



No Smoking Day

Wednesday 10 March 2010

**A guide to working with
Rethink services to help
people affected by severe
mental illness to stop
smoking**

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Introduction

Smoking remains the number one cause of preventable premature death in the UK, killing half of all long term smokers. Today the UK is a world leader in the provision of services to help smokers who want to stop. But quitting smoking can be difficult, and for those affected by severe mental illness, quit attempts can involve particular challenges.

Now entering its 27th year, No Smoking Day remains the UK's leading public health event promoting smoking cessation. The Day is organised by a charity of the same name, which has worked with the Rethink to produce this guide. The guide is designed for stop smoking services that want to use No Smoking Day to develop or promote partnerships with Rethink to help smokers with severe mental illness.

What is No Smoking Day?

No Smoking Day is a registered charity funded and run by an alliance of 15 organisations including national health education agencies, professional bodies and charities – all with a commitment to reducing smoking-related diseases.

No Smoking Day has been successfully running for 26 years. It is still going strong because two thirds of smokers in the UK actually want to stop smoking. Every year on No Smoking Day over 1.5 million smokers make a quit attempt.

No Smoking Day helps smokers who want to stop smoking by offering an opportunity to give up in the company of millions of others. Smokers say they need support when they decide to give up and No Smoking Day provides the environment they seek.

The campaign is UK-wide and the next No Smoking Day will be held on Wednesday 10 March 2010.

What is Rethink?

Rethink is the leading national mental health membership charity, which works to help everyone affected by severe mental illness recover a better quality of life.

Rethink helps over 48,000 people each year through a wide range of services and support groups and by providing information on mental health problems. Rethink's website receives almost 300,000 visitors every year.

The overall aim of Rethink is to make a practical and positive difference by providing hope and empowerment through effective services and support to all those in need.

Rethink believes that people who experience severe mental illness are entitled to be treated with respect and as equal citizens, and actively campaigns for change through greater awareness and understanding. Rethink is dedicated to creating a world where prejudice and discrimination are eliminated.

How does No Smoking Day work?

No Smoking Day aims to help smokers quit by raising awareness of the support that is available, increasing motivation, and by encouraging smokers to stop on a specific date. A network of thousands of local organisers runs local events and activities throughout the UK, providing expert help and advice for those that are ready to quit.

No Smoking Day aims to:

- ✎ Encourage and assist smokers who want to quit
- ✎ Involve as many people as possible
- ✎ Help achieve national and local health targets

The campaign messages are:

- ✎ No Smoking Day is a good opportunity to quit
- ✎ There are health and other benefits to stopping smoking
- ✎ Smokers can get help when they want to quit

Smoking and Mental Health

1 in 4 people have a mental health problem at some point in their lives. Smoking levels in people with mental illnesses are much higher than the national average. Almost a million people in Britain have a severe mental illness like schizophrenia or bipolar disorder. Many people living with schizophrenia or bipolar disorder may feel that trying to stop smoking is a relatively unimportant issue, or that it will cause them additional stress. However, research has shown that when people with psychiatric illness do quit, it has a positive effect not only on their physical health, but on their mental health too.

There are several theories why people with mental illness smoke:

- ✎ Smoking is most popular in the most deprived groups. Researchers suggest that people with mental health problems smoke in a similar way to other deprived groups, such as a way of coping with the stresses of their everyday lives.

- ✎ Smokers often report that smoking helps to relieve feelings of anxiety and stress. However, smokers show higher levels of stress in their lives than non-smokers. Once someone is addicted to nicotine, when their nicotine levels start to drop they begin to crave for a cigarette. This craving makes the smoker feel stressed. The relief felt when this craving is finally satisfied is the feeling that smokers commonly mistake as 'relaxing'.
- ✎ Rates of smoking are higher in people who live in institutions (like a hospital) than those with similar illnesses living at home. Patients may feel that smoking is something they can control in an otherwise uncontrollable environment. Patients also describe peer pressure to smoke when in hospital, and staff being reluctant to talk about stopping smoking when they saw it as one of the few pleasures that people with severe mental illness have. Now that smoking is no longer permitted in any hospital premises, it is important to provide help and appropriate treatments for patients who would otherwise smoke.
- ✎ Self-medication is consistent with several studies which show that smoking can reduce some of the positive and negative symptoms of psychotic illness, improve cognition and may also help reduce some of the side effects of antipsychotics.

Rethink services

Rethink has over 340 services across England and Northern Ireland.

Smoking prevalence amongst people affected by severe mental illness can be as high as 50 per cent, which is significantly higher than average smoking rates.

Stopping smoking may be more difficult for people affected by mental illness but the benefits of quitting can be even greater. Quitting can help people who stop to take control of other aspects of their lives (as the case study on page 8 shows).

We hope that by using No Smoking Day as a starting point you can develop a long term partnership with your local Rethink service, providing ongoing support for people affected by mental illness.

New smoking legislation for mental health services

With the smokefree legislation being extended to all NHS premises in July 2008, patients and staff alike have faced challenges with compliance. The Tobacco Control Collaborating Centre was contracted to support Mental Health Trusts and Independent Service Providers in becoming smokefree, and continues to offer information and advice – for contacts see [their website](#).

How to work with Rethink services

Most people quitting cigarettes will need support. People experiencing mental health problems may also need extra or specialist help. The following advice can be useful for supporting people with mental illnesses who wish to quit.

1. There is a lot of support available for service users who want to stop smoking. However, very often stop smoking sessions are offered by people the service users don't know. Try and bring the sessions into familiar territory.
2. It's always good to have a buddy when quitting smoking. Get ex-smokers with mental health problems to buddy up. Very often service users have no family to encourage, help and support. A buddy can be a great substitute.
3. Most successful quitters will have tried and failed at least once before; many experts see relapse as a key stage of the quit process. It's important that service users never give up trying to give up, and you should be prepared for set backs. They may feel like they have let themselves or you down. Work with them to build confidence again and set another quit attempt.
4. Don't let staff undermine a quit attempt ("Well you're upset. Have a cup of tea and a cigarette"). It reinforces that the myth that cigarettes make things better. Educate colleagues to use other tactics.
5. When people have quit, try to make a named worker available to provide support when the quitter is feeling tempted. Very often all quitters will use stressful situations as an excuse to start again. Staff can offer support by reminding them how well they have done so far, but that having a cigarette won't help and that they will feel even worse if they give in.
6. Cravings can last for some time, but if people can be clear about the difference between the habit and cravings they are more likely to be successful.
7. Staff should work as good examples and try to avoid smoking in the presence of services users. It's hard to encourage other to quit smoking with a cigarette in your hand.

If you want help quitting

Tobacco is an addictive substance and can be physically hard to stop as well as psychologically difficult. Here are a number of ways of stopping smoking that have proved effective with people with mental illness.

👉 **Advice**

Such as when a doctor tells you to stop smoking because it is not good for your health (such as after a heart attack) is not as effective compared to other methods of stopping.

👉 **Cognitive and behavioural therapy**

A study carried out with cigarette smokers who had experienced major depressive disorder in the past found that cognitive behavioural smoking cessation treatment plus cognitive behavioural therapy for depression resulted in 25-33% abstinence (stopping). Further research showed that for some smokers, two treatments were better than one.

👉 **Group therapy and nicotine replacement therapy**

Nicotine replacement therapy (NRT) includes nicotine gum or nicotine replacement patches. Research shows that group therapy and NRT has approximately a 50% success rate.

👉 **Zyban® (bupropion)**

Bupropion is licensed as an antidepressant in the USA and for smoking cessation in the USA and UK. Bupropion has been shown to be effective in both reducing smoking and in helping people quit smoking. However, bupropion is unsuitable for many people taking medication for mental illness.

👉 **Champix® (varenicline)**

This is a non-nicotine treatment that works by providing relief from cravings and withdrawal symptoms, and reducing the pleasure of from smoking if the smokers does smoke while using it. Studies have shown that it can increase the odds for stopping successfully by up to four times.

Champix comes in tablet form as a 12 week course of treatment. It is available on prescription only and should be taken under medical supervision. As with all prescription drugs, Champix may not be suitable for people using medication for mental illness.

Val's Story

"I have had mental health problems for many years. Up until five years ago I was smoking about 60 cigarettes a day. Back then we had a smoking room at my local day centre and I was always in there. I hardly ever came out, except for a cup of tea. I used to cough non-stop, sometimes until I choked. My hair was lank, and my face grey and withdrawn.

A support worker got the smoking cessation programme to come to the centre. I could also bring my non-smoking husband for support to help me quit. I was encouraged by the support worker to keep out of the smoking room, even walking right around the building to avoid the smell and lure, to stay stopped.

Within a couple of days, I had a nice glow of pink around my face. My hair went shiny and most of the cough started to go away. I also had more money for nicer clothes or to spend on my home.

Suddenly I could smell the cigarette smoke on others. When you are a smoker, you don't notice it, because your taste and sense of smell are so impaired. I realised that I had smelt like that to others, especially my non-smoking husband.

Giving up smoking has probably saved my life and certainly greatly improved the quality.

You can quit with lots of encouragement, support and a bit of help - I did!"

Val Saint, using Rethink's The Croft Day Centre

Contacts

For more information about **No Smoking Day**:

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For further information on smoking and mental health, visit the [Smoking](#) section of the Rethink website