



Phoenix Programs, Inc.



“Tobacco + Youth = Red Flag for Mental Health”

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DEPARTMENT OF MENTAL HEALTH’s Spring Training Institute

Tan-Tar- A Resort and Conference Center, Lake of the Ozarks

Thursday, May 29, 2014

Learning Objectives:

- **Understand the close association of tobacco dependency with addiction and other mental illnesses.**
- **Strengthen prevention community/state efforts to keep tobacco out of the hands of youth-- it hurts their bodies AND their brains.**
- **Embrace youth tobacco use as sufficient criteria for mental health screening for teens who “just smoke.”**

July 4, 2004
Jacksonville, IL
Teen VIPs
Voices in Prevention
*Marched in the rain
In the Independence
Day community
Parade.*



*Over 40 youth
marched
in the rain.
Each youth carried a
sign representing
a year. The first sign
Read "We knew in
1964." The line
stretched 3 city blocks.*







Also
created
sign displays
at various
locations in
the community.



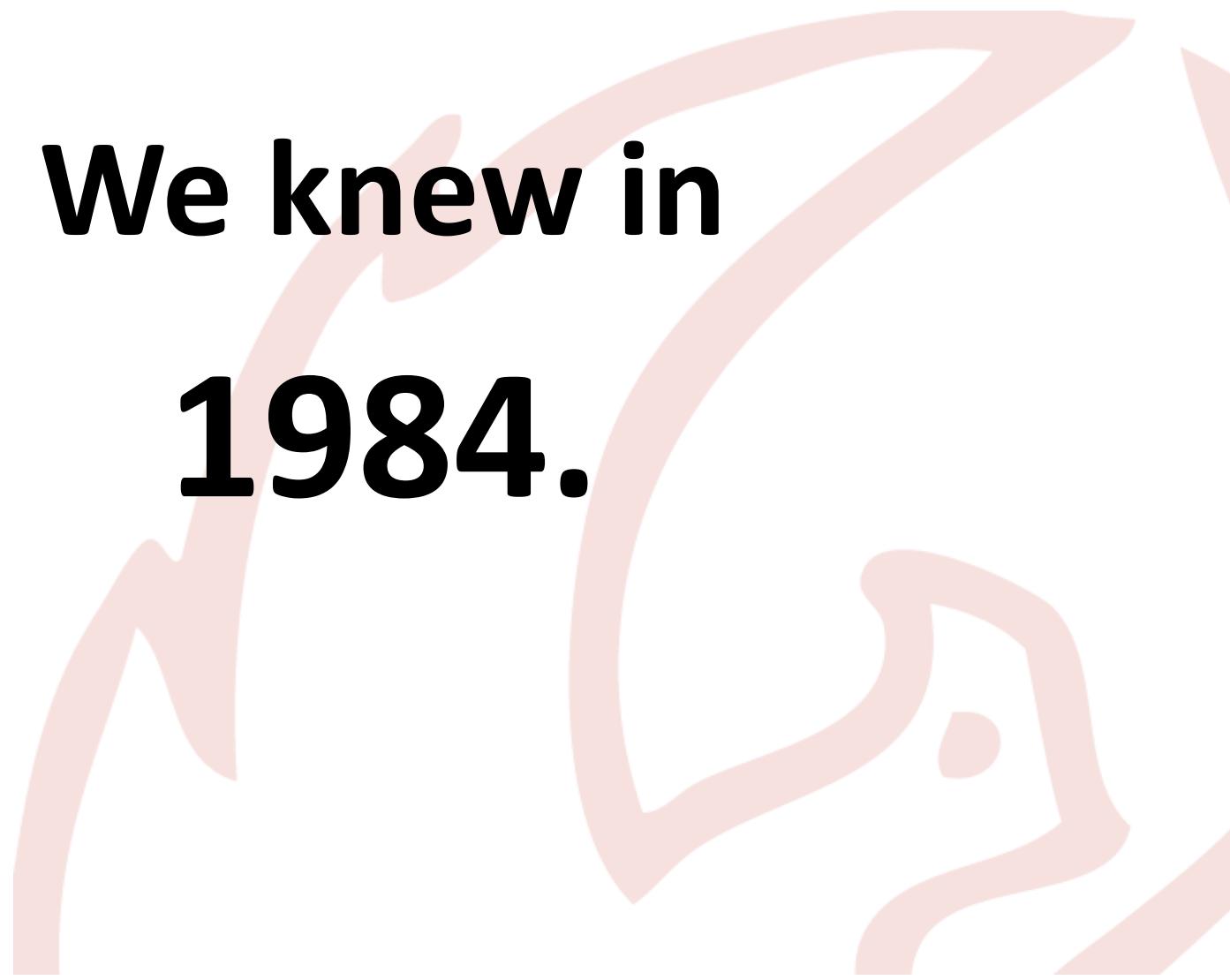


**We knew in
1964.**



We knew in

1974.



**We knew in
1984.**



We knew in
1994.



We knew in
2004.

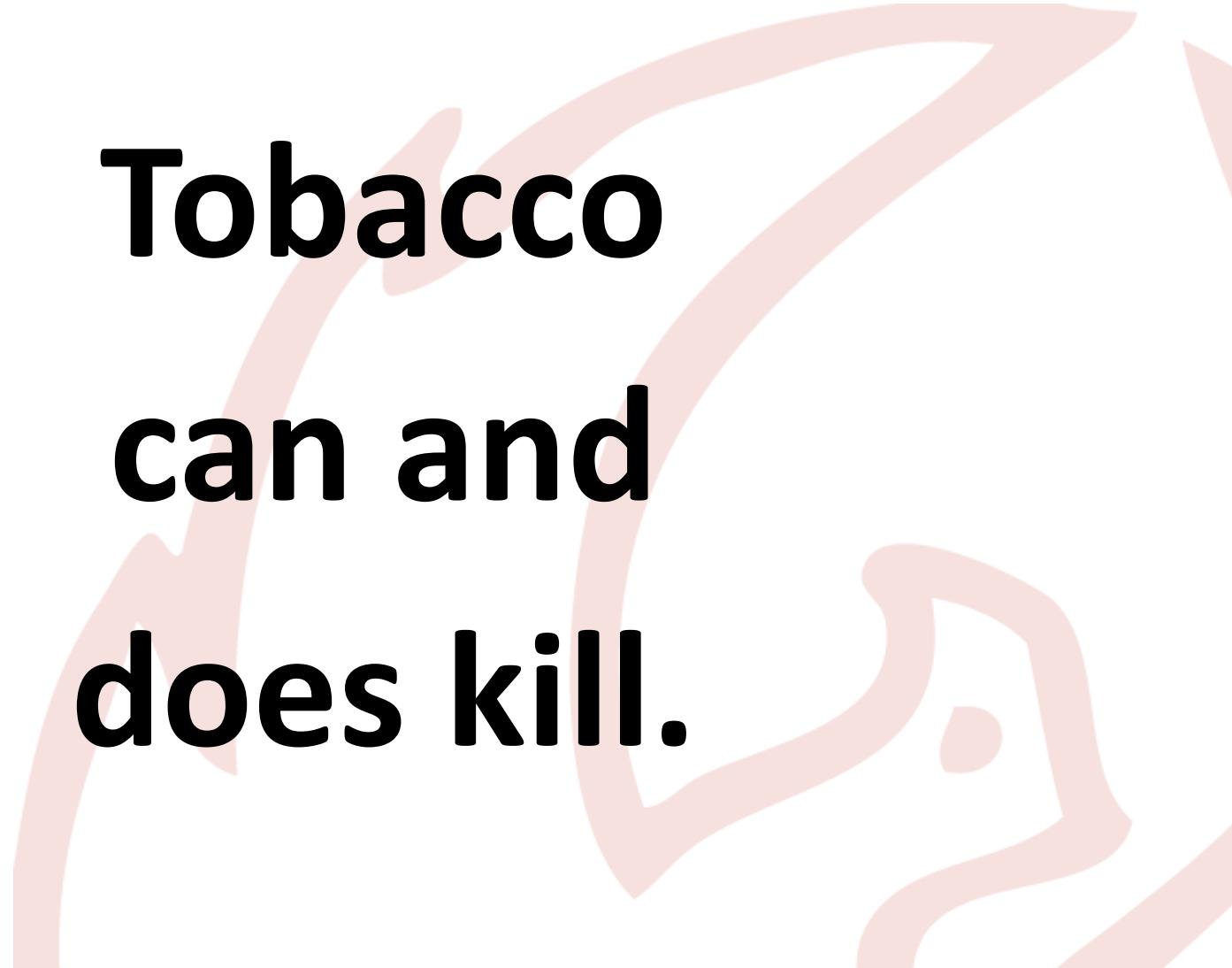


We will still
know in
2014.



We've known
for
50 years.

The text is centered on a white background. A large, light pink arrow curves from the bottom left towards the top right, passing behind the text. At the top of the slide, there are several curved lines: a thick red line on the left, a thin yellow line in the middle, and a thin red line on the right.

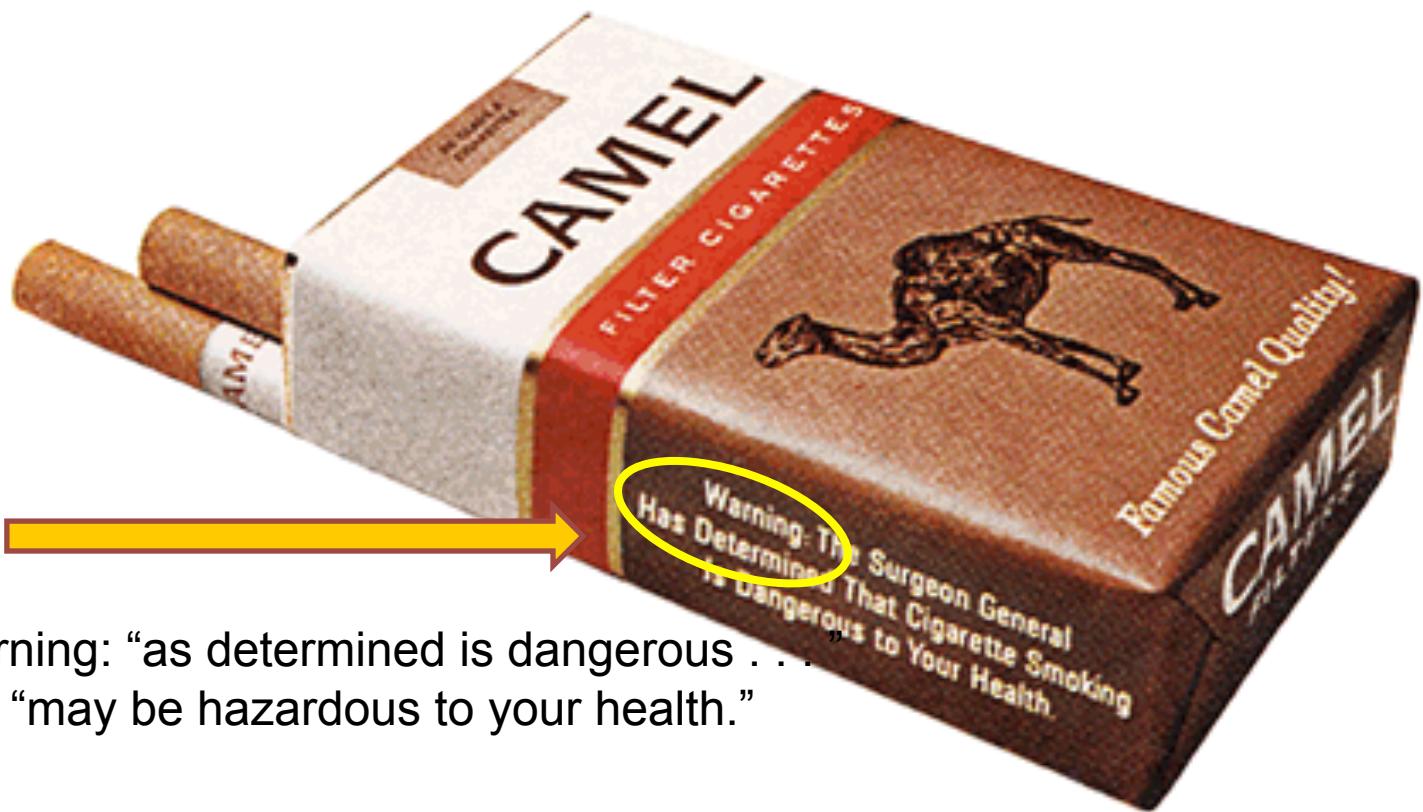


**Tobacco
can and
does kill.**

Brief history of warning labels

Cigarettes

- **(1966–1970)** Caution: Cigarette Smoking *May be* Hazardous to Your Health
- **(1970–1985)** Warning: The Surgeon General Has Determined that Cigarette Smoking is Dangerous to Your Health
- **(1985–)** SURGEON GENERAL'S WARNING: Smoking Causes Lung Cancer, Heart Disease, Emphysema, And May Complicate Pregnancy.
- **(1985–)** SURGEON GENERAL'S WARNING: Quitting Smoking Now Greatly Reduces Serious Risks to Your Health.
- **(1985–)** SURGEON GENERAL'S WARNING: Smoking By Pregnant Women May Result in Fetal Injury, Premature Birth, And Low Birth Weight.
- **(1985–)** SURGEON GENERAL'S WARNING: Cigarette Smoke Contains Carbon Monoxide.



Warning: "as determined is dangerous . . ."
Not "may be hazardous to your health."

U.S. Surgeon General Luther Terry at press conference to release the report on Smoking and Health. January 11, 1964.



[http://www.surgeongeneral.gov/
initiatives/tobacco/resources.html](http://www.surgeongeneral.gov/initiatives/tobacco/resources.html)

Resources to observe the
50th Anniversary of the
Surgeon Generals
Report on
Smoking and Health





50 years.



And yet...

According to the Centers for Disease Control and Prevention

Every day in the United States alone, approximately 4,000 kids under the age of 18 try their first cigarette, and out of that number, 1000 start smoking regularly. This adds 400,000 new smokers to the population annually.



Percent of high school students

Who have smoked a cigarette in the past month?

Percent of high school students

Who have smoked a cigarette in the past month?

18.1% (according to CDCP)

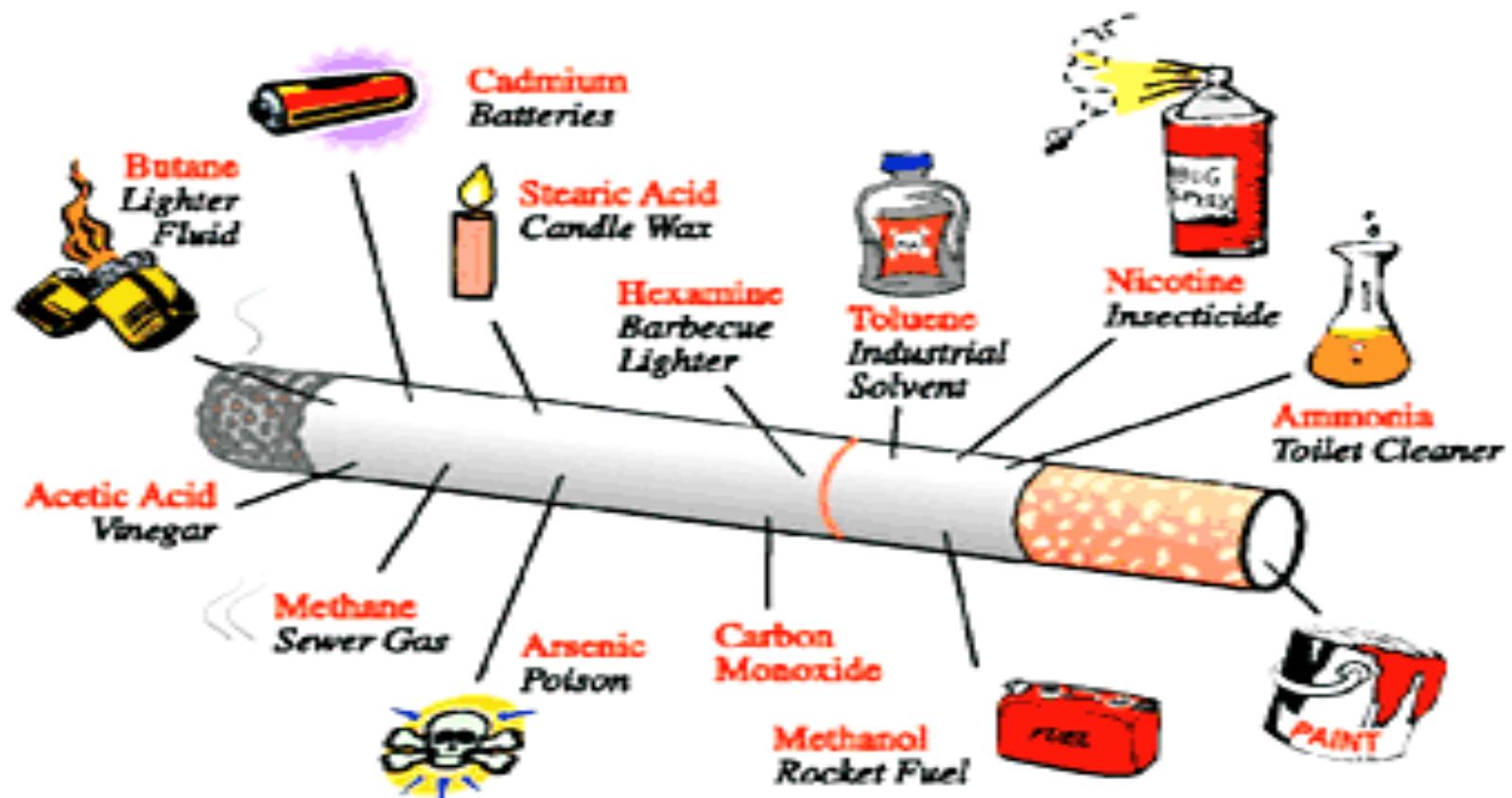
(nearly 1 in 5)

Also recently noted increase youth using little cigars:

- THURSDAY, Nov. 14, 2014(HealthDay News) –
The rapidly growing use of electronic cigarettes, hookahs and other smoking alternatives by middle school and high school students concerns U.S. health officials.
- While use of these devices nearly doubled in some cases between 2011 and 2012, no corresponding decline has been seen in cigarette smoking, the U.S. Centers for Disease Control and Prevention reported Thursday.



NOT 7 essential vitamins and minerals in every puff . . .





According to the American Lung Association:

There are approximately 600 ingredients in cigarettes.

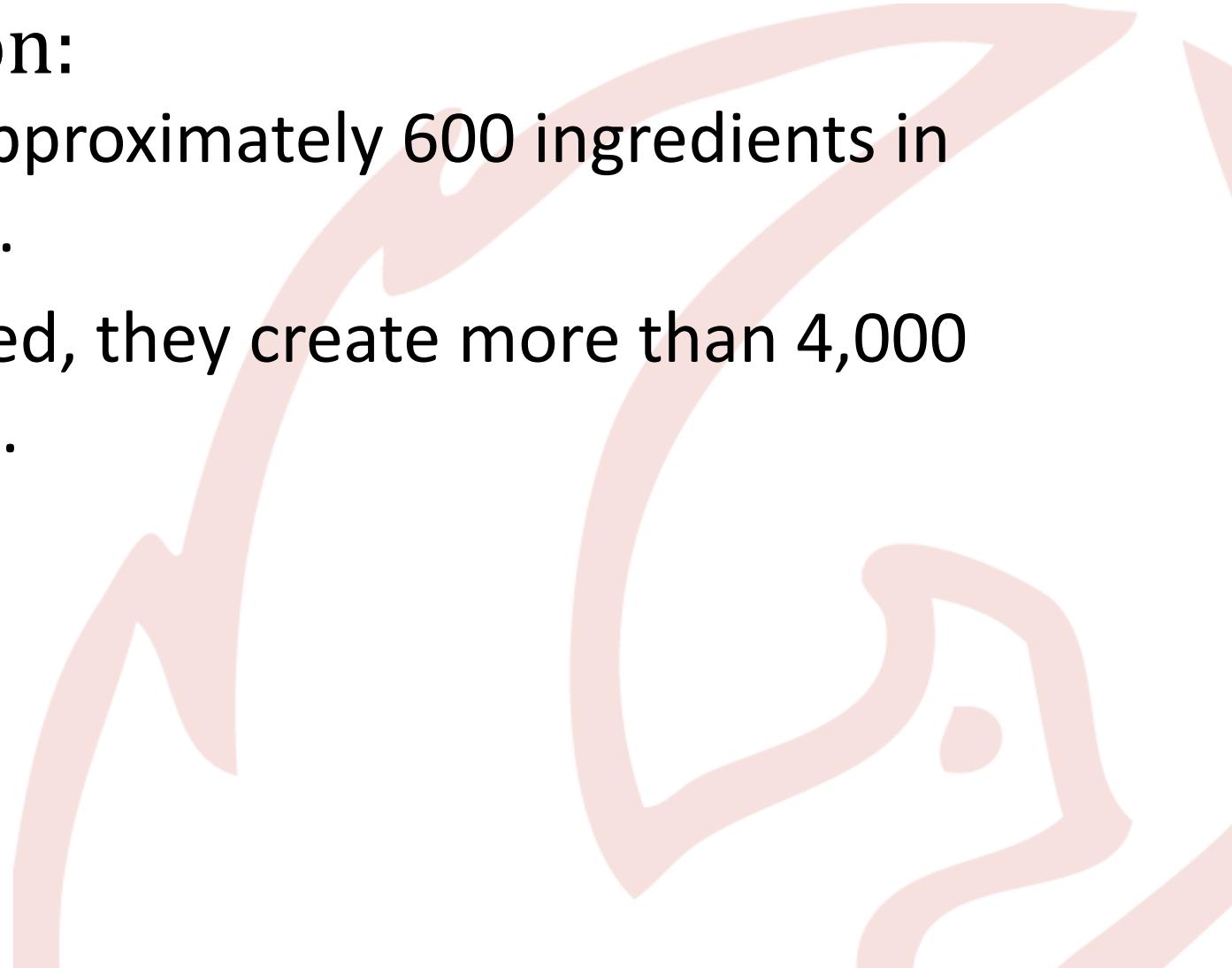




According to the American Lung Association:

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When burned, they create more than 4,000 chemicals.





According to the American Lung Association:

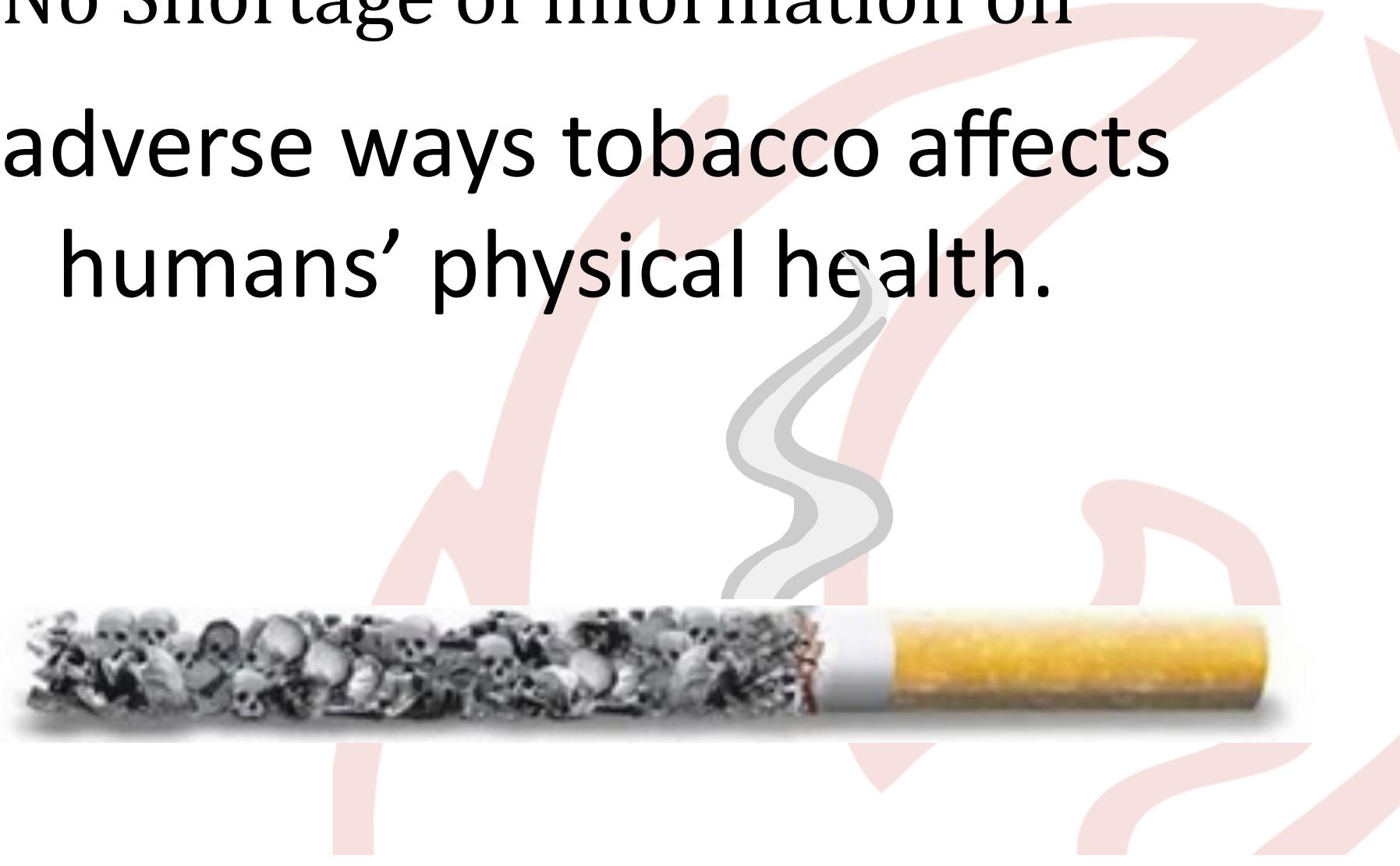
There are approximately 600 ingredients in cigarettes.

When burned, they create more than 4,000 chemicals.

At least 50 of these chemicals are known to cause cancer, and many are poisonous.



No Shortage of information on
adverse ways tobacco affects
humans' physical health.





**Smoking
can cause
a slow
and painful
death**



Non-smoker's lungs



You can quit. Call 1-800-QUIT-NOW.

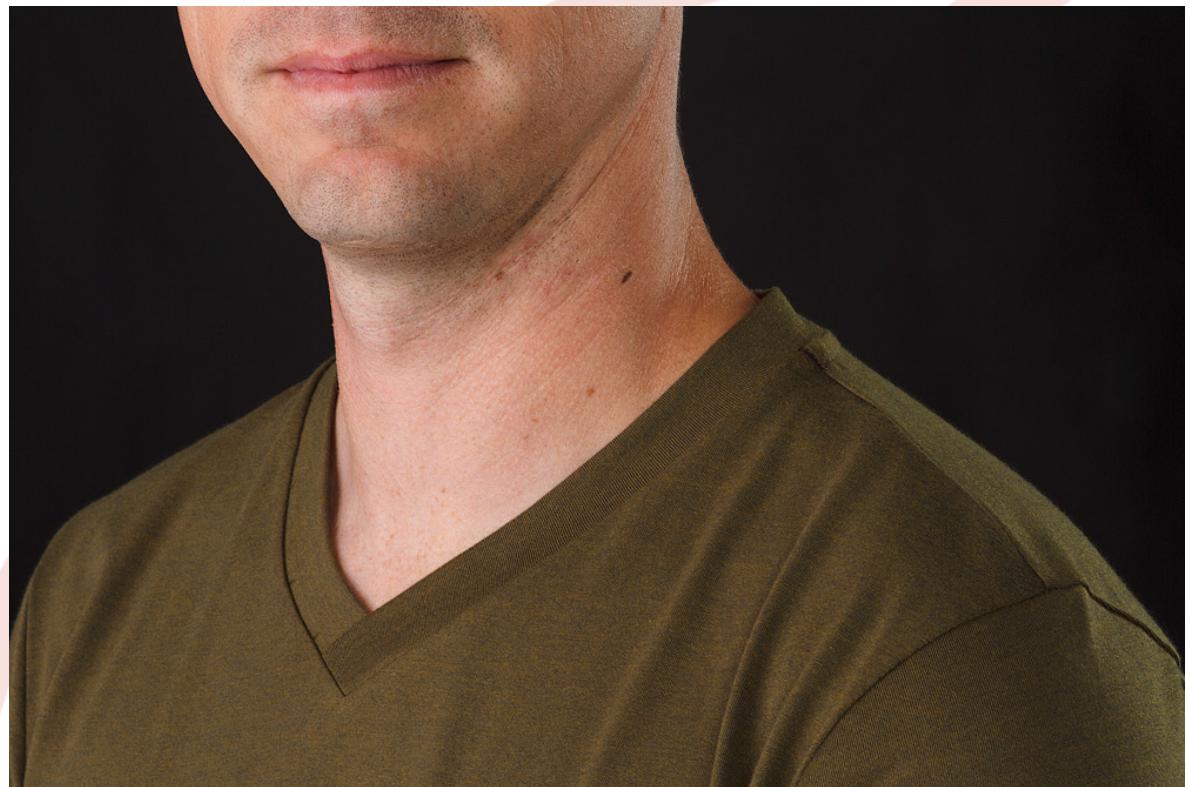




But what about mental health?



Have you noticed?





Your head is connected to your body?

Head



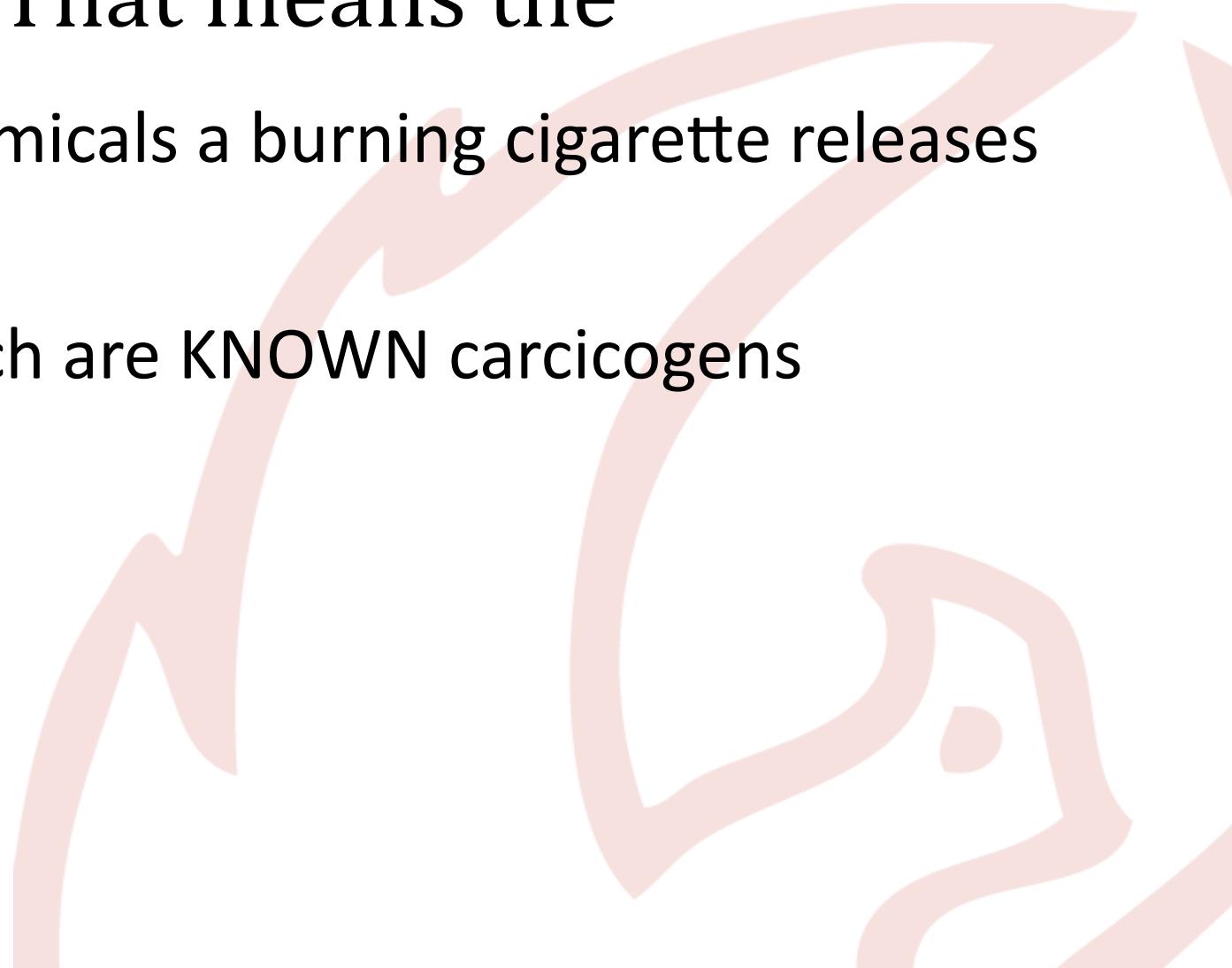
Body





Hmmm? That means the

- 4,000 chemicals a burning cigarette releases
- 50 of which are **KNOWN** carcinogens



Will go to your brain, not just your lungs
or your heart.

Head



Body



November 2012

King's College study in Great Britain.

<http://www.bbc.co.uk/news/health-20463363>

Scientists involved said people needed to be aware that lifestyles could damage the mind as well as the body.

- The results showed that the overall risk of a heart attack or stroke was "significantly associated with cognitive decline" with those at the highest risk showing the greatest decline.
- It also said there was a "consistent association" between smoking and lower scores in the tests.

Israeli Study: Smoking Tobacco associated with lower IQ scores

Young people who smoke regularly are likely to have markedly lower intelligence levels than those who do not smoke, and, according to the study of 20,000 young adults, the heavier the smoker, the lower the IQ.



<http://www.dailymail.co.uk/sciencetech/article-1261490/Is-proof-smoking-lowers-IQ-Study-suggests-20-day-dramatically-reduces-mental-capacity.html>



Hmmmm?

If tobacco smoke
affects the tissue in
the brain, wouldn't
that affect the way the
brain works?



Mental illness are
brain disorders?
Would it make
sense that using
tobacco might as
associated with
mental illnesses?

According to NAMI

(National Alliance on Mental Illness)

People living with mental
illness have a very high
rate of smoking.





A study by

The Journal of the American Medical Association reported that 44.3 percent of all cigarettes in America are consumed by individuals who live with mental illness and/or substance abuse disorders. This means that people living with mental illness are about twice as likely to smoke as other persons.

http://www.nami.org/Content/NavigationMenu/Hearts_and_Minds/Smoking_Cessation/Smoking_and_Mental_Illness.htm

NAMI notes:

There is no one single, certain reason why so many people who live with mental illness smoke. It may be a combination of

- brain effects,
- psychological effects and
- the social world in which we live.

NOTE:

We will be focusing on
Correlation of tobacco with
mental health issues.

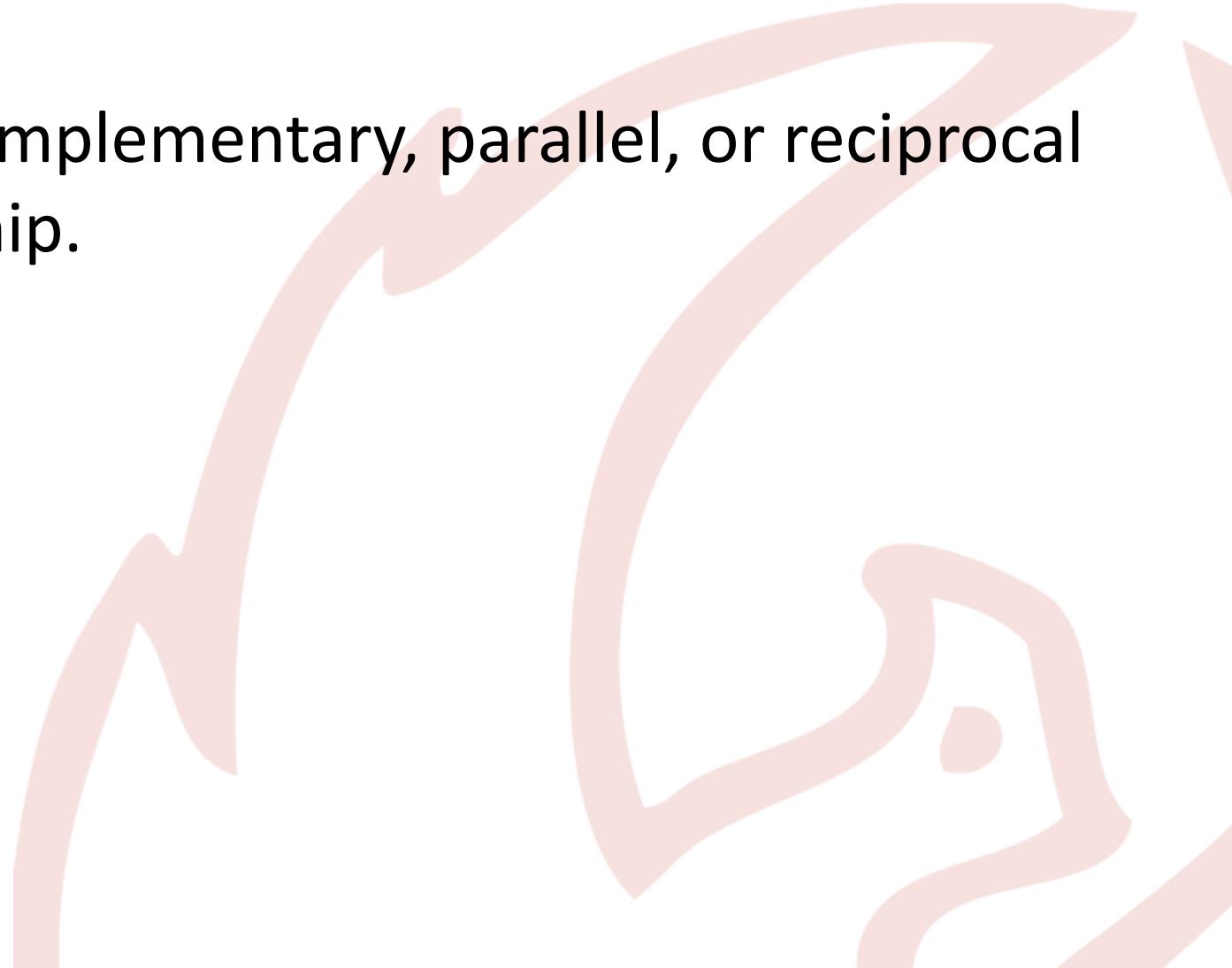
Not cause.



What's the
difference
between
correlation and
cause?



cor·re·la·tion



A causal, complementary, parallel, or reciprocal relationship.

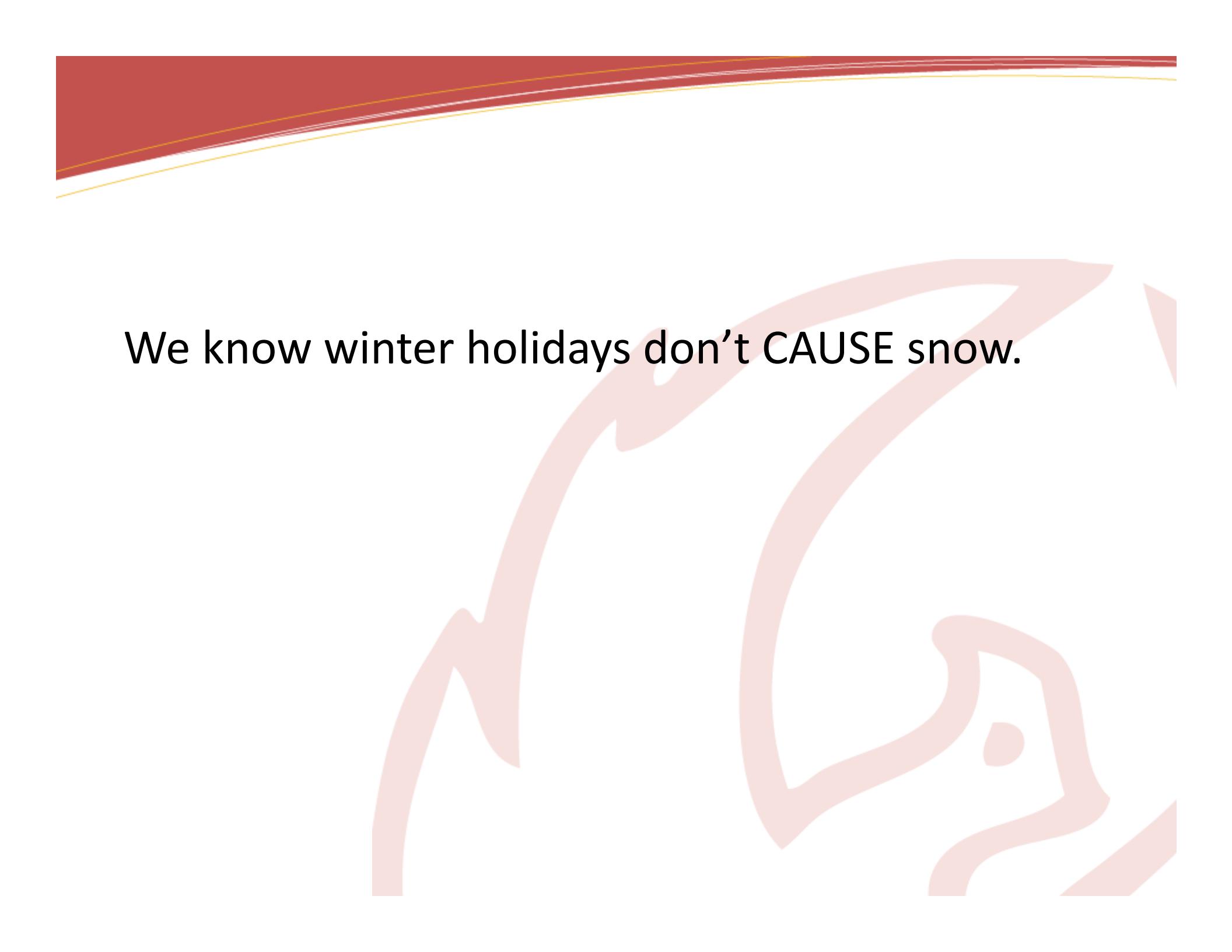
cause

a person or thing that acts, happens, or exists in such a way that some specific thing happens as a result; the producer of an effect

There is a **correlation** between the winter holidays and snow.

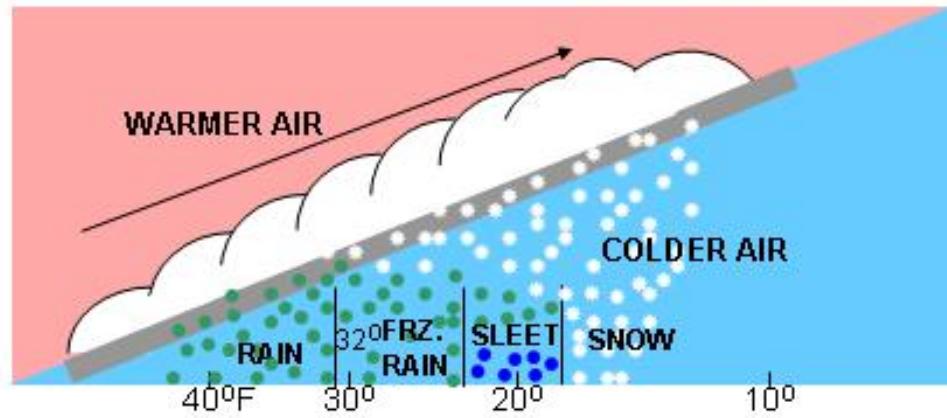
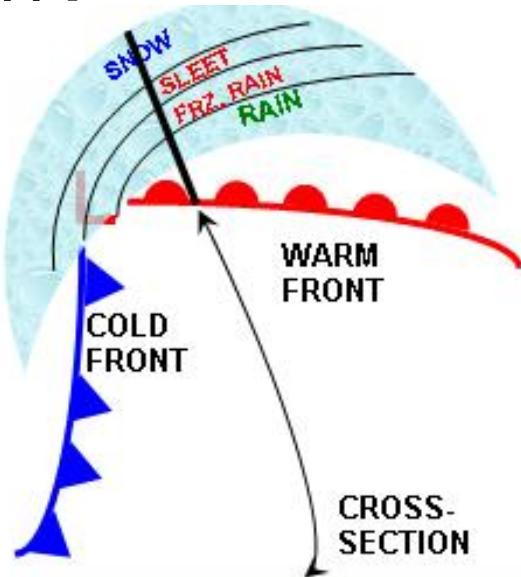
They tend to happen at the same time so they are associated with each other (in MO).





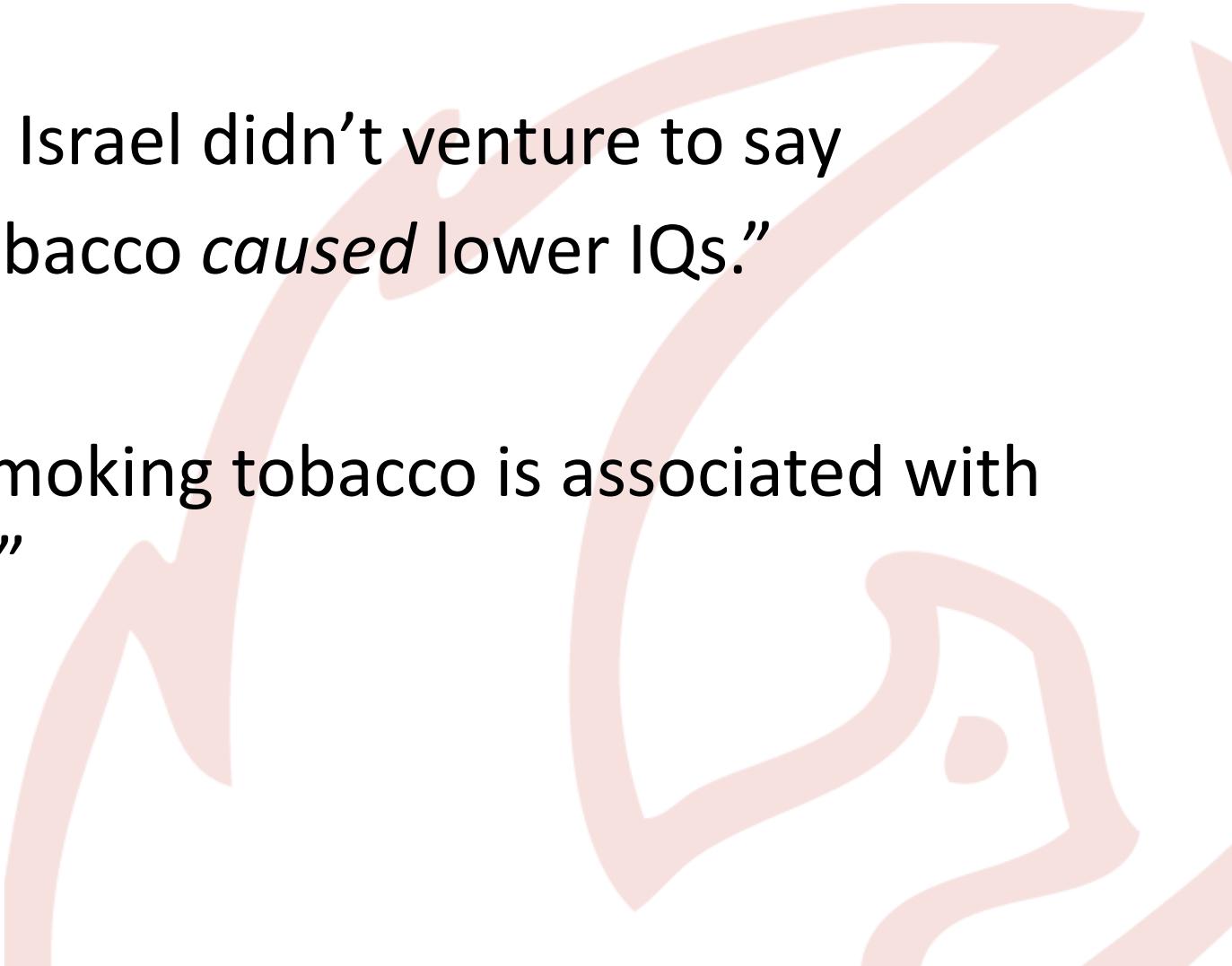
We know winter holidays don't CAUSE snow.

Here's what meteorologists say CAUSE it to snow:





In the same way:



The study in Israel didn't venture to say
"Smoking tobacco *caused* lower IQs."

It did say "Smoking tobacco is associated with
lower IQs."

January 2013

- Marijuana permanently lowers IQ by several points in adolescents, according to research published in August. But a new study suggests that factors related to economic class and home life, not marijuana use, may have caused that IQ drop.—Correlation not necessarily cause.
- <http://www.livescience.com/26247-does-pot-lower-iq.html>

Note the name of this presentation:

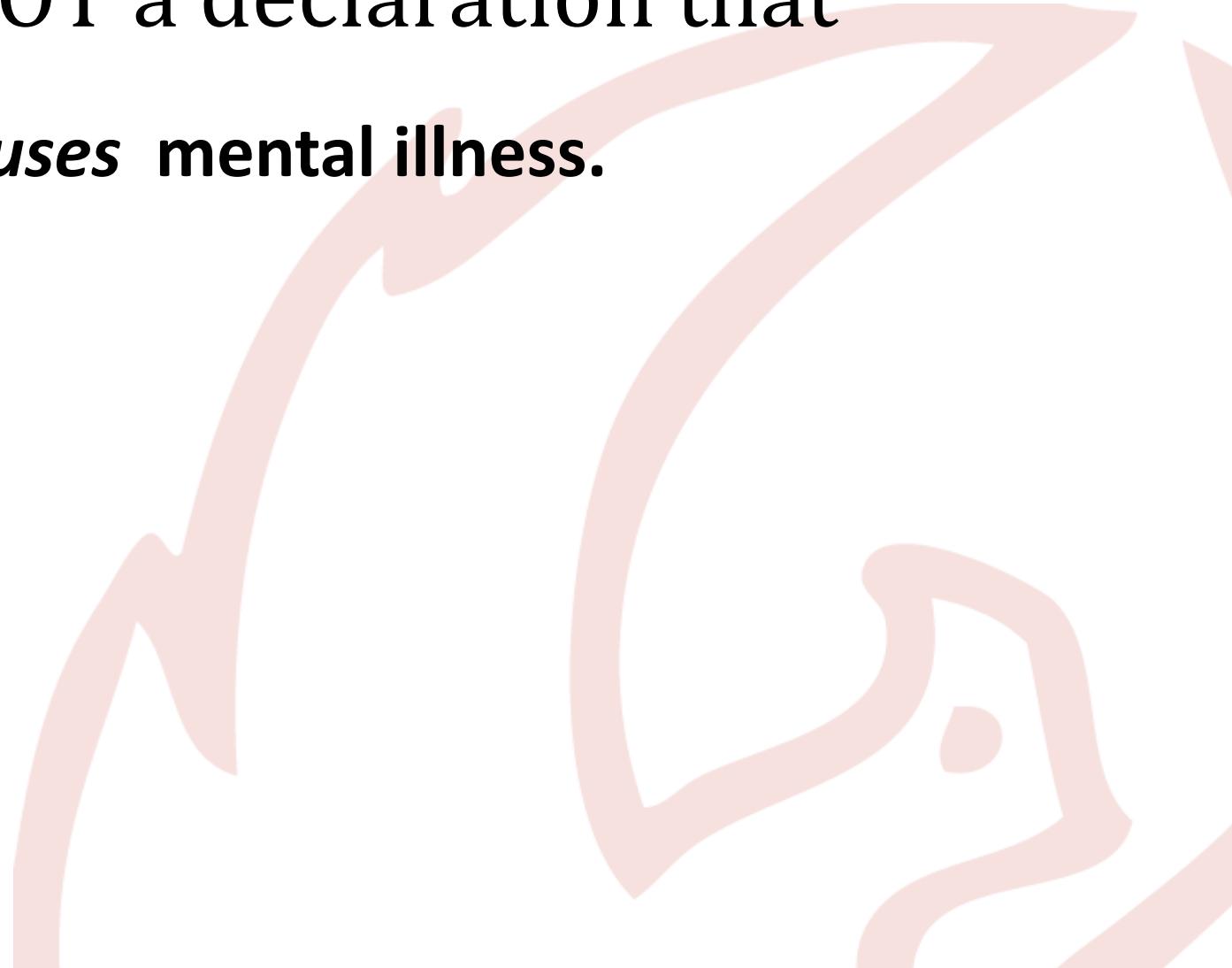
**Tobacco + Youth = Red Flag
for Mental Health**





This is NOT a declaration that

Smoking *causes* mental illness.





We are exploring the

Correlation of smoking to
mental health issues.



Health Harms ***Caused*** by Pregnant Women Smoking or Being Exposed to Second Hand Smoke (partial list)

<http://www.tobaccofreekids.org/research/factsheets/pdf/0007.pdf>

other birth and delivery problems

childhood wheezing

brain damage during gestation

later overweight in children

mental retardation

attention deficit disorder

other learning & developmental problems

behavioral problems

cleft palates and lips

youth and adult violence and criminality

cancer-causing agents in infants' blood

smoking during adolescence

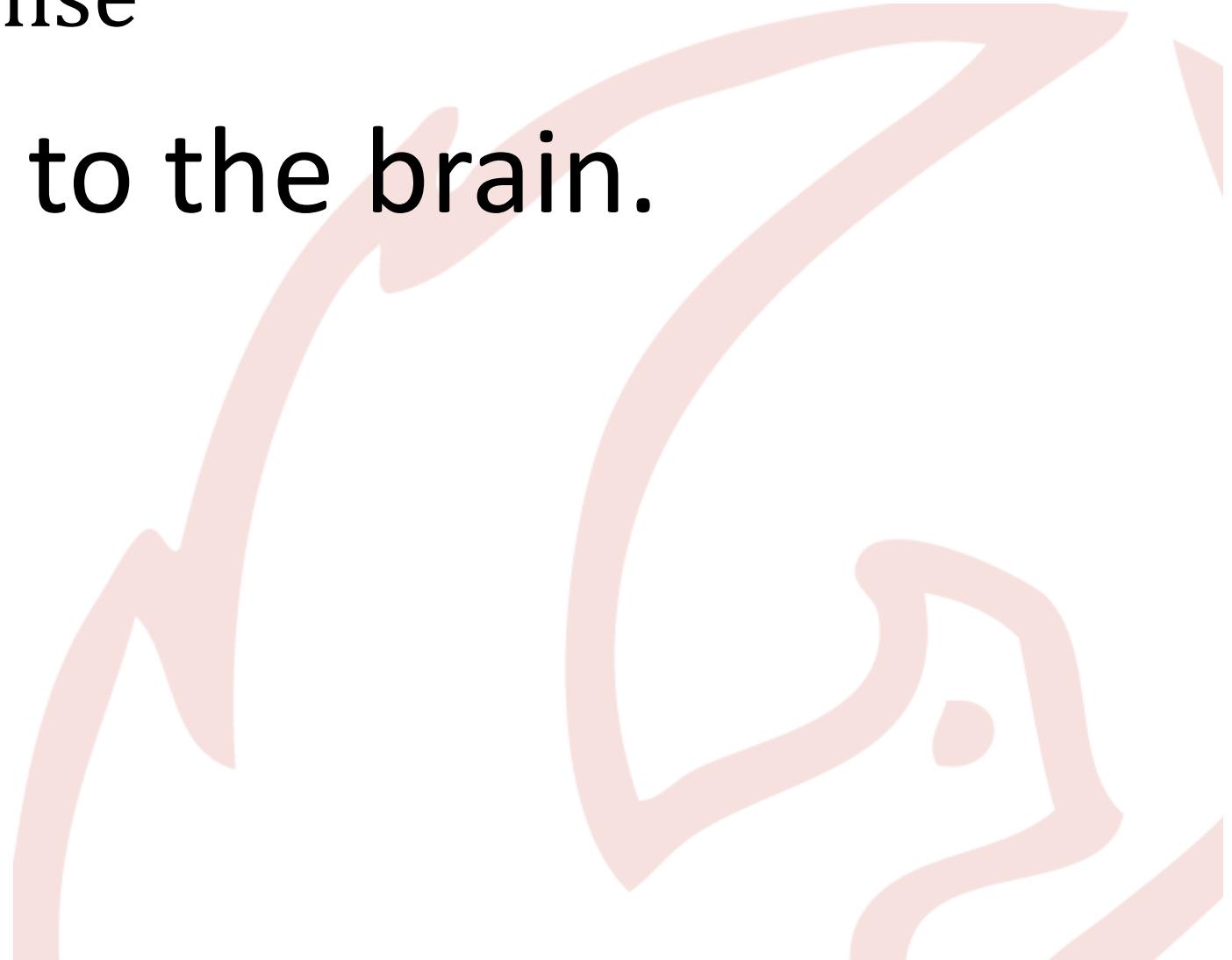
Connection with clinical anxiety?

- A 2002 article in **The American Journal of Psychiatry** concludes that: “Previous epidemiologic studies have found a higher risk of panic disorder in early adulthood among those who smoke cigarettes during adolescence, offering support for the hypothesis that cigarette smoking may increase the risk of the development of panic and other anxiety disorders.”



Makes sense

Less O^2 to the brain.



Cigarette Smoking Among Adolescents With Alcohol and Other Drug Use Problems

Mark G. Myers, Ph.D., and John F. Kelly, Ph.D.



“Research consistently demonstrates a link between adolescent smoking and psychiatric problems, in particular major depressive disorder, disruptive behavior disorders, and AOD use problems (e.g., Brown et al. 1996).”

<http://pubs.niaaa.nih.gov/publications/arh293/221-227.htm>

CDC: Factors Associated with Youth Tobacco use.

Some factors associated with youth tobacco use appear to be similar across different types of tobacco products and include the following categories:

In the category of Cognitive and Affective Processes

- There is a strong relationship between youth smoking and negative affect, such as depression, anxiety, and stress.



http://www.cdc.gov/tobacco/data_statistics/fact_sheets/youth_data/tobacco_use/#factors

According to WHO (World Health Organization):



Teenage smokers are more likely to have seen a doctor or other health professionals for an **emotional or psychological** complaint.

- Teens who smoke are 3 times more likely than nonsmokers to use alcohol,
- 8 times more likely to use marijuana, and
- 22 times more likely to use cocaine.

http://www.who.int/tobacco/research/youth/health_effects/en/

Orlando M, Tucker JS, Ellickson PL, Klein DJ.
Subst Use Misuse. 2005;40(8):1051-69.

Results suggest that while it is common during adolescence to drink but not smoke, **it is very unusual to smoke and not drink.**

<http://www.ncbi.nlm.nih.gov/pubmed/16040368?dopt=AbstractPlus>



So keep on

Doing everything you can to keep tobacco and other addictive substances out of the hands of youth.

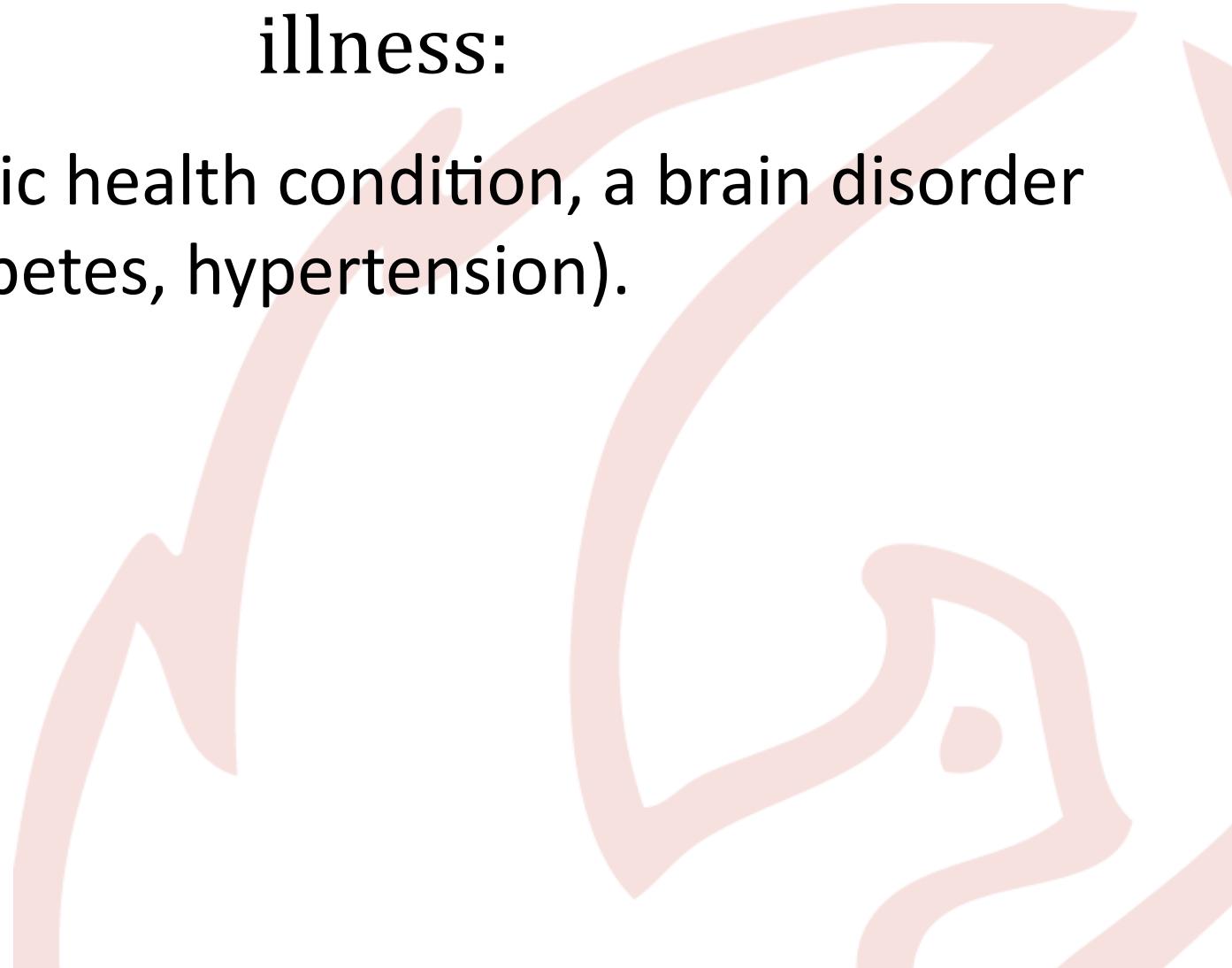
Preventionists, YOU ROCK!





Here's what we know about mental illness:

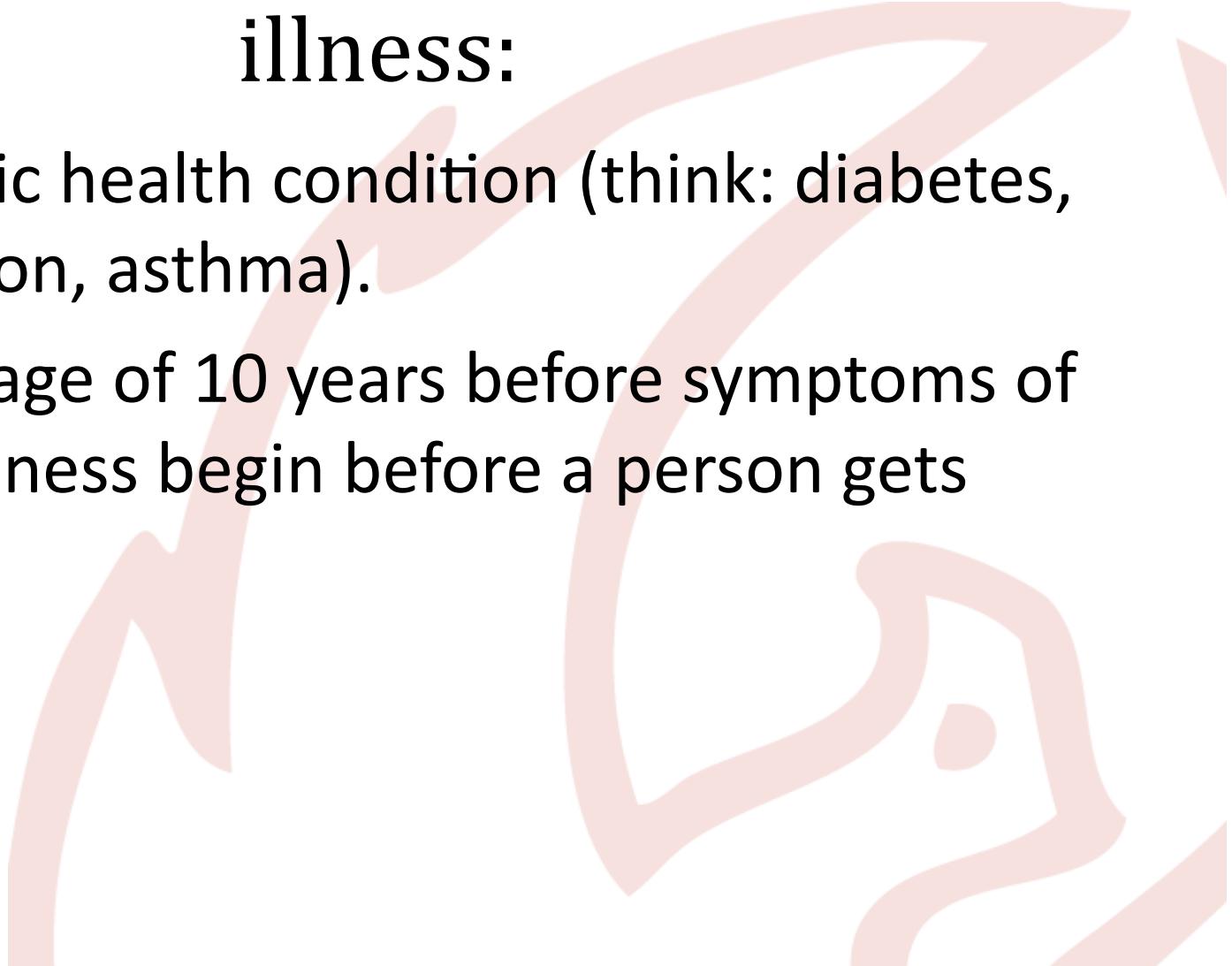
- It's a chronic health condition, a brain disorder (think: diabetes, hypertension).





Here's what we know about mental illness:

- It's a chronic health condition (think: diabetes, hypertension, asthma).
- It's an average of 10 years before symptoms of a mental illness begin before a person gets help.





Here's what we know about mental illness:

- It's a chronic health condition (think: diabetes, hypertension, asthma).
- It's an average of 10 years before symptoms of a mental illness begin before a person gets help.
- Early interventions yield better outcomes.
(like other chronic health conditions, people learn to manage the disorder and lessen symptoms.)

Aren't we all. . .

. . . Searching for
ways to identify
mental illness in
youth sooner?





Before

- The obituary for the suicide is in the paper.
- Residential treatment for a substance use disorder.
- The incident with a gun at the school.
- Loss of education opportunities.
- Loss of housing . . .



I think we can.

We can see it.

We can smell it.

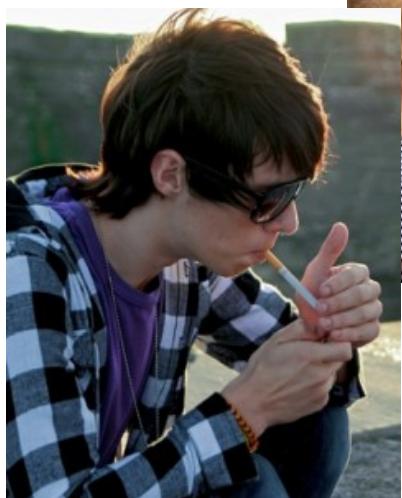


I think we can.

We can see using it.

We can smell it

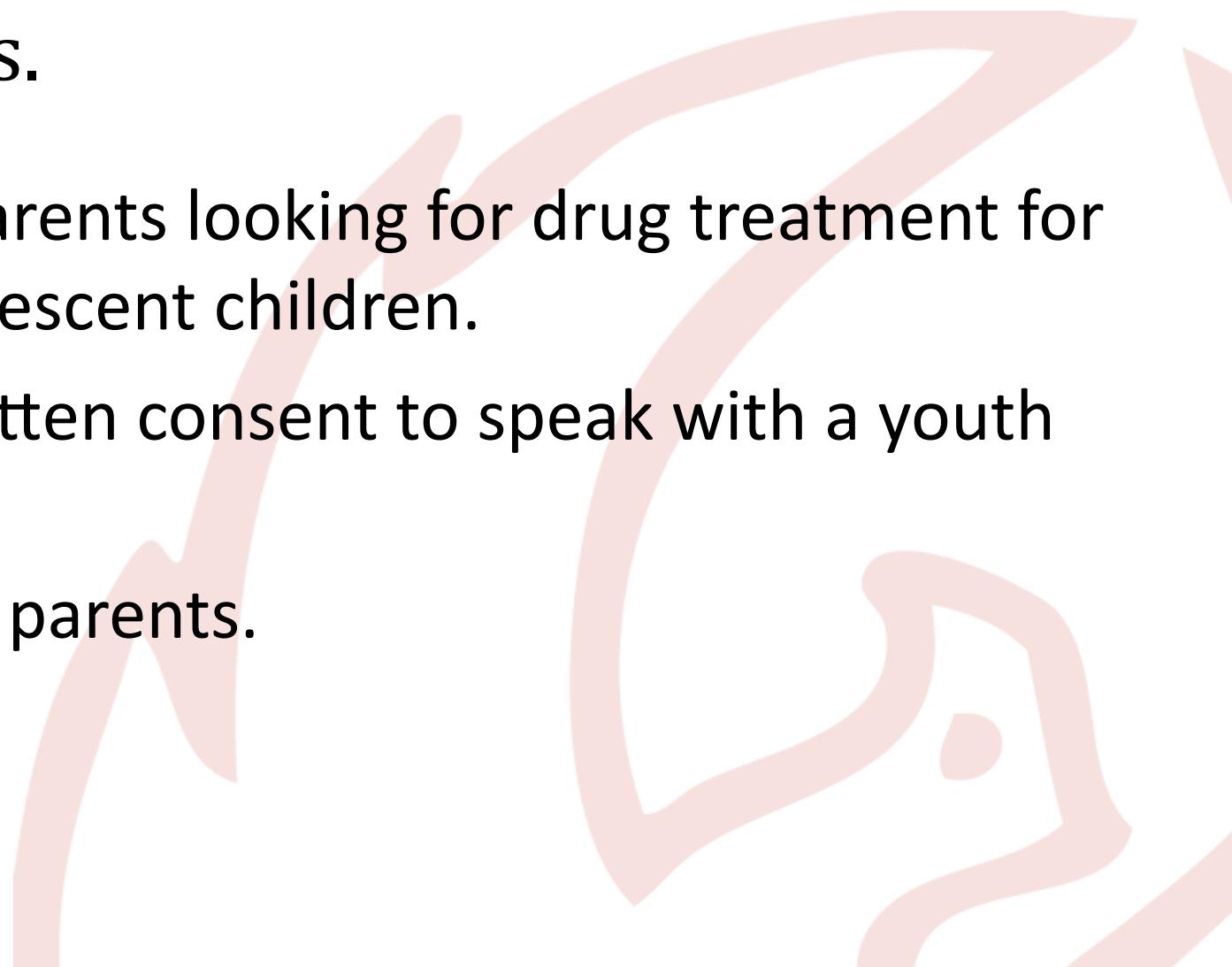
on our kids.

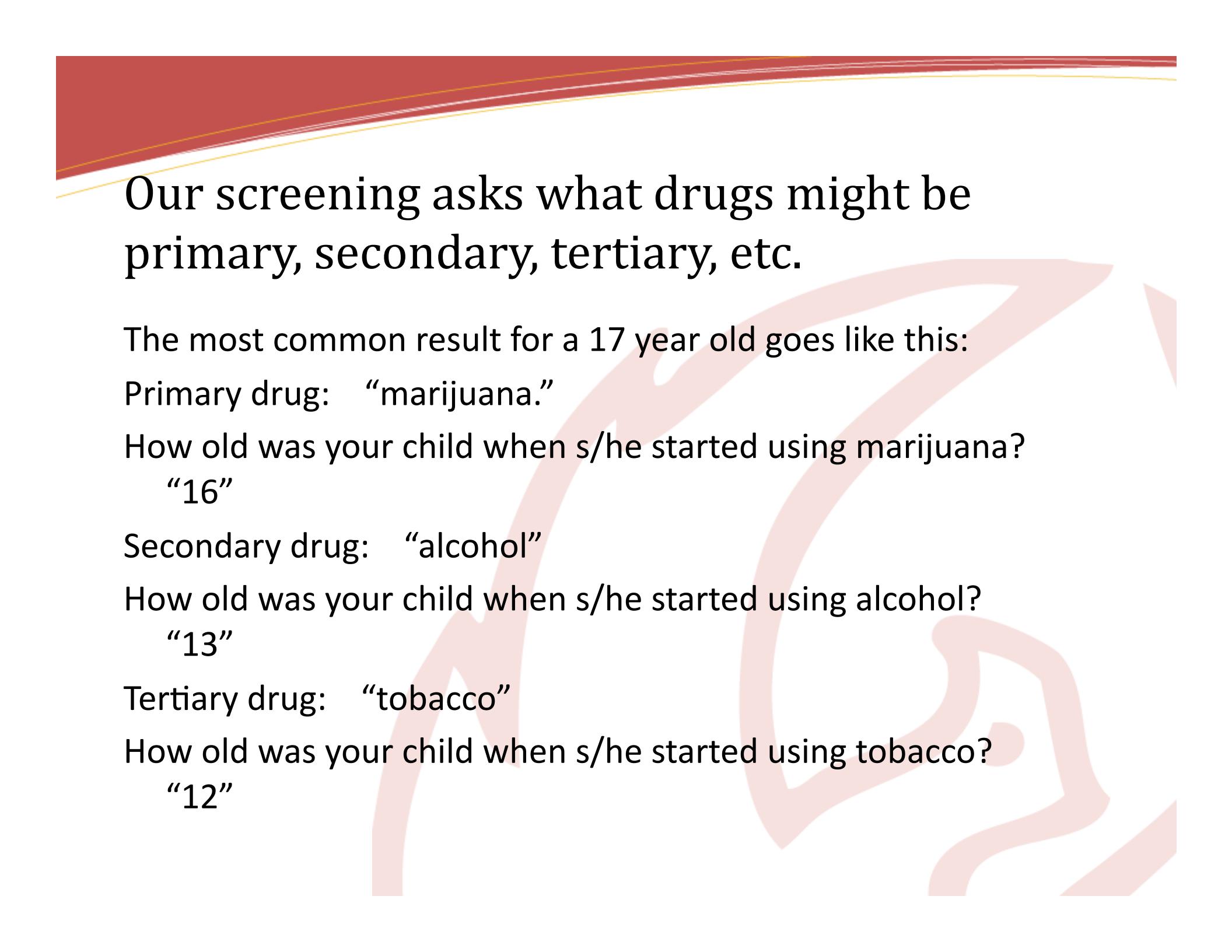




Several times a week I do intake phone screenings.

- I talk to parents looking for drug treatment for their adolescent children.
- I need written consent to speak with a youth under 18.
- I talk with parents.





Our screening asks what drugs might be primary, secondary, tertiary, etc.

The most common result for a 17 year old goes like this:

Primary drug: “marijuana.”

How old was your child when s/he started using marijuana?
“16”

Secondary drug: “alcohol”

How old was your child when s/he started using alcohol?
“13”

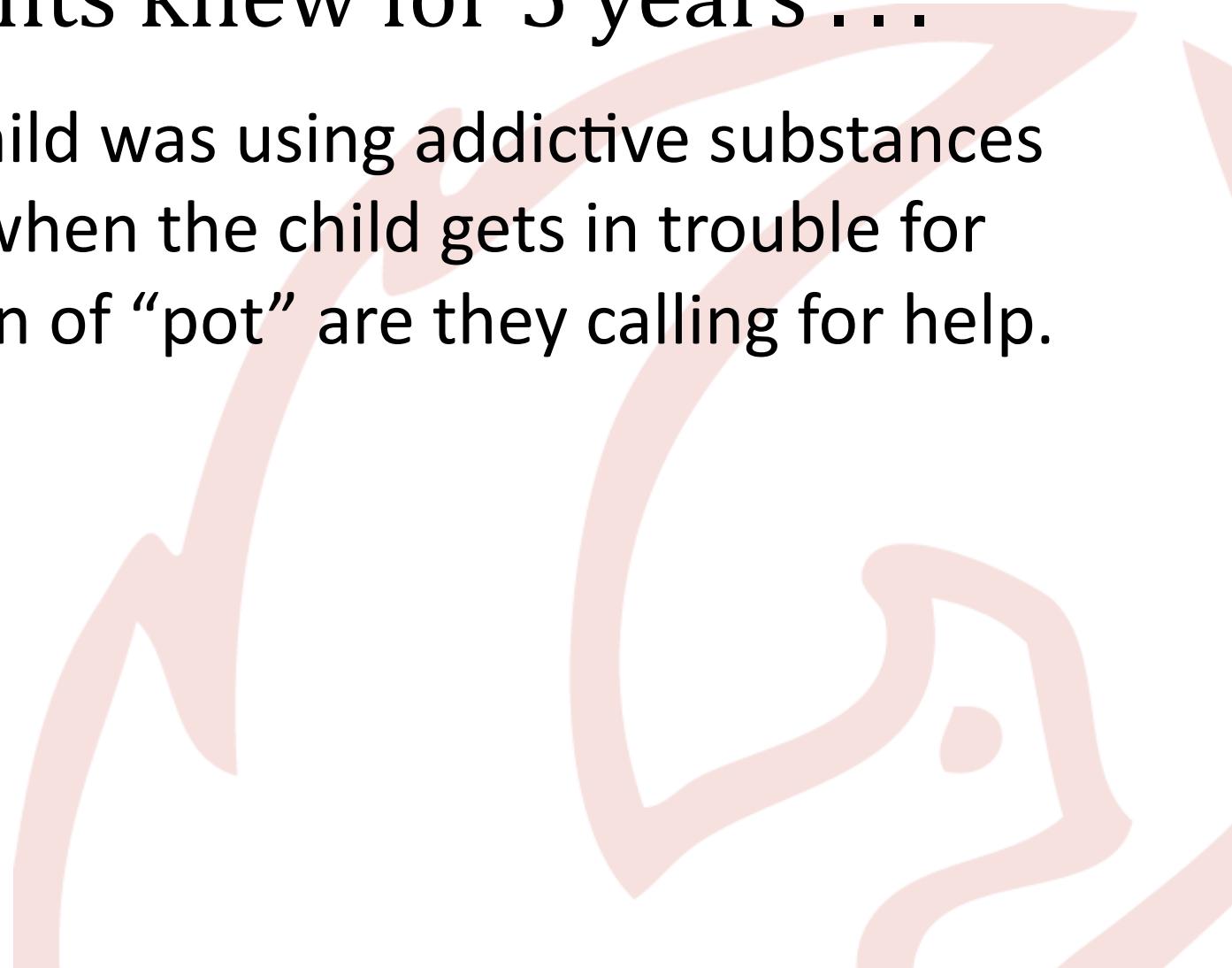
Tertiary drug: “tobacco”

How old was your child when s/he started using tobacco?
“12”



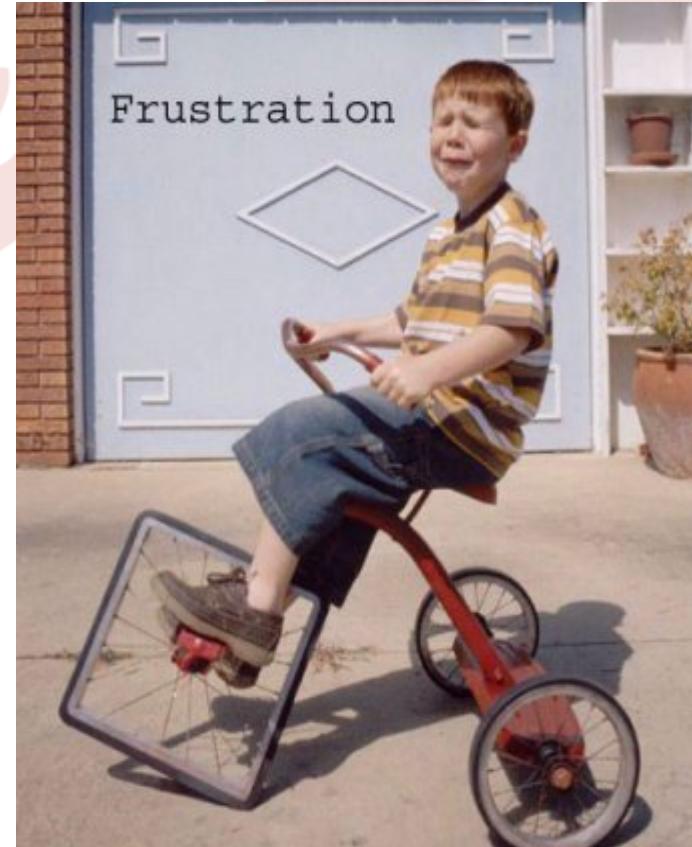
The parents knew for 5 years . . .

. . . Their child was using addictive substances but only when the child gets in trouble for possession of “pot” are they calling for help.



Our ongoing question?

Why do they wait so long?



Several reasons:

- They think (mistakenly) the child will “outgrow it.”
- They consider substance abuse a “rite of passage.” (“I did it.”)
- They don’t recognize symptoms of mental illness.
- They don’t know what to do.

Prevention Coalitions and Professionals in your community are addressing these:

- They think (mistakenly) the child will “outgrow it.”
- They consider substance abuse a “rite of passage.” (“I did it.”)

*Round of applause here for
Preventionists and prevention
Coalition members.*



Two primary points:



- 90% of all addictions begin during adolescence.
–Dr. Michael Dennis, Chestnut Health Systems, IL.
- 66-80% of youth who meet criteria for a substance use disorder are living with a co-occurring mental illness (clinical depression, clinical anxiety, ADHA, bipolar disorder, PTSD . . . Are the most common.)
- --SAMHSA (Substance Abuse and Mental Health Services Administration)



Focus the last part this presentation on
the last two:

- They don't recognize symptoms of mental illness.
- They don't know what to do.

Divide to list out answers:

1. List out “typical” challenging behaviors we associate with youth.
2. List out signs and symptoms of possible mental illnesses.
3. List out reasons a parent/adult might not seek help for youth who display early signs of mental illness/drug use disorder?
4. List out circumstances in a teen’s life that make tobacco use possible/likely.



Groups report back with lists.



Why is it hard for parents to identify mental illness in children?



It's typically up to the adults in a child's life to identify whether the child has a mental health concern. Unfortunately, many parents don't know the signs and symptoms of mental illness in children. Even if you know **the red flags**, it can be difficult to distinguish signs of a problem from normal childhood behavior. You might reason that every child displays some of these signs at some point. Concerns about the stigma associated with mental illness, the use of certain medications and the cost of treatment might also prevent parents from seeking care for a child who has a suspected mental illness.

- <http://www.mayoclinic.com/health/mental-illness-in-children/MY01915>

What are the warning signs of mental illness in children?

- **Mood changes.** Look for feelings of sadness or withdrawal that last at least two weeks or severe mood swings that cause problems in relationships at home or school.
- **Intense feelings.** Be aware of feelings of overwhelming fear for no reason — sometimes with a racing heart or fast breathing — or worries or fears intense enough to interfere with daily activities.

- **Behavior changes.** This includes drastic changes in behavior or personality, as well as dangerous or out-of-control behavior. Fighting frequently, using weapons or expressing a desire to badly hurt others also are warning signs.
- **Difficulty concentrating.** Look for signs of trouble focusing or sitting still, both of which might lead to poor performance in school.

- **Unexplained weight loss.** A sudden loss of appetite, frequent vomiting or use of laxatives might indicate an eating disorder.
- **Physical harm.** Sometimes a mental health condition leads to suicidal thoughts or actual attempts at self-harm or suicide.
- **Substance abuse.** Some kids use drugs **or alcohol** to try to cope with their feelings.
(remember, if they are smoking, it's unusual for them not to be using alcohol.)



“Normal” teen behavior may

Resemble early signs of mental health issues.

If they are using alcohol and other drugs, sometimes using being under the influence can mimic other mental illness and sometimes other mental illness can mimic being under the influence.

Youth themselves do not recognize many mental health symptoms:

- Irritability
- Not being able to sleep
- Loss of interest in usual activities
- Crying
- Ongoing fatigue
- Moodiness

(teen are like that, right?)



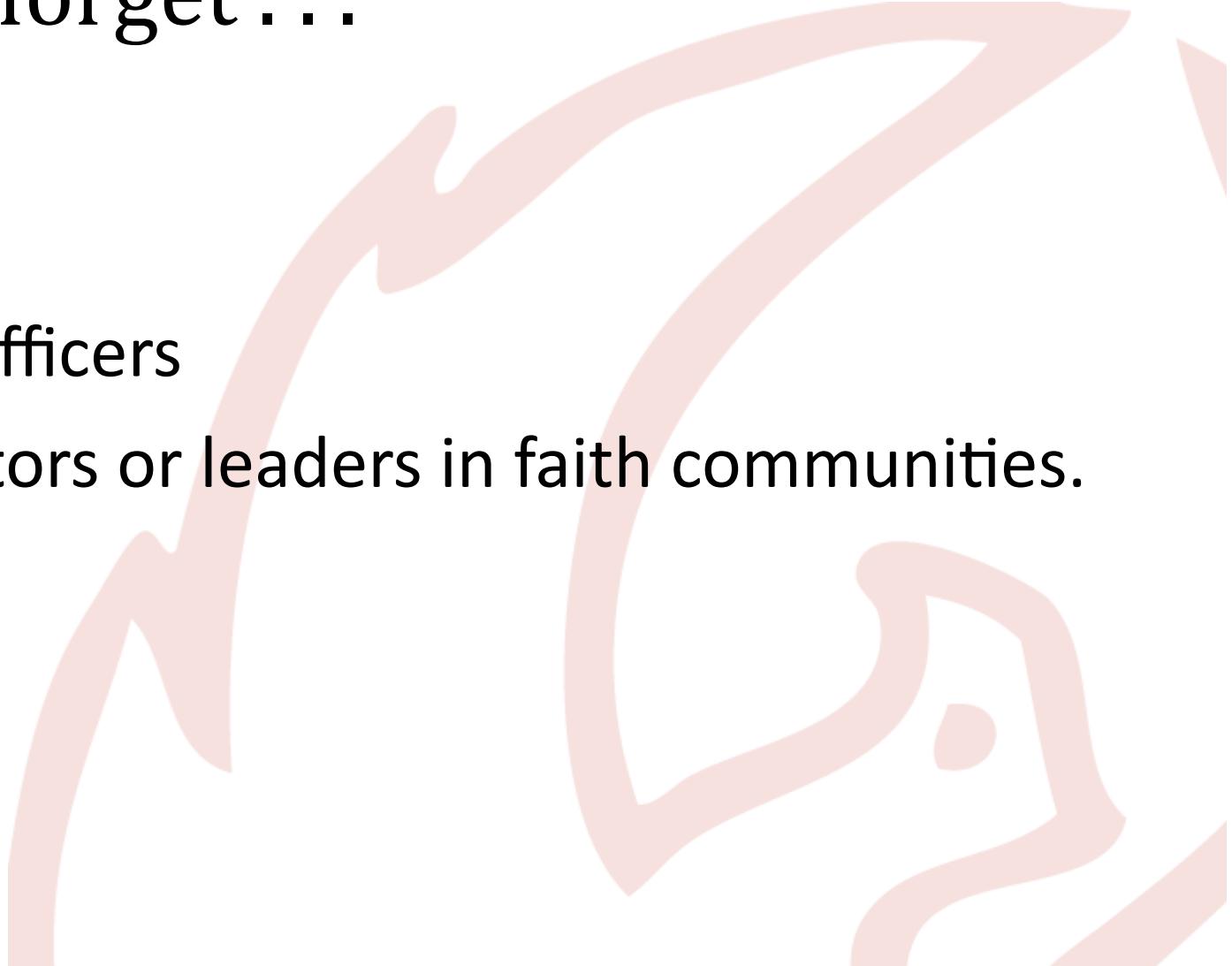
What's a parent to do?





Let's not forget . . .

- Teachers,
- Coaches
- Juvenile Officers
- Youth pastors or leaders in faith communities.



- **What mental health conditions affect children?**

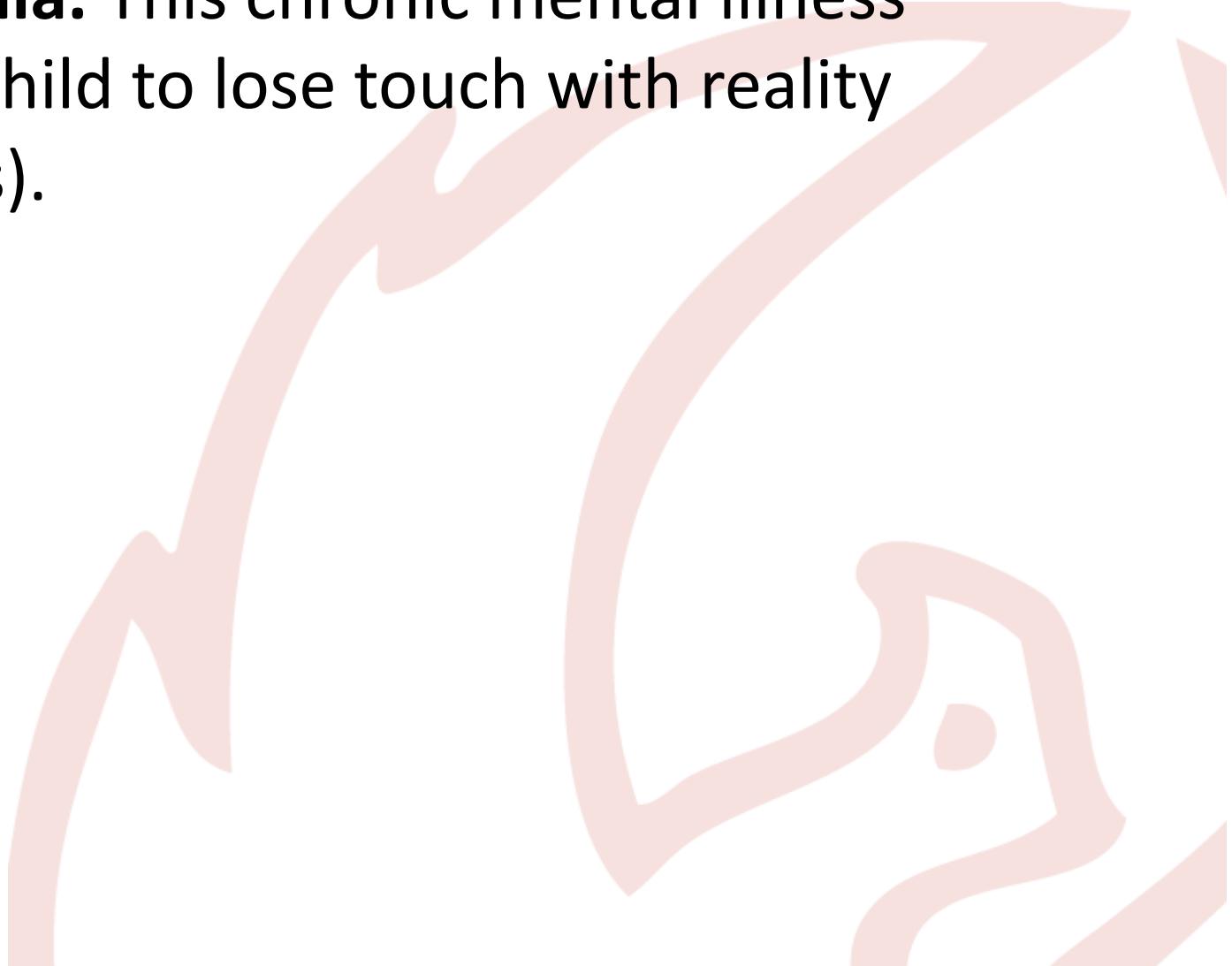
Children can experience a range of mental health conditions, including:

- **Anxiety disorders.** Children who have anxiety disorders — such as obsessive compulsive disorder, post-traumatic stress disorder, social phobia and generalized anxiety disorder — experience anxiety as a persistent problem that interferes with their daily activities.

- **Attention-deficit/hyperactivity disorder (ADHD).** This condition typically includes a combination of issues, such as difficulty sustaining attention, hyperactivity and impulsive behavior.

- **Eating disorders.** Eating disorders — such as anorexia nervosa, bulimia nervosa and binge-eating disorder — are serious conditions. Children can become so preoccupied with food and weight that they focus on little else.

- **Mood disorders.** Mood disorders — such as depression and bipolar disorder — can cause a child to feel persistent feelings of sadness or extreme mood swings.



Schizophrenia. This chronic mental illness causes a child to lose touch with reality (psychosis).



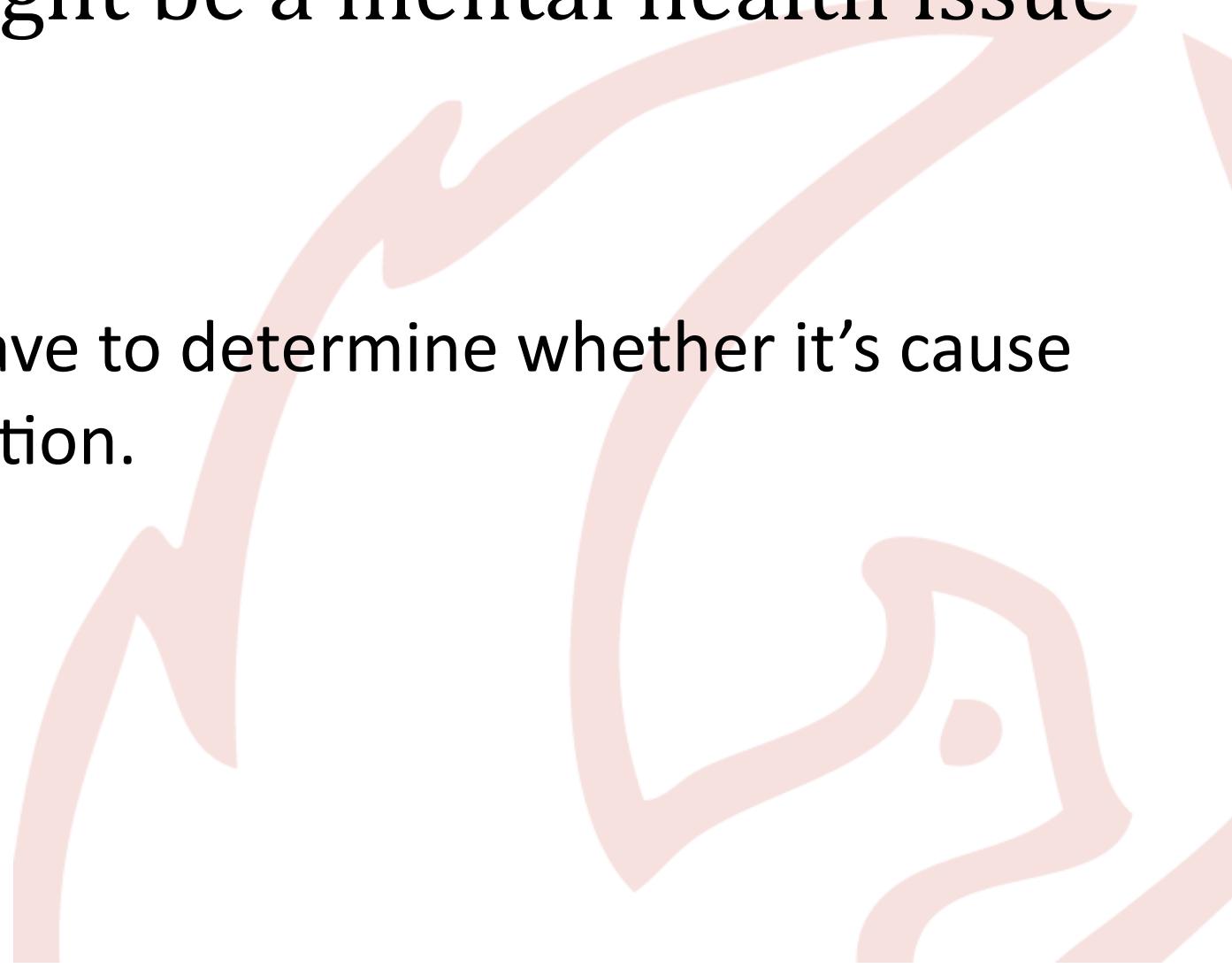
Remember that saying?



WHERE
THERE'S
SMOKE...



There might be a mental health issue
For a youth.



We don't have to determine whether it's cause
or correlation.

A youth who is smoking tobacco
merits a
second look.





How do we do that?



Former Congressman Patrick Kennedy (son of US Senator Edward Kennedy)

“Everybody needs a check up from the neck up.”

- Has had personal struggles

With mental illness and
addiction

- Didn't run for re-election but because co-founder of One Mind for Research

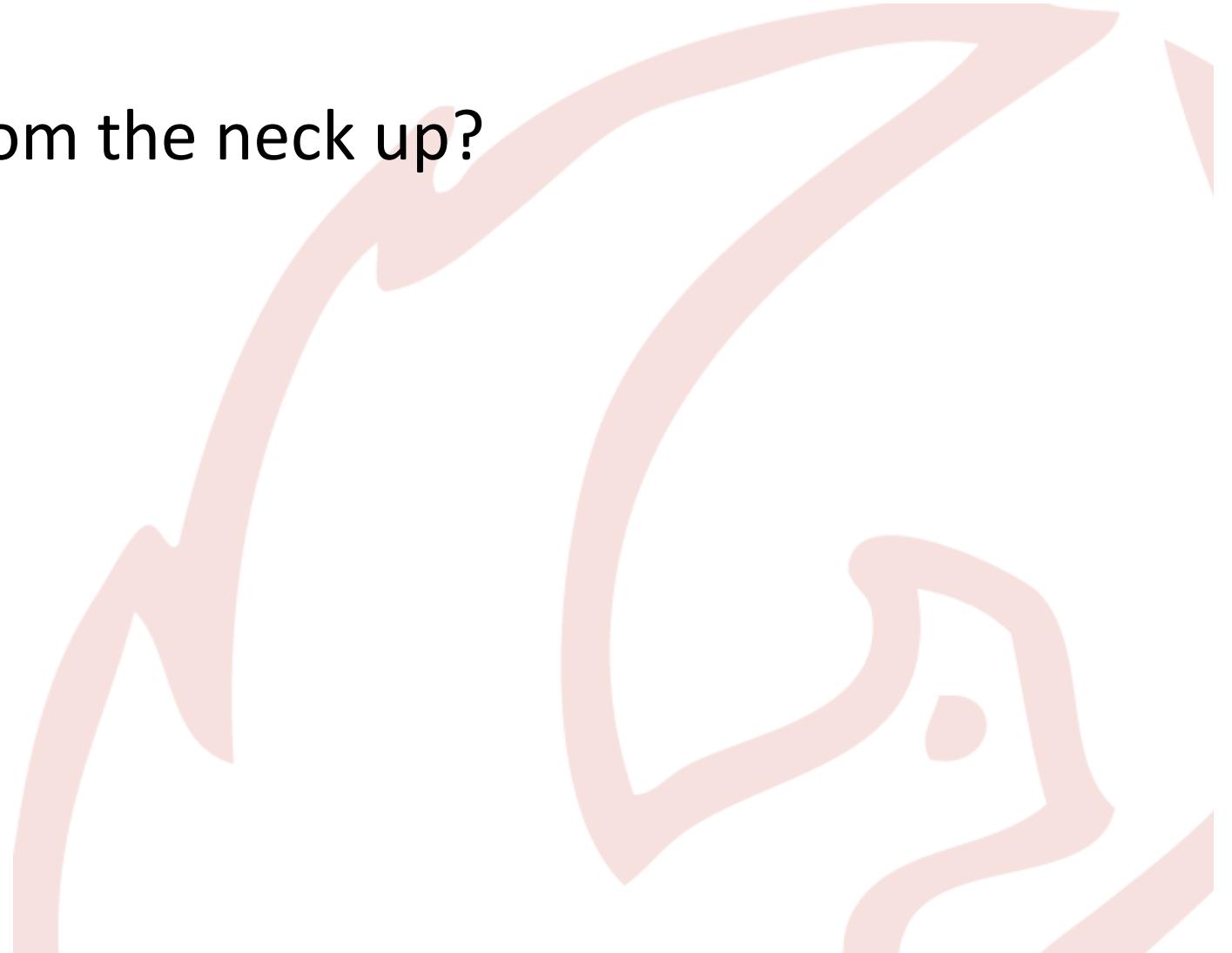
<http://1mind4research.org/about-one-mind>





How do we give a child a

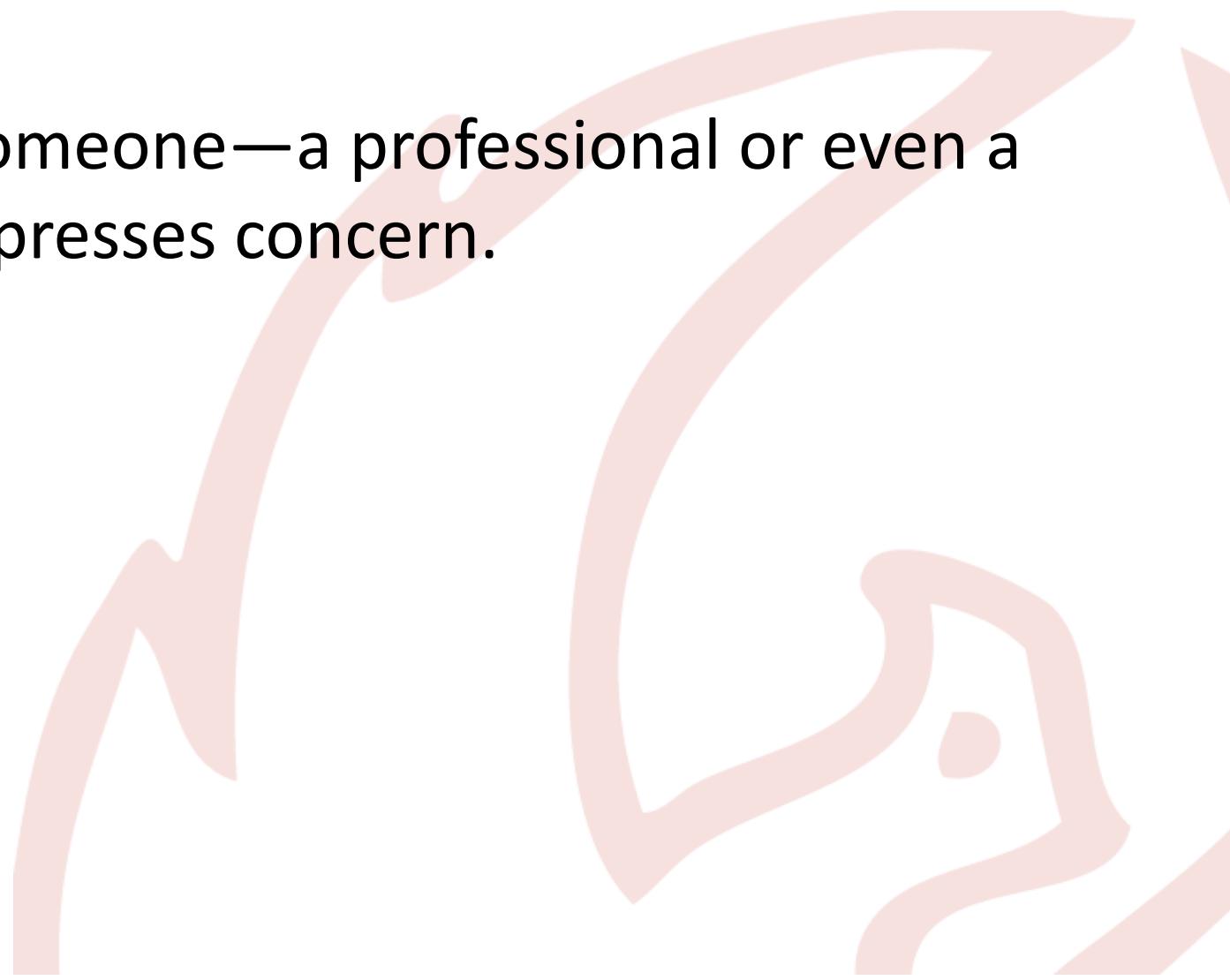
Check up from the neck up?



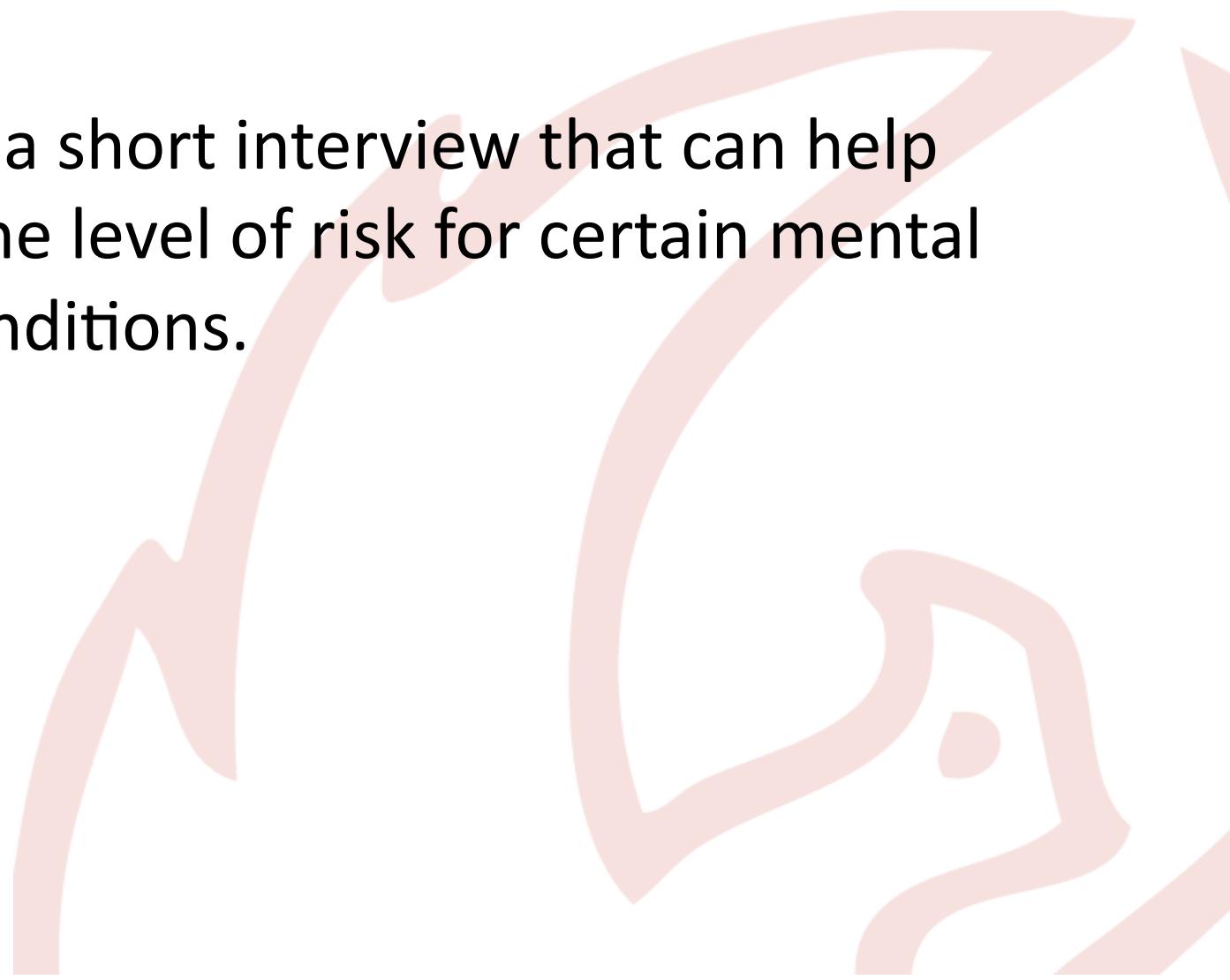
Process

Referral → Screening → Evaluation

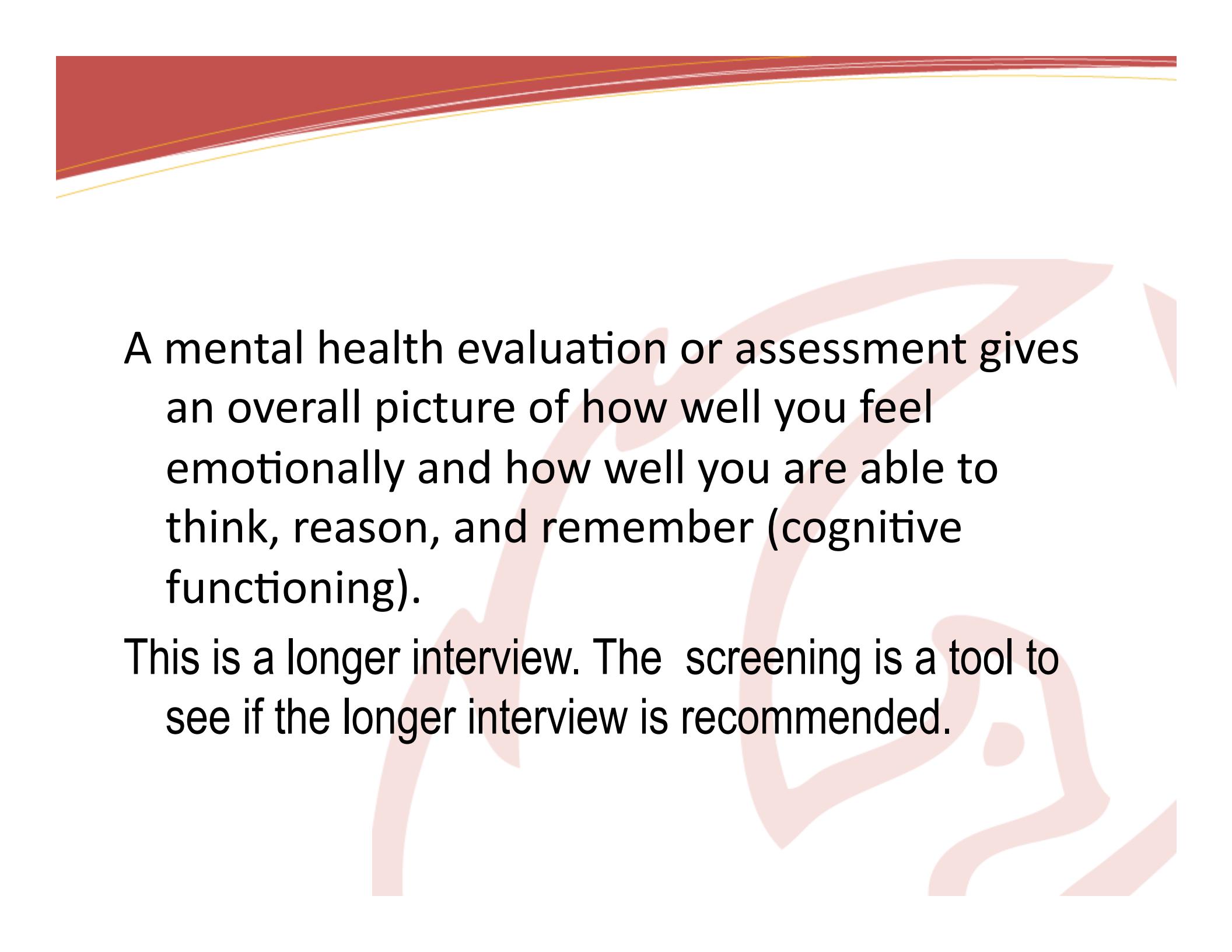
A mental health evaluation or assessment gives an overall picture of how well you feel emotionally and how well you are able to think, reason, and remember (cognitive functioning).)



Referral—someone—a professional or even a parent expresses concern.



Screening—a short interview that can help identify the level of risk for certain mental health conditions.



A mental health evaluation or assessment gives an overall picture of how well you feel emotionally and how well you are able to think, reason, and remember (cognitive functioning).

This is a longer interview. The screening is a tool to see if the longer interview is recommended.

Scenario #1

- Youth begins smoking.
- Parent concerned.
- Talks to school counselor.
- Talks to doctor.
- Parent is told, “It’s just what kids do. Be thankful s/he’s not using heroin.”



Scenario #2

- Youth begins smoking.
- Parent concerned.
- Talks to school counselor.
- Counselor chats w/student
- Counselor recommends a mental health screening.



Scenario #2 continued

- School counselor obtains written consent from parent to contact student's doctor.
- Expresses concern for mental health of student.
- School counselor recommends a screening tool and list of mental health resources.

Scenario #2 continued

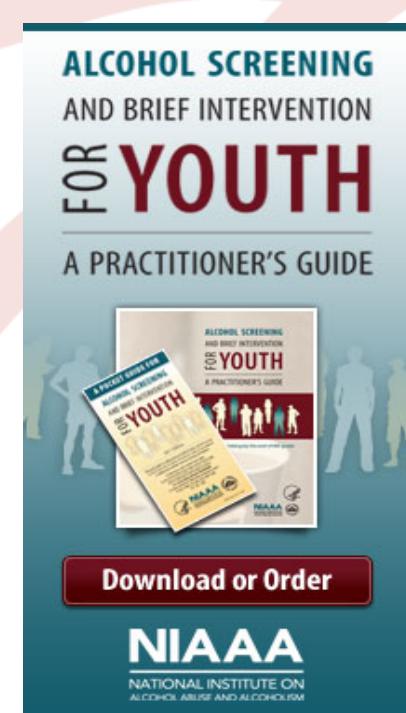
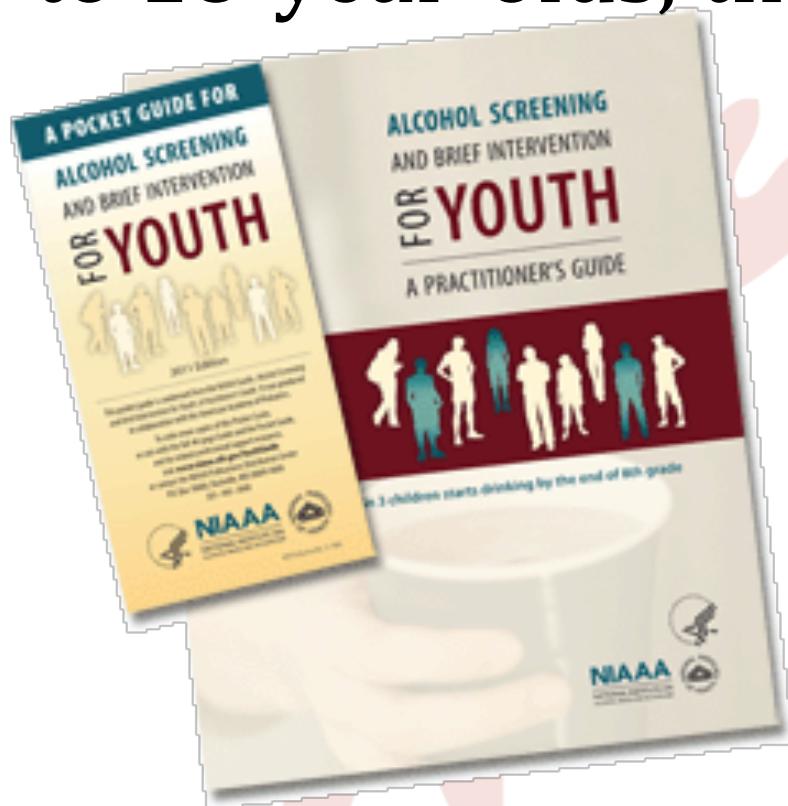
- Parent also contacts child's doctor and specifies "check up from the neck up" be part of a physical.
- Doctor discusses dangers of tobacco use with youth--
<http://healthland.time.com/2013/08/26/doctors-asked-to-counsel-teens-about-the-dangers-of-smoking/>
- Doctor recommends mental health support as indicated.

Be



- Many people still aren't ready to include "smoking" as an indication a youth needs help.
- School counselor/nurse may or may not be familiar w/Mental Health options in the area.
- Pediatricians may not know what tool to use or how to bill.

If you manage the health and well-being of 9- to 18-year-olds, this Guide is for you.



<http://www.niaaa.nih.gov/publications/clinical-guides-and-manuals/alcohol-screening-and-brief-intervention-youth>

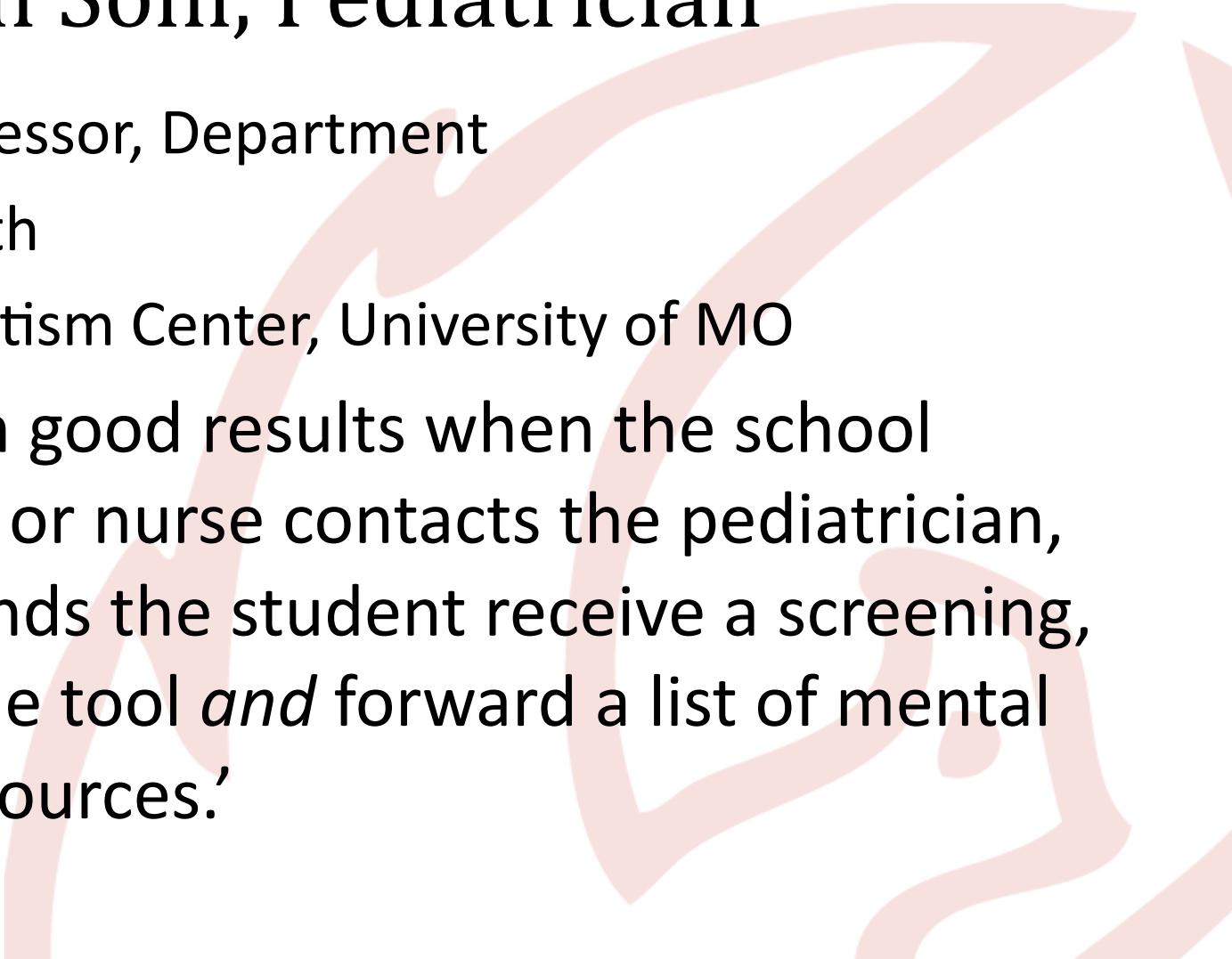


Dr. Kristin Sohl, Pediatrician

Assistant Professor, Department
of Child Health

Thompson Autism Center, University of MO

“We’ve seen good results when the school
counselor or nurse contacts the pediatrician,
recommends the student receive a screening,
suggest the tool *and* forward a list of mental
health resources.’



WHERE
THERE'S
SMOKE...

There's a good reason
for a check up
from the neck up—recommend
a mental health screening.



Discussion:

To whom would you refer a youth for a mental health screening in

- Your professional circles?
- Your community?

What are the obstacles?

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