Social Determinants and Smoking

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Outline

- Social determinants and social context
- Social determinants of smoking
- Smoking among the Mi’kmaq
- Social context of smoking among the First Nations
“The more distant we are from the world in which each person’s experience is framed, the greater the risk that we might misinterpret it.”

(Amick et al., 1995)
Social Context
Why Consider Social Context?

• Individual behaviours/attitudes and values are shaped by social context
• Understanding social context helps us to also understand why people do or do not act in a certain way
Example of Forgotten Context

- “Butt Out”
- “Just say no”
- “Just do it”
- “Participaction”
- “Choose Health”
Consequence of “Out of Context” Thinking

- Preconceptions and misunderstandings
- Biases
- Discrimination
- Poor relationships
- Inadequate and/or ineffective support
## Social Determinants of Health

- Socio-economic status
- Education Opportunities
- Work Conditions
- Access to Appropriate Health and Social Services
- Physical Environments
- Social support
- Geography
- Culture
- Racism/discrimination
- Age and Gender
- Caregiving
Socio-economic Status (SES)

• Canadian Institute for Advanced Research—
  – SES (income and education) is the most important
determinant of health

• Low SES → communicable disease, chronic
disease, and injuries

• Low SES is associated with poor mental health

• Low SES is associated with higher rates of smoking

• People who smoke, including women who smoke
during pregnancy, are more likely to report:
  – Less income
  – less education
  – less social support
  – higher levels of stress
Smoking, Stress, and Depression

- Smokers with financial stress are less likely to quit
- Ex-smokers with financial stress are more likely to relapse
- Epidemiological and clinical studies have consistently reported associations between smoking and posttraumatic stress disorder (PTSD)
- Persons with PTSD have higher odds of smoking and nicotine dependence and lower rates for quitting
- Depression has been associated with smoking
- PTSD and depression have different pathways in the association to smoking
Smoking Among the Mi’kmaq*

* First Nations Regional Health Survey, 2006
Youth Smoking Cigarettes

- There has been a major decline in the proportion of youth smoking cigarettes. For example, among female youth, from 48 to 35%
Adult Smoking Rates

- Adult smoking rates have not improved since 1997, although the number of cigarettes being smoked is lower.
- The gap with other Nova Scotians is widening.

![Chart 5.52: Smoked Cigarettes at Time of Survey](chart)
(Weighted Percentage Within Gender)

- Not at all: Male 34.3%, Female 35.5%
- Daily: Male 54.4%, Female 59.1%
- Occasionally: Male 8.2%, Female 5.4%
Smoking

Low income/poverty
Low educational opportunities
Poor Working Conditions
Gender

Physical Environment

Limited social support
Limited access to health services and supports
Social stressors
Social Stressors among the First Nations

- Historic trauma (*colonization, colonialism, genocide, forced assimilation*)
- Neo-colonialism, Euro-centrism/racism
- Poor physical environments
- Limited health and social services
- **Low SES** (*education, income, work*)
- Aboriginal women have the lowest SES of any segment of the Canadian population – some living in 3rd world conditions
Social stress is linked to:

• decreased self-esteem, depression, diminished sense of control
• fewer opportunities to access opportunities for education, leisure activities or support
• increased consumption of “comfort foods”, alcohol, drugs and smoking
Given these contexts, what can be done?

A place to begin:

What reasons do Mi’kmaq people report for quitting?
## Reasons Youth Quit

<table>
<thead>
<tr>
<th>Reason for Quitting</th>
<th>Males</th>
<th>Females</th>
</tr>
</thead>
<tbody>
<tr>
<td>Out Of Respect For Loved Ones</td>
<td>31.8%</td>
<td>30.0%</td>
</tr>
<tr>
<td>Chose A Healthier Lifestyle</td>
<td>31.9%</td>
<td>26.6%</td>
</tr>
<tr>
<td>Peer Pressure From Friends Or Co-Workers</td>
<td>22.1%</td>
<td>7.1%</td>
</tr>
<tr>
<td>Greater Awareness Of Ill Effects Of Tobacco</td>
<td>0.0%</td>
<td>27.3%</td>
</tr>
<tr>
<td>Health Condition</td>
<td>5.8%</td>
<td>2.4%</td>
</tr>
<tr>
<td>Respect For Traditional Significance Of Tobacco</td>
<td>0.0%</td>
<td>7.1%</td>
</tr>
<tr>
<td>Pregnancy</td>
<td>0.0%</td>
<td>5.0%</td>
</tr>
<tr>
<td>Doctor's Orders</td>
<td>0.0%</td>
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<tr>
<td>Reason</td>
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RELATIONSHIPS

A place to begin...