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OPINION

Southeast Asia vape bans are moral panic posing as public health

Despite cigarettes killing 3.1m people a year, governments rake in taxes on them

**David Hutt**

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An employee vapes at a shop in Jakarta in October 2020. © Reuters



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Let's begin with the absurdity. More than half of [Southeast Asian countries](#) have now outlawed e-cigarettes or vapes. The rest are heading toward prohibition. Meanwhile, no country has yet banned conventional cigarettes. But according to the World Health Organization (WHO), cigarettes kill around 3.1 million Southeast Asians each year. Nobody has a reliable estimate for the number of deaths caused by vaping, but it's almost certainly a fraction of cigarette deaths.

Vaping isn't harmless, of course, but it is hard to escape the sense that across Southeast Asia we are watching a public-health debate get hijacked by something else: a mixture of law-and-order theater, "save the kiddies" messaging and the irresistible appeal of banning the newer, smaller, more easily scapegoated thing, while the old killer continues to sell legally on every street corner.

There is an argument for nipping the trend in the bud early on, banning vaping before it becomes as entrenched as cigarette smoking. It's easier to prevent an addiction than to treat an addict. But it is also true that Southeast Asian governments are puritanically ignoring the fact that cures are sometimes worse than the diseases, and that vaping has been shown in hundreds of studies to be the most effective way of weaning people off cigarettes.

Instead, they're going after low-hanging fruit: the newer product, with fewer voters already dependent on it and fewer corporate interests protecting it. In Indonesia, while vapes are not illegal, an estimated 65.5% of men smoke tobacco, one of the highest rates in the world. That's well over half the electorate. Many sources said that around 40% of people from Myanmar and East Timor smoke cigarettes.

Nonetheless, law-and-order types get to feel virtuous because they're "protecting the kids," which seems to be the dominant narrative, although this protection takes the form of either encouraging them to smoke more deadly cigarettes, forcing them to deal on the black-market or giving them a criminal record. Populists in government get to announce that they are putting "public health over profit," without having to pick a serious fight with the much more powerful and profitable tobacco industry. Between 2022 and 2024, Singapore collected \$2.5billion in tobacco excise duties, which gives a sense of the profits companies in this legal business are making -- and perhaps highlights why governments aren't going after it.

I'm not going to make a personal freedom argument, though it is valid. Such arguments are largely dead-on-arrival in much of paternalist Southeast Asia. The better argument is practical. First, if the past 20 or so years have taught us anything, it's that Southeast Asian governments are particularly bad at trying to outlaw anything addictive. How is drug policy going? The production and trafficking of methamphetamine continues to increase every year. Extreme reactions, like the Philippines' brutal "war on drugs," did not end that market, and now former President Rodrigo Duterte is sitting in The Hague awaiting trial for crimes against humanity. Singapore outlawed e-cigarettes in 2018. Between January 2024 and March 2025, Singaporean authorities seized more than \$32million worth of illegal vapes and components, likely a drop in the ocean of the illicit sector's real worth. The city-state's new concern is drug-laced vapes, which are obviously harder to tackle when all trade in vapes is illegal, and therefore unregulated.



Single-use e-cigarettes have been banned in France for environmental reasons and because of their appeal to underage vapers. © Reuters

The bigger problem is that prohibition is so simple and narrow-minded. In November last year, a meta-analysis of 104 studies by the Cochrane Library, a major health care research hub, found that e-cigarettes are the most effective way of helping people quit tobacco. "For every 100 people using nicotine e-cigarettes to stop smoking, 8 to 11 might successfully stop [using e-cigarettes], compared with only 6 of 100 people using nicotine-replacement therapy, 6 of 100 using e-cigarettes without nicotine, or 4 of 100 people having no support or behavioural support only," it concluded. In other words, you can get three times as many people to stop smoking tobacco if they can access an e-cigarette than if they have to give up nicotine overnight. In the United Kingdom, the National Health Service states that vaping is "less harmful than smoking," and is "one of the most effective tools" for stopping smoking."

The naturally conservative WHO (which hasn't covered itself in glory in recent years) says that vaping has "not been proven effective" at the *population level* in helping smokers quit cigarettes. Of course it hasn't: Any study at the population level would take decades to complete. As a friend who finally quit cigarettes by using vapes explained to me, the benefit of a vape (over patches, sprays or other methods of quitting) is not just the nicotine, it's about behavioral aspects, having something in the hand, maintaining social familiarity with other smokers, and continuing the habits you get used to when smoking. Because health experts are typically those who have never smoked or vaped, they don't appreciate such things. Much of the anti-smoking lobby gets its funds through an uncompromising crusade against all "nicotine addiction." The pharmaceutical industry, which has produced products to help people quit smoking, won't be happy that vaping is demonstrably a better method, as it threatens their profits.

Most countries have correctly banned the sale of vapes to under-18s. Most have also restricted or banned advertising, while France and the U.K. have sensibly outlawed single-use, disposable vapes to address environmental waste and their appeal to youngsters. Australia, as usual, has an entirely sensible policy: You can only buy e-cigarettes at pharmacies, meaning over-18s must have had a pharmacist's consultation before purchase and under-18s need a doctor's prescription. In other words, Australia has mitigated the

health risks, especially for children, while potentially improving health outcomes by treating vapes primarily as smoking-cessation tools.

The perfect is the enemy of good, as they say, and outright bans on e-cigarettes sacrifice the good (helping smokers quit) and amplify the bad (creating an unregulated market run by people who will happily sell to anyone, including kids). A better response would be less puritanical, accept some tradeoffs, and use vaping as a public health tool *for adults* to combat the far bigger problem of conventional smoking.

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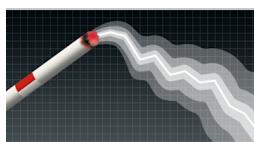
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