

Be Counted...



Hands of Hope

A Nationwide Art Project

Tobacco use is the #1 cause of preventable death in the USA. It contributes to the loss of life through many tobacco-caused diseases, including deaths associated through secondhand smoke. A special nationwide art project is starting and we want to invite **YOU** to participate and "**BE COUNTED, through HANDS OF HOPE**". This project will represent how tobacco use continues to affect your life and those you love or have loved. We are hoping to collect hands from across the nation and make a clear statement as to the continued need for tobacco prevention, education and treatment.

YOUR ARTWORK WILL MATTER!

It will be joined with others across America in a collage of hands...linking together messages, from youth through adults. Your name will be added to a list of contributors of the project. It will be first exhibited at the National Conference "40 Years of Tobacco or Health - How Can We Do Better?" on May 28, 2004 at the Hyatt Regency in New Brunswick, NJ.

It is our intention to have this project grow and continue to be exhibited throughout the USA at other tobacco/health/art related events. Your hand will become a permanent part of this project! You will be able to check our website at www.tobaccoprogram.org to see photos of the exhibit, numbers of hands collected, ages and states.

WE HOPE YOU WILL JOIN IN!

Pass this project onto youths and adults!

(Artwork by Garrett V., Hillsborough, NJ 08844 USA Age 6, 4/14/04)

INSTRUCTIONS:

- 1) Think about how your life has been affected by tobacco...
 - a. Does someone you know continue to be addicted to smoking?
 - b. Are you worried about their health?
 - c. How has information about tobacco affected the choices you've made in your life? Have you quit smoking? Or never started?
 - d. Did someone you know die from a disease caused by tobacco?
- 2) Trace your hand on a piece of plain paper. (Use a heavier weight paper, like index/card stock - it will work best!)
- 3) Cut out the hand that you traced.
- 4) Decorate your hand by drawing, coloring, painting, pasting a photo, writing a poem in honor of a loved one, or writing a statement you feel strongly about.
- 5) Optional* Include on the back of your hand artwork: First Name, Last Name or Last Initial, City, State, Zip, Country, Your Age, Date artwork was created. *This information will be used to keep track of contributors of the project and will not be used for any other purpose.
- 6) Mail to (or for more information, contact): Nancy Speelman, Training and Education Coordinator, Tobacco Dependence Program, UMDNJ, School of Public Health, 317 George Street, Suite 210, New Brunswick, NJ 08901
Phone: 732-235-8218, Email: nancy.speelman@umdnj.edu

Keep me on the Tobacco Dependence Program announcement list!

Mail to: **Tobacco Dependence Program**
317 George Street, Suite 210, New Brunswick, NJ 08901-2008
or send an email to: info@tobaccoprogram.org



NAME _____ ORGANIZATION _____

ADDRESS _____

CITY, STATE, ZIP _____

AREA CODE +PHONE NUMBER _____ AREA CODE +FAX _____

E-MAIL ADDRESS _____

- I do not have email or internet access. Please send a printed copy. Please remove me from the list
I am also interested in information on tobacco dependence treatment and
- addictions mental health young people