

Counseling: Foremost Step in Non Pharmacological Approaches of Tobacco Cessation

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ABSTRACT

Counseling is a learning oriented process, which occurs usually in an interactive relationship, with the aim of helping a person learn more about the self, and to use such understanding to enable the person to become an effective member of society. That's why Counseling can be used for tobacco cessation. The effect of intensive counseling compared to minimal counseling by a doctor was greater amongst trials with patients with, or at high risk of smoking related disease. General practitioners appear to be more willing to give advice to stop to smokers with smoking related diseases. This is despite evidence that smokers with smoking related diseases do not respond better to such advice than others.

KEYWORDS: Counseling, Non- Pharmacological Approach, Tobacco Cessation

INTRODUCTION

The "Smoking Cessation Clinic", as its first practical experience, started its work according to the recommended programme of WHO, in the form of "Minimal Intervention Method", with the aim of guiding and treating the cigarette smokers. Dentists are ideally placed to give advice and encourage patients to quit, promote smoking cessation.¹

For tobacco cessation the best method could be the counseling, the dentist is usually to assist the person in realizing a change in behavior or attitude, or to seek achievement of goals. Tobacco is an addiction which by the way of motivation can lead him to quit using tobacco.²

According to (Feltharn and Dryden., 1993) "Counseling is a principled relationship characterized by the application of one or more psychological theories and a recognized set of communication skills, modified by experience, intuition and other interpersonal factors, to clients intimate concerns, problems or aspirations". Its predominant ethos is one of the facilitation rather than of advice-giving or coercion. It may be of very brief or long duration, take place in an organizational or private practice setting and may or may not overlap with practical, medical and other matters of personal welfare.³

ELEMENTS OF COUNSELING

- An empathetic relationship⁴
- The counselor and client relates well

- The counselor sticks closely to the clients problems
- The client feels free to say what they like
- An atmosphere of mutual trust and confidence exists
- Rapport is essential

QUALITIES OF A COUNSELOR

Counselor is the one who counsels the patient in need and who fulfil the following criterias^{4,5} :-

- **Empathy** - he must have the ability to stand empathetically with clients and see the world as they see it
- **Warmth** - he must have politeness in his voice, delicate one.
- **Genuineness** - Professional manner but friendly manner.
- **Positive regard**- Disposition towards others is positive.
- **Concreteness**- Get to listen, Listens empathetically, Clarifies the thoughts which leads to logical conclusion.

DUTIES AND RESPONSIBILITIES OF A COUNSELOR

Counselor has many responsibilities in tobacco cesaation.They are listed as under:^{5,6}

- Establish rapport with smoker.
- Assess smoking history, nicotine dependence, and

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readiness to quit.

- Develop a clinical impression and prepare a quit plan.
- Provide counseling, health education, and relevant advice to the smoker.
- Maintain clear and accurate records.
- Arrange follow-up.

The other duties are as follows:

Getting started- make the patient to sit comfortable in front of you. The first impression of a counselor to the patient is very important.

Introductory talk- counselor should start with the introduction of the patient. His normal life style, liking, disliking, his attitude towards life, is he a responsible citizen.

Identifying the issues- while talking to the patient the counselor must identify the main issues for which the patient came to you, he should not be aware of the fact that he is sick or he needs any kind of treatment.

Coping with feelings- counselor should be strong enough that he can cope up with the feelings of the patient and handle them in a right way.

Identifying possible solutions- counselor should try to find out the best possible solution for the patient's problem for which he came to the counselor.

Agreeing a plan- patient should be agreed to the plan of action.

Implementing the plan- after knowing all the findings the counselor must be able to plan the schedule how he going to counsel the patient.

Review-Evaluation should be carried out like after completing the counseling positive and negative feedback about the counseling should be taken from the patient. It will help to enhance the skill of a counselor.

REQUIREMENTS TO ESTABLISH TOBACCO COUNSELING CENTER

There are various requirements for establishing tobacco counselling centre:⁵⁻⁷

Physical setting- the environment of the clinic should be healthy and positive.

Privacy- proper room is there where patient can talk freely to the counselor.

Rapport- proper rapport should be maintained between the patient and the counselor.

Test material should be available – all the materials like health education videos, pamphlets and other tobacco cessation models should be there in the clinic

Maintain confidentiality- patient does not want his habits to be known by others. So, the counselor should keep all the things confidential

Communication- there should be proper communication between the two. Patient should not hesitate from the counselor and should not hide anything from the counselor.

Attentiveness- counselor should be very particular in what he trying to deliver the patient the attentiveness of the counselor is very important.

METHODS IN COUNSELING

There is various method of tobacco counseling-

- Group counseling.
- Individual counseling.

Group counseling: Group therapy offers individuals the opportunity to learn behavioural techniques for smoking cessation, and to provide each other with mutual support. Groups may be led by professional facilitators, clinical psychologists, health educators, nurses, doctors, or successful peers. They may be conducted in different settings and may vary in intensity, number and duration of sessions as well as total duration.⁸ Suggested components of a best practice group cessation clinic program include:^{7,8}

- Setting a specific quit date.
- Learning to interrupt the conditioned responses that support smoking by self monitoring.
- Making plans for coping with temptations to smoke following cessation; and providing follow-up contact and social support for quitting and continued abstinence.

Individual counseling: Intensive interventions by health care providers are usually defined as those that take more than ten minutes per session. Individual counseling was limited to counseling provided by specialist counselors and not by health care providers during usual care. Counseling was also required to be of at least 10 minutes duration.^{7,2,9,10} The counseling interventions typically included the following components:

- Review of the participant's smoking history and motivation to quit.
- Help in identification of high-risk situations and smoking cues.
- Generation of problem-solving strategies to deal with high-risk situations.

VARIOUS MODELS FOR COUNSELING PATIENTS

1. **By 5 A's model** - The guideline urges every health care provider to follow a 5 A's protocol with all tobacco users who are willing to quit. The 5A's are the following: ASK , ADVICE, ASSESS , ASSIST , ARRANGE.
2. **By 5 R's model** - The guideline recommends a motivational counseling intervention that emphasizes the 5R's, if the patient is unwilling to quit: RELEVANCE, RISKS, REWARDS, ROADBLOCKS, REPITITION.

3. **By AWARD model** – ASK ,WARN, ASSESS, REFER, DO IT AGAIN
4. **Motivational Interviewing Strategies** - There are 4 principles of motivational interviewing:- Express empathy, Develop discrepancy, Roll with Resistance, Support Self-efficacy.
5. **Telephone Based Counseling** - Telephone counseling is a popular modality for smoking cessation treatment, comes in two main forms: “reactive counseling” where smokers call a help line seeking help & advice and “proactive counseling” where smokers receive calls from counselors according to a prearranged schedule.
6. **Self Help Made Materials (Video self help material)** - Videos are commonly used in a variety of settings to provide information on health behaviors. Self-help programs for smoking cessation generally consist of printed or electronic materials given to patients to increase motivation to quit and provide advice on how to accomplish this goal.

CONCLUSION

The effect of intensive counseling compared to minimal counseling by a doctor was greater amongst trials with patients with, or at high risk of smoking related disease. General practitioners appear to be more willing to give advice to stop to smokers with smoking related diseases. This is despite evidence that smokers with smoking related diseases do not respond better to such advice than others.

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