



NATIONAL TOBACCO CONTROL PROGRAMME



A Guide for Teachers



सत्यमेव जयते

Ministry of Health & Family
Welfare, Government of India

Directorate General of Health Services

National Tobacco Control Programme

A Guide for Teachers



**Directorate General of Health Services,
Ministry of Health & Family Welfare Government of India**

Supported by
World Health Organization, Country Office for India

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FOREWORD

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Tobacco use is the single largest cause of preventable deaths in the world today. Globally approx. 5.4 million people die each year due to diseases resulting from tobacco consumption and more than 80% of these deaths occur in developing countries. As per Global Adult Tobacco Survey (GATS) India, 2010, more than two thirds of the adults in India used tobacco in some form. As per Global Youth Tobacco Survey (GYTS) 2009, 14.6% of 13-15 years school going children were using tobacco.

Government of India has taken many progressive steps to control the increasing tobacco use among the youth. The Cigarettes and other Tobacco products (prohibition of advertisement and regulation of trade and commerce, production, supply and distribution Act) COTPA 2003 is a comprehensive law aimed to address the menace of tobacco in the country. The law also provides for ban on sale of tobacco products within 100 yards of an educational institution and ban on sale to and by minors (persons below 18 years age).

For effective implementation of provisions under the Act and to promote tobacco control strategies among schools, the Government developed guidelines for "Tobacco Free Schools", which were adopted by the Central Board of Secondary Education for implementation in the schools affiliated to CBSE.

Teachers have always been considered as the best guide and serve as a role model for the students. By influencing the attitudes and behavior of their students, they can play a vital role in implementation of the law and prevent students from taking up the use of tobacco.

The Guide would equip the teachers with requisite knowledge and skills so as to influence and change the behavior of the students in respect of tobacco use, resulting in reduction in the demand for tobacco in the community.

I am confident that this "Guide for Teachers" will prove critical to promotion of the "Tobacco free schools" initiative and effective implementation of COTPA.


Dr. R.K. Srivastva

ACKNOWLEDGEMENT

The vulnerability of the youth to tobacco use and the growing use of tobacco among youngsters was the force behind development of the "Guide for Teachers" under National Tobacco Control Programme. The Guide aims to promote implementation of "Tobacco free schools" initiative as well the tobacco control law in the country.

I express gratitude to Dr. R.K. Srivastava, Director General of Health Services for his continuous guidance in bringing out this guide for teachers.

I acknowledge the contributions made by Dr. D.C. Jain, Deputy Director General Health Services and Dr. Jagdish Kaur, Chief Medical Officer, Directorate General of Health Services, who were instrumental in developing the concept as well as contents of this Guide. Ms Vineet Gill Munish, NPO, WHO, India provided useful inputs for the Guide.

I also extend appreciation on behalf of the Directorate General of Health Services to all collaborators who contributed to the content development and review of the Guide.

I gratefully acknowledge the help and support provided by Dr. Deoki Nandan, Director, National Institute of Health & Family Welfare (NIHFW) and Dr. Poonam Khattar, Reader, NIHFW, New Delhi at various stages of development of this module.

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Dr. Dinesh Bhatnagar,
Additional Director General Health Services

ABBREVIATIONS

COTPA -	Cigarette and Other Tobacco Products (Prohibition of advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) Act
ETS -	Environmental Tobacco Smoke
FCTC -	Framework Convention on Tobacco Control
GATS -	Global Adult Tobacco Survey
GYTS -	Global Youth Tobacco Survey
ICMR -	Indian Council of Medical Research
NTCP -	National Tobacco Control Programme
SHS -	Second Hand Smoke
SIDS -	Sudden Infant Death Syndrome
TAPS -	Tobacco advertising, promotion and sponsorship

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Introduction

Why consider "Tobacco"

Tobacco is the foremost preventable cause of disease and death in the world today. Globally approx. 5.4 million people die each year due to diseases resulting from tobacco consumption. More than 80% of these deaths occur in the developing countries. Tobacco is a risk factor for 6 of the 8 leading causes of death. Nearly 8-9 lakhs people die every year in India due to diseases related to tobacco use. Almost 30% of cancers in India are related to tobacco use. In the North East region, 50% of cancers among men and 25% among women are related to tobacco use. The majority of the heart diseases and lung disorders including tuberculosis (TB) are directly attributable to tobacco consumption. Other diseases which are associated with tobacco consumption are stroke (Lakwa), cataract (Motiabind), peripheral vascular diseases etc. As per available evidence, incidence of impotence is 85% higher among smokers. Tobacco use by pregnant women leads to low birth weight babies, still births and birth defects.



The wildfire like spread of tobacco epidemic

» As per Global Adult Tobacco Survey (GATS), 2010, one third of adults in India (15 years and above) use tobacco and use of smokeless tobacco products is more than the smoking forms.

» As per Global Youth Tobacco Survey (GYTS India), 2009, 14.6 % children in the age group of 13-15 years consumed tobacco (19% boys, 8.3% girls) in some form.

Out of this, number of children using smokeless tobacco products was high. It was found that 9% children in this age group were using smokeless tobacco products (11.1% boys, 6% girls) and 8.1% children were smokers (11.2% boys, 3.7% girls). A large number of children were exposed to second hand smoke (21.9% at home and 36.6% at public places).

» In India, tobacco is consumed in many forms, both in smoking and smokeless forms. For e.g. khaini, bidi, gutkha, betel quid with tobacco (paan), hukka, cigarettes, cigars, chillum, chutta, gul, mawa, misri etc. As per GATS India, 2010, Khaini is the most commonly used smokeless tobacco product while Bidi is the most common form of smoking tobacco in use in the country.

» To reduce the use of tobacco among youth and protect the non smokers from tobacco smoke, Government of India enacted a comprehensive legislation in the form of "Cigarettes and other Tobacco Products Regulation Act (COTPA)", 2003. The Government also ratified WHO Framework Convention on Tobacco Control (FCTC) in 2004 and is obligated to implement measures for reduction in demand and reduction in supply of tobacco in the country. The National Tobacco Control Programme (NTCP) initiated in 2007-08, is under implementation in 42 districts (21 states) in the country. School based tobacco control programmes are a key component of the NTCP.

School Health Programme:

» The School Health Programme is under implementation in 27 states/UTs in the country. This manual is developed with an objective to incorporate tobacco control initiatives in an effective manner in the School Health Programmes.

» Schools are important partners in accomplishing the goal of controlling the use of tobacco products by the school children and also empowering them as champions of tobacco control in the society.

Since schools have contact with the child and family from kindergarten through to grade twelve, schools can play an integral role in reducing tobacco use. The schools have the potential to reach to large numbers of children repeatedly at a age when they are tempted to experiment with tobacco.

» "Tobacco Free Schools" policies play an important role in discouraging youth from starting to smoke and use tobacco and in decreasing the likelihood of developing an addiction to tobacco. Schools are well positioned to provide cessation

information and assistance to teens in the early stages of addiction and improve population health outcomes. The Government of India also developed Guidelines for "Tobacco Free Schools", which have been adopted by CBSE for implementation in all the schools affiliated to it.

Important:

The teachers involved in activities related to tobacco control manual should essentially be non smokers/non tobacco users so as to be the role models for students.

Chapter-1

Steps for disseminating information on hazards of various tobacco products:

Teachers should check the level of knowledge of students and through this activity they can further disseminate the existing knowledge and information about various forms of tobacco and their harmful effects.

Clear all misunderstandings and misconceptions through interactive teaching methods with active participation by students, by using teaching materials/aids e.g. flash cards, posters to supplement information on knowledge, beliefs, attitudes, and behavior.

PROCESS OF CONDUCTING ACTIVITIES



Step 1
Introduce the subject (Tobacco) to students in the class



Step 2
Ask about their knowledge of tobacco products and their harmful effects



Step 3
Organise a brain storming session among students



Step 4
Select small groups of students and arrange for peer group discussions



Step 5
Facilitator boosts every student to participate to generate new ideas to stop tobacco consumption and to put forth their point of view.



Step 6
Reconvene the whole class. Organise question answers seminar with interactive discussions. Give exercises on worksheet to develop appropriate messages for the health and education programme.



Step 7

Each member of every group will be allocated a new group to make other students understand and facilitator can check whether they have understood or not, and can give their suggestions.

GUIDELINES FOR GROUP DISCUSSION:

GROUP:

- » Ideally each group may consist of 6-12 students, and a facilitator (teacher).

STUDENTS:

- » The group should be homogeneous (same class and age group).

- » One student speaks at a time and clearly.

FACILITATOR (MODERATOR/TEACHER):

- » Should not dominate the discussion.
- » Introduce new ideas to the discussion.
- » Monitor involvement and interaction among students.
- » While maintaining the core theme of the discussion ensures flow of conversation.

Timeframe should be half an hour or can be adjusted according to discussion.

This activity is for disseminating information about tobacco use and their hazards. This will make students participative and will create interest to know more.

It is suggested that activities may be adjusted in the routine teaching curriculum and schedule.

Chapter-2

Burden of Tobacco use in India

Aim:

To provide students with an overview of the extent of tobacco problem in the country.

Learning objectives:

1. To sensitize students about the size and gravity of tobacco problem.
2. To impart knowledge about different types of tobacco products available.

Background information for teachers:

Tobacco is the leading and a preventable cause of illness, disability and premature death globally. Tobacco has been called the world's greatest weapon of mass destruction. Each year 8-9 lakhs Indians die from tobacco-related diseases. This results in high personal and societal costs.

Tobacco use is rising in India – some facts:

- » India is the second largest consumer of tobacco in the world (after China) and second largest producer of tobacco (after China).
- » There are about 275 million tobacco users in India.
- » One-third of adults (34.6%) use some form of tobacco.
- » Tobacco use is deadly. Smoking kills up to half of all life time users.
- » 14.6% of 13-15 years school going children use tobacco in some form.
- » Average age at initiation of tobacco use is 17.8 years with 25.8% females starting tobacco use before the age of 15.
- » Every 8 seconds, an Indian dies due to tobacco related diseases.
- » Every day 2500 children start (initiate) smoking/tobacco use.

- » By 2010, smoking will cause about 1 million adult deaths each year in India.
- » About 70% of those who die from smoking will be between the productive age group of 30 to 69.
- » Percentage of smokeless tobacco use is more as compared to smoking forms.
- » Maximum number of cancers of mouth in the world occurs in India (approx.80%) and most of these are caused by consumption of tobacco.

Types of tobacco products use in India:

1. Smokeless forms

- » Khaini
- » Gutkha
- » Betel quid with tobacco (paan)
- » Zarda
- » Paan masala with tobacco
- » Mawa
- » Mishri
- » Gul
- » Bajjar
- » Snus
- » Snuff
- » Toothpowder with tobacco
- » Tuibur (tobacco water in use in Mizoram and Manipur)

2. Smoking forms

- » Bidis
- » Cigarettes
- » Hukka
- » Cigars
- » Cheroot
- » Chutta
- » Hukli
- » Dhumti
- » Pipes

Khaini is the most common tobacco product in use in India. Among smoking forms, bidi is most common. While the overall use is more among men, women use more of smokeless tobacco forms e.g. betel quid with tobacco and dentifrice containing tobacco as compared to smoking forms.

Usage of any tobacco product is NOT SAFE

Teaching material:

Teachers may use charts/posters/flash cards and can collect samples of locally used tobacco products to make students understand that the tobacco products which are available or accessible or are being used by peer group, parents or others are NOT SAFE.

Let's revise:

- » Tobacco is one of the largest killer in the world.
- » Tobacco is the most common cause of preventable deaths in the world.
- » Tobacco is the risk factor for six out of eight leading causes of death in the world.
- » India is the second largest consumer of tobacco products in the world.
- » Use of tobacco shortens life by many years.
- » Nicotine contained in tobacco is highly addictive in nature.

Note: Posters 1 and 2 may be used to explain.

Worksheet -1

A true-and-false quiz related to death toll and tobacco use:-

Circle the correct answer:-

1. Tobacco can be chewed (smokeless) or used as smoking forms.
1. False 2. True
2. Chewing Gutkha is safe.
1. False 2. True
3. Tobacco is good for the teeth and gums.
1. False 2. True
4. Low-tar cigarettes are safe.
1. False 2. True
5. HIV/AIDS kills more people than tobacco use.
1. False 2. True
6. Tobacco kills more people than road accidents + HIV/AIDS + Fire + Suicides/Homicides.
1. False 2. True

Answers:-
1. True
2. False
3. False
4. False
5. False
6. True

Poster 1
Various smoking forms of tobacco in use in India



Bidi



Hukka



Chutta



Cigar



Cheroot



Cigarette

Poster 2
Various smokeless forms of tobacco in use in India



Zarda



Gutkha



Pan masala with tobacco



Khaini



Snus



Snuff

Chapter- 3

Harmful contents of tobacco

Aim:

To provide students with an understanding of toxic and harmful contents of tobacco.

Learning objectives:

1. To increase knowledge of students about the harmful constituents used in tobacco products and their detrimental effects on health.
2. To demonstrate the ability to reject tobacco use
3. To develop skills to transfer this knowledge to peer group and community

Background material for teachers:

Tobacco is derived from the plant *Nicotina tobaccum*. The leaves of this plant are used to make smoking and smokeless tobacco products. Knowing the exact contents of tobacco and the role of the tobacco industry in manufacturing and selling this product helps youth to make healthier decisions.

Key points that help to illustrate the poisonous contents include:

- » Processed tobacco contains at least 2550 chemicals.
- » There are more than 7000 chemicals in tobacco smoke.
- » At least 69 of these chemicals are known carcinogens or chemicals that cause cancer.

Tobacco contains Nicotine, which is highly toxic, addictive and lethal substance:

- » 1000 times more potent than alcohol.
- » Nicotine is a drug more addictive than marijuana, cocaine, heroin, morphine and bhang.

Harmful contents of Tobacco:

1. **Nicotine** is a drug that is as addictive as cocaine or heroin. It occurs naturally in tobacco plants, although tobacco companies may add it to tobacco products. Within seconds of inhaling smoke from a cigarette, the nicotine reaches your brain, stimulating the nervous system, increasing heart rate, raising blood pressure and constricting small blood vessels under the skin.
2. **Tar** is a sticky black residue that results from the burning process. It contains hundreds of chemicals, many of which are considered carcinogenic or toxic. The tar carries many toxic chemicals to the lungs. It is the main cause of throat and lung cancer. Tar leaves stains on the smoker's teeth, fingers and lung tissue. Smokers having pack a day inhale about a quart of tar into their lungs in a year.
3. **Benzopyrene** is in the coal tar and cigarette smoke. It's one of the most potent cancer causing chemicals.
4. **Carbon monoxide** is a chemical contained in tobacco smoke which is produced as a result of the burning of tobacco. It reduces the ability of your red blood cells to deliver oxygen to tissues, causing the greatest potential damage to the heart, brain and skeletal muscles (tissues that have the highest demand for oxygen).
5. **Formaldehyde** is added to tobacco to help prevent the tobacco from drying out quickly. This is one of the main ingredients in embalming fluid used to preserve dead bodies. It is a known carcinogen (cancer causing substance) and can damage the lungs, skin and digestive system.

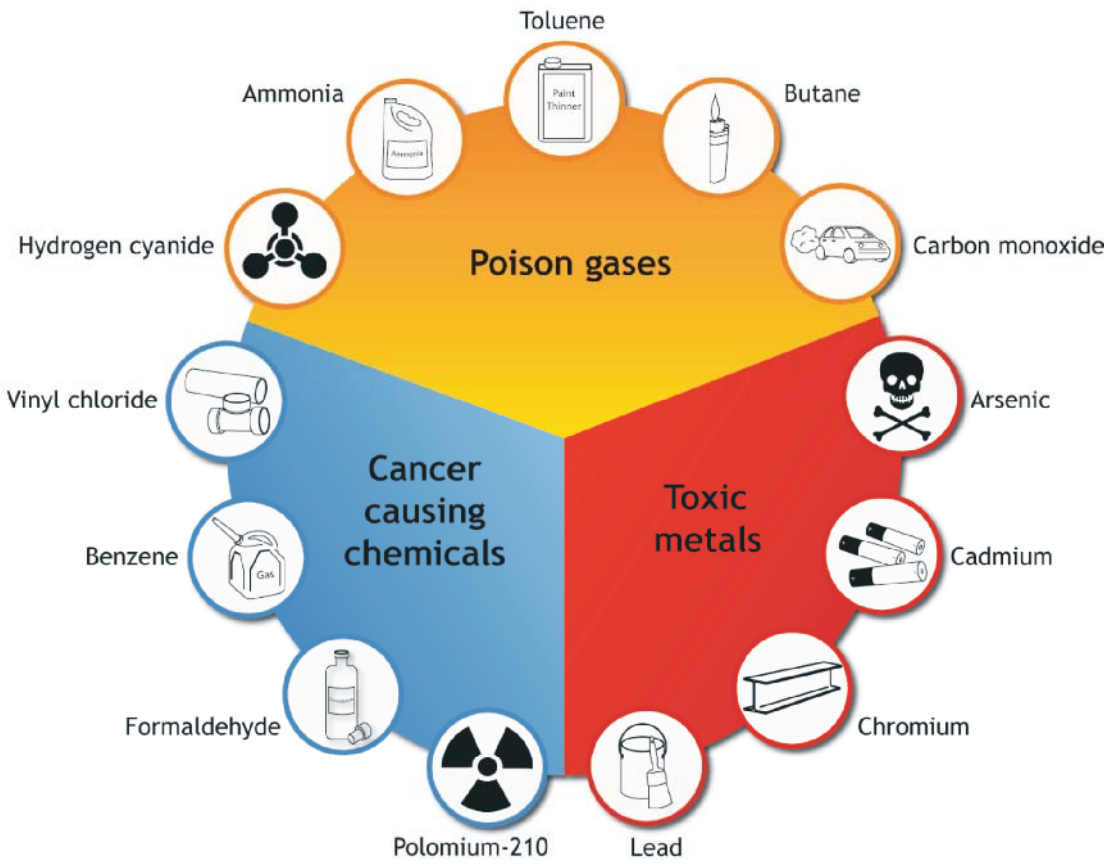
6. **Benzene** is classified as a Group 1 carcinogen, meaning that there is no safe level of exposure. Benzene is a chemical that is used to make everything from pesticides to detergents to gasoline.
7. **Hydrogen Cyanide** is considered one of the most toxic agents found in tobacco smoke. This was the poison used in gas chambers. In smaller doses like those found in cigarettes, it damages tiny hairs in the bronchial tubes which form the part of the natural lung cleaning mechanism. As a result, toxic substances get build up in the lungs.
8. **Arsenic** is a deadly poison that is often used as a pesticide. Many tobacco farmers around the world use arsenic to get rid of bugs while growing the tobacco plant.
9. **Cadmium** is a heavy metal found in car batteries. It causes damage to the liver, kidneys and brain and stays in the body for years.
10. **Ammonia** is a chemical used in cleaning products such as glass and toilet bowl cleaners. The tobacco industry claims that ammonia adds flavor, but scientists have discovered that ammonia that helps the body absorb more nicotine thereby helping in the addiction process.
11. **Turpentine** is commonly used as a paint stripper and is very toxic.
12. **Methoprene** is a chemical found in tobacco smoke that is used to kill fleas on pets.
13. **Acetone** is one of the active ingredients in nail polish remover. The tobacco industry refused to say how acetone gets into cigarettes.
14. **Lead** stunts growth, causes vomiting and damages the brain.
15. **Propylene Glycol** is a main ingredient in antifreeze. The tobacco industry claims they add it to keep tobacco from drying out. Scientists have found that it aids the delivery of nicotine to the brain.

Let's revise:

- » Tobacco contains large number of harmful chemicals.
- » Tobacco smoke also contains poisonous chemicals.
- » Nicotine is highly addictive in nature.
- » The most effective preventive measure is to refrain from smoking or using tobacco products.

Note: Posters 3 and 4 may be used to explain.

Constituents of Tobacco Smoke



Poster 3

Harmful substances found in "smoking-tobacco" products

1. Nicotine:

This chemical is found in some sprays used to kill insects.



Insecticides

2. Tar:

Tar is the black sticky substance used for making roads and is also found inside chimneys of factories.



Coal Tar

3. Carbon Monoxide:

This dangerous gas is released from burning gasoline in a car.



Car exhaust

4. Hydrogen Cyanide:

Exposure to this very poisonous gas can cause death.



Gas chamber poison

5. Arsenic:

This chemical is found in a product you might use if you found ants in your house.



White ant poison

6. Ammonia:

This chemical is used in a cleaning agent.



Floor cleaner

7. Naphthalene:

This chemical is found in a product used to kill moths/insects in woolens.



Mothballs

8. Radioactive Compounds:

These chemicals are used to create weapons of mass destruction.



Nuclear weapons

Poster 4

Harmful substances found in "chewing-tobacco" (smokeless tobacco) products

1. Nicotine:

This chemical is also found in sprays used to kill insects.



Insecticides

2. Arecoline:

This ingredient is found in areca nut which is one of the components of a chewable tobacco product mixture which causes mouth and throat cancer.



Cancer producing chemical

3. Lime:

This ingredient is also found in materials that are used to build houses and sidewalks.



Mortar/cement

4. Menthol:

This chemical is also found in a product that doctors use to make body parts numb.



Local anaesthetic

5. Cadmium:

This chemical is found in materials that produce electrical current for cars.



Car batteries

6. Formaldehyde:

This chemical is used for preserving dead bodies in a biology laboratory and is very pungent to the eyes and other parts of the body.



Body preservative

7. Lead:

This chemical found in products used to colour various items and can cause brain damage.



Paint

Worksheet -2

Multiple-choice questions on constituents of tobacco:-

Circle the correct answer:

- Nicotine is present in which product other than tobacco _____
(a) Insecticides (b) Car batteries
(c) Car exhaust
- Floor cleaner has _____
(a) Ammonia (b) Naphthalene
(c) Arsenic
- A by-product common to both tobacco and car exhaust is _____
(a) Arecoline (b) Carbon monoxide
(c) Nitrogen
- This is used to preserve dead bodies in biology laboratory and is found in considerable portion in tobacco products _____
(a) Arsenic (b) Formaldehyde
(c) Menthol
- Exposure to a very poisonous gas can cause death and is found in exhaust fumes of a cigarette _____
(a) Hydrogen cyanide
(b) Carbon monoxide (c) Nitrogen
- This chemical is found in white ant poison _____
(a) Ammonia (b) Nicotine
(c) Arsenic
- Tar used in cigarette is a component of _____
(a) Mortar (b) Paint
(c) Coal tar
- Cigarettes contain ammonia which is also used as _____
(a) Floor cleaner (b) Paint
(c) Insecticide
- This ingredient which is found in cigarette and tobacco product is also used to build houses and sidewalls _____
(a) Lime (b) Lead
(c) Arsenic

- Which tobacco by-product is used to make roads _____
(a) Tar (b) Lead
(c) Arsenic
- A chemical used for preserving dead bodies in a biology laboratory, also found in smokeless tobacco products like gutka, is _____
(a) Cadmium (b) Formaldehyde
(c) Oxygen
- A tobacco by-product also forms a component of car batteries _____
(a) Cadmium (b) Formaldehyde
(c) Oxygen
- Which gas is released by smoking tobacco _____
(a) Carbon monoxide
(b) Formaldehyde (c) Oxygen
- This chemical can lead to brain damage and is found in chewable tobacco products/paints _____
(a) Lead (b) Nitrogen
(c) Oxygen

Note:

Teacher can give the background information with the help of posters. Give this worksheet, and ask students to circle the correct answer. After the students have completed the worksheet, give the answer to each question followed by discussion. The idea is to reinforce in young students the harmful ingredients present in the cigarettes and tobacco.

Answers
1 (a) 2 (a) 3 (b) 4 (b) 5 (a)
6 (c) 7 (c) 8 (a) 9 (a) 10 (a)
11 (b) 12 (a) 13 (a) 14 (a)

Chapter-4

Harmful effects of tobacco use on health

Aim:

To empower students with the knowledge on the harmful impact of tobacco on different parts of the body.

Learning objectives:

At the end of this activity the students will be able to

1. List the short term and long-term harmful effects of use of tobacco (both smoking and smokeless forms).
2. List the diseases caused by tobacco use.

(1) Healthy person:

- » Healthy teeth
- » Healthy lungs
- » Normal breathing
- » Normal heart rate
- » Normal blood pressure
- » Good physical health
- » Normal functioning brain
- » Normal sexual function

(2) Short-term effects of tobacco use:

- » Increased heart rate and blood pressure
- » Constricted blood vessels
- » Reduced physical performance and/or productivity
- » Smelly hair
- » Bad breath
- » Stained teeth
- » Damage to gum tissue
- » Tooth decay
- » Reduced sense of taste and ability to smell
- » Trouble in breathing
- » Increased sensitivity to cold and heat

(3) Long-term effects of tobacco use:

- » Pre-cancerous conditions like patches on the oral mucosa.
- » Cancer: Mouth cancer; Cancer of food pipe; Cancer of sound box; Cancer of breathing tubes; Lung cancer; Stomach cancer, cancer of pancreas.
- » Ulcers in the stomach.
- » Brain-paralytic attacks.
- » Cardiovascular System: Hypertension (high blood pressure); heart disease; peripheral vascular disease.
- » Respiratory system: Chronic cough, tuberculosis of lungs, asthma.
- » Eye: Cataract.
- » Sexual organs: Impotence in men and difficulty in bearing children among women.

(4) Effects on foetus:

- Foetus is also not free of harmful effects of tobacco use. If the mother is regular tobacco user, then the following results:
- » Low birth weight babies
 - » Still-birth (Dead foetus)
 - » Premature delivery
 - » Reduced lung function of the new born.

If the mother inhales the second hand smoke, this also affects the development of the foetus.

(5) Ultimate effect

- » Reduced life span and premature death.

NOT A SINGLE PART OF THE BODY IS SPARED FROM HARMFUL EFFECTS OF TOBACCO

Poster 5
Harmful effects of smoking and chewing tobacco products



Addiction to Nicotine



Smelly Hair



Increased heart rate and blood pressure



Bad breath



Constricted blood vessels



Increased sensitivity to Cold and heat



Trouble in breathing



Reduced sense of taste and smell



Reduced physical performance and/ or productivity



Exhaustion

Poster 6
Harmful effects of smoking and chewing tobacco products



Stained teeth



Damage to gum tissue



Sore in mouth



Tooth decay



Plaque in gum



Cracked lips

Poster 7
Harmful effects of tobacco on the gastrointestinal system

**Long-term effects of tobacco on
the gastrointestinal system**



Leukoplakia



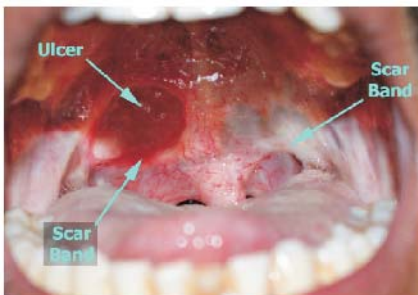
Mouth cancer



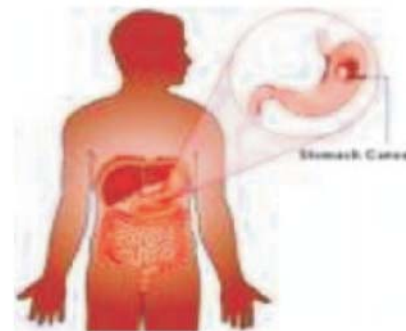
Erythroplakia



Cancer of the food pipe



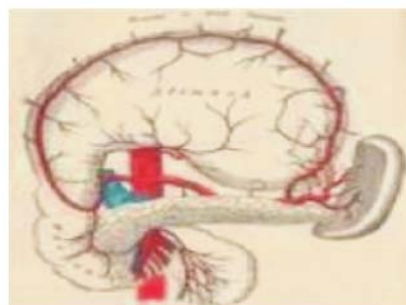
Oral submucous fibrosis



Stomach cancer



Stomach ulcer



Cancer of the pancreas

Long-term effects of tobacco products on the upper and lower respiratory system



Asthma



Cancer of the voice box



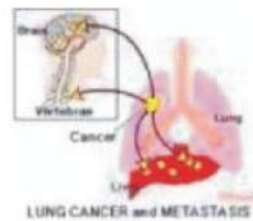
Chronic cough



Cancer of breathing tubes (bronchus)



Asthma



Lung Cancer



X-ray of Lung Cancer

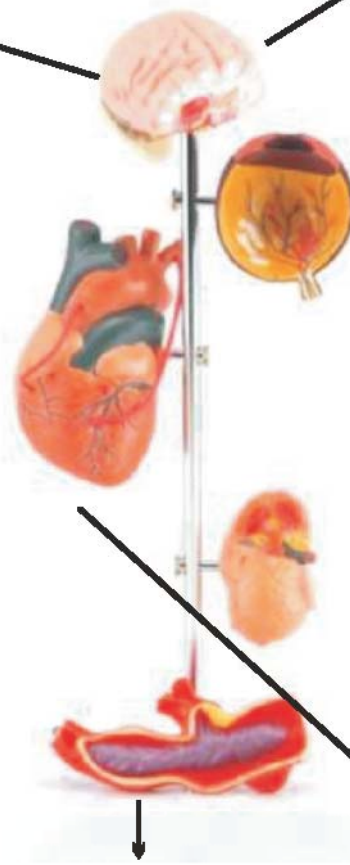
Poster 9 Harmful effects of chewing tobacco on the circulatory system



Brain stroke/paralysis



Eye cataract/blindness



Kidney Disorders

Peripheral Vascular Disease



Heart Disease



High blood pressure



Heart attack



Diseased artery



Gangrene foot



Amputated foot

Poster 10
Harmful effects of tobacco use on newborn babies



Foetus exposed to tobacco smoke



Pre-term baby



Dead foetus



Low birth weight baby

Chapter-5

Harmful Effects of Second Hand Smoke (SHS)

Aim:

Students will recognize that a smoker/ chewer not only harms his/her health, but also harms the health of other non-smokers/non-users around him/her and creates unhealthy environment in the community.

Learning objectives:

- (1) To increase the knowledge on the harmful effects of second-hand smoke exposure;
- (2) To realize the magnitude of the problem in the community, and to create solutions, and
- (3) To demonstrate the ability to protect oneself from second-hand smoke.

Environmental Tobacco Smoke (Second Hand Smoke/Passive Smoke)

Two-third of the smoke from a burning cigarette / bidi enters the surrounding environment to be inhaled passively. Passive smoking can contribute to or worsen other people's breathing problems and can increase the risk of cancer and heart attacks.

Exposure to SHS in public places and at homes is very high in India.



ETS contains many chemicals including :

- » Twice as much nicotine as the smoke inhaled by smokers.
- » Five times the amount of carbon monoxide (CO).
- » The same 7000 chemicals that are present in tobacco smoke - 69 of these chemicals are known carcinogens (cancer-causing chemicals).

Second Hand Smoke Facts:

- » Children of smoking parents inhale the same amount of nicotine as if they themselves had smoked 60 to 150 cigarettes.
- » In GYTS 2009, 22% of youth (age 13-15) reported exposure to secondhand smoke at home, while 37% reported exposure to second hand smoke in public places.
- » Exposure for as little as 8 to 20 minutes to SHS causes physical reactions linked to heart and stroke disease such as:
 - (i) The heart rate increases.
 - (ii) The heart's oxygen supply decreases.
 - (iii) Blood vessels constrict which increases blood pressure and makes the heart work harder.

Harmful effects of ETS / SHS on Health:

1. Non-smokers exposed to SHS are at increased risk for developing:

- » Lung cancer
- » Lymphoma
- » Irritation of the eyes, lungs and throat
- » Heart disease
- » Leukemia (Blood Cancer)

2. Dangers of SHS for babies and young children:

- » Bronchitis
- » Middle ear infection
- » Pneumonia
- » Tonsillitis
- » Additional episodes and increased severity of asthma



- » SIDS (Sudden Infant Death Syndrome) – Instances where babies suddenly stop breathing during sleep.
- » Reduced rate of lung growth.
- » SHS also affects the health of unborn child when a pregnant woman is exposed to it.

Smokeless tobacco harm other people's health:

People who chew tobacco also harm non tobacco chewers' health by their spit. Generally, people who chew tobacco, spit more than the non tobacco users. Their spit is a major source of various communicable diseases and respiratory illnesses. These diseases and illness spread through "phlegm" in the spit. Bacteria in the spit mix with dirt, which then begin to fly in the air, and cause infections including tuberculosis.

Third hand Tobacco Smoke

Second hand cigarette smoke has already been shown to have detrimental negative effects on health. The old adage that only visible cigarette smoke is harmful has been debunked. Cigarette smoke contains toxins in the form of particulate matter that is deposited on all exposed surfaces and also toxic gases that can linger in the air for extended periods of time (up to months). Anyone entering a room that has been previously used for smoking is exposed to these lingering toxins; this is the definition of exposure to "third-hand smoke". Constituents of third-hand smoke can be found on carpets, a smoker's clothes and children's toys. The statement that "there is no safe level for tobacco smoke exposure" is taking on new meaning with the release of a recent study's results.

Children Are the Main Victims of Third-hand Cigarette Smoke

The World Health Organization estimates that over 700 million children (about one half) are exposed to cigarette smoke, where most of the exposure occurs at home. Besides the ambient cigarette smoke, it has now been established that the toxins in the smoke settle on surfaces to which the children are exposed. Children and babies play on these surfaces (like the carpet) and inhale the smoke particulates. The third-hand cigarette smoke study estimates that children ingest 0.25 g/day of dust which may contain the cigarette toxins. The toxins include neurotoxins (which effect nervous system) and other compounds that can delay development of certain milestones in the babies.

Strategies used to lessen exposure include smoking outside the home with the door closed and changing clothes after smoking (cigarette smoke toxins are known to settle on clothes).



Children are affected by third-hand smoke

Suggested Activity 1

Role Play:

Situation: A pregnant mother is inhaling bidi. Give her some facts and advice related to the potential harmful effects of bidi smoking on her health as well as health of her unborn child.

Suggested Activity 2

Situation: You are invited to a party and find that room is full of smoke due to some friends and guests who are smoking.

What will you do in such a situation?

Chapter-6

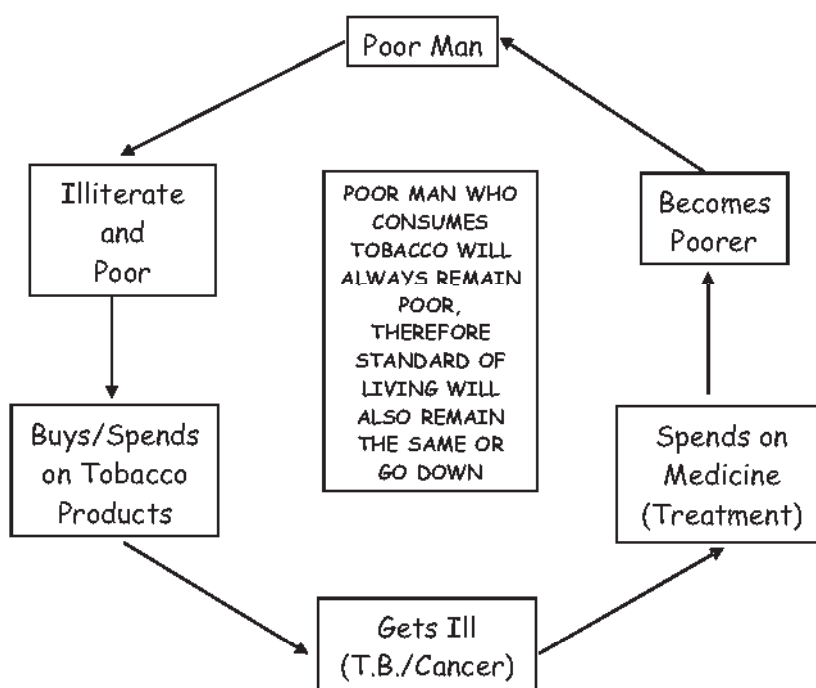
Economic consequences of tobacco use

- » A Health Cost Study conducted by ICMR/AIIMS in 1998-99 showed that the cost of treatment of just three diseases attributable to tobacco use e.g. cancers, lung, and cardiovascular diseases far exceeded the revenue generated from tobacco products.
- » Money spent to buy cigarettes/bidis or chewing tobacco e.g. gutkha, khaini, zarda, gul, mawa, paan masala etc. could be better spent to improve nutrition and education for the family.
- » Tobacco use ultimately results in loss to economy of the family and ultimately to that of the nation.

Bidi Rolling-A Dangerous Occupation:

Bidi rolling is a manual process of making bidis from wrapping dried tobacco leaves in the tendu leaf. Bidi rollers place tobacco inside a small tendu leaf, tightly roll the leaf and secure the product with a thread. This process is largely home-based and is dominated by women and children. An average roller can achieve a daily output of about 1000 bidis per day. An already vulnerable sector of society, women and children engaged in bidi rolling face abuse, financial enslavement, and a number of health problems. The process releases large amounts of coarse particles and dust into the work environment (typically the home) resulting in respiratory problems among workers. Other health effects include pain and cramping in the shoulders, neck, back, lower abdomen, asthma, anaemia and eye problems.

THE VICIOUS CIRCLE



Chapter-7

Effects of Tobacco on Environment

Aim:

To empower students with the knowledge on the harmful effects of tobacco on the environment.

Learning objectives:

- » Increase the knowledge on effects of tobacco cultivation on environment.
- » Realize the magnitude of the problem in the environment, and
- » Demonstrate the ability to protect environment from tobacco.

Introduction

People who smoke and chew tobacco do not care for others and create an unhealthy environment by:

- » Producing tobacco smoke
- » Throwing cigarette/bidi butts in their surroundings
- » Throwing tobacco quid spit in rooms/on walls/staircase
- » Throwing burning cigarette/bidi left over butts which might result in fire.
- » Discarding empty pouches of gutkha / khaini / paan masala in the environment, leading to pollution.



» Tobacco contributes to deforestation in three ways:

- (i) Forests are cleared for cultivation of tobacco crop.
- (ii) Fuel-wood stripped from forests for curing tobacco (a process whereby tobacco is prepared for manufacturing various tobacco products).
- (iii) Forest resources are being used for packaging of tobacco, tobacco leaves, tobacco products etc.

- » On an average a tree is cut for every 300 cigarettes (about a two weeks supply for a pack a day smoker).
- » A scenario exercise conducted by the Indian Institute of Forest Management, Bhopal estimated that the historical use of fuel wood between 1962 and 2002, for tobacco curing and manufacture of cigarettes and other smoking consumables, has destroyed and degraded 680 sq. km of scrub forests.
- » Tobacco displaces the indigenous flora and fauna and will thus gradually become a source of pests for other crops. It leads to collapse of the food web.



- » Tobacco growing depletes soil nutrients at a much faster rate than many other crops, thus rapidly decreasing the fertility of the soil.
- » Tobacco is a sensitive plant and therefore, requires huge chemical inputs and fertilizers. Such chemicals run off into water bodies, contaminating local water supplies, cause excessive leeching and poison livestock and food crop.
- » Frequent contact with and spraying of chemicals, and storage of tobacco in the residential premises of farmers have led to adverse health effects.
- » Farmers and farm workers who cultivate tobacco suffer from "Green Tobacco Sickness" due to absorption of nicotine from the skin. It results in nausea, dizziness, weakness, abdominal cramps, fluctuation in blood pressure and heart rate.

- » Growing of tobacco means less land is available for growing food. It is estimated that 10-20 million people could be fed, if food is grown on the land used to grow tobacco.



- » Cigarette butts contain cellulose (non bio degradable) which pollutes the environment. On an average Cigarette butts take 25 years to decompose. It is estimated that several trillion cigarette butts are littered each year worldwide.
- » Burning tobacco is the main source of indoor air pollution in many countries
- » Tobacco growing, curing and smoking, all add to the greenhouse effect and global warming. Smoking worldwide releases 2.6 billion kgs of carbon dioxide and 5.2 billion kgs of methane into the environment each year which causes harmful effects.
- » Cigarettes and matches are a common cause of fires and results in huge economic loss and damage to environment.



Suggested Activity

List some activities which you would like to conduct on World Environment Day.

World Environment Day is celebrated on 5th June.

Chapter-8

Social consequences of tobacco use:

Introduction:

Tobacco use in young children is greatly influenced by their social environment. Many young children start using tobacco because their friends use it, or they see other people using it, like their parents, relatives and other acquaintances. There are various forms of social influences.

Tobacco use is still considered an important behavioral means towards achieving group acceptance. It is generally perceived that being away from tobacco means social isolation by peers.

There is enough evidence on the linkages of tobacco use and socio-economic factors where both beedi smoking and chewing were reported to be higher among low social class compared to high social class.

It is important for a teacher to make students realize that tobacco can never make a person attractive, can never raise one's capabilities, but instead can have negative social consequences for a young child who begins to use tobacco.

Some of the social consequences of tobacco use are listed as below:

Friends Stay Away: When someone smokes or chews tobacco, his/her mouth is always stinking and bad smell comes from his /her body, looking ugly due to wrinkle, dark circles around eyes, smelly hair etc. Due to bad breath, many his /her good friends become unhappy from that child and this leads to losing many well-wisher friends.

Poor performance in school: Child consuming tobacco, cannot give proper attention to their study and other activities due to lack of concentration, and it leads to poor performance in school.

Unhappy parents and teachers: Poor performance is yet another reason for the parents and teachers to show their unhappiness.

Punished by school authority: If anyone is found indulging in the tobacco use and has poor performance then he/she is punished by school authorities and this causes a lot of embarrassment and shame.

Wasted money: Pocket money is wasted in purchasing tobacco products which is like purchasing a bundle of diseases. This money can instead, be used in constructive manner like purchasing books, music, notebooks, gifts for friends.

Suggested Activity

Ask students to portray any situation which they have faced in real life such as:

- » Parents becoming angry when a friend of their children who smokes or use tobacco comes home very often to meet their children.
- » You were alone in your home and your friends come to see you. One of them lightes a cigarette and starts smoking. What would you do?
- » Your friends call you a "Sissy Boy" because you do not smoke or chew tobacco. What answer will you give? How will you prove your strength and wisdom in refraining from tobacco use?

Chapter-9

How to SAY NO to Tobacco:

Aim:

- » Students will learn how to resist offers of tobacco.
- » Students will be encouraged to motivate others not to use tobacco.

Introduction:

Research shows that when children have the opportunity to practice saying "NO" to offers of tobacco, before the offers occur or happen, then they are much better prepared to resist such offers.

Understand how you will be offered tobacco and how to say "NO":

There are misleading advertisements, friends and other persons who can offer tobacco. So tell the students that tobacco companies, through misleading advertisement, aim to recruit new users, particularly young people. Youth especially in developing countries are the primary target group for the tobacco industry. "The tobacco industry needs young new smokers everyday to replace those who are killed by using tobacco, so they target you."

So teacher shall tell and explain to students that whenever someone offers you tobacco use SAY NO.

There are many ways of refusing tobacco. It is good to practice a few ways so that we know how to refuse when such time comes.

- » The first way of refusing is to give an excuse or ignore that.
- » The second way of refusing is to simply say "NO", and say "No thank you, I DO NOT USE TOBACCO and you should not either.
- » The third way of refusing is to stand up for your right as a non user.

- » Students need not be rude when they refuse. They only need to be firm and convey their decision about not using tobacco confidently.

Suggested Activity

- » Organize a brainstorming session with the students, ask them about reasons why people start using tobacco. List down all reasons on blackboard.
- » Discuss with students, various techniques to resist offers of tobacco and share their innovative ideas.
- » Organize a small skit play/role play in the class with the help of students.
- » Instruct the students to create a street play on how people of their age can refuse offers of any tobacco product from friends / peer group.

Guidelines to create a good Street play:

- » The street play should be of about 10 minutes.
- » Involve as many students as possible.
- » Most students in the group should refuse offers to tobacco.
- » Only few students should actually offer tobacco.
- » Show variety of ways to refuse different kinds of tobacco.
- » Remember not to make fake cigarettes, bidis or chewing tobacco products.
- » The users should just use their hands to pretend they are using any tobacco product.

Some more suggested Activities

Role Play:

Give the following situation to students and ask them to enact.

Situation:

Ram offers a gutkha to his friend Shyam. Shyam refused to take it. Shyam gives various reasons for not accepting the offer.

Discussion:

After the two students have enacted it, hold discussion for about 10-15 minutes in the class on the role play. Ask the students, what more reasons Shyam could give to Ram. You could also consolidate the session by asking the students to make a pledge.

"I Will Never Take Tobacco In Any Form."



**I SAY
NO**

Chapter-10

Tobacco control laws in India

The Government of India has enacted "Cigarette and other Tobacco Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) Act (COTPA) in 2003. To control the menace of tobacco the specific provisions under the Act are as follows:

1. **Ban on smoking in public places** - To protect the people from harmful effects of Second Hand Smoke (SHS), the smoking is banned in all public places, including auditoria, public conveyances, railway stations, bus stops, airport lounges, libraries, all public and private offices, all work places, schools, court buildings, hospital etc.



- » Violation of this provision is punishable with a fine up to Rs. 200/-

**The violations may be reported on a national Toll free helpline (24x7)
1800 110 456.**

Government has also issued "Guidelines for Step by Step Approach for implementation of Smoke free Public places". (The details are available at www.mohfw.nic.in).



2. **Ban on sale of tobacco products to or by minors (below 18 year of age)** - A board has to be displayed at all the outlets selling cigarette and other tobacco products, "Sale of tobacco products to persons under the age of 18 is a punishable offence". Minors are prohibited from selling any tobacco products.
3. **Prohibition of Tobacco Advertising, Promotion & Sponsorship (TAPS)**- Both direct & indirect advertisement of tobacco products is prohibited in all forms of audio, visual and print media. There is total ban on sponsoring of any sport and cultural events by cigarette companies.
4. **Ban on sale of tobacco products within 100 yards of the educational institutions** - A board stating that "Sale of cigarette and other tobacco products in an area within a radius of 100 yards of this institution is strictly prohibited and is punishable offence" has to be displayed at all educational institutions. The violation of this provision is punishable with a fine of up to Rs. 200/-.

5. **Specified health warnings on tobacco products-** Text and pictorial warnings depicting harmful effects of tobacco shall be displayed on all tobacco products as per prescribed specifications.

Suggested Activity

You find a shop selling bidis/cigarette near your school. What would you do?

Whose help you can take to stress upon the shopkeeper for not selling tobacco products near your school?

[Hint: School principal, teachers, P.T.A., Resident Welfare Associations, Local police station, Local elected leader, etc.]

Chapter-11

Tobacco Free Schools

Aim:

To make schools free from tobacco products and tobacco smoke.

Learning objectives:

- » Students will be motivated to maintain a tobacco free environment with in the school premises and surroundings.

Tobacco Free Youth Club:

Steps to be followed:

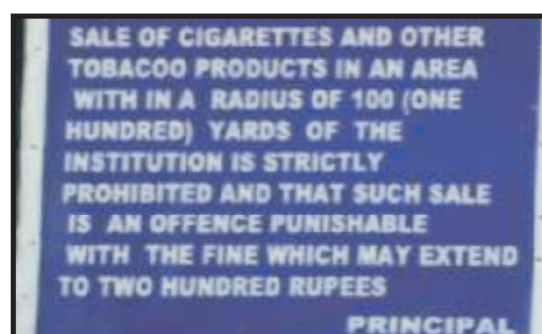
1. Ask the students to form "Tobacco Free Youth Club" in their school.
2. This club will work under the guidance of teachers, Principal and school management that declare the school to be tobacco free.
3. Taking the help of this club, various anti tobacco activities can be organized within the school premises and in the neighborhood community (Inter and intra school competition on essay writing, poster making, debate, slogan writing, role play and community outreach programme with neighborhood community, events like No Tobacco Day or Week celebration).
4. Member of this youth club will report to the school's authorities about any tobacco selling shops or kiosks, that are located within 100 yards of their school. School will subsequently decide the future course of action.
5. Teachers can encourage students to convince tobacco users to quit. The student and tobacco user (who quit using tobacco) should be rewarded and act as role models.
6. All the given guidelines of tobacco free school will be monitored by this club.

Guidelines for Tobacco-free Schools/ Educational Institutions

1. Display of "Tobacco free School" or "Tobacco-free Institution" board at a prominent place on the boundary wall outside the main entrance.



2. No sale of tobacco products inside the premises and within the radius of 100 yards from school/educational institutions and mandatory signage in this regard shall be displayed prominently near the main gate and on boundary wall of school/ institute.



3. No smoking or chewing of tobacco shall occur inside the premises of the school by students/ teachers/ other staff members / visitors.
4. Display of sign boards "No Smoking Area – Smoking here is an offence", of 60X30cm size may be displayed inside the school (as mandated by law).

5. Posters with information about the harmful effects of tobacco shall be displayed at prominent places in the school/ institutions. Students shall be encouraged to make their own posters on tobacco control themes.
6. A copy of the Cigarette and other tobacco products Act (COTPA) 2003 shall be available with the principal/ head of school/ institution. (Available at – www.mohfw.nic.in)
7. A "Tobacco Control Committee" shall be in place. It may be chaired by school head/ principal, with members comprising of a science teacher, or any other teachers, school counselor (if available), at least two NSS/NCC/scout students, at least two parents representatives, area MLA, area SHO, Municipal Councilor, member of PRIs, any other member. The committee shall monitor the tobacco control initiatives of the school/institute. The committee shall meet quarterly and report to the district administration.
8. Integrate tobacco control activities with ongoing School Health Programme of the State.
9. Promote writing of Anti- tobacco slogans on the School/ Institute stationery.
10. The principal / head of school / institute shall recognize tobacco control initiatives by students/ teachers/ other staff and certificates of appreciation or awards may be given.
11. State Nodal Officer for Tobacco Control in the State Health Directorate may be consulted for technical or any other inputs.

Important Links -

Link for CBSE circular on Tobacco Free School/Educational Institution
(www.cbse.nic.in/circulars/cir18-2009.doc)

Link for tobacco free schools guidelines.
(<http://www.mohfw.nic.in>)

Chapter-12

Misguiding Advertisements/ promotion of tobacco products

There are restrictions on tobacco advertising, promotion and sponsorship (TAPS) in India, however the tobacco industry uses surrogate /indirect means to promote tobacco products. Many young people become interested in tobacco use through such tobacco advertisements which highlight use of tobacco products/ cigarettes by popular TV/ Cinema actors and prominent sports persons. This activity aims to correct these misconceptions and suggests alternatives and healthy ways of looking and feeling good and confident. This chapter reinforces a number of reasons why most people choose not to use tobacco.

Aim:

To provide students with a foundation for choosing a healthy lifestyle by avoiding tobacco.

Learning objectives:

At the end of this activity students will be able to,

- (1) Identify reasons why young people do and do not start using tobacco.
- (2) Feel and express appropriate dissatisfaction with a purposeful misinformation.
- (3) Demonstrate the ability to identify misconceptions and discover positive and healthy alternatives to using tobacco.

Background information for teachers:

A 'Health Promoting School', (a concept initiated by WHO), can be characterized as a school that constantly strengthens its capacity as a healthy setting for living, learning and working. In this document, 'schools' refer to primary and secondary schools that serve students in the age range of approximately 6 to 18 years. The extent to which each nation's schools become health-promoting

schools will play a significant role in determining whether the next generation is educated and healthy. Education and health mutually support and enhance each other.

A health-promoting school fosters health and learning with all measures at its disposal and engages health and education officials, teachers, students, parents and community leaders in efforts to promote health.

Class may be opened by explaining the following facts:

- » Many young people start using tobacco in order to fit in with a certain group of friends, or to imitate someone they admire. They use tobacco to look or feel "older", more "mature", "smarter", or more "attractive". This activity aims to correct these misperceptions and suggest alternative and healthy ways of looking and feeling good and confident.
- » Cigarettes, bidis, and other tobacco products like gutkha, zarda, khaini and snuff are not magical and cannot make us look or feel "older", "mature", "smarter" or "attractive", as the manufacturers of these products will want us to believe.
- » Tobacco companies, through misleading advertisements, aim to attract new users, particularly young people, because they will use their product for a longer time, before they either quit or die. Media advertising of tobacco products and false association of tobacco brand logos with sports and culture are used to increase the acceptability of tobacco in young minds. All this propaganda compels young people to associate tobacco with visions of "success", "fun", "glamour", "vitality" and a "positive lifestyle". Additionally, film, TV

shows, and other media can also portray tobacco as positive habit which makes someone seem "cool" or "tough". Realizing the harm that tobacco does to the body and tobacco advertisements do to the mind, governments in many countries, including India, have banned all forms of tobacco advertisement.

- » The reality is very different from what the glossy images and 'happy ending'

advertisements portray. Tobacco can never make a person attractive and physically and mentally strong. On the contrary, its use can substantially reduce one's physical and mental capabilities. Thus, it is important to correct these misperceptions so that students are properly informed when they make their decision to use or not to use tobacco products. There are much healthier ways for young people to look or feel "older", "mature", "smarter", and "attractive".

Chapter-13

Self Help Guide to Quit tobacco use

- » Decide on a date to quit, mark it on the calendar and stick to it.
- » Tell friends and family about your quit date.
- » Get rid of all cigarettes/smokeless tobacco products.
- » Remove ashtrays, lighters, match boxes from the vicinity.
- » Stop smoking/using tobacco products on the decided date.
- » Drink lots of water and other liquids.
- » Avoid situations where the urge to smoke or use smokeless tobacco is strong e.g. company of smokers/tobacco users.
- » Chew saunf (aniseed), elaichi (cardamom), longg (clove), chewing gum etc. to distract the mind when there is an urge to smoke or chew tobacco.
- » Be in the company of non smokers or non tobacco users and try to indulge in a hobby or activity you like.
- » Keep active - Try walking, exercising.
- » Try deep breathing and try "Pranayam"/Yoga (under guidance).
- » Avoid use of alcohol.
- » Inform your parents if you think you are not able to quit on your own as emotional and moral support provided by the family is very useful.
- » Get help from your doctor/dentist/counselor/local hospital or tobacco cessation centre in the neighborhood.
- » There is nothing wrong in seeking help, as and when needed.
- » There is no need to feel stigmatized or

discriminated by others for smoking or using tobacco.

Four 'A's:-

1. Avoid - Avoid people and places where you are tempted to smoke.
2. Alter your habits - Switch to juices, water and other healthier choices instead of any tobacco product.
3. Alternatives - Use oral substitute such as sugarless gum or hard candy, raw vegetables and fresh fruits such as carrot, radish, guava, banana, watermelon and sunflower seeds.
4. Activities - Exercise and meditation daily.

Five 'D's:

1. Deep breathing - Take a few calming deep breaths and picture your lungs filling with fresh, clean air.
2. Delay - If you feel that you are about to light up or chew, tell and convince yourself that you must wait at least 10 minutes. Often this trick will allow you to move beyond the acute urge to smoke or chew. The craving will eventually go away.
3. Drink water- It will flush out the chemicals which are present in your body due to past consumption of tobacco.
4. Do something else- Find some new habits like swimming, dancing, playing etc.
5. Discuss - Talk about your thoughts and feelings to your friends or family members.

Four 'R's to avoid relapse:

1. Review your reasons of deciding to quit and think of all the benefits to your health, finances (pocket money), your status and family.
2. Remind yourself that there is no such thing as just one cigarette or one puff or one pouch of smokeless tobacco.

3. Ride out the desire. It will go away, but do not fool yourself into thinking you can smoke or chew just ONCE.
4. Reward yourself in ways that don't cost money. Take time out to read, work on a hobby, take a relaxing bath, go for a haircut, pamper yourself with a head massage/spa, buy yourself a new dress etc.

Suggested method of conducting activities in school:

Since tobacco is a multi-faceted topic, it can be incorporated into a variety of subject areas, including health and physical education.

Maths:

- » Calculate the cost of smoking or using tobacco per day, week and year.
- » Conduct a survey and calculate the % of smokers or tobacco users in school based on personal survey or current tobacco use rates.

Science:

- » Examine the chemical contents of tobacco and smoke and its effect on the body.
- » Identify the impact of tobacco on the environment e.g. empty pouches of smokeless tobacco products.

Social Studies:

- » Examine government policies regarding sale of tobacco and smoking in public places.
- » Examine the social aspects related to tobacco use in your region or community.
- » Find out in which parts of India tobacco is grown.

Music:

- » Develop a rap or song about the "real tobacco truths".

- » Make poem on stopping tobacco use.
- » Create a rhyme on harmful effects of gutkha/ Khaini / Zarda / Paan masala.

Art:

- » Develop posters on environment and health effects of tobacco.
- » Make rangoli on tobacco cessation in competition.
- » Paintings to encourage smoke free behavior / environments.

Language:

- » Write a letter to an actor or actress who promotes tobacco use and smoking in movies.
- » Write the various components of tobacco and their effects.
- » Write a paragraph describing your opinion about smoking/chewing gutkha or paan masala.

Drama:

- » Develop a play/street play or drama that provides accurate information about tobacco and its harmful effects.

Language:

- » Write a letter to an actor or actress who promotes tobacco use and smoking in movies.
- » Write the various components of tobacco and their effects.
- » Write a paragraph describing your opinion about smoking/chewing gutkha or paan masala.

Drama:

- » Develop a play/street play or drama that provides accurate information about tobacco and its harmful effects.

BENEFITS OF QUITTING

It is important to tell the students what are the benefits of quitting. Some of the benefits are presented below. From the moment you quit smoking, it only takes 20 minutes for your body to start undergoing beneficial changes.

20 Minutes:

- » Blood pressure drops to normal.
- » Pulse rate drops to normal.
- » Temperature of hands and feet returns to normal.

8 Hours:

- » Carbon-monoxide level in blood drops to normal.
- » Oxygen level in blood increases to normal.

24 Hours:

- » Chances of heart attack decrease.

48 Hours:

- » Nerve endings start re-growing.
- » Ability to smell and taste is enhanced

2 Weeks to 3 Months:

- » Circulation improves.
- » Lung function increases up to 30%

1-9 Months:

- » Coughing, sinus congestion decreases.
- » Fatigue and shortness of breath decrease.
- » Cilia re-grow in lungs, increasing ability to handle mucus, clean the lungs, reduce infection.

1 Year:

- » Risk of coronary heart disease decreases to half that of a smoker.

5 Years:

- » Your stroke risk is reduced and become equal to that of a nonsmoker, 5-15 years after quitting.

10 Years:

- » Your lung cancer death rate is about half that of a smoker's.
- » Your risk of cancers of the mouth, throat, oesophagus, bladder, kidney, and pancreas decreases.

15 Years:

- » Your risk of coronary heart disease (leading to heart attack) is back to that of a nonsmoker

Suggested Activity

Question answers session inviting views of the students on quitting smoking / tobacco use.

Poster 11
Example of healthy choices



Join sports or other extracurricular activities



Find other fun activities like dancing



Exercise regularly, workout and/ or join a gym



Help your siblings stay away from tobacco



Ask for your right to live in a healthy environment



Play with friends



Eat your favorite food instead tobacco



Follow a healthier life style



Spend your pocket money on buying things you need

Chapter-14

Role of parents in tobacco control/cessation

Parents usually have intimate and loving relationships with children, right from the time of infancy, much before the formation of peer group. All children want to imitate their parents from childhood. Parents usually have much closer and stronger association with their children compared to peer group.

- » Parents shall be included in the "School Tobacco Control Committee".
- » Parents would be made aware during the routine PTA meetings about the harmful effects of smoking and tobacco use.
- » Parents shall act as role models and quit smoking/tobacco use themselves.
- » Parents shall never ask their children to buy or get cigarettes or other tobacco products for them or any other adult.
- » Parents shall educate their children about the tobacco laws in the country e.g. ban on smoking in public places, ban on sale of tobacco products to minors (less than 18 years) and ban on sale of tobacco products within 100 yards of educational institutions.
- » Parents shall encourage their children to report violations of provisions under the law to them, school authorities or national Toll free helpline (24x7) **1800 110 456**.
- » Parents shall be advised to support their children for quitting tobacco if they happen to smoke or use tobacco. The smoker/tobacco user children must not be snubbed or discriminated against, but shall be provided with moral and emotional support for quitting tobacco use.

- » Parents shall educate children in self help tips for quitting tobacco.
- » Parents shall continue supporting their children, in case of relapse and provide all possible help in consultation with school authorities and family doctor.

Creating Tobacco Free Homes

Create a healthy home where smoking and chewing tobacco is discouraged.

Facilitating a discussion between children and their parents about tobacco use provides an opportunity for parents to communicate their disapproval of tobacco use. It will give students a chance to encourage their parents or other family members to stop using tobacco altogether, or at least to stop smoking or chewing tobacco in their presence.

All family members together shall make the rules for "tobacco free home" e.g.:

- » No family member is allowed to use any form of tobacco inside the home.
- » Guests are not allowed to use any tobacco product inside the home. If they have to smoke or chew tobacco, they can do so, outside the home.
- » No item (like caps, bottles, T-shirts etc) having the name or logo of a tobacco brand are allowed inside the home.

As role models, parents have to be non smokers and non tobacco users

Self Evaluation Tool for School-Based Tobacco Control Program

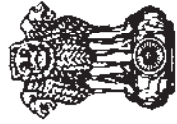
District/Town/City Name:

School Name:

1. Are you implementing "Tobacco Free Schools" policy of Government of India or School Education Board?
2. Who is responsible for implementing the tobacco control laws and activities in your school?
3. Does your school display "Tobacco free School" board at a prominent place on the boundary wall outside the main entrance?
4. Is there any sale of tobacco products inside the premises and within the radius of 100 yards from school? Are the mandatory signages in this regard displayed prominently near the main gate of school?
5. Is smoking or chewing of tobacco banned inside the premises of the school?
6. Does your school display sign boards "No Smoking Area – Smoking here is an offence", of 60 x 30 cm size inside the school?
7. Does your school display posters with information about the harmful effects of tobacco at prominent places in the school?
8. Does the principal/ head of school have a copy of the Cigarette and Other Tobacco Products Act (COTPA) 2003?
9. Does the school have a "Tobacco Control Committee" in place?
10. Does the school stationery have anti-tobacco slogans written on them?
11. Does the principal/ head of school recognize tobacco control initiatives by students/ teachers/ other staff and give them certificates of appreciation or awards?
12. How does the school's tobacco control programme link to other health and community based programmes?
13. Does the school conduct activities for students like debates, painting competitions etc. on the tobacco issue regularly?



NATIONAL TOBACCO CONTROL PROGRAMME



संस्कृतम् जयते
Government of India

Directorate General of Health Services
Ministry of Health & Family Welfare
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A Guide for Teachers



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