



# Tobacco

## Traditional Use of Tobacco

Tobacco has been used traditionally in ceremonies, rituals, and prayers for thousands of years. Considered a sacred plant by many First Nations and Métis, tobacco was grown, prepared, and used according to the teachings of the Creator (BC Ministry of Health and Ministry Responsible for Seniors, 2001). Whether burned, smoked, or given as an offering of thanks, it established a direct communication link to the spiritual world and helped to purify the mind and heal the body (Reading, 1999). Inuit in Canada do not have a historical or traditional relationship with tobacco (Reading, 1999).

## Tobacco Misuse

Tobacco misuse is defined as the non-traditional, recreational and/or habitual use of commercial tobacco products including smoking cigarettes, cigars, pipes, chewing tobacco, and spit tobacco (BC Ministry of Health and Ministry Responsible for Seniors, 2001). Smoking cigarettes is the most common form of tobacco misuse. Tobacco misuse became prevalent in the post-contact era for a number of reasons, including the industrialization of tobacco as a cash crop and a shift in societal values towards its consumption (Reading, 1999).

## Prevalence

Although British Columbia has the lowest smoking rate in Canada at 16 % (the Canadian average is 21%), smoking continues to be a serious health issue particularly among Aboriginal Canadians (BC Ministry of Health and Ministry Responsible for Seniors, 2001).

Recent data indicates that the rate of smoking for First Nations adults in Canada (59%) is three times the rate of the general population (First Nations Centre, 2005). Smoking rates for Inuit adults are even higher at 70% (First Nations and Inuit Health Committee, Canadian Paediatric Society, 2006). Overall, smoking rates are highest among First Nations and Inuit youth between the ages of 15-24.

**Every year, tobacco causes close to 6,000 deaths in British Columbia.**

## Health Impacts

Smoking cigarettes is the primary risk factor for the top three causes of death in Canada: respiratory diseases, circulatory diseases, and cancer (BC Ministry of Health Services, 2004). Nicotine, the main active ingredient in tobacco, is a highly addictive substance but is only one small component of tobacco smoke. Tobacco smoke contains over





4000 chemicals including formaldehyde, ammonia, hydrogen cyanide, and benzene (Reading, 1999; AADAC, 2004).

Maternal and paternal smoking during pregnancy is a risk factor for adverse outcomes for the fetus, infant and child including low birth weight, miscarriage, premature birth, sudden infant death syndrome, and respiratory problems (BC Reproductive Care Program, 2006).

### What You Can Do in Your Community

The First Nations and Inuit Health Committee of the Canadian Paediatric Society recommends Aboriginal communities should:

- encourage dialogue in the community to help change attitudes about tobacco use
- continue to discourage smoking in the workplace and ban the non-traditional use of tobacco in public places
- educate retailers on-reserve about the Tobacco Act and adopt a minimum age for the sale of cigarettes
- ensure tobacco products are kept out of sight in all stores
- place a surcharge on tobacco products on-reserve and use the increased revenue to support smoking prevention programs in the community (FNIH Committee, Canadian Paediatric Society, 2006).

### For More Information

There are many ways to reduce or quit tobacco misuse in your life and a number of free resources and programs available to help including:

- A Tribe Called Quit [www.ayn.ca](http://www.ayn.ca)
- Honour Your Health Challenge [www.honouringourhealth.ca](http://www.honouringourhealth.ca)
- QuitNow by phone 1-877-455-2233
- QuitNow.ca <http://bc.quitnet.com>
- BC Provincial Health Authorities

### References

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