

Vaping in Taranaki Schools: A need for policies to prohibit the use and possession of vaping devices in schools

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The number of people vaping worldwide is rising dramatically and this trend is also seen in New Zealand youth.¹⁻⁵ According to the most recent 2018 ASH surveys, a third of Year 10 students have tried vaping, 4% vape daily or weekly, and 20% of those trying vaping have never smoked regular cigarettes.⁴ While the proportion of students trying e-cigarettes has increased since 2014, there has not yet been a comparable increase in daily use in New Zealand.⁴ Vaping devices convert e-liquids into an aerosol which is inhaled into the lungs. The majority now contain nicotine, in concentrations suitable for established smokers, and are available in hundreds of flavours such as “strawberry milkshake”, “peaches and cream” and “vanilla cola”. Adolescents are known to be vulnerable to the effects of nicotine because it targets areas of the brain involved in emotion and cognitive processing.⁶ It is widely accepted internationally that electronic cigarettes are harmful to young people and can lead to nicotine addiction.⁷ The New Zealand Ministry of Health states vaping is not intended for non smokers or those under the age of 18 years.⁸

To understand the relevance of youth vaping in Taranaki, a project was undertaken to survey the region’s secondary schools. Of the 20 urban and rural educational facilities serving secondary age students in this region, 17 were successfully contacted and responded to a telephone survey undertaken from 25 September to 25 November 2018. School principals and deputy principals were asked if vaping had occurred during the 2018 school year, and if so, how many incidents and in what situations.

Overall, nearly 60% of surveyed schools reported at least one incident of vaping. The number of known incidents ranged from 1–10 and the mean was four. Both individuals and groups of students sharing a single vaping device were reported. Use of vaping devices occurred on school grounds, on school buses and to and from school. Reports included students identified as “non smokers” and one was suspected to be “vape dependent”. Nearly all schools admitted to concerns about youth vaping. These ranged from exposure to standard vaping ingredients and nicotine to vapourising other substances. One school principal reported two incidents of students who admitted to vaping before school and then complained of light-headedness and “frothing at the mouth” during class. Two schools in the region described a large, yellow “Vape Rescue Van” frequently parked within 400 metres. Researchers for this project also observed the operators selling vaping materials during school hours within close proximity to a third school in New Plymouth. School officials understood vaping had been promoted to assist adult smokers quit or reduce their dependence on tobacco, but requested up-to-date health messages about vaping risks for youth. Several reported ambivalent comments made by parents regarding students who used vaping devices. Finally, when queried regarding written policies prohibiting vaping, 70% had no official vaping policy. Those that addressed vaping prohibited its use and possession of devices in their tobacco free policies. Advisors for the Ministry of Health, the Ministry Education and Taranaki Stop Smoking Services also

participated in the Taranaki project. Each entity supported schools creating or revising their own policies to include vape free content.

This simple project has shown that nearly all schools in Taranaki had concerns about youth vaping. However, currently there is a policy gap for traditional smoke-free institutions like primary and secondary schools. At this writing, the Courts have ruled that vaping and heated tobacco can be legally sold and regulated under the New Zealand Smoke-free Environments Act (SFEA).⁹ Present tobacco control policies for indoor places do not apply to vaping, only smoked tobacco. Proposals on product safety, sales, advertising and public use are being

considered for a new amendment, but an official vote is not expected until 2020.¹⁰

Educational facilities have an important role in protecting the health of young people by establishing clear guidelines for students. It is recommended that the Ministries of Health and Education provide advice and support to schools so they can develop policies which prohibit vaping on school property, when children are wearing school uniform, and during school-related activities. Although it is important that interventions apply a precautionary approach to avoid “moral panic” about the actual current risk in New Zealand, these vape-free policies are a proportionate reaction to students’ use of vaping products in school environments.

Competing interests:

Nil.

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REFERENCES:

1. WHO Framework Convention on Tobacco Control. Electronic Nicotine Delivery Systems and Electronic Non-Nicotine Delivery Systems (ENDS/ENNDS) - Report by WHO. Conference of the Parties to the WHO Framework Convention, 7th Session, 7–12 November 2016, Delhi, India.
2. McNeill A, Brose LS, Calder R, Bauld L, Robson D. Evidence review of e-cigarettes and heated tobacco products 2018. A report commissioned by Public Health England. London: Public Health England; 2018.
3. Merry S, Bullen C. E-cigarette use in New Zealand - a systematic review and narrative synthesis. *New Zealand Medical Journal*. 2018; 131(1470):37–50.
4. ASH (Action for Smokefree 2025). 2018 ASH Year 10 Snapshot E-cigarettes and Vaping. Available from: http://d3n8a8pro7vnmx.cloudfront.net/ashnz/pages/70/attachments/original/1554281098/2018_ASH_Y10_Snapshot_E-cigs_FINAL.pdf?1554281098 [Accessed 7th June 2019].
5. White J, Li J, Newcombe R, Walton D. Tripling use of electronic cigarettes among New Zealand adolescents between 2012 and 2014. *Journal of Adolescent Health*. 2015; 56(5):522–8.

6. Yuan M, Cross SJ, Loughlin S, Leslie FM. Nicotine and the adolescent brain. *Journal of Physiology*. 2015; 593(16):3397–3412. Doi 10.1113/JP270492.
7. Ferkol TW, Farber HJ, La Grutter S, Leone FT, Marshall HM, Neptune E, et al. Electronic cigarette use in youths: a position statement of the Forum of International Respiratory Societies. *European Respiratory Journal*. 2018; 51:10800278. doi: 10.1183/13993003.00278-2018
8. Ministry of Health (Manatū Hauora) and the Health Promotion Agency (Te Hiringa Hauora). Vaping Facts. Available from: <http://vapingfacts.health.nz/> [Accessed 10th June 2019].
9. Ministry of Health. Vaping and smokeless tobacco. Available from: <http://www.health.govt.nz/our-work/preventative-health-wellness/tobacco-control/vaping-and-smokeless-tobacco> [Accessed 10th June 2019].
10. Salesa J. Associate Minister of Health. Vaping and smokeless tobacco products to be regulated. Official release, 24 November 2018. Available from: <http://www.beehive.govt.nz/minister/hon-jenny-salesa>