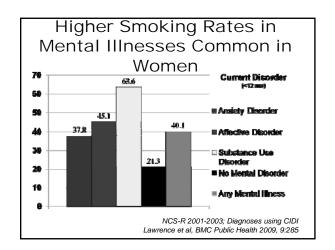
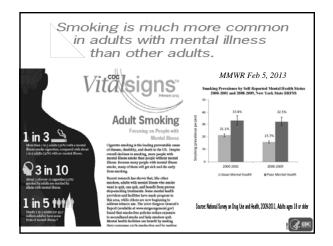
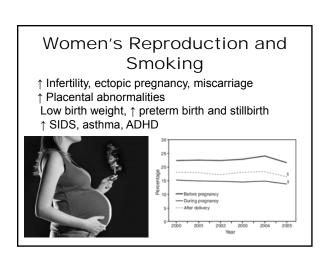
Women and Mental Health: What is the Connection to Smoking?

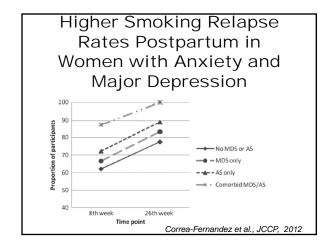


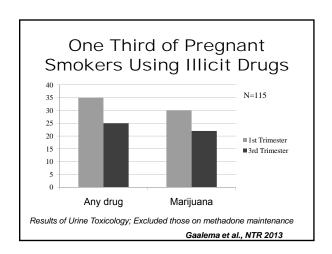
Jill Williams, MD
Professor of Psychiatry and Director of the
Division of Addiction Psychiatry
UMDNJ-Robert Wood Johnson Medical School
UMDNJ-School of Public Health

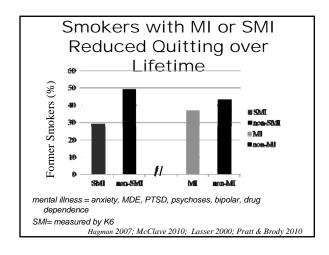


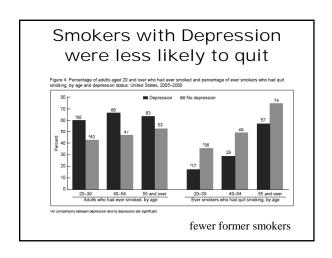


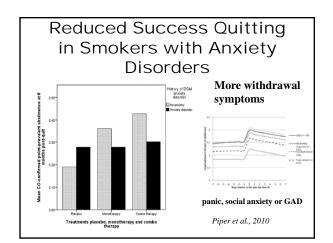










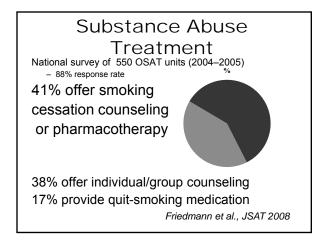


Reduced Access to Tobacco Treatment in Behavioral Health Settings

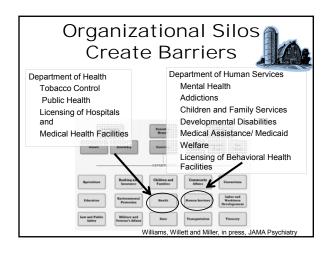
- Nicotine dependence documented in 2% of mental health records
- Less than 2% of patients seeing a psychiatrist received treatment for smoking

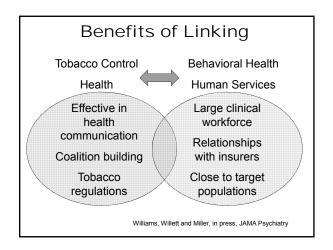


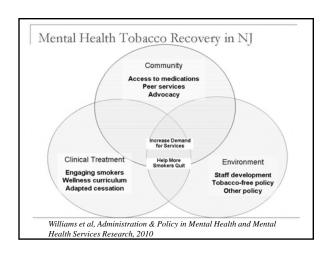
Peterson 2003; Montoya 2005



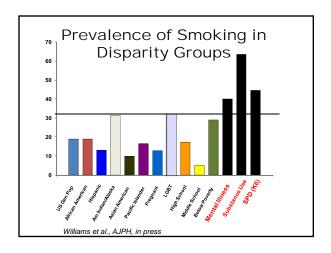












Why Designate Disparity?

- ↑ Access to scientific funding
- ↑ Access to treatment resources
- · Problem will worsen over time
- Disparities demand change- paradigm shift

The combined effects of programs universally available to everyone and programs

targeted to communities with

special needs are essential to reduce
disparities.

Williams et al., AJPH, in press





Next Steps

- Reductions in Women's Smoking will Require a Improved Understanding and Awareness of Mental Health Issues
- Smokers with Mental Illness or Addictions Comorbidity Should be Designated a Tobacco Use Disparity Group