Tobacco Control-related International Websites Review

January 2009
Preface

The Tobacco control-related websites review aims to create a database of significant, evidence-based and multidisciplinary approach resources concerning Smoking impact on Health and over world initiatives targeted to Prevention/Protection from Smoking harms.

It should be stressed that World Wide Web provides a plethora of sites treating the topic of Tobacco control.

This review was focused prevalently on English language sites with evidence-based resources and/or significant initiatives at community, regional and national level.

The review has been carried out in two steps:

A. Significant Tobacco control-related websites search/selection both using keywords (in English, Italian and French language) and/or links provided in other websites previously opened. In this phase, more than 100 websites were examined and 77 of them were selected to be included in this review.

B. Selected websites evaluation from both content and design aspects. Content aspect is the prevalent one.

The outcome was a huge list of relevant information sources about all Tobacco control aspects: health damages, smoking cessation, second-hand smoking, prevention/protection initiatives, legislation, taxation, and more. Furthermore targeted analysis in found resources, led to useful sorting of reviewed Websites by:

- Target groups: health professionals, educators, public, and policy makers.
- Common items: health harms of smoking, smoking cessation, second-hand smoking and prevention/protection initiatives.
- International Networks and Organisations.
- User’s friendly and well structured
- Videos, photos, posters and other visual material for Tobacco-free Campaigns and Education
Table of Contents

<table>
<thead>
<tr>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preface</td>
<td>2</td>
</tr>
<tr>
<td>Table of contents</td>
<td>3</td>
</tr>
<tr>
<td>Executive Summary</td>
<td>4</td>
</tr>
<tr>
<td>1. List of reviewed Websites</td>
<td>5 - 7</td>
</tr>
<tr>
<td>2. Reviewed Websites Reports</td>
<td>8 - 55</td>
</tr>
<tr>
<td>3. Journals publishing articles related to Tobacco</td>
<td>56 - 58</td>
</tr>
<tr>
<td>4. Selection of relevant guidelines</td>
<td>59 - 64</td>
</tr>
<tr>
<td>5. Interesting elements for target groups</td>
<td>65 - 69</td>
</tr>
<tr>
<td>6. Items commonly featuring in reviewed Websites</td>
<td>70 - 71</td>
</tr>
<tr>
<td>7. Websites concerning International Networks and Organisations</td>
<td>72</td>
</tr>
<tr>
<td>8. User’s friendly and well structured Websites</td>
<td>73</td>
</tr>
<tr>
<td>9. Websites containing Videos, photos, posters and other visual material for Tobacco-free Campaigns and Education</td>
<td>74</td>
</tr>
</tbody>
</table>

- Appendices................................................................................. (75 – 101)

Appendix A: Resources from reviewed websites

Volume I: from A1 to A107
Volume II: from A108 to A200
Volume III: from A201 to A262

Appendix A documents are provided in printed version only

Appendix B: Glossary

Source: Clinical Practice Guideline – Treating Tobacco Use and Dependence: 2008 Update
Executive Summary

The Tobacco control-related websites review aims to create a database of significant, evidence-based and multidisciplinary approach resources concerning Smoking impact on Health and over world initiatives targeted to Prevention/Protection from Smoking harms.

More than 100 websites were examined and 77 of them were selected to be included in this review.

Section 1 contains the List of reviewed Websites, with their URL, Producer name and report page.

Section 2 contains the reports on websites being evaluated. Website reports are more or less detailed, depending on the relevance of included resources and information.

Section 3 is a briefly commented List of journals which prevalently or frequently publish articles related to tobacco and smoking issues.

Section 4 is a briefly commented list of 13 relevant Tobacco-related Guidelines.

Section 5 is the outcome of a specific analysis aiming to associate reviewed Websites with key elements which are interesting for target groups: health professionals, wide public (consumers), educators (teachers and parents), and policy makers (such as politicians and public administration managers).

Section 6 identifies the items commonly featuring in the reviewed Websites.

All aspects related to tobacco control question were grouped into four main items: health harms of smoking, smoking cessation, second-hand smoking and prevention/protection initiatives (including policies, taxation, advertising, campaigns, legislation, statistics, surveys, and more).

Section 7 contains the List of Websites concerning International Networks and organisations.

Section 8 indicates Websites which have a user’s friendly and well organized structure.

Section 9 indicates Websites including videos, photos, posters and other visual material for Tobacco-free Campaigns and Education.
1. List of reviewed Websites

<table>
<thead>
<tr>
<th>N.</th>
<th>URL</th>
<th>Website producer</th>
<th>Acronym</th>
<th>page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<td>-</td>
<td>9</td>
</tr>
<tr>
<td>2</td>
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<td>UK National Smoking Conference</td>
<td>UKNSCC</td>
<td>9</td>
</tr>
<tr>
<td>3</td>
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<tr>
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<td>ATTUD</td>
<td>10</td>
</tr>
<tr>
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<td>British Medical Association</td>
<td>BMA</td>
<td>10</td>
</tr>
<tr>
<td>6</td>
<td><a href="http://www.cancerresearchuk.org">http://www.cancerresearchuk.org</a></td>
<td>Cancer Research UK</td>
<td>-</td>
<td>11</td>
</tr>
<tr>
<td>8</td>
<td><a href="http://www.nosmokingday.org.uk">http://www.nosmokingday.org.uk</a></td>
<td>No Smoking Day</td>
<td>-</td>
<td>11</td>
</tr>
<tr>
<td>9</td>
<td><a href="http://www.pharmacyhealthlink.org.uk">http://www.pharmacyhealthlink.org.uk</a></td>
<td>Pharmacy Health Link</td>
<td>PHLink</td>
<td>12</td>
</tr>
<tr>
<td>10</td>
<td><a href="http://www.quit.org.uk">http://www.quit.org.uk</a></td>
<td>QUIT</td>
<td>-</td>
<td>12</td>
</tr>
<tr>
<td>11</td>
<td><a href="http://www.rcn.org.uk">http://www.rcn.org.uk</a></td>
<td>Royal College of Nursing</td>
<td>RCN</td>
<td>12</td>
</tr>
<tr>
<td>12</td>
<td><a href="http://www.scsrn.org">http://www.scsrn.org</a></td>
<td>Smoking Cessation Service Research Network</td>
<td>-</td>
<td>12</td>
</tr>
<tr>
<td>13</td>
<td><a href="http://www.srnt.org">http://www.srnt.org</a></td>
<td>Society for Research on Nicotine and Tobacco</td>
<td>SCSRN</td>
<td>13</td>
</tr>
<tr>
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<td><a href="http://www.trdrp.org">http://www.trdrp.org</a></td>
<td>Tobacco-Related Disease Research Program</td>
<td>TRDRP</td>
<td>13</td>
</tr>
<tr>
<td>15</td>
<td><a href="http://treatobacco.net">http://treatobacco.net</a></td>
<td>-</td>
<td>-</td>
<td>13</td>
</tr>
<tr>
<td>16</td>
<td><a href="http://societe-francaise-de-tabacologie.com/">http://societe-francaise-de-tabacologie.com/</a></td>
<td>Société Française de Tabacologie</td>
<td>SFT</td>
<td>14</td>
</tr>
<tr>
<td>17</td>
<td><a href="http://www.surgeongeneral.gov/tobacco/">http://www.surgeongeneral.gov/tobacco/</a></td>
<td>U.S. Department of Health &amp; Human Services</td>
<td>-</td>
<td>14</td>
</tr>
<tr>
<td>18</td>
<td><a href="http://makesmokinghistory.org/">http://makesmokinghistory.org/</a></td>
<td>Massachusetts Tobacco Control Program</td>
<td>MTCP</td>
<td>14</td>
</tr>
<tr>
<td>19</td>
<td><a href="http://www.epa.gov/">http://www.epa.gov/</a></td>
<td>Environmental Protection Agency</td>
<td>EPA</td>
<td>14</td>
</tr>
<tr>
<td>21</td>
<td><a href="http://www.smokinginengland.info/">http://www.smokinginengland.info/</a></td>
<td>-</td>
<td>-</td>
<td>15</td>
</tr>
<tr>
<td>22</td>
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<td>Tobacco Control Research</td>
<td>-</td>
<td>15</td>
</tr>
<tr>
<td>23</td>
<td><a href="http://www.globalink.org/">http://www.globalink.org/</a></td>
<td>GLOBALink – global tobacco control</td>
<td>-</td>
<td>16</td>
</tr>
<tr>
<td>24</td>
<td><a href="http://www.stop-tabac.ch/">http://www.stop-tabac.ch/</a></td>
<td>Medical School – University of Geneva</td>
<td>-</td>
<td>16</td>
</tr>
<tr>
<td>26</td>
<td><a href="http://www.tabacofractal.com/">http://www.tabacofractal.com/</a></td>
<td>France Réseau des Acteurs en Tabacologie Ligériens</td>
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<td>16</td>
</tr>
<tr>
<td>27</td>
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<td>-</td>
<td>16-17</td>
</tr>
<tr>
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<td>-</td>
<td>17-18</td>
</tr>
<tr>
<td>29</td>
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<td>European Medical Association of Smoking and Health</td>
<td>EMASH</td>
<td>18</td>
</tr>
<tr>
<td>30</td>
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<td>European Network for Smoking Prevention</td>
<td>ENSP</td>
<td>18-20</td>
</tr>
<tr>
<td>31</td>
<td><a href="http://tobacco.health.usyd.edu.au/">http://tobacco.health.usyd.edu.au/</a></td>
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<td>-</td>
<td>21</td>
</tr>
<tr>
<td>32</td>
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<td>-</td>
<td>-</td>
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</tr>
<tr>
<td>33</td>
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<td>National Conference on Tobacco or Health</td>
<td>NCTOH</td>
<td>21</td>
</tr>
<tr>
<td>N.</td>
<td>URL</td>
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<td>Acronym</td>
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</tr>
<tr>
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<td>-</td>
<td>-</td>
<td>22</td>
</tr>
<tr>
<td>36</td>
<td><a href="http://www.health.state.ny.us">http://www.health.state.ny.us</a></td>
<td>New York State Department of Health Tobacco Control Program</td>
<td>NYTCP</td>
<td>22</td>
</tr>
<tr>
<td>37</td>
<td><a href="http://www.quitnow.info.au">http://www.quitnow.info.au</a></td>
<td>Australian Government</td>
<td>-</td>
<td>23</td>
</tr>
<tr>
<td>38</td>
<td><a href="http://www.learntobehealthy.org">http://www.learntobehealthy.org</a></td>
<td>Group to Alleviate Smoking in Public</td>
<td>GASP</td>
<td>24</td>
</tr>
<tr>
<td>40</td>
<td><a href="http://www.gasp.org">http://www.gasp.org</a></td>
<td>American Medical Student Association</td>
<td>AMSA</td>
<td>24</td>
</tr>
<tr>
<td>41</td>
<td><a href="http://www.cancer.org">http://www.cancer.org</a></td>
<td>American Cancer Society</td>
<td>-</td>
<td>25</td>
</tr>
<tr>
<td>42</td>
<td><a href="http://www.fightwithfact.com">http://www.fightwithfact.com</a></td>
<td>Fighting Against Corporate Tobacco</td>
<td>FACT</td>
<td>25</td>
</tr>
<tr>
<td>43</td>
<td><a href="http://www.inwat.org">http://www.inwat.org</a></td>
<td>International Network of Women Against Tobacco</td>
<td>INWAT</td>
<td>25</td>
</tr>
<tr>
<td>44</td>
<td><a href="http://www.otc.ie">http://www.otc.ie</a></td>
<td>Office of Tobacco Control</td>
<td>OTC</td>
<td>26</td>
</tr>
<tr>
<td>45</td>
<td><a href="http://www.worldlungfoundation.org">http://www.worldlungfoundation.org</a></td>
<td>World Lung Foundation</td>
<td>WLF</td>
<td>26</td>
</tr>
<tr>
<td>46</td>
<td><a href="http://www.cctc.ca/">http://www.cctc.ca/</a></td>
<td>Canadian Council for Tobacco Control</td>
<td>CCTC</td>
<td>27-29</td>
</tr>
<tr>
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<td>National Institute of Dental and Craniofacial Research</td>
<td>NIDCR</td>
<td>30</td>
</tr>
<tr>
<td>50</td>
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<td>Trinkets &amp; Trash Collection</td>
<td>-</td>
<td>30</td>
</tr>
<tr>
<td>51</td>
<td><a href="http://www.helguide.org">http://www.helguide.org</a></td>
<td>Rotary club of Santa Monica</td>
<td>-</td>
<td>30</td>
</tr>
<tr>
<td>52</td>
<td><a href="http://www.naqttline.org">http://www.naqttline.org</a></td>
<td>North American Quitline Consotrium</td>
<td>NAQC</td>
<td>31</td>
</tr>
<tr>
<td>53</td>
<td><a href="http://www.cancer.gov">http://www.cancer.gov</a></td>
<td>National Cancer Institute</td>
<td>NCI</td>
<td>31</td>
</tr>
<tr>
<td>54</td>
<td><a href="http://www.ttac.org">http://www.ttac.org</a></td>
<td>Tobacco Technical Assistance Consortium</td>
<td>TTAC</td>
<td>31</td>
</tr>
<tr>
<td>55</td>
<td><a href="http://isptid.globalink.org">http://isptid.globalink.org</a></td>
<td>International Society for the Prevention of Tobacco Induced Diseases</td>
<td>ISPTID</td>
<td>31</td>
</tr>
<tr>
<td>56</td>
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<td>Public Health Law &amp; Policy</td>
<td>PHLP</td>
<td>32</td>
</tr>
<tr>
<td>57</td>
<td><a href="http://www.ccap.etr.org">http://www.ccap.etr.org</a></td>
<td>California’s Clean Air Project</td>
<td>CCAP</td>
<td>32</td>
</tr>
<tr>
<td>58</td>
<td><a href="http://www.otru.org">http://www.otru.org</a></td>
<td>Ontario Tobacco Research Unit</td>
<td>OTRU</td>
<td>33</td>
</tr>
<tr>
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<td>Tobacco Etiology Research Network</td>
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<td>34</td>
</tr>
<tr>
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<td>-</td>
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<td>34-35</td>
</tr>
<tr>
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<td>World Health Organization</td>
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<td>-</td>
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</tr>
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<td>Ce.S.D.A.</td>
<td>37</td>
</tr>
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<td><a href="http://www.badvertising.org/index.html">http://www.badvertising.org/index.html</a></td>
<td>BADvertising Institute</td>
<td>-</td>
<td>38</td>
</tr>
<tr>
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<td><a href="http://www.sctr.sk.ca/">http://www.sctr.sk.ca/</a></td>
<td>Saskatchewan Coalition for Tobacco Reduction</td>
<td>SCTR</td>
<td>38</td>
</tr>
<tr>
<td>71</td>
<td><a href="http://www.leavethepackbehind.org/">http://www.leavethepackbehind.org/</a></td>
<td>Leave The Pack Behind</td>
<td>-</td>
<td>47</td>
</tr>
<tr>
<td>72</td>
<td><a href="http://www.americanlegacy.org/">http://www.americanlegacy.org/</a></td>
<td>American Legacy Foundation</td>
<td>-</td>
<td>47-48</td>
</tr>
<tr>
<td>73</td>
<td><a href="http://www.respect-ala.org">http://www.respect-ala.org</a></td>
<td>Resources &amp; Education Supporting People Everywhere Controlling Tobacco</td>
<td>RESPECT</td>
<td>48-50</td>
</tr>
<tr>
<td>74</td>
<td><a href="http://www.jti.com/">http://www.jti.com/</a></td>
<td>Japan Tobacco International</td>
<td>JTI</td>
<td>50</td>
</tr>
<tr>
<td>75</td>
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<td>-</td>
<td>50-51</td>
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<td>TIS</td>
<td>53-55</td>
</tr>
</tbody>
</table>
2. Reviewed Websites Reports

This section contains the summary report of relevant websites being selected and evaluated.
Each *Summary report* includes:

- Web address,
- Website Producer,
- significant sections with relative information,
- site evaluation (criteria: design, friendly user and organization) – yellow backdrop (site evaluation is present only when it is considered interesting),
- important topics – cyan backdrop

Website reports are more or less detailed, depending on the relevance of included resources and information.
In Appendix A, (red font indication) list of interesting resources or full documents are provided in printed version.
1. [http://www.ministerosalute.it](http://www.ministerosalute.it)  (in Italian)

Website of the **Italian Ministry of Health**.

From home page open *Gaudagnare salute-Stili di vita* and then select the topic *Fumo*. It is a simple website providing visitors with comprehensive information on:

a) Italian legal framework on Tobacco control;  
b) Risks for health;  
c) How to quit smoking;  
d) Good reasons to quit smoking;  
e) Ten expert advices;  
f) Epidemiological data.

In “how to quit smoking” four links are given:

- Guide to territorial services for quit smoking (pdf document: “*ambulatori per la cessazione dal fumo di tabacco*”).  
- Phone number to ask about quit smoking.  
- Practical guide for smokers wishing to quit (pdf document: “*Guida pratica – smettere di fumare*”).  
- Clinical Guidelines to promote cessation (pdf document: “*Linee Guida cliniche per promuovere la cessazione dell’abitudine al fumo*”)

**Site evaluation**  
*Purpose:* informative – to promote smoking quitting.  
*Target group:* mainly citizens.  
*Appropriateness:* its content is essential, clear and complete for its purpose.  
*Design:* simple, clear and easy to move around the site.  
*Comment:* good practice as regards citizenship orientation on smoking cessation

2. [http://www.uknscc.org](http://www.uknscc.org)

Website of the **UK National Smoking Conference** (UKNSCC)

It is being organized to assist the professional development of the field. A permanent free archive of conference abstracts, presentation notes, PowerPoint presentations and delegate reports. The first conference was held on 2005, the next will be on June 2009. In every conference archive, it is possible to listen to the speech and to read the PowerPoint presentation.

Website of Action on Smoking and Health (ASH).

It is a campaigning public health charity that works to eliminate the harm caused by tobacco. Each year ASH completes a number of submissions to government, parliamentary committees and other inquiries related to tobacco and smoking both in the UK and internationally.
Interesting submissions: Smoke free Campaign (A55) and Tobacco Advertising (A56).
ASH produces a variety of publications including its Strategic Plan. Publications Catalogue is printed in (A57).
The site is organized in 7 main sections:
Information: it sets out the health impacts of smoking and exposure to secondhand smoke. It also contains latest news, resources, law guide and information on the tobacco industry.
Current Policy Issues: it contains ASH latest work towards a society free from the harm caused by tobacco (A58).
Campaigns: how people can get involved, resources for health Professionals (A59).
Stopping Smoking: it contains targeted information for smokers wanting to quit and for Health Professionals helping people stop smoking (A60).
Media Room: it contains press releases, news and links.

Site evaluation design: simple, clear, easy to move from one section to the other


Website of Association for the Treatment of Tobacco Use and Dependence (ATTUD).

It is an organization of providers dedicated to the promotion of and increased access to evidence-based tobacco treatment for the tobacco user.
Network of professionals with the clinical skills and background to provide evidence-based treatment for tobacco dependence.
More information in section Resources and Links → Presentations.


Website of British Medical Association (BMA).

In Section “Health Promotion and ethics”, subsection “Tobacco” some interesting reports are provided.

Website of Cancer Research UK.

Tobacco related issues are presented in section “Healthy Living”, subsection “Smoking and Cancer”.

Cancers caused by smoking are reported with separate links for: (lung, mouth, larynx, esophagus, liver, pancreas, stomach, kidney, bladder, cervix and some types of leukemia).

For each of the above topics, following information are given: risks and causes, signs and symptoms, screening, detection, treatment.

From “Smoking and Cancer” subsection it is possible to open some specific links, such as: Breath competition, What’s in a cigarette, Why do people smoke, Common questions, Reasons to quit, Giving up, Children and Smoking, Secondhand smoke, Smokeless tobacco, Real life stories, What do we know (information about the links between smoking and cancer – A61).

Site evaluation:
Subsections are very well organized, with easily accessible links to specific topics. Information is clear, concise, scientific, appropriate, relevant.


Website of the Journal of Smoking Cessation, established in 2006.

A quality peer-reviewed journal of the Australian Association of Smoking Cessation Professionals (AASCP) and supported by smoking cessation research groups in the US and UK (A62).


Website of the No Smoking Day charity.

They organize the No Smoking Day campaign (on March every year), which is the UK’s foremost annual health awareness campaign helping over 1.5 million smokers quit for good since 1984.

Posters of previous year’s campaign are available for download in section “The Campaign” subsection “Past Posters”.

Their publications are listed in section “Publications” (A63).

Website of Pharmacy Health Link (PHLink).

It is a charity which has been working for over 21 years to support **pharmacists and other professionals** to give health information to the public. Most of their resources have been produced in conjunction with the Government and other charities.

Resources are organized in two main categories:

**Resources for professionals** (Public Health section)

**Resources** for the public

In Public Health section two documents are available for pharmacists, mainly focused on tips for stopping smoking.

In resources for the public section, the following publication on **Smoking cessation** is available:

- Brief advice on stopping smoking (Resource cards)
- Towards a Smoke free England (Booklet)
- Want to stop smoking? (Poster)


Website of **QUIT**, an independent charity whose aim is to save lives by helping smokers to stop.

Interesting Resource: 51-pages pdf document (called “Primary Resource Pack”, designed to be a tool box for teachers of Primary school.

It is possible to download it by opening the section dedicated to “Teachers”.

11. http://www.rcn.org.uk/

Website of Royal College of Nursing (RCN) in United Kingdom.

Interesting Resources: *(A64)*

a) **Cleaning the air 2 – Smoking and tobacco control** – an updated guide for nurses (44-pages pdf document), published in Oct 2007.

b) **Protecting community staff from exposure to second-hand smoke**


12) http://www.scsrn.org/

Website of Smoking Cessation Service Research Network (SCSRN).

It is a collaboration of NHS Stop Smoking Services that are interested in developing and evaluating good clinical practice (United Kingdom).

Most interesting sections and sub-sections of the site:

- **Research Projects**: Annual Smoking Cessation Practitioner (SCP) Survey; Carbon Monoxide Verification Study; Referral Study; Client Satisfaction survey tool; Online support for smoking cessation; Client satisfaction project (phase two) – *(A65)*.

- **Clinical and research tools**: Russel standard (clinical): guidance on collecting smoking cessation outcome figures (pdf – interesting); Russel standard calculators (doc – calculating quit rates); Questionnaires; Research resources (interesting).

- **Policy guidance** *(A66)*: NICE guidance; DoH guidance; statistics on NHS stop smoking services; Other policy advices.
13) http://www.srnt.org/

Website of Society for Research on Nicotine and Tobacco (SRNT).

Its mission is to stimulate the generation of new knowledge concerning nicotine in all its manifestations – from molecular to societal.

- [Publications: Annual Meeting Abstracts, Newsletter](http://www.srnt.org/)
- [Resources: Research Resources (A67); Training and Research (at the Brown Medical School); Other Resources (websites).]

14) http://www.trdrp.org/

Website of Tobacco-Related Disease Research Program (TRDRP) – California.

Research supported by TRDRP funds have been targeted towards studies that enhance the understanding of the causes of tobacco-related diseases, and that lead to the development of more effective interventions for their prevention and treatment.

- [Funded Research: Recent Awards (A69).]

Site evaluation: very simple, user friendly.

15) http://treatobacco.net/

Independent, authoritative information on the treatment of tobacco dependence. Evidence-based information is presented under five headings:

- Demographic and Health Effects: key findings (A70); Slide kit (A71).
- Efficacy: a section providing information on effective treatments for tobacco dependence key findings (A72); Recommendations (A73); Areas for further research (A74); Slide kits (A75).
- Health Economics: a section providing information of economic assessments of interventions to assist smoking cessation. Key findings (A76); Recommendations (A77); Areas of further research (A78).
- Policy: a section providing information on policies concerning the treatment of tobacco dependence. Key findings (A79); Recommendations (A80); Areas for further Research (A81); Slide kit (A82).
- Safety: a database providing information on the safety and toxicity of nicotine replacement medications, bupropion, varenicline and other (smokeless tobacco) used to facilitate smoking cessation. Key findings (A83); Recommendations (A84); Areas for further research (A85); Slide kit (A86).

Another useful section is Resource library subdivided in following subsections: slide kits (see above); Articles, books, reports, etc. (A87); Journals (A88); Treatment guidelines (A89).

Site evaluation: interesting and well organized site readable in different languages (English, Arabic, Chinese, Czech, Espanol, French, Deutch, Italian, Japanese, Portugues and Russian).
<table>
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| 16)    | http://societe-francaise-de-tabacologie.com/ | (in French) Website of **Société Française de Tabacologie** (SFT) It has the purpose to promote scientific research on tobacco. They organize annual national congress.  
• Publications (A90).  
• Report on snus (A91) – Location: Actualités tabacologiques → Connaissances actuelles des effets pour la santé du tabac oral avec attention particulière au snus suédois (69 pages pdf).  
• Actualités tabacologiques (A92).  
• Formations (training) (A93). |
| 18)    | http://makesmokinghistory.org/            | Website of the **Massachusetts Tobacco Control Program** (MTCP) It is part of the Massachusetts Department of Public Help. This program is dedicated to ending the suffering caused by tobacco use. The sections of the site are:  
• Quitting smoking: medications that can help to quit, tips and articles about quitting, Quit wizard (A95) to create a quitting plan.  
• Preventing smoking: preventing youth from starting to smoke involving the whole community (schools, tobacco retailers, etc.).  
• Schools: secondhand smoke in schools is treated (see publications cover in A96).  
• Workplaces.  
• Secondhand Smoke (reports dedicated to children exposure).  
• Impact of Smoking: this section contains TAFI (Tobacco Automated Fact sheet Information), the first tobacco system of its kind to automatically update community level facts on a continual basis. |
| 19)    | http://www.epa.gov/                      | Website of the U.S. **Environmental Protection Agency** (EPA). Smoking related issues are presented in section “Indoor Air Quality” (subsection “Smoke-free Homes and Cars Programs” (see publication List in A97, A98, A99). |
20) http://www-nehc.med.navy.mil/

Website of **Navy and Marine Corps**, Public Health Center.

There is a section (HEALTH TOPICS) dedicated to **Tobacco Cessation**. Available resources are presented in three main subsections:
1. **My Health** (*A100*).
2. **Health Educators** (*A101*).
3. **Clinicians** (*A102*).

**Site design:** It is interesting the frame containing headings of each subsection mentioned above. Clicking on the cells of the frame provides immediate access to a series of related documents.

21) http://www.smokinginengland.info/

This website provides up-to-date information on smoking and smoking cessation in England derived from the **Smoking Toolkit Study**: a monthly series of national household surveys with smokers and recent ex-smokers being followed up for 6 months. Data collection began in October 2006. Available document covers are presented in *A103*.


It’s a website created by the **Tobacco Control Research** Branch of the National Cancer Institute.

Its purpose is intended to help people **quit smoking**, providing information and professional assistance.

The site is organized in four main sections:

a) **Quit Smoking**:
   - It contains the following subsections:
     • **Thinking About Quitting**: (Why quit; What’s in a cigarette; Reasons for quitting; Why quitting is so hard). In “Why Quitting is so hard” section three interesting documents are linked: 1) **Nicotine addiction test**; 2) Smoking triggers; 3) Keep track of when and why you smoke.
     • **Preparing to Quit**
       - It contains the following subsections: Overview of basic steps - Overview of medicines that help with withdrawal - Other support.
     • **Quitting**
       - It contains the following subsections: Steps to take on quit day; Managing cravings; Withdrawal: How you may feel when you quit; What to do if you slip.
     • **Staying Quit**
       - It contains the following subsections: Sticking with it; Resources to help you if you slip up.

b) **Get Expert Help**

c) **Print Resources**: evidence-based tools to help specific audiences quit smoking and remain smoke-free (see recourses list in *A104*).

d) **Studies**: 431 smoking-cessation studies are provided.

**Site evaluation**

Content: a very appropriate Online Guide to Quitting Design: simple, user friendly
Website of **GLOBALink – global tobacco control**. Interesting sections and links of this site:
- “The Tobacco Reference Guide” *(A105)* – for online reading
- Tobacco-Control Books *(A106)*
- TobaccoPedia: The Online Tobacco Encyclopedia *(A107)*

(in French)
Website of **Medical School – University of Geneve** (Institut de Médecine Sociale et Préventive).
Its purpose is to help people **quit smoking**, providing specific tools (tests, coach, individualized tips), information on tobacco dependence (treatment, diseases, etc).
Interesting resources:
- *Programs to quit* (test, tips, nicotine substitutes, withdrawal symptoms)
- *Inform yourself* (effects of smoking on health, documentation (Flyers, Books, Dossier, Reports, scientific publications) – see subject list in *A108*

**Site evaluation**
Content: appropriate Guide to Quitting and good information source  
Design: rather confused

(in French)
Website of **Institut National du Cancer** (National Cancer Institute) – France.
From homepage, section “Prévention” it is possible to open Tobacco dossier (“Tabac”).
It contains French law (*smoke-free public spaces*) and document resources on following topics: Tobacco and cancer, Passive smoking, Quit smoking, International initiatives against tobacco dependence.

(in French)
Website of **France Réseau des Acteurs en Tabacologie Ligériens** (F.R.AC.TA.L.).
It is an Association of health professionals, aiming to coordinate actions for tobacco-dependence prevention and to help **quit**.
Interesting sections:
- Connaissance pour les professionnels: it provides 103 articles for clinicians. Some of them focus on psychological help for smokers.  
- Centres de Tabacologie: List of Tobacco-control centers.  
- Soignants formations: it provides resources (congress, seminar, etc) for professionals training.

Website of **HealthInsite**.
This is an Australian Government initiative, funded by the Department of Health and Ageing.
It aims to improve health of Australians by providing easy access to quality information about human health.
There are some resources regarding smoking.
Location: homepage → A-Z Health Topics → S → Smoking

- **Passive Smoking:** (21 resources: articles, papers containing information about the health effects of passive smoking) – A109
- **Health effects of smoking:** (21 resources, information on health effects of smoking, mainly article) – A110
- **Quitting smoking:** (53 resources for information on how to quit and the effectiveness of various ways of stopping smoking – A111
- **Help with Quitting Smoking** (12 resources for information about options to help you quit smoking) – A112
- **Systematic Reviews of Treatments for Quitting Smoking** (10 resources, regarding the evidence for the effectiveness of treatments for quitting smoking) – A113
- **Smoking and Cardiovascular Disease:** (13 resources about smoking and its role in cardiovascular diseases, including stroke and heart disease) – A114


Website of **Health Canada**.

It has the purpose providing Canadians with direct access to information about the programs and services offered by the Government of Canada. There is a section dedicated to Tobacco. Location: Home → Healthy Living → Tobacco. All subsections are quite interesting and well structured.

- **Tobacco Use Statistics**
  Location: Home → Healthy Living → Tobacco → Research → Tobacco Use statistics.
  It contains pertinent information for CTUMS (Canadian Tobacco Use Monitoring Survey) developed to provide reliable and continual data on tobacco use and related issues.
  It also contains information for YSS (Youth Smoking Survey), which is a timely and accurate monitoring of the tobacco use in school aged children (grades 5-12).

- **Tobacco: Behind the Smoke**
  Location: Home → Healthy Living → Tobacco → Recent News → Tobacco: Behind the Smoke Animation.
  It is an animation series of the chemicals formed in tobacco smoke and their impact on human health.

- **Keep Your Kids Smoke-free**
  Location: Home → Healthy Living → Tobacco → Recent News → Guide to helping your kids stay smoke-free
  Related Resource (link in this subsection) “Make your home and car smoke-free: A guide to protecting your family from secondhand smoke”
  Related Resource (link in this subsection) “Quit smoking”: a) Evaluation of Quit4Life Youth Cessation Demonstration Program (Table of Contents in A115); b) Quit4Life – 12 Month Follow-up Evaluation (Table of Contents in A116)

- **Health Canada National Campaigns**
  Location: Home → Healthy Living → Tobacco → Research → Mass Media and Advertising
  It contains TV Campaigns, Cinema AD, Radio Scripts, Print Campaigns.

- **Tobacco Regulations** regarding the manufacture, sale, labeling and promotion of tobacco products.
  Location: Home → Healthy Living → Tobacco → Legislation
• **Public Consultations**: overview of current public consultations for the Tobacco Control Program improvement (see list of consultations in A117).
  Location: Home → Healthy Living → Tobacco → Fast Finds → Public Consultations
• **Ministerial Advisory Council on Tobacco Control**: it advises the Minister of Health and the Tobacco Control Programme on strategic issues related to policies, legislation and research required for the effective implementation of the “Federal Tobacco Control Strategy”.
  Location: Home → Healthy Living → Tobacco → Fast Finds → Ministerial Advisory Council
• **Fact sheets for Media** (see List in A118)
  Location: Home → Healthy Living → Tobacco → Fast Finds → Fact sheets for Media
• **Reports and Publications** (see list in A119)
  Location: Home → Healthy Living → Tobacco → Fast Finds → Reports and Publications

**Site evaluation**
Content: appropriate and evidence-based information
Design: not very user friendly

29. [http://www.hon.ch/emash/page1.html](http://www.hon.ch/emash/page1.html) (in French and English)

Website of the **European Medical Association of Smoking and Health** (EMASH).

It was founded in 1988; its activity focuses on the role of health professionals in offering treatment and helping smokers **stop smoking**.


Website of **European Network for Smoking Prevention** (ENSP).

ENSP is an international non-profit organization created in 1997 under Belgium law. Its mission is to develop a strategy for coordinated action among organisations active in **tobacco control** in Europe by sharing information and experience and through coordinated activities and joint projects. National Coalition Representatives are listed in A120.

Interesting Sections:
1) **Gender** (Home → Actions → Gender)
   There are two reports: “Exposing the Evidence – Women and Second Hand Smoke in Europe”; “International Network of Women against Tobacco”
2) **Health Professionals** (Home → Actions → Health Professionals)
   There are seven **project reports**:
   a) “General Practitioners and the Economics of Smoking Cessation” (PESCE) – see summary in A121;
   b) “Health Professionals and Smoking Cessation II” (see List of Final Reports in A122);
   c) “Health Professionals and Smoking Cessation (II)”: a project presenting a European assessment tool to assess the quality of the strategies, policies and guidelines for smoking cessation combined with a European best-practice report and focuses on the positive role of health care professionals in smoking prevention and cessation.
d) “Health Professionals and Smoking Cessation (I)”: the project creates a network of health professionals and partnerships at country level in all Member States and also at European level to promote strategies on smoking cessation for health care providers.

e) “EUROSCIP III”: Motivational Interviewing for Health Professionals. It aims to develop a standardized questionnaire to measure smoking prevalence of pregnant women and make international comparison and develop cohort analyses.

f) “EUROSCIP II”: Its aim was to encourage health professionals to participate in identifying intervention strategies to reduce smoking in pregnancy as well as to prevent subsequent relapse.

g) “General Practitioners Empowerment (Phase II)”: Its aim was to develop European guidelines on how to train doctors to sensitize their awareness of patients smoking habits and provide them with evidence-based tools to help patients to quit.

3) HELP CAMPAIGN (Home → Actions → HELP campaign)
It is about the 2005 EU smoking prevention campaign. This campaign was directed especially at young people, non-smokers and those wishing to quit smoking. It was centered on three priorities: prevention; quitting; passive smoking. (pdf documents: HELP brochure, EC Questions and Answers; EC Memo, EC Press Information)

4) Hospitals (Home → Actions → Hospitals)
It is about the European Network of Smoke-free Hospitals and Maternity Services (ENSH). ENSH was created in 1996 with the goal to promote the policy of smoke-free hospitals in Europe.

5) Legislation Bars / Restaurants (Home → Actions → Legislation Bars / Restaurants)
“Non-Smokers Protection in Restaurant and Bars in Europe”
It is about a survey carried out among bar and restaurant owners in five European countries regarding protection from second-hand smoke in order to assess attitudes of professionals in this sector with regard to such protective measures. It also examines the economic impact of these protective measures.

6) Quitlines (Home → Actions → Quitlines)
It is about the “European Network of Quitlines” (ENC), created in 2000, with the main purpose to develop a code of practice model for all help lines across a wide range of health services, promoting a large-scale multidisciplinary and horizontal approach to disease prevention, treating addiction, lifestyle and behaviour management.

7) Second-Hand Smoke (Home → Actions → Second-Hand Smoke)
There are five project reports:

a) “Protecting Workers from Passive Smoke”.
   Its main purpose was to collect, develop and disseminate information across Europe to help workers negotiate smoking policies at work, with particular focus on those working in the leisure industry.

b) “Environmental Tobacco Smoke Health Impact Assessment”.
   A study examining exposure measurements among barworkers in Ireland.

c) “Environmental Tobacco Smoke Indicators”.
   Authoritative reviews over the past two decades have produced scientific evidence linking SHS (second-hand smoking) exposure to a number of adverse health incomes.

d) “Evidence-based Policy Development for the Prevention of Exposure to Passive Smoking”. Project aiming to quantify levels of SHS in workplaces in a sample of 6 Member Skates. The project results were intended to be useful to
raise awareness of ETC (Environmental Tobacco Smoke) and create a consensus to move ahead on policy development.

e) “Environmental Tobacco Smoke Exposure in a Sample of European Cities”
The project aimed to design and test an information system for measuring ETS exposure in order to monitor the progress of smoking control policies and to improve air quality across Europe.

8) Socio-Economic Inequalities (Home → Actions → Socio-Economic Inequalities)
   “Improved Monitoring in Support of Polices to Tackle Inequalities in Smoking”
The project aims to reduce smoking among disadvantages groups by developing recommendations for monitoring tobacco control policies in the EU.

9) Tobacco Control Resource Centre (TCRC) (Home → Actions → TCRC)
The TCRC works in partnership with national medical associations (NMAs) throughout Europe, providing them with support to inform their members, help patients and promote effective tobacco-related policies.

10) Tobacco Control Tools (Home → Actions → Tobacco Control Tools)
   “Measuring Tobacco Control from the General Population Perspective”.
   This study includes development of a measurement tool for tobacco control activities.

11) Working with Communities (Home → Actions → Working with Communities)
    A mapping exercise was carried out to develop an understanding of the scope and range of current activities taking place across Europe relevant to this action.

12) EU Policies (Home → Actions → EU Policies)
    a) “European Trends towards Smoke-free Provisions”
       Summary of the latest developments regarding smoke-free workplace legislation in Europe.
    b) “Implementation of EU Tobacco Advertising Directive”
       Summary of implementation status of the EU Tobacco Advertising Directive.
    c) “Regulations of Sale of Tobacco Products to Minors in Europe”
       Summary of status of regulations governing the sale of tobacco products to minors throughout Europe.

13) In the spotlight (Home → Trends → In the Spotlight) – see A123
    “Smoke-free railways in Europe” (2007)
The document shows which European countries operate smoke-free long-distance trains.

14) European Trends (Home → Trends → European Trends)
    “Smoke-free railways in Europe” (2007)
The document shows which European countries operate smoke-free long-distance trains.

15) Publications (Home → Publications)
    a) ENSP Reports – see A124
    b) Library – see A125
    c) National documentation – see A126

Site evaluation
Content: appropriate and evidence-based resources about projects and policies for Tobacco control in Europe.
Design: the site structure is very simple and accessibility to resources very easy.

Website of **Tobacco Control Supersite** – University of Sydney – Australia.

Its main purpose is to provide access to a wide range of information relevant to smoking prevention and control in Australia. The site provides access to electronic copies of many important documents and the research output of the teams.

Interesting Sections:

- **Resources** (Home → Resources)
  It contains links to important reports of other resources such as the Tobaccopedia and the Picture Gallery.
  The included subsections are listed in A127.
  Interesting items:
  a) **Smoking Cessation** → QuitTIP Database. The Quitting and Reducing Tobacco Use Inventory of products database. It includes over 100 products with evidence-based information on their effectiveness.
  b) **Environmental Tobacco Smoke** (ETS).
  It contains papers and reports on Secondhand Smoke and Smoke-free Laws.
  There are 31 topics organized into six main sections: Prevalence and Health, Costs of Tobacco, Tobacco Trade, Promotion, Taking Action and World Tables. (Tables of contents in A128)

- **Tobacco Control Journal** (Home → Tobacco Control Journal)

- **Picture Gallery** (Home → References → Picture Gallery)
  Interesting items: Anti-Smoking posters, Health effects (terrible photos!), Pack Warnings (picture based warnings around the world).


A broad-based coalition fighting for smokefree air.
Available resources are not evidence-based.
It contains "Action Alerts" in Canada, Alaska and several states of U.S.


Website of **National Conference on Tobacco or Health** (NCTOH).

It will be held in Arizona on June 2009, with the purpose to improve and sustain the effectiveness and reach of tobacco control programs and activities in the United States.
The Program of the Conference is available.
34. http://www.mascotcoalition.org

Website of Multicultural Advocates for Social Change On Tobacco (MASCOT).

It focuses on empowering New Mexicans, particularly minority and youth populations, to live a healthy, non-abusive lifestyle.

Interesting Sections:
• Education (Papers, fact sheets, statistics to prevent smoking amongst youngsters – Table of contents in A129).
• Cool facts: important facts you should know about tobacco (see List in A130).

Location: Home → Current Initiatives → Cool Facts.

Site evaluation: a good source of divulgate material.


The Campaign for Smokefree Air (CSA) is a grassroots coalition to creating smoke free workplaces, including restaurants and bars in Michigan. It is focused on secondhand smoke harms.

Interesting Sections:
• Know the facts (Health Statistics, Impact on Business, Key messages).
• Smokefree Progress (state actions to ensure smoke free air in U.S.A., Michigan, Around the World): concise key information is provided.
• Resources: Reports and other information (smokefree advertisements, Air Quality Tour, videos, etc.) – see titles in A131.

36. http://www.health.state.ny.us/

Website of the New York State Department of Health Tobacco Control Program (NYTCP).

They implement evidence-based and promising strategies to prevent and reduce tobacco use. The Program began in January 2000, and is built on a foundation of community partners using evidence-based strategies from the Guide to Community Preventive Services to decrease tobacco use. Over time, the program has effectively implemented a strong clean indoor air law, maintained support for high tobacco taxes, and worked to increase access to effective Cessation Services and motivate smokers to try to quit.

Location: Home → Current Issues → Smoker's Quit Line.

In Section dedicated to Tobacco, the following resources are available:
1) Tobacco Control Community Partners (list in A132).
2) Current Policies (list in A133).
3) Program Components (list in A134).
4) Brochures, fact sheets and Reports (list in A135).

Site evaluation: interesting initiatives at local level and good source of evidence-based information and implementation.
Website of the **Australian Government** dedicated to **The National Tobacco Campaign**.

It is designed to reduce the level of tobacco use among Australians, is aimed directly at **smokers** (both young and adults) and provides information and further resources on successful **quitting**.

Interesting sections, all accessible from home page:

1. **National Tobacco Youth Campaign**, that aims to contribute to a reduction in the uptake and prevalence of smoking among young Australians (Youth Campaign Material – see list in **A135bis**; Youth Campaign Merchandise – 2 posters; Tobacco smoke is toxic – see **A136**).
2. **Graphic Health Warnings**, on tobacco product packaging, in order to increase knowledge of the **health effects related to smoking**, to encourage quitting and to discourage relapse of smoking initiation. In this section warning **images** (terrible!), posters and brochures are available.
3. **National Tobacco Campaign with a new approach**: instead of focusing on abstract concepts like risk and probability, this campaign provides **graphic images** of the damage cigarettes can contribute to a smoker's health – see **A137**. There are also television and radio advertisements.
4. **Archives**: this section contains archived documents for historical purposes, including Media Releases, Reports, Campaign Reports and previous campaign activities – see **A138**.
5. **Smoking and your body**: **health effects** of smoking (**A139**).
6. **Quitting**: resources to help people to quit (getting help, tools, links to State and Territory offices).

**Tools** are very helpful: Self-help Quit Booklet, Smoking Diary, Quit Coach).

**Site evaluation**

Information is well organized, efficient and with strong impact for smoking cessation. It is a good source of many videos and images against smoking.

**Design**: very simple, user friendly.

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It contains Health Science **Educational Activities** for Educators and Students, such as: Tools for Parents and Teachers, Tools for Kids, Tools for Teens, Tools for the Community.

In each of these tools a section is dedicated to "Tobacco & Inhalants".

The site contains comprehensive lesson plans, interactive games and activities, webquests and more.

It is a website created by the British Columbia Government in Canada.

The strategy includes prevention programs, cessation, programs and protection from tobacco through legislation and the support of tobacco control by laws. The core idea of this site is to give people facts about tobacco, through information, damage images, games, educational materials and other.

There are the following sections:
1) Quitting (why is using tobacco so addictive, when smokers quit: the health benefits).
2) Tobacco Truth (what's in a cigarette smoke, what tobacco does, spit and chew tobacco) – there are strong photos and stories on smoking damages.
3) Second-Hand Smoke (Consequences, living smoke-free).
4) Parents: resources for parents.
5) Teachers: each level of the resource explores five themes (effects of tobacco use, social norms, reasons for using tobacco, social influences, resistance skills) in greater breadth and depth as the programs progresses through the grades (primary, intermediate, secondary).

Orderable resources are listed in A140.

Site evaluation: a good source of educational and divulgative material.


Website of the Virginia Group to Alleviate Smoking in Public (GASP).

It is a non profit all volunteers organization. They achieved the first no-smoking law in Virginia (1990). See the brochure outlining this law in A141.

There are some interesting resources on secondhand smoke and other items, but the site design is really bad and available resources not particularly relevant.


Website of American Medical Student Association.

It is a student-governed, national organization committed to representing the concerns of physicians-in-training.

"Tobacco use" is included in priority issues - Section Community and Public Health. Action against Tobacco (see List of items in A142) aims to strengthen the smoke-free initiative.

Interesting educational and activism resources are provided in pdf printable documents (A142).

"Tobacco Awareness Program" is a tool to teach kids about Tobacco (A144).
"Stamp Out Smoking" is a handbook containing background information n tobacco and smoking, historical information, pending legislation, project ideas, contact information and useful web sites (cover in A145).
"Tobacco Use – Health Dialogues" is a tool to help Professionals and their patients change unhealthy behaviour (cover in A146).
42. http://www.cancer.org/

Website of the **American Cancer Society**.

Home Page → Find It Fast → Guide to **Quitting Smoking**.

Information and Resources of this site are printed in **A143** and are focused on successfully quitting issues.

43. http://www.fightwithfact.com/

Website of **Fighting Against Corporate Tobacco (FACT)**.

It is a youth-led movement that takes action and created change, by exposing Big Tobacco's dirty secrets and deceptive practices. They focus on Wisconsin population.

Interesting Sections:
- **TV spots** – how to recognize Big Tobacco's advertising tricks.
- **Links** – including: Big Tobacco sites, Youth-led organizations, Tobacco facts, Wisconsin resources, Quit smoking support.

44. http://www.inwat.org/

Website of the **International Network of Women Against Tobacco (INWAT)**.

It is a global network of tobacco control specialists dedicated to achieve improved health and greater equality among **women** and girls in the world by eliminating tobacco use and exposure.

Interesting sections:
1) **Country profiles** that contain specific information about women and tobacco: Belgium, Finland, Germany, Netherlands, Sweden (Belgium profile as an example in **A147**).
2) **European fact sheets**: they summarize data about European women and smoking.
   - Main items: why work on women smoking;
   - key points;
   - how much are women smoking;
   - risk of illness;
   - sexual health;
   - health and well being;
   - environmental tobacco smoke;
   - stopping smoking;
   - other campaigns;
   - young women and smoking.
3) **Reports** produced by INWAT:
   - Searching for the Solution: Women, smoking and inequalities in Europe 2003 (**A149**).
   - Part of the solution? Tobacco Control Policies and Women, 1999 (**A150**).
Website of the **Office of Tobacco Control** (OTC) - Ireland.
The establishment of an Office of Tobacco Control is one of the measures put forward in the Report "Towards a Tobacco Free Society" published in 2000 (see Cover and Table of Contents in **A151**) which was adopted as Government policy, purposes an integrated strategy for tackling the tobacco problem and promoting a tobacco free society.

**Interesting sections:**
- **Legislation** (National Law and International Law)
  In subsection **International Law** the **EC Directive** 89/552/EEC and 2001/37/EC are available, both concerning tobacco related regulation and recommendations.
  In subsection **Global** the "WHO Framework Convention on Tobacco Control" (2003) is available.
- **Tobacco Control** (Addiction, Environmental Tobacco Smoke and Economics).
- **Research** (Cigarette Smoking Trends and Research Programmes).
  In subsection **Cigarette Smoking Trends**, interesting and well sorted statistics on smoking population are available.
  In subsection **Research Programmes** three papers are available:

**Site evaluation:**
user’s friendly design; interesting country initiatives and good recommendations.


Website of the **World Lung Foundation** (WLF).
The WLF works in partnership with organizations throughout the world that share mission of improving lung health. They have three principal areas of activity: Research (tobacco prevention and control included), Public health programs and initiatives, Education and training related to lung health.

**Interesting sections:**
- a) **Image Library** → Tobacco Image Resources.
- b) **Resource Library** → Tobacco Control Mass Media Resource.
  A selection of effective tobacco control **mass media** ads suitable for adaptation and use in low-and middle-income countries.
  - **Personal Consequence Ads**, illustrating negative **impacts of smoking**.
    Videos and key messages for Artery, Brain, Lung, Tar, Tumor, Bubblewrap, Sponge, Voice Whiting, Cigarettes are eating you alive, fatty deposits, worse parents.
    All of these resources cause a strong emotional impact.
  - **Testimonial Ads** feature real victims of tobacco use (videos).
  - **Secondhand Smoke Ads** which highlight the damaging effects of exposure to **secondhand smoke**. Videos and key messages included are: Nobody Smokes Here Anymore, Office, Pub, Still Want to Breathe it?, Cigarettes are eating you Baby, One Lung, Your Health is your Wealth.
- c) **Guidelines** for planning and implementing mass media advertising campaigns (**A152**).

**Site evaluation**
Relevant material (videos, key messages) useful for anti-smoking campaigns.
Website of the Canadian Council for Tobacco Control (CCTC).


1. **Cessation**
   - **Self Help-Interactive**: websites focused on help people to quit smoking (A1).
   - **Self Help-Publications**: books, pamphlets, and other printable resources to help people quit (A2).
   - **Community Programs**: links to cessation initiatives at the community level (A3).
   - **Workplace Health**: cessation programs designed to be implemented in the workplace (A4).
   - **Women**: information aimed at helping women quit (A5).
   - **Policies and Evaluation**: policy documents regarding and evaluation of various cessations strategies (A6).
   - **Better Practices**: evaluated cessation programs (A7).
   - **Harm Reduction**: information discussing the concept of harm reduction as well as the role it could play in reducing morbidity and mortality due to tobacco use (A8).
   - **The Research**: primary and secondary research (A9).

2. **Denormalisation**
   - **FAQ**: what you need to know about denormalization in Canada (A10).
   - **Economic impacts of smoking** (A11).
   - **Impact of Smoking on Health care**: smoking negative affects the Canadian health care system (A12).
   - **Industry Denormalization**: links to sites that examine several of the tactics used by the tobacco industry to appear trustworthy (A13).
   - **On Screen**: sites looking at the role smoking plays in movies (A14).
   - **Counter-marketing**: links to media campaigns that have run throughout the world (A15).
   - **Packaging**: information about the effectiveness of controlling product packaging in tobacco control (A16).
   - **Policy issues**: looks at the influence of tobacco industry on policy (A17).
   - **Youth Campaigns**: denormalization initiatives whose aim is to get youth thinking critically (A18).
   - **The Research**: seminal works about denormalization (A19).

3. **Prevention**
   - **FAQ**: what you need to know about tobacco use prevention (A20).
   - **School-based Programs**: classroom and school-wide programs and research about them (A21).
• **Community-based Programs**: programs designed for implementation at the community level (A22).
• **Comprehensive Programs**: Canadian and state-wide programs that include different types of initiatives (A23).
• **Counter Marketing**: marketing programs aimed at educating youth about the tobacco industry (A24).
• **Legislation and Enforcement**: legislation aimed at preventing tobacco use initiation (A25).
• **Taxation**: an array of links to reviews of the effectiveness of cigarette taxes (A26).
• **Better Practices**: evaluation of various prevention programs (A27).
• **The Research**: important studies on prevention (A28).

4. **Protection**
• **FAQ**: what you need to know about secondhand smoke, or environmental tobacco smoke (ETS), (A29).
• **Homes and Cars**: links to resources for protecting your home and car environments from secondhand smoke (A30).
• **Workplaces**: information about smoking restrictions and bans where people work (A31).
• **Public places**: information about SHS in outdoor and indoor public places (A32).
• **Policies**: links to reviews of and guide books on how to create smoke-free spaces (A33).
• **Bylaws**: selected websites giving examples of Canadian bylaws and bans of smoking (A34).
• **Better practices**: evaluated initiatives for protection against secondhand smoke (A35).
• **The Research**: studies about general effects of SHS, as well as its effects on various body parts, children and animals. Also includes evaluations of smoke-free policies (A36).

5. **Frameworks and Strategies**: it is a Subject Index providing in-depth access to all tobacco frameworks and strategies in Canada, at the Federal, national and provincial / territorial levels.

6. **Canadian Law and Tobacco**: a resource designed to provide users with full access to major tobacco control laws in Canada including federal, provincial and territorial legislation.
• **Analysis of Canadian laws**: they are classified in a) Restrictions on Promotion, Advertising and Sponsorship; b) Restrictions on Packaging and Labeling; c) Point of Sale Restrictions; d) Restrictions on Manufacturers and Distributors; e) Restrictions on Smoking.
• **Legislation by Region**

7. **Advice for Health Professionals**
• **Doctors**: information for doctors (A37).
• **Nurses**: information for nurses (A38).
• **Dental professionals**: information for dentists and dental hygienists (A39).
• **Pediatricians**: policy regarding resources for interventions and prevention (A40).
• **Physiotherapists/OTs**: information for intervention (A41).
• **Mental Health Professionals**: policy and resources for psychiatrists and psychologists (A42).
• **Respiratory Therapists**: how to help patients quit smoking (A43).
• **Pharmacists**: cessation information, policy and research for pharmacy technicians (A44).
- Guidelines: better practices for health professionals promoting cessation and treating tobacco dependence (A45).
- Interventions: resources for use in smoking interventions (connection refused).
- Research: evidence-based studies and literature reviews regarding the effectiveness of health professional intervention (connection refused).

8. Tobacco Control Reference Catalogue
The TCRC is a collection of over 25,000 items of references to tobacco control resources: journal articles, books, reports, pamphlets, posters, videos, kits, programs, organizations.
Interesting collection of video recordings, DVD, kits, slides, posters, etc. in website: [http://www.cctc.ca](http://www.cctc.ca), from home first open Tobacco Control Reference Catalogue and the Posters, Videos, Kits, etc. (A53). An example of truth about tobacco is shown in (A54).

9. Heather Crowe Resource Centre
It is a campaign to protect all workers from secondhand smoke. Physicians for a Smoke-Free Canada (Ontario), website [http://www.smoke-free.ca/](http://www.smoke-free.ca/)

10. Powerwalls: they are tobacco products displayed behind the service counter in retail stores. Powerwalls send a message to children and youth that tobacco is a harmless and socially acceptable product: they normalize tobacco. Interesting to see: The Research (A46).

11. Industry Watch
- FAQs: market information and statistics about the industry in Canada and abroad.
- Products: links to information about content and packaging of cigarettes (A47).
- Internal Documents: where to find documents written by the industry for the industry (A48).

12. Media Room
- Fact sheets: a very quick overview of each topic, providing all the most important details in one-two pages (A49).
- Backgrounders: they offer a more comprehensive overview of a topic, for a more solid base of knowledge (A51).

**Site evaluation:** Information is well organized; user's friendly design.


**Website of MedlinePlus.**
It brings together authoritative information from National Institutes of Health (NIH) and other government agencies and health-related organizations. It also has extensive information about drugs, an illustrated medical encyclopedia, interactive patient tutorials and latest health new.
From home page → Health Topics → letter "S".
There are five subsections with interesting links about:

a) Smokeless Tobacco (also called chewing tobacco) – List in A153
b) Smoking (also called Cigar smoking, cigarette smoking, Pipe smoking, Tobacco smoking) – List in A154
c) Smoking and Youth (also called Teen smoking) – List in A154
d) Smoking Cessation (also called Quitting smoking) – List in A155
e) Smoking in Pregnancy – List A157
Most of available resources are from other websites, above reviewed.
From Home page → Encyclopedia → letter "S".
Smoking and Smokeless tobacco.
- **Illustrations**: a) tobacco and vascular disease, b) tobacco and chemicals, c) tobacco and cancer, d) secondhand smoke and lung cancer, e) respiratory cilia, f) tobacco health risks.
- **Information**: a) the effects of nicotine, b) health risks, c) secondhand smoke, d) time to quit, e) the benefits of quitting, f) when to contact a medical professional.

49. [http://www.tarwars.org](http://www.tarwars.org)

Website from the **American Academy of Family Physicians**; it contains a tobacco-free education program for kids.

The mission of Tar Wars is to educate **students** about being tobacco-free, provide them with the tools to make positive decisions regarding their health and promote personal responsibility for their well-being. They utilize a community-based approach to mobilize family physicians, educators, and other health care professionals.

Interesting sections:
1) **For Kids and Parents** (information for parents, secondhand smoke, smokeless tobacco) these are short documents with key information
2) **National Conference** to be held on July 2009 – Washington DC
3) **For Coordinators** (training material for coordinators who are responsible for the organization, operation, and administration of Tar Wars in their state.


Website of **National Institute of Dental and Craniofacial Research** (NIDCR).

From home page → Oral Health → Topics → Spit
Information on **spit tobacco**, also known as dip and chew, snuff, chewing tobacco and smokeless tobacco.

**Publications:**
- Spit Tobacco: A Guide for Quitting

51. [http://www.trinketsandtrash.org](http://www.trinketsandtrash.org)

Website of the **Trinkets & Trash Collection**: artifacts of the Tobacco Epidemic.

It contains current and historic examples of **tobacco products**, promotional items, tobacco marketing materials and advertising. The collection is available to public health practitioners and the general public, providing easily searchable, high-quality digital images.

52. [http://www.helpguide.org](http://www.helpguide.org)

Website created by the **Rotary club of Santa Monica**.

Help guide’s mission is to empower you and your loved ones to understand, prevent, and resolve health challenges.

Home → Abuse&Addictions → Addictions **Quitting Smoking**

It is an article with 5 paragraphs (why quitting seems so hard, creating your personal stop smoking plan, tips to quit smoking and manage cravings, finding help to quit smoking, and what to do if you relapse).

It also contains related links for quitting smoking, most of them already included in the present report.
53. **http://www.naquitline.org**

Website of the **North American Quitline Consortium (NAQC)**.

The NAQC seeks to unite health departments, quitline service providers, researchers and national organizations in the United States and Canada to enable these quitline professionals to learn from each other and to improve quitline services. Resources are available to members of the Consortium.

54. **http://www.cancer.gov**

Website of the **National Cancer Institute (NCI) – U.S.**

Home → Cancer Topics → Prevention, Genetics, Causes → Tobacco Information

1) **Smoking Home Page**: Free help to quit smoking, plus information on smoking and cancer, secondhand smoke, cigarettes and other tobacco products, tobacco research, and statistics (List in A158).

2) **Smokeless Tobacco**: NCI's gateway for information about chewing tobacco and snuff (List in A159). Interesting monograph "Smokeless Tobacco or Health: An International Perspective" (413 pages document – table of contents in A160). Interesting paper "**Smokeless Tobacco Fact Sheets**: 3rd International Conference on "Smokeless Tobacco" – Includes information about the brand and common names of smokeless tobacco products, their geographic location of use, their constituents, how the products are used, who primarily uses them, and the manufacturing processes.

55. **http://www.ttac.org**

Website of the **Tobacco Technical Assistance Consortium (TTAC).**

The TTAC is dedicated to assisting (national, state or community-based) organizations in building and developing highly effective tobacco control programs. They provide technical assistance, customized training, tools and products.

- **Products and Tools** are listed in A161 and A162.
- **State Information**, including website resources that are specific to state issues related to tobacco control. These resources are organized in the following three categories: General Program and Policy Resources (A163), Searchable Databases (A164) and State-Related Agencies (A165).
- **Tobacco Control Network (TCN)** is comprised of the tobacco control program managers and additional staff from each state, territory, and D.C. In subsection **Useful Resources**, some interesting links are provided (almost all already included in this report). The full document of "Fundamentals of Smoke free Workplace Laws" is printed in A166.

56. **http://isptid.globalink.org**

Website of the **International Society for the Prevention of Tobacco Induced Diseases (ISPTID).** – Headquarters in Essen – Germany.

It is a not-for-profit, academic, scientific and humanitarian organization of health professionals and scientists, independent from any industrial, political, governmental, or ideological group.

Home → The facts: Oral fact sheet "Diseases and Conditions of the Oral Cavity Caused or Worsened by Tobacco Use.

They publish the TID (Tobacco Induced Disease) Journal.
57. http://talc.phi.org

Website of Public Health Law & Policy (phlp): Technical Assistance Legal Center (TALC).

The TALC funded by the California Department of Health Services, provides California communities with free technical assistance on tobacco control policy issues. TALC is a project of Public Health Law & Policy and the Public Health Institute. In section Publications two topic Areas are dedicated to Tobacco:
1) Secondhand Smoke (see List in A167)
2) Tobacco Laws Affecting CA (booklet)


Website of California's Clean Air Project (CCAP).

CCAP provides secondhand smoke specific technical assistance, training and educational materials statewide. Resources available:
• home → Secondhand smoke resources
  CCAP is working towards eliminating secondhand smoke exposure in California. SHS resources contain valuable information to assist SHS work in communities. The section is divided into five categories, from existing areas of concern, e.g. bars and restaurants, to evolving areas like multifamily housing and casinos.
  a) Indoor Workplaces (see List in A168)
  b) Outdoor Tobacco Smoke (List in A169)
  c) Multifamily Housing (List in A170)
  d) Casinos (List in A171)
  e) Military bases (List in A172)
• home → Trainings
  CCAP offers trainings in all aspects of SHS, ranging from one person trainings and presentations to teleconferences and web based trainings including the following areas:
  - Smoke-free apartments and condominiums
  - Smoke-free tribal casinos
  - Hookah bars/cafés
  - Compliance and enforcement with smoke-free outdoor workplace laws, i.e. entryways, dining areas
  - Outdoor tobacco smoke in public areas
  - Compliance and enforcement with smoke-free indoor workplace laws including LC6404.5
  - Active military
  - Advocacy
  Paper: Air Monitoring Protocol (A173)
Website of the **Ontario Tobacco Research Unit** (OTRU).

The OTRU is an Ontario-based research network that is recognized as a Canadian leader in tobacco control research, monitoring and evaluation, teaching and training and as a respected source of science based information on tobacco control. It was funded by the Ontario Ministry of Health in 1993.

**Interesting Resources:**

- **Home → Research → Priorities**
  In support of the *Smoke-free Ontario Strategy*, OTRU has identified these themes: a) smoke-free Ontario Campaign, b) measuring impact of interventions at an individual, community and school level, c) burden of illness, d) tobacco pricing, e) understanding the smoker, f) next generation of tobacco control strategies (detailed listing in A174).

- **Home → Research → Ontario Tobacco Survey**
  This is a provincial longitudinal survey of non-smokers. The study results will identify additional needs of smokers to help them quit and thus further reduce smoking rates in Ontario.

- **Home → Research → Activities**
  They are aligned with five strategic themes: 1) who are today’s smokers, 2) factors influencing tobacco use and cessation, 3) smoking outdoors and in private places, 4) availability, 5) ending the epidemic developing the evidence base for the future policy agenda.

- **Home → Evaluation → Strategy Monitoring**
  Each year, OTRU produces a series of monitoring reports (A175).

- **Home → Evaluation → Program**
  OTRU conducts formative and outcome evaluations (A176).

- **Home → Training → Overview**
  To involve students and graduates in order to develop the next generation of researchers and practitioners with a commitment to tobacco control.

- **Home → Resources → Current abstracts**
  January 2009 list of selected journal articles in A177.

- **Home → Resources → Reading Lists**
  The reading lists focus on hot topics in tobacco control, to help starting research and information needs. They provide a selection of journal articles, online reports and other web-based material.
  - Youth and Tobacco Use (A178)
  - Secondhand Smoke (A179)
  - Smokeless Tobacco (A180)

- **Home → Resources → Monitoring Reports**
  The reading list is given in A181.

- **Home → Resources → LEARN (A182)**

- **Home → Resources → Databases**
  It is a directory of public use data on tobacco use in Canada, prepare to help researchers and students locate high quality Canadian data on smoking and tobacco.
  Cover and table of contents in A183.

**Site evaluation**

Subsections are well organized with easy access to links of specific issues. Information is clear, evidence-based.
60. http://www.tern.org/

Website of Tobacco Etiology Research Network (TERN) – University of Kentucky.

It was funded by Robert Wood Johnson Foundation with the purpose to better understand and prevent the tobacco dependence. It will map etiologic pathways of tobacco dependence, in order to help scientists and practitioners in reducing the toll of tobacco dependence.

- Home → Publications
  Several publications have been produced and are listed in A184.
  "The Smoking in College Freshmen – Up TERN Technical report" (cover and table of contents in A185).


It is about the Tobacco Use Behavior Research.

The California Tobacco Surveys (CTS) conducted by the California Department of Health, to collect representative statewide data on cigarette smoking behavior, attitudes towards smoking, media exposure to smoking, and use of tobacco products other than cigarettes, from adults and teenagers living in California. These surveys are conducted approximately every three years through contracts with the University of California, San Diego (UCSD) and Westat, Inc. Available reports are listed in A186.


Website of the Population Health Research Group (PHR).

The PHR mission is to help scientists and decision makers design, test and disseminate leading edge research to improve public and population health.

- Home → Projects
  2) Title: The International Tobacco Control Project (2002-2007) – A188
  3) Title: Project Impact – Youth and Tobacco (2003-2007) – A189
     The project materials and publications (in French and English) are available in website: www.projectimpacting.ca.
  4) Title: Implementing the 2006-2007 Youth Smoking Survey (2006-2007) – A190
  5) Title: Improving the Population Impact of Telephone-based Counseling for the Treatment of Smoking (2001-2007) – A191
  8) Title: Evaluation of the Canadian Cancer Society's Smokers' Helpline (2005) – A194
11) Title: Provincial Scan of Tobacco Use Prevention Initiatives 2004-2005: Health Department Survey (2005) – A197


- Home → Products and Presentations
  1) Title: A Low-Cost, Practical Method for increasing Smoker's Interest in Smoking Cessation Programs (2007) – A199
  2) Title: Helping Youth to quit smoking: What does research suggest? (PowerPoint presentation)
  3) Title: Using Common Indicators to improve your tobacco control initiatives (PowerPoint presentation)
  4) Title: What are the exciting areas in tobacco control research? – A200

63. [http://www.who.int/tobacco/](http://www.who.int/tobacco/)


**Project: Tobacco Free Initiative (TFI):**

It was established in July 1998 to focus international attention, resources and action on the global tobacco epidemic.

It provides global policy leadership.

It encourages mobilization at all levels of society.

It promotes the WHO Framework Convention on Tobacco Control (FCTC).

TFI is part of the No communicable Diseases and Mental Health (NMH) cluster at WHO headquarters (HQ) in Geneva. They work closely with regional advisers to plan and implement all activities.

Most of TFI's major activities are coordinated by its regional offices and decentralized to country level.

Important events and reports:

1) **World NO Tobacco Day, 31 May 2009** focused on Tobacco Health Warning (A201).

2) The 14th **World Conference on Tobacco Or Health** (WCTOH), scheduled to take place in Mumbai – India on 8-12 March 2009. The theme is Global Tobacco Control: multisectoral approach to tobacco control: Policies, Pathways, Partners and People (A202).

3) **Fourth Meeting of the WHO Tobacco Laboratory Network** (TobLabNet), Rio de Janeiro, 25-27 March 2009. It is a global network of government, academic and independent laboratories aiming to strengthen national and regional capacity for the testing and research of the contents and emissions of tobacco products, in accordance with Article 9 of the WHO Framework Convention on Tobacco Control (A203).

4) WHO Report on the Global Tobacco Epidemic, 2008 – The **MPOWER package**. It is the first comprehensive analysis of tobacco use and control efforts. The report outlines the MPOWER package, a set of six tobacco control measures that reflect and built on the WHO Framework Convention on Tobacco Control (in A204 cover and table of contents) ([http://www.who.int/tobacco/mpower/en/](http://www.who.int/tobacco/mpower/en/))

5) **Fact file**: 10 facts about tobacco and second-hand smoke (A205).

6) **WHO Framework Convention on Tobacco Control**: a powerful tool (A206) ([http://www.who.int/fctc/en/](http://www.who.int/fctc/en/))

7) Research and Policy development.
Policy recommendations are developed based on research promoted by scientists and health experts collaborating with TFI. Recommendations cover different topics such as:

- Smoking cessation \((A207), (A208)\)
- Second-hand tobacco smoke:
  - Protection from exposure to second-hand tobacco smoke (cover + table of contents in \(A209\)) –
- Youth and Tobacco \((A210)\) and \((A211)\): World NO Tobacco Day 2008 – Tobacco Free Youth 
  - Tobacco and the rights of the child \((A212)\)
  - International consultation on Environmental Tobacco Smoke (ETS) and Child Health \((A213) – \text{http://www.who.int/tobacco/research/en/ets_report.pdf}\)
- Gender and tobacco
  - Monograph "Women and the Tobacco Epidemic"
    - \((A215): \text{http://www.who.int/tobacco/research/gender/about/en}\)
- Economics
  - Curbing the Epidemic: Governments and the Economics of Tobacco Control, 1999, The World bank –
  - Interventions to reduce tobacco consumption \((A218)\)
- Legislation \((A219)\)
  - Best Practices in Tobacco Control Earmarked Tobacco Taxes and the Role of the Western Australian Health Promotion Foundation (Healthway) – \((A220)\).
  - Taxation reform as a component of tobacco control policy in Australia \((A221)\).
  - Tobacco taxation and smuggling control: New Zealand \((A222)\).
  - Report on Smuggling Control in Spain \((A223)\).
  - Report on Tobacco Taxation in the United Kingdom \((A224)\).
  - Tobacco Excise Taxation in South Africa \((A225)\).
  - A report on Smoking Advertising and Promotion Bans in the Islamic Republic of Iran \((A226)\).
  - Norway: Ban of Advertising and Promotion \((A227)\).
  - Thailand County Report on Tobacco Advertising and Promotion Bans \((A228)\).
  - Report on Smoke-free Policies in Australia \((A229)\).
  - Report on national policies on tobacco smoke-free environments in Chile \((A230)\).
  - Country Reports on Smoke-free policies in Canada \((A231)\).
  - Smoke-free Policies in New Zealand \((A232)\).
  - Successful Use of Smoke-free Policies in Tobacco Control in Estonia \((A233)\).
  - Smoke-free Spaces in Costa Rica \((A234)\).
  - New Zealand: Effective Access to Tobacco Dependence Treatment \((A235)\).
  - Tobacco Dependence Treatment in England \((A236)\).
  - Access to Smoking Cessation in Costa Rica \((A237)\).
  - A Report on Effective Access to Tobacco Dependence Treatment (TDT) in Hong Kong Special Administrative Region \((A238)\).
  - The Surveillance and Monitoring of Tobacco Control in South Africa \((A240)\).
  - Surveillance and Monitoring in New Zealand \((A241)\).
  - WHO Collaborating Centres for Tobacco Control \((A242)\).

- Tobacco: deadly in any form or disguise (2006)
  http://www.who.int/tobacco/communications/events/wntd/2006/Tfi_Rapport.pdf
- The Millennium development goals and tobacco control (2005)
  http://www.who.int/tobacco/publications/mdg_final_for_web.pdf

64. http://www.brit-thoracic.org.uk/


In March 2006 the BTS held a conference for stop smoking professionals, where it was decided to establish a new Association: the British Association for Stop Smoking Practitioners (BASSP). BASSP is intended to be run by practitioners for practitioners, through membership subscription. The BASSP Statement on Minimum Standards for Training for Stop Smoking Practitioners is printed in A244. Education programs are listed in A245.


It contains the Cochrane Tobacco Addiction Group Reviews. List of available articles in A246.


Website of Office Français de prévention du Tabagisme (OFT), Paris.

Interesting resources on tobacco dependence prevention:
- Home → Tout savoir sur la tabac (comprehensive information on tobacco) → Les cédéroms.
  - Nicomède: CD-ROM containing national database for health practitioners.
  - Nicocoeur: CD-ROM produced in collaboration with French Federation of Cardiology. Training material for cardiologists to treat the tobacco dependence.
  - Nicojeunes: CD-ROM containing national database for health practitioners, focused on youth tobacco dependence.
  - Nicotrivail: database for tobacco at workplaces (pdf document).


Website of Centro Studi Ricerca e Documentazione su Dipendenze e Aids (Ce.S.D.A.).

It is a department of Toscana Region, center of studies, research and documentation on dependences and HIV. Interesting book: PSICOLOGIA DEL FUMO – Programmi di prevenzione e metodi per smettere, 2008 (Paola Gremigni editor).

Website of the **BADvertising Institute**.

It provides "honest" images of tobacco advertising in response to tobacco industry advertising tactics through slide shows, posters and workshops. Interesting section: What you need to know, containing immediate access to tobacco-related issues and information (see list in A247).

69. http://www.sctr.sk.ca/

Website of **Saskatchewan Coalition for Tobacco Reduction (SCTR)** – Canada.

Its mission is to advocate, coordinate and educate to ensure a tobacco-free Saskatchewan for all its residents.

Interesting sections:
1) Home → Prevention (List in A251)
1a) Best practices in Tobacco Control (A248)
1b) Building on success: Reducing Tobacco Use in Saskatchewan 2008-2010 (A249: cover and contents)
1c) Tobacco-free School Zones in Saskatchewan (A250: cover and contents)


Website of **Non-Smokers' Rights Association (NSRA)**.

It is a voluntary non-profit health organization that has worked exclusively in the field of tobacco control for over 30 years. Its mission is to promote public health by eliminating illness and death caused by tobacco, including second-hand smoke.

The articles and reports available in key topics sections are listed below:

**Advertising / Promotion**

The marketing of tobacco products in 2007: The return of cigarette advertising

L'évolution des stratégies de marketing des compagnies canadiennes de tabac
*Article only available in French*

The changing face of tobacco marketing in Canada: new federal rules, new industry tactics

**Legislation**

Appearing Soon in a Place Near You: Health Impacts of Comprehensive Smoke-Free Legislation

The changing face of tobacco marketing in Canada: new federal rules, new industry tactics

**Tobacco Industry Denormalization**

Campaign for Tobacco Industry Denormalization: A letter to Health Minister Ujjal Donsanjh
Health Authorities Urge Governments To Tell The Truth About The Tobacco Industry

Tobacco Industry Denormalization: Telling the truth about the tobacco industry’s role in the tobacco epidemic

Government-commissioned report supports health community calls for more hard-hitting advertising campaigns

Report Recommends Health Canada Target “Lies of the Tobacco Industry” in Mass Media Campaign

Health Canada urged to use ads to target ‘manipulative, scheming’ tobacco industry

**Litigation Watch**

Tobacco-Related Litigation in Canada (2008 edition)

Tobacco-related Litigation in Canada (2007 edition)

Tobacco-related Litigation in Canada (2006 edition)

Tobacco-related Litigation in Canada (2005 edition)

Recovery of health-care costs

Federal government hits speedbump in lawsuit on smuggling

Federal government files civil lawsuit against RJR and the CTMC to recover smuggling damages

Recovering tobacco-caused public expenditures from the tobacco industry: options for provincial governments

Government action on tobacco’s costs (1997)

**Product Regulation**

Ontario Government Bans Flavoured Cigarillos

Where do we go from here? The next wave in Canadian tobacco control

Reforming the nicotine market: Options for regulating the manufacture and sale of tobacco products

Fire-safe cigarettes: a quick and cost-effective solution to save lives

**News Flashes**

Ontario cabinet split on suing tobacco firm for back taxes

Point of sale: a new focus for tobacco industry marketing

Discount cigarettes and other cheap tobacco products
Fire-safe cigarettes: a quick and cost-effective solution to save lives

Analysis of revised terms of reference of the Ministerial Advisory Council on Tobacco Control

RCMP charge four tobacco companies

Anti-smoking groups decry U of T donation

Canada’s mass media campaign: problems and solutions

What Health Canada and the Government of Canada have said about ‘light’ and ‘mild’ cigarettes

What Anne McLellan has said about ‘light’ and ‘mild’ cigarettes

What international scientific authorities say

What the tobacco industry says — and knows — about ‘light’ and ‘mild’ cigarettes

What other jurisdictions are doing about ‘light’ and ‘mild’ cigarettes

The Tobacco Industry and Youth Smoking

NSRA press release on Lavack report

Government-commissioned report supports health community calls for more hard-hitting advertising campaigns

Report Recommends Health Canada Target “Lies of the Tobacco Industry” in Mass Media Campaign

Health Canada urged to use ads to target ‘manipulative, scheming’ tobacco industry

Health Canada Mass Media Campaign Earns “Thumbs Down” Review

Health community demands action from Anne McLellan on ‘light’ and ‘mild’

The tobacco industry’s challenge to the Tobacco Act

La contestation de la Loi sur le tabac par l’industrie du tabac

The John Luik story: working for the tobacco industry

Good news on smoking stats, particularly in Québec

Misleading cigarette marketing: the ‘light’ and ‘mild’ deception

Documents-chocs sur les cigarettes

Canadian health groups chide government inaction

Québec Superior Court rules in government’s favour: tobacco companies fail in bid to block new health warnings.

Federal government hits speedbump in lawsuit on smuggling
| The Tobacco Youth Prevention Act |
| British Columbia releases new set of documents from Guildford — including surprising material on smuggling |
| U.S. Supreme Court rules that tobacco is too dangerous to regulate by the Food and Drug Administration |
| Federal Health Minister Allan Rock expected to announce new warnings for cigarette packs |
| La société Rothmans, Benson & Hedges et la contrebande |
| Fire hazard from cigarettes: class action filed in Ontario |
| Federal government files civil lawsuit against RJR and the CTMC to recover smuggling damages |
| Tobacco insider talks |
| Tobacco insider talks: Major firms were deeply involved in cross-border smuggling, former executive says. |
| Surveying the Damage |
| Freedom of expression isn't just for tobacco companies |

**NSRA News Releases**

- Health Groups Offer Prime Minister Harper Route to $1 Billion
- Ontario Auditor General underestimates losses from tobacco smuggling
- Time for Action on Cigarette Smuggling: Canadian Coalition for Action on Tobacco Calls for Urgent Action by Federal Government

**Tobacco Smuggling**

- Imperial and Rothmans Admit Guilt in 1990s Cigarette Smuggling Crimes
- Health Groups Launch Campaign for Action on Tobacco Contraband
- NSRA/SHAF brochure on tobacco smuggling and contraband in Canada
- The prevention of tobacco smuggling in Canada: Proposals from an Expert Panel
- Rothmans Inc.: Potential Smuggling Liability
- Background on the Philip Morris paper trail
- Rothmans: Background on Corporate Structure
- Federal government files civil lawsuit against RJR and the CTMC to recover smuggling damages
<table>
<thead>
<tr>
<th>Tobacco control-related Websites review</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rothmans, Benson &amp; Hedges and the Smuggling of Cigarettes into Canada</td>
</tr>
<tr>
<td>The Smuggling of Tobacco Products</td>
</tr>
<tr>
<td>Spain and Germany join the EU action</td>
</tr>
<tr>
<td>What do we know about cigarette smuggling in other parts of the world?</td>
</tr>
<tr>
<td>Cigarette Smuggling: A Global Weapon against Public Health Measures</td>
</tr>
<tr>
<td>Stunning Montréal Gazette / ICIJ series on links between organized crime and cigarette industry</td>
</tr>
<tr>
<td>Canadian health groups file complaint about RCMP failure to prosecute industry executives</td>
</tr>
<tr>
<td>What do we know about the smuggling of cigarettes into Canada?</td>
</tr>
<tr>
<td>Revelations about British American Tobacco and smuggling</td>
</tr>
<tr>
<td>Forensic Investigative Associates, Rod Stamler and the U.S. &quot;National Coalition against Crime and Tobacco Contraband&quot;</td>
</tr>
<tr>
<td>Imperial Tobacco, Imasco, and the Smuggling of Cigarettes into Canada</td>
</tr>
<tr>
<td>EU launches lawsuit against Philip Morris and R.J. Reynolds</td>
</tr>
<tr>
<td>Tobacco insider talks: major firms were deeply involved in cross-border smuggling, former executive says</td>
</tr>
<tr>
<td>Surveying the Damage</td>
</tr>
<tr>
<td><strong>Tobacco Taxation</strong></td>
</tr>
<tr>
<td>Tax policy to address tobacco market failures</td>
</tr>
<tr>
<td>A Win-Win: Enhancing Public Health and Public Revenue</td>
</tr>
<tr>
<td>Cigarette taxes and prices</td>
</tr>
<tr>
<td>Taxes and Prices (Smoking and Health Action Foundation)</td>
</tr>
<tr>
<td>Taxes and Prices</td>
</tr>
<tr>
<td>The 1994 Tobacco Tax Cuts: Revenue Impact and Policy Alternatives</td>
</tr>
<tr>
<td>Tobacco Taxes in Canada -- 1998 Budget Proposals</td>
</tr>
<tr>
<td>Tobacco Taxes and Prices in Canada</td>
</tr>
<tr>
<td>Surveying the Damage</td>
</tr>
<tr>
<td><strong>Tobacco Tax Maps</strong></td>
</tr>
</tbody>
</table>
A map comparing cigarette prices in Canada (July 1, 2008)

A map comparing cigarette prices in Canada (April 24, 2008)

A map comparing cigarette prices in Canada (May 1, 2007)

A map comparing cigarette prices in Canada (Jan. 1, 2007)

A map comparing cigarette prices in Canada (Oct. 1, 2006)

A map comparing cigarette prices in Canada (March 31, 2006)

A map comparing cigarette prices in Canada (Jan. 31, 2006)

Global Cigarette Taxes and Prices (Canadian dollars)

Global Cigarette Taxes and Prices (U.S. dollars)

**Truth & Labelling**

Toxic constituents information

Face Value? Descriptive Cigarette Brand Labelling and Reported Toxin Levels

Cigarette Emissions Testing, Ingredient Disclosure and Package Labelling: Policy Considerations

Warnings Examples

Québec Superior Court rules in government’s favour: tobacco companies fail in bid to block new health warnings

Brazilillian Packs

Health warnings on tobacco products in Canada

**Science & Figures**

La fumée secondaire (Fondation pour la lutte contre le tabac)
*Article only available in french*

Second-Hand Smoke

Using Ontario’s Health Protection and Promotion Act to Reduce Exposure to Environmental Tobacco Smoke (1998)

Smoking in the home: social and legal implications

**Youth & Tobacco**

The influence of Tobacco Powerwall Advertising on Children [video]
The influence of tobacco powerwall advertising on children

Report Recommends Health Canada Target “Lies of the Tobacco Industry” in Mass Media Campaign

The Tobacco Industry and Youth Smoking

**International Issues**

Framework Convention on Tobacco Control: An international instrument to deal with an international problem

The Framework Convention on Tobacco Control

Conférence internationale francophone sur le contrôle du tabac  
*Article only available in french*

Comments on draft elements of the WHO Framework Convention on Tobacco Control

**Tobacco Industry**

Eye on the tobacco industry (Oct.-Dec. 2008)

Eye on the tobacco industry (July-Sept. 2008)

Eye on the tobacco industry (Apr.-June 2008)

Backgrounder on the Canadian Tobacco Industry and Its Market (2007/08 edition)

Eye on the tobacco industry (Oct.-Dec. 2007)

Backgrounder on the Canadian Tobacco Industry and Its Market (2006/07 edition)

Backgrounder on the Canadian Tobacco Industry and Its Market (Winter 2005/06 edition)


**Municipal Bylaws**

The following section provides information on the direct and indirect benefits of municipal smoke-free by-laws, as well as resources for learning from other municipalities’ experiences, how the tobacco industry works to oppose by-laws, plus much more.

Compendium of 100% Smoke-free Municipal Bylaws (March 2008 update)

Evidence of the Effectiveness/Benefits of By-laws

Best Practices

Indirect Benefits
### Youth & Tobacco

- The influence of Tobacco Powerwall Advertising on Children [video]
- The influence of tobacco powerwall advertising on children
- Report Recommends Health Canada Target “Lies of the Tobacco Industry” in Mass Media Campaign
- The Tobacco Industry and Youth Smoking

### Opposition to Clean Air Laws

- Warning — The controversy around second-hand smoke is generated by the tobacco industry
- Warning — Designated Smoking Rooms constitute an illusionary level of protection against exposure to second-hand smoke
- Warning — Any effective tobacco control measure will be met by unfounded and preposterous predictions of catastrophic economic impacts
- The Economic Impact of Going 100% Smoke-Free
- A closer look at arguments in favour of ventilation
- Tobacco Industry Front Groups
- Ventilation and Designated Smoking Rooms (DSRs)
- Junk Science

### Exposure to Second-hand Smoke

- Smoke-free Tourism (Dec. 2008 Update)
- Smoke-free Hospital Properties
- Smoke-free Tourism
- Child Protection, Foster Care and Second-hand Smoke
- Smoke-free Prisons
- Smoke-free Hospital Campuses
- Smoke-free Outdoor Spaces
- Second-hand Smoke and Hookah Pipes
- Smoke-free Casinos and Bingos
Smoke-free Policies at Colleges and Universities

Appearing Soon in a Place Near You: Health Impacts of Comprehensive Smoke-Free Legislation

Second-hand Smoke in Homes and Cars

Summary of Workers’ Compensation Claims Across Canada

Future Debates: “There’s Still a Long Way to Go, Baby…”

Second-hand Smoke: What’s the Danger?

But Does SHS Actually Cause Diseases?

**Second-hand Smoke in Multi-Unit Dwellings**

A Landlord’s Guide to No-Smoking Policies in Ontario

Can the Smell of Second-hand Smoke Constitute Damage?

Tenant Survey Regarding No-Smoking Policies in Multi-Unit Housing

Smoke-free Policies Make Good Dollars and Sense: The Business Case for Smoke-free Multi-unit Housing

A Review of Second-hand Smoke Decisions Made by Adjudicators of Landlord and Tenant Boards

Environmental Tobacco Smoke as a Breach of the Covenant of Quiet Enjoyment

Canadian Case Law on Drifting Second-hand Smoke in Multi-unit Dwellings

When Neighbours Smoke

Questions and Answers for Landlords

Questions and Answers for Tenants

**Others**

Population-Based Strategies for Controlling the Tobacco Epidemic Among Women

The Mythical Canadian Cigar Craze

Legislation: A Key Component of a Comprehensive Tobacco Control Strategy
71. http://www.leavethepackbehind.org/

Website of **Leave The Pack Behind**.

It is an organization based on college and university campuses to educate students about tobacco control encourage smokers to quit and protect non-smokers from exposure. Since 2000, this group has expanded from Brock University to over 20 campuses in Ontario and Nova Scotia (Canada).

Interesting resources:

- Home → Health Professionals
  - a) **Nursing** Best Practice Guideline: Integrating Smoking Cessation into Daily Nursing Practice (cover and contents in A252)
  - b) E-learning Smoking Cessation program (http://www.rnao.org/smokingcessation/)
    - It is a program for all nurses to learn how to help their patients who smoke.


Website of **American Legacy Foundation**.

It is dedicated to building a world where young people reject tobacco and anyone can quit. The foundation develops programs that address the health effects of tobacco use.

Interesting resources:

- Home → Research → **Tobacco Maps**
  - The Current Population Survey (CPS) is an online data tool with information about smoking rates, beliefs and attitudes about tobacco use, secondhand smoke exposure and more. It displays information as maps and tables for state-level comparison.
- Home → Research → Tobacco Documents Library
  - The Legacy Tobacco Documents (LTDL) contains more than 10 million documents created by major tobacco companies related to their advertising, manufacturing, marketing, sales and scientific research activities.
- Home → Research → Surveys and Data
  - a) National Youth Tobacco Survey (NYTS) – A253
  - b) Legacy Media Tracking Survey (A254)
- Home → Research → Publications (see list below)

Legacy First Look Report 18 10/24/2007
Legacy First Look Report 17 06/05/2007
Physician Behavior and Practice Patterns Related to Smoking Cessation - Full Report 05/17/2007
Milliman Report 03/15/2007
Ending the Tobacco Problem - Health Care Brief 01/01/2007
Ending the Tobacco Problem - States and Local Government Brief 01/01/2007
Ending the Tobacco Problem - Federal Government Brief 01/01/2007
• Home → Research → Fact sheets (see list below)

Smoking in the Movies 07/31/2008
Youth and Smoking Fact Sheet 02/01/2008
African Americans and Smoking Fact Sheet 05/15/2007
American Indians, Alaska Natives and Tobacco 02/28/2007
Hispanics and Smoking 02/01/2007
Lesbian, Gay, Bisexual, & Transgender Communities & Smoking 02/01/2007
Lung Cancer and Smoking 02/01/2007
Men and Smoking 02/01/2007
Secondhand Smoke 11/01/2006
Saving Lives, Saving Money 02/06/2004

73. http://www.respect-ala.org

Website of Resources & Education Supporting People Everywhere Controlling Tobacco (RESPECT)

It is statewide program of the American Lung Association (East Bay) that works to reduce prevalence amongst Low Socio-economic Status individuals. They do this through provision of information, resources and training to public health, agencies and community-based organizations.

Interesting sections:
• Home → Protecting Multi-Family Housing, Apartments and Condos from Second Hand Smoke
• Home → Promoting Tobacco Free Pharmacies (A255)
• Home → Smoke Free Zones at Trade, Vocational & Technical Schools

Background information is listed below:

Apartment Survey Results

No Constitutional Right to Smoke Fact Sheet (revised)
Secondhand Smoke Declared a Toxic Air Contaminant (word document)
Smoke Significantly Increases Risk of Breast Cancer (word document)

In More Condos, home isn’t where the smokers are

Chemicals Identified in Tobacco Smoke

How to Go Smoke-free in Your Building

• Home → Promoting Tobacco Free Pharmacies (A255)
• Home → Smoke Free Zones at Trade, Vocational & Technical Schools

Background information is listed below:

Legal Opinions

No Constitutional Right to Smoke Fact Sheet (revised)

Why Are Smoke free Apartment Buildings Legal?

Smoke free Common Areas – What Does the California Smoke-free Workplace Law Require?

CA Legislative Counsel Legal Opinion "Smoking Bans: Residential Rental Property" - #21547

HUD Legal Counsel Opinion: Landlords are free to make apartments totally smoke-free
Section 8 Authority to Be Smoke-free (word document)

Evicted for Heavy Smoking

Surveys
Surveys and Interviews Indicate: Smokefree Apartment Buildings Are Good For Landlords And Desired By Residents

Sample Owner Survey Instrument

Sample Smoke-free Policies and Lease Language
Rental-Lease Agreement for Lease Addendum (pdf document)
Instruction Sheet for Lease Addendum (pdf document)

Building on a Smoke-free Foundation Action Kit
How to Make Your Building Smoke-Free

Working with Property Developers, Owners, and Managers (word document)

There is No Constitutional Right to Smoke

Polling Shows Strong Support for Smoke-free Apartments (word document)
Sample Smoke-free Policy and Lease for Landlords (word document)

Local Government Resources and Partners (word document)

California Air Resources Board Declares
Second Hand Smoke Is a Toxic Air Contaminant (word document)

For Landlords and Property Owners

No Smoking Allowed Article
No Constitutional Right to Smoke Fact Sheet (revised)
Why Are Smokefree Apartment Buildings Legal?

How to Go Smoke-free in Your Building

Sample Addendum to Lease
Sample Smoke-free Apartment Building Policy
Sample Problem Solving Steps for Drifting Smoke
Finding and Keeping Good Tenants by Having Rules About Smoking in Apartments and Condominiums.

Coping With Smoking: Property Damage & Liability

Model Tenant Survey

Yes You Can Choose to Make Your Building Smokefree

Let's Talk About Managing a Smokefree Building

California Apartment Association Network Local Association Contacts (pdf document)

For Tenants

Model Tenant Survey

Sample Problem Solving Steps for Drifting Smoke

Subsidized Housing

HUD Legal Counsel Opinion: Landlords are free to make apartments totally smoke-free
Condominiums
In More Condos - Home Isn't Where the Smoke Is
Smoke-free Environments Law Project Memo on Condominiums (word document)
Evicted For Heavy Smoking
Sample CC&R re: No Smoking from Pasadena Home Owners' Assoc. (word document)

News
Some Apartments May Be Out of Bounds for Smokers
Secondhand Smoke Declared a Toxic Air Contaminant (word document)

SMOKE FREE ZONES AT TRADE, VOCATIONAL & TECHICAL SCHOOLS
Background Information
Clearing the Air Fact Sheet
Banning Outdoor Tobacco Smoke is Scientifically Justifiable
Californians Want Smoke-free Air in Outdoor Venues
No Constitional Right to Smoke Fact Sheet

Entryways
Why Should Tobacco Smoke Be Moved 20 Feet From Doorways Or Entryways?
Sample Voluntary Comprehensive Nonsmoking Policy For Businesses And Organizations
Sample Voluntary Policies (Spanish Version)
Implementing AB 846
Smoke-free Entryways at Government Buildings AB 846

Site evaluation
Content: appropriate and evidence-based information
Design: user's friendly

Website of Japan Tobacco International (JTI).
It is the third largest tobacco company in the world.
This site discusses who JTI is and what they stand for, explains the regulations that have been placed upon them as an industry, and how they are contributing to society.

75.http://www.dshs.state.tx.us/
Website of Texas Department of State Health Services.
Resources available in Tobacco Section:
1) Tobacco Prevention in Texas (A257)
2) Smoking and Smokeless Tobacco Media Catalog (A258) - Home → Research → Audiovisual Library. It contains numerous videos on smoking and smokeless tobacco.
3) A Clinical Toolkit for Treating Tobacco Dependence. Items of the toolkit are listed below:
Toolkit Files

- Brief Information Guide
- Fax Referral Form
- Five As Quick Guide
- Introductory Provider Guide
- Pharmacotherapy Guide
- Resources for Practitioners
- Resources for Patients
- Table Tent Display
- Encounter Checklist

Patient Brochures

- Yes! I'm Ready to Quit • Si, Estoy Listo para Dejar de Fumar
- Maybe. I'm Thinking About Quitting • Quiz Estoy Pensando en Dejar de Fumar
- No, I'm Not Ready to Quit • No Estoy Listo para Dejar de Fumar
- You’re Never Too Young to Get Addicted • Nunca eres Demasiado Joven para Volverte Adicto
- Smoking and My Baby • El Fumar y mi Bebé


Website of the Office of National Statistics.

This web address links directly to the section on smoking.

Available data and statistics are listed below:

- **Socio-economic inequalities in smoking: an examination of generational trends in Great Britain**
  HEALTH STATISTICS QUARTERLY PUBLISHED 25 MAY 2007

- **Time and generational cohort trends in smoking among men and women in Great Britain, 1972-2004/05**
  HEALTH STATISTICS QUARTERLY PUBLISHED 21 NOVEMBER 2006
  Examines General Household Survey data for time and pseudo-birth cohort trends in smoking and heavy smoking in Great Britain

- **Smoking behaviour and socio-economic status: a cohort analysis, 1974 to 1998**
  HEALTH STATISTICS QUARTERLY PUBLISHED 30 MAY 2002
  Examines trends in the prevalence of cigarette smoking by age, gender and socio-economic status.

- **Mortality by deprivation and cause of death in England and Wales, 1999-2003**
  HEALTH STATISTICS QUARTERLY PUBLISHED 21 NOVEMBER 2006
  Examines the relationship between deprivation and mortality for leading causes of death in England and Wales, in 1999-2003

- **Stroke incidence and risk factors in a population-based prospective cohort study**
  HEALTH STATISTICS QUARTERLY PUBLISHED 8 NOVEMBER 2001
  Estimates the incidence of first ever and recurrent strokes occurring in England and Wales and associations with risk factors.
Prevalence of cigarette smoking by sex and socio-economic classification based on the current or last job of the household reference person: Living in Britain

In England, the overall prevalence of cigarette smoking among those in manual socio-economic groups fell from 33% in 1998 to 31% in 2000, but showed no statistically significant change in 2001 at 32%, suggesting little progress in relation to the targets...

Cigarette smoking among people aged 16 or over: by sex, 2001/02: Regional Trends 38

Cigarette smoking among people aged 16 and over. It gives data for those who have never smoked those who smoke less than 10, 10-20 and more than 20. It also gives data for ex-regular smokers. The amounts are per day and are shown separately for both male...

Prevalence of adult cigarette smoking: by sex: Social Trends 34

Over the past 30 years there has been a substantial decline in the proportion of adults who smoke cigarettes. In 1974, 51 per cent of men and 41 per cent of women aged 16 and over in Great Britain reported that they were regular cigarette smokers. By 2001...

Smoking cessation: by age and sex, 2001/02: Social Trends 33

Breast cancer survival rates are among the highest for the most common forms of cancer. Around three quarters of women in England now survive for at least five years following the diagnosis of breast cancer. At present, breast screening is offered every...

Smoking and Misuse of Alcohol

The Department of Health compiles data on smoking and misuse of alcohol from a variety of sources. Occasional publications on trends are also prepared.

Welsh Health Survey

This is a largely self-completion survey of health in Wales. The survey includes questions about people's use of health services, illnesses, general health and well-being, smoking, alcohol, fruit and vegetables, exercise, carers and questions about themse...

Smoking Among Secondary School Children 1996 - GB

A survey of smoking among secondary school children has been carried out by the Office for National Statistics on behalf of the Health Departments of Great Britain every two years since 1982. Children completed a questionnaire about current smoking beh...

Whitehall Study

The survey was initially undertaken to investigate cardiorespiratory disorders and their precursors. The aim of the first phase was to evaluate mass screening for cardiorespiratory conditions with respect to yield of previously unrecognised disease a...

Statistics on Stop Smoking Services, England

This statistical bulletin presents results from monitoring NHS stop smoking services in England (formerly known as the Smoking Cessation Services). Note that this information is now collected and published by the Information Centre for health and socia...

Smoking-related behaviour and attitudes

Presents results from questions about smoking which were included on the ONS Omnibus survey at the request of the Health and Social Care Information Centre. In the survey, questions about smoking behaviour and habits, giving up and stopping smoking, perc...

Smoking, Drinking and Drug Use Among Young People in Scotland


Statistics on Smoking in England

Presents a range of information on smoking, which has been drawn together from a variety of sources. The bulletin is primarily concerned with cigarette smoking unless otherwise specified. The data relate to England where possible. Where figures for English...
Website of **Tobacco Information Scotland** (TIS).

It is an initiative from the ASH Scotland Information Service. Working with key partners, they developed TIS to provide the best possible gateway to smoking and tobacco-related information in Scotland. The website provides access to:

- Statistics and information on smoking-related illnesses and diseases
- Policies and information on tobacco issues and inequalities
- Government policies, targets and legislation
- Smoking cessation guidelines, aids and services, and
- Issues relating to the tobacco industry

1) **Home → Health → Policies and Guidelines**

Below is listed a collection of health policies and guidelines of relevance to tobacco.

### Scotland's future is smoke free: a smoking prevention action plan

(May 2008) This action plan sets out a programme of measures designed specifically to dissuade children and young people from smoking. It builds upon and responds to the report, *Towards a Future without Tobacco* (November 2006) from an Expert Group, which considered a wide range of evidence from national and international research. The consultations undertaken on the Expert Group's recommendations also provide a clear mandate for the action proposed.

2) **Home → Health → Smoking Prevalence**

"Scottish Public Health Observatory's data on tobacco use" *(A259)*

3) **Home → Health → Education / Promotion**

4) **Home → Guides → Statistics**

These are various sources of statistics that are relevant to tobacco control in Scotland and this guide identifies some of the Statistics in key areas. The guide was updated in August 2008 *(A260)*

5) **Home → Guides → Smoking Cessation**

This page is intended to be a helpful guide to anyone working in smoking cessation in Scotland, especially those new to the topic. It was published in June 2006 *(A261)*.

6) **Home → Guides → Smoke-free legislation in Scotland** *(A262)*

Background information relating to smoke-free legislation in Scotland:

This ASH Scotland report shows how the campaign to go smoke-free was won, and how the tobacco industry tried everything it could to stop smoke-free legislation being made.

**ASH Scotland briefing paper: smoke-free legislation in Scotland: the legislative process**

This ASH Scotland briefing paper provides an outline of the background to the decision to legislate, the consultation process, the different stages of the legislative process and pre-implementation activity.

**Smoking in public places: a consultation on reducing exposure to second hand smoke**

**Key findings of responses to a public consultation**

This report presents the key findings of the Scottish Executive's public consultation on smoking in public places which took place during the summer of 2004.

**International review of the health and economic impact of the regulation of smoking in public places. Summary Report.**

Published by NHS Health Scotland in 2005, this report examines the likely impact of restrictions on smoking in public places in a Scottish context. This summary report is 28 pages long.

**Passive smoking and associated causes of death in adults in Scotland**

Published by NHS Health Scotland in 2005, this report estimates the number of deaths from the major smoking-related causes of death in Scottish adults that can be attributed to passive smoking.
## International legislation

**Briefing on smoke-free legislation around the world**
This ASH Scotland resource provides information on international smoke-free legislation. The briefing paper is updated fortnightly.

**Beyond Scotland: what’s happening elsewhere**
An interactive map produced by the Scottish Executive providing information on what is happening in the rest of the world.

**Smoke-free Europe: reviewing progress, prescribing action**
In this document by the Tobacco Control Resource Centre, doctors’ leaders from throughout Europe describe the success of smoke-free legislation.

**Smoke-free world: doctors’ notes on clean air laws**
In this document by the Tobacco Control Resource Centre, doctors’ leaders from eight countries around the world describe the success of smoke-free legislation.

7) Home → Guides → International smoke-free legislation
This page provides a guide to sources of information on international smoke-free legislation as well as post implementation progress reports.

<table>
<thead>
<tr>
<th>Country</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Ireland</strong></td>
<td>Smoke-free workplaces in Ireland a one-year review</td>
</tr>
<tr>
<td><strong>Italy</strong></td>
<td>The smoking ban: what lessons from Italy?</td>
</tr>
<tr>
<td><strong>Norway</strong></td>
<td>Smoke-free bars and restaurants in Norway</td>
</tr>
<tr>
<td><strong>New York</strong></td>
<td>The state of smoke-free New York City: a one-year review</td>
</tr>
<tr>
<td><strong>New Zealand</strong></td>
<td>The smoke is clearing: anniversary report 2005</td>
</tr>
<tr>
<td><strong>Aotearoa New Zealand</strong></td>
<td>smokefree workplaces: a 12 month report</td>
</tr>
</tbody>
</table>

8) Home → Guides → Evaluation of smoke-free legislation.
Papers published to date

**Legislation on smoking in enclosed public places in Scotland: how will we evaluate the impact?**
Sally J. Haw, Laurence Gruer OBE, Amanda Amos, Candace Currie, Colin Fischbacher, Geoffrey T. Fong, Gerard Hastings, Sally Malam, Jill Pell, Calum Scott and Sean Semple

*Journal of Public Health*, Volume 28, Number 1, March 2006, pp. 24-30(7)
http://jpubhealth.oxfordjournals.org/cgi/content/abstract/28/1/24
Secondhand smoke levels in Scottish pubs: the effect of smoke-free legislation
Sean Semple, Karen S Creely, Audrey Naji, Brian G Miller and Jon G Ayres
Tobacco Control 2007;16:127-132; doi:10.1136/tc.2006.018119
http://tobaccocontrol.bmj.com/cgi/content/full/16/2/127

Covert observation in practice: lessons from the evaluation of the prohibition of smoking in public places in Scotland
Mark P Petticrew, Sean Semple, Shona Hilton, Karen S Creely, Douglas Eadie, Deborah Ritchie, Catherine Ferrell, Yvette Christopher and Fintan Hurley
http://www.biomedcentral.com/1471-2458/7/204/abstract

Expectations and changing attitudes of bar workers before and after the implementation of smoke-free legislation in Scotland
Shona Hilton, Sean Semple, Brian G Miller, Laura MacCalman, Mark Petticrew, Scott Dempsey, Audrey Naji and Jon G Ayres
http://www.biomedcentral.com/1471-2458/7/206/abstract

Changes in exposure of adult non-smokers to second-hand smoke after implementation of smoke-free legislation in Scotland: national cross sectional survey
Sally J Haw, Laurence Gruer
BMJ. doi:10.1136/bmj.39315.670208.47 (published 9 September 2007)
http://www.bmj.com/cgi/content/full/bmj.39315.670208.47v1

Smoking in the home after the smoke-free legislation in Scotland: qualitative study
Richard Phillips, Amanda Amos, Deborah Ritchie, Sarah Cunningham-Burley, Claudia Martin
BMJ. doi:10.1136/bmj.39301.497593.55 (published 9 September 2007)
http://www.bmj.com/cgi/content/full/bmj.39301.497593.55v1

Changes in child exposure to environmental tobacco smoke (CHETS) study after implementation of smoke-free legislation in Scotland: national cross sectional survey
Patricia C Akhtar, Dorothy B Currie, Candace E Currie, Sally J Haw
BMJ. doi:10.1136/bmj.39311.550197.AE (published 9 September 2007)
http://www.bmj.com/cgi/content/full/bmj.39311.550197.AEv1

Bar workers’ exposure to second-hand smoke: the effect of Scottish smoke-free legislation on occupational exposure
Sean Semple, Laura MacCalman, Audrey Atherton Naji, Scott Dempsey, Shona Hilton, Brian G. Miller and Jon G. Ayres
Annals of Occupational Hygiene Advance Access (published online on September 10, 2007)
http://annhyg.oxfordjournals.org/cgi/content/abstract/mem044v1
3. Journals publishing articles related to Tobacco

The Website review led also to identify the following journals which prevalently or frequently publish articles related to tobacco and smoking issues.

Some of these journals have a more general public health remit, but often feature papers on tobacco and smoking and are worth checking regularly.

All of these journals provide free abstracts and some provide free access to selected full-text articles.

- Nicotine and Tobacco Research
  
  http://www.ntrjournal.org/
  
  Official journal of the Society for Research on Nicotine and Tobacco (SRNT)

- Addiction
  
  http://www.addictionjournal.org/
  
  Published since 1884 by the Society for the Study of Addiction to Alcohol and other Drugs. ADDICTION publishes peer-reviewed research reports on alcohol, illicit drugs, tobacco and behavioural addictions, bringing together research conducted within many different disciplines.

- Addictive Behaviours
  
  http://www.elsevier.com/wps/find/journaldescription.cws_home/471/description#description
  
  Addictive Behaviors is an international, peer-reviewed scientific journal publishing human research on substance abuse. The journal specifically focuses on studies related to the abuse of alcohol drugs and nicotine. Articles represent interdisciplinary endeavors with research in such fields as psychology, psychiatry, epidemiology, medicine, pharmacology.

- Health Education Research
  
  http://her.oxfordjournals.org/
  
  Publishing original, refereed papers, Health Education Research deals with all the vital issues involved in health education and promotion worldwide - providing a valuable link between the health education research and practice communities.

- European Journal of Public Health
  
  http://eurpub.oxfordjournals.org/
  
  The European Journal of Public Health is a multidisciplinary journal in the field of public health, publishing contributions from social medicine, epidemiology, health services research, management, ethics and law, health economics, social sciences and environmental health.
• Health Education Journal

http://hej.sagepub.com/

Health Education Journal is a leading peer reviewed journal established in 1943. The journal publishes peer reviewed authoritative papers on health promotion and health education and includes book reviews and health event listings. Published quarterly Health Education Journal carries original papers on health promotion and health education research, policy development and good practice.

Recent topics include HIV/AIDS, drugs, stress management & prevention, health coaching, cognitive-motivational variables, health promotion in small workplaces, health behaviours, food projects, healthier eating, infant feeding, immunising children in Primary Care, colorectal cancer risk, telephone based health education, smoking cessation, Health Action Zones, safe schools and sexual harassment, child sexual abuse, physical activity, melanoma, and facial pain. In most volumes we publish a special issue on a particular topic.

• Tobacco Journal International (TJI)

http://www.tobaccojournal.com/

Tobacco Journal International is the leading international trade publication for executives in the world of tobacco. Working with a large network of correspondents world-wide, Tobacco Journal International provides high-quality, unbiased editorial on trends and developments in the global tobacco industry.

• JNCI Journal of the National Cancer Institute

http://jnci.oxfordjournals.org/

The Journal of the National Cancer Institute (print ISSN: 0027-8874, online ISSN: 1460-2105) publishes peer-reviewed original research from around the world and is internationally acclaimed as the source for the most up-to-date news and information from the rapidly changing fields of cancer research and treatment.

• Tobacco Induced Diseases (TID)

http://isptid.globalink.org/journal/index.html

The journal is an international, peer-reviewed scientific journal for medical professionals, biological and psychosocial scientists. It is published by the International Society for the Prevention of Tobacco Induced Diseases (ISPTID).
### Tobacco Control Journal


A quarterly, peer-reviewed scientific journal launched in 1992 to consider all aspects of tobacco prevention and control. The journal is published by the BMJ Publishing Group of the BMA, assisted by Stanford University’s HighWire Press. Edited by Simon Chapman since 1999.

### Quit Smoking Journal


FREE stop smoking journal on our site which is designed and maintained by ex-smokers to provide stop smoking help so you can keep your quit.

You will read of quit smoking benefits to your health and the health effects of quitting smoking. Whether you live in a smoke free family or desire a smoke free life you will find the support and help you need for a successful quit. Our strength comes from the many people we have here banding together, sharing their experiences and the knowledge they obtain as they journey through the quit process.

### Journal of Smoking Cessation


A quality peer-reviewed journal of the Australian Association of Smoking Cessation Professionals (AASCP) and supported by smoking cessation research groups in the US and UK, the *Journal of Smoking Cessation* was established in late 2006 and has quickly built a reputation for cutting edge research applications due to its timely content and accessibility. The journal is available in over 40,000 libraries worldwide including 90% of US college and university libraries.

### Cancer Causes & Control


Cancer Causes & Control is an international refereed journal that both reports and stimulates new avenues of investigation into the causes, control, and subsequent prevention of cancer. Its multidisciplinary and multinational approach draws together information published in a diverse range of journals. It publishes original and review articles, hypotheses, comments, opinions, and letters which have direct relevance to researchers and practitioners working in epidemiology, medical statistics, cancer biology, health education, medical economics and related fields. The journal also provides significant information for government agencies concerned with cancer research, control and policy.
4. Selection of Relevant Guidelines

This section contains a briefly commented list of 13 relevant Tobacco-related Guidelines, found during the Websites review. Clicking on the title, access to the document is provided.

1) The new US Clinical Practice Guideline -Treating Tobacco Use and Dependence: 2008 Update was released on 7 May, providing a thorough review of current evidence and clear guidance to physicians and health systems. Widely endorsed by health professional organisations, the guidelines cover counselling, medications, quitlines, motivational interventions and other approaches, and highlight the cost effectiveness of such treatments.

2) Health Topics
Tobacco Use
School Health Guidelines
Guidelines for School Health Programs to Prevent Tobacco Use and Addiction

These guidelines identify strategies most likely to be effective in preventing tobacco use and addiction among young people. The guidelines were developed by CDC staff in collaboration with experts from other federal agencies, state agencies, universities, voluntary organizations, and professional associations.


3) Tobacco Guidelines for Youth Workers Youth Services Managers

The Casey Tobacco Working Group is a group of key stakeholders in the City of Casey who are committed to reducing the prevalence of tobacco use among young people. The Youth Worker Guidelines project is one of many initiatives being developed to address this concerning health issue.

When working with young people, it may seem that tobacco use may be the least of their problems today, but the effects of tobacco use may become their most significant problem in the future.

These guidelines are intended to help youth workers and youth service managers extend their skills, knowledge and practice when dealing with the tobacco issues of the young people they support.

4) Tobacco Guidelines

Unity is pleased to provide an adult and adolescent tobacco cessation guideline to help you care for your patients. View the link below to view a copy of the guidelines or to print and use at your convenience.

**Tobacco Guidelines**

The guidelines include not only the national standards for treating tobacco use but also address local information and concerns including adolescent tobacco cessation and Unity's benefit coverage.

The Adult and Adolescent Tobacco Cessation Clinical Practice Guideline encourages the 5 A's for tobacco users who are willing to quit:

- Ask the patient if they use tobacco
- Advise them to quit
- Assess willingness to make a quit attempt
- Assist them in making a quit attempt
- Arrange for follow-up contacts to prevent relapse

[http://unityhealth.com/Providers/PractitionerResources/GuidelineIndex/Tobacco/index.htm](http://unityhealth.com/Providers/PractitionerResources/GuidelineIndex/Tobacco/index.htm)


Practical guidelines on developing youth tobacco-use cessation programs.

[http://www.cdc.gov/tobacco/quit_smoking/cessation/youth_tobacco_cessation/index.htm](http://www.cdc.gov/tobacco/quit_smoking/cessation/youth_tobacco_cessation/index.htm)
New guidelines adopted on smoke-free environments
Parties to tobacco control treaty agree to negotiate protocol on illicit tobacco trade

6 JULY 2007 | BANGKOK – The 146 Parties to the World Health Organization Framework Convention on Tobacco Control (WHO FCTC) decided unanimously this week to begin negotiating a protocol on illicit trade of tobacco products and adopt guidelines that stipulate 100% smoke-free public places and workplaces.

“I congratulate the Parties for accomplishing all major objectives scheduled on the programme of work,” said Conference President Juan Martabit of Chile. “The degree of engagement, respectful discussion and commitment by all to reach these very productive outcomes remained exemplary throughout the entire Conference.”

The Conference of Parties, the governing body of WHO's first international Treaty, convened this week in Bangkok, Thailand to set a work agenda for the coming two years and report on progress since the first session of the Conference in February 2006.

“It is important that we do not lose precious momentum started by the expert group on the illicit trade issue,” said Dr Haik Nikogosian, Head of the Convention Secretariat. “This transnational phenomenon negatively affects national security and economics, as well as public and personal health in many countries,” he continued. “This Treaty enables countries to combat the complex threats tobacco poses to human health, such as illicit trade of tobacco products, through international law, including through negotiation of a special protocol like the one launched during this session.”

In another key resolution, the Parties adopted guidelines on protection from exposure to second-hand tobacco smoke. The guidelines, which were adopted unanimously on the Conference’s second day, give national and local governments clear direction to establish smoke-free environments.

“Sound science proves there is no safe level of exposure to second-hand tobacco smoke,” said Dr Douglas Bettcher, Head of the WHO Tobacco Free Initiative. “We are working harder than ever with governments, civil society and other public health experts to denormalize tobacco, and smoke-free environments are one of the key measures to bring about this major shift in social norms to save millions of lives in coming decades.”

Among other decisions, the Conference resolved to begin work on guidelines related to packaging and labelling of tobacco products and tobacco advertising, promotion and sponsorship between now and the third session, scheduled for next year in South Africa. The Conference also decided to strengthen support to Parties in need, to develop projects for financial assistance in implementing the Framework Convention.

Since its entry into force on 27 February 2005, the Framework Convention has become one of the most widely embraced treaties in the history of the United Nations. Delegates from 129 of the eligible 146 Parties attended the session. Other states – including signatories to the treaty – as well as non-governmental organizations in official relations with WHO and intergovernmental organizations participated as observers.
7) Alcohol, Tobacco & Other Drugs Guidelines for Nurses & Midwives: Clinical Guidelines

Download the full report from the DASC website as a pdf (1952 KB)

This document was adapted from the New South Wales Health Department publication, Alcohol and Other Drugs Policy for Nursing Practice in New South Wales: Clinical Guidelines 2000-2003, June 2000. We acknowledge this work and thank the New South Wales Health Department for allowing us to build on their experience.

The expertise and time contributed by Jacky Talmet and Kathy Modystack, specialist drug and alcohol nurses (DASC), and Julie Watkinson (Lecturer, Flinders University School of Nursing & Midwifery and Flinders Medical Centre), has ensured the quality of this document.


8) Let's take a moment - quit smoking brief intervention - a guide for all health professionals

Summary

There is evidence that advice from health professionals is effective in encouraging smoking cessation. Combining brief advice with other effective interventions such as pharmacotherapy can considerably increase quit smoking success.

This document has been developed to assist health professionals in the NSW health system to provide evidence-based brief advice to clients who smoke, as part of their routine clinical practice. The following recommendations are relevant for all health professionals and not only those based in primary care.

File link: "Let's take a moment" quit smoking brief intervention
File size: 3332Kb
Type: Report
Date of Publication: 01 November 2005
SHPN: 050162
ISBN: 0 7347 3881 1

9) Smoking cessation guidelines for Australian general practice

PDF download (564Kb)

http://www.racgp.org.au/guidelines

In 2004 the RACGP produced Smoking Cessation Guidelines for General Practitioners. This guideline is available for download below. In 2007, the RACGP produced a pharmacotherapy update for health professionals that should be read in conjunction with the 2004 guidelines. The update and summary deskcard is also available for download below.


"Even brief tobacco dependence treatment is effective and should be offered to every patient who uses tobacco."
—Public Health Service (PHS) Clinical Practice Guideline, Treating Tobacco Use and Dependence: 2008 Update

Select for print version (PDF File, 190 KB). PDF Help.

Internet Citation:

http://www.ahrq.gov/clinic/tobacco/clinhlpsmksqt.htm

11) Integrating Smoking Cessation Into Daily Nursing Practice: Best Practice Guideline for nurses

The Registered Nurses Association of Ontario has released a new Nursing Best Practice Guideline called "Integrating Smoking Cessation Into Daily Nursing Practice."

Download the pdf file (83 pages)
12) Guidelines for the implementation of Article 8 Protection from exposure to tobacco smoke

During its second session in July 2007, the Conference of the Parties (COP) adopted guidelines on Article 8 of the WHO Framework Convention on Tobacco Control "Protection from exposure to tobacco smoke" as proposed by the respective working group. These are the first guidelines the COP has adopted to promote the implementation of the Convention.

The guidelines are contained in decision FCTC/COP2(7) in document A/FCTC/COP/2/DIV/9.¹

GUIDELINES ON PROTECTION FROM EXPOSURE TO TOBACCO SMOKE

English

English [pdf 132kb] | Links to sample legislation [pdf 83kb] |

¹Document A/FCTC/COP/2/DIV/9 can be accessed at http://www.who.int/gb/fctc/ and by clicking on "Second Session".

http://www.who.int/gb/fctc

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13) Guidelines for Review and Analysis of Texas Municipal Second Hand Smoke (SHS) Ordinances: Short Edition (126 kb)

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5. Interesting elements for target groups

The tables of this section are the outcome of a specific analysis aiming to associate reviewed Websites with key elements which are interesting for target groups: health professionals, wide public (consumers), educators (teachers and parents), and policy makers (politicians and public administration managers).

Table 5.1: Websites with interesting material for Health Professionals
Health professionals are subdivided into four main categories:
1. Doctors (family physicians, cardiologists, dentists, mental health, and other specialists)
2. Nurses
3. Pharmacists and
4. Others (including medicine students, researchers, etc.)

Table 5.2: Websites with interesting material for Wide Public
There are two main categories:
1. Smokers (wishing to quit: general information, guides, tips, assistance)
2. Anyone (campaign, media release, and other public initiatives)

Table 5.3: Websites with interesting material for Educators
Educators are subdivided into two main categories:
1. Teachers
2. Parents

Table 5.4: Websites with interesting material for Policy Makers
Topics being considered for websites selection are: Taxation, legislation, tobacco-free initiatives (at community, regional and national level).
Table 5.1: Websites with interesting material for Health Professionals

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Table 5.3: Websites with interesting material for Educators

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Table 5.4: Websites with interesting material for Policy Makers

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</table>
6. Items commonly featuring in reviewed web sites

All aspects related to tobacco control question were grouped into four main items:

1. Health harms of smoking
2. Smoking cessation (or quit smoking)
3. Second-hand smoking (or passive smoking)
4. Prevention/protection initiatives (including policies, taxation, advertising, campaigns, legislation, education, and more)

The table below highlights the items which are prevalently treated in the reviewed web sites.

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<td>63</td>
<td><a href="http://www.who.int/tobacco/">http://www.who.int/tobacco/</a></td>
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<td><a href="http://www.brit-thoracic.org.uk/">http://www.brit-thoracic.org.uk/</a></td>
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<td>66</td>
<td><a href="http://www.ofl-asso.fr/">http://www.ofl-asso.fr/</a></td>
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<td>67</td>
<td><a href="http://www.cesda.net/">http://www.cesda.net/</a></td>
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<td>68</td>
<td><a href="http://www.badvertising.org/index.html">http://www.badvertising.org/index.html</a></td>
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<td>70</td>
<td><a href="http://66.51.169.163/cms/index.cfm">http://66.51.169.163/cms/index.cfm</a></td>
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<td>71</td>
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<td>72</td>
<td><a href="http://www.americanlegacy.org/">http://www.americanlegacy.org/</a></td>
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<td>73</td>
<td><a href="http://www.respect-ala.org">http://www.respect-ala.org</a></td>
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<td>75</td>
<td><a href="http://www.dshs.state.tx.us/">http://www.dshs.state.tx.us/</a></td>
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<td>76</td>
<td><a href="http://www.statistics.gov.uk/CCI/SearchRe">http://www.statistics.gov.uk/CCI/SearchRe</a> s.asp?term=smoking</td>
<td></td>
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<tr>
<td>77</td>
<td><a href="http://www.tobaccoinscotland.org.uk/">http://www.tobaccoinscotland.org.uk/</a></td>
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### 7. International Networks and Organisations

This section is a list of Websites concerning International Networks and Organisations

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<td><a href="http://www.uknscc.org">http://www.uknscc.org</a></td>
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<td>3</td>
<td><a href="http://www.ash.org.uk">http://www.ash.org.uk</a></td>
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<td><a href="http://www.srnt.org">http://www.srnt.org</a></td>
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<td><a href="http://www.surgeongeneral.gov/tobacco/">http://www.surgeongeneral.gov/tobacco/</a></td>
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<td><a href="http://www.globalink.org">http://www.globalink.org</a></td>
</tr>
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<td><a href="http://www.hon.ch/emash/page1.html">http://www.hon.ch/emash/page1.html</a></td>
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<td>30</td>
<td><a href="http://www.ensp.org/">http://www.ensp.org/</a></td>
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<td>44</td>
<td><a href="http://www.inwat.org">http://www.inwat.org</a></td>
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<td>46</td>
<td><a href="http://www.worldlungfoundation.org">http://www.worldlungfoundation.org</a></td>
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<td><a href="http://isptid.globalink.org">http://isptid.globalink.org</a></td>
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<td>63</td>
<td><a href="http://www.who.int/tobacco/">http://www.who.int/tobacco/</a></td>
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<tr>
<td>73</td>
<td><a href="http://www.respect-ala.org">http://www.respect-ala.org</a></td>
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8. User’s friendly and well structured Websites

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<td>3</td>
<td><a href="http://www.ash.org.uk">http://www.ash.org.uk</a></td>
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<td>6</td>
<td><a href="http://www.cancerresearchuk.org">http://www.cancerresearchuk.org</a></td>
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<td><a href="http://www.trdp.org">http://www.trdp.org</a></td>
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<td>15</td>
<td><a href="http://treatobacco.net">http://treatobacco.net</a></td>
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<td><a href="http://www.nehc.med.navy.mil/">http://www.nehc.med.navy.mil/</a></td>
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<td><a href="http://www.smokefree.gov">http://www.smokefree.gov</a></td>
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<td><a href="http://www.ensp.org/">http://www.ensp.org/</a></td>
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<td>34</td>
<td><a href="http://www.mascotcoalition.org">http://www.mascotcoalition.org</a></td>
<td>Good source of divulgative material</td>
</tr>
<tr>
<td>37</td>
<td><a href="http://www.quitnow.info.au">http://www.quitnow.info.au</a></td>
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<tr>
<td>39</td>
<td><a href="http://www.tobaccofacts.org">http://www.tobaccofacts.org</a></td>
<td>Good source of divulgative material</td>
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<td>44</td>
<td><a href="http://www.inwat.org">http://www.inwat.org</a></td>
<td>Good source of specific issues</td>
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<td>45</td>
<td><a href="http://www.otc.ie">http://www.otc.ie</a></td>
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<td><a href="http://www.cctc.ca/">http://www.cctc.ca/</a></td>
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<td>75</td>
<td><a href="http://www.dshs.state.tx.us/">http://www.dshs.state.tx.us/</a></td>
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</table>
9. Websites containing Videos, photos, posters and other visual material for Tobacco-free Campaigns and Education

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<th>N.</th>
<th>URL</th>
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<td><a href="http://tobacco.health.usyd.edu.au/">http://tobacco.health.usyd.edu.au/</a></td>
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<td>35</td>
<td><a href="http://www.makemiairsmokefree.com">http://www.makemiairsmokefree.com</a></td>
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<td>37</td>
<td><a href="http://www.quitnow.info.au">http://www.quitnow.info.au</a></td>
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</table>
Appendix A
Resources from reviewed Websites

Volume I
From A1 to A107
A1-A54: Resources from Canadian Council for Tobacco Control Website

A1) Self Help – Interactive: websites focused on helping people quit smoking
A2) Self Help – Publications: books, pamphlets and other printable resources to help people quit
A3) Community programs: links to cessation initiatives at the community level
A4) Workplace Health: cessation programs designed to be implemented in the workplace
A5) Women: information aimed at helping women quit
A6) Policies and Evaluation: policy documents regarding and evaluations of various cessation strategies
A7) Better Practices: evaluated cessation programs
A8) Harm Reduction: information discussing the concept of harm reduction as well as the role it could play in reducing morbidity and mortality due to tobacco use
A9) The Research
A10) FAQ: what you need to know about denormalization in Canada
A11) Economic Impacts of Smoking: smoking impacts the economy in many different ways
A12) Impact of Smoking on Health Case: smoking negatively affects the Canadian health care system
A13) Industry denormalization: links to sites that examine several of the tactics used by tobacco industry to appear trustworthy
A14) On Screen: sites looking at the role smoking plays in movies
A15) Counter-marketing: links to media campaigns that have run throughout the world
A16) Packaging: information about the effectiveness of controlling product packaging in tobacco control
A17) Policy issues: looks at the influence of the tobacco industry on policy
A18) Youth Campaigns: denormalization initiatives whose aim is to get youth thinking critically
A19) The Research: seminal works about denormalization
A20) FAQ: what you need to know about tobacco use prevention
A21) School-based Programs: classroom and school-wide programs and research about them
<table>
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<th>A22) Community-based Programs: programs designed for implementation at the community level</th>
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<tr>
<td></td>
<td>A23) Comprehensive Programs: Canadian and state-wide programs that include different types of initiatives</td>
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<tr>
<td></td>
<td>A24) Counter Marketing: marketing programs aimed at educating youth about the tobacco industry</td>
</tr>
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<td></td>
<td>A25) Legislation and Enforcement: legislation aimed at preventing tobacco use initiation</td>
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<td></td>
<td>A26) Taxation: an array of links to reviews of the effectiveness of cigarette taxes</td>
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<tr>
<td></td>
<td>A27) Better Practices: evaluation of various prevention programs</td>
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<tr>
<td></td>
<td>A28) The Research: important studies on prevention</td>
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<tr>
<td></td>
<td>A29) FAQ: what you need to know about secondhand smoke, or environmental tobacco smoke (ETS)</td>
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<td>A30) Homes and Cars: links to resources for protecting your home and car environments from secondhand smoke</td>
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<td></td>
<td>A31) Workplaces: information about smoking restrictions and bans where people work</td>
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<td>A32) Public places: information about SHS in outdoor and indoor public places</td>
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<td></td>
<td>A33) Policies: links to reviews of and guide books on how to create smoke-free spaces</td>
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<td>A34) Bylaws: selected websites giving examples of Canadian bylaws and bans of smoking</td>
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<tr>
<td></td>
<td>A35) Better practices: evaluated initiatives for protection against secondhand smoke</td>
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<td>A36) The Research: studies about general effects of SHS, as well as its effects on various body parts, children and animals. Also includes evaluations of smoke-free policies</td>
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<td>A37) Doctors: information for doctors</td>
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<td>A38) Nurses: information for nurses</td>
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<td>A39) Dental professionals: information for dentists and dental hygienists</td>
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<td>A40) Pediatricians: policy regarding resources for interventions and prevention</td>
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<td>A41) Physiotherapists/OTs: information for intervention</td>
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<td></td>
<td>A42) Mental Health Professionals: policy and resources for psychiatrists and psychologists</td>
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<td></td>
<td>A43) Respiratory Therapists: how to help patients quit smoking</td>
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<td>A44) Pharmacists: cessation information, policy and research for pharmacy technicians</td>
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<td><strong>A45)</strong></td>
<td>Guidelines: better practices for health professionals promoting cessation and treating tobacco dependence</td>
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<td><strong>A46)</strong></td>
<td>Powerwalls: they are tobacco products displayed behind the service counter in retail stores</td>
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<td><strong>A47)</strong></td>
<td>Products: links to information about content and packaging of cigarettes</td>
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<tr>
<td><strong>A48)</strong></td>
<td>Internal documents: written by the industry for the industry</td>
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<tr>
<td><strong>A49)</strong></td>
<td>Fact sheets: quick overview of each topic, providing the most important details in one-two pages</td>
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<tr>
<td><strong>A50)</strong></td>
<td>Women and Tobacco: Fact sheet</td>
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<tr>
<td><strong>A51)</strong></td>
<td>Backgrounders: more comprehensive overview of a topic</td>
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<tr>
<td><strong>A52)</strong></td>
<td>Youth and Tobacco: backgrounder</td>
</tr>
<tr>
<td><strong>A53)</strong></td>
<td>Poster, Videos, Kits, etc.</td>
</tr>
<tr>
<td><strong>A54)</strong></td>
<td>The truth about tobacco: video recording</td>
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</table>

**• A55-A60: Resources from Action on Smoking and Health (ASH) Website**

| **A55)** | Smokefree: submissions by ASH during the Smokefree Campaign |
| **A56)** | Advertising: submissions made by ASH in relation to the Tobacco Advertising and Promotions Act |
| **A57)** | Publications Catalogue: to purchase |
| **A58)** | Current Policy Issues: ASH campaigns for policy change both nationally and internationally |
| **A59)** | Resources for Health Professionals: including media guides and why media exposure is important |
| **A60)** | For Health Professionals: guidance on the latest development and evidence to help people stop smoking |

**• A61) Resources from Cancer Research UK Website: Tobacco, smoking and cancer – the evidence**
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<tr>
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<th>Tobacco control-related Websites review</th>
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<tr>
<td><strong>A62)</strong></td>
<td>Resources from Journal of Smoking Cessation Website</td>
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<tr>
<td><strong>A63)</strong></td>
<td>Resources from No Smoking Day Website: a guide to all research and publications over the last ten years.</td>
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<td><strong>A64)</strong></td>
<td>Resources from Royal College of Nursing Website</td>
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<tr>
<td><strong>A65-A66</strong>:</td>
<td>Resources from Smoking Cessation Service Research Network Website</td>
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<td>A65)</td>
<td>Research Projects</td>
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<td>A66)</td>
<td>Policy Guidance</td>
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<tr>
<td><strong>A67)</strong>:</td>
<td>Resources from Society for Research on Nicotine and Tobacco</td>
</tr>
<tr>
<td><strong>A68-A69</strong>:</td>
<td>Resources from Tobacco-Related Disease Research Program Website</td>
</tr>
<tr>
<td>A68)</td>
<td>The burning issues</td>
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<tr>
<td>A69)</td>
<td>Summary of Awards</td>
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<tr>
<td><strong>A70-A89</strong>:</td>
<td>Resources from Treat Tobacco Net Website</td>
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<tr>
<td>A70)</td>
<td>Demographic and Health Effects: key findings</td>
</tr>
<tr>
<td>A71)</td>
<td>Demographic and Health Effects: slide kit</td>
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<tr>
<td>A72)</td>
<td>Efficacy: Key findings on effective treatment</td>
</tr>
<tr>
<td>A73)</td>
<td>Recommendations: treatment of tobacco dependence</td>
</tr>
<tr>
<td>A74)</td>
<td>Efficacy: Areas for further research</td>
</tr>
<tr>
<td>A75)</td>
<td>Efficacy of treatments for tobacco dependence: slide kits</td>
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<tr>
<td>A76)</td>
<td>Health economics: economic assessment of interventions to assist smoking cessation – key findings</td>
</tr>
<tr>
<td>A77)</td>
<td>Health economics - Recommendations</td>
</tr>
<tr>
<td>A78)</td>
<td>Health economics - Areas for further Research</td>
</tr>
<tr>
<td>A79)</td>
<td>Policy: policies concerning the treatment of tobacco dependence – key findings</td>
</tr>
<tr>
<td>A80)</td>
<td>Policy: Recommendations</td>
</tr>
<tr>
<td>A81)</td>
<td>Policy: Areas for further research</td>
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</tbody>
</table>
A82) Policy: Slide kit
A83) Safety: information on the safety and toxicity of nicotine replacement medications – key findings
A84) Safety: Recommendations
A85) Safety: Areas for further research
A86) Safety of smoking cessation medications – slide kit
A87) Articles, books, reports on Tobacco dependence
A88) Journals (Smoking Cessation, Nicotine Tobacco Research) and Articles

• A90-A93: Resources from Société Française de Tabacologie Website
  A90) Publications
  A91) Report on Swedish snus
  A92) Actualités tabacologiques
  A93) Training (formations)

• A94: Resources from U.S. Department of Health & Human Services: List of papers in Tobacco Cessation section

• A95-A96: Resources from the Massachusetts Tobacco Control Program
  A95) Quit Wizard
  A96) Schools Tobacco Policies: Applicable Laws, Sample Policies and Penalty Options (cover)

• A97-A99: Resources from Environmental Protection Agency Website
  A97) Health Effects of Exposure to Secondhand Smoke
  A98) Develop Your Smoke-free Homes Program
  A99) Take the Smoke-Free Homes Pledge
<table>
<thead>
<tr>
<th><strong>A100-A102: Resources from the Navy and Marine Corps Website</strong> – section dedicated to Tobacco Cessation</th>
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<tbody>
<tr>
<td>A100) My Health</td>
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<td>A101) Health Educators</td>
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<td>A102) Clinicians</td>
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<td><strong>A103) Resources from Smoking in England Website</strong></td>
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<td><strong>A104) Resources from Smoke Free Website</strong></td>
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<tr>
<td><strong>A105-A107: Resources from Globalink – global tobacco control Website</strong></td>
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<tr>
<td>A105) The Tobacco Reference Guide</td>
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<td>A106) Tobacco – Control Books</td>
</tr>
<tr>
<td>A107) TobaccoPedia: The Online Tobacco Encyclopedia</td>
</tr>
</tbody>
</table>
Appendix A
Resources from reviewed Websites

Volume II
From A108 to A200
• **A108) Resources from Institut National du Cancer Website**

• **A109-A114: Resources from HealthInssite Website**
  - A109) Passive Smoking → articles and papers about the Health effects
  - A110) Health effects of smoking (papers, articles, etc.)
  - A111) Quitting smoking → information on how to quit
  - A112) Help with quitting smoking
  - A113) Systematic Review of Treatments for Quitting Smoking
  - A114) Smoking and Cardiovascular Disease

• **A115-A119: Resources from Health Canada Website**
  - A115) Evaluation of the Quit4Life Youth Cessation Demonstration Program
  - A116) Quit4Life – 12 Month Follow-up Evaluation
  - A117) Public consultations for the Tobacco Control Programme improvement
  - A118) Fact sheets for Media
  - A119) Reports and Publication on Tobacco

• **A120-A126: Resources from European Network for Smoking Prevention Website**
  - A120) Representative list
  - A121) General Practitioners and the Economics of Smoking Cessation
  - A122) Health Professionals and Smoking Cessation II
  - A123) In the spotlight
  - A124) ENSP Reports
  - A125) Documents available in Library
  - A126) National documentation on Tobacco

• **A127-A128: Resources from Tobacco Control Website**
  - A127) List of References and Picture Gallery

• **A129-A130: Resources from MASCOT Website**
  - A129) Education: List of Papers, fact sheets, statistics, etc.
  - A130) Cool facts: List of important facts about tobacco
• A131) Resources from MakeMiairsmokefree Website → List of available material

• A131-A135: Resources from NYTCP Website
  A132) Tobacco Control Community Partners
  A133) List of Current Policies in New York State
  A134) List of Program Components
  A135) List of available brochures, fact sheets and Reports

• A1315bis-A139: Resources from Quitnow Website
  A135bis) Youth Campaign Material
  A136) Posters – Tobacco smoke is toxic
  A137) National Tobacco campaign materials
  A138) List of Media Releases, Research Reports and Campaign Reports
  A139) Health effects of smoking

• A140) Resources from Tobacco Facts Website

• A141) Resources from Group to Alleviate Smoking in Public Website → the no-smoking law in Virginia

• A142-A146: Resources from American Medical Student Association
  A142) Action against tobacco: list of available items
  A144) Tobacco Awareness Program (whole document)
  A145) StampOut Smoking (cover)
  A146) Tobacco Use – Health Dialogues for Professionals (cover)

• A143) Resources from American Cancer Society Website: Guide to Quitting Smoking (whole document)
<table>
<thead>
<tr>
<th>A147-A150: Resources from International Network of Women Against Tobacco Website</th>
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<tr>
<td>A147) Country profiles: e.g. Belgium</td>
</tr>
<tr>
<td>A148) SecondHand Smoke and Women in Europe (whole document)</td>
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<tr>
<td>A149) Searching for a solution: women, smoking and inequalities in Europe (whole document)</td>
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<tr>
<td>A150) Part of the solution? Tobacco control policies and Women (whole document)</td>
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<thead>
<tr>
<th>A151) Resources from the Office of Tobacco Control Website: Towards a Tobacco Free Society (cover and table of contents)</th>
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<tr>
<th>A152) Resources from the World Lung Foundation Website: Guidelines for planning and implementing mass media advertising campaigns (whole document)</th>
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<th>A153-A157: Resources from Medline Plus Website</th>
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<tbody>
<tr>
<td>A153) List of resources about Smokeless Tobacco</td>
</tr>
<tr>
<td>A154) List of resources about Smoking</td>
</tr>
<tr>
<td>A155) List of resources about Smoking and Youth</td>
</tr>
<tr>
<td>A156) List of resources about Smoking Cessation</td>
</tr>
<tr>
<td>A157) List of resources about Smoking in Pregnancy</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A158-A160: Resources from the National Cancer Institute Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>A158) List of resources about Smoking and Cancer</td>
</tr>
<tr>
<td>A159) List of resources about Smokeless Tobacco</td>
</tr>
<tr>
<td>A160) Monograph &quot;Smokeless Tobacco or Health – An international Respective (Table of Contents).</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A161-A166: Resources from the Tobacco Technical Assistance Consortium</th>
</tr>
</thead>
<tbody>
<tr>
<td>A161) and A162) List of products and tools</td>
</tr>
<tr>
<td>A163) General Program and Policy Resources</td>
</tr>
<tr>
<td>A164) Searchable databases</td>
</tr>
<tr>
<td>A165) State-related Agencies</td>
</tr>
<tr>
<td>A166) Fundamentals of Smokefree Workplace Laws (Full document)</td>
</tr>
<tr>
<td><strong>A167)</strong></td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>– List of publications on Secondhand Smoke</td>
</tr>
</tbody>
</table>

| **A168-A173:** Resources from California's Clean Air Project Website |
|---|---|
| A168) List of resources about Indoor Workplaces |
| A169) List of resources about Outdoor Tobacco Smoke |
| A170) List of resources about Multi Family Housing |
| A171) List of resources about Casinos |
| A172) List of resources about Military Bases |

| **A174-A183:** Resources from the Ontario Tobacco Research Unit Website |
|---|---|
| A174) Research priorities Listing |
| A175) Monitoring reports |
| A176) Evaluation Listing |
| A177) List of the selected journal articles |
| A178) Youth and Tobacco Use (reading list) |
| A179) Secondhand Smoke (reading list) |
| A180) Smokeless Tobacco (reading list) |
| A181) Monitoring Reports (reading list) |
| A182) Lessons Learned |
| A183) Directory of Public Use Data on Tobacco Use in Canada (cover and table of contents) |

| **A184-A185:** Resources from Tobacco Etiology Research Network Website |
|---|---|
| A184) List of publications |
| A185) The Smoking in College Freshmen – UpTERN Technical Report (cover and table of contents) |

| **A186): Resources from Tobacco Use Behavior Research** |
|---|---|
| – List of available reports |
• **A187-A200: Resources from the Population Health Research Group Website**

  A187) Project abstract: A Pan-Canadian Resource Network for Tobacco Control Research, Policy and Practice
  A188) Project abstract: The International Tobacco Control Project
  A189) Project abstract: Project impact – Youth and Tobacco
  A190) Project abstract: Implementing the 2006-2007 Youth Smoking Survey
  A191) Project abstract: Improving the population impact of telephone-based counseling for the treatment of smoking
  A192) Project abstract: Understanding and testing knowledge translation strategies in tobacco control evaluation at national, provincial and local levels
  A193) Project abstract: Smoke-free spaces – A better practices review to identify cross-setting Lessons for action and Research
  A194) Project abstract: Evaluation of the Canadian Cancer Society's Smokers' help line
  A195) Project abstract: Development of the School Smoking Profile Business Plan
  A196) Project abstract: North American Student Smoking Survey
  A197) Project abstract: Provincial of Tobacco Use Prevention Initiatives 2005 – Health Department Survey
  A198) Project abstract: Validation a Treatment Referral Algorithm For Current Smokers – BC
  A199) A Low-Cost, Practical Method for increasing Smoker's Interest in Smoking Cessation programs
  A200) What are the exciting areas in tobacco control research? (Presentation Cover)
Appendix A
Resources from reviewed Websites

Volume III
From A201 to A262
<table>
<thead>
<tr>
<th>Resource</th>
</tr>
</thead>
<tbody>
<tr>
<td>A201) World NO Tobacco Day, 31 May 2009 focused on Tobacco Health Warning</td>
</tr>
<tr>
<td>A202) The 14th World Conference on Tobacco Or Health (WCTOH)</td>
</tr>
<tr>
<td>A203) Fourth Meeting of the WHO Tobacco Laboratory Network (TobLabNet)</td>
</tr>
<tr>
<td>A205) Fact file about tobacco and second-hand smoke.</td>
</tr>
<tr>
<td>A206) WHO Framework Convention on Tobacco Control</td>
</tr>
<tr>
<td>A207) Smoking cessation</td>
</tr>
<tr>
<td>A208) Smoking cessation</td>
</tr>
<tr>
<td>A209) Protection from exposure to second-hand tobacco smoke</td>
</tr>
<tr>
<td>A210) Youth and Tobacco</td>
</tr>
<tr>
<td>A211) Youth and Tobacco</td>
</tr>
<tr>
<td>A212) Tobacco and the rights of the child</td>
</tr>
<tr>
<td>A213) International consultation on Environmental Tobacco Smoke (ETS) and Child Health</td>
</tr>
<tr>
<td>A214) What in the World Works? International Consultation on Tobacco and Youth</td>
</tr>
<tr>
<td>A215) Monograph &quot;Women and the Tobacco Epidemic&quot;</td>
</tr>
<tr>
<td>A216) Gender and tobacco</td>
</tr>
<tr>
<td>A217) Curbing the Epidemic: Governments and the Economics of Tobacco Control</td>
</tr>
<tr>
<td>A218) Interventions to reduce tobacco consumption</td>
</tr>
<tr>
<td>A219) Legislation</td>
</tr>
<tr>
<td>A220) Best Practices in Tobacco Control Earmarked Tobacco Taxes and the Role of the Western Australian Health Promotion Foundation (Healthway)</td>
</tr>
<tr>
<td>A221) Taxation reform as a component of tobacco control policy in Australia</td>
</tr>
<tr>
<td>A222) Tobacco taxation and smuggling control: New Zealand</td>
</tr>
<tr>
<td>A223) Report on Smuggling Control in Spain</td>
</tr>
<tr>
<td>A224) Report on Tobacco Taxation in the United Kingdom</td>
</tr>
<tr>
<td>A225) Tobacco Excise Taxation in South Africa</td>
</tr>
<tr>
<td>A226) A report on Smoking Advertising and Promotion Bans in the Islamic Republic of Iran</td>
</tr>
<tr>
<td>A227) Norway: Ban of Advertising and Promotion</td>
</tr>
<tr>
<td>A228) Thailand County Report on Tobacco Advertising and Promotion Bans</td>
</tr>
<tr>
<td>A229) Report on Smoke-free Policies in Australia</td>
</tr>
</tbody>
</table>
A230) Report on national policies on tobacco smoke-free environments in Chile
A231) Country Reports on Smoke-free policies in Canada
A232) Smoke-free Policies in New Zealand
A233) Successful Use of Smoke-free Policies in Tobacco Control in Estonia
A234) Smoke-free Spaces in Costa Rica
A235) New Zealand: Effective Access to Tobacco Dependence Treatment
A236) Tobacco Dependence Treatment in England
A237) Access to Smoking Cessation in Costa Rica
A238) A Report on Effective Access to Tobacco Dependence Treatment (TDT) in Hong Kong Special Administrative Region
A240) The Surveillance and Monitoring of Tobacco Control in South Africa
A241) Surveillance and Monitoring in New Zealand
A242) WHO Collaborating Centres for Tobacco Control

• A244-A245: Resources from the British Thoracic Society Website
  A244) The BASSP Statement on Minimum Standards for Training for Stop Smoking Practitioners
  A245) Education Programs list

• A246: List of articles of the Cochrane Tobacco Addiction Group Reviews

• A247: Resources from the BADvertising Institute Website
  A247) List of information

• A248-A251: Resources from the Saskatchewan Coalition for Tobacco Reduction Website
  A248) Best Practices in Tobacco Control
  A249) Building on success: Reducing Tobacco Use in Saskatchewan 2008-2010
  A250) Tobacco-free School Zones in Saskatchewan
  A251) Prevention
- **A252: Resources from the Leave the pack behind Website**
  - A252) Nursing Best Practices Guideline

- **A253-A254: Resources from the American Legacy Foundation Website**
  - A253) National Youth Tobacco Survey
  - A254) Legacy Media Tracking Survey

- **A255-A256: Resources from the American Legacy Foundation Website**
  - A255) Promoting Tobacco Free Pharmacies
  - A256) Training and Technical Assistance

- **A257-A258: Resources from the Texas Department of State Health Services Website**
  - A257) Tobacco Prevention in Texas
  - A258) Smoking and Smokeless Tobacco Media Catalog

- **A257-A258: Resources from the Texas Department of State Health Services Website**
  - A257) Tobacco Prevention in Texas
  - A258) Smoking and Smokeless Tobacco Media Catalog

- **A259-A52: Resources from the Tobacco Information Scotland Website**
  - A259) Scottish Public Health Observatory’s data on tobacco use
  - A260) Statistics on tobacco use
  - A261) Smoking cessation
  - A262) Smoke-free legislation in Scotland
### Appendix B: Glossary

**Abstinence percentage.** The percentage of smokers who achieve long-term abstinence from smoking. The most frequently used abstinence measure for this Guideline was the percentage of smokers in a group or treatment condition who were abstinent at a followup point that occurred at least 5 months after treatment.

**Acupuncture.** A treatment involving the placement of needles in specific areas of the body with the intent to promote abstinence from tobacco use. Acupuncture also can be accomplished using electrostimulation or laser.

**Addiction.** Compulsive drug use, with loss of control, the development of dependence, continued use despite negative consequences, and specific withdrawal symptoms when the drug is removed.

**All-comers.** Individuals included in a tobacco treatment study regardless of whether they sought to participate. For example, if treatment was delivered to all smokers visiting a primary care clinic, the treatment population would be coded as “all-comers.” Presumably, individuals who seek to participate in tobacco treatment studies (“want-to-quit” smokers) likely are more motivated to quit, and studies limited to these individuals may produce higher quit rates. All-comers can be contrasted with “want-to-quit” or self-selected populations.

**Agonist.** A drug action that generally mimics or enhances the effect of another drug at a neural receptor site. Nicotine is a cholinergic agonist.

**Antagonist.** A drug action that generally blocks or neutralizes the effect of another drug at a neural receptor site. Naltrexone and mecamylamine are examples of antagonists.

**Anxiolytic.** A medication used to reduce anxiety symptoms.

**Assessment.** All tobacco cessation interventions begin with identifying tobacco users and performing an assessment. The assessment is used to identify the most beneficial intervention for each smoker. Assessments may be specialized and may be ongoing throughout a smoking cessation program or occur at followups.

**Aversive smoking.** Several types of therapeutic techniques that involve smoking in an unpleasant or concentrated manner. These techniques pair smoking with negative associations or responses. Notable examples include rapid smoking, rapid puffing, focused smoking, and satiation smoking.

**Behavioral therapy.** A psychotherapeutic approach aimed at identifying and modifying the behaviors associated with human problems.

**Benzodiazepine.** Medication used as an anxiolytic. Benzodiazepines do not have an FDA indication for treating tobacco use and dependence.

**Bidis.** Small, thin, hand-rolled cigarettes, often consisting of flavored tobacco wrapped in tendu or temburni leaves. Bidis have a higher concentration of nicotine, tar, and carbon monoxide than conventional cigarettes sold in the United States. They are imported to the United States from India and other Southeast Asian countries.

**Biochemical confirmation.** The use of biological samples (expired air, blood, saliva, or urine) to measure tobacco-related compounds such as thiocyanate, cotinine, nicotine, and carboxyhemoglobin to verify users’ reports of abstinence.
**Bupropion SR (bupropion sustained-release).** A non-nicotine aid for smoking cessation, originally developed and marketed as an antidepressant. It is chemically unrelated to tricyclics, tetracyclics, selective serotonin re-uptake inhibitors, or other known antidepressant medications. Its mechanism of action is presumed to be mediated through its capacity to block the re-uptake of dopamine and norepinephrine centrally.

**Buspirone.** A nonbenzodiazepine drug with anxiolytic properties. Buspirone does not have an FDA indication for treating tobacco use and dependence.

**Coordinated intervention.** Tobacco dependence treatment strategy that involves the clinician, health care administrator, insurer, and purchaser to ensure the provision of tobacco dependence treatment as an integral element of health care delivery.

**Chronic disease model.** Recognizes the long-term nature of tobacco dependence, with an expectation that patients may have periods of relapse and remission. The chronic disease model emphasizes the importance of continued patient education, counseling, and advice over time.

**Cigarette fading/smoking reduction prequit.** An intervention strategy designed to reduce the number of cigarettes smoked or nicotine intake prior to a patient’s quit date. This may be accomplished through advice to cut down or to systematically restrict access to cigarettes. These interventions use computers and/or strategies to accomplish prequitting reductions in cigarette consumption or nicotine intake.

**Clinician.** A professional directly providing health care services.

**Clinic screening system.** The strategies used in clinics and medical practices for the delivery of clinical services. Clinic screening system interventions involve changes in protocols designed to enhance the identification of and intervention with patients who smoke. Examples include affixing tobacco use status stickers to patients’ charts, expanding the capture of vital signs to include tobacco use, incorporating tobacco use status items into patient questionnaires, and including prompts for tobacco use monitoring in electronic medical records.

**Clonidine.** An alpha-2-adrenergic agonist typically used as an antihypertensive medication, but also documented in this Guideline as an effective medication for smoking cessation.

**Cochrane Review.** A service of the Cochrane Collaboration, an international nonprofit and independent organization (www.cochrane.org/index.htm) that regularly publishes evidence-based reviews about health care interventions.

**Cognitive behavioral therapy (CBT).** A psychotherapeutic approach aimed at identifying and modifying faulty or distorted negative thinking styles and the maladaptive behaviors associated with those thinking styles.

**Combination medications.** Treatment that combines two or more nicotine-containing medications or a nicotine-containing medication with another tobacco treatment medication such as bupropion SR.

**Community-level interventions.** Interventions for the primary prevention or treatment of tobacco use that usually are not implemented in primary care practice settings. These interventions most often are implemented through mass media campaigns.

**Comorbidity.** Coexistence of tobacco use with other medical diseases/illnesses, including mental illnesses.

**Confidence intervals.** Estimated range of values, which is likely to include an unknown population parameter. The estimated range is calculated from a given set of sample data.
**Contingency contracting/instrumental contingencies.** Interventions that incorporate the use of tangible rewards for cigarette abstinence and/or costs for smoking. For the purposes of analysis, simple agreements about a quit date, or other agreements between treatment providers and patients without specifiable consequences, as well as deposits refunded based on study attendance and/or other incentives that were not contingent on smoking abstinence or relapse were not considered examples of contingency contracting.

**Continuous abstinence.** A measure of tobacco abstinence based on whether subjects are continuously abstinent from smoking/tobacco use from their quit day to a designated outcome point (e.g., end of treatment, 6 months after the quit day).

**Cost effectiveness.** Quantified analysis of tobacco dependence program costs relative to tobacco use related costs.

**Diazepam.** A benzodiazepine medication intended to reduce anxiety.

**Discrepancy.** A strategy used in motivational interviewing to highlight how a patient’s expressed priorities, values, and goals may conflict with the use of tobacco.

**Efficacy and effectiveness.** *Efficacy* is the outcome achieved from a treatment provided under near-ideal circumstances of control (typically, in a research study). Efficacy studies involve recruitment of motivated participants, random assignment, intensive assessment, and methods designed to keep participants in treatment. *Effectiveness* is the outcome achieved from a treatment provided in a “real-world setting” (in a clinic or community setting). Such studies typically involve participants who do not seek out the study or treatment, and the treatment is delivered in a manner consistent with its likely use in real-world settings. This 2008 clinical update uses the term “effectiveness” exclusively, recognizing that the majority of the studies summarized here reflect efficacy research that requires random assignment and a high degree of experimental control. This was done for purposes of clarity for its intended clinical audience.

**Environmental tobacco smoke (ETS).** Also known as “secondhand smoke” (SHS). The smoke inhaled by an individual not actively engaged in smoking, but who is exposed to smoke from the lit end of a cigarette and the smoke exhaled by the smoker.

**Exercise/fitness component.** Refers to an intervention that contains a component related to exercise/fitness. The intensity of interventions falling within this category varies from the mere provision of information/advice about exercise/fitness to exercise classes.

**Extratreatment social support component.** Interventions or elements of an intervention in which patients are provided with tools or assistance in obtaining social support outside the treatment environment. This category is distinct from intratreatment social support, in which social support is delivered directly by treatment staff.

**Fax-to-quit.** Patient referral in which the patient and health care provider fill out a form with pertinent patient information, which is faxed to a quit-line for followup.

**Food and Drug Administration (FDA).** Federal regulatory agency that has control over the safety and release of drugs marketed in the United States.

**First-line medications.** First-line medications have been found to be safe and effective for tobacco dependence treatment and have been approved by the FDA for this use. First-line medications have an established empirical record of efficacy and should be considered first as part of tobacco dependence treatment, except in cases of contraindications.

**Fluoxetine.** A selective serotonin re-uptake inhibitor used as a treatment for depression. Fluoxetine does not have an FDA indication for treating tobacco use and dependence.
Formats. Refers to tobacco dependence intervention delivery strategies that include self-help, proactive telephone counseling, computerized or e-health services, individual counseling, and group counseling.

Healthcare Effectiveness Data and Information Set (HEDIS). Serves as a “report card” for providing information on quality, utilization, enrollee access and satisfaction, and finances for managed care organizations and other health care delivery entities.

Higher intensity counseling. Refers to interventions that involve extended contact between clinicians and patients. It is coded based on the length of contact between clinicians and patients (greater than 10 minutes). If that information is unavailable, it is coded based on the content of the contact between clinicians and patients.

Hookah. A smoking pipe designed with a long tube passing through an urn of water that cools the smoke as it is drawn through. Also called “waterpipe,” “hubble-bubble,” “narghile,” “shisha.”

Hotline/helpline. A reactive telephone line dedicated to over-the-phone smoking intervention. Hotline/helpline treatment occurs when a hotline/helpline number is provided to a patient, or a referral to a hotline/helpline is made. The key distinction between a hotline/helpline and proactive telephone counseling is that, in the former, the patient must initiate each clinical contact.

Hypnosis. A treatment by which a clinician induces an altered attention state and heightened suggestibility in a tobacco user for the purpose of promoting abstinence from tobacco use. Also referred to as hypnotherapy.

Individualized interventions. Refers to tailoring an intervention to fit the needs of a particular smoker. For example, relapse prevention can be individualized based on information obtained about problems the patient has encountered in maintaining abstinence. See also Tailored Interventions.

Intent-to-treat. Treatment outcome analyses that determine abstinence percentages based on all subjects randomized to treatment conditions, rather than on just those subjects who completed the intervention or those who could be contacted at followup.

Intensive interventions. Comprehensive treatments that may occur over multiple visits for long periods of time and may be provided by more than one clinician.

Internet (Web-based) interventions. Interventions delivered through the use of a computer. The smoker may navigate within a specific Web site to access general treatment and treatment information, or the smoker may interact with a program that delivers a tailored intervention.

Intervention. An action or program that aims to bring about identifiable outcomes. In tobacco dependence treatment, the intervention generally is clinical in nature and may consist of counseling and the use of medications. Also referred to as “treatment.”

Intratreatment social support. Refers to an intervention component that is intended to provide encouragement, a sense of concern, and empathic listening as part of the treatment.

Light smoker. The field of tobacco dependence research has not achieved consensus regarding the definition of a light smoker. For this publication, it refers to anyone who smokes between 1 and 10 cigarettes per day.

Literature review. A critical analysis of the research conducted on a particular topic or question in the field of science.

Logistic regression. Statistical technique to determine the statistical association or relation between/among two or more variables, in which the dependent variable is dichotomous (has only
two levels of magnitude, e.g., abstinent vs. smoking).

**Low-intensity counseling.** Low-intensity counseling refers to interventions that involve contact between clinicians and patients that last between 3 and 10 minutes. If the information on length of contact is unavailable, it is coded based on the description of content of the clinical intervention.

**Managed care organizations (MCOs).** Any group implementing health care using managed care concepts, such as preauthorization of treatment, utilization review, system-wide quality improvement strategies, and a network of providers.

**Mecamylamine.** A nicotine antagonist used as an antihypertensive agent. Mecamylamine does not have an FDA indication for treating tobacco use and dependence.

**Meta-analysis.** A statistical technique that estimates the impact of a treatment or variable across a set of related studies, publications, or investigations.

**Minimal counseling.** Minimal counseling refers to interventions that involve very brief contact between clinicians and patients. It is coded based on the length of contact between clinicians and patients (3 minutes or less). If that information is unavailable, it is coded based on the content of the clinical intervention.

**Motivation.** Refers to a patient's intent or resolve to quit. Motivation can be bolstered through actions, such as setting a quit date, using a contract with a specified quit date, reinforcing correspondence (letters mailed from clinical/study staff congratulating the patient on his or her decision to quit or on early success), and providing information about the health risks of smoking.

**Motivational intervention.** An intervention designed to increase the smoker's motivation to quit.

**Motivational interviewing (MI).** A directive and patient-centered counseling method used to increase motivation and facilitate change.

**Naltrexone.** An opioid receptor antagonist used in substance abuse treatment. Naltrexone does not have an FDA indication for treating tobacco use and dependence.

**National Committee for Quality Assurance (NCQA).** Reviews and accredits managed care organizations, develops processes for measuring health plan performance, and disseminates information about quality so consumers can make informed choices (e.g., through “report cards,” such as HEDIS).

**Negative affect/depression intervention.** A type of intervention designed to train patients to cope with negative affect after smoking cessation. The intensity of the interventions in this category may vary from prolonged counseling to the provision of information about coping with negative moods. To receive this code, interventions target depressed mood, not simply stress. Interventions aimed at teaching subjects to cope with stressors are coded as problem-solving. When it is unclear whether an intervention is directed at negative affect/depression or at psychosocial stress, problem-solving is used as the default code.

**Neuroteratogenic.** The capability of some substances to cause abnormal development of the nervous system in the fetus.

**Neurotoxicity.** The capability of some substances to cause damage to the nervous system.

**Nicotine gum.** Nicotine-containing gum, a smoking cessation aid, that delivers nicotine through the oral mucosa. It is available without a prescription.
**Nicotine inhaler.** Nicotine-containing inhaler, a smoking cessation aid, that delivers nicotine in a vapor that is absorbed through the oral mucosa. It is available by prescription only.

**Nicotine lozenge.** Nicotine-containing hard lozenge, a smoking cessation aid, that delivers nicotine through the oral mucosa. It is available without a prescription.

**Nicotine nasal spray.** Nicotine-containing spray, a smoking cessation aid, that delivers nicotine in a mist that is absorbed in the nasal passages. It is available by prescription only.

**Nicotine patch.** A nicotine-containing patch, a smoking cessation aid, that delivers nicotine through the skin; available with or without a prescription.

**Nicotine replacement therapy (NRT).** Refers to medications containing nicotine that are intended to promote smoking cessation. There are five NRT delivery systems currently approved for use in the United States. These include nicotine gum, nicotine inhaler, nicotine lozenge, nicotine nasal spray, and nicotine patch.

**Nortriptyline.** A tricyclic antidepressant identified by the Guideline Panel as a second-line medication for smoking cessation. Nortriptyline does not have an FDA indication for treating tobacco use and dependence.

**Odds ratio.** The odds of an outcome on one variable, given the certain status of another variable(s). This ratio expresses the increase in risk of a given outcome if a specific variable is present.

**Opioid antagonists.** A class of medications that block action at opiate receptor sites. Naltrexone is one type of opioid antagonist. No opioid antagonist has an FDA indication for treating tobacco use and dependence.

**Oral mucosa.** The mucous membranes that line the mouth.

**Over-the-counter (OTC).** Drug or medication for which a prescription is not needed.

**Pay for performance.** An incentive program in which a health care purchaser provides additional payments or other rewards usually to a clinic or provider if a specified goal is met.

**Person-to-person intervention.** In-person or face-to-face contact between a clinician and a patient for the purpose of tobacco use intervention or assessment.

**Physiological monitoring/biological marker feedback.** A treatment by which a clinician provides to a tobacco user biological information, such as spirometry readings, carbon monoxide readings, or genetic susceptibility information, for the purpose of increasing abstinence from tobacco use.

**Placebo.** An inactive, harmless substance with no known direct beneficial effects. Usually used in clinical studies as a comparison to the effectiveness of an experimental drug or regimen.

**Point prevalence.** A measure of tobacco abstinence based on smoking/tobacco use occurrence within a set period (usually 7 days), prior to a followup assessment.

**Potential reduced exposure products (PREP).** Products designed to reduce levels of tobacco intoxicants including: (1) modified tobacco products, (2) tobacco products that are heated rather than burned, (3) oral, low-nitrosamine tobacco products, and (4) medicinal nicotine products (e.g., NRTs). With the exception of NRTs, little research has been conducted to evaluate PREPs.

**Practical counseling (problemsolving/skills training).** Refers to a tobacco use treatment in which tobacco users are trained to identify and cope with events or problems that increase the likelihood of their tobacco use. For example, quitters might be trained to anticipate stressful events...
and to use coping skills, such as distraction or deep breathing, to cope with an urge to smoke. Related interventions are coping skill training, relapse prevention, and stress management.

**Primary care clinician.** A clinician (e.g., in medicine; nursing; psychology; pharmacology; dentistry/oral health; physical, occupational, and respiratory therapy) who provides basic health care services for problems other than tobacco use *per se*. Primary care providers are encouraged to identify tobacco users and to intervene, regardless of whether tobacco use is the patient’s presenting problem.

**Proactive telephone counseling.** A quitline that responds to incoming calls and makes outbound followup calls. Following an initial request by the smoker or via a fax-to-quit program, the clinician initiates telephone contact to counsel the patient (see Hotline/Helpline).

**Propranolol.** A beta-adrenergic blocker often used as an antihypertensive medication. Propranolol does not have an FDA indication for treating tobacco use and dependence.

**Psychosocial interventions.** Refers to intervention strategies that are designed to increase tobacco abstinence rates due to psychological or social support mechanisms. These interventions comprise counseling, self-help, and behavioral treatment, such as rapid smoking and contingency contracting.

**Purchaser.** A corporation, company, Government agency, or other consortium that purchases health care benefits for a group of individuals.

**Quality-adjusted life years (QALY).** Measure of both the quality and the quantity of life lived. Used as a means of quantifying the benefits of a medical intervention.

**Quit day.** The day of a given cessation attempt during which a patient tries to abstain totally from tobacco use. Also refers to a motivational intervention, whereby a patient commits to quit tobacco use on a specified day.

**Quitline.** A telephone counseling service that can provide both proactive telephone counseling and reactive telephone counseling (see Proactive Telephone Counseling and Reactive Telephone Counseling).

**Randomized controlled trial.** A study in which subjects are assigned to conditions on the basis of chance, and where at least one of the conditions is a control or comparison condition.

**Random effects modeling.** A model in which both study sampling errors (variance) and between-study variation are included in the assessment of the uncertainty (confidence interval) of the results of a meta-analysis. If there is significant heterogeneity among the results of included studies, random effects models will give wider confidence intervals than fixed effect models.

**Rapid puffing/smoking.** A smoking cessation technique that involves the pairing of concentrated smoking with negative associations or responses (e.g., nausea).

**Reactive telephone counseling.** Telephone counseling that provides an immediate response to a patient-initiated call for assistance. It is a quitline intended to respond only to incoming calls (see Hotline/Helpline).

**Reference group.** In meta-analyses, refers to the group against which other groups are compared (i.e., a comparison or control group).

**Relapse.** Return to regular smoking by someone who has quit. A distinction is sometimes made between “relapse” and a “lapse” (or a “slip”), which is a return to reduced smoking or brief smoking after quitting that falls short of a return to regular smoking (see also Slip).
**Relapse prevention.** Various intervention strategies intended to prevent a recent quitter from returning to regular smoking.

**Relaxation/breathing.** An intervention strategy in which patients are trained in relaxation techniques, such as meditation and breathing exercises. This intervention should be distinguished from “problemsolving,” which includes a much wider range of stress-reduction/management strategies.

**Restricted environmental stimulation therapy (REST).** A treatment involving the use of sensory deprivation to promote abstinence from tobacco use.

**Return on investment (ROI).** Amount of money gained or lost, including money that would have been spent for health care, in relation to the amount of money needed to provide the treatment.

**Screening.** See Clinic Screening System.

**Secondhand smoke.** Also known as environmental tobacco smoke (ETS). The smoke inhaled by an individual not actively engaged in smoking, but who is exposed to smoke from the lit end of a cigarette and the smoke exhaled by the smoker.

**Second-line medications.** Second-line medications are medications for which there is evidence of efficacy for treating tobacco dependence. They have a more limited role than first-line medications because: (1) the FDA has not approved them for a tobacco dependence treatment indication, and (2) there are more concerns about potential side effects than exist with first-line medications. Second-line treatments should be considered for use on a case-by-case basis after first-line treatments have been used or considered.

**Selective Serotonin Re-uptake Inhibitors (SSRIs).** A class of antidepressant used in the treatment of clinical depression that has been studied for use in tobacco dependence treatment. No SSRI has an FDA indication for treating tobacco use and dependence.

**Self-efficacy.** One’s beliefs about his/her capability to successfully act to achieve specific goals or influence events that affect one’s life.

**Self-help.** An intervention strategy in which the patient uses a nonpharmacologic physical aid to achieve abstinence from tobacco. Self-help strategies typically involve little contact with a clinician, although some strategies (e.g., reactive hotline/helpline) involve patient-initiated contact. Types of self-help materials include: pamphlets/booklets/mailings/manuals; videos; audios; referrals to 12-step programs; mass media, community-level interventions; lists of community programs; reactive telephone hotlines/helplines; and computer programs/Internet.

**Self-reported abstinence.** Abstinence based on the patient’s claim, which may or may not be verified clinically by biochemical confirmation.

**Sertraline.** A selective serotonin re-uptake inhibitor. Sertraline does not have an FDA indication for treating tobacco use and dependence.

**Serum nicotine.** Level of nicotine in the blood. This often is used to assess a patient’s tobacco/nicotine self-administration prior to quitting, and to confirm abstinence self-reports during followup. Nicotine commonly is measured in urine and saliva.

**Serum nicotine/cotinine levels.** Level of nicotine/cotinine in the blood. Cotinine is nicotine’s major metabolite, which has a significantly longer half-life than nicotine. This often is used to estimate a patient’s tobacco/nicotine self-administration prior to quitting, and to confirm abstinence self-reports during followup. Cotinine commonly is measured in urine and saliva.
Side effects. Undesired actions or effects of a drug used in tobacco use treatment, such as insomnia or dry mouth.

Silver acetate. Silver acetate reacts with cigarette smoke to produce an unpleasant taste and has been investigated as a smoking deterrent. It is not approved by the FDA for this use.

Skills training. Refers to a tobacco use treatment in which tobacco users are trained to identify and cope with events or problems that may increase the risk of tobacco use. For example, quitters might be trained to anticipate stressful events and to use coping skills, such as distraction or deep breathing, to cope with an urge to smoke. Related interventions are practical counseling, relapse prevention, and stress management.

Slip. A brief or reduced return to smoking after quitting. Also referred to as a “lapse” (see Relapse).

Smokeless tobacco. Any form of unburned tobacco, including chewing tobacco, snus, and snuff. Use of smokeless tobacco is as addictive as smoking and can cause cancer of the gum, cheek, lip, mouth, tongue, throat, and pancreas.

Social support. Nonmedicinal support for the smoking cessation patient that provides personal encouragement and empathetic listening. Tobacco dependence treatments include two types of social supports: intratreatment social support and extratreatment social support.

Socioeconomic status (SES). Position of an individual or group in a population or society, usually based on income, education, or occupational categories.

Specialized assessments. Refers to assessment of patient characteristics, such as nicotine dependence and motivation for quitting, that may allow clinicians to tailor interventions to the needs of the individual patient.

Stepped-care. The practice of initiating treatment with a low-intensity intervention and then exposing treatment failures to successively more intense interventions.

Sudden Infant Death Syndrome (SIDS). Unexpected and sudden death of an apparently healthy infant during sleep with no autopsy evidence of disease. It is the leading cause of death in infants between 2 weeks and 1 year of age. The cause is unknown, but certain risk factors have been identified, such as prematurity; low birth-weight; birth in winter months; and mothers who are very young, smoke, are addicted to a drug, or have had a recent upper respiratory infection. Also called “cot death” and “crib death.”

Tailored interventions. Tailored interventions are based on a dimension or a subset of dimensions of the individual (i.e., weight concerns, dependency, etc.). See also Individualized Interventions.

The Joint Commission (TJC) (formerly Joint Commission on Accreditation of Healthcare Organizations, JCAHO). An independent, not-for-profit organization that evaluates and accredits more than 19,500 health care organizations in the United States, including hospitals, health care networks, managed care organizations, and health care organizations that provide home care, long-term care, behavioral health care, and laboratory and ambulatory care services.

Tobacco dependence. Dependence on any form of tobacco, including, but not exclusive to, cigarettes, pipes, cigars, and chewing tobacco.

Tobacco treatment specialists. These specialists typically provide intensive tobacco interventions. Specialists are not defined by their professional affiliation or by the field in which they trained. Rather, specialists view tobacco dependence treatment as a primary professional role. Specialists possess the skills, knowledge, and training to provide effective interventions across a range of intensities, and often are affiliated with programs offering intensive treatment interventions.
or services.

**Tobacco user.** A person addicted to one or more forms of tobacco products.

**Transdermal.** Refers to delivery of a substance by absorption through the skin. Transdermal nicotine often is used as a synonym for “nicotine patch.”

**Treatment matching.** Differential assignment of a patient to treatment based on the patient’s pretreatment characteristics. Treatment matching is based on the notion that particular types of tobacco users are most likely to benefit from particular types of treatments.

**Treatment.** An action or program that aims to bring about identifiable outcomes. For tobacco dependence, the treatment generally is clinical in nature and may consist of counseling and the use of medications. Also may be referred to as “intervention.”

**Unaided quit attempts.** Quit attempts made by patients, without the assistance of any clinical intervention or medications. Also known as “quitting cold turkey.”

**Varenicline.** FDA-approved, non-nicotine recommended smoking cessation medication. Its mechanism of action is thought to be a function of its ability to serve both as a partial nicotine receptor agonist and a nicotine receptor antagonist. Available by prescription only.

**Vital signs.** Standard patient measurements to assess the critical body functions, including blood pressure, pulse, weight, temperature, and respiratory rate. The first step (i.e., the first “A”) to providing smoking cessation interventions is identifying smokers. Vital signs should be expanded to include tobacco use status (current, former, never) or an alternative universal identification system in patient records.

**Web-based interventions.** See Internet Interventions.

**Weight/diet/nutrition.** An intervention strategy designed to address weight gain or concerns about weight gain. Interventions that teach weight/diet/ nutrition management strategies, incorporate daily/weekly weight monitoring (for reasons other than routine data collection), require or suggest energy intake maintenance/reduction, and/or convey nutritional information/tips/counseling receive this code.

**Withdrawal symptoms.** A variety of unpleasant symptoms (e.g., difficulty concentrating, irritability, anxiety, anger, depressed mood, sleep disturbance, and craving) that occur after use of an addictive drug is reduced or stopped. Withdrawal symptoms are thought to increase the risk for relapse.