# *Working Toward a Tobacco- & Nicotine-Free Generation*

Social media toolkit

ENSP

*European Network for Smoking and Tobacco Prevention*

# CONTENTS

# FOREWORD

## THE NEW TOBACCO AND NICOTINE LANDSCAPE

**ENSP envisions a tobacco free future, in which no European will have to suffer from tobacco related illnesses and early death. All our constant efforts are concentrated towards providing children and young people the freedom to grow up independently and in good health, without being coaxed into a lifetime of addiction.**


Reaching the objective of reducing tobacco use to below 5% by 2040, as specified also in the ENSP Statutes from 2011, will depend on sustained commitment, coordinated action, and a strong emphasis on prevention.
By prioritizing youth protection and addressing nicotine dependence at its source, the European Union can make meaningful progress toward a healthier, more resilient future.

As we have outlined in our Treatment of Tobacco and Nicotine Dependence Guidelines 2026, tobacco use not only constitutes a great addiction, but is also a fatal trap from which we want to help smokers escape. Our aim is to establish a wider coherence among smoking prevention activities, as well as promoting comprehensive tobacco and nicotine control policies at a European and national level.

According to the Eurobarometer survey published in 2023, **almost a quarter (24%; 28% of men and 21% of women) of Europeans above the age of 15 smoke and 32% within the 25 to 39 age group are smokers.**[1] Tobacco kills half of its regular users, i.e. **700,000 Europeans every year.**[2] Worldwide, about **1.2 billion people aged 15 and above** currently use at least one tobacco product[3], with combustible cigarettes the most widely used form and the leading preventable cause of death.[4] Although this represents a notable decrease from the global estimate of around **1.379 billion smokers in 2000**[1], the overall decline is largely due to reductions in certain regions and progress remains uneven, relying heavily on continued tobacco-control measures.

This requires urgent and coordinated action from public health bodies, policy makers and other stakeholders. In this context, there is an increasing consensus that tobacco dependence is a disease that must be treated by health care professionals. All health care professionals must understand that tobacco use is a medical condition, an ICD 10 and ICD-11 addiction, and not a habit, vice, pleasure or lifestyle choice.

We are also seeing a rise in the use of recreational alternative tobacco and nicotine products, which includes vapes/e-cigarettes, heated tobacco products/heat-not-burn, tobacco snus and nicotine pouches. **More than 100 million people worldwide currently use electronic nicotine delivery systems (ENDS)**, including at least **86 million people aged 15 years and older** (53 million men and 34 million women) and **≥15 million adolescents aged 13–15 years.**[1] They are gaining popularity, especially amongst younger people, and many formats still see nicotine inhaled via the lungs in high, addictive doses.

# FOREWORD CONTINUED
## THE NEW TOBACCO AND NICOTINE LANDSCAPE

Alternative nicotine products have gained rapid popularity, contributing to new and long-term dependencies at a time when smoking rates had been declining. This trend has been reported to be of great public concern in several countries. Information from the Global Tobacco Surveillance System shows that current e-cigarette use by children aged 13–15 years old often exceeds those of older age groups.[5] Nicotine consumption is particularly concerning for young people and adolescents, whose developing brains are more vulnerable to nicotine and for whom nicotine addiction poses severe risks. This includes an increased risk of mood disorders, anxiety, and the development of other addictions.[6] ENDS and other nicotine products typically are designed to maximise consumer attractiveness, including a range of flavours, attractive packaging and advertising that may increase experimentation among youth.[7]

Despite this rapidly evolving landscape, tobacco legislation has not been updated for over a decade. Regulations and public health protections are uneven across Europe and simply do not address the challenges we now face.

**Cornel Radu-Loghin**
**Secretary General**
European Network for Smoking and Tobacco Prevention (ENSP)

**1.** Special Eurobarometer 539 (2023). http://ec.europa.eu/public_opinion/archives/ebs/ebs_539_en.pdf

**2.** European Commission. Tobacco: Overview. Director-General for Health and Food Safety. Available from https://health.ec.europa.eu/tobacco/overview_en

**3.** World Health Organization. WHO global report on trends in prevalence of tobacco use 2000–2024 and projections 2025–2030 [Internet]. Geneva: World Health Organization; 2025. Available from: https://www.who.int/publications/i/item/9789240116276

**4.** European Commission. Tobacco: Overview. Director-General for Health and Food Safety. Available from https://health.ec.europa.eu/tobacco/overview_en

**5.** Technical note on the call to action on electronic cigarettes

**6.** Reynolds, L.M., Faure, P. & Barik, J. Adolescent nicotine exposure and persistent neurocircuitry changes: unveiling lifelong psychiatric risks. Mol Psychiatry 30, 5534–5545 (2025). https://doi.org/10.1038/s41380-025-03110-0

**7.** Borowiecki M, Emery SL, Kostygina G. New recreational nicotine lozenges, tablets, gummies and gum proliferate on the US market. Tob Control. 2024;33:414–416.

# THE ROLE OF EXPERT ASSOCIATIONS

**Expert associations can play a critical role in ensuring that public, professional and policy discussions are grounded in evidence and focused on public health outcomes.**

**You can help by:**

- Sharing clear, evidence-based information on the health risks associated with tobacco or recreational nicotine products.
- Addressing misconceptions about nicotine use and quitting and pointing people toward evidence-based cessation tools.
- Supporting cessation actions for general and high-risk populations such as adolescents, pregnant women, COPD, CVD patients, etc.
- Calling for coordinated action to support a tobacco-free and nicotine-free Europe, through better access to licensed cessation tools and modern laws that address the evolving tobacco and nicotine landscape.

# ABOUT THIS TOOLKIT

**This social media toolkit contains materials to help you communicate about the evolving tobacco and nicotine landscape. Through simple, evidence-based messages and ready to use assets, our aim is to empower expert voices to speak out collectively and support efforts to move toward a tobacco- and nicotine-free future in Europe.**

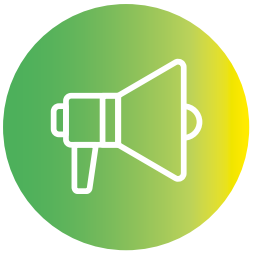
**What's included:**

### Themes, key messages and facts

Evidence-based messages, grouped under 4 key themes, with **fully referenced data points and facts.**

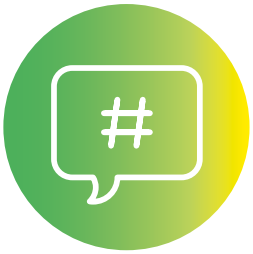
### Ready-to-use social media graphics and captions

Each theme has ready-to-use graphics and example captions that you can post on social media.



### Call-to-action (CTA) guide

Examples of CTAs you can use in your social posts to help encourage further sharing and engagement.



### Hashtags guide

A list of relevant hashtags you can add to your posts to help increase the visibility of your content.

### Guidance on editing templates

Simple guidance on how to edit social media graphics, which are hosted on the free design platform Canva.

### Using this toolkit responsibly

Things to keep in mind when using this toolkit.

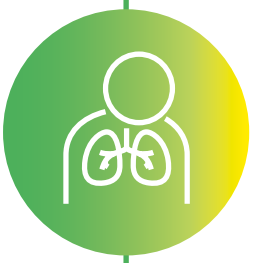
# THEMES AND KEY MESSAGES

### Theme 1: Current challenges

- **Message A:** Tobacco use is the leading preventable cause of death in Europe
- **Message B:** There has been a dramatic rise in the use of recreational nicotine products, such as vapes and pouches, with uncontrolled nicotine dosages
- **Message C:** Laws to control tobacco and recreational nicotine products are outdated and do not address the challenges we face today

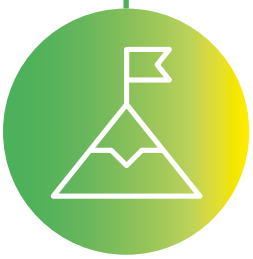
### Theme 2: Youth nicotine addiction

- **Message A:** Youth nicotine addiction requires urgent action
- **Message B:** More young people are being exposed to nicotine earlier than ever before



### Theme 3: Health consequences

- **Message A:** Alternative tobacco and nicotine products risk creating new forms of addiction rather than reducing harm



### Theme 4: Opportunity for action

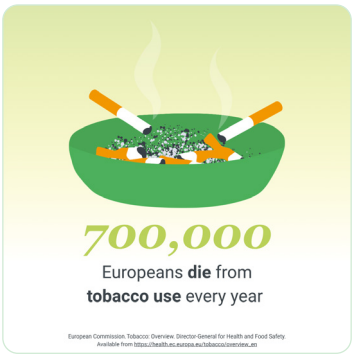
- **Message A:** Many people can end their addiction
- **Message B:** To truly protect future generations, the goal must be both a smoke-free and nicotine-free generation

# SOCIAL MEDIA GUIDANCE

## SOCIAL MEDIA GRAPHICS

Assets designed in 1080 x 1080, best suited for LinkedIn, Instagram and Facebook.

### Theme 1: Current challenges

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### Theme 2: Youth nicotine addiction


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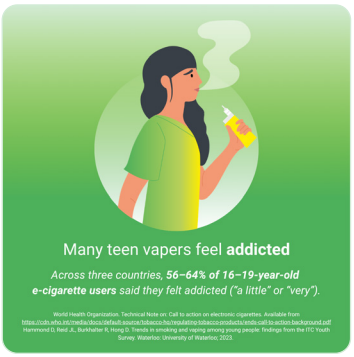


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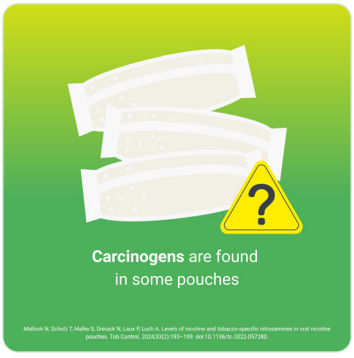
### Theme 3: Health consequences

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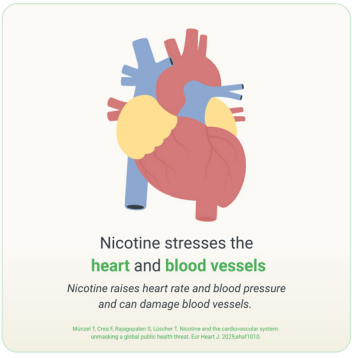


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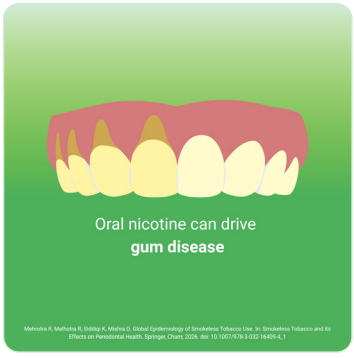


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# SOCIAL MEDIA GUIDANCE

## SOCIAL MEDIA GRAPHICS

Assets designed in 1080 x 1080, best suited for LinkedIn, Instagram and Facebook.

### Theme 4: Opportunity for action


Click here

# KEY FACTS

## THEME 1: CURRENT CHALLENGES

| *MESSAGE A:*<br>*Tobacco use is the leading preventable cause of death in Europe* | |
|---|---|
| **Key facts** | **References** |
| 700,000 Europeans die from tobacco use every year. | European Commission. Tobacco: Overview. Director-General for Health and Food Safety. Available from https://health.ec.europa.eu/tobacco/overview_en |
| Tobacco exposure caused approximately 7.36 million deaths globally in 2023. | Morgan B, Dai X, Flor LS et al. Morbidity and mortality attributable to tobacco exposure: an analysis from the Global Burden of Disease Study 2023. Tobacco Induced Diseases. 2025;23(1):A54. |
| 85–90% lung cancer cases in Europe are attributed to tobacco use. | Kulhánová I, Forman D, Vignat J, et al. Tobacco-related cancers in Europe: the scale of the epidemic in 2018. Eur J Cancer. 2020;139:27–36. |

| *MESSAGE B:*<br>*There has been a dramatic rise in the use of recreational nicotine products, such as vapes and pouches, with uncontrolled nicotine dosages* | | |
|---|---|---|
| **Simplified** | **Key facts** | **References** |
| Many products are designed to deliver nicotine much like cigarettes. | Many of these products are designed to deliver nicotine efficiently and can approximate the nicotine delivery profile of cigarettes. | Cho YJ et al. E-Cigarette Nicotine Delivery Among Young Adults by Nicotine Form, Concentration, and Flavor: A Crossover Randomized Clinical Trial. JAMA Netw Open. 2024;7:e2426702. |
| Some nicotine pouches contain more than double the nicotine of a cigarette. | Nicotine pouches can contain up to 50mg nicotine – **more than double** the amount found in the average cigarette. | Mallock N, Schulz T, Malke S, Dreiack N, Laux P, Luch A. Levels of nicotine and tobacco-specific nitrosamines in oral nicotine pouches. Tob Control. 2024;33(2):193–199. |
| Some e cigarettes are made with nicotine salts to make vaping less irritating to mouth and throat, more tasteful and potentially more addictive.<br><br>**OR**<br><br>The nicotine salts used in some e-cigarettes can make products more appealing and potentially more addictive. | Nicotine salt formulations enable higher nicotine concentrations with reduced irritation, increasing product appeal and potential for dependence. | Leventhal AM, Madden DR, Peraza N et al. Effect of Exposure to e-Cigarettes With Salt vs Free-Base Nicotine on the Appeal and Sensory Experience of Vaping: A Randomized Clinical Trial. JAMA Netw Open. 2021;4(1):e2032757. |

# KEY FACTS

## THEME 1: CURRENT CHALLENGES

| *MESSAGE B:*<br>*There has been a dramatic rise in the use of recreational nicotine products, such as vapes and pouches, with uncontrolled nicotine dosages* | | |
|---|---|---|
| **Simplified** | **Key facts** | **References** |
| Vapers consume twice as much nicotine as smokers per week, on average. | The average weekly nicotine consumption amongst vapers is **more than double** the amount of an average smoker. | Basis Research. Vaping truths diary study (n=100). Basis; 2023.<br><br>Healthline. How much nicotine is in a cigarette, cigar, and other tobacco products? Available from: https://www.healthline.com/health/how-much-nicotine-is-in-a-cigarette#nicotine-in-cigarettes<br><br>NHS Digital. Health Survey for England 2021: adults' health-related behaviours. Available from: https://digital.nhs.uk/data-and-information/publications/statistical/health-survey-for-england/2021/health-survey-for-england-2021-data-tables |

| *MESSAGE C:*<br>*Laws to control tobacco and recreational nicotine products are outdated and do not address the challenges we face today* | | |
|---|---|---|
| **Simplified** | **Key facts** | **References** |
| Decade-old EU tobacco laws leave public health protections uneven across Europe. | EU-wide Tobacco legislation has not been updated for over a decade, resulting in regulations and public health protections that are uneven across Europe. | Tobacco Products Directive (2014) |
| New nicotine products boost addiction risk; regulation must urgently catch up. | New nicotine products vary in formulation, delivery speed, and dose, all of which influence addiction potential and user behaviour. A new regulatory framework is necessary. | U.S. Department of Health and Human Services. Chapter 4 Nicotine Addiction: Past and Present. In: How Tobacco Smoke Causes Disease—The Biology and Behavioral Basis for Smoking-Attributable Disease: A Report of the Surgeon General. Atlanta (GA): Centers for Disease Control and Prevention; 2010. |
| Support a **Total Quit** and make a commitment to working towards a tobacco and nicotine free future. Share this post! | | |

# KEY FACTS

## THEME 2: YOUTH NICOTINE ADDICTION

| *MESSAGE A:*<br>*Youth nicotine addiction requires urgent action* | | |
|---|---|---|
| **Simplified** | **Key facts** | **References** |
| **Adolescent brains & impulsivity**<br>Teen brains are wired for risk-taking—making nicotine initiation more likely. | Adolescent brains are naturally more susceptible to impulsive decisions such as nicotine initiation. | Lydon DM, Wilson SJ, Child A, Geier CF. Adolescent brain maturation and smoking: what we know and where we're headed. Neurosci Biobehav Rev. 2014;45:323–342. |
| **Nicotine disrupts brain development**<br>Nicotine exposure in adolescence can disrupt brain development and raise long-term addiction risk. | Nicotine exposure during adolescence can disrupt brain development and increase long-term susceptibility to addiction. | Reynolds LM, Faure P, Barik J. Adolescent nicotine exposure and persistent neurocircuitry changes: unveiling lifelong psychiatric risks. Mol Psychiatry. 2025;30:5534–5545. doi.org/10.1038/s41380-025-03110-0 |
| **Teen nicotine exposure alters key brain circuits**<br>Teen nicotine use alters brain circuits for reward, attention, and impulse control. | Early nicotine exposure alters brain circuits involved in reward, attention, and impulse control. | McGrath-Morrow SA, Gorzkowski J, Groner JA, Rule AM, Wilson K, Tanski SE, et al. The effects of nicotine on development. J Physiol. 2020;598(20):4373–4386. |
| **Teen nicotine addiction has broader mental health risks**<br>Nicotine addiction can impair teens' memory and may raise risks of anxiety, mood disorders, and other addictions. | Nicotine exposure during adolescence is associated with neurocircuitry changes that may impair cognitive function, including memory, and increase the risk of anxiety, mood disorders, and future addiction. | Reynolds LM, Faure P, Barik J. Adolescent nicotine exposure and persistent neurocircuitry changes: unveiling lifelong psychiatric risks. Mol Psychiatry. 2025;30:5534–5545. doi.org/10.1038/s41380-025-03110-0 |
| Nicotine exposure early in life can increase lifetime risks of impulse-control problems, mood instability, and persistent addiction. | Nicotine exposure in young people increases the lifetime risk of impulse control disorders, mood instability, and persistent addiction. | Münzel T, Crea F, Rajagopalan S, Lüscher T. Nicotine and the cardiovascular system: unmasking a global public health threat. Eur Heart J. 2025;ehaf1010. |
| **Many teen vapers feel addicted**<br>Across three countries, **56–64% of 16–19-year-old e-cigarette users** said they felt addicted ("a little" or "very"). | 56- 64% of the 16-19-year-olds that reported using e-cigarettes across the three countries considered themselves to be addicted (either 'a little' or 'very') to e-cigarettes. | World Health Organization. Technical Note on: Call to action on electronic cigarettes. Available from https://cdn.who.int/media/docs/default-source/tobacco-hq/regulating-tobacco-products/ends-call-to-action-background.pdf<br><br>Hammond D, Reid JL, Burkhalter R, Hong D. Trends in smoking and vaping among young people: findings from the ITC Youth Survey. Waterloo: University of Waterloo; 2023. |

# KEY FACTS

## THEME 2: YOUTH NICOTINE ADDICTION

| *MESSAGE B:*<br>*More young people are being exposed to nicotine earlier than ever before* | | |
|---|---|---|
| **Simplified** | **Key facts** | **References** |
| Over 30% of 15-year-olds have used e-cigarettes (WHO Europe). | In the WHO European Region, over 30% of 15-year-olds have used e-cigarettes. | World Health Organization Regional Office for Europe. Health Behaviour in School-aged Children (HBSC) international report from the 2021/2022 survey. Copenhagen: WHO Europe; 2024. |
| 10.8% of 13–15-year-olds used tobacco in 2021 (~4 million) (WHO Europe). | In the WHO European Region, about 10.8% of adolescents aged 13-15, an estimated four million people, used tobacco in 2021. | World Health Organization Regional Office for Europe. Status of tobacco use in the Region. Copenhagen: WHO Regional Office for Europe; 2025. Available from: https://www.who.int/europe/news-room/fact-sheets/item/tobacco |
| 93% of Europeans started smoking before 26. | 93% of Europeans started smoking before 26. | European Commission. Overview – Tobacco. Director-General for Health and Food Safety. Available from https://health.ec.europa.eu/tobacco/overview_en |
| Young non-smokers who use e-cigarettes are nearly 3× more likely to start smoking cigarettes. | High quality epidemiology studies consistently demonstrate that e-cigarettes use increases conventional cigarette uptake, particularly among non-smoking youth, by nearly three times. | World Health Organization. Technical Note on: Call to action on electronic cigarettes. Available from https://cdn.who.int/media/docs/default-source/tobacco-hq/regulating-tobacco-products/ends-call-to-action-background.pdf<br><br>Banks E, Yazidjoglou A, Brown S, Nguyen M, Martin M, Beckwith K, et al. Electronic cigarettes and health outcomes: systematic review of global evidence. Report for the Australian Department of Health. Canberra: National Centre for Epidemiology and Population Health; 2022. |

# KEY FACTS

## THEME 3: HEALTH CONSEQUENCES

| *MESSAGE A:*<br>*Alternative tobacco and nicotine products risk creating new forms of addiction rather than reducing harm* | | |
|---|---|---|
| **Simplified** | **Key facts** | **References** |
| **Respiratory harm and carcinogens** | | |
| **Breathing worsens fast with Heat-not-burn (HNB)**<br>Heat-not-burn products can quickly change exhaled carbon monoxide, oxygen levels, and airway function. | Heat-not-burn (HNB) products can cause immediate changes in exhaled carbon monoxide, oxygen saturation, and airway function. | Pataka A, Kotoulas S, Chatzopoulos E, Grigoriou I, Sapalidis K, Kosmidis C, et al. Acute effects of a heat-not-burn tobacco product on pulmonary function. Medicina (Kaunas). 2020;56(6):292. |
| **E-cigarette vapour can irritate lungs**<br>E-cigarette vapour can irritate lungs. Effects may last, especially in smokers with existing lung damage. | There are signs that e-cigarette vapour can irritate the lungs and might keep causing harm, especially in smokers with lungs already damaged by tobacco smoke. | Staudt, M. R., Salit, J., Kaner, R. J., Hollmann, C., & Crystal, R. G. (2018). Altered lung biology of healthy never smokers following acute inhalation of E-cigarettes. Respiratory research, 19(1), 1–10. |
| **Carcinogens are found in some pouches**<br>Some nicotine pouch products contain known carcinogens. | Tobacco-specific nitrosamines (TSNAs), found in numerous nicotine pouch products, are known carcinogens. Long-term use also exposes users to carcinogens from additives. | Mallock N, Schulz T, Malke S, Dreiack N, Laux P, Luch A. Levels of nicotine and tobacco-specific nitrosamines in oral nicotine pouches. Tob Control. 2024;33(2):193–199. doi:10.1136/tc-2022-057280. |
| **Cardiovascular and systemic effects** | | |
| **Snus is linked to higher heart-related deaths**<br>Snus use is associated with increased cardiovascular mortality. | Snus use is associated with increased cardiovascular mortality. The addictive properties of nicotine frequently result in prolonged snus use, thus sustained exposure to toxicants. | Byhamre ML, Araghi M, Alfredsson L, Bellocco R, Engström G, Eriksson M, et al. Swedish snus use is associated with mortality: a pooled analysis of eight prospective studies. Int J Epidemiol. 2021;49(6):2041–2050. doi:10.1093/ije/dyaa197. |
| **Nicotine stresses the heart and blood vessels**<br>Nicotine raises heart rate and blood pressure and can damage blood vessels. | Nicotine affects the cardiovascular system, increasing heart rate, blood pressure, and causes vascular damage. | Münzel T, Crea F, Rajagopalan S, Lüscher T. Nicotine and the cardiovascular system: unmasking a global public health threat. Eur Heart J. 2025;ehaf1010. |

# KEY FACTS

## THEME 3: HEALTH CONSEQUENCES

| *MESSAGE A CONTINUED:*<br>*Alternative tobacco and nicotine products risk creating new forms of addiction rather than reducing harm* | | |
|---|---|---|
| **Simplified** | **Key facts** | **References** |
| **Oral and tissue damage** | | |
| **Pouches and snus can harm gums**<br>Snus and nicotine pouches can cause mouth lesions and gum irritation that may progress to gum disease and recession. | Tobacco snus and nicotine pouches can cause mucosal lesions (damage to mouth lining) and chronic irritation, which may progress to periodontal diseases and even gingival (gum) recession. | Miluna S, Melderis R, Briuka L, Skadins I, Broks R, Kroica J, Rostoka D. The correlation of Swedish snus, nicotine pouches and other tobacco products with oral mucosal health and salivary biomarkers. Dent J. 2022;10(8):154. doi:10.3390/dj10080154.<br><br>Kopperud SE, Ansteinsson V, Mdala I, Becher R, Valen H. Oral lesions associated with daily use of snus, a moist smokeless tobacco product: a cross sectional study among Norwegian adolescents. Acta Odontol Scand. 2023;81(6):473-478. doi:10.1080/00016357.2023.2178502. |
| **Oral nicotine can drive gum disease**<br>Oral nicotine products can cause gum irritation and disease. | Oral nicotine products (e.g. pouches, snus) can cause mucosal lesions, gum irritation, and periodontal disease. | Mehrotra R, Malhotra R, Siddiqi K, Mishra D. Global Epidemiology of Smokeless Tobacco Use. In: Smokeless Tobacco and its Effects on Periodontal Health. Springer, Cham; 2026. doi: 10.1007/978-3-032-16409-4_1. |

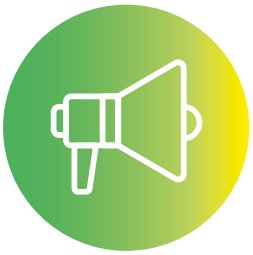
# KEY FACTS

## THEME 4: OPPORTUNITY FOR ACTION

| *MESSAGE A:*<br>*Many people can end their addiction* | | |
|---|---|---|
| **Simplified** | **Key facts** | **References** |
| Evidence-based cessation methods include:<br>• Behavioural counselling<br>• Nicotine replacement therapy (NRT)<br>• Prescription medications where appropriate | | European Network for Smoking and Tobacco Prevention. ENSP tobacco and nicotine dependence treatment guidelines. Brussels: ENSP; 2026. Available from https://ensp.network/ensp-tdt-guidelines/ |
| **Many try to quit, but most go it alone**<br>Over half of EU smokers have tried to quit and ~1 in 5 try each year, but most do so without support. | More than half of smokers in the EU have tried to quit, and around 1 in 5 attempt to quit each year – yet most do so without support. | European Commission. Special Eurobarometer 539: Attitudes of Europeans towards tobacco and related products, 2023.<br><br>Hummel K, Nagelhout GE, Fong GT, et al. Quitting activity and use of cessation assistance reported by smokers in eight European countries: Findings from the EUREST-PLUS ITC Europe Surveys. Tobacco Induced Diseases. 2018;16(2):6. doi:10.18332/tid/98912. |
| **Most quit attempts are unassisted**<br>In European studies, approx. 3/4 of quit attempts happen without help. | 75.8% of quit attempts are unassisted in European studies | El Asmar ML, Laverty AA, Vardavas CI, Filippidis FT. How do Europeans quit using tobacco, e-cigarettes and heated tobacco products? A cross-sectional analysis in 28 European countries. BMJ Open. 2022 Apr 29;12(4):e059068. doi: 10.1136/bmjopen-2021-059068. PMID: 35487758; PMCID: PMC9058771. |
| **Support boosts success**<br>Evidence-based treatments significantly increase the chance of quitting successfully. | Evidence-based treatments, including pharmacotherapy, significantly increase the likelihood of quitting successfully. | Hummel K, Nagelhout GE, Fong GT, et al. Quitting activity and use of cessation assistance reported by smokers in eight European countries: Findings from the EUREST-PLUS ITC Europe Surveys. Tobacco Induced Diseases. 2018;16(2):6. doi:10.18332/tid/98912. |

| *MESSAGE B:*<br>*To truly protect future generations, the goal must be both a smoke-free and nicotine-free generation.* | |
|---|---|
| **Key facts** | **References** |
| See key facts and references under **'youth nicotine addiction'** and **'health consequences'** | |

# SOCIAL MEDIA GUIDANCE



## CALL TO ACTION GUIDE

Our goal is to raise awareness of the health, social and other challenges that the rapidly evolving tobacco and nicotine landscape has created, so we can build support for stronger regulation that will move us toward a tobacco- and nicotine-free future.

Below you'll find some Call to Action (CTA) phrases that can be added to social media posts to help increase the visibility of the key messages and content in this toolkit.

**Example CTAs:**

- Help raise awareness and share now
- Share if you agree
- Support change and share to support better regulation
- Tag someone who should see this
- Join the conversation and share your comments below
- Add your voice in the comments
- Repost and add your voice
- Repost to support stronger regulation

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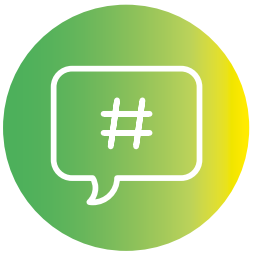

## HASHTAG GUIDE

**Below you'll find a list of suggested hashtags to use with your social media posts.**

- #NicotineFreeFuture
- #TobaccoandNicotineFree
- #NicotineFreeGeneration
- #TotalQuit
- #NicotineAddiction
- #SmokingCessation
- #StopSmoking
- #StopVaping

**Why use hashtags?** Hashtags can be used to boost the visibility of social media content and may help your posts to reach a wider audience. Using consistent hashtags can also help to connect content to a wider campaign or message, supporting awareness and momentum around a particular issue.

### Best practices

- **Be mindful of the number of hashtags used**
  Stick to a small number of relevant hashtags, as too many might reduce impact. Aim to use between 3–5 hashtags per post.
- **Capitalize hashtags for accessibility**
  Capitalize the first letter for each word in a hashtag. Text reader apps may not interpret hashtags correctly otherwise, affecting accessibility for all users.
- **Avoid using the same hashtags under every post**
  Vary your hashtags to reach a diverse audience and prevent being flagged for spam.

# SOCIAL MEDIA GUIDANCE

## GUIDANCE ON EDITING TEMPLATES AND CREATING CONTENT

The social media graphic templates in this toolkit are hosted on Canva, a free graphic design tool that allows users to create professional designs for social media posts. Below you'll find guidance on how to access, update and personalise the graphics in this toolkit.

1. **Click the link to the template you would like to use**

A new window will open in Canva.

2. **Click 'use template for new design'**
   - You'll be directed to a copy of the template that you can access within your Canva account.

3. **Edit the design**
   - Click on the item within the template that you would like to edit. This could be text, icons or background colours.
   - When you select an item, the options for editing will appear at the top of the page. For example, if you select text, you will see options for font size, style, etc.
   - You can edit the graphic to include alternative referenced facts from this toolkit or to make small changes to the design, like adding your organisation's logo.
   - Any change you make will be saved to your Canva library and won't impact the original template. Others won't be able to see changes you have made, unless you choose to share the file with them.

4. **Save and download you file**
   - When you have finished editing, click the **Share** button in the top right.
   - Select a file type to download. We recommend downloading images as a JPEG or PNG.
   - Click **Download** and save to your device.
   - **Share** on your social channels.

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## USING THIS TOOLKIT RESPONSIBLY

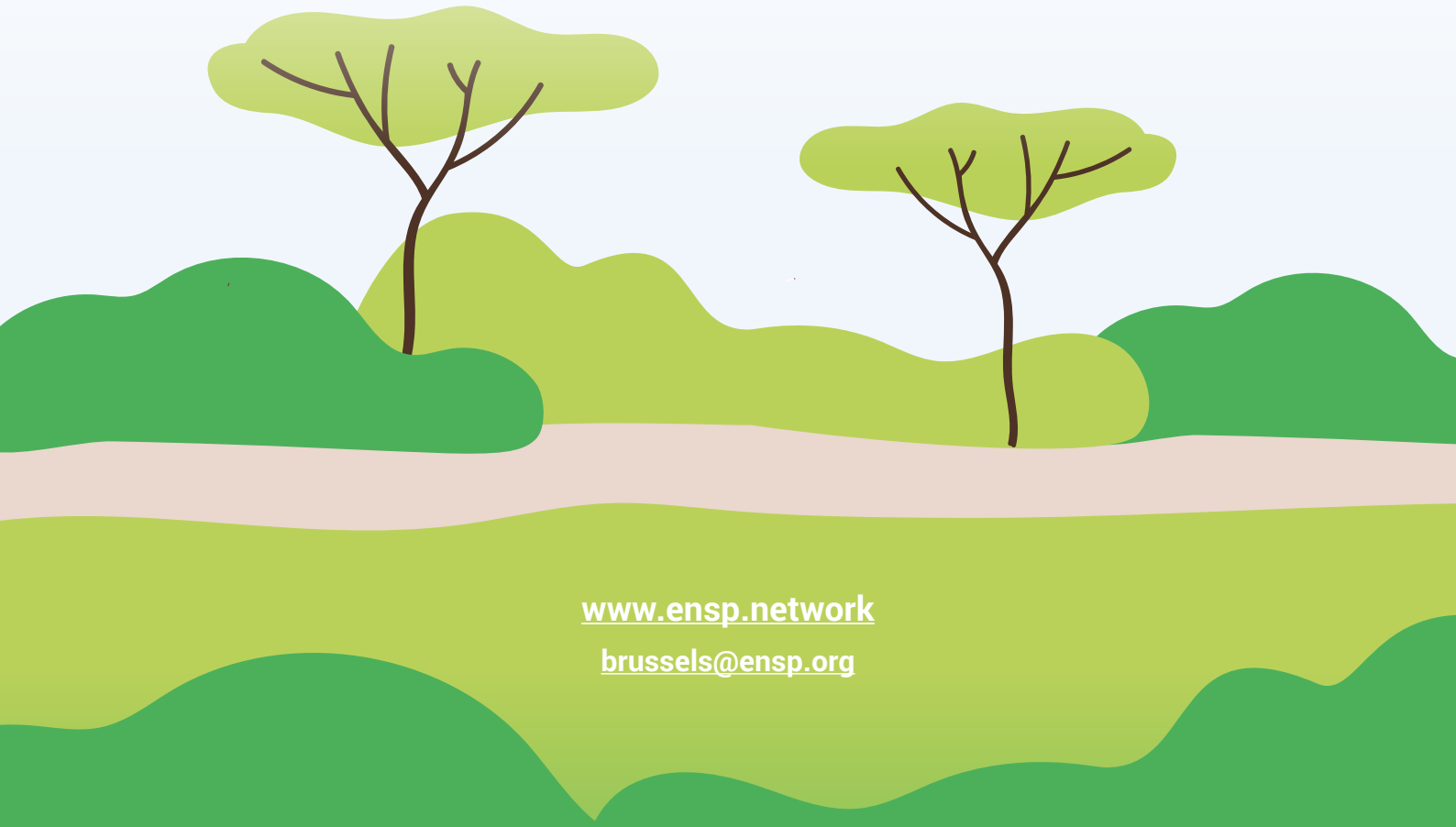
- Adapt messages to your audience
- Avoid overgeneralization
- Cite sources where possible
- This toolkit does not replace clinical guidelines or national recommendations

ENSP

*European Network*
*for Smoking and Tobacco Prevention*

This toolkit is supported by:

Sepa.



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This toolkit has been developed in collaboration with Kenvue.
Learn more about Kenvue and its Total Quit platform here: www.totalquitjourney.com