



American
Heart
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THE AMERICAN HEART ASSOCIATION'S
**TOBACCO-FREE
SCHOOLS TOOLKIT**



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OVERVIEW

This toolkit was designed to help school districts respond to the youth tobacco/vaping epidemic. The toolkit assists schools in creating a tobacco-free environment that helps prevent students from using tobacco products, including e-cigarettes, and support students who need help quitting. The toolkit includes model language for the adoption, implementation and enforcement of a 100% tobacco-free school district policy. Also included are recommendations for evidence-informed programs to educate students about the dangers of tobacco, provide alternatives to suspension when a student is found using a tobacco or nicotine product, and offer tobacco cessation strategies for youth.

E-CIGARETTE AND TOBACCO PRODUCT USE

In recent years, the number of students who use e-cigarettes and other vaping devices has skyrocketed. E-cigarettes have overtaken traditional cigarettes as the most popular tobacco product used by youth. Approximately 20 percent of high school students and 5 percent of middle school students use e-cigarettes¹ – a total of more than 3.5 million teens. In addition, many students continue to use traditional cigarettes and smokeless tobacco products. **Without swift action, millions of students are at risk for a lifetime of nicotine addiction and increased risks of tobacco-related diseases and premature death.**

¹Wang TW, Neff LJ, Park-Lee E, Ren C, Cullen KA, King BA. E-cigarette Use Among Middle and High School Students — United States, 2020. MMWR Morb Mortal Wkly Rep. ePub: 9 September 2020. DOI:<http://dx.doi.org/10.15585/mmwr.mm6937e1>



The American Heart Association thanks the millions of students, parents and teachers who, through their support and participation in the American Heart Association's Kids Heart Challenge and American Heart Challenge, help build a world of longer, healthier lives and a nicotine-free future for generations to come. Learn more at kidsheartchallenge.org.

Email

AHATobaccoFreeSchools@heart.org

for additional information and support to help you create a healthier, tobacco-free learning environment for your students.

NICOTINE AND HEALTH

Nicotine is a highly addictive drug. Conversations with students and school administrators suggest that **many students use e-cigarettes and other tobacco products to self-medicate** for depression, anxiety and other mental health concerns. Many e-cigarettes deliver dangerously high levels of nicotine and should never be used by youth.

The U.S. Surgeon General warns that **nicotine exposure during adolescence may harm brain development and impact learning, memory and attention.** Additionally, brain changes induced by **nicotine exposure can make youth more susceptible to addiction to other substances.**²

IMPORTANT ROLE OF SCHOOLS

Schools are the “front lines” of the youth vaping epidemic and are uniquely positioned to identify and support students who may be addicted to nicotine or at risk of addiction. Specifically, schools can structure their education and disciplinary practices to help prevent youth from starting and offer supportive approaches when students are caught using tobacco products. The American Heart Association is working with schools across the country to implement evidence-based approaches to prevent youth tobacco use.

According to the Centers for Disease Control and Prevention, **the most effective approaches to help students quit tobacco use are through counseling and education.**³ Rather than punitive discipline, appropriately structured “alternative-to-suspension” programs that incorporate cessation strategies can guide students toward quitting tobacco use while remaining fully engaged in their education. The focus of these programs is on recovery from, and reduction of, nicotine addiction.

The use of **suspension increases the likelihood of negative educational outcomes**, including lower test scores, lower graduation rates and reduced likelihood of enrolling in postsecondary education.^{4,5} According to the U.S. Department of Education, there are significant differences in the use of punitive discipline based on the gender, race and ethnicity of students. Black students, in particular, are much more likely to be suspended, expelled and referred to

²Centers for Disease Control and Prevention. (2020) Youth and Tobacco Use. Available at: https://www.cdc.gov/tobacco/data_statistics/fact_sheets/youth_data/tobacco_use/index.htm

³Centers for Disease Control and Prevention. (2008). PHS Guideline Recommendations: How to Help Adolescents Quit Smoking. Available at: https://www.cdc.gov/tobacco/quit_smoking/cessation/pdfs/phs_adolescents_508.pdf

⁴Okonofua JA, Eberhardt JL. Two strikes: race and the disciplining of young students. *Psychol Sci.* 2015;26(5):617-624. doi:10.1177/0956797615570365

⁵Rosenbaum JE. Educational and criminal justice outcomes 12 years after school suspension. *Youth Soc.* 2020;52(4):515-54. doi:10.1177/0044118X17752208

law enforcement for school-related incidents.⁶ Avoiding punitive discipline and focusing on more supportive approaches will have the triple benefit of supporting student academic achievement, improving health and decreasing inequities.

TOBACCO PRODUCT EDUCATION AND CESSATION PROGRAMS

Schools should provide age-appropriate, culturally relevant and evidence-based tobacco product education that is consistent with state health education standards. Ideally, schools should support students who use tobacco by having a system in place for referring students to evidence-based tobacco cessation programs. Districts should also be sure to inform all students and staff about effective, low- or no-cost cessation resources and services.

WHAT SCHOOLS CAN DO:

- 1. Update Your Policies** – Do your tobacco use policies cover the latest products and trends? Are they designed to effectively prevent nicotine addiction?
- 2. Educate** – It's what you do! Consider student-to-student and parent education strategies.
- 3. Support Students** – Half of students who vape want to quit! Supporting students is a more effective response than punishment.

REVIEW AND UPDATE SCHOOL DISTRICT POLICIES

Ensuring a supportive, tobacco-free environment begins with a comprehensive school district policy. If you have an existing policy governing the use of tobacco products, including e-cigarettes, review it closely. Make sure it covers all products and that it meets the other specifications in the following policy checklist.

POLICY CHECKLIST:

- The definition of tobacco products should include **all** tobacco products, including but not limited to, cigarettes, cigars, pipe tobacco, chewing tobacco, snuff and snus. It should also include electronic smoking devices and substances used in those devices, whether or not they contain nicotine, and accessories such as lighters, filters, rolling papers and pipes.

⁶U.S. Department of Education, Office for Civil Rights, Civil Rights Data Collection, 2015–16. (2019) <https://www2.ed.gov/about/offices/list/ocr/docs/school-climate-and-safety.pdf>

- ❑ The policy should apply to all property that is owned or operated by the school district– indoors and outdoors – including playgrounds, athletic fields and vehicles
- ❑ The policy should apply to all school events, whether on or off campus, including field trips.
- ❑ The policy should prohibit the possession and use of all tobacco products by all students at all times, without exception.
- ❑ The policy should prohibit the use of all tobacco products by staff, visitors and contractors.
- ❑ The policy should ensure that at least once a year, all students receive age-appropriate tobacco prevention education that aligns with state curriculum standards.

CODE OF CONDUCT CHECKLIST:

- ❑ The consequences for students who violate the tobacco policy should take a supportive approach that recognizes nicotine is highly addictive, and includes progressive consequences such as, but not limited to:
 - Conversations between the student and a designated staff person that focus on factors that led to the violation, the harms of tobacco use, review and purpose of the policy and agreed upon next steps.
 - Enrolling the student into an alternative-to-suspension program.
 - A disciplinary meeting among the student, the student’s caregiver(s) and school administrators.
- ❑ The consequences for students who violate the tobacco policy should not include suspension, expulsion, fines or service fees or withholding participation in extracurricular activities. Unless there is strong evidence to the contrary, the school should assume vape products contain nicotine when considering disciplinary approaches.
- ❑ Students should be offered cessation supports or referrals to cessation experts or programs with each violation.
- ❑ Law enforcement, including school resource officers, should not play a role in student discipline for violations of a school’s tobacco policy.

BUILDING SUPPORT FOR TOBACCO-FREE SCHOOL POLICIES

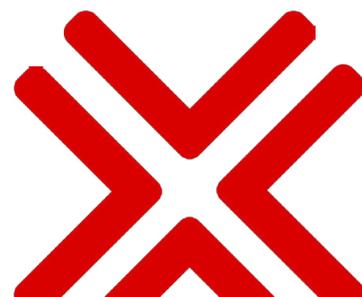
As a school district takes steps to update an existing tobacco policy or pass a new policy, it is important to get buy-in and support from staff, students and the community. Following are some ways to build support:

- Activate youth ambassadors through student leaders or student clubs.
- Enlist the help of the PTA. Ask them to include information about youth vaping and tobacco use in their newsletter or speak at a school board meeting in support of the policy.

- Host a community dialogue on vaping and tobacco use as an opportunity to talk about the youth vaping and engage the support of the community.
- Invite pediatricians and other health professionals to speak at school board meetings about the dangers of tobacco use and nicotine addiction.
- Let parents and caregivers know when the policy will be presented to the board of education for approval and encourage them to attend.

FOLLOWING ENACTMENT OF A POLICY

- Have an implementation plan ready to execute after the policy passes.
- Ensure the implementation plan outlines roles and responsibilities for enforcement.
- Monitor, evaluate and report on the policy implementation during staff meetings and board meetings.
- Evaluate the policy at least annually.
- **CREATE AWARENESS OF THE POLICY:** [\(see Appendix C\)](#)
- Develop and execute a communications plan for staff, students and the students' caregivers announcing the changes to the policy and the effective date.
- Give students and caregivers a copy of the policy every year.
- Post prominent tobacco-free signs throughout the school campus:
 - At all entranceways on to school grounds
 - At all building entrances and walkways
 - In all restrooms
 - In gymnasiums/auditoriums
 - In stairwells
 - On playgrounds
 - At athletic fields
 - In vehicles/buses
 - Designated parking areas
- Make public announcements during school events, including sporting events so that visitors are aware that tobacco use is prohibited.
- Provide a written explanation of the policy to parents, caregivers and chaperones in advance of off-campus field trips



EDUCATE – STUDENTS, STAFF AND PARENTS

It is essential for all students, staff, parents and visitors to be engaged as you create a tobacco-free environment. The American Heart Association has developed a range of resources for students, staff and caregivers to help you communicate accurate information about tobacco and vaping -- and to offer strategies to help any tobacco users quit for good.

- **Student Resources** – Recognizing how rapidly the tobacco and vaping landscape changes, our [American Heart Challenge website](#) maintains a range of infographics, fact sheets, sample student announcements and many other student-focused resources. For students who want to build their advocacy muscles, the American Heart Association’s [You’re The Cure: Tobacco Endgame](#) platform supports students with standing up and speaking out against tobacco and vaping.
- **Parent/Caregiver Resources** – Caregivers may want to speak with their children about vaping but are unsure where to start. The AHA posts information for parents to demystify this complicated subject, so parents and other caregivers can start having effective conversations with their children today. Find more information on our [American Heart Challenge website](#) or the [AHA Healthy Lifestyle site](#).
- **Staff Resources** – To help adults who may use tobacco and want to quit, the American Heart Association offers [5 steps to quit vaping and smoking](#) and encourages all tobacco users to call 1-800-QUIT-NOW for evidence-based support for a quit attempt.

SUPPORT STUDENTS

- It is critical to recognize that many students who vape or use traditional tobacco products want to quit! Creating a safe, supportive environment to help students quit is essential for student health. [Appendix B](#) of this toolkit offers recommendations for supporting students in three ways:
1. **Tobacco Prevention Education** – Offering age appropriate education to help prevent students from ever starting.
 - a. The American Heart Association has a range of lesson plans, infographics, fact sheets and activities to help students learn the facts about tobacco use and vaping.
 - b. *Catch My Breath* is an online, peer-reviewed vaping prevention curriculum that utilizes a peer-led teaching approach and meets National and State Health Education Standards.
 - c. *Vaping Prevention: A Self-Paced Online Course* is a research-informed and validated set of online curriculums to help prevent students from starting or escalating use of any tobacco product.

2. Alternative to Suspension Programs – Helping schools respond to tobacco policy violations by supporting students.

- a. *INDEPTH* – a convenient alternative to suspension programs that helps schools address tobacco use in a more supportive way. *INDEPTH* is taught by any trained adult in four, 50-minute sessions.
- b. *Healthy Futures: An Alternative-to-Suspension* offers a flexible 1-, 2- or 4-hour online curriculum with activities and interactive materials that provide secondary preventive messages to students caught using e-cigarettes/vapes.

3. Youth Tobacco Cessation Programs – Ensuring students who want to quit receive appropriate support.

- a. *Not On Tobacco (N-O-T)* gives teens the resources they need to break nicotine dependency and find healthier outlets. Unlike other cessation programs which simply modify adult curricula, N-O-T was designed with teenagers in mind to address issues that are specifically important to them. N-O-T is facilitated by a trained and certified adult with a small group format.
- b. *This Is Quitting* is a free text-message program designed to help young people quit vaping. The messages show the real side of quitting and are framed as coming from a non-judgmental friend that is there to give advice and support on the quitting journey to make the user feel like they are not alone in quitting. Young people ages 13-24 can enroll by texting in HEART to 887-09.
- c. *My Life, My Quit* is available in 19 states, this service provides telephone-based coaching to young people who want to quit. Students can enroll online, via text, or by calling 1-855-891-9989.

Email **AHATOBACCOFREESCHOOLS@HEART.ORG**
for support helping create a healthier, tobacco-free
learning environment for your students.

APPENDIX A: MODEL SCHOOL TOBACCO POLICY, ADMINISTRATIVE RULES & CODE OF CONDUCT



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School district approaches to tobacco are typically codified through district-wide policies, student codes of conduct, administrative rules and state regulations or laws. This document contains comprehensive language to support districts in creating and sustaining 100% tobacco-free school environments.

While each school district is unique in its approach to setting policies and practices regarding tobacco, the model language outlines **an exemplary approach for tobacco-free school policy that includes, but is not limited to, the following:**

- The policy applies to ALL tobacco products;
- The policy prohibits use of ALL tobacco products by students, staff and ALL visitors while on school property and at ALL school-sponsored events;
- The policy prohibits tobacco industry promotional activities, including industry-supported prevention and cessation programs;
- The policy reflects a supportive approach to discipline for students; and
- The policy ensures students interested in quitting will be referred to a cessation program.

The model language can help ensure districts adopt the policies, administrative rules and codes of conduct that establish an equitable and supportive approach to student tobacco use and vaping. Additionally, the model language contains recommendations to ensure effective implementation and accountability. When creating or updating tobacco policies, districts should also incorporate state and local regulations impacting the use of tobacco products in schools and on other district property.

We hope this model language is helpful as you work to revise your own policies, administrative rules and student codes of conduct.



TOBACCO-FREE DISTRICT MODEL POLICY LANGUAGE

Note: Terms or phrases in bold and italics are defined in the glossary of terms.

I. PREAMBLE

Under federal law since 1994, smoking is prohibited in any kindergarten through 12th grade (K-12) school serving children under the age of 18 years if federal funds are used . Many states also have laws that restrict the **commercial use of tobacco products**, including **electronic smoking devices**, in public K-12 schools. *[Insert State Specific Regulations Here]*. As the commercial use or promotion of **tobacco products** on **district property** and at off campus **school- or district-sponsored events or meetings** is detrimental to the health and safety of **students, staff** and **visitors**, it is critical that *[District Name]* properly regulate such products. In addition, given the addictive nature of these products (many of which contain **nicotine**), the district must support students and staff who are addicted to tobacco products and address violations of this policy with a focus on recovery and reduction of tobacco product addiction and dependence as well as avoiding lost instructional time for students.

Schools are the “front lines” of the youth e-cigarette epidemic and are uniquely positioned to identify and support students who may be addicted to nicotine or at risk of addiction.

II. RATIONALE

[District Name]:

- has an obligation to protect the health and safety of students, staff and visitors.
- is acutely aware of the serious health risks associated with the commercial use of tobacco products to users and non-users.
- believes that prohibiting the commercial use and promotion of tobacco products on *[District Name]* property, at any off-campus school- or district-sponsored event or meeting and in *[District Name]* vehicles protects the community from the harms of secondhand smoke and aerosol exposure, as well as promotes tobacco product-free norms.
- embraces its obligation to promote positive role models across the district and to provide an environment for learning and working that is safe, healthy and free from tobacco smoke and aerosol exposure.
- recognizes that supporting prevention and cessation of the commercial use of tobacco products in students, staff and visitors is critical to sustainable reduction of such use.

The U.S. Surgeon General warns that **nicotine exposure during adolescence may harm brain development and impact learning, memory and attention**. Additionally, brain changes induced by **nicotine exposure can make youth more susceptible to addiction to other substances**.

¹ 20 U.S.C §6083(a). (1994). Non-smoking policy for children’s services. Available at <https://www.law.cornell.edu/uscode/text/20/6083>

- acknowledges that tobacco product usage and its impact varies widely depending on a person’s racial or cultural identity, sexual orientation and/or gender, and that people of color, women, youth and members of the **LGBTQ+** community are subject to disproportionate marketing of tobacco products.
- is committed to addressing violations of this policy by students in a measurable, objective, consistent and equitable manner, with a focus on **supportive disciplinary practices** that promote recovery and reduction of tobacco product addiction and dependence.
- prohibits exclusionary practices for students who violate this policy, such as suspension and expulsion or the withholding of extracurricular activities.
- recognizes that the purpose of an educational institution is to teach and thus will actively work to decriminalize student tobacco product possession and use by refraining from referring individuals in violation of this policy to law enforcement.
- honors the recognized religious, spiritual or cultural ceremonies or practices of Indigenous populations, including the **Indigenous use** (but not inhalation or ingestion) of tobacco products in ceremonies and practices and allows the possession and use of tobacco products for such purposes on district property or at school- or district-sponsored off-campus activities.
- believes accepting contributions, gifts, money, curricula or other educational materials from the **tobacco industry** sends an inconsistent message to students, staff and visitors and thus will not allow such activities.

III. POLICY STATEMENT

Effective *[Insert Date]*, *[District Name]* enacts the following Tobacco-Free District Policy, with the exceptions noted in Section V

- **Prohibitions**
 - Students, staff and visitors are prohibited from using, displaying, activating, promoting or selling tobacco products or **imitation tobacco products** at **any time** and at any location on district property, at any off-campus, school- or district-sponsored event or meeting and in district vehicles.
 - Students are prohibited from possessing tobacco or imitation tobacco products at any time and at any location on district property or at any off-campus, school- or district-sponsored event or meeting and in district vehicles.
 - No one on behalf of the district may solicit or accept any contributions, gifts or money from the tobacco industry to include, but not be limited to, donations, monies for sponsorships/scholarships, advertising, promotions, loans or support for equipment, uniforms and sports and/or training facilities.



- No one on behalf of the district may solicit or accept curricula or other educational materials of any kind that are created by or with input from the tobacco industry.
- The promotion of tobacco products or imitation tobacco products on district property or at off-campus, school- or district-sponsored events or meetings to include promotion of **tobacco industry brands** via gear, technology accessories, bags, clothing, any personal article, sign, structure, vehicle, flyer or any other product or paraphernalia is prohibited.
- **Allowances**
 - It is allowable for staff or adult visitors to possess or use a product that has been approved by the FDA for sale as a **tobacco cessation or dependence product** and is being marketed and sold solely for such an approved purpose.
 - It is allowable for a student to possess or use a product that has been approved by the FDA for sale as a tobacco cessation or dependence product and is being marketed and sold solely for such an approved purpose, assuming such possession or usage is accompanied by medical authorization and adheres to all district medication protocols.
- **School-Based Tobacco Product Education**
 - Age-appropriate, **evidence-based**, cross-curricular **school-based tobacco product education** shall be included in the education provided to all students in K-12 in the district at least once per year and the curriculum for this instruction will not be paid for or developed by the tobacco industry.
 - Staff responsible for teaching tobacco product education shall be provided with continuous **professional learning opportunities** that address how to effectively deliver the education program as planned.
 - Tobacco Education and Cessation Services for Staff
 - The district will provide and encourage participation in free, subsidized or low-cost tobacco education and cessation programs for staff (e.g., through an Employee Assistance Program, health insurance, other health plan carrier resources or community partners).
 - The district will provide information on tobacco education and cessation services available at little to no-cost and will provide culturally relevant educational resources to staff who have not violated the policy but wish to obtain this information.

According to the Centers for Disease Control and Prevention, **the most effective approaches to help students quit tobacco use are through counseling and education.**

- **Policy Violations**

- The district shall address violations of this policy by students with a graduated set of evidence-based, supportive disciplinary practices that promote recovery and reduction of tobacco product addiction and dependence.
- The district prohibits **exclusionary** practices for students who violate this policy, such as suspension and expulsion or the withholding of extracurricular activities.
- The district will ensure that **qualified staff** are available to provide commercial tobacco product use interventions at every school and that these staff members are provided with continuous professional learning opportunities to implement these interventions with fidelity.

The use of **suspension increases the likelihood of negative educational outcomes**, including lower test scores, lower graduation rates and reduced likelihood of enrolling in postsecondary education.

IV. EXCEPTIONS

It shall NOT be considered a violation of this policy within *[District Name]*:

- for any person to possess, provide to any other person or use (but not inhale or ingest) tobacco products (excluding electronic smoking devices) as part of an Indigenous practice or a lawfully recognized religious, spiritual or cultural ceremony or practice.
- for tobacco products to be used (but not inhaled or ingested) as part of an educational experience related to Indigenous tobacco practices, provided that the activity is conducted by a staff member or an approved visitor and that it has been pre-approved by **administrators**.
- for tobacco products to be used (but not inhaled or ingested) in an instructional activity related to tobacco product education, provided that the activity is conducted by a staff member or an approved visitor and that it has been pre-approved by administrators.





TOBACCO-FREE DISTRICT MODEL ADMINISTRATIVE RULE LANGUAGE

To ensure that the *[District Name]* Tobacco-Free District Policy is:

- effective at reducing the usage of tobacco products among all members of the district community;
- implemented with fidelity; and
- implemented uniformly across the district without discrimination based upon any protected class, including but not limited to age, race, ethnicity, gender identity, sexual orientation, disability status and other demographics;

We enact the following administrative rules language to address the implementation of and accountability for the policy.

I. IMPLEMENTATION AND ACCOUNTABILITY

[District Name]:

- designates responsibility for the implementation and the assessment of implementation of the policy to *[Include Appropriate Individual/Team Here]*.
- will design (prior to or within six months of the policy taking effect) a specific process for collecting, disaggregating (e.g., by grade level, school building, demographic characteristics and racial/ethnic subgroups), reviewing and analyzing data on the implementation and effectiveness of the policy.
- will collect (at regular intervals and at least once a year) the above data and assess policy implementation at the district level and across all schools in the district to determine whether policies, disciplinary actions, communication, education, staff training and interventions were effective for students and staff overall and for those within the subgroups specified above.
 - A critical part of this assessment will include a review of violations of the policy and a thorough analysis of the effectiveness, impact and outcome of the interventions used to address those violations.
- will update and revise the policy and programs based on the annual review and analysis of policy implementation using a ***continuous improvement process***.



- grants authority to the *[District Wellness Council, District Leadership Team or Insert Appropriate Entity Here]* to support coordination and implementation of the policy. This committee shall be made up of a wide range of stakeholders (ensuring diversity of representation in terms of age, race, ethnicity, gender identity, sexual orientation, disability status and other demographics) to include, but not be limited to:
 - superintendent (or designee)
 - school board members
 - school-level staff (including teachers and administrators)
 - **specialized instructional support staff** (e.g., school counselors, psychologists or social workers) and **school health professionals** (e.g., nurses, physicians, **chemical dependency professionals** or school-based health center staff)
 - students
 - members of the **Parent Teacher Association/Parent Teacher Organization**
 - **caregivers**
 - **community health professionals** (e.g., doctors, nurses or other licensed health professionals)
 - community organizations involved in tobacco prevention and cessation programming (e.g., staff of local health departments or state tobacco control programs)
 - community members
 - this committee SHALL NOT include members or representatives of the tobacco industry

II. NOTIFICATION TO THE PUBLIC AND PUBLIC INVOLVEMENT

[District Name] will inform students, staff, caregivers and the public at least once a year about the existence of the policy to include:

- its content and any updates;
- results of district- and school-level implementation analysis and any changes made because of the analysis;
- an explanation of why updates were made, who was involved and how stakeholders were made aware of their ability to participate;
- the effective dates of any policy changes;
- the names and contact information of the district and/or school officials leading and coordinating the implementation and oversight of the policy;
- information about how the public can get involved with the *[District Wellness Council, District Leadership Team or Insert Appropriate Entity Here]*;
- information about *[District Wellness Council, District Leadership Team or Insert Appropriate Entity Here]* meetings including dates, times, locations, agendas and meeting minutes; and
- mechanisms for the public to ask questions, get additional information or provide feedback and comments on the policy or its implementation.

[District Name] will ensure that communications are culturally and linguistically appropriate to the community and will use a variety of communication methods to ensure that all students, staff, caregivers and community members have access to the information. [District Name] will keep persons with or those that represent persons with disabilities or other marginalized communities involved in all aspects, including updates to and assessments of the policy.

The district will use multiple methods to distribute this information to the community, including but not limited to:

- electronic mechanisms (e.g., email);
- non-electronic mechanisms (e.g., newsletters or flyers sent home to caregivers);
- presentations to students, staff and caregivers;
- displaying notices on the district and school websites;
- including information in student, staff and caregiver handbooks, orientations and trainings and ensuring that the policy is provided upon hire to all new staff of [District Name];
- posting appropriate signage throughout the district at building entrances and other highly visible locations on all district buildings, vehicles, vehicular entrances to district grounds and all indoor and outdoor athletic facilities, indicating that [District Name] requires an environment free from the commercial use of tobacco products;
- including [school-based tobacco product education](#) in health and wellness curricula (consistent with state health educational standards), to include review of the policy; and
- making announcements about the policy at appropriate intervals during district/school events, including back to school events and at least one School Board meeting each year.

III. SCHOOL-BASED TOBACCO PRODUCT EDUCATION

Age-appropriate, evidence-based, cross-curricular, [school-based tobacco product education](#) shall be included in the education provided for all students in K-12 in [District Name] at least once per year and:

- shall include a combination of curriculum-based classroom instruction (consistent with state health education standards), assemblies, written materials sent home with students and school-wide health promotion activities.
- the curriculum for this instruction will not be paid for or developed by the tobacco industry.
- tobacco product education instruction and programming will be culturally responsive and representative of a diverse student population.
- instruction will include,² but not be limited to:
 - immediate and long-term undesirable physiological, cosmetic and social consequences of the use of all forms of tobacco products.

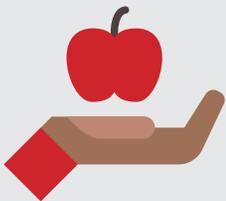
²Centers for Disease Control and Prevention. (1994, February 25). Guidelines for school health programs to prevent tobacco use and addiction. Morbidity and Mortality Weekly Report. <https://www.cdc.gov/mmwr/preview/mmwrhtml/00026213.htm>

- social norms regarding commercial tobacco product use including tobacco industry tactics to target youth, communities of color and other groups.
- reasons that adolescents say they use tobacco products.
- social influences that promote commercial tobacco product use.
- behavioral skills for resisting social influences that promote commercial tobacco product use including alternative stress management techniques.
- general personal and social skills such as assertiveness, communication, goal-setting and problem-solving skills that may enable students to avoid both commercial tobacco product use and other risk-taking behaviors.
- staff responsible for teaching tobacco product education shall be provided with continuous professional learning opportunities that address how to effectively deliver the education program as planned.
- the district will provide information on tobacco cessation services available at little to no-cost and will provide culturally relevant educational resources to students and caregivers who have not violated the policy but wish to obtain this information.

IV. COMMUNITY PARTNERSHIPS

To support students, staff and caregivers in abstaining from or reducing tobacco product use and complying with the Tobacco-Free District Policy, *[District Name]* will consult with health insurers, the local public health department and/or other community-based organizations to provide information about and access to free or low-cost evidence-based programs and services for tobacco prevention and cessation.

Benefits of a **100% TOBACCO-FREE** school district



Creates (or promotes) a healthy learning environment



Protects against exposure to secondhand smoke and vape aerosols



Helps support individuals who want to quit



Helps denormalize the use of tobacco products



TOBACCO-FREE DISTRICT MODEL STUDENT CODE OF CONDUCT LANGUAGE (SEE MODEL STUDENT CODE OF CONDUCT SECTION)

Students of *[District Name]* are responsible for adhering to the *[District Name]* Tobacco-Free District Policy at all times and at all locations on district property or at any off-campus, school- or district-sponsored event or meeting and in district vehicles. Violations of the policy will result in a tiered set of interventions as described below.

[District Name] designates responsibility for the oversight of this process to *[Include Appropriate Person/Team Here]* and ensures that law enforcement and school resource officers will not be included in the disciplinary process.

It is critical to recognize that many students who vape or use traditional tobacco products want to quit! Creating a safe, supportive environment to help students quit is essential for student health.

[District Name] hereby acknowledges the following:

- As tobacco products contain nicotine and other ingredients to increase their appeal, and as electronic smoking devices may contain nicotine or other natural synthetic addictive substances, procedures to address student violations of the policy will be applied in a direct and consistent manner, emphasizing the equitable and non-discriminatory use of supportive disciplinary practices that focus on recovery and reduction of tobacco product addiction and dependence, and prohibits exclusionary practices for students who violate the policy, such as suspension and expulsion or the withholding of extracurricular activities.
- The chemical composition of electronic smoking devices may be unknown without laboratory testing, thus all violations involving electronic smoking devices will be addressed by this policy unless other objective evidence (e.g., other drug paraphernalia is present or packaging includes images or language indicating the presence of **THC**) supports laboratory testing and the results from such laboratory testing indicate the violation should be addressed by district policies on the use of other drugs.

Policy violations by students will be tracked each school year. A tiered approach for addressing student violations of the policy will be applied as follows:

- The **first violation involving ONLY the promotion of tobacco industry brands** shall result in:
 - provision of materials to cover tobacco industry logo (on apparel) or request to turn in specific item to school staff to be picked up at the end of school day; and
 - a reminder of this policy and a request to sign a statement indicating understanding of and commitment to following the policy.

- All **subsequent violations involving ONLY the promotion of tobacco industry brands** shall result in:
 - a conversation with an administrator or other staff member to review this policy as well as dress code and other applicable policies (staff will provide previously signed statement and ask for recommitment); and
 - notification of caregiver including a reminder of the policy.

- **Any violation** involving possession or usage of tobacco products shall result in:
 - confiscation of tobacco products;
 - notification of caregivers;
 - the offer of information to the student about available tobacco education and/or cessation programs that are free or low-cost (e.g., through Medicaid or community partners), including nationally recognized *tobacco cessation programs*;

Rather than punitive discipline, appropriately structured "alternative-to-suspension" programs that incorporate cessation strategies can guide students toward quitting tobacco use while remaining fully engaged in their education. The focus of these programs is on recovery from, and reduction of, nicotine addiction.

- facilitation of the enrollment of the student in an evidence-based [tobacco cessation program](#) if the student expresses an interest in quitting; and
 - additional intervention as follows:
 - at the **first violation** the following will occur:
 - » a *collaborative conversation* shall take place between the student and a designated staff member) to discuss:
 - › what factors led to the violation, including information on student's tobacco product usage, possible triggers for use and
 - › knowledge of physical, social and emotional harm caused by tobacco.
 - › the policy's purpose, which is to protect students from the impacts of long-term commercial tobacco product use.
 - › a verbal agreement on next steps between student and designated staff member.
 - at the **second violation** the following will occur:
 - » a collaborative conversation shall take place between the student and a designated staff member as outlined above.
 - » the student will be enrolled in an evidence-based tobacco education program as an [alternative to suspension](#).
 - » the district shall designate a staff member to monitor the progress of the student found in violation of the policy.

- 
- at the **third and subsequent violation(s)** of the policy the following shall occur:
 - » a **supportive discipline meeting** shall take place between the student, their caregiver(s) and at least three staff members in the following roles: administrator or member of student discipline staff; chemical dependency professional or designated staff member (ideally a school nurse, school counselor or school based health center staff member); other student support staff member (as identified by student) to include:
 - › a discussion of the following topics:
 - past violations of policy.
 - progress of student in treatment or other interventions.
 - specific challenges and barriers to impeding policy adherence.
 - commitment by student to avoid infractions and address tobacco usage through on- and off-campus resources.
 - support from staff members and caregiver to ensure success.
 - › the development of a 60-day plan monitored by a designated staff member to include collective agreement of consequences that will follow if this plan is not completed.
 - » the student will be enrolled in an evidence-based tobacco education program as an alternative to suspension.

Avoiding punitive discipline and **FOCUSING ON MORE SUPPORTIVE APPROACHES WILL HAVE THE TRIPLE BENEFIT** of supporting student academic achievement, improving health and decreasing inequities.



GLOSSARY OF DEFINITIONS AND TERMS

Administrator – Any person who has disciplinary and managerial authority to enforce policies in a district, including but not limited to district campus administrators.

Any Time – 24 hours a day, seven days a week, all the days of the year, including days when school is not in session.

Caregiver – Any person that has legal guardian status over a student enrolled in a school district, including a parent.

Chemical Dependency Professional – Health educator that is specifically trained to provide education on chemical prevention, use and abuse.

Collaborative Conversation – A specific frame for a conversation that focuses on problem solving and relationships.

Commercial Use of Tobacco Products – Any use of a tobacco product for a purpose other than an Indigenous practice or a lawfully recognized religious, spiritual or cultural ceremony or practice.

Community Health Professionals – Health providers who provide services outside of the school setting, such as physicians, nurses, tobacco treatment specialists, chemical dependency professionals, mental health providers and other licensed health professionals.

Continuous Improvement Process – An ongoing cycle of collecting data and using it to make decisions to gradually improve program processes.

District Property – All facilities and property, including land, whether owned, rented or leased by the district, and all vehicles (including school buses) whether owned, leased, rented, contracted for or controlled by the district that are used for transporting students, staff or visitors. This includes any outdoor space owned or operated by the district including recreational and athletic fields and facilities, theaters, annexes, parking lots and grounds.

District Wellness Council – A District Wellness Council is sometimes referred to as the School Health Advisory Council. It is comprised of district, school and community members who meet at least four times per year to establish district goals and to oversee school health and safety policies and programs, including development, implementation, evaluation and updates of the **Local School Wellness Policy**.

Electronic Smoking Device – Any product containing or delivering nicotine or any other substance, whether natural or synthetic, intended for human consumption through the inhalation of aerosol from the product. This includes, but is not limited to, devices manufactured, marketed or sold as electronic-cigarettes, heated tobacco products or “heat-not-burn” products (IQOs), e-cigars, e-pipes, vape pens, mods, tank systems, pod systems (e.g., Juul and Suorin) and disposable systems (e.g., PuffBar and Mojo) or

under any other product name or descriptor. “Electronic smoking device” includes any component part of a product, whether marketed or sold separately, including but not limited to e-liquids, e-juice, cartridges or pods.

Evidence-Based – “Evidence-based” is used to refer to any of the four Tiers described in the Every Student Succeeds Act (ESSA):

- Tier 1 – Strong Evidence: supported by one or more well-designed and well-implemented randomized control experimental study
- Tier 2 – Moderate Evidence: supported by one or more well-designed and well-implemented quasi-experimental study
- Tier 3 – Promising Evidence: supported by one or more well-designed and well-implemented correlational study
- Tier 4 – Demonstrates a Rationale: practices that have a well-defined logic model or theory of action, are supported by research

Exclusionary Discipline Practices – Disciplinary practices such as suspension and expulsion or the loss of extracurricular activities that remove students fully or partially from the school environment.

Imitation Tobacco Product – Any edible non-tobacco product designed to resemble a tobacco product, or any non-edible non-tobacco product designed to resemble a tobacco product and intended to be used by children as a toy. “Imitation tobacco product” includes, but is not limited to, candy or chocolate cigarettes, bubble gum cigars, shredded bubble gum resembling chewing tobacco, pouches containing flavored substances packaged similar to snus and shredded beef jerky in containers resembling snuff tins.

Indigenous Tobacco Product Use – The use (but not inhalation or ingestion) of tobacco products as part of an Indigenous practice or a lawfully recognized religious, spiritual or cultural ceremony or practice.

Leadership Team – A team that leads the implementation of district or school-wide practices and policies. A leadership team should consist of administration, teacher-leaders and other staff, caregivers, students and community stakeholders. Examples of district leadership teams include District Wellness Councils and School Health Advisory Councils.

LGBTQ+ – An acronym for lesbian, gay, bisexual, transgender, queer and other sexual orientations.

Local School Wellness Policy –A written document of official policies that guide a local education agency or school district’s efforts to establish a school environment that promotes students’ health, well-being and ability to learn by supporting healthy eating and physical activity.

Nicotine – A toxic colorless or yellowish oily liquid that is the chief active and addictive constituent of tobacco. It acts as a stimulant in small doses, but in larger amounts blocks the action of autonomic nerves and skeletal muscle cells. Exposure to nicotine during adolescence can cause addiction and dependence and harm to developing adolescent brain cells.

Parent Teacher Association (PTA) / Parent Teacher Organization (PTO) – Parent Teacher Associations and Parent Teacher Organizations are associations of caregivers and school/district staff that play a pivotal role in how educational standards and other policies are enacted and implemented at the state, district and school levels. PTA/PTO leaders are encouraged to meet with their school, district and/or state administrators to ensure a school environment where all students can learn.

Professional Learning Opportunities – The continuous process of learning inclusive of traditional professional development, coaching and feedback with the goal of increasing implementation within the context of a learning community.

Qualified Staff – Healthcare provider, nurse, clinical social worker, specialized instructional support personnel as defined by the Every Student Succeeds Act, chemical dependency professional or a staff member who has received specific training on tobacco prevention and treatment (e.g., Tobacco Treatment Specialist training).

School – Any public nursery; day care center; childcare facility; Head Start program; kindergarten, elementary, secondary or K-12 school; alternative learning center; or adult education center operated under the control of a district or school.

School-Based Tobacco Product Education – Evidence-based education, as defined by national or state school health standards, provided annually within the school environment to all K-12 students to inform them of the dangers of the use of tobacco products and discourage students from using such products.

School District – A unit for administration of a public-school system often comprising several towns within a state. A district may be comprised of any combination of public nursery schools; day care centers; childcare facilities; Head Start programs; kindergarten, elementary, secondary or K-12 schools; alternative learning centers; or adult education centers.

School Health Professional – Health professional (usually a school nurse) that works within the school and provides health services to students.

School- or District-Sponsored Event or Meeting – Any event or meeting sponsored by the school or district whether or not it occurs on district property, including but not limited to, sporting events, day camps, field trips, dances or theatrical productions.

Signage – Signs declaring that all district property is free of tobacco products.

Specialized Instructional Support Staff – Staff whose role in the school is to provide support to students outside of the traditional instructional setting and are licensed to do so. This includes school nurses, school psychologists and school social workers.

Staff – Any person employed by the district as full or part-time, with direct or indirect monetary wages or compensation paid by the district. This term includes, but is not limited to, faculty, service personnel, student teachers, adult classroom or student aides and other adults working for the district.

Student – Any person enrolled in the district educational system.

Supportive Discipline Meeting – A structured disciplinary process focused on addressing the harm created by violations of school policy. These meetings result in specific plans of action grounded in a balance of support and accountability.

Supportive Disciplinary Practices – Disciplinary practices that are rooted in empathy and provide opportunities for students to understand root causes of their behavior and develop positive coping strategies.

THC – THC (tetrahydrocannabinol) is an ingredient commonly found in marijuana, that can bind to receptors in the human brain and cause alterations in many aspects of brain functioning. Inhaling or ingesting THC causes impaired thinking and interferes with a person’s ability to learn and perform complicated tasks.

Tobacco Cessation/Dependence Product – Nicotine replacement therapy or pharmacotherapy product (which may contain nicotine) approved by the U.S. Food and Drug Administration (FDA) for use in assisting individuals in ceasing the use of tobacco products, to include over-the-counter nicotine replacement products such as patches and gums, as well as prescription medications. Note: Electronic smoking devices are not FDA-approved cessation products.

Tobacco Cessation Program – Program specifically designed to assist individuals in ceasing the use of tobacco products, inclusive of electronic smoking devices.

Tobacco Industry – Manufacturers, distributors, wholesalers and retailers of tobacco products or electronic smoking devices. This includes parent companies and subsidiaries.

Tobacco Industry Brand – Any corporate name, trademark, logo, symbol, motto, selling message, recognizable pattern of colors or any other indication of product identification identical or similar to those used for any brand of tobacco product, or any manufacturer, distributor, wholesaler or retailer of tobacco products.

Tobacco Product – Tobacco products include any product that is made or derived from tobacco, or that contains nicotine, that is intended for human consumption or is likely to be consumed, whether smoked, heated, chewed, absorbed, dissolved, inhaled or ingested by any other means, including, but not limited to, cigarettes, cigars, pipe tobacco, chewing tobacco, snuff or snus. This definition also includes electronic smoking devices and substances used in such devices, whether or not they contain nicotine, and includes any component or accessory used in the consumption of a tobacco product (e.g., lighters, filters, rolling papers or pipes). Note: “Tobacco product” does not include nicotine replacement therapy or pharmacotherapy products (which may contain nicotine) that are approved by the FDA for use in assisting individuals in ceasing the use of tobacco products and include over-the-counter nicotine replacement products such as patches and gums, as well as prescription medications.

Visitor – Any person on district property that is not a student or staff member of the district as previously defined by this policy. This includes caregivers, contractors and the general public.



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APPENDIX B: SUPPORTIVE PROGRAMS



SUPPORT DESIGNING YOUR TOBACCO FREE SCHOOL DISTRICT

The American Heart Association is supporting school districts across the United States to create a healthier, tobacco-free learning environment. Please email the American Heart Association at AHATobaccoFreeSchools@heart.org and consider the program recommendations in Appendix B for support with policy development, programmatic recommendations and staff training/support.



Summary: Through our foundation in science and advocacy for strong public health policies, the American Heart Association works to prevent tobacco use and help current tobacco users quit. We are aggressively working to eliminate vaping and all other tobacco use among youth and young adults. Our staff are positioned to bring evidence-based and equity-promoting resources to help schools respond to youth vaping and tobacco use.

Resources and Support:

Tobacco-Free District Model Policy

Co-developed with the Alliance for a Healthier Generation this policy promotes supportive disciplinary practices and alternatives to suspension. It features updated language and best practices for districts, including verbiage for administrative rules and student code of conduct.

Tobacco-Free District Assessment

AHA staff are available to help school districts assess existing policies and identify opportunities to update or strengthen their current tobacco policies and procedures.

Designing Your Supportive Strategy

AHA staff are available to help school districts design their student codes of conduct in ways that will support students within your school culture and existing procedures.

Cost: Free. Schools may be eligible for a stipend to support implementation of policy and practice changes that align with recommendations in this toolkit!

Website: www.heart.org/antivaping

Direct contact: Email AHATobaccoFreeSchools@heart.org for additional information and support to help you create a healthier, tobacco-free learning environment.



Summary: The Alliance for a Healthier Generation (Healthier Generation) and the American Heart Association have partnered to reduce vaping and e-cigarette use in schools and districts nationwide. In collaboration with the foremost experts and trusted partners in tobacco policy and youth vaping, Healthier Generation engages stakeholders in districts nationwide to effectively reduce e-cigarette use in school communities by providing intensive, personalized support and resources. Healthier Generation’s equity-focused and evidence-based policies and practices are designed to enhance existing efforts and provide professional learning opportunities to districts across the country.

Resources and Support:

Tobacco-Free District Model Policy

Co-developed with the American Heart Association, this policy promotes supportive disciplinary practices and alternatives to suspension. It features updated language and best practices for districts, including verbiage for administrative rules and student code of conduct.

Tobacco-Free District Assessment

Based on the Tobacco-Free District Model Policy, this assessment helps districts identify opportunities to update or strengthen their current tobacco policies and procedures.

Professional Development

Healthier Generation’s support is designed to help districts engage families and community leaders in a joint effort to develop and sustain a tobacco and vape-free culture of health.

Cost: Free

Website: www.healthiergeneration.org





SCHOOL-BASED TOBACCO EDUCATION PROGRAMS

The American Heart Association recommends the following programs to help schools satisfy Section IV of the Model Tobacco Product Free School Policy and Section III of the Administrative Rules for School-Based Tobacco Product Education.



Products covered: All Tobacco

Summary: The American Heart Association has developed a series of lesson plans, infographics, fact sheets and student activities to educate students about the harms of tobacco and vaping. These resources are updated as new science and data emerge regarding vaping and tobacco products. Educators are encouraged to contact your local American Heart Association office to connect with a representative who can speak with you about the resources and our Kids Heart Challenge and American Heart Challenge programs.

Ages / Grades: Middle School and High School Students

Duration: Lesson plans can be integrated into existing courses

Implementation cost: Free

Training costs: Free

Website: www.heart.org/antivaping



Products covered: E-cigarettes and vaping

Summary: The *CATCH My Breath* curriculum and activities stimulate informed, peer-driven conversations while empowering students with the knowledge and skills they need to make educated decisions about vaping. The evidence-based program meets National and State Health Education Standards for grades 5-12, includes adaptations for delivering the program in a PE setting, and has supplemental STEM and Humanities lessons for certain grades.

Ages / Grades: 10–18 years / Grades 5–12

Duration: 4 Lessons; 30–40 minutes per lesson

Versions:

- 5th Grade
- 6th Grade
- 7th–8th Grades
- 9th–12th Grades

Implementation cost: Free

Training costs: Free recorded virtual training; \$50 for live/interactive virtual training; \$300 for live/interactive virtual train-the-trainer

Website: www.catchmybreath.org



Products covered: E-cigarettes and vaping

Summary: *The Vaping Prevention: A Self-Paced Online Course* sits within the [Tobacco Prevention Toolkit](#). The Toolkit is a research-informed and validated set of curriculums to help prevent students from starting or escalating use of any tobacco product. This new online course is a free, vaping prevention course to use for teaching and/or to assign to students to do on their own. This course was developed in consultation with and reviewed by youth, educators, and health care providers.

Ages / Grades: Middle and high school students.

Duration: Two versions: Linear and Open (see below). Takes at least 1 hour for students to go through the course on their own. Educators can use the course for 5 hours of instruction, especially if paired up with activities from the Tobacco Prevention Toolkit. The course includes quizzes, audio walkthrough, click-and-drag activities, infographics, and short videos. Each version has the same five learning modules, each with lessons that contain activities, videos, and opportunities for discussion:

- A. A Real Intro to E-Cigarettes*
- B. All of the Chemicals: From Liquid to Aerosol*
- C. What's the Damage: Health Effects of the Aerosol*
- D. Central Problem of E-Cigarette Usage: Nicotine*
- E. What Are They Selling: Nicotine Marketing*

Each module has assessments, either open-ended or multiple-choice questions which provide feedback once students submit their answers. This tool can be used to learn what students know or to clarify what else needs to be covered in future teaching.

Implementation cost: Free

Training costs: Free. You can fill out a Training Request Form at: <https://tinyurl.com/TPT-Training>.

Website:

- Open version/no sign in required: <https://mededucation.stanford.edu/courses/vaping-prevention/>
- Linear version/students sign up at: <https://mededucation.stanford.edu/vaping-prevention-registration/>
- After you have given your students time to do the linear version of the course you can contact the course manager, Richard Ceballos, at rceb3@stanford.edu to request a spreadsheet breaking down the percentage of the course that your students completed.

The Tobacco Prevention Toolkit is a research-informed and validated set of curriculums to **help prevent students from starting or escalating use of any tobacco product.**



ALTERNATIVE TO SUSPENSION PROGRAMS

The American Heart Association recommends the following programs to help schools implement supportive and restorative disciplinary approaches as outlined in the Model Student Code of Conduct section.



Products covered: All Tobacco

Summary: INDEPTH® (Intervention for Nicotine Dependence: Education, Prevention, Tobacco and Health) is a convenient alternative to suspension program that helps schools and communities address the teen tobacco/vaping problem in a more supportive way. Instead of solely focusing on punitive measures, INDEPTH is taught by any trained adult in four, 50-minute sessions. Each session addresses a different tobacco-related issue and can be facilitated either one-on-one or in a group setting. The goal of the program is to educate students about nicotine dependence and cravings and ultimately guide them how to kick the unhealthy addiction that got them in trouble in the first place. Adult facilitators complete an online, on-demand INDEPTH Facilitator training course, and then receive a step-by-step guide to plan and implement the INDEPTH program at their school or community-based organization. Ages / Grades: Middle School and High School students

Duration: 4 Lessons; 50 minutes per lesson

Implementation cost: Free

Training costs: Free recorded virtual training available at <https://lung.training/courses/indepth.html>

Website: <https://www.lung.org/quit-smoking/helping-teens-quit/indepth>



Products covered: All Tobacco

Summary: The Healthy Futures: An Alternative-to-Suspension curriculum sits within the [Tobacco Prevention Toolkit](#). The Toolkit is a research-informed and validated set of curriculums to help prevent students from starting or escalating use of any tobacco product. The Healthy Futures curriculum provides activities and interactive materials that provide secondary preventive messages to students caught using e-cigarettes/vapes, or students and parents looking for materials to help youth move towards quitting. This course was developed in consultation with and reviewed by youth, educators, and health care providers.

Ages / Grades: Middle and high school students.

Duration: Three versions: 1-hour, 2-hour, 4-hour
Healthy Futures offers three program versions (1-hour, 2-hour and 4-hour) to accommodate school preferences and to support a progressive approach to student violations.

- All three versions of the Healthy Futures curriculum cover four main topics:
 - Health Effects
 - Your Brain
 - Messaging
 - Cost
- The 2-hour version:
 - Allows for **warm-up questions** interspersed between slides that allow students to share what they know about each topic.
 - Includes the **Healthy Future Handbook** that guides students to consider their individual motivations for quitting e-cigarettes/vapes.
- The 4-hour version:
 - Builds on the 2-hour version by allowing time for **personal reflection** following each topic.
 - Allows for **more individual introspection and group discussion** (if done in a group setting). This version also includes the Healthy Future Handbook.

Implementation cost: Free

Training costs: Free. You can fill out a Training Request Form at: <https://tinyurl.com/TPT-Training>

Website: <https://med.stanford.edu/tobaccopreventiontoolkit/take-and-teach/HealthyFutures.html>



YOUTH TOBACCO CESSATION PROGRAMS

The American Heart Association recommends the following youth-oriented tobacco cessation programs to assist with the supportive and restorative disciplinary approaches as outlined in the [Model Student Code of Conduct section](#).



Products covered: All Tobacco

Summary: *Not On Tobacco*® (N-O-T) seeks to give teens the resources they need to break nicotine dependency and find healthier outlets. Unlike other cessation programs which simply modify adult curriculum, N-O-T was designed with teenagers in mind to address issues that are specifically important to them. The program takes a holistic approach with each session using interactive learning strategies based on Social Cognitive Theory of behavior change that can then be applied and practiced in everyday life. N-O-T is facilitated by a trained and certified adult with a small group format (6-10 participants). The program helps teens quit by addressing total health in order to develop and maintain positive behaviors. Participants talk about the importance of physical activity, nutrition, enhancing their sense of self-control, and improving life skills such as stress management, decision making, coping and interpersonal skills. Additionally, they identify their reasons for smoking or vaping, healthy alternatives to tobacco use and finding people who will support them in their efforts to quit.

Ages / Grades: Ages 14-19

Duration: 10 sessions; 50 minutes per session

Implementation cost: Free

Training costs: \$400 for 3-year certification available at <https://lung.training/courses/not-on-tobacco.html>

Website: <https://www.lung.org/quit-smoking/helping-teens-quit/not-on-tobacco>



Products covered: E-cigarettes and vaping

Summary: *This is Quitting (TIQ)* is a free text-message program designed to help young people quit vaping. The messages show the real side of quitting by incorporating content from other young people who have attempted to quit before. To enroll in the program young people can text HEART to 887-09. After enrolling, they will receive at least 4 weeks of messages tailored on age and device type that will help build skills and confidence to quit. Throughout the program users can also text in COPE, STRESS, SLIP or MORE to receive instant support. The program is framed as a non-judgmental friend that is there to give advice and support on the quitting journey to make the user feel like they are not alone in quitting.

Ages / Grades: Ages 13-24

Duration: Users will receive up to 4 weeks of messages if they do not set a quit date and up to 8 weeks of messages if they set a quit date.
Implementation cost: Free

Website: <https://truthinitiative.org/about-this-is-quitting>



Products covered: All Tobacco

Summary: *My Life, My Quit* is available to youth in partnership with 19 state departments: Colorado, Idaho, Iowa, Kansas, Kentucky, Massachusetts, Michigan, Minnesota, Montana, Nevada, New Hampshire, North Dakota, Ohio, Oklahoma, Pennsylvania, Rhode Island, Utah, Vermont and Wyoming. The program provides telephone and text-based coaching to students who want to quit. Students who enroll in My Life, My Quit get tips and the support they need to quit for good. Coaching helps teens develop a quit plan, identify triggers, practice refusal skills and receive ongoing support for changing behaviors. In addition to telephone coaching, the program includes self-help and educational materials and additional support by text message or online chat.

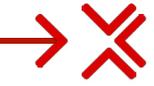
Ages / Grades: Ages 13-18

Duration: Five, one-on-one coaching sessions usually scheduled every 7-10 days.

Implementation cost: Free

Website: <https://mylifemyquit.com>

APPENDIX C: COMMUNICATION RESOURCES



SAMPLE LETTER OR EMAIL TO PARENTS/CAREGIVERS:

Dear Caregiver:

The _____ *Board of Education* recently adopted (or changed) the district's policies regarding tobacco and e-cigarettes. Beginning _____, our district will implement a 100% tobacco-free policy. The policy prohibits students, staff and visitors from using any tobacco product, including e-cigarettes, at all times on school grounds and during school-sponsored events whether on or off campus. It also prohibits the possession of these products by students.

The health and safety of our students and staff is paramount. Tobacco use, including the use of e-cigarettes, is a health hazard. In the last few years, youth use of e-cigarettes has skyrocketed. Most of these products contain nicotine, which may harm brain development and impact memory, attention span as learning.

We owe it to our students, staff and our community to establish and maintain a safe and supportive environment and to model healthy behaviors. The policy we have adopted includes offering students and staff access to resources to address tobacco addiction.

A copy of the policy, including information on its enforcement, is attached. Teachers, staff and visitors are influential role models for our students. We appreciate your cooperation and support for our 100% tobacco-free policy. If you have any questions, please contact (school or district point of content).

Sincerely,

District Superintendent or School Principal



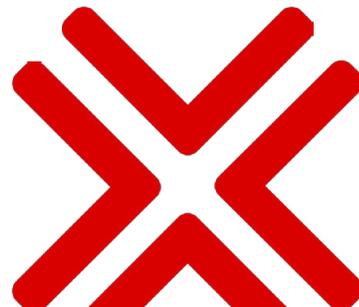
SAMPLE ANNOUNCEMENTS FOR SPORTING EVENTS:

At _____ district, the health of our students, staff and visitors is a top priority. We would like to remind you that the use of any tobacco product, including e-cigarettes, is strictly prohibited. Thank you keeping our school and sports facilities tobacco-free. Go (name of school mascot)!!!

Welcome to today's/tonight's game. To keep everyone healthy, the use of tobacco-products -- including smoking, vaping, dip and chewing tobacco -- is prohibited on school grounds, including our athletic facilities and parking areas. Thank you for your support and enjoy the game!!

Did you know that nicotine can affect your memory, attention span and can interfere with brain development? That's one reason we have adopted a 100% tobacco-free policy. This means smoking, vaping, dipping, or chewing tobacco are not allowed in or around the stadium/field/track/courts/etc. Thank you for your support and enjoy the game!

Out of concern for everyone's health and to set a good example for our students, our campus is 100% tobacco free. The use of tobacco products is strictly prohibited. Thank you for adhering to our policy. Enjoy the game!





SAMPLE EDUCATIONAL MESSAGES FOR SOCIAL MEDIA

Don't spend the game on the sidelines. Vaping may cause serious breathing problems for student athletes that can lead to long-term lung damage. Talk to your teens about the dangers of e-cigarettes. Visit www.heart.org/antivaping for tobacco and vaping education and cessation resources. #stayoffthesidelines #truthaboutvaping #tobaccofreeschools

#DYK: Some vaping products contain as much nicotine as a pack of cigarettes? In our school district, we're committed to being 100% tobacco-free and supporting our students and parents. Visit www.heart.org/antivaping for tobacco and vaping education and cessation resources. #tobaccofreeschools #truthaboutvaping

Nearly one-half of youth who vape are interested in quitting. You can help youth find the resources to tackle their vaping addiction by visiting www.heart.org/antivaping. #truthaboutvaping #tobaccofreeschools

E-cigarette vapor contains toxic chemicals, including formaldehyde and nickel. Researchers are still learning how it impacts the body long-term, but here's a hint: it's not good. Learn more about the health impacts of e-cigarettes and find cessation resources: www.heart.org/antivaping. #truthaboutvaping #tobaccofreeschools

APPENDIX D: ADDITIONAL RESOURCES



2016 U.S. Surgeon General's Report on E-Cigarette Use in Youth and Young Adults: https://www.cdc.gov/tobacco/data_statistics/sgr/e-cigarettes/index.htm

American Heart Association youth advocacy: <https://www.yourethecure.org/tobaccoendgame>

Centers for Disease Control and Prevention information about vaping: https://www.cdc.gov/tobacco/basic_information/e-cigarettes/index.htm

Centers for Disease Control and Prevention youth tobacco prevention: https://www.cdc.gov/tobacco/basic_information/youth/index.htm

Guidelines for School Health Programs to Prevent Tobacco Use and Addiction: <https://www.cdc.gov/mmwr/preview/mmwrhtml/00026213.htm>

National Quitline. North American Quitline Consortium. 1-800-QUIT-NOW or <https://www.naquitline.org/page/mappage>

quitSTART app -free smartphone App to help with quitting tobacco: <https://teen.smokefree.gov/become-smokefree/quitstart-app>

SmokefreeTXT for Teens. Smokefree.gov. Available at: <https://teen.smokefree.gov/become-smokefree/smokefreeteen-signup>

Take Down Tobacco. CVS Health Foundation and Campaign for Tobacco-Free Kids youth advocacy training program. Available at: <https://www.takingdowntobacco.org/main/training-menu>



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