

## Written Testimony in opposition to HB 513 amendment to preempt local control concerning flavored tobacco to the Ohio Senate Ways and Means Committee

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## Submitted by:

Meghan Kissell, Regional Advocacy Director, Campaign for Tobacco-Free Kids

Dear Members of the Ways and Means Committee,

The Campaign for Tobacco-Free Kids is the nation's largest non-profit, non-governmental advocacy organization solely devoted to reducing tobacco use and its deadly toll by advocating for public policies that prevent kids from using tobacco, help smokers quit and protect everyone from secondhand smoke. We strongly opposes any amendment to HB 513 that would preempt local control over flavored tobacco products.

As you know, tobacco use remains this nation's number one preventable cause of premature death and disease, killing more than 480,000 Americans, including 20,200 Ohioans each year.

Ohio has some of the worst tobacco use rates in the country – nearly 1 in 5 adults currently smoke cigarettes. As a result, the economic impact of tobacco use in Ohio is staggering. In addition to this enormous health burden, tobacco use also imposes a major economic burden on society costing Ohio \$6.56 billion in annual health costs and \$8.04 billion in lost productivity due to smoking caused related illness.

What's worse is the impact that tobacco use is having on Ohio's kids. After making tremendous progress reducing youth tobacco use over the past several decades, e-cigarettes, often referred to as vapes, are threatening to undermine declines in overall youth tobacco use.

Data from the 2019 Ohio Youth Tobacco Survey indicated that nearly thirty percent (29.8%) Ohio high school students and nearly 12% of Ohio middle school students report having used a flavored tobacco product. These are shocking numbers and are much higher than national averages.

Flavored products are driving this epidemic. In fact, 85% of youth e-cigarette users use flavored products. Unless we take action to reduce tobacco use, 259,000 of the youth alive today in Ohio will die early from a tobacco-related disease. We must do everything we can at both the state and local level to prevent tobacco use among young people.

Ohio has taken positive steps to improve the health of people across the state, but often the strongest, most effective tobacco control policies have originated at the local level. In 2019, the general assembly

raised the age of tobacco sales to age 21. This followed several years of local communities passing and implementing these evidence-based public health policies, demonstrating they are feasible and effective. The state then continued to give local communities the leeway to implementing enforcement strategies, such as compliance checks with retailers and tobacco retailer licensing programs, that are appropriate for their communities.

What works for public health in Cincinnati may not make sense for Cleveland Heights. This is why we need to continue to let local communities have the ability to develop appropriate solutions and not strike them down because it suits the tobacco industry.

While the effectiveness of local control of tobacco control policies is well-documented, so is the tobacco industry's support for preemptive policies at the state level. In fact, in 2012, the Surgeon General found that the tobacco industry's response to successful reductions in youth tobacco initiation and use have included more aggressive lobbying, including lobbying for preemption legislation to allow state laws to override more stringent local laws.

Given the devastating impact of tobacco use on both Ohio's economy and the health of Ohioans families, we must make sure Ohio's cities, towns and counties continue to have the option to pass laws to help their communities thrive. We strongly encourage the committee to choose the lives of children over Big Tobacco and vote against any proposal that would limit the ability of communities to protect the health and well-being of Ohio's children.