



## Executive Summary of Recommendations and Rationale from the E-Cigarette Policy Review Taskforce

**Recommendation:** *The Taskforce recommends that e-cigarettes be added to the list of tobacco- and nicotine-containing products that are prohibited from campus and from University activities and its vehicles.*

### Supporting Reasons/Evidence:

1. E-cigarettes may compromise the health and well-being of students, faculty, staff and community members who use them as well as those who are exposed to their vapors.
  - In addition to nicotine, e-cigarettes contain a variety of chemicals and additives, most of which have not been evaluated for lung toxicity (Allen et al., 2015).
  - Nicotine can be transferred to bystanders by passive exposure to e-cigarette vapor (Flouris et al., 2013).
  - The transfer of any odorant can negatively impact bystanders with pre-existing lung conditions, such as individuals with asthma (Lim, et al., 2014; Jaén & Dalton, 2014).
  - The medical community is concerned that e-cigarettes are being perceived as safe and as an effective smoking cessation mechanism, when supporting data are absent or inconsistent (Schraufnagel, 2015).
2. E-cigarettes are not proven to be a safe and effective method for quitting smoking.
  - Scientific evidence contradicts claims that e-cigarettes are a safe and effective smoking cessation tool (Schraufnagel et al., 2014; Brose et al., 2015).
  - Unlike e-cigarettes, FDA-approved nicotine replacement therapies, including transdermal nicotine patches and nicotine gum, have been shown to be effective and do not cause harm to users or bystanders (Moore et al., 2009; Silagy et al., 2004).
3. E-cigarette use by youth is a significant public health concern.
  - College students who use e-cigarettes are more likely to smoke cigarettes later (Sutfin et al., 2015).
  - E-cigarette use by college students is linked to other risky behaviors, including heavy drinking (Littlefield et al., 2015) and marijuana use (Saddleson et al., 2015).
  - E-cigarettes provide a convenient delivery method for vaporizing other substances, including cannabis (Morean et al., 2015).
  - E-cigarette usage may renormalize smoking as an acceptable behavior (Nichter, 2015).

4. E-cigarette use hinders enforcement of University tobacco and drug policies.
- It is currently difficult to enforce the tobacco policy because it is difficult to distinguish traditional cigarettes from e-cigarettes.
  - When e-cigarettes are used to vaporize cannabis (Morean et al., 2015), the University's ability to comply with federal Drug-Free Campus requirements is compromised.
5. A growing number of colleges and universities prohibit the use of e-cigarettes on campus. To date, 11 out of 15 ABOR-identified peer universities have banned e-cigarette use.
6. Numerous health organizations recommend including e-cigarettes in smoke and tobacco-free policies. Some organizations are the American College Health Association, American Lung Association, American Academy of Pediatrics, and American Heart Association.

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