Tobacco-Free Recovery
Driver Diagram

*People with Living/
Lived Experience and Their
Families/Supports/Caregivers*

COE-TFR Driver Diagram

Advancing Tobacco-Free Recovery Through Systems Change

The National Center of Excellence for Tobacco-Free Recovery (CoE-TFR) developed this driver diagram to guide multi-sector efforts in transforming systems of care and support to advance tobacco-free recovery (TFR) for individuals with behavioral health conditions (mental health and/or substance use conditions). Tobacco use remains disproportionately high among people with mental health and substance use disorders, contributing to significant differences in health outcomes.

This tool is designed to help partners across public health, healthcare, behavioral health, and community systems identify shared goals, align strategies and coordinate sustainable action toward system change.

What is a Driver Diagram?

A driver diagram is a visual tool to help teams understand and communicate what "drives," or contributes to the achievement of a specific goal.

Key Components:

- **Aim (or Goal):** The overall objective or outcome you want to achieve. It should be specific, measurable, and time-bound.

- **Drivers of change:** The major factors or high-level influences that directly impact the aim.

- **Change ideas:** Concrete strategies, practices or interventions that can be implemented to advance the drivers and achieve the aim

The CoE-TFR driver diagram is organized by sector and outlines a shared goal and an example aim for the tobacco-free recovery initiative. Use these examples as a starting point and tailor them to align with your organization's or state's TFR goals.

Goal: Ensure access to tobacco use treatment (TUT) and evidence-based medications (over the counter or prescribed) and counseling for people with behavioral health conditions.

Aim: Reduce use of tobacco from [percentage] to [percentage] among [target population, e.g. people in treatment for substance use disorders or people in treatment for mental health conditions] by [year]

How to Use this Tool

Use the CoE-TFR Driver Diagram to:

- Align partners around a shared goal for tobacco-free recovery

- Identify and prioritize key drivers and change ideas relevant to each system

- Support strategic planning and implementation to embed TFR into practice, policy, and funding mechanisms

- Strengthen cross-sector collaboration and collective impact

- Center the voices of people with living/lived experience in design, implementation, and evaluation of your TFR efforts

How This Tool Was Developed

The Driver Diagram was created through a collaborative and inclusive process that reflects the strength of shared expertise across each sector. The CoE-TFR team partnered with subject matter experts, people with lived and living experience of mental health and substance use challenges, state departments of health, behavioral health authorities, and community-based organizations.

Together, these partners identified the key drivers and change ideas that help systems increase access to evidenced based tobacco use treatment and medications. Their insights ensured that the tool represents the strengths, creativity, and innovation already present across diverse systems of care.

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Support

Have any questions or need help using or implementing strategies in the Driver Diagram? Feel free to reach out to us today using our CoE-TFR TA form for tailored support, resources, and guidance

Sector Specific Focus Areas

Each sector-specific diagram is tailored to the unique roles, responsibilities, and opportunities within that system, promoting cross-sector alignment and collective impact.

- **State Public Health Authority**
  Public health agencies play a pivotal role in shaping the policy, funding, and infrastructure needed to advance tobacco-free recovery. This driver diagram is intended to support state health departments in aligning leadership, data systems, funding mechanisms, and strategic partnerships to embed TFR into public health priorities and behavioral health transformation efforts.

- **Residential and Inpatient Treatment Centers**
  Residential and inpatient settings are critical environments for initiating tobacco use treatment and reinforcing recovery-oriented norms. This diagram provides a roadmap for integrating TFR into organizational culture, clinical protocols, discharge planning, and staff training—ensuring that tobacco use is addressed as part of whole-person care.

- **Outpatient Health Centers**
  Outpatient health centers serve as ongoing touchpoints for individuals in recovery. This diagram outlines opportunities for these centers to embed tobacco use treatment into routine care, leverage technology and infrastructure, and build a trained workforce to deliver consistent, evidence-based TUT services and supports across diverse populations.

- **Supportive Service Providers**
  Recovery support services, housing programs, food pantries, and other community-based organizations are trusted spaces for individuals with behavioral health conditions. This diagram outlines change ideas for these providers to integrate tobacco use treatment into their programs, reduce barriers to access, and foster supportive environments that reinforce tobacco-free recovery.

- **People with Living/Lived Experience and Their Families/Supports/Caregivers**
  People with living/lived experience and their support networks are essential partners in advancing tobacco-free recovery. This diagram highlights opportunities for education, peer support, advocacy, and engagement in care planning —ensuring that systems are responsive, person-centered, and grounded in real-world experience
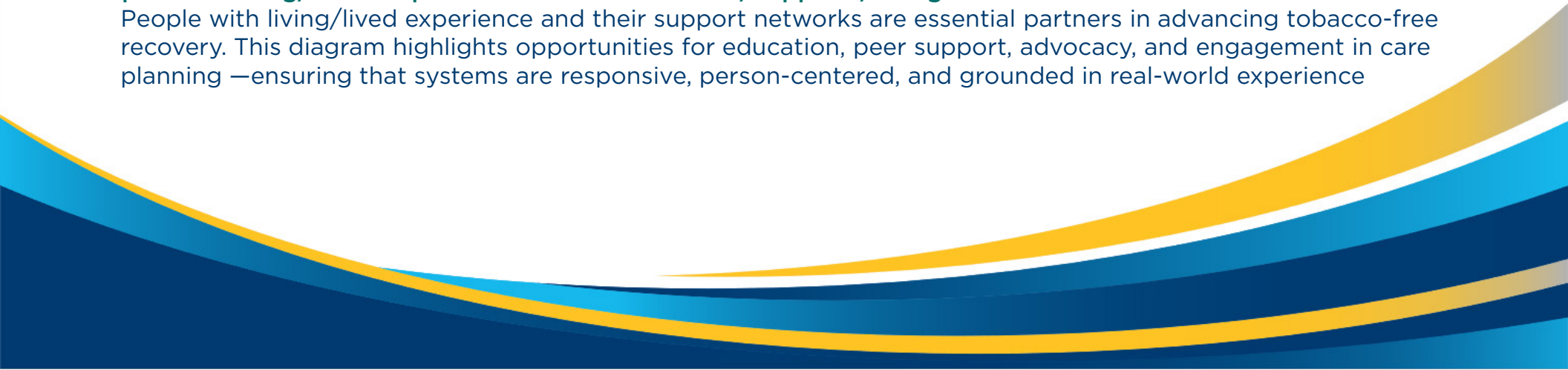
Goal
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Aim
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Drivers

Change Ideas – What Do We Do?

Education and Awareness

Misconceptions about tobacco use, NRT, and behavioral health are common and can reduce motivation to quit or try NRT.

- Share **accurate information** about the safety and effectiveness of nicotine replacement therapy (NRT) and TUT (tobacco use treatment) medications.
- **Debunk common myths** about tobacco use and mental health or substance use conditions (e.g., "smoking helps manage mental health symptoms").
- **Normalize quitting** as part of recovery and wellness.
- **Inform resources** specifically for families, caregivers, and community members to assist loved ones with behavioral health conditions on their quit journey.

Peer Support Programs

Supportive relationships are a key predictor of successful quit attempts and sustained recovery.

- Offer **support, encouragement, and accountability** during quit attempts.
- Share your own **quit journey or readiness stories** that motivate and inspire others on their quit journey and highlight the importance of tailored support.
- Join or facilitate **peer-led support groups** that include tobacco recovery.
- Engage in opportunities to **become trained as Tobacco Treatment Specialists**.

Engagement in Care Planning and Decision-Making

When people with lived experience are involved in care planning, treatment becomes more person-centered and effective.

- Request and review information with your **health care provider to maximize health benefits covered** (e.g., counseling, NRT, TUT medications).
- **Actively participate** in shared decision-making with healthcare and supportive services care teams to support recovery planning.
- **Request inclusion of tobacco use treatment** in behavioral health recovery plans.
- Advocate for **NRT and counseling to be offered as standard, not optional.**

Access to Resources & System Navigation

People often do not access NRT because they do not know what is covered or how to get it.

- Request and review information about **health insurance benefits** (or help others do so) to maximize benefits covered (e.g., counseling, NRT, TUT medications).
- **Share tips** on accessing low- or no-cost NRT and counseling.
- **Help others understand how to ask** for resources from providers including

Advocacy & Systems Change

People with lived experience and their families can influence how systems and providers prioritize tobacco treatment.

- Actively participate in **advisory boards, quality improvement teams, or advocacy groups** to co-create strategies and solutions that support tobacco-free recovery.
- Join or start **advocacy efforts that raise awareness** about the unique experiences of people with behavioral health conditions who use tobacco.
- **Share lived experience(s)** as co-authors to inform the way forward by shaping program design, implementation, evaluation, and execution of strategies (e.g., training programs for healthcare providers) and reduce stigma.
- Promote the inclusion of TUT as a **standard component of behavioral health services.**