A guide to working with prisons on
No Smoking Day and beyond
What others have said about this guide...

I welcome the No Smoking Day 2011 guide to working with prisons. This is a much-needed resource for people engaged in helping prisoners who want to quit smoking. Department of Health research shows that smoking in the population as a whole is the biggest preventable cause of death in England and means that 1 in 2 long term smokers will die because of smoking. Yet, 7 out of 10 smokers want to quit smoking (Office of National Statistics 2008) and 6 out of 10 smokers try to do so each year.

Within prisons, the smoking rate is as high as 80% - almost four times as high as the rate for the UK as a whole. Yet the demand for stop smoking services amongst prisoners is there. Prison healthcare staff who contributed to producing this guide reported many high uptakes of stop smoking services, and early findings from the NHS Information Centre indicate that prisoners who quit smoking have a 56% four week success rate. No setting except military bases can report as high a success rate as prisons. Clearly, the demand for stop smoking services in prisons is there already.

This guide will help spread the message further - that help is available for prisoners who want to stop smoking. Any initiative which helps this work gets my support and I am pleased to support this guide.

Richard Bradshaw, Director of Offender Health, Department of Health

I am very pleased to recommend this guide to colleagues who are looking to make the best use of NSD to meet the needs of those prisoners wishing to give up smoking. The advice is of use not just for NSD itself, but will also be helpful in planning this area of work throughout the year. As well as well as offering lots of practical and useful ideas for prison based initiatives connected to NSD, it also emphasises the importance of good links and co-operation between prisons and their local stop smoking services. A very useful publication indeed.

Paul Hayton, Deputy Director of the WHO (Europe) Collaborating Centre for Health and Prisons Offender Health, Department of Health

This is a really useful guide. Giving up smoking whilst in prison is a real challenge and this guide provides specific support and practical help which will be invaluable. This will not only help to organize innovative ways to make No Smoking Day a success but also create year round support.

Margaret Winskill, Health Promotion Specialist, Public Health, NHS Wiltshire.

There are loads of ideas in the guide that I will find very helpful in my own prison groups. No Smoking Day can help to identify new and more creative ways to deliver services and build links within the prison with other departments that may have some interest in helping people to quit.

Claire Harrison, Specialist Stop Smoking Advisor (Prisons), NHS County Durham and NHS Darlington
Contents

Introduction
Who is this guide for? What is its aim? 3

1. About prisons 4
2. Smoking in prisons 5
3. Quitting in prison: challenge or opportunity? 6
5. Top Ten Tips for Using No Smoking Day in Prisons 8
7. Key Messages and Practical Tips for Quitting In Prisons 12
8. Useful links 13
9. Useful resources 14

Acknowledgements 15

nosparkingday.org.uk 2
Introduction

Who is this guide for?

This guide is for anyone who is interested in helping prisoners who want to stop smoking. The research we have conducted in prisons shows that this includes a huge range of people: stop smoking advisors, prison healthcare staff, prison PE staff, Health Trainers, substance misuse workers, prison governors and many more.

What are its aims?

The aims of the guide are:

- To highlight the high rates of smoking in prisons
- To explain that, for many offenders, prison presents a unique opportunity to stop
- To raise awareness that stop smoking initiatives in prisons can be highly successful
- To explain how No Smoking Day can contribute to successful stop smoking initiatives in prisons
- To provide ideas and suggestions about how to use the campaign in prisons, and who to involve
- To highlight resources that are particularly relevant and useful for people using No Smoking Day in prison settings

The information and advice in this guide is based on a consultation project conducted by Kay Scott and Judith Skinner on behalf of the No Smoking Day charity. The project comprised a literature review and over 30 interviews with individuals who work in or with offender institutions. Prisoners at HMP Garth, HMP Wymott and HMP the Mount also contributed their invaluable insights into the opportunities and challenges of giving up ‘inside’.

The No Smoking Day team would like to thank all those who contributed their time and ideas, and the Department of Health Offender Health Team who funded and supported this project. A full list of Acknowledgements can be found at the back of the guide.

Links to useful resources and documents, including free resources to use on No Smoking Day and the Prison Service Orders (PSOs) mentioned in this guide can be found at the back of the document.
1. About Prisons

There are some 140 prison establishments in England and Wales. Around 170,000 people pass through the prison system each year. At any one time, there are approximately 85,000 prisoners in UK offender establishments. The vast majority, some 95%, are men.

Adult prisoners (those aged 21 or over) are given a security categorisation when they enter prison. For men, the four categories are A, B, C and D.

- **Category A** prisoners are those whose escape would be highly dangerous to the public or national security
- **Category B** prisoners are those who do not require maximum security, but for whom escape needs to be made very difficult
- **Category C** prisoners are those who cannot be trusted in open conditions but who are unlikely to try to escape
- **Category D** prisoners are those who can be reasonably trusted not to try to escape, and are given the privilege of an open prison. Also known as ‘D cat’ or ‘open’ prisons.

There are four similar categories for women offenders. **Young Offenders** under the age of 21 years are sent to one of several different institutions depending on their offences, ages and needs. These include Secure Children’s Homes, Secure Training Centres, Juvenile Prisons (for 15-18 yr olds) and Youth Offender Institutes (for 18-21 yr olds).
2. Smoking in prisons

Rates of smoking in prisons are extremely high. Approximately 80% of prisoners smoke, compared with 22% of the UK population as a whole.

The prevalence of mental health problems in prisons is also extremely high. It is estimated that around 70% of sentenced prisoners suffer from two or more mental health disorders (Prison Reform Trust, 2006). Many offenders use nicotine products as a way of coping with stress and boredom. Cigarettes and tobacco also have a significant role as currency in prisons, and any attempt to tackle smoking in prisons needs to be informed by an understanding of the unique role that these products play in the prison environment.

Prisons in the UK are currently exempt from the Smoke Free Legislation Health Act 2006 (otherwise known as the ‘public places ban’) because cells are regarded as a residential environment for offenders. Prisoners are allowed to smoke in their cells unless they share with a non-smoker, in which case the rights of the non-smoker prevail. Prison staff are not allowed to smoke in prisons, but concern has been expressed about their exposure to second-hand smoke at work. The desirability of attaining a fully smokefree prison estate in the UK is acknowledged by HM Prison Service (Prison Service Instruction 09/2007).

Some commentators have expressed concern that the introduction of a complete smoking ban in prisons would lead to increased tension and unrest. However, evidence from both within and outside the UK suggests that the introduction of a complete ban on smoking in offender institutions causes fewer problems than anticipated, and has significant benefits for staff and prisoner health. In the UK, Ashfield YOI and Wetherby YOI became completely smokefree in 2005. Both reported a reduction in bullying and frequency of fire incidents, and no significant increase in disruption (Kipping et al BMJ 2005, HMP PSI 09/2007). Experiences in adult prisons in the US and Canada have not been quite so unequivocal but, in many institutions, poor implementation has been an issue. A recent review conducted by ASH concluded that:

‘Notwithstanding negative impacts such as poor implementation, disorder, distress and contraband market in tobacco, the health benefits gained by improved air quality and reduced tobacco consumption provide support for prisons to be made totally smokefree’.
ASH Factsheet 740, July 2010

Several UK prisons are now introducing smokefree wings and No Smoking Day can provide an opportunity to refocus attention on this issue.
3. **Quitting in Prison: challenge or opportunity?**

Although smoking and substance abuse rates amongst offenders are extremely high, prison presents a unique opportunity for individuals from ‘hard to reach’ groups to access regular, ongoing support from health and education services.

Research by MacAskill et al published in 2008 found that prisoners who quit smoking whilst in prison experienced many positive outcomes: these included increased enjoyment of exercise; a sense of freedom, control and independence; gaining respect from significant figures within the prison and from family members, and valued financial benefits. Giving up smoking may also have an impact on reoffending rates, as it impacts upon 5 of the 7 pathways to reducing reoffending identified in the *Reducing Reoffending National Action Plan* (2004). More information about MacAskill’s research, and about the Reducing Reoffending Action Plan, can be found in the **useful links** section at the back of this guide.

Since 2003, Primary Care Trusts in England have been responsible for the healthcare of offenders. The guiding principle (HMP PSO 3100) is that prisoners should have access to the same range and quality of NHS services as the general public; this includes pharmaceutical aids and services to help them to stop smoking. In practice, the range and extent of stop smoking support provided in prisons varies widely. All provide some form of NRT in conjunction with relevant support, but the scale of provision can be limited and a number of prisons have waiting lists for help. Several prisons (eg HMP Erlestoke, HMP Everthorpe, HMP Swinfen Hall) have introduced innovative schemes in which prisoners themselves are trained to become stop smoking mentors or ‘Health Trainers’ who can provide stop smoking support. Peer interventions of this kind can play an invaluable role in increasing the capacity of stop smoking support services, and in providing ongoing support and ‘signposting’ to offenders who are trying to quit. The use of Health Trainers in the Criminal Justice system is being actively supported by the Department of Health.

“It was good having a Health Trainer help me give up smoking as they understood how hard it is in prison when so many people around you smoke and there is a limit to what you can do to distract yourself when you want a fag.”

Inmate, HMP Erlestoke

Prison Healthcare staff consulted in the process of compiling this guide reported that uptake of stop smoking services in this setting is often high, and several reported waiting lists. NHS Monitoring reveals that quit rates in prison-based stop smoking services are unusually high. Experimental data from the NHS Information Centre (2010) suggests that quitters in the prison setting have a higher four week success rate (56%) than almost any other group.

**The 4 week quit rate for prison-based stop smoking services is 56%**

This is higher than any other setting other than military bases

The direct link to this data and more information about the National Health Trainer programme can be found in the **useful links** section at the back of this guide.
4. **No Smoking Day in prisons: why bother?**

No Smoking Day is a highly effective health campaign. Each year, the campaign prompts around a million smokers to make a quit attempt and encourages many more to make a step towards quitting. Recent peer reviewed research confirms that No Smoking Day is also highly cost effective, costing under £100 per life year gained by smokers who quit as a result of the Day (Kotz et al, Tobacco Control, May 2010). To put this in context, the NICE threshold is £20-30,000 per life year gained.

The No Smoking Day campaign team work closely with local stop smoking services and other partner organisations such as education and health, the leisure industry, the military and private sectors. Until now, the campaign has never actively promoted itself in the prison estate. Given the high prevalence of smoking in prisons (some 80% of prisoners smoke) the campaign now wishes to work more closely with prison establishments in order to encourage more prisoners to quit. The campaign, which liaises closely with PCTs and local stop smoking services, is also uniquely placed to encourage local stop smoking advisors to work more closely with prisons, thereby increasing the capacity of prison staff and inmates to support those who wish to give up.

Involving prison staff and inmates in No Smoking Day can have many benefits.

Organisationally, the campaign can:

- **Foster/strengthen links** between local stop smoking services and prison staff
- **Ensure that offenders are aware** of, and make use of, prison-based support
- **Provide an opportunity to involve** Offender Health Trainers/Peer Mentors
- **Refocus** organisational attention on smoking and general health promotion
- **Provide an opportunity to review provision** of stop smoking support
- **Provide an opportunity to review smoking policy** and implementation
- **Open or re-open discussion about providing smokefree wings**

For individual offenders who smoke, the No Smoking Day campaign can provide:

- **An opportunity to engage in discussions** about smoking in a light hearted way
- **Increased awareness of the benefits** of stopping smoking
- **Increased awareness of stop smoking services, and how effective they are in prisons**
- **An opportunity to think again** about giving up
- **A trigger to making a quit attempt, and/or to signing up for help**
- **An opportunity to discuss/find out about diversionary activities**
- **An opportunity to ‘quit together’ with other inmates**
5. **Top ten tips for using No Smoking Day in prisons**

**Tip 1: Start Early**

Prisons operate within a structure that has many rules and restrictions. Making contact and arranging meetings with prison staff tends to take much longer than similar activities in the community. Start planning as soon as possible! If you are based outside the prison environment, a useful list of HM Prisons and how to contact them can be found on the HMP website, [www.hmprisonservice.gov.uk](http://www.hmprisonservice.gov.uk).

**Tip 2: Start at the top**

Every prison is required by national targets (HMP PSO 3200) to have a Health Promotion Action Group (HPAG). Smoking is one of 5 mandatory areas of action identified in the PSO and membership should include: a member of the senior management team, the Head of Prison Healthcare, and the Prison Lead for the PCT. Try to contact one of these service leads and ‘sell’ the idea of using the No Smoking Day Campaign. Emphasise how involvement in No Smoking Day can help them to meet the requirements of HMP PSO 3200 (see useful links) and that it can be a highly effective way of promoting other stop smoking activities.

**Tip 3: Build on other prison-based smoking initiatives**

Using contacts in the HPAG, Prison Healthcare Team and/or PCT, find out:

- what stop smoking services are provided for offenders and who is providing them
- what capacity/uptake they have
- whether there is a Health Trainer scheme or health mentor scheme in operation

Building on these schemes will maximise the effectiveness of the campaign, and reduce the risk of generating demand for help that cannot be met. If existing stop smoking support provision is limited or over-subscribed, try to encourage service managers to expand capacity; drawing attention to the unusually high successful quit rates in prisons (56% at four weeks, [NHS Information Centre 2010](http://www.nhsinforationcentre.co.uk)) may help.

**Tip 4: Identify your No Smoking Day champions**

Be open-minded! Don’t assume that Prison Healthcare staff are the only people who will be able/willing to get involved in the Day. PE staff, Offenders who are mentors or Health Trainers, Education Staff and even Prison Librarians may be keen and willing to be involved. With a bit of planning and support, anyone can be a No Smoking Day champion.

**Tip 5: Inspire your champions**

Health checks, fitness challenges, sponsored events, poetry slams, creative writing competitions...all of these can be useful ways of inspiring your champions and engaging offenders with No Smoking Day. In the next section of this guide, we outline some ideas that have particular relevance to the prison setting. Many more activity suggestions can be found on the No Smoking Day website, [www.nosmokingday.org.uk](http://www.nosmokingday.org.uk).
Tip 6: Think about diversionary activities

Prison can be a boring and stressful environment. Offenders who are trying to give up smoking need other things to do. With your No Smoking Day champions, think about how to provide and support diversionary activities for offenders who want to quit. These might include: enhanced access to exercise facilities; guidance on in-cell exercise routines; opportunities for educational activities or creative writing; support for writing diaries/letters home; and opportunities to talk with Healthcare staff, PE staff or Health Trainers.

Tip 7: Provide ‘goodies’ to support activity on the Day and beyond

Everyone loves a freebie and this is particularly true in prisons because they have so few. Freebies can encourage people to interact on the Day and items such as puzzles, diaries and mints can be helpful distractions for prisoners who are trying to stop. Each prison will have a different policy about what is/is not allowed within the establishment. Our research for this guide revealed that items such as puzzles, mints, toothpaste, toothbrushes, stress balls and diaries/calendars are often very popular in the prison setting. Campaign T-shirts for staff and Health Trainers who are involved in the Day can also be very useful. Many of these items can be ordered from the No Smoking Day website, www.shop.nosmokingday.org.uk. The website also provides a wide range of free downloadable materials such as crosswords, leaflets and word searches. Some print resources are not appropriate for the prison setting for either content or literacy reasons: in the useful resources section at the end of this guide, we have highlighted a selection of leaflets that are particularly relevant for the prison setting.

Tip 8: Make sure that there is support in place beyond No Smoking Day

Work with the Healthcare department and/or HPAG to ensure that offenders who decide to make a quit attempt as a result of No Smoking Day are provided with adequate support from trained advisors. In some prisons, this will include PE staff and Health Trainers/Mentors as well as healthcare personnel. If there are no Health Trainer schemes in the prisons you are working with, encourage them to set one up! A link to more information about the role and value of Health Trainers in prisons can be found at the back of this guide.

Tip 9: Don’t forget about staff

Although staff are not allowed to smoke in prisons, smoking rates amongst prison staff are high and they are also an important target group. Making help available for staff as well as offenders will encourage them to actively support the Day.

Tip 10: Record your activities and celebrate/reward success

Keep a record of what you do on No Smoking Day, who your champions were, how many smokers were involved and what worked. This will help you to secure support – and possibly funding – in future. And don’t forget to celebrate your successes, for example by presenting certificates of achievement to successful quitters. Please tell us at mail@nosmokingday.org.uk too – sharing ideas and experiences can really help others working in this setting.
6. **Practical Ideas for No Smoking Day events in prisons**

Here are a few ideas that Stop smoking advisors and prison healthcare staff have found useful in the prison setting. Many more ideas can be adapted for prisons. For further inspiration, go to [www.nosmokingday.org.uk](http://www.nosmokingday.org.uk).

**Health checks**

Organise Health Checks on No Smoking Day at key points around the prison. Use CO monitors and other measurements to bring the message to life. Emphasise how giving up can benefit health and general fitness; invite sign ups to stop smoking services and/or give advice on alternatives to smoking.

**Fitness challenges**

Ask the PE staff to set up fitness challenges in the gym. Train them to provide appropriate guidance about how giving up will increase fitness and how to get help with stopping. Running a length of the gym wearing a mask and snorkel can be a good way to illustrate how it feels to have restricted breathing.

**Sponsored exercise events e.g. cycle for charity**

Again with the help of PE staff, organise a cycling challenge using exercise bikes eg cycle from Land’s End to John O’Groats. Sign up prisoners to do a particular time period or distance and use the event to raise money for charity.

**Poetry/creative writing ‘slams’**

Library or Education staff may help with this one. In the run up to the day, invite offenders to write a poem or a piece of prose about the negative aspects of smoking or the benefits of giving up. Offer a small financial prize for the winner and runner-up. On No Smoking Day, invite participants to read their poem/piece in front of a team of judges including the Prison Governor and someone from Healthcare. Present a certificate and financial prize to the winner(s) and take a photo.

**Art competitions**

Similar to the above; ask prison education staff for help.
Remember:

- Prison presents a unique opportunity to reach smokers who are not regular users of healthcare services.

- With appropriate support, prisoners have an unusually high quit rates (56% at 4 wks).

- Don’t think of NSD as a ‘one off event’; involvement in the Day presents an opportunity to build/strengthen relationships between prisons and local stop smoking services, and to make a case for building capacity in stop smoking support.

- Start planning early and ensure that support is in place for those who become interested in quitting as a result of the Day.

- Make sure NSD is integrated into existing stop smoking activities and structures in prisons particularly HPAGs, stop smoking services, Health Trainer/Mentor schemes.
7. **Key messages and practical tips for quitting in prisons**

The messages and tips below are based on a combination of research evidence and the experience of stop smoking practitioners consulted in the development of this guide:

### Key messages for people giving up in prisons

- Prison is an opportunity to stop: use the time and support available
- Healthcare can supply you with patches or other products that can really help
- The chances of quitting successfully are four times higher if you get help
- We can give you ideas and resources to take your mind off smoking
- Talk to people: the support of Health Trainers/other quitters makes all the difference
- It’s never too late to stop
- Think of the money you’ll save – and what you can buy with it
- Exercise is easier and more enjoyable when you don’t smoke
- Giving up will give you a real sense of achievement and control

### Practical Tips for people giving up in prison

- Get rid of your smoking gear
- Practice saying ‘no thanks, I don’t smoke’
- Keep things with you to replace cigarettes eg mints, fruit, music, toothbrush, water
- Take some exercise: 15 minutes of physical activity causes the release of endorphins in the brain – this ‘natural feel good’ drug will help you to feel and sleep better
- Distract yourself: study, read, write a diary, play with puzzles and games, crosswords, do some exercises, make a smoothie
- Talk to others who are giving up/have given up
- Try controlled breathing or meditation exercises
8. Useful links

**No Smoking Day**
For information, ideas, free downloadable resources and merchandise to support activities on and around No Smoking Day, go to the website [www.nosmokingday.org.uk](http://www.nosmokingday.org.uk)

**NHS Experimental Statistics on Quit Rates by Setting, including Prisons:**

**Health Trainers in the Criminal Justice System**
A guide to implementing the New Futures Health Trainer Role across the Criminal Justice System: [www.lincoln.ac.uk/cjmh/docs/HT_manual_3.pdf](http://www.lincoln.ac.uk/cjmh/docs/HT_manual_3.pdf)

Health Trainers in the Criminal Justice System: A Strategy for Offender Health in the South West (Brian O’Neill, 2010)


**PSOs (Prison Service Orders) and PSIs (Prison Service Instructions)**
Prison Service Orders (PSOs) are long term mandatory instructions for prisons. PSO 3200 identifies stop smoking work as a prison health promotion priority. A direct link to PSO3200 can be found here: [www.hmprisonservice.gov.uk/resourcecentre/psispsos/listpsos](http://www.hmprisonservice.gov.uk/resourcecentre/psispsos/listpsos)

From 2009, prison service operating instructions are published as Prison Service Instructions or PSIs. These can be found at: [www.hmprisonservice.gov.uk/resourcecentre/psispsos/listpsis](http://www.hmprisonservice.gov.uk/resourcecentre/psispsos/listpsis)

**Guidance on developing stop smoking services in prisons**


9. Useful Resources

A wide range of resources, including free downloads of puzzles and word searches, can be found at www.nosmokingday.org.uk.

Practitioners working in prisons have found the following print resources particularly useful for this setting:

- **Deciding to quit: a stop smoking guide for prisoners**
  www.gasp.org.uk/p-deciding-to-quit-a-stop-smoking-guide-for-prisoners.htm

- **Smoking: a guide to being smokefree in prison**

- **Blokes who smoke: men and smoking facts and fiction**
In cell exercise routine from Danny, a prisoner at HMP the Mount

Based on in cell circuit ideas from Danny at HMP the Mount

- Squats
- Wide press-ups
- Close press-ups
- Burpees
- Side Bends
- Dorsal Raises
- Sit ups
- Lunges

**Do 10-20 reps of each**

It’s up to you: the harder you work the more you will benefit

- Bicep Curls
- Upright Row
- Front Raises
- Side Raises

**For these exercises, use a kit bag with bottles of water for weight**

- Dips
- Incline Press Ups (feet on floor)
- Decline Press Ups (feet on chair)

**Use a chair for these dips and press ups**

Make sure you warm up and stretch before and after your exercises. It will prevent injuries and help you get to sleep at night!

The biggest reason people give for not exercising is lack of time.

You have no excuses!
Smoothie suggestions from Danny, a prisoner at HMP The Mount

**CARROT JUICE & GINGER**

Grate one bag of carrots into a large bowl. Also grate one bag of ginger into the same bowl. Cut & squeeze two lemons into the same bowl. Then add hot water. Leave until it cools. Add sugar to taste and bottle up & put in to a cool place.

Enough for 4 bottles.

**CUCUMBER & KIWI JUICE**

Grate four cucumbers into a large bowl. Also grate six kiwi’s into the same bowl. Cut & squeeze two lemons into the same bowl. Then add water. Leave until it is cold. Add sugar to taste and bottle up & put in to a cool place.

Enough for 4 bottles.

The drinks are really healthy and won’t cost a lot. You can add more or less depending on how you like it to taste.

Enjoy!
Controlled breathing exercises (from HMP Garth Diary prisoner team 2009)

**Abdominal (Diaphragmatic) Breathing**

Some of the benefits of abdominal breathing include:
- Increased oxygen supply to the brain and muscles.
- Stimulation of the parasympathetic nervous system promoting calmness.
- More efficient excretion of toxins in the body.
- Improved concentration.

If you have poor mental health, you are likely to breathe too high up in the chest and you will also tend to hyperventilate, breathing out too much carbon dioxide relative to the amount of oxygen carried in your bloodstream.

Two exercises can help you to change your breathing pattern. By practising them, you can achieve a state of deep relaxation in a short period of time, usually just 3 minutes! Many people have successfully used one or the other technique to stop a panic attack.

**Controlled Breathing Technique 1: Abdominal Breathing**

1. Note the level of tension you are feeling. Place one hand on your abdomen beneath your rib cage.
2. Inhale slowly and deeply through your nose into the “bottom” of your lungs, sending the air as low down as you can. If you are breathing from your abdomen, your hand should actually rise and your chest should only move slightly while your abdomen expands.

**Controlled Breathing Exercise 2: Calming Breath Exercise**

This exercise was adapted from the ancient discipline of yoga. It is a very efficient technique for achieving a deep state of relaxation quickly.

1. Breathing from your abdomen, inhale through your nose slowly to a count of five.
2. Pause and hold your breath to a count of five.
3. Exhale slowly, through your nose or mouth, to a count of five. Be sure to exhale fully.
4. When you’ve exhaled completely, take two breaths in your normal rhythm, then repeat steps 1 through 3 in the cycle above.

---

3. When you’ve taken in a full breath, pause for a moment and then exhale slowly through your nose or mouth. Be sure to exhale fully. As you exhale, allow your whole body to just let go.

4. On ten slow, full abdominal breaths. Try to keep your breathing smooth and regular, without gulping in a big breath or letting your breath out all at once. It will help to slow your breathing if you slowly count to four on the inhale and count to four on the exhale. Pause briefly at the end of each inhalation.

5. Extend the exercise if you wish. Five full minutes of abdominal breathing will have a pronounced effect in reducing anxiety and panic symptoms.

---

nosmokingday.org.uk
Meditation exercises (from HMP Garth Diary prisoner team 2009)

**Tips for Staying Tip Top: February**

**Meditation**

Meditation has no detrimental side effects. It has been proven to encourage slower alpha brain waves, so no wonder people who meditate have a calmer outlook on life. It has also been shown to reduce biological ageing.

Meditation frees the mind from negative emotional energy. Meditation enhances deep sleep and gives greater clarity to your dreams.

All meditation aims for inner calm and sense of being. You can meditate with your eyes shut or open. Some techniques use mantras, chanting or visualisations of your breath.

There is a technique to proper meditation. Here are some top tips to aid meditation:

1. Find a quiet environment.
2. Reduce muscle tension.
3. Sit properly.

**Eastern style:** Sit cross-legged on the floor with a pillow supporting your buttocks. Rest your hands on your thighs. Lean slightly forward so that some of your weight is supported by thighs as well as your buttocks.

**Western style:** Sit in a comfortable, straight-backed chair, with your feet on the floor and legs uncrossed, hands on your thighs. In either position, keep your back and neck straight without straining to do so. Do not assume a tight, inflexible posture. Do not lie down as this will promote sleep.

1. Set aside 20 to 30 minutes for meditation.
2. Make it regular practice to meditate every day. Even if you only meditate for 5 minutes, it is important to do it every day. If’s ideal if you can find a set time to practice meditating.
3. Don’t meditate on a full stomach. Meditation is easier if you don’t practise on a full stomach. Wait at least half an hour after eating, if you are unable to find time before eating to meditate.
4. Select a focus for attention. The most common devices for focusing your attention are your own breathing cycle or a mantra.

**Developing Concentration**

When you first start meditating, it is helpful to work on developing your ability to concentrate and focus your mind. Using a mantra or counting breaths can help.

**Using a mantra**

1. Select a word or short phrase to focus on. Examples include Sanskrit mantras such as “Om Shanti” or “So-Hum”, or a word of phrase that you find comfortable such as “let go”, “relax” or “at peace”.
2. Silently repeat this word, ideally on each exhalation of breath.
3. Let any thoughts, reactions or distractions that come to mind pass over you and gently bring your attention back to the

**Counting Breath**

1. As you sit quietly, focus on the inflow and outflow of your breath. Let yourself breathe slowly and evenly. Each time you breathe out, silently count the breath. You can count up to ten and start over again, or keep counting as high as you like.
2. Each time your focus wanders, bring it back to your breathing and counting.
3. When you lose track of the count, start over at 1 or at a round number like 50 or 100.
4. After practising breath counting meditation for a while, you may want to let go of the counting and focus on the inflow and outflow of your breathing.
5. Continue this process for a minimum of 10 to 30 minutes.
6. Mantra or breath-counting exercises are useful because they will help you develop your concentration. During any form of meditation it is generally helpful to close your eyes in order to reduce distractions.

**Basic Meditation**

1. Sit in a comfortable yet upright position with your feet flat on the floor. Focus on your breathing as you breathe slowly from your abdomen. When you focus on your abdomen, let it relax and become soft.
2. If you’re feeling anxious, let go of any goal of trying to make your anxiety go away.
3. You may want to close your eyes. If you find that closing your eyes causes you to feel sleepy, it may help to keep them open and focused on a particular spot in the room.
4. Focus on the place in your body where you can feel your breath come and go. This might be your abdomen, or your chest. Just be with the place in your body where you are most comfortable paying attention to your breath. If you’re not sure about this, your abdomen is a good place to start.
5. Just allow your breath to come and go without trying to control it. When your mind starts to focus on your breath (which it will), let it do so without judging it. Then gently bring your attention back to your breath. Recognising when your mind wanders then bringing your attention back to your breath is normal.
6. Distraction, boredom, restlessness, sleepiness and impatience are common reactions during meditation. When they come, notice them. Let them be and return your attention to your breath.
7. When you have finished your meditation, open your eyes gently and stretch your body.

**The Body Scan: Sensing Your Body During Meditation**

The body scan is another very useful exercise in developing awareness. By bringing your attention slowly and deliberately to each part of your body, you are able to deeply reconnect with your body and foster increased mind-body integration. The body scan is best done by lying down or sitting back in a chair with your head supported. Begin the exercise by focusing on the toes of your left foot. Notice whatever sensations you’re aware of in your left toes. Then, take a breath in, and imagine breathing those sensations out through your left toes. While this may seem odd at first, it becomes easier with practice. Once you’ve completed your sensations with your left toes, continue with each
ACKNOWLEDGEMENTS

The No Smoking Day team would like to thank the following people who contributed their ideas and experience to this guide:

Mona Banerjee, Librarian, Pentonville Prison
Michelle Baybutt, Research and Development Coordinator, UCLAN
Chris Barker, Head of Offender Management, HMP Kennet
John Beal, Consultant in Dental Public Health, Yorkshire and the Humber
Debbie Birtchnell, Staff Nurse, HMP the Mount
Keith Budgen, HMP Whatton
Frances Carbery, HIMP Specialist, NHS Bury and North West Healthy Prisons Network
Juniper Connal, Development Manager, Smokefree South West
Caroline Cooper, Somerset NHS Stop Smoking Service
Dominic Cullen, Primary Care Lead Nurse, HMP Garth
Jo Dickinson, Acting Health Improvement Lead (Tobacco Control), Darlington PCT
Stephanie Duckworth Porras, NHS Islington Stop Smoking Service
Cecilia Farren, GASP
Steven Fraser, H&S Advisor, HMP Holme House
Alicia Grinley, RMN HMP Garth
Claire Harrison, Specialist Stop Smoking Advisor (Prisons), NHS County Durham and NHS Darlington
Paul Hayton, Director of Healthy Prisons Programme, UCLAN
Lucy Hornshaw, Healthcare Manager, HMP Shepton Mallet
Amanda Jones, Pharmacist, HMP Bronzehill
Paul Ledworth, HMP Garth and Wymott
Dr Charlotte Lennox, Research Associate, Offender Health Network
Louise Livesey, Healthcare Support Nurse, HMP Wymott
Gill Lomax, Substance Abuse Worker, Red Bank Community Home
Brian Lowson, H&S Advisor, HMP Durham
Susan MacAskill, Senior Researcher, Institute of Social Marketing, University of Stirling
Rory Maguire, Substance Misuse Manager, Ashfield YOI
Catherine McConnell, Regional Project Support Officer, Fresh Smoke Free North East
Vanessa Prior, H&S Advisor, HMP/YOI Low Newton
Sandra Scovell, Stop Smoking Lead for Prisons, NHS Wiltshire
Carolyn Shears, Milton Keynes PCT
Dr Ruth Shakespeare, Consultant in Public Health, Department of Health South West
Tina Thomas, Occupational Health Clerk, HMP Staffs
Jayne Thompson, Central Lancashire PCT and HMP Garth
Margaret Winskill, Health Promotion Specialist, Public Health, NHS Wiltshire

Prisoners from HMP Garth, HMP The Mount and HMP Wymott