

Equally Well: Supporting people with mental health and addictions to stop smoking.

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Pathways



Reducing smoking prevalence in New Zealand



Where we've come from

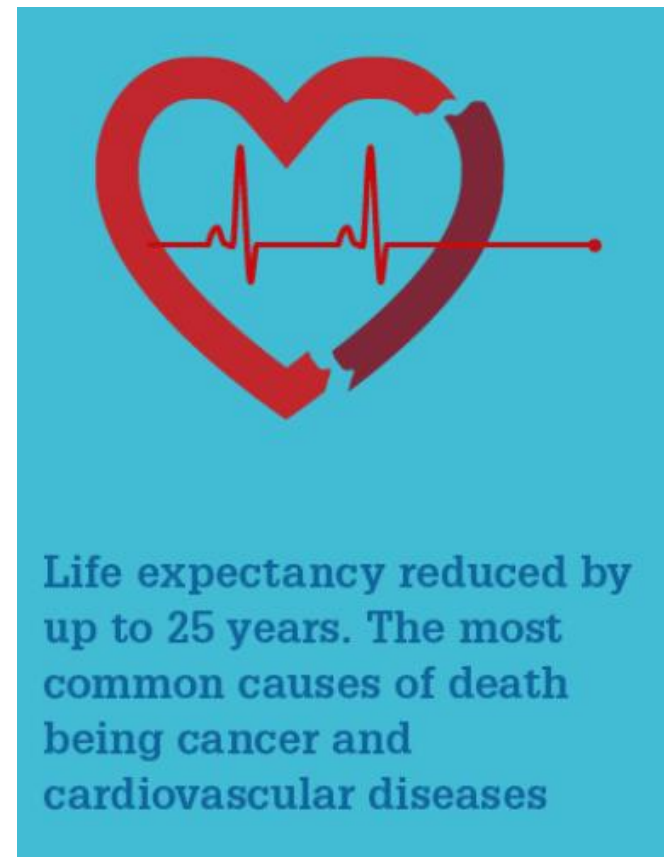
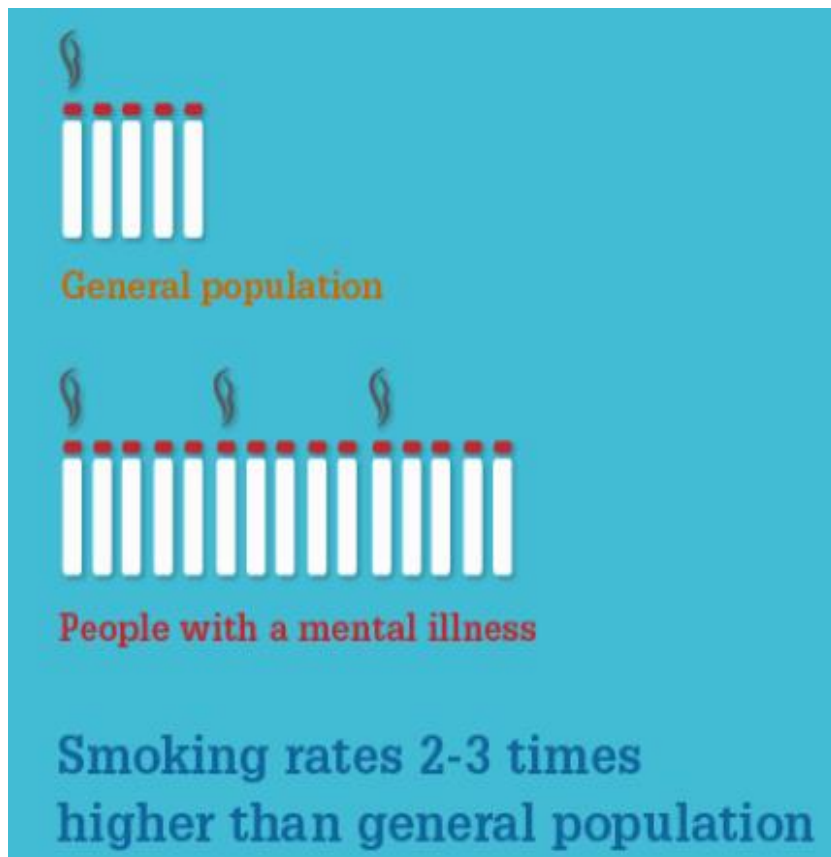
- Historic culture of smoking being acceptable
- An inherent part of the care provided
- Workforce beliefs that smoking was relaxing and helpful for dealing with stress or anxiety – ignored the addictive qualities
- Cigarettes used as a behaviour management or engagement tool
- High prevalence of mental health and addiction staff smoking



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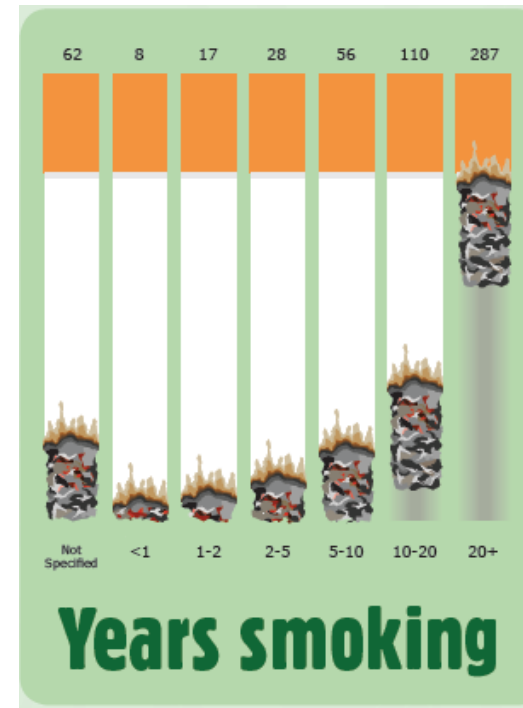
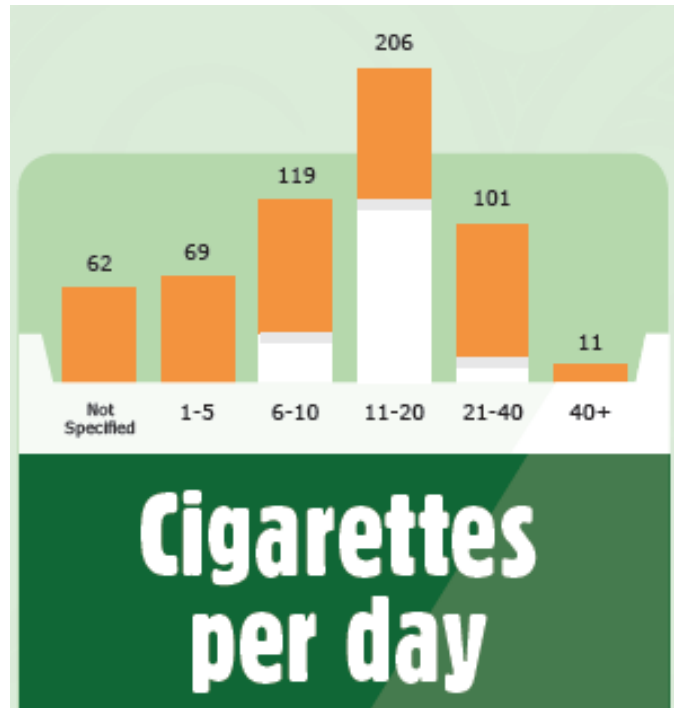
Why its imperative



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Why its imperative



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Breakfree programme

- Smokefree NZ Innovation funded programme delivered in partnership with the Northern Regional Alliance and 7 NGO's in the Northern Region
- Term of project was 2 years (2014-2016)
- Intended to:
 - Serve 750 people with lived experience of mental illness, their family/whanau and staff to assist in reducing smoking prevalence
 - Be mobile and reach NGOs across the Northern region
 - Target population groups:
 - 1/ Maori, Pacific
 - 2/ Organisations within low socio economic areas



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Breakfree programme

- Delivered by Pathways and consisted of:
 - 1.5 Smokefree Specialists
 - A Breakfree programme coordinator
 - Trained smokefree peer support volunteers
 - Support from the partner organisations
- Intensive 1:1 and brief intervention for stop smoking support
- Group and peer support, education and motivational interventions
- Nicotine replacement therapy (funded and unfunded)
- Knowledge and skill development for mental health and addiction support staff working with people to become smokefree



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Breakfree outcomes

- Total of 686 people seen
- 19.5% evidenced quit rate (co verified)
- Significant reduction across most participants
- For those Smokefree on exit, 3-6mths was the programme duration with most success
- Stakeholder interviews indicated increase in staff confidence to engage with people using services to stop smoking

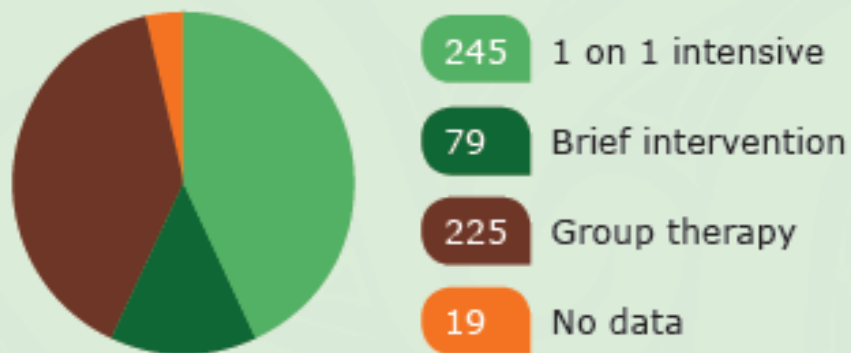


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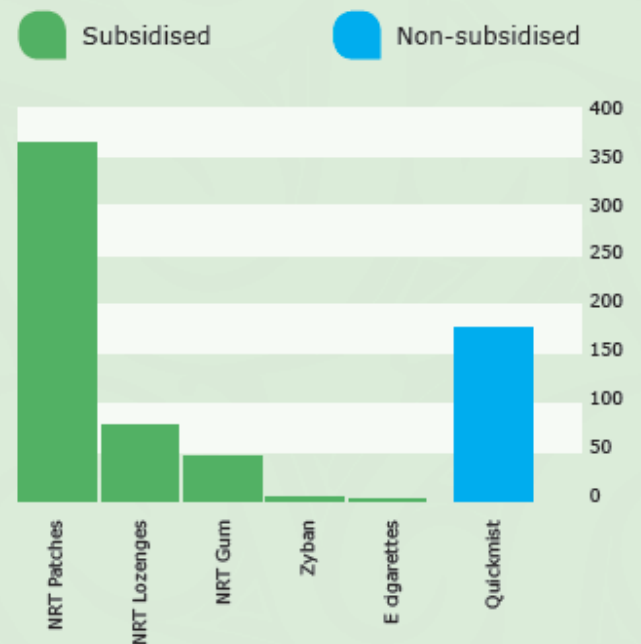
Breakfree outcomes

Support type



Pharmacotherapy

Note, people may use more than one form of pharmacotherapy in their stop smoking journey. This data shows the primary NRT given only and in some cases the primary NRT given is in 2 forms: quickmist other subsidised Pharmacotherapy.



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Breakfree outcomes

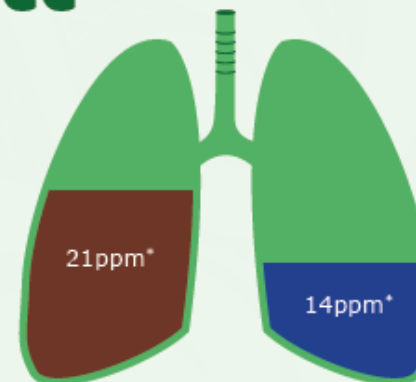
For those not yet smokefree

Many people who are not yet smokefree have reduced their smoking (and more importantly their harm) considerably.



Approximate number of cigarettes smoked per day on exit

- 10 A few puffs
- 25 1-5 cigarettes
- 157 5-10 cigarettes
- 312 > 10 cigarettes



Changes in average CO[^] Readings for those who are not smokefree

- On entering the Breakfree programme
- On exiting the Breakfree programme

[^]Carbon monoxide (CO)
^{*}Parts Per Million (PPM)

**BREAK
FREE**



Pathways
Whatever it takes

**Equally
Well**



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What we can continue to do

- Recognise that people with mental illness often **do** want to quit and are **capable** of quitting. Those that do report better mental and physical health.
- Understand people often have negative feelings of usefulness of treatment due to sub-optimal NRT use in the past and lack of direct support
- Appreciate that quit attempts require more intensive support than traditionally delivered stop smoking programmes
- Recognise and refer to local mental health and addiction NGO support providers who are all increasing their competence at delivery of stop smoking support



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