



Behavioral Health & Tobacco

BURDEN FACTS

Disparities among people with behavioral health conditions

- Persons with mental illness or substance use disorder represent **25%** of the adult population yet consume **40%** of all cigarettes.⁴
- **51%** of deaths among clients in addictions treatment were the result of tobacco related causes, which is **double** the rate found in the general population.⁵
- **34%** of Montanans who use tobacco report binge drinking compared to **15%** of non-tobacco users.⁶
- **20%** of Montanans who use tobacco report having poor mental health compared to **11%** of non-tobacco users.⁶

Patients are 25% more likely to maintain long term abstinence from alcohol and illicit drugs if they also quit nicotine.¹

Common Myths⁷

Myth #1: Tobacco is a necessary self-medication for people with mental illness.

Fact: Not only is tobacco ineffective as a treatment for mental disorders, but psychiatric disease makes the brain more susceptible to addiction.

Myth #2: People with mental illness are not interested in quitting smoking.

Fact: Patients in outpatient and inpatient psychiatric settings are about as likely as the general population to want to quit smoking.

Myth #3: People with mental illness cannot quit smoking.

Fact: Randomized treatment trials and systematic reviews involving smokers with mental illness document that success is possible.

Myth #4: Smoking is a coping strategy. Quitting interferes with recovery from mental illness and leads to decompensation.

Fact: Smoking cessation does not exacerbate depression or PTSD symptoms or lead to psychiatric hospitalization or increased use of alcohol or illicit drugs.

Myth #5: Smoking is the lowest priority concern for patients with acute psychiatric symptoms.

Fact: People with psychiatric disorders are far more likely to die from tobacco-related disease than from mental illness.

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SOURCES

1. Prochaska, J.J., et.al. (2004). A metanalysis of smoking cessation interventions with individuals in substance abuse treatment or recovery. *Journal of Consulting and Clinical Psychology*, 72(6):1144-1156.)
2. Taylor, G., Girling, A., McNeill, A., & Aveyard, P. (2015). Does smoking cessation result in improved mental health? A comparison of regression modelling and propensity score matching. *BMJ Open*5(10), e008774. Retrieved October 29, 2015, from <http://bmjopen.bmj.com/content/5/10/e008774.full>
3. Taylor, G., McNeill, A., Girling, A., Farley, A., Lindson-Hawley, N., & Aveyard, P. (2014). Change in mental health after smoking cessation: Systematic review and meta-analysis. *BMJ*, 348, g1151. Retrieved October 29, 2015, from <http://www.bmj.com/content/348/bmj.g1151>
4. Centers for Disease Control and Prevention. Tobacco Use Among Adults with Mental Illness and Substance Use Disorders. National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health. [updated 2019 Jan 7]
5. Hurt et al. (1996), a seminal 11-year retrospective cohort study of 845 people who had been in addictions treatment (described in SAMHSA, [2011])
6. Behavioral Risk Factor Surveillance System, 2020.
7. SAMHSA (2016). Enhance your states tobacco cessation efforts among the behavioral health population: A behavioral health resource.

When compared with smoking, smoking cessation was associated with reduced depression, anxiety, and stress—and it improved mood and quality of life.^{2,3}

How the Montana Tobacco Use Prevention Program can help:

- Model tobacco-free campus policy language
- Provide a “Toolkit to Integrate Tobacco Treatment and Policies into Montana’s Behavioral Health System” which providers information on:
 - Understanding the Toll of Tobacco
 - Implementing Organizational Change
 - Integrating Tobacco Dependence Treatment for clients into Routine Systems of Care
 - Enhancing Employee Knowledge and Offering Cessation Assistance
 - Creating a Tobacco-Free Policy to Support Tobacco-Free Living
- Free or reduced cost cessation medications and free individual counseling from the Montana Tobacco Quit Line.
- Trainings on brief cessation intervention and referral mechanisms to the Quit Line.
- Free Tobacco-Free signage and Quit Line materials specific to addiction and mental health located on our on-line store <http://mtupp.allegrahelena.com/>

