

**educate.
engage.
empower.**

**TOBACCO-FREE
COMMUNITY FORUM**

TOBACCO-FREE RESOURCE GUIDE

for Youth, Communities,
Parents, and Schools

TOBACCO-FREE COMMUNITY FORUM

Educate. Engage. Empower.

April 28, 2021

This event made possible by the Poe Center for Health Education in partnership with Wake County Human Services, Wake County Public Schools, and the American Heart Association.

TOBACCO-FREE COMMUNITY FORUM AGENDA

9:15 a.m. - 9:30 a.m. - Log-In and Sign-On

Slideshow of PhotoVoice Projects

9:30 a.m. - 9:40 a.m. - Welcome & Opening Remarks

Honorable Sig Hutchinson, Wake County Commissioner
Ann Rollins, Executive Director, Poe Center For Health Education
Roxie Cash, Wake County Board of Education

9:40 a.m. - 9:45 a.m. - Recognition of Local Champions

Presented by *Youth Empowerment Team*

9:45 a.m. - 10:00 a.m. - A Snapshot of Tobacco's Impact on Youth In Wake County

Sumedh Kotrannavar, Student at Carnage Middle School
Teja Wasudev, Student at Cary Academy
Nikhil Patel, Student at Enloe High School
Gorja Yadav, Student at Enloe High School
Lily Zahn, Student at Fuquay-Varina High School

10:00 a.m. - 10:20 a.m. - Latest Updates on Tobacco Impacts, Trends, and Statistics

Jim Martin, Director of Policy and Programs with the N.C. Tobacco Prevention and Control Branch
Division of Public Health, NC Department of Health and Human Services

10:20 a.m. - 10:45 a.m. - Youth Perspective on Local Tobacco Policy Needs Panel

Moderator: *Honorable Sig Hutchinson*, Wake County Commissioner

Panelists:

Sumedh Kotrannavar, Student at Carnage Middle School
Teja Wasudev, Student at Cary Academy
Nikhil Patel, Student at Enloe High School
Lily Zahn, Student at Fuquay-Varina High School

10:45 a.m. - 11:20 a.m. - Transition to Breakout Educational Sessions

Community Session - Focused on Policy Action, facilitated by:

Ann Rollins, Executive Director, Poe Center
C. Michelle Mulvihill, Region 7 Tobacco Control Manager, Wake County Human Services
Department/Public Health Division
Lily Zahn, Student at Fuquay-Varina High School

Parent/Caregiver Session - Facilitated by:

Mel Downey-Piper, MPH, Vice President of Health Strategies, American Heart Association
Susan Foster, Assistant Director, Substance Use Prevention, The Poe Center
Sumedh Kotrannavar, Student at Carnage Middle School

Youth Session - Facilitated by:

Brian Glendenning, Senior Administrator, Healthful Living, WCPSS
Teja Wasudev, Student at Cary Academy
Nikhil Patel, Student at Enloe High School

11:20 a.m. - End of Breakout Sessions - Return to Main Session

11:20 a.m. - 11:30 a.m. - Goals for the Future & Next Steps

Honorable Sig Hutchinson, Wake County Commissioner
Ann Rollins, Executive Director, Poe Center For Health Education
Youth Empowerment Team

11:30 a.m. Adjourn

INTRO

Good morning parents, teachers, community leaders and fellow teens,

On behalf of the Youth Empowerment Groups in Wake County, I would like to thank you for joining us virtually and contributing your time to the 2021 Tobacco-Free Community Forum. As a teen, I have encountered and witnessed an alarming increase of tobacco use and have watched such products become normalized among the youth society. The issue of tobacco use has invaded our community and affected many of my peers. Today, in the US over **5 million youth** are currently using e-cigarettes and nearly **1 million** use the product daily¹.

For this reason, the Youth Empowerment Team of the Poe Center for Health Education in partnership with Wake County Public Schools, Wake County Human Services, and the American Heart Association have put together this event to address the disheartening increase of tobacco use through e-cig products among the youth in our community. **In North Carolina youth, there has been an 1129% increase of e-cigarette use in less than a decade².** I hope that together we can create and implement a solution to put an end to and eliminate this growing epidemic before it is too late.

To learn more about these current statistics, during this event we will be hearing more about tobacco's impact on youth communities through:

- Breakout sessions addressing different aspects of the issue.
- Hearing from experts about these impacts that tobacco has caused.
- Community leaders speaking and helping with finding resources.

With your help, I believe we can put a stop to this growing issue. We challenge you to leave here today feeling **empowered** to take this information and use it to implement your own ideas. **Educate** others and **engage** your community and your peers. We encourage everyone to help in any way that they can, remembering that every effort matters.

Thank you again,



Thaleana Luu
Senior, Wake Early College

Sources:

1. 2019 United States Youth Tobacco Survey
2. 2019 North Carolina Youth Tobacco Survey



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COMMUNITES: WHAT CAN YOU DO?

COMBATING YOUTH TOBACCO USE - ACTION STEPS FOR COMMUNITIES

- Model a healthy lifestyle free of tobacco products.
- Adopt a tobacco-free policy for your home and vehicle.
- Continue to educate yourself and commit to talking with your young person as they grow about tobacco and other drugs.
- Continue learning about this issue by exploring your Tobacco-Free Forum Resources, sign up for email alerts, and follow prevention organizations online.
- Support education opportunities in your school and community. Schedule an education session with your PTSA meetings, civic organizations, faith communities, events, etc. Contact one of the following organizations to schedule a presentation for your organization.

Wake County Tobacco Prevention & Control Program
Catherine.Mulvihill@WakeGov.com

Poe Center for Health Education
S.Foster@PoeHealth.org

- Share information found in this resource packet with friends and family through social media.
- Learn about and participate in national tobacco use prevention campaigns such as the Great American Smokeout in November and Kick Butts Day in March. www.TobaccoFreeKids.org
- Educate yourself on current tobacco policies impacting your community. Stay informed at WakeGov.com/tobaccofree and NCAllianceForHealth.org/TobaccoUsePrevention

YOUTHS: WHAT CAN YOU DO?

COMBATING YOUTH TOBACCO USE - ACTION STEPS FOR YOUTH

- Learn and stay updated about this issue by exploring your Tobacco-Free Forum Resources.
- Sign up for email alerts and follow prevention organizations online.
- Join a community Youth Empowerment Group (Poe Center, YES! For Equity, 4-H) to educate your peers and community.

Interested in starting a Youth Empowerment Group in your school or community? Contact T.Glichrist@PoeHealth.org to learn more.

- Learn about and participate in national tobacco use prevention campaigns such as the Great American Smokeout in November and Kick Butts Day in March. www.TobaccoFreeKids.org
- Participate in the Wake County Tobacco-Free Poster Contest.
Entry form link: <https://forms.gle/VxFCUfHJZjsq5Ac88>
- Model a healthy lifestyle free of tobacco products.
- Encourage your family to adopt a tobacco-free policy for your home and vehicle.
- Share information found in this resource packet with friends and family through social media.
- Educate yourself on current tobacco policies impacting your community. Stay informed at WakeGov.com/tobaccofree and NCAllianceForHealth.org/TobaccoUsePrevention

PARENTS: WHAT CAN YOU DO?

COMBATING YOUTH TOBACCO USE - ACTION STEPS FOR PARENTS, GUARDIANS AND YOUTH SERVING ADULTS

- Model a healthy lifestyle free of tobacco products.
- Adopt a tobacco-free policy for your home and vehicle.
- Continue to educate yourself and commit to talking with your young person as they grow about tobacco and other drugs.
- Continue learning about this issue by exploring your Tobacco-Free Forum Resources, sign up for email alerts, and follow prevention organizations online.
- Support education opportunities in your school and community. Schedule an education session with your PTSA meetings, civic organizations, faith communities, events, etc. Contact one of the following organizations to schedule a presentation for your organization.

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- Educate yourself on current tobacco policies impacting your community. Stay informed at WakeGov.com/tobaccofree and NCAAllianceForHealth.org/TobaccoUsePrevention

SCHOOLS: WHAT CAN YOU DO?

COMBATING YOUTH TOBACCO USE - ACTION STEPS FOR SCHOOLS AND COMMUNITIES

- Enforce tobacco-free campus policies which include e-cigarettes.
- Reject tobacco industry-sponsored prevention programs, which do not follow evidence-based strategies and best practices for effective prevention.
- Continue learning about the issue by exploring your Tobacco-Free Forum Resource List and follow resources on social media for the latest updates.
- Support education opportunities in your school and community. Schedule an education session with your PTSA meetings, civic organizations, faith communities, events, etc. Contact one of the following organizations to schedule a presentation for your organization.

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Catherine.Mulvihill@WakeGov.com

Poe Center for Health Education
S.Foster@PoeHealth.org

- Model a healthy lifestyle free of tobacco products.
- Adopt a tobacco-free policy for your home and vehicle.
- Advocate for tobacco regulations in your town such as tobacco-free government buildings and recreation areas.
- Learn about and participate in national tobacco use prevention campaigns such as the Great American Smokeout in November and Kick Butts Day in March. www.TobaccoFreeKids.org
- Educate yourself on current tobacco policies impacting your community. Stay informed at WakeGov.com/tobaccofree and NCAAllianceForHealth.org/TobaccoUsePrevention

RESOURCES

for Communities, Youths Parents, and Schools

This guide has resources that apply to youths, communities, parents, and schools.

Some resources apply to more than one group.

Please visit poehealth.org for more information and resources,
as well as any links you see written in this booklet.

2019 NATIONAL YOUTH TOBACCO SURVEY

2019

NATIONAL YOUTH TOBACCO SURVEY

SHOWS

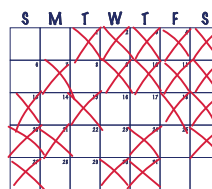
YOUTH e-cigarette use at

ALARMING LEVELS

OVER 5 Million
youth are currently using e-cigarettes



NEARLY **1 Million**
used the product daily

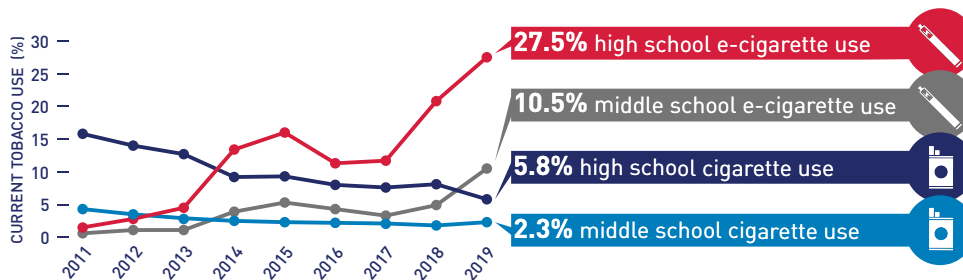


ABOUT
1.6 MILLION
youth used the product frequently
(on 20 or more days per month)

MAJORITY of the current e-cigarette users reported



Current e-cigarette use has **INCREASED DRAMATICALLY**, while current cigarette use has dropped, **UNDERMINING PROGRESS** toward reducing overall tobacco use



Why is this concerning?

The use of e-cigarettes, particularly those with high levels of nicotine, places youth at risk for developing nicotine addiction. Nicotine exposure during adolescence could harm brain development. Additionally, youth who use e-cigarettes are more likely to start smoking cigarettes. Further, e-cigarette aerosol may expose users to other harmful substances such as heavy metals, volatile organic compounds, and ultrafine particles that could harm the lungs.

CENTER FOR TOBACCO PRODUCTS

Source: 1) Cullen KA, Gentzke AS, Sawdey MD, et al. E-cigarette Use Among Youth in the United States, 2019. JAMA. 2019; 2) Gentzke AS, Creamer M, Cullen KA, et al. Vital Signs: Tobacco Product Use Among Middle and High School Students — United States, 2011–2018. MMWR Morb Mortal Wkly Rep 2019.

Note: All numbers presented here are estimates.

CTP-136

www.fda.gov/tobacco



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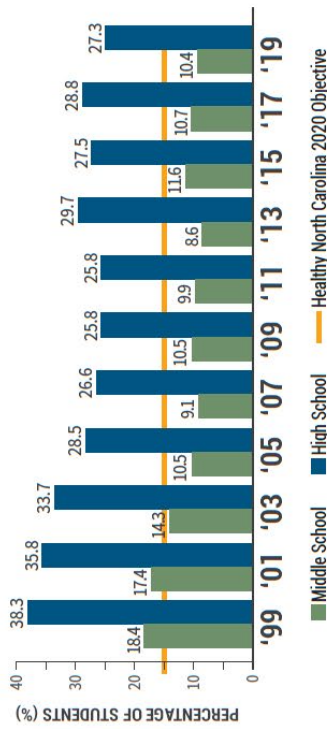


2019

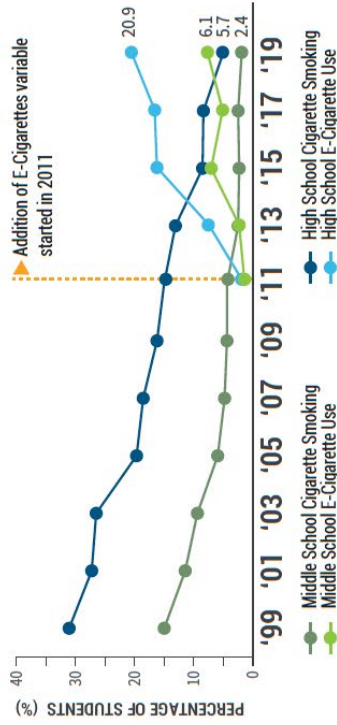
NORTH CAROLINA YOUTH TOBACCO SURVEY (NC YTS) MIDDLE & HIGH SCHOOL FACT SHEET

The **North Carolina Youth Tobacco Survey (NC YTS)** is a public school-based survey of students in grades 6-12 that measures youth tobacco use behaviors every two years since 1999. The Healthy North Carolina 2020 objective is to decrease the percentage of high school students reporting current use of any tobacco product to 15%. A random sample of schools are selected to participate in the NC YTS. In 2019, 7135 students responded to the survey (3583 middle school students and 3552 high school students). The statewide overall response rate was 56.8% for middle schools and 59.3% for high schools.

PERCENT OF NC MIDDLE AND HIGH SCHOOL STUDENTS WHO CURRENTLY USE ANY TOBACCO PRODUCT



NC MIDDLE & HIGH SCHOOL CURRENT USE OF CIGARETTES & E-CIGARETTES, NC YTS, 1999-2019



APPROXIMATELY 135,000 N.C. HIGH SCHOOL STUDENTS AND 38,000 MIDDLE SCHOOL STUDENTS CURRENTLY USE A TOBACCO PRODUCT.

CURRENT E-CIGARETTE USE INCREASE 2011 - 2019



TOBACCO USE VARIES BY RACE/ETHNICITY CURRENT USE-HIGH SCHOOL 2019 (%)



Current use is defined as using tobacco products on one or more of the past 30 days. North Carolina 2019 enrollment figures were used to generalize NC YTS findings to all middle and high school students in the state. The 2019 NC YTS response rates were 57% and 59% among middle and high school students, respectively. Response rates lower than 60% can increase the potential for non-response bias.

Graphic continued on the next page.

YOUTH TOBACCO SURVEY FACT SHEET

STUDENT ARE USING MULTIPLE PRODUCTS

Nearly **1 in 2** out of current tobacco users uses **MORE THAN ONE PRODUCT.**



STUDENTS ARE VAPING MARIJUANA

Nearly **14** in **100** HIGH SCHOOL students and of all **MIDDLE SCHOOL** students report they have ever vaped marijuana.

Among current e-cigarette users, over half of **HIGH SCHOOL** students and nearly half of **MIDDLE SCHOOL** students report they have ever vaped marijuana.

STUDENTS ARE BECOMING DEPENDENT ON TOBACCO

AMONG HIGH SCHOOL STUDENTS

25% of current e-cigarette users want to use a tobacco product within 1 hour of waking up.

30% of current e-cigarette users find it hard to get through the school day without vaping.

TOBACCO USE IS HIGHER AMONG LESBIAN, GAY, AND BISEXUAL STUDENTS

CURRENT USE-HIGH SCHOOL 2019 (%)



BLUNTS ARE USED ALMOST AS OFTEN AS E-CIGARETTES

CURRENT USE-HIGH SCHOOL 2019 (%)

Blunts
(Cigars with marijuana mixed)

E-Cigarettes



STUDENTS WANT TO STOP USING TOBACCO

WANT TO STOP USING ALL FORMS OF TOBACCO
(AMONG CURRENT USERS %)

YES High School 44.9%
Middle School 41.9%

ATTEMPTED TO QUIT IN PAST YEAR
(AMONG CURRENT USERS %)

YES High School 65.7%
Middle School 74.3%



For more information, please contact the North Carolina Tobacco Prevention and Control Branch at (919) 707-5400.
www.tobaccopreventionandcontrol.ncdhhs.gov
 NC Department of Health and Human Services • Division of Public Health • www.publichealth.nc.gov • 02/2021

E-Cigarette Health Advisory

Nicotine risks for children, teens, young adults and pregnant women

This advisory seeks to inform health care professionals and parents of the health risks of nicotine exposure to children, teens and pregnant women related to the use of e-cigarettes (vaping devices).

With increased use and expanding availability of nicotine products such as e-cigarettes, especially among young people, it is important to understand the facts about nicotine and its health effects. Studies have shown that nearly all e-cigarettes sold contain nicotine. Nicotine is addictive and can be toxic at high doses. Evidence also has shown nicotine can harm brain development during adolescence and young adulthood. Nicotine exposure, whether through traditional or new and emerging products, is unsafe for young people.



Nicotine products pose a serious health risk for youth.

The use of e-cigarettes and other e-cigarette or vaping products (such as vape pens, hookah pens, e-cigars and e-pipes) recently surpassed the use of conventional cigarettes to become the most commonly used tobacco product among U.S. youth.^[1] Given the use of e-cigarettes among teens increased dramatically during 2011-2015,^[1] it is critical that public health officials and citizens understand the potential risks of using nicotine products for young people.

A growing body of evidence from multiple countries shows that young people who have never smoked cigarettes — but currently use e-cigarettes — are more likely to smoke cigarettes in the future than are young people who do not use e-cigarettes.^[8-13, 83-84]

Human clinical studies report similar findings — adolescent nicotine exposure leads to higher rates of smoking behavior in adulthood.^[8-13] Accordingly, young people should avoid use of all nicotine-containing products, including e-cigarettes.

■ Nicotine exposure can harm brain development.

Adolescence — the transitional period between childhood and adulthood, typically ranging from ages 12 to 18 — is a critical window for brain growth and development, when it is still “under construction.”^[14, 15] However, the brain continues to undergo structural and functional development into young adulthood, to age 25.^[1, 78, 79] Consequently, young people are especially at risk of harm caused by nicotine exposure.

The brain undergoes significant neurobiological development during adolescence and young adulthood, which are critical periods of sensitivity to neurobiological insults, including nicotine.^[79-82]

Evidence indicates that exposure to nicotine during adolescence can have long-term effects on brain development,^[1, 16-18] and may increase the risk of addiction to other substances by causing changes



within the brain.^[17,19-32] Animal research has found that even in small doses, nicotine exposure in adolescence causes long-lasting changes in brain development. This could have negative implications for learning, memory, attention, behavioral problems and future addiction in young people.^[18, 30, 33-37]

■ Nicotine causes harmful physical effects and can be toxic.

Nicotine affects the cardiovascular and central nervous systems, causing blood vessels to constrict, raising the pulse and blood pressure.^[38, 68] Eating, drinking or absorbing nicotine can lead to nicotine poisoning; children are especially vulnerable.^[20] Symptoms of nicotine poisoning include nausea, vomiting, seizures and respiratory depression.^[69, 70] Nicotine poisoning can be fatal.^[71]

There has been a significant rise in the number of calls to poison control centers for exposures to liquids used in e-cigarettes.^[72] Nationally, the number of calls rose from one per month in September 2010 to 215 per month in February 2014, with nearly 52 percent occurring among children under age 5.^[73]

Similarly, calls increased in North Carolina with poisonings related to e-cigarettes increasing from just eight in 2011 to 121 in 2016. Many of these cases were about ingestion of e-cigarette liquids that were left out in reach of toddlers and children.

The amount of nicotine in products may vary widely. Nicotine levels in e-cigarettes have been found to range from 0 to 34 mg/mL,^[75] and studies have found discrepancies between the labeled and

measured nicotine content in some e-cigarette products.^[76] Because of the lack of quality and manufacturing standards for e-cigarettes and other electronic nicotine delivery systems (ENDS), it is difficult for the consumer to know how much nicotine is contained in these products, increasing the risk of a toxic exposure. The U.S. Food and Drug Administration now has the authority to address the varying nicotine levels in tobacco products, including e-cigarettes, but has not yet done so.

■ Nicotine is highly addictive.

Nicotine is the drug in tobacco that causes addiction.^[38-42] Nicotine stimulates reward pathways in the brain, and can be as addictive as heroin or cocaine.^[22, 39, 43-49] Because their brains are still developing, adolescents and young adults are especially vulnerable to nicotine addiction.^[14, 17, 50-53]

While experimental studies testing the effects of nicotine addiction on the human adolescent brain do not exist due to ethical restrictions, researchers agree that results from animal studies do translate to humans.^[1] Existing animal studies show that adolescents are more sensitive to the rewarding effects of nicotine at lower doses than adults, and experience fewer negative side effects of higher-dose exposure.^[54, 55]

Further, young people are less sensitive to the negative effects of withdrawal than adults, making them more susceptible to nicotine addiction. Human clinical reports confirm this pattern, showing adolescents are more likely to experience nicotine dependence at lower doses than adults.^[8-13]

Nicotine is harmful to the health of unborn children.

The U.S. Surgeon General has concluded that use of products containing nicotine poses danger to pregnant women and unborn children.^[1, 20]

Fetal exposure to nicotine can have a variety of negative long-term consequences, including sudden infant death syndrome, impaired brain and lung development, auditory processing problems, effects on behaviors and obesity, and deficits in attention

and cognition.^[15-17, 20, 26-28, 56, 57] Studies also indicate that fetal nicotine exposure is associated with nicotine dependence in adolescence.^[15, 20, 58-67]

Pregnant women and women who intend to become pregnant should avoid e-cigarettes to minimize unnecessary exposure to nicotine.^[1, 20]

Recommendations for Health Care Professionals

■ Educate and advise

- Advise that nicotine exposure is unsafe for children, teens and pregnant women.
 - The nicotine contained in products such as e-cigarettes is highly addictive.
 - Accidental exposure to liquids contained in e-cigarettes and similar products can result in nicotine poisoning if it's in high enough doses, especially in children.
- Advise that exposure to nicotine can harm the developing adolescent brain.
- Advise pregnant women to avoid using nicotine products.
- People of all ages interested in quitting tobacco can receive free coaching, and may qualify for free nicotine replacement medication from QuitlineNC at www.quitlinenc.com or by calling 1-800-QUIT-NOW (1-800-784-8669).



■ Protect children from nicotine poisoning

Inform parents and nicotine users that nicotine-containing cartridges and bottles are a potential source of poisoning through ingestion, skin or eye contact. Store these materials out of the reach of children, and call the Carolinas Poison Center at 1-800-222-1222 for expert help in case of accidental exposure.



Recommendations for Parents of Young Children

■ Keep nicotine-containing products out of reach

- Nicotine-containing cartridges and bottles are a potential source of poisoning through ingestion, skin or eye contact. Store these materials out of the reach of young children.
- Makes sure that products kept in the home are kept in child-resistant packaging, which is required for all liquid nicotine sold in North Carolina and nationwide.^[77]
- Call 1-800-222-1222 for poison emergencies.



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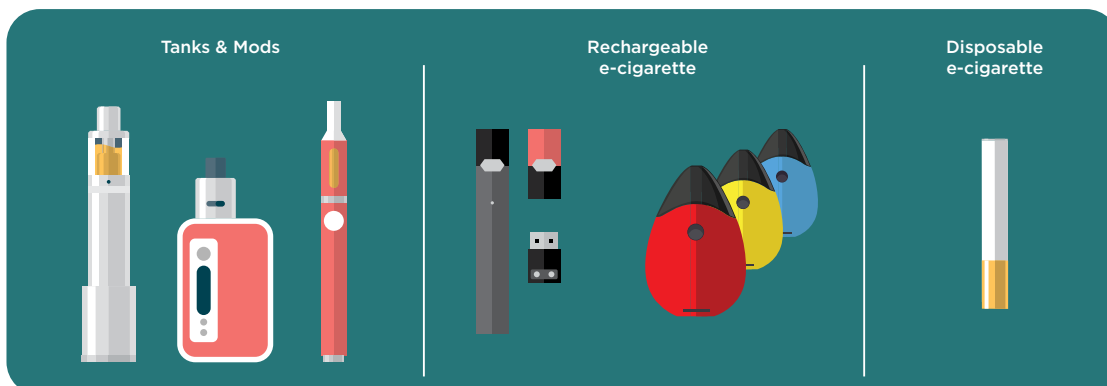
E-CIGARETTES: WHAT'S THE BOTTOM LINE

ELECTRONIC CIGARETTES WHAT'S THE BOTTOM LINE?

- » E-cigarettes have the potential to benefit adult smokers who are not pregnant if used as a complete substitute for regular cigarettes and other smoked tobacco products.
- » E-cigarettes are not safe for youth, young adults, pregnant women, or adults who do not currently use tobacco products.
- » While e-cigarettes have the potential to benefit some people and harm others, scientists still have a lot to learn about whether e-cigarettes are effective for quitting smoking.
- » If you've never smoked or used other tobacco products or e-cigarettes, don't start.

WHAT ARE E-CIGARETTES?

- » E-cigarettes are known by many different names. They are sometimes called “e-cigs,” “e-hookahs,” “mods,” “vape pens,” “vapes,” “tank systems,” and “electronic nicotine delivery systems.”
- » Some e-cigarettes are made to look like regular cigarettes, cigars, or pipes. Some resemble pens, USB sticks, and other everyday items.
- » E-cigarettes produce an aerosol by heating a liquid that usually contains nicotine—the addictive drug in regular cigarettes, cigars, and other tobacco products—flavorings, and other chemicals that help to make the aerosol. Users inhale this aerosol into their lungs. Bystanders can also breathe in this aerosol when the user exhales into the air.
- » E-cigarettes can be used to deliver marijuana and other drugs.



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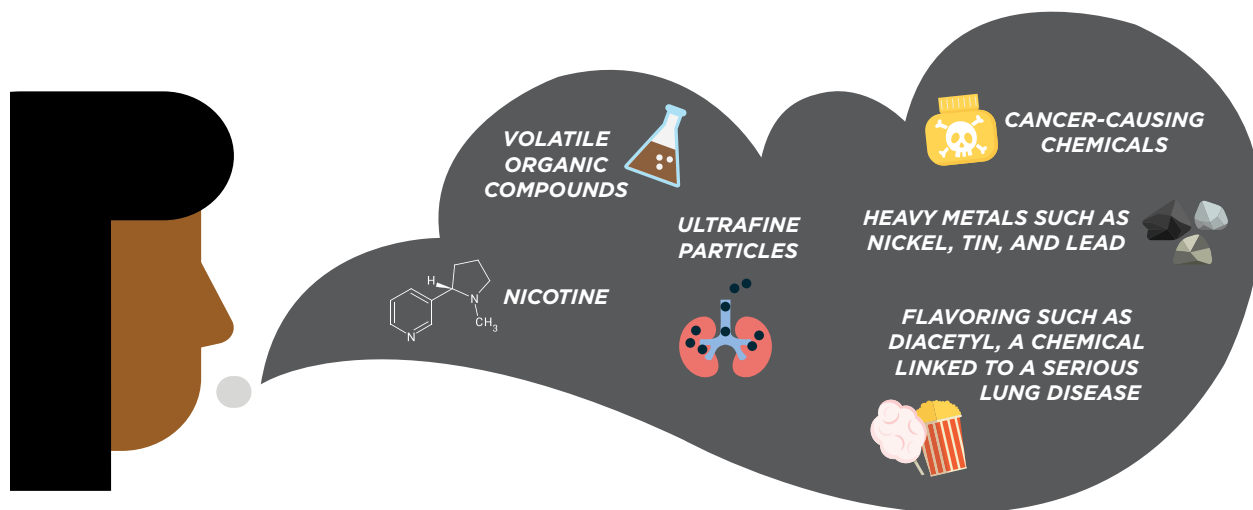


U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

E-CIGARETTES: WHAT'S THE BOTTOM LINE

WHAT IS IN E-CIGARETTE AEROSOL?

THE E-CIGARETTE AEROSOL THAT USERS BREATHE FROM THE DEVICE AND EXHALE CAN CONTAIN HARMFUL AND POTENTIALLY HARMFUL SUBSTANCES:



It is difficult for consumers to know what e-cigarette products contain. For example, some e-cigarettes marketed as containing zero percent nicotine have been found to contain nicotine.

ARE E-CIGARETTES LESS HARMFUL THAN REGULAR CIGARETTES?



VS



YES, but that doesn't mean e-cigarettes are safe.

E-cigarette aerosol generally contains fewer toxic chemicals than the deadly mix of 7,000 chemicals in smoke from regular cigarettes. However, e-cigarette aerosol is not harmless. It can contain harmful and potentially harmful substances, including nicotine, heavy metals like lead, volatile organic compounds, and cancer-causing agents.

E-CIGARETTES: WHAT'S THE BOTTOM LINE

WHAT ARE THE HEALTH EFFECTS OF USING E-CIGARETTES?

SCIENTISTS ARE STILL LEARNING ABOUT THE LONG-TERM HEALTH EFFECTS OF E-CIGARETTES. HERE IS WHAT WE KNOW NOW.

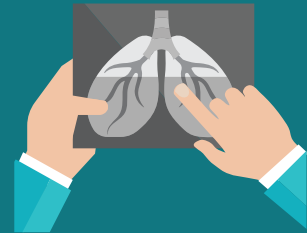
1 Most e-cigarettes contain nicotine, which has known health effects

- » Nicotine is highly addictive.
- » Nicotine is toxic to developing fetuses.
- » Nicotine can harm adolescent brain development, which continues into the early to mid-20s.
- » Nicotine is a health danger for pregnant women and their developing babies.



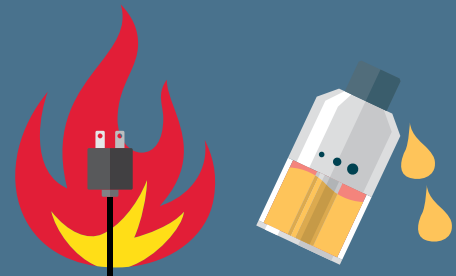
2 Besides nicotine, e-cigarette aerosol can contain substances that harm the body.

- » This includes cancer-causing chemicals and tiny particles that reach deep into lungs. However, e-cigarette aerosol generally contains fewer harmful chemicals than smoke from burned tobacco products.



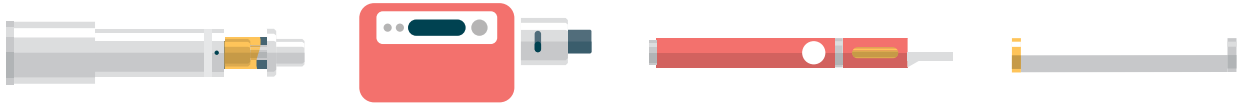
3 E-cigarettes can cause unintended injuries.

- » Defective e-cigarette batteries have caused fires and explosions, some of which have resulted in serious injuries.
- » In addition, acute nicotine exposure can be toxic. Children and adults have been poisoned by swallowing, breathing, or absorbing e-cigarette liquid.



E-CIGARETTES: WHAT'S THE BOTTOM LINE

CAN E-CIGARETTES HELP ADULTS QUIT SMOKING CIGARETTES?



E-CIGARETTES ARE NOT CURRENTLY APPROVED BY THE FDA AS A QUIT SMOKING AID.

The U.S. Preventive Services Task Force, a group of health experts that makes recommendations about preventive health care, concluded that the evidence is insufficient to recommend e-cigarettes for smoking cessation in adults, including pregnant women.



HOWEVER, e-cigarettes may help non-pregnant adult smokers if used as a complete substitute for all cigarettes and other smoked tobacco products.

TO DATE, THE FEW STUDIES ON THE ISSUE ARE MIXED.

Evidence from two randomized controlled trials found that e-cigarettes with nicotine can help smokers stop smoking in the long term compared with placebo (non-nicotine) e-cigarettes.

A recent CDC study found that many adults are using e-cigarettes in an attempt to quit smoking. However, most adult e-cigarette users do not stop smoking cigarettes and are instead continuing to use both products (“dual use”). Because smoking even a few cigarettes a day can be dangerous, quitting smoking completely is very important to protect your health.

E-CIGARETTES: WHAT'S THE BOTTOM LINE

WHO IS USING E-CIGARETTES?

E-CIGARETTES ARE THE MOST COMMONLY USED TOBACCO PRODUCT AMONG YOUTH.

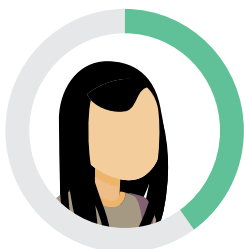
IN THE U.S., YOUTH ARE MORE LIKELY THAN ADULTS TO USE E-CIGARETTE



4.9%
MIDDLE SCHOOL STUDENTS

In 2018, more than **3.6 MILLION** U.S. middle and high school students used e-cigarettes in the past 30 days, including:

20.8%
HIGH SCHOOL STUDENTS



AMONG CURRENT E-CIGARETTE USERS AGED 45 YEARS AND OLDER in 2015, most were either current or former regular cigarette smokers, and 1.3% had never been cigarette smokers.

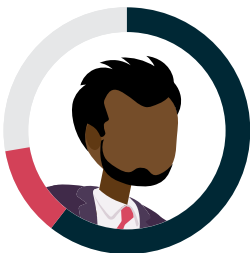
IN CONTRAST, AMONG CURRENT E-CIGARETTE USERS AGED 18-24 YEARS, 40.0% had **NEVER BEEN** regular cigarette smokers

ADULTS

IN 2015, AMONG ADULT E-CIGARETTE USERS OVERALL:

29.8%
were former regular cigarette smokers

11.4%
had never been regular cigarette smokers



58.8%
were current regular cigarette smokers

In 2017, **2.8%** of U.S. adults were current e-cigarette users



COVID-19 AND LUNG HEALTH



SMOKING, VAPING & COVID-19: WHAT ARE HEALTH ORGANIZATIONS AND EXPERTS SAYING?

Dr. Nora Volkow, Director of the U.S. National Institute on Drug Abuse

“Because it attacks the lungs, the coronavirus that causes COVID-19 could be an especially serious threat to those who smoke tobacco or marijuana or who vape. ...

Thus far, deaths and serious illness from COVID-19 seem concentrated to those who are older and who have underlying health issues, such as diabetes, cancer, and respiratory conditions. It is therefore reasonable to be concerned that compromised lung function or lung disease related to smoking history, such as chronic obstructive pulmonary disease (COPD), could put people at risk for serious complications of COVID-19. ...

Vaping, like smoking, may also harm lung health. Whether it can lead to COPD is still unknown, but emerging evidence suggests that exposure to aerosols from e-cigarettes harms the cells of the lung and diminishes the ability to respond to infection.” ([COVID-19: Potential Implications for Individuals with Substance Use Disorders – NIDA, Mar. 24, 2020](#))

“Much is still unknown, but it can be expected that persons who smoke, vape, or use certain drugs will be at increased risk for infection and its more severe consequences...” ([Dr. Nora Volkow, “Collision of the COVID-19 and Addiction Epidemics,” Annals of Internal Medicine, Apr. 2, 2020](#))

U.S. Food and Drug Administration

“Cigarette smoking causes heart and lung diseases, suppresses the immune system, and increases the risk of respiratory infections. ... People who smoke cigarettes may be at increased risk from Covid-19, and may have worse outcomes from Covid-19.” ([“FDA Shifts Its Covid-19 Stance on Vaping, Smoking Impact,” Bloomberg Government, Apr. 15, 2020](#))

U.S. Centers for Disease Control and Prevention

“We also know that tobacco smoking can increase the risk for developing lung disease, making it harder to recover from lung diseases or infections such as COVID-19. And so we do encourage you to have your patients quit smoking or think about that, and they can call 1-800-QUIT-NOW or visit the CDC website at <http://www.cdc.gov/quit> for help or more information about that.” ([Dr. Georgina Peacock, “COVID-19 Response At Risk Task Force Lead, CDC, Underlying Medical Conditions and People at Higher Risk for Coronavirus Disease 2019 \(COVID-19\),” CDC Clinician Outreach and Communication Activity \(COCA\) Call, Mar. 27, 2020](#))

“Cigarette smoking can suppress the immune system and cause heart and lung diseases. A person who smokes may be at greater risk for, and may have a harder time recovering from, COVID-19.” (Dr. Brian King, “Update with CDC for Chronic Disease Partners on COVID-19,” American Lung Association, Apr. 17, 2020)

World Health Organization

“Tobacco smoking is a known risk factor for many respiratory infections and increases the severity of respiratory diseases. A review of studies by public health experts convened by WHO on 29 April 2020 found that smokers are more likely to develop severe disease with COVID-19, compared to non-smokers. ...

COVID-19 AND LUNG HEALTH

COVID-19 is an infectious disease that primarily attacks the lungs. Smoking impairs lung function making it harder for the body to fight off coronaviruses and other diseases. Tobacco is also a major risk factor for noncommunicable diseases like cardiovascular disease, cancer, respiratory disease and diabetes which put people with these conditions at higher risk for developing severe illness when affected by COVID-19. Available research suggests that smokers are at higher risk of developing severe disease and death.” ([“WHO statement: Tobacco use and COVID-19,” World Health Organization, May 11, 2020](#))

“Smoking damages your lungs and other parts of your body, and it makes you more vulnerable to [#COVID19](#) infection. It is the right time to quit smoking for a safer and better health.” ([@WHO, Twitter, Apr. 22, 2020](#))

Dr. Jerome Adams, U.S. Surgeon General

“Right now, in this moment, it is your day to quit smoking. [@CNN](#) shares how your lungs can make noticeable improvements in the days/weeks after quitting, giving you the edge to fight [#coronavirus](#) if you do become ill. [#COVID19](#)” ([@Surgeon General, Twitter, Apr. 4, 2020](#))

“Give your lungs the best chance at fighting not only [#COVID19](#), but all respiratory diseases. Quit smoking today by calling 1-800-QUIT-NOW. As my [#CessationSGR](#) details, you’ll experience immediate benefits.” ([@Surgeon General, Twitter, Apr. 4, 2020](#))

“Well, so far the demography definitely seems to be very different in the United States versus in other countries that saw this hit earlier, and we’re looking into that. There are theories that it could be because we know we have a higher proportion of people in the United States and also in Italy who vape. We don’t know if that’s the only cause, but it’s important for young people to know you can get this disease, you can be hospitalized from this disease, you can die from this disease, but most importantly, you can spread it to your loved ones, and so we need you to really lean in.” ([The Today Show, Mar. 23, 2020](#))

Dr. Tom Frieden, former Director of U.S. CDC, current President and CEO of Resolve to Save Lives

“People with coronavirus infection and cardiovascular disease, hypertension and diabetes are at least twice as likely to die. Smoking is especially deadly – one study found that smokers have 14 times greater odds of developing COVID-associated pneumonia than non-smokers. ...

Governments can protect heart health by raising taxes on tobacco (we’re going to need the revenue, and tobacco taxes are the single most effective way to encourage smokers to quit) and making all public places smoke-free (so we can go out and breathe air that is free of both coronavirus and cancer-causing smoke!). Currently, 4 out of 10 people in the U.S. aren’t fully protected by smoke-free indoor air policies in all bars, restaurants and worksites. ...

Because people with chronic disease are the most likely to require scarce intensive care beds, and the most likely to die, it’s more urgent than ever that we act, now, to help people quit smoking, be physically active, and get their blood pressure and diabetes under control. And it’s not just for their own sake – all of us will be safer when each of us is healthier.” ([“Former CDC Chief Dr. Tom Frieden: Coronavirus and cardiovascular disease – stopping a deadly duo,” Fox News, Mar. 25, 2020](#))

Albert Rizzo, M.D., Chief Medical Officer, American Lung Association

“Cigarette smoking and vaping are linked to lung inflammation and lowered immune function in the lung’s airways both of which can increase likelihood of complications if exposed to COVID-

19. Therefore, long-term smokers and e-cigarette users may have a higher risk of developing chronic lung conditions associated with severe cases." ([COVID-19: What Those with Lung Disease Should Know – American Lung Association, Mar. 26, 2020](#))

Dr. Neal Patel, Pulmonologist and Critical Care Medicine Specialist, Mayo Clinic

"Smoking makes you more susceptible to COVID-19, because it destroys some of your lung's natural defense mechanisms. Vaping may do the same thing. ... I recommend people stop vaping to maintain lung health and reduce the risk of developing severe disease if they contract COVID-19." ([What smokers should know about COVID-19 - Mayo Clinic, Mar. 24, 2020](#))

Dr. J. Taylor Hays, Director of the Nicotine Dependence Center, Mayo Clinic

"There is a long history of smokers having more severe respiratory illness in general and this is for a few well-established reasons. They clear mucus less efficiently, the cilia which get infectious particles and secretions out of the lungs, work less efficiently. Smoking also causes inflammation in the airways, which is made worse with respiratory illnesses. ...

People who quit for even a short time see an improvement in lung health quite quickly. For most smokers who don't already have serious lung injury, they will see immediate improvements in their health, and less opportunity for severe diseases including COVID-19." ([Smokers At Higher Risk Of Severe COVID-19 During Coronavirus Outbreak,](#) Forbes, Mar. 23, 2020)

Cleveland Clinic

"As with cigarette smoking, vaping can also compromise the respiratory system. This means that people who smoke or vape are more susceptible to lung infections. According to Dr. Humberto Choi, a pulmonologist and smoking cessation specialist at the Cleveland Clinic, recent studies have shown that aldehydes and other components found in vaping liquids can impair the immune function of cells found in the airway and lungs." ([Teens, Vaping and Coronavirus \(COVID-19\): Is There a Connection?, Mar. 20, 2020](#))

Massachusetts General Hospital

"Smoking and vaping have harmful effects on the body, including making it harder for the body to fight infections. This includes serious infections like COVID-19 (also called coronavirus). ... Quitting smoking and vaping can help protect you and your family from COVID-19." ([Smoking, Vaping and COVID-19: About the Connection and How to Quit,](#) Mar 26, 2020)

Dr. Stanton A. Glantz, Director of Center for Tobacco Control Research & Education, University of California San Francisco

"When someone's lungs are exposed to flu or other infections the adverse effects of smoking or vaping are much more serious than among people who do not smoke or vape." ([Reduce your risk of serious lung disease caused by corona virus by quitting smoking and vaping,](#) Stanton A. Glantz blog, Mar. 29, 2020)

Dr. Susan Walley, Chair of the American Academy of Pediatrics Section on Tobacco Control

"Right now, if you need a reason to quit, look no farther than COVID-19." ([Teens who vape should consider quitting now. Here's how to do it,](#) Mashable, Mar. 23, 2020.)

Truth Initiative

"As we confront the coronavirus, it is more important than ever for smokers to quit and for youth and young adults to stop using all tobacco products, including e-cigarettes, to protect their

COVID-19 AND LUNG HEALTH

health.” ([COVID-19: the connection to smoking and vaping, and resources for quitting, Mar. 24, 2020](#))

Dr. Aaron Bernstein, interim Director of the Center for Climate, Health, and the Global Environment at the Harvard T.H. Chan School of Public Health

“Given what we know now, it is very likely that people who are exposed to more air pollution and who are smoking tobacco products are going to fare worse if infected with covid than those who are breathing cleaner air, and who don’t smoke.” ([“The coronavirus is deadly enough. But some experts suspect bad air makes it worse.” The Washington Post, Mar. 15, 2020](#))

Dr. Sanjay Gupta, CNN Chief Medical Correspondent

“Young people are not immune from this coronavirus. People between the ages of 20 and 44, they make up 20% of the hospitalizations and we also know that about 20% of people between the ages of 18 and 34 vape so it’s anecdotal at this point, but it does stand to reason that if someone is creating some sort of lung injury as a result of smoking or vaping, and then they get the coronavirus on top of it, it could be a problem.” ([CNN New Day, Mar. 24, 2020](#))

Dr. Alok Patel, Pediatrician, New York-Presbyterian Hospital

“We know that e-cigarettes include chemicals such as propylene glycol, glycerol, and flavorings, and that these chemicals have the ability to go deep into your lungs and cause damage. When people become critically ill from COVID-19, this also involves the deep pockets of their lungs. It’s really scary to think about what could be happening in those that have both of these going on together.” ([“Vaping and e-cigarettes: Adding fuel to the coronavirus fire?,” ABC News, Mar. 26, 2020](#))

Dr. Joanna Cohen, Director of the Institute for Global Tobacco Control, Johns Hopkins Bloomberg School of Public Health

“It’s so early in terms of the studies that are being done, but I think it’s certainly a possibility that vaping and inhaling foreign substances into your lungs could make you more susceptible to other lung infections. And I guess what I would suggest is that young people shouldn’t think that they’re immune to COVID-19, particularly if they’re vaping.” ([“Does vaping make you more susceptible to coronavirus?,” CBS News, Mar. 10, 2020](#))

Dr. Tara Narula, Cardiologist, Lenox Hill Hospital (New York City), CBS News Medical Contributor

“Well, if there was ever a reason to quit, here’s another one. Anything that’s going to compromise your lungs is going to increase your risk of being susceptible. We know that smoking decreases your ability to really fight infection.” ([“Who is the most at risk for coronavirus?,” CBS This Morning, Mar. 10, 2020](#))

Matt Hancock, Secretary of State for Health and Social Care, United Kingdom

“It is abundantly clear from the research into previous coronaviruses that smoking makes the impact of a coronavirus worse.” ([Health Secretary: “It is abundantly clear that smoking makes the impact of a coronavirus worse” – ASH UK, Mar. 18, 2020](#))

Dr. Charlie Kenward, General Practitioner with NHS Bristol (UK)

“We are doing everything we can to keep people as safe and healthy as possible through this crisis. Stopping smoking also helps improve heart and lung conditions, wound healing and many other health conditions which will all carry on at the same time as COVID-19. Stopping smoking remains the single most effective thing people can do to improve their and their family’s health

COVID-19 AND LUNG HEALTH

both now and in the future.” ([Health Secretary: “It is abundantly clear that smoking makes the impact of a coronavirus worse” – ASH UK, Mar. 18, 2020](#))

Campaign for Tobacco-Free Kids, May 28, 2020

DRUG USE TRENDS AMONG U.S. TEENS

COMMUNITIES

YOUTHS

PARENTS

SCHOOLS

Drug Use Trends Among U.S. Teens

Monitoring the Future 2020 Survey Results

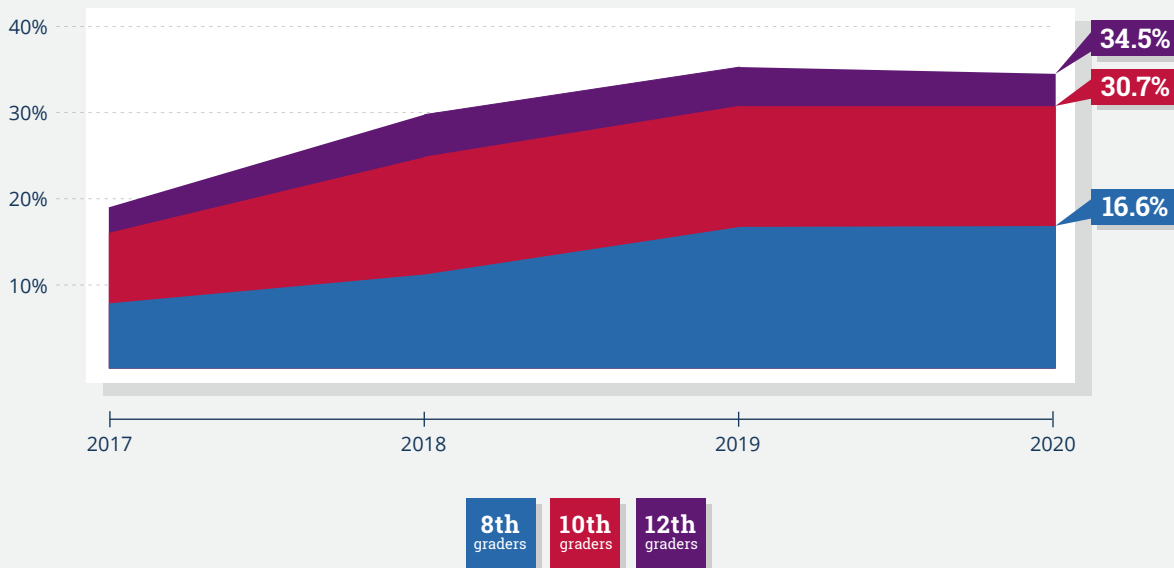
Monitoring the Future is an annual drug use survey of eighth, 10th and 12th grade students conducted by researchers at the University of Michigan, Ann Arbor, and funded by the National Institute on Drug Abuse.

[More than **11,800 students** from **112 schools** across the United States participated in the 2020 survey.*]

*Data collection stopped prematurely due to the COVID-19 pandemic. Completed surveys represent about 25% of the size of a typical year's data collection. However, results were gathered from a broad geographic range and were statistically weighted to be nationally representative.

Surge of Nicotine Vaping Levels Off, but Remains High

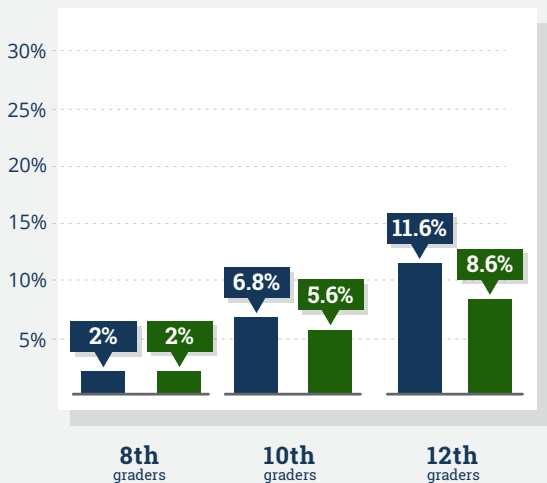
Past-Year Nicotine Vaping Held Steady



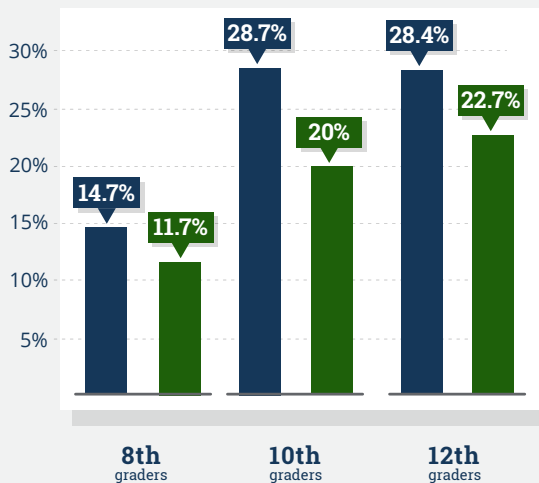
Graphic continued on the next page.

DRUG USE TRENDS AMONG U.S. TEENS

Daily or Near-Daily Nicotine Vaping



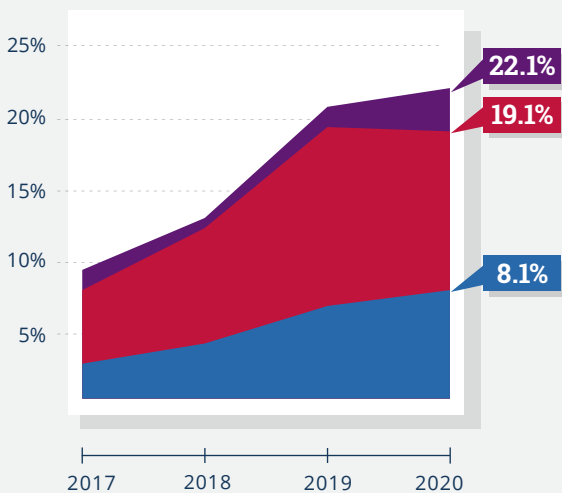
Past-Year JUUL Use Dropped Significantly Among Older Grades



2019 2020

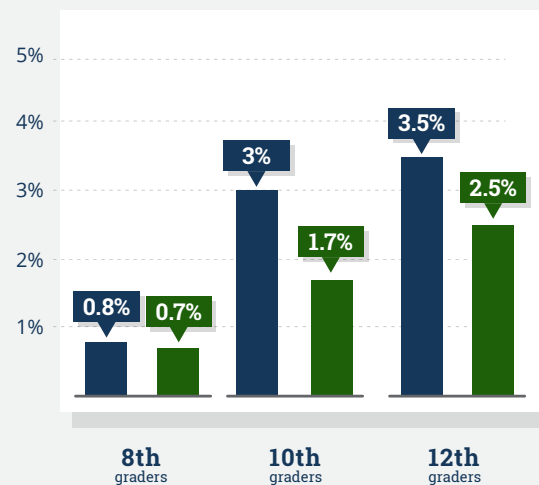
Past-Year Marijuana Vaping Holds Steady

Past-Year Marijuana Vaping



8th graders 10th graders 12th graders

Daily or Near-Daily Marijuana Vaping Decreases Significantly Among 10th Graders



2019 2020

Graphic continued on the next page.

DRUG USE TRENDS AMONG U.S. TEENS

COMMUNITIES

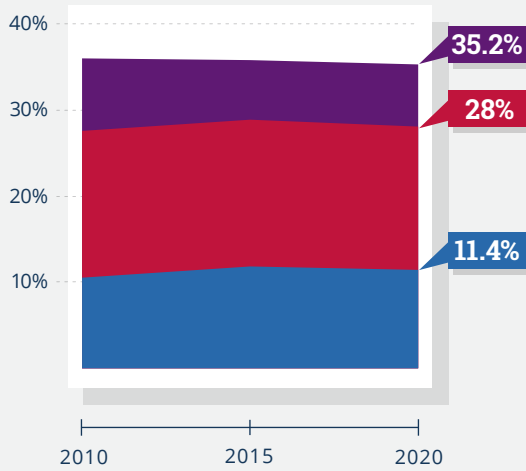
YOUTHS

PARENTS

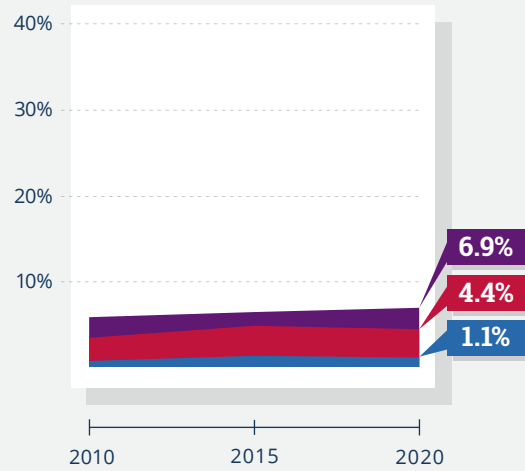
SCHOOLS

Marijuana Use Remains Steady

Past-Year Marijuana Use



Daily Marijuana Use

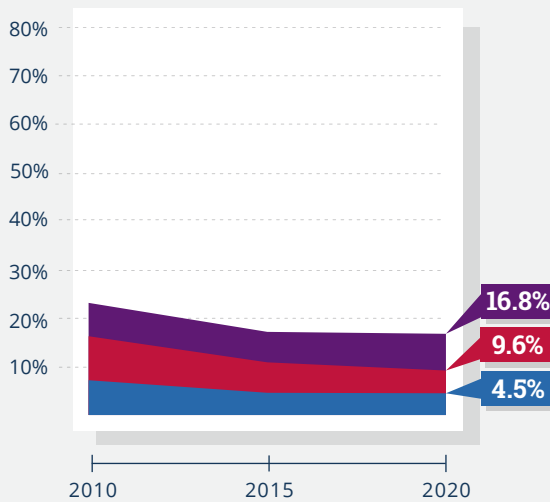


8th graders 10th graders 12th graders

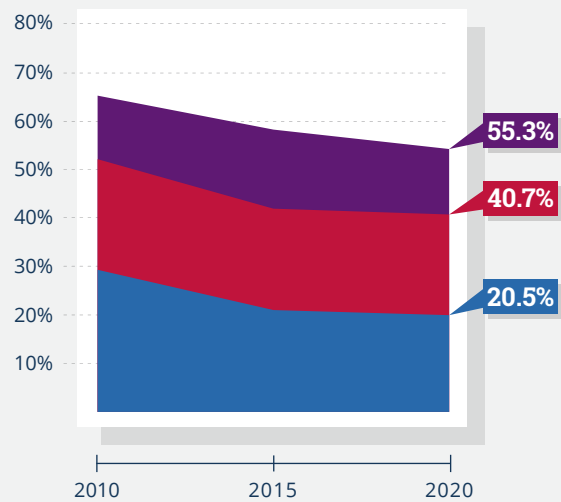
Gradual Decline in Alcohol Use Slows

Long-term trend of decreasing alcohol use among all grades levels off.

Binge Drinking*



Past-Year Alcohol Use



*5 or more drinks in a row in the past two weeks

8th graders 10th graders 12th graders

Graphic continued on the next page.

DRUG USE TRENDS AMONG U.S. TEENS

COMMUNITIES

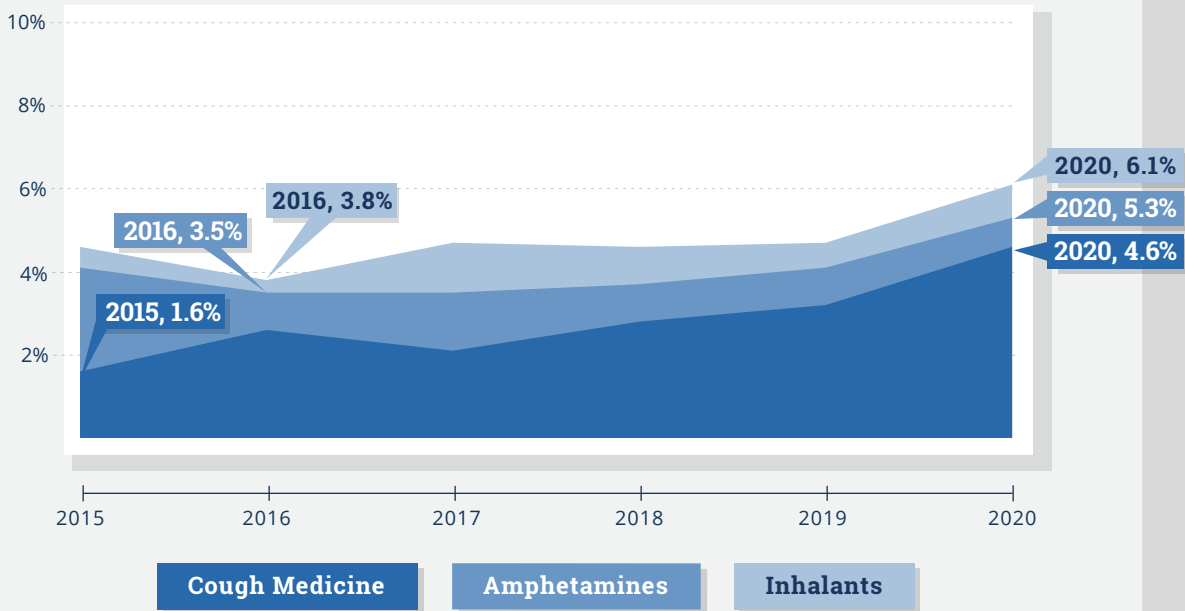
YOUTHS

PARENTS

SCHOOLS

Amphetamine, Inhalant & Cough Medicine Misuse Trending Upward Among Eighth Graders

Past-Year Substance Misuse Among Eighth Graders



NC MUNICIPALITY 100% TOBACCO-FREE/ SMOKE-FREE WRITTEN REGULATIONS

NORTH CAROLINA MUNICIPALITY 100% TOBACCO-FREE OR SMOKE-FREE WRITTEN REGULATIONS



LEGEND:

- 100% Tobacco Free Policy
- 100% Smoke Free Policy
- No Written Regulation or Less than 100% Written Regulation

| | County | | Local Health Dept. Region | Gov't Buildings | Gov't Vehicles | Gov't Grounds | Gov't-Owned Parks Only | Recreation Areas | Public Places |
|------------------------------------|--------|---|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| Rolesville | WAKE | 7 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Wendell | WAKE | 7 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Holly Springs | WAKE | 7 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Morrisville | WAKE | 7 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Wake Forest | WAKE | 7 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Knightdale | WAKE | 7 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Apex | WAKE | 7 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Cary | WAKE | 7 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Garner | WAKE | 7 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Raleigh | WAKE | 7 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Zebulon | WAKE | 7 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fuquay-Varina | WAKE | 7 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| TOTAL # OF PLACES STATEWIDE | | | 230 | 154 | 70 | 101 | 100 | 12 | |

Definitions: Government Buildings- area owned, leased, and occupied by the Municipality; Government Vehicles-passenger-carrying vehicles owned, leased, or otherwise controlled by the Municipality; Government Grounds-unenclosed area owned, leased or occupied by the Municipality; Government-Owned Parks- any tract of land or body of water comprising part of the Municipality's parks system; Recreation Areas- includes recreational fields, athletic fields, playgrounds, etc.; Public Places- an enclosed area to which the public is invited or in which the public is permitted

Note: Table based on current policies that have been passed and reported to the TPCB and therefore do not reflect the status of ongoing efforts by counties to pass legislation. For resources and guidance on implementing SF and TF policies, see the Local Government Implementation Toolkit (<http://www.tobaccopreventionandcontrol.ncdohhs.gov/lgttoolkit/index.htm>).

Source: Information updated on a regular basis. Please contact NC TPCB at 919-707-5400 with questions, or to provide updated information. Visit <http://www.tobaccopreventionandcontrol.ncdohhs.gov/> for more information.

NC COUNTYWIDE 100% TOBACCO-FREE/ SMOKE-FREE WRITTEN REGULATIONS

NORTH CAROLINA COUNTYWIDE 100% TOBACCO-FREE OR SMOKE-FREE WRITTEN REGULATIONS

LEGEND:

| | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | 100% Tobacco Free Policy |
| <input checked="" type="checkbox"/> | 100% Smoke Free Policy |
| <input type="checkbox"/> | No Written Regulation or Less than 100% Written Regulation |



| | | Local Health Dept. Region | Government Buildings | Government Vehicles | Government Grounds | Gov't-Owned Parks Only | Recreation Areas | Public Places |
|------------------------------------|----|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| ORANGE | 5 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| DURHAM | 5 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| BUNCOMBE | 2 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| WAKE | 7 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| MECKLENBURG | 4 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| GUILFORD | 5 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| NEW HANOVER | 8 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| PITT | 10 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| TOTAL # OF PLACES STATEWIDE | | 84 | 62 | 21 | 28 | 32 | 2 | |

Definitions: Government Buildings- area owned, leased, and occupied by the County; Government Vehicles-passenger-carrying vehicles owned, leased, or otherwise controlled by the County; Government Grounds-unenclosed area owned, leased or occupied by the County; Government-Owned Parks- any tract of land or body of water comprising part of the County's parks system; Recreation Areas- includes recreational fields, athletic fields, gymnasiums, etc.; Public Places- an enclosed area to which the public is invited or in which the public is permitted

Note: Table based on current policies that have been passed and reported to the TPCB and therefore does not reflect the status of ongoing efforts by counties to pass legislation. For resources and guidance on implementing Smoke-Free and Tobacco-Free policies, see the Local Government Implementation Toolkit (www.tobaccopreventionandcontrol.ncdhhs.gov/Igtoolkit).

Source: Information updated on a regular basis. Please contact NC TPCB at 919-707-5400 with questions, or to provide updated information. Visit www.tobaccopreventionandcontrol.ncdhhs.gov/ for more information.



American Heart Association.

Youth and Tobacco: A New Crisis

The **tobacco endgame** – the path to ending tobacco use and nicotine addiction in the U.S. – is within sight. This could save millions of lives.

But e-cigarettes and other products like cigarillos, hookah and smokeless tobacco pose a significant threat. They are gaining popularity, especially with kids and young adults.

Addicting a New Generation

Not only are more **kids and young adults** using e-cigarettes, they are **using them more often**.

1 IN 5

high school age kids

now report using e-cigs (vaping). They are the most popular tobacco product used by adolescents.

Many adolescents falsely believe these new products are safe. Some don't even realize they contain nicotine. But they can deliver much higher concentrations of addictive nicotine than traditional cigarettes.

There is evidence that kids and young adults may transition from these products to cigarettes and other drugs.



Nearly **90 PERCENT** of smokers **first try a tobacco product by age 18**. But if someone has not started using tobacco by age 26, they are likely to never start.

Seeing Through the Smoke Screen

Tobacco companies have grown bolder in their efforts to keep people addicted and misinformed:



They fund lawsuits to prevent or weaken tobacco-control policies.



They spend millions lobbying lawmakers to oppose such policies.



They target products and promotions to youth and at-risk populations.



They support watered-down and less effective tobacco-control measures as a public relations ploy.



They fund organizations and groups that claim to address the tobacco epidemic but instead divert attention from proven measures.

What Is Needed

Reaching the tobacco endgame and **preventing use by kids and young adults** will require strong government oversight. We need **stronger regulation** of the design, manufacturing, sales and marketing of all tobacco products. For example:



Restrict marketing efforts like celebrity endorsements, movie placements, price promotions, event sponsorships and merchandise branding.



Ban flavors and sweeteners to reduce appeal to kids.



Put graphic warning labels and nicotine concentration info on all products.



Verify the effectiveness of products marketed to help people stop smoking.

What Works

We must also continue to **support proven strategies and public policy**:



public education campaigns



clean indoor air laws



access to and coverage of evidence-based methods to quit tobacco use and nicotine addiction



tobacco excise taxes



raise the tobacco sales age to 21

What You Can Do

- 1. Advocate** for strong, comprehensive tobacco policies.
- 2. Talk with young people** in your life about the dangers of any tobacco or nicotine use.
- 3. Join local efforts** in your community and state at yourethecure.org.

Learn more at
heart.org/tobaccoendgame

E-CIGARETTES, VAPES, AND JUULS: WHAT TEENS SHOULD KNOW.

† AMERICAN LUNG ASSOCIATION.



E-cigarettes, Vapes, and JUULs What Teens Should Know

What are e-cigarettes?

Electronic cigarettes, or e-cigarettes, include vapes, hookah pens, or JUULs. They are battery-powered devices that heat an e-liquid sometimes called “e-juice” that often contains nicotine. E-cigarettes are inhaled like regular cigarettes and produce an aerosol cloud of nicotine or other substances. They are not proven to be a safer alternative to cigarettes.

Is there a difference between using e-cigarettes and JUULing?

- No. JUULs may look different, but they’re actually a type of e-cigarette.

Every JUUL pod contains highly addictive nicotine. JUUL does not make any nicotine-free pods. Some JUUL pods claim to have roughly as much nicotine as an entire pack of cigarettes.

- The aerosol cloud produced by a JUUL might not look as thick as other e-cigarettes’ or regular cigarette smoke, but it still contains many of the same chemicals and has the same health risks.

Aren’t e-cigarettes less harmful than tobacco? Isn’t it just water vapor?

- The aerosol produced by e-cigarettes isn’t water vapor and it isn’t harmless.

The aerosol inhaled from these products is often a mixture of harmful chemicals like nicotine, formaldehyde and acrolein.

- Virtually all e-cigarettes contain nicotine – even the ones labeled “nicotine free”. This is because there are no rules about how e-cigarettes or “e-juice” are made. There is no way to know exactly what is in an e-cigarette.
- “E-juice” and JUUL pods flavored like fruit or other treats carry the same health risks as the unflavored products. Also, the flavorings used are typically not safe to be inhaled into the lungs.

E-CIGARETTES, VAPES, AND JUULS: WHAT TEENS SHOULD KNOW.

What are the health risks of e-cigarettes?

- E-cigarettes contain chemicals that can cause irreversible lung damage and alter teen brains.

E-cigarettes contain harmful chemicals such as formaldehyde, which is known to cause cancer, and acrolein which is used as a weed killer and can cause irreversible lung damage.

- Nicotine is highly addictive and exposure during adolescence can harm the developing brain.
- Youth who use e-cigarettes are more likely to go on to use traditional cigarettes.
- In the short term, e-cigarette aerosol can irritate your lungs, throat and eyes. It can also make it more likely that you'll catch colds or get the flu.



1-800-LUNGUSA | Lung.org

Is it legal for people to sell e-cigarettes to youth or for youth to buy or use them?

- In the majority of states, the minimum age of sale for e-cigarettes is 18; in three states the minimum age is 19 and in six states and DC the minimum age is 21.

In many states, it is illegal for retailers to sell youth e-cigarettes, and in some states it is also illegal for youth to possess e-cigarettes.

- Many schools have added e-cigarettes to their tobacco-free school policies and the consequences for using them on school grounds are often the same as smoking traditional cigarettes.

Can e-cigarettes help someone quit?

- No e-cigarette has been found to be safe and effective to help people quit smoking.
- If you know someone who wants to quit smoking, they can call **1-800-LUNGUSA (1-800-586-4872)** or visit **www.Lung.org** to learn about quitting safely.

Learn more:

Contact your local American Lung Association office for information on youth leadership groups and other youth tobacco initiatives. **1-800-LUNGUSA** or **www.Lung.org**



What Families Need to Know
to Help Protect Children, Teens
and Young Adults

VAPING: WHAT PARENTS NEED TO KNOW TO HELP TEENS

Introduction

Vaping has become one of the most popular forms of substance use among young people, despite growing evidence of its health risks and harms. Vaping is the act of inhaling and exhaling the aerosol produced when using an electronic vapor device. Typically, the ingredients include nicotine, flavorings and other chemicals, many of which are toxic. Some vaping products contain marijuana or other drugs.

According to the U.S. Centers for Disease Control and Prevention (CDC), 27.5% of high school students and 10.5% of middle school students in 2019 reported using a vaping product (also known as an electronic or e-cigarette) in the past 30 days. These numbers represent a 32% increase among high school students and a staggering 114% increase among middle school students since just the year before, despite growing awareness about the dangers of vaping.

As parents and caregivers, we want to do all that we can to protect our children from the negative effects that vaping can have on a young person’s developing brain. Whether a child has not yet tried vaping, has already begun to vape or vapes regularly, this guide can help you. We break down what vaping is, why it appeals to youth, what the health risks are and what you can do to protect young people from its harms.

What Is in This Guide?

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More than 1 in 4
high school
students reported
vaping in the
past month.

CDC’s National Youth Tobacco
Survey, 2019

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Teen using a JUUL

This guide was made possible by a grant from
The Achelis & Bodman Foundation

VAPING: WHAT PARENTS NEED TO KNOW TO HELP TEENS

VAPING / What is vaping?

What is Vaping?

Vaping is the act of inhaling and exhaling the aerosol that is produced by an electronic vapor device when it heats up its liquid ingredients. Because of the rise in popularity of JUUL, currently the most popular brand of vaping device, many teens and young adults use the term “JUULING” (pronounced Jewelring), instead of vaping, when referring to the use of these products. More formally, these products are sometimes referred to as electronic cigarettes, or e-cigarettes. Less formally, some simply call them “vapes.” The contents of most vaping liquids (e-liquids) include nicotine, flavoring chemicals and other chemicals. Some vaping products contain (or are modified to contain) marijuana or THC, the psychoactive ingredient in marijuana.

What do vaping devices look like?

Vaping products, or vapes, come in many shapes and designs. Original devices intentionally looked like cigarettes, cigars or pipes so that they would feel familiar and appealing to smokers. Larger devices, known as tank systems or “mods,” do not look like cigarettes or other tobacco products but can be customized or modified by the consumer to have different flavors, nicotine doses or temperature limits. Today, vapes are small and discreet and resemble modern technology products, such as USB sticks/flash drives or cell phones, and other everyday objects like a pen, eraser or lipstick. Some are disposable while others can be reused by charging the device in the USB port of a computer or outlet charger and by replacing the e-liquid, either by filling the chamber or by using a replacement pre-filled pod or cartridge.

What is being vaped?

Although many substances can be vaped, teens and young adults most commonly vape flavored e-liquids with nicotine or marijuana (THC).

Thousands of flavoring chemicals. Vapes come in thousands of tasty, unmistakably child-friendly flavors, many with fun and enticing names. The flavors mask the harsh taste of nicotine and other chemicals contained in the e-liquid, making it easier to inhale the aerosol. Sweet, fun flavors like gummy bear and cotton candy often remind teens of happy childhood experiences, making them feel harmless. Recent crackdowns on flavors by federal, state and local governments have begun to shift the landscape of preferred vaping products among youth. Now that flavors, aside from menthol and tobacco, are generally banned in pod-based or closed-system devices like JUUL, [loopholes](#)

Vaping is illegal for anyone under the age of 21, according to federal law and many state and local laws. The 21-age limit applies to all tobacco-nicotine products and to all marijuana products in states where marijuana is legal.



Some vaping devices look like regular cigarettes, cigars or pipes, while others resemble USB sticks, guitar picks, small cellphones, lipstick, watches or other everyday items and tech devices.

VAPING: WHAT PARENTS NEED TO KNOW TO HELP TEENS

VAPING / What is vaping?

[in the regulations](#) are driving kids to flavored disposable vapes that have even higher nicotine content and come in countless enticing flavors.

High levels of nicotine. Nicotine doses can range from 2mg/ml to more than 59mg/ml, and some companies are engaging in “a nicotine arms race,” trying to raise the dose to levels that exceed those found in regular cigarettes or competing vapes. Currently, one of the most popular vapes, JUUL, contains 59mg/ml of nicotine in each pod in the United States – an amount equal to about 1-2 packs of cigarettes.

Other chemicals, metals and ultrafine particles. The aerosol, which many teens believe is harmless water vapor, actually consists of many chemicals, heavy metals and fine particles – many of which are toxic and dangerous – and seep deep into the lungs and bloodstream when vaping.

Marijuana or other drugs. Increasingly, marijuana ingredients are found in vapes, including THC (the psychoactive compound in marijuana that creates a sense of being high), the leaf form of marijuana, or CBD. Vapes are sometimes used to inhale other drugs, as well.

What is vaping’s appeal?

Most vapes are discreet, easy to hide and generally seen as cool and relatively harmless. They come in thousands of tasty flavors that help cover the harsh taste of the chemicals and override the sense that these products might be harmful. They also produce a brief positive sensation or ‘head rush’ that some people like.

Most also have very high doses of nicotine, which can rapidly make those who vape develop an addiction or become dependent on the product. Some young people are also drawn to the “vape tricks” and “cloud competitions,” where they form cloud-like shapes or patterns when exhaling the vape’s aerosol. These tricks are usually performed with modifiable devices, or ‘mod’ style vapes. People will breathe aerosol deep into their lungs and then exhale it through their ears, eyes or nose.

Teens say they vape for many reasons. Curiosity is one, and peer pressure is another. They see friends or family members vaping and they are drawn to the appealing flavors. For others, it’s to do vape tricks. Some also say they do it because they feel it is less harmful than other tobacco products and it’s also discreet.



Vaping tricks, such as “The Dragon,” shown above, are another major attraction of vaping.

What are the Health Effects of Vaping?

It is now **widely recognized** that vaping is unhealthy and dangerous, even if it might not be quite as unhealthy and dangerous as smoking traditional, combustible cigarettes.

The more immediate health effects include coughing and wheezing, behavioral and mood changes, headaches, seizures, vomiting and potential severe lung injury. Vaping also negatively affects teens' attention, learning, and impulse control in a way that can affect them in school, sports and social situations.

Nearly all vapes contain nicotine, one of the most addictive substances, and in many cases as much as or more than in traditional cigarettes. Nicotine negatively affects the cardiovascular system (increasing heart rate and blood pressure and the risk of heart attack and stroke), respiratory/lung functioning (including inflammation, asthma and wheezing) and reproductive organs. People who vape can quickly become addicted and are at increased risk of starting to smoke cigarettes or use other addictive products. Taking in high doses of nicotine can lead to nicotine toxicity, which in severe cases can give rise to seizures as well as nausea, vomiting, diarrhea, excessive salivation, dizziness, respiratory failure, coma and paralysis.

The other ingredients in vapes, including the flavorings, are harmful as well. Most contain cancer-causing and other toxic chemicals, heavy metals and tiny particles that go deep into the lungs and cause lung damage, cell damage and reduced ability to fight off infections.

Exposure to Nicotine

Nicotine is a stimulant that makes the nervous system prepare the body for physical and mental activity. It causes breathing to become more rapid and shallow, as well as increases heart rate and blood pressure. Nicotine exposure from vaping varies considerably depending upon the contents of the e-liquid, the type of device used and how it is used.

Vaping exposes young people to nicotine at a time when the human brain is most at risk for addiction. Because the brain continues to develop until early adulthood, roughly age 25-30, use of any addictive substance prior to these years is especially risky. Young people who vape are affected more intensely than are adults by nicotine.

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Although some of the flavoring chemicals have been deemed safe when eating or drinking, **once they are heated to produce an aerosol, they form additional harmful compounds** that have been found to cause lung damage.

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VAPING: WHAT PARENTS NEED TO KNOW TO HELP TEENS

VAPING / What are the health effects of vaping?

Exposure to toxic chemicals and other harmful ingredients

Vapes contain a number of chemicals, metals and ultrafine particles that are poisonous when they are heated to form an aerosol and then inhaled. Because of their chemical makeup, certain popular flavors – such as cinnamon, vanilla, butter, and mint – are especially harmful. Although some of the flavoring chemicals have been deemed safe when eating or drinking, once they are heated to produce an aerosol, they form additional harmful compounds that have been found to cause lung damage. There also is evidence that some metals and other components of vape can seep into the e-liquid and enter the lungs during the heating and inhalation process, causing lung damage ranging from mild to severe.

Addiction

Nicotine is a highly addictive substance. People who vape can quickly become addicted to the nicotine that is in nearly all vapes, and are at increased risk of starting to smoke cigarettes or use other addictive substances. When a person stops vaping, even for a short period, they can experience withdrawal including strong cravings, irritability, fatigue, headache, sleeplessness and difficulty concentrating. These symptoms can be quite intense, driving them right back to the nicotine product, even when they want to quit. In fact, many people who are able to stop smoking cigarettes by switching to vaping find it extremely difficult to quit vaping due to the very high doses of nicotine and the ease of consuming it through vapes.

Cigarette smoking

Teens and young adults who vape are significantly more likely than those who do not vape – [about four times as likely](#) – to end up smoking traditional cigarettes. This is true of young people who never smoked cigarettes and had no intention of, likelihood to or interest in doing so. Strong and consistent research also shows that vaping is not a safe or reliable way to quit smoking. For many people, vaping can actually [make it more difficult to quit smoking](#).

Multiple tobacco product use

Young people who vape [have five times the likelihood](#) of those who do not vape to use tobacco products such as cigarettes, hookah, cigars or pipes. The

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Many people who are able to stop smoking cigarettes by switching to vaping find it **extremely difficult to quit vaping due to the very high doses of nicotine** and the ease of consuming it through vapes.

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VAPING: WHAT PARENTS NEED TO KNOW TO HELP TEENS

VAPING / What are the health effects of vaping?

majority of people who vape to help them quit smoking end up becoming ‘dual users,’ smoking in places and situations where they can and vaping in places and situations where smoking is impossible. Dual users, therefore, actually take in more nicotine and other potentially toxic chemicals than people who only vape or only use other tobacco products.

Injuries and poisonings

Vaping devices, especially those with poor quality batteries that have been stored improperly or have been modified by the user, can malfunction or explode. This results in burns and other injuries. Young people exposed to e-liquids through the mouth, eye or skin contact can experience nicotine poisoning, resulting in vomiting, seizures, brain injury or death.

Cardiovascular, respiratory, reproductive and immunity effects

More and more, nicotine and other chemicals in vapes are being tied to increasing heart rate and blood pressure and the risk of heart attack and stroke, as well as inflammation, asthma and wheezing. They also can cause inflammatory processes and depress immune function in lungs, and are associated with chronic bronchitis and reduced ability to fight off bacterial and viral infections including [COVID-19](#).

Vaping poses a significant risk to young people when it comes to contracting, transmitting and experiencing the health effects of COVID-19. [A recent national survey](#) of adolescents and young adults found that young people who have vaped were 5 times more likely than those who haven’t vaped to be diagnosed with the virus and the risk of being diagnosed and experiencing its symptoms was even higher among those who both vaped and smoked cigarettes. The risk of contracting (and transmitting) the virus might be higher simply because of the need to remove masks to vape and because of repeated contact between one’s hand, the device and one’s mouth while vaping. Perhaps most importantly, because vaping weakens the cardiovascular, respiratory and immune systems, one’s vulnerability to contracting the virus and experiencing its symptoms is elevated among those who vape.

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Dual users actually take in **more nicotine and other potentially toxic chemicals** than people who only vape or only use other tobacco products.

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Marijuana and Vaping

The practice of using vaping devices to consume marijuana or cannabis products is becoming increasingly widespread. Recent data show that many youth who vape, especially older teens, are not just vaping nicotine. Many are vaping THC, the psychoactive ingredient in marijuana that produces a high. [National data from 2019](#) show that 21% of 12th graders, 19% of 10th graders and 7% of 8th graders reported vaping marijuana in the past year, each a significant increase over the previous year. [Other national data](#) show that 15% of middle and high school students, and 43% of those who ever used vapes, have vaped marijuana.

Different from most plant-based marijuana, the level of THC in marijuana vapes can be far higher. Therefore, vaped marijuana tends to be much more potent than smoked marijuana.

Some marijuana vapes look like nicotine vaping devices (e.g., PAX brand, which resembles JUUL products); come in loose leaf, concentrate or extract forms; are available in youth-friendly flavors and names; and are virtually odorless. The THC inhaled when vaping enters the bloodstream quickly and can lead to overuse, addiction and other negative health consequences. Vaping marijuana can cause bloodshot eyes, dry mouth, increased appetite, mood swings and can increase the risk of depression, psychosis and suicidality. Marijuana vaping has also been implicated in the [recent spate of vaping-related lung injuries and deaths](#) known as EVALI (E-cigarette, or Vaping, product use Associated Lung Injury).

Marijuana use, regardless of how it is ingested, can have long-lasting effects on the developing teen brain. **Negative effects include:**

- ▶ Impaired attention, learning, problem-solving skills, memory and other cognitive functions
- ▶ Impaired reaction time and coordination, especially related to driving
- ▶ Academic or job difficulties, school dropout
- ▶ Increased risk of mental health issues including depression, anxiety and, in some cases, psychosis and suicidal thoughts
- ▶ Marijuana use disorder (addiction) and other substance use and addiction

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The level of THC in marijuana vapes can be far higher. Therefore, **vaped marijuana tends to be much more potent than smoked marijuana.**

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VAPING: WHAT PARENTS NEED TO KNOW TO HELP TEENS

VAPING / Marijuana and vaping

The likelihood of developing a marijuana use disorder, or addiction to marijuana, is about **twice as high** among teens than among adults who use marijuana.

EVALI - Vaping-Related Lung Injuries

In the past year, there has been a wave of severe lung injuries and deaths associated with vaping. The condition, known as **EVALI** (E-cigarette, or Vaping, product use Associated Lung Injury), has sickened more than 2,800 people and has led to nearly 70 deaths across the country.

Symptoms include shortness of breath, weight loss, night sweats, fatigue, gastrointestinal problems, low oxygen levels and, in severe cases, lung failure and death. Most cases require admission to a hospital for treatment. While the federal government is investigating its precise cause, it has recommended avoiding use of any vapes, especially those containing THC, the psychoactive ingredient in marijuana, and those bought through illegal channels. Illegal sales appear to be the root in the majority of the tested cases (although several cases have been identified in which the adulterated vaping product came from a regulated marijuana dispensary). More than 150 different brands of THC-containing vapes have been implicated in cases of EVALI, and the ingredient that appears to be primarily responsible is Vitamin E Acetate. This ingredient is generally considered safe for eating in foods such as vegetable oils, cereals, meat, fruits and vegetables, or in vitamin or skin care products. However, it is not safe for inhalation into the lungs.

Since EVALI may be a life-threatening condition, a health care professional should be contacted immediately if a child demonstrates the symptoms of EVALI, especially in the absence of a lung infection.

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In the past year, EVALI has sickened more than 2,800 people and has led to nearly 70 deaths across the country.
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In the event of life-threatening symptoms, call your local poison control center at 1-800-222-1222 or emergency services at 911.
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VAPING: WHAT PARENTS NEED TO KNOW TO HELP TEENS

VAPING / What parents should know and do

What Parents Should Know and Do

What are the signs of vaping?

The following are some indicators that your child may be vaping:

| | |
|--|--|
| Equipment | You may find devices that look like flash (USB) drives, e-liquid bottles, pods/ cartridges (that contain e-juice) or product packaging. Aside from leaf marijuana, gel jars that contain highly concentrated marijuana extract (dabs), small tools to scoop dabs and cartridges that contain THC oil or wax (a yellowish-brown substance) are signs of vaping marijuana. |
| Online purchases / packages in the mail / store purchases | Be on the lookout for purchases made online and charged to your credit card or unusual packages that arrive in the mail. Kids also buy them at big box stores, gas stations or from friends. |
| Scent | While the smell from vaping is faint, you may catch a whiff of a flavoring where there appears to be no other source. For example, if you smell bubble gum or chocolate cake, take note. It might be a flavored nicotine vaping product. Marijuana vapes can produce a skunk-like smell. |
| Increased thirst / nosebleeds / interest in stronger flavors | Some of the chemicals used in e-juices dry out the mouth and nose. As a result, some kids drink more liquids, have nosebleeds and may show a desire for stronger flavors (when the mouth is dry, flavor perception is reduced). |
| Decreased caffeine use | Some teens and young adults who vape nicotine develop a sensitivity to caffeine because both nicotine and caffeine are stimulants. Taking multiple stimulants can result in feelings of anxiety. If your child drank caffeinated energy drinks and has cut back or quit, it may be because of vaping. |
| Vaping slang | You may see vaping slang in text messages such as “atty” for an atomizer, “VG” for vegetable glycerin found in e-juice or “sauce” referring to e-juice. Getting “nicked” refers to the euphoria experienced with high doses of nicotine and feeling “nic sick” refers to heart palpitations, nausea/vomiting or lightheadedness associated with the overuse of nicotine vapes. |
| Social media and online references | Kids often brag about their vaping exploits on social media. Look for pictures or references on their Instagram, Snapchat, YouTube, Twitter and other social media accounts. Take note of popular vaping terms in their online searches. |
| Appearance and behavior changes | Vaping nicotine may lead to anxiety, irritability, difficulty concentrating and loss of appetite. Vaping marijuana can result in bloodshot eyes, dry mouth and thirst, increased appetite and shifts in behavior and mood. Sometimes, there is a noticeable change in friends and a decrease in activities that were once enjoyed. |
| Physical symptoms | Physical side effects of vaping may include trouble breathing, headaches, cough, dizziness, sore throat, chest pain and allergic reactions such as itchiness or swelling of the lips. More severe effects include worsening of asthma symptoms, lung disease or failure and heart disease. |

VAPING: WHAT PARENTS NEED TO KNOW TO HELP TEENS

VAPING / What parents should know and do

What can parents do to safeguard against vaping?

Know the facts

Learn about the causes and consequences of youth vaping, be familiar with the popular brands and devices (e.g., JUUL, Suorin, Kandypens, Puff Bars, Stig, Posh), know what is being vaped (e.g., nicotine and/or marijuana, flavor types) and be prepared to answer your child's questions in an honest and credible way. It is better for them to come to you with questions instead of seeking out information from unreliable sources. To learn more, visit our [Vaping & e-Cigarettes page](#), download our [marijuana talk kit](#) or find a [companion PowerPoint presentation to this guide](#) created by Partnership to End Addiction.

Have conversations

Look for opportunities to discuss vaping with your child in a calm and reasonable way. When you think about it, there's likely no shortage of ways into this conversation: news stories, letters from the school about vaping policies, ads, seeing someone vaping on TV or on the street or passing a vape shop. Be ready to listen rather than give a lecture and be sure to focus on health and safety rather than threats and punishment. Try using open-ended questions to get the conversation going such as, "What do you think about vaping?" In these conversations, get their perspectives, acknowledge the potential appeal and help them weigh the risks against the perceived benefits. When answering their questions, offer honest, accurate, science-based information rather than trying to scare them, and try to have these conversations frequently, calmly and, if you can, before they try vaping.

Try to understand why

Most kids start vaping due to curiosity, because friends and family vape, the appealing flavors, to do vape tricks, or because they think it's cool or want to fit in. Over time, vaping can become habit-forming as kids do it to address other needs such as relief from boredom and anxiety. Some may become addicted to nicotine and continue vaping to avoid withdrawal symptoms. It helps to understand why your child is vaping by asking questions like: "What do you enjoy about vaping?" or "How does vaping make you feel?" Answers to these questions highlight your child's needs that can be addressed in a healthier way. It is also important to challenge children on their perceptions of norms. Teens tend to overestimate how many of their peers vape. Research shows that such overestimations increase the risk that they will vape to 'be normal' or just like their peers.

Convey your expectations

Set clear expectations. Share why you do not want your child to vape and point out that you expect your child not to vape. If you choose to set consequences, be sure to follow through and make sure that these consequences are not overly harsh or long-lasting. At the same time, try to encourage and reward healthier choices and ensure that your child has other means of having fun, feeling cool, fitting in, reducing stress and addressing anxiety or depression.

Role play resistance skills

Teach your child skills to resist pressures to use. Children in middle or high school are likely to be in social situations where they are offered an opportunity to try vaping. You might ask, "What would you say if someone offered you their vape?" See how your child would handle the situation. Practicing something along the lines of "No thanks, I'm not interested," said with direct eye contact and confident body language can help your child be prepared.

Set a good example

Set a positive example by being vape- and tobacco-free. If you do vape or smoke, keep your equipment and supplies secured.

VAPING: WHAT PARENTS NEED TO KNOW TO HELP TEENS

VAPING / What parents should know and do

What to do if your child is vaping

If your child vapes, try not to assume that it is just a phase or a “harmless rite of passage.” Vaping can be very addictive and most people do not just grow out of an addiction or become bored with it.

How worried should I be?

Vaping is serious and worthy of concern. Just about all vaping products contain nicotine, a highly addictive drug, and the negative health effects are broad and can be serious. [The vast majority of people](#) with nicotine addiction started using a nicotine product before age 21. Despite this, a recent [survey of parents](#) of middle and high school students found that 40% said that they were not at all concerned about their own child’s use of vaping products. If you believe your child has tried vaping or is vaping regularly, it is definitely an issue worth addressing.

Take a health approach

If you discover that your teen is vaping, address it as you would any other risk to your child’s health. Try to resist the urge to lecture, yell or punish your child. It is important to keep the lines of communication open, show your child that you are concerned about their health and safety, and keep the discussion from dissolving into a useless standoff.

Go easy on yourself

When it comes to vaping, parents are working against strong forces. This includes limited government regulation, clever advertising and marketing and young people’s natural tendency to try risky things. Kids of all backgrounds, and many who have never before used an addictive substance, have been lured into vaping. With patience, love and the right interventions, you can help your child quit and get back to living a healthy life.

Get help

It is important to think of youth vaping as a health rather than a discipline problem. It is very difficult to quit vaping, and youth are especially vulnerable to the addictive pull of nicotine. While some may be able to quit unaided, many young people who try to quit will experience withdrawal symptoms, including anxiety, irritability, difficulty concentrating and loss of appetite. Despite limited research (due to the fact that vaping is a relatively recent phenomenon), the most effective approach to helping a young person quit is through counseling, family and peer support. It’s also important to address potential underlying mental or emotional problems that might contribute to the desire to vape or use other addictive substances.

Several [online](#) and [text-messaging](#) programs are available to help teens and young adults quit vaping, and there are other digital platforms to [help parents and other caregivers](#) guide young people toward quitting. If a young person seems to be addicted to vaping, it is best to seek out the help and advice of their pediatrician. Physicians may choose to prescribe medications to address nicotine addiction, including nicotine replacement therapies or, for children aged 14 and older, Chantix (varenicline) or Wellbutrin (bupropion) to help control cravings. There currently are no medications available to treat youth who are addicted to marijuana vaping. Professional counseling is the best approach to treating marijuana addiction.

VAPING: WHAT PARENTS NEED TO KNOW TO HELP TEENS

VAPING / What parents should know and do

What are the signs of EVALI and how should parents respond?

In light of the emergence of EVALI (E-cigarette, or Vaping, product use Associated Lung Injury), which has sickened thousands of young people across the country, the Centers for Disease Control and Prevention (CDC) encourages the public to be alert to the signs and symptoms and know how to respond.

Symptoms can include:

- ▶ Cough, shortness of breath or chest pain
- ▶ Nausea, vomiting, abdominal pain or diarrhea
- ▶ Fever, chills or weight loss

Parents should let their children know about this condition. Share these CDC recommendations, which indicate that, in light of its severity and potential fatality, they should not:

- ▶ Use any THC-containing e-cigarette or vaping products.
- ▶ Buy any type of e-cigarette or vaping products, particularly those containing THC, from informal sources, such as friends, family or in-person or online dealers.
- ▶ Modify or add any substances to e-cigarette or vaping products that are not intended by the manufacturer, including products purchased through retail establishments.
- ▶ Add vitamin E acetate to e-cigarette or vaping products. While it appears that vitamin E acetate is the ingredient responsible for the illnesses, evidence is not yet sufficient to rule out contribution of other chemicals of concern.

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If your child is experiencing symptoms consistent with EVALI, contact your health care provider immediately.

In the event of life-threatening symptoms, call your local poison control center at 1-800-222-1222 or emergency services at 911.

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The 101 on ^ e-Cigarettes

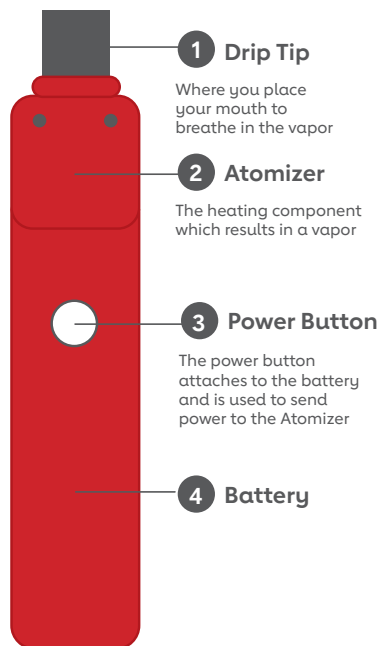


American
Heart
Association.

Vaping is becoming an increasing epidemic among teens. In 2018, e-cigarette use nearly doubled in high school students.

What is vaping?

Vaping is the **act of inhaling and exhaling the aerosol, often referred to as vapor**, which is produced by an e-cigarette or similar device. The term is used because e-cigarettes do not produce tobacco smoke, but rather an aerosol, **often mistaken for water vapor, that actually consists of fine particles. Many of these particles contain varying amounts of toxic chemicals, which have been linked to heart and respiratory diseases and cancer.**



What is an e-cigarette?

Electronic cigarettes (e-cigarettes) are **battery-powered devices that can deliver nicotine and flavorings to the user in the form of an aerosol.** Most have a battery, a heating element, and a place to hold a liquid or nicotine salts. Flavors that make e-cigarettes so appealing can have toxic effects themselves, although they are GRAS (generally regarded as safe) when ingested in food or drinks.

Why are e-cigarettes unsafe for kids, teens and young adults?

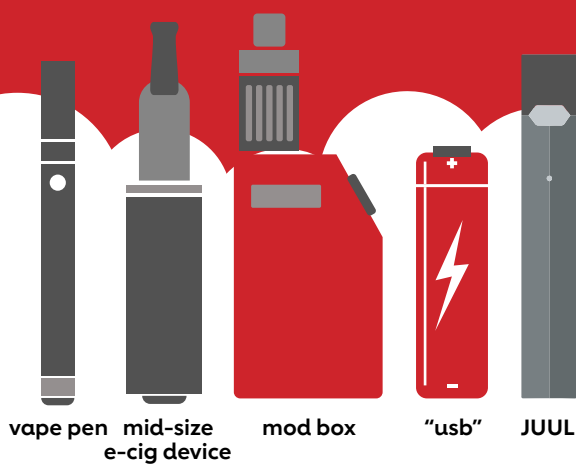
- Nicotine can harm the developing adolescent brain
- e-cigarettes contain nicotine
- Nicotine addiction that occurs with e-cigarette use may lead to transition to use of combustible tobacco products
- Addiction itself, whether to nicotine or other drugs, can drive undesirable behaviors



THE 101 ON E-CIGARETTES



American Heart Association.



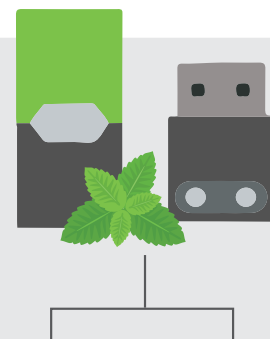
What do e-cigarettes look like?

E-cigarettes come in a wide variety of shapes and sizes; **mini** (often called cig-a-like), **mid-size, vape pens, vape pod systems like JUUL, e-hookahs, e-cigars, advanced personal vaporizers or mods**; even ones shaped to look like pens and usb drives.

What Is JUUL?

JUUL is a rapidly growing type of e-cigarette that became available in the US in 2015. It now accounts for about 72 percent of the market share of vaping products in the United States.

- JUUL is particularly appealing to adolescents and young adults because it has a slim design **shaped like a USB flash drive** (which makes it easier to hide).
- It comes in different colors, and a wide variety of flavors, including many that appeal to kids.
- **JUUL does not emit large smoke clouds**, making it optimal for discreet use.
- Not only is nicotine high in JUUL pods, it is present in a **benzoic acid salt** rather than a free base which **increases the rate of nicotine delivery** and decreases the harsh sensation in the mouth and throat.



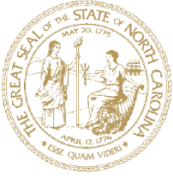
The JUUL nicotine refill ("pods") **contain as much nicotine as a pack of 20 regular cigarettes**. Average pod length varies but can last up to 200 puffs.

Noting this unprecedented spike in e-cigarette use in youth, in December 2018, the US Surgeon General issued an advisory for parents, teachers and health professionals about the negative health consequences of e-cigarettes in kids.

What can parents do?

- Do not use any tobacco products
- **Talk with your kids about the dangers of smoking and the importance of avoiding any tobacco use** (conventional cigarettes or e-cigarettes)
- Educate your kids that **e-cigarettes contain nicotine, a HIGHLY addictive substance**
- **Advocate for comprehensive tobacco prevention policies** (that include e-cigarettes)

DPI LETTER: FOR PARENTS & SCHOOLS



PUBLIC SCHOOLS OF NORTH CAROLINA

DEPARTMENT OF PUBLIC INSTRUCTION | Mark Johnson, *Superintendent of Public Instruction*

WWW.NCPUBLICSCHOOLS.ORG

TO: LEA Superintendents

FROM: Ellen Essick, Ph.D. Section Chief, NC Healthy Schools *Ellen C. Essick*

Susan Kansagra, MD, MBA, Section Chief *Susan Kansagra*
NC Division of Public Health, Chronic Disease and Injury Section

DATE: February 21, 2019

PREVENTING AND REDUCING E-CIGARETTE USE AND OTHER TOBACCO USE AMONG STUDENTS

We want to congratulate you for NC's nearly two decades of success in promoting 100% tobacco free schools, which was the major driver in lowering cigarette smoking rates among NC middle and high school students to historic lows since 1999. However, progress is eroding due to what the US Surgeon General recently called "[the e-cigarette epidemic among youth.](#)"

We know what works to effectively protect young people from all forms of tobacco, including e-cigarettes, cigarettes, cigars and little cigars, and hookah. We are writing both to offer support and to ask for your help by taking additional actions.

Implement Effective 100% Tobacco-Free School Policies

As you know, G.S. 115C-407 requires that every North Carolina school district have a written 100% tobacco-free school policy that prohibits the use of any tobacco products, including e-cigarettes on campus and at school-related events for students, staff and visitors. **Please educate and train school staff to support this policy and tobacco-free school compliance.** This [link](#) provides information on effective communication strategies and enforcement protocols.

For students who violate the tobacco-free schools' policy, we recommend:

- Confiscating all tobacco products, including e-cigarettes and e-cigarette paraphernalia, cigarettes, cigars, smokeless tobacco and snuff, and hookah tobacco and paraphernalia from students and not returning them to the students.
- **Using an educational program entitled [ASPIRE](#) as an alternative to out-of-school suspension.** It is a free, bilingual, online tool that helps middle and high school teens learn about being **tobacco free**.
- **Offering cessation support to any student who is ready to quit. If your school does not have cessation services available, see cessation resources below.**

Your [Regional Tobacco Control Manager](#) is available to provide technical assistance on tobacco-free policy issues and to implement a tobacco prevention and control program, including e-cigarette/vape/Juul educational program.

STANDARDS, CURRICULUM AND INSTRUCTION

Ellen Essick, Section Chief, Healthy Schools | ellen.essick@dpi.nc.gov
6307 Mail Service Center, Raleigh, North Carolina 27699-6307 | (919) 807-3859 | Fax (919) 807-3823

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

DPI LETTER: FOR PARENTS & SCHOOLS

The following free resources are available to your school and community partners to address the surging use of e-cigarettes among youth.

*Curricula. [CATCH My Breath™](#) is a new evidence-based tobacco use prevention curriculum that addresses middle and high schoolers' use of e-cigarettes. CATCH My Breath meets national and state educational standards. **The** curriculum is available free of charge to NC schools. More than 80 schools in NC have incorporated the curriculum this school year.*

Plan an Awareness Event around [New Updated Tobacco Free Schools Signs](#). This Spring the NC Tobacco Prevention and Control Branch and our Regional Tobacco Control Managers will deliver 2-3 new tobacco-free school signs per K-12 school to LEAs. The new signs clearly communicate that all tobacco products including e-cigarettes are always prohibited on campus by everyone. Installation of the new signs offers an opportunity to have an event to build tobacco-free policy awareness among students, staff, parents and visitors. It may be a good opportunity to invite media in for a positive story.

Engage Students and Parents in Solutions

To engage students, teachers and parents in discussions about the dangers of e-cigarette use, the Food and Drug Administration (FDA), and Scholastic, developed [free resources](#) for teachers.

Help for teens to quit tobacco:

- *The Truth Initiative® has expanded its quit-smoking resources to include a [first-of-its kind e-cigarette quit program](#). This innovative and free text message program:
 - Tailors content by age group to give teens and young adults appropriate recommendations about quitting.
 - Serves as a resource for parents looking to help their children who now vape.
 - Uses input from teens, college students, and young adults who have attempted to, or successfully, quit e-cigarettes.
 - **To access the new e-cigarette quit program, users can text “QUIT” to (202) 804-9884.***
- *North Carolina provides a telephone and web-based tobacco treatment program free to our state's residents, with a special **five-call program for teens** who are addicted to tobacco products, including e-cigarettes. Teens who call receive coaching from a dedicated Quit Coach, specially trained to work with adolescents. Students can access this program by calling **1-800-QuitNow (1-800-784-8669)**.*

Teaching tools for Parents, Coaches and Teachers. [The Stanford Medicine Tobacco Use Prevention Toolkit](#) is a new, theory-based and evidence-informed educational resource created by educators and researchers aimed at preventing middle and high school students' use of tobacco and nicotine products. The Tobacco Prevention Toolkit is committed to providing free tobacco/nicotine prevention materials to educators directly working with youth.

*Finally, we do **not** recommend tobacco prevention and cessation programs being promoted by or funded by tobacco or e-cigarette companies.*



What School Professionals
Need to Know to Help Protect
Children, Teens and Young Adults

VAPING: WHAT SCHOOLS NEED TO KNOW TO HELP TEENS

Introduction

Vaping has become one of the most popular forms of substance use among young people, despite growing evidence of its health risks and harms. Vaping is the act of inhaling and exhaling the aerosol produced when using an electronic vapor device. Typically, the ingredients include nicotine, flavorings and other chemicals, many of which are toxic. Some vaping products contain marijuana or other drugs.

According to the U.S. Centers for Disease Control and Prevention (CDC), 27.5% of high school students and 10.5% of middle school students in 2019 reported using a vaping product (also known as an electronic or e-cigarette) in the past 30 days. These numbers represent a 32% increase among high school students and a staggering 114% increase among middle schools students since just the year before, despite growing awareness about the dangers of vaping.

As school professionals, we want to do all that we can to reduce the negative effects of vaping on our students' developing brains, affecting their learning and future opportunities. Whether a child has not yet tried vaping, has already begun to vape or vapes regularly, this guide can help you. We break down what vaping is, why it appeals to youth, what the health risks are and what you can do to protect young people from its harms.

What Is in This Guide?

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More than 1 in 4
high school
students reported
vaping in the
past month.

CDC's National Youth
Tobacco Survey, 2019

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Teen using a JUUL

This guide was made possible by a grant from
The Achelis & Bodman Foundation

VAPING: WHAT SCHOOLS NEED TO KNOW TO HELP TEENS

VAPING / What is vaping?

What is Vaping?

Vaping is the act of inhaling and exhaling the aerosol that is produced by an electronic vapor device when it heats up its liquid ingredients. Because of the rise in popularity of JUUL, currently the most popular brand of vaping device, many teens and young adults use the term “JUUL” (pronounced Jewel) or “JUULING” (pronounced Jewelring), instead of vaping, when referring to the use of these products. More formally, these products are sometimes referred to as electronic cigarettes, or e-cigarettes. Less formally, some simply call them “vapes.” The contents of most vaping liquids (e-liquids) include nicotine, flavoring chemicals and other chemicals. Some vaping products contain (or are modified to contain) marijuana or THC, the psychoactive ingredient in marijuana.

What do vaping devices look like?

Vaping products, or vapes, come in many shapes and designs. Original devices intentionally looked like cigarettes, cigars or pipes so that they would feel familiar and appealing to smokers. Larger devices, known as tank systems or “mods,” do not look like cigarettes or other tobacco products but can be customized or modified by the consumer to have different flavors, nicotine doses or temperature limits. Today, vapes are small and discreet and resemble modern technology products, such as USB sticks/flash drives or cell phones, and other everyday objects like a pen, eraser or lipstick. Some are disposable while others can be reused by charging the device in the USB port of a computer or outlet charger and by replacing the e-liquid, either by filling the chamber or by using a replacement pre-filled pod or cartridge.

What is being vaped?

Although many substances can be vaped, teens and young adults most commonly vape flavored e-liquids with nicotine or marijuana (THC).

Thousands of flavoring chemicals. Vapes come in thousands of tasty, unmistakably child-friendly flavors, many with fun and enticing names. The flavors mask the harsh taste of nicotine and other chemicals contained in the e-liquid, making it easier to inhale the aerosol. Sweet, fun flavors like gummy bear and cotton candy often remind teens of happy childhood experiences, making them feel harmless. Recent crackdowns on flavors by federal, state and local governments have begun to shift the landscape of preferred vaping products among youth. Now that flavors, aside from menthol and tobacco, are

Vaping is illegal for anyone under the age of 21, according to federal law and many state and local laws. The 21-age limit applies to all tobacco-nicotine products and to all marijuana products in states where marijuana is legal.



Some vaping devices look like regular cigarettes, cigars or pipes, while others resemble USB sticks, guitar picks, small cellphones, lipstick, watches or other everyday items and tech devices.

VAPING: WHAT SCHOOLS NEED TO KNOW TO HELP TEENS

VAPING / What is vaping?

generally banned in pod-based or closed-system devices like JUUL, [loopholes in the regulations](#) are driving kids to flavored disposable vapes that have even higher nicotine content and come in countless of enticing flavors.

High levels of nicotine. Nicotine doses can range from 2mg/ml to more than 59mg/ml, and some companies are engaging in “a nicotine arms race,” trying to raise the dose to levels that exceed those found in regular cigarettes or competing vapes. Currently, one of the most popular vapes, JUUL, contains 59mg/ml of nicotine in each pod in the United States – an amount equal to about 1-2 packs of cigarettes.

Other chemicals, metals and ultrafine particles. The aerosol, which many teens believe is harmless water vapor, actually consists of many chemicals, heavy metals and fine particles – many of which are toxic and dangerous – and seep deep into the lungs and bloodstream when vaping.

Marijuana or other drugs. Increasingly, marijuana ingredients are found in vapes, including THC (the psychoactive compound in marijuana that creates a sense of being high), the leaf form of marijuana or CBD. Vapes also are sometimes used to inhale other drugs as well.

What is vaping’s appeal?

Most vapes are discreet, easy to hide and generally seen as cool and relatively harmless. They come in thousands of tasty flavors that help cover the harsh taste of the chemicals and override the sense that these products might be harmful. They also produce a brief positive sensation or ‘head rush’ that some people like.

Most also have very high doses of nicotine, which can rapidly make those who vape develop an addiction or become dependent on the product. Some young people are also drawn to the “vape tricks” and “cloud competitions,” where they form cloud-like shapes or patterns when exhaling the vape’s aerosol. These tricks are usually performed with modifiable devices, or ‘mod’ style vapes. People will breathe aerosol deep into their lungs and then exhale it through their ears, eyes or nose.

Teens say they vape for many reasons. Curiosity is one, and peer pressure is another. They see friends or family members vaping and they are drawn to the appealing flavors. For others, it’s to do vape tricks. Some also say they do it because they feel it is less harmful than other tobacco products and it’s also discreet.



Vaping tricks, such as “The Dragon,” shown above, are another major attraction of vaping.

What are the Health Effects of Vaping?

It is now **widely recognized** that vaping is unhealthy and dangerous, even if it might not be quite as unhealthy and dangerous as smoking traditional, combustible cigarettes.

The more immediate health effects include coughing and wheezing, behavioral and mood changes, headaches, seizures, vomiting and potential severe lung injury. Vaping also negatively affects teens' attention, learning, and impulse control in a way that can affect them in school, sports and social situations.

Nearly all vapes contain nicotine, one of the most addictive substances, and in many cases as much as or more than in traditional cigarettes. Nicotine negatively affects the cardiovascular system (increasing heart rate and blood pressure and the risk of heart attack and stroke), respiratory/lung functioning (including inflammation, asthma and wheezing) and reproductive organs. People who vape can quickly become addicted and are at increased risk of starting to smoke cigarettes or use other addictive products. Taking in high doses of nicotine can lead to nicotine toxicity, which in severe cases can give rise to seizures as well as nausea, vomiting, diarrhea, excessive salivation, dizziness, respiratory failure, coma and paralysis.

The other ingredients in vapes, including the flavorings, are harmful as well. Most contain cancer-causing and other toxic chemicals, heavy metals and tiny particles that go deep into the lungs and cause lung damage, cell damage and reduced ability to fight off infections.

Exposure to Nicotine

Nicotine is a stimulant that makes the nervous system prepare the body for physical and mental activity. It causes breathing to become more rapid and shallow, as well as increases heart rate and blood pressure. Nicotine exposure from vaping varies considerably depending upon the contents of the e-liquid, the type of device used and how it is used.

Vaping exposes young people to nicotine at a time when the human brain is most at risk for addiction. Because the brain continues to develop until early adulthood, roughly age 25-30, use of any addictive substance prior to these years is especially risky. Young people who vape are affected more intensely than are adults by nicotine.

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Although some of the flavoring chemicals have been deemed safe when eating or drinking, **once they are heated to produce an aerosol, they form additional harmful compounds that have been found to cause lung damage.**

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VAPING: WHAT SCHOOLS NEED TO KNOW TO HELP TEENS

VAPING / What are the health effects of vaping?

Exposure to toxic chemicals and other harmful ingredients

Vapes contain a number of chemicals, metals and ultrafine particles that are poisonous when they are heated to form an aerosol and then inhaled. Because of their chemical makeup, certain popular flavors – such as cinnamon, vanilla, butter, and mint – are especially harmful. Although some of the flavoring chemicals have been deemed safe when eating or drinking, once they are heated to produce an aerosol, they form additional harmful compounds that have been found to cause lung damage. There also is evidence that some metals and other components of vape can seep into the e-liquid and enter the lungs during the heating and inhalation process, causing lung damage ranging from mild to severe.

Addiction

Nicotine is a highly addictive substance. People who vape can quickly become addicted to the nicotine that is in nearly all vapes, and are at increased risk of starting to smoke cigarettes or use other addictive substances. When a person stops vaping, even for a short period, they can experience withdrawal including strong cravings, irritability, fatigue, headache, sleeplessness and difficulty concentrating. These symptoms can be quite intense, driving them right back to the nicotine product, even when they want to quit. In fact, many people who are able to stop smoking cigarettes by switching to vaping find it extremely difficult to quit vaping due to the very high doses of nicotine and the ease of consuming it through vapes.

Cigarette smoking

Teens and young adults who vape are significantly more likely than those who do not vape – [about four times as likely](#) – to end up smoking traditional cigarettes. This is true of young people who never smoked cigarettes and had no intention of, likelihood to or interest in doing so. Strong and consistent research also shows that vaping is not a safe or reliable way to quit smoking. For many people, vaping can actually [make it more difficult to quit smoking](#).

Multiple tobacco product use

Young people who vape [have five times the likelihood](#) of those who do not vape to use tobacco products such as cigarettes, hookah, cigars or pipes. The

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Many people who are able to stop smoking cigarettes by switching to vaping find it **extremely difficult to quit vaping due to the very high doses of nicotine** and the ease of consuming it through vapes.

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VAPING: WHAT SCHOOLS NEED TO KNOW TO HELP TEENS

VAPING / What are the health effects of vaping?

majority of people who vape to help them quit smoking end up becoming ‘dual users,’ smoking in places and situations where they can and vaping in places and situations where smoking is impossible. Dual users, therefore, actually take in more nicotine and other potentially toxic chemicals than people who only vape or only use other tobacco products.

Injuries and poisonings

Vaping devices, especially those with poor quality batteries that have been stored improperly or have been modified by the user, can malfunction or explode. This results in burns and other injuries. Young people exposed to e-liquids through the mouth, eye or skin contact can experience nicotine poisoning, resulting in vomiting, seizures, brain injury or death.

Cardiovascular, respiratory, reproductive and immunity effects

More and more, nicotine and other chemicals in vapes are being tied to increasing heart rate and blood pressure and the risk of heart attack and stroke, as well as inflammation, asthma and wheezing. They also can cause inflammatory processes and depress immune function in lungs, and are associated with chronic bronchitis and reduced ability to fight off bacterial and viral infections including [COVID-19](#).

Vaping poses a significant risk to young people when it comes to contracting, transmitting and experiencing the health effects of COVID-19. [A recent national survey](#) of adolescents and young adults found that young people who have vaped were 5 times more likely than those who haven’t vaped to be diagnosed with the virus and the risk of being diagnosed and experiencing its symptoms was even higher among those who both vaped and smoked cigarettes. The risk of contracting (and transmitting) the virus might be higher simply because of the need to remove masks to vape and because of repeated contact between one’s hand, the device and one’s mouth while vaping. Perhaps most importantly, because vaping weakens the cardiovascular, respiratory and immune systems, one’s vulnerability to contracting the virus and experiencing its symptoms is elevated among those who vape.

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Dual users actually take in **more nicotine and other potentially toxic chemicals** than people who only vape or only use other tobacco products.

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Marijuana and Vaping

The practice of using vaping devices to consume marijuana or cannabis products is becoming increasingly widespread. Recent data show that many youth who vape, especially older teens, are not just vaping nicotine. Many are vaping THC, the psychoactive ingredient in marijuana that produces a high. [National data from 2019](#) show that 21% of 12th graders, 19% of 10th graders and 7% of 8th graders reported vaping marijuana in the past year, each a significant increase over the previous year. [Other national data](#) show that 15% of middle and high school students, and 43% of those who ever used vapes, have vaped marijuana.

Different from most plant-based marijuana, the level of THC in marijuana vapes can be far higher. Therefore, vaped marijuana tends to be much more potent than smoked marijuana.

Some marijuana vapes look like nicotine vaping devices (e.g., PAX brand, which resembles JUUL products); come in loose leaf, concentrate or extract forms; are available in youth-friendly flavors and names; and are virtually odorless. The THC inhaled when vaping enters the bloodstream quickly and can lead to overuse, addiction and other negative health consequences. Vaping marijuana can cause bloodshot eyes, dry mouth, increased appetite, mood swings and can increase the risk of depression, psychosis and suicidality. Marijuana vaping has also been implicated in the [recent spate of vaping-related lung injuries and deaths](#) known as EVALI (E-cigarette, or Vaping, product use Associated Lung Injury).

Marijuana use, regardless of how it is ingested, can have long-lasting effects on the developing teen brain. **Negative effects include:**

- ▶ Impaired attention, learning, problem-solving skills, memory and other cognitive functions
- ▶ Impaired reaction time and coordination, especially related to driving
- ▶ Academic or job difficulties, school dropout
- ▶ Increased risk of mental health issues including depression, anxiety and, in some cases, psychosis and suicidal thoughts
- ▶ Marijuana use disorder (addiction) and other substance use and addiction

The likelihood of developing a marijuana use disorder, or addiction to marijuana, is about [twice as high](#) among teens than among adults who use marijuana.

.....
The level of THC in marijuana vapes can be far higher. Therefore, vaped marijuana tends to be much more potent than smoked marijuana.
.....

What School Professionals Should Know and Do

The following are some indicators that a student may be vaping nicotine or marijuana:

- ▶ Frequent trips to the bathroom
- ▶ Mood changes before and after leaving the classroom (may be irritable before leaving and seem less stressed upon return)
- ▶ Hanging out in bathroom stalls with other students
- ▶ Returning to class smelling of minty or sweet scents
- ▶ Putting what appear to be thick markers or pens in the mouth
- ▶ Using colorful USB-like devices
- ▶ Using lanyards or hoodies to hide vaping devices
- ▶ Unexplained shifts in mood, behavior, academics

Help, Don't Punish, Students Who Are Vaping

- ▶ Recognize that vaping is a health issue, not just a behavioral problem
- ▶ Focus on health and safety, not punishment
- ▶ Ensure that students have accurate facts: offer a research-based anti-vaping curriculum to students
- ▶ Incorporate vaping-related facts and content into the general academic curriculum (e.g., biology, chemistry, psychology courses)
- ▶ Challenge students' perceived norms (it's not true that 'everyone' vapes)
- ▶ Appeal to students' desire for independence by demonstrating industry marketing tactics that target youth and make students dependent on their products
- ▶ Sponsor student-led anti-vaping campaigns
- ▶ Offer alternative, safer means of having fun, reducing stress and taking risks

VAPING: WHAT SCHOOLS NEED TO KNOW TO HELP TEENS

VAPING / What health care professionals should know and do

- ▶ Be vigilant about places on campus where students vape (e.g., check pop-up ceilings in bathrooms where vaping devices may be hidden; school parking lots) so that it becomes difficult for students to vape on campus
- ▶ Educate staff, parents/caregivers on the harms of vaping and on how to respond effectively
- ▶ Share community and professional resources that can provide assistance

Get Help for Students with Addiction

- ▶ Get students' perspectives on why they vape, acknowledge the appeal, but help them weigh risks against benefits
- ▶ Recognize that addiction is serious and usually too hard for a teen to overcome alone
- ▶ Encourage professional help to cut back and quit
- ▶ Interventions should address mental health problems, social concerns
- ▶ Connect students with self-help online and text messaging programs that can support students trying to quit (e.g., truthinitiative.org/thisisquitting)
- ▶ There is no simple treatment for teen vaping; some tobacco cessation methods can work but counseling is often needed to address cravings and triggers

Collect Data

Collecting data on the types of addictive substances students are using can help inform education and intervention efforts and decisions about school policies. Tracking trends in reported use of vaping products can help schools address emerging trends and adjust policies and practices to meet student needs.

VAPING: WHAT SCHOOLS NEED TO KNOW TO HELP TEENS

VAPING / What health care professionals should know and do

Materials and resources for schools

- ▶ [Juuling, Dripping, Dabbing and More: What School Professionals Need to Know About Vaping](#). A companion PowerPoint presentation to this guide by Partnership to End Addiction tailored to school professionals to help to reduce the negative effects of vaping on students' developing brains.
- ▶ [CATCH My Breath](#) – CATCH (Coordinated Approach to Child Health). A youth e-cigarette prevention program targeting ages 11-18. The program is divided into four sessions lasting 35-40 minutes each and uses a variety of educational strategies. These include cooperative learning groups, group discussions, goal setting, interviews and analysis of mass media.
- ▶ [The Tobacco Prevention Toolkit](#) – Stanford University School of Medicine. A toolkit for teachers with in-classroom units and lesson plans on e-cigarettes, tobacco and nicotine. The toolkit includes PowerPoints, discussion guides, worksheets and activities.
- ▶ [ASPIRE](#) – MD Anderson Center. ASPIRE is a free, bilingual and online tool that helps middle and high school teens learn about being tobacco free.
- ▶ [The Real Cost of Vaping: Understanding the Dangers of Teen E-cigarette Use](#) – For grades 9-12, information and a single lesson plan from a collaboration between the U.S. Food and Drug Administration and Scholastic.
- ▶ [Know the Risks: A Youth Guide to E-cigarettes](#) – A presentation from the Centers for Disease Control and Prevention's Office on Smoking and Health to educate youth on e-cigarettes. This resource is intended for adults who educate or serve youth ages 11-18 and includes a document with talking points.

FIX NEXT PAGE

E-CIGARETTES, VAPES, AND JUULS: WHAT SCHOOLS SHOULD KNOW

 AMERICAN LUNG ASSOCIATION®



What are these products?

- E-cigarettes are battery-powered devices that use a heating element to heat e-liquid, typically containing nicotine, from a cartridge that produces a chemical-filled aerosol.
- Many e-liquids or “e-juice” come in fruit flavors, making them appealing to kids.

E-cigarettes come in many forms and can look like everyday products like pens, USB flash drives, phones and tubes of lipstick.

- Currently, the most popular e-cigarette among teens is the JUUL, which looks like a USB flash drive and produces little visible aerosol when being used. Many JUUL pods contain high levels of nicotine - one JUUL pod claims to contain roughly the same amount of nicotine as one pack of cigarettes.

Most common reasons kids use e-cigarettes include:²

-  **39%** Use by “friend or family member”
-  **31%** Availability of “flavors such as mint, candy, fruit, or chocolate”
-  **17%** Belief that “they are less harmful than other forms of tobacco such as cigarettes”

Are e-cigarettes less harmful than cigarettes?

- The Surgeon General has concluded that e-cigarette aerosol is not safe.
- E-cigarettes contain harmful and potentially harmful ingredients, including formaldehyde and acrolein, which can cause irreversible lung damage. They also contain nicotine.
- E-cigarettes can be used for delivery of marijuana and other illicit drugs.
- FDA has found no e-cigarette to be safe and effective in helping people quit; in fact, more than half of all adult e-cigarette users continue to use regular cigarettes.

Is youth e-cigarette use really an epidemic?

The FDA has called e-cigarette use among teens an epidemic with no signs of abating.

- E-cigarettes are the most commonly used tobacco products among kids, with nearly 12 percent of high school students nationwide using e-cigarettes and about 20 percent using at least one tobacco product.

¹ Wang TW, Gentzke A, Sharapova S, Cullen KA, Ambrose BK, Jamal A. Tobacco Product Use Among Middle and High School Students – United States, 2011–2017. MMWR Morb Mortal Wkly Rep 2018;67:629–633. DOI: <http://dx.doi.org/10.15585/mmwr.mm6722a3>

² Tsai J, Walton K, Coleman BN, et al. Reasons for Electronic Cigarette Use Among Middle and High School Students – National Youth Tobacco Survey, United States, 2016. MMWR Morb Mortal Wkly Rep 2018;67:196–200. DOI: <http://dx.doi.org/10.15585/mmwr.mm6706a5>

E-CIGARETTES, VAPES, AND JUULS: WHAT SCHOOLS SHOULD KNOW

Impact of e-cigarette use on teens

The bottom line: e-cigarette use is unsafe, especially for young people.

- Schools should work with their students to help educate them about the potential long-term consequences of using e-cigarettes.
- Kids often don't realize that they are harming their lungs and their brains by using e-cigarettes.
- Kids may not realize that the products they are using contain nicotine, which is highly addictive and can harm adolescent brain development.
- It's not just harmless water vapor: secondhand emissions from e-cigarettes can contain nicotine; ultrafine particles; flavorings such as diacetyl, a chemical linked to serious lung disease; volatile organic compounds such as benzene, which is found in car exhaust; and heavy metals, such as nickel, tin and lead.
- The e-cigarette industry is currently using many of the same tactics that worked to sell traditional cigarettes for decades.
- These products are designed to appeal to and be used by teens and can go undetected by adults.



1-800-LUNGUSA | Lung.org

What should schools do to protect their students from these products?

- Institute and enforce comprehensive tobacco-free campus policies, including all e-cigarettes. Punitive policies aren't effective. Many of our youth are already addicted to nicotine through these tobacco products and therefore efforts are needed to help kids quit. Schools should offer programs on-site to help students quit or connect them with resources to support them in breaking free from their addiction.
- Ensure all teachers, administrators and staff know the different kinds of e-cigarettes on the market and the dangers they pose to young people.
- Participate in the "Real Cost Campaign." FDA's tobacco prevention campaign which now features ads to educate teens on dangers of e-cigarettes. Schools can take advantage of free print materials and web content from the campaign.

What resources does American Lung Association offer to address this issue?

- Not on Tobacco (N-O-T) is the American Lung Association's teen smoking cessation program and helps teens who want to quit, and provides the tools, information and support to quit for good.
- The Alternative to Suspension program is offered as an option to students who face suspension for violation of school tobacco-use policy and is administered by an adult facilitator in either a one-on-one or group format in a school or community-based setting.

Contact

Lung HelpLine and Tobacco Quitline is a telephone support line available in over 200 languages, and is a free service allowing callers access to expert staff, including registered nurses, respiratory therapists, pharmacists and certified tobacco cessation specialists.



1-800-LUNG-USA (1-800-586-4872) or
www.Lung.org/helpline.



Learn more about these and other programs at
www.Lung.org.

Contact your local American Lung Association office for information on youth leadership groups and other youth tobacco initiatives. 1-800-LUNGUSA

CATCH MY BREATH: YOUTH E-CIGARETTE & JUUL PREVENTION PROGRAM

CATCH[®] MY BREATH

YOUTH E-CIGARETTE & JUUL PREVENTION PROGRAM



CATCH My Breath is a best-practices youth E-cigarette and JUUL prevention program developed by The University of Texas Health Science Center at Houston (UTHealth) School of Public Health. The program provides up-to-date information to teachers, parents, and health professionals to equip students with the knowledge and skills they need to make informed decisions about the use of E-cigarettes, including JUUL devices. CATCH My Breath utilizes a peer-led teaching approach and meets National and State Health Education Standards.

AGES 11-18 YEARS
(GRADES 6-12)

Can be taught in one or multiple grade levels

DURATION FOUR LESSONS
30-40 MINUTES EACH

*4 lessons for each middle school grade (12 total)
4 lessons for high school*

COST FREE

Thanks to support from CVS Health

7 OUT OF 8
STUDENTS SAY THEY ARE
LESS LIKELY TO
USE E-CIGARETTES
AFTER CATCH MY BREATH.



USED IN TOP DISTRICTS
NATIONWIDE, INCLUDING:



CATCH MY BREATH: YOUTH E-CIGARETTE & JUUL PREVENTION PROGRAM

GETTING STARTED



1 Fill out enrollment form.

Let us know where and when the program will be taught at www.catchmybreath.org/enroll.

2 Receive program materials.

You'll be emailed an Access Code to unlock the curriculum and resources, including:

- Online curriculum
- Teacher resources & evaluation tools
- Parent materials
- Printable CATCH My Breath posters
- Implementation support from the CATCH My Breath team



FEATURED BY



edutopia



AXIOS

BUILDING SUPPORT

To help build administration and community support for e-cigarette education, we include a **parent presentation** and **resource page**, host **webinars**, and offer hassle-free **trial periods** to review the curriculum in its entirety. We've also created a **"Stand with CATCH My Breath" grassroots team** (catchinfo.org/supportcmb) where parents, teachers, public health professionals, and concerned citizens can stay informed.

www.catchmybreath.org
catchmybreath@catch.org
(855) 500-0050 x803

DELIVERED IN PARTNERSHIP WITH



BUILDING COMMUNITY SUPPORT: ADDRESSING YOUTH E-CIGARETTE USE AND VAPING IN SCHOOL

BUILDING COMMUNITY SUPPORT

Addressing Youth E-Cigarette Use and Vaping in Schools

A Roadmap for School Administrators



American Heart Association.

BUILDING COMMUNITY SUPPORT: ADDRESSING YOUTH E-CIGARETTE USE AND VAPING IN SCHOOL



**1 in 4 high school students are vaping,
and the number of teens who vape more than doubled in 2 years.**

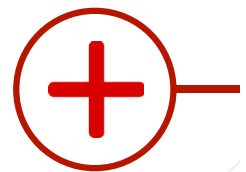
The American Heart Association is committed to supporting schools in addressing the devastating youth vaping epidemic.

We are working aggressively at local, state and federal levels to pass policies that protect youth by banning the sale of all flavored tobacco/e-cigarette products that appeal to kids and raising the age to purchase these products to 21. We are investing in research to identify more effective strategies to support your students in breaking their addiction to nicotine and prevent them from starting e-cigarette use. We have also launched the #QuitLying Youth Activation Campaign designed to empower youth to stand up against Big Vape and to use peer-to-peer strategies that counter the vaping industry. More information can be found at www.QuitLying.org.

This brief toolkit is designed to support your school(s) in holding a solutions-focused dialogue with parents and communities. Ensuring that parents and community leaders understand what you and your students are dealing with will provide POWERFUL examples of how this epidemic is disrupting our schools, addicting children and damaging the lives of the young people who have been duped into using these dangerous and deadly products.

In the weeks to come, the AHA will share new evidence-based resources as we identify them, and we will be working diligently with city government and statehouses to protect your students from Big Vape.

Please contact your local AHA office with any questions.



BUILDING COMMUNITY SUPPORT: ADDRESSING YOUTH E-CIGARETTE USE AND VAPING IN SCHOOL



LEADERSHIP + ACTION

Superintendent-Led School Dialogue Action Plan



2019

1 IN 4 TEENS ARE VAPING



Schools are “ground zero” for the youth e-cigarette epidemic. Your leadership is critical to stop this epidemic in its tracks.

School-Based Community Dialogues should be designed to bring parents, educators, school boards, youth and other regional and local leaders together to raise awareness about nicotine addiction and the smoking and vaping crisis to identify synergistic partnerships and proven solutions that will help combat the issue.

The following information outlines a simple step-by-step plan for you to follow.



OBJECTIVE = to successfully conduct a school-based dialogue addressing the vaping and e-cigarette youth crisis.

GOALS

- ❑ Educate school communities and facilitate locally-owned, solution-based action plans.
- ❑ Educate that nicotine is addictive and causes harm to the body.
- ❑ Establish common language around the topic of vaping and e-cigarettes.
- ❑ Activate and empower students to take a stand.
- ❑ Provide tools and resources for your stakeholders.
- ❑ Receive support from local partners and the American Heart Association and other local partners.
- ❑ Consider unintended consequences of an enforcement strategy.



ENDGAME

- ❑ Vaping and e-cigarettes are eliminated at schools and students become nicotine free.
- ❑ Students with nicotine dependency are provided age-relevant resources to effectively end their addiction.
- ❑ School personnel will have the daily tools and resources to effectively end vaping and e-cigarette use on campus and at school events.
- ❑ Students, parents and educators will learn about the known and unknown risks and hazards of e-cigarette use and vaping.

BUILDING COMMUNITY SUPPORT: ADDRESSING YOUTH E-CIGARETTE USE AND VAPING IN SCHOOL



ACTION PLAN

1 ALIGN YOUR PEOPLE

Lead and work with your team to brainstorm the list of community members and school personnel that need to be at the table for the school-based community dialogue. Representation from each of these stakeholder groups is strongly encouraged:

- School Board Members
- Mayor and City Council Members
- Chamber of Commerce Leaders
- Health Provider Leaders
- Parents
- Faith-based Leaders
- School Law Enforcement Officers
- Local Health Department Staff
- Secondary Campus Principals, Teachers, Counselors and Support Staff
- Members of the School Health Advisory Council
- PTA/PTO Leaders
- Student Council, NJHS/NHS Members, HOSA Members
- Student Body



2 SET THE MEETING

Decide when and where. Elevate the urgency and importance of the meeting by making it your priority.

3 DESIGN THE AGENDA

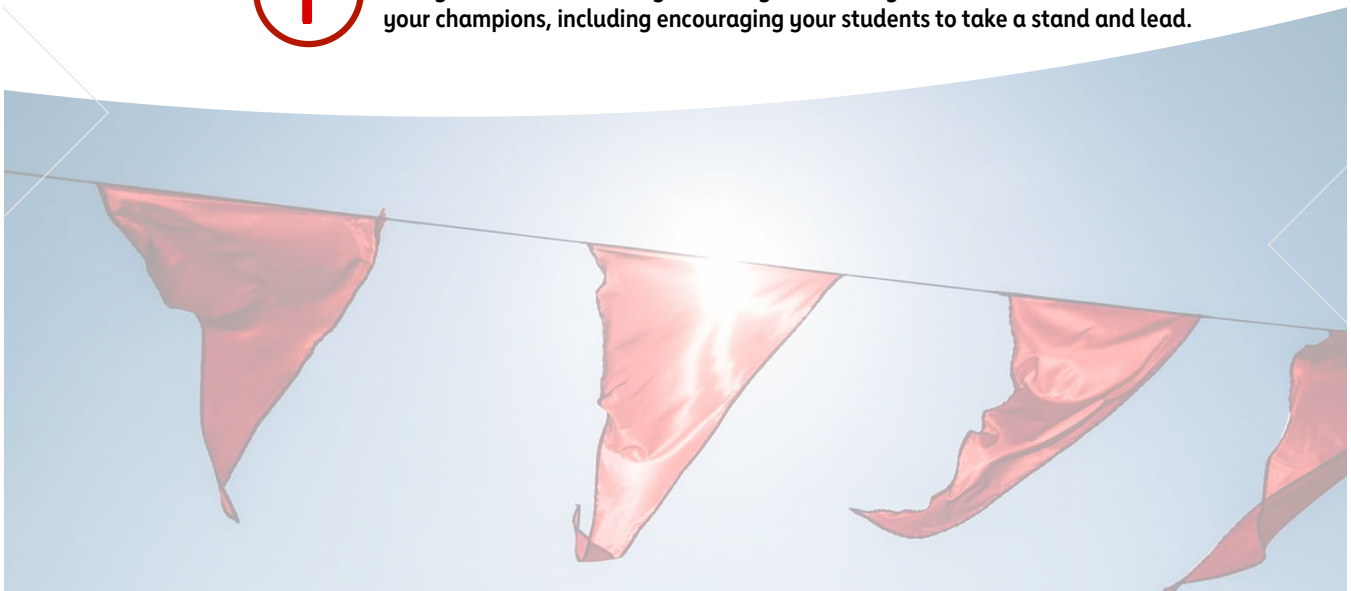
Framing the issue of the vaping epidemic is just as important as hearing directly from your community and having experts answer questions. The balance of these elements is important. A sample agenda is included at the end of this toolkit to modify as needed. Engage a student led panel. End with a call-to-action.

4 FIND AND ALIGN YOUR CHAMPIONS FOR ACTION

The day after the meeting have your assistant send the resources included in this toolkit out to your stakeholders. This will sustain the momentum you have created and help you identify opportunities for community partners and identify those individuals working for you that desire to take a lead role in this cause.



The follow-up work of building and implementing an action plan to curb vaping in your district relies on your ability to encourage and facilitate the efforts of your champions, including encouraging your students to take a stand and lead.



BUILDING COMMUNITY SUPPORT: ADDRESSING YOUTH E-CIGARETTE USE AND VAPING IN SCHOOL



SAMPLE AGENDA

Superintendent Call to Action
Community Meeting on Youth E-cigarette and Vaping Epidemic

[90 minutes]

INTRODUCTION

- Superintendent Welcome

FRAMING THE ISSUE

- Behavioral Health Expert (i.e. School Counselor, Social Worker, Psychologist or Law Enforcement Officer) and Campus Administrators discuss what is occurring on campuses and within the community.
- A medical professional describes the known and unknown health risks of nicotine use by adolescents.
- A student leader shares the student perspective of vaping and e-cigarettes.

QUESTIONS

- How has the youth e-cigarette epidemic impacted your district?
- What are the major concerns of parents?
- Has there been a community response of any kind?
- What are the district and campus policies you follow?
- What support does the school district need from the community, including the medical community?
- Does your district rely on a particular intervention or cessation program?
- What factors do you see contributing to teenagers starting and using e-cigarettes?
- What resources are there for parents and what should parents be doing to educate their children on the hazards of vaping?

CLOSING

- Superintendent Conclusion

BUILDING COMMUNITY SUPPORT: ADDRESSING YOUTH E-CIGARETTE USE AND VAPING IN SCHOOL



RESOURCES

HEART.ORG/ANTIVAPING



SCHOOL BOARD

- AHA Youth E-Cigarette and Vaping Resolution (For Board Meeting Adoption)
- Youth E-Cigarette and Vaping Fact Sheet

TEACHERS & STAFF

- Youth E-Cigarette and Vaping Fact Sheet
- AHA Lesson Plans for Middle School and High School
- Catch My Breath E-Cigarette Prevention Program for Grades 5-12
- Tobacco Prevention Toolkit, E-Cigarette Model

ADMINISTRATORS

- Truth Initiative Public Service Announcements
- An Alternative to Suspension – Addressing Student Tobacco Use in Schools: Alternate Measures
- Model Tobacco/E-Cigarette Policy Recommendations for Schools

COUNSELORS & HEALTH PROFESSIONALS

- Cessation Programs and Resources – School-based tobacco prevention skill-building programs

PARENTS

- Parent Resources Addressing E-Cigarettes and Vaping
 - How to Keep Kids and Teens from Smoking and Vaping
 - Tips for Talking to Kids About E-Cigarettes

PEER TO PEER

- QuitLying.org – AHA youth activation campaign supporting peer-to-peer strategies addressing e-cigarette use
- This is Quitting – Truth Initiative’s text-based e-cigarette cessation intervention
- Student Athlete Toolkits

COMMERCIAL TOBACCO-FREE K-12 SCHOOL MODEL POLICY



The use or promotion of commercial tobacco products¹ on school grounds and at off-campus school-sponsored events is detrimental to the health and safety of students, staff, and visitors.

Under federal law, smoking is prohibited in any kindergarten, elementary, or secondary school or library serving children under the age of 18 years if federal funds are used in the school.² Many states also have laws that restrict commercial tobacco use, including electronic cigarettes, in public K-12 schools.³ However, federal law and many state laws do not cover outdoor school grounds.



To promote an environment free of commercial tobacco in primary and secondary schools, the Public Health Law Center has prepared a comprehensive model policy that school districts and schools may adopt. The policy:

- Provides a definition of commercial tobacco products to include current and future tobacco products;
- Prohibits the following items on campus (inside and outside buildings) and at off-campus, school-sponsored events:
 - Tobacco products and tobacco-related devices, including electronic cigarettes,
 - Imitation tobacco products (such as candy cigarettes), and
 - Lighters;
- Prohibits accepting any donations or curriculum from any tobacco-related industry;
- Prohibits any promotion of tobacco products, including electronic cigarette products; and
- Includes effective and holistic enforcement options for student violations beyond suspension and expulsion.

Both this publication and [Commercial Tobacco-Free K-12 School Model Policy: Questions & Answers](#) reflect this policy.

Free Legal Technical Assistance

As with all policy drafting, this K-12 Model Policy is only to be used as a guide. Each school district or school may consider modifications that reflect local needs, resources, and situations. You should review your policy with a legal technical assistance provider to ensure internal consistency, especially if you change terms or delete provisions.

The Public Health Law Center may be able to review the draft of your school or school district's commercial tobacco-free policy. The Center also offers trainings on drafting effective policies. Please check our website at www.publichealthlawcenter.org for more information about policy drafting and other model policies and resources. To request assistance, e-mail publichealthlawcenter@mitchellhamline.edu.

K-12 Schools, Commercial Tobacco-Free: Model Policy Questions & Answers

I. Findings

- (A) Commercial⁴ tobacco use is the single most preventable cause of death in the United States.⁵
- (B) In the United States, smoking causes 480,000 deaths annually and is responsible for nearly \$170 billion in excess medical care costs.⁶
- (C) Nicotine is found in all commercial tobacco products, including electronic smoking devices.⁷ Exposure to nicotine during adolescence and young adulthood can cause addiction and harm the developing brain.⁸
- (D) The use of commercial tobacco products by children in the United States is a pediatric disease of considerable proportions that results in new generations of nicotine-dependent children and adults.⁹
- (E) In 2018, 27.1 percent of U.S. high school students were current users of commercial tobacco products, totaling 4 million. Overall commercial tobacco use by high school students increased in the United States by 38 percent during 2017–2018, which reversed recent declines in commercial tobacco use by youth in the United States. This increase was driven by the use of electronic smoking devices (also known as e-cigarettes, vapes, Juul), which rose 78 percent during 2017–2018.¹⁰ By 2018, an estimated 3.05 million (20.8 percent) of high school and 570,000 (5.7 percent) of middle school students were current users of e-cigarettes, the majority (67.8 percent) of whom use flavored e-cigarettes.¹¹
- (F) Children are exposed to tailored, targeted, substantial, and unavoidable tobacco industry marketing and advertising that leads young people to (1) hold favorable beliefs about, (2) overestimate the prevalence and undermine the health harms of, and (3) become more likely to begin to use commercial tobacco.¹²
- (G) Electronic delivery smoking devices create and increase nicotine addiction among young people. In 2018, the U.S. Surgeon General declared use of electronic delivery smoking devices as an epidemic among young people.¹³ Using these products may also encourage youth to try other combustible tobacco products that are known to cause disease and lead to premature death.

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- (H) Imitation tobacco products, such as candy cigarettes and smokeless chew, may lead youth to use commercial tobacco by desensitizing them to the dangers of tobacco and by advancing the idea that commercial tobacco use is socially acceptable.¹⁴
- (I) Evidence has shown anti-tobacco use campaigns sponsored by the tobacco industry (including electronic smoking device manufacturers and retailers) do not prevent youth from using commercial tobacco products and may encourage youth to smoke and create positive associations with the tobacco industry.¹⁵

II. Purpose

This is a comprehensive policy designed to ensure a safe learning and work environment free of commercial tobacco.

- (A) [The [district name] Board of Education] / [school name] recognizes that the use of commercial tobacco products, including electronic smoking devices, is a health, safety, and environmental hazard for students, staff, visitors, and school facilities. The board is acutely aware of the serious health risks associated with the use of commercial tobacco products, including electronic smoking devices, to users and non-users. The [board/school] believes that the use or promotion of commercial tobacco products, including electronic smoking devices, on school grounds and at off-campus school-sponsored events is detrimental to the health and safety of students, staff, and visitors.
- (B) The [board/school] also believes accepting gifts or materials from the tobacco industry will send an inconsistent message to students, staff, and visitors.
- (C) The [board/school] embraces that adult staff and visitors serve as role models for students. The board embraces its obligation to promote positive role models in schools and to provide an environment for learning and working that is safe, healthy, and free from unwanted smoke or aerosol and other commercial tobacco use for the students, staff, and visitors.

THEREFORE, the [board/school] adopts the following commercial tobacco-free policy:

III. Definitions

- (A) **"Administrator"** means any person who has disciplinary and managerial authority to enforce school policies in [district/school name], including but not limited to principals, vice-principals, and office personnel.
- (B) **"Any time"** means 24 hours a day, seven days a week, 365 days a year.

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- (C) **“Electronic smoking device”** means any product containing or delivering nicotine, or any other substance, whether natural or synthetic, intended for human consumption through the inhalation of aerosol or vapor from the product. “Electronic smoking device” includes, but is not limited to, devices manufactured, marketed, or sold as e-cigarettes, e-cigars, e-pipes, vape pens, mods, tank systems, Juul, Suorin, or under any other product name or descriptor. “Electronic smoking device” includes any component part of a product, whether or not marketed or sold separately, including but not limited to e-liquids, e-juice, cartridges, or pods.
- (D) **“Imitation tobacco product”** means any edible non-tobacco product designed to resemble a tobacco product, or any non-edible non-tobacco product designed to resemble a tobacco product and intended to be used by children as a toy. “Imitation tobacco product” includes, but is not limited to, candy or chocolate cigarettes, bubble gum cigars, shredded bubble gum resembling chewing tobacco, pouches containing flavored substances packaged similar to snus, and shredded beef jerky in containers resembling snuff tins.
- (E) **“Lighter”** means a mechanical or electrical device typically used for lighting tobacco products.
- (F) **“Off-campus, school-sponsored event”** means any event sponsored by the school or school district that is not on school property, including but not limited to, sporting events, day camps, field trips, dances, or theatrical productions.
- (G) **“Parent/Guardian”** means any person that has legal guardian status over a student enrolled in [district/school name].
- (H) **“School”** means [name of school/any public nursery, day care center, child care facility, Head Start program, kindergarten, elementary, secondary school, alternative learning center or adult education center] operated under the control of [district name].
- (I) **“School property”** means all facilities and property, including land, whether owned, rented, or leased by [district/school name], and all vehicles owned, leased, rented, contracted for, or controlled by [district/school name] used for transporting students, staff, or visitors.
- (J) **“Signage”** means signs declaring that all [district/school name] school property is tobacco-free.
- (K) **“Smoking”** means inhaling, exhaling, burning, or carrying any lighted or heated cigar, cigarette, or pipe, or any other lighted or heated product containing, made, or derived

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from nicotine, tobacco, marijuana, or other plant, whether natural or synthetic, that is intended for inhalation. “Smoking” also includes carrying or using an activated electronic smoking device.

- (L) **“Staff”** means any person employed by [district/school name] as full or part-time, or any position contracted for or otherwise employed, with direct or indirect monetary wages or compensation paid by [district/school name], or anyone working on a volunteer basis. This term includes, but is not limited to, faculty, service personnel, volunteers, chaperones, student teachers, adult classroom or student aides, and other adults working for [district/school name].
- (M) **“Student”** means any person enrolled in [district/school name]’s educational system.
- (N) **“Tobacco industry”** means manufacturers, distributors or wholesalers of tobacco products or tobacco-related devices (e.g., Juul, Altria). This includes parent companies and subsidiaries.
- (O) **“Tobacco industry brand”** means any corporate name, trademark, logo, symbol, motto, selling message, recognizable pattern of colors, or any other indication of product identification identical or similar to those used for any brand of tobacco product, company, or manufacturer of tobacco products.
- (P) **“Tobacco product”** means any product containing, made, or derived from tobacco or that contains nicotine, whether synthetic or natural, that is intended for human consumption, whether chewed, smoked, absorbed, dissolved, inhaled, snorted, sniffed, or ingested by any other means, or any component, part, or accessory of a tobacco product, including but not limited to: cigarettes; electronic smoking devices; cigars; little cigars; cheroots; stogies; periques; granulated, plug cut, crimp cut, ready rubbed, and other smoking tobacco; snuff; snuff flour; cavendish; plug and twist tobacco; fine-cut and other chewing tobacco; shorts; refuse scraps, clippings, cuttings and sweepings of tobacco; and other kinds and forms of tobacco.
- (Q) **“Tobacco products shop”** means a retail establishment that derives more than 90 percent of its gross revenue from the sale of tobacco products, as defined in this policy.
- (R) **“Tobacco-related devices”** means ashtrays, rolling papers, wraps, or pipes for smoking and any components, parts, or accessories of electronic smoking devices.
- (S) **“Visitor”** means any person subject to this policy that is not a student, staff, or administrator as defined above.

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IV. General Statement of Policy

- (A) [district/school name] students are prohibited from possessing, using, consuming, displaying, promoting, or selling any tobacco products, tobacco-related devices, imitation tobacco products, or lighters at any time on school property or at any off-campus, school-sponsored event.
- (B) Administrators, staff, or visitors of [district/school name] are prohibited from using, consuming, displaying, activating, promoting, or selling any tobacco products, tobacco-related devices, imitation tobacco products, or lighters at any time on school property or at any off-campus, school-sponsored events. This includes products or paraphernalia displaying tobacco industry brands.
- (C) It shall be a violation of this policy for [district/school name] to solicit or accept any contributions, gifts, money, curricula, or materials from the tobacco industry or from any tobacco products shop. This includes, but is not limited to, donations, monies for sponsorship, advertising, alleged educational materials, promotions, loans, scholarships, or support for equipment, uniforms, and sports and/or training facilities. It shall also be a violation of this policy to participate in any type of service funded by the tobacco industry while in the scope of employment for [district/school name].
- (D) It shall be a violation of this policy for any person to promote, or for [district/school name] to promote or allow promotion of tobacco products, tobacco-related devices, or imitation tobacco products on the school property or at off-campus, school-sponsored events. This includes promotion of these products via gear, technology accessories, bags, clothing, any personal articles, signs, structures, vehicles, flyers or any other materials.
- (E) [district/school name] shall act to enforce this policy and to take appropriate action against any student, staff, administrator, or visitor who is found to have violated this policy.
- (F) Instruction to discourage the use of tobacco products shall be included in the education provided for all students. Staff responsible for teaching tobacco use prevention shall have adequate training and participate in ongoing professional development activities to effectively deliver the education program as planned. The curriculum for this instruction will not be paid for or developed by the tobacco industry or its subsidiaries.

V. Exceptions

- (A) It shall not be a violation of this policy for a person to possess or provide tobacco, tobacco-related devices, imitation tobacco products, or lighters to any other person as part of an indigenous practice or a lawfully recognized religious, spiritual, or cultural ceremony or practice. It shall not be a violation of this policy to use tobacco or tobacco-related devices as part of an educational experience related to indigenous tobacco practices that has been approved by administrators.
- (B) It shall not be a violation of this policy for tobacco products, tobacco-related devices, imitation tobacco products, or lighters to be included in an instructional or work-related activity in [district/school name] school buildings if the activity is conducted by a staff member or an approved visitor and the activity does not include smoking, chewing, or otherwise ingesting the product.
- (C) It shall not be a violation of this policy for non-students 18 years and older to use or possess a product that has been approved by the U.S. Food and Drug Administration for sale as a tobacco cessation product, as a tobacco dependence product, or for other medical purposes, and is being marketed and sold solely for such an approved purpose.

VI. Opportunities for Cessation Programs

- (A) Administrators shall consult with the local public health department or other appropriate health and allied community-based organizations to provide students, staff, and administrators with information and access to support systems, programs, and services to encourage them to abstain from the use of tobacco products.
- (B) Administrators shall identify and offer evidence-based programs and services for staff that use tobacco products to support them in complying with this policy.

VII. Enforcement

The success of this policy depends upon the thoughtfulness, consideration, and cooperation of the whole [district/school name] community. All individuals on school premises, including students, staff, administrators, and visitors are responsible for adhering to and enforcing this policy. Members of the [district/school name] community are encouraged to communicate this policy with courtesy and diplomacy. Any person acting in violation of this policy will be informed or reminded of the policy and asked to comply.

COMMERCIAL TOBACCO FREE SCHOOLS

(A) Students

- (1) The first violation shall result in confiscation of tobacco products, tobacco-related devices, imitation tobacco products, or lighters; notification of parents and/or guardians; and at least one of the following:
 - (i) A student meeting and individual student assessment with a chemical health educator or designated staff to discuss commercial tobacco use and the school policy.
 - (ii) Student participation in a tobacco education program.
 - (iii) Provision of information to student about available cessation programs and resources.
- (2) The second violation shall result in confiscation of tobacco products, tobacco-related devices, imitation tobacco products, or lighters; notification of parents and/or guardians; the provision of information to the student about available cessation programs; and at least one of the following:
 - (i) A student meeting and individual student assessment with a chemical health educator or designated staff with parents and/or guardians to discuss commercial tobacco use and school policy.
 - (ii) Student participation in a tobacco education program.
- (3) The third and any subsequent violation shall result in confiscation of tobacco products, tobacco-related devices, imitation tobacco products, or lighters; notification of parents and/or guardians; the provision of information to the student about available cessation programs; student participation in a tobacco education program; and at least one of the following:
 - (i) A student meeting and individual student assessment with a chemical health educator or designated staff with parents and/or guardians to discuss commercial tobacco use and school policy.
 - (ii) Educational community service.

(B) Staff

- (1) The first violation of this policy shall result in a verbal warning to the staff member and an offer of a referral to cessation services.

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- (2) The second violation shall result in a written warning to the staff member with a copy placed in the staff member's district personnel file, and an offer of referral to cessation services.
- (3) The third violation shall be considered insubordination and shall be dealt with accordingly based on established policies and procedures for suspension and/or dismissal of staff.

(C) Visitors

- (1) Visitors observed violating this policy shall be asked to comply with [district/school name]'s tobacco-free policy.
- (2) If a visitor fails to comply with the request, this policy violation may be referred to the building principal or other available school district supervisory personnel. The supervisor shall decide on further action that may include a directive that the visitor leave school property and forfeit any fee charged for admission to a school-sponsored event.
- (3) Repeated violations may result in a recommendation that the superintendent prohibit the individual from entering [district/school name]'s property for a specified period of time.

VIII. Dissemination of Policy

- (A) Appropriate signage shall be posted throughout the district at building entrances and other highly visible locations on all school buildings, building entrances, vehicles, vehicular entrances to school grounds, and all indoor and outdoor athletic facilities indicating that [district/school name] requires an environment free of commercial tobacco.
- (B) The [school/district] shall notify students and parents/guardians of this policy through student handbooks and orientations.
- (C) The [school/district] shall provide notice of this policy in staff handbooks, through orientations and employee or staff trainings, and when offering employment.
- (D) The [school/district] shall make reminder announcements of its commercial tobacco-free policy at [school/district] events at appropriate intervals throughout the events, when possible.

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IX. Program Evaluation

The tobacco-free policy shall be assessed by the school district or its designee evaluator at regular intervals, but at least once a year, to determine whether policies, policy enforcement, communication, education, staff training, and cessation programs are effective. Policies and programs shall be updated and revised accordingly.

X. Effective Date

This policy shall take effect in full on [insert date].

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The Public Health Law Center provides information and legal technical assistance on issues related to public health. The Center does not provide legal representation or advice. This document should not be considered legal advice.

Endnotes

- 1 The Public Health Law Center recognizes that traditional and commercial tobacco are different in the ways they are planted, grown, harvested, and used. Traditional tobacco is and has been used in sacred ways by Indigenous communities and tribes for centuries. Comparatively, commercial tobacco is manufactured with chemical additives for recreational use and profit, resulting in disease and death. For more information, visit: <http://www.KeepItSacred.ITCMI.org>. When the word “tobacco” is used throughout this document, a commercial context is implied and intended.
- 2 20 U.S.C. § 6083(a), <https://www.law.cornell.edu/uscode/text/20/6083>.
- 3 National Association of State Boards of Education, *Tobacco-Free Environments*, <https://statepolicies.nasbe.org/health/categories/physical-environment/tobacco-free-environments>.
- 4 Traditional and commercial tobacco are different in the ways they are planted, grown, harvested, and used. Traditional tobacco is and has been used in sacred ways by Indigenous communities and tribes for centuries. Comparatively, commercial tobacco is manufactured with chemical additives for recreational use and profit, resulting in disease and death. For more information, visit <http://www.KeepItSacred.ITCMI.org>. When the word “tobacco” is used throughout this document, except for the indigenous practice provision, a commercial context is implied and intended.
- 5 U.S. DEP’T OF HEALTH AND HUMAN SERVICES, THE HEALTH CONSEQUENCES OF SMOKING — 50 YEARS OF PROGRESS: A REPORT OF THE SURGEON GENERAL (2014), https://www.cdc.gov/tobacco/data_statistics/sgr/50th-anniversary/index.htm.
- 6 *Id.*
- 7 U.S. DEP’T HEALTH & HUMAN SERVICES, E-CIGARETTE USE AMONG YOUTH AND YOUNG ADULTS: A REPORT OF THE SURGEON GENERAL (2016), https://e-cigarettes.surgeongeneral.gov/documents/2016_sgr_full_report_non-508.pdf.

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- 9 U.S. DEP'T OF HEALTH AND HUMAN SERVICES, THE HEALTH CONSEQUENCES OF SMOKING — 50 YEARS OF PROGRESS: A REPORT OF THE SURGEON GENERAL (2014), https://www.cdc.gov/tobacco/data_statistics/sgr/50th-anniversary/index.htm; U.S. DEP'T OF HEALTH AND HUMAN SERVICES, PREVENTING TOBACCO USE AMONG YOUTH AND YOUNG ADULTS: A REPORT OF THE SURGEON GENERAL (2012), https://www.cdc.gov/tobacco/data_statistics/sgr/2012/index.htm.
- 10 Karen A. Cullen et al., *Notes from the Field: Use of Electronic Cigarettes and Any Tobacco Product Among Middle and High School Students — United States, 2011-2018*, MORBIDITY & MORTALITY WKLY. REP. 1276 (2018), <https://www.cdc.gov/mmwr/volumes/67/wr/pdfs/mm6745a5-H.pdf>.
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- 13 U.S. DEP'T OF HEALTH AND HUMAN SERVICES, *Surgeon General's Advisory on E-Cigarette Use Among Youth* (2018), <https://e-cigarettes.surgeongeneral.gov/documents/surgeon-generals-advisory-on-e-cigarette-use-among-youth-2018.pdf>.
- 14 Jonathan D. Klein et al., *History of Childhood Candy Cigarette Use is Associated with Tobacco Smoking by Adults*, 45 PREV. MED. 26 (2007), <https://doi.org/10.1016/j.ypmed.2007.04.006>. Jonathan D. Klein & Steve St. Clair, *Do Candy Cigarettes Encourage Young People to Smoke?*, 321 BRIT. MED. J. 362 (2000), <http://www.bmj.com/cgi/content/full/321/7257/362>.
- 15 National Cancer Institute, Tobacco Control Monograph No. 19: *The Role of the Media in Promoting and Reducing Tobacco Use* (2008), https://cancercontrol.cancer.gov/brp/tcrb/monographs/19/m19_complete.pdf; Matthew C. Farrelly et al., *Getting to the Truth: Evaluating National Tobacco Countermarketing Campaigns*, AM. J. PUBLIC HEALTH 92 (2002), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1447480/pdf/0920901.pdf>.

CESSATION AND MORE HELP

for Communities, Youths,
Parents, and Schools

Please visit poehealth.org for more information and resources,
as well as any links you see written in this booklet.








RESOURCE GRID

COMMUNITIES

YOUTHS

PARENTS

SCHOOLS

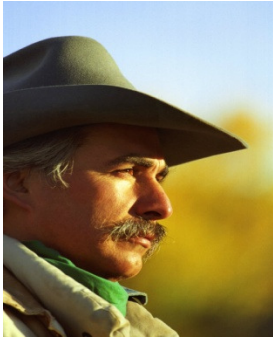
| Program/Resource Title | Description | Website/Phone Number |
|---|---|--|
|  | <p>The Mission of the Poe Center for Health Education is to educate and empower NC children, youth and their families to make choices that increase positive health behaviors. The Poe Center provides a number of tobacco education programs for youth and adults. Young people who are interested in health communities and prevention efforts can join Poe’s Youth Empowerment teams.</p> | <p>www.poehealth.org 919-231-4006</p> |
|  <p>The Risks: E-Cigarettes and Young People</p> | <p>A message from the Office of the U.S. Surgeon General, facts on e-cigarettes</p> | <p>https://e-cigarettes.surgeongeneral.gov/</p> |
|  <p>American Heart Association.</p> | <p>The American Heart Association is committed to fighting heart disease and stroke and raising awareness of these diseases. As part of our mission, we focus on specific causes designed to help people achieve a heart-healthy lifestyle including tobacco prevention.</p> | <p>www.heart.org https://www2.heart.org/site/SPageServer?pagename=ahc_resources_vapingandecigarettesresources</p> |
|  <p>Take Down Tobacco</p> | <p>What: One-hour tobacco 101 training on the toll of tobacco Who: Youth new to tobacco prevention Why: To educate and engage youth to #BeTheFirst tobacco-free generation Where: Meeting or class room with audiovisual equipment capabilities</p> | <p>www.tobaccofreekids.org www.takingdowntobacco.org Go online and register to unlock training options</p> |
|  | <p>The Food and Drug Administration’s “The Real Cost” peer-to-peer campaigns are designed to educate at-risk youth aged 12-17 about the harms of tobacco use.</p> <p>See several campaigns with different target audiences – middle school youth; rural youth using smokeless tobacco; electronic cigarettes; LGBT youth (This Free Life - see below)</p> <p>See videos on YouTube: https://www.youtube.com/user/KnowTheRealCost/videos?disable_polymer=1</p> | <p>https://www.fda.gov/TobaccoProducts/PublicHealthEducation/PublicEducationCampaigns/TheRealCostCampaign/default.htm</p> <p>https://therealcost.betobaccofree.hhs.gov/?g=t – interactive youth site</p> |
|  | <p>Fresh Empire promotes a tobacco-free life by educating youth through Hip Hop-inspired events, videos and contests. The public education campaign is designed to prevent and reduce tobacco use among at-risk multicultural youth ages 12-17.</p> | <p>https://freshempire.betobaccofree.hhs.gov</p> |
|  | <p>Dedicated to defending teens from tobacco companies lies and deceptions. “truth” produces television and digital content to encourage teens to reject tobacco and to unite against the tobacco industry. Requires flash plugin.</p> | <p>https://www.thetruth.com</p> |

RESOURCE GRID

| Program/Resource Title | Description | Website/Phone Number |
|---|--|--|
|  | <p>National Institute on Drug Abuse for Teens – click on drug facts and then “tobacco, nicotine & e-cigarettes”; see infographic on teens and e-cigarettes https://teens.drugabuse.gov/drug-facts/tobacco-nicotine-e-cigarettes</p> | <p>https://teens.drugabuse.gov/</p> |
|  | <p>See a variety of tools and tips ranging from smokefree texting to quitSTART App designed to help teens who are trying to quit. Sponsored by National Cancer Institute – part of the Smokefree.gov series</p> | <p>https://teen.smokefree.gov/</p> |
| <p>TRUTH Tobacco Industry Documents</p> | <p>Truth Tobacco Industry Documents -Provides permanent access to tobacco industry internal corporate documents produced during litigation between US States and the seven major tobacco industry organizations and other sources. These internal documents give a view into the workings of the Tobacco Industry</p> | <p>https://www.industrydocumentslibrary.ucsf.edu/tobacco/</p> |
|  | <p>NC laws provide limited immunity from prosecution if a person seeks medical assistance for individual experiencing an alcohol or drug related emergency by contacting 911, law enforcement or emergency medical personnel.</p> | <p>www.safetocall.org/NC</p> |
|  | <p>CRISIS LINE If you are in crisis or would like to speak to someone immediately, please call or text: 919-231-4525 or 877-235-4525</p> | <p>919-231-4525 or 877-235-4525</p> |
|  | <p>FDA is aware of explosion events and is collecting data to help address this problem. Please report a vape explosion, or any other unexpected health or safety issue with a vape, to the FDA through the Safety Reporting Portal. When you fill out the form, please be sure to include: Other information about e-cigarettes and tobacco www.fda.org</p> | <p>www.safetyreporting.hhs.gov www.fda.org</p> |
|  | <p>Dedicated to defending teens from tobacco companies lies and deceptions. “truth” produces television and digital content to encourage teens to reject tobacco and to unite against the tobacco industry. Requires flash plugin.</p> | <p>www.quitlinenc.com</p> |

QUITLINE

Are **you** ready to
quit using tobacco?



1-800-QUIT-NOW
1 - 8 0 0 - 7 8 4 - 8 6 6 9

N.C. Tobacco Use Quitline
Talk with an expert Quit Coach
1-800-784-8669

24 hours a day, 7 days a week
Quit Coaching available in many languages.
All calls are free and confidential.
TTY 1-877-777-6534

Call us. **You can quit.**
We can help.



COMMUNITIES

YOUTHS

PARENTS

SCHOOLS

Many teens have **dangerous misperceptions** that lead them to believe that vaping is harmless.

Common myths believed about vaping, along with the facts.

“It’s just flavoring.”

Vapes get their flavors from chemicals. While these flavorings are safe to eat in food, they’re not safe to inhale. Inhaling flavor chemicals can harm your lungs.¹¹

Want an example?

Some buttery-flavored vapes like caramel contain diacetyl and acetoin. Inhaling diacetyl has been linked to popcorn lung, a lung disease that doesn’t have a cure.¹¹

“It’s just water vapor.”

But it’s not.

Vaping can expose the user’s lungs to harmful chemicals like formaldehyde, diacetyl and acrolein, as well as toxic metal particles like nickel, tin and lead.^{4,8-10,11-13}

“I don’t have an addictive personality — I won’t get hooked on vapes.”

Vaping delivers nicotine to the brain in as little as 10 seconds.^{14,15}

A teen’s brain is still developing, making it more vulnerable to nicotine addiction.¹⁶

Some vapes that claim they are nicotine-free are not.^{8,17-22}

“My vape says it’s nicotine-free. There’s no way I’ll become addicted.”

“Nicotine isn’t that bad for me.”

Nicotine exposure during the teen years can disrupt normal brain development. It can have long-lasting effects, like increased impulsivity and mood disorders.²³⁻²⁵

“Just because I vape doesn’t mean I’m going to smoke cigarettes.”

Research shows teens who vape are more likely to try smoking cigarettes.²⁶

FDA’s Efforts to Curb Youth E-Cigarette Use

FDA is committed to protecting youth from the dangers of e-cigarettes. In addition to our national peer-to-peer public education campaign called “The Real Cost,” we’re joining forces with Scholastic to provide teachers and school administrators with the resources they need to educate their students about e-cigarettes.

Together, we’ve created a **free lesson plan and research activity** for teachers to educate their students on the health risks of e-cigarette use. Please visit the [Scholastic youth-vaping-risks site](#) to access these resources.

Share This Information



Please share this infographic with other teachers and school administrators. In addition, if you’d like to learn more about e-cigarettes, check out these resources:

- » [Surgeon General Fact Sheet](#) – E-cigarette use among youth and young adults
- » [Parent Tip Sheet](#) – How parents can talk with their teen about vaping
- » [CDC Infographic](#) – E-cigarette ads and youth infographics
- » [Smokefree Teen](#) – If you know a teen who is addicted to any tobacco product, including cigarettes and e-cigarettes, there are resources to help them quit



224 Sunnybrook Road
Raleigh, NC 27610
919.231.4006
www.poehealth.org

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