

[Name of Organization]

Effective Date:	Number:
Approved By:	Title:

Trauma-Informed Approach Tobacco Screening, Counseling and Cessation

PURPOSE

To support staff in engaging clients in empowering, culturally appropriate and trauma-informed conversations about the impacts of tobacco use and exposure to secondhand smoke, and to provide support and encouragement toward reducing dependence on tobacco products.

BACKGROUND

Tobacco use and exposure to secondhand smoke causes harm to nearly every part of the human body. While most people know that tobacco use is harmful, knowledge alone is often not the main barrier to quitting. The history contributing to each person's tobacco use, including past quit attempts, is unique; therefore, there is no single pathway to quitting that will work for everyone.

We know that empathetic, consistent conversations between healthcare providers and clients about tobacco use can increase the likelihood for quitting, reduce use, or reduce exposure to secondhand smoke. Due to the numerous harms of tobacco use, engaging in conversations about any tobacco use and eliminating exposure to secondhand smoke is crucial to providing the best care possible. It is essential that these conversations are prioritized along with offering follow-up support such as behavioral health counseling, pharmacological assistance, and referrals to the Oregon Tobacco Quitline.

[Name of Organization] recognizes the widespread impact of trauma on the community it serves and the role it can play in tobacco dependency. Research has shown that people who

have experienced trauma are twice as likely to smoke, and smoke at a higher rate^{1,2}. Understanding the part trauma can play in why a person smokes, can help the practitioner in assisting with cessation. Trauma informed care (TIC) is an approach based on knowledge of the impact of trauma, aimed at ensuring that environments and services are appropriate for those who have experienced trauma. **[Name of Organization]** believes that adopting a trauma-informed approach will enhance service delivery to the people we serve and provide needed supports for staff.

Trauma-informed organizations (TIOs) realize the widespread impact of trauma and understand potential paths for recovery by:

- Educating staff regarding trauma’s pervasiveness and behaviors that may be coping strategies or defense mechanisms.
- Ensuring that staff understand the historical and structural trauma faced by many in our community and have the skills to mitigate the impacts of their trauma.
- Promoting resiliency, health and wellness for individuals, families and vulnerable populations who have experienced trauma.

TIOs recognize the signs and symptoms of trauma in clients, families, staff and others involved with the system by training staff to recognize reactions to trauma may take many forms and symptoms may be either immediate or delayed.

TIOs respond by fully integrating knowledge about trauma into policies, procedures and practices by:

- Creating an expectation and standard to provide support and treatment in a trauma informed manner.
- Supporting staff to integrate knowledge about trauma into policies, procedures and practices.

TIOs resist re-traumatizing by continuously monitoring and adjusting practices to reduce the occurrence of trauma; encouraging a focus on equity; and enhancing resilience of the workforce, individuals and the community.

POLICY

¹ Farris SG, Zvolensky MJ, Beckham JC, Vujanovic AA, Schmidt NB. Trauma exposure and cigarette smoking: the impact of negative affect and affect-regulatory smoking motives. *J Addict Dis.* 2014;33(4):354–365. doi:10.1080/10550887.2014.969622

² Roberts ME, Fuemmeler BF, McClernon FJ, Beckham JC. Association between trauma exposure and smoking in a population-based sample of young adults. *J Adolesc Health.* 2008;42(3):266–274. doi:10.1016/j.jadohealth.2007.08.029

It is the policy of **[Name of Organization]** to incorporate the following culturally appropriate TIC principles and practices when providing care for tobacco dependency:

1. **Safety:** Staff and the people we serve feel physically and emotionally safe.
2. **Trustworthiness and Transparency:** Decisions are conducted with transparency in order to build and maintain trust with clients and family members. Providers demonstrate support in the slow process of change and healing.
3. **Collaboration, Mutuality and Peer Support:** **[Name of Organization]** recognizes that everyone has a role to play in a trauma-informed approach. Peer support and self-help are key elements for establishing safety and hope, building trust, enhancing collaboration and utilizing lived experiences to promote recovery and healing. Eliminate controls, orders or punishment. Recognize smoking is a coping mechanism and assist clients in identifying their own strengths and new methods of coping.
4. **Empowerment, Voice and Choice:** **[Name of Organization]** fosters a belief in prioritizing the people served, resilience, and the ability of individuals, to heal from trauma and avoid re-traumatization. Maximize choice and control by helping identify alternative adaptations that are empowering.
5. **Cultural, Historical and Gender Issues:** **[Name of Organization]** actively moves past cultural stereotypes and biases; leverages the healing value of traditional cultural connections; incorporates policies, protocols and processes that are responsive to the racial, ethnic and cultural needs of individuals served; and recognizes and addresses historical trauma.

In addition to the above, providers will:

- Regularly and consistently ask about current tobacco use and exposure to secondhand smoke.
- If any interest or motivation toward reducing or quitting tobacco is expressed, staff will offer, arrange, or refer to someone who may provide: Counseling or referrals to behavioral treatment/cessation counseling (if in-person counseling is unavailable, refer to the Oregon Tobacco Quitline).
- Medications to address nicotine dependence.
- Consistent follow-up at subsequent visits, to provide support, encouragement toward quitting, and additional referrals or medications that may be helpful.

As evidence emerges on the possible dangers as well as harm-reduction benefits of e-cigarette/inhalant delivery devices/vaping products, policies and guidance for addressing these products will be updated to reflect best available evidence.

Regular reviews of this policy will take place to ensure that it reflects current understanding of trauma-informed, culturally appropriate ways to address tobacco and nicotine-dependence.

DEFINITIONS

Trauma: Trauma is the unique individual experience of an event or enduring conditions in which a person's ability to integrate his or her emotional experience is overwhelmed. The person experiences, either objectively or subjectively, a threat to his or her psychological safety, bodily integrity, life or the safety of a caregiver, or a family member.

Trauma-Informed Care: A program, organization or system that is trauma-informed realizes the widespread impact of trauma and understands potential paths for healing; recognizes the signs and symptoms of trauma in staff, clients and others involved in the system; and responds by fully integrating knowledge about trauma into policies, procedures, practices and settings.

RESOURCES/REFERENCES

[SAMHSA's Strategic Initiative: SAMHSA's Concept of Trauma and Guidance for a Trauma Informed Approach, 2014.](#)

[OHA Addictions and Mental Health Division Trauma Informed Services Policy AMH-060-1607 Version 1, 2015.](#)

[Adverse Childhood Experiences \(ACEs\) Study](#)

[Building Resiliency Preventing Adverse Childhood Experiences \(ACEs\)](#)

[Treating Tobacco Use and Dependence: 2008 Update](#)

ORIGINATED:

Dates:

Next Review Date: