



June 18, 2024

Regulatory Reform Committee
via email at mwingrove@house.mi.gov

Dear esteemed representatives,

We write to express our significant concerns regarding two recently introduced bills, HB 5554 (Harris) and HB 5555 (Farhat). The National LGBTQI+ Cancer Network works to improve the lives of LGBTQI+ cancer survivors and those at risk by: 1) educating the LGBTQI+ community about our increased cancer risks and the importance of screening and early detection; 2) training health care providers to offer more culturally-competent, safe and welcoming care; and 3) advocating for LGBTQI+ survivors and communities regarding issues of health and quality of life as they relate to cancer risk. It is under the auspices of this third prong of our mission that we write to you today.

The disparities in menthol and flavored tobacco use among LGBTQI+ communities, young people, and communities of color are stark and urgent. Our current understanding of these disparities is the culmination of decades of research and advancement of public health, both nationally and in Michigan specifically. The Williams Institute estimates that 4% of Michigan residents identify as LGBTQI+, a number reflective of LGBTQI+ populations in the nation in general. Members of LGBTQI+ communities are particularly represented among younger generations, with a full third of Michigan's LGBT population between the ages of 18 and 24.

As a community, we are painfully and personally aware of how "loopholes" and "exemptions" exacerbate health disparities and prioritize the health of some over the health of all. Over 80% of Black smokers and 42.9% of LGBTQI+ smokers smoke menthols because the tobacco industry targeted our communities for decades with advertising and promotions. Today, menthol is the only flavored cigarette still allowed to be sold in our country. As a result, Black Americans and LGBTQI+ Americans die at higher rates than other groups from tobacco-related diseases like cancer, heart disease, and stroke.

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A common misconception about hookah is that the smoke is purified when it passes through the water-filled pipe. In reality, hookah smoke contains high levels of toxins, including carbon monoxide, heavy metals, nicotine, and other carcinogens, even after passing through water. The water filtration process actually makes the harmful particles smaller and more likely to reach deeper into the lungs than cigarette smoke.

Another misconception is that using hookah does not lead to tobacco addiction. The tobacco used in hookah contains nicotine, the addictive stimulant found in all tobacco products. Studies show that a hookah user is twice as likely to become a cigarette smoker compared to someone who does not smoke hookah.

Research shows that uneven smoke-free protections drive inequities in secondhand smoke exposure for some population groups. I am concerned that your proposals (HB 5554 and HB 5555) will exacerbate these inequities and expose more people, workers, and patrons—especially people of color and young people—to the toxic chemicals in secondhand smoke.

Let's keep our state moving forward by offering more protections for all, not by weakening protections for some.

Thank you for your attention to this critical matter.

Sincerely,

Kara Hurvitz, Esq.
Policy Counsel and Manager
National LGBTQI+ Cancer Network

The National LGBTQI+ Cancer Network works to improve the lives of LGBTQI+ cancer survivors and those at risk by educating the LGBTQI+ communities about our increased cancer risks; training healthcare providers; and advocating for LGBTQI+ engagement in mainstream cancer organizations. Learn more at cancer-network.org.