

## Vermonters with mental health and substance use disorders (MH/SUDs) continue to experience disparate health impacts related to tobacco use.

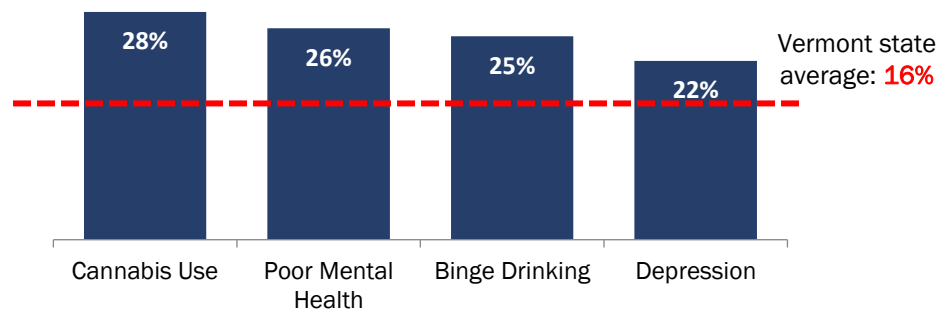
Individuals with MH/SUD conditions are **more likely to smoke** than people without such conditions and those with MH/SUD conditions who smoke **may die up to 15 years prematurely**, largely due to **tobacco-attributable disease**.<sup>1</sup>

- Adults with mental health conditions are **twice as likely to smoke** compared to other adults.<sup>2</sup>
- Despite wanting to quit, adults with MH/SUDs are **less likely to receive tobacco treatment**.<sup>3</sup>
- **Rates of death** among people with SUDs (54%) and co-occurring MH/SUDs (47%) **related to tobacco are higher** compared to people from the general population (31%).<sup>4</sup>
- People who quit tobacco use during substance use treatment are **25% more likely to realize long-term recovery**.<sup>5</sup>

## The Centers for Disease Control and Prevention, the Vermont Tobacco Control Program (VTCP) and partners have identified adults with MH/SUDs as a high priority population.<sup>6</sup>

- In Vermont, **adults who use cannabis, adults reporting poor mental health, adults who binge drink and adults who have depression** have a **higher prevalence of cigarette smoking** compared to the state average.<sup>7</sup>
- Because of this higher prevalence, the VTCP and the Division of Substance Use

Cigarette Smoking Prevalence (BRFSS, 2021)



Programs within the Vermont Department of Health have undertaken efforts to reduce the disparity in smoking prevalence among those with MH/SUDs.

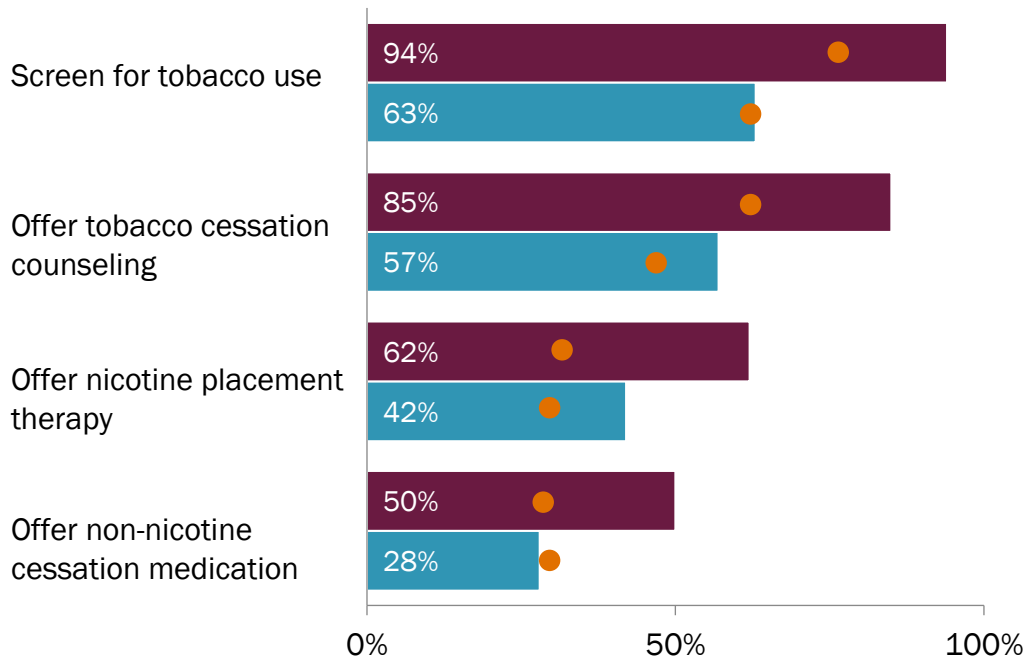
## Data on Vermont mental health and substance use facilities show information related to tobacco interventions.

Each year the Substance Abuse and Mental Health Services Administration collects data on mental health and substance use facilities across the nation. Basic questions are asked about the services these facilities provide, including practices related to tobacco control. In Vermont, more than half of mental health and substance use facilities surveyed treat patients with co-occurring MH/SUDs.<sup>8</sup>

# Vermont Tobacco and Mental Health Initiative

The data presented below is from Vermont mental health and substance use facilities that completed the 2020 National Mental Health Services Survey and the 2020 National Survey of Substance Abuse Treatment Services.<sup>8</sup> While Vermont mental health and substance use facilities are screening and offering cessation counseling and medications at higher rates than the national averages, there is still room for improvement to address tobacco-associated health disparities.

## Prevalence of tobacco-related efforts at Vermont substance use facilities (n = 52) and mental health facilities (n = 60) compared to the national average



## Interventions need to be implemented at the state, community and facility levels to continue serving MH/SUD populations.

### State and community level:

- Promote tailored quit ads to increase referrals to specialized quitline treatment protocols.
- Communicate on the benefits of whole health and how quitting tobacco alongside other substances benefits recovery goals.
- Integrate payment systems to include tobacco in substance use treatment to facilitate provider and patient recovery plans.

### Mental health and substance use facility level:<sup>9</sup>

- Implement tobacco- and substance-free campus policies to support staff and client wellness and substance abstinence.
- Set target goals for screening and treating tobacco use and dependence.

## Vermont Tobacco and Mental Health Initiative

- Create and communicate a wellness plan that includes tobacco screening and treatment as an opt out approach.
- Offer training and wellness supports to clinical and frontline staff, and stress relief breaks for clients.

### Promoting wellness and reducing tobacco-related illness is a shared undertaking.

- **Agency of Human Services - Department of Mental Health, Department of Vermont Health Access and the Vermont Department of Health:** These departments work for the physical, emotional and mental health of all Vermonters. The emphasis is prevention, early intervention, substance use and mental health treatment and supports involving preferred providers, designated agencies and Vermont's tobacco quitline, 802Quits.
- **National Behavioral Health Network for Tobacco and Cancer Control:** A Centers for Disease Control and Prevention Network working to eliminate tobacco use and cancer disparities by serving as a resource and technical assistance hub for MH/SUD providers and health professionals.
- **Vermont Care Partners (VCP):** An organization representing a network of 16 agencies located throughout Vermont that provide a variety of community services and supports, including adult MH/SUD services.

### Partner organizations are making a difference.

Activities from national and state-level partner organizations receiving VTCP funding include:



**National Jewish Health:** Administer 802Quits, Vermont's trusted source for evidence-based tobacco treatment. This program has a behavioral health protocol that includes tailored coaching calls with specially trained quit coaches, additional follow-up support and incentives for completing sessions. 802Quits also offers [resources and training](#) for health care professionals.



#### Mental health concerns are high among 802Quits registrants.

- The number of registrants with mental health conditions **doubled** from **December 2021 to January 2022**.
- **46%** of 802Quits registrants reported mental health concerns between July 1, 2021—June 30, 2022.<sup>10</sup>



**VCP:** Monitor specific measures in the electronic health record to determine which designated agencies are doing more screening, assessing, referring and treating of tobacco cessation.

# Vermont Tobacco and Mental Health Initiative



**Community Tobacco Coalition Grantees:** Conduct outreach and cessation promotion among priority populations, one of which must include mental health. An example of this work is Northeastern Vermont Regional Hospital's tobacco cessation partnership with a local organization serving individuals with MH/SUDs.



**Clara Martin Center:** Expand the capacity of the existing Wellness team to implement expanded wellness programming, including on-site tobacco cessation counseling. Refine data collection abilities at the designated agency.

## What's next for the initiative?

The Tobacco and Mental Health initiative continues to grow.

Activities in 2023 include:

- **Professional development and training opportunities** with the National Behavioral Health Network for Tobacco and Cancer Control.
- **Quarterly meetings** with the Behavioral Health Workgroup. Organizations and individuals are welcome to join. See below for contact information.
- **Ongoing support to integrate tobacco treatment** into substance use treatment and recovery payment and services.



For more information or to get involved, contact Dana Bourne [Dana.Bourne@vermont.gov](mailto:Dana.Bourne@vermont.gov).

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<sup>1</sup> National Center for Chronic Disease Prevention and Health, Office on Smoking and Health (2018). [Tobacco Use and Quitting Among Individuals with Behavioral Health Conditions](#). Centers for Disease Control & Prevention.

<sup>2</sup> National Center for Chronic Disease Prevention and Health, Office on Smoking and Health (2014). [Best Practices User Guide: Health Equity in Tobacco Prevention and Control](#). Centers for Disease Control & Prevention.

<sup>3</sup> Lubitz, et al. (2020). [History and Correlates of Smoking Cessation Behaviors Among Smokers with Serious Mental Illness](#). *Nicotine Tob Res*, 22(9).

<sup>4</sup> Bandiera, et al. (2015). [Tobacco-related mortality among persons with mental health and substance abuse problems](#). *PLoS one*, 10(3).

<sup>5</sup> National Council for Mental Wellbeing (2021). [An Implementation Toolkit for Statewide Tobacco Control Programs: Identifying and Addressing Health Disparities Related to Tobacco Use Among Individuals with Mental Health and Substance Use Disorders](#).

<sup>6</sup> Vermont Tobacco Control and Prevention Program (2023). [High Priority Populations](#). Vermont Department of Health, Health Promotion & Chronic Disease.

<sup>7</sup> Vermont Tobacco Control and Prevention Program (2023). [Adult Tobacco Use in Vermont: 2021 Behavioral Risk Factor Surveillance System Survey](#). Vermont Department of Health, Health Promotion & Chronic Disease.

<sup>8</sup> Data from the Substance Abuse and Mental Health Services Administration, [2020 National Mental Health Services Survey \(N-MHSS\) State Profiles Executive Summary](#) and [2020 National Survey of Substance Abuse Treatment Services \(N-SSATS\) State Profiles Executive Summary](#). Rockville, MD: Substance Abuse and Mental Health Services Administration.

<sup>9</sup> Some facilities-level intervention strategies adapted from: National Council for Mental Wellbeing (2021). [An Implementation Toolkit for Statewide Tobacco Control Programs: Identifying and Addressing Health Disparities Related to Tobacco Use Among Individuals with Mental Health and Substance Use Disorders](#).

<sup>10</sup> Vermont Tobacco Control and Prevention Program (2022). [802Quits Annual Report: FY22](#). Prepared by Professional Data Analysts.