

# Tobacco Free Forum for Mental Health Centers & Psychiatric Facilities

Coordinated by the University of Colorado Denver, Department of Psychiatry &  
Supported by the State Tobacco Education and Prevention Partnership

*Persons with Mental Illnesses **Want to Quit Tobacco, Need to Quit Tobacco, and Can Quit Tobacco but Need an Environment That Assists Them***

*"I was told more or less when I went to the hospitals that cigarettes help control certain areas in my brain and the way we function out in society. I more or less became a smoker because I was told it would help me with my illness. I was taught more about it helping my illness than I was about cancer and stuff like that."*

- Consumer focus group participant

**41%** of persons in the US who reported having recent mental illnesses also smoke cigarettes<sup>1</sup> and represent 44.3% of the U.S. tobacco market. People with serious mental illness, on average, **die 25 years younger** than the general population—largely from conditions caused or worsened by smoking.<sup>2</sup>

Although quit rates for persons with mental illnesses are less than the general populations, smoking cessation rates are still substantial, 10-30% for persons with psychotic disorders and up to 38% for persons with depression.<sup>1,3</sup>

**Over 41%** of State Psychiatric Facilities are smoke-free.<sup>2</sup> Compared to hospitals that permit smoking, smoke-free hospitals:

- Report significantly **less** tobacco-related incidents of seclusion, restraint, coercion and threats among patients and staff.
- Report **fewer** tobacco-related health issues.
- Are significantly **more** likely to offer medication treatments for tobacco and modify medicine doses based on tobacco use.

<sup>1</sup> Lasser et al: JAMA 284:2606-10, 2000

<sup>2</sup> National Association of State Mental Health Program Directors, October 2006 technical report "Comorbidity and Mortality in People with Serious Mental Illness."

<sup>3</sup> Baker et al: Am J Psychiatry 163(11):1934-42, 2006

## What can your mental health center or psychiatric facility do to go tobacco-free?

(1) Start with developing tobacco-free facilities:

### Tobacco-Free Facilities<sup>2</sup>

Define your terms:

- Include all tobacco products
- Define physical boundaries of facilities
- Consider exceptions, including ceremonial use or medical orders
- Develop a contraband policy
- Include enforcement policies with mental health consumers, staff, and visitors

(2) Join our tobacco-free forum for mental health centers and psychiatric facilities:

- The University of Colorado Denver (UCD) research team is facilitating an open forum on tobacco-free mental health facilities implementation.
- The UCD team will provide information on best practices, empirical research, and data from ongoing smoking cessation projects to inform mental health center and psychiatric facility program staff.
- The forum will allow your organization to learn from and share with other mental health and psychiatric facilities how best to implement and sustain tobacco-free policies.

Please contact Chad Morris at

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**303-315-9472 for more information on joining the mental health tobacco-free forum**

