

UCLA Student Tobacco and E-cigarette Use and Awareness

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Abstract

This paper explores the University of California, Los Angeles (UCLA) students' sentiments on personal tobacco and e-cigarette use behaviors, as well as awareness of resources on campus. The results were gathered by performing four interviews and conducting a survey of scalar-style ranking questions via Google Forms. The results suggested that students' feelings regarding the comparative dangers of traditional tobacco products versus e-cigarettes were variable depending on the phrasing of the scalar statement. Additionally, despite reporting minimal awareness of campus resources relevant to tobacco and e-cigarette use, most student respondents report a low level of interest in learning more about them. The results indicate a need for education about e-cigarette risks and campus regulations and resources.

Introduction

Prevalence

The current pervasiveness of e-cigarettes makes tobacco and nicotine use more accessible, discreet, and dangerous, specifically for youth and young adults. According to a study conducted by the American College Health Association in 2019, 14.3% of undergraduate students reported using an e-cigarette device within the last 30 days before surveyance (Cofer et al. 2021). This high number is compounded by another alarming statistic, indicating that about 60% of college students, whether they use e-cigarettes or not, have been presented with the opportunity to use one at least once (Copeland et al. 2017). Finally, college students who use e-cigarettes are more likely to experiment with traditional cigarettes and other combustible tobacco products in the future (Coleman et al. 2015).

These numbers point to the prevalence of e-cigarettes but say little about how and why e-cigarettes have invaded the college space. Although difficult to define, social smoking can

refer to the use of tobacco products in a social setting or not by oneself (Levinson et al. 2007). A college student is more likely to engage in social smoking because of higher exposure to “social conditions,” or settings with alcohol use and partying (Moran et al. 2004). These risk factors augment the need for college student tobacco use to be specifically targeted, because of higher exposure and a demonstrated history of pairing tobacco use with socialization.

The University of California, Los Angeles (UCLA) - Initiatives

Tobacco Free Campus Policy

“UCLA Policy 810: Smoke and Tobacco-Free Environment” (Policy 810) provides guidance for tobacco use behaviors on the UCLA campus and affiliated facilities. The policy also prohibits the use of marijuana products. The main components of Policy 810 disallow the use of tobacco or marijuana products (including e-cigarettes and non-combustible forms of tobacco) and ban selling or advertising these products on UCLA property. The only exceptions to these policies are for highly regulated research and health studies and traditional cultural or religious ceremonies, requiring full approval from the appropriate bodies.

According to Policy 810, all affiliates of the UCLA campus, such as students, faculty, staff, and guests, must abide by the policy or face potential disciplinary action. The policy designates Vice Chancellors, Deans, and Department Heads as proprietors of the guidelines and ensures that all necessary parties are well informed of regulations. This responsibility includes keeping updated postings about Policy 810 throughout the campus and on online websites and materials. Additionally, these figures serve as resources for any community member who has questions about the policy (UCLA Environment, Healthy, & Safety n.d.).

Breathewell Pod

One of the main resources that emerged from Policy 810 is the Breathewell Pod, housed under The Semel Healthy Campus Initiative Center at UCLA. The Breathewell Pod acts as a supportive and educational body that members of the UCLA community can go to with any questions regarding Policy 810 and submit any feedback or suggestions. The primary resources listed on the page include Smoking Cessation Resources, Research, Support and Education, Effects of Tobacco Use, How to Talk about Smoking on Campus, Campus Resources, Courses, Programs, and How to get Involved. The Breathewell site also has a Frequently Asked Questions (FAQ) page that addresses potential confounders and limitations of the policy. Additionally, the Breathewell Pod publishes blogs that pertain to different aspects of smoking on campus (“BreatheWell UCLA,” n.d.).

Research Objective

This study aims to understand UCLA student tobacco and vape product use, motivations around use, and awareness of risks and resources. It intends to identify specific areas of need or concern for the UCLA student population, utilizing potential areas of risk determined by the literature. This paper will focus primarily on comparing students’ assessed risk of e-cigarettes versus traditional tobacco products and cigarettes and literacy of campus resources.

Methods

The study took place in two phases; an interview portion and a survey portion. Four interviews were conducted with current undergraduate UCLA students. The interviews transpired in person and included questions about the use, awareness, and motivations around tobacco behaviors of each student. The answers and feedback were used to enhance the survey questions and focus on the most pertinent questions. The survey was constructed and disseminated via Google Forms. The survey introduced the goal of the study, collected demographic information,

and asked multiple choice and scalar questions about the use, awareness, and motivations of tobacco use behaviors.

Some of the survey questions had a ‘N/A’ answer option for students who did not consider themselves tobacco users or were unable to respond. For analytical purposes, the ‘N/A’ answers were extrapolated from respective questions, and only numerical results were used.

Results

Table 1: Demographics

Year at UCLA	First Year: 15.7% (n=8)	Second Year: 13.7% (n=7)	Third Year: 19.6% (n=10)	Fourth Year: 47.1% (n=24)	Alumni: 3.9% (n=2)	
Gender Identity	Female: 86.3% (n=44)	Male: 13.7% (n=7)	Prefer Not to Say: 0% (n=0)			
Ethnicity	White: 52.9% (n=27)	Asian: 31.4% (n=16)	Latinx or Hispanic: 5.9% (n=3)	Black or African American: 4% (n=2)	Middle Eastern: 2% (n=1)	Multiracial: 4% (n=2)

Table 2: UCLA Group Affiliation

Greek Life	58% (n=29)	Pre-Medicine/Health	20% (n=10)
Athletics (Including Club Sports)	12% (n=6)	Student Government	12% (n=6)
Residential Life	8% (n=4)	N/A	14% (n=7)
Pre-Law	4% (n=2)		

Table 3: Areas of Evaluation

Tobacco Use	Have you ever used a tobacco or vape/e-cigarette product?
	Do you currently use tobacco or vape/e-cigarette products? (Within the past 30 days)
	If you use tobacco or vape/e-cigarette products, what kind of products

	do you use? (If none, say N/A)
	What kind of setting do you typically use tobacco or vape/e-cigarette products in?
	How often do you use tobacco or vape/e-cigarette products?
	When was the first time you used a tobacco or vape/e-cigarette product?
	When was the last time you used a tobacco or vape/e-cigarette product?
	According to the FDA & CDC 2022 National Youth Tobacco Survey (NYTS), a little more than ¼ of youths use e-cigarette products every day. Does this statistic surprise you?
Tobacco Awareness and Motivations	A person's tobacco use behaviors change how much or how little time I would like to spend with them.
	I have (currently, or in the past) been concerned about my own tobacco/vape use.
	Flavored vape, e-cigarette or tobacco products increase the likelihood that I would use these products.
	I have heard of the UCLA Tobacco Free Campus Policy (UCLA Policy 810: Smoke and Tobacco-Free Environment).
	I have heard of the BreatheWell pod.
	When I hear "Tobacco Free Campus Policy," I think this applies to vape/e-cigarette products as well. (Graph 1)
	Prior to this survey, I was aware that the UCLA Ashe Center has tobacco cessation services.
	I view vapes/e-cigarettes to be as dangerous as traditional tobacco products. (Graph 2)
	I am more likely to accept and use an e-cigarette than a traditional cigarette/tobacco product if offered. (Graph 3)
	When someone uses tobacco products around me, I am concerned for my own health. (Graph 4)
	When someone uses vape/e-cigarette products around me, I am concerned for my own health. (Graph 5)
	I thought about the possibility of addiction/sustained use when I first

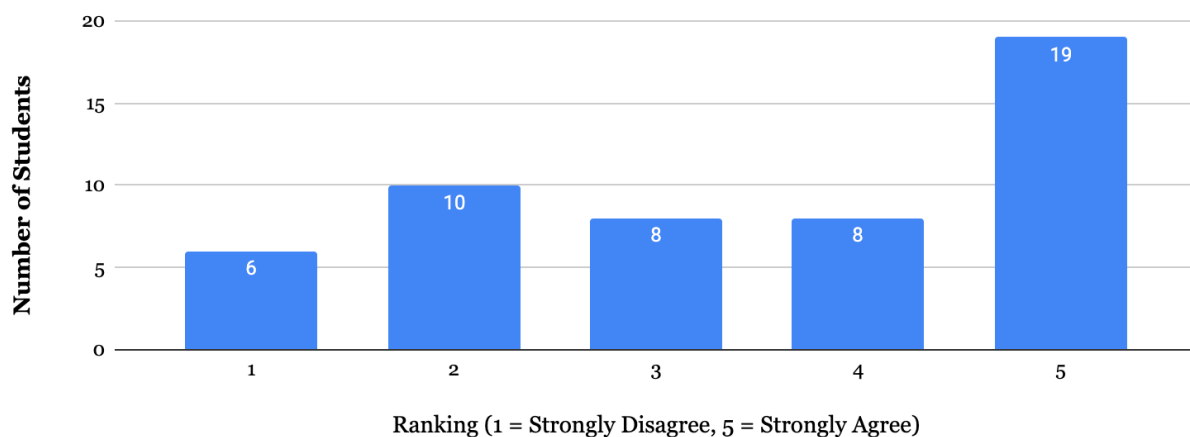
	started using tobacco/vape products.
	I use vape/e-cigarette or tobacco products more when I am stressed.
	The environmental impact of vape/tobacco products (littering of cigarette butts, single use plastic vape devices, etc) would motivate me to stop using vape/tobacco products.
	The health impact to myself and loved ones (ie. second hand smoke) would motivate me to stop using vape/tobacco products.
	When using tobacco products, I think of it as a harm to myself. (Graph 6)
	When using tobacco products, I think of it as a harm to the people around me. (Graph 7)
	When using vape products, I think of it as a harm to myself. (Graph 8)
	When using vape products, I think of it as a harm to the people around me. (Graph 9)
	I would like to learn more about the harms of e-cigarettes and tobacco use through workshops (in classes, clubs, residential dorms, etc.)

***Bolded questions have corresponding graphs below**

Graph 1:

When I hear "Tobacco Free Campus Policy." I think this applies to vape/e-cigarette products as well.

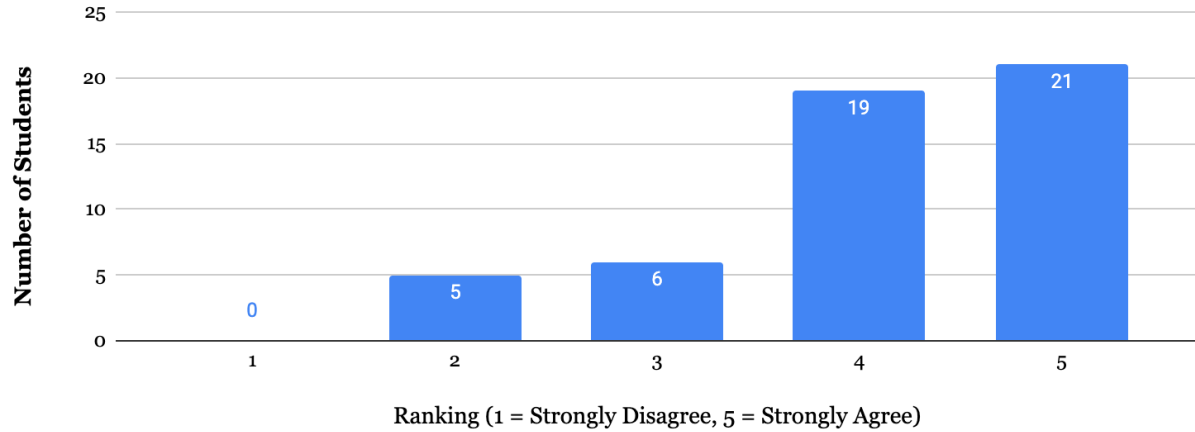
Students ranked their agreement to this statement on a scale of 1 to 5 (n = 51)



Graph 2:

I view vapes/e-cigarettes to be as dangerous as traditional tobacco products.

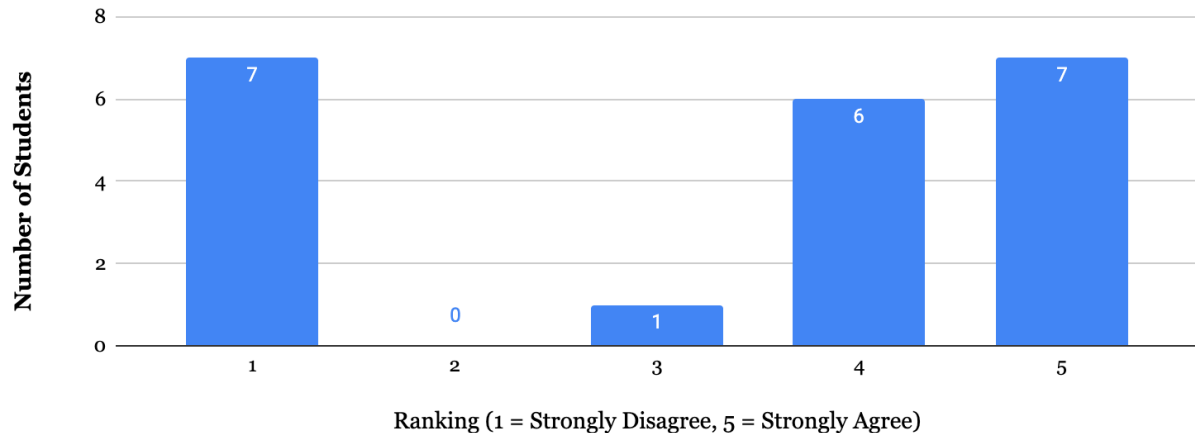
Students ranked their agreement to this statement on a scale of 1 to 5 (n = 51)



Graph 3:

I am more likely to accept and use an e-cigarette than a traditional cigarette/tobacco product if offered.

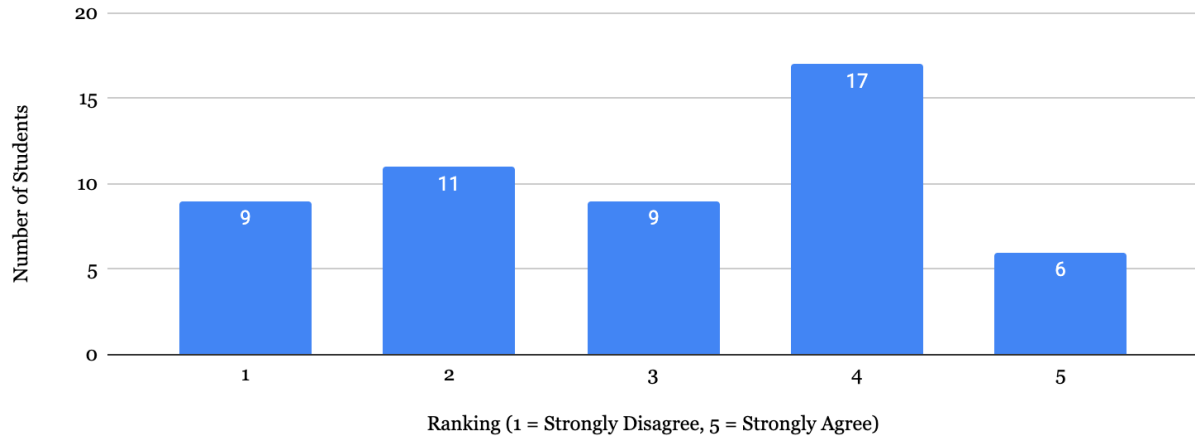
Students ranked their agreement to this statement on a scale of 1 to 5 (n = 21)



Graph 4:

When someone uses tobacco products around me, I am concerned for my own health.

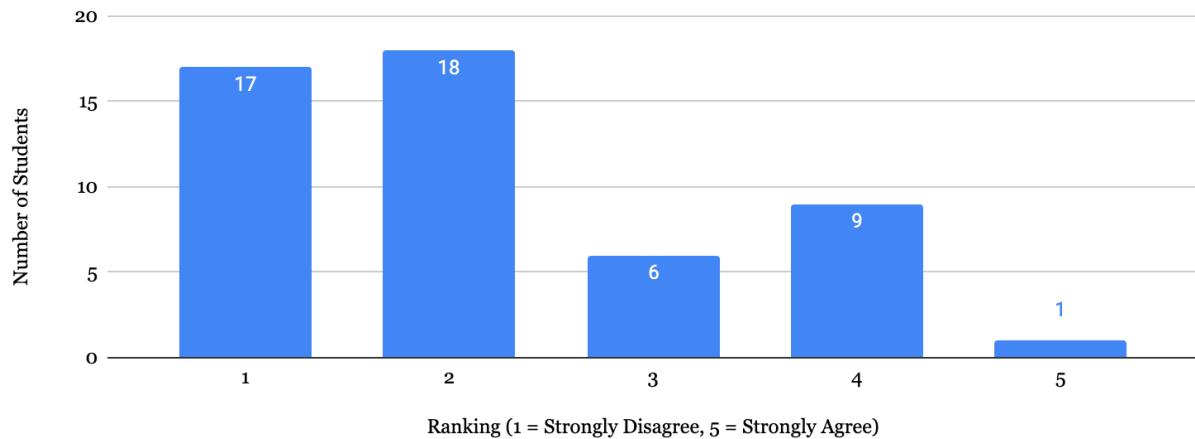
Students ranked their agreement to this statement on a scale of 1 to 5 (n = 51)



Graph 5:

When someone uses vape/e-cigarette products around me, I am concerned for my own health.

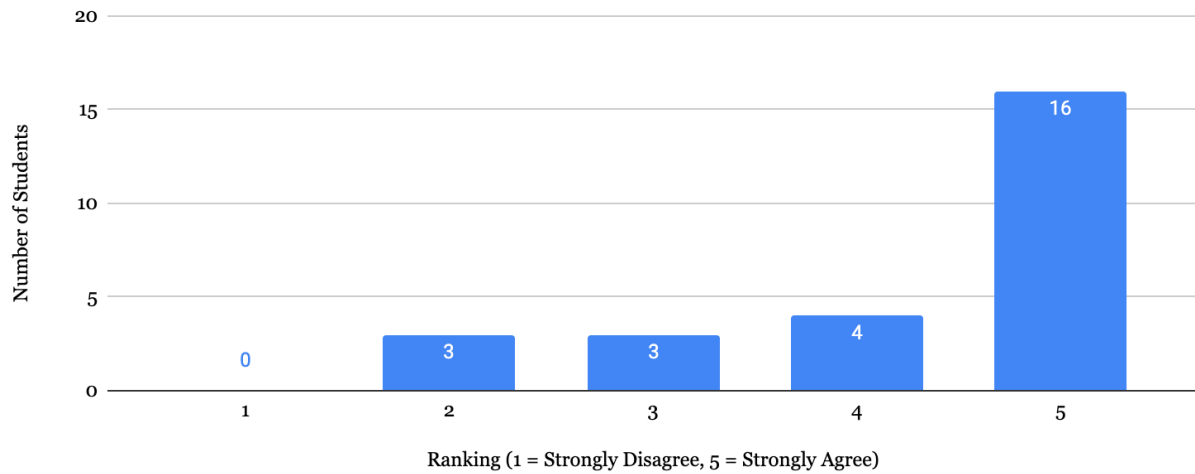
Students ranked their agreement to this statement on a scale of 1 to 5 (n = 51)



Graph 6:

When using tobacco products, I think of it as a harm to myself.

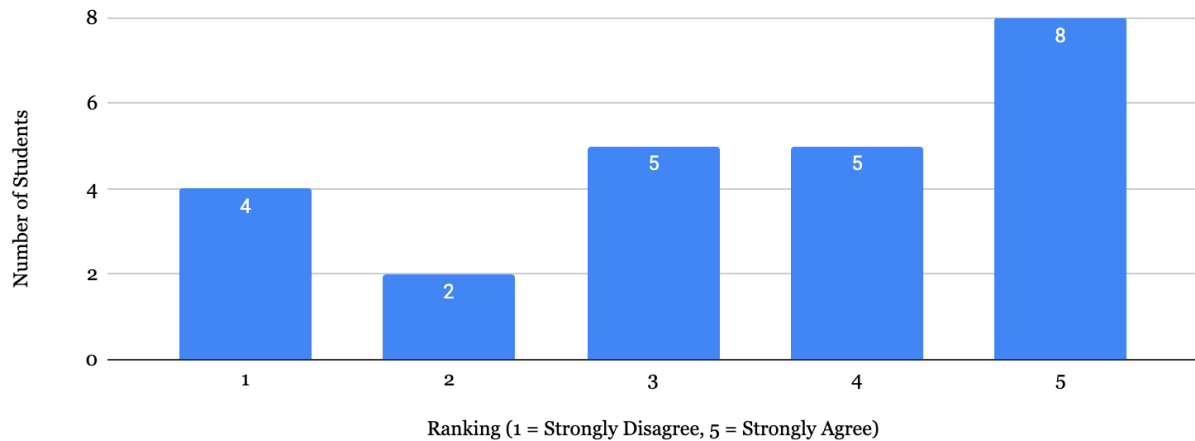
Students ranked their agreement to this statement on a scale of 1 to 5 (n = 26)



Graph 7:

When using tobacco products, I think of it as a harm to the people around me.

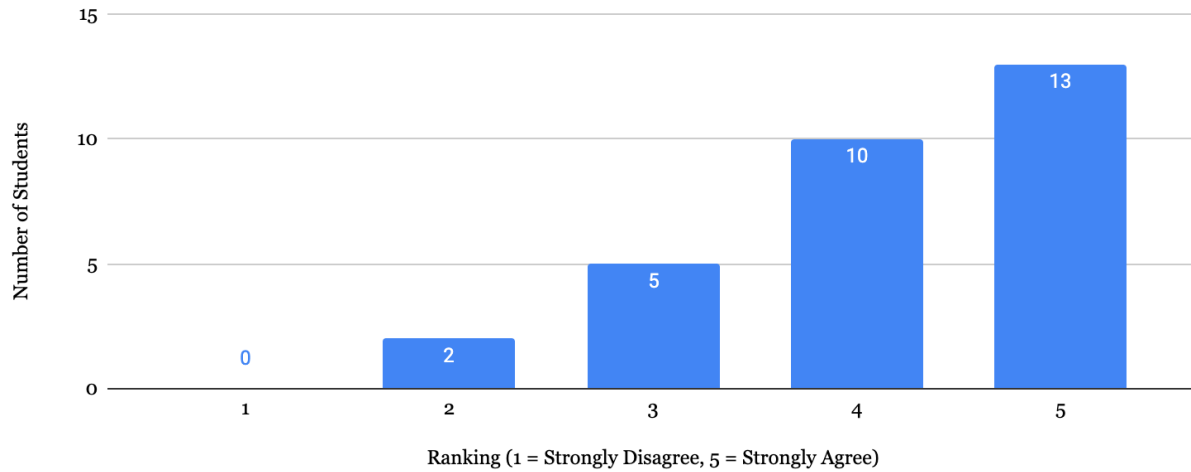
Students ranked their agreement to this statement on a scale of 1 to 5 (n = 24)



Graph 8:

When using vape products, I think of it as a harm to myself.

Students ranked their agreement to this statement on a scale of 1 to 5 (n = 30)



Graph 9:

When using vape products, I think of it as a harm to the people around me.

Students ranked their agreement to this statement on a scale of 1 to 5 (n = 24)

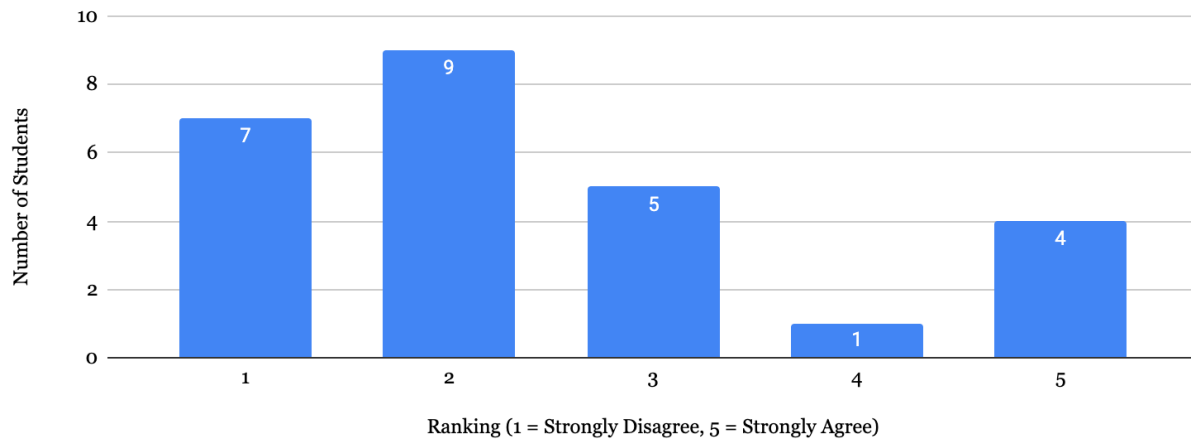


Table 4: Supplementary Results

Area of Evaluation	Strongly Disagree (1)	(2)	(3)	(4)	Strongly Agree (5)
I would like to learn more about the harms of tobacco use through workshops (in classes, clubs, residential	13 (25.5%)	11 (21.6%)	13 (25.5%)	9 (17.6%)	5 (9.8%)

dorms etc.) (n = 51)					
I have heard of the UCLA Tobacco Free Campus Policy (UCLA Policy 810: Smoke and Tobacco-Free Environment). (n = 51)	14 (27.5%)	7 (13.7%)	5 (9.8%)	6 (11.8%)	19 (37.3%)
I have heard of the UCLA BreatheWell pod. (n = 51)	40 (78.4%)	6 (11.8%)	0 (0%)	4 (7.8%)	1 (2%)
When I hear “Tobacco Free Campus Policy,” I think this applies to vape/e-cigarette products as well. (n = 51).	6 (11.8%)	10 (19.6%)	8 (15.7%)	8 (15.7%)	19 (37.3%)
Prior to this survey, I was aware that the UCLA Ashe Center has tobacco cessation services. (n = 51)	33 (64.7%)	8 (15.7%)	4 (7.8%)	3 (5.9%)	3 (5.9%)

Discussion

E-cigarettes vs. Traditional Tobacco

One of the major goals of this study was to determine how students' feelings vary regarding e-cigarettes and traditional tobacco topics. Interestingly, depending on the question phrasing, student responses were variable. For example, when asked if students view vapes/e-cigarettes to be as dangerous as traditional tobacco products, 78% of students responded that they strongly agree or agree. In concordance with these results, 77% of students strongly agreed or agreed that they think of using both tobacco and vape products as harmful to themselves. However, when the results were extrapolated, 63% of students strongly agreed that tobacco use is harmful to themselves, compared to 43% of students that strongly agreed that vape use is harmful to themselves. From these values, it is clear that students see a higher threat with traditional tobacco products, even though the majority of them also believe that e-cigarettes are equally as harmful.

Another way that students' views of the danger of vapes and tobacco products differ from the majority's view that they are equally as dangerous is in regards to second-hand effects. When asked if they were concerned about a person using tobacco products around them (exposure to second-hand smoke), 45% of respondents strongly agreed. However, only 20% of students shared this level of concern with a person vaping around them, with 69% of students actually strongly disagreeing or disagreeing that they are concerned when someone is using an e-cigarette or vape product around them. When asked about the concern of harming others when personally using tobacco or vape products, the results were just about the same. Finally, 43% of students agreed or strongly agreed that they are more likely to accept and use an e-cigarette than a traditional cigarette if offered.

Education

What these results suggest is a misunderstanding and disconnect in sentiments. A majority of students maintain that e-cigarettes are just as dangerous as cigarettes, yet the robustness of this belief is higher for cigarettes. Students are less concerned about the second-hand effects of e-cigarettes and vapes and are more likely to accept and use these devices compared to traditional tobacco products. There are a few possible explanations for this gap in understanding. The first may lie in education. Most high school health education courses include units on tobacco use with an emphasis on prevention. These endeavors are supported by the California Department of Education Tobacco-Use Prevention Education Office (TUPE). The office has comprehensive modules and resources available to teachers, administrators, parents, and legal guardians ("E-Cigarette and Vaping Prevention," 2022). However, even the department name is a misnomer, as it is unclear if referring to tobacco always includes vapes and e-cigarettes. Unfortunately, when asked if they were interested in learning more about the harms

of e-cigarette and tobacco use, 47% of students disagreed or strongly disagreed, with 26% of students feeling neutral about the idea. Despite the reluctance, an educational gap exists around danger comprehension of e-cigarettes. Informational programming is necessary to fill the gap and decrease the prevalence of use throughout the campus community.

Social Smoking

Another potential reason for contrasting results is the social acceptance of e-cigarettes among college-aged students. When asked what kind of setting they typically use tobacco or e-cigarette products in, 53% of students indicated social settings. Due to the high amount of education and awareness of the ill effects of cigarette use, it is much more common for college students to engage in e-cigarette smoking socially. Additionally, e-cigarette use does not produce the same visible physical effects deemed unattractive about tobacco smoking, including, but not limited to, yellowing teeth and fingers and bad breath. Moreover, since students are less concerned about harming others or being harmed by someone else when using e-cigarettes around them, they are more likely to engage in this behavior without guilt in a large social setting.

Policy 810 Awareness

Across responses from four different scalar questions, it became clear that student knowledge of campus policies and resources is relatively low. Awareness of the UCLA Tobacco Free Campus Policy (Policy 810) was the highest, with 49% of respondents strongly agreeing or agreeing that they had previously heard of the policy. However, that leaves just over half of respondents acknowledging no prior experience with Policy 810. Addressing Policy 810 further, just over half of respondents agreed that a ‘Tobacco Free Campus’ also applies to vapes and e-cigarettes. This ambiguity is dangerous to the observation of this policy, as many students may

be unaware that they are not acting in accordance with Policy 810 if they do not know it includes electronic tobacco devices as well. Additionally, 78% of students had never heard of the BreathWell pod and 65% of students were unaware that the UCLA Ashe Student Health Center has tobacco cessation services. UCLA students are the sole target audience of these institutions, but they cannot benefit from them if they are unaware that they exist.

Recommendations

Fortunately, the policies and resources that UCLA has in place are comprehensive and have the potential to significantly improve a student's relationship with tobacco use, as long as they know how to access them. To ensure that all students know about both Policy 810 and tobacco cessation resources, a curriculum must be incorporated into New Student Orientation sessions, as well as early term residence hall meetings with Resident Assistants. As orientation is mandatory for all incoming UCLA students (freshman and transfers), and a significant portion of the population lives in UCLA residences during their first year in attendance, this dissemination strategy will reach the most students and increase awareness from the get-go.

Limitations

There were a few limitations to this study. Primarily, the sample size was relatively small, with only four interviews conducted and fifty-one total respondents to the survey. The polled students were a convenience sample, composed of the author's peers and connections. As such, it is not representative of the entire UCLA population. Regardless, it can still provide some insight into UCLA student opinions on tobacco and e-cigarette use and contribute to the development of recommendations.

Conclusion

UCLA students have foundational knowledge on the dangers and risks of using tobacco products, including e-cigarettes and vapes. However, the application of this knowledge varies situationally, calling for further education. On the macro-level, this education must consist of content-based knowledge about e-cigarette health risks and implications. On a UCLA-specific scale, students must be better informed about campus-wide resources and policies early on in their educational journey. With these changes implemented, the UCLA Tobacco Free Campus Policy can be more successful in deterring all forms of tobacco use on campus and possibly develop into habit-breaking behavior changes.

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