

**62,007**

estimated number of tobacco users with a behavioral health condition in SD\*



**2.4%**

**1,500**

SD adult tobacco users with a behavioral health condition enrolled into SD QuitLine services.

## Reasons for Relapse



- 32.4%** reported "Stress"
- 13.1%** reported "Life Event"
- 10.4%** reported "Others Around Me Use"

### PHONE SERVICE



**972**  
Enrollees

Up to 12 phone coaching sessions, up to 12 weeks of Nicotine Replacement Therapy (NRT), Zyban or Chantix, and a Quit Guide

### KICKSTART KIT



**528**  
Enrollees

A two or four-week supply of NRT with a Quit Guide

The **SD QuitLine** offers a variety of options for quitting.

**Phone coaching** was the most popular option among adults with a behavioral health condition in 2022.

*If you are smoking a pack a day...  
Quitting will save you*

## Cost Savings



**\$292.50**  
in just **ONE**  
month!



**That's**



**Fuel**



**Food**



**Meds**



**Phone**



**Therapy**

you could pay for just by **QUITTING!**

**Smoking is Expensive!**

**What could YOU do with some extra cash?**

To enroll, visit [www.SDQuitLine.com/enroll](http://www.SDQuitLine.com/enroll) or call 1-866-SDQuits!

# Tobacco Users with a Behavioral Health Condition - 2022

## KEY ACTIONS FOR HEALTH PROFESSIONALS

***In South Dakota, one-third (34.6%) of adults with a behavioral health condition (BHC) use tobacco.***

When asked the type of tobacco they use, 25.1% of enrollees with a BHC reported e-cigarette use, 84.1% of enrollees reported cigarette use, and 18.4% reported use of other types of tobacco. Due to higher rates of tobacco use, adults with a BHC have an overall lower age of death, five years earlier than those without a BHC, often from tobacco-related diseases such as heart disease, cancer and lung disease. During a follow-up survey, SD Quitline participants enrolled in services are asked if they have made a serious quit attempt since the start of services (e.g., intentionally quit for at least 24 hours). Among those responding, 38.3% of participants with a BHC had made at least one serious quit attempt. Those who reported use of tobacco were asked why they were not able to quit or stay quit, 30.9% of tobacco users with a BHC reported daily stress being their reason for relapse. Reasons for relapse were similar between those who received medication and coaching services, and those who received medication only.

### The SD QuitLine offers a variety of options for **QUITTING!**

The **Phone Coaching Program** includes up to twelve telephone coaching sessions along with cessation medication and a Quit Guide.

The **Kickstart Kit** includes cessation medication only, as well as a Quit Guide.

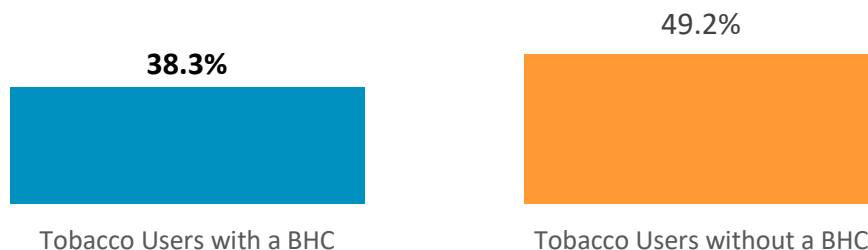
The **2QuitSD** program offers texting with a health coach and up to 8 weeks cessation medication and a Quit Guide.

The **Quit Guide** only, a self-directed cessation workbook, available for download or order on the SD QuitLine website.

Most enrollees with a BHC using the SD QuitLine enrolled themselves by phone. Only 4.1% were referred by healthcare professionals in 2022.

*When comparing quit rates, adults with a BHC stay quit at a rate of 38.3% compared to enrollees without a BHC at 49.2%.*

### SD QuitLine Quit Rate Comparisons 2021-2022



### ***TAKE ACTION TODAY!***

- **Take time to make Direct Referrals**  
Share patient/client information with the SD QuitLine to facilitate enrollment in cessation services. A referral can be made via fax, Electronic Health Record (EHR), or a warm transfers. Visit <https://quittobaccosd.com/quit-tobacco/healthcare-providers/referral-options>
- **Encourage enrollment in phone coaching services, either by phone OR SMS text message**  
Enroll patients in phone coaching services with the SD Quitline to deliver another support system to help them quit and stay quit. Phone coaching can help participants develop alternative coping skills as well as deliver another support system to reach out to when daily stressors occur.