

**KEEP IT SACRED**



National Native Network &  
IHS Health Promotion & Disease Prevention  
Technical Assistance Webinar



## "It Stinks! Secondhand and third hand smoke"



Presented by:  
Allie Moore  
Project Manager  
Keres Consulting

- Masters of Arts – Integrated Marketing Communication - Emerson College, Boston, Massachusetts – 2006
- Bachelor of Arts – Communication & Journalism – University of New Mexico, Albuquerque, New Mexico - 2004

## "It Stinks! Secondhand and third hand smoke"



Allie Moore is a Project Manager for Keres Consulting. Since 2009, she has supported the New Mexico Indian Affairs Department's Tobacco Cessation and Prevention Program, which funded 56 tribal community tobacco control contracts. In 2012, she supported FDA with initial communication efforts about the Tobacco Control Act to federally recognized tribes. She currently manages a statewide contract with the new Mexico Department of Health to provide Secondhand Smoke Protections in Native American Communities. Ms. Moore provided presentations for the National Institute for Children's Health Quality, 2017 New Mexico ACTION Conference, and 2016 New Mexico Tobacco Control Partners Conference.





"It Stinks! Secondhand and third hand smoke"



Presented by:  
Jovian Henio  
Certified Tobacco Interventionist  
Outreach Coordinator  
Keres Consulting

- Bachelor of Science – Electronic Engineering Technology – Eastern New Mexico University, Portales, New Mexico – 2004
- Bachelor of Science – Psychology – University of New Mexico, Albuquerque, New Mexico - 2018





## "It Stinks! Secondhand and third hand smoke"



Jovian Henio has been with Keres Consulting, Inc. as an Outreach Coordinator since March 2016. Jovian has been working within the Tobacco Prevention & Control field with tribal communities across the state of New Mexico since 2012 with New Mexico Tobacco Free School Project (24/7 New Mexico) prevention campaign. One of Jovian's primary responsibilities is working on the project commercial tobacco secondhand smoke & thirdhand smoke protection within Native American communities. He provides technical assistance to adopt and supports the implementation of Smoke-Free Environments & Smoke-Free Policy.

# Faculty Disclosure Statement

- As a provider accredited by ACCME, ANCC, and ACPE, the IHS Clinical Support Center must ensure balance, independence, objectivity, and scientific rigor in its educational activities. Course directors/coordinators, planning committee members, faculty, reviewers and all others who are in a position to control the content of this educational activity are required to disclose all relevant financial relationships with any commercial interest related to the subject matter of the educational activity. Safeguards against commercial bias have been put in place. Faculty will also disclose any off-label and/or investigational use of pharmaceuticals or instruments discussed in their presentation. All those who are in a position to control the content of this educational activity have completed the disclosure process and have indicated that they do not have any significant financial relationships or affiliations with any manufacturers or commercial products to disclose.

# Faculty Disclosure Statement

- Funding for this webinar was made possible by the Centers for Disease Control and Prevention DP13-1314 Consortium of National Networks to Impact Populations Experiencing Tobacco-Related and Cancer Health Disparities grant. Webinar contents do not necessarily represent the official views of the Centers for Disease Control and Prevention.
- No commercial interest support was used to fund this activity.



# Accreditation

The Indian Health Service Clinical Support Center is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

This activity is designated 1.0 contact hour for nurses.

# CE Evaluation and Certificate

- Continuing Education guidelines require that the attendance of all who participate be properly documented.
- To obtain a certificate of continuing education, you must be registered for the course, participate in the webinar in its entirety and submit a completed post-webinar survey.
- The post-webinar survey will be emailed to you after the completion of the course.
- Certificates will be mailed to participants within four weeks by the Indian Health Service Clinical Support Center.

# Learning Objectives/Outcomes

By the end of this webinar, participants will be able to:

1. Examine the health consequences of secondhand smoke on youth, elders, and community members.
2. Implement strategies to reduce exposure to “sticky” commercial third hand smoke.
3. Employ discussions that empower community members to create environmental policies to protect their health from secondhand smoke.



# IT STICKS! SECONDHAND AND THIRDHAND SMOKE

*Secondhand Smoke Protections in  
Native American Communities*

A circular logo with a dark blue background and a light blue border. The text "Smoke Free Signals" is written in white, bold, sans-serif font. The logo is surrounded by a decorative, jagged border.

**Smoke  
Free  
Signals**

**Smoke Free Signals**



# Traditional Tobacco

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- *We acknowledge the traditional and beneficial use of tobacco within many of the Native American communities and recognize its place of honor and respect within those communities.*
- *The Secondhand Smoke Protections in Tribal Communities project strives to reduce and prevent the harmful and addictive use of tobacco products outside of its sacred use.*

# About Smoke Free Signals

13

- Supported by the NM Department of Health
- Provide statewide education, awareness and advocacy resources to empower secondhand smoke protection policies in Native American communities
- Resources for tribal schools, leadership, housing, and community health

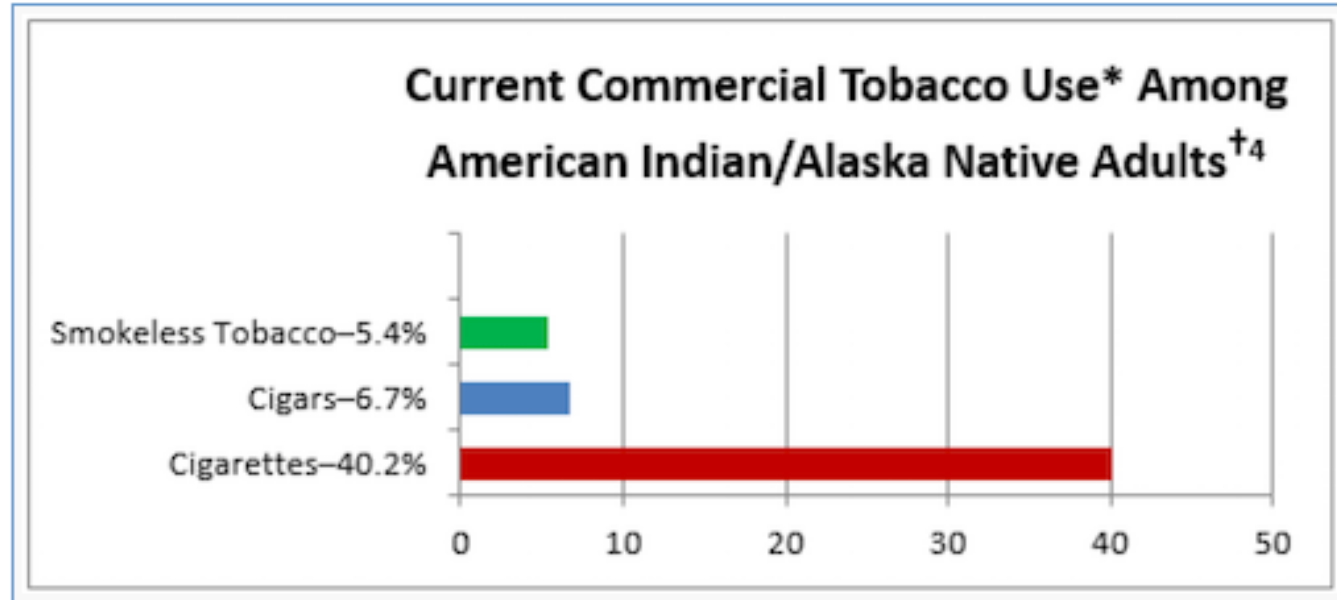
The screenshot shows the homepage of the Smoke Free Signals website. At the top left is the logo, a circular emblem with a mountain range and the text "Smoke Free Signals". To the right of the logo is the tagline: "PROVIDING SECONDHAND SMOKE PROTECTIONS RESOURCES FOR NATIVE AMERICAN COMMUNITIES IN NEW MEXICO". Below the tagline is the phone number "CALL US: 505-837-2104". A navigation bar contains links for HOME, ABOUT, TOOLKIT, EMERGING TOBACCO PRODUCTS, MEDIA, SFS NEWSLETTER, CALENDAR, and CONTACT US. The main content area features a large landscape photograph of a lake and forested hills. A teal text box on the left of the image contains the mission statement: "Mission: To provide commercial tobacco secondhand smoke awareness and resources to NM tribal communities, improving health outcomes." Below the image is a grid of service categories: "TOOLKIT" (orange), "Tribal Schools" (orange), "Tribal Policies" (teal), "Tribal Enterprises" (yellow), "Sign up for our newsletter" (orange with a ribbon icon), a "No Smoking" icon (teal), "Community Health" (yellow), "Homes and Cars" (orange), and "Multi-Unit Housing" (orange).



# Commercial Tobacco Use

14

43.8% of American Indian/Alaska Native adults reported current use of commercial tobacco in 2013.



Source: Data taken from the National Survey on Drug Use and Health, 2013, and refer to American Indians/Alaska Natives aged 18 years and older.

Note: "Current Use" is defined as self-reported consumption of cigarettes, cigars, or smokeless tobacco in the past month.

# Webinar Objectives

15

Secondhand

Thirdhand

Environmental  
Policies

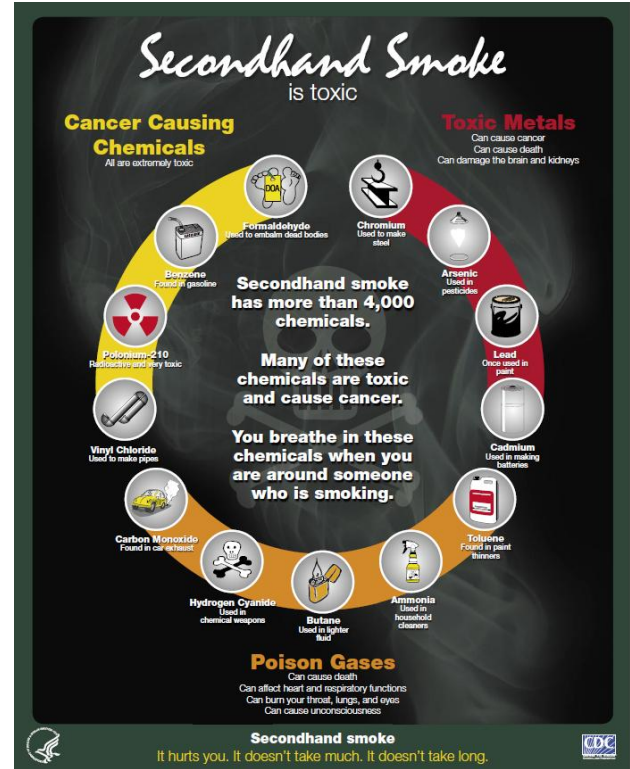
- Examine the health consequences of commercial secondhand smoke on youth, elders, and community members.
- Implement strategies to reduce exposure to “sticky” commercial third hand smoke.
- Employ discussions that empower community members to create environmental policies to protect their health from secondhand smoke.



# SECONDHAND SMOKE

# Secondhand Smoke Defined

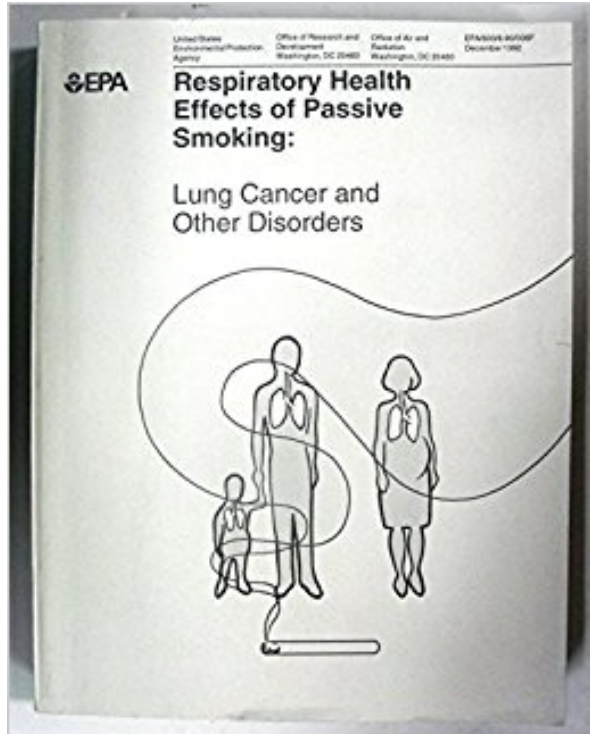
- Secondhand smoke (SHS) is also called environmental tobacco smoke.
- It's a mixture of 2 forms of smoke that come from burning tobacco:
  - Mainstream smoke: The smoke exhaled by a smoker.
  - Sidestream smoke: Smoke from the lighted end of a cigarette, pipe, or cigar, or tobacco burning in a hookah.





# Impacts of SHS

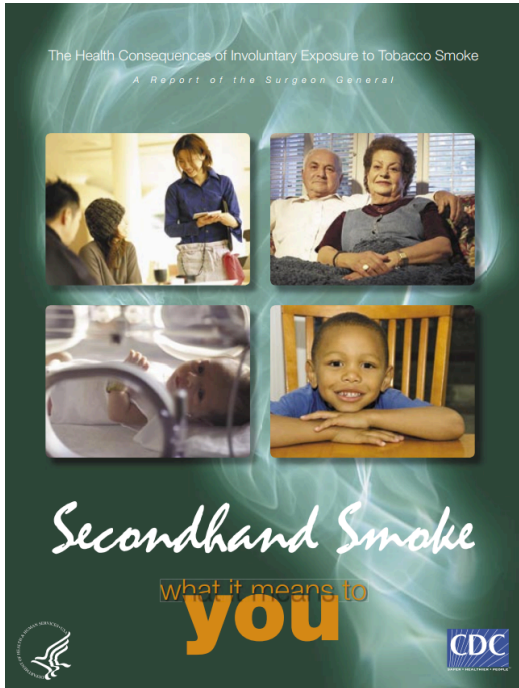
18



- 1993 U.S. EPA's *Health Effects of Passive Smoking: Lung Cancer and Other Disorders*
- Estimated 3,000 lung cancer deaths in nonsmoking adults every year in the U.S.
- Secondhand smoke causes cancer in humans, and there is no safe level of exposure.

# Impacts of SHS

19



- U.S. Surgeon General's report, *The Health Consequences of Involuntary Exposure to Tobacco Smoke*
- Since 1964, approximately 2,500,000 nonsmokers have died from health problems caused by exposure to SHS
- SHS is a known cause of sudden infant death syndrome (SIDS)
- SHS causes low birth weight and lung problems in infants, bronchitis and pneumonia in children, asthma attacks, ear infections
- Nonsmokers who breathe smoke at home or at work are more likely to become sick and die from heart disease and lung cancer



# Impacts of SHS

20

- SHS is particularly hazardous to elderly people, individuals with cardiovascular disease, and individuals with impaired respiratory function, including asthmatics and those with obstructive airway disease
- Combination of long-term exposure to SHS and the presence of cardiovascular disease nearly doubled the risk of dementia

# Impacts of SHS

21

## Reduced Exposure to Environmental Tobacco Smoke

Environmental tobacco smoke (ETS) has significant health effects on cardiovascular and respiratory disease. Cotinine is a metabolite of nicotine, and for nonsmokers, levels of cotinine in people's blood tracks exposure to ETS. In the past 15 years, data show that blood cotinine levels for nonsmokers in the U.S. population have decreased about 70%, indicating that public health interventions to reduce ETS exposure have been successful.

- 2005 CDC report, *Third National Report on Human Exposure to Environmental Chemicals*
- Reduction in exposure to secondhand smoke from 1988-2002 indicates **public health interventions are working**

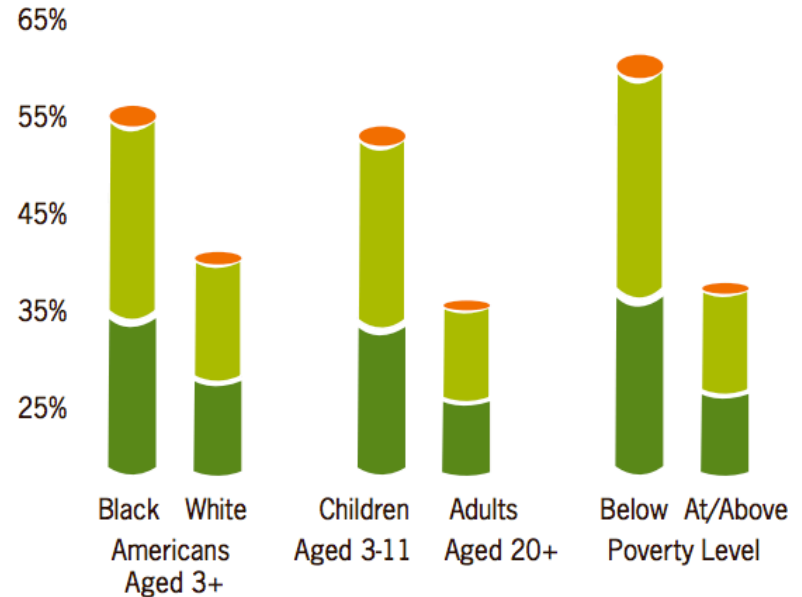


# Who is Exposed to SHS?

22

- 88 million nonsmokers are exposed to secondhand smoke
- About 54% of children (aged 3-11 years) are exposed to SHS
- About 47% of youth (aged 12-19 years) are exposed to SHS

Exposure to secondhand smoke by group



# SHS Protection Strategies

23

## Recommendations for doctors, nurses, and other health care providers

- Ask patients and parents of pediatric patients whether they use commercial tobacco, and advise those who do to quit
- Advise everybody to make their homes and vehicles 100% smoke-free at all times
- Advise non-smokers to avoid being exposed to SHS, especially if they are pregnant, have heart disease, or respiratory conditions

## Broader protections for employers, parents, and non-smokers

- Establish a policy banning the use of any tobacco product indoors or outdoors on the property/campus by anyone at any time
- Never smoke in the home, vehicle, or around children
- Ban group activities or events in places where SHS is allowed and present

# THIRDHAND SMOKE



# Thirdhand Smoke Defined

25

- Thirdhand smoke (THS) is the residual nicotine and other chemicals left on a variety of indoor surfaces by tobacco smoke
- Thin film that can be picked up by touch or released back into the air when disturbed





# Impacts of THS

26

- Third-hand smoke exposure and health hazards in children
- Infants and children are more prone to the risks related to THS exposure than adults because they typically spend more time indoors and have age-specific behaviors that may expose them to potential health hazards from THS

## THIRDHAND SMOKE

is the tobacco smoke residue that remains after a tobacco product has been put out.



After smoke clears, **toxins linger**, which may leave an odor.



Thirdhand smoke **contains chemicals** known to cause **cancer**.



Smoke **residue sticks** to clothing, hair and skin.



**Lingering toxins** resist normal household cleaning.



Thirdhand smoke **builds up** over time on carpets, walls, furniture, plastic toys and stuffed animals.



Infants and children are **more exposed** to thirdhand smoke because they crawl on the floor and put things in their mouths.

**IF YOU SMOKE, protect your family, friends and coworkers, wash your hands and hair and change your clothes before coming into contact with others, especially infants and children.**



HOUSING • HOSPITALS • COLLEGES • BEHAVIORAL HEALTH

Learn more at:  
[BreatheEasyMaine.org](https://www.BreatheEasyMaine.org)

# Impacts of THS

27

- High levels of nicotine on the hands of children of smokers
- Detectable levels of cotinine, a biomarker for exposure to nicotine, in saliva of children of smokers





# Impacts of THS

28

- A 2016 study found that THS exposure results in insulin resistance in the form of non-obese type II diabetes (NODII) through oxidative stress.

# Impacts of THS

29

- In housing, THS can remain in a unit long after a smoking tenant has left
- The average cost of turning over a smoke-free unit is \$5,000 less than turning over a unit where past residents have smoked due to the presence of THS





# Who is Exposed to THS?

30

- Infants and children are particularly vulnerable
  - ▣ Spend more time indoors
  - ▣ Crawl on floor
  - ▣ Put THS-contaminated things in their mouth

# THS Protection Strategies

31

## Recommendations for doctors, nurses, and other health care providers

- Advise everybody to make their homes and vehicles 100% smoke-free at all times
- Parents/relatives who smoke should be advised to do so outdoors, and change clothes and wash hands before picking up or holding infants.

## Broader protections for employers, parents, and non-smokers

- Establish a housing policy that bans smoking
- Never smoke in the home, vehicle, or around children



# **PROTECTING HEALTH THROUGH ENVIRONMENTAL POLICIES**





A STUDY OF  
PUBLIC ATTITUDES TOWARD  
CIGARETTE SMOKING AND  
THE TOBACCO INDUSTRY  
IN 1978  
VOLUME I  
MAY 1978

  
The ROPER ORGANIZATION, Inc.

0000335

TIFL 0529465

BM RECD 790406 QRH

TIMN 210766



IMPLICATIONS OF THE FINDINGS

The original Surgeon General's report, followed by the first "hazard" warning on cigarette packages, the subsequent "danger" warning on packages, the removal

The anti-smoking forces' latest tack, however--on the passive smoking issue--is another matter. What the smoker does to himself may be his business, but what the smoker does to the non-smoker is quite a different matter. The anti-smoking

issue--is another matter. What the smoker does to himself may be his business, but

This we see as the most dangerous development to the viability of the tobacco industry that has yet occurred. While there is little sentiment for an out-

same sale about the effects of smoking on the non-smoker as they have already made with respect to the effects on the smoker. Nearly six out of ten believe that smoking is hazardous to the non-smoker's health, up sharply over the last four years. More than two-thirds of non-smokers believe it, nearly half of all smokers believe it.

This we see as the most dangerous development to the viability of the tobacco industry that has yet occurred. While there is little sentiment for an outright ban on smoking in public gathering places, there is already majority sentiment for providing separate facilities for smokers and non-smokers. As the anti-smoking forces succeed in their efforts to convince non-smokers that their health is at stake too, the pressure for segregated facilities will change from a ripple to a tide as we see it.

It is, of course, possible that once smokers and non-smokers alike experience all the inconveniences of separate facilities, people will become fed up

TIFL 0529471

TIMN 210772



# What Works in Tobacco Control

35

- When we look at best practices in:
  - ▣ What helps people quit tobacco use?
  - ▣ What prevents people from starting tobacco use?

# Intervention Training

36

- Training opportunities related to smoking cessation interventions
- Basic Tobacco Intervention Skills Certification for Native Communities

Nicotine Dependence Treatment Continuing Education Program

**Earn Certification to utilize an evidence-based smoking cessation intervention to help save a life!**

Evidence-based interventions that encourage quitting and prevent youth smoking continue to be underutilized.  
— a Report of the Surgeon General, 2014

**Be A Lifesaver!**

**PROGRAM** Basic Tobacco Intervention Skills Certification for Native Communities

**Date** April 27, 2017

**Time** 8:00 am to 5:00 pm

**Location** Albuquerque Area Southwest Tribal Epi Center  
5015 Prospect Ave NE  
Albuquerque NM 87110

Instructors:  
Janna Valo, BA, CPS and Theresa Clay, MS

Name \_\_\_\_\_ Title \_\_\_\_\_

Organization \_\_\_\_\_

Work Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Phone \_\_\_\_\_ Alt. Phone \_\_\_\_\_

Work Email \_\_\_\_\_ Alt. Email \_\_\_\_\_

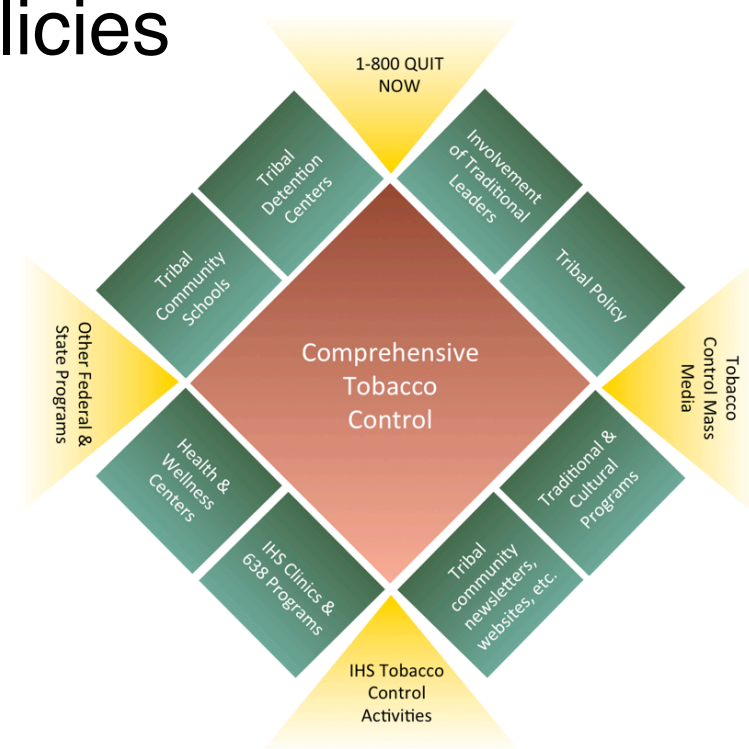
To register or for more information contact:  
Michael Stocker (765)702-3068 or michael.stocker@hs.gov

   
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# What Works in Tobacco Control

37

- Clean air environmental policies
- Mass media
- Higher prices
- Cessation
- Comprehensive programs

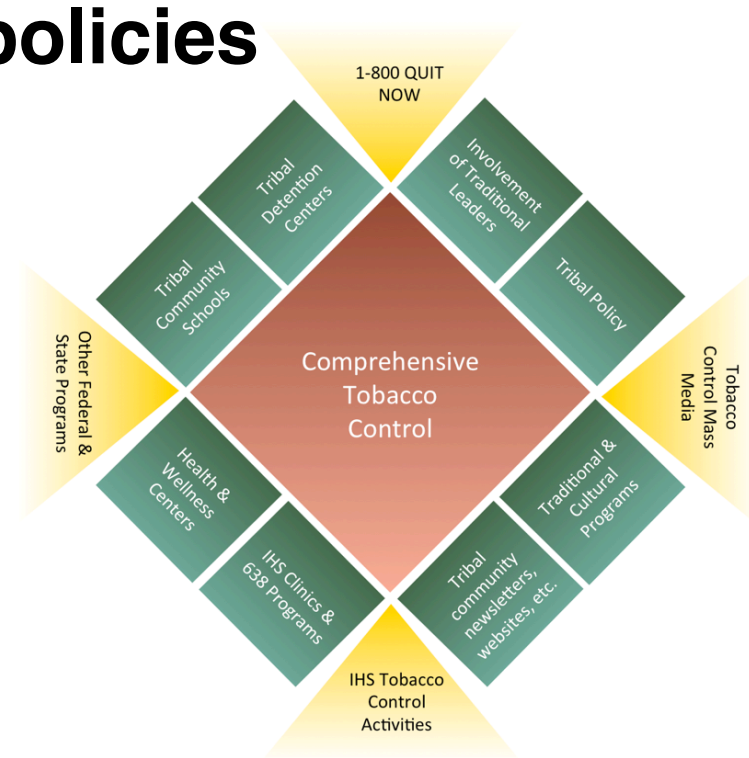




# What Works in Tobacco Control

38

- **Clean air environmental policies**
- **Mass media**
- **Higher prices**
- **Cessation**
- **Comprehensive programs**



# Types of Environmental Policies

39

Home

Car

Workplace

Community spaces

- Clean air environmental policies are rules that define where commercial tobacco products can be used
- Formal and informal
- Anyone can make an environmental policy that protects themselves



# Applied Example: Client Questionnaire

40

Intake forms

Client  
questionnaire

Cessation  
services

Smoke-Free  
Environment  
Pledges

**HEALTH HABITS**

1. Do you smoke cigarettes?  Yes  No  
If yes, how many cigarettes per day? \_\_\_\_\_  
For how many years? \_\_\_\_\_  
If no, did you ever smoke cigarettes?  Yes  No  
For how long? \_\_\_\_\_  
Date of last cigarette: \_\_\_\_\_

**HEALTH HABITS**

2. If you drink alcohol at l  
 Wine (glasses)  
1. Have you ever felt  
2. Have people anno  
3. Have you ever felt  
4. Have you ever had  
steady your nerve

**NUTRITION/METABOLI**

3. Do you use recreations  
If yes, indicate type: \_\_\_\_\_

1. Do you consider yours  
What is your ideal weig  
Have you ever been se  
If yes, when? \_\_\_\_\_

2. Do any of the factors li  
 Dislike recommended foods  Taking large portions  Moods  Frequent snacking  Someone else cooks

3. Do you eat at least two fruits and two vegetables each day?  Yes  No

4. Are you on a special diet? (please describe) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Your cholesterol level (within the past year) \_\_\_\_\_

6. Do you drink caffeinated beverages?  Yes  No  
If yes, please indicate the number of cups per day: Coffee \_\_\_\_\_ Tea \_\_\_\_\_ Cola \_\_\_\_\_ Cocoa \_\_\_\_\_

**ACTIVITY/EXERCISE**

1. How active are you?  Very  Moderately  Sedentary

2. Do you have any physical problems that limit your activity?  Yes  No  
If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_

3. If you exercise on a regular basis, please complete the following:  
Activity (e.g., walking, biking, swimming) \_\_\_\_\_ Frequency (daily, weekly, monthly) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. If you are not yet engaged in a routine exercise program, what type of exercise would you most like to do? \_\_\_\_\_

5. What are your goals for exercise? \_\_\_\_\_

# Applied Example: Client Questionnaire

41

Intake forms

Client  
questionnaire

Cessation  
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Smoke-Free  
Environment  
Pledges

## HEALTH HABITS

1. Do you smoke cigarettes?  Yes  No  
If yes, how many cigarettes per day? \_\_\_\_\_  
For how many years? \_\_\_\_\_  
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For how long? \_\_\_\_\_  
Date of last cigarette \_\_\_\_\_

## HEALTH HABITS

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For how many years? \_\_\_\_\_  
If no, did you ever smoke cigarettes?  Yes  No  
For how long? \_\_\_\_\_  
Date of last cigarette: \_\_\_\_\_

## NUTRITION/METABOLI

1. Do you consider yourself  
What is your ideal weight? \_\_\_\_\_  
Have you ever been obese?  
If yes, when? \_\_\_\_\_
2. Do any of the factors list  
 Dislike recommended foods  Taking large portions  Snacks  Frequent snacking  Someone else cooks
3. Do you eat at least two fruits and two vegetables each day?  Yes  No
4. Are you on a special diet? (please describe) \_\_\_\_\_  
\_\_\_\_\_
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5. What are your goals for exercise? \_\_\_\_\_

Design a questionnaire that  
considers secondhand  
smoke exposure



# Applied Example: Cessation Services

42

Intake forms

Patient or client  
questionnaire

Cessation  
services

Smoke-Free  
Environment  
Pledges



Thinking About Quitting



NOT READY TO COMMIT TO A  
FULL Quit Smoking PROGRAM?  
Take this *1 time, 1 on 1, 90 minute session* to  
increase your motivation to quit!

Call Stephanie, Health Educator  
@ 869-4479 to Sign Up  
Isleta Health Center

# Applied Example: Cessation Services

43

Intake forms

Patient or client  
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Smoke-Free  
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Pledges



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A graphic showing a lit cigarette with a red circle and a diagonal slash over it, indicating prohibition. The cigarette is surrounded by several thought bubbles, suggesting a process of thinking or decision-making.

**FREEDOM  
FROM  
SMOKING**

**FREE** 7-Week Group Session  
Led by a Certified Tobacco Treatment Specialist

# Applied Example: Cessation Services

44

Intake forms

Patient or client  
questionnaire

Cessation  
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Smoke-Free  
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# Applied Example: Cessation Services

45

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Patient or client  
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Smoke-Free  
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Pledges



## Thinking About Quitting

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@ 869-4479 to Sign Up  
Isleta Health Center



## Month 2012 Helping Your Adult Family Member Who Has an Addiction

Although you may be tempted to react, berate, blame, yell, or threaten an adult family member who continues to use and abuse alcohol or drugs, this is not a helpful approach.



Instead, families can share experiences, research, and hope by attending Alcoholics meetings. These meetings teach you how to avoid it, stay in their sickness. Not only does this keep your loved one in sickness, enabling them keep you and the family trapped in the problem. Further, enabling can make you physically and emotionally sick and cause resentment, stress for you and your home that affects just the alcohol/drug. It also has a negative impact on the entire family and community.

No one wants their adult family member to suffer with an addiction and your intention to help one out of love and concern, that when enabling turns into an intervention, things can begin to change. This is the time to take the adult family member's addiction and show it to you. From here, you and your family can regain power in order to make meaningful choices about what you will do and what you won't do. To find a meeting or attend contact Alcoholics at (869) 268-2177 for the nearest location from your community. **Isleta Behavioral Health Services does not provide intervention.**

**Freedom From Smoking**  
QUIT SMOKING IN 8  
SESSIONS STARTING  
March 12, 2017  
5:30 pm  
ISLETA HEALTH CENTER.  
Call for more information:  
505-869-4479

Isleta Pueblo News

Page 2

A collage of event flyers. The top flyer is titled "The Spending Frenzy" and mentions "Money Game is coming to the Native Youth Empowerment Symposium 2!". Below it is a flyer for "Isleta Casino and Resort Monday, March 27th, 2017" with a photo of a woman. The bottom flyer is titled "Save The Date! Native Youth Empowerment Symposium Monday, March 27, 2017" and lists the location as "Gribe 8-College students Pueblo of Isleta Resort &amp; Casino Grand Ballroom 11000 Broadway SE-Albuquerque, NM 87105".



# Applied Example: Cessation Services

46

Intake forms

Patient or client  
questionnaire

Cessation  
services

Smoke-Free  
Environment  
Pledges



# Applied Example: Smoke Free Pledges

47

Intake forms

Patient or client  
questionnaire

Cessation  
services

Smoke-Free  
Environment  
Pledges

**I Pledge**  
**To Be Tobacco Free**

- I understand that tobacco products have health risks and consequences.
- I choose to say "no" to tobacco and pledge to stay tobacco free.
- This means I will not smoke cigarettes, cigars, or use smokeless tobacco, or use e-cigarettes or vapor products because:

[fill in three reasons why you pledge to stay tobacco free]

1.
2.
3.



# Applied Example: Formal Clean Indoor Air Policies

48

## □ Clean Indoor Air policies on Navajo Nation

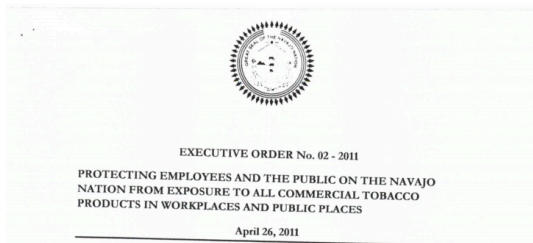
1998	Tobacco Master Settlement Agreement
------	-------------------------------------

2000	Tobacco Settlement Permanent Fund
------	-----------------------------------

2007	Special appropriation for tribal programs to NM IAD
------	---

# Applied Example: Formal Clean Indoor Air Policies

49



## PROTECTING EMPLOYEES AND THE PUBLIC ON THE NAVAJO NATION FROM EXPOSURE TO ALL COMMERCIAL TOBACCO PRODUCTS IN WORKPLACES AND PUBLIC PLACES

April 26, 2011

The Navajo Nation finds that:

1. The cultural, spiritual and ceremonial use of tobacco is an integral part of Navajo life;
2. Navajo cultural teachings about the ceremonial tobacco and its use are of importance to the health, wellness, and welfare of the Navajo people;
3. The Navajo fundamental traditional and ceremonial use of tobacco shall not be restricted;
4. Secondhand smoke has been classified by the U.S. Environmental Protection Agency (EPA)



Home ▸ News

## Grants and Resolution Makes for Cleaner Air on Navajo Reservation

**Submit Your News!**

We're always interested in hearing about news in our community. Let us know what's going on!

[Submit news](#)

**Section 1. Policy.** It is the policy of the Navajo Nation Executive Branch to establish a commercial tobacco free environment in all workplaces and public places within the Navajo Nation. The use of commercial tobacco products is thus prohibited within public places and workplaces, and within a reasonable distance of 25 feet of entrances, operable windows, and ventilation systems of enclosed areas where smoking is prohibited, so as to prevent tobacco smoke from entering those areas.



# Applied Example: Formal Clean Indoor Air Policies

50



# SUMMARY

# To summarize...

- Secondhand smoke from combustible commercial tobacco products has significant health impacts on non-smokers
- Thirdhand smoke from combustible commercial tobacco products is a toxic substance that presents health hazards
- Environmental policies – both voluntary and formal – are protect the health of non-smokers



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# THANK YOU!

[www.smokefreesignals.com](http://www.smokefreesignals.com)



# National Native Network Online

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