

Engaging Youth Stakeholders in Youth Vaping/Smoking Harm Reduction Project Report

LUNG
NSPEI



Alliance
for Mental Well-Being

Table of Contents

Background	_____	1
Funding	_____	2
Project Purpose	_____	2
Methods	_____	3
Results and Recommendations	_____	4
Conclusion	_____	16
Appendix A	_____	17
Appendix B	_____	18
Appendix C	_____	19
Appendix D	_____	20
Appendix E	_____	21
References	_____	23

Background



Smoking remains the leading preventable cause of premature death and illness in PEI (Lim et al., 2010). Tobacco use is a significant modifiable risk factor for five of the leading causes of morbidity and mortality in PEI: heart disease, stroke, respiratory disease, diabetes, and cancer (Jha et al., 2013).

The Canadian Student Tobacco, Alcohol and Drugs Survey (CSTADS, 2021-2022) shows that among PEI students in grades 7-12, 34% of students have tried e-cigarettes and 20% used e-cigarettes in the past 30 days. Among Island students who have used vaping products in the last 30 days: 44% had used an e-cigarette (vape) to relieve stress/anxiety; 38% had used an e-cigarette because they were curious or to try something new and 4% had used an e-cigarette (vape) to help quit smoking cigarettes (Compass Survey, 2024).

In addition to physical health, research shows several connections between nicotine and mental health (Office of the U.S. Surgeon General, 2016). Nicotine harms developing brains, including making young people more susceptible to addiction (Taylor et al., 2014). With the brain still developing up until the age of 25, exposure to nicotine can impact brain development and affect a person's ability to concentrate, learn and make decisions (Office of the U.S. Surgeon General, 2016).

The U.S. Department of Health and Human Services (2022) have found that youth who smoke or use vaping products are at higher risk of developing mood disorders and their impulse control can be permanently lowered. Research has also found that using e-cigarettes can worsen symptoms of depression (Obisesan, Mirbolouk, Osei, et al. 2019).

Local findings shows that youth are interested in quitting with over half of young Island vapers (aged 16-24) having tried to quit vaping, with an average of 3.7 serious quit attempts. Difficulty quitting vaping may be attributed to high levels of addiction to nicotine. Hammond et al. (2023) found that 75% of youth who vape are vaping within an hour of waking, showing high nicotine dependence among youth.

Funding

The 2023–24 Engaging Youth Stakeholders in Youth Vaping/Smoking Harm Reduction Project was conducted by LungNSPEI, made possible through funding by the PEI Alliance for Mental Well-Being.



Project Purpose

The workshop series aimed to:

- 1) Build confidence and understanding among front-line youth workers on best practices approaches to vaping reduction
- 2) Increase awareness of the factors that help youth in PEI live a nicotine-free lifestyle and mitigate toxic stress caused by nicotine addiction
- 3) Build knowledge on youth vaping cessation and prevention strategies through the dissemination of research, resources and available programming.
- 4) Facilitate discussion and receive feedback on LungNSPEI's *2022 Exploring Youth Vaping/Smoking Cessation and Prevention on PEI* project.

For more information, <https://www.lungnspei.ca/peivapingstudy>

- 5) Increase awareness among community and governmental stakeholders

The project ultimately sought to strengthen advocacy efforts for policy change, fostering coordinated partnerships to address the toxic stress caused by nicotine addiction among youth. To accomplish this goal, the program brought together a range of community stakeholders and aimed to increase knowledge of the gaps and opportunities in PEI nicotine prevention and cessation programs/services for youth (aged 11–21) and increase awareness of the factors that help youth in PEI live a nicotine-free lifestyle and mitigate the toxic stress caused by nicotine addiction.

Methods



A series of 11 *Engaging Youth Stakeholders in Youth Vaping/Smoking Harm Reduction* workshops were completed between October 2023 and May 2024. Leading Impact Consulting was contracted by LungNSPEI to co-design and facilitate workshops with community and professional organizations that serve youth on PEI. The workshop series was targeted at a cross-section of both health and non-health representatives' stakeholders who work with youth. In total the workshop series reached over 220 participants from over 20 organizations working in PEI.

Partners in attendance included: Lennox Island First Nation, Atlantic Summer Institute, Health PEI, Heart & Stroke, Big Brothers Big Sisters PEI, PEERS Alliance, Generation XX, PEI Department of Education and Early Years, PEI Alliance for Well-being, Physical & Health Education Canada, the Reach Foundation, PEI Pharmacy Association, UPEI Nursing, IWK Health Centre, Respiratory Therapists at QEH, UPEI Health Centre, Department of Health and Wellness, Chief Public Health Office, Student Well-being teams, and PEI Dental Hygienists Association.

The 90-minute sessions began with a slide presentation that shared health information on vaping and PEI-specific data. It also provided information from the 2022 *Exploring Youth Vaping/Smoking Cessation and Prevention on PEI* research project, important findings, as well as the key recommendations stakeholders would be invited to build upon. Participants then engaged in four rounds of small group discussions, where they expanded on specific recommendations.

During the workshops, small group discussions focused on action items that would help support four 4 recommendations that came out of the 2022 Youth Vaping Study conducted by LungNSPEI. Each group received 5-10 minutes to write ideas and suggestions for each recommendation. Once all recommendations were captured, each participant was given 10 dot stickers and asked to place their dots on the ideas that they thought were the most important. See appendix B for example of 'dot-matrix' activity.

Further to this, participants were invited to tell us about actions their organizations are already engaged in and suggest actions their organizations could take, or resources needed to support the recommendations. The session concluded with a group discussion on effective ways to talk to youth about vaping, an evaluation survey accessible via QR code, and an open floor for final questions and comments

The following section summarizes the key themes identified during the project's workshop discussions, highlighting specific actions and key areas of focus that were brought forward by participants.

Responses Included:

- Actions their organizations are already engaged in related to mental health, youth vaping/addictions and resiliency.
- Available programs and services available to youth on PEI related to mental health, youth vaping/addictions and resiliency.
- Barriers to access points for Island youth and lack of specialized services for vaping/smoking cessation
- Suggested actions and ideas for building youth vaping prevention and cessation initiatives and programs on PEI
- Opportunities for youth vaping reduction advocacy initiatives and related partnerships to progress towards recommendations.

Since the onset of our project, PEI has implemented the following vaping/tobacco reduction policy initiatives, some of which are highlighted in the participant's responses. We are pleased to see clear actions being taken by the PEI provincial government that align with the recommendations proposed by those working in the community sector.

- Joined the federal vaping products taxation agreement with Canada, implementing a tax on all vaping products sold on the Island (Jan. 2025)
- Provided PEI tobacco enforcement officers with the power to search a retail premises and seize illegal tobacco products as well as enforce Federal youth vaping policies related to Flavoured products and nicotine content (Nov. 2025)
- Increased fine amounts for Island retailers who sell vaping/tobacco products to youth (Nov. 2025)
- Added PEI pharmacists as an enrollment point to the Smoking Cessation Program, allowing pharmacists to do intake and counseling support through the cessation program directly (Dec. 2025)

Going forward, LungNSPEI plans to incorporate the below findings into future advocacy planning processes and share with key government and community stakeholders.

RECOMMENDATION #1: EXPANSION OF THE PEI SMOKING CESSATION PROGRAM CRITERIA TO INCLUDE VAPING AND COUNSELLING SUPPORT TARGETED SPECIFICALLY FOR YOUTH.

<p><i>Reconciliation with PEI First Nations Communities</i></p>	<p>First Nations communities on Epekwitk/PEI must be engaged from the outset in program development.</p> <p>The specific challenges and priorities faced by First Nations youth must be considered and culturally appropriate counseling supports be made available.</p> <p>Programming should be available on reserves facilitated by youth-specific staff.</p>
<p><i>Youth Focus</i></p>	<p>It is important to take the time to connect with and listen to youth to understand the specific challenges they are facing, as well as what they measure as success.</p> <p>Exploring the root causes that lead youth to vape is key. Some participants identified that youth may feel they are “invincible” and this can be a barrier to understanding the long-term health implications of vaping.</p> <p>Providing incentives or a reward program for participation in vaping cessation services and initiatives and finding creative ways to make programming fun for youth, may help support youth engagement.</p> <p>Identifying key issues and concerns that may be particularly concerning for youth, such as the impacts on the ability to play sports or aesthetic impacts, may also be helpful.</p> <p>Most importantly, building trusting relationships with youth over time will help them feel more comfortable to talk about vaping in an open and honest way.</p> <p>Providing empathy, understanding and being open-minded, rather than approaching the topic with judgment and shame, will help with effective communication. It was identified that the OTRU (Ontario Tobacco Research Unit) has useful resources to help further develop a youth focus.</p>

<p><i>A Variety of Services and Programs</i></p>	<p>Not all youth are the same and having a range of available programs and services will be needed. Programs and services must also be easily accessible. These services include but are not limited to peer-to-peer counseling, group cessation services where they could attend with a friend, phone-based services such as the smoking cessation line and mental health crisis line, and online cessation programs such as the QUASH app: https://www.quashapp.com/</p>
<p><i>A Variety of Locations Across PEI</i></p>	<p>In-person programs and services should be made available across PEI and in a variety of locations, such as public health offices, through a family doctor, nurse practitioner or pediatrician, or as part of existing community programs for youth.</p> <p>At UPEI Student Affairs, the Health and Wellness clinic, the Student Union, and the ADHD clinic were identified as possible locations to find out about or access services.</p> <p>Pharmacies could also provide intake and counseling services to further reduce barriers to access [p1] .</p> <p>Public libraries could also provide a space for peer-support groups or counseling sessions. Choosing locations where the youth are already present and would not need separate permission from their parents or guardians might encourage more youth to participate.</p>
<p><i>Expand Coverage for Nicotine Replacement Therapies (NRT)</i></p>	<p>Currently, NRT is only covered for 6-18 weeks once a year https://www.princeedwardisland.ca/en/information/health-and-wellness/smoking-cessation</p> <p>Providing opportunities to access this coverage more than once a year or for a longer period of time could further support successful long-term vaping cessation.</p>

<p>Consent for Youth Under Age 18</p>	<p>Requiring youth under 18 years to obtain parental consent to participate in programs or access nicotine replacement therapies can be a barrier to accessing these services and supports.</p> <p>It is important to provide clear and consistent information about the age of consent to access vaping cessation programs and services and support youth to make their own health decisions.</p>
<p>Parent Engagement</p>	<p>Opportunities should be provided for parents to learn more about the risks, health impacts, and signs of vaping, and its increasing popularity compared with other substances. It was felt by some that parents often don't view vaping as a priority concern.</p> <p>Parents and others who act as support systems for youth must also be on board with vaping cessation efforts. For youth who require parents to drive them to a program location or pick up nicotine replacement therapy for them, having their parents or guardians engaged and supportive is essential.</p>
<p>Further Integration within Schools and Curriculum</p>	<p>Information about vaping and its health implications should be fully integrated within the public education system curriculum as part of the curriculum on healthy life choices.</p> <p>Stress reduction in grade 7 curriculum (& grade 6 intervention) were highlighted as a key opportunity to discuss local services available for vaping cessation.</p> <p>Additionally, information should be provided within the schools about vaping cessation programs and services.</p> <p>Teachers and other frontline staff will be critical for sharing this information broadly and regularly. They could also initiate in-school activities targeted to vaping cessation such as "quitting competitions", a "buddy system", or an anonymous box for vape disposal.</p> <p>Group incentives that reward whole classes rather than targeting individuals, such as a "pizza party", could also be implemented.</p>

<p><i>Further Integration within Schools and Curriculum (continued)</i></p>	<p>Providing opportunities for in-school, peer-led initiatives was also recommended. When youth are found to be vaping at school an education and counseling component should be implemented rather than a punishment-only focus.</p> <p>A brief script could be provided to help support teachers and staff in these efforts.</p> <p>Plain language information documents could also be provided to teachers that they could send home to parents throughout the school year.</p> <p>Public Health Nurses working in schools and those within the school dental program specifically, could also be accessed for referrals for vaping cessation programs.</p> <p>Integrating youth workers or counselors specifically focused on addiction supports within schools would further expand access.</p>
<p><i>Sharing Knowledge and Lived Experiences</i></p>	<p>Guest speakers who are experts or have lived experiences of vaping at locations where youth are already present, such as schools or youth centers.</p> <p>Presentations from youth or young adults who have experienced health implications from vaping could help to reach youth.</p>
<p><i>Additional Capacity is Needed</i></p>	<p>Many schools, health centers, and youth organizations would require additional staff and funding to successfully develop and expand youth vaping cessation programs and counseling services.</p> <p>It should not be expected that new programs can be implemented within existing resources.</p> <p>Additional training for staff in all locations will also be required.</p> <p>In particular, the Student Wellbeing Teams and in-school nurses were highlighted as being particularly well suited to this work but are already working at maximum capacity in most cases.</p> <p>Creating positions for school youth workers specifically focused on nicotine cessation and supports could be an asset.</p>

***Expand Referral
Pathways and
Community
Partnerships***

Trusted community partner organizations and after-school programs could be identified and staff provided with training to refer youth to vaping cessation programs and services.

Staff and volunteers working in youth sporting or summer camp organizations, and other community volunteers such as firefighters, could also receive training and act as positive and trusted role models for youth.

Allowing pharmacists to do intake and counseling support through the cessation program directly would further reduce barriers to access.

Youth should also be allowed to self-refer to programs whenever possible. Including a QR code that links to a registration form could increase access.

Oral health professionals were identified as being in a unique position to share information with patients about vaping and its oral effects.

Brochures, posters, and information on vaping cessation programs and services should be available at all dental health offices.

Continued collaboration between the Dental Association and the Dental Hygienists Association; to share approaches and key messages would help with consistency and shared learning.

Other healthcare providers could also share information, such as massage therapists, physiotherapists, and chiropractors.

RECOMMENDATION #2: UTILIZE EXISTING MENTAL HEALTH PROGRAMS AND SERVICES TARGETED TO SUPPORT YOUTH TO MANAGE STRESS AND ANXIETY USING HEALTHY LIFESTYLE BEHAVIOURS.

Existing Programs and Services

Many existing programs and services are available that may offer some range of vaping cessation support services for youth. In most cases, these services are usually incorporated under a larger umbrella of supports, and many youth may not be aware they can be accessed for the purposes of vaping cessation.

At the same time, it was identified that a holistic, whole-person approach can have great benefits as well to help address the underlying issues contributing to vaping use.

Programs utilizing a harm-reduction approach were highlighted as being well-suited to support vaping cessation, with early intervention being key.

Existing programs and services that youth could access in some capacity for vaping cessation supports, or for referrals, included:

- Student Wellbeing Teams
- School Counselors
- Public Health
- Mental Health Clinics
- Mental Health Crisis Line
- Mental Health Emergency Room
- Mobile Mental Health
- Addiction Services
- The Mental Health and Addictions Navigator
- The Richmond Centre
- The McGill Centre
- The Lennox Island Health Centre.

Specific programs were also highlighted:

- STOMP <https://phecanada.ca/teaching-tools/stomp>
- Strongest Families <https://strongestfamilies.com/ican/>
- D.A.R.E <https://dare.org/>
- The CAST program <https://pe.211.ca/result/addiction-services-youth-and-family-addiction-services-cast-program-65069061>

<p>Existing Programs and Services (continued)</p>	<p>Community-based programs were also identified as providing mental health and wellbeing supports for youth, though they may not currently have specific supports or programs for vaping cessation.</p> <p>These include but are not limited to:</p> <ul style="list-style-type: none"> • BCG (Boys and Girls Club) • Big Brother Big Sisters mentors and group programming • PEERs Alliance • Generation XX • REACH Foundation • The Adventure Group • 4H clubs • Girl Guides • Youth drop-in programs • LungNSPEI Youth Vaping Awareness Days • Health promotion and illness prevention • Programs focused on resilience, well-being, and healthy life choices were viewed as applicable in helping support youth vaping cessation, even when this is not a stated goal of the program. <p>Additionally, it was noted that there are regular meetings of the health and wellness team at Health PEI promoting consistent communication between mental health and addictions programs.</p> <p>The COMPASS survey was also viewed as a valuable tool for understanding youth vaping on PEI.</p>
<p>Decreasing Barriers to Access</p>	<p>While a diverse range of programs and services exist, some youth may face barriers to access. For example, many existing programs and services are already at maximum capacity or close to it, so there may be a waitlist for access. Finding ways to ensure confidentiality and decrease stigma for participants can help encourage youth to feel comfortable seeking help. Funding to overcome transportation barriers should also be provided whenever possible.</p>
<p>Advocacy Needed for Continued or Expanded Funding</p>	<p>Providing services and supports specifically for vaping cessation requires funding. Advocating and finding funding opportunities for these programs and services will be critical to their availability and success. The Lung Association could play a critical role in these advocacy efforts along with possible partners such as the United Way and the Heart and Stroke Foundation.</p>

<p style="text-align: center;">Outreach Opportunities and Advertising</p>	<p>Tools used to market and share information about vaping cessation programs and services should be specific to vaping. For example, using the term “vaping products” instead of “tobacco products” will help engage the target audience more effectively.</p> <p>Providing online links to programs and services through a range of social media platforms could be another way to reach youth and share about cessation pathways.</p> <p>Information booths could also be available at more community locations, such as in malls or at sporting events.</p> <p>Reassuring youth that they will not be shamed for reaching out, and providing positive encouragement should be a focus of these efforts.</p>
<p style="text-align: center;">Programs Focused on Screen Addiction and Healthy Online Behaviors</p>	<p>After youth have accessed initial programs or counseling supports, more follow-up services and supports must be provided to help support youth continue their long-term cessation efforts.</p>
<p style="text-align: center;">Jurisdictional Scan of Programs and Services</p>	<p>Further exploring what youth vaping cessation programs and supports exist in other Provinces may offer insights and suggestions for best practices and advocacy for further supports on PEI.</p>

RECOMMENDATION #3: SCREENING YOUTH FOR SMOKING/VAPING STARTING AT AGE 12 USING EVIDENCE-BASED SCREENING TOOLS.

<p><i>Early Intervention & Prevention</i></p>	<p>Beginning to screen for vaping use as early as age twelve can support early intervention and prevention.</p> <p>Wherever, and whenever screening for vaping takes place, it is critical that next steps are clearly identified, and supports are available for youth to obtain more information and to engage in cessation. Even when youth are not identified as having tried or regularly engage in vaping, all youth should be provided with information about the risks and implications of vaping so that they can make informed decisions.</p>
<p><i>Current practices</i></p>	<p>Several participants indicated that screening for youth vaping use currently takes place in some primary healthcare settings and upon hospital admission.</p>
<p><i>Confidentially Issues</i></p>	<p>It was acknowledged that parents being present during screening can impact how a youth responds to questions.</p> <p>Careful consideration of consent processes as well as how data collected during any screening process is stored and used, would be required.</p>
<p><i>Settings for Screening Practices</i></p>	<p>Many felt that these healthcare settings are the most appropriate places for this type of screening process to occur, and that medical directives may be required in some cases.</p> <p>Others felt different levels and forms of screening might be incorporated within a wider range of locations, such as through public health, dentists, optometrists, pharmacists, school counselors, student wellbeing teams, in schools during vaccine clinics, dental programs or health classes, community-based and sporting organizations, and church youth groups.</p> <p>Online screening tools for youth to engage with directly could also be offered. All those involved would require training and funding to engage in screening processes with youth.</p>

RECOMMENDATION #4: CONTINUE TO ADVANCE NICOTINE REDUCTION POLICY MEASURES FOCUSED ON YOUTH PROTECTION.

<p><i>Increased Funding and Access for Mental Health Supports and Programs</i></p>	<p>When youth are unable to access appropriate mental health programs and supports in a timely manner, they are not supported to address the underlying issues that contribute to youth vaping.</p> <p>Increased access to holistic mental health supports and social and emotional learning programs would also be an asset in preventing vaping and supporting vaping cessation.</p> <p>It is important to not treat addictions, such as vaping, as a crime. Rather the focus should be on health, mental health, and wellbeing.</p>
<p><i>Legislative and Regulatory</i></p>	<p>Increased penalties for businesses selling illegal vaping products, and for those who sell vaping products to minors, would further reduce youth access.</p>
<p><i>Changes for Vaping Sales and Use</i></p>	<p>Licenses for tobacconist shops could also be made more expensive and restrictive to further limit access.</p> <p>Increasing taxes on vaping products could also act as a deterrent. The online sale of vaping products should further be restricted to limit youth access.</p> <p>In particular, the online sale of high concentration vapes should be prohibited. A Federal policy ban on vaping flavors would help to ensure they couldn't be accessed online or through other provinces.</p> <p>Packaging and the shape of vaping products could also be regulated to be less appealing to youth and requirements for health information on vape packaging could also be strengthened.</p> <p>Additionally, advertisements for vape products could be further restricted.</p>

<p><i>Changes for Vaping Sales and Use (continued)</i></p>	<p>Increasing the distance that people can vape or smoke near schools, stores, hospitals, and government buildings could also discourage vaping.</p> <p>Placing limits on the number of vaping products purchased at one time could reduce subsequent distribution to youth.</p> <p>Banning youth after a certain birth year from ever purchasing tobacco products through a smoke-free generation policy should also be considered.</p>
<p><i>Increased Enforcement of Current Regulations</i></p>	<p>Businesses selling vaping products could be more regularly audited for compliance. Harsher penalties for non-compliance with current regulations could be implemented.</p>
<p><i>Regulate the Sale of Nicotine Pouches</i></p>	<p>Nicotine pouches have recently been introduced and are more widely available.</p> <p>Similar to vaping, the pouches have been advertised as a “cessation aid” with minimal consideration of their health risks and impacts.</p> <p>Changes to legislation are needed to regulate the sale of Nicotine Pouches on PEI with a particular focus on preventing youth access and use.</p>
<p><i>Additional School Supports and Policies</i></p>	<p>Introducing and expanding the use of new technologies in schools, such as vape detectors, could decrease student vaping.</p> <p>It was also suggested by some that having police or enforcement officers in schools may be an asset.</p> <p>Schools need to communicate clear expectations about vaping use on school grounds and the consequences for doing so, as well as make efforts to deter or eliminate locations on or near schools where youth gather to smoke or vape whenever possible.</p>
<p><i>Youth Involvement in Policy Development</i></p>	<p>Throughout all stages and levels of policy development and implementation to prevent and reduce vaping, youth must be meaningfully and directly consulted, engaged and collaborated with. Finding ways to better understand how underaged youth are accessing vapes could help identify ways to limit access</p>

Conclusion

This project provided an opportunity to begin to build a network of stakeholders who have a vested interest in youth mental health and addiction. By providing an opportunity to disseminate knowledge to those who work with youth, our project aimed to increase knowledge and improve confidence on how best to support youth with vaping prevention and cessation. In addition to increasing awareness and capacity, our project sought to engage community partners in identifying program and policy solutions and gather feedback on how best to action key recommendations identified through the *Exploring Youth Vaping/Smoking Prevention/Cessation in PEI 2022* project.

Moving forward, LungNSPEI will be able to utilize the information gathered during these sessions to advocate for policy and program changes to support youth vaping prevention/cessation on PEI. Our project identified a need to take a comprehensive approach to address the complex factors that influence youth vaping/smoking and create effective programming and policy changes that involve cross-organizational collaboration.

One key takeaway from our project was the need for youth voices to play an active role in shaping next steps. To accomplish this, the next phase of this work will begin in February 2025 with the creation of the first PEI Youth Vaping Coalition. The coalition will be composed of approximately 8-12 youth leaders (aged 16-24) from across PEI who will work collaboratively to reduce vaping among youth in PEI. The coalition will aim to empower youth and build advocacy skills, create impactful tobacco reduction policies and promote a healthier future for all.

LungNSPEI will support the coalition through their newly appointed, Youth Vaping Coalition Coordinator, who will support the coalition's youth members as well as build a network of community "supporters" of stakeholders identified through this project to support their work. Through the next steps of our project, LungNSPEI plans to continue to engage a diverse range of sectors on the topic of youth mental health and addiction and strengthen existing advocacy efforts for improved policy change that would build coordinated partnerships to mitigate sources of toxic stress caused by nicotine addiction.

Moving forward, our youth vaping coalition aims to build coordinated partnerships with both youth and community stakeholders around the topic of youth vaping/smoking reduction in PEI to move the identified priorities and recommendations forward.

Appendix A: Workshop Flyer

**LUNG
NSPEI**



Join us for
Engaging Youth Stakeholders in Youth Vaping Cessation

A free online interactive workshop.

Participants will:

- Learn about mental health and addiction connections.
- Gain strategies to help youth find healthy sources of stress reduction
- Gain knowledge from local findings.
- Share own experiences and discuss opportunities to reduce youth vaping



APRIL 3, 2024



10:00 AM – 11:30 AM



VIRTUAL

Register at:
<http://tinyurl.com/Lungyouth>
 or scan the QR code!



Appendix B: List of Workshops

Session 1: Feb 20, 2024 from 10:00–11:30am, at the Charlottetown Library and Learning Centre,. This session had 10 participants from organizations including Lennox Island First Nation, The Atlantic Summer Institute, Health PEI, the Heart and Stroke Foundation of PEI, and Big Brother Big Sisters PEI.

Session 2: Feb 27, 2024 from 10:00–11:30am at the Summerside Rotary Library,. This session had 7 participants from organizations including PEERs Alliance, Generation XX, The PEI Department of Education and Early Years, and Health PEI.

Session 3: March 13, 2024 from 6:00–7:30pm, at the Charlottetown Library and Learning Centre. This session had 5 participants from organizations including The PEI Alliance for Wellbeing, Physical and Health Education Canada, the Reach Foundation, and the PEI Pharmacy Association.

Session 4: April 3, 2024 from 10–11:30am, Online Workshop. This session had 2 participants from organizations including The PEI Department of Education and Early Years, and the IWK Health Centre.

Session 5: April 9, 2024 from 12:00–1:30pm. Registered Therapists at Queen Elizabeth Hospital. This session had 7 participants

Session 6: April 10, 2024 from 2:30–4:00pm. University of PEI Health Centre staff. This session had 8 participants.

Session 7: May 1, 2024. University of Prince Edward Island Nursing Students. This session was facilitated by LungNSPEI staff. Findings were shared with Leading Impact for inclusion in this report

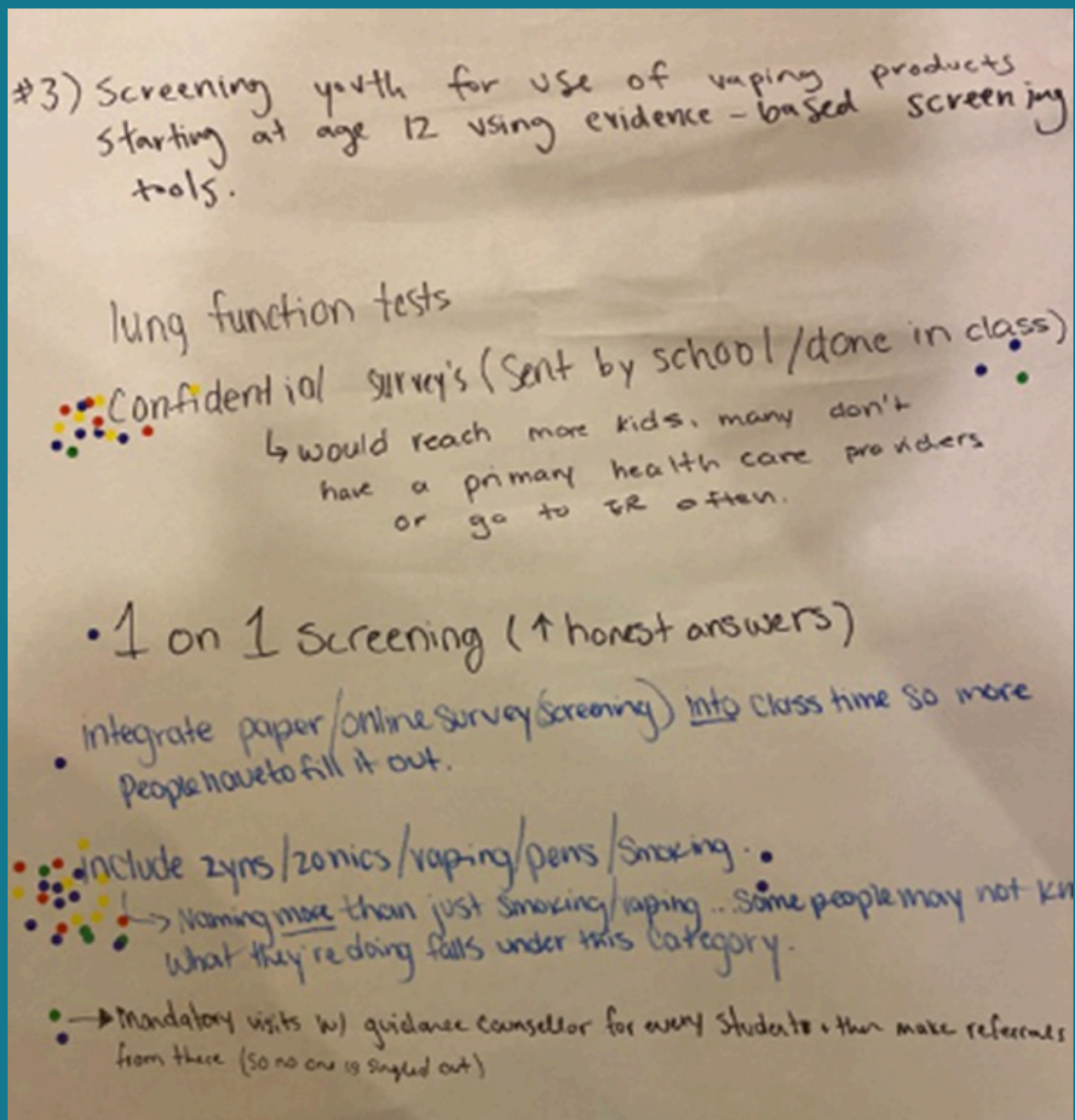
Session 8: May 3, 2024 from 1:30–3:00pm at Credit Union Place in Summerside. Student Wellbeing Teams. This session had approximately 40 participants

Session 9: May 25, 2024 from 10:15–11:45am at Milton Hall. PEI Dental Hygienists Association. This session had 56 participants

Appendix C: Example of Dot-Matrix Activity

Dot Matrix Activity (5 mins)

- Give each participant 3 stickers per recommendation.
- Ask participants to prioritize actionable plans by placing their 3 dots beside the key concepts on each sheet that they think are the most important.
- Participants can place all dots on one item, or 3 dots on separate items.
- Following the session, the items with the most dots will be prioritized for actionable plans by LungNSPEI and partner organizations.



Appendix D: Take Home Packages

YOUTH VAPING AWARENESS DAYS

WHAT IS YVAD?

In partnership with the UPEI Faculty of Nursing, we deliver presentations on the risks of vaping to grade 7 classes across PEI.


WHAT'S THE GOAL?

Our goal is to increase:

- knowledge of the evidence-informed health and social harms associated with vaping.
- student's ability to make informed decisions about using vaping products.

WHAT DOES YVAD INCLUDE?

- YVAD video presentation
- In-class session with UPEI nursing students
- Additional resources for teachers and parents
- Games to test students' knowledge



<https://www.lungnspei.ca/vaping>



VAPING

FACT SHEET FOR EDUCATORS

E-cigarettes, also known as 'vapes', pose a serious health risk to youth and young adults. For the past number of years there has been a rise in young people using e-cigarettes, including youth who have never smoked. Popularity is due to availability, a variety of appealing flavors, and the enhanced design of newer vape devices.

The latest Canadian Student Tobacco, Alcohol and Drugs Survey (CSTADS, 2021-2022) shows that among Prince Edward Island (PEI) school students in grades 7-12, 34% of students have tried e-cigarettes and 20% used e-cigarettes in the past 30 days.

PEI students who vaped nicotine in the past 30 days, reported that some of the main reasons for currently/continuing to vape are:

- they are addicted to them (20.3%);
- to relax or relieve tension (16.8%);
- to feel good/to get a nicotine high (14.1%); and
- to have a good time with my friends (13.6%)

ABOUT E-CIGARETTES AND VAPING

E-cigarettes (vapes) are electronic devices that use batteries. They work by heating a liquid substance producing a vapor which is then inhaled by the user.

Using an e-cigarette is commonly called 'vaping', which can refer to vaping non-nicotine- and nicotine-containing products, as well as cannabis.

E-cigarettes can be refillable (pods) or pre-filled with cartridges containing e-liquid. The pre-filled e-cigarettes are designed for one-time use that can be thrown away.

E-cigarettes can contain numerous hazardous chemicals which are known to cause cancer.

FAST FACTS

Are e-cigarettes legal for purchase among PEI youth?

- The minimum age for purchasing tobacco and vaping products in PEI is **21 years of age**.
- It is against the law to purchase a vaping product on behalf of, or for the purpose of resale to, a person under age 21.
- Only tobacco-flavoured and unflavoured vape products can be sold in PEI.
- Vaping products can only be purchased in age-restricted tobacconist shops. No retail store or person can sell vape products in PEI.

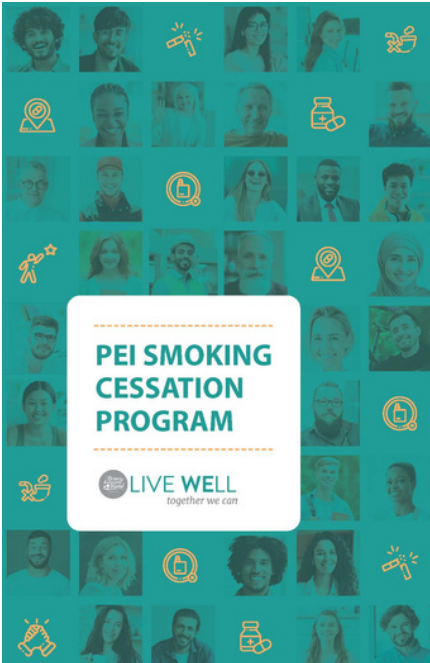
PEI students who **smoke cigarettes** indicate that they obtain them from social sources:

- siblings, parents friends or someone else (40%)
- they buy them from a friend or someone else (26%)


PEI students who **vape with nicotine** indicate they obtain them through:


- a family member, friend, or someone else (bought, borrowed, shared) (59%)
- ask someone to buy them for themselves (17%)





PEI SMOKING CESSATION PROGRAM







PROGRAM OVERVIEW


The PEI Smoking Cessation Program (SCP) helps PEI residents who wish to stop smoking or using other tobacco products by: covering 100% of the cost of nicotine replacement therapy (NRT) products (i.e., nicotine patches, gum, lozenges, or inhaler) and specific smoking cessation prescription drugs.

Note: Tobacco use in this booklet refers to commercial tobacco, not ceremonial tobacco.

YOUR OPTIONS

Eligible PEI residents can be covered for one complete course (6-18 weeks in a row) of treatment, once per year, of the following two treatment options:

-  **Option 1:** Nicotine Replacement Therapy (NRT) products (patches, gum, lozenges, or inhaler)
-  **Option 2:** Prescription smoking cessation medications (Bupropion (brand name Zyban®) or Varenicline (brand name Champix®))



The PEI Smoking Cessation Program covers the products listed in Appendix B. Once per year, eligible PEI residents can receive a single continuous course for 18 weeks in a row of **one** approved NRT product or smoking cessation medication.

Appendix E: Evaluation Report

Upon completion of each stakeholder workshop, participants were encouraged to share their feedback about the workshop experience by completing a short evaluation survey.

Participants could access this survey through a QR code provided on handouts, on the presentation screen and shared by email after the event. A total of 19 participants chose to complete the survey.

94.7% of respondents either agreed or strongly agreed that the information presented during the workshop was relevant to their work or the work of their organization. 5.3% neither agreed nor disagreed.

79% of respondents either agreed or strongly agreed that the presentation increased their understanding of the health risks involved with youth vaping. 15.8% neither agreed nor disagreed, and 5.8% felt their understanding of the health risks of youth vaping did not increase.

89.5% of respondents either agreed or strongly agreed that the information presented during the workshop was easy to understand. 10.5% neither agreed nor disagreed.

94.8% of respondents either agreed or strongly agreed that the workshop was well-organized and engaging. 5.3% neither agreed nor disagreed.

68.4% of respondents either agreed or strongly agreed that the workshop helped to increase my awareness of the factors that help youth in PEI live a nicotine-free lifestyle and mitigate the toxic stress caused by nicotine addiction. 26.3% neither agreed nor disagreed, and 5.3% disagreed.

73.7% of respondents either agreed or strongly agreed that the workshop provided helpful tools and suggestions to support youth stakeholders to engage in conversations with youth concerning vaping. 21.1% neither agreed nor disagreed 5.3% disagreed.

79% of respondents either agreed or strongly agreed that the workshop helped them feel more comfortable answering questions that youth may have about vaping. 21.1% neither agreed nor disagreed.

Appendix E: Evaluation Report (continued)

100% of respondents either agreed or strongly agreed that they were able to share their experiences and ideas in an open and non-judgemental way.

94.7% of respondents either agreed or strongly agreed that they felt heard and that their contributions were valued. 5.3% neither agreed nor disagreed.

73.7% of respondents either agreed or strongly agreed that they gained valuable insights and ideas about how my organization can further support youth vaping cessation on PEI. 26.3% neither agreed nor disagreed.

94.7% of respondents either agreed or strongly agreed that the presenters provided adequate time for questions and discussion. 5.3% disagreed.

The survey concluded with an open-ended question allowing space for any additional comments or questions to emerge. In this section, respondents shared that they felt the workshop was very informative and that they enjoyed the engaged conversations. Some also appreciated the opportunity to engage with a diverse range of stakeholders on this topic. Others shared they felt the workshop discussions would be useful in future work to support youth vaping cessation and enjoyed the presentation.

References

Compass Survey (Cannabis Use, Obesity, Mental Health, Physical Activity, Alcohol Use, Smoking, Sedentary Behaviour). Prince Edward Island: 2022-23

<https://www.livewellpei.ca/node/377>

Hammond, D., Burkhalter, R., Rynard, V., Reid, J.L. (2023). ITC Youth Tobacco and Vaping Survey: TECHNICAL REPORT – WAVE 4 (2020 - August). University of Waterloo.

https://davidhammond.ca/wp-content/uploads/2023/04/P01P3_W4_Technical-Report_updated2023.pdf

Health Canada. Canadian Student Tobacco, Alcohol and Drugs Survey. Ottawa, ON: 2022

<https://www.canada.ca/en/health-canada/services/canadian-student-tobacco-alcohol-drugs-survey/2021-2022-summary.html>

Jha P, Ramasundarahettige C, Landsman V, Rostron B, Thun M, Anderson RN, et al. 21st Century Hazards of Smoking and Benefits of Cessation in the United States. *N Engl J Med*. 2013 Jan 24;368(4):341-50.

Lim SS, Vos T, Flaxman AD, Danaei G, Shibuya K, Adair-Rohani H, et al. (2010). A comparative risk assessment of burden of disease, a systematic analysis for the Global Burden of Disease Study 2010. *The Lancet*, Dec;380(9859):2224-60.

Obisesan OH, Mirbolouk M, Osei AD, et al. (2019). Association between e-cigarette use and depression in the behavioral risk factor surveillance system, 2016-2017. *JAMA Network Open*.

<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2756260>

Taylor G, McNeill A, Girling A, Farley A, Lindson-Hawley N, Aveyard P. Change in mental health after smoking cessation: Systematic review and meta-analysis. *BMJ*. 2014;348:g1151. doi: 10.1136/bmj.g1151.

U.S. Department of Health and Human Services. (2016). E-Cigarette Use Among Youth and Young Adults. A Report of the Surgeon General. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health

U.S Department of Health and Human Services. (2022). Know the risks: e-cigarettes & young people. U.S Department of Health and Human Services.

<https://e-cigarettes.surgeongeneral.gov/knowtherisks.html>