

Smoking Rates High for People With Mental Health Issues

The CDC Cites Tobacco Use in Its New Report

By DONOVAN KUEHN

“Got a light?” Americans suffering from mental illnesses are far more likely to ask this question, and the health implications are staggering.

According to a report released by the Centers for Disease Control and Prevention in collaboration with the Substance Abuse and Mental Health Services Administration (SAMHSA), smoking among U.S. adults with mental illness is 70 percent higher than for adults with no mental illness. The research shows that 36 percent of adults with a mental illness are cigarette smokers versus 21 percent of adults who do not have a mental illness.

Combined data from SAMHSA’s 2009–2011 National Survey on Drug Use and Health (NSDUH) were used to calculate national and state estimates of cigarette smoking among adults aged 18 years and older who reported having any mental illness. Mental illness was defined as having a diagnosable mental, behavioral, or emotional disorder, excluding developmental and substance use disorders, in the past 12 months. Future research will analyze the smoking rates among people with substance use disorders.

“Smoking harms nearly every organ of the body, causing many diseases and affecting the health of smokers in general,” said Cynthia

Moreno Tuohy, NCAC II, CCDC III, SAP, Executive Director of NAADAC, the Association for Addiction Professionals.

“With careful monitoring, quitting smoking does not interfere with treatments and can be effectively incorporated as a part of treatment,” added Moreno Tuohy.

Almost one in five adults in the United States — about 45.7 million Americans — have some type of mental illness, noted the report.¹ Younger adults, American Indians and Alaska Natives, those living below the poverty line and those with lower levels of education displayed the highest rates of smoking.² Where you live can also have an impact as smoking rates differ from state to state. Rates ranged from an estimated low of 18.2 percent in Utah to a high of 48.7 percent in West Virginia.³

Smoking More

The report confirms that on average adult smokers with mental illness smoke more cigarettes per month than those without mental illness (331 vs. 310 cigarettes).⁴ Adult smokers with mental illness are also less likely to quit smoking cigarettes than adult smokers without mental illness.⁵

“Special efforts are needed to raise awareness about the burden of smoking among people with mental illness and to monitor progress in addressing this disparity,” said Pamela S. Hyde, JD, Administrator of the Substance Abuse and Mental Health Services Administration.

Developing an Action Plan

“Smokers with mental illness, like other smokers, want to quit and can quit,” said Tom Frieden, MD, MPH, who serves as the Director of the Centers for Disease Control and Prevention.

“Stop-smoking treatments work — and it’s important to make them more available to all people who want to quit.”

Smokers who quit have immediate health benefits.

- Risk for a heart attack drops sharply just one year after quitting.
- After 2 to 5 years, the chance of stroke can fall to about the same as a nonsmoker’s.
- Within 5 years of quitting, the chance of cancer of the mouth, throat, esophagus, and bladder is cut in half.
- Ten years after quitting smoking, the risk for dying from lung cancer drops by half.

Source: CDC Vital Signs, February 2013, page 2, www.cdc.gov/vitalsigns

Smoking and mental illness

- Nicotine has mood-altering effects that put people with mental illness at higher risk for cigarette use and nicotine addiction.
- People with mental illness are more likely to have stressful living conditions, be low income, and lack access to health insurance, health care, and help quitting. All of these factors make it more challenging to quit.
- Evidence shows that there has been direct tobacco marketing to people with mental illness and other vulnerable groups of people.

Source: CDC Vital Signs, February 2013, page 2, www.cdc.gov/vitalsigns



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The 2006 Surgeon General's Report found that smoke-free policies reduce exposure to secondhand smoke and help smokers quit.⁶ To address the high rates of tobacco use among people with mental illness, SAMHSA, in partnership with the Smoking Cessation Leadership Center (SCLC), is working to promote tobacco cessation efforts in behavioral health care. SAMHSA and the SCLC developed and implemented the 100 Pioneers for Smoking Cessation Campaign, which provide support for mental health facilities and organizations to undertake tobacco cessation efforts.

SAMHSA and the SCLC expanded the Pioneers Campaign by working with states through Leadership Academies for Wellness and Smoking Cessation, whose goal is to reduce tobacco use among those with behavioral health needs and staff. Participating states bring together policymakers and stakeholders (including leaders in tobacco control, mental health, substance abuse, public health and consumers) to develop a collaborative action plan.

Cigarette smoking continues to be the leading cause of preventable death and disease in the United States and throughout the world. Cigarette smoking is responsible for an estimated 443,000 deaths in the United States each year.⁷

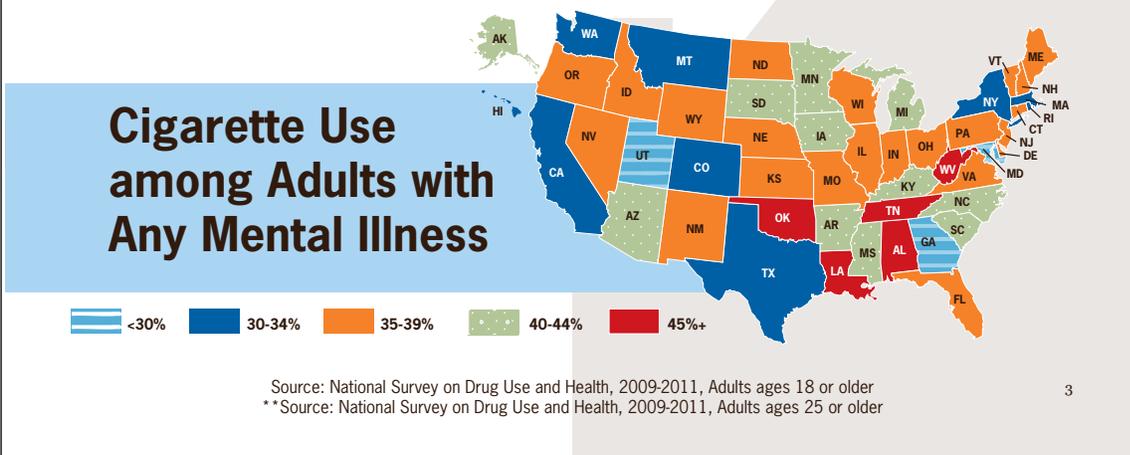
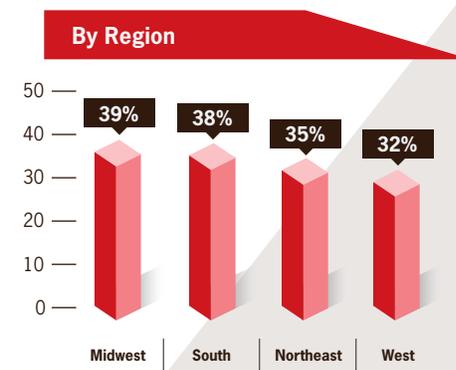
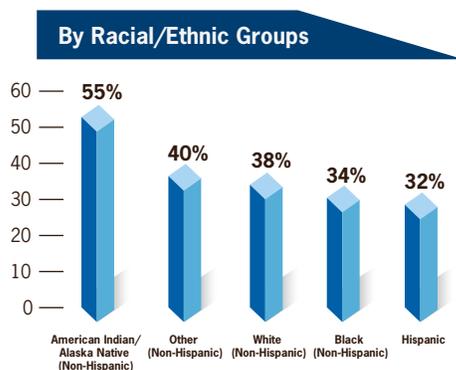
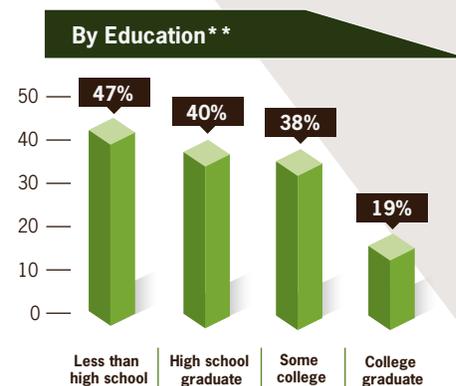
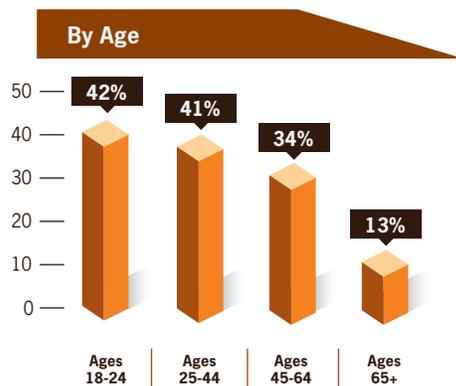
For quitting assistance, call 1-800-QUIT-NOW (1-800-784-8669) or visit www.smokefree.gov. Or visit www.BeTobaccoFree.gov for information on quitting and preventing children from using tobacco.

ENDNOTES

- ¹ Percentage of adults with any mental illness, by sex and selected characteristics – National Survey on Drug Use and Health, United States, 2009–2011, www.cdc.gov/mmwr/preview/mmwrhtml/mm62e0205a1.htm?s_cid=mm62e0205a1_w
- ² Source: National Survey on Drug Use and Health, 2009–2011, Adults ages 18 or older, www.cdc.gov/mmwr/preview/mmwrhtml/mm62e0205a1.htm?s_cid=mm62e0205a1_w#tab2

- ³ Source: National Survey on Drug Use and Health, 2009–2011, Adults ages 25 or older.
- ⁴ Source: National Survey on Drug Use and Health, 2009–2011, Adults ages 25 or older, www.cdc.gov/mmwr/preview/mmwrhtml/mm62e0205a1.htm?s_cid=mm62e0205a1_w#tab3
- ⁵ Source: National Survey on Drug Use and Health, 2009–2011, Adults ages 25 or older, www.cdc.gov/mmwr/preview/mmwrhtml/mm62e0205a1.htm?s_cid=mm62e0205a1_w#tab3
- ⁶ The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General, U.S. Department of Health and Human Services, page 598, www.surgeongeneral.gov/library/reports/secondhandsmoke/chapter10.pdf
- ⁷ Centers for Disease Control and Prevention, 2013, www.cdc.gov/vitalsigns/SmokingAndMentalIllness/index.html

Smoking Statistics for US Adults with Mental Illness



Source: National Survey on Drug Use and Health, 2009–2011, Adults ages 18 or older
 **Source: National Survey on Drug Use and Health, 2009–2011, Adults ages 25 or older