

**MODULE 4**  
**SMOKING AND NICOTINE CESSATION**

**Motivations and Strategies for  
Smoking and Nicotine Cessation**

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1. My dependence is:

Mild

Moderate

Strong

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2. My Motivation for quitting:

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3. Set a time bound goal

Pick a Date: \_\_\_\_\_

**My strategies to assist quitting**

**Two or more strategies are better than one**

Talk to my provider about long lasting and quick acting nicotine replacement

Have a friend or family member support me

Have gum, toothpicks, healthy snacks available

Have puzzles, toys or tools to keep me distracted

Exercise

Listen to music

Try relaxation or meditation

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**Plan for cravings**

**To get past a craving, I can:**

(examples)

Use my planned nicotine replacement

Delay, distract, drink water, deep breathing, discuss

Keep my mind, hands and mouth busy (puzzle, pencil, gum or toothpick)

Change my routines (where I drink my coffee/tea, call a friend, go outside)

**When I feel bored, lonely or emotional and want to smoke I can:**

(fill in what works best for you)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**To avoid other smokers, I can:**

(fill in what works best for you)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**After I quit, I will celebrate myself as a non-smoker/non-nic-user by:**

Day 1: \_\_\_\_\_

Day 2: \_\_\_\_\_

Day 3: \_\_\_\_\_

1 Week: \_\_\_\_\_

3 Weeks (my 21 days new habit): \_\_\_\_\_

3 Months (my likelihood of quitting just got better): \_\_\_\_\_

1 Year: \_\_\_\_\_

**If I slip-up, I will not give up. I will review my motivations and strategies, and try again!**