SUBMISSION TO
YOUTH VAPING: CALL FOR EVIDENCE
JUNE 2023

About this submission

The George Institute for Global Health is pleased to contribute a written submission to the Office for Health Improvement and Disparities inquiry into e-cigarette use among youth. We commend the United Kingdom (UK) Government for its efforts to address the health-related risks presented by the emergence and rapid market penetration of e-cigarettes. Although the long-term effects of using e-cigarettes or being exposed to them are yet unknown, there is mounting evidence that they are associated with increased risk of developing non-communicable diseases (NCDs), including cardiovascular diseases, lung disorders, and cancer.

Although UK regulation of e-cigarettes is in line with the EU Tobacco Products Directive (2014/40/EU), many other countries either ban or regulate e-cigarettes more strictly. The Australian government has recently banned the importation of non-prescription vaping products and has a complete ban on e-cigarette advertising, which we applaud. We encourage the UK to follow suit by enforcing tighter regulations on internet advertising and higher levels of monitoring and enforcement to address e-cigarette availability. This would further strengthen existing regulations in the UK, including the enforcement of sales and marketing restrictions, such as plain packaging, which may be especially effective at reducing the appeal of e-cigarettes to young people.

We commend the UK Government on its evidence-based position on tobacco control and join our colleagues working in public health in supporting a comprehensive and coordinated approach to reduce tobacco-related harm. Over recent years, the use of unregulated vaping products, largely imported illegally, has rapidly increased with worrying trends in use seen in children and adolescents in particular. These products contain chemicals that are harmful to health, usually including the addictive substance, nicotine. It is therefore critical that these products are regulated, and their availability strictly controlled.
In addition to providing direct responses and evidence to the selected questions for this consultation (see below), The George Institute has identified several recommendations that we encourage the Office for Health Improvement and Disparities to consider:

1. As the long-term effects of using e-cigarettes or being exposed to them remain unknown, Nicotine Vapour Products (NVPs) should be used as a smoking cessation tool only under medical supervision.
2. The illegal importation of NVPs should be controlled strictly as an utmost priority.
3. Minimum safety standards for NVPs should be set according to scientific evidence of harm, and these safety standards should be monitored and enforced.
4. The production, sale, and import of non-nicotine e-cigarettes and flavours should be banned.
5. Legislative frameworks for tobacco control should be clear and streamlined to aid enforcement and avoid loopholes, including industry interference.

Building of regulatory compliance

What evidence is there about how and where children are accessing vapes?

One in five participants in our latest online survey of 1,009 15- to 30-year-olds in the UK revealed that they presently use e-cigarettes at least monthly, with one in ten reporting daily use. E-cigarette use among vapers was similar between men and women, and more prevalent among current smokers (45%), followed by former smokers (29%), compared to non-smokers (2%).¹

The most common places from which e-cigarettes were obtained by the young people surveyed were:
- Vape shops
- Corner shops
- Friends over the age of 18 years
- Online

The most common places where e-cigarettes were used by the young people surveyed were:
- Home
- Parties
- Other people’s home
- Workplace

The most common reasons for using e-cigarettes were because a friend used them (46%), as an aid to stop (40%) or reduce the number of tobacco cigarettes (37%), and because they were perceived as less harmful than tobacco cigarettes (30%).

These results add to our body of evidence from Australia, where we conducted a national survey with 1,006 Australians aged 15–30 years. Stated reasons for vaping included desirable
product flavours.\textsuperscript{2} Banning e-cigarette flavours that serve to increase palatability is therefore an important intervention to discourage e-cigarette use.

**Recommendation:** The influence of significant others, particularly friends and family, on use of e-cigarettes by young people is an important driver. E-cigarettes are being readily accessed from numerous sources, highlighting the importance of intensifying monitoring and enforcement of strict regulations to reduce e-cigarette supply. School settings offer an opportunity to reach young people in large numbers and potentially prevent the detrimental effects vaping has on mental health, peer relationships, and academic achievement.

**The appeal of vape products**

**What evidence is there about the appeal of vapes to children?**

Susceptibility is defined as being curious about e-cigarettes, intending to use e-cigarettes in the next year, and/or being willing to use an e-cigarette if offered one by a friend. In the study of 15–30-year-olds in the UK (referenced above), *perceiving e-cigarettes as harmful was associated with an approximately 40\% lower susceptibility to using e-cigarettes.*

Approximately half of e-cigarette users and less than a third of current tobacco smokers in our study reported having seen warning labels on packages of e-cigarettes, despite the UK's attempt to enforce sales and marketing restrictions, such as plain packaging. This is consistent with findings from past national surveys conducted in the UK, which revealed a lack of knowledge regarding the relative dangers of smoking and vaping.

**Recommendation:** It is critical for young people to receive regular and reliable information about the harms associated with vaping. Different forms of messaging about harms need to be tested to ensure effectiveness and then disseminated widely through credible sources and well-designed public health campaigns to prevent misinformation from luring young people into vaping.

**Marketing and promotion of vape products**

**Is there any other evidence on the marketing and or promotion of vapes to children that the government should be aware of?**

To determine the impact of exposure to e-cigarette advertising on young people's use of e-cigarettes, we conducted a four-country study (Australia/India/China/UK) with 1000 15-year-olds in each location. Young people in all four of the countries, including the UK, reported seeing e-cigarette marketing on a variety of media platforms. *Despite widespread bans in every country, exposure rates for vape shops, other retailers, and on social media (Instagram) were particularly high.*\textsuperscript{3}
It was especially alarming that there was a strong correlation between respondents’ exposure to e-cigarette advertising across all media types and their history of e-cigarette use. This is in line with earlier research and emphasises the significance of ensuring that current advertising restrictions are properly enforced. Importantly, e-cigarette advertising restrictions appear to be supported by young people in the countries studied, indicating that stricter oversight and enforcement would likely be accepted.\(^4\)

**Recommendation:** Since it appears to be the main means by which e-cigarette marketers are able to reach young people, cigarette advertising at vape shops and other retailers should be limited, and advertising on social media should be banned. To avoid health-related harm, advertising regulations must be carefully constructed and strictly enforced.

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**About The George Institute for Global Health**

The George Institute for Global Health – a leading independent global medical research institute – was established in Sydney, with additional major centres in China, India, and the UK, and an international network of experts and collaborators. Our mission is to improve the health of millions of people worldwide by using innovative approaches to prevent and treat the world’s biggest killers: non-communicable diseases (NCDs) and injury.

Our work aims to generate effective, evidence-based, and affordable solutions to the world’s biggest health challenges. We research the chronic and critical conditions that cause the greatest loss of life and quality of life and the most substantial economic burden, particularly in resource-poor settings.

The [Commercial Determinants of Health Initiative](#) at The George Institute is actively involved in tobacco and e-cigarette research and policy. Relevant topics covered include use prevalence, product availability, advertising reach, and community attitudes.\(^2\,^5\,^6\) Our work has a particular focus on vulnerable groups such as children and youth, and the policy levers that are most effective in reducing product and marketing exposure among these groups.

Through a program of research, [advocacy and thought leadership](#), and [disruptive social entrepreneurship and innovation](#), we are driving global impact.
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References