

March 23, 2015



**UPSTREAM**  
PUBLIC HEALTH

Dear Chair Monnes Anderson and members of the committee:

My name is Nafisa Fai; I am a chronic disease prevention program manager at Upstream Public Health, of which tobacco prevention is a priority area. Upstream Public Health is a non-profit organization working to create the social and environmental conditions in which all Oregonians can be healthy and thrive. I am here with you this afternoon to testify in support of House Bill 2546 as a portal to protect children in my home county and across Oregon from addictive nicotine products and their delivery devices as well as to ensure that everyone breathes air that's free of nicotine, which affects kids and adults.

Today we have an opportunity to prevent harm to future generations of children – especially those experiencing economic hardship and our youth of color. We have a collective responsibility to take care of our communities and unfortunately we have missed the boat in the past in preventing nicotine and tobacco use. We must act. Right now, 1 in 3 Native American and Black adults use tobacco. And nearly 80% of adults began using tobacco as a youth. It troubles me that every 3<sup>rd</sup> high school junior you meet right now in Oregon has already reported using smokeless tobacco.

We do not know yet all of the dangers of electronic cigarettes, and while I'm encouraged that adults can use them to help transition away from poisons in conventional cigarettes - we also know that nicotine is highly addictive. Considering that nearly 80% of people who try to quit smoking relapse, to me e-cigs may be switching one addiction to another. Nicotine is still poisonous and more addictive than cocaine and heroin. Recent studies suggest that nicotine causes brain development problems in children. So, why would we not want to keep these toxic and harmful products from the hands of children?

Enough is enough; we do not need to wait and should not wait for 50 years to identify this as a public health hazard. Our communities of color have already carried too much of this burden from a history of tobacco pushing in their communities. According to the Synar report, Oregon has the highest illegal sales rate in the country; we also need to address this problem and licensing can ensure that these products are inaccessible to minors. We need to impose a similar age restriction as traditional cigarettes on e-cigs and we need to identify a mechanism to ensure compliance at the point of sale level such as retail licensing system with enforcement and education. Setting an age restriction on e-cigs without a retail licensing system does little to adequately address the tobacco and nicotine problem.

Thank you for your considerations.

Sincerely,

Nafisa Fai  
Program Manager  
Chronic Disease Prevention  
Upstream Public Hea