



WASHINGTON  
BREATHES



# POSITIVE SCHOOL- BASED STRATEGIES TO REDUCE YOUTH COMMERCIAL TOBACCO USE

Prevention Summit  
October 30, 2024



# Today's Session

## 01 Substance Use Discipline in Schools

Tammy Dee  
Cascadia Youth Mental Health PLLC



## 02 Understanding Youth Nicotine Addiction & Cessation Strategies

Crystal Shen  
WA Chapter American Academy of Pediatrics



## 03 Key Policy Strategies to Reduce Youth Commercial Tobacco Use

Margaret Shield  
Washington Breathes



# Learning Objectives

## 1. Expanded Discipline Perspective

- Understand effective and sustainable substance use school discipline change must include a broader focus, including cessation interventions.

## 2. Cessation Strategies

- Understand cessation resources including nicotine replacement therapy, and the role of medical professionals in cessation support.

## 3. Advocacy Opportunities for Policy Change

- Learn about advocacy steps to ban flavors and restore funding for comprehensive tobacco prevention.

**SUBSTANCE USE  
DISCIPLINE IN  
SCHOOLS**

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**Tammy Dee, MSW, LICSW**

*Cascadia Youth Mental Health PLLC*





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# Points of School Discipline Intervention



## STATE LAW

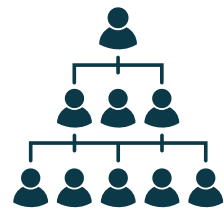
State law guides what schools can and cannot do in relation to discipline.

Elected officials



## SCHOOL BOARD POLICIES

School Districts adopt templated *model school discipline policies* that reflect laws. (typically developed by School Directors Associations). 1000s of policies.



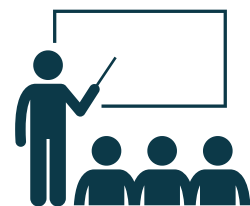
## DISTRICT PRACTICES

School District Directors may establish expectations for building-level Administrators related to discipline.



## SCHOOL PROCEDURES

Building (school) administrators develop and **implement** proactive and reactive procedures for discipline. (*Note: State law overrides outdated School Board Policies.*)



## BELIEFS & PRACTICES

Practices that impact the implementation and effectiveness of procedures include: expectations, consistency, punitive beliefs, enforcement, interventions, etc...



# Points of School Discipline Intervention



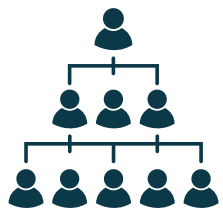
## STATE LAW

In WA State, schools are required to attempt another form of discipline prior to using suspension.



## SCHOOL BOARD POLICIES

School Districts adopt templated *model school discipline policies & general procedures* that reflect new laws. (typically developed by School Directors Associations)



## DISTRICT PRACTICES

School District Directors may establish expectations for building-level Administrators related to discipline.



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Building (school) administrators develop and **implement** proactive and reactive procedures for discipline. (*Note: State law overrides outdated School Board Policies.*)



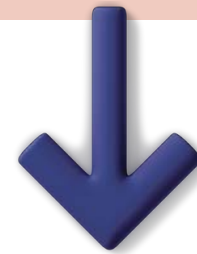
## BELIEFS & PRACTICES

Practices that impact the implementation and effectiveness of procedures include: expectations, enforcement, interventions, etc...



# Redefine the problem and solution

**How to change substance use school discipline suspension policies and practices.**



How to help schools **prevent and respond to substance use in schools/at school-sponsored events** using research-informed strategies.



# Reflection

Who is in the room?

## Free-Write/Personal Reflection

- Briefly describe your efforts to help schools change *policy, systems, or practices* to **prevent or respond** to substance use **on campus or at school-sponsored events**?
  - What's gone well?
  - What challenges have you faced?



# Points of Intervention: School-Level Practices

**Substance Use**  
SCHOOL DISCIPLINE  
Best Practice Audit<sup>SM</sup>

## Substance Use School Discipline Framework

### SUPPORT

#### Supportive Strategies

##### Intervention

- Evidence-based & **Culturally-responsive**
- Screening for other needs and multi-substance use
- Referral pathways
- Multi-tiered
- Effective communication systems

**Monitor for inequities**

#### Limit Punitive Discipline

##### Supportive Beliefs

- Stakeholder understanding of substance use
- Stakeholder support non-punitive responses

##### Procedure & Policy

- Limit exclusions & LE
- Parent Engagement
- Health protocols

**Monitor for inequities**

+

### STRUCTURE

#### Messaging & Expectations

Clear **expectations** of tobacco and substance use free campus-

- Proactive
- Positive Norms
- Express Empathy
- Health-oriented
- Share Resources
- Collect **diverse stakeholder feedback & refine**

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#### Enforcement & Supervision

##### Enforcement

- **Understanding role of bias in enforcement.**
- Staff knowledge of how to respond to suspected use in trauma-informed & equitable ways

##### Supervision

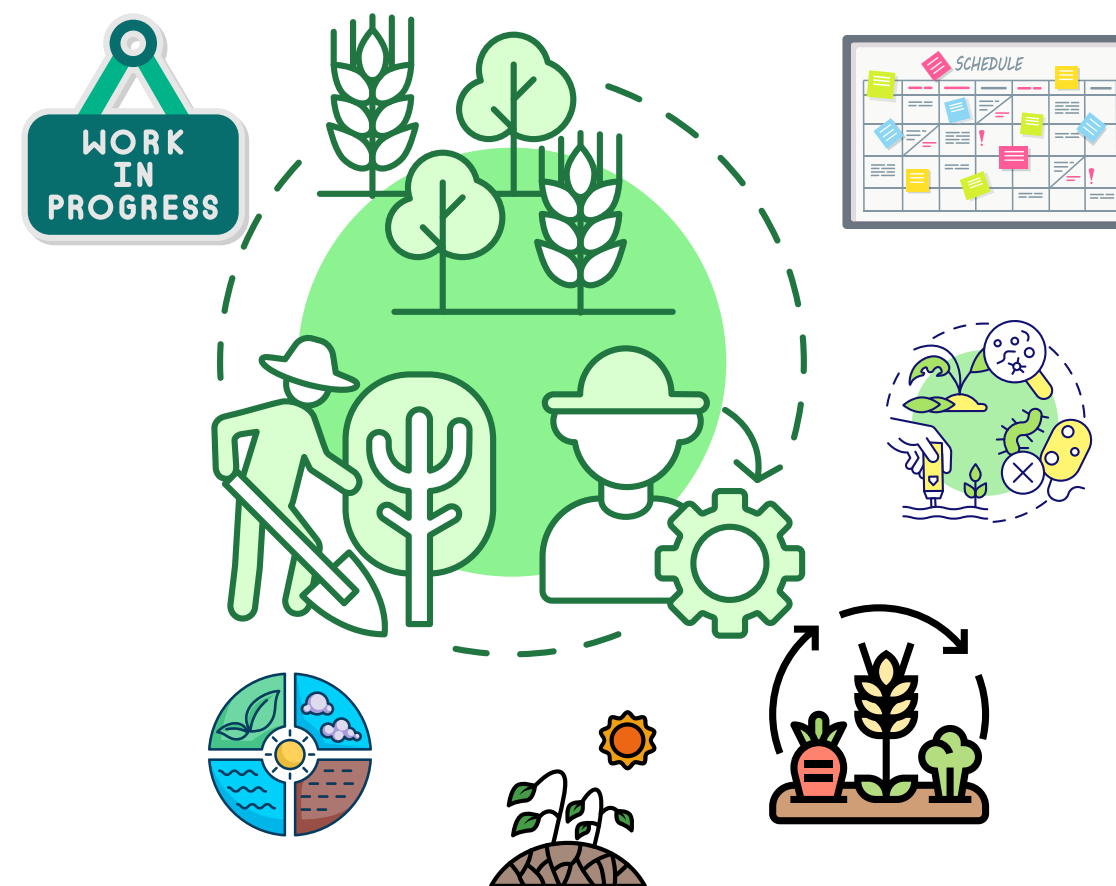
- Proactively monitor campus
- Feedback & refine



**Priority focus on  
substance use school  
board discipline  
policies**



Comprehensive focus on  
supportive strategies to  
**prevent and respond to  
youth substance use at  
school**



Priority focus on  
school board  
discipline policies



Comprehensive focus on  
supportive strategies to  
**prevent and respond to  
youth substance use at  
school**





# Points of Intervention: School-Level Practices

**Substance Use**  
SCHOOL DISCIPLINE  
Best Practice Audit<sup>SM</sup>

## Substance Use School Discipline Framework

### SUPPORT

#### Supportive Strategies

##### Intervention

- **Culturally-responsive**
- Screening for other needs and multi-substance use
- Referral pathways
- **Multi-tiered**
- **Cessation**
- **Treatment**
- Stakeholder support for interventions

**Monitor for inequities**

##### Procedure & Policy

- Limit exclusions & LE
- Parent Engagement
- Health protocols

##### Supportive Beliefs

- Stakeholder support non-punitive responses
- Stakeholder understanding of substance use

**Monitor for inequities**

### STRUCTURE

Clear **expectations** of substance use free campus-

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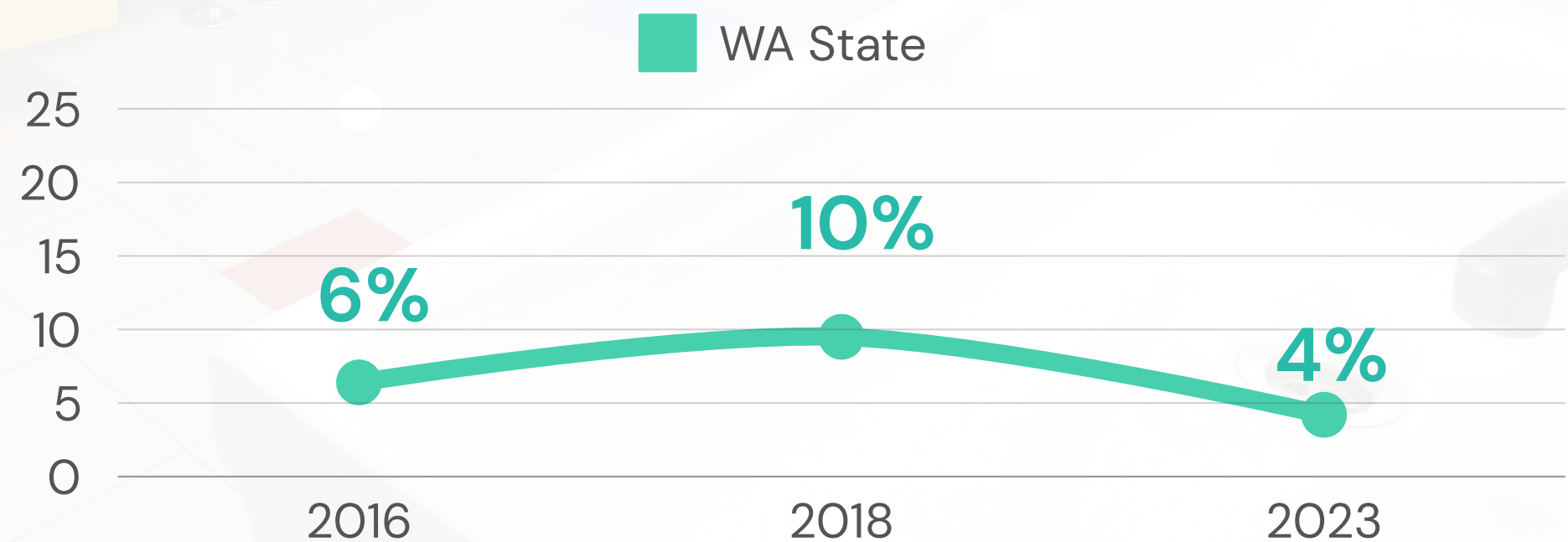
##### Supervision

- Proactively monitor campus
- Feedback & refine

# CURRENT VAPING ON SCHOOL PROPERTY HAS DECLINED SINCE 2018

- Percentage of 10th grade youth who report current (30 day) vaping on **school property** is down to it's lowest rate since before 2016.
  - Not including 2021 data due to COVID-related absenteeism

Percentage of youth who vape at school



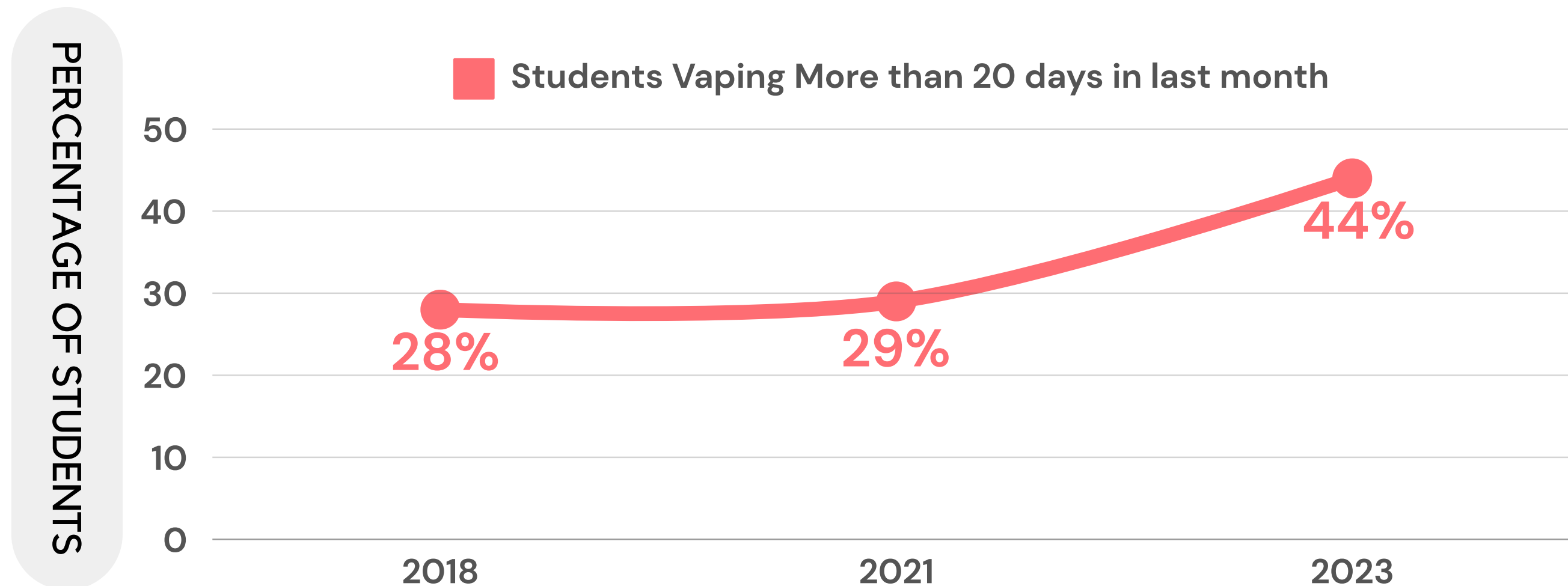
Data from 2021 not included due to COVID-related absenteeism.

WA State Healthy Youth Survey QxQ tool (<https://www.askhys.net/QxQ>) ESD 189 10th Grade Student Responses.

- Intervention**
- Culturally-responsive
  - Screening for multi-substance use
  - Referral pathways
  - Multi-tiered
  - Effective communication systems
- Monitor for inequities**

# Statewide (WA), students who vape at school use vapes **MORE OFTEN** now than in years past.

Percentage of 10th Grade Students who Vape at School that vaped **20-30 days in the last month**



WA State Healthy Youth Survey QxQ tool (<https://www.askhys.net/QxQ>) WA 10th Grade Student Responses.

Intervention

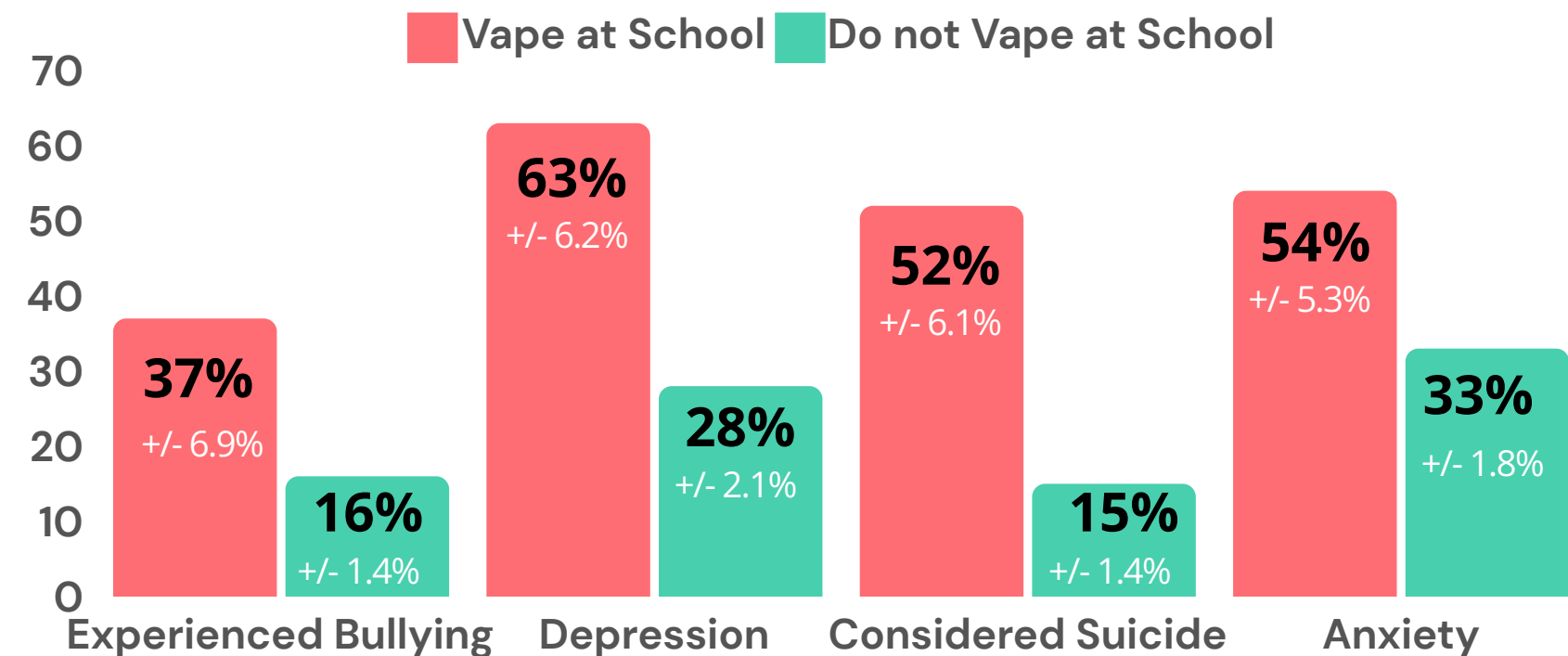
- Culturally-responsive
- Screening for multi-substance use
- Referral pathways
- Multi-tiered
- Effective communication systems

Monitor for inequities

# Youth who vape at school experience increased risk for other behavioral health challenges:

- Bullying
- Suicidal Ideation
- Symptoms of Depression
- Symptoms of Anxiety

Comparing risk factor proportions among youth who currently vape at school and their peers who do not currently vape at school.



2023 HYS Data; 10th graders ESD 189 region, 95% Confidence Interval



# Implications for School Discipline

## Supportive Strategies

### Schools may be seeing more...

- **Repeat** tobacco/nicotine product incidents;
- Students who have tobacco/nicotine product incidents also have other **complex behaviors** and behavioral health needs;
- More **intensive supports** required for behavior change (e.g, cessation), but limited to no staff who are trained/funded to provide nicotine cessation counseling.

#### Intervention

- Culturally-responsive
- Screening for multi-substance use
- Referral pathways
- Multi-tiered
- Effective communication systems

#### Monitor for inequities

**Students who vape at school often need intensive-levels of support and ongoing engagement.**

# Reflection

What is one thing that stands out to you?

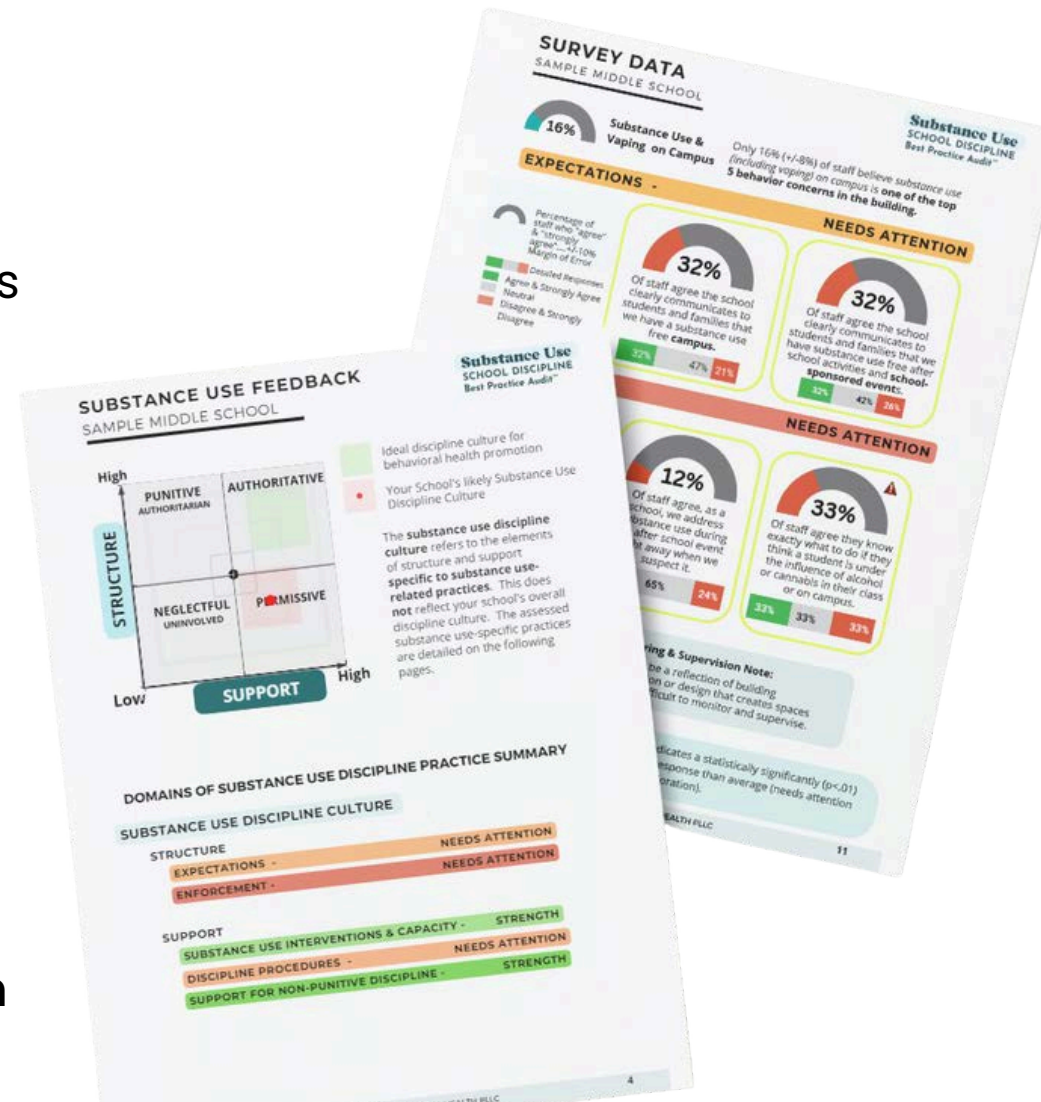
What is one question you have?

How can broadening your definition of **substance use school discipline** to include strategies like **building the systems and capacity for interventions** (*to offer after incidents*) change the approach you take as you try to help schools adopt more supportive responses to substance use.

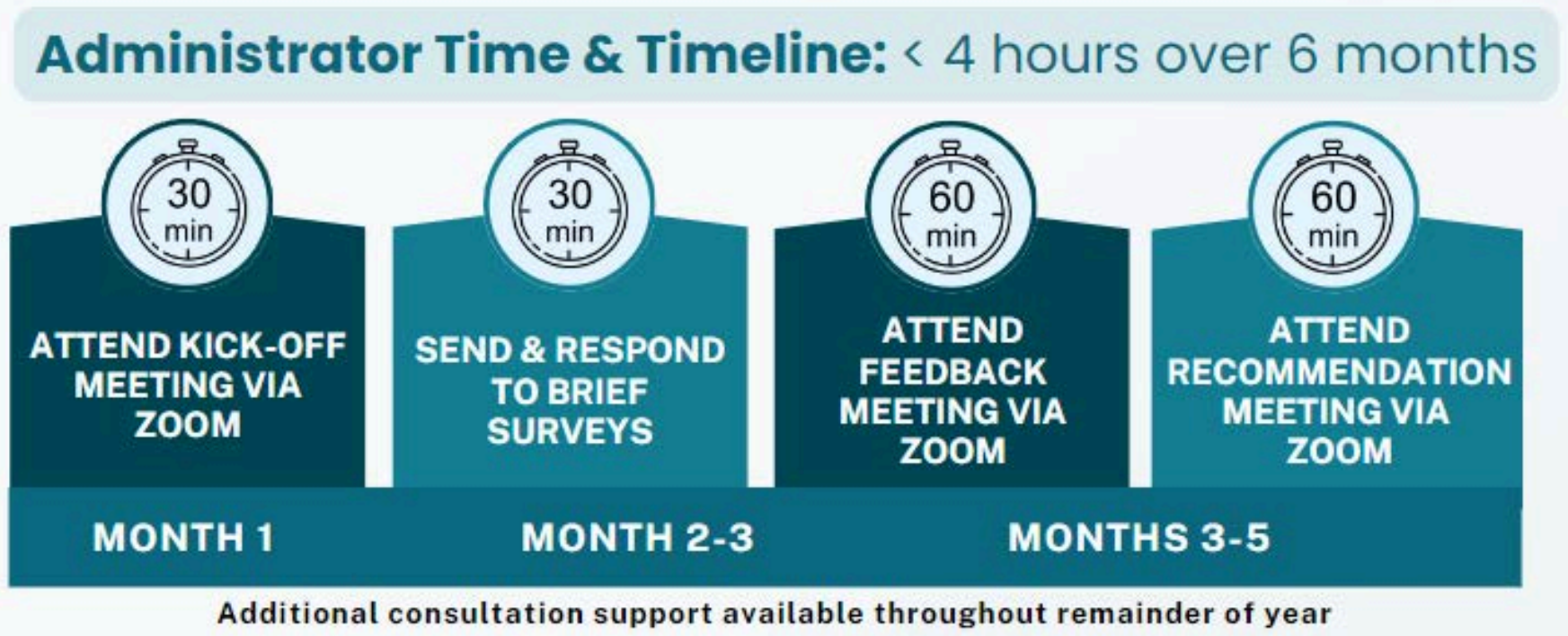
# SUBSTANCE USE DISCIPLINE CONSULTING PROGRAM

## Your school or district will receive:

- A **personalized Substance Use Discipline Best Practice Feedback Report** highlighting strengths and areas for improvement in how your school prevents and responds to substance use.
- A report with **prioritized recommendations** for improving substance use discipline procedures and practices.
- Virtual meetings to review and reflect on feedback and best practice recommendations for each building participating in the project.
- Support with the development of an **Action Plan** based on priority recommendations.



**Inquiry Form**



Tammy Dee  
Tammy@cascadiayouthmentalhealth.com



**UNDERSTANDING YOUTH  
NICOTINE ADDICTION &  
CESSATION STRATEGIES**

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**Crystal Shen, MD, MPH**

*Washington Chapter of the  
American Academy of Pediatrics*





# Learning Objectives

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## 2. Cessation Strategies

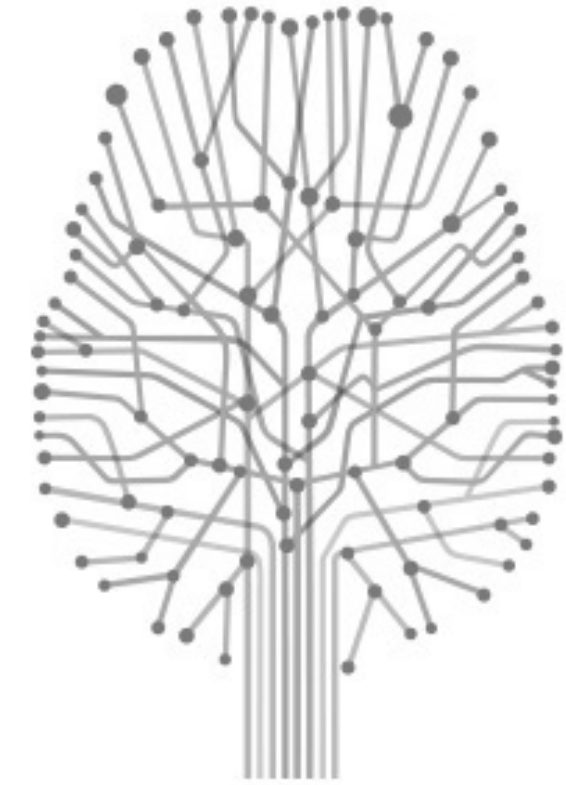
- Understand cessation resources including nicotine replacement therapy and the role of medical professionals in cessation support.

## 3. Advocacy Opportunities for Policy Change

- Learn about advocacy steps to ban flavors and restore funding for comprehensive tobacco prevention.

# Effects of Nicotine on Youth

- Youth are uniquely at risk for long-term, long-lasting effects of exposing their developing brains to nicotine
- Risks include nicotine addiction, mood disorders (like anxiety and depression), and permanent lowering of impulse control
- Nicotine also changes the way synapses are formed, which can harm the parts of the brain that control attention and learning
- Can lead to **dependence and addiction especially in adolescence, which leads to need for cessation resources**



National Academies of Sciences, Engineering and Medicine, *Public Health Consequences of E-Cigarettes*, 2018.

E-Cigarette Use Among Youth and Young Adults: A Report of the Surgeon General, 2016

The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General 2014.

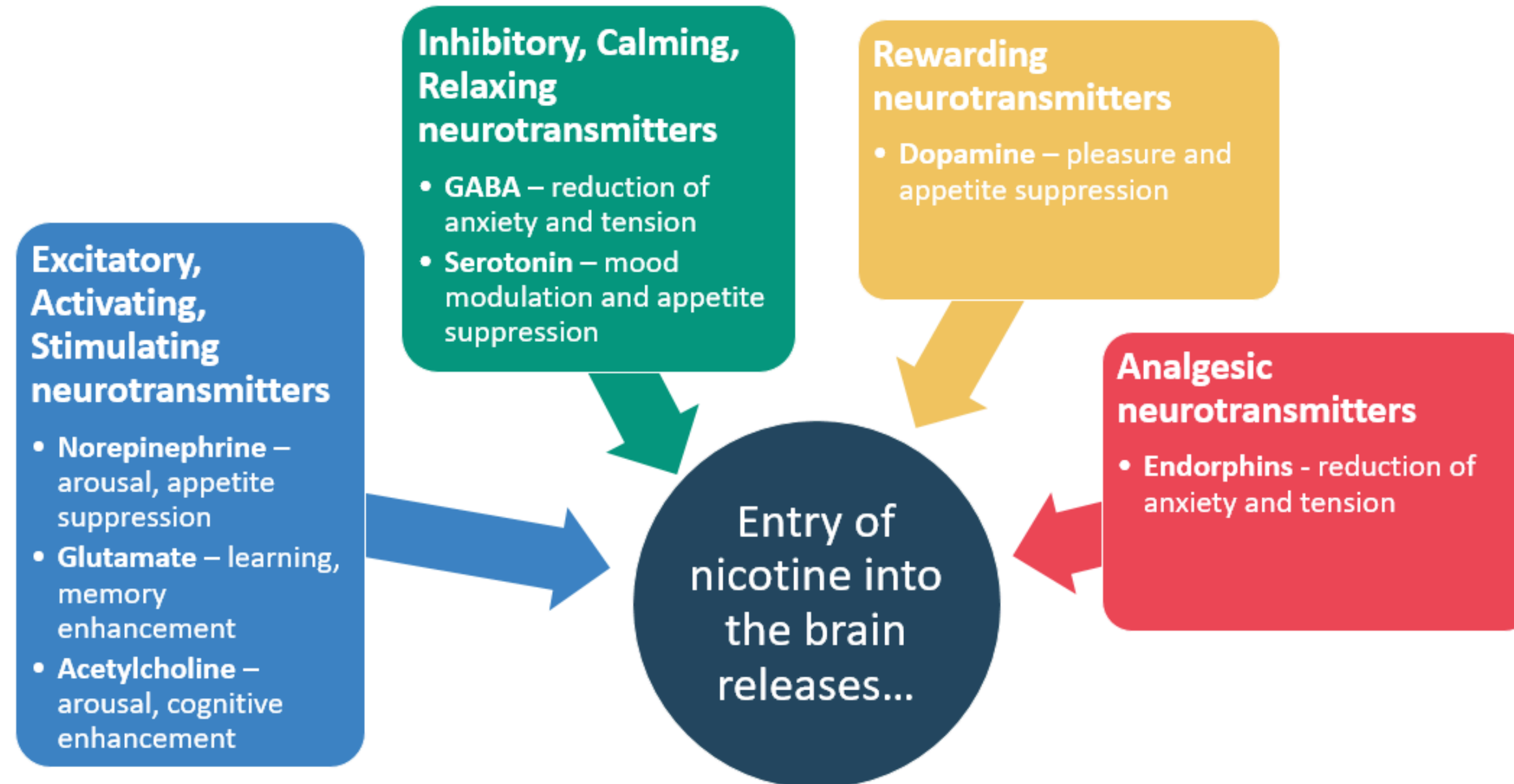
<https://e-cigarettes.surgeongeneral.gov/knowtherisks.html>

# High Nicotine Concentration in Popular Vape Products



**High nicotine concentrations lead to youth nicotine dependence, spurring the need for cessation support**

# Nicotine Dependence Is A Health Issue



**Nicotine use leads to release of neurotransmitters, forming the clinical basis of nicotine dependence**



# Nicotine Withdrawal Symptoms

Mentally  
sluggish

Inattentive

Insomnia

Boredom and  
dysphoria



Fatigue

Anxiety

Increase pain  
sensitivity

Worsen  
cognitive  
function



**Ongoing cessation support is essential for youth trying to quit because nicotine dependence leads to physiological withdrawal symptoms**

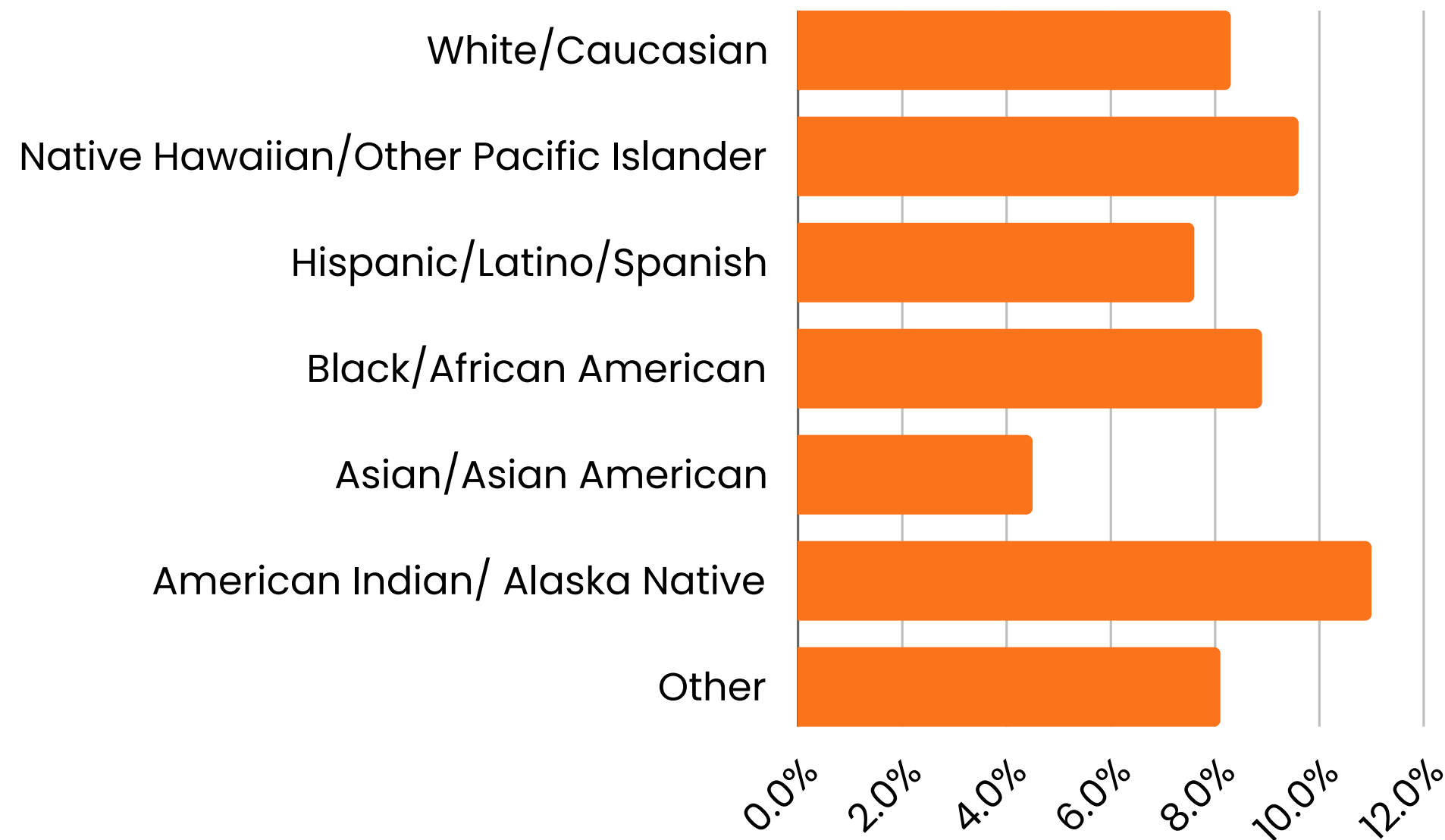
# Youth Tobacco and Nicotine Dependence Context

- Youth are uniquely vulnerable to nicotine dependence because their **brains are still developing**.
- **Nicotine addiction progresses faster in youth** than it does in adults;
  - Youth may become dependent on nicotine prior to daily use.
- 68% of youth who vape have tried to quit but almost two-thirds had no cessation support
  - Cessation support is essential

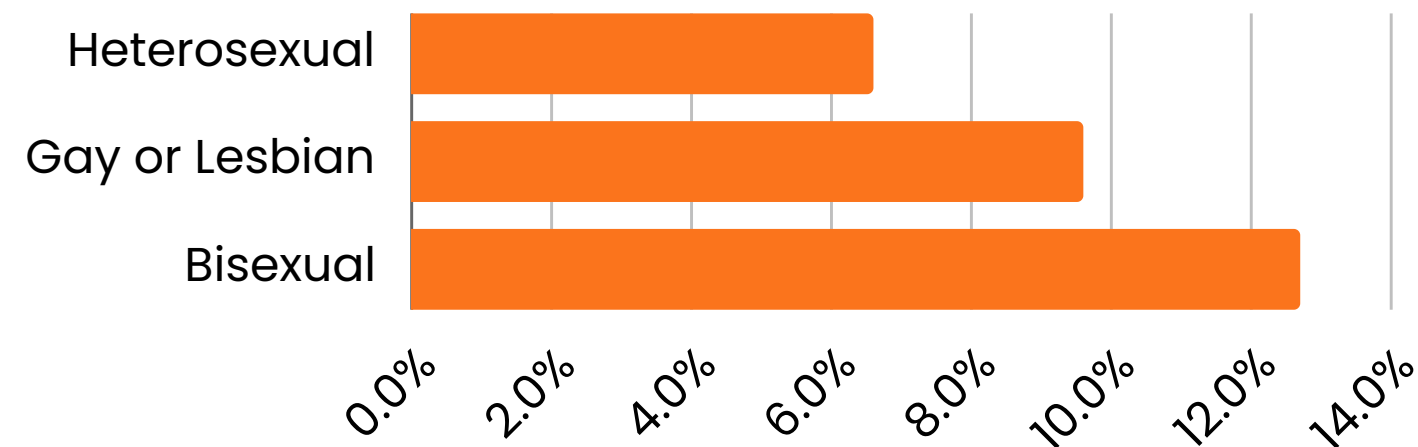


# Disparities in Youth Commercial Tobacco Use

## by race/ethnicity



## by sexual orientation



**Cessation support  
is important for health equity**

**Washington Youth E-cigarette/Vapor Product Use  
10th Graders 2023**

*Healthy Youth Survey, current (past 30-day) use*

# Healthcare Approaches to Youth Nicotine Cessation

The American Academy of Pediatrics has recommendations to:

- Ask, Counsel, and Treat youth for nicotine use
- **Link youth with appropriate cessation support**
  - Behavioral and pharmacological cessation supports can increase the odds of successful quitting
  - Tailor supports to level of dependence
    - Link **all** youth to **behavioral support** to provide targeted support
    - Consider **pharmacologic support like nicotine replacement therapy** for youth who are moderately/severely dependent



*NRT gum, patch, and lozenge*



American Academy  
of Pediatrics

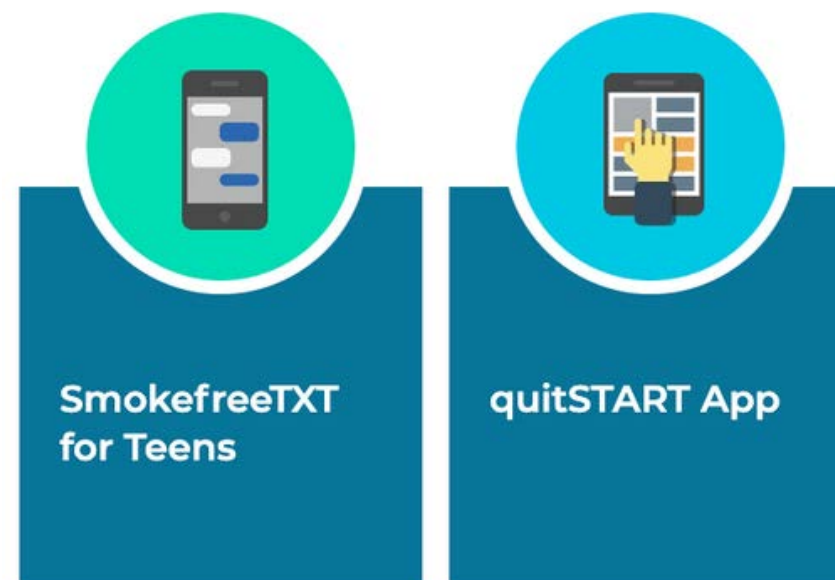
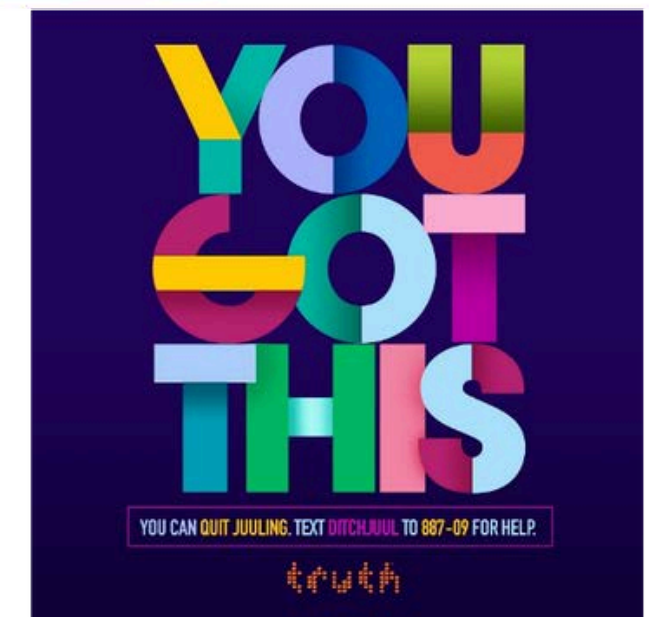
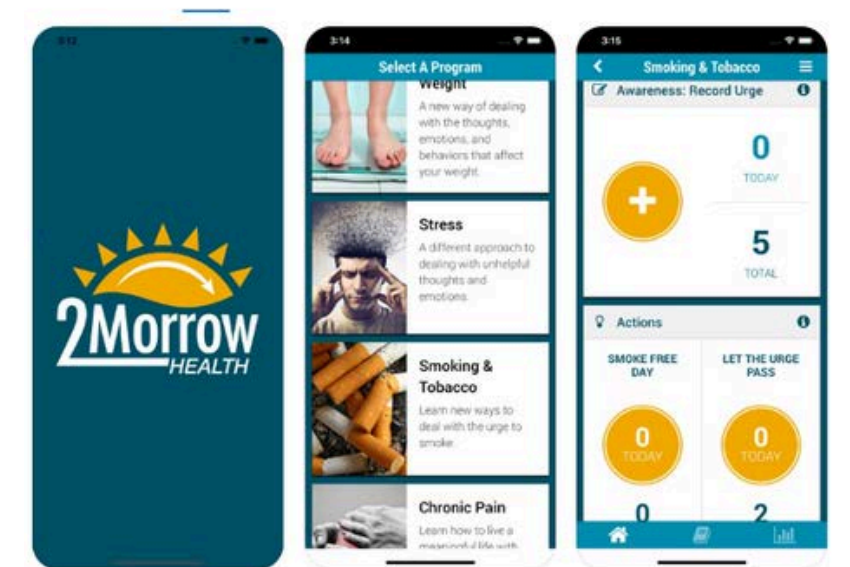


DEDICATED TO THE HEALTH OF ALL CHILDREN®

[www.aap.org/HelpKidsQuit](http://www.aap.org/HelpKidsQuit)

# Behavioral Cessation Supports

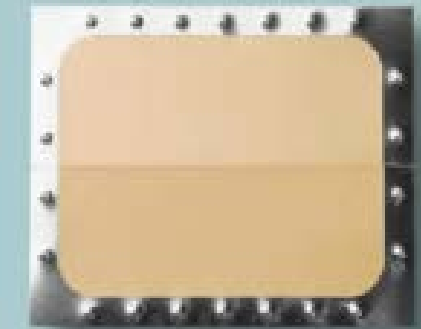
- Behavioral supports:
  - Text, web-based, smartphone app, quitline, in-person
- Help youth develop **a successful quit plan**, including:
  - **Setting a quit date**
  - **Triggers:** Develop a plan to manage triggers of use
  - **Withdrawal symptoms:** Develop strategies to manage withdrawal symptoms (cravings, irritability)
  - **Social support:** Identify family and friends who can encourage success
  - **Self care:** Consider supportive behaviors such as exercise, mindfulness, healthy eating



# Pharmacologic Support: Nicotine Replacement Therapy (NRT)

- Consider **pharmacologic support like nicotine replacement therapy (i.e. gum, patches, lozenges)**
  - Given the effectiveness of NRT for adults and the severe harms of tobacco dependence, **AAP recommends considering off-label NRT for youth who are moderately or severely addicted to nicotine**
  - Youth under 18 years old need a prescription from a healthcare provider to access all forms of NRT
- Considerations for use:
  - NRT is safer than cigarettes, e-cigarettes, and tobacco products as it delivers nicotine without toxic chemicals and carcinogens
  - NRT has low potential for misuse because nicotine is absorbed slowly
  - Non-adherence and relapse after cessation of therapy can occur and close follow-up is recommended

**PATCH**



**GUM**



**LOZENGE**



**KEY POLICY STRATEGIES TO  
REDUCE YOUTH COMMERCIAL  
TOBACCO USE IN WASHINGTON**

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**Margaret Shield, PhD**

*Coalition Organizer*

*Washington Breathes*



**WASHINGTON  
BREATHES**



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## Our Vision

A healthier Washington, where commercial tobacco-related inequities are non-existent and where all people in our communities, across generations, are free from nicotine addiction, disease and premature death caused by commercial tobacco.

## Our Mission

To bring together diverse partners from a variety of sectors to build capacity, collaborate, increase understanding, support cessation, and **develop policy, systems, and environmental changes** aimed at eliminating inequities and the negative effects from commercial tobacco use, sales and marketing.



# Improving Cessation Treatment

**68%** of youth who vape have tried to quit but almost two-thirds had no cessation support.

**70%** of people who use commercial tobacco products want to quit

**6.5x less** funding went to the WA State Quitline than the national average for other states. WA invested \$0.35/user in 2021 compared to national average of \$2.28/user.



See our position statement  
“Equitable Cessation Services”

See our fact sheet  
“Menthol & Nicotine Cessation”



# Ending the Sale of Flavored Commercial Tobacco

**Prohibiting menthol and flavored products – including menthol cigarettes – an opportunity to reduce health disparities and protect youth**

**~80%** of high school and middle school students who currently use tobacco use a flavored product.

**81%** of teens age 12–17 who ever used a tobacco product, used a flavored product first.

**85%** of Black people who smoke use menthol cigarettes.

Sources: 2018 & 2021 National Survey on Drug Use & Health and the Truth Initiative

**WASHINGTON BREATHES** Position Statement

**Menthol & Flavored Tobacco Products**

**All flavorings, including menthol, should be prohibited in all commercial tobacco and nicotine products.**

*A policy to end the sales of menthol cigarettes nationwide could save 650,000 lives in the U.S., including over 250,000 Black lives.*

**PROHIBITING KEY COMPONENTS**

- 1 Prohibit All Flavor Additives**
- 2 Include All Products**
- Hold Accountable**

**REDUCE INITIATION**  
 Flavored tobacco products are commonly the first nicotine products used by youth.
 

- Nearly 80% of high school and middle school students who currently use tobacco use a flavored product.
- 81% of teens age 12-17 who ever used a tobacco product used a flavored product first.**
- Most commonly used flavor types among high school students are fruit, mint, menthol, and candy/sweet.

**PROTECT COMMUNITIES**  
 Menthol cigarettes & tobacco products disproportionately harm people of color and LGBTQ people.
 

- All other flavored cigarettes were banned in 2009.
- The tobacco industry targets communities of color and LGBTQ+ communities with menthol products, particularly the Black community.**
- About 85% of Black smokers use menthol products.
- Lung cancer is the leading cause of cancer deaths among Black Americans. Lung cancer death rates in Black males are 15% higher than those of white males. Prohibiting menthol tobacco products could close that gap in about 5 years.
- In 2020, 54% of lesbian & gay smokers and 49% of bisexual smokers used menthol, compared with 42% of heterosexual smokers.

**MAKE QUITTING EASIER**  
 Menthol and other cooling, numbing additives make it easier to inhale, harder to quit.
 

- Menthol and similar additives reduce the irritation from smoking and nicotine, making menthol products more appealing to new and young users.
- Menthol flavoring contributes to greater nicotine dependence** due to the unique impacts of menthol on airways and brain receptors.
- 50% of teens age 12-17 who smoke use menthol cigarettes.

Learn more about flavors & menthol

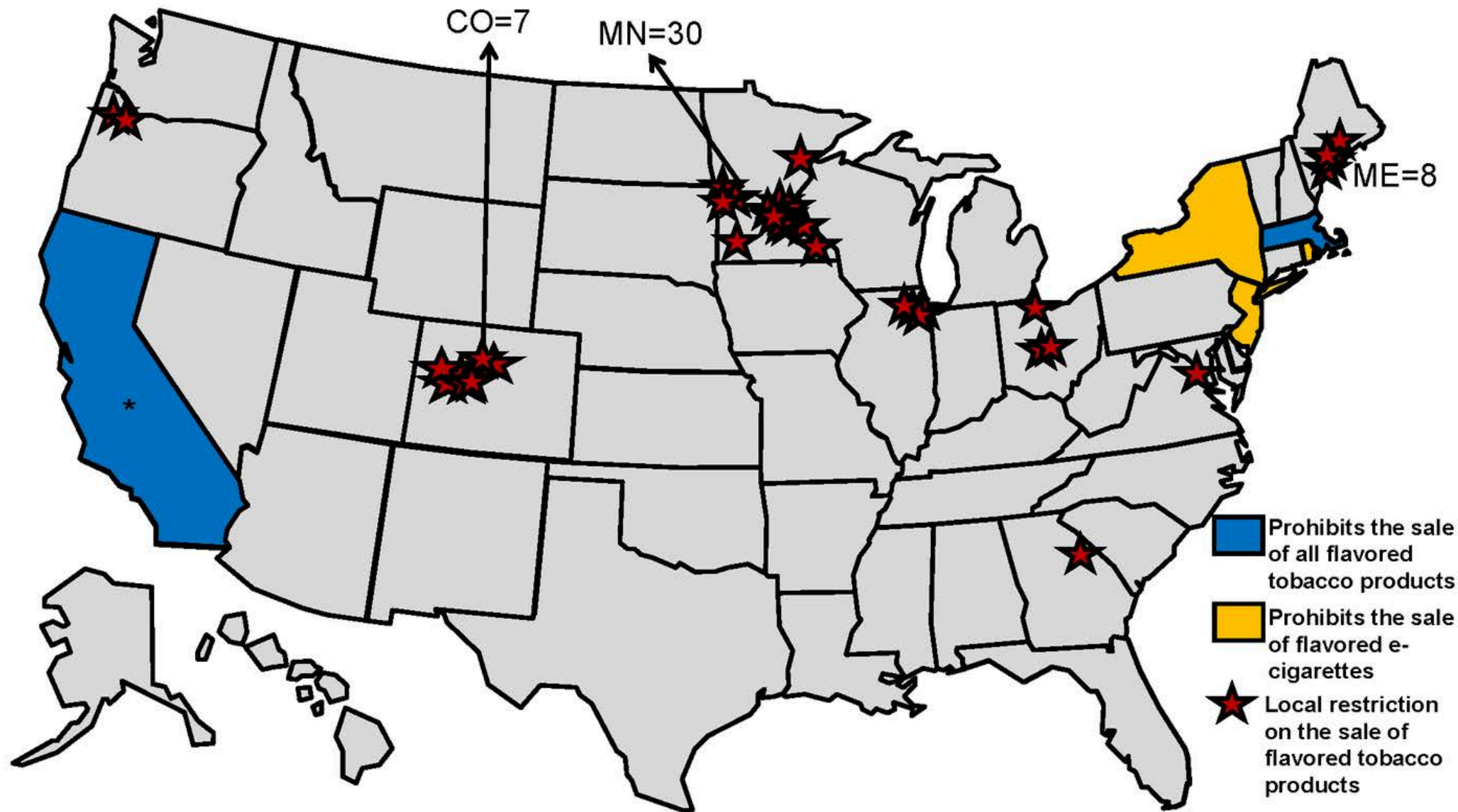
Our data sources are online at [bit.ly/WaFlavorsDataSources](https://bit.ly/WaFlavorsDataSources)

**WASHINGTON BREATHES**

See our position statement “Menthol & Flavored Tobacco Products”



# Policies to Prohibit Flavored Tobacco Products



**7 states and >375 localities have enacted restrictions on sales of flavored tobacco products since 2017.**

**>375 localities have enacted restrictions on the sale of flavored tobacco products.**

In addition to the states above, MD and UT restrict the sale of some types of flavored e-cigs.

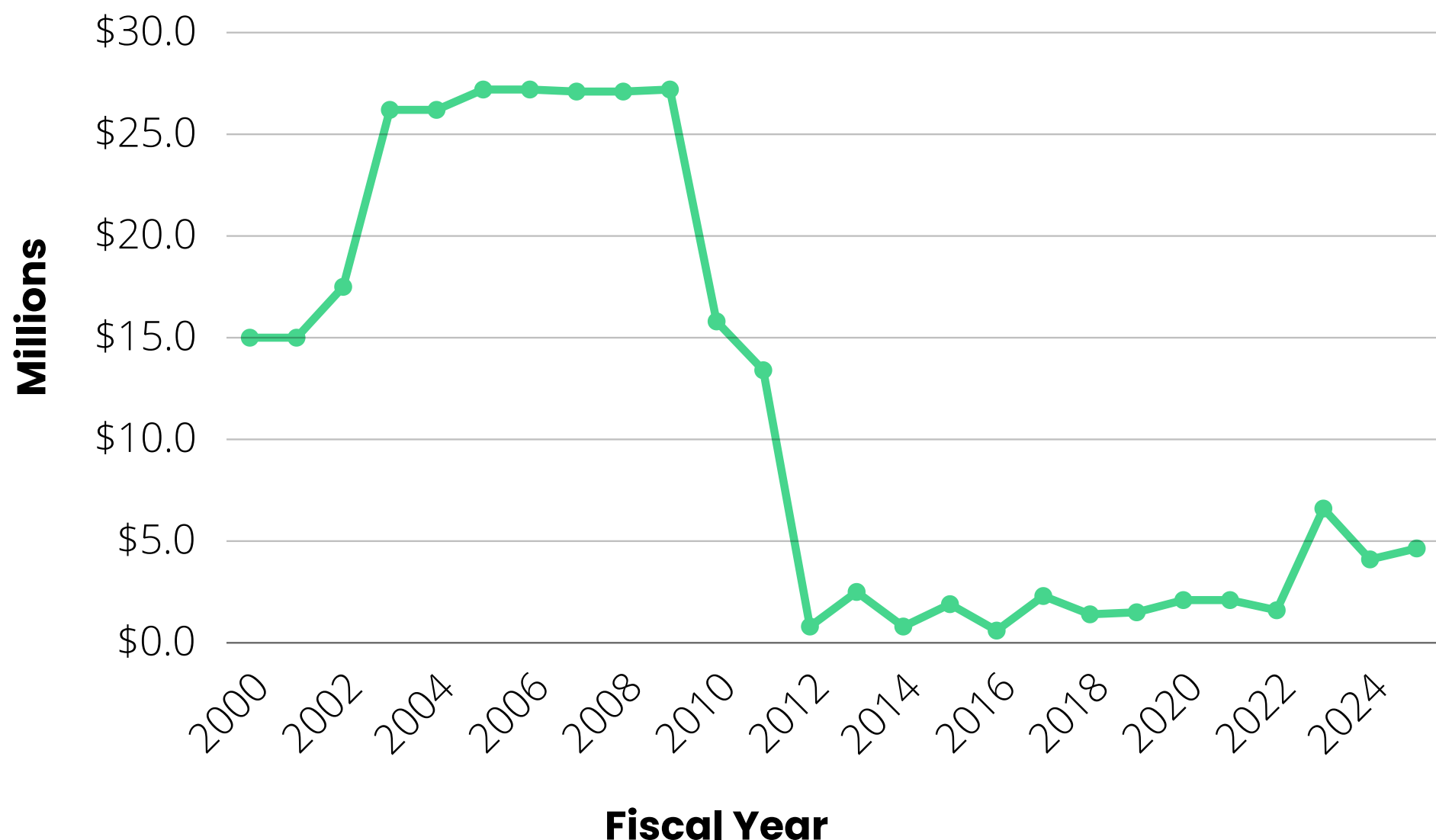
\*CA exempts flavored premium cigars and roll-your-own tobacco, as well as on-site consumption of flavored hookah tobacco

*February 2024*



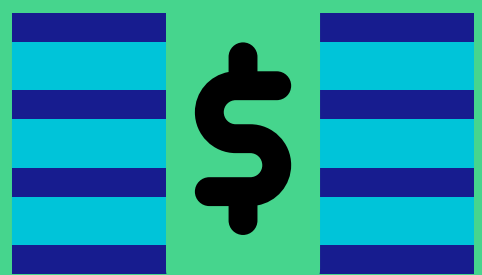
# Limited State Support for Prevention & Cessation

**State Funding History for Washington's Commercial Tobacco Prevention & Cessation Program (millions)**



Total amounts show all state contributions to the program. Some information obtained from a data request to WA Department of Health and legislative records.

		2000-2009	Today
	<b>Community-based Programs</b>	✓	↓
	<b>School-based Programs</b>	✓	✗
	<b>Cessation Support</b>	✓	↓
	<b>Public Awareness &amp; Education</b>	✓	↓
	<b>Preventing Youth Access: Education &amp; Compliance</b>	✓	↓
	<b>Assessment &amp; Evaluation</b>	✓	✗

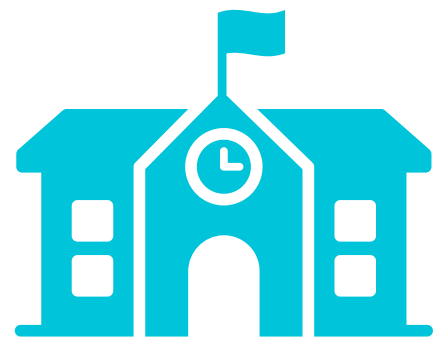


# WA Used to Fund School-based Programs to Address Youth Commercial Tobacco Use

**From 2000–2009, WA invested about \$23.6 M annually in multiple strategies to prevent and reduce commercial tobacco use.**



**Youth and Adult Smoking Rates Fell Faster than National Averages**



**In 2001, School-based Programs Received \$2.5 Million to Reduce Nicotine Use**

\$ to all 9 ESDs for educational curricula, prevention strategies, school policies & data gathering.

**\$2.5 M in 2001 = \$4.5 M in 2024 dollars**

## State \$ for Comprehensive Approach 2000-2009 Today



**Community-based Programs**



**School-based Programs**



**Cessation Support**



**Public Awareness & Education**



**Preventing Youth Access: Education & Compliance**



**Assessment & Evaluation**





# Supporting Healthy Youth fact sheet

## Eliminate All Flavored Tobacco Products

## Fund Tribal, Local, and School-Based Programs for Nicotine Prevention and Cessation

**WASHINGTON BREATHES** Supporting Healthy Youth  
Policy Solutions to End Youth Commercial Tobacco Use

**ELIMINATE ALL FLAVORED TOBACCO PRODUCTS**

**End the sale of youth-appealing flavored tobacco products like candy, fruit, iced or menthol, dessert, or junk food flavors.**

- Prohibit all flavored nicotine products inclusive of all delivery methods and any other tobacco industry innovations.
- Ensure enforcement actions hold retailers and manufacturers accountable, not youth.

81% of teens age 12-17 who use a tobacco product started with a flavored product.

50% of teens age 12-17 who smoke use menthol cigarettes.

**FUND TRIBAL, LOCAL, AND SCHOOL-BASED PROGRAMS**

**Fund Youth Nicotine Prevention**

- Increase state youth prevention dollars. Prevention is the most effective strategy.
- Restore funding to Tribal health agencies and local health departments for local strategies.
- Restore funding to community-based organizations for tailored programs.
- Direct tobacco tax revenues towards youth prevention programs.

**Fund Youth Nicotine Cessation**

- Ensure access to cessation programs designed for youth under age 21.
- Train health providers to screen youth for nicotine use.
- Ensure school staff have training and resources to provide supportive responses that encourage youth to quit.

<1% of Washington's tobacco-related revenues are invested in prevention and cessation.

9 out of 10 current smokers started as youth.

68% of youth who vape have tried to quit, but almost 2/3's had no cessation support.

“Real progress in combatting youth vaping, smoking, and use of nicotine pouches will take a comprehensive approach that leverages the roles of community-based organizations and schools.”

Annually, the tobacco industry spends over \$84 million on marketing in WA State. That's almost 20 times the state's \$4.6 million investment in FY 2025 for all nicotine prevention and cessation programs.

Visit [washingtonbreathes.org](http://www.washingtonbreathes.org) for more information. Fact sheet data sources: [bit.ly/WaProtectYouth](https://bit.ly/WaProtectYouth)

**WASHINGTON BREATHES** SUPPORTING HEALTHY YOUTH  
Youth Commercial Tobacco Use Trends & Disparities in Washington State

**Tobacco Use Trends and 2021-2023 (past 30-day) use**

E-Cigarettes/Vapor Products

Vaping replaced smoking among WA youth in the last 10 years.

Flavored tobacco products are the top choice of WA youth.

COVID-19. In 2021, the survey also shifted to primarily an all online format. Due to COVID-19, however the long-term impacts are unknown. askhys.net

**Washington Youth E-cigarette/Vapor Product Use 10th Graders 2023**  
Healthy Youth Survey, current (past 30-day) use

**by race/ethnicity**

White/Caucasian	~10.5%
Native Hawaiian/Other Pacific Islander	~10.0%
Hispanic/Latino/Spanish	~9.5%
Black/African American	~9.0%
Asian/Asian American	~8.5%
American Indian/ Alaska Native	~8.0%
Other	~7.5%

**by sexual orientation**

Heterosexual	~10.5%
Gay or Lesbian	~10.0%
Bisexual	~9.5%

and individuals working to eliminate the harms of commercial tobacco use. Washington Healthy Youth Workgroup and approved by the Steering Committee. [washingtonbreathes.org](http://www.washingtonbreathes.org) for more information

See our fact sheet

“Supporting Healthy Youth: Policy Solutions to End Youth Commercial Tobacco Use”

Fact sheet developed by the coalition’s Supporting Healthy Youth workgroup and approved by our Steering Committee.

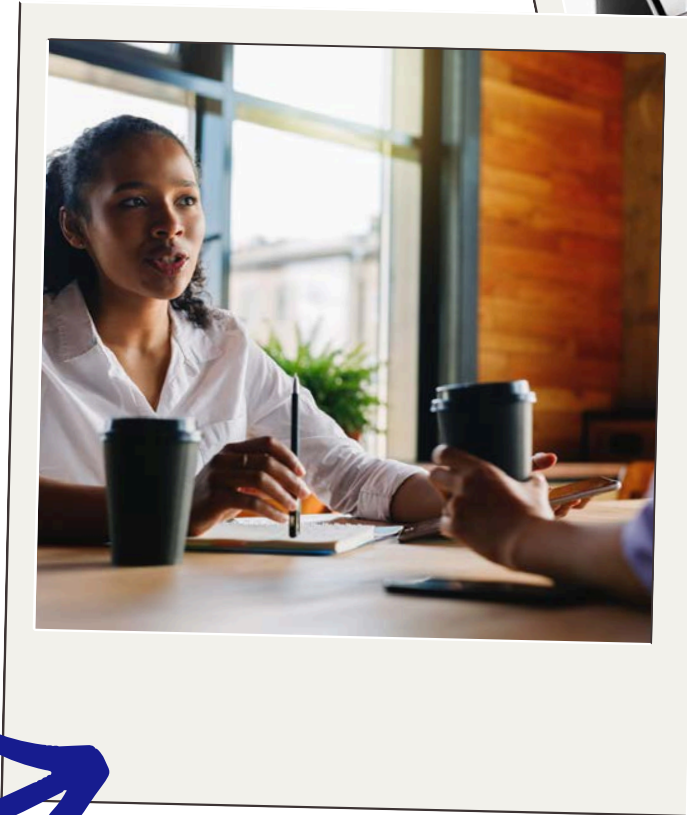
# Changes in State Policy Happen When Laws are Changed Here



**But Only After Legislators  
Understand a Problem and Know that  
Community Members Need Change**

**That's EDUCATION**

**that can happen here**



**and here**



**and here**





# Policy Statements and Fact Sheets



visit our Exhibit Table  
for hard copies



and

Thank you for not vaping  
window clings



We must invest more to rebuild education, prevention, and cessation services.

**Washington Invests Too Little In Preventing & Treating Nicotine Dependence**

Actual State Spending versus Recommended State Spending for Commercial Tobacco Prevention & Cessation

**Menthol & Flavored Tobacco Products**  
Position Statement

All flavorings, including menthol, should be prohibited in all commercial tobacco and nicotine products.

A policy to end the sales of menthol cigarettes nationwide could save 650,000 lives in the U.S., including over 250,000 Black lives.

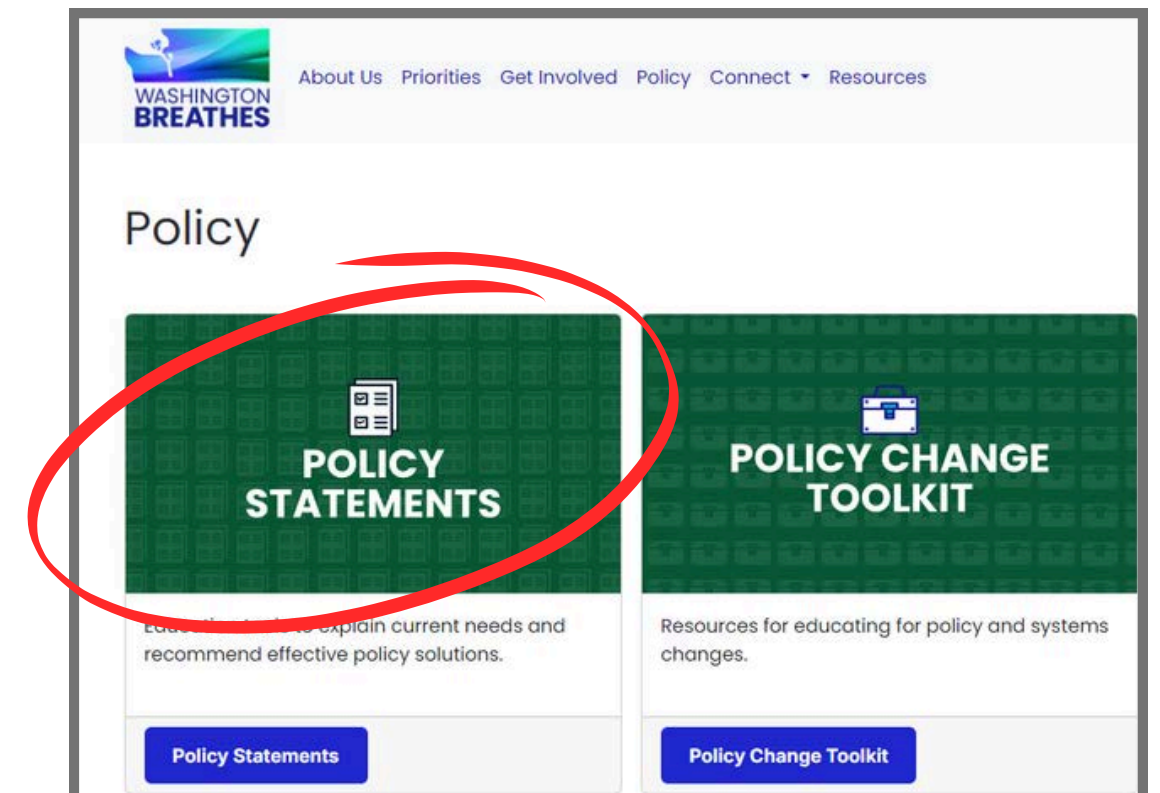
<b>REDUCE INITIATION</b> Flavored tobacco products are commonly the first nicotine products used by youth.	<b>PROTECT COMMUNITIES</b> Menthol cigarettes & tobacco products disproportionately harm people of color and LGBTQ people.
---	---

**Supporting Healthy Youth**  
Policy Solutions to End Youth Commercial Tobacco Use

**ELIMINATE ALL FLAVORED TOBACCO PRODUCTS**

**FUND TRIBAL, LOCAL, AND SCHOOL-BASED PROGRAMS**

PDFs for download at  
[washingtonbreathes.org](http://washingtonbreathes.org)  
under the Policy section



# THANK YOU!



# WASHINGTON BREATHES

## **November 20, 2024 Coalition Meeting**

9-10 AM Networking & Resource Sharing

10 AM - Noon Coalition Meeting

virtual & in-person participation hubs

Get involved with our **Policy Change Learning Circles** to track legislative developments and analyze bills.

**More info at**

**[washingtonbreathes.org/events](https://washingtonbreathes.org/events)**

**[washingtonbreathes.org/get-involved/](https://washingtonbreathes.org/get-involved/)  
to join as a coalition member or participate in a work group**

Margaret Shield

206-499-5452

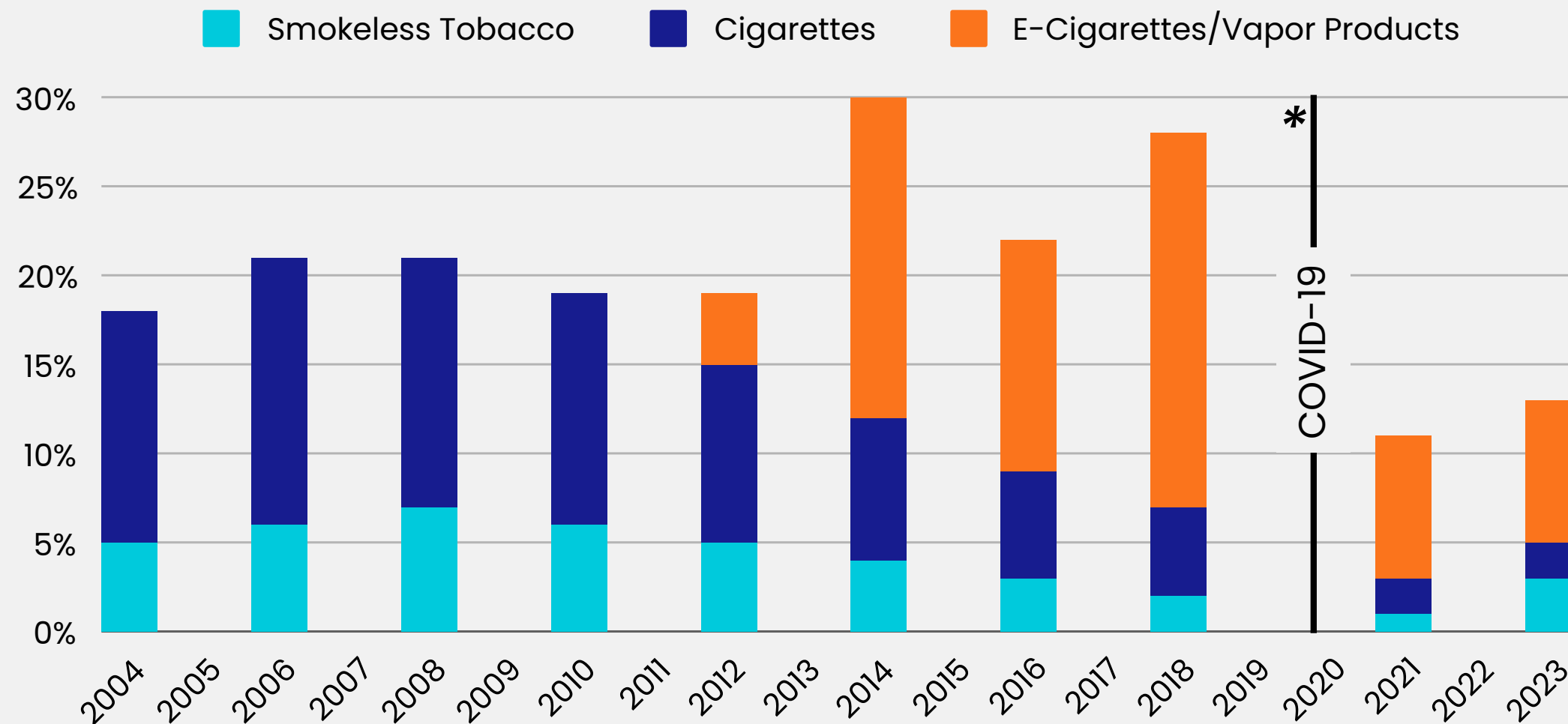
[margaret.shield@cehstrategies.com](mailto:margaret.shield@cehstrategies.com)



# Trends in Youth Commercial Tobacco Use

## Washington Youth Commercial Tobacco Use Trends 10th Graders 2004-2018 and 2021-2023

Healthy Youth Survey, current (past 30-day) use



Vaping replaced smoking among WA youth in the last 10 years.

Use of oral nicotine products - like Zyn - may be increasing.

HYS smokeless tobacco question updated in 2023 to include nicotine pouches, lozenges, gum, or toothpicks.

\*HYS data is not directly comparable before and after COVID-19. In 2021, the survey also shifted to primarily an all online format. There was a post-pandemic decrease in youth substance use reporting; however the long-term impacts are unknown. askhys.net

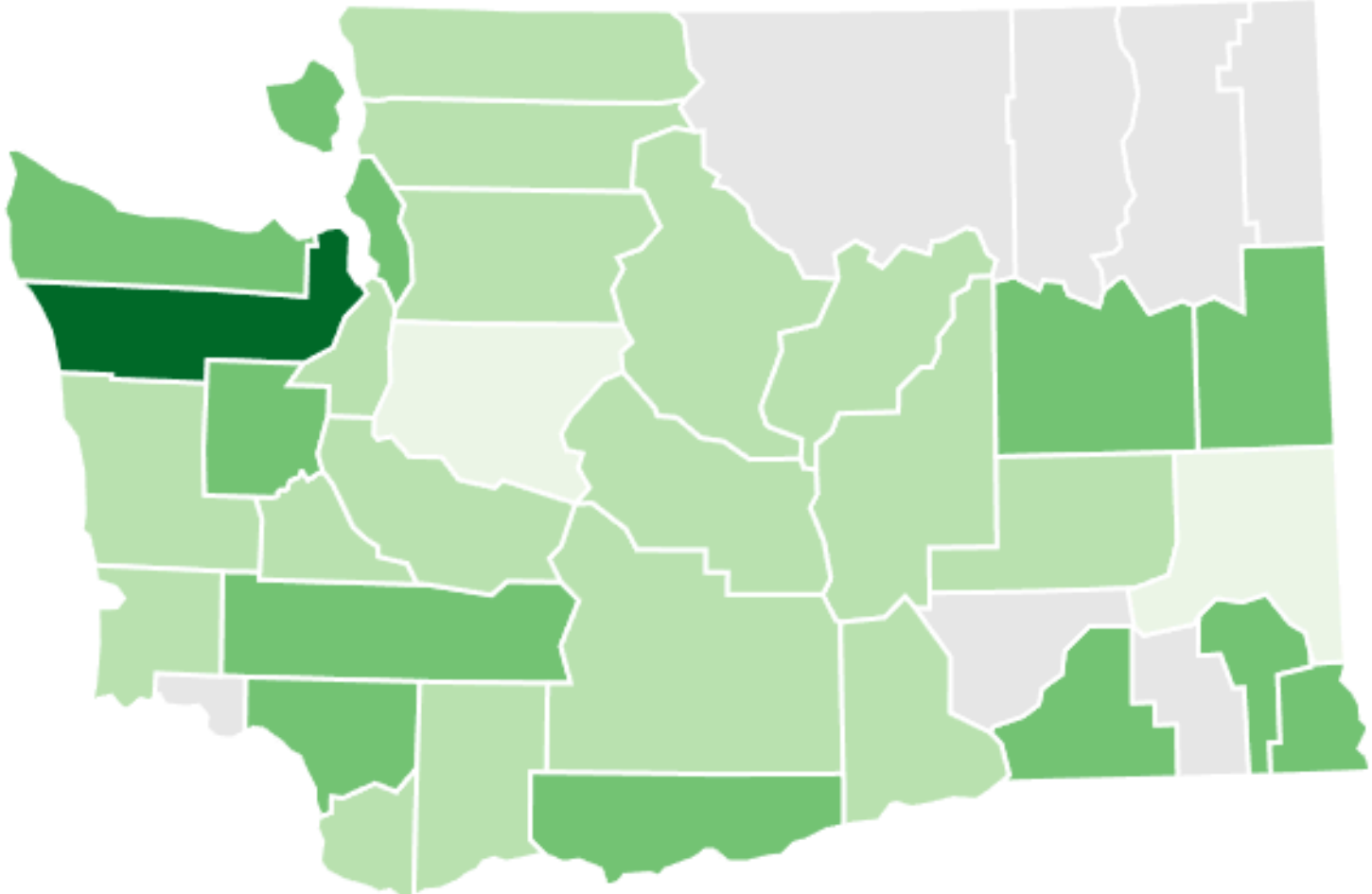
# 2023 Healthy Youth Survey Data by County – 10th graders

## E-Cigarette Use by County

Measure: **Current E-Cigarette/Vape Use**

By County

0-5% 5-10% 10-15% 15-20% 20-25% ?



Current E-Cigarette/Vape Use across counties ranged from 2.5% to 22.7%

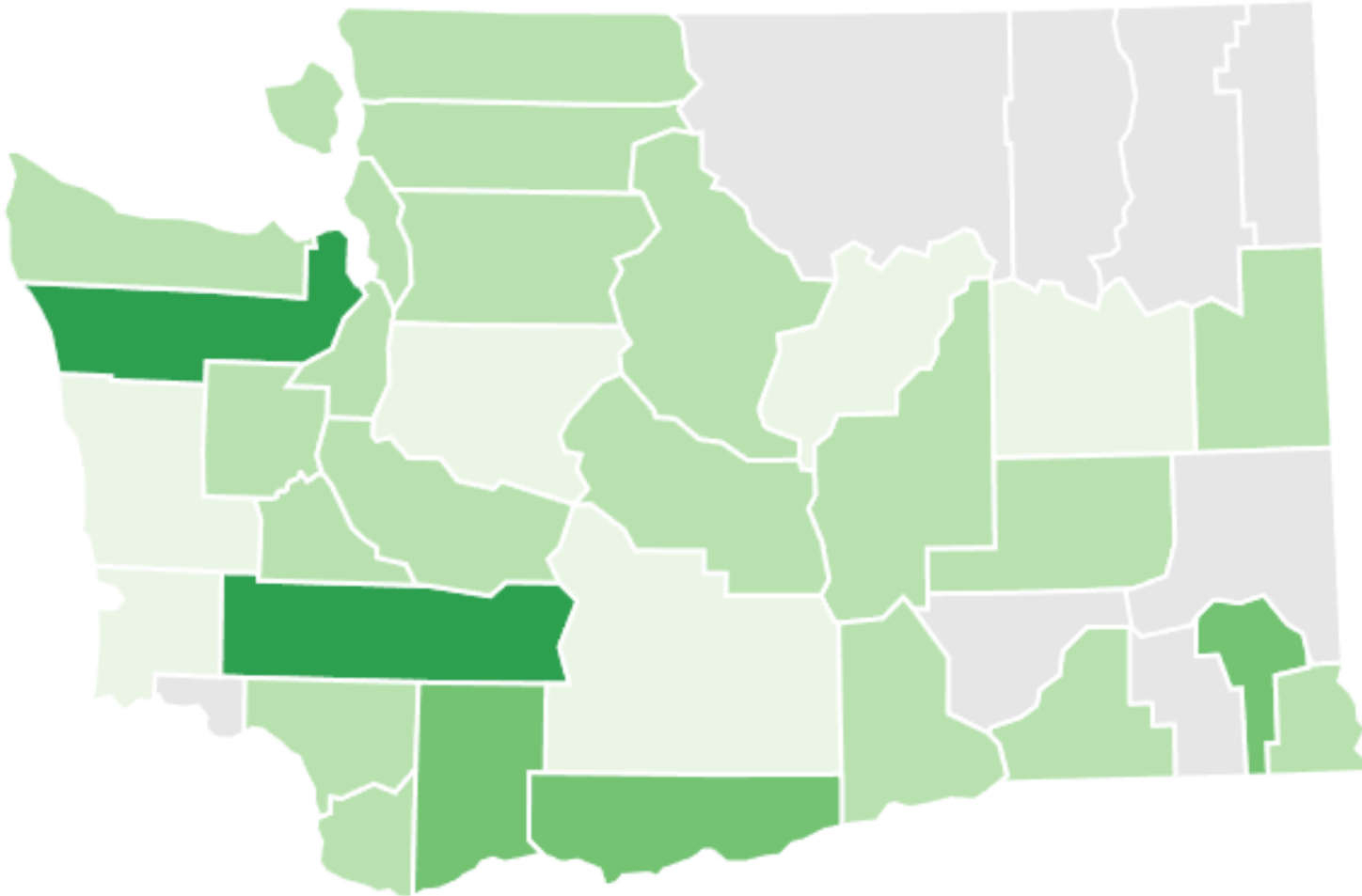
(Statewide: 7.7%)

## Cigarette Use by County

Measure: **Current Cigarette Smoking**

By County

0-2% 2-4% 4-6% 6-8% 8-10% ?



Current Cigarette Smoking across counties ranged from 1.2% to 7.1%

(Statewide: 2.2%)



# Coming Together to Work for Change

## Our Target Audiences

Coalition Members / Partners

Decisionmakers/ Policymakers

Member-Driven Workgroups

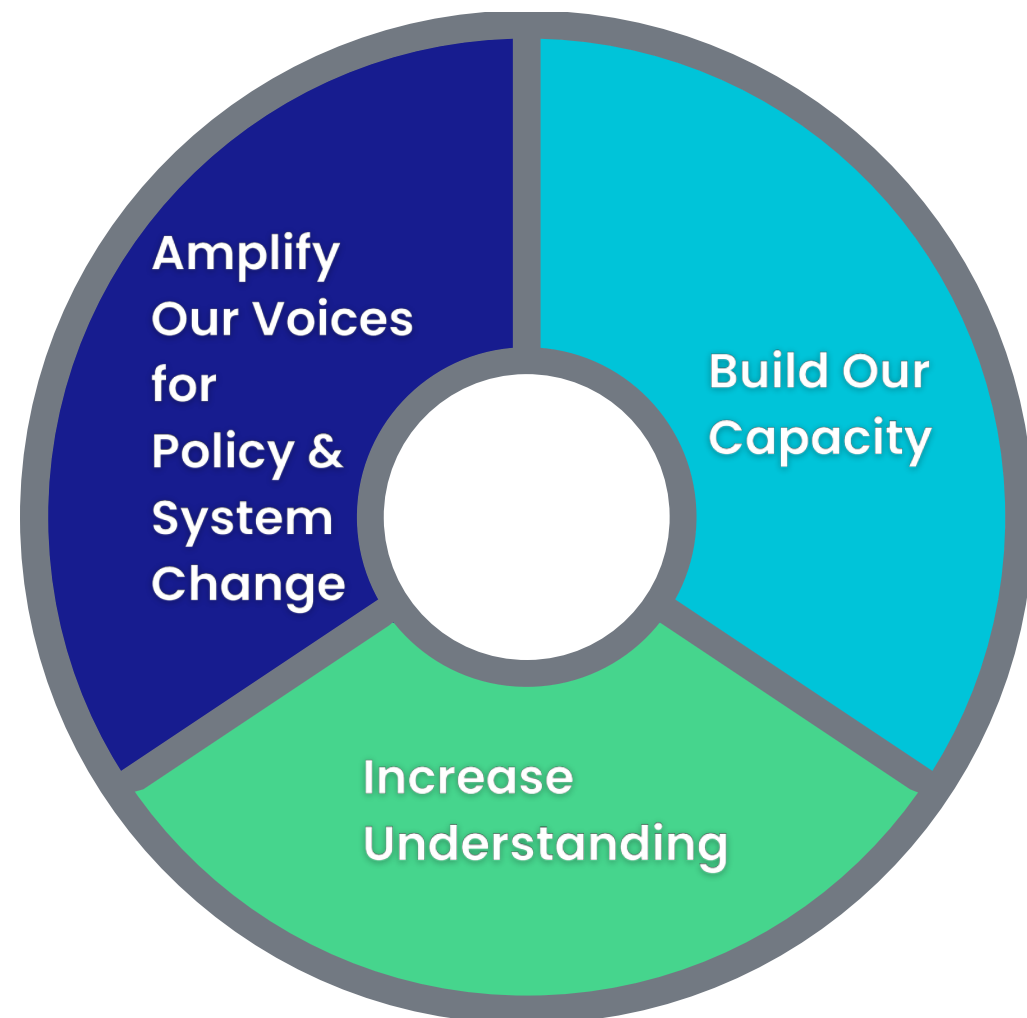


Email Updates

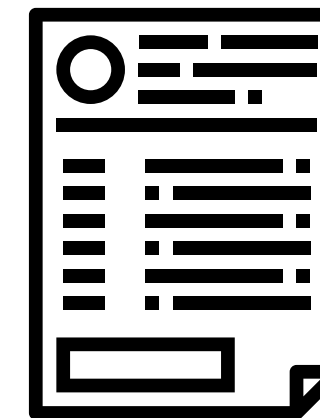


Online Resources

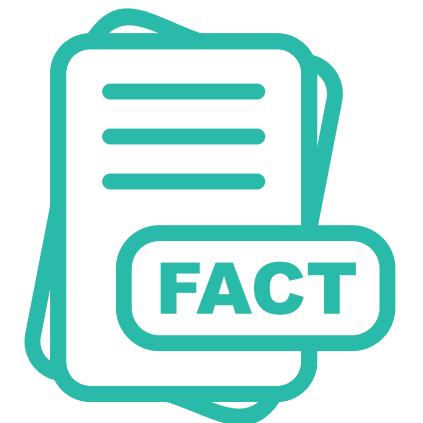
## Our Strategies



Policy Change Learning Circles



Policy Statements



Fact Sheets



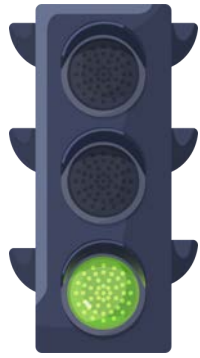
Trainings & Toolkits



coming soon!  
Social Media Tools



# Washington Breathes Educates for Policy Changes



## EDUCATION

**Providing information, research, analysis, or stories about an issue.**

"Too many young people in our community are vaping because..."



## ADVOCACY

**Educating about a goal, policy, program, or community need.**

"Our program needs more funding to reduce vaping in our community..."



## LOBBYING

**Asking a policymaker to take a specific action on legislation.**

"Please vote yes on..."

or





"Please increase funding for..."

**Washington Breathes does not lobby or organize lobbying.**

Washington Breathes currently receives fiscal support from a state agency that includes a federal funding source, which prohibits the coalition from lobbying. The coalition focuses only on policy change education. The WA Public Disclosure Commission's definition of lobbying is online at <https://www.pdc.wa.gov/registration-reporting/lobbying>.

# Washington is One of the Most Restrictive States for Local Commercial Tobacco Regulations

## Local Governments Cannot Regulate Sales or Promotions of Cigarettes, E-Cigarettes, and Other Tobacco Products

-  **No local licensing of tobacco retailers.**
-  **No local restrictions on numbers or locations of smoke shops or vape shops.**
-  **No local restrictions on tobacco advertising, signs, or promotions.**
-  **No local laws prohibiting products designed to appeal to youth.**

RCW 70.155.130 and RCW 70.345.210

## Local Governments Can Regulate Smoking and Vaping in Public, with Some Limitations

-  **Local laws can restrict smoking in outdoor public places, like parks and playfields.**
-  **Local laws can prohibit vaping in indoor public places.**
-  **Local laws can restrict vaping in outdoor public places “where children congregate”.**

RCW 70.160 and RCW 70.345.210