SESSION 1 (60 – 90 minutes) Health and Addictive Aspects of Smoking
Conducted by Medical Students

AIMS

1. To show you what we see in our hospitals every day as a result of smoking, explain how smoking causes it and explain the risk of it happening to you if you choose to smoke.

2. To show how smoking harms you RIGHT NOW while you’re still a teenager.

3. To answer your questions.

IMPLEMENTATION

1. Video – (33 minutes)

   a. Introduction: “I Don’t Smoke” – Dwyane Wade (Miami Heat) and Tobacco Free Kids of the World (1 min.)

   b. Confessions of teenage smokers and RAP Music Video. (8 min.)

   c. Medically illustrated patient histories followed by explanations of how smoking caused their diseases. (Pathogenesis). (24 min.)

2. Live demonstration of a tobacco tar stained handkerchief and review of an audience Handout which includes a Summary of the take home message. (See pg. 6, Section A)

3. Answering class questions.

4. Live patient testimony (for 90 minute sessions only if a patient is available).

Note to Medical Student Presenters:

After introducing yourself and stating the above Aims to the class, say “let’s see how smoking affects you right now as a teenager.” Then show the first 9 minutes of the Video (sections a and b above). After showing these sections, stop the Video and state: “These teenagers already had serious problems from their smoking. They were all severely addicted to nicotine and wanted to stop smoking but couldn’t. They also had problems with dating, physical fitness, athletic ability and their health and all are heading directly toward one or more of the diseases which you’re about to see in our patients.”
Then, if available, introduce the patient (90 minute sessions only). Then show the rest of the Video (24 minutes).

Then, demonstrate the tar stained handkerchief, review the Handout with the class (take home message pg. 6, item A) and answer class questions.

Before leaving, ask the class to think about items D 1-4 in their Handout, “How to Improve Tobacco Resistance Skills”, as Homework. (Read them to the class.)

Provide the TRUST Counselor or Teacher in charge with a copy of the Video for the school library.

SESSION 2 (60 – 90 minutes) Social Aspects of Smoking (optional)
(An interactive follow up session conducted by Medical Students, Classroom Teachers and an articulate smoker (preferentially a teenage smoker) who wishes he/she “never started”

AIMS

1. To review the general principles of critical thinking and good decision making and apply them specifically to the use of tobacco.

2. To critically analyze how tobacco companies try to get you to buy their poisonous product (e.g. through brand name, advertisements, promotions and smoking scenes in movies which are sometimes paid for.)

3. To express WHY and practice HOW to say “NO” when offered a tobacco product.

IMPLEMENTATION

1. Interactive class review of the homework assigned in Session 1 (see Handout, pg. 6, section D. “How to Improve Tobacco Resistance Skills”) which addresses the above aims.

2. At the start of this Session ask the Class:
How can you best determine if information that you are given is likely to be true?

Answer: As outlined in your Handout on Critical Thinking, information that comes from an authority on the subject who presents good evidence for it that makes sense to you is likely to be true.
Then, introduce the smoker and say, ----- is certainly an authority on the subject with good evidence for what he/she says because he/she is talking about his/her own personal experience as a smoker. You be the judge if what he/she says makes sense to you.

3. The smoker then relates how smoking has already adversely affected his/her personal life (e.g. tobacco addiction etc.) (3-5 minutes) and then participates in the rest of the interactive session with the class.
If an appropriate smoker is not available, you can show the video segment of Bill Stone, “Profile of a Tobacco Addict” (3 minutes), which appears in the last ½ hour of the Videocassette (just after “Consequences of Second-hand Smoke”) and also appears on the DVD (Music Video, 5th sub-menu).

Use the same Introduction as in 2. above.

4. The last ½ hour of our Video, which is not shown during Session 1, also addresses the above Aims. It includes sections on: How Tobacco Companies Sell Their Products, Consequences of Second Hand Smoke, Profile of a Tobacco Addict, Interactive RAP Karaoke and How to say “NO” (i.e. examples of how youths respond to the question “Care for a Smoke?”)

One or more of these sections of the Video can be presented (if desired) to enhance Session 2.

5. Our Interactive CD-ROM also addresses the above aims (Available on request).

6. Bring your own creativity and passion to this Session. The idea is to generate class interaction whereby students inspire each other to be Tobacco Free.
PREPARATION

A. Check out the Teaching Packet from the Family Medicine Student Clerkship Office. The Packet contains: (1) an Orientation Guide, (2) a Videocassette and DVD (3) a tobacco tar-stained handkerchief, (4) transparencies of a tobacco and marijuana tar-stained handkerchief, (5) an Information Summary Handout Sheet (pg 6-8) and (6) a Medical Student Evaluation Form (pg 9).

B. Preview the Video (and rewind so it’s ready for use).

C. Review the Information Summary Handout Sheet (which includes speaker’s notes for the tar-stained handkerchief, pg 6, section A).

D. Review the Orientation Guide, particularly Chapter 2 (Video Study Plan) that contains answers to commonly asked questions about tobacco use and an annotated True False Test on the Health, Addictive and Social Aspects of Teenage Smoking. (Our website www.mededu.miami.edu/Tobacco also contains the Video Study Plan; see Main Menu.) Be prepared to answer the most common questions posed by adolescents after they see our Video which are:

- What can I do about family members who smoke? (pg. 19)
- What can I do if I and/or my family members try to quit and can’t? (pg 19)
- What are the short and long-term health risks if you smoke? (pg. 56)
- What are the short and long-term benefits if you quit? (pgs.32, 68)
- Compared to cigarettes, what is the relative safety or lack of it regarding cigars, pipes, chewing (smokeless) tobacco and marijuana? (Questions on marijuana are very frequent.) (pgs. 29, 30)
- What about Black and Mild cigarillos with the “cancer stick” removed?
- Do low-tar, additive-free or filter-tip cigarettes reduce health risk? (pg. 30)
- What are the hazards of breathing second-hand smoke? (pgs.28, 69)
- If tobacco is so bad why is it legal? (pgs. 9, 34)
- Crossing a street is also a risk. You can be hit by a car! (pg. 34)
- My parents smoke! My teacher smokes! Why shouldn’t I? (pg. 35)
- How long does it take to become addicted to tobacco? (pg. 19)
- How was the tar-stained handkerchief made?
- Do you smoke? Did you ever smoke?

Explode the following myths:

- I can quit anytime I want. (pgs.66, 67)
- It takes a long time to get addicted. (pgs. 66, 67)
- Tobacco is not a drug and is less addicting than heroin or cocaine. (Explain the steps of becoming hooked on tobacco; increasing tolerance to nicotine requiring more and more for the same effect and withdrawal symptoms when you try to quit.) (pgs. 66,67)
- It only harms older people (pgs.56, 67, 68).
- Marijuana is safer. (pg.29)
- Low-tar, additive-free and filter-tip cigarettes are safer. (pg. 30)
- Most kids and adults smoke. (pg. 69)
- Males are at greater health risk from tobacco use than females. (pg. 32)
• Smoking makes me look cool! (Explain that smoking is now much less accepted by teens and most prefer to date non-smokers.) (pgs. 69, 70)
• People who won’t stop smoking are bad. (Explain that they are addicted and need help, not judgment. Most people who smoke regularly want to stop but can’t.) (pgs. 32, 68)

E. Presentation Suggestions

1. Arrive at the school at least 15 minutes early to test the equipment (i.e., overhead transparency projector, VCR player and a microphone if the session is in an auditorium). **Also insure that the school has made copies of the Information Summary Handout Sheet (pgs 6-8) for each student and teacher. If not, they can usually do so quickly in time for your Session...**

2. Arrive in your white medical jacket (optional).

3. Talk to students as adults, just present facts, avoid medical jargon and don’t preach. Tell the class up front who you are, why you’re there and what you’ll be doing during the allotted time. A very brief personal anecdote (if you have one) is usually well received at the start of your presentation.

4. Keep well within the timeframe for your scheduled session and leave plenty of time for questions and class interaction. Be flexible. Have fun. Public Health statistics show that for every two kids that you prevent from becoming a long-term smoker, you prevent one from losing, on average, 15 years of life. According to the American Thoracic Society, for every one kid that you prevent from becoming a long-term heavy smoker, you prevent that kid from losing, on average, 25% of his/her life. **What a gift to such a person!**

RETURN THE TEACHING MATERIALS PACKET with your completed Evaluation Form (pg 9) to the Family Medicine Clerkship Office. (Highland Professional Bldg., 1801 N.W. 9th Avenue, Room 470.) Please return your packet on the day following your Session so that it can be made available and ready for the next student.

For scheduling questions, contact the secretary at the Family Medicine Clerkship Office (305) 243-2953.
For questions about medical content, or presenting the program to additional audiences of your choice (i.e., audiences that you arrange) contact Arthur Pitchenik, M.D. at (305) 575-3170 or (E-mail) arthurpitaol.com.
“THEY’RE RICH, YOU’RE DEAD” Information Summary Handout Sheet

A. The Take-Home Message:
This is the tar that came from blowing the smoke of only 2 cigarettes through a clean handkerchief [http://www.mededu.miami.edu/Tobacco/TablesAndImages](http://www.mededu.miami.edu/Tobacco/TablesAndImages) and pg. 6a. This is the same tar containing over 400 poisons, that in older smokers causes mouth, throat and lung cancers; chronic bronchitis; emphysema; “black lung”; and heart attacks, all of which you’ve seen in our Video “They’re Rich, You’re Dead.”

This is the same tar containing over 400 poisons, that in teenage and pre-teenage smokers causes decreased growth and development of the lungs, “black lungs,” asthma, bronchitis, cough and phlegm production, respiratory infections, increased carbon monoxide in blood, decreased physical fitness, abnormalities in blood fat and early hardening of the coronary arteries (which lead to later heart attacks) and pre-cancerous lung mutations (which lead to later lung cancer). (Reference: US Public Health Service, Tobacco Use Among Young People, Surgeon General’s Report, 1994.)

What you don’t see is the nicotine in tobacco that is so addicting there is a huge risk that if you start to smoke, you won’t be able to stop even though you want to! For teens who continue to smoke, the risk of suffering and dying on average 15 years early from one or more of the diseases shown in the Video and listed above is 50% (one of two)! The risk is even greater for heavy smokers!

B. How to Obtain FREE Information and FREE Personal Help to Quit Smoking:
1. The State Quit Line: 1-800-QUIT NOW (provides free personalized telephone counseling, self-help booklets and referral to local stop smoking programs)

C. How to View & Obtain Copies of “They’re Rich, You’re Dead” Video and Interactive CD ROM
1. Purchase them with a credit card at copying cost by calling (305) 856-1245.
2. View them on University of Miami Website: [www.mededu.miami.edu/tobacco](http://www.mededu.miami.edu/tobacco)
3. The Video is also on the Dade County Public School TV Network – WLRN “Teacher’s Choice,” #931, 932, 81154 and 81155.

D. How to Improve Your Tobacco Resistance Skills (i.e., not starting)
1. It’s a fact that the great majority of teenagers don’t smoke and prefer to date non-smokers. What do you think are the major reasons for this?
2. How would you respond if a friend asked you “Care for a Smoke?”
3. How do big tobacco companies try to manipulate you into buying their poisonous product? (e.g. through brand name, ads, promotions, and scenes in movies which may be paid for).
4. Read the next 2 pages on the Principles of Critical Thinking and Good Decision Making.

E. How to Evaluate Our Program: [www.mededu.miami.edu/Tobacco/StudentEval](http://www.mededu.miami.edu/Tobacco/StudentEval)
HOW TO EVALUATE INFORMATION (CRITICAL THINKING) AND MAKE GOOD DECISIONS

Critical thinking means knowing how to evaluate whether information is likely to be true or false. Why is this important? Acting on true information leads to success. Acting on false information can be deadly.

Consider the case of Ted Bundy. He was a handsome, friendly, very bright law student who was exceptionally charming with women. He also seduced and killed forty girls in cold blood before being caught and sentenced to death in Florida’s electric chair. Because of his attractive image, people overlooked increasing evidence that he was a killer and as a result, many young girls were murdered before he was caught. This was a failure of critical thinking that lead to poor decision-making, which was deadly.

In the same way, tobacco advertisements present very attractive images that seduce you to buy the product and to overlook hard evidence that tobacco is a killer. Again, a failure of critical thinking that leads to poor decision-making, which is deadly.

How do you evaluate information critically, to determine if the information is likely to be true or false? You have to answer three questions, (1) Who is the source of the information? (2) Is there reliable evidence for the information? and (3) Does the information make sense?

(1) **Who is the source of the information?** Do they have something to gain? Are they an authority on the subject? If you’re evaluating information on whether or not tobacco use causes addiction and disease, **tobacco companies** are not a reliable source of the information because they have something to gain, your money. A **friend** who is asking you to smoke may not be a reliable source of information because he has something to gain, your company, and may also have little personal experience with the consequences of smoking. A **tobacco addict** who tells you he can’t quit smoking even though he’s tried many times, a **patient** with a smoking-related disease who shows you and tells you about his illness, a **physician** who cares for hundreds of such patients and **health agencies** who conduct surveys on thousands of such patients are much more likely to be reliable sources of this information because they have nothing to gain except to protect your health and because they are authorities with extensive experience on the subject.

Even if the source of the information seems to be a recognized authority on the subject who has nothing to gain, you shouldn’t automatically take their word for it. You still must determine:

(2) **Is there reliable evidence for the information?** For example, if you’re evaluating information on what percentage of kid’s smoke and, if most kids prefer to date non-smokers, does the information come only from someone’s impression with no evidence for it or does the information come from a survey that presents evidence? If the information comes from a survey, is the evidence in the survey reliable? For example how many kids were in the survey? A survey of 1,000 kids is more reliable than a survey of 10 kids. What type of kids was in the survey? A survey of **all** types of kids is more reliable than a survey limited to only high school dropouts or boy scouts. How was the survey information obtained? If you ask leading questions, like “You don’t really smoke do you?” the answers are not likely to be reliable. If the questions were put fairly, like “Do you smoke?” and the answers verified with chemical saliva tests for tobacco products, the information is much more likely to be accurate. Were there other surveys that reached the same conclusion, or were there other surveys that reached an opposite conclusion that you’re not told about?

Finally, based on your reasoning: (3) **Does the information make sense?**
When the original questions are subjected to critical thinking like we’ve just been through there’s overwhelming evidence that tobacco use causes severe addiction, serious disease and millions of premature deaths. There is also overwhelming evidence that the great majority of teenagers do not smoke and prefer to date non-smokers.

In summary, we evaluate information critically, by asking three questions: (1) Who is the source of the information? (2) Is there reliable evidence for the information? and 3) Does the information make sense? These questions are useful for evaluating any type of information, not just information on tobacco. When we follow these three steps, we’re much more likely to make decisions based on true information rather than false information and this leads to better decisions and greater chances for success.

A METHOD FOR MAKING BETTER DECISIONS

Before deciding on something that’s really important, list the choices that you have. Then, in separate columns, list the reasons for each choice. To select good reasons for each choice, use critical thinking. The column with the greatest number of good reasons, is the best choice.

For example, should I or should I not use tobacco with my friends?

REASONS YES

1. I’ll fit in better with my group of friends who smoke or chew tobacco and create a favorable image. (This may or may not be true, depending whether or not you have reliable evidence from a reliable source and it makes sense).

REASONS NO

1. Surveys show that most kids don’t use tobacco, think it creates an unfavorable image and prefer to date non-smokers.
2. Second-hand smoke is hazardous and offends many people.
3. My clothes, hair and breath will stink.
4. Addiction to nicotine is very common. If I start using tobacco, there’s a very strong chance that I won’t be able to quit even though I want to.
5. It’s expensive.
6. It causes more respiratory infections.
7. It causes coughing and increased mucous production.
8. It causes slowed lung development, shortness of breath and decreased athletic ability
9. Yellow teeth and
10. Wrinkles at a younger age.
11. It causes mouth, throat and lung cancer.
12. Chronic bronchitis and emphysema.
13. Heart attack
14. Stroke and
15. Early death.

So there’s only one possible reason to use tobacco with my friends which may or may not even be true and there are at least fifteen strong reasons why I should not use tobacco with my friends. Using this method of decision making, the choice whether or not to use tobacco is a no brainer.
MEDICAL STUDENT PRESENTER’S EVALUATION FORM
“THEY’RE RICH, YOU’RE DEAD” TOBACCO AWARENESS PROGRAM

Return to:
Secretary / Coordinator
Family Practice Clerkship Office
Highland Professional Building
1802 N.W. 9th Avenue, Room 470
Miami, FL
(305) 243-2953

School Presented at ________________________  Date Presentation ______________

Presenter’s Name ________________________________________________________

Presenter’s Affiliation ____________________________________________________

Check the box that best describes how you feel

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Please describe your overall experience, what worked and what can be improved. Were there any questions you couldn’t answer? What were they?

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