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# Tobacco Use Cessation Programs:

*An Inventory of Canadian Tobacco Cessation  
Programs and Resources*

2000 Update



Canada



# **Tobacco Use Cessation Programs:**

*An Inventory of Canadian Tobacco Cessation  
Programs and Resources*

**2000 Update**

Prepared by  
Tobacco Control Programme  
Health Canada

Our mission is to help the people of Canada  
maintain and improve their health.

*Health Canada*

Également disponible en français sous le titre *Programmes de renoncement au tabagisme : Un répertoire des programmes individuels et de groupe*

The opinions expressed herein are those of the contributors and do not necessarily reflect the official views of the Department.

A copy of the *Tobacco Use Cessation Programs: An Inventory of Self-Help and Group Programs* can be found on the Health Canada Web site at: [www.infotobacco.com](http://www.infotobacco.com)

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# Introduction

## About Smoking Cessation

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Smoking cessation is a process that normally involves several stages including thinking about quitting, deciding to quit, taking action, and maintaining the decision to quit. For many smokers, this process also includes a number of attempts at quitting before becoming smoke-free. Individuals need different kinds of help at each of these stages.

Smoking cessation means overcoming the physical addiction to nicotine as well as dealing with the psychological dependence and entrenched handling rituals. It requires personal motivation and effective coping strategies. However, to quit successfully, many smokers also need a supportive environment where non-smoking is the social norm.

While many smokers stop smoking on their own, others find that group programs, self-help guides, individual counselling or other treatment approaches can help them to quit. Access to cessation programs is affected by a number of factors, such as language, literacy level, tone, cultural and personal relevance, timing, location, cost and supports for participation.

## About the Inventory

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This inventory is a listing of various cessation programs and services that are currently available nation-wide or province-wide. It includes:

- Self-Help Programs
- Group Programs
- Counselling Programs
- Toll-free Quit Lines
- Tobacco Web Sites

Inclusion of a program or treatment approach in this inventory does not mean either an endorsement by Health Canada or a recommendation of one program or method over another. As the inventory does not include all existing programs, the omission of a program should not be considered a judgement of its validity or effectiveness. Also, the information about each program can change at any time.

The inventory begins with a brief explanation of the terms and notations used in the text, followed by a discussion of the key factors affecting access to cessation programs.

The information for each program listed in the inventory includes:

- brief description,
- who developed the program,
- language availability,
- who can use the program,
- geographic availability,
- suitable delivery sites,
- costs, if any,
- results of any formal evaluations, and
- how to access the program.

Some listings also include additional notes such as related programs and resources.

The inventory concludes with a summary of other options that are available to help people quit, a list of toll-free quit lines and tobacco Web sites, program evaluations undertaken by the American Lung Association and the Canadian Cancer Society and a list of other resources. The inventory is also available on the Health Canada's Web site at: <http://www.infotobacco.com>

## Other Resources

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The following organizations can provide more information about smoking cessation programs, resources and support groups that are available in the community:

- regional or local health departments,
- the provincial or local offices of the Lung Association, the Cancer Society, the Heart and Stroke Foundation,
- other non-profit health organizations,
- in Ontario, the Program, Training and Consultation Centre, Toll-free (Ontario only): 1-800-363-7822.

Some hospitals and private clinics also offer smoking cessation programs—a few examples are included in the inventory. In addition, there are a variety of books on stopping smoking in libraries and book stores.

In some Canadian communities, individuals have organized Nicotine Anonymous recovery groups that use the Twelve Steps program developed by Alcoholics Anonymous. Background material for establishing such a group can be obtained by contacting Nicotine Anonymous World Services by mail at **P.O. Box 126338, Harrisburg, Pennsylvania, U.S.A. 17112-6338**, by telephone at **(415) 750-0328** or by Internet at <http://www.nicotine-anonymous.org>.



# Terms and Notations

*The following explanations and notes will help clarify the terms and notations used throughout the inventory.*

**Self-Help Program:** a program that is designed primarily to be used by individuals on their own without additional assistance or instructions.

**Group Program:** a program that is designed primarily to be used by a number of individuals in a group meeting format, usually with a designated facilitator or program leader. **Note:** Resources used in group programs can include self-help participant manuals or other self-help materials.

**Counselling Program:** a program that primarily involves one-to-one counselling or instruction *by a health professional*. **Note:** Self-help materials can be used to augment counselling programs.

## **Quit Lines and Web Sites:**

## **Training Program:**

**Prenatal and Postpartum Women Program:** a program that is designed primarily for women of child-bearing age.

**Youth Cessation Program:** a program that is designed primarily for young people.

**Language:** the languages in which the program is available.

**Target:** the intended users of the program.

**Note:** *General Population* is used as the target group when the program is designed for a general audience rather than a group with specific defining characteristics. The other target group categories used in the inventory are:

- Aboriginal Groups,
- Employees,

- Individuals with Special Needs,
- Lower SES (Socioeconomic Status) Groups,
- Multicultural Groups,
- Smokeless Tobacco Users,
- Women – General,
- Women – Pregnant,
- Youth – General,
- Youth – Female.

**Region:** geographic areas in Canada where the program is currently available.

**Site:** where delivery of the program is best suited.

**Note:** *Community-at-large* is used as the site when the program is designed to be used in the home, or at the offices of volunteer agencies and neighbourhood associations. *Health Care Settings* represents health professionals' offices, health units, hospitals and other health centres. *Schools* and *Workplaces*, which are self-explanatory, are the other two sites used in the inventory.

**Cost:** the charge for program materials or fees for a program. **Note:** In addition to the cost indicated for a program, there may be additional taxes and/or shipping and handling fees applicable. As costs are subject to change, they should be verified prior to joining a program or ordering program materials.

**Evaluation:** systematic analysis of the impact of a program. **Note:** Typical quit rates one year after completing a smoking cessation program range from 15% to 25%. However, the significance of an evaluation depends on whether the methodology used to carry out the study is credible. Therefore, it is important to assess any estimated or claimed success rates reported in this inventory in light of the manner in which the evaluation was conducted. Success rates for programs are further complicated

by the fact that quitting smoking is normally a process that involves a number of attempts before succeeding. What could be considered as a previous failure might have been a critical part of the process which leads to successful cessation.

# Improving Access to Programs

## Trends in Smoking

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According to the recent *Canadian Tobacco Use Monitoring Survey* \*\*(*Wave 1: February to June 1999, Wave 2: July to December 1999*), an estimated 25% of Canadians aged 15 and older—just over six million people—were smokers in 1999. Smoking prevalence has declined since 1990, when 30% of Canadians smoked. Declines have been greatest for older Canadians, who are more likely to have successfully quit smoking.

Unfortunately, smoking trends for youth do not follow this pattern. Youth smoking, particularly among teens, is up since 1990—28% of Canadian teens aged 15–19 now smoke, compared to 21% in 1990. There has been little change in the teen smoking rate since 1994.

Overall, Canadian males aged 15 and older are more likely to smoke than females (27% versus 23%). Smoking rates are clearly higher for males during early adulthood and, to a lesser extent, through middle adulthood. Men aged 20–24 have the highest smoking rates of any age/sex group in Canada (39%).

Among teens today, however, smoking is as common among females (29%) as it is among males (28%). Teenage girls who smoke every day also consume the same number of cigarettes, on average, as teenage boys. As females, regardless of age, have historically smoked less than males, this new trend among teenage girls merits close monitoring.

There are also indications that girls today start smoking at a younger age than boys. An estimated 41% of girls aged 15–17 who smoke report having had their first cigarette before age 13, compared to 29% of boys.

The prevalence of smoking varies widely across Canada, from a low of 20% of the population aged 15 and older who are current smokers in British Columbia to a high of 29% in Nova Scotia. Teen smoking also varies widely across Canada, ranging from 24% in British Columbia to 36% in Quebec. The percentage of teens who smoke in Quebec, Saskatchewan and Manitoba is clearly higher than the percentage of adults who smoke in these provinces.

One way to gauge how successful Canadians are at quitting smoking is to calculate quit rates—the proportion of successful quitters among all those who have ever smoked (current and former smokers combined). At least half (51%) of all Canadians aged 15 and older either currently smoke or have been a smoker at some point in their life. Of all the people who have ever smoked, nearly half (46%) no longer smoke and have not smoked for at least one year. Quit rates are much lower for young people than for older people; only 8% of ever-smokers aged 15–19 have successfully quit, compared to 65% of ever-smokers aged 45 and older.

## Access to Programs

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Clearly, smoking cessation interventions need to be accessible to all segments of the Canadian population. While this chapter primarily looks at tailoring interventions to meet the needs of specific groups, most of the ideas presented also apply to programs designed for the general population.

As our knowledge of smoking behaviour evolves, so does our understanding of what interventions are likely to be effective in helping people to become and stay smoke-free. In the past, concerns about access to smoking cessation programs typically

\*\* These trends in smoking are the results of one year of data collection for the Canadian Tobacco Use Monitoring Survey (CTUMS), a new ongoing Health Canada survey designed to provide periodic national and provincial cross-sectional estimates on tobacco use.

focused on cost, language, location, registration procedures, and community awareness of available resources.

Today, accessibility issues extend beyond these concerns to also include literacy level, tone, cultural and personal relevance, special needs of specific groups, inclusion of significant others, provision of child care or other supports for participation, and targeted recruitment strategies.

Factors affecting access to smoking cessation programs cannot be viewed in isolation. Barriers to accessing programs are often interrelated and therefore need to be considered together when developing health promotion interventions.

## Literacy Skills

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According to the second report (1997) of the International Adult Literacy Survey, Canadians with low literacy skills may not be able to understand and interpret health information and rely on others to help them with the basic reading tasks of everyday life. Of interest also is the Statistics Canada's report: *Reading the Future: A Portrait of Literacy in Canada*, 1996, which found that at least 45% of adult Canadians have low literacy skills and, therefore, do not have adequate reading abilities to manage most everyday reading requirements. However, slightly more than half (22%) of these adults are able to work with reading material that is simple, clearly laid out and uncomplicated in terms of tasks presented in the text.

The survey also found that poor literacy skills tend to be associated with lower education, lower socioeconomic status, living in rural areas and being elderly. The fact that this survey did not include the Territories, Indian Reserves or correctional facilities emphasizes the implications of these important findings for program development.

The programming implications of a high prevalence of low literacy skills among Canadian adults are particularly relevant to smoking cessation interventions. Almost all of the same groups within the general

population that tend to have low literacy skills also tend to have the highest rates of smoking. As well, people with low literacy skills are less likely to have detailed knowledge of the health effects of smoking or the benefits of quitting.

Text-filled manuals for participants and activities with written instructions are typically core components of smoking cessation group programs and self-help guides. An inability to manage everyday reading requirements translates into an inability to access these programs and resources. In addition to this practical limitation, individuals with poor literacy skills can experience emotional and social barriers to seeking assistance for quitting smoking. In a society where reading skills are presumed, people with low literacy may have low self-esteem and lack self-confidence. They may be more likely to try to hide their difficulty with reading and less likely to seek help in improving their health.

Literacy level clearly needs to be a primary consideration in the development of programs and materials as a fundamental step in overcoming these barriers. It is important to note that verbal as well as written components of programs need to be considered. Verbal information should not only be at an appropriate literacy level, but also should include a meaningful context in which to be properly understood.

There are a number of other aspects to take into account in designing smoking cessation programs:

- Literacy level is affected by the layout and font used in print and visual material as well as by the organization and flow of ideas.
- Both spoken and written information are reinforced by mixing in interactive tasks. Examples are quizzes, role playing and asking participants to talk about how the information relates to their own situation.
- Readability formulas have been developed to help determine the grade level of written text. This approach uses measures such as the average number of words per sentence and the average number of syllables per word. However, readability formulas are insufficient by themselves to ensure an appropriate literacy level. For instance, the

average number of syllables per word does not matter if the participant is unfamiliar with the vocabulary that is used or the layout of the material makes it difficult to understand.

- Forms of communication that do not require reading and writing skills are important components of smoking cessation interventions designed for people with low literacy. Examples are pictures and posters with little or no text, video and audio tapes, mass media programming, theatre, story telling, games and discussion. Advances in technology offer new possibilities as well. In settings where guidance is available, computers with touch screen monitors can be used to relay information through pictures and voice. Communicating in these ways can help to clarify written information and reduce or even replace written materials. In all cases, non-written communication needs to conform to the standard literacy principle of imparting a clear message that is easy to understand and interpret.
- Program concepts and materials should always be developed in consultation with intended users. It is also critical to pre-test programs and resources with participants who are truly representative of the program's target group.

To improve access to smoking cessation interventions for people with low literacy skills, program developers in the health promotion field need to collaborate with literacy groups and utilize literacy guidelines that are available from these groups. One such resource that will prove helpful in developing new programs or adapting existing resources is:

- *Easy Does It!* A health communication training package, including a Training manual, Face to Face video, CD-ROM version and Working with low-literacy seniors. The complete training package is available in English and French for \$79.95 (plus shipping and tax) and can be ordered from the Plain Language Service, Canadian Public Health Association, 400-1565 Carling Avenue, Ottawa, ON K1R 8R1, Tel: (613) 725-3769, Fax: (613) 725-9826, E-mail: hrc@cpha.ca

## Tailoring Interventions to Stage of Change

People who smoke may be more likely to access interventions and respond to recruitment strategies that take into account their readiness to change. The 1999 Canadian Tobacco Use Monitoring Survey has found that the most common reason for quitting by successful quitters of all ages is concern about their future health. Ten percent of successful quitters say personal health problems made them quit. Other reasons for quitting include lifestyle changes, the cost of cigarettes, pregnancy and smoking-related illness or death of a friend or relative.

Nearly one third (31%) of current smokers say it would take more willpower for them to quit. However, many smokers (20%) say they don't know what it would take to quit which suggests that they either may be unaware of possible quitting strategies or simply have not given much thought to quitting.

Although relatively new, the "stages of change" model for smoking cessation interventions has quickly become incorporated into the development of programs and resources. This model targets interventions to the individual smoker's readiness to change according to progressive stages—all the way from not thinking about changing (the pre-contemplation stage) through preparing to quit to maintaining the decision to stay smoke-free. The model also recognizes that it is a normal part of the quitting process to go through some or all of these stages a number of times before quitting smoking permanently.

The main body of the inventory includes a number of programs that are tailored to participants' readiness to change their smoking behaviour. For example, the Stopping When You're Ready program in the Ontario self-help resources begins with a brief quiz that determines stage of change and directs the participant to the appropriate booklet in the program kit.

### **Targeting Programs to High Priority Groups**

In a broader sense, the concept of readiness to change can be relevant to specific groups in addition to individuals. Some cultural groups within the general population require smoking cessation interventions that are tailored to their unique situations in order to take action to reduce smoking in their communities. Groups defined by characteristics such as gender and socio-economic status may need assistance with other pressing issues to be able to think of quitting smoking as a possibility or a priority.

**Aboriginal Communities:** For many Aboriginal communities, tobacco is a sacred plant that has an important role in traditional ceremonies and gift giving. At the same time, the prevalence of non-traditional smoking of tobacco is very high among Aboriginal Peoples in Canada. Health Canada's 1991 Aboriginal Peoples Survey found that almost half (46%) of Aboriginal adults aged 15 and older smoke cigarettes daily and a further 11% smoke cigarettes occasionally. Smoking rates are particularly high for young Aboriginal adults: 54% of teens and 65% of 20- to 24-year-olds smoke cigarettes. Therefore, smoking is a major Aboriginal health issue that needs to be addressed in a manner that reflects community values and meets community needs.

There has been a general lack of public education within Aboriginal communities about the effects of smoking, second-hand smoke and also smokeless tobacco. In addition, more immediate community challenges such as family violence and alcoholism can overshadow or minimize concern about smoking. As a result, many Aboriginal smokers are likely to be in the pre-contemplation stage of change with respect to smoking—they are not thinking about quitting or reducing the amount smoked.

A first and necessary step to help these smokers move to the next stage of change is to increase community awareness about the health effects of tobacco abuse versus traditional tobacco use. However, almost all of the smoking education and cessation programs that are currently available in Canada are not readily accessible to Aboriginal groups. As is the case for the general population,

access is limited by the literacy level of materials used in many of these programs. Moreover and most importantly, these programs are not culturally appropriate for Aboriginal people.

There are very few resources that use Aboriginal role models and symbols to make smoking cessation messages personally and culturally relevant. For many Aboriginal communities, being culturally sensitive also includes respecting tobacco's sacred role and clearly distinguishing between smoking and ceremonial tobacco use. As well, the vast majority of these programs and materials focus exclusively on the individual in contrast to the Aboriginal holistic approach of involving the family, the community and the environment. The NASAWIN smoking education program, which is described in the inventory's group programs, provides one of the few examples of a culturally appropriate smoking intervention for Aboriginal people.

While cultural values with respect to tobacco vary for different Aboriginal groups, the toll of smoking-related illness does not. Greater collaboration within and among Aboriginal organizations, health associations and program providers is central to incorporating smoking cessation interventions into an effective health promotion strategy for Aboriginal communities.

**Ethnocultural Groups:** The Canadian profile is a rich mosaic of diverse cultures and ethnic backgrounds. About 16% of the population are newcomers and many other Canadians have ethnic origins that are not French, British or Aboriginal.

A 1990 Statistics Canada survey of urban centres found that prevalence of daily smoking varies significantly by ethnic origin for foreign-born residents of Canada, ranging from 9% for respondents of Southeast Asian origin to 26% for those of Ukrainian origin. Overall, 16% of foreign-born residents report smoking daily compared to 25% of Canadian-born residents. However, adapting to Canadian society could reduce this difference in prevalence over time, particularly for adolescents who may start to smoke as a way of fitting in with peers. Almost half (47%) of the foreign-born daily smokers in the survey attempted to quit smoking in the year preceding the study. Yet, most available

smoking cessation programs and resources are not readily accessible to these ethno-cultural groups because of differences in language, traditions, religion, social customs, education and socio-economic status.

Improving access to smoking cessation interventions for these groups is increasingly important as Canada's ethno-cultural profile continues to change and diversify. A first step is for different ethno-cultural groups to identify whether smoking is a problem within their communities. This approach can move a community as a whole through the pre-contemplation stage toward taking action to reduce smoking in a culturally appropriate way. Taking action in this manner is best achieved when programs are developed and implemented by ethnic, immigrant and multi-cultural organizations within their communities. However, conventional health organizations also need to ensure that their programs and resources are accessible to ethnic groups and immigrants.

In designing or adapting programs to meet the needs of different ethno-cultural groups, the following factors should be considered:

- cultural attitudes and values related to tobacco;
- additional programming needs specific to gender, language, education and socio-economic status;
- extensive use of visual materials such as videos that are suited to a wide range of literacy skills and can be available in a variety of languages;
- extensive use of the ethnic media;
- program staff's cultural awareness and ability to communicate with members of the community;
- target group participation in all phases of program development; and
- opportunities to provide information or programs through English as a Second Language (ESL) and Language Instruction for Newcomers (LINC) classes as well as other existing channels.

At all programming levels, creating an environment that meets the specific health promotion needs of ethno-cultural groups requires effective partnerships between immigrant, ethnic and multi-cultural organizations, governments, municipal health departments and community health centres.

**Other High Priority Groups:** Improving access to smoking cessation interventions is equally important for other priority groups that can experience significant barriers to maintaining healthy lifestyles or who have a high prevalence of smoking. These groups include:

- women who are socially disadvantaged;
- adolescents generally, adolescents in low-income families, school drop-outs and street youth;
- adults who are in low status occupations or unemployed or homeless; and
- heavily addicted smokers and smokers with other chemical dependencies.

Smoking cessation interventions targeted to these groups need to reach beyond smoking behaviour to also address life circumstances that contribute to tobacco use. Underlying issues of self-esteem, peer attitudes and beliefs, other pressing and seemingly insurmountable problems, lack of support systems, lack of resources—these realities need to be carefully integrated, as appropriate, into the design, delivery and recruitment strategies of smoking cessation programs for these high-risk groups.





# Newfoundland

## Self-help Programs

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### 1) Coping Without Smoking

A self-help support group for people who are thinking about quitting smoking, have quit and have had a slip, or are trying to remain smoke-free. The group provides support and tips to those struggling with quitting smoking. Educational support and materials are also available. There is a small fee of \$10 annually to cover the cost of materials. The group meets every Wednesday, from September to May, at 7:30 p.m. The meetings are held at the Lung Association House, 292 Le Marchant Road, St. John's NF. For more details, call the *Lung Association* at (709)726-4664.

### 2) Smoking Cessation Quit Line

This exciting new program offers a toll-free number (1-800-363-5864) that smokers, or family members who are concerned about the health of their loved one and themselves, can call to speak to a trained smoking cessation counsellor. The Quit Line is designed to help would-be quitters progress through various stages of change (i.e. contemplation, preparation, action, maintenance) identified in the trans-theoretical model of smoking cessation. Follow-up support and materials are also provided.

**\*NOTE:** The caller will most likely reach an answering machine upon calling, but is prompted to leave a telephone number and a convenient time for a counsellor to return his or her call.  
E-mail: [www.nf.lung.ca](http://www.nf.lung.ca)

### 3) Baby's Coming, Baby's Home

A resource package designed to help prenatal and postnatal mothers and their families to create smoke-free environments for their babies. It focuses on issues relating to smoking during pregnancy, the health effects of exposure to second-hand smoke and the importance of creating smoke-free homes in the prenatal and postnatal period. Health

professionals, educators and other resource people in the community can use the materials in this package to assist women and their families to make informed choices about the effects of smoking and second-hand smoke on their health and the health of their families. (A joint project of the Lung Association of Newfoundland and Labrador and Community Health – St. John's Region.) Contact the *Lung Association* at (709)726-4664.

### 4) Lung Facts

A compilation of 22 "fact" sheets about smoking. Includes tips on how to quit, how second-hand smoke affects children, what's in a cigarette, and many other smoking-related topics. Call the *Lung Association* for more information at (709) 726-4664.

### 5) Smoke-Free Homes Sticker

A great way to inform your guests that your home is a smoke-free home. A window sticker that says "Welcome to our smoke-free home" can easily be placed on the window of your front door. Call the Lung Association for more information at (888) 566-4664. (*Newfoundland & Labrador Lung Association*, 292 Le Marchant Road, P.O. Box 5250, St. John's, NF A1C 5W1, Tel: (709) 726-4664, Fax: (709) 726-2550)

### 6) Break On Through

A resource package that provides materials and support tools that will raise awareness around the issue of adolescent smoking and will further provide the support necessary to work with youth in this area. The resource includes a Facilitator's Guide, activities and materials for school staff and students and activity templates. The resource was developed by the Centre for Applied Health Research, University of Waterloo in partnership with the Community and Health Promotion Branch, Ontario Ministry of Health and Long-Term Care in 1997. The resource is available

from the *Program Training and Consultation Centre, Ottawa-Carleton Health Department*, 495 Richmond Road, Ottawa, ON K2A 4A4, Tel: 1-800-363-7822, (Ontario) (613) 722-2242, Fax: (613) 724-4116

## **7) How Not To Smoke**

A Help book for women who want to quit smoking. “How Not to Smoke” is a video and workbook designed to help women who want to quit smoking. Designed specifically for low-income, low-literacy women between the ages of 18 and 35 years. How Not To Smoke is an excellent resource for any woman who wants to “kick the habit.” The full package includes a 25-minute video, developed in 4- to 5-minute segments which match the exercises in the workbook. A cardboard package holds the video workbook and a fridge magnet. Additional copies of the workbook and magnet are available. Ideal for independent or group use, How Not to Smoke is a must for every tobacco-reduction program!

**Language:** English; French

**Region:** Ontario

**Price:** \$24.95 (plus shipping & handling)

*Canadian Public Health Association, Health Resources Centre*, 400-1565 Carling Avenue, Ottawa, ON K1Z 8R1, Tel: (613) 725-3769, Fax: (613) 725-9826

## **8) Asking To Listen Resources for Perinatal Care Providers**

Asking to Listen is a set of smoking cessation resources intended primarily for use by health care providers and other individuals who provide care and support to pregnant and postpartum women and their families. It is made up of three components: 1) a training video, 2) a resource booklet, and 3) handouts in the back of the resource booklet. “Perinatal care providers” is our way of describing the great variety of people who offer a wide range of care and support to a diverse group of Canadian women and their families. This booklet is designed to assist perinatal care providers help a women to

deal with the issue of smoking (her own or others’) during pregnancy or postpartum. Our guiding philosophy of intervention; “the more we know about the role that smoking plays in the context of a woman’s life, the more effective we can be in helping her to quit.”

**Language:** English; French

**Region:** Ontario

**Price:** \$19.93 (plus shipping & handling)

*Canadian Public Health Association, Health Resources Centre*, 400-1565 Carling Avenue, Ottawa ON K1Z 8R1, Tel: (613) 725-3769, Fax: (613) 725-9826

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## **Group Programs**

### **1) For Smokers Only**

In six group counselling sessions, students are given the necessary knowledge and skills to assist in current or future attempts to quit smoking. The program uses a personalized approach based on a detailed history and analysis of each participant’s smoking behaviour. Sessions consider personal smoking patterns, triggers and individualized coping strategies. Quitting smoking is not addressed until the fifth session so that participants can concentrate on the preparation stage. The final session offers information on support for staying smoke-free.

**Developed by:** Adolescent Health Counselling Services, Newfoundland Lung Association

**Language:** English

**Target:** Youth – General

**Region:** Newfoundland

**Site:** Community-at-large; Schools

**Cost:** None

**Evaluation:** Process evaluation is ongoing and outcome evaluation is planned.

**Note:** A training workshop is available to individuals who want to offer the program.

Claudette Boyd, *Newfoundland Council on Smoking and Health*, c/o 3 Kenmount Road, St. John's, NF A1B 1W1, Tel: (709) 726-3223, Fax: (709) 726-4302

## 2) Kick the Nic

Kick the Nic is designed to help teens quit the nicotine habit. It seeks to create a positive learning experience for all participants, and to equip them with the skills to continue to make positive changes throughout their lives. The program includes a facilitator's manual which is a step-by-step resource guide consisting of ten 40-minute sessions designed to build awareness, motivation and the necessary skills for teens to quit using tobacco. Each session engages the participant in meaningful activities that lead to, and retain, teen participants. There is also a participant's handbook which is colourful, compact and teen friendly. It has engaging, useful activities that build on the information learned in each session. Kick the Nic celebrates successes, accentuates the positive, emphasizes peer support and focuses on skill-building activities developed by teens for teens. The program was developed with substantial input from teens.

**Developed by:** BC Ministry of Health

**Language:** English

**Target:** Teens

**Region:** Newfoundland

**Cost:** Offered free through schools and community groups

**Evaluation:** In progress

*Department of Health and Community Services,*  
Government of Newfoundland and Labrador,  
P.O. Box 8700, St. John's NF A1C 4J6,  
Tel: (709) 729-1374, Fax: (709) 729-5824

## Counselling Programs

### 1) Clinical Tobacco Intervention (CTI)

British Columbia, Ontario and Nova Scotia have all implemented CTI programs. CTI is the consistent effort in a medical setting to identify all patients, male and female of any age, who smoke; advise and assist them to quit; follow up with them on a continuing basis and offer repeated prevention advice to youth. According to the Canadian Task Force on Periodic Health Examinations, CTI is an "A-rated intervention"—it works and works well. The Newfoundland and Labrador Alliance for the Control of Tobacco (ACT), in cooperation with the Newfoundland and Labrador Medical Association, is in the process of developing a similar CTI plan for this province. It is simple, straightforward and easy to implement and the rewards will be worth the time and effort. Under the CTI programs, there is no cost to the patient or to the physician; all information and packages will be provided by the Alliance.

*Newfoundland and Labrador Alliance for the Control of Tobacco*, Building 801, Pleasantville, P.O. Box 21392, St. John's, NF A1A 5G6, Tel: (709) 753-0079, Fax: (709) 753-0109, E-mail: bsmith@actnf.com



# Nova Scotia

## Self-help Programs

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### 1) Freedom from Smoking in 20 Days and A Lifetime of Freedom from Smoking *Non-fumeur en 20 heures et Je ne fume plus*

*Freedom from Smoking in 20 Days* is a 64-page manual with supplementary materials. Participants analyze personal smoking patterns (days 1 – 7), break this pattern and reduce consumption (days 8 – 15), quit smoking (day 16), and learn how to maintain a smoke-free lifestyle (days 17 – 20). *A Lifetime of Freedom from Smoking* is a 28-page guide that helps recent ex-smokers to remain smoke-free. It includes tips for dealing with nicotine withdrawal and for handling social situations during which cravings for a cigarette may arise. This guide is accompanied by a pocket reminder that can be referred to if a former smoker is tempted to have a cigarette.

**Developed by:** American Lung Association

**Language:** English; French

**Target:** General Population

**Region:** Nova Scotia

**Site:** Community-at-large

**Cost:** \$7 to \$16 (varies with province) for *Freedom from Smoking in 20 Days and A Lifetime of Freedom from Smoking* as a set

**Evaluation:** A 1984 U.S. study of 308 participants indicated a 15% cessation rate one year after receiving the program. In this evaluation, non-responders were counted as having remained smokers.

*Nova Scotia Lung Association*, 17 Alma Crescent, Halifax, NS B3N 3E6, Tel: (902) 443-8141, Fax: (902) 445-2573

### 2) One Step at a Time

It takes time to quit smoking. Most people don't just say, "I'm going to quit smoking now," then quit for good. Most smokers pass back and forth through five stages. The Canadian Cancer Society's One Step at a Time program has materials for women and men who are at various stage of the quitting process. The information has been designed for individuals to go directly to the stage that suits them, and move on from there. Use this information in the way you find the most helpful.

If you don't want to quit smoking, go to (Stage I)

If you are considering quitting, go to Stage II

If you are starting to prepare to quit, go to Stage III

If you are ready to actually quit smoking, go to Stage IV

If you have quit and want to stay smoke-free, go to Stage V

Keep this information around to share with any of your family or friends who may be interested in the information once you're done with it. For a print copy of these resources, contact the Cancer Information Service toll-free at 1-888-939-3333.

**Developed by:** Canadian Cancer Society

**Language:** English; French

**Target:** General Population

**Region:** Canada

**Site:** Community-at-large

*Canadian Cancer Society*, Nova Scotia Division, 5826 South Street, Suite 1, Halifax, NS B3H 1S6, Tel: (902) 423-6183, Fax: (902) 429-6563

### **3) Quit 4 Good**

A highly successful Behavioural Modification Program available from the Lung Association of Nova Scotia. The program is available throughout Nova Scotia and is available in both group and self-help format for all educational institutions as well as the corporate community. The program consists of nine meetings over a two-month period and offers round-the-clock telephone counselling by highly qualified consultants.

**Developed by:** American Lung Association

**Language:** English

**Target:** General Population

**Region:** Nova Scotia

**Site:** Community-at-large

**Cost:** \$150 per person with special pricing for schools, individuals living on low incomes, seniors, health care workers and pregnant or breastfeeding moms

*Nova Scotia Lung Association, 17 Alma Crescent, Halifax, NS B3N 3E6, Tel: (902) 443-8141, Fax: (902) 445-2573; E-mail: info@ns.lung.ca*

### **4) Freedom From Smoking for You and Your Baby**

A self-help program for the pregnant mom available from the Lung Association of Nova Scotia. The program comes complete with an audio cassette tape and is available throughout Nova Scotia. There is no cost for the program itself, although recipients are asked to cover postage.

**Developed by:** American Lung Association

**Language:** English

**Target:** Residents of Nova Scotia

**Site:** Community-at-large

**Cost:** Unknown

*Nova Scotia Lung Association, 17 Alma Crescent, Halifax, NS B3N 3E6, Tel: (902) 443-8141, Fax: (902) 445-2573, E-mail: info@ns.lung.ca*

### **5) Quitting...that's my choice!**

This self-help program is a 20-page, 8" by 6" interactive workbook designed specifically for women. In addition to looking at the health effects of smoking and other reasons why women would want to quit, participants are helped to assess their readiness and motivation to quit and also to build self-support and external support for quitting. A smoking "profile" is developed so that the participant can become more aware of when, where and why she smokes. Information and tips are given about managing withdrawal symptoms, weight and stress. Following quit day, participants work on strategies for coping with triggers to smoke and staying smoke-free.

**Developed by:** Canadian Cancer Society, Nova Scotia Division; Heart Health Nova Scotia

**Language:** English

**Target:** Women – General

**Region:** Nova Scotia

**Site:** Community-at-large

**Cost:** None

**Evaluation:** This guide was well received by participants during pilot tests and also when used as a main resource in several group smoking cessation programs for women.

*Canadian Cancer Society, Nova Scotia Division, 5826 South Street, Suite 1, Halifax, NS B3H 1S6, Tel: (902) 423-6183, Fax (902) 429-6563*

## Group Programs

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### 1) Student Quit and Win

Student Quit and Win is a voluntary program offered to high school students who smoke at least one cigarette a day and who have been smoking for at least three months. Its purpose is to reduce the number of senior high school students who smoke by providing an opportunity for them to make a quit attempt with group and individual support and incentives. The objective is for 20% of students who make a quit attempt at meeting #6 to remain smoke-free for at least four weeks.

**Developed by:** Public Health Services, Central Regional Health Board (1994)

**Language:** English

**Target:** Youth (high school students)

**Evaluation:** Last year, 10 of the 18 high schools in the Halifax Regional Municipality and West Hants were able to implement Student Quit and Win. The results for all students who entered the program, compared to those who stayed in the program and made a quit attempt at meeting #6, follow:

### *Students Who Entered Student Quit and Win*

56% finished the 10-session program.

24% were smoke-free at least four weeks.

49% were smoke-free or had cut down the amount smoked by half or more.

### *Students Who Made a Quit Attempt at Meeting #6*

68% of students were still in the program on Quit Day (meeting #6).

79% of students present made a quit attempt.

44% remained smoke-free for at least four weeks (Objective was 20%).

72% of smokers present at meeting #6 quit or cut down by half or more.

**Contact:** Sharon MacIntosh, *Public Health Services Central Regional Health Board*, 201 Brownlow Avenue, Unit 4, Dartmouth, NS B3B 1W2, Tel: 1-902-481-5881, Fax: (902) 481-5803, E-mail: phs\_school@crhb.ns.ca





# Prince Edward Island

## Self-help Programs

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### 1) Get On Track – A Guide to Help You Quit Smoking

This self-help booklet is designed to assist people in quitting smoking by including information on the following topics:

- Benefits of Quitting
- Why Are You Still Smoking?
- Taking Action
- Staying on Track
- Getting off Track

**Developed by:** Canadian Lung Association

**Language:** English

**Target:** Smokers

**Region:** Prince Edward Island

**Site:** Community-at-large

**Cost:** Approx. \$5 (varies with province)

*P.E.I. Lung Association*, 1 Rochford Street, Suite 2, Charlottetown, PE C1A 9L2, Tel: (902) 892-5957, Fax: (902) 368-7281, E-mail: info@pei.lung.ca

### 2) Tobacco-Free Teens Program

The Tobacco-Free Teens program is designed to assist young people in quitting tobacco use before it becomes a long-term addiction. It is planned as an eight-session program that extends over four weeks, with each class lasting approximately 50 minutes. The goal of the Tobacco-Free Teens Program is to empower youth to examine their tobacco use and provide them with skills for cessation. The four main objectives of the program are as follows:

- 1) increase motivation to quit using tobacco,
- 2) increase skills for quitting,

- 3) increase the likelihood of not using tobacco permanently, and
- 4) increase the likelihood of using positive health habits in place of tobacco use.

**Developed by:** American Lung Association of Minnesota

**Language:** English

**Target:** High School-Age Smokers

**Region:** Prince Edward Island

**Site:** High Schools

**Cost:** \$180

**Note:** Instructors must Attend A Facilitator Training Program

*P.E.I. Lung Association*, 1 Rochford Street, Suite 2, Charlottetown, PE C1A 9L2, Tel: (902) 892-5957, Fax: (902) 368-7281, E-mail: info@pei.lung.ca

### 3) Individualized Smoking Cessation Self- Help Kit

This kit of self-help smoking cessation information is provided to people who want to quit smoking. After a discussion with the individual, the kit is personalized with information based on the needs of that particular client.

**Developed by:** P.E.I. Lung Association

**Language:** English

**Target:** Adult Smokers

**Region:** P.E.I.

**Site:** Community-at-large

**Cost:** No cost

#### **4) Group Presentation Entitled “How To Quit Smoking”**

This hour-long presentation is available to any group (6 or more people) on P.E.I. who are interested in quitting smoking. Presentation includes:

- all the good reasons for quitting;
- discussion of physiological, psychological and behavioural factors that keep a smoker smoking;
- detailed explanation of various methods of smoking cessation available today, including how each method is used, the success and cost of each, as well as the side effects and precautions; and
- how to avoid smoking triggers and stay smoke-free after you have quit.

**Developed by:** P.E.I. Lung association

**Language:** English

**Target:** Groups Who Are Interested in Quitting Smoking

**Region:** P.E.I.

**Site:** Community-at-large

**Cost:** No cost

*P.E.I. Lung Association*, 1 Rochford Street, Suite 2, Charlottetown, PE C1A 9L2, Tel: (902) 892-5957, Fax: (902) 368-7281, E-mail: info@pei.lung.ca

## **Counselling Programs**

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### **1) Born Free**

On referral through the P.E.I. Reproductive Care Program, pregnant women are offered the opportunity to participate in the Born Free smoking cessation program. Along with advice from the physician, participants receive support from public health nurses through telephone calls and home visits. The Lung Association's *Freedom from Smoking for You and Your Baby* self-help guide is a key component of the program. Additional information is provided in a kit format.

**Developed by:** Prince Edward Island Department of Health and Social Services

**Language:** English

**Target:** Women – Pregnant

**Region:** Prince Edward Island

**Site:** Community-at-large; Health Care Settings

**Cost:** \$7 for the *Freedom from Smoking for You and Your Baby* guide

**Evaluation:** An evaluation of the Born Free program is currently in progress.

(Contact your local public health nurse for more information.)

# New Brunswick

## Self-help Programs

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### 1) In Control

This program consists of a videotape (VHS), a participant's guide and an audio tape. The video component of the program is designed to be watched in 9-minute segments each day for 13 days. Information is provided on the reasons why people smoke, how to quit and strategies for coping with difficult situations that could lead to relapse. The audio tape discusses motivation to quit and provides relaxation exercises. This program can be easily adapted for a group smoking cessation program in the workplace or other settings.

*Developed by:* American Lung Association

*Language:* English

*Target:* General Population

*Region:* New Brunswick

*Site:* Community-at-large; Workplaces

*Cost:* Varies with province

*New Brunswick Lung Association,*  
65 Brunswick Street, Fredericton, NB E3B 1G5,  
Tel: (506) 455-8961, Fax: (506) 462-0939

### 2) Welcome Wagon

Self-help program that includes a 32-page guide, poster-size progress calendar and special exercise chart designed for pregnant women. The Guide includes quizzes, activities and information to help participants discover why they smoke and how to prepare for quitting.

*Developed by:* NB Lung Association

*Language:* English

*Target:* Pregnant women and new moms

*Region:* New Brunswick

*Site:* Community-at-large

*New Brunswick Lung Association,*  
65 Brunswick Street, Fredericton, NB E3B 1G5,  
Tel: (506) 455-8961, Fax: (506) 462-0939

### 3) Freedom from Smoking for You and Your Baby

This 10-day self-help program includes a 32-page guide, a poster-size progress calendar, a special exercise chart designed for expectant mothers and an audio cassette featuring exercise and relaxation techniques. The guide uses quizzes, activities and information to help participants discover why they smoke, why they want to quit and how to prepare for quit day. Topics discussed include breaking smoking patterns, weight control, how to be assertive and coping strategies for dealing with urges to smoke. The last section of the guide is about maintaining the decision to quit before and after the baby is born.

*Developed by:* American Lung Association

*Language:* English

*Target:* Women – Pregnant

*Region:* New Brunswick

*Site:* Community-at-large

*Cost:* Approx. \$7 to \$10

*New Brunswick Lung Association,*  
65 Brunswick Street, Fredericton, NB E3B 1G5,  
Tel: (506) 455-8961, Fax: (506) 462-0939

#### **4) Freedom from Smoking for You and Your Family**

This 54-page guide to smoking cessation discusses how to overcome roadblocks to quitting, leads the participant through a nicotine “fading” program, and provides tips on remaining smoke-free. Emphasis is placed on participants understanding their day-to-day smoking behaviour, learning how to replace cigarettes with healthy activities, coping with the first few weeks after quitting and what to do if they start to smoke again. New non-smokers are encouraged to remember their reasons for becoming smoke-free, reward themselves and help others to quit smoking.

**Developed by:** American Lung Association

**Language:** English

**Target:** General Population

**Region:** New Brunswick

**Site:** Community-at-large

**Cost:** Approx. \$5 to \$10

**Evaluation:** A 1990 evaluation of this program by researchers at the Fox Chase Cancer Centre and the University of North Carolina showed an 11% cessation rate at the six-month follow-up interval. This was felt to compare favourably with current studies of self-help programs. About three quarters of participants in the evaluation had high school education or less and on average smoked one pack of cigarettes a day. Cessation rates were determined using mailed questionnaires and telephone interviews.

*New Brunswick Lung Association,*  
65 Brunswick Street, Fredericton, NB, E3B 1G5,  
Tel: (506) 455-8961, Fax: (506) 462-0939

#### **5) Freedom from Smoking in 20 Days and A Lifetime of Freedom from Smoking *Non-fumeur en 20 jours et Je ne fume plus***

*Freedom from Smoking in 20 Days* is a 64-page manual with supplementary materials. Participants analyze personal smoking patterns (days 1 – 7), break this pattern and reduce consumption (days 8 – 15), quit smoking (day 16), and learn how to maintain a smoke-free lifestyle (days 17 – 20). *A Lifetime of Freedom from Smoking* is a 28-page guide that helps recent ex-smokers to remain smoke-free. It includes tips for dealing with nicotine withdrawal and for handling social situations in which cravings for a cigarette arise. This guide is accompanied by a pocket reminder that can be referred to if a former smoker is tempted to have a cigarette.

**Developed by:** American Lung Association

**Language:** English; French

**Target:** General Population

**Region:** New Brunswick

**Site:** Community-at-large

**Cost:** \$7 to \$16 (varies with province) for *Freedom from Smoking in 20 Days* and *A Lifetime of Freedom from Smoking* as a set.

**Evaluation:** A 1984 U.S. study of 308 participants indicated a 15% cessation rate one year after receiving the program. In this evaluation, non-responders were counted as having remained smokers.

*New Brunswick Lung Association,*  
65 Brunswick Street, Fredericton, NB E3B 1G5,  
Tel: (506) 455-8961, Fax: (506) 462-0939

## Group Programs

### 1) Freedom from Smoking Group Course *Non-fumeur en 5 jours*

The format, length and group size for this course varies with province. These are multi-component behavioural-based group courses for the community or the workplace. The programs generally include self-monitoring, relaxation training, developing a cessation strategy, weight management, problem solving, dealing with recovery symptoms, and maintaining the decision to quit. In addition to a program for adults, New Brunswick Lung Association offers an adaptation of this program for teens.

**Developed by:** Individual Lung Associations

**Language:** English; French

**Target:** General Population; Youth – General

**Region:** New Brunswick

**Site:** Community-at-large; Health Care Settings; Workplaces

**Cost:** Varies with province

**Evaluation:** The American Lung Association studied 494 smokers attending 42 Freedom from Smoking Clinics in western New York State. While the clinics studied are not necessarily the same as the programs in this entry, the results of the evaluation may be representative. A cessation rate of 29% was reported one year after completion of the clinics. The evaluation was based on telephone interviews and is published as: Rosenbaum, P. and R. O'Shea, "Large-Scale Study of Freedom from Smoking Clinics—Factors in Quitting," *Public Health Reports*, Vol. 107, No. 2, April 1992.

In New Brunswick, this program is called Freedom from Smoking in 5 Days and has a "train the trainer" component. As well, the program has been aired on television throughout New Brunswick annually in February.

*New Brunswick Lung Association,*  
65 Brunswick Street, Fredericton, NB E3B 1G5,  
Tel: (506) 455-8961, Fax: (506) 462-0939

### 2) Fresh Start Quit Smoking Program

This 16-hour group program is designed to help smokers make the decision to quit and to support their efforts to stay smoke-free. The program format includes volunteer facilitators, group discussion and informative videos. Participants look at their reasons for smoking and learn coping skills, relaxation techniques, weight management and strategies for staying off cigarettes. Short-term and long-term health effects of smoking are also discussed. Participants are encouraged to set individual quit dates and to develop support networks and strategies for overcoming obstacles as they make a "fresh start."

**Developed by:** Canadian Cancer Society, British Columbia and Yukon Division

**Language:** English

**Target:** General Population

**Region:** New Brunswick

**Site:** Community-at-large; Health Care Settings; Workplaces

**Cost:** Varies with province

**Evaluation:** In progress Note: Adapted from the Fresh Start Smoking Cessation Course material developed by the Anti-Cancer Council of Victoria, Australia.

*Canadian Cancer Society, New Brunswick Division,*  
133 Prince William Street, P.O. Box 2089,  
Saint John, NB E2L 3T5, Tel: (506) 634-6272,  
Fax (506) 634-3808



# Quebec

## Self-help Programs

### Répertoire québécois des ressources favorisant la réduction du tabagisme

This resource book gives a general description of all cessation and prevention programs/services in the province of Quebec. It also provides useful information on individual and group programs, conferences, workshops, intervention services, consultation, documents, regional resource guides, posters, promotional articles, intervention kits, video and audio cassettes, telephone services on cessation and prevention programs and Web sites. This resource information is divided by region, theme (prevention, cessation and information/protection by non-smokers), types of resources and target population. This document was developed by: Le conseil québécois sur le tabac et la santé and financed by Health Canada.

**Note:** This inventory book is available in French only.

*Conseil québécois sur le tabac et la santé,*  
5310 rue St. Denis, Montréal, QC H2J 2M3,  
Tel: (514) 948-5317, Fax: (514)-948-4582,  
E-mail: cqts@netcom.ca

### 1) Non-Smoker Diploma

#### *Défi 24 heures et Défi progressif*

The 24-hour non-smoker diploma kit is designed to encourage smokers to try quitting smoking for one day. Two key components of the program are an agreement to quit smoking for 24 hours that is signed by both the participant and a family member or friend; and a diploma for going successfully through a full day without having a cigarette. Messages on the diploma encourage the participant to continue to stay smoke-free one day at a time for the next 12 months at which point a diploma can be obtained for being a non-smoker. The kit also contains some information on nicotine addiction, withdrawal symptoms and benefits of quitting

as well as tips for quitting and stickers. A second kit for people who want to try to quit smoking permanently has a similar format but emphasizes progressively maintaining the decision to be smoke-free one day at a time. The diploma in this kit is for becoming a non-smoker and provides encouragement to stay smoke-free for a 12-month period following quit day.

**Developed by:** Association pulmonaire du Québec

**Language:** English; French

**Target:** General Population

**Region:** Quebec

**Site:** Community-at-large

**Cost:** None

*Association pulmonaire du Québec,*  
800, boul. Maisonneuve Est, bureau 800,  
Montréal, QC H2L 4L8, Tel: (514) 287-7400,  
Fax: (514) 287-1978, Toll-free: 800-295-8111

### The Lung Association of Quebec offers the following smoking cessation services:

- The Quit Line: Ligne Poumon – 9
- 1-888-768-6669 ext # 232

A free telephone service on smoking cessation staffed by health professionals, specializing in tobacco addiction. Specific services include:

- advice and assistance to quit smoking,
- reference to local programs/specialists, and
- information on tools available to help smokers quit.

### Additional services provided by the Lung Association include:

- provision of group smoking cessation on work premises,

- training for health professionals in smoking cessation,
- a catalogue of non-smoking advertisements,
- personalized interventions, and
- support for employees implementing workplace non-smoking policies.

*Association pulmonaire du Québec,*  
800, boul. Maisonneuve Est, bureau 800,  
Montréal, QC H2L 4L8, Tel: (514) 287-7400,  
Fax: (514) 287-1978, Toll-free: 800-295-8111

## **2) Yes, I Quit! Oui, j'arrête!**

This self-help guide is in the form of an eight-page calendar which presents information in comic-strip form. The text is presented in short, easy-to-read sentences describing the causes and consequences of tobacco addiction. The personal benefits of quitting, including increased self-esteem and self-confidence, are emphasized. Relapses are downplayed to maintain self-respect. To facilitate the cessation process, the program includes stickers, a cigarette counter, a piggy bank, and a "wheel" that provides practical advice on how to build motivation and willpower.

**Developed by:** Habitudes de vie/Santé du coeur,  
Direction de la santé publique de Montréal-Centre

**Language:** English; French

**Target:** Women

**Region:** Canada

**Site:** Community Settings

**Cost:** \$8 (includes taxes)

**Evaluation:** The guide underwent extensive focus testing during its development. An evaluation of 28 Francophone women participants, 75% of whom had not completed secondary school, was carried out one month after they had completed the program. Results indicated that users were very satisfied with the content and format of the guide. While none of those interviewed had stopped smoking, 15 participants reported that they had reduced their tobacco consumption.

The evaluation is published as: O'Loughlin, J., G. Lampron, G. Sacks-Silver. "Income, Functionally Illiterate Women: A Pilot Study," *Canadian Journal of Public Health*, Vol. 81, No. 6, December 1990, pp. 471-472.

*Habitudes de vie/Santé du coeur, Direction de la santé publique de Montréal-Centre,*  
4835, avenue Christophe-Colomb, niveau 1,  
Montréal, QC H2J 3G8), Tel: (514) 528-2400,  
Fax: (514) 528-2512

## **3) Jeunes sans fumer**

This is a peer-assisted group smoking education and cessation program to be used in CEGEP and university settings. Participants are young adult smokers in the 16- to 21-year-old age group. The program is structured into four interrelated components: training and participation; awareness and education; motivation and prevention; and cessation interventions and relapse prevention. An English version of this program is available on request.

*Centre Vivre mieux sans fumer, 274, rue des Forêts,*  
St-Luc, QC J2W 2E4, Tel: (514) 849-3804,  
Fax: (450) 349-4023

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## **Group Programs**

### **1) Clinique d'aide aux fumeurs de l'Hôpital Laval**

This program uses an approach that is adapted to the individual smoker's needs. Participants have an initial meeting with a physician to assess their needs and determine a personalized smoking cessation plan. Based on the initial assessment, this plan can include a group smoking cessation program, individual sessions, nicotine replacement therapy, nutrition, fitness and a support group. The group smoking cessation program consists of six meetings which all participants attend and a second individual meeting with a health professional.

**Developed by:** France Paradis, M.D. and Mary Delafield, M.D.



**Language:** French

**Target:** General Population

**Region:** Montréal and surrounding areas,

**Site:** Health Care Settings

**Cost:** \$100 per participant plus \$20 for additional individual sessions.

**Evaluation:** An evaluation plan is being developed. A follow-up with all participants is routinely done by telephone three months and six months after the initial meeting.

*Clinique d'aide aux fumeurs de l'Hôpital Laval, 2725, chemin Sainte-Foy, Sainte-Foy, QC G1V 4G5, Tel: (418) 656-4594*

## **2) The Guide “Yes, I quit! Workshops” Le Guide “Ateliers, Oui j'arrête!”**

The guide is designed to help smokers successfully quit smoking. Based on a series of six workshops, the non-professional group leader can facilitate exploration of the main themes of smoking cessation: motivation, physical and psychological dependence, weight management and stress. The importance of group support is emphasized throughout the program.

**Developed by:** Habitudes de vie/Santé du coeur, Direction de la santé publique de Montréal-Centre

**Language:** English; French

**Target:** General Population Groups

**Region:** Canada

**Site:** Community-at-large; Health Care Settings; Workplaces

**Cost:** \$28 (includes taxes)

**Evaluation:** The program was evaluated over a four-year period. Follow-up telephone interviews with 104 participants at two weeks and six months after completion of the program showed self-reported quit rates of 27% and 16%, respectively. Targeted

users of the program were involved in all aspects of the development and implementation approach for the workshops.

**Note:** Participants' materials include the *Yes, I Quit!* guide which is used on a self-help basis.

*Habitudes de vie/Santé du coeur, Direction de la santé publique de Montréal-Centre, 4835, avenue Christophe-Colomb, niveau 1, Montréal, QC, H2J 3G8, Tel: (514) 528-2400, Fax: (514) 528-2512*

## **3) Living Better Without Smoking Programme Vivre mieux sans fumer**

This is an eight-session program over eight weeks given by experienced group leaders. Participants are provided with the necessary knowledge and skills to learn new behaviour aimed at an improved quality of life. The topics addressed include physical, psychological and sociological dependence on smoking, handling urges to smoke, reducing stress, healthy nutrition, and dealing with emotions. The group meets one time at work during the program. Participants are followed up one month after the last session.

**Developed by:** Centre Vivre mieux sans fumer

**Language:** English; French

**Target:** General Population

**Region:** Quebec

**Site:** Health Care Settings; Workplaces

**Cost:** \$2,400 for workplace group programs (8 to 12 participants)

**Evaluation:** This program was independently evaluated in 1986 by researchers at the University of Montréal. The success rate indicated by the study of 350 participants was 60.4% after one year.

*Centre Vivre mieux sans fumer, 274, rue des Forêts, St-Luc, QC J2W 2E4, Tel: (514) 849-3804, Fax: (450) 349-4023*

## **Counselling Programs**

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### **1) Clinique d'aide aux fumeurs de l'Hôpital Laval**

This program uses an approach that is adapted to the individual smoker's needs. Participants have an initial meeting with a physician to assess their needs and determine a personalized smoking cessation plan. Based on the initial assessment, this plan can include an individual program, a group smoking cessation program, nicotine replacement therapy, nutrition, fitness and a support group. The individual program consists of four 45-minute sessions with a health professional. Additional counselling sessions are available if the participant would like more support in quitting or staying smoke-free.

***Developed by:*** France Paradis, M.D. and Mary Delafield, M.D.

***Language:*** French

***Target:*** General Population

***Region:*** Quebec

***Site:*** Health Care Settings

***Cost:*** \$100 for the counselling program plus \$20 for additional counselling sessions

***Evaluation:*** An evaluation plan is being developed. A follow-up with all participants is routinely done by telephone three months and six months after the initial meeting.

*Clinique d'aide aux fumeurs de l'Hôpital Laval,  
2725, chemin Sainte-Foy, Sainte-Foy, QC,  
G1V 4G5, Tel: (418) 656-4594*

# Ontario

## Self-help Programs

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### 1) Caring for the Caregiver: A Holistic Approach to Tobacco Cessation

This comprehensive self-help resource is written specifically for women who are caring for children or others in their home. The first half of this 90-page booklet takes the reader through the progressive stages of change that lead to quitting smoking and staying smoke-free. In an unthreatening but factual manner, information is provided about why women continue to smoke, health risks as well as unpleasant personal consequences of smoking and benefits of quitting. Readers are given practical strategies that include preparing for quit day, increasing partner support, dealing with withdrawal symptoms and weight control. The section on tobacco concludes with a discussion about second-hand smoke and providing a smoke-free home environment. The second half of the booklet helps women improve other aspects of their lives, including setting personal goals, effective time management, physical and emotional well-being, problem solving and developing a support network. Cartoon drawings and a friendly interactive style are used throughout the booklet.

**Developed by:** Child Care Providers Association

**Language:** English; French

**Target:** Women – General

**Region:** Canada

**Site:** Community-at-large

**Cost:** \$10 per book for 1 to 9 books; \$9 per book for 10 to 19 books; \$8 per book for 20 or more (all prices include shipping)

**Evaluation:** No formal evaluation. The concepts and contents of the booklet were developed in consultation with an advisory committee comprising representatives from regulated and unregulated home child care associations, community organizations and Health Canada.

Home Child Care Publications, *Child Care Providers Association*, 2085 Alton Street, Ottawa, ON K1G 1X3, Tel: (613) 731-1991, Fax: (613) 731-7975

### 2) Stopping When You're Ready

This self-help program for pregnant women focuses on the various stages of readiness to quit smoking and the specific concerns of expectant mothers. Packaged as a 6 1/2" by 9" kit, the program consists of five booklets with supporting materials. Each of the five booklets addresses a different stage of readiness to quit—from not thinking about quitting all the way to maintaining the decision to stay an ex-smoker. A brief quiz helps the pregnant smoker to determine her stage of readiness and directs her to the appropriate booklet. The supporting materials include handy one-page inserts on the health effects of smoking and benefits of quitting for both mother and baby, ways to cope with urges to smoke, how to deal with relapse and "how to help" cue cards for significant others.

**Language:** English

**Target:** Women – Pregnant

**Region:** Canada

**Site:** Community-at-large; Health Care Settings

**Cost:** \$3.74

**Evaluation:** In progress

**Note:** A brief guide for using this kit is available to service providers.

*Program Training and Consultation Centre,  
c/o Ottawa-Carleton Health Department,  
495 Richmond Road, Ottawa, ON K2A 4A4,  
Tel: (613) 724-4122 ext. 3420, Toll-free (Ontario  
only): 1-800-363-7822, Fax: (613) 724-4116*

### **3) PTCC Self-Help and Group programs**

The Program Training and Consultation Centre (PTCC) provides training and consultation services to enhance the capacity of Ontario communities to implement effective community-based tobacco use reduction strategies. The PTCC maintains a roster of Community Consultants in Tobacco who are available for on-site consultation support in program planning and implementation. Training and consultation supports cover a variety of topics, including program supports for the Ontario Tobacco Control Act, environmental tobacco smoke and by-law development, strategic planning, smoking cessation and stages of change, implementing community awareness campaigns, reaching the hard-to-reach tobacco user, teen smoking cessation, and women-centred smoking cessation, environmental tobacco smoke in home environments.

**Developed by:** Program Training and Consultation Centre

**Language:** English; French

**Target:** General Population

**Region:** Ontario

**Site:** Community-at-large; Health Care Settings

*Program Training and Consultation Centre,  
495 Richmond Road, Ottawa, ON K2A 4A4,  
Tel: (613) 724-4122 ext. 3420, (Ontario only):  
1-800-363-7822, Fax: (613) 724-4116; Web  
site: [www.ptcc.on.ca](http://www.ptcc.on.ca)*

### **4) Women and Smoking**

This easy-to-read, 32-page guide discusses why women start smoking and continue to smoke, the health hazards of smoking (particularly as they relate to women's health issues), the problems

women face in quitting smoking, and the targeting of women by tobacco advertisers. The guide is aimed at women contemplating smoking cessation and encourages this process, rather than leading participants through a step-by-step cessation program. Strategies for cutting down the amount smoked or quitting entirely are presented. The guide has been specifically designed for women on low incomes to use on a self-help basis or as the main resource for a self-help group program.

**Developed by:** AWARE: Action on Women's Addictions – Research and Education

**Language:** English

**Target:** Women

**Region:** Canada

**Site:** Community-at-large; Health Care Settings

**Cost:** Guide is free (\$2.50 shipping & handling), call for bulk rates or larger orders.

**Evaluation:** The guide was developed with the participation of a focus group of 20 sole support mothers on low income, all of whom smoked. An evaluation during the pilot project involved two groups of women who used the manual at home for approximately eight weeks, and two groups of women who used the manual as part of an eight-week self-help group program. Child care was provided for the group programs which were held in central locations. The evaluation looked at changes in knowledge about women and smoking, the impact of the self-help support groups, and the suitability of the guide itself. The results indicated an increased level of knowledge, a high value for the support group approach, and that the guide was effective both in contents and design.

*AWARE: Action on Women's Addictions – Research and Education, P.O. Box 86, Kingston, ON K7L 4V6,  
Tel: (613) 545-0117, Fax: (613) 545-1508*

## 5) Break On Through

A resource package that provides materials and support tools that will raise awareness around the issue of adolescent smoking and will further provide the support necessary to work with youth in this area. The resource includes a Facilitator's Guide, activities and materials for school staff and students and activity templates.

**Developed by:** Centre for Applied Health Research, University of Waterloo in partnership with the Community and Health Promotion Branch Ontario Ministry of Health and Long Term Care in 1997. The resource is available from the Program Training and Consultation Centre, c/o Ottawa-Carleton Health Department, 495 Richmond Road, Ottawa, ON K2A 4A4, Tel: 1-800-363-7822, (Ontario) (613) 722-2242, Fax: (613) 724-4116

## 6) How Not To Smoke

A Help book for women who want to quit smoking. "How Not to Smoke" is a video and workbook designed to help women who want to quit smoking. Designed specifically for low income, low literacy women between the ages of 18 and 35 years. How Not To Smoke is an excellent resource for any woman who wants to "kick the habit." The full package includes a 25-minute video, developed in 4- to 5-minute segments which match the exercises in the workbook. A cardboard package holds the video workbook and a fridge magnet. Additional copies of the workbook and magnet are available. Ideal for independent or group use, How Not to Smoke is a must for any tobacco-reduction program!

**Language:** English; French

**Region:** Ontario

**Price:** \$24.95 (plus shipping & handling)

*Canadian Public Health Association, Health Resources Centre, 400-1565 Carling Avenue, Ottawa, ON K1Z 8R1, Tel: (613) 725-3769, Fax: (613) 725-9826*

## 7) Asking to Listen

Resources for Perinatal Care Providers Asking to Listen is a set of smoking cessation resources intended primarily for use by health care providers and other individuals who provide care and support to pregnant and postpartum women and their families. It is made up of three components: 1) a training video, 2) a resource booklet, and 3) handouts in the back of the resource booklet. "Perinatal care providers" is our way of describing the great variety of people who offer a wide range of care and support to a diverse group of Canadian women and their families. This booklet has been organized to try to meet the needs of perinatal care providers who are helping women deal with the issue of smoking (her own or others) during pregnancy or postpartum. Diverse people have diverse needs. We have organized this resource booklet to try to meet as many of those needs as possible under one guiding philosophy of intervention: The more we know about the role that smoking plays in the context of a woman's life, the more effective we can be in helping her to quit.

**Language:** English; French

**Region:** Ontario

**Price:** \$19.93 (plus shipping & handling)

*Canadian Public Health Association, Health Resources Centre, 400-1565 Carling Avenue, Ottawa, ON K1Z 8R1, Tel: (613) 725-3769, Fax: (613) 725-9826*

## 8) Anirsaattiarniq – Breathing Easy

The goals of this project are to reduce and prevent smoking in the Inuit community and to build a smoke-free culture. Project activities will focus on four groups: Inuit children, youth, pregnant women and families. The Pauktuutit Inuit Women's Organization will develop and implement a tobacco education kit to be used in schools and a tobacco cessation kit to be used in communities. A video on the health effects of tobacco use and smoking cessation methods will also be produced. All of these resources will be culturally appropriate for the Inuit community.

*Pauktuutit Inuit Women's Organization,*  
192 Bank Street, Ottawa, ON K2P 1W8,  
Tel: (613) 238-3977, Fax: (613) 238-1787

### **9) Kick Butt for 2 / Maman, on écrase**

The aim of this project is to develop and implement a comprehensive, client-sensitive tobacco reduction/cessation program for pregnant teens and young single parents in the Ottawa-Carleton area. Kick Butt for 2 will focus on smoking prevention, smoking reduction and smoking cessation as well as protection of non-smokers, especially children, from second-hand smoke. Programs will be offered in both English and French. The approaches used will be designed to help clients progress through the stages of readiness to change in relation to their choices about their smoking behaviour. An instructional video and a professional development workshop will be produced and made available for professional conferences and to other interested groups.

Nancy MacNider, *Young Single Parent Support Network*, c/o 659 Church Street, Ottawa, ON K1K 3K1, Tel: (613) 749-2491

### **10) Sacred Plant, Sacred Ways**

This project will design and develop a culturally appropriate tobacco prevention, cessation and protection program for Aboriginal Peoples living in urban centres. The cultural component of the program will be developed using the knowledge and wisdom of elders to rediscover the traditional sacred uses of tobacco in ceremonies, in spiritual communication and as a valuable gift to show appreciation and respect. The concepts and approaches used in the program will also be based on an analysis of the reasons why existing cessation and prevention programs have not been effective for urban Aboriginal Peoples.

*National Association of Friendship Centres,*  
396 Cooper Street, Suite 204, Ottawa, ON K2P 2H7, Tel: (613) 563-4844,  
Fax: (613) 594-3428

### **11) Smoking Cessation and Schizophrenia**

Smoking Cessation and Schizophrenia is a group-based smoking cessation program tailored to individuals with severe, persistent mental illnesses such as schizophrenia. The program manual provides background information for leaders as well as a session-by-session curriculum based on principles of psychiatric rehabilitation and the stages of change model for smoking cessation. Drawing from and further developing existing cessation resources, the handbook includes group activities as well as guidelines for individual work and follow-up supports. Also available is a 23-page support booklet, *Smoking people with mental health problems*, designed for those who are interested in helping a person with serious mental health problems to change smoking habits. A 10-minute video promotion called "Smoke Busters Program" will be available in 2001.

Dr. Joel Goldberg, *Hamilton Program for Schizophrenia*, 102-350 King Street East, Hamilton, ON L8N 3Y3,  
Tel: (905) 525-2832, Fax: (905) 546-0055,  
E-mail: jgoldber@fhs.csu.McMaster.ca

### **12) Smoking Cessation/Reduction Program within a Chemical Dependency Centre**

This project aims to provide an opportunity for people who are seeking help for other substance addictions to include tobacco use cessation or reduction in their recovery process. A training manual that incorporates the stages of change model for smoking cessation will be produced for counsellors in the chemical dependency field. For the early stages of change, the focus will be on providing information and consciousness raising through education and group discussion sessions. In the action and maintenance stages, cessation or reduction strategies will be developed for individual and group interventions that involve addiction counsellors, stress management counsellors, dietitians and medical staff.

*The Donwood Institute*, 175 Brentcliffe Road, Toronto, ON M4G 3Z1, Tel: (416) 425-3930,  
Fax: (416) 425-7896

### 13) A Stop Smoking Intervention for Women

A self-help smoking intervention in the format of a video and accompanying print resource has been developed for women with lower education and low literacy skills. The main goals of this intervention are to increase participants' awareness of the stages of behavioural change and to help empower them in moving toward becoming smoke-free. Potential users were consulted to help determine the scope and contents of the video in terms of key issues, best messages and motivators, barriers and effective intervention strategies. Experts on literacy issues were also consulted throughout the project and there was extensive focus testing of concepts and presentation styles with both smokers and ex-smokers in the target group.

*Toronto Public Health Ottawa, ON K1Z 8R1,*  
Tel: (613) 725-3769, (416) 395-7600,  
Fax: (613) 725-9826, E-mail: [hrc/cds@cpha.ca](mailto:hrc/cds@cpha.ca),  
Web site: [www.city.toronto.on.ca/health/index.htm](http://www.city.toronto.on.ca/health/index.htm)

### 14) TeenNet: Using Information Technology to Engage Teens in Smoking Prevention and Cessation

The TeenNet Project led by Dr. Harvey Skinner works with a network of collaborating partners directly involved in education and health promotion with youth. The goal of TeenNet is to generate new knowledge and develop practical tools for engaging youth in health promotion using interactive technology. Underscoring individual choice by teens and the exploration of options regarding health behaviour, TeenNet takes a "teens in action" approach that involves young people from diverse backgrounds in all stages of program development and dissemination. TeenNet's Web site for youth, CyberIsle (<http://www.cyberisle.org>), was initially launched in 1997. In 2000, the Smoking Zine was launched. The Smoking Zine is an interactive smoking prevention and cessation resource (magazine). It includes a logout feature so that youth can complete the five stages of the Zine when and where they want. To ensure privacy is protected, it does not use cookies (files placed on

your computer by the Web site that you've visited to track user information). As youth complete the Zine, they are provided with personalized feedback, and at the end are presented with a summary of their responses. Youth interested in quitting are provided with a comprehensive smoking cessation component. By placing the Zine on the CyberIsle Web site, TeenNet addresses smoking within the context of other health and social issues—reflecting the reality of youths' lives.

TeenNet is currently developing a parallel Web site for practitioners (PractitionerNet: <http://www.PractitionerNet.org>). Once complete, PractitionerNet will provide resources and education modules on how to use the Web (in particular the Smoking Zine) for adolescent health.

**Contact:** Oonagh Maley – TeenNet Project Coordinator, *Department of Public Health Sciences, Faculty of Medicine, Room 9, McMurrich Building, 12 Queen's Park Crescent West, University of Toronto, Toronto, ON M5S 1A8,*  
Tel: (416) 978-7543, Fax: (416) 978-2087

### 15) "You Can Make A Difference" A Partnership to Facilitate Smoking Cessation Among 15- to 19-Year-Old Females: A Collaborative Community-based Leadership Model

This project is designed to help community leaders in the health, education and recreation fields develop a mentoring program to positively influence young women in their decisions about smoking. The program materials will consist of a 20-page facilitator's guide, a 15-minute VHS video and one-page summaries of the main topics covered in the video. The facilitator's guide will contain sections on identifying appropriate youth and adult mentors for adolescent female smokers; motivating, educating and supporting potential mentors; and ways to use the video and one-page information sheets. Topics addressed in the video include the importance of mentors and community involvement in the smoking cessation process, mentoring skills, the consequences of smoking, and why teens do and

don't smoke. The video also explains how to identify youth-centred programs and provides information on available resources.

*Ontario Physical and Health Education Association,  
1185 Eglinton Avenue East, Suite 501,  
North York, ON M3C 3C6, Tel: (416) 426-7120,  
Fax: (416) 426-7373*

## **Group Programs**

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### **1) CANOE Stop Smoking Program for Teens**

CANOE, an acronym for Ceasing Addiction to Nicotine with Others' Encouragement, is a six-session group program for teens who want to quit smoking. The sessions run over a 10-week period to allow participants time to gain greater personal experience with problem solving and quit attempts. The topics discussed prior to quit day include nicotine addiction and other reasons for smoking, withdrawal symptoms, alternatives to smoking and dealing with weight gain. The group meets on quit day to talk about stress management and coping with urges to smoke. The remaining sessions focus on preventing relapse, personalizing benefits of quitting and individualized problem solving. The facilitator's kit for this program contains guidelines for preparing the program and holding an introductory meeting, six lesson plans with handouts, a sample announcement and poster for promoting the program and questionnaires to be completed by participants before and after the program.

**Developed by:** North York Public Health Department, Ontario

**Language:** English

**Target:** Youth – General

**Region:** North York, Ontario

**Site:** Schools

**Cost:** No cost for participants; facilitator's kit available on a cost-recovery basis

**Evaluation:** In progress

Tobacco Prevention Coordinator, *North York Public Health Department*, 5100 Yonge Street, North York, ON M2N 5V7, Tel: (416) 395-7601, Fax: (416) 395-7691

### **2) Let's Cut It Out! No Ifs, Ands, or Butts**

This program runs for four weeks during which groups meet six times. Students discuss reasons for smoking and ways of quitting. Self-esteem issues are also discussed and health information is provided to participants. Bio-monitoring machines allow students to "see" both the immediate detrimental effect of tobacco use on the body and also health improvements upon quitting. Tips on staying off tobacco are provided. The program is led by a trained adult leader and peer assistants. The facilitator's kit includes a leader's guide, materials for participants, and posters and pamphlets promoting the program.

**Developed by:** Lung Association, Metropolitan Toronto and York Region

**Language:** English; French

**Target:** Youth – General

**Region:** Ontario; Facilitator's kit: Canada

**Site:** Schools

**Cost:** \$25 for facilitator's kit

**Evaluation:** A program evaluation was carried out at eight schools by the Waterloo Regional Health Unit and the Lung Association-Waterloo Region in 1993. Of the 92 students participating in the program, 69 completed the course. At the end of the program, 27.5% of these participants had stopped smoking and an additional 56.5% had significantly reduced their smoking. Six months after the program, 50 participants provided



follow-up data showed 1 student had remained smoke-free, 28 students had attempted to quit, and most of those still smoking had reduced consumption. A previous study in 1989 during the pilot phase of the program was carried out by the Lung Association-Metropolitan and York Region and showed higher quit rates. Of the 126 students who started the program, 80 completed the course, 80% quit by the end of the program, and 56.3% remained smoke-free six months later.

**Note:** Lung Association-Metropolitan Toronto and York Region offers facilitator training for this program.

*Lung Association-Metropolitan Toronto and York Region, 573 King Street East, Suite 201, Toronto, ON M5A 4L3, Tel: (416) 864-1112, Fax: (416) 864-9916*

### 3) NASAWIN

NASAWIN (the Cree word for “breathing” or “to breathe”) is a 10-week smoking education program designed for Aboriginal Peoples. While the focus of this program is not directly on smoking cessation, the topics covered raise awareness about the harmful effects of smoking in contrast to traditional use of tobacco with the intention of helping participants move toward quitting. The program kit consists of five posters, several pamphlets, a program manual organized into 10 sections and a 15-minute video that features First Nations people speaking about their own experiences with smoking. The subjects addressed in the program manual cover the health effects of smoking, including smoking during pregnancy, issues concerning smoking and children, second-hand smoke in the home and workplace, traditional use of tobacco and information about quitting smoking. Each section in the manual contains an activity and game in addition to written information. All of the materials in the kit are culturally appropriate and recognize the important role of tobacco in traditional ceremonies and gift giving. The philosophy of the program is to involve the whole community rather than just those members who smoke and to take a holistic approach to reducing smoking based on respect and community support.

**Developed by:** Union of Ontario Indians

**Language:** English

**Target:** Aboriginal Groups

**Region:** Canada

**Site:** Community-at-large

**Cost:** \$35 per kit; manual and video are available free to Aboriginal communities and organizations from Medical Services Branch, Health Canada

**Evaluation:** A program evaluation by the Union of Ontario Indians is in progress. There are indications that this type of program can have a dramatic effect on awareness, attitudes and smoking rates: there was a 50% drop in smoking in one year in one community using NASAWIN.

**Note:** This program is very flexible in its format and does not require specific training for facilitators. The resources can also be used as a self-help kit. Aboriginal communities and organizations can obtain the NASAWIN manual and video without cost by sending a blank video with a request for the program to: Health Programs Support Division, Medical Services Branch, 11th Floor, Jeanne Mance Building, Postal Locator 1911C, Tunney’s Pasture, Ottawa, ON K1A 0L3, Tel: (613) 952-2117, Fax: (613) 954-8107

*Union of Ontario Indians (Branch Office), 1537 Mississauga Street, Curve Lake, ON K0L 1R0, Tel: (705) 657-9383, Fax: (705) 657-2341*

### 4) Quit 4 Life – Facilitator’s Guide

#### *Une Vie 100 Fumer – Guide de l’animateur*

This facilitator’s guide adapts the Quit 4 Life self-help smoking cessation program for teens into a group program format. The guide supports work with teens who prefer to address smoking cessation through a process which provides mutual assistance and support. Facilitators are provided with background information and discussion outlines on issues related to tobacco use. The approach is positive, supportive and realistic, and does not minimize the difficulties of quitting. The guide is

easy to follow and has been designed to be used by youth leaders as well as teachers, health professionals and program providers.

**Developed by:** Health Canada

**Language:** English; French

**Target:** Youth – General

**Region:** Canada

**Site:** Community-at-large; Schools

**Cost:** None

**Evaluation:** The guide was pilot tested in a number of settings in 1995. Publications Unit, Health Canada, Tel: (613) 954-5995, Fax: (613) 941-5366, Web site: [www.hc-sc.gc.ca](http://www.hc-sc.gc.ca)

## 5) Patch Plus

This smoking cessation program is designed for people who want to quit smoking using the combined approach of nicotine replacement therapy (the patch or gum) and behaviour modification. Although use of the nicotine patch or gum is optional for participants, Patch Plus is targeted to the smoker who perceives a need for this type of external support in attempting to quit. The program consists of six 90-minute group sessions over a four-week period and is led by trained facilitators. In sessions one to four, participants cut down the amount smoked and learn about their daily smoking behaviour as well as why they smoke. The nicotine patch or gum begins on quit day which follows the fourth session. The remainder of the program focuses on developing additional skills to prevent relapse, including dealing with stress and coping with situations that can undermine the decision to stay smoke-free. Booster sessions are available if follow-up assistance is needed by participants who have completed the program. The Patch Plus program has been derived from 20 years of clinical research on behavioural change.

**Developed by:** Homewood Health Services

**Language:** English; French

**Target:** General Population; Employees

**Region:** Selected Ontario cities

**Site:** Community-at-large; Health Care Settings; Workplaces

**Cost:** Varies with location for participants. Homewood Health Services provides program facilitator training at a cost of \$600 per training participant.

**Evaluation:** In progress

Clients are routinely followed up three months after completing the program. To date, about 475 clients have a self-reported quit rate of 68% (without further verification) at three months post-program. In developing Patch Plus, an initial sample of 32 clients had a success rate of 57% at six months following completion of the program. Carbon monoxide testing was used to verify smoking status.

**Note:** In addition to the regions listed above, several provinces and cities are considering offering the Patch Plus program.

*Homewood Health Services, 157 Delhi Street, Guelph, ON N1E 4J3, Tel: (519) 824-5405, Fax: (519) 821-2906*

## 6) Smokefree for Women

This eight-week, holistic multi-component smoking cessation program designed specifically for women combines behavioural techniques with health information, skills training, stress management and emotional support. Participants are gradually weaned from nicotine before a scheduled quit date, by switching to lower nicotine cigarettes. They learn how to achieve the same effects they seek from cigarettes with healthier behaviour. There are two weeks of follow-up.

**Developed by:** Smokefree for Women

**Language:** English

**Target:** Women – General

**Region:** Toronto, Ontario and adjacent areas

**Site:** Community-at-large; Workplaces

**Evaluation:** An extensive questionnaire was completed by the 10 women in six successive group programs in 1991 with a total of 60 participants. They were contacted six months following cessation. A 92% response rate was achieved. Sixty-two percent completed the program and stopped smoking. Six months later, 32% were verified as having remained smoke-free. The evaluation is published as: Jensen, P.M., Coombs, R.B. "Health and Behavioral Predictors of Success in an Intensive Smoking Cessation Program for Women," *Women and Health*, Vol. 21(1), 1994.

Dr. Phyllis Jensen, *Smokefree for Women*,  
655 Broadview Avenue, Suite 1914, Toronto,  
ON M4K 2P3, Tel: (416) 465-1323

## 7) Breathe Free

### *Respirez à pleins poumons*

Although programs vary slightly with location, all focus on natural health principles. Over a five-day period, participants learn about the psychology behind cravings to smoke, the health effects of tobacco, and strategies for staying smoke-free. The emphasis is on positive lifestyles supported by the effective use of exercise and relaxation techniques.

**Developed by:** Seventh Day Adventists

**Language:** English; French; Spanish

**Target:** General Population

**Region:** Ontario

**Site:** Community-at-large

**Cost:** Varies with location. Approx. \$30–\$40.

**Evaluation:** Status unknown

Local Seventh Day Adventists Church offices, or *Seventh Day Adventists Church of Canada – National Headquarters*, 1148 King Street East, Oshawa, ON L1H 1H8, Tel: (905) 433-0011

## 8) Stop Smoking – A Program for Women: Facilitator's Guide

The revised Stop Smoking: A Program for Women is based on adult learning principles and uses a stages of change approach to smoking cessation. Women in the program examine why they smoke and support each other to make changes in their lives. Developed for, by and with women, the program supports women to develop stress management skills, higher self-esteem, and increase their sense of control over their lives as they move toward becoming smoke-free. The flexible, holistic approach focuses on women, not just on their smoking.

**Evaluation:** A 1995 national evaluation of the program proved that the program works, especially for women living on low incomes. During the six-month program, the majority of women:

- stopped or reduced smoking,
- experienced enhanced self-esteem,
- developed and improved their stress management skills, and
- developed a strong support network.

A 10-minute video follows women as they move through the course. Women discuss their fears about quitting, and their experiences about being smoke-free.

**Language:** English; French

**Target:** Women

**Region:** Canada

**Site:** Community-at-large; Health Care Settings

**Cost:** Facilitator's Guide \$35 (plus postage & handling); Video \$15 (plus postage and handling).

**Note:** The Canadian Public Health Association's evaluation of this program was conducted at community health centres and women's centres in six francophone and five anglophone communities across Canada. In addition to the national evaluation, many other groups are using the guide, particularly in Ontario. More information about the communities using this program can be obtained from the Canadian Public Health Association.

*Canadian Public Health Association,*  
400-1565 Carling Avenue, Ottawa, ON  
K1Z 8R1, Tel: (613) 725-3769,  
Fax: (613) 725-9826

### **9) A way Out Women with disabilities and smoking**

This self-help cessation guide was written for, by and with women with disabilities who also smoke. The resource is based on the stages of change model and is intended for women who are not yet ready to quit; women who are actively trying to quit and women who have quit and want to remain smoke-free.

**Developed by:** DAWN Canada and Health Canada

**Language:** English; French

**Region:** Canada

**Site:** Community-at-large

**Cost:** \$9.95 (add postage & handling)

*Canadian Public Health Association, Health Resources Centre,* 400-1565 Carling Avenue, Ottawa ON K1Z 8R1, Tel: (613) 725-3769, Fax: (613) 725-9826, E-mail: hrc/cds@cpha.ca

### **10) Lungs Are For Life – School Program**

The original Lungs Are for Life program was developed to help teachers and health educators address respiratory health and smoking prevention with students. It proved to be extremely popular and successful and was rated by Health Canada as one of the top three smoking prevention programs in the country. The 2000 version has been completely revised and redesigned to meet expectations in the new Ontario Health and Physical Education Curriculum as well as Ontario public health guidelines.

**Developed by:** Ontario Lung Association

**Language:** English; French

**Target:** Grades 4–8

**Region:** Ontario

**Site:** Schools

**Cost:** Free to Ontario schools

**Evaluation:** Pilot tested in 1999 in 100 Ontario elementary schools; 92% of respondents rated the program as either good or excellent.

*Ontario Lung Association,* 573 King Street East, Suite 201, Toronto, ON M5A 4L3, Tel: (416) 864-9911, Fax: (416) 864-9916, Web site: [www.on.lung.ca](http://www.on.lung.ca)

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## **Counselling Programs**

### **1) Heart-Check Smoking Cessation Program – Abandon du tabac**

This program is designed to assist those smokers who are seriously considering quitting in the next month. The emphasis of our health care professionals is to help smokers understand why they smoke and plan quit strategies. Initially, the smoker attends a one-hour information session. A physician then concentrates around the quit date to reinforce the quit effort. Telephone counselling is also available.

**Developed by:** Ottawa Heart Institute

**Language:** English; French

**Target:** General Population

**Region:** Ottawa-Carleton, Ontario

**Site:** Health Care Setting

**Cost:** \$25

**Evaluation:** 26-week follow-up of outcome

*Heart Check Smoking Cessation Program, Ottawa Civic Heart Institute, 40 Ruskin Street, Ottawa, ON K1Y 4W7, Tel: (613) 761-4753, Fax: (613) 761-5309*

## 2) Smokefree for Women

This individual cessation program was developed to meet the special needs of women who are long-term smokers and who have not been able to succeed with other methods. It combines behavioural techniques with dietary management, skills training, relaxation, stress reduction and emotional support. Clients are gradually weaned from nicotine while learning how to achieve the same desired effects with healthier behaviours. The time frame is personalized; the quit day is determined on a consensus basis. Physical and emotional issues inhibiting successful cessation are explored in depth.

**Developed by:** Smokefree for Women

**Language:** English

**Target:** Women – General

**Region:** Toronto, Ontario and adjacent areas

**Site:** Community-at-large

**Cost:** Clients are charged a sliding scale fee based on employment status. The fee for each 1.5-hour session is \$60 for fully employed women.

**Evaluation:** An evaluation is in progress.

Dr. Phyllis Jensen, RN, PhD. *Smokefree for Women*, 655 Broadview Avenue, Suite 1914, Toronto, ON M4K 2P3, Tel: (416) 465-1323

## 3) Nicotine Dependence Clinic

The clinic offers both individual and group therapy for a range of smokers. Treatment approach is tailored to the needs of the client, including the prescription of medication to assist in smoking cessation/reduction. The treatment team is multidisciplinary, including physicians specializing in addiction medicine, nurses and therapists. Treatment is available for the general public. There are specialized services for those recovering from other addictions including alcohol, for those suffering from concurrent mental health problems, for pregnant women and their partners, and for patients with medical illnesses such as cardiac and lung disease. Treatment is offered at the Addiction Research Foundation, Queen Street and Donwood sites. Follow-up is one to two years.

**Developed by:** Centre for Addiction and Mental Health

**Language:** English

**Target:** General Population

**Region:** Toronto and Region

**Site:** Health Care Setting

**Cost:** None

**Evaluation:** Ongoing

**F:** There is also a Nicotine Anonymous group that meets in the Addiction Research Foundation building.

*Centre for Addiction and Mental Health, 33 Russell Street, Toronto, ON M5S 2S1, Tel: (416) 595-6128*

#### **4) Support for Smoking Cessation Program**

The one-to-one consulting/coaching involves individual sessions over a period of time set by the client, or on an as-needed basis. The approach is essentially one of offering information, coaching and support for that person to find his or her own way to cut down and/or quit smoking. There is no program imposed upon the person, as has been the norm in the past with a lot of cessation programs. It really involves tuning into and respecting the factors that are influencing the person as well as that person's style of making a change. Again, what will work best for the individual.

This is the bottom line. Throughout a session, the facilitator may make reference to the stages of change, stress management, self-esteem and grief, as these are all factors that are part of the smoking pattern. Individuals usually feel relieved when a) they know the facilitator was a former smoker and even though the person quit many years ago, this individual understands the addiction and the

struggle; b) there is no pressure to follow a certain plan, other than what they determine is right for them; and c) being reassured that cutting down is a very good and respectable goal—they do not have to think about quitting if that seems impossible. Of course, in time as the person feels the benefits of reduced smoking, he or she will be more likely to quit all together. On the other hand, if someone needs a quit plan with a deadline and his or her need and style is to make a change quickly and get it over with, that is supported as well. For groups, all of the above applies except that there is group support offered from people within the group to each other in a 6–8 week session.

Jan Dupuis – Program Consultant – 480A Weller Street, Suite # 3, Peterborough, ON K9H 2N6),  
Tel: (705) 745-2332, Fax: (705) 745-0221,  
E-mail: [projectwheels@cgocable.net](mailto:projectwheels@cgocable.net)

# Manitoba

## Self-help Programs

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### 1) **Catching Our Breath – A Journal About Change for Women Who Smoke**

This innovative self-help manual explores issues relating to why women smoke. An alternative model of smoking and smoking cessation for women is presented, one that is women-centred, flexible, and embodies a feminist view of women in society. It is designed to be used intensively over a short period of time or slowly over many weeks, depending on the individual's needs. Each of its 13 chapters discusses an aspect of the process of quitting smoking. The areas covered include understanding the physical and psychological addiction to smoking, motivation, the cultural context of smoking for women, triggers to smoke, dealing with feelings and situations, relaxation techniques, stress management, how to handle quit day, and strategies for remaining smoke-free. The program also addresses weight and body image and emphasizes the need for women to establish personal space and reward time. The journal format gives women an opportunity to practise alternative ways of coping with stresses and behaviours that sustain smoking.

**Developed by:** Women's Health Clinic, Winnipeg, Manitoba

**Language:** English

**Target:** Women – General

**Region:** Canada

**Site:** Community-at-large

**Cost:** \$14.95 (plus shipping & handling)

**Note:** Women's Health Clinic is currently adapting this program for women with lower literacy skills and women in workplaces. This manual is available

on its own as a self-help program; it's also used by participants in the Catching Our Breath group program.

Resource Coordinator, *Women's Health Clinic*,  
419 Graham Avenue, 3rd Floor, Winnipeg,  
MB R3C 0M3, Tel: (204) 947-1517,  
Fax: (204) 943-3844

### 2) **Freedom from Smoking for You and Your Baby**

This 10-day self-help program includes a 32-page guide, a poster-size progress calendar, a special exercise chart designed for expectant mothers and an audio cassette featuring exercise and relaxation techniques. The guide uses quizzes, activities and information to help participants discover why they smoke, why they want to quit and how to prepare for quit day. Topics discussed include breaking smoking patterns, weight control, how to be assertive and coping strategies for dealing with urges to smoke. The last section of the guide is about maintaining the decision to quit before and after the baby is born.

**Developed by:** American Lung Association

**Language:** English

**Target:** Women – Pregnant

**Region:** Manitoba

**Site:** Community-at-large

**Cost:** Approx. \$7 to \$10

**Evaluation:** Unknown

*Manitoba Lung Association*, 629 McDermot  
Avenue, 2nd Floor, Winnipeg, MB R3A 1P6,  
Tel: (204) 774-5501, Fax: (204) 772-5083

### **3) Freedom from Smoking for You and Your Family**

This 54-page guide to smoking cessation discusses how to overcome roadblocks to quitting, leads the participant through a nicotine “fading” program, and provides tips on remaining smoke-free. Emphasis is placed on participants understanding their day-to-day smoking behaviour, learning how to replace cigarettes with healthy activities, coping with the first few weeks after quitting and what to do if they start to smoke again. New non-smokers are encouraged to remember their reasons for becoming smoke-free, reward themselves and help others to quit smoking.

**Developed by:** American Lung Association

**Language:** English

**Target:** General Population

**Region:** Manitoba

**Site:** Community-at-large

**Cost:** Approx. \$5 to \$10

**Evaluation:** A 1990 evaluation of this program by researchers at the Fox Chase Cancer Centre and the University of North Carolina showed an 11% cessation rate at the six-month follow-up interval. This was felt to compare favourably with current studies of self-help programs. About three quarters of participants in the evaluation had high school education or less and on average smoked one pack of cigarettes a day. Cessation rates were determined using mailed questionnaires and telephone interviews.

*Manitoba Lung Association, 629 McDermot Avenue, 2nd Floor, Winnipeg, MB R3A 1P6, Tel: (204) 774-5501, Fax: (204) 772-5083*

### **4) Freedom from Smoking in 20 Days and A Lifetime of Freedom from Smoking**

*Non-fumeur en 20 jours et Je ne fume plus Freedom from Smoking in 20 Days* is a 64-page manual with supplementary materials. Participants analyze personal smoking patterns (days 1 – 7), break this pattern and reduce consumption (days 8 – 15),

quit smoking (day 16), and learn how to maintain a smoke-free lifestyle (days 17 – 20). *A Lifetime of Freedom from Smoking* is a 28-page guide that helps recent ex-smokers to remain smoke-free. It includes tips for dealing with nicotine withdrawal and for handling social situations in which cravings for a cigarette arise. This guide is accompanied by a pocket reminder that can be referred to if a former smoker is tempted to have a cigarette.

**Developed by:** American Lung Association

**Language:** English; French

**Target:** General Population

**Region:** Manitoba

**Site:** Community-at-large

**Cost:** \$7 to \$16 (varies with province) for *Freedom from Smoking in 20 Days* and *A Lifetime of Freedom from Smoking* as a set.

**Evaluation:** A 1984 U.S. study of 308 participants indicated a 15% cessation rate one year after receiving the program. In this evaluation, non-responders were counted as having remained smokers.

The Manitoba Lung Association offers only the *Lifetime of Freedom from Smoking* booklet from this set, at a cost of \$4.

### **5) In Control**

This program consists of a videotape (VHS), a participant’s guide and an audio tape. The video component of the program is designed to be watched in 9-minute segments each day for 13 days. Information is provided on the reasons why people smoke, how to quit and strategies for coping with difficult situations that could lead to relapse. The audio tape discusses motivation to quit and provides relaxation exercises. This program can be easily adapted for use as a group smoking cessation program in the workplace or other settings.

**Developed by:** American Lung Association; American Heart Association



**Language:** English

**Target:** General Population

**Region:** Manitoba

**Site:** Community-at-large; Workplaces

**Cost:** Varies with province. In some provinces it is possible to rent or borrow rather than purchase the video.

**Evaluation:** Appendix

*Manitoba Lung Association*, 629 McDermot Avenue, 2nd Floor, Winnipeg, MB R3A 1P6, Tel: (204) 774-5501, Fax: (204) 772-5083

## Group Programs

### 1) **Catching Our Breath – A Guide for Facilitators**

This guide presents an alternative model to smoking and smoking cessation for women—one that is women-centred, flexible and embodies a feminist view of women in society. The guide is intended to assist anyone who wants to facilitate a women's smoking cessation group. Areas addressed include guidelines for facilitating a group, how to create a group, communication and empowering skills. There are detailed outlines for nine group sessions, beginning with an introductory meeting, and continuing with sessions on why women smoke, body image, health consequences of smoking, how to quit smoking, withdrawal/recovery symptoms, and maintaining the decision to quit.

There is special emphasis on creating a non-judgmental, supportive environment as well as placing quitting smoking in the wider context of making changes.

**Developed by:** Women's Health Clinic, Winnipeg, Manitoba

**Language:** English

**Target:** Women – General

**Region:** Canada

**Site:** Community-at-large; Health Care Settings

**Cost:** Facilitator's manuals cost \$12 plus \$1 shipping each.

**Evaluation:** An evaluation using telephone interviews was carried out with 29 women, representing 62% of the participants who had taken part in seven group programs held in Manitoba. The evaluation did not focus on the traditional measurement of cessation rates but rather on increased awareness of reasons for smoking, increased knowledge about and commitment to quitting, increased self-esteem and coping mechanisms, and satisfaction with the format and content of the program. Based on these criteria, the program was found to be both highly effective for and valued by participants.

**Note:** Participants in this group program use *Catching Our Breath – A Journal About Change for Women* which is also used on a self-help basis. Group programs are currently running in some cities such as Winnipeg. Women's Health Clinic is adapting this program for women with lower literacy skills and women in workplaces.

Resource Coordinator, *Women's Health Clinic*, 419 Graham Avenue, 3rd Floor, Winnipeg, MB R3C 0M3, Tel: (204) 947-1517, Fax: (204) 943-3844

### 2) **Freedom from Smoking Group Course** *Non-fumeur en 5 jours*

The format, length and group size for this course varies with province. These are multi-component behavioural-based group courses for the community or the workplace. The programs generally include self-monitoring, relaxation training, developing a cessation strategy, weight management, problem solving, dealing with recovery symptoms, and maintaining the decision to quit. In addition to a program for adults, New Brunswick Lung Association offers an adaptation of this program for teens.

**Developed by:** Individual Lung Associations

**Language:** English

**Target:** General Population; Youth – General

**Region:** Manitoba

**Site:** Community-at-large; Health Care Settings; Workplaces

**Cost:** Varies with province

**Evaluation:** The American Lung Association studied 494 smokers attending 42 Freedom from Smoking Clinics in western New York State. While the clinics studied are not necessarily the same as the programs in this entry, the results of the evaluation may be representative. A cessation rate of 29% was reported one year after completion of the clinics. The evaluation was based on telephone interviews and is published as: Rosenbaum, P. and R. O'Shea, "Large-Scale Study of Freedom from Smoking Clinics—Factors in Quitting," *Public Health Reports*, Vol. 107, No. 2, April 1992.

*Manitoba Lung Association*, 629 McDermot Avenue, 2nd Floor, Winnipeg, MB R3A 1P6, Tel: (204) 774-5501, Fax: (204) 772-5083

### **3) In Control – Freedom from Smoking Group Facilitator's Guide**

This guide adapts the "In Control" video and related self-help material (see the In Control program in the self-help section) to a group program format. In Saskatchewan, the guide is available to workplaces or individuals who want to run a group smoking cessation program and additional instructions are provided as required. In Manitoba, this program is offered as a one-day training workshop designed to help individuals facilitate an In Control group program in the workplace.

**Developed by:** American Lung Association

**Language:** English

**Target:** General Population

**Region:** Manitoba

**Site:** Community-at-large; Workplaces

**Cost:** Varies with province

**Evaluation:** Status unknown

*Manitoba Lung Association*, 629 McDermot Avenue, 2nd Floor, Winnipeg, MB R3A 1P6, Tel: (204) 774-5501, Fax: (204) 772-5083

# Saskatchewan

## Self-help Programs

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### 1) Freedom from Smoking for You and Your Family

This 54-page guide to smoking cessation discusses how to overcome roadblocks to quitting, leads the participant through a nicotine “fading” program, and provides tips on remaining smoke-free. Emphasis is placed on participants understanding their day-to-day smoking behaviour, learning how to replace cigarettes with healthy activities, coping with the first few weeks after quitting and what to do if they start to smoke again. New non-smokers are encouraged to remember their reasons for becoming smoke-free, reward themselves and help others to quit smoking.

**Developed by:** American Lung Association

**Language:** English

**Target:** General Population

**Region:** Saskatchewan

**Site:** Community-at-large

**Cost:** Approx. \$5 to \$10 (varies with province)

**Evaluation:** A 1990 evaluation of this program by researchers at the Fox Chase Cancer Centre and the University of North Carolina showed an 11% cessation rate at the six-month follow-up interval. This was felt to compare favourably with current studies of self-help programs. About three quarters of participants in the evaluation had high school education or less and on average smoked one pack of cigarettes a day. Cessation rates were determined using mailed questionnaires and telephone interviews.

*Saskatchewan Lung Association, 1231-8th Street East, Saskatoon, SK S7H 0S5, Tel: (306) 343-9511, Fax: (306) 343-7007*

### 2) Freedom from Smoking in 20 Days and A Lifetime of Freedom from Smoking *Non-fumeur en 20 jours et Je ne fume plus*

*Freedom from Smoking in 20 Days* is a 64-page manual with supplementary materials. Participants analyze personal smoking patterns (days 1 – 7), break this pattern and reduce consumption (days 8 – 5), quit smoking (day 16), and learn how to maintain a smoke-free lifestyle (days 17 – 20). *A Lifetime of Freedom from Smoking* is a 28-page guide that helps recent ex-smokers to remain smoke-free. It includes tips for dealing with nicotine withdrawal and for handling social situations in which cravings for a cigarette arise. This guide is accompanied by a pocket reminder that can be referred to if a former smoker is tempted to have a cigarette.

**Developed by:** American Lung Association

**Language:** English; French

**Target:** General Population

**Region:** Saskatchewan

**Site:** Community-at-large

**Cost:** \$7 to \$16 (varies with province) for *Freedom from Smoking in 20 Days* and *A Lifetime of Freedom from Smoking* as a set.

**Evaluation:** A 1984 U.S. study of 308 participants indicated a 15% cessation rate one year after receiving the program. In this evaluation, non-responders were counted as having remained smokers.

*Saskatchewan Lung Association, 1231-8th Street East, Saskatoon, SK S7H 0S5, Tel: (306) 343-9511, Fax: (306) 343-7007*

### **3) In Control**

This program consists of a videotape (VHS), a participant's guide and an audio tape. The video component of the program is designed to be watched in 9-minute segments each day for 13 days. Information is provided on the reasons why people smoke, how to quit and strategies for coping with difficult situations that could lead to relapse. The audio tape discusses motivation to quit and provides relaxation exercises. This program can be easily adapted for use as a group smoking cessation program in the workplace or other settings.

**Developed by:** American Lung Association; American Heart Association

**Language:** English

**Target:** General Population

**Region:** Saskatchewan

**Site:** Community-at-large; Workplaces

**Cost:** Price varies with province. In some provinces, it is possible to rent or borrow rather than purchase the video.

**Evaluation:** Appendix

*Saskatchewan Lung Association, 1231-8th Street East, Saskatoon, SK S7H 0S5, Tel: (306) 343-9511, Fax: (306) 343-7007*

continuing support. Discussion topics include tobacco addiction, the process of change, self-esteem, setting goals, and preventing or managing relapse. Participants learn about assertiveness, managing emotions, problem solving, nutrition and weight control. A program description can be obtained from B.O.S.S. Smoking Cessation Project (see below).

**Developed by:** Crocus Coop, Saskatoon Housing Coalition, Canadian Mental Health Association – Saskatoon Branch and McKerracher Centre

**Language:** English

**Target:** Individuals with Special Needs

**Region:** Group program: Saskatoon; Program description: Canada

**Site:** Community-at-large

**Cost:** No cost for participants or for program description

**Evaluation:** This program is currently being evaluated by the Department of Psychology, University of Saskatchewan.

*B.O.S.S. Smoking Cessation Project, 106 Avenue B South, Saskatoon, SK S7M 5P4, Tel: (306) 664-2488, Fax: (306) 653-4384*

## **Group Programs**

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### **1) Butt Out Smoking Strategy (B.O.S.S.)**

B.O.S.S. is a smoking cessation program that helps people with a psychiatric history to quit or reduce smoking. The program uses an holistic, positive, empowering approach. The format is designed to meet the needs of individuals in the group who may have specific concerns or be at different stages of readiness to change. Participants meet twice a week and help to shape the direction of the sessions. The main themes in the program are gaining insight, planning for success, recovery, maintenance and

# Alberta/Northwest Territories

## Self-help Programs

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### 1) Out of Mainstream Youth Needs Assessment

This project includes a component to develop a smoking cessation intervention for high-risk youth, including street youth and pregnant teens. The project will also develop social service agency policies that support smoking cessation. Youth in high-risk situations and representatives of youth agencies such as boys and girls clubs will review existing programs and contribute to the development of a smoking cessation program tailored to their needs. A main focus of the program will be on dealing with high levels of stress. Careful consideration will be given to identifying program delivery channels to ensure ready access to high-risk youth.

*Calgary Tobacco Reduction Action Coalition,*  
c/o Canadian Cancer Society - Calgary Unit,  
Suite 408, 1305-11 Avenue SW, Calgary, AB  
T3C 3P6, Tel: (403) 244-2791, Fax: (403) 229-2540

### 2) Freedom from Smoking for You and Your Baby

This 10-day self-help program includes a 32-page guide, a poster-size progress calendar, a special exercise chart designed for expectant mothers and an audio cassette featuring exercise and relaxation techniques. The guide uses quizzes, activities and information to help participants discover why they smoke, why they want to quit and how to prepare for quit day. Topics discussed include breaking smoking patterns, weight control, how to be assertive and coping strategies for dealing with urges to smoke. The last section of the guide is about maintaining the decision to quit before and after the baby is born.

*Developed by:* American Lung Association

*Language:* English

*Target:* Women – Pregnant

*Region:* Alberta

*Site:* Community-at-large

*Cost:* \$7 to \$10 (varies with province)

*Evaluation:* Status unknown

*Alberta Lung Association – Health Initiatives,*  
P.O. Box 4500, Station S, Edmonton, AB  
T6E 6K2, Tel: (780) 407-6819, Fax: (780) 407-6829

### 3) Integrated Tobacco Recovery for Urban Aboriginal Adults and Adolescents

Nechi Institute will be adapting the Smokers Treatment Centre's *New Tools for Survival, A Guide to Building Your Own Recovery* for Aboriginal adults and adolescents living in urban settings. The guide will be revised to be culturally appropriate for Aboriginal Peoples and will be augmented with new sections on the traditional uses of tobacco, including its spiritual and healing role in the Aboriginal community. The emphasis on recognizing and replacing non-traditional tobacco use as a survival coping tool will be retained in the adapted guide.

*Nechi Institute,* P.O. Box 34007, Kingsway Mall,  
Edmonton, AB T5G 3G4, Tel: (780) 458-1884,  
Fax: (780) 458-1883

### 4) Freedom from Smoking for You and Your Family

This 54-page guide to smoking cessation discusses how to overcome roadblocks to quitting, leads the participant through a nicotine “fading” program, and provides tips on remaining smoke-free. Emphasis is placed on participants understanding their day-to-day smoking behaviour, learning how to replace cigarettes with healthy activities, coping with the first few weeks after quitting and what to do if they start to smoke again. New non-smokers are

encouraged to remember their reasons for becoming smoke-free, reward themselves and help others to quit smoking.

**Developed by:** American Lung Association

**Language:** English

**Target:** General Population

**Region:** Alberta

**Site:** Community-at-large

**Cost:** \$5 to \$10 (varies with province)

**Evaluation:** A 1990 evaluation of this program by researchers at the Fox Chase Cancer Centre and the University of North Carolina showed an 11% cessation rate at the six-month follow-up interval. This was felt to compare favourably with current studies of self-help programs. About three quarters of participants in the evaluation had high school education or less and on average smoked one pack of cigarettes a day. Cessation rates were determined using mailed questionnaires and telephone interviews.

*Alberta Lung Association – Health Initiatives*,  
P.O. Box 4500, Station S, Edmonton, AB  
T6E 6K2, Tel: (780) 407-6819, Fax: (780) 407-6829

## Group Programs

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### 1) Freedom from Smoking Group Course

These are multi-component behavioural-based group courses for the community or the workplace. The programs generally include self-monitoring, relaxation training, developing a cessation strategy, weight management, problem solving, dealing with recovery symptoms, and maintaining the decision to quit.

**Developed by:** Individual Lung Associations

**Language:** English

**Target:** General Population; Youth – General

**Region:** Alberta

**Site:** Community-at-large; Health Care Settings; Workplaces

**Cost:** Varies with province

**Evaluation:** The American Lung Association studied 494 smokers attending 42 Freedom from Smoking Clinics in western New York State. While the clinics studied are not necessarily the same as the programs in this entry, the results of the evaluation may be representative. A cessation rate of 29% was reported one year after completion of the clinics. The evaluation was based on telephone interviews and is published as: Rosenbaum, P. and R. O'Shea, "Large-Scale Study of Freedom from Smoking Clinics – Factors in Quitting," *Public Health Reports*, Vol. 107, No. 2, April 1992.

**Note:** The Alberta Lung Association offers a comprehensive facilitator training course for its program.

*Alberta Lung Association Health Initiatives*, Suite 302,  
609-14 Street NW, Calgary, AB T2N 2A1,  
Tel: (403) 283-1333, Fax: (403) 283-1558

### 2) Fresh Start Quit Smoking Program

This 16-hour group program is designed to help smokers make the decision to quit and to support their efforts to stay smoke-free. The program format includes volunteer facilitators, group discussion and informative videos. Participants look at their reasons for smoking and learn coping skills, relaxation techniques, weight management and strategies for staying off cigarettes. Short-term and long-term health effects of smoking are also discussed. Participants are encouraged to set individual quit dates and to develop support networks and strategies for overcoming obstacles as they make a "fresh start."

**Developed by:** Canadian Cancer Society, British Columbia and Yukon Division

**Language:** English

**Target:** General Population

**Region:** Alberta

**Site:** Community-at-large; Health Care Settings; Workplaces (varies with province)

**Cost:** Varies with province

**Evaluation:** In progress

**Note:** Adapted from the Fresh Start Smoking Cessation Course material developed by the Anti-Cancer Council of Victoria, Australia.

*Canadian Cancer Society, Alberta and Northwest Territories Div., Suite 200, 2424-4th Street South West, Calgary, AB T2S 2T4, Tel: (403) 228-4487, Fax: (403) 228-4506*

### 3) Tom Baker Cancer Centre Smoking Cessation Program

This program is designed for large groups of 50 to 150 participants. A team comprising a psychologist, social worker and dietitian lead the program which consists of eight sessions over a four-month period. The main components of the program are behaviour modification, relaxation techniques, self-hypnosis, stress management, diet and weight control.

**Developed by:** Department of Psycho-social Resources, Tom Baker Cancer Centre

**Language:** English

**Target:** General Population

**Region:** Calgary, Alberta

**Site:** Community-at-large

**Cost:** \$100 for participants (no cost for cancer patients at the Centre and their families)

**Evaluation:** Participants are followed up six months and 12 months after completing the program. Based on data from 1986 to 1990, 29% of participants who attended one or more sessions of the program reported continuous abstinence at the 12-month follow-up.

*Tom Baker Cancer Centre, Special Services Building, 1331-29th Street NW, Calgary, AB T2N 4N2, Tel: (403) 670-1767, Fax: (403) 283-1632*

### 4) One Step at a Time Resources Canadian Cancer Society, 2000

#### ***One Step At a Time – Book 1 For smokers who don't want to quit***

Provides support to help smokers understand their smoking habit; understand the effects of second-hand smoke; and aids in dealing with people who hassle smokers to quit. Also, provides facts about quitting. (Available in bundles of 10)

#### ***One Step at a Time – Book 2 For smokers who want to quit***

Provides information on quitting in stages: Thinking About Quitting; Preparing to Quit; Quitting; Relapse and Staying Smoke-Free for Good. Helps smokers develop the skills and confidence for success in quitting smoking, 96 pages. (Available in bundles of 10)

#### ***One Step at a Time Influencer If you want to help a smoker quit***

Gives suggestions on how to provide support to a smoker who is trying to quit. Highlights the stages of quitting and details, ways to assist the smoker at each stage. Brochure. (Available in bundles of 10)

**Note:** These resources replace the brochures *When a Women Smokes and When a Man Smokes*.

*Canadian Cancer Society, Alberta and Northwest Territories Division, Suite 200, 2424 Fourth Street S.W., Calgary, AB T2S 2T4, Tel: (403) 228-4487, Fax: (403) 228-4506*





# British Columbia/Yukon

## Self-help Programs

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### 1) Freedom from Smoking for You and Your Baby

This 10-day self-help program includes a 32-page guide, a poster-size progress calendar, a special exercise chart designed for expectant mothers and an audio cassette featuring exercise and relaxation techniques. The guide uses quizzes, activities and information to help participants discover why they smoke, why they want to quit and how to prepare for quit day. Topics discussed include breaking smoking patterns, weight control, how to be assertive and coping strategies for dealing with urges to smoke. The last section of the guide is about maintaining the decision to quit before and after the baby is born.

**Developed by:** American Lung Association

**Language:** English

**Target:** Women – Pregnant

**Region:** British Columbia

**Site:** Community-at-large

**Cost:** \$7 to \$10 (varies with province)

**Evaluation:** Status unknown

*British Columbia Lung Association, 2675 Oak Street, Vancouver, BC V6H 2K2, Tel: (604) 731-5864, Fax: (604) 731-5810*

### 2) Freedom from Smoking in 20 Days and A Lifetime of Freedom from Smoking *Non-fumeur en 20 jours et Je ne fume plus*

*Freedom from Smoking in 20 Days* is a 64-page manual with supplementary materials. Participants analyze personal smoking patterns (days 1 – 7), break this pattern and reduce consumption (days 8 – 5), quit smoking (day 16), and learn how to maintain a smoke-free lifestyle (days 17 – 20). *A Lifetime of Freedom from Smoking* is a 28-page guide that helps recent ex-smokers to remain smoke-free. It includes tips for dealing with nicotine withdrawal and for handling social situations in which cravings for a cigarette arise. This guide is accompanied by a pocket reminder that can be referred to if a former smoker is tempted to have a cigarette.

**Developed by:** American Lung Association

**Language:** English; French

**Target:** General Population

**Region:** British Columbia

**Site:** Community-at-large

**Cost:** \$7 to \$16 (varies with province) for *Freedom from Smoking in 20 Days* and *A Lifetime of Freedom from Smoking* as a set.

**Evaluation:** A 1984 U.S. study of 308 participants indicated a 15% cessation rate one year after receiving the program. In this evaluation, non-responders were counted as having remained smokers.

*British Columbia Lung Association, 2675 Oak Street, Vancouver, BC V6H 2K2, Tel: (604) 731-5864, Fax: (604) 731-5810*

### **3) Kick the Nic**

This smoking cessation program for teens is being used in schools and community settings throughout the province. In 10 sessions over a 10-week period, participants will look at key aspects of their smoking behaviour, including what smoking means to them and other ways to meet those needs; pressures to smoke including peer group and media influences; decision-making and refusal skills; transition into adulthood; and managing high-risk situations. There is a strong focus on self-esteem issues throughout the program

Quitting smoking is presented as a process using the stages of change model so that all participants can feel positive about their experience in the program. British Columbia has committed to providing other provinces and territories with 20 copies of the resource. In addition, arrangements can be made to have a Master Trainer from British Columbia train Master Trainers in other jurisdictions.

Karen Culham, Program Coordinator,  
Tobacco Reduction and Control Programs,  
*British Columbia Ministry of Health*, 2nd Floor,  
1520 Blanshard Street, Victoria, BC V8W 3C8,  
Tel: (250) 952-1005, Fax: (205) 952-1570

### **4) Well-Being for Women, A Lifestyle Change Program: Program Guide**

This project will develop a participant-centred approach to positive lifestyle changes for women who smoke. The program will integrate building women's self-esteem, exploring choices in good nutrition and physical activity in a smoking reduction intervention that uses a support group setting. The program is designed for women who have low incomes. A draft facilitator's guide is being pilot tested in YWCAs in six cities: Vancouver, Yellowknife, Winnipeg, Brockville, Oshawa and Montréal. In these pilot tests, participants will set realistic goals for themselves, measure differences in their attitudes and behaviour, and recommend revisions to the program.

*YWCA Vancouver*, 535 Hornby Street,  
Vancouver, BC V6C 2E8, Tel: (604) 895-5800,  
Fax: (604) 684-9171

## **Group Programs**

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### **1) Fresh Start Quit Smoking Program**

This 16-hour group program is designed to help smokers make the decision to quit and to support their efforts to stay smoke-free. The program format includes volunteer facilitators, group discussion and informative videos. Participants look at their reasons for smoking and learn coping skills, relaxation techniques, weight management and strategies for staying off cigarettes. Short-term and long-term health effects of smoking are also discussed. Participants are encouraged to set individual quit dates and to develop support networks and strategies for overcoming obstacles as they make a "fresh start."

**Developed by:** Canadian Cancer Society, British Columbia and Yukon Division

**Language:** English

**Target:** General Population

**Region:** British Columbia; Yukon

**Site:** Community-at-large; Health Care Settings; Workplaces (varies with province)

**Cost:** Varies with province

**Evaluation:** In progress

**Note:** Adapted from the Fresh Start Smoking Cessation Course material developed by the Anti-Cancer Council of Victoria, Australia.

*Canadian Cancer Society*, British Columbia and Yukon Division, 565 West 10th Avenue, Vancouver, BC V5Z 4J4, Tel: (604) 872-4400, Fax: (604) 879-4533

## 2) No Puffin

This is a 12-week program that provides support to smokers attempting to quit. Each participant is called three times each week and the group meets once each week. Following the end of the program, participants are called once a month for up to two years and can continue to attend group meetings.

**Developed by:** No Puffin Smoking Cessation Clinics

**Language:** English

**Target:** General Population

**Region:** Surrey-Whiterock-Delta area, BC

**Site:** Community-at-large; Health Care Settings

**Cost:** \$10

**Evaluation:** No formal evaluation to date.

Maureen Roberts, *No Puffin Smoking Cessation Clinics*, 14878 25th Avenue, White Rock, BC V4P 1N8, Tel: (604) 536-4357, Fax: (604) 581-2997

## Counselling Programs

### 1) The Smokers' Approach to Stopping Smoking Video

This video is a 40-minute counselling session with Dr. Frederic Bass for people who are starting to think about quitting smoking or those who have decided to quit and would like assistance. Dr. Bass is a physician who heads the B.C. Doctors' Stop Smoking Program and is an expert in smoking cessation. The session allows viewers to identify with people who are at different stages of readiness to stop smoking. Smokers in a group discussion led by Dr. Bass talk frankly about the obstacles faced in trying to quit and the benefits of quitting. In following the smokers in the group through the stages of change, viewers gain a practical understanding of the quitting process.

**Developed by:** M.C. Productions with support from Health Canada

**Language:** English

**Target:** General Population

**Region:** Canada

**Site:** Community-at-large; Health Care Settings; Workplaces

**Cost:** \$24.95 plus shipping & handling

**Evaluation:** No formal evaluation to date *Public Broadcasting Group Inc.*, Toll-free: 1-800-636-3637



# International

## Self-help Programs/ Counselling

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### 1) Lifesign

A hand-held computer develops an individual cessation program based on the smoker's existing pattern of smoking. The program includes a pamphlet that explains withdrawal symptoms and suggests ways to deal with them. A video tape entitled "How to Make the Most of Your Lifesign Program" and an audio cassette entitled "21 Best Kept Secrets of Successful Quitters" are also available but only in English.

*Developed by:* Health Innovations

*Language:* English; French; Spanish; Japanese; Arabic; Swedish; German

*Target:* General Population

*Region:* Canada

*Site:* Community-at-large

*Cost:* Computer with program guide: \$89.95 + \$7.50 postage & handling (US funds); Video tape (English only): \$19.95 (US funds); Audio cassette (English only): \$7.95 (US funds)

*Evaluation:* A 1992 study of the Lifesign program compared two groups of smokers: 25 smokers who used Lifesign alone and 24 smokers who used Lifesign in combination with therapist assistance. A third group of 22 smokers were in a "wait list" control group. At the 18-month follow-up point, 24% of participants who had used Lifesign alone and 36% of participants who used Lifesign with therapist assistance were smoke-free. Continuous abstinence rates were 12% and 22%, respectively. Rates of cessation were determined on the basis of individual self-reports and measurements of carbon monoxide in participants' breath. The evaluation is

published as: Jerome, A., R. Perrone, and G. Kalfus. "Computer-Assisted Smoking Treatment: A Controlled Evaluation and Long-Term Follow-Up," *Journal of Advancement in Medicine*, Vol. 5, No. 1, Spring 1992.

**Note:** Lifesign can be integrated into a group smoking cessation program in the workplace or other settings.

*PICS – Personal Improvement Computer Systems*, 12007 Sunrise Valley Drive, Suite 480, Reston, VA 22091, Toll-free: 1-800-543-3744, Tel: (703) 758-1400, Fax: (703) 758-1799

### 2) Smokers Learn How to Quit Kit

Two separate programs are included in each kit: one designed for individuals using the nicotine patch, and one for individuals who are not using the patch. The kit consists of an audio cassette that guides participants through a comprehensive step-by-step quit-smoking program and an interactive behaviour modification workbook. Subjects discussed include coping strategies and weight management, as well as gradual nicotine reduction and positive reinforcement. Participants can access counselling assistance through Smokers' toll-free line.

*Developed by:* Smokers International

*Language:* English

*Target:* General Population

*Region:* Canada

*Site:* Community-at-large

*Cost:* \$129 (US funds)

*Evaluation:* No recent formal evaluation

*Smokers International*, Toll-free: 1-800-828-4357

### **3) National Cancer Institute's Beat the Smokeless Habit**

This 16-page self-help guide was originally designed for male athletes but is a valuable resource for all males who are smokeless tobacco users. Professional baseball players are featured prominently throughout the booklet with pictures and insightful quotes from stars of major league teams. The booklet begins with facts about smokeless tobacco, including signs of early and hard-core addiction. A "9 inning game plan" guides participants through deciding to quit, picking a quit date, preparing to quit and successfully staying off smokeless tobacco. After identifying reasons for quitting, participants are asked to taper down and restrict when and where they use smokeless tobacco while building a support team. Information is provided on nicotine patches and gum, withdrawal symptoms, coping strategies after quit day and how to deal with slipping back into smokeless tobacco use.

**Developed by:** National Cancer Institute; National Institutes of Health, US

**Language:** English

**Target:** Smokeless Tobacco Users

**Region:** Canada

**Site:** Community-at-large

**Cost:** Single copies available without cost

**Evaluation:** Status unknown

**Note:** Single copies can be ordered only by mail or fax in Canada. Telephone access in the United States is through a toll-free line: 1-800-422-6237.

Office of Cancer Communications –  
Publications, *National Cancer Institute*, Building 31,  
Room 10A-16, 9000 Rockville Pike, Bethesda,  
MD 20892-2580 (no direct telephone access from  
Canada), Fax: (301) 402-2594

### **4) Smokenders**

Smokenders provides smoking cessation counselling in two group program formats, all based on a comprehensive behaviour modification approach. Premier Program: In this program, participants are guided through a four-week preparatory phase and a two-week post-quitting phase in six seminars conducted by trained graduates of Smokenders. The Premier Program is available in the workplace and, in selected cities, also to the public. Corporate Program: This program trains company employees to guide smoking employees through a cessation program using the *Smokenders Learn How to Quit* self-help kits.

**Developed by:** Smokenders International

**Language:** English

**Target:** General Population

**Region:** Canada

**Site:** Community-at-large; Workplaces

**Cost:** Premier Program: \$250 (US) per participant; Corporate Program: \$1,750 (US) for a two-day training workshop for up to three designated facilitators at Smokenders' headquarters (training at the employer's office can be arranged, cost varies with specific situation) plus \$89 to \$129 (US) for each participating smoker's materials (depending on number of participants)

**Evaluation:** No recent formal evaluation  
Smokenders estimates a cessation rate of about 52% for participants one year after taking the program.

*Smokenders International*, Toll-free: 800-828-4357

# National

## Self-help Programs

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### 1) Quit 4 Life

The Quit 4 Life kit is packaged in a compact disc case which contains a self-help booklet that gives teenage smokers options and solutions to help them through the quitting process; a tracking form to record cigarettes smoked and reasons for smoking; a two-sided “wheel” that shows how much money a person saves by quitting smoking and suggests ways of coping with withdrawal symptoms; a list of tips for friends of the smoker; and a smoking cessation “contract.” The content is designed to be positive, supportive and realistic, and does not minimize the difficulties of quitting.

**Developed by:** Health Canada, Lung Association

**Language:** English; French

**Target:** Youth – General

**Region:** Canada

**Site:** Community-at-large

**Cost:** (None)

**Evaluation:** A formal evaluation was carried out in 1994 by Price Waterhouse using a sample of 1,477 smokers aged 15 to 19 who had received the kit. In the four- to six-month interval after receiving the kit, 635 participants were interviewed and 24.1% reported that they had quit smoking; 17.2% reported that they had reduced the amount smoked and maintained a reduced level of consumption; 43.6% had stopped temporarily; 6.3% temporarily reduced the amount smoked; and 8.8% reported no change in their smoking patterns. An analysis of these results with conservative assumptions gave an estimated cessation rate of 10.4% for the larger sample group. The results of this evaluation are available from Health Canada.

**Note:** The information in this self-help kit has been adapted for a group smoking cessation program for teens. Health Canada’s Web site: [www.tobacco-control.com](http://www.tobacco-control.com)

### 2) Quit for Good: The latest advice on how to give up cigarettes

This 50-page 8” by 4” self-help booklet begins with a quiz to help participants understand why they smoke and the role cigarettes play in their daily lives. After identifying reasons why they want to quit, participants are asked to set a firm quit date and prepare by involving a friend or family member, switching brands and cutting down the amount smoked. A variety of strategies for successfully getting through quit day and preventing relapse are provided. This booklet is included in the Canadian Cancer Society’s *Quit for Good Kit* for physicians who want to help patients stop smoking.

**Developed by:** Canadian Cancer Society

**Language:** English; French

**Target:** General Population

**Region:** Canada

**Site:** Community-at-large

**Cost:** None

**Evaluation:** Status unknown

### 3) The Smokers’ Approach to Stopping Smoking Video

This video is a 40-minute counselling session with Dr. Frederic Bass for people who are starting to think about quitting smoking or those who have decided to quit and would like assistance. Dr. Bass is a physician who heads the B.C. Doctors’ Stop Smoking Program and is an expert in smoking cessation. The session allows viewers to identify with people who are at different stages of readiness

to stop smoking. Smokers in a group discussion led by Dr. Bass talk frankly about the obstacles faced in trying to quit and the benefits of quitting. In following the smokers in the group through the stages of change, viewers gain a practical understanding of the quitting process.

**Developed by:** M.C. Productions with support from Health Canada

**Language:** English

**Target:** General Population

**Region:** Canada

**Site:** Community-at-large; Health Care Settings; Workplaces

**Cost:** \$24.95 plus shipping & handling

**Evaluation:** No formal evaluation to date

*Public Broadcasting Group Inc.,*  
Toll-free: 1-800-636-3637

#### **4) How to Be a Happy Ex-Smoker** *Comment devenir un ex-fumeur et rester de bonne humeur*

This interactive, self-help booklet helps smokers understand their addiction, explains what is involved in quitting and provides help in choosing an effective cessation method. Prior to quit day, participants monitor their smoking behaviour and learn about dealing with urges to smoke by recording when they have each cigarette and what they are doing at that time. Two methods of stopping smoking are discussed: quitting “cold turkey” and gradually cutting down the amount smoked. After being encouraged to celebrate quit day, participants are given information about withdrawal symptoms, the benefits of quitting and how to prevent relapse. The booklet is 25 pages in a pamphlet format.

**Developed by:** Canadian Cancer Society

**Language:** English; French

**Target:** General Population

**Region:** Canada

**Site:** Community-at-large

**Cost:** None

**Evaluation:** No formal evaluation (Contact your local office of the Canadian Cancer Society.)



# Toll-Free Quit Lines

## Ontario

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### **Smoker's Helpline 1-877-513-5333**

The Smoker's Helpline has been developed and is operated by the Ontario Division of the Canadian Cancer Society with funding from the Ministry of Health and Long Term Care's Ontario Tobacco Strategy. Callers to Smoker's Helpline's province-wide, toll-free number, 1-877-513-5333, receive free information, advice and support from trained Quit Specialists. This bilingual service is designed for all smokers, whether or not they are interested in quitting and for family and friends who would like to help someone quit smoking. Promotional materials are provided to health care providers to pass along to their clients. The Smoker's Helpline is open from 10 a.m. to 6 p.m. After hours and on weekends, callers are invited to leave a message and a Quit Specialist will return the call during service hours. Intervention protocols are evidence-based, a computerized database supports caller interaction, and a strong evaluation component has been built into the design and operations. Quit Specialists are guided from screen to screen by the callers's requests and by answers to assessment questions. Each of more than 50 separate, but linked screens contains assessment questions, information and recommended counselling directions for each topic the Quit Specialists need to provide every caller with a unique, tailored intervention, suited to his or her needs. Based on literature reviews and continuing consultation with Canadian and international experts, the Smoker's Helpline is providing a state-of-the-art program for Ontarians. In addition to the telephone intervention, callers can receive material about quitting smoking, suited to their stage of change. Materials are available in both French and English. Also, callers who request information about local programs are provided with contact information for their local Health Unit.

For more information or to receive a one-page promotional flyer about Smoker's Helpline, please contact Kevin McDonald, Communications Officer, Smoker's Helpline at (905) 387-4322 x 630 or E-mail: kevin.mcdonald@hrcc.on.ca.

## British Columbia

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### **Canadian Cancer Society QuitLine 1-877-455-2233 (toll-free)**

The CCS QuitLine is a province-wide telephone smoking cessation program that provides information and skills which will help callers during the first few weeks that they attempt to quit. The QuitLine is funded by the B.C. Ministry of Health. This quit smoking program provides support/advice on different quitting techniques, withdrawal symptoms, maintenance strategies and relapse prevention training. Special emphasis will be placed on developing a "Quit plan." A tobacco use reduction specialist will provide confidential, individualized support through a series of outreach calls at regular scheduled times during the quitting process.

## Alberta/Northwest Territories

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### **Canadian Cancer Society Cancer information 1-888-939-3333**

The Cancer Information Service provides Canadians with the latest information on almost every aspect of cancer. The Canadian Cancer Society is concerned about the use of tobacco products and is committed to helping Canadians not to smoke. It has also become a valuable source

of information for health professionals, patients, friends and family, and the general public. Callers will speak with specially trained cancer professionals who can provide information on a wide range of tobacco-related cancer topics and help callers find programs and services in their region. The toll-free number lines are open between 9 a.m. and 6 p.m. Monday to Friday. Information can be tailored to give as much or as little detail as the caller requests, in English or in French. The toll-free Cancer Information Service Line for Northwest Territories Aboriginal Languages can be reached at 1-888-261-4673. Languages include Chipewyan, North Slavey, Gwich'in, Inuktitut, Innuinnaqtun, Dogrib, Innuvialuqtun, and South Slavey. Today, people want more control over their health care, but it can be difficult to know what information can be trusted. The Canadian Cancer Society has made it simple. The Cancer Information Service provides all Canadians with equal access to reliable information.

# Tobacco Web Sites

## National

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### 1) Tobacco Control Programme [www.tobacco-control.com](http://www.tobacco-control.com)

Health Canada's Tobacco Control Programme Web site gives current and general information on several divisions of the branch: 1) Regulations & Compliance 2) Policy & Planning 3) Prevention, Cessation & Education 4) Research, Evaluation & Surveillance.

### 2) Quit 4 Life [www.quit4life.com](http://www.quit4life.com)

Quit for Life is a youth cessation self-help kit that addresses smoking-related issues, is relevant to teenage boys and girls, and can also be used in a group format. The kit consists of visual material that includes body image, lifestyles, daily stresses, emotions and general cessation techniques.

### 3) School Net [www.schoolnet.ca](http://www.schoolnet.ca)

Established in 1993, Canada's SchoolNet is designed to promote the effective use of information technology among Canadians by helping Canadian schools and public libraries connect to the Internet. Through its partnerships with provincial and territorial ministries of education, library authorities, education and the private sector, Industry Canada's SchoolNet has successfully made Canada the first nation in the G8 to connect its schools and public libraries to the Information Highway.

### 4) Youth Advisory Committee (YAC) [www.tobacco-control.com](http://www.tobacco-control.com)

The Youth Advisory Committee provides advice directly to the Health Minister on the design and implementation of programs targeted to youth and on ways to reach out to a young audience and to engage them in tobacco issues.

### 5) Aboriginal Tobacco Control Program [www.hc-sc.gc.ca/msb/fnihp/tobacc\\_e.htm](http://www.hc-sc.gc.ca/msb/fnihp/tobacc_e.htm)

## Provinces/Territories

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### Nova Scotia

#### 1) Smoke-Free Places [www.gov.ns.ca/health/smoke\\_free/default.htm](http://www.gov.ns.ca/health/smoke_free/default.htm)

The Government of Nova Scotia's tobacco site

#### 2) Breton Education Centre [www.cbv.ns.ca/bec/smoking.htm](http://www.cbv.ns.ca/bec/smoking.htm)

### New Brunswick

#### 1) Comprehensive Tobacco Reduction Strategy Health and Wellness [www.gov.nb.ca/hw-sm/hw/index.htm](http://www.gov.nb.ca/hw-sm/hw/index.htm)

#### 2) Family and Community Service [www.gnb.ca/fcs-sfc/index.htm](http://www.gnb.ca/fcs-sfc/index.htm)

### Quebec

#### 1) Info-tabac: "J'arrette? C'est possible..." [www.arrette.qc.ca/](http://www.arrette.qc.ca/)

#### 2) Le réseau de la santé – Government of Quebec [www.gouv.qc.ca/santé/](http://www.gouv.qc.ca/santé/)

### Ontario

#### 1) Ontario Tobacco Research Unit (OTRU) [www.arf.org:80/otru](http://www.arf.org:80/otru)

OTRU is a unit of the Centre for Health Promotion

#### 2) Program Training and Consultation Centre [www.opc.on.ca/ptcc](http://www.opc.on.ca/ptcc)

#### 3) Government of Ontario's Web site [www.gov.on.ca/health/english/program/tobacco](http://www.gov.on.ca/health/english/program/tobacco)

- 4) The Council for Tobacco Free Ontario  
[www.opc.on.ca/ctfo](http://www.opc.on.ca/ctfo)

### **British Columbia**

- 1) BC Ministry of Health  
[www.hlth.gov.bc.ca](http://www.hlth.gov.bc.ca)  
The Government of British Columbia's tobacco site
- 2) British Columbia's Tobacco Strategy  
[www.hlth.gov.bc.ca/tobacco/index.html](http://www.hlth.gov.bc.ca/tobacco/index.html)
- 3) Prevention Source BC  
[www.preventionsource.bc.ca/](http://www.preventionsource.bc.ca/)
- 4) Tobacco Facts  
[www.tobaccofacts.org](http://www.tobaccofacts.org)
- 5) BC Doctor's Stop Smoking Program  
[www.bcdssp.com](http://www.bcdssp.com)

### **Newfoundland**

- 1) Government of Newfoundland and Labrador  
[www.gov.nf.ca/health/programs.htm](http://www.gov.nf.ca/health/programs.htm)

### **Prince Edward Island**

- 1) Government of Prince Edward Island  
[www.gov.pe.ca/hss.index.asp](http://www.gov.pe.ca/hss.index.asp)

### **Saskatchewan**

- 1) Government of Saskatchewan  
[www.gov.sk.ca/govt/health](http://www.gov.sk.ca/govt/health)

### **Manitoba**

- 1) Government of Manitoba  
[www.gov.mb.ca/index.shtml](http://www.gov.mb.ca/index.shtml)

### **Alberta**

- 1) Government of Alberta  
[www.health.gov.ab.ca/](http://www.health.gov.ab.ca/)
- 2) Alberta Tobacco Reduction Alliance  
[www.atra.ab.ca/](http://www.atra.ab.ca/)

### **Northwest Territories**

- 1) Government of Northwest Territories  
[www.gov.nt.ca/hlthss](http://www.gov.nt.ca/hlthss)

### **Nunavut**

- 1) Nunavut Health and Social Services Boards  
[www.nunavut.com/health/english/contacts](http://www.nunavut.com/health/english/contacts)

### **Yukon**

- 1) Yukon College, Host of the Tobacco Reduction Strategy  
[www.yukoncollege.yk.ca/](http://www.yukoncollege.yk.ca/)

Yukon Territory's Tobacco Reduction Strategy provides support for people trying to quit, public education, and emphasizes involvement of youth in program development and events.

## **Other Organization**

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- 1) Centre for Addiction and Mental Health  
[www.camh.net/](http://www.camh.net/)

The creation of the Centre for Addiction and Mental Health has opened a unique opportunity to expand the range and accessibility of services for people with alcohol and other drug problems. By bringing together the Addiction Research Foundation and the Donwood Institute, the Centre combines two of Canada's largest providers of addiction treatment. The result is an integrated continuum of services, from assessment and outpatient counselling to intensive day and residential treatment and aftercare.

- 2) Canadian Cancer Society: Tobacco  
[www.cancer.ca/tobacco/](http://www.cancer.ca/tobacco/)

The Canadian Cancer Society is committed to helping Canadians choose not to smoke, or to quit if they are already smokers. This Web site provides educational information to help prevent smoking, about the hazards of second-hand smoking, and about how to quit smoking.

3) Canadian Heart and Stroke Foundation

<http://www.na.heartandstroke.ca/>

The Canadian Heart and Stroke Foundation Web site gives the most reliable and updated source of tobacco-related heart disease and stroke information.

4) Canadian Lung Association

[www.lung.ca/](http://www.lung.ca/)

The Canadian Lung Association's Web site has programs on smoking prevention and smoking cessation which are offered to the general public on a regular basis, as well as support group.

5) Canadian National Clearinghouse on Tobacco and Health [www.cctc.ca/ncth/](http://www.cctc.ca/ncth/)

The Canadian National Clearinghouse Web site provides easy access to tobacco use prevention and reduction programs, projects, and advocacy initiatives with the objectives of contributing to the goal of a tobacco-free Canada.

7) Non-Smokers' Rights Association

[www.nsra-adnf.ca/](http://www.nsra-adnf.ca/)

The Non-Smokers' Rights Association is a non-government organization which is dedicated to achieving clean air for non-smokers. It promotes health through prevention.

8) Physicians for a Smoke-Free Canada

[www.smoke-free.ca](http://www.smoke-free.ca)

Founded in 1985, PSC represents almost 1,500 doctors from across Canada. The organization is known for its outspoken opposition to tobacco marketing (especially when it's aimed at children) and its public awareness work.



# Evaluation

## American Lung Association

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### “Freedom from Smoking” & “In Control”

**Title:** “Self-help smoking cessation and maintenance programs: a comparative study with 12-month follow-up by the American Lung Association”

**Authors:** Davis, A.L.; Faust, R.; Ordentlich, M.

**Source:** Am J Public Health 1984 Nov; 74(11):1212–7 Citation IDS: PMID: 6437257 UI: 85044445

**Abstract:** 1,237 seven smokers responding to lung association announcements in five geographic areas were randomly assigned to one of four groups and mailed American Lung Association materials: 1) leaflets (L); 2) leaflets plus maintenance manuals (C+M). Five telephone interviews over one year achieved a 95% follow-up completion rate. Non-respondents as well as exclusive cigar and pipe users were classified as smokers. Twenty percent quit initially, with 5% continually abstinent in (C+M) at 12 months vs. 2 in (L) ( $p$  less than .05) non-smoking prevalence rates (no tobacco smoking in the past month). On the other hand, gradually increased after six months; at 12 months those with the maintenance component, (L+M) and (C+M), had higher rates (18%) than (L) (12%) or (C) (15%). Leaflets and manual alone were least cost-effective. Rising non-smoking prevalence rates observed in all groups suggest that successful attempts to quit increased over time and that a contributing factor might have been the follow-up method. Although achieving lower quit rates than methods requiring attendance at a course, the self-help intervention has the advantages of greater availability, flexibility, and in some instances lower cost.

**Title:** “An evaluation of the American Lung Association’s home video smoking cessation program”

**Authors:** Marston, A.R.; Bettencourt, B.A.

**Affiliation:** Department of Psychology, University of Southern California, University Park, Los Angeles 90089-1061

**Source:** Am J Public Health 1988 Sep; 78(9): 1226–7 Citation IDS: PMID: 3407829 UI: 88307740

**Abstract:** 101 participants received “In Control: A Home Video Freedom from Smoking Program.” Of 53 completing self-treatment, 31 were verified by CO testing as abstinent one month after completion. Twenty-one percent of the sample (40% of those completing treatment) had not smoked in the past three months prior to 12-month follow-up and 16% of the total sample (30% of those completing treatment) had not smoked at all in the past 11 months.

**Title:** “The cost-effectiveness of three smoking cessation programs”

**Authors:** Altman, D.G.; Flora, J.A.; Fortmann, S.P.; Farquhar, J.W. Source: Am J Public Health 1987 Feb; 77(2): 162–5 Citation IDS: PMID: 3099586 UI: 87097682

**Abstract:** This study analyzed the cost-effectiveness and distribution of costs by program stage of three smoking cessation programs: a smoking cessation class; an incentive-based quit smoking contest; and a self-help quit smoking kit. The self-help program had the lowest total cost, lowest percent quit rate, lowest time requirement for participants, and was the most cost-effective. The most effective program, the smoking cessation class, required the most time from participants, had the highest total cost and was the least cost-effective.

The smoking contest was in between the other two programs in total costs, percent quit rate and cost-effectiveness; it required the same time commitment from participants as the self-help program. These findings are interpreted within the context of community-based intervention in which the argument is made that cost-effectiveness is only one of several factors that should determine the selection of smoking cessation programs.

**Title:** “Smoking intervention: combination therapy using nicotine chewing gum and the American Lung Association’s ‘Freedom from Smoking’ manuals”

**Authors:** Daughton DM; Kass I; Fix AJ; Ahrens K; Rennard SI

**Source:** *Prev Med* 1986 Jul; 15(4): 432–5 Citation IDS: PMID: 3763565 UI: 87016806

**Abstract:** The smoking cessation efficacy of a two-session group program using the American Lung Association’s “Freedom from Smoking” self-help manuals, nicotine gum and brief, repeated professional supervision was estimated in an uncontrolled clinical trial. Of the 39 participants, 12 (31%) remained cigarette free for one year, and four others (10%) had not smoked during the three months prior to the one year follow-up. Claims of cessation were verified by expired-air carbon monoxide measurement. Nearly all successful abstainers were able to achieve 48-hour cessation during their first week using the gum. This finding suggests that nicotine gum is best used to help smokers quit abruptly, rather than as an aid in a tapering-off strategy. This study’s smoking intervention program appears to provide a relatively low-cost method of improving the success rates among smokers who wish to quit.

## Canadian Cancer Society (Ontario)

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### Smoker’s Helpline – Evaluation

Preliminary results indicate that at the completion of each call, Quit Specialists ask callers if they are willing to answer some demographic and smoking status questions. Callers are also asked if they are willing to have researchers from the University of Waterloo contact them in 28 days to ask questions about smoking status and about the service they received from the Smoker’s Helpline.

- 96% of callers reported that they were able to speak to someone promptly.
- 90% of callers reported that they were either satisfied or very satisfied with the service they received.
- 39% of callers subsequently made a quit attempt.
- Of the remaining 61%, 31% set a quit date, 65% cut down, and only 3% took no action.



# Other Resources

## **Ontario Tobacco Research Unit Directory (1999)**

“The Ontario Tobacco Research Unit (OTRU) was established by the Ministry of Health in July 1993 as the focal point for a provincial tobacco control behavioural research network. Our mission is to undertake a program of research, development and dissemination of knowledge about effective tobacco control programs and policies. We play a leading role in monitoring the Ontario Tobacco Strategy.” This book contains a listing of various individuals associated directly or indirectly with tobacco cessation programs.

*Principal Sponsor:* Centre for Health Promotion – University of Toronto

*Co-Sponsors:* Centre for Addiction and Mental Health, Central West Health Planning Information Network, Queen’s University, University of Waterloo, University of Ottawa

*Address:* Ontario Tobacco Research Unit, 33 Russell Street, Toronto, ON M5S 2S1, Tel: (416)-595-6888, Fax: (416) 595-6068, Web site: <http://www.arf.org/otru>

## **Monitoring the Ontario Tobacco**

*Strategy:* Smoking Cessation in Ontario 1998/1999

The purposes of this report are to present current trends in quitting smoking in Ontario using recent survey data; provide up-to-date scientific evidence on the efficacy of various quitting interventions; and provide a listing of smoking cessation programs and resources.

*Principal Sponsor:* Centre for Health Promotion, University of Toronto

*Co-Sponsors:* Centre for Addiction and Mental Health, Central West Health Planning Information Network, University of Waterloo, University of Ottawa

*Address:* Ontario Tobacco Research Unit, 33 Russell Street, Toronto, ON M5S 2S1, Tel: (416) 595-6888, Fax: (416) 595-6068, E-mail: [otru@camh.net](mailto:otru@camh.net); Web site: <http://arf.org/otru>

## **Program Resources for Tobacco Control Catalogue 2000**

This catalogue is designed to assist individuals working in tobacco control to identify and locate appropriate resources for community planning and implementation. It has been developed by the Program Training and Consultation Centre, a resource centre of the Ontario Tobacco Strategy, funded by the Ontario Ministry of Health and Long Term Care. It is a partnership of the Ottawa-Carleton Health Department, RBJ Health Management Associates and the Centre for Applied Health Research at the University of Waterloo. Program Training and Consultation has a mandate to provide training and consultation on tobacco use reduction programming to public health units, inter-agency councils on smoking and health, and community health centres.

*Address:* Program Training and Consultation Centre, c/o Ottawa-Carleton Health Department, 495 Richmond Road, Ottawa, ON K2A 4A4, Tel: (800) 363-7822 or (613) 722-2242, Fax: (613) 724-4116, <http://www.ptcc.on.ca/rds/index/html>

**National numbers for help and information  
on tobacco**

Canadian Cancer Society  
Toll-free: 1-888-939-3333

Canadian Lung Association  
Toll-free: 1-888-566-LUNG

National Clearinghouse on Tobacco and Health  
Toll-free: 1-800-267-5234

Heart and Stroke Foundation  
Toll-free: 1-888-473-4636

Ministry INFOline (Ontario Only)  
Toll-free: 1-800-268-1154

Health Action Line  
Toll-free: 1-800-660-5853

# Other Options

In addition to the self-help materials, group programs and counselling programs listed in this inventory, a number of other treatment approaches, products and counselling services are available to help people quit smoking.

This section provides a brief review of other smoking cessation options, based on the following articles and reports:

- Fiore, M.C. et al. "Tobacco Dependence and the Nicotine Patch: Clinical Guidelines for Effective Use," *Journal of the American Medical Association*, 1992; 268: 19: 2687–2694.
- McKenna, J.P. and Cox, J.L. "Transdermal Nicotine Replacement and Smoking Cessation," *American Family Physician*, 1992; 45: 6: 2595–2601.
- Repchinsky, Carol. "Drug Brief: Nicotine Replacement Therapy," *Canadian Pharmaceutical Journal*, March: 1993: 87–88.
- Shwartz, Jerome L. *Review and Evaluation of Smoking Cessation Methods: The United States and Canada*, 1978–1985. National Cancer Institute: U.S. Department of Health and Human Services, Public Health Service, National Institutes of Health, 1987. NIH Publication No. 87-2940.
- Shwartz, Jerome L. "Methods for Smoking Cessation," *Clinics in Chest Medicine*, 1991; 12: 4: 737–753.
- "Illnesses Possibly Associated with Smoking Clove Cigarettes," *Morbidity and Mortality Weekly Report*, U.S. Centers for Disease Control, 1985; 34: 21: 297–299.
- *Information Alert: Tobacco-less Cigarettes*, Addiction Research Foundation, October 1993.

- "Quick Reference Guide for Clinicians Treating Tobacco Use and Dependence" available at: [www.surgeongeneral.gov/tobacco/tobaqrg.htm](http://www.surgeongeneral.gov/tobacco/tobaqrg.htm)
- Rethinking Stop-Smoking Medications: Myths and Facts – Ontario Medical Association, June 1999. <http://www.oma.org/phealth/stopsmoke.htm>

It is important to remember that smoking cessation requires a high level of motivation to be successful—there is no magic potion. A plan to maintain and reinforce the decision to quit is needed to remain smoke-free in the long term.

## Acupuncture

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*Acupuncture is based on the Chinese science of energy pathways in the body. This approach is based on the theory that fine needles or staple-like attachments placed in the skin at strategic points will reduce or eliminate cravings to smoke.*

**Evaluation:** Despite the popularity of acupuncture as a treatment for smoking cessation, there is no reliable scientific evidence that it promotes cessation or relieves withdrawal symptoms. Most evaluation reports have been poorly constructed and produced unreliable results. Shwartz concludes that acupuncture may act as a "placebo" to assist the smoker in coping with the physical addiction to tobacco. However, the psychosocial dependency on smoking must also be addressed in order to successfully quit. Therefore, the effectiveness of acupuncture is likely to increase if behavioural modification programs or counselling are undertaken as well.

## Aversion Therapy

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*Aversion therapy is designed to strongly associate an unpleasant sensation, such as nausea, with smoking. When a situation triggers the desire to smoke, the smoker recalls the disagreeable sensation and the desire fades. Aversive techniques include mild electric shock; breath holding; rapid smoking; unpleasant taste, noise or smell; and imagined stimuli. A once popular method, aversion therapy is no longer common.*

**Evaluation:** According to Shwartz, past reviews found aversive therapies generally yielded a wide range of results. Evaluations can be difficult to interpret due to methodological problems. The most promising aversion technique is rapid or excessive smoking. However, concern over possible health effects on the heart and lungs limit the use of rapid smoking in the absence of proper screening procedures, monitoring and medical back-up.

## Hypnosis

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*Hypnosis is a focused state of attention during which individuals become more responsive to suggestions. Hypnotic therapy attempts to motivate smokers to change their attitudes toward tobacco. It may also try to counter the rationalizations smokers use to maintain their addictive behaviour. Treatment by hypnosis can be offered to individuals or groups, in single or multiple sessions.*

**Evaluation:** According to Shwartz, reports regarding the effectiveness of hypnosis as a cessation technique are contradictory. From a review of over 50 reports and critiques, Shwartz concludes that the use of hypnosis to control smoking produces modest results when used alone, but when combined with behavioural modification programs or counselling, success rates are increased. Although some reports show high rates of quitting at the time of treatment, importance must be placed on remaining smoke-free for the long term. The therapist's skill and experience are critical to the proper use of hypnosis.

## Laser Therapy

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*Laser therapy is based on the same theory as acupuncture, but instead of needles, laser beams are used. Proponents of the treatment claim that laser beams relieve symptoms of physical craving for nicotine by triggering a release of the brain's natural opiates or endorphins.*

**Evaluation:** A relatively new technique in Canada, there is no scientific validation for the high success rates attributed to laser therapy.

## Over-the-Counter Products

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*There are a number of anti-smoking gums, lozenges and other substances which aim to ease nicotine withdrawal or make cigarettes taste bad by causing an unpleasant body reaction to nicotine. Unlike nicotine gum or patches, these products do not contain nicotine.*

**Evaluation:** None of these products has been scientifically proven to be effective.

## Nicotine Replacement Therapy

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Nicotine, psychological dependence and handling habits are the three key elements of tobacco addiction. Nicotine replacement therapy (NRT) is intended to decrease most physical symptoms of withdrawal associated with smoking cessation to allow the smoker to concentrate on dealing with the behavioural aspects of the addiction. NRT does not prevent any weight gain that may be associated with smoking cessation. But, the average weight gain after quitting is just five pounds. There is some evidence that NRT is most helpful to people who smoke one or more packs a day.

*Complete abstinence from cigarettes and other tobacco products is necessary during NRT to avoid potentially life-threatening adverse reactions.*

## Nicotine Gum (nicotine polacrilex)

*Nicotine polacrilex (marketed under the brand name, Nicorette) is a sugar-free gum containing nicotine. The nicotine is slowly released upon chewing and absorbed through tissues of the mouth. It is available in a 2 mg strength (without prescription) and 4 mg strength (with or without prescription only). Use of the gum is gradually reduced in following weeks. It is intended to be used for up to six months.*

**Evaluation:** While nicotine gum relieves some withdrawal symptoms, it does not deal with the behavioural aspects of addiction. Clinical trials show that nicotine gum, when used with some type of support, counselling or program, can be an effective aid in quitting smoking. Proper instructions on its use are needed to maximize its effectiveness. Possible side effects of nicotine gum include jaw fatigue, gastrointestinal upset, nausea, constipation and hiccups. Nicotine gum should not be used by: pregnant women, nursing mothers, people with temporomandibular joint disease, and individuals with angina or other cardiac conditions. It may also aggravate hypertension, diabetes and peptic ulcers.

## Transdermal Nicotine Patch

*This nicotine patch provides a rate-controlled delivery of nicotine absorbed through the skin. The patch is marketed under several different brand names, all delivering different dosages of nicotine. Depending on the brand used, patches are designed to be worn for either 16 or 24 hours and the duration of therapy varies anywhere from 6 to 12 weeks or more. A course of therapy uses two or three different strengths of patches, beginning with a higher dose and decreasing to a lower dose.*

**Evaluation:** Clinical trials have shown the patch to be effective in helping some individuals achieve smoking cessation, particularly when used in combination with counselling, cessation programs or other support. The most common side effect is skin irritation at site application. Mild to moderate insomnia, headache, dizziness and nausea have also been reported by some users. The patch should

not be used by pregnant women, nursing mothers, occasional smokers, people with angina or other cardiac or cardiovascular conditions, and individuals who have had a recent cerebral vascular incident (stroke or aneurysm).

## Physician and Other Health Professional Intervention

*Some people can be helped by strong advice and counselling from their physician, dentist or other health care professional. Individuals considering quitting can ask their health care provider to review the health reasons for quitting smoking and to personalize the information by referring to the patient's health status, family background and medical history.*

There are a number of programs available to assist physicians and other health professionals in setting up a counselling program. Some examples are:

- *B.C. Doctors' Stop-Smoking Project*

Dr. Frederic Bass, *B.C. Physicians' Stop-Smoking Project*, SSP/BCMA, 1665 West Broadway, Suite 115, Vancouver, BC V6J 5A4, Tel: (604) 736-1226 ext. 278, Fax: (604) 736-4566

- *Le counseling médical dans l'arrêt tabagique*

*Centre de Santé publique de la région de Québec, Centre de documentation, 2400 d'Estimauville, Beauport, QC G1E 7G9, Tel: (418) 666-7000 ext. 215*

- *Guide Your Patients to a Smoke Free Future*

*Canadian Council on Smoking and Health, 170 Laurier Avenue West, Suite 1000, Ottawa, ON K1P 5V5, Tel: (613) 567-3050, Fax: (613) 567-2730*

- *How to Help Your Patients Stop Using Tobacco: A National Cancer Institute Manual for the Oral Health Team*

*National Cancer Institute, U.S. Department of Health and Human Services, Building 31, Room 10A24, 9000 Rockville Pike, Bethesda, MD 20892-2580, Tel: (301) 496-5583*

- *Quit for Good Kit* (for physicians)

Provincial or local offices of the *Canadian Cancer Society*.

**Evaluation:** Studies indicate that advice from a physician or other health care professional increases the likelihood that patients will attempt to quit smoking. This approach is even more effective when health professionals reinforce the advice with a strong health message, give information on how to quit or provide follow-up support.

## Clove and Herbal Cigarettes

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Over the years, clove and herbal cigarettes have become increasingly popular. Many people may have the false impression that these products are healthier alternatives to smoking tobacco. However, the smoke from any plant products such as marijuana may contain toxins capable of causing long-term damage to the airways and lung tissues. Indeed, there are studies that show marijuana contains cancer-causing tars. The only safe alternative is not to smoke any substance.

### Clove Cigarettes

*Clove cigarettes have become common over the past few years. Many people falsely believe them to be tobacco-free and harmless.*

**Evaluation:** Studies have shown clove cigarettes to contain 60% to 70% tobacco and 30% to 40% cloves. Clove cigarettes produce higher levels of tar, nicotine and carbon monoxide than regular all-tobacco cigarettes and pose the same danger to health as all-tobacco cigarettes. There have been several reports of individuals being hospitalized with life-threatening respiratory illnesses shortly after smoking clove cigarettes. In 1985, the sale of clove cigarettes was banned in the U.S. state of New Mexico.

### Herbal Cigarettes

*The contents of tobacco-less cigarettes vary, depending on the manufacturer. However, none contains nicotine. These cigarettes may contain various herbs like red clover. They are often advertised as aids in smoking cessation.*

**Evaluation:** The public may be left with the impression that herbal cigarettes are a healthy alternative to regular tobacco products and aid in smoking cessation. Even though herbal cigarettes do not contain tobacco, the inhalation of tar and carbon monoxide from burning material is hazardous to health. Herbal cigarettes are not covered by any laws and therefore little is known about what they contain. However, packages of herbal cigarettes often report tar and carbon monoxide values. Manufacturers' claims that smoking herbal cigarettes may help people to quit or reduce consumption of regular tobacco cigarettes are unproven.



