

Children and Families Scrutiny Board 7th July 2023

Briefing paper on vaping, children and young people

Heather Thomson (Head of Service, Health Improvement) and Michelle Kane (Head of Service Children and Families Public Health)

1. Background

In May 2023 the Chief Medical Officer, Professor Chris Whitty, released a statement¹ highlighting the increased marketing of vapes to young people. In it, Professor Whitty is clear that vapes do have a role as an aid for stopping smoking, however for people who do not smoke there are risks in starting to vape and the promotion of vaping to children and young people is unacceptable.

There are many similarities when comparing vaping with smoking and we can learn much from the comprehensive approach to tackling tobacco use that have resulted in a halving of smoking rates over the last 20 years. Key to this has been the use of regulation to reduce access to tobacco products, restricting advertising and promotion, affordability, appeal, and promoting smoke-free as the norm.

As with smoking, new vapers are more likely to be children and young people, initially as experimenters. However, most vapes do contain nicotine, a highly addictive substance, and with continued use, it is possible that children and young people could become dependent on vaping.

Manufacturers of vapes are now designing products that are clearly aimed at children and young people and retail at a price point that does not present a significant cost barrier. New disposable vapes, in appealing designs, flavours, and colours are flooding the market and the uptake of their use among young people is increasing.

As with tobacco, there is also increasing evidence of an emerging market in illicit and unregulated vape products.

This briefing presents an outline of key points in relation to vaping and young people including explaining what vapes are, the risks of vaping, prevalence amongst young people, vaping as a gateway to smoking, regulation and the law relating to sales and marketing.

2. Vaping products

Vapes (or e cigarettes) were first introduced to Europe in 2005 and since then have become increasingly popular in the UK, primarily amongst people who smoke.

Vapes come in two forms:

- Disposable vape devices, prefilled with e-liquid, with a battery and can be used straight away.
- Rechargeable vaping kits which have either replaceable pre-filled cartridge, or a tank filled with a liquid containing nicotine. Rechargeable vapes of all types typically use lithium-ion batteries.

The most frequently used product amongst young people is the disposable vape making up 7.7% of vape use in 2021, increasing to 52% in 2022 and 69% in 2023, the most popular brand being Elf Bar. Children are price sensitive and the cheapest Elf Bar retails at £2.99 making the products affordable compared with rechargeable vapes or cigarettes.

3. Vaping prevalence in young people

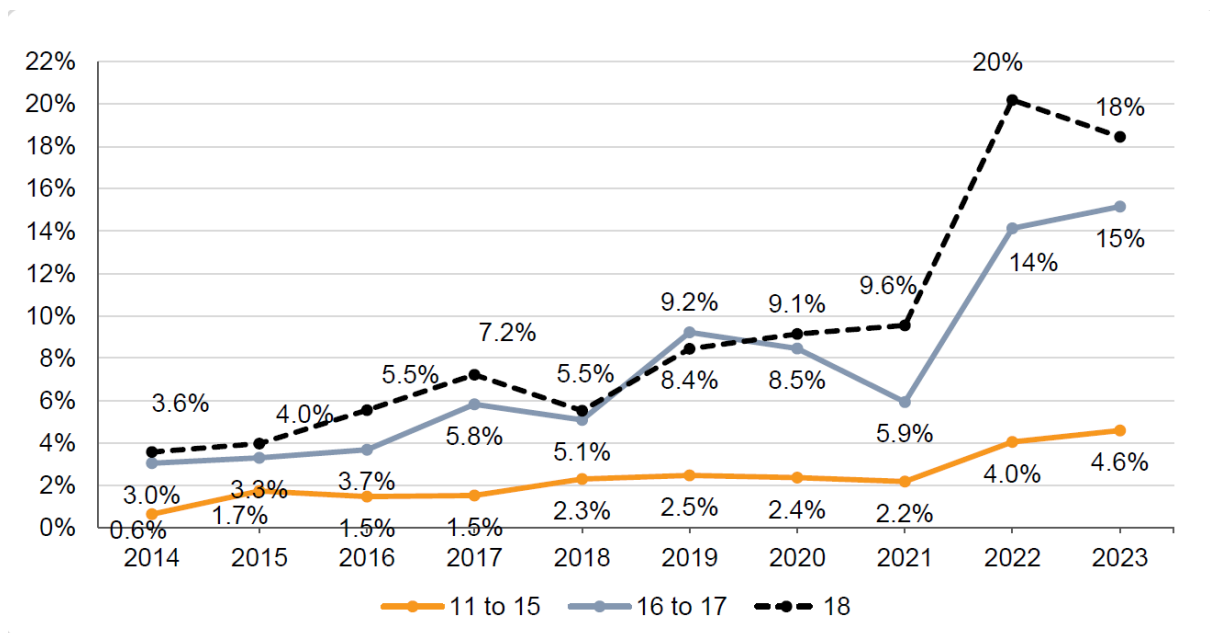
From 2014 to 2018, the use of vapes by children has generally been low, however, findings from the 2023 Action on Smoking and Health (ASH) reportⁱⁱ shows regular (at least once a week) and occasional (less than once a week) use of vapes has doubled since 2020, although there has been less of an increase between 2022 and 2023. However, the proportion of children experimenting with vaping (trying once or twice) has increased by 50% between 2022 and 2023 (from 7.7% to 11.6%). All these increases correspond to the introduction of disposable devices.

Figure 1: Vaping amongst 11–17-year-olds in the UK

	2020	2021	2022	2023
Tried an e-cigarette once or twice (experiment)	8.1%	7.2%	7.7%	11.6%
Occasional use	2.4%	2.0%	3.9%	3.9%
Regular Use	1.7%	1.2%	3.1%	3.7%
Used to use but no longer do	1.7%	0.8%	1.1%	1.3%

Note: Data collection for 2020 was mainly prior to the first lockdown while data collection in 2021 followed almost a year of the pandemic, as we were beginning to emerge from the third lockdown. Lower levels of vaping in 2021 may therefore be associated with the impact of the pandemic on young people’s lives.

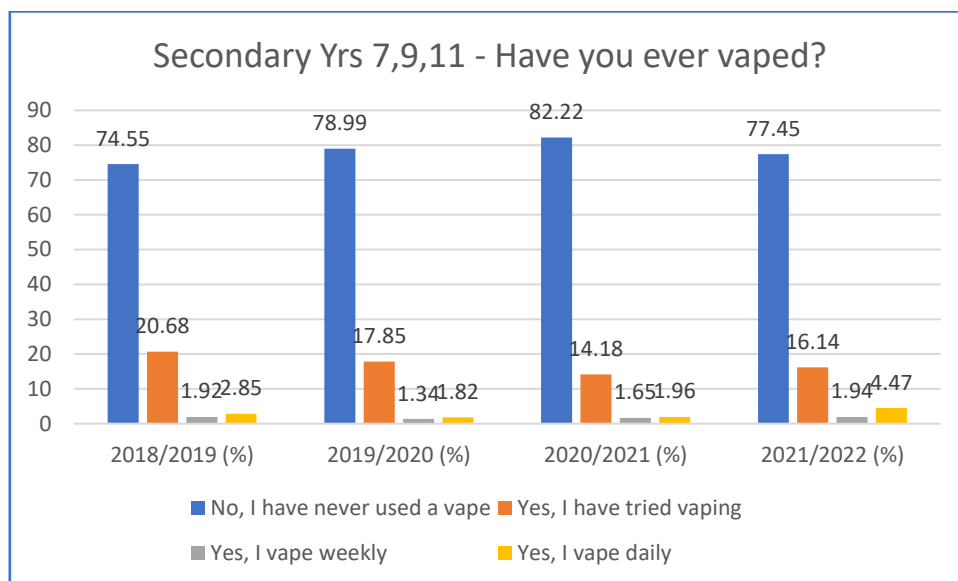
Figure 2: – Prevalence of current (occasional and regular) use of vaping shown by age range (excludes experimenters)



Data on vaping have been collected in Leeds since 2018 via the ‘My School My Health’ survey. In 2022 the Leeds prevalence of occasional and regular users of vapes among secondary school (11-16 yr-olds) aged pupils was 6.41% compared with 4.0% nationally, however the national figure excludes 16-year-olds so when observing a comparable age range, the prevalence is likely to be similar, given the percentage of young people vaping increases with age.

The prevalence of those who report experimenting with vaping has been consistently higher in Leeds (double the rate of the national prevalence), we are yet to observe if the 22/23 follows the same upwards trend seen nationally.

Figure 3: Prevalence of vaping amongst young people in Leeds Years 7,9,11 combined (My Health My School)



Amongst never smokers, from the ASH 2023 survey, overwhelmingly, the primary reason for using e-cigarettes is experimental with 54% of respondents stating they vape ‘Just to give it a try’ the next main reasons are peer pressure (18%), this has increased from 11% in 2022, and ‘I like the flavours’ (12%)

Amongst those who currently smoke the reasons for vaping are more balanced with 26% stating experimental, 21% peer pressure and 16% because of liking the flavours

From the 2023 survey the most frequently used e-cigarette flavouring for young people is ‘fruit flavour’ chosen by 60% of current e-cigarette users. The next most popular flavour is from the ‘other flavour’ category (a wide variety including ‘chocolate, desserts, sweet, or candy, alcoholic drink, energy drink and soft drink flavour’) chosen by 21.8%, followed by ‘menthol/mint flavour’, chosen by 2.8%.

Tobacco (2.3%) or tobacco menthol flavour (2.3%) is less popular now than in the past, compared with 24.5% in 2015.

4. Vaping harms

Compared with smoking, vaping presents a significantly lower exposure to harmful substances, as shown by biomarkers associated with the risk of cancer, respiratory and cardiovascular conditions. Vapes do not include the 7,000 toxic chemicals and tar that are in cigarettes.

However, vaping is not risk free. Vaping presents exposure to a range of chemical additives including flavourings and solvents, the effect of these on the lungs and body is not fully documented, particularly in the longer term.

- Vaping itself can lead to coughing, headaches, dizziness and sore throats

- Vaping products do contain nicotine, which is inhaled through a vapour. While it is nicotine that causes tobacco cigarettes to be so addictive, on its own it is relatively harmless
- The vapour from heating an e-liquid is much less harmful than the smoke from burning tobacco.
- There is no significant increase of toxicant biomarkers after short-term second-hand exposure to vaping among people who do not smoke or vape

Disposable vapes contain less nicotine compared to cigarettes. Comparing like with like, a UK standard 2 ml disposable vape (which is used approximately 20 times) contains 40 mg of nicotine, an average pack of 20 cigarettes contains 250 mg of nicotine which is more than five times as much.

There is not strong evidence that vaping is a gateway into smoking. The 2023 ASH survey showed young people who smoked had a stronger urge to smoke compared with the urge to vape amongst young people who vape, suggesting lower levels of addiction. Some who try vaping first *may* go on to smoke cigarettes, but this association works both ways and there are common risk factors for both behaviours; this does not prove that vaping caused subsequent smoking.

If vaping were a gateway into smoking, as vaping increased it would be expected that smoking rates would stop declining or start to increase again. To the contrary between 2012 and 2018 when vape use grew rapidly from a low base in England, smoking rates continued to fall. Among 11–15-year-olds current smoking fell from 8% to 5% and ever having tried smoking from 23% to 16%, and among those aged 16+ smoking rates fell from 20% to 16%, which does not support the gateway hypothesis.

5. Regulation, legislation, and marketing

Manufacturers of vaping products must follow regulations on ingredients, packaging, and marketingⁱⁱⁱ - and all vapes, and e-liquids must be registered with the Medicine and Health Care Products Regulatory Agency (MHRA). However, the agency is not required to check the claims made in paperwork and has no power to investigate unregistered products.

Vapes and vaping products containing nicotine (e.g. e-liquids), like tobacco, are age restricted and it is illegal to sell them to children under 18 years of age, and for adults to buy them on their behalf.

The ASH surveys show that shops (primarily corner shops, newsagents, and off licenses) are the main source of purchase. In 2023 57.6% of 11–17-year-olds purchased vapes from shops. In Leeds in 2022, 23.22% of 11-16-year-olds reported purchasing vapes from shops with 30.71% saying vapes are provided by their friends (it is unknown as to whether these are being given or purchased).

Advertising of nicotine-containing vaping products is prohibited on broadcast media (TV and radio); and in newspapers, magazines, and periodicals, online media and some other forms of electronic media. However, there are no restriction on shop displays and, in many shops, disposable vapes, with bright and appealing packaging are dominating shelf space and alongside increasing sponsorship deals with social media ‘influencers’ and more organic promotion, young people are being exposed to regular promotional activity.

The ASH survey showed awareness of vape promotion has risen amongst 11–17-year-olds between 2022 and 2023 in shops (37%-53%) and online (24%-32%) with just under half (49%) of those exposed to online promotion stated having seen advertising on Tik Tok, 29% on You Tube and 28% on Instagram.

6. Local actions to address vaping among young people.

Public Health has been working alongside colleagues across the region and locally to deliver actions to address the increase in young people and vaping, these have included:

- Local adaptation of educational materials developed in collaboration with Smoke Free Sheffield and ASH, these include [an animation](#) and printed materials which are all available from the [Public Health Resource Centre](#).
- Presentations to a range of people who may have contact with young people including teachers at the recent Subject Leader Day training event for schools and the police service.
- The Healthy Schools Team continue to gather annual data on the use of vapes and cigarettes among young people.
- West Yorkshire Trading Standards (WYTS) are commissioned by a collaborative of West Yorkshire Public Health departments (including Leeds) to address cheap and illicit tobacco (CIT) activity across the region. Recent reporting has shown that of the complaints received across West Yorkshire in relation to underage sales during 22/23 nearly 76% (368/486) were relating to vapes, in Leeds 68.5% (87/127) of complaints were in relation to vapes.
- On receiving a complaint WYTS notify traders of the complaint / allegation and request all staff are appropriately trained on the relevant law and understand the age restriction. WYTS can follow up with a test purchase with 13–16 year old child, to ensure they are not selling vapes to minors. Where a trader does sell, WYTS are obligated to assess their due diligence measures (i.e. the steps they take to avoid sales – for example training and point of sale prompts etc) and where this is poor or non-existent, the circumstances dictate it is necessary to do so and in the public interest, a prosecution will be made.

7. Next steps

- Public Health has expressed interested in collaboration with other authorities in the Yorkshire and Humber region to gain further academic insight into the behaviour of young people and vaping.
- The Healthy Schools Team continue to gather annual data on the purchase and use of vapes and cigarettes among young people and will develop a short Smart Survey for schools/settings to determine what they are doing to teach, resource and manage vaping in their schools and understand the challenges.
- The Office for Health Improvement and Disparities (OHID) is producing a new resource pack for schools on vaping, aimed at Years 7 and 8. The resources, to be published on the [Better Health School Zone](#) in time for the 2023/24 academic year, have been informed by research with teachers and young people. This will be disseminated to schools.
- A co-ordinated action plan will be developed with stakeholders by the end of 2023 to deliver local actions to address current vaping amongst young people and the prevention of the uptake of vaping.

ⁱ [Chief Medical Officer for England on vaping - GOV.UK \(www.gov.uk\)](#)

ⁱⁱ [Headline-results-ASH-Smokefree-GB-adults-and-youth-survey-results-2023.pdf](#)

The sample size for 2023 was 2656 respondents and is representative of all children in GB aged 11-18, much of the data is reported for 11–17-year-olds as sales are prohibited for these groups.

iii [E-cigarettes: regulations for consumer products - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/e-cigarettes-regulations-for-consumer-products)