

# ADDRESSING A TOBACCO USE DISPARITY BY ADOPTING 100% TOBACCO-FREE BEHAVIORAL HEALTH FACILITIES

## POLICY STAKEHOLDERS BEHAVIORAL HEALTH

### INTRODUCTION

Tobacco use remains the leading cause of death and disease in this country with over 443,000 deaths per year, almost half of those from smokers with mental illness. Approximately 25% of adults in the U.S. have some form of mental illness or substance use disorder, and these adults consume almost 40% of all cigarettes smoked by adults. Addressing tobacco use and exposure to secondhand smoke by adopting tobacco-free campus policies is a proven strategy to increase the number of tobacco users who quit, reduce the prevalence of tobacco use and reduce exposure to secondhand smoke.

### ADDRESSING TOBACCO IN THIS ENVIRONMENT

- People living with substance use and psychiatric disorders are 2 to 4 times more likely to smoke.
- One in three adults living with mental illness struggles with tobacco use.
- People with mental illness are more likely to have stressful living conditions, have low annual household income, and lack access to health insurance, health care, and help quitting. All of these factors make it more challenging to quit but many smokers with mental illness want to quit.
- Behavioral health facilities should consider going tobacco-free, including prohibiting tobacco use among employees or encouraging staff to quit, as a way to create a tobacco-free social norm for clients.

### POLICY IMPLEMENTATION STEPS

1. Establish a tobacco policy committee.
2. Develop policy language.
3. Train staff and educate clients on the new policy.
4. Prepare for policy launch, including enforcement planning and putting up signage to remind everyone of the policy.
5. Implement the tobacco-free policy.
6. Maintain long-term tobacco-free success.

### WHAT IS A MODEL POLICY?

A model tobacco-free policy prohibits the smoking of, or use of, any tobacco products including but not limited to, cigarettes, cigars, snuff, chewing tobacco, snus and electronic nicotine delivery systems, such as e-cigarettes, anywhere on the behavioral health agency's campus. This includes all organization-affiliated buildings, on all facility grounds, in all organization-owned or -leased vehicles, personal vehicles used in the course of work and at all sponsored events.

### RESOURCES

- Local District Tobacco Prevention Partner – usually located at a local Community Coalition, the DTPP can provide technical assistance on policy adoption and implementation and provide tips on creating tobacco-free environments.
- [www.BreatheEasyMaine.org/BehavioralHealth](http://www.BreatheEasyMaine.org/BehavioralHealth) - includes many resources available for download including policy adoption toolkit, template tobacco-free policy, and infographic.
- Annual Gold Star Standards of Excellence program – conducted in the Spring, this is an opportunity for behavioral health agencies to be recognized for efforts to adopt strong policies, procedures and treatment practices to address tobacco use.