States, Localities and Public Health

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I. INTRODUCTION

The tension between state and local control over regulation is a longstanding issue that has become increasingly contested over the past decade in areas such as public health. State preemption of local public health efforts is now widespread in the United States. Many of these state preemption laws built on earlier efforts by the tobacco industry to forestall local control beginning in the late 20th century. As public health research on the impact of electronic cigarettes and pesticides has evolved, so too have the efforts to prevent local governments from acting to regulate these products. Although the federal government also has an important role in regulating electronic cigarettes and pesticides, it is more often local and sometimes state governments that have driven more stringent regulation in recent years. This Article examines the role of local governments, and of state preemption, in shaping the law governing the use of electronic cigarettes and pesticides.

The current public health system in the United States is a multi-layered enterprise in which the federal government, states, and local governments

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2 Id.

participate in some form. The police powers of the states and localities are generally understood to include public health. The rise of public health in the United States reflected responses by both state and local governments to epidemics in the late 18th and 19th century, including yellow fever, cholera, and smallpox. Among the earliest significant interventions were those by local governments, such as quarantine and community sanitation.

Many municipalities established health departments beginning in the late 18th century, with Baltimore doing so in 1798, Charleston in 1815, Philadelphia in 1818, and Providence in 1832. In 1850, the Report by the Massachusetts Sanitary Committee recommended the creation of state health departments, with Massachusetts establishing the first such department in 1869 and 38 states following suit over the next 50 years. Local governments continue to play a leading role in public health in part because of the extensive health care and hospital systems owned or administered by city or county governments.

By many accounts, the United States is currently in the midst of a public health crisis. Life expectancy in the United States has generally declined in recent years. Even more troubling, rising deaths among young and middle age adults are key factors in explaining this decline. While earlier accounts focused on mortality changes among certain demographic groups, the latest data points to increased death rates at midlife for almost all demographic groups and in both urban and non-urban areas. While addiction and its consequences are central to explaining these trends, so too is a rise in heart disease, stroke, and chronic

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5 Id. at 166.
7 Id.
9 Id. at 10–11.
10 Id. at 12.
pulmonary disease, all of which are associated with the risks of smoking. While a major share of these early deaths is concentrated in the industrial Midwest, death rates increased for those age 25–64 in nearly every single state from 2010 to 2017. Despite the fact that the United States has the highest per capita health spending in the world, the early 21st century has posed a stark contrast to the consistent improvement in life expectancy over most of the 20th century. Life expectancy in the United States is nearly six years behind Japan and ranks below countries with significantly lower per capita income, such as Greece.

In responding to these growing public health challenges, many localities have confronted new challenges to their legal authority. Under the canon of construction known as Dillon’s Rule, localities had only those powers expressly granted by the state, implied from such express grants, or those which are indispensable so that localities can function. With the rise of home rule cities and the decline of Dillon’s Rule, the authority of localities to regulate expanded significantly. Since Missouri adopted home rule in 1875, many cities around the country have had significant power to regulate, especially in matters of local concern, such as public health. With home rule, localities receive a grant of power from the state and a limit on state control so that, among other things, the locality can decide on its own form of government and enact laws where the state has not acted. Nonetheless, the United States Supreme Court recognized the essential authority of states to withdraw powers from localities.

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14 Id.
16 Id.
17 Id.
21 Altman & Morgan, supra note 8, at 8.
23 Hunter v. City of Pittsburgh, 207 U.S. 161, 178–79 (1907) ("Municipal corporations are political subdivisions of the state," and "the [s]tate, therefore, at its pleasure may modify or withdraw all such powers . . . without the consent of the citizens, or even against their protest.").
Public health is among the most important responsibilities of local government. The tension between state and local governments over authority in this area reflects the divergent approaches to regulation between city governments and state governments. State preemption is increasingly moving in the direction of broad state laws that limit local authority, which in some cases raise the stakes significantly in terms of the potential consequences of local action.\textsuperscript{24} In recent decades, the expansion of local authority has encountered explicit state laws enacting preemption in broad domains of local interest and rulemaking. States have sought to “constrain, eliminate, and even criminalize local policy discretion across an array of policy domains.”\textsuperscript{25} In this latest version of state preemption, many states have passed laws simply to preempt local control rather than to adopt a statewide law that might trump local ordinances because of a comprehensive statewide approach to regulation. The purpose of such laws is increasingly “merely to strip local governments of the power to act.”\textsuperscript{26}

While some states, such as Ohio, have interpreted state preemption of local action to extend only as far as state general legislation exists, most state courts have not followed this approach.\textsuperscript{27} Even the more modest approach taken in California—interpreting state preemption as more protective of local government structure and local municipal contracts—has been rejected in neighboring states.\textsuperscript{28} As a result, localities across the United States are facing unprecedented challenges to their governing authority in the form of explicit state preemption laws, which are increasingly expansive in scope, and relatively few state courts have sought to limit such preemption, even in the absence of comprehensive state laws or regulation.

This Article will first examine in depth the experience of preemption of local authority with respect to the history of tobacco products and the use of electronic cigarettes. Next, it will turn to analyzing similar dynamics of preemption of local authority in the context of the regulation of pesticides and herbicides. Third, it will explore whether a public health exception might be emerging and how this concept might offer useful guidance to courts and legislatures in balancing public health against preemption. Finally, this Article

\textsuperscript{24} Richard Briffault, \textit{The Challenge of the New Preemption}, 70 STAN. L. REV. 1995, 1995 (2018) ("New preemption measures frequently displace local action without replacing it with substantive state requirements. Often propelled by trade association and business lobbying, preemptive state laws are aimed not at coordinating state and local regulation but preventing any regulation at all.").


\textsuperscript{27} See Briffault, supra note 24, at 2013.

\textsuperscript{28} Id.
will seek to situate these specific cases in the context of the broader challenges to local authority and the significance of these developments for public health innovation and democratic accountability.

II. ELECTRONIC CIGARETTES

Smoking is currently the leading preventable cause of death in the United States and accounts for approximately 480,000 deaths each year. Electronic cigarettes were initially hailed as a possible pathway to reduce the number of smokers of tobacco products. By 2019, it became increasingly clear that electronic cigarettes captured a new generation in terms of nicotine addiction. In a growing number of cases, the use of these products also contributed to acute lung disease, particularly among young people. While the logical market for a smoking cessation device would be existing smokers, the electronic cigarette industry deliberately and successfully targeted youth who had historically low smoking rates as a group, and leaders in the industry resisted limits on marketing to this group. According to the most recent survey of youth smoking by the federal government, 3.62 million middle and high school students used electronic cigarettes in 2018. More than one quarter of high school students reported vaping within the past 30 days.

The increasingly active role of localities in regulating electronic cigarettes reflects the limits of federal action in this area. The federal government strengthened the regulation of tobacco products with the passage of

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32 Id.; see also Outbreak of Lung Injury Associated with the Use of E-Cigarette, or Vaping, Products, Ctrs. for Disease Control & Prevention, https://www.cdc.gov/tobacco/basic_information/e-cigarettes/severe-lung-disease.html (last updated Jan. 28, 2020, 1:00 PM).
33 Creswell & Kaplan, supra note 31.
35 Id.
36 See Zarroli, supra note 3.
the Family Smoking Prevention and Tobacco Control Act in 2009. The Tobacco Control Act restricts tobacco advertising and promotion, prohibits the sale of such products to anyone under the age of 18, provides penalties against retailers which fail to enforce these age restrictions, bans all cigarettes with flavors except for tobacco and menthol, requires disclosure of the contents of tobacco products, and mandates larger and more visible health warnings.

The Tobacco Control Act did not explicitly cover electronic cigarettes but did grant the Food and Drug Administration ("FDA") the authority to regulate tobacco products. In 2016, the FDA finalized the “deeming rule,” which authorized the agency to regulate electronic cigarettes based on their nicotine content, which qualified them as “tobacco products.” The FDA highlighted at that time that the “deeming rule” would not further preempt state and local efforts focused on regulating electronic cigarettes. Despite emerging evidence of the health impact of electronic cigarettes, the FDA decided in 2017 to delay implementing this deeming rule and instead to engage in further research related to the risks posed by electronic cigarettes.

Included within the Tobacco Control Act was explicit language protecting the authority of states and localities to continue to regulate in this area. According to Section 916 of the Tobacco Control Act, localities are allowed to adopt and enforce any rule that is more stringent than the requirements under federal law. Certain types of regulation related primarily to the manufacturing

38 Id.
41 See Deeming Tobacco Products to Be Subject to the Federal Food, Drug, and Cosmetic Act, as Amended by the Family Smoking Prevention and Tobacco Control Act; Regulations on the Sale and Distribution of Tobacco Products and Required Warning Statements for Tobacco Products, 79 FED. REG. 23142 (May 10, 2016) (codified at 21 C.F.R. pts. 1100, 1140, 1143).
and production of tobacco products are largely preempted under the Tobacco Control Act.\(^{45}\) However, the Act also protects state law related to product liability for tobacco products.\(^{46}\) Thus, the expanded authority of the federal government was designed to supplement, rather than displace, existing state and local regulatory authority related to tobacco products by combining elements of prior health laws that limit preemption.\(^{47}\)

Prior to the passage of the Tobacco Control Act, states and localities adopted and implemented a range of laws designed to limit the harms associated with tobacco products. In some cases, federal laws related to cigarettes had explicitly preempted state and local action in regulating tobacco products. For example, the Federal Cigarette Labeling and Advertising Act of 1965 ("FCLAA") included language that prevented state and local governments from regulating cigarette advertising.\(^{48}\) Nonetheless, localities catalyzed efforts to restrict the location of advertising beginning with Baltimore's 1994 ban on billboards for cigarettes in certain parts of the city where children would be most likely to see them.\(^{49}\) In 1995, a federal appeals court unanimously upheld the Baltimore ordinance.\(^{50}\) By 1998, the 25 cities with the largest populations in the United States had adopted similar restrictions.\(^{51}\)

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\(^{45}\) Id. (codified at 21 U.S.C.A. § 387p(a)(2)(A) (West 2020)) ("No state or political subdivision of a State may establish or continue in effect with respect to a tobacco product any requirement which is different from, or in addition to, or more stringent than, requirements established under this chapter . . . .").

\(^{46}\) Id. 123 Stat. at 1824 (codified at 21 U.S.C.A. § 387p(b) (West 2020)) ("No provision of this chapter relating to a tobacco product shall be construed to modify or otherwise affect any action or the liability of any person under the product liability law of any State.").


\(^{48}\) Federal Cigarette Labeling and Advertising Act § 1334(a), 15 U.S.C.A. § 1334(a) (West 2020) ("[N]o statement relating to smoking and health, other than the statement required by section 1333 of this title, shall be required on any cigarette package."); Id. § 1334(b) ("No requirement or prohibition based on smoking and health shall be imposed under State law with respect to the advertising or promotion of any cigarettes the packages of which are labeled in conformity with the provisions of this chapter [15 U.S.C. §§ 1331–1341].").


\(^{50}\) Id.

Localities also led the way in terms of protecting residents against the harms from second-hand smoke with smoke-free laws.\textsuperscript{52} In the 1970s, many activists focused on the risks inherent in second-hand smoke and sought to limit smoking in public places.\textsuperscript{53} By 1974, 64 cities restricted smoking in public places in some form, and more than 100 other cities followed suit by 1976.\textsuperscript{54} By 1986, the Surgeon General of the United States issued a major report highlighting the health consequences of "involuntary smoking."\textsuperscript{55}

Beginning with San Luis Obispo in 1990, many cities created more comprehensive ordinances against smoking in public places.\textsuperscript{56} Following these local efforts, in 1998, California became the first state to require that all workplaces, restaurants, and bars be smoke-free.\textsuperscript{57} Overall 3,397 municipalities restrict where smoking is allowed in the United States.\textsuperscript{58} By 2011, nearly 80% of people living in the United States were covered by 100% smoke-free air legislation in workplaces, restaurants, and bars.\textsuperscript{59}

The expansion of smoke-free policies prompted efforts by the tobacco industry to preempt local regulation through state laws.\textsuperscript{60} The tobacco industry recognized the significance of these laws and began to seek state laws preempting local action.\textsuperscript{61} Tobacco lobbyists correctly saw local control as a threat because of the strong responsiveness of this level of government to concerted citizen pressure.\textsuperscript{62} As one tobacco lobbyist explained: "state laws which preempt local anti-tobacco ordinances are the most effective means to counter local challenges."\textsuperscript{63} Between 1992 and 1998, 31 different states passes laws preempting local tobacco regulation.\textsuperscript{64} Among other things, these laws

\begin{thebibliography}{99}
\bibitem{53} \textit{Id.}
\bibitem{54} \textit{Id.}
\bibitem{55} \textit{Id.}
\bibitem{56} \textit{Id.}
\bibitem{57} \textit{Id.}
\bibitem{58} \textit{Id.}
\bibitem{59} \textit{Id.}
\bibitem{60} Milov, supra note 52.
\bibitem{61} \textit{Id.}
\bibitem{62} \textit{Id.}
\bibitem{63} \textit{Id.}
\end{thebibliography}
barred strong local regulation related to advertising, youth access, or smoke-free requirements. Although 915 local communities have enacted comprehensive smoke-free laws, only half of the states have done so. In 14 states, there are no comprehensive statewide smoke-free laws, and in 11 other states, there are laws which cover some, but not all, of the covered sites such as workplaces, restaurants, and bars. The forms of state preemption of local action vary from express preemption, to ambiguous express preemption, to implicit preemption, to preemption through statutes of general application. Although 7 states repealed laws preempting indoor smoking bans between 2004 and 2017, at least 12 states still retain some form of preemption of such local regulation.

In the wake of major tobacco litigation in the 1990s, the states collected $27.5 billion from the tobacco settlement. Many states imposed high taxes on the purchase of cigarettes, which particularly discouraged young people from smoking. The major tobacco companies also faced sharp limits on marketing products to youth. The Master Settlement Agreement between the states and

65 Id.
67 Michael Tynan et al., State and Local Comprehensive Smoke-Free Laws for Worksites, Restaurants, and Bars—United States 2015, CTRS. FOR DISEASE CONTROL & PREVENTION (June 24, 2016), https://www.cdc.gov/mmwr/volumes/65/wr/mm6524a4.htm.
68 Id.
69 Untangling the Preemption Doctrine in Tobacco Control, supra note 51. For an example of express preemption, see South Dakota legislation that “withdraws from local governments the authority to adopt tobacco control measures and centralizes it in state legislature as ‘exclusive regulator.’” Id. at 5. For an example of ambiguous express preemption see South Carolina: “Any laws, ordinances, or rules enacted pertaining to tobacco products or alternative nicotine products may not supersede state law or regulation.” Id. at 9. For an example of preemption by statutes of general application, see Iowa: “A county shall not adopt an ordinance, motion, resolution, or amendment that sets standards or requirements regarding the sale or marketing of consumer merchandise that are different from, or in addition to, any requirement established by state law.” Id. at 12.
72 Id.
73 Id.
the tobacco industry in 1998 specifically limited the ability of the industry to advertise to young people.\(^7\) As a consequence of these developments, the smoking rate in the United States dropped by half between 1965 and 2006 before the introduction of electronic cigarettes.\(^7\) Youth smoking dropped alongside this overall trend.\(^7\)

The recent expansion of nicotine use by young people because of electronic cigarettes is a dramatic reversal of recent overall trends of youth smoking.\(^7\) In the decade after the federal Tobacco Control Act became law in 2009, electronic cigarettes became much more popular and reversed the trajectory in terms of youth using nicotine products.\(^7\) Between 2011 and 2015, the use of electronic cigarettes by high school students grew by 900%.\(^7\) Youth smoking has particular significance because of the impact of nicotine on the still developing brains of young people.\(^8\) Youth smoking is central to the overall patterns of adult smoking as well because individuals who do not smoke by age 26, have only a 1% chance of becoming smokers.\(^8\) On the other hand, those who use electronic cigarettes are seven times more likely to also use traditional cigarettes in the following year.\(^8\)

In 2017, the Commissioner of the FDA extended by an additional four years the deadline for electronic cigarette companies to submit applications to the FDA to stay on the market.\(^8\) In the year that followed, electronic cigarette use by high school students increased by 78%, while use by middle school

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\(^7\) Id.

\(^7\) Cigarette Smoking Among Adults—United States 2016, CTRS. FOR DISEASE CONTROL & PREVENTION (Nov. 9, 2007), https://www.cdc.gov/mmwr/preview/mmwrhtml/mm5644a2.htm.

\(^7\) Id.


\(^7\) Id.

\(^7\) Chelsea Whyte, Vaping by US High Schoolers Has Increased by 900 Percent, NEW SCIENTIST (Dec. 9, 2016), https://www.newscientist.com/article/2115714-vaping-by-us-high-schoolers-has-increased-by-900-per-cent/.

\(^8\) See Zettler et al., supra note 42.


\(^8\) Creswell & Kaplan, supra note 31.
students increased by 48%.84 One company, JUUL, dramatically expanded its market by increasing the nicotine level in its product to extremely high levels in part to appeal to skeptical retailers.85 The company also used social media influencers with many followers on platforms such as Twitter, Facebook, Snapchat, and Instagram to actively promote its product among young people.86 In the face of a lawsuit from the Center for Environmental Health, nearly every company in the industry agreed to a settlement that prevented marketing to youth.87 However, JUUL initially refused to sign this settlement and continued marketing to youth a product which mentioned in tiny type that it contained nicotine.88 Only in 2018 did the FDA formally require any nicotine warning label on the packaging.89 By contrast, the European Parliament banned all advertising of electronic cigarettes and required explicit health warnings on all packaging.90

Even before the acute health risks posed by electronic cigarettes and vaping became clear, some states and local communities sought to regulate this rapidly growing industry. By June of 2019, 15 states already regulated youth access to electronic cigarettes and required purchasers to be 21 years old.91 However, in all but four of these states certain exceptions applied.92 In addition, 15 states applied taxes on the purchase of electronic cigarettes.93 A number of states also sought to require age verification for the internet purchase of tobacco

85 Creswell & Kaplan, supra note 31.
86 Id.
87 Id.
88 Id.
89 Id.
92 Id.
93 Id.
products. At the same time, however, eight different states explicitly preempted localities from passing local ordinances regulating electronic cigarette use.

Some localities similarly sought to limit the sale of flavored tobacco products. Although the Tobacco Control Act did not explicitly cover electronic cigarettes, its ban on flavored cigarettes reflected the recognition that such flavors contributed to youth smoking. Among youth who report using electronic cigarettes, 81% responded that they use the product because it is available in flavors which they like. For the largest seller of electronic cigarettes, JUUL, mint pods represented 70% of its sales while menthol flavor represent an additional 10% of its sales.

In the wake of the Tobacco Control Act, many localities enacted even more expansive bans on flavored tobacco products. In 2012, Providence, Rhode Island adopted an ordinance banning the sale of flavored tobacco products, which was challenged under both state and federal preemption and upheld by the First Circuit. In another case, the Second Circuit suggested a complete tobacco flavor ban would withstand federal preemption analysis. While flavor bans

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99 See Nat’l Ass’n of Tobacco Outlets, Inc. v. City of Providence, 731 F.3d 71, 85 (1st Cir. 2013) (“[B]ecause the Flavor Ordinance is an appropriate sales regulation that is expressly preserved by the FSPTCA, it . . . is not preempted. Neither ordinance, moreover, conflicts with state law because Rhode Island has not occupied the field of tobacco regulation, and National Association has not raised a direct challenge to the relevant licensing provision that bears on the ordinances’ enforcement.”).

100 U.S. Smokeless Tobacco Mfg. Co. v. City of New York, 708 F.3d 428, 433–34 (2d Cir. 2013) (finding a New York City ordinance banning the sale of non-cigarette tobacco products outside of tobacco bars was not preempted by TCA, which forbids states from banning the manufacturing of tobacco but allows states to regulate or ban the sale of tobacco). The court reasoned “the preservation clause of § 916 expressly preserves localities’ traditional power to adopt any ‘measure relating to or prohibiting the sale of tobacco products.’” Id. at 433. Further, “it does not follow that every sales ban—many of which would likely have some effect
have generally survived federal preemption, more direct regulation of manufacturing processes to ensure the quality of electronic cigarettes and vaping products has not.\textsuperscript{101}

Local bans on flavored tobacco products beyond federal requirements have more recently been extended to cover electronic cigarettes. In 2015, Sonoma County adopted a ban on the sale of flavored products including electronic cigarettes, and it was soon followed by other counties and cities.\textsuperscript{102} These flavor bans built on the approach already in place in many jurisdictions for tobacco products. Many cities responded to rising rates of youth smoking by banning or restricting the sale of flavors.\textsuperscript{103} In San Francisco, a successful voter initiative prohibited selling flavored vaping products with the support of more than two-thirds of voters despite $12 million in opposition advertising by the tobacco industry.\textsuperscript{104} Over 250 local governments established such restrictions on the sale of flavored products, including 168 in Massachusetts, 59 in California, 11 in Minnesota, 6 in Rhode Island, 5 in Colorado, and 3 in New York.\textsuperscript{105}

Many other localities expanded the definitions within existing ordinances to encompass electronic cigarettes. Los Angeles expanded its definition of smoking to include electronic cigarettes in order to extend smoke-free area laws to cover new forms of nicotine use.\textsuperscript{106} In Arizona, several cities including Tempe, Flagstaff, and Tucson similarly extended the definition of tobacco products to cover electronic cigarettes.\textsuperscript{107}

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\textsuperscript{101} Legato Vapors, L.L.C., v. Cook, 847 F.3d 825, 828 (7th Cir. 2017) (finding that an Indiana law was unconstitutional because it imposed requirements on how out of state manufacturers of electronic cigarettes managed their facilities and the Tobacco Control Act forbids different or additional requirements related to manufacturing from those enacted by the federal government).
\textsuperscript{103} \textit{Id.}
\end{flushleft}
State and local laws which raise the age for the purchase of nicotine products can have a dramatic impact.\textsuperscript{108} Both Hawaii and California raised the age for cigarette smoking and rates of use by teenagers fell substantially in both states.\textsuperscript{109} In California, survey data found that high school cigarette smoking was more than cut in half from 2016 to 2018. However, the percentage of young people using electronic cigarettes in the state increased from 13.8\% to 17.3\% by 2017.\textsuperscript{110}

Local laws and enforcement related to the use of electronic cigarettes have also had significant impact on the rate of youth smoking. In Southern California, young people living in weak local enforcement areas reported that they used electronic cigarettes because they were less harmful and more acceptable as compared to those living in high enforcement jurisdictions.\textsuperscript{111} While only 36\% of young people in high enforcement areas believed that vaping was less harmful than cigarettes, 50\% held the same belief in low enforcement areas.\textsuperscript{112} In addition, 38\% in weak enforcement localities reported that being able to use electronic cigarettes in places where smoking was banned explained their use in contrast with only 18\% in strong enforcement areas.\textsuperscript{113}

Beginning in 2019, more than 2,300 people became seriously ill after vaping, and 47 people died as a result of these illnesses.\textsuperscript{114} Public concern over these illnesses sparked greater action by local governments to step into the regulatory breach. A number of state governments also took dramatic action to limit the use of electronic cigarettes.\textsuperscript{115} Massachusetts imposed a broad ban on the product for a four-month period.\textsuperscript{116} Several states enacted bans on the sale of flavors for vaping. Michigan, Oregon, Rhode Island, and Montana imposed a six-month flavor ban,\textsuperscript{117} while Washington imposed a four-month flavor ban.\textsuperscript{118}

\begin{thebibliography}{9}
\bibitem{109} Id.
\bibitem{111} Hanna Hong et al., \textit{The Impact of Local Regulation on Reasons for Electronic Cigarette Use Among Southern California Young Adults}, 91 \textit{Addictive Behav.} 253, 253 (2019).
\bibitem{112} Id.
\bibitem{113} Id.
\bibitem{116} Id.
\bibitem{117} Id.
\bibitem{118} Id.
\end{thebibliography}
and New York established a three month flavor ban excluding menthol.\textsuperscript{119} This rapid state action built on the broad responses by local communities around the country to establish restrictions on the sale of flavored tobacco products.

The lessons and tactics of tobacco preemption have been utilized once again in the context of electronic cigarettes. A number of states enacted legislation preempting local regulation of electronic cigarettes modeled on the earlier tobacco preemption efforts.\textsuperscript{120} States such as Florida, Michigan, New Hampshire, North Carolina, Oklahoma, South Dakota, Tennessee, Utah, Virginia, and Wisconsin enacted preemption of local electronic cigarette regulation.\textsuperscript{121} In addition, statewide laws purporting to raise the age for access to electronic cigarettes often included new limits on local action to regulate the industry. For example, in Arkansas, JUUL supported a law raising the smoking age from 18 to 21, but this same law prevented localities from regulating more stringently than the state.\textsuperscript{122} In Florida, similar proposed legislation to raise the smoking age included language preempting local ordinances related to the sale and marketing of tobacco and electronic cigarette products.\textsuperscript{123}

Raising the smoking age does hold significant promise for reducing youth smoking rates and localities are driving state action in those states where that is possible. Overall, 94\% of smokers begin before the age of 21.\textsuperscript{124} At the same time, 81\% start before the age of 18.\textsuperscript{125} According to the National Academy of Medicine, raising the age of sale to 21 would reduce by 12\% the number of future adult smokers,\textsuperscript{126} while reducing the initiation of smoking by 15 to 17 year olds by 21\%\textsuperscript{127} and the initiation by 18 to 20 year olds by 15\%.\textsuperscript{128}

\begin{thebibliography}{999}
\bibitem{119} Id.
\bibitem{121} Id.
\bibitem{125} Id.
\bibitem{127} Id.
\bibitem{128} Id.
\end{thebibliography}
initially led the push for raising the age on tobacco purchase, as of 2019, at least 18 states increased the level for purchasing tobacco products to 21.\(^{129}\)

In the context of the acute health crisis related to vaping, at the end of 2019, the United States Congress passed legislation raising the national age for the purchase of tobacco products to 21.\(^{130}\) While the new law requires random inspections of retailers to ensure compliance, it also dramatically reduces the cost for states that fail to enforce in this area. Instead of losing up to 40% of its state block grant based on non-compliance, the state penalty would not exceed 10% of the grant, and these funds could be directed to compliance instead.\(^{131}\) In addition, the states have a grace period of three years before any such penalties would take effect.\(^{132}\) Federal enforcement faces challenges as evidenced by recent trends in non-compliance even before the passage of this new law. In 2019, the FDA oversaw inspections in a little more than one-third of known tobacco retailers.\(^{133}\) In recent years, the violation rate has increased from just 5% in 2011 to approximately 12% in the past year.\(^{134}\) Therefore, state and local enforcement initiative in independently regulating youth access will likely remain important at least for the near future as the new federal rule is not enforceable for several years and the reach of federal enforcement remains somewhat limited.

At the local level, many more localities responded to the health crisis by adopting more sweeping flavor bans. A number of major cities and counties have subsequently enacted at least temporary flavor bans, including New York, Oakland, Sacramento, Long Beach, and Los Angeles County.\(^{135}\) San Francisco has since enacted a ban on the sale of electronic cigarettes as of early 2020, and some other localities have adopted similar bans.\(^{136}\) Localities have also led the way in including electronic cigarettes in ordinances that designate smoke-free venues. Over 900 local laws restrict the use of electronic cigarettes in smoke-free


\(^{133}\) Siddons, *supra* note 110.

\(^{134}\) *Id.*

\(^{135}\) Bach, *supra* note 105.

venues, and almost 700 laws restrict such use in other settings. In California, a total of 45 local communities include electronic cigarettes in their smoking ordinances.

These local responses to youth vaping were, until recently, a stark contrast with federal inaction. In 2018, the FDA announced that a flavor ban would be coming within 60 days because just as "flavors in food products can trigger reward pathways in the brain and influence decision-making[,] [f]lavors in tobacco products can also trigger reward pathways in the brain and additionally enhance the rewards of nicotine." Later, the Secretary of Health and Human Services cancelled a planned press conference announcing the new restrictions. In the beginning of 2020, federal regulators did announce a ban on the sale of pre-filled flavored electronic cigarette cartridges except for menthol. However, this action does not prohibit alternative mechanisms for using flavors in vaping products and specifically exempts products sold in devices which cannot be refilled which are now growing in popularity with young people. As a result, local and state efforts to regulate electronic cigarettes are likely to remain important in driving the response to recent upward trends in youth smoking and electronic cigarettes.

III. GLYPHOSATE BASED HERBICIDES

In recent decades, a series of fast acting organophosphates have become widely used both for landscaping and for agriculture. Approximately 78 million households in the United States apply chemical pesticides or herbicides

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to their lawns and gardens. One of the most common chemicals used is glyphosate, the major ingredient in the product known as Roundup, which is the most used herbicide in the country. Its widespread use in agriculture has grown exponentially over the past two decades. Approximately 298 million acres of farmland in the United States apply Roundup or similar glyphosate-based products to deal with concerns about weeds. In many cases, these crops are planted with built-in resistance to glyphosate and are known as Roundup Ready crops. In just over 15 years, the use of these products on leading agricultural crops increased more than 2,000%. In 1996, approximately 14 million pounds of glyphosate was used on just three crops: corn, soy, and cotton. By 2012, nearly 300 million pounds of glyphosate-based products were sprayed on these same crops. As a result of these uses, glyphosate was found by the United States Geological Service to be common in many Midwestern streams. In addition, the United States Geological Service found glyphosate in significant levels in air samples and rain samples in the Mississippi River basin.

There is ongoing debate about the health risks posed by glyphosate-based herbicides, but a growing number of researchers and health authorities are finding reason for concern. The International Agency for Research on Cancer, which is part of the World Health Organization, determined in 2015 that

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144 Id.
146 Id.
148 Id.
150 Id.
151 Charles M. Benbrook, Trends in Glyphosate Herbicide Use in the Unites States and Globally, 28 ENVTL. SCI. EUR. 3, 3 (2016).
glyphosate is a probable carcinogen in humans. A meta-analysis of existing data by the University of Washington also suggests an elevated cancer risk from exposure to glyphosate. However, the Environmental Protection Agency concluded, when it registered glyphosate in 1974, that it did not pose an unreasonable adverse effect on human health or the environment when its application was about 1% of its current use. In 2016 and again in 2017, the Environmental Protection Agency issued two different papers concluding that there was not sufficient evidence to find that glyphosate was carcinogenic. The 2016 review stated that the risk of Non-Hodgkins Lymphoma cannot be determined based on the data available and conflicting results. However, there was, at that time, extensive dissent within the Scientific Advisory Panel to the Environmental Protection Agency regarding these conclusions by the agency. In California, state regulators classified glyphosate as a chemical known to cause cancer.

154 See Katherine Drabiak, Roundup Litigation: Using Discovery to Dissolve Doubt, 31 GEO. ENVTL. L. REV. 697, 702 (2019) ("[The IARC] working group found there was limited evidence of carcinogenicity in humans for NHL, convincing evidence that glyphosate can cause cancer in laboratory animals, and that glyphosate caused DNA and chromosomal damage in human cells.").

155 Luoping Zhang et al., Exposure to Glyphosate-Based Herbicides and Risk for Non-Hodgkin Lymphoma: A Meta-Analysis and Supporting Evidence, 781 MUTATION RES. 186 (2019) (finding based on a study of 54,000 licensed pesticide applicators that Glyphosate raises the cancer risk of those exposed to it by 41% and finding a "compelling link" between glyphosate exposure and heightened risk of non-Hodgkin lymphoma (NHL), a cancer of the immune system: "All of the meta-analyses conducted to date, including our own, consistently report the same key finding: exposure to GBHs (glyphosate-based herbicides) are associated with an increased risk of NHL."); see also Mikael Eriksson et al., Pesticide Exposure as Risk Factor for Non-Hodgkin Lymphoma Including Histopathological Subgroup Analysis, 123 INT'L J. CANCER 1657 (2008); Lennart Hardell & Mikael Eriksson, A Case-Control Study of Non-Hodgkin Lymphoma and Exposure to Pesticides, 85 CANCER 1353 (1999); Helen McDuffie et al., Non-Hodgkin’s Lymphoma and Specific Pesticide Exposure in Men: Cross-Canada Study of Pesticides and Health, 10 CANCER EPIDEMIOLOGY, BIOMARKERS, & PREVENTION 1155 (2001).


157 Id.


159 Id.

160 Drabiak, supra note 154, at 707 ("Some [Scientific Advisory Committee] members . . . agreed that meta-analysis shows a 'scientifically important and statistically significant elevated NHL risk'," and "some . . . asserted that the current evidence is consistent with and suggestive of the positive carcinogenic potential of glyphosate.").
cancer based in part on the assessment of the International Agency for Research on Cancer that the chemical is a probable carcinogen.\textsuperscript{161}

In analyzing these conflicting conclusions regarding the health risks posed by these chemicals, some scholars have suggested that the weight given to cost-benefit analysis in the process undertaken by the Environmental Protection Agency means its conclusions offer a less clear cut assessment of health risk since these concerns are balanced against independent economic considerations.\textsuperscript{162} Other scholars point to the weakness of the Federal Insecticide, Fungicide, and Rodenticide Act ("FIFRA") and other statutes in accounting for cumulative risk and expected exposure to the products it regulates.\textsuperscript{163} Finally, some scholars point to the significant role of industry data in the review by the Environmental Protection Agency, which might be less significant in other evaluations of potential health risks.\textsuperscript{164}

In recent years, plaintiffs suffering from cancer have successfully won multimillion-dollar judgments against the manufacturer of Roundup for the failure to include an accurate health warning on its label. In 2018, a jury in California ordered compensation of $289 million for a groundskeeper who attributed his cancer diagnosis to the use of Roundup.\textsuperscript{165} In 2019, a different California jury awarded $2 billion to a couple with cancer in a different Roundup suit.\textsuperscript{166} More than 40,000 other lawsuits are pending related to Roundup, and the company has lost at least four cases in which plaintiffs claimed that long-term exposure to Roundup caused their cancer.\textsuperscript{167}


\textsuperscript{162} See Drabiak, supra note 154, at 699.

\textsuperscript{163} Sanne H. Knudsen, Regulating Cumulative Risk, 101 MINN. L. REV. 2313, 2315 (2017) ("Despite evolutions in scientific thinking, the implementation of the two major federal environmental laws most directly impacting the entry of chemicals and pesticide to the marketplace—the Toxic Substances Control Act (TSCA) and the Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA)—have largely ignored issues of cumulative risk. With some limited exceptions, chemicals and pesticides are regulated on a chemical-by-chemical basis instead of based on real-world exposures.").

\textsuperscript{164} See Drabiak, supra note 154, at 699.


In response to the Roundup litigation, the United States Department of Justice is challenging recent jury awards, citing determinations by the Environmental Protection Agency that glyphosate “is not likely to be carcinogenic to humans.”\(^{168}\) The Department claims that the jury effectively is requiring additional pesticide labeling on the product by the state, which is federally preempted.\(^{169}\) In the past, some courts have relied on prior safety determinations by the Environmental Protection Agency as a basis for federal preemption of failure to warn claims.\(^{170}\) As of early 2020, settlement negotiations were underway which may lead to a comprehensive approach to these cases but that outcome is still far from certain.\(^{171}\)

Federal law in this area leaves significant authority in the hands of state and local governments to regulate herbicides and pesticides. The United States Congress originally enacted FIFRA in 1947 as a labelling statute to regulate claims and warning labels on pesticide products.\(^{172}\) In 1972, Congress transferred authority over FIFRA to the Environmental Protection Agency and empowered the Agency to register and classify pesticides based on its scientific analysis of the potential harms associated with its use.\(^{173}\) Based on these amendments, FIFRA’s core purpose is “to ensure that, when applied as instructed, pesticides will not generally cause unreasonable risk to human health or the environment.”\(^{174}\)

Although FIFRA explicitly preempts state labelling authority, it leaves open state regulation of pesticide use, state requirements to register the pesticide for use, and state restrictions on the sale of such pesticides.\(^{175}\) While not as

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\(^{174}\) Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA) and Federal Facilities, supra note 172.

explicit as some federal statutes in encouraging state regulation.\textsuperscript{176} FIFRA does not address all areas of pesticide regulation, and Congress did not intend to occupy the field.\textsuperscript{177} The United States Court of Appeals for the District of Columbia ruled that FIFRA also did not preempt state common law claims and distinguished these from FIFRA's regulatory purpose.\textsuperscript{178} However, the United States Court of Appeals for the First Circuit found that FIFRA does preempt state law claims grounded in the failure to warn about product health hazards.\textsuperscript{179}

\textsuperscript{176} Marjorie A. Shields, Annotation, \textit{Validity, Construction, and Operation of State and Municipal Act or Regulation Requiring Notice of Pesticide and Herbicide Use}, 18 A.L.R. 6th Art. 793 (2006) ("§ 24, in addition to providing for 'special local needs' registration by states, contains two pre-emption provisions, § 24(a) and 24(b). The first, similar to provisions in other federal environmental laws, prohibits states from imposing less stringent regulatory requirements on the 'sale or use of any federally registered pesticide' than are required by or under the FIFRA. It does not, however, specifically allow more stringent state regulation or, as in the case of the Occupational Safety and Health Act, limit the states to federally equivalent standards. The second pre-emption provision prohibits the states from imposing labeling or packaging requirements different from those required by the FIFRA.").


\textsuperscript{178} See Ferebee v. Chevron Chem. Co., 736 F.2d 1529, 1541 (D.C. Cir. 1984) ("While FIFRA does not allow states directly to impose additional labelling requirements, the Act clearly allows states to impose more stringent constraints on the use of EPA-approved pesticides than those imposed by the EPA: 'A State may regulate the sale or use of any federally registered pesticide or device in the State, but only if and to the extent the regulation does not permit any sale or use prohibited by this subchapter.' 7 U.S.C. § 136v(a). See also SEN. REP. No. 838 92d Cong., 2d Sess. 30 (1982) reprinted in 1972 U.S. CODE CONG. & ADMIN. NEWS 4021 ("Generally, the intent of the provision is to leave to the States the authority to impose stricter regulation on pesticides uses than that required under the Act."); SEN. REP. NO. 970, 92d Cong., 2d Sess. 44 (1972) reprinted in 1972 U.S. CODE CONG. & ADMIN. NEWS 4128 (same); see generally \textit{National Agricultural Chemicals Association v. Rominger}, 500 F. Supp. 465 (E.D. Cal. 1978) (state may require additional data on EPA-registered pesticides). Given this provision, Maryland might well have the power to ban parathion entirely. We need not decide that issue, however, to hold that, if a state chooses to restrict pesticide use by requiring that the manufacturer compensate for all injuries or for some of these injuries resulting from use of a pesticide, federal law stands as no barrier."). \textit{But see} Cippolone v. Liggett Grp., 505 U.S. 504 (1992) (holding that the Cigarette Labeling and Advertising Act had a preemptive effect for state tort actions).

\textsuperscript{179} King v. E.I. Dupont de Nemours & Co., 996 F.2d 1346, 1349 (1st Cir. 1993) ("The Supreme Court itself has indicated that \textit{Cipollone} applies to FIFRA preemption determinations. In the \textit{Papas v. Upjohn Co.} and \textit{Arkansas-Platte} cases discussed below, the Court vacated two courts of appeals judgments that FIFRA impliedly preempted state law failure-to-warn claims and remanded for those courts to reconsider their decisions in light of \textit{Cipollone}. We hold that, in light of \textit{Cipollone}, FIFRA preempts the plaintiffs' state law tort claims based on the defendants' alleged failure to provide adequate warnings about the health hazards of the herbicides they manufactured and sold. The warnings on the labels of the herbicides King and Higgins used in spraying were approved by the EPA, as FIFRA required. If the plaintiffs could recover on their state law claims that, despite this labeling, the defendants had failed to provide adequate warning, those additional warnings necessarily would be 'in addition to or different from those required under this subchapter.' 7 U.S.C. § 136v(b). The question, therefore, is whether state law liability based upon such defective
In a legal challenge related to local authority to regulate pesticides under FIFRA, the United States Supreme Court upheld the authority of localities along with states to engage in such regulation. In Wisconsin, the town of Casey required notification of the use of pesticides and created a permitting process for the use of such pesticides on public lands. In *Wisconsin Public Intervenor v. Mortier*, the Supreme Court ruled that FIFRA did not preempt local jurisdictions from restricting the use of pesticides more stringently than the federal government. The Supreme Court overruled two different lower courts in holding that FIFRA did not preempt local ordinances that sought more stringent regulation of pesticides. In a unanimous decision, the Court rejected the application of federal preemption to local regulation of pesticides.

In the wake of the Supreme Court’s decision, the Coalition for Sensible Pesticide Policy was formed with the aim of convincing state legislatures to pass statewide preemption laws that would prevent localities from exercising the authority the Supreme Court upheld in *Wisconsin Public Intervenor v. Mortier*.

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181 *Id.*

182 *Id.* at 606–12 ("Applying these principles, we conclude that FIFRA does not preempt the town’s ordinance either explicitly, implicitly, or by virtue of an actual conflict. As the Wisconsin Supreme Court recognized, FIFRA nowhere expressly supersedes local regulation of pesticide use."). Additionally, the court noted "Section 136v plainly authorizes the 'States' to regulate pesticides and just as plainly is silent with reference to local governments. Mere silence, in this context, cannot suffice to establish a 'clear and manifest purpose' to preempt local authority." *Id.* at 607. "Even if FIFRA’s express grant of regulatory authority to the States could not be read as applying to municipalities, it would not follow that municipalities were left with no regulatory authority." *Id.* The court stated, "[r]ather, it would mean that localities could not claim the regulatory authority explicitly conferred upon the States that might otherwise have been preempted through actual conflicts with Federal law. At a minimum, localities would still be free to regulate subject to the usual principles of preemption." *Id.* "Properly read, the statutory language tilts in favor of local regulation." *Id.* The court also held that because "FIFRA fails to provide any clear and manifest indication that Congress sought to supplant local authority over pesticide regulation impliedly." *Id.* at 611. The court "reject[ed] the position of some courts, but not the court below, that the 1972 amendments transformed FIFRA into a comprehensive statute that occupied the field of pesticide regulation, and that certain provisions opened specific portions of the field to state regulation and much smaller portions to local regulation." *Id.* at 612.


184 Matthew Porter, *State Preemption Law: The Battle for Local Control of Democracy*, BEYOND PESTICIDES,
Many of these state laws use identical language based on a Model State Pesticide Preemption Act, which states,

No city, town, county, or other political subdivision of this state shall adopt or continue in effect any ordinance, rule, regulation or statute regarding pesticide sale or use, including without limitation: registration, notification of use, advertising and marketing, distribution, applicator training and certification, storage, transportation, disposal, disclosure of confidential information, or product composition.185

Within a year of the Supreme Court’s decision in Wisconsin Public Intervenor v. Mortier, 27 states enacted pesticide preemption legislation while 8 states defeated such legislation.186

While a growing number of localities are seeking to restrict the use of glyphosate-based products, state preemption law stands as a major obstacle in most states. In fact, in only seven states can localities pass stricter laws related to regulating the use of pesticides.187 Recent court decisions in Hawaii188 leave only Alaska, Maine, Maryland, Nevada, Utah, and Vermont as the six states in which local governments exercise power over pesticide use in their jurisdiction.189 In 14 other states, localities can petition the states to authorize local restrictions, but in essence, the state retains the power and discretion over whether local governments can act in this sphere.190 According to one recent study funded by the United States Department of Agriculture, such preemption laws leave local governments powerless to protect the public health of their residents.191 By contrast, Canada has no local preemption related to pesticides

186 Rutrick, supra note 175, at 87.
187 Porter, supra note 184.
188 See Atay v. Cty. of Maui, 842 F.3d 688 (9th Cir. 2016) (determining that the Hawaii legislature intended to create a comprehensive statutory scheme and finding local preemption).
189 Id.
and at least 170 localities in that country have banned the use of pesticides for
lawn care.\textsuperscript{192}

Despite the great success of those seeking to preempt local ordinances related to pesticides, concerns related to glyphosate have sparked action by local governments across the country.\textsuperscript{193} At least 50 city and county ordinances restrict the use of the chemical on public property including local playgrounds, parks, and schoolyards.\textsuperscript{194} In cities ranging from Cleveland, Ohio, to Irvine, California, its use is prohibited on city property.\textsuperscript{195} In states such as Maine and Maryland, some local jurisdictions have gone further to bar its use on private as well as public property.\textsuperscript{196}

The local government interest in regulating glyphosate generated its own momentum to expand preemption of local pesticide regulation. In 2018, the draft Farm Bill included language that would prevent localities from adopting their own pesticide regulations including ordinances prohibiting the use of Roundup.\textsuperscript{197} The proposed language would have amended FIFRA to replace the term “state,” which the Supreme Court found to include localities, with the term “state lead agency” or “statewide department or agency” which would exclude localities.\textsuperscript{198}

In addition to preemption efforts at the national level, litigation over local regulation of Roundup and other chemicals demonstrated the challenges to


\textsuperscript{194} The 58 local ordinances include Durango, Colorado’s requirement that public lands be organically managed; Eugene, Oregon’s requirement for pesticide free parks; Portland, Oregon’s requirement for pesticide free parks and ban on glyphosate; Palo Alto, California’s ban on the use of glyphosate on public property; Evanston, Illinois’s ban on the use of glyphosate on public property; Eden Prairie, Minnesota’s restriction on the use of neonicots on public property with limited exceptions; Cleveland, Ohio’s prohibition of pesticides on public property and ban on glyphosate; Washington, D.C.’s prohibition of the use of pesticides on public property and at private day care centers and on water contingent property; Montclair, New Jersey’s, ban on the use of glyphosate on public property; New Paltz, New York’s restriction on glyphosate use on public property; Rockland County, New York’s restriction on the use of glyphosate on public property; Dubuque, Iowa’s requirement for pesticide free parks; and Shoreline, Washington’s requirement for pesticide free parks. \textit{State Pages, Beyond Pesticides}, https://www.beyondpesticides.org/resources/state-pages (last visited Feb. 15, 2020).


\textsuperscript{196} \textit{Id.}


\textsuperscript{198} \textit{Id.}
local control even in states without explicit preemption. Local preemption cases over pesticide go back decades, particularly in farm states such as Illinois\textsuperscript{199} and Ohio.\textsuperscript{200} Most of these earlier cases related to requirements to post warnings regarding pesticide application. In recent years, a number of localities have gone beyond requiring mere warnings to regulating the use of herbicides and pesticides on public land\textsuperscript{201} and in some cases even on private land within a given jurisdiction. In addition, many of these ordinances have specifically identified formulations including glyphosate-based herbicides as among those covered.\textsuperscript{202}

In some states, localities do not even have control over public property because of overlapping state authority. In Cape Cod, Massachusetts, even those towns which have banned the use of glyphosate on town property are unable to prevent its use on rights of way within the town.\textsuperscript{203} Massachusetts preempts local pesticide regulation and the state regulatory agency determined that glyphosate is safe based on the review of the Environmental Protection Agency.\textsuperscript{204} Conflict over the continued use of glyphosate has led to growing support for new statewide legislative proposals which would end pesticide preemption in the state.\textsuperscript{205}

The state of Maryland has no explicit preemption of local pesticide regulation.\textsuperscript{206} Nonetheless, courts there have previously struck down local pesticide regulation based on federal preemption grounds in the era before the Supreme Court’s decision in \textit{Wisconsin Public Intervenor v Mortier}.\textsuperscript{207} In 2013, the Takoma Park Safe Grown Act restricted the use of lawn care pesticides on

\textsuperscript{199} See Pesticide Pub. Policy Found. v. Vill. of Wauconda, 510 N.E.2d 858, 861–63 (Ill. 1987) (finding a local pesticide ordinance requiring notification and warning to people sensitive to pesticides of the location of application preempted by the state Pesticide Act and Structural Pest Control Act).

\textsuperscript{200} See City of Fairview Park v. Barefoot Grass Lawn Serv., Inc., 685 N.E.2d 300 (Ohio Ct. App. 1996) (finding state law preempts local pesticide preapplication notice requiring lawn chemical applicators to provide preapplication notice to the occupants of abutting property, regardless of whether the occupants requested notice).


\textsuperscript{202} Other localities have specified other pesticides such as neonicotinoids. See Alexandra B. Klass, \textit{Bees, Trees, Preemption and Nuisance: A New Path to Resolving Pesticide Land Use Disputes}, 32 \textit{Ecology L.Q.} 763, 779 (2005).


\textsuperscript{204} \textit{Id.}

\textsuperscript{205} \textit{Id.}

\textsuperscript{206} Porter, \textit{supra} note 190.

both public and private property.\textsuperscript{208} This local ordinance was the first of its kind in the United States.\textsuperscript{209} Subsequently, the wider Montgomery County passed Bill 52-14 restricting the use of pesticides for lawn care on public and private property.\textsuperscript{210} The bill allows the use of pesticide only as a last resort but left flexibility for its own parks system to use chemical treatments.\textsuperscript{211}

The Montgomery County law was challenged and initially blocked by a state court on state preemption grounds.\textsuperscript{212} Subsequently, the Maryland Court of Special Appeals rejected the argument that local governments in the state are impliedly preempted from the regulation of pesticides:

Factors supporting our conclusion against preemption include: repeated failures to preempt, a lack of comprehensiveness along the lines of FIFRA, no pervasive scheme of administrative regulation, no conflict through frustration of purpose, and General Assembly recognition of local regulation of pesticides. Together, these factors point in one direction: the State has not prohibited local governments from regulating pesticides in the manner addressed by the County.\textsuperscript{213}

The court, therefore, concluded “that the citizens of Montgomery County are not powerless to restrict the use of certain toxins that have long been recognized as ‘economic poisons’ and which pose risks to the public health and environment.”\textsuperscript{214}

\begin{thebibliography}{23}
\bibitem{208} Cosmetic Lawn Pesticide Use Outlawed in Takoma Park, MD, First Local Ban of Its Type in U.S., BEYOND PESTICIDES (July 25, 2013), https://beyondpesticides.org/dailynewsblog/2013/07/cosmetic-lawn-pesticide-use-outlawed-across-takoma-park-maryland/. The policy of the ordinance was “[t]he application of certain pesticides, including the use of certain pesticides approved for use by the federal, state, or county governments, in manners and by persons allowed by those governments to apply them, nonetheless present an unacceptable risk of harm to public and animal health, the environment, and the region’s watershed.” \textbf{TAKOMA PARK, MD, ORDINANCE CH. 14.28.010} (2013).
\bibitem{209} Cosmetic Lawn Pesticide Use Outlawed in Takoma Park, MD, First Local Ban of Its Type in U.S., supra note 208.
\bibitem{211} Id.
\bibitem{213} Montgomery Cty. v. Complete Lawn Care, Inc., 207 A.3d 695, 708–09 (Md. Ct. Spec. App. 2019) (finding Maryland Department of Agriculture regulations of pesticides did not preempt the Montgomery County pesticide ordinance because state regulations merely set a floor beyond which the county could provide additional health and safety protections).
\bibitem{214} Id. at 709.
\end{thebibliography}
In California, the Malibu City Council voted unanimously to prohibit all pesticide use in public spaces in 2016.\textsuperscript{215} At the end of 2019, the Malibu City Council voted to extend its ban on the use of pesticides to private as well as public property.\textsuperscript{216} California law preempts localities from regulating pesticide use on private property more stringently than in state law.\textsuperscript{217} Local officials sought to overcome this preemption obstacle by entering into an agreement with the Coastal Commission that codifies regulations established between a local government and the Coastal Commission.\textsuperscript{218}

Unlike every other state, Maine explicitly allows local communities to regulate the use of pesticides in their communities.\textsuperscript{219} A 2017 effort to preempt such local regulation in the Maine legislature failed.\textsuperscript{220} The following year the city of Portland, Maine, passed some of the most sweeping restrictions on the use of pesticides in the nation.\textsuperscript{221} The ordinance, which specifically includes glyphosate, prohibits property owners from using synthetic pesticides on turf, gardens, and landscapes.\textsuperscript{222} However, the ordinance includes an exception for treating poison ivy, dangerous pests, and pests that damage structures.\textsuperscript{223}

Given the widespread use of glyphosate in agriculture, it is perhaps not surprising that glyphosate residue is found in a large range of foods.\textsuperscript{224} In 2013, the EPA doubled the “safe” level of glyphosate on crops such as soy, corn, and canola and increased by 30 times the level on other food crops. A meta-analysis of a range of studies from the Canadian Food Inspection Agency, the FDA, and several non-profits found glyphosate residue in between 65% and 95% of the foods tested.\textsuperscript{225} In 2016, the FDA found high but legally allowable levels of


\textsuperscript{216} Emily Sawicki, \textit{Where Does Malibu Stand When It Comes to a Rodenticide Ban?}, \textit{Malibu Times} (Nov. 29, 2019), http://www.malibutimes.com/news/article_b4f14c6a-209b-11ea-852a-6b6fdd56c77.html.

\textsuperscript{217} \textit{Id.}

\textsuperscript{218} \textit{Id.}


\textsuperscript{220} \textit{Id.}


\textsuperscript{222} \textit{Id.}

\textsuperscript{223} \textit{Id.}


\textsuperscript{225} See \textit{id.}
residue on soy and corn, while in 2019, a study by the Environmental Working Group found the highest levels in cereal products such as Cheerios. A study by the University of California-San Francisco found glyphosate in the urine of 93% of people tested.

The Government Accountability Office determined that there are significant weaknesses in the pesticide residue monitoring program carried out by the FDA for glyphosate in agricultural commodities and processed foods. In April of 2019, the FDA began conducting tests for glyphosate using a selective residue method to test for a single pesticide. The same month, the EPA again stated that "'[t]here's no evidence that glyphosate causes cancer[,] . . . [t]here's no risk to public health from the application of glyphosate.'"

Despite these assurances by the EPA, private actors introduced a voluntary labelling system in 2017 to certify foods as glyphosate residue free. At the same time, the manufacturer of glyphosate announced that it plans to invest $5.6 billion in developing alternative weed killers over the next ten years in part to address public concerns about health risks. However, the company also stated that "glyphosate will continue to play an important role in agriculture." As a result, local ordinances regulating glyphosate are likely to

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continue to spread in those states in which preemption is not an obstacle to local authority.

IV. TOWARD A PUBLIC HEALTH EXCEPTION?

In a wide range of regulatory regimes, there exist public health exceptions to allow for governments at different levels to protect the health of their residents. The basic idea is that the authority of governments ought not to be unduly limited in carrying out the core function of protecting public health. Even in states with some of the most draconian statewide preemption laws which constrain the powers of localities, there is a growing sensitivity to the idea that public health and safety are somehow different and deserving of being treated as an exception. Public health exceptions are also embedded in a range of international contexts, including the European Union and the World Trade Organization. Indeed, such exceptions have been important to allowing for national tobacco regulation around the world.

The United States Supreme Court has been reluctant to find such public health exceptions to federal preemption where there is no explicit statutory language creating such an exception. Nonetheless, the Supreme Court has also rejected the idea that federal law creates the basis for broad state preemption of local public health regulation when it is not explicit in statutory language. Thus, it remains to be seen whether the law regulating preemption of pesticides and electronic cigarettes might be moving toward such a public health exception but available models are useful for better understanding how that might work.

Exceptions for public health also exist at the international level in recognition of government responsibility to protect the health and safety of its residents. For example, the General Agreement on Tariffs and Trade, in article XX, provides an explicit exception for public health, and the 2001 Doha Declaration on TRIPS and Public Health creates specific exceptions to

234 Altman & Morgan, supra note 8, at 16.
235 Id. at 28.
236 See Howard Fischer, Ducey Weighs in on Tucson City Council Raising Smoking Age to 21, TUCSON.COM (Oct. 25, 2019), https://tucson.com/news/local/ducey-weighs-in-on-tucson-city-council-raising-smoking-age/article_5f0eefb6-b2a0-54d7-a3c8-0d3b90443777.html (quoting the Governor as saying, “I like to see uniformity... [a]n exception that I would be open-minded to would be around public health and safety,” in response to the Tucson City Council raising the minimum age to buy tobacco products to 21 despite the risk that under state law the city could forfeit half of its state revenue sharing if the Attorney General determined that a local ordinance conflicts with state law).
intellectual property protections for public health protection. Both the General Agreement on Tariffs and Trade and the General Agreement on Trade in Services provide a limited exception for rules designed to protect human health so long as they do not represent “arbitrary or unjustifiable discrimination” and are not more trade restrictive than necessary.239

Rulings in cases before the World Trade Organization reflect the reach of these public health exceptions. A French ban on the import of asbestos products, which Canada challenged before the World Trade Organization Appellate Body, was found to be protected under Article XX of the General Agreement on Tariffs and Trade.240 Under Article XX, such health protective measures are acceptable if they are likely to make a material contribution to safeguarding health.241 However, in a case challenging the ban on clove cigarettes in the Tobacco Control Act, the Appellate Body found discrimination because of the failure to also ban menthol flavored cigarettes.242 Yet the same provision protected extensive tobacco regulation by the government of Thailand243 and later by the government of Australia with its adoption of plain packaging for tobacco products.244 In the Australia decision, the panel

240 Appellate Body Report, European Communities—Measuring Affecting Asbestos and Asbestos Containing Products, ¶ 172 WTO Doc. WT/DS135/AB/R (adopted Mar. 12, 2001) (concluding that “the objective pursued by the measure is the preservation of human life,” which “is both vital and important in the highest degree”).
242 Appellate Body Report, United States—Measures Affecting the Production and Sale of Clove Cigarettes, ¶ 233–34 WTO Doc. WT/DS406/AB/R (adopted Apr. 4, 2012) (holding “albeit for different reasons, the Panel’s finding, in paragraph 7.292 of the Panel Report, that, by banning clove cigarettes while exempting menthol cigarettes from the ban, Section 907(a)(1)(A) of the FFDCA accords imported clove cigarettes less favourable treatment than that accorded to domestic menthol cigarettes, within the meaning of Article 2.1 of the TBT Agreement” and “uphold[ing], albeit for different reasons, the Panel’s finding, in paragraphs 7.293 and 8.1(b) of the Panel Report, that Section 907(a)(1)(A) of the FFDCA is inconsistent with Article 2.1 of the TBT Agreement because it accords to imported clove cigarettes less favourable treatment than that accorded to like menthol cigarettes of national origin”).
243 Appellate Body Report, Thailand—Customs and Fiscal Measures on Cigarettes from the Philippines, WTO Doc. WT/DS371/AB/R (adopted June 17, 2011) (holding that policies seeking to diminish the use of cigarettes are protected by the public health exception).
244 Panel Report, Australia—Certain Measures Concerning Trademarks, Geographical Indications and Other Plain Packaging Requirements Applicable to Tobacco Products and Packaging, WTO Doc. WT/DS/467/23 (adopted Aug. 30, 2018) (finding the complainants had not demonstrated that Australia’s tobacco plain packaging measures were inconsistent with Article 2.2 of the TBT Agreement on the basis that they are more trade-restrictive than necessary to achieve a legitimate objective).
characterized the preservation of public health as "vital and important to the highest degree."  

In the United States, some statutes explicitly carve out public health exceptions in order to facilitate the work of public health authorities in certain circumstances. Similar arguments about public health exceptionalism have also been litigated in the context of federal preemption. In the absence of such an explicit public health exception, states have argued for the existence of an implied public health exception in regulating tobacco products. The state of Maine, for example, sought to prevent the sale of tobacco products to youth and adopted an act regulating the delivery and sale of tobacco products.

In Rowe v. New Hampshire Motor Transportation Association, Maine argued for the existence of an implied public health exception from federal preemption in order to prevent the sale of tobacco products to minors. In defense of this proposition, Maine cited the federal Synar Amendment which denies states federal funds unless they forbid the sale of tobacco to minors. Writing for a majority of the Supreme Court, Justice Stephen Breyer explained that:

Maine’s inability to find significant support for some kind of “public health” exception is not surprising. “Public health” does not define itself. Many products create “public health” risks of differing kind and degree. To accept Maine’s justification in respect to a rule regulating services would legitimate rules regulating routes or rates for similar public health reasons. . . . Given . . . the difficulty of finding a legal criterion for separating permissible from impermissible public-health-oriented

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248 Id.


251 Id. at 373–74 ("In Maine’s view, federal law does not preempt a State’s efforts to protect its citizens public health, particularly when those laws regulate so dangerous an activity as underage smoking.").

252 Id. at 375.
regulations, Congress is unlikely to have intended an implicit general “public health” exception broad enough to cover even the shipments at issue here.\textsuperscript{253}

The type of age-verification system for the purchase of tobacco products via the internet that Maine was encouraging is the very thing that JUUL is now being forced to adopt with respect to electronic cigarettes.\textsuperscript{254} Despite the Supreme Court’s skepticism about a broad public health exception in the context of federal preemption of carrier services in Rowe, the same Court in Wisconsin Public Intervenor v. Mortier demonstrated support for vigorous local authority when it comes to the regulation of pesticides.\textsuperscript{255}

It will be up to both legislators and judges to assess whether such public health exceptions ought to become the norm to protect local populations. Over a relatively short period of time, the movement of regulatory innovation of electronic cigarettes from the local, to the state, to the national level reflects the centrality of local governments as first movers in a still highly decentralized regulatory regime. At the same time, the fairly limited impact thus far of local regulation in the pesticide area suggests that widespread state preemption is a key constraint on the evolution of bottom-up regulatory innovation in other domains. Ironically, the field in which the Supreme Court has expressed skepticism of state and local initiative has proven to be more susceptible to such influence than the field in which the Supreme Court has given explicit sanction to local regulation.

V. CONCLUSION

State preemption poses a growing challenge for local efforts to protect public health. While the history of tobacco policy preemption demonstrates that this dynamic is not entirely new, it also reveals the significant role of certain industries in shaping the regulatory options of localities when it comes to public health. A number of scholars have suggested that the broader scope of the new preemption reflects lessons from this earlier history of tobacco regulation in which local action ultimately drove the response at higher levels of government.\textsuperscript{256} At the same time, there are ways in which the new preemption is

\textsuperscript{253} Id. at 374–75 (“Despite the importance of the public health objective, we cannot agree with Maine that the federal law creates an exception on that basis, exempting state laws that it would otherwise preempt. The Act says nothing about a public health exception. To the contrary, it explicitly lists a set of exceptions . . . [that] says nothing about public health.”).


\textsuperscript{255} See supra text accompanying notes 182–186.

\textsuperscript{256} See Paul A. Diller, Why Do Cities Innovate in Public Health? Implications of Scale and Structure, 91 WASH. U. L. REV. 1219, 1225 (2014); Pomeranz & Pertschuk, supra note 1, at 900
much broader in both its scope and in terms of the potential consequences it imposes on local actors.\textsuperscript{257} Nonetheless, the examples of electronic cigarettes and glyphosate suggest that growing research on and awareness of health risks will continue to drive local regulatory action long before national or even state regulation.

While not unique to public health, the accountability gap created by state preemption without accompanying state regulation is particularly acute in the context of public health.\textsuperscript{258} It also reflects the growing spatial divides within the United States. Some scholars have recently suggested that metropolitan areas need new authorities to respond to the accountability gap between state and local governments in the 21st century.\textsuperscript{259} Leaving aside the larger questions raised by these challenges for the future of federalism, there are a number of more modest near-term responses that might promote more robust local authority in the context of public health.

Among the potential solutions to these conflicts is a requirement that states themselves regulate in areas in which they preempt local action. Alternatively, states could allow local regulation unless state preemptive action is narrowly tailored. Finally, localities could be given a safe harbor to regulate in areas in which the local impact is greatest. Such an approach might support the idea of a public health exception within broader preemption statutes. This is an approach that could be developed by state legislatures, through citizen-led initiatives, or potentially through state courts. A world in which local actors have too little authority over public health and state actors have too little incentive to regulate in the interest of public health poses serious risks to the well-being of both existing institutions and people they are intended to serve.

\textsuperscript{257} See Briffault, supra note 24, at 1997 ("Several state legislatures have adopted punitive preemption laws that do not merely nullify inconsistent local rules—the traditional effect of preemption—but rather impose harsh penalties on local officials or governments simply for having such measures on their books.").

\textsuperscript{258} Pomeranz & Pertschuk, supra note 1.

\textsuperscript{259} Richard C. Schragger, Federalism, Metropolitanism, and the Problem of States, 105 Va. L. Rev. 1537, 1592 (2019). "Under our current state-based system, however, the most populous and productive jurisdictions in the country are heavily constrained in their ability to raise and spend their own resources or to regulate their own residents and businesses." Id. at 1541. Schragger also argues "that twenty-first-century political economy requires increased political autonomy at the sub state level, in the cities and metropolitan regions that are economically ascendant." Id. at 1543.