

# Secondary qualitative analysis of electronic cigarette users' opinions and reported experiences of VAPING AROUND CHILDREN



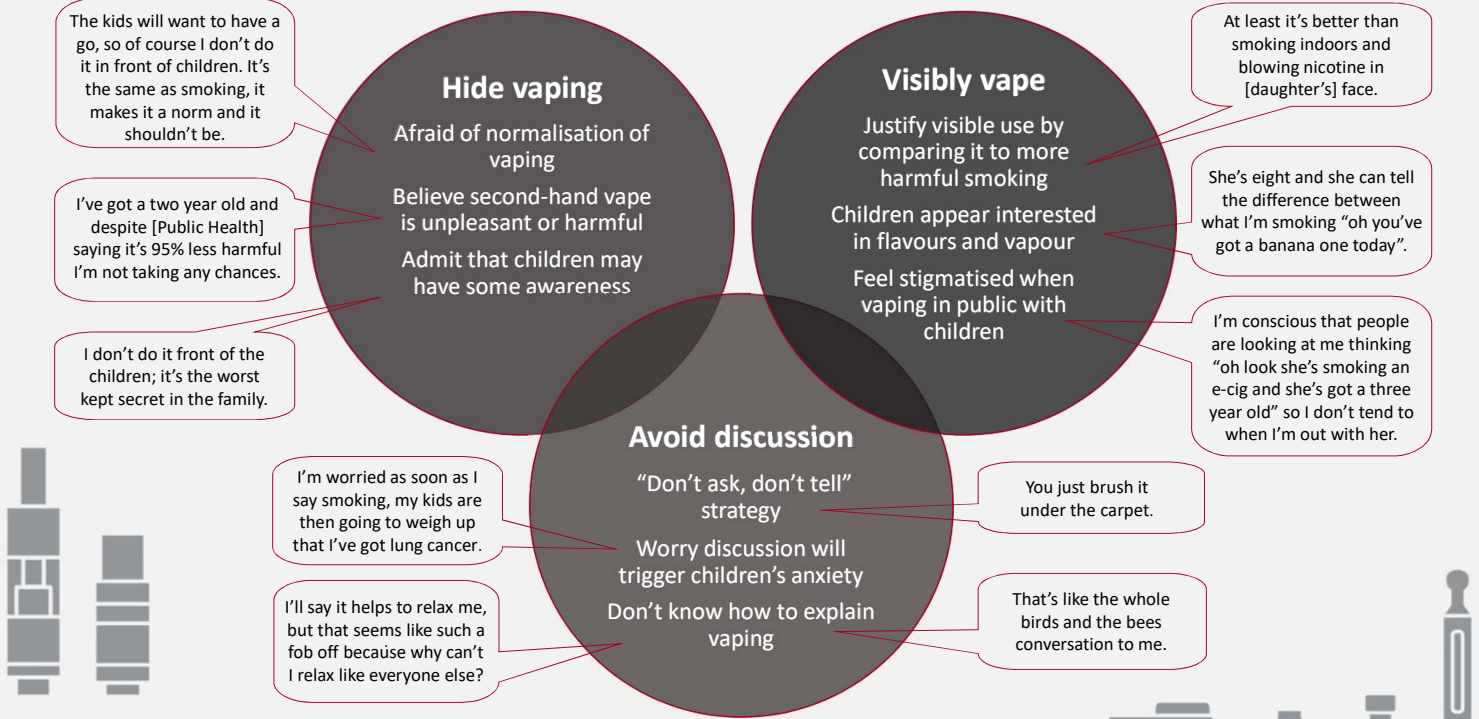
## Background

There is international concern about youth uptake of electronic cigarettes<sup>1</sup>. In the UK, 15.4% of 11-18 year olds have tried vaping within the last year, with 1.6% using e-cigarettes more than once a week<sup>2</sup>. Regulation and education campaigns exist which aim to protect children<sup>3,4</sup>, yet it is likely that children will be primarily influenced by the vaping behaviour of people in their immediate environment<sup>5</sup>. Emerging evidence suggests that, similar to tobacco use<sup>6</sup>, familial e-cigarette use is a risk factor for adolescent e-cigarette use<sup>7</sup>. This is the first known study exploring e-cigarette users' reported experiences of vaping in front of children.

## Method

- Taking a secondary analysis approach<sup>8</sup>, interviews conducted as part of a wider study into e-cigarette use trajectories (ECtra Study) were revisited to answer the new research question about vaping around children
- 40 semi-structured qualitative interviews with people recruited from England who had attempted to give up smoking by vaping
- Data relating to vaping around children were extracted and thematically analysed using an established reflexive inductive method<sup>9</sup>

## RQ: What are e-cigarette users' reported experiences of using e-cigarettes around children?



## Conclusions

- To mitigate the potential risk of familial vaping it has been argued that e-cigarette users should consider entering into age-appropriate dialogue with children about vaping<sup>10</sup>
- However, this study shows that e-cigarette users may lack a clear narrative to draw on when discussing e-cigarettes with children and therefore hide use or avoid discussion
- Evidence based guidance for discussing vaping with children in the context of smoking cessation could be helpful
- Guidance could focus on vaping in the context of tobacco quitting to normalise smoking cessation behaviour, de-normalise youth uptake, and combat possible misperceptions of health risks

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