

National Association of State Boards of Education

Kansas State Board Confronts Youth Vaping

By Joseph Hedger

Between 2011 and 2018, the number of U.S. high school students using electronic cigarettes rose from 220,000 to more than 3 million students. Middle schoolers saw an increase from 60,000 to 570,000 students during the same period.¹ Because of their increasing popularity and device designs that mimic USB flash drives, these vaping products pose a unique challenge to schools as they try to protect students from addiction.

Nicotine, the active ingredient in most e-cigarettes, harms parts of the brain responsible for memory, attention, and learning. Additionally, heavy metals and cancer-causing chemicals have been identified in the flavors, some of which also include THC.² About four in five U.S. middle and high school students were exposed to e-cigarette advertisements from at least one source in 2016.³ In 2015 survey data, few students associated great risk with using e-cigarettes, and more than twice as many students were using e-cigarettes as were smoking regular cigarettes.⁴ Community members and educators may not realize the extent of the crisis and how they can aid in addressing it.

As youth vaping grows in popularity, state boards of education can play a role in stemming it, as Kansas's board has done. Following a presentation at their May 2019 meeting, the **Kansas State Board of Education** decided to dive further into the issue.⁵ In June, they established the E-Cigarette/Vaping Task Force to hear from experts and stakeholders and establish policy recommendations for curbing

youth vaping through education and communication strategies, revised health standards, and further research.

HEALTH DANGERS

While many consider e-cigarettes to be the safer cousin of the cigarette—because it creates vapor, not smoke—it produces many harmful effects, especially in children. Young people are more vulnerable to the deleterious effects of nicotine than older adults, which include addiction, priming for use of other addictive substances, reduced impulse control, deficits in attention and cognition, and mood disorders, according to the Office of the Surgeon General.⁶ E-cigarette aerosols, cartridges, refill liquids, and environmental emissions also contain substances and ultrafine particles known to be toxic, carcinogenic, and to cause respiratory and cardiac disease.⁷

While many young people are aware of the negative effects of nicotine and not confident about whether they are using products that do not possess nicotine, those who regularly use e-cigarettes reported they would stop vaping when they were made aware of the negative health effects, according to focus group research.⁸

Educating about the dangers of vaping should extend beyond students. “The critical piece is the parents,” said Mark Thompson, the Kansas State Department of Education’s education program consultant for health and physical education. While schools can provide flyers, posters, and fact sheets about the dangers of e-cigarettes to students during the school day, parents often do not fully understand the problem’s importance.

For example, many family members know their children regularly use e-cigarettes, yet many children report receiving implicit and explicit messages from family members that are positive toward e-cigarette usage.⁹

KANSAS CONVENES GROUPS TO ACT QUICKLY

Michelle Dombrosky, a task force member who also serves on the Kansas state board, witnessed firsthand the devices kids were using when she met with parents from her son’s middle school last May. “Much of it looked like everyday items,” she said. “Flash drives, watches that were gutted to look real but held a vape juice cartridge inside. It was very alarming and eye opening.” In Kansas, nearly a third of high school students surveyed in 2017 reported vaping at least once.¹⁰

In May 2019, the state board directed Commissioner of Education Randy Watson to convene stakeholders concerned with youth vaping to come up with recommendations for board discussion and action. A work group met that month to develop recommendations, and Kansas board members in June accepted four recommendations, which included offering public education on the dangers of e-cigarette use, adding content on vaping to the model standards for health education, creating a central web-based information hub on vaping, and forming a task force with stakeholders from across the state who represent multiple fields.¹¹

The task force convenes nearly 40 members from across the public sector, including the commissioner of education, representatives from the department of health and environment, physicians, superintendents,

school counselors and nurses, organizations such as the Kansas Health Institute and the American Lung Association, and high school students. “[The state board] listening to the stakeholders has been huge and definitely the right route to take,” said Jordan Roberts, prevention program manager for the Kansas Department of Health and Environment.

At each of the state board’s monthly meetings, the task force presents on recent activity, research, and policy recommendations, then meets the following week to discuss feedback and direction from the state board. Most of the research and data used in the meetings comes through testimonials or thoughts from experts who sit on the task force, Thompson said.

For Roberts, the root of the work is students themselves. “The only way to address this issue with young people is by engaging them,” she said. “They are totally capable of educating staff on vaping.” In March, Roberts’s department created the Kansas Vape-Free Schools Toolkit. The toolkit guides students on how to review a school’s policy on tobacco and vaping, communicate effective action through model policies and sample letters, and engage peers and the community on the issue.¹²

Implementation barriers remain. “It’s one thing to create and release a policy at the state level,” Thompson said. “It’s very different when you have the superintendent of a rural school having to police their grounds at a football game to make sure the people aren’t vaping.” The challenge is walking that fine line between what is truly best practice and what can actually get accomplished on the ground, he said. It helps to have school leaders voicing their concerns on the task force.

In October and November, the task force developed comprehensive policy recommendations that explicitly address vaping as part of school accreditation, Thompson said. In December, the state board approved the recommendations, which encourage districts to prohibit students, staff, parents, volunteers, contractors, and vendors from using, possessing, or promoting vape pens or other tobacco products on school property, in school vehicles, or at school-sponsored activities.¹³

AGE LIMITS AND OTHER POLICIES

According to NASBE’s State Policy Database on School Health, nine states had explicitly included e-cigarettes or vaping in their tobacco-free environment policies by the end of 2017. According to Education Commission of the States analysts Erin Whinnery and Damion Pechota, Florida, Kentucky, and Montana have also prohibited vaping on school grounds. Nevada amended its Clean Indoor Air Act to include the use of electronic smoking devices, Utah and Washington raised the legal smoking age to 21, and Virginia amended its requirements to address instruction in the health and safety risks of using tobacco and e-cigarettes.¹⁴ Similarly, the Utah State Board of Education in November 2019 approved expedited rules to allow schools to confiscate e-cigarette devices from students on campus.¹⁵

President Donald Trump signed legislation last December to raise the legal buying age for tobacco products, including cigarettes, cigars, and e-cigarettes, from 18 to 21 nationally,¹⁶ which will help prevent older students from bringing tobacco to school and selling to younger peers. The U.S. Food and Drug Administration announced in January 2020 its intent to ban e-cigarette flavors (other than tobacco or menthol) that are popular with youth.¹⁷

State boards looking to start work similar to that of the Kansas board should first engage as many stakeholders as possible, from the state to the local level. Everyone should play a role, including young people. “There is no sector that we left unturned,” Roberts said.

Though the task force has moved fast, it struggles to keep up with the epidemic in Kansas. “We don’t have a close date on it,” Thompson said, “because different issues keep popping up that schools need help with. There are so many layers to it that we’re still unpacking.” For example, the task force presented best practices in cessation and discipline at the state board’s January 2020 meeting.

Joseph Hedger is NASBE’s associate editor.

NOTES

1 Karen A. Cullen et al., “Note from the Field: Use of Electronic Cigarettes and Any Tobacco Product among Middle and High School Students—United States, 2011–2018,” *Morbidity and Mortality Weekly Report* 67, no. 45 (2018): 1276–77.

2 Products containing tetrahydrocannabinol (THC) have been linked to most vaping-related lung injuries. CDC, “Outbreak of Lung Injury Associated with E-Cigarette Use, or Vaping,” digital press kit, 2020.

3 Kristy Marynak et al., “Exposure to Electronic Cigarette Advertising Among Middle and High School Students—United States, 2014–2016,” *Morbidity and Mortality Weekly Report* 67, no. 10 (2018): 294–99.

4 Lloyd Johnston, “Monitoring the Future: National Survey Results on Drug Use, 1975–2015: Overview, Key Findings on Adolescent Drug Use” (Ann Arbor, MI: Institute for Social Research, the University of Michigan, 2016).

5 Consultant Mark Thompson, Jordan Roberts from the Kansas Department of Health and Environment, and David Stubblefield of Blue Valley Unified School District 229 made this presentation.

6 U.S. Department of Health and Human Services, *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, 2016).

7 National Academies of Sciences, Engineering, and Medicine, *Public Health Consequences of E-Cigarettes*, consensus study report (Washington, DC: National Academies Press, 2018).

8 Jennifer P. Alexander et al., “Youth Who Use E-Cigarettes Regularly: A Qualitative Study of Behavior, Attitudes, and Familial Norms,” *Preventive Medicine Reports* 13 (2019): 93–97.

9 Ibid.

10 Healthy Kansas Schools, “2017 Kansas Youth Risk Behavior Survey: Grades 9–12” (Topeka, KS: Kansas State Department of Education, 2017).

11 Kansas State Department of Education, “Kansas State Board of Education June Highlights: Vaping Recommendations Approved by Board Members,” news release, June 14, 2019.

12 Resist, “Kansas Vape-Free Schools Toolkit” (Topeka, KS: Kansas Department of Health and Environment and the Tobacco Free Kansas Coalition, 2019).

13 Lisa Gutierrez, “Kansas Wants Public Schools to Ban All Vaping—Even for Visitors at Events,” *Kansas City Star*, December 10, 2019.

14 Erin Whinnery and Damion Pechota, “How States Are Addressing the Student Vaping Epidemic,” blog post (EdNotes, 2019).

15 Utah State Board of Education, “Meeting Minutes: November 7–8, 2019,” Salt Lake City.

16 FDA, “Retail Sales of Tobacco Products” (Silver Spring, MD: author, 2019).

17 Center for Tobacco Products, “Enforcement Priorities for Electronic Nicotine Delivery System and Other Deemed Products on the Market Without Premarket Authorization” (Silver Spring, MD: FDA, January 2020).