

Senate Committee on Finance and Revenue
Oregon State Senate
900 Court St. NE
Salem, Oregon 97301

RE: Support for Senate Bill 702A

Dear Chair Meek, Vice Chair McLane, and members of the Committee:

On behalf of The Center for Black Health & Equity, I write to express our strong support for Senate Bill 702A. This legislation represents a critical public health, equity, and economic action that will save lives and reduce long-term healthcare costs for the people of Oregon.

Tobacco use remains the leading cause of preventable death and disease in Oregon, with nearly all tobacco addiction beginning in adolescence. Pediatricians confirm that youth smoking and vaping can lead to lifelong nicotine addiction and chronic health conditions such as heart and lung disease. Alarming, youth who use vape products are now experiencing increased rates of lung disease, transplants, and long-term medical needs—burdens that ultimately impact the state’s healthcare system.

E-cigarettes are currently the most commonly used tobacco product among Oregon teens, with over 10% of 11th graders reporting use in the past month. Disposable vapes such as Puff Bar 5000 can contain nicotine equivalent to two and a half cartons of cigarettes—making them especially addictive. These products, marketed in flavors like menthol, watermelon ice, and cotton candy, are intentionally designed to attract youth. Nearly 90% of young e-cigarette users report using flavored products.¹

SB 702A Makes Meaningful Progress Toward Protecting Oregon Youth

SB 702A significantly reduces access to flavored tobacco products by limiting their sale to licensed OLCC liquor stores—establishments that already prohibit unaccompanied minors. This is a strong step forward to reduce youth access compared to convenience and grocery stores, where minors frequently shop.

The bill also:

- Establishes regulatory authority over nicotine pouches, including unflavored products like Zyn.

¹ Results from the FDA 2024 Annual National Youth Tobacco Survey

- Clarifies and preserves local authority to prohibit the sale of flavored tobacco products.
- Helps protect vulnerable populations—including Black, Hispanic/Latino, Indigenous, AANHPI, LGBTQIA+, and women—from targeted industry tactics.

Currently, Oregon has over 2,800 tobacco retail licensees. This bill would reduce that number to about 282—and possibly fewer, depending on pending Supreme Court rulings—drastically limiting youth exposure.

The Time to Act is Now

As cigarette sales decline, the tobacco industry is doubling down on youth-targeted marketing of vapes and nicotine pouches. Nicotine is already highly addictive; flavored products make it easier to get hooked and harder to quit. Every day the legislature delays action, more Oregon youth fall victim to addiction—and the state continues to bear the staggering costs.

We urge you to pass SB 702A to protect Oregon’s next generation.

Key Facts

- 5,500 Oregonians die from smoking every year.²
- 95% of adults who smoke report they started before age 21.³
- 88% of youth e-cigarette users use flavored products.⁴
- \$1.79 billion in annual health care costs in Oregon directly caused by smoking each year.⁵
- \$373.6 million Medicaid costs caused by smoking in Oregon each year.⁶

² CDC, *Best Practices for Comprehensive Tobacco Control Programs*, 2014.

³ Substance Abuse and Mental Health Services Administration. National Survey on Drug Use and Health, 2014.

⁴ Results from the FDA 2024 Annual National Youth Tobacco Survey.

⁵ CDC, *Best Practices for Comprehensive Tobacco Control Programs*, 2014. Adjusted to 2018 dollars by the CDC’s methodology of using the Bureau of Economic Analysis’ price indexes for Gross Domestic Products).

⁶ CDC, State Data Highlights, 2006 [and underlying CDC data/estimates], stacks.cdc.gov/view/cdc/11827. The listed Medicaid program expenditure includes the state and federal portions. State Medicaid program expenditures may be conservative because they do not account for increases in utilization nor reflect the effects of Medicaid expansion under the Affordable Care Act. Adjusted to 2018 dollars by the CDC’s methodology of using the Bureau of Economic Analysis’ price indexes for Gross Domestic Products).

- \$3.7 billion smoking-caused productivity losses in Oregon each year.⁷

⁷ Shrestha, SS, et al., “Cost of Cigarette Smoking—Attributable Productivity Losses, U.S., 2018,” *AJPM*, July 27, 2022.