

Sept 18, 2020

Honorable Alex Azar Secretary Department of Health and Human Services 200 Independence Avenue, SW Washington, DC 20201

Re: Proposed Project: National Substance Use and Mental Health Services Survey (N-SUMHSS) (OMB No. 0930-)

Dear Secretary Azar:

The American Lung Association appreciates the opportunity to comment on the Proposed Project: National Substance Use and Mental Health Services Survey (N-SUMHSS) (OMB No. 0930-).

The American Lung Association is the oldest voluntary public health organization in the United States, representing the 36 million Americans living with lung disease, including asthma, lung cancer and COPD. The Lung Association also fights for a tobacco-free society and to eliminate all tobacco related deaths and disease. Paramount to these goals is promoting access to guidelines-based cessation treatments and helping smokers quit.

According to the U.S. Surgeon General, almost half a million Americans die each year from a tobacco related illness. While the smoking rate among the general population is falling, great disparities in tobacco use still exist. The disparity is especially pronounced in populations with behavioral health conditions. According to the Kessler Scale, people with serious physiological distress smoke at a rate of 31.6%, compared to the general population at 13.7%. Studies estimate that people with mental illness who smoke die on average 25 years prematurely due to smoking related illnesses, not their mental health diagnosis. It is critical that all smokers get the help they need to quit, including those with a mental illness or behavioral health diagnosis.

The National Mental Health Services Survey (N-MHSS) and the National Survey of Substance Abuse Treatment Services (N-SSATS) provide key data to assess what tobacco cessation treatment is offered to tobacco users and what policies are in place to help them quit. The data also allows progress in tobacco cessation treatment in behavioral health and substance abuse treatment facilities; and helps provide a base to create evidence-based policies. The Lung Association encourages the Substance Abuse and Mental Health Services Administration (SAMSHA) to continue to collect these data and publish them. Provided all the questions from both the N-MHSS and N-SSATS are retained for the N-SUMHSS, the Lung Association is supportive of moving to a single survey to collect these data.

However, there are key updates to some of the tobacco-related questions in the surveys that can be made to better reflect the current tobacco landscape. Modifying some of the questions will allow for more complete data. It will also better allow for policies and practices that encourage all tobacco users to quit using all tobacco products to be implemented.

In the N-SSATS survey, question 35 in section C asks about the facilities' smoking policies for clients. The Lung Association encourages SAMSHA to modify the question to ask about facilities' smokefree policies, as it applies to everyone, including clients, staff, visitors and others.

The American Lung Association also recognizes the evolving landscape of tobacco products and the need to ensure that behavioral health and substance abuse treatment facilities are tobaccofree. We encourage SAMSHA to add an additional question to the survey to capture the facilities' tobacco-free policy. These questions should be inclusive of all tobacco products, including ecigarettes, as they have been designated tobacco products following the deeming process undertaken by the Center for Tobacco Products of the Food and Drug Administration (FDA). It is important that the tobacco-free policy be inclusive of all tobacco products, including ecigarettes. Data show that over half of adult ecigarettes users are duel-users, meaning they use both ecigarettes and another tobacco product. To help all tobacco users end their addiction, it is important to have tobacco-free polices that are inclusive of all tobacco products.

The current N-MHSS survey, question A11 asks about services and practices, including tobacco cessation treatments, that are available at behavioral health and substance abuse treatment facilities. Responses 23 and 24 ask about specific cessation treatment offerings. The Lung Association encourages SAMSHA provide examples of the nicotine replacement therapy (NRT) in the new N-SUMHSS survey. Examples would include listing out the five FDA-approved medications: the NRT gum, NRT patch, NRT lozenge, NRT nasal spray and NRT inhaler. Additionally, we encourage an edit to number 24, "non-nicotine smoking/tobacco cessation medications (by prescription)." We encourage SAMSHA to replace the "by prescription" with the examples of the non-NRT medications (bupropion and varenicline) in the N-SUMHSS.

The data collected by SAMSHA assist tobacco control professionals with helping a population experiencing disparities in tobacco use quit smoking and using all tobacco products. It is important for continued collaboration between Substance Abuse Treatment facilities and public health professionals, especially as they work to address tobacco use in the behavioral health population. Thank you for the opportunity to provide comments.

Sincerely,

Harold P. Wimmer

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National President and CEO

¹ US Department of Health and Human Services, The Health Consequences of Smoking: 50 Years of Progress: a Report of the Surgeon General, 2014 Atlanta, GA US Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health

² Creamer MR, Wang TW, Babb S, et al. Tobacco Product Use and Cessation Indicators Among Adults — United States, 2018. MMWR Morb Mortal Wkly Rep 2019;68:1013–1019. DOI: http://dx.doi.org/10.15585/mmwr.mm6845a2external icon

³ Prochaska JJ, Das S, Young-Wolff KC. Smoking, Mental Illness, and Public Health. Annual review of public health. 2017;38:165–185. doi:10.1146/annurev-publhealth-031816-044618.

⁴ QuickStats: Cigarette Smoking Status Among Current Adult E-cigarette Users, by Age Group — National Health Interview Survey, United States, 2015. MMWR Morb Mortal Wkly Rep 2016;65:1177. DOI: http://dx.doi.org/10.15585/mmwr.mm6542a7external icon