Becoming a Non-Smoker Questionnaire

Name: ___________________________ Date: _____________

1. Why do you want to become a non-smoker? Positive statements only! List ALL your reasons for wanting to become a non-smoker for life.
   Basic reasons (circle if appropriate) add more if you like:
   Get healthy; stay healthy; prevent medical problems; be able to walk / exercise without losing my breath; have more energy; be a good role model for children / grandchildren; etc.

   Any other reasons or benefits, list everything!

2. What benefits will you receive by reaching your goal? (circle)
   Smell better; better self-esteem; feel accepted; increased self-confidence; better self-image; be around for children or grandchildren, watch them grow and prosper; live longer; live healthier.

   What else? List everything! Ask yourself: What’s in it for me?

3. How will you feel as a happy, healthy non-smoker?
   Extreme happiness; pride in my accomplishment; confidence; energetic; certainty; joy; peace of mind; improved self-esteem.

   Any other feelings / emotions-List everything:
4. Are there any reasons why you might **NOT** want to become a non-smoker? Do you have any fears, concerns or worries about saying good-bye to your cigarettes... forever? Place an (X) next to each statement that applies and **feel free to add your own**.

- I’m afraid I’ll gain weight.
- I’m afraid of the cravings.
- I’m afraid I’ll be nasty and cranky.
- I’m afraid I won’t be able to handle stress.
- What if I fail...again? I’ve tried everything & nothing works-I don’t want to get my hopes up...again!
- I’m losing my crutch...my best friend.
- I’m afraid I won’t be able to enjoy life.
- I’m afraid it’ going to be too painful, too difficult to quit.
- I won’t feel comfortable.
- I’ll lose my identity. I won’t know who I am.
- I may not know how to function as a non-smoker.
- I’m afraid my smoker friends won’t want me anymore.
- People might expect more of me.
- I’ll feel deprived if I can’t have my cigarettes.
- It’s like losing my best friend.

Anything else? It is essential to our success to get all fears, worries, concerns and limiting beliefs out in the open.
Ultimate Truth Statement

Part 1:
Write a simple Ultimate Truth Statement (a present-tense goal) about becoming a non-smoker. EXAMPLE of a simple version: "I am a non-smoker." or "I am smoke-free for life."

Write out a first person, present-tense statement, about why you want to be a non-smoker. Include all the reasons, benefits and emotions that you would like to have, be and feel as a non-smoker. Hint: Refer back to Steps 1, 2 & 3 of the questionnaire.

Example:

"I am happy, healthy non-smoker. I breathe easier and I have much more energy. I look good, I feel good and everything smells better. I feel proud, confident and self-assured and I know I can do anything I set my mind to. I'm totally committed to maintaining this newfound health and self esteem.

Tweak this statement until you love it, and can’t wait to get there, feeling and looking this way. Your objective now becomes owning this statement with all your heart...even though you haven’t quit just yet.

My Ultimate Truth Statement:
Ultimate Truth Statement

Part 2:
State it out loud and assess how true it feels on a 1-10 scale:
“10” = I absolutely believe this statement. I “own” it. I see myself as already having achieved my goal, at least in my imagination. A “10” is where you ultimately want to be. If you are a “10” now, you wouldn’t need my help.

“1” = Who am I kidding?

Assessment #:  1  2  3  4  5  6  7  8  9  10 (circle)

What is keeping you from owning that statement? What’s in the way? What fears or limiting beliefs come up when you say this statement? Don’t judge yourself. It is very important to identify the doubts, fears and limitations. Just write down your thoughts.

Fear of failure; fear of success; I’ll have to work too hard; I’ll feel deprived; more will be expected of me, etc., etc., etc.