DOVER BOARD OF HEALTH
MINUTES
April 7, 2025
6:30 PM via Zoom

1. Call to order, roll call: Start time: 6:32 p.m.

   Present: Chair Kay Petersen, Member John Quackenbush, Member Stephen Kruskall, Health Director Jason Belmonte, Public Health Nurse Gael Varsa, Administrative Assistant Suzanne Hilts

   Also Present: Andrew Parker, Emily Weija, Ginny Chadwick, Isabel Tashie, Kate Silbaugh, Maureen Buzby, Peter Brennan, Stephen Helfer, Zachary Rich, Jonathan Winickoff, Jonathan

2. Citizen comments: N/A
3. Next meeting: May 12, 2025
4. Endgame Tobacco Discussion

Peter Brennan joins the Board representing the Convenience Store Energy Marketers Association, which includes 8,800 convenience stores in Massachusetts. He opposes the Nicotine Free Generation regulation and recalls the 2020 flavor ban's consequences that led users of flavored tobacco to seek products in other states or the illicit market. Brennan emphasizes the need for education and argues that banning nicotine for youth will not achieve the intended effects of the regulation's creators. He notes the limited number of retailers in Dover, asserting they should not be targeted by this regulation. ID checks at convenience stores ensure that only adults aged 21 and over can purchase nicotine and tobacco products. Chair Petersen inquires about documentation on the seizure of illicit nicotine products, and Brennan confirms he has the proper documentation and is willing to share it with the Board (Attachments 1-2).

Stephen Helfer, representing Cambridge Citizens for Smokers' Rights, urges the Board not to impose new tobacco and nicotine restrictions. The FDA reported on September 5, 2024, that teen smoking is at a 25-year low (Attachment 3). On January 16, 2025, the FDA authorized 20 types of Zyn nicotine pouches after extensive research, noting low teen pouch use (Attachment 4). Helfer argues that teens are not using these products and that retailers face steep fines for selling to underage users, stating these policies limit adult freedoms. He highlights that many local convenience stores are owned by immigrants of color, and increased restrictions will hurt their

businesses. Additionally, Helfer notes that the CDC indicates 2 out of 3 smokers quit, contributing to decreased smoking rates (Attachment 5). He states that quitting smoking does not lead to severe withdrawal effects like missing work, thus it doesn't rob people of their agency, although it is a challenging habit to stop.

Dr. Zachary Rich, a pulmonary critical care doctor at Boston Medical Center from Newton, MA, joins the Board to support the Nicotine Free Generation regulation. He treats patients with tobacco-related illnesses and often sees those with advanced lung disease who feel ashamed they can't quit smoking, an addiction that typically began in their teens. He emphasizes how difficult it is for many to overcome nicotine addiction. While acknowledging concerns about black market products, he believes these are overstated. He points out that adult initiation into tobacco use, such as at age 45, is a statistical anomaly if it wasn't started in youth. Chair Petersen asks about Newton's adoption of the regulation and Zachary's role. Zachary explains that his involvement was similar to today's—attending as a community member and urging the Board to pass the regulation for January 1, 2026. Newton independently chose to enact it earlier, on March 1, 2025, to reduce future tobacco users; the policy is now in effect. When asked about Newton's youth surveys, Zachary says he is not the best source but is aware of youth engagement. He also notes significant youth and adult smoker support for the policy in Natick.

Emily Weija, a private citizen from Cambridge, MA, joins the meeting to express her opposition to the Nicotine Free Generation regulation. She raises concerns about adult agency and liberty, emphasizing that current laws already set a legal age for tobacco purchases. Emily points out that other addictive behaviors—such as alcohol, gambling, and marijuana use—are permitted at age 21, arguing this regulation unnecessarily restricts adult choice. She notes that many people know someone who has successfully quit an addictive habit, summarizing that making personal choices is a key part of life.

Isabel Tashie, a student at Needham High School, joins the Board in support of the Nicotine Free Generation regulation. She works closely with the Needham Board of Health and is open to discussing their implementation of the policy. Isabel shares a message from Pippa Whiteley, a student at Dover High School (Attachment 6), noting that Pippa's experiences with nicotine use reflect a broader trend she has also observed at Needham and heard about from students at other schools. She shares a personal story about a friend who began using nicotine pouches ("Zyn") to

manage anxiety and because they were perceived as “cool” and “chill.” However, the addiction worsened her friend’s anxiety, leading to visible distress when she couldn't leave class to use nicotine again, having already done so recently. She emphasizes widespread student support for the regulation and notes nicotine and tobacco use as the leading causes of preventable death in the U.S. She adds that these products are marketed toward vulnerable groups, and urges the Board to adopt the policy. Chair Petersen inquires about student groups involved in this issue, Isabel confirms their existence, naming *Students Advocating for Life without Substance Abuse* (SALSA) in Needham and a similar group in Dover. She also participates in the statewide *84 Movement* through the Massachusetts DPH, which addresses tobacco and nicotine issues, especially unfair targeting practices. She offers to connect the Board with contacts from these organizations.

Ginny Chadwick, a PhD student at Brandeis University living in Somerville, MA, speaks in support of the Nicotine Free Generation regulation. Originally from Missouri, she served on the Columbia City Council and sponsored the Tobacco 21 Policy—one of the first of its kind in the country. She points out that Massachusetts is unique in being able to pass public health policies through a dedicated board, rather than going through city councils. Based on her work with committees across the U.S., she notes that convenience store owners often see this kind of regulation as unnecessary, arguing it addresses a problem that doesn’t exist. But she contrasts that with what she hears from youth, who say tobacco and nicotine use *is* a real issue. While smoking rates are at an all-time low, nicotine use isn’t, though it's down from a decade ago; youth use spiked in 2019 and was high in the early 2020s. She references a report from the Truth Initiative (Attachment 7), showing Massachusetts’ flavored tobacco ban led to an 86% drop in e-cigarette use and a 98% drop in flavored product sales. Ginny also acknowledges the presence of an illicit market, but says states like New York, California, and New Mexico have even higher rates, suggesting Massachusetts' black market isn’t just due to the flavor ban. She emphasizes that this policy is about gradually phasing out legal sales, not policing individual behavior, and encourages the Board to move forward with it.

Maureen Buzby, program manager for the Mystic Valley Tobacco Prevention Program from Melrose, MA, shares her recent visit to the State House for an annual awards ceremony, where she heard from youth speakers and State Legislators discussing efforts to limit youth access to nicotine and tobacco. As an inspector, she often brings youth on compliance checks, and while most retailers follow the rules, a significant number still sell to minors. Just before her State House visit, she went to a local store and bought three vape products: one shaped like a teddy bear, another like a guitar,

and a third that plays music via Bluetooth. Maureen points out that these products aren't aimed at adults trying to quit smoking; she feels they are designed to attract new, younger users with flashy designs and high nicotine levels, as companies look to replace their aging customer base.

Kate Silbaugh joins the Board in support of the Nicotine Free Generation regulation. She notes that Somerville has already passed the policy, and Natick appears to be moving toward drafting it—she attends this meeting following one in Natick, which included participation from Natick High School students. Reflecting on Needham's 2013 adoption of the Tobacco 21 policy, she recalls that while many towns kept the legal age at 18, Needham saw its youth smoking rates cut in half within a few years. Acknowledging the argument around adult choice, Kate argues that nicotine use nearly always starts in adolescence, adding that 90% of users begin as teens, and the rest typically start before age 26, which she notes is still within a key period of brain development. She states that adult decision-making would not lead someone to start using these products, given that two-thirds of users wish they could quit. Because youth often obtain nicotine from people over 21 within their social networks, phasing out sales for those over 21 would increase that distance and reduce access. Kate points out that, unlike alcohol or cannabis, nicotine is considered by the Surgeon General to be addictive in a way more comparable to heroin. She urges the Board to move the regulation forward to a public hearing, saying it could positively change teenagers' lives. In response to Chair Petersen's question about other towns considering the policy, Kate lists Somerville, Belmont, Arlington, Cambridge, Pittsfield, Natick, Amherst, Northampton, and Hopkinton as municipalities that have discussed or are planning to discuss it.

Dr. Jonathan Winickoff, a pediatrician from Brookline, MA, with 25 years of experience and over 50,000 child visits at Massachusetts General Hospital, speaks in strong support of the Nicotine Free Generation regulation. He has treated hundreds of young patients struggling with nicotine addiction, which he says can cause lasting harm to developing brains. He stresses that the regulation phases out the sale of tobacco products, which continue to evolve in ways that target youth. Echoing the Surgeon General, he compares nicotine's addictiveness to that of heroin and cocaine, noting its powerful withdrawal effects. Nicotine impacts brain development by upregulating acetylcholine receptors in key regions like the prefrontal cortex and is linked to compulsive use, reduced interest in non-drug rewards, and increased risks of depression, anxiety, ADHD, and suicidal thoughts. He explains that nicotine exposure can increase susceptibility to other addictive substances, accelerating a pathway toward broader addiction. Jonathan highlights the tobacco industry's strategy: getting

youth hooked on one product makes them more likely to use others, including cigarettes. He notes that smoking alone causes 490,000 deaths per year in the U.S., and the rise of new tobacco products among adolescents has reversed decades of progress. He points out that if a person can remain tobacco-free until age 26, their chances of starting after that are less than 1%. He argues that the regulation protects future generations' freedom by limiting access before addiction begins and that it works locally, even without widespread adoption. He references research in Needham, where youth tobacco rates dropped by half within three years, despite surrounding towns not implementing the same policy. Jonathan draws comparisons to public health actions like phasing out lead paint and asbestos, emphasizing this regulation is a gradual phase-out, not a ban. Nicotine will still be available through FDA-regulated, safer forms, such as pharmacy products and prescriptions, including resources like the Massachusetts quitline. He concludes by naming tobacco as the most harmful consumer product in history, causing more deaths annually in the U.S. than AIDS, alcohol, car accidents, illegal drugs, murders, and suicides combined, and more than all U.S. soldiers lost in World War II. He stresses that the regulation does not take away freedom but rather protects future generations from known harm, urging the Board to vote in support of a nicotine-free generation.

Jonathan, a resident of Quincy, MA, speaks in opposition to the Nicotine Free Generation regulation. He argues that restricting tobacco sales to those over 21 is discriminatory. He shares his personal belief that tobacco use improves his health, noting that black coffee and tobacco are calorie-free and help him focus. He also claims that smoke breaks lead to more honest and productive workers. Jonathan references World War II, recalling that U.S. troops were supplied with tobacco, which he believes contributed to their strength as allies. He suggests the Board should prioritize promoting healthy eating and exercise instead of pursuing this policy. He adds that smoking has been beneficial for him, while not smoking has caused him anxiety. He concludes by reiterating that encouraging non-smoking is, in his view, discriminatory, and urges the Board not to adopt the regulation.

Public Health Nurse Gael Varsa updates the Board on discussions she’s had with other towns that chose not to move forward with the Nicotine Free Generation regulation. She highlights Peabody, which has 42 nicotine vendors, and explains that the Board of Health there worked closely with retailers to improve compliance with existing laws. As part of their strategy, vendors signed on to the initiative and are now subject to evaluations and audits by the Board—a process Varsa says has had a positive impact on the community. She also mentions Brookline, where the town collaborated with physicians and Anthony Ishak, who has helped implement the regulation in several municipalities

near Dover. Brookline emphasized community education and eventually passed the policy. When Chair Petersen asks about Brookline's educational campaign, Varsa says it included extensive marketing. Member Quackenbush inquires about the role of the Brookline Select Board in the regulation's implementation. Varsa is unsure about the extent of their involvement. Member Kruskall notes that Brookline held three nights of Town Meeting on the matter. Chair Petersen asks why it went to Town Meeting, and Varsa isn't certain. Chair Petersen clarifies that in Dover, the Board of Health alone would most likely implement the regulation without involving the Town Meeting. She then asks Director Belmonte if he knows why Brookline handled it differently; Belmonte suggests it may have been passed as a bylaw rather than a Board of Health regulation.

Chair Petersen raises several questions for the Board to consider: How should they proceed if they choose to adopt the Nicotine Free Generation regulation, and is it sufficient for the Board of Health to pass it, or would a bylaw be required? Member Quackenbush expresses interest in consulting the Select Board and/or Town Council to better understand the appropriate process for adoption. Member Kruskall voices concern over the lack of local input, pointing out that none of the speakers at the meeting were from Dover. He emphasizes the need for a public hearing to gauge community sentiment before moving forward. Chair Petersen agrees and highlights the value of youth perspectives in the discussion. Director Belmonte adds that both local tobacco/nicotine retailers were invited to the meeting, but neither was able to attend. Public Health Nurse Gael Varsa shares that she's been in touch with school nurses and is willing to ask if any interested students would be open to participating in a future meeting to share their views. Chair Petersen expresses interest in learning more about the educational efforts that took place in Needham and Brookline following their adoption of the policy. Petersen encourages Board members to send ideas for gathering more information to Director Belmonte and Public Health Nurse Varsa. She acknowledges that this process will take time and says the item will likely return to the agenda in a few months.

5. Approval and acceptance of minutes:
    - March 3, 2025

    Member Quackenbush made a MOTION to approve the minutes from the March 25 meeting. Member Kruskall seconded the MOTION.

    All members voted in favor to pass the motion.

6. BOH Grant Discussion

Director Belmonte recalls the grant that the Board of Health received some years ago, which was partially intended to assist the digitization of files and online permitting. As the town has recently been awarded a grant towards this same purpose, which lacked the desired amount of money, Director Belmonte and Member Kruskall propose pooling the Board's grant funds with the town's newly granted funds.

Member Quackenbush states his support for the sharing of funds between the Board and the town. He highlights the importance of having all departments in the town be integrated with online permitting under the same system.

Chair Kay Petersen questions whether the sharing of funds would impact the Board's efficiency in digitizing files. She recalls the previous Board Chair's hope to expedite the process of digitizing files, and the involvement of others to ensure the Board received the funds for this project. It is her understanding that the warrant committee is in favor of implementing this software, and even in the grant did not come to fruition, they would recommend the town purchase it anyway.

Member Quackenbush made a MOTION to reach out to the town to merge the grant funding received for digitizing Board of Health records with the grant the town received to create a digital online permitting system, with the stipulation that Board of Health permitting be integrated into that overall system.. Member Kruskall seconded the MOTION.

All members voted in favor to pass the motion.

7. Animal Inspector Nomination

Health Director Belmonte requests that the Board take a formal vote to approve the nomination of Jennifer Cronin as the town's animal inspector and invites Board members to share their thoughts. Member Kruskall expresses hesitation, citing a past performance issue that makes it difficult for him to support her nomination.

Member Quackenbush made a MOTION to approve Jennifer Cronin's appointment as Dover's animal inspector. Chair Petersen seconded the MOTION.

The motion passed with a vote of 2 to 1; Member Kruskall opposed the motion.

8. Water Testing Non-Compliance

Director Belmonte seeks the Board's input on the follow-up procedure for households non-compliant with water quality testing. He explains the deed list received from the Assessor's office and the resulting audit, which enables the Board to follow up with these homeowners. In light of recent discussions on well regulations, he asks whether the Board would like to make any changes to the procedure, such as issuing a fine or warning letter.

Chair Petersen asks where the letters are being sent, and Director Belmonte clarifies that they are mailed to the corresponding property address and addressed to the owner. Member Quackenbush inquires about the letter's contents. Director Belmonte explains that it acknowledges the recent property transfer and outlines the requirement for a Title 5 inspection and water quality analysis. If the homeowner has complied, they may disregard the letter; if not, they may be subject to fines or other legal penalties.

Member Kruskall and Member Quackenbush agree that property sales should be contingent on the results of the required inspections. Member Quackenbush also notes the potential financial burden on new homeowners who inherit failed tests after purchasing the property.

Member Quackenbush asks Director Belmonte how follow-up is handled in other towns. Director Belmonte responds that many towns do not require well water testing. He notes that missing Title 5 reports can be addressed with a letter under the Title 5 code and that warning letters or fines could be issued under Dover's well regulations. He acknowledges that the Board has multiple options for shaping its follow-up procedure.

Chair Petersen asks how often properties change hands without submitting a Title 5 or well report. Director Belmonte responds that one or two properties each month typically fail to provide the required documentation. He adds that a clearer policy could reduce these occurrences and acknowledges that the current letter lacks specificity. He hopes to include clearer penalties once the well regulations are updated.

Member Kruskall states that a higher fine would be more effective than a lower one, noting that 20% of property sales in Dover are cash transactions. Chair Petersen asks Director Belmonte whether the Assessor's list includes information about the realtors involved in property transfers. Director Belmonte is unsure but suggests there may be ways to obtain that information, though the process is unclear. Chair Petersen also asks if property transfers can go unnoticed by the Assessor's office if a

deed is not registered. Member Kruskall affirms that some deeds may not be registered.

Chair Petersen explains her interest in realtor involvement, suggesting that some realtors may be more frequently associated with properties for which the Board lacks timely information—possibly due to a lack of diligence or awareness of the procedure. She expresses support for more personalized letters but is hesitant to support a fine as high as the one Member Kruskall proposed. Director Belmonte acknowledges Member Kruskall's point but is uncertain how much the Board is legally allowed to fine homeowners and commits to researching it further. He recalls that when he began working with the Dover Board of Health, there was no formal process for following up with non-compliant homeowners, and he now believes it is time to take more definitive action to ensure compliance.

9. Public Health Nurse Report

Public Health Nurse Gael Varsa shared her involvement in the upcoming health fair, where hands-only CPR training will be offered. She also highlighted her work with school nurses and follow-up with local families. Through her use of the MAVEN software, she has gained insights into flu and COVID-19 cases in Dover and surrounding areas, and coordinated outreach to affected populations. She added that her collaboration with the Dover Public Library and Council on Aging has strengthened her connection to the community, and she also noted her experience at the Dover Rabies Clinic.

Member Kruskall suggested that, in addition to reporting the absolute number of cases of illnesses, case rates would be more useful, especially given the challenge of comparing Dover's population (~6,000) to larger towns with populations over 15,000. Nurse Varsa acknowledged this and asked the Board how crucial it is to report this data through MAVEN, considering that many testing options are available outside of traditional doctors' offices and labs. Member Kruskall emphasized the importance of reporting data on certain diseases, particularly tuberculosis and measles, as well as communicable illnesses. Nurse Varsa agreed, noting Dover's high vaccination rate for these diseases but pointed out that a case of pertussis occurred in a fully vaccinated student in February. Chair Petersen remarked that no vaccine is 100% effective, and occasional cases, like this one, are to be expected.

Chair Petersen commended Nurse Varsa for her work, noting how positive it is to witness her

interactions with residents. Member Quackenbush inquired about the challenges Nurse Varsa faces and potential opportunities for improvement. Nurse Varsa replied that while serving the entire community is important, maintaining an approach that addresses the diverse needs of all residents is challenging as the town grows.

10. Old Business N/A

11. Adjournment

Member Kruskall made a MOTION to adjourn the meeting, seconded by Member Quackenbush. The meeting adjourned at 8:22 p.m.

Documents and Exhibits Used During this Meeting:
Draft Meeting Minutes of March 3, 2025
Attachment 1: Reason Foundation - The failure of Massachusetts' tobacco flavor ban
Attachment 2: Commonwealth of Massachusetts Annual Report of Multi-Agency Illegal Tobacco Task Force
Attachment 3: FDA - Youth Tobacco Product Use at a 25-Year Low, Yet Disparities Persist .
Attachment 4: FDA Authorizes Marketing of 20 ZYN Nicotine Pouch Products after Extensive Scientific Review
Attachment 5: CDC - Smoking Cessation: Fast Facts.
Attachment 6: Pippa Whiteley NFG Letter
Attachment 7: Truth Initiative - Strong state policies in California and Massachusetts significantly reduced youth access to flavored tobacco products.

Respectfully submitted,

Suzanne Hilts