

COVID-19 and Tobacco Policy and Communications Toolkit



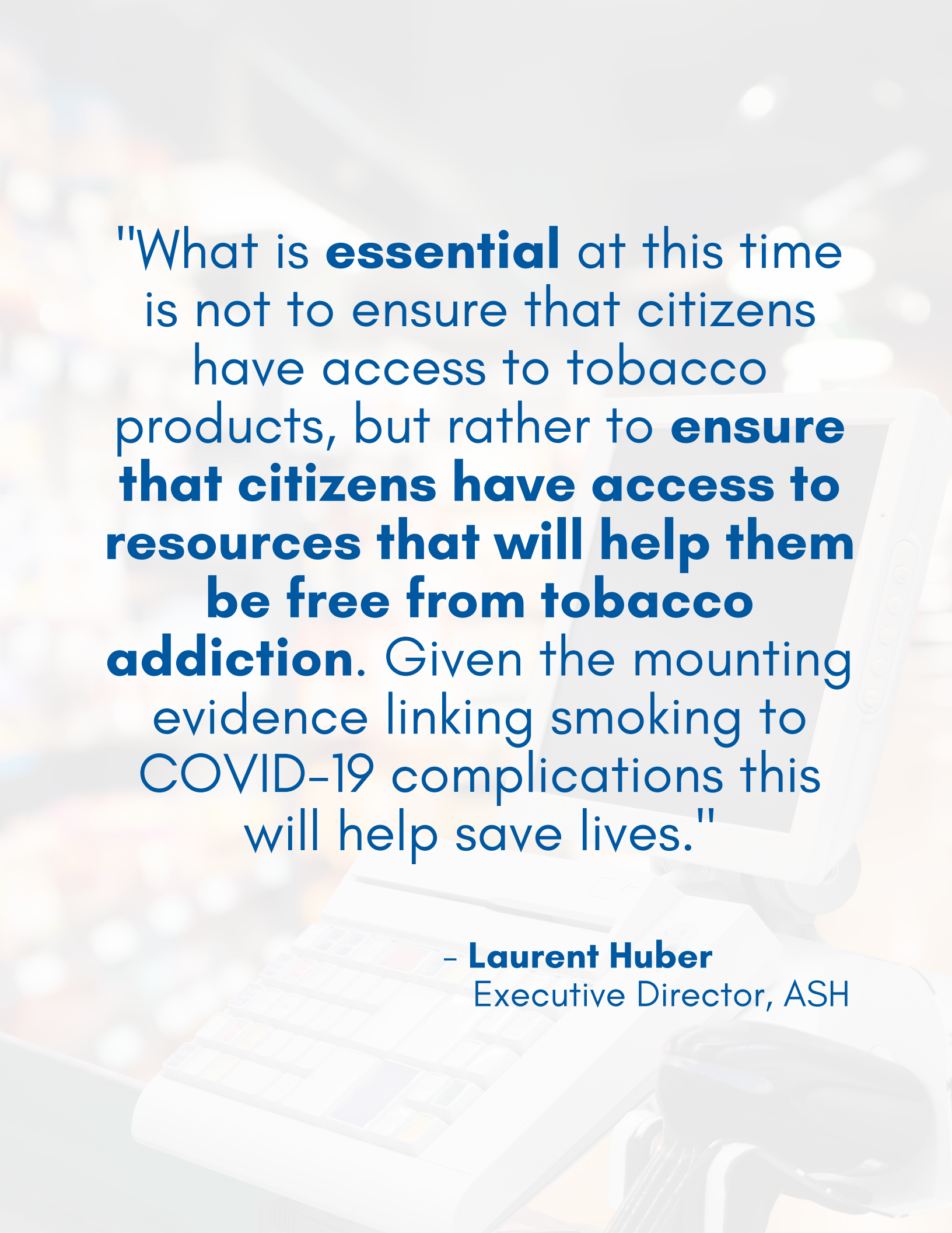
An advocate's guide to talking with government and media about the co-morbidity between COVID-19 and tobacco use, and policies to better protect the health of everyone during the pandemic.

info@ash.org | <https://ash.org/coronavirus-update>

ASH
ACTION
ON SMOKING & HEALTH

Dedicated to ZERO Tobacco Deaths





"What is **essential** at this time is not to ensure that citizens have access to tobacco products, but rather to **ensure that citizens have access to resources that will help them be free from tobacco addiction**. Given the mounting evidence linking smoking to COVID-19 complications this will help save lives."

– **Laurent Huber**

Executive Director, ASH

Introduction

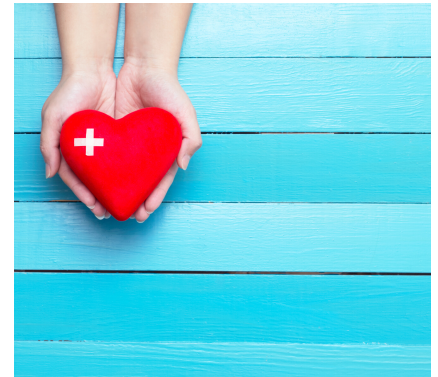
What is the impact or effect of tobacco use on the diagnosis, treatment or survival from the coronavirus?

Bottom Line

Because COVID-19 is a new virus, we do not have all necessary information to be definitive. HOWEVER, existing data on tobacco use and a growing number of new studies and peer-reviewed publications provide us with sufficient knowledge and information to draw the following conclusions.

Are people who smoke/vape more likely to get coronavirus?

We don't know the answer, however, people who smoke cigarettes are putting something into their mouths multiple times per day. The same is true for e-cigarettes. People who use waterpipes often share those tips with other people. This practice is not in line with keeping our hands away from our faces.



Are people who smoke/vape more likely to have serious complications from COVID-19?

We know that smoking cigarettes causes lung disease, specifically chronic bronchitis and emphysema.

The USA Centers for Disease Control (CDC) has stated that the 'underlying medical conditions' that increase the risk of severe disease and death from the coronavirus consist primarily of diabetes, chronic obstructive pulmonary disease (which is chronic bronchitis and emphysema) and cardiovascular disease. Smoking is in a longer list of 'underlying conditions' - but, note that smoking cigarettes does contribute to diabetes and cardiovascular disease - besides COPD.

Thus, current smoking of cigarettes is a risk - because it is an important cause of the underlying conditions that lead to more severe disease or death from COVID-19.

STOPPING smoking works to reverse or stop many of the acute aspects of lung and cardiovascular disease - before they become more chronic (and less reversible).

Does use of e-cigarettes cause the same risk?

Current research, particularly in animals (but there is some research in humans) shows vaping DOES cause inflammation in the airway and lungs. We do not have long term studies of people who have vaped (and not smoked cigarettes) to understand the longer-term damage to the lungs. However, it is expected that there will be longer term damage, because short term damage has been shown.

Of course, a current question is: will vaping be as bad for lung disease as cigarette smoking? We just don't have that long-term data.

However, vaping need not be as dangerous as smoking for us to be concerned about co-morbidity with COVID-19. The aerosols produced by vaping devices are not harmless. We know that smoking and vaping cause inflammation in the lungs.

Dr. Nora Volkow, the Director of the USA National Institute of Drug Abuse stated: "Because it attacks the lungs, the coronavirus that causes COVID-19 could be an especially serious threat to those who smoke tobacco or marijuana or who vape."

Until we know more, it is critically important for us to help people to quit inhaling anything into their lungs that could be causing any type of inflammation, as the coronavirus will only find an inviting environment otherwise.

Talking Points

- Smoking and vaping damage lungs. Preliminary data show that smoking increases (perhaps substantially) the danger of COVID-19. There is less data on vaping, but it stands to reason that any sort of lung damage increases the risk of serious complications from COVID-19. It is important that people who smoke or vape understand this risk so they can take extra precautions against exposure to coronavirus.
- It is imperative that governments maintain and ideally enhance access to cessation treatment, as a way to protect their citizen's human right to health. Much therapy can be done remotely, and in many places nicotine replacement products can be home-delivered.
- The continued sale of tobacco products undermines social distancing, making it more difficult to "flatten the curve," and creates the impression that tobacco products are essential. It puts smokers and nonsmokers alike, as well as health care workers, at additional risk.
- Shopping for tobacco products undermines social distancing and puts clerks, smokers and their families at greater risk. Tobacco production and distribution puts further people at risk. Money not spent on tobacco can be spent on essentials.
- With many smokers isolating at home, the risk of their families' exposure to secondhand smoke is increased. This risk is more acute in multi-unit housing, where it may be difficult to go outside.
- **Avoiding a decision on shutting down tobacco sales is the same as deciding they are essential.** At best, silence will create confusion. Shutting down tobacco-only stores but allowing tobacco sales in other retail venues only addresses a fraction of the problem, and raises equity issues.
- While quitting smoking now will not immediately repair past damage or greatly reduce the risk from coronavirus, there are immediate health benefits to quitting. Quitting will also protect others in the household from secondhand smoke and greater risk from coronavirus.



- While nicotine is highly addictive and difficult to quit, there are regulated and approved forms of nicotine available that do not create increased risk from coronavirus.
- Smoking and vaping involve touching one's face repeatedly. It is also difficult or impossible to smoke or vape in a mask. Hookah and waterpipe users often share mouth pieces
- No product is further from "essential" than tobacco. Yes, nicotine is very addictive and quitting is very difficult. However, **nicotine is not essential for living - and, with its probable negative impact on the disease, intake of tobacco products is non-essential.**
- Governments are responsible for protecting their citizens' right to health. Tobacco, COVID-19, and human rights are interdependent, indivisible and interrelated.

Policy Recommendations



We are in the midst of an historic pandemic, and governments are taking unprecedented measures to mitigate the death toll. People who smoke face a particular challenge – data so far strongly suggests a significant co-morbidity between smoking and serious complications from exposure to the coronavirus. Since COVID-19 attacks the lungs, and, as we are learning, other critical organs like the heart and kidneys, any activity that damages or weakens these organs increases the risk of hospitalization and death. Although there is less data than for smoking, it is likely that people who vape and those exposed to secondhand smoke or vape aerosol (and other airborne toxins) are also at increased risk.

Social distancing seems to be the key to “flattening the curve” of the COVID-19 pandemic, relieving stress on health systems and allowing more lives to be saved. As part of this effort, governments face decisions on what activities are “essential,” since any activity outside the home undermines social distancing. It is hard to imagine a product less essential than tobacco. Many jurisdictions continue to provide access to cessation therapy such as behavioral treatment (much of which can be accessed online or by phone) and nicotine-replacement (NRT) products (which can often be delivered to homes).

- Ban the marketing, sale and production of all tobacco products. If this is not possible, increase tobacco taxes to pay for and promote quitting and also help pay for treatment of coronavirus infections.
- Enhance access to evidence-based cessation treatment, including NRTs
- Ban smoking and vaping in multi-unit housing, cars with passengers, and any place people are present.
- Widely publicize:
 - the additional risk of COVID-19 to smokers and to those exposed to secondhand smoke;
 - the benefits of quitting; and
 - the availability of cessation treatment and how to access it.
- In places that have made wearing a mask in public places mandatory, make clear that smoking or vaping is not a valid exception to remove one's mask.

Cessation Support Recommendation

The global tobacco treaty, the World Health Organization (WHO) Framework Convention on Tobacco Control (FCTC) dedicates Article 14 to “demand reduction measures concerning tobacco dependence and cessation.”

The WHO FCTC also includes Guidelines for implementing some of the Articles, meaning how to implement the globally-agreed upon best practice for cessation support.

Article 14 Guidelines are found here:
https://www.who.int/fctc/guidelines/adopted/article_14/en/

(and are available in all UN languages by switching languages in the top right corner of that webpage.)

Key Research Findings

Scientific Resources

Berlin I, et al, Commentary: Covid-19 and Smoking. Nicotine and Tobacco Research, 3 Apr 2020, <https://academic.oup.com/ntr/article/doi/10.1093/ntr/ntaa059/5815378>.

Brake, S, et al, Smoking Upregulates Angiotensin-Converting Enzyme-2 Receptor: A Potential Adhesion Site for Novel Coronavirus SARS-CoV-2 (Covid-19), J. Clin. Med. 2020, 9(3), 841, 18 Mar 2020, <https://www.mdpi.com/2077-0383/9/3/841>.

Cai, H, Sex difference and smoking predisposition in patients with COVID-19. Lancet 11 Mar 2020, [https://www.thelancet.com/pdfs/journals/lanres/PIIS2213-2600\(20\)30117-X.pdf](https://www.thelancet.com/pdfs/journals/lanres/PIIS2213-2600(20)30117-X.pdf).

Gotts, J et al, What are the respiratory effects of e-cigarettes? BMJ 2019;366:l5275, 30 Sep 2019, <https://www.bmj.com/content/366/bmj.l5275>.

Hefler, M, COVID-19 and smoking: resources, research and news, Tobacco Control, <https://blogs.bmj.com/tc/2020/03/26/covid-19-and-smoking-resources-research-and-news/>.

Varvadas, C and Nikitara, K, Editorial: COVID-19 and smoking: A systematic review of the evidence, Tob. Induc. Dis., 18 Mar 2020, <http://www.tobaccoinduceddiseases.org/COVID-19-and-smoking-A-systematic-review-of-the-evidence,119324,0,2.html>.

Educational Resources

COVID-19 and NCDs, Information Note, World Health Organization, 23 Mar 2020, <https://www.who.int/who-documents-detail/covid-19-and-ncds>.

Q&A on smoking and COVID-19, World Health Organization, 24 Mar 2020, <https://www.who.int/news-room/q-a-detail/q-a-on-smoking-and-covid-19>.

Tobacco and waterpipe use increases the risk of suffering from COVID-19, World Health Organization, Regional Office for the Eastern Mediterranean, <http://www.emro.who.int/tfi/know-the-truth/tobacco-and-waterpipe-users-are-at-increased-risk-of-covid-19-infection.html>.

Coronavirus (COVID-19): effective options for quitting smoking during the pandemic, Cochrane Library, 1 Apr 2020, <https://www.cochranelibrary.com/collections/doi/SC000042/full>.

Do you smoke or vape? Here's why Covid-19 means you should quit right now. <https://www.irishtimes.com/life-and-style/health-family/do-you-smoke-or-vape-here-s-why-covid-19-means-you-should-quit-right-now-1.4217001>.

**Smoking damages
your lungs and other
parts of your body,
and may increase
your risk of getting
a severe case of
COVID-19**



#coronavirus #COVID19

Policy Examples

Jurisdictions Removing or Limiting Tobacco Products from “Essential Business” Distinction, in Turn Banning the Sale of Tobacco Products

Botswana – Tobacco products will not be sold or imported during the lockdown restrictions. Read more here. Supportive statement from local advocates here.

India – Excluded products from essential items list, are not specified. Only included items are. Tobacco products are not included here. In addition, two states, U.P. and Haryana have banned all smokeless tobacco products to prevent spitting during this COVID-19 period.

Israel – Government regulation included specific instructions on what would account for essential business that should stay open and what would define as essential products that could be sold. Tobacco and smoking products are not included. (Regulation in Hebrew; English translation of section on tobacco)

South Africa – Regulations as published under the Disaster Management Act for COVID-19 with amendments are found here. Cigarettes and tobacco products are not listed as an essential item.

Jurisdictions Reducing Sales Density

Vietnam – Dedicated tobacco shops are required to close just like any other kind of shops. But supermarkets, grocery stores, convenience stores, etc. which sell essential goods (foods, medicines) are open, and smokers can buy tobacco products in those stores.

Wisconsin, USA – Vape, smoking, and CBD shops must close (and cannot provide delivery), but sales can continue at other stores like grocery or gas stations as they are considered essential businesses. Read their FAQ here.

Human rights arguments can be a very effective advocacy tool.

More information:

<https://ash.org/HRhub>



Was this Toolkit useful for your work? Please let us know!

Email hq@ash.org



Has your jurisdiction taken an action that is NOT listed here? Let us know, and we will add it to our website.

Email info@ash.org

Communications Outreach

Sample Press Release

COVID-19 Responses Must Include Tobacco and Smokers

Media Contact: [Name, Email, Phone]

[CITY, STATE] – [DATE] - As [jurisdiction] grapples with the coronavirus outbreak and enacts emergency measures to reduce the pandemic's toll, it is important to consider co-morbidities and take actions to protect vulnerable populations. High risk groups include the elderly, those with diabetes, or a past history of cardiovascular disease, should they contract the virus. **There is growing and persuasive evidence that people who smoke are also at higher risk.**

While long-term data collection is underway, emerging data gathered so far indicates that smokers are significantly more likely to have weakened immune and respiratory systems making them more likely to be infected with the coronavirus and are more likely to require hospitalization for COVID-19. Existing data on tobacco use reinforces this conclusion. COVID-19 attacks the lungs, and anything that weakens the lungs makes the coronavirus more dangerous. There is less data on the co-morbidity between coronavirus and vaping, but there is strong evidence that vaping aerosol also damages the lungs.

It is therefore imperative that people who smoke or vape be made aware of their increased risk and take extra precautions, for their own health as well as the health of all [citizens in jurisdiction]. At a time when "flattening the curve" of the pandemic is of utmost importance, we must minimize the exposure of those likely to require hospitalization.

[Data on number of hospitalizations, ICU beds, and deaths in jurisdiction from COVID-19. Data on tobacco use and deaths from smoking in jurisdiction.] We must take action to protect the [X number] of known smokers in our community who are at heightened risk for a severe COVID-19 infection.

The major policy designed to "flatten the curve" is social distancing, of which a critical part is shutting down non-essential business activity and keeping residents at home. **Tobacco is arguably the least essential business in the world, and to declare its production and sale an essential activity is to prioritize a deadly commercial product that provides no benefit.**

Continuing tobacco sales at a time when reducing morbidity and mortality is our primary concern is particularly outrageous and counterproductive. Tobacco factories bring workers together in close proximity. Distribution further undermines social distancing. Tobacco sales mean additional shopping trips for a sub-population with additional risk from contracting COVID-19.

Allowing "business as usual" for Big Tobacco at this time is madness. As the World Health Organization (WHO) tweeted, tobacco products are "not essential during COVID-19 or ever."

[Jurisdiction] must prioritize access to cessation treatment, publicize available cessation resources, encourage smokers to quit, and raise awareness of the increased risk of smoking and exposure to secondhand smoke for COVID-19.

All [citizens in jurisdiction] are living through an historic crisis, and how we react as a society will have profound ramifications, both in the short and long term on both health and the economy. If we allow the tobacco epidemic to rage on unabated, we will regret it.

[Organization's boiler plate language]

How to pitch a reporter

The COVID-19 pandemic is leaving reporters swamped with breaking news in every jurisdiction from number of tests to number of cases to number of deaths. Most reporters who usually do NOT cover a health topic have found themselves covering the outbreak from a new angle. Because of this new and hectic environment, you must approach reporters with compassion first and foremost; they are human and doing the best they can given the circumstances.

1. Follow reporting from the outlet and reporter of interest before pitching them to get a feel for what they cover.
2. Reach out if and only if you have new information to share, not recently addressed by their outlet (ex: latest research on co-morbidity, new organization or key figure taking a position, new jurisdiction includes tobacco products on nonessential sales list during lockdowns).
3. Send a personal (not mass) email to the reporter, introducing yourself as you would if meeting in person. Then cut to the chase on what NEW information, resource, legislation you have to share.
4. Close by noting which experts at your organization or partner organizations can be made available to talk with the reporter and provide a quote or personal story.
5. Thank them for their time.

Key Facts to Share

- Tobacco products are the #1 preventable cause of death. Their sale is being discussed because tobacco products are the only consumer good that kills when used exactly as their manufacturer intends.
- COVID-19 is a respiratory infection, so it's never been more important to have strong lungs than it is today. Any form of smoke/pollution in your lungs is not great, but tobacco smoke is particularly unique because it contains over 7,000 chemicals, including 250 known to harm humans.
- The US Centers for Disease Control (CDC)'s free quitline support remains open and fully staffed during stay at home orders. Americans can call 1-800-QUIT-NOW or visit smokefree.gov to receive a free quit coach and discuss next steps in their quit journey. Many countries have quitlines of their own to highlight.
- For most people, it takes more than one attempt to quit smoking for good. While it is commonly discussed, "cold turkey" is the hardest way to quit smoking. We recommend working with a quit coach and reviewing nicotine replacement products that might work for you.
- Because of the nicotine in cigarettes, smokers are addicted and not personally at fault for their tobacco use. Smokers have been heavily targeted and marketed to by the aggressive tobacco industry. We must rally around smokers to help them break their addiction, as we would help any other addict who wants help.
- There is no "safe" amount of secondhand smoke. Individuals now working from home or around their families more due to lockdowns should NOT begin smoking around their families, even just during the lockdowns.



Additional Resources

We are big fans of M+R's free resources for nonprofits on their blog:
<https://www.mrss.com/lab>

They even have a specific tool designed to format your reporter pitch
(<https://www.mrss.com/lab/make-the-perfect-reporter-pitch-with-mrs-newest-tool/>)
and your Letter to the Editor
(<https://www.mrss.com/tools/hed/fast-lte-tool>)

Social Media Engagement

Keep the conversation moving online by using **#QuitInQuarantine**, and tag ASH for a re-post!



FACEBOOK

@ASHglobalAction

Facebook prioritizes video content, so make your own video update (even on a cellphone using selfie mode) to talk through your advocacy message and call to action. Live videos are also prioritized, so if you're comfortable, try going live on your organization page to share your advocacy message. The more you do it, the more comfortable you'll get. When you don't have a video to post, use a photo, and as a last resort, post just a link.

Sample Posts

- "We are living through extraordinary times, and most of us are being forced to reorder our lives without notice. One of the most important and timely changes is to quit smoking." -Dr. Harry Lando. Read his tips on how to #QuitInQuarantine here: <https://ash.org/quit>
- @ASHglobalAction went live with their Managing Attorney and Policy Director to discuss how #COVID19 lockdowns and stay at home orders impact tobacco control policy work. <http://ow.ly/qA3j50zaq1C> #QuitInQuarantine
- Smoking damages your lungs, leaving you at far greater risk of a serious COVID-19 infection if you catch the coronavirus. NOW is a great time to begin your quit journey! Call 1-800-QUIT-NOW for free support from the CDC or check out @ASHglobalAction's tips here: <https://ash.org/quit> #QuitInQuarantine
- These are stressful times. Smoking doesn't reduce stress, in fact, it can make the stress you already feel worse. Find ways to cope with stress WITHOUT smoking by visiting: <http://smokefree.gov> or calling 1-800-QUIT-NOW. #QuitInQuarantine
- "It is critically important for us to help people quit inhaling anything into their lungs that could be causing any type of inflammation, as the #coronavirus will only find an inviting environment otherwise." -Dr. Carolyn Dresler in The New York Times here: <http://ow.ly/D8Wd50zadL0> #QuitInQuarantine



TWITTER

@ASHorg

Twitter gives you 280 characters, meaning brevity is required. If you have a long story or message to share and need multiple tweets to fit it in, build a thread by replying to yourself and numbering the tweets (1), (2), etc. If you can pre-plan how many tweets it will take to share your message, number them (1/5), (2/5), etc. The key to joining Twitter conversations is to use a relevant hashtag, linking you to others tweeting about the same message, such as #COVID19 #Coronavirus #QuitInQuarantine. If you post a photo, you can also tag 10 other profiles in the image, bringing your tweet to their attention without wasting your 280 content characters.

Sample Tweets

- We can't emphasize this enough: smoking is a risk factor for more severe #COVID19 infections. There's no better time to #QuitInQuarantine and be #HealthyAtHome. Additional resources from @WHO : <http://ow.ly/5NeI50zhx08>
- For most smokers, quitting smoking takes a lot of practice to quit for good. But the more you work at it, the more likely you are to succeed. #EveryTryCounts. Keep at it: <http://EveryTryCounts.gov> via @FDATobacco #QuitInQuarantine #HealthyAtHome
- Cigarette & waterpipe use increases your risk of severe #COVID19 infection. The communal nature of waterpipe smoking means that a single mouthpiece & hose are often shared between users, especially in social settings. #QuitInQuarantine to stay #HealthyAtHome





Instagram is a rising platform with 1 billion monthly active users. According to Pew Research, 75% of users are ages 18-24, 57% are 25-29, 47% are 30-49, 23% are 50-64, and 8% are 65+. Instagram offers Timeline posts in your feed which stay on your account profile, including a new Instagram TV (IGTV) feature that allows longer video posts than the traditional feed video post limit of 1 minute. Posts MUST be a photo or video.

Sample Timeline/Feed Posts

- These are stressful times. #DYK smoking doesn't reduce stress, in fact, it can make the stress you already feel worse. Find ways to cope with stress WITHOUT smoking by visiting: <http://smokefree.gov> and #QuitInQuarantine
- Lung health has always been important, but with #COVID19 attacking our lungs, we've got to do everything in our power to keep them strong. If you do smoke, make the #coronavirus pandemic your motivation to kick the addiction for good! "If you make the decision to quit, the cilia in your lungs are one of the first parts of your body to heal... They help your body fight off colds and infection," says the CDC. #QuitInQuarantine
- No product is further from "essential" than tobacco. Yes, nicotine is very addictive and quitting is very difficult. However, nicotine is not essential for living - and, with its probable negative impact on #COVID19 infections, intake of tobacco products is non-essential. #QuitInQuarantine

Instagram also offers Story posts (including Live videos) that last 24 hours and are extremely popular. Stories give you engagement options like a poll, fill in the blank question, GIFs, donations, and live videos. You can post static photos, add text, and GIFs, or post a pre-recorded video (that will break into 15 second clips). If you opt for Instagram Live Stories, you can invite a partner Instagram account to chat with you in real-time, a great way to engage more people while working together from a distance.

Sample Story Posts or Live Video Topics

- Live Chat between a local cessation expert and your NGO to discuss the best ways for members of your community to #QuitInQuarantine.
- Poll followers on their tobacco statistics knowledge (similar to a multiple choice quiz).
- Video on why your organization does not support tobacco products being designated "essential" during lockdown.
- Live Chat between someone who quit smoking while in quarantine and your staff to hear how they did it, where they struggled, and why they want others to join them in living smoke-free.
- Video from a doctor discussing the physical benefits you experience when you quit smoking.





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