



Smoking and Mental Health

A quick guide for behavioral health professionals

Smoking and mental health facts:

Prevalence Rates:

- Arizona: 15.7%
- SMI Diagnosed: 75%
- SMI health care professional: 33%

People with SMI:

- 100,000 tobacco users in Arizona's behavioral health system
- 50% of all tobacco purchases
- Die 25 – 30 years earlier

Potential Barriers to treatment:

- Used as an incentive
- Negative effects when mixed with some nicotine replacement therapies (NRT)
- Temporary instability

Did you know that there is a strong connection between smoking and poor mental health?

Smoking prevalence in Arizona is on the decline. Last year smoking rates fell from over 19% to **15.7%**. However, among patients diagnosed with serious mental illness (SMI), rates have held steady at **75%**. In addition, mental health professionals charged with the treatment and care of SMI patients have a higher prevalence rate at **33%**, which is double average rate.

Tobacco is often used as an incentive item. It can be used to calm unstable patients and tobacco use is also used as a bonding mechanism between patients and health care professionals.

Remember the patient's physical well-being is as vital as their mental well-being. Foster both!

How to approach smoking with your clients

Tobacco, and cigarettes in particular, are often seen not only as relief to one's addiction, but often times as one's escape and only constant in an often turbulent and transient life. Taking the time and effort to ensure patients get the help and support they need is critical to helping them break all of their addictions. The **Ask, Advise and Refer (2A's-R)** framework is used as a quick assessment and referral tool.

Ask – The first step is to ask the patient if they are a smoker or tobacco user. This may seem obvious, but one has to self-identify as a tobacco user in order to be ready to quit. Depending on usage, a five cigarette a-day smoker may not consider themselves a smoker and therefore would not respond to cessation referral attempts. They may also feel they can quit on their own, not needing outside help. If the patient cannot say they are a smoker, you cannot convince them to quit since they are in denial that a habit exists.

Advise – The second step is to advise the patient about available approaches to quitting. This can range from behavioral modification such as replacing habits and removing tobacco related items (ashtrays, lighters) from the home and environment, to prescription medication or nicotine replacement therapies (NRT) that can be used.

Refer – Providing a client with the phone number to the Arizona Smokers' Helpline (1-800-55-66-222) or website www.ASHLine.org will result in approximately a 3% chance that the client will call and enroll. You can take it one step further and personally refer your client to the Arizona Smokers' Helpline to ensure his/her information is received by a quit coach. The coach will call the patient within 24 hours of the referral. Enrollment rates jump to nearly 50% if the extra step of referral is taken. Please obtain permission from your client prior to the referral.

Tips for assisting your patients to reach their goals

The 2A's-R framework utilizes screening for tobacco use, along with support to help patients introduce healthy behavioral changes that are realistic and sustainable via professional quit coaches at the Arizona Smokers' Helpline and www.ASHLine.org.

Ask if the patient is a tobacco user.

Advise the patient on methods of quitting.

Refer the patient to the Arizona Smokers' Helpline by their information to (866) 897-1263.

Arizona Smokers' Helpline 1-800-55-66-222 or www.ASHLine.org

What is the ASHLine and how can they help?

The Arizona Smokers' Helpline is a free service offered by the State of Arizona to help tobacco users quit and remain tobacco-free. The Arizona Smokers' Helpline:

- Provides free, evidence-based support for all Arizonans who want to quit tobacco
- Promotes tobacco cessation
- Reduces the prevalence of tobacco use in Arizona
- Enhances the state's tobacco control efforts

The quitting experience, while different for each caller, will begin with the same procedure. Initially, an intake specialist will assess the person's readiness to quit. The utilization of a client-directed outcome informed approach to treatment is preferred as it is personalized. Practical techniques from motivational interviewing and Cognitive Behavioral Therapy are also incorporated.

The primary goal of the Arizona Smokers' Helpline is to help people quit and to have the person stay in the program until they are tobacco free for at least 90 days. A proactive, multi-call program is developed by the Quitline's trained "Quit Coaches" to aid each person in the process. The process follows a similar path for most clients:

- 2 calls prior to quit date
- 1 call per week for the first 4 weeks
- 1 call per month for the next 2 months
- Aftercare follow-up as requested

Medication options are explored. The caller has access to:

- 2 weeks of nicotine replacement therapies (NRT) such as patches, gum or lozenges
- 12 weeks of any FDA approved tobacco cessation medication for AHCCCS clients

In over 100 studies reviewed, there is often a greater than 50% increase in likelihood of quitting with phone counseling. Nicotine replacement therapies (NRT) boost quit rates another 50% to 100% in some cases. The Centers for Disease Control (CDC) firmly believes in quitlines as evidenced by their prioritization of them over other methods.

In addition to the call-in option, www.ASHLine.org offers a Webquit feature that allows a people to get support online. Through Webquit, people can set their quit date, make their quit plan, and receive support for quitting.

Billing for health education:

To bill for services and time associated with tobacco cessation counseling please use code **H00025** "Health education/health promotion"

QUICK TIPS **DEALING WITH CRAVINGS**

A craving usually lasts for 30-90 seconds. After that, the habit takes over. Try these tips to distract yourself until the craving passes...

- Call a friend
- Go for a walk
- Take deep breaths
- Drink a glass of water
- Chew sugar-free gum
- Brush your teeth

COMMON WITHDRAWAL **SYMPTOMS**

Cravings

Difficulty concentrating

Insomnia

Depression

Intense feelings of:

- Anger
- Irritability
- Frustration
- Restlessness
- Anxiety

For more information call
the Arizona Smokers'

Helpline at

1-800-55-66-222 or visit

www.ASHLine.org



This flyer, its sources and related materials can be found at:
www.azdhs.gov/bhs/qhi/index.htm