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Testimony from: Marc Hyden, Southeast Region Director, R Street Institute

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Thank you so much for this opportunity to testify. My name is Marc Hyden. I am a Georgian, and I am also the Southeast region director for the R Street Institute, a nonprofit, nonpartisan, public policy organization. We strive to promote free markets and effective government policies in many areas, including tobacco harm reduction.

I am here today to express reservations about the proposed Tobacco Free Generation Ordinance. While I am certain that the author drafted this proposal with the best of intentions and that R Street shares many of his concerns, I believe the ordinance would not reduce tobacco use and would instead have negative effects on Winterville's residents.

My greatest concern is that the ordinance would ban reduced-harm tobacco products without considering their health benefits. These reduced-harm products include e-cigarettes, which are now the number one quit-method that smokers employ. A recent study found e-cigarettes to be 95-percent less-harmful than combustible cigarettes. In fact, the Office of the Surgeon General has stated that e-cigarettes' effects on the body are similar to those of nicotine gum, patches and lozenges.

The proposed prohibition of harmful tobacco products alone will simply be ineffective. The city is roughly 2.6 square miles and surrounded by the rest of Georgia, where all forms of tobacco are legal for adults. There's nothing to stop tobacco users from going elsewhere for these products. As such, this ordinance would not reduce usage in Winterville but would limit tobacco-generated tax-revenue within the city.

Blanket bans on traditional tobacco usage and reduced-harm alternatives, as found in this proposal, will not realize their intended consequences if enacted. They would be symbolic moves, at best.

Given that prohibition will come up short of its goal, it's important to provide safer alternatives. If Winterville's proposed prohibition excluded reduced-harm products, then the community's inhabitants would have the option of either seeking healthier smoking-alternatives near their home or traveling outside of the city to purchase traditional tobacco products. Thus, excluding reduced-harm products from this ban would encourage healthier living by making reduced-harm products more convenient for consumers to purchase than their more harmful counterparts.

Instead of pursuing the prohibition route, then, the city should encourage consumers to use less-risky alternatives. After all, the ordinance reads, "[C]igarette smoking among high school students is at the lowest level in more than two decades." This is evidence that current tobacco-control and harm-reduction measures are working, even in the absence of blanket bans.

If those in Winterville want continued progress in smoking-reduction, then their focus should be on what has caused this reduction and what can encourage further decline. Prohibition is not the answer. Public education and encouraging healthier alternatives is. Rather than seeking to prohibit effective quit-methods and reduced-harm alternatives, we ought to be promoting them. At R Street, that's where we would like the conversation to be.

¹ Shu-Hong Zhu et al., "E-Cigarette Use and Associated Changes in Population Smoking Cessation: Evidence from US Current Population Surveys," *The BMJ*, July 26, 2017. http://www.bmj.com/content/358/bmj.j3262/.

[&]quot;Health & Wellbeing Directorate, "E-Cigarettes: A New Foundation for Evidence-Based Policy and Practice," *Public Health England*, 2015, p. 4.

 $https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/454517/Ecigarettes_a_firm_foundation_for_evidence_based_policy_and_practice.pdf.$

Office of the Surgeon General, "The Health Consequences of Smoking—50 Years of Progress," U.S. Department of Health & Human Services, 2014, p. 116. https://www.surgeongeneral.gov/library/reports/50-years-of-progress/full-report.pdf.