Vapers’ knowledge: a lay epidemiology

Marewa Glover  PhD
Twitter: @MarewaGlover


1. Global Public Health, P O Box 82, Glenorchy 9350, NZ.
2. School of Health Sciences, College of Health, Massey University, Private Box 756, Wellington 6140, New Zealand.
3. Professor of Public Health, Massey University at time of the research; contact now via marewaglover@xtra.co.nz
Vaping in NZ

• Initially, Ministry of Health claimed:
  • Nicotine e-liquid was banned under Smoke-free Environments Act (1990) clause prohibiting the import, sale & distribution, & advertising, of “oral” tobacco products
  • Import for personal use was deemed legal
• Tobacco control polarised
  • Majority of sector said to be against, but a few key people were for vaping
• ‘Black market’ in nicotine e-liquid grew
This led to Barriers to Switching

• Lack of convenient access
  – to quality information on what to buy & where
  – to nicotine e-liquid

• Lack of support to switch
  – stigma, glares & misinformation about risks
  – health professionals refused to support / advised against vaping
  – scare-mongering about ecigs / vaping in the media
  – threats to ban all vaping products

Stages through which vapers’ knowledge developed as a lay epidemiology

Stage 1
Individuals, & communities note unexpected effects eg quitting was easier, relapse is less with vaping

Stage 2
They hypothesise causal link e.g. vaping assists quitting smoking, health improves

Stage 3
They begin sharing stories creating a common view

#vapefam

- Large online local & international community:
  - Youtube instructional videos, reviews
  - Facebook groups
  - Twitter
- Local meetups
- Regional/National Vape Days & Expos

Photo: CHCH Vape Day ‘16
Brown’s* lay epidemiology stages cont.

Stage 4
Now a more cohesive group they read, ask around, gather anecdotal ‘evidence’ & begin talking to government officials & scientific experts about the benefits of vaping

Stage 5
If they are dismissed and ignored, typically this fuels the establishment of advocacy groups and alliances to pursue their investigations

Stage 6
Govt funds studies in response to community groups’ pressure. But, these usually find no association e.g. between vaping & effectiveness of quitting.
When public health / tobacco control moved to stop the spread of vaping, vapers formed lobby groups – a new social justice movement grew.

Vapers became:
• Manufacturers
• Retailers
• Advocates
• Peer ‘Cessation’ volunteers
• Lobbyists (writing submissions & letters to MPs)
Brown’s* lay epidemiology stages cont.

Stage 7
Independent researchers are attracted to conduct studies, or vaping community engages their own researchers

Stage 8
The building evidence is then used to confront opposition and if necessary pursue litigation

Stage 9
The affected community & their advocacy groups press for corroboration of their findings & official recognition by Govt & experts
NZ to Legalise Vaping

Evidence for vaping increased

Pressure to legalise increased

Slowly more nurses, doctors & public health people shifted

Govt announced plans to legalise & regulate vaping
Vaping, iQos & Swedish Snus legal

& then... in March 2018

Ministry of Health lost court case against Philip Morris HEETS

The Judge ruled that:

• HEETs were a “tobacco product” not an “oral product” “for chewing”
• banning a reduced harm product goes AGAINST the Smoke-free Environments Act which was intended to reduce harm!!

Implications:

• Tobacco products that are not oral for chewing (e.g. nicotine e-liquid & Swedish Snus) are not, and actually were never, banned!
Disclosures
I have never received funding from any tobacco or vaping product company. I have, in the distant past (over 10yrs+), received fees from pharmaceutical companies for consultancy cessation medicines.

The End Smoking NZ survey of vapers was funded by the New Zealand Tobacco Control Research Tūranga, which was funded by the Reducing Tobacco-related Harm Research Partnership, co-funded by the Health Research Council of NZ and the Ministry of Health of NZ (HRC grant 11/818).