

Written evidence submitted by The Incident Response Group to the Tobacco and Vapes Bill Public Bill Committee (TVB36)

Vaping amongst Children and Young People in Wales

Written evidence submitted to the Public Bill Committee for the Tobacco and Vapes Bill
Public Health Wales on behalf of the Incident Response Group

Background

1. This document summarises the findings of the Incident Response Group (IRG) that was convened by Public Health Wales in July 2023 to investigate the rise of vaping amongst children and young people in Wales.
2. The evidence produced by the IRG is relevant to the provisions set out in the Tobacco and Vapes Bill, in particular those that address the visibility of vapes to children and young people
3. The IRG included representatives from public health, healthcare, education, youth work, school nursing, environmental health, toxicology, communications and the third sector. Welsh Government representatives attended as observers and to provide specific policy advice when requested by the Group. A list of IRG members is included in Appendix 1.
4. The IRG met 8 times between July and November 2023 to review the evidence in relation to vaping amongst children and young people in Wales, agree consensus statements interpreting that evidence and recommending control measures to address the issue. There were mechanisms for the group to discuss and query evidence and for stakeholders to register disagreement with specific statements.
5. This document summarises key evidence from the work of the IRG. A full report was published on 18 April 2024 and is available in Cymraeg at <https://icc.gig.cymru/newyddion1/ewch-ir-afael-a-dibyniaeth-gweledd-ac-argaeledd-er-mwyn-mynd-ir-afael-ar-cynnydd-cyflym-mewn-fepio-ymhlith-pobl-ifanc-meddai-arbenigwyr-iechyd-cyhoeddus/fepio-ymhlith-plant-a-phobl-ifanc-yng-nghymru/> and in English at <https://phw.nhs.wales/news/tackle-dependency-visibility-and-availability-to-address-rapid-rise-in-youth-vaping-say-public-health-experts/vaping-amongst-children-and-young-people-in-wales-incident-response-group-report/>
6. The IRG agreed a 'case definition' to clarify the population that was the focus of investigations and recommendations:
 - A young person under 18 years of age
 - and
 - is resident or learner in Wales
 - and
 - is a regular user of nicotine-containing vaping device
 - and
 - is at risk of nicotine dependency and is not a current or former regular smoker of tobacco

Epidemiology and harms of vaping amongst children and young people in Wales

7. The main source of epidemiological data on prevalence and patterns of vaping was the Schools Health Research Network (SHRN) which surveys all learners in years 7 to 11 (i.e. 11- to 16-year-olds) in Welsh secondary education every two years. Data on vape use was collected in surveys administered in 2017¹, 2019² and 2021³.
8. In total 123,204 learners from 202 schools participated in the most recent 2021 survey, representing 73% of all learners in those years and 95% of all schools.
9. It was noted that SHRN data may not reflect the current picture, given that it did not include data on those over 16 and some settings (e.g. pupil referral units) are not included.
10. Key data considered by the Group is presented in Table 1.

Table 1: Proportion of Learners in Wales in Years 7-11 and in Year 11 Only Reporting Smoking and/or Vaping at Least Weekly, 2017-21 (Source: SHRN)

	2017	2019	2021
All years 7-11			
Smoking at least weekly	3.8%	3.9%	3.1%
Vaping at least weekly	3.4%	2.7%	5.4%
Smoking or vaping at least weekly	5.5%	4.9%	6.1%
Smoking and vaping at least weekly	1.5%	1.4%	2%
Year 11			
Smoking at least weekly	9%	8.8%	7.5%
Vaping at least weekly	6.6%	5.1%	13.6%
Smoking or vaping at least weekly	12.3%	10.8%	16.6%
Smoking and vaping at least weekly	3.2%	2.7%	5.4%

11. The Group recognised that the fast-moving social and commercial environment was important to consider in the context of children and young people vaping.
12. In particular, the Group reviewed evidence from ASH GB showing disposable device use as a proportion of device type used rising amongst this group from 7.7% to 69% between 2021 and 2023⁴
13. In terms of harms, the Group agreed that there is very strong and consistent evidence that vaping is considerably less harmful than smoking in terms of physical disease causation but that vaping is not risk free.

14. The Group considered that the current ban on the sale of vapes to under 18s in the UK was appropriate and that reducing vaping amongst this population an important health goal
15. The most commonly raised concerns raised by professionals working with children and young people and raised by Group members was the increasing prevalence of nicotine dependence and the impact this was having on health, wellbeing and learning. Reports from staff of learners finding it difficult to complete a school day, or even a period of class time between breaks without vaping were consistently related to the Group by those members working within or representing educational settings. Risks to health and wellbeing related to nicotine dependency were therefore agreed by the Group to be the focus of concern.

Investigations

16. The Group commissioned Public Health Wales to carry out field investigations to produce up-to-date information on key questions where further evidence was needed
17. A survey of School Senior Management Teams gathered evidence from 33 schools from 18 of the 22 local authorities in Wales
 - 17.1. Most respondents said that vape use first became an issue of concern either two years ago (38%) or one year ago (34%).
 - 17.2. None selected the option 'No issue of vape use has been identified'.
 - 17.3. 78% of respondents said vape use amongst pupils at their school has increased a great deal since vape use first became an issue of concern and 82% said it had increased a great deal in the past academic year (2022-23).
 - 17.4. 29% said that school exclusions relating to vaping had increased a great deal in the past academic year.
 - 17.5. 25% said that pupils who vape are likely to always or often have a history of smoking.
18. A survey of learners was administered in a small number of schools with figures reported for schools with high response rates
19. For one sample school with a high response rate (Year 7, n=167, est. response rate 90%; Year 10, n=124; est. response rate 80-89%)
 - 19.1. For Year 7 (11-12 year olds)
 - 19.1.1. 9% reported trying a vape at least once
 - 19.1.2. 5% reported trying a vape more than once, all of whom reported using a disposable device currently and the first time they vaped
 - 19.2. For Year 10 (14-15 year olds)
 - 19.2.1. 31% reported trying a vape at least once
 - 19.2.2. 21% reported trying a vape more than once
 - 19.2.3. Of those who reported vaping more than once, 45% reported using for the first time in Year 9 with a further 32% reporting using for the first time in Year 8
 - 19.2.4. 47% reported being offered a vape by a 'someone around you (including a puff on theirs)', with 28% reporting this occurring at least weekly
 - 19.2.5. Of those who had vaped more than once (n=21), all reported using a disposable device currently and 91% reported currently using a disposable device
20. Focus groups were carried out within secondary school (N = 5), further education colleges (N = 2) and a youth activity group (N = 1). Recruitment targeted young people aged 11-24 years old, with learners in Year 7-11 included from secondary schools. There were 86 participants in total.

21. Using a semi-structured question guide, participants were asked to discuss their existing awareness and observations of vaping in response to a series of image-based prompts (depicting different vaping devices as well as tobacco cigarettes).

22. Key findings included:

- 22.1. Discussion of potential impacts of vaping on mental health were often difficult to distinguish from feelings of dependency.
- 22.2. From their own experience or observations of their peers, participants described a growing reliance on vaping that was associated with increased use over time.
- 22.3. Several markers of high nicotine use and potential dependency were identified.
- 22.4. Participants referred to a strong desire to vape after abstaining from use, including frequent 'cravings', 'shaking', appetite changes, and 'niccy rush' upon first re-use (i.e., stimulating effects of nicotine).
- 22.5. This meant they would sometimes lose focus and find it difficult to complete other activities, potentially affecting their schoolwork and attendance in class.
- 22.6. Vaping was discussed as something that could "calm you down", "help with stress", regulate "bad moods", relieve "boredom", and "give you something to do"
- 22.7. This was often an emotive topic, particularly relating to anxiety. Though vaping was believed to help young people cope with difficult emotions, participants also discussed feeling uneasy, guilty, and agitated as a result of vaping.
- 22.8. For these reasons, some participants wanted to quit or had recently quit, but described this as a difficult experience which was generally short-lived among their age group.
- 22.9. Participants suggested additional strategies to prevent uptake among young people, particularly as this related to restricting exposure and access to vaping devices.
- 22.10. There was a strong consensus that vaping was a popular and normalised activity among young people, both for those who had and had not used a vape. Peers were believed to be generally accepting of vaping.
- 22.11. Vaping was most frequently observed in visible (although sometimes secluded) social settings. This environment seemed to contribute to feelings of peer pressure. Participants described a strong desire to "fit in" and "look cool" and found it difficult to refuse offers to share devices.
- 22.12. Participants frequently referred to the visibility of vaping, noting general use in public, shop displays and litter.
- 22.13. Participants appeared to be aware of marketing campaigns on social media, though they also referred to personal content from people they knew. Some participants also mentioned vape use among influencers, celebrities, and brand sponsorships.
- 22.14. Vaping products were perceived to be strongly appealing, particularly as this related to the sensory experience of vaping (sweet flavours and smells).
- 22.15. Participants described the youthful appearance of devices in terms of vibrant colours and designs, which they felt targeted a core demographic of young people.
- 22.16. Popular disposable brands were often named in this context, which they contrasted to cigarettes in terms of price (less expensive) and stealth (more discreet).
- 22.17. Vaping devices were described as relatively convenient to access.

Evidence statements

23. The IRG agreed a set of evidence statements. These are set out in Table 2.

Table 2: Vaping amongst children and young people in Wales: evidence statements agreed by the Incident Response Group

<p>Whilst the vast majority of children and young people in Wales do not vape, there has been a substantial increase in vaping amongst children and young people in Wales in recent years, in particular since 2019. Rates of vaping use amongst girls have risen particularly fast and rates are now substantially higher than amongst boys, having been lower in 2017.</p>
<p>An increasing proportion of children and young people are vaping daily and reporting nicotine dependency. There is a clear age gradient, with daily vaping more common in older age groups.</p> <p>There is evidence from multiple sources that a proportion of young people are experiencing disruption in their education and wellbeing due to vaping. In particular, an increasing number of children are experiencing dependency at a level that makes it very difficult to get through the school day without vaping on school premises. Teachers and other professionals working with young people also report rises in disruption and support needs as well as challenges in managing numbers of discarded disposable devices.</p>
<p>The rise in regular vaping in recent years is driven by increases in vaping amongst children and young people who do not and have never been regular smokers. There has also been a notable rise in dual smoking and vape use amongst children and young people. Patterns of vaping in 2021 are very different to those of earlier years and also to current patterns of smoking.</p>
<p>The rise in vaping coincides with the rise in availability of disposable vapes in the market. Disposable vapes have rapidly become the preferred choice for vaping amongst children and young people and a majority of never smokers who are taking up vaping are using disposable devices.</p> <p>These devices are marketed in ways that appeal to children and young people in terms of product design, flavouring of consumables, packaging, branding and point of sale display.</p> <p>The availability and marketing of disposable vaping devices is a major driver in rise in vaping amongst children and young people in Wales.</p> <p>Devices have also developed in recent years to be more effective at delivering nicotine and this is likely to be increasing the potential for dependency amongst users.</p>
<p>Children and young people and those who work with them increasingly report that vaping is becoming normalised amongst under 18s in Wales. Many young people who vape do so in peer groups as a social activity. Children and young people also often perceive vaping as more common amongst their peer group than the evidence suggests is the case.</p>
<p>Convenience stores have been highlighted as a key source of vapes for children and young people, with informal peer supply networks also important.</p>

Current legislative and regulatory arrangements in Wales are insufficient to prevent vaping devices being available to children and young people in Wales.

The limited evidence available on environmental impacts strongly suggests vaping-related litter is a substantial problem and that increasing recycling and/or safe disposal of vapes at scale is currently challenging due to the lack of infrastructure and capacity for enforcement of regulation

Large scale illegal sales of vapes to those under 18 is facilitating the substantial increases in vapes in recent years. Illegal vapes (i.e. those not conforming to legislation) pose additional risks to health compared with compliant vapes, including higher nicotine content and harmful substances not present in legal vapes. They may also be available more cheaply than vapes that comply with legislation.

Control measures

24. On the basis of the evidence, the IRG recommended a set of control measures. These are set out in Table 3. Note that these recommendations were agreed prior to the announcement by UK administrations that a ban on disposable vapes would be legislated for.

Table 3: Control measures to address the rise in children and young people vaping in Wales

1	<p>NHS Support for young people who are nicotine dependent</p> <ul style="list-style-type: none"> • There should be support for young people who are nicotine dependent due to vapes (as well as due to use of other nicotine-containing products) • Support should be linked to NHS services which have delivery knowledge and capability in place, but consideration should be given to additional possible delivery models • Support should be delivered in the context of wider measures to increase understanding of vaping and address vape visibility in settings and across Wales
2	<p>Interventions aimed to denormalise vaping amongst young people (e.g. vape free environments alongside smoke-free environments)</p> <ul style="list-style-type: none"> • The principle of denormalising vaping is recognised as an important element of addressing vaping amongst children and young people at a population level • Vaping should not be permitted in spaces that are intended primarily for children and young people. This should be done by encouraging settings working with young people to develop vape free policies
3	<p>Marketing of vaping products, including packaging, advertising and point of sale restrictions</p> <ul style="list-style-type: none"> • Vapes are currently marketed in a way that is appealing to children and young people

	<ul style="list-style-type: none"> • Restricting advertising, packaging and display of vapes is likely to be one of the most effective measures to address vaping amongst children and young people in Wales • Provisions modelled on the Standardised Packaging of Tobacco Products (2015) and the Tobacco and Related Products Regulations (2016) should be implemented for vape products • The principle that vaping devices and consumables should not be visible in places frequented by children and young people should be considered by statutory and non-statutory bodies when considering issues such as development of shopping areas and advertising in public places • All organisations should ensure that any communication in relation to vaping and smoking makes it clear that vaping is considerably less harmful than smoking
4	<p>Flavours in vaping products</p> <ul style="list-style-type: none"> • It is recognised that flavourings in vapes represent an important element in the appeal to children and young people and restricting flavourings is likely to have a meaningful impact on rates of uptake • Flavour names should be legally restricted to a specified list of basic descriptors • Flavours should be restricted to tobacco, mint, menthol and fruit • Evidence for the impact of flavour restrictions on rates of CYP uptake and smoking switching should be monitored and policies and legislation should be kept under review in the light of this evidence
5	<p>Addressing the sale and supply of disposable (single use) vaping devices</p> <ul style="list-style-type: none"> • The sale and supply of disposable (single use) devices should be banned • Policymakers should ensure that legislation ensures minimum requirements in relation to refill/recharge capability to ensure that cheap devices with high potential for environmental harms through large volumes of litter remain unavailable • Ensure that accurate perceptions of the availability of other types of vapes and relative harms of smoking and vaping are communicated • Ensure smokers are aware that reusable vapes continue to be available • Steps should be taken to mitigate unintended consequences of such a ban on those who live within closed settings (e.g. prisons) where resident smokers may face specific issues with accessing or using reusable devices. Legislation should be framed to ensure devices remain available to these groups • It is recognised that children and young people who use disposables are likely to need support to quit nicotine entirely, and this measure must be considered alongside measures to ensure support is available <p><i>Representatives from two organisations (ASH Wales and Trading Standards Wales) disagreed with this measure.</i></p> <p><i>All IRG participants agreed that, should such a measure be enacted, the recommendations in relation to perceptions of availability and harm and accessibility to vulnerable populations should be adopted.</i></p>

6	<p><i>In the event that a ban on disposable vapes is not enacted:</i></p> <p>Addressing the price of vapes through taxation</p> <ul style="list-style-type: none"> • Disposable devices should be made excisable and taxed at a higher level than reusable devices • Any taxes imposed on vaping devices should ensure that these devices remain cheaper than tobacco, to incentivise smokers to switch • Recycling schemes should be developed to maximise recycling of disposable vaping devices • Legislation and regulation developing recycling schemes should seek to require producers of vaping devices and consumables to cover the costs of recycling these products
7	<p>The establishment of a national register of retailers of tobacco and nicotine products</p> <ul style="list-style-type: none"> • Consideration should be given to implementing a retail register as set out in the Public Health (Wales) Act 2017⁵ • A statutory licensing scheme, requiring all retail outlets for tobacco and vaping products should also be scoped and established. Licensing would allow Local Authorities to recover costs for enforcement, which a registration scheme does not. It also allows the future consideration of licencing sales premises to control the density of sales sites. • A licensing scheme should permit Welsh Government and/or other appropriate authority to set limits to the overall number of outlets and/or restrictions to the siting of retail outlets (e.g. close to schools; in areas of current high density of outlets) on the basis of evidence that such measures will reduce vaping uptake and prevalence amongst children and young people
8	<p>Further research and analysis:</p> <ul style="list-style-type: none"> • A number of issues should be priority areas for further research and analysis: <ul style="list-style-type: none"> ○ Understanding prevalence amongst children and young people ○ Dependency amongst this population ○ Systematic approaches to understanding illegal vape availability ○ Development of curriculum materials ○ Options to support children and young people who are currently vaping

Appendix 1: Incident Response Group Membership

Note that Dr Meng Khaw, National Director of Screening and Health Protection Services and Medical Director, Public Health Wales chaired the first meeting of the IRG and provided ongoing support and advice

Public Health Wales	
Dr Julie Bishop, Chair	Consultant in Public Health and Director of Health Improvement Division
James Adamson	Consultant in Communicable Disease Control Health Protection
Lorna Bennett	Consultant Lead, Tobacco Control Health Improvement Division
Chris Emmerson	Consultant Lead, Tobacco Control Health Improvement Division
Lex Gainsbury	Consultant Lead, Education Settings Health Improvement Division
Rachel Howell	Principal Practitioner, Tobacco Control Health Improvement Division
Liz Newbury Davies	Principal Practitioner, Tobacco Control Health Improvement Division
Arthur Duncan-Jones	Senior Public Health Intelligence Analyst Observatory Analytical Team
Zoe Strawbridge	Senior Public Health Intelligence Analyst Observatory Analytical Team
Dr Rochelle Embling	Senior Public Health Research & Evaluation Officer Health Improvement Division
Dr Anna Schwappach	Consultant in Environmental Public Health Health Protection
Comms Lead	News & External Affairs Team (NEAT)
Gemma Hobson	Specialty Registrar in Public Health
Hannah Bellew Martin Naughton	Administrative support Health Improvement Division
Local Public Health Teams	
Mererid Bowley	Director of Public Health Powys Teaching Health Board
Victoria Kiernan	Lead Nurse School Health Nursing & Looked After Children Nursing Services, Swansea Bay University Health Board Chair, National School Nurse Leads Network
Cath Einon	Service Development Manager, Help Me Quit Hywel Dda University Health Board
Sue Evans	Service Development Manager, Help Me Quit Aneurin Bevan University Health Board

Joanna Dainton	Head of Commissioning and Partnership Strategy Development Hywel Dda University Health Board
Welsh Government	
<i>NB – Welsh Government attended the IRG as observers and to provide expert input at the request of the group. Observers did not contribute to discussion or decision making on evidence statements or control measures</i>	
Ed Wilson	Deputy Director, Public Health Improvement, Prevention & Promotion
Steph Barnhouse	Head of Branch, Risk Behaviours (Tobacco, Alcohol and Gambling)
Dr Huw Brunt	Chief Environmental Public Health Officer
Alex Hicks	Head of Children's Health Policy
Wallis Jones	Risk Behaviours (Tobacco, Alcohol and Gambling)
Jack Sanders	Litter and Single Use Plastics Policy Manager
Alex Hamilton	Waste Regulation Policy Branch
Local Authority and Welsh Local Government Association	
Helen Picton	Lead for Trading Standards Directors of Public Protection Wales
Lindsay Harvey	Lead for tobacco and Alcohol Association of Directors of Education Wales (ADEW)
Sarah Humphreys	Lead Officer Strategic Development (Secondary) Education and Family Support Bridgend County Borough Council
Huw Evans	Healthy Schools Programme Conwy Council
David Walker	Youth Support Team manager Pembrokeshire
Clinical	
Dr Julian Forton	Consultant in Paediatric Respiratory Medicine Cardiff and Vale University Health Board
Professor Keir Lewis	Consultant and Respiratory Lead, HDUHB Professor of Respiratory Medicine, Swansea Medical School
Dr Kathryn Glenn	Consultant Community Paediatrician Cardiff and Vale University Health Board
Academic	
Professor Graham Moore	School Health Research Network DECIPHer, Cardiff University
Third Sector	
Suzanne Cass	CEO Action on Smoking and Health (ASH) Wales

Toxicology	
Prof James Coulson	Clinical Pharmacologist and Toxicologist Cardiff and Vale University Health Board
Dr Laurence Gray	Consultant Clinical Pharmacologist Cardiff and Vale University Health Board
Eleri Thomas	Specialist In Poisons Information Cardiff and Vale University Health Board
Education	
Robert Baynham	Project Manager, Sport & Wellbeing Colegau Cymru
Natalie Richards	Headteacher
Rona Griffiths	Coleg Cambria
Maxine Thomas	Head of Safeguarding and Learner Services Pembrokeshire College
Vanessa Janes-Evans	Coleg Gwent
Tom Snelgrove	Director of Learner Experience Coleg Sir Gâr
Viv Buckley	Principal and CEO Bridgend College
Children's Rights	
<i>NB – Representative from the Office of the Children's Commissioner for Wales attended the IRG as observers and to provide expert input at the request of the group. Observers did not contribute to discussion or decision making on evidence statements or control measures</i>	
Kirrin Davidson	Office of the Children's Commissioner for Wales

References

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