ASH brief for local authorities on youth vaping
August 2022

Purpose:

1. This short briefing is to help local authorities respond to growing concerns about youth vaping in their communities. Written by ASH, it has been endorsed by the organisations whose logos are included.

2. It is primarily for public health officials and trading standards officers, but also sets out important information for councillors, schools, parents and retailers. Links to further information are also provided.

Key messages:

3. Vaping is not risk free, and NICE recommends that vaping should be discouraged in children and young people who have never smoked.

4. However, vaping is much less harmful than smoking\(^1\) and is an effective quitting aid for adult smokers.\(^2\) Smoking is a leading cause of disease, disability and premature death.

5. It is illegal to sell e-cigarettes and vaping products containing nicotine, or tobacco, to under-18s. Enforcement of laws on underage sales, sales of illegal products, and point of sale advertising are the responsibility of trading standards and complaints should be made through the Citizens Advice online portal.

6. Complaints about all other inappropriate advertising and promotion of vaping to under-18s, for example on social media such as Tik Tok or Instagram, should be made to the Advertising Standards Authority (ASA) through the online complaints portal.

7. Adverse reactions associated with vaping should be reported to the MHRA via the yellow card scheme. The more information you can provide about the product used the better.

8. The proportion of young people who vape has increased, but media reports that youth vaping risks becoming a potential ‘public health catastrophe’ leading to a ‘generation hooked on nicotine’\(^3\) are not substantiated by the evidence.
Youth vaping: attitudes and behaviour

9. In March 2022 a representative sample of 2,613 young people in Great Britain aged 11-18 were surveyed by YouGov for ASH, and asked about their use of e-cigarettes. This survey has been carried out annually since 2013, and provides the most up to date national survey of youth vaping. However, this is a national picture, so won't identify the hot spots which may exist in some local authority areas or individual schools.

10. The ASH survey finds a strong age gradient with only 10% of 11-15 year olds ever having tried vaping, 29% of 16 and 17 year olds, and 41% of 18 year olds. Most youth vaping is experimental, with much lower levels of regular use (defined as more than once a week).

11. Underage vaping among 11-17 year olds has increased in the last two years:
   - Ever trying vaping has grown from 14% to 16%, while ever trying smoking has fallen from 16% to 14%.
   - Regular vaping (more than once a week) has grown from 1.7% to 3.3% while occasional use (less than once a week) has grown from 2.4% to 3.9%.
   - Smoking rates have stayed similar, with regular smoking (more than once a week) at 2.8% in 2020 and 2.2% in 2022, while occasional use (less than once a week) has remained steady at 2.6% both years.
   - However, 92% of under 18s who have never smoked, have also never vaped, and only 1.9% have vaped more frequently than once or twice.

12. Underage vapers mainly buy from shops (47%), but 43% have been given them; 18% have bought them from friends or other informal sources, 11% buy from street markets; and 10% have bought on the internet.

13. Over half (56%) of 11-17 year olds reported being aware of e-cigarette promotion, most frequently in shops, or online, with awareness highest amongst those who’d ever tried vaping (72%). Tik Tok was the most frequently cited source of online promotion (45%) followed by Instagram (31%).

14. The most popular vaping flavours are fruit flavours, the most popular products are disposables, a change from previous years, with Elf Bar and Geek Bar by far the most popular brands.

15. Underage smokers are much more likely to report strong, very or extremely strong urges to smoke than young vapers to vape (44% vs 34%). Underage vapers are much more likely to report no urges to vape than young smokers to smoke (36% vs 20%).

16. A much higher proportion of children than adults think vaping is as, or more, harmful than smoking (41% compared to 33%). More adults say they don't know (24% compared to 17% of children) while the same proportion (42%) think vaping is less harmful.
Additional messages for schools, parents and carers

17. NICE recommends a coordinated whole school approach to smoking and vaping. And that as part of the curriculum on tobacco, alcohol and drug misuse, children, young people and young adults who do not smoke should be discouraged from experimenting with or regularly using e-cigarettes.

18. However, most young vapers also smoke or have smoked and it is important to recognise, and communicate to children and young people, that the level of risk from smoking is far greater than vaping, so the two are not confused.

19. The risks from smoking are well established, with up to two thirds of long-term smokers dying prematurely from diseases caused by smoking.¹

20. Around 280 children under 16 start smoking every day in England⁵ and two thirds of those trying one cigarette go on to become daily, addicted, smokers⁶, only one in three of whom are likely to quit during their lifetime.⁷

21. Dependence on vaping appears lower than on smoking for young people. Most vaping is experimental with regular vaping mainly confined to children who also smoke. It is important to find out whether the child in your care is also a smoker and to make clear that although neither are recommended, smoking is the far greater risk.

22. Children growing up in homes where parents smoke or vape are more likely to smoke or vape themselves.⁸ ⁹ The main source of supply to children for cigarettes and vapes is shops, although being given them comes second. Online sources are more common for vapes than for cigarettes.

23. It is not illegal to smoke or vape underage and punishment should be proportionate. It is not recommended to exclude a child from school for vaping or smoking, unless it is associated with other disruptive behaviour which might justify this.

24. If pupils are found vaping or smoking the product can be confiscated. It is illegal to sell tobacco or nicotine containing e-cigarettes to under-18s, or to purchase such products for them. Children under 18 should be asked where they got their vape (or cigarette) from so that complaints can be made to trading standards through the Citizens Advice online portal.

25. Complaints about advertising or promotion of vaping in shops should also be made to trading standards through the Citizens Advice online portal.

26. All other complaints about advertising, including on social media like Tik Tok or Instagram should be reported to the Advertising Standards Authority (ASA) online complaints portal.
27. It is important for schools to educate children on vaping, emphasising that vapes are less harmful than smoking, but that their purpose is to help adult smokers stop smoking. Smoking and vaping should both be discouraged, but it is important to do so in ways that do not inadvertently glamorise these behaviours or increase misperceptions that vaping is equally or more harmful than smoking.

28. Explain that e-cigarettes are an age-restricted product because there is potential for users to become addicted to nicotine-containing e-cigarettes, and we do not yet know the long-term effects of vaping on health. And that anyone who sells cigarettes or vapes to under-18s, or buys them on behalf of anyone under 18, is breaking the law.

29. The New Zealand Ministry of Health Vapefree Schools website has a range of materials with clear messages such as 'Vaping is not for young people. Whilst it can help people quit smoking, if you don’t smoke don’t vape'. Preliminary work with groups of young people in England and Wales suggests that young people in England and Wales found these resources useful. In contrast the US real cost campaign, which does not put the risks of vaping in the context of the greater risks of smoking, led one group of young people to conclude that they would rather be seen smoking than vaping after viewing the campaign.  

Addressing the myths about vaping

30. There are many myths about nicotine and vaping, often reported in the media – the facts are set out below:

How does the amount of nicotine in a vape compare with a cigarette?

31. Disposable vapes DO NOT contain as much or more nicotine as a packet of 20 cigarettes. Comparing like with like, a UK standard 2 ml disposable vape contains 40 mg of nicotine, an average pack of 20 cigarettes contains 250 mg of nicotine which is more than six times as much.

32. Both for smoking and vaping a small proportion of the nicotine content is absorbed by the user and depends largely on how a cigarette or vape is used rather than what it contains. A packet of cigarettes takes between 160 and 320 puffs to smoke. Popular disposable vapes such as Elf Bar and Geek Bar are said to contain around 600 puffs, but puffs on vapes ARE NOT equivalent to puffs on cigarettes.

Is vaping a gateway into smoking?

33. There is NOT strong evidence that vaping is a gateway into smoking. Some who try vaping first may go on to smoke cigarettes, but this association works both ways and there are common risk factors for both behaviours; this does not prove that vaping caused subsequent smoking.
34. If vaping were a gateway into smoking, you’d expect as vaping increased that smoking rates would stop declining or start to increase again. To the contrary, between 2012 and 2018 when e-cigarette use grew rapidly from a low base in England, smoking rates continued to fall. Among 11-15 year olds current smoking fell from 8% to 5% and ever having tried smoking from 23% to 16%, and among those aged 16+ smoking rates fell from 20% to 16%, which DOES NOT support the gateway hypothesis.

**Is vaping highly addictive?**

35. Most young people who try vaping DO NOT get addicted to nicotine. Those who vape are much less likely to be dependent than those who smoke, even in the US where the nicotine concentration limit tends to be much higher (5% compared to the 2% maximum allowed in the UK).

**Is nicotine poisonous?**

36. While nicotine containing e-liquids, like other drugs, should be kept out of sight and reach of young children, overdosing on nicotine is RARE, and usually results in minor symptoms which are short in duration, most commonly vomiting. Nicotine has therapeutic uses and nicotine replacement therapy such as gum and patches are licensed by the MHRA for smoking cessation, not just by adults but also by children from age 12 upwards.

**Is vaping harmful?**

37. We can’t yet be precise about the longer-term risks of vaping, but they are likely to be substantially lower than smoking. This is because the levels of exposure to toxic chemicals from vaping are a tiny proportion of those from smoking. We also don’t yet know whether the same proportion of people will vape throughout their lifetimes as smoke cigarettes, or whether people will have the same persistent difficulties quitting.

38. E-cigarettes have been on the market in the UK for 15 years and have been the most popular quitting aid since 2013. During that time vaping has NOT BEEN associated with widespread health problems in the UK. Between May 2016, when its reporting system was extended to vaping products, and January 2022 the MHRA received 257 yellow card reports covering 720 adverse reaction reports associated with vaping, most of which were non-serious. Between January and December 2021 there were 297 reports covering 601 reactions to the MHRA’s interactive Drug Analysis Profiles (iDAPS) for medicinally licensed nicotine replacement therapies such as patches and gums. MHRA reports show association, but DO NOT prove causation.

39. UK regulations PROHIBIT the use of any ingredient in nicotine containing e-liquid that poses a risk to human health in heated or unheated form. Prohibited chemicals include vitamin E acetate which causes serious respiratory disease when vaped (known as ‘EVALI’), and diacetyl which in large quantities has been shown to cause ‘popcorn lung’.
40. An outbreak of serious respiratory disease (known as ‘EVALI’) in the US in 2019 WAS NOT caused by vaping nicotine, but by vaping cannabis with vitamin E acetate added to it.\textsuperscript{31} Once the link with vitamin E acetate was identified the outbreak declined rapidly, as people stopped using it. Between March 2019 and January 2020 there were more than 2,600 cases of people hospitalised with ‘EVALI’ and 60 deaths reported to the US Centers for Disease Control and Prevention (CDC).\textsuperscript{32} By January 2020 the MHRA had received 20 reports of serious respiratory symptoms, and four fatalities, not all considered causally associated, with only 1 fatality linked to ‘EVALI’\textsuperscript{33}

**Regulation of e-cigarettes in the UK**

41. An overview of the regulations is set out below, more detailed information can be found on the websites of the relevant authorities.

42. E-cigarettes and vaping products containing nicotine are age restricted products regulated by the Medicines and Healthcare products Regulatory Agency (MHRA), which provides advice for consumers. Sales to those under 18 are illegal, but to be legally sold in the UK nicotine containing e-cigarettes must also:
   - Contain 20 mg/ml or less of nicotine (equivalent to 2% or less)
   - Carry the health warning ‘This product contains nicotine which is a highly addictive substance.’
   - Be notified to the MHRA and listed on its website.

43. In addition there are a number of ingredients which are prohibited in nicotine containing e-liquid including vitamins, stimulants such as caffeine or taurine, colourings and chemicals which are carcinogenic, mutagenic and reprotoxic in their unburnt form. For a full list see Chapter 6 - Ingredient Guidance - Great Britain.

44. Non-compliant vapes on sale in the UK are often vapes made for the US. US standard vapes:
   - will have a different health warning ‘WARNING This product contains nicotine. Nicotine is an addictive chemical.’
   - may contain higher levels of nicotine than 20mg/ml (2%)
   - may have larger tank sizes than 2ml.
   - may also say on them ‘only for sale in the US’.

45. Test purchasing of disposable vapes by trading standards found that on a third of occasions retailers were willing to sell to under-18s, and a quarter of the products purchased were not compliant with UK standards.\textsuperscript{34} Non-compliant products include US standard vaping products, counterfeit products and other products which have not been notified to the MHRA, some of which may meet UK standards.

46. The maximum penalty for selling a nicotine inhaling product to a person under 18 years is a fine of £2500. If convicted and further offences occur in a two-year
period, Trading Standards can make an application to a Magistrates' Court for a restricted premises order and/or a restricted sales order.34

47. The ASA is the UK’s regulator of advertising and applies the Ad Codes written by the Committees of Advertising Practice (CAP) and Broadcast Committees of Advertising Practice (BCAP). Advertising of tobacco products is illegal, whereas some advertising of e-cigarettes is allowed. See CAP code 22: Electronic cigarettes and BCAP Code Section 10 Prohibited categories and Section 33 Electronic cigarettes.

48. Advertising of nicotine-containing consumer e-cigarettes and vaping products is prohibited on broadcast media (TV and radio); and in newspapers, magazines and periodicals; online media and some other forms of electronic media (this includes social media). Non-commercial public health campaigns promoting vaping as an alternative to smoking are permitted.

49. Where marketing communications of consumer e-cigarettes and vaping products are allowed they must not be likely to appeal particularly to people under 18. Advertising should therefore not:

• Reflect or be associated with youth culture;
• use characters likely to appeal to under-18s;
• feature young people under 25 or appearing to be under 25, or people behaving in an adolescent or juvenile manner.
• encourage non-smokers or non-nicotine-users to use e-cigarettes.

50. Marketing communications at point of sale, unless they include a promotion or are covered by the rolling papers and filters rules are not covered by the ASA, but by trading standards.

51. Further information can be found from Adviceonline on vaping, smoking and drugs, which is useful for anyone considering making a complaint. Complaints about advertising should be made to the ASA via the online complaints portal.

52. Complaints about underage or illegal sales and about advertising or promotion of vaping or tobacco products in shops should be made to trading standards through the Citizens Advice online portal.

53. Only nicotine-containing products are currently regulated in the UK under the Tobacco and Related Product Regulations, but adverse reactions associated with vaping of both nicotine and non-nicotine containing e-cigarettes can be reported to the MHRA via the yellow card scheme.
Further information

ASH smokefree GB youth survey 2022 is available online

Nicotine containing e-cigarettes are regulated in the UK under the Tobacco and Related Product Regulations 2016

Resources for schools

New Zealand Ministry of Health resources are available from Vaping Facts. In New Zealand schools must display notices stating that smoking and vaping within the premises is forbidden at all times. Schools in England could consider doing this on a voluntary basis.

NICE guideline NG209 covers schools based interventions in its recommendations on preventing uptake.

New content covering nicotine and nicotine vapes will be available from mid-September 2022 on the youth-focused FRANK website And OHID is working with DfE and the PSHE Association to develop educational materials for teachers about vaping.

References

References: All factual information in the briefing is substantiated by evidence. Full information on all the references available online. All links accessed on 15 August 2022.