Talking About Tobacco: Peer Champions for Lifesaving Conversations

Amanda Saake, LMSW, CPRP, NYCPS-P; Matt Canuteson, MA; Gita Enders, LMSW, MA, CPRP, NYCPS; Susan Friedlander, LCSW; Oscar Jimenéz-Solomon, MPH; Regina Shoen; Tony Trahan, BA; Jonathan Edwards, PhD; and Rita Cronise, MS, ALWF

Welcome: Please introduce yourself in the chat
A Note About Language

The focus of this presentation is the use of commercial tobacco products such as combustible cigarettes, chewing tobacco, snus, etc. as well as e-cigarettes, vaping or other Electronic Nicotine Delivery Systems (ENDS).

We use the terms “smoking” and “tobacco” interchangeably to cover all the available forms of commercial tobacco and ENDS products.

Opening Poll

On a scale of 1-5, how likely are you to talk about tobacco with people you are supporting?

1=never; 2=not likely; 3=maybe; 4=very likely; 5=I already do this
Workshop Goal

The goal of this workshop is to encourage new kinds of conversations about tobacco use.

Peer specialists who have themselves struggled with tobacco use can offer hope that reducing or eliminating tobacco use is possible and they can share practical ways of living with mental health while managing tobacco use in ways that others cannot.

In sharing their lived experiences, “peer champions” can offer life-saving conversations.

Training Objectives

After completing this workshop you will be able to:

• Recognize the impact of tobacco marketing on poor and marginalized communities, including people with behavioral health challenges, and the need for greater support and advocacy
• Recall different motivations for people to make a change in tobacco use
• Identify strategies and treatments to reduce or eliminate tobacco use
• Discuss how peer support can create new conversations about tobacco
Wait! What if I Smoke????

- Even if you use tobacco, there are still many ways you can help others explore stopping or reducing their tobacco use.
- One very important way is not to smoke with or supply tobacco to people you are supporting.
- Please observe your organization’s policies on tobacco use.

Introducing Today’s Panelists

- Amanda Saake
- Matt Canuteson
- Gita Enders
- Susan Friedlander
- Oscar Jimenéz-Solomon
- Regina Shoen
- Tony Trahan
- Jonathan Edwards
- Rita Cronise: Moderator
Tony’s Story

https://youtu.be/TIRuCYNE6SM

Tobacco Is Serious!
Smoking and Death Rates

Smoking is the leading cause of preventable death.

https://www.cdc.gov/tobacco/data_statistics/fact_sheets/fast_facts/index.htm

Cigarette smoking is responsible for more than 480,000 deaths per year in the United States, including more than 41,000 deaths resulting from secondhand smoke exposure.

www.cdc.gov/tobacco/data_statistics/sgr/50th-anniversary/index.htm 2014

Smoking kills more people than alcohol, AIDS, car accidents, illegal drugs, murders, and suicides combined, with thousands more dying from spit tobacco use.

www.tobaccofreekids.org

Smoking and COVID-19

• You can’t smoke and properly wear a face covering.
• Sharing cigarettes and gathering in “smoking circles” is even riskier behavior due to COVID.
• Among young people who were tested for the virus that causes COVID-19, the research found that those who vaped were five to seven times more likely to be infected than those who did not use e-cigarettes.  Stanford University School of Medicine, 2020
• “At the time of this study, the available evidence suggests that smoking is associated with increased severity of disease and death in hospitalized COVID-19 patients”  World Health Organization, June 2020.
Tobacco Targets Marginalized People including People with Behavioral Health Challenges

Tobacco use is not an equal opportunity killer. Smoking disproportionally affects those most in need such as the poor, the homeless, racial minorities, LGBTQ persons and those suffering from mental illness and substance use disorders.

There are up to 10x more tobacco ads in black neighborhoods than in other neighborhoods.
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July 28, 2022

16th Annual NYC Conference for Working Peer Specialists

Smoking Rates


Why Do People with Behavioral Health Conditions Smoke More?
Why is There A Health Inequity?

- Trauma
- Stress, Hopelessness and Boredom
- Targeted by Tobacco Industry
- Smoking Culture in the Behavioral Health System
- Peer Pressure?

Role of the Tobacco Industry (1970’s-1990’s)

- Targeted marketing to homeless population (high % people with SMI); RJ Reynolds: Project SCUM (Subculture Urban Marketing)
- Cultivated relationships with service organizations, shelters and MH facilities through sponsorship and donations.
- Provided free cigarettes to mental health & homeless facilities
- Monitored or directly funded research supporting the idea that individuals with schizophrenia are less susceptible to the harms of tobacco and that they need tobacco as self-medication
Role of the Tobacco Industry RIGHT NOW

- Marketing campaigns target low-income neighborhoods.
- People who have a serious mental illness are twice as likely as the general population to live in a neighborhood with lots of stores that sell tobacco and high levels of tobacco advertisements.
- E-cigarettes recently marketed to young people.
- Pushback against FDA menthol ban

Role of the Behavioral Health System

- Lack of Staff Training & Expertise in Addressing Tobacco Use
- Use of cigarettes as reward or incentive
- Belief that smoking cessation results in decompensation or takes away the "only pleasure"
- Myths: "People with BH conditions can’t quit/don’t want to quit"
- Better to smoke than "drink and drug"
- 1990 JCAHO Hospital Smoking Ban: AMI/FAMI successfully advocated for smoking areas in MH facilities; "it is inhumane to rob these patients of their autonomy and dignity by infringing on one of the few remaining freedoms historically allowed patients." *

* Prochaska and Hall; (2008) Schizophrenia Bulletin
Role of the Behavioral Health System RIGHT NOW

- Belief that smoking cessation results in decompensation or takes away the “only pleasure”; people with SMI don’t want to quit.
- Only 39 percent of mental health treatment facilities in the United States provided cessation counseling.
- Only about 25 percent of these facilities offered nicotine replacement therapy and/or other tobacco cessation medications.
- About 50% of mental health treatment facilities had smoke-free policies both inside and outside their facilities (SAMHSA, 2017).
- Implementing Tobacco Cessation Treatment for Individuals with Serious Mental Illness: A Quick Guide for Program Directors and Clinicians [link](https://store.samhsa.gov/sites/default/files/d7/priv/pep19-02-00-001_0.pdf)

Does “Peer Pressure” Play a Part?

- What are some attitudes and beliefs about tobacco use in the Peer Community?
- What have you noticed about tobacco use in Peer settings like meetings and social activities?
- Is talking about the impact of tobacco use a bit taboo in Peer settings?
Bottom Line (Health and Mortality)

- Smoking Disproportionately Impacts People with Behavioral Health Conditions
- People with SMI Experience Poor Health and Die 10-25 Years Prematurely Largely Due to Tobacco Use

Can Tobacco Use be a Barrier to Recovery and Community Inclusion?
What do these settings have in common???

Employer interviews two qualified candidates. One of the candidates has a strong tobacco odor.

College student comes to lecture late, leaves early and/or steps out in the middle of class to have a cigarette.

NYCHA and many private landlords have “no smoking” policy.

Smoking is prohibited in public parks, beaches, movies, etc.

Smoking is prohibited on all forms of public transportation.

Cigarettes are extremely expensive, especially for people on a fixed income. In NYS, the average cost for a pack of cigarettes is $12.85---the highest in the country! [Source](https://balancingeverything.com/cigarette-prices-by-state/#:~:text=New%20York,smoke%2040%20cigarettes%20a%20week).
Think of someone you know that uses tobacco.

What are some ways that smoking might be a barrier to community inclusion and recovery for that person?

Amanda’s Story
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Vicious Cycle

- Tobacco Use
- Lack of employment, education, housing, satisfying roles
- Stress, Hopelessness, Boredom

Bottom Line (Community Inclusion)

- Smoking has increasingly become a stigmatized behavior
- Smoking may jeopardize employment, housing, educational and social opportunities
- Smokers may be less likely to leave settings where it’s easy to smoke due to anxiety about withdrawal symptoms
- Smoking can create financial problems, especially for people on a fixed income.
What Can Peer Supporters Do About Tobacco?

Mission Essential:

Our collective mission is to promote recovery, wellness, community inclusion and social justice.

Addressing tobacco use is essential to achieving our mission.
Peer Supporters Can Play a Critical Role in Addressing Tobacco Use!

- Know the facts about tobacco use and treatment options—bust the myths! Learn more about treatment and options through the APS Series on Talking About Tobacco (available in APS and the Virtual Learning Community)
- Explore how tobacco use might impact recovery goals including housing, employment, recreation, finances, etc.
- Explain how NRT can be used to manage withdrawals even if someone is not ready to quit.
- Support people in linking to treatment for tobacco use.

If you are a tobacco user....

- Support people in linking to treatment for tobacco use
- Do not smoke with or provide tobacco to people you are supporting.

Ask yourself, what can you do instead of smoking with someone? Smoking with those you support is not an ethical form of engagement.

As a peer specialist you have an obligation to model healthier practices.....
Be a champion for wellness!
Engage people by promoting healing, wellness and positive coping strategies!

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Other Ideas?
Add them to the Chat

Be a champion for wellness!
Promote healing, wellness and positive coping strategies!
Closing Poll

On a scale of 1-5, how likely are you to talk about tobacco with people you are supporting?

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Comments? Questions?
Resources

Academy of Peer Services:
https://www.academyofpeerservices.org/

NJ Choices (Peer Tobacco Education):
https://www.njchoices.org/

Copeland Center (Wellness Recovery Action Plan):
https://copelandcenter.com/

National Center of Excellence for Tobacco-Free Recovery:
https://smokingcessationleadership.ucsf.edu/campaigns/samhsa

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Resources

NYC Tobacco Cessation Training & Technical Assistance Center:
https://nyctcttac.org/

NRT Education Video:
https://www.youtube.com/watch?v=UOEpWE8GY0Q

NYS Quitline
https://www.nysmokefree.com/
1-866-NY-QUITS
Thank You!

In Talking About Tobacco: Becoming a Peer Champion for Lifesaving Conversations

Courses are available in the Academy of Peer Services