Secondhand smoke is harmful to children

Are you ready to quit?

A Clinician’s Guide to Help You Quit Smoking

Pediatricians Against Secondhand Smoke

PASS
The effects of secondhand smoke on children

Secondhand smoke exposure occurs:
- at home
- in the car
- friend/relative’s home
- outside

Secondhand smoke increases:
- ear infections
- asthma attacks
- respiratory infections (pneumonia, bronchiolitis)
- SIDS (Sudden Infant Death Syndrome)

If you smoke, it affects the whole family:
- your children will be more likely to smoke
- 4x increased risk of hospitalization
- secondhand smoke is an EPA class A carcinogen
- costs a lot of money (1 pack/day = $1500/year)
ASK: use direct, depersonalized question (may have been done by nursing/ancillary staff already)

- “Does anyone who lives in your home smoke?”
  or

- “What are the rules regarding smoking in your home?”

Ask permission to discuss secondhand smoke exposure

- “Is it okay if I talk to you about secondhand smoke exposure?”

EDUCATE: provide brief and basic facts about the effects of secondhand smoke on children and the family
  - if time, ask parent what they already know about secondhand smoke
I advise you to quit smoking!
- for your health
- for your child’s health
ADVISE: use simple, clear, and personalized message

– “ Quitting smoking is one of the most important things you can do for your child’s health.”

or

– “ Quitting smoking is the best thing you can do to help Johnny’s asthma.”
Stages of Change

Where do you see yourself on this scale?

Parent

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▌ I am not ready to quit

▌ I have thought about quitting, but am not quite ready

▌ I am ready to quit

▌ I have taken steps to quit

▌ I have quit!

Provider

Precontemplation

Contemplation

Preparation

Action

Maintenance
ASSESS: parent’s willingness to quit
- show parent stages of change scale

- “Where do you see yourself on this scale?”

or

- “Which of these phrases best applies to you?”
I can help you.

In person:
- Doctor appointment
  o Nicotine Replacement Therapy = medications to help you quit
- Tobacco cessation classes

On the phone:
- Utah Tobacco Quit Line
  o 1-800-QUIT-NOW
  o 1-877-629-1585 for Spanish

On the internet:
- www.utahquitnet.com
- www.tobaccofreeutah.org
- www.cdc.gov/tobacco
- www.surgeongeneral.gov/tobacco

In writing:
- quit plan
- pack tracks, tobacco use journal
ASSIST: help make a quit plan

Precontemplative or contemplative:
- “When you are ready, there are many ways we can help you.”

⇒ Skip ahead to harm reduction (next page)

Preparation or action:
- “Congratulations on your decision to quit smoking, there are many ways we can help you."

- “What works best for you?” (help in person, phone, or internet)
  - set a quit date
  - doctor referral for Nicotine Replacement Therapy
  - quit plan, pack tracks
  - refer to quitline, internet resources

Maintenance:
- “Congratulations on quitting smoking.”

- Recognize relapse is common
- Provide resource list for continued support
Harm Reduction

Do not:
- Smoke in the house or car
- Smoke in the workplace or other public places
- Smoke while pregnant

Consider:
- Smoker’s jacket
- Hand washing
- Declare your house and car smoke free

There is no safe level of secondhand smoke exposure

Precontemplative or contemplative (cont.):
- “Even though you are not ready to quit, there are things you can do to reduce the harm from secondhand smoke.”

- Use motivational interviewing to build confidence and motivation.
  - Help parent identify reasons:
    - they continue to smoke
    - why they should quit

- Provide educational handout about secondhand smoke exposure and children
- Provide resource list

Thank You for your time!
Our community partners:

Salt Lake Valley Health Department

Utah Chapter of the American Academy of Pediatrics

ARRANGE: schedule follow-up

- follow-up appointment
- phone call follow-up
  o “Can I call you on the phone in 2 weeks to check in and see how things are going?”