

TOBACCO: A CULTURAL APPROACH TO ADDICTION AND RECOVERY FOR ABORIGINAL YOUTH

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http://www.ayn.ca/quit/manual

A TRIBE CALLED QUIT http://www.ayn.ca/tobacco

This manual and Medicine Bag have an online Internet component located at: http://www.ayn.ca/tobacco

There you can take interactive quizzes, talk to others who are quitting and see the stories in this manual come to life as online comic strips.

There is also a tobacco resource centre that has lots of interesting and informative articles, facts and links.

So launch your favourite Internet browser and visit the Tribe at...

http://www.ayn.ca/tobacco





When a smoker quits, it is often the most difficult thing she or he will ever do in their lifetime. It should be treated with the greatest respect and honoured as a courageous act of life-saving proportions.

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FORWARD

This manual is for the smoker seeking help in recovering from tobacco addiction.

As a smoker, you are in a battle for your life. Nicotine is one of the most powerful and addictive substances that exists. We understand the fear and the frustration of not being able to stop smoking. You are not alone. We recognize that tobacco feels like a best friend and has been a tool for your survival. We see the process of recovery as a healing journey towards freedom where you can live in the world with a respectful relationship towards the sacred use of tobacco. This battle is a challenge to be dealt with one day at a time, one hour at a time, one minute at a time, all in the context of our relationship with ourselves, others and a power greater than ourselves. Cultural traditions help us find our way.

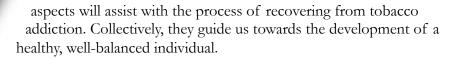
Our approach is developed specifically for those who seek a deeper understanding of the nature of their own addiction and who require concentrated, informed, long-term support. This manual has been designed to help those who want to make changes in their lives and become emotionally independent of smoking. Throughout this manual the term "smoking" is used in order to differentiate the unhealthy use of tobacco from the spiritual uses of tobacco. Therefore, the term "smoking" must also include other unhealthy forms of tobacco use such as snuff and chewing tobacco.

This manual provides practical guidance on how to develop your own effective recovery plan. It is built on a clear perspective as to what leads people into addiction and how they recover by using the addiction model as a framework. There are activities scattered throughout the manual that help you build your plan and support system. This manual is for you. Use it in your own way. Adapt it to suit your own needs, your band's, your community's. Each section of the manual is designed to help you in a different aspect of your recovery.

Medicine Bag

Included with this manual is a second package or workbook which provides an extensive array of tools and resources that can support you in your recovery. The activity sheets from the manual are reprinted here to keep your plan, support system and relapse prevention tools all in one book. This package is called the Medicine Bag. Again, this resource is for you. Use it in your own way. Adapt it to suit your own needs. Each section of the Medicine Bag deals with the traditional holistic healing approach involving the four aspects to our nature; the physical, the mental, the emotional, and the spiritual. Individually each of these





It is intended that both documents be used together. This program has been designed so that each, the Medicine bag and this manual, complement and rely on the other. They have been produced as two separate documents for ease of use.

Murray Kelly and Kendra Smith 16 February 2001 Ottawa, Ontario.



EDITOR'S NOTE

This project began in the summer of 1999. Our goal was to create a program to help Aboriginal youth quit smoking if they already were addicted to nicotine and not to start if they were still non-smokers. This manual you are reading is the result of the first half of our efforts.

This manual and the Medicine Bag build on the groundwork laid by Murray Kelly and Kendra Smith at the Smokers' Treatment Centre in Ottawa and also their groundbreaking work with the Nechi Institute in Edmonton. Their collaboration with Nechi resulted in a stop smoking program that considered the traditional role of tobacco in First Nations culture. Our adaptation of that work once again considers tobacco abuse in a cultural milieu and relates these issues and techniques to Aboriginal youth. In fact our production team were all either Métis or First Nations and in their 20s. This manual was created by Aboriginal youth, for Aboriginal youth.

We would also like to acknowledge the First Nations and Métis bias of this document. The Inuit people that we talked to told us that tobacco has few traditional uses in their culture although it has been traded for hundreds of years. Yet tobacco abuse in Inuit communities is as high, if not higher, than in other communities. It is our hope that our Inuit readers will take what they can use from this manual, despite its limitations.

This was also the first book that any of us had ever worked on, so there are bound to be errors. We would appreciate any feedback you have to give. We would also love to hear if this manual helped you stop abusing tobacco. Good luck in your journey.

Carmen Daniels Aboriginal Youth Network Edmonton, Alberta.



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A special thanks also to Murray Kelly and Kendra Smith who have made it possible for smokers to begin the healing journey.

These materials are adapted, with permission, from "New Tools for Survival, Recovery Manual for Smokers" by Murray Kelly and Kendra Smith, Copyright 1995.

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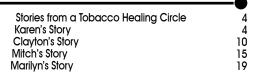


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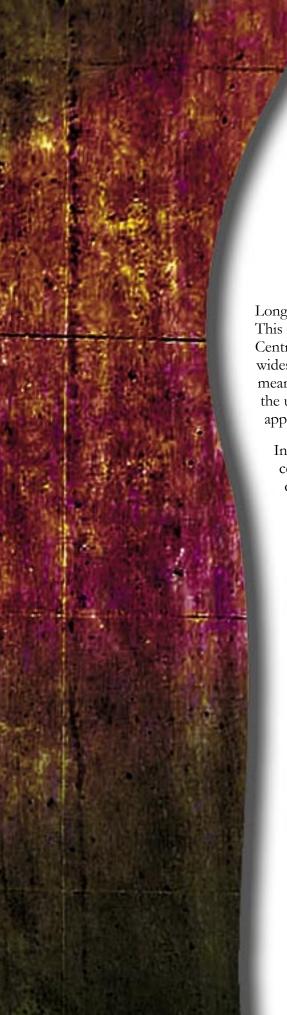
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TRADITIONAL TOBACCO USES

Long before Europeans came to our shores, our people used tobacco. This plant existed only in the Americas and was used in South America, Central America, and North America all the way up to the arctic. With such widespread use, it would be easy to write a whole book on what tobacco meant to the indigenous people of this continent. We will instead focus on the use of tobacco in Canada, although much of the following would also be applicable to most North American groups.

In the north, the Inuit people did not grow tobacco due to environmental conditions. It was simply too cold and the growing period too short to cultivate tobacco plants. This powerfully medicinal plant was traded however and Inuit people, especially in southern areas, used it when it was available. This trade increased with the arrival of European traders and today the Inuit have some of the highest smoking rates in the world.

To most Inuit, tobacco is not a sacred plant, although some use it in ceremonies. Since this is the case, our Inuit readers may want to skip ahead to the "Stories From A Tobacco Healing Circle" section or read on to learn about tobacco use by First Nations and Métis people.

For traditional First Nations and Métis peoples, tobacco is a sacred plant. We honor the traditional use of tobacco by sharing this information with those who use these materials and by acknowledging that some traditions and sacred uses may differ from those below. This is not intended to be a complete summary of all traditional uses but instead is an introduction to the topic.

The traditional spiritual use of tobacco by Aboriginal peoples is a powerful tool which can be used to assist an individual's healing journey. Tobacco plays a part in rituals of symbolic cleansing, decision-making, and communication with spirits and sacred beings. By offering smoke the individual prays for and expresses gratitude for the physical and spiritual necessities of life.

Tobacco has been traditionally used as a means of making a connection to the Spirit World. A common method is to burn the tobacco to produce smoke as an offering to our ancestors. Methods of burning tobacco include placing it on a fire or on coals and even by burning it in the form of a hand-made cigar or cigarette. In this context, the person offering the tobacco would not inhale the smoke but would allow the smoke to rise up and connect with our ancestors and with the Creator. Tobacco smoke is frequently used to cleanse or purify an individual participating in a ceremony, or an object or place to be part of that ceremony. The sharing of the smoke creates a spiritual connection between the person offering it and the spirit receiving it. Ceremonial pipes are frequently used in many different rituals and are themselves of considerable symbolic significance and accordingly, are treated as sacred objects.

Tobacco is not always burned. It is sometimes placed on the ground as an offering to the earth, or on water, or is left in sacred places. It is offered in the spirit of "you give something to get something." It can also be spread over the individual or object as a blessing. Traditionally, when plants or animals or other objects are taken for use, particularly sacred use, by Aboriginal peoples, tobacco is left in its place to acknowledge the gift from Mother Earth and as a sign of respect and gratitude.

DID YOU KNOW?

Tobacco is a sacred plant to First Nations people? Inuit people however do not have the same beliefs.

Tobacco was used alone or in combination or mixture with other plants. The ceremonial use of tobacco occurred once a day, or in special circumstances two or three times at most. Those who smoke ten or twenty times a day are not using tobacco for sacred ceremony but are abusing it. Each of us has the choice to utilize our energies in a healing way or in a negative way. As our Elders have taught us, "It's up to you - you don't get something for nothing." As we will see during our use of these materials and along our healing journey, "everything is related" and as we journey together, the Creator journeys with us.

In times past, the growing and harvesting of tobacco required special rituals and was considered to be a sacred act. Different varieties of the tobacco plant were used, sometimes in combination with other natural plants and sometimes alone, in ceremonies and sacred rituals. In contrast, tobacco-use today, including inhalation, usually has little or no connection with Aboriginal spirituality, while the tobacco itself contains numerous harmful chemicals and impurities which are added by cigarette manufacturers.

The reader is encouraged to explore the specific traditions and rituals which are practiced in their areas by speaking with local Elders, as well as others who are knowledgeable about Aboriginal culture and traditions, in the process of recovery. As with all addictions, spirituality is a critical element in the tobacco addiction recovery process.

SPIRITUALITY AND TOBACCO ADDICTION

Due to the loss of cultural identity over generations, Aboriginal people are still feeling the negative impact of discrimination and abuse. Dysfunction in our Aboriginal communities is a direct result of genocide perpetrated by residential schools, industrial schools, and other agents throughout history.

When trying to recover from addiction, spirituality can help. It gives you a sense of security, purpose, and a sense of belonging. It can help you find your place in the world, give you guidance and help you make important decisions. Most importantly, spirituality helps in the healing process.

For many Aboriginals, life has not followed a traditional path. Due to hard-ships, many have strayed from traditional life. Some have lost their families, either through death or by being taken away at a young age to live in foster homes. Many are living with the painful memories of being sexually, physically, or emotionally abused. Aboriginals also face discrimination by society in general. These negative life experiences have led some to substance abuse and living on the streets. Today, many are starting the healing process. Spirituality is an important element in this journey. It provides balance within ourselves—within our mind, body, spirit and heart, and with the people around us.

For those who have lost their way, Aboriginal culture and tradition can provide a sense of direction. It is a way of life that provides well being, a sense of belonging and hope. It is a gradual process of spiritual and cultural understanding and an acceptance of yourself. This is all part of the healing journey. This manual is here to help you on your healing journey. Each section targets an aspect of the person. It deals with the physical, emotional, mental, and spiritual. You are encouraged to use this manual in a way that best helps you. Only use what will help you with your healing journey.

Spirituality and Aboriginal culture and traditions can be thought of as a road or path or a sense of direction. The sacred principle that "everything is related" is a concept which walks with us on our journey from addiction towards wellness. It is in essence a way of life and is something to be incorporated into the day to day life of the person trying to quit. Over time the individual internalizes the spiritual and cultural influences which are passed on from Elders and others. These in turn provide guidance, a sense of personal identity and ultimately, a way of life for the individual.

This gradual process of spiritual/cultural understanding and acceptance is part of the healing journey.

The Medicine Bag, which is designed to accompany this package, will provide the reader with additional information regarding Aboriginal spirituality and traditional tobacco use.

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STORIES FROM A TOBACCO HEALING CIRCLE

A healing circle is a sacred gathering of people who are trying to overcome a common problem such as tobacco addiction, During the circle, participants share their stories about tobacco, Real stories from a sharing circle cannot be repeated outside of the circle, however many people will not have the opportunity to participate in one. We have included some stories here for those people who may never get the chance to participate in a real healing circle. Please check the Medicine Bag for information on starting your own circle.

Karen's Story

Hi. My name is Karen. I am 12 years old and live on the Bear River reserve in Nova Scotia. I used to live with my Mom and Dad, but now I just live with my Mom. My Dad moved away a while ago because they were fighting all the time.

They would fight every day. Even when they thought I was asleep I would hear them fighting. Dad said he still loves me, but he just wasn't going to live with us anymore...

This made me very sad. I love my Dad a lot and I miss him. When he lived with us we did the coolest things. Once for my birthday we all took a trip to Toronto to see a Backstreet Boys concert. It was the best. We also used to go around to powwows, round dances and feasts. Now without my Dad, we don't go anywhere. We used to have fun but now it seems like it will never happen again. My mom is always sad since Dad left. She used to dance and bake and do all sorts of fun things.

Now all she does is sit and smoke. At first I didn't believe my parents were getting divorced. I used to say they weren't living together. I would feel sick when I thought about not living with my Dad. The idea of my Mom and Dad hating each other made me mad. We would end up just like all those divorced people on TV.

Mom wasn't happy at all. She just sat at the breakfast table and smoked. She didn't sew or bake anymore. My friends didn't really know what was going on at my house. I kept doing normal things with my

friends for a while, but I was having a lot less fun.

We used to hang out all the time. They would come over to my place to talk and sometimes end up dancing! Sometimes my mom would even dance with us!

Now my friends have stopped coming over. Actually, I just have stopped inviting them over. Nothing is as fun as it used to be. I started getting mad at Mom for making Dad leave us. Why did she have to fight with him all the time? She wouldn't do anything when I yelled at her. She just sat there.

Then I started to get mad at Dad for leaving us. I mean, he was acting like he didn't love me anymore. When he called me, I would always end up hanging up on him when he said he wasn't coming home.

Every time he would come to visit me I would end up yelling at him. Then when he would go back to his place, it would feel like he was leaving us all over again.

Once I promised him that I would be good and do my homework right after school if he moved back. He was always after me to do my homework right after school when he lived with us. But he told me that I should try to be a good student and do my homework after school anyway. He was not coming home.

She opened the door. I was busted.

I had never seen my Mom smoke before Dad moved away. She told me she smoked when she was a teenager but had quit when she had me.

I began to see that smoking helped her. The only time she wasn't smoking was when she was sleeping or crying. I felt the same way, so at night I would take a few smokes from her pack and smoke in my room. She never missed them at first. Then one day I stole a whole pack. I began to smoke any time I could. Finally, my Mom found out and yelled at me. I yelled back and we didn't talk for a whole day.

After that she would storm into my room trying to catch me smoking. She never caught me. She gave up after a week or so. She never said it, but I had won.

One day, I had just finished a smoke when I heard her coming to my bedroom door. I didn't have time to open the window and the smoke drifted lazily around the light in the center of the ceiling. She opened the door. I was busted.

She looked around the room at the haze of tobacco smoke. Then after a long pause, she told me to open a window if I smoked in my room. I couldn't speak so I just nodded my head. Then she said good night and closed the door.

After that I didn't have to hide my smoking. One day in the kitchen, she asked me if I wanted a smoke. I said, "Sure."

After that I would smoke in the kitchen with my Mom. We would sit there and smoke all day. My dad never found out about it. If he did, I am sure he would've been mad at both of us.

I wouldn't smoke at school. That would just get me in trouble with everyone. So I smoked after school. The last ten minutes of school always seemed the longest but now it seemed even longer. I couldn't wait to have a smoke.

Most of my friends didn't like it when I smoked around them. They would say nasty things to me about what smoking can do to you. I just told them, "I can read the label on the package too."

I didn't care. The only time I didn't get hassled about my smoking was at home, so I started to go home right after school so I could have a smoke in peace.

Sometimes when I was doing my homework, my Mom would come to sit with me and help me. It was nice to have her talk with me over a smoke. I felt older.

In a way, it kind of reminded me about the way it used to be. We began to talk more and have a little fun. Still, sometimes I would come home and find Mom sitting by the window in the kitchen looking at the tree in the yard. I knew why she always looked at that tree. My father had told me that the tree was as old as I was. Mom and Dad had planted it the year I was born. There used to be a garden there too, but that was more of Dad's hobby. When he left, weeds overgrew the plants.

We hadn't gone to a powwow or round dance since the summer before. Dad hadn't been by to visit in ages. He called occasionally but less frequently. I missed him a lot, but I knew he would freak if he found out I was smoking. I guess it was a good thing he stayed away.

Toward the end of February Mom started having more fun. She began to bake again and I helped her. She seemed to be getting happier.

She still smoked a lot. Way more than me. I would sit and smoke with her too in the kitchen or when we were watching TV. I felt a lot older when we would sit together like that. I was up in my room when Dad called. Mom and him talked for about an hour. Then the arguing began. Mom came up and told me that he wanted to talk to me. When I got downstairs to the phone his first words to me were, "Karen, why did you start smoking?"

I said that I didn't know why I started smoking. When he asked me where I got the smokes, I told him that I stole them from Mom. Then he got really mad and started yelling at me. I yelled back and hung

up on him. I started to cry so hard I couldn't breathe. Mom tried to hug me but I ran up the stairs to my bedroom and slammed the door.

Dad phoned back and Mom was yelling at him. Through my tears, I fumbled through my knapsack for my smokes. I found them and lit a cigarette. It helped me and I calmed down. I put my earphones in my ears to block out the sound of Mom yelling. I closed my eyes.

Mom came into my room and took my half finished smoke out of my hand. She was crying too. She butted it out in my ashtray and gave me a hug. When she did that, I started crying all over again.

The next day when I got back from school I lit up a smoke in the living room. Mom was baking bread in the kitchen. When she had put the loaves in the oven, I asked her if she wanted a smoke with me. She said that she was trying to cut down and that I should try to cut down too. She didn't smoke that whole evening.

But I wasn't normal. I still missed my old life.

That weekend we went to a round dance. I love round dances! We danced with everyone and met so many people we hadn't seen in over a year. We had fun for the first time in a long time.

Mom rarely smoked anymore after that. She also didn't like to see me smoking, so I only smoked when she wasn't around or when I was alone in my room. She even got mad at me for smoking in bed! She said that I could burn the house down if I fell asleep with a cigarette lit.

By then I knew that she was starting to return back to normal. But I wasn't normal. I still missed my old life.

Mom had decided to quit smoking. She told me that she had joined a weekly sharing circle. I didn't know what a sharing circle was. She told me it was where a group of people with the same problem go for help. I thought that she was going there to talk about being divorced, but she told me that she was going there to stop smoking. I started to feel bad about smoking around her.

She told me about the sharing circles and how they were helping her to find out the reasons why she started smoking. She said that they helped her.

At the circle, everyone would talk about their reasons for quitting. She said that there were so many reasons to quit that they could talk all night about it.

She told me that our people have a sacred use for tobacco. I kind of knew that. I would sometimes see Elders smoking tobacco in a big

pipe. They had told me that it is a way to talk with the other side. Mom told me how the Creator made the tobacco plant to help us talk to him. When we burn tobacco we aid our prayers into the heavens. Our thoughts and prayers are carried by the smoke straight to the Creator.

Mom was baking a lot now. She would bake something and give most of it away while visiting friends and Elders. One day when she had been baking bread, I realized that I hadn't smelled any of her cooking even though she had been cooking all day. She had taken a few loaves to our neighbour's place but there were four freshly baked loaves on the counter. Before I started smoking, I could smell bread baking from a mile away! Now I could hardly smell it in the next room. As I sat there holding my cigarette I began to wonder about quitting myself. I was smoking a lot less. Mostly because it was hard to get cigarettes since my Mom quit. I would usually get my friend's older brother to get them for me.

One cold April day I ran out of cigarettes and my friend was sick and not at school. I actually went to her place to ask her if she could get her brother to get me some smokes. Her brother was out and she was so sick she could hardly talk. She looked at me like I was crazy.

I was standing in the -15 degree cold with a horrible taste in my mouth feeling so stupid.

So I went to the store and stood outside waiting for someone old enough to buy smokes. I stood there for forty minutes in the cold before someone came by. The guy who came by was nice and got me my smokes. My fingers were so cold I could hardly unwrap the package or flick my lighter.

After the first few puffs, I began to think about everything my Mom said to me about the sharing circles. I was standing in the -15 degree cold with a horrible taste in my mouth feeling so stupid. It was dumb to start and now I would have to quit.

When I got home, Mom was baking. She asked if I had been out with friends. I was so cold that my teeth were chattering, so I just nodded yes. I took out my pack of cigarettes. Mom just looked at me.

Through my chattering teeth I told her what happened. I told her that I was addicted too. She pointed out that the smokes I bought weren't even my brand. I hadn't even noticed that the guy didn't buy the right brand. I threw them in the trash and said I didn't want to smoke anymore. Mom came over and gave me a big hug and a kiss. She said that we would quit together.

Me and my Mom don't smoke anymore. It was really, really hard to stop. I actually broke down and bought smokes twice. I thought my Mom would be disappointed, but she wasn't. She just said, "We will try harder next time," and we did.

It is summer now and I can smell all the flowers and grasses. My Dad planted lilac bushes beside the house three years ago and at night when a breeze blows through my family tree, it sways, creaks and rustles as the sweet lilac notes tickle its leaves. That kind of scent always makes me think of my father.

My Dad doesn't live with us, but that's okay because I am fine with him not living here. He comes over once in a while and phones about as often. And I still miss him but I know now that it wasn't my fault that he left. It wasn't my Mom's fault either.

I think that the difference now is that I know that both of them still love me.

DID YOU KNOW?

After you smoke for awhile, you'll find you have a lot more colds, coughs and sore throats than before. It can also give you wrinkles.

(Source: Health Canada Web Site, 2002)

Clayton's Story

Hey. How's it going? My name is Clayton and I am 16 years old. I've lived in Vancouver, British Columbia for about three years. I go to High School in the inner city. I do the usual things I guess, hanging out with my crew after school. We hang out at malls and listen to music and stuff. On weekends, there is usually a house party somewhere.

We are known as "The Posse" at school. We crank out the beats and do our moves. People really don't mind the music, our dancing, or us. Girls come by to watch every now and then.

People always say that being a teenager is tough and I guess it can be at times, but I am mostly happy with the way things are going. Then there was this big family blow up last month. Maybe I should let you know a little about the last few years.

I remember my first year at Junior High. I was in grade 7 when we moved here and I didn't know anyone. My folks had moved back to Vancouver when my mom got a new job. My mom is Salish from the interior of BC.

At first the other kids didn't like me at all because I was different from them. Some of the kids even bugged me about being from Toronto, like Vancouver was so much better than Toronto or something.

I said I liked the buzz. They all laughed.

Then, after about a week, I was hangin' out at the caff' listening to some Busta Rhymes, when Brandon, a grade eight boy, came up to me. He said he liked Busta too, and asked if I wanted to hang with his crew outside. Grade eights don't hang out with grade sevens so I felt special. I followed him out and found a whole group there hangin' to Wu-tang. I've been told that I am a pretty funny guy and by the end of the lunch period, I had everyone laughing so I guess they thought I was pretty cool. So after that we would meet every day behind the school. We would grab a cardboard box to dance on and showed each other our moves.

One day after school I followed the group across the street not knowing where we were going. We met up with some guys that used to be from our school. A grade ten guy named John pulled out a pack of smokes. He let anybody who wanted one have one. I took one. Why not? Everyone else did. I had smoked a few times before. It was no big deal to me. I had my first smoke when I was nine but I wasn't addicted. So I took one and lit it. I remember feeling light headed. I said I liked the buzz. They all laughed.

I knew the bad stuff about smoking from my parents. But, I mean, who cares. I was with a cool crowd; we got along and loved the same type of music. I thought I would be in total control. Teachers and people

in my class would tell me about all the dangers of smoking. I knew the dangers. I mean they print them right on the box. A new one on every pack! I thought the kids in my class were just jealous that I had the cool friends and they didn't.

A few months into the year, I started to know more and more people. People started asking me to sit with them at lunch and stuff. I thought they wanted to be my friend because I was friends with older kids. So I would make fun of them with my crew. No one could touch us. I don't know how it happened but I also started smoking every day. First I would have one or two at noon. Then after school at the bus stop. Then I would sneak smokes at home. My parents had no idea what was going on, which was fine by me. So I thought.

My grade eight year was much of the same. When I smoked though, the buzz disappeared, and the thrill was gone. I smoked mostly to relieve stress and to chill with friends. Looking back on it now, I guess we all felt older when we smoked, I mean, none of us were even legal to buy the cancer sticks we had.

I would come home smelling like smoke and my clothes had ashes and burn marks on them.

Fast forward to grade ten. My old posse are in high school now and just about all of them smoke.

Then something weird happened a week before the family blow-up.

A buddy of mine's little bro' is in my old school. He's in grade 8 there. We had a spare during last period because we gave our teacher a nervous breakdown and she had been away since the previous week. I guess the sub couldn't find the room or something because he never showed up. So after fifteen minutes, we all split. Anyway, we figured that we would go and harass the kids at the junior school for a bit of fun. So off we went.

As luck would have it, the whole school had a PD day and there was no one around when we got there. So we figured that we would go out back and have a butt. There were some kids in the back, breaking to some dope beats. Turns out that my bud's little bro' was there with his crew. So we're like nice guys and offer some smokes all 'round. Of course everyone there takes one. This one kid then says to me, "Man, this stuff gives you a buzz!"

Then it hits me. Talk about weird déjà vu.

Later that night, I'm lying in bed thinking about what happened. That little kid was me a few years ago. Is this what they mean when they say peer pressure starts you smoking? My bud's older brother threatened to beat him up if he didn't smoke with him. That's how he started. Now that's peer pressure!

I had been asking myself if I even wanted to keep smoking after that.

See, I met this fine girl at a house party a while back. Well, everything was going well until I suggested we go out for a smoke. She gives me a look of disgust, turns and walks away. Not a single word! And that's not the first time that it has happened either!

I knew I was bound to get into trouble when I started smoking at home. I would come home smelling like smoke and my clothes had ashes and burn marks on them. My folks questioned me at first, but I just lied to them. I would tell them that one of my friends smoked and that I hung around him all the time. I knew they didn't believe me but they didn't do anything.

That was until last month. On Friday after school I had a smoke with my friends. I was out of smokes so my bud gave me one for the road. I figured that I would need one after dinner so I put it in my pocket and walked home. When I got to my house, my stepfather and my mom had my bag packed at the door and they told me I was going to stay with my grandparents for the weekend. They said that they were concerned with my smoking! They said the clean mountain air would make it easier to quit and that Grandpa would make sure that I did. I began to say I didn't want to go when I noticed a look in my mother's eyes. I knew this wasn't the right time to argue. So off we went to the airport.

The flight was uneventful and when I landed, my grandparents were there to pick me up. I hugged my grandma and shook hands with my grandpa. It's a two-hour ride from Kamloops to my grandparent's place. During the ride Grandpa asked me about my schoolwork and my friends. I told him all about my crew, and my school. They both listened until I was finished. Then my Grandma asked me about my parents. They were fine.

I didn't want to hear it but I listened, all the while dying for a smoke.

When we finally arrived, we are a great meal and went outside to light a fire.

I wanted to smoke so badly. But I knew that I couldn't while I was there. My Grandpa and I sat around the fire and he told me a story about addiction.

"When we depend on something to make us feel better, it knocks our body out of balance and we easily become addicted," my Grandpa said.

I didn't want to hear it but I listened, all the while dying for a smoke.

I went to bed wanting a smoke and woke up wanting one. I was miserable with everyone that day. I needed a smoke more than any other time in my life. I still had one in my pocket but I couldn't smoke it around my grandparents. I didn't want to make them mad. They don't let anyone smoke around their house so I knew I was no exception.

The bad thing about going to my grandparent's place is all the work. I chopped wood all morning.

While we were chopping wood, my grandpa began to tell me about offerings we can give to the Creator to make a connection with Him.

I knew that he was talking about tobacco. His tale started with the cultural and spiritual use of tobacco among our people and how it differs from tribe to tribe.

"Our people have been using it for hundreds of years for communications with the spirits and sacred beings. By offering smoke, you express gratitude for the gifts he has given you. The tobacco plant is sacred in its natural form. But when you burn it for any reason other than a spiritual one, you are abusing the Creator's gifts."

After lunch he made me go out and chop more wood all afternoon. It really sucked. He said there were no free rides at his house. Everyone who stayed there had to do work. I felt sick and shaky. I was in no shape to cut wood or carry a big axe.

My body hurt, my mouth was dry, I was in a cold sweat, my head ached, and I felt angry all the time I was cutting wood. How could my Grandpa do this to me? How could he make me work when I felt like crap? I felt like I was going to die if I didn't have a smoke.

He took the cigarette, broke it and scattered it on the fire.

Finally, the afternoon ended and I went inside. When I looked at the pile of wood I chopped, it seemed like a mountain. Grandpa told me I did a good job and I should come inside and eat dinner. After dinner, I went straight to bed.

Grandpa came into my room. He woke me up and told me to go outside and sit at the fire with him. I went outside and shivered by the fire. He told me that the worst part was almost over; the nicotine was leaving my body. He told me again about the abuse of sacred smoke. That it was wrong to become addicted to one of the Creator's gifts.

"Tobacco was put here so we could communicate with Him. So our prayers would rise up with the smoke so He could answer them. It wasn't to be abused. Too many Native people forget that."

I realized that I kind of liked listening to my Grandpa. Finding out

about my people was cool. He is very smart and I liked listening to what he had to say.

I told him that my old friends started me smoking and I had chosen to keep smoking. I told him about handing out smokes to my friends and younger kids. I told him how I had started others smoking. I told him that I wouldn't know what to do around my friends if I quit smoking.

Grandpa said that peer pressure is hard to deal with when you are young. He said that he may be old but he knows how hard it is to be young. He also said that life gets a little easier as a person gets older. You care less and less what other people think, as you age.

I knew then that I wanted to quit smoking. I didn't want to start anyone else smoking either. Talking with my Grandfather has crystallized what I had been thinking for a while.

I took the smoke out of my pocket. I told him that I would give him my last smoke as an offering in thanks for his wisdom. He took it with a smile and said, "Your parents are there to help you grow. If they don't know where you are in your journey then they can't help you. Tell them when you have a problem like this."

He took the cigarette, broke it and scattered it on the fire. I looked up and watched the smoke rise into the cool mountain air.

Well, that was a month ago. I am having a hard time quitting, especially around my friends. I have actually been avoiding them and will probably avoid them for at least a few weeks, until my "nic-fits" decrease. I get wicked "nic-fits" when I am around anyone who is smoking.

I started smoking because I wanted to be cool with my friends. Now I know that it was stupid to have to started smoking to be cool with anyone. But, you know, I was young and I didn't know that peer pressure usually doesn't seem like pressure at all.

My parents have been helping me through it. They really can be cool some times. They knew what was going on the whole time. They understood though. They had both been smokers when they were young too. They both quit and haven't smoked since.

If they can both do it, I can do it too.

Mitch's Story

Tansi. My name is Mitch and this is my story about tobacco. I am a seventeen-year-old Métis Cree, who lives on the Saddle Lake Reserve. I love hockey. My favourite team is the Edmonton Oilers, but I will cheer for any Canadian team if they are good enough to win the Stanley Cup. I go to games when I can, but it's hard when you live in Saddle Lake. Me and my friends love to sit and watch hockey. We would watch it all day if we could. In the off-season we usually go and play it in the street. I remember days when we would get up and put on our hockey jerseys and start playing early and not stop until the sun went down. But now it seems like we never play hockey any more.

I think this is because all my friends have started smoking. They never have the energy to play anymore and have smoke breaks after every goal. My friends and family are smokers. My parents, older brother, and my older sister are smokers. Even one of my little brothers started to smoke. He knew all the bad stuff about smoking but he started anyway. My mom and dad yelled about it at first but now they have accepted it. I didn't accept it then, and I probably never will. I always told him that smoking causes heart disease, cancer, and yellow teeth. He thinks that smoking won't hurt him. And the worst thing of all is that he started smoking because the rest of my friends and family pressured him into it.

My parents deny it, but they do pressure us to smoke. They always seem to have a good time when they have a smoke in their hand. They would tell us not to start smoking while they take a drag, "Do what I say, not what I do."

I get so mad at them for it.

I didn't start smoking because of all the things everyone said it could do to you. My friends all started together. One day someone brought a pack to school and everyone lit up. It was quite a sight. They were coughing, spitting, and pale. They all made fun of me for not trying it with them. But I knew I was right. I didn't want to look or feel any thing like them when they tried their first smoke.

I always listened at school when they would talk about the health dangers of smoking. Most of my friends didn't care at all but I did. I wanted to know what was in store for my parents and most of my older brothers and sisters. What I learned scared me a lot. I didn't want to see my family and friends die early from one of those tobacco related diseases.

So what do I do? At first I tried to make them feel bad for smoking. Then I would complain to everyone about the health dangers they were causing me. Nobody really cared. My friends would tell me to shut up, my family would tell me to go away. My Dad even told me that if I wanted fresh air then I should go outside. So to make a point I got

up and went outside. Everyone started laughing but I was pissed. Finally I figured that the best way to make people want to quit, or not start in the first place, was to teach them about the dangers of smoking. That's the reason why I didn't start.

One day I was surfing the 'net reading the news and this article comes up with some stats on smoking on reserves. I found out that 55% of Natives living on reserves smoke. That's more than half of the people. I also found out that the Northwest Territories have the highest Aboriginal smoking rate of 59.3%, while British Columbia has the lowest, 33.7%.

This was a very scary thing to find out. I knew a lot of Native people on the reserve smoked, but over half sounded like way too much. And that wasn't even including the Native people living off the reserve. I looked it up on the Health Canada web site just to make sure that it was true. It was.

I asked myself, "How can this be?"

Then I began to think about all the people who smoke around me, all my friends, and all my family. When I think about all the smokers that I know living on the reserve, it doesn't sound high at all.

I got a summer job helping around the band office. So one day I found a video from the government on smoking. It was old and dusty and looked like no one had ever watched it. The day was almost over so I popped it into the VCR and watched it. According to the video, 30% of youth over the age of fifteen years old smoked cigarettes. It said that every ten seconds someone dies from a smoking related disease. And that was in 1994. It's probably higher now.

When a person becomes addicted to nicotine it is a lot like drug addiction. The drug controls you.

I was totally glad that I didn't start smoking. It said that nicotine addiction is one of the strongest addictions out there, as strong as heroin. When a person becomes addicted to nicotine it is a lot like drug addiction. The drug controls you. If you try to cut down or stop entirely your body will have withdrawal symptoms. It was kind of hard for me to imagine what it was like to be a smoker. I didn't understand the feelings of addiction because I have never been addicted to any thing, except maybe hockey.

I thought that if people knew what it was like to experience some of these problems then they definitely wouldn't take up smoking. But then kids don't really care about their well being. Only how cool they are while they smoke, which is shown to them by the cigarette companies.

I left the office just as worried as ever. My mom had once told me it wasn't my place to tell people what they can and can't do, but I think that it is when it screws with my health or the health of my

younger brothers and sister. So I decided to go talk to an Elder that lives close to my house. His name is Joe, and I talk to him whenever I can.

When I got to his house I brought him some tobacco, just like he taught me to. He took it and thanked me. We began to talk about tobacco addiction.

Joe said to me, "Addiction is when a person comes to depend on something that is damaging to their body. All these things you are talking about are all parts of addiction. To be addicted to something is to be out of balance. Out of balance with ourselves, our environment, and our Creator. Tobacco addiction is unlike any other too. Tobacco is a sacred plant. Our people have been using it for centuries as a way of talking to the Creator. Tobacco is to be burned along side our humble thanks for all the Creator's wonderful gifts. Our thanks rise with the smoke to the Creator. Tobacco smoke helps our prayers be heard. When a person abuses the tobacco, he abuses the Creator's gift to us.

"Tobacco addiction is passed on from parents to children or from friend to friend. It is a social addiction, in which no one is the cause or the blame. A person who doesn't smoke needs to understand the addicted mind of the smoker to understand their problem. To persecute an addiction without understanding it is wrong. Talking to your family is the first step to understanding their addiction. When they plan to quit is just as important a question as why they started."

I thanked him for his time and I left for home. I really hoped that what I had learned would help my family's problems with smoking. When I got home I sat at the kitchen table while my mom made dinner. I began to talk to her about smoking. At first she just rolled her eyes and said that I didn't need to tell her that smoking is bad for her. She said she had heard it all before. I said I know, and I said that I am sorry for being a jerk about her smoking because I didn't understand. She was surprised.

She yelled at me like I was calling her a liar.

I began to talk to her about all the things that I found out that day about smoking and about traditional use of tobacco. I shocked her when I was talking about all the chemicals and poisons in tobacco added for flavour and a better burn. I told her about how 55% of Native people on the reserves smoke and how most smokers die of a preventable, smoking related disease. She was kind of grossed out by the info. She said she would quit one day. I asked her when. After a moment she said as soon as she was done her carton. When she said that, I knew she wasn't going to quit and I told her that. She yelled at me like I was calling her a liar. So I told her she should cut down until she could think of quitting. She said she would try. I guess I would have to trust her. If she

said she would try than she would try. All I said to her was that if she could give it her best try she would be able to quit and not look back.

One day I came home from school and my mom was crying. My dad was there trying to comfort her. One of her best friends, Aunt Myrtle had been diagnosed with lung cancer.

Well, later that fall Aunt Myrtle died. Mom said that by the time the doctors had found the cancer it had spread all over her body.

It is winter now and my mom has been smoke free for three months. She makes my family and friends smoke outside now, which is funny because they smoke where I used to stand when I needed some fresh air.

DID YOU KNOW?

Tobacco smoke kills over 40,000 people in Canada each year. That's four times as many as die from AIDS, traffic accidents, suicide, murder, fires and accidental poisoning combined.

(Source: Health Canada Web Site, 2002)

Marilyn's Story

Hello. My name is Marilyn and this is my story about tobacco. I am 15 years old and I live at Fort Simpson in the North West Territories. Nothing much ever happens here in Fort Simpson. And there is not much to do either. But I love it here because I have a lot of family and friends.

My friends and I liked to sit and visit. They are the same friends that I had known since I was really little. I also have a large family that lives very close.

DID YOU KNOW?

There may be a 50% increase in lung cancer risk among food service employees that can be partly attributed to [second hand smoke] exposure, compared with the risk in the general population.

(Source: Siegel M. 1993. Involuntary smoking in the restaurant workplace. A review of employee exposure and health effects. J Am Med Assoc 1993;270:490-3)

Lots of people smoked in my family, including me. I started to smoke when I was thirteen. My family really didn't care. In Fort Simpson, lots of people smoked all the time. My family just told me not to smoke too much because if I did, I wouldn't have any money for other things.

My friends and family all like to sit and visit, smoke and play cards. They do this a lot. Like I said, there isn't a lot to do around here. I started smoking because of my family. All my older broth-

ers and sisters smoke. My parents smoke. And I bet that all my younger brothers will smoke when they are old enough. But old enough around here isn't old at all.

I knew that smoking was bad for me. But I felt happy when I smoked. It reminded me of my family. When we would all gather around the table to joke, laugh, and smoke. Any time we could sit and have a good time we would probably have a smoke in our hand. It is like an old tradition that my community had. When we were younger we would see every one smoking. They would always have a good time. So to me smoking equalled a good time with my family and friends.

When I started smoking, people started treating me more like an adult. I felt older than I was. Which is exactly what all thirteen year olds want. My parents also started treating me differently. I guess with them smoking is like a part of growing up. Even my younger brothers started treating me better. They started to listen to me, and they stopped making fun of me. It was like they looked up to me. Like I was the way they both wanted to be. It made me love and hate smoking at the same time.

I think that if I hadn't started smoking, my parents would probably still treat me like little Maril, the little chubby girl who couldn't wait to start smoking. But the sad thing is that I was only thirteen when I started, but I was the last one out of my friends to even start. When I started I felt cooler, older, and like I belonged. Now I don't think I was any cooler or any more an adult.

At school they were telling us that Inuit people, like my family, smoked more than any one else in Canada, two and a half times more than the national average. And it's true. Almost all the people I know smoke; family, friends, teachers, and people around town. I wondered if any one of them had known how bad smoking is for them. I kind of had the idea of quitting in my head, but my mind told me it was the last thing I wanted to do.

I liked smoking with my family and friends. I looked forward to it every day. I thought that if I stopped smoking I wouldn't have had as much fun with them. I figured that my parents didn't mind my smoking, so why should I be worried. I think then I was also afraid of a lot of things you hear about quitting. I was afraid of getting fat. When I started I lost about fifteen pounds. I didn't need to gain that back. I was also afraid of what my friends would say to me. I don't know if I would be able to have as much fun with them if I quit. And I was also afraid that I couldn't do it. I know now quitting

smoking is one of the hardest things that a person could possibly do. But at that time I didn't want to quit. I doubted myself way too much to try.

At about that time Julie, one of my favourite aunts, quit smoking. She stopped coming to the house as often, and she would leave when my My friend Sheila said that her heart was sore all the time, but she kept smoking.

family lit up. Which to me was the best part of the evening. Whenever I would see her she would tell me not to smoke around her. If I ever did she would get mad at me. I love my Aunty Julie, and I kind of missed her. So after a week of not seeing her, I went to her place to see her. She was baking at the time. Aunty Julie told me that she needed to stay busy so she wouldn't want to smoke. She said that smoking all the time would make her cough so hard that she would be sore for hours afterwards. She said her chest would hurt whenever she would go outside. And she would need rests after walking for a short distance. I listened to her but I needed a smoke. Aunty wasn't the kind of person who would yell at me to quit smoking. She told me that it wasn't good for me and if I ever wanted to quit, she would be there to help me. She hoped that I wouldn't have the same health problems as she did if I didn't quit. On my way home, I lit a smoke and thought about what Aunty Julie said. I thought that I would quit but only when I got older.

After that I actually started to notice my parents' smoking. They coughed a lot in the morning. Especially during that early morning

smoke. My dad would take a drag and cough out the smoke. But I figured that wasn't me. I wasn't coughing; I was still young. But then I noticed my older sister coughing a lot. She was only nineteen at the time. That kind of scared me. I was fourteen and on the road to being just like my sister.

There were so many warning signs that I felt stupid not to have noticed them. I noticed that when I walked home from school, my chest hurt from the cold air. That scared me. My throat started hurting every once in a while. And it got worse when I would smoke. I also got sore throat type colds more often. Maybe this was my body telling me to quit.

I asked my parents about how they were feeling. Was smoking hurting them? They both looked at me and said that they wanted to quit. They said their chests hurt from coughing a lot and they were sick of spending so much money on smokes. I sat and talked with them for a long time. They said that they really didn't like that I was smoking. I didn't know that. They said they felt like it was their fault that I had started. I talked to them about Aunty Julie. We talked for hours.

It was late when we stopped and I noticed something. We didn't smoke at all when we talked. When I thought about it, I immediately needed a smoke. The next day I talked to my friends about smoking. If it was making their chests hurt at all. My friend Sheila said that her heart was sore all the time, but she kept smoking. I asked her if she wanted to quit, 'cause I kind of

did. She said no. She liked smoking, and she said quitting is for old people. She also said that nothing would happen to her because she was too young to get cancer. I knew she was wrong though. People get cancer no matter how old they are. So I figured I would be quitting alone.

I started to see my aunt more and more. We live very close to each other so I would walk to her place after school every day. She told me about her long battle to quit smoking. She felt like it was the hardest thing she had ever done.

My whole body hurt, and my hands felt naked without a smoke.

Then she said she was sorry that she couldn't come around any more but she can't hang around smokers. It is too hard for her. She says she still feels like smoking but she just doesn't. That sounds easy but it's really not. A women "just not smoking" after years and years of smoking is a really tough chick. I told her about my chest being sore when I walk outside. She says that it goes away after a few days. She says after she quit for a week, she felt so much better. She stopped aching for a smoke. It is very hard to quit for the first week.

"You will feel sore, and angry all the time. It is better not to be around too many people when you are quitting," she said. That is why she stopped coming around to see us for a week. She says she was inside baking the whole time.

I was starting to really want to quit smoking. I had begun to cut down to 3 smokes a day, sometimes less than that. That was very hard. I was ticked all the time. I figured that if just cutting down could do that then quitting would suck a lot. But I still wanted to try.

DID YOU KNOW?

Among all socio-demographic groups, current smoking prevalence is highest among the unemployed who are looking for work, at 45.6% overall and 51.7% for females

(Source: Health Canada. 1994. Survey on Smoking in Canada, Cycle 2. Fact Sheet No. 7. Environmental Tobacco Smoke. November 1994.) I didn't want my younger brothers to only have smokers as role models. I wanted to be the first one in my house to quit. Maybe I could get others to quit too. So I started to stay at my aunt's place more and more. I would go home after school and hang with my family for a while. But after supper I would go and stay at my aunt's. I hadn't stopped smoking totally but I was down to two a day. Then, after a long time of thinking, I quit smoking

completely. My friends made fun of me at first but not for long. I told them I was the same person I was when I was smoking. I also asked them for their help. I told them that for a week I wouldn't be saying much. I would just go and stay with my aunt.

That was two weeks ago. I haven't smoked in two weeks. I feel great. My chest isn't sore, and my throat feels better too. I hated the first week so much. My whole body hurt, and my hands felt naked without a smoke. I needed my aunt bad and I was so grateful that she was there to help me. I am not totally free of smoking yet. I'm tempted all the time to go home and smoke. I feel bad that I don't hang with my family or friends as much. But that's okay for now. I won't stay away forever. Besides, my Aunty Julie is really cool. She likes me living with her for now. I know things will get better soon.



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OVERVIEW OF THE MANUAL

SECTION I: "I SMOKE. DO YOU?"

The preceding section told the stories of our four main characters in their talking circle. If you can join or start a group of your own with people who want to quit smoking and stay smoke free, that is usually the best. However if you can't, the life stories of Karen, Clayton, Mitch and Marilyn may help you feel that you are not alone. Others have been there, too.

SECTION II: OVERVIEW OF THE MANUAL

This is what you're reading now. It contains an overview of this manual and it examines the reasons why we smoke and feel like we can't quit. We begin to address the question of what tobacco addiction is and how it is possible to quit and remain smoke free.

SECTION III: UNDERSTANDING MEANS FREEDOM

This section talks about the reasons why you light a cigarette and smoke it. We are all individuals, with different backgrounds and experiences, so our reasons for smoking are all going to be different. Why do you smoke?

SECTION IV: THE PLAN OF ATTACK

Now that you've figured out why you personally smoke, it is time to figure out how to quit. This section helps you take those reasons and form a plan of attack. The manual expands on the four stages from section II. It is in these steps that you will be able to build your own plan of attack. Your plan will include support that will help you when you want to light up.

SECTION V: HELP! I NEED A SMOKE!

This section provides you with a sabotage and relapse defence kit for when you are your own worst enemy. It is also good for those hard times when everyone around you is smoking. Girls have different reasons for smoking than boys and vice versa, just like people who drink or use drugs all have their own reasons and, therefore, their own plans of attack when they are ready to quit. Always remember, there are many people you can turn to in your own community and there are professionals ready to help as well. If/when relapse occurs, all is not lost; you can start again.

SECTION VI: FURTHER READING

This section gives you more information and resources in the areas of tobacco, addictions and personal wellness. It contains a list of books and cool websites to go to when you want more detailed information.

THE MEDICINE BAG

We have provided you with your own personal Medicine Bag to use with this manual. All the activities in this manual are reprinted there so that your plan, support system and relapse prevention tools are in one place. It is provided as a separate book for ease of use.

The Medicine Bag gives you ideas and activities to think about and use when you have made the decision to quit smoking—it is YOUR Medicine Bag. You will find tools to help you fight against smoking—YOUR WAY! Smoking is more than just a physical activity - it affects you mentally, and psychologically as well. The tools in the Medicine Bag give you ideas for your body and your mind.

WHY WE SMOKE

We all know that smoking is bad for us. So why do we do it? Lots of people really enjoy smoking. Others don't even know why they started in the first place and still smoke in spite of the fact that it makes them feel bad after they've had a cigarette.

You can find yourself smoking for all sorts of different reasons and in many different situations. Have you ever been at a party with your friends and everyone is happy and smoking? Or been smoking alone while depressed about something? Once you light up, it helps change the focus of the situation - and even if smoking a few cigarettes

doesn't SOLVE the problem, it seems to take away the stress and pain of how awful you feel at that moment. Do you ever breathe a sigh of relief when you take that first puff? Things seem to be okay when you have that cigarette in your hand. This is called a **coping mechanism**; that is, cigarettes and smoking help you deal with all your situations and emotions, especially when you feel like there is no one else to help you deal with your problems.

smoking = coping mechanism = a survival strategy

When you look at smoking in its relation to coping with problems or feelings of emptiness, it becomes clear that...

Even through we all go through some bad times and we all experience pain, society teaches us how to avoid dealing with it. So when you're told never to show fear or pain, all of your life - that it is a sign of weakness - you can find yourself reaching for other things, like cigarettes for relief, comfort and survival. This can be the beginning of an addiction.

If you are a regular smoker, the entire process of smoking in order to deal with your emotions is an unconscious act. You may not even know you are smoking for reasons other than the fact that it feels good. Any situation or emotion can trigger the need for a smoke. Remember being at the party and laughing and smoking with all of your friends? Happiness and laughter can also trigger smoking. Sometimes smoking relieves the tension of the moment and we can make it through the day.

When we begin to smoke cigarettes, we slowly become absorbed by the culture of smoking. It begins to become integrated into everything we do. It protects us. All the things we do, our way of coping with stress, dealing with anger and frustration, celebrating, end up defining who we are. We become a smoking person, not just a person who smokes. Later, when we want to stop smoking, we discover to our complete astonishment that we reach for a smoke without even realizing we are doing so. Despite our best efforts, we often go back to smoking over and over again. Each time the cycle gets repeated, we begin to feel like a failure. Cigarette smoking has become a part of our identity. We are, in fact, addicted - not just to the nicotine but to the whole collection of experiences that make us who we are, one cigarette at a time, one experience at a time.

WHAT DO YOU MEAN BY ADDICTION?

Virtually everyone who smokes regularly becomes addicted. It is not about how many cigarettes we smoke, it's about our relationship to them and how we respond to everyday life through cigarettes. Tobacco addiction is in your mind; it is not primarily a physical addiction. Physically craving a cigarette goes away in a really short time. When we stop smoking, nicotine leaves our system within five days and generally, our bodies no longer crave tobacco even though we may feel the physical effects of having always smoked. The psychological and emotional cravings can even come back many years later.

It's the mind that tells us we need to smoke again.

Here are some thoughts on addiction...

Elder Abe Burnstick:

"When we misuse anything, we get out of balance. Addiction is being out of balance with ourselves, our environment, our Creator - everything is related."

John Bradshaw:

"An addiction is a pathological relationship to any form of mood alteration that has life-damaging consequences."

Terry Kellogg:

"Addiction is a pathological, recurring relationship with any mood altering event, experience, person or thing that causes major life problems."

Murray Kelly & Kendra Smith:

"Tobacco addiction is a culturally induced disease infecting the individual child through the family and peer group."

The act of smoking and its addiction can be transferred from generation to generation, not genetically but through social mechanisms. Think of your family gatherings. Everyone is at the kitchen table. Mom and Dad smoke. Kokum and Mushum smoke too. All of the aunts and uncles are lighting up. When you smoke with all of your family, it may make you feel older and like you have a place in the family with all of the adults. Do your older brothers and sisters smoke too? A family member who smokes can have a big impact on the rest of the family. When you see the people in your family turning to cigarettes to deal with their problems, you can unconsciously be affected by that pattern.

But even though these patterns of smoking may be transferred from family or friends, they are not causes of addiction and shouldn't be blamed. Your family and friends can be a key part in your decision to remain smoke free. Because tobacco addiction rests in your unconscious and, therefore, in your mind, you need to have a PLAN. Otherwise, you may continue to react to the things and reasons that normally make you light up, without even being aware of it.

DID YOU KNOW?

[If you started smoking when you were 13 and smoke one pack a day.] By the time you turn 30, you will have spent about \$15,000 on cigarettes. By retirement age your habit will have cost you more than \$45,000, not counting the medical bills.

(Source: Health Canada Web Site, 2002)

WHY IS IT SO HARD TO STOP?

What are some of the reasons it is so hard to stop smoking?

"I don't know what to do with my hands if I don't have a cigarette?"

"I feel naked without a cigarette."

"My friends won't think I'm cool anymore."

"I won't belong. Everyone hangs out at the smoking doors between classes...where will I go?" "I might get fat."

"How will I deal with stressful situations if I can't smoke?"

"I might have to talk if I don't have a cigarette to keep me busy."

The last comment is an interesting one. Did you know that having a cigarette in your hand gives you a psychological shield between you and another person? So you never really have to let people in. The cigarette can serve as a barrier and protection.

So what happens to you when you stop smoking? There is no barrier anymore and what we might unconsciously use as protection, is gone.

DID YOU KNOW?

Tobacco addiction has one of the highest relapse rates of any common drug - even higher than cocaine, heroin and pot. You also might find a whole bunch of mixed feelings, confusion, stress and even pain, that you didn't even know were there. If we don't know how to deal with stress and emotional overload normally, then dropping the nicotine (found in cigarettes, chewing tobacco and snuff) and the habit of smoking can be hard EMOTIONALLY and MENTALLY. You may start to feel like you are losing control of your life. Do you find yourself getting irritated and angry at the slightest thing? Do you find yourself bargaining in your mind:

"I'll only smoke on the weekends."

Some More Reasons...

We've already talked about being taught to never show pain because people look at it as a sign of weakness. But what about the feeling like you're just NOT GOOD ENOUGH? For example, if your parents have ever compared you to your older brothers or sisters or if you're failing in school, do you feel like you are a failure? We live in a society that tells us if we are not successful, cute, pretty, cool, smart or thin - we will not be accepted. What if you are not the most popular guy or girl in school? What if you are shy and have a hard time talking to people? What if you THINK you're not the weight you want to be?

Inadvertently, these issues can all be triggers to make you want to smoke. The fear of being "less than" can become a big obstacle in your decision to quit and remain smoke-free.

Becoming conscious of the reasons why you smoke and also why it is HARD for you to quit are the first steps in building a solid plan. A plan that allows you to take a look at the bigger picture and how to find a happy medium - a balance.

Feelings of inadequacy - or feeling "not good enough" does not have to be a bad thing. Separating all of the issues that we may unconsciously associate with smoking can help us in our ACTION PLAN to stop smoking and to remain smoke-free.

The Bigger Picture

As Aboriginal youth and as Aboriginal people, smoking is recognized as unhealthy but hasn't been a large concern for our communities because there are many other health problems that affect us as well. For some of us, tobacco addiction is sometimes the least of our problems or one of many others to deal with.

<u>QUOTE</u>

"Starters no longer disbelieve the dangers of smoking, but they almost universally assume these risks will not apply to themselves because they will not become addicted." From a tobacco industry study on young smokers. (Source: Kwechansky Marketing Research Inc. 1982. Project Plus/Minus. Prepared for Imperial Tobacco Ltd. 7 May. Exhibit AG-217, RJR-Macdonald Inc. vs. Canada (Attorney General), p.i.)

THE FOUR MAIN STAGES OF RECOVERY

So where do we start? We have to find other things to do instead of smoking. Here are the steps:

1. Identify

Identifying the reasons WHY we smoke.

2. Talk

We share our feelings with someone we trust like an Elder, our own support network, friends, sharing circle. Tell other people what's going on.

3. Be Strong!

It's going to be hard! But you'll find out a whole bunch of things about yourself that you might not have known and, hey, you might like it.

4. Move On

To fully recover from being addicted, think of things to do instead of smoking. Then do them! Find activities that work for you - everything is going to be different.

WHY YOU CAN QUIT

Elder Abe Burnstick:

"Culture is the way I live today. I have a choice".

We have seen that tobacco addiction is a coping mechanism for many different problems, emotions and issues that we may face.

Tobacco and the act of smoking can represent so many things to each of us. A cigarette can provide comfort when you are alone or sad. If you smoke regularly, lighting up a cigarette and smoking it can be an automatic response to needing comfort or a friend, without you

even knowing it. Above all, the act of smoking provides a sense of security. Whether you are alone or with your friends, smoking tobacco can serve to reassure you of who you are.

HOW DO WE KNOW IT WORKS?

Our approach integrates accepted addiction recovery methods with spirituality and traditional Aboriginal tobacco use by:

- separating the spiritual use from the harmful use of tobacco
- providing basic addiction information
- giving you experiences and stories from other people like you
- helping you to create your own support network
- providing encouragement to move forward at your own pace and level of comfort
- introducing a way to re-evaluate experiences and ground them in the addiction model
- helping to build healthy boundaries
- introducing a way to redefine the cultural understanding of tobacco addiction to remove shame-based feelings
 - suggesting ways to remove the fear of failure and provide building blocks for growth
 - providing a Medicine Bag of tools for survival, whether you recover on your own or in a group

QUOTE

"[A] new brand aimed at the young smoker must somehow become the 'in' brand and its promotion should emphasize togetherness, belonging and group acceptance, while at the same time emphasizing individuality and 'doing ones own thing'." From a tobacco industry memo on creating a new brand for younger smokers. (Source: Teague, C.E., Jr. 1973. Research planning memorandum on some thoughts about new brands of cigarettes for the youth market. 2 Feb.)

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I SMOKE TO DEAL WITH THINGS

NOTE TO READER: This section of the manual deals with the addiction model we will use in the rest of the manual. The model has stages that many people go through in becoming addicted, however, not all people will easily identify with all the stages detailed here. If you cannot recognize some of these stages in your own experience, do not let that worry you. Not all these stages apply to all people. Like we said in the beginning, take what you can use from this manual and leave the rest.

The addictions model used in this manual has several emotional stages going from Freedom to Denial. It is based on the belief that people smoke to cope with unresolved pain in their lives. It is this denial of pain and the failure to grieve properly that keeps people addicted. None of us were born addicted to tobacco, so we all start at the first stage, Freedom. When we are at that stage, we are not addicted to tobacco.

From this, we proceed through a series of stages on the way to tobacco addiction. It is important to note that the stages are rarely experienced in a linear order and that any of these stages may occur in any order and can sometimes occur at the same time as other stages. This model is based on the belief that a person loses their "core identity" in the process of going from a healthy balanced lifestyle to addiction. Core identity is who you are without using crutches such as tobacco.

We will outline the stages in the next section and also present the model as a diagram so that you can see the process.

QUOTE

Quebec had the highest percentage of smokers at 33.9 per cent in 1996/1997. Quebec consistently has had the highest percentage of smokers since 1981. (Source: Health Canada, Wired Health Online Magazine, 1999)

STAGES OF THE ADDICTION MODEL

Freedom

We were not born addicted to nicotine. Children who are born free of addictions are free to experience their world and their emotions without dampening or denying them. At this stage you are not addicted to anything including tobacco. Many people become addicted to tobacco at a very young age, usually under the age of 18 with a surprising percentage actually becoming addicted to tobacco under the age of 13.

Surrender

When we are children, the only ways we are taught to cope with our emotions are those which are taught to us by our family. This stage is called surrender because it is at this stage that we surrender our choices to those deemed worthy by our family. If everyone in your family smokes, you may have been taught by example that Dad smokes to deal with stress. Surrender is also experienced in grieving when you realize that some things are outside of your control. Feeling powerless is a terrifying prospect for most people and can lead to further tobacco abuse.

Acceptance

The stage called "acceptance" is the stage where we feel that we have no choice but to accept the domination of our parents, family and community. At this stage, a person feels that they cannot change anything and this can lead to a further descent into addiction.

Depression

If a person lives in an environment that is unhealthy or damaging, they will often begin to suppress their natural feelings and intuitions in order to survive in the family or community. Depression can be manifested by feelings of sadness and a loss of motivation and energy. Often shame begins at this stage.

Bargaining

This stage occurs when you start to make bargains with either yourself, someone else or a Higher Power. For example, you may have once said that you only smoke when you are stressed or perhaps that you only smoke when you drink.

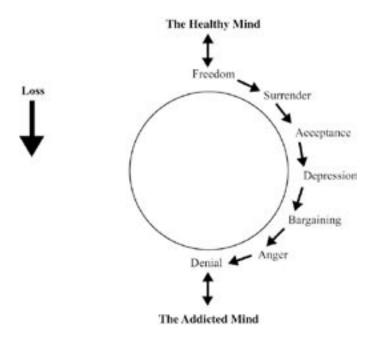
Anger

Anger can sometimes hide or mask pain. If you have ever lost something, such as a job or perhaps been dumped by your boyfriend or girlfriend, have you ever been tempted to reach for a cigarette to calm your nerves or to cool off?

Denial

Denial is the final stage in our addiction model. In order to cope with buried pain, a person can deny its existence by smoking. For example, if a person had a bad relationship with their parents, smoking may have been a call for help or a way to get back at them at first but after a while, smoking becomes a long-term solution to avoiding the pain of dealing with your parents.

Identifying your loss is not to remind you of painful events or times in your life but is, instead, an important step in the healing journey.



BUILDING A LOSS IDENTIFICATION LIST

NOTE TO READER: Digging into your past to uncover old wounds is never an easy task. It can also be dangerous if you are not able to cope with the feelings and emotions that surface. If you have very serious and deep traumas such as memories of sexual, physical or mental abuse, we recommend that you investigate these issues only with the help of a trained counsellor. They will be able to help you grieve properly and in a safe manner. In urban centres counsellors can be found by looking in the Yellow Pages or by referral from your family doctor. In more remote communities, you can get advice from your local Community Health Resource (CHR) person.

By building an identification list you can begin to learn about pain that is still unresolved or buried so far in your subconscious that you have forgotten about it. These past traumas still affect you today because you have been using tobacco as a crutch to help you cope with the unresolved issues.

It is often helpful to break your identification list up into time periods, such as the times of your life when you were a child, an adolescent and an adult. You can also break the time up in years if you wish, from the time you were under 5 years old, then under 10 years old and so on. In our example below, we can see a list of things that a young adult wrote.

Sample Identification List

Child

- 1. I felt scared a lot.
- 2. I was not allowed to be angry.
- 3. I have few memories of childhood.
- 4. I escaped into fantasy regularly.
- 5. I never felt really loved.

Adolescent

- 1. I left home as early as I could.
- 2. I was always in trouble.
- 3. I felt unloved and abandoned.
- 4. I had to grow up fast to survive.
- 5. Nobody really ever listened to me.

Adult

- 1. I am angry.
- 2. I am unhappy.
- 3. I fear I am going to die young.
- 4. I think my parents were cruel.
- 5. I feel chained to tobacco.

Activity#1: Make your own loss identification list.

Materials: You will need a pen or pencil.

Instructions: 1. Identifying your losses is the cornerstone in building your recovery

plan. First off, decide if you are going to break the list into five year

periods or by the terms child, adolescent and adult.

2. Now think about the feelings that you had in each of those time periods. You can record feelings or significant painful memories such as leaving home or failing a grade. You can also record fears such as

fears of loss like a family crisis.

Significance: Smoking is a coping mechanism. This means that instead of feeling

pain, smokers often medicate themselves with tobacco instead. These

losses form part of the reasons that you are addicted to tobacco.

Example.

1. I went to live in my first foster home.

2. My dog got hit by a car.

You	List.	
1.		
5		
6		
7		
9. –		

THE GRIEVING MODEL

As we have seen, the process of becoming addicted to tobacco has several stages going from surrender to denial. At the final stage the person has become addicted.

Recovery is simply the process in reverse. In order to recover from tobacco addiction, we must go the other way from denial back to freedom. Once again, we point out to the reader that the following stages commonly occur in non-linear order. It is perfectly common to skip certain stages or experience stages in different orders. With this in mind, we will revisit the stages of our model in the following sections this time going from addiction to freedom.

Denial

As we begin to identify why we use tobacco, we let go of more and more of the unconscious denial mechanisms we employed to protect us from our fears. Denial is a natural, intuitive reaction to trauma. It is a safe zone where the traumas we suffer are automatically stored until we have the emotional resources to deal with them. We can acknowledge denial as a survival tool but because it operates below our conscious mind, it can be difficult to later draw the experiences back out into the open. Consequently, denying painful experiences can build up to overwhelming levels. That is when denial ceases to be a survival tool and becomes an addiction trigger.

If denial is blocking your doorway to recovery, you must gently open the door to see what is being hidden. When the abuse or pain is identified, shared and grieved, then acceptance is possible. Sometimes we trick ourselves into believing that denial is actually that difficult, admirable quality we call forgiveness. In truth, when the heart has surrendered to the grieving process and is thereby set free, only then can real forgiveness occur.

Anger

When our feelings begin to surface, they often first appear in the form of anger. Since it can be a destructive emotion and generally alarms people, it quickly produces a crisis situation. Often this is acted out both physically and emotionally and leads to the immediate re-use of cigarettes - a pause in the recovery process.

Bargaining

We begin to bargain with our future when we finally understand how deep the smoking goes. It feels like it has become us or we have become it. At this point, we often experience a growing awareness of the issues which surround our core survival responses. This realization leads us toward a balance in which we no longer need to protect the family system or peer group from our anger.

Depression

As the journey proceeds, we slip into a kind of depression. We feel like we can never ever be really happy again without smoking. We miss smoking like one would miss an old friend. This longing is felt deeply because you are no longer burying emotions. Repression is a habit of the past. This is a down period but it passes.

Acceptance

When acceptance arrives, it brings the hope of freedom. The idea that we might be able to live a meaningful life without smoking begins to take shape in our beings. We accept that our life will not include smoking and we get busy developing all the skills we need to make this new way of living possible.

Surrender

When surrender comes, we know in our bones that we will never smoke again. As long as we never lose sight of the gifts recovery can bring, we become and remain a person who lives in this world without the need to use the medication of smoking. We simply let go.

Freedom

We can resist our desire to deal with pain through smoking, we no longer fear our real feelings. We are free to experience our world with the emotions and physical senses fully available.

The grieving process helps us to come full circle and continue on our healing journey



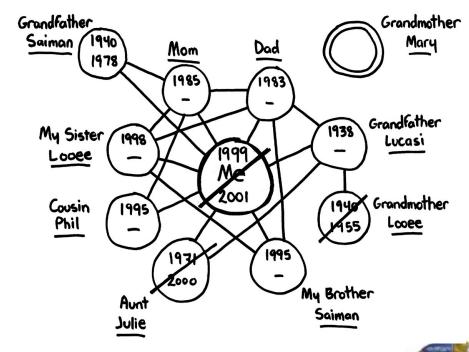
I SMOKE BECAUSE MY FAMILY DOES

Here is how Marilyn drew the connection of intergenerational smoking for her family.

Do you remember Marilyn's story? Health Canada statistics show us that kids with smoking parents are twice as likely to smoke as children in a family with non-smoking parents. But is it true? Well, as we've found out by talking to youth in the community, family members DO play a big part in our lives. They are role models, people we look up to. They influence us in our decisions whether we know it or not. And don't forget, if they influenced us in our decision to start smoking, they can also help us in our decision to quit.

In Marilyn's family, everyone around her smoked. Grandparents, parents, aunts, uncles, even her brothers and sisters. Marilyn smoked because her family did. Everyone was sitting around the kitchen table, laughing, talking and smoking. Before Marilyn began smoking, she didn't really feel a part of everything around her. After she began smoking, she became a part of that hub of activity. Her older brothers and sisters accepted her as being mature and she began to feel a sense of being a part of her family.

When Marilyn decided to quit, she thought about how much her family meant to her and how she started smoking. She looked around her. Her grandparents smoked. Both of her parents smoked. Marilyn drew a family tree with herself in the centre. The web she drew showed how many people in her family smoked.





Materials:

You will need a black or blue pen or a pencil, a red marker or pen and a green marker or pen.

Instructions:

- 1. From the circle below, create other circles for your family members using the black or blue pen or pencil. Do not put the lines connecting them all together just yet. Put their names beside the circles.
- 2. For each family member, think about what year it was that they started smoking. Write that year in the upper half of the circle. Even if they quit, put the year they started in anyway. If you do not know, then ask them! If they have never smoked, put a green circle around their circle.
- 3. For each family member, put the year they quit in the lower half of the circle. If they are current smokers, then put a dash instead indicating that they still smoke. If a family member died while still smoking, indicate their year of death in the lower half of the circle.
- 4. For each family member that has quit and is currently an ex-smoker, put a slash across their circle with the red pen or red marker.
- 5. Now connect the circles based on who you think influenced someone to smoke. If Dad smokes because your Grandfather does, draw a line connecting them. Obviously the people in green should not have any lines connecting them to anyone since they have never smoked.

Significance:

Look at your family tree. See how many people have smoked or are smoking. Is it a lot? Is there an absence of green circles? Remember that green circles are people who have never smoked. Are their any people with red slashes? Remember these are people who quit. Are you surrounded by people who are still smoking? Is it any wonder why you started smoking?

Activity#2: My Tobacco Family Tree



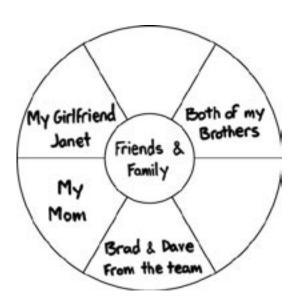
ALL OF MY FRIENDS SMOKE

What's the big deal? All of my friends smoke.

Did you know: You are three times more likely to smoke if your friends also smoke? This is not to say that you can't make up your own mind about making the decision to smoke. We are all capable of making our own decisions; the decision to smoke as well as the decision to quit.

It is easy to smoke when you are surrounded by all of your smoking friends. When everyone else is lighting up, it seems like the most natural thing to do. If you are a regular smoker, it may be hard to quit when all of your friends continue to smoke. Take a look at your group of friends. How many of them smoke? How many do not? Do you find yourself smoking more around them? Do you find yourself not lighting up when you are around non-smoking friends? Is it easy to control? Or is it hard? Do you find yourself automatically reaching for a cigarette when your friends light up?

Clayton drew a web describing who among his friends smoke:



Activity#3: My Web of Tobacco Friends

Materials: You will need a pen or pencil.

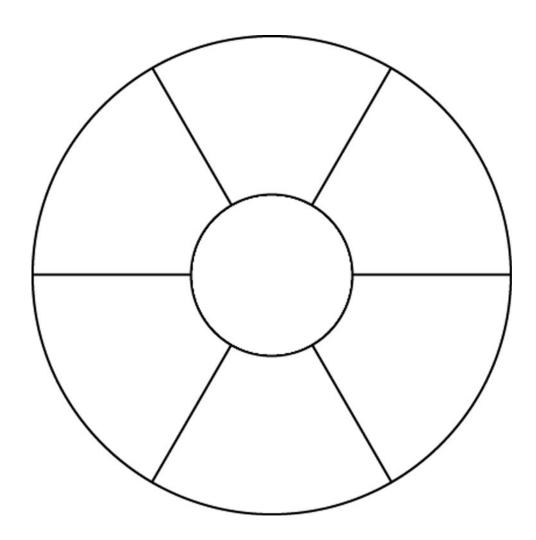
Instructions: 1. Use the circle provided below to draw a web of people who

smoke around you. They could be friends, co-workers, neighbours or people you associate with from church, school or from an

amateur sports team.

Significance: Look at the people who literally smoke around you. These people

may be influencing you to continue smoking. These people may also be the ones who can help you quit and remain smoke-free.



I SMOKE BECAUSE I AM ADDICTED

The pain cycle of the unconscious mind:
An event occurs which makes me feel ashamed or afraid.
I have a painful emotional reaction to the event.
This cues my mind to think of a solution.
My mind seizes upon smoking to relieve the pain.
This desire builds strength in my mind.
I feel overwhelmed with urges and I light up.
Soon I feel no more unmanageable emotional stress.
Relapse occurs; I'm smoking again.

WHAT HAPPENS RIGHT AFTER YOU QUIT

When we begin to withdraw, we find that in addition to the mental and spiritual sides of the addiction, we experience painful physical side-effects as our bodies begin to recover from nicotine use. Not everyone experiences the same withdrawal symptoms or the same intensity of those symptoms. Nevertheless, the addictive nature of nicotine can, for some, cause intense discomfort and sometimes trigger a relapse as we seek pain relief.

If we identify the withdrawal symptoms, we can reach out to others in our Tobacco Healing Circle. Some of the common symptoms which tell us we are on our way to recovery include:

- craving for nicotine
- irritability, frustration, or anger
- anxiety
- difficulty concentrating
- restlessness
- decreased heart rate
- increased appetite or weight gain
- headache, dizziness
- sweating
- constipation

Most signs and symptoms of nicotine withdrawal occur within 24 hours. Signs and symptoms of nicotine withdrawal usually peak in the first 1 to 2 days following quitting and often last for 5 days. Psychological and emotional craving, hunger, and weight gain may continue for months or more after quitting.

Coughing:

Our lungs have filtered and collected a lot of foreign substances that we inhaled over the years. Now as the cilia begin to return to normal, they have to clear a lot of tar from our breathing passages.

Distraction:

Often we have learned to associate cigarettes with work activity. We are frequently distracted and seem to have difficulty staying focused.

Dizziness:

When the carbon monoxide is removed from our systems, we replace it with oxygen. We sometimes find that our brains have trouble with this increased flow of oxygen. When we withdraw nicotine but retain our customary amount of caffeine, we can experience dizziness as well as headaches.

Fatigue:

When we withdraw the stimulant nicotine, we may experience unexplained fatigue.

Nervousness:

We may note a tendency to be jumpy or irritable until all the nicotine has been withdrawn.

Stomach disturbances:

Smoking interferes with normal bowel functioning. Constipation or diarrhea are commonly reported.

Sleeping Problems:

We may find ourselves waking up at odd times, having difficulty going back to sleep or dreaming odd dreams, even dreaming about smoking

Skin Problems:

Because of increased circulation, we sometimes experience itchiness of the skin or scalp.



46 So you Want to Quit? Make an Action Plan!
47 Pros and Cons of Puffing
48 Activity #4: My Pros and Cons of Quitting
49 What to do in the Meantime
51 Activity #5: My Recovery Strategy
52 What Makes us Smoke
53 Activity #6: What Makes Me Smoke - My Emotional Triggers
56 Activity #7: What Makes Me Smoke - My Situational Triggers
57 Activity #8: My Action Plan
58 Activity #9: My Extended Action Plan
50 Activity #10: My Support Network

60 Activity #10: My Support Network 61 Activity #11: Talking Circles / Healing Circles / Meetings 63 Activity #12: My Weekly Journal

SO YOU WANT TO QUIT? MAKE AN ACTION PLAN!

Note to Reader: As you work through this and other sections, if you need more room to write, please make photocopies as needed. The worksheets in this section are also available in the Medicine Bag. The manual starts out with a few basic steps. Read them over first. Think about the steps. How would these steps fit into your life? Do they seem realistic? Can you see yourself in each of these steps? Remember that these steps are only guidelines for your own Plan of Attack. Use only what you think will work for you. Here are the steps...

- 1. Why Should I, Why Shouldn't I? Pro's and Con's of puffing.
- 2. What to do in the Meantime?
- 3. What makes us Smoke?
- 4. Battle Plan
- 5. The Big day Kickin' in the Plan...
- 6. Remaining 'Nic' Free

Each of these steps are discussed in detail in the following sections.

QUOTE!

"The desire to quit seems to come earlier now than before, even prior to the end of high school...However, the desire to quit, and actually carrying it out, are two quite different things, as the would-be quitter soon learns." From a tobacco industry study on young smokers. (Source: Kwechansky Marketing Research Inc. 1982. Project Plus/Minus. Prepared for Imperial Tobacco Ltd. 7 May. Exhibit AG-217, RJR-Macdonald Inc. vs. Canada (Attorney General), p.i.)

1. WHY SHOULD I? WHY SHOULDN'T I? PRO'S AND CONS OF PUFFING.

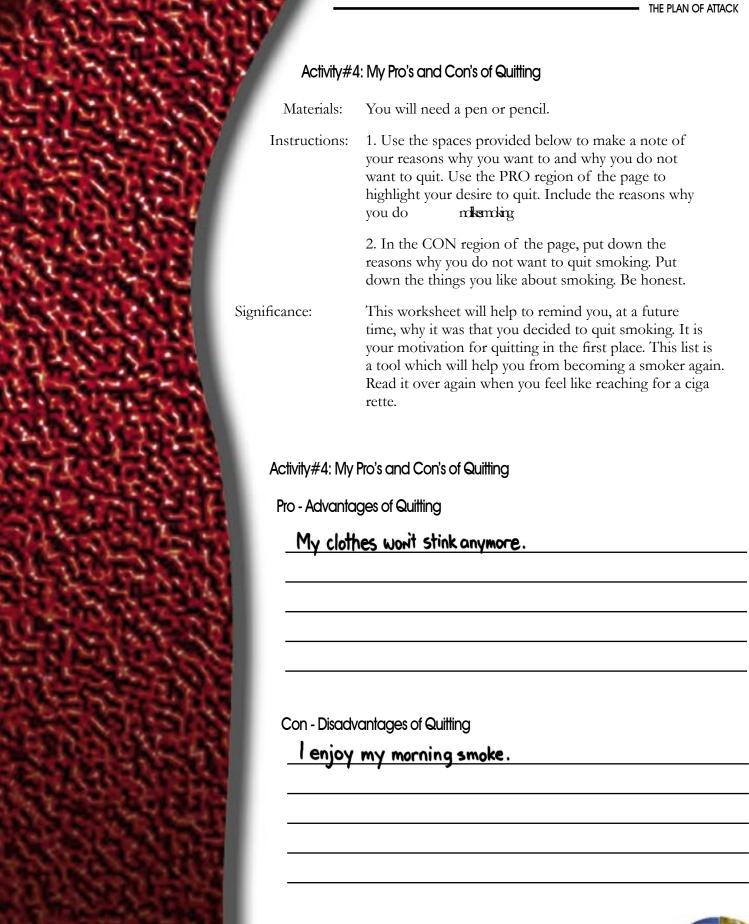
The initial step of this process asks each person to think about why they SHOULD and SHOULDN'T smoke. It is the first stage of forming your Plan of Attack. Take a look at Clayton's PRO and CON list.

Advantages of Quitting - Clayton's List

- Maybe girls I meet would want to kiss me.
- There wouldn't be burn holes in my clothes.
- I'd have more money.
- My chest won't hurt.
- I won't have to listen to people complaining about my smoking.
- People would stop bumming smokes off me.

Disadvantages of Quitting - Clayton's List

- The guys will make fun of me.
- What would I do with my hands, especially at parties?
- I'd 'nic' fit out.
- I'd have to change my image.
- Where will I go when friends are taking "smoke breaks?"
- Will I still belong?



2. WHAT TO DO IN THE MEANTIME?

By now, you already know that you are addicted to smoking. If you have come this far, you probably also know that you want to quit. Now, we have to come up with a plan. How many times in the past have we tried to quit? How many times did it work? Sometimes, when we set out to do something, we screw up if we don't have a plan. A Plan? How can someone actually PLAN to quit smoking?

How many times have you said "as of today, I quit smoking?" And then found yourself at a party where everyone is chillin' out, laughing, drinking, and having a good time. Then someone hands you a smoke. You look down and realize that you're smoking. How did that happen? It was such a natural thing to do that you didn't even realize you were doing it. Hmm, this might be harder than we thought.

We know there is no point trying to quit if every time a situation like this arises, you find yourself smoking and back to square one. What if you DID have a plan, one that would automatically take over at times like this, when you are most tempted to smoke? Without having some sort of plan to fall back on, you may find yourself stuck in a repeated cycle of trying to quit; a cycle that repeats itself every time you pick up a cigarette.

Well, what if you were prepared? For instance, perhaps every time you had a craving for a cigarette, you associated cigarettes with something healthy, like having a "Plan B." This could be anything you choose. Some people work out when they want to smoke because it is a healthy alternative to releasing tension and stress. Some people eat food or chew gum. We even heard of someone who eats Hall's cough drops because it reminds her of smoking menthols and is an alternative to smoking. So everyone can associate smoking with other tasks. Now, we're not telling you to stock up on buckets of ice-cream or become a fitness buff but by associating the idea of smoking - and the craving you feel when you just NEED a cigarette - with a different activity, it can help you to change the cravings of smoking into positive outlets of energy.

But you're still at the party. Everyone is smoking. Nothing is going wrong. You are not lonely or depressed. All your friends are around so what's the big deal? It's just one smoke! What can you do in a situation like this to make sure you don't light up?

Here is an example of Clayton's strategy:

- Learn everything I can about tobacco and why I am addicted.
- Learn about tobacco and how it is used in ceremonies and rituals.
- See if any of my friends want to quit smoking too so we can do it together.
- What makes me want to smoke?
- Use the tools in the Medicine Bag when I feel like having a cigarette.
- Decide on a day to throw away my cigarettes.
- TELL PEOPLE MY PLAN.
- If something happens to make me light up, I'll think of the first seven steps on my list.

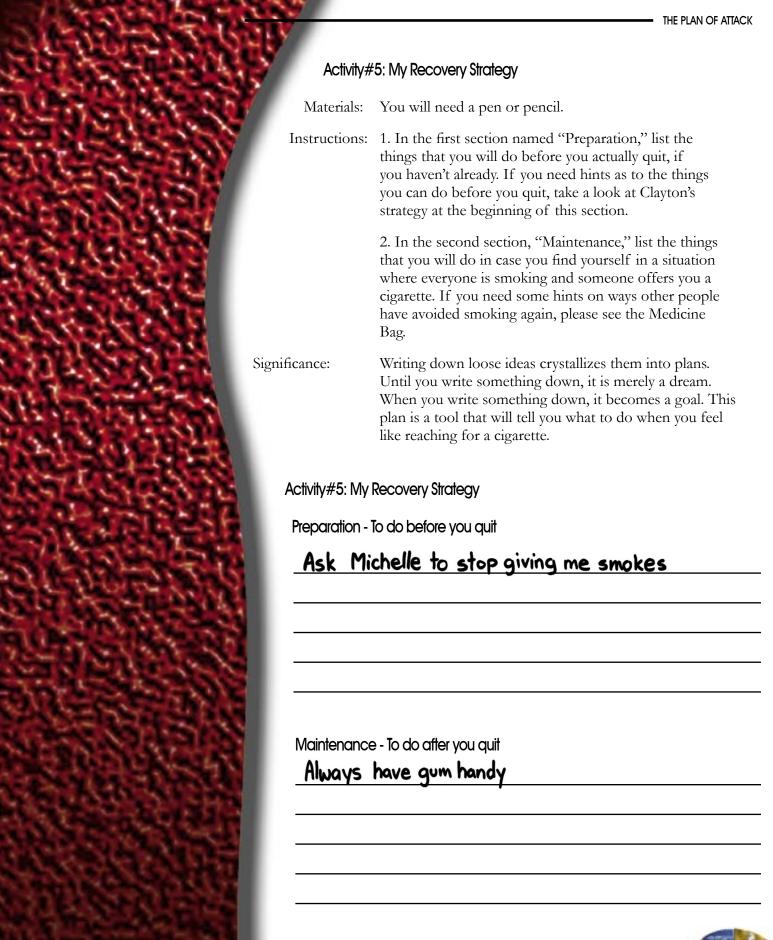
Each person's PLAN will look different. We all have different personality types, family backgrounds, current situations, and different reasons why we smoke. A good plan for one person may not be good for someone else.

"This is so embarrassing but when I was at a party and wanted a smoke, I would chew on licorice. It doesn't have many calories. People thought it was kind of funny and cute. Plus, I could pretend that I was smoking my licorice until the cravings went away. It helped to keep me from feeling pressured by my friends, like it was just another funny thing I was doing. No one knew I was dying to have a cigarette. It helped the first few times I was at parties with my friends until the cravings to join them went away."

QUOTE

Worldwide, smoking kills six people every minute, or three million people every year -- a figure that is expected to rise to 10 million by the year 2025.

(Source: Health Canada Web Site, 2002)



3. WHAT MAKES US SMOKE?

Figure out the situations that lead you to lighting up. We all react to different situations, people, memories, places, and times. As smokers, we will all react to CERTAIN situations more so than others. So we need to recognize what kinds of situations make us light up.

Take a look at what makes some people smoke:

"I smoke when I am with my Dad. I met my Dad when I turned 18 years old, and it was sort of scary at first. Smoking with him became a bonding thing and now, I associate smoking with my Dad because it's a part of hanging out and getting to know each other. I always smoke with my Dad."

"I have a favorite coffee shop that I hang out in. I like smoking there."

"I smoke when I am stressed right out! Like during exams at school. It's a way to deal with stress, I guess."

"I smoke only when I go out and have a good time."

"I smoke with my smoking friends but never with my non-smoking friends."

"Whenever my best friend comes to town, we smoke a pack of cigarettes and hang out. It's a special time because we rarely see each other. None of our other friends smoke, so it's like our secret."

"I smoke when I'm depressed and feel alone."

"I smoke when I am by myself in a public place, usually when I'm waiting for my friends and they are late. I hate that! Smoking is a good way to keep busy and it makes me feel like I am not sticking out."

"I smoke sometimes when I am hungry but don't want to eat."

Recognize your triggers, the reasons why you might smoke. You may not even know what the triggers are but think back to a few situations that made you light up. Were you happy? Sad? Alone? Just wanted a break? Some people also use cigarettes to reward themselves for working hard.

Activity#6: What Makes Me Smoke - My Emotional Triggers

Materials: You will need a pen or pencil.

Instructions: 1. Fill in the spaces below with things that cause you to smoke. Some

questions to ask yourself during this process are: Why do you smoke?

When do you smoke? Who smokes with you?

Significance: You will be using the things you discover in this exercise to identify

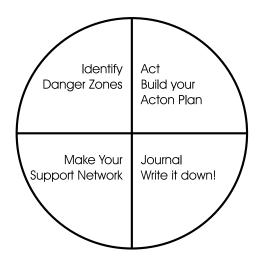
your "danger zones" which will then be used to create your action plan.

Focus on the way you feel when something happens.

d feelings		
Happy Feelings		
Feeling Bored _		
Times		
People		



When you are building your action plan, that is, what you plan to do when you are 'nicing' out or are just craving a smoke in your hand, keep this basic strategy in mind:



The wheel above illustrates the four key areas of the battle plan. In the following sections, we will go through each one individually and explain each in detail. After the descriptions, there are a series of worksheets that will allow you to develop your own personalized battle plan.

Identify - What are Danger Zones

These are the areas, places, people that you associate with smoking. They are the most likely to trip you up. They can trigger feelings that will make you want to light up. Remember, it is not just limited to a certain situation. It can be an environment, like a party, certain people that you hang out with, anyWHERE, anyTHING, or anyONE that you suspect will create a problem with your decision to quit.

Act - Build Your Action Plan

Take all the situations you can think of that make you light up. Do some stand out in your mind more than others? Based on these different situations, begin thinking of how you can counteract the need to smoke when the cravings arise. Each situation is different so each of your strategies are going to be different.

Network - Create Your own Support Network

This is really important! Remember what #7 on Clayton's list was when he was developing his strategy? Tell a friend. You might be surprised who become the people who give you the most support in your decision to quit. It may not be the guys at the parties. Look to people in your community who will help you through the cravings. Look within your own family. Is there a youth group in your community that you can join? If not, why not start one? You may be surprised at the support that you will find. There are other youth like you that want to quit smoking. Sometimes they may not always come to us so we have to find them and become their means of support as well.

Journal - Write it Down!

Try writing down what's on your mind at the times you are craving a cigarette. You might be surprised. By writing down what you are going through in the moment, you're giving yourself a release of stress, tension, energy that may have gone into lighting up a cigarette. You can also start to identify patterns which can tell you a lot about your own reasons for smoking. You can separate what is going on in your everyday life from smoking.

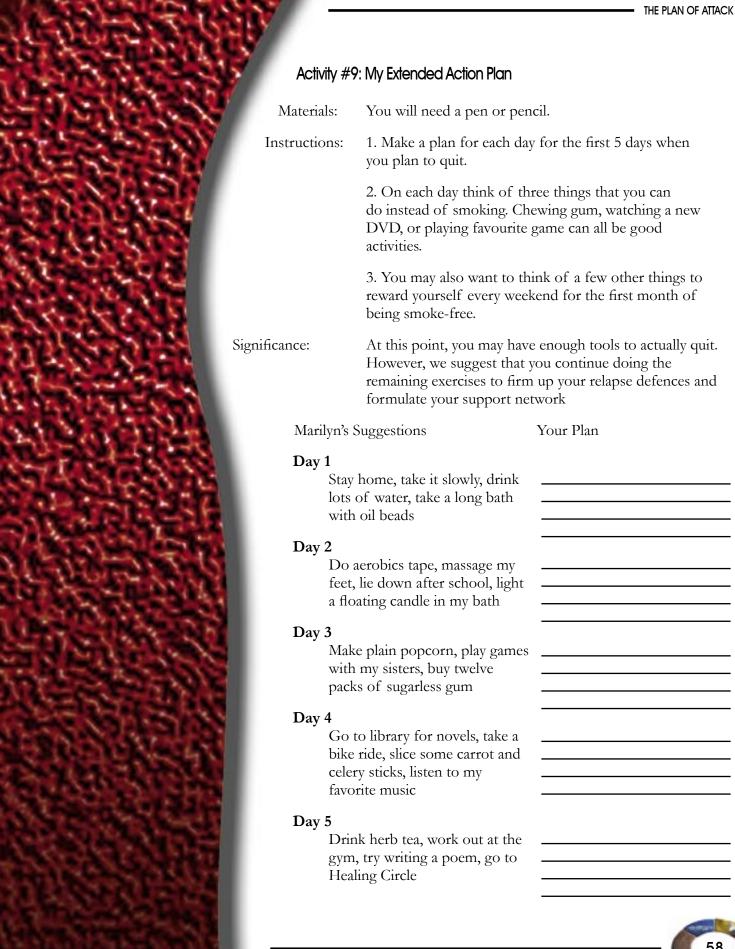
QUOTE

72 percent of young Canadians aged 15-19 are non-smokers. Most people do not smoke.

(Source: Health Canada Web Site, 2002)

J. F. 15 - 15 - 15 - 15		THE PLAN OF ATTACK
	Activity #7	7: What Makes Me Smoke - My Situational Triggers
1. 20 1. 1. 1. 1.	Materials:	You will need a pen or pencil.
	Instructions:	1. Identify those danger zones or triggers which represent a threat to your plan to quit smoking. We will use this info later to build on your plan.
		2. You can use the following headings to help you out: At Work, Social Events, Morning, Afternoon, Evening, Other, At Home.
	Significance:	You have just identified your "danger zones" or places where you might be at risk for relapse because of psychological pressures. We will then use this information to create your action plan in the next section.
		S
	Morning	
	Afternoon	
	Evening	
		56





	~		THE PLAN OF ATTAC
C. HOLL STORY			
	Marilyn's Suggestions	Your Plan	
	Day 6 to Day 30 Pray daily, attend a ceremony every week if possible, write in my journal, exercise		
	Day 30 to Day 90 Keep my Medicine Bag of tools close by for ideas		



Materials: You will need a pen or pencil.

Instructions: 1. Create a list of people that you can call to talk

to when you feel like reaching for a smoke. Make sure that you tell them about your plan before you need them so that they know that they should support you

and not tell you counter-productive things.

2. Record their name and phone numbers. ICQ#s

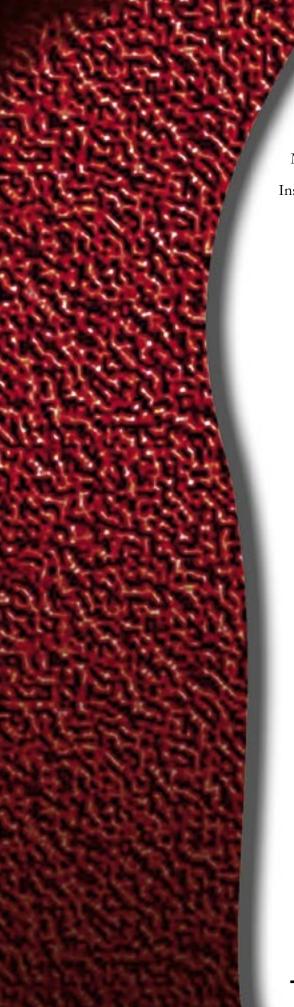
and email may also be appropriate.

Significance: At this point, you may have enough tools to actually

quit. However, we suggest that you continue doing the

remaining exercises to firm up your relapse defences.

Name:	Name:
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Phone #:	Phone #:
Name:	Name:
Dhana #.	
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ΠΟΙΕ π.	ΠΟΙΕ π.
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	-



Activity #11: Talking Circles / Healing Circles / Meetings

Materials: You will need a pen or pencil.

Instructions:

- 1. Talk with a health professional in your community to try to find a talking circle or a healing circle where you meet other people like yourself who are trying to stop abusing tobacco.
- 2. In urban areas, like Halifax, you may find a circle through your local yellow pages, friendship centre, or municipal health agency.
- 3. In Inuit communities, you may want to try contacting your local Health Centre or clinic.
- 4. In other communities, you may have access to a Community Health Resource (CHR) person, school nurse, school counsellor, or your Band Administration.
- 5. You can also use the online "Tobacco Healing Circle" at http://www.ayn.ca/quit
- 6. When you find out these meetings, write them down on the following page. Record the name of the contact person, location and time.
- 7. At some meetings it is customary to bring a couple of dollars to donate for coffee, call ahead if you are unsure.
- 8. Schedule the meeting on your calendar and when it is time for the meeting, go and attend. Feel free to bring a friend if you feel uncomfortable!

Significance:

Attending a healing circle or a talking circle can be a good way to surround yourself with people who understand what you are going through. It can also help motivate you as well as provide emotional support.

At this point, you may have enough tools to actually quit. However, we suggest that you continue doing the remaining exercises to firm up your relapse defences.

Activity #11: Talking Circles / Healing Circles / Meetings (cont...)

Record the recovery meetings available for you in your recovery.

Contact	Contact	
Name:	Name:	
Phone:	Phone:	
Time:	Time:	
Location:	Location:	
Contact	Contact	
Name:	Name:	
Phone:	Phone:	
Time:	Time :	
Location:	Location:	
1		
Contact	Contact	
Name:	Name:	
Phone:	Phone:	
Time:	Time :	
Location:	Location:	
Contact	Contact	
Name:	Name:	
Phone:	Phone:	
Time:	Time:	
Location:	Location:	



Materials: You will need a pen or pencil.

Instructions:

1. Each day try to write at least three sentences describing how the day went for you. Where were you when you felt your first nicotine craving? What did you do to avoid smoking? What else can you do to avoid smoking again if something similar happens? Why do you hate addiction? What benefits

have you noticed to not smoking?

2. Record an entry a day whenever you feel like it. Try to keep the journal for at least a month. You may find that you like it so much that you won't stop.

The journal is a stress relief tool. During times of war and times of great change many people have found that writing a journal helped them to express their feelings of stress and fear. The journal will also help you identify patterns in your cravings which you can use to hone your danger zone action plans.

At this point, you may have enough tools to actually quit. However, we suggest that you continue doing the remaining exercises to firm up your relapse defences.

Significance:

Activity#12: My Weekly Journal (cont...)

Document your	lournev	(photocopy 1	page for	extra room	to write).
	, = ======	(Process)	P#80 -0-	CITCIN IOOIII	00 111100).

Bunday		
<u> </u>		
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65 Getting Along Without Cigarettes
66 Relapse
68 Avoid Relapse using the Awareness Wheel
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71 Men and Smoking
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77 Survival Cards

85 OK, I Quit, Now What?



GETTING ALONG WITHOUT CIGARETTES

So now we have talked about the many reasons why people smoke. We have talked about some of these at great length including: smoking because your family members smoke, smoking because your friends smoke, smoking because you feel grief or sadness over an event or experience that causes you pain. We have talked about how some people smoke even when they are happy.

All of the above are common reasons why some young people may have started smoking in the first place. We have talked about circumstances, events, feelings as well as certain family members and friends that can trigger our want or need to light a cigarette.

Now that you have quit smoking and you have identified your "triggers" that make you want to smoke, we want to talk about **transference**.

Transference is moving your feelings from one substance to another. Common examples include having a drink of alcohol when you are sad. In the case of smoking, cigarettes can replace such feelings as: being alone, feeling sad, and even fear. If you drink when you are feeling down, it seems like a temporary solution to the feelings, a temporary high. Cigarettes can work much the same way. It is a temporary solution.

But all I feel is emptiness...is a common feeling people experience when they quit smoking. What can I do now so I don't feel this way?

We need to be aware of the potential to transfer or use another substance as a temporary solution to feeling good about ourselves. Now that you are a non-smoker, you can find different coping strategies to deal with the feelings that trigger you to smoke. There are two different types to triggers: **external** and **internal**. External triggers include: pressures in school, not wanting to gain weight. Internal triggers may be harder to identify. They rest in the **feelings** you experience when you find yourself craving a cigarette. These feelings are commonly negative. Dealing with these triggers with other coping strategies rather than smoking will mean you will replace your old activity of smoking with healthy activities.

RELAPSE

Smoking addiction has one of the highest relapse rates of any "drug."

What is **relapse**?

Re•lapse: is a recurrence of symptoms or actions of a disease (or addiction) after a period of improvement.

Relapsing back into the habit of smoking after you have quit may occur at any time whether it be a few days, weeks or months. It is common for former smokers to relapse into smoking again. In previous sections, we have discussed cigarette smoking as a means to manage your emotions, whether they are negative or positive emotions.

Smoking is a habit, a usual routine you have come to depend on when you feel your "triggers." That is, the circumstances or emotions that cause you to want a cigarette. If you have made the decision to be smoke-free, you are making the decision to change your habits. But your "triggers" will still be there. When you are in the first stages of becoming a non-smoking person, you are making the decision to stop the habit of smoking when you feel a certain way.

But at this stage, you may not have formed new habits yet to manage those "triggers." This is a common reason for relapse. There are two things that happen as a result of relapse. First, the physical health hazards of smoking return. Second, you may feel like a failure emotionally. Feelings of failure may bring up other emotions - shame, guilt and fear of relapsing again. This fear of failure can become a big obstacle or block to remaining smoke-free. The more we quit and then relapse, the greater the obstacle fear becomes.

When it comes to quitting smoking, the fear of failure (feeling as though you may never be able to quit) is bound to come up time and again. Remember that relapse is common. You are not the only person to relapse.

Example:

I quit smoking two weeks ago. After the first week, I could actually breathe again! The cravings were pretty had, but every time I wanted a cigarette, I kept going for a run instead.

I got into a fight with my mom the last night. She always makes me feel so horrible about myself! She always makes everything seem likes it's my fault! We ended up screaming at each other and I stormed out. Right after that, I smoked three cigarettes in a row. I was fuming! Whenever I'm around

my Mom, she always puts me down and says things that make me feel bad about myself.

After I smoked all of those cigarettes, I felt really rotten. My throat is scratchy, the cigarettes tasted sooooo gross. I'm still mad at my Mom and now I hate myself even more for smoking. I'll never be able to quit.

It's easy to think that relapsing back to smoking means instant failure. But don't think that relapsing back into your old habit of smoking once, twice and even three times means you will never be able to quit smoking. Now you know relapsing is part of the process of quitting smoking. It is what you do after you have relapsed that will help you to break the cycle and get you on your way to becoming smoke-free. Did you like the way relapsing made you feel? Of course not!

Did you make a "plan of attack" in the previous section of this manual for activities you would like to do when you feel your "triggers?" Go back to that plan as if the relapse never occurred. The next time you feel like you are going to relapse, you will have your plan of attack in mind. So you made a mistake. Making mistakes is healthy and people can learn from them. Learn from your mistakes. It's one of the best ways to begin changing your habits. Soon the successes will outweigh the failures.

QUOTE

Between 28% and 42% of pregnant teens smoke -- most live in poor and sometimes violent environments.

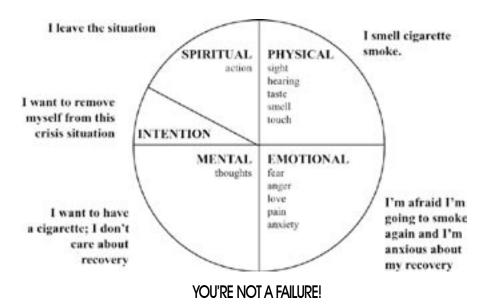
(Source: Canadian Association for the Advancement of Women

and Sport and Physical Activity (CAAWS). (1995). Evening the Odds:

Tobacco, Physical Activity and Adolescent Women.)

AVOIDING RELAPSE USING THE AWARENESS WHEEL

The awareness wheel can help us to identify those circumstances or events which may lead to relapse and it can help us to develop strategies for dealing with those circumstances or events.



The Awareness Wheel above shows how you can think about certain problems. The model can be used to solve any problem. In this case it is being used to solve a person's fear that smelling cigarette smoke will cause him to want to smoke.

The first quarter, the physical quarter, identifies the challenge, in this case, the smell of cigarette smoke.

The emotional quarter of the wheel deals with the person's feelings about the physical or identified challenge. In this case, the person has identified that they are afraid that smelling smoke will make him want to light up.

The mental quarter identifies what the person's thoughts are on the physical challenge and the feelings identified by the emotional quarter. These can be negative thoughts that arise from your feelings.

The final quarter of the wheel is called the spiritual quarter and it can be thought of as having two components: an intention aspect and an action aspect. The intention component identifies the desired outcome and the next step is the call to action. You have to act on the intention in order to complete the circle.

This problem-solving model can be used on any problem and is very useful for formulating a plan of attack on the danger zones identified earlier.

Activity #13: The Awareness Wheel

Materials: You will need a pen or pencil.

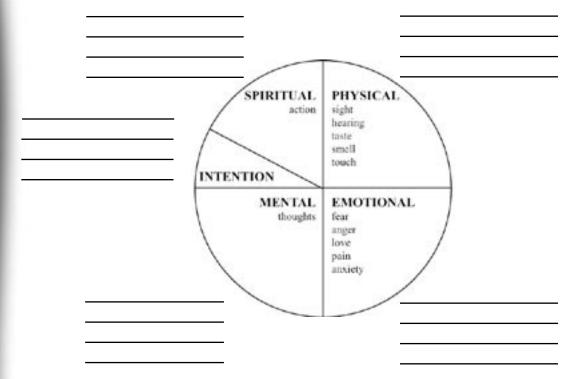
Instructions:

- 1. Identify a challenge or use one of your danger zones. Put it in the physical area of the wheel (top right).
- 2. Ask yourself how you feel about the challenge. Do you feel threatened by it? Does it make you angry? Put your feelings in the emotional quarter (lower right).
- 3. What do you think about these emotions? Do you resent the fact that it makes you feel afraid? Are there any negative thoughts? Put these in the mental quarter of the circle (lower left).
- 4. Now think about what you want to do about these feelings and thoughts. What is your desired outcome? What will you have to do in order to achieve this outcome? Put the solution in the spiritual section of the wheel (top left). Congratulations you have now come full circle on this problem!

Significance:

The Awareness Wheel is a problem-solving tool that can be used to solve any problem. It can be a useful tool for thinking about your action plan and ways you can avoid or deal with your danger zones.

At this point, you may have enough tools to actually quit. However, we suggest that you continue doing the remaining exercises to firm up your relapse defences.



FEMALES AND SMOKING

As females, we have different needs when it comes to quitting smoking and overcoming our addiction to tobacco.

Aboriginal female youth ages 11 to 16 have the highest smoking rates of all Aboriginal youth in Canada. The statistics for Aboriginal female youth smokers range at 75% to the entire Aboriginal female youth population in Canada. Why? It is helpful to know why female smoking rates are so high so we can understand our triggers for smoking. Understanding what triggers females to smoke will help us to break the cycle of tobacco addiction and will help us to remain smoke free.

Common triggers for smoking that females experience include: acceptance with a group or schoolmates, depression, shyness, sadness, loneliness, a break up of a relationship, divorce in the family and fear of gaining weight. Females often experience greater impact by the above circumstances as they can be perceived as internal triggers. Since internal triggers represent emotions and emotional triggers to wanting to smoke, they impact our self-esteem and body image.

When it comes to self-esteem and how you view your body, smoking is a common **dependant** and **comfort** to minimize the pain of some very tough problems. Here's how it works: A girl looks in the mirror and isn't happy with what she sees. She feels overweight and doesn't like how she looks. I don't want to gain any more weight, she sighs. Depression sets in. She lights up a cigarette. Smoking can easily be perceived as a way to curb an appetite but unconsciously, cigarettes can be viewed as a comfort, a temporary way to get your mind away from feeling badly about yourself. Feelings of depression caused by an unhealthy body image are very common in female youth smokers.

Your feelings are valid and there are ways to help you get through the tough times. Remember that you are not alone in these feelings. Do you have talking circles in your community? Why not start one up? It doesn't have to be a large circle, it can even begin with you and a few female friends. You will soon learn these feelings are very common, even in your friends. All-female talking circles are a great way to find support to remain smoke free. When you feel like the craving is too strong, talking to your friends who have agreed to support you, can help to take the cravings away immediately when you need help and eventually, for good.

1Wunska Study, Saskatchewan Indian Federation Health Council, study #14.

MALES AND SMOKING

Males have different needs when it comes to overcoming tobacco addiction and remaining smoke free. As boys and men, we are constantly being told we must be strong at all times. We are constantly being conditioned to the idea that we must control our emotions and that showing any signs of emotion makes us look weak. This perception of how men must act is not a new one. It has been going on in various cultures around the world for centuries.

But this perception can hinder you in your attempts to quit smoking and remain smoke free. As with females and smoking, there are also common "triggers" for smoking among males. While these triggers can be both internal and external, males are commonly hit with external pressures or triggers.

Common examples of external pressures are: pressures in school, pressures of acceptance, to fit and be "cool" with a tough exterior, having a bad day, being in a social setting where you feel like you don't know anyone (i.e.. Pow wow, a party, club, dance) and rejection from others.

With males, external pressures can often trigger internal ones. Here's an example: A guy works up the courage to ask a girl to dance. She says no. He feels embarrassed for asking. "She doesn't like me. What's wrong with me?" he asks himself, walks away and lights up a cigarette. He now may become angry. Angry that she doesn't like him but also angry with himself for feeling embarrassed. In this case, anger is the secondary emotion, one that is commonly expressed to cover up the first initial emotion. Males are usually "taught" through example that feelings of embarrassment are not acceptable to display whereas anger on the other hand, carries force, effectiveness or strength. Feeling angry tells you something is not right for you. But anger often hurts people and can cause more internal "trigger" feelings like hurt and fear.

Recognizing what your triggers for smoking are, whether external or internal, can help you identify what it is that makes you light up a cigarette. Once you know what your "triggers" are, you can start replacing smoking with other activities when you get the cravings for cigarettes.

SABOTAGE DEFENCE

First of all we need to understand "sabotage" in order to understand why we need defences against it when we are trying to quit smoking.

What is **sabotage**?

<u>Sa*bo*tage</u>: is an act or process that tends to hinder your successes. Sabotage is usually a destructive or obstructive action by another person or thing.

Remember that whatever "triggers" or circumstances and emotions caused you to take "comfort" in a cigarette before will still be there after you have stopped smoking. Whenever any person, place, thing or situation threatens us and brings back certain emotions we attach to smoking, your automatic response mechanism kicks in and you might or will reach for a cigarette. Once you stop smoking, this automatic protection reflex against harm or hurt will build tension in you every time you encounter a "trigger."

Over time you will begin learning how to identify the "triggers" and situations that make you respond emotionally and put you in danger of reaching for a cigarette. By learning how to identify these situations and how they affect you, you can use your plan of attack effectively. By recognizing how to respond to your "triggers" with your plan of attack, you are rebuilding and changing your "survival" skills so that cigarettes are no longer necessary. You are breaking the old cycle.

It hurts when you feel like you are being deliberately sabotaged by a close friend or relative. A sharp comment like: "I wonder how long you'll last this time," can be devastating, especially in the first few days after you have quit smoking or if you have relapsed back to smoking in the past. You should expect these sorts of comments and can take measures to prepare yourself for such sabotages.

At times, even well meaning people can say and do cruel things that can effect your decision to stay smoke-free. They may be acting or speaking out of fear of what will become of them if you change. Will they have to smoke alone now? Will they feel like you have nothing in common any more? Will they feel left behind because you are now healthy and they are still smoking? Remember that change and their fear of it are the real targets of their comments and actions. It is not you or your decision to quit smoking.



Materials: You will need a pen or pencil.

Instructions:

- 1. Make a list of likely examples of sabotage tactics and potential sabotage you have or might experience from friends or relatives. Remember, sabotage can come in various forms. Sabotage can be a comment that hurts you or a deliberate action against your desire to remain smoke-free.
- 2. Some questions to ask yourself during this process are: What sort of comments have family and friends made to you after you decided to quit smoking? Do their comments hurt or help you?
- 3. Exchange your list with others in your group or class. Did they come up with different sabotage tactics? Remember that sometimes even what appears to be "friendly" gestures can be sabotages against your plan.

Be aware of all potential sabotages!

Significance:

You will be using the things you discover in this exercise to identify potential sabotage tactics that you may come across after you have quit smoking. Use this list to recognize sabotage tactics when they occur in the future.

Examples of sabotage comments:

- 1. "I wonder how long you'll last this time."
- 2. "You'll never quit smoking."
- 3. *Come on, it's only one cigarette! What's the big deal?"

Example of sabotage actions:

 Offering me cigarettes at a party when they know I have quit smoking.

Activity#14: Identifying Sabotage (cont...)

Make your list of sabotage tactics and potential sabotage tactics.

1.____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. ______

10. _____

Also remember that sabotage can also come from within you as well as from others. How?

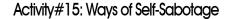
Take a look at the list below. Here are some examples of thoughts that might occur when you have decided to quit smoking:

- Change is scary.
- I don't know how to make new habits.
- I've had a bad day. I'm going to smoke just this once.

Can you think of ways sabotage can come from inside you rather than other people?

QUOTE

While cigarette manufactures try to portray woman who smoke as independent, confident, successful and attractive, the women who have the best education and the best careers are least likely to smoke.



Materials: You will need a pen or pencil.

Instructions: 1. Fill in the spaces below with things that cause you

to smoke. Some questions to ask yourself during this process are: What ways can you sabotage yourself into smoking? How can I tell I am sabotaging myself? Is there a pattern to making me feel this way?

Do I feel this way when I am by myself or with

other people?

Significance: Recognizing certain patterns of thought that coax you

into smoking is important to breaking the cycle of smoking. By identifying the patterns of self-sabotage,

you can say no to yourself and your cravings.

What are some ways you might sabotage yourself into smoking? Can you come up with five examples?

Example:

1. I've had a bad day. I'm going to smoke just this once.

1			
1			

2._____

3._____

4. _____

5.____

SURVIVAL CARDS

From the moment you quit smoking, you are learning to get along without cigarettes. During this time, you may run into people who don't seem to be on your side. Just remember that they are most likely speaking our acting out of their own fears and you shouldn't take their comments or actions personally.

These survival cards can help you overcome sabotage. Cut them out and put them in your wallet, in your locker, paste them on your bedroom wall or keep them in your pocket.

Look at them when you need to and memorize them if you can!

HALT

Don't let yourself get too Hungry, Angry, Lonely or Tired.

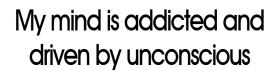
One person, place, thing or situation at a Time.

I do not need tobacco any longer to get through the day

> Quick, go talk to a friend

> > Take a walk. Smell the air.

Cigarettes make me tired!



It is PAINFUL to seek relief in tobacco.

Clear, Calm, and Grounded

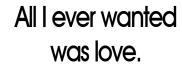
I don't need to smoke.
I am happy with who I am.



We Need Each Other

Our dreams are pictures of what happened today from the point of view of our unconscious

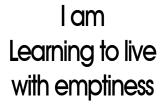
Not without pain
But
WITHOUT FEAR



I Am Not Alone

My body carries my unconscious as well

Not without pain
But
WITHOUT FEAR

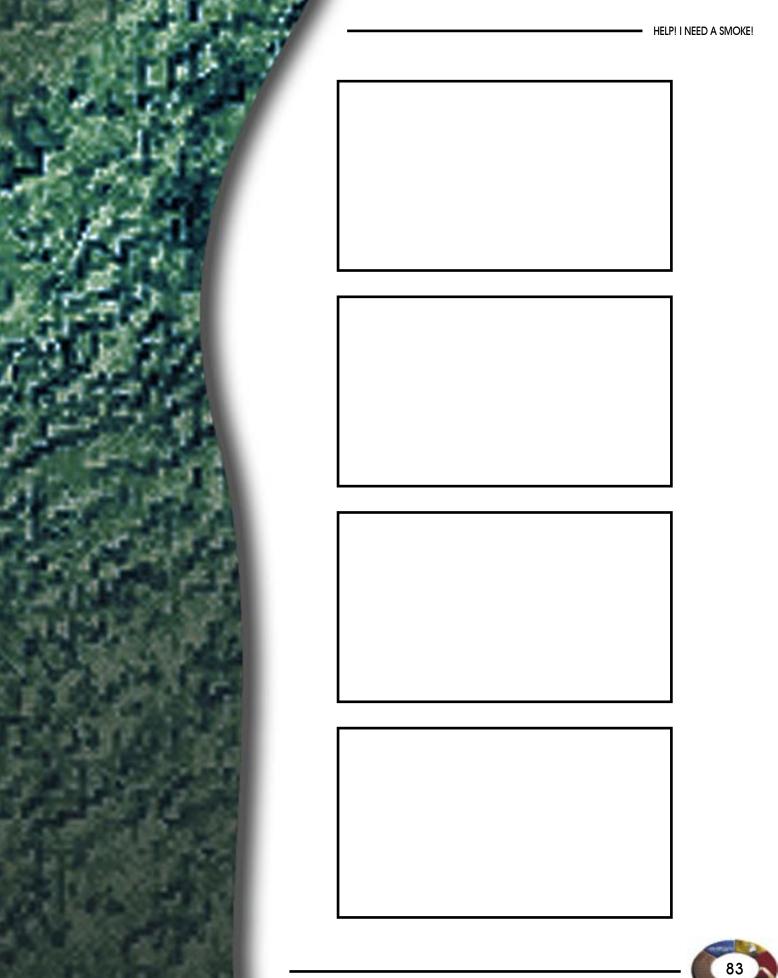


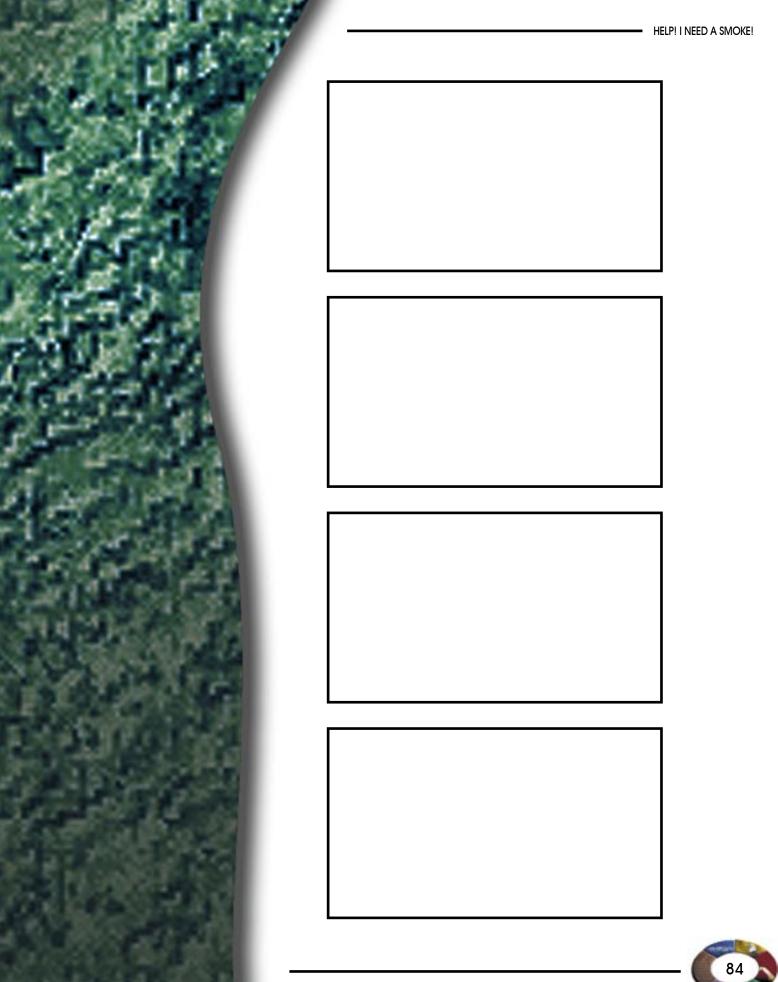
Serenity Prayer

God grant me the serenity to accept
the things I cannot change, courage to
change the things I can, and the wisdom
to know the difference.

Congratulations! You can taste your food now!

Create your own survival cards





OK, I QUIT, NOW WHAT?

Now that you have completed the exercises, you have all the tools that you need to stop abusing tobacco. All that is left now is to choose when you will put your plan into action. There are a lot of different ways to put your plan into action.

You could choose a time when you are already low on smokes to quit. When you have only one smoke left, crack it open and burn it as an offering instead of smoking it.

Some people stop smoking when they are sick, so this is an opportunity to stop smoking for good. You could put your plan into gear the next time you are ill. If you do not get ill often, this may not be a good plan though!

How about picking a significant date, like a holiday or your birthday? What better gift to give yourself than good health?

Or you could just do it. Today. Throw out the smokes you have left and quit today. Right now. The choice is yours. It always has been.

QUOTE

B.C. has the lowest proportion of smokers at 25.5 per cent in 1996/1997. Again, B.C. consistently has the lowest percentage of smokers.

(Source: Health Canada, Wired Health Online Magazine, 1999)

86 Aboriginal Culture 88 Personal Wellness and Addictions 89 Tobacco Related Topics 97 Smoking Statistics, Risks and Pharmacology



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The reader is encouraged to add to this list.

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TITLE Nicotine and the tobacco smoking habit / section editor, D.J.K. Balfour.

PUBLISHER Oxford; Pergamon Press, 1984.

DESCRIPTION xi, 221 p.: ill.; 29 cm.

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TITLE A Safe cigarette? / Edited by Gio B. Gori and Fred G. Bock. PUBLISHER Cold Spring Harbor, N.Y.: Cold Spring Harbor Laboratory, 1980.

DESCRIPTION xi, 364 p.; 24 cm.

SUBJECT(S) Tobacco — Toxicology — Congresses Cigarette manufacture and trade - Congresses Cigarette habit — Congresses Smoking — Congresses Tobacco — congresses Nicotine — toxicity — congresses Smoking — congresses

AUTHOR Whelan, Elizabeth M.

TITLE A smoking gun: how the tobacco industry gets away with murder /Elizabeth M. Whelan; edited by Stephen Barrett. PUBLISHER Philadelphia: Stickley, c1984. DESCRIPTION, 244 p.: ill.; 24 cm. SUBJECT(S) Tobacco industry Cigarette habit

TITLE An ounce of prevention: strategies for solving tobacco,

AUTHOR Cahalan, Don.

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PUBLISHER San Francisco: Jossey-Bass, 1991.

DESCRIPTION, 290 p.; 24 cm.

SUBJECT(S) Alcoholism — United States — Prevention Tobacco habit — United States — Prevention Drug abuse — United States — Prevention Health promotion — United States Alcoholism — prevention & control — United States Health Promotion — methods

AUTHOR United States. Congress. Senate. Committee on Environment and Public Works. Subcommittee on Clean Air and Nuclear Regulation. Congress. Senate. Committee on Environment and Public Works. Subcommittee on Clean Air and Nuclear Regulation.

TITLE Assessing the effects of environmental tobacco smoke : hearing before the Subcommittee on Clean Air and Nuclear Regulation of the Committee on Environment and Public Works, United States Senate, One Hundred Third Congress, second session on S. 262 PUBLISHER Washington: U.S. G.P.O.: 1994.

DESCRIPTION iii, 599 p.: ill.; 24 cm.

SUBJECT(S) Tobacco smoke — Health aspects — United States Passive smoking — Health aspects — United States Tobacco smoke pollution — United States — Prevention Smoking in the workplace — United States — Air quality management — United States

AUTHOR Chandler, William U., 1950-

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DESCRIPTION 47 p.: ill.; 22 cm.

SUBJECT(S) Tobacco habit Tobacco — Physiological effect Tobacco habit — Economic aspects

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DESCRIPTION vi, 148 p.; 24 cm.

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AUTHOR Miles, Robert H

TITLE Coffin nails and corporate strategies / by Robert H. Miles, in collaboration with Kim S. Cameron.

PUBLISHER Englewood Cliffs, N.J.: Prentice-Hall, 1982.

DESCRIPTION , 298 p. : ill. ; 24 cm.

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AUTHOR Lee, Peter N., 1943-

TITLE Effects of smoking on the fetus, neonate, and child / edited by David Poswillo and Eva Alberman.
PUBLISHER Oxford; Oxford University Press, 1992.

DESCRIPTION, 230 p.: ill.; 24 cm.

SUBJECT(S) Pregnant women — Tobacco use — Health aspects — Congresses Fetus — Effect of chemicals on — Congresses Smoking — Prevention — Congresses - Passive smoking in infants — Congresses Passive smoking in children — Congresses Fetus — drug effect

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AUTHOR Lee, Peter N., 1943-

TITLE Environmental tobacco smoke and mortality: a detailed review of epidemiological evidence relating environmental tobacco smoke to the risk of cancer, heart disease, and other causes of death in adults who have never smoked / P.N. Lee.

PUBLISHER Basel; Karger, 1992.

DESCRIPTION, 224 p.; 25 cm.

SUBJECT(S) Passive smoking — Health aspects Tobacco smoke pollution — Health aspects - Environmentally induced diseases — Toxicology Cause of Death - Heart Diseases — epidemiology Heart Diseases — mortality Neoplasms — epidemiology - Neoplasms — mortality

AUTHOR Abel, Ernest L., 1943-

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PUBLISHER Boca Raton, Fla.: CRC Press, c1983.

DESCRIPTION 245 p.: ill.; 27 cm.

SUBJECT(S) Drug abuse in pregnancy Alcoholism in pregnancy Fetus — Effect of drugs on Generative organs — Effect of drugs on Marihuana — Toxicology Tobacco — Toxicology Alcohol — Toxicology Drugs and sex Alcohol, Ethyl — Pharmacodynamics - Prenatal

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PUBLISHER Cold Spring Harbor, N.Y.: Cold Spring Harbor Laboratory, 1986.

DESCRIPTION, 428 p.: ill.; 24 cm.

AUTHOR White, Lawrence, 1942-

TITLE Merchants of death : the American tobacco industry / Larry C. White.

PUBLISHER New York: Beech Tree Books, c1988.

DESCRIPTION 240 p.; 25 cm.

SUBJECT(S) Tobacco industry — United States Advertising — Cigarettes — United States Tobacco — Physiological effect

TITLE Mortality from smoking in Developed countries, 1950-2000 indirect estimates from national vital statistics / Richard Peto... [et. al.]. PUBLISHER New York: Oxford University Press, 1994. DESCRIPTION 103, 553 p.: ill.; 30 cm. SUBJECT(S) Tobacco habit — Mortality Cigarette smokers — Mortality

TITLE Nicotine addiction: principles and management / edited by C. Tracy Orleans, John Slade.
PUBLISHER New York: Oxford University Press, 1993.

DESCRIPTION, 435 p.: ill.; 24 cm.

SUBJECT(S) Tobacco habit

TITLE Nicotine and the tobacco smoking habit / section editor, D.J.K. Balfour.

PUBLISHER Oxford; Pergamon Press, 1984.

DESCRIPTION xi, 221 p.: ill.; 29 cm.

SUBJECT(S) Nicotine — Toxicology Nicotine — Physiological effect Tobacco habit - Smoking Nicotine — Pharmacodynamics Smoking

TITLE Reducing the health consequences of smoking: 25 years of progress: a report of the Surgeon General: executive summary. PUBLISHER Rockville, Md.: U.S. Dept. of Health and Human Services, Public Health Service, Centers for Disease Control, Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 1989.

DESCRIPTION, 703 p.: ill.; 23 cm.

SUBJECT(S) Tobacco — Physiological effect Cigarette habit Smoking — United States

AUTHOR Warner, Kenneth E., 1947-

TITLE Selling smoke : cigarette advertising and public health / Kenneth E. Warner.

PUBLISHER Washington, DC: American Public Health Association, [1986]

DESCRIPTION 112 p.: ill.; 23 cm.

SUBJECT(S) Tobacco — Toxicology Health education Advertising — Cigarettes Consumer education

AUTHOR Viscusi, W. Kip.

TITLE Smoking: making the risky decision / W. Kip Viscusi.

PUBLISHER New York: Oxford University Press, 1992.

DESCRIPTION x, 170 p.: ill.; 24 cm.

SUBJECT(S) Smoking — United States — Psychological aspects Tobacco habit — United States — Psychological aspects Smoking — Economic aspects — United States Tobacco habit — Economic aspects — United States Decision-making — United States Risk-takers

TITLE Smoking and aging / edited by Raymond Bosse, Charles L. Rose.

PUBLISHER Lexington, Mass.: Lexington Books, c1984.

DESCRIPTION, 256 p.: ill.; 24 cm.

SUBJECT(S) Aged — Diseases Tobacco — Physiological effect Chronic diseases — Age factors Smoking Aging

TITLE Smoking and reproductive health / edited by Michael J. Rosenberg. PUBLISHER Littleton, Mass.: PSG Pub. Co., c1987.

DESCRIPTION, 239 p.: ill.; 23 cm.

SUBJECT(S) Smoking — Physiological effect — Congresses

AUTHOR Rutsch, Edward S.

TITLE Smoking technology of the aborigines of the Iroquois area of New York State

PUBLISHER Rutherford [N.J.] Fairleigh Dickinson University Press [1973]

DESCRIPTION 252 p. illus. 27 cm.

SUBJECT(S) Indians of North America — New York (State) — Social life and customs Smoking — New York (State) Tobacco-pipes 9= Indians — Social life and customs

AUTHOR Nath, Uma Ram.

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PUBLISHER Oxford [Oxfordshire]; Oxford University Press, 1986.

DESCRIPTION, 291 p.: ill.; 23 cm.

SUBJECT(S) Tobacco industry — Developing countries Tobacco habit — Developing countries Advertising — Cigarettes — Developing countries Public health — Developing countries

AUTHOR Myers, Sally.

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PUBLISHER Englewood, Colo.: Libraries Unlimited, 1991.

DESCRIPTION, 167 p.; 24 cm.

SUBJECT(S) Substance abuse — United States — Bibliography Alcoholism — United States — Bibliography Drug abuse — United States — Bibliography Tobacco habit — United States — Bibliography

AUTHOR Cruz, Martin de la.

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TITLE The Biology of nicotine dependence.

PUBLISHER Chichester; Wiley, 1990.

DESCRIPTION ix, 264 p.: ill.; 24 cm.

SUBJECT(S) Nicotine — Physiological effect — Congresses Nicotinic receptors — Congresses Tobacco habit — Physiological aspects — Congresses Nicotine — pharmacology — congresses Substance Dependence — congresses

AUTHOR Guerin, M. R. (Michael Richard), 1941-

TITLE The chemistry of environmental tobacco smoke: composition and measurement / M.R. Guerin, R.A. Jenkins, and B.A. Tomkins.

PUBLISHER Boca Raton: Lewis Publishers, c1992.

DESCRIPTION 330 p.: ill.; 24 cm. SUBJECT(S) Tobacco smoke pollution

TITLE The Clinical management of nicotine dependence /

NOTE A. Cocores, editor.

PUBLISHER New York: Springer-Verlag, c1991.

DESCRIPTION, 336 p.: ill.; 24 cm. SUBJECT(S) Tobacco habit — Treatment

AUTHOR Reynolds, Patrick.

TITLE The gilded leaf: triumph, tragedy, and tobacco: three generations

of the R. J. Reynolds family and fortune / by Patrick Reynolds and Tom Shachtman.

PUBLISHER Boston: Little, Brown, c1989.

DESCRIPTION 353 p., [16] p. of plates: ill.; 25 cm.

SUBJECT(S) R. J. Reynolds Tobacco Company — History Reynolds family Tobacco industry — United States — History

AUTHOR United States. Public Health Service. Office of the Surgeon General.

TITLE The Health benefits of smoking cessation: a report of the SurgeonGeneral, 1990.

PUBLISHER Rockville, Md.: U.S. Dept. of Health and Human Services, Public Health Service, Centers for Disease Control, Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health; [1990]

DESCRIPTION, 628 p.: ill.; 23 cm.

SUBJECT(S) Tobacco — Physiological effect Tobacco habit — Treatment — United States

TITLE The Health consequences of involuntary smoking: a report of the Surgeon General.

PUBLISHER Rockville, Md.: U.S. Dept. of Health and Human Services, Public Health Service, Centers for Disease Control, Center for Health Promotion and Education, Office on Smoking and Health, for sale by the Supt. of Docs., U.S. G.P.O., 1986. DESCRIPTION, 359 p.: ill.; 23 cm.

SUBJECT(S) Tobacco — Toxicology Passive smoking Cigarette smoke — Toxicology

TITLE The Clinical management of nicotine dependence /

NOTE A. Cocores, editor.

PUBLISHER New York: Springer-Verlag, c1991.

DESCRIPTION, 336 p.: ill.; 24 cm.

SUBJECT(S) Tobacco habit — Treatment Nicotine — Physiological effect Nicotine — adverse effects Tobacco Use Disorder — therapy

AUTHOR Harrington, John Peabody.

TITLE Tobacco among the Karok Indians of California PUBLISHER Washington, U.S. Govt. print. off., 1932. DESCRIPTION, 284 p. illus. (map) 36 pl. (1 fold.; incl. ports.) on 19 l., diagr. 23 cm.

SUBJECT(S) Karok Indians Karok language — Texts Indians of North America — Social life and customs Tobacco-pipes

AUTHOR Goodman, Jordan.

TITLE Tobacco in history: the cultures of dependence / Jordan Goodman.

PUBLISHER London; Routledge, 1993.

DESCRIPTION xi, 280 p.; 25 cm.

SUBJECT(S) Tobacco — History Tobacco — Social aspects Smoking — History

AUTHOR Spinden, Herbert Joseph, 1879-

TITLE Tobacco is American; the story of tobacco before the coming of the white man.

PUBLISHER New York, New York Public Library, 1950.

DESCRIPTION, 120 p. illus., maps. 22 cm.

SUBJECT(S) Tobacco — History

TITLE Tobacco smoking and nicotine : a neurobiological approach / edited by William R. Martin ... [et al.].

PUBLISHER New York: Plenum Press, c1987.

DESCRIPTION x, 523 p.: ill.; 26 cm.

SUBJECT(S) Nicotine — Physiological effect — Congresses Tobacco — Physiological effect — Congresses Neuropsychopharmacology — Congresses

AUTHOR Rienzo, Patricia Gilroy.

TITLE Tobacco smoking and nutrition: influence of nutrition on tobacco - associated health risks / editors, John N. Diana, William A. Pryor. PUBLISHER New York, N.Y.: New York Academy of Sciences, 1993. DESCRIPTION ix, 366 p.: ill.; 24 cm. SUBJECT(S) Tobacco habit — Nutritional aspects — Congresses Smoking — Physiological aspects — Congresses Tobacco — Physiological effect — Congresses Cancer — Chemoprevention — Congresses

THE LAST PUFF, Ex-smokers Share the Secrets of their Success Edited by John W. Farquhar, MD and Gene A. Spiller, Ph.D. Published in 1990 by W.W. Norton & Co. 500 Fifth Ave., NY, NY 10110 ISBN: 0-393-30803-0

TITLE Smoke and Mirrors: The Canadian Tobacco War, by Rod Cunningham, Foreword by Jake Epp, Introduction by Judith Mackay. PUBLISHER Ottawa, ON: International Development Research Centre, 1996.

ISBN: 0-88936-755-8

SUBJECT(S) Smoking - Canada - Prevention - Tobacco Industry

SMOKING STATISTICS, RISKS, AND PHARMACOLOGY

The smoking person is at great risk and will likely die prematurely of an entirely preventable disease. The addicted person may greatly fear going through the traumas of working with their issues which cause them to smoke, and may choose to leave the recovery program. On the other hand, the pain of recovery from psychic wounds may be infinitely preferable to the very real pain of chemotherapy, surgery or some other kind of cancer treatment. Each one of us must make this choice for ourselves. No one can judge for you; no one has the right to make this choice for you.

Undoubtedly, the promise of improved health or the freedom from known health hazards is a major gift to which we are entitled. Warning labels on cigarette packages alert us to some of the scientifically well-documented ill-effects:

40,000 people will die this year in Canada from smoking. How big is your town?

- A major cause of heart disease, potential injury to unborn babies, higher risk of cancer.
 - Lung cancer among women has surpassed breast cancer as a cause of death.
 - Second hand smoke has been linked to sudden Infant Death Syndrome
 - Many of the non-nicotine ingredients in cigarettes are suspected carcinogens when burned and the smoke inhaled, contributing to the incidence of cancer or disorders in other vital organs.

Smoking is prevalent in all societies, in all countries and amongst all major groups of people world wide. It is estimated that over 40,000 Canadians die each year as a direct result of smoking. The following numbers provide some indication of the scope of the problem.

Smoking and Aboriginal Youth in Alberta

The "Firewatch On Aboriginal Adolescent Gambling" survey provides quantitative estimates of the prevalence of problem behaviours among Aboriginal youth in Alberta. Almost half (48%) of the students surveyed smoked regularly or once in awhile. Female students were more likely to smoke than male. The respective percentages were 58% and 39%. Smoking dramatically increased after age 12. Of those age 12 and under, 11% smoked regularly. For those 13-15 and 16 or older, the respective percentages were 30% and 47%. The average age at which smoking began was 11. The percentage of students in this study who have

never smoked (32%) was lower than in the general Alberta student population (49%)

Smoking by the students was significantly related to parents smoking. Seventy-three percent of the students who currently smoke have a mother who smokes and 64% have a father who smokes. Only 10% have a mother who has never smoked and 15% have a father who has never smoked. On the other hand, 25% of the students who have never smoked have a mother who has never smoked and 21% have a father who have never smoked.

(Firewatch On Aboriginal Adolescent Gambling, Nechi Institute on Alcohol and Drug Education, 1995)

Smoking and Aboriginal Peoples

TOBACCO USE: The majority of Natives living on reserves (55%) currently smoke; about 42% are either former smokers or abstainers. About 44% of all smokers do so daily. Regionally, Northwest Territories (59.3%) and Prince Edward Island (55%) have the highest proportion of daily smokers, while British Columbia (33.7%) and Ontario (40.7%) have the lowest. Among those who smoke daily, 32% smoke between one and 10 cigarettes per day, 40% smoke 11 - 20 cigarettes per day and 27% smoke more than 21 cigarettes per day.

(Taken from "Aboriginal People, Highlights" by Diane McKenzie, Canadian Centre on Substance Abuse. Original Source: Statistics Canada. 1993. Language, Tradition, Health, Lifestyle and Social Issues; 1991 Aboriginal Peoples Survey. Ottawa: Statistics Canada. Cat. No. 89-533.)

Smoking and Canadian Teens

Profile of Youth Aged 15-19: youth smoking prevalence is up. Nationally, for both sexes aged 15-19, the rate of smoking is 27%.

As of May 1994, 26% of young men aged 15-19 (244,000) and 29% of young women aged 15-19 (261,000) smoked. Approximately two thirds of these smokers smoke at least once a day, while about one third smoke less often. Since 1991, the long-term decline in prevalence of smokers of both sexes in this age group has reversed and the prevalence rates are at 1985 levels.

Of the five regions, Quebec (31%) and the Prairies (29%) exceed the national average. Of the rest, British Columbia has the lowest rate of smokers (24%) followed by the Atlantic (25%) and Ontario (26%).

Of the young men aged 15-19 who smoke, 31% began to smoke before age 13 and 85% began to smoke before age 16. Almost all began to smoke before age 18. Of the young women aged 15-19

who smoke, 26% began smoking before age 13, 83% before age 16 and almost all before age 18.

(The Survey on Smoking in Canada is one of the initiatives of the federal Tobacco Demand Reduction Strategy announced in February 1994. The purpose of this survey is to measure levels and changes in tobacco-smoking behaviour in the provinces over the 1994-95 fiscal year. The survey is being conducted by Statistics Canada on behalf of Health Canada. This information is from a Fact Sheet reporting highlight results from Cycle 1 of the survey (interviews in April/May 1994).)

Smoking and the General Canadian Population

According to the August 1994 Survey on Smoking in Canada, 30% of Canadians over 15 years of age smoke cigarettes. Rates of use are highest among those aged 20-24 (38%) and lowest for adults over 65 (16 %).

About 36,325 deaths across Canada were indirectly attributed to smoking in 1990. Prince Edward Island and Nova Scotia have the highest rates of smoking-related deaths in the country and the Yukon and Northwest Territories have the lowest.

(Taken from: Canadian Profile -Tobacco, by Bob Williams, Addiction Research Foundation and Diane McKenzie, Canadian Centre on Substance Abuse) Each year smoking kills more Americans than alcohol, cocaine, crack, heroin homicide, suicide, automobile accidents, fires and AIDS combined.

(United States Centers for Disease Control)

Smoking In the USA

The Environmental Protection Agency has classified tobacco smoke as a class "A" carcinogen along with such poisons as benzene and asbestos. 45.8-million Americans continue to smoke. Cigarette disease victims die more than twenty years before the life expectancy of nonsmokers. Each year smoking kills more Americans than alcohol, cocaine, crack, heroin, homicide, suicide, automobile accidents, fires and AIDS combined.

(United States Centers for Disease Control)

The statistics which follow were obtained from an American Cancer Society pamphlet and are for 1993.

Cause of Death (excluding smoking)	Number of Deaths per Year (U.S.A. only)
Alcohol related	105,000
Car accidents	49,000
Suicide	31,000
Aids	31,000
Murder	22,000
Fire	4000
Cocaine	3,300
Heroin/Morphine	2,400
Total (of above)	247,700
Cause of Death (Tobacco only)	Number per Year (U.S.A. only)
Total Tobacco related	434,000

Smoking World Wide

How many smokers? There are 1.1 billion smokers worldwide. In developed countries, 41% of men and 21% of women regularly smoke cigarettes. In developing countries, 50% of men smoke and 8% of women. The number of women who smoke is increasing in many countries.

How many cigarettes? An estimated 6000 billion cigarettes are smoked every year. In developed countries, annual consumption of cigarettes dropped from 2800 cigarettes per adult in the early 1980 to 2400 in the early 1990s. In developing countries, accounting for three-quarters of the world's population, per adult consumption rose from 1150 cigarettes per year to 1400, and is still increasing at 1.7% per year.

How many deaths are caused by tobacco? About 3 million deaths a year now, with about one-third of them in developing countries. If current smoking trends persist, there will be approximately 10 million deaths a year in 30 to 40 years, with about 70% of them in developing countries.

Cigarettes currently cause just under 20% of all deaths in developed countries. The facts speak for themselves. Every ten seconds, another person dies as a result of tobacco use.

(TOBACCO AND HEALTH: THE FACTS, World Health Organization, United Nations)

Risks of Tobacco Use:

Tobacco use increases the risk of:

- Lung cancer
- Heart disease
- Chronic lung disease (chronic bronchitis and emphysema)
- Stroke
- Cancer of the mouth, throat, esophagus, bladder, kidney, cervix, and stomach
 - Peptic Ulcer
 - Osteoporosis
 - Amputation of limbs due to "Smoker's Leg"

Fertility

Several reports suggest that women who smoke have reduced fertility. Smoking is thought to affect sperm quality in men. Sperm of smokers have decreased density and motility and increased abnormalities compared to non-smokers.

Smoking and Pregnancy

Women who smoke during pregnancy have an increased risk of complications including:

- Low birth weight newborns (less than 2500 grams)
- Miscarriages
- Premature deliveries
- Still births

Children born to mothers who smoked during pregnancy have a higher chance of developing asthma.

Risks to Newborn

- Probable contributor to late fetal mortality and infant mortality
- Baby receives nicotine and carbon monoxide from mother's blood
- Possible role in Sudden Infant Death Syndrome (SIDS)
- Nicotine and other chemical components of cigarette smoke are found in the breast milk of nursing mothers who smoke or are exposed to second hand smoke.

Health Effects of Pipes and Cigars

- Compared to non-smokers, pipe and cigar smokers have an increased risk of developing cancer of the mouth, throat, larynx, and stomach.
 - Pipe smoking appears to be a direct cause of cancer of the lip.
 - Mortality ratios for lung cancer in those who have only smoked pipes or cigars is significantly higher than in non-smokers but lower than in cigarette smokers.

Health Effects of Smokeless Tobacco

Smokeless tobacco contributes to the risk of:

- Oral cavity cancers (i.e. cheek and gum)
- Oral leukoplakias commonly found at the site of tobacco placement (white spots which may undergo enoplastic transformations)
- Receding gums
- Nicotine dependence or addiction
- Adverse health effects associated with nicotine use such as increased blood pressure, cardiac output, peripheral vasoconstriction

Components of Tobacco Smoke:

- There are approximately 4000 chemicals in tobacco smoke.
- 43 cancer-causing substances have been identified in tobacco smoke.

The Main Components of Tobacco Smoke Are:

- Nicotine
- Tar
- · Carbon Monoxide

Nicotine:

- The addictive agent in tobacco.
- A pharmacologic and psychoactive drug that travels quickly throughout the body and to the brain each time a cigarette is smoked.
- Responsible for many of the physiological effects of smoking.

Tar:

- Dry particulate matter found in tobacco smoke, comprised of hundreds of chemicals.
- Deposited in the smoker's lungs.
- Accumulates in lungs over time, making breathing more difficult and contributing to the development of lung disorders and cancer.
- · Causes the yellow stains on smoker's teeth and fingers.

Carbon Monoxide:

- Formed when tobacco is burned.
- A poisonous, odorless, tasteless, colorless gas.
- Replaces oxygen in the blood, depriving the body of oxygen.

Tobacco

The tobacco that is available for commercial sale and use today is not the natural product that was used in traditional ceremonies in the past. Many chemicals are present in commercial tobacco. Some of the chemicals come from fertilizers and from substances that cause the tobacco to burn slowly. This is most apparent in the paper that cigarettes are wrapped in, whether they are tailor-made or roll-your-owns.

Pharmacology of Nicotine

Absorption:

Nicotine is absorbed rapidly in the lung when tobacco is smoked. Nicotine in chewing tobacco and snuff is absorbed in the mucous membranes of the mouth and nose. Once absorbed into the general circulatory system, nicotine crosses the blood-brain barrier and reaches the brain within seconds. Absorption depends on inhalation amount, depth of inhalation and pH of smoke.

Action:

Nicotine binds to various receptor sites in the body. Three major sites of nicotinic action:

- 1. Neuromuscular junction
- 2. Autonomic ganglia
- 3. Cholinergic sites in Central Nervous System

The initial use of tobacco is usually accompanied by a number of unpleasant symptoms which disappear following chronic use. Nicotine is a powerful mood-altering drug (psychoactive). It affects an individual's mood, learning, alertness, relaxation, and ability to concentrate. And it often leads to increased arousal and attention as well as decreased anxiety and stress.

Nicotine in as few as 1 - 2 cigarettes (0.3- 1 mg.) causes:

- increased heart rate
- increased blood pressure
- increased breathing rate
- · increased oxygen consumption, making the heart work harder
- decreased peripheral circulation by constricting blood vessels (causing decreasing skin temperature)

Nicotine Addiction:

Nicotine addiction is similar to other drug addiction in that:

- its use is highly controlled or compulsive;
- it produces psychoactive (mood-altering) effects;
- it acts as a reinforcing agent, it directly strengthens behaviour leading to further use;
- it causes physical dependency so that the presence of the drug is required for normal physiological and psychological functioning;
- tolerance develops to the effects of nicotine; and
- abstinence or reduction in use results in withdrawal symptoms.

The pharmacological and behavioural processes that determine tobacco addiction are similar to those that determine addiction to drugs such as heroin and cocaine.





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