

SM KING CESSATION

For Individuals Experiencing Homelessness

SAMHSA's Program to Achieve Wellness

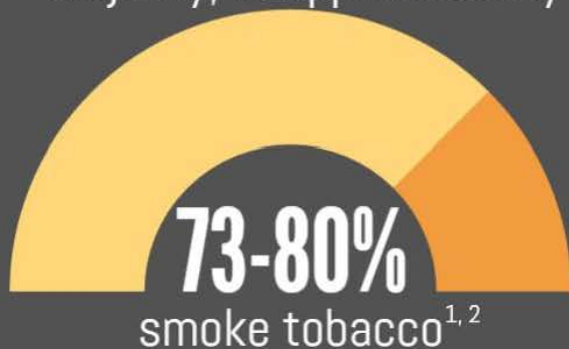
The purpose of this fact sheet series is to offer service providers information about smoking cessation for individuals experiencing homelessness. These fact sheets will inform homeless service providers about why tobacco use poses significant threat to this population and provides suggestions of what they could do to help stop it. Quitting smoking is difficult for anyone, but it is particularly challenging for individuals experiencing homelessness because they face unique barriers to quitting. Homeless service providers are in a position to promote healthy habits and to take a strong role in supporting and encouraging those who want to quit.

Why should we support

SMOKING CESSATION



Surveys of individuals experiencing homelessness suggest a large majority, or approximately



Health Impact:³



lung cancer
chronic respiratory disease



coronary heart disease
stroke



gum disease
oral cancer

in our organization?

Quick Facts

#1

Individuals experiencing homelessness who use tobacco may, on average, smoke more cigarettes per day than smokers in the general population⁴

#2

One study estimated that 18% of deaths among individuals experiencing homelessness in their sample were attributable to tobacco use⁵

#3

Individuals experiencing homelessness may engage in riskier smoking behaviors (e.g. sharing cigarettes or re-making cigarettes from discarded butts and filters)⁶

Why are the rates of smoking so high?⁷

CULTURE

accepts smoking in homeless settings

STRESS

of finding a job and housing

UNSTRUCTURED DAYS

can lead to temptation to smoke

FOCUS

is on meeting basic needs, not quitting smoking

MYTHS

VS

FACTS

about smoking cessation for individuals experiencing homelessness

MYTH #1

"Don't push smoking cessation because they don't want to quit smoking"

FACT

A significant portion of individuals experiencing homelessness who smoke are ready to quit within the next 6 months⁸



FACT

Studies have shown a positive impact from smoking cessation on recovery from alcohol and other substance use⁹

MYTH #2

"They shouldn't try to quit smoking while working on other challenges"

MYTH #3

"Quitting smoking takes away a coping mechanism and can create additional stress"

FACT

Stopping smoking is associated with improvements in:¹⁰

DEPRESSION
STRESS

ANXIETY
MOOD



How to Approach Smoking Cessation as a Homeless Service Provider

1. SET THE RIGHT EXAMPLE



In one study, 15% of clinicians reported sharing tobacco with clients to build trust or promote adherence to care¹¹



Encourage a consistent anti-smoking message among staff!

2. MAKE SURE EVERY VOICE IS HEARD

Bring stakeholders to the table to open it up for discussion and include the voice of those experiencing homelessness



3. CREATE OR REVISE YOUR AGENCY'S SMOKING POLICY



Create a setting that supports smoking cessation
Then, count down the days to going smoke free!



4. PROVIDE EDUCATION & TOOLS

Promote the benefits of a smoke-free life to your clients, staff, and communities

For specific tools & resources, contact SAMHSA's Program to Achieve Wellness

✉ paw@prainc.com ☎ 1.800.850.2523

<http://www.samhsa.gov/wellness-initiative/program-achieve-wellness>

Sources:

- ¹ Baggett, T.P. & Rigotti, N. A. (2010). Cigarette smoking and advice to quit in a national sample of homeless adults. *American Journal of Preventative Medicine*, 39(2), 164-172.
- ² Tsai, J., & Rosenheck, R.A. (2012). Smoking among chronically homeless adults: Prevalence and correlates. *Psychiatric Services*, 63(6), 569-576.
- ³ U.S. Department of Health and Human Services. *The Health Consequences of Smoking: 50 Years of Progress. A Report of the Surgeon General*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014.
- ⁴ Butler, J., Okuyemi, K.S., Jean, S., Nazir, N., Ahluwalia, J.S., & Resnicow, K. (2002). Smoking characteristics of a homeless population. *Substance Abuse*, 23(4), 223-231.
- ⁵ Baggett, T. P., Chang, Y., Singer, D. E., Porneala, B. C., Gaeta, J. M., O'Connell, J. J., & Rigotti, N.A. (2015, June). Tobacco-, alcohol-, and drug-attributable deaths and their contribution to mortality disparities in a cohort of homeless adults in Boston. *American Journal of Public Health*, 105(6), 1189-1197.
- ⁶ Aloit, C. B., Vredevoe, D. L., & Brecht, M. L. (1993). Evaluation of high-risk smoking practices used by the homeless. *Cancer Nursing*, 16(2), 1202-1203.
- ⁷ Tobacco Use and Homelessness. (2009, July). Retrieved from <http://www.nationalhomeless.org/factsheets/tobacco.html>
- ⁸ Connor, S. E., Cook, R. L., Herbert, M. I., Neal, S. M., & Williams, J. T. (2002). Smoking cessation in a homeless population: There is a will, but is there a way? *Gen Intern Med*, 17, 369-372. Retrieved from http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1495046/pdf/jgi_10630.pdf
- ⁹ Baca, C. B. & Yahne, C. E. (2009). Smoking cessation during substance abuse treatment: What you need to know. *Journal of Substance Abuse Treatment*, 36(1), 205-219. Retrieved from http://www.integration.samhsa.gov/Smoking_cessation_during_substance_abuse_treatment.pdf
- ¹⁰ Taylor et al. (2014). Change in mental health after smoking cessation: Systematic review and meta-analysis. *BMJ*, 348, 1-22. Retrieved from <http://www.bmj.com/content/bmj/348/bmj.g1151.full.pdf>
- ¹¹ Baggett, T. P., Anderson, R., Freyder, P.J., Jarvie, J.A., Maryman, K., Porter, J., & Rigotti, N.A. (2012, November). Addressing tobacco use in homeless populations: A survey of health care professionals. *Journal of Health Care for the Poor and Underserved*, 23(4), 1650-1659. doi: 10.1353/hpu.2012.0162.