



**OFFICIALLY FREE FROM NICOTINE**  
**SMOKING CESSATION PARTICIPANT GUIDE**



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# The Smoker's Dilemma.

# The Smoker's Solution.

I don't want to smoke but I don't want to quit. I do want to quit but I do want to smoke. I hate that I smoke yet love when I smoke. I have no control but must be in control. I know I must quit but know that I can't. I know I can quit but fear that I will and then be left without my cigarettes for the rest of my life.

When I light a cigarette, I am really lighting a fuse. The longer it burns, the shorter my time.

I have lied and denied, joked and rationalized, compared myself to others to justify my smoking, and pretended that it just doesn't matter. I have looked for excuses to continue and created situations that allow me to maintain my smoking. Later, my favorite word, later.

Comfort when I am down. Reward when I am happy. Consolation when I am wrong. Distraction when I am bored. Filler when I am empty. Company when I am alone. Rebellion when I am restricted. Composure when I am nervous. Attention when I am forgotten. Retribution when I am righteous. Release when I am pressured. The answer when I question. The answer, the answer, no matter the question. Impatience, tense impatience, easy to distract, hard to please, easy to bore, hard to imagine. Why can't I quit?

I know the answers. I'm just too busy looking for reasons to continue. I must not quit smoking. Instead I must become officially free from nicotine. I must reject the role of victim and regain control of my own choices. Everything I need is inside of me. I am the answer.

If I really want to get off nicotine:

Don't quit. Convert.

Don't comply. Surrender.

Don't obey. Understand.

Don't sacrifice. Accept.

Don't stop. Start.

Start off nicotine, start with the rest of my life, tobacco-free, one minute at a time, one hour at a time, one day at a time, one life time. Question, question, no matter the answer. Breathe deeply. Feel the rush of freedom. Pay the price gracefully, without whining or complaining. Become joyfully free, moving beyond the grief of regret. It is time to become new. It is time to snuff the fuse.



# Off Nicotine Pledge.

Read this pledge carefully. It should mean something to you when you sign it. Don't sign it until you are ready. Feel free to cross out some lines and add others. But be aware that getting off nicotine requires commitment. No one can do it for you. This pledge is a symbol of your personal commitment. Signing it automatically increases your chances of success. Your Off Ally is invited to sign it as your witness and in their commitment to support your efforts.

I am committed to becoming officially free from nicotine.

I will stop using tobacco products and use my cessation to become a stronger, healthier, more confident person.

I will avoid excuse making, pressure from those who feel threatened by my success, and complaining about how hard I have it.

I will be honest with myself and those who are supporting my efforts.

If I slip, I will learn from my mistake and continue to work toward cessation until I am nicotine free.

My Off Nicotine date is: \_\_\_\_\_

Participant Signature

X \_\_\_\_\_

Off Ally Signature

X \_\_\_\_\_



# Section 1: Wanting Off Nicotine



The first section of the Off Nicotine Guide will ask you to take your responses from the Smoker's CAGE questionnaire and sort through them in a way that will help you during the process of getting off nicotine.

As you consider your personal smoking patterns, keep in mind the immediate and long term health improvements you can expect:

Within 20 minutes: Blood pressure drops, pulse rate drops to normal, body temperature in hands and feet returns to normal

Within 8 hours: Carbon monoxide levels in the blood return to normal

Within 24 hours: Risk of heart attack decreases

Within 48 hours: Ability to smell and taste improves

Within 72 hours: Breathing gets easier as bronchial tubes relax; lung capacity increases

Within 3 weeks: Mucus in the lungs loosens, lung function and circulation improves

Within 2 months: Blood flows more easily to arms and legs, lung function increases up to 30%

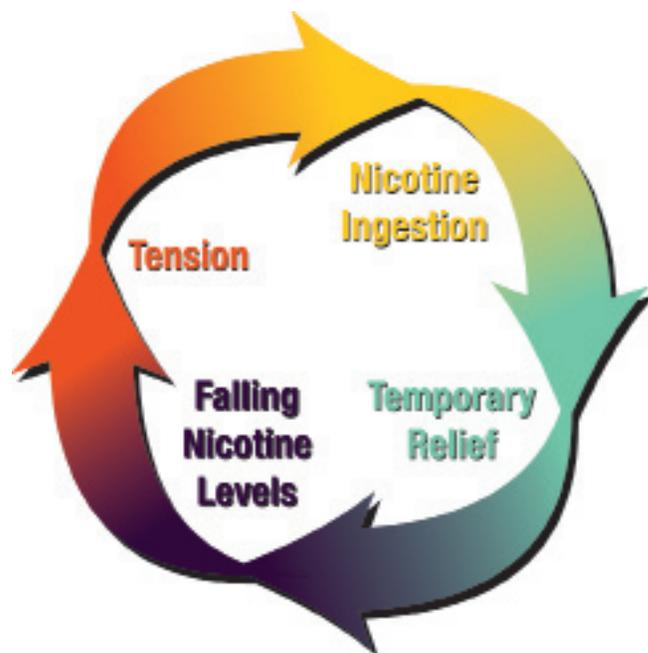
After 1 year: Risk of sudden death from heart attack is almost cut in half

After 5 years: Lung cancer death rate for the average smoker decreases nearly 50%

Within 10 years: Risk of sudden heart attack and stroke becomes almost the same as a nonsmoker, risk of cancer drops significantly



# Understanding the Smoker's Cycle.



The Smoker's Cycle describes the series of events that smokers typically experience if they are dependent on nicotine. Understanding this cycle can help you understand how to free yourself from it.

When nicotine is ingested—when you smoke—a chemical reaction occurs in your brain and body that gives you a sense of temporary relief. In the beginning, it doesn't matter whether there is tension or not, the body relaxes because the drug nicotine makes it relax. With repeated smoking, the brain begins to associate this relief with other problems, until for some people, smoking becomes the perceived solution to any or all problems.

The problem is that as soon as the nicotine levels fall, there is a rebound effect as the brain becomes hungry for more nicotine, the tension nicotine once relieved returns. Falling nicotine may be experienced as craving, anxiety, gloom, irritability, or decreased ability to concentrate. As far as your brain is concerned, the solution is simple: ingest more nicotine.

When is freedom not freedom? When you can freely choose to enter, but are not allowed the same free choice to leave. The trap is set when the brain is repeatedly exposed to nicotine. The trap is sprung when you try to rid your body of that nicotine.



# When = Why

When you smoke is the best indicator of why you smoke.

It's easy to make excuses to rationalize and justify continued smoking. In fact it's really hard not to. But the reality is that when you choose to smoke reveals who you are as a smoker, shedding away wishful thinking, self-justification, or excuses.

The general categories of when people smoke are:



**Smoke to Smoke** Self Assessment Score: \_\_\_\_\_

This category is an indicator of feeling hooked or of nicotine addiction.



**Smoke to Cope** Self Assessment Score: \_\_\_\_\_

People who smoke to cope use nicotine to cope with stress or to respond to unwanted emotions.



**Social Smoking** Self Assessment Score: \_\_\_\_\_

People who smoke in social situations or who use nicotine to help them feel more socially comfortable.



**Power Smoking** Self Assessment Score: \_\_\_\_\_

This represents "You're-not-the-boss-of-me" smoking. Power smokers smoke to prove that they are in charge, not those who would like to see them quit.



**Smoking Up** Self Assessment Score: \_\_\_\_\_

Smoking up is smoking for stimulation.



**Smoking With...** Self Assessment Score: \_\_\_\_\_

"Smoking with" indicates associations with smoking that make getting off nicotine more difficult. For some that may be other substances like alcohol, for others specific behaviors like driving your car.

All of these categories are described in more detail in the following pages. As you complete the workbook, come back to this page and fill in your personal self assessment score, estimating on a scale of 1 to 10 how well each category describes you.



# Smoke to Smoke

People who “smoke to smoke” feel hooked on cigarettes. They smoke because their brains “need” cigarettes in order to function normally. People who smoke to smoke are more likely to feel symptoms of withdrawal when they try to quit, or even when they want to smoke, but can’t. When they are not smoking, their brain feels nicotine hunger, expressed through tobacco craving, anxiety, or irritability. These are signs of nicotine withdrawal. Smokers often blame these feelings on their situation without recognizing that their nicotine-starved, malfunctioning brain is actually making their situation worse. Please use your Smoker’s CAGE questionnaire to list symptoms you often or always have when you try to quit, or when you really want to smoke but you can’t:

People who smoke to smoke have a need for nicotine. Therefore, they are more likely to need to “tank up” on nicotine immediately before and immediately after a situation where they cannot smoke. They are more likely to try to find a way to smoke even in non-smoking situations. For that reason, they are more likely to smoke before bed, in bed, and as soon as they wake in the morning. Those who are most hooked even wake at night to smoke. These smokers are more likely to smoke the minute before work starts, the minute they get out of work, and more likely to find a time and place during work that they can catch a cigarette. Please use your Smoker’s CAGE questionnaire to list times that you often or always smoke that show your need for nicotine:

Finally, people who smoke to smoke have fewer never smoke situations. Most smokers, for example, don’t smoke when they are feeling sick, in non-smoking areas, at their office, in the shower, around non-smoking friends, or while exercising. Please use your Smoker’s CAGE questionnaire to list times that other people tend not to smoke, but you do:

Using the information above, on a scale of 1 to 10 (10 being the highest), what is your personal self assessment of how much you smoke to smoke?

Smoke to Smoke Self Assessment Score: \_\_\_\_\_



# Smoke to Cope

People who smoke to cope use nicotine to respond to unwanted emotions, stress, or pressures. Smoke to cope-ers tend to light up in response to feelings of anxiety, anger, depression, and/or frustration. For these smokers, crisis equals craving. It is important to recognize that many of the emotional disasters that smokers respond to by smoking are in fact worsened by smoking. When feeling stressed, that stress is worsened if the smoker's brain is low on nicotine levels. When feeling anxious, the anxiety is amplified by low nicotine. Nicotine does not so much make the brain function better, as nicotine deprivation (or hunger) makes it function worse. This creates vicious cycles, where low nicotine may cause the smoker to feel irritable or anxious, which in turn results in choices that worsen the situation, creating more problems for which smoking becomes the apparent solution. Smoking to cope can be further broken down into stress-, anxiety-, anger- or depression-related smoking.

## Stress-Related Smoking

Stress-related smokers tend to smoke when they are frustrated, overwhelmed, tense, or feeling out of control. Please use your Smoker's CAGE questionnaire to list times that you often or always smoke in response to stress:

## Anxiety-Related Smoking

Anxiety-related smokers tend to smoke when they are anxious, nervous, fearful, on edge or panicked. Please use your Smoker's CAGE questionnaire to list anxiety-related feelings that often or always trigger the urge to smoke:

## Anger-Related Smoking

Anger-related smokers tend to smoke when they are angry, pissed off, or annoyed. Please use your Smoker's CAGE questionnaire to list anger-related feelings that often or always trigger the urge to smoke:

## Depression-Related Smoking

Depression-related smokers tend to smoke when they are down, sad, blue, empty or lonely. Please use your Smoker's CAGE questionnaire to list depression-related feelings that often or always trigger the urge to smoke:

Using the information above, on a scale of 1 to 10 (10 the highest), what is your personal self assessment of how much you smoke to cope?

Smoke to Cope Self Assessment Score: \_\_\_\_\_



# Social Smoking

Social smokers use tobacco in social settings. Ultimately, social smoking helps with social comfort, helps the smoker feel that they fit in. Very few smokers want to believe that they started smoking because of the dreaded "peer pressure." When they consider when and where they smoke, however, it's generally around friends and in social situations. The camaraderie and companionship they feel when smoking around others becomes an important aspect of their smoking.

Common social smoking situations include smoking at restaurants, after meals, while hanging out with friends, or at parties. Please use your Smoker's CAGE questionnaire to list social situations that often or always trigger the urge to smoke:

Common social smoking emotions include feeling insecure, shy, socially uncomfortable, or rejected. Please use your Smoker's CAGE questionnaire to list feelings that come up in social situations that often or always trigger the urge to smoke:

Using the information above, on a scale of 1 to 10 (10 being the highest), what is your personal self assessment of how much social smoking applies to you?

Social Smoking Self Assessment Score: \_\_\_\_\_

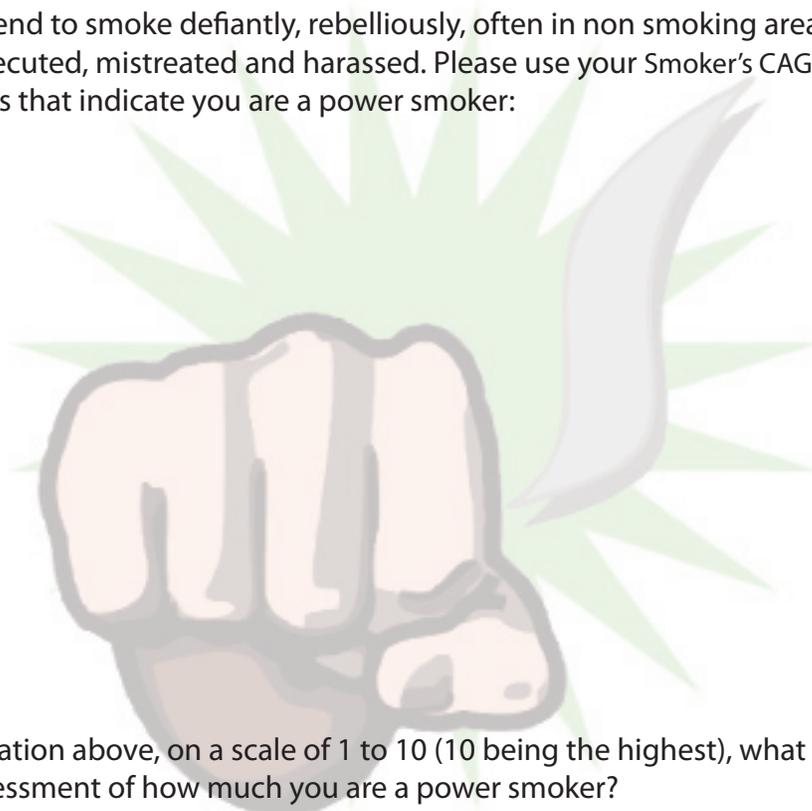


# Power Smoking

Power smoking does not mean chain smoking or inhaling really, really hard. Power smoking refers to those individuals for whom smoking has become a power struggle or control issue. If you are still smoking in part because someone important in your life—or society—wants you to quit, you are a power smoker. If you are smoking to prove that you are in charge, that “you can’t make me”, or that “you’re-not-the-boss-of-me,” then you are a power smoker. Because power struggles are often part of life, many people are power smokers. If at some level, getting off nicotine would mean that someone else (like your spouse or your parents) would win a power struggle, and you would “lose,” then you are a power smoker. If the secret reason you are trying to quit is so that you can prove to your parents or friends that you were right (“I just can’t do it”) and they were wrong (“You could if you really tried”) then you are a power smoker. Power smokers often continue to smoke largely because they know they should stop, and don’t like always doing what they should do.

Power smokers tend to look at tobacco use as an issue of personal freedom instead of an issue of health, ignoring the fact that their freedom to get off nicotine is limited by their inability to do so. They tend to distrust evidence that their second hand smoke does harm to others.

Power smokers tend to smoke defiantly, rebelliously, often in non smoking areas. They tend to feel persecuted, mistreated and harassed. Please use your Smoker’s CAGE questionnaire to list things that indicate you are a power smoker:



Using the information above, on a scale of 1 to 10 (10 being the highest), what is your personal self assessment of how much you are a power smoker?

Power Smoking Self Assessment Score: \_\_\_\_\_



# Smoking Up

Smoking up refers to smoking for stimulation. This is a small category, but very important to some smokers. One of the things that makes tobacco so addictive is that it can calm you down when you need calming, but also stimulate you when you need a burst of energy. People who use tobacco as a stimulant tend to smoke when feeling bored, when they need to concentrate, when watching TV, or when tired. Please use your Smoker's CAGE questionnaire to list things that indicate you tend to use tobacco as a stimulant:

Using the information above, on a scale of 1 to 10 (10 being the highest), what is your personal self assessment of how much you tend to "smoke yourself up"?

Smoking Up                      Self Assessment Score: \_\_\_\_\_

# Smoking With...

Many smokers associate use of tobacco with use of other substances, from alcohol to caffeine to marijuana. In fact, there is evidence that tobacco is a "gateway drug," leading to involvement with other chemical substances. While it may be unhealthy to drink alcohol, smoke marijuana, and use other drugs, the purpose of this guidebook is to help you get off nicotine. If you associate tobacco use with drinking or drug use, however, it is unlikely that you will remain successfully off nicotine if you are using those other chemicals in an out of control fashion. Our best advice is to use the principles described in this guidebook to help decrease or discontinue your involvement with all unhealthy substances.

In addition, there may be activities that you "smoke with" such as talking on the phone, driving your car, or listening to music. Identifying "smoke with" situations that may be a problem for you is important. Developing strategies for how you will handle yourself will help you anticipate problems and come up with solutions before problems ever happen. Please use your Smoker's CAGE questionnaire to list things that you tend to smoke with:

Using the information above, on a scale of 1 to 10 (10 being the highest), what is your personal self assessment of how much you tend to "smoke with...?"

Smoking With...                      Self Assessment Score: \_\_\_\_\_



# Section 2: Just a little bit



Section 2 of the Off Nicotine Guide asks you to anticipate the times and feelings that trigger your urge to smoke. These may represent your biggest barrier to successful cessation. In this section you will identify these problem situations and feelings and break them into digestible bites. Creating your own strategies will be supported by listening and sharing during Off Nicotine Sessions.

## Understanding Dependence

The nature of dependence is to perpetuate itself by reducing the number of tolerable options to one

Any behavior or substance that allows us to adjust our thoughts and emotions through its action or ingestion may form in us a dependence

Dependence occurs when frustrations or feelings are consistently eliminated or elevated through that action or ingestion

Creating a rigid pattern of response that restricts a full range of options replacing constructive response with the behavior or substance

Leading to preoccupation with that substance or behavior which requires increasing attention to its action or ingestion until other experiences are consistently excluded

Creating further problems for which that substance or behavior become the perceived solution...

Creating further problems for which that substance or behavior become the perceived solution...

The nature of dependence is to perpetuate itself by reducing the number of tolerable options to one



# When = Why

Why you smoke is the best indicator of what you need to do to stop smoking. For every reason you smoke, you need a strategy to deal with the cravings you will have in that situation. "Key indicator" column refers to the responses on your Smoker's CAGE questionnaire that lead you to believe that each category refers to you. The "Strategy" column provides a space for you to describe what you will do in these situations.

## Smoke to Smoke

Key Indicators

1.

2.

3.

4.

5.

Strategy

1.

2.

3.

4.

5.

## Smoke to Cope

Key Indicators

1.

2.

3.

4.

5.

Strategy

1.

2.

3.

4.

5.

## Social Smoking

Key Indicators

1.

2.

3.

4.

5.

Strategy

1.

2.

3.

4.

5.



## Power Smoking

Key Indicators

1.

2.

3.

4.

5.

Strategy

1.

2.

3.

4.

5.

## Smoking Up

Key Indicators

1.

2.

3.

4.

5.

Strategy

1.

2.

3.

4.

5.

## Smoking With...

Key Indicators

1.

2.

3.

4.

5.

Strategy

1.

2.

3.

4.

5.



# Who = How

Who you are as a smoker is the best indicator of how you need to change in order to feel strong in your commitment to live officially free from nicotine.

## Positive Self Image as Smoker

Many people, when they first start smoking, feel better about themselves with a cigarette in their mouth. They feel cooler, tougher, better looking, more in charge, more defiant, more popular. Cigarettes are their friend, and they feel better about themselves when they are smoking. But the longer you smoke, the more you understand how false these perceptions are. Cigarettes do not make you anything but unhealthy. There are better, more authentic ways to be cool, popular, and in charge. Please use your Smoker's CAGE questionnaire to list the ways cigarettes used to make you feel better about yourself. Then cross out the descriptions that no longer apply:

Those descriptions of yourself as a smoker that you have not crossed off are important to recognize. As long as smoking continues to make you feel better about yourself, it will be more difficult for you to get off nicotine. It may be helpful to recognize that there are other ways to allow yourself to experience any of the positive self image boost you still feel from smoking. Describe ways that you can feel positive about yourself without smoking; or ideally because you have stopped smoking.



## Negative Self Image as Smoker

Most people do not feel better about themselves because they smoke. While others may assume that cigarettes make smokers feel tough and in charge, those who want to quit but can't tend to feel weak, guilty, or out of control. Cigarettes may have once made them feel better about themselves, for many cigarettes now make them feel foolish, even stupid, because they understand the damage that cigarettes are doing to their health yet still feel unable to quit. They may even feel hypocritical or dishonest because of their efforts to hide their smoking. Instead of feeling more popular when they smoke, now they may feel unwanted, rejected, put down. Cigarettes now may represent a barrier between them and important people in their lives. Please use your responses on the Smoker's CAGE questionnaire to list the ways cigarettes make you feel worse about yourself:

Think about the way cigarettes make you feel about yourself. While most people are motivated to quit because of health reasons or pressure from friends and family, it may be that the best reason to quit is the way that cigarettes make you feel about yourself. Look at the list above. Cross out those items that are not part of who you are or who you want to be. Use this discrepancy between who you are as a person and how you feel as a smoker to harden your resolve to change. Recognize that smoking is not who you are, but what you do. Acknowledge to yourself how much smoking has taken from you, and just how much there is to be gained by getting off nicotine. Below please list personal strengths that you can call on as you go through the cessation process (such as family, faith, friends, determination, commitment, creativity):



# Affect Towards Abstinence

“Affect” refers to your mood. Some smokers, when they think about getting off and staying off nicotine feel nothing but a sense of celebration. Others, because of their experience with quitting in the past, feel nervous and on edge. Still other smokers feel a sense of grief at the thought of never smoking again. They feel overwhelmed by sadness. And this is just from thinking about quitting! If, when you think about quitting, it makes you feel very nervous, very sad, very miserable, then it is easy to predict that actually going through your cessation will provoke those same feelings. People who have “anxious affect toward abstinence,” or, “depressed affect toward abstinence” need to be well aware of these feelings because they may become an important barrier to success.

## Anxious Affect Toward Abstinence

If when you think about getting off nicotine, you feel anxious, nervous, fearful, on edge, or panicked then anxious affect toward cessation is an issue for you. Below please list anxious feelings you have when you think about quitting smoking and being without your cigarettes for the rest of your life:

## Depressed Affect Toward Abstinence

If when you think about getting off nicotine, you feel sad, depressed, miserable, hopeless, helpless, blue, or tearful then depressed affect toward cessation is an issue for you. Below please list depressed feelings you have when you think about quitting smoking and being without your cigarettes for the rest of your life:

If you have a strong anxious or depressed affect toward abstinence, the use of medication to assist in your quit effort may be important. Talk with your Coach and then your doctor about this possibility.



# The Off Ally

The more difficult a task, the more useful it is to have the help of someone you trust. The Off Ally is someone you know and can rely on when trying to quit feels overwhelming. Your Off Ally should not be another smoker, or even necessarily a former smoker. The best way to choose a good Off Ally is to pick someone who wants to see you off nicotine as much as you want it for yourself. Once you have chosen your Off Ally (or Allies), you may want to copy these pages from your guidebook for them.

## How to Use Your Off Ally

1. Debrief your Off Nicotine Sessions: As soon as possible after you meet with your Off Nicotine group, talk with your Off Ally. Describe what happened in the session. Tell them what you learned about yourself. Tell them how you felt during the session. Think of questions about the session that you might bring back to the next group.
2. Brainstorm strategies to deal with the barriers that you can predict for successful cessation.
3. Teach them the Five Step Procedure (see page 21). Practice it with them.
4. When you get a strong urge to smoke, fire up your cell phone instead of a cigarette. Use your Off Ally to distract yourself from the craving. This can be done simply by discussing a completely unrelated topic, or by running through part or all of the Five Step Procedure.

## A Message to Your Off Ally

This message is intended to help your Off Ally understand what its like to get off nicotine, whether they have ever been a regular smoker or not. The message may not describe you exactly, so feel free to write your own message if you would like.

I have made the decision to get off nicotine. I need your help.

It is hard to make the decision to stop smoking and hard to follow through on that decision. I don't want to smoke but I don't want to quit. I do want to quit but I do want to smoke. I hate that I smoke yet love when I smoke. I have no control but must be in control. I know I must quit but know that I can't. I know I can quit but fear that I will, and then be left without my cigarettes for the rest of my life. Nothing sounds better than being without cigarettes for the rest of my life. Except maybe lighting up a cigarette right now.

I have made the decision to get off nicotine. I need your help.

Let me explain. I am not a weak person. My problem is not self control. Smoking may be a foolish thing to do, but I am not a foolish person. I have simply become hooked on cigarettes. When I am craving tobacco it is like I am being held underwater. When I inhale tobacco smoke, it is like bursting to the surface and taking a breath. The only way to avoid



drowning is to get out of the water. I have learned that this hunger for tobacco is a trick of the chemicals in my brain, caused by addiction to nicotine, to try to scam me into smoking when I really don't want to. My brain feels starved for nicotine and it wants to be fed. It will push every button it can to manipulate me into feeding it nicotine again. I need you to help me remember: No one has ever died from quitting tobacco. More than 400,000 die every year from being unable to quit.

I have made the decision to get off nicotine. I need your help.

I have learned that there are other ways to feed my brain when it craves nicotine; ways to control my own brain rather than allow unwanted urges and cravings to control me. Control is the key. I like feeling in control. I need to feel in control. Smoking a cigarette gives me a temporary illusion of control, but in the long run robs control away from me. Regaining control of my own brain, of my own decisions, of my own impulses may be the most important reason to get off nicotine.

I have made the decision to get off nicotine. I need your help.

I have learned it is better to depend on my friends for help than to be dependent on cigarettes. Please tolerate my irritability, my preoccupation with quitting, my preoccupation with smoking. Understand that nothing else in my life is more important at this moment than becoming tobacco-free. Whatever I let become more important becomes my excuse to start smoking again. If you see me losing control, please help me. Remind me that, ultimately, there is no rush like the rush of freedom. I am ready to be free of nicotine.

## How to be an Off Ally

I have made the decision to get off nicotine. I need your help. Here are some hints.

1. Be positive. Give me statements of encouragement. Be supportive. Never say, "If you quit..." Always say, "When you quit..."
2. Help fill the "empty spot." There will be a large empty spot in my life that was once filled by smoking. The more completely this hole is filled, the less I will miss my cigarettes.
3. Pamper me. Help me succeed with a little extra TLC, indulging, and attention for a job well done.
4. Understand that a large disruption is occurring in my life. Please be understanding and accepting of this.
5. Demand honesty of me. Do not let me get away with half-truths, denial, or rationalization. Without this honesty my chances of staying off cigarettes is lessened.
6. Set up a series of rewards. Provide incentives for me to stay off cigarettes.
7. Don't let me avoid unpleasant situations or responsibility. Encourage me to face problems head on.
8. Designate my quit date as a day to be celebrated. First daily, then monthly, much as you would a birthday or anniversary.
9. Be available by cell phone, text messaging, instant messaging, or in person.



# Section 3: Getting



# Nicotine

Section 3 prepares you for your Officially free from Nicotine day! In this section you will learn to use the Five Step Procedure, relaxation exercises, and to put your insights and your strategies into action.

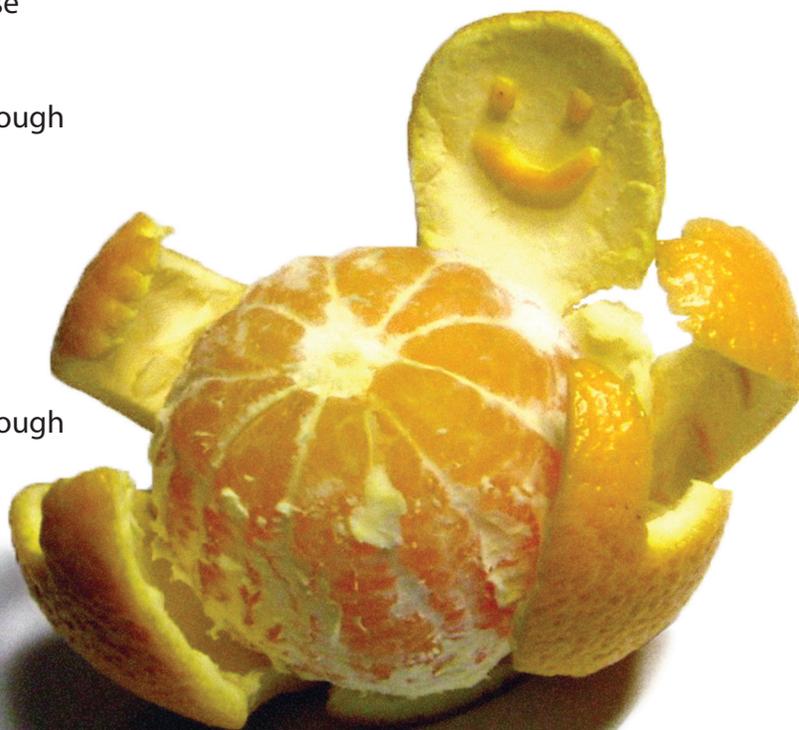
## Shed my Skin

I want to shed my skin  
And crawl on through  
Then sew it into dancing shoes  
Dance around my cares and woes  
My feet in skin from off my nose

Rid the old, unwrap the new  
Shed my skin and crawl on through

Dry and scaly tough and thin  
Got no use for my old skin  
Tired of what I'm living in  
Ready to feel fresh again

Rid the old, unwrap the new  
Shed my skin and crawl on through



# The Off Nicotine Calendar

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	10		10		10		10
	9		9		9		9
	8		8		8		8
	7		7		7		7
	6		6		6		6
	5		5		5		5
	4		4		4		4
	3		3		3		3
	2		2		2		2
	1		1		1		1
	0		0		0		0
<b>How Hard</b>							
<b>Slips</b>							
	10		10		10		10
	9		9		9		9
	8		8		8		8
	7		7		7		7
	6		6		6		6
	5		5		5		5
	4		4		4		4
	3		3		3		3
	2		2		2		2
	1		1		1		1
	0		0		0		0
	10		10		10		10
	9		9		9		9
	8		8		8		8
	7		7		7		7
	6		6		6		6
	5		5		5		5
	4		4		4		4
	3		3		3		3
	2		2		2		2
	1		1		1		1
	0		0		0		0
	10		10		10		10
	9		9		9		9
	8		8		8		8
	7		7		7		7
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	5		5		5		5
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	7		7		7		7
	6		6		6		6
	5		5		5		5
	4		4		4		4
	3		3		3		3
	2		2		2		2
	1		1		1		1
	0		0		0		0

How Hard? On a scale of 1 (easiest) to 10 (hardest), circle the number on the right hand border of each day that indicates how hard it was to stay off nicotine that day. Once you have done several days in a row, draw a line between the circles connecting them. As you do this you will produce a handy graph showing you the ups and downs of the difficulty you experience with cessation.

Slips? Count the number of slips you have each day and put a square around that number on the same right hand border. Hopefully it starts at zero and stays there. Again, draw a line between the squares connecting them. If you prefer, use a different color. This line should graphically demonstrate your progress with slips. Don't slip just so that you have something to record! If you do slip, try to learn from the experience in order to avoid the slipping again.

In addition, if your exhaled carbon monoxide level was measured during each cessation session, please record it below.

Week 1: \_\_\_\_\_ Week 2: \_\_\_\_\_ Week 3: \_\_\_\_\_ Week 4: \_\_\_\_\_



# The Five-Step Procedure

The Five-Step Procedure works whether you understand why it works or not. If you would like to understand why it works, read this page. If you prefer, just skip to the next page for instructions on how to use it. The Five-Step Procedure represents a series of actions that utilize the power of the mind to alter the way the brain works. It is hard to understand how we can desire a change so much, yet feel unable to accomplish it. This is the insistent power of brain chemicals that extends beyond our willful control and determines many of our automatic “choices” in life. Think about it. How often do you really make the decision to smoke? How often do you just smoke automatically? And when you do “decide” to smoke, how often is that decision driven by feelings of tension or brain strain? This strain is generated by brain chemicals that go crazy when the brain cells experience a drop in the nicotine level. These brain cells want relief. They want their nicotine.

The Five-Step Procedure is adapted from a technique developed by psychiatrist Jeffery Schwartz to treat Obsessive Compulsive Disorder (OCD). OCD is a mental condition in which people know that they are doing things that don’t make sense (such as frequent hand washing or locking and relocking doors), but feel powerless to stop. OCD has proven to be a very difficult condition to treat. At one time it was deemed virtually untreatable, though new medicines have recently improved treatment success for OCD. More importantly for us, research has proven that consistent use of the Four-Step Procedure—even without medication—allowed patients to create sustained change and eliminate their OCD behaviors. By using new medical technologies it was shown that these changes were integrated into the brain at a very basic, biological level.

These tests established that OCD patients have an “OCD circuit” that dominates the way the brain works. The OCD circuit can be thought of as a unchanging brain switch. It’s like an electrical circuit turned on by a light switch. Once a thought or event flips the switch, it turns on automatic behaviors that feel virtually impossible to avoid. Use of the Four-Step Procedure was able to change the OCD circuit so that the brain actually worked differently. Because the switch itself (the triggers) can’t be changed, we have to change the wiring so that the same switch now has a different result.

The power of the “Nicotine Circuit” is much like that of the OCD circuit. The purpose of the Five-Step Procedure—we added the step of Rejoicing—is to help the smoker turn off this “nicotine circuit.” Just as with the OCD circuit, certain triggers turn on the nicotine circuit, switching on the urge to smoke, even as your mind tells you it’s not logical, not rational. The nicotine circuit exists as a result of the chemical pathway that has been established by (sometimes) millions of separate self administrations of the drug nicotine. The more often you use the Five-Step Procedure to make lasting change in the way your brain functions, the more likely you are to avoid a lifetime of relapses back to smoking.



## Step One: Relabel

When the urge to smoke appears, the first step is to relabel this unwanted urge or craving as a trick of the chemicals in our biological brain. Craving happens in order to force us to relieve the tension created by the brain's hunger for nicotine. Because nicotine hunger (or withdrawal) creates a tension in the brain; and because smoking feeds the hunger, the brain naturally programs itself to perceive that any tension can be relieved by the same action. This leads to use of cigarettes to help adjust or regulate our mood. This is the brain trying to compel you to feed it nicotine, because it is simply too miserable without it. And when our brain is miserable, it makes sure we are too. There are healthy ways to feed the brain without using nicotine. The brain is hoping to achieve the quickest release of the chemicals it needs to relieve its craving. So when the urge to smoke appears, recognize it for what it is—a desperate attempt of your brain to make you do something you don't want to do. Blame your brain! Blame the brain chemicals! Curse at your brain. Lament the fact that it is so devious. Wrestle with that urge. Recognize that your brain is a dominant part of who you are, but it is your mind that defines who you really are, who you really want to be. So whatever you do, change the first response you have to tobacco craving from automatically lighting up, to automatically relabeling.

## Step Two: Reframe

There is a need to understand the meaning of the urge to smoke—why it is happening now. When unwanted cravings occur, the usual procedure is to blame yourself, then to feel guilty, ineffective and helpless to change. The conflict created in our own mind by the guilt releases other brain chemicals that increase cravings in the brain and perpetuate the smoking cycle. Reframing allows you to correctly recognize the meaning of your cravings: Why it is happening now and how you can look at it differently to avoid getting trapped in the craving again. Don't make the behaviors more important than they are. Reason them out, understand them as "sticky thoughts." They are simply a result of your nicotine hungry brain, not a character defect, and definitely not permanent.

## Step Three: Refocus

In order to move forward, there is a need to distract the brain from its cravings and relieve the tension. Once the craving is recognized, there is a need to choose another behavior, an alternative response. This is difficult at first because your brain is so powerful at compelling behavior, but the more often you practice refocusing, the easier it is to do. It is helpful to have a set of refocusing exercises that you can fall back on when the craving arises.

## Step Four: Revalue

Change ultimately depends on altering the value you place on your craving and on your smoking. The more often you effectively relabel, reframe, and refocus, the more you can recognize these thoughts as worthless distractions



placed in your brain in order to be ignored. Devalue those harmful urges, allowing your brain to establish a new sense of what normal is. No feeling generated by your brain is important enough to force you to continue smoking. Make a list of things that are important to you in your life. When you reach the revaluing step, ask yourself what is more important—your cigarettes or things that you have identified as what you value most.

## Step Five: Rejoice

Be happy! Celebrate! More importantly, don't whine, don't pout, don't complain, don't gripe, don't moan, don't sulk, don't mope. Feeling sorry for yourself simply fuels the brain's resistance to change. Rejoice and be glad. Find excuses to rejoice. And while rejoicing, the quieting reflex can be used to calm any remaining tension that may be present. The quieting reflex involves smiling. That's right, just smiling. Recognize that you have made it through the five step procedure and have survived without a cigarette. If it feels natural, let loose a laugh. Even if you don't feel like smiling, tough, do it anyway. As you know, when we are happy the brain sends signals to the smile muscles to curl up our lips and crinkle our eyes as a message to all that we are pleased. But you may not know that this process can be reversed. If you "make" yourself smile, those same muscles can send messages back to the brain by reversing the pathway. Even if it feels silly, make yourself smile. Turn up your lips and let loose. Force the corners of your mouth up, and feel the quiet filling your brain.

# Refocusing Techniques

Here are some simple refocusing techniques you can use during, or instead of the five-step procedure. Use these instead of smoking to gain the same benefits that you would have felt from smoking. You can use these techniques either to calm yourself down if you're feeling stressed or to stimulate yourself if you need to be at your best.

## Breath Yourself Up:

Keeping your mouth closed lightly, take short, shallow, rapid breaths through your nostrils; 3 per second for at least 15 seconds. This is a fairly noisy technique, so you may want to do it in private. This breathing raises the energy and alertness of the nervous system.

## Breath Yourself Down:

Tip of tongue behind upper teeth; inhale for a count of 4; hold for a count of 7; and exhale around your tongue through pursed lips for a count of 8. Your exhalation should make a soft whooshing sound. Repeat 4 times. This breathing calms the energy of the nervous system.



## Self Hand Massage:

Circle palm with thumb 30 times. Rub all 4 sides of each finger with thumb and index finger. Bend all 5 fingers back for a count of 5. Do this 3 times. Press the hoku point—the soft area of the web between your thumb and index finger—between the tips of the thumb and index finger of your other hand firmly for 30 to 60 seconds. Repeat on other hand, if desired.

## Self Ear Massage:

Apply light pressure using the thumb behind the ear and the side of the index finger in front, starting at the top of the outer ear and working down the outer rim of the ear slowly to the ear lobe. Repeat 3 times. Use the tip of the index finger to stroke in and around the middle rim of the ear for about 20 seconds. Gently tug the ear lobe using light pressure for a count of 10. Repeat 3 times. Stroke the back of the ear using the index finger, including the soft skin between your ear and hairline. Massage the upper and outer areas of the front and back of both ears using the thumb and index finger. Repeat this whole procedure on other ear, if desired.

## Smoker's Switch:

Every smoker has a switch in their head that turns on the urge to smoke and turns it off. You know this is true because your switch is turned on with always smoke times or feelings. On the other hand, your switch is turned off during never smoke times. The problem is that your switch is controlling you instead of you controlling your switch. If you'd like to regain control, it's really a simple matter. All you need to do is imagine your hands as ghost-like or translucent and use the power of your imagination to picture yourself reaching into your head and searching until you find the switch labeled "Urge to Smoke". Now attach a wire to that switch—a copper wire with red coating—and run that wire from your head down past your left shoulder, past the elbow and the wrist, into the left hand and into the thumb, finally to the thumb nail of your left thumb. Imagine yourself attaching the wire firmly to the thumbnail of your left thumb. Now, it's easy. When you get the urge to smoke, press the thumbnail of your left thumb to turn it off. This stimulates a deep slow breath through pursed lips; hold for 1, 2, or 3 seconds; let the breath go, and with it, the urge to smoke. As you feel your craving disappear, smile inwardly. Allow your jaw, neck, and shoulders to go loose. You may notice a feeling of warmth and looseness spreading throughout your body. You may find yourself filled with a sense of calm and confidence that helps you deal with whatever dilemma faces you.



# Personal Refocusing Options

Think of things you can use personally to focus on something else when you are craving tobacco.

## Never Smoke Situations:

Consider those situations in which you never smoke. When feeling an overwhelming urge to smoke, put yourself into a never smoke situation and the urge to smoke will simply disappear. Just as always smoke situations may trigger the urge to smoke, never smoke situations can remove the craving from your brain. Your brain is trying to trick you into feeding it by smoking—feed it something else instead. If you never smoke around your children or certain friends, picture those people in your mind. If you never smoke in a certain location, go to that spot. If you can, take a shower or brush your teeth. If you never smoke while lying flat on your back, find a private spot and lie down. If you're really having trouble, roll over onto your stomach. Now that's a never smoke situation for almost everyone! List some never smoke situations you can use when feeling desperate for a cigarette:

## Cell Phone Cessation

The availability of cell phones creates an opportunity for getting off nicotine that didn't exist before. There are times that an uninvited craving or urge feels so overwhelming that it must be acted on immediately. How we act on the urge, as illustrated by the Five-Step procedure, is up to us. The moment the craving strikes is an ideal time to choose a different, more human way to respond. Hit the speed dial, distract yourself from the craving. Here's how to do it:

### Step 1:

If you get an overwhelming urge to smoke, fire up your cell phone instead of a cigarette.

### Step 2:

Choose who you are calling: your Off Ally or others:  
List other options here:



## Step 3:

If you get through, acknowledge the reason for the call.

Go through the Five-Step Procedure with your contact:

Relabel as you call

Emphasize Reframing—why is this happening now?

The call itself is refocusing, but it may be helpful to breath yourself up or down with your contact

Emphasize Revaluing—value the support from your friend

Emphasize Rejoicing—find something to laugh about

If you don't get through, leave a message and try a different refocusing exercise.

# Revaluing Options

## Value Statement versus Smoking

Think of something that is important to you. Place it in contrast to smoking by affirming that this value is more important than smoking. For example:

"My health is more important than smoking."

"The health of my family is more important than the brief sense of relief I would get from giving in to the urge to smoke."

"No cigarette is as important as regaining my sense of dignity and pride by freeing myself from nicotine."

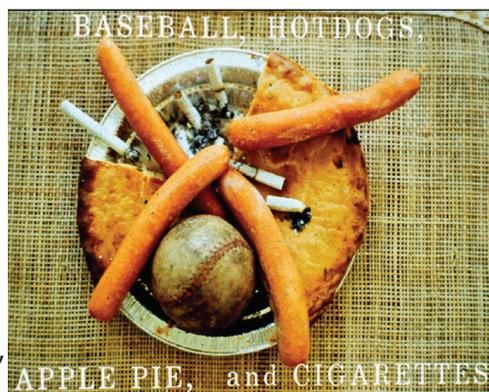
"No cigarette tastes as good as being healthy feels."

"I am stronger than my cravings."

"Love means never having to say you're smoking."

"I will out live my cravings."

Please make a list of the things that are important to you. Compare those things to smoking and see what comes out on top. Use these comparisons as the revaluing step of the Five Step Procedure.



# Section 4:

# Staying



# Nicotine

Section 4 focuses on the need to stay off nicotine. Most smokers agree that the hard part is not quitting cigarettes, it's staying quit. "I quit 20 times a day. Every time I finish a cigarette I promise myself it will be my last." The work you have done to identify barriers to success during cessation will continue to guide you as you work to stay off nicotine. The best way to prevent relapse is to be aware of why it happened before. If you've tried getting off nicotine before and returned to your cigarettes there is a reason. Unless you are aware of what that reason was and figure out a way around it, the same problem may come up again.



## How to Get Off and Stay Off Nicotine

Breath deeply. Take long walks in comfortable shoes. Smile for no apparent reason. Play with toddler's toys. Roll up your sleeves. Listen for the sound of peace and quiet. Look deep into eyes. Speak what's on your mind. Have faith in the inevitability of joy. Have a seat. Take your time. Trust your instincts. Love your family. Read for fun. Choose your words with care and courage. Appreciate intricacy. Accept kindness from others. Be worthy of trust. Demonstrate unconditional resolve. Acclimate to uncertainty. Dance between the rain-drops. Appreciate the usefulness of the passing of time. Don't try too hard. Don't ever stop trying. Find grace in small victories. Get out of your own way. Inspire hope. Avoid unnecessary detachment. Relish the strength found in shared suffering. Don't be afraid. Expose others to confidence until they catch it from you. Encourage intimacy. Accept surrender. Understand the meaning of conviction. Laugh out loud. Seek sunbeams, wherever they land. Listen for the music in voices. Breath deeply.



## Smokeless Smoker Syndrome

“Smokeless Smoker Syndrome” refers to people who stop smoking, but continue to think like a smoker and act like a smoker in every way except lighting up. Rather than shifting their sense of identity from smoker to ex-smoker—or better yet from smoker to non-smoker—they still feel like a smoker, just pretending not to smoke.

Smokeless Smokers often quit not because of a personal motivation to be free from nicotine, but because others think they should. While each of these feelings is part of the evolution from smoker to non-smoker for most people, the Smokeless Smoker becomes stuck in this quicksand and feels unable to escape. The Smokeless Smoker is at higher risk for relapse to smoking and sometimes looks to complicate their own life just so they have an excuse to quit quitting. If you feel like a Smokeless Smoker, talk about it. Ask someone to toss you a rope to pull you from that quicksand.

Smokeless smoker syndrome is similar to “Dry Drunk Syndrome” that can occur in recovery from alcoholism. Some traits associated with Dry Drunk Syndrome that may also apply to Smokeless Smoker Syndrome may include a rigid outlook, impatience, childish behavior, exaggerated self-importance, overreacting, and irrational rationalization.

## Abstinence Violation Effect

Abstinence is the act of refraining from indulging an appetite, in this case, tobacco. Violation involves disregarding a commitment or an agreement. The “Abstinence Violation Effect” then, is a fancy way to describe what happens for many people who in the process of making a change, slip up. Often, they feel so guilty about the slip, that they rebound back to the same behavior they had before, sometimes even worse than before, because they take it as evidence of what a hopeless case they are.

This happens with many behaviors such as dieting, keeping your house clean, or committing to work harder. It is certainly a problem for many smokers as they get off nicotine. The best way to avoid this problem is not to ever smoke another cigarette. Second best, if you do slip—and slips are common—don’t look at it as some huge failure. It’s only a failure if you don’t learn from it. If you learn from it, it’s just practice until you finally get it right. Try to avoid mind games where your brain convinces you to smoke because you can think of it as practice.

The only truly important tip to avoid relapse: Don’t ever, ever, ever give up to your cigarettes. You—and those who can help you—are stronger than your addiction. Don’t ever, ever, ever try to pretend that it just doesn’t matter. It does matter, because you matter.



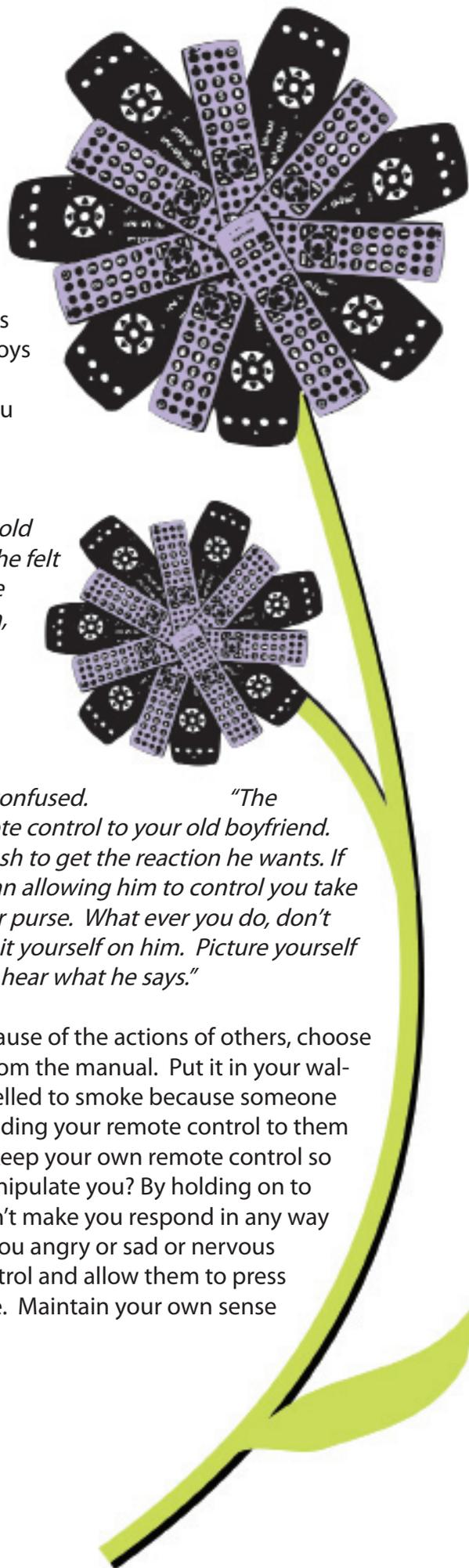
# The Smoker's Remote Control

When people have difficulty getting off nicotine or when they relapse, it is often convenient to blame others. Whether it's your spouse or your boss or your kids or your friends or your dog, there is always someone that has done something that annoys you or frustrates you to the point that they become your excuse for lighting up—perhaps the excuse you had in fact been looking for.

*A teen related that she wanted to attend a school dance, but had decided not to because an old boyfriend was going to be there. She related that she felt so put down and diminished by this person that she avoided being around him. When she was with him, he knew just what to say to set her off, and then it was she who ended up looking bad and being embarrassed. I pulled out a piece of paper and drew a crude picture of a television remote control.*

*"This will solve the problem," I related. She looked confused. "The problem," I said, "is that you have handed your remote control to your old boyfriend. Because you have, he knows just what button to push to get the reaction he wants. If you would rather be in control of yourself rather than allowing him to control you take this remote control with you. Keep it hidden in your purse. What ever you do, don't let him have it. If you'd like, turn the tables and use it yourself on him. Picture yourself pressing the "mute" button. You don't even have to hear what he says."*

If you find yourself feeling compelled to smoke because of the actions of others, choose a remote control on the following page and cut it from the manual. Put it in your wallet or purse or pocket. The next time you feel compelled to smoke because someone else has pressed your buttons, decide—are you handing your remote control to them so that they now control your actions? Or will you keep your own remote control so that others cannot use their words or actions to manipulate you? By holding on to your own remote, you can recognize that others can't make you respond in any way except that which you choose. They cannot make you angry or sad or nervous or frustrated unless you hand over your remote control and allow them to press your buttons. They definitely can't make you smoke. Maintain your own sense of control. Hold on to your remote.



As you read below, consider where you are in the process described. Think about what you need to do move forward so that your change is complete.

When we first begin to make a change we change our vision  
 And when you do, something inside of you will click  
 And when it does, the way you look at the world will be different  
 The things you allow yourself to focus your vision on will change  
 You will see things you previously ignored  
 and because you do you will be a different person

But it's not enough to change our vision  
 If you really want to change you must also change your mind  
 And when you do, something inside of you will click  
 And when it does, the words you choose may sound different  
 Reflect the need and desire for change  
 The voice you hear may echo as if it belongs to someone else  
 Saying the right thing at the correct time in the proper order

But it's not enough to change our minds  
 If you really want to change you must also change your heart  
 And when you do, something inside of you may click  
 And when it does, the decision to change will begin to be reflected  
 In the actions you take, the choices you make  
 Your behavior may begin to appear different to people who know you  
 The things you do will demonstrate a commitment to change  
 and as you do you will be a different person

But it's not enough to change your heart  
 If you really want to change you must also change your gut  
 And when you do, something inside of you will click  
 And the choices you make may begin to feel more natural  
 Less a sacrifice, as grief over what was lost is replaced  
 With delight in what is gained  
 And the change will begin to feel real  
 As if it belongs to you rather than someone who is like you

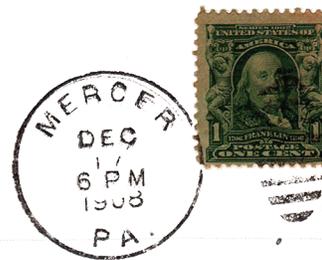
But it's not enough to change your gut  
 If you really want to change you must also change your soul  
 And when you do, something inside of you will click  
 And a conversion will be complete  
 You may feel less like you have lost something  
 More like you have found out who you really are  
 Less like you're acting like someone else  
 More like you are the person you intend to be  
 The person you choose to be  
 The person you were meant to be

Vision Mind Heart Gut Soul  
 Willpower is no longer necessary  
 Replaced by conversion, conviction, unconditional resolve  
 1, 2, 3, 4, 5 clicks and nothing will ever be the same



# The Dear Cigarette Letter

If you love your cigarettes and don't want to break up, consider writing a "Dear Cigarette Letter" explaining why the relationship must end. Think about it. When you first started going together, every thing was perfect. You felt happier when you were with your Cigarettes. S/he was with you in the good times and the bad times. You felt more attractive when s/he was there. So many memories fill your mind of the things you did together. But at some point, Winston began to take more than s/he gave. S/he began to abuse your body. S/he started to convince you that you were weak and stupid. The good times became shorter and fewer. But your Cigarettes have you trapped. S/he has wounded you so deeply that you have convinced yourself you can't live without her/him. But you CAN! Write and tell her/him to shove it. Go pick on someone else. You're fed up and won't take any more. Like any manipulator or any bully, s/he will back off and you will have your life back. Oh, you'll run into her/him again. And when you do, you may notice a twinge, a pull, a craving for her/his affection. But pause just long enough to remember the pain and generate a sense of pity for the people that are being hurting now. Cigarettes can never stop hurting. You CAN choose not to allow them to hurt you.



It may help if you share what you have written with someone else. Mail it to your tobacco company share it with your Off Nicotine group, show your Off Ally, send it to the newspaper as a letter to the editor. Write your letter here:

# Medications to Support Smoking Cessation

## Nicotine Replacement Therapy

Nicotine Replacement Therapy (NRT) represents an important element of smoking cessation for many smokers. While the use of NRT increases the success rate in smoking cessation, it is not a necessary component. Every smoker has the capability of cessation without nicotine replacement. Far more smokers have quit without NRT than with it. On the other hand, all smokers, even light smokers can benefit from use of NRT. Those smokers with the highest levels of physiologic dependence may benefit most from using NRT during their cessation process. There are a number of NRT methods available, including the patch, gum, lozenges (which are over-the-counter); and nasal spray and inhalers (which require a prescription).

### The Patch

**Why it works:** For most smokers, the patch is the most effective form of NRT. The patch offers a constant level of nicotine replacement that allows the smoker to learn not to smoke while avoiding the suffering caused by the unpleasant experience related to nicotine deprivation. Because the patch decreases the frequency and intensity of nicotine withdrawal and craving, it is easier to cope with the stresses caused by cessation, and the inevitable stresses that could undermine your quit effort. Using the patch does not eliminate nicotine withdrawal or tobacco craving.

**How to use:** NRT should not be started until your quit day. Follow instructions that come with the product. The patch can be placed on any area of dry, clean skin. Once placed, it should not be removed and replaced in order to avoid the prohibition against smoking while using the patch. Removing the patch and replacing it may actually increase your dose of nicotine, because handling the patch may spread the nicotine onto your hands or increase the total area of skin exposed to the nicotine. Placing the patch each day is best framed as a commitment to avoid tobacco use for that day. The patch should not be cut up to decrease the dose. In general, 1 cigarette provides 1 mg of nicotine to the smoker. Thus, 21 mg patches approximate 1 pack of cigarettes per day; 14 mg patches approximate  $\frac{1}{2}$  pack of cigarettes per day, and 7 mg approximate  $\frac{1}{4}$  pack of cigarettes per day. Adjust based on your use. Where ever you start, you should decrease the dose over time in order to taper off nicotine. In addition to lowering the dose, you may decide to use the patch for fewer hours each day. Many smokers use the patch 18 rather than 24 hours a day, especially if they experience side effects (see below). Up to 3 months of NRT can be helpful. Many participants find that they need to use NRT only for the first 1 to 2 weeks to get past the most intensive craving. Others find that prolonged 2 to 3 month use allows them to be successful. Your actual duration of use should be based on your ongoing sense of need for nicotine. Using NRT is always better than smoking ever is, because NRT has no cancer causers, no carbon monoxide, and no second hand smoke harm. If you need to use it longer to protect your cessation, you should. Research supports using NRT



for at least 1 month to avoid relapse.

**Upside:** Anyone can benefit from the patch. This form of NRT tends to provide the most benefit to people who are moderately hooked on nicotine. Getting off nicotine requires many changes in habits, attitudes, behaviors, and choices. It is helpful to make those changes while having less anxiety, irritability, insomnia, headaches, and craving to cope with. The patch is the most effective form of NRT because it allows you to unlearn those other behaviors without the needing to take the nicotine in response to withdrawal symptoms, an action that too closely replicates the smoking experience. Because forms of NRT require this intermittent nicotine self administration, they do not allow you to find other ways of coping to replace nicotine use.

**Downside:** Skin rash at the site of the patch is the most common problem. In addition, some users report vivid dreams or nausea using the patch. These side effects may be related to overdosing or under dosing the NRT (see below). Most importantly, participants who smoke while using NRT may develop serious medical problems including nicotine toxicity, heart attack, and stroke.

## Nicotine Gum and Lozenges

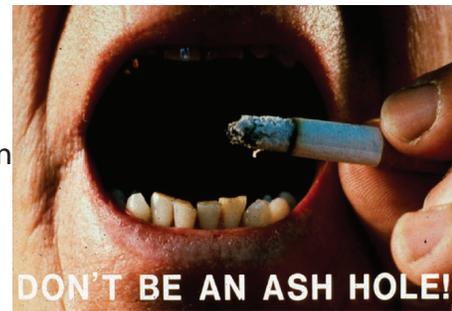
**Why it works:** The immediate episode-specific relief from nicotine craving offered by the gum or lozenge explains why they work. Using these products reduces the frequency and intensity of tobacco withdrawal, including craving. It does not eliminate them.

**How to use:** NRT should not be started until your quit day. Follow instructions that come with the product. Both the gum and lozenge are used in a similar fashion. They can either be used on a regular schedule to avoid developing cravings, or on an as needed basis in response to the urge to smoke. Once placed in the mouth, use begins with chewing or sucking on the product until a burst of nicotine is experienced, then the product is “parked” between the cheek and gum, where absorption is lower. When the next craving occurs, the user again chews (gum) or sucks (on lozenge) to receive a nicotine burst. This “burst” never matches the speed or dose of a burst received while smoking, but for most smokers it is sufficient to allow them to avoid smoking the next cigarette. In general, 1 cigarette provides 1 mg of nicotine to the smoker. Heavy smokers (a pack or more a day) may benefit from the 4 mg dose. For a pack a day smoker, 5 administrations of the 4 mg dose per day are about equivalent to a pack of cigarettes. Those smoking ½ pack or less should use the 2 mg dose. The gum and lozenge should be used on an as needed basis. If need is high, you may find yourself using it both to prevent cravings and to respond to them. Duration of use is the same as for the patch and may range from 1 week to 3 months. Research supports using NRT for at least 1 month to avoid relapse.

**Upside:** Gum and Lozenges work best for light smokers who may need to use them only occasionally, or for very heavy smokers who smoke so often that they need to be able to respond to an overwhelming urge to smoke with a dose of nicotine. Gum and lozenges



are another option for those who develop a rash with the patch. Some heavy smokers use the patch and occasionally add the gum or lozenge if they experience an overwhelming urge to smoke. This method has not been properly tested for safety, but is clearly safer than smoking while on the patch. Those attempting this approach would be more likely to develop nicotine toxicity.



**Downside:** Use of these products replicates the pattern of responding to nicotine need with more nicotine. That may make it more difficult for some smokers to grow away from the sorts of patterns that make relapse to smoking more likely. Users of these forms of NRT may have more problems learning to function without that nicotine surge they have become accustomed to from their smoking. These “intermittent use” methods of nicotine replacement carry higher risk of the development of dependence on the NRT method. Again, those who smoke while using these forms of NRT may develop serious illness.

## Nicotine Inhalers and Nasal Spray

There are no distinct advantages to these prescription NRT approaches. If you wish to pursue these forms of NRT, discuss them with your doctor.

## Bupropion (aka Zyban, Wellbutrin)

**Why it works:** Bupropion is NOT a form of nicotine and is different from NRT. It was originally discovered as an antidepressant and remains popular for this purpose. In addition, bupropion is thought to mimic some of the positive effects of nicotine on the brain. Because those benefits are achieved through the bupropion, smokers receive less pleasure from smoking and often begin to dislike rather than crave smoking. Furthermore, bupropion also decreases nicotine withdrawal.

**How to use:** Bupropion is a prescription medication and must be obtained from your doctor. A letter to your doctor is available through this program explaining bupropion use and (if appropriate) why it is particularly important in your case to use it. Follow instructions that come with the product. Most importantly, bupropion works best if it is started while you are smoking, 1 to 2 weeks before your quit date. If you think bupropion may be an important part of your cessation, you may want to contact your doctor now. Bupropion can be used with NRT to increase chances of success. The usual dose of bupropion is 150 mg twice a day, or 100 mg 3 times a day. Duration of use is generally recommended as 1 to 3 months. Research supports using bupropion for at least 1 month to avoid relapse.

**Upside:** Any smoker can benefit from bupropion. It may be especially helpful to those who “smoke to cope” and those who respond to stress, anger, anxiety, or bad moods by smoking. Because there is no nicotine in bupropion, there is less concern about discon-



tinuing bupropion later. It is also helpful for smokers who are also diagnosed with depression. However, you do not need to be depressed in order to benefit from bupropion.

**Downside:** Bupropion may or may not be covered by your insurance. Bupropion is not for everyone. It is a powerful prescription medication and may interact with other medication. You should discuss possible side effects with your doctor.

## Varenicline (aka Chantix)

**Why it works:** Varenicline has some, but not all of the characteristics of nicotine. It is referred to as a nicotine agonist, which means that it binds a portion of the nicotine receptor, reproducing many of the effects of nicotine, but actually blocks nicotine from tobacco from binding to the same receptors. Therefore, smokers no longer receive the “nicotine rush” they previously may have experienced with tobacco, often instead feeling only the noxious effect of the smoke.

**How to use:** Varenicline is a powerful prescription medication and must be obtained from your doctor. If you think varenicline may be an important part of your cessation, you may want to contact your doctor now. Varenicline may interact with other medication so use should be discussed with your doctor. The usual dose of varenicline is 0.5 to 1 mg twice a day. Duration of use is recommended as 3 months.

**Upside:** Especially helpful to those who tried and have been frustrated by other cessation approaches. Those who may benefit most include heavy smokers; those who frequently use nicotine to help cope; and those who might benefit from a disincentive to smoke (feeling worse rather than better when nicotine is inhaled).

**Downside:** Varenicline may or may not be covered by your insurance. Varenicline is not for everyone, and may have more side effects associated with it than other smoking cessation medications. The most common side effect is nausea, occurring in approximately 30% of patients. In addition, some patients have sleep disturbance, increasingly vivid dreams, constipation, flatulence, and vomiting. All of these side effects are more prominent in patients who continue to smoke while using varenicline, providing motivation to avoid tobacco use. Despite these side effects, only about 3% of patients discontinued varenicline during 12 weeks of treatment. Side effects are worse if used with NRT. Concern has been expressed by some about a possible depressed mood, suicidal ideation, and changes in emotion and behavior within days to weeks of initiating Chantix treatment. If you experience these problems when taking Chantix, discontinue use and consult your doctor.



# A Toolbox of Tips

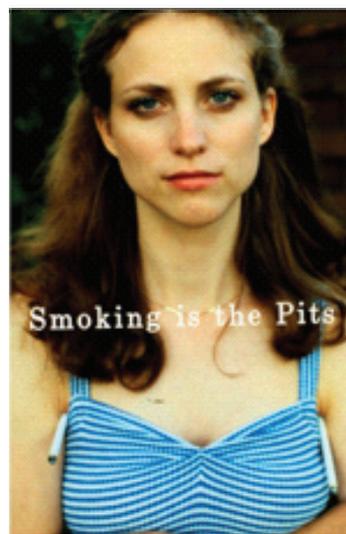


Review this list of tips. Circle those tips that feel like they would be most helpful to you. Some tips will help as you are preparing to quit, others as you are trying to stay off nicotine.

1. Go to a public place. Observe smokers. Notice how many more wrinkles they have...how much older they look...how unattractive they look while they are smoking.
2. Look through magazines at cigarette ads. Observe how they try to con you into smoking. Get mad about the “pushers”.
3. Consciously replace keywords that keep recurring in ads, like “pleasure”, “flavor”, “refreshment”, or “taste” with more accurate words like “danger” or “waste”.
4. Create your own nonsmoking slogans or counter advertisements.
5. Get a complete physical from your doctor.
6. Get your teeth professionally cleaned.
7. Talk with others who have quit for their tips.
8. Decide **POSITIVELY** you want to quit. Avoid negative thoughts.
9. Don’t whine, pout, feel sorry for yourself, or complain. Cigarettes have been your solution when you feel sorry for yourself. Don’t put yourself in that trap.
10. Think about the time you waste on cigarette breaks, rushing out to buy a pack, looking for a light, bumming a cigarette. Find a better way to waste time.
11. When you see someone smoking, don’t envy them. Don’t be jealous. Be proud, thankful, humble. That used to be you. It could be again, but at this moment, it is not. Keep in mind that smokers envy you because you got off nicotine.
12. Do something you’ve wanted to do (get a haircut, take a road trip, go to a nice restaurant, build a bookcase, clean your room, go shopping with money saved).
13. Always carry a water bottle. Drink lots of water. Water flushes the nicotine out quicker and decreases cravings.
14. Do something you really liked doing when you were a little kid—before you started smoking. Play with Play-doh. Color with crayons in a coloring book. Color outside the lines. Play with dolls of toy soldiers or yo-yo’s or Leggos. If you have to, suck on a pacifier instead of a cigarette.
15. Keep busy. Stock up on reading materials, play video games, or work crossword puzzles.



16. Chew on toothpicks, use strong mints, gum, carrot sticks. Keep your mouth busy.
17. Notice withdrawal symptoms and blame them on cigarettes. Develop contempt for cigarettes.
18. Wear your Five-Step Procedure bracelet. Snap it against your wrist if you get the urge to smoke.
19. Save \$4 dollar for every pack you don't smoke. This is a conservative saving amount when you consider actual cost, health care, wasted time, etc..... Do this every day for a whole year or more. Use your Cost Calculator and calculate the savings.
20. When you have an overwhelming urge, contort your face and body in a way that shows the discomfort you are feeling. Yell!!
21. Physically wrestle with that urge. Fight an imaginary foe, or ask your friend or family member to pretend he's the urge you are (gently) wrestling with. Take it out on a stuffed animal, arm wrestle a friend.
22. Be honest about everything you do. If you are not open and honest with yourself and others, you will make it harder to be successful.
23. One will hurt! You are hooked. When nicotine is in your body you do not have control. Get off nicotine. Get in control. If you slip, learn from it.
24. Avoid smoking situations. Go to places where smoking isn't allowed.
25. Brush your teeth more often. Take extra showers or baths.
26. Think of situations when you never smoke. If you get the urge to smoke, put yourself in that situation.
27. Write 100 times: The urge to smoke will go away whether I smoke or not. Or, I am stronger than my cigarettes. Or, no one ever died from quitting. Or, no cigarette tastes as good as freedom feels.
28. Throw away all cigarettes, matches, lighters, ashtrays. Dig a hole in your backyard. Bury the Butts. Have a funeral. Set up a tombstone.
29. List hints you think up yourself, or learn form others here:



# Section 5:



# Balance

## Why emphasize stress and coping in a Guide on tobacco cessation?

For most people reading the Off Nicotine Guide the answer is obvious. Stress and smoking, love and marriage, horse and carriage... As the old song goes, "You can't have one without the other." This optional section is available for anyone to use at any time during their cessation process in order to regain a sense of balance in life. It is intended to be most helpful to those who are most dependent on nicotine for coping.

Tobacco smoke is in fact nothing more or less than an inhaled stress hormone. Stress hormones are substances naturally released by glands in order to help the brain and body function. The drug nicotine acts in a nearly identical fashion to other stress hormones, making the body more equipped to deal with—or recover from—the stress in your daily environment. You know this is true because the more overwhelmed, frustrated, freaked out, tense, irritated, angry on edge—well, the more stressed—you are, the more you feel the need to smoke.

The problem is not that nicotine helps you cope with stress; it isn't even that nicotine can't be ingested in a healthy fashion. There are two bigger problems with nicotine as a stress reliever. First, the more often you smoke and the longer you smoke for, the more you come to depend on nicotine for coping. If you put a cast on your arm and can't use it for months, when you take the cast off, the muscles of your arm have become withered from the disuse. Its no different with tobacco. Nicotine becomes so essential to the body that the body's natural coping mechanisms tend to weaken. Without nicotine, the brain tends to panic rather than cope, shut down rather than respond.

The second doorway into the nicotine-stress trap occurs as nicotine exits the body. When nicotine enters the body, it relieves stress, but when it leaves, nicotine creates stress. For those who "smoke to cope" the brain experiences loss of nicotine as a toxic state. That is why so many smokers feel so irritable when trying to quit that the same people who had tried to convince them to quit can be heard saying, "Man, you really need a smoke." But even in the course of each day, as the nicotine level falls, there exists a vague sense of tension that impairs function unless the nicotine tank is refilled. "Every stress leaves an indelible scar, and the organism pays for its survival after a stressful situation by becoming a little older." If this is so, then every cigarette makes us a little older too.

Use this section to help exercise your coping muscles. You can do this by first taking our brief survey, then reading and thinking about the meaning of your responses. After all, tobacco cessation should not leave you *all stressed up with nowhere to go*.



Expectations disease  
Who next to please  
What to accomplish  
What chance to seize

Expectations disease  
Unload the gun  
Put out the dog  
So much undone

Farther and faster  
Tickle and tease  
Better isn't good enough  
Expectations disease

Don't bother to push  
I'll do that myself  
No need for thank you  
I flourish on guilt

Time on my forehead  
Ill at my ease  
Mind on my shoulders  
Expectations disease

Expectations disease  
So self imposed  
No problem I'll do it  
Can't be exposed

Balance on a raindrop  
Curse at the new  
Expectations disease  
So much to do

The kindness of others  
Can't meet my needs  
Fend for myself  
Expectations disease

Expectations disease  
Who next to please  
What to accomplish  
What chance to seize

Expectations disease  
Unload the gun  
Put out the dog  
So much undone

## Defining Stress

Stress is a state that we all feel, but might have difficulty defining. Some understand stress based on what happens to us in our lives. But it is not enough to know what happens to us without understanding how we respond to what has happened. But when we try to define stress only by how we respond, we tend to ignore the role of our capacity to cope.

The definition we are working with here involves an imbalance between the demands placed on us and our capability to respond at a reasonable cost. When that which is expected of us—emotionally or physically—matches up with what we can accomplish, we do not experience stress. But when we are uncertain about whether we will be able to meet demands, or when demands overwhelm our capability, then we experience the fullness of stress. As you will see in the Stress Survey, this definition takes into account the demands placed on us; our own expectations of ourselves; whether our personal needs are being met; the level of uncertainty we face; the presence in our lives of problems that can't be solved; and our ability to maintain a sense of perspective.

At the center of stress lies control. It is useful to understand that the primary motivation of human behavior is a desire to maintain a sense of personal control. Whenever someone makes a choice that appears irrational, at a basic level, they are simply trying to regain a sense of personal control. Often the manner in which they are doing so—rage, alcohol, lying, overeating—is irrational and over time will cause more problems than it solves. But in the short run, each of these behaviors allows us to regain a sense of balance.

When approached in this manner, smoking becomes a rational act—we feel more in control when we smoke. The problem is, of course, that over time, smoking causes us to become out of control: out of control of our smoking, out of control of our health, out of control of our choices. We no longer simply choose to smoke, we do so automatically, in order to experience the short term sense of relief and control offered by nicotine.





## T-Shirt Definitions and Commentary on Stress

Stress: When you don't feel lit even with both ends burning.

Stress: When your body sweats bullets but your mind shoots blanks.

Stress: Tension occurring when your gut says no and your mouth says I'd be glad to.

Stress: The confusion created when your mind resists the body's basic, overwhelming desire to beat the daylights out of some idiot who desperately deserves it.

Stress: The sensation created when the roller coaster goes down and your lunch comes up.

Stress: When you wake up screaming and you realize you weren't asleep.

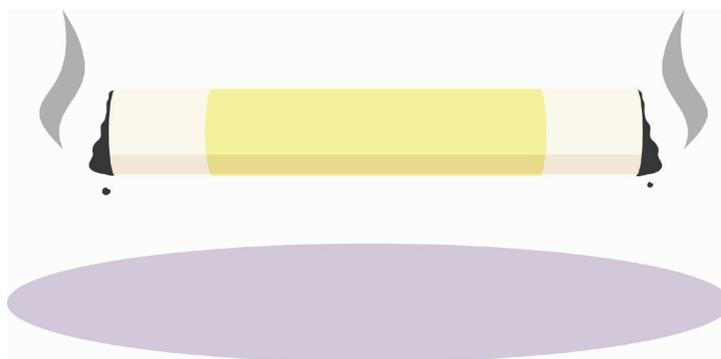
Stress: When you flush and flush and the crap still won't go away.

I try to take one day at a time, but sometimes several days attack me at once.

Of course I can handle stress. I create it, don't I?

Stress is starting out with nothing and still having most of it left.

Stress is the garbage of life—we all generate it but if we don't dispose of it properly, it piles up and makes life stink.



# The Brief Evaluation of Perceived Stress Instrument

In the past month, how often have you felt overwhelmed by the demands placed on you in your life?

Never (0)      Rarely (1)      Sometimes (2)      Often (3)      Always (4) \_\_\_\_\_

In the past month, how often have you felt frustrated trying to live up to your own expectations and standards?

Never (0)      Rarely (1)      Sometimes (2)      Often (3)      Always (4) \_\_\_\_\_

In the past month, how often have you felt that your needs as a person were being left unmet?

Never (0)      Rarely (1)      Sometimes (2)      Often (3)      Always (4) \_\_\_\_\_

In the past month, how often have you felt uncertain or apprehensive about the future?

Never (0)      Rarely (1)      Sometimes (2)      Often (3)      Always (4) \_\_\_\_\_

During the past month, how often have you felt that there were problems in your life that just could not be solved?

Never (0)      Rarely (1)      Sometimes (2)      Often (3)      Always (4) \_\_\_\_\_

In the past month, how often have you felt that there are so many every day hassles and crises that you lost track of the things that are really important to you?

Never (0)      Rarely (1)      Sometimes (2)      Often (3)      Always (4) \_\_\_\_\_

Total Score \_\_\_\_\_

After responding to each question, add up your total score and interpret according to the scale below:

20 to 24:      Very High Stress  
 15 to 19:      High Stress  
 8 to 14:      Moderate Stress  
 0 to 7:      Low Stress



# Exercise Your Coping Muscles

## If demands are too high...

Think about all of the demands in your life right now. Demands are things that you must pay attention to, or there will be trouble. Keep in mind work, relationships, family, friends, and finances. Sort problems by priority, practicality, and energy expenditure required. Decide which are "true" demands and which can be relegated to a list of requests made of you with little or no external consequences.

## If your expectations of yourself are too high...

Think about all of the expectations of yourself that have been frustrating or difficult to live up to. This list should represent those demands you place on yourself, rather than those that other people place on you. Include both realistic and unrealistic expectations. Expectations are helpful when they enable us to accomplish more in our lives. When expectations are too high they become disabling. Then expectations may be abandoned, leaving poor self esteem and a sense of hopelessness. Sort out your expectations into enabling and disabling categories. Watch for expectations of control that are not realistic.

## If your needs as a person are being left unmet...

Consider the degree to which your needs as a person have been left unmet. What are your needs? Who do you count on to help meet your needs? Need fulfillment is an excellent way to get a handle on the your expectation of your interpersonal environment. To what degree do you communicate your needs? What needs can you meet yourself, what needs must be met by others? Simply identifying needs makes it more likely that they will be met.



### If there is great uncertainty in your life...

Have you been feeling apprehensive or uncertain about what the future holds for you? Why or why not? What is the source of your uncertainty? Is it the circumstances you are in, or your ability to succeed in those situations? The imperative to avoid harm is deeply imbedded into human consciousness. Some people, in an effort to avoid harm, take no risk and feel constant apprehension that creates a disabling sense of vigilance. While ignoring the possibility of harm may place us in danger of being hurt, it is important to find a balance that allows us to take calculated risk despite uncertainty. Examine whether the source of your uncertainty comes from inside yourself, or is a realistic assessment of your environment.

### If you are confronted by problems that can't be solved...

Can you live with these problems? Are the problems really unsolvable, or have hopelessness and helplessness kept you from recognizing solutions? Sort problems into categories of uncontrollable, controllable, and of uncertain controllability. When people have an unrealistic need for control they create a constant sense of uncertainty for themselves. Seek to recognize well-chosen and ill-chosen efforts you make to maintain control. Keep in mind that an arbitrary restriction of options is a frequently used ill-chosen control mechanism. Try to confront problems that are controllable; try to accept problems that are out of your control; ask for help in recognizing whether you have correctly perceived the difference.

### If you have lost perspective about what is really important to you...

Have you had so many everyday hassles and crises that it has been difficult to keep perspective about the things that are really important to you? Perspective involves recognizing the things that are most important to you and placing them in context of the whole picture of your life. The more fully you have a sense of meaning in life, the easier it is to maintain perspective. If you are having a hard time maintaining perspective, take time to explore your own personal sense of meaning with the exercises below.



**Source:** Where do I come from? Who do I come from?

You may respond by examining your heritage, the generations that came before. you may also choose to focus on the social circumstances of your youth and point out that you come from poverty or wealth. You could respond geographically, with your hometown or cultural background. Each manner of response is correct. Each source contributes to the fullness of who you are.

**Vision:** When I look, what do I see?

Do you see through the glass, darkly? Do you look for only things that are seen or also things that are not seen? Do you see with faith or with fear? With cynicism or trust? With anger? With hate? With hope or hopelessness? Our perspective on the world depends on how we see and envision the world. Who we are involves what we see when we look.

**Values:** What is important to me?

What we value determines our values. What is important to us defines who we are. What we care about most determines how we act. To say we value honesty and then lie betrays the truth of who we are. When we do not clarify or prioritize our values, we will act with inconsistency, indecision, and unreliability.

**Purpose:** Who am I? What gifts or assets have I been given or acquired?

In what ways are you blessed? In every human being there resides a greatness. What is your greatness? What are the tools you have to work with in quest of fulfillment? What tools are you missing that you remain capable of acquiring?

**Passion:** Where does my power come from?

We all have personal power. The more we recognize this truth, the more we can use this power productively rather than misusing or abusing it. The more we recognize the source of that power, the more we can use it as a positive influence. What are the sources of your power? Does your power arise from your intellect? Your creativity? Your family? From your religion? Your hard work? When we are feeling powerless—or simply having less power—such as when trying to make a difficult change like tobacco cessation, we need to return to where our power comes from.

**Meaning:** Who am I important to? What am I important to? Why am I here? Why am I here now?

Why are you uniquely here? What would not happen, or not happen as well if you were not here? Whose life would be less without your influence? It is often helpful to have a dominant, ascendant sense of meaning. This principal meaning can be largely discerned as the sum of our source, vision, values, purpose, and passion. To restrict ourselves to a solitary sense of meaning limits the fullness of who we are. It is not a question of meaning in life, but meanings. Sometimes it is less important to find meaning in life than to find meaning in the moment. Why are you here, now?



# A Prescription for Spiritual Wellness

Purpose in life involves finding the greatness hidden inside each of us

Meaning is determined by how we use this greatness

Faith is to believe that greatness can be embedded within the frailty of our own fallibility

Serenity involves using our goodness to pursue meaning until moments of greatness reveal themselves to us

Courage is to recognize moments of greatness when they occur, despite personal cost

Suffering in life lingers in unvisited expectations of greatness

Grace is to understand that simply because this greatness is inside of us, does not mean that it belongs to us

The dilemma of life is that the harder we look for our greatness, the less likely we are to find it

Control in life is achieved by allowing our greatness to discover us

Perspective is gained with understanding that greatness does not extinguish or diminish with passing of time or opportunity

Wisdom is approached when we understand that we do not have the latitude to choose which greatness is ours or how large our greatness is

Simplicity in life involves not trying to make someone else's greatness our own

Power is revealed when we recognize greatness hidden inside every being

Joy resides in appreciation of the greatness of others

Love is to be filled with greatness from another that can't be done without

Peace in life occurs when we recognize that regardless of whether we discover our greatness, we are still loved

Note: The full Real Person's Guide to Stress and Coping is available at Master of Public Health Program, Case Western Reserve University School of Medicine, (216) 368-3725



# The Smoker's CAGE:

## questions meant to find answers for smokers

The purpose of this survey is to find out how you smoke in order to figure out how you can get Off (Officially free from) nicotine. Each question helps plan your off nicotine strategy, so please answer thoughtfully and completely.

How old were you when you became a smoker? \_\_\_\_\_

How many of each of the following tobacco products do you usually use per day?

Cigarettes \_\_\_\_\_

Cigars, little cigars, or blunts (like Black and Milds, Phillies, or Swisher Sweets) \_\_\_\_\_

Chewing tobacco, snuff, or dip (such as Redman, Skoal, Bandits, or Copenhagen) \_\_\_\_\_

Bidi's ("beedee's," small brownish cigarettes wrapped in a leaf, tied with a thread) \_\_\_\_\_

Kreteks (clove cigarettes) \_\_\_\_\_

Tobacco Pipe \_\_\_\_\_

Who else in your household smokes? (Check all that apply)

No one    Spouse    Father    Mother    Brother(s)    Sister(s)    Kids

Others \_\_\_\_\_

How many of your 5 closest friends smoke?    0    1    2    3    4    5

How often do you inhale?    Always    Sometimes    Never

How many times during the past 12 months have you stopped smoking for one day or longer because you were trying to quit smoking?

I have not tried to quit    1 or 2 times    3 to 5 times    more than 5 times

Since becoming a smoker, what is the longest time you have gone without smoking?

Several hours    Overnight    Several days    A week    A month  
 More than a month

How committed do you feel to getting off tobacco?

Not very committed    Somewhat    Very    Extremely committed



How important are the following reasons you want to quit smoking?					
Health reasons	Not Important <input type="checkbox"/>	Slightly Important <input type="checkbox"/>	Somewhat Important <input type="checkbox"/>	Very Important <input type="checkbox"/>	Extremely Important <input type="checkbox"/>
The cost of tobacco	Not Important <input type="checkbox"/>	Slightly Important <input type="checkbox"/>	Somewhat Important <input type="checkbox"/>	Very Important <input type="checkbox"/>	Extremely Important <input type="checkbox"/>
My friends wants me to quit	Not Important <input type="checkbox"/>	Slightly Important <input type="checkbox"/>	Somewhat Important <input type="checkbox"/>	Very Important <input type="checkbox"/>	Extremely Important <input type="checkbox"/>
I am embarrassed by my smoking	Not Important <input type="checkbox"/>	Slightly Important <input type="checkbox"/>	Somewhat Important <input type="checkbox"/>	Very Important <input type="checkbox"/>	Extremely Important <input type="checkbox"/>
I don't like feeling hooked on	Not Important <input type="checkbox"/>	Slightly Important <input type="checkbox"/>	Somewhat Important <input type="checkbox"/>	Very Important <input type="checkbox"/>	Extremely Important <input type="checkbox"/>
My smoking bothers other people	Not Important <input type="checkbox"/>	Slightly Important <input type="checkbox"/>	Somewhat Important <input type="checkbox"/>	Very Important <input type="checkbox"/>	Extremely Important <input type="checkbox"/>
I don't like being manipulated by Tobacco Companies	Not Important <input type="checkbox"/>	Slightly Important <input type="checkbox"/>	Somewhat Important <input type="checkbox"/>	Very Important <input type="checkbox"/>	Extremely Important <input type="checkbox"/>
Smoking is wrong	Not Important <input type="checkbox"/>	Slightly Important <input type="checkbox"/>	Somewhat Important <input type="checkbox"/>	Very Important <input type="checkbox"/>	Extremely Important <input type="checkbox"/>
I don't want to get in to trouble	Not Important <input type="checkbox"/>	Slightly Important <input type="checkbox"/>	Somewhat Important <input type="checkbox"/>	Very Important <input type="checkbox"/>	Extremely Important <input type="checkbox"/>
Smoking makes me feel foolish	Not Important <input type="checkbox"/>	Slightly Important <input type="checkbox"/>	Somewhat Important <input type="checkbox"/>	Very Important <input type="checkbox"/>	Extremely Important <input type="checkbox"/>
I can't smoke at work anymore	Not Important <input type="checkbox"/>	Slightly Important <input type="checkbox"/>	Somewhat Important <input type="checkbox"/>	Very Important <input type="checkbox"/>	Extremely Important <input type="checkbox"/>
Smoking makes me feel left out	Not Important <input type="checkbox"/>	Slightly Important <input type="checkbox"/>	Somewhat Important <input type="checkbox"/>	Very Important <input type="checkbox"/>	Extremely Important <input type="checkbox"/>
Smoking has made me less able to do the things I like to do	Not Important <input type="checkbox"/>	Slightly Important <input type="checkbox"/>	Somewhat Important <input type="checkbox"/>	Very Important <input type="checkbox"/>	Extremely Important <input type="checkbox"/>
I don't want to set a bad example	Not Important <input type="checkbox"/>	Slightly Important <input type="checkbox"/>	Somewhat Important <input type="checkbox"/>	Very Important <input type="checkbox"/>	Extremely Important <input type="checkbox"/>
Smoking makes me feel bad about myself	Not Important <input type="checkbox"/>	Slightly Important <input type="checkbox"/>	Somewhat Important <input type="checkbox"/>	Very Important <input type="checkbox"/>	Extremely Important <input type="checkbox"/>
Many of my friends who used to smoke have quit	Not Important <input type="checkbox"/>	Slightly Important <input type="checkbox"/>	Somewhat Important <input type="checkbox"/>	Very Important <input type="checkbox"/>	Extremely Important <input type="checkbox"/>
Other:					



Thinking about those close to you, do you have at least one person in your life who will encourage you in your effort to quit smoking?  No  Yes

Thinking about those close to you, is there anyone who might interfere with or feel threatened by your attempt to quit smoking?  No  Yes

Overall, how much support do you have from your friends and family to quit smoking?  
 None  A little  Quite a bit  A lot

How confident are you that you will be successful getting off tobacco?  
 Not at all confident  A little confident  Somewhat confident  
 Very confident  Extremely confident

When you have tried to quit, or when you really want to smoke but you can't, how often do you experience...					
	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Tobacco craving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Frustration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nervousness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sadness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anxiety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bad temper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irritability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feeling on edge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feeling overwhelmed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restlessness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drowsiness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trouble concentrating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feeling stressed out	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



How often do you smoke in the following situations?					
With coffee or soda	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
While trying to concentrate	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
In the car	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
In restaurants or bars	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
During breaks at work	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
While drinking alcohol	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
In the shower	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
As soon as I wake up each day	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
When I'm hungry	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
When no one is looking	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
As soon as work is over	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
In bed	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Coming home from work	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Hanging out with friends	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Talking on the phone	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Watching TV	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
On the way to work	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
At parties	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
When feeling sick	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Before bed	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
At home with my family	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
In non-smoking areas	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
After sex	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
I wake during the night to smoke	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>



How often do you want to smoke when you are feeling...

Anxious	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Stressed	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Annoyed	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Angry	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Fearful	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Nervous	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Pissed off	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Shy	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Sleepy	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Upset	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Rejected	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Disappointed	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Empty	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Lonely	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Insecure	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Sad	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Overwhelmed	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
On edge	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Blue	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Frustrated	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Out of control	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Socially uncomfortable	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Tired	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Depressed	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Down	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>



When you think of yourself as a smoker, how often do you feel...					
Guilty	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Hooked	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Foolish	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Cool	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Angry	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Stupid	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Rebellious	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
In charge	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Confident	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Weak	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Dishonest	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Proud	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Unable to quit	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Out of cash	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Left out	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Unhealthy	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Cheated	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Defiant	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
More attractive	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Persecuted	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Popular	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Like a hypocrite	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Out of control	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Smart	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Satisfied	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>

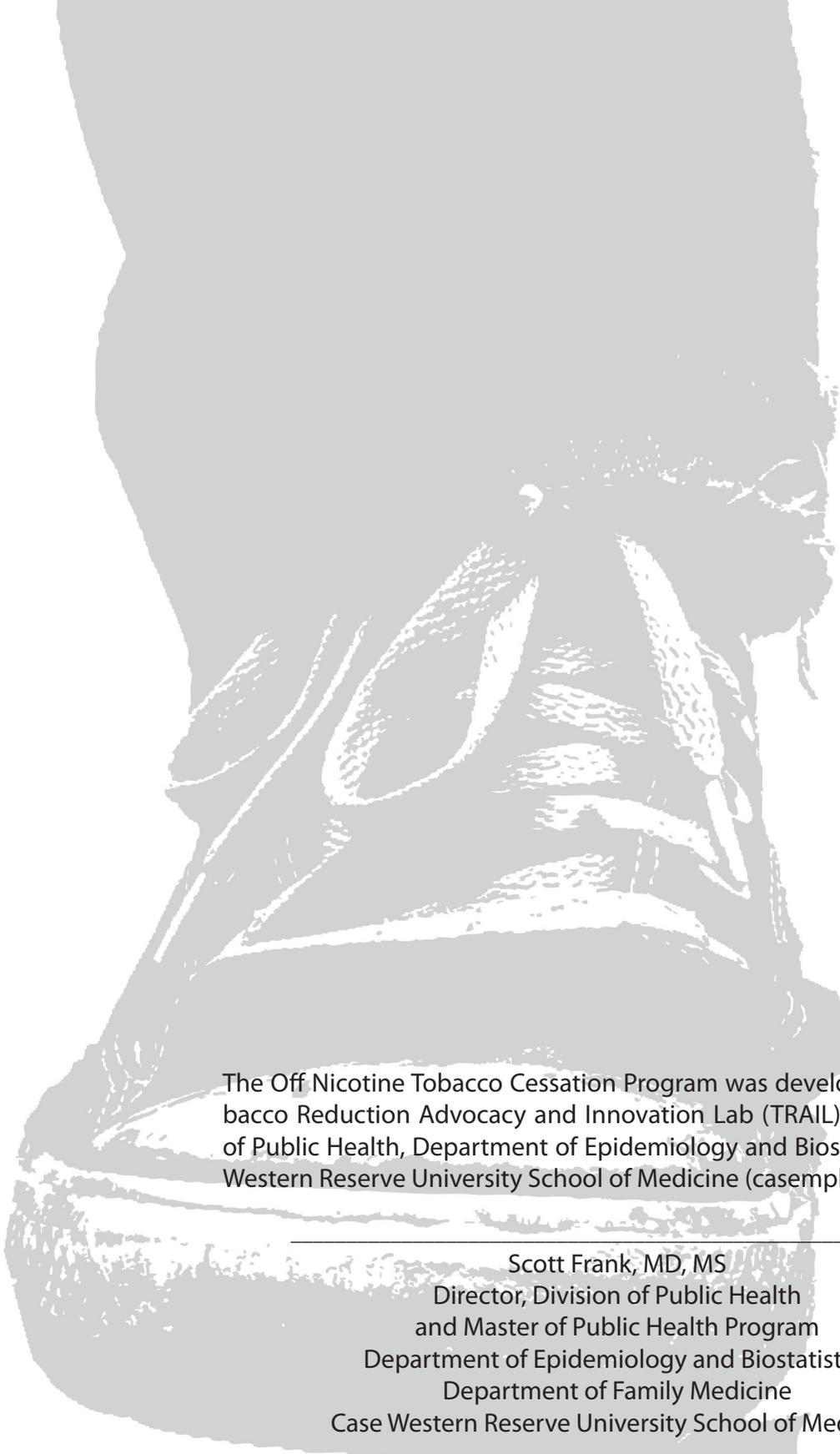


When you think about the possibility of quitting and never being able to smoke again, how often does that make you feel...					
Sad	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
On edge	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Nervous	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Frightened	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Miserable	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Happy	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Hopeless	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Anxious	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Fearful	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Panicked	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Pleased	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Helpless	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Like crying	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Like celebrating	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>
Worried	Never <input type="checkbox"/>	Rarely <input type="checkbox"/>	Sometimes <input type="checkbox"/>	Often <input type="checkbox"/>	Always <input type="checkbox"/>

How hard do you think it would be for you to get off and stay off tobacco?  
(Check only one)

- Easy
- Not too hard
- Somewhat difficult
- Very hard
- Extremely difficult
- The hardest thing I've ever done





The Off Nicotine Tobacco Cessation Program was developed by the Tobacco Reduction Advocacy and Innovation Lab (TRAIL) in the Division of Public Health, Department of Epidemiology and Biostatistics at Case Western Reserve University School of Medicine ([casemph.org](http://casemph.org)).

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