

**Fourth Session - Fortieth Legislature**  
**of the**  
**Legislative Assembly of Manitoba**  
**Standing Committee**  
**on**  
**Human Resources**

*Chairperson*  
*Mr. Jim Rondeau*  
*Constituency of Assiniboia*

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**Fortieth Legislature**

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**LEGISLATIVE ASSEMBLY OF MANITOBA**  
**THE STANDING COMMITTEE ON HUMAN RESOURCES**

**Monday, September 14, 2015**

**TIME – 6 p.m.**

**LOCATION – Winnipeg, Manitoba**

**CHAIRPERSON – Mr. Jim Rondeau (Assiniboia)**

**VICE-CHAIRPERSON – Mr. Rob Altemeyer (Wolseley)**

**ATTENDANCE – 11 QUORUM – 6**

*Members of the Committee present:*

*Hon. Mr. Allum, Hon. Mses. Crothers, Marcelino, Wight*

*Mr. Altemeyer, Mrs. Driedger, Ms. Lathlin, Messrs. Martin, Rondeau, Smook, Wishart*

**APPEARING:**

*Hon. Jon Gerrard, MLA for River Heights*

**PUBLIC PRESENTERS:**

*Ms. Caroline Martel, Nicoventures*

*Ms. Kathy Martin, private citizen*

*Mr. Rob Cunningham, Canadian Cancer Society–National Office*

*Ms. Charlene Haste, VapeMate*

*Mr. Eden Sorrell, TheraVape*

*Mr. Murray Gibson, MANTRA–Manitoba*

*Tobacco Reduction Alliance*

*Ms. Marcia Anderson DeCoteau, Winnipeg Regional Health Authority*

*Mr. Scott Jocelyn, Manitoba Restaurant and Foodservices Association*

*Mr. Steven Stairs, private citizen*

*Mr. Shaun Croatto, private citizen*

*Mr. Jim Chabai, Vapetastic*

*Mr. Clayton Olson, private citizen*

*Ms. Jennifer Vasas, private citizen*

**WRITTEN SUBMISSIONS:**

*Melanie Koncur, private citizen*

*Gerald Dales, private citizen*

*Christopher Britton, Black Tie Vapour*

**MATTERS UNDER CONSIDERATION:**

*Bill 30–The Non-Smokers Health Protection Amendment Act (E-Cigarettes)*

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**Mr. Chairperson:** Good evening. Will the Standing Committee on Human Resources please come to order.

Our first item of business, the election of a Vice-Chairperson. Are there any nominations?

**Hon. Flor Marcelino (Minister of Multiculturalism and Literacy):** I would like to nominate Mr. Rob Altemeyer.

**Mr. Chairperson:** Are there any other nominations?

Hearing no other nominations, Mr. Altemeyer is elected Vice-Chairperson.

This meeting has been called to consider Bill 30, The Non-Smokers Health Protection Amendment Act (E-Cigarettes).

I would like to remind that further meetings of the Standing Committee on Human Resources will be scheduled to continue the consideration of Bill 30.

As per the agreement between the House leaders, presenters have been scheduled and assigned to present at one of these committee meetings. Tonight we will hear from 15 presenters registered to speak on Bill 30, and you will have the list of those presenters before you.

On the topic of determining the order of public presentations, I will note that we do have out-of-town presenters in attendance. They are marked with an asterisk on the list. With this consideration in mind, then, in what order does the committee wish to hear the presentations?

**Mrs. Myrna Driedger (Charleswood):** Mr. Chair, as is our usual protocol, perhaps if we could hear the out-of-town members first and then revert back to those in town.

**Mr. Chairperson:** Is that agreed? [*Agreed*] That's how we'll do it.

Before we proceed with presentations, we do have a number of other items and points of information to consider.

First of all, if there's anyone in attendance who would like to make a presentation this evening, please register with the staff at the entrance of the room. They're at the back table. Also, for the information of all presenters, while written versions of presentations are not required, if you're going to accompany your presentation with written material we ask that you provide 20 copies. If you need help with photocopying, please speak with the staff at the back of our—at the back table. Twenty copies are required, but you do not have to have a written presentation.

As well, in accordance to our rules, there's a time limit of 10 minutes that has been allocated for presenters and another five minutes allowed for questions from the committee. I will give people a two-minute warning when it hits about eight minutes and I will cut off questions when it hits five minutes.

If a presenter is not in attendance when their name is called, they will be dropped to the bottom of the list. If the presenter is not in attendance when their name is called a second time, they will be removed from the presenters' list.

The following written submissions on Bill 30 have been received and distributed to committee members: that's Melanie Koncur, Gerald Dales, Christopher Britton—that's from the Black Tie Vapour.

Does the committee agree to have these documents appear in Hansard as a—as part of the transcript for this meeting? *[Agreed]*

Prior to proceeding with public presentations, I'd like to advise members of the public regarding the process for speaking in committee. The proceedings of our meetings are recorded in order to provide a verbatim transcript. Each time someone wishes to speak, whether it be an MLA or a presenter, I have to say the person's name. This is the signal for the Hansard recorder to turn the mics on or off. So please wait to be acknowledged.

Thank you for your patience. We will now proceed with the public presentations.

The first—ah, there we are. The first presenter is Caroline Martel from Nicoventures.

You're here? Do you have something to hand out?

Ladies? We'll have the pages do that, and while she is, you're welcome to start whenever you'd like, Ms. Martel.

**Ms. Caroline Martel (Nicoventures):** Thank you.

Mr. Chair, Minister, members of the committee. Thank you for this opportunity to discuss Bill 30.

To start, a few words on Nicoventures. Nicoventures is engaged in the development and sale of innovative and high-quality vaping products. At this time our products are sold over the counter in the UK and on Internet, but are not yet available in Canada. Nicoventure will wait for regulatory requirements to be in place before we enter a market.

In my presentation I will often refer to data and studies from the UK. They have by far the most experience with this new product category, having been the first to regulate them. This gives the UK Department of Health the most experience in this field.

Before we discuss specifics of Bill 30, we would like to underline a few important facts.

Fact No. 1, health risks associated with smoking: There are important health risks associated with smoking, and the best way to avoid those risks is to not smoke at all. However, the fact remains that after all these years of regulating and taxing, both federal and provincial governments, there is still a hard-core base that is difficult to convince to let go of tobacco.

Fact No. 2, nicotine is not the cause of disease: Nicotine is addictive, but is not the cause of cancer or other illnesses associated with tobacco. The UK Medicines and Healthcare products Regulatory Agency assessed nicotine and stated, and I quote: There is a large body of evidence that medicinal nicotine in current licensed forms is not a significant risk factor for cardiovascular events and does not cause cancer or respiratory disease.

Fact No. 3, vaping products could be among the most significant health innovations of our time: According to the head of the UK Royal College of Physicians, Tobacco Advisory Group, and Professor John Britton, and I quote: The potential benefits of electronic cigarettes lie in their role as a reduce-hazard competitors for cigarettes.

This statement reflects the vast majority of independent scientific studies that reached the exact same conclusion. Quoting the more than 50 leading public health experts who wrote to the director-general of the World Health Organization in support of tobacco harm reduction products such as vaping products, this passage articulates well their benefits, and I quote: Tobacco harm reduction allows

people to control the risk associated with taking nicotine and to reduce it down to very low or negligible levels. These products could be among the most significant health innovations of the 21st century, perhaps saving hundreds of millions lives.

\* (18:10)

But more importantly, these experts exhorted the WHO to resist the urge to control and suppress vaping products as tobacco products, arguing instead for regulation that is fit for purpose.

More recently, an expert independent review published on August 19th by the British government through Public Health England, highlighted the following five key findings: (a) e-cigarettes contribute to falling smoking rates among adults and young people. The current best estimate is that e-cigarettes are around 95 per cent less harmful than smoking. The highest successful quit rates are now seen among smokers who use e-cigarettes; point (c), there is no evidence so far that e-cigarettes are acting as a route into smoking for children or non-smokers; (d) almost all of the 2.6 million adults using e-cigarettes in Great Britain are current or ex-smokers, most of whom are using the device to help them quit smoking or to prevent them from going back to cigarettes; (e) finally, the review raises concern that increasing numbers of people think e-cigarettes are equally or more harmful than smoking. This brings me directly to fact No. 4: The general population, including smokers, is un- or ill-informed about the product.

Another key finding published by Public Health England in the same review stated that, and I quote, Nearly half the population don't realize e-cigarettes are much less harmful than smoking. Most individuals believe that vaping products could be as harmful to their health as smoking tobacco. In many cases, this is deterring them from switching to a substantially safer product. Canadians and Manitobans need to be informed and educated on this new product category. Without allowing adequate and fact-based advertising, the void will persist. A certain level of communication and exposure to the product is required if we are, in fact, to encourage smokers to move away from tobacco.

Fact No. 5: Second-hand vapour is not second-hand smoke. Tobacco smoke contains a vast cocktail of elements that are at the root of many diseases. On the other hand, vaping products emit a smoke-like vapour and consequently some people mistakenly believe that their vapour has the same

risk profile as that of second-hand cigarette smoke. Studies show that vaping products are not only a much safer alternative to tobacco products but that secondary vapour is to a greater degree even less harmful than secondary smoke.

A systematic review of vaping product vapour compositions published in 2014 concluded that, and I quote: Current stage of knowledge about chemistry and liquids and aerosols associated with e-cigarettes indicate that there is no evidence that vaping produces inhalable exposure to contaminants of the aerosol that would warrant health concerns by the standards that are used to ensure safety.

As the evidence demonstrates, vaping products do not expose users to any significant level of toxicant. Given the extremely low level of exposures to users, risks to bystanders is likely to be entirely insignificant. Indeed, a wide range of authorities have concluded that second-hand vapour from vaping products posing negligible risk to the health of others. And as summarized in the Public Health England-commissioned report, and I quote: They could be reduced further still by applying appropriate product standards.

Given such potential, it is critical that vaping products be regulated in a way that enables responsible growth. In this regard, both the Canadian and Manitoba governments have a role to play. We believe that the most appropriate regulatory framework is one that puts product quality and consumer safety first.

Now we'll offer our comments on specific points of the proposed legislation. First and foremost we strongly disagree that vaping products be assimilated to tobacco products and therefore be legislated as such. Vaping products are not a tobacco product. They don't contain tobacco, don't have the same ill effects, and for those reasons, they should be dealt with in a separate stand-alone regulatory regime.

On prohibiting the sale of e-cigarettes to children, of course, we are in agreement with this proposition.

Under use in enclosed public spaces, the key word here is public. Although we agree, we would like to reiterate that medical experts in numerous studies have shown that vaping products are not only a much safer alternative to tobacco products but that secondary vapour presents a much lower potential toxicity as well as an order of magnitude lower of particle emissions and nicotine concentrations.

On the use in designated rooms and areas for smoking, we believe that forcing individuals to vape in the same rooms or designated areas as smokers would be extremely counterproductive. Those who are trying to move away from tobacco should not be forced into a situation where they would be tempted to revert to their old habits. This would be the equivalent of holding an AA meeting at the pub.

On customers using e-cigarettes to test or sample products, e-cigarettes should be available where cigarettes are currently being sold and beyond. Even if we support the opportunity for consumers to be able to test a product prior to purchasing it, we believe it should extend not only to shops where the sale of e-cigarettes is the main business activity, but also to any other point-of-sale. As non-tobacco products, it would be appropriate to have e-cigarettes widely available, including in pharmacies and other points where other nicotine-containing products are sold. Bottom line: the approach should facilitate a switch, not be an obstacle course.

On the addition of restrictions on display and advertising: as vaping products are a new product category and that Manitoba should be seeking to greatly reduce health risks and promote harm reduction to current tobacco users, communication to consumers of tobacco products is essential. Therefore, we recommend (1) no lifestyle advertising or promotion; (2) in order to educate and give them the opportunity to make an informed decision, we ask that information, promotion or display at point-of-sale be allowed and even encouraged towards adult tobacco users; (3) we request that these products not be hidden at point-of-sale, but rather be visible; finally, we would suggest allowing reasonable signage freedom in stores in order to better inform consumers.

Generally, because of the enormous potential that vaping products have with helping smokers reduce and eventually abandon tobacco, Manitoba should be looking at a regulatory regime that will assist if not promote this conversion. This should be done with the smoker in mind as a priority, while still protecting the youth. They should be reminded every time they go buy a pack of cigarettes that a substantially less harmful alternative is available right there. In the end, if this is a day a smoker is pondering the thought of moving away from tobacco, let's make it easier for him or her to quit.

In conclusion, as the Manitoba Legislature is thriving to further reduce the smoking rate and save

lives, it should be encouraging Manitobans to switch to vaping products. Nicoventures believes that, if appropriately regulated, vaping products can have a positive impact for smokers wishing to quit, reduce smoking or use a safer alternative to tobacco products.

We appreciate the opportunity to have been able to present these few points before the committee. I am now ready to answer questions they members may have.

**Mr. Chairperson:** Thank you very much. I am now open for questions from members.

**Hon. Deanne Crothers (Minister of Healthy Living and Seniors):** Ms. Martel, thank you very much for coming and sharing your perspective. Certainly well researched, that's for sure. I just—I want to just make a couple of quick points. I listened to everything that you had to say and I certainly understand your perspective.

In terms of designing—for lack of a better word—this legislation, we really tried to find a balance between keeping children in mind, which is—which was our first concern, but also acknowledging the fact that there are people who use vaping as a way to quit smoking, which is, of course, a positive thing. And that's why we're the only province that's brought forward a piece of this legislation which allows vaping sampling to take place in vape shops. There's no other province that's done that. We're doing that because we recognize that there are people that are relying on this and moving away from cigarettes to vaping. So I thank you for your concerns and for sharing them with us.

And also, finally, I just want to say, this is not a ban on this product. You can still buy these things at convenience stores and we're not preventing people from being able to access those products.

**Mr. Chairperson:** Ms. Martel, do you have—if you want to respond, you can.

**Ms. Martel:** Well, we understand the concerns. But we also want to make it clear that this product, even if you can test it in vape shops, still needs to be widely available. But I think you understand this concept.

**Hon. Jon Gerrard (River Heights):** Thank you very much for your presentation. You make the point in your presentation that there's no meaningful data

to support the concerns about it being a gateway to tobacco use. Could you elaborate a little bit more on the evidence that there's no issue here? *[interjection]*

**Mr. Chairperson:** Ms. Martel. Sorry, it's a strange system.

**Ms. Martel:** I'm sorry.

So the evidence—and you probably have seen in some media, some surveys, that came out saying that the youth are trying e-cigarettes—but you—we have to pay attention to when and how this data is presented. So one of the elements that it's often a one point in time, so they probably have tried, but we're not seeing any continued use of these products among the youth.

\* (18:20)

So the most recent one I've seen from out of the US said that the young people were trying the product, but some of them were smokers prior to trying the product. So, if they are to, in fact, try these products, they should have at least a safer alternative. But it is not, from the data that we have found, something that they keep on, so most of the time there are some users, but they are only one-time users.

**Mrs. Driedger:** Thank you, Ms. Martel, and thank you for the presentation and for the, you know, the extent of the information that you have pulled together here. It will be very useful in us looking at this.

I do want to ask one question. The types of flavours that are available, like, a lot of the, you know, the flavours seem to be geared to what might appeal to children. Can you tell me if there are a lot of adults that choose to use some of these, you know, whether it's watermelon or whatever, some of those products, you know, the liquids are that have names that would appeal to a child, are adults using those, or what's the point in bringing forward some of those particular flavours?

**Ms. Martel:** Yes, the flavour component is really an important aspect of this product category. Smokers—and we've seen cherry to watermelon, as you mentioned, the diversity is one of the elements that attracts smokers to try these products. So they'll often start on a tobacco, from our perspective and our clientele, from what we've seen, they'll often start on a tobacco taste but soon enough want to move away from that. So the idea for them is, since I'm moving away from tobacco, eventually they want to move

away from the taste and try to find something else that would keep them away from going back to cigarettes.

**Mr. Chairperson:** Thank you.

Mr. Allum, with a very quick question and a quick response, please.

**Hon. James Allum (Minister of Education and Advanced Learning):** Thank you so much for your presentation.

Could you just tell us a little bit about Nicoventures? I couldn't help but notice that you have a UK mailing address and you're a wholly owned subsidiary of British American Tobacco, so could—just quickly.

**Ms. Martel:** So Nicoventures is a wholly owned subsidiary of British American Tobacco but is managed independently from the tobacco business. At this time, their focus is really to develop high-quality vaping products to adult consumers, so to current smokers. Products are available in the UK but, as I mentioned earlier, are not available in Canada yet.

**Mr. Chairperson:** Thank you very, very much, Ms. Martel, for a very good presentation. Thank you.

Now we'd like Kathy Martin, private citizen, please. Kathy—you're not Kathy.

Thank you. Kathy, do you have a presentation to present?

**Ms. Kathy Martin (Private Citizen):** I do.

**Mr. Chairperson:** Ladies?

Once you hand it to them, you may start whenever you feel comfortable.

**Ms. Martin:** Good evening, and thank you for the opportunity to speak with you today about Bill 30.

I'm Kathy Martin, and three weeks from now I will be celebrating a special anniversary. It will be five years since the day I became a vaper. I smoked a pack and a half a day for 33 years, since I was 15. I made numerous attempts to quit using approved and some unapproved methods, and every single attempt failed. This is now the longest time since I started smoking that I have been tobacco-free.

When I started, I was a dual user of a cigalike device. It was not enough for me to switch over completely. There were no vape shops back then in

Winnipeg, only online vendors. So I asked for advice on an e-cigarette forum and purchased another kit. That made all the difference and smoking became a thing of the past for me.

When I first received my e-cigarette kit, I took to the Internet to do research and that began a journey that continues to this day. I learned that e-cigarettes have been around since 2003 and that Health Canada put out an advisory in 2009 asking that people not use e-cigarettes. There was no specific law I could find that said they were illegal to use in Canada.

I read articles and studies every day about who is using e-cigarettes, what they contain and what, if any, harm they pose to those who use them and how they work. In five years, I have seen the growing body of evidence that these products are 95 to 99 per cent safer than tobacco use, on par with approved nicotine patches and gums and that approved vapour poses no risk to bystanders.

I have seen the number of young smokers who have tried e-cigarettes increase, but the numbers who continue on with daily use has stayed at an incredibly low number. I have seen no evidence of a gateway to smoking from vaping. I've seen e-cigarettes seek to normalize vaping, not smoking. I have seen the numbers of vapers go from hundreds to now over 350,000 in Canada and over 10 million in the world. I did and continue to do my due diligence on e-cigarette technology today, and I am certain that by switching over to my e-cigarette, my personal vaporizer, I have saved my own life.

For five years, I have read over 1,000 studies that have been done on e-cigarettes, its ingredients and on its use. I have studied the statistics and numbers put out by our governments, health agencies and tobacco control associations. Others presenting here to this committee may give you reams of data on why e-cigarettes are harmful. I can certainly cite science that refutes every one of their points. But that doesn't get us anywhere.

Most of these same organizations are also against any nicotine use, are in favour of the quit-or-die approach. They say that vapers are only trading one addiction for another. I hear this kind of thing, and it suggests to me that I should feel bad for using nicotine in any form. The reality is that while many people do completely stop using nicotine with e-cigarettes, some don't. This isn't because they're just an addict or feverishly searching for their next fix. It's because they truly enjoy it, much in the same way a coffee lover enjoys their first cup or a

foodie searches out specific cuisine. Sometimes the things we love come with health risks. Fortunately, the nicotine in e-cigarettes is not what made our former habit so risky and deadly.

So we have a bunch of people who used to love smoking enough to let it kill them. Now, we've found something that we love even more that is far less harmful in vaping. If that sounds like somebody just trading off addictions, you're not paying attention. It isn't nicotine that causes the harm, but rather how the nicotine is delivered. Smoking is the biggest killer by far because we know that it is the chemicals put into tobacco to make it more addictive and the chemicals created by the smoke that creates over 65 carcinogens. People smoke for the nicotine, but they die from the smoke. E-cigarettes are 95 to 99 per cent lower in risk.

Nicotine is like caffeine in many ways. If we were to smoke the coffee bean, we'd have thousands of chemicals produced in the smoke. But the risks disappear when used in a non-combustible form. E-cigarettes, lozenges and patches are all non-combustible products that are significantly lower in risk. Lozenges and patches are also now approved for long-term use. E-cigarettes are probably the greatest public health technology to come along in the last 50 years. They are the first non-combustible product to ever be in a direct competition with cigarettes, but they confound non-smokers, health agencies, governments and tobacco control specialists. They misunderstand because of their perception and misconception of what the product is and how it works. They are judging the book by its cover.

But vapers get it. We study it; we use it, and we get it. We understand that this technology has done for our health, our lives, our families because we could not stop enjoying the very thing that's killing us. Even my daughter understands. She's 10, and she so badly wanted to be here today so that she could yell at the government because she's so angry that they don't understand what e-cigarettes mean to the people who use them and to their families. She's concerned that, because of this bill, her mom may go back to smoking and that other smokers will not be able to switch over and they will die a horrible death. Those are her words, not mine. She's a very smart little girl. She gets it.

\* (18:30)

I have heard it mentioned by the honourable minister that this bill is better than some bills put out

by other provinces, and she's right; in some respects, it is. I agree with her that this adult product should not be sold to minors. But Bill 30 seeks to put a round peg in a square hole. E-cigarettes are not a tobacco product. E-cigarettes should not be lumped into tobacco product legislation; otherwise, other products that contain nicotine, like tomatoes, cauliflower and potatoes, should also be included under this legislation.

Sounds ridiculous to say, but it's true. A product that contains nicotine is not a tobacco product. I ask that e-cigarettes be given a distinct category of their own, separate and apart from tobacco. This bill is a disincentive to those who still smoke and to those who are trying to make the switch over to reduced-harm products. It marginalizes and diminishes the benefits of the harm reduction of e-cigarettes. By putting them in with tobacco products, this bill is saying that e-cigarettes are as harmful and as dangerous as tobacco, which is simply not true.

The consequences of this are great to our public health. Smokers will no longer want to switch over to e-cigarettes because they no longer see the benefit, and they will end up continuing to smoke and dying of smoking-related disease. Businesses should be allowed the choice of whether or not they wish to allow vaping in their establishments as there is no risk to others from second-hand vapour. Businesses are currently allowed to decide whether or not to have scent-free environments. This should be no different.

Advertising of e-cigarettes should be allowed as long as no medical claims are made and they are advertised as an adult product for sale to smokers who wish to switch to a safer alternative.

A tax incentive should be given on e-cigarettes to make them more affordable than traditional cigarettes to encourage people to make the switch.

In closing, vapers are doing what numerous advertisements, taxes and public shaming have demanded: We are trying or have stopped smoking. For the first time we are hopeful, joyful and grateful, because this technology has changed our health and our lives. Vapers have been able to succeed when we so often fail. We come together to celebrate our freedom from a death by tobacco. We've become a vape family, a community, because no one else gets it, and they seek to restrict it or take it away entirely. We support each other, we help each other and we rally for each other because we get it.

I want this committee and our government to get it, to understand that harm reduction with this product is the greatest boon to public health, to understand that e-cigarette technology transforms lives for the better, that they are a vastly less hazardous way of consuming nicotine, and, unlike smoking, vaping has negligible risks or risks that aren't out of line with lifestyle risks we routinely accept, that this is a technology that will allow children to grow up without knowing the premature loss of their parents and loved ones. You need to get it, and you need to change this bill to show that you do.

The choice is yours. The lives are ours, and I welcome any questions you have.

**Mr. Chairperson:** Thank you very much, Ms. Martin.

Is there any questions?

**Ms. Crothers:** Thank you, Ms. Martin, and I just want to congratulate you for being tobacco free. I certainly appreciate your passion and, again, I just want to remind folks here that this is not a ban. We're not preventing people from being able to access this, but I promise if you stay longer, you're going to hear me criticized for the very piece in this legislation that I talked about after the last presenter, which is that we're allowing vape shops to still be able to educate people when they come in, letting them sample. I'm going to be criticized for that just as much as you're criticizing me for not having a separate piece of legislation for this, but, having said that, I am very appreciative that you came and shared your experiences with us. Thank you very much.

**Mr. Chairperson:** Thank you.

Ms. Martin, for a response?

**Ms. Martin:** Thank you, but your legislation doesn't go far enough. Allowing it in vape shops is fine. Allowing people to sample the product to find out what they like, because there is a myriad of flavours that—like, I mean, somebody who's going to change over is—they're going to find the one that works, and they need that opportunity.

But, when you smoke and you're not in a public place, and you're a vaper and you're out standing with the smokers, you're subjecting me to second-hand smoke, which is something I'm trying to get away from, so I have to stand even further and I have to be even more apart from society, even more apart from the community because I can't stand with

the smokers because I don't want to affect my health anymore. Where do I go? Where do I go?

**Mr. Gerrard:** Could you clarify two of the points that you make in your presentation? The first is when you—daughter says that because of this bill her mom may go back to smoking. Is that true? And, second, you suggest that there should be advertising allowed as long as it is about an adult product for sale to smokers who wish to switch to a safer alternative. Could you elaborate? Thank you.

**Ms. Martin:** You know what? It comes down to two choices for me: smoke or vape. And if vaping is restricted or not allowed where I am, and I'm out with the smokers, guess what I'm going to end up doing. Because I vape to get away from cigarettes and I don't want to be standing back with the smokers, and she's afraid of that if I'm out there again with the smokers, I'm going to go and I'm going to bum a cigarette from somebody and I'm going to start smoking. She's terrified of that because she doesn't want me to smoke. She wants me to be around.

**Mrs. Driedger:** Thank you very much for the presentation and for your passion on the issue, too, and you're, I know, speaking as a mother in wanting to influence children. A question for you is because—like, children are going to see somebody that is vaping. Do you think that's going to have any influence on kids that because they can't, then, access vape products, that it could have some influence on maybe children deciding that they might want to smoke?

Now, your daughter sounds like she's quite the opposite from that, but do you think that there could be some, you know, appeal to kids that watch this and think it's cool?

**Ms. Martin:** You know what, you're probably right. You know what, they see people outside of malls, outside of office buildings smoking. Is that cool? They're taught in school that it's not cool. They're taught in school that it's bad, and I totally agree with that. Parents who are smoking at—in the home, that's what kids see. They see their parents smoking. If they were to see their parents vaping, it would be like, look at me, kid. I'm saving my own life, so I can be around to be a grandpa to your kids. That's a positive message. That to me doesn't say vaping's cool. That to me says, look at me, I'm going to save my own life so that I can be around to see you grow up. My kid knows that because I had her when I was 42 years old. So I have to be around because I'm a

single mom and it's only me and her, so the choice was clear.

**Mr. Chairperson:** Thank you very, very much, Ms. Martin.

We have a next presenter, Rob Cunningham, from the Canadian Cancer Society, National Office.

Do you have a presentation, sir?

**Mr. Rob Cunningham (Canadian Cancer Society—National Office):** I do have a handout.

**Mr. Chairperson:** Good. If you could give it. And I have to introduce two pages. We have the pages for the 2015-2016 year: Ceanray Harris Read, this is her first committee meeting. Congratulations, Ceanray. Sarah Cormier, welcome and thank you for your service again.

Thank you, Mr. Cunningham. You were interrupted by two very good pages.

**Mr. Cunningham:** Thank you, Chair and members of the committee for the opportunity to testify this evening on Bill 30. I'd like to commend the minister for bringing the bill forward. We support the bill. We urge all members of the committee and members of the Legislature and all parties to support the bill as well.

We have a number of amendments to put forward that we believe will improve the bill. And Manitoba is now one of seven provinces where similar bills have been brought forward to ban sales to minors, to ban use of e-cigarettes in workplaces and public places. There's been broad support. And, for example, in some other provinces vape stores or commercial interests with respect to e-cigarettes have supported the ban on use in public places, restaurants and workplaces and so on.

This bill does not ban e-cigarettes. E-cigarettes are less harmful than tobacco cigarettes. This bill will do nothing to prevent somebody from using e-cigarettes for smoking cessation or a long-term substitution. But there is a need for regulation for this product category, and that's what this bill does. And I'd like to go through some of these amendments that have been provided to you, and the first with respect to the definition of a vapour product shop. We feel that it needs to be limited, curtailed. These shops, kids should not be able to go in them. If displays are allowed, these displays should not be visible from outside the store.

\* (18:40)

And these stores should only sell e-cigarettes and related products, so the e-liquids or they could be publications or they could be batteries or whatever, but they should not be selling tobacco, for example. If somebody has switched to e-cigarettes, they shouldn't, when they buy their e-cigarettes or their liquid, they shouldn't be tempted to buy cigarettes. There shouldn't be pop or chips or lottery tickets in these stores that sell e-cigarettes. That's fundamentally not the case now in these specialty stores, and those would be some conditions that also have been raised by health groups in other provinces, and as a result, our recommendation is that there be regulatory capacity that further conditions with respect to specialty stores, the vape shops. So that's our first recommendation.

The second recommendation deals with establishing regulatory authority with respect to flavoured substances in e-cigarettes or e-liquids. Now, it's not to ban all flavours, but right now there's bubble gum and there's candy cane and there's candy floss. Is that appropriate, attractive to kids? Do we really need 300 flavours? Now, nicotine gum, nicotine lozenges has some flavours, mint and orange. So it's not to ban all flavours, but there should be some capacity to have some regulations in the future. And we've seen four other provinces have similar regulatory capacity: Ontario, Quebec, Nova Scotia and Prince Edward Island.

The third amendment deals with use of e-cigarettes in vape stores. Now, the approach that is taken by Manitoba is different than other provinces. Our recommendation: that any such allowance be done by regulation and with the possibility for appropriate conditions and limitations, not in the bill itself. That would be our recommendation.

The fourth recommendation deals with regulatory authority, so it's generally related to some of the other recommendations that we provided.

And finally, the use of e-cigarettes in bars and casinos, which has been raised, and I thank the minister for representations at the previous committee meeting. We would be concerned. We do not think that e-cigarettes should be used in bars and casinos. We all know the story of an ex-smoker who has a few drinks, they have a single cigarette, they're back to being a daily smoker. So in that context of alcohol, in terms of that lifestyle setting where people lose their inhibitions, we don't want them to be tasting—to having nicotine to bring them back to being—into consuming nicotine products. People can

go outside. No other province in the seven—six other provinces that have brought forward legislation allows it in bars and casinos. It doesn't make sense, and we appreciate the comments of the minister already with respect to this.

A few other comments, because I know the question came up last committee meeting with respect to the legality of e-cigarettes in Canada. E-cigarettes with nicotine cannot be legally sold. They are widely available in Manitoba and across—but they cannot be legally sold unless they're preapproved by Health Canada, and Health Canada has not approved any product category. They have to be—because they're nicotine, it's a drug, it has to be approved under the Food and Drugs Act the same way that nicotine patches, nicotine gum and nicotine lozenges have to be approved. That hasn't been the case.

And it's every single product variation that must be approved by Health Canada. So, you know, if somebody wants to have a nicotine gum with a different flavour, it has to be approved; a different strength of nicotine, it has to be approved; a different label, that has to be approved by Health Canada.

And certainly, you know, the e-liquids is a different category, as well, and with nicotine. So those have to be approved. They haven't been, and that's clear. Health Canada is very clear. And, yes, there is a category that says inhalers of four milligrams or less can be potentially approved, but, again, each of those products have to be separately submitted to Health Canada for approval. And that's what's already been done.

Now, with respect to e-cigarettes without nicotine, those can be legally sold. They're not nicotine; they can be legally sold. But there's no effect of this potential for cessation. I mean, it's like sucking on a straw. I mean, it's not really a long-term benefit, and we see in the United States the data with respect to that it's not having the sustained volume the way those products with nicotine do.

Now, a few comments, because the convenience stores associations testified, it's important to note that the major tobacco companies provide significant funding to the convenience store associations. And their Ontario affiliate, it's a former tobacco company employee that runs it. The tobacco companies help create these associations.

And we do not want convenience stores displaying tobacco products. Kids go in these stores.

These stores do not have a good record for selling to kids, despite what they may have said before this committee. The most recent 2014 data for Health Canada, Canada-wide study, in Manitoba found that for 15- to 17-year-olds, 13 per cent of stores tested in Manitoba sold to kids, but if you look at just the 17-year-olds, 30 per cent. So that's just below the age of 18. So that's a real problem. And we need to have fewer stores selling tobacco.

And, you know, the big tobacco companies in the United States are all involved in e-cigarettes. Some of their marketing is of tremendous concern. They're doing lifestyle advertising. They're encouraging people to use e-cigarettes in a way that would be dual use to help them continue smoking, to use e-cigarettes in places where smoking is banned such as in bars and so on. That's a problem. We don't want kids using e-cigarettes, but we don't want the tobacco industry keeping people smoking through dual use. So it's this type of measures in the bill that are helpful to curtail the downside with respect to e-cigarettes.

And tobacco companies across Canada, including Manitoba, have contract promotions with tobacco vendors, convenience stores, to—that are below the radar. It's not well known. They give money to convenience stores if they meet certain sales volume targets. They get bonuses. That's a problem. They—in—sometimes convenience stores have a chance to win a trip to the Bahamas, a nice hotel, if they meet certain sales volume targets. That's a problem. They're making payments if they carry certain products. We have to be concerned, and there's an opportunity for further regulation with respect to this.

So convenience stores should not be displaying e-cigarettes. They should not be allowing use, thus—you know, this is—these are contexts where kids are. And so if they want to have their own e-cigarette specialty store, they can open one. That is a business decision they can make.

Thank you for the opportunity. I look forward to any questions you may have.

**Mr. Chairperson:** Questions?

**Ms. Crothers:** Mr. Cunningham, thank you very much for coming and speaking and, certainly, the first night we were here, tonight's no different. We're seeing both sides of this issue from perspectives that are equally passionate, I think. And it's one of the challenges of creating legislation around an issue like

this. So I appreciate you coming and sharing your perspective, and, I just want to say thank you for coming very much.

**Mr. Chairperson:** Mr. Martin—or, Mr. Cunningham, sorry.

**Mr. Cunningham:** Thank you, Minister. I appreciate the opportunity and would be pleased to elaborate as well and—with further questions.

**Mr. Gerrard:** Thank you for your presentation and your recommendations. One of the concerns has been that vaping could be a gateway to tobacco use, and we've heard earlier on that there's no evidence for that. Are you aware of any evidence that vaping can be a gateway to tobacco use?

**Mr. Cunningham:** What is clear is that use of e-cigarettes by youth is increasing at a rate of concern, and we've seen this particularly in the case in the United States. If we look at the trend for high school students, it's grown.

Now, in Canada e-cigarettes are on—have been on the market later. So it was really a decision around—a court decision around 2009 in the United States where fundamentally they were legal starting in 2010, but they started much earlier. In Canada it's only—I personally, in Canada, did not see anyone using an e-cigarette until 2014. So it's—so it's growing in Canada. That's of concern. But it takes a while between youth starting to use them and then maybe switching to another product. But, clearly, youth are starting to use these at levels of concern.

**Mrs. Driedger:** Thank you for your presentation.

Now, I understand through your presentation, you're saying that there are six other provinces that already have legislation related to e-cigarettes.

**Floor Comment:** That's correct.

**Mrs. Driedger:** And are there—and I think you were probably indicating in some places, but are there any big differences between some of those other provinces and what Manitoba's doing, and is there sort of a gold standard?

**Mr. Cunningham:** Well, they're fundamentally similar. What those other provinces have done in many cases is to have regulatory authority for the future for—to regulate flavours. Manitoba has not done that and that's a recommendation that we think that Manitoba could do. Even if there's not any immediate action, the research can evolve and they—the regulatory development can evolve.

We've talked about bars and restaurants, bars and casinos. There's no longer going to be an intention in Manitoba to allow use in those locations. No other province has allowed that. The big difference in Manitoba is that—in the bill is use in vape shops. So no other province has done that in the bill. Some cases, that can be potentially allowed by regulation.

**Mrs. Driedger:** Are you saying other provinces don't have vape shops? *[interjection]*

**Mr. Chairperson:** Mr. Cunningham. I know it's an archaic system.

**Mr. Cunningham:** Yes, there's vape shops across Canada.

\* (18:50)

**Mrs. Driedger:** And for a lot of people that want to quit smoking, I mean, they can't just go cold turkey. I mean, it's hard, you know, for some people to do that. So, you know, a lot of people are saying to us that they need some level of nicotine, whether they start high—at the last committee, we heard of a man that smoked for 50 years, and then he needed that nicotine and he was able to decrease the amount until he reached a point where he's a successful non-smoker.

How do we deal with this issue in Canada, then, where if the federal government is saying no nicotine but people are needing it in order to have an effective smoking-cessation product? Where do we go with all of this, especially us legislators that are having to make some legislation decisions here?

**Mr. Chairperson:** Mr. Cunningham, we have one minute left.

**Mr. Cunningham:** I do have to commend legislators in Manitoba with respect to this bill because the federal government has not acted, and it's in the absence of that action that Manitoba and other provinces are moving forward, and that's a positive thing. So there are several nicotine-replacement products approved by the federal government—gum, patch, lozenge, mouth spray and inhaler—but we also have e-cigarettes. So those are available. You know, again, this bill does not prevent somebody from using e-cigarettes for cessation.

We do support ongoing research, and the Standing Committee on Health of the House of Commons had recommendations for changing

federal action, and hopefully, you know, when the new Parliament is in place, we'll see action with respect to those recommendations.

**Mr. Chairperson:** Thank you very much, Mr. Cunningham.

And now we have Marianne Curtis, please. Marianne Curtis. Is Marianne Curtis available? She—her name will now be dropped to the bottom of the list.

Charlene Haste. Charlene Haste, VapeMate.

Do you a—*[interjection]* I'm sorry. I'm sorry, order. Excuse me, please. I'd like to remind members of the public who are observing the committee meeting, please do not disturb the proceedings by applauding, commenting, et cetera. It is like a courtroom; you have to show a proper respect. Thank you very much.

Ms. Haste, do you have a written presentation?

**Ms. Charlene Haste (VapeMate):** You bet.

**Mr. Chairperson:** If we could have the pages presented, and you may start whenever you feel comfortable, ma'am.

**Ms. Haste:** I'm not a public speaker, so I'm going to do my best.

**Mr. Chairperson:** It's as informal a formal presentation that you can make. Thank you.

**Ms. Haste:** Okay.

Good afternoon, ladies and gentlemen of this committee and Honourable Minister and Honourable Chair. Thank you for allowing me to be here today.

My name is Charlene Haste. I'm the co-owner of VapeMate based in Kenora, Ontario, with a partner store here in Winnipeg, Manitoba. I'm here today because I have many Manitoba customers that frequent our store in Ontario and vice versa.

I was a 40-year-old—40-year smoker and I started smoking at the age of nine, 10 years old, and I dearly wish vaporizers had been around when I first started trying to remove deadly tobacco from my life. I'm a vaper. My story is simple. I was a pack-a-day smoker and now suffer with COPD. I purchased my first vaporizer kit in the early part of 2011 from the States, and after seeing my success, friends and family started lining up my door to find out where I got mine and how they could purchase one.

Needless to say, what started out to be a small home-based business—for lack of a better word—snowballed. Like those of you sitting here, I understand the need we have to regulate this industry. I applaud the Manitoba government in their efforts to do so. Thank you.

Four years ago, I must confess I had never watched a public committee let alone much of our legislative process here in Canada. I do vote though. However, in the last few years I have sat through many of them. I—all having to do with the regulations on vaporizers here in Canada, in the UK, in the States and even global nicotine forums.

I've listened carefully to the advice, even contacting researchers who have made presentations. As with medical professionals who address this issue, I have learned that none of the evidence or research is definite and proves any gateway, normalization of smoking or any evidence of passive vapour. That's right: none, not at all, actually the contrary. These ideas have been consistently disproven.

A statement from the Action on Smoking and Health, known as ASH in the UK, they say in contrast there is little evidence of any harmful effects from exposure to vapour from electronic cigarettes among non-users. There is—therefore, there is currently no justification of—a ban on the use of electronic cigarettes in public places on health grounds. Simply health, like, why are we doing this?

Before taking steps to inhibit personal choice, legislatures should be sure that any proposed measure would not lead to the—lead to unintended consequences.

Yes, I do, too, have an invested—vested interest, but certainly no more that of the Canadian Cancer Society, the Manitoba Lung Association or the Heart and Stroke Foundation. Unlike those larger corporations or organizations, I'm dedicated to researching one topic. Losing both parents to lung cancer, I am passionately involved in this industry. I promised my father on his deathbed I would quit smoking. Excuse me, sorry. My father died back in 1984. Since then, I have tried all other methods to quit.

Prior to coming here today, I asked myself, how can I help this committee understand what's at risk in these regulations? In 10 minutes, what is the one piece of information that would cause you to review whether it is fair vaporizer regulations are to be

lumped in with regulations for deadly tobacco? Nicotine is a by-product of tobacco, but it certainly is not tobacco, no more than milk is to beef.

To me, the most important consideration is our youth, our vapers, our present-day smokers, their lives, their families. If you were to think of our children and future generations, let's start thinking of the children that will grow up with family, parents, aunts, uncles, brothers, sisters and grandparents. Think of the children that will no longer have to endure smoke from parents in their very own homes.

Smoking kills; we all know this. Until tobacco is completely banned from the marketplace and all tobacco plants are destroyed, it will continue to kill. Scientists and doctors and various other health professionals have been studying vaporizers for 12-plus years now. There's no such thing as passive vapour, so why are we even concerned with passive vapour? Why are we still discussing it?

Dr. Konstantinos Farsalinos, an e-cig medical researcher and renowned cardiologist working at the—as a researcher at the Onassis Cardiac Surgery Center in Athens, Greece, earlier this year, he discussed his research involving 20,000 e-cigarette users at the 16th World Conference on Tobacco or Health in Abu Dhabi. He said: A lack of long-term studies on the effects of e-cigarettes should not be used as an excuse to ban them. Even for medications, clinical studies are performed for months. Then we do post-marketing monitoring. The same should happen with e-cigarettes, he said. This is what the European Union is doing, and I'm confident that we can expect to see significant health benefits from smokers switching to tobacco e-cigarette use.

Dr. Farsalinos also confirms smoking has decreased to historically low levels at the same time that e-cigarette use has increased. He says it's important that e-cigarettes are promoted to the population in an honest and science-based campaign.

Vapers vape as a tool to quit their cravings for a cigarette, a way to stop smoking, an alternative to smoking or simply because they enjoy vaping. For me, it's like having a coffee or like that of people that are addicted to 10 bottles of water a day. I vape with or without nicotine, so what am I addicted to if I'm not vaping with nicotine? Do we want to discourage vapers my baking them step back outside in the dead of winter or put them alongside smokers inhaling second-hand smoke? Where in this bill do we see some kind of protection for vapers?

There are groups fundamentally opposed to vaping based on emotion and respond when seeing any person inhale and exhale something that looks similar to smoke. The curiosity of those vapers stops there, though, at appearance. They no longer see someone trying to stay away from tobacco, but they see a smoker. I get it, I do. They have fought the tobacco industry for years. Please ask these groups some tough questions when deciding on these regulations. I'm respectfully begging you to stick to the science and factual evidence presented to this committee. That is what I've always believed public health policy was based on, and I believe Manitoba residents think the same.

To give you an example of the contrast, there is a survey circulating amongst our health orgs that states—I think it's about 14 per cent, I can't remember the exact number—of our children whom have never smoked have now tried an e-cig. That is like a study that concludes the same about a child telling a lie or having a sip of alcohol. That, to me, is not sound science. As a matter of fact, that is misleading and pushing an agenda that appears to have no concern for the health and welfare of our public.

In the words of Professor Peter Hajek, who is the director of health and lifestyle research unit at the Wolfson Institute of Preventive Medicine, he says, it just shows that teenagers who are attracted to e-cigarettes are the same people who are attracted to smoking.

Professor Bauld at the University of Edinburgh has been involved in long-term studies on youth and e-cigs. Her research shows a mere 4 per cent of youth using e-cigs regularly and most are already smokers, and for them, using e-cig is a better alternative. If e-cigs were unavailable to me—or were available to me in my 20s, it's likely I wouldn't be standing here in front of you with COPD today.

\* (19:00)

Am I furious that our own—very own public health organizations are not accessing the research and the information on e-cigs that's available? They're supposed to be promoting healthier lifestyles. There are so many stunning—so many studies done or in process, it could break the Internet.

Yes, it does take time for us to read all those peer-reviewed studies, but they so clearly and authentically show up—show that e-cigs are not a threat to our health and certainly not a threat to our children. In the UK, public health has been keeping

up to the latest evidence and studies and recommending e-cigs to smokers. I almost said e-cigs. As well, their doctors are referring to their patients—or, as well, their doctors are referring their patients to the product. True, Health Canada hasn't sponsored any of the current studies, but we do live in a world where these studies are readily available to anyone, anywhere. And, again, I wonder why our own health organization and health concern groups in Canada are avoiding these studies.

Another agenda that's being pushed is this threat that vaping seems to have on our children. Can someone here explain to me exactly what that threat is? This whole vaping in front of children has me in a bit of a kerfuffle. Why are vaporizers being demonized when it comes to children witnessing us puffing on them? I keep trying to wrap my head around it. The regulations you are proposing ask for closed-in rooms so air from vaporizers can't escape. Why? Put a vaper in a smoking room is like putting a reformed alcoholic in a bar—actually, worse. The person, again, who's vaping instead of smoking is also harmed by second-hand smoke, something that we know is dangerous, something that we know causes real health issues and can even lead to death.

I would like to see real evidence as to why vaping should not be allowed in all public spaces other than some people considering it a nuisance, much like that of perfume. Again, in the world—words of Dr. Konstantinos Farsalinos, he states: We can't ban something on the principle of what it looks like.

Why are we not looking at the positive side of the person using a vaporizer making such a wonderful change in their life? Do we scoff at fat people on bikes or ex-alcoholics sipping on a beer? Why, when I vape, am I demonized as setting such a bad example? I'm not. I'm setting a good example. All vapers are. We no longer smoke. We've chosen an alternative that helps us—helps us remain smoke-free. There's no reason—rhyme or reason to hide vaporizers from our youth or—nor any reason I can think to shield youth from positive changes a person makes in their lives when they stop smoking.

Yes, I agree—they should be age restriction, absolutely.

**Mr. Chairperson:** If you could just.

**Ms. Haste:** Okay, in closing, sorry. If we could find a sugar substitute that was 99 per cent safer and enjoyed as much as sugar and came without any

harmful effects and didn't cause obesity, diabetes, et cetera, why would we not be embracing it? For the life of me, I can't understand why so many people will not acknowledge that simple point.

Our opponents are not embracing—

**Mr. Chairperson:** Okay. Thank you. Just hold on—just a—no, no—well, I can ask for the leave of the committee to finish, and we can go on to the question time, if they wish. *[Agreed]*

Okay. You can finish, and that that will take some of the question time.

**Ms. Haste:** I can finish?

**Mr. Chairperson:** Yes.

**Ms. Haste:** Thank you.

I say shame on them; shame on anyone using the youth argument to fulfill their pocketbooks. Regulating it because it—of what it appears to be or what it looks like. Why are we not promoting this to everyone as a less harmful alternative? Children, in my opinion, should know that—know and see these products, understand the vaper is trying to make a positive change in the right direction. Instead, we are trying to conceal that information, why?

At the end of this hearing you will be the judge and jury, basically, on these regulations. Your decision will affect tens of thousands of Manitobans, their families and their children. Please don't put them in rooms with smokers. Please don't make them stand outside with smokers, breathe in passive smoke and tempt them to smoke again. Please choose science and fact.

I can respond to any questions you may have. Maybe someone on this committee might be able to help me understand why vaporizer being—vaporizers are being demonized. And, finally, I thank this committee for listening, allowing me to present my heartfelt passion here today.

**Mr. Chairperson:** Thank you very much, and we have the honourable minister.

**Ms. Crothers:** Ms. Haste, thank you. I do have to just comment on one thing.

When you were quoting Dr. Farsalinos—I hope I've got that correct—a lack of long-term studies on the effects of e-cigarettes should not be used as an excuse to ban them. And I just want to remind people, once again, this is not a ban. We're not banning this product. People can still use it and we're

certainly not trying to demonize people for using it. And I've heard last—the last committee hearing we had and certainly this evening already, I've heard the stories, success stories of folks that have used this product to quit smoking. And, as a person that lost her own mother-in-law to lung cancer, and from diagnosis to her death was three months, and she quit smoking 25 years before and still had this issue.

So I understand the importance of having an alternative, and that's why I wanted to make sure that people could still access it and be educated on it by going to vape shops. So we're not trying to demonize people, but we do have to provide a balance of some sort because I also hear from other people, particularly with children, who are concerned about the impact on it, and I know you've spoken to that, and I certainly heard your passion and your conviction in that, so thank you.

**Mr. Chairperson:** Ms. Haste, for a response, if you wish, quickly though.

**Ms. Haste:** Yes, and I think that's up to our public health bodies to do some education. You know, it's like telling a child, do you want to grab a greasy hamburger or you want to get some fresh vegetables? I think, you know, we're already doing that. We see that in the Ontario legislation that just happened, healthy food choices act they did, and I think our public health should be promoting these in the sense that this is an alternative. This is somebody that's quit smoking. This is somebody that's trying to change their life.

**Mr. Gerrard:** Thank you for your presentation. You make the point very strongly that there's no such thing as passive vapour, right? Now, is there not some, you know, whether it's propylene glycol or other substances, which will get out or leak out from the vaping?

**Ms. Haste:** I'm getting used to this.

Okay, if we compare to smoke, there's no such thing. Okay, when we say passive smoke, that's what we're thinking about. When we talk about passive vapour, there's no such thing as passive vapour. When I say that what I mean is that, you know, literally, we've just recently, Canadian Vaping Association, put health—'toxicity' machines in vape shops, okay? They were 85 per cent—what was the number now?—I don't want to quote numbers; I don't want to do that. But it was 85 per cent less toxins in the air than that's allowable in workplace safety air controls. So to me that means there's no passive

vapour. There's probably more passive vapour if we had a—or not passive vapour, but passive contaminants if we put a candle on that table right now.

So I'm not, I mean, I'm not a medical doctor, but I do—I'm nothing even close, and you are, so you understand what I'm saying. But you do—I do follow the research, and I've been following it for four or five years, and we have a lot of proponents in the UK right now that are just saying there's—why are we talking about this passive vapour? And it's been around there a lot longer than Canada. Sorry.

**Mr. Chairperson:** Mr. Martin, for a quick question.

**Mr. Shannon Martin (Morris):** A very quick question, Ms. Haste, and I come from the perspective of an ex-smoker and I tried many of the cessation products and, I mean, and I give credit to any effort to quit smoking or find, as you put it, a safer alternative. For my own information, though, I'm just curious. The Canadian Cancer Society and other organizations tell us—stand here and tell us that these products are simply not approved by Health Canada and therefore cannot be sold in Canada, and yet you're obviously selling these products in Canada. I'm just wondering how—if you can clarify, I mean, of just how is that possible.

**Mr. Chairperson:** Ms. Haste, you have 15 seconds.

**Ms. Haste:** Right now we're working, many, many vendors and ECTA, the Electronic Cigarette Trade Association, are working on those regulations with Health Canada.

**Mr. Chairperson:** You win a kewpie doll. Thank you very much on that one. Thank you very much for your presentation.

Now we have Anne Maxwell, please. Annewell Maxwell? One last time, Anne Maxwell? Your name will go at the bottom of the list.

Now we start with the people from Winnipeg.

Eden Sorrell, TheraVape. Eden Sorrell, are you here? Yes, good, that's—heard an affirmative.

Oh, you're bringing—

**Floor Comment:** Twenty copies.

**Mr. Chairperson:** Twenty copies, okay.

Ladies? The ladies will hand them out, okay? No, you don't have to hand them out. Okay, believe it or not, that's—these nice ladies will do it; you can do the presentation.

**An Honourable Member:** A little light reading.

**Mr. Chairperson:** Are you giving us a little light reading?

**Mr. Eden Sorrell (TheraVape):** If you choose.

**Mr. Chairperson:** Yes. Okay, you may start when you wish. Don't feel rushed. And I apologize for your copying machine.

**Mr. Sorrell:** Staples.

**Mr. Chairperson:** Thank you. Go ahead, sir.

**Mr. Sorrell:** Sure. Good evening, everyone, and thank you for the opportunity to speak on Bill 30. My name's Eden Sorrell, and I'm here on behalf of TheraVape, a local e-liquid manufacturer. I'm also a registered nurse with five years' experience, three of which is in the intensive care unit with Health Sciences Centre. My two business partners include a pharmacist and a paramedic.

\* (19:10)

For what it is, this bill is almost perfect as is, to me. The Canadian vaping industry embraces intelligent and evidence-based legislation. All vape shops should already be imposing age restrictions. Enforcing it with steep fines is good for the industry, and it's good for our youth population. Keeping minors out should already negate the need for any kind of flavour bans or bans on displaying product since they won't be in the shops to make the purchase in the first place. We adults love flavours and we also love to see what we're buying before we hand our money over.

With all this being said, there are only a few minor changes I would recommend to make this bill perfect and lead the way in Canada as the most intelligent, current and forward-thinking province on vaporizer legislation.

The first proposed amendment would be to section 6.3, allowing sales of vaporizers in pharmacies. Many people come to pharmacies for initial consultation on smoking cessation and harm reduction products. Pharmacists are experts on these products in general. They would just need a little bit of up-to-date info on vaporizers. While vaporizers are not cessation products, they are a popular alternative to smoking that keeps people off tobacco. They are not tobacco any more than Nicorette is tobacco, so including them in the ban that is placed on tobacco to be sold in pharmacies is not fair for consumers and does not make sense.

The second proposed amendment would be for the section on combined smoking and vaping areas. While I agree smoking areas should be expanded to allow vaping there, there still needs to be vaping-only areas where cigarettes are not allowed. For most users, they're trying to get away from the smoke so they shouldn't be forced to inhale smoke just because a vapour cloud looks like a smoke cloud to the casual observer.

The third proposed amendment would be to section 9.1(2), and it's for the advisory committee. Please include, in quotations, persons who in the opinion of the minister are representative of electronic cigarette retailers in the body that makes up the advisory council. Without this inclusion, tobacco retailers would have unfair control over decisions affecting the electronic cigarette industry, creating a conflict of interest. To be clear, these two industries are direct competitors.

Other than these three recommendations, I think we have a pretty good bill. I would implore you to please reject any proposed amendments that would restrict adults from sampling inside vape shops or to limit our flavour options. Because we want the flavour options, and I'll bet anybody here will attest to that—in the background—if they're allowed to.

If we have strict laws and hefty penalties for selling to minors, then that only leaves voting adult vapers in the shops that are browsing and trying the flavours. The argument that flavours are marketed to children then becomes completely null. People in these shops are there by choice and they're not bystanders being exposed to anything unwillingly. Let's not impede access to harm reduction with poor policy.

I've also prepared a summary of peer-reviewed studies and reports commissioned by government bodies on e-cigarettes to help dispel a few myths you've probably already heard and will likely hear from today's parties that have not taken due time to conduct their own proper literature review. And you have copies of this one.

Okay, the following is a brief summary on a handful of recent and relevant e-cigarette vaporizer studies and reports that have been collected to dispel prevalent misconceptions that are being spread by anti-vaping lobbyists today, namely, that (1) vaping normalizes tobacco and that a gateway effect exists towards tobacco; (2) that there isn't enough evidence on exposure and second-hand exposure. These common and persistent lobbyist arguments are

outdated and dangerously ignorant of current studies. They propose industry-crippling bans on marketing, flavourings and in-store product use until we can have more studies. Unfortunately, Canada is woefully behind on the research and progress, but we need only look across the pond to the UK and south of the border to our American neighbours to catch up on current information.

So, No. 1, the gateway and normalization theories debunked by studies: Public Health England commissioned a report on e-cigarette uptake and marketing that looks at studies contained therein to focus on the extent to which children and young people may use e-cigarettes, particularly those who are current non-smokers. The first study the report references had a sample size of 2,178 youths between the ages of 11 and 18, and was conducted in Great Britain, the world leader in vaporizer research. Among 11- to 18-year-olds that were non-smokers, 99 per cent reported never using e-cigarettes and 1 per cent reported they had tried them once or twice. There were no sometimes or often e-cigarette users among never smokers. Furthermore, the report showed that among children who had tried smoking at least once, 8 per cent had used an e-cigarette, but none reported using them more often. The report concludes that ever use is concentrated in young people who smoke and they could not identify any evidence to suggest that non-smoking children who tried e-cigarettes were more likely to then try tobacco.

Action on Smoking and Health Scotland found that although there may be associations between youths using one nicotine product and then switching to another, the associations are not necessarily causal and may be explained by shared risk—sorry, risk factors that predispose individuals to engage in both behaviours, so, yes, shared risk factors that predispose individuals to engage in both behaviours.

Results from the 2014 National Youth Tobacco Survey conducted by the FDA found that since 2011 to 2014, youth smoking has decreased from 15.8 per cent to 9.2. If e-cigarettes are a gateway to smoking, then why haven't smoking rates gone up along with e-cigarette use? That's because the gateway and normalization theories are nothing more than theories, and false ones.

Youth e-cigarette use has increased in this time, but as the UK Department of Health concluded, they're 95 per cent safer than combustible tobacco.

While we don't condone nor support the sales of vaporizers to minors, they still find a way just like they do with tobacco cigarettes, illicit drugs, alcohol. We can only do so much. But given the choice between one or the other, isn't the 95 per cent safer option the smarter one?

Lastly, there's the argument of exposure and second-hand exposure, another argument that persists today. They're known and they're so minimal that they are difficult to even detect. Igor Burstyn, Ph.D. from Drexel University, department of environmental and occupational health, conducted chemical analysis of e-cigarette vapour and found that there is no evidence that vaping produces inhalable exposures to contaminants of the aerosol that would warrant health concerns by the standards that are used to ensure safety of workplaces. He added that exposures to bystanders are likely to be orders of magnitude less and thus pose no apparent concern.

Czogala et al. conducted studies on this and found that e-cigarettes do not emit significant amounts of CO or VOCs. Furthermore, the emissions of nicotine from e-cigarettes were significantly lower than those from tobacco cigarettes. Also, unlike tobacco, concentration of e-cigarette aerosol particles tend to decrease rapidly when diluted in the air.

Action on Smoking and Health Scotland looked at three studies on second-hand exposure, which all found that analyses of emissions find pollutants are either at low concentrations, compared to equivalent emissions from cigarette smoke, or below the limit of detection for the measurement instruments used.

ASH Scotland—where was I—yes, ASH Scotland published a report on e-cigarettes that addresses several key points on health policy. Among them is dangers from exposure to nicotine. *[interjection]* Two minutes? Their report concluded that nicotine itself in the doses smokers are normally exposed to is not considered especially harmful to health. They added that longer term studies with extended duration of nicotine replacement therapy use have not shown NRTs to increase the risk of adverse cardiac outcomes when followed up for five years, nor cancer when followed up for 12 and a half years.

Public Health England included in their August 2015 report that while vaping may not be 100 per cent safe, most of the chemicals causing smoking-related disease are absent and the chemicals present pose limited danger, that the best estimate is that e-cigarette is around 95 per cent less harmful to

health than smoking, and that e-cigarettes release negligible levels of nicotine into ambient air with no identified health risk to bystanders. Public Health England added that the 95 per cent safer estimate is based on the following facts: The constituents of cigarette smoke that harm health, including the carcinogens, are either absent in e-cigarette vapour or, if present, they are at levels much below 5 per cent of smoking doses, mostly below 1 per cent and far below safety limits for occupational exposure. And No. 2, the main chemicals present in e-cigarettes only have not been associated with any serious health risk.

The stacks of paper I gave you guys all copies of, those are just a handful of studies I picked up in an afternoon. They're from credible sources and they're by no means comprehensive. Anyone has access to these; they are public information. So the next time a large organization comes and says we don't have enough evidence, I would ask you to ask them to please present your evidence, because this goes against everything they try to tell you.

**Mr. Chairperson:** Thank you very much, sir.

Questions?

**Ms. Crothers:** Mr. Sorrell, thank you very much for coming and speaking to this, and I have to say thank you. I'm sure this cost a pretty penny to be printing all of these for all of us. Thank you very much. *[interjection]*

I just wanted to say that I appreciate the work that you put into your presentation, and I've listened very carefully. Thank you.

\* (19:20)

**Mr. Chairperson:** Mr. Sorrell.

**Mr. Sorrell:** Oh, was that a question?

**Mr. Chairperson:** You can respond if you wish.

**Mr. Sorrell:** Oh, thank you, and I'm really thankful for the bill that you presented because we've seen the other ones tabled in Ontario and Nova Scotia. This is better, and I would be a happy person if it went through as is without any more negative stuff added to it that would restrict us from making purchases in stores. And, you know, adults do love flavours. I love flavours. I love flavoured everything. I love sugar; I love salt. So they're really not children's flavours. You know, I love cherries, I love strawberries and I love cantaloupes.

**Mr. Chairperson:** Thank you very much.

**Mr. Martin:** I don't know if we have enough time to list out all of the flavours that we enjoy. But Mr. Sorrell, thank you very much for your presentation. And, unfortunately, Ms. Haste didn't have—with the 15 seconds that she had—answer a question that I am quite interested in understanding.

If the other organizations like the Canadian Cancer Society are correct that these products, e-cigarettes that contain nicotine, can't be legally sold in Canada, how are you—how are they being sold right now?

**Floor Comment:** I would ask the same question of whether or not they are the governing body that says a chair can be sold. It's not a health product. There are no health claims being made. The doses are far lower than any drug, even in the schedule F for the prescription drug list. So I would say that it's mostly unfounded at this point. Until we make regulations—and we love to see regulations, we want that—we just want it to be intelligent and fair for the industry.

**Mr. Chairperson:** Mr. Martin for a quick follow-up, and then—

**Mr. Martin:** Sure. So, essentially, they're being sold in a legal grey area until such time that federal and provincial governments bring in the necessary regulatory and legislative framework that will make the necessary adjustments. *[interjection]*

**Mr. Chairperson:** Mr. Sorrell. You have to wait until—yes. Mr. Sorrell, you can go now.

**Mr. Sorrell:** Okay. Yes, we've looked all the restrictions on that, and there is no law. There's nowhere actually specifically saying that it's illegal, just what Health Canada posted in a bulletin. So.

**Mr. Gerrard:** You've looked very carefully at what's happened in the United Kingdom which has had vaping for longer and more extensively. Two questions, one is has there been a reduction in cigarette smoking in the United Kingdom in association with the increased use in vaping and, two, what—how do their regulatory regime compare to what is being proposed here?

**Mr. Sorrell:** Okay, so they're way ahead of us in terms of their policy. They already have a huge bulletin, and I believe it's in there for proposed regulations. Was your question whether or not smoking is increasing or decreasing, or was it—

**Mr. Gerrard:** Has smoking decreased in the United Kingdom? *[interjection]*

**Mr. Chairperson:** Mr. Sorrell.

**Mr. Sorrell:** —but I don't have the number on me at the moment.

**Mr. Chairperson:** Yes, you always have to wait for that thing. Anyhow, did you get your—you have to repeat what you just said, Mr. Sorrell.

**Mr. Sorrell:** Oh, I have to repeat?

**Mr. Chairperson:** Yes.

**Mr. Sorrell:** Sure. I'm fairly certain it has decreased in the UK, smoking use. As for the exact number, I don't have that with me prepared today. It should actually probably be in that stack of paper. And as far their regulations, they're the first one in the world that's actually saying, hey, this is some good stuff; why don't we make, you know, fair legislation. And that's also in the stack of papers.

**Mr. Chairperson:** Thank you very much, sir. Very good presentation.

Mr. Murray Gibson, Manitoba Tobacco Reduction Alliance, please. Do you have something to distribute, sir?

**Mr. Murray Gibson (MANTRA—Manitoba Tobacco Reduction Alliance):** No, my budget is limited.

**Mr. Chairperson:** Okay. You may begin when you wish, sir.

**Mr. Gibson:** So thank you very much for hearing us tonight. My name is Murray Gibson, and I am the executive for the Manitoba Tobacco Reduction Alliance and prior to that I spent 15 years with the Canadian Cancer Society.

Every once in a while in life you have these aha moments when suddenly something becomes very real to you. I was sitting in my office one day and looking into a room next to me that was full of pamphlets, rows and rows of pamphlets all about cancer. And suddenly I realized, you know, we're coming in on this too late. We need to be talking to people about how we can prevent this, not how we can—as much about how we can deal with after the fact.

So for the last 12 years I've devoted my life to the Manitoba Tobacco Reduction Alliance to reduce tobacco use. I don't know about you, but I was thrilled to be here on the last session and to hear the testimonials of those who had recently quit smoking

as a result of using e-cigarettes. Their lives have been changed for the better. Their future is much brighter. It's like a great weight has been lifted off them, and it has.

So I'd like to start with a question for each of you on this committee, or even a couple of questions. If you were them, how would you feel if suddenly you learned that those who were selling e-cigarettes also started selling tobacco cigarettes to add to their product line? Would you feel betrayed? How would you feel if you knew that those who had caused you so much angst by selling you tobacco products in the first place were now suggesting that they should be the people to sell you the solution?

A few years ago, I got a call from a pharmacist who suggested to me that rather than pushing for pharmacists to not sell tobacco products, they should be the only place where they were sold. The logic was defined in this way: That way all the smokers would contact the pharmacist to get tobacco products and at the same time they could receive the help that they need to quit. My response: If that were the case, then everybody who's trying to help people quit should sell tobacco products, because that would bring you into more contact with the smokers. It's amazing how we can rationalize things.

Sometimes you have to choose between the social good and the personal economic gain. This is the Social and Economic Development Committee. And I know there's some difficulty sometimes, but I'm so thankful I do know some of the people sitting around this table and I know that you have a clear stand on health. And so, to me, that's the most important thing that we can talk about here.

I'm appalled that there are those who have spoken or who have registered to speak at these hearings who do not understand that they are a huge part of the problem. We hear from the tobacco manufacturers about how many people rely on them for their livelihood, but there's no mention—no mention—of how many lost their livelihood and, more so, how many lost their lives as a result of the product that they manufacture and promote. I hear from the convenience store association about how many millions of dollars they add to the economy but no mention of the costs to the economy. Nobody wants to stand up and say, yes, but it's costing the government for lost time, lost wages, health-care costs more than all the taxes they take in on tobacco products. It's a loser. Now all of a sudden they want to present themselves as part of the solution when

they demonstrate so little evidence of understanding who and what the problem is.

I believe that those of you who are decision makers and who are supportive of having vapour with—vaping with fewer restrictions in Manitoba than in other provinces have done so honestly believing that this will save lives and improve the quality of life for those who wish to use it as a smoking cessation tool. I believe that many of those who engage in selling vaping products also share that goal, some of who have personally freed themselves from the use of tobacco by vaping.

I'm also saddened that there are those who stand up and, for pure economic reasons, continue to sell deadly cigarettes and cry, me too, me too, when it comes to sharing the same concessions as vape shops. But they've not given any indication of understanding what the real issues are here.

The vapour—the vaping industry is also asking the health-care community to buy into accepting a measure of risk. We're talking about risk reduction here. We're talking about harm reduction. We're not talking about no harm, and we should understand that. They want us to do that because of who'll be helped. If that is the case, then I want to say to those in the vaping community, you must demonstrate that you are absolutely clear on where you stand with tobacco and tobacco products, because what we're motivated by—and I say those, myself and others in the health-care community—is to eliminate the use of tobacco.

In 1998, we as a province signed on to a national strategy for tobacco control, prevention, protection, cessation, denormalization. I, for one, am not inclined to support anything that does not support prevention of young people from being drawn into tobacco use. Protection from second-hand smoke or vapour that would damage someone else's health, cessation from smoking or denormalization of tobacco use and the tobacco industry, those are the things I support and I believe that we signed on to as Manitobans.

\* (19:30)

John Adams was the second president of the United States, is credited with saying that facts are stubborn things. But that quote says more than that. It says, facts are stubborn things and whatever may be our wishes, our inclinations or the dictate of our passions, they cannot alter the state of facts and the evidence. Whatever we would like this to be, and I

have to tell you I'm one of those persons that would only hope that it will be what we'd like it to be, but we cannot, at the same hand, eliminate the facts.

Dr. Gerrard, you spoke in the second reading of this bill, and I noted with interest that others talked about anecdotally what they knew about this; you talked about the evidence. I think it's important that we balance both of these out.

I'm concerned when I hear—it was one speaker implied at the last session that e-cigarettes are just five basic ingredients to compare to all the 4,000 chemicals in a cigarette. Let me tell you there are over 8,000 different flavourings used in cigarettes, all of which contain a variety of ingredients. Many of these have been approved for eating, cooking, but have not been certified for being safe for inhalation. A popular flavour in cherry and bubble gum is benzaldehyde. The U.S. National Library of Medicine has identified a wide range of health effects from benzaldehyde, depending on dosage. There is no safe way to oversimplify the facts.

Although we refer to these products as vaping, that is a little misleading, as most people are inclined to think that what is exhaled is vapour or water. In fact, they are more like aerosols with particles such as flavourings and nicotine held in suspension. We need independent research that will clearly demonstrate all the facts and the long-term implication, and the federal government needs to independently investigate safety, efficacy, quality of the product and their content. We need the federal government to move on that. We also need the federal government to clearly regulate vaping products. We cannot cherry-pick what we want to hear in order to support our enthusiasm.

Prevention: Should we be concerned about the introduction and increased use of e-cigarettes by youth? E-cigarette use by youth tripled over two years in New Zealand. In Canada, according to CTADS, 2013, 13.6 per cent of non-smoking youth have tried e-cigarettes. There are those who are quick to tell us that studies from the UK indicate that although youth are trying e-cigarettes, only a small percentage continue to use them. I would like to just remind you that there's a recent study that says e-cigarette use is a predictor of future smoking of cigarettes.

*Mr. Vice-Chairperson in the Chair*

These findings have implications, it says, for formulation of policy about access to cigarettes by adolescents. I'm not trying to ask you to build this on one study. I'm trying to say to you there are those who have different opinions on this subject and we need to hear them all and not just choose what we want to hear.

Protection: Do we need protection? Six in 10 Manitobans that we polled think that they are concerned about safety of being exposed.

Cessation: Do I believe cigarettes help people quit? Absolutely. I have travelled from one end of this province trying to help people quit and have taken—

**Mr. Vice-Chairperson:** One minute left, sir.

**Mr. Gibson:** One minute?

**Mr. Vice-Chairperson:** Yes.

**Mr. Gibson:** —taken time to talk with hundreds of individuals. Do I believe that people are helped to quit? Absolutely. Do I believe they have some common desires—that some have common desires to help them quit? Probably. Do I share our enthusiasm for vaping as having a potential to play a major part in smoking cessation? Only to the degree that it filters through the facts and the evidence.

I want to just close, then, with one quick thing. Our legislator—first of all, to those in the vaping community, I think you—that, clearly, you do have a part in helping people to quit smoking. You believe you have a solution to the problem, but first you must be clear on what the problem is.

And to our legislators, you have a role to play. If you are going to provide more leeway for vaping, then you must also provide the kind of restrictive legislation that will ensure that no one is betrayed by the outcome. And, secondly, if you're going to open the door to vaping, then I would strongly suggest at the same time you do more to close the door to smoking.

Thank you.

**Mr. Vice-Chairperson:** Thank you very much for your presentation.

**Ms. Crothers:** Mr. Gibson, I just want to say thank you very, very much. Thank you.

**Mr. Gerrard:** Thanks so much. We all know the tremendous work that you've done in getting tobacco

use reduced in Manitoba, and we all know that there's still some distance to go.

Let me cut to the chase here in terms of this bill. Do you think that this bill is as good as we can get or can it still be improved? *[interjection]*

**Mr. Vice-Chairperson:** Hold on. I just have to do the crazy thing no matter who's sitting in the—and he's back. You have the floor, sir.

**Mr. Gibson:** I think Rob Cunningham's spoken to some other amendments that I think are worth hearing about.

*Mr. Chairperson in the Chair*

We chose to focus on these two issues and that we really put forward on this, and one had to do, of course, that has already been dealt with, about the possibility—we've heard from the hotel association; we'll also hear from the restaurant association. They don't want this, and vaping people need to hear that. They don't want this in their establishments. I need to be clear on that.

And we also have concerns about what the restrictions will be on this product, and we would like to see that carefully monitored.

**Mrs. Driedger:** Thank you, Mr. Gibson, for your presentation and the work that MANTRA has done in Manitoba, too, over many, many years, to look at tobacco reduction. And I think, you know, we're all in the position where we want to make the best decisions based on science. I don't think there's a lot of science yet around this. But, you know, we are in a position where we are all going to have to make some decision at the end about the legislation. And, you know, I think it's, you know, good to be reminded that we do have to look at this in a very scientific way as we make our final decisions, and, you know, look at what is going to be in everybody's best interest, so thank you.

**Mr. Gibson:** I would hope that everyone in this room would understand this is not about banning anything. This is about taking a cautious approach. And, if the public needs to be better educated, don't just turn to the health community. You have those within this community who should also be responsible for educating their community. And so I'm just simply saying that don't be surprised if there is a cautious approach. I think it's the prudent one. Thank you.

**Mr. Chairperson:** Thank you, Mr. Gibson. It's been a pleasure working with you.

Marcia Anderson DeCoteau. DeCoteau. You have to help me with your name first. Do you have a presentation to hand out?

**Ms. Marcia Anderson DeCoteau (Winnipeg Regional Health Authority):** I do, and it's Marcia Anderson DeCoteau.

**Mr. Chairperson:** DeCoteau. I apologize profusely. You may start whenever you want, Ms. DeCoteau.

**Ms. Anderson DeCoteau:** Thank you for the opportunity to speak today in support of Bill 30, The Non-Smokers Health Protection Amendment Act. I'm speaking today as one of the medical officers of health for the Winnipeg Regional Health Authority. We have been an active supporter of policy and legislative measures to reduce the harmful population health impacts of commercial tobacco use and therefore are pleased to see this legislation that places restrictions on the use of e-cigarettes in enclosed places and their sale and advertising. We were pleased to similarly ban the use of e-cigarettes in the Winnipeg health region in all places where smoking is prohibited when we amended our smoke-free policy in November of 2014.

While The Non-Smokers Health Protection Act is in the process of being amended, we would like to suggest some further ways in which the act could be strengthened in protecting the health of Manitobans. The City of Winnipeg bylaw No. 62/2011 restricts smoking in outdoor areas including within 30 metres of the playing surface of an athletic field or hockey rink during a youth event; on a playground; within 30 metres of a swimming pool, wading pool, spray pad or spray park owned or operated by the City of Winnipeg; on the premises of a health-care facility; on the premises of primary, middle and secondary schools; within eight metres from an outdoor entrance providing direct access to a health-care facility, City of Winnipeg workplace or WRHA workplace. These restrictions on smoking in certain outdoor spaces protect people, especially children, from exposure to outdoor environmental tobacco smoke.

Tobacco smoke, whether directly inhaled or second hand, is a class A carcinogen for which there is no safe level of exposure. The associations between exposure to tobacco smoke and chronic diseases, including heart and lung disease and stroke, are well known. The costs to the health-care system are immense, as recently highlighted by the Manitoba Centre for Health Policy report which

estimated that smoking is associated with an excess \$282 million in total health-care spending per year.

There is plenty of evidence that documents that exposure to environmental tobacco smoke can occur in outdoor spaces in the same concentrations as if people are smoking indoors. Studies have measured the air quality and found markers of tobacco smoke that increase depending on how many and how often people are smoking in an outdoor area. Studies have also shown that if you measure nicotine exposure in people by measuring cotinine, which is a breakdown product of nicotine, in their saliva, that non-smokers who spend time in areas outside of bars and restaurants where smoking is allowed have cotinine levels that go up. They are being exposed and breathing in tobacco smoke. This is concerning for employees of those establishments who may be exposed regularly for long periods of time to outdoor smoke—to outdoor environmental smoke on patios and for children who may be eating with their families on the patios outside of restaurants.

\* (19:40)

I would also like the committee to consider that certain populations are overrepresented in the service industry. This includes people in lower income segments of the population, students, indigenous people and particularly indigenous women and members of racialized communities. These populations also have higher smoking rates for a variety of structural reasons including chronic stress related to poverty, intergenerational trauma and experiences of racism.

Exposure to outdoor environmental tobacco smoke in their place of employment compounds their personal risk of harmful health impacts from tobacco and represents a place where strengthening protection through legislation by banning smoking on the outdoor patios of restaurants and bars can advance health and employment equity.

The most frequent counter-argument to banning smoking on patios is the concern that it will harm business interests. There have not been any scientific studies that show that smoke-free laws have resulted in negative economic impacts to restaurants or bars. In 2013, a study was published by the CDC in the US that examined 216 smoke-free cities and counties in nine states that did not show any impact on employment or revenue for restaurants or bars. A 2010 study in Norway, which has a similar cold climate, did not show any negative impact to the revenues of pubs or restaurants. These are only a

small sample of the literature that documents no negative economic impacts to business. Across Canada, 40 municipalities, three provinces and one territory have smoke-free patio bylaws and legislation.

Outdoor smoking bans are supported by a majority of Manitobans. As MANTRA has found through its surveys, 67 per cent of Manitobans support smoking bans in outdoor patios of restaurants and bars, 65 per cent support bans on beaches and 61 per cent in public parks and green spaces. I will remind us all that with the exception of bars, all of these outdoor places are places where children can normally be expected to be.

With these points in mind, we therefore request that in addition to the positive restrictions being placed on e-cigarettes, that The Non-Smokers Health Protection Act be expanded to include smoking restrictions in the same outdoor spaces as the City of Winnipeg bylaw listed above and the outdoor patios of restaurant and bars. These legislative changes are unlikely to have significant impact on the most pressing issue in tobacco reduction, the large gaps in smoking rates and smoking-related harms between the general population and structurally disadvantaged groups.

It is nonetheless important that we not lose ground when it comes to the progress that has been made in reducing smoking rates in the general population while we also turn our attention to identifying and implementing approaches that effectively reduce the rates in low-income neighbourhoods, among First Nations, Inuit and Metis peoples and those experiencing mental illness.

Thank you.

**Mr. Chairperson:** Thank you very much.

**Ms. Crothers:** Thank you very much, Ms. DeCoteau. I appreciate your presentation this evening.

I'm sure you're very well aware that as of July 2014, we restricted tobacco from being used in provincial parks and also on beaches and playgrounds.

In terms of patios, certainly municipally, they are absolutely and currently do in some places, making their own guidelines around where smoking can take place, and that's still regardless of this legislation. They can still do that as well.

**Ms. Anderson DeCoteau:** Just for clarification for the record, it's actually Dr. Anderson DeCoteau, but—

**Mr. Chairperson:** Oh, okay, thank you.

**Ms. Anderson DeCoteau:** I think one of the reasons we would bring this to the provincial level is that I think it's important that there's consistency across the province. So I happen to actually live in the RM of St. Andrews, and when I go to the playground to watch my daughter play soccer or baseball, there are often parents smoking, and there's no signs about bans or things like that. And I think when people are playing sports, for example of this, it's important that there be consistency if they're travelling outside of the city here to somewhere else or if they're coming from outside of the city into here. And I think the same goes for patios, restaurants, et cetera, that a province-wide approach would really be the preferable way to go.

**Mr. Gerrard:** The—your primary recommendation here is to expand what's being done in the city of Winnipeg province-wide.

Can you give us an indication of what the situation is now? Is it just the city of Winnipeg, or do we have kind of a patchwork quilt of measures in different parts of the province?

**Ms. Anderson DeCoteau:** I do believe it's a patchwork, so I believe Brandon also has some outdoor bylaws. But I have to admit, aside from Winnipeg and Brandon, I'm not familiar with the other municipalities in the province.

**Mrs. Driedger:** Thank you for your presentation and, you know, the comments that you've made and interesting observations in terms of perhaps the patchwork situation that is going on throughout Manitoba, and I think a good idea maybe for the Province to have a look and see where all of that is at.

But thank you very much for your presentation, adding to the debate.

**Ms. Anderson DeCoteau:** I appreciate the comments and certainly the willingness to consider it further from a province-wide approach.

**Mr. Chairperson:** Thank you very much for your presentation.

Mr. Scott Jocelyn, Manitoba Restaurant and Foodservices Association, please.

Do you have a presentation, Mr. Jocelyn?

**Mr. Scott Jocelyn (Manitoba Restaurant and Foodservices Association):** I do not.

**Mr. Chairperson:** Okay, you may begin whenever you feel comfortable.

**Mr. Jocelyn:** Good evening. I'm Scott Jocelyn. For the last nine years I've been employed as the executive director of the Manitoba Restaurant and Foodservices Association. Thank you for this opportunity to share the association's position on Bill 30.

If you've heard—if you've ever heard me speak on behalf of association members, either at previous committee meetings or in the media, you've no doubt received the message that we hope for the day our operators will be able to function with less regulation. Please don't get me wrong. We work in an industry that needs to have regulation; however, operators are continually dealing with the changes—with the challenges of being in compliance in a multitude of areas, some of which are excessive and unnecessary. Having said that and at the 'rist' of—and at the risk of contradicting myself, industry needs regulation in dealing with e-cigarettes and is hoping for government assistance.

Since this issue first surfaced, our position has been to let smarter people—and there's a lot of those smarter people in the room tonight than me—but to let smarter people than us determine if e-cigarettes are as good for people as advertised. We focused our efforts on addressing the confusion, the existence e-cigarettes cause for our operators, their staff and their customers. Our position, stated in the most simplest of terms, is we'd like to see e-cigarettes have the same restrictions as regular cigarettes.

I'd like to thank the minister's representatives for the time they've given me during this process to state our position. We did have one concern with the bill. Our concern involved the proposed exemption in dealing with the permitted use in beverage rooms and casinos. I appreciated being able to speak with Minister Crothers at a meeting in April to explain our perspective on the exemption. I was happy to be joined at the meeting by my industry colleague, Jim Baker, president and CEO of the Manitoba Hotel Association, and I understand Jim stated his position to committee last week that the MHA, like our association, is not in favour of the exemption for hotel beverage rooms.

At that meeting with the minister I spoke to the challenges our industry faces when we have to

compete on an uneven playing field, and I look at Minister Allum, one of my good-luck charms here. He was obviously involved in the merger, the public consultations on the merger of liquor and lotteries, and one of the challenges that we had in serving beverage alcohols. When it's not consistent, when it's not equal, it's very, very challenging for the industry, and I thank him for some of the progress that we've made. I was appointed to a government committee looking at those regulation changes, and we've made a lot of progress.

So industry functions best when the rules are the same for everyone. With legislation, our operators want something they can point to, so our staff and customers have a full understanding of what they can and cannot do. We don't like to upset customers by trying to explain to them why they can't do something at my place but it's allowed if they go across the street to one of my competitors.

I don't want to go too far back in history, but just can't speak about smoking without mentioning the hardship the original ban on—had on operators. I was working in the industry at the time. There was definitely a re-education that had to occur. I think we still—there are operators that still feel that today, but I think, as we look at it today, there's no question that the smoking ban was the right thing to do. It's created a healthier environment for our customers and for our employees.

I have to admit we were very concerned when we heard the minister was considering exemptions for e-cigarettes, and we believe it had—if it had—we believe it would have been a mistake to proceed in this direction. I was happy to hear that, at the committee meeting on September the 9th, the minister referenced she's going to remove the exemption that would allow for the use of e-cigarettes in adults-only licensed premises. On behalf of our membership, I'd like to thank the minister for responding to our concerns. We are very happy to offer our support of Bill 30. I'd also like to thank the committee members for the opportunity to offer our perspective on this bill this evening.

Thank you for your time and for your questions.

\* (19:50)

**Mr. Chairperson:** Thank you very much.

**Ms. Crothers:** Mr. Jocelyn, thank you for coming to share your perspective. I will say, after our first meeting, it was not the perspective I was anticipating

you would have. But thank you very much for being very clear. I appreciate that.

**Mr. Jocelyn:** You're welcome. Thank you.

**Mr. Martin:** Scott, I always—just appreciate the perspective of the Restaurant and Foodservices Association, the work you do on behalf of your members on this. And in a lot of files we've had the opportunity to work together in the past, so I just want to say thank you very much for continuing the good work on behalf of your membership.

**Mr. Jocelyn:** Thank you very much, appreciate that.

**Mr. Chairperson:** And, Mr. Jocelyn, it was a pleasure working with you over the nine years.

**Mr. Jocelyn:** Thank you very much.

**Mr. Chairperson:** Thank you very much.

Jennifer Vasas. Jennifer Vasas from—private citizen.

**Floor Comment:** Jen had to step out to go to the washroom.

**Mr. Chairperson:** Okay, I'm sorry. She'll—her name has to drop to the bottom of the list, but there's not that many more people.

Steven Stairs. Steven Stairs, do you have documents to hand out?

**Mr. Steven Stairs (Private Citizen):** Yes.

**Mr. Chairperson:** Thank you, and you may begin as soon as the pages start handing out the documents.

**Mr. Stairs:** Can you hear me okay?

Well, I'd like to thank everybody for having me tonight, everybody for coming out. Good show, everybody.

I'm going to tackle this from a little bit of a different perspective. I'm going to talk to you about the medical marijuana perspective and how this could limit patients' reasonable access to medication.

A little bit of background: I'm a medical marijuana user, obviously, I would hope. I'm a regular guest on CBC morning show as well as the CTV News morning show and as well as CJOB's morning show, as well, regarding this subject. I'm also a Green Party of Canada candidate—wow, that's a hard one—in the current federal election, and I've taken time out this evening to talk to you about this because it is a very serious matter.

Currently, there are no limitations towards medical marijuana users vaping in public. It's constitutionally allowed because of the Charter of Rights and Freedoms allowing us charter 7, reasonable access to medication.

In late May, I was on CBC morning show, or actually the afternoon show, in rebuttal to Minister Crothers's appearance the day before regarding the proposed legislation. Comments were made by Ms. Crothers that indicated that there would be no concessions made regarding the limitation of medical marijuana users, and that in her own words, quote, she thought that they would be using marijuana at home, which I find to be a little misinformed and poorly educated subject on, and a comment, because I don't know why you would assume that any other patient using any other sort of medication would be forced to stay at home regarding that treatment. You wouldn't ask anybody else regarding any other treatment to be forced to stay at home. So I'm not quite sure of those comments and where they came from.

So, after that, I spoke to one of her assistants named Tim Smith, who is actually no longer employed at the office—not really sure why. He indicated to me that the minister would not have a problem with substances controlled under the controlled drugs and substances act, mainly marijuana, and that patients would be left out of any sort of infringement on their rights with this legislation. That was very enlightening and informative and also very warming. I felt very included in that conversation.

However, in mid-August I was denied entry to the Manitoba Law Courts Building because of the marijuana and vaporizer that I had on me at the time. That's a violation of my charter of rights right there, that I'm currently proceeding legal action regarding filing a human rights complaint against the Justice Department.

So I would like to know why, when I contacted Minister Crothers's office regarding this, her assistant told me that there would no longer be exceptions made for cannabis users and that I was basically on my own, quote, from one of her staffers. I believe her name was Tabitha, can't quote that for sure though. I find this very cold and, frankly, fairly rude, the fact that one department of the provincial government would tell me that I was A-okay, for lack of a better word, and then the Justice Department would infringe upon my rights several months later,

and then when, concerned with how that action happened, approaching the minister, I was given a fairly rude reception and basically told, tough luck.

Now, I'm not really sure where that comes from, but tonight we have an opportunity to ensure that patients have a Charter right to access their marijuana in this province in public just like anybody else should take their medicine.

I've included in the little pamphlet that you've got a few things. One, in the first two pages, is information regarding vaporizing marijuana, or cannabis, as it's called technically, provided by Health Canada's direct department regarding medical marijuana access regulations. So a lot of the references tonight have been regarding how does something exist without Health Canada regulating it, well, kind of circumventing that with Health Canada regulations regarding vaporizing. So you're allowed to vaporize based on doctors' recommendations, based on the medical practitioners' information that I've provided you.

The second—or the third page is a screenshot of the frequently asked questions about marijuana, and it's specifically highlighted that says, smoking is not recommended.

The fourth page that I included in there for you is a legal document from the legal counsel of the University of Manitoba guaranteeing my legal right to use and possess marijuana on campus and including my classroom, which was a great step forward in regarding precedent-setting cases regarding access to marijuana.

The fifth page is a little personal note for you. It's a Facebook post from something that happened a little while ago to me. After a recent doctor's visit, I was told that my glaucoma intraocular pressure was the lowest it's ever been due to my consistent use of marijuana and my regular use of my eye drops, which are from a marijuana extract, ironically.

So the idea that somehow I might be forced to limit my medical treatment in the future based on some misguided legislation is really kind of a weird point for me to have to challenge when you'd think that the opportunity would be there for the Healthy Living Minister to do some healthy living and ensure that patients can ensure they have rights to access.

So I'm not really sure how long my time is. I'm legally blind; I don't really respond well to visual cues. But I think I've made my point. So, if you have any questions, I'd really like to answer them.

**Ms. Crothers:** Mr. Stairs, thank you very much for coming.

So our bill doesn't cover controlled substances like medical marijuana because that falls under the federal Controlled Drugs and Substances Act, so what we're putting forward would have no impact for you.

**Mr. Stairs:** That's great. That's great clarification, and I'm glad I was able to get that, because through the constituency office and your ministerial office, I was not able to get that information. So I appreciate that.

**Mrs. Driedger:** Thank you, Mr. Stairs. Just a clarification for me. Thank you for your presentation. Are you indicating that marijuana can be used in a e-cigarette?

**Mr. Stairs:** I am not equating that. A marijuana vaporizer is a little different than an e-cigarette.

This is a marijuana vaporizer, looks a little different than an e-cigarette.

**Mr. Chairperson:** Sorry, sir. I'm sorry, sir. You can't show it. No props or things. Thank you.

**Mrs. Driedger:** You've made your point there. I hadn't been aware that there was such a different device for vaping marijuana, but thank you. That's added a whole 'nother' bit of information to this process, so thank you.

**Mr. Stairs:** You're welcome. I would—any education regarding the subject, I love to give.

**Mr. Chairperson:** Oh, just a second.

Mr. Smook.

**Mr. Dennis Smook (La Verendrye):** By using that vaporizer, does the vape from it have any effect on anybody who's beside you?

\* (20:00)

**Mr. Stairs:** Like, in return—in regards to, like, a second-hand vapour or second-hand smoke issue? No. Marijuana vapour is, honestly, very limited. All it is is, literally, the THC compound, Delta 9, being pulled out through moisture vapour, so literally all it is is water and THC, which dissipates far faster than any other sort of smoke, propylene glycol, anything like that. It's literally—you breathe it out and it's gone, just like if—like an asthma inhaler type of thing.

**Mr. Smook:** Thank you very much for your presentation.

**Mr. Chairperson:** We have now Shaun Croatto, and, hopefully, I haven't killed your name. You'll have to say your name when you get there.

Do you have anything to present, sir, handout? And how do you say your last name, sir?

**Mr. Shaun Croatto (Private Citizen):** My last name is pronounced Croatto.

**Mr. Chairperson:** Ah, close. And you may begin whenever you wish, sir.

**Mr. Croatto:** I'd like to thank you for the opportunity to address this bill to start off with. I won't bore you with the dry and long-winded science I will be speaking on. Rather, I have submitted copies of peer-reviewed research, cited studies with—oh my goodness—with footnotes and links to the actual studies.

I remember having my first cigarette at 10 years old. By 13 I was smoking three quarters of a pack a-day, and I was hopelessly addicted to tobacco, a product that I, as a young teen, had no problem obtaining on a daily basis.

Over 31 years I've tried every method imaginable to quit smoking, from patches to pills, from gums to lozenges, inhalers, acupuncture, laser therapy, hypnosis. I even tried some herbal remedies.

In 2013 I tried a cigalike, which is a pipe predominately made by the tobacco companies. I had no success either. It was expensive; it tasted terrible; it didn't feel at all like smoking; and I was turned off the idea of e-cigs.

Like many of you, I heard and read the reports of the negative effects of e-cigarettes and vaping in the media, and I wasn't prepared to go from one evil to another. I am a scientifically literate person with a great interest in the sciences. My curiosity led me to research e-cigarettes myself and the options available when I began to see success of people who were having with switching to vaping from smoking and heard their claims of greatly improved health.

I was disappointed to find that the public was being duped by well-funded entities using financial and political and media-based influences to perpetrate a slick campaign of lies, thinly veiled as science.

The intentionally deceitful propaganda that has fed the public is shamefully intellectually dishonest, scientifically incorrect, morally questionable, and counter-intuitive to the subject of public health and

safety. Imagine my surprise when I, a person who knows how to find, understand, and research this sort of data, to find that, in most cases, the scientific method was either not followed properly or was so terribly skewed in the compiling and submission of data through lies of omission and methods and condition of the experiments.

Studies were cherry-picked for extreme results to extreme parameters of testing and labelling them as baseline data. This is not good science. This is a house of cards meant to incite a specific reaction in all people, and it has infiltrated the mindset of the general public to foster a specific reaction. After all, vaping kind of looks like smoking, so if it walks like a duck, right?

Everyone has an opinion regarding vaping. Well, they like to call it an opinion because it sounds good and it gives a personal value. But choosing to be wrong is not an opinion. Wilful ignorance is not an opinion. This is a flaw in thinking that disallows new information to be accepted called cognitive dissonance.

This, ladies and gentlemen, is an opinion: I like pepperoni on my pizza and not chicken. This is an opinion because there is no right or wrong answer. To state that e-cigarettes are harmful to the user, the general public, and a threat to children is not a valid opinion according to mountains of research. It is choosing to be wrong. There are clear right and wrong answers to these questions at hand, and just because people want to believe intellectually dishonest version of information does not make it opinion; it makes it wrong.

When well-funded interest groups pay for science to give them results that they want, scientists will often bend the research and data compiling to the will of their benefactors. Not to say that they are doing bad science but using good science to get the results that they are being paid to get. The vape industry is not a co-ordinated group with funding and government grants to challenge this research, and by the time funds are raised to challenge pseudo-sciences, the damage has already been done in the public minds.

I do not speak lightly when I say that e-cigarettes may be one of the most important harm-reduction products of the last decade of our lifetime. To demonize such an important and virtually harmless product because charlatans say maybe it might one day possibly show negative side effects, if and when that day comes, we can deal with it. This is a slippery

slope, ladies and gentlemen. To treat anything as harmful when there is no compelling data, when there's compelling data to the contrary, opens the door to all sorts of wacky ideas like the banning of vaccinations because a fringe group of wags have found that some pseudo-science to support their claims that vaccines are harmful in the face of mountains of data that has debunked this.

I quit a 31-year addiction to e-cigarettes—or to cigarettes instantly with the help of vaping, the encouragement of my five children who insisted I give it a try, with the help of a knowledgeable vape shop vendor who guided me, assisted me to have the greatest success according to my specific needs.

I understand there is an interest by convenience stores and other businesses to influence legislation to allow them to sell vaping products and restrict the current methods used in vape shops. I submit that this is not a logical move.

There are many factors involved in vaping industry and its products that require knowledge, experience and the ability to take the time to educate the consumer properly. This cannot be achieved in a busy convenience store or a box department store where volume and speed of sale is a factor. This will indeed lead to lower rates of success in consumers, and in the case of advanced vaping methods and equipment, dangers will arise with the lack of education, service, understanding and level of good advice that will be available to the consumer.

The myriad of flavours available were not only pleasant and enjoyable but instrumental in my success in quitting smoking. As I was no longer smoking, the tobacco flavoured e-juices became less enjoyable to me, and I found myself seeking more and different flavours. I was happy to find that they allowed me to continue on my road to success. I am also happy that we can sample these juices before we buy them to make better decisions in purchasing them. This, too, is an integral part of my success. It is also integral to the success of vendors. If we cannot try before we buy, where's the incentive to buy locally? Why wouldn't I just order some e-juice from the United States if I don't get to sample them here? They're much cheaper out of the United States.

The generation coming up is more aware now and distrustful of governing bodies and its agents. This is because they know what has been perpetrated in the past for personal interests and not in the interests of the people.

You as legislatures—as legislators have a choice to make. You can choose to bow to pressures of well-funded groups servicing self-purpose using ideologies and fallacious information, or you could take the time to look over some of the studies that have been provided for you this evening I have submitted and others have submitted, and make informed, educated decisions based on correct information using good, unbiased science.

As public servants, it is incumbent upon you to work in the best interests of the people that you are working for. It is incumbent upon you to make informed decisions in the interests of Canadian citizens and Manitoba residents you represent. It is incumbent upon you to be honest in your dealings, and wilful ignorance is no excuse for making the wrong decisions when the information is available.

When future generations look back and judge the scourge of tobacco on human race, how is the role of government—and how the role of government allowed millions to become addicted to tobacco and die for a bit of tax money, what will they say about you? What will they say about legislatures who had the opportunity to be a part of helping hundreds of thousands if not millions of people live to quit, to enjoy good health again, to watch their children fail and succeed, to watch their grandchildren grow? What will they say about you if you deny people an opportunity to improve their quality of life because of slick, well-funded special interest groups and their campaign of disinformation that may have led you down the garden path?

**Mr. Chairperson:** Thank you, sir.

Questions?

\* (20:10)

**Ms. Crothers:** Mr. Croatto, thank you very much for coming this evening, and just to say something I've said several times already this evening, in terms of allowing vape shops and vape shop owners to continue to educate people and to allow people sample, that's something that's only happening in Manitoba's legislation. And I agree with you that it's not something we want to see in any number of stores. This is a specialty shop, and so one of the amendments I'm making is to make sure that the definition of that is clear, that it's for vape shop owners who predominantly are selling e-cigarettes to help educate and inform people. So thank you for coming this evening.

**Mr. Croatto:** Thank you very much.

**Mrs. Driedger:** Thank you, Mr. Croatto, for your information. And I just want to verify. You have found that you have been able to quit smoking through the use of e-cigarettes. Am I correct in saying that?

**Floor Comment:** Yes.

**Mrs. Driedger:** And then are you using the e-juice that—I'm learning all this new language now—are you using the e-juice that has nicotine in it, and what were you—what did you start at with the nicotine and where have you ended up? We heard of a gentleman last week who'd smoked for 50 years, and he started with something like 24 per cent or whatever and ended up at 0.6 and then 0.3—or no, I guess, he ended up at 12 per cent. Like, he was able to decrease that. Have you gone that same route or are—do you use it in a different way?

**Mr. Croatto:** I started myself because I was a heavy smoker, and not only was I a heavy smoker, I smoked filterless cigarettes. I started at 28 milligrams. Within a couple of months, I was down to somewhere around 20. And now a year later, I'm down to 3 milligrams.

**Mr. Chairperson:** Any other questions?

Thank you very much, Mr. Croatto.

**Mr. Croatto:** Thank you for your time.

**Mr. Chairperson:** Thank you for your patience.

Jim Chabai.

Jim Chabai? You have to help me—do you have anything to hand out, sir?

**Mr. Jim Chabai (Vapetastic):** No, I don't.

**Mr. Chairperson:** Okay, you may—how do you say your last name?

**Mr. Chabai:** You're pretty close. It's Chabai.

**Mr. Chairperson:** Chabai. Mr. Chabai, you may begin.

**Mr. Chabai:** Right, thank you. Good evening. My name is Jim Chabai. I'm—feel honoured to be here today as I'm glad that Manitoba has started to regulate the electronic cigarette market. Regulation will not only legitimize the industry but also provide safer vaping for Manitobans.

I started smoking cigarettes when I was 14 years old and continued to smoke cigarettes until I was 39 years old. I ordered an electronic cigarette from an American company, and once I received it I

never used tobacco cigarettes again. That was almost seven years ago. This happened right before my 40th birthday after 25 years of being a smoker.

I felt the effects immediately: lungs wheezing in bed before sleep, gone; smokers' cough gone; chest pains gone; blood pressure normal; lung X-rays normal; breathing excellent; teeth whiter; breath, I assume, a lot better. Can't verify that.

Years later, as more people started to use these products, I decided to open a small part-time online business called Vapetastic, selling these products, with the hope of helping people to make the switch. This was almost two years ago, and I was one of the first in Manitoba to open. I have years of experience in using the products and a good knowledge of products themselves, and one-on-one I can work with customers to help them find a product that will increase their chance of success. A convenience store will not be able to do that.

When I first heard of Bill 30, I read it and was extremely impressed at the forward thinking of the Manitoba government. I also listened to the honourable minister on CBC Radio discussing the bill and was surprised at the knowledge and understanding of what vaping is.

From the very beginning of my business, I've restricted sales to people 18 and over. Most, if not all, of the businesses in Manitoba have self-regulated with the same restriction. I do not market the products to kids, and I don't want kids to use the products. There are—these are products for adults who no longer want to smoke traditional tobacco cigarettes. We don't sell to kids. We do not market to kids.

I was here last week and enjoyed hearing the others speak. I was very concerned, though, about some of the amendments that were proposed, specifically, not allowing sampling of flavours in vape shops themselves. This serves absolutely no purpose and would really damage the industry in the province and the health of Manitobans. When reading Bill 30, the exemption of vape shops, to me, was a good thing as it will increase the success of a smoker becoming a non-smoker in an age-restricted environment, unlike the convenience stores, which are not age restricted, and I want to add, are still selling cigarettes to the public. To me, this is like selling liquor at AA meetings.

I don't want to see this amended. Those who have proposed this don't have, in my opinion, the

health interests of Manitoba–Manitobans in their agenda.

And, secondly, the use of flavourings, this is an important issue. As others have said tonight, all of the e-liquids sold to consumers have flavourings, all of them. They range from tobacco flavourings to fruits to desserts, and what you need to realize is that shortly after a smoker makes the switch, which may be a few days or weeks or months, they no longer crave tobacco-flavoured vapour and almost always choose something more palatable to their own tastes. It's akin to going to an ice-cream shop and ordering your favourite flavour. In every ice-cream shop I've been in, there are no tobacco-flavoured ice creams.

Vapers are not smokers; we don't smoke anymore. We don't want tobacco as part of our lives. We don't need to be reminded of tobacco every time we vape, which is why this is a huge mistake. We do not use flavourings to market to children. We do not sell to children; the flavours are for adults.

There is no stopping these products altogether. Millions of people are using them now in the world and by 2020 or 2025 should outnumber traditional tobacco cigarette users. Governments have been sitting on their hands for as long as I've been at it. It's time for a fair regulation, regulation that will promote the health of Manitobans best, and this will be allowing the public to purchase and use these products in their private homes or shops, specifically selling these products and being able to sample in an age-restricted environment.

As a vendor who has been in this industry for almost two years, I've literally met over 1,000 people face to face and have heard more success stories on these products than any other product combined. The typical consumer–customer is a mid-30s, mid-40s male or female with young children or just about to have children. The ones with children want to set an example and to stop tag teaming with their spouse in the garage. Customers—but customers do come from all walks of life. My mother is a 50-year-old ex-smoker who has diabetes and COPD and has been using these products for two years and her cough is greatly improved. Her doctor has approved her use of the products, anything to keep her from smoking.

I want to thank you for the opportunity to speak. I do have one last anecdote.

I sold a starter kit to a young man last week, and when I met him he looked rather young so I carded

him. After seeing his driver's licence and seeing his age I said, oh, you're 19, and he said to me with a very serious look, yes, I've been smoking since I was 15, and I really need to quit. My first thought in my head was he's young, he's fine. But then it hit me this young man has been smoking for a quarter of his life and to him four years is a very long time. And then I thought to myself if I was 19 again and the shops were open where I could give up cigarettes and try out these e-cigarette things, I—maybe I would've quit 30 years ago and how would my life have been different. Thanks.

**Ms. Crothers:** Mr. Chabai, thank you very much, and certainly we heard at the last committee hearing and this evening as well, the number of people that have been able to quit using tobacco or reducing it dramatically with e-cigarettes. So I appreciate you coming and sharing yours.

If I could quickly share a short anecdote, and then I'll let these folks get to questions.

I lived in Japan for about three years, and they actually do have nicotine-flavoured ice cream there; it's crazy. They also have much different smoking regulations there.

Anyway, I'm very appreciative for your attendance this evening. Thank you for coming.

**Mr. Chabai:** Well, thanks for the story. I wish I had done my research on Japanese flavoured ice cream.

**Mr. Chairperson:** What a way to end an evening.

**Mrs. Driedger:** Thank you, Mr. Chabai. Now, as a vendor of this product, what percentage of your customers have actually used this to quit smoking or did some come in and they just wanted to start to vape or what, you know, how many of them actually—what percentage use this as a way to quit smoking?

**Mr. Chabai:** As an online vendor I can't answer the question very accurately, but I would say 90 per cent or higher are smokers or are vapers, if that makes sense.

**Mrs. Driedger:** Yes. Then to follow up with that, if you do it online how do you ensure that children don't get a hold of this?

\* (20:20)

**Mr. Chabai:** Most of the business I do is local, although I do my due diligence with everybody who orders from across Canada. And I—

**Mr. Chairperson:** Ms.—oh, you can—Ms. Driedger, you can follow up really quickly.

**Mrs. Driedger:** Well, I think Dr. Gerrard—

**Mr. Chairperson:** Oh, okay.

Dr. Gerrard.

**Mr. Gerrard:** Thank you. Just in your experience, when you're—got customers coming in and you help them to start vaping and they're interested in quitting smoking, what kind of proportion of the people who come in and want to quit are able to quit? And, secondly, what proportion of those who quit continue using the vaping long-term?

**Mr. Chabai:** Well, I wish I could answer that with some degree of accuracy. I would say, honestly, 30, 40, 50 per cent are successful. Some of them are successful—well, it's still too early to tell. It's only been two years. But I do have customers that I've had for almost two years, and they still are buying the e-liquid. Some of my customers are off cigarettes and vaping completely, so they no longer order. So it's hard to tell for sure. And some—like, I'm only one of at least more than 20 vendors in the city.

**Mr. Chairperson:** Thank you very much, sir.

Now we have Clayton Olson. Clayton Olson.

Do you have a written presentation, sir?

**Mr. Clayton Olson (Private Citizen):** No, sir.

**Mr. Chairperson:** You may begin whenever you feel able to, sir.

**Mr. Olson:** Well, many of the issues that I've had have been covered, being later on in the list. I'm just a private citizen who's been vaping for a couple of years off and on.

There's been opinions whether it's a cessation device or not; for me, it definitely was. I started smoking when I was 13. In—which was 2013 and 2014, I lost my uncle to lung cancer who was very close to me. And I swore it off. I told myself I would never smoke again. Less than one year later, I was smoking over a pack a day through, you know, peer pressure, seeing kids doing it at school, thinking it was something cool to do, and from that point on, I was hooked. It—I agree with the age limitations on it and restrictions. The only thing that comes into my mind was, you know, being 15 or 16, if I had wanted to quit smoking and I wanted to try something like this, being told no, you have to sit and you have to wait and smoke another three years until you're old

enough to try this cessation device. I've tried, you know, I've tried the pills, patches, gums—never had much luck with them. The pills, I wouldn't give one to my worst enemy. Some of the medications, the side effects far outweigh even smoking, I would say.

You know, some of the opinions that were brought up tonight, like the smell of vapour could cause an ex-smoker to relapse. He also mentioned, you know, the smells of cotton candy and bubble gum appealing to children. Well, why would that cause an ex-smoker to relapse? I'm sure at least some of you have smoked in the past, and there is nothing similar to a cigarette to cotton candy, apple pie, butterscotch candies. It's a whole other world.

I understand that a lot of people feel that it appeals to children, but like it has been said, you know, the variety, not only is it marketing, you know, having a different variety of juice than your competitor or another shop, you know, it's a way for someone to keep vaping. If you restricted the flavourings and you had, let's say, a flavourless vapour, or if you restricted it to tobacco flavours, we'd lose countless people who wouldn't stick with it. You know, myself, I get very sick of the flavourings. One month, I'll be vaping something that tastes like cherries; the next month, I want something that maybe has a bit of a tobacco note to it or, you know, something completely different, and it allows me to have that variety, and it helps me continue vaping rather than smoking.

The argument that it is something that is simply replacing one addiction for another—I do not know one single vaper who has started at, let's say, 12-milligram nicotine and is now vaping a 32-milligram nicotine and going up and up and up. It's quite the opposite. And now, as the vaping industry grows, there's more and more options for that. You know, it used to be, you know, you could get down to a three-milligram nicotine or a two. Now they're going as low as a 1.5-milligram nicotine juice or a 0.5-milligram nicotine juice. Myself, I started at about a 12; now I'm down to a three. For a while, I was at zero. It's just—it's a personal preference, but I do believe that there will be a time where I don't—I no longer vape. It was something to help me quit smoking and it was quite successful. I've been well over a year now without a cigarette, and I can honestly say, no matter any regulations or restrictions, there's nothing that's going to drive me back to smoking.

One thing I feel is unfair, I'm a labourer, it's an industry that has a lot of smokers, and I don't go to

the smokers' section to vape. I feel that's not right. I have to go further. I have to go an extra block down the street. I have to go out of range because I don't want to smell that smoke. It makes me sick. And I do wonder, if I continue to be around it, is that going to make me go, this isn't cutting it, maybe I'll go buy a pack of smokes. You know, where's the right nut that now I have to end my smoke break a little bit earlier or my lunch break earlier because I'm two blocks down the street from the other smokers and I have a longer distance to get back to work. You know, it's comparing apples to oranges, and to put us in the same basket is just not fair.

There was a point made about some of the chemicals that could be leaked through buildings, not having a sealed building. You know, some of the studies I've read and seen, you know, a lot of these things, they can be—you'd be hard-pressed to have a three-meal-course day and not run into these things. And it is different when it's vaporized, but it is almost made to seem like we're just complacent and we don't worry about these things and, you know, someone has told us, this is better for you, and we're just going, okay, this is better for me, I'll vape now. You know, we all do tons of research. We do investigate.

And we're constantly, we—you know, the industry has been regulating itself. I don't know many shops in the city that will allow children into the shop. It's always been that way. I know several that, you look young, you get ID'd, and if you don't provide ID or you're not 18, you're asked to leave the shop. And, as far as the juice goes as well, I know several vape shops that—and juice manufacturers that are all getting their juice pharmaceutically and medically tested to make sure that they don't have dangerous levels of chemicals or dangerous chemicals in their juice that they're providing for vapers. So it is definitely something that we're not complacent, we're not just sitting by and accepting something that someone's handed down to us and told us, this is a miracle cure, it's perfect for you, you're—you know, you're just exhaling water and bubble-gum vapour and that's it, you know.

And with that, I just—I know that, you know, everyone's got a right to have their fresh air and a right to have their opinion and I just—you know, we're people too and we want our opinions heard and we want to maintain some rights and freedoms ourselves.

Thanks for letting me speak tonight.

**Mr. Chairperson:** Thank you, Mr. Olson.

**Ms. Crothers:** Mr. Olson, thank you very much for coming this evening. I appreciate that you stayed right 'til the end to be able to present. Thank you very much.

**Mr. Gerrard:** Thanks very much for your presentation.

Maybe you could clarify something for us. When you started vaping, did you quit immediately? What's the general experience? Can people by and large quit right away, or does sometimes it take a while after you've been vaping to be able to quit?

**Mr. Olson:** My own personal experience—and, of course, everyone is different—I'm a little bit of a cheapskate. Tobacco prices have been going up rampantly over the years. So originally I bought a vaping pen as a way to save money. I thought I could buy a pack of cigarettes, little bottle of juice, 12-milligram juice, didn't cost very much, you know, have a half a cigarette, put it out, have a few pulls on the vape and it would give me that nicotine and tide me over.

I found a flavour that I really loved, which is a white freezie, like a cream soda flavour. I fell in love with it, and little by little, I was grabbing the vape instead of the smokes, and eventually, after a couple of months, the smokes tasted terrible—terrible—to me. I was actually dripping the e-juice onto my cigarettes, which was giving me a bit too much nicotine then, but it made them—they still tasted gross, but they were tolerable.

\* (20:30)

I've heard stories of vapers that they bought their first kit and they tossed those cigarettes out and they never looked back. I think it all depends on a person's will power, how much they really want to quit smoking, if they've tried other methods and haven't worked. But, truly, everyone is different and I can only speak for myself on that.

**Mrs. Driedger:** Thank you very much, Mr. Olson. Do you know where the vape shops order their e-juice from?

**Mr. Olson:** It depends on the shop. There are shops that specialize in American juice lines, juice lines that are a bit more harder to get up here. So there is the vape shop that I frequent, my favourite, they only deal with local juice makers. There's quite a few that make juice locally in the city: Five Monkeys, Funk-e Joose, Divine E-Liquid, ILLiquid. There are several

that are made here, and it makes it easier to see, you know, how you are testing your juice, what you're putting into the juice. It makes it a bit easier than that, but there is juice coming from everywhere, from the Philippines to British Columbia, United States, the United Kingdom. You name it; they're making it.

**Mr. Chairperson:** Any others?

Thank you very much for your presentation, Mr. Olson.

Now, what happens is we call back the names of the people who were called the first time. Marianne Curtis. Is Marianne Curtis here? She will be removed from today's list.

Anne Maxwell? Anne Maxwell, she will be removed from today's list.

Jennifer Vasas? And we have Jennifer Vasas here. While she's coming up, I'd like to say thank you for all of you here. It's been a warm evening, and thank you for your patience and your participation.

Do you have something to hand out, Ms. Vasas?

**Ms. Jennifer Vasas (Private Citizen):** I do.

**Mr. Chairperson:** And you may begin once the pages get the material.

**Ms. Vasas:** Good evening and thanking you—and thank you for allowing me to speak on Bill 30, the non-smokers health protection and vapour products act.

I know over the last two days that have been assigned for the public to be heard on this bill, there's been a lot of scientific studies presented. Instead of adding to the list of studies, I'm going to present to you with the facts that vaping changes lives such as my own.

When I was 13 years old, I lit my first cigarette. No one pressured or coerced me to have that cigarette. It was something I wanted to do. Shortly after that I became addicted to cigarettes, a dependency that lasted for over 23 years, and it became a pack to a pack-and-a-half-a-day habit.

Like many smokers, I tried to quit by using several quit-smoking aids. I tried the gum, which tasted awful and didn't reduce my cravings in the least. I tried the patch because a number of the cigarettes I was smoking a day, my doctor recommended that I start with the highest strength patch. However, I had some allergic reaction and the

patch left burn marks on my skin where it was adhered. Instead of suggesting I try something else, my doctor suggested I wait until my skin healed and try it with the next highest dose. The strength left burn marks on my skin as well, as did the other strengths my doctor had me try. They did not stop the cravings.

Another doctor-approved method I tried was Zyban. Let me say that I would never do that again and truly, truly hope that no one who chooses that method goes through what I did while I was on that medication. While on that prescription, I had days that I still cannot remember. I went crazy, for a lack of a better word. After a while, my husband took away the Zyban and bought me a pack of cigarettes, saying he'd rather me smoke than to see my personality change as drastically as it did.

A few years went by and then I was introduced to vaping. This was before it was readily available here in Winnipeg, and I thought: What the heck, I'm just going to try it. I'm just about ready to try anything. After receiving the hardware and liquid I had purchased, it took all of two weeks to be completely rid of cigarettes. And as the days went by, I couldn't believe how far I had come. No other had-method worked so quickly and so well.

On the advice of a family member who resides in Montreal, Quebec, and had vape shops around her, she suggested I start it out with 18 milligrams of nicotine. And over the next year and a half, I weaned myself down to 3 milligrams of nicotine, which is where I currently am now. I am grateful to her for helping me during the beginning of my vape journey. Without her knowledge, I am not sure I would have succeeded.

Last October, I decided I wanted to become more involved in the vaping community than I already was through social media. I started working in a vape shop. It was there that I have seen the proof that vaping can help so many smokers. Day after day, week after week, they come into the shop excited about how far they have come and thinking the same thing that I had once thought: that I would never be able to kick the smoking habit. And now they have.

I consider myself an ex-smoker. I hate the smell of them, the taste of them, and the thought of one turns my stomach. But when you're a smoker, you tolerate all of that, if not enjoy it, for the smoker is addicted to smoking. If I did not have vaping, I am sure I would still be smoking.

Having the opportunity to try liquids first makes the transition from combustible tobacco to vapour much easier and pleasant. Many people who are making the switch look for something that tastes pleasing to them, be it something that tastes like a cigarette or something that tastes like fruit, dessert or even a beverage. Flavour is a key element in the success of a smoker switching, and trying these flavours before committing to a bottle is an important step in the process that our Manitoba vape shops provide. Another key element is having knowledgeable vape staff show you how to properly use an electronic cigarette. You see, there are many to choose from, and some are quite advanced. I want to make sure when a customer walks out of the shop that they feel confident using their electronic cigarette and have flavours that appeal to them.

I urge you all to go into a vape shop, see for yourself, talk to the owners, the managers, the staff. You can always contact me directly. We can set up a day, time, before, after, during business hours at the shop I work in, and I can show you everything that has to do with vaping.

To conclude my speech, I would just like to say that vaping is the only method that has helped me quit the debilitating habit of smoking cigarettes, and for the first time in over 23 years, I can now say that I am proof that vaping works as a quit-smoking aid. I am healthier, I can breathe easier, and I no longer have a horrible cough, and I am now an ex-smoker. Thank you.

**Mr. Chairperson:** Thank you very much, Ms. Vasas.

**Ms. Crothers:** Ms. Vasas, thank you, and as I've said before to other presenters here this evening who have used vaping as a way of quitting, congratulations. Sure you feel much better. I'm sure your family is also just as pleased for you. Thank you for coming.

**Ms. Vasas:** Thank you, yes. I have a—I have three children, and my daughter, she was about eight and half at the time that I quit smoking, and she actually ran up to me and hugged me and said, you don't stink no more. That was awesome.

**Mr. Gerrard:** Yes, perhaps you could tell us how long now you've—since you quit smoking, and if—and also give us a little bit of an impression of the people who come through the vaping spot, how many of those have—what proportion of them have been able to quit, who you've helped?

**Ms. Vasas:** It was two years on August 2nd since I had started vaping, where it was exclusively only vaping with absolutely no cigarettes. The ages are all over the place in the shop for people who come in wanting to start vaping. The majority of them are between 40 to, I would say, 60, 65 years old and some even older. There are people who have smoked for 10 years, people who have smoked for 50 years, all looking to quit tobacco. The majority of them that I have seen have succeeded. There are now a few that when they come into the shop, they're actually buying e-liquid for their partner because they no longer vape as well.

**Mrs. Driedger:** Thank you for your presentation, and I am the mother of a vaper, and he just started a few weeks ago, and he is at, well, three—he goes between three and six, and I'm very proud of him. The—it was something that—a decision he made on his own, and it is very successful. So I'm seeing that directly in my own family.

So thank you for your presentation. I think we're all learning a lot here through these public hearings.

**Mr. Chairperson:** Thank you.

**Ms. Vasas:** Thank you very much.

**Mr. Chairperson:** Thank you very much for your presentation and all of your presentations. They were very educational.

That concludes the list of presenters for tonight. Before we rise, it would be appreciated if the members would leave behind the copies of bills so they may be collected and reused next meeting. And the next meeting, the committee will be at the call of the House leaders.

The hour being—I have no idea—*[interjection]*  
8:38, what's the will of the committee?

**Some Honourable Members:** Rise.

**Mr. Chairperson:** The committee rise.

**COMMITTEE ROSE AT:** 8:39 p.m.

#### WRITTEN SUBMISSIONS

Re: Bill 30

My name is Melanie Koncur 43. I started smoking as a teen, I smoked for 30+ years, I started vaping over a year ago and I've never felt better, I breathe better, I don't get winded after working out, and nothing smells in my house or vehicle. This isn't a tobacco product, it's natural and if you looked at the ingredients in actual tobacco? Tons of poison, there's

nothing poisonous about vaping. It does not produce carbon monoxide. Saved me from poisoning myself and my family, and speaking of family, my children have zero interest in trying it..... that's all I can say right now, but vaping should not be equalized to tobacco, because it isn't, and bill 30 should be demolished, thanks

Melanie

Re: Bill 30

Greetings.

My name is Gerald Dales. I live in the neighborhood of Transcona in Winnipeg.

I am an ex-smoker. I smoked a little less than a pack a day for 16 years. I knew it was terrible for me, taking years off of my life. I would wake up every morning, clear the disgusting phlegm from my lungs that had accumulated over night, and reach for my pack of cigarettes to start my day.

I tried quitting smoking more times than I can count. I used Zyban, I tried cold turkey, I used the nicotine patch, I tried the nicotine gum. Nothing worked. The longest I lasted on any of those methods was a week. Finally, early in 2014, I decided that I wanted to see my now three year old son grow up and I went to my doctor and was given a prescription for Champix. When I started experiencing difficulty sleeping and fairly wild mood swings, I stopped taking the drug. I still wanted to smoke. Badly.

I read an article on the internet about vaping. I decided to try it out and headed to a local vape shop and purchased a starter kit. I haven't had a cigarette since, in the year and a half since I bought the kit. I no longer feel like I'm fighting to breathe when I climb to the second floor of our house. I no longer wake up and cough out the disgusting contents of my lungs every morning. I can taste food, and can smell fragrances better than I ever did as a smoker.

My wife, who has smoked for 24 years and has also run the gamut of methods in attempting to quit, is currently switching to vaping. She has progressed from a pack of cigarettes a day to perhaps a pack a week. Her short term goal is to stop smoking entirely. My step-father has switched to vaping recently, with my help, and has not had a cigarette in over a week. My father-in-law is currently vaping and has cut his tobacco consumption in half, with the goal of quitting smoking entirely. My sister-in-law

has started vaping and is all but quit smoking. My step-mother is also in the process of switching to vaping and has cut her cigarette consumption greatly.

I am well aware that long-term effects of e-cigarette use are unknown, but more and more, evidence is pointing to them being magnitudes of order less dangerous to ones health than cigarettes. Why on earth would anyone want to so heavily regulate (or outright ban) a device that is so effective in helping people to reduce or eliminate tobacco use?

More and more research is being done and more is being learned about not only their effects on those that use them, but on the effect of second hand vapor. The on-going research of Dr. Konstantinos Farsalinos (<http://www.ecigarette-research.org/>) should be mentioned as he has studied both of these aspects of this issue (including debunking a "study" stating that formaldehyde is present in e-cigarette vapor).

Organizations like MANTRA and the Heart and Stroke Foundation state that their goal is to reduce and eliminate tobacco use. The restriction or banning of e-cigarettes and e-liquids is counter to this goal. I can speak from personal experience and say that this is a technology that allows people to quit smoking, plain and simple.

That being said, I am not opposed to some regulation. Restricting sale to minors (which all vape shops already do) and legislating quality control measures for e-liquids are both actions that I am in favor of.

Please look at the research being done and listen to the testimony of people like me who used vaping to quit smoking, before restricting or banning a technology that I firmly believe has saved my life.

I vape and I vote.

Regards  
Gerald Dales

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Re: Bill 30

Hello,

This letter is concerning the new proposed legislation towards the vape shop industry. Whilst I strongly agree with such sections as not selling to under 18 and not allowing smoking in public areas, its seems absolutely ludicrous to take away flavours and not allow vaping in vape shops. Thomas Hinds has been able to continue to operate and allow their guests to smoke tobacco products in there establishment, yet the thing that's helping people get off tobacco is being treated as if it's well. . . cigarettes. The lung and health administration have worked very hard to get tobacco to the place it is today, and by attacking vapours it sets back years of progress in the fight against tobacco. How in this day and age a tobacco shop can still allow indoor smoking and sell a extremely wide variety of flavours and brands while vape shops are fighting for their life. These provisions will kill the industry in this province. An industry that is full of small business owners with hundreds of employees. This backwards view must change. Especially with having the UK government not only provide a study to show that there at least 95% safer than smoking, but to have their health ministry actually advocate its use. This is the government that we have modelled our own systems since the founding of this country. Not taking a note from there book would be a disaster to the local economy and worse yet, the health of thousands of vapours who will have to return to tobacco or never have a chance to quit.

Thank you for taking the time to read this and I hope the communities support will help you see the benefits of vaping. If you require and information please don't hesitate to contact me at the information provided below.

Regards,  
Christopher Britton  
General Manager  
Black Tie Vapour

The Legislative Assembly of Manitoba Debates and Proceedings  
are also available on the Internet at the following address:

**<http://www.gov.mb.ca/legislature/hansard/hansard.html>**