

SMOKING DENORMALISATION: A CONCEPTUAL FRAMEWORK

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INTRODUCTION

- Many countries have adopted progressive policies to reduce smoking prevalence, including:
 - Setting explicit 'endgame' goals;
 - Using policies to develop environments that support smokefree behaviours.

Smoking Denormalisation

- Reducing the social acceptability of smoking may have varied impacts.
 - Some people report feeling motivated to quit as smoking becomes less acceptable and prevalence falls.
 - Others resist measures designed to stimulate quitting and exhibit reactance.

RESEARCH AIM

- To develop a conceptual framework of denormalisation and identify measures that would enable monitoring of denormalisation domains.

METHODS

- A narrative review of studies published since 2013.
 - Examined how denormalisation had been conceptualised.
 - Used Link and Phelan's theory of stigma to explore how experiences of denormalisation could be assessed and monitored.¹
 - Focussed on how differences become associated with negative characteristics to create 'other' groups with lower status.

FUTURE INVESTIGATIONS

- Measuring associations between these domains and cessation-related behaviours could deepen knowledge of how denormalisation works and its effects on different groups.
- Examining smoking denormalisation's intersection with other power imbalances, such as gender or ethnicity, could provide new insights into broader social inequalities.

RESULTS

Our conceptual framework includes three domains: societal, social, and personal denormalisation.



SOCIETAL DENORMALISATION

Societal denormalisation positions smokefree lifestyles as normal.

Measures:

- Smokers' perceived social status relative to non-smokers;
- Perceptions of smokefree interventions on social standing and opportunities.



SOCIAL DENORMALISATION

Social denormalisation occurs when social networks that once accepted smoking become less receptive to smoking.

Measures:

- Perceptions of smoking prevalence and normativity within social groups.



PERSONAL DENORMALISATION

Personal denormalisation changes how people see themselves, depending on how deeply embedded smoking is in their identity positions.

Measures:

- Perceptions of personal well-being;
- Experiences of 'othering' (e.g., passive-aggressive reactions to smoking);
- Loss of agency and self-efficacy;
- Compliance with or subversion of smokefree measures.

CONCLUSIONS

- Despite widespread use of measures to reduce smoking's social acceptability, few countries have monitored how perceptions of denormalisation at societal, social and personal levels evolve.
- Systematic monitoring of how denormalisation may affect other power imbalances is also required.
- Denormalisation measures carry risks as well as potential benefits.
 - Comprehensive approaches to assess the impact of this approach are crucial as strategies to reduce smoking prevalence intensify.

REFERENCES

1. Link, B. G., & Phelan, J. C. (2001). Conceptualizing stigma. *Annual Review of Sociology*, 27(1), 363-385

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CONFLICT OF INTEREST STATEMENT

There are no conflicts of interest to report.