

Influencing Gen Vape

Summary Report



What you need to know

This summary outlines seven segments of young people aged 12-18 relating to teenage vaping behaviour.

The segments were created based on teens' motivations and attitudes towards vaping, as well as their current behaviours. These segments were not decided by age.

The research points to a need for targeted interventions to be tailored to the different segments.

How to use this summary

Organisations and individuals working to address teen vaping can use this snapshot to inform their work. Understanding which segment/s your audience are in will point you to specific intervention ideas, as well as key watch outs and messages to highlight.

A note on myth-busting

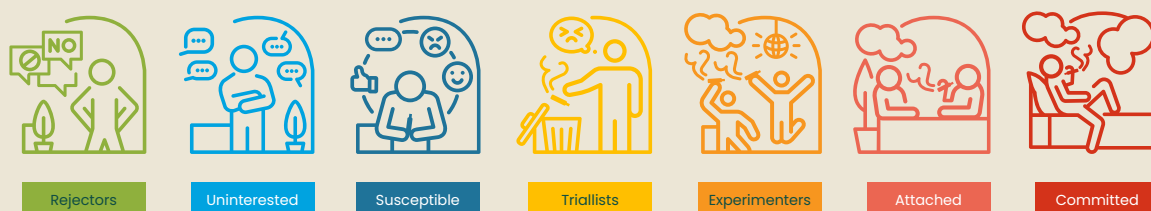
Care should be taken when correcting or 'myth-busting' the perceived benefits of vaping with all segments. Whether it's myths about stress relief or head spins, the most natural response from any expert is to confront those myths head on and 'bust' them.

But here's the problem - engaging with myths and lies only helps them spread. Mythbusting is basically the process of reminding people of things we don't want them to think. Research shows that in many cases this actually serves to reinforce and strengthen those ideas. That means the very last thing we should do when confronted with myths is repeat them.

So what do we do instead? We tell the truth. That means we tell our story. This summary gives you the tools to tell our story to each segment, based on what we know about their current attitudes and motivations around vaping.

Have more questions?

Reach out to the team at The Behaviour Change Collaborative at hello@thebcc.org.au or 08 6331 6057.



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Rejectors

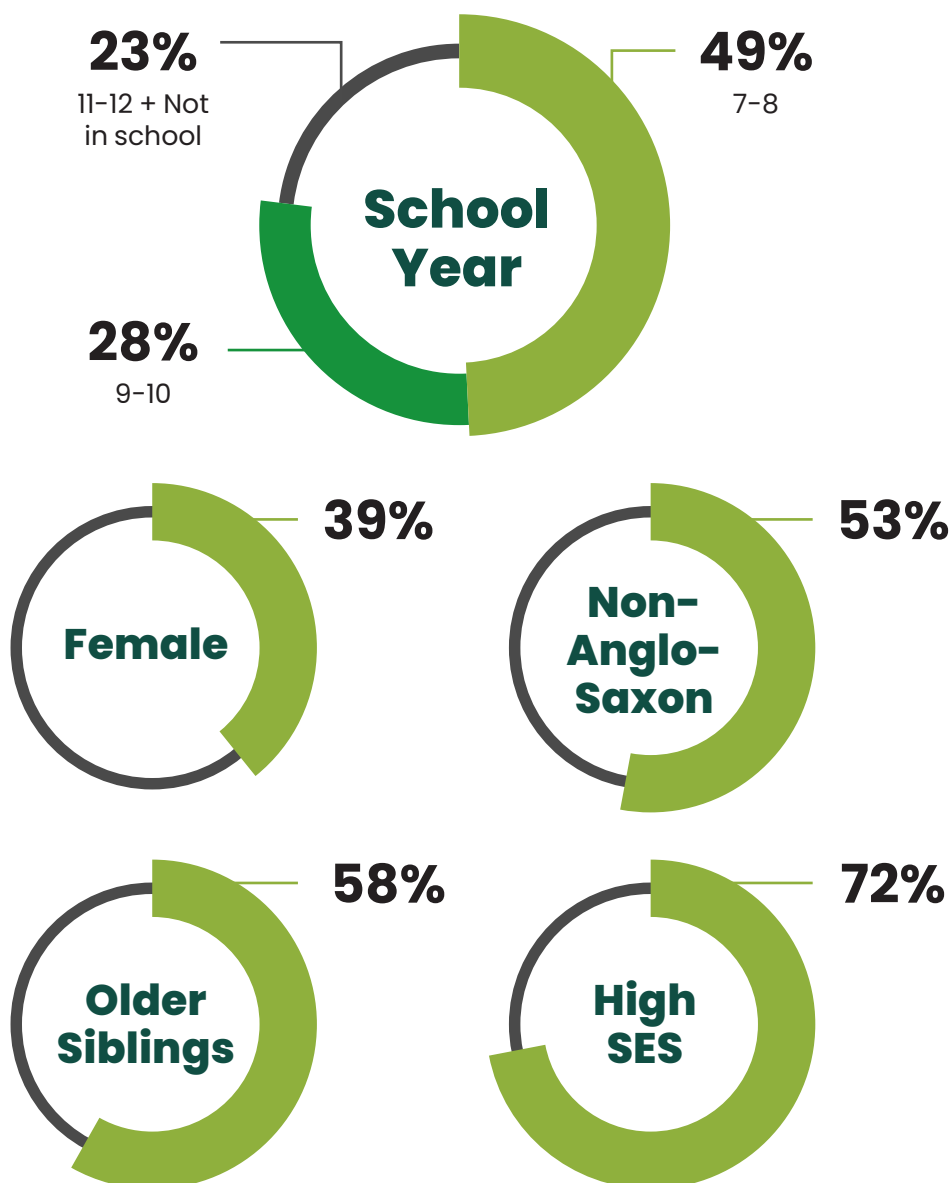
Never have, probably never will. Teens in this segment are strongly against vaping. They're well informed about the harms and risks of vaping and reject any benefits. They'll even avoid friend groups and social settings where people vape.



Who are they?

Rejectors are more likely to be male. Compared to the other segments, they're the youngest and the most socio-economically advantaged based on their postcodes.

Rejectors don't take risks or rebel. Most of their friends don't vape and most don't care about fitting in or what people think. They meet their friends through sports teams or hobbies instead of social media.



What makes them Rejectors?

THEY'RE THE MOST KNOWLEDGEABLE

Of all the segments, they clearly understand the potential harms, know about nicotine and chemical content, and how vaping compares to cigarettes. They also see vaping as highly addictive, expensive, and hard to stop once you start.

THEY SEE MORE HARM THAN GOOD

While they agree that vaping can give people a buzz, they reject the benefits of vaping for themselves and strongly agree that it can cause health and social harms.

THEY'RE THE LEAST LIKELY TO VAPE...

Or accept an offer to vape from a friend. Most will likely go out of their way to avoid social vaping situations.

THEY LISTEN TO TRUSTED SOURCES

They trust and care about the opinions of their parents, as well as health organisations, medical professionals, teachers, school nurses, sport coaches and close friends.

How can we influence Rejectors?

Reinforce their attitudes and their non-vaping behaviour through affirmation, reward, and information reminders.

What messaging is most useful to them?

That they are ...

- Making a good/smart decision, supported by the people that matter to them and whose opinions they care about and trust (particularly their parents).
- Avoiding short and long-term health harms and social risks.
- Avoiding addiction. It can be hard to stop once you start.

What's not helpful?

Talking about, correcting or myth-busting perceived benefits of vaping. Rejectors don't buy-into to the claimed benefits, so we don't need to address them. We don't want to trigger additional curiosity in this segment.

What do they need?

1. Information from the school health curriculum, health and medical websites, and social media, as well as from sports clubs and hobby groups.
2. Support to develop their social skills and personal capability to say no to vaping in the future if they are ever tempted or pressured to try a vape (if opportunity to vape increases over time, particularly if they move into older school year groups and have more disposable income).
3. Support, reward and reinforcement from parents who must be correctly informed about the risks of vaping. We need to build the capability of parents to have credible conversations with their teens that discourage vaping.

Parents are the critical influencer audience for this segment. Communications and support should be weighted towards parents to reinforce and maintain this segment's non-vape status and their underlying anti-vape attitudes.



Uninterested

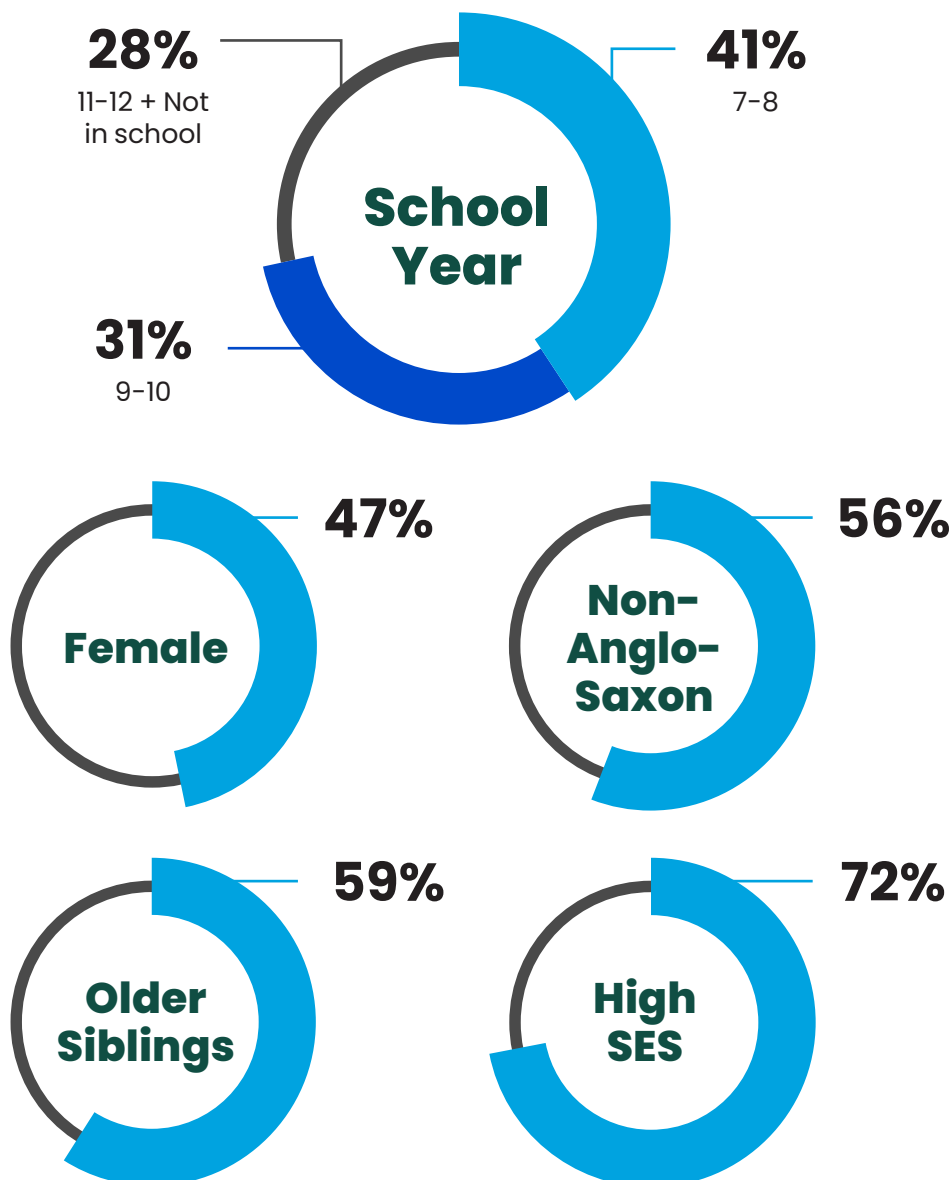
It's not even on their radar. Uninterested teens aren't as knowledgeable as Rejectors, but they firmly believe vaping is addictive and bad for their health. They're also the least curious of all the segments about vaping.



Who are they?

Most teens in this segment are males in early high school. The majority live in socio-economically advantaged postcodes, with fewer earning their own money.

Like the Rejectors, they have a low appetite for risk and rebellion, and are less likely to care about fitting in or what people think. They are likely to meet their friends through sports teams or hobbies instead of social media. While most of their friends don't vape, slightly more of their friends do than the Rejectors.



What makes them Uninterested?

THEY'RE AWARE OF THE HARMS, BUT DON'T HAVE ALL THE FACTS

Uninterested teens claim to understand the potential harms of vaping and how it compares to cigarettes. But when it comes to specific facts about vaping, they have significant knowledge gaps. They don't know as much about the nicotine and chemical content of vapes, how hard it can be to stop, or how expensive it is.

THEY'RE UNSURE ABOUT THE BENEFITS

Unlike Rejectors, they're more accepting of the pleasure-seeking benefits such as the nicotine hit and feeling good, and of the functional benefits such as feeling calm and less stressed. They're not sure about the social benefits. They associate the greatest harms with health and family reactions.

THEY'RE THE LEAST CURIOUS ABOUT VAPING

All of this segment said they're 'not at all curious' and the majority have strong intentions not to vape any time soon.

THEY LISTEN TO TRUSTED SOURCES

They trust and care about the opinions of their parents, as well as health organisations, medical professionals, teachers, school nurses, sport coaches and close friends.

How can we influence Uninterested?

Inform to address knowledge gaps and strengthen negative attitudes towards vaping, and reinforce their non-vaping behaviour.

What messaging is most useful to them?

- That they're making a good/smart decision not to vape, supported by the people that matter to them and whose opinions they care about and trust.
- Information and facts about the costs of vaping, including health harms and social risks.
- Emphasise vape contents, chemicals and how nicotine works in the body. Link to addiction and mental health harms.
- That vaping isn't very common. Most teens don't vape.

What's not helpful?

Messaging that makes them curious about trying vaping.

This segment are no more likely to vape than Rejectors, but for different reasons. They are generally disinterested in vaping, whereas Rejectors make a proactive stand not to vape.

Unlike Rejectors, the Uninterested are far less informed about the perceived vaping benefits, contents and harms and we do not wish to trigger curiosity in this segment.

They are not a high priority for behaviour change interventions due to their general disinterest, and we need to be careful to not unintentionally create interest in vaping.

What do they need?

1. Information from the school health curriculum, communication campaigns, health and medical websites, and social media.
2. Support, reward and reinforcement from parents who are correctly informed about the risks of vaping, and how to have conversations with their teens that discourage vaping.



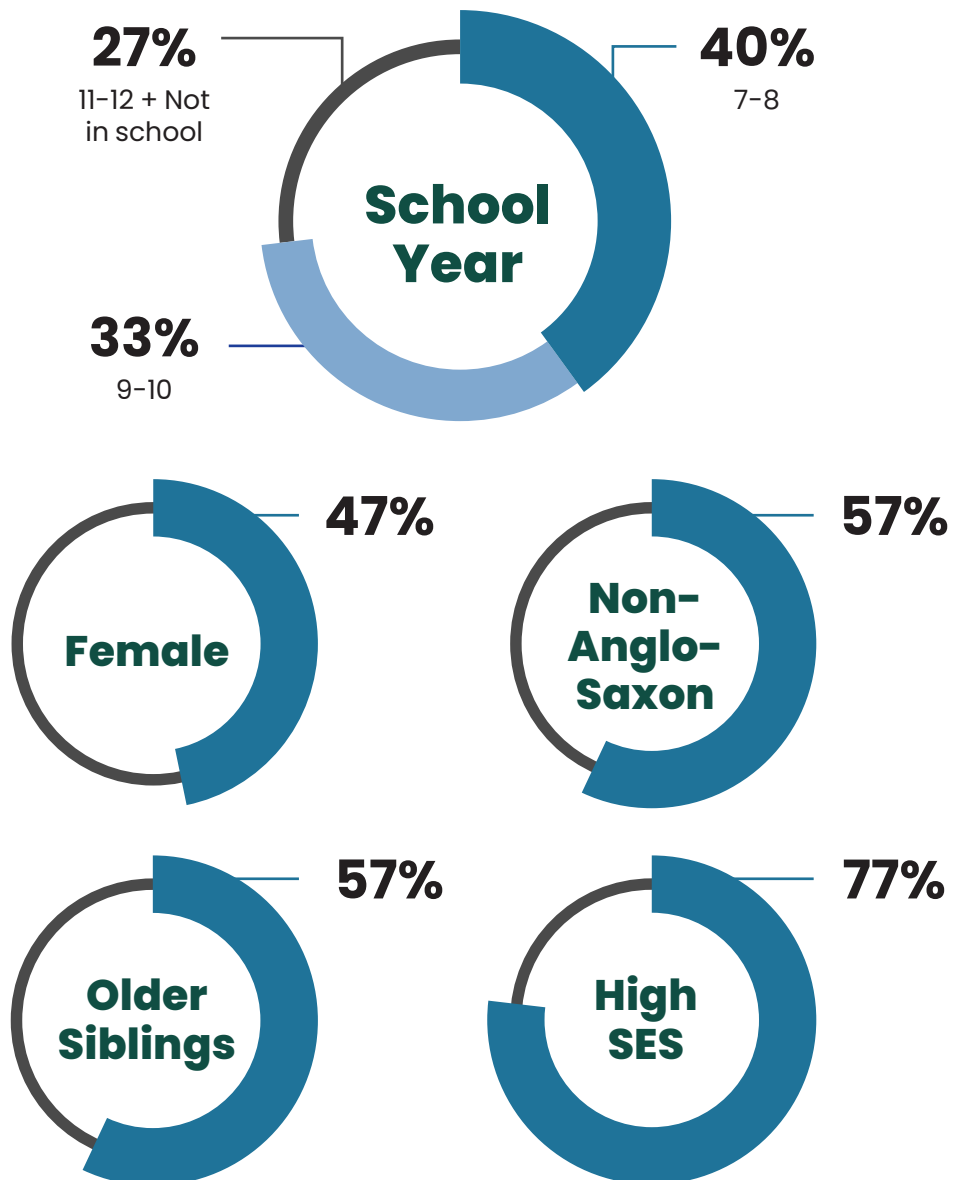
Susceptible

They've never vaped, but they're curious about it. These teens are often in social situations where vaping is more common. They tend to want to fit in and care more about what others think of them. They feel less confident about how to say 'no' if offered a vape.



Who are they?

Susceptibles are the oldest of the non-vape segments (and most likely the oldest sibling) with most being in year 9 or above, and the most socio-economically advantaged of all segments. Much more than Rejectors or the Uninterested, Susceptibles care about fitting in with others and what people think of them. While they may know people who vape, their close friends don't.



What makes them Susceptibles?

THEY DON'T HAVE ALL THE INFORMATION

Of all the non-vaping segments, Susceptibles are the least sure about their knowledgeable of the harms of vaping and what's in a vape. They are more likely to believe they can avoid addiction by not vaping too often. They tend to minimise or dismiss some of the real risks.

THEY CAN SEE THE BENEFITS OF VAPING

Susceptibles agree that vaping can give you a buzz, make you feel good, and help calm stress. But they also know that the harms can lead to social consequences and negative reactions from family members.

THEY'RE THE MOST CURIOUS

Of all three non-vaping segments, Susceptibles are the most curious about vaping. They are also the most likely to be tempted to vape in social situations. Some feel they might vape in the future.

THEY TRUST SOCIAL MEDIA

Like all non-vaping segments, Susceptibles care about the opinion of their parents and close friends the most. But they're also more likely to trust information about vaping on social media, compared to other non-vaping segments.

How can we influence Susceptibles?

Address the curiosity and beliefs about the benefits of vaping and reinforce their non-vaping behaviour.

What messaging is most useful to them?

- That they're making a smart decision not to vape, supported by people that matter to them.
- Use ex-vapers (Triallists) to address their curiosity about vaping with facts about the contents of a vape, why it's harmful and what the risks are.
- Challenge the perceived functional benefits (e.g. helps you feel happier, calmer and more confident and helps you cope with problems) and show healthier ways to get the same coping benefits.
- Link these functional benefits to nicotine addiction and causing poorer mental health.
- Challenge the belief that you can avoid addiction by not vaping very often and show that small amounts of nicotine can be harmful and can become addictive once you start. Many teens described a slippery slope to addiction once they started.

What do they need?

1. Fact-based information from health and medical websites, and social media.
2. Help to develop their social skills and capability to say no to vaping in the future. Consider words and scenario-planning on how to say 'no', particularly at parties and social gatherings.
3. Help to strengthen their coping skills for positive mental health, undermining the benefits for vaping.
4. Support from parents who are correctly informed about the risks of vaping, and how to have conversations about vaping with their teens.
5. Ways to control or remove their access to vaping opportunities at school and in public and social settings.
6. Sports clubs and teams to discourage vaping through codes of conduct and conversations about sports performance.
7. Share stories from ex-vapers (triallists) about why vaping isn't worth it. The costs outweigh the perceived benefits.

Parents are also an influencer audience for this segment. Communications and support also should be invested in parents to maintain this segment's non-vape status and strengthen their attitudes against vaping.



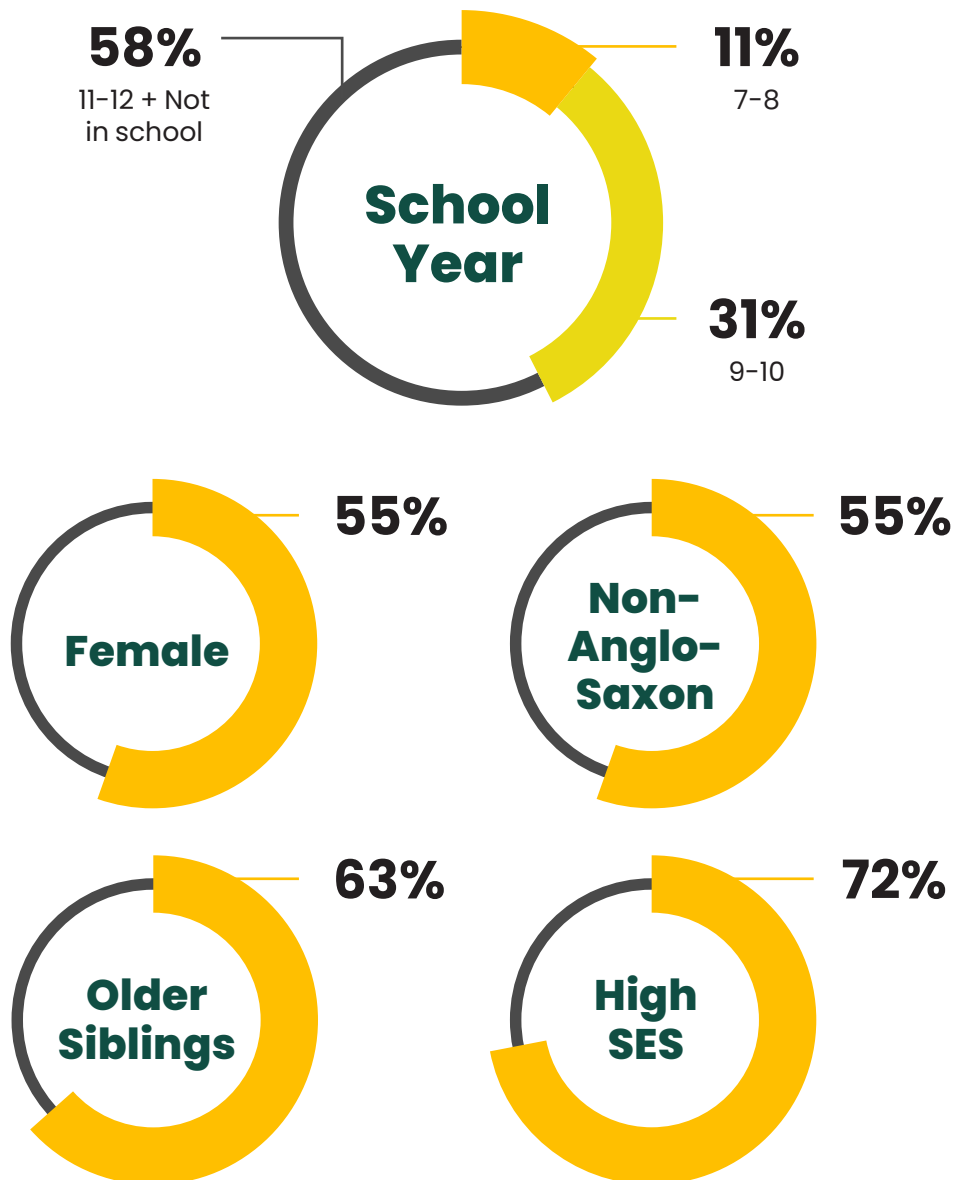
Triallists

Triallists have tried vaping but haven't vaped at all in the last few months. Many didn't have a great experience with vaping and like Rejectors, they don't see many benefits of vaping or intend to try it again.



Who are they?

With more females than males, Triallists are in their middle and senior school years or out of school. They're more likely to be older siblings and earn their own money. They're outgoing with some appetite for risk-taking. They tend to make new friends at parties, on social media or through work and some of these friends vape.



What makes them Triallists?

THEY HAVE MORE INFO

Triallists are clear about the harms and contents of vapes, seeing them as expensive and addictive. But because they've stopped using vapes (for now), they believe it's possible to avoid them.

THEY BELIEVE IN THE HARMS

Triallists are generally dismissive of claims that vaping is beneficial and are the most likely to endorse the harms of vaping.

THEY DON'T OWN A VAPE

Of the vaping segments, they're the least likely to have ever bought or currently own a vape, and most don't know what type of vapes they've used. These teens have only vaped a small number of times with close friends, at parties or at a friend's house. Most Triallists say they won't vape again.

THEY LISTEN TO TRUSTED SOURCES

Triallists care about the opinions of their parents, close friends, health organisations and medical professionals. And will trust information about vaping from the government and schools.

How can we influence Triallists?

Reinforce their negative attitudes towards vaping and maintain their recent non-vaping behaviour.

What messaging is most useful to them?

- That they've made a smart decision to stop vaping.
- How they are personally benefitting right now from not vaping, by avoiding the health harms of vaping (e.g. damage to lungs, damage to their developing brain, poor mental health, risking friendships and family relationships).
- Explain how nicotine works in the body and its links to poor mental health. The best way to avoid nicotine addiction is to continue not to vape.
- Whilst they do not need to be persuaded that vaping is 'bad', giving them more information about the harms of vaping and how nicotine works can help them talk to their friends about it. This also helps reinforce their decision to not continue vaping.

What do they need?

1. Support to act as effective messengers and role models to the Susceptible and Experimenter segments – particularly their friends who value the perceived benefits of vaping or need reasons to stop or not try vaping.
2. By talking about their decision to stop vaping, Triallists contribute to changing the distorted narrative that vaping is everywhere amongst teenagers.
3. Parents and older siblings to reinforce their decision not to vape.



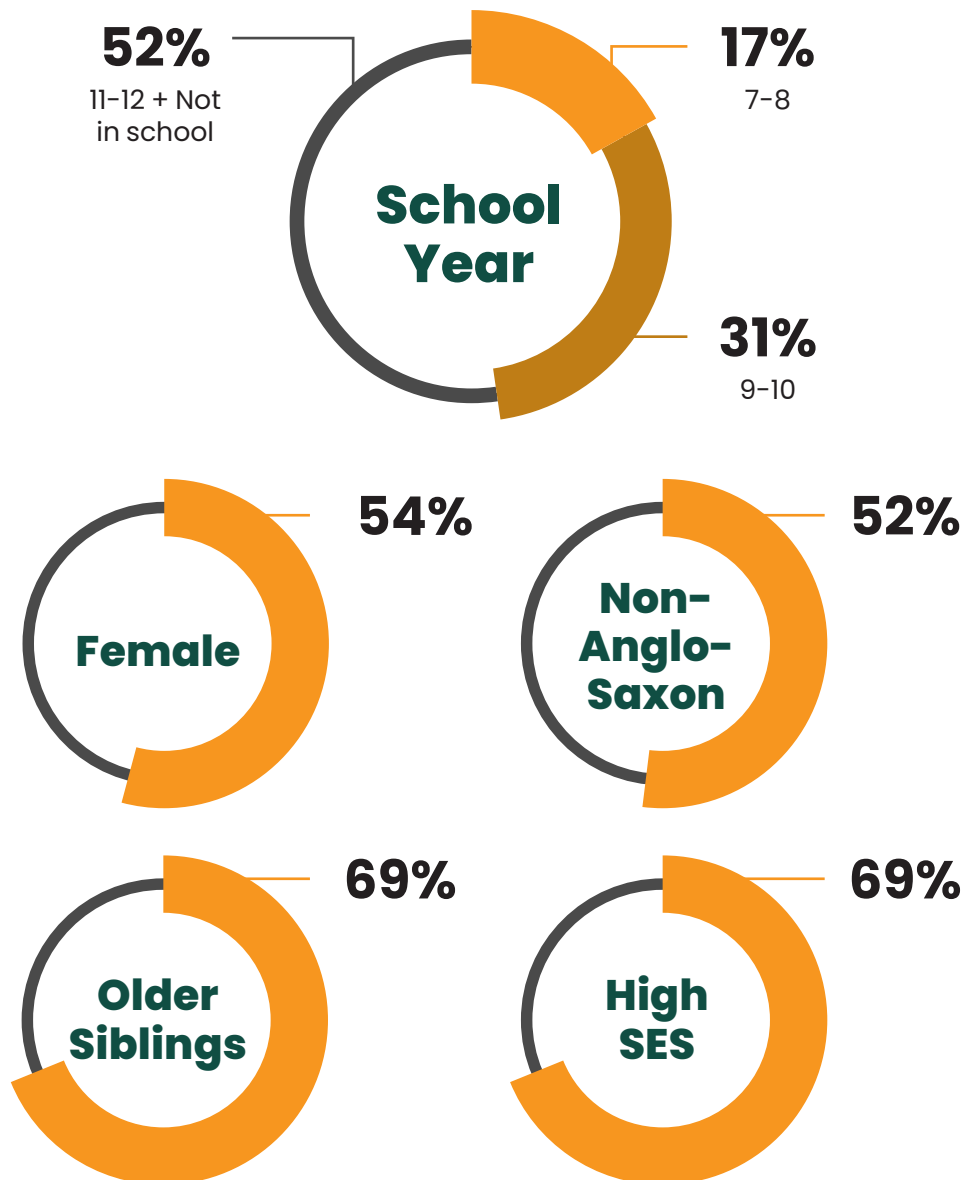
Experimenters

The light recreational users. Experimenters tend to vape once every few months, mostly in private with people they trust. Many are comfortable with the amount they vape, but half would like to reduce or stop.



Who are they?

More likely female, Experimenters are the youngest of the vape segments and the least likely to be in a public high school. Most have older siblings. Teens in this segment earn their own money and have a relatively high disposable income. With a higher appetite for risk than the non-vape segments, many of these teens are motivated by a desire to fit in.



What makes them Experimenters?

THEY'RE SOMEWHAT INFORMED

Experimenters have some knowledge of the harms of vaping, but are less knowledgeable about the contents of a vape. Many don't perceive vapes as being addictive and believe they can avoid it by not vaping too often.

THEY HAVE MIXED OPINIONS

While they tend to dismiss the functional benefits of vaping, Experimenters often see value in the more immediate and superficial benefits (e.g. they taste good, they're fun to use and make you look good).

THEY VAPE ON AND OFF

Most Experimenters vape once every few months with a small proportion having owned a vape in the past. They usually vape with close friends or people they know at a party or a friend's house.

THEY LISTEN TO TRUSTED SOURCES

Experimenters care about the opinions of their parents, close friends, health organisations and medical professionals. They will trust information about vaping from the government and schools, as well as social media.

How can we influence Experimenters?

Inform on the contents, persuade on the harms of vaping even a little, and challenge that their vaping behaviour is harmless.

What messaging is most useful to them?

- Encourage them to stop, self-reflect about their vaping habits, and talk to the people whose opinions matter to them (parents).
- Information about the contents of a vape, nicotine addiction, and the health risks associated with even the smallest amount. Harm is not necessarily related to dose and that even vaping 'a little bit' can cause health harms (damage to lungs and brain resonate most).
- Link the dots between nicotine, vaping, and mental health harms. This is new information to them.
- Explain how much nicotine is in a vape compared to cigarettes. This is new information for Experimenters, and highly deterring because it increases the perceived harm of even a few puffs.

- Encourage to not buy your own disposable vape if you want to lower your risk of addiction. Many addicted teens say they regret owning their own.
- Information about how to spot the early signs of addiction and your personal 'watch-outs' – when you're vaping not just for fun but because you're feeling stressed or sad or worried, or you're vaping on your own, or you've bought your own vape.
- Challenge their belief that they are in control of their vaping on the basis that they don't know what's in it (chemicals), so they are not controlling their harm.

What's not helpful?

Challenging the perceived enjoyable and pleasure seeking benefits of vaping, such as it being a fun thing to do, or doing it to fit in. These are difficult to challenge through messaging.

What do they need?

1. Support to develop social skills and confidence to say no to vaping.
2. Behavioral swaps for vaping to help them feel more comfortable and social maintain credibility in settings where their friends might offer them a vape (e.g. at a party or a friend's house).



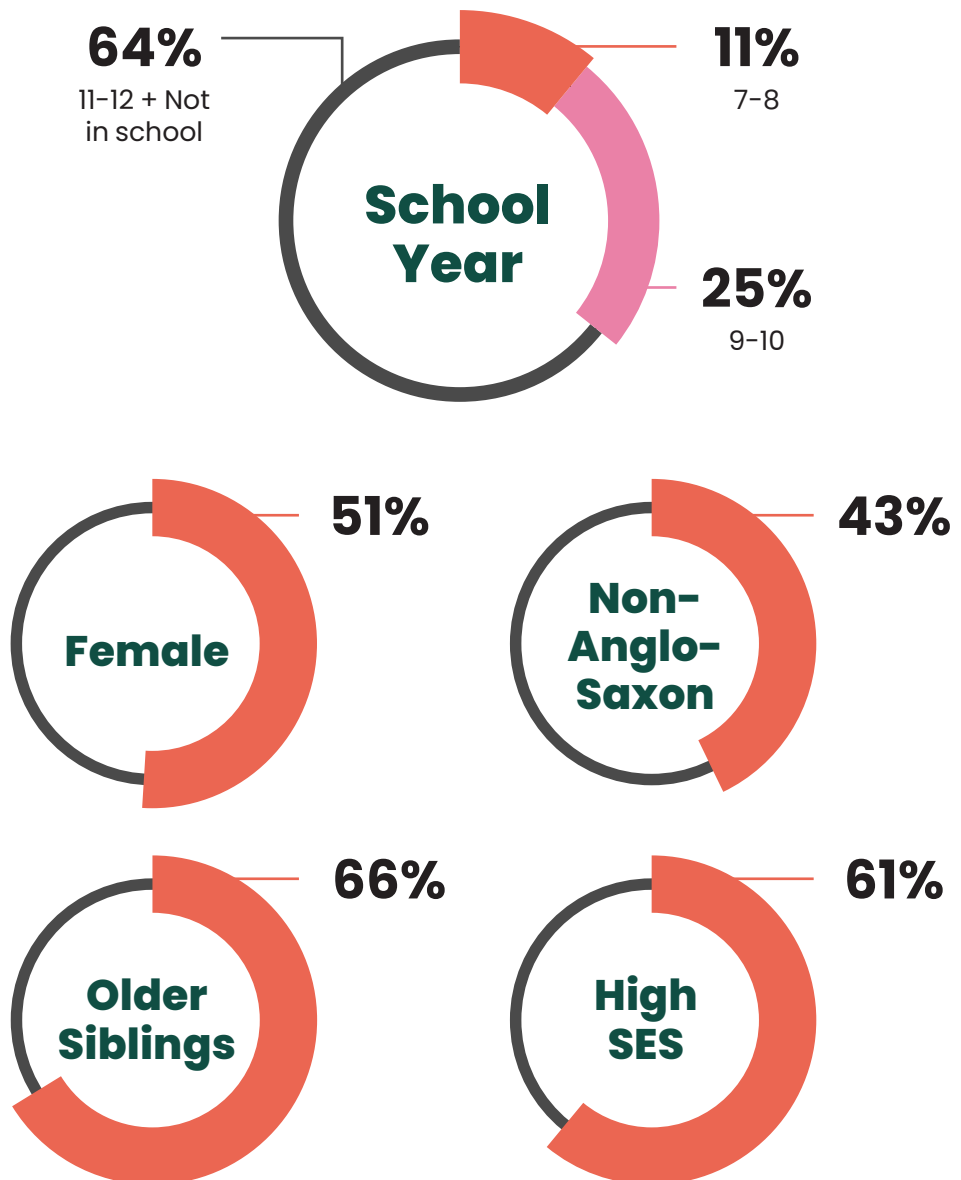
Attached

Attached teens vape somewhat more frequently than Experimenters, with more vaping alone at least some of the time. They have a higher appetite for risk. Many of the Attached have bought their own vape, and endorse the benefits of vaping. However, they don't consider themselves addicted and believe they can avoid it by managing how often they vape. Around half would like to cut down or stop vaping in the future.



Who are they?

Most of these teens are in year 11 or 12 with older siblings. They have a strong appetite for risk and tend to make friends at parties, on social media and at work. They're more likely to be earning their own money and have higher disposable income than other segments.



What makes them Attached?

THEY'RE CONFIDENT THEY WON'T GET ADDICTED

Many teens in this segment are comfortable with how much they vape. They don't believe they're addicted and overestimate how popular vaping is amongst their age group.

THEY BELIEVE IN THE BENEFITS

Attached teens will endorse most of the benefits of vaping but have a mix of views on the social and functional benefits. They'll entertain messaging around the health risks, but many aren't convinced it's entirely true.

MOST VAPE WEEKLY, SOME DAILY

While they mostly vape with friends, almost half also vape at home or by themselves. The Attached are likely to continue vaping over the next year but are unsure if they will beyond that point.

THEY IGNORE ADVICE

Attached teens don't care as much about the opinions of influencers, friends, siblings, parents, and health organisations, but may be influenced by their older siblings. More than any other segment, they're more likely to trust information on social media, but remain a little skeptical.

How can we influence Attached?

Inform them about the contents of vapes, and challenge that their vaping behaviour is harmless and under their control.

What messaging is most useful to them?

- Encouragement to reflect on how much they're vaping and link their intake to increased harm and inevitable addiction. 'If you're vaping weekly, you're much closer to addiction and health harms than you may think'.
- Challenge their idea of being in control of their vaping on the basis that they don't know what's in it (chemicals) – so they are not controlling their harm.
- Inform how nicotine levels in vapes equate to cigarettes and link to nicotine addiction and mental health risks. 'If you're vaping to cope with stress or to relax or feel more confident, it's not just fun anymore and you're more susceptible to harm than you think'.

- Encourage to not buy your own disposable vape if you want to lower your risk of addiction. Many addicted teens say they regret owning their own.
- Share stories from addicted teens (Committed) explaining the slippery slope from social vaping to addiction. While they think they're in control of their vaping that addiction can sneak up on them, especially if they've got a vape on them most of the day. Also how much money they waste on vapes.
- Provide guidance on how to spot the early signs of addiction and your personal 'watch-outs'. E.g. vaping outside of social situations, feeling stressed, sad or anxious, or you've bought your own vape.
- Challenge the view that most teens vape – it's only most people in some settings where they hangout (parties), but most people their age don't vape.

What do they need?

1. Encourage self-belief, capability and support to cut back or stop vaping completely – particularly in social settings.
2. Guidance about what to do if you own a vape but you don't want to vape anymore.



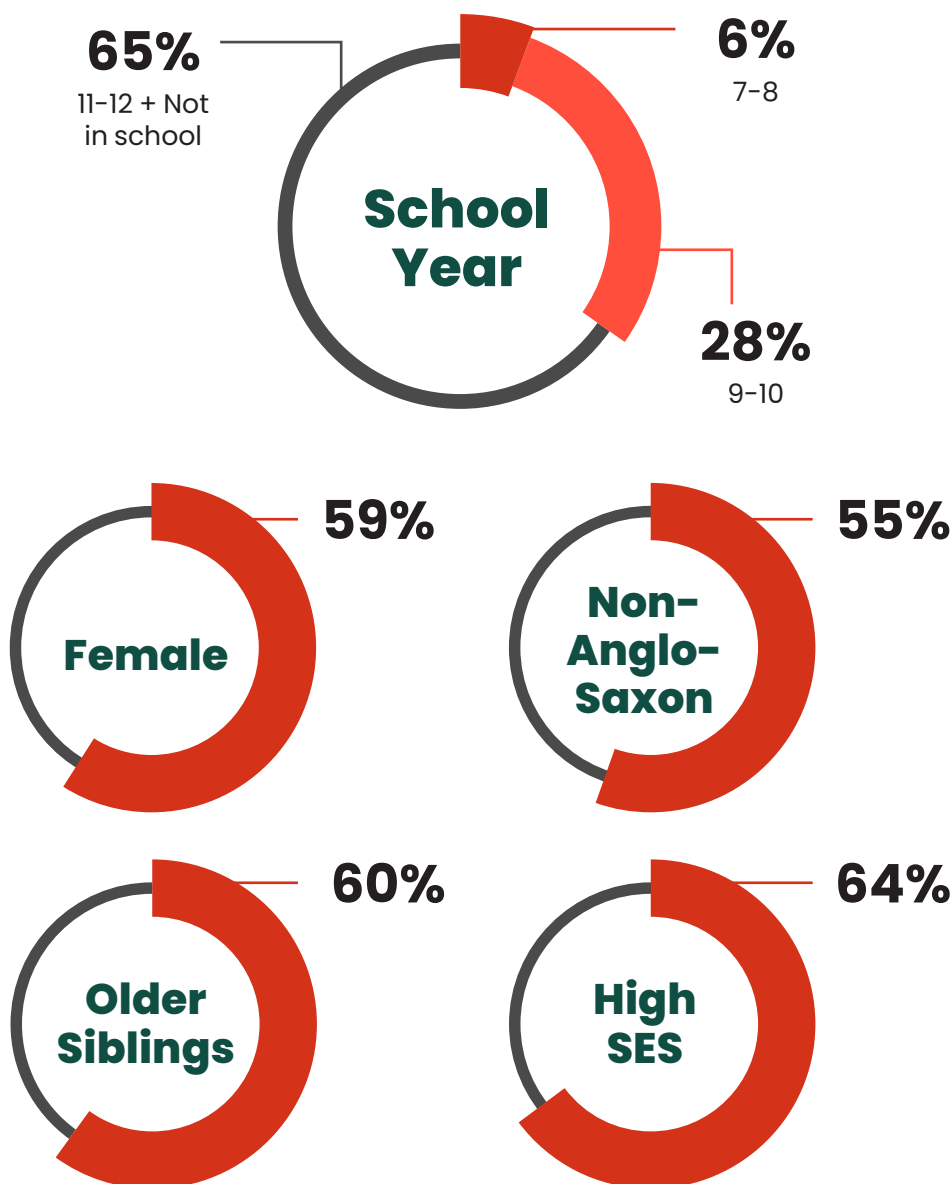
Committed

Most vape daily and believe that they're addicted. They believe vaping is a safer option than other coping mechanisms and tend to use their own vape across a wide range of social and physical settings. While the majority want to cut down or stop altogether, they lack the self-belief and confidence in their ability to do so. Most expect to be vaping in the next year.



Who are they?

The Committed have more females than any other segment and are the oldest of all segments. Of all the vaping segments, they have the highest level of disposable income and use a combination of vape types. They like to take risks but also care about what others think of them and are the most likely to make friends on social media or through work.



What makes them Committed?

THEY THINK THEY HAVE ALL THE INFO

Committed teens believe that they know more about the contents of vapes and for this segment the financial cost of vapes is not such a barrier. They agree that vaping can be hard to stop once you start, but half the segment also believes that you can avoid addiction by not vaping too often.

THEY BELIEVE VAPING IS SAFER THAN OTHER RISKY BEHAVIOURS

Committed teens endorse the functional and social benefits of vaping, but also believe that vaping harms their health and that they would need help to stop vaping.

MOST VAPE PRACTICALLY EVERYDAY

In all settings and situations, on their own and with friends and family.

THEY VALUE TRUSTED OPINIONS

They care about the opinions of their parents, close friends, government, and health organisations. But they don't listen to most influencers.

How can we influence Committed?

Persuade, motivate, support and enable them to stop.

What messaging is most useful to them?

- Prompt self-reflection of the short-term harms they may be experiencing from vaping and the symptoms they can recognise.
- Show that what they gain from stopping far exceeds what they give up, including health, social and financial benefits.
- Explain that they may think vaping helps them relax, feel calm or manage stress but that's just the nicotine hit making them feel that way and keeping them hooked.
- Show them how to take back control over their health.
- Remind them it's never too late to stop vaping, even if they have tried before. Specific help is available for teens trying to quit.
- Teach them other ways to deal with stress from school and life. Try staying active, doing things they enjoy, connecting with friends and family or contact [Headspace](#) to swap their vape stress for new tactics and little ways to cope day by day.

What's not helpful?

Avoid talking about mental health harm/costs, as the motivation for trying vaping may have been the experience of poor mental health – the threat of mental health harm therefore doesn't seem as relevant and is dismissed.

What do they need?

1. Support to stop that's tailored for teens and teaches them how to manage withdrawal at school and home.
2. Guidance on how to talk to parents about their vaping addiction.
3. Behavioral 'swaps' for vaping to deal with stress and poor mental health.





The Behaviour Change Collaborative

Suite 2, Ground Floor
1318 Hay Street WEST PERTH 6005
T + 61 (0)8 6331 6057
www.thebcc.org.au

 thebehaviourchangecollaborative

 thebcc_au

 TheBCC_Org

 thebcc_au

 thebehaviourchangecollaborative

Victorian Health Promotion Foundation

Melbourne Office
Level 2/355 Spencer St,
West Melbourne VIC 3003
T +61 3 9667 1333
F +61 3 9667 1375
vichealth@vichealth.vic.gov.au
vichealth.vic.gov.au

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