

March 22, 2021

Dear Chairperson Bynum and Honorable Members of the Oregon Legislative Assembly,

On behalf of our members in Oregon, Americans for Nonsmokers' Rights (ANR) respectfully requests to **protect the Oregon Clean Indoor Air Act** and to keep public health protections strong in the Beaver State for 100% smokefree indoor spaces, free from tobacco and marijuana smoke and vape. To be clear, ANR is not anti-marijuana; we are pro-smokefree air and suggest that people smoke or vape in ways that do not harm others/nonsmokers.

While there are many good aspects to HB3112, ANR has three major concerns about this new marijuana/cannabis bill: 1) the threat of weakening strong public health protections associated with 100% smokefree environments, 2) the creation of a new class of workers that would have to sacrifice their health for a paycheck, and 3) misinformation about ventilation as a protective factor. In addition, given the current public health concerns over the spread of COVID-19, which attacks both the cardiovascular and respiratory systems, we strongly suggest maintaining 100% smokefree and vape-free environments to protect workers and citizen's lung health by preventing increased susceptibility to viruses like COVID-19.

### **Background**

ANR is a national, public health advocacy organization established in 1976 to protect nonsmokers' from exposure to the hazards of secondhand tobacco smoke. In recent years, as tobacco products have changed and the science has grown, ANR expanded its mission to prevent nonsmokers' exposure to secondhand tobacco and marijuana smoke and from secondhand aerosol (also referred to as vapor) from electronic smoking devices.

**Secondhand smoke from combusted marijuana** contains fine particulate matter and is a form of indoor air pollution, which can be breathed deeply into the lungs and can cause lung irritation, asthma attacks, and makes respiratory infections more likely.<sup>1,2</sup> Exposure to fine particulate matter can exacerbate health problems especially for people with respiratory conditions like asthma, bronchitis, or Chronic Obstructive Pulmonary Disease (COPD).<sup>3,4</sup>

The current body of science shows that both tobacco and marijuana smoke have similar chemical composition and suggests that they may have harmful cardiovascular health effects, such as atherosclerosis (partially blocked arteries), heart attack, and stroke.<sup>5</sup> In several peer-reviewed research studies, tobacco and marijuana smoke have both been shown to impair blood vessel function<sup>6</sup> and secondhand marijuana smoke contains many of the same carcinogens and toxic chemicals as secondhand tobacco smoke, including acetaldehyde, ammonia, arsenic, benzene, cadmium, chromium, formaldehyde, hydrogen cyanide, isoprene, lead, mercury, and nickel.<sup>7</sup>

In 2009, the California Office of Environmental Health Hazard Assessment added marijuana smoke to its Proposition 65 list of carcinogens and reproductive toxins, also known as the Safe Drinking Water and Toxic Enforcement Act of 1986. It reported that at least 33 individual constituents present in both marijuana smoke and tobacco smoke are Proposition 65 carcinogens.<sup>8</sup>

## Concerns

### **1) Threat of weakening strong public health protections associated with 100% smokefree environments**

Allowing marijuana smoking and vaping in venues that are currently required to be 100% smokefree would weaken the strong Oregon Clean Air Act and roll back longstanding public health protections that are known to protect workers and the public from exposure to the toxins, carcinogens, volatile organic compounds, and fine particulate matter in secondhand smoke and vape.

The proposed cannabis onsite consumption businesses must adequately address public health and the necessity to protect all people from exposure to secondhand marijuana smoke or secondhand aerosol from electronic smoking devices such as e-cigarettes, vape pens, e-marijuana products, and other devices that allow the vaping of THC oils.

Current marijuana/cannabis rules for the state allow local jurisdictions to pass stronger laws. As of **January, 2021, 774 localities and 29 states/territories/commonwealths restrict marijuana use in some or all smokefree spaces.** Of these, 417 localities and 17 states/territories/commonwealths prohibit smoking and vaping of recreational and medical marijuana in one or more of the following venues: non-hospitality workplaces, restaurants, bars, and/or gambling facilities.<sup>9</sup> Therefore, ANR strongly recommends that Oregon also not permit indoor marijuana/cannabis smoking and vaping in retailers and microbusinesses, nor at temporary special events, if they are located in mixed-use or attached buildings, even if separate ventilation systems are installed (see #3 below).

### **2) Creating a new class of unprotected workers sacrificing their health for a paycheck**

If marijuana smoking is brought indoors, a new class of hospitality workers working in the marijuana industry will be exposed to secondhand smoke at a much higher rate than the general public and will suffer the negative health effects of that exposure. This is a public health issue and will affect everyone in the community if an entire new class of unprotected workers has to sacrifice their health for a paycheck.

For example, an August 2018 study indicates that particle concentrations from dabbing and vaporizing marijuana can create levels of indoor air pollution that are hazardous to human health, in the absence of combustion. Particulate exposure at these concentrations can cause cardiovascular and respiratory disease.<sup>10</sup>

### **3) Ventilation is not a solution to secondhand tobacco or marijuana smoke pollution**

The American Society for Heating, Refrigeration, and Air-Conditioning Engineers (ASHRAE), the standard setting body for the HVAC industry, affirms that mechanical solutions like **ventilation and other air cleaning technologies cannot control for the health hazards associated with secondhand smoke.** ASHRAE bases its ventilation standard (62.1) for acceptable indoor air quality on an environment that is completely free from secondhand tobacco smoke, **secondhand marijuana smoke**, and emissions from electronic smoking devices.<sup>11</sup>

No amount of ventilation or filtering can eliminate the health risks of secondhand smoke either from tobacco or marijuana. Even sophisticated ventilation systems in hospitality settings do not protect people from the health impact of secondhand smoke, marijuana secondhand smoke, and secondhand vapor emissions from e-cigarettes. False claims of being able to “clean” the air by filtration or using other chemicals are not a substitute for clean air. This is affirmed by all leading health agencies, including the Office of the Surgeon General.

## **Conclusion**

**ANR does not question the choices of individuals to use legalized marijuana. We’re advocating for the rights of nonsmoking workers and individuals to breathe smokefree air.** ANR suggests that people smoke or vape in ways that do not harm others, including workers. Regardless of how one feels about marijuana use, no one should have to breathe secondhand marijuana smoke at work, in shared structures, or in public places.

One solution could be to allow use of edibles and “topicals” indoors and address smoking of marijuana/cannabis to how tobacco smoking/vaping is addressed in Oregon. As an alternative to smoking indoors, businesses could encourage patrons to take it outside to areas that are obstructed from public view, preferably not where people gather nor where minors are present.

If communities choose to allow on-site consumption, we recommend that only businesses **located in freestanding buildings that are not multi-use** be permitted to allow indoor smoking and vaping so that workers, residents, and patrons in attached businesses and residences are not exposed to secondhand smoke. Creating indoor spaces for marijuana smoking and vaping at the expense of public health is not the only option.

If Oregon is committed to protecting the public health and safety, then it must support maintaining smokefree indoor air rules that protect worker and patron health and safety and help minimize susceptibility to COVID-19, which attacks both the cardiovascular and respiratory system. Please feel free to contact me if you have any questions, comments, or feedback.

Sincerely,



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President and CEO  
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*Americans for Nonsmokers’ Rights is a national, member-based, not-for-profit organization based in Berkeley, CA that is dedicated to helping nonsmokers breathe smokefree air since 1976.*

Included: Smokefree is Smokefree fact sheet  
State and Local Laws Prohibiting Smoking AND Vaping Marijuana

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<sup>1</sup> Hillier, FC.; et al. "Concentration and particle size distribution in smoke from marijuana cigarettes with different  $\Delta^9$ -tetrahydrocannabinol content." *Fundamental and Applied Toxicology*. Volume 4, Issue 3, Part 1, June 1984, Pages 451-454.  
<http://www.sciencedirect.com/science/article/pii/0272059084902021>

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<sup>2</sup> "Air and Health: Particulate Matter." National Environmental Public Health Tracking Network, U. S. Environmental Protection Agency. <http://ephtracking.cdc.gov/showAirHealth.action#ParticulateMatter>

<sup>3</sup> ibid

<sup>4</sup> Brook, R.D.; et al. Particulate matter air pollution and cardiovascular disease: An update to the scientific statement from the American Heart Association. *Circulation*. 2010; 121: 2331-78. <https://www.ncbi.nlm.nih.gov/pubmed/20458016>

<sup>5</sup> Springer, M.L.; Glantz, S.A. "Marijuana Use and Heart Disease: Potential Effects of Public Exposure to Smoke," University of California at San Francisco. April 13, 2015.

<https://tobacco.ucsf.edu/sites/tobacco.ucsf.edu/files/u9/MSHS%20fact%20sheet%20for%20CA%204-13-15.pdf>

<sup>6</sup> Wang, X., et al., "Brief exposure to marijuana secondhand smoke impairs vascular endothelial function" (conference abstract). *Circulation* 2014; 130: A19538. [http://circ.ahajournals.org/content/130/Suppl\\_2/A19538.abstract](http://circ.ahajournals.org/content/130/Suppl_2/A19538.abstract)

<sup>7</sup> Moir, D., et al., A comparison of mainstream and sidestream marijuana and tobacco cigarette smoke produced under two machine smoking conditions. *Chem Res Toxicol* 21: 494-502. (2008). <http://www.ncbi.nlm.nih.gov/pubmed/18062674>

<sup>8</sup> "Evidence on the Carcinogenicity of Marijuana Smoke." Reproductive and Cancer Hazard Assessment Branch, Office of Environmental Health Hazard Assessment, California Environmental Protection Agency. August 2009.

[http://oehha.ca.gov/prop65/hazard\\_ident/pdf\\_zip/FinalMJsmokeHID.pdf](http://oehha.ca.gov/prop65/hazard_ident/pdf_zip/FinalMJsmokeHID.pdf)

<sup>9</sup> ANR Foundation U.S. Tobacco Control Laws Database© <https://no-smoke.org/wp-content/uploads/pdf/marijuana-smokefree-laws-map.pdf>

<sup>10</sup> Jaques, P, Zalay, M, Huang, A, Jee, K, Schick, SF "Measuring Aerosol Particle Emissions from Cannabis Vaporization and Dabbing", Proceedings of the 15th Meeting of the International Society for Indoor Air Quality and Climate. July 22-27, 2018. Philadelphia, PA.

<sup>11</sup> ANSI/ASHRAE Standard 62.1-2013, Addenda 2015 - Ventilation for Acceptable Indoor Air Quality. American Society of Heating, Refrigerating, and Air-Conditioning Engineers, Inc. [https://ashrae.iwrapper.com/ViewOnline/Standard\\_62.1-2016](https://ashrae.iwrapper.com/ViewOnline/Standard_62.1-2016)