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March 24, 2026

The Honorable Louis P. DiPalma, Chair
Senate Committee on Finance
State House
82 Smith St.
Providence, RI 02903

RE: **S 2844 – An Act Relating to Taxation – Cigarette, Other Tobacco Products, and Electronic Nicotine-Delivery Systems Products**

Dear Chair DiPalma:

Please accept this letter opposing S 2844, legislation proposing an exemption for proposed newly defined electronic nicotine-delivery system (ENDS/e-cigarettes) shops from current Rhode Island law restricting flavored ENDS sales.

Most people who smoke/vape want to quit.^{1,2} Rhode Island offers free, effective, and confidential help for adults and youth interested in quitting or reducing tobacco/nicotine use.³ In addition to counseling, there are 7 US Food and Drug Administration (FDA)-approved products to help people quit; e-cigarettes are not one of the 7 FDA-approved cessation products.⁴ According to the World Health Organization (WHO)'s [2025 Position on Tobacco Control and Harm Reduction](#), "tobacco and nicotine companies are misappropriating the public health concept of harm reduction while mass marketing harmful products like e-cigarettes and nicotine pouches to the public at large."⁵ Most e-cigarettes contain nicotine, which is highly addictive. Nicotine can harm parts of an adolescent's brain that control attention, learning, mood, and impulse control.⁶ Aerosol from e-cigarettes can contain harmful and potentially harmful substances. These include cancer-causing chemicals and tiny particles that can be inhaled deep into lungs. No tobacco products, including e-cigarettes, are safe.⁷

Most tobacco use, including vaping, starts and is established in adolescence. Flavors are significant contributors to high youth e-cigarette use, as youth e-cigarette users report flavors as a primary reason to use e-cigarettes.⁶ Flavored e-cigarettes are the most-used tobacco/nicotine product among youth and young adults. In Rhode Island, 95% of high school students who use e-cigarettes (approximately 7,000 students) use flavored products,^{8,9} and the most common flavors used nationwide are fruit, candy, and mint.¹⁰ **The finding that most Rhode Island youth who use ENDS use flavored products is a significant public health concern and cause for continued interest in preventing youth access to and use of the products.**

In 2023, 16.5% of Rhode Island high school students reported current (past 30 days) use of e-cigarettes and 32.4% (approximately 14,700 students) reported using e-cigarettes at least one or more times in their life.⁸ Rhode Island has made great strides in reducing youth access and use, including raising the sales age for tobacco products to 21 in 2021. In 2023, approximately 23.3% of Rhode Island youth e-cigarette users reported

¹ Babb S, Malarcher A, Schauer G, Asman K, Jamal A. [Quitting Smoking Among Adults — United States, 2000–2015](#). MMWR Morb Mortal Wkly Rep 2017;65:1457–1464.

² Centers for Disease Control and Prevention. [E-Cigarette Use Among Adults](#). May 2024.

³ Rhode Island Department of Health. [Rhode Island Nicotine Helpline](#). March 2026.

⁴ U.S. Food & Drug Administration. [Want to Quit Smoking? FDA-Approved and FDA-Cleared Cessation Products Can Help](#). July 2022.

⁵ World Health Organization. [WHO position on Tobacco Control and Harm Reduction](#). November 2025.

⁶ Centers for Disease Control and Prevention. [E-Cigarette Use Among Youth](#). October 2024.

⁷ Centers for Disease Control and Prevention. [Health Effects of Vaping](#). January 2025.

⁸ Rhode Island Department of Health. Center for Health Data Analysis. [2023 Youth Risk Behavior Survey](#).

⁹ Raut A, Garcia C, Pearlman D, Hartzell H. [Disparities in Flavored Electronic Nicotine-Delivery System \(ENDS\) Use Among Youth in Rhode Island](#). RI Med J. 2025 Feb 1; 108(2): 74-77.

¹⁰ Park-Lee E, Jamal A, Cowan H, et al. [Notes from the Field: E-Cigarette and Nicotine Pouch Use Among Middle and High School Students — United States, 2024](#). MMWR Morb Mortal Wkly Rep 2024;73:774–778.

buying the products from a store or shop, 1.5% from the internet, and **75.1% by other means including from other individuals, friends, or family.**¹¹ Most youth obtain e-cigarettes from other individuals, demonstrating a continued **need for reducing flavored ENDS availability from the marketplace altogether** and supporting existing flavor restrictions and structure without exemptions.

As of September 2025, 7 states (including Massachusetts and Rhode Island) and 422 US jurisdictions have enacted flavor policies.^{12,13} **Rhode Island's 2019 regulatory restrictions on flavored ENDS products led to significant decreases in overall e-cigarette and flavored e-cigarette sales and use.** From August 2019 to December 2024, monthly ENDS sales decreased 57.6%, from 113,600 units to 48,100 units. Flavored ENDS sales decreased 95.3%, from 89,000 to 4,165.¹⁴ The rate of Rhode Island high school students who ever used e-cigarettes decreased by 33.7%, from 48.9% in 2019 to 32.4% in 2023, and current use decreased by 45.1%, from 30.1% in 2019 to 16.5% in 2023.⁸

An evaluation of Providence tobacco product sales policies conducted by the Rhode Island Department of Health (RIDOH) and published in 2019 in the Centers for Disease Control and Prevention (CDC)'s *Preventing Chronic Disease* found policies restricting flavored tobacco product sales to be effective, demonstrating significant reduction in high school students' use of tobacco products, including cigarettes and e-cigarettes.¹⁵ In 2020, Massachusetts implemented a statewide law restricting the sale of all flavored tobacco products. Impact studies demonstrated the law reduced access to the products while having no significant impact on cross-border sales in neighboring states, including Rhode Island.^{16,17} A study published in July 2025's *American Journal of Public Health* found that prohibiting flavored tobacco sales in California resulted in overall declines in e-cigarette and cigarette sales, without affecting neighboring states.¹⁸

Thank you for the opportunity to comment on the proposed legislation. Coordinated prevention, education, cessation/quit resource programming, tobacco product and access restrictions, and tax parity are effective, public health-aligned, evidence-based approaches for reducing tobacco and nicotine use. RIDOH is committed to continuing to work with the General Assembly and Governor in advancing the significant progress made in reducing the adverse health outcomes associated with tobacco and nicotine access and use in Rhode Island.

Sincerely,



Jerome M. Larkin, MD
Director

CC: The Honorable Members of the Senate Committee on Finance
Kristen Silvia, Director of Legislation and Deputy Chief of Staff
Patricia Resende, Director of Senate Policy

¹¹ Rhode Island Department of Health. [Burden of Tobacco/Nicotine Use in Rhode Island](#). December 2025.

¹² Truth Initiative. [Local restrictions on flavored tobacco and e-cigarette products](#). November 2025.

¹³ Campaign for Tobacco Free Kids. [States and localities that have restricted the sale of flavored tobacco products](#). December 2025.

¹⁴ CDC Foundation. [Rhode Island E-Cigarette Unit Sales by Flavor](#). January 2026.

¹⁵ Pearlman D, Arnold J, Guardino G, Welsh E. [Advancing Tobacco Control Through Point of Sale Policies, Providence, Rhode Island](#). *Prev Chronic Dis* 2019;16:180614.

¹⁶ Ali F, King B, Seaman E, Vallone D, Schillo B. [Impact of Massachusetts law prohibiting flavored tobacco products sales on cross-border cigarette sales](#). *PLoS One*. 2022 Sep 13;17(9).

¹⁷ Kingsley M, McGinnes H, Song G, Doane J, Henley P. [Impact of Massachusetts' Statewide Sales Restriction on Flavored and Menthol Products on Tobacco Sales in Massachusetts and Surrounding States, June 2020](#). *American Journal of Public Health* 2022;112, 1147_1150.

¹⁸ Ali F, Leventhal A, Diaz M, Crane E, Marynak K. [Changes in E-Cigarette and Cigarette Sales in California and Neighboring States Following a Law Prohibiting Flavored Tobacco Product Sales](#). *American Journal of Public Health*. July 2025.



Burden of Tobacco/Nicotine Use in Rhode Island

Tobacco use remains the leading preventable cause of death and disease in the United States and in Rhode Island. Approximately 490,000 deaths each year are attributed to smoking and other tobacco use in the United States, with 1,800 deaths in Rhode Island annually and 31.3% of cancer related deaths attributable to smoking.¹ Tobacco-related disparities negatively impact health equity.² No tobacco products, including e-cigarettes, are safe.³

An estimated 1,100 youth in Rhode Island will try smoking cigarettes for the first time this year.¹ Nearly 9 out of 10 (90%) adults who currently smoke cigarettes started using tobacco/nicotine products by age 18, and 99% started by age 26.⁴ Flavored e-cigarettes and nicotine pouches are the most used tobacco/nicotine products among youth and young adults. In Rhode Island, 95% of high school students who use e-cigarettes use flavored products,⁵ and the most common flavors used nationwide are fruit, candy, mint.⁶ Most e-cigarettes and nicotine pouches contain nicotine, which is highly addictive. Nicotine can harm the parts of an adolescent's brain that control attention, learning, mood, and impulse control.⁷ Aerosol from e-cigarettes can contain harmful and potentially harmful substances.³ There is currently no e-cigarette or nicotine pouch approved by the FDA to help people quit smoking.⁸

Rhode Island Youth Tobacco Use Behaviors

High School, 2023 ⁵	Percent (%)
Ever tried e-cigarettes	32.4
Flavored e-cigarette use	15.6
Ever tried cigarettes	11.9
Purchased e-cigarettes from store/shop †	23.3
Obtained e-cigarettes by other means (i.e., other individuals, friends, or family) †	75.1

† among current high school e-cigarette users

Rhode Island Current Tobacco Use

High School, 2023 ⁵	Percent (%)
E-cigarettes	16.5
Daily e-cigarette use	3.9
Cigars, cigarillos, or little cigars	4.0
Cigarettes	3.1
Smokeless tobacco products	2.8
Middle School, 2023 ⁵	Percent (%)
E-cigarettes	6.7
Adults, 2024 ⁹	Percent (%)
Cigarettes	9.9
E-cigarettes	7.0

Rhode Island Department of Health Tobacco Control Program:

health.ri.gov/tobacco/tobacco-control-program

Reducing Tobacco/Nicotine Use Burden with Treatment:

Most people who smoke want to quit.¹⁰ Rhode Island offers free, effective, customized, and confidential help for adults and youth interested in quitting or reducing tobacco/nicotine use:

QuitNowRI

The Rhode Island Nicotine Helpline

- Recommended for adults ages 18+
- To learn more, scan or visit:

QuitNowRI.com

QuitNowRI



My Life, My Quit™

- Recommended for youth ages 13 to 17
- To learn more, scan or visit:

mylifemyquit.com

MY LIFE MY QUIT.



Smoking-Caused Monetary Costs for Rhode Island per Year¹

\$744 million

Annual healthcare costs

\$233.0 million

Medicaid costs

\$1.1 billion

Losses in productivity

References:

- 1 Campaign for Tobacco-Free Kids. [The Toll of Tobacco in Rhode Island](#).
- 2 U.S. Department of Health and Human Services. [Eliminating Tobacco-Related Disease and Death: Addressing Disparities — A Report of the Surgeon General](#).
- 3 Centers for Disease Control and Prevention. [Smoking and Tobacco Use](#).
- 4 Centers for Disease Control and Prevention. [The Health Consequences of Smoking — 50 Years of Progress: A Report of the Surgeon General](#).
- 5 Rhode Island Department of Health. Center for Health Data Analysis. [2023 Youth Risk Behavior Survey](#).
- 6 Park-Lee E, Jamal A, Cowan H, et al. [Notes from the Field: E-Cigarette and Nicotine Pouch Use Among Middle and High School Students — United States, 2024](#).
- 7 Centers for Disease Control and Prevention. [E-Cigarette Use Among Youth](#).
- 8 U.S. Food & Drug Administration. [Want to Quit Smoking? FDA-Approved and FDA-Cleared Cessation Products Can Help](#).
- 9 Rhode Island Department of Health. Center for Health Data Analysis. [2024 Behavioral Risk Factor Surveillance System](#).
- 10 Babb S, Malarcher A, Schauer G, Asman K, Jamal A. [Quitting Smoking Among Adults—United States, 2000–2015](#).

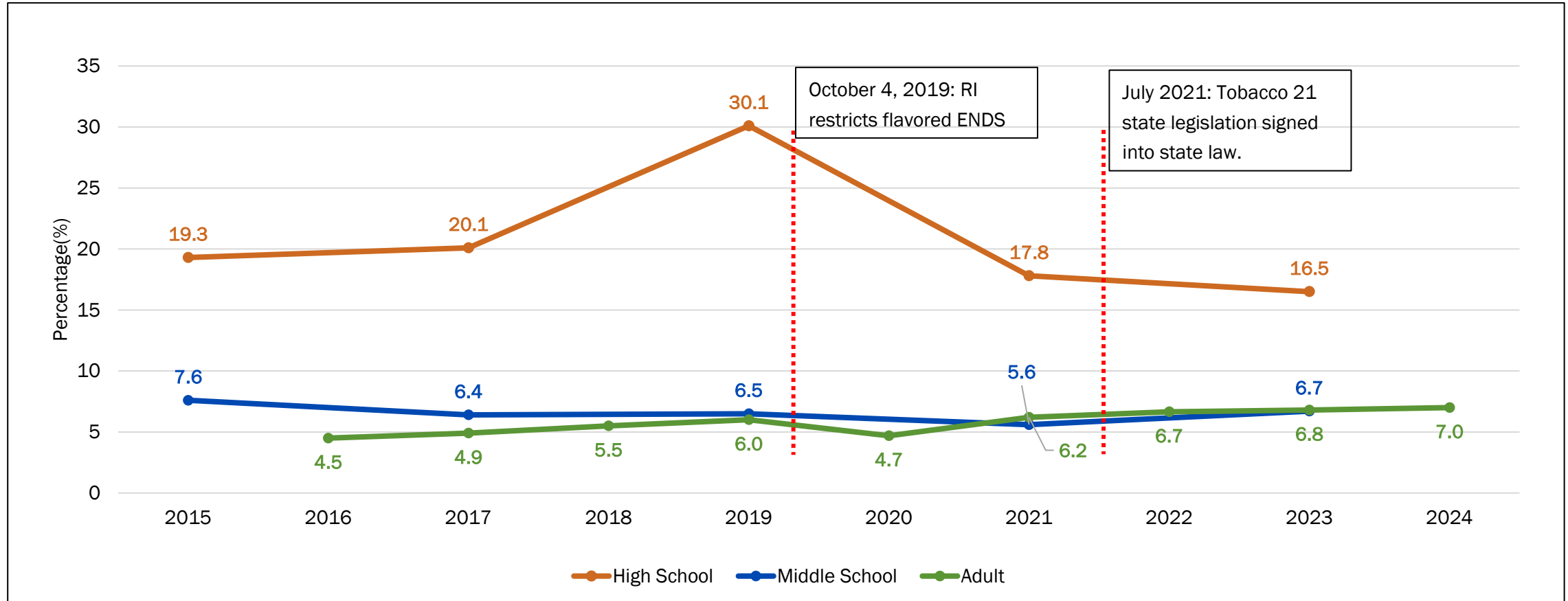
This information was last updated December 2025



Electronic Nicotine-Delivery Systems (ENDS) Rhode Island Use Report



Rhode Island: Current ENDS Use*, 2015-2024



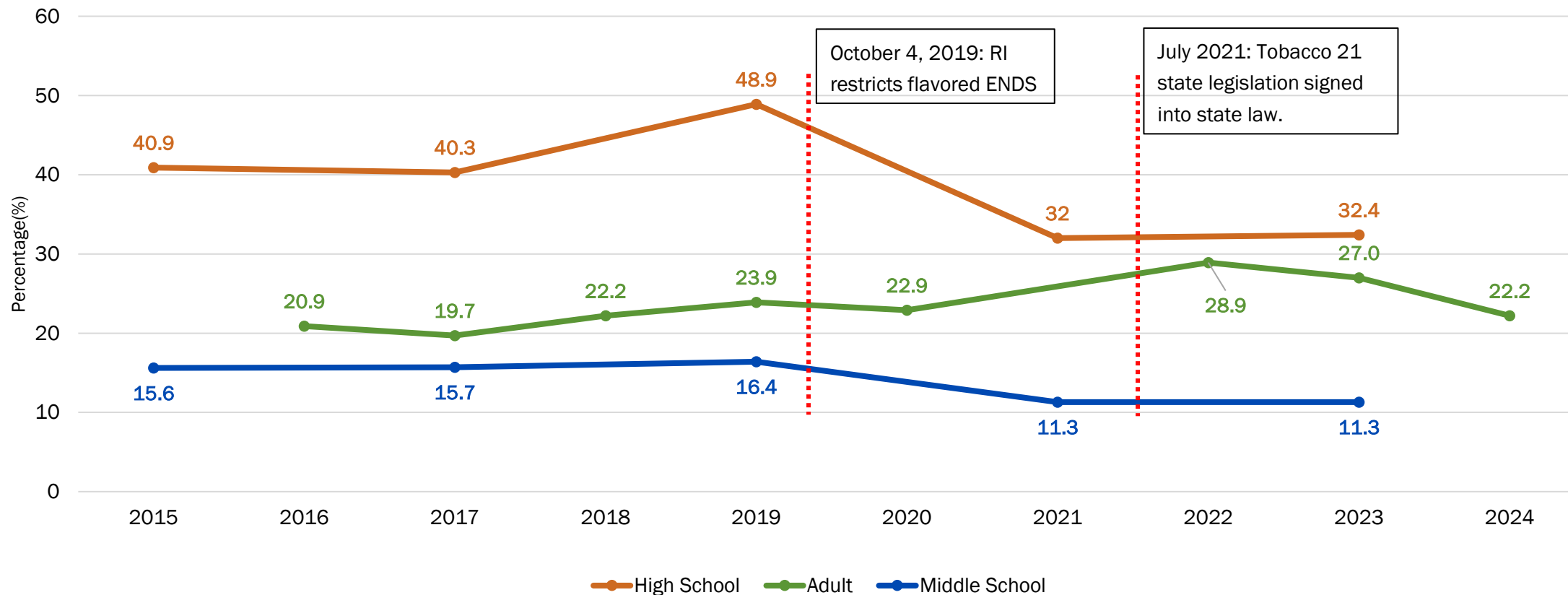
2015-2023 Rhode Island Youth Risk Behavior Survey (middle and high school) ; 2015-2024 Rhode Island Behavioral Risk Factor Surveillance System (ages 18+)

*Used an Electronic Nicotine Delivery System (ENDS) (e-cigarette) product at least one day in the 30 days before survey.

- In 2023, 95% of high school students who currently used e-cigarettes used flavored products in Rhode Island.
- Current ENDS use among high school students peaked in 2019 at 30.1% and then started declining. Following Rhode Island’s 2019 flavored e-cigarette restrictions, the rate of high school students who currently used e-cigarettes decreased by 45.1%, from 30.1% in 2019 to 16.5% in 2023.



Rhode Island: People Who Ever Used ENDS*, 2015-2024



2015-2023 Rhode Island Youth Risk Behavior Survey (middle and high school); 2015-2024 Rhode Island Behavioral Risk Factor Surveillance System (ages 18+)

*Used an Electronic Nicotine Delivery System (ENDS) (e-cigarette) product one or more times in life.

- In 2023, 95% of high school students who used e-cigarettes used flavored products in Rhode Island.
- Following Rhode Island's flavored e-cigarette restrictions, the rate of high school students who ever used e-cigarettes decreased by 33.7%, from 48.9% in 2019 to 32.4% in 2023.

