

Tobacco Cessation Program Facilitator Guide

Tobacco Cessation Program

Facilitator Guide

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General Program Information

This facilitator's guide contains information to conduct a six-week Tobacco Cessation Program. This program is based on the successful on-going Tobacco Cessation Program at Ft. Knox, Kentucky. The program was funded through the Health Promotions and Prevention Initiatives Program (HPPI) managed by the US Army Center for Health Promotion and Preventive Medicine (USACHPPM).

This program includes the components found to contribute to successful tobacco cessation, including Nicotine Replacement Therapy (NRT). However, your program may need to be modified to fit the constraints of time, personnel, and resources. Although all components of this program are recommended, a modified program is better than no program at all.

This program includes, as separate documents, the following components and support materials:

Facilitator Guide Appendix

Standard Operating Procedure Sample (Fort Knox, Kentucky)

Program Forms:

- Schedule of Sessions
- Attendance Roster
- Tobacco-Free Certificate

Evaluation Forms:

- Program Evaluation Form
- Post-Program Evaluation Interview Form
 - Cover Letter or Email Sample
 - Follow-up Survey via email or self-addressed, stamped postcard
 - Telephone script

Marketing

Data Collection Template (Excel)

Provider Competency Course (Fort Hood, Texas)

Registration Packet

- Tobacco User Profile
- Weekly Program Monitor
- Tobacco Use Evaluation

- Nicotine Replacement Therapy Counseling Form
- Center for Epidemiologic Studies Depression Scale
- Tobacco Use Log and Instructions

Tobacco Cessation Medication Information

- Nicotine Replacement Therapy
- Bupropion

Participant Workbooks

- Session 1 “Tobacco and You”
- Session 2 “Knowledge is Power”
- Session 3 “Getting Started”
- Session 4 “Examining the Hurdles”
- Session 5 “Making a Plan”
- Session 6 “Making It Last”

PowerPoint Slides for six sessions

These materials can be accessed online at
<http://chppm-www.apgea.army.mil/dhpw/Population/Tobacco.aspx>

Program Procedures

As the facilitator, you are responsible for directing the planning, operation, and evaluation of the Tobacco Cessation Program.

Key procedures are listed below:

Initial Scheduling

- All participants in the Tobacco Cessation Program are scheduled into the program by the Tobacco Cessation Program facilitator or staff. Each participant scheduled for class is given an appointment for an initial interview prior to the start of the class.
- Participants are instructed to complete the Tobacco Use Log (see Registration Packet) for two weeks prior to their initial interview appointment.

Initial Appointment

A health care provider does the initial appointment. Sample forms for this consult are in the Registration Packet, including

- Tobacco User Profile
- Tobacco Use Evaluation
- Nicotine Replacement Therapy Counseling Form
- Center for Epidemiologic Studies Depression Scale

This appointment includes a review of the medical record and the Tobacco Use logs if Nicotine Replacement Therapy or bupropion is going to be prescribed.

Medication

Nicotine Replacement Therapy (NRT) is a component of this program and procedures to administer the medication are outlined below. A Provider Competency Course, designed to train health care providers to prescribe and administer NRT, is included in this packet. NRT has been shown to enhance the effectiveness of a tobacco cessation program and its use is recommended. However, if resources are unavailable to administer NRT, it can be excluded from this program.

The Tobacco Cessation Program at Ft. Knox also uses bupropion as an adjunct to the program. Information on its administration is included below. However, if resources are unavailable to administer bupropion, it can be excluded from this program.

The facilitator should modify this program to meet the needs of the target population. For example, if your installation does not provide bupropion, delete that slide and discussion from your presentation. Both the slides and workbooks were designed to be

adapted for your local installation. Forms and handouts can be found in the Facilitator Guide Appendix and the Registration Packet.

Medication Guidelines

- At the time of the initial consult, staff provides the Medication Information Packet and other forms (see Appendix) required for each individual entering the Tobacco Cessation Program.
- Physician's assistants trained and certified by the Chief, Preventive Medicine (PM) have been credentialed to prescribe nicotine replacement therapy and/or bupropion with record review by the Chief, PM.
- The individual should see the health care provider two weeks before classes start to give the bupropion time to work.
- Participants' medical records are ordered for the initial interview appointment. The appointment is to review the participant's medical and tobacco use history. The level of nicotine replacement therapy to be used will be determined at this appointment as well as possible use of bupropion. The initial interview must occur within 90 days of the start of the classes.
- At the initial evaluation, participants who use bupropion are given prescriptions that start one week prior to Session 1. This allows a minimum of 7-10 days on medication prior to initiation of NRT.
- At the initial appointment the provider reviews how to use the tobacco log with the patient. The log sheet is used to help insure tobacco use is accurately measured; it also establishes patterns of heaviest use. Participants are advised to bring the tobacco use log to Session 1. Staff review the log to set the correct dosage of NRT. NRT is provided to program participants beginning at Session 2.

Weekly Follow-Up

During the program, the facilitator uses the Weekly Program Monitor form (see Registration Packet) to monitor participants. Participants must attend class sessions in order to continue to receive nicotine replacement therapy and/or bupropion. Participants who attend all the sessions have significantly greater success than those who skip sessions.

- Tobacco Cessation Program staff obtains the required NRT from the pharmacy prior to each class. Packages can be labeled by the pharmacy staff or by Tobacco Cessation Program staff to comply with pharmacy guidelines. Participants receive their first week of NRT at Session 2.
- Each week, the facilitator insures that participants sign in on log sheets (see Program Forms). Each attendee is interviewed by the facilitator or support staff to verify tobacco use or non-use and to insure that the correct amount of medication is provided. At the time of this weekly interview, the participant is given one week's dosage of NRT.

- Participants who are using bupropion **must** have their blood pressure monitored on a weekly basis.
- Participants that are taking nicotine replacement therapy **must** have their CO monitored on a weekly basis **if they are smokers**. If the participant is a smoker, a carbon monoxide level measured and recorded. Each participant is asked if they are tobacco-free at class time. Any participant who is not tobacco-free after the second class or who still has a carbon monoxide level measurement above eight is referred to the facilitator or health care provider. The facilitator or health care provider does a personal interview prior to dispensing the week's NRT.
- If an individual must miss a class, a personal interview that includes carbon monoxide and blood pressure measurement, if appropriate, is carried out by Tobacco Cessation Program staff before medication is issued. Problems with compliance or medication are discussed with the facilitator or health care provider.

Carbon Monoxide Monitor

Depending on your facility, you may monitor carbon monoxide levels. A carbon monoxide monitor measures exhaled carbon monoxide - which smokers have in their respiratory system from smoking. A level below eight parts per million means a participant is not actively smoking. CO levels return to normal about eight hours after the last cigarette.

Carbon monoxide testing is a real motivator. At the Fort Knox program, many participants said the thing that kept them from "slipping" was knowing they would face the carbon monoxide monitor the following week.

Also, it is the first real, measurable difference that participants see. The program at Fort Knox had participants with readings of 100 parts per million (ppm) at Session 1 (OSHA says doors and windows should be opened if you're in a building with 50 ppm). These same participants, after just one week of freedom from tobacco, had a reading of 2 ppm. The decrease in exhaled carbon monoxide reinforces in a concrete, measurable way that participants are doing something good for themselves.

Unfortunately, carbon monoxide monitors are not effective for smokeless tobacco users.

Sources of carbon monoxide monitors follow. This list is provided for information purposes only and is not meant as an endorsement. Prices shown were valid for January 2003.

VITALOGRAPH, INC.
 8347 Quivira Rd
 Lenexa, Kansas 66215
 1-800-255-6626
 FAX 1-913-888-4259

Cost: \$1140

With this machine, you need a supply of t-valves (20/box) at an approximate cost of \$51. Moisture condenses in the t-valves with the exhaled breath and should be changed between patients. They are re-usable when the condensation is cleared. You also need disposable white cardboard mouthpieces (one per patient). They come 200 in a box and cost about \$43. The calibration kit, which ensures your machine stays in calibration, is a one-time cost of \$150.

MICRO DIRECT, INC.
PO Box 239
Auburn, ME 04212-0239
1-800-588-3381
FAX 1-207-786-7280
Micro Direct Smoke Check \$495.00

Program Evaluation

During the Program:

Program evaluation is an essential component of an effective health promotion program. Evaluations are step one in improving any program, even one that is already working well! Evaluations can be accomplished in a variety of ways, including through program participation surveys and personal interviews. During the program, keep lines of communication open so that problems or concerns can be addressed.

During the program and on a regular basis, ask participants to tell you:

- Activities they especially liked or found effective.
- Components of the program that helped them most on an individual level.
- Teaching techniques/skills they found most effective and least effective.

Use this feedback to help you:

- Build a file of effective exercises and techniques for successful program management.
- Become a more dynamic leader to motivate and encourage the soldiers. Improve your teaching skills

After the Program:

Follow-up information should be reviewed on a regular basis and program modifications made as necessary. For more specific information on program evaluation, visit USACHPPM's Health Promotion and Wellness website (<http://chppm-www.apgea.army.mil/dhpw/Population/HIPPI/ProgramEvaluationTemplate.doc>). Outcomes data and good news stories should be briefed to command on a regular basis to maintain support and funding for the program. A sample Program Evaluation Form can be found in the Facilitator Guide Appendix.

Program Outcomes

It is important to know whether a health promotion program has been effective. This information, used in command briefings, information papers, interviews with local newspapers, etc, will enable you to justify continued funding and support for the program.

A key component to the success of a tobacco cessation program is whether or not participants have been able to stay tobacco-free. To assist with outcomes measurement, participants should be contacted at three months, six months, and twelve months post-program. (Follow-up intervals may differ if your program does not use the training schedule outlined in these materials). Along with providing outcomes data, this contact provides accountability for the participant and increases long-term success. Tell participants about long-term evaluation at Session 1.

Follow-up can be conducted via e-mail, postal mail or phone. Follow-up information is recorded on each participant's Post-Program Evaluation Interview Form (see Evaluation Forms in the Facilitator Guide Appendix). Follow-up results are entered into Tobacco Cessation Program Excel database. A sample database is provided in this tool kit.

Program Specifics

1. Organization

This program includes six sessions. Allow approximately one hour for each session.

| Session | Topics |
|---------|---|
| 1 | “Orientation” Are You Ready to Quit? |
| 2 | “Knowledge Is Power” Understanding Nicotine Addiction Setting a Quit Date |
| 3 | “Getting Started” Stress Management Dealing with Withdrawal |
| 4 | “Examining the Hurdles” Avoiding Weight Gain |
| 5 | “Making a Plan” Stress and Coping Strategies |
| 6 | “Making It Last” Relapse Prevention |

2. Format of Sessions

Each session includes presentations outlined in this guide, accompanied by PowerPoint slides. You should be familiar with this guide and with the participant workbook for each session.

You will be most effective if you are lively, stimulating, and informal. Avoid the traditional teacher-student model with adult learners. Adding personal stories will liven up the presentation. Your personal tobacco stories, if applicable, are particularly relevant to this group. Encourage questions and discussions at every point.

3. Session Schedule

A Session Schedule is in the Facilitator Guide Appendix.

4. Location

If possible, choose a quiet location that allows for group discussion. A quiet location is especially helpful for the relaxation exercises. Participants benefit from having a desk or table for note taking, completing forms, space for training aids, etc. Try to avoid traditional classroom seating. Arrange desks and chairs in a horseshoe or semi-circle so participants can face the facilitator and each other.

5. Number of Participants

You should plan to have a minimum of 15 participants so that when participants drop out (which they will), you will still have a good discussion group. You should have no more than 30 participants to encourage individual interaction and participation.

6. Smoking Status of Facilitator

The facilitator of this program *must* be someone who does not smoke. A minimum of one year tobacco-free is recommended. You are a role model and must present a healthy image. The facilitator need not be an ex-tobacco user. However, if you have never used tobacco, you must be prepared for challenge. This program offers specific techniques to help people stop tobacco use. It is the facilitator's role to help participant's master these techniques. Tobacco use is a learned habit, just like any other habit.

A good response for a facilitator who has never used tobacco:

Although I have never used tobacco, I have worked closely helping people like you stop using tobacco. I have had specialized training to help you. I know I can show you how to break this addiction. (A good analogy is that male physicians help women have babies every day even though they've never had a baby.)

7. Program Promotion

Promote your program via:

- Press releases to the local newspaper and radio station (see Facilitator Guide Appendix)
- Flyers and posters at health clubs, child care centers, and other MWR facilities
- Send an email announcement to MTF leadership, cadre, and installation leaders
- Announce the program in other health education classes
- Ensure all medical areas (clinics, waiting areas, etc) have promotional materials to provide to tobacco users.
- Each person should be asked upon checking in to a clinic about their tobacco status. Providing materials to the tobacco user at this check in ensures the appropriate audience is targeted for intervention.
- Units normally have a person who provides drug, alcohol and tobacco training. Ensure they have materials about your classes.
- Post inprocessing, community information exchanges, and special events are all good avenues to advertise your program.
- Some facilities have a monthly mail out to points of contact in the community and include tobacco cessation information quarterly.

8. Facilitator Guide

For each session, this guide includes:

- Materials list
- Class outline
- Script suggestions (in red)

It is important that you become familiar with the six participant workbooks so that you are prepared for questions from the class.

9. Optional Materials (not included in this tool kit)

Clinical Practice Guidelines for Tobacco – Video Tape

Magnet, business card, or button containing Tobacco Cessation Program contact information

Optional Session Materials

Session 1

- Magnet with your clinic or office phone number and location
- “I QUIT!” brochure (from Clinical Practice Guidelines Kit)
- Ball point pens

Session 2

- “Be Kind, I’m Quitting” pin
- Chewing gum and mints
- Stress balls

Session 3

- Relaxation tape/CD
- Magnet – “I’m Better Off Tobacco Free”
- Suckers/lollipops

Session 4

- Water bottles

Session 5

- Stress Management Booklet

Session 6

- Consent Form (HSC Form 158-R): The consent form gives permission to release the names of graduates to the local newspaper.
- Certificates of completion
- Coin purses
- “Success” lapel pins

10. Guest Speakers

Guest speakers help to reinforce important points. See each specific session for guidance regarding what the speaker should discuss and the length of the presentation.

If you cannot recruit a guest speaker for a specific session, alternative guidelines are suggested for that session.

The following guest speakers are recommended:

- Session 3: Successful graduate of the program
- Session 4: Registered dietitian
- Session 5: Behavioral health expert such as social worker or psychologist
- Session 6: Successful graduate of the program

SESSION 1

“TOBACCO AND YOU”

Facilitator Checklist

- Facilitator's Guide
- Attendance Record
- Name tags and felt pens
- Pens or pencils for participants to use
- Flip chart and markers (if not available, blackboard and chalk or whiteboard and markers)
- Session 1 Workbook for all participants
- Registration/Questionnaire Forms
- Schedule of Sessions for all participants (see Facilitator Guide Appendix)
- Optional: Business card, magnet, button, etc. with Tobacco Cessation Program contact information

Before class:

- Make sure all training resources are in order and ready prior to the session.
- Arrange chairs in a semi-circle to encourage discussion.
- Have Slide 1-1 displayed prior to the arrival of participants.

At the start of class:

- Greet participants as they arrive.
- Distribute Session 1 workbooks.
- Distribute Schedule of Sessions.
- If appropriate, distribute unit medication policy, facility pharmacy guidelines, and other installation-specific material.
- If participants have not completed a Registration/Questionnaire form, ask them to do so after class.

During class:

Frequently stop and ask if there are any questions throughout the entire program and particularly during this first session.

Slide 1-1: Tobacco Cessation Program

Note:

Begin the program promptly and in a friendly, reassuring manner.

Slide 1-2: Session One – “Tobacco and You”

Talking Points:

- Welcome participants.
- Introduce self.
- Congratulate all participants for taking the first step toward quitting tobacco.

Motivator:

Welcome to Session 1 of the Tobacco Cessation program and congratulations on making a move toward freedom from tobacco.

For some of you this may be your first attempt to quit using tobacco. For others, you may have tried before. Any move toward quitting tobacco makes you a success. You made your first move toward being successful just by signing up and attending this class. Those of you who have quit before but started using tobacco again can use your previous experiences to help you now.

Slide 1-3 Session Objectives

Note:

- Continue to be yourself.
- Encourage interaction and discussion – participants need to get used to talking during class.
- Stop frequently and encourage participants to ask questions.
- Write your name and contact phone number on flip chart and ask participants to record this information in their workbook.

Talking Points:

The objectives of this session:

- Discuss program structure
- Develop class guidelines
- Discuss challenges to success

Slide 1-4: General Information

Note:

Review general information about the program. Refer to page 2 in the Session 1 workbook.

Talking Points:

- Program made up of six sessions conducted over a six-week period.
- Length of sessions as it applies to your facility. (Classes should be no shorter than 1 hour in length.)
- Classes will start and end on time.
- Each session builds on the preceding sessions.

- Workbooks will be given out at each session and provide more information and “homework” to practice tobacco cessation skills.
- In order to receive tobacco cessation medication (nicotine replacement therapy and bupropion), must attend class.

Motivator:

Your attendance at all six sessions is encouraged to gain the full benefit of the program. A study conducted at Fort Knox showed that the more tobacco cessation classes a person attends, the higher the chance of success

Your attendance at class is required to obtain your prescribed tobacco cessation medication. If you are unable to attend a class, contact me to arrange a time to meet and catch up on the information you missed.

Slide 1-5 Medication Policy

Note:

Discuss the medication policy as it applies to your facility. Refer to unit medication policy as appropriate. Review the pharmacy guidelines and procedures as they apply to your facility.

Talking Points:

- Participants will receive seven days of medication every week
- No class participation means no medication

Slide 1-6 Individual Follow-Up

Note:

- Discuss individual weekly follow-up as applicable to your facility (i.e., carbon monoxide testing, blood pressure checks, counseling when needed, etc.)
- Participants who are taking bupropion **must** have their blood pressure and CO monitored on a weekly basis. Participants that are taking nicotine replacement therapy **must** have their CO monitored on a weekly basis.

CO MONITOR:

Tell participants that the carbon monoxide monitor will be set up in the classroom 15 minutes prior to class. Participants should check their carbon monoxide levels weekly.

Slide 1-7 Session Topics

Note:

Refer to page 1, Session Topics in the Session 1 workbook.

Talking Points:

- Session 1: "Tobacco and You"
- Session 2: "Knowledge Is Power"
- Session 3: "Getting Started"
- Session 4: "Examining the Hurdles"
- Session 5: "Making a Plan"
- Session 6: "Making It Last"

Motivator:

Some of you may have come here expecting to quit today. We don't encourage that. It is important to make a plan and have some "tools" to help you during the time you are going through this process because quitting tobacco is a process.

Slide 1-8: Class Guidelines

Note:

- Use a flip chart to record "class guidelines" suggested by the participants.
- Display the "guidelines" during each session.
- Refer back to them as needed.
- Sometimes a group talks all the time at the same time. Compliment them on their energy and ask for their cooperation in keeping to the time schedule.

Talking Points:

Guidelines should come from the participants rather than the facilitator.

Examples:

- Class attendance
- Participation
- Arrive on time
- Start and end class on time
- Respect others
- No side conversations
- Talk one at a time
- Turn off cell phones, beepers, pagers

Motivator:

Your attendance and participation in the group discussions are vital to giving up tobacco. I encourage you to ask questions and share your thoughts with the group. In order for everyone to have a successful experience in the program, we need to establish class guidelines.

Slide 1-9: Tell Us About Yourself

Note:

- Tell participants about your experience with tobacco. If you have never used tobacco, share that information. If you have a reason tobacco cessation is important to you, you may want to share that. For example, if you had a family member who died from a tobacco-related illness. State that you have been specially trained to help them give up tobacco.
- Make a mental note of the length of time each participant has used tobacco. You will use this information later in this session (Slide 1-8)
- Write concerns about quitting on a flip chart or chalkboard. You will use this information later in this session (Slide 1-11 Length of Use vs Time to Quit).

Talking Points:

Ask the group to share their tobacco history. Information to share includes:

- Name
- Smoke, dip or chew
- How long have they used tobacco
- How old were they when they started
- Why did they start
- Give one reason they want to quit
- Concerns they may have about quitting

Slide 1-10: Are You Ready to Give up Tobacco?

Note:

- Refer to page 4 in workbook.
- Instruct participants to complete the “Are You Ready to Give Up Tobacco?” worksheet.

Talking Points:

Emphasize the importance of being ready to give up tobacco. Each participant must be personally motivated.

This is a personal assessment. However, participants who answered yes to fewer than 4 questions may not be ready to quit. Invite them to speak to you after class if they so desire.

Slide 1-11: Addiction versus Habit

Note:

It is helpful to distinguish between a habit and an addiction. Tobacco users are usually physically addicted to the nicotine and behaviorally addicted to the habit of using tobacco. The behavioral addiction is often the hardest to overcome. Most people use tobacco because they are physically addicted to nicotine and because they have the habit of using tobacco. Quitting tobacco use involves overcoming physical addiction to nicotine and breaking free of the habit of using tobacco.

Talking Points:

- An addiction and a habit are two different things.
- An addiction is the body's chemical reaction to the drug nicotine.
- Your body has become dependent on nicotine and when nicotine is withheld, certain physical symptoms occur.
- A habit is a practiced behavior – something a person has become used to doing at a certain place or time.
- The habit of using tobacco can be very strong and is frequently harder to overcome than the physical addiction to nicotine.

Slide 1-12 Length of Use vs. Time to Quit**Note:**

- Compare and contrast the length of tobacco use with the amount of time the participants are spending in class. Participants have been using tobacco for years (usually).
- Use information gathered during the participants' introductions for concrete examples.

Motivator:

Keep in mind you are trying to change a habit of many years within six weeks. Many of you may continue to use nicotine replacement therapy beyond the six-week period to taper off nicotine. The habit of tobacco use will be one that takes conscious effort to break.

Giving up tobacco is a process that requires patience. The average person attempts to quit (tobacco) several times before becoming totally tobacco-free. This doesn't mean you won't be successful the first time you try to quit. It simply means that you should not give up if you are not successful the first time.

Slide 1-13: Challenges to Success**Note:**

- Refer to page 3 in the workbook.
- Instruct participants to fill in the table with input from the class.
- Use a flip chart to record the responses.

Further information on dealing with challenges is found in the Session 6 workbook, "Making It Last."

Talking Points:

- What are the challenges and concerns about stopping tobacco use that participants brought up during the introduction part of this session?
- Ask participants the following questions:
- "What challenges do you think you'll encounter in giving up tobacco?"
- "What are some suggestions for dealing with these challenges?"

Slide 1-14: Homework for next week

Note:

- Refer to page 4.
- Identify the tasks that participants are expected to complete prior to the next session.
- Encourage participants to contact you if they run in to any problems.
- Point out your name and contact phone number on the flip chart and remind participants to record this information in their workbook.

Talking Points:

- Create a “Survival Kit.” This should contain mints, hard candy, lollipops, reasons for quitting, your organization’s phone number, etc.
- Continue taking medication as prescribed.
- Think about a “quit” date.
- List reason or reasons for quitting on 3x5 cards

Motivator:

Next week, we’re going to discuss your homework, so bring this workbook with you to class. Some of you may have already established a quit date. It’s important to prepare to quit by making a plan and learning coping methods to deal with withdrawal symptoms and stress. Your quit date should be sometime next week after your second class.

After Class

Note:

Be prepared for participants who did not answer “yes” to four or more questions on the “Are You Ready to Give Up Tobacco?” quiz. You should conduct this discussion in a positive manner. Participants should feel that you want to help them choose the best time and method to quit.

You must respect a person’s right to choose or reject this program. It may not be the right time or place for every individual. If they seem very negative, ask them to carefully consider their decision to participate in this program. Let them know that just showing up for Session 1 indicates a certain level of desire and will to quit. If they want to try to work on quitting, encourage them. If they really don’t want to try, suggest they wait for another program.

Motivator:

This may not be the right time for you to quit. Quitting can be very stressful. If you are going through a particularly stressful time, you may want to consider your tolerance level. Maybe you are just not ready yet. This is something only you can decide. If you decide to stick with the program, I’m here to help.

SESSION 2

“KNOWLEDGE IS POWER”

Facilitator Checklist

- Facilitator’s Guide
- Attendance Record
- Name tags and felt pens
- Pens or pencils for participants to use
- Flip chart and markers (if not available, blackboard and chalk or whiteboard and markers)
- Session 2 Workbook for each participant
- Tobacco Cessation Follow-up Interview Form for each participant
- Session guidelines developed by class

Before class:

- Make sure all training resources are in order and ready prior to the session.
- Arrange chairs in a semi-circle to encourage discussion.
- Allow carbon monoxide levels to be taken until one or two minutes before class.
- Record CO levels on Tobacco Cessation Follow-up Interview Form for each participant.
- Have Slide 2-1 displayed prior to the arrival of participants.
- Greet participants as they arrive and hand out Session 2 workbooks.

Note:

If you have a quiet group, stop frequently and ask for questions. Ask questions of the class and call on people if you get no response.

Slide 2-1 “Knowledge is Power”

Note:

Begin the program promptly and in a friendly, reassuring manner.

Motivator:

Welcome back. I’m glad you came. Session 2 of the Tobacco Cessation Program is called “Knowledge Is Power.” We’ll look at some of the ways tobacco affects the body. Hopefully this information will lead you to a firm commitment to become tobacco-free for life. During this session, you will set a date to become tobacco-free.

Slide 2-2 Session Objectives

Talking Points:

- Understand nicotine addiction.
- Understand signs of recovery (also called symptoms of withdrawal) and discuss coping methods
- Commit to a Quit Date

Slide 2-3 Medication Questions? (OPTIONAL SLIDE)

Note:

- Ask for questions, comments, or concerns about NRT and bupropion.
- Information about medication is supplied in the Medication Packet booklet of this program. You may use this slide and booklet according to your program's medication schedule.

Talking Points:

Remind participants:

- Don't use tobacco in any form while using NRT.
- NRT is a medication. Use the same precautions you would take with any other medication.
- Use NRT as prescribed. Don't become impatient!
- If you are having problems with the medication, contact your health care provider.

Slide 2-4 What's Slowing You Down? Could It Be Tobacco Use?

Note:

- Refer to page 1 in the Session 2 workbook.
- Instruct participants to check symptoms they have had in the past year.

Motivator:

All of these symptoms are related to tobacco use. Quitting tobacco use now will enhance your ability to enjoy the rest of your life.

Slide 2-5 Tobacco – More Bad News

Note:

- Using the characteristics of your class, pick out a few key points from *Tobacco – More Bad News* and discuss.
- It is important to get to know your participants because what will be important for one person may be meaningless for another person.
- Some participants may be more concerned about the cost of tobacco while other participants are more concerned about the effects on their children.
- Refer to page 2 in the workbook.

Motivator:

- Infants who are regularly exposed to cigarette smoke are more at risk of Sudden Infant Death syndrome.
- Nicotine is used as an active ingredient in bug spray

- **Cigarette smoke contains:**
 - **Cyanide: a deadly ingredient in rat poison**
 - **Formaldehyde: foul-smelling preservative found in dead laboratory frogs**
 - **Arsenic: a potent ant poison**

Slide 2-6 More Bad News About Tobacco: Nicotine – The Addictive Drug in Tobacco

Note:

Refer to page 5.

Talking Points:

- Nicotine produces a physical dependence.
- Within 30 minutes of their last “hit,” tobacco users begin to crave nicotine again.
- This dependence makes users feel out of control.

Slide 2-7 More Bad News About Tobacco: Warning: Tobacco Use Can Kill Your Sex Life

Note:

Refer to page 7.

Talking Points:

- Nicotine lowers the level of testosterone in the blood and constricts blood vessels – this can lead to impotence for men.
- Tobacco use can interfere with a woman's ability to have an orgasm.
- Women between 30 and 39 years of age who smoke and take the pill are ten times as likely to have a stroke or a fatal heart attack as nonsmokers are.

Slide 2-8 More Bad News About Tobacco: Smokeless Tobacco: Not a Safe Alternative to Cigarettes

Note:

Refer to page 9 in the workbook.

Talking Points:

- Smokeless tobacco is NOT a safe alternative to cigarette smoking.
- People who “dip” or “chew” are 4 to 6 more times likely to develop cancer of the throat and mouth.
- People who “dip” or “chew” are 50 times more likely to develop cancer of the gums and lining of the cheeks.
- Smokeless tobacco has more nicotine than cigarettes and can be more difficult to quit than smoking.

Slide 2-9 Withdrawal and Coping

Note:

- Refer to pages 11 and 12 in the workbook.
- When a person stops using tobacco, the body has to adjust to the lack of nicotine.

- Review the symptoms of withdrawal.
- Brainstorm with the class how to cope with each symptom.

Talking Points:

- Irritability – How can you cope?
- Fatigue – How can you cope?
- Insomnia – How can you cope?
- Hunger – How can you cope?
- Depression – How can you cope?
- Coughing – How can you cope?

Motivator:

Remember – these symptoms don't last forever. Much of the worst is over in two weeks.

Slide 2-10 Withdrawal = Symptoms of Recovery

Note:

- Refer to page 13, “When You Quit Using Tobacco.”
- Focus on the fact that these withdrawal symptoms are, in fact, symptoms of recovery.

Talking Points:

- Within 8 hours, carbon monoxide levels drop to normal
- Within 48 – 72 hours, nicotine leaves the system
- Within 72 hours, lung capacity improves
- Within 2 weeks, circulation improves

Slide 2-11 Are You Ready to Change?

Note:

- Refer to page 15.
- Instruct participants to complete the 4-question survey on that page.

In this exercise, participants will

- Evaluate their readiness for change
- Look at why they use tobacco
- Develop some tools to help them through the short-term tobacco cessation process.

Talking Points:

- Participants began change process when they identified the problem - *tobacco use*.
- Participants have a clear idea of the action they need to take - *stop using all tobacco products*.
- Participants will assess their stage of change by responding “Yes” or “No” to the statements on survey “Are You Ready to Change?”

- Using the workbook as a guide, discuss how “Yes” and “No” answers indicates specific stages of change and the actions recommended at each stage.

Motivator:

In this exercise, you will do self-evaluations. This will help you determine where you are in the process of change. It will help you discover why you use tobacco and help you begin to choose tools to assist you during your immediate cessation process.

Change takes place in our lives frequently and sometimes without warning. Adapting successfully to change is much more likely when the change is planned for. Self-changes have demonstrated success when attention, knowledge, time, and resources are given to the change process.

Slide 2-12 Evaluate Your Stage of Change

Note:

- Refer to pages 15 and 16.
- Instruct participants to evaluate their stage of change.

Talking Points:

Stages of Change include:

- No to all 4 questions: Precontemplation
 - Are you *really* ready to change?
 - Are you inventing reasons why tobacco use is not a problem?
- No to 1,2,3, but Yes to 4: Contemplation
 - You know you need a change.
 - You should seek resources and support to move forward.
- No to 1 and 2, but Yes to 3 and 4: Preparation
 - You are getting ready to take action to change
 - This class will help you move from tobacco user to tobacco free.
- Yes to 2, No to 1: Action
 - You are moving toward freedom from tobacco.
 - Use this class to maintain momentum.
- Yes to 1: Maintenance
 - (Probably does not apply to anyone in the class)

Slide 2-13 Why Do You Use Tobacco?

Note:

- Discuss and review questionnaire.
- Refer to pages 17 and 18 in the workbook.
- Instruct participants to complete the questionnaire on page 17, then tally their scores using page 18.

Talking Points:

Addiction affects the body in three areas: physically, psychologically and behaviorally (habit). Knowing where a person's addiction is strongest will help them select the tools and resources to deal with their withdrawal process.

The main reasons people use tobacco are:

- Stimulation
- Handling
- Pleasure
- Relaxation/Tension Reduction
- Craving
- Habit

Motivator:

Why do you use tobacco? This questionnaire will help you figure out the main reasons you use tobacco. Once you determine the major reasons, you can concentrate coping strategies to help you with those specific areas.

Slide 2-14 The Addiction Triangle and Coping Strategies**Note:**

- Refer to page 19.
- Instruct participants to circle the words in the triangle where they scored higher than a 7 on the page 18.

Motivator:

The triangle allows you to see the areas in which you will experience the greatest problem in tobacco cessation and coping suggestions. Are you rating high in all three angles? If so, nicotine replacement therapy will help support you during cessation. If you are rating high in the behavioral and psychological areas, then journal assignments, exercise plan, relaxation exercises, and thought-changing activities will be important to achieving freedom from tobacco.

Slide 2-15 Commitment to Quit**Note:**

- Ensure participants that this is a personal decision and that they should not quit until they are ready. The next three sessions will cover a lot of information about coping strategies, stress management, and other hurdles and participants might want to set a date that falls after those topics have been covered.
- Refer to the Commitment Statement on page 20.
- Instruct participants to complete the commitment statement.

Talking Points:

- Avoid setting a date close to a time that you know you are going to be having extra stress at work or at home.
- Avoid setting a date that is too close to a holiday that might have extra socializing.
- Try to choose a time that you can really focus on staying tobacco-free.

Motivator:

Keep in mind, however, that there is no “perfect” or completely stress-free time in anyone’s life. Quitting during a deployment may or may not be good, depending on whether you respond well to being in a new environment or the situation just adds more stress.

Slide 2-16 Think Success**Talking Points:**

To be successful with tobacco cessation, you must:

- Believe being tobacco-free is better for you.
- Realize there are some discomforts.
- Believe that the program can help you.
- Commit to making behavior changes.
- Develop long-term stress management techniques. Recognize the need to learn new ways to deal with stress without tobacco.

Motivator:

Kicking the tobacco habit requires personal commitment, self-discipline, and patience. Have confidence in yourself and believe that you will be successful in becoming tobacco-free for life. You can do it!

Slide 2-17 Tips for Coping**Note:**

- Refer to page 21.
- Preparation for change is key to success with quitting tobacco use.
- Instruct the class to take notes as they brainstorm tips for coping.
- Encourage class discussion.

Talking Points:

Once you establish a quit date, what are some things to help you get ready as that date approaches?

Examples:

- Get rid of all tobacco in your house, car, and workplace.
- Clean everything! Tobacco smoke clings to everything, especially clothing, rugs, curtains, and the upholstery in your home and car.
- Remove ashtrays, lighters, matches, etc.
- Get support from family, friends and coworkers.
- Try to cut down on caffeine and sugar.
- Avoid alcohol.

- Eat small, frequent meals to maintain a constant blood sugar level.
- Change your routines:
- Don't sit in your favorite smoking chair.
- Avoid smoking areas.
- Drink lots of water.
- Eat in "non-smoking" restaurants.
- Take a brisk walk.

Slide 2-18 Homework due next week

Note:

Refer to page 22.

Talking Points:

- If you smoke tobacco, complete the "Fagerstrom Addiction Scale for Smokers."
- If you use smokeless tobacco, complete the "Modified Fagerstrom Tolerance Questionnaire for Smokeless Tobacco Users."
- These tools will help you determine your level of dependence on tobacco. This will help you set up your plan to become tobacco-free.
- Begin work on your plan to become free from tobacco.

Motivator:

Next week we will work on Session 3 – "Getting Started" and we'll have an ex-tobacco user as a guest speaker. We'll also talk about more strategies for handling stress -- without tobacco.

SESSION 3 “GETTING STARTED”

Facilitator Checklist

- Facilitator’s Guide
- Attendance Record
- Nametags and markers
- Pens or pencils for participants to use
- Flip chart and markers (if not available, blackboard and chalk or whiteboard and markers)
- Session 3 Workbooks
- Session guidelines developed by class

Before class:

- Recruit a guest speaker for the class. Someone who has gone through quitting tobacco, and is still tobacco-free, is an inspiration. Be sure it is someone who will be a positive role model and give an upbeat message, not just to talk about how terrible that time was! The speaker should be prepared to speak for 5-7 minutes. Be sure to leave adequate time for the guest speaker and questions from the class.
- Allow carbon monoxide levels to be taken until one or two minutes before class.
- Record CO levels on Tobacco Cessation Follow-up Interview Form for each participant.
- Have slide 3-1 displayed as participants arrive
- Hand out Session 3 workbooks.

Slide 3-1 Session 3 – Getting Started

Motivator:

Congratulations on making it to week 3 of the Tobacco Cessation program. You are halfway there! This session will focus on ways to put your plan into action to support your new tobacco-free lifestyle.

Slide 3-2 Session Objectives

Talking Points:

Objectives of this session:

- Talk about carbon monoxide and smoking
- Review more ways tobacco affects your mind and your life
- Discuss planning for recovery
- Explore coping strategies to deal with cravings
- Discuss ways to deal with stress without using tobacco

- Develop a Rewards Plan

Slide 3-3 Last Week's Homework

Note:

Lead a brief discussion about last week's homework.

Talking Points:

- What did you learn about tobacco and addiction from the Fagerstrom Addiction Scale?
- What steps have you taken that you feel good about?
- Have you seen a change in your carbon monoxide reading from last week?

Slides Off for Guest Speaker

Introduce speaker, including name, occupation and tobacco and quitting history. Be sure to thank the speaker at the end of the brief talk.

Slide 3-4 Carbon Monoxide

Note:

Refer to page 1.

Talking Points:

- Carbon monoxide is toxic gas found in tobacco smoke.
- Levels of carbon monoxide are regulated by the government.
- After 8 hours of tobacco freedom, your carbon monoxide level returns to normal.
- Before every class, each student will have their carbon monoxide level checked.
- You should see a decrease in CO levels starting the day you quit smoking.
- CO is not found in smokeless tobacco.

Slide 3-5 How Tobacco Affects Your Mind

Note:

Refer to page 2

Talking Points:

- Breaking the tobacco addiction is challenging because tobacco contains chemicals that cause psychological effects.
- Nicotine is a stimulant: It increases heart rate, blood pressure, breathing rate, and makes user feel more alert. These effects wear off after twenty minutes or so.
- Acetaldehyde and carbon monoxide act as sedatives: Carbon monoxide makes you feel "dull" and seems to dampen some people's feelings of tension, anger, or strong emotion.

Slide 3-6 Other Psychological Effects

Talking Points:

- For many, the act of smoking becomes a comforting ritual associated with pleasurable feelings. These “triggers” are why quitting smoking involves more than just kicking the nicotine habit.
- Other habits can serve as strong triggers such as:
 - Drinking coffee
 - Sitting at your kitchen table
 - Going to a bar
 - Talking on the phone

Class Discussion:

Brainstorm with the class about other examples of triggers.

Slide 3-7 Understanding is Power! Planning for Recovery

Note:

Refer to page 3, Understanding is Power!!

Talking Points:

- More likely to be successful quitting tobacco if you have a plan.
- Planning includes identifying your goal -- Quitting tobacco.
- Planning includes identifying resources and tools to help you quit.
- Planning also includes identifying hurdles and how to deal with them
 - 2 to 3 days: major physical withdrawal symptoms and major routine changes
 - 2 to 3 weeks: Fatigue, emotions of sadness, boredom, loneliness
 - 2 to 3 weeks: Overconfidence – “I’ll just have one.”

Class Discussion:

What are some tools, resources, and support system members to help you quit?

- Tools: nicotine replacement therapy, Zyban, written reasons to quit tobacco, tobacco cessation log
- Resources: Facilitator, CHN staff, Behavioral Medicine staff, other medical professionals
- Support system: classmates, family and friends, coworkers

Slide 3-8 Breaking Habits and Changing Patterns

Note:

Refer to page 4.

Talking Points:

Common tobacco use habits include:

- Sitting in the smoking section in restaurants
- Keeping tobacco in convenient places
- Keeping an ashtray next to your most comfortable chair

- Stocking up on matches or lighters
- Hanging out with other smokers at gatherings

Class Discussion:

- Quitting tobacco will involve a conscious effort to break habits and change patterns of behavior.
- What are some habits you may need to change?
- What steps will you take to change your pattern of behavior?

Slide 3-9 Coping Strategies for Cravings

Note:

Refer to page 5.

Class Discussion:

- What can you **do** to cope with cravings?
- What can you **think** to cope with cravings?

Slide 3-10 Relaxation Techniques

Note:

Refer to page 6.

Talking Points:

Along with helping you quit tobacco, relaxation exercises will also:

- Increases deep/restful sleep
- Elevates your mood
- Increases alertness
- Increases mental energy
- Increases physical energy
- Decreases anxiety and depression

Motivator:

Relaxation exercises are a skill you can use to help you past the rough times. But like any skill, you need to practice the skill for it to be useful. I suggest practicing at least one of the techniques in the workbook every day for 20 minutes.

Facilitator-Guided Exercise:

Conduct a demonstration of deep breathing (outlined below). Encourage the class to participate.

1. Exhale slowly through the mouth, letting all the air out of your lungs.
2. Feel your tension and anxieties going out with the breath, pause, then inhale deeply through the nose, using the muscles of your abdomen to pull in the air.
3. Keep your chest muscles relaxed and let your chest expand by itself as you inhale.
4. Pause, then exhale deeply.
5. Do this four to ten times.

6. Remember to keep it slow and deep. You don't want to get dizzy or out of breath.
7. As you breathe deeply, think of how the fresh air flowing into your lungs is carrying away the toxins that have built up there over the years of smoking.
8. With each breath your lungs are closer to being clean and clear, the way they were meant to be.
9. Each cleansing breath also helps relieve the stress of becoming tobacco free.

Slide 3-11 Exercise and Addiction Recovery

Note:

Refer to page 8.

Talking Points:

- Exercise is an excellent stress reliever
- Exercise produces “endorphins” which are the body’s natural “relaxer” chemical.
- Exercise helps to avoid weight gain during tobacco cessation.
- Further information about setting up an exercise program is in the workbook.
- Exercise web resources are:
<http://www-benning.army.mil/usapfs/>
<http://carlisle-www.army.mil/apfri/>

Slide 3-12 Reward Yourself!

Note:

Refer to pages 11 and 12 in the workbook.

Talking Points:

- Some people use tobacco as a “reward.”
- Non-tobacco reward: Long bath or shower, sleeping in, taking a nap, listening to music, stay in bed until noon, wear sweats all weekend

Class Discussion:

What are some ways you can think of to reward yourself? Use the money you used to spend on tobacco to plan rewards. As homework, you will use these rewards to complete the 30-day reward plan on page 12.

Slide 3-13 Homework due next week

Note:

Refer to pages 13 in the workbook.

Talking Points:

- Complete your 30-Day Reward Plan
- Read the information in this manual about relaxation techniques.
- Practice one relaxation technique from the workbook every day.
- Read the Exercise Plan materials and bring questions next week.
- Optional: Read “Who Am I?” and complete the activities

SESSION 4

“EXAMINING THE HURDLES”

Facilitator Checklist

- Facilitator’s Guide
- Attendance Record
- Name tags and felt pens
- Pens or pencils for participants to use
- Flip chart and markers (if not available, blackboard and chalk or whiteboard and markers)
- Participant Workbooks
- Videotape player and tape
- Session guidelines developed by class

Before the class:

- Recruit a dietitian or other qualified health care provider to speak to the class about preventing weight gain while giving up tobacco.
- If a qualified health care provider is not available, use the video “Avoid Weight Gain” from the MEDCOM’s *Clinical Practice Guidelines for Tobacco*. You can order the video online at:
<http://www.gmo.amedd.army.mil/smoke/tuc%20order%20form.htm>
- Or, you can use slides from USACHPPM’s *Power Performance, the Nutrition Connection* (Module 2), available at:
<http://chppm-www.apgea.army.mil/dhpw/Wellness/ppnc.aspx>
- Allow carbon monoxide levels to be taken until one or two minutes before class.
- Record CO levels on Tobacco Cessation Follow-up Interview Form for each participant.
- Display slide 4-1 as participants arrive.
- Distribute Session 4 workbooks.

Slide 4-1 Session 4 – Examining the Hurdles

Class Discussion:

- Welcome to Session 4 – Examining the Hurdles.
- Tell me about your experience with the relaxation techniques we talked about last week. Do you have any questions about the techniques you practiced?
- What were some of the rewards you put into your 30-Day Reward Plan?

Slide 4-2 Session Objectives

- Determine if weight gain is a hurdle to success
- Develop a plan to make it over that hurdle

Slide 4-3 Is Weight Gain a Hurdle to Your Success?

Note:

Introduce nutrition expert:

- Name
- Title
- Occupation
- Experience with tobacco cessation

OR

Introduce “Avoid Weight Gain” video

OR

Use slides from *Power Performance, the Nutrition Connection* (Module 2)

Slide 4-4 More About Weight Gain and Tobacco Cessation

Note:

Refer to pages 1 – 14 in the workbook.

Talking Points:

The workbook includes more information about weight gain and nutrition, including:

- Do You Have To Gain Weight If You Quit Using Tobacco? – page 1
- Find Your Eating Triggers – page 3
- What’s the Food Guide Pyramid? – page 4
- Evaluate Your Eating Habits – page 7
- Meal Planning – page 10
- Tips for Weight Management – page 12

Slide 4-5 Homework due next week

Talking Points:

1. Complete the food record on page 9 for one day.
 - Be honest. No one will see this but you.
 - Under Hunger, 0 is the least hungry, 5 is the most hungry.
 - Under Thought/Feelings, write down whether this meal or snack has anything to do with tobacco. Did you want to light up, but ate a candy bar instead?
 - Use the food record to think about ways other than eating to manage anxiety, loneliness, anger, boredom, and needs for comfort.
2. Read “More on Stress Management,” pages 15-21.
3. Bring in the Tobacco Use logs you completed before starting the class.

Motivator:

Sometimes our feelings go beyond stress and get into actual depression. If you have little interest or pleasure in doing things or have feelings of being down, feeling hopeless

or depressed, you should see your health care provider right away. Depression is an illness that can be treated and help you to feel a whole lot better.

SESSION 5 “MAKING A PLAN”

Facilitator Checklist

- Facilitator’s Guide
- Attendance Record
- Name tags and felt pens
- Pens or pencils for participants to use
- Flip chart and markers (if not available, blackboard and chalk or whiteboard and markers)
- Participant Workbooks
- Audiotape player and tape
- Session guidelines developed by class

Before the class:

- Recruit a guest speaker from Behavioral Medicine to talk to the class about strategies to cope with stress during the tobacco cessation process.
- If a speaker is not available, use the following slides and script.
- Allow carbon monoxide levels to be taken until one or two minutes before class.
- Record CO levels on Tobacco Cessation Follow-up Interview Form for each participant.
- Have slide 5-1 displayed as participants arrive.
- Hand out Session 5 workbooks.

Slide 5-1 Session 5 – Making a Plan

Motivator:

Welcome to week 5 of the Tobacco Cessation Program. Today we have a guest speaker from Behavioral Medicine will talk to us about strategies to cope with stress during the tobacco cessation process.

OR

Motivator:

Welcome to week 5 of the Tobacco Cessation Program. Today we’re going to talk more about your tobacco cessation plan and strategies to cope with stress during the tobacco cessation process.

Slide 5-2 Session Objectives

- Learn ways to identify your personal hurdles to success.
- Learn ways to identify stress before it leads to tobacco use.

- Learn ways to cope with your personal triggers.

Slide 5-3 One-Day Food Record

Note:

Instruct participants to take out their one-day food record (page 10 in Workbook 4).

Class Discussion:

- What did you learn when you compared your tobacco use and your food use in your food record?
- What ways, other than eating and tobacco, did you think of to manage anxiety, loneliness, anger, boredom, and needs for comfort?

Slide 5-4 Planning for Success

Note:

Refer to page 1 in the workbook.

Talking Points:

- Make a plan to get where you want to be
- Identify potential “bumps in the road”
- Develop a plan to deal with those “bumps”
- Was your plan effective? If not, revise and try again.

Slide 5-5 Preparing for Hurdles

Note:

- Refer to the Tobacco Use logs completed by participants (found in Registration Packet).
- Instruct participants to complete page 3 during the following discussion.

Class Discussion:

- Review your Tobacco Use logs.
- Do you see any patterns of behavior that encouraged tobacco use?
- Can you identify certain types of thoughts or feelings that preceded tobacco use?

Examples:

- Do you always want to use tobacco after a meal?
- Do you find yourself wanting to use tobacco after you’ve had an argument?
- Do you want to light up on the way home from work?
- Do you use tobacco when you feel angry?
- Do you use tobacco when you feel frustration?
- Do you use tobacco when you feel contentment?

Slide 5-6 Stress – The Sneaky Hurdle

Note:

Refer to page 3.

Motivator:

If you ask people who are trying to stop using tobacco products what are the hardest times, stressful situations are sure to be at the top of the list. Having a cigarette or taking a dip is a common coping mechanism for tobacco users. But knowing that isn't enough. **The problem with stress is that it can sneak up on you.** It builds up over time like water behind a dam until the floodgates open and you find yourself using tobacco as a way of dealing with the pent-up stress.

Slide 5-7 Spotting Stress BEFORE You Lose Control

Note:

- Refer to page 3.
- Instruct participants to complete the table during the discussion.

Class Discussion:

How do you feel when you are stressed?

Examples:

- Angry
- Agitated
- Frustrated
- Nervous

Slide 5-8 Reactions to Stress: Thoughts and Feelings

Talking Points:

- Physical responses, thoughts and feelings, and behaviors are all reactions to stress.
- **But** thoughts and feelings typically happen **AFTER** stress has begun to take control so they are not helpful warning signs.

Slide 5-9 Reactions to Stress: Behaviors

Note:

- Refer to page 4.
- Instruct participants to complete the table during the discussion.

Talking Points:

Physical and behavioral signs show up earlier than thoughts and feelings in the stress response.

Class Discussion:

Brainstorm stress behaviors.

Examples:

- **Using tobacco**
- Eating more or eating less than usual
- Arguing with people over little things
- Losing your temper
- Having trouble sleeping
- Making careless mistakes

Motivator:

These behavioral signs of stress are definitely helpful. They happen while we still have control over our behavior. But smoking and other forms of tobacco use can be behavioral signs of stress. So if our goal is to try to identify stress before we start using tobacco as a coping mechanism, then it looks like behavioral signs may be too late in the cycle.

Slide 5-10 Reactions to Stress: Physical Symptoms**Talking Point:**

Physical symptoms are the best early warning signs of stress, such as:

- Tingling in your fingertips or toes
- Arms and legs feel cold
- Increased heart rate
- Dizziness
- Headache
- Butterflies in your stomach
- Muscle tension
- Upset stomach
- Shallow breathing
- Diarrhea
- Feeling tired or listless
- Watery or irritated eyes

Class Exercise: Circle your physical signs of stress.

Slide 5-11 Catch the Stress → Break the Pattern**Motivator:**

Remember, everyone's response to stress is unique. Pay attention to your own stress response. Practice identifying the early warning signs of stress, especially physical symptoms. As soon as you recognize that you may be feeling stressed, take a moment to calm down. If you catch stress early, you can change your pattern of behavior and avoid slipping back into tobacco use.

Slide 5-12 Small Changes = Big Results**Note:**

- Refer to page 5 in the workbook.
- Instruct participants to complete the table during the discussion.

Talking Points:

- Small changes can help reduce the overall stress in life.
- Small changes can often get big results.

Class Discussion:

Brainstorm small lifestyle changes that can decrease stress.

Examples:

- Being late: Buy a watch (if you don't have one already). Create a realistic schedule. Set all the clocks in your house 10 minutes ahead.
- Forgetting things: Write yourself reminder notes and hang them where you'll see them. Leave yourself messages on your answering machine at home or work. Make lists.
- Too much to do: Make lists. Prioritize. Don't sweat the small stuff – focus on what's important.
- Rushing to get dinner together every night: Cook on Sunday for the rest of the week and just reheat. Use crockpot recipes. Stop at the grocery store for already prepared foods. Order pizza once a week.
- Being late to work: Leave 15 minutes earlier.
- Traffic on the way home: Buy CDs you'll enjoy. Listen to books on tape. Exercise after work and head home after traffic has decreased.

Slide 5-13 Planning for “Triggers”**Talking Points:**

- A successful tobacco cessation plan has to include quitting or changing those everyday experiences that have become associated with tobacco.
- These everyday experiences are called “triggers.”

Slide 5-14 Planning for Triggers: Avoidance/Substitution**Note:**

- Refer to page 6.
- Instruct participants to complete the table during the discussion.

Talking Points:

- Some triggers can be avoided outright, such as watching a certain TV program.
- Removing a trigger will make things easier as you work to cut tobacco out of your life.
- Replace the trigger with something that will serve the same purpose but which isn't associated with using tobacco.
- Don't take something away without replacing it with a more healthy alternative.

Class Discussion:

Brainstorm triggers and substitutes.

Examples:

- Watching TV: Take a walk, read a book, call a friend
- Drinking coffee at the kitchen table: Drink something else, drink coffee in different part of the house, don't drink coffee at all
- Taking a break with co-workers: Grab a bottle of water or stick of gum, let co-workers know you are trying to quit and need to avoid these breaks for a while, suggest taking a walk around the building or block

Slide 5-15 Planning for Triggers You Can't Change: Delay**Note:**

- Refer to page 7 in the workbook.
- Instruct participants to complete the table during the discussion.

Talking Points:

Delay: A simple but effective technique to help you avoid tobacco use in situations you can't change.

Example: Smoking after dinner

- An urge to smoke right after the end of the meal -- this urge is the real problem, not the meal itself.
- You've essentially trained yourself to have a cigarette after your meal.

Delay: Simply make a commitment to yourself that you will not use tobacco for the next 15 minutes.

- Gets you past the most dangerous time – the time *immediately* after dinner.
- 15 minutes later, you reconsider whether or not you want to have that cigarette
- By that time, you've already broken the pattern of behavior, the urge to use tobacco is much weaker and your ability to *think* about and determine the best course of action is much improved.
- You achieve all of this by the simple tactic of waiting 15 minutes.
- Make sure that while you are waiting 15 minutes, you get busy doing something else. Start cleaning the kitchen, go for a walk, call a friend. Do something other than sitting around thinking about those 15 minutes. Otherwise those will be the longest 15 minutes of your life.

Class Discussion:

Brainstorm other situations where delay might work.

Examples:

- Awakening in the morning
- When you get in your car
- Getting home at night
- After any meal

Slide 5-16 Progressive Relaxation

Note:

Refer to page 11 in Session 3 workbook.

Motivator:

Stress management strategies such as deep breathing and relaxation exercises will continue to be important as you work toward freedom from tobacco.

Class Exercise:

Take a few moments to conduct a progressive relaxation exercise for the class.

- Get comfortable in your chair, with both feet flat on the floor.
- Begin by closing your eyes and taking a few deep breaths and letting all the air out.
- Then focus your attention on your feet.
- Tense the muscles of your feet so that your muscles tighten and your toes curl.
- Notice how your feet feel when they are tense.
- Hold the tension for a few seconds and then relax.
- Feel all the tension leaving your muscles as you relax.
- Now notice how your feet feel when they are relaxed.
- There may be warmth, heaviness, or tingling sensations.
- You can do this exercise one-foot at a time or both feet together, whichever works best for you.
- Now move up your body, tightening and loosening in sequence the muscles of your calves, thighs, buttocks, abdomen and torso.
- Tighten your hand muscles and work your way up your arms to your shoulders and neck.
- Tighten and relax your jaw muscles.
- Press your tongue against the roof of your mouth and relax.
- Tense and relax the muscles of your face and scalp by making a grimace. You may be amazed at how much tension there can be in the facial muscles.

When you have finished this exercise, sit still for five minutes and notice the sensation of your completely relaxed body.

Slide 5-17 Homework for this week

Talking Point:

Practice one relaxation technique from the Session 3 workbook.

Slide 5-18 Next Week – Last Class of the Program and Graduation Ceremony

Talking Points:

- Last class of the program is next week
- Focus: Relapse Prevention
- Closing activities including “Graduation Ceremony.”

SESSION 6

“MAKING IT LAST”

Facilitator Checklist

- Facilitator’s Guide
- Attendance Record
- Name tags and felt pens
- Pens or pencils for participants to use
- Flip chart and markers (if not available, blackboard and chalk or whiteboard and markers)
- Participant Workbooks
- Program Evaluation form
- Prepared Certificates of Completion
- Calculator for determining “dollars up in smoke”

Before the class:

- Recruit a graduate of the program to speak to the class for 5 – 7 minutes on Relapse Prevention. If you cannot get a speaker, recruit a member of the class who has tried quitting before. Ask them to speak about why they started using tobacco again. How have they used that experience to help them this time? What are their “lessons learned?”
- Prepare Certificates of Completion for program participants. A sample certificate can be found in the appendix of this guide
- Ensure you have enough Program Evaluation forms for all participants. A sample Program Evaluation form can be found in the appendix of this guide.
- If you want, you can prepare a small “reception” to celebrate successful completion of the program. Along with being a nice way to end the program, this also gives participants the chance to chat socially and perhaps form a support system. Menu suggestions: Carrot and celery sticks with dip, cookies, and lemonade.
- Allow carbon monoxide levels to be taken until one or two minutes before class.
- Record CO levels on Tobacco Cessation Follow-up Interview Form for each participant.
- Have slide 6-1 displayed as participants arrive.
- Hand out Session 6 workbooks.
- Greet participants as they arrive.

Slide 6-1: Making It Last

Motivator: Welcome and congratulations on making it to the final session of the Tobacco Cessation program. If you have relapsed during this program, don't get discouraged – quitting frequently takes more than one attempt.

Introduction:

- Introduce the guest speaker.
- Allow the speaker 5-7 minutes to tell his or her story.
- Encourage participants to ask questions, particularly about relapse.
- Thank the speaker.

Slide 6-2 Don't Quit Trying to Quit!

Session Objectives:

- Discuss relapse prevention
- Discuss use of medication
- Closing activities

Motivator:

Your brain has been taught to like nicotine and it will like nicotine until the day it dies. If you never take the first taste -- you will never become a user again. Those who use tobacco products "just one time" when trying to quit relapse 99% of the time. Lighting up a cigarette "just to see how it tastes" throws all your hard work out the window. You can't quit trying to quit!

Slide 6-3: Top Three Reasons for Relapse

Note:

Refer to page 1 in the Session 6 workbook.

Talking Points:

Top 3 reasons for relapse:

1. Living or working with others who continue to use tobacco products.
2. Field duty.
3. Thinking: "I'll have just one," "I can control it now," or "I'm just going to see how it tastes now."

Class Discussion:

- Discuss the top three reasons for relapse with the class.
- How do they feel these "top three" could affect them?
- What plan can be made ahead of time to deal with these situations?

Coping Strategies:

1. Living or working with others who continue to use tobacco products.
 - Ask the tobacco user to go outside to use.
 - Ask the tobacco user to only use in one room in the house.
 - Ask the tobacco user to not use around the quitter.
2. Field duty.

- Take your “survival kit.”
 - Avoid the smoking areas.
 - Don’t hang out with tobacco users.
 - Take the 3 x 5 card that lists the reasons you quit.
3. Thinking: “I’ll have just one,” “I can control it now,” or “I’m just going to see how it tastes now.”
- Remind yourself why you quit and how difficult it was in the beginning.
 - Get away from the area.
 - Get busy doing something else.
 - Wait 15 minutes and rethink the situation.

Slide 6-4: Other Reasons People Relapse

Note:

Refer to page 1 in the Session 6 workbook.

Talking Points:

Why do ex-users start using tobacco again?

- Stress
- Withdrawal Symptoms
- Alcohol
- Boredom

Class Discussion:

Let’s talk about some ideas for dealing with these. (See below)

- | | |
|---------------------|---|
| Stress | <ul style="list-style-type: none"> • Ask yourself "Why do I think a cigarette/chew now would relax me? Nicotine is a stimulant!" • Get out of the situation that is causing stress. • Do something else – take a walk around the block, drink a glass of water, take a shower. • Get out of the house. • Practice deep breathing and imagine a peaceful scene. • Get out your tobacco cessation plan and review your reasons for quitting. • Congratulate yourself for relaxing without using tobacco. |
| Withdrawal Symptoms | <ul style="list-style-type: none"> • Remind yourself that the symptoms you experience after quitting are only temporary. Think about the effort you've already put into quitting. Don't let it go to waste! • When you get the urge to smoke/chew, remember the 5 D's - <i>Delay, Deep breathe, Drink water, Discuss with a friend or family member, Do something else!</i> |
| Alcohol | <ul style="list-style-type: none"> • Try not to drink in situations where tobacco is easy to get. • Tell your friends you’ve quit. |

- Suck on a swizzle stick.
- Avoid drinking too much – it lowers your willpower.

- Boredom
- Telephone someone.
 - Tell yourself "I've been doing a great job; I won't blow it now!"

Slide 6-5 High Risk Situations

Note:

Refer to pages 2 and 3.

Talking Points:

High risk situations for returning to old tobacco habits include:

- Awakening in the morning
- Drinking coffee
- Eating meals
- Watching television
- Driving a car
- Taking a break with coworkers
- Socializing

Class Discussion:

Let's talk about some ideas for dealing with these. (See below)

- | | |
|------------------------|---|
| Awaking in the morning | <ul style="list-style-type: none"> • Brush your teeth as soon as you wake up. • Start an activity right away; don't sit around thinking about tobacco. |
| Drinking coffee | <ul style="list-style-type: none"> • Have your coffee while doing something with your hands so that using tobacco is difficult. • Have tea or another beverage instead. |
| Eating meals | <ul style="list-style-type: none"> • Eat lunch in a different location. Sit in nonsmoking sections at restaurants. • Get up from the table right away after eating and start another activity (i.e. - take a walk). |
| Watching television | <ul style="list-style-type: none"> • Have an activity ready to keep hands busy. Play a game, do a puzzle, sew, build a model, give yourself a manicure, or write a letter. • Keep low calorie snacks readily available. • Watch television with a non-user. • Have carpets and upholstery cleaned and make the television room a tobacco-free zone. |

- Driving a car
- Have car cleaned and deodorized when you quit tobacco use.
 - Keep low calorie snacks on hand or keep toothpicks or straws with you.
 - Chew sugarless gum.
 - Try public transportation, which prohibits smoking.

- Taking a break with co-workers
- Brush your teeth or start chewing a piece of sugarless gum at the beginning of breaks.
 - Take several slow, deep breaths and visualize a peaceful scene to help you relax.
 - Take breaks with non-user associates until you feel more confident about not using tobacco.

- Socializing with friends or family who use tobacco
- Suggest going to no-smoking events (movies, theater, shopping in department stores) until you are more confident.
 - Let these people know you're trying to quit and ask for their support. Ask them not to use tobacco around you, not to offer you, or give you tobacco products even if you ask for them.
 - Consider quitting with someone else (especially a family member). You can offer each other support and avoid extra temptation.

Are there any other ways to cope you can think of?

Slide 6-6 Relapse?!

Motivator:

Most relapses occur within the first 3 months after quitting. Relapse does not mean failure. Be patient with yourself. Don't be discouraged if you use tobacco again. If you return to tobacco it doesn't mean you can't quit. You need to examine why you returned to tobacco. Develop techniques to deal with those "relapse" situations. Refine your plan to quit again. Remember – most people try several times before finally quitting.

Slide 6-7 Relapse Prevention Plan

Note:

- Refer to page 4.
- Instruct participants to fill in the blanks during the class discussion.

Talking Points:

- Most people who successfully quit tobacco have a plan.
- Think about why you smoke and have strategies to deal with those triggers.
- Look to the positive side of being tobacco-free.
- Reward yourself for making it to your goals.

Class Discussion:

Brainstorm tools and resources to help with tobacco cessation

Examples:

- Pace yourself by setting goals for 3, 7, 14 and 21 days.
- Reward yourself each day/week you are tobacco free.
- Develop a plan to handle external triggers and internal moods.
- Anticipate stressful events and develop a plan to cope.

Slide 6-8: The 5 D's for Relapse Prevention

Note:

Refer to page 4.

Talking Points:

The 5 D's help with urges. They are:

- **Deep** breathing - Try to keep calm and cool. Take slow, deep breaths. Stick with it until you feel relaxed and in control.
- **Drink** water - Try to drink 8 glasses a day.
- **Do** something else - Play basketball. Chew some sugar-free gum. Listen to your favorite records, tapes or CDs. Work a crossword puzzle. Look at a magazine. Read. Keeping busy with other things will keep your mind off tobacco.
- **Discuss** your urge with a friend or family member - Talking about things can help you to feel better.
- **Delay** - Don't reach for tobacco right away. Count to 100 or 200. Think pleasant thoughts. Remember, the urge to use tobacco will pass in 3 to 5 minutes, whether you use it or not.

Slide 6-9: Why Remain Tobacco Free? Reasons and Benefits

Note:

- Refer to page 5.
- During the discussion, record participant responses on flip chart or white board.

Class Discussion:

What are your reasons or benefits for remaining tobacco free?

Slide 6-10: The Cost of Smoking

Note:

- Refer to page 5.
- Instruct participants to complete the formula to determine how much money they have saved so far by quitting tobacco.

Motivator:

How much money will you save in a year? And dollars are not the only savings. Each of you has made a big investment of time and effort in quitting. Don't lose your investment! Think of the long term health benefits as your "compound interest" over time.

Slide 6-11 “If at first you don’t succeed...”

Motivator:

If you “slip,” don’t be too hard on yourself.

Examine the situation

- What was the trigger?
- What could you have used as a coping strategy?

Try again.

Slide 6-12 Ideas to Get Back on Track

Note:

Refer to page 6.

Class Discussion:

What can you do to get back on track if you do slip up?

Slide 6-13 Congratulations!

Motivator:

You have mastered a very difficult challenge -- you have removed an addictive drug from your life. You should feel a sense of great pride that nicotine no longer controls you. You are going to make it. You have skills possessed only by winners. Congratulations on your victory over nicotine and tobacco. The most significant aspect of this tobacco cessation program is this:

Nobody did it for you -- you did it for yourself!

If you haven’t quit yet, keep working on it. You have only failed when you quit trying.

Slide 6-14: Tobacco Cessation Support Group (OPTIONAL SLIDE)

Note:

- Refer to page 10 in the workbook.
- If your installation has a Tobacco Cessation Support Group, encourage participants to attend as needed.
- If your installation does not have such a group, participants may want to meet informally for support.

Slide 6-15: Medication Follow-up (OPTIONAL SLIDE)

Note:

- Those that started on NRT at a higher dose may be on NRT longer and will be need to continue to see to their health care provider for weekly visits.
- Participants taking bupropion may also need follow up per the instructions of their health care provider.

Slide 6-16: Tobacco Cessation Follow Up

Talking Points:

Remind participants that you will be contacting them in the future to gain additional program feedback.

Closing activities:

- Conduct a “Graduation Ceremony” and hand out certificates of completion.
- Distribute then collect Program Evaluations.
- Invite class to stay for the “reception.”