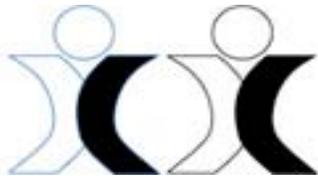


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## American Psychiatric Association Honors CHOICES

By Martha Dwyer

The CHOICES program was honored at the annual conference of the American Psychiatric Association's 61st Institute on Psychiatric Services (IPS) on October 8, 2009 in New York City. CHOICES received the Psychiatric Services Silver Achievement Award in recognition of its innovative approach in

addressing tobacco in the mental health community. The Achievement Awards are presented to innovative programs that deliver services to the mentally ill or disabled, have overcome obstacles, and can serve as models for other programs.

In presenting the Silver Award, the APA noted CHOICES' unique

peer-to-peer approach to promoting tobacco cessation. In the October issue of its journal, *Psychiatric Services*, the APA said, "The CHOICES program exemplifies many aspects of a successful wellness and recovery initiative. For example, it targets a group with a vital health care need; seeks to reduce tobacco's harm in a vulnerable group; focuses its efforts in the community, which best accommodates the target population; employs peers to reduce educational and cultural barriers; and develops successful partnerships with key stakeholders for sustainability."



Left to right, Jill Williams, MD, Deidre Stenard & Martha Dwyer.

# CHOICES and a CHOICE

By Robert Craven, CTTs

CHOICES is a peer to peer network to provide mental health consumers with education and counseling about the consequences of smoking and tobacco products.

People with severe mental illness die, on the average, 25 years earlier than the general population. 50-90% of mental-health consumers are current smokers- rates that are two to four times greater than the general population. Nearly half of all cigarettes consumed in the United States are by individuals with current mental illness.

Mental health consumers in New Jersey spend about 1/3<sup>rd</sup> of their monthly disability check on cigarettes and other tobacco products. When they are approached with the thought of quitting their smoking addiction, their resistance can be more severe than the average traditional smokers.

At OASIS Partial Care, one aspect of approaching the smoking addiction of the mental health consumer is to propose the option of a *choice*. For the first time in their lives consumers are given an opportunity to consider making a personal choice in their lives. For many of those classified with severe, chronic, mental illness, the idea of having a personal choice is unheard of, never thought about, never considered, not imagined, overwhelming. Even a short time in a large mental hospital, let alone 20-

30 years, one can lose all appreciation of themselves. No personal choices enter into the equation: from the first experience of bizarre symptoms, losing control, being admitted, loss of personal freedom, told when to get up, go to bed, what to eat, what to watch on the TV, attacked by other patients, ignored by staff. "Ignored, invisible, insignificant. I told myself I don't matter." Even a discharge is made by others; hospital staff, family, boarding home staff.

For the general population, smoking is an escape, a friendship, a consort, an identity. For the mental health consumer, it was frequently a way to get off the ward, friendship, sharing, a way of passing bored time. There was no responsibility, no accountability, no demands, no expectation. Now presented with the thought of actually making a decision concerning one's own health, one's own life responsibility, choosing what your values are, can be frightening, liberating, maturing, awaked.

The CHOICES counselor can say "Yes, I was discharged. Yes, I am working, but also I have made a personal choice about the quality of my life, how I plan to take care of myself." From telling oneself that you don't matter to considering the idea that you are special, someone who has value, who is unique, has control, can be an interesting

and suggestive idea. It can move someone from the pre-contemplation to the contemplation state.

If a consumer can ask, "In what ways do I neglect myself? What can I do today to make a step toward taking better care of myself?" and then say, "I can do it!" a powerful motivator can be awakened. To believe in oneself can be an exciting, fearful, liberating adventure from the usual.

The mental health consumer deserves to have this opportunity.

*Robert Craven is a Certified Tobacco Treatment Specialist, Case Manager and Vocational Coordinator at the OASIS Partial Care Program of Family Services of Burlington County in Hammonton, New Jersey.*

## Comic by Bill Newbold



## When a Quitter Wins

*Interview by Robert Holloway, Case Manager  
Family Services of Burlington County, Hammonton, NJ*



We all make choices every day about our health; some of us get caught up in addictive behaviors so quickly that we lose sight of the associated consequences. Others gain new insight into how we operate and turn an unhealthy personal habit into a productive means of reaching out to our afflicted peers. It was a group of those latter individuals presenting a CHOICES seminar that elicited change in one consumer at the Family Service MICA program.

If you asked this featured consumer a half year ago about his nicotine addiction, he would have said he was a 28 year veteran pack-a-day Marlboro Man and a person

fond of his pipe. But following his first time exposure to CHOICES, hosted by Family Service of Burlington County, he is literally strumming along to a different rhythm.

“Picking up the guitar gave my hands something to do whenever everyone else was going off to smoke,” he said, “I feel bad now that they are making the unhealthy choice to smoke.” It was health that prompted him to quit, “I was down at the gym and I started getting chest pains.” He had tried to quit ten times before this, but this was the impetus he needed to finally make the commitment.

Like any addiction he knows the road ahead is hard, but when he estimated that he

had spent over \$30,000 dollars on nicotine products in his life, he laughed, “I would have much rather have had that money to spend on a new saxophone, a nice pair of shoes, and a healthy bank account.”

The ringing sound of the consumer’s guitar, just like the voices of the CHOICES representatives, will serve as a reminder to all who hear them that there are alternatives to smoking; that long-term physical and mental addictions can be beaten and replaced with self-improving behavior, and a new perspective of one’s latent talents and proclivities.

## Yoga Can Help—If you give it a try !

By Yasmin Halim

A topic that comes up a lot with me and other mental health consumers is too much unstructured time and being bored. Whether you are struggling with depression and anxiety, or trying to quit smoking, boredom is your enemy. I find that when I am unproductive and bored, it’s hard to stay motivated and keep the negative thoughts in my head from taking over. I was going to write up a whole list of things a person can do instead of smoking, but I thought it might be better to write about one

option.

I decided to pick Yoga because I recently started classes at the local YMCA in my community. I haven’t exercised in the past year so I am not athletic at all. One of the biggest misconceptions of Yoga is that you have to be super fit and bendy like a pretzel to do it. Sandy, a yoga instructor at the YMCA, told me that yoga is not competitive in ANY way. Rather, it is a very individualized practice in which you start off slowly and build up. Everyone has different limitations.

She has seen overweight

people who are very flexible and sometimes a fit person has tight ligaments and is not flexible. In general, as you practice yoga routinely, the ligaments start to loosen up and you become more flexible. Yoga is like a journey with no end. You can enjoy every class for what it is and one day you will realize that you can do things you’ve never done before. If it seems hard or confusing at first, just keep going back and your body will respond.

(continued on Page 4)

(Yoga—continued)

Sandy is not a medical professional. The advice she gave me are her own opinions based on 35 years of experience in Yoga practice and 10 years of teaching it. She started practicing yoga when she was a teenager by watching it on TV and using a towel as a yoga mat. Sandy was then addicted to cigarettes for 15 years, smoking one pack of Winston Lights per day. It started out innocently enough by holding cigarettes for one of her sorority sisters in college and eventually picking up the habit herself. Her initial motivation to quit sparked when her mom died of pancreatic cancer and her son developed asthma. Her husband also smoked. The hardest part of quitting for her was the habits she created around smoking like the “end of the meal” cigarette, when the phone rang, and with coffee. Switching to tea helped with the coffee trigger. The emotional connection was also very hard. Cigarettes used to quiet her mind. Now yoga quiets her mind to help with the urges. Sandy told me that practicing yoga teaches you how to breathe properly with your diaphragm, how to control your breath, and that it can aid in clearing out the lungs after you quit smoking.

When you feel tension you can use different breathing techniques, called pranayama, as relaxation techniques for edginess during and after quitting smoking. When you first start yoga, Sandy recommends that you don't stress yourself trying to match

your breath with your movement. First, stay focused on learning the postures, asanas. Over time, you will understand how to match your breathing pattern to the movement. When you get to the point that you can match breath to movement, it guides you through the movement without putting strain on your body, your brain quiets down, and you can focus more internally.

In addition to relaxation and flexibility, Yoga has numerous benefits. Yoga increases the strength of your muscles by using the weight of your own body. You become aware of sensations and parts of your body you usually are not aware of. Some poses you do in yoga require balance. I like to pick a spot on the floor somewhere in front of me and stare at it and that helps me balance better. Doing things like this require concentration so yoga helps you concentrate and focus on doing one task when your brain wants jump all over the place like a monkey in a tree. Some people even lose weight when they do yoga because it makes them feel calmer so they do less emotional eating. Sandy said that the first time she quit smoking she joined Weight Watchers and began dieting to prevent herself from gaining weight after quitting smoking. On her next quit attempt, she started her diet and exercise routine (including Yoga) before starting her quit attempt. It made her metabolism stronger and she did not gain as much weight as the first time.

If you don't want to take a full Yoga class but still want to do some yoga, Sandy suggests you can do 3 to 5 rounds of Sun Salutations in the morning or evening. You can do them fast for an energizing cardiovascular workout or slow for more stretching. A “sun salutation” is a series of poses that flow one into the other and uses every major muscle group. It gets the blood moving and the oxygen flowing. There are some less costly alternatives to taking a yoga class at a yoga studio or health club. You can follow along with a yoga program on TV, upload a free video from your home computer (“Google” Yoga for websites or try [yogajournal.com](http://yogajournal.com)), borrow a book, video, or DVD on Yoga from the library. You can even ask around at your program if anyone knows some yoga poses they can show you. There may be a low cost class in your area: at the high school, local community center, or the library. I once found a free class through MeetUp.com.

If you like this article or decide to give Yoga a try after reading this article, I would love to hear from you. You can call or write to us at CHOICES. You can even write an article about your experience with Yoga or any other activity you decide to take up before, during or after a quit smoking attempt in your quest to become smoke free.





# How Much does Smoking Cost You?

By Deidre Stenard

That was it. My smoking had gotten the best of me, and it was bad enough that I really wanted to quit. I was a 3 pack-a-day smoker and I had a horrible cough and my lungs and my stomach hurt, I smelled like cigarettes, my clothes smelled, and I was going into bankruptcy trying to pay for cigarettes. I spent, on average, \$320 per month on cigarettes.

Over the years, I smoked more and more, and with each life situation, I turned to cigarettes to relieve the strain. The last few years of my smoking, I was up to 3 packs a day. I would start each day by chain smoking for a couple of hours with a couple of cups of coffee. I

smoked 100s and inhaled deeply. A pack of cigarettes would not last long. I could smoke a full cigarette in a couple of minutes, then light another one as soon as I was done.

I felt tired after all that smoking and didn't feel like doing anything, just going back to sleep. I was honest with myself and decided that it was time to quit smoking and that I was miserable. I got in touch with the Tobacco Dependence Program in New Brunswick. A friend had given me their number. I was ready to stop.

The doctor at the Tobacco Dependence Program gave me a prescription for the patch and the inhaler and I stopped smoking for 40 days. I went back to

smoking after that, but tried 7 more times, and I've now been off of cigarettes for over 2 years. This last time quitting smoking, I had to use the patch, the inhaler, nose spray, and gum when I didn't have nose spray. Over time, I cut down my use of the nicotine replacement therapy.

I've saved \$8200 since I quit smoking, and quitting has been good for my health as well as my mental health. I was stuck in a depression when I smoked and I'm feeling a lot better and healthier now that I've stopped. I've bought things with the money that I've saved and I've given myself an instant pay raise by stopping.

If I can do it as a 3 pack-a-day smoker, almost anyone can do it.



CHOICES received a \$5,000 grant from the American Medical Association's Foundation Fund for Better Health. The Fund for Better

## Grant from the American Medical Association

Health awards grants for grassroots public health projects that target the issue of healthy lifestyles in communities across the United States. This year's focus was on programs that address: nutrition and physical fitness; alcohol,

drug and smoking; and violence prevention. Due to rising printing and postage costs, this grant award will allow the CHOICES program to continue to mail our newsletters to our readers who do not have access to email.

## The Best of Both Worlds

By Trish Dooley

As part of the team in the Division of Addiction Psychiatry at RWJMS, I have had an opportunity to focus my work as a counselor on clinical trials designed to treat smokers with serious mental illness. Through working under the direction of Drs. Jill Williams and Marc Steinberg, I have had the opportunity to combine my love of clinical work with staying on the cutting edge of innovative treatments designed specifically for smokers with serious mental illness. For me, this has been the best of both worlds. I can say without hesitation that my work in the department during the past six years has been the most rewarding of my career. It is very rewarding to see smokers begin to believe in themselves and their ability to quit. I have found that one of the most difficult things to cope with is the sense of loss that goes along with giving up cigarettes. It is like giving up a good friend, a friend that has been there through the happy times, the sad times, the stressful times, essentially all the time. Through personalized feedback detailing the financial, medical, and social consequences of smoking, my patients are often able to recognize that it really is a love-hate relationship! The work I do is to try to help with developing other ways to cope during these difficult times, through a combination of

Nicotine Replacement Therapy/ Medication and Counseling.

I have been fortunate enough to join the CHOICES team on several of their site visits, and have enjoyed seeing first hand the impact that their presentations have had on patients and staff. The presentations provide a wealth of education, as well as personal stories and an opportunity for audience participation. It is my pleasure to contribute to this newsletter, as I see the work they have been doing for the past five years to be extremely inspiring.

Our brand new study is designed to help smokers with schizophrenia quit smoking with a combination of nicotine nasal spray and counseling. If you or someone you know might be interested in participating in this study, please contact us at (732) 235-4600. We will be happy to answer any questions you may have about the study. Counseling and Study medication are free and eligible participants can earn up to \$390 for attending all sessions.

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## CHOICES comes to Laurel House

By A.J. Singer

Laurel House was visited by CHOICES, an anti-smoking campaign, on Wednesday afternoon, June 17<sup>th</sup>.

CHOICES is aligned with the UMDNJ\RWJMS in New Brunswick, and the group's

primary function is to educate consumers and clubhouses around the state on the dangers of tobacco use and to offer alternative means to quit for good.

The group warned us of the addictive and harmful additives along with nicotine that goes into every purchase of a pack of cigarettes or tobacco products. They demonstrated how nicotine abuse is a factor in many diseases of the body, primarily several forms of cancer. We were made aware that substitutions are available to help quit smoking, such as nicotine patches or gum, inhalers, and such prescription medications as Zyban and Chantix.

I am on Chantix and am involved in a 12-week study at the UMDNJ\RWJMS. For me Chantix is a good aid that deals with my cravings aptly and provides virtually no side-effects.

At the end of the presentation, several Laurel House members wanted more information from CHOICES and were on the initial path to ending tobacco use.

*Laurel House Middlesex is a structured, welcoming place where people with ongoing mental illness come to gain support, learn to work and rebuild their lives. You can visit their website at <http://www.laurelhousemiddlesex.org>*



## A Happy Note

By Wayne Holland

I am happy because I reached the seven year mark of not smoking. Although I am happy, my next big goal is the ten year mark where the risk of getting cancer of the mouth and esophagus are cut in half. I am really happy that I made seven years, soon to be eight this December. I remember when I first quit and I would cough and spit up phlegm. Soon that went away though and I could breathe much more

easily and with a bit less wheezing. I was able to exert myself more and become less winded and worn out. One of the things that eventually made me the happiest was as a musician. I could sing much better and I am working on the trumpet. If I was still a smoker there would be no way I could dream of playing trumpet and because I'm not spending so much money on cigarettes I have the money to buy a nice trumpet.

At eight dollars a pack, having smoked two packs a day after two or three months

of not smoking you can buy a good



trumpet. It's much nicer to collect musical instruments than it is to collect cigarette butts or phlegm. Also what is good, I quit smoking soon enough that I didn't get oral cancer which would have prevented me from playing the trumpet, singing, or perhaps talking.

In all I'm much happier not smoking and playing trumpet.

## What a Difference: Is it worth it?

By Victor E. Buksbazen, Ph.D.

When I awoke I saw my wife, Evelyn, sitting next to my bed. As comprehension and memory returned, I wrote "Were they able to save my voice?"

"I'm sorry", she replied. The surgeon said there was just too much damage to save it!" That was 14 years ago. I am now a peer counselor and mentor, have served on three juries and three government boards and live a very fulfilling life - - although I do miss my voice of course (I use a Servox). I have received awards from federal, state, and local governments and frequently speak to schools and civic groups on the dangers of tobacco use. Last year, I was selected as the outstanding senior male volunteer in Spokane. Best of all, I'm cured!

Truthfully, though, I have not done anything that

extraordinary. The only "remarkable" thing about my life is that I try to put the public and its well being before my own.

Smoking, chewing, or any other form of tobacco use are all risky behaviors. And for what? The "satisfaction" of having smoke trickle down your windpipe rubbing it raw, depositing carcinogens with every puff? The pleasure of spending ¼ or more of your income on something which vanishes as soon as it is used? The sensation of waking up every morning with a blast furnace where your tongue used to be? Get real! No smoker really enjoys his habit.

The first step to quitting is to acknowledge publicly that you want to stop. When you do this, social tools start working for you. Other users trying to

quit will rally around you.

Former users will be there to encourage you. And you will respect yourself more.

It won't be easy. The first year will be especially hard. But it will be worth it, I assure you.

Do I still dream about smoking? You bet! Only now, someone in my dreams is trying to force me to smoke, and I'm resisting. And that's the difference!

If you need encouragement in your fight, please give me a call at (509) 483-6557.

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*Victor E. Buksbazen is a retired pastor and medical technologist. He has a Ph.D. in history and is on the Older Adult Subcommittee. He recently met Dr. Williams at a Behavioral Health Conference in Vancouver, WA. He tries to have pleasant dreams every night.*

## The Peer-to-Peer Program is Spreading its Wings!

By Mandy Graves May

The peer-to-peer program is spreading its wings to the west! Working with CHOICES New Jersey, the Behavioral Health and Wellness Program at the University of Colorado Denver and the Smoking Cessation Leadership Center at the University of California San Francisco have started a new program. The program is currently running in Los Angeles County and Colorado and will soon be starting in the state of Washington. The new Peer Tobacco Advocates are former smokers with mental health and/or substance use disorders employed as peer advocates in community mental health centers, clubhouses, or wellness centers. These advocates are now trained to conduct one-on-one motivational interviews, educate peers on the dangers of tobacco use, and conduct an onsite tobacco support group to help others quit smoking.

So far, 57 peer advocates

and supervisors have been trained to conduct the program at 22 mental health and/or substance use programs in Colorado and California. Ongoing tobacco support groups are being held on a weekly basis by the Peer Tobacco Advocates. We have received feedback from participants that the program has successfully helped them quit or reduce their tobacco use. For example, one advocate reports a smoker of 20 years successfully quitting after entering the program. Another peer advocate, successful in implementing two weekly groups relayed the story of a 38-year smoker remaining smoke-free through participation in the group. Several of the program advocates have reported once quit, ex-smoking participants continue to attend the groups for ongoing support as well as helping to recruit additional participants.

We congratulate everyone for their success and thank the CHOICES New Jersey team for their continued help to spread the need for peer-to-peer tobacco cessation services across the country!

*Mandy Graves May is the Director of Training and Outreach at the Behavioral Health and Wellness Program  
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*The Behavioral Health and Wellness Program is committed to improving the quality of life for individuals and communities, promoting wellness through community involvement, research, and education.*



## The CHOICES Program is featured in Mental Health Weekly

Mental Health Weekly recently released a Special Issue on Mental Health Innovations (October 26, 2009) which included an article on CHOICES' approach in addressing smoking through the use of peer support services. The article noted

that CHOICES brings together two critical components in a recovery-oriented system: focus on a wellness perspective and the use of peer providers in the delivery of services. The different perspectives on the benefit of the CHOICES model are highlighted through

interviews with the CHOICES Program Director, a CHOICES Consumer Tobacco Advocate and a case manager at a day program for consumers who live in group homes following discharge after extended stays at a state psychiatric hospital.

# You Can Be a Non-smoker

By Zachari George

I began smoking when I was 14, with people who were in “the wrong crowd”. From the first time I got sick when inhaling I knew that it was bad for me, but I was curious what the big deal was. My family had smoked in the house since I was a child, which gave me constant ear, nose and throat infections. I had even rolled cigarettes for my father!

Now I am 9 years smoke free - employed part-time as a tobacco cessation advocate for Mental Health America of Indiana. I ran my first marathon last year, plan to run another this year, learned to scuba dive, want to learn to fly, and will be graduating with my Bachelors degree soon.

How did I do all of that? Substance abuse was also part of my history, and quitting smoking has helped me tremendously in my recovery. Through education, I learned that nicotine in cigarettes is a drug. Nicotine follows the same paths in the brain that

cocaine and heroin do!

When I quit drinking, people in the Twelve Step program told me not to quit. I questioned why someone who wanted to help me save myself was telling me I should keep smoking! At every meeting I passed clouds of smoke. I couldn't get away from the madness. After about a year of not drinking or doing drugs, I decided I was killing myself with cigarettes so it was time to quit! Smoking *is* a trigger for other drugs.

To quit, I set a quit date that was meaningful. I really struggled with wanting to smoke, so I used vigorous exercise, such as push ups and sit ups, gradually increased my running, and chewed gum or used toothpicks to help fight the cravings. I also went regularly to therapy and talked about how I felt. Writing in a journal when I was upset helped a lot too. I even used the twelve steps on my nicotine addiction and took it a day at a time!

Today, there are so many valuable tools available to quit,

that it's easy to take advantage of them. If you would like stop, you can. The things quitting will do for your health are so tremendous. You will feel better and better the longer you stay stopped. The options available to you when you quit are far healthier than spending money killing yourself!

I have never looked back since I quit. My daughter has never seen me smoke. I am proud to be a non-smoker and to live a longer, more enjoyable life!

*Mr. Zachari George works for ReThink Tobacco that is based in Indianapolis, Indiana. ReThink Tobacco is a project of Mental Health America of Indiana. The ReThink Tobacco project seeks to evoke culture changes among Mental Illness/Substance Abuse providers and clients by raising awareness of the negative impacts of tobacco use on this community through focused education, discourse and planning. You can also find ReThink Tobacco on Facebook.*

## Current Research Studies

If you live in central New Jersey and are interested in participating in a research study, following are our current studies:

**The Effect of Menthol on Nicotine Levels and Metabolites in African American Cigarette Smokers. This is not a quit smoking study.** If you are a healthy African American adult, between ages of 18 and 75 and you smoke, you may qualify to participate in this study. Subjects are paid \$50 for participation in the study which takes about 1 day to complete.

**Nicotine Intake in Smokers with Schizophrenia. This is not a quit smoking study.** If you have schizophrenia or bipolar disorder, and are between ages of 18 and 70 and you smoke, you may qualify to participate in a study looking at cigarette puffing behavior. Subjects are paid \$100 for participation in the study which takes about 2-3 days to complete.

To participate in either study, please contact Jill Williams, MD, UMDNJ-RWJMS Psychiatry Department, 317 George Street, Ste 105, New Brunswick, NJ 08901, phone 732-235-4600.



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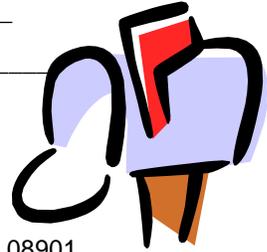
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**The CHOICES team will come to you!**

The **CHOICES** team of peer advocates will visit your group or program in New Jersey and provide mental health consumers with education about the consequences of smoking and tobacco products along with information regarding treatment resources available to make quitting easier. Call us at 732-235-8232 to set up a date and time.



*CHOICES is a partnership between UMDNJ-RWJMS Division of Addiction Psychiatry, the Mental Health Association of New Jersey (MHANJ) and the NJ Division of Mental Health Services and funded by the NJ Division of Mental Health Services .*