

# Stopping Tobacco Use Promotes Recovery Among People Living with Mental Illnesses

## Overview

Although public health efforts have been effective in reducing the prevalence of tobacco use in the general population, the rates of tobacco use remain high among people living with a mental illness. In fact, individuals living with a mental illness are *2-3 times* more likely to use tobacco compared to those not living with a mental illness (Smith, Chhipa, Bystrick, Roy, Goodwin, & McKee, 2020).

## Tobacco Related Morbidity & Mortality

### **Tobacco use remains the leading cause of preventable disability and death.**

- Tobacco users living with a mental illness suffer higher rates of tobacco-related illnesses (e.g., cancers, respiratory illnesses, and cardiovascular diseases) compared to those who do not use tobacco (Callaghan et al., 2014).
- The life expectancy of tobacco users living with a mental illness may be reduced by 15-25 years compared to those who do not use tobacco (Callaghan et al., 2014; Tam, Warner, & Meza, 2016).
- The components of tobacco products may interfere with psychiatric medications, resulting in diminished therapeutic effects (Prochaska, Das, & Young-Wolff, 2017).

## Tobacco Use & Well being

### **Stopping tobacco use improves mental illness symptoms.**

- Stopping tobacco use is associated with positive effects on recovery and mental illness symptoms such as decreased anxiety, depression, and stress (Taylor et al., 2021).
- Among individuals living with both a mental illness and a substance use disorder, stopping tobacco use is associated with a 25% increased likelihood of maintained abstinence from alcohol and illicit substances (Prochaska et al., 2004).
- The risk of respiratory and cardiovascular diseases, stroke, and cancer is significantly reduced when individuals stop tobacco use (U.S. Department of Health and Human Services, 2020).

## Tobacco Use & Recovery

### **Tobacco use is a serious financial burden and impedes overall recovery.**

- People living with mental illnesses in the U.S. have less expendable income due to buying more cigarettes than the general population. For example, people living with Schizophrenia spend an estimated 27% of their monthly income on cigarettes (Steinberg, Williams, & Ziedonis, 2004); and tobacco users living with depression are more likely to have financial stressors than those without depression (Rogers, 2019).
- Due to smoke-free policies, such as the U.S. Department of Housing and Urban Development's 2018 policy which made all public housing smoke-free, tobacco users may have difficulty acquiring housing.
- Housing instability may further impede recovery by worsening existing life stressors and reducing accessibility to treatment (Padgett, 2020).

## Key Take Away Points

- Tobacco use is prevalent among people living with mental illnesses.
- Tobacco use increases morbidity and mortality for people living with mental illnesses.
- Tobacco use hinders recovery by increasing poor physical health outcomes, exacerbating mental health symptoms, causing individuals to have less expendable income, and presenting challenges to affordable housing.

For more information, please contact Dr. Zim Okoli at (859) 323-6606 or [ctokoll@uky.edu](mailto:ctokoll@uky.edu). More resources are available on BH WELL's website at [www.uky.edu/bhwell](http://www.uky.edu/bhwell).

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