What do persons with serious mental illness think about tobacco intervention?

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Tobacco Use and Serious Mental Illness

At least twice the rate as the general population in the U.S

Minimal impact of smoking cessation efforts over the last 30+ years
Research Criteria

• Smoking for at least five years
• Currently Smoking
• Have tried to change their tobacco use pattern at least twice
• Serious mental illness diagnosis
Research Focus

• Why do you smoke
• What are the reasons and benefits
• What they thought about public health messages
• What have you tried and what was your experience
• What do you recommend
Sample

• 3 woman and 7 men; Age: 45 - 70
• Caucasian and African American
• Schizophrenia, BAD, Schizoaffective Disorder, PTSD, Depression
• Combustible tobacco use for 20 to 50 years
• Currently smoking 6 to 100 cigarettes per day
• Approximately 6 experiences with tobacco use modification
Why Smoke?

Stress
Distress
Anger
Depression

I enjoy it
Something to do
Hand to mouth

Could not do without it
Taste
What have you tried?

Cessation
Cold Turkey

Cutting Down

Incarceration
Setting a curfew

Food

Postponing the first cigarette
Lollipops
NRTs (gum, patch, lozenges)
Hospitalization

Varenicline
Bupropion

Electronic Devices
What worked?

• Everything and Nothing
• Gradual reduction
• Patch: side effects
• ENDS: the campaign to demonize is working
There’s Nothing like a Cigarette
Emotional and Cognitive Navigation

• Usual psychological defenses
• Ambivalence
• Guilt
• Fear
• Social Pressure
• Struggle
• Weighing the risks

“You’ve given me something to think about”
It’s Not Just About the Nicotine
Discussion

• Thoughtful
• Smoking is integral
• Desire and Intention
• A lot of consternation
• Lack of Support
REFERENCES


