

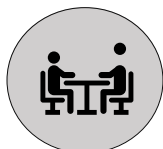
Tobacco Resources for Providers Who Work with Pregnant and Postpartum Individuals



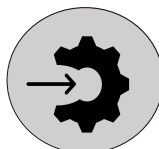
Around 80-95% of pregnant individuals who are seeking treatment for alcohol and substance use also use tobacco products. Smoking prevalence rates may be up to 4 times higher among pregnant individuals with substance use disorders (SUD) than those without SUD. Tobacco use and secondhand smoke exposure during pregnancy are the leading preventable causes for a variety of adverse pregnancy outcomes.

Co-treatment of tobacco use in pregnant individuals with SUD not only reduces risk of premature birth, low birth weight, miscarriage, developmental delays, and birth defects, but also enhances recovery outcomes for all substances.

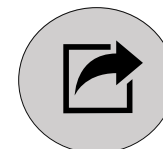
How to Treat Tobacco Use in Pregnant Individuals with SUD:



Provide brief counseling and motivational interventions



Integrate tobacco treatment into behavioral health treatment



Refer clients to tobacco treatment extenders and support

Tobacco Treatment Extenders

Tobacco treatment extenders provide support to reinforce clinical interventions and make them more efficient.

1. Wisconsin Tobacco Quit Line (1-800-QUIT-NOW)

The Wisconsin Tobacco Quit Line welcomes all pregnant individuals and new parents who want to quit and don't want to expose their kids to secondhand smoke.

Participants receive tailored, non-judgmental coaching to create a quit plan that is right for them. Quit coaches will discuss the importance of staying smokefree for the baby, how to deal with stress, and the role of family and friends. Contact your Regional Outreach Specialist to learn more about Quit Line referral options.



TIP:

Certified DHS 75 services are required to initiate interim services or notify the department for priority populations, including pregnant individuals, when a waitlist exists. Initiate interim services by directly referring individuals to these tobacco treatment extenders.

2. First Breath

First Breath is a free, evidence-based program that helps individuals make positive changes to their tobacco, alcohol, and substance use during pregnancy and beyond. Participants in First Breath can receive one-on-one counseling with a health educator, support to develop an individualized action plan, and text message encouragement. Complete [the training](#) to become a First Breath Provider and be ready to directly refer clients for support services.



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Looking for more information on integrating tobacco treatment into clinical services? Visit helpusquit.org or contact your Regional Outreach Specialist (cliniciantraining.org)

For more information on WI Administrative Code Chapter DHS 75, visit: <https://www.dhs.wisconsin.gov/rules/dhs75-implementation.htm>



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WiNTiP
Wisconsin Nicotine Treatment
Integration Project