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Special thanks to each member of the advisory committee:

Diane Denton......Department of Health and Social Services, Government of Nunavut Gillian Saunders....Department of Health and Social Development, Nunatsiavut Government Kathy Snowball.....Public Health Division, Nunavik Regional Board of Health and Social Services

Jasmine Redfern ... Nunavut Tunngavik Incorporated

Tammy Matthews...Canadian Prenatal Nutrition Program , Ingamo Hall Friendship Center, Inuvik, Northwest Territories

Looee Okalik......Inuit Tapiriit Kanatami, Ottawa, Ontario

Catherine Carry.....Inuit Tuttarivingat, National Aboriginal Health Organization, Ottawa, Ontario Judy Voisey.......Aboriginal Family Resource Center, Happy Valley-Goose Bay, Newfoundland

and Labrador

Wendy Reynolds ...Action on Women's Addictions and Research and Education (AWARE), Kingston, Ontario

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Tracy O'Hearn, Executive Director, Geri Bailey, Manager, Health Policy and Programs, Annie Aningmiuq, Melissa Greyeyes-Brant, Ceporah Mearns, and Mary Bergin, Health Project Coordinators, Wanda Jamieson, Evaluator, and Phillip Bird, Consultant.

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Pauktuutit Inuit Women of Canada 1 Nicholas Street, Suite 520 Ottawa, Ontario K1N 7B7

Tel: 613-238-3977

Toll Free: 1-800-667-0749

Fax: 613-238-1787

Email: info@pauktuutit.ca

www.pauktuutit.ca

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Purpose

The purpose of this step-by-step Atii! Reduce Second-hand Smoke guide is to help provide Inuit women and mothers with accessible, culturally relevant strategies and supportive measures to:

- reduce second-hand smoke around their children and families;
- reduce the harm it causes; and
- build on the strengths women have to support positive change.

This guide was written for people who work with the Community Action Program for Children/ Canadian Prenatal Nutrition Program (CAPC/CPNP), Community Health Representatives (CHRs) and related workers to provide strategies to help Inuit women reduce second-hand smoke.

The Goals of *Atii!*Reduce Second-hand Smoke

The Atii! Reduce Second-hand Smoke program does not focus on quitting smoking. It is based on supportive measures and promising practices principles, with the following goals to:

- help women and their families reduce their children's exposure to second-hand smoke;
- help women and their families reduce their own smoking but only if they choose to do so; and
- help women and their families quit smoking but only if they choose to do so.

How to Use *Atii!*Reduce Second-hand Smoke

This guide provides a framework which can be modified to meet the specific needs of your community and/or organization. It can be delivered in a number of different ways. It can be used as a stand-alone program or as an addition to an existing program. For example, this can be added into a prenatal group, the Blue Light Campaign (BLC) or any wellness group in your community. While there are a number of different programs that focus on smoking in Inuit Nunangat, Atii! is not intended to replace them; it can be used to complement them. It can be used in group settings or in individual sessions. You can rearrange, combine, and/or modify the sessions and worksheets that are outlined in this guide to meet the needs of your client or community. There is no 'right' way to use the program or engage the participants.

The Blue Light Campaign

The Blue Light Campaign (BLC) was an initiative coordinated at the national level by Inuit Tapiriit Kanatami (ITK) and the National Inuit Tobacco Task Group (NITTG) and carried out by regional health coordinators from several Inuit regions. The initiative aimed at reducing the rates of second hand smoke in Inuit homes with the hopes of reducing the smoking rates of 69% (compared to 19% for the Canadian population).

www.inuitknowledge.ca/content/blue-light-campaign-results-nunavut)

Here are some suggestions for getting started.

• **Get people interested**. Mention the *Atii!* program in other programs. You can mention what the program is about and that it is not about quitting smoking. See if there is any interest.

- **Put up posters.** Generate interest by putting up posters and leaflets about the program. Include your contact information.
- Hold a group workshop or gathering. Women who are interested in participating can meet. They can work together with the guidance of the *Atii!* worker.
- Hold individual sessions. The Atii! program can be done in one-on-one sessions to set goals and discuss the step-by-step guide in the Atii! journal.
- Use incentives. You can use incentives to welcome participants and to thank them for their participation in the program. For example, you could hold a gathering and provide welcome bags with things participants could use to help them delay their smoking, such as:
 - the Atii! Reduce Second-hand Smoke stress balls, pins, stickers;
 - the Blue Light Campaign light bulbs/ wristbands;
 - a bag of microwave popcorn;
 - straws and licorice cut the length of a cigarette (to suck on during a craving);
 - a toothbrush and small tube of toothpaste;
 - a pack of sugarless gum;
 - a package of sugarless hard candies; and
 - a deck of cards to shuffle (to keep hands busy).

Feel free to include any items that are available and appropriate.

Who Can Benefit From Atii! Reduce Second-hand Smoke?

We discovered there were no other programs for women who want to reduce second-hand smoke particularly around young children. The Atii! program will meet the needs of women who:

- smoke;
- have partners who smoke;

- are single mothers; and/or
- care for children under the age of six.

This program will help health workers to learn:

- strategies to reduce second-hand smoke;
- how to get women involved in talking about reducing second-hand smoke;
- about setting goals to reduce second-hand smoke; and
- ways to support women towards making changes and guide women through the Atii! journal.

More Information about Second-hand Smoke

Second-hand smoke is known to have negative effects on the health of everyone exposed to it. It is the smoke that is exhaled while smoking, and the smoke that comes from a lit cigarette. Second-hand smoke is harmful to everyone, but it is especially bad for children and babies. Because of their size, children breathe in more air and take in more of the toxins than adults do. Their immune systems are weaker and they are less able to get away from the smoke. For children and babies, it can cause:

- respiratory diseases such as asthma, bronchitis, respiratory syncytial virus (RSV) and pneumonia;
- crib death (also known as Sudden Infant Death Syndrome or SIDS). The risk of crib death is increased when the child is exposed to second hand smoke;
- less healthy lungs;
- childhood cancer; and
- more ear infections than normal.

Many mothers are aware of the negative effects of smoking. However they may not be ready to quit. The *Atii!* program will help women set goals and make a plan to reduce second-hand smoke.

Section One Train-the-Trainer Guide to Strategies to Reduce Second-hand Smoke



Second-hand smoke is even more dangerous inside a car because the space is smaller. Some people think that rolling down the window gets rid of the chemicals but it doesn't.

Third-hand Smoke

Third-hand smoke is the smoke that stays on clothes, in the hair and on things in the home after a cigarette is put out. This smoke has toxins that harm children when they come in contact with it. Washing hands, changing clothing after smoking, and washing the walls after smoking are ways to protect children from third-hand smoke.

Smoking FAQs

- Lung cancer rates for Inuit men and women in Canada are the highest in the world and these rates are rising. (Circumpolar Inuit Cancer Review Working Group, 2008)
- More than half (58%) of Inuit adults smoke on a daily basis. This is over three times higher than all adults in Canada (17%). (Canadian Community Health Survey, 2005)
- Female smokers are at extra risk for:
 - cancer of the cervix (womb);
 - menstrual problems;
 - fertility problems; and
 - spontaneous abortion (miscarriage). (Health Canada, 1999)

Why Women May Smoke

There are many reasons why women smoke, which may be different from men. The role that smoking plays in the lives of women can make it very difficult to think about quitting smoking. Nicotine causes a physical dependency which makes quitting or even cutting down difficult. Common reasons for smoking are:

- using smoking as an appetite suppressant.
 Many women smoke in order to eat less and therefore have more food for their children:
- smoking can be a break especially from children. It gives women a chance to sit down for five minutes and relax;
- smoking is often used to deal with difficult emotions such as stress, anger or even depression;
- smoking can feel like a friend. Some
 women say that smoking a cigarette is
 like spending time with good company
 or a good friend; and
- smoking can be like being part of a club.
 Smoking with other friends is a time to socialize.

What are other reasons why women may smoke?

The Cost of Smoking

Some women smoke to suppress their appetite which leaves more food for their children. We know that mothers make choices with the best interest of their children in mind, but did you know that cutting down on smoking can be an even better way to save money and be able to buy more healthy food? In Nunavut, cutting down from a pack a day to half a pack a day can save you \$250/month. That's a lot of groceries!

Here's What You Need to Know Before You Start

Your Role

The responsibilities of the Atii! workers are to:

- familiarize yourself with the different worksheets and handouts in the appendices.
 These will form the basis of the group and/or individual sessions;
- identify manageable goals that will work for each participant in order to reduce her children's exposure to cigarette smoke;
- congratulate every small step;
- help each participant recognize her smoking triggers and brainstorm ways to overcome those cravings; and
- **help** each participant write down her progress and help guide her through the worksheets in her journal.



Role of the Participant

The responsibility of the participant is to:

- **decide** what their short and long term goals will be;
- **brainstorm** small steps to take towards their goals;
- attempt to make these changes;
- write down progress, setbacks and other information about their change attempt; and
- **discuss** their progress with you and come up with strategies to reach their goals.

What are some of the reasons why a woman

may want to reduce her smoking around her family? Write down your ideas.

Being an Atii! Reduce Second-hand Smoke Worker

It can be a challenge to have women participate in smoking-related programs. Many past approaches often focus on quitting. Quit smoking messages can make women feel guilty if they are not ready or able to quit instantly. Instead of pressuring women to quit, the goal of the Atii! program is to encourage women to take small steps to reduce smoking around their families. The focus is on harm reduction. Let women know that their participation doesn't require them to quit smoking. This guide will help you provide women with the tools to motivate change using a non-judgmental and supportive approach.

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Supportive Measures

As an Atii! worker you will provide the support to make a plan for change. Your role in these situations is to be mindful of the possible barriers a woman might face. Barriers can be talked about and solutions found for continued participation (i.e. childcare, transportation). You should try to stay hopeful, optimistic and always let the participant know that she is welcome to get involved again when she is ready. The Readiness-to-Change Scale Worksheet 1 can help start that discussion.

Motivational Interviewing

This is a way of talking to people who are trying to quit or are thinking about quitting. This approach focuses on small positive changes, successes and strengths in order to increase a person's motivation to change. Here are five basic strategies to use.

 Ask open-ended questions. Instead of asking a yes or no question like, "do

- you like to smoke?" ask instead, "what are some of the things you like about smoking?"
- Listen reflectively. Repeat back in your own words what she has said. This shows that you are listening and have understood her.
- 3. **Summarize every so often** what she has said to remind her of her goals.
- 4. **Affirm**. Support and comment on the woman's strengths, motivation, intentions and progress.
- 5. Bring out self-motivational statements from the participant. The participant herself must make the decision about personal concerns and intentions to change. These statements might include: "I will make changes for my well-being and for my family."

These statements might include: "I will make changes for my well-being, etc.

Try not to say

Do you know how much you put your children at risk by smoking around them?

If you quit smoking you would have more money for yourself and your children.

Do you realize children copy what they see?

Why don't you just quit? Why don't you try the patch?

Try to say

You do so many things to protect your children. Would you like to learn some ideas about how to protect your children from second-hand smoke without having to quit? You could provide some examples of how a mother may protect their child (i.e. immunizations, etc.).

It can be hard to make changes to your smoking. Making changes takes time. There are lots of benefits when you quit or cut down. Do you want to talk about some small steps you can start to take now?

Your family will appreciate you trying to take steps to change.

When you're ready to think about quitting smoking I can help you find supports or other quitting aids.

Here are some strategies for Atii! workers.

- Express empathy through reflective listening. Use gentle words and understand that the final decision/responsibility for change is up to the woman. Communicate respect for and acceptance of her feelings.
- **Avoid argument**. Ask what she would like to talk about. Ask about her interests and incorporate them into a plan.
- If there is resistance don't oppose it.

 The participant can take part when she is ready. Adjust to resistance by changing strategies.
- Help motivate a commitment to change. Reflect on her goals and discussions to help direct change.
- Emphasize personal choice. Support her choices and her own control over decisions about smoking by providing a range of possible alternatives for change. Create greater awareness of tobacco use. This will help the woman gain a better sense of control. Focus on the woman's strengths. This will help build her confidence in making changes.
- Work together to set goals. Do not impose your own beliefs or strategies.
 Follow the participant's lead. An equal responsibility should be placed on both the Atii! worker and the participant to make successful changes.
- Accept relapse and set-backs as part of the process of change.

Empathy means understanding what a person is feeling, where they are coming from and what their point of view is. An *Atii!* worker can show empathy by listening carefully to what the person says and then saying something calm and nonjudgmental which shows you are trying to understand.

If a Participant Wants to Quit

Although this is not a quit smoking program, some women do try to quit. Some women will likely consider quitting smoking as a long term goal and will decide to make a quit attempt during their participation in this program. Quit attempts are extremely important even if the attempt is short-lived. Every time a smoker tries to quit she learns skills that will help with her next quit attempt. On average it takes women seven serious quit attempts before they successfully quit smoking. You will find the following handouts in the appendix that can be given to the woman if she decides to quit smoking:

- Second-hand Smoke Protection Handout 1;
- Smokers Survival Kit Handout 2;
- Am I Ready To Quit? Quitting Smoking Aids Handout 3:
- Ready to Quit? Some Ideas to Help Me Quit Smoking Handout 4; and
- What Happens When I Quit Smoking (Withdrawal Symptoms) Handout 5.

What an *Atii!* worker can do during and after a quit attempt:

- **encourage** her belief in her ability to make change;
- help the participant to make her quit attempt by following the guidelines in the resource book (she will be more successful if she is well prepared);
- avoid guilt or blame if the quit attempt is short-lived;
- **discuss** the ways that did and didn't work during her quit attempt;
- determine which triggers lead to her relapse;
- **decide** new strategies that she can try the next time she tries to quit;
- write down these observations in her journal;

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- **remind** her to review what she wrote down before her next quit attempt; and
- maintain your own sense of optimism.

Cigarette Fading and DEEDS

Two strategies to cope with cravings are cigarette fading and DEEDS. Use these strategies to help women reduce the harm of second-hand smoke. These strategies can also be found on Worksheet 5.

Cigarette fading means gradually cutting down on the number of cigarettes smoked each day. Start by figuring out the number of cigarettes she will allow herself each day. Then she will only carry that number with her or give them to a non-smoking friend to keep for her. Put the rest of the package in the freezer or another place that's difficult to reach. She could also:

- figure out the average number of minutes between each cigarette smoked;
- gradually increase the minutes between each cigarette by 10 to 15 minutes;
- keep increasing the time between each cigarette;
- stick to her schedule or the strategy won't work. It's OK to wait longer if she can but she should not smoke more than her schedule allows; and
- if she finds it too difficult to stick to her schedule it's OK to go back to smoking more frequently until she is ready to try again.

Follow the *DEEDS* strategy of *delay, escape,* evade, distract and substitute (*DEEDS*) to help cut down or quit smoking.

DEEDS is similar to the four Ds of quitting smoking: delay, distract, deep breathing, and drink water.

Delay

A cigarette craving fades in 10 to 15 minutes even if she doesn't smoke. Tell her to tell herself "this urge will pass" or "I'd like a cigarette but I don't need this one." When she has a craving, tell her to try to delay smoking for 15 minutes. This gives a greater sense of control over smoking and it confirms that cravings don't last forever. Delaying her smoking will get easier the more she tries. Gradually she will be able to delay for longer periods of time and she will smoke fewer cigarettes each day. Try these ideas.

- Delay her first cigarette of the day.
 Tell her to eat breakfast before she smokes or wait until she gets the children off to school.
- Set certain hours that are smoke free. For example, try not to smoke between 9 pm and 9 am.
- Put ashtrays and lighters in different places so smoking is less convenient and/ or use the Nunavut Tunngavik Incorporated (NTI) promoted mobile ashtrays to take smoking outdoors.

Escape

If she can, leave the situation that causes the craving. This isn't always easy, especially if she's a single mother and can't leave her children alone. Also sometimes it's her children's behaviour that causes cravings! Try these ideas.

- Occupy her children with a DVD, listen to an MP3 player or radio.
- Make a list of cool crafts your children can work on when you need a break try to keep the materials on hand.
- Act "as if" and pretend that she is a nonsmoker for 15 minutes.
- **Be realistic.** Take a five minute break instead of wishing for the afternoon off.
- Take a mental vacation. Imagine the place she would most like to be at. Include her

children. Ask them where they would most like to be and why.

• **Put on headphones** and listen to her favourite music or the radio. She can still see her children without hearing them.

Evade

Try to avoid situations where she knows there will be smoking. When she's more able to resist cravings she can slowly get back to a normal routine. Set non-smoking rules for her home and stick to them. Try these ideas.

- Set up a comfortable smoking place outside for her guests to use. Ask them to watch her children while she goes outside to smoke.
- Go places where smoking isn't allowed like playgroups or the library.
- Hang out with friends who are nonsmokers or who are trying to protect their children from second-hand smoke. Visit friends who also have a nonsmoking home.

Distract

Think of things to do that will keep her mind off smoking. Think of a list of things that she can't smoke and do at the same time.

- Wash dishes, braid her hair, give the kids a bath.
- Play cards, knit or sew.
- Chew sugarless gum or hard candy.

Substitute

When she has a craving substitute something she likes that will keep her hands and mouth busy. Things she can keep on hand to substitute during a craving.

- Chew a sugarless candy or a straw.
- Chew sugarless or nicotine gum.

• **Brush** your teeth or have a drink of ice cold water.

Caring for People in Your Home and Family

Women and mothers protect their families in many ways. By reducing second-hand smoke around the family, women are making a continued effort to protect them and reduce harm. The following exercise will help *Atii!* workers and participants practice the ways of motivational interviewing. This also helps women to reflect on the ways that they protect their families (including children, elders and other relatives).

Activity

Answer what applies or is relevant to you.

If you need help getting the discussion started, the following exercise can be useful to use with mothers in an Atii group or in one-on-one sessions.

Ask participants:

What are the things that you do to protect your family from harm? An example might be "as a parent I protect my children from diseases by ensuring they get all their immunizations." Other sample questions are below:

As a parent,

I carry my baby in my amautik to protect my child from the cold.

.....

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As a sibling,
As a relative,
As a friend,
How do we care for ourselves?

Role Play

There are several reasons why a woman might have difficulty finishing the *Atii!* program:

- lack of support from family and friends;
- abusive home situations;
- coping with things that may have happened in the past; and
- feeling like everything is coming at you all at once.

Role playing can help explore these reasons. It helps to build practical skills for handling difficult situations and it encourages a deeper understanding of an issue by those in the role play and those watching. It puts participants in touch with their emotions. In a group of Atii! workers or on your own review, reflect on common situations that might come up during the program. In a group of two or more women you may decide to act out one of the scenarios. Afterwards discuss as a group how the role plays went and the related questions.

Lack of Support From Family and Friends: Scenario One

Oleepeka and Anne have been smoking buddies for 15 years. Their children were even born around the same time. After the birth of Oleepeka's second child she decided that it was time to start thinking about reducing second-hand smoke around her children. Oleepeka told Anne that she was smoking either outside or in her smoking place with the window open and a fan blowing the smoke outside when she couldn't leave her children alone. Anne laughed at her and said, "Good luck! I'll see you at my house where I can smoke wherever I want." Oleepeka did not want to lose the friendship and support of her friend but she didn't want to lose sight of her goal with the program either.

 What could Oleepeka do to help her remain involved with the program and yet not lose her long standing friendship with Anne?

- What can Oleepeka do to help her delay smoking until she can go outside to smoke?
- What other ways can Oleepeka access support?

Lack of Support From Family and Friends: Scenario Two

Alice is a single mom with two young children. She has recently switched from smoking inside her house to having cigarettes outside on her porch away from her children. Sometimes she is so tempted just to say "forget it" and have her cigarette in the furnace room. But she knows that the second-hand smoke will travel through the house. Alice's mother visits a lot, helps out with childcare and gives Alice money when she can to help with bills and food. Her mother also smokes. She loves to sit at the kitchen table, coffee in one hand and cigarette in the other with no concern about the children or her affect on Alice's goal. Alice is scared to say anything to her mother for fear of losing her support. Alice hasn't told anyone about her goals regarding protecting her children from second-hand smoke because of her own fear of failure.

- What strategy can Alice practice in protecting her children from second-hand smoke when her mother is visiting?
- How can she communicate her goal of moving outside to smoke with her mother?

Abusive Home Situation: Scenario One

Hannah has smoked since she was 13 and has three children under age five. Her partner, Johnny, works but the hours are poor and the money is even worse. Johnny is unhappy with his job and he sometimes comes home angry, aggressive and smelling of alcohol. Most of the time Hannah just puts up with his mood but now that she has begun to reduce the amount that she smokes around the children, she is also feeling irritable. When he goes to light up she asks him to take it to the spare room and turn on the fan

in front of the open window. Johnny gets angry stating that he makes the money that pays for the rent, food and heat in the house. He says that means that he can do whatever he likes. However, when Hannah tries to make her point again Johnny lashes out and hits her.

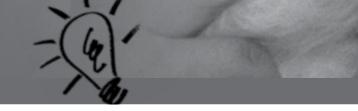
- What are the risks Hannah is dealing with on a day-to-day basis?
- What safety measures can she employ for herself and her children?
- Are there ways Hannah can reach her goal to protect her children from second-hand smoke while still living with Johnny?

Coping With Shame: Scenario One

Lucy has done the first three individual Atii! sessions but finds it hard to complete her worksheet and stay on target. When she is with her Atii! worker she feels so confident that she agrees to certain goals that are not realistic for her once she is at home with her family. She feels too ashamed to say "I just can't do that," especially when other women she knows who are also involved in the program are doing really well.

- What are the reasons that are keeping Lucy from reaching her goals?
- What are some smaller steps Lucy can take to give her greater confidence?





Coping With Shame: Scenario Two

Susie's daughter, Maata, has just finished her first day in grade 2. Susie was cleaning up around the house when Maata got off of the bus. While Susie was emptying the ashtrays, Maata said to her "mommy, you shouldn't smoke. It's bad for me and you're going to die." Susie feels terrible but isn't ready to quit smoking.

- What can Susie say to her daughter to let her know that she cares?
- What small steps can Susie take to protect her daughter from second-hand smoke?

Feeling Overwhelmed: Scenario One

Myna was confident about her goals especially when all three children are home. But between fixing meals, homework and bedtime routines, she struggles to delay her smoking until the kids are in bed at 7:30 pm. Now her unpaid bills are piling up and phone calls start at 5 pm from people wanting money. Myna's anxiety goes up with each phone call threatening to shut off her power or phone. By 6 pm Myna feels like screaming and definitely wants to smoke.

- How can Myna use the *DEEDS* strategy to her advantage?
- What can Myna do to help her cope with her anxiety and stress, instead of smoking?

While there are a number of different programs that focus on smoking in Inuit Nunangat, Atii! is not intended to replace them; it can be used to complement them. It can be used in group settings or in individual sessions. You can rearrange, combine, and/or modify the sessions and worksheets that are outlined in this guide to meet the needs of your client or community. There is no 'right' way to use the program or engage the participants.





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Section Two Step by Step Session Overview



Session 1: Are You Ready?

Goals of Session

- Introduce the various exercises of Atii! Reduce Second-hand Smoke.
- Assess the readiness of the participant.
- Discuss the different ways based on their readiness.

What You Need

- Demographics and Consent Form (Program Worksheet One)
- Readiness-to-Change Scale Worksheet 1
- Fagerstrom Test for Nicotine Dependence Worksheet 2
- Cigarette Monitoring Form Worksheet 3
- Second-hand Smoke Protection (Handout One)

What Participants Need

- Readiness-to-Change Scale Worksheet 1
- Fagerstrom Test for Nicotine Dependence Worksheet 2
- Current Reasons for Smoking Worksheet 3
 Cigarette Monitoring Form
- Second-hand Smoke Protection (Handout One)

Step 1

Go over the Demographics and Consent Form (if your site chooses to use it).



Step 2

Explain the purpose of the program you can introduce *Readiness-to-Change Scale Work-sheet 1* and discuss the follow-up questions.

Step 3

Fill out Fagerstrom Test for Nicotine Dependence Worksheet 2 with the participant. Understanding her level of dependency will help in determining goals and strategies to reach them.

Step 4

Introduce Cigarette Monitoring Form Worksheet 3. Show her how to fill out the worksheet and ask her to track her smoking patterns for the next session.

Step 5

Create a file for each participant. Make sure it is available for every session. At the end of all the sessions, you will need the file for evaluation. Each file should contain all the worksheets/ handouts that you will use with the participant.

Session 2: Setting Goals

Goals of Session

- Write down the participant's smoking patterns.
- Start brainstorming possible short term and long term goals.

What You Need

- Cigarette Monitoring Form Worksheet 3
- Short and Long Term Goals Worksheet 4

What Participants Need

- Cigarette Monitoring Form Worksheet 3
- Short and Long Term Goals Worksheet 4

Step 1

Review her current smoking patterns worksheet.

- **Explain** that it's important to look at her smoking patterns and to measure any changes she makes while participating in the program.
- **Describe** that together you will gain awareness of where, when, and how much she smokes. This will give her an idea of what her triggers are.
- Ask her to continue to write down her smoking patterns. Next time you will both look over the worksheet to see if she can find any patterns.

Step 2

Introduce short term goals.

- **Explain** Short and Long Term Goals Worksheet 4 and give examples.
- Explain that you do not want to disrupt her life too much. This is why you encourage her to aim for small, manageable changes gradually over time.
- Look over Worksheet 4. Have her identify the short term goals she ticked off ordering from easiest to hardest. Each short term goal is very specific and is something she can easily measure. For example, a simple, measurable goal is, "I will smoke at least one cigarette a day outside".
- Select the first short term goal. After she
 puts the short term goals in order from
 easiest to hardest she can start on her first
 short term goal right away.
- **Discuss** possible challenges to achieving her first goal and things she can do to make it easier. Remind her that she might not know what the problems are until she actually tries to make the changes. Also remind her that setbacks are a natural part of this process. Ask her to write down (or remember) any problems as they arise. Then you can discuss them together and brainstorm ways to overcome them.

Step 3

Propose the idea of setting a long term goal.

- Let her know that she is in charge of picking her own long term goal.
- **Give examples** of long term goals around reducing second-hand smoke (such as having a non-smoking home, not smoking around her children or quitting smoking). See Worksheet 4.
- Ask her to start brainstorming the changes she believes she can make over the next six months.
- If her goal seems unrealistic try to help her choose a more realistic goal without being discouraging. For example "how can you work up to that goal? Are there stresses coming up that may make it difficult to achieve this right away?"
- **Explain** that you don't expect her to achieve her long term goal overnight. In fact, if she did change this quickly the changes probably wouldn't last.
- Long term goals don't need to be specific. For example "I want to protect my children from second-hand smoke" is sufficient. A long term goal that is less specific also gives the woman freedom to employ a range of strategies and discover which ones will work for her.
- Once a long term goal has been set ask her to write it in her journal. There might be more than one goal to keep track of. Make sure that at least one goal is centered on protecting children from second-hand smoke.
- Ask her to write down (or remember) any possible long term goals before the next session.
- The final decision is hers. Be supportive of whatever changes she decides to make.

Section Two Step by Step Session Overview



Step 4

Before the next session

- **Encourage** her to continue filling out the *Current Smoking Patterns Worksheet 3.*
- Ask her to note anything that helped her reach her goal, anything that made it difficult, and anything else of interest.
- Ask her to keep writing down (or remember) how many times she was able to achieve her short term goal.

Session 3: DEEDS and Finding a Smoking Place

Goals of Session

- Review short term goals.
- Discuss any barriers and strategies for success.
- Renegotiate goals if needed and help her move forward.
- Understand DEEDS strategies and find a smoking place.

What You Need

- Program Worksheet Two
- DEEDS and Finding a Smoking Place Worksheet 5
- Cigarette Monitoring Form Worksheet 3
- Short and Long Term Goals Worksheet 4

What Participants Need

- DEEDS and Finding a Smoking Place Worksheet 5
- Cigarette Monitoring Form Worksheet 3
- Short and Long Term Goals Worksheet 4

Step 1

Complete the progress report together with the participant. Ask her about her progress towards her short term goal. See if she's ready to add another goal while maintaining the previous one.

Step 2

Provide lots of positive reinforcement. Encourage any positive gains no matter how small! Remind her that every small step she takes helps protect her children from second-hand smoke and brings her closer to reaching her long term goal. If she is struggling, remind her that any change is hard and no one expects her to change overnight. Remind her that simply finding out what does and doesn't work is a success in itself. This will help her to continue making changes even after the *Atii!* program is over.

Step 3

Talk about barriers and helpful strategies. Begin discussions about the obstacles she faced and strategies she used while trying to achieve her short term goals. One way to start this conversation is to ask the following questions:

- How did her week go? Identify what worked for her. Were there any gains she made? What situations made it easier to achieve her goals and what helped make that possible? What things can she change to make it easier next time?; and
- What were some of her triggers? What were the challenges she faced? How did she deal with them?

Step 4

Goal Setting

The next step depends on whether she was able to achieve her previous goal. Ask: what goal does she want to work on next?

Step 5

Introduce DEEDS and Finding a Smoking Place Worksheet 5.

Share the ideas from *Cigarette Fading* and *DEEDS* strategies. Ask her if she wants to try at least one of the strategies before her next session. Use the worksheet to help her choose a smoking place before the end of this session.

Step 6

Remind her to continue using the *Cigarette Monitoring Form*.

Step 7

Before the next session

- Ask her to keep writing down (or remember) how many times she was able to achieve her short term goal.
- Ask her to write everything down that helped her reach her goal, anything that made it hard and anything else of interest.

Session 4: Identifying Triggers

Goals of Session

- Reflect on the positives and negatives of smoking and how to identify triggers.
- Review short term goals.
- Discuss any barriers and strategies for success.
- Renegotiate goals if needed and help her move forward.

What You Need

- Program Worksheet Two
- How to Identify Your Triggers Worksheet 6
- Positives and Negatives of Smoking Worksheet 7

- Cigarette Monitoring Form Worksheet 3
- Short and Long Term Goals Worksheet 4

What Participants Need

- How to Identify your Triggers Worksheet 6
- Positives and Negatives of Smoking Worksheet 7
- Cigarette Monitoring Form Worksheet 3
- Short and Long Term Goals Worksheet 4

Step 1

Complete the progress report with her. Ask her about her progress on the last session's short term goal. See if she's ready to add another short term goal while maintaining the previous ones. Make sure she completed the *Cigarette Monitoring Form* and put a copy of it in the file. Ask if she tried any *DEEDS* strategies. Encourage her to continue to try them.

Step 2

Provide lots of positive reinforcement and discuss barriers and helpful strategies. See Session 3, steps 2 and 3 for a description.

Step 3

Introduce How to Identify your Triggers Worksheet 6. This will help both you and the woman understand her reasons for smoking. It will help identify potential barriers and solutions. It also identifies activities, situations and feelings that can be triggers or cause cravings to smoke.

Step 4

Introduce Positives and Negatives to Smoking Worksheet 7. Have the participant look over it and add any of her own ideas.

Section Two Step by Step Session Overview



Step 5

Before the next session

- Ask her to write down (or remember) how many times she was able to achieve her short term goal.
- Ask her to note anything that helped her reach her goal, anything that made it hard and anything else of interest.
- Remind her to practice at least one of the DEEDS strategies and continue filling out her Cigarette Monitoring Form Worksheet 3.

Session 5: Coping with Cravings

Goals of Session

- Discuss cravings and strategies to cope with cravings.
- Review short term goals.
- Discuss any barriers and strategies for success.
- Renegotiate goals if needed and help her move forward.

What You Need

- Program Worksheet Two
- Coping With Cravings Worksheet 8
- Ideas to Keep Your Hands Busy Worksheets 9
- Short and Long Term Goals Worksheet 4
- Cigarette Monitoring Form Worksheet 3

What Participants Need

- Coping with Cravings Worksheet 8
- Ideas to Keep Your Hands Busy Worksheet 9
- Short and Long Term Goals Worksheet 4
- Cigarette Monitoring Form Worksheet 3

Step 1

Complete the progress report with her. Ask about her progress with her short term goal. Find out if she's ready to add another goal while maintaining the previous ones. Ask if she tried any *DEEDS* strategies. Encourage her to continue to try them.

Step 2

Provide lots of positive reinforcement and discuss barriers and helpful strategies. See Session 3, steps 2 and 3 for a description.

Step 3

Introduce Coping With Cravings Worksheet 8 and Ideas to Keep Your Hands Busy Worksheet 9. These offer straightforward ideas providing different ways of coping when a craving hits.

Step 4

Before the next session

- Ask her to keep writing down (or remember) how many times she was able to achieve her short term goal.
- Ask her to note anything that helped her reach her goal, anything that made it hard to reach her goal. Remind her to do Worksheet 4 Short and Long Term Goals.
- **Remind** her to continue to practice at least one of the *DEEDS* strategies.
- **Ask** her to try the ideas in *Coping With Cravings Worksheet 8.*

Session 6: Managing Stress

Goals of Session

- Discuss stress management strategies and renegotiate goals if needed.
- Review short term goals.
- Discuss any barriers and strategies for success.

What You Need

- Program Worksheet Two
- Practicing Self-Care Worksheet 10
- Cigarette Monitoring Form Worksheet 3
- Short and Long Term Goals Worksheet 4

What Participants Need

- Practicing Self-Care Worksheet 10
- Cigarette Monitoring Form Worksheet 3
- Short and Long Term Goals Worksheet 4

Step 1

Complete the progress report with her. Ask about her progress on the last session's short term goal. Find out if she's ready to add another short term goal while maintaining the previous ones. Ask if she tried any *DEEDS* strategies. Encourage her to continue to try them.

Step 2

Provide lots of positive reinforcement and discuss barriers and helpful strategies. See Session 3, steps 2 and 3 for a description.

Step 3

Introduce Practicing Self-Care Worksheet 10. Brainstorm together the ways in which she can take time for herself. For instance, this could include taking a few moments each day to relax. This is important because it helps the woman to practice the stress management techniques from the worksheets. Remind her that she will become better with practice. Review Coping With Cravings Worksheet 8. This will help her to develop her own list of ways she can handle stress without smoking.

Step 4

Remind her to continue filling out the Cigarette Monitoring Form.

Step 5

Before the next session

- Ask her to keep writing down (or remember) how many times she was able to achieve her short term goal.
- **Ask** her to note anything that helped her reach her goal, anything that made it hard, and anything else of interest.
- **Remind** her to continue to practice at least one of the *DEEDS* strategies.
- Ask her to try the ideas in Coping with Cravings. Encourage her to practice the self-care strategies and to practice other ways of rewarding herself.

Session 7: Wrap-up

Goals of Session

- Evaluate and celebrate improvements the woman was able to make.
- Outline future directions.
- Receive feedback from the participant.

What You Need

- Program Worksheet Two
- Cigarette Monitoring Form Worksheet 3
- Atii! Reduce Second-hand Smoke Completion Certificate

What Participants Need

Cigarette Monitoring Form



Section Two Step by Step Session Overview



Step 1

Complete the progress report with her. Ask about her progress on the last session's short term goal. Make sure she completed the Cigarette Monitoring Form and put a copy of it in the file. Ask if she tried any DEEDS or Coping with Cravings strategies. Encourage her to continue to practice them and Self-Care. Ask about her readiness to continue using the Atii! strategies. Remember: if your work site can manage it, the Atii! worker can continue to work on strategies for more than the seven sessions or you could shift to drop in, telephone or email contact.

Step 2

Congratulate the woman on her successes.

- Review with her all the gains she has made.
- **Congratulate** her on a job well done and acknowledge that it is hard work.
- Let her know that any changes she made will help protect her children from second-hand smoke.



Step 3

Encourage her to continue. Let her know she can continue to make changes even though her participation in the program is over. She probably still has some short and long term goals to reach. If she has reached her goals it could be time to make new goals.

- If she didn't reach her goals remind her again that every small step is a success. She has begun the process of change just by thinking about it. Let her know she can always make changes later on; and
- **Encourage** her to maintain the changes she has made so far.

Step 4

Provide her with the Completion Certificate. If your work site wants to do an evaluation and six month follow-up, discuss the follow-up process with her.

- Ask her to participate in the six month follow-up. The purpose of the follow-up is to see if she was able to maintain her changes, continue towards reaching her long term goals and to find out if she needs additional support; and
- Thank her again for her participation in the program and if the program is still being offered let her know that she can come back for support.



Section Two Step by Step Session Overview



Empathy means understanding what a person is feeling, where they are coming from and what their point of view is. An Atii! worker can show empathy by listening carefully to what the person says and then saying something calm and non-judgmental which shows you are trying to understand.



Program Worksheets

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Program Worksheet One

Consent Form

Name:	
Age:	
How long have you been a smoker? (Nu	mber of months or years)
Have you tried to quit before?	
Trave you tried to quit before:	
If so, how many times?	
How long were you able to not smoke?.	
I	(participant's name) agree to allow
	(name of organization) to contact me after the program for
follow-up and evaluation of the program	1.
Signature:	
D .	
Date:	
Your phone number:	
Tour priorie number	
Your email address:	

Program Worksheet

Two

Progress Report

Name:	
_	O Support from friends (describe):
Session number:	
Date:	
Last session's short term goal:	
O I reached it	
O I reached some of it	
O I didn't reach it	
	O I was able to keep busy (describe):
Number of days since last session:	
Number of times that I reached my short-term	
goal(s):	
Things that helped me reach my goal (tick all that apply):	<u></u>
O Nice weather	O Things weren't as stressful as usual (describe):
O Children were well behaved	
O Support from my Atii! worker	
O DEEDS strategy	
O Any other worksheets (please list):	
•	
•	
•	O I was able to handle stress without smoking (describe):
O Support from family (describe):	
7,	
•••••••••••••••••••••••••••••••••••••••	•••••••••••••••••••••••••••••••••••••••



Program Worksheet | Two

Progress Report continued

	gs that made it hard to reach my goal all that apply):	0	Things were more stressful than usual (like what?):
0	My children were sick or home from school.		
0	My children were more difficult to handle than usual.		
0	The weather was bad and I couldn't go outside to smoke.		
0	I had a lot of cravings for cigarettes.		
0	I felt angry (what happened?):		
		my g	gs I can do to make it easier to reach oal:
0	I felt depressed (what happened?):		
		•••••	
		•••••	
O	I was bored (why?):		

		•••••	
0	I was worried (why?):	•••••	
		•····	
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Handout One

Second-hand Smoke Protection

Here are some ideas other women have tried and found helpful.

Always smoke outside, if the children are old enough to be left alone. If smoking outside is not possible, try to:

- **pick** one room (that your children don't go in) to be the smoking room. Make sure it has a window to the outside. Only smoke in that room when you can't go outside;
- blow cigarette smoke out the window of the smoking room. Put a fan behind you to make sure the smoke goes out the window; and
- make the smoking room not quite so comfy so you will not want to spend a lot of time there.

Smoking in the Furnace Room

When people smoke in the furnace room, the smoke blows back through the vents and around the house. This is not a good smoking place.

You can also try these ideas:

- delay your first cigarette of the day;
- **increase** the amount of time in between cigarettes by 10-minute periods; and
- wait 10 minutes to see if you still want a cigarette each time you have a craving.

Talk to yourself and say, "this urge will pass," or "yes, I want a cigarette, but I don't need this one." Wait for 10 minutes and see if you still want to smoke.

Plan ahead. You can try these ideas:

- keep your favorite sugarless gum in the house (and make sure it's your special treat, not the children's). Chew or suck on it when you crave a smoke;
- wet your hands when you have a craving.
 It's hard to hang on to a cigarette with wet hands;
- do something that you enjoy that will keep your hands busy (sew, cook, knit, crochet, do beading, clean, or write in your journal);
- **keep** your cigarettes and ashtrays out of sight;
- chew nicotine gum if your craving continues;
- allow your children to remind you to take your smoke breaks outside. Let them remind you never to smoke in the car;
- ask your family and friends who smoke to do it outside. If it is hard to talk to them about not smoking in your house, then you can get ideas and support from your Atii! worker or another person who you trust: and
- congratulate yourself for reaching your goals about protecting your children from second-hand smoke. It's hard work. You deserve to celebrate!

Remember

Every small step counts to protect your children from second-hand smoke. Start with small changes and build on them. Soon you'll be smoking outside all the time.

Handout

Two

Smokers' Survival Kit

Here are some tools to help you on your journey to becoming smoke-free. Use these to keep your hands busy instead of a cigarette:

- String games;
- Knitting;
- Sewing;
- · Carving;
- Crayons and paper;
- Art supplies;
- Little drum;
- Pipe cleaners;
- · Juggling balls;
- Beading;
- Keys;
- Stones; and
- Silly putty.

Things that will keep your mouth busy without a cigarette:

- Drink ice cold water (from a water bottle or with a straw);
- Dried meat or fish;
- Carrot or celery sticks;
- Apple pieces;
- · Sugarless candies;
- Popcorn;
- Sugarless gum;
- Balloons;
- Harmonica; and
- Toothpicks.

To care for your body, mind, emotions and soul without tobacco, try:

- Prayers;
- Meditation;
- Verses from the Bible or other scriptures;
- Deep breathing exercises;
- Stretching exercises/Yoga;
- Walks;
- Journal writing;
- Bubble bath;
- Shower;
- Light a candle;
- Music;
- Dancing;
- Reading;
- Laughter;
- Massage;
- Naps and extra sleep;
- · Drinking water; and
- Friendship.





Handout Three

Am I Ready to Quit? Quitting Smoking Aids

Some people blame smokers for not being able to quit. These people don't understand how hard it is to quit and that the tobacco industry spends billions of dollars every year to make sure women want to smoke.

Here are some facts about women, cigarettes and smoking.

- Nicotine is a drug that is more addictive than cocaine or heroin.
- There are 4,000 chemicals in tobacco smoke and many of them are addictive.
- More women die from lung cancer than from breast cancer.
- Lung cancer rates among Inuit in Canada are the highest in the world (three times higher than the national rate) and high smoking rates are a contributing factor.
- Every three hours a woman in Canada dies of lung cancer.

Nicotine is an addictive drug. It's more addictive than heroin or cocaine. If you smoke every day you can quickly become addicted to nicotine. Cigarette companies add many toxic chemicals to cigarettes. They want to make cigarettes as addictive as possible. Then smokers will have to smoke more.

Your body gets used to the effects of nicotine. Think back to your first cigarette. It probably made you feel dizzy or a little sick to your stomach. It probably didn't taste good either but your body soon got used to these effects. The more you smoke, the more your body gets used to the effects of nicotine.

You become dependent on smoking. Smoking is habit forming. You might have strong cravings when you drink a cup of coffee, get in the car, talk on the phone or do anything else that you usually do while smoking. These are called smoking "triggers." After you quit or cut down on smoking, you can learn new ways to deal with your triggers. After a while you will be able to be in these situations without smoking, and your cravings won't be as strong.

You will have withdrawal symptoms when you quit smoking. Your body adjusts to having nicotine in your system all the time. When you stop smoking your body tries to get back to normal. It takes time to adjust to living without nicotine and your body may experience withdrawal symptoms. This can include headache, sleeping problems, increased appetite, constipation and nausea. Most withdrawal symptoms go away after a week or two of not smoking. Your body is getting used to living without nicotine. Sometimes the withdrawal symptoms that affect your mood can last much longer. That's why it's so important to have an action plan to cope with cravings and triggers.

Nicotine Replacement Therapies (NRT) can help reduce withdrawal symptoms, They include the patch, nicotine gum, the inhaler, or the lozenge. NRTs give her body nicotine without all of the toxic chemicals in cigarettes. They work best the first two weeks after you quit smoking when withdrawal symptoms are the strongest. There are also quit smoking medications that do not have nicotine in them but work directly on your brain, making it easier to quit smoking. Talk to the community health nurse or doctor for more information on NRT and quit smoking mediations.

Quitting smoking is hard for all these reasons, but it IS possible!

Handout Four

Ready to Quit? Some Ideas to Help Me Quit Smoking

Step 1: Get ready!

- **Tell** your *Atii!* worker that you are interested in quitting smoking. Ask for information about quitting aids or other supports.
- Start changing your surroundings so you can only smoke in one place. This way your whole house won't be full of triggers. Try to make your new smoking place somewhere you don't usually spend a lot of time. For example, a small storage place would be a good smoking place.
- Cut out as many cigarettes as you can.
- **Practice** the *DEEDS* tips as often as possible (*Worksheet 5*).
- Set a quit date.
- Start getting rid of all your cigarettes, ashtrays and lighters. Empty the ashtrays into a glass jar and pour water in it. This will remind you of how many cigarettes you smoke each day. The sight and smell of stale butts is not pleasant!

Step 2: Get support and encouragement!

- **Tell** your family and friends you're quitting and that you need their support.
- **Think** of ways other people can help. Tell them how they can make it easier for you.
- **Ask** friends and family not to smoke around you or in your home.
- Call the Quit Help Line in your province or territory to see if you can get help with quitting.
- Check the Health Canada website at www.hc-sc.gc.ca/hc-ps/tobac-tabac/ index-eng.php or phone 1-866-318-1116.
- **Ask** your *Atii!* worker to refer you for more counselling if you need it.

Step 3: Prepare a week before!

- **Stop** carrying cigarettes with you and make them difficult to get to.
- Fill out Worksheet 6. This will help you get to know what triggers your smoking.
- **Practice** using *DEEDS* in each of the trigger situations.
- **Get** a new toothbrush and whitening toothpaste to use the day you quit.
- **Start** a money jar to hold all the money you saved by not smoking. Also make a list of both short term and long term rewards that you can use this money for.
- Plan your quit day. Make sure it is full and busy. One idea is to make your home clean and fresh. Wash your clothes, bedding, walls, ceilings and windows.
- Learn how to use quit aids properly.

Step 4: Quit day!

- Wake up and keep busy.
- If you're using a quit smoking aid, make sure you follow the directions.
- **Practice** *DEEDS* whenever a craving comes up.
- Eat breakfast and brush your teeth with the new toothbrush and toothpaste. Run your tongue over your teeth and feel the clean. Don't forget to brush your tongue so your taste buds can start to work properly again.
- Open the windows to let the smoke smell out.
- Wash the walls again, dust or clean the home. Do anything that keeps your hands busy and helps you feel like your home is clean and fresh.



Handout | I

Four

Ready to Quit? Some Ideas to Help Me Quit Smoking continued

- Place things around the house that smell nice. You will notice how much more you enjoy the scent as your sense of smell recovers. It can be anything: perfume, vanilla in a little bowl, cut oranges, baked cookies or scented candles.
- **Do** something special with a non-smoker to celebrate, or plan a celebration dinner with your children.
- **Try** to put yourself first. Do things that make you feel good.
- **Include** your children by asking them to help you with your plans for today. Give them rewards for their cooperation and support.
- **Plan** ahead to avoid other smokers or triggers for your smoking.
- **Stay** away from alcohol and caffeine. Alcohol and caffeine can make it harder to resist a craving for a cigarette.
- Stay mentally strong.
- **Put** the money you would have spent on cigarettes in your smoking jar.

Step 5: Keep going!

- **Be prepared** for slip-ups, relapses and difficult situations. Find new ways to distract yourself from the cravings.
- **Remind** yourself why you're glad you quit. You could write down the reasons you quit and put them somewhere you can see them every day, like on your fridge or in your office.
- **Remind** yourself of how well you are doing, and reward yourself for a job well done.
- Think of yourself as a non-smoker.
- Avoid your triggers for as long as you need to.
- **Try** to eat a healthy diet and exercise when you can.
- Notice and appreciate the changes your body makes as it gets back to normal.
- Don't keep an emergency supply of cigarettes around after you quit.
- Keep looking over your triggers worksheet (Worksheet 6).

Every time I quit smoking, I learn more about what works for me.



Handout Five

What Happens When I Quit Smoking (Withdrawal Symptoms)

Withdrawal symptoms are strongest when you first quit. You might experience some or many symptoms or you might have none at all. You have to try to remember that withdrawal symptoms do not last long. They're a signal that your body is returning to normal. Talk to yourself and remember why you're trying to quit smoking. You can write down your reasons on a card and keep it with you.

Symptom	Description
Anger	Anger is a normal withdrawal symptom. It is normal to be angry without a clear reason. Vent anger safely when you're away from your children. Try to be aware of your feelings rather than ignoring them or pushing them away. Pushing your feelings away can be stressful, which is a trigger for smoking. Discuss your anger with someone who understands how hard it is to quit. If your children are old enough to understand, explain to them it's not their fault that you're upset; it's just really hard to quit. Distract yourself. If possible do something you enjoy or try deep breathing exercises (see worksheet 10).
Boredom, Feeling Cooped Up or Restlessness	Try new things to keep your hands and mind busy. Try to get outside more often. Always keep an activity book close by (such as Find-A-Word or crossword puzzles) or a deck of cards. Play games with your children.
Cough, Dry Throat/Mouth, Nasal Drip	Your body is trying to get rid of mucus that has blocked airways and made it hard to breath. It's gross, but cough up that mucus! Coughing it up can last a few days. Sip ice water and drink lots of liquids (such as water, juice, or herbal tea). Try cough drops, chewing gum or hard sugarless candy.
Depression	Think of other ways to deal with your feelings besides smoking. Call a support person. Use positive self-talk (e.g., I am a great person and a great mother. I can do this. I will do this). Don't put yourself down. Think of success and not failure. It's normal to feel sad, angry or confused when you quit smoking. These feelings will pass after a few weeks.
Dizziness	After you quit smoking, your body gets extra oxygen which could cause dizziness. It can last a couple of days. Get some fresh air and don't stand up too quickly.
Fatigue/Tiredness	Fatigue can last two to four weeks. Get extra sleep and try to exercise more. Take naps if you can and don't push yourself. If you feel tired when you first wake up, try to exercise for one-minute periods for 10 minutes (e.g., jumping jacks or running in place for one minute then stop for 30 seconds, etc.). Drink lots of water. It speeds up the healing process.



Handout | **Five** |

What Happens When I Quit Smoking (Withdrawal Symptoms) continued

Symptom	Description
Frustration	Do some stretching exercises. Try to be aware of your body. Take deep breaths. Talk to a support person. Think of the positive reasons for quitting smoking. Take some time for yourself.
Headaches	Take a warm shower. Try relaxation or meditation. Cut down on coffee and pop. Try herbal teas instead. Place a cool washcloth on your forehead.
Hunger, Cravings	Sometimes when you quit smoking you can confuse craving a cigarette with hunger pangs. This can last up to several weeks. Drink water and low calorie liquids. Keep low calorie and low fat foods nearby (such as celery, carrots, pretzels and unbuttered popcorn). Chew a toothpick, gum, ice or fennel seeds. Try low calorie hard candy.
Insomnia/ Trouble sleeping	Restless sleep and dreams about smoking are common and can last about one week. Take a hot shower, avoid caffeine after 6:00 pm, drink warm milk, try deep breathing or drink a cup of chamomile tea before bed.
Irritable, Grouchy, Tense	When your body is craving nicotine you are in a chronic state of nervous stimulation. This means you might be irritable, grouchy and tense. This can last one to two weeks. Breathe deeply, stretch, exercise, chew nicotine gum or cut out caffeine from coffee, tea and pop.
Lack of Concentration	Nicotine is a stimulant – a drug that makes you feel more alert. When you quit, give your body a few weeks to adjust. Change activities, get some fresh air, listen to music, watch TV, do more physical activity and avoid caffeine. Stay away from tasks that need your concentration for long periods of time.
Loneliness	Cigarettes can often take the place of a close friend. When you quit smoking it can seem like you've lost that friend. When you feel lonely call your support person. Distract yourself. Knit, sew or sing along to loud music.
Tightness in the Chest	Tightness in the chest could be from tension or sore muscles due to coughing. Your lungs are removing mucus and tar which causes coughing. Your lungs aren't used to getting extra oxygen. So the tightness in your chest can last a few days. It can feel like a sharp, burning sensation – like when you're running really hard. Don't panic. The discomfort will pass.

Handout | Five

Nicotine Replacement Therapies (NRTs)

These are medications that give the body nicotine without the harmful effects of smoking. This means NRTs can help with physical withdrawal symptoms. You double your chances of quitting smoking successfully when using an NRT. If used properly, NRTs are effective. The side effects of each are different. The following information can help you decide which NRT is best for you.

What is covered by Non-Insured Health Benefits (NIHB)?

Check with your local NHIB provider for a complete list.

• Nicotine Gum 2mg and 4mg Coverage is limited to 945 pieces during a one-year period.

• Nicotine Lozenge

Coverage is limited to 945 during a one-year period.

- Champix 0.5mg and 1mg Tablet
 Coverage will be limited to 165 tablets
 during a one-year period. The year starts
 on the date the first prescription is filled.
- Zyban 150mg Sustained Release Tablet Coverage is limited to 180 tablets during a one-year period.
- Nicotine Patch various strengths

 The number of patches covered in the one-year period is:
 - HABITROL 84 patches;
 - NICODERM 70 patches;
 - NICOTROL 70 patches;

• Nicotine Inhaler 10 ml inhaler

Coverage is limited to 945 pieces during a one-year period. The year starts on the date the first prescription is filled.

Symptom	Benefits	Drawbacks	Side Effects
Champix It is a non-nicotine pill that works in the brain to reduce cravings and withdrawal symptoms. It also decreases the pleasure that people get from smoking. It is thought to have these effects by working at the same receptors that nicotine from cigarettes affects.	This medication has no nicotine, and is not addictive.	Patients have reported changes in behavior, suicidal thoughts, and depression when taking this drug. It is not recommended for people with a history of suicidal behaviour or mental illness. Patients need to stay on the medication for 12 weeks.	Some side effects include nausea, constipation, fatigue and sleeping problems. Other side effects are flatulence (farting), stomach pair dizziness, dry mouth, headache, heartburn, rash, and gingivitis (inflammation of the gums around the root of the teeth).
Nicotine Gum Releases nicotine into your bloodstream through the lining of your mouth. There is a special way to chew the gum. Ask your doctor or pharmacist about the right way to chew the gum. You can safely use from nine to 12 pieces each day.	The nicotine in the gum stops many physical withdrawal symptoms and cravings. It's easy to use. Whenever you get a craving chew a piece of the gum. It keeps your mouth busy.	Nicotine gum is not recommended if you have dentures or recent dental work. You need to learn how to chew the gum properly in order for it to work. You can become dependent on the gum if you use it too often or for too long.	Some side effects from nicotine gum are sore mouth or throat, dental problems, belching and mouth watering.



Handout (Five)

What Happens When I Quit Smoking (Withdrawal Symptoms) continued

Symptom	Benefits	Drawbacks	Side Effects
Nicotine Inhaler A nicotine inhaler looks like a cigarette. It has a cartridge that contains nicotine. You inhale, and nicotine vapour is absorbed into your mouth and throat area. You don't absorb the nicotine into your lungs like you do with a cigarette. As a result, you don't get the same "hit" of nicotine as with smoking.	It mimics the hand- to-mouth action of smoking. Patients decide how often to use the inhaler. It also reduces the symptoms of nicotine withdrawal cravings and irritability. For best results, you should use at least six cartridges per day for the first three – 12 weeks.	It is possible to become dependent on the inhaler. The inhaler does not work properly in temperatures below 10°C, so it may not be a good choice if you plan to use it outside during winter months in a cold climate. Avoid drinking beverages, especially acidic ones (such as coffee, juices, and soda pop), for 15 minutes before and after you use the inhaler. They will wash the nicotine into your stomach instead of allowing it to absorb through your mouth.	Side effects include nausea, headaches, mouth or throat irritation, and an upset stomach.
Nicotine Patch A patch that releases a steady stream of nicotine into your body, through the skin.	It's easy to use. After you put the patch on in the morning you don't have to remember to do anything else. It keeps a steady supply of nicotine in your bloodstream. This means you don't have as many cravings for a cigarette.	The patch is not recommended if you have skin problems or allergies to adhesive tape. It doesn't help keep your mouth busy. You can become dependent on it if you use it for too long.	Some side effects from the patch are itching, redness, burning or skin rash.
Zyban This is a prescription drug that works by changing the brain's response to nicotine. It makes smoking less pleasurable and reduces cravings while patients change their smoking habits.	Zyban reduces with- drawal symptoms and cravings. You don't get dependent on it. It works well for people who have been smoking for a long time.	Zyban is not as effective for young smokers. You have to remember to take it every day. It takes up to four weeks before you feel the effects in your system.	Side effects from Zyban are excitement, anxiety, insomnia, restlessness, constipation, loss of appetite, dry mouth, dizziness, nausea and unusual weight loss. Some more serious side effects are confusion, irregular heartbeat and severe headache. If you have any of these, you should stop using Zyban and call your doctor right away.

Section Five:

Worksheets

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Worksheet One

Readiness-To-Change Scale

How ready am I to reduce second-hand smoke on a scale of 0-5? Somewhat Ready Not Ready Ready Talk to my Atii! worker or write about my readiness:

Atii! Reduce Second-hand Smoke

Worksheet

One

Readiness-To-Change Scale continued

Follow-up question suggestions

If the mark is on the left of center (0, 1):

- How will I know when it is time to think about changing?
- What signs will tell me to think about making a change?

If the mark is near the center (2, 3):

- Why did I put my mark there and not closer to the left? What might make me put my mark a little further to the right?
- What are the good things about the way I am trying to change? What are the things that are not so good?
- What would be a good result of changing?
- What are the problems with changing?

If the mark is on the right of center:

- What is one problem with changing?
- What are some things that could help me overcome this?
- Pick one of those things that could help and do it by

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If I have already taken a serious step in making a change:

- What made me decide on that particular step?
- What has worked in taking this step?
- What helped it work? What could help it work even better?
- Can I break that helpful step down into smaller parts?
- Pick one of those parts and do it by
 (specific date).

If I am already changing and trying to maintain that change:

- Congratulations! What's helping me?
- What else would help?
- What makes it hard to keep up the change?

If I have "relapsed:"

- Don't be hard on myself. Change is hard and may take time.
- What worked for a while?
- What did I learn that will help when I try again?

(Source: Zimmerman et al., 2000)



Two

Fagerstrom Test for Nicotine Dependence

This can be used in the first session and again after the program. Tick the box with your answer to each of the following questions:

1.	How soon after you wake up do you smoke your first cigarette? O Within 5 minutes O Within 6 to 30 minutes O 31 to 60 minutes O After 60 minutes
2.	Do you find it difficult not to smoke in places where smoking is not allowed? O Yes O No
3.	Which cigarette would you most hate to give up? O The first one in the morning O Any other one
4.	How many cigarettes do you smoke each day? O 10 or less O 11 to 20 each day O 21 to 30 each day O 31 or more each day
5.	Do you smoke more often during the first hours after waking up than during the rest of the day? O Yes O No
6.	Do you still smoke even if you are so sick that you are in bed most of the day? O Yes

Question	Answer Sc	ore
1.	Within 5 Minutes	2
2.	Yes	_
3.	The first one in the morning	_
4.	10 or less	2
5.	Yes	1)
6.	Yes	_
	Results Total:	

Score Results:

0-5 = Low to medium nicotine dependence

6-10 = High nicotine dependence

O No

Worksheet Three

Cigarette Monitoring Form

This form will help you understand when and why you smoke. You will write down the times, places and situations where you smoke. This helps me see how much progress you've made towards reducing second-hand smoke. You can use this form to celebrate your successes! You can reward yourself every time you reduce the number of cigarettes you smoke around your family.

Time	Place	Activity	Emotion	Trigger	Situation
-					

Daily log:	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
Total number of times I smoked							
Number of times I smoked near child(ren)							
Number of times I did not smoke around child(ren)							
Number of times others have smoked near child(ren)							



Three

Cigarette Monitoring Form continued

How many cigarettes do you smoke on an average day?	What is going on around you when you smoke most of your cigarettes (e.g., children crying, quiet)?
What times do you smoke the most?	
O Morning	
O Afternoon	
O Evening	What things make you want to smoke (e.g., children fighting, talking on the phone)?
What time do you seem to need a cigarette the most (e.g., first thing in the morning,	
after dinner)?	
Where do you smoke most of your cigarettes?	Did you notice anything else about your
	smoking patterns?
What are you doing when you smoke most	
of your cigarettes (e.g., on the phone,	
watching TV)?	



Worksheet Four

Short- and Long-Term Goals

These are my goals:	
Short-Term Goal:	Tips for Short-Term Goal Setting
	Be specific. Include answers to who, what, where, when and how. For example, I will delay the morning cigarette until the children have left for school.
Overall Long-Term Goal:	Talk about what works and what doesn't. This will help me reach my goal.
	Be supportive. Have a list of things that will work, but remember that the decision is up to ME. I will be more successful if I believe in the changes I am making
Did I reach my short term goal for today? O Yes O No	Continue working on past goals. Make sure to keep working on my past goals as I move onto new ones. A new short term goal could be to keep up my past goals.
What are things that made it hard to reach my goal?	
	The names of people who can help you reach your goals:
	•
Other comments?	•
	It's okay to have setbacks. What is more important is that I am making changes for both myself and my family's health.
***************************************	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\



Four

Short and Long Term Goals continued

Goa	ls for My Home:	0	Not smoke with my baby in my amautik.
I wou	uld like to try to (place a check mark):	0	Chew a piece of nicotine or sugarless gum, a hard candy, or a straw instead
0	Delay my first cigarette of the day.		of smoking.
0	Delay my cigarette until I can go outside and smoke it.	0	Ask guests to leave the room to smoke outside if my children are around or tell my children to go to another room to
0	Delay having my cigarette until my child has left the house.		get away from the smoke.
0	Delay each of my daily cigarettes for (10, 15, 30, etc.) minutes.	0	Make my home non-smoking and stick to it especially with friends and family who smoke.
0	Put a distraction (such as a stress ball, candy, sugarless gum or crossword puzzles) where I usually keep ashtrays or cigarettes.	0	Put a no smoking sign in plain view at my house or put a blue light bulb into my porch light outlet to show everyone my home is smoke-free.
0	Make sure no one ever smokes in my children's bedroom.	0	Stay away from places where others are smoking when my children are with me.
0	Use a fan to blow smoke out an open window. Always smoke in front of the	0	Ask friends and family to watch my children while I go outside to smoke.
	window with the fan blowing the smoke outside.	0	Ask others to smoke outside my house or ask them to use my smoking place.
0	Set non-smoking times. For example, promise myself not to smoke between		Make sure they stick to my rules, it's my house.
	9 pm and 9 am.	0	Take a few extra minutes to smoke
0	Try to stop smoking for 24 hours.		outside the car before I get in.
0	Move my smoking to a less comfortable place where I don't usually smoke.	0	Not smoke while driving in the car, skidoo or ATV.
0	Pick a smoking place. Keep my ashtrays and lighters there.	Othe	er ideas:
0	Not smoke inside within three hours of my	•••••	
	children returning home from school. For example, if my child gets home at 3 pm,	•••••	
	I won't smoke inside after lunch hour.	•••••	
0	Move(the number) of my daily	•••••	
	cigarettes outside. Continue to add to	•••••	
	this number.		

Five

Cigarette Fading, DEEDS and Finding a Smoking Place

Cigarette Fading and DEEDS

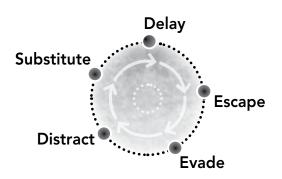
Two ideas to help with your cravings are *ciga-rette fading* and *DEEDS*. These are helpful for reducing second-hand smoke or for quitting. The ideas will help you delay smoking until you can go outside, get away from your children, or go to your smoking space.

Cigarette fading means slowly cutting down on the number of cigarettes you smoke each day. To get started, you will choose how many cigarettes you will allow yourself to have each day. Then you will only carry that number with you, or give them to a non-smoking friend to keep for you. Put the rest of the package in the freezer or another place that is difficult to reach. You can try to:

- figure out how long you go in between each cigarette (how many minutes or hours);
- slowly add to the time between each cigarette by 10 to 15 minutes;
- keep adding to the time between each cigarette; and
- stick to your schedule or it won't work. It's OK to wait longer if you can, but you can't smoke more than your schedule allows.

If you find it too hard to stick to your schedule, it's OK to go back to smoking more often until you're ready to increase time between your cigarettes again.

The DEEDS Strategy



Delay

A cigarette craving fades in 10 to 15 minutes, even if you don't smoke. Tell yourself, "This urge will pass" or "I'd like a cigarette but I don't need this one." When you have a craving, you can delay smoking for 15 minutes. It proves that your cravings don't last forever and gives you more control over your smoking. It gets easier with practice. Slowly, you will be able to delay for longer periods of time and will then smoke fewer cigarettes each day. You can try these ideas:

- Delay your first cigarette of the day. Eat breakfast before you smoke or wait until you get the children off to school;
- You can set certain hours that are smokefree. For example, not smoking between 9 pm and 9 am; and
- You can put ashtrays and lighters in different places so smoking is less convenient.



Five

Cigarette Fading, DEEDS and Finding a Smoking Place continued

Escape

If possible, leave the situation that triggers the craving. This isn't always easy, especially if you can't leave your children alone. Sometimes it's your children's behaviour that triggers cravings! Try these ideas:

- Keep your children busy with a DVD, an MP3 player or radio;
- Make a list of cool crafts your kids can work on when you need a break. Try to keep the materials on-hand;
- Act "as if" and pretend that you're a nonsmoker for 15 minutes;
- Be realistic. You can take a five-minute break instead of wishing for the afternoon off;
- Take a mental vacation. Imagine the place you would most like to be. Include your children. Ask them where they would most like to be and why; and
- Put on headphones and listen to your favourite music or the radio. You can still see your children without hearing them.

Evade

Try to stay away from situations where you know there will be smoking. When you are more able to resist cravings, you can slowly get back to a normal routine. Set non-smoking rules for your home and stick to them. Try these ideas:

- Set up a comfortable smoking place outside for your guests to use;
- Ask your guests to watch your children while you go outside to smoke;
- Go places where smoking isn't allowed, like playgroups or the library; and

 Hang out with friends who are non-smokers or who are also trying to protect their children from second-hand smoke. Visit friends who also have a non-smoking home.

Distract

Think of things to do that will keep your mind off smoking. You can make a list of things that you can't smoke and do at the same time:

- Wash dishes, braid your hair, give the kids a bath;
- Play cards, knit, sew; and
- Chew sugarless gum or hard candy.

Substitute

When you have a craving, you can replace it with something that keeps your hands and mouth busy. It must be something you can do quickly and have on-hand:

- Chew a sugarless candy or a straw;
- Chew sugarless or nicotine gum; and
- Brush your teeth or have a drink of cold water.

Finding a Smoking Place

A great way to reduce second-hand smoke is to choose a special smoking place. It will help you avoid smoking around your children in your home. This strategy can also be used if you want to quit. It cuts down on the number of places where you can smoke and on your triggers. Here's how to choose your smoking place:

 Pick a place where you don't usually smoke;

Atii! Reduce Second-hand Smoke

Worksheet

Five

Cigarette Fading, DEEDS and Finding a Smoking Place continued

- Choose a place where you don't usually do other things like watch TV, use the computer, read the paper/mail, talk on the phone, send text messages or visit with other people. These are all triggers for smoking;
- **Try** not to do anything else in the place you have chosen except smoke;
- **Keep** all lighters, ashtrays and cigarettes in your smoking place. This will remind you not to smoke anywhere else in your home;
- **Pick** a comfortable place, but it shouldn't be your favourite place to be; and
- If you forget and start to smoke somewhere else, go immediately to your smoking place, or put the cigarette out until you can get to your smoking place.

Your ideas for a smoking place (tick the best one):

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Things to try:

- It's good to take a smoke break in front of an open window with a fan behind you blowing the smoke out the window;
- It's better to take a smoke break on the balcony if you have one; and
- It's best to take a smoke break outside.





Six

How to Identify my Triggers

Refer to worksheet 2. This will help me understand my triggers.

What is a trigger? A trigger is something that makes you want to smoke a cigarette. Smoking can be triggered by how you feel. You might smoke when you're angry, stressed or tired. You might smoke when you feel happy and relaxed. Your children's behaviour can also be a trigger.

Triggers can also be many things you do every day. For example:

- Drinking coffee or alcohol;
- Being with your friends who smoke;
- Sitting down and putting your feet up; and
- Talking on the telephone.

These are activities, situations or feelings that can be triggers for smoking. Check the ones that apply to you.

Activities

- O Watching TV
- O Drinking coffee or alcohol
- O Talking on the phone
- O Taking a bath
- O Reading a book
- O Walking

Situations

- O Taking a break
- O Being around smokers
- O Socializing
- O Parenting challenges
- O Not having enough money, time or help
- O Waiting for something (i.e. ride)

Atii! Reduce Second-hand Smoke

Worksheet

Six

How to Identify my Triggers continued

Other triggers:	What negative feelings or emotions are triggers for your smoking (e.g., anxious, sad, angry, etc.)?
	sad, angry, etc.)!
	How can you deal with your feelings
	(e.g., go for a walk/run, deep breathing exercises, talk to a friend)?
What activities/places are triggers for your smoking (e.g., smoking and talking on the phone, smoking and drinking coffee, etc.)?	3. What good feelings are triggers for your smoking (e.g., relaxation)?
What could you do instead (e.g., doodle	
while talking on the phone, take your coffee to another room or drink water instead)?	How can you congratulate yourself in a different way (e.g., ask a friend for a manicure)?
<u></u>	



Seven

Positives and Negatives of Smoking

This worksheet is important if your goal is to cut down or quit smoking. It will help you understand the good and bad parts of smoking, cutting down or quitting. It will help both you and your *Atii!* worker understand the reasons why you smoke. It also helps you to learn about possible problems and come up with solutions.

It can be easy to see or think about the downside of smoking and the benefits of quitting. But people often don't talk or think about the good parts of smoking and the bad side of quitting. Below are some examples and try to think of your own ideas for each section.

What I Like About Smoking

- It gives me a break from my children.
- It helps me deal with anger or stress.
- It's a social thing to do with my friends.

What I Like About Quitting

- I'll save money.
- I'll be able to breathe better.
- My children will stop nagging me to quit.

What I Don't Like About Smoking

- It's bad for my health.
- It costs a lot of money.
- Second-hand smoke is unhealthy for my children.

What I Don't Like About Quitting

- I'll have to deal with my friends who smoke.
- I won't know what to do with my hands.
- I'm afraid my anger will get out of control.

What I Like About Smoking What I Don't Like About Smoking What I Don't Like About Quitting What I Don't Like About Quitting What I Don't Like About Quitting

Worksheet Eight

Coping with Cravings

It's normal to have cravings for cigarettes when you are trying to make a change in your smoking. You can try to wait out the craving and tell yourself that it will pass after a few minutes. A good first step is to plan ahead. After you have figured out your triggers, you can plan ways to deal with them. Here are some ideas:

- Talk to a supportive friend;
- Take your children to the playground or for a quick walk outside;
- Hide the ashtrays and put your cigarettes out of sight;
- Take deep breaths;
- Throat sing;
- · Have a drink of ice cold water;
- Suck on some ice;
- Chew sugar-free gum or eat breath mints;
- Try relaxation exercises;
- Take a shower;
- Clean your house;
- Do a craft or colour with your children;
- Do something with a non-smoker; or
- Reward yourself for delaying your smoking or changing your thinking about smoking.

Things you can do to deal with your triggers:

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My craving is gone completely. I don't have to have a cigarette as a dessert anymore. I have changed my way of dealing with my cravings.

Annie B. Gordon, Aklavik, NT (Our Ancestors Never Smoked, pg. 74)

It isn't always easy to find time to do the things listed above. Instead, it might be easier to talk to yourself and change the way you think about smoking. Here are some ideas:

- Tell yourself to wait a bit longer to have this cigarette;
- Try to figure out why you're craving a cigarette;
- Remind yourself the craving will be over soon;
- Figure out what else you can do besides having this cigarette;
- Remember the changes you've made already;
- Remind yourself what a good job you're doing to protect your children from second-hand smoke. Not smoking around them means their health will be better;
- Think positive thoughts. Think of the benefits for you, your children, your pets and your home;
- Think of something you want to buy. You can put a quarter in a smoking jar every time you delay having a cigarette; and
- Don't think of a cigarette as a reward.
 Learn to reward yourself in other ways.



Eight

Coping with Cravings continued

Things that you can do to help you with cravings:
•
•
•

If someone asks me how to quit smoking I would say: have a partner [friend/buddy] who doesn't smoke or use chewing gum often and drink lots of cold water. Also go outside for fresh air. I think she or he would stop smoking.

Sarah Qumaluk, Sanikiluaq, NU (Our Ancestors Never Smoked, pg. 67)

When the Smoking Urge Strikes

Pause

- Notice the situation
- Don't judge yourself
- Ask yourself what I am feeling
- Take a few deep breaths

Focus

- Is there anything you need to do or say to take care of yourself
- You have new choices

Act

- In harmony with your goals
- Call a friend
- Share your thoughts/feelings with your group or *Atii!* worker
- Support/encourage yourself

(Breathing Easy. pg. 50)

Whether I smoke or not, this urge will pass!

Nine

Ideas to Keep My Hands Busy

The best way to deal with cravings is to plan ahead. You can think of a list of things that you can do to help deal with cravings before they hit. The best ideas are things that you can't smoke and do at the same time. Here are some examples:

- Do a craft with your children;
- Brush your teeth or floss;
- Get your hands wet (so it's too difficult to hold a cigarette);
- Sew something, knit (or crochet) or do beading;
- Put together a jigsaw puzzle;
- Chew sugarless gum;
- Play with the Atii! Reduce Second-hand Smoke stress ball;
- Doodle:
- Do the dishes;
- · Paint your nails;
- Dust; or
- Clean your house.

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My advice on how to reduce cigarette use is to drink water then work outside, like shoveling or cleaning around the house. Keep your mind busy on other things. Another advice is to go walking and leave your cigarettes behind.

Juanasi Tulugak, Nunavik, (Our Ancestors Never Smoked, pg. 72)





Ten

Practicing Self-Care

Deep breathing is a good skill to practice if you are tense, upset, having trouble sleeping or have an urge to smoke. It only takes a few minutes and can be done anywhere. The deep breathing actually helps you relax. This will help reduce cravings and improve your mood. Your Atii! worker can do this with you the first time. Here's how to practice.

- Get comfortable in a quiet place where you will not be interrupted for a few minutes. You can sit, stand or lie down. Use a position that is comfortable for you.
- 2. **Relax** your shoulders and close your eyes.
- 3. **Think** about something that makes you feel good.
- 4. **Slowly and deeply** breathe in through your nose with your mouth closed. Then count to eight. Your stomach will slowly rise as you inhale.
- 5. **Hold** your breath to the count of four.
- 6. **Breathe out** slowly through your mouth to the count of eight. Your stomach will fall as you exhale.
- 7. **Continue** this deep breathing cycle five times.
- 8. **Stretch** your arms over your head and slowly let them fall to your sides. Then you can open your eyes. Notice how relaxed you feel.

Write down the times when you could use this deep breathing exercise.

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Congratulate yourself for reaching your goals about protecting your children from second-hand smoke. It's hard work. You deserve to celebrate!



Helpful Resources

Aniqsaattiarniq-Breathing Easy Tobacco Recovery Resource Materials www.pauktuutit.ca/index.php/publications/ aniqsaattiarniq-breathing-easy

Action on Women's Addictions Research and Education (AWARE)

www.aware.on.ca

Canadian Lung Association-Smoking and Tobacco

www.lung.ca/protect-protegez/tobacco-tabagisme_e.php

Health Canada-Quit Smoking www.hc-sc.gc.ca/hc-ps/tobac-tabac/ quit-cesser/index-eng.php

Inuit Tobacco-Free Network www.InuitTobaccofree.ca

Our Ancestors Never Smoked www.pauktuutit.ca/index.php/publications/ our-ancestors-never-smoked-book/

Quit Now Services: BC Lung Association www.quitnow.ca

Quit4Life- Health Canada www.quit4life.com

Section Six Helpful Resources



Readiness to Change www.adultmeducation.com/ AssessmentTools_3.html

Smoking Sucks: Kick Butt www.naho.ca/documents/itn/english/ 2010_Qikiqtaaluk_workshop.pdf

Tobacco Has No Place Here www.nuquits.gov.nu.ca

YouTube Videos

 Aniqsaattiarniq-Breathing Easy: How to Use the Resource Kit. Pauktuutit Inuit Women of Canada. Part 1: www.youtube.com/watch ?v=buXvbGFmHmwandfeature=plcp

Part 2: www.youtube.com/ watch?v=167dvyQJ7Boandfeature=plcp

- Takuginai Puppet Show on Smoking:
 Part 1-3. Pauktuutit Inuit Women of Canada
 www.youtube.com/playlist?list=PL354555C
 F75B7E1BBandfeature=plcp
- Healing from Smoking: Part 1-3. Pauktuutit Inuit Women of Canada. www.youtube. com/playlist?list=PL698E11C05E75DA68an dfeature=plcp
- How Tobacco Use Affects Everyone: Part 1-3. Pauktuutit Inuit Women of Canada www.youtube.com/playlist?list= PL2802ABC4C79F0B67andfeature=plcp
- Nunavut Quits Testimonials www.nuquits.gov.nu.ca/apps/authoring/ dspPage.aspx?page=story)

Calculate Your Savings: As an *Atii!* worker you can access this savings calculator to see costs of cigarettes and compare to the current smoking costs. Follow this link:

www.nuquits.gov.nu.ca/apps/authoring/dspPage.aspx?page=calculate

Quit Lines: Counselling doubles your chances of quitting. The more help you have, the better your chances are of quitting. Free advice and quit-smoking counselling are available at your local health centre or through these quit lines:

- The NU Quits Hotline (Nunavut): 1-866-3NU-QUIT (368-7848).
- Labrador Helpline: 1-800-363-5864
- Northwest Territories quit line: 1-866-286-5099
- Québec quit line (Montreal): 1-866-527-7383
- Canada-wide quit line: 1-866-318-1116.

My Local Supports

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This guide was written for people who work with the Community Action Program for Children/Canadian Prenatal Nutrition Program (CAPC/CPNP), Community Health Representatives (CHRs) and related workers to provide strategies to help Inuit women reduce second-hand smoke.

520 – 1 Nicholas Street Ottawa, ON K1N 7B7 Tel: 613-238-3977

Fax: 613-238-1787

www.pauktuutit.ca