

Written Evidence Submitted by Public Health, Wakefield Council to the Tobacco and Vapes Public Bill Committee (TVB45).

Description of evidence

This submission presents a brief overview of evidence from a recent qualitative study in Wakefield District into the behavioural motivations and experiences of vaping in young people.

Please note: The findings from this study are pre-publication and therefore should not be used for any reasons other than those intended for this consultation.

Summary of findings

- Young people perceived that circa 50% of young people vape.
- Smoking and vaping are regarded as very different by young people.
- Many parents didn't see a problem with their children vaping, some vaped with their children and some supplied their children with vapes.
- Health warnings about vaping were ignored on the whole as the young people recognised the current lack of evidence base and confusion resulting from vaping being positioned as a healthy alternative to smoking.
- Many young vapers in the study described being addicted to nicotine through vaping and were unable to quit.
- Addiction to nicotine was having an impact on the young people's lives; in particular, causing disruption to their learning environment and their ability to learn.
- Behavioural drivers to vaping are those which are *enticing or aspirational* and those which are regarded as '*coping*' mechanisms for anxiety and social anxiety. These drivers were powerful and overrode any concerns about health.
- Convenience and ease of use was seen as a big factor by the young people, and adults, in the take up and use of vapes as was the availability of colours, flavours and fashionableness of vaping.
- Young people within the study perceived a series of societal and contextual '*green lights*' around vaping and very few '*red lights*' to encourage them to not do it.

Background and rationale

1. During engagement work across Wakefield District, which started in 2022, many children and young people told us they were concerned about vaping and the perceived increase in vaping amongst their peers. Similar concerns were also being raised by Public Health colleagues, elected members, teachers and parents
2. An initial rapid review of national and local evidence raised some questions for Wakefield. Nationally reported vaping prevalence rates did not appear to align with local survey evidence. Anecdotal evidence from school staff, parents and adults working with young people in Wakefield also suggested that prevalence rates may be underreported. Additionally, there appeared to be little evidence in relation to the behavioural motivators leading to young people choosing to take up vaping and the wider impact of vaping on young persons' lives.
3. To gain further understanding of young peoples' experience of vaping in Wakefield, Public Health Wakefield undertook a qualitative study with young people, youth workers and teachers to explore the perceptions of vaping, vaping behaviour, social norms and marketing of vaping products for children and young people aged 11-17 years in the Wakefield District.
4. The research was carried out between April 2024 and October 2024. 75 young people, and 20 adults working with young people, took part in interviews and focus groups across Wakefield District in youth groups, further educations colleges and schools. This included both vapers and non-vapers, a range of ages, genders, and ethnicities.
5. Ethical approval was given by Leeds Beckett University.

The findings

6. Young people felt that circa 50% of young people vape.

6.1 Perceptions of prevalence are important as a behavioural influence is created by perceptions of others' behaviour; that vaping is more common than it is, 'everyone does it' and this provides personal permission to vape. Tied in with young people's need to *'fit in'* with others young people, this could be a powerful enabler and motivator.

6.2 Young people felt that vaping was *'normal'* and believed that circa 50% of young people vape.

"It's like you can't walk down the street now without seeing a kid with a vape in their hand." (Young person - School)

7. Smoking and vaping are regarded very differently by young people

7.1 All young people knew the health risks of smoking and smoking was seen as a *'bad habit'*, *'disgusting'*, *'for old people'* and *'a poor choice'*.

"...when I was younger, I used to say smoking was slow suicide, but obviously then I started vaping." (Young person – Youth Club)

"The smell of cigs is disgusting." (Young person – School)

"I feel like smoking is considered old school now." (Young person – FE College)

[Smoking] "It's not really seen nowadays in younger people, so they'd look a little bit odd in comparison to everyone else. Yes. It would just be a bit abnormal. Bit out of place." (Young person – FE College)

7.2 Vaping was regarded very differently and seen as *'new age'*, *'modern'*, a *'social activity'* and *'for young people'*.

"Vapes are very new age..." (Young person – FE College)

"...vaping is a more positive...like you would rather than smoking because I mean it smells nice does vaping, whereas smoking doesn't really appeal to most people." (Young person – FE College)

8. Many parents didn't see a problem with their children vaping, some vaped with their children and some supplied their children with vapes.

8.1 The parental attitudes reported in the study by young people and adults were acting as an enabler, providing the permission and capability for some young people to vape.

8.2 Some young people reported that parents knew their children vaped, were OK with it and some bought vapes for their children. Adults also reported parents buying vapes for their children.

“Parents are aware that they [their child] vape. Some parents buy the vapes for them.” (Tutor – School)

8.3 Some parents felt that if they were going to do it, they would rather they used legitimate products rather than buying cheap or illicit ones with unknown chemical content. Others believed that vaping was better than their child taking up smoking or drugs.

“...as a parent, I prefer him to be vaping than doing anything else.” (Adult – FE College)

“...maybe they don't want their child smoking, so they think, I'll just let them vape it, it's fine.” (Young person – FE College)

8.4 In some cases, both parent and child vaped and this bonded them and became a shared activity; something they had in common and could do together as a family.

“...the people that have younger parents, they treat their kid who's a teenager as their friend more than their kid to be able to have someone to socialise with...” (Young person – FE College)

8.5 In one example, a young person described how some parents were worried that their child was not fitting in, or was not part of a friendship group, and allow their child to vape so they would fit in.

“A lot of the time they feel like if their children aren't fitting in and the child asks for that, it's [vaping] the way to give them something to be in common with other people.” (Young person – FE College)

8.6 There were also examples of parents being angry that vapes had been confiscated and would go into the school to collect them citing they were a costly and valuable item.

“...we've gone through a stage where we confiscate and destroy them, and we've had parents ringing in and saying, 'That's my property. That's a £60 vape,'

and what have you...parents will be like, 'That's my money, that's my property,' rather than they're [their child] vaping in school.” (Tutor – School)

9. Health warnings were ignored by many young people who recognised the current lack of evidence base and confusion resulting from vaping being positioned as a healthy alternative to smoking.

9.1 Confusion around health messaging was mentioned by some young people. They felt that vaping had been positioned as healthy and OK to do as opposed to smoking. Whilst they may not have considered smoking themselves, this had created a perception that there was little or no harm in vaping in the mind of some respondents. This was felt by participants to contribute to the likelihood that current health risk messages appeared to be not landing well with young people.

9.2 Some young people also talked about how they had seen items in the media about the impact of vaping, but these were generally ignored.

“...I've seen on the news and stuff like that what happens to young people, getting put in hospital...Like your lungs are collapsing, and stuff like that.

Interviewer: Do you think your friends see that on the news as well?

Yes, they see it, but none of us take interest to it...When you've done it that much, you don't really care...” (Young person – Youth Club).

“Most people already know [about vaping]. They know everything they've been told in the assembly [about harms], and they just don't care.” (Young person – School)

10. Many vapers in the study described being addicted to nicotine through vaping and described being unable to quit.

10.1 This was akin to an ‘accidental addiction’ and was seen through the lens of the culture of consumerism in which all the young people live.

“Just might have done it [vaping] for like a laugh and that and then they've got addicted.” (Young person – School)

“So the cool part of it [vaping] might go, but if everybody's getting hooked on the nicotine...then they can't just stop because it's not cool anymore.” (Tutor – FE college)

10.2 Some young people reported that their friends appeared to be strongly addicted to vaping and couldn't go long without a vape.

“...they [vapers] can't last an hour without it and they have to constantly be vaping” (Young person – FE College)

Others talked about their own addiction to vaping.

“When one [a vape] dies, you'll get another, and then you'll get another, and get another, and get another, and get another. Because of the nicotine.” (Young person – School)

10.3 Some young people felt they had high levels of addiction which they illustrated by how they felt when they weren't vaping.

I just feel a bit weird [when not vaping]. It can feel a bit like - I don't know how to explain it. I don't feel right. (Young person – Youth Club)

11. Addiction to nicotine was having an impact on the young people's lives; in particular, causing disruption to their learning environment and their ability to learn.

11.1 Young people who vaped were reported symptoms of nicotine addiction that affected their ability to concentrate and participate in classes. This included inability to sit still, being distracted, eager for the lesson to finish or finding excuses to leave class.

“Then they do get addicted to it [vaping] ..., they can't go a full lesson without sneaking out to the toilet to go on their e-cig” (Adult – School)

11.2 This meant a lack of engagement from these young people but also some disruption to other classmates also.

“...because sometimes I don't focus because I'll think about it sometimes, and it just causes me to be disruptive sometimes, or be like not listening, and

getting told off for not doing my work, because it just feels like I need that pull.” (Young person – Youth Club)

11.3 Pupils missing classes or being absent is an issue for many schools, and whilst many activities may cause a young person to wish to miss classes, there was some suggestion that vaping may be adding to this.

“Desperate to get to the toilet, desperate to get out of a lesson. Obviously, I'm just thinking about a couple of young people; you can see that they're really struggling [with nicotine addiction].” (Tutor – School)

12. Drivers to vaping behaviour were those that were enticing or aspirational and those which were regarded as ‘coping’ mechanisms. These drivers were powerful and overrode any concerns about health.

12.1 The young people described how vaping was “associated with being cool”, “a trendy habit”, and being “more solid” [a person who you look up to and trust or admire]. It was noted that this role modelling effect led to vaping spreading quickly, within friendship groups and schools, creating a snowball effect.

“People around the high schools were doing it, giving all that cool look and stuff like that. Then I think it quickly spread to people in high school...” (Young person – FE College)

12.2 Young people told us that peer pressure was internalised and not exerted by others upon them; that it was driven by their own need to fit, to be like their peers and not stand out or be the odd one out.

12.3 The fear of missing out was also stated as some young people described how they vaped to avoid being left out of a group, or the group socialising, if they didn't behave like the others.

“They [young people] don't want to miss out on that social bit. If everyone's going out to vape and they're left alone, they don't want to be left out.” (Young person – FE College)

12.4 One young person believed they had been shunned by a group of friends because they didn't vape.

“...wanting to not stand out in a group because, I mean, frankly, nowadays, if you're not doing something that your friends are doing and they're making it out as like, 'Oh, come on, do it.' It's like, well, it's the thing right now. You start to feel left out, and some people actually ditch you if you don't do it.” (Young person – FE College)

12.5 Young people talked extensively about how vaping was used to cope with social anxiety or ‘social awkwardness’. Young people described how they used it to approach or stand with a group as they could stand with other vapers and not feel they had to join conversations as they could simply vape.

“...sometimes if they're [young people] in a group...it's easier for them to keep getting it [a vape] out and doing it, vaping, and not trying to get into the conversation because they might not be able to communicate as good as the others, so instead of just being stood there like a lemon [someone not fitting in]. They get it out and just puff, puff, puff...Because they don't have to talk or answer questions, and they leave the others to speak... to just be seen doing something, but still count as a group.” (Tutor – FE College)

12.6 Many young people within the study spoke about how vaping was a way to cope with stress and anxiety, a kind of self-medication.

“I've heard a lot of people say it helps a lot with anxiety.” (Young person – FE College)

12.7 Vaping was described as being used to ‘calm people down’, akin to mindfulness or the use of breathing techniques to combat stress and anxiety.

“I know some of them [vapers], they do it [vape] to calm down. They say it helps them calm down.” (Young person – FE College)

13. Convenience and ease of use was seen as a big factor by the young people and adults, in the take up and use of vapes as was the availability of colours, flavours and fashionableness of vaping.

13.1 As a vape carried in a pocket for example, it can be puffed upon when the user feels the need, unlike smoking where the user would likely need to leave a building or social space.

“...the convenience of a vape. It can fit in your pocket...You can just get it out of your pocket and use it.” (Young person - FE College)

13.2 In line with the current evidence base, the bright colours, logos and confectionary and fruit flavours were seen as attractive and enticing to young people. This made the experience of vaping an enjoyable one.

“Flavours and colours. If you get a nice colour,...A kid would be like, 'Oh, that's a nice colour. I want that one.'...” (Young Person – School)

13.3 The fact they taste nice and don't smell bad like cigarettes was also cited. Whilst some young people felt removing colours and flavours may reduce uptake, some felt that some, particularly those seeking nicotine, would vape regardless.

14. Young people within the study perceived a series of 'green lights' around vaping and very few 'red lights' to encourage them to not do it.

14.1 These 'green lights' were driving factors that are seen at wider societal level, within their immediate sphere of influence, and at individual or internal level.

It was noted that vapes are sold alongside 'grab and go' items such as cans of pop, sweets and crisps. This was compared to tobacco, or certain medicines, by the young people, which are hidden from general view, not freely available on the shop shelves, and highly regulated; again, sending a message that vapes are safe to use. Also, that there are many vape shops opening increasing availability of vapes.

“There's three different vape shops in [town name] within a five-minute walk of each other.” (Young person – FE College).

14.2 Additionally, most young people in the study felt it was easy to buy vapes whilst underage. Many examples were given about shops who didn't ask for proof of age.

“Some of them [shop staff] ask for ID, some of them just be like, 'Oh well, just put it [the vape] in your pocket.'...” (Young person -School)

Young people spoke about how quickly word spread about shops that sold to underage young people, even those wearing school uniforms.

“...if one shop is willing to sell them to young people, then it will definitely get spread around ...” (Young person – FE College)

15. Considerations and recommendations

15.1 A combination of behavioural drivers including easy access, ease of use, attitudes to vaping, social norms, perceived high prevalence within young people and the product itself, have led to a series of 'green lights' in respect to vaping in young people.

15.2 Whilst the proposed legislation is vital, and will tackle some of these 'green lights', considerations need to be made about others such as parental attitudes and how to balance messages around vaping and health in the light of their utility as a quit smoking aid.

15.3 A concern for young people in the study, and those who later peer reviewed the data, was the levels of nicotine addiction in young vapers. Some were concerned that if vapes became harder to obtain, some may turn to other nicotine sources or illicit vapes.

15.4 Other concerns raised by young people was the lack of support for those who want to quit. It was noted by young people that in most areas, there is no formal support or funding to quit vaping.

15.5 The study found that the impact of vaping on young people's lives extended beyond that of respiratory health. Vaping and addiction to nicotine was having impact on the wider determinants of health in the young people, impacting on their education and learning environment.

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