RNs butt out

Four Ontario nurses talk about what it means to be addicted. By Helena Moncrieff

helley Walkerley is a nurse practitioner, has her master's degree in nursing, and is two years into her PhD studies. Until a few years ago, she was a decadeslong smoker. What was a smart, educated RN doing smoking?"I hear it all the time,"

she says. "Addiction doesn't care how smart you are."

Walkerley got hooked when she started nursing school. So did Carol Burke and Samantha Sherwood. Anne Paramonczyk was already a veteran smoker by the time she began her post-secondary education. She first lit up at 13.

So how did these four RNs study nursing, treat patients with cancer, emphysema and heart disease, and continue smoking?

Being presented with evidence and accepting it are two different things.

Walkerley, who is now four years smoke free, specializes in smoking cessation at a community health centre. She is honest with her clients about her own smoking history: "Part of the process of letting go is recognizing (that smoking) is not a choice."

Sherwood says she knows the risks but just hasn't reached the point of quitting. She really can't predict when that will come.

For each of her three reformed colleagues, the final decision to butt out was triggered by different experiences over many years.

In the 90s, Burke had to light cigarettes for veterans in a smoking room at London's Parkwood Hospital. "It's all they had to look forward to," she acknowledges, "but the room was blue." Even as a smoker, she noticed the smell on her uniform. After more than 30 years with a pack in her pocket, it was the final turning point. But it wasn't the first time she quit.

Her first turn had come 20 years earlier.

At a break in a nursing meeting, Burke opened her pack of smokes and found each of her cigarettes had been decorated with notes from her two daughters: "We mind very much if you smoke" and "It's a matter of life or breathe." Her children



PILOTS TO HELP PEOPLE QUIT

This fall, RNAO launched three pilot projects to monitor the impact of population specific approaches to helping people quit. The projects will be carried out in three LHINs, and will focus on public health, long-term care and Aboriginal populations. Nurses will develop knowledge and skills as smoking cessation champions through workshops and the use of specific smoking cessation resources available on RNAO's website, www.tobaccofreernao.ca. For more information, contact jchee@ rnao.org or call 1-800-268-7199, ext. 239.

caught on to the message, by then popular in the media and school health classes, that Burke had missed. "That really made me stop and think and I tried to cut back," she remembers.

Paramonczyk's first wake-up call also came through her children. Her daughter had been on a field trip to a health-care centre and saw a blackened lung. She came home with two questions: "You care about others don't you? How come you don't care about yourself?" They were good questions that took decades to answer.

Public policy played a role in Walkerley's decision to quit. As governments closed the doors to smokers, forcing them outside in

> all kinds of weather, she says, "It made it harder, less fun and less tolerable."

Non-smokers might think that a nurse, of all people, would be embarrassed about puffing. With one exception, this group doesn't consider it to be a dirty little secret. Paramonczyk admits she was an "in your face" smoker and saw the cigarette as an extension of herself. Sherwood, a supervisor of community health nurses, says she occasionally hears complaints about other nurses "smelling of smoke" but nothing is directed at her.

Only Walkerley saw the clandestine nature of the health-care smoker. She saw nurses with special lozenges and sprays and jackets that they'd put on before lighting up. Personally, she found health-care conferences tricky because she'd have to scout the location for places to sneak off for a smoke. "It got to be tiresome and I started to feel like a real drug addict."

From Nicorette and 'the patch' to cold turkey or a slow wean, Walkerley, Burke and Paramonczyk managed to put smoking behind them.

Reformed or not, these RNs recognize the power of addiction and know that it's up to the individual to make a change. For her part, Walkerley is tenacious about counselling smokers. "Each time we miss an opportunity (to talk about smoking), we are sending a silent but powerful message that it's not as 🛱 bad as people say it is." RN

HELENA MONCRIEFF IS A FREELANCE WRITER IN TORONTO.