

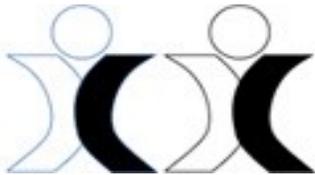


**Consumers Helping
Others Improve
Their Condition by
Ending Smoking**

CHOICES NEWSLETTER - December 2021

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CHOICES Program Update

By Trish Dooley Budsock



WE COME TO YOU!

As of November 1, 2021, CHOICES has resumed in-person training activities! Following 18 months of virtual presentations, the team decided it was time to hit the road again, with a new and improved presentation that covers the impact that Covid-19 has on smokers, as well as information on the health impacts of tobacco use, and resources available for help with quitting. We are continuing virtual visits for those who would prefer it. Beginning in January 2022, CHOICES will also be presenting a brief module on Cannabis, as it relates to mental health and tobacco use. Being that Cannabis has been legalized in NJ, we felt it was time to provide some information to the consumers we serve, so that they can make informed decisions about their own Cannabis use.

Mobile Phones Present New Ways to Quit Smoking

By Cleo Zifovski



According to recent statistics, 90% of smokers have tried to quit at least once. However, 85% to 97% of all quit endeavors fail within one year (Ploderer et al., 2014). Armed with skills to identify triggers and high-risk situations that may lead to a lapse, relapse prevention programs try to help smokers manage these situations and cope with cravings to prevent relapse. Although nicotine replacement products can reduce withdrawal symptoms, people must still ensure that resources for coping are available in high-risk situations when quitters may be tempted to slip. Thus, the widespread adoption of mobile phones may offer new opportunities to help quitters manage cravings.

Continued on page 6

Somatic Therapy and Smoking

By Azeem Sitabkhan

Somatic therapy is a form of body-centered therapy that is increasingly being used to treat trauma. It is also being used to treat different addictions like smoking, alcohol abuse, etc. Somatic therapy focuses on the mind-body connection in helping people to heal and overcome addiction.

Somatic therapy combines talk therapy with alternative forms of physical therapy. The therapist helps the patient revive memories of traumatic experiences and then uses physical techniques like deep breathing, relaxation exercises, and meditation to help relieve symptoms.

The theory behind somatic therapy is that the stress of past emotional and traumatic events affect the brain and the body. Somatic therapy helps to release the tension, anger, frustration and other emotions that remain in the body from these past negative experiences. The goal is to help free one from the pain that is preventing one from fully engaging in his/her life and/or making them turn to substances to feel better.

The key to somatic therapy lies in slowly bringing up painful feelings in the body and then neutralizing the negative charge associated with these feelings by using the various healing techniques. In doing this, the brain and body slowly learn to heal themselves. It is a skill that is gradually trained into one's life. And the healing continues to build over months and years of practice.

As far as smoking and other addictions are concerned, the various feelings that come up as one attempts to quit are processed via somatic therapy. These very difficult feelings, that come as intense physical cravings, different painful emotions are then processed using somatic therapy, and these feelings are then diminished. In this way, the quit attempt might be more successful.

The Tar and Phlegm Jars

By Deidre Stenard

As long as I've been with CHOICES, I've had what we call a Tar Jar; a jar half-full of dark brown goo to represent the amount of tar that goes into your lungs when you smoke 10 cigarettes a day for a year. The tar is the result of 7,000 chemicals in cigarette smoke forming a tar in a smoker's lungs. The tar jar comes from a smoking education company and is sold as a visual aid for presentations such as the one that we do as a CHOICES team. We show everyone the Tar Jar during the chemicals part of our presentation. We also display the Tar Jar with our presentation materials while we are setting up and are frequently asked what it is. The tar isn't real, of course, and we've always guessed that it must be molasses or Karo syrup. The company CHOICES got the Tar Jar from is Health Edco, and their website is www.healthedco.com. There are other jars that are available, such as the "Teeth in Tobacco Juice" Jar and the "Browned Lung" Jar.

We also have a Phlegm Jar, or "Clem's Phlegm" as it's called, which is about 60% full of an ugly green goo, and represents the amount of phlegm a smoker with C.O.P.D. (Chronic Obstructive Pulmonary Disease: Chronic Bronchitis, Emphysema, Adult-onset Asthma, or Chronic Pneumonia) coughs up every 2 weeks. It is more phlegm than you would think you'd cough up in 2 weeks and it gets a lot of comments when we show it at our presentation. People are grossed out by it, "EW!!" Below, find a picture of the jars:



Smoking as a Response to Anxiety

By Terrance H.

One definition of anxiety, by the esteemed American Psychologist, Albert Ellis, is described as follows:

“Anxiety, basically, is a set of uncomfortable feelings and action tendencies that make you aware that unpleasant happenings-meaning things that go against your desires-are happening nor are likely to happen and warn you that you’d better do something about them.”

Since our focus is to examine the phenomenon of anxiety and smoking with its detrimental effects on people, the following description, also written by Albert Ellis, gives an assessment of how it affects individuals:

“Unhealthy anxiety takes the form of panic, terror, horror, phobias, trembling, choking, numbness and all kinds of physical and psychosomatic afflictions that alert you, to be sure, to possible dangers, but very often interfere with your coping adequately with those dangers.”

This may be when someone might consider smoking as a way of coping. A credible example of how smoking is used as a remedy for anxiety can be described by the smoking relapse of Peter Jennings.

The smoking addiction of Peter Jennings of ABC News was rekindled subsequent the terrorizing events of 9/11. A very realistic form of anxiety, common to many Americans at that time, eventually resulted in lung cancer for Jennings, and led to his death.

Many people believe that tobacco smoking reduces their anxiety, but many report that once they successfully quit, they have less anxiety. This is possibly because they are no longer experiencing the constant cycle of withdrawal symptoms they go through because of their addiction to cigarettes.

(Source: How to control your anxiety before it controls you-Albert Ellis)

Stress and Smoking in Minority Communities

by Lisa Evans



In every CHOICES presentation we mention that 14% of Americans smoke but 40% of all cigarettes are consumed by smokers with a Mental Health diagnosis. A recent study in New York looked at two of the groups who experience disparities related to their cigarette smoking. The groups are individuals with psychiatric disorders and individuals from racial/ethnic groups, specifically Black and Latinx smokers. The study looked at the relationship between stressors and smoking in a sample of Black and Latinx adults with mental illness.

The study, Stress and Cigarette Smoking among Black and Latinx Adults with Psychiatric Disorders, took place at Lincoln Hospital in the South Bronx. Lincoln Hospital was founded in 1839 as "The Home for the Colored Aged" and served free "colored" persons in the north while slavery languished in the south. Today, the hospital is part of the NYC Health+ Hospitals and serves a predominately minority population.

The researchers incorporated a set of psychosocial stressors from a previous study (Slopen, et al, 2013) to see if those apply to smokers in the study. The stressors include relationship stress, financial stress, work stress, work-family spillover, perceived inequality, neighborhood stress, discrimination, and recent problems in immediate family.

These were found to be *Continued on page 7*

New Jersey Quit Centers

County	Program	Contact
Atlantic	Atlantic Prevention Resources Quit Center	609-804-QUIT (7848) Quitcenter@atprev.org
Bergen	Hackensack Meridian Health Quit Center	551-996-1632 quitcenter@hmhn.org
Burlington	Rutgers Tobacco Dependence Program	732-235-8223 kjc94@cts.rutgers.edu
Camden	Rutgers Tobacco Dependence Program	732-235-8223 kjc94@cts.rutgers.edu
Cape May	Cape May County Quit Center at Cape Assist	609-522-5960 Quitcenter@capeassist.org
Cumberland	Inspira Quit Center	856-641-8633 quitcenter@ihn.org
Essex	RWJ Barnabas Health Institute for Prevention and Recovery	833-795-QUIT (7848) quitcenter@rwjbh.org
Gloucester	Rutgers Tobacco Dependence Program	732-235-8223 kjc94@cts.rutgers.edu
Hudson	Hackensack Meridian Health Quit Center	551-996-1632 quitcenter@hmhn.org
Hunterdon	Rutgers Tobacco Dependence Program	732-235-8223 kjc94@cts.rutgers.edu
Mercer	RWJ Barnabas Health Institute for Prevention and Recovery	833-795-QUIT (7848) Quitcenter@rwjbh.org
Middlesex	RWJ Barnabas Health Institute for Prevention and Recovery Rutgers Tobacco Dependence Program	833-795-QUIT (7848) Quitcenter@rwjbh.org 732-235-8223 kjc94@cts.rutgers.edu
Monmouth	RWJ Barnabas Health Institute for Prevention and Recovery	833-795-QUIT (7848) Quitcenter@rwjbh.org
Morris	Rutgers Tobacco Dependence Program	732-235-8223 kjc94@cts.rutgers.edu
Ocean	RWJ Barnabas Health Institute for Prevention and Recovery	833-795-QUIT (7848) Quitcenter@rwjbh.org
Passaic	Hackensack Meridian Health Quit Center	551-996-1632 quitcenter@hmhn.org
Salem	Inspira Quit Center	856-641-8633 quitcenter@ihn.org
Somerset	RWJ Barnabas Health Institute for Prevention and Recovery	833-795-QUIT (7848) quitcenter@rwjbh.org
Sussex	Rutgers Tobacco Dependence Program	732-235-8223 kjc94@cts.rutgers.edu
Union	RWJ Barnabas Health Institute for Prevention and Recovery	833-795-QUIT (7848) quitcenter@rwjbh.org
Warren	Rutgers Tobacco Dependence Program	732-235-8223 kjc94@cts.rutgers.edu

Quit Center Spotlight by Lisa Evans

For more than a decade, CHOICES has been referring smokers to a variety of programs that assist in smoking cessation. Some programs are in-person, online or via telephone. Today, most support clients via telephone or online via Zoom, Telehealth or similar software. For this newsletter issue, I am highlighting three quit centers, the Rutgers Tobacco Dependence Program, Hackensack Meridian Health Quit Center, and RWJ Barnabas Health. These services are free.

In the past, quit centers generally served patients in specific counties. Since the pandemic, many quit centers are welcoming smokers from all counties via audio and video teleconferencing. This eliminates distance as a barrier to smokers who were unable to travel to quit centers. Check with your quit center of choice for any residence restrictions.

I am a graduate of the Tobacco Dependence Program and smoke-free for 10 years after smoking for 41 years. I highly recommend their program as well as the other quit centers around the state. These services help thousands of smokers obtain the gift of a smoke-free life through encouragement, medication, and support with compassion and understanding. If you think you are ready to address your smoking and even if you are not quite ready to quit, talk with a quit center, there is a lot more there for you than you realize.

Rutgers Tobacco Dependence Program

The Rutgers Tobacco Dependence Program opened a clinic in 2001 to provide assistance to smokers wanting help with their quit. The program provides one-on-one counseling, group support, Nicotine Replacement Therapy (NRT) and access to the program's physician, who can prescribe Chantix, Wellbutrin and other prescription NRT. The program is free for everyone. Kim Casarona is the Clinic Coordinator. Kim encourages all smokers to enroll. She can be reached by telephone, (732) 235-8223 or via email, kjc94@cts.rutgers.edu.

Hackensack Meridian Health Quit Center

The Hackensack Meridian Health Quit Center serves residents Bergen, Hudson and Passaic counties and is funded by the New Jersey Department of Health. They offer a patient - tailored treatment plan and supplement it with text support. It is a 7-month program that includes in-person visits, virtual counseling platforms, vaping help, text message to support smoking cessation and pharmacotherapy (e.g. Nicotine patch, gum and lozenge). The NRT is available for 3 months with no out-of-pocket costs. To speak with a tobacco treatment specialist, call 551-996-1632, text 201-655-1025, fax 551-996-4485 or email QuitCenter@hmn.org.

RWJBarnabas Health Institute for Prevention and Recovery Quit Center

The Institute for Prevention and Recovery serves 7 counties and they will also work with smokers statewide via Zoom. They have certified professionals who provide treatment under the Public Health Service Guidelines. The program helps smokers set a realistic quit date, provide one-on-one and group support and supply 4 weeks of NRT medication for free. **See page 6 for free online Support Group info.** For a confidential assessment, call 833-795-QUIT or email quitcenter@rwjbh.org. Visit their website www.rwjbh.org/nicotinerecovery.

Mobile Phones *continued from page 1*



A key challenge is managing cravings for cigarettes, particularly in the first month after quitting (Ploderer et al., 2014). The presence of other smokers, emotional states, activities, particular times of the day, and places often triggered new quitters of tobacco (Ploderer et al., 2014). Studies of mobile phone services for quitters have focused on delivering personalized advice through text messages (Ploderer et al., 2014). In principle, mobile phones provide support at any time and place, ensuring that resources for coping are available in high-risk situations when quitters may be tempted to lapse (Elfeddali, Candel, Wiers, & de Vries, H, 2012).

YouTube and Reddit, images, videos, and short anecdotes already incorporate popular means to encourage information sharing and social support among users. However, the essential idea of relapse prevention apps is to provide quitters with convenient access to two kinds of content—distractions and tips—and to allow them to communicate with each other through comments (Ploderer et al., 2014.) In addition, as an app rather than a Web service, it would ensure that it would be available to quitters at any time and place, even if they did not have mobile phone reception (Ploderer et al., 2014).

These up-and-coming apps would still have distractions intended to take people's minds

off cravings, e.g., interactive games, funny images, and videos. However, they would also consist of smoking-related information in the form of suggestions on how to cope with craving-inducing situations, such as "drink water during a craving." In addition, users of apps could access and filter according to different types of cases, including feeling stressed or bored, or after they had eaten (Ploderer et al., 2014)

Many apps are still in their infancy for now, and for an app like this to remain engaging for quitters, it needs to attract a large group of users to develop a self-sustainable online community. To generate a variety of distractions and tips, particularly the personal stories that many users desire, a larger group is more likely to have to emerge. Moreover, a larger group is more likely to increase commentary on other people's posts, providing recognition and making it easier for the sharing of distractions and tips. This innovation may also help to retain users who successfully quit to share their stories, similar to other online communities in the domain of smoking cessation (Burri, Baujard, & Etter, 2006).

Burri, Baujard, V., & Etter, J.-F. (2006). A qualitative analysis of an Internet discussion forum for recent ex-smokers. *Nicotine & Tobacco Research*, 8(1), S13–S19.

Ploderer, Smith, W., Pearce, J., & Borland, R. (2014). A mobile app offering distractions and tips to cope with cigarette craving: a qualitative study. *JMIR mHealth and uHealth*, 2(2), e23–e23. <https://doi.org/10.2196/mhealth.3209>

RWJ Barnabas Health Free Online Support Group

Thinking about quitting or already started your quit? Join a free virtual support group on Mondays at 7pm. Join via Zoom or telephone. The group is led by a Certified Tobacco Treatment Specialist.

Zoom Link : Meeting ID: 985 9718 6060,
Password: smokefree (all lower case)

One tap mobile: +13126266799,
98597186060#



Creatively Inclined

CHOICES is proud of our peers who are creatively inclined in the arts, poetry, and writing. Are you an artist, poet, or writer and want to see your work in print? We would love to share your artwork, poem, or story! Please contact us via email at dooleypc@rutgers.edu.



More awesome paintings from our team member Deidre. It looks like she has her very own art gallery at home. Very talented!

L.O.L! L.O.L! L.O.L!

by Terrance H

1. Why do seagulls fly over the sea?

2. Why did the atoms across the road?

3. Why did the golfer bring an extra pair of pants to the golf course?

See answers below

continued from page 3

a factor in a participant’s current cigarette smoking status. The study also noted that stressors that affect the Black and Latinx community with mental illness have not been studied previously.

As smokers with mental illness, we know that stress plays a major role in our smoking and ability to quit. It is good to know that research is finally identifying perceived inequality, discrimination, and neighborhood stress as real factors that affect the lives of minority smokers with mental illness.

L.O.L! Answers

All jokes are either original by author or found in A Prairie Home Companion Pretty Good Joke Book 6th Edition

1. Because if they flew over the bay, they'd be bagels.
2. It was time to split.
3. In case he got a hole in one!



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Former: Wayne Holland, Yasmin Halim, Bill Newbold, Eric Arauz,
Diane Beck

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The CHOICES team will come to you! The **CHOICES** team of peer advocates will visit your group or program in New Jersey and provide mental health consumers with education about the consequences of smoking and tobacco products along with information regarding treatment resources available to make quitting easier. Email us dooleypc@rutgers.edu to set up date.



CHOICES is a partnership between Rutgers-RWJMS Division of Addiction Psychiatry, the Mental Health Association of New Jersey (MHANJ) and the NJ Division of Mental Health and Addiction Services and funded by the NJ Division of Mental Health and Addiction Services .