

Helpful Websites & References

Be Informed. When asking about tobacco use, also inquire about disability and health status, so that you can offer appropriately customized quit tips. Empower all people to strive for maximum wellness.

Be Accessible. Promote tobacco prevention and cessation widely, in places likely to reach people with disabilities. Provide alternate formats for all messages and materials. Examples include brochures with Braille lettering, TTY phone numbers, and videos with captioning or sign language interpretation.

Engage Others. Caregivers and family members may be available to support individuals with disabilities. Informing them about the disparities in smoking rates may help to encourage their involvement.

NH Tobacco Helpline
www.TryToStopNH.org

Quit Works NH (for providers)
www.QuitWorksNH.org

¹Centers for Disease Control and Prevention (CDC). *Behavioral Risk Factor Surveillance System*. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2011.

²Fiore MC, Jaén CR, Baker TB, et al. *Treating Tobacco Use and Dependence: 2008 Update*. Clinical Practice Guideline. Rockville, MD: U.S. Department of Health and Human Services.



Smoking Cessation & Disability

 INSTITUTE ON DISABILITY
UNIVERSITY of NEW HAMPSHIRE

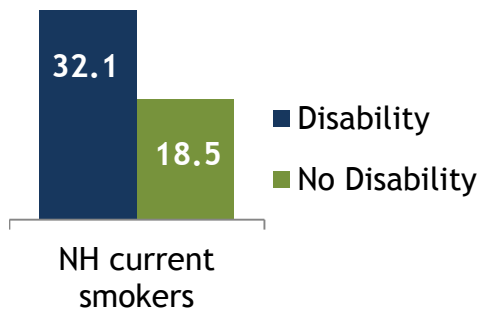


www.iod.unh.edu/dph
(603) 862-4320 | relay: 711

Available in alternative formats
on request.

Tips to Help People with
Disabilities Quit Smoking

New Hampshire Disability &
Public Health Project



Nearly one-fourth (23.7%) of adults ages 18-64 in NH experiences a disability.¹

People with disabilities are more likely than others to be smokers. In New Hampshire, **32.1%** of adults aged 18-64 report being current smokers, compared to **18.5%** of adults without disabilities.¹

Strategies that are successful to prevent tobacco use and encourage smoking cessation among the general population can be adapted (when necessary) and used effectively to assist people with disabilities.

Tips to Help People with Disabilities Quit Smoking

Be Person-Centered. Techniques such as Motivational Interviewing allow individuals to recognize personal goals, desires, abilities, and the need for change.² Providers can demonstrate their belief in people's ability to be healthy despite individual challenges

The 5 Rs offer intervention strategies providers can use with Motivational Interviewing.²

The next pages offer some suggestions for using the 5 Rs with people with disabilities.

Relevance: Encourage individuals to indicate why quitting is personally relevant to them.

Adults with disabilities in NH are much more likely (37%) than adults without (4%) to report their health status as "fair" or "poor."¹ Quitting smoking helps people feel better.

Risks: Ask individuals to identify personally relevant short- and long-term risks of smoking.

People with disabilities are at increased risk of chronic diseases like heart disease, heart attack, and stroke.¹ Smoking further exacerbates these risks.

Rewards: Have individuals imagine what might change for the better when they quit.

30.3% of NH adults with disabilities report annual income below \$25,000, compared to 10.3% of adults without disabilities. Quitting smoking is money saved.¹ Calculate money saved quitting at: <http://trytostopnh.org/>

Roadblocks: Ask about potential roadblocks or barriers that may hinder their attempts to quit.

About 40% of NH adults with disabilities have been diagnosed with depression (compared to about 15% of NH adults without disabilities).¹ Fear of failure or loss may interfere with success.

Repetition: Reassure individuals that quitting often takes multiple attempts. Congratulate quit attempts and success. Simple messages and frequent reminders can be helpful for individuals with cognitive disabilities.

The NH Disability & Public Health project is funded by the Centers for Disease Control and Prevention (Grant: 1U59DD000954-01).