# Loud, sad or bad: young people's perceptions of peer groups and smoking

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### **Abstract**

This paper suggests that most 13 year olds and many 11 year olds have a clear and detailed grasp of their own social map, recognize the pecking order which is established amongst their peers and are aware of the different levels of risk-taking behaviour, including smoking, adopted by different peer groups in their school year. Thirty six 11 year olds and 40 13 year olds took part in the study. Their remarkably consistent views about which pupils adopt or reject smoking are closely related to their perceptions of their social map. Their accounts differentiate top girls, top boys, middle pupils, low-status pupils, trouble-makers and loners, associating smoking behaviour consistently with three of the five groups—the top girls, the low-status pupils and the troublemakers. Top boys, although sharing many of the characteristics of top girls, have an added protection factor-their keen interest in football and physical fitness. From their descriptions, it is apparent that different groups of pupils smoke for different reasons which are related to pecking order and group membership. The implications of these young people's views for health education programmes to prevent smoking and other risktaking behaviours are far reaching.

### Introduction

Adults sometimes assume that all adolescents are the same. The stereotype of the out-of-control

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teenager, which has its legacy in Hall's (1904) description of this developmental stage as one of inevitable 'storm and stress', is reinforced today by media reports which attempt to portray all young people as desperate, difficult and drugusing. While this kind of description may be true of a minority of young people, subsequent studies suggest that it is not necessarily accurate for the majority (Bandura, 1964; Adelson, 1979). Obviously we need to take very seriously recent publications which report increased psychological disorders and emotional instability amongst a sizeable minority of young people (Rutter and Smith, 1995) and the associated concern amongst health educationalists (Barnados, 1995; West and Sweeting, 1996), but the flip side of this pessimistic face of adolescence is that many young people negotiate the teenage years either with alternating periods of calm and angst (Ingersoll and Orr, 1988) or manage to cope with the transitional period into adulthood relatively peacefully (Offer et al., 1984; Hurrelmann, 1989). We need to know which adolescents are at most at risk, why they are at risk, and how best to target resources so that they reach and are relevant to the most vulnerable groups.

Many studies have focussed on the kinds of individuals who compromise their mental and physical well being by behaving in ways which are maladaptive and risky. Factors likely to upset an already volatile blend of hormones and emotions include failure at school, especially today when the prospect of unemployment can cause malaise and anxiety (HEA, 1995; West and Sweeting, 1996), conflict with parents, or the development of a lifestyle which is in conflict with that of parents (Vondra, 1986), and lack of integration

into the peer group which can result in insecurity, poor self-esteem and isolation (Kandel, 1986). There is some evidence that young people tend to polarize on a continuum of maladaptive or risktaking behaviours, either avoiding them altogether or adopting a number of them (Jessor and Jessor, 1977; Donovan and Jessor, 1985). Donovan and Jessor (1985) identified a single common trait amongst the latter 'high-risk' adolescents, describing it as 'unconventionality'—an unwillingness to conform to conventional social values.

Smoking behaviour at an individual level is linked with parental smoking (Bewley and Bland, 1977; Charlton, 1986; Lader and Matheson, 1991), parental attitudes to smoking (Charlton, 1984; Murray et al., 1983), siblings' smoking behaviour (Bynner, 1969; Santi et al., 1994), lower socioeconomic status (Conrad et al., 1992; Green et al., 1990), lone parent families (Goddard, 1990; Green et al., 1990), lifestyles characterized by an antischool orientation (Newcomb et al., 1989) and truancy (Goddard, 1990). The evidence on intrinsic factors is less conclusive but might include a genetic susceptibility to the addictive properties of nicotine (Russell, 1989), personality factors such as extraversion and neuroticism (Cherry and Kiernan, 1976), and differential tolerance to stress (Penny and Robinson, 1986). Such cross-sectional studies can, however, tell us nothing about the processes involved in the uptake of smoking nor help us to understand the meaning of smoking in the day-today lives of young people. A recent review of smoking and peer pressure concludes that despite the wealth of evidence about predictive factors, any child or adolescent is a potential smoker (West and Michell, 1995).

The same criticism can be applied to the many studies which debate the influence of friends on children's and adolescents' smoking behaviour. Evidence for peer influence comes from cross-sectional studies which focus on 'friends' (Bynner, 1969; Palmer, 1970; Hunter et al., 1982; Flay et al., 1983; Hover and Gaffney, 1988; Roosmalen van and McDaniel, 1989) or best friends (Aarø et al., 1981; Gottlieb, 1982; Byckling and Sauri, 1985; Charlton and Blair, 1989; Roosmalen van

and McDaniel, 1989). Cross-sectional studies may inform us that friends are important, but they tell us nothing about the direction of causality. We do not know whether smokers 'cause' non-smokers to take up the habit through direct pressure and coercion or whether like-minded individuals cluster together and provide a conducive social climate for risk-taking behaviours which might include smoking? Even longitudinal studies do not tell us much about the processes involved since we cannot infer from the fact that friends' smoking precedes subject's smoking that they 'cause' the behaviour. This paper contributes to this debate by presenting young people's own views of smoking as a group behaviour.

A different approach to understanding the processes involved in the uptake of smoking by some adolescents focusses on the influence of peers. Friends and peers are not the same. The peer group may be defined in very general terms to mean all young people of roughly the same age as the subject. Studies describe the importance of the peer group during adolescence in terms of the development of self-identity as individuals experiment with different roles and images, trying them out on their peers who act as 'models, mirrors, helpers, testers, foils' (Douvan and Adelson, 1966, p. 179). Kinney (1993) described the peer group as providing the relevant social structure and cultural landscape for the development of individual identity. Other studies, mainly from the US, have defined the peer group in terms of distinct cliques or groups within a single social setting such as the secondary school. Such accounts suggest that adolescents consistently differentiate, recognize and label such groups in terms of their status, prestige and popularity, and are well aware of a hierarchical, stratified social structure amongst their peers (Rosenberg, 1965; Larkin, 1979; Brown and Lohr, 1987). Other accounts of adolescent peer groups have focussed on the emergence during late adolescence of youth styles and sub-cultures such as punks, hippies and skinheads, whose members reject and are alienated from conventional society and develop their own distinct and recognizable dress, music, values, language and lifestyle. Such extreme groups are associated with increased levels of risk-taking behaviour such as smoking, alcohol and drug misuse (West and Macintyre, 1990). Burr (1984) explains the drug misuse of some of these sub-cultures as the symbolic expression of young people's frustration and discontent with a mainstream society which has failed and rejected them.

One of the problems of focussing on smoking as an isolated health behaviour is that it ignores the salience of smoking in the everyday lives of adolescent peer groups. Evidence linking smoking with deviant behaviours (Jessor and Jessor, 1977), with adolescent youth styles (West and Macintyre, 1990) and with particular kinds of music (van Teijlingen and Friend, 1993) shows how smoking may be more to do with identity, image and lifestyle. To understand how and why young people take up smoking, we need to know much more about the composition and dynamics of the peer group. To date, only one study has described the relationship between smoking and peer group structure beyond that of (non) smoking dyads. Based on 'best friend' data, social network theory was used to distinguish between cliques, liasons and isolates (Ennett and Bauman, 1993). Contrary to expectations, the highest rate of smoking occurred amongst isolates. The majority of cliques were non-smoking. In a related analysis (Ennett and Bauman, 1994), longitudinal changes (over 1 year) in peer affiliations and smoking behaviour were examined. The investigators conclude that selection and influence contributed equally to peer group homogeneity in adolescent smoking. They also report that most smoking continued to occur amongst the isolates who were not subject to peer group influence. This research reported in this paper uses a similar longitudinal design and social network theory to map changes in friendships and changes in smoking behaviour amongst 11 and 13 year olds over 2 years. Results from the social network analysis at the first time point are currently being analysed.

Most accounts of young people are 'adultist', in that they offer adult views and adult perspectives of youth, youth groups and youth behaviours

Time Point 1 (TP1)	Primary 7	(P7)	Secondary 2 (S2)
	1		1
Time Point 2 (TP2)	Secondary 1	(S1)	Secondary 3 (S3)
	1		1
Time Point 3 (TP3)	Secondary 2	(S2)	Secondary 4 (S4)

Fig. 1. Longitudinal study design.

(Milburn, 1995). This study presents young people's own accounts of their social world. It is written from their perspective and with their own insider knowledge. Their descriptions of the kinds of young people who take up smoking and their explanations for such behaviour are at odds with some of the key assumptions which underlie health education programmes, and may help explain why such interventions have failed (Michell, 1994). By departing from adultist views of young people's smoking behaviour, this study represents a considerable departure from previous research.

# Study design

This research reports the qualitative findings from the first of three data collection points in a longitudinal study of friendship groups, peer influence and smoking behaviour which began in January 1995 (Figure 1). Two groups of target pupils—36 11 year olds in their final year at primary school (P7) and 40 13 year olds in their second year at secondary school (S2)—are currently being monitored over 2 years. These target pupils are embedded in their school year groups—39 P7 and 150 S2—from whom quantitative data but not qualitative material is being collected.

At time point 1, during the spring and summer terms of 1995, the target pupils took part in small focus groups and were subsequently interviewed in depth on a one-to-one basis. Together with all the pupils in their year, they also filled in a self-complete questionnaire which asked them about their friends, lifestyle and health behaviours. The friendship data from the questionnaire is currently being analysed using social network theory (Richards, 1989; Michell and Pearson, in prepara-

tion). Social network analyses will also enable the researchers to map changes in friendships and smoking behaviour over time.

# Sample

The secondary school and one associated primary school were selected from the sample frame of the West of Scotland 11–16 Study (West and Sweeting, 1995). These schools offered a varied catchment area which included private and council housing. The percentage of pupils receiving free dinners (50%) matches the average in Glasgow schools and suggests that the schools are representative of others in the region in terms of social class composition. In the primary school, the 36 target pupils consisted of all the pupils in the final year (P7) who would transfer to the local secondary school. Three pupils, whose parents opted for a secondary school outside the catchment area, filled in the self-complete questionnaire so that reciprocated friendships with target pupils could be identified but otherwise they were excluded from the study because they could not be monitored after they left primary school. In the secondary school, the target pupils consisted of the 40 pupils in the first two (out of six) unstreamed classes (S2). All the pupils in the same year as the target pupils (39) P7 and 150 S2) filled in questionnaires.

### Summary

11 year olds (P7): 36 <u>target</u> pupils *embedded in* 39 <u>year</u> pupils

13 year olds (S2): 40 <u>target</u> pupils *embedded in* 150 <u>year</u> pupils

### Methods

The author spent one term in the secondary school and one term in the primary school. In order to avoid possible negative reactions to someone associated with research into smoking, both Head teachers agreed to introduce her to the staff as a researcher interested in teenage lifestyles. This information was passed on to the pupils. In both schools the researcher was based in her own room, and in the secondary school all negotiations with staff about pupils being withdrawn from lessons were handled by the Deputy Head teacher. So that

pupils would perceive the researcher as separate from the school and staff, it was agreed that she would use neither the staff-room nor the canteen. The sensitivity with which all arrangements in school were handled by senior staff contributed enormously to the success of the project.

### Focus groups

Twelve focus groups with the 13-year-old target pupils (S2) and nine focus groups with the 11year-old target pupils (P7) took place in a small room reserved for the study in each of the schools. The rooms were quiet, private and well away from classrooms. A previous pilot phase of the research tested different sized groups and found that with pupils of this age, a group of more than four led to a variety of problems including the domination of the discussion by a few confident pupils while others remained silent, too many interruptions and pupils talking at the same time (Michell and West, 1996). Transcribing the tapes proved very difficult and it was not possible to identify individuals. A group of three proved ideal. In the main study, therefore, friends were asked to form themselves into groups of either three or four to take part in discussions. At the request of pupils, three groups consisted of friendship pairs. Therefore, these small discussion groups differed from most other focus groups reported in the literature because of their size and because they were made up of self-selected friends. Pupils may have been less inhibited about introducing personal material since they already knew and trusted the other members of the group. The length of the focus groups ranged from 30 to 75 min with the majority lasting about 45 min. All the focus groups were recorded using a small cassette recorder and all the tapes were transcribed. Pupils were assured at the beginning of the focus groups that their contributions would be treated as strictly confidential and that neither their teachers nor their parents would be told what was discussed. Many of the pupils commented that they enjoyed taking part in the discussions and several asked if they could do a second one. Although this was some indication of their positive feelings about the focus groups, it may also have been a reflection

of their preference for a novel activity like a small group discussion over routine lessons.

The researcher did not want to force her own structure on the discussion but wanted to find out what animated each group, what was important to them, and what was the salience of smoking and other risk-taking behaviours. For these reasons, a very loosely structured topic guide was used for the focus groups. Smoking was usually raised spontaneously as pupils talked about their friends, and about different peer groups and their different behaviours. It was felt that if the same battery of questions had been used with every group, they might have produced a false uniformity of response with an ironing out of differences in the importance of smoking for each group and in attitudes to smoking and accounts of smoking behaviour.

### **Interviews**

All the target pupils were also interviewed on a one-to one basis, after all the focus groups had been completed, and after the researcher had established a relationship with individuals in the less threatening group setting. No pupil refused to be interviewed. Some of the pupils were less forthcoming in the one-to-one situation, and some found it difficult to reflect on their experiences and feelings. As in the focus groups, a loosely structured topic guide was used and pupils were reassured about privacy and confidentiality. The most successful interviews lasted for over an hour with the pupil talking for much of the time. The least successful lasted for about 20 min with more of a question-and-answer format. All the interviews were recorded and transcribed in the same way as the focus groups

### Results

### Peer group structure

The older pupils agreed that by second year secondary pupils were divided into separate peer groups which were differentiated by members' attitudes to school, their behaviour in and out of school, and their appearance. Most of the focus groups described the characteristics of different groups, assigned peers to those groups, explained the current pecking order and placed their own group on the social map. There was a remarkable degree of consistency in the way the social maps were described both verbally and, in many cases, graphically as pupils drew circles, and wrote adjectives or pupils' names in the circles to describe group attitudes and behaviours. The adjectives changed from positive to pejorative depending on whether the description was being offered by a group member or an outsider. These peer groups were consistently described in terms of a pecking order consisting of 'top, middle and bottom':

T If you get new shoes like every weekend and you get hundreds of pounds and that is you in the top group. If you are OK and you have got a good sense of humour and everything you are in the middle group. If you are total rubbish you are at the bottom.

Pupils described how most pupils belonged to one group only, although some pupils were able to relate to two groups and some pupils were in transition between groups.

Thirteen year olds consistently reported that the separate peer groups formed 'at the end of first year and start of second year'. At first 'the class used to be just one big thing and then towards the end of first year we all started to split up into little groups'. By the second term of the second year, 'different wee groups of people' were well established.

The younger pupils did not provide such a consistent picture of their peers. In two out of the nine focus groups, pupils denied that there were differences between peer groups, describing their year as 'all friends together'. Three focus groups differentiated only between 'goody-goody'/'quiet' pupils and 'loud'/'trouble-makers'. Members of one focus group described a continuum: 'calm-calm' pupils were the real 'goody-goodies', and 'loud-loud' pupils smoked and smashed windows. In between came finer gradations. In contrast, members of three focus groups drew social maps which were similar to those drawn by the older pupils. The most detailed map was drawn by one

exceptionally able boy and his best friend who differentiated top, middle, bottom and isolated pupils as well as pupils who were in transition between groups. Thus while some of the accounts of the younger pupils were less detailed than those of the older pupils, in general terms they supported what the 13 year olds said. For this reason, and because of lack of space, this paper is based mainly on the 13 year olds' reports.

The purpose of this research was not to allocate individuals to groups, but to understand pupils' own perceptions of the different peer groups in their year, and to find out which groups they regarded as likely to smoke, drink and use drugs. The researcher did not ask individuals to say which group they belonged to in case this inhibited further exploration of the structure of the peer groups. It would also have been insensitive to ask loners and lower-status pupils to classify themselves when some were taking part in focus groups with higherstatus pupils. However, many pupils did spontaneously describe which group they belonged to during the course of the focus groups, and many more described their own group allegiance and that of their peers in the one-to-one interviews which followed. Those who perceived themselves as 'in the middle' generally said so. Pupils who were members of the top groups were identified by other pupils. They could also be identified by the researcher by their appearance and by the way they made derogatory remarks about pupils who were 'goody-goody' or 'dead quiet' while describing themselves as 'out for a laugh' or 'good fun'. 'Bottom' pupils—who were differentiated as either low-status or trouble-makers-were identified by others. Finally, loners admitted to being loners in the one-to-one interviews.

# Peer group structure and smoking behaviour

Three kinds of peer group—the top girls, low-status pupils and the trouble-makers—were consistently identified by the older and younger pupils, and by both members and non-members, as more likely to smoke or to be vulnerable to influences to smoke. A few top boys were also likely to smoke.

Two other groups—'middle' pupils and loners—were perceived as not vulnerable and not likely to take up the habit. The middle group seemed to be the least vulnerable to smoking and other risk-taking behaviours. The pupils' accounts have subsequently been shown to match social network analysis 'maps' produced by the NEGOPY (Negative Entropy) program (Richards, 1989) using data on reciprocated friendships and information about risk-taking behaviours from the self-complete questionnaire.

# Peer groups

Top girls

Top group girls were frequently described by members and non-members as 'popular' both with girls and, more significantly, with boys. This popularity was attributed both to their appearance, and to their spending power which enabled them to wear 'the latest fashion and stuff'. These girls could be identified by their body language, their tight black clothing and their tarty good looks. Most of them rejected organized out-of-school activities in favour of hanging about with boys in the street or in the local park where 'everyone hangs out like 18 year olds and everyone'. There was evidence of increased conflict between the demands of school and peers, but most were managing to do a balancing act by doing the minimum amount of school work to avoid trouble while not doing enough to be considered 'goodygoody' or to curtail their social lives. Some had boyfriends, a few had sexual relationships with older boys and all reported 'boys' to be their main topic of conversation. Non-members described members of this group as 'girls who think they're big', 'the wrong crowd' and 'the top group'. Members down-played their rebellious behaviour, saying they were 'just out for a laugh'. The adjective used most frequently to describe this group by members and non-members was 'loud'. The researcher's perception of top girls was that they looked older and more street-wise than middle group girls.

In the focus groups, the girls talked about a pecking order with sexually attractive girls with

boyfriends 'at the top'. Being attractive to boys, and being seen hanging around with boys, seemed to be a prerequisite for top group membership. Top girls were described as 'not too thin and not too fat', having 'all the clothes and that'; 'It's if they're good looking that counts'. Boys of this age tried for a top girl and, if rejected, they worked their way down the pecking order:

S ...say like there was one group of boys...they would go right to the top group rather than go to the middle average girls...like if they don't get any girls in the top group then they come down to the middle group and that.

Since having a boyfriend was such a status symbol, girls lower down the pecking order tried to bluff their way up the social ladder by inventing incidents and relationships—attempts which were ridiculed by others:

S They say every night that they have been getting off with somebody and I think they are just making it up just so that they'll get into the top group and that.

Spending power was closely related to attractiveness since girls had to spend large sums of money on clothes if they were to remain fashion leaders. Money was important because 'you have to look good'.

Non-members perceived the top group girls as being under the most pressure 'because the only way is down whereas we can go up'. Part of the pressure was to stay popular and attractive, but part was to do things which were considered 'cool' and 'big'. Risk-taking behaviour including drinking, smoking and using drugs was commonly associated with this group:

L It is basically like the higher ones...like I don't know...they just hang about in groups and they know that they have got to do this...or got to do that just to stay up there. Like they just take them (cigarettes) because they think everybody else is doing it. But we really don't give a stuff in the middle group.

Girls were seen as more vulnerable than boys

because they were 'only interested in boys' while the boys had other interests 'and they only think about football and computers'. This picture was confirmed by data from the self-complete questionnaire which revealed that three times as many 13year-old girls than boys (23%) were smoking occasionally or regularly. Top group girls said they were also drinking heavily and regularly at weekends. One focus group of three top girls became very animated when talking about alcohol, with five pages of transcript devoted to drinking in the park and getting older teenagers to buy them 'Mad Dog, Special Red, Merrydown and Diamond White' (brands of cider). Some top girls were using hash while others drew the line before other drug use: 'Smoking I wouldn't mind. If you were offered and that you would take it. Drinking would be the same. But drugs is just too scary'.

### Top boys

The top boys' groups had much in common with the top girls' groups. They were considered confident, good-looking, outgoing and popular compared with other boys who were 'serious', 'goody-goody' and 'dead quiet'. Clothes, trainers and hair-cuts were just as important, particularly wearing the right labels like 'Levis', 'Caterpillars', 'Kickers', 'Armani jeans' and 'Mazuno'. However there was no discussion about boys wearing the 'right' clothes in order to attract girls.

One key difference between the boys' and girls' top groups was that while the girls said that they were preoccupied by boys, both sexes agreed that the boys' main interest was sport, especially football. Being interested in 'everything to do with football' was possibly a protective factor in that it stopped them from adopting higher levels of risktaking behaviour. Many top boys said they had tried smoking 'just to see what it was like', but had since quit, saying 'it was horrible' or 'it made me cough'. They felt that in future they would not be under pressure to start again 'because I have tried it and I don't like it'. They were keen to maintain their fitness levels and some, although not all, rejected smoking because it affected their performance. A couple of top boys talked about the conflict between smoking to maintain their place in a particular group, or not smoking to remain fit. One very sporty girl, who in many ways was like the top girls, had similarly experimented with smoking and then stopped:

T ..like I was in my running team at school. I was the fastest out of my school, and I could run really fast...I think it was the holidays...when we came back and I started training and that, I felt it (smoking) slowed me down...

Thus sporty boys could manage to retain their position in the pecking order without smoking because their footballing or athletic skills gave them kudos and confidence.

# Middle groups

Middle groups girls and boys described themselves as 'quiet', 'friendly', 'nice', 'sensible' and, most commonly, 'in the middle'. Non-members called them 'sad' (meaning pathetic), 'dead quiet', 'calm', 'posh', 'tame', 'brainy', 'goody-goody' 'teachers' pets'. They were pupils who 'didn't get into trouble'. They were 'quiet ones who always remember their books and do their homework'. Pupils estimated that about a half of all pupils belonged to this kind of group. Middle group members were doing well at school, named academic subjects as amongst their favourites, worked hard and had positive aspirations for their futures. While top group members 'hung out' after school, middle group members still took part in all kinds of organized group activities like swimming, dancing and other sports. They had good relationships with their parents, and often shared their views and attitudes. If they did report conflict, it was 'just wee simple stuff' like untidy rooms or arguing with their siblings. They liked pop and chart music rather than techno or rave. They chose 'jeans and stuff' and school uniform over designer labels despite being 'slagged' (teased) for not having the 'right clothes', 'like if you don't keep up to date'. The researcher's perception of middle group members was that they were the kind of adolescents most adults would typically find pleasant and easy to get on with.

Middle group members consistently said that

risk-taking behaviour was something done by pupils who got into 'the wrong crowd': '...like if you go about with the wrong sort of people well you can get into a lot of like danger but if you are in with the right crowd I think it's OK, and like none of the other people you are hanging about with does that...well you're fine, but not if you are in with the wrong crowd'. Smoking, drinking, using drugs and getting into trouble was not for them, but was something done 'just amongst some of the other higher groups, you know'. They were teased for not being as tough and street-wise as their peers, but they themselves regarded top group behaviour as unacceptable, and coped with the teasing by sticking together and offering one another support. In terms of risk-taking behaviour, middle pupils were safe—for now. Longitudinal data will reveal whether they remain safe or whether they take up smoking, drinking and drugs at a later stage. On the basis of the data collected so far, we hypothesize that middle pupils' attitudes and behaviours will remain largely unchanged.

Middle group pupils were strongly anti-smoking, in fact the vehemence of their views often blocked further exploration of the subject:

T Ugh! I can't even go near an ash-tray.

P I can't stand it.

K I just don't like it all. I hate it.

G It's disgusting, I think.

Such views were similar to those of most younger children (Michell, 1990).

They did not smoke and had no intention of smoking. The reasons they cited for their antismoking views included having asthma, hatred of passive smoke, disgust at parents smoking in the house, parental illness due to smoking and the death of a family member from cancer. One boy said 'My mum almost died 'cause of it'. That smoking did not interest them was something recognized and accepted by their smoking peers:

LM What about pressure within the school?

S It doesn't apply.

D Nobody has ever approached me or anything like that.

They gave a number of reasons why they would never smoke including the health risks, parental disapproval, parental ill health from smoking, the waste of money and the addictive nature of the habit. These pupils repeated and supported the messages of heath education programmes.

On the whole, middle group pupils were not vulnerable to pressure to smoke both because their peers knew it was a waste of time bothering them, and because all or most of their friends were non-smokers. However, some pupils, possibly anticipating pressure, adopted avoidance strategies like not lingering in areas in school where they knew smoking went on such as 'the back of the school' and 'the toilets'. 'You usually hang around the middle bit of the playground and you are OK. Nobody hassles you'.

Bottom: low-status pupils

A handful of pupils were considered 'rubbish' or low-status by their peers. They seemed to be both failing within the school system (they found the work too difficult and were truanting regularly) and were failing in terms of social integration with their peers. These pupils—mainly girls—had neither the social success of top pupils nor the educational success of middle ones. One reason given for their lack of popularity was that they lacked the spending power of the top groups and could only approximate the dress and appearance of the higher-status pupils. One girl admitted to 'money problems and that' and explained how it affected her relationships with her peers: 'At the age of 13 you like looking for boyfriends and going to discos and that, and if your mum has money problems, you can't go and your friends start to slag you'. The social and financial status of these pupils' families seemed to contribute to their own social standing. One 'bottom' girl's mother was described as: 'I have heard that her mum is not particularly clever either. She is a lollipop lady. She walks along West Road with one brown shoe and one blue shoe or something like that'.

Low-status pupils did not form their own groups: instead they hovered on the fringes of the peer groups to which they aspired. They seemed to have low self-esteem and gave the impression of being defeated and passive. 'A' described herself twice during the interview as 'dead easily led. I will do anything'. 'E' also said that she would do 'anything' to become more popular. She explained that she started smoking because her big sister and her friends 'kept going on about how everybody else did it and everybody that had done it was pure popular and that'. 'E' was not 'pure popular' and perhaps saw smoking as a means of becoming so. On another occasion, 'E' tried hash because 'everybody else was doing it and I felt left out because everybody else was having fun and I was just sitting there'.

Thus while other pupils, even those jostling for position at the top of the pecking order, drew the line somewhere in terms of health behaviours. (saving no to sex or not taking drugs other than tobacco, alcohol and perhaps hash), the low-status pupils seemed to be much less in control of their own behaviour. Finding a route to popularity meant that they would agree to anything. Only three pupils in the entire target sample (two girls of 11 and one of 13) reported being bullied into smoking. All were low in the pecking order. 'E' gave a long and graphic account of how she had been physically attacked by a gang of girls who than 'grabbed me and told me to smoke or else they'd stab me because they had knives'. Another girl was shut in the toilets and not allowed out until she had smoked a cigarette. This contrasts sharply with accounts of first occasion smoking given by other pupils.

Bottom: trouble-makers

By the second term of second year, a small number of pupils—mainly boys—had not only given up on school but had adopted an aggressive stance towards it. They were disillusioned and disenfranchised. They said they hated school, or hated the teachers, or hated the work, and were truanting regularly ('dogging it'). One boy was absent so much, he was neither interviewed nor took part in

a focus group. Descriptions of this group by other pupils included terms such as 'bad', 'tough', 'trouble-makers', 'bullies', 'real lunatics', 'pure stupid' and 'drop-outs'. They were certainly recognized by others as pupils who 'smoke, drink, get into fights. Some of them even joy-ride. Steal cars'. One boy said, 'They cannot sit still in class. They have got to do something disruptive or make themselves look big'.

Fighting and violence in and out of school was an issue which animated many of the focus groups. Pupils voiced fear that they might be attacked if they ventured into territory which 'belonged to' neighbouring schools or gangs One focus group of three boys described 16 separate incidents of bullying and fighting, some of which had involved them personally. Trouble-makers were described as 'always looking for fights' whereas the other pupils did their best to avoid them, or would fight back only if they had to: 'Just...if anybody hits us, we will hit back, but it's not like we are looking for trouble'. Fights, fighting and 'getting into trouble' featured a great deal in the interviews and focus groups of the trouble-makers. One boy talked about 'fighting his way through school'. One girl described an incident in which her cousin was beaten up: 'the next day I went and got hold of that girl and I went and battered her in front of everybody. There was a girl, she was crying. She was saying 'Get off her' and I got off her. And I got told if I touched her again I was getting suspended'.

Trouble-makers were smoking regularly, drinking regularly, taking hash and using a wide range of other drugs. The boys smoked hash regularly and one had taken 'jellies' (temazepan). One of the girls had tried LSD and speed. While these pupils seemed unable to set limits for their own behaviour, they would not accept parental control or discipline either: 'When my mum grounds me, I am out 2 minutes after it because it would blow my head in. She can't keep me in'.

Trouble-makers thus held an ambivalent social position amongst their peers. While their behaviour was criticized in private by top and middle pupils, they were also feared because of their reputation

as fighters. Possibly out of school, on their own territory, they commanded a higher social status.

#### Loners

Although within the target group only three pupils were identified as loners, pupils talked generally about two types of isolates in their year group those who had isolation imposed on them, and those who chose to be loners. In the former category, was 'T', a gentle boy who described himself as 'not tough' and who had been unable to make new friends after his best friend moved to another school. 'S', in contrast, was a confident loner, deliberately cultivating his status as someone with strong views which went against the grain of those of other teenagers. He was 'never out'. None of the loners smoked. All held strong anti-smoking views. Social network analysis, which complemented the qualitative accounts by plotting the pupils' social maps from questionnaire data about their friends, later identified 17 out of 150 13 year olds as having no reciprocated friendships in their school year, although many named pupils in other years or in other schools (Michell and Pearson, in preparation).

### Pupils in transition

Some pupils remain friends for a very long time. In this study there were a number of friendship pairs which had begun in the early years of primary school and were still intact. The longest lasting reported friendship was between two boys who were born in the same maternity ward, and who had remained best friends through playgroup, infant and primary school. However, pupils talked too about the breakdown of friendships and about moving between peer groups. Obviously the friendships and peer groups described in this paper represent only a snap-shot in time. Relationships may be fluid with pupils moving in and out of groups. Some of these pupils were identified at a stage of transition. 'D' gave a troubled interview in which she explained at length how her friends had changed by becoming more rebellious than she found acceptable. Her attitude meant that she would probably soon break with this group of top girls:

D Just they act different, you know, and I just don't know what to do. So I just don't bother with them anymore.

# LM How have they changed?

D More silly. Just doing stupid things I suppose....I am not as stupid as them I don't think. Because like they drink every weekend and stuff like that but I don't. Like they smoke hash and that sometimes

### Discussion

The young people in this study have presented us with a detailed account of the pecking order amongst their peers, of the different peer groups in their school year, of the different attitudes and behaviours associated with these groups, and of the kinds of pupils who are most likely to smoke and indulge in other risk-taking behaviours. These accounts are valuable (1) because they show that smoking as well as non-smoking behaviour is perceived to be associated with particular peer groups and (2) because they offer an insider view of the meaning of smoking for pupils who identify with those groups. By 13 years of age, young people have split into groups which are distinct one from another on a number of attitudinal and behavioural dimensions. Reflecting previous studies, the groups are perceived as hierarchical with status defined mainly in terms of group members' popularity. The accounts of peer group behaviour is consistent with data about 'youth types' described in a recent study of patterns of social integration in middle adolescence (Glendinning et al., 1995). The three 'youth types'-conventional, peer-oriented and disaffected-would seem to be not unlike our own middle, top and bottom groups, and, as in our study, health behaviours such as smoking and drinking were strongly associated with youth type. Peer groups thus have different identities, reputations and styles which are recognized by all the young people, but extreme sub-cultures such as 'hippies' or 'casuals' have no meaning for this age group. Smoking 'fits' the identity and style of some groups while having no relevance to others.

There is a consensus in previous studies that some adolescents are more at risk of smoking than others. Previous studies have identified an association between smoking behaviour and low self-esteem (Piepe et al., 1988), rebelliousness (Nash, 1987; Michell, 1990) and failure in the school system (Hover and Gaffney, 1988). The young people in this study go beyond previous adultist descriptions of high-risk adolescents by identifying three quite distinct groups of peers who smoke and who smoke for different reasons—top girls, low-status pupils and trouble-makers. Top girls smoked because it was part of the sophisticated, sexy image they wanted to project and they smoked because they chose to do so. Smoking was just one part of their image and identity along with drinking, using other drugs and going out with boys. These girls, who made up the largest group of smokers, were thus paying a heavy price in terms of addiction and their future health for popularity, boyfriends and their place at the top of the pecking order. Low-status pupils—mainly girls-smoked to buy popularity. Their accounts of being forced to smoke contrast sharply with accounts of first occasion smoking given by all the other smoking pupils who emphasized their own free choice, typically saying 'it was my decision'. Trouble-makers-mainly boys-fitted the picture of the difficult, disturbed and out of control adolescent presented in the literature. They were perceived as indulging in high levels of risktaking behaviour including drinking, drug use, fighting and joy-riding.

This study also suggests that a large proportion of pupils manage to weather the early teenage years without experiencing pressures to conform to a trendy, sexy, rebellious adolescence. Roughly half the target boys and girls of both ages described themselves as stable, content with their place in the middle of the pecking order, well supported by their family and friends, and under considerably less pressure to adopt a particular image or style than pupils higher up the pecking order. For middle pupils smoking was not an issue. They were not

bullied or coerced because others recognized them as 'not the sort to smoke'. If necessary, they adopted strategies to avoid hassle such as avoiding territory in school where smoking took place or not hovering on the margins of smoking groups. They shared parental views and attitudes, and accepted and reflected in their behaviour health education messages about risky behaviours. These pupils were safe—for the time being.

Findings from this study extend those of a similar study of smoking and peer groups carried out in the US which concludes that most cliques are non-smoking and that smoking is primarily associated with isolate status (Ennett and Bauman, 1993, 1994). In our study, smoking is perceived by pupils as a behaviour adopted by some groups but not others. Subsequent social network analyses on the P7 and S2 year groups (Richards, 1989; Michell and Pearson, in preparation) confirmed that smoking is associated with peer groups and their 'hangers on' rather than with isolates. One reason for the discrepancy between the two studies lies in the methodology. Ennett and Bauman used unreciprocated friendship links but in our study only reciprocated friends were included in the social network analyses, otherwise loners might (and did) name pupils as friends simply to avoid the admission of isolation. We were thus able to distinguish between pupils with no friends at all in school (loners) and pupils who had a link via one friend into a peer group. Analysis of the social network data is in progress (Michell and Pearson, in preparation).

The findings from this study question key assumptions which underlie not only school-based smoking prevention programmes but many health education programmes concerned with risk-taking behaviours. First, the evidence from these young people's accounts suggests that with the exception of a small number of marginalized girls, there is virtually no coercive pressure to smoke as the term is traditionally defined in the literature. Yet most smoking prevention programmes are based on the assumption that non-smoking pupils are forced to smoke by their smoking poers and the term 'peer pressure' is used so uncritically in the literature as

to be almost meaningless. There is pressure on teenagers, but it is mainly to do with purchasing the 'right' image and wearing the trendiest gear and logos. For girls, there is pressure to be seen to attract boys.

Second, by the age of 13, pupils are smoking for different reasons. Top girls smoke because of the images of sophistication and sexiness associated with smoking. They smoke because they want to stay at the top. The small number of low-status pupils (mainly girls) smoke to gain popularity. The equally small number of trouble-makers (mainly boys) smoke as one act of rebellion in a wide repertoire of risk-taking behaviours. Currently education neither acknowledges addresses the issue of diverse motivation to smoke amongst adolescents; the challenge now is to find imaginative and alternative ways of reaching such divergent groups. Top girls will almost certainly adopt smoking even with the full knowledge of the health risks involved because in their day-today lives the pressure to stay at the top and to be popular with boys is much more urgent and important than future health risks associated with the habit. For the trouble-makers, school-based health messages will probably only reinforce their smoking behaviour; their arena of influence lies outside the school and they remain strongly in opposition to it. Only the small number of lowstatus pupils fit the model which underpins smoking prevention programmes, but even these pupils will reject safe behaviour if risk-taking will gain them the popularity they crave.

Third, this study affirms that smoking is not particularly related to low-self-esteem. Although a few marginalized girls take up smoking to gain entry to more popular groups, the largest number of smokers at 13 are the top girls who are recognized as more independent, more mature, more rebellious, more fun and more street-wise than their peers.

Finally, the high profile of smoking in the research literature gives an exaggerated impression of its salience in teenagers' lives. Certainly top girls were more animated by the topics of boys and drinking. Top boys were more animated by

football, alcohol and violence. The marginalized pupils were preoccupied with being bullied, and the trouble-makers with gang violence. Smoking may be a great big health issue for adult educationalists but for 'safe' adolescents it is of no interest, and for those who do smoke its main salience is to do with identity and style.

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