

## No Smoking, Please

*Tobacco-Free Nurses gives RNs the tools to help patients, themselves stop using tobacco products.*

When Peter Jennings announced that he was taking some time off from anchoring ABC's *World News Tonight* to be treated for lung cancer, two nurse experts on tobacco control viewed the resulting media attention as a double-edged sword.

On the one hand, it renewed public interest in a known hazard of smoking. On the other, the power of the addiction was rarely discussed. (Jennings reportedly quit smoking 20 years ago but resumed to some degree after the attacks of September 11, 2001.) Further, the media addressed only one health risk associated with tobacco use—and not its connection to cardiovascular disease, diabetes, and other respiratory conditions.

The two ANA/California nurse members who followed the Jennings coverage, Linda Sarna, DNSc, RN, and Stella Bialous, DrPH, RN, head a national project called Tobacco-Free Nurses (TFN), which primarily focuses on two areas: providing nurses with the tools to help their patients stop using tobacco products and helping RNs themselves stop smoking. The ANA and the American Nurses Foundation (ANF), one of its affiliates, are among the key partners in the project. Additionally, the ANA and the ANF are partners in providing consistent and ongoing support to build alliances with nursing organizations and to promote greater interaction among groups. The ANA-ANF

has established an advisory committee for internal collaboration among the ANA; the ANF; the United American Nurses, AFL-CIO; the Center for American Nurses; and the ANA's constituent member associations. The committee expects to add a representative from one of the ANA's organizational affiliates as well.

### THE INITIATIVE

Sarna, a professor at the University of California, Los Angeles, School of Nursing, and Bialous, president of Tobacco Policy International, officially launched TFN in the summer of 2003 with the help of other prominent nurse experts, nursing organizations, and a \$1.8 million grant from the Robert Wood Johnson Foundation.

An important part of the initiative focuses on creating a network of RNs who will promote tobacco-control programs within their workplaces and communities.

To that end, TFN led a March 2004 summit with representatives from 21 leading nursing organizations who developed and signed onto an "action plan," Bialous says. By doing so, they committed to helping their members stop smoking, promoting smoke-free workplaces, and pursuing other cessation efforts. This May, TFN leaders brought together nurse researchers to share their studies on tobacco-related issues and identify areas for more research.

"Tobacco use is a silent epidemic and a very powerful biochemical addiction," Bialous says. "It's the largest cause of preventable illness and death in this country."

**For more information** on Tobacco-Free Nurses and smoking cessation resources, go to [www.tobaccofreenurses.org](http://www.tobaccofreenurses.org) or call the National Quitline at (800) QUITNOW.

She and other TFN leaders believe nurses can and should play a key role in educating their patients on tobacco use.

"We're not advocating that all nurses be cessation experts, but to at least know some information about tobacco-related risks and interventions," Bialous says. "Hopefully information provided through TFN will drive the message home that nurse participation is important if we want to change the culture of tobacco use in this country."

Another major aspect of TFN is its Web site, which offers a range of information, from general information on tobacco use to antismoking materials targeting health professionals. An integral part of the Web site is called "Nurses QuitNet." Through TFN, nurses are eligible at no cost for Quitnet's premium package, where they can get personalized smoking-cessation plans and expert advice, as well as chat with others who are trying to stop using tobacco.

### NURSES AND SMOKING

"The Tobacco-Free Nurses initiative focuses on removing the barriers to tobacco cessation, including those faced by nurses," Sarna says.

To learn more about these barriers, Sarna, Bialous, and other prominent nurse researchers completed a study on the experiences and atti-

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tudes of nurses on smoking and smoking cessation in the workplace that was published in *Research in Nursing and Health* in January 2005.

According to the article, “Nurses, Smoking, and the Workplace,” about 15% of RNs and 28% of LPNs smoke. More nurses smoke than other health care professionals.

Beyond the statistics, Sarna discovered the impact that nurses’ smoking had on their work life. Nurses described smoking as an integral part of their routine, including determining the timing of their breaks and the way they managed patients.

Nurses who smoke also went to great lengths to hide their addiction from their patients and families, which often led to their feeling both guilt and shame.

“They expressed feeling like hypocrites when addressing tobacco use with their patients, and they didn’t fully understand the addictive component of smoking,” Sarna says.

Additionally, her research pointed to comments by nurses who viewed 12-hour shifts and a lack of cessation resources in their facilities as barriers to stopping smoking. And some felt job stress was a factor in their inability to quit.

“There are no data that suggest stress leads to smoking,” Sarna says. “However, it is hard to quit when you are in a stressful environment. And quitting is stressful in itself.”

## **NURSE EDUCATOR TRAINING**

Another nurse making extraordinary contributions in tobacco control is Janie Heath, PhD, APRN,BC, ANP, ACNP, a member of the TFN leadership task force. She began her career in tobacco prevention efforts around 1995, while working as an adult nurse practitioner with the Veterans Affairs system in Augusta, Georgia.

Today, Heath serves as the director of the Tobacco Cessation Program for the Georgetown University Medical Center, where she’s engaged in research, community initiatives, and clinical practice.

She has led the Summer Institute for Tobacco Control Practices in Nursing Education since 2003. The institute is a two-day course for nurse educators who then return to their nursing programs with the knowledge and tools to educate baccalaureate and graduate students on tobacco issues.

For the institute, Heath partnered with pharmacy colleagues from the University of California, San Francisco, who developed the Rx for Change: Clinician Assisted Tobacco Cessation curriculum. Heath teaches this comprehensive program, which touches on everything from tobacco epidemiology to pharmacologic and nonpharmacologic treatments to curriculum integration.

In 2003 the program, which is sponsored by the American Legacy Foundation, had faculty from 30 nursing schools. Last year 50 more schools participated, Heath says.

“That translates to about 4,500 nursing students who now have been trained with the Rx for Change curriculum,” Heath says.

## STAFF NURSE INVOLVEMENT

Josie Howard-Ruben, MS, RN, APN, AOCN, is another participant in the TFN leadership task force who has taken on a leading role in the war on tobacco. Howard-Ruben is a clinical development specialist for oncology at Advocate Health Care, a 10-hospital system in the Chicago area.

She's worked to promote the benefits of a smoke-free environment within the Advocate system, which has a total of about 25,000 employees, is distributing smoking prevention and cessation materials to nurses at educational programs and on the Advocate intranet, and has created a link from her health system's Web site to the TFN Web site so nurses can access tobacco-related information for their patients or themselves.

"I've been an antismoking person for a very long time," Howard-Ruben says. "And I really believe nurses should take a proactive role in counseling patients about tobacco use and prevention and also be role models for patients by not smoking."

Howard-Ruben is currently recruiting primarily staff nurses for a study that will gauge the best methods for teaching skills to RNs on tobacco risks and cessation efforts. She and a team of advanced practice nurses specifically want to compare the effectiveness of a Web-based learning program with that of a one-day, instructor-led program using the Rx for Change curriculum.

The study will include follow-up monitoring for 12 weeks to see if nurses are using the information they learned with their patients.

"Many staff nurses think they need to have a sophisticated skill set to talk to their patients about smoking," Howard-Ruben says. "However, there's a lot of teaching nurses can do in less than two minutes—and that basic information can have a huge payoff for their patients."

The U.S. Department of Health and Human Services has released another new tool nurses can use to help patients quit smoking. The free pocket guide, "Helping Smokers Quit: A Guide for Nurses," gives nurses easy access to information based on the "five As" approach to cessation intervention: Ask, Advise, Assess, Assist, and Arrange. It also includes a current listing of smoking cessation medications approved by the Food and Drug Administration. ▼