



Not-On-Tobacco[®] (N-O-T)

Not-On-Tobacco[®] (N-O-T) is intended for regular smokers aged 14-19 who want to quit.

Background: In 1997, the American Lung Association began a collaboration with the Prevention Research Center at West Virginia University (WVU). WVU's researchers were developing a science-based approach to teen smoking cessation and were searching for the right vehicle to disseminate the program on a national basis. Their view of the program meshed with the American Lung Association's needs. Both agreed that a good teen smoking cessation program should not just be an adaptation of an adult cessation program and that a teen program would be more effective if it included life skills benefits as well as smoking cessation.



In the 1997-98 school year, WVU conducted an initial feasibility study of *Not-On-Tobacco*[®] (N-O-T) in West Virginia and Florida. At the end of the program, biochemically-validated quit rates for study participants were significantly higher than those for a comparison group. Of the N-O-T participants who continued to smoke, a large majority reduced the amount they smoked. Findings on programmatic issues such as facilitator training and recruitment of teens were also consistently positive. Several additional field-based evaluations were conducted over the next two school years. All showed positive results and the N-O-T program was made available through Lung Associations nationwide.

Structure and Content: The *Not-On-Tobacco*[®] curriculum consists of ten 50-minute sessions that typically occur once a week for 10 consecutive weeks. There are also four optional booster sessions. Because males and females may start and stop smoking for different reasons, N-O-T is gender-sensitive and includes different components, content, and techniques for males and females. Whenever possible, it is recommended that separate groups be held with each gender, led by same-gender facilitators.

Participants are encouraged to take an active role during each group session so a maximum of 10 to 12 participants is recommended per group. Sessions offer support, guidance and instruction on topics such as understanding reasons for smoking, preparing to quit, nicotine addiction and withdrawal, accessing and maintaining social support, coping with stress and preventing relapses.

N-O-T is a voluntary non-punitive program that uses life-management skills to help teen smokers handle stress, decision-making, and peer and family relationships. N-O-T teaches youth how to effectively communicate with family members, provides informative handouts to parents and family members, and offers strategies for participants to assert their needs with family who use tobacco. The program also addresses unhealthy lifestyle behaviors such as alcohol or illegal drug use and healthy lifestyle components such as exercise and nutrition.

Availability: The *Not-On-Tobacco*[®] program is offered in both school and community settings. N-O-T clinics are typically facilitated by teachers, school nurses, counselors, other staff or volunteers. Each N-O-T facilitator must complete a workshop conducted by an American Lung Association-certified N-O-T Trainer. The one-day experiential training offers support and instruction on topics such as understanding reasons for smoking, preparing to quit, nicotine addiction and withdrawal, accessing and maintaining social support, coping with stress, and preventing relapse. While a registration fee may be charged for the facilitator training workshop, teen clinic participants aren't typically charged any type of fee.

Evaluation: A review of *Not-On-Tobacco*[®] evaluation studies conducted between 1998 and 2003 included data from 6130 N-O-T participants from 489 schools in six states (Florida, North Carolina, New Jersey, Ohio, Wisconsin and West Virginia). Both intent-to-treat and compliant quit rates were calculated at several follow-up points. End-of-program results from the controlled studies revealed aggregate quit rates of 15% (intent-to-treat analysis) and 19% (compliant analysis). End-of-program field-based evaluations revealed aggregate quit rates of 27% and 31%, respectively. The end-of-program intent-to-treat quit rate from all 6130 youth across all evaluations is 18%. In addition, those N-O-T participants who did not quit smoking consistently showed significant reductions in the amount they smoked. In one follow-up conducted six months after the end of a clinic, 50% of non-quitters had cut their cigarettes per day in half.

Process data indicates that participants feel very positive about N-O-T. Eighty percent of youth in one study believed the program helped in areas of their lives beyond smoking cessation. These areas included feeling better about themselves (55.4%), dealing better with stress (54.6%), exercising more (43.1%), making new friends (36.9%), dealing better with family (33.8%), eating better (30.0%), and going to school more often (20.8%). A large majority (84.6%) believed the program helped to make a positive change in their smoking behavior.

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