

Best Practices and Tools in Cessation Counseling: The “5 As” and Principles of Motivational Interviewing

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AMERICAN ACADEMY OF PEDIATRICS
 **Julius B. Richmond
Center of Excellence**

Goals: To Learn...

- **The concept of a patient- and family-centered approach to cessation counseling**
- **The five “As” approach to brief office interventions for tobacco use**
- **The concepts of motivational interviewing/consulting**

A Patient- (and Family-) Centered Approach

- **Patients and Families want**
 - **To sense that what they think and feel is being heard**
 - **That they are being respected**
 - **To receive affirmation for making a positive change**
 - **To collaborate with their provider**

The 5 As

Ask about tobacco use and SHS exposure

Advise to quit

Assess willingness to quit

Assist in quit attempt

Arrange follow-up

ASK: Tobacco Use And SHS Exposure Status

- Of every patient and family
- Say “Does anyone living in your home use tobacco in any way?” “Who is it?” “Where do they smoke?” “Is that inside the house?”
- Document as a “vital sign”
- Congratulate former and never users – no further intervention needed

ADVISE: Clear, Strong, Personalized

Clear: “My advice for you and your child is for to make your home smoke- and tobacco-free.”

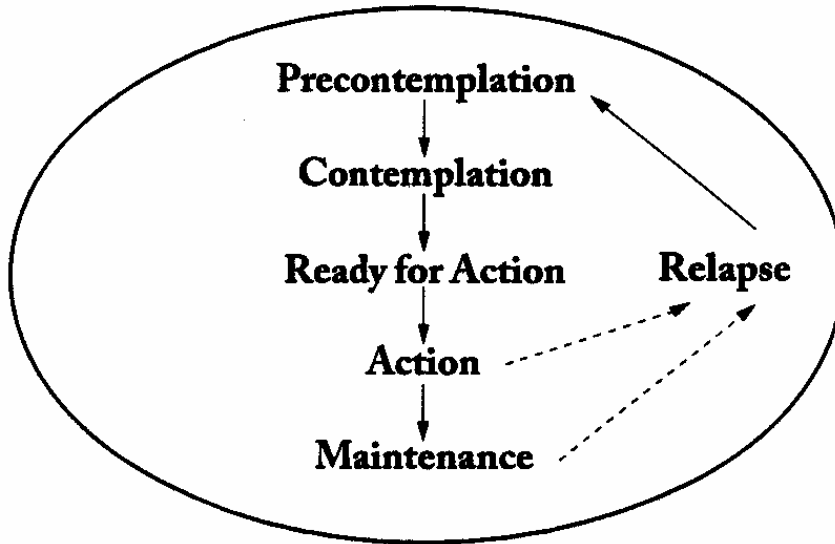
Strong: “Eliminating smoke exposure of your son is the most important thing you can do to protect the health of your child.”

Personalized: Emphasize the impact on the child, family, and patient.

ASSESS: The Willingness to Change

- **Assess willingness to change within the next 30 days – either by quitting, making the home smoke-free, or some other change.**
- **Change is incremental; any movement towards the ultimate goal is important.**

Assessing Stage of Readiness



Stages of Change

Behavior change occurs in stages – not all at once.

ASSIST: Many Options

Minimal Assistance

- Self help materials
- Counseling referral

All patients and parents should be offered these

(Ask, Advise, Refer)

Optimal Assistance

- Self help materials
- Counseling referral
- Set goals/quit date
- Problem solve
- Pharmacotherapy

If you have time, or multiple visits, offer as much as you can

ASSIST: Strategies

- **Set a quit date and sign a contract**
- **Recommend total abstinence**
- **Develop strategies for withdrawal symptoms, cues to smoke, and other challenges**
- **Remove tobacco products and tools**
- **Anticipate and problem-solve**

ASSIST: Problem Solving

- **Delay** – urges usually last a few minutes
- **Drink** water – or other low-cal drink, suck on hard candy (watch for caries!)
- **Do** something else – exercise, relaxation techniques
- **Deep** breathing
- **Discuss** – call a friend, a quit line, write a letter

ASSIST: Problem Solving Other Smokers

- **Ask a friend to quit with you**
- **Ask others not to smoke around you**
- **Assign nonsmoking areas**
- **Leave the room when others smoke**
- **Keep hands and mouth busy**

ASSIST for Those Not Ready to Quit: Smoke Free Homes

- **Never smoke when: holding, feeding or bathing a child, while in the child's room or in a car with a child.**
- **Smoke only outside the home.**
- **Smoke only when away from home and away from children.**

ARRANGE: Follow up

- **Monitor progress and provide support**
- **Encourage the patient**
- **Express willingness to help**
- **Ask about concerns or difficulties**
- **Invite talks about success**

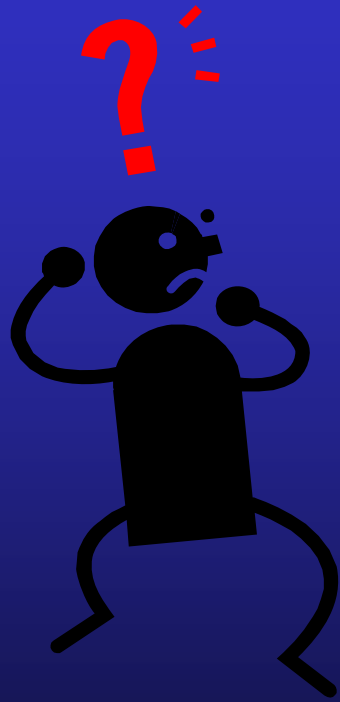
Motivational Interviewing/ Consulting

**A patient-centered counseling
style for promoting behavior
change by helping patients explore
and resolve ambivalence**

Motivational Interviewing Principles

- **Express empathy**
 - **Consider the other point of view**
- **Develop discrepancy**
 - **Between tobacco use and goals**
- **Avoid arguing and confrontation**
 - **Roll with resistance**
- **Support self-efficacy**
 - **Believe that the person will succeed**

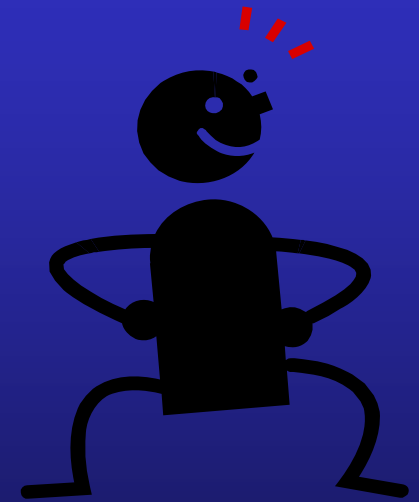
Requirements for Change



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**Motivation
(Should I?)**

**Self-Confidence
(Can I?)**

**Commitment
(Will I?)**

Pros and Cons to Making a Quit Attempt*

PROS

- You and your children will breathe easier
- Clothes and hair will smell better
- More money
- Food tastes better
- More energy

CONS

- Bad moods
- Weight gain
- Smoking tastes good and makes you feel good
- All my friends smoke

***Or why there's ambivalence**

Close on Good Terms

- Offer praise and encouragement
 - Earnestly praise for work done
- Summarize your patient's view on importance and confidence
- Emphasize any agreement that was reached

Summary

- **The concept of a patient- and family-centered approach to cessation counseling**
- **The five “As” approach to brief office interventions for tobacco use**
- **The concepts of motivational interviewing/consulting**

Clean Air for Healthy Children Contact Information

- **Web site**

www.cleanairforhealthychildren.org

- **Email**

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Tobacco

B	A	N	I	C	O	T	I	N	E	B	Y
C	R	S	S	K	H	I	T	S	U	S	H
A	W	N	N	R	N	Z	R	P	T	T	
N	H	N	N	E	E	K	N	N	L	A	L
C	E	Z	C	C	S	S	E	J	I	I	A
E	E	F	C	E	H	U	T	Z	Z	N	E
R	Z	N	K	F	N	I	H	R	A	S	H
T	E	D	I	D	L	H	T	B	A	Y	N
L	N	R	N	U	O	J	T		U	E	U
S	E	I	N	L	U	T	E	U	S	O	H
S	A	B	T	A	D	R	H	T	D	J	C
O	S	W	A	A	N	H	T	S	A	N	F

ASHES

ASTHMA

BRONCHITIS

BURNS

CANCER

COUGH

FIRES

HEART

LUNGS

MOUTH

NICOTINE

PNEUMONIA

SMOKE

STABS

STINGS

T-HROAT

UNHEALTHY

WHEEZE

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