



Committee Secretary
Senate Select Committee on Mental Health
Department of the Senate
Parliament House
Canberra ACT 2600

MENTAL HEALTH

I speak without direct experience of the provision of mental health services or with any close experience of the mentally ill.

From observation and from my readings it would appear that those with a mental illness are more likely to be persuaded to smoke, especially when it is offered as a means of overcoming stress and personal difficulties, and have greater difficulty in quitting, and are more likely to relapse when times are difficult or when offered a cigarette and a friendly chat by a carer. There are now special techniques and medications aimed to overcome the addiction.

Also from observation it would seem that a high proportion of mental care nurses take to smoking when training, and continue to smoke. For nurses it would appear that smoking eases the stress of their work and enables friendly contact with patients. From information it would seem that in hospitals and other institutions a smoke room is available to mental patients. Mental patients are unlikely to be confined to their bed and are allowed opportunities to go outside for a smoke.

Smoking can lead to other drug addictions, by patients and by carers.

Mental patients should not be prevented from smoking. Smoking should never be advised or encouraged, nor should smoking opportunities be provided, or a bad example be set. Every assistance should be made, by experienced staff and others, to help mental patients to overcome their addiction. Training should be made available to carers and support given to studies into the link between mental health and tobacco addiction and of means of overcoming the addiction.

Any measure that reduces smoking, the promotion of smoking and the opportunities to smoke in the general community will be of great benefit to mental patients

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