Smoking Cessation for Individuals with Serious Mental Illness

More than 1 in 3 adults (33.3%) with a mental illness smoke cigarettes, compared with about 1 in 5 adults (20.7%) without mental illness.\(^i\)

31\% of cigarettes smoked by adults are smoked by adults with mental illness, and 1 in 5 adults, or 45.7 million people, have some form of mental illness.\(^ii\)

Smokers with any history of mental illness had a self-reported quit rate of 38.4\%, compared with smokers without mental illness (52.8\%).\(^iii\) In other words, people with serious mental illness are less likely to quit smoking without the treatments and policies that can help reduce this disparity.

The rate of smoking in people with schizophrenia is at least two to three times that of the general population. Most began smoking before psychotic aspects of their illness appeared.\(^iv\)

27\% of public assistance income is spent on cigarettes;\(^v\) about the same percentage of income lenders suggest as a maximum mortgage payment.\(^vi\)

In one study, people with schizophrenia were 3.5 times more likely to have died, largely from tobacco-related complications.\(^vii\)

People with serious mental illness smoke an estimated 180 billion cigarettes, or $37 billion in tobacco industry sales, annually.\(^viii\)

Despite misconceptions:\(^ix\)

- Individuals with serious mental illness do not need to smoke to self-medicate
- Quitting smoking will not make psychiatric symptoms worse
- Those with serious mental illness do want to quit

Providers can help people with mental illness quit smoking\(^x\)

Mental health providers already assist individuals with serious mental illness with helpful skills that can support smoking cessation, like:

- Problem-solving
- Coping with difficult situations or emotions
- Social skills training
• Making better choices
• Avoiding high risk situations

Mental health providers can enhance this assistance by offering:

• supportive treatment
• practical counseling
• help setting a quit date

**Supportive Treatment**
• showing belief in individuals; communicating and concern for their health

**Practical Counseling**
• providing basic information about smoking as an addiction, not a habit; helping the individual recognize high-risk situations, like stress, other smokers, or alcohol; cessation medications can increase the odds of quitting, especially when used in combination with counseling

**Help Setting a Quit Date**
• choosing a quit date and preparing

*Smoking Cessation for Individuals with Serious Mental Illness* was developed by [SAMHSA’s Program to Achieve Wellness](https://www.samhsa.gov). For more information, contact SAMHSA’s Program to Achieve Wellness at [paw@prainc.com](mailto:paw@prainc.com).

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10. Ibid.
11. Ibid.