

MAT  *Medicine Anthropology Theory*

DISSERTATING ESSAY

What is a ‘throat hit’?

Reframing smoking as a sensory practice

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'Cigarettes affect me everywhere', drawn by Lea, 22, French student in psychology

The saleswoman is standing with her hand on one hip, looking at me in exasperation. 'Try it why don't you, instead of asking so many questions!' she bursts out. I reach gingerly for the metal electronic cigarette – or 'e-cigarette' – she is holding out. I know how to light a typical, commercial cigarette, rolled in paper, and this couldn't be more different. The device is huge and must weigh almost a kilo, and, to be honest, I have no idea how to even hold it appropriately. Under her amused stare, I press the button and breathe in through the plastic mouthpiece as it makes a crackling, slurping noise. As I exhale, I engulf us both in a white strawberry-smelling mist, and instantly burst out coughing. She nods approvingly. 'There, now do you see what I mean?'

Some of the most striking 'aha' moments are sensory: they happen with and inside bodies. Anthropologists have been immersing themselves in the 'taste of ethnographic things' (Stoller and Olkes 1989) over the last twenty years, since a sensual turn in anthropology has led to examining the way senses, sensibilities, and perception itself are collectively and culturally patterned (see, for example, Classen 1993; Howes 2003). Although there has been an explosion of interest in everyday activities such as eating, drinking, and dancing, somehow smoking has eluded this exploration.

When I first started research as part of the Chemical Youth project (an international interdisciplinary program that investigates how youth use chemical substances in everyday life), the only 'ethnographic things' I wanted to 'taste' were conventional combustion cigarettes. I wanted to study something serious, authentic, and important. Like most people in my circle of acquaintances, I had an aversion to e-cigarettes, considering them to be yet another ephemeral commercial trend, the 'next big thing', like yo-yos, Tamagotchis, or iPads. So when my project coordinator insisted that the research team would prefer I conduct a study on e-cigarettes, I sulked. But I held my ground: Fine, I conceded, but it will be a comparative study, then, between cigarettes and e-cigarettes.

As a (very) occasional smoker living in a house of regular smokers, I had underestimated the difficulty of adopting a 'distant gaze' (in Levi-Straussian terms) on 'ordinary' smoking. How could I find out what goes on inside smokers' bodies? I had exciting ideas for visual anthropology, involving thrusting pens and paper upon smokers, with which they would sketch their insides; or collecting photographs of smoked cigarettes, smoking selfies, portraits of ashtrays, etc. Despite much enthusiasm and imagining, these efforts didn't lead to much. Smokers invariably 'forgot' to take photographs, claimed they couldn't draw, or scribbled stick figures and smiley faces. Two psychology students managed to sketch some interesting dislocated organs (see above), but were unable to comment on the pictures, apart from saying, 'Well, cigarettes affect me everywhere'. I was devastated. It was only when I started talking about e-cigarettes with interlocutors that their ideas and opinions about smoking suddenly began pouring out. They had something to compare it with. Only then did

I realize that e-cigarettes, as exotic objects, could act as a window through which to study more mundane cigarettes, and vice versa.

After a tour of e-cigarette shops in Lyon, I quickly came to the conclusion that e-cigarette manufacturers and marketers are a step ahead of social scientists and addiction specialists on the subject of cigarette smoking, since their research is on the cutting edge of understanding what smoking actually is. The ‘science’ of e-cigarettes is largely based on a technological innovation: synthesizing smoking as a (possibly total?) sensory experience. This technology allows users to experience pleasurable sensations and engage in social activities whilst modulating the different substances that enter their bodies (Bevan, forthcoming). While scholars from various schools have theorized smoking as principally physiological (see the US Surgeon General’s 1988 report on cigarette smoking as behaviour controlled by a psychoactive substance), psychological (see Tomkins 1966 on affect), or social (see Haines, Poland, and Johnson 2009 on smoking as social capital), e-cigarette manufacturers appear to approach smoking instead as an efficient bodily technology.

What the e-cigarette salesperson urged me to discover for myself by inhaling vapour through a ‘powerful top-quality model’ was that the throat is an important sensory canal – a topic rarely discussed by social scientists, or by smokers themselves for that matter. E-cigarette vendors and users however often seem surprisingly up to date on the subject. *E-cigarette Magazine*’s first edition (2013/2014, 32) defines the concept of ‘throat hits’ to newbies as ‘the sensation experienced by the smoker in the throat when the pharynx contracts during smoke inhalation’.

I asked French smokers in the field to close their eyes while smoking, and prompted them to relate exactly what was going on. Participants found these experiments exceedingly difficult, and only one was able (after several cigarettes) to come to the following conclusion:

When I draw on my cigarette, it’s as if I can see a trickle of smoke that goes down my throat. And I have the impression that the smoke gets blocked in an air bubble. So I finish drawing on my cigarette, and when I release the pressure, I can feel the rest of the smoke going into my lungs. And after that I feel that it enters me. That it enters all the rest.

Twenty-four-year-old Fanny describes the inward voyage of smoke, and breaks this bodily journey down into several moments: the smoke’s entrance into the throat, a moment of dense smoke concentration ‘blocking’ the throat, a pressure release whereby the smoke travels into the lungs, and the spreading of the smoke subsequently into the rest of the body.

In a similar way, e-cigarette 'science' deconstructs the sensory experience of smoking into the passage of a smoke-object and a nicotine-object into the body. Whereas these two action-sensations are deeply entwined and inseparable in conventional smoking experience, e-cigarette technology operates via (and despite) their separation.

The e-cigarette's chemical cocktail of propylene glycol and nicotine 'scientifically' produces a tangible and stable bodily reaction in the larynx/pharynx, as e-cig vendors and passionate users easily recounted to me. These organs are usually thought of in relation to speech or vocalization, but with e-cigarettes, they undergo new mobilization. Nicotine is being considered in a new light: more than just biologically addictive, nicotine is key to producing throat contractions, newly considered the essence of the physical experience of smoking. By framing the larynx/pharynx as a new receptive centre, a sensory organ in itself, physiological and psychosocial aspects of dependence are fully merged: advertisers frame e-cigarettes as fun, trendy objects for socializing, displaying personal style, etc., while local vendors sell them as technology that can 'scientifically' substitute a localised sensory experience.

Smokers' sensuous bodies have been largely eclipsed by the omnipresent imagery of illness, disease, disfigurement, and morbidity that is diffused through public health messaging. Only by getting a burning sensory 'aha' myself and discussing this with others, could I drag some of these hidden bodies of experience out into the open, and identify the throat as an implicit sensory organ at the heart of smoking practices.

About the author

Imogen Bevan is a medical anthropology student at the University of Edinburgh. Her first year's master's research dissertation at University Lyon 2, France, was conducted within and funded by the ERC Chemical Youth research program. Based on fieldwork conducted with smokers, e-cigarette users, and salespeople in Rhone-Alpes, France, her work focuses on the ways in which substances are incorporated by bodies through practices. Her scholarly interests include global health; the boundaries between food, drugs, and medicine; sensory anthropology; and visual research methods.

References

- Bevan, Imogen, forthcoming. 'E-cigarettes: When Smokers Take Their Health into Their Own Hands. Discordances between Tobacco Control Policies and Bottom-up Harm Reduction Strategies in France'. Submitted to *Contemporary Drug Journal*.
- Classen, Constance. 1993. *Worlds of Sense: Exploring the Senses in History and across Cultures*. London: Routledge.

- Haines, Rebecca, J., Blake D. Poland, and Joy L. Johnson. 2009. 'Becoming a "Real" Smoker: Cultural Capital in Young Women's Accounts of Smoking and Other Substance Use'. *Sociology of Health and Illness* 31, no. 1: 66–80.
<http://onlinelibrary.wiley.com/doi/10.1111/j.1467-9566.2008.01119.x/pdf>.
- Howes, David. 2003. *Sensual Relations: Engaging the Senses in Culture and Social Theory*. Ann Arbor: The University of Michigan Press.
- Stoller, Paul. 1989. *The Taste of Ethnographic Things: The Senses in Anthropology*. Philadelphia: University of Pennsylvania Press.
- Tomkins, Silvan, S. 1966. 'Psychological Model for Smoking Behaviour'. *American Journal of Public Health and the Nations Health* 56, no 12: 17–20.
http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.56.12_Suppl.17. doi: 10.2105/AJPH.56.12_Suppl.17.
- U.S. Department of Health and Human Services. 1988. *The Health Consequences of Smoking: Nicotine Addiction: A Report of the Surgeon General*. Washington, DC: US Government Printing Office. <http://profiles.nlm.nih.gov/ps/access/NNBBZD.pdf>.