

Re-configuring Identity Postpartum and Sustained Abstinence or Relapse to Tobacco Smoking

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No conflicts of interest to declare

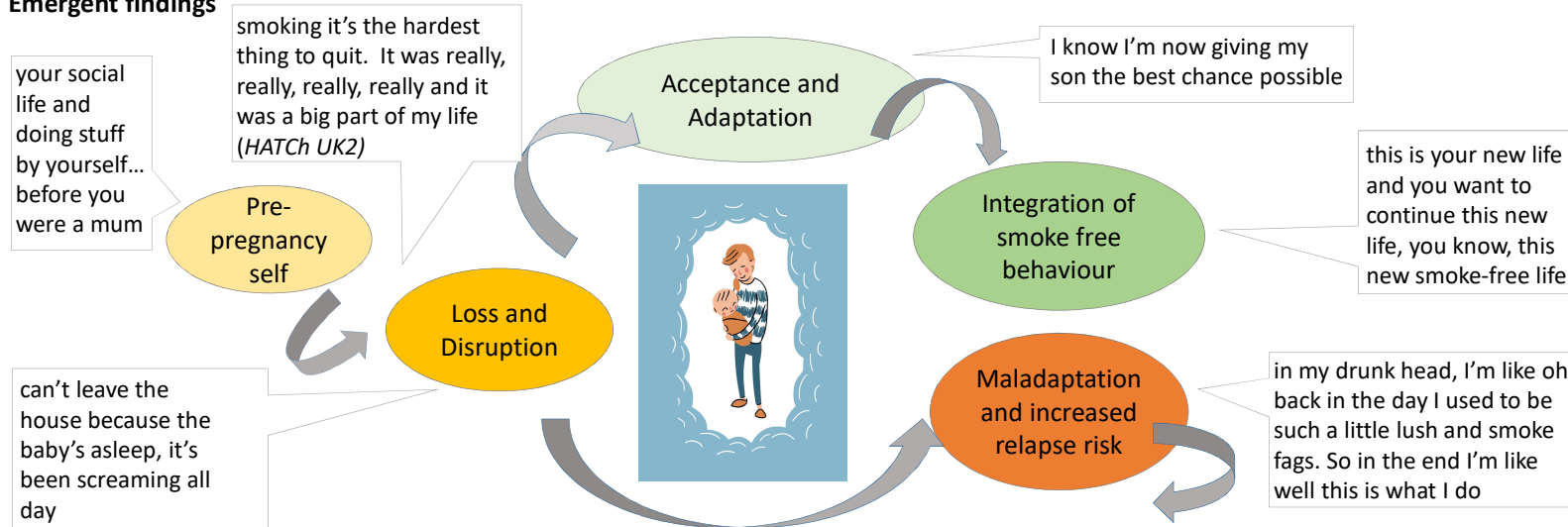
Background

- For women who quit smoking for pregnancy risk of relapse postpartum is high[1]
- Risk factors include the physiological return of cravings, and stress, with smoking perceived as a coping response [2]
- Identity change may also be significant, as women adjust to a new mother identity, and simultaneously struggle to leave behind a smoker identity [2,3]

Methods

- Secondary qualitative analysis of data from the PReS Study, seeking views of pregnant and postpartum women (smokers and ex-smokers), their partners and health professionals (n=84)
- Data was analysed using a constructivist grounded theory approach, inductively coding
- Additional analysis of data from the Project HATCH study – a focus group study exploring the health behavior experiences of women in the postpartum period (n = 26)
- Inductive thematic coding within a theoretical framework of a life course narrative approach

Emergent findings



Results and Conclusions

- Analysis revealed loss as a central theme. Smoking for many was an integral part of their identity prior to parenthood, thus relapse was positioned as part of regaining the previous 'lost' identity
- 'Disruptions', such as the abrupt change to identity of new motherhood, or the shift from smoker to non-smoker, present challenges to the cohesion of identity

Implications and Recommendations

- Our analysis suggests interventions to support postpartum relapse prevention must critically include support for women in adjusting to a new identity as a non-smoking mother
- Interventions that do not acknowledge the struggle of managing disruption to the narrative flow of identity formation may be less effective
- Identity is co-constructed with others, and the role of social support, particularly partner support, must be considered as part of identity adjustment