



Don't Misuse Tobacco Keep it Sacred

A Message about Smoking
from First Nations Youth

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Introduction

The Creator and Mother Earth have given us many gifts. Each of these gifts has special powers and as a result, They must be respected and used in a proper way.

Among these gifts is a sacred medicine called tobacco.

Traditionally, tobacco has been used by many First Nations for healing, guidance, spiritual strength, discipline and protection.

The Elders have taught us that all medicine is powerful and that each has a good side and a bad side. If misused, tobacco, like medicines has the power to hurt you.

Today, many First Nations youth feel pressured to use tobacco in a different way. Sometimes they are pressured by their friends to smoke but mostly they are pressured by the media.

Each year tobacco companies spend millions of dollars on advertisements which tell youth that they need to smoke cigarettes in order to be cool, glamorous and exciting. What they don't tell you is just how dangerous smoking really is.

We feel that you have a right to know ALL of the facts,
So that YOU can decide what is best for YOU.

We know our youth deserve a healthy future!



Sacred Tobacco

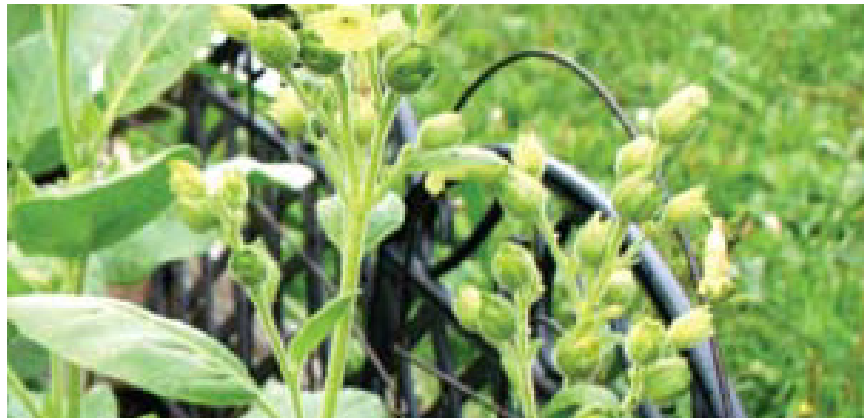
Nicotiana rustica

TOBACCO: THE MEDICINE

Traditionally, tobacco has played a very important role in many First Nations' cultures and spirituality.

Tobacco is one of the four sacred medicines (Tobacco, Sage, Cedar and Sweetgrass). These medicines have been given to us by the Creator to assist us on our journey of life as well as communication with our grandmothers and grandfathers. When the medicines are used together and properly, they are very powerful medicines.

Tobacco is from the East and is said to be the first plant that came to us from the Creator. First Nations have used tobacco to cure illnesses such as earaches, asthma, bowel problems, fever, sore eyes and insect bites and burns.



Tobacco is not always burned but is sometimes used as a means of giving thanks. Before and after killing an animal such as a deer, a hunter will often say a prayer while holding the tobacco in his left hand (the one closest to his heart) to give thanks to the Creator and to the animal for giving up its life so that the hunter can feed his family. First Nations will also place tobacco on the ground to say a prayer as an offering when picking medicines to give thanks to Mother Earth.

Tobacco is often used as a gift amongst First Nations. As a traditional practice, Tobacco is carried in medicine bundles and is also given as a special gift to Elders and other respected peoples when one is seeking advice, wisdom and knowledge.

There are many ways in which First Nations use tobacco. However, the practice of smoking tobacco from the ceremonial pipe is considered to be among the most sacred. When used in ceremonies, the pipe is used to send our prayers to the four directions, the sky and the earth. The pipe can also be used in council and everyone who participates in the ceremony pledges to the Creator, Mother Earth and the community.

Elders tell us that it was (and still is) sometimes mixed with other plants but should never be used more than three times a day.

To many different Nations, tobacco has a variety of meanings and uses. Thus, it is important that we recognize tobacco as a very sacred gift and symbol of peace that is respected and honoured. It has been told by some that tobacco was never meant to be inhaled and that people were taught and should continue to be that they should never inhale smoke into their bodies.

TRADITIONAL USES OF TOBACCO:

- To give thanks to the Creator
- To honour all creatures that have been hunted
- To honour and give thanks to Mother Earth
- To seek protection and guidance
- To seek wisdom and humility
- To help our thoughts and prayers reach the Creator



NON-TRADITIONAL USE OF TOBACCO:

There are many ways in which tobacco is used which is harmful to our health. They are not as common as cigarettes but also have a negative impact on our bodies.

This includes chewing tobacco which is ingested through the mouth and “snuff ” which is ingested through the nose.

Some of the risks include mouth cancer, throat cancer, heart disease and stroke and gum disease to name a few.

Chemicals in Cigarettes

Cigarettes:

Commercial tobacco that is used in present day is very different from traditional tobacco and has almost no connection to First Nations spirituality. The cultivation of the Tobacco plant is not done in a sacred or ceremonial fashion, it is commercially produced and chemicals are added to it throughout the manufacturing process.

Only a small fraction of the tobacco in a cigarette actually comes from the tobacco leaf. What is used inside the cigarette is actually homogenized sheet tobacco or reconstituted tobacco. What this means is that tobacco stems are mashed into a sheet and sprayed with nicotine and up to 600 other chemical additives. Ammonia is added to aid the curing process and chocolate is also added to mask the bitter flavour. The sheet is then shredded to look like leaves and rolled into cigarettes. Not only is the cigarette tobacco highly toxic so is the cigarette paper. In order to make sure that the paper burns but not too fast it is coated in many chemicals including titanium oxide which is an ingredient in jet fuel.

Here are some examples of what smokers inhale in each puff:

NICOTINE: is an addictive chemical which causes the blood vessels to “narrow”. This prevents the flow of blood and oxygen which forces the heart to work harder and beat faster.

TAR: is a sticky, black residue that contains hundreds of chemicals, some of which are toxic and classed as hazardous waste. Once tar cools inside the lungs, it damages the lung tissue.

CARBON MONOXIDE: is an invisible, odourless gas that robs the blood of valuable oxygen. It also creates cholesterol build up that can lead to heart disease.

LEAD: is a heavy metal that weakens the immune system. It can cause brain damage, kidney cancer and neuritis. If a pregnant woman smokes, the lead found in cigarettes can cause her unborn baby to have birth defects, learning problems or even cancer.

FORMALDEHYDE: it is classified by the United States Environmental Protection Agency as a probable carcinogen and registered in Canada as a pesticide. The health effects on smokers and those exposed to secondhand smoke. Some obvious symptoms are breathing problems, eye, ear, nose and throat issues but there may be more effects that have not yet been identified.

BENZENE: this is declared a Group 1 carcinogen by the International Agency for Research on Cancer and is declared toxic under the Canadian Environmental Act and any level of exposure is considered harmful.

HYDROGEN CYANIDE: is one of the most toxic chemicals found in tobacco smoke. When burned, it produces a colourless gas that smells like bitter almonds. Short-term exposure can cause headaches, nausea, dizziness and vomiting.

AMMONIA: is commonly used in fertilizers, explosives and bathroom cleansers. It can cause illness and make existing breathing problems worse.

CADMIUM: is a metal that accumulates inside the lungs and stays there. It causes cancer, high blood pressure, emphysema and early death.

Although cigarette companies are required to list tar, nicotine and carbon monoxide contents on cigarette packages, they do not have to list other ingredients of tobacco or tobacco smoke. Thus, no one knows just how many chemicals they are inhaling.

First Nations Youth on Smoking

Tony Copegog

Christian Island

“I think that tobacco was meant to be used for spiritual things.”

Fallon King

Christian Island

“I know that smoking causes cancer and that one pack reduces your life by seven minutes. Second hand smoke is also definitely worse than firsthand.”

Secondhand Smoke (SHS)

As First Nations, we have always been taught to respect others. Many believe that smoking is an individual choice and what we choose to do with our bodies is a personal decision.

Not only is tobacco smoke harmful to the person smoking it is has become clear that secondhand smoke is harmful to those around us. The exact level of damage SHS causes can not be determined but we know that the effects can be quite severe. SHS is more dangerous than mainstream smoke. There is over three times the amount of tar, and over six times the amount of nicotine in SHS than in smoke that is inhaled directly into the lungs by a smoker. An estimated 4,000 people are killed annually in Canada by SHS.

SHS is made up of smoke that is exhaled by a smoker and the smoke that comes from the burning end of a cigarette. At least two-thirds of the smoke from each cigarette goes into the air, even when smokers are inhaling. Your home, workplace and public gathering spaces are locations where people who are not smoking are exposed to SHS. In the home, children are especially vulnerable to exposure from adult smoke.

SHS can cause immediate short-term health issues including nasal discomfort, eye irritation, headaches, nausea and dizziness, and allergic reactions. Long-term health problems also result directly from the inhalation of SHS, including various cancers.

Spouses of smokers have a 34 per cent higher risk of getting lung cancer than those whose partners are non-smokers. Children who are exposed to SHS are twice as likely to suffer from respiratory diseases like asthma, bronchitis, and pneumonia. It is important to note that Nonsmoking pregnant mothers who are near smokers also place their babies at high risk. First Nations communities are often over-crowded, and because so many people in the community smoke, we need to be careful that we do not put others at risk.

One way is by making our homes smoke-free. If you are a smoker, please respect the rights and health of others by not smoking in their presence.

DID YOU KNOW?

Ammonia is 73 times greater in secondhand smoke. It is used in household cleaning products and in the manufacture of explosives.

Tar is 70% more concentrated in the secondhand smoke. When inhaled, it cools inside the lungs and forms a sticky mass which damages delicate lung tissue.

Nicotine is 2.7 times greater in secondhand smoke. It makes the heart beat faster by narrowing the blood vessels and decreasing the flow of blood and oxygen.

Carbon monoxide is 2.5 times greater in secondhand smoke. It robs the red blood vessels of oxygen and stays in the blood stream for up to six hours after exposure creating fatigue and build-up of cholesterol in the blood.

Nearly half of First Nations youth (44.2%) of youth are exposed to cigarette smoke in their homes.

Smoking During Pregnancy

Every breath that a pregnant woman takes can affect the health and development of her unborn baby. If a pregnant woman smokes or breathes in side stream smoke, the toxic chemicals she inhales can pass from her blood, through the placenta (the organ that nourishes the baby) and enters directly into the baby's blood.

It was reported during the 2002/2003 RHS that just over half of First Nations women who were pregnant smoked, as compared to only 26 per cent of pregnant non- Aboriginal mothers.

THE RESULTS CAN BE DEVASTATING.

Recent studies show that smoking by pregnant women can harm babies in the womb, at the time

of birth and in the weeks and years after birth¹.

Smoking during pregnancy increases the chance of:

- Premature labour
- Miscarriage
- Fetal and neonatal death
- Premature delivery
- Low birth weight
- Birth defects
- Behavioral problems; like ADHD
- Early on set of adult diabetes
- Respiratory conditions among infants and children

Smoking during pregnancy is estimated to account for 20 to 30 percent of low birth weight babies, 14 per cent early births and 10 per cent of infant death or SIDS (Sudden Infant Death Syndrome).



Studies also show that children of smokers are prone to respiratory diseases and are shorter than children of non-smokers.

When a pregnant woman smokes, her baby is confined to a smoke-filled womb. His heart speeds up, he coughs and sputters, and worst of all, because he can't get enough oxygen, he can't grow and thrive as he should. One of the best gifts that you can give a baby is the opportunity to grow in a smoke-free environment.

BREAST-FEEDING

Many women who manage to stop smoking while they are pregnant, start again as soon as the baby is born. In doing so, they expose their babies to a mixture of toxic chemicals created from secondhand smoke and they also pass harmful chemicals to their babies through their breast milk. They also tend to stop breastfeeding sooner.

IF QUITTING SEEMS HARD...

Remember: the worst effects of withdrawal may last a few days to a few weeks. The benefits however, will last a lifetime – for both you and the baby!

¹Information derived from the following studies:

~ Chen Y, Li WX, Yu AZ and Quian WH. (1988) 'Chang-Ning epidemiological study of children's health.

1. Passive smoke and children's respiratory disease,' Int J Epidemiology, 17, 348-355.

~ Kleinman JC, Piere MB, Madans JH, Garlang HL and Schramm WF. 1988 'The effects of maternal smoking on fetal and infant mortality,' Am J Epidemiology, 127, 274-282.

Smoking and Children

As you get older, many of the decisions that you make will have an important impact on your future.

Many people feel that they are entitled to make their own decisions about whether or not they choose to smoke. Few realize that the choices they make can have important consequences for others, particularly children.

Did you know that the most common, harmful source of indoor pollution is tobacco smoke?

Less than one-third of the smoke from a cigarette is inhaled by the smoker. The rest of the smoke enters the surrounding air, carrying with it 4,000 chemicals, including poisons which can cause cancer and other illnesses. When you smoke, the people around you are forced to breathe in these chemicals.

Since children breathe faster than adults do, they inhale more air and more pollution.

Thus, children whose parents or other family members who smoke have:

- More illnesses
- More coughing and wheezing
- More hospitalization due to bronchitis and pneumonia
- More asthma and respiratory infections

Children who have family members who smoke are also twice as likely to start smoking.



Health Effects of Smoking Among Young People

Among young people, the short-term health consequences of smoking include respiratory and nonrespiratory effects, addiction to nicotine, and the associated risk of other drug use. Longterm health consequences of youth smoking are reinforced by the fact that most young people who smoke regularly continue to smoke throughout adulthood.¹

The average age First Nations youth begin smoking is 12 years old.

Average First Nations female youth between 11 and 16 years of age have the highest smoking rates in Canada.

- Cigarette smokers have a lower level of lung function than those persons who have never smoked.¹
- Smoking reduces the rate of lung growth.¹
- In adults, cigarette smoking causes heart disease and stroke. Studies have shown that early signs of these diseases can be found in adolescents who smoke.¹
- Smoking hurts young people's physical fitness in terms of both performance and endurance---even among young people trained in competitive running.¹
- On average, someone who smokes a pack or more of cigarettes each day lives 7 years less than someone who never smoked.²
- The resting heart rates of young adult smokers are two to three beats per minute faster than nonsmokers.¹
- Smoking at an early age increases the risk of lung cancer. For most smoking-related cancers, the risk rises as the individual continues to smoke.¹

Teenage smokers suffer from shortness of breath almost three times as often as teens who don't smoke, and produce phlegm more than twice as often as teens who don't smoke.³

- Asthma affects 13.6 per cent of First Nations youth and exposure to secondhand smoke may contribute to worsening of the condition and its symptoms.
- Teenage smokers are more likely to have seen a doctor or other health professionals for an emotional or psychological complaint.³
- Younger First Nations adults, aged 18-29 years, have the highest proportion of daily smokers (53.9%).
- Teens who smoke are three times more likely than nonsmokers to use alcohol, eight times more likely to use marijuana, and 22 times more likely to use cocaine. Smoking is associated with a host of other risky behaviors, such as fighting and engaging in unprotected sex.¹
- Youth whose friends do not smoke are four times less likely to smoke.
- Youth whose parents do not smoke and disapprove of smoking are two times less likely to smoke.
- It is important that we act now and educate First Nations youth from an early age regarding the effects of smoking. We need to provide role models and encourage positive and healthy lifestyle choices for youth. We also need to ensure that we provide the necessary supports and systems for our youth if they do become smokers. It is important that we address the needs of our youth in a way that will encourage and support them.

References

1. CDC, Preventing Tobacco Use Among Young People---A Report of the Surgeon General, 1994.
2. Lew EA, Garfinkel L. Differences in Mortality and Longevity by Sex, Smoking Habits and Health Status, Society of Actuaries Transactions, 1987.
3. AJHP, Arday DR, Giovino GA, Schulman J, Nelson DE, Mowery P, Samet JM, et al. Cigarette smoking and self-reported health problems among U.S. high school seniors, 1982-1989, p. 111-116.

Office on Smoking and Health
 National Center for Chronic Disease Prevention and Health Promotion
 Centers for Disease Control and Prevention
 August 1996

Health Effects of Smoking Among Young People

Tobacco is very addictive. Every day, over 300 young people try smoking for the first time. Many of them quickly become addicted. Recent studies show that one-half of all smokers started before age 15. Among children aged 3-7, at least 25% have actually tried smoking and 80% of them will end up smoking in the future. As First Nations, one of our most powerful methods of teaching is through our actions and by setting an example.



You can be an important role model by choosing to be healthy and by only using tobacco in a respectful and sacred way.

Smoking and Cancer

Cancer did not exist among First Nations' people until 1926. Extreme changes in our diet and way of life have left us open to a number of new diseases.

It was not that long ago that First Nations people used tobacco strictly for ceremonial and medicinal purposes. Nearly six in ten First Nations adults (58.8%) are current smokers. RHS 02/03.

Smoking is a very dangerous habit. In fact, more than 50 of the chemicals used in tobacco cause cancer in humans. In Canada, over 16,000 people die of cancer caused by smoking each year. At present there are no national statistics available for First Nations rates but in general the Canadian Cancer Society estimated that in 2010:

- An estimated 11,200 women will be diagnosed with lung cancer and 9,400 will die of it.
- An estimated 12,900 men will be diagnosed with lung cancer and 11,200 will die of it.
- On average, 465 Canadians will be diagnosed with lung cancer every week.
- On average, 395 Canadians will die of lung cancer every week.

Although lung cancer is not always caused strictly by smoking the correlation between lung cancer and smoking is very high. Many First Nations communities are not equipped to treat cancer. This will mean that community members will have to leave their home to receive treatment in the larger urban centers and higher health costs for our communities.

Read more: http://www.cancer.ca/Canada-wide/About%20cancer/Cancer%20statistics/Stats%20at%20a%20glance/Lung%20cancer.aspx?sc_lang=en#ixzz1CdmWbxfu

What is cancer?

Cancer is a disease. It develops when abnormal cells grow and multiply in some organs or tissues of the body. These cells usually gather together to form a tumor. However, they sometimes just keep multiplying without ever forming a tumor. Instead, these cells travel through the body in the blood and other body fluids.

Tumors that grow in only one part of the body are not cancerous. These are called benign tumors. They can cause serious illness if they develop in the brain or other enclosed areas of the body.

Tumors that have the potential to invade and destroy nearby normal tissue as well as spread to other body sites are cancerous and are known as malignant tumors.

Smoking and Cancer

Cigarette smoking is a direct cause of cancer. It can cause cancer of the lung, oral cavity, pharynx, larynx, esophagus, pancreas, kidney, bladder and cervix. Smokeless tobacco like “snuff ” or chewing tobacco also causes cancer of the mouth.

Most deaths from lung cancer are caused by smoking. Lung cancer is most often found in people between 50-70 years old who have a long history of smoking. However, cancer can affect anyone no matter what their age may be. The best protection against lung cancer is not to smoke!

DID YOU KNOW?

The death rate for lung cancer has tripled among women since 1970. The non-smoking partners of people who smoke have a 30% increased risk of lung cancer compared to people who have non-smoking partners.

Oral Cancer: smoking increases the risk of oral cancer by three to four times.

Larynx Cancer: women who smoke have nine times the risk of developing this cancer than do men.

Throat Cancer: the risk of throat cancer among smokers is increased by two to nine times.

Lung Cancer: every 2.5 hours a woman in Canada dies from smoking- induced lung cancer. The death rate for the average smoker (1 pack a day) decreases nearly 50% after quitting.

Kidney & Bladder Cancer: Aboriginal people who smoke are seven to thirteen times more at risk for these types of cancer than are other Canadians.

Cervical Cancer: the risk of developing cervical cancer among Aboriginal women who smoke is four times greater than that of the mainstream female population.

Heart Disease

Whether we smoke or chew tobacco, this habit can be very harmful to many of the organs inside our bodies.

Among the organs most affected is the heart. All smokers are at risk of heart disease, stroke or diseases of the blood vessels. Every year, over 80,000 Canadians die of a heart attack or stroke.

More smokers die from heart disease than from lung cancer. When you smoke, the nicotine in the cigarette causes the heart to beat faster and forces it to work harder. A second chemical known as carbon monoxide robs the blood of oxygen. As a result, the heart does not receive all of the oxygen that it needs.

Smoking can also lead to arteriosclerosis or hardening of the arteries, which is a build up of fat (or cholesterol) on the inside walls of the arteries. When this condition affects the legs, it is called peripheral vascular disease. It can lead to leg pain, difficulty in walking, gangrene and ultimately loss of limb.

According to the 2002/2003 RHS, data heart disease is much more common within First Nation adults than the general Canadian population. The rate is 7.6 % in First Nation adults as compared to 5.6 % in the general Canadian population.

Also heart disease is more common in First Nation women 8 % compared to 5.1% of the general population, notably the high rate of heart disease for women aged 60 and over is 22.4 % compared to the general population of women 60 and over at 15.6 %.

First Nations Youth on Smoking

Julie Armstrong

Christian Island

“Yes, I think that secondhand smoke is dangerous because it hurts your lungs.”

Bill Roberts

Chippewas of Rama

“I tried my first cigarette at 13. Everyone was doing it. I stopped at 16 because I felt the toll and my dad died of lung cancer. It scared me.”

DID YOU KNOW?

Smokers are twice as likely to have a stroke as non smokers.

Women who smoke and also use oral contraceptives such as “the pill” are 10-20 times more likely to experience heart attacks or stroke than non-smokers.

HOW TO REDUCE THE RISKS:

Stop smoking.

- Avoid secondhand smoke.
- Eat a well-balanced diet.
- Maintain a healthy weight.
- Make exercise a part of your lifestyle.

Tobacco-related cardiovascular disease is the largest cause of premature deaths in Canada. Regardless of how long or how much you smoke, your risk of heart disease increases each time you light a cigarette. It is important to stop smoking before any signs of heart disease appear.

Breaking the Smoking Habit

Team up with a friend who also wants to quit smoking. This way, you can rely upon one another to help overcome temptation.

Figure out why you smoke. For example, do you smoke for pleasure, stimulation or relaxation, to reduce tension or frustration, to have something in your hand or mouth, to satisfy a craving?

Perhaps you smoke out of habit, lighting up without thinking about it. Once you understand why you smoke, you should be able to find substitute activities.

Breaking the Habit

Make a list of reasons that outline why you should quit.

Choose your method of quitting. Do you want to go cold turkey or to taper off? Either way, pick a “last day” that isn’t far off. Plan a full day of activities for that date. These should be activities that do not include smoking.

Try to overcome your urge to smoke. Use any and all of the following techniques that you think will help:

If you smoke mainly to keep your hands busy, try playing with a pencil, a straw, a ball or doing beadwork. Write a letter to a friend, start jogging or learning to play a musical instrument – anything that might make you forget to reach for a cigarette.

If you smoke to have something in your mouth, try a substitute such as chewing gum or raw vegetables. Avoid eating junk food such as chips or chocolates.

If you smoke to reduce tension and relax, try exercise instead. Try listening to soothing music or practicing some new dance steps for that next pow-wow.

If you smoke for pleasure, seek enjoyment in other activities, preferably in smoke-free situations.

Go to a movie or attend a cultural event.

If you smoke out of habit, avoid the settings in which you habitually smoke and friends who smoke. Avoid bingo halls, arcades, or places where people tend to do a lot of smoking. Go to places where there are “nosmoking” rules instead.

Start saving your cigarette money in a piggy bank. Is there something that you have wanted to buy for some time now, but just haven't had the money? For example, maybe you've had your eye on some new roller blades or a CD player? If you are spending money on a pack a day or even a pack a week, you'll be surprised at how quickly your savings will add up.



When you feel the urge to smoke, take several deep breaths with a pause between each. Hold the last breath while you strike a match. Exhale slowly, blowing out the match. Pretend it was a cigarette and crush it out. The secret is to avoid that first puff.

If you slip up and have a cigarette, don't despair. Just get right back on your program, knowing that every cigarette you don't smoke improves your health and saves you money.

Look at smoking as a non-negotiable (no-choice) issue. When you were a smoker, you couldn't smoke in the theatre, on the bus, in stores or even in some restaurants. That was that. Now you have to tell yourself that you can't smoke, period. That is that.

Reasons to Quit Smoking

There are a lot of good reasons to quit smoking.

Your health and self-confidence will improve.

You will have more energy for sports.

You will no longer have tar stains on your fingers.

Your breath will smell more pleasant.

You will not expose others to the dangers of smoking.

You will be free of smoker's cough.

You will save money.

Your clothing and hair will not smell of smoke.

Your sense of taste and smell will improve.

You will accomplish more.

You will be healthier.

You will feel great!

There are a number of resources that are available to help you quit smoking. There are prescription medications that may help with quitting smoking. Some of the other cessation aids like the patch, nasal sprays or nicotine gums a prescribed pill may be more effective. There are also programs that are available in the different provinces. The AFN will have a link coming soon to the different programs that are available in your region. Please visit www.afn.ca to find a more detailed listing.

Other links that are available include:

www.cancer.ca

www.smokershelpline.ca

www.camh.net

www.nnapf.ca

www.findhelp.com



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