



# Tobacco Cessation Program

Navy Environmental Health Center, Health Promotion, 2510 Walmer Ave, Norfolk VA 23513-2617;  
voice (757) 462-5599 (DSN 253) Fax: DSN 444-1345; homepage: [www-nehc.med.navy.mil/hp/tobacco/index.htm](http://www-nehc.med.navy.mil/hp/tobacco/index.htm)

# Quit to Win



## A Key Ingredient in Force Health Protection

Guest Editors:

C. Keith Haddock, Ph.D.

Kevin Hoffman

University of Missouri – Kansas City

Mid America Heart Institute

Saint Luke's Hospital

Kansas City, Missouri



**An Amazing Drug.** We have a new medication that we would like to have added to your hospital's pharmacy. We are very excited about this new drug because it dramatically improves a patient's health in a number of areas. If you gave our drug to everyone entering the Navy you would reduce dropouts in the first year of duty by 80%. Patients who take the drug would significantly reduce the chances of injuries to their bones and muscles during strenuous activity. This drug dramatically improves work productivity and reduces time away from work. Giving this drug to everyone in the Department of Defense would save almost a billion dollars in health care costs and would reduce early death among its personnel and retirees by 16%. Would you be interested in having this drug on your hospital's formulary? You might be thinking, well, this sounds good, but a drug with that powerful of an impact must cost a fortune! On the contrary, one of the best things about this drug is that it actually saves money. An E1 to E4 taking the drug will actually add 1 month of basic pay to their earning every year. If that weren't enough, our focus groups tell us that Naval personnel would actually improve their

attractiveness to others if they took the drug. How long do you think it would take to convince your command leadership to add this drug to the pharmacy? Luckily, this drug is already available at every base – smoking cessation.

One of the single best ways to promote force health protection in the Navy is by reducing tobacco use. The scientific literature linking tobacco to serious health consequences and death is vast and undisputed. **Tobacco is the only legal consumer product which will harm you if used as directed.** It has been estimated that each pack of cigarettes sold in the United States results in \$7.18 of increased healthcare costs. In the military, the health impact of smoking on readiness is troubling. Simply put, smoking and maintaining a high state of readiness are incomparable. Unfortunately, not enough has been done to combat this dangerous drug in the military.

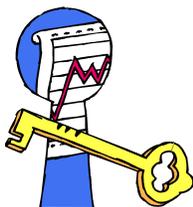
**Some Troubling News About Smoking in the Military.** You may have been one of the lucky service members asked to complete a survey about health behaviors such as alcohol use, depression, physical activity, and smoking. The 2002 DoD Survey of Health Related Behaviors Among Military Personnel has recently been released and is the eighth in a series of DoD surveys conducted since 1980. From this survey we learned some troubling facts about tobacco use in the military:



- Cigarette smoking remains a common behavior in one-third of military personnel. The statistically significant increase from 1998 to 2002 in the prevalence of cigarette smoking marks

the first increase since 1980 and is of concern in that it signals a change in a pattern of declines that has prevailed for the past 2 decades.

- Among past year smokers in 2002, 49% had previously tried to quit, and 10% quit within the past year. Some 35.6% of current smokers indicated that they planned to quit within the next 30 days, and an additional 26.4% reported an intention to quit within the next 6 months.
- Overall in 2002, 12.2% of military personnel had used smokeless tobacco in the 30 days prior to the survey, and nearly one in five had used it in the past 12 months. The prevalence rate of past month use among males aged 18 to 24 was 17.1%, a somewhat lower but statistically nonsignificant change from 19.0% in 1998 and 21.9% in 1995.



The bad news is that tobacco addiction remains a big problem in the military. However, there is very good news – most tobacco users want to quit.

**Then Why Don't They Just Quit?** Why don't smokers just quit? Lack of knowledge is certainly not the problem – most if not all of those who use tobacco know it's bad for their health. The problem is that nicotine is powerfully addictive and most smokers



don't know how to quit. You can always point to the lucky few who are able to put down their cigarettes after many years of smoking and never look back. Most tobacco users will need help with quitting and will require many quit attempts. In addition, to be most successful you need a base culture which promotes being tobacco free.

**But We Have a Smoking Cessation Class – Isn't That Enough?** In short, if offering a

group cessation program at your base Medical Treatment Facility was enough then the prevalence of smoking would be coming down. In the civilian sector, it was realized long ago that group cessation classes wouldn't be enough to combat the problem of tobacco addiction. Studies have shown that only a small percentage of smokers will attend a cessation program. Often, a smoker's reasons for not attending a group treatment program are understandable. Common barriers to attending smoking cessation classes include:

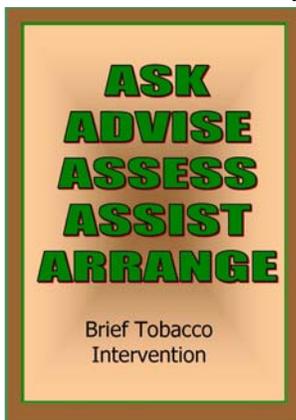
- Limited Treatment Options (no brief counseling or individual treatments)
- Limited Treatment Scheduling (have to attend during duty day)
- Group Format (many people are anxious about attending groups)
- Supervisor Attitudes (some supervisors are not supportive of attending classes)
- Lack of Social Support from Colleagues
- Operations Tempo (time is precious)
- Too Many Cues to Smoke on Base
- Too Few Immediate Rewards for Quitting

### What Is A Base to Do?

Our dream would be that every military base creates a tobacco-free culture. We know that might sound like “fluffy” sentimentality from a couple of academics, but we believe there are objective steps every installation could take to create a tobacco-free culture. Here is our list. (1) There should be visible command support for being tobacco free. This would include strong letters about the effect of tobacco on military readiness in the base newspaper. The commander could write a letter to all supervisors stressing the importance of supporting sailors who want tobacco treatment and counseling all tobacco users. The commander could include comments about the harms of tobacco at commander's



calls. Do your troops know the commander's views about tobacco dependence? (2) Tobacco free messages would be visible throughout the base. When you walk down the halls of your medical treatment facility, would you know that tobacco is our nations' number one public health threat? Do posters at base gyms and community centers address this health threat? Is literature prominently displayed around the base which educates military personal about smoking and readiness? (3) Every medical provider would be trained in brief smoking cessation skills and all physicians would be allowed to prescribe pharmacotherapy. Clinics would have all the resources they need to cost-effectively address tobacco dependence in their patients. Primary care and dental clinics throughout the civilian sector and the military are taking up the challenge of treating tobacco. Even interventions as brief as 3 minutes provided by a medical technician can have a positive impact on many smokers. (4) A variety of scientifically-proven treatments would be available on the installation. This would include the traditional group programs, individual counseling, brief treatments at medical and dental clinics, self-help treatments, Internet-based treatments, telephone counseling, etc. Bases have improved their treatment offerings by integrating tobacco cessation into their normal clinical activities and partnering with local civilian groups. (5) Barriers to seeking treatment would be eliminated and social support from colleagues provided. Popular training programs already exist which would teach personnel how to provide effective support for co-workers who want to tackle their tobacco addiction. (6) Special efforts would be launched to prevent tobacco use among junior enlisted. Research has shown that many pressures exist on military installations which encourage junior enlisted to use tobacco. Efforts to counter these negative influences are needed.



If you would like to discuss bolstering efforts on your base to create a tobacco free culture, please contact us by email at [haddockc@umkc.edu](mailto:haddockc@umkc.edu).

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### **Health Consequences of Smoking: A Report of the Surgeon General**

The U.S. Department of Health and Human Services has released the new Surgeon General Tobacco report! The information updates the 1964 report and provides all kinds of fact sheets, press materials, a booklet, and a data base. The report may be found at <http://www.surgeongeneral.gov/library/smokingconsequences>

### **Community Preventive Guide for Tobacco**

The Guide to Community Preventive Services offers up to date effectiveness of Tobacco programs! Please read this important Guide that reviews the strength of evidence and provides recommendations for reducing environmental tobacco smoke, reducing Initiation and Increasing Interventions! [www.thecommunityguide.org/tobacco/default.htm](http://www.thecommunityguide.org/tobacco/default.htm)

### **Tobacco Websites**

- The American Legacy Foundation has launched a new tobacco cessation website! Bobquits has been heavily marketed in some areas... It is located at [www.bobquits.com](http://www.bobquits.com)
- ChewFree [www.chewfree.com](http://www.chewfree.com) is a new smokeless Tobacco web-based intervention that is actively recruiting! Previewing the site is encouraged by asking to be a Professional Visitor!
- Tobacco Technical Assistance Consortium offers Tobacco training - The Basics of Tobacco Control Pathway to Change at [www.ttac.org](http://www.ttac.org)