as ‘the girl who flies around everywhere’. The implication that she was out of control meant that Maninder would be unlikely to marry anyone of good repute from Glasgow, and her parents would have to look elsewhere for a match. Maninder felt the injustice of being seen as a loose woman, since she was abstinent and, while she may have flirted, felt that she abided by her parents’ rules. But there was no way of repudiating the gossip since her claim to be a moral, honourable, albeit adventurous Sikh woman, was not admitted by her peers or, importantly, their elders. Likewise, Sanjana who enjoyed a notorious reputation as a result of wearing short skirts and tight tops, knew that her strict abstention from sex, alcohol and cigarettes was irrelevant and could not enhance her reputation. While both women maintained that their behaviour was abstinent, neither had been prepared to stay at home to demonstrate this.

Women who wanted to drink, smoke and flirt without dishonour had to take steps to avoid gossip, as discussed by Rina, a pub-drinker, who dressed modestly and said ‘namaste to the Aunties’. Her respectful demeanour had kept her reputation intact, since ‘you can do anything if elders are respected’. Other women confined their boyfriends and socialising to other cities such as Edinburgh or London.

Apprehension over potentially damaging gossip underlay respondents’ concerns that their stories of substance use would not be repeated: participants threatened or begged their friends not to pass anything on to aunties or parents. One lad remonstrated with another for describing an episode of drunkenness, not denying his intoxication, but affronted that it was under discussion in the group. Men who discussed their substance-use punctuated confessions with self-mocking, but nonetheless sincere, checks that the householder, a prominent and devout figure in the local Sikh temple, was not listening behind the door. Women described their parents’ moral sanctions against smoking or drinking: ‘it’s the guilt and disappointment not the fear of violence that works’. Wanting to avoid ‘dragging people’s names through the mud’ effectively inhibited experimentation.

Denigrating gossip was less of a threat for men, since their suitability as prospective husbands was read from their parents' reputation:

For us it's up to the status of our parents rather than the status of **us**... if we're bad boys, it kind of goes on our parents' status.

By contrast a woman's tainted reputation would not be over-ridden by her respectable parents, and she would be considered poor marriage material:

Whereas for a girl, she's known as a slapper or whatever and obviously it'll be her reputation. Our parents will look at her reputation and not her parents' reputation 'cause they don't count. It's **her** they're looking at.

This explanation from an all-male group interview was echoed by women participants, with the rider that the 'girl's reputation' was not necessarily based on her actual behaviour, since malicious gossip, or a genuinely mistaken understanding of events, would do equal damage. Elders could not understand the prospect of being in a pub without drinking and smoking, so the only safe course of action was to stay away.

This disjunction between actual behaviour and behaviour attributed through gossip, while a preoccupation for women, was not remarked upon by men, with one exception: a Sikh man who did not wish to be interviewed in a group with his cousins. Kulvinder claimed that one of his cousins was a hypocrite, drinking despite having been baptised a Khalsa Sikh. He drew unfavourable comparisons between the hypocrite and another Khalsa cousin who was 'pure' and deserved 'all respect' for his prayers and abstinence. During the group interview with the cousins, the 'pure' cousin was talkative, and confirmed, modestly, Kulvinder's account of his clean-living, devotion to Sikhism, while the cousin accused of hypocrisy was silent throughout.

Kulvinder described his own drinking as part of being integrated with mainstream Scottish society: 'how can I follow the football and no have a drink?' he asked, suggesting that 'I'm more Scottish than my [teetotal] Muslim pals.' His enjoyment of drinking in pubs and at bhangra gigs was part of his mixed identity: 'I'm trying to get the perfect mix

of the Punjabi, Scottish, whole Asian vibe'. Another regular drinker, Vish, saw drinking as part of being a student but was more equivocal about its legitimacy, worrying about his parents' disapproval. Rina did not describe positive reasons for her occasional pints, being more preoccupied with the ways in which she managed to avoid the potential costs.

Tradition, honour, marriage and identity

The relationship between young people and their elders was important in respect of identity and substance use, since gossip governed access to the honour community. The tradition of religion and caste endogamous marriage reproduces and structures relations between genders and generations in the subcontinent (Dumont 1966, Hershman and Standing 1981, Marriott 1955, Srinivas 1966) and persists in the diaspora (Bhachu 1985, Shaw 1988, 2000). Elders and particularly the aunties, thought to be universally abstinent themselves, were crucial in the transmission of gossip, which allocated prestige. A woman known to drink or smoke was shamed and unmarriageable, but since only one of the participants had ever been married and since marriage is the moment where prestige and honour are negotiated and confirmed, interviewees' position in the honour community was not yet established. Nonetheless, there was evidence that being known as a substance-user had detrimental consequences. Maninder who went clubbing and Sanjana who wore skimpy clothes felt their prospects of finding a suitable husband through their parents' networks were poor and others agreed. Men could get away with a greater range of behaviours compared with their sisters, because their reputation was largely determined by their family's good character but if their behaviour was persistently unacceptable, even men became dishonoured, as illustrated by Jasmine's story. Jasmine had been brought over from India to marry a Glaswegian, but it soon became clear that her husband had a serious heroin addiction, which made employment impossible and family life very difficult. He eventually died from an overdose, widowing Jasmine and leaving her ostracised, impoverished and resentful at having married a man to whom no Glasgow family would give a daughter.

Jasmine was wronged by her husband, but, as various respondents remarked, it was older women, aunties or auntie-jis who were the brokers of honour in judging behaviour. A woman's own standing in the honour community continued to be dependent on her own behaviour and the behaviour of her children, especially her daughters. In this respect a woman's own interests lay in policing young people's behaviours as described by interviewees. By contrast a man's reputation could not be ruined by errant offspring since it was read from that of his forebears.

For Muslim men alcohol was prohibited and strongly sanctioned by drinkers being dishonoured and seen as religious hypocrites, whereas cigarettes were fairly freely consumed beyond the view of the older generation. Smoking was highly proscribed for Sikhs and Hindus, and teetotalism enhanced men's reputation for moral rectitude, yet men were able to drink without consequences, providing it was done inconspicuously. While enormous discretion was required, young women's experimentation followed the same religious pattern as for men. Sikh and Hindu women described smoking as unthinkable, but an occasional secret drink was possible, although the onus remained on women to demonstrate their teetotalism and they could not gain prestige from abstinence. Muslim women who confessed to rebellious experimentation always described cigarette use. Hindus were generally thought to have the least constraint on their behaviour, but the greater stigma associated with tobacco than with alcohol use, especially for women, followed the Sikh pattern. Although Hindu women described the same necessity for moderate abstinent behaviour as other women, they were also more likely to describe experimental, rebellious behaviour.

Young people's maintenance of abstinence is perhaps an assertion of a minority identity concomitant with elders' expectations and against the prevailing majority population norms. However, the harsh sanctioning of substance-use, especially for women suggests that tradition is an ideological structure that young people have to work around. The non-negotiable nature of tradition persists despite evidence of its instability, as shown by stories of male migrants smoking and drinking when newly arrived in Scotland, older

Muslim women's hookah-use and young people's wild behaviour in contemporary India, Pakistan and England. Participants appreciated the historical and geographical specificity of traditional abstinence, but nonetheless felt its current grip.

Despite having identified that conservative traditions were not enduring or universal throughout the diaspora, young Asians were unwilling or unable to re-negotiate the meaning of drinking and smoking in the eyes of their elders. Young men's social drinking was kept away from elders and was thought likely to stop after marriage and only super-discrete experimentation was possible for women. Despite agreement that substance use was likely to increase among young Asians, nobody was pushing for this to happen through their own efforts, except for Kulvinder. Kulvinder's parents had moved from the inner city, where he had grown up seeing himself as working class, to a suburb with a more genteel reputation, which Kulvinder regarded as pretentious as well as inconvenient for his social life. Kulvinder's sense of himself as well-integrated into Scottish society, following football and visiting pubs, meant that he saw drinking as a positive activity and, while he did not parade it before his parents, he did not want to feel ashamed of it either. Kulvinder said 'it's tradition that tradition changes' acknowledging both that his migrant grandfather had been a drinker and that he was actively trying to change the way that his drinking was viewed in his family. By emphasising his desire to combine his working class and Scottish identities with his Punjabi family background 'to get the perfect mix of the Punjabi, Scottish, whole Asian vibe', he was trying to cast drinking and smoking as a legitimate aspect of a mixed identity.

Redefining substance-use as part of a hybrid identity was not a project valued by Kulvinder's peers, hence his reluctance to be interviewed with his more conventional cousins. Other participants maintained abstinence and any experimentation was undertaken so as not to jeopardise Asian identities: cigarettes were puffed in back alleys or leaning out of bedroom windows; alcohol was sipped discretely and rarely to the point of drunkenness. The unusual women who went out to clubs exercised caution, for instance avoiding 'looking after' a friend's cigarette or drink while she was in the toilet.

While in Maninder's case precautions had failed to safeguard her reputation, a less glamorous and less flirtatious Sikh friend who accompanied her had not suffered the same derogatory gossip.

Young women, committed to maintaining their parents' good reputations, were enabled in their discrete experimentation when they distanced themselves from the gossip circles in acceptable ways: for instance, moving from high density tenement housing to suburban homes; pursuing employment and education beyond the home and visiting family in England and beyond (Bradby 1999). Women who risked dishonour, 'wild' women like Maninder, tended to pursue their lives elsewhere (London or Edinburgh), leaving Glasgow's conservatism intact.

Health considerations

The study of ethnicity and health has frequently focussed on the health deficits of minority groups compared with the general population. Ongoing endogamous marriage among British Asians suggests that smoking rates will stay lower than the general population average for Asian women and for non-Muslim Asian men, and that drinking rates will stay lower for Muslims and for non-Muslim women, all of which may be health-protective. Enhanced health was not, however, described as motivating abstinence: 'it's fear and religion – good health is just a bonus', resulting from 'cultural and health reasons go[ing] together.' A love of junk food and aversion to exercise were cited as features of young Asians' lifestyles that showed the irrelevance of health for understanding consumption patterns.

The low saliency of health is not peculiar to young Asians, however, the ill effects of smoking are particularly worrisome with regard to people of South Asian origin. Asians experience of their elders' expectations as a strong constraint on behaviour, with men better able to circumvent the restrictions than women, does distinguish them from other young Britons. The apparent predisposition to coronary heart disease, together with the material deprivation associated with being of Pakistani or Bangladeshi origin, suggests

that the greater leeway men enjoy in what is acceptable behaviour and the tolerance of tobacco-smoking among Muslim men may point to a widening of inequalities in mortality by ethnic group (Viner and Barker 2005) and of gender inequalities within minority ethnic groups.

Conclusion

Elders' traditions and, in particular, the proscriptions on certain behaviours, were a major consideration for young Punjabi Glaswegians who were negotiating their identities in the minority Punjabi culture and the majority Scottish culture. Young people's conformity to their elders' expectations may be an expression of identity as a 'source of pride and political power' (Nazroo 1998:14) and may indeed be contributing to strong, health protective group identities: certainly it was contributing to women's abstention from substance-use. Young people's interpretation of religion and of their elders' tradition did not describe health as a consideration. However, the promotion of adherence to religious proscriptions and cultural continuity could have a powerful anti-smoking anti-drinking message. The use of religiously-specific health promotion messages potentially reinforces a fixed, rigid view of what constitutes a minority culture (Bradby 2003). But even if this could be overcome, in a Western European context such promotion could not be adopted by public bodies because religious and cultural traditions curtail individual choice and discriminate against women. Young people in this study recognised that their individual rights were being curtailed, but (with the partial exception of Muslim male smokers), conformed nonetheless. Having criticised their elders' proscriptive traditions on the grounds of sexism and individual rights, it will be interesting to observe these young people's involvement in contracting the marriages of their own children. In particular how will continuity and solidarity with the migrant generation be played against the rights for young people and for women to choose their own consumption patterns?

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