

Responding to the Vaping Crisis

Strategies to Curtail Student E-Cigarette Use

District Leadership Forum

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1) Executive Summary

Key Observations

The rise of nicotine e-cigarette use among adolescents requires a coordinated response from school district administrators. Nearly 28 percent of high school students used e-cigarettes in 2018, compared to 1.5 percent in 2011. The U.S. Surgeon General has declared youth e-cigarette use (i.e., vaping) an epidemic. Left unchecked, this epidemic may lead to lifelong nicotine addiction, severe or fatal lung damage, and other serious health consequences. 2

Due to the highly addictive nature of nicotine, public health experts recommend administrators address e-cigarette use through prevention and treatment rather than just surveillance or discipline. Nicotine, an ingredient in most e-cigarettes, is a highly addictive substance. Therefore, public health experts interviewed for this report recommend that administrators prevent students from trying e-cigarettes and provide interventions for students who become addicted.

EAB has profiled districts that implemented prevention and intervention tactics designed to reduce student vaping, aligned with public health expert recommendations. Administrators at these districts incorporate research-backed content and delivery into student-focused prevention campaigns to promote adolescents' receptiveness of their message. For example at one profiled district, high school students facilitate educational presentations on the dangers of e-cigarettes for middle school students because peer-to-peer programs are effective at changing behavior. Profiled districts also provide information about e-cigarette company's unethical marketing and help adolescents develop refusal and media literacy skills.

E-cigarette policies should reflect the addictive nature of nicotine and avoid suspending students who use e-cigarettes, instead redirecting efforts toward re-education and cessation support. Experts and contacts at Boston Children's Hospital, Stanford Medical School, and one profiled district suggest that suspension infrequently stops students from vaping. Contacts report that administrators at profiled districts suspend students in some instances to deter other students from vaping and to promote a healthy school environment. However, administrators also incorporate addiction awareness into discipline policies—for students' initial vaping offenses, administrators at one profiled district refer students first to online education programs and next to behavioral support from nurses specializing in substance abuse.

Partner with external organizations and use free, online resources to provide e-cigarette interventions and cessation support. This report identifies a range of resources that districts can use to educate students about the risks of using e-cigarettes, bolster students' refusal skills, re-educate students who use e-cigarettes, and support students' cessation efforts. These resources include Stanford Medical School's <u>Tobacco Prevention Toolkit</u>, RMC Health's <u>Second Chance</u> program, and Truth Initiative's <u>This is Quitting</u> program. Leading experts often update tobacco control strategies to address e-cigarette use, because these strategies have proven effective to address nicotine-containing products (i.e., tobacco products).

^{1) &}quot;Youth Tobacco Use: Results from the National Youth Tobacco Survey," U.S. Food and Drug Administration. May 29, 2019.

https://www.fda.gov/tobacco-products/vouth-and-tobacco/youth-tobacco-use-results-national-youth-tobacco-survey.

"What are the long-term effects of vaping?" Truth Initiative, August 21, 2019. https://truthinitiative.org/research-resources/emerging-tobacco-products/what-are-long-term-effects-vaping.; EAB Interviews and Analysis.

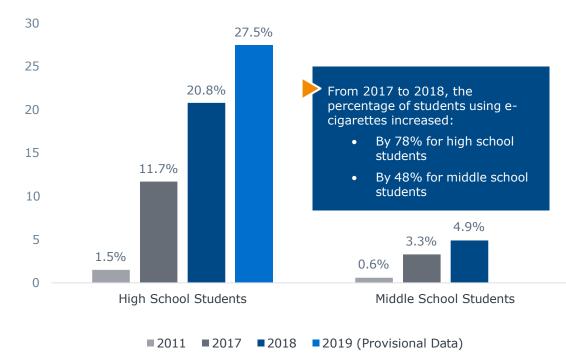
2) E-Cigarettes in Schools

E-Cigarette **Impact**

E-Cigarette Use and Resulting Nicotine Exposure Increasing Nationally Among Adolescents

Between 2017 and 2018, the Centers for Disease Control and Prevention documented a double-digit increase in use of e-cigarettes among both high school and middle school students.³ Preliminary data from the 2019 National Youth Tobacco Survey suggests the percentage of high school students using e-cigarettes increased again between 2018 and 2019. The scientific and medical communities agree that ecigarettes are not safe for young people and are harmful for any age group.4

Percentage of Middle and High School Students Using E-Cigarettes in the United States⁵



E-cigarettes are battery-powered devices that heat a chemical-laden liquid to produce an aerosol, which users inhale. E-cigarettes are often sleek, concealable products resembling a USB flash drive and frequently contain fruit flavors that attract adolescents.6

Most e-cigarettes contain nicotine: In 2015, 99 percent of e-cigarette products sold in convenience stores, supermarkets, large retailers (e.g., Walmart), and drug stores contained nicotine. Furthermore, all devices manufactured by leading e-cigarette company Juul, which accounts for over 70 percent of the e-cigarette market in the United States, contain nicotine. Juul's website reports that one Juul cartridge

https://www.cdc.gov/mmwr/volumes/67/wr/mm6745a5.htm?s_cid=mm6745a5_w. Accessed October 2, 2019.
"Electronic Cigarettes," Centers for Disease Control and Prevention. https://www.cdc.gov/tobacco/basic_information/e-cigarettes/index.htm. Accessed October 1, 2019.
"Youth Tobacco Use: Results from the National Youth Tobacco Survey," U.S. Food and Drug Administration. May 29, 2019.

vaping-related-illnesses-urgent-action-must. Accessed October 2, 2019. "About Electronic Cigarettes (E-Cigarettes)," Centers for Disease Control and Prevention,

Cullen, Karen et al, "Notes from the Field: Use of Electronic Cigarettes and Any Tobacco Product Among Middle and High School Students
– United States, 2011–2018, Centers for Disease Control and Prevention, November 16, 2018.

https://www.fda.gov/tobacco-products/youth-and-tobacco/youth-tobacco-use-results-national-youth-tobacco-survey. Accessed Oct 2, 2019; "As Youth E-Cigarette Use Soars Along with Vaping-related Illnesses, Urgent Action Must be Taken to Protect the Health of America' Youth," Truth Initiative, September 23, 2019. https://truthinitiative.org/press/press-release/youth-e-cigarette-use-soars-a

https://www.cdc.gov/tobacco/basic_information/e-cigarettes/about-e-cigarettes.html.
"Sales of Nicotine-Containing Electronic Cigarette Products: United States, 2015," American Journal of Public Health, May 2017, Tot(5):702-705. https://www.ncbi.nlm.nih.gov/pubmed/28323467; "E-Cigarettes, 'Vapes,' And Juuls: What Teens Should Know,"

American Lung Association.https://www.lung.org/quit-smoking/helping-teens-quit/e-cigarettes-schools; Craver, Richard, "Juul Expands E-Cig Market Share Gap with Reynolds' Vuse," Winston-Salem Journal, August 25, 2018. https://www.journalnow.com/business/juulnds-e-cig-market-share-gap-with-reynolds-vuse/article 0bb4d442-fc0f-5c00-8b05-29bbf95dc985.html

contains about the same amount of nicotine as a pack (i.e., 20) of cigarettes.8 Moreover, Juul has marketed their products' ability to deliver nicotine to the user very auickly.9

Some adolescents at profiled districts use electronic devices containing tetrahydrocannabinol (THC), the psychoactive ingredient in marijuana. Because the legality of marijuana and the popularity of its use by adolescents varies widely by state, this report focuses on responses to e-cigarettes that contain nicotine.¹⁰

E-Cigarette Use Causes Serious Consequences for Adolescents

During the summer and fall of 2019, the discovery of a new and severe vapingrelated illness dominated national headlines. Though the precise cause of the illness remains unknown, medical experts agree that this illness is extremely serious and, in some cases, has proven fatal. 11 This serious lung illness represents only one of many negative effects of student vaping.

Impact of Vaping on Middle and High School Students¹²



- · Chemicals in ecigarettes can cause serious and irreversible lung damage.
- · In mice, inhaled nicotine harms lung development.
- Nicotine is a highly addictive substance that alters the adolescent brain.
- · The Food and Drug Administration (FDA) is investigating a reported link between e-cigarette use and seizures.



- ADHD-like symptoms have been reported.
- Some students are unable to remain in the classroom for a full class period or at sports practice for the duration of the practice without vaping.



School Climate

- Students who do not use e-cigarettes feel frightened to enter the restroom due to exposure to secondhand aerosol from students vaping.
- Empty cartridges and batteries from ecigarettes litter school grounds, requiring costly toxic waste disposal.

Long-Term Effects of Vaping Unknown¹³

Research from **Truth Initiative**, a non-profit public health organization dedicated to ending youth nicotine and tobacco use, notes that the FDA has not reviewed or approved e-cigarettes for any purpose (including as a tobacco-based cigarette cessation tool). Currently, no research exists that describes the long-term effects of e-cigarette use. However, research suggests that adolescents who use e-cigarettes are more likely to start using tobacco cigarettes.

- 8) "Juul's Savings Calculator Shows How Much Money Smokers Can Save By Switching to Vaping" Vaporizer Wire, https://vaporizerwire.com/juul-savings-calculator-shows-how-much-money-smokers-can-save-by-
- switching-to-vaping/_Accessed April 11, 2023.
 "How much nicotine is in JUUL?" *Truth Initiative*, February 26, 2019. https://truthinitiative.org/research-resources/emerging-tobacco-products/how-much-nicotine-juul Accessed October 8, 2019.

- products/how-much-nicotine-juul Accessed October 8, 2019.

 10) Johnson, Stephen, "Here are the states where teens smoke the most pot," Big Think, June 28, 2019. https://bigthink.com/politics-current-affairs/marijuana-use-by-state?rebellitiem=5#rebellitiem=5#rebellitiem=5. Accessed October 8, 2019.

 11) Christiani, David C., "Vaping-Induced Lung Injury," The New England Journal of Medicine, September 6, 2019.

 https://www.nejm.org/doi/full/10.1056/NEJMe1912032. Accessed October 2, 2019.

 12) "What are the long-term effects of vaping?" Truth Initiative, August 21, 2019. https://truthinitiative.org/research-resources/emerging-tobacco-products/what-are-long-term-effects-vaping. Accessed October 2, 2019; EAB interviews and analysis.
- 13) "What are the long-term effects of vaping?" Truth Initiative, August 21, 2019. https://truthinitiative.org/research-resources/emerging-tobacco-products/what-are-long-term-effects-vaping. Accessed October 2, 2019.

Current Challenges

District Administrators' Responses to Student Vaping Often Miss the Mark

While some district responses to student vaping align with expert recommendations, overall the medical community has found that districts' current efforts to prevent and reduce adolescent vaping are largely unsuccessful. ¹⁴ Contacts at **Boston Children's Hospital** and **Stanford Medical School**, leading experts on youth substance abuse, identify some common administrator responses as detrimental to efforts to reduce student e-cigarette use.

Common District Responses to Student Vaping to Avoid



Vaping is **not a widespread problem** in my school or at my grade level.



False

- According to experts at Stanford Medical School, every middle and high school has students who are using these products.
- Data shows that use of ecigarettes among younger students is increasing.



We will **punish** vaping offenses in accordance with our existing controlled substance policies.



Ineffective

- Experts at Boston Children's Hospital note that suspending students will not help them quit vaping.
- Experts at **Truth Initiative** note that punishing students for
 falling victim to predatory
 marketing is unproductive.

Administrator Responses

Monitor Pending Federal, State, and Local Legislation But Also Respond to Student Vaping Directly

Administrators should respond comprehensively and proactively to student vaping. Administrators should monitor the legal and political landscape regarding e-cigarettes while also implementing school-based strategies to address vaping, as proposed or enacted bans on e-cigarettes may not fully address the epidemic of youth vaping.

Barriers to Vaping Bans and Other Policy-Based Solutions



Tobacco Company Resilience

Administrators cannot predict how quickly or effectively federal action will occur. Juul is closely integrated with one of the world's largest tobacco companies, Altria Group, Inc., and the lobbying power of tobacco companies has traditionally undermined regulation. 15 Though Juul publicly announced it would not lobby against the federal flavor ban, sources note that that some influential political actors are opposing the ban. 16



Bootlegged Product Availability

Regardless of legal bans, students may still be able to acquire e-cigarettes online or through purveyors of illicit products. 17 For example, any YouTube user can access tutorials describing how to brew e-cigarette liquid at home. The highly addictive nature of nicotine could encourage these behaviors.

To Address Student Vaping, Prevent Initial E-Cigarette **Use and Support Students with Nicotine Addiction**

Experts at Truth Initiative suggest that districts should target efforts toward preventing students who have never tried nicotine products from vaping. Once students start using e-cigarettes, it may be difficult for them to stop without extensive support. In addition, districts should implement measures to support students who use e-cigarettes and to encourage them to cease vaping. Contacts report that districts should acknowledge the difficulty of addiction in any intervention policies (e.g., discipline practices). Leading experts often use updated tobacco control strategies to address e-cigarette use, because these strategies have proven effective to address nicotine-containing products (i.e., tobacco products).

Administrators at profiled districts use external resources to align their efforts with expert-recommended and evidence-based practices and to maximize resources. For example, administrators at District D use the **Tobacco Prevention Toolkit** to create presentations about the dangers of e-cigarettes. Administrators at District C use Second Chance to provide a treatment-focused alternative to suspension for students who use e-cigarettes.

¹⁵⁾ LaVito, Angelica, "Tobacco Giant Altria Takes 35% Stake in Juul, Valuing E-Cigarette Company at \$38 Billion," CNBC, December 20, 2018. https://www.nchc.com/2018/12/20/altria-takes-s5% Stake in Juuly-a-piotal-moment-for-the-e-cigarette-maker.html. Crober 2, 2018. https://www.nchc.com/2018/12/20/altria-takes-stake-in-juul-a-piotal-moment-for-the-e-cigarette-maker.html. Crober 2, 2019; Kaplan, Sheila, Matt Richtel, and Julie Creswell, "Juul Replaces Its CEO With a Tobacco Executive," The New York Times, September 25, 2019; https://www.nytimes.com/2019/09/25/health/juul-vaping.html?smid=tw-nytimes&mtyp=cur. Accessed October 2, 2019; Brownell, Kelly and Kenneth Warner, "The Perils of Ignoring History: Big Tobacco Played Dirty and Millions Died. How Similar Is Big Food?" The Milbank Quarterly, March 2009, 87(1): 256-294. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2879177/. Accessed October 2, 2019.

¹⁶⁾ Thielking, Megan, "Juul, E-Cigarette Maker, To Drop Ads, Won't Lobby Against Proposed Ban On Flavored Products," STAT News. September 25, 2019. https://www.statnews.com/2019/09/25/juul-e-cigarette-maker-to-drop-ads-wont-lobby-against-propos flavored-products/. Accessed October 2, 2019; Stieb, Matt, "Trump Allies Think His Vaping Ban Could Cost Him 2020 Election Intelligencer, September 22, 2019. http://nymag.com/intelligencer/2019/09/trump-allies-think-vaping-ban-could-cost-him-2020-election.html. Accessed October 2, 2019.

17) Nguyen, Terry, "Flavored Vapes Are Facing a Ban. What Does That Mean for Vapers?" Vox, September 18, 2019.

https://www.vox.com/the-goods/2019/9/18/20872295/flavored-vape-ban-what-it-means-vapers. Accessed October 2, 2019.

Steps to Address Student Vaping Using External Resources

Prevention

Education and Training

Use targeted, evidence-based strategies and programs to teach students, parents, and teachers about the risks of vaping. Communicate strategies to resist peer pressure. Disseminate policies outlining the school's approach to vaping and train teachers on how to identify ecigarettes.

For more information see **pages 11-17**.

Supporting Resource

Tobacco Prevention Toolkit

This free resource provides curricula for administrators to teach students about the risks of cigarettes and e-cigarettes. The curricula include interactive exercises that build students' refusal skills and media literacy.

Originated by Stanford Medical School*

Redirection

Re-Education for First Offense

For students found vaping for the first time, require participation in additional educational programs about vaping. Experts at Stanford Medical School explain that frequent, consistent messaging is important to help students comprehend the dangers of vaping.

For more information see **pages 20-21**.

Supporting Resource

Second Chance

This self-paced education program redirects students after their first offense for tobacco/electronic nicotine product use. The program aims to build protective factors (e.g., sense of belonging at school) that can help students stop vaping.

Originated by RMC Health

*Experts at Stanford Medical School request that district administrators interested in implementing the Tobacco Prevention Toolkit curricula contact bonnieh@stanford.edu to discuss voluntary participation in evaluation efforts.

Intervention

Behavioral Support for Subsequent Offenses

Students repeatedly found vaping may be addicted to nicotine. Use a range of district-based and external resources to help students overcome nicotine addiction and stop vaping.

For more information see **pages 22-23**.

Supporting Resources

INDEPTH

This free, educational program focused on vaping emphasizes healthy alternatives to nicotine and helps students cease to use nicotine. The program includes facilitator training and four, 50-minute sessions.

Originated by the American Lung Association and Prevention Research Center of West Virginia University

This is Quitting

This free, text-based program provides adolescents with research-backed support to help them quit vaping. As an additional, paid service, districts can partner with This is Quitting to receive a customized version of the program with reporting capabilities.

Originated by Truth Initiative

3) Prevention

Student Education

To Optimize District Response to Vaping, Focus School- Based Programs on Prevention

All contacts report that districts are uniquely well-positioned to prevent students from vaping. Though youth vaping is increasing, most students (i.e., approximately 72 percent of high school students) still do not use e-cigarettes. Because districts possess unparalleled access to students, districts can use their existing resources to ensure that these students never start vaping.

Rationale for Districts as a Key Actor in Prevention Efforts



Vaping Often Occurs at School

Experts at Boston Children's Hospital explain that, unlike other substances that adolescents abuse (e.g., alcohol), e-cigarette use occurs often at school. Contacts attribute this to adolescent social norms, which have accepted and even glorified vaping on school grounds (e.g., in the bathroom). Because administrators can impact the way adolescents spend their time at school, administrators can help prevent vaping.



Districts Have Existing Resources

Districts have multiple resources that can address student vaping effectively:

- Health classes: Educators can deliver information to students on the dangers of vaping.
- Student leaders: These students can facilitate peer-to-peer anti-vaping programs. Research on adolescent behavior shows that peer-to-peer programs are effective at changing behavior.¹⁸
- School nurses: School-based medical professionals who can help motivate students to quit vaping.

Use Comprehensive, Educational Presentations to Discourage Student Vaping

All profiled districts facilitate educational presentations for students about vaping. Contacts and experts suggest that educational presentations may be most effective if administrators select the content, tone, and format for the presentations with an adolescent audience in mind.

Important Components of E-Cigarette Prevention Presentations



Debunk Myths

Experts at Boston Children's Hospital report that most adolescents do not fully understand vaping. For example, in 2016, most adolescents believed that ecigarettes contained mostly flavoring.19 Contacts report that adolescents sometimes think that e-cigarettes simply produce "water vapor" and do not contain nicotine, despite the fact that most e-cigarettes contain nicotine. Refer to page 6 for information on the prevalence of nicotine e-cigarettes.



Communicate Risks

All contacts believe that educating students on the risks of vaping should be a central component of prevention initiatives. Data shows that today's adolescents are less likely to engage in traditional, risky behavior such as non-opioid, illicit drug use than adolescents in previous years.20 Therefore, adolescents may be more likely to refrain from vaping if they perceive it to be a serious risk.



Inspire Indignation

Contacts at District B and District D believe that adolescents resent feeling manipulated or used. Therefore, administrators use Truth Initiative resources to highlight JUUL Labs' deceptive marketing campaign, which targets youth. In addition, they note that tobacco companies will profit from adolescents' nicotine addictions for their entire lives. Contacts at District B encourage students to see adults as allies in a shared fight against tobacco companies.



Develop Refusal Skills

Experts at Truth Initiative report that research indicates most students start vaping because their peers do. Therefore, experts at Stanford Medical School note that administrators cannot solely teach students about the dangers of e-cigarettes. Administrators must also provide

education on refusal strategies, media literacy, and other ways to resist vaping.

^{19) &}quot;E-Cigarette Fact Sheet," Truth Initiative, March 2019. https://truthinitiative.org/sites/default/files/media/files/2019/03/Truth E-Cigarette FactSheet FINAL.pdf. Accessed October 2, 2019.
20) "Youth Risk Behavior Survey: Data Summary and Trends Report 2007-2017," Centers for Disease Prevention and Control, https://www.cdc.gov/healthyyouth/data/yrbs/pdf/trendsreport.pdf. Accessed October 2, 2019.

Channels to Deliver Profiled Educational Presentations at Secondary Schools



Classroom Presentations and Projects

Health teachers and social studies teachers who cover current events at District A discuss e-cigarettes in class. At District B, students write a research paper about e-cigarette marketing for their health class.



Assemblies

Administrators at District B target e-cigarette presentations at ninth grade students specifically. Contacts explain that the presentation may make a greater impression on students with relatively less exposure to the high school culture, which often glorifies vaping.

Use Facts Instead of Exaggeration to Educate Students About the Risks of Vaping

In addition to presentations' content and format, administrators at profiled districts carefully consider the tone of presentations on the dangers of vaping. Contacts at District B and District D note that "scare tactics"—through which adults attempt to frighten students away from e-cigarettes—do not prevent substance abuse. Contacts at District D explain that students believe their personal experiences to be more credible than second-hand information. For example, students are unlikely to believe exaggerated messaging about exploding e-cigarettes or other morbid consequences of vaping when most of their peers who use e-cigarettes have not experienced these consequences.

To ensure that vaping education programs deliver accurate information in an approachable way, consider utilizing comprehensive, evidence-based curricula—such as those provided through Stanford Medical School's Tobacco Prevention Toolkit, available for free online. Experts at Stanford Medical School use pre- and post-exposure surveys to evaluate the curricula's impact on students. Experts report that the curricula improve students' knowledge, attitudes, intentions, and behavior toward tobacco and e-cigarettes.

Experts at Stanford Medical School note today's adolescents typically express negative views of cigarettes. Therefore, resources such as the Tobacco Prevention Toolkit, which associate ecigarettes with traditional cigarettes, can encourage adolescents to develop similarly negative views of ecigarettes.

Using Stanford Medical School's <u>Tobacco Prevention</u> <u>Toolkit</u> To Help Prevent Adolescent Vaping

Researchers at Stanford Medical School used a community-based participatory approach and collaborated with doctors and educators to create this resource. The Tobacco Prevention Toolkit includes **six units about e-cigarettes specifically**. Each session contains all materials needed to provide **information and skill-building exercises**. To access these curricula, expand the drop-down menu under the heading "Sample Curriculums" on the webpage linked above.

In addition, Tobacco Prevention Toolkit staff offer a free, on-site training for school administrators and educators. Administrators can use this **form** to request a training.

Recruit Student Leaders to Facilitate Vaping Education

Research suggests adolescents are less likely to abuse substances if they perceive that abstinence from the substance is the norm, rather than the exception, among their peers.²¹ Therefore, administrators at District A recruit student leaders from a range of peer groups to lead these programs.

For example, at District A, high school students facilitate an educational presentation about vaping to middle school students. Administrators select students who previously held visible positions at their middle school (e.g., theater participants, athletes). Contacts explain that current students at the middle school still remember these students and view them as role models.

Consider Recruiting Medical Professionals to Facilitate Presentations

At District B, administrators partner with practitioners from local lung health associations and other health organizations (e.g., hospitals) to deliver educational presentations about the dangers of vaping. Contacts report that students are more likely to trust doctors than school administrators.

Educate Early and Often to Align with Evidence-Based Approaches

Contacts at Stanford Medical School explain that adults should engage in conversations about vaping with students consistently throughout their childhood and adolescence. Experts at Stanford Medical School recommend that administrators deliver the Tobacco Prevention Toolkit curricula multiple times across students' academic careers.

Exposure to Anti-Vaping Education Throughout Primary and Secondary School

Elementary School

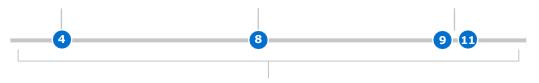
Experts at Stanford Medical School recommend that administrators simplify the Tobacco Prevention Toolkit to facilitate lessons for students in **4**th **or 5**th **grade**.

Middle School

High school students at
District A lead an anti-vaping
presentation for 8th-grade
students. The presentation
helps students realize that
not all their peers use ecigarettes.

High School

Experts at Stanford Medical School recommend that schools expose students to an intensive Tobacco Prevention Toolkit lesson in **9**th **grade** and a follow-up lesson in **11**th **grade**.



Parents, school health staff, educators, and administrator revisit and reenforce lessons on refusal skills during interactions with students.

Adult Education

While Monitoring Can Be Helpful to Identify E-Cigarette Use, Surveillance Tactics Not Enough

Research suggests that since students can use e-cigarettes surreptitiously (e.g., in class, in bathrooms), teachers unfamiliar with e-cigarettes cannot enforce vaping policies (i.e., cannot connect students with cessation resources).²² Recent Truth Initiative research suggests that 23 percent of schools have not acted at all in response to youth vaping. Of schools that have, 41 percent use camera surveillance near bathrooms, and 12 percent use devices to monitor the air in the bathrooms for e-cigarette aerosol.²⁶

However, no profiled districts rely primarily on these strategies, and recent trends in youth vaping suggest that these tactics are not halting the proliferation of e-cigarette use.²⁷ Surveillance that results in punishment (e.g., suspension) also does not effectively support students addicted to nicotine.

Educate Parents and Teachers to Recognize E-Cigarettes and to Connect Students with Cessation Resources

Contacts at District B note that parents, teachers, and administrators must work together to effectively address vaping by finding students who use e-cigarettes and encouraging them to quit vaping. However, in a recent Truth Initiative study, fewer than half of school staff members could accurately identify a photo of one of the most popular e-cigarette devices, Juul.²³ Similarly, contacts at District D report that parents know very little about vaping.

Experts at Truth Initiative recommend that vaping education for teachers and parents cover four topics. These experts suggest that administrators can train teachers during staff meetings and regularly scheduled professional development days.

Approach to Adult Education Recommended by Truth Initiative



Description

- Explain what e-cigarettes look like.
- Resource: <u>Images</u> from the Center for Disease Control and Prevention.²⁵



Vigilance

 Prompt teachers and parents to monitor for signs of e-cigarette use (i.e., fruit-scented odor).



Risks

- Explain the dangers of youth ecigarette use.
- Resource: <u>Unit 3</u> from the Tobacco Prevention Toolkit.



Response

- Instruct teachers to confiscate devices from students using ecigarettes and report these students.
- Provide parents with Strategies from the Tabacco Prevention Toolkit to help their children stop using e- cigarettes (e.g., Truth Initiative's <u>This is Quitting</u> and <u>BecomeAnEX</u> programs)

²²⁾ Ramamurthi, Kivya, Cindy Chau, and Robert Jackler, "JUUL and Other Stealth Vaporisers: Hiding the Habit from Parents and Teachers," Tobacco Control, September 15, 2019. https://tobaccocontrol.bmj.com/content/early/2018/09/15/tobaccocontrol-2018-054455.citation-tools. Accessed October 2, 2019.

^{23) &}quot;Most Teachers and Administrators Can't Identify JUUL, Making it Hard to Combat Use in School," Truth Initiative, September 18, 2019. https://truthinitiative.org/research-resources/emerging-tobacco-products/most-teachers-and-administrators-cant-identify-juul. October 2, 2019.

^{24) &}quot;How Are Schools Responding to JUUL and the Youth E-Cigarette Epidemic," Truth Initiative, January 18, 2019. https://truthinitiative.org/research-resources/emerging-tobacco-products/how-are-schools-responding-juul-and-youth-e-cigarette.

^{25) &}quot;About Electronic Cigarettes (E-Cigarettes)" The Centers for Disease Control and Prevention, November 15, 2018. https://www.cdc.gov/tobacco/basic_information/e-cigarettes/about-e-cigarettes.html. Accessed October 2, 2019.

To educate parents, administrators at District D initially facilitated conversations with parents of students found vaping. However, administrators realized that this reactive approach could not effectively prevent student vaping. In response, administrators designed a proactive presentation for parents of students in grades 5-12. School administrators, the district's health department director, and health educators created the presentation, which administrators plan to deliver at a parent meeting in the high school auditorium. Administrators are advertising the presentation through the Parent Teacher Organization (PTO) and middle school principals.

Contacts at Most Profiled Districts Have Not Determined the Impact of Anti-Vaping Initiatives

While contacts at District B report that, anecdotally, an educational presentation on the risks of e-cigarettes appears to have led to decreased student vaping, all contacts identify many barriers to conclusively quantifying the impact of preventative measures. For example, contacts note that students may avoid vaping for other reasons (e.g., news coverage). Moreover, though profiled districts do track vaping citations, contacts note that these may actually increase when more staff members understand how to identify e-cigarettes, even if use of e-cigarettes declines.

Activism

Consider Contributing to Local or State Initiatives to Restrict Minors' Access to E-Cigarettes

Administrators can leverage local and state political activity to restrict students' access to e-cigarettes, communicate the severity of the problem, and deter students from vaping. For example, administrators at District C spoke at city council meetings in favor of enacting a ban on flavored products, increasing the age to purchase tobacco products to 21, and levying a tax on e-cigarettes. The initiatives passed.

Contacts report that these initiatives can help decrease student access to nicotine products. In addition, administrators incorporate information about these initiatives into their messaging about e-cigarettes to illustrate to students that public officials recognize e-cigarettes as dangerous.

Administrators in any state can contribute to political actions that aim to prevent youth vaping. As of September 2019, Massachusetts, Michigan, New York, and Rhode Island have banned the sale of flavored e-cigarettes through executive order, with lawmakers finalizing legislation in the coming weeks and months. Lawmakers in Delaware, Illinois, and New Jersey are considering similar legislation.

California, through executive action, has moved to curtail the sale of e-cigarettes to minors.²⁶ However, recent data and analysis from the **New England Journal of Medicine** notes that all regulatory efforts to date have failed to stop the proliferation of youth e-cigarette use—therefore, experts do not know if recent regulations will have an impact.²⁷

Snapshot of Political Efforts to Prevent Youth Vaping California²⁸

These actions, alongside those in Massachusetts, Michigan, New York, and Rhode Island, may serve as a blueprint for other states and municipalities seeking to prevent youth vaping.

San Francisco became the first major U.S. city to ban the sale of e-cigarettes in June 2019. The ban goes into effect in early 2020. However, Juul-led efforts resulted in a ballot measure that would amend the ban to allow adults over 21 to purchase e-cigarettes. City voters will decide the ballot measure in November.

Los Angeles' city government showed support for a ban of flavored e-cigarettes during a preliminary vote in September 2019.



Through executive order, California Governor Gavin Newsom:

- Initiated a \$20 million vaping awareness campaign
- Ordered executive agencies to combat youth vaping

²⁶⁾ Ducharme, Jamie, "As the Number of Vaping-Related Deaths Climbs, These States Have Implemented E-Cigarette Bans," TIME,

September 25, 2019. https://time.com/5685936/state-vaping-bans/. Accessed October 2, 2019.
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4) E-Cigarette Policies

Development

Develop a Targeted Substance Abuse Policy for E- Cigarettes

In response to the rise of e-cigarette use, administrators at profiled districts create e-cigarette-specific substance abuse policies to address use at school. Administrators at all profiled districts initially used existing tobacco policies to respond to student vaping. However, the absence of a vaping-specific policy caused a variety of challenges at profiled districts.

In response, administrators at profiled districts designed new policies specifically for e-cigarettes that address many challenges of the existing tobacco policies. At all profiled districts, e-cigarette policies explicitly ban students from vaping on school grounds. Administrators at profiled districts confiscate e-cigarette devices from students to deter recidivism.

Checklist for Effective E-Cigarette Policies

According to the Massachusetts Association of Health Boards and Kansas Department of Health and Environment in partnership with the Tobacco Free Kansas Coalition, administers should consider the following checklist to create a comprehensive e-cigarette policy.²⁹



Explicitly cover all ecigarette devices and paraphernalia (e.g., cartridges) regardless of their content (i.e., nicotine, non-nicotine).



Prohibit the possession, use, and distribution of all of these products on school grounds by students, staff, and visitors.



Define school grounds as any school-owned or rented property, vehicles on school premises, and an offsite, school-sponsored activity.



Outline consequences for violation of the policy, including confiscation and discipline.



Establish the expectation that all staff will actively enforce the policy.



Describe services and supports available to students and staff seeking help for nicotine addiction.

For an example of a school e-cigarette policy that incorporates all of the elements described in this section, see **Appendix A**.

Components of E-Cigarette Policies That Address Common Challenges

Challenge

Parent Obstruction

At District B, when administrators confiscated e-cigarettes under the initial tobacco control policy, parents picked them up from the office and returned them to their children. Parents justified their actions because they preferred their children to smoke e-cigarettes rather than traditional cigarettes.

Response

Discard Confiscated Devices

Administrators at District B indicated in the updated policy that they will destroy and dispose of confiscated e-cigarettes, on the grounds that these devices easily can be altered to contain THC, a controlled substance.

Inconsistent Responses

Before administrators at District C created a specific policy for e-cigarettes, individual schools throughout the district responded differently to students using e-cigarettes.

Use Evidence to Standardize

Administrators at District C require all schools to adhere to the new, ecigarette-specific substance abuse policy.

Uncertainty Around Suspension

When students use e-cigarettes at school, they produce an unhealthy environment for students who do not, because these students cannot avoid exposure to e-cigarette aerosol. Therefore, contacts at profiled districts feel a responsibility to suspend students who use e-cigarettes in school. However, contacts at profiled districts also report that suspension significantly disrupts student learning and appears to have little impact on reducing vaping.

Incorporate an Understanding of Addiction

Nicotine is a highly addictive substance, and therefore students may be unable to stop vaping even if administrators suspend them for vaping. To help students quit vaping and promote a healthier learning environment, the disciplinary consequences outlined in the policy are sensitive to the challenges of addiction. See **page 19** for more information on addiction-aware discipline policies.

Use Multiple Channels to Communicate E-Cigarette Policies to Students, Parents, and Teachers

After creating a vaping-specific substance abuse policy at District D, administrators ensure that all incoming and returning students, parents, and teachers have easy access to the policy.

Channels to Communicate New E-Cigarette Policy at District D

The Tobacco
Prevention
Toolkit provides
samples of Public
Service
Announcements
(PSAs) to raise
awareness about
new, vapingspecific substance
policies.



Student Handbook

Administrators added the new policy to the student handbook.



Letter Home

Administrators communicate the change via a letter sent to all students' homes. The central communications office coordinated the letter.

Discipline

Consider Eliminating Suspension as a Response to Vaping

Administrators must decide how to respond to students found vaping at school. Experts at Stanford Medical School explain that suspension punishes students unfairly, because students are the victims of predatory marketing tactics that encourage nicotine addiction in adolescents. However, contacts at profiled districts do highlight several points in support of suspension.

Evaluating Suspension as a Response to Vaping at Profiled Districts



Arguments in Favor

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Arguments Against

Example Setting

Suspension may set an example and deter students from vaping.

Safety

Students feel unsafe in hallways, bathrooms, and classrooms due to the aerosol clouds produced by ecigarettes. Administrators have a responsibility to remove students from school if they are causing other students to feel unsafe.

Efficacy

At profiled districts where administrators suspend students for e-cigarette use, contacts report that the prevalence of e-cigarette use is still increasing. Also, experts at Stanford Medical School and Boston Children's Hospital note that suspension does not help students stop vaping.

Insensitive to Addiction

Suspension punishes students for a behavior they may be unable to control if they are addicted to nicotine.

Currently, all profiled districts suspend students for vaping in at least some instances (e.g., a students' second or third offense). Rather than eliminating suspension as an option altogether, administrators at profiled districts work to incorporate some flexibility into discipline policies for students found vaping.

Incorporate Addiction Awareness into Vaping Discipline Protocol

Experts and contacts at Boston Children's Hospital, District C, and Truth Initiative indicate that punitive measures (e.g., suspension, loss of athletic eligibility) do not encourage students to quit using e-cigarettes. Contacts at all profiled institutions emphasize that the powerful nature of nicotine addiction prevents punitive discipline from successfully addressing vaping use.

Contacts at District A have found that student athletes prefer to waive their athletic eligibility for their entire high school careers rather than quit vaping. Experts at Boston Children's Hospital, contacts at District C, and decades of research attest to the highly addictive nature of nicotine.³⁰

To recognize that addicted students may be unable to resist the urge to use ecigarettes, profiled districts have adapted their discipline policies for students found vaping to incorporate some flexibility.

^{30) &}quot;Tobacco, Nicotine, and E-Cigarettes," National Institute on Drug Abuse. https://www.drugabuse.gov/publications/research-reports/tobacco-nicotine-e-cigarettes/nicotine-addictive. Accessed October 2, 2019.

At District C and District D, administrators use resources from anti-tobacco/anti-vaping organizations as alternatives to suspension for students' first or second vaping offense. These resources aim to help students quit vaping, which is a more long-term solution to student vaping than suspension. Administrators at District D explain that this approach aligns with the district's values of restorative justice (i.e., a solutions-based rather than punishment-based approach to misbehavior).

Adapted Discipline Policies at Profiled Districts



Path to Ineligibility Forgiveness

At District A, students found vaping lose their eligibility to participate in athletics. However, if the student works with a school counselor responsible for substance abuse and does not re-offend within a year, administrators reinstate their athletic eligibility.



Alternative to Suspension

At District D, students found vaping do not automatically have to serve a suspension. Instead, the student and their parent or guardian can attend an educational presentation. School counselors responsible for mental health and substance abuse facilitate the presentation. Counselors offer the presentation twice a month in the evening.

First Offense for Vaping

Students meet with the school nurse to set up a profile with the free, online **Second Chance** program, which includes modules about vaping. Students must complete the self-paced program.

Second Offense for Vaping

Student attend meetings with a nurse specializing in substance abuse. The student must complete <u>Teen</u> <u>Intervene</u> with the nurse. This is a motivational interviewing program designed to help students avoid substance abuse.

For an example of a school ecigarette policy that incorporates alternatives to suspension, see **Appendix A**.

Psychologists use motivational interviewing to encourage patients to change behaviors.³⁴ This is particularly important to support students who use e-cigarettes, because many do not realize they are addicted to nicotine and may resist the idea of quitting.

^{31) &}quot;Motivational Interviewing," Psychology Today. https://www.psychologytoday.com/us/therapy-types/motivational-interviewing. Accessed October 2, 2019.

5) Intervention

Treatment

Consider Adjustments to Health Staffing to Offer Vaping Cessation Support in School

To impactfully reduce student vaping, experts at Boston Children's Hospital report that students will likely need behavioral counseling to quit using e-cigarettes. Therefore, these experts recommend that administrators deploy counselors trained to conduct motivational interviewing for e-cigarette users and provide behavioral support for students trying to quit.

For example, the health department at District C employs seven nurses, funded through a state grant, responsible solely for substance abuse prevention. They work with students who have committed their second vaping offense to help the students quit using e-cigarettes. At districts with funds to hire additional health professionals, experts at Boston Children's Hospital suggest administrators hire candidates with substance abuse credentials. For example, contacts recommend that districts recruit qualified counselors from social-work degree programs at local higher education institutions.

For districts that lack the funds to hire staff specifically responsible for substance abuse prevention, the American Lung Association offers a comprehensive, evidence-backed motivational interviewing program, INDEPTH. Any staff member can complete free, online training, which prepares them to deliver the program to students.

Deploying Staff to Support Students Addicted to Nicotine

Based on the model at Conejo Valley Unified School District³⁵

	Staff	Responsibilities	Population Served
Level One: Redirect first-time offenders through education.	Any trained staff member. At profiled districts, administrators often ask counselors or nurses to facilitate presentations but may consider teachers or others based on workloads.	Facilitate an anti- vaping educational program on Saturdays. Students attend approximately six sessions. Facilitators can use free, online programs such as INDEPTH.	Students who have committed their first and/or second offense for vaping.
Level Two: Engage familes through a desginated student assistance program.	Behavioral specialists.	Work with the student and their family to develop a plan to address the student's specific needs and engage the student in group counseling meetings with peers.	Students who have committed their third offense for vaping, which triggers automatic referral to this program.
Level Three: Outsource to community partners as needed.	Behavioral specialists.	Engage community partners such as pediatricians and outpatient programs to help support the student.	Students who demonstrate high levels of need/severe addiction during their intake meeting with the behavioral specialist.

^{32) &}quot;School-based Initiatives: BreakThrough Student Assistance Program," Ventura County Behavioral Health, https://mail.venturacountylimits.org/en/prevention/school-based-initiatives/breakthrough-student-assistance-program. Accessed October 2, 2019; D'Angelo, Alexa, "Ventura County Schools Aim to Smoke Out Vaping Epidemic Through Education," VCStar, February 20, 2019. https://www.vcstar.com/story/news/education/2019/02/20/teen-vaping-ventura-county-schools/2667240002/. Accessed October 2, 2019.

Consider Mindfulness Programs and Public Health Partnerships to Help Students Overcome Addiction

Experts at Boston Children's Hospital report that most students require intensive support to successfully quit using e-cigarettes. In addition to counseling and medication, experts prescribe mindfulness and yoga exercises to adolescents to help them cope with nicotine cravings. Experts suggest that district administrators can incorporate these types of interventions into the school day.

Moreover, Truth Initiative's **This is Quitting** program (also profiled on **page 9**) sends evidence-based text messages with a peer-to-peer approach to help adolescents set a quit date and follow through with vaping cessation. Experts at Truth Initiative found that 60 percent of adolescents who enrolled in the pilot This is Quitting program decreased or eliminated their e-cigarette use after two weeks. After two months enrolled in the program, 22 percent of enrolled adolescents had abstained for e-cigarettes for seven days, and 12 percent had abstained for 30 days.

M

60%

After two weeks of using This is Quitting, 60 percent of adolescents decreased or eliminated their e-cigarette use.

Using Truth Initiative's Vaping Cessation Program to Support Students

Districts can bring This is Quitting to their students in two ways:

- **No-cost service:** Districts can request promotional materials from Truth Initiative that describe what the program is, how it works, and how to sign up for it. Contacts at Truth Initiative recommend that administrators distribute these materials through peer networks (e.g., ask the captain of the soccer team to distribute to her teammates).
- **Fee-based service**: Districts can officially partner with Truth Initiative to receive customized, co-branded This is Quitting materials and data reporting about student usage and scope of the problem.

For information about either service, administrators should email help@thisisquitting.com.

6) Research Methodology

Project Challenge

EAB's District Leadership Forum conducted this research to answer the following questions:

- At contact districts, how does e-cigarette use impact students' experience at school?
- According to secondary research, what impact does e-cigarette use and nicotine addiction have on students?
- What strategies do contact districts use to address e-cigarette use among students?
- How do contact districts engage multiple stakeholders to holistically address ecigarette use among students?
- How do contact districts tailor intervention strategies to different student groups?
- What challenges do contact districts face when addressing e-cigarette use among students? How do contact districts overcome these challenges?
- What has been contact districts' experience with different approaches to addressing e-cigarette use among students?
- According to secondary research and contact practitioners' knowledge, how
 prevalent is e-cigarette use in the classroom, on school grounds, and at extracurricular activities?
- According to contact practitioners, what impact does e-cigarette use and nicotine addiction have on adolescents?
- · How do contact practitioners address e-cigarette use among adolescent patients?
- According to contact practitioners, how could school district administrators implement these practices in their districts?
- What steps do contact practitioners take to identify and address root causes of ecigarette use among adolescents?
- According to contact practitioners, how can districts best engage multiple stakeholders to holistically address e-cigarette use among students?
- What should school district administrators avoid when they implement strategies to address e-cigarette use among their student?
- What has been contact practitioners' experience with different approaches to addressing e-cigarette use among adolescents?

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Research Parameters

The Forum interviewed administrators at school districts with publicized initiatives to combat student vaping. The Forum also interviewed medical and public health experts who specialize in addressing adolescent vaping.

A Guide to Districts Profiled in This Report

District	Location	Approximate Enrollment
Conejo-Valley Unified School District*	Pacific West	20,000
District A	Midwest	2,000
District B	South	100,000
District C	Mountain West	30,000
District D	Mid-Atlantic	9,000

^{*} Profiled through secondary research

A Guide to Experts Consulted for This Report

Name and Title	Organization	Contact/Organization's Description
Multiple Staff Members	Truth Initiative	Truth Initiative is a nonprofit public health organization working to eliminate youth tobacco use.
Dr. Bonnie Halpern- Felsher	Stanford Medical School	Dr. Halpern-Felsher is a professor of adolescent medicine at Stanford University. She is the founder and director of the Tobacco Prevention Toolkit.
Dr. Sharon Levy	Boston Children's Hospital	Dr. Levy is an associate professor in Pediatrics at Harvard Medical School and the director of Boston Children's Hospital's Adolescent Substance Use and Addiction Program.

Appendix A

The **Public Health Law Center** at the **Mitchell Hamline School of Law** provides a <u>model policy</u> for tobaccoand e-cigarette-free K-12 schools. Administrators can use this model to update campus tobacco policies in accordance with the law and recent research on e-cigarettes. This policy aligns with public health expert-backed recommendations to use alternatives to suspension, including education and cessation support, for students found vaping (see **VII. Enforcement**).

K-12 Schools, Commercial Tobacco-Free: Model Policy

I. Findings

District and school administrators may wish to introduce the policy with a section citing the increasing prevalence and documented risks of youth e-cigarette use. This introduction may serve as a justification for the following policy.

II. Purpose

- (A) [The district name] / [school name] recognizes that the use of commercial tobacco products, including electronic delivery devices, is a health, safety, and environmental hazard for students, staff, visitors, and school facilities. The board is acutely aware of the serious health risks associated with the use of commercial tobacco products, including electronic delivery devices, to users and non-users. The [district/ school] believes that the use or promotion of commercial tobacco products, including electronic delivery devices, on school grounds and at off-campus school-sponsored events is detrimental to the health and safety of students, staff, and visitors.
- (B) The [district/school] also believes accepting gifts or materials from the tobacco industry will send an inconsistent message to students, staff, and visitors.
- (C) The [district/school] acknowledges that adult staff and visitors serve as role models for students. The board embraces its obligation to promote positive role models in schools and to provide an environment for learning and working that is safe, healthy, and free from unwanted smoke or aerosol and other commercial tobacco use for the students, staff, and visitors.

THEREFORE, the [district/school] adopts the following commercial tobacco-free policy:

III. Definitions

- (A) "Administrator" means any person who has disciplinary and managerial authority to enforce school policies in [district/school name], including but not limited to principals, vice-principals, and office personnel.
- (B) "Any time" means 24 hours a day, seven days a week, 365 days a year.
- (C) "Electronic delivery device" means any product containing or delivering nicotine, or any other substance, whether natural or synthetic, intended for human consumption through the inhalation of aerosol or vapor from the product. "Electronic delivery device" includes, but is not limited to, devices manufactured, marketed, or sold as e-cigarettes, e-cigars, e-pipes, vape pens, mods, tank systems, Juul, Suorin, or under any other product name or descriptor. "Electronic delivery device" includes any component part of a product, whether or not marketed or sold separately, including but not limited to e-liquids, e-juice, cartridges, or pods.

- (D) "Imitation tobacco product" means any edible non-tobacco product designed to resemble a tobacco product, or any non-edible non-tobacco product designed to resemble a tobacco product and intended to be used by children as a toy. "Imitation tobacco product" includes, but is not limited to, candy or chocolate cigarettes, bubble gum cigars, shredded bubble gum resembling chewing tobacco, pouches containing flavored substances packaged similar to snus, and shredded beef jerky in containers resembling snuff tins.
- (E) "Lighter" means a mechanical or electrical device typically used for lighting tobacco products.
- (F) "Off-campus, school-sponsored event" means any event sponsored by the school or school district that is not on school property, including but not limited to, sporting events, day camps, field trips, dances, or theatrical productions.
- (G) "Parent/Guardian" means any person that has legal guardian status over a student enrolled in [district/school name].
- (H) "School" means [name of school/any public nursery, day care center, child care facility, Head Start program, kindergarten, elementary, secondary school, alternative learning center or adult education center] operated under the control of [district name].
- (I) "School property" means all facilities and property, including land, whether owned, rented, or leased by [district/school name], and all vehicles owned, leased, rented, contracted for, or controlled by [district/school name] used for transporting students, staff, or visitors.
- (J) "Signage" means signs declaring that all [district/school name] school property is tobacco-free.
- (K) "Smoking" means inhaling, exhaling, burning, or carrying any lighted or heated cigar, cigarette, or pipe, or any other lighted or heated product containing, made, or derived from nicotine, tobacco, marijuana, or other plant, whether natural or synthetic, that is intended for inhalation. "Smoking" also includes carrying or using an activated electronic delivery device.
- (L) "Staff" means any person employed by [district/school name] as full or part-time, or any position contracted for or otherwise employed, with direct or indirect monetary wages or compensation paid by [district/school name], or anyone working on a volunteer basis. This term includes, but is not limited to, faculty, service personnel, volunteers, chaperones, student teachers, adult classroom or student aides, and other adults working for [district/school name].
- (M) "Student" means any person enrolled in [district/school name]'s educational system.
- (N) "**Tobacco industry**" means manufacturers, distributors or wholesalers of tobacco products or tobaccorelated devices (e.g., Juul, Altria). This includes parent companies and subsidiaries.
- (O) "**Tobacco industry brand**" means any corporate name, trademark, logo, symbol, motto, selling message, recognizable pattern of colors, or any other indication of product identification identical or similar to those used for any brand of tobacco product, company, or manufacturer of tobacco products.
- (P) "Tobacco product" means any product containing, made, or derived from tobacco or that contains nicotine, whether synthetic or natural, that is intended for human consumption, whether chewed, smoked, absorbed, dissolved, inhaled, snorted, sniffed, or ingested by any other means, or any component, part, or accessory of a tobacco product, including but not limited to: cigarettes; electronic delivery devices; cigars; little cigars; cheroots; stogies; periques; granulated, plug cut, crimp cut, ready rubbed, and other smoking tobacco; snuff; snuff flour; cavendish; plug and twist tobacco; fine-cut and other chewing tobacco; shorts; refuse scraps, clippings, cuttings and sweepings of tobacco; and other kinds and forms of tobacco.
- (Q) "**Tobacco products shop**" means a retail establishment that derives more than 90 percent of its gross revenue from the sale of tobacco products, as defined in this policy.

- (R) "**Tobacco-related devices**" means ashtrays, rolling papers, wraps, or pipes for smoking and any components, parts, or accessories of electronic delivery devices.
- (S) "Visitor" means any person subject to this policy that is not a student, staff, or administrator as defined above

IV. General Statement of Policy

- (A) [District/school name] students are prohibited from possessing, using, consuming, displaying, promoting, or selling any tobacco products, tobacco-related devices, imitation tobacco products, or lighters at any time on school property or at any off-campus, school sponsored event.
- (B) Administrators, staff, or visitors of [district/school name] are prohibited from using, consuming, displaying, activating, promoting, or selling any tobacco products, tobacco related devices, imitation tobacco products, or lighters at any time on school property or at any off-campus, school-sponsored events. This includes products or paraphernalia displaying tobacco industry brands.
- (C) It shall be a violation of this policy for [district/school name] to solicit or accept any contributions, gifts, money, curricula, or materials from the tobacco industry or from any tobacco products shop. This includes, but is not limited to, donations, monies for sponsorship, advertising, alleged educational materials, promotions, loans, scholarships, or support for equipment, uniforms, and sports and/or training facilities. It shall also be a violation of this policy to participate in any type of service funded by the tobacco industry while in the scope of employment for [district/school name].
- (D) It shall be a violation of this policy for any person to promote, or for [district/school name] to promote or allow promotion of tobacco products, tobacco-related devices, or imitation tobacco products on the school property or at off-campus, school-sponsored events. This includes promotion of these products via gear, technology accessories, bags, clothing, any personal articles, signs, structures, vehicles, flyers or any other materials.
- (E) [District/school name] shall act to enforce this policy and to take appropriate action against any student, staff, administrator, or visitor who is found to have violated this policy.
- (F) Instruction to discourage the use of tobacco products shall be included in the education provided for all students. Staff responsible for teaching tobacco use prevention shall have adequate training and participate in ongoing professional development activities to effectively deliver the education program as planned. The curriculum for this instruction will not be paid for or developed by the tobacco industry or its subsidiaries.

V. Exemptions

- (A) It shall not be a violation of this policy for a person to possess or provide tobacco or tobacco-related devices to any other person as part of an indigenous practice or a lawfully recognized religious, spiritual, or cultural ceremony or practice. It shall not be a violation of this policy to use tobacco, tobacco-related devices, imitation tobacco products, or lighters as part of an educational experience related to indigenous tobacco practices that has been approved by administrators.
- (B) It shall not be a violation of this policy for tobacco products, tobacco-related devices, imitation tobacco products, or lighters to be included in an instructional or work-related activity in [district/school name] school buildings if the activity is conducted by a staff member or an approved visitor and the activity does not include smoking, chewing, or otherwise ingesting the product.
- (C) It shall not be a violation of this policy for non-students 18 years and older to use or possess a product that has been approved by the U.S. Food and Drug Administration for sale as a tobacco cessation product, as a tobacco dependence product, or for other medical purposes, and is being marketed and sold solely for such an approved purpose.

VI. Opportunities for Cessation Programs

- (A) Administrators shall consult with the local public health department or other appropriate health and allied community-based organizations to provide students, staff, and administrators with information and access to support systems, programs, and services to encourage them to abstain from the use of tobacco products.
- (B) Administrators shall identify and offer evidence-based programs and services for staff that use tobacco products to support them in complying with this policy.

VII. Enforcement

The success of this policy depends upon the thoughtfulness, consideration, and cooperation of the whole [district/school name] community. All individuals on school premises, including students, staff, administrators, and visitors are responsible for adhering to and enforcing this policy. Members of the [district/school name] community are encouraged to communicate this policy with courtesy and diplomacy. Any person acting in violation of this policy will be informed or reminded of the policy and asked to comply.

(A) Students

- (1) The first violation shall result in confiscation of tobacco products, tobacco-related devices, imitation tobacco products, or lighters; notification of parents and/or guardians; and at least one of the following:
 - i. A student meeting and individual student assessment with a chemical health educator or designated staff to discuss commercial tobacco use and the school policy.
 - ii. Student participation in a tobacco education program.
 - iii. Provision of information to student about available cessation programs and resources.
- (2) The second violation shall result in confiscation of tobacco products, tobacco related devices, imitation tobacco products, or lighters; notification of parents and/ or guardians; the provision of information to the student about available cessation programs; and at least one of the following:
 - A student meeting and individual student assessment with a chemical health educator or designated staff with parents and/or guardians to discuss commercial tobacco use and school policy.
 - ii. Student participation in a tobacco education program.
- (3) The third and any subsequent violation shall result in confiscation of tobacco products, tobaccorelated devices, imitation tobacco products, or lighters; notification of parents and/or guardians; the provision of information to the student about available cessation programs; student participation in a tobacco education program; and at least one of the following:
 - A student meeting and individual student assessment with a chemical health educator or designated staff with parents and/or guardians to discuss commercial tobacco use and school policy.
 - ii. Educational community service.

(B) Staff

(1) The first violation of this policy shall result in a verbal warning to the staff member and an offer of a referral to cessation services.

- (2) The second violation shall result in a written warning to the staff member with a copy placed in the staff member's district personnel file, and an offer of referral to cessation services.
- (3) The third violation shall be considered insubordination and shall be dealt with accordingly based on established policies and procedures for suspension and/or dismissal of staff.

(C) Visitors

- (1) Visitors observed violating this policy shall be asked to comply with [district/school name]'s tobacco-free policy.
- (2) If a visitor fails to comply with the request, this policy violation may be referred to the building principal or other available school district supervisory personnel. The supervisor shall decide on further action that may include a directive that the visitor leave school property and forfeit any fee charged for admission to a school-sponsored event.
- (3) Repeated violations may result in a recommendation that the superintendent prohibit the individual from entering [district/school name]'s property for a specified period of time.

VIII. Dissemination of Policy

- (A) Appropriate signage shall be posted throughout the district at building entrances and other highly visible locations on all school buildings, building entrances, vehicles, vehicular entrances to school grounds, and all indoor and outdoor athletic facilities indicating that [district/school name] requires an environment free of commercial tobacco.
- (B) The school shall notify students and parents/guardians of this policy through student handbooks and orientations.
- (C) The district shall provide notice of this policy in staff handbooks, through orientations and employee or staff trainings, and when offering employment.
- (D) The school or district shall make reminder announcements of its commercial tobacco-free policy at school events at appropriate intervals throughout the events, when possible.

IX. Program Evaluation

(A) The tobacco-free policy shall be assessed by the school district or its designee evaluator at regular intervals, but at least once a year, to determine whether policies, policy enforcement, communication, education, staff training, and cessation programs are effective. Policies and programs shall be updated and revised accordingly.

X. Effective Date

(A) This policy shall take effect in full on [insert date].

Statutes on Tobacco Use in Schools

- 20 U.S.C. § 6083
- [Insert state-specific statutes]