How Smoking Harms Us











موم¹ ۲ مے، خرمہ ⁵ ال RÉGIE RÉGIONALE DE LA NUNAVIK REGIONAL SANTÉ ET DES SERVICES BOARD OF HEALT SOCIAL SERVICES BOARD OF HEALT



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How Smoking Harms Us

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ISBN 978-1-989298-06-0

Written by Merryl Hammond, PhD and Rob Collins Illustrations by Martin Aubry All graphics © 2022 Consultancy for Alternative Education (CAE Canada) 6 Sunny Acres • Baie-D'Urfé • Québec • H9X 3B6 • Canada T: (514) 457-4347 / (514) 457-4990 cae.canada@icloud.com

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Contents

Foreword by Vicky Greyiv			
1.	Smoking was never part of Inuit culture	1	
2.	People smoke for very good reasons, but	3	
3.	Smoking is an addiction	6	
4.	Smoking burns our cash	8	
5.	Smoking makes tobacco companies super rich		
6.	Smoking steals our looks and beauty	11	
7.	Smoking harms our health	12	
8.	Smoking kills		
9.	Second-hand smoke affects everyone		
10.	Smoking harms unborn babies		
Conclusion: What do <i>you</i> think?			

Foreword by Vicky Grey

I believe that Nunavimmiut need to learn the true facts about how smoking is so very harmful to our own health and to the people around us. We need to learn about the consequences of smoking for our health: all kinds of diseases plus cancers—all of which are preventable—and in the end, of course, death. Tobacco contains nicotine that is very addictive, and we need to understand that it is very hard to quit once we are hooked.

That's why we need to learn about *How Smoking Harms Us*. That is what this booklet is all about.

Nunavimmiut have been surveyed so much over the years: survey after survey, and nothing much changes in the statistics. It's always around 80% of Inuit adults in Nunavik who smoke. That is very, very high. I say: enough surveys; we need action! I hope that this resource will help motivate you to re-think your own tobacco use and motivate you to quit smoking for good. Or, if you're a non-smoker, to help others quit.

If I had to choose just one section in this book to share, I would select section 10 about how smoking harms unborn babies. A pregnant woman who smokes is harming her fetus. The baby can be born early and small (low birth weight) and may experience health problems that are unnecessary and avoidable: frequent ear infections, asthma, bronchitis, hospitalizations, long term health problems, and other tobacco-related problems and health issues in their young life. All because the mother smoked while pregnant.

If I could wave a magic wand, my wish would be to see Nunavimmiut smoke-free like our ancestors all used to be; healthier Inuit without tobacco-related diseases. And children would not endure health problems, including from exposure to second-hand smoke in homes, vehicles, and amautiit.

I myself was a smoker for many years. I would smoke for maybe five years, then quit for two or three years, then smoke again... It was like a yo-yo! Finally, I quit for good and have been a non-smoker for ten years. I hope that what you learn in this booklet will inspire *you* to quit smoking—once and for all.

Good luck!

Vicky Grey

Health Promotion Officer, Smoking Prevention & Cessation Nunavik Regional Board of Health and Social Services



When qallunaat (Europeans)—traders, whalers, and missionaries—started arriving in the North, they brought tobacco. (And also alcohol. Sugar. Tea. Coffee. And later, drugs.)

At first, it was mainly lnuit men who smoked, and not very much because tobacco was very hard to get. Inuit would travel great distances, trading furs for tobacco. But later, around the 1940s, more and more people started to smoke.



Can you guess what percentage of Nunavimmiut smoke these days?

According to the *Qanuilirpitaa? 2017 Health Survey*, 72% of Nunavimmiut aged 16 and over smoke daily. That's more than 7 out of every 10 people. Another 8% smoke occasionally.



(In Canada as a whole, the smoking rate has dropped to about 15%.)



Have you ever wondered why so many Inuit (and other Indigenous people in Canada and around the world) smoke, compared to non-Indigenous people?

Let's examine this question in section 2 which follows next.

2. People smoke for very good reasons, but ...



Your guess:

Quick explanation about colonization

Indigenous people around the world have suffered from **colonization**, when our land was occupied by outsiders (settlers).

Also, from cultural oppression, when Indigenous culture was devalued and even deliberately damaged (like at residential schools, for example, or by forcing us to learn a new language) to assimilate us into the mainstream, imported culture.

Recently, many Indigenous people are working to reclaim and revitalize their cultures, traditions, languages, spiritual practices, etc. as part of a process of **decolonization**.

As it says on the website of the Nunavik Regional Board of Health and Social Services:

"Nunavimmiut have experienced major changes in their living conditions. Unresolved trauma and regular crisis and grief experiences can lead to detrimental coping mechanisms, such as substance abuse. The use of tobacco, alcohol, cannabis and other drugs can affect the health and wellness of individuals, families and whole communities." The processes of colonization, cultural disruption, and historical trauma have changed everything. Inuit families went from living independently out on the land to being moved into communities, being subjected to residential schools, the Sixties Scoop, poverty, inadequate and overcrowded housing, and many other major lifestyle changes.





These processes have understandably caused many people to "bury themselves" in addictions including smoking, alcohol and other substance abuse, overeating, gambling, etc.



I never thought of it like that before. I always just felt bad when they tell us that Inuit have very high rates of smoking, and alcohol and drug abuse, and family violence, and suicide, etc. Now it all makes sense!

When people feel bad about what's been taken away from them, and what's been forced onto them, of course they're going to try to forget or to feel better somehow. And smoking is just one ofmany harmful options we can use...

> We don't often get to think critically about issues like this. We grew up with smokers all around us, so smoking just seems normal.

It's not often seen for what it really is: part of the bigger picture of colonization and cultural oppression.

If it could help you to quit, get angry about all the negative things that happened in the past, and continue today. See quitting smoking as a way you can take back something that was taken away before. Pride. Independence. Autonomy. Control. Freedom. When we understand the wider context about the impacts of colonization, we avoid "blaming the victims" -people who use smoking and other addictions as a survival strategy. But addictions harm —and even kill—many people. So we need to work with individuals, families, and communities to help them heal. People need to explore and use healthier survival strategies (e.g., support_ groups, exercise clubs, cultural or recreational activities) that will eventually contribute to community and even cultural renewal and regeneration.

3. Smoking is an addiction

How would you define or explain "addiction"?

An addiction is an unhealthy relationship with anything (e.g. substance, person, event, activity, or experience) that affects our mood and causes major problems in our life.

Do you know what the addictive drug in tobacco is called?

lt's nicotine.

Did you know: Health experts say that nicotine is even more addictive than heroin and cocaine.



At first, smoking may seem like a cool thing to do. You don't think too much about it. You just start smoking like so many others around you.

We call this the "honeymoon phase" of the addiction, when you just *love* smoking.

But then, before you know it, you get hooked.

You can't go anywhere without your smokes. Smoking is a burden you carry with you wherever you go.







If you smoke, which stage are you at: smoking is cool; honeymoon phase; I'm hooked; smoking is a burden; addiction jail.



Quick quiz: are you addicted to nicotine?

For each question, just answer True or False, then check your answers below.

- 1. I have a "relationship" with my tobacco. (The thought of giving it up makes me feel sad, upset, or anxious. I feel like I can't live without nicotine.) *True/False*
- 2. Smoking—or not smoking—affects my mood. *True/False*
- 3. Smoking will cause problems in my life (money, health, or relationship problems). True/False

Quiz answers

If you answered *True* to all three questions, you are addicted to nicotine. That's the same drug people from every culture on earth got addicted to when they first started using it.

And did you know: Research has shown that smokers often move on to using alcohol, weed, and other drugs.

In fact, you could say that nicotine is a "bridge" to these other substances, as the drawing on the right shows.

Nicotine is a gateway drug to other harmful substances

We call nicotine a "gateway drug" because it "opens the gate" to other substance abuse and addictions.

Think about non-smokers you know. Do some or many also avoid using alcohol and other harmful substances as well?

4. Smoking burns our cash



Did you know:



In Canada, underage youth spend a half billion dollars each year on tobacco.

That's a half billion dollars, not million! (Another way of saying this is \$500 million.)



And Canadians of all ages spend \$52 billion on tobacco each year. Yikes: what a huge waste of money!





5. Smoking makes tobacco companies super rich

In the previous section, we discussed how much money smokers spend on tobacco. Now we must ask: Who's getting rich from all this spending? Look at this drawing to see what's happening.



The money of smokers goes straight into the pockets of Big Tobacco companies and bosses. They get richer and richer while smokers get poorer and poorer (and sicker, too, of course).

Every time a smoker buys a pack, they make the tobacco companies even richer.

"Big Tobacco" tells lies

Tobacco companies lied about nicotine for many years, saying that it's **not** addictive and that smoking is "safe."

And they advertise to attract children and youth to get hooked and to buy their brands

"Big Tobacco" gets richer and richer off smokers The companies even used to produce candy-flavoured cigarettes to attract kids.

Recently, they promote vaping (selling e-cigarettes) as another way for them to get rich.

Did you know: In the past, a lot of tobacco in the US was grown using slave labour. And even today, all around the world, child labour is used to grow tobacco.

Have you heard of "product placement"?

That's when a movie director films an actor casually holding a can of soda or beer, or opening a cigarette pack and lighting up a smoke. The companies that produce those goods pay huge amounts to have their products shown (or "placed") on-screen. Product placement is even more effective than paying for a traditional ad.

Tobacco industry "denormalization"

The term for exposing Big Tobacco is "denormalization."

This means showing tobacco companies to be deceptive, not to be trusted; and showing nicotine to be an unacceptable product, even though it's still legal to sell it. (Who knows, maybe one day it won't be legal anymore!)

6. Smoking steals our looks and beauty



If you smoke, you'll end up with some or all of these:

- 1. Deep lines around your lips. From constantly pursing your lips around the cigarette.
- 2. Wrinkles on your face start from a young age, and are deeper than for non-smokers. Smoking cuts blood flow to your skin. This causes wrinkles. Also, when you squint to stop smoke going in your eyes, wrinkles form around your eyes and on your forehead.
- 3. Saggy skin under your eyes and elsewhere on your body (e.g. sagging breasts and inner arms) so you look like an Elder at a much younger age. *The chemicals in cigarettes destroy collagen and elastin that normally keeps skin strong and elastic*.
- 4. Age spots and discoloured skin. Due to low levels of oxygen to the skin.
- 5. Hair loss and thinning hair. Caused by a lack of oxygen in the blood supply to the scalp and damage to the DNA of hair follicles.
- 6. Stained fingers and nails, and yellow teeth. *Nicotine stains*.
- 7. Bad breath, gum disease, and tooth loss. Due to a lack of oxygen in the bloodstream.



It's easy to see which of these two people smoke, right?

Have you noticed any other effects of smoking on the looks and beauty of people you know? If you smoke, which of these effects would you most hate to get, and why?

7. Smoking harms our health



What kind of health problems does smoking cause?

Smoking causes many health problems like:

- chronic lung diseases (bronchitis, emphysema, asthma)
- lung cancer
- mouth cancer
- throat cancer
- breast cancer
- cancer of the pancreas
- bladder cancer
- cancer of the cervix
- heart disease
- blindness
- stomach ulcers
- arterial disease
- reproductive problems
- weak bones (osteoporosis), etc.



Did you know: Inuit women now have the highest rate of lung cancer in the world?

If you look back at the list of health problems above, you'll see that we ended it with "etc." meaning that there are even *more* things to worry about. Let's examine a few that recent research has discovered.

Smoking affects the brain

Smokers have smaller brains!

The brain still grows and develops until about age 26. The frontal cortex is the front part of the brain just behind the forehead, responsible for problem solving, memory, emotions, impulse control, social interaction, and movement.



Research shows that in young adults, the frontal cortex of smokers was about 3% thinner than non-smokers. In other words, the brains of smokers were smaller than non-smokers!

Akkermans SEA et al. "Effect of tobacco smoking on frontal cortical thickness development: A longitudinal study in a mixed cohort of ADHD-affected and -unaffected youth." *European Neuropsychopharmacology*; 2017 10; 27(10):1022–31.

Smoking and dementia

Smoking is one of 9 major risk factors for dementia. (The others are: low educational level, hearing loss, high blood pressure, obesity, depression, physical inactivity, social isolation, and diabetes.) Frankish H & Horton R. "Prevention and management of dementia:

a priority for public health." *The Lancet*; 2017 Vol 390, Dec 16:2614–5.

How many of these risk factors for dementia do you have? Which one(s) can you change?

Smoking affects mental health

Smoking can cause serious mental illnesses, including schizophrenia.

This causes people to hallucinate (when you see, hear, smell, or feel things that aren't there, like scary monsters) or have delusions (when you believe things that aren't real such as "People are trying to poison me").

Smoking affects hearing



Hu H et al. "Smoking, smoking cessation, and the risk of hearing loss: Japan Epidemiology Collaboration on Occupational Health Study." *Nicotine & Tobacco Research*; 2018:1–8

Smoking affects sexual health

Many people know that smoking narrows the blood vessels throughout our bodies, so smokers are at higher risk for heart attacks, strokes, limb amputations, etc. But here's a message for people who are sexually active: this weak blood flow can affect erections as well, causing impotence or erectile disfunction (ED).

The more a smoker smokes, and the longer he smokes, the greater his risk of ED.

Biebel MG et al. "Male sexual function and smoking." Sexual Medicine Reviews; 2016 Oct, Vol. 4, No. 4:366–75.



Smoking may cause erectile dysfunction

Smoking affects fertility and genes

There is new evidence that smoking is associated with impaired male fertility, mutations in sperm, and DNA and chromosomal damage. Genetic mutations are passed down from fathers to their children. Boys and men should therefore stop smoking well before fatherhood, to minimize the transmission of harmful mutations to the next generation. Beal MA et al. "From sperm to offspring: Assessing the heritable genetic consequences of paternal smoking and potential public health impacts." *Mutation Research*; 2017 Jul, 773:26–50.

Is it safe to smoke just one or two cigarettes a day?

No!

The National Cancer Institute in the USA found that people who smoked less than one cigarette per day (CPD) over their lifetimes had a 64% higher risk of death than non-smokers. Those who smoked 1–10 CPD had an 87% higher risk.

Inoue-Choi M et al. "Association of long-term, low-intensity smoking with all-cause and cause-specific mortality in the National Institutes of Health–AARP Diet and Health Study." JAMA Internal Medicine; 2017 (1):87–95.

Researchers reviewed studies about coronary heart disease and stroke. They expected that a very light smoker (only smokes one cigarette a day) would have about one-twentieth (5%) the risk of a heavy smoker (smokes a pack a day or 20 cigarettes).



Hackshaw A et al. "Low cigarette consumption and risk of coronary heart disease and stroke: meta-analysis of 141 cohort studies in 55 study reports." *British Medical Journal*; 2018 Jan 24; 360:j5855.



8. Smoking kills

In the previous section we saw that smoking can cause many, many serious illnesses. Of course, in the worst case, some of these diseases can kill the smoker.



Just count: 1-and-2-and-3-and-4-and-5-and-6 and BANG! Another smoker somewhere in the world has just died. And while you read that last sentence, *another* smoker died.

And now, another. It never stops.

Well, it won't stop until smokers quit smoking, and non-smokers never start.

Did you know: tobacco is the only legal product that causes death in 50% of its regular users.

That's one out of every two smokers. Talk about a toxic product!



Smoking deaths in Nunavik

In Nunavik, there are about 50 funerals each year. About 15 of those are caused by tobacco. In other words, about one of every three funerals is tobacco-related. (The rate is the same in Nunavut and the Inuvialuit Settlement Region.)

The drawing below will help you remember this shocking statistic.



Smoking causes one out of every three deaths in Nunavik

Each day, more than 100 Canadians die from a smoking-related illness. That's a total of 48,000 tobacco deaths in Canada each year. Around the world, almost 8 million people die from tobacco each year.

Talk about tragic.

Some people say that smoking is like suicide... – in slow motion.



9. Second-hand smoke affects everyone



Everyone now knows that smoking harms the health of smokers, right?

But what about the health of non-smokers?

Have you heard of "second-hand smoke" (SHS)?

Second-hand smoke (SHS) is the smoke that pollutes the air when someone smokes inside. This is sometimes called "environmental tobacco smoke" (ETS) or "passive smoking."

Note that it's **not** safe to smoke in the furnace room, near an open window, under a kitchen vent, or only in a designated "smoking room." SHS will still pollute the air. That's why people must smoke outdoors instead.

Is second-hand smoke a problem in Nunavik?

The *Qanuilirpitaa? 2017 Health Survey* found that second-hand smoke in homes is the main source of exposure to tobacco smoke in Nunavik communities.

In that same survey, 6 out of 10 (62%) Nunavimmiut reported that they live in a smoke-free home, and 7 out of 10 (71%) smokers said they smoke outside. That's great news. But keep these four things in mind:

- 1. That leaves almost 40% of Nunavimmiut who still live in a smoky home.
- 2. It also leaves almost 30% of smokers who still smoke inside.
- 3. In some homes, many smokers (up to 5, 6, 7 or more) smoke indoors, so the "dose" of second-hand smoke is very high.
- 4. Only people aged 16 and over were included in the *Qanuilirpitaa*? survey, so that still leaves a very large number of children in the region being exposed to SHS at home.



Smoke-free homes and vehicles

Do people still smoke inside in your home or in vehicles?



When people smoke inside homes or in vehicles, we need a gas mask for protection!

If so, ask them to smoke outside and create smoke-free homes and spaces instead.

Now that we know how dangerous SHS is, it's just not acceptable for smokers to poison our homes and vehicles with SHS anymore!



At least these guys went outside to smoke!

Smoking outside will be healthier for smokers themselves, too!

Why?

Because they will only breathe in what they inhale directly from the cigarettes, not their own SHS as well!

They won't get a double dose of toxic chemicals!



Third-hand smoke!

Have you ever heard of "third-hand smoke"?

We've seen that second-hand smoke is pollution in the air from smoking inside. Now, where do you think we find third-hand smoke?

Have you ever walked into a home where people still smoke inside, but no one is smoking at the time. Does it smell different than a smoke-free home?

Yes! Why?

Because the nicotine and other toxic chemicals from second-hand smoke have seeped into all the soft furnishings (couches, carpets, curtains, bedding, etc.) and settled onto all the surfaces (tables, counters, walls, ceilings, floors, ventilation ducts, etc.) in the home.

Did you know:

These chemicals then off-gas and leave a stale smell throughout the house, causing negative health effects for many months after people stop smoking inside.

Vehicles should also be kept smoke-free to avoid exposure to third-hand smoke.



And what about clothing? Do you suppose an amautik, parka, jacket or sweater can get polluted with third-hand smoke?



Yes!

Infants and children are particularly vulnerable to the effects of third-hand smoke as they crawl on the floor and put things that are contaminated in their mouths. Infants exposed to third-hand smoke are at higher risk for asthma and are more likely to die from Sudden Infant Death Syndrome (SIDS).



Please smoke outside!

Or better still, of course, quit smoking!

10. Smoking harms unborn babies

We have seen how smoking harms the health of non-smokers. Now let's consider the health of unborn and young babies.

Look closely at the mouth and hand of the fetus in these drawings. Can you see what's happening there?

It seems we are never too young to "start smoking"!

Of course, an unborn baby doesn't really smoke a cigarette in the womb!

But these drawings remind us that the same chemicals from the mother's cigarette are absorbed from her lungs into her bloodstream, cross the

cigarette are absorbed from her lungs into her bloodstream, cross the placenta, move down the umbilical cord into the baby's bloodstream, where they then poison the unborn baby, causing permanent damage.

Second-hand and third-hand smoke that the mother is exposed to can also harm the unborn baby.

If a mother smokes (or is exposed to second- and/or third-hand smoke) while breastfeeding, the same toxic chemicals will go from her lungs into her bloodstream, and from there into her breast milk.



The baby then drinks the milk and ingests the toxic chemicals into their stomach, and from there they get absorbed into the baby's bloodstream and circulate throughout their body.

In babies, nicotine can cause irritability, vomiting after nursing, and poor sleeping.

Have you heard of fetal alcohol spectrum disorder (FASD)?



That's when a child has brain damage and other abnormalities caused by the alcohol its mother drank during pregnancy.

In the same way, cigarettes also damage unborn children—if the mother herself smokes, or if she's exposed to second-hand smoke or third-hand smoke.



We call this "Fetal *Tobacco* Spectrum Disorder" (FTSD).

Can you guess some of the problems FTSD might cause an unborn and newborn baby?

"Fetal Tobacco Spectrum Disorder" can cause:

- genetic changes
- birth deformities (congenital defects)
- less oxygen to the baby's body
- permanent lung damage in the unborn
- bleeding during pregnancy
- premature birth
- low birth weight
- stillbirth
- Sudden Infant Death Syndrome (SIDS)
- childhood cancer



So, all pregnant women should be offered extra help and support to quit smoking

And we men can help our pregnant partners to quit and stay quit if we also give up smoking to protect our unborn babies.

Conclusion: What do you think?

Please look back at the table of contents on page (iii) at the beginning of this booklet. Of all the topics included here, which one made the biggest impression on you? Can you explain why?

Within the topic you have chosen, what facts, ideas, or suggestions made you stop and think the most? Why?

Please add any other notes about How Smoking Harms Us.



Smoking harms us, so let's kick butt! To find out more, please see our next booklet *How To Quit Smoking*.

10 Ways How Smoking Harms Us

1.	Smoking was never part of Inuit culture	1
2.	People smoke for very good reasons, but	3
3.	Smoking is an addiction	6
4.	Smoking burns our cash	8
5.	Smoking makes tobacco companies super rich	10
6.	Smoking steals our looks and beauty	11
7.	Smoking harms our health	12
8.	Smoking kills	16
9.	Second-hand smoke affects everyone	18
10.	Smoking harms unborn babies	22
Cor	nclusion: What do <i>you</i> think?	24

