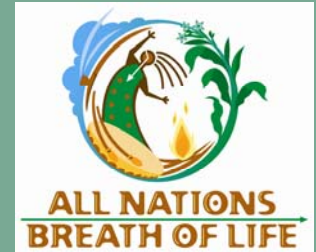


Smoking and Native People

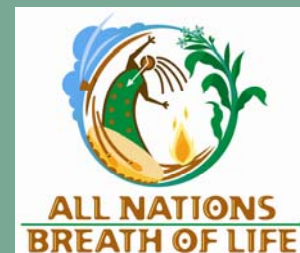
Christine Makosky Daley, PhD, MA, SM
University of Kansas Medical Center
Department of Preventive Medicine and Public Health

Who are American Indians/Alaska Natives/Native Americans/Native People/Indigenous People, etc?



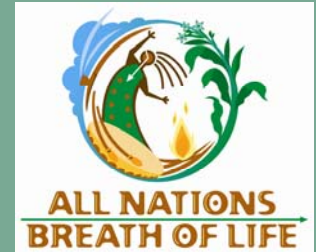
- **American Indian** – people whose pre-Columbian ancestors are from the lower 48 states
- **Alaska Native** – people whose pre-Columbian ancestors are from Alaska
- **Native Hawaiian** – people whose pre-Columbian ancestors are from Hawaii
- **Native American** – generic term referring to anyone whose pre-Columbian ancestors are from the Americas
- **Indigenous Peoples** – generic term referring to any of the fourth world nations (i.e. people currently or previously living under colonialism)
- **First Nations Peoples** – similar to indigenous peoples, also the preferred term for people whose pre-Columbian ancestors are from Canada
- **Native People** – generic term similar to indigenous or first nations people, often preferred in the lower 48 if a tribal name is unknown

Who is included in the health statistics?



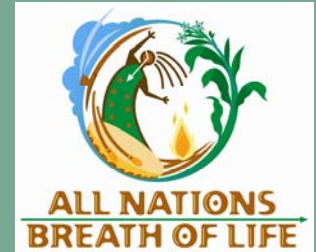
- The category most often seen is “American Indian/Alaska Native”
 - Not always useful – health outcomes are very different between American Indians and Alaska Natives
 - Health outcomes vary regionally across the US
- Native Hawaiians are included with Pacific Islanders
- Sometimes data refer to only federally recognized tribes, other times they include state recognized tribes or self-report data
- Inter-marriage blurs the lines and varies across the country
- Often the % AI/AN in the sample is too small for accurate estimates, especially if the data are local
- Racial miscoding is a huge problem!

Are there still Indians in the US?



- Pre-Columbus there were over 2000 distinct cultures in the Americas and over 500 in the lower 48 contiguous states
- Today there are 558 federally recognized American Indian nations and Alaska Native villages and over 2.5 million individuals claiming American Indian or Alaska Native ancestry

American Indians in Kansas and the KC Metro



■ Kansas

- 24,000 people identify themselves as solely AI/AN
- 47,500 people identify themselves as either solely or partially AI/AN (1.8% of the population); over 88% live in the urban areas
- 4 Federal reservations (Prairie Band Potawatomi Nation, Kickapoo Nation, Sac & Fox Nation, and Ioway Nation)

■ Kansas City Metro of Missouri

- 24,300 people identify themselves as either solely or partially AI/AN

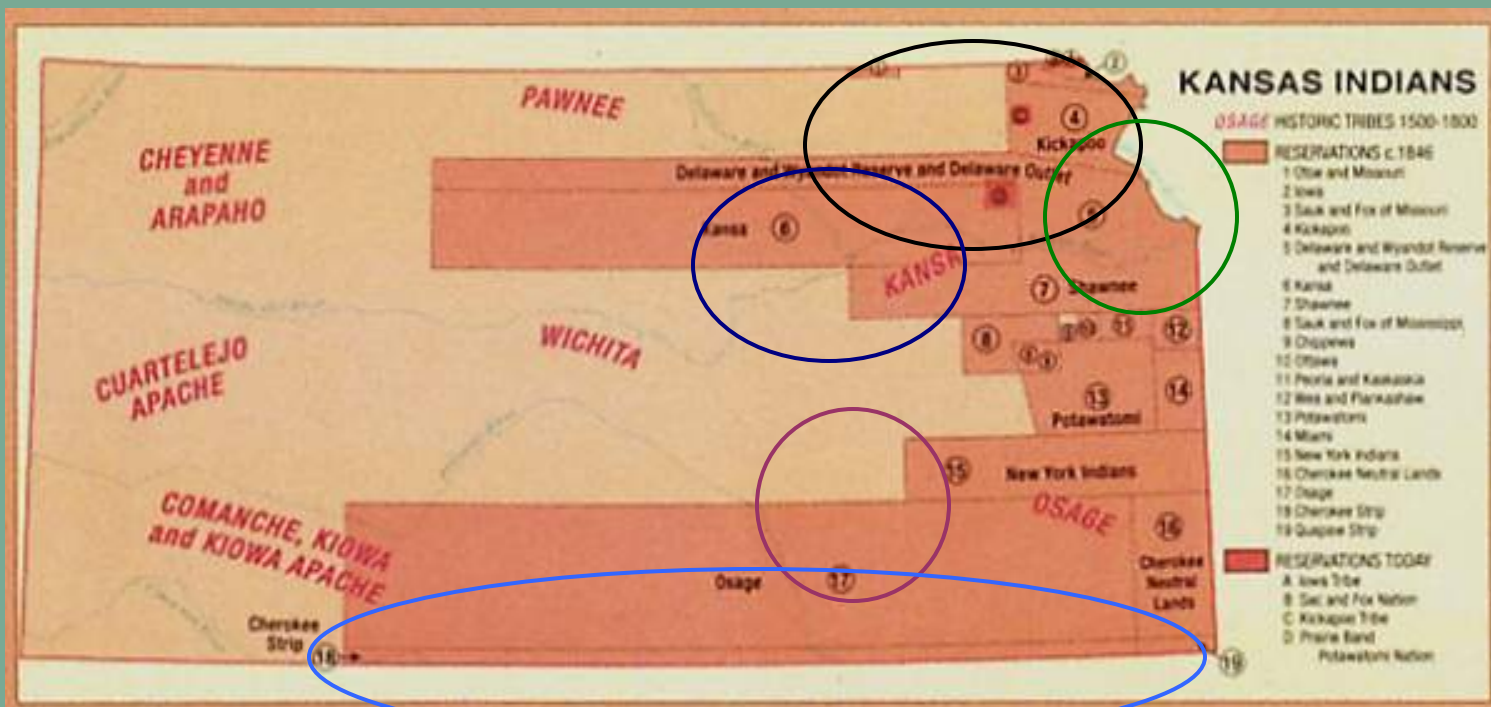
■ Haskell Indian Nations University

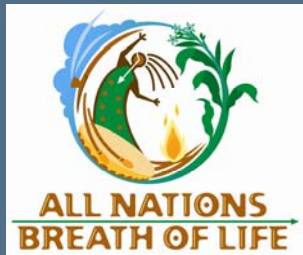
- 1000 students representing over 200 AI nations and 30 AN incorporated villages





**ALL NATIONS
BREATH OF LIFE**

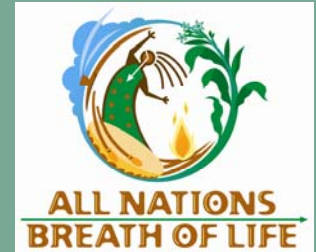




A little history...

...or why Native people don't want to participate in research, clinical trials, medicine, or really anything else White people have to offer...

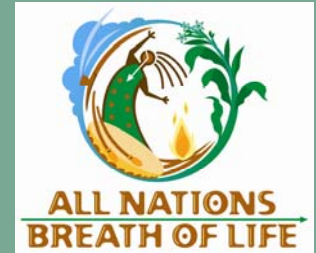
Indian-White Relations



- The first contact Native people had with Whites was through disease
 - e.g. Smallpox, typhus
- Courts of Indian Offenses
- Indian Boarding Schools
- Termination
 - 100 tribes terminated
 - 12,000 people lost tribal affiliations
 - 2.5 million acres of Indian land lost
- Termination policies, though no longer actively pursued, are largely still on the books

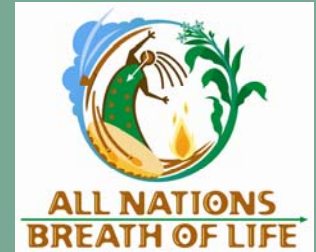


Disease Conception



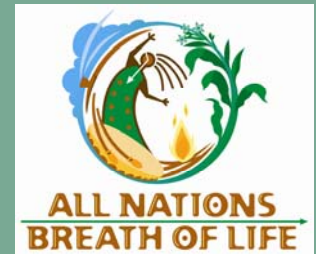
- Among many Native cultures, diseases are broken into three groups
 - Indian
 - Diseases that existed in the Americas before Contact
 - White
 - Diseases Whites brought with them
 - Combination
 - Diseases that always existed, but have increased in prevalence in recent years, often attributed to a “White” or non-traditional lifestyle

Disease Conception

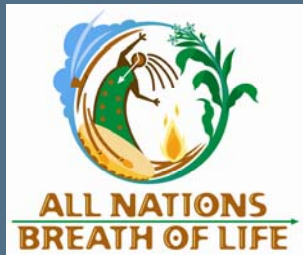


- Diseases should be treated according to their type
 - Only go to a White doctor if you have a disease that White doctors can *cure*
- Hospitals are where you go to die
- Talking about a disease (or something else) will make it occur
 - You invite illness by talking about it or looking for it
- Healing is not only physical, it must include spiritual and mental/emotional

Combination Diseases



- Growing category
- Need to be treated by both allopathic and traditional means
- Many Native people regularly combine treatment modalities
- Allopathic medicine can name something as “cured” and a Native person may disagree or vice versa
- Cancer of any type fits into this category



Basic Health Indicators



TABLE 1. Prevalence of selected risk factors and chronic diseases among four minority populations, by race/ethnicity and sex — Racial and Ethnic Approaches to Community Health 2010 Risk Factor Survey, selected states, 2001–2002

Risk factors/Chronic diseases	Men							
	American Indian (n = 751)		Black (n = 3,218)		Hispanic (n = 1,535)		Asian (n = 1,655)	
	%	(95% CI) ^a	%	(95% CI)	%	(95% CI)	%	(95% CI)
Obesity	40.1	(36.2–44.0)	26.5	(24.4–28.6)	26.6	(24.1–29.2)	2.7	(1.7–4.1)
Current smoking	42.6	(38.6–46.6)	29.3	(27.3–31.5)	26.8	(24.2–29.5)	34.4	(30.7–38.2)
Cardiovascular diseases	16.4	(13.6–19.7)	9.9	(8.7–11.3)	7.4	(6.0–9.1)	7.5	(5.6–10.1)
Hypertension	38.5	(34.6–42.5)	34.5	(32.3–36.7)	20.5	(18.2–23.0)	16.1	(13.7–18.9)
High cholesterol	37.1	(32.5–41.9)	31.4	(29.0–33.9)	35.7	(31.9–39.7)	31.4	(27.6–35.6)
Diabetes	16.8	(14.1–19.9)	11.6	(10.2–13.1)	7.1	(6.0–8.5)	4.8	(3.6–6.4)
No. risk factors/chronic diseases [†]								
0	11.7	(8.8–15.5)	24.8	(22.5–27.3)	25.4	(21.8–29.4)	36.3	(32.3–40.5)
1	26.1	(22.2–30.4)	30.5	(27.9–33.2)	34.6	(30.7–38.8)	37.1	(33.1–41.4)
2	26.4	(22.4–30.9)	22.9	(20.7–25.3)	20.0	(17.0–23.4)	19.3	(15.6–23.8)
≥3	35.7	(31.2–40.5)	21.7	(19.7–24.0)	19.9	(16.9–23.3)	7.2	(5.6–9.2)

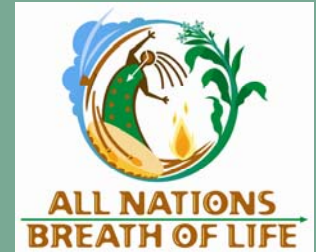
^a Confidence interval.

[†] Includes obesity, current smoking, cardiovascular diseases, hypertension, high cholesterol, and diabetes.

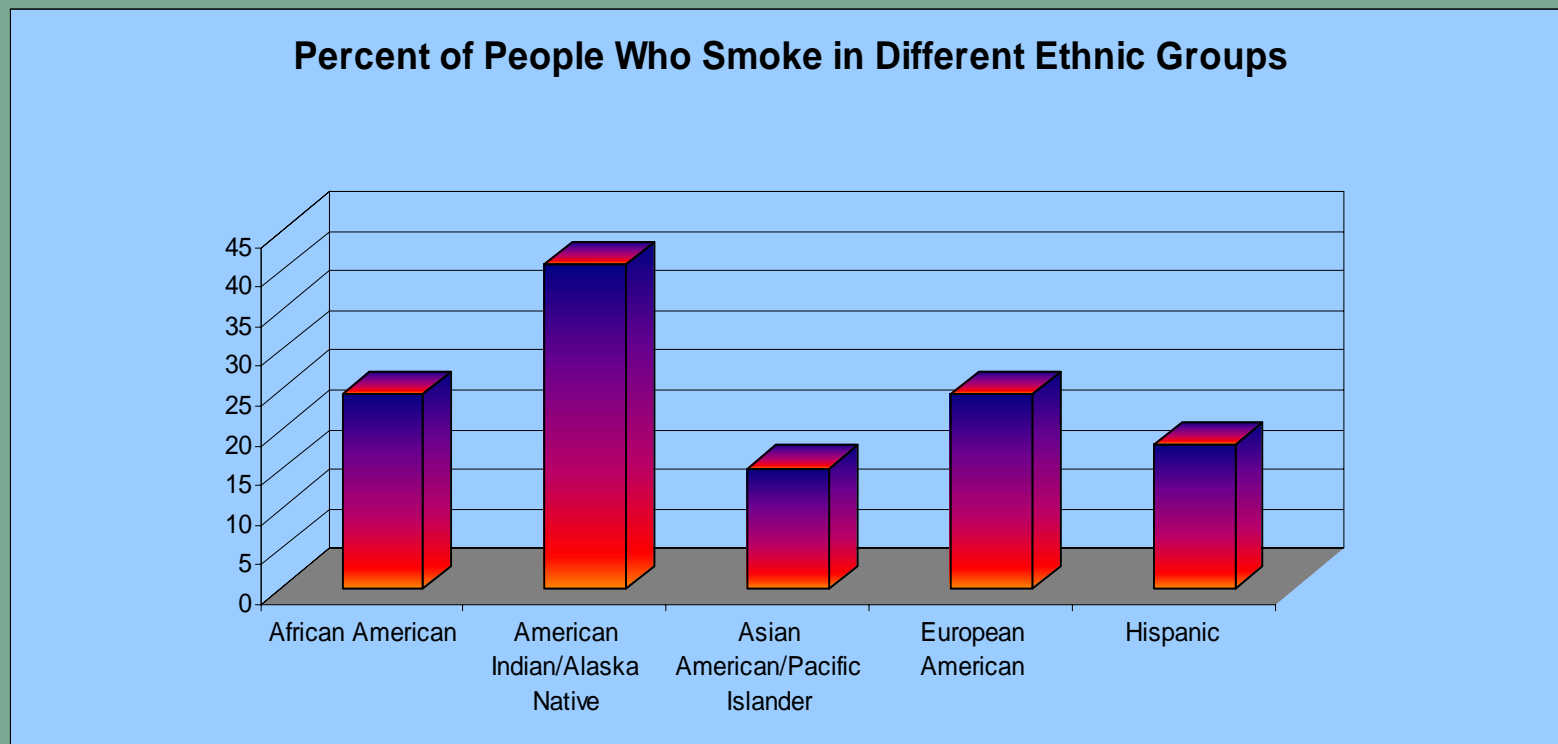
TABLE 1. (Continued) Prevalence of selected risk factors and chronic diseases among four minority populations, by race/ethnicity and sex — Racial and Ethnic Approaches to Community Health 2010 Risk Factor Survey, selected states, 2001–2002

Risk factors/Chronic diseases	Women							
	American Indian (n = 1,040)		Black (n = 7,735)		Hispanic (n = 2,722)		Asian (n = 2,549)	
	%	(95% CI)	%	(95% CI)	%	(95% CI)	%	(95% CI)
Obesity	37.7	(34.4–41.1)	37.6	(36.1–39.2)	28.4	(26.4–30.6)	3.1	(2.3–4.1)
Current smoking	36.8	(33.6–40.1)	20.4	(19.2–21.7)	11.2	(9.9–12.7)	3.3	(2.3–4.7)
Cardiovascular diseases	13.0	(11.0–15.4)	9.4	(8.5–10.3)	5.6	(4.8–6.6)	5.5	(4.4–6.9)
Hypertension	36.8	(33.7–40.1)	40.9	(39.4–42.5)	22.4	(20.7–24.3)	17.6	(15.6–19.7)
High cholesterol	33.5	(30.0–37.2)	34.2	(32.5–35.8)	28.9	(26.5–31.5)	23.3	(20.5–26.3)
Diabetes	19.7	(17.2–22.4)	14.5	(13.4–15.7)	8.4	(7.4–9.5)	4.7	(3.8–5.8)
No. risk factors/chronic diseases†								
0	17.2	(14.3–20.4)	22.7	(21.1–24.4)	35.9	(32.9–38.9)	57.8	(54.5–60.9)
1	27.6	(24.3–31.2)	28.4	(26.7–30.1)	30.2	(27.6–33.1)	25.8	(22.7–29.2)
2	21.9	(18.9–25.2)	22.2	(20.8–23.7)	18.4	(16.2–20.7)	11.6	(9.6–14.0)
≥3	33.3	(29.8–37.1)	26.7	(25.1–28.3)	15.5	(13.7–17.5)	4.8	(3.6–6.3)

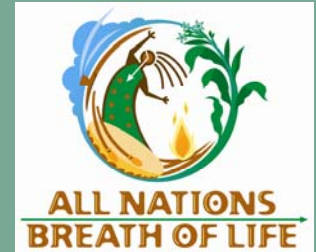
Cigarette Smoking among American Indians



- Highest smoking rates of all ethnic groups at 41% versus 15% to 24% in other ethnic groups

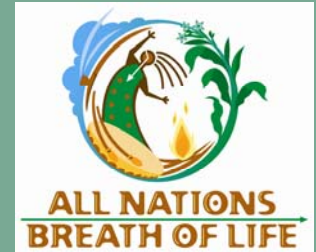


Cigarette Smoking among American Indians



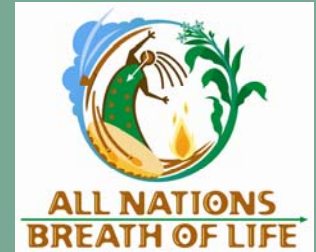
- American Indian women are the only group in whom smoking rates have increased over the last 20 years, from 34% to 41%
- Very low cessation and abstinence rates at 5% success at 3 months
- Cigarette smoking is the number one cause of preventable death among American Indians
- Mortality rates from tobacco-related diseases are double mortality rates of other Americans

Traditional Use of Tobacco



- Many Native peoples of North America have used tobacco traditionally for spiritual, ceremonial, or medicinal purposes
- There is very little evidence of recreational use and that is only in the eastern part of the country
- Even though many Native people DO use tobacco, not all tribes nor all individuals within a tribe use it

Historic Use of Tobacco



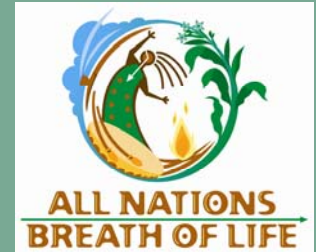
Delaware Nation

- Used as a gift to a healer
- Used as a sacrifice for prayer
- Burned to honor the Creator and to send requests

Six Nations of the Iroquois

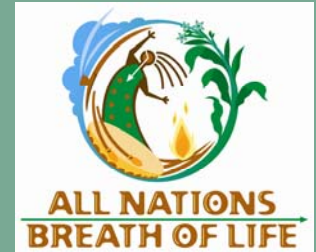
- Used to open ceremonies or other events
- Used to convey messages to the sky world
- Used as an offering when gathering plants
- Used to heal insect or spider bites

Contemporary Use of Tobacco



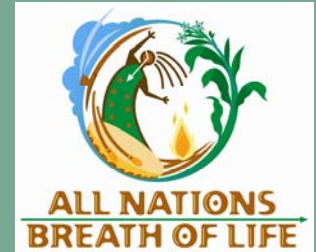
- Some people still use tobacco for many traditional purposes
- Tobacco is often given as a gift, for example, to the host drum at a pow wow
- Tobacco is still considered a sacred plant to many Native people from many different tribes
- It is inaccurate to try to portray Native tobacco use as an homogenous behavior

Implications for a Smoking Cessation Program



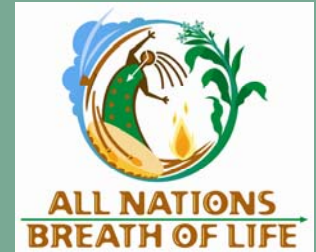
- Due to the status of tobacco for many Native people, negative portrayals of tobacco as are normally used in smoking cessation programs are inappropriate for this community
- Some Native people may feel uncomfortable in a smoking cessation program developed for other populations, including other Native populations
- The development of a smoking cessation program that is appropriate for and successful in a heterogeneous Native population becomes exceedingly difficult, as evidenced by current quit rates

Attempts at Smoking Cessation in American Indians



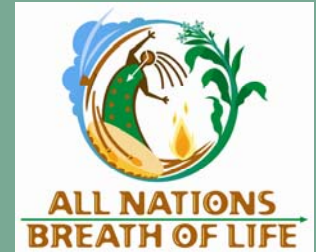
- A few attempts at the tribal level
- We have found no current smoking cessation programs for a diverse American Indian population that have been shown efficacious in clinical settings

“It’s Your Life – It’s Our Future”



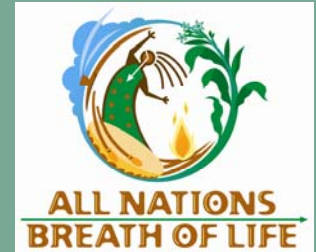
- Four urban and seven rural or reservation clinics in Northern California
- Most effective messages used in this program were related to cultural identity, responsibility to family and tribe, and respect for tobacco products
- Quit rates at 18-months were 5.7% for the intervention group and 3.1% for the control (significant difference)
- Never used in other populations

Giving American Indians No-smoking Strategies (GAINS)



- Pan-tribal population with 4 urban sites (Seattle, Milwaukee, Minneapolis, Spokane)
- Adaptation of the Doctors Helping Smokers Model
- Quit rates at 12-months were 6.7% for the intervention group and 6.8% for the control (not significant)

Second Wind



- Developed by the Tobacco Prevention Program at Muscogee Nation in Oklahoma
- Based on FreshStart, developed by the American Cancer Society
- Uses Talking Circles and NRT/Pharmacotherapy
- Culturally-tailored
- NEVER TESTED – NO DATA ON EFFICACY



ALL NATIONS
BREATH OF LIFE

Program Development: All Nations Breath of Life

SB-11343-N

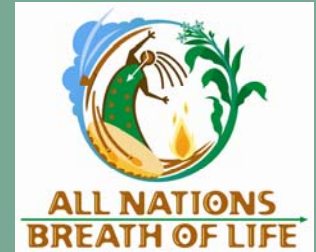
(American Lung Association, PI: Choi)

KUMC Research Institute, Inc. (PI: Daley)

RSGT-06-260-01-CPPB

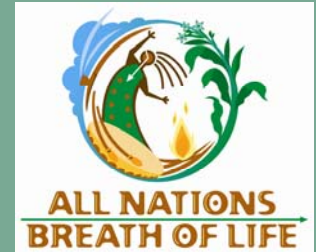
(American Cancer Society, PI: Choi)

Studies



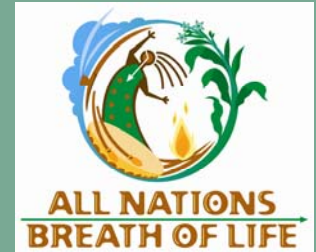
1. Formative focus groups and collaborative effort to develop program
2. Pilot test and development of initial educational materials
3. Assessment and further development of educational materials
4. Clinical Trial of the Program

Formative Focus Groups



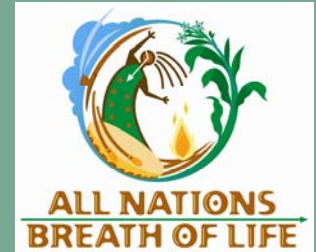
- Collaborated with the Indian Health Service and Muscogee Nation of Oklahoma
- Asked what should be included in a smoking cessation program for Native people
- Brought copies of the Second Wind curriculum for participants to look over and comment on

Methods



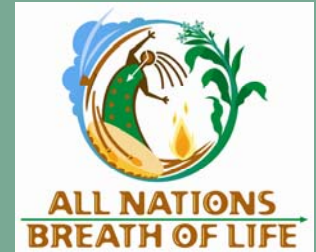
- 6 focus groups of American Indian smokers (N=41)
- Recruited from the patient population at an Indian Health Service clinic in Kansas through referral from practitioners and posters in the waiting room
- 60-90 minutes, taped and transcribed verbatim
- Analyzed through domain analysis (strict inclusion and means-end)

Demographics



- Mean age = 41 years
 - Range (21-67)
- 63% female
- Education
 - 63% college education or more
 - 22% high school or GED
 - 15% less than high school
- Mean number of cigarettes per day = 13
- Mean age started smoking regularly = 18

Tribes Represented



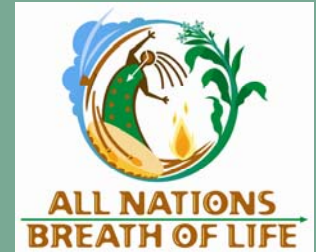
Sample

- 23 tribes or distinct combinations (2 individuals did not give tribal affiliation)
- Most common:
 - Prairie Band Potawatomie (N=6)
 - Cherokee (N=4)
 - Citizen Band Potawatomie, Muscogee, Kiowa (N=3)
 - Diné, Northern Arapaho (N=2)

Clinic Population

- Total tribes = 229
- Total AN incorporations = 31
- Most common:
 - Prairie Band Potawatomie
 - Cherokee Nation of Oklahoma
 - Diné
 - Muscogee
 - Choctaw

Tribes Represented



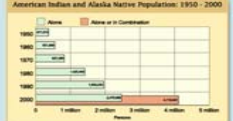
- Prairie Band Potawatomie
- Cherokee
- Citizen Band Potawatomie
- Kiowa
- Muscogee
- Diné
- Northern Arapaho
- Arikara
- Choctaw
- Kickapoo
- Northern Ute
- Ojibwa
- Otoe
- Ponca
- Taos Pueblo
- Tlingit
- Yankton Sioux
- Cherokee and Osage
- Crow and Onondaga
- Eastern Shoshone and Northern Arapaho
- Kiowa and Comanche
- Northern Cheyenne and Crow
- Paiute and Iowa
- Unknown

American Indians and Alaska Natives in the United States



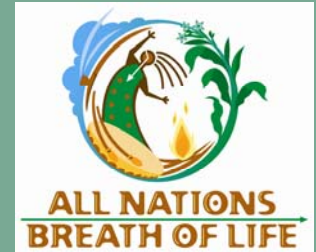
Ten Most Populated Reservations and Off-Reservation Trust Lands: 2000

Reservation or Off-Reservation Trust Land	Population
Navajo Nation (Navajo)	306,864
San Joaquin Reservation (California)	208,000
Blackfeet Reservation (Montana)	198,000
Tribal Designated Statistical Area	197,000
American Indian Reservation (Oklahoma)	196,000
Navajo Nation (Arizona)	195,000
Navajo Nation (New Mexico)	194,000
Navajo Nation (Utah)	193,000
Navajo Nation (Colorado)	192,000
Navajo Nation (Texas)	191,000

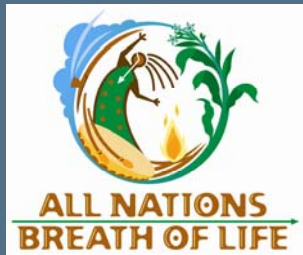


US CENSUS BUREAU
Helping the World Understand America: 1996-2002

Basic Themes



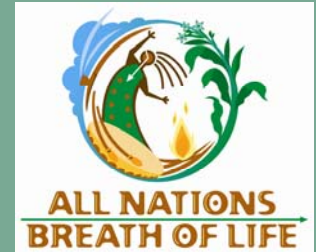
- Barriers and Facilitators to Quitting
- Quit Attempts
- *Tailoring a Program to a Pan-Indian Community*
- *Traditional Use of Tobacco*



Print Materials

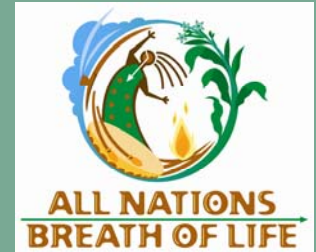
“I don’t think this way. I don’t do graphs. I don’t do charts. I’m a Native person. First of all we have oral history as the key and visual understanding is the second most important thing to get and attract the attention of different Native people.”

Print Materials – “It needs to be Indian!”



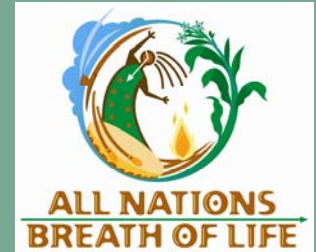
- More pictures, less text
- More colors
- Less “institutional” – shouldn’t look like a government pamphlet
- Needs to say that it’s free
- No in-depth writing, should use bullets
- Leave space for notes
- Overall – should be more attractive
- Quotes from famous American Indians
- Personal stories, especially from elders
- Honor spirituality of tobacco
- Origin stories of tobacco
- Have an elder explain tobacco
- Ties to nature and the sacred

Talking Circles and Counseling



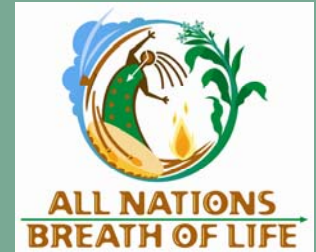
- Not all tribes use the talking circle format – not everyone will be familiar with it
- People who are familiar with talking circles think they are a good idea
- More people talked about support through groups or individual counseling – can be tied to talking circles
- Any group facilitator or counselor needs to be Native
- Want more support in the beginning – right after quitting
- Also want long-term support – someone to call or a monthly meeting
- Weekly meetings after the first few weeks, then every two weeks
- What happens if you miss a group session?
 - Make-up sessions
 - Phone counseling

NRT and Pharmacotherapy



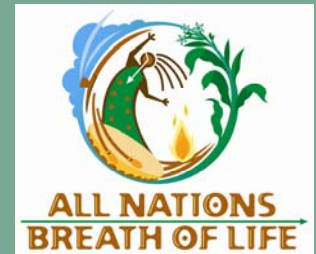
- No consensus
- About half of the participants did not want any at all – they preferred counseling or group sessions alone
- Most commonly mentioned NRT = patch, gum
- Much discussion of Zyban®
- Some discussion of combined NRT and Pharmacotherapy
- Many knew about or had heard of side effects of NRT and Pharmacotherapy

Traditional Tobacco Use



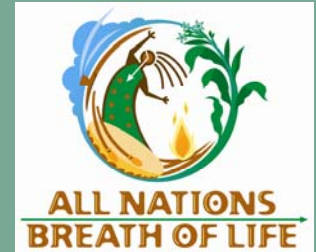
- Not all Native groups use tobacco traditionally
- Not all Native people use tobacco traditionally
- Types of Use: ceremonial, spiritual, prayers
- Type of tobacco: commercial versus home-grown
- How the tobacco is used: smoked, smudged, chewed, etc.
- How often and how long vary tremendously

Traditional Tobacco Use



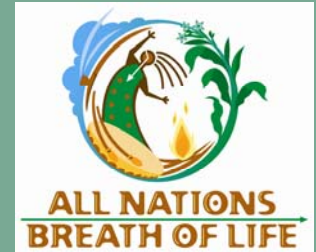
- *Overall there is a huge diversity of traditional tobacco use*
- *Not associated with recreational use and often seen as a way to decrease recreational use*

Other Suggestions for Tailoring



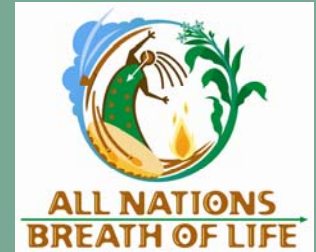
- Need for...
 - inclusion of family members
 - authority figure to speak – some mention of physicians, but more elders or other people who have quit smoking
 - an incorporation of spirituality
 - options
 - representation of everyone – either wide range of tribes represented or just “generic images”
 - permission and attribution to particular tribes

Can we do it?



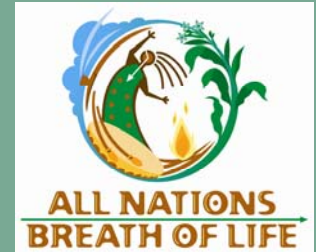
- Huge variety of response
- Very heterogeneous population
- Normal variation in what people want
 - Group versus individual counseling
 - Choice of NRT/Pharmacotherapy
- Variation by tribal affiliation
 - Traditional use of tobacco
 - Culture

YES WE CAN!!



- No program allows for all choices that people want
 - Give some choice of counseling and NRT or pharmacotherapy
- Tailoring to the Native community
 - Present a wide range of images, quotes, origin stories for tobacco within your literature, representing many different tribes
 - Different words for tobacco on the cover of a brochure
 - Quotes about traditional tobacco use from famous Native people of different tribes within print materials
 - Recognize within the program that not everyone uses tobacco traditionally – ask people about it, make mention of some tribes that do not within print materials

YES WE CAN!!

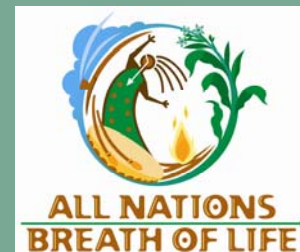


- Celebrate the diversity rather than try to make everyone fit a stereotypical “Native” image
- Use of “generic” Native images may be difficult – our participants mentioned feathers as one possibility, but many “generic” images are actually regional
 - Kokopelli in the Southwest
 - Teepees in the Great Plains
 - Carved totem pole in the Northwest
- Some ideas that may be more generic
 - Use of pictures/oral history is a more pan-Indian idea
 - Inclusion of family members can be key
 - Respect for elders is very important



ALL NATIONS
BREATH OF LIFE

All Nations Breath of Life



- Smoking cessation program designed specifically for a heterogeneous Native population
- Includes all of the “typical” smoking cessation information
- Every session also explores the meaning of tobacco to many Native people
- One session is devoted entirely to discussion of traditional use of tobacco; an elder comes in to discuss use in any one particular tribe
- All program incentives are tailored to the Native community
 - Rez-robics rather than a typical aerobics program
 - Native flute music for relaxation
- Family members are included throughout the program

Week	Type of Session	Topics Covered	Brochures/ Handouts	Incentives
	Telephone Intake	Current smoking levels; smoking history; readiness to quit	NA	NA
Week 1	Individual In-person	Program explanation; personal history with smoking	NRT Pharmacotherapy	3-ring binder for educational materials
Week 2	Group In-person	Personal history with smoking; team building; social support I; facts about pharmacotherapy	Why People Smoke Preparing to Quit Quit Contract Quit Reasons Card	Quit kits; NRT; stress balls, photo magnet
	Telephone Motivational Interviewing	Personal issues Next session reminder	NA	NA

Week	Type of Session	Topics Covered	Brochures/ Handouts	Incentives
Week 3	Group In-person	Group discussion of personal issues; facts about smoking; coping with withdrawal	Cigarette Smoking and Native People Coping with Withdrawal Things Instead Card	Quit kit refills NRT Water bottles
	Telephone Motivational Interviewing	Personal issues Next session reminder	NA	NA
Week 4	Group In-person	Group discussion of personal issues; traditional use of tobacco	Traditional Use of Tobacco	Quit kit refills NRT Meal DVD on Traditional Use
	Telephone Motivational Interviewing	Personal issues Next session reminder	NA	NA

Week	Type of Session	Topics Covered	Brochures/ Handouts	Incentives
Week 5	Group In-person	Group discussion of personal issues; stress management	Stress Reduction and Management	Quit kit refills NRT Native flute music CD
	Telephone Motivational Interviewing	Personal issues Next session reminder	NA	NA
Week 6	Group In-person	Group discussion of personal issues; weight management	Weight Management During Smoking Cessation	Quit kit refills NRT Rez-robics Healthy Snacks
	Telephone Motivational Interviewing	Personal issues Next session reminder	NA	NA

Week	Type of Session	Topics Covered	Brochures/ Handouts	Incentives
Week 7	Group In-person	Group discussion of personal issues; social support II	Friends and Family and Quitting Smoking	Quit kit refills NRT Meal with family member or friend
	Telephone Motivational Interviewing	Personal issues Next session reminder	NA	NA
Week 8	Group In-person	Group discussion of personal issues; staying quit	Staying Quit	Quit kit refills NRT T-shirts Certificate
	Telephone Motivational Interviewing	Personal issues	NA	NA

Week	Type of Session	Topics Covered	Brochures/ Handouts	Incentives
Week 9	Telephone Motivational Interviewing	Personal issues	NA	NA
Week 10	Telephone Motivational Interviewing	Personal issues	NA	NA
Week 11	Telephone Motivational Interviewing	Personal issues	NA	NA
Week 12	Group In-person	Celebration; discussion of how traditional worldview and behaviors helping in quitting; discussion of program	NA	\$25 gift card Celebratory meal
6-month	Telephone Motivational Interviewing	Current smoking status, personal issues	NA	\$25 gift card mailed

*All we are really
required to do in this life,
is breathe...
each breath we take
sustains the life within us.*

*We need to appreciate this life...
and smoking cigarettes
is an abuse of this breath of life.*



*That "breath of life" appreciation
is our Indigenous way of life.
So Quit Smoking!*

Funded by the American Cancer Society, the American Lung Association, and the University of Kansas Medical Center Research Institute, Inc.

Cigarette Smoking and Native People

- Native people have the highest smoking rates of all ethnic groups in the United States at 41%, compared to 15% to 24% in other ethnic groups.
- Cigarette smoking is the number one cause of preventable death among Native people.
- Death rates from tobacco-related diseases among Native people are double that of other ethnic groups.
- Native women are the only group of people in the United States who smoke more cigarettes now than they did 20 years ago.
- Cigarette smoking is a major contributor to the top two causes of death among Native people, heart disease and cancer, especially lung cancer.



**ALL NATIONS
BREATH OF LIFE**

FOR MORE INFORMATION CONTACT:

Jerry Briscoe, *Research Associate*
University of Kansas Medical Center Department
of Preventive Medicine and Public Health
MS 1008, 3901 Rainbow Boulevard,
Kansas City, KS 66160 • 913-588-2708
jbriscoe@kumc.edu • www.anbl.org



**ALL NATIONS
BREATH OF LIFE**

"Light Up a New Way of Life"

**A Smoking
Cessation Program
for Native People**

"Light Up a New Way of Life"

ALL NATIONS BREATH OF LIFE

REASONS TO QUIT SMOKING

Health Benefits

- The benefits of quitting smoking are both immediate and long-term.
- Within 20 minutes of quitting, your blood pressure and heart rate will drop back to normal.
- Within 5 years of quitting, your risk of dying from lung cancer will be cut in half.
- Within 10 to 15 years of quitting, your risk of stroke and heart attack will become similar to those of a non-smoker.

Loved Ones

- More of our former smokers tell us they want to quit for their family or friends than for any other reason.
- The health consequences of being exposed to second-hand smoke are similar to those for the smoker himself or herself!

Tradition

- Many of our participants have told us that they want to quit smoking cigarettes because tobacco is a sacred plant that should not be abused.
- Many, though not all, Native peoples historically and currently use tobacco for spiritual and cultural reasons. This is not the same as smoking cigarettes.

Because you are worth it!

- You deserve to feel healthy everyday and quitting smoking can help you do that!

ALL NATIONS BREATH OF LIFE SMOKING CESSATION PROGRAM

Program Components

- Program includes both in-person group sessions and individual telephone sessions, all lead by the same facilitator
- Groups will consist of 15 or less
- All group facilitators are Native
- Telephone calls will be used to discuss individual concerns and issues related to quitting and staying quit
- All educational materials for the program are designed specifically for Native people
- The program is designed to respect the sacred nature of tobacco to many Native people and also recognizes that not all Native people use tobacco for spiritual or cultural reasons
- Participants can choose to use some type of pharmacotherapy to help them quit or they can just participate in the group and individual sessions
- Family members or friends are asked to participate in some group sessions

Session Topics

1. Personal journeys with tobacco
2. Basic facts about smoking and preparing to quit
3. Coping with withdrawal symptoms and cravings
4. Traditional use of tobacco
5. Stress reduction
6. Weight management while you quit
7. Communication and gaining support from family and friends
8. How to stay quit and long-term benefits of quitting

What is the cost?

This is a FREE program to all Native people, including FREE group sessions, FREE individual phone calls, and FREE pharmacotherapy of your choice.

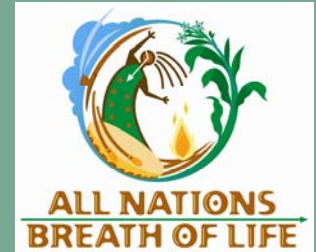
REMEMBER...

Quitting smoking is HARD WORK! It can take several tries, but YOU CAN DO IT! We can help you quit this time, even if you haven't been able to do it in the past.

Let us try to help you!

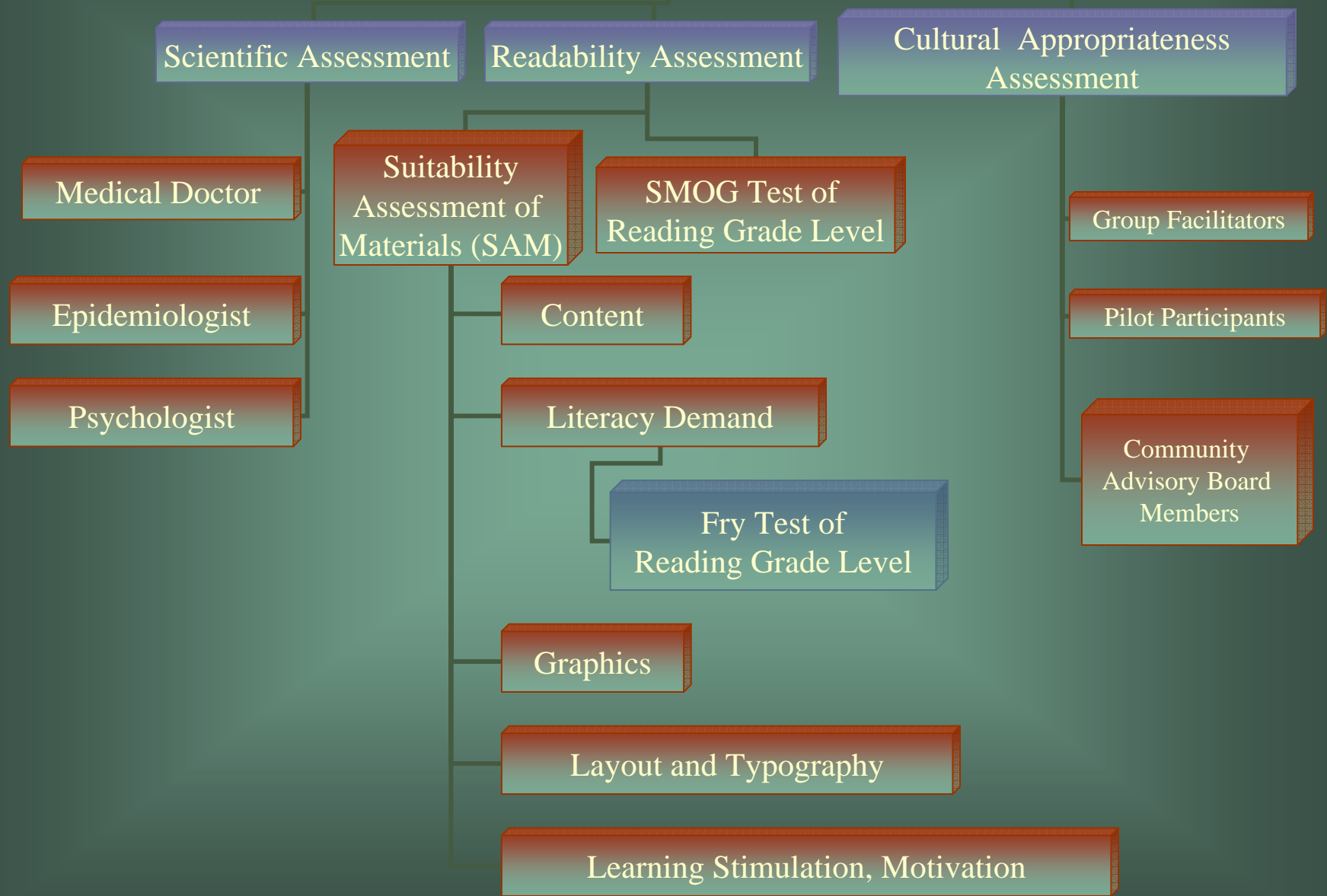


Development of Educational Materials



- We chose not to use the readily-available, non-tailored smoking cessation information due to its entirely negative portrayal of tobacco
- We created new materials that have the negative information about smoking, specific to Native people where possible
- Unlike most smoking cessation information, we include positive aspects of tobacco and traditional smoking
- The development process included several partner organizations and community members

Assessment of Educational Materials



A SMOKING CESSATION PROGRAM FOR NATIVE PEOPLE

Funded by the American Cancer Society, the American Lung Association, and the University of Kansas Medical Center Research Institute, Inc.

COPING w/WITHDRAWAL



Potawatomi • Huron • Lakota • Kalapooia
Northern Cheyenne • Shoshone • Nootka
Suquamish • Chinook • Menominee
Anishinabe • Aniyunwiya
Isleta • Gaiyapiti • Lipan Apache
Missouria • Kiowa • Pueblo
Skwamish • Tohono O'odham • Yuma • Choctaw
Squamish • Navajo • Arapaho • Kiowa
Pascua • Hopi • Taos
Gwich'in • Nez Perce • Shoshone • Yuma
Spokane • Papago • Chippewa • Ojibwe • Ute
Ojibwe • Yankton • Winnebago • Seminoles

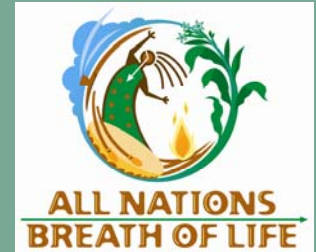


**ALL NATIONS
BREATH OF LIFE**

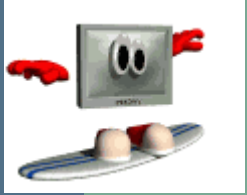
"Light Up a New Way of Life"



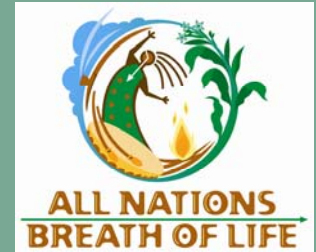
Program Success



- We have run several pilot groups
 - N=30
- At program completion (3-months post-baseline), our quit rates are 65%
- At six-months post-baseline, our quit rates are 25%
 - Current quit rates in the Native population without a program are 5%
 - Quit rates in the Native population using other programs designed for this population are between 5% and 8%
- We are currently beginning a randomized clinical trial of the program



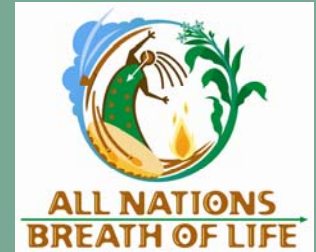
The Future: The Internet



- Internet site for Native people about smoking and lung health
 - American Lung Association (SB40588-N, PI: Daley)
 - Site will also collect data on acceptability of and desire for an Internet-based smoking cessation program
- On-line ANBL??



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