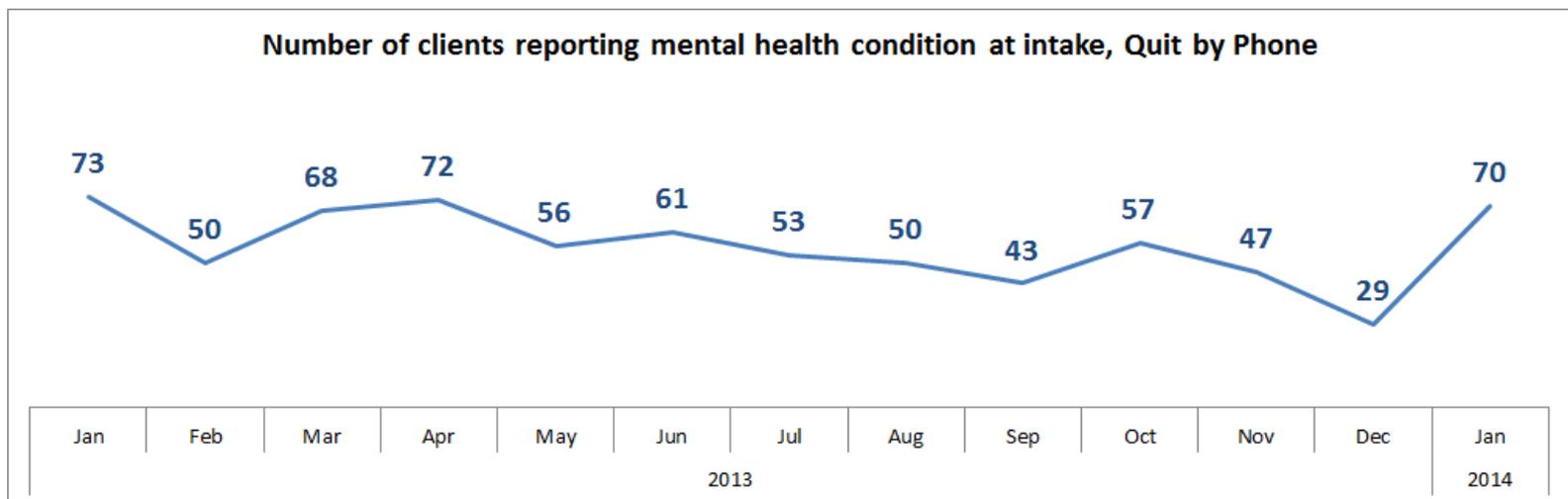


# Recommendation #5: Mental Health data

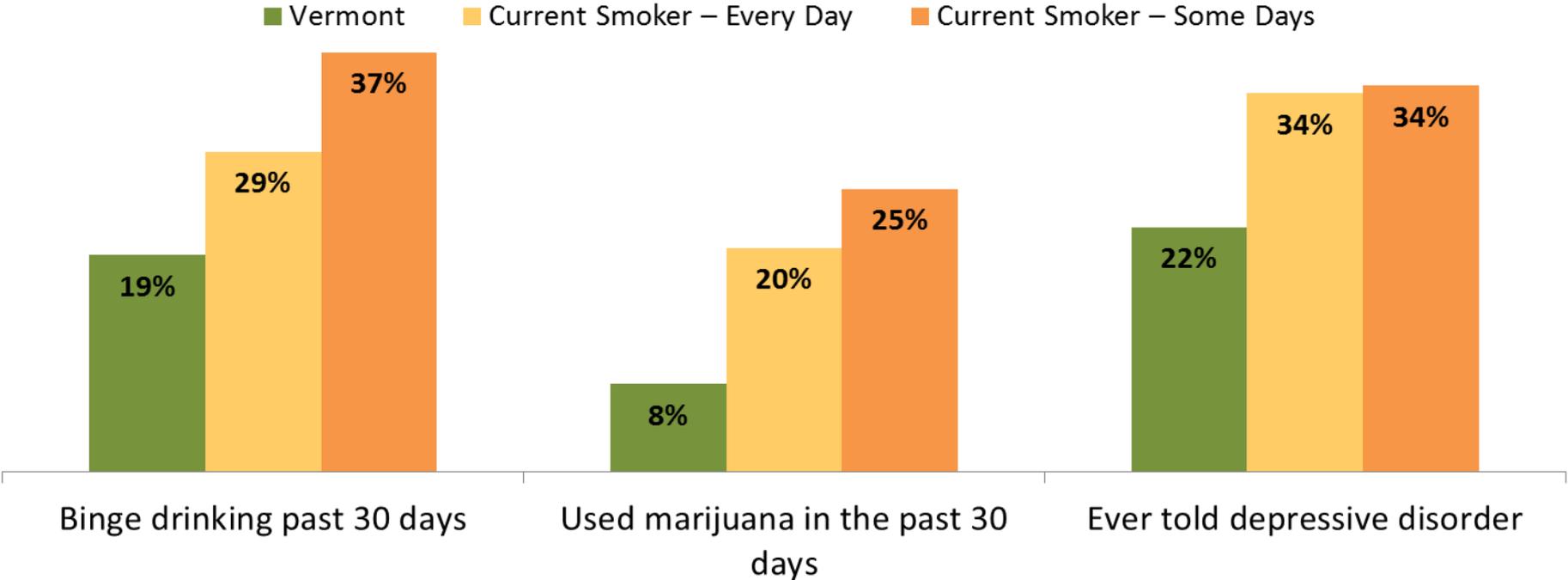
In Vermont, 2012 BRFSS shows that:

- 25% prevalence of smoking in the mental health population versus 17% overall.
- The proportion of smokers between 45 and 64 years old was higher than any other age category, overall and in the mental health population.
- 46% of all smokers but 64% of the mental health population smokers are female.
- Overall, income distribution among smokers in the mental health population was similar to that of smokers overall.



# Recommendation #5: VT co-occurrence

**Prevalence of risk factors among every day smokers, some day smokers and all Vermonters, 2012 VT BRFSS**



In considering harm reduction strategies, even some day smokers have a statistically higher prevalence of binge drinking, marijuana use and depression compared to Vermonters.

## Recommendation #5: Harm Reduction

UVM expert John Hughes participated in webinar with mental health and substance abuse providers, and tobacco treatment specialists. Highlights included noting:

- Tobacco is the highest cause of death in recovering alcoholics.
- Nicotine increases reinforcing effects of alcohol.
- 44-80% of alcoholics who smoke want to quit smoking in the future.
- Research shows the majority of alcoholics who smoke are more successful with alcohol treatment first, followed by tobacco. The other 25% can and want to be treated concurrently.

## Recommendation #5: Harm Reduction

- Harm reduction among those with mental health/substance abuse issues is not recommended.
- A reduction in smoking is not correlated with reduced anxiety or decrease in premature death.
- Mental health experts recommend using NRT to treat versus continued tobacco use.
- FDA approved extended use of NRT July 2013.