

YOUR GUIDE TO **Quitting Smoking** FOR GOOD

For **FREE**, individual smoking cessation counselling, contact a
Health Promotion Specialist at Concordia University Health Services

Get contact information [HERE](#)

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Quitting Tobacco for Good in a Nutshell

1. To quit using tobacco for good you need to recognize that you are **addicted to nicotine**. When you don't get it you experience **negative emotions**. You don't like feeling these negative emotions so you continue to smoke.
2. To effectively quit using tobacco for good, you need to develop an **attitude** where you **dedicate** and **commit** yourself to achieving a smoke-free life. Your mind has to be made up so that nothing will get in the way of achieving this most important goal!!! You need to see quitting as a gift you are giving yourself rather than a deprivation.
3. To quit using tobacco for good you need to **develop and implement effective, nicotine-free coping strategies** that you can use to manage the temporary, negative emotions that come when your brain stops getting nicotine.

Your Plan to Quitting Smoking For Good

If you have ever tried quitting smoking before you will attest to the fact that it can be a very difficult thing to do. As such, to quit smoking for good you need a plan. The information and exercises in this book are your plan. As with anything else worth having, achieving a tobacco-free life requires effort. Addictions are tough to break. Putting in the effort and energy is necessary to ensure success. Therefore, the most important feature of successfully breaking free from tobacco use is this:

You need to immerse yourself in the smoking cessation process!!

This means that:

- quitting smoking becomes the number one project in your life. Of course, you continue to fulfill your school and work responsibilities, but quitting smoking is always on your mind because it is the number one thing you can do to improve your health and life!!!
- you read through this entire booklet and do **all** the exercises.
- you think about quitting and the role of tobacco in your life any chance you get (e.g. on the bus, walking etc).
- you visualize your life as a non-smoker and think about how fantastic it will be to be free of tobacco!
- you read about smoking cessation whenever you can. You make time for it. Some quit smoking resources are provided below.
- you talk to people who have effectively quit smoking and ask them how they did it, what challenges they faced and what has kept them smoke-free. Also, ask them for any advice they would have that can help you in your process.

The information and exercises in this booklet that form your plan are divided into 3 main sections. They are:

- 1. Understand nicotine addiction.** Of the over 4,000 chemicals found in tobacco smoke, only one keeps you coming back: NICOTINE. Once you acknowledge that you are addicted to nicotine and understand how nicotine addiction happens, you will be in an excellent position to go smoke-free.
- 2. Cultivate an attitude of dedication and commitment to smoke-free living.** In essence, you need to see quitting smoking as a gift you are giving yourself rather than a deprivation. This is an extremely important point. If you don't adopt this attitude, your chances of successfully quitting will be severely compromised.
- 3. Identify, develop and implement coping strategies** to manage the temporary, negative emotions that come from nicotine withdrawal. There are hundreds of nicotine-free ways to cope with negative emotions. Discover them, build them, and use them.

Some Smoking Cessation Resources

The [Quitting Smoking](#) section of the Health Services website has information on smoking cessation as well as links to on-line resources as well as books and hot lines. They include:

I Quit Now: "Want to quit smoking? Maybe you're still hesitating. We have what you need to help you break free from tobacco on your own." Has telephone and text message support. From Tobacco-Free Quebec.

Break it Off: This campaign from Health Canada and the Canadian Cancer Society "helps young adults quit smoking and stay smoke-free."

On the Road to Quitting: You can download this booklet, from Health Canada.

Alan Carr's [Easy Way to Stop Smoking](#) is the world's best-selling self-help book to quit smoking. The Easy Way website offers [10 Best Tips to Help You Stop Smoking](#).

Nova's ["The Dope on Nicotine"](#) visually shows how nicotine affects the brain and leads to addiction.

The Plan

There are two main ways to proceed with this plan: cut down or quit “cold turkey” (without cutting down). The choice is yours. However, this booklet encourages you to use the cut down method for two main reasons. Firstly, by cutting down you will gradually decrease the amount of nicotine that reaches your brain in the course of a day. This lets your brain progressively adjust to nicotine withdrawal. Secondly, and more important, as you decrease the amount that you smoke, you will have the opportunity to put in place the coping strategies that you are developing. In essence, this gives you a chance to try these coping strategies out and to refine them before you are actually smoke-free. You will be able to discover what works and what doesn't, and to make changes so that these strategies will work once you are totally smoke-free!!

What follows is your quit smoking plan outlined week by week if you choose the cut down method. Check off the box next to the activity once it is complete. This will help you stay on track. If you choose the “cold turkey” method, set a quit date, complete all the activities in the booklet, and then apply all you have learned on your quit day and beyond.

Week 1:

Immerse yourself in the quit smoking process. Dedicate yourself to quitting. Read about it. Think about it. Talk about it. Visualize it. Do all the exercises in this booklet. See previous page for more information.

- Decide on a quit date.** We suggest that this date be 3 weeks from the day you begin the plan. It can be any day of the week. Use a calendar to clearly mark your quit date. We have provided a calendar template for you on the back page to plan your quit. Tell people about your quit date. Post your quit date on the fridge, your computer or on the bathroom mirror where you can see it everyday. As for which date to choose, you should do it at a time when you are in your regular rhythm of life. Your nicotine addiction creates a “nicotine filter” which will find numerous reasons why every choice for a date is a bad choice (“Can't do it now because it is exam time”, “Can't do it now because it is the beginning of the semester”, “Can't do it now because it's the holidays”, “Can't do it now because I just broke up with someone.”) There will never be a “perfect” time. The sooner the better.
- Determine a cut down plan.** If you choose to cut down, use the calendar on the back page to determine how many cigarettes you will smoke each day. For example, if you currently smoke 20 cigarettes a day and you will quit in 3 weeks, you will cut down by one a day from the beginning of the process until quit day. If you currently smoke 7 cigarettes a day you will cut down by one cigarette every 3 days. Write down on the calendar how many cigarettes you have available each day. You can smoke less than that amount, but never more. Don't save up cigarettes to transfer to other days.
- Cut down the number of cigarettes you smoke each day according to your calendar**
- Separate smoking from all your activities.** There is a strong association between smoking and some of your activities such as talking on the phone, driving, working on the computer etc. From the minute you begin this program, when you smoke you don't do anything else...you smoke while still (don't walk and smoke) and alone (don't smoke with anyone else or in front of the TV or computer). You will likely realize how boring smoking is, and how strong the associations are between your activities and smoking. (You might not even want a coffee if you can't have a cigarette with it.) Break those associations now!!! When quit day comes you will not have to struggle with the urge to smoke as you engage in those activities because you will have already broken the connection. Furthermore, you will re-discover the pleasures that tobacco has come to take the credit for. For example, you may discover that it is in fact the coffee you enjoy, not the cigarette.
- Read the entire section on nicotine addiction**
- Do exercise **Nc1**:** Nicotine Addiction and Me
- Do exercise **Att1**:** The Benefits of Going Smoke-free
- Do exercise **Att2**:** The Costs of Smoking: Money and Time
- Do exercise **Att3**:** How Using Tobacco Fits with My Values
- Do exercise **Att4**:** How Using Tobacco Fits with My Goals
- Read **Att5**:** Disputing the Myths About Smoking
- Begin exercise **Cope1**:** Monitoring my Tobacco Use (in center page)
- Read introduction to section 3:** Build Coping Strategies
- Read “A Few Words About Quit Smoking Aids”**
- Do exercise **Cope 2**:** Overcoming the Barriers to Becoming Smoke-free, Part 1: My Reasons to Quit/My Reasons to Continue
- Do exercise **Cope 3**:** My Strengths
- Do exercise **Cope 4**:** What Makes Me Happy
- Begin to list your coping strategies in exercise **Cope10**:** My List of Coping Strategies

Week 2:

- Continue immersing yourself in the quit smoking process.** Continue living your dedication to quitting. Read about it. Think about it. Talk about it. Visualize it. Do all the exercises in this booklet.
- Continue separating smoking from all your activities.** (See week 1). When you smoke, that is all you do. Smoke alone and still.
- Continue keeping track of all the cigarettes you smoke with exercise **Cope1**:** Monitoring My Tobacco Use
- Continue cutting down the number of cigarettes you smoke each day according to your calendar**
- Begin exercise **Cope5**:** Planning for Challenging Times
- Do exercise **Cope6**:** Overcoming the Barriers to Becoming Smoke-free, Part 2
- Do exercise **Cope7**:** What to Do With Extra Money and Extra Time
- Do exercise **Cope8**:** Identify Rewards
- Read **Cope9**:** Symptoms of Recovery and How to Manage Them
- Continue to list your coping strategies in exercise **Cope10**:** My List of Coping Strategies
- Begin to fill out your wallet card **Cope11**** (on center page).

Week 3:

- Continue immersing yourself in the quit smoking process.** Continue living your dedication to quitting. Read about it. Think about it. Talk about it. Visualize it. Do all the exercises in this booklet.
- Continue separating smoking from all your activities.** (See week 1). When you smoke, that is all you do. Smoke alone and still.
- Continue cutting down the number of cigarettes you smoke each day according to your calendar**
- Continue keeping track of all the cigarettes you smoke with exercise **Cope1****
- Continue exercise **Cope5**:** Planning for Challenging Times
- Continue to list your coping strategies in exercise **Cope10**:** My List of Coping Strategies
- Continue filling out your wallet card in exercise **Cope11****

Week 4 and beyond

As you begin week 4, you will be smoke-free. The task from now on is to remain smoke free.

- Monitor your progress.** Find a way to mark that you are on track. For example, you can get a calendar and place a star or other mark for each day you don't use tobacco. Alternatively, you can put the amount of money you have saved into a jar and watch it accumulate quickly. Be creative in finding a way to monitor.
- Review the benefits you have achieved.** From the minute you quit using tobacco you will begin to experience benefits. Think about how wonderful these are!! Some common early benefits include more energy, more time, more money, clearer and brighter skin, better breath, and you smell nicer. Think about the many more benefits that you will achieve as you remain smoke-free. You may experience some symptoms of withdrawal (see **Cope9**). Remind yourself that these are temporary and that there are many things you can do to overcome them.
- Celebrate your success.** Quitting smoking can be very difficult. Every day you remain smoke-free deserves some acknowledgement of the success. Reward yourself (review your rewards sheet: exercise **Cope8**).
- If you ever have a slip or relapse, read "In case of a Slip" at the end of the booklet to identify and put in place strategies to return to smoke-free living.**

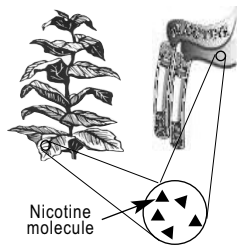
Understand Nicotine Addiction

Of the over 4,000 compounds in tobacco, only one is responsible for a person continuing to smoke: NICOTINE!!! If the nicotine in tobacco were to be removed, a smoker (nicotine addict) would lose the desire to smoke, just as a person who is living with alcoholism would lose the desire to drink beer if the alcohol were removed. The only reason you continue to smoke is because you are addicted to nicotine. So, how does this substance make a person come back to tobacco over and over again, despite a long list of potential consequences of continued use? Read on to find out.

Understand Nicotine Addiction

How Does Nicotine Addiction Happen

What follows is a scientific summary of nicotine addiction. If science is not your thing, skip to the bottom to read the information in the “Nicotine Addiction in Plain English” box.

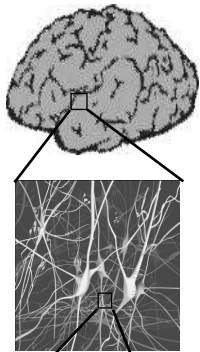


Tobacco leaves contain nicotine, and when they burn, the nicotine is released

Nicotine occurs naturally in tobacco leaves. When a person lights a cigarette, the tobacco leaves and other added compounds reach 900°C and gases and particles are released. The particles are seen as smoke, and the sum total of these particles is called tar. Over 4,000 compounds have been identified in the tar and gases released from burning tobacco. About 40 of these compounds are known to cause cancer. Nicotine itself does not cause cancer and is relatively harmless to health in the amounts found in cigarettes. However, it is the only compound that keeps a person coming back to tobacco.

Inhaled cigarette smoke contains nicotine that quickly reaches the brain via the lungs

When a person inhales, nicotine from the burning tobacco enters the lungs, is absorbed into the bloodstream, and is transported to the brain. The nicotine leaves the bloodstream and “bathes” the cells of the brain.

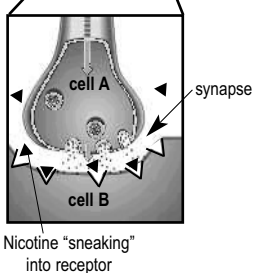


Brain cells communicate with each other through neurotransmitters and receptors

At this point, a brief review of how nerve cells communicate is needed to fully understand nicotine addiction. Nerve cells, such as those in the brain, do not actually touch each other. They are separated by a small space called a synapse. In order for a message (an electrical current) to be transmitted from nerve cell A to nerve cell B, neurotransmitters from cell A are released into the synapse and they bind to **specific** receptors on cell B. When enough receptors are filled, an electrical current begins in cell B that continues to the end of that cell where it meets cell C, and more neurotransmitters are released from cell B which bind to the receptors on cell C and the message continues.

Nicotine overpowers receptors in an area of the brain that is responsible for feelings of pleasure and reward

The nicotine molecule has a shape that fits perfectly into the receptors on nerve cells in the pleasure/reward center of the brain. These receptors are not meant to accept nicotine. When a person uses tobacco, a large number of nicotine molecules reach the brain, bind to these receptors and spark a message in the pleasure/reward center of the brain, where there wasn't one before. This stimulation of the pleasure center is felt by the tobacco user as pleasurable.



The body breaks down nicotine; levels in the blood and brain drop; and the brain becomes “unhappy”

The body recognizes nicotine as a foreign substance. The liver breaks down nicotine that is circulating in the blood into compounds that are eliminated in the urine. The moment a person puts out a cigarette, the level of nicotine in the blood (and the brain) begins to decrease. This results in a decrease in the stimulation of the pleasure/reward center of the brain and the person begins to experience negative emotions such as irritability, anxiety, and sadness. Of course, the smoker doesn't enjoy this negative state of mind, so as it builds s/he reaches for a cigarette, takes a few puffs and the pleasure center is stimulated again. These negative emotions are relieved for a short period, until nicotine levels drop again after the cigarette is put out. It is important to note that once this vicious cycle has begun, the smoker does not smoke to create pleasure; rather, s/he smokes to relieve negative emotions. **Smoking does not create a “high”; it temporarily removes a low!!!**



Nicotine Addiction in Plain English

Nicotine in tobacco smoke gets into your lungs and then your brain, where it stimulates the pleasure/reward center. After you have finished a cigarette, the amount of nicotine in the brain drops and you begin to experience negative emotions. When you get another “hit” of nicotine by having another cigarette, bad feelings disappear (momentarily) as the pleasure/reward center is stimulated again. But nicotine levels drop once more, negative emotions return and the cycle of smoking continues to relieve these emotions.

Understand Nicotine Addiction

How Addictive is Nicotine?

Dr. Jack E. Henningfield of the National Institute on Drug Abuse and Dr. Neal L. Benowitz of the University of California at San Francisco are respected experts in the field of addiction. They independently ranked six substances based on five problem areas (listed below). They were asked to rank the substances on a scale of 1 to 6, where 1 is the most serious and 6 is the least serious. As you can see from the tables below, they ranked nicotine as the most difficult to quit (dependence). Nicotine was rated more difficult to quit than heroin or cocaine.

The point of showing this is to demonstrate that quitting smoking can be difficult. However, millions of people quit every year. Quitting smoking can be much easier if you have a plan and the right attitude.

Withdrawal: Presence and severity of characteristic withdrawal symptoms.

Reinforcement: A measure of the substance's ability, in human and animal tests, to get users to take it again and again, and in preference to other substances.

Tolerance: How much of the substance is needed to satisfy increasing cravings for it, and the level of stable need that is eventually reached.

Dependence: How difficult it is for the user to quit, the relapse rate, the percentage of people who eventually become dependent, the rating users give their own need for the substance and the degree to which the substance will be used in the face of evidence that it causes harm.

Intoxication: Though not usually counted as a measure of addiction in itself, the level of intoxication is associated with addiction and increases the personal and social damage a substance may do.

Henningfield ratings

Substance	Withdrawal	Reinforcement	Tolerance	Dependence	Intoxication
Nicotine	3	4	2	1	5
Heroin	2	2	1	2	2
Cocaine	4	1	4	3	3
Alcohol	1	3	3	4	1
Caffeine	5	6	5	5	6
Marijuana	6	5	6	6	4

Benowitz ratings

Substance	Withdrawal	Reinforcement	Tolerance	Dependence	Intoxication
Nicotine	3*	4	4	1	6
Heroin	2	2	2	2	2
Cocaine	3*	1	1	3	3
Alcohol	1	3	3	4	1
Caffeine	4	5	5	5	5
Marijuana	5	6	6	6	4

Adapted from Philip J. Hilts in the New York Times, August 2 1994.

Also, from the experience of the Haight Ashbury Drug Clinic in San Francisco, professionals listed drugs in the order of speed with which a person progresses from experimentation and social use to habituation, abuse and addiction. Their list is as follows, with the substance at the top of the list representing the most "addictive":

1. Nicotine
2. "Crack" cocaine (smoking or IV)
3. Heroin (smoking or IV)
4. Methamphetamine (IV)
5. Cocaine (snorting)
6. Amphetamine (oral)
7. Sedative-hypnotics
8. Marijuana
9. Caffeine
10. PCP
11. Ecstasy (MDMA)
12. LSD
13. Mescaline/peyote



Understand Nicotine Addiction

NIC 1: Nicotine Addiction and Me

One of the features of nicotine addiction is that the brain sets up a “nicotine filter” where any information that supports continuing to smoke gets attention (“My grandmother smoked her whole life and died in her sleep at a ripe old age”, “You could get hit by a bus tomorrow”, “Smoking helps me manage stress” etc.) and any information that supports quitting is ignored (“Half the people who smoke regularly will die of smoking-related causes”, “Tobacco use is the number one preventable cause of death in Canada” etc.). If your “nicotine filter” is up you might be thinking “I am not addicted to nicotine”, “It’s just a bad habit” or “I can quit anytime I want to”. Take the quiz below to see if you exhibit some of the signs of nicotine addiction. A “yes” answer indicates addictive behaviour.

Yes No

- I have smoked in places where it is forbidden to smoke.
- If I am in a bar/restaurant with others, I will leave them to go outside to smoke.
- I feel nervous or anxious if I run out of cigarettes.
- I make sure to always have enough cigarettes so that I won’t run out.
- I have tried to quit smoking in the past without success.
- If I don’t smoke for a while, I get irritated, nervous or anxious.
- I have lied to people about my smoking.
- I hide my smoking from people.
- I have avoided going to places where I knew I wouldn’t be able to smoke.
- I get irritated by people who talk to me about my smoking or who encourage me to quit.
- I have asked a complete stranger for a cigarette.

Yes No

- My smoking has a pattern (e.g. I smoke as soon as I finish a meal, or I smoke on a work break) and if for any reason I can’t smoke at those usual times I get nervous/irritable/anxious.
- I get up in the morning and have a cigarette right away.
- I have done without certain things so that I would have enough money to buy cigarettes.
- I have smoked even though I was sick and couldn’t go to school or work.
- I have smoked cigarette butts (either mine or another person’s).
- I have done something uncomfortable in order to smoke, such as go outside in very cold weather.
- I have smoked 2 (or even 3 cigarettes) in a row before going somewhere where I knew I wouldn’t be able to smoke (or right after not being able to smoke for some time).

The Take Home Message

Nicotine stimulates the “pleasure/reward” center of the brain. When the brain of a smoker is deprived of nicotine, s/he experiences negative emotions. It is these recurring negative emotions that make a person desire to light up again, and again, and again, to get rid of the bad feelings.

The Good News

The urge to smoke will go away whether you smoke or you don’t!!! As the brain continues to be deprived of nicotine, it will stop “asking” for this drug. **The negative emotions that occur when you quit smoking will go away.** This cycle can be broken, but you need to develop and use other effective strategies to deal with negative emotions as well as adopt an attitude where nothing will stop you from putting those strategies in place.

Build the Right Attitude

Nicotine is a highly addictive substance. As such, in order to effectively quit using tobacco you need to approach it with a plan and **immerse yourself in the smoking cessation process**. An extremely important part of that plan is to cultivate an attitude of **dedication** and **commitment** to smoke-free living. Many people believe that motivation and willpower are what are needed to become a non-smoker. However, this is misleading. Both motivation and willpower can come and go: they will be with you when things are going well, and they will usually disappear when times are tough. What will help you be successful at quitting forever is to cultivate an attitude that will take you through the tough times. This is where dedication and commitment come in. When you are dedicated and committed to a goal there is nothing that can stand in your way of reaching it. The exercises in this section of the workbook all have the objective of helping you develop dedication and commitment to smoke-free living. **You need to see quitting smoking as a gift you are giving yourself and not a deprivation**. Again, it is important to repeat that unless you have made up your mind that quitting is the most important thing that you can do for your health and your life, your efforts to go smoke-free will likely be short lived, if going smoke-free happens at all.

Build the Right Attitude

ATT 1: The Benefits of Going Smoke-free

Too often, those trying to help people to quit smoking stress the bad things that will happen if they continue to smoke. Many smokers ignore this information, saying that they know it all. We believe that focusing on the positives of quitting can help you build that dedication and commitment to smoke-free living. Just look at the wonderful things that are waiting for you in your smoke-free life. On the next page review the benefits of going smoke-free. Check off any of the benefits that you would like to experience. Don't be limited to the ones we have included. Go even further and add some of your own personal benefits at the end.

Build the Right Attitude

ATT 2: The Cost of Smoking: Money and Time

Most tobacco users are unaware of the amount of money they spend on tobacco each year as well as the amount of time they spend smoking each year. Take a few minutes to calculate how much of these two resources you commit to your tobacco use. If you buy tobacco and roll your own or buy cigarettes illegally in bulk (e.g. ziplock bags) then the formula below will not work. You can still calculate how much you spend by figuring out how frequently you buy tobacco and for what price.



How Much Money I Spend on Tobacco Each Year

- A. Determine how many cigarettes you smoke each day on average:
_____ **cigarettes per day**
- B. Multiply A by 365 to identify how many cigarettes you smoke each year: _____ **cigarettes each year**
- C. Divide B by the number of cigarettes in the packs that you buy (either 20 or 25 cigarettes per pack) _____ **packs per year**
- D. **If you buy cigarettes by the pack**, Multiply C by the price of a pack of cigarettes (price of packs of cigarettes I buy= \$ _____)

\$ _____ spent on cigarettes each year

If you buy cigarettes by the carton, divide C by the number of packs in a carton (usually 8 or 10) to determine the number of cartons of cigarettes you smoke each year: _____ cartons. Then multiply the number of cartons per year by the price of a carton = \$ _____ **spent on cigarettes each year**



How Much Time I Spend Smoking Each Year

- A. Determine how many cigarettes you smoke each day, on average: _____ **cigarettes per day**
- B. Multiply A by the number of minutes it takes you to smoke a cigarette (usually between 5 and 10 minutes)
_____ **minutes it takes me to smoke a cigarette x (A) _____**
= _____ minutes spent smoking each day
- C. Multiply B by 365 to identify the number of minutes you spend smoking each year
_____ **minutes spent smoking each year**
- D. Divide C by 60 to determine the number of hours you spend smoking each year
_____ **hours spent smoking each year**
- E. Divide D by 24 to determine the number of days you spend smoking each year

_____ days spent smoking each year

The Benefits of Going Smoke-free



Listed below are some of the many benefits of going smoke-free. Review this list and check off any of the benefits that you would like to achieve. Add your own benefits at the end.

Proven Health Benefits

By quitting smoking a person will **REDUCE** his/her risk of:

Cardiovascular diseases including:

- Abdominal aortic aneurysm (weak spots in heart vessels)
- Atherosclerosis (hardening of the arteries)
- Stroke (which can lead to death or paralysis)
- Heart attack
- Peripheral vascular disease (circulatory problems)
- High blood pressure

Cancer of the:

- Bladder
- Esophagus
- Kidney
- Larynx
- Blood (leukemia)
- Lung
- Mouth
- Pancreas
- Stomach

Respiratory diseases including:

- Pneumonia
- Chronic bronchitis
- Emphysema/COPD
- Influenza (the "flu")
- The common cold

Other health benefits include **REDUCED** risk of:

- High cholesterol (LDL)
- Headaches
- Migraines
- Stomach ulcers
- Chronic bowel disease (Crohn's Disease)
- Tooth decay (cavities)
- Gum disease
- Osteoporosis
- Sleep problems (trouble falling asleep and/or frequent waking)
- Cataracts
- Age-related macular degeneration (eye disease that leads to blindness)
- Thyroid disease (Grave's Disease)
- Hip fractures
- Low bone density

Female smokers will REDUCE their risk of:

- Cancer of the cervix (womb)
- Menstrual problems
- Fertility problems
- Spontaneous abortion (miscarriage)
- A low birth weight baby
- Pregnancy complications

Male smokers will REDUCE their risk of:

- Erectile dysfunction (impotence)
- Fertility problems (problems with sperm)

Other Benefits Include:

- More time for yourself
- More money
- More energy/vitality
- Increased life expectancy
- Better quality of life
- Increased sense of control/more freedom
- Feel more socially acceptable
- Reduced embarrassment
- House, hair and clothes will smell better
- Decreased risk of diseases of household members from second-hand smoke
- Decreased guilt of harming family
- Be more considerate to non-smokers, children and animals
- Build more, and effective, coping skills
- Become a good role model
- Increased sense of self-esteem
- Feel proud of yourself
- Others feel proud of you
- Increased confidence in setting and achieving goals
- Decreased dry mouth
- Decreased sore throat
- Decreased coughing
- Decreased yellow teeth/fingers/hair
- Skin won't age as quickly/better skin
- Increased sense of taste
- Increased sense of smell
- Better and more sex
- Be calmer/more focused
- Get a new identity
- Don't support tobacco companies anymore
- Decreased negative impact on the environment*
- Freedom from nicotine urges and cravings
- Decrease nagging feeling of always wanting to quit
- Decrease chance of a house fire**

The benefits are just too great to pass up!!!

Other benefits I may experience from quitting that are not listed here:

- _____
- _____
- _____
- _____
- _____
- _____
- _____

* Millions of acres of forests have been cleared to plant tobacco. Millions of trees have been cut down to provide wood to cure tobacco. Pesticides, fungicides and fertilizers are used to grow tobacco. Forty percent of the garbage in the streets and on the world's shorelines is tobacco related. Birds and fish die from accidentally eating tobacco butts.....and the list goes on.

** Cigarettes are the number one known cause of fire-related fatalities in Canada. Cigarettes are the leading cause of residential fires in Canada. Fires started by cigarettes tend to result in more deaths and more property damage than fires started by other sources.

ATT 3: How Using Tobacco Fits With My Values

An addiction can make a person behave in ways that are inconsistent with their values. (For example, a student eats organic food as much as possible because she believes it is healthier and has less chemicals and pesticides, yet she uses tobacco, which is a crop that uses toxic pesticides that are not allowed to be used in the food industry) Examining your values and identifying how tobacco fits or doesn't fit with them helps shift your attitude to one that is favourable to smoke-free living. A value is something that is important to you...something that has worth. In the spaces below, list some of the values that you hold and that you live your life by. Then identify how smoking fits with the value as well as how quitting smoking fits with the value. If you have a hard time identifying your values there is a list at the end of this exercise that can stimulate your thoughts. One example is provided to get you started.



Example. What I value: My health

How using tobacco **fits with** this value: *I can't think of a way that smoking fits with being healthy.*

How quitting tobacco fits with this value: *Clearly, when I quit smoking my health will improve. I will reduce my risk of a variety of illnesses including some cancers, respiratory diseases, cardiovascular diseases and more.*

1. **What I value:** _____

How using tobacco **fits with** this value:

How quitting tobacco **fits with** this value:

2. **What I value:** _____

How using tobacco **fits with** this value:

How quitting tobacco **fits with** this value:

3. **What I value:** _____

How using tobacco **fits with** this value:

How quitting tobacco **fits with** this value:

4. **What I value:** _____

How using tobacco **fits with** this value:

How quitting tobacco **fits with** this value:

5. **What I value:** _____

How using tobacco **fits with** this value:

How quitting tobacco **fits with** this value:

6. **What I value:** _____

How using tobacco **fits with** this value:

How quitting tobacco **fits with** this value:

7. **What I value:** _____

How using tobacco **fits with** this value:

How quitting tobacco **fits with** this value:

Some Values

Accomplishment,	Challenge	Creativity	Faith, spirituality	Happiness,	Openness	Resourcefulness
Success	Change	Decisiveness	Fame	contentment, joy,	Order	Respect
Adaptability	Charity, giving,	Dependability	Family	delight	Organization	Safety, security
Adventure	generosity	Devotion	Fashion	Harmony	Peace	Sharing
Amusement,	Cleanliness	Dignity	Financial security	Honesty	Passion	Simplicity
entertainment,	Collaboration,	Discipline	Freedom, liberty	Honor	Pleasure	Skill
recreation	teamwork	Discovery	Friendship	Independence,	Positive attitude,	Solitude
Assertiveness	Commitment	Economy	Frugality	self-reliance	optimism	Stability
Balance	Communication	Education,	Fun	Integrity	Power	Strength
Beauty,	Community	learning,	Goodness	Intimacy	Prestige, affluence	Tradition
Attractiveness	Competence	knowledge	Gratitude	Justice	Problem Solving	Trust
Belonging	Competition	Efficiency	Growth,	Leadership	Professionalism	Truth
Bravery, courage	Consciousness	Energy	improvement,	Logic, reason	Progress	Variety
Career	Consistency	Excellence	development	Love, romance	Prosperity, wealth,	Wisdom
Calmness, serenity,	Control	Expertise	Hard work	Loyalty	money	
tranquility	Cooperation	Fairness, equality	Health, fitness	Maturity	Relaxation, rest	

ATT 4: How Using Tobacco Fits With My Goals

Many of those who use tobacco are unaware of how it can interfere with reaching life goals, such as financial security or having a family. Below, list some of the goals you have for yourself and seriously think about how continuing to smoke will help you achieve those goals. Also, think about how quitting smoking will help you to better achieve these goals.



Example: One of the goals I have in life is to: *Be financially secure*

How does using tobacco contribute to achieving this goal? *I can't see a way that spending thousands of dollars a year on tobacco can contribute to my financial security.*

How does stopping to use tobacco contribute to achieving this goal? *I can put the money I would have spent on tobacco into a compounded interest savings account, which will improve my financial situation. On average, people who use tobacco have less net worth, less savings, and make less money. Just looking at the statistics, I would prefer to be in the category of non-smokers who, on average, make more money and have more savings. Also, many employers are reluctant to hire a person who smokes, as smokers take more days off from work, take more breaks and cost the company more in health insurance. By becoming a non-smoker, this won't be a barrier for me in seeking a good job.*

1. One goal I have in life is to:

How does using tobacco contribute to achieving this goal?

How does quitting tobacco contribute to achieving this goal?

2. One goal I have in life is to:

How does using tobacco contribute to achieving this goal?

How does quitting tobacco contribute to achieving this goal?

3. One goal I have in life is to:

How does using tobacco contribute to achieving this goal?

How does quitting tobacco contribute to achieving this goal?

4. One goal I have in life is to:

How does using tobacco contribute to achieving this goal?

How does quitting tobacco contribute to achieving this goal?

5. One goal I have in life is to:

How does using tobacco contribute to achieving this goal?

How does quitting tobacco contribute to achieving this goal?

6. One goal I have in life is to:

How does using tobacco contribute to achieving this goal?

How does quitting tobacco contribute to achieving this goal?

7. One goal I have in life is to:

How does using tobacco contribute to achieving this goal?

How does quitting tobacco contribute to achieving this goal?

ATT 5: Disputing the Myths About Smoking

Nicotine is addictive. As such, the truth about the effects of tobacco as well as accurate information about quitting are often overshadowed by myths. These myths are often propagated by the tobacco industry through advertising, marketing, product placement and other tactics. A smoker may use these myths to justify continuing to smoke. In order to effectively quit smoking, a person needs to break down their “**nicotine filter**” and critically examine these myths. Here are a few common myths about tobacco and the reasons why they are a myth.

The consequences of continuing to smoke won't happen to me.

The pleasure/reward center of the brain of a smoker enjoys being stimulated by nicotine. Any attempt to stop giving nicotine to the brain will be blocked. One way this happens is that a “**nicotine filter**” is created, where the brain entertains only information that supports continued smoking, and ignores (or rationalizes away) information that supports the quit. For many smokers, this rationalization takes the form of “These bad things won't happen to me” or “I'm different”. The truth is that the toxins in tobacco smoke are not selective. Half of regular tobacco users will die of smoking related causes. There is no way to predict who will die and who won't. Also, the vast majority of regular tobacco users will experience negative consequences (including disability, illness and decreased quality of life) related to tobacco use. It is not reasonable to believe that one person is not vulnerable to these consequences while others are.

Smoking helps reduce stress.

Smoking does not reduce stress. In fact, it causes stress. The brain of a smoker is addicted to nicotine, and when nicotine levels in the brain drop (which begins as soon as a smoker puts out a cigarette) the brain starts “demanding” more. This is experienced by the smoker as irritability and stress. In essence, not smoking creates stress. Of course, as soon as the smoker takes a puff, the brain gets nicotine and stops “asking” for it. This is interpreted by the smoker as stress relief. Also, stress is a stimulating experience. Blood pressure, muscle tension, heart rate and respiration increase when a person experiences stress. Tobacco also stimulates the body by increasing blood pressure and heart rate; therefore, it doesn't relieve stress. Finally, deep breathing is an effective short-term, relaxation strategy that can be used to manage stress. Every time a smoker takes a “drag” they breathe deeply and this may be another reason why a person thinks that it relieves stress. The truth is that nicotine does not create a “high”, it temporarily removes a low!

Sure, smoking is unhealthy, but a lot of other things are just as bad for you.

Tobacco use is responsible for 45,000 Canadian deaths each year, and many, many more suffer from terrible health problems because of it. Smoking is far, far worse than other health hazards. As one researcher put it “cigarette smoking remains the number one preventable cause of death in Canada and its impact on the health of Canadians continues to be an unacceptable burden.” Half of the people who smoke will die of smoking related causes. Not very good odds!! Sure, you may be “hit by a bus” any day, as they say, but you usually look both ways before you cross the street. You don't intentionally put yourself in harm's way. Choosing to smoke and choosing not to quit is putting yourself in harm's way.

I'll gain weight if I quit.

Research indicates that most people do not gain weight when they quit smoking. Those who do gain weight usually gain less than 3 kilograms. Most people who gain weight after quitting will lose it. Research shows that, on average, people who smoke gain weight as they age. Research also confirms that there is no difference in the average weight of ex-smokers compared to smokers, therefore, quitting smoking is not associated with significant weight gain. Also, the coping strategies that you build to quit smoking are the exact same ones you can use to manage weight. Many people find that when they quit smoking they also adopt other health-enhancing behaviors such as better nutrition and increased physical activity, both of which contribute to achieving a healthy weight.

I'm young. I'll quit in the next few years.

The vast majority of people who smoke started before the age of 20. Most young people who smoke daily don't expect to continue smoking, but most are still smoking five years later and beyond. Being young does not make a person immune to becoming addicted. Nicotine is a very addictive substance. Don't get caught up in the belief that you will be able to quit whenever you want. Now is the time to stop.

Smoking looks sexy.

Or at least, that's what the tobacco industry would like you to think. Smoking causes deep wrinkles and sagging skin (not very sexy). Yellow teeth and skin, gum disease and tooth loss are some of the effects of smoking (not very sexy). The smell of tobacco on a person is distasteful to most people (not very sexy). And, as non-smokers can tell you, kissing someone who smokes is not tasty, let alone sexy. Men who smoke are at a greater risk of erectile dysfunction. In both men and women, those who smoke have sex less often and rate sex as less enjoyable. Studies reveal that smokers are rated as less attractive than non-smokers. Research also indicates that both women and men find confidence, intelligence, sense of humour, cleanliness and a healthy body to be the qualities they find most attractive in a partner. Smoking is not consistent with most of these qualities.

One cigarette won't hurt.

There is a saying in the smoking cessation world that states “You're a puff away from a pack-a-day”. Many people who quit smoking hope for a day when they can have “just one”. This is not an option for a person who is struggling with an addiction. Would you suggest that it is OK for a recovering heroin addict to do just a little bit of heroin? Or what about a recovering alcoholic to have just one drink? Of course not. Having “just one” stimulates the nicotine receptors in the brain, and the addiction can take hold again. A person may also feel guilty or shameful after “breaking down”, and this contributes to a negative emotional state of mind that can lead to continued use. The research on social smokers demonstrates that many don't remain social smokers in the long-term. Occasional smokers either become regular smokers or stop using tobacco altogether.

I smoke light cigarettes/ I only smoke a little, so it's not so bad.

"Light" cigarettes contain the same harmful compounds as regular cigarettes, including lead, ammonia, benzene, DDT, butane gas, carbon monoxide, arsenic, and polonium 210. People who smoke light cigarettes try to obtain more nicotine by inhaling deeper or smoking more. The result: smokers of light cigarettes tend to have lung cancer lower in the lungs. There is no such thing as a safe cigarette. Also, smoking just a little is related to significant negative health effects. Research reveals that even "occasional" (less-than-daily) smoking, smoking only a few cigarettes per day, or smoking "without inhaling" can increase a person's risk of heart disease and shorten their life. Another problem with smoking "just a little" is that most people can't do it for long. Soon, they find themselves smoking every day, several times a day; and the more they smoke, the more they damage their health.

The best way to quit is "cold turkey".

Again, smoking is an addiction. Effectively quitting requires a plan, which includes building and rehearsing skills to cope with negative emotions. Your attitude towards smoking is an important factor in quitting. If you see quitting as a deprivation you will likely not remain smoke-free. You will probably "white-knuckle" your way through the urges to smoke. You can't keep doing that forever: eventually you will be worn down. On the other hand, if you see quitting as the best gift you can give yourself, quitting and remaining smoke-free will be easier. Some people are successful at quitting cold turkey. These people have usually given a lot of thought to how tobacco fits with their values and beliefs and have decided that there is no role for tobacco in their life. The best way to quit is to understand nicotine addiction, to adopt a positive attitude to smoke-free living and to build skills to manage the negative emotions created by nicotine withdrawal.

It's easy to quit smoking.

There are many reasons why individuals smoke. Even though many know the effects that smoking can have on their health, this doesn't discourage them or make it any easier for them to stop. This is because they are addicted to nicotine. When experts in the field of addiction consider physiological and psychological factors, nicotine addiction is rated stronger than heroin, cocaine, and all the other substances of abuse. Cigarette manufacturers have spent a tremendous amount of money and time to study tobacco, and they have modified their product to make it more addictive. It's good business for them when people become addicted. They work hard to get people smoking and keep them smoking. Quitting requires a focused effort. Although it can be difficult to quit smoking, quitting can be easier by approaching it with a plan and a positive attitude.

I enjoy smoking.

A person addicted to nicotine believes that they enjoy smoking; just like a person addicted to alcohol believes they enjoy alcohol, a person addicted to crack believes they enjoy crack, and a person addicted to heroin believes they enjoy heroin. This is the nature of an addiction. It's not that a person enjoys smoking, rather they don't feel good when they are not smoking. Smoking becomes such a significant part of an individual's lifestyle that they continue to smoke, not because they enjoy it, but because they feel miserable if they don't.

Smoking is cool.

Many young people start smoking because they believe it makes them look cool and more mature, and because their friends smoke. In fact smoking does the opposite. It causes premature aging by drying out the skin and producing wrinkles. Other effects of tobacco use are smelly clothes, smelly hair and breath, and yellow-stained teeth. None of these is perceived as cool by the vast majority of people. There used to be a time when many people thought that smoking was cool. This attitude was promoted by the tobacco industry. This is no longer true. The vast majority of people see tobacco use in a negative light, including people who use tobacco.

My smoking doesn't affect anyone else.

It's a free country. If a person wants to smoke, what right does anyone else have to stop them? This is a valid point, and if an individual wants to smoke it is up to them. However, smokers are affecting other people's health by subjecting others to second-hand smoke, which has been linked to a variety of illnesses in non-smokers including lung cancer. Furthermore, much of the tobacco consumed in North America and Europe is farmed in countries where child labor is common. Children turn to picking tobacco to add to the family income and as a result they don't go to school to receive an education. Therefore, tobacco consumption in North America affects people as far away as Africa and Asia. Forests are being cut down to make fields to grow tobacco and to get wood to process tobacco. This has a negative effect on the environment, including promoting global warming. Animals, such as birds, accidentally eat cigarette butts and die. It has been estimated that up to 40% of garbage on city streets and on the shorelines of the world is tobacco related. These are some of the many reasons indicating how using tobacco affects others and the planet.

Only old people die from smoking related diseases.

Although some people die as young as late 20's or early 30's, it is true that most of the diseases suffered by smokers occur after the age of 50. These smoking-related illnesses can be long-term, miserable, debilitating and fatal. On the other hand, many individuals suffer from illnesses long before this age, which include gangrene, ulcers and respiratory diseases. The problem is, the earlier an individual starts to smoke and the longer they smoke, the more likely they are to suffer from a smoking-related disease. Also, smokers suffer more from a wide variety of negative health effects of smoking, including an increased risk of a cold, the flu, pneumonia and more. In general, smokers at all ages have poorer health than their non-smoking (or ex-smoking) counterparts.

I'll quit when I'm pregnant.

It may be harder to get pregnant if you smoke as smoking is linked to infertility. If you smoke during pregnancy you have an increased chance of miscarriage and complications during pregnancy. Numerous research studies indicate that the development of the fetus is negatively affected by the compounds in tobacco. Also, there is a higher risk of many problems for the child throughout their life if the mother smokes during pregnancy. It might take you a couple of attempts to actually stop smoking, so your chances of success with quitting are better the earlier you start the quitting process. Many women continue to smoke despite making a promise that they wouldn't smoke should they become pregnant.

COPE1: Monitoring My Tobacco Use

One important aspect of quitting smoking is to identify times, moods, or situations where the urge to smoke is greatest, as these could present a challenge to quitting. Use the workspaces below to keep track of all the cigarettes that you smoke each day. Enter the time of day, need (1=don't need cigarette, 10=very high need), mood and any comments.



Keep this sheet and a pen/pencil with your pack of cigarettes so you don't forget. (You can cut out one panel for each day.) Enter the information as soon as you finish the cigarette. If you need more sheets you can photocopy these.

Date:		Need (1-10)	Mood/Emotions (happy, sad, lonely, stressed, bored, etc.)	Comments (break from work, out with friends, home alone etc.)
No.	Time			
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12				

Date:		Need (1-10)	Mood/Emotions (happy, sad, lonely, stressed, bored, etc.)	Comments (break from work, out with friends, home alone etc.)
No.	Time			
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Date:		Need (1-10)	Mood/Emotions (happy, sad, lonely, stressed, bored, etc.)	Comments (break from work, out with friends, home alone etc.)
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Date:		Need (1-10)	Mood/Emotions (happy, sad, lonely, stressed, bored, etc.)	Comments (break from work, out with friends, home alone etc.)
No.	Time			
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Date:		Need (1-10)	Mood/Emotions (happy, sad, lonely, stressed, bored, etc.)	Comments (break from work, out with friends, home alone etc.)
No.	Time			
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Date:		Need (1-10)	Mood/Emotions (happy, sad, lonely, stressed, bored, etc.)	Comments (break from work, out with friends, home alone etc.)
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Date:		Need (1-10)	Mood/Emotions (happy, sad, lonely, stressed, bored, etc.)	Comments (break from work, out with friends, home alone etc.)
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Date:		Need (1-10)	Mood/Emotions (happy, sad, lonely, stressed, bored, etc.)	Comments (break from work, out with friends, home alone etc.)
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Build Coping Strategies

COPE11: Wallet Card

This is your wallet card. Cut it out, fill it out, fold it in half and keep it with you at all times. After completing exercise **COPE2**, review your “Reasons to Quit” and add your top 5 reasons here. Also, on the other side, fill in 10 personal strategies to remain smoke-free that you have identified from the rest of the coping exercises in this booklet. (Don’t repeat the 5 strategies that are already included.) You will have 15 coping strategies at your fingertips to get you through the temporary urges to smoke. When you have the urge to smoke and can’t think about what you can do instead, pull out your wallet card, think about the main reasons why you want to quit and seriously put in place the strategies that you have identified and have developed.



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3.
2.
1.

My Top 5 Reasons To Be Smoke-free

Strategies for Remaining Smoke-free

1. **REMEMBER WHAT IS HAPPENING.** The receptors in your brain are making you uncomfortable so that you will smoke in order to give them nicotine. Just say NO WAY. You are in control!!!!
2. **JUST WAIT.** Cravings last a few minutes at most. The craving will go away if you smoke or if you don't...so why smoke????
3. **BREATHE DEEPLY.** Deep breathing relaxes. Pay attention to the cleanliness of the inhaled air. Imagine all tensions leaving your body as you exhale.
4. **DO SOMETHING DIFFERENT.** Go for a walk. Call a friend you haven't spoken with in a long time. Put on some music (and dance). Cook a healthy meal. Write a letter. Do a hobby. Drink a glass of water. Just do something else!!! Distract yourself.
5. **REMEMBER WHY THIS IS IMPORTANT.** Review top 5 reasons.

Date:		Need (1-10)	Mood/Emotions (happy, sad, lonely, stressed, bored, etc.)	Comments (break from work, out with friends, home alone etc.)
No.	Time			
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Date:		Need (1-10)	Mood/Emotions (happy, sad, lonely, stressed, bored, etc.)	Comments (break from work, out with friends, home alone etc.)
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Personal Strategies for Smoke-free Living

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Build Coping Strategies

The only reason you continue to smoke, despite wishing to quit, is because you are addicted to nicotine. When you stop using tobacco, your brain stops getting nicotine and this usually results in the experience of negative emotions. **It is extremely important to note that these negative emotions will go away whether you smoke or you don't.** This urge is short-lived, only lasting a minute or two. As time goes by without smoking, these negative emotions will occur less frequently and will be less strong, until eventually they will go away altogether.

The amount of time it takes for the urge to disappear varies from person to person. Within three (3) days of quitting smoking, all the nicotine in your system will be eliminated. However, the receptors that nicotine stimulates in the pleasure/reward area of your brain still have a "memory" and will "ask" for more nicotine, which you will experience as irritability, anxiety, nervousness, craving for a cigarette etc. This means that you will likely have the urge to smoke even after the nicotine is gone from your body. Those who adopt a positive attitude to smoke-free living (i.e. see quitting as a gift rather than a deprivation) will generally experience much weaker urges that will disappear sooner than someone who hasn't adopted a positive attitude to smoke-free living.

The goal of this section of the quit smoking plan is to help you build dozens upon dozens of non-nicotine coping strategies to manage the negative emotions that you will likely experience when you quit. **When you feel bad and have the urge to smoke, turn to one of these strategies rather than turn to tobacco.** Not only are these coping strategies effective for helping you quit smoking, they are also effective in many other situations that require you to cope with negative emotions. This part of the plan is never finished: you can always keep adding to your list of coping strategies as you think of new ones.

There are two main types of coping strategies: cognitive and behavioural. Cognitive strategies are those in which you change the way you think about a situation, such as viewing quitting as a gift rather than a deprivation, remembering that the urge is temporary and will go away, and reminding yourself that smoking creates stress rather than helps manage it. Behavioral strategies are those where you actually do something to manage the negative emotions. Behavioral strategies include exercising, drinking a glass of water, deep breathing, singing, doing a hobby etc.

As you do each exercise in the coping section, note the coping strategies that you feel will be most effective and write them on "My List of Coping Strategies" (exercise **COPE10**). Review the list and transfer some of your best ideas to your wallet card (exercise **COPE11**), which will be your quick reference for coping strategies any time you need it.

A Few Words About Quit Smoking Aids

You may be aware that several products are available to help you during the quit process. They are described below. It is your choice as to whether or not you wish to use these products. As you make your decision, consider these points:

- The manufacturers of these products claim that they will double your chances of quitting. However, independent research on the effectiveness of these products doesn't show an advantage to using them.
- As with all medications, there are side effects associated with these substances. They range from mild irritation of the skin with the patch to an increased risk for suicide with the drug Zyban.
- With the gum and the patch, your brain will still be getting nicotine (but you won't get the thousands of other chemicals from the cigarette). This means that you are still getting the substance you are addicted to. (We feel that this is similar to giving a person struggling with alcoholism alcohol to break an addiction to alcohol.)
- These products may give you a false sense of security. If you think the product is doing all the work, you might not build the coping strategies or the right attitude that are necessary to effectively quit. If you decide to use any of these products you must still do all the work that is outlined in this booklet (or any other form of counselling). Counselling alone is more effective than using these aids alone. Counselling combined with quit smoking aids has been found to be no more effective than counselling alone.
- None of these products is meant to be taken over a long period of time. You will eventually have to stop using them, and you may feel the negative emotions of quitting all over again when you stop with the aids.
- The vast majority of those who have effectively quit smoking have done so without the help of any of these products.

There are 2 main types of products available (and others are being developed):

Nicotine replacement: Nicotine replacement comes in the form of gum, patch, inhaler, lozenge, etc. that contain nicotine.

Nicotine gets absorbed through the skin or tissues in the mouth and travels in the blood until it reaches the brain. Because these products give the brain nicotine, they work by temporarily relieving the desire for nicotine, just as smoking a cigarette would do, but without all the harmful chemicals. They are available without a doctor's prescription with guidance from your pharmacist.

NOTE: E-cigarettes are becoming more widely-available. They are often promoted as a way to become smoke-free. However, the Centers for Disease Control, the World Health Organization and many other reliable, respected bodies identify many potential risks and harms associated with e-cigarettes, and do not recommend them as part of an effective smoking cessation strategy.

Zyban (bupropion) and Champix: These are medications that must be prescribed by a physician. They work on the level of brain chemicals. They do not contain nicotine.

COPE2: Overcoming the Barriers to Becoming Smoke-free, Part 1: **My Reasons to Quit, My Reasons to Continue**

Indicate in the boxes below as many reasons as you can think of to quit using tobacco and as many reasons as you can think of to continue using tobacco. Take a few days to think about this and add more reasons to the list as they emerge. Once complete, review your reasons to quit and highlight the five most important ones. Then transfer these five reasons to your wallet card (**COPE11**) in the center page of this booklet.



Hint: Consult the list of benefits of quitting (exercise **ATT1**) to discover even more reasons to quit.

My Reasons to Quit Using Tobacco

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My Reasons to Continue Using Tobacco

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- 18.

COPE3: My Strengths

Everyone has strengths. These are the skills, talents, knowledge and personal traits that help a person better achieve life goals. Achieving smoke-free living is a life goal (and an extremely important one!!). Therefore, a person can use their strengths to achieve the goal of eliminating tobacco from their life. When asked what strengths they have, many people can't easily identify them, or may even be unaware of them. The purpose of this exercise is to help you identify the strengths that you have and how you can use them to quit smoking. If you have difficulty identifying your strengths, refer to the list at the bottom of the page. When you have completed the exercise, highlight the best (maybe 3-7) strategies you feel that you can use to stop using tobacco and transfer them to "My List of Coping Strategies" (exercise **COPE10**). We have provided one example to get you started.



Example. One of my strengths is: *I am creative*

How I can use this strength to stop using tobacco: *I can use my creativity to discover creative ways to cope with the negative emotions that can come along with quitting smoking. Instead of smoking I can do something creative like drawing, painting, or creative writing.*

1. One of my strengths is:

How I can use this strength to stop using tobacco:

2. One of my strengths is:

How I can use this strength to stop using tobacco:

3. One of my strengths is:

How I can use this strength to stop using tobacco:

4. One of my strengths is:

How I can use this strength to stop using tobacco:

5. One of my strengths is:

How I can use this strength to stop using tobacco:

6. One of my strengths is:

How I can use this strength to stop using tobacco:

7. One of my strengths is:

How I can use this strength to stop using tobacco:

8. One of my strengths is:

How I can use this strength to stop using tobacco:

9. One of my strengths is:

How I can use this strength to stop using tobacco:

10. One of my strengths is:

How I can use this strength to stop using tobacco:

Some Strengths

Adaptable	Cooperative	Eager	Innovative	Patient	Rational	Self-directed
Adventurous	Courageous	Energetic	Intelligent	People person	Realistic	Sensible
Ambitious	Creative	Farsighted	Inventive	Perseverance	Reflective	Spiritual
Analytical	Critical thinker	Flexible	Logical	Planner	Reliable	Strong-minded
Assertive	Curious	Generous	Mature	Practical	Resilient	Task-oriented
Capable	Daring	Hard working	Methodical	Precise	Resourceful	Thoughtful
Communicator	Dedicated	Healthy	Negotiator	Problem solver	Responsible	Trustworthy
Compassionate	Deliberate	Idealistic	Optimistic	Progressive	Results-oriented	Versatile
Confident	Dependable	Imaginative	Organized	Project-oriented	Self-aware	Wise
Conscientious	Determined	Independent	Passionate	Purposeful	Self-controlled	

COPE4: What Makes Me Happy

This activity is intended to help you identify things that make you happy. If the time comes in the quitting process where you feel sad and think of turning to tobacco, you can turn to some of the things that make you happy and give you joy instead. The urge to smoke is temporary. It will go away. Remind yourself that the feeling will go away and just do something else for that short period of time. Below, list 11 things that make you “happy”, make you smile, and give you joy. Along with each one, identify ways you can adapt these things as a coping strategy. When you have finished, select a few of the ideas (3-7) you have listed and transfer them to “My List of Coping Strategies” (exercise **COPE10**). We have provided an example to get you started.



Example: What makes me happy is: *Connecting with friends*

How I can use this to manage negative emotions from quitting smoking. Instead of smoking I will: *call a friend, e-mail a friend, write a letter to a friend, visit a friend, invite a friend over, think about all the smoke-free activities I can do with my friends, think about how proud my friends will be of me*

1. What makes me happy is:

How I can use this to manage negative emotions from quitting smoking. Instead of smoking I will:

2. What makes me happy is:

How I can use this to manage negative emotions from quitting smoking. Instead of smoking I will:

3. What makes me happy is:

How I can use this to manage negative emotions from quitting smoking. Instead of smoking I will:

4. What makes me happy is:

How I can use this to manage negative emotions from quitting smoking. Instead of smoking I will:

5. What makes me happy is:

How I can use this to manage negative emotions from quitting smoking. Instead of smoking I will:

6. What makes me happy is:

How I can use this to manage negative emotions from quitting smoking. Instead of smoking I will:

7. What makes me happy is:

How I can use this to manage negative emotions from quitting smoking. Instead of smoking I will:

8. What makes me happy is:

How I can use this to manage negative emotions from quitting smoking. Instead of smoking I will:

9. What makes me happy is:

How I can use this to manage negative emotions from quitting smoking. Instead of smoking I will:

10. What makes me happy is:

How I can use this to manage negative emotions from quitting smoking. Instead of smoking I will:

11. What makes me happy is:

How I can use this to manage negative emotions from quitting smoking. Instead of smoking I will:

COPE5: Planning for Challenging Times

Part of the plan to successfully becoming smoke-free is to foresee any situation that may be challenging and to plan for what you will do in that situation rather than smoke. Look at your cigarette-monitoring sheets (exercise **COPE1**) and identify which of the cigarettes you rated as most needed (an 8, 9 or 10). Look for any patterns. Perhaps it is the time of day, your mood, the person you are with, a situation or an event. Identify why the need of this cigarette is rated so high. Use the exercise below to help you plan what you will do in those times instead of smoke. When you have finished, select a few of the ideas (3-7) you have listed and transfer them to "My List of Coping Strategies" (exercise **COPE10**). We have provided an example to get you started.



Example: Time, mood, situation or event: *8:30 in the morning*

Why is the need of this cigarette rated so high? *I always have my first cigarette soon after I wake up in the morning. It's a habit to smoke at this time. Also, the nicotine level in my blood and brain are very low after not smoking overnight so my brain is craving nicotine pretty bad.*

Instead of smoking in this situation I will: *Change my routine. I will get up, brush my teeth to have a fresh feeling in my mouth and then get in the shower. Instead of spending 10 minutes smoking, I will use the time to put a healthy lunch together for school (work). On weekends I will go on a short walk first thing in the morning rather than smoke.*

1. Time, mood, situation or event:

Why is the need of this cigarette rated so high?

Instead of smoking in this situation I will:

2. Time, mood, situation or event:

Why is the need of this cigarette rated so high?

Instead of smoking in this situation I will:

3. Time, mood, situation or event:

Why is the need of this cigarette rated so high?

Instead of smoking in this situation I will:

4. Time, mood, situation or event:

Why is the need of this cigarette rated so high?

Instead of smoking in this situation I will:

5. Time, mood, situation or event:

Why is the need of this cigarette rated so high?

Instead of smoking in this situation I will:

COPE6: Overcoming the Barriers to Becoming Smoke-free, Part 2

Although there are numerous reasons to quit smoking, a person continues to smoke because the reasons to continue outweigh the reasons to quit. In the left column below, individually list your reasons to continue using tobacco (also known as barriers to becoming smoke-free) from Part 1 of this exercise (**COPE2**). In the right column next to each reason, brainstorm as many ways as possible to overcome the barrier. When you have finished, select a few of the coping strategies (perhaps 3-7) you have listed and transfer them to "My List of Coping Strategies" (exercise **COPE10**).

We have provided an example to get you started. If you have listed more than 6 reasons in Part 1, use another sheet to complete this exercise.



My Reason to Continue Using Tobacco	Some Ways to Overcome This Barrier to Becoming Smoke-free
<p>Example:</p> <p><i>It helps me manage stress</i></p>	<ul style="list-style-type: none"> • <i>Remind myself that nicotine causes stress. It doesn't relieve stress.</i> • <i>Remind myself that every time I put out a cigarette, my next craving begins, which I experience as stress.</i> • <i>Remind myself that, on average, smokers are more stressed than non-smokers.</i> • <i>Remind myself that as time goes by, the craving for a cigarette will decrease and so will the stress associated with it.</i> • <i>Learn and practice effective stress management strategies such as: deep breathing, progressive relaxation and meditation.</i> • <i>When I feel stressed I will do some stretching, yoga, exercise, take a hot bath or do my favorite hobby</i> • <i>Remind myself that quitting smoking is by far the greatest thing I can do for myself and it is not worth it to begin smoking again.</i>
1:	
2:	
3:	
4:	
5:	
6:	

COPE7: What To Do With Extra Money and Extra Time

Another way in which you can discover coping strategies to deal with negative emotions from quitting is to identify what you can do with the money and time that you will be saving. Refer to exercise **ATT2** where you calculated how much money and time you spend because of smoking. Place these amounts below. Then, think about what you could do with all that extra money and time. When you have finished, select the ones you are most excited about (perhaps 3-7) that you feel can help in times when you experience the urge to smoke and transfer them to “My List of Coping Strategies (exercise **COPE10**). Just reminding yourself of these wonderful things can be a great strategy to keep you smoke-free!



What else could I do with \$ _____ each year

List below 10 things you could do with this amount of money each year

- | | |
|----|-----|
| 1. | 6. |
| 2. | 7. |
| 3. | 8. |
| 4. | 9. |
| 5. | 10. |



What else could I do with _____ extra minutes a day

(line B from exercise **ATT2** “How much time I spend smoking each year”)

List below 10 things you could do with this extra time

- | | |
|----|-----|
| 1. | 6. |
| 2. | 7. |
| 3. | 8. |
| 4. | 9. |
| 5. | 10. |

COPE8: Identify Rewards

Quitting smoking can be difficult, and one of the things that can help with achieving difficult goals is to reward yourself for the progress you have made. Although being smoke-free is the greatest reward of all, there are many other ways to reward yourself. In the spaces below identify some ways to reward yourself for remaining smoke-free. A reward should be something that you enjoy and that is beneficial. Use your “What Makes Me Happy Worksheet” (**COPE4**) to inspire ideas for rewards.

When you have a craving for a cigarette, and the thought come up: “Have just one; you deserve it!”, implement one of these real rewards instead!

One of your coping strategies could be to remind yourself of the rewards that are awaiting you for remaining smoke-free. When you have finished, review your list of rewards and identify how they could be used as coping strategies. Again, a simple reminder of the wonderful rewards that will be yours as you continue to be smoke-free can be a powerful way to cope with the (temporary) negative feelings that can come on when you quit smoking. Transfer the most practical coping strategies from this exercise to “My List of Coping Strategies” (exercise **COPE10**). We have given you an example to get you started.



My List of Rewards

Example: *I will use the money I would have spent today on tobacco to buy a new plant for the apartment.*

1.

2.

3.

4.

5.

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7.

8.

9.

10.

COPE9: Symptoms of Recovery and How to Manage Them

Withdrawal from nicotine is comprised of two parts: the physical and the psychological. The physical symptoms (related to the body no longer getting nicotine or the numerous other substances found in tobacco smoke), although annoying, are not life threatening. **They are temporary: they will go away.** These symptoms are a sign that your body is healing. Try to put a positive spin on them. They are your body's way of telling you how much it has changed as a result of smoking. The psychological part of quitting—which includes feelings of irritability, anxiety or nervousness—is often the greater challenge. The coping exercises in this booklet are intended to help you identify ways to cope with the psychological aspect of quitting.

Most people who quit smoking have some withdrawal symptoms. Use the information below to help you identify the withdrawal symptoms you may be experiencing. This information also includes an explanation for the symptoms as well as ways to cope with them. Check the box next to any strategy you may find helpful. Review the strategies you have checked and transfer the ones you think may be most useful to “My List of Coping Strategies” (exercise **COPE10**).

Feeling nervous, irritable, or even depressed

Why this happens: The nicotine receptors in your brain are desperate to get nicotine.

This desire for nicotine creates negative feelings, which are relieved temporarily by getting nicotine to the brain by smoking. However, there are many ways to deal with negative feelings that do not include nicotine. Another reason for experiencing irritability is that you may be grieving the loss of something that has been part of your life for a long time.

What you can do:

- Examine your emotions and identify where they are coming from. Remember that it is those naggy nicotine receptors that are making you feel this way.
- THESE FEELINGS WILL PASS.** Remind yourself that negative feelings from stopping smoking are temporary and will go away.
- Inform your family and friends that this may be a tough time for you and remind them that these symptoms, although frustrating, are temporary, and are a result of you doing something to benefit your health and your life.
- Avoid stressful situations or those that you feel may frustrate you.
- Practice relaxation exercises such as deep breathing, visualization, or meditation.
- Physical activity often reduces the negative feelings because it stimulates the release of endorphins, which are “feel good” hormones. Go for a walk or a run, do some yoga, go to the gym etc.
- Remind yourself over and over again that the progress you have made so far is something to be tremendously proud of. Starting to smoke again often increases the depressing feelings from the guilt of having returned to smoking.
- Reduce or eliminate caffeine and other stimulants.
- Remind yourself that this is, BY FAR, the most important thing you can do to improve your health and your life.

Deep Breathing

1. Sit or lie comfortably.
2. Put one hand on your chest and the other on your belly button.
3. Exhale completely through the mouth.
4. Close your mouth lightly. Inhale through your nose quietly, counting to 4. Make sure that the hand on your belly button is the one that moves out. This will ensure that you are breathing from the abdomen.
5. Hold your breath for a count of 7.
6. Exhale through your mouth for a count of 8. Again, make sure that the hand on the belly button is the one moving.
7. Repeat steps 3 through 5 three more times, for a total of 4 cycles. Breathe normally and observe how your body feels.

Craving for tobacco

Why this happens: Tobacco has become such a part of your daily life that when you eliminate it your body will still desire it. Besides being a habit, your brain is addicted to nicotine and will do anything to get it. Anytime a situation arises where you used to smoke (called a trigger) you will likely think of smoking.

What you can do:

- Cravings for cigarettes are strongest during the first few days of the smoke-free process. These cravings are short-lived. **Remember, the urge to smoke will go away whether you smoke or you don't!**
- Identify your triggers and avoid them if you can, at least in the early days of being smoke-free. Drinking alcohol is a major reason why people return to smoking because alcohol interferes with the ability to stick with decisions. Take a break from alcohol for a short while.
- Replace tobacco in your routine with something else. A crossword puzzle with a morning coffee or a walk right after dinner are a few examples.
- Cravings lessen over time. Most ex-smokers say that they only have an occasional urge to smoke about two to three weeks after they have quit. Remind yourself of that.
- Distract yourself. Taking a walk, talking with friends and loved ones, doing a hobby, reading a book, or exercising are all examples of doing something more constructive with your time.
- Do a mental task such as adding numbers, counting objects or remembering as much as you can about a situation in the past (E.g. What did you receive as gifts for your 18th birthday? Where did you celebrate it? Who was there?)
- Try deep breathing.

Coughing

Why this happens: As the lungs heal, the cilia (tiny hair-like structures that move debris out of the lungs) that were damaged when you used to smoke begin to grow again. These remove the debris that has accumulated in your lungs. The lungs also produce more mucus to clean themselves.

What you can do:

- Remember that coughing is just a sign that your body is healing.
- Keep reminding yourself that your body needs to get rid of all the tar in your lungs. It has to come out somehow!
- Drink lots of water, which is needed for the production of mucus.
- Suck on sugarless hard candy.
- As with all the symptoms of recovery, remember that **THIS TOO WILL PASS!**

Feeling Tired

Why this happens: Nicotine is a stimulant, which means that it speeds up some of the body's processes. Feeling tired is the body's reaction to not having the nicotine. Energy levels will increase as the body gets more used to smoke-free living.

What you can do:

- Fatigue typically happens in the afternoon. Try to plan activities that help keep energy levels running high, like a mid-afternoon walk.
- Healthy eating habits, eating at regular intervals, and avoiding foods high in sugar can help reduce the effects of feeling tired.
- Regular physical activity can increase energy levels and decrease the experience of being tired. Be physically active.

Feeling hungry/gaining weight

Why this happens: As your sense of smell increases, food smells and tastes better. Also, the grumbling in your stomach indicating that your digestive tract is returning to normal may be perceived as hunger. Thirst and the craving for nicotine may also be perceived as hunger. Your metabolism, which was slightly boosted by nicotine, returns to normal so you need less calories. If you continue to eat the same amount of calories you may gain weight.

What you can do:

- Use the coping strategies you have learned while becoming smoke-free to manage the urge to eat. (E.g. Distract yourself rather than eat or remind yourself of the benefits of being at a healthy weight). This includes adopting a positive attitude to eating a healthy diet.
- Follow the Canada Food Guide to Healthy Eating. Eat a diet that contains a lot of plants (fruits, vegetables, grains, cereals, beans, nuts and seeds) and a moderate amount of dairy (and alternatives) and meat (and alternatives)
- Enjoy regular physical activity. Be physically active for 30 minutes, 5 or 6 days a week.
- Avoid high-fat or high-sugar snack foods as well as processed foods.
- Sometimes a person replaces one emotional crutch (smoking) with another (eating). Be aware if this is happening to you.

Constipation

Why this happens: Bowel movements also return to normal after you quit smoking.

What you can do:

- Drink lots of water
- A diet high in fibre—found in fruits, vegetables, whole grains and beans—can help.
- Enjoy regular physical activity.

Headache, dizziness, light-headedness

Why this happens: The carbon monoxide in tobacco smoke "knocks" oxygen out of your red blood cells, and less oxygen gets to your tissues. When you stop smoking, more oxygen gets to your brain and this can make you feel dizzy and light-headed or even give you a headache.

What you can do:

- If you experience dizziness, sit down for a few minutes until it passes.
- Take it easy for a while and don't overexert yourself.
- Drinking lots of water may help ease your discomfort.
- This symptom should only last a few days, at most. If these symptoms persist, check with your doctor.

Itching

Why this happens: Nicotine is a vasoconstrictor, which means it narrows the blood vessels. When you quit smoking, blood goes back to the vessels that were shrunk by nicotine, and this can create a feeling of itchiness. You may have weird itchy patches or generally feel itchy all over.

What you can do:

- Buy yourself a back-scratcher and go with the flow, so to speak!
- If that doesn't help, a cool ice pack (those nice soft gel packs that you can keep in the fridge or freezer) or a cold, wet face cloth can also help take the itch away.

Insomnia

Why this happens: Nicotine can affect how deeply you sleep. Once you stop smoking, your body no longer has its "fix" of nicotine. This symptom should go away within a few days. Note: Dreaming about smoking is a very common occurrence.

What you can do:

- There are a number of things you can do to manage insomnia. Consult reliable information on sleep on the Internet (e.g., sleep information from [Health Services](#)), a book or a health professional.
- Remind yourself that this is temporary and it is not worth smoking to relieve.

Concentration Problems

Why this happens: One of the effects of nicotine is to increase alertness and help with concentration. Most ex-smokers say that their concentration returns to normal within one or two weeks after stopping smoking.

What you can do:

- Avoid situations that require a tremendous amount of concentration.
- Use a to-do list to keep track of what needs to be done.
- Carry a small pad and pen with you and write down the things you need to remember.

COPE10: My List of Coping Strategies

The exercises that you have completed in the coping section have all had the goal of identifying coping strategies that you can use to manage the (temporary) negative feelings that often occur as a result of nicotine withdrawal from quitting smoking. In the spaces below, you will have transferred the most practical coping strategies from exercises in this booklet. You are not limited to the ones you identified from these exercises. If you have successfully used other coping strategies in the past when you quit, include those as well. Highlight (or circle) 10 strategies that you think will be most useful and transfer them to your wallet card (exercise **COPE11**). You are not limited to using only the 10 strategies on your wallet card, so refer to this sheet often. The more strategies you have and use, the better prepared you will be to successfully quit smoking.



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- 40.

In Case of a Slip

So you've had a slip. Perhaps it was during an evening out with friends. You may have had a few drinks, saw someone smoking, and "bummed" a cigarette. Maybe you were on a break, and a colleague offered you a cigarette; "Just one, you deserve it!" Perhaps it was after a long day, or after a conflict or argument. Whatever the situation, you gave yourself permission to have one cigarette, or a few. And now you may be feeling bad. Perhaps you are thinking, "I knew I couldn't do it; I should just give up!" This is a critical time in your quit; you can use the slip as an excuse to go back to smoking, OR, you can look at what went wrong and renew your commitment to remaining smoke-free for good.

Before we go on, let's review...

- It's a fact: you are able to quit smoking. You have done it already!
- A slip is not a complete failure; it is a temporary step backward.
- Millions of people have quit smoking successfully. There are more former smokers in Canada now than current smokers. The fact is, many of these former smokers experienced a "slip" or "relapse" at some point during their quit.

What to do

1. Identify the trigger

The first step is to become aware of the situation that triggered the slip. There are a number of high-risk situations where this can happen. These include:

- Positive intrapersonal situations/emotional states (e.g. celebrations, an evening with friends, etc.)
- Negative intrapersonal situations/emotional states (e.g. conflict, stress, anger, boredom, etc.)
- Social pressures (both direct and indirect), including being around other smokers ("Just have one; you deserve it!").
- Exposure to smoking-related cues (e.g. smelling cigarette smoke, being with a friend you always used to smoke with, seeing someone smoke on TV or in a movie).
- Testing personal control (e.g. standing with former "smoking buddies" on a break to "prove" to yourself that you can resist)
- Alcohol consumption is often accompanied by cues and temptations to smoke, and frequent exposure to these cues can erode the resolve to not smoke. There may also be a decrease in vigilance so that, under the influence of alcohol, the person may be less able to resist the cues and temptation to smoke.

2. Examine the situation

Once you have identified what triggered your urge to smoke, you can then examine what happened.

- Was it one of the above circumstances, or a situation you had earlier identified as high-risk (e.g. from exercise **COPE5** "Planning for Challenging Times")?
- Were you: Hungry? Angry? Using Alcohol? Lonely? or Tired?
- Did you rationalize having a cigarette (e.g. "I deserve it", "One won't hurt", "I was very stressed")?
- Did you go into the situation knowing that you were going to smoke?
- Did you have difficulty managing one or more of the symptoms of recovery (exercise **COPE 9**)?

Honestly ask yourself: Did I use my coping strategies?

- Did I use the numerous strategies I have developed to manage the negative emotions from quitting (exercise **COPE10**)?
- Did I use my wallet card (exercise **COPE11**)?
 - Have I filled out my wallet card?
 - Did I have my wallet card with me?
 - Did I pull out my wallet card and **seriously** implement the 15 strategies that are listed there for becoming and remaining smoke-free?
- Did I remember that my brain is asking for nicotine, which is what is making me uncomfortable.
- Did I just wait, knowing that the craving would pass whether I smoked or not?
- Did I breathe deeply?
- Did I do something different (distract myself)?
- Do I truly believe that quitting smoking is a gift I am giving myself (e.g. review my top five reasons for smoke-free living), or do I see quitting smoking as depriving myself of something that I enjoy?

It is very possible that you have answered "no" to some of the questions above. You worked hard to develop and establish your coping strategies, but they need to be implemented in order to be effective.

3. Review

- Which of the 3 major areas of this program was the slip related to?
 - **Understanding nicotine addiction:** Do you understand that nicotine is the substance that keeps you coming back by making you feel uncomfortable? Do you acknowledge that these bad feelings will go away?
 - **Building the right attitude:** Do you believe that quitting smoking is a huge gift that you are giving yourself and that the time and energy you put into quitting will translate into huge benefits? Have you completed all the exercises in the “Build the Right Attitude” section?
 - **Building coping strategies:** Have you built a comprehensive repertoire of coping strategies to deal with the negative feelings of quitting? Have you tried out these strategies and refined them so that they are effective? Have you completed all the exercises in the “Build Coping Strategies” section?
- Are there still some myths that you still buy into? Do you still believe, even a little bit, that smoking helps manage stress, or that smoking is cool? Review exercise **ATT5:** Disputing Myths About Smoking, exercise **ATT3:** How Using Tobacco Fits With My Values Worksheet, and exercise **ATT4:** How Using Tobacco Fits With My Goals Worksheet, and review the Benefits of Going Smoke-free sheet again (**ATT1**) to remind yourself why quitting is so important. It is by far the most important thing you can do to improve your health!
- Are you unconsciously setting yourself up for a slip? Do you still have some cigarettes hidden somewhere, “just in case”? Do you “test” your control by putting yourself in situations where you may be tempted? Do not “self-sabotage”—be your biggest supporter and set yourself up for success!

4. Plan

- Develop strategies for the specific situation that led to the slip. These should include behavioural strategies (something you do, such as deep breathe) and cognitive strategies (the way you think, such as reminding yourself that the urge to smoke will go away whether you smoke or you don't). Prepare powerful counter-arguments for your rationalizations. The next time you experience the situation, you will be prepared!
- Don't allow yourself to get too Hungry, Angry, Lonely, or Tired. Remember, since alcohol is the number one reason why people have a cigarette within the first few weeks of quitting, avoiding alcohol for the first few weeks of your quit is very, very helpful.

FINALLY

Don't look at quitting tobacco as giving up something, or as if you are losing something. You are ridding yourself of something that has been stealing your health, your self-esteem, your money, your time, your looks, and years off your life. Instead look at quitting tobacco as giving yourself a very big gift; the gift of health, wellness, control, self-esteem, and life!

What could be better than that!!



My Quit Smoking Countdown Calendar

Month: _____

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Month: _____

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

HOW TO USE THIS CALENDAR

If you decide to use the cut down method, you can use this calendar to plan your cutting down. Determine how many cigarettes you typically smoke each day and calculate a cutting down pattern that will leave you only 1 cigarette to smoke on the day before quit day. We have provided an example for a person who started the quit process on the 5th of the month and typically smokes 15 cigarettes a day.

S	M	T	W	T	F	S
				1	2	3
4	15 5	14 6	14 7	13 8	12 9	11 10
11 11	10 12	9 13	8 14	8 15	7 16	6 17
5 18	5 19	4 20	3 21	3 22	2 23	2 24
1 25	Quit Day! 26	27	28	29	30	