

Building a Program to Stop Smoking Among Health Center Communities Learning Collaborative (Session 4 of 4)

National Center for Health in Public Housing



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- The mission of the National Center for Health in Public Housing (NCHPH) is to strengthen the capacity of federally funded Public Housing Primary Care (PHPC) health centers and other health center grantees by providing training and a range of technical assistance.



Speakers and Moderators



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Housekeeping

- All participants muted upon entry
- Engage in chat
- Raise hand if you would like to unmute
- Meeting is being recorded
- Slides and recording link will be sent via email

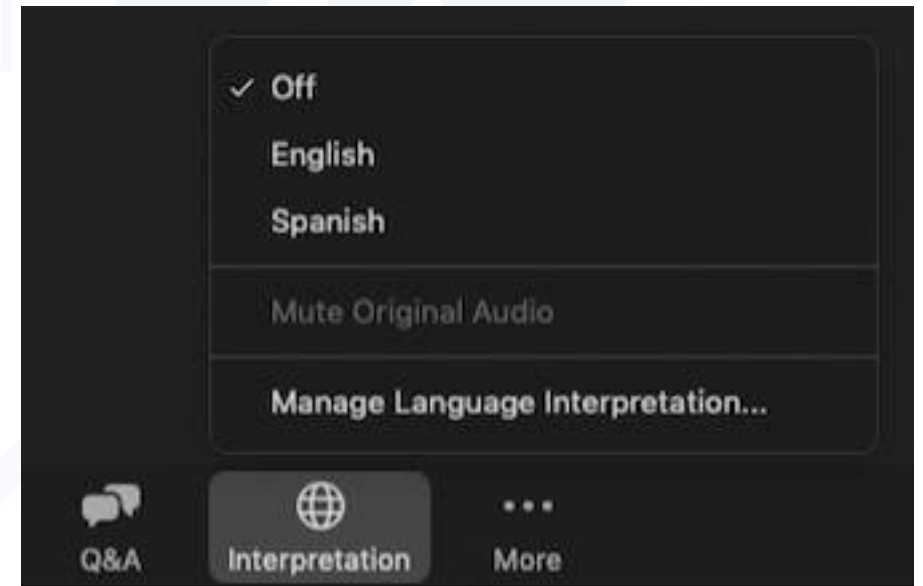


Video Conference via

zoom

Zoom Interpretation Instructions

1. Select the “Interpretation” button at the bottom of the screen. It is shown as a globe icon.
2. Upon selecting the “Interpretation” button, click on “Spanish”, and then click the “Mute Original Audio” option at the end of that list. This will allow for you to hear the Spanish interpreter while other voices are muted.
3. Questions and comments may also be submitted through the chat in Spanish.



Interactive Exercise

- 1. It occurs when blood flow in the heart is slowed or blocked
 - A/ Infarction
- 2. Object made explicitly for smoking tobacco
 - A/ Pipe
- 3. Respiratory illness in children aggravated by secondhand smoke
 - A/ Asthma
- 4. Active substance in tobacco
 - A/ Nicotine
- 5. Number One Cancer Associated with Smoking
 - A/ Lung
- 6. Type of interview used to help smoking patients
 - A/ Motivational
- 7. An instrument used to heat or vaporize tobacco and then smoke it
 - A/ Hookah
- 8. It occurs while someone is breathing in smoke from smokers
 - A/ Secondhand smoke

Stress Management

- Exercise. Refer interested parties to appropriate local programs. (Aerobics, personal training, weight training, etc.)
- Visualization. Ask each group member to visualize a stressful situation. Have them successfully deal with the situation without a cigarette.
- Separate the cigarette from the situation. Solicit specific stressful situations from group members. Challenge the group to prove that smoking would have helped them deal with that situation. Ask “How would smoking make this situation better.” Remind the group that every problem has a solution that does not involve smoking.
- Bust the myth. Challenge the belief that there is some ingredient in a cigarette that calms or relaxes. Remind each group member that he or she has always dealt with their own stress.
- Allow some “down” time every day. Listen to a meditation or relaxation tape. Get a massage once a week.
- Refer interested parties to local stress management programs.

Counseling Tip

The inability to deal with stress is the number one reason individuals' relapse, so teaching group members how to deal with stress in a healthy manner will be a primary focus of the remainder of your group sessions. If you can, refer individuals to a formal stress management program.

Relaxation Technique

Find a place where you can be alone.

Sit in a comfortable chair or lie on the floor

Think of a short word or a sound you can say repeatedly

Close your eyes

Release any tension in your body by tightening that muscle and then letting go

Begin to breathe deeply and slowly, breathing the air in through your nose and letting it out through your mouth. Say your special word over and over to yourself as you breath out.

Do this for fifteen to twenty minutes a day

Practice. Don't worry if you have trouble letting go and clearing your mind at first. Just like everything else, **it will become easier with practice**

Visualization

- 1.To begin, find a quiet, comfortable space to sit or lie down without distractions.
- 2.Close your eyes and take a few deep breaths to relax your body and mind.
- 3.Start visualizing yourself in a smoke-free environment, engaging in activities that bring you joy and fulfillment.
- 4.Imagine the sensation of fresh air filling your lungs, your body feeling healthy and

Walking Meditation

- Find a quiet and peaceful outdoor location where you can walk without distractions. Begin by walking comfortably, focusing on the sensations in your feet as they contact the ground. Notice the rhythmic movement of your body, the feeling of the air against your skin, and the sights and sounds around you.
- As thoughts or cravings arise, acknowledge them with no judgment and gently bring your attention back to the present moment, walking and observing. Embrace the experience of each step, allowing it to anchor you in the present and dissolve any negative impulses.

Relapse Prevention/Maintaining the Quit

- Address negative emotions. Redirect the group member to focus on the success of the quit rather than "failure" of the slip.
- Be very careful not to make the slip itself seem like a positive event. If you do so they will only slip again.
- Once you have successfully dealt with the negative emotion, strategize about specific coping techniques for that slip situation.
- Get a brief description of the slip scenario to help the strategy session.

Help, I am Smoking Again?

What can you do to get back on track?

- What worked?
- What was the problem?
- What else could I have done?
- My quit day is _____

Case studies

- **Q:** RC is a 34-year-old male truck driver who is seeking information about the use of e-cigarettes. He reports that his primary care physician, who is treating RC's diabetes, recommended smoking cessation. RC mentions that his friends have been trying to quit cigarette smoking via e-cigarettes. He is skeptical but asks about the latest recommendations. What recommendations do you have?
- VH is a 40-year-old woman who recently discussed smoking cessation with her primary care physician (PCP) and is picking up nicotine replacement patches and gum. Although her PCP had informed her about nicotine replacement therapy products and how they work, she asks if there is anything she can use on her smartphone, or alerts she can arrange to help her manage cravings and adhere to her quit plan. What recommendations do you have?

Q & A Session



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Thank you!