

# Vaping

What Schools can  
do to Help Our Kids

Prepared by

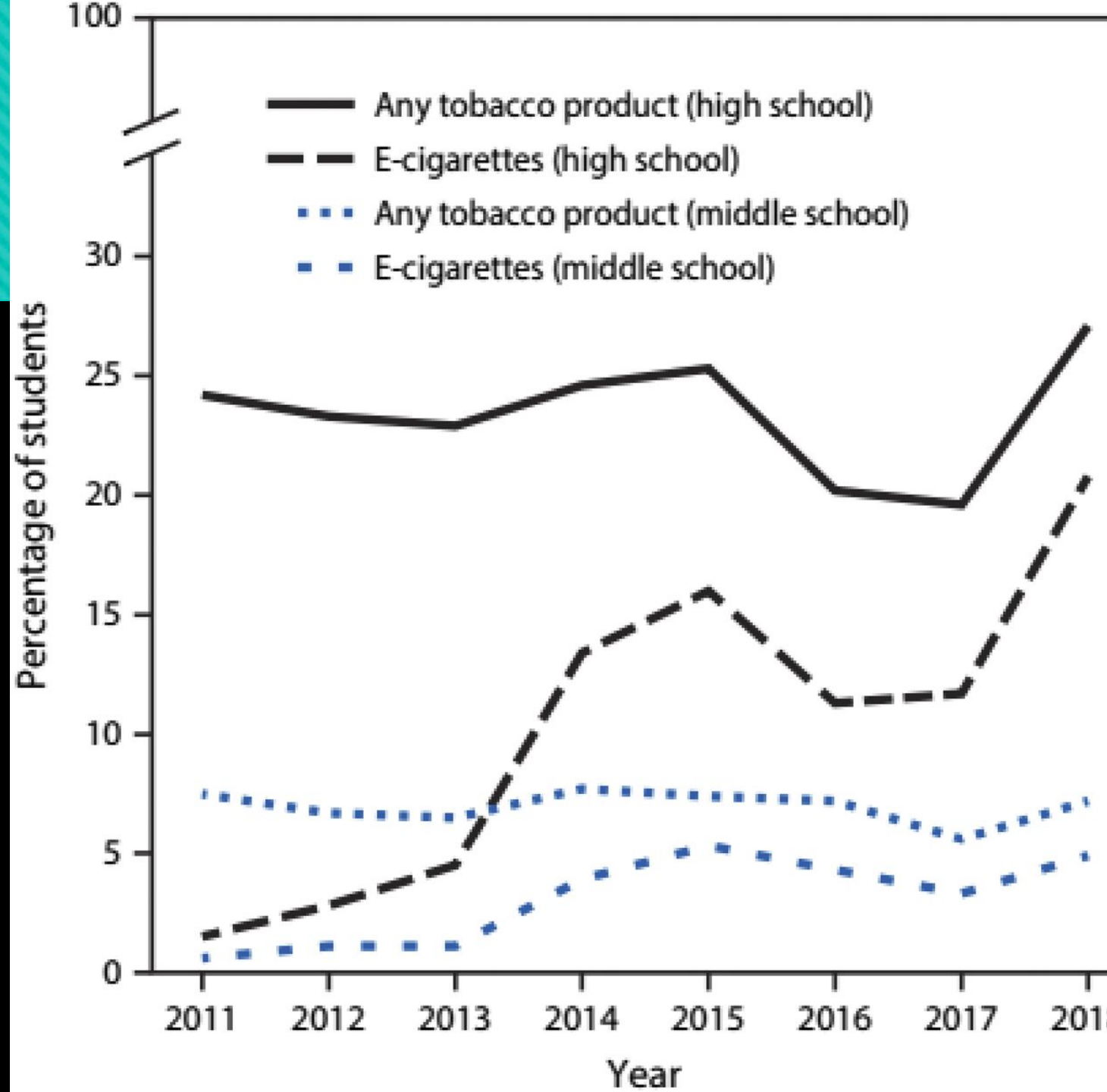
Deborah Hagler MD FAAP

President Elect

Maine Chapter AAP

# The Scope of the Problem

- 1/3 of HS students using any tobacco product [1]
- Lifetime prevalence e-cigarette use 45% among Maine HS students with 29% reporting past 30-day use [2]
- 11.7% 12<sup>th</sup> graders using e-cigs daily [3]
- Patterns of problematic use clearly emerging - 21% of e-cig users at out-patient clinic in NY reported addiction [4]





# Why Is this a Problem

- E-Liquids contain toxins - Lead, Nickel Cadmium, Acrolein [5]
- E- Liquids chronic effects on lungs just beginning to be understood [6]
- Nicotine often highly concentrated / highly addictive [7]
- Nicotine affects multiple systems in the body including cardio-vascular system, immune system and GI system [7]
- Concerning effects on mood and learning, especially in the developing brain [8]
- Increased risk of developing other substance use disorders [9]
- Increased risk of switching to combustible cigarettes / dual use [10]

# Why are Kids Using

- Curiosity [11,12,13]
- Friends Using [11,12,13]
- Relax [11,12,13]
- Feel Less Stressed [11,12,13]



# Are The Kids All Right

- National Institute of Mental Health reports lifetime Prevalence of Anxiety Disorders is 32% in Adolescence [14]
- 2018 Survey by the American Psychological Association - youth ages 15-21 were the least likely to report they enjoyed good mental health [15]
- 2005-2017 (National Survey of Drug Use and Health) 52% increase in rate of major depression episodes in youth aged 12-17 from 8.7% to 13.2% [16]
- Suicide Rate in Youth has essentially doubled since 2000. Suicide is second leading cause of death for youth aged 10-24 [17]
- Youth distress, anxiety, depression risk for use e-cigarettes and traditional cigarettes [11]





# Are The Kids All Right

- In Maine 32% HS students felt sad or hopeless in last 2 weeks [2]
- 23% HS students bullied in last year at school [2]
- 25% MS students sad or hopeless in last 2 weeks [2]
- 46% MS students reported ever being bullied at school [2]





# Use to Dependency- UCSF/Stanford study Looking at ENDS 2/2019 [18]

- 173 (13-18yo) mean 16.6 - 10 lifetime uses ENDS
- 80.3% still using 12 months later
- Daily use 14.5% at beginning - 29.8% after 12 months
- Only ENDS at start- 28.8% also using combustibles
- Dependence scores at baseline 13.3 %- at end increased 23.3%
- Dependence scores and cotinine levels increased over time
- The ~ 20% who quit site desire for self- improvement; difficulty/cost maintaining device; getting in too much trouble.



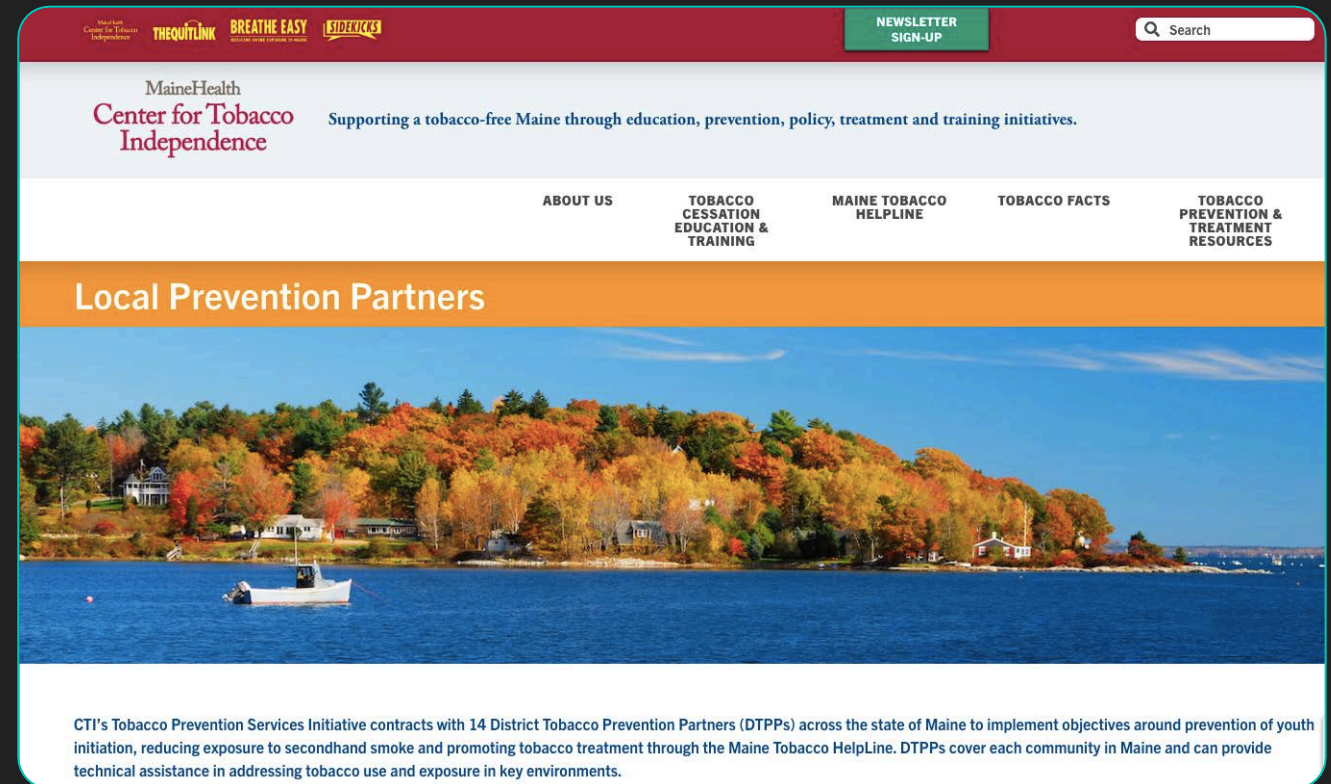
# What are Schools to Do

- Primary prevention - incorporating strategies that acknowledge some of primary reasons for use (stress / relaxation /social experience with friends)
- District Tobacco Prevention Partners
- Positive Youth Development
- Stress Reduction Strategies
- Youth Mental Health First Aid



# District Tobacco Prevention Partners

- Can help curate prevention programs: Catch My Breath Stanford Tobacco Prevention Tool Kit
- Link schools to written resources
- Help with programming
- Link to cessation resources



**CATCH**® MY BREATH

# YOUTH E-CIGARETTE & JUUL PREVENTION PROGRAM



CATCH My Breath is a best-practices youth E-cigarette and JUUL prevention program developed by The University of Texas Health Science Center at Houston (UTHealth) School of Public Health. The program provides up-to-date information to teachers, parents, and health professionals to equip students with the knowledge and skills they need to make informed decisions about the use of E-cigarettes, including JUUL devices. CATCH My Breath utilizes a peer-led teaching approach and meets National and State Health Education Standards.

**AGES** 10-18 YEARS  
(GRADES 5-12)

*Can be taught in one or  
multiple grade levels*

**DURATION** FOUR LESSONS PER VERSION  
30-40 MINUTES EACH

3 VERSIONS

5<sup>th</sup>/6<sup>th</sup>  
Grade

7<sup>th</sup>/8<sup>th</sup>  
Grade

9<sup>th</sup>-12<sup>th</sup>  
Grade

**COST** FREE

*Thanks to support  
from CVS Health*

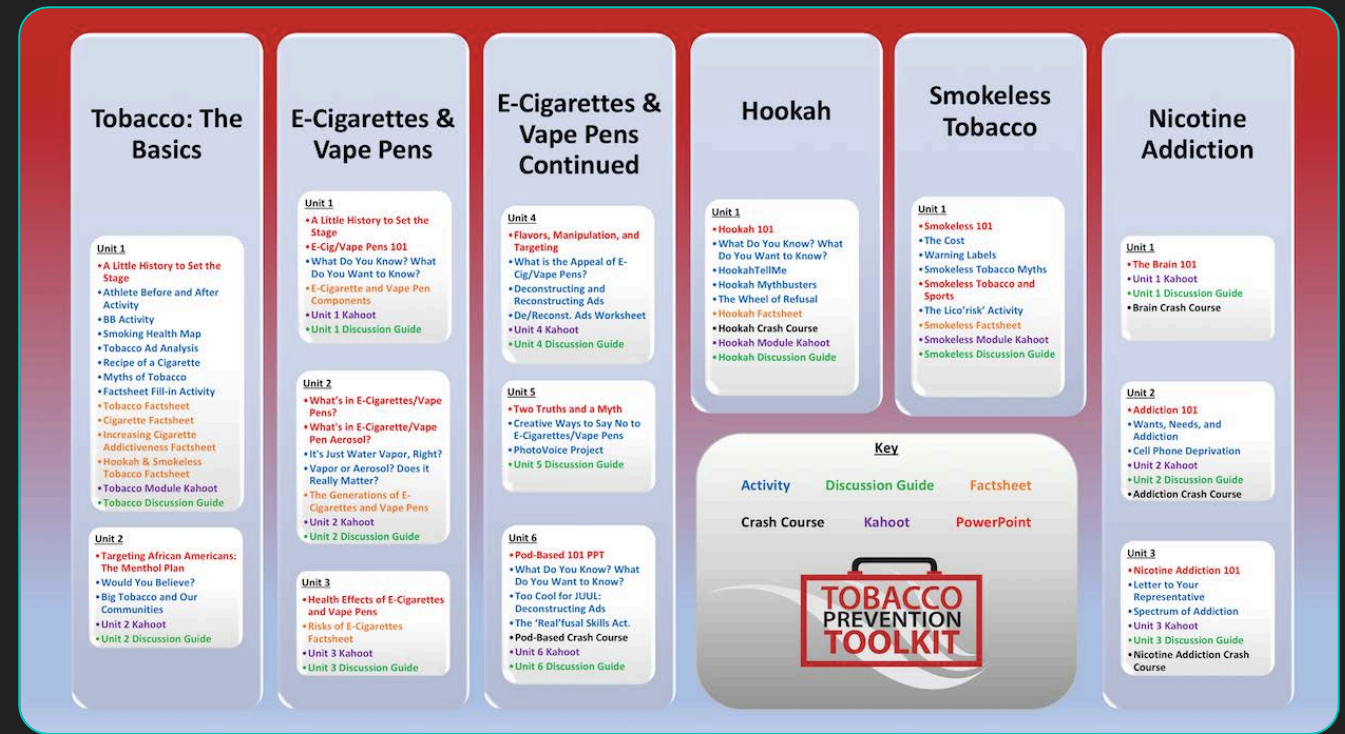
## Catch My Breath

- Free - Funded by CVS Foundation
- Four 30-40 minute sessions
- Curriculum for 5-6<sup>th</sup> grade/ 7-8<sup>th</sup> grade/ 9-12<sup>th</sup> grade



# Stanford Tobacco Prevention Tool Kit

- Exhaustive
- Resource page very helpful to tailor programs
- Prepared power points on e-cigarette risks / addiction, etc...
- Interactive materials; quizzes; videos
- Teachers Guides from Scholastic/NIDA
- Includes cessation materials



# For Youth Found Vaping On School Property

- No suspension practices recommended
- Athletes participate in school suspension/ lose play time.
- Confiscate device
- Notify parents
- Assess usage - school nurse/clinician assess amount/dependence on nicotine, reasons for use/other problems, willingness to change - refer to local physicians and the Maine Tobacco Help Line



# In School Suspension

- 1-hour Stanford Healthy Future Curriculum: facilitated pre-packaged power point to promote change 2 and 4 hour in school suspension curriculum available.
- InDepth - American Lung Association: 4 50-minute sessions to educate youth about e-cigarettes and making behavioral change; Facilitated – free-online training
- District Tobacco Prevention Partners [DTPP] can suggest other alternatives
- Design your own programming with wealth of information available, DTPP and AAP can help

# School Clinicians- In School Assessments for Youth Vaping

- Assess level of use /nicotine dependence - Penn State E-Cigarette Dependence Index [19] {available on Maine AAP website}
- Consider using SBIRT to assess other substance use (youth vaping nicotine have 3-4 times the odds of using marijuana) [20]
- Understand use; with permission discuss change and initiate referrals for further assessments/counseling/consideration of Nicotine Replacement Therapy {NRT} [21]
- Develop plans for working with youth in the school that may include managing nicotine withdrawal and use of NRT in school setting



# Recommendations

- Team addressing mental health/well-being and substance abuse [all inherently linked]
- Post literature/signs/run videos if able - Truth Initiative has some excellent ones available
- Gather information for parents/staff - Stanford Tobacco Toolkit Resources Guide has information sheets from a variety of sources in one spot
- Educate entire staff about e-cigarettes
- Decide on prevention curriculum for entire community
- Identify and train willing peer leaders on prevention/and assisting youth who want help peers quit [ District Tobacco Partners can provide training for youth to lead this type of intervention through the " Sidekicks" program].

# Recommendations

- Plan for youth found vaping or with paraphernalia on school property - Include Information for families; plans for in house suspension; assessment for degree of use and where youth is around usage and thoughts of change
- Review School Policies that may be a barrier for youth who want treatment
- Plan Curriculum for in-school suspensions
- Plan for repeats - 1-Hour session/2- hour/4-hour session/ Positive Youth Development / Stress Management
- Develop local referral resources for youth who require more support



# Other Considerations

- School Climate/Culture – Anti- bullying/fostering inclusion
- Positive Youth Development
- Building Resilience

# THANK YOU FOR ALL YOU DO!!!!

- Thank you to My Excellent DTPP at ACCESS HEALTH/ and the team at Community Health and Wellness at Mid Coast Hospital



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