



ACES

Adolescent Cessation in Every School

AN EVIDENCE-BASED ADOLESCENT TOBACCO CESSATION TOOLKIT
FOR THE SCHOOL SETTING



Introductions

Table of Contents

Section 1: Background

- Overview
- Nicotine Addiction
- Nicotine & Tobacco Products
- Tobacco Industry Marketing & Youth
- Tobacco & Nicotine Use Initiation
- How Tobacco Harms Youth
- Missouri: By the Numbers
- Missouri is Falling Behind
- Intention to Quit
- The Need for Cessation in Schools
- Prevention vs. Cessation



Table of Contents

Section 2: Implementation

- The 5As Approach
- Stages of Change
- Motivational Interviewing
- Quit Plan Overview
- How to Use the Quit Plan
- My Personalized Quit Plan
 - Template
 - Examples
- Follow-Up Form
- Nicotine Withdrawal & Cravings
- Fagerstrom Test for Nicotine Dependence



Table of Contents

Section 3: Resources

- Nicotine Replacement Therapy & Cessation Medications
 - Overview
 - Dosing
- Self-Help Materials
- Cessation for Adults
- Resources for Tobacco Prevention
- School District Tobacco-Free Policies
- Who Can Help?



Section 1: Background

Overview

Young people have to be healthy in order to be effective learners

Nicotine addiction almost always begins by the time young people graduate from high school

The cessation tools and resources provided in this toolkit:

- Grounded in theories of health behavior change
- Utilize best practices for cessation and evidence-based literature
- Have been tailored for use with adolescents

Overview

Who is this toolkit for?

- Professionals who work with youth, especially in a school-based setting
 - School nurses
 - Faculty
 - Counselors
 - Health teachers
 - Resource officers

Who do these tools benefit?

- Adolescent tobacco users, ages 13-18



Prevention vs. Cessation

Prevention

Prevent non-tobacco users from ever experimenting with or initiating regular tobacco use

Examples:

- Anti-tobacco brochures and PSAs
- Social norms posters (i.e., 88% of students do not use tobacco)
- Peer-to-peer education programs
- Health class presentations on the harms of tobacco
- Red Ribbon Week
- DARE

Cessation

Actively help current tobacco users quit

Examples:

- Setting a quit date
- Talking to someone about quitting
- Making a quit plan
- Cutting back the number of cigarettes smoked each day
- Using nicotine replacement therapy patches or gum
- Using a medication to help stop smoking

Nicotine Addiction

Nicotine addiction can occur as quickly as a few days after experimental smoking

The adolescent body and brain are still developing, making youth especially vulnerable to addiction

The younger a person is when he or she begins using tobacco, the higher the risk that this youth will become a daily tobacco user and be less likely to successfully quit

Nicotine Addiction

Physiologically addiction due to nicotine + a learned habit

- Effective cessation approaches should address both

When health care professionals rank the addictiveness of drugs, nicotine tops the list – higher than methamphetamine and heroin



Types of Tobacco & Nicotine Products

All tobacco products contain the drug nicotine and can lead to addiction and harm



Electronic Nicotine Delivery Systems (ENDS) aka E-Cigarettes

Missouri state law prohibit the use and sale of ENDS to those under age 18

CDC report found that use is increasing rapidly among youth

- Over 250,000 youth who had never smoked a cigarette had used ENDS in 2013

“We are very concerned about nicotine use among our youth, regardless of whether it comes from conventional cigarettes, e-cigarettes, or other tobacco products.”



Electronic Nicotine Delivery Systems (ENDS) aka E-Cigarettes

Secondhand Aerosol - contains nicotine, ultrafine particles and low levels of toxins that are known to cause cancer

Lack of regulation

- Marketed on television, radio, billboards, online, at sportir events, in mall kiosks
- Reminiscent of tobacco advertising in previous decades



Tobacco & Nicotine Use Initiation

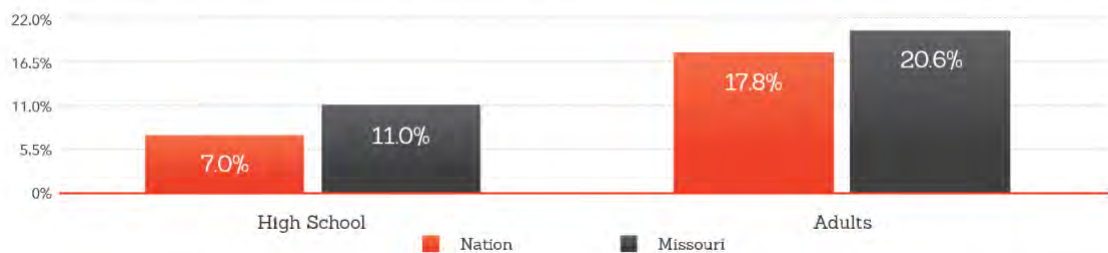
By the 10th grade, one out of every five students has tried smoking, and by the 12th grade, one out of three has tried smoking.

More than one-third of all youth who ever try smoking a cigarette will become daily smokers before they leave high school

Growing concern that initiation of ENDS is another pathway to nicotine addiction

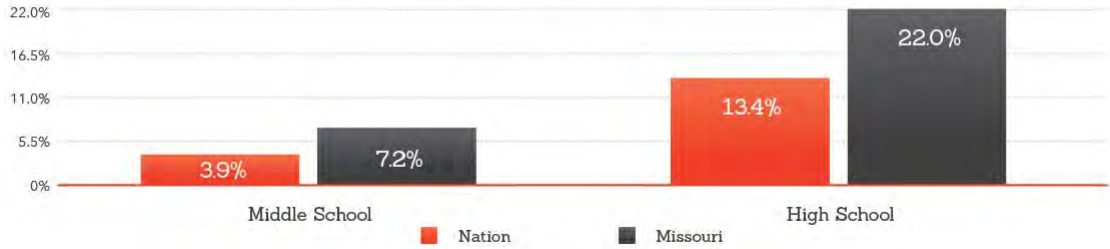
Missouri: By the Numbers

Table 1. Current Cigarette Smoking



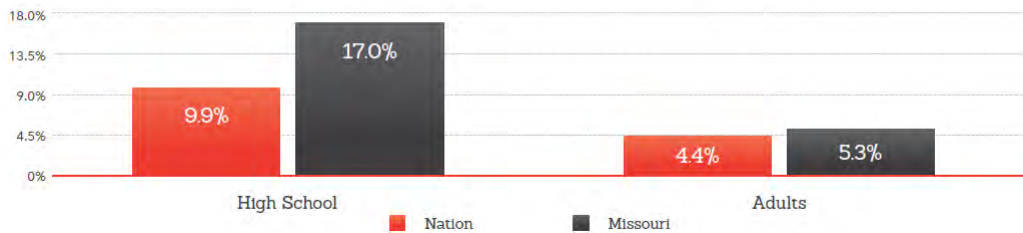
Missouri: By the Numbers

Table 2. Electronic Nicotine Delivery Systems



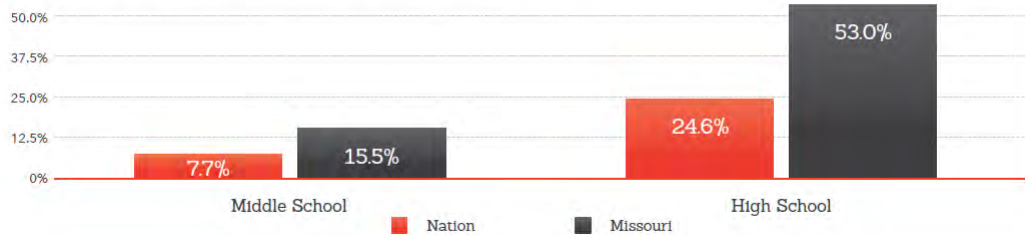
Missouri: By the Numbers

Table 3. Current Smokeless Tobacco Use Among Males



Missouri: By the Numbers

Table 4. Ever Use of Any Form of Tobacco



Missouri is Falling Behind

The state legislature does not fund any **youth tobacco prevention** programming

- Misconception that the state dedicates a portion of the funds from the Master Settlement Agreement to this cause

Lack of a comprehensive **smokefree indoor air law**

- Protect nonsmokers from secondhand smoke
- Increasing overall cessation
- Reducing smoking initiation among youth



Missouri ranks last with its **tobacco tax**, at only \$0.17 per pack of cigarettes

- Compared to the national average of \$1.60
- For every 10% increase in the price of cigarettes, there is a 6-7% reduction in the number of youth who smoke

Intention to Quit

A survey of 11-19 year-olds found that 82% of smokers are thinking about quitting

48-77% of adolescent smokers have made a serious quit attempt

Quit attempts by young people are often unplanned and unassisted

Adolescent smoking cessation programs, compared with control conditions, increase the probability of quitting by approximately 46%

The Need for Cessation in Schools

School districts tobacco-free policies are fall short of the “Gold Standard” if cessation is not included

Eliminates barriers such as transportation, cost, and ability to provide follow-up

Provides a treatment alternative to the usual disciplinary action for youth who violate school tobacco policies

Incorporated into coordinated school health programs

In alignment with the Centers for Disease Control and Prevention’s **Whole School, Whole Community, Whole Child** model

Section 2: Implementation

The 5As Approach

A brief, evidence-based tobacco cessation intervention that takes less than three minutes to complete

- The American Academy of Pediatrics endorses the use of the 5As approach with adolescent tobacco users
- Studies have shown it to be effective with young people



Table 1. The “5 A’s” model for treating tobacco use and dependence¹

Ask	Ask every student about tobacco use at every visit. Identify tobacco users and document tobacco use. Example: - “Do you use any tobacco products, even occasionally?”
Advise	Advise tobacco users to quit. In a clear, strong, and personalized manner, urge every tobacco user to quit. Example: - “I think it is important for you to quit now and I can help you. Nicotine is an addictive drug, and the longer you use tobacco the harder it will be to quit.”
Assess	Assess willingness to make a quit attempt. Example: - “On a scale from 0 to 10, how motivated are you to quit?” - “Have you ever tried to quit on your own?” - “Do you want to quit within the next month?”
Assist	For persons who want to quit: Assist the young person in making a quit attempt. Help him/her set a quit date, complete the quit plan (see page 23), identify coping strategies, and provide one-on-one support throughout the quit attempt. For persons who are uninterested in quitting: Implement motivational interviewing techniques to increase future quit attempts (see page 22).
Arrange	Arrange follow-up, especially on and following the quit date. Example: - During follow-up visits, success should be congratulated. If the individual has slipped up, review and adapt the quit plan and encourage a new commitment to quitting.

Stages of Change

Helps us understand where in the process a person is in terms of making a behavior change

There are five Stages of Change and the stages can be thought of as a cycle; people can move backwards or forwards in the cycle at any time

It is important to have an idea of which stage a tobacco user is in, in order to best assist him or her in cessation



Motivational Interviewing

The key characteristics needed to effective at MI are:

- Active Listening
- Understanding
- Demonstrating Empathy
- Knowledgeable
- Non-Judgmental

MI techniques:

- Ask open-ended questions
- Try to understand the student's frame of reference
- Express acceptance and affirmation
- Elicit and selectively reinforce the student's own statements
- Monitor the student's degree of readiness to change
- Affirm the student's freedom of choice and self-direction

Motivational Interviewing

- What warning signs would let you know that this is a problem?
- Have you tried to quit tobacco in the past?
- What would have to happen for you to know that this is a problem?
- What are your reasons for not quitting?
- What might help you quit?
- What do you think you need to learn about quitting?
- What could happen if you don't quit?
- What would be the good things about quitting?
- If you were to decide to quit, what would you have to do to make this happen?
- How can I help you get past some of the difficulties you are experiencing?
- What is the best thing you can imagine about quitting?
- If you make changes like quitting, how will your life be different from what it is today?

How to Use the Quit Plan

The quit plan should be used only with young people who are currently ready and willing to quit tobacco

This quit plan was designed to be completed by an adolescent with the guidance and support of an adult “quit coach”

The quit coach should guide the young person through its completion, section-by-section, asking open-ended questions and stimulating conversation along the way

Pages 27-28

My Quit Date

This is the day on which the young person will stop using all tobacco products

The ideal quit date is approximately two weeks from the time of the completion of the quit plan

- Provides time for the young person to start to put the quit plan into place, practice coping skills, have support system in place, and cut down on tobacco use

If the young person proposes a quit date longer than two weeks, it may be an indication he or she is still in the precontemplation or contemplation stages of change

- Motivational interviewing techniques should be employed to reduce the young person’s ambivalence about quitting

Follow Up Appointment

Before the young person leaves, follow-up should be scheduled

The more sessions, the higher chances are of successfully quitting

Could be scheduled for as little as a few days from the initial appointment, but should be no longer than two weeks from the initial meeting

During the follow-up appointment:

- The follow-up form should be completed
- Successes should be acknowledged
- Setbacks should be reviewed

The quit plan may need to be adapted during follow-up and additional appointments can be scheduled

Reasons to Quit

The young person should make a list of all of the reasons why he or she wants to quit

- “It costs too much money”
- “I can’t smoke at home or at school”

Identify both short-term goals (e.g., going to college, getting a job) and long-term goals (e.g., being a parent) and imagine the impact that tobacco use would have on achieving those goals



Triggers

People, places, objects, situations or emotions that prompt someone to use tobacco

Often strongly learned associations

Examples:

- People – Spending the day with my best friend who smokes, my older brother offering me a cigarette
- Places – In my car, at my cousin's house, at the bowling alley
- Objects – Lighters, ashtrays, coffee
- Situations – While watching TV, at football games, after school
- Emotions – Anger, boredom, stress

What triggers can you think of?

What Will I Do?

List of healthy coping strategies that are alternatives to tobacco use

Use the “3 As” or “4 Ds” of tobacco cessation



The 3 As of Tobacco Cessation

Alternative - Use an alternative product to satisfy the desire to have tobacco products in the hands or mouth

- Chew candy, gum, mints, sunflower seeds, straws or toothpicks
- Occupy your hands with silly putty, rubber bands or stress balls
- Brush your teeth

Avoid – Avoid your triggers

- Take your work breaks inside instead of going out back with the smokers
- Avoid spending a lot of time in places that allow smoking
- Avoid drinking coffee while quitting

Alter - Change the situation or environment that triggers your use of tobacco

- Pay for your gas at the pump instead of going inside convenience stores
- Ride your bike instead of driving
- Drink tea instead of coffee
- Clean your car so that it doesn't smell like tobacco
- Take breaks by watching funny videos online
- Take deep breaths or go for a jog after an argument
- Spend more time with your friends and family members who do not smoke

The 4 Ds of Tobacco Cessation

Delay –By lengthening the amount of time that passes between a craving and tobacco use, you strengthen resistance to cravings and build confidence in your ability to quit. Try to increase the length of time between cravings and tobacco use until you are able to completely avoid tobacco use

Deep Breathing – Triggers such as stress, sadness and anger, can often be managed by deep breathing. Taking several deep breaths can also help alleviate cravings and the symptoms of nicotine withdrawal

Distract/Do Something Else – Distracting yourself by doing something else allows time for cravings to pass. Staying busy and engaged in hobbies, sports and other activities is an important part of a successful quit attempt

Drink Water – Similar to deep breathing, drinking water can alleviate cravings and the symptoms of nicotine withdrawal

Things to Do Instead



List hobbies and activities that can be done instead of using tobacco

Examples:

- dancing, playing soccer, practicing piano or reading

It is important to make a list of enjoyable activity that can replace the time that was previously spent using tobacco

Support

Can greatly increase chances of successfully quitting tobacco

Important to identify specific individuals who will support the young person's quit attempt at school, at home, at work and in other modes (i.e., via text messages, phone calls and online)

A person's support system can provide encouragement and accountability during the quit attempt

Letting people know that you are making a quit attempt can reduce the number of people who use tobacco in your presence, thus reducing temptations and triggers

Other Support Strategies

Examples:

- Use of online, social media and text messaging programs
- Self-help materials and worksheets
- Use of a nicotine replacement therapy product



Rewards of Quitting

Young people are motivated to quit tobacco by rewards such as having more money, being more attractive to potential romantic partners and fitting in with their peers

Efforts to promote cessation among young people are most successful when they focus on these types of rewards as well as social norming messages



My Personalized Quit Plan

Examples: Pages 29-30

Follow-Up Form

- Withdrawal symptoms
- Triggers experienced
- Coping strategies used
- Positive changes experienced
- Tobacco use since quit date
- Confidence in quitting
- Next appointment



Section 3: Resources

Self-Help Materials

In-between visits with the quit coach, adolescents should practice the coping strategies identified in their quit plans and take advantage of the numerous self-help materials available to them

Examples:

- Smokefree Teen (website)
- Truth (website)
- The Real Cost (website)
- SmokefreeTXT (text messages)
- QuitSTART (mobile app)

Who Can Help?

Jenna Wintemberg, MPH, CHES

University of Missouri
 ACES, Creator & Trainer
 Certified Tobacco Treatment Specialist

For more information and to request a training:
 cessationineveryschool@gmail.com

Marjorie Cole, MSN, RN

State School Nurse Consultant
 Missouri Department of Health & Senior Services
 Marjorie.cole@health.mo.gov
 (573) 751-6213

Comprehensive Tobacco Control

Program Coordinator
 Missouri Department of Health and Senior Services
 (573) 522-2824



ACES

Adolescent Cessation in Every School