

It's Never Too Late To Stop: Tobacco Cessation for Senior Citizens



Objectives:



Identify stages of change and types of senior smokers



Describe sessions of comprehensive curriculum and intervention strategies targeting seniors



Identify types of screenings for participants



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Experiences with the program:



Senior citizens need more group support



and frequent encouragement to change behavior



Curriculum components could be expanded to a 12 week behavior modification program



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The Challenges...

- Develop a draft cessation curriculum
- Field test the curriculum
- Research to further construct a model cessation program



Can you Imagine?

- **Giving up smoking after 50 years**
- **Giving up coffee after 50 years**
- **Giving up chocolate after 50 years**

- **How would you deal with changing your behavior and what kind of programs would be available for help?**

Stages of Change (TTM)

- Pre-contemplation
- Contemplation
- Preparation
- Action
- Maintenance

Seniors and Smoking

- Lowest smoking prevalence of all age groups; Highest rate of those in maintenance stage
- Gain in total number of senior smokers
- Fewer interested in quitting (57.1 vs. 68.2)
least likely to have tried to quit in past year
- More at preparation stage

Stage of Change Distribution for Current Smokers

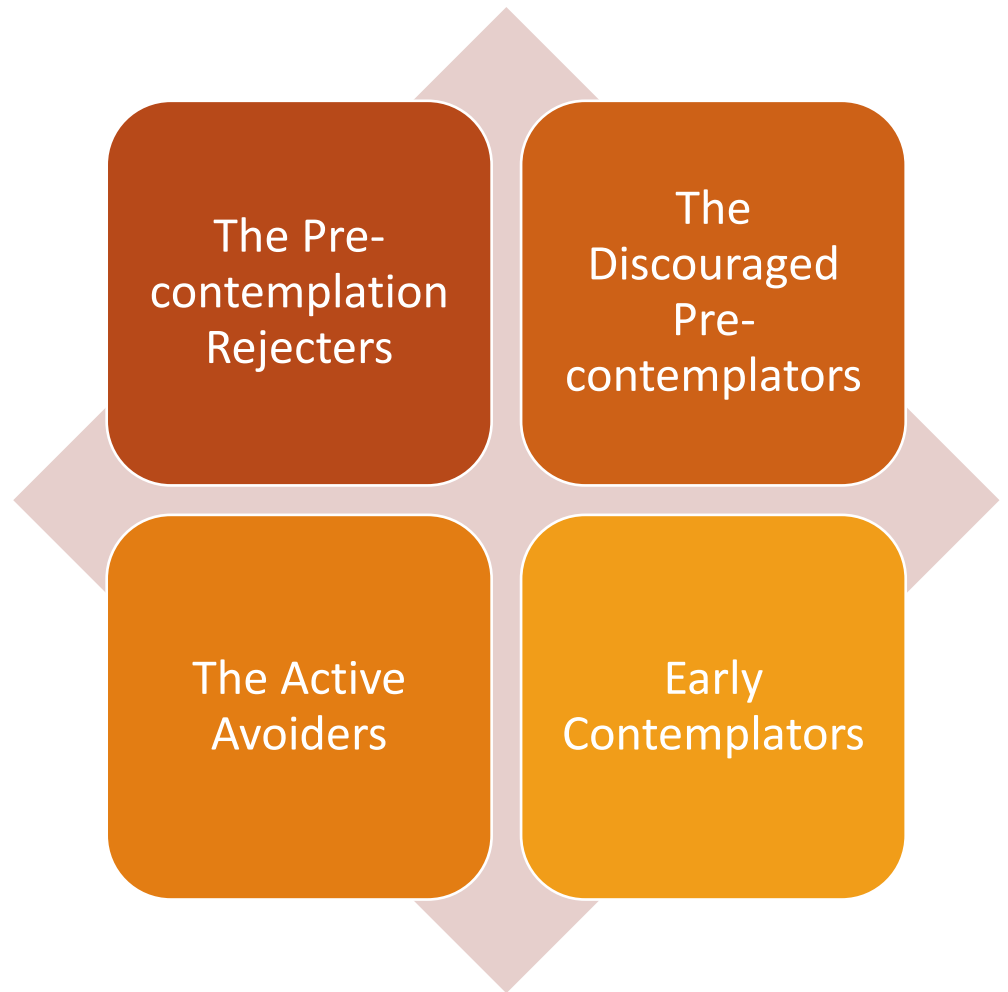
Distribution of Current Smokers by Stage of Change

	Prec	Con	Prep	N
< 55	42.69	38.68	18.64	4062
55-64	39.02	36.83	24.15	410
65+	44.69	27.43	27.88	226
Total	42.46	37.97	19.56	4698

Statistics	Value	df	P-value
Chi-square	22.905	4	0.000
Wilks' G ²	22.426	4	0.000

Data derived from Nigg et al, p 476

Sub-types Among Senior Smokers



Rejecters



Discouraged



Highly
addicted

Heavy
smokers

Multiple
lifetime
quits

Conditional
intention to
quit

Active Avoiders

Moderate to low
addiction

Moderate to light smokers

Long term or vague intent
to quit

Few or no quit attempts OR
has multiple prolonged
stops with restarts

**Early
Contemplators**

Classic “contemplation stage”

Health event or externally driven

Shorter-term intent to quit

Implications for Cessation Programming

- Cessation intervention must start at the pre-contemplation stage
- Establish “ask, assess, advise, assist” in community-based settings
- Train staff to use client-centered counseling to support movement toward cessation
- Use simple “typing” protocol; Build in richer reinforcement for movement

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- **Curriculum Development**
- **and Session Content**

Program Content

Targets seniors;
local advertising

Pre-and post-
health screening
and questionnaire

1 hour sessions
weekly for four
weeks

6 weeks of
nicotine
replacement
therapy

Session 1: Thinking About Quitting

Thinking about quitting

Reasons seniors want to quit

Reasons they smoke

- Habit
- Psychological dependence
- Physical addiction

Set a Quit Date!

Session 2: Understanding How to Quit

Health hazards (Acute, Long-term, and Environmental)

Why quit after this long?

Stages of quitting and ways to stop

Quit tips

Let them talk!

Session 3: Understanding Withdrawal and Avoiding Weight Gain

History of
failure

Cravings and
stress

Weight gain and
how to avoid it

Eating habits
and exercise

How to cope
with withdrawal
symptoms

Let them talk!

Session 4: Understanding Relapse

- Handling a relapse and tips to cope with urges
- Common triggers
- Marking progress
- Rewards from quitting

**Let them know they CAN do it
and stick with it!**

Tips for success

- Advertise locally – TV, Radio, Flyers
- Congratulate them on even “small” improvements!
- Give them a certificate!
- Encourage the development of a support group!

Let them talk!

Conclusions

- Cessation intervention must start at the Pre-contemplation stage
- Congratulate participants on small successes
- Group support is important to participants
- Let participants talk
- Health screenings are important to show participant's health improvements