

Submitter: Heather Jefferis

On Behalf Of:

Committee: Senate Committee On Early Childhood and Behavioral Health

Measure, Appointment or Topic: SB702

Chair Reynolds and members of the Committee,

On behalf of the Oregon Council for Behavioral Health (OCBH), I am writing in strong support of Senate Bill 702 to end the sale of flavored tobacco products in Oregon.

OCBH unites over 60 private and non-profit providers of Behavioral Health Services across the state to advance access to treatment and care for all Oregonians. One of our top priorities is treating and preventing Substance Use Disorder, which overlaps in multiple ways with smoking.

? It is estimated that 35% of people who smoke cigarettes have a mental health condition and account for 38% of all U.S. adult cigarette consumption.

? Despite the national cigarette smoking rate being 14% overall among adults, it is 23% for individuals with a behavioral health condition.

? Lifetime smoking rates are higher in patients who are diagnosed with a behavioral health condition compared to adults with no behavioral health condition.

We know the lifelong health consequences of tobacco use, and the tobacco industry continues to use predatory marketing practices for those who may be more susceptible, like people with mental health challenges, pre-existing substance use disorders, and youth. Flavored tobacco is one of their favorite tricks. By marketing and selling candy-flavors, the tobacco industry hooks users into a lifetime of addiction while disguising the long-term public health consequences.

This is a significant public health concern; we know the risks of tobacco and nicotine use, and the data is clear. Smoking is the leading cause of preventable death and disease in Oregon, and flavors are one of the main pathways for new users. It's time to act before this becomes an even greater public health crisis – as tobacco use has been for decades.

We urge your support for Senate Bill 702.

Thank you,

Heather Jefferis
Executive Director
Oregon Council for Behavioral Health

1 Centers for Disease Control and Prevention. National Center for Health Statistics. National Health Interview Survey, 2017. Analysis performed by the American Lung Association Epidemiology and Statistics Unit using SPSS software.

2 Centers for Disease Control and Prevention. National Center for Health Statistics. National Health Interview Survey, 2017. Analysis performed by the American Lung Association Epidemiology and Statistics Unit using SPSS software.

3 Smith PH, Mazure CM, McKee SA. Smoking and mental illness in the US population. *Tob Control*. 2014; 23(0): e147-e153.