

# Mental Illness and Tobacco Use

## Fact Sheet

Tobacco use is the leading cause of preventable death and disease, killing nearly 5,000\* Arkansas residents every year. Tobacco use greatly increases the risk of developing:

- Lung cancer
- Stroke
- Chronic obstructive pulmonary disease
- Ischemic heart disease

Tobacco use disproportionately affects those with a mental illness, and usage rates among this group are alarmingly high. With greater usage rates comes more suffering from smoking-related illnesses and mortality.

- In the United States, persons with a mental illness represent about 44 percent of cigarette smokers. (Grant et al., 2004; Lasser, 2000)
- Nicotine dependent rates among persons with a mental illness are two to three times higher than the general population. (Grant et al., 2004; Lasser, 2000)
- Of the 435,000 annual deaths from smoking in the United States, about 200,000 occur among persons with mental illness and/or substance abuse disorders. (Grant et al., 2004)
- People with serious mental illnesses die 25 years younger than the general population, due largely to conditions caused or worsened by smoking. (NASMHPD, 2006)

In many psychiatric facilities, tobacco use is widely accepted. However, it harms the health treatment, treatment environment, overall wellness and, ultimately, recovery of patients. By providing holistic recovery, mental health professionals can reduce the burden of tobacco-related health issues while encouraging personal recovery from mental illness.

\*Campaign for Tobacco-free Kids

([http://www.tobaccofreekids.org/facts\\_issues/toll\\_us/arkansas](http://www.tobaccofreekids.org/facts_issues/toll_us/arkansas))

*See the other side of this page for key reasons to encourage patients to quit and resources to do so.*

Tobacco cessation is a key component of consumer-driven, individualized treatment planning and patient recovery. Many persons with mental illnesses often want to quit tobacco use but lack access to information on cessation services and resources.

So why should mental health care providers help patients quit tobacco use?

- To improve patient health and increase healthy years of life
- To improve the effect of medications used to treat mental health problems
- To reduce time spent absent from treatment due to tobacco-related illnesses
- To reduce the disproportionate affects of tobacco use on persons with mental illnesses

Tobacco users with mental illnesses deserve access to all the cessation support and assistance available.

## Let us help you help them.

1. Start by calling the Arkansas Department of Health Tobacco Prevention and Cessation Program (501-661-2953) to discuss the individual needs of your mental health treatment facility. TPCP offers the following assistance to mental health care providers:
  - a. Sample tobacco-free policies
  - b. Resources on facilitating tobacco-free recovery groups
  - c. Systems Training Outreach Program ([arstop.org](http://arstop.org))
  - d. Raising awareness of the burden of tobacco among persons with mental illnesses
  - e. Providing tobacco-related educational materials, such as brochures and fact sheets
2. Refer patients to the Arkansas Tobacco Quitline. By calling 1-800-QUIT-NOW, patients can receive free, confidential counseling with a trained Quit Coach® to develop a plan to quit. Ongoing support is provided by phone or online, and nicotine replacement therapy medications are available while supplies last.
3. Educate yourself and other mental health care providers about tobacco use among persons with mental illnesses. Upon request, TPCP can provide an extensive list of literature and resources to help increase your knowledge of this important issue.



**For more information:**

Tobacco Prevention and Cessation Program  
Arkansas Department of Health  
(501) 661-2953