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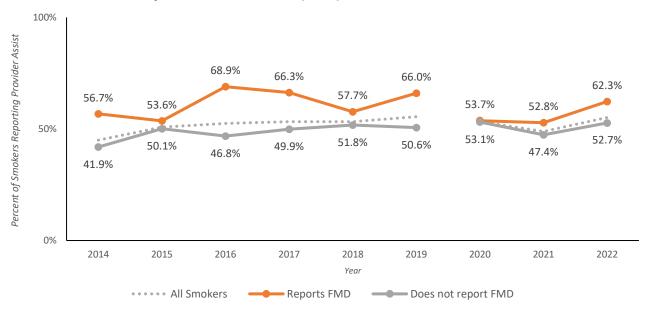
Smokers who Experience Frequent Mental Distress Report Higher Rates of Provider Assistance with Quitting Smoking

Health care provider assistance with tobacco dependence treatment doubles the likelihood that a smoker will quit.¹ Among current smokers who have seen a health care professional in the past 12 months, being assisted by a health care provider with smoking cessation is defined by responding "Yes" to the question: "When a doctor, nurse, or other health professional advised you to quit smoking, did he/she do any of the following?"

- Prescribe or recommend a nicotine patch, gum, inhaler, nasal spray, or lozenge?
- Prescribe or recommend pills such as Chantix, varenicline, Wellbutrin, Zyban, or bupropion?
- Suggest that you set a specific date to stop smoking?
- Suggest that you use a smoking cessation class, program, or counseling?
- Suggest you call a telephone quit line?
- Provide you with booklets, videos, or other materials to help you quit smoking on your own?

Adults reporting problems with stress, depression, or emotions on 14 days or more in the past month are described as experiencing frequent mental distress (FMD). Adults reporting FMD smoke cigarettes at a higher proportion (19.6%) than those who do not report FMD (10.7%). Findings from the NY Adult Tobacco Survey (NY-ATS) indicate that they are assisted with quitting at higher rates as well. In 2022, among people who smoke with FMD, 62.3% reported their health care provider offered them tobacco cessation assistance compared to 52.7% of those without FMD who smoke. Continued provider assistance, particularly among people with higher smoking rates is an important step toward health equity. The NY Tobacco Control Program's Health Systems for a Tobacco-Free NY initiative aims to work with medical and mental health care organizations to implement systematic, guideline-concordant, evidenced-based tobacco dependence treatment, including providing quitting assistance and support for all people who use any tobacco product.

Percentage of Smokers Assisted by their Health Care Provider(s) with Smoking Cessation by Frequent Mental Distress (FMD) Status, NY-ATS 2014-2022



^{1.} Fiore, M., Jaen, C., Froelicher, E., Baker, T., & Baily, W. (2008). A clinical practice guideline for treating tobacco use and dependence: 2008 update. American Journal of Preventive Medicine, 35(2): 158–176.

Source: New York State Adult Tobacco Survey 2014-2022. Technical note: In 2020 the data collection frequency changed, moving from a quarterly to a biannual data collection schedule (see description here). This change is denoted by a break in the trendline between the years 2019 and 2020. Estimates from 2020 and after may not be directly comparable to estimates from previous years.

Fajobi, O. Hunter, L. Peluso, C. BRFSS Brief: Cigarette Smoking, New York State Adults, 2021. No. 2023-05. Albany, NY: New York State Department of Health, Division of Chronic Disease Prevention, Bureau of Chronic Disease Evaluation and Research, June 2023. https://www.health.ny.gov/statistics/brfss/reports/docs/2023-05 brfss_cigarette_smoking.pdf