Bucket C

Review past quit attempts

For smokers who are not interested in quitting but who are willing to talk about their smoking, it is helpful to discuss their past quit attempts. Most smokers have tried to quit many times. Knowing what worked well and what caused their relapses will help create a plan for helping them quit later on when they are ready. You will find that most prior quit attempts have been haphazard or impulsive, usually unassisted (no coaching/counseling and use of cessation medicines) and of short duration. On the other hand, some clients will report going without cigarettes for months and even years before resuming. And certainly some have received counseling and have used cessation medicines.

Use the questions below to explore your client's previous quit attempts. There are several reasons to do this. First, you will learn what strategies have worked well and which have not. Second, you will learn what the client's challenges will likely be for the next quit attempt, especially by asking what brought previous attempts to an end. Third, you could find opportunities to praise previous success ("You didn't smoke for three months! That's great. That is a great foundation for your next quit attempt someday"). Fourth, you will be able to point out how much the client has learned about smoking which can be put to good use in the next quit attempt. Fifth, you will learn in what ways previous quit attempts have been short of evidence-based tobacco dependence interventions. This will permit you to describe how the next quit attempt can be easier and therefore, more successful.

After discussing your client's previous quit attempts using the questions below, summarize lessons learned.

Say, "I know you are not interested in making a quit attempt at this time, but you are willing to talk about your smoking. Thank you for that. With that in mind, I want to ask you about your past attempts to quit. OK?"

Ask the following questions until you believe you have exhausted information about previous quit attempts.

- ✓ "Tell me about your past quit attempts. How many times have you tried to quit?
- ✓ Why did you try to quit? What were your reasons for quitting? What sorts of things got you motivated to make a quit attempt?
- ✓ Please, describe the ways you have tried to quit.



- ✓ Think about the quit attempt that was most successful, the one that lasted the longest. How long did it last? How did you quit that time? How was this quit attempt different from the other times that you tried?
- ✓ What cessation medicines have you used in the past? Did you use them every day? How much did you use every day? Why did you stop using them? Do you think they helped? Why do you think that?
- ✓ What things happened that brought previous quit attempts to an end? What happened to get you to smoke again? What does this tell you about what should be different the next time?
- ✓ What was the hardest part of your quit attempt? Were there things you expected to be difficult but were not?
- ✓ What have you learned from your previous quit attempts?
- ✓ Did you let other people know that you were trying to quit or did you keep it a secret? Why?
- ✓ Different ways of quitting work for different people. Based on all of your experience, what is the best way for you?"

Summarize your discussion for your client, ending with asking if they agree or disagree with your summary. This summary can begin with a synopsis of your client's quitting history: what motivated quit attempts, methods of quitting, barriers to quitting, success to date, etc. The summary should include compliments for past successes and for lessons learned that will be of benefit in the future. The summary can conclude with a transition to what can be different for the next quit attempt when the client is ready, in part by applying lessons learned from previous attempts. (Examples: if relapse occurred while drinking, than maybe alcohol should be avoided during the initial week or so of the quit attempt; if an initial lapse occurred when a friend, who didn't know your client was trying to quit, offered a cigarette, suggest that any future attempt should include telling others about the quit attempt; if one medicine was used only infrequently in a past attempt, suggest that the next attempt could use the same medication but more frequently or a different medicine, even a combination of medicines.). Of course, this discussion of a future quit attempt will emphasize coaching/counseling and the use of cessation medicines. (In the rare case when there is no quitting history, or a very limited one, you can note that your client has no reason to believe that a quit attempt will not be successful.)

