

## Tobacco Dependence

### What Is Known About Smoking?

Behavioral scientists have studied smoking in depth for over 25 years. It is also the leading preventable cause of chronic illness. Over 400,000 deaths occur each year from cancer and heart and lung disease, and smoking is often a contributing factor. Much is known about the habit and many of the facts that apply to smoking apply to other forms of tobacco use, such as chewing tobacco, pipes, cigars, and snuff.

Smoking is a learned habit that provides positive short-term benefits — both psychological and biochemical. Once established the smoking habit is difficult to break. Smokers learn that smoking is a quick, convenient way to feel good. Smoking can help an individual cope with uncomfortable emotions (like boredom or stress) or help an individual feel comfortable in social situations (like a party.) Once started, smoking becomes associated with daily events, like watching TV.

Every smoker is different. Each smoker smokes for different reasons and can be more or less heavily dependent on smoking. Dependent means that an individual has difficulty stopping smoking even when they really want to stop.

The accumulated knowledge about smoking indicates that giving up smoking depends on:  
breaking the automatic habit that links wanting to smoke to everyday routines (like after eating, talking on the phone, watching TV, drinking coffee);  
finding other ways to get the psychological benefits of smoking; and  
how heavily dependent on nicotine an individual is and, therefore, how unpleasant the withdrawal during the quitting process will be.

### Quitting Smoking

The good news is that since cigarette smoking is a learned behavior, it can be unlearned. New behaviors and coping skills can be substituted so that an individual can live a satisfying life, but without the health-damaging effects of tobacco products. Any unpleasant withdrawal symptoms (trouble concentrating, sleep problems, irritability, headaches, cough, sore throat, appetite change, dizziness) are usually temporary. Most side effects are over in 7 to 10 days while some milder ones can last 1 to 3 months. More difficult than the side effects of withdrawal might be dealing with strong cravings or temptations to smoke again. It is therefore necessary to learn new ways to manage stress and emotions.

Tobacco use is one of the most complex and difficult habits to break. Most people try several times (the average is 3 to 5) before they finally succeed. It can take months or even years (3 to 7) to go through the process of quitting successfully. Over 40 million Americans have quit smoking over the last 20 years, so it can be done.

Quitting means hard work, learning, and practice. You may not succeed the first time you try, although many people do. Although cutting down does reduce the risk of illness, there is really no “safe” level of smoking, so your goal should be to stop completely. Even exposure to other people’s smoke causes increased health problems for kids and adults.

### The Stages in a Smoker’s Life

Smoking can be divided into five stages:

#### 1. Acquisition

Kids and young adults start smoking for many reasons. Some move quickly from experimenting to regular use. Many others luckily grow out of the habit. Young smokers do not take seriously warnings about future health effects of smoking. Therefore, prevention of smoking before it becomes a regular habit is an important priority for society. Behavioral scientists and educators have developed prevention programs for youth, families, and schools that focus on “peer

resistance skills training” for tobacco, alcohol, and hard drugs. It is far easier to stop a possibly addictive habit before it takes hold than to stop it after years of use.

## 2. Regular Smoking

Regular smokers enjoy smoking and believe that it has more benefits than risks. They are not ready to quit and if they were pressured to quit by others they would probably have a very difficult time.

## 3. Thinking About Quitting

To prepare for quitting, an individual can make a list of reasons to smoke (pros) and reasons to quit (cons). This process is most effective when an individual seeks information and opens their mind to the cons — how smoking personally affects their life and immediate loved ones in negative ways. When the cons outweigh the pros, a person may be ready to quit.

## 4. Quitting Smoking

## 5. Preventing Relapse

About 80% of smokers will be able to quit for 1 day. The first 14 days after quitting are the toughest, with about 20% to 30% of quitters slipping back into smoking during this time. The next 3 months are also tough, with about 30% more quitters resuming smoking. It takes a full year of nonsmoking to really consider a person as having successfully quit.

In order to quit an individual needs to understand their smoking patterns.

Why do they smoke?

Where do they smoke?

What triggers their cravings for cigarettes?

Which cigarettes are easiest to give up and which are the hardest?

An individual also need to learn new coping skills:

How to get through the day without cigarettes;

What they can do instead of smoke, when under stress, and so on.

This is where behavior modification skill training programs can help. An individual can learn relaxation, cognitive restructuring (self-talk to help get through very tempting cravings), and social skills to get support. An individual can also learn techniques to minimize the weight gain many smokers experience when they try to quit.

## Treatments for Smoking

Generally an individual should try a lower cost self-help approach to quitting on their own if a first-time quitter, a lighter smoker (less than 20/day), they feel less dependent on nicotine, they don't smoke when they have a cold/flu or other illness, and don't have to smoke immediately (within 15 minutes) upon waking in the morning.

Behavioral self-help manuals (available from voluntary agencies like the local chapters of American Lung Association, Cancer Society, or Heart Association) are recommended. The American Lung Association program has been well researched, is based on solid behavior therapy techniques, and has a good 15% to 20% success rate at 1 year after the first attempt to quit.

By contrast, an individual will need a more intensive clinic treatment if they have tried to quit and failed several times, are a heavier smoker (more than 20/day), feel dependent on nicotine, smoke even when they have a cold or other illness, and smoke immediately upon waking in the morning. Professional clinics provide intensive training, group support to quit, and, most important, coping skills to resist temptations to go back to smoking.

If an individual has problems with other drugs or alcohol or moods like anxiety or depression, then they will probably need a clinic plus medication to help quit. If an individual has unsuccessfully tried the other methods, as a last resort, consider a clinic that combines behavioral treatment with medication or nicotine gum — the most intense and expensive alternative.

Much information is currently available. Programs are widespread to help people quit smoking and to encourage prevention. Advances in research by behavioral and biomedical scientists will continue to help us develop better treatments to help people overcome their dependence on tobacco.

### **What Is Cognitive Behavior Therapy?**

Behavior Therapy and Cognitive Behavior Therapy are types of treatment that are based firmly on research findings. These approaches aid people in achieving specific changes or goals.

Changes or Goals might involve:

- a way of acting - like smoking less or being more outgoing;
- a way of feeling - like helping a person be less scared, less depressed, or less anxious;
- a way of thinking - like learning to problem-solve or get rid of self-defeating thoughts;
- a way of dealing with physical or medical problems - like lessening back pain or helping a person stick to a doctor's suggestions; or
- a way of adjusting - like training developmentally disabled people to care for themselves or hold a job.

Behavior Therapists and Cognitive Behavior Therapists usually focus more on the current situation and its solution, rather than the past. They concentrate on a person's views and beliefs about their life, not on personality traits. Behavior Therapists and Cognitive Behavior Therapists treat individuals, parents, children, couples, and families. Replacing ways of living that do not work well, with ways of living that work, and giving people more control over their lives are common goals of behavior and cognitive behavior therapy.

The Association for Behavioral and Cognitive Therapies (ABCT) is an interdisciplinary organization committed to the advancement of a scientific approach to the understanding and amelioration of problems of the human condition. These aims are achieved through the investigation and application of behavioral, cognitive, and other evidence-based principles to assessment, prevention, and treatment.

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