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Testimony Re: Budget Article 5, Section 13 – Cigarette, Cigar, and ENDS Tax
Senate Committee on Finance
February 28, 2019
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Mr. Chairman and members of the Committee, thank you for the opportunity to provide informational testimony today regarding Budget Article 5.

Rapid Increase in Youth Use of Electronic Nicotine Delivery Systems (ENDS) also known as E-Cigarettes or Vaping

Rhode Island KIDS COUNT has been tracking youth who report using tobacco and nicotine products for many years. While tremendous progress had been made to decrease youth cigarette use in the previous decade, youth use of electronic cigarettes has recently rapidly increased.

On December 18, 2018, the U.S. Surgeon General declared use of e-cigarettes among youth an epidemic.¹

- **Declines in Youth Use of Traditional Cigarettes:** The percentage of Rhode Island middle school students who report ever trying cigarette declined from 16% in 2007 to 5% in 2017. Current cigarette use also declined from 4% to 2% during that time period. Similar declines were reported among Rhode Island high school students. Between 1997 and 2017, reports of ever trying a cigarette declined from 69% to 20% and current cigarette use declined from 35% to 6%. Rhode Island has the lowest current cigarette use rate for both middle (1%) and high school (5%) students in the nation among ranked states in 2015.²
- **Rising Youth Use of Other Tobacco Product including ENDS or E-Cigarettes:** Despite these marked declines in cigarette use, Rhode Island adolescents still report using a wide variety of other tobacco products, includes cigars, hookah, and smokeless tobacco. Electronic vapor products are one of the most popular emerging products being used. In Rhode Island in 2017, 40% of high school students report ever using an electronic vapor product and 20% reported current use in the past 30 days. Similarly, 16% of Rhode Island middle school students reported ever using an electronic vapor product and 6% reported current use during that time.³
- **ENDS (Electronic Cigarettes or products like JUUL) are Harmful to Youth:** Although e-cigarettes pose less risk to an individual than traditional cigarettes, e-cigarettes are harmful to youth.^{4,5} E-cigarettes contain nicotine, a highly addictive chemical that can harm brain development which continues through the teens and into the early to mid 20's. Some e-cigarette pods can have up to as much nicotine as a pack of traditional cigarettes and some e-cigarette products that market themselves as having zero nicotine have been found to contain nicotine.^{6,7,8} Young people who use e-cigarettes may be more likely to transition to regular cigarettes and increase the frequency and amount of cigarette smoking in the future. Bystanders can breathe in exhaled, or "secondhand", aerosols from an e-cigarette user.⁹

More Tobacco Prevention and Cessation Programming and Funding is Needed

Despite state laws prohibiting purchases of tobacco products, a number of Rhode Island youth report buying such products. One in five (17%) Rhode Island high

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school students under age 18 who use an electronic vapor during the past 30 days reported buying it in a store and 26% reported buying cigarettes in a store as well. In addition, among Rhode Island high school students who reported current cigarette use, 60% reported trying to quit. More prevention and cessation programming for children and families is needed to continue to reduce overall tobacco use.⁵

Tobacco Cessation and Prevention Restricted Receipt Recommendation

Rhode Island KIDS COUNT recommends that the General Assembly enact legislation that creates a Tobacco cessation and prevention restricted receipt account. This will help ensure that funds derived from this cigarette tax are annually allocated for important public health tobacco programming.

Closing

Youth use of tobacco and nicotine products, including ENDS and electronic-cigarettes is a serious public health issue in Rhode Island. Rhode Island KIDS COUNT urges the General Assembly to continue to enact legislation and allocate sufficient resources needed to help reduce the number of children and families who use tobacco. We thank you for the opportunity to provide testimony and for your continued leadership on children's health.

References

¹ Surgeon General. (2018). *Surgeon General's Advisory on E-Cigarette Use Among Youth*. Retrieved February 28, 2019 from <https://e-cigarettes.surgeongeneral.gov/documents/surgeon-generals-advisory-on-e-cigarette-use-among-youth-2018.pdf>

^{2,3} Rhode Island Department of Health, Youth Risk Behavior Survey, 1997-2017

⁴ E-cigarette use among youth and young adults: A report of the Surgeon General - Executive summary. (2016). Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention.

^{5,9} Public health consequences of e-cigarettes. 2018. Washington, DC: The National Academies of Sciences, Engineering, and Medicine.

^{6,8,11} Centers for Disease Control and Prevention. (2018). Quick facts on the risks of e-cigarettes for kids, teens, and young adults. Retrieved October 17, 2018, from www.cdc.gov

⁷ Goniewicz, M., et al. (2015). Nicotine levels in electronic cigarette refill solutions: A comparative analysis of products from the United States, Korea, and Poland. *Int J Drug Policy*, 26(6),583–588.

¹⁰ Barrington-Trimis, J., et al. (2016). E-cigarettes and future cigarette use. *Pediatrics*, 138. (1), e20160379.