

# TOBACCO AND VAPING REDUCTION STRATEGY FOR NEWFOUNDLAND AND LABRADOR

A TOBACCO AND VAPING REDUCTION PLAN  
FOR ALL PARTNERS WORKING TOWARDS  
HEALTH, WELLNESS AND EQUALITY.



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The Newfoundland and Labrador Alliance for the Control of Tobacco (ACT) is an alliance of government and non-government partners committed to the significant reduction of tobacco and vaping use in Newfoundland and Labrador.

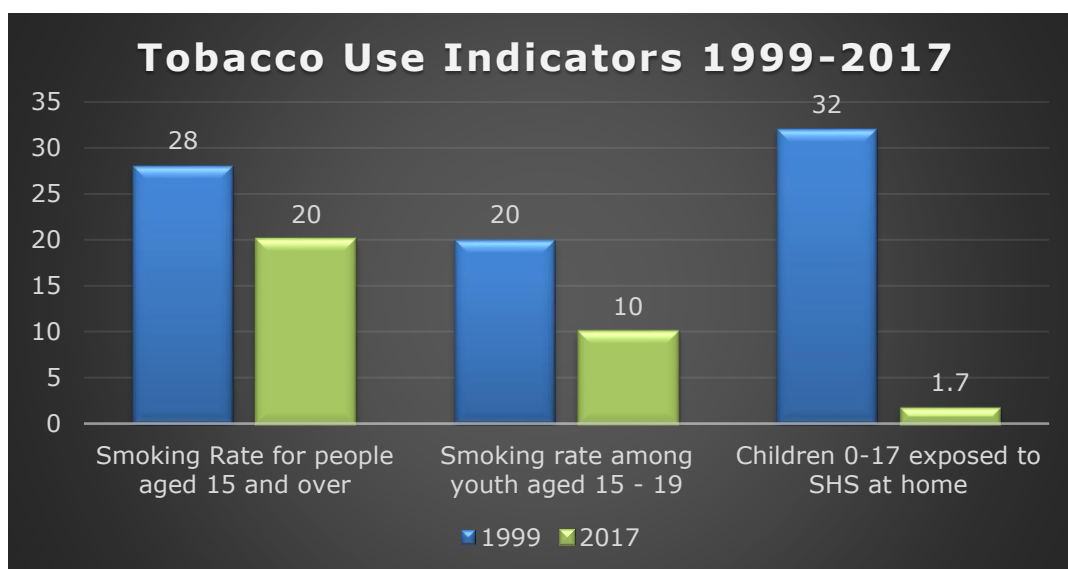
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## TOBACCO AND VAPING REDUCTION STRATEGY

Tobacco use has long been recognized as an addiction, resulting in the premature deaths of half of its users <sup>(1)</sup> <sup>(2)</sup>. It is the leading cause of preventable illness, disability and premature death in Canada <sup>(3)</sup>, and the leading cause of preventable death world-wide <sup>(4)</sup>. Further, medical and scientific evidence demonstrates that second-hand smoke is hazardous to a person's health as there is no safe level of exposure <sup>(1)</sup>. In parallel with the Federal Tobacco Control Strategy, the Canadian provinces and territories have developed comprehensive plans to address the harms caused by tobacco use.

Tobacco reduction activities have had positive impacts over the last several decades. Provincial level data from Statistics Canada's Tobacco Use Surveys demonstrates this positive trend. The 1999 data is from Canadian Tobacco Use Monitoring Survey: Overview of Historical Data, 1999 to 2012 <sup>(5)</sup> and 2017 data is from Canadian Tobacco, Alcohol and Drugs (CTADS) Survey: 2017 <sup>(6)</sup>.

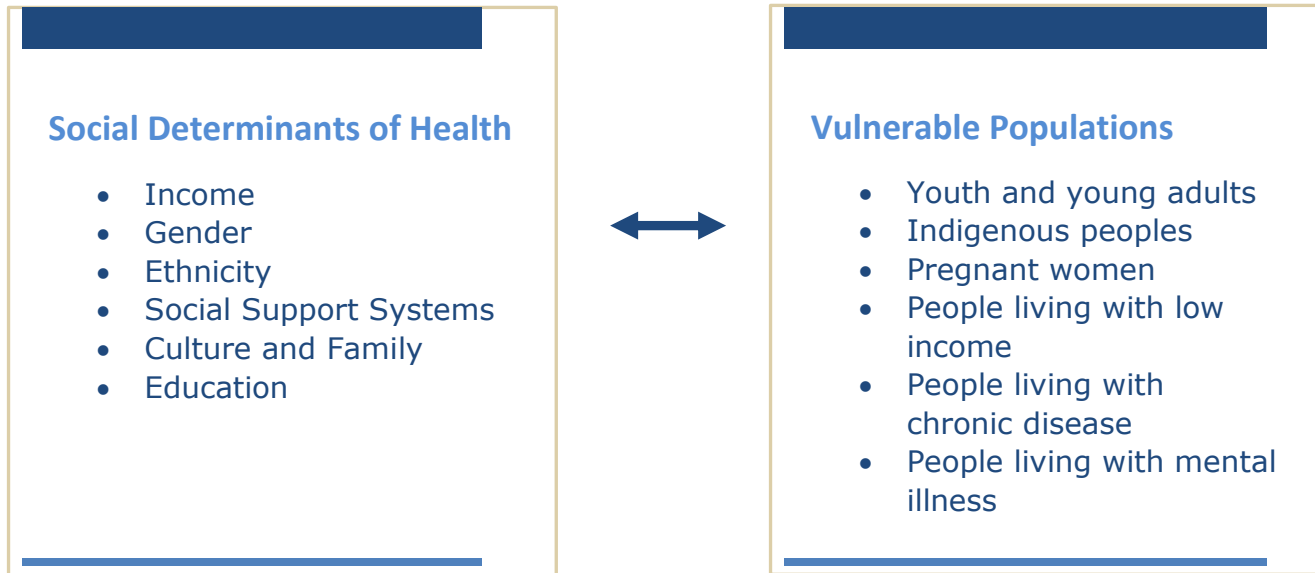


While there has been success in reducing smoking rates and improving the health of the population, there is more work to be done, particularly with the emergence of vaping products and the significant rate at which youth are using these products. A total of **47% of the province's students in grades 7-12 have tried vaping, with almost 30% of those students using vapes in the last 30 days** <sup>(7)</sup>. Due to the extent of youth vaping, more and more young people are becoming addicted to nicotine which may lead to an increase in smoking rates.

### Vaping Products

Vaping products refer to electronic nicotine delivery systems including electronic cigarettes, vapes, mods or brand name (JUUL, VYPE, Puff Bar, etc.)

There are multiple factors that influence the development and continuation of tobacco use and nicotine addiction. These factors are known as the social determinants of health. The financial, social and health impacts of tobacco use, vaping and nicotine addiction are magnified for some groups who may already face significant disadvantage. These populations have been identified as groups with higher rates of use, at increased risk of harm, or at risk of taking up or becoming regular users of nicotine.



ACT recognizes that government and community partners work to address combinations of the determinants of health for specific and perhaps multiple vulnerable populations. Partners using the Tobacco and Vaping Reduction Strategy are encouraged to apply the appropriate lens for the populations that they work with. While the actions outlined in the strategy are applicable to all populations, it will be through the combined effort of all partners working within their area of expertise, within their community and within their capacity that collectively, all populations receive attention.

## The Harms of Tobacco and Nicotine Addiction

In 1988, the U.S. Surgeon General identified nicotine as the addictive ingredient in tobacco, concluded that the addiction to nicotine is similar to the addiction to heroin or cocaine, and highlighted the critical role of addiction in the ongoing battle against tobacco use<sup>(8)</sup>. A subsequent Surgeon General's report stated that tobacco dependence is best viewed as a chronic disease with remission and relapse<sup>(9)</sup>. The World Health Organization also recognizes tobacco use as an addiction stating that it is seen falsely as a personal choice and that most smokers want to quit but have difficulty because of the addiction<sup>(10)</sup>.

The tobacco industry spends billions of dollars annually to entice individuals to begin smoking and to ensure that the addiction continues<sup>(11)</sup>. People who use tobacco tend to start young, develop addiction and struggle with it for years<sup>(12)</sup>. More needs to be done to help people who are addicted to nicotine<sup>(10)</sup>. A range of cessation interventions should be offered in ways that suit individual needs<sup>(10)</sup>. However, it cannot stop there. Individuals, communities, employers, health care

providers and governments must continue to collaborate to create environments where the smoke/vape free choice is the norm.

Addiction to nicotine in this province has significant health and economic effects. Quitting smoking helps to improve the quality of life of individuals by preventing or delaying the onset or progression of chronic diseases. Cancer, lung disease, heart disease, and other chronic diseases that result from smoking cost our health care system millions of dollars annually. In a report, *The Costs of Tobacco Use in Canada, 2012*, it was calculated that smoking cost the province an estimated \$188 million annually in both direct health care and indirect costs including lost productivity due to illness and premature death. It is expected that these costs would be higher today as the health impacts of smoking can be delayed up to 30 years and the cost of providing health care continues to rise <sup>(13)</sup>.

## The Harms of Vaping and Nicotine Addiction

Although the long-term health effects of vaping have yet to be fully determined, it is evident that while vaping may be less harmful than smoking, it is far from safe <sup>(14)</sup>. Numerous cases of serious lung damage associated with vaping have been reported <sup>(15)</sup>. These cases, as well as the probability that vaping can lead to a lifetime of addiction to nicotine, suggest that vaping poses a significant public health threat that may continue. Adult smokers who utilize vaping products as a way to quit smoking tobacco cigarettes may find success in quitting this way, however, they need to be fully aware of the risks associated with vaping.

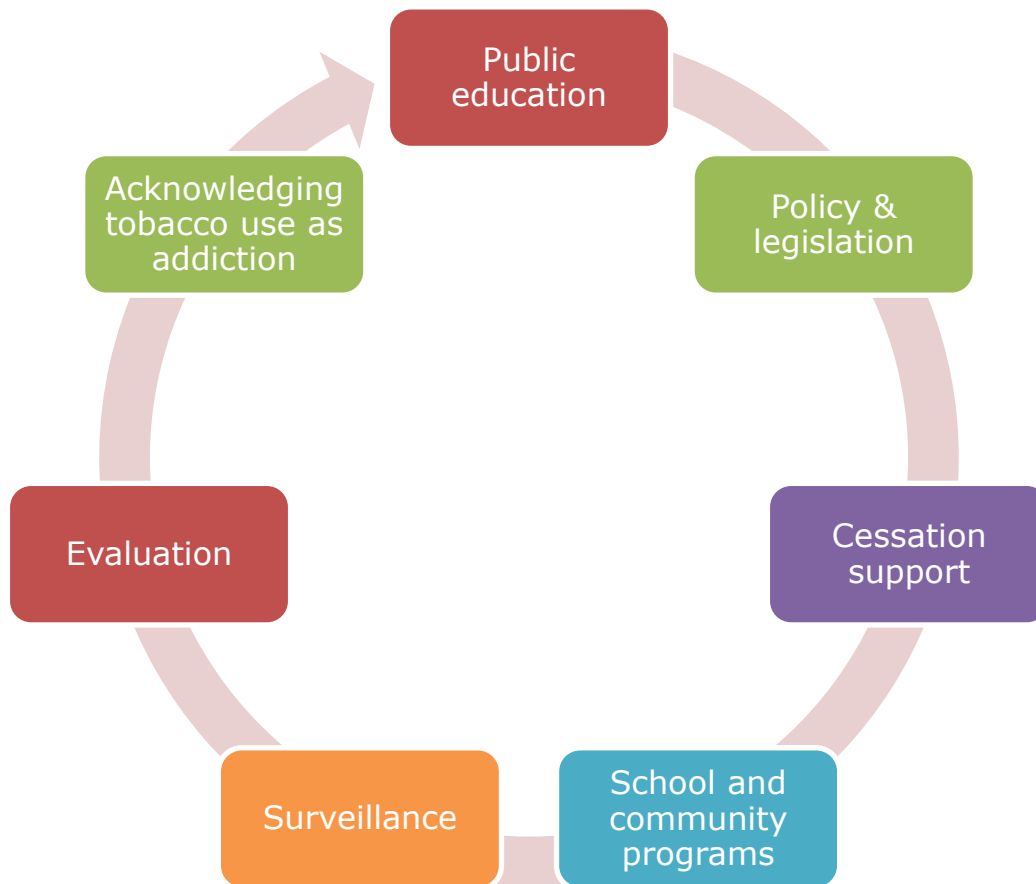
In a statement from The Council of Chief Medical Officers of Canada in October 2019, the following cautions regarding vaping were presented:

“We are very concerned that a new generation of youth addicted to nicotine will lead to a resurgence in smoking – reversing decades of progress and creating new public health problems.... While the harms of vaping products are starting to emerge researchers are still gathering data on their potential effectiveness as a means to helping smokers quit smoking. What we do know is that regardless of a person’s age vaping can lead to nicotine addiction and can increase exposure to harmful chemicals for people who are non-smokers <sup>(16)</sup>.”

Since the Covid-19 pandemic, another risk has emerged. It has been shown that individuals sharing vape products risk undoing public health efforts to control and prevent the transmission of communicable diseases in the population. People who smoke and/or vape may be more susceptible to infection and more severe complications <sup>(17)</sup>.

## TOBACCO REDUCTION STRATEGY

Designed to be consistent with established and new health and social initiatives within the province, this Tobacco and Vaping Reduction Strategy provides direction regarding the development and implementation of tobacco and vaping control actions to create a province free from the harms of tobacco and vaping. Addressing the harms of tobacco and vaping requires a comprehensive approach that includes:



Addressing the harms caused by tobacco use and vaping is a shared responsibility. This strategy is dependent on the commitment and co-operation of all partners and stakeholders in our province working together to maximize the collective impact. Together, we can prevent children and youth from starting to use tobacco or vaping products, protect people from the harms of second-hand smoke and vapour, increase the number of smokers who quit and continue to change people's attitudes about tobacco and vaping. This strategy aims to protect the health of our children, our families and our communities and enables people to live healthier and longer lives.

## Vision

To significantly improve the health of Newfoundlanders and Labradorians by reducing the harm caused by tobacco use and vaping.

## Goals

- Preventing children, youth and young adults from starting to use tobacco and/or vaping products
- Protecting people from exposure to second-hand smoke and vapour
- Encouraging and assisting individuals to successfully quit smoking and/or vaping
- Changing attitudes about tobacco use and vaping

## Guiding Principles

- *Comprehensive:* Building healthy public policy, creating supportive environments, strengthening community action, developing personal skills and reorienting health services.
- *Population Health and Equity:* Implementing population-based prevention efforts and approaches that recognize the need for increased efforts to help those who are most vulnerable to the multiple harms of tobacco and vaping.
- *Best Practice (Evidence Informed):* Using research and practice experience about what “works” to guide tobacco and vaping reduction initiatives. It includes the exploration of new ideas and the identification of the potential benefits, harms and costs of any intervention.
- *Collaboration:* Creating and optimizing opportunities for shared responsibility and accountability among stakeholders.
- *Sustainability:* Establishing effective approaches that will continue in the long term with sufficient resources.

## ACTION AREA 1. Community Capacity Building

Communities are groups of people who have a common interest(s). Community capacity building is about helping communities acquire or develop the resources and conditions they need to improve the health and well-being of the community.

**The Tobacco and Vaping Reduction Strategy focuses on strengthening community action and creating supportive environments to promote tobacco and vape free living.**

- 1.1 Engage and partner with community organizations who support at-risk populations in the development, implementation, and evaluation of tobacco and vaping control initiatives.**
- 1.2 Advise and support community-led actions to promote tobacco and vape free living.**
- 1.3 Invest in tobacco and vaping control initiatives that are grounded in best practice.**
- 1.4 Promote and support the inclusion of tobacco and vape use interventions within the scope of practice for all health professionals.**
- 1.5 Develop and/or maintain provincial and regional networks to advance the control of tobacco use and vaping.**



## ACTION AREA 2. Education and Awareness

Education and awareness initiatives are based on understanding the value of education and recognizing that using multiple approaches makes messaging more effective.

**The Tobacco and Vaping Reduction Strategy prioritizes education and awareness as core activities for delivering health promoting and health protecting messages to the entire population.**

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|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>2.1</b> | <b>Promote awareness of tobacco and vaping legislation and policies.</b>                                                                                                          |
| <b>2.2</b> | <b>Increase awareness of the health risks associated with the exposure to second and third hand smoke and vapour particularly to pregnant women, infants, children and youth.</b> |
| <b>2.3</b> | <b>Use multiple media strategies to promote tobacco and vaping control messages.</b>                                                                                              |
| <b>2.4</b> | <b>Support parents and others in their efforts to prevent tobacco and/or vaping use among children and youth.</b>                                                                 |
| <b>2.5</b> | <b>Increase awareness of the benefits of quitting smoking/vaping and the available resources and services to support quitting.</b>                                                |
| <b>2.6</b> | <b>Encourage the inclusion of tobacco and vaping education in the curriculum of professional programs.</b>                                                                        |
| <b>2.7</b> | <b>Partner with post-secondary administrations and student organizations to support their efforts to promote tobacco and vape free living.</b>                                    |
| <b>2.8</b> | <b>Promote and integrate tobacco and vape free living messages into new and existing health promotion materials and initiatives.</b>                                              |
| <b>2.9</b> | <b>Partner with the Healthy Students Healthy Schools Initiative to support tobacco and vape free living messages using a comprehensive school health approach.</b>                |

## ACTION AREA 3. Healthy Public Policy

Healthy Public Policy is the development of appropriate laws, policies and guidelines which create safe and healthy communities. Amendments to federal, provincial and municipal legislation and organizational policies have led to significant change in the areas of prevention, protection and cessation.

### **The Tobacco and Vaping Reduction Strategy advocates for healthy public policy to reduce inequalities within our communities.**

- |             |                                                                                                                                                                                                                                                                                    |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>3.1</b>  | <b>Advocate for and support smoke and vape free policies in various settings (e.g., outdoor workplaces, work vehicles, building perimeters, parks/playgrounds, outdoor sport facilities, foster homes).</b>                                                                        |
| <b>3.2</b>  | <b>Explore new opportunities and approaches to reducing youth access and exposure to tobacco and vaping products.</b>                                                                                                                                                              |
| <b>3.3</b>  | <b>Promote and support the integration of smoke and vape free living messages and actions in provincial strategies.</b>                                                                                                                                                            |
| <b>3.4</b>  | <b>Support and promote the creation of smoke and vape free workplace policies that include a range of cessation options including access to counselling and pharmacotherapy.</b>                                                                                                   |
| <b>3.5</b>  | <b>Advocate for and support the expansion of nicotine addiction treatment under public and private insurance programs.</b>                                                                                                                                                         |
| <b>3.6</b>  | <b>Advocate for and support increases in tobacco and vape taxes.</b>                                                                                                                                                                                                               |
| <b>3.7</b>  | <b>Support provincial and national tobacco and vaping control advocacy efforts (e.g., reducing the availability of contraband tobacco products, prohibiting the introduction of new nicotine products to the market and supporting governments cost recovery tobacco lawsuit).</b> |
| <b>3.8</b>  | <b>Advocate for an amendment to the <i>Smoke Free Environment Act, 2005</i> to provide for perimeter bans around all buildings used by the public.</b>                                                                                                                             |
| <b>3.9</b>  | <b>Advocate for government to adopt tobacco and vape free outdoor property policies.</b>                                                                                                                                                                                           |
| <b>3.10</b> | <b>Support and advocate for tobacco and vape free policies for apartment/multi-unit dwellings.</b>                                                                                                                                                                                 |
| <b>3.11</b> | <b>Support sport and recreation organizations as they develop and maintain tobacco and vape free policies and programs.</b>                                                                                                                                                        |

## ACTION AREA 4. Cessation and Treatment Services

It is widely recognized that most people who smoke want to quit and that people who are addicted to nicotine products need easy access to a wide range of affordable services to help them address the addiction.

**The Tobacco and Vaping Reduction Strategy supports the delivery and enhancement of cessation services across the province to increase the number of individuals who quit and remain smoke/vape free.**

- |            |                                                                                                                                                                                                                                                                           |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>4.1</b> | <b>Support the continued development and delivery of a coordinated, integrated and systematic approach to smoking/vaping cessation.</b>                                                                                                                                   |
| <b>4.2</b> | <b>Continue to promote the implementation of evidence-based brief tobacco interventions and cessation support as part of routine care in health care settings.</b>                                                                                                        |
| <b>4.3</b> | <b>Encourage health care providers to incorporate brief interventions for smoking cessation into their programs and services (e.g. Ask, Advise, Refer).</b>                                                                                                               |
| <b>4.4</b> | <b>Promote the integration of the Smokers' Helpline Referral Program into healthcare, workplace and community settings.</b>                                                                                                                                               |
| <b>4.5</b> | <b>Advocate for the provision of and accessibility of a range of cessation interventions for those who wish to quit smoking or vaping.</b>                                                                                                                                |
| <b>4.6</b> | <b>Provide support to schools to assist students to reduce or quit using nicotine products.</b>                                                                                                                                                                           |
| <b>4.7</b> | <b>Promote the adoption and use of national clinical practice guidelines for cessation and population-based strategies.</b>                                                                                                                                               |
| <b>4.8</b> | <b>Promote opportunities for continuing professional education in tobacco/vaping cessation for educators, health care providers and others.</b>                                                                                                                           |
| <b>4.9</b> | <b>Support the continued investment in and promotion of the Provincial Smokers' Helpline as an integral component of a comprehensive approach to smoking cessation which is easily accessible to the public, health care providers and community-based organizations.</b> |

## ACTION AREA 5. Research, Monitoring, and Evaluation

Actions under Research, Monitoring and Evaluation involve building knowledge and collecting data to guide work in promoting tobacco and vape free living.

**The Tobacco and Vaping Reduction Strategy is committed to the on-going development and use of evidence-based practices in understanding and addressing tobacco and vaping control in Newfoundland and Labrador.**

**5.1 Support tobacco and vaping control research.**

**5.2 Disseminate new tobacco and vaping research to contribute to the knowledge of health and education professionals and the general public.**

**5.3 Incorporate evaluation into all new tobacco and vaping control initiatives.**

**5.4 Contribute to the documentation of tobacco and vaping control initiatives occurring throughout the province.**

**5.5 Advocate for and contribute to the collection of research data to determine tobacco and vaping use patterns (prevalence and exposure).**

## MOVING FORWARD

To achieve significant reduction in smoking and vaping prevalence and the number of people being exposed to second-hand smoke and vapour, the implementation of this strategy relies on the commitment, capacity, and effort of all partners and stakeholders as well as continued leadership and financial investment. Partners will be responsible for developing their own specific action plans based on the priority areas and the sharing of information. ACT will lead key strategic initiatives in collaboration with partners.

With partners working together, within their area of expertise and influence, the Tobacco and Vaping Reduction Strategy will be best positioned to achieve success.

## REFERENCES

1. **US Department of Health and Human Services [USDHHS].** *How Tobacco Smoke Causes Disease: The Biology and Behavioral Basis for Smoking-Attributable Disease: A report of the Surgeon General.* Atlanta, GA: U.S : Department of Health and Human Services, Centre for Disease Control and Prevention, National Centre for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health., 2010.
2. **World Health Organization.** Tobacco Fact Sheet # 339. *WHO News Room.* [Online] May 27, 2011. [Cited: September 30, 2020.] <https://www.who.int/news-room/fact-sheets/detail/tobacco>.
3. **Public Health Agency of Canada. (2013).** Risk Factor Atlas. *Government of Canada .* [Online] 2013. [Cited: September 25, 2020.] <http://www.phac-aspc.gc.ca/cd-mc/atlas/index-eng.php>.
4. **WHO Report on the Global Tobacco Epidemic, 2011: Warning About the Dangers of Tobacco. WHO Tobacco Free Initiative.** [Online] 2011. [Cited: September 28, 2020.] [https://www.who.int/tobacco/global\\_report/2011/en/](https://www.who.int/tobacco/global_report/2011/en/).
5. **Statistics Canada. Canadian Tobacco Use Monitoring Survey: overview of historical data, 1999 to 2012.** [Online] Government of Canada, October 01, 2013. [Cited: October 19, 2020.] <https://www.canada.ca/en/health-canada/services/publications/healthy-living/overview-historical-data-1999-2012.html#tab7>.
6. **Canadian Tobacco, Alcohol and Drugs (CTADS) Survey: 2017.** [Online] Government of Canada, January 4, 2019. [Cited: October 19, 2020.] <https://www.canada.ca/en/health-canada/services/canadian-tobacco-alcohol-drugs-survey/2017-summary/2017-detailed-tables.html#t1>.
7. **Canadian Student Tobacco, Alcohol and Drugs Survey 2018-2019.** [Online] Government of Canada, December 19, 2019. [Cited: October 19, 2020.] <https://www.canada.ca/en/health-canada/services/canadian-student-tobacco-alcohol-drugs-survey.html>.
8. **U.S. Department of Health and Human Services [USDHHS].** *The Health Consequences of Nicotine Addiction. A Report of the Surgeon General .* Georgia, U.S : Department of Health and Human Services, Centers for Disease Control and Prevention, National Centre for Chronic Disease Prevention and Health Promotion, 1988.
9. **Reducing Tobacco Use: A Report of the Surgeon General—Executive Summary.** Atlanta, Georgia: U.S. : Department of Health and Human Services, Centers for Disease Control and Prevention, National Centers for Chronic Disease Prevention and Health Promotion, 2000.
10. **World Health Organization. MPower: A Policy Package to Reverse the Tobacco Epidemic.** Geneva, Switzerland : WHO, 2008.
11. **Centres for Disease Control and Prevention. Tobacco Industry Marketing.** [Fast Facts and Fact Sheets] Atlanta, Georgia, US : Office on Smoking and Health, 2020. [https://www.cdc.gov/tobacco/data\\_statistics/fact\\_sheets/tobacco\\_industry/marketing/index.htm](https://www.cdc.gov/tobacco/data_statistics/fact_sheets/tobacco_industry/marketing/index.htm).
12. **Centre for Addiction and Mental Health. Disease Interrupted.** [ed.] Charl Els, Diane Kunyk and Peter Selby. Toronto, ON : CAMH Education, 2017.
13. **Dobrescu, A, et al. The Costs of Tobacco Use in Canada, 2012.** Ottawa, ON : The Conference Board of Canada, 2017.
14. **Health Canada. Risks of Vaping.** [Online] Government of Canada, July 11, 2020. [Cited: October 20, 2020.] <https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping/risks.html>.

15. **Vaping-Associated Lung Illness.** [Online] Government of Canada, August 20, 2020. [Cited: October 20, 2020.] <https://www.canada.ca/en/public-health/services/diseases/vaping-pulmonary-illness.html>.
16. **Public Health Agency of Canada. Statement from the Council of Chief Medical Officers of Health on vaping in Canada.** [Online] Government of Canada, October 11, 2019. [Cited: October 20, 2020.] <https://www.canada.ca/en/public-health/news/2019/10/statement-from-the-council-of-chief-medical-officers-of-health-on-vaping-in-canada.html>.
17. **Public Health Ontario. Tobacco and COVID-19 -- What We Know So Far.** [Online] July 31, 2020. [Cited: October 19, 2020.] <https://www.publichealthontario.ca/-/media/documents/ncov/covid-wwksf/2020/08/what-we-know-tobacco-covid.pdf?la=en>.



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