

FACILITATOR GUIDE

Video – Creating a Smoke-Free Environment for Your Children



best start
meilleur départ

by/par health **nexus** santé

INTRODUCTION



This video is for new and future parents and for everyone who shares their environment with children, even occasionally (relatives, friends, babysitters, etc.). The purpose of the video is to discuss the social impact

of second-hand smoke on young families and to explore strategies for helping to reduce or eliminate this impact.

Most people know that smoking is a health risk and that second-hand smoke is harmful. But smoking sometimes has a social impact as well, with friends and family who don't like to visit, or who may even argue about smoking. The video offers real stories by people who have experienced some of these social effects. They suggest strategies that worked for them and that families can use to reduce or eliminate the impact of smoking in their lives.

We recommend that the facilitator introduces the subject before showing the video to a group. After the screening, a discussion will help the participants to talk openly about this topic. This guide offers suggestions for facilitating the discussion. It also provides facilitators with additional information on the effects of second-hand smoke. This information may help to further explain the more technical aspects of second-hand smoke. There is also an evaluation form at the back of the booklet.

Group Facilitation Techniques

Background

This video may prompt very different responses, depending on whether it is shown to a group of new or future parents, a group of seniors or a group that consists primarily of people who smoke. Each of these groups can benefit from seeing the video because most people come in contact with children, at least occasionally.



Try to create a positive atmosphere. This can be done by choosing promotional wording carefully and by welcoming each participant individually, for example.

Before showing the video

- ✓ If you are speaking to a group of new or future parents, you can ask if their children are currently being exposed to second-hand smoke. Mention that the purpose of the video is to give them some suggestions for reducing and preventing their children's exposure to second-hand smoke. Point out that the video will be beneficial even for parents who do not smoke.
- ✓ If you are speaking to a group of seniors or a more general audience, you can ask if they ever come into contact with children or pregnant women. Don't ask people who smoke to self-identify, but mention that the video will show real-life cases of people who have experienced difficult situations to do with second-hand smoke and the methods they have come up with for dealing with the problems.
- ✓ If you are speaking to a group of people who smoke, ask if they ever come into contact with children or pregnant women. Acknowledge that they have probably been discriminated against because of their habit. Mention that the video offers suggestions for reducing the tensions that can arise with their family members or friends. Point out that the video does not try to get them to stop smoking, but instead, aims to change certain habits to reduce the impact of their smoking on children.

How to open the discussion

The discussion should take place after the video has been screened. A 20 to 30 minute discussion is usually enough to bring out the key points. A longer discussion may seem repetitive, even frustrating, to the participants.

Begin the session by saying that some people might find the video disturbing, but it is important to talk openly about second-hand smoke. Tell all the participants that they can express their opinion but it is also important to respect others' opinions and give them a chance to speak. Emphasize that the goal of the exercise is to listen to new points of view and continue their personal growth.

Depending on the size of the group, ask people to introduce themselves. You can ask them to explain their relationship with children if this is not apparent (grandparents, uncles, neighbours, etc.). You can also use a somewhat more enjoyable ice-breaker, such as describing their earliest childhood memory of cigarettes.

Hand out copies of the 16 strategies that are provided (page 6) and information on second-hand and third-hand smoke (pages 7-10).

How to facilitate the discussion

Here are some open questions that may stimulate discussion:

- ✓ What are your first impressions of the video?
- ✓ Have you been in similar situations and, if so, what did you do?
- ✓ Do you know any good ways of asking people not to smoke around children?
- ✓ What do you think of the strategies in the video? Do you have any other suggestions? (Refer to the list of strategies.)
- ✓ Do you think people's attitudes on this subject have changed in recent years?

Defusing tensions

Smoking is a delicate issue that can be emotional. If each participant feels respected and listened to, there will be less tension but if discussion gets heated, here are some suggestions:

- ✓ As the facilitator, it is important to stay as neutral as possible and to show that you are listening attentively to participants' comments. To show this, it may be helpful to summarize what they have said or to write it on a board before listening to what the next speaker has to say.
- ✓ Make sure no one dominates the discussion. Here are some phrases that may help: "Thank you for giving your opinion, now I would like to hear what others in the room have to say," or "Is there a viewpoint we haven't heard yet?"
- ✓ Make sure there are no personal attacks and that discussion focuses on strategies for reducing children's exposure to second-hand smoke, not on people's smoking behaviour.

Additional suggestions

- ✓ Avoid using the term "a smoker" and use "a person who smokes" instead. This places the emphasis on a behaviour instead of on the person himself or herself. This also implies that the person could change this behaviour; it is not ingrained.
- ✓ If some key points of view have not been expressed, make the points yourself. For example, "Let's look at a different situation now..." or, "If you were in X's position, would you see things the same way?"
- ✓ You can also use real-life or imaginary cases and ask the participants how they might act. For example, describe a situation in which a couple with a newborn is going to visit the grandparents, and a person who smokes lives there. How might the couple approach the subject? What is a good time to do this? and so on.
- ✓ Ask the participants to role-play interaction between people who smoke and people who are trying to cut down their children's exposure to second-hand smoke. Suggest typical places, such as the house of a friend or a family member. What strategies and wording work well?

- ✓ Discuss with the group ways of making life easier for people who agree to smoke outside: provide an ashtray, a chair, a sheltered area, etc.
- ✓ Make sure to emphasize health, especially young children's health. Avoid discussions about "human rights," "smokers' health care costs" and other detours the discussions may take, because they can become circular arguments.

Ending the presentation

- ✓ Especially if discussion has become highly emotional, mention that you understand that people get very involved in discussions on this subject but you hope everyone felt he or she was able to both contribute to and learn from the discussion.
- ✓ Restate the key message of the video: It is better not to expose children and pregnant women to second-hand smoke.
- ✓ State the additional benefits of a smoke-free environment, both short-term and long-term.
 - You will model good health for your children.
 - The air in your home will be much fresher and cleaner and will smell better.
 - You will reduce the risk of fire in your home.
 - Your food will taste better because your ingredients will not have absorbed the smell of second-hand smoke.
 - You will save time, money and energy, because you will not need to clean your curtains, walls, windows and mirrors as often.
 - You will not need to repaint your walls and ceilings as often.
 - Your home's resale value may be higher.

Thank all of the participants. If needed, give them references for additional information (information about health, smoking cessation programs, etc.). See next page.

Ways to tackle the problem (strategies)

Here are some things you can do that may help reduce children's and pregnant women's exposure to second-hand smoke.



1	Smoke outside
2	Ask visitors to smoke outside
3	Politely ask people not to smoke around children and pregnant women
4	If necessary, leave
5	If you need to smoke outside, ask someone to cover childcare
6	Schedule visits when it is easier to smoke outdoors
7	Mothers who smoke should breastfeed before they smoke
8	Clearly identify your home as smoke-free
9	Meet in outdoor or non-smoking locations
10	Provide comfortable settings to smoke outdoors
11	Help people understand the impact of smoke on children's health
12	Smoke far away from the home
13	Recognize the efforts made by people who smoke
14	Be a role model and do not smoke
15	If necessary, build slowly towards a smoke-free home
16	Discuss smoking openly

Learning more about second-hand and third-hand smoke

What is second-hand smoke?

Second-hand smoke is a mixture of exhaled smoke and smoke that comes from the tip of a burning cigarette, pipe, or cigar.

Scientists have found more than 4,000 chemicals in second-hand smoke. They include nicotine, carbon monoxide, ammonia, formaldehyde, dioxins, and furan. Most of them come from the burning of tobacco (combustion).

When we compare the smoke inhaled by the person who is smoking to second-hand smoke, we find that second-hand smoke contains higher levels of certain harmful chemicals. This is because second-hand smoke occurs at a lower burning temperature.

Nicotine and solid particles make up about 10% of second-hand smoke. When cooled, these by-products are actually tar. As well, more than 50 cancer-causing agents occur in second-hand smoke. They include arsenic, asbestos, benzene, and vinyl chloride.

What are the risks of second-hand smoke?

- ✓ Exposure to second-hand smoke is the second-highest cause of lung cancer (smoking is the first).
- ✓ Living with a partner who smokes raises your risk of heart disease and chronic obstructive pulmonary disease (COPD).
- ✓ 30 minutes of exposure to smoke hardens the arteries (arteriosclerosis). Longer exposure raises the risk of heart disease.
- ✓ Research has shown a link between second-hand smoke and stroke, breast cancer, cervical cancer, worsening of cystic fibrosis, and miscarriage.
- ✓ Each year in Canada, more than 800 people die from second-hand smoke.



Here are some short-term effects of being exposed to second-hand smoke:

- ✓ Irritation of the eyes, nose, and throat.
- ✓ Feeling dizzy.
- ✓ Headache.
- ✓ Nausea (feeling like you might throw up).
- ✓ Trouble with mental focus.
- ✓ Heart rate speeds up.
- ✓ Heart beat becomes irregular.

Here are the risks for children who are exposed to second-hand smoke on a regular basis:

- ✓ A higher risk of sudden infant death syndrome (SIDS).
- ✓ More coughing and wheezing than children of non-smoking parents.
- ✓ More cases of asthma than children of non-smoking parents.
- ✓ More ear infections than children of non-smoking parents.
- ✓ Less room for the lungs to expand (reduced capacity).
- ✓ Twice the risk of bronchitis, croup, and pneumonia.
- ✓ Lower test scores in math, reading, and logic.
- ✓ A higher risk of heart disease.
- ✓ A higher risk of smoking as they grow older.

Why is second-hand smoke so harmful to children?

Research has shown that children are more likely to have health problems if they are exposed to second-hand smoke. Here are the reasons:

- ✓ Children's lungs are still growing. Their lungs are more likely to be damaged by the dangerous chemicals in second-hand smoke.
- ✓ They breathe in more air for their body weight than adults do. This means they absorb more smoke.
- ✓ They tend to be more active than adults and therefore absorb more of the toxins contained in smoky air.
- ✓ Their immune systems are not as developed as adults.
- ✓ They have less power and are less able to complain about second-hand smoke.
- ✓ They are less able to leave places where there is second-hand smoke.

Second-hand smoke during pregnancy

- ✓ Second-hand smoke can even harm unborn babies. The chemicals in tobacco smoke can move from the mother's blood into the bloodstream of the growing baby.
- ✓ Nicotine raises the fetal heart rate and slows development of the lungs and respiratory tract. Carbon monoxide (the same toxic gas that comes from cars) is part of second-hand smoke. This gas can reduce the baby's oxygen supply, causing a lower birth weight.
- ✓ In the last third of pregnancy, the fetus starts to get ready to breathe after birth. It's normal for the chest muscles to move in and out (as if the baby were breathing) while still in the womb. This can stop for long periods of time just a few seconds after the fetus is exposed to second-hand smoke.
- ✓ Second-hand smoke is also linked to early birth (premature babies) and miscarriage.

What is third-hand smoke and how does it affect health?

Third-hand smoke is made up of the toxins in smoke that linger even after the smoker puts out the cigarette, cigar, or pipe.

Third-hand smoke gets trapped in hair, skin, walls, fabric, carpet, furniture, and toys. It builds up over time. We don't know how long these chemicals can last indoors. It depends on how much they are absorbed by soft items, like those made of fabric and foam. It also depends on how well they stick to surfaces.

The strength of third-hand smoke is reduced after smoking has stopped, but some of the chemicals can still be measured for months or even years, especially if heavy smoking happened in the room or house. The chemicals can be measured long after the smell has gone away.

Third-hand smoke also gets into household dust. Babies can swallow this dust when they crawl on floors or put their hands into their mouths. Babies take in more third-hand smoke chemicals because they breathe more quickly and because they spend more time on the floor. They can take in 20 times more third-hand smoke than adults.

Sources: Canadian Lung Association, Program Training and Consultation Centre, and Health Canada.

“Tobacco smoke is the most harmful and widespread known indoor air pollutant.”

– Health Canada



Evaluation

Based on the procedures of the agency that is showing this video, an evaluation may be required. Evaluations measure the short and long-term impact of the training program.

You can measure participants' immediate responses formally or informally. One informal method is simply to collect their comments and responses after taking part in the training session. One formal method would be to have them fill out an evaluation. There is a sample evaluation on the following page.

It may also be very useful to provide follow up, three to six months after the session. This means you will need to collect participants' contact information and their permission to contact them. These are the kinds of questions you could ask them at that time:

- ✓ Do you remember taking part in the session?
- ✓ Can you summarize the key message or messages of the video?
- ✓ Have you changed any of your behaviour after this session? If so, which ones? If not, why not?

An impact evaluation determines whether the program helps to change behaviour and whether any changes to the delivery of the sessions are needed.



Tell us what you think

Please take a few minutes to complete this form. It will help us to improve the session and increase its impact.

Put an X in the box that describes what you think. Add comments if you wish.

1. Do you think the suggestions provided in the video are realistic?

☐ Yes ☐ Maybe ☐ Somewhat ☐ No

2. Did the video and discussion increase your knowledge about second-hand smoke and children?

☐ Yes ☐ Somewhat ☐ No

3. Did the video and discussion change your point of view about second-hand smoke and children?

☐ Yes ☐ Somewhat ☐ No

Why? _____

4. Would you have liked to hear more points of view during this session?

☐ Yes ☐ No

If so, what are they? _____

5. Do you plan to change the way you do things after seeing the video?

☐ Yes ☐ Somewhat ☐ No

Please explain: _____

6. Overall, did you enjoy the video and discussion?

☐ Yes ☐ Maybe ☐ Somewhat ☐ No

7. What would you suggest to improve either the video or the discussion after the video?

To learn more...

Canadian Lung Association

This website gives general information about smoking, second-hand smoke, and how to quit smoking. Visit: www.lung.ca

Program Training and Consultation Centre

Second-hand Smoke in Home Environments Info Pack

This package can help you learn more about the effects of second-hand smoke in the home. Visit: www.ptcc-cfc.on.ca/upload/RDS_0005.pdf.

Info Pack on Smoking Cessation in Pregnancy

This package contains guidelines for groups, agencies, and coalitions that want to reduce tobacco use in their communities. Visit: www.ptcc-cfc.on.ca/upload/RDS_0007.pdf

Health Canada

This website gives general information about second-hand smoke. Visit: www.hc-sc.gc.ca/ewh-semt/air/in/poll/second/index-eng.php

On the Road to Quitting - Guide to becoming a non-smoker

This self-help guide is for people who smoke. It helps them create a personal profile so they can understand what drives them to smoke. It also outlines the steps for quitting, based on their profile. Visit: www.hc-sc.gc.ca/hc-ps/pubs/tobac-tabac/orq-svr/index-eng.php

Canadian Cancer Society

One step at a time: For smokers who don't want to quit

This guide provides no-pressure information about quitting smoking. Helps to explain why people smoke and the effects of smoking on those around them.

One step at a time: For smokers who want to quit

Provides information to increase the motivation and confidence of people who want to quit.

One step at a time: If you want to help a smoker quit

For family members and friends of people who smoke and who want to help them quit.

Visit: [www.cancer.ca/Canada-wide/Publications/Publications on reducing your risk of cancer.aspx](http://www.cancer.ca/Canada-wide/Publications/Publications%20on%20reducing%20your%20risk%20of%20cancer.aspx)

Smokers' Helpline

This service is free across Canada. Your call is private.

Call: 1-877-513-5333

Visit: www.smokershelpline.ca



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