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Research Article

Gen-Z Vs. Vaping

Evan T. Dimentberg*

¹Laval University, Quebec City, Canada

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ABSTRACT

Vaping is a fairly new trend. Generation Z's overconsumption of these products can lead to serious health problems in the future. The purpose of this article is to understand why vaping is prevalent. Furthermore, the article analyses gen-Z's perception of vaping and compares it to their actual habits. All data was taken from an independent online survey unless stated otherwise and can be accessed at the end of this document.

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"You're like 25% of a doctor, right? Why can't you treat me?"

Surprisingly enough, this is something my friends ask me fairly often. On top of the occasional jokes, many of them actually call me on a regular basis to ask for medical advice. I try to help them as much as possible, but they definitely overestimate my abilities at this point in my training. These calls usually range from looking at their eye to tell them if (I think) they have pink eye, to questions about side effects of certain medications, or to advice about whether to go see a doctor about their headaches. When one of my friend's colleagues fell unconscious at work and wouldn't wake up, he called me instead of dialling 9-1-1.

For the most part I am flattered at how much confidence they have in me, but there is one subject where they never listen, no matter how much I try. They joke: "What do my lungs look like?" as if they don't already understand the negative consequences of cigarettes and vaping on their lungs. I read them statistics, I show them pictures and I ask them to quit, but I am yet to convince a single person.

One of the seven key pillars of medicine I was taught in my first year of medical school at Laval University was the promotion of health. Medicine isn't only about treating patients, but also the prevention of future diseases. Even though I am not a doctor yet, I try my best to apply these pillars to my day to day life. I sent out a survey halfway through this summer to estimate smoking habits in gen-Z, specifically people born between 1997-2007. I received over 500 responses from students all over North America in 10 days and while I am not surprised by the results, I think they are important to share.

Over 35% of students surveyed admitted to smoking a cigarette at some point in their life, but only 6% reported current use. While cigarette use is fairly low, vaporizers such as Juul are becoming more and more popular. A staggering 72% of students reported that they smoke vaporizers, half of which use it every day and a third carry it with them at all times. The three main reasons listed for both types of smoking were exactly the same: the act of smoking, the effects, and the social aspect.

When our parents were teenagers, smoking cigarettes was the norm. That is, of course, until research confirmed their correlation with lung cancer. In the ensuing years, a significant number of smokers quit. Many students draw a parallel between their parents' smoking in their youth and their own habits. The main difference, however, is that our parents' generation didn't know as much about the harmful effects of smoking. Could it be that gen-Z is consciously acting in a manner that is bad for their health? These statistics seem to prove that:

- i. 100% of the surveyed students believe cigarettes are bad for your health;
- ii. 98% are aware that cigarettes are the primary risk factor for lung cancer and COPD;
- iii. 93% are aware that cigarettes are associated with an elevated risk of diabetes, stroke and heart disease;
- iv. 70% of vape users believe they are more at risk of developing health problems in the future due to vaping.

On top of that, over 60% believe there is enough scientific evidence and research to prove that vaping is bad for their health and 25% declared having a friend or family member that has been diagnosed with lung

*Correspondence to: Evan T. Dimentberg, Laval University, Quebec City, G1V 0A6, Canada; E-mail: evan.dimentberg.1@ulaval.ca

cancer or COPD. Our generation understands the consequences of smoking and chooses to ignore them. According to the survey, 88% believe that generation Z smokes too much and over 70% consider it a significant societal problem. So how do we move forward? How do you stop someone from doing something that they know is bad for them? We need new techniques to combat the prevalence of smoking. Considering that only 20% of students surveyed consider cigarette packaging (pictures, statistics, etc.) a deterrent, our governments need to implement new, adapted measures.

The obvious suggestion is to educate students about the impacts of vaping. While 60% said that they would be interested in learning more about the effects of vaping, only 25% said they would actually attend seminars or take classes on the topic. Universities could implement mandatory courses on the subject to give everyone a baseline understanding. Similarly, high schools should be adapting to the new era and adding information about vaping to their courses about alcohol and drugs. Preventing students from smoking in the first place is much easier than quitting; I strongly believe starting young is the key to success.

The second option would be to raise the legal age to purchase vapes such as Juuls. In Quebec, the government felt the need to raise the legal age for purchasing cannabis from 18 to 21 because the long-term health effects were unknown and potentially dangerous. When it comes to Juul and cigarettes, the long-term health effects are known. Vapes are a fairly new trend and their use is increasing; there needs to be tighter regulations surrounding these products.

Lastly, all the necessary tools to quit smoking should be covered by Medicare or other equivalent health insurances, as quitting is cost effective. These tools include anything from pharmaceuticals like patches and gums to visits with a psychologist or rehabilitation. No one should have to worry about the costs associated to quitting. For example, the average lung cancer patient in Ontario costs the government just over \$75,000 according to Current Oncology Canadian Cancer Journal [1]. In the United States, the National Institute of Health determined that the average cost of care in the first month after diagnosis is just over \$10,000 USD [2]. The NIH also found that the costs of smoking cessation in the US and found that each successful quit costed just over \$6000 USD and an additional \$5000 USD if mental health services were required [3]. Basically, one month of lung cancer treatment costs around the same as quitting cigarettes and receiving mental health support, in the US. By spending a fraction of the cost now, our healthcare system can save thousands of dollars in future treatments.

These three measures – education, legislation and financial support – are methods the government could use to diminish smoking and prevent an onslaught of respiratory diseases in the future. Whether the effort is completely up to the government or not; much is up to us. Gen-Z has demonstrated a self-destructive mindset when it comes to smoking. Our generation seems to do what we want with little concern for the consequences. We feel invincible. This same mindset applies to our behaviour during the pandemic: disregard for social distancing has led to spikes in cases and facilitated the spread of the virus. To correlate the two, it is important to note that 72% of students surveyed believe they are more prone to severe infections such as COVID-19 due to their smoking habits.

Invincibility is a dangerous mindset. Gen-Z is known as an activist generation; we are rebellious in nature. For problems such as climate change, gun rights and social injustices, we are very quick to take to the streets and fight for change, so why don't we act similarly when it comes to our health? We know that vaping is bad, yet we choose to ignore it. There are many ways in which the government could- and should- support the prevention of smoking but in the end, it is up to us to make the necessary changes. It is time for us to step up and model the change we look for in the world. We should consider this the first leg of the race: the part that we can actually control ourselves. Conquering our own flaws first is an important milestone in inciting real change.

Data Availability

All data used for the publication of this article can be accessed online here.

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