

# OUTCOMES IN TOBACCO USERS



Half of adult psychiatric inpatients are tobacco users



4 in 5 tobacco users achieve statistically meaningful improvement on the BASIS-32\*

Although tobacco users generally do well in treatment, their severity at discharge is higher than that of non-users. This is partly driven by their higher admission severity, which in turn is driven by their higher impulsivity severity.

## HIGHER ADMISSION SEVERITY



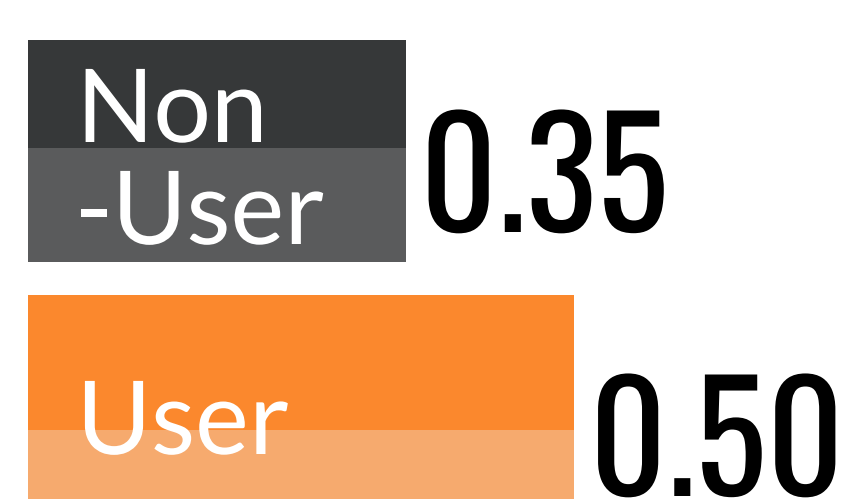
## HIGHER IMPULSIVITY+ AT ADMISSION



## HIGHER DISCHARGE SEVERITY



## HIGHER IMPULSIVITY AT DISCHARGE



## What does this mean?

Inpatient treatment is effective for tobacco users, though there's some room for improvement. Given half of adult psychiatric inpatients are tobacco users, it's important for facilities to understand how their treatment needs differ from non-users and to consider this in program design. Steps toward this could include:



Treatment planning targeting impulsivity and individualized areas of concern identified in outcomes assessments



Not using tobacco breaks as incentives



Equipping users with alternative coping tools



Helping users find cessation support from friends and family



Providing cessation resources, education, and counseling

\*The Behavior and Symptom Identification Scale (BASIS-32) is a 32-item self-report measure of a patient's functioning, scored on a scale of 0 to 4, where higher scores indicate greater severity.

+BASIS-32 Item 31: Impulsive, illegal, or reckless behavior