



Royal College of
Paediatrics and Child Health
Scotland

Leading the way in Children's Health

Tightening rules on advertising and promoting vaping products

Consultation response submitted by the Royal College of Paediatrics and Child Health: April 2022

About us

The [Royal College of Paediatrics and Child Health \(RCPCH\)](#) is responsible for training and examining paediatricians. The College has over 19,500 members in the UK and internationally and sets standards for professional and postgraduate education. We work to transform child health through knowledge, research and expertise, to improve the health and wellbeing of infants, children and young people across the world.

Do you agree that we should be seeking to limit use of these products as a cessation aid and restrict exposure to non-smokers?

Yes.

Smoking remains the UK's single greatest cause of preventable illness and avoidable death, with 100,000 people dying each year from smoking-related diseases. Smoking impacts the health of young people throughout their lives, with earlier initiation linked to increased levels of smoking and dependence, a lower chance of quitting and higher mortality.

Our [State of Child Health 2020](#) report called for the Scottish Government to set targets to become a tobacco free generation (defined as a smoking prevalence of <5%), including smoking reduction targets for pregnant women. We asked for these targets to be monitored and reported against regularly. We are calling on the Scottish Government to implement the aims of the 'Raising Scotland's tobacco-free generation: Our tobacco control action plan 2018' with the highest priority.

According to data from the State of Child Health 2020 report; 26% of 13 and 15-year-olds in Scotland reported ever having used an e-cigarette in 2018. However, only a small proportion used e-cigarettes regularly (defined as once a week or more): 2% of 13 year-olds and 3% of 15 year-olds. The 2018 [Scottish Schools Adolescent Lifestyle and Substance Use Survey](#) also notes that between 2015 and 2018, the proportion of 13 year olds having tried e-cigarettes has slightly increased among non-smokers (13% to 15%) but not among regular or occasional smokers. Anecdotally, from speaking to young people, our members believe that it is likely that the 2018 data on e-cigarette use is now an underestimate.

The **European Academy of Paediatrics** published a report in 2021 which shared important considerations regarding the threat of e-cigarettes to children and young people's health stating that: "The first is that e-liquids are unregulated, and contain many different chemicals for which toxicity is unknown. These include known carcinogens, and bacterial and fungal products. The known end-organ effects on the lung include the generation of oxidative stress and impairment of innate immune and anti-viral defences."

The RCPCH also recently published **policy recommendations in relation to vaping**. In the absence of long-term data and limited evidence on the impact of vaping in young people, our recommendations aim to prevent uptake and protect them from the harms of vaping, avoiding the messaging that vaping is safer than tobacco. Our recommendations include:

- Scottish Government should transition advertising of vaping products, so they are only advertised for their medicinal purpose as a smoking aid rather than a lifestyle product.
- Local Authorities should extend bans on smoking in public places to locations with a high child footfall.

Do you agree with proposal to extend restrictions on advertising these products in the ways described above?

Yes.

RCPCH Scotland members have raised concerns about the prevalence of vaping in young people, stating that young people may be more inclined to experiment with new products, especially of those which are flavoured and coloured to be appealing. Young people may also be less aware of the potential harm due to little public awareness campaigns regarding vaporising.

In their resource on '**Talking to teens about smoking**', ASH Scotland stated that: "Teenagers' brains are still developing, and they get addicted to the nicotine in cigarettes much faster than adults do. They find nicotine more rewarding, underestimate the risks of smoking, and are more influenced by smoking behaviour around them."

As such, it is important that nicotine containing products, particularly inhalational products which are designed to maximise rapid delivery of the drug to the brain, should be highly restricted and should face the same restrictions as tobacco containing products – there should be no advertising, no sponsorship and plain packaging.

Do you agree with proposal that in-store promotional displays should be banned?

Yes.

As the harms of vaping are significant, it is important that we extend the same restrictions to vaping products that we do to cigarettes, thereby using plain packaging and removing in-store promotional displays. In-store promotional displays designed to promote the products may be particularly appealing to young people and thereby lead them to take up vaping.

Please indicate the impact the proposed policy would have on individuals.

Current regulations are insufficient to discourage children and young people from being exposed to or using vaping devices. The proposed policies in this consultation should, therefore, have some effect on the health of young people in Scotland.

Restrictions imposed on the advertising of vaping products should hopefully help to reduce uptake in vaping in children and young people. The impacts of the proposals should be closely monitored as more may need to be done to reduce the numbers of children and young people using vaping products.

Please indicate your view on the impact of the proposed policy on people living with socio-economic disadvantage?

For several years many sources have identified how the use of nicotine containing products is higher in communities with higher socio-economic disadvantage. For example, [Public Health Scotland](#) (PHS) highlights that there are clear links between tobacco use and inequality, and therefore with health inequalities. PHS notes that smoking rates are still highest in the most deprived areas, with 35% of people living in the most deprived areas of Scotland smoking compared to 10% in the least deprived areas. The proposed policies in this consultation may, therefore, help individuals living in these communities from their already high burden of harm from nicotine containing products.

When considering the effects of vaping on Scotland's health it is important to also examine the effects of smoking during pregnancy. The percentage of pregnant women disclosing smoking at their first booking appointment in Scotland in 2019 was eight times higher for women in the most deprived groups than the least deprived.

Smoking during pregnancy is a leading factor in poor birth outcomes, including stillbirth and neonatal deaths. Rates of smoking have improved over time but have currently stalled, due to variation in rates by geography, age and socio-economic status.

In our State of Child Health 2020 report, we called on the Scottish Government to reintroduce smoking reduction targets for pregnant women. These targets should be monitored and reported against regularly. We also called on Local Authorities to introduce incentive schemes to support women to stop smoking during their pregnancy. These targets and schemes should extend to the use of vaping products as well as cigarettes.

Moreover, as mentioned in the '[State of Child Health 2017 Recommendations for Scotland](#)': "Children of smokers are more likely to start smoking themselves and continue to repeat the cycle of their own experience. Adolescence is the time young people start smoking and exposure to tobacco in early life has major consequences across their lives." As such, helping mothers to understand the negative effects of smoking and vaping is an important step in combatting smoking behaviours in children and young people as well.

Further comments

The proposals outlined in this consultation are a great start to tackling the issue of vaping among children and young people in Scotland. However, more must be done to raise awareness of impacts of using vaping products.

In particular, our members highlighted the need for a public health campaign for young people, which will expose and explain the dangers of vaping. Education is essential to highlight dangers of vaping both for existing users of vaping products and for potential future users who mistakenly believe that the harms of vaping are insignificant.

We would recommend the following articles from the UNCRC are considered to ensure that children and young people's rights are supported:

- Article 3 (best interests of the child): The best interests of the child must be a priority in all decisions and actions that affect children.
- Article 6 (life, survival and development): Every child has the right to life. Governments must do all they can to ensure that children survive and develop to their full potential.
- Article 24 (health and health services): Every child has the right to the best possible health. Governments must provide good quality health care, clean water, nutritious food, and a clean environment and education on health and well-being so that children can stay healthy.

For further information please contact:

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