

# You've Got This!

An interactive group  
tobacco cessation guide  
to support those most vulnerable



**Alberta Health  
Services**

Tobacco Reduction  
Program

1-866-710-QUIT (7848)  
[albertaquits.ca](http://albertaquits.ca)

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The following sessions are part of a comprehensive smoking cessation program. They are designed to be highly interactive, require minimal resource needs, short session length (approx. 45 minutes), repetitive messaging, and use plain language. They have been designed for use with populations that have concerns such as low literacy, short attention span, language barriers, and concurrent disorders.

**These sessions are intended to be used in a successive series as outlined below.**

\* To access any session, click on the session title.

1. [Opening Group](#)
2. [Triggers and Cravings](#)
3. [Relationship with Tobacco](#)
4. [Coping with Feelings](#)
5. [Stress](#)
6. [Tobacco Change Plan](#)
7. [Benefits of Quitting](#)
8. [Closing Group End Game – Staying Quit and Relapse Prevention](#)

**Optional Sessions (can be added based on program timeline, group interest and demographic)**

9. [Concurrent Addictions](#)
10. [Mindfulness](#)
11. [Relaxation and Rewards](#)
12. [Healthy Living](#)
13. [Mythbusters \(E-cigarettes/Vaping/Hookah\)](#)

**Format**

Each session is of similar format.

- Welcome
- Establish rules or review
- Review of “try this activity” (if applicable)
- Key message - Activity(s)/Discussion
- Grounding exercise
- Key message - Activity(s)/Discussion
- “Try this” (take home suggestion)
- Closing

Sessions should take approximately 45 minutes to complete.

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## Resources

All sessions require: flip chart, markers, laptop and projector, and the specific materials for the exercises you choose to do during each session (review and plan ahead).

Each session contains session-specific:

- video links
- grounding exercise link
- printable links
- facilitator notes **(in red)**
- list of additional resources required

## Special Considerations

If you decide to deliver only part of the content or in a different order, the “Try This” activity should be omitted.

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## Session 1 – Opening Group

### Welcome

- Introduce yourself and other co-facilitator/co-leader involved with the program.
- Suggest a round of names and how each person is feeling about starting the process.
- Overview of program.

### Rules

- Facilitator leads group to create rules and adds to list if necessary.

### Key message/Activity 1: “Smoking facts – Do you know the numbers?”

1. Facilitator to read smoking fact that includes a number.
2. Participants choose if number is higher or lower (show of hands)  
OR  
Match the statement to the number.

### Facilitator examples

- Second-hand smoke exposure causes disease and death. It will kill more than “X” non-smokers this year in Canada (1000).
- Tobacco use is the leading cause of preventable death. This year it will kill more than “X” people worldwide (3 million).
- Tobacco smoke contains more than “X” chemicals (7000).
- Tobacco products kill approximately “X” Albertans every year (3,400).
- One in “X” Albertans are either current daily or occasional smokers (5).
- There are nearly “X” former smokers in Alberta (1 million).
- If you smoke 1 pack a day you will spend “X” in 1 month (\$283).

### Activity 2: Smoking facts – What is in a cigarette?

1. Discuss ingredients.  
<https://www.albertaquits.ca/learning/online-training/new-module/big-cigarette>  
OR
1. Facilitator can draw a large cigarette.
2. Have pictures of items containing the same chemicals as in cigarettes and ask participants to place pictures onto cigarette.  
OR
1. Use the following instructions to create a “Big Cigarette”.  
Big cigarette instructions: Using a 3 foot long white mailing tube approximately 3 inches in diameter. Use coloured construction paper in the closest colour you can find to a cigarette filter to wrap around the bottom section of the tube.

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You now have a tube which looks like a cigarette that you can add your ingredients to. Use the list of 599 chemicals found in the link below to create examples. Your examples can be in small plastic or glass containers—as long as they are clear so you can easily see what is inside.

2. Have each participant remove a chemical from the cigarette to show the group.

#### Facilitator notes – Ingredient of cigarettes and cigarette smoke

- acetone – paint stripper
- cadmium – car battery
- carbon monoxide – car fumes
- vinyl chloride – garbage bags
- arsenic – rat poison
- benzene – rubber cement
- formaldehyde – embalming fluid
- hydrogen cyanide – gas chamber poison

#### Grounding exercise:

Facilitator leads group in grounding exercise.

[https://www.albertaquits.ca/files/AB/files/library/Grounding\\_Techniques.pdf](https://www.albertaquits.ca/files/AB/files/library/Grounding_Techniques.pdf)

#### Key message/Activity 3 – Readiness

1. Explain the readiness exercise.  
[https://www.albertaquits.ca/files/AB/files/library/Readiness\\_Ruler\\_FINAL.pdf](https://www.albertaquits.ca/files/AB/files/library/Readiness_Ruler_FINAL.pdf)
2. Handout readiness ruler.
3. Ask participant to circle their number on the ruler for each area.
4. Open discussion about readiness ruler.

#### Try this? Tobacco-Use Tracker

[https://www.albertaquits.ca/files/AB/files/library/Tobacco\\_Tracker\\_Modified\(1\).pdf](https://www.albertaquits.ca/files/AB/files/library/Tobacco_Tracker_Modified(1).pdf)

Monitoring when, where and why participants use tobacco.

1. Facilitator explains the goal and technique.
2. Pre-printed copies of tracker sheet can be attached to participant's cigarettes using an elastic band.

#### Close

#### Additional resource needs:

- Big cigarette or pre-printed pictures of chemicals/items OR jars of chemicals
- Elastic bands
- Printed copies of readiness ruler
- Printed copies of tobacco use tracker sheet

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## Session 2 – Triggers and Cravings

### Welcome back

### Rules review

**Try this talk** – Did anyone track their smoking? Did you notice any patterns? Were there times when you smoked for no reason?

- Key point - Awareness

### Key message/Activity 1: “Difference between triggers and cravings”

1. Facilitator discusses difference between triggers and cravings.

#### Facilitator Notes:

- Triggers – times, places, situations, feelings that trigger your urge to smoke. For example, smelling cigarette smoke, a stressful situation, when you get into your car.
- Cravings – your body’s urge to smoke in response to decreased nicotine levels in your brain.

### Activity 2: Open brainstorm of triggers – (Can use pictures or words or both)

1. Facilitator has group members brainstorm triggers and records on flipchart.  
OR
1. The group members write or draw triggers on the flipchart.
2. Facilitator reviews triggers, asking if that is also a trigger for each person in the group.
3. Facilitator to let group know that not everyone will have the same triggers but also highlight that there may be common ones as well.

**Discussion** – Introduce the 4D’s.

#### Facilitators notes:

Goal of the four D’s is to help curb the urge to use tobacco.

1. Delay – a strong urge to use tobacco lasts about three minutes
2. Deep breath
3. Drink – water
4. Do – something else to take your mind off the urge

**Grounding exercise:** [https://www.albertaquits.ca/files/AB/files/library/Grounding\\_Techniques.pdf](https://www.albertaquits.ca/files/AB/files/library/Grounding_Techniques.pdf)

Facilitator leads group in grounding exercise.

Suggested activity – Deep breathing (1 of the 4D’s)

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### Key message/Activity 3: Nicotine withdrawal symptoms

- Group brainstorms withdrawal symptoms, facilitator puts up emoji-like pictures or writes on flipchart.
- Facilitator note: include – irritability, frustration, anger, anxiety, trouble concentrating, restlessness, sleeplessness, depression, increased appetite.
- Optional activity – assessing nicotine withdrawal  
[https://www.albertaquits.ca/files/AB/files/library/Assessing\\_Nicotine\\_Withdrawal\\_FINAL.pdf](https://www.albertaquits.ca/files/AB/files/library/Assessing_Nicotine_Withdrawal_FINAL.pdf)

**Discussion** – Nicotine Replacement Therapy (NRT) and prescription medications

\* If you are a non-prescriber who regularly discusses and educates on cessation medication, refer client back to prescriber to counsel on medication suitability, dosage, and medication adjustment.

1. Facilitator to encourage NRT discussion with Healthcare Providers (HCP). \* *Note that there is effect with other medications.*
2. Facilitator provides overview of NRT and prescription medications.

Facilitator notes:

NRT and prescription medications can help with withdrawal symptoms and can help increase your chances of quitting. Your chances increase when medications are combined with programs such as this one.

Nicotine replacement therapy includes the patch, gum, inhalers, and lozenges. Other options for quitting smoking include prescription medications such as Zyban™ and Champix™.

Many people avoid NRT due to myths about its complications or effectiveness. The reality is that NRT works really well to manage the discomfort of withdrawal. When we relieve discomfort, it can help keep us motivated to change the behaviours associated with smoking.

Some Facts:

- Nicotine is addictive, but doesn't cause cancer. Carbon monoxide and carcinogens are harmful, along with 60 known cancer-causing chemicals in cigarettes.
- Qualified HCP's can prescribe doses of NRT higher than 21 mg to increase comfort. Off-label use of the patch is an option to increase levels of nicotine and reduce discomfort of withdrawal. Patches can also be combined with gum, lozenges, or inhalers. With medical consultation Zyban™ or Champix™ can also be combined with NRT.
- Wearing the patch and smoking is safe and poses no additional risk of heart attack. If this were to occur it is most likely only after years of smoking, poor diet, or unhealthy lifestyle.

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## **NRT and medications**

### Patch:

- can be used in 3 steps and in off-label dosages
- can cause nightmares or sleep disruption (to minimize morning cravings instruct to wear for 24 hours if this side effect does not occur)
- can cause mild irritation of the skin generally as a result of the adhesive and not the nicotine
- can fall off in hot weather
- patch provides a level dose of nicotine over a 24-hour period

### Gum and Lozenges:

- delivers nicotine via tissue in the mouth
- park-and-chew method
- common side effect is upset stomach, usually caused by improper use

### Inhaler:

- small tube
- nicotine is inhaled and absorbed through the mouth and throat
- side effects are often a bad taste, burning sensation or throat irritation, upset stomach

### Spray:

- quick release of nicotine via mouthspray
- nicotine is absorbed through lining of the mouth
- side effects include hiccups, stomach upset, bad taste, headache

### Zyban™:

- pill form of medication and does not contain nicotine
- available by prescription

### Champix™:

- pill form of medication and does not contain nicotine
- reduces craving and pleasurable effects of nicotine
- common side effects include nausea, diarrhea, abnormal dreams

## **Try this?**

- Try a 4D
- Talk to healthcare professional about NRT

## **Close:** Participant to take home the following:

NRT sheets

<https://www.albertaquits.ca/helping-others-quit/healthcare-providers/tools-and-resources/download-resources.php#pharmacology-handouts>

4D's sheet

<https://www.albertaquits.ca/files/AB/files/library/D.pdf>

## Additional resource needs:

- printed copies of NRT and 4D's sheets

**Note:** If one-on-one consultation is available, at the end of this session would be a good placement. Also if available staffing at facility, NRT itself can be given out on a session-by-session basis.



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## Session 3 Relationship with Tobacco

### Welcome back

### Rules review

**Try this talk** – Did anyone try a 4D? How did it go? Any success? Anyone discuss NRTs with their HCP?

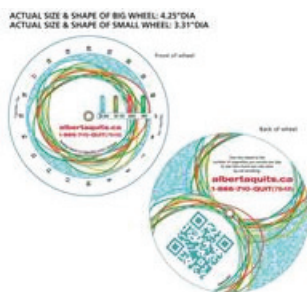
- Key Points – Coping strategies

### Key message/Activity 1: Relationship with tobacco

1. Facilitator explains “My decision to change tobacco” to the group.  
[https://www.albertaquits.ca/files/AB/files/library/Decision\\_to\\_Change.pdf](https://www.albertaquits.ca/files/AB/files/library/Decision_to_Change.pdf)
2. 4 categories:  
Good things about smoking  
Not so good thing about smoking  
Not so good about quitting  
Good things about quitting
3. Participants brainstorms items for each category. Could use pictures... yellow teeth, wrinkles, cold weather, kids breathing it in, gross ashtrays, \$, happy face. Option to have participant(s) be the illustrator (engaging and could inject humor if the drawing is silly or over the top).
4. Facilitator discusses items as the chart is filled.

Facilitator examples: brief explanation why smoking feels relaxing (stimulates the pleasure centre of the brain – serotonin release) or could introduce the cost wheel, which can be ordered online.

<https://www.albertaquits.ca/helping-others-quit/healthcare-providers/tools-and-resources/order-online>  
you are looking for a resource which looks like this:



Tobacco 071

Online saving calculator on AlbertaQuits

<https://www.albertaquits.ca/quitting/calculate-my-savings>

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## Grounding exercise

[https://www.albertaquits.ca/files/AB/files/library/Grounding\\_Techniques.pdf](https://www.albertaquits.ca/files/AB/files/library/Grounding_Techniques.pdf)

Facilitator leads group in grounding exercise.

### Key message/Activity 2: Motivation

1. Participants pick a good thing about quitting.
2. Participant write it down or draw their pick.
3. Facilitator encourages sharing and advised them to display it or carry their pick with them as motivation.
4. Facilitator can also introduce motivational techniques – butt jar, money jar, picture of kids or loved one.

Facilitator notes:

#### The Butt Jar

Goal: to give a powerful negative experience of cigarettes and smoking.

Technique:

1. Set aside a large clear jar or bottle with some water in the bottom. Keep the jar in a place where it can be easily seen.
2. Carry a small plastic bag and collect your cigarette butts in it. Empty the bag into the jar once home.
3. If you use an ashtray, empty the cold butts and ashes into the jar.
4. Open the jar and smell the contents regularly.
5. Keep the butt jar and contents and smell regularly even once quit to remind yourself why you quit.

\*\*\*keep jar away from children and pets as it could be toxic to them!

#### The Money Jar

Goal: Visual cue of how much tobacco use cost and to provide funds for future external rewards when quit or reducing tobacco use.

Technique:

1. Set aside a jar.
2. If already quit, at the end of each day put in the amount of money that would have been spend on tobacco.
3. If cutting back, put in the amount that cutting back saved.
4. Record the amount.
5. At the end of a week count the total amount saved.
6. Use the money to buy a reward or save for something big.

**Try this** – display your motivation or good thing

Additional resource needs:

- Pictures – yellow teeth, etc..
- Paper and markers for participant's motivation or good thing pick

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## Session 4 – Coping with Feelings

### Welcome back

### Rules review

**Try this talk** – Where did you place your picture? Did you try something else?

- Key point - Motivation

### Key message/Activity 1: Psychological recovery symptoms

1. Facilitator introduces what psychological recovery symptoms are.
2. Group shares negative emotions and facilitator charts on flipchart.
3. Facilitator directs group to think of ideas to cope with these feelings.
4. Facilitator writes ideas on precut strips of paper applies adhesive then invites the group member who provided idea to paste over a negative feeling.

#### Facilitator Notes:

Psychological recovery symptoms = emotional symptoms/feeling.

Some may be positive as well.

Irritability – things bother you more, may feel deprived. Remedy: be good to yourself, care for yourself

Anger – anger could have been a trigger to use tobacco so now you may not know what to do with that anger. Remedy: learn constructive ways to release anger, like talking it out or exercising. Try not to let anger build.

Crying – part of you liked using tobacco so you may be sad or there sad feeling that have been held inside may need to come out. Remedy: Let these feelings come out in a safe place, at home or with a friend or loved one.

Laughter – positive feeling are also close to the surface. Remedy: enjoy

### Key message/Activity 2: Sneaky thoughts

1. Facilitator discusses what a sneaky thought are
2. Participants brainstormed ways to counter sneaky thoughts
3. Facilitator reinforces techniques like a support person and rewards

#### Facilitator notes:

Sneaky thoughts are the addictions attempt to get you using tobacco again. Knowing that they are sneaky thoughts gives you power to ignore them.

Examples: “I’ll just have one”, “It’s been two weeks, it’s safe for me to use tobacco again once”, “It’s too hard”, “I’m not worthy”

### Grounding exercise

[https://www.albertaquits.ca/files/AB/files/library/Grounding\\_Techniques.pdf](https://www.albertaquits.ca/files/AB/files/library/Grounding_Techniques.pdf)

Facilitator leads group in grounding exercise.

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### Key message/Activity 3: Resilience

1. Facilitator has two group members stand holding a resistance band between them.
2. Facilitator states to group: 'Life can throw some really hard times – what are some of these things?' As group members name things, ask the members holding the resistance band to take a small step back as hard times are named until it becomes stretched out.  
Examples: illnesses, accidents, divorce/break-ups, death of a loved one, job loss
3. Ask the participants holding the band to come back to its original form and proceed to info share/discussion.

#### Facilitator notes:

- Resilience is the term used to describe the power or ability to return to an individual form after being bent, stretched or compressed - just like this resistance band did.
- There is a whole theory about what enables humans to bounce back after hard times rather than break. Here are some suggested strategies:

Pump Up Your Positivity: Resilient people are able to find a silver lining even in the worst of circumstances. They can set aside negative events and acknowledge what they are grateful for.

Live to Learn: The more you can use challenges and obstacles as opportunities for learning, growth and development the more resilient you become. What did I learn? What could I do differently next time?

Open Your Heart: Being of service to others is a powerful way of building resilience. Acts of kindness, and the serotonin boosts that accompany them, have a cumulative effect. The benefits become exponential so you actually have a 'well' of resilience to draw upon during tough times.

Take Care of Yourself – Good health and a regular routine of healthy habits are the foundations to both mental and emotional resilience. Nutrition, exercise, sleep, managing stress all help us bounce back from adversity.

Hang on to Humour – Laughing in the face of adversity can be profoundly pain relieving both for the body and the mind. It relieves tension and can be very empowering – creating a feeling of “this problem is my play thing – I am bigger than this and won't let it bring me down”

*(Source: The 5 Best Ways to Build Resiliency, Jessie Scholl, Experience Life)*

4. Facilitator asks discussion question: - “What has helped you get through tough times and be resilient?”

**Try this** – Name a support person or try a reward.

### Close

Additional resource needs:

- Paper strips and tape or glue
- Resistance bands

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## Session 5 – Stress

### Welcome back

### Rules review

**Try this talk** – did you try a reward?

- Key point - Motivation

### Key message – Stress

1. Facilitator shows “My decision to change tobacco” chart from previous week and points out stress.
2. Facilitator reviews why a smoker does feel initially more relaxed but also why this doesn’t last.

Facilitator notes: Within seconds of inhaling cigarette smoke, nicotine reaches the brain. Overtime the brain adjusts to the nicotine and you need more to get the same feeling or effect. Eventually your brain will adjust and no longer produces that same feeling.

### Activity 1: Stress video

<https://www.youtube.com/watch?v=hnpQrMqDoqE&sns=em>

### Activity 2: Stress stick person

<https://www.albertaquits.ca/files/AB/files/library/Stickpeople.pdf>

1. Participants given paper with preprinted stick person on both sides.
2. Facilitator asks participants to draw stressors and/or how they feel when experiencing stress.

**Discussion** – Does anyone want to share their picture? (Participants can be rewarded with a stress ball for sharing)

### Grounding activity

[https://www.albertaquits.ca/files/AB/files/library/Grounding\\_Techniques.pdf](https://www.albertaquits.ca/files/AB/files/library/Grounding_Techniques.pdf)

Facilitator leads group in grounding exercise.

### Activity 3: Managing stress

1. Brainstorm ways to reduce or manage stress (other than smoking). Participants can be rewarded with a stress ball for giving an answer.

Facilitator examples: physical activity, healthy eating, write down feeling, relaxation techniques, saying “no”, walking away, planning, letting go.

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#### **Activity 4: Stress-free stick person**

<https://www.albertaquits.ca/files/AB/files/library/Stickpeople.pdf>

Participants use the other side of paper to draw what having less stress looks and/or feels like.

1. Participants take home sheet.

**Try this?** Choose an idea to reduce stress and try it.

#### **Close**

#### **Additional resource needs:**

- “My decision to change tobacco” chart from previous session (3)
- Stress balls

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## Session 6 – Stress

### Welcome back

### Rules review

**Try this talk** – Does anyone want to share about their coping strategy for stress?

### Key message/Activity 1 – Readiness

[https://www.albertaquits.ca/files/AB/files/library/Readiness\\_Ruler\\_FINAL.pdf](https://www.albertaquits.ca/files/AB/files/library/Readiness_Ruler_FINAL.pdf)

1. Redo readiness ruler from previous session.
2. Discussion - Did anyone's answers change from the first day?

### Discussion/ Activity 2 – My change plan

1. Facilitator introduces plan and why we plan. Reminds group that it can evolve and change just like their answers for the readiness ruler. Smoking cessation is a journey.
2. Handout change plan.  
[https://www.albertaquits.ca/files/AB/files/library/Tobacco\\_Change\\_Plan.pdf](https://www.albertaquits.ca/files/AB/files/library/Tobacco_Change_Plan.pdf)
3. Assist participants in adding triggers, coping ideas, rewards.

### Grounding exercise

[https://www.albertaquits.ca/files/AB/files/library/Grounding\\_Techniques.pdf](https://www.albertaquits.ca/files/AB/files/library/Grounding_Techniques.pdf)

Facilitator leads group in grounding exercise.

### Activity 2 continue – My change plan

1. Facilitator discusses a change/quit date.
2. Facilitator defines rewards and supports.
3. Group discuss ideas.
4. Facilitator reminds group that the change plan can evolve or change.

### Try this?

- Choose a reward or support for your change plan.
- Share your change plan with support person.

**Close:** Give participants a copy of change plan to take away.

Facilitator should also keep a copy or take a picture with phone for record.

**Optional activity:** Video: How to quit smoking-picture fit.

<https://www.youtube.com/watch?v=SXi77ggQlmg&sns=em>

### Additional resource needs:

- Pens/pencils
- Photocopier or phone for digital copy of change plans

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## Session 7 – Benefits of quitting

### Welcome back

### Rules review

**Try this talk** – Did anyone work on their change plan? Set a date? Pick a support?

### Key message – Recovery symptoms

#### Activity 1 – Video: quitting smoking timeline (quit smoking.com)

<https://www.youtube.com/watch?v=fLbQfMmrlSE&sns=em>

#### Activity 2

1. Facilitator preprint chart with three headings - symptom/why it occurs/coping, then cover different sections prior to session.
2. Facilitator introduces chart.  
[https://www.albertaquits.ca/files/AB/files/library/Nicotine\\_Withdrawal\\_FINAL.pdf](https://www.albertaquits.ca/files/AB/files/library/Nicotine_Withdrawal_FINAL.pdf)
3. Participants guess covered section answer.

#### Grounding exercise

[https://www.albertaquits.ca/files/AB/files/library/Grounding\\_Techniques.pdf](https://www.albertaquits.ca/files/AB/files/library/Grounding_Techniques.pdf)

Facilitator leads group in grounding exercise.

#### Key Message/Activity 3 – Sleep promotion

- Facilitator reads do's or don'ts for sleep promotion.
- Participants can thumbs up or down (or have paddles [Online Resource Folder](#)) to guess if it is a do or don't.

Facilitators notes: – Sleep Promotion

Go to bed and awake up at the same time every day (**DO** – a regular schedule to help regulate your body's inner clock).

Keep the bedroom dark (**DO**).

If you cannot sleep, just keeping lying there (**DON'T** – if unable to sleep getting up and doing something relaxing like knitting or reading until you feel sleepy instead of lying in bed worried about getting sleep).

Nap in the daytime (**DON'T** – napping tends to fragment sleep at night).

Mask noises with a fan (**DO**).

Exercise regularly (**DO** – but avoid vigorous activity later than three hours before bedtime).



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Avoid caffeine (**DO** – all caffeine containing beverage after lunch...coffee, tea, some soda).  
Ask a snoring or restless partner to sleep elsewhere temporarily (**DO** – until sleep patterns are better).  
Drink wine to relax before bed (**DON'T** – avoid alcohol before bedtime. When alcohol wears off during the night you may have periods of wakefulness).  
Sleep with the TV on (**DON'T** learn to use and associate the bedroom for sleeping only, not watch tv or working).  
Wear loose fitting nightclothes (**DO** – be comfortable).

### **Key message – Benefits of quitting**

#### **Activity 4 Video – What happens when you stop smoking (asap science)**

<https://www.youtube.com/watch?v=o3lOmJ2RfU0&sns=em>

#### **Activity 5 – Match game**

- Facilitator provides chart with quit benefits and times [Online Resource Folder](#).
- Participants match times to body related benefits of smoking.

**Try this?** Try an idea for sleep promotion.

#### **Close**

#### **Resource needs:**

- Paper covers for answer reveal (activity 2).

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## Session 8 End Game – Staying quit and Relapse Prevention

### Welcome back Rules review

**Try this talk** – Did anyone try an idea for sleep promotion?

### Key message – Relapse/Slips

1. Facilitator discusses relapse

Facilitator notes:

Nearly 50% of Canadian smokers reported they tried to quit 1 or more times in the past year.

Relapses or lapses are a part of the process and can be common.

Ask what happened?

Can I prevent that situation?

What can I do when I am in that situation again?

Potential causes of relapse (interpersonal conflicts, social pressure, negative emotional states, urges).

### Activity 1 – If I were...

1. Facilitator asks group “If I were to relapse.....it would most likely be in the following situation.”
2. Group shares thoughts.

### Activity 2/ Key message – Quit renewal

1. Each person renews reason to quit or stay quit.

### Grounding exercise

[https://www.albertaquits.ca/files/AB/files/library/Grounding\\_Techniques.pdf](https://www.albertaquits.ca/files/AB/files/library/Grounding_Techniques.pdf)

Facilitator leads group in grounding exercise.

### Activity 3 – Technique or Toxin

1. Group member pulls a technique (rewards, 4D’s healthy eating, sleeping well, money jar, avoiding triggers, etc) or toxin (“one cigarette won’t hurt”, stress, “I can’t do this”, other negative or sneaky thoughts) from the jar/hat and places it on the flip chart under happy face or a skull & cross bones.
2. Open discussion on what techniques people have tried.

### Activity 4 – Fill your toolkit

- Group members given labeled quitkit.

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Order KIT008 from online order catalogue

<https://www.albertaquits.ca/helping-others-quit/healthcare-providers/tools-and-resources/order-online>

- Group members then fill their kit with additional information they want (4D's sheet, grounding exercises, ways to decrease stress, nutrition handouts).
- Referral to ABQuits by fax <https://www.albertaquits.ca/helping-others-quit/healthcare-providers/fax-referral-program.php>.

## **Close**

### **Additional resources needs:**

- Additional information Online Resource Folder
- Additional nutrition handouts
- Pre-written technique or toxin
- Jar or hat

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## Optional Session – Concurrent Addiction

### Welcome back

### Rules review

**Try this talk** – when adding additional optional sessions alter the try this talk to reflect the previous session.

### Key message/Activity 1 – Defining addiction and pinpointing stages

1. Facilitator ask group to define addiction, write group answers as well as below answer on the flipchart.

Facilitator notes:

Addiction: a primary, progressive, chronic condition that is characterized by impaired control over use of the substance/behaviour, preoccupation with the substance/behaviour, use of the substance/behaviour despite adverse consequences, and distortions in thinking.

2. Facilitator writes stages on the flip chart and discusses.



**Stages of Addiction** – Addiction, like other processes in life fall somewhere along the line of a continuum.

**Abstention** – not engaging in any substance use or potentially addictive behaviours (gambling, internet, sex etc.).

**Experimentation** – engaging in the behaviour or substance use to see “what it’s like”.

**Social Use** – people use substances socially (in social settings, to acceptable group/ social norms).

**Abuse** – individuals engage in the behaviour or use substances for a purpose (experience the short-term positive consequences) People often begin the denial process here, making up rationales or excuses to engage in addictive behaviour.

**Addiction** – the primary indicator of addiction is loss of control over the use – the acquisition, rituals, and use of substance is the central focus of the addict.

3. Group member use a pin or colored sticker and place it on the stages chart where their addiction(s) are.

### Key message/Activity 2 – Post acute withdrawal rollercoaster

1. Facilitator introduces what post-acute withdrawal means

Facilitator notes:

Post-acute withdrawal feels like a rollercoaster of symptoms. In the beginning, your symptoms will change minute to minute and hour to hour. Later as you recover further they will disappear for a few weeks or months only to return again. As you continue to recover the good stretches will get longer and longer. But the bad periods of post-acute withdrawal can be just as intense and last just as long.

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Post-acute withdrawal can be a trigger for relapse. You'll go for weeks without any withdrawal symptoms, and then one day you'll wake up and your withdrawal will hit you like a ton of bricks. You'll have slept badly. You'll be in a bad mood. Your energy will be low. And if you're not prepared for it, if you think that post-acute withdrawal only lasts for a few months, or if you think that you'll be different and it won't be as bad for you, then you'll get caught off guard. But if you know what to expect you can do this.

2. Facilitator draws rollercoaster outline.
3. Facilitator directs group to think of post-acute withdrawal symptoms and writes on chart. (Include Mood Swings Anxiety, Irritability, Tiredness, Variable energy)



### Key message/Activity 3 – Early recovery sandwich

1. Facilitator discusses that there are steps, ways or layers to add to promote in recovery.
2. Facilitator relates early recovery to the parts of a sandwich.
3. Facilitator writes BLT with Cheese “C” underlined on flip chart then discussion and elaborates on letters.

Facilitator notes:

**“B”elieve change can happen:** I want to commend you for making the courageous choice to come to treatment, even if you are someone who is here due to external pressures; you still had a choice and right this minute you are choosing to stay in treatment and learn about your own change process.

**“L”earn Something New:** If you want to stop using tobacco when you are angry, bored or frustrated, you need to learn to do something else instead. We can only do what we know; we will do differently when we know differently.

**“T”ake Healthy Risks:** Taking healthy risks is an important part of making change. Although it can be very uncomfortable, if you are not willing to take a risk to do something different nothing will change.

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With Cheese... **Make a decision to “C”hange:** the decision to change is a personal decision that cannot be forced on you. Consider your life prior to treatment and ask yourself if you want to change.

### Grounding exercise

[https://www.albertaquits.ca/files/AB/files/library/Grounding\\_Techniques.pdf](https://www.albertaquits.ca/files/AB/files/library/Grounding_Techniques.pdf)

Facilitator leads group in grounding exercise.

1. Facilitator play soft music.
2. Ask participants to close their eyes.
3. Lead group in deep breathing and read key point below.

You don't recover from an addiction by stopping using.

You recover by creating a new life where it is easier to not use.

Stopping all substances at one time promotes the best success of abstinence from all drugs, alcohol, and tobacco.

### Discussion/ Key message – Starting recovery discussions

1. Facilitator lead discussion on recovery points below.

Recovery is based on action. Abstinence (not using substance or engaging in addictive behaviours) is only the first step in achieving recovery. Recovery is the changes you make daily in your lifestyle that promote staying abstinent while gaining awareness and strength to live a recovering lifestyle. Some ways you can begin to work on your recovery from addiction is:

- **Reasons for Use:** What are the issues that fuel the addiction?
- **High Risk Situations:** What areas are you at risk to relapse?
- **Dealing with Cravings:** What are some ways you plan to deal effectively with cravings?
- **Developing Support Systems** (groups, peers, counselors, life coaches, doctors, therapists, sponsors, etc.)
- **Stress Management** (learn ways to manage stress in healthy ways)
- **Resolve Emotional Turmoil** (learn emotional management techniques)
- **Maintain Level of Motivation** (just like someone may not continue to use for the same reasons they began to use, the motivation for recovery and staying abstinent may change over time).

2. Group can brainstorm strategies and give personal answers to each point.

**Try this?** Identify a reason for use or high risk situation.

### Close

#### Resource needs:

- Stickers or pins
- Music

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## Optional Session – Mindfulness

### Welcome back

### Rules review

**Try this talk** – when adding additional optional sessions alter the try this talk to reflect the previous session.

### Key message/Activity 1 – Mindfulness

- Brief discussion on if anyone is noticing when, where, or why they are reaching for a cigarette.

### Activity 2 – Mindfulness video

<https://www.youtube.com/watch?v=Elz0LN9OT3Q&index=20&list=PL9B6508D815B3816D>

### Grounding exercise

[https://www.albertaquits.ca/files/AB/files/library/Grounding\\_Techniques.pdf](https://www.albertaquits.ca/files/AB/files/library/Grounding_Techniques.pdf)

Facilitator leads group in grounding exercise.

### Key message/Activity 3 – Behaviour modification

1. Facilitator writes two categories – where and when.
2. Group can brainstorm where they smoke and when they smoke.  
Example where: in my car  
Example when: with my coffee
3. Next have group think of ways to separate the smoke from the where and when.  
Example: smoke in my kitchen – place lighter in basement and cigarettes in car.  
Example: smoke somewhere you are not comfortable, like in garage standing versus in comfy chair.
4. Facilitator to highlighting the importance of separating smoking from pleasurable activity or thing.

**Try this?** Identify a reason for use or high-risk situation.

### Close

### Additional resource needs:

- None

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## Optional Session – Relaxation and rewards

### Welcome back

### Rules review

**Try this talk** – when adding additional optional sessions, alter the try this talk to reflect the previous session.

### Key message – 4D's (DELAY, DEEP BREATH, DRINK, DO)

- Brief discussion on if anyone is noticing when where or why they are reaching for a cigarette.

#### Activity 1 Delay

- Facilitator explains activity and sets timer for three minutes.

#### Activity 2 Delay

- 3 minute video – Facilitator plays video (bloopers, crazy cat, something humorous and not related to smoking)

#### Activity 3 Deep breathing

- 3 minutes in which facilitator discusses relaxation skills, why they are important, how it takes practice, how not everyone likes the same technique.

#### Activity 4 Deep breathing

- Facilitator leads visualization technique for 3 minutes.  
[https://www.albertaquits.ca/files/AB/files/library/Grounding\\_Techniques.pdf](https://www.albertaquits.ca/files/AB/files/library/Grounding_Techniques.pdf)

#### Activity 5 Drink

- Participants given water bottles and blank labels and markers.
- Participants given three minutes to customize label while song plays.

#### Activity 6 Do something

- Facilitator sets timer for three minutes.
- Group rushed to give “Do” ideas with the 3 minutes.

### Key Message/Discussion: Rewards

- Facilitator discusses rewards and why they are important.
- Group suggests reward ideas.

**Try this?** Choose and personal relaxation technique or a reward.

**Close** – Facilitator asks group why everything was timed to 3 minutes? (This is average craving time. A “D” doesn’t have to take long to have impact.)

### Optional activities

Participants given a paper with a large block letter “D” printed on it, and pens, asked to fill with personalized “D” ideas.

### Additional resource needs:

- Large block “D” <https://www.albertaquits.ca/files/AB/files/library/D.pdf>
- Water bottles and blank labels
- Timer (can use phone)



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## Optional Session – Healthy living

### Welcome back

### Rules review

**Try this talk** – when adding additional optional sessions alter the try this talk to reflect the previous session.

### Key message – Weight gain

1. Facilitator if possible can reference a point in previous sessions where concern of weight gain was raised, if not can pose the question (leading) to open discussion.

### Activity 1/Key message – Healthy eating/Choices game

1. Facilitator draws two columns healthy choice/not so healthy choice.
2. Facilitator show picture of food choice.
3. Group picks what category it goes in.  
Or
  1. Facilitator brings in empty containers and food items (milk carton, chip bag).
  2. Items are then placed on a table and the group works together to separate the items into to healthy vs not so healthy choices.

### Activity 2

1. Facilitator leads group brainstorm tips for healthy eating. For example, less sugar, less salt, buying food from the parameter of grocery store, preparing food (bake versus frying).

### Grounding exercise

[https://www.albertaquits.ca/files/AB/files/library/Grounding\\_Techniques.pdf](https://www.albertaquits.ca/files/AB/files/library/Grounding_Techniques.pdf)

Facilitator leads group in grounding exercise—this session choose an activity that is physical.

### Activity 3/Key message – Exercise

<http://www.csep.ca/en/guidelines/guidelines-for-other-age-groups>

1. Group/facilitator gives inexpensive exercise ideas.
2. Stress the exercise doesn't necessarily mean going to the gym, bodybuilding etc. it is as easy as walking.

### Activity 4/Key message – Components of healthy living

- Facilitator draw circle in middle of flip chart and labels it “Health”.
- Ask participants for things that make up good health.
- Participants can add the answers (sleep, stress management, medications etc.) as a petal to create a flower.

[https://www.albertaquits.ca/files/AB/files/library/Health\\_Flower\\_Template.pdf](https://www.albertaquits.ca/files/AB/files/library/Health_Flower_Template.pdf)

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**Try this?** Participants given a paper plate with food guide choices and the portions to fill your plate. Ask participants to use as a guide for meals.

[https://www.albertaquits.ca/files/AB/files/library/if\\_nfs\\_what\\_is\\_a\\_healthy\\_portion\\_size.pdf](https://www.albertaquits.ca/files/AB/files/library/if_nfs_what_is_a_healthy_portion_size.pdf)

**Close**

**Additional resource needs:**

- Pictures of food choices or empty containers
- Glue stick or tape

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## Optional Session – Mythbusters (Vaping, hookah and more)

### Welcome back

### Rules review

**Try this talk** – when adding additional optional sessions alter the try this talk to reflect the previous session.

### Key message – Marketing

#### Activity 1 – Video

<https://youtu.be/tsUfcLJBV5Y>

<https://youtu.be/TOKc6TNwlj4>

1. Facilitator shows video.
2. Discusses how commercials could say anything, how they misused safety in these commercials to promote their product. How this relates to today... YouTube videos about the safety of vaping. Consider the source...is it credible? Are they selling the product or will make money for the sale of vaping supplies? Are there regulations to a video post on YouTube? (like the tv commercials of the past)

#### Key Message/Activity 2 – Mythbusters

1. Facilitator reads statements about e-cigarettes/vaping/hookah.
2. Participants use paddle to vote thumbs up/down.

**Thumb up/down paddles** – [Online Resource Folder](#) direct to paddles.

#### Facilitators notes:

- Common contents include a mix of water and propylene glycol, a man-made product used in antifreeze. (t)
- E-cigarette vapour is just water, therefore safe to the person vaping and everyone around them (f) – tests on these products have shown they can contain toxic chemicals, which may irritate the lungs and/or make asthma worse. More research needs to be done to understand the impact of being exposed to these chemicals over time.
- All hookah and e-cigarettes are regulated and labelled to say if there is nicotine or not. (f) While hookah/e-juices are sometimes tobacco-free, testing shows that even products that say tobacco-free may have tobacco (and therefore nicotine) in it. There are no regulations on labelling at this time.
- Nicotine is poisonous and is easily absorbed if swallowed or spilled on the skin. (t) A small amount of e-liquid can be harmful, or even fatal, to a young child.

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- Flavoured e-juices are safe to use. (f)
  - Traditional hookah is a mix of tobacco, glycerin and/or honey. (t)
  - Smoke from hookah has been linked to diseases that are usually seen when you smoke cigarettes. (t)
  - hookah is safer than using other tobacco products because of the water in the base of the pipe. (f)  
The water doesn't act as a filter. In fact, the World Health Organization found that a hookah user may inhale as much smoke in a 1 hour session as someone who inhaled 100 or more cigarettes.
  - Burning hookah, including hookah that is tobacco-free, still creates cancer-causing chemicals. (t)  
Both the first-hand and second-hand smoke produced by herbal shisha contained these known cancer-causing agents at levels equal to or greater than that of tobacco products.
  - Washed hookah has less nicotine in it. (f)  
Sometimes hookah is marketed as "washed". This doesn't affect the nicotine level or make it safer.

### **Grounding exercise**

[https://www.albertaquits.ca/files/AB/files/library/Grounding\\_Techniques.pdf](https://www.albertaquits.ca/files/AB/files/library/Grounding_Techniques.pdf)

Facilitator leads group in grounding exercise.

### **Key Message/Activity 3 – Second- and third-hand smoke**

1. Facilitator defines second- and third-hand smoke.
2. Facilitator shows second- and third-hand smoke picture in [Online Resource Folder](#).  
Participants decide which things are a second-hand exposure vs a third-hand.

**Try this?** Think of a way to reduce or eliminate second- or third-hand exposures in your home.

### **Close**

### **Resource Needs**

- None



Tobacco Reduction  
Program

1-866-710-QUIT (7848)  
[albertaquits.ca](http://albertaquits.ca)