

## Overview

Physician communication with adolescents regarding smoking and tobacco use has positive impacts on tobacco-related attitudes, knowledge, intentions, and quitting behaviors.<sup>1</sup> However, fewer than half of U.S. adolescents report being screened for tobacco use by their doctor and even fewer adolescent tobacco users are screened and receive advice to quit.<sup>2,3</sup> The PACE Vermont team collaborated with the Vermont Child Health Improvement Program (VCHIP) to assess whether Vermont teens and young adults received information about vaping in health supervision visits.

## Methods

669 Vermont teens and young adults completed surveys in Spring 2021 that addressed nicotine and tobacco product use, as well as recent health care visits. Several survey questions dealt with being asked or provided information about vaping and tobacco use **at the last health care visit**.

### Study Sample

174 Vermont teens (ages 12-17) and 495 young adults (ages 18-25) participated in the Wave 6 (Spring 2021) survey of the PACE Vermont Study. More study information at [www.pacevt.org](http://www.pacevt.org)

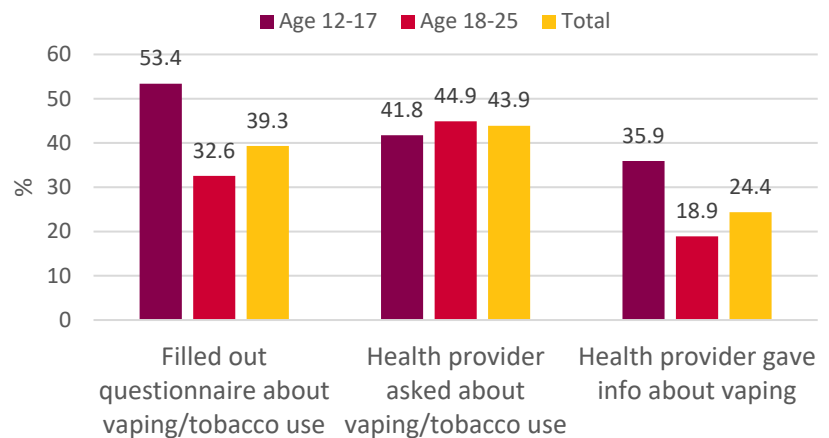
## Findings

The majority of PACE Vermont participants (94.9%) had a visit with any health care provider within the last 2 years. Of those who had a visit in the last 2 years (n=630), almost half (47.3%) reported that the last visit was a health supervision visit (a check-up or physical), with an additional 3.5% reporting that the visit was for sports, camp, college or work. Other reasons for a visit included a re-check of a problem (13.3%) and being sick or not feeling well (11.3%).

### Vaping/tobacco use screening at last health care visit

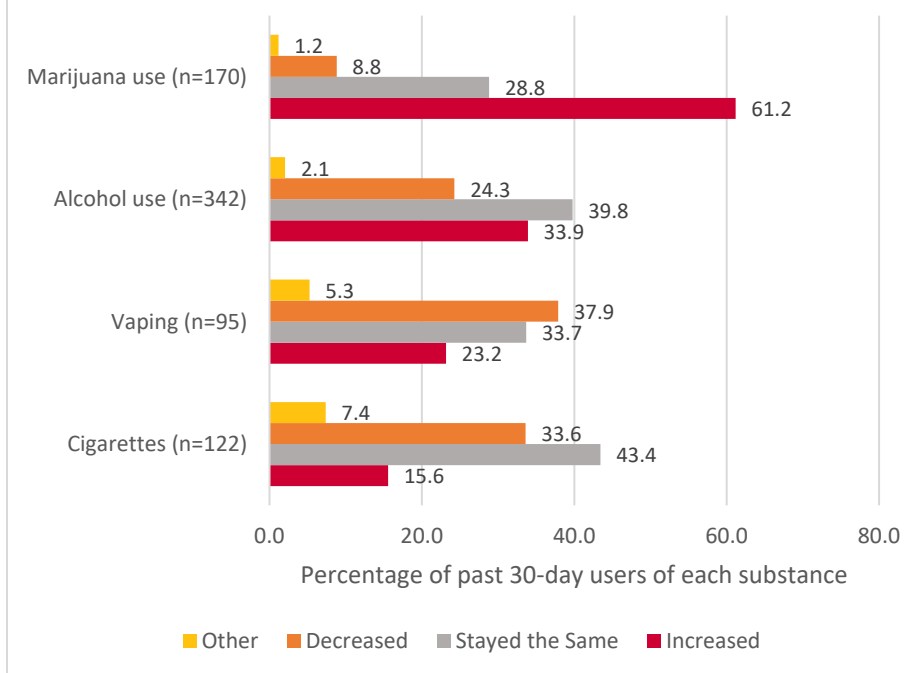
Of participants whose health care visit in the last 2 years was either a health supervision visit (i.e., check-up) or a visit for sports, camp, college, or work (n=320), 58.1% reported either filling out a questionnaire about, being asked about, or being provided information about vaping or tobacco use (Figure 1). Fewer than half of participants were screened by a health care provider for vaping or tobacco use and only a quarter received information about vaping. Approximately one-third (30.7%) of those whose visit was for any other reason reported filling out a questionnaire, being asked, or given information about vaping or tobacco use (26.2% of teens and 31.7% of young adults).

**Figure 1. Health care provider screening and communication about vaping/tobacco use at health supervision visits\***



\*At the last visit, if in the last 2 years, and either health supervision visit (check-up or physical) or visit for sports, camp, college, or work

Figure 2. Change in substance use since COVID



### Screening for all substance use is important, especially in the context of COVID

Prior research has shown that youth screened for tobacco use are also more likely to be screened for other substance use.<sup>2</sup> In the Spring 2021 PACE survey, 61.2% of past 30-day marijuana users reported increasing their use since they learned about the coronavirus pandemic, while 33.9% of past 30-day alcohol users, 23.2% of past 30-day electronic vapor product users, and 15.6% of past 30-day cigarette smokers have increased their use (Figure 2). These data in Vermont youth and young adults highlight the importance of physician communication about nicotine and other substance use during any health care visits.

## Conclusions

Fewer than half of PACE participants in Spring 2021 reported being asked by their health care provider about vaping/tobacco use or given information about vaping during a health care visit. Health care providers/practices whom youth and young adults trust and are familiar with are in a unique position to assess and provide information about nicotine, tobacco, and substance use. Provider communication about vaping and tobacco use with adolescents is an important intervention to reduce nicotine and tobacco use.<sup>4,5</sup> If not already doing so, providers should consider adding a brief question about vaping and other tobacco use during all visits, and have information displayed in their lobbies and exam rooms that would be relevant to youth and their parents, as well as young adults.

## Resources

### Online Tobacco/Vaping Cessation Support & Tools:

- [My Life My Quit](#)
- [Teen Smokefree.gov](#)
- [802Quits](#)
- [This is Quitting](#)
  - Text **DITCHVAPE** to **88709**
- [VT Helplink](#)

### Community Partners:

<https://www.healthvermont.gov/wellness/tobacco/state-and-community-partners>

### American Academy of Pediatrics (AAP) Resources:

<https://www.aap.org/en/patient-care/tobacco-control-and-prevention/>

## References

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3. Schauer GL, Agaku IT, King BA, Malarcher AM. *Pediatrics*. 2014;134(3):446-455.
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