

UNIVERSITY OF YORK

Practice Manual for BISCA:

BEHAVIOURAL SUPPORT INTERVENTION FOR SMOKELESS TOBACCO CESSATION IN SOUTH ASIANS



17/08/2015, V2.2



PRE-QUIT SESSION

Developing a strong intention to change, planning and preparation to STOP tobacco use

Health Advisor - Please ensure you have the picture slides ready and the client take-away booklet before starting your session.

Hello, welcome; I am here to support you make a change which will bring many benefits, if you decide that is what you want to do.

Activity	Purpose/ Domain of behaviour change	Task
1. Identify the product used	<p>To collect brief contextual information about the client</p> <ul style="list-style-type: none"> - Build rapport - Assess current and past tobacco use behaviour 	<p>Slide 1</p> <p>Do you use any of these products?</p> <p>Do you use something that is not shown here?</p> <p>Can you describe what it looks like and what it's called?</p> <p>How often do you use it? Every day? How many times a day?</p> <p>How long have you used it for?</p> <p>Do other people use it in your family?</p>
2. Explain what the product that the client uses, contains	<p>To explore the clients knowledge of the products they are using and explain how different forms of tobacco are mixed with various ingredients to produce the product being used</p> <p>This is to ensure that the client is aware that</p>	<p>Slide 2</p> <p>Do you know what the product (name the product the client uses) contains?</p> <p>Which of these products contain tobacco? Let me explain...</p> <p>Paan contains: betel leaf, areca nut, slaked lime and tobacco.</p> <p>Gutka contains: finely chopped tobacco, areca nut, slaked lime mixed with</p>



	<p>the product they use contains tobacco!</p> <ul style="list-style-type: none"> - Focus on shaping knowledge (provide information on consequences of tobacco use) 	<p>flavourings and sweeteners</p> <p>Naswar or Nass is a mixture of powdered local tobacco, ash from tree bark, flavouring like cardamom or menthol, colouring and, sometimes, slaked lime</p> <p>Other products:</p> <p>Khaini is coarsely cut tobacco leaves, with a small amount of slaked lime paste.</p> <p>Khiwam or Qimam consists of pulped tobacco paste, spices and additives. Khiwam may also be used in betel quid.</p> <p>Mawa is small pieces of areca nut with crushed tobacco and slaked lime.</p> <p>Mishri is made from toasted and powdered tobacco</p> <p>Zarda consists of tobacco, lime, spices and vegetable dyes.</p>
3. Identify harmful ingredients	<p>To ensure that the client knows about the harmful ingredients contained in the product they use.</p> <ul style="list-style-type: none"> - Focus on shaping knowledge - Provide information about consequences of tobacco use - Make more salient, information about the harms caused by smokeless tobacco products 	<p>Slide 3</p> <p>Do you know which ingredients can harm your health?</p> <p>Let me explain</p> <p><u>Tobacco</u> is in all of these products and it contains substances that cause cancer. These substances are also present in some pesticides and fertilizers</p> <p><u>Harmful metals</u>, which are also present in rat poison</p> <p><u>Slaked lime</u>, which is used in mortars, plasters and cements</p> <p><u>Areca nut</u>, which contains cancer causing substances and other harmful metals like copper that is used to make electrical cables</p> <p><u>Flavouring and dyes</u> which use harmful chemicals similar to those used in fabric dyes</p>



4. Myths and realities of using products	<p>To explore their beliefs and address conflicting motivations. To address client’s misconceptions on outcome expectancies and provide alternative information on the health effects of these products.</p> <ul style="list-style-type: none">- Focus on behaviour and address motivation- Provide information about health consequences- Make more salient, information about the harms caused by smokeless tobacco products- Re-attribution: elicit perceived causes of behaviour and suggest alternative explanations	<p>Slide 4</p> <p>Is using this product helpful in any way? You might have heard people say different things about the product (s). Which of these are true?</p> <p><i>Read the list to the client, allowing them to say what they believe</i></p> <table><tr><td>It controls morning sickness</td><td>False</td></tr><tr><td>It leads to underdeveloped baby</td><td>True</td></tr><tr><td>It damages the gums</td><td>False</td></tr><tr><td>It keeps teeth strong and mouth clean</td><td>False</td></tr><tr><td>It causes mouth and throat cancer</td><td>True</td></tr><tr><td>It prevents mouth infections</td><td>False</td></tr><tr><td>It helps with digestion</td><td>False</td></tr><tr><td>It is addictive and difficult to give up on your own</td><td>True</td></tr><tr><td>It relieves stress</td><td>False</td></tr><tr><td>It makes you look attractive</td><td>False</td></tr><tr><td>It controls weight gain</td><td>False</td></tr><tr><td>It temporarily reduces oral pain whilst masking the underlying damage</td><td>True</td></tr><tr><td>It can cause miscarriages or still births</td><td>True</td></tr></table>	It controls morning sickness	False	It leads to underdeveloped baby	True	It damages the gums	False	It keeps teeth strong and mouth clean	False	It causes mouth and throat cancer	True	It prevents mouth infections	False	It helps with digestion	False	It is addictive and difficult to give up on your own	True	It relieves stress	False	It makes you look attractive	False	It controls weight gain	False	It temporarily reduces oral pain whilst masking the underlying damage	True	It can cause miscarriages or still births	True
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5. Readiness to change – importance	<p>To assess importance to stop.</p> <p>To ensure that the clients are stopping because they wish to do so.</p>	<p>Slide 5</p> <p>Now, I’d like to understand how important it is for you to stop using the product</p>																										



<p>As behaviour change depends on three things:</p> <ul style="list-style-type: none"> • Capability, • Opportunity • Motivation <p>these will be assessed subsequently.</p>	<p>People, who are not committed to stopping or are stopping because they have been told by another person e.g. a doctor or other family member that they should stop, are less likely to be successful in stopping.</p> <p>The client should stop because they themselves feel it is important to do so.</p> <p>You may need to change emphasis of the intervention at this point if the importance is low (say less than 3) and go down another route focusing more on beliefs, knowledge of harm and consequences rather than continuing towards setting a quit date... until importance to stop is high there is unlikely to be any change in intention to change behaviour.</p> <ul style="list-style-type: none"> - Identify reasons for wanting and not wanting to change the behaviour 	<p>On a scale of 1 – 5, if 1 is not important at all to stop, and 5 is very important to stop, what score would you give yourself?</p> <ul style="list-style-type: none"> • Why have you given yourself a score of _____? <p><i>If the score is low, ask a further question</i></p> <ul style="list-style-type: none"> • What do you think will take you to a higher score?
<p>6. Benefits of stopping</p>	<p>To balance the client's reasons for and benefits of stopping versus those for continuing to use.</p> <p>You are aiming to create a dissonance for the client by considering what is important to them and if their current behaviour is consistent with their future aspirations.</p> <p>Other people's opinions of the client stopping</p>	<p>Slide 6</p> <p>There are many benefits to stopping using the product, what do you think would be better for you as a non-user?</p> <p><i>Prompt if necessary - Here are some of the benefits other people have had by stopping using the product.</i></p> <p><i>Advise the client to Identify and compare reasons for wanting (pros) and not</i></p>



	<p>using a product can be very important here and whether the client is behaving in a way which is consistent with the norms of their culture / social circle</p> <p>e.g. if ‘fitting in’ with their friends is most important to them, they would feel more uncomfortable if they stopped. On the other hand, if having clean attractive teeth is very important, clearly continued use of the product is at odds with that desire. Such dissonance is more likely to get a stronger intention to change</p> <ul style="list-style-type: none"> - Boost motivation and self-efficacy - Develop discrepancy - Framing/re-framing - You may wish to revisit the 1-5 importance scale at this point if the previous score was low to see if there has been any change. 	<p><i>wanting (cons) to stop using the product; building on intention to change behaviour</i></p> <p><i>Let client respond then deliver personalised message according to client choice:</i></p> <p><i>Financial benefit:</i> How much money do you spend on buying this product, every week? Do you know that by stopping, you can save enough money in a year to buy new things for yourself, your family or your home?</p> <p><i>Social benefit:</i> Stopping using the product will reverse staining of your teeth and bad breath</p> <p><i>Health benefit:</i> Stopping using the product will reverse the risk of premature death</p>
7. Readiness to change – confidence	<p>To assess confidence in ability to stop.</p> <p>You might need to change emphasis of the intervention at this point if the confidence is low (say less than 3) and go down another route focusing more on boosting motivation and self-efficacy rather than continuing</p>	<p>Slide 7</p> <p>You have already told me that it’s important for you to stop, so now, let’s see how confident or capable do you feel about stopping using the product?</p> <p>On a scale of 1 – 5, if 1 is not confident at all, and 5 is very confident, what score would you give yourself?</p>



	towards setting a quit date...	<ul style="list-style-type: none"> • Why did you give yourself a score of _____? • What would it take for you to move to a higher score? <p><i>Prompt if the client has tried to stop before and ask if they learnt anything from the previous attempt that could be used again (to boost confidence), if the score remains low and ideas are not forthcoming then ask, 'if we gave you some support to stop do you think that might help?' then explain what could be offered.</i></p>
8. Assess past quit attempts	<p>To recognise the pattern of tobacco use of the client.</p> <p>It is helpful to find out whether clients have any past experiences that they can draw upon for their current quit attempt and to reassure them relapse is common when trying to change behaviour and does not mean they will not be successful this time round. Wanting to try again demonstrates commitment they obviously have for stopping using the product.</p> <p>It may be worth exploring if the client has had any experience of abstaining from using products e.g. during periods of fasting.</p> <ul style="list-style-type: none"> - Boost motivation and ability to change 	<p><i>(Can be combined with messages delivered in Slide 7, or used separately)</i></p> <p>Can you tell me, if you have tried to stop using this product in the last 12 months?</p> <p>How many times did you try?</p> <p>Did you have support for your attempt(s)?</p> <p><i>If no attempts:</i> congratulate them on their first quit attempt. Tell them that they have chosen to maximise their chances of success by seeking help</p> <p><i>If they have made previous attempts:</i> reassure them that every quit attempt is another step closer towards success</p> <p>What is the longest time you have stayed off chewing tobacco?</p> <p><i>Boost their motivation by stressing that for regular chewers even managing a short time without the product is an achievement</i></p>
9. Help is available	To inform the client about the treatment programme and the support that they can have to help them stop	<p><i>(Can be combined with messages delivered in Slide 7, to boost client's motivation and confidence inability to stop)</i></p> <p><i>Tell the client that they are increasing their chances of stopping by quitting</i></p>



	<ul style="list-style-type: none"> - Bolster confidence in ability to stop - Explain expectations regarding treatment programme 	<p><i>tobacco products for good and by receiving behavioural support. Tell them that regular contact with you in the initial stages is extremely important. However, full duration of the course including the final visit is also equally important.</i></p> <p>You have taken an important first step by coming along to see me. The treatment programme offered to you is a structured behavioural support and research has shown that people who get such support are far more likely to stop using tobacco products and stay abstinent than those who try to stop on their own. The support programme will last for five to six weeks and it is important that you visit us regularly during this period. I will provide you with some accurate information about what to expect during the quit attempt and we will work together to plan how to manage difficult situations.</p>
10. Social norms	<p>To elicit perceived causes of behaviour and suggest alternative explanations. Reinforce that chewing is not normal</p> <ul style="list-style-type: none"> - Provide normative information about others behaviours and experiences to boost confidence - Advise on restructuring social environmental - Boost motivation and self-efficacy - Instruction on how to perform a behaviour 	<p>Slide 8</p> <p>Looking at the images on this slide, can you distinguish between the red and the green bordered ones?</p> <p><i>Prompt and explain the images if client is struggling</i></p> <p>The green bordered activities can easily substitute the red ones for social situations that might trigger chewing tobacco use.</p> <p>Do you know someone who has given up chewing? e.g. among your friends or family or neighbourhood? <i>(Use it as a positive reinforcement that chewing is not a norm)</i></p>
11. Confirm readiness to stop	<p>To assess motivation and readiness to stop.</p> <ul style="list-style-type: none"> - Framing and re-framing: Suggest that they might think of quitting as 	<p>Slide 9</p> <p>How are you feeling now it's your Quit Date?</p> <p>So can I ask you whether you feel you are ready to stop using the product for</p>



	<p>reducing the risk of consequences from continuing chewing (rather than just the benefits of stopping)</p> <p>You might need to change emphasis of the intervention at this point if the readiness to stop is low (say less than 3) and go down another route focusing more on boosting motivation and self-efficacy rather than continuing forwards with the quit attempt... by condensing the information given in pre-quit session!</p>	<p>good and ready to stop now?</p> <p>On a scale of 1 – 5, if 1 is not ready to stop at all, and 5 is definitely ready to stop today, what score would you give yourself?</p> <p><i>If the client is not ready:</i> provide condensed information from the pre-quit session again and ask them to visit you when they feel they are ready to stop for good.</p> <p><i>If the client is ready:</i> Congratulate them and proceed with the plan</p> <p>Congratulate them for choosing to become an ‘ex’ user</p> <p>Discuss with the client if they ever feel tempted to use tobacco product, explain that the user has a choice i.e. they can choose to stop or to continue using the product.</p> <p>Encourage them to consider the consequences of each action ... what would be the consequences to them of not chewing e.g. health benefits, financial benefits, social benefits and what would be the consequences to them of continuing to chew i.e. ill health, self-image/staining of teeth and bad breath, wastage of money.</p> <p>Use this as an opportunity to encourage the client to articulate all the things they do not like about using the product and the things they think that will be better if they remain a non-chewer. This will help to reinforce their commitment</p>
<p>12. Set Quit date (Preparation and planning)</p>	<p>To prepare the client for the quit attempt</p> <ul style="list-style-type: none"> - Instruction on how to perform behaviour - Focus on past success: Advise to think about or list previous successes in 	<p>Slide 10</p> <p>Encourage and bolster confidence in ability to stop using tobacco by <u>focusing on past success</u></p> <p>Are there times when you stay off chewing?</p>



	<p>performing the behaviour</p> <ul style="list-style-type: none"> - Explain the importance of abrupt cessation - Prompt commitment from the client - Facilitate goal setting and action planning - Advise on avoiding social cues for smoking - Advise on environmental restructuring 	<p>For example, some people might stay off chewing during fasting for religious reasons at some time in the year, or there may be other times you do not use this product</p> <p><i>If 'yes',</i></p> <p>On average, how many hours do you refrain yourself from chewing? This means that you have the skill and the strength to resist using this product as you have successfully done so for (number) hours on many (number) occasions in the past. You can build on this strength to make a fresh start to stop tobacco use</p> <p><i>Explain the <u>importance of stopping abruptly</u> rather than cutting down gradually</i></p> <p>It is very important that you stop using the product altogether. When people try to stop gradually, they often adjust the amounts of tobacco in the product, putting more tobacco in each time they use the product, so although they may use less often, they would still use as much.</p> <p>We know that the best way to be successful in stopping and staying away from tobacco is to stop completely. This allows your body to begin to adjust to not chewing and you to adjust to the life without this product</p> <p><i>Set the <u>Quit Date</u> with the client (this could be a week rather than a day). This will normally be the date of the next appointment, one or two weeks later.</i></p> <p>As these are your last few days for chewing tobacco, don't try to stop before the Quit Date, though you might want to reduce its use. Your goal from the Quit Date onwards is not to have even 'a single chew' of the tobacco product.</p> <p>Having explained the 'not even a single chew' rule to you, I would really like to hear you say that your aim is not to chew at all after your quit date. Can you do that for me?</p>
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		<p><i>Discuss preparations for the quit attempt with the client.</i></p> <p>There are important things you can do to prepare for your Quit Date.</p> <ul style="list-style-type: none"> - In the next few days it is important to decide which friends, colleagues and family members you will tell about your quit attempt and ask them for their support - You may also find it helpful to get rid of the product and the paan dan/ box/ bag or other containers altogether before your quit date; if you cannot get rid of it because others use it too, then try to put it away from your sight as it will help you if you can't see the product around you - It is also important that you make an arrangement with your friends, colleagues and family members who chew tobacco, about reducing (or not using) the product when they are with you
13. What triggers desire for the product?	<p>To inform the client about the nature of nicotine dependence and how it develops and to provide them with an understanding of what they need to overcome.</p> <p>To prepare the client to monitor their use and work with them to identify the times and situations which are likely to be more difficult during the quit attempt.</p> <p>This will allow the user to start taking control of their chewing habit in order to increase confidence. At this point, just prompt the client to think of the triggers that tempt them to take</p>	<p>Slide 11</p> <p><i>Explain how tobacco dependence develops.</i></p> <p>When you first start chewing tobacco your brain changes and expects regular doses of nicotine. When the nicotine isn't available (because you are not using the product) you feel an urge for it. This urge for nicotine can be very strong and can undermine your motivation to stop chewing, especially on occasions and situations that reminds you of the product.</p> <p><i>Discuss triggers</i></p> <p>On what occasions and situations you currently use the product?</p> <p><i>Offer examples if client does not identify for themselves, for example:</i></p> <ul style="list-style-type: none"> - After waking-up in morning



	<p>the tobacco product.</p> <p>Getting the client to monitor/observe during a week the circumstances when they use products is a useful way of identifying the pattern of use and the circumstances which they will need to develop coping strategies for. Give them time until the quit date to observe/monitor and identify their triggers for tobacco product use.</p> <ul style="list-style-type: none"> - Focus on behaviour and maximising self-regulatory capacity - Facilitate goal setting - Facilitate barrier identification and problem solving 	<ul style="list-style-type: none"> - After meals - When in stress/pressure - Before going to the toilet - Before going to bed - Boring activity/job (e.g. driving a taxi) - Sitting in a certain chair/area - Seeing the 'paan dan' or making 'paan' for others - Social gatherings/occasions (what type?) - Sitting with friends/ seeing others take 'paan' or 'other product' - Offered 'paan' by others <p>In between now and your quit date, I would like you to think through what tempts your desire to take the tobacco product; for example, there may be certain times or places where you would use the product, or certain friends or family members who you often use the product with.</p> <p>It may help to write these situations down, so you can recognise the places, time and people which may trigger your desire to use.</p> <p>It may also be useful to think about how you feel when you use a tobacco product, are you are happy, sad, relaxed, stressed or worried? All this information will help you develop alternative actions when you come to quit.</p>
14. What could help manage the urges?	To prepare the client to think about the coping strategies they can use to avoid or manage their urges in the time until they return on their quit	<p>Slide 12</p> <p>By monitoring your use, you will recognise that there will be different situations</p>



	<p>date.</p> <ul style="list-style-type: none"> - Focus on behaviour and maximising self-regulatory capacity - Facilitate action planning/ develop treatment plan - Facilitate barrier identification and problem solving - Advise behaviour substitution/ changing routine - Distraction: Advise to use alternative focus for attention to avoid triggers for chewing 	<p>when you use the product.</p> <p>It is important that we can recognise the situations when you use, so we can work together to develop a plan to deal with those times when you may be tempted to use the product</p> <p>So between now and your quit day I also want you to start to think about the type of alternative things you could do instead of chewing. Do you have any ideas at the moment of the types of things you might do?</p> <p><i>prompt if client is struggling</i></p> <p>Think about what you can do instead with your hands, your mouth and your body and we will discuss these in more detail at your next appointment.</p> <p>Remember, you must decide what is best for you to do when you feel an urge to use tobacco, but here are some things others have found helpful; these include doing something different with their hands, their mouths or their bodies. It is important to remember that this is YOUR quit attempt, and it has to be around what works for you. Therefore, it would be best that you take the time in between now and your quit date to think what might help you in dealing with occasions and situations that could trigger your desire to use the product?</p> <ul style="list-style-type: none"> - Chewing gum - Socialising with friends - Walking/exercising - Going to the cinema - Gardening/watering plants - Having a hot or cold drink
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		<ul style="list-style-type: none"> - Chewing fennel seed/crushed coconut - Having a healthy snack such as dry fruits, seeds or nuts - Offering prayer - Replace the paan dan contents with dry fruit/crushed coconut/fennel seed/nuts - Sew or knit - Avoiding company of those who chew tobacco in the short-term
15. How could you reward yourself?	<p>To set the incentives</p> <ul style="list-style-type: none"> - Encourage self-motivation through self-incentive/reward 	<p>Slide 13</p> <p>Suppose if you are able to stop using the product by _____ (<i>mention date decided</i>) and stay quit for the first 4 weeks; you will have really achieved something and should reward yourself for, have you any ideas how would you like to reward yourself?</p> <p>Here are some ways other people reward themselves when they succeed in stopping. I would like you to think about it and let me know at your next visit about how are you going to reward yourself.</p> <p>Please take this information (<i>Give client the booklet</i>) with you now and glance over it at home; it will remind you of what we have discussed today and help you prepare for your Quit Date.</p>



COMPETENCIES TO DELIVER PRE-QUIT BEHAVIOURAL SUPPORT

Specific focus on behaviour addressing motivation	Specific focus on behaviour maximising self-regulatory capacity / skills
Boost motivation and self-efficacy	Facilitate barrier identification and problem solving
Provide feedback on performance	Facilitate goal setting
Provide normative information about others' behaviour and experiences	Advise on changing routine
Prompt commitment from the client there and then	Advise on environmental restructuring
Strengthen ex-smoker identity	General aspects of the interaction focusing on general communication
Identify reasons for wanting and not wanting to stop smoking	Build rapport
Explain the importance of abrupt cessation	Elicit and answer questions
General aspects of the interaction focusing on delivery of the intervention	Explain expectations regarding treatment programme
Tailor interactions appropriately	Provide information on withdrawal symptoms
Emphasise choice	Use reflective listening
General aspects of the interaction focusing on information gathering	Elicit client views
Assess current and past smoking behaviour	Summarise information / confirm client decisions



Assess current readiness and ability to quit	Provide reassurance
Assess past history of quit attempts	Associate activities
Assess nicotine dependence	Advise on stop-smoking medication
Assess attitudes to smoking	Advise on / facilitate use of social support
Explain how tobacco dependence develops	Adopt appropriate local procedures to enable clients to obtain free medication
	Give options for additional or later support



QUIT SESSION

Reflection on the preparation and support on the quit day

Please ensure you have the picture Slides ready and the Calendar before starting your session.

Welcome, I am so glad to see you again; it shows you are very committed

Activity	Purpose/ Domain of behaviour change	Task
16. Support new image as ex-user	<p>To address the use of product 'to have a self-image' and to 'strengthen ex-user identity'.</p> <ul style="list-style-type: none"> - Strengthen identity associated with changed behaviour - Framing/ re-framing - Encourage identification of self as a role model 	<p>Slide 14</p> <p>Now that you are ready to stop by your own choice; you will see the product truly for what it is - something that harms you and takes a lot away from you. From today you will no longer be a tobacco user but you will have a new identity as someone who 'used to chew tobacco'. You will become part of the healthier and wealthier group which does not use these products</p> <p>Please look at the image- these people once used to chew but now they act as a 'role model' for others. They show some of the benefits of stopping with their family and friends; they are happier and healthier, so when others see them, they might also think about stopping tobacco.</p> <p>Can you remind me of the reasons why you wanted to stop?</p>
17. Monitoring progress	<p>To encourage self-monitoring on progress towards becoming a permanent non-tobacco user/ non-chewer</p> <ul style="list-style-type: none"> - Prompt self-recording 	<p><i>(This can be combined with the previous slide)</i></p> <p>Give client the calendar</p> <p>We are giving you a Calendar to take with you today; there is a space for each day for the next four weeks; today is day 1.</p>



	<ul style="list-style-type: none"> - Facilitate goal setting 	<p>Each day you go without using, put a tick in that day. Put your calendar somewhere you can see it, to encourage you. If you do use the product, even just once, then you must place a cross in that day. You are aiming to have all the days full of ticks.</p> <p>This calendar provides several reminders of what you can do to help you manage; remember, if you feel craving, get your mouth, your hands or your body busy with other activities. Remember what you planned to do to manage the occasions and situations that remind you of chewing tobacco.</p>
18. Inform client about symptoms of recovering	<p>To inform the client about the nature of craving symptoms that they may develop after stopping and to provide them with an understanding of what they need to overcome. To reassure that these symptoms are short-lived.</p> <ul style="list-style-type: none"> - Focus on behaviour and maximising self-regulatory capacity - Provide information on withdrawal symptoms - Facilitate goal setting - Facilitate barrier identification 	<p>Reuse Slides 11 & 12</p> <p><i>Using the triggers list (if needed) discuss with the client and help them identify their triggers. Discuss with the client what they have thought about that can help them overcome these triggers; make use of the list of strategies found helpful for others, if needed.</i></p> <p>Last week we discussed identifying the time, places and people when you usually used a product, can you tell me what you discovered about your use?</p> <p>Did you have a chance to think about the type of actions you would do instead of using the product? What sorts of ideas did you come up with?</p> <p><i>After having discussed the trigger management strategies with the client, move to withdrawal symptoms, what these are and how they develop.</i></p> <p>Slide 15</p> <p>Because your brain is used to regular doses of nicotine, it has to adjust to being without it. Within the first few hours of stopping chewing tobacco, your brain will start getting used to being without nicotine - this adjustment may result in withdrawal symptoms.</p> <p>You might develop withdrawal symptoms like <i>(prompt only if necessary)</i>:</p>



		<ul style="list-style-type: none"> - Craving for nicotine/ poor concentration - loss of sleep - Restlessness/ agitation - Increased appetite (leading to weight gain) - Constipation/ feeling bloated - Oral pain - Headache - Low mood/ depressed - Or any other symptoms, specific to you <p>Rest assured that if the client experiences these symptoms, they are perfectly normal and will reduce overtime.</p>
19. Manage urges and cravings to use tobacco	<p>To prepare the client to think about the coping strategies they can use to manage triggers and withdrawal symptoms and develop a plan (according to their cravings) to deal with these situations.</p> <ul style="list-style-type: none"> - Focus on behaviour and maximising self-regulatory capacity - Facilitate action planning/ develop treatment plan - Facilitate problem solving - Advise behaviour substitution/ changing 	<p>Slide 16</p> <p>Remember when you quit and you find yourself in a certain place, at a certain time, or with a person when you would normally use a product, you may sometimes feel strong urges to use the product. Rest assured that these ‘cravings’ to use that you feel initially are quite normal and are usually short-lived.</p> <p>If you feel these cravings, stop for a moment; think about why you want to stop, then remind yourself of the benefits that you have just told me about which will come to both you and your family. Remember to do something to distract yourself.</p> <p>Tell yourself about how each day you complete brings you closer to goal of staying quit.</p> <p>Different people experience different craving symptoms, once they stop. You need</p>



	<p>routine</p>	<p>to make a plan of how you will manage these if you experience them. Can you tell me what you will plan to do to manage these?</p> <p><i>prompt if client is struggling</i></p> <p>Think about what you can do instead to keep yourself busy and distracted and we will discuss these in detail at your next visit.</p> <p>Remember, you must decide what is best for you to do, but here are some things others have found helpful. It is important to remember that this is YOUR quit attempt, and you need to think what might help you to manage these symptoms!</p> <ul style="list-style-type: none">- Yoga/ long walk- Listen to relaxing music- Deep breathing exercises- Taking psyllium at night- Gardening- Knitting/ sewing- Cooking- Offering prayer/ going to mosque (or place of worship)
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COMPETENCIES TO DELIVER QUIT BEHAVIOURAL SUPPORT

Specific focus on behaviour addressing motivation	General aspects of the interaction focusing on information gathering
Boost motivation and self-efficacy	Assess current readiness and ability to quit
Provide normative information about others' behaviour and experiences	Assess withdrawal symptoms
Prompt commitment from the client there and then	Assess number of contacts who smoke
Strengthen ex-smoker identity	Assess level of social support
Identify reasons for wanting and not wanting to stop smoking	General aspects of the interaction focusing on general communication
Explain the importance of abrupt cessation	Build rapport
Specific focus on behaviour maximising self-regulatory capacity / skills	Elicit and answer questions
Facilitate barrier identification and problem solving	Provide information on withdrawal symptoms
Facilitate action planning/ help identify relapse triggers	Use reflective listening
Facilitate relapse prevention and coping	Elicit client views
Advise on environmental restructuring	Summarise information / confirm client decisions
Advise on changing routine	Provide reassurance



Set graded tasks	Associate activities
Advise on conserving mental resources	Advise on stop-smoking medication
Advise on avoidance of social cues for smoking	Advise on / facilitate use of social support
Facilitate restructuring of social life	Adopt appropriate local procedures to enable clients to obtain free medication
	Ask about experiences of stop smoking medications that the smoker is using



POST- QUIT SESSION

Ongoing support and confirmation of abstinence

Welcome, I am so glad to see you again

Activity	Purpose/ Domain of behaviour change	Task
1. Determine the client's abstinence status	<p>To maintain the client's motivation and confirmation of their staying abstinent from using the product/s</p> <ul style="list-style-type: none"> - Boost motivation and self-efficacy 	<p><i>Ask the client if they are still a non-chewer- confirm that the client has 'not even had a single chew' of the product since the quit date. Look at the calendar that the client filled in during these 4 weeks and congratulate them if they have remained totally abstinent. This will help to reinforce the benefits of stopping.</i></p> <p><i>Ensure that the client still understands the importance of complete abstinence.</i></p> <p><i>If the client has relapsed ensure that they understand that this is normal and they have not failed in their attempt to stop using the product. Ask the client about the circumstances of the relapse and explore what they would do different if they aim for another attempt to stop in the future.</i></p> <p><i>Ask the client if they would like to have another attempt at stopping using the product/s- do not rush the client into another quit attempt, remember the time must be right for the client!</i></p>
2. Provide reward	<p>To provide the reward</p> <ul style="list-style-type: none"> - Boost motivation and self-efficacy 	<p><i>If the client has successfully given up the use of tobacco product and stayed quit for 4 weeks or longer Ask if the client has had the reward that was discussed in the pre-quit session.</i></p> <p>Congratulations on having successfully stayed off chewing for 4 weeks since the quit date (mention date decided), you can now reward yourself</p>



3. Discuss craving symptoms	<ul style="list-style-type: none"> - Assess withdrawal symptoms - Facilitate relapse prevention and coping 	<i>Discuss any difficult situations experienced and methods of coping with these, if these failed in past suggest alternative strategies or encourage the client to identify management strategies that are likely to work in their scenario</i>
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COMPETENCIES TO DELIVER POST-QUIT BEHAVIOURAL SUPPORT

Specific focus on behaviour addressing motivation	Specific focus on behaviour maximising self-regulatory capacity / skills
Boost motivation and self-efficacy	Facilitate barrier identification and problem solving
Provide rewards contingent on successfully stopping smoking	Facilitate action planning/ help identify relapse triggers
Provide normative information about others' behaviour and experiences	Facilitate relapse prevention and coping
Prompt commitment from the client there and then	Facilitate goal setting
Provide rewards contingent on effort or progress	Prompt review of set goals
Strengthen ex-smoker identity	Prompt self-recording
General aspects of the interaction focusing on general communication	Advise on avoidance of social cues for smoking
Build rapport	Associate activities
Elicit and answer questions	Advise on stop-smoking medication



Provide information on withdrawal symptoms	Ask about experiences of stop smoking medications that the smoker is using
Use reflective listening	Give options for additional or later support
Elicit client views	General aspects of the interaction focusing on information gathering
Summarise information / confirm client decisions	Assess withdrawal symptoms
Provide reassurance	