

# Young people and stopping vaping



**NCSCT**



Department  
of Health &  
Social Care

## Young people and stopping vaping

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This document has been produced with the support of the Department for Health and Social Care

Version 1. Date of last modification: August 2025

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ISBN: 978-1-915481-07-8

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## Foreword

As teachers, parents and young people across the country know all too well, we are seeing rising rates of young people vaping. It is shocking that vapes are often deliberately branded and advertised to be more appealing to children. Youth vaping has more than doubled in the last 5 years and in 2023, one in four 11–15-year-olds had tried vaping.



We know there are health risks associated with vaping, particularly for children and young people. Nicotine is highly addictive, and emerging evidence links respiratory illness with vaping. Vaping is only intended as a quit aid for adult smokers.

I am therefore very proud of the landmark Tobacco and Vapes Bill, which once passed, will take decisive action to prevent young people from smoking and vaping in the future. The Bill will not only enable us to create the first smoke-free generation but also stop vapes and nicotine products from being deliberately promoted and advertised to children, to stop the next generation from becoming hooked on nicotine.

Further to this, on 1 June 2025, we also banned the sale of single use vapes which were the product of choice for most children who vaped. Banning these products will not only help protect our environment but also make vaping less accessible to young people.

But we need to do more to support young people that are already vaping. Those that work regularly with young people, such as teachers, youth workers, and school nurses are more likely to spot a young person's vaping or smoking habits and have more opportunities to intervene. But they must be equipped to do so.

That is why I commend this guide to you and I would like to thank you for the vital work you do to prevent future harms to their health – and in supporting the next generation to thrive.

I would like to also thank the National Centre for Smoking Cessation and Training, and all those that have contributed to this guidance, for their careful and considered work.

### **Ashley Dalton MP**

Parliamentary Under Secretary of State for Public Health and Prevention

## Summary of guidance on young people and stopping vaping

- 
- More young people report vaping than smoking but still, most young people neither smoke nor vape. Most young people who try vaping do not go on to vape regularly.
- 
- Vaping is less harmful than smoking, but it is not risk free. Nicotine dependence and coughing, headaches, dizziness and sore throats can develop. The long-term health harms are currently unknown, although they are likely to be less harmful than smoking. Vapes should not be used by young people, especially those who have never smoked.
- 
- Single-use (disposable) vapes were the most popular vape device with young people before they were banned in 2025.
- 
- Interventions with young people about use of nicotine vapes should be accompanied by, and not detract from, information about the harm that smoking tobacco causes and the benefits of stopping smoking
- 
- Young people stopping vaping who previously smoked, or who are also smoking, should be reminded that vaping is less harmful than smoking. It is important that their attempt to stop vaping does not lead them to return to, or continue, smoking.
- 
- Vape use by young people, like much of their behaviour, is linked to their social environment and context. Vaping tends to happen within friendship groups.
- 
- Reasons given by young people to stop vaping include: health concerns, cost and dependence. Barriers to stopping vaping include: social benefits, stress control and enjoyment.
- 
- Creating non-vaping youth-focused environments to reduce the social pressure to vape, by developing and implementing vape-free places and policies is important.
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- Very Brief Advice on Vaping (VBAV) is a simple intervention with young people to: establish whether they have any concerns about vaping (ASK), inform them of the risks of vaping and that help is available (ADVISE), and respond to their individual needs (ACT)
- 
- When young people want to stop vaping, and many will, we must give them the support that they need and stick with them until they manage to stop.
- 
- To encourage young people to change their behaviour they need to know that it is possible, that people like them have stopped vaping. They also need to know that help is available and what it looks like.
- 
- If a young person is vaping **and** smoking, or is vaping to prevent them smoking, then there is always a delicate balance to be struck between supporting them to stop vaping and ensuring that they do not return to smoking tobacco.
- 
- Stopping vaping is achievable and many young people manage it without too much trouble. The level of support needed will be dependent on the individual young person and their specific needs, social context, reasons for vaping and nicotine dependence.
- 
- **Exploring** the young person's vaping, discussing strategies for **stopping**, **following up** young people to help achieving and **maintaining** abstinence are part of the support that can be offered.
- 
- For some young people, stopping vaping abruptly might be too difficult or too daunting. Cutting down on nicotine vaping gradually can make stopping easier. It allows the body time to adjust to lower nicotine levels and gives the young person confidence that they can control their vaping. Gradual reduction is the preferred method of stopping vaping by young people.
-

## Introduction

**There is justifiable concern about the increasing number of young people who regularly use nicotine vapes, especially those who are not smoking or have never smoked tobacco.**

Everyone who works with young people needs to be able to respond to concerns about young people and vaping, and the response needs to be reasonable and evidence-based.

This briefing provides guidance on how to assist young people to stop vaping and suggests answers to commonly asked questions. It also summarises the patterns and prevalence of vaping among young people, details trends in type of vape and e-liquid used by them, and summarises the evidence on vaping and health. **Note:** this briefing does not cover vaping of cannabis or THC.



This briefing is aimed at staff who already work with young people (e.g. school nurses, teachers, youth workers, staff in children's services). We assume that your work environment, policies and practices in relation to young people meet all legal requirements and adhere to best practice.

There is not a great deal of relevant research in this area, but we cannot wait for the evidence to emerge before acting. So, we have drawn on what evidence there is from the UK and globally (USA, Europe, Australasia), what we know from the evidence on vaping cessation in adults, and upon best clinical practice and expert opinion. We will conduct a formal annual review of this briefing and update it to reflect emerging new evidence and best practice.



For this briefing young people are defined as those under the age of 18. However, research in this area sometimes focuses on 12 – 15-year-olds or those up to 25 years old. We have acknowledged within the briefing where we report evidence from a different age range to that defined here.

We haven't included **case studies** from areas that have responded to concerns about young people and vaping in this briefing as generally they have not undergone formal evaluation. However, they are useful to assess what might be possible in your area or within your organisation and so we will begin to build a collection of the most useful case studies on the NCSCCT website:

[www.ncsct.co.uk/publications/young-people-vaping-case-studies](http://www.ncsct.co.uk/publications/young-people-vaping-case-studies)



There is a risk that the attention on young people's use of nicotine vapes will detract from the need to retain focus on the number of young people smoking tobacco, the harm that this causes to their health and the benefits of stopping smoking. This briefing should be read in conjunction with the NCSCCT *Young people and stopping smoking* briefing: [www.ncsct.co.uk/publications/young-people-stopping-smoking](http://www.ncsct.co.uk/publications/young-people-stopping-smoking)



## Vaping, young people and the law

Since 2015, it has been illegal in England to sell vaping products, and specifically nicotine-containing vapes or e-liquids, to anyone under the age of 18 years or to purchase such products on behalf of a person aged under 18 years (proxy purchase). Regulation also states that the packaging and labelling information of vaping products must include a reference that the product is not recommended for use by young people and people who don't smoke.

Despite this, people under the age of 18 who vape report that they purchase their own (predominantly single-use) vapes from various retailers, including newsagents, corner shops, off-licences, markets, supermarkets, vape stores and online.<sup>1</sup> In a rapid one-off review of sales compliance by the CTSI, 422 test purchases were made using YP to attempt to purchase a disposable vape. Illegal sales were made on 145 occasions (33% of purchases).<sup>2</sup>

Additionally, we know that vaping products are often designed and market to appeal to young people.

The government is therefore currently in the process of passing new legislation, which includes measures to combat youth vaping. The Tobacco and Vapes Bill will:

- provide powers to allow the government to make most places that are smoke free vape free as well.
- ban the advertising and sponsorship of vapes and nicotine products and allow ministers to regulate the flavours, packaging, and display of vapes so that they do not appeal to children.
- provides powers to introduce a new retail licensing scheme in England, Wales and Northern Ireland for tobacco, vapes and nicotine products and strengthens Scotland's existing retail register.

- introduce a new £200 fixed penalty notice in England and Wales, which will enable Trading Standards Officers to act 'on the spot' to clamp down on offences such as underage sales.
- provide with powers to establish a new registration system for tobacco, vaping and nicotine products entering the UK market, which will strengthen consumer safety and overall enforcement.

The Government introduced a ban on the sale of single-use (disposable) vapes and a new duty on vaping products is due to come into force in October 2026.<sup>3</sup> These changes are designed to have an impact on vaping use in young people. When these changes are introduced, guidance will be updated.



More information on the Tobacco and Vapes Bill, how the legislation will be implemented and what the implications are for young people and those involved with them, are available here: [www.gov.uk/government/collections/the-tobacco-and-vapes-bill-2024](https://www.gov.uk/government/collections/the-tobacco-and-vapes-bill-2024)

## Part 1: Background

The information in this section will help you to identify which young people are at most risk of vaping, their reasons for vaping, whether they are dependent upon nicotine and the effect of vaping upon their health.

We provide a summary of the main points, with more detailed reviews of the literature on the NCSC website where indicated.

### 1.1 Patterns and prevalence

**Most young people do not vape.** In the most recent Smoking, drinking and drug use among young people in England survey of 11–15-year-olds, current vaping was reported by 9% of respondents – the same as in 2021.<sup>4</sup>



Action on Smoking and Health (ASH) run annual surveys in Great Britain on use of nicotine vapes by young people (11–17-year-olds). We summarise the findings here but for more detailed analysis visit: [ash.org.uk/resources/view/use-of-e-cigarettes-among-young-people-in-great-britain](https://ash.org.uk/resources/view/use-of-e-cigarettes-among-young-people-in-great-britain)

Of the 11–17-year-old respondents to the 2025 ASH survey:<sup>1</sup>

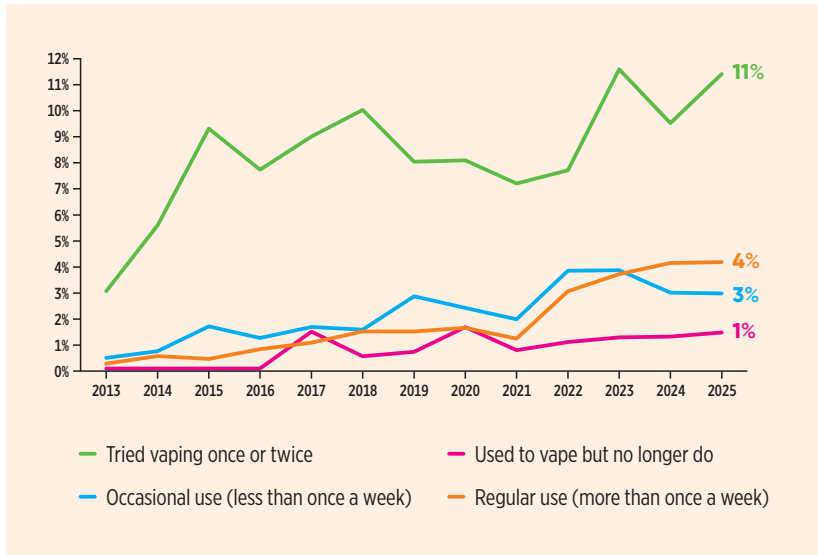
**20%** reported ever using a vape

**11%** reported trying a vape once or twice

**7%** reported currently using a vape: 4% were regular users and 3% were occasional users (less than once a week)

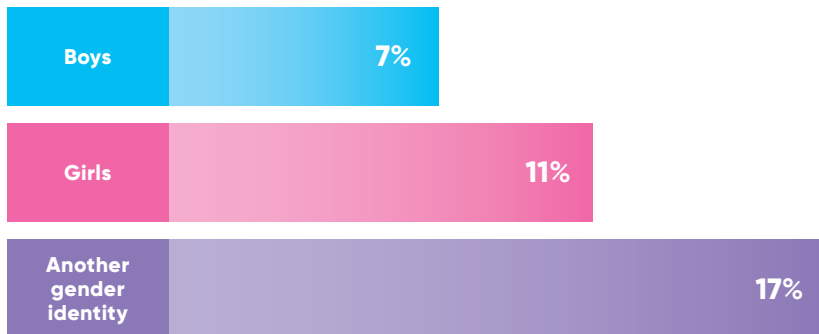
**1%** reported no longer vaping

**Figure 1: Vape use by young people 2014–2025<sup>1</sup>**



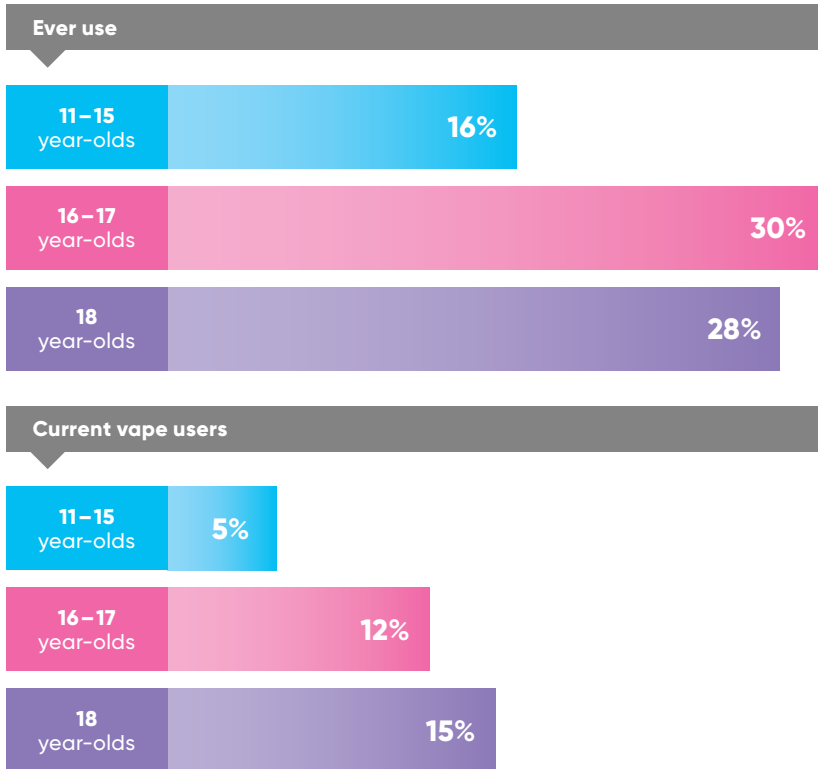
In the 2023 survey<sup>4</sup> 11–15-year-olds were given the option to select *non-binary* or *my gender is not listed* in addition to *male* and *female*. These two new options were combined into one group (*another gender identity*) and a significantly higher proportion of this group said that they currently vaped (17%) when compared to boys (7%) and girls (11%) (see Figure 2).

**Figure 2: 11–15-year-olds reporting having ever vaped by self-reported gender identity<sup>4</sup>**



Broadly, the number of young people reporting 'ever' use and 'current' use of nicotine vapes generally increases with age (see Figure 3).

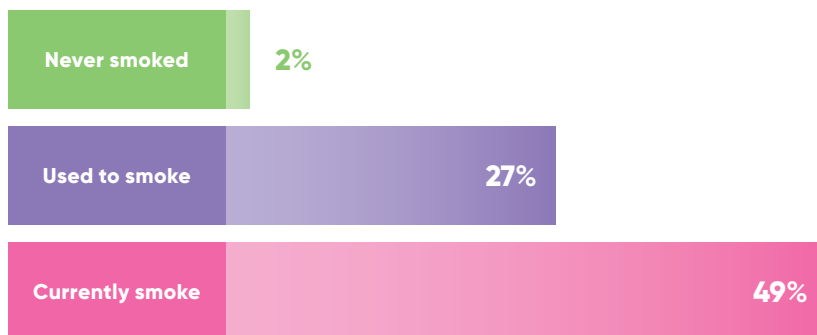
**Figure 3: Vape use by young people by age groups in 2025<sup>1</sup>**



*"Smoking? No, our biggest concern and focus currently is on vaping."*  
Deputy Head Teacher, Secondary school

Since 2021, more young people have reported current vaping than currently smoking. Young people who have smoked or still do smoke, are more likely to vape compared with young people who have never smoked (see Figure 4).

**Figure 4: Vape use by young people by smoking status in 2025<sup>1</sup>**



The proportion of young people who report **never having smoked, but who have tried vaping, increased from 0.7% of 11–17-year-olds in 2021 to 1.6% in 2025** (but down from 2.3% in 2023). Most young people (52%) who have used a vape, and not smoked, report doing so only once or twice.<sup>1</sup>

Dual use of tobacco and nicotine vapes is relatively low and has remained quite stable, with 2.8% of young people reporting currently smoking and vaping.<sup>1</sup>



A fuller review of the patterns and prevalence of vaping in young people can be found here: [www.ncsct.co.uk/publications/young-people-vaping-evidence](https://www.ncsct.co.uk/publications/young-people-vaping-evidence)

## 1.2 Starting vaping and reasons for vaping

**The first vape that young people use**, and the first cigarette that they smoke, **is most likely to be provided by a friend**. Nearly two thirds (64%) of 11–17-year-olds report that they got their first vape from a friend, followed by 10% who say that they ‘took it from someone’.<sup>5</sup>



Survey data are simply ‘snapshots’ of what young people say that they are doing. Patterns of vape use and reasons for vaping are specific to each young person and are dynamic.

One study involving a small young people friendship group found that vape use and reasons for use changed over a relatively short period of time. Initial use was driven by pleasure and social reasons, rather than the nicotine, and many of the young people went on to stop vaping. Those young people who continued vaping went on to report more private use (not socially driven) and because they wanted to reduce their tobacco use.<sup>5</sup>

**In the most recent ASH survey of 11–17-year-olds,<sup>1</sup> the main reasons for vaping were:**

**42%****Just to give it a try****11%****Other people use them so I join in****11%****I like the flavours**



*"Young people have an invincible desire to search for pleasure."*

Deputy Head Teacher, Secondary school

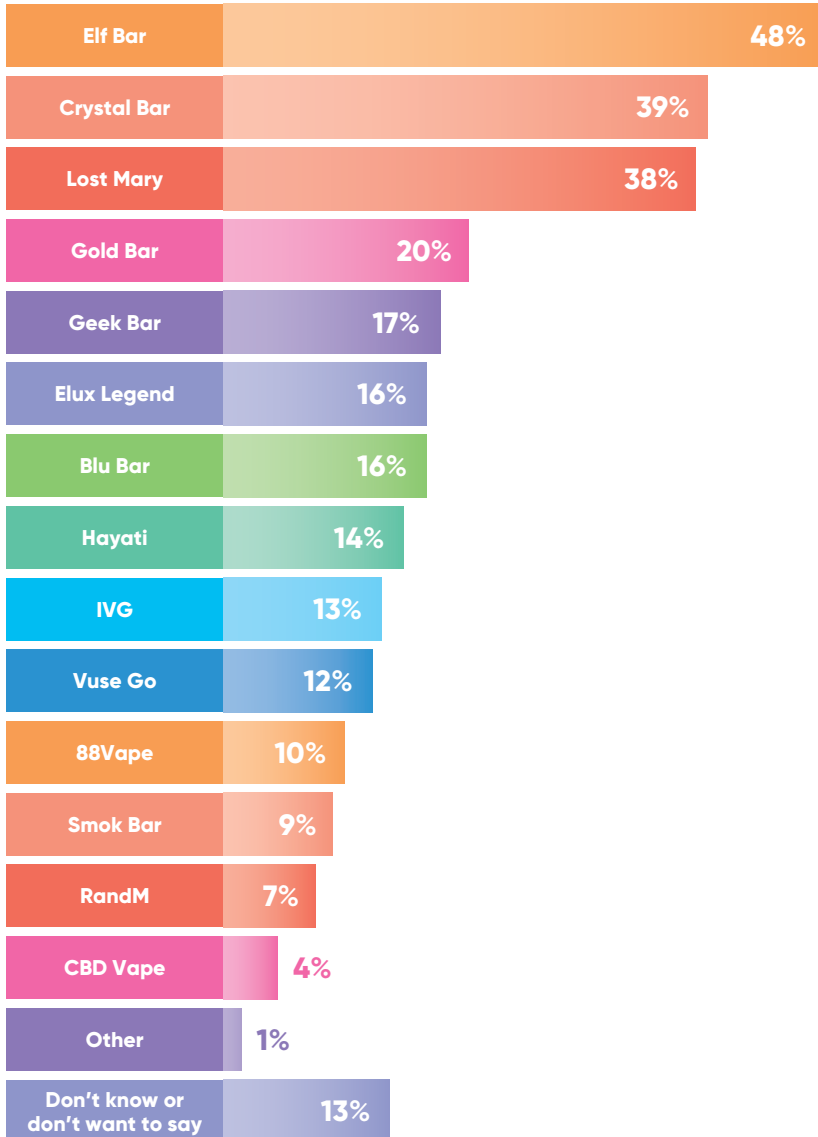


Youth vaping rates were stable for many years in the UK despite a wide array of flavours. Vaping rates increased following the introduction of disposable vapes which were cheap and marketed aggressively. Whilst surveys suggest that flavours are a reason for vaping, it is not the main reason for both young people who have never smoked (5%) or those that have (14%).<sup>1</sup> Evidence suggests that it may be the names or the 'descriptors' of the flavours which are more of an influence in attracting young people who have never smoked.<sup>6</sup>

### 1.3 What young people are vaping

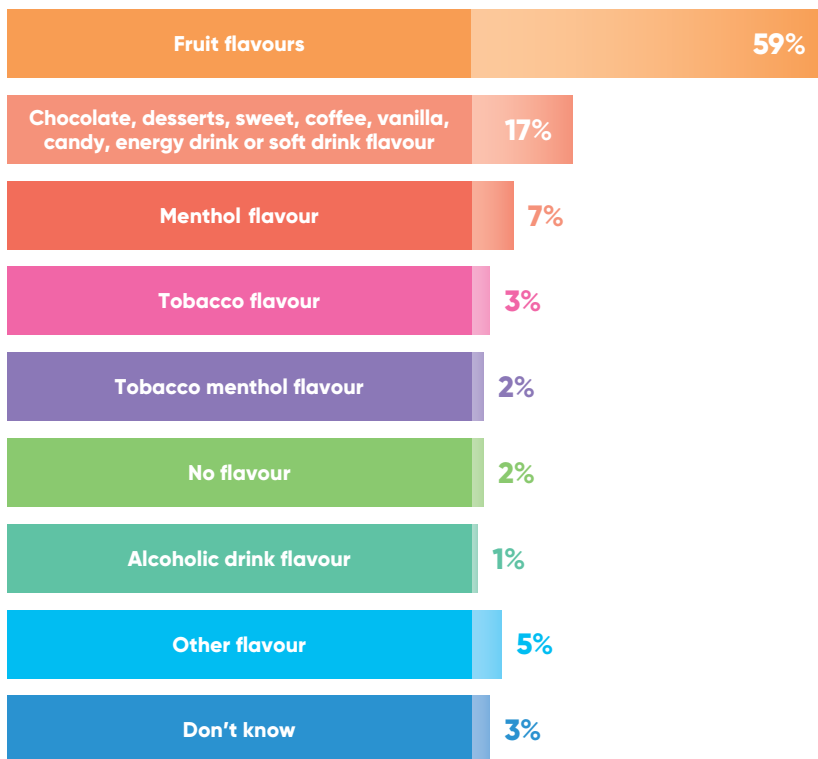
**Single-use (disposable) vapes were the most popular vape device with young people** in the 2025 ASH survey of 11–17-year-olds: 42% reported using single-use vapes, with *Elf Bar* being the most popular brand (see Figure 5). Use of single-use vapes may have peaked in 2023, when use was reported at 69%.<sup>1</sup>

Currently, many nicotine vapes – mainly single-use – are marketed in ways that are appealing to young people in terms of product design, packaging, branding and point of sale display. It is this marketing and availability of single-use vapes which is thought to be a major driver in vaping amongst young people. These issues have been addressed in new legislation (see *Vaping, young people and the law* section).

*Figure 5: Brands of single-use vapes tried by young people<sup>1</sup>*

As is the case with adults who vape, *fruit flavours* are the most popular among young people, with 59% of 11–17-year-olds preferring these, followed by *chocolate, desserts, sweet, coffee, vanilla, candy, energy drink or soft drink flavour* (see Figure 6).<sup>1</sup>

**Figure 6: Most frequently used e-liquid flavour amongst 11–17-year-old current vapers<sup>1</sup>**

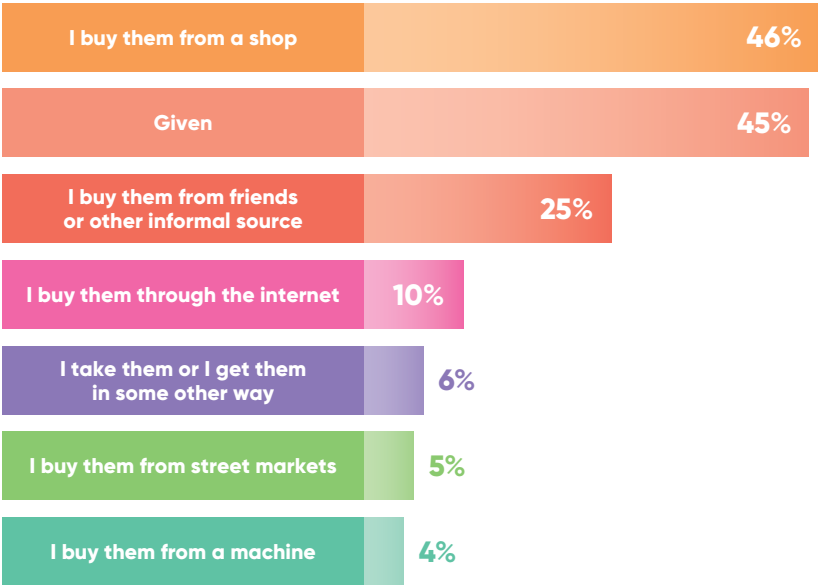


### 1.4 Access to vaping products

Whilst it is illegal for vapes to be sold to under 18s, 71% of 11–15-year-olds reported buying their vapes. In a rapid one-off review of sales compliance by the Chartered Trading Standards Institute, 422 test purchases of disposable vapes were made by young people: illegal sales were made on 145 occasions (33% of purchases).<sup>7</sup>

Figure 7 shows where young people (11–17-year-olds) who currently vape report getting their vapes from: mainly being given them or buying them from a shop.<sup>1</sup>

**Figure 7: Sources of vapes amongst current vape users aged 11–17<sup>1</sup>**





### Illicit vapes

Vaping devices that are not regulated **fail to meet certain product standards** including restrictions on capacity, nicotine strength (the legal maximum is 20mg/ml, equivalent to 2%) and specific and standardised health warnings. **They are illegal.**

More than 6 million illicit vapes were seized in the UK between 2022 and 2024.<sup>8</sup> Because these illicit vapes closely resemble legal products, many young people are unaware that these vaping devices are not regulated. The specific health consequences of illicit vapes are summarised in section 1.7 *Effect of vaping on young people's health.*

*"Young people share vapes, sometimes without knowing their origin or what may be in them. I discuss with them how to spot illegal vapes, such as lacking the standard warning, or not having the CE or UKCA mark."*

Young Persons Stop Smoking Advisor

## 1.5 Vaping and nicotine dependence

**Most young people who try vaping do not get addicted to nicotine.**

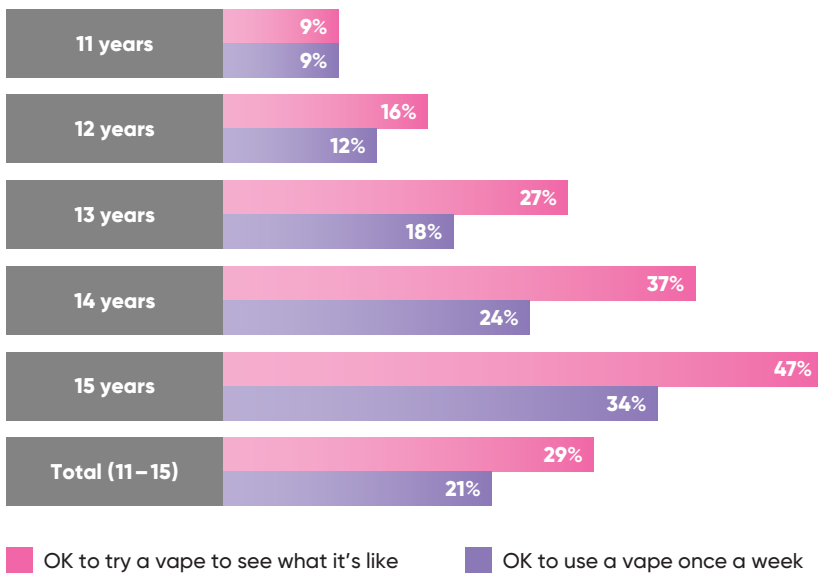
But 47% of 11–17-year-olds who currently vape report *strong*, *very strong* or *extremely strong* urges to vape, an increase from the 26% reporting this in 2020.<sup>1</sup>

Further research on vaping dependence is needed, including by vaping product, nicotine type and strength of e-liquid used. But given that most young people are vaping single-use devices that usually contain the maximum legal concentration of nicotine (20mg/ml), **some level of nicotine dependence amongst young people who regularly vape is likely.**

### 1.6 Young people's attitudes towards vaping and stopping vaping

The majority (96%) of 11–15-year-olds are aware of vapes.<sup>4</sup> Of the young people surveyed in 2023: 29% thought it was OK for people their own age to *try a vape to see what it's like*, and 21% thought it was OK to *use a vape once a week*. The older the young person, the more likely they were to think that trying a vape and vaping once a week were OK (see Figure 8).

**Figure 8: Thoughts of young people, by age, as to whether trying a vape, and using a vape once a week, were OK<sup>4</sup>**

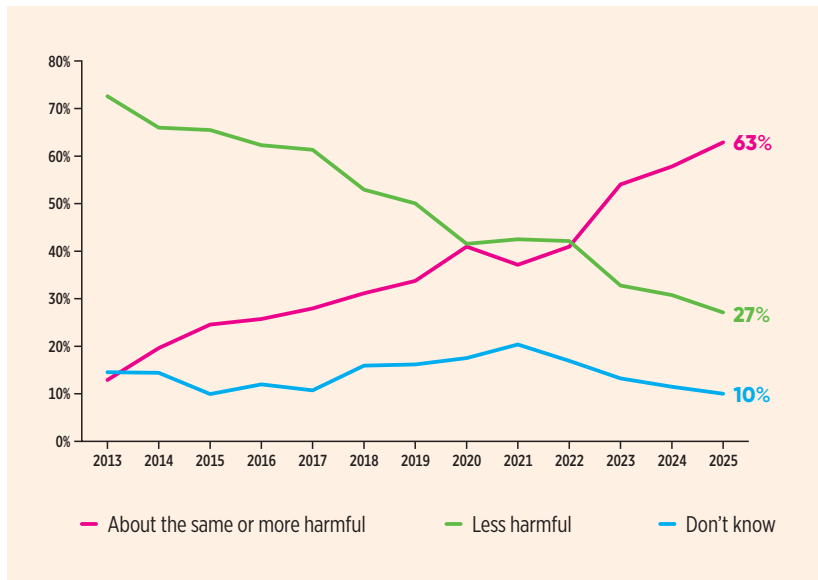




Perceptions of single-use vapes were recently explored through focus groups with 11–16-year-olds in Scotland. 76% of participants had never smoked and 39% of participants had used a vape. Single-use vapes were described as “cool”, “fashionable” and a modern lifestyle “accessory”. As well as flavour, participants described other attractive characteristics, including: the small, compact design; the bright, colourful appearance; and the resemblance to other objects such as highlighters or tins of mints.<sup>9</sup>

Figure 9 shows that, in 2025, 63% of 11–17-year-olds believed vaping was *about the same or more harmful* than smoking cigarettes, and that the proportion of young people who hold this incorrect belief is increasing.<sup>1</sup>

**Figure 9: Young people's views on the harmfulness of vaping compared with smoking cigarettes<sup>1</sup>**



A very high proportion of those who use vapes have inaccurate harm perceptions<sup>1</sup> so believing vaping is harmful does not necessarily mean they won't vape.



**Nicotine is an addictive substance** and this means young people having to find the money for vapes, seeking out places where they can vape and avoiding places where they can't. It can also mean that, when they are unable to vape for a time, they experience withdrawal symptoms such as: low mood, trouble sleeping, irritably, difficulty concentrating as well as strong urges to vape.



More about the evidence on vaping nicotine dependence, attitudes and perceptions to vaping and health effects can be found here: [www.ncsct.co.uk/publications/young-people-vaping-evidence](https://www.ncsct.co.uk/publications/young-people-vaping-evidence)

There has been a significant increase among young people in awareness of vape promotion. In 2025, 55% of 11–17-year-olds reported exposure to the promotion of vapes in shops, an increase from 37% in 2022.<sup>1</sup> Exposure to promotion online was lower (29%), with the most likely places being TikTok (42%), YouTube (33%) and Instagram (30%).<sup>1</sup> The Tobacco and Vapes bill should address this exposure of vape promotion (for more details see the *Vaping, young people and the law* section).



## 1.7 Effect of vaping on young people's health



There is strong evidence that vaping is less harmful than smoking, but it is not risk-free. Vaping devices should not be used by young people, especially those who have never smoked.<sup>10</sup>

The reported short-term effects of vaping<sup>5</sup> include:

- coughing
- dizziness
- headaches
- sore throat

There simply isn't evidence on whether short-term or intermittent vape use by young people can lead to negative health outcomes later in life. There is no current evidence on the potential long-term harms of vaping in the absence of a history of smoking tobacco, and so **the potential health harms of vaping are unknown. But if health harms do develop, we can assume that they are likely to be substantially lower than smoking given that the short- and medium-term impact is less, and biomarkers of harm are less, for vaping versus smoking.**<sup>10</sup>



To address this knowledge gap, some large studies have been funded that will allow researchers to study the long-term health effects, including a 10-year study focusing on young people's health.<sup>11</sup>

*"The ubiquity of vaping at schools and colleges is an understandable daily frustration and distraction for teachers, but while vaping may present a considerable behavioural issue, the evidence of it being a significant health risk is currently lacking."*

Young Persons Stop Smoking Advisor

Young people may interpret **safer as safe**, and they may underestimate the relative health effects of vapes and vaping. Even so, **young people are fairly knowledgeable about the health effects associated with vaping**, even if they then choose to vape anyway.<sup>12</sup>



There is an additional health concern when vape devices are used by young people for consuming illicit substances (e.g. cannabis or spice).<sup>13</sup> The extent to which using nicotine vapes for this purpose is intentional, incidental or accidental is unclear.



## Nicotine and the developing brain

You may have seen headlines about the harmful effects of nicotine on the developing brain. The evidence is far from conclusive and comes mainly from animal studies, studies of how cells react to vape exposure in a lab and epigenetics (changes in how our DNA is read that can impact brain development). **The extent to which these findings can be generalised to humans is unclear.**<sup>14</sup>

In 2020 the Committee on Toxicity of Chemicals in Food, Consumer Products and the Environment (COT)<sup>14</sup> noted that as brain development in humans continues to around 25 years of age, there was the potential for nicotine to have adverse neurodevelopment effects. However, they reviewed the effects of nicotine in adolescents and young adults and found **no data on the direct effects of nicotine in humans.**

What we do know is that nicotine in the form of nicotine replacement therapy (NRT) has been licenced by the Medical and Healthcare products Regulatory Agency (MHRA) for use by young people aged 12+. Messaging around the effects of nicotine on the developing brain is therefore not helpful, it detracts from the effective use of NRT and further demonises the role of nicotine.

However, **nicotine is an addictive substance** and this can result in strong urges to vape and withdrawal symptoms such as irritability, low mood and sleep disturbance if unable to vape. Also, a narrowing of focus which can become all about vaping to the detriment of other things in young people's lives.

## 1.8 Do young people want to stop vaping and what helps?

We certainly shouldn't assume that young people do not have an intention to stop vaping.

**Reasons to stop vaping** include:<sup>15–17</sup>

- health concerns<sup>15</sup>
- financial cost
- dependence<sup>17</sup>

**Barriers to stopping vaping** have also been reported, including:<sup>17,18</sup>

- the social benefits gained from vaping
- using a vape to control stress
- the enjoyment of vaping

The majority of young people who report trying to stop do so unaided or with *advice from a friend*.<sup>19</sup> Young people have also expressed an interest in using various types of support in future attempts to stop vaping, including mobile apps and nicotine replacement therapy (NRT).<sup>19,20</sup>

A Cochrane review of what helps with stopping vaping included only a handful of studies and only one was an intervention for young people (13–17-year-olds).<sup>21</sup> This review suggested that, on the limited evidence available for 13–24-year-olds, text message interventions might help young people to stop vaping compared to no or minimal support.



Peer groups and social norms are important to young people<sup>5</sup> and therefore social support from non-vaping peers may well help with stopping vaping, and staying stopped.<sup>15</sup> Interventions based in schools, or targeting all people who vape in a household or similar social group, may be more likely to be successful in the long term.<sup>17</sup>

Because of the strong stigma against smoking and the desire to dissociate it from vaping, there are concerns that integrating stop vaping interventions within tobacco cessation frameworks will discourage young people from seeking support to stop vaping.<sup>17</sup>

What we do know is that when a young person wants to make an attempt to stop vaping – and many will – we must try and give them the support that they want and, importantly, make sure we give them the support that they need.

*"...there's a lot of people who do want to stop, but they don't want to tell an adult because they might get in trouble. So maybe having someone where you can go and say I'm struggling, that won't say: I'll tell your parents, I'll tell the police, I'll tell... whoever. Someone who will just go: here's the steps you can take to get yourself back on track."*

14-year-old young person

## Part 2: Guidance

We've developed this guidance based upon the very limited evidence available on stopping vaping in adults (let alone young people), upon expert opinion and by adapting good clinical practice from interventions for adults who vape.



Use the information in this section to guide your contact with young people who vape. See what works for you and for them and be prepared to use different approaches for different young people.

### 2.1 Health promotion and creating a non-vaping culture

Health promotion should focus on discouraging initiation, encouraging cessation of both smoking and vaping, and on the health benefits associated with not vaping and smoking. **Communication should warn of the likelihood of developing dependence and explain the uncertainty about the longer-term health effects of vaping.** It may also be worth communicating that most young people do not vape.



The Royal College of Physicians<sup>6</sup> recommends that information on the health risks of vaping should be provided to young people, but that information should be carefully designed so it does not misinform about the relative harms of smoking and vaping, nor deter people who smoke from switching to vaping.



It is important that policies, procedures and the approach of organisations towards young people vaping are supportive and not punitive. Schools excluding or disciplining pupils for vaping, for example, is not recommended.

Young people's vape use, like much of their behaviour, is linked to their social environment and context. Vaping tends to happen within friendship groups and so creating a non-vaping youth-focused environment developing and implementing vape-free places and policies is crucial.

**Young people have reported vape use reduction when access to vapes is restricted and they are made aware of the risks of vaping.**<sup>15,16</sup>

When there are issues with access, including cost and restrictions or inability to purchase products, young people's views on vaping and vaping behaviours change.<sup>9,10</sup> These environmental-type factors (advertising and vape product availability) are aspects which will be addressed with the introduction of the Tobacco and Vapes Bill<sup>22</sup> and the ban on single-use vapes which comes into force on 1 June 2025.<sup>3</sup>

Young people (16–18-year-olds) say that **vaping information, including evidence on health effect, should be communicated by trustworthy and credible sources** such as university institutions and non-government organisations.<sup>17</sup>

An absence of trusted information, particularly around the health effects of vaping, leads to young people seeking information online or from peers<sup>17</sup> which is not necessarily evidence-based or trustworthy.



Consider direct messaging to young people that offers hope. Make sure that the messages aren't judgemental or patronising.

**“Most people don't vape”**

**“You made the choice to vape. It is also your right to make the choice not to vape”**

**“Many young people like you who vaped have managed to stop vaping and stay stopped”**

## 2.2 Very Brief Advice on Vaping (VBAV): having the conversation

Health promotion is a broad approach aimed at all young people whether they have never vaped, have tried it or are currently vaping. But we also **need to consider how to speak to young people individually.**

If you're speaking to a young person about vaping, the chances are that you found a vape in their possession, saw them vaping, or someone else reported them to you for vaping. In the mind of the young person, this creates a negative expectation of what is going to follow.

Your experience of working with young people will have taught you that **simply telling them what to do rarely works**, and that sometimes a direct approach is counterproductive.



Human motivation is fluid, especially in young people, and can shift from moment to moment. Amongst other things, it depends upon where people are, who they are with, what they value and how they are feeling. But it can be influenced, particularly by someone who they trust and that they think is credible.

So, what happens next is **Very Brief Advice on Vaping (VBAV)** which is designed to:

- establish whether they have any concerns about vaping (**ASK**)
- inform them of the risks of vaping and that help is available (**ADVISE**)
- respond to their individual needs (**ACT**)





Very Brief Advice on Smoking (VBA) is a proven method of prompting quit attempts in adults who smoke.<sup>23</sup> We don't have any evidence on the use of VBAV with young people and whether this facilitates an attempt to stop vaping. However, there are similarities between stopping vaping and quitting smoking<sup>17</sup> and VBA has been adapted for use with various health behaviours. We propose it as a useful framework to help you intervene with young people.

## ASK

**You can simply ask:**

*"Is there anything that worries you about vaping?"*

or

*"How do you feel about vaping?"*

or

*"What do you think about vaping?"*

### Rationale

The good thing about this question is that it allows the young person to raise their concerns, whether about their own vaping or vaping by friends or family, and allows you a way in to establish whether they are vaping, what they are vaping and what is important to them.

## ADVISE

You can tailor what you say next dependent upon how the young person responded to your initial question, but it might be something along these lines:

*"Although vaping is less harmful than smoking cigarettes, it is not without risk. Most people who regularly vape become dependent upon nicotine, and it is likely that in the medium to long term there may be damage to your lungs. Even in the short term, young people who vape report coughing, headaches and sore throat."*

And then you offer hope and help:

*"I've seen young people just like you who have stopped vaping and stayed stopped. There are things that can be done to help you, would you like to hear about them?"*

### Rationale

To encourage the young person to change their behaviour, they need to know that it is possible and that people like them have stopped vaping. They also need to know that help is available and what it looks like.



With young people who are smoking **and** vaping you could suggest:

*"If you are going to stop anything, stop the cigarettes first. Then, when you are sure you're not going to smoke again, you can look at stopping vaping."*

## ACT

**You now act depending upon how the young person has responded to your offer of help.** What you say and do also depends upon whether they are concerned about their own vaping, or that of friends and family.

If they show **no interest in stopping vaping** now, you can simply say:

***“That is your choice, and I respect that. But I remain concerned about how vaping might harm you and so I will be asking you about it in the future. If things change, you can always come and see me to talk about the help available.”***

### Rationale

It is perhaps best not to think of VBAV as being a one-off intervention. It is rare that single interactions can bring about behaviour change. Also, attempts to stop often end up with a return to vaping and so you want the young person to feel able to come back and see you in the future should they need to.

**Note:** other options on how to ACT in response to a young person not interested in stopping vaping are discussed in the next section.

If the young person **does express an interest in stopping vaping**, you can move on to supporting them to stop, which is covered in the next part of this briefing (see page 39 2.3 *Supporting a young person to stop vaping*).

### Rationale

You will want to act on the young person's decision to stop vaping as quickly as possible, before their motivation weakens or they change their mind.



If a young person is vaping **and** smoking, or is vaping to prevent them smoking, then there is always a delicate balance to be struck between supporting them to stop vaping and ensuring that they do not return to smoking tobacco.

## Very Brief Advice on Vaping (VBAV)

This example assumes that the young person is vaping and that their main concern is about their own vaping.

### ASK

an indirect question to establish whether they are vaping.

*"Is there anything that worries you about vaping?"*

### ADVISE

dependent upon what the young person answered to your first question.

*"Vaping is less harmful than smoking cigarettes, but it is not without risk. There is a risk of becoming dependent on nicotine vapes and there is a risk that in the long term there may be damage to your lungs. Even in the short term, young people who vape say that they notice coughing, headaches and sore throat."*

and then you can offer help and hope.

*"I've seen young people just like you who have stopped vaping. There are things that can be done to help you, would you like to hear about them?"*

### ACT

on the young person's response.

#### INTERESTED

Build confidence and give encouragement.

*"Well done, I admire your decision and I'm sure that you will be able to do it."*

The help available will depend upon what is available locally, and it may well be you doing the supporting.

#### FOLLOW UP

Check on progress whenever you see the young person and offer encouragement.

#### NOT INTERESTED

*"It's your choice of course. Help will always be available and you can always return to see me."*

Ensure the young person understands where to find more information and support.

#### REASSESS

Repeat VBAV at the next appropriate opportunity.

## Support to stop vaping

There is currently no evidence on which is the most effective method to stop vaping for young people. The decision on what's best will be driven by availability and what the young person wants. Options, in no particular order, include:

- direct support from you or a colleague with interest in, and experience of, helping young people to stop vaping (possibly including use of NRT)
- direct support from a specialist youth vaping agency (possibly including use of NRT)
- digital support
- self-help



### Assessing vaping nicotine dependence

We have not come across a clinically-validated tool for assessing nicotine vape dependence in young people. The two measures for adults that are most used for research are the Penn-State Nicotine Dependence Index<sup>24</sup> and the E-cigarette Dependence Scale (EDS)<sup>25</sup> (available as short or longer versions).

These and other scales are not a perfect measure of nicotine dependence in adults, let alone in young people with different patterns and intensity of use.

Whatever vape nicotine dependence measure is used for young people, it should assess nicotine strength of e-liquid, frequency of vape use, urges to vape, withdrawal symptoms and the social context of their vape use.

A summary of the measures available, including the two mentioned above, and links to the assessment tools themselves, where available, can be found here: [www.ncsct.co.uk/publications/young-people-resources-vaping](http://www.ncsct.co.uk/publications/young-people-resources-vaping)

### 2.3 Supporting a young person to stop vaping

Having delivered Very Brief Advice on Vaping (VBAV) to a young person who then expresses an interest in stopping, **what next?**

What you do next **will of course mainly depend upon what the young person wants and needs, and what support is available locally.**

Young people might be ambivalent about stopping vaping, their motivation might fluctuate, and they may think that they do not need help.

**Whatever you do next, do it quickly.**



Most of the focus with young people is largely on preventing uptake of vaping rather than interventions to support them to stop vaping. There is no widely accepted standard programme of support for vaping cessation for young people.



The support for young people that we propose may not all be based on the very strongest evidence, but it is grounded in the evidence that we do have on young people, vaping cessation and what young people themselves say will be useful, as well as on current practice in working with young people and vaping.

More about the evidence on what is effective in helping young people to stop vaping can be found here: [www.ncsct.co.uk/publications/young-people-vaping-evidence](http://www.ncsct.co.uk/publications/young-people-vaping-evidence)

**Stopping vaping is achievable and many young people manage it without too much trouble.** The level of support provided will be dependent on the individual young person and their specific needs, social context, reasons for vaping and nicotine dependence.

**Support should be proportionate to the needs of the young person.**

For example, there may be differences in the nicotine dependence levels of young people with and without a history of tobacco smoking and this will influence the level of support needed for them to stop vaping.

**Direct support from you or a colleague with interest in, and experience of, helping young people to stop vaping (possibly including use of NRT)**

In the absence of specialist support services for young people to stop vaping, you might need to offer support within your organisation.



You don't have to do this alone. Find out who else locally is helping young people to stop vaping and arrange to get together to discuss what you find does and doesn't work. Link with local, regional and national networks to increase your knowledge and to learn from the experience of others.

The NCSCT will add useful resources and the latest evidence reviews here: [www.ncsct.co.uk/publications/category/young-people-stopping-vaping](http://www.ncsct.co.uk/publications/category/young-people-stopping-vaping)

You can base the support that you provide on the elements of behavioural support summarised in section 2.4 *What behavioural support looks like*. As well as knowing what behavioural support for stopping vaping by young people looks like, it is worth familiarising yourself with the use of NRT in case this is appropriate.





## Deciding whether to use NRT

### **NRT could be an option if:**

- using behavioural strategies to stop vaping is not proving effective
- behavioural support is difficult to maintain
- the young person is experiencing clear signs of nicotine withdrawal symptoms
- the young person is at risk of relapse to smoking
- it can be provided by specialist service
- solutions can be found to any school restrictions on use during the day

NRT is licenced for use in those over 12 years of age and could be used to replace the nicotine from vapes in those that show signs of nicotine dependence, regardless of whether they have ever smoked. All Nicorette NRT products (gum, patches, inhalator, nasal spray, mouth spray, microtab and lozenges) are now licensed for use in nicotine dependent vapers from the age of 12+ where appropriate, to provide relief from cravings and support stopping vaping. However, there is no independent evaluation of their effectiveness as vaping cessation aids in adults, let alone in young people.

### **NCSCT briefing on NRT and Young People:**

[www.ncsct.co.uk/publications/nrt-young-people](http://www.ncsct.co.uk/publications/nrt-young-people)

### **NCSCT Stop smoking aids quick reference sheet:**

[www.ncsct.co.uk/publications/stop-smoking-medications-quick-reference](http://www.ncsct.co.uk/publications/stop-smoking-medications-quick-reference)

## Direct support from a specialist youth vaping service (possibly including use of NRT)

During the writing of this briefing, we uncovered several areas developing youth vaping cessation services and we will summarise, and build a library of, these here:

[www.ncsct.co.uk/publications/young-people-vaping-case-studies](http://www.ncsct.co.uk/publications/young-people-vaping-case-studies)

### It's possible that in your area you may:

- have an existing service that specialises in helping young people to stop smoking
- have a Local Stop Smoking Service that provides a stop vaping service for adults and has a dedicated worker helping young people to stop vaping
- be developing a stop vaping service for young people



We would expect all these services to provide a support programme like that described in section 2.4 *What behavioural support looks like*, and to have the option for young people to use NRT to aid their stop vaping attempt.

Referral to a specialist service may not always be available, necessary or appropriate. We know that stop smoking practitioners working with adults may not have the confidence or experience in working with young people.<sup>26</sup>

## Digital support

Digital interventions show promise in supporting vaping cessation in young people, and support via text messaging is a preferred method mentioned by young people themselves.<sup>15</sup>



### What a good stop vaping app might look like

We asked Dr David Crane, creator of the world's best-rated and most popular stop smoking app (Smoke Free) what he would look for in an app to help young people stop vaping. He said:

***"I'd want to see what I'm gaining from stopping vaping. Resisting temptation can be hard, seeing the gains makes the effort feel worthwhile."***

Characteristics of an effective stop vaping app for young people are likely to include:

- progress indicators  
(time vape free, money saved, liquid not vaped)
- easy ways to see how your use is changing over time
- tips and techniques for reducing nicotine strength in the liquid
- a supportive and non-judgemental community
- personalised support from trained experts

## Self-help

Self-help could be as simple as giving young people written materials containing tips on stopping vaping (see 2.4 *What behavioural support looks like*). This might be suitable for young people who are not particularly dependent upon vaping, or if you are only able to offer single-session support rather than ongoing support during the young person's attempt to stop.

You might also come across websites or social media channels where there is credible and sensible advice on stopping vaping.



It is going to be worth you spending time reviewing sources of advice on stopping vaping for young people – as not all will be reliable or helpful – so that you can recommend which ones young people look at. The NCSCT and ASH websites are good places to start.

## 2.4 What behavioural support looks like

*Behavioural support* is a technical term for a collection of interventions, things that you say and do, to help the young person achieve their aim of stopping vaping. It is partly about letting the young person know that they do not need to go through this alone and that they will get support, information and advice on what other young people have found useful.



### **When helping young people who want to stop vaping, we should:**

- recognise that there are unique trajectories of vaping among young people and that, if their trajectory includes current or past smoking, this will inform our approach
- work with young people's own motivation to stop
- acknowledge the complexities of young people including social influences, peer groups, family circumstances, potential mental health issues and co-use of other substances, particularly cannabis
- understand that vaping by young people is a social activity as well as a means of nicotine delivery

## Exploring



1. Why the young person is vaping and what the social context of their use is. What do they experience when vaping, when do they vape and who with?
2. What they are vaping (type of device, strength of nicotine) and where they get their vapes from? Advise against using illicit vapes.
3. Current, or history of, smoking. Stopping vaping whilst also smoking (dual use) might risk continued smoking.
4. Patterns of vape use to determine levels of nicotine dependence and the young person's own understanding of nicotine dependence. How often do they experience urges to vape? Explain what nicotine dependence is and how it reveals itself.
5. Use of other substances such as alcohol and cannabis in the context of their vaping. Do they also vape THC/cannabis? Do they drink alcohol and vape?
6. Whether there are any mental health issues or underlying behavioural problems which could influence or support vape use, e.g. anxiety, ADHD. Ask about general health and wellbeing and their ability to cope, and whether they are using a vape for this purpose.
7. The young person's knowledge and awareness of the health harms associated with vaping and the role of vapes as a smoking cessation tool for adults who smoke.

## Stopping



Here are a number of strategies which, in some cases, have been shown to be both effective and endorsed by young people:<sup>27</sup>

1. See if they can team up with someone else who is also trying to stop, supporting each other on a regular basis.
2. Set a stop date (and time) after which the young person will commit to not vaping at all, not even one puff on a vape.
3. Suggest that the young person gets rid of all their vapes and e-liquid safely. If they are unable to commit to this, suggest that they give it to someone else to look after so that it is not easily available to them.
4. Inform the young person about nicotine withdrawal and that, whilst everyone's experience will be different, knowing what to expect can help manage these symptoms, which will not last long and will disappear if they do not vape.
5. Discuss how to deal with urges to vape, including avoiding places where people vape, distraction activities and the use of NRT, if appropriate.
6. Advise the young person to inform, and seek support from, friends and family.
7. Discuss with the young person whether they expect peer pressure to continue vaping and how they might deal with this.
8. Encourage the young person to reward themselves (which can range from a silent "well done" to a gift or treat for themselves) for the small wins such as even just resisting an urge to vape.
9. Ask the young person whether there is anything else that they want to talk about.
10. Summarise what their plans are and ask them to commit to the plan.
11. Congratulate them and wish them luck.



Young people stopping vaping who previously smoked, or who are also smoking, should be reminded that vaping is less harmful than smoking. It is important that their attempt to stop vaping does not lead them to return to, or continue, smoking.

## Following up



In all cases young people should be regularly followed up (at least weekly initially) to see how they are getting on. Follow-ups should check whether they have stopped vaping completely, are still occasionally vaping, or whether they have returned to smoking cigarettes or have substituted vaping with other forms of unregulated nicotine use (e.g. nicotine pouches). Respond appropriately.

1. Remind the young person of their intention to stop vaping and the benefits that this will have.
2. Congratulate the young person on their achievements and encourage them to keep on going.
3. Explore what has gone well in the previous week and what the challenges were.
4. Discuss how they have managed any urges to vape and consider use of NRT, if appropriate.
5. Look at the week ahead and any high-risk situations and discuss how the young person might manage them.
6. Ask the young person to re-commit to not vaping in the coming week and boost their motivation by encouraging them and saying that you're looking forward to seeing them and hearing that they've been vape-free.



## Maintaining



Young people often need to make several attempts to stop vaping – relapse is common. It's a tricky balance to strike, but at the last planned follow-up appointment you need to leave them with the belief that you think that they will continue to be vape-free, whilst leaving the door open for them to return should this not be the case.

It might be useful to encourage seeking support from non-vaping peers at times when they feel like vaping, and creating non-vaping cultures and environments will help.

## Gradual reduction

For some young people, stopping vaping abruptly might be too difficult or too daunting. Cutting down on nicotine vaping gradually can make stopping easier. It allows the body time to adjust to lower nicotine levels and gives the young person confidence that they can control their vaping. Gradual reduction is the preferred method of stopping vaping by young people.<sup>15</sup>

It is important to retain the goal of stopping vaping completely and to regularly check in with the young person to see how they are progressing. Gradual reduction can be done in a number of ways.

### ■ Taking a break from vaping

Encourage the young person to increase the amount of time between vaping so that they vape less, and to increase this time once they are comfortable with their new routine, say every week or so. They could, for example, start vaping later in the day and finish vaping earlier in the evening.

### ■ Restricting time of vaping

Advise the young person about setting limits on where and what time of day they do and do not vape, which will reduce the habitual behaviours associated with use. They can also vape for a shorter time when they do use their device.

### ■ Creating vape-free spaces

A different method of restricting vaping includes picking places where the young person won't vape (e.g. at school, in their bedroom). They can be encouraged to expand these areas every week.

## Part 3: How to respond to concerns about young people and vaping

### 3.1 Questions young people might ask about stopping vaping

**Q I'm worried that if I stop vaping, I'll lose my friends as they all vape**

**A** It's hard when a lot of your friends vape, but you can still be friends with them and not vape. It's not that you're telling them that they're wrong, you're just choosing to do something different. Do you think any of your friends would consider stopping vaping with you?

**Q Is vaping as bad as smoking in terms of harm?  
My dad used a vape to quit smoking!**

**A** Vaping is not risk free, but it is less harmful than smoking. Evidence shows that vapes are an effective aid to giving up smoking.

**Q I smoke and vape. I've heard so much about how bad vaping is, even my mum says that I might as well keep on just smoking when my vape has run out.**

**A** Sometimes it feels like we have lost sight of the fact that smoking is more harmful than vaping. If you are going to stop anything, stop the cigarettes first and then, when you are sure you're not going to smoke again, you can look at stopping using a vape.

**Q I don't think vapes are as addictive as cigarettes so why is it a problem?**

**A** Using nicotine in any form can lead to dependence and this can be problematic. When you get regular doses of nicotine from vaping, you may find it difficult to get through the school day, or even a single lesson, without needing a top-up of nicotine from your vape.

Visits to the cinema, indoor music events and travelling on public transport where vaping and smoking aren't allowed may start to become something of an ordeal if you can't vape. Have you noticed this?

**Q Vaping helps me feel relaxed, especially when I'm stressed or anxious. I'll miss that if I stop.**

**A** When you vape, you get a dose of nicotine which then reduces over time until you next vape. This regular need to top up the nicotine may be felt as irritability, anxiety, restlessness and strong urges to vape. When you stop vaping these highs and lows of nicotine stop, and this can help you feel less stressed. We can look at other less risky ways that can help with stress.

**Q I'm worried that I'm vaping all the time, what should I do?**

**A** Worrying about vaping all the time is a good motivator for starting to set limits. This is a very normal way of curbing behaviours that worry us, such as too much phone use, or snacking on chocolate and crisps.

We can talk about how you can develop some helpful ways to start to reduce vaping, such as keeping your vape in a drawer and not your pocket, asking someone to keep your vape for you, setting the times in the day when you'll vape and setting vape-free areas for yourself, like your bedroom or garden.

### **3.2 Questions that colleagues, parents and carers might ask about stopping vaping**

**Q How do I talk to a young person about their vape use?**

**A** As with every other 'serious' conversation with a young person, it is best to be clear, calm, non-judgemental and to listen more than you talk. Be prepared to have the conversation in several stages, so that you don't overwhelm them and shut down the conversation.

Asking how they feel about vaping in general, what they hear from other people and what others are doing may be a good introduction rather than focusing on their behaviour. Thank them for being honest with you and make it safe for them to tell you the truth.

Make sure you have the facts straight yourself before you begin. The factsheet below is a useful starter.

Addressing common myths about vaping (ASH):

<https://tinyurl.com/ASH-vaping>

**Q How do I deal with resistance to stopping vaping from a young person who has been referred via school, or under the pressure of a parent?**

**A** No one can compel a young person, or an adult for that matter, to stop smoking or vaping. You can use open-ended questions to explore what has been said by the school, or by parents, and try and better understand what is going on in the dynamics between the people who are worried about the young person and the individual themselves. You can try and tease out the thoughts and feelings behind the resistance to stopping, but this may be a slow process; the more you try and make it an urgent matter, the more the walls are likely to go up. Take it slowly and assure the young person that you will continue to be there to listen to them.

**Q If vapes contains nicotine, does it count as smoking?**

**A** Vaping is not smoking. A vape produces vapour, not smoke. You do not smoke a vape. It's important to get the language right, so as not to confuse people who need to stop smoking tobacco.

Tobacco smoke contains tar, carbon monoxide and many other toxins which cause cancers, lung disease and heart disease.

This affects not only the person smoking, but also those around them who are affected by secondhand smoke.

Vaping does not involve burning anything and so it is less harmful than smoking. Current evidence suggests that short-term exposure to secondhand vapour is not harmful to health, although it is possible that regular exposure to people vaping indoors for long periods of time carries some low-level risk. Any potential risks from passive vaping are likely to be significantly lower than the proven harms from passive smoking.

**Q I was told that my son could go to the Stop Smoking Service to get help to stop vaping, but they said they couldn't give him anything.**

**A** Stop Smoking Services are set up to help people who smoke tobacco. Some will give support to people who vape and some will provide quit aids, but many are not set up to support young people to stop vaping. This briefing will give you some guidance on how to support your son and the use of nicotine replacement therapy that might be of benefit to him.

**Q What are the characteristics of a young person who vapes regularly?**

**A** Generalising about this risks ignoring the circumstances of each individual young person.

We do know, however, that among young people who vape regularly, there are likely to be higher numbers who were smoking previously and who use nicotine (and possibly other substances) to manage their lives, those with school anxiety and other mental health conditions, those in looked-after children's services, those whose families have difficult financial circumstances and young people who are frequently in detention at school. This makes it doubly important to use resources that are relatable by disadvantaged groups of young people, not just the receptive groups.

**Q Isn't vaping a gateway into smoking?**

**A** There is no evidence to suggest that vaping acts as a gateway into smoking. It's likely that there is a connection between vaping and smoking, but studies show correlation and not causation. Young people who try stuff tend to try other stuff, so we can expect to see a range of substances being experimented with. We are seeing rates of vaping in young people rising, if it were causing young people to start smoking, we'd expect to see rates of young people smoking also increasing, and this has not happened.

**Q I'm worried that my teenager might be using illegal vapes that have been spiked with other substances. What can I do to protect them?**

**A** This is a very real concern. If we were talking to an adult, we would emphasise that the safest way to buy a vape is to go to a specialist shop, rather than a mixed goods shop where illicit vapes may be sold. As you know though, the sale of vapes to someone under 18 and proxy buying (buying a vape on behalf of a young person) are unlawful.

The biggest risk of spiking is probably when vapes are exchanged between young people, either because someone has asked for 'something extra' in their vape, or for a laugh.

Tell your teenager that there is no way of knowing the contents or the risks of taking a vape from someone else and that, for their own protection, this is very unwise.

**Q I have been showing young people the front-page article about the teenager who ended up on life support because of vaping to get them to stop.**

**A** Sensationalist articles about vaping generally don't tell the whole story, because that would make less interesting reading. On further investigation, these stories are often found to be inaccurate and leave out important details like tobacco smoking, illegal drug use or underlying health conditions that caused the unfortunate person to become ill.

It's important to remember too that correlation (something happening at the same time) is not the same as causation (a direct result of the use of a substance) and that most people who vape and become ill have a history of past or current smoking.



**Q I've recently become aware of some young people putting nicotine pouches in their mouths; should I be worried about this?**

**A** Nicotine pouches are small wads of cellulose impregnated with nicotine and flavouring. They should not be confused with snus, or other tobacco pouches, which contain pasteurised powdered tobacco, and are illegal in the UK. Nicotine pouches are only covered by general product safety regulation and have no age-related legislation. This means that nicotine pouches currently do not fall under any legal limits for nicotine or other substances, may contain high levels of nicotine, and can legally be sold to young people. Young people may be using pouches experimentally, they may be using them to stop smoking or vaping, or they may have taken up the habit but now find themselves dependent on the product. Given their potentially high nicotine content and the susceptibility of adolescent brains to the addictive effects of nicotine, young people should not use nicotine pouches. The Tobacco and Vapes Bill will ban the sale of all nicotine products to under 18s as well as bring them into the legislative framework that will apply to vapes.

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