

## Tobacco and Religion

Michael H. Crosby, OFM Cap.

### Survey of Mainline Religious Groups

Shows Wide Differences in Their Positions

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The data about tobacco's detrimental effects on human life are evident. Yet any significant moral response from "mainline" religious groups, notably the hierarchy of Roman Catholicism, has been virtually absent from the public debate. Such represents just one piece of data discovered from the first-known survey on the role of religion and tobacco in the U.S. The study was done by the Tobacco Program of the New York-based Interfaith Center on Corporate Responsibility. The ICCR is a coalition of some 275 Protestant, Jewish and Roman Catholic institutional investors who use their investments to challenge companies on various social issues. ICCR estimates that the combined portfolios of its members represent at least \$50 billion. I serve as ICCR's Tobacco Program Coordinator.

Tobacco is one of the very few products which, if used as intended, results in ill health and death. Three million deaths worldwide are attributable to tobacco use each year. Of the 1.25 billion people now living in developed countries, 250 million will die from tobacco-related illnesses if present consumption patterns maintain. In the U.S. more than 400,000 die annually from cancer, respiratory illnesses, heart disease and other health problems resulting from tobacco use. More than 3,000 of its citizens die annually due to secondhand smoke. Annual U.S. health care costs associated with tobacco are over \$50 billion.

Smoking is a pediatric disease, according to the Food and Drug Administration. More than 80% of smokers are hooked by the time they are 18; the average smoker begins the habit at 14 1/2 years of age. Of the 3,000 minors who become regular smokers, nearly 1,000 will die of smoking-related diseases. The percentage of eighth graders who smoke rose 30 percent between 1991 and 1994.

Annually, cigarette smoking causes up to 141,000 abortions in the United States of America alone, 61,000 cases of low birthweight, 4,800 perinatal deaths, and 2,200 deaths from Sudden Infant Death Syndrome (SIDS). Smoking snuffs out the life of at least 100 times more babies annually than "partial-birth abortions."

In the face of such overwhelming data, one might expect that religious groups would be in the forefront of challenging smoking and other forms of tobacco use both by their members who may be consumers (those who use the product to their own detriment) and executives and workers in corporations (those who directly manufacture the product as well as those involved in its promotion and marketing). Despite the media's almost daily discussion of a possible "settlement" between forces aligned with the industry and government trying to curb tobacco's use and notwithstanding the rhetoric of politicians

raising the issue of the "morality" of producing and promoting tobacco -- the voice of religious leaders has barely been heard. Why?

### Surveying Religious Institutions Regarding Their Own Tobacco Ties

To prepare for a talk on "Religion and Tobacco" at the 10th World Conference on Tobacco or Health in Beijing in August, 1997, I thought it would be helpful to create an instrument to measure various questions related to church and synagogue-related institutions and tobacco. Between June 1996 and 1997, a three-page questionnaire was sent to all the major Protestant denominations belonging to the National Council of Churches as well as the Southern Baptist Convention. For Catholics, it went to a random sample of dioceses and religious congregations of women and men. The third grouping surveyed were Protestant, Catholic and Jewish health care institutions. Since institutional entities representing Moslems and other Jewish organizations tend not to have long-term investments (a key part of the survey), the survey instrument was not sent to them.

For those selected to be in the random sample, at least 10% of the total population represented by that group were sent the questionnaire. If no response came from those contacted initially, a reminder was sent, accompanied by another questionnaire.

The questions were constellated in five areas: 1) Whether or not the group or its parent organization had made any morality statement regarding tobacco; 2) Issues related to tobacco investments (screens, holding stocks, divestment and shareholder involvement on tobacco concerns); 3) Smokefree workplaces; 4) Acceptance of ads or monies from tobacco interests as well as whether tobacco entities had ever been honored by the religious institution; and 5) Personal impressions and rationales as to whether religious leaders had been silent or vocal on the issue of tobacco. The samples were made using the official publications of the various groups (ie, the Kennedy Directory for Catholic dioceses and religious congregations, the Catholic Health Association's membership list, the major denominations belonging to the NCC and the AHA Guide to the Health Care Field).

The first piece of datum indicates that groups seeming to have a stronger position against tobacco tended to respond in higher numbers than those that did not. For instance between the major Protestant denominations (which often had screens against tobacco), 46.7% responded to the questionnaire while 35.7% of the Catholic (arch) dioceses did so. The lowest respondent group (20.6%) were Catholic congregations of men. Because no response was forthcoming from any of the Jewish health care groups contacted, all data reflects only differences between and among Catholic and Protestant groups.

Having noted some correlation between having a stronger position on tobacco with responding to the survey, it cannot be so simply stated. In the case of the Seventh Day Adventists surveyed, this does seem to be the case. The entities (health care groups) connected to this denomination scored highest on their returns (71%). However, hospital groups returned the questionnaire noting they don't respond to such unsolicited surveys. (This may suggest a reason for the silence from the Jewish groups). And the Midwest

Province of at least one Catholic men's group which received the questionnaire but did not respond has filed at least one shareholder resolution related to tobacco. Thus silence around a survey like this (or parts of the survey) should not necessarily be interpreted to mean the recipient was/is unconcerned or inactive.

The only point of total unanimity among the respondents came from the datum showing that none had received any monies from tobacco interests; neither had any feted tobacco executives at such events as fund-raisers. In contrast, probably the greatest difference came between Catholic and Protestant-related groups regarding the first item area surveyed: whether or not the denomination or the responding group had any morality statement regarding tobacco. Overall, less than a third (31.88%) of the institutions surveyed had denominational positions; a major reason stems from the fact that only 13.95% of the Catholics had any kind of statement. This includes the one diocese that responded "sort of" to the question: "Have you made a moral statement against tobacco usage?" Outside of this "sort of" response, not one Catholic diocese noted any kind of moral position related to tobacco. Indeed, the closest the Catholic Church at its highest institutional expression has come to express any problem with smoking can be found in The Catechism of the Catholic Church. It states that excessive tobacco use violates the virtue of temperance. Whether one would be able to conclude from this an implication that excessive tobacco use violates the virtue of temperance while there can be some "temperate" use of the product is not clear. While the implication seems to be that a "temperate" use of this product is moral, it does seem contradictory to the "pro-life" position so-identified with the institutional church insofar as it is recognized each use of tobacco diminishes the life of the consumer in terms of time spent on earth.

For their part, women's congregations, which have recently been in the forefront on various social issues, also registered low morality positions on tobacco (18.18%). Yet, even with this lower percentage among women, it was much higher than the data from their parallel groups among the men religious: not one group had made any such statement.

The stance of Catholic groups contrasts sharply with two-thirds (66.67%) of the Protestant groups that indicated their denomination had a moral position regarding tobacco. The rationale offered for anti-tobacco use by such groups as the Presbyterian Church (USA), the Disciples of Christ, and the Southern Baptists comes from St. Paul's reminder to Christians that the body is the temple of God (1 Cor. 6:19-20). For its statement, the American Baptist Church not only raised a moral concern about smoking for its members; it also notes the "Christian responsibility" of its members "to speak out against those who would seek profit and wealth by promoting the use of a substance shown to be destructive to health and life."

When data within various Protestant denominations was broken-out, 80% of the Seventh-Day Adventists mentioned having statements against tobacco use. Historically, the use of tobacco in any form has been prohibited for its members. A "Fundamental Belief" of this group, along with Baptism and the Lord's Supper, Prophecy and Stewardship, is that tobacco is harmful to the body; members are called to "abstain" from it. Its 1996

Yearbook states: "Since alcoholic beverages, tobacco, and the irresponsible use of drugs and narcotics are harmful to our bodies, we are to abstain from them as well."

The Seventh-Day Adventist position contrasted with 57.14% of the other Protestant groups that noted having statements. The Seventh-Day Adventists have been recognized for their statements opposing tobacco use as well as their efforts to help people stop such usage. In fact, at the denominational level, it is widely recognized as having the most thorough institution-wide kind of program to help convert people from tobacco use. Some major Protestant denominations have passed resolutions at their Synods and Conventions calling for such material; however, except for the Adventists, none were included in the supporting materials accompanying the surveys.

Regarding the perceived effectiveness of the group's morality statement, the Adventists stated (50%) that their moral statements were effective. This contrasts markedly with the overall percentage (13%) that believed their statements were effective. It should be noted that this low percentage does not necessarily mean that the respondents believed their statements had no positive effect. A large number simply did not respond to this follow-up question on the survey.

Is Tobacco a "Sin Stock" or a Cash Cow?

The second part of the survey asked if the institution had a "screen" on tobacco investments. Like any screen made to keep bugs out, a tobacco screen by an individual or institutional investor serves to notify money managers, brokers, etc., that the entity with the screen does not want to be invested in something (in this case, tobacco) and the extent to which this may be so. While 48% of the respondents said they had some kind of screen related to tobacco investments, a large difference seems evident when comparing the responses between Catholic and Protestant groups. Overall Protestants had a much higher percentage with screens (77%) than Catholics (40%). Among the Catholic groups, those with screens varied widely (Dioceses = 20%, Women's congregations = 55%, Men's congregations = 14% and Health Care entities 50%). Every Protestant denomination responding (7 of the 15 major denominations sampled) had some kind of screen.

The stances of the responding Protestant groups contrasts sharply with the 1991 "Investment Guidelines" of the National Conference of Catholic Bishops. These demand "absolute exclusion of investment in companies whose activities include direct participation in abortion" and no investments in companies which manufacture contraceptives." In addition the guidelines seek to avoid "investment in firms primarily engaged in military weapons production or the development of weapons inconsistent with Catholic teaching on war." Despite having a quite thorough review of questionable practices that it seeks to refrain from in its investments, no policy related to tobacco is mentioned at all. From this silence one might conclude that the bishops do not consider tobacco use to be a significant moral issue, that it does not rank high enough among other moral concerns, or simply that the idea never entered their deliberations.

As the various guidelines from the NCCB indicates, some of its investment screens filter out all categories in some fields (as with abortifacients and birth control manufacturers); others allow some bugs to enter. The same applies to tobacco-screens of those religious institutions that have created them. On the one hand are those groups that have umbrella statements which exclude all tobacco investments; on the other are those who have screens but are not absolute insofar as they are invoked only upon reaching a certain level of sales for a company or some other kind of percentage.

The 1990 policy of the investing arm of the Protestant Episcopal Church in the USA states that it "will not hold shares in companies which include in their businesses the manufacture and sale of tobacco products." The Archdiocese of Detroit answered "yes" to the screen question, noting in response that "our investors understand it as belonging under 'Preserve the Sacredness of Human Life'," one of its four "Investment Guidelines." That principle states "companies that produce pharmaceuticals or products which are contraceptive, abortive, and which damage the health of the mother or children act contrary to this principle and should be avoided."

The Catholic group which responded with the most far-reaching position on tobacco was the Adrian (MI) Dominican Sisters. Among its "Criteria for Socially Responsible Investments" is the statement that it will not invest in companies that make "tobacco products used for personal consumption." It presented its rationale for doing so in 1990 testimony before a U.S. House Subcommittee on Transportation and Hazardous Materials. The sisters stated they had held stock in Philip Morris since 1985. "The stock was originally purchased because our financial advisor considered the company to be a good investment." Another reason was Philip Morris' higher numbers of women and minorities on its Board of Directors. Because of its involvement in ICCR, the Adrian Dominican Sisters became interested in filing shareholder proposals related to tobacco use because of its ill-effects on peoples' health. Furthermore, it stated, "other considerations are: the growing and promotion of tobacco in developing countries, the effects of exposure to cigarette smoke by nonsmokers and children, and the overall effects of tobacco production on the environment." In support of the latter concern, the Sisters noted that "WHO estimates 5% of all trees felled are used in tobacco curing. This, of course, contributes to global warming."

In conclusion, the Adrian group stated: "Of all the points mentioned above, we consider the health issues to be the most urgent. This issue is international. Smoking is harmful to all human beings. Therefore, we strongly believe that it is morally wrong for a company to make profit from producing, selling and marketing a product that is so detrimental to the health of persons." Consequently the Sisters divested of their stock and have made efforts to find ways they can still challenge the tobacco industry such as notifying their members about the boycott of Philip Morris and RJR Nabisco products sponsored by INFAC.

Other groups, while definitely screened, are not as universal in their criteria related to maintaining tobacco stocks in their portfolios. Probably the most nuanced of those responding is the Presbyterian Church (USA). Its respondent to the questionnaire noted

that the Church screened the "top 10 companies involved in tobacco in terms of revenue from tobacco sales averaged over two years." Amended to the survey were resolutions passed at the 199th General Assembly (1987) and the 202nd General Assembly (1990) related to tobacco. Among the most sweeping approaches, as well as the most sensitive, the 1987 document covered 20 "overtures" for action from "compassion and concern for persons who are currently addicted to the use of tobacco products," to various suggested actions regarding Congress, to urging "local congregations to sponsor, house, or otherwise facilitate the offering of effective smoking cessation programs for the local community."

Another Protestant denomination with slightly different approaches to tobacco investments within its own entities is the Evangelical Lutheran Church in America. The respondent from the Church reported that the ELCA Board of Pensions has a screen in the Social Purpose Funds which states that "no investment will be allowed in corporations which manufacture products or engage in activities which are harmful to health, family or society, having to do with tobacco products." This screen is implemented by the ELCA Board of Pensions as beneficial owners of shares of stock in various corporations on behalf of members who choose to participate in the Social Purpose Fund. The ELCA Board of Pensions also manages unscreened funds which include shares of stock in Philip Morris.

Some investment managers may be wary of divesting tobacco stocks because of fears around fiduciary issues. It has not been evidenced that a screen on tobacco by any group, nor divestment of tobacco, necessarily undermines the "fiduciary obligation" of investment managers to maximize fiscal return. Indeed, the Domini 400 Social Index (which, among others screens, excludes tobacco), noted in July, 1997 that its return year-to-date has been 21.83% compared to the Standard and Poor's 500 of 20.48% and the S&P MidCap's of 13.01%. One, three and five year annualized returns are even higher. In 1996 the tobacco-free portfolio of the CREF part of TIAA-CREF outperformed its regular portfolio.

While not all Protestant and Catholic health care groups noted having screens on tobacco, none responded that they held tobacco stocks. This does not mean some of them do not have such holdings; the question asking if they held them was not answered. A significant amount of blank spaces were made by health care groups when asked if they held tobacco stock in their portfolios. Others, however, were clear in their response to this question. For instance, the Sisters of Mercy Health System of St. Louis declared: "Tobacco use is responsible for more than one of every six deaths in the United States and is the most important single preventable cause of death and disease in our society. The SMHS-St. Louis will not purchase smoking or chewing tobacco products."

A much larger percentage of Catholic Dioceses responding indicated that, while they might not have a screen covering tobacco, they had considered divesting. Indeed, two thirds (66.67%) answered that question positively, although this percentage is less than the overall number who held tobacco stock and said they had considered divestment (86%). At the same time, their responses showed that they were quite nebulous about

supporting shareholder resolutions of ICCR-related groups that addressed tobacco concerns. Such a position stands in marked contrast to another Catholic group responding, Catholic Healthcare West, of San Francisco.

For several years this health care system, sponsored by nine groups of women religious, filed shareholder resolutions with Loews Corporation addressing the apparent contradictions between its smoking and insurance businesses, and with Philip Morris asking for clear warnings on promotional items. In 1994 CHCW decided to divest (from "companies with more than 10% revenue from tobacco") "when we concluded shareholder activism was not succeeding in changing corporate behavior" and that profiting from this stock compromised its health care mission. At the same time it filed resolutions with other companies that were in the tobacco chain (such as H. B. Fuller which makes tobacco adhesives and Knight Ridder regarding its promotions of tobacco). In the latter case it scored a victory when Knight Ridder agreed to restrict certain kinds of advertising of cigarettes in its papers.

#### Involvement in Shareholder Actions related to Tobacco

According to the survey 13% of the responding Protestants said they owned tobacco stocks; 17% of the Catholics said they did. Thus, while there was a 37% difference between the two groups regarding screens, the difference was only 4% when it came to actual ownership.

The 83% without tobacco among their equities includes groups like CHCW that have divested. While they have divested of the direct stock, they, as well as groups like the Adrian Dominican Sisters and the Presbyterians, noted that they supported shareholder resolutions when other ICCR members presented them. One group of women religious based in a tobacco-growing state who still held tobacco stock and had sponsored shareholder resolutions on tobacco noted that "we divested ourselves of our farm tobacco base." Other groups that had divested, such as the Sisters of Charity of the Blessed Virgin Mary (Dubuque, IA) noted that they had divested of tobacco stock but sponsored a shareholder resolution with ARCO and Albertson's related to tobacco sales to minors in their stores. Even with the apparent differences among its various entities, the ELCA filed a 1996 shareholder resolution with Philip Morris related to women of child-bearing age and smoking.

The first shareholder resolution filed by an ICCR member (though not sent a survey for the sample) was the Midwest Province of the Capuchin Franciscans, my own community. This was done in 1980. Since then many Catholic groups and a few Protestant ones have filed resolutions. Some have been directed at the tobacco companies themselves, others to their "allies" (those making indispensable parts, such as H. B. Fuller), others to advertisers and still others on a host of other topics related to insurance and HMO investment portfolios, to smokefree restaurants, to Board of Director apparent conflicts in interest.

Whether the dioceses would be willing to vote in favor of ICCR-related tobacco issues, much less become "active in ICCR shareholder resolutions", was very unclear from their responses. The only Catholic Diocese that has ever filed a resolution with a tobacco company has been Green Bay (not a recipient of the survey) and then the issue did not deal with tobacco per se but executive compensation. On the other hand, while not all Catholic groups indicated an openness to take the lead in filing shareholder resolutions, 100% of the Catholic women's and men's congregations indicated they would both be willing to support resolutions and vote in favor of them if they related to tobacco concerns and they held the stock.

One of the groups that received much press attention about its tobacco-challenges has been the Maryknoll Fathers and Brothers, one of the groups randomly chosen for the survey. In 1996 The New York Times and other papers highlighted Maryknoll's sponsorship of a resolution calling on RJR Nabisco to spin-off its non-tobacco operations. In response to the survey question asking if the congregation had any statement related to the morality of smoking and/or tobacco use, Rev. Kenneth F. Thesing, MM, Superior General of the Maryknoll Fathers and Brothers, responded: "No. We have no statement. We are open to being further educated on this." He also noted that "tobacco stocks are not on our restricted lists" and indicated that the Congregation held stock in Loews, Philip Morris, and RJR Nabisco and that it was "involved in tobacco shareholder resolutions."

The September, 1996 issue of Maryknoll magazine, a widely-disseminated monthly for its benefactors and subscribers, featured the work of the congregation in "Bringing the Voice of the Oppressed to U.S. Stockholders." The cover featured a picture of Maryknoll's Coordinator of Corporate Social Responsibility, Father Joseph La Mar. While the article noted various non-tobacco actions involving Maryknoll, its mention of the RJR Nabisco resolution drew the most response from readers.

In its March "Members' Memo" column, John King of W. Seneca, New York questioned why Maryknoll felt "the need to invest in common stock" instead of "for the poor and the propagation of the faith." He then concentrated on its tobacco investments: "I have questions for Father Joseph La Mar after reading his story in the September issue: How does Maryknoll justify its investment in tobacco companies?" His letter in the March issue generated still more letters (from Hawaii to New Jersey) to Maryknoll itself.

William Shannon of Kailua wrote: "If Maryknoll wants to administer to the poor of the world it would look better if not done on the headstones of some 400,000 smoking deaths a year." Tom S. Anderson of Elma, New York stated: "I cannot tell you how disappointed I was to learn that Maryknoll invests in funds holding tobacco stocks. It is wrong. Tobacco companies actively market to children in the US and all over the world. Tobacco investors cannot separate themselves from the responsibility for the suffering and death which results from cigarette smoking." In a following paragraph he noted his own efforts to be tobacco-free in his portfolio: "I too invest in mutual funds, however, I check the fund investments and if a tobacco stock is listed I decline. I have enclosed an ad for a fund which specifically caters to investors who wish to avoid tobacco stocks. As

investors we all have alternatives." Another writer, insisting that her letter not be published, wrote to the Congregation praying that it change its policy and undo the harm it had done. Her letter stated that she felt "a great sense of betrayal that my contributions have helped support these killers." She went on to chastise "Maryknoll which writes articles about how tobacco companies are exploiting the 3rd World (and rightly so)" but invests in tobacco companies itself. David Boruch wrote from New Jersey that he felt Maryknoll violated "Christ's basic teachings" and highlighted Luke's passage about serving God and mammon (16:13). In his conclusion he stated that he was "greatly disappointed with a Catholic Organization I would always refer to as being an example of Christ's light in a very dark world."

Father La Mar responded in detail to each of the letters received. From the recipients' responses to him, his arguments were educational and convincing. Despite this fact, the "numerous negative responses coming to me about Maryknoll's investing in tobacco" as well as La Mar's own involvement led him to conclude: "I no longer could accept my own justification for owning such relatively large amounts of tobacco and, after consultation with our own treasury folks and with our investment managers, we have divested of tobacco stock and have added tobacco to our restricted list."

The conclusion of the Maryknoll story, its divestment from all tobacco stock, seems a self-fulfilling prophecy for Father Thesing's earlier response to the survey: "We are open to being further educated on this."

### Are Religious Leaders Silent on Tobacco?

The last page of the questionnaire addressed smokefree headquarters, issues around the group's publications (editorials on smoking and tobacco use as well as any policies related to accepting advertisements for tobacco and/or cigarettes) and whether the respondent thought silence existed "on the part of religious leaders regarding smoking and tobacco use."

Regarding smokefree workplaces, the Seventh Day Adventists and Catholic healthcare groups ranked highest, with 100% smokefree sites. Lowest on the list were the headquarters of Catholic Dioceses (70%). A person responding for one Archdiocese who noted its headquarters were not smokefree offered a possible rationale: "Both the Archbishop and the Bishop are smokers." In reference to any position on having smoke-free facilities at its Archdiocesan headquarters he concluded, "I do not perceive such a statement would be forthcoming."

Various Protestant and Catholic groups that had editorial positions on tobacco or had run news items related to the issue sent examples of these as they returned their surveys. While most commented on the problems related to tobacco itself, at least one editorial in a denominational magazine chastised the denomination for not going far enough. The respondent for the Presbyterians sent an editorial by Ken Little, Editor and Publisher of Presbyterian Survey. It concluded: "We can no longer just say it's a smoker's right to die

and pretend it doesn't concern us. To turn our backs on them is to deny Christ. Can't we do something more than pass toothless overtures?"

The final points on the last page revolved around the question: "Do you think there has been silence on the part of religious leaders regarding smoking and tobacco use? If YES, could you surmise why this may be? If NO, could you share evidence that support your perception?"

While most people offered an interesting range of responses, the respondent for one of the major Protestant denominations that has divested but which also has sponsored shareholder resolutions related to tobacco holdings in insurance and health maintenance companies stated: "This question illustrates one of the main problems with anti-tobacco activists: their excessive moralizing and sanctimoniousness. The (name of respondent's denomination), through its SRI activities, has been an active participant in efforts to ameliorate the effects of smoking on society. This is a responsible position that respects the right of individuals to make bad decisions. Unless you want to ban tobacco and jail tobacco workers (farmers? executives? shop employees), religious leaders should be at the forefront of efforts to change (and marginalize) tobacco companies, but preaching on the evils of tobacco? Not likely."

Apart from this criticism of the question (which include a critique of the survey itself), 100% of all the Catholic groups responding (diocese, religious men, health care groups), excepting for women religious (80%) answered in the affirmative. One bishop wrote: "The issue is complex and personal. The morality argument is not persuasive to everyone. Perhaps better and compelling research is needed demonstrating cause and effect relationships." In a similar vein another bishop explained that the silence arose because people "were still sifting the evidence." A Provincial wrote "In our community, there have been a lot of friars who have smoked, or still do. It seems to be a sensitive issue because of this." Another major superior opined: "Yes, a good majority of us used to smoke; my guess is we feel too close to the issue."

The women religious, not having a history of smoking toleration by members, often failed to respond to the question. However, for those who offered their own rationale on the silence, responses differed widely. One woman religious, responding to the questionnaire sent her as Vice President of a major health care system used the occasion to present it in female/male terms: "Many smoke, used to smoke or have friends who smoke, and don't want to challenge or be challenged. Most religious leaders are men and smoking is sometimes seen as a 'guy thing.' Easier to focus on abortion issues because it doesn't affect them directly." A member of the Council of one group based on the West Coast that had a tobacco screen wrote: "I don't know the reason for the silence. To me it is shocking that religious communities would have tobacco stock in their portfolios, but I know many do. I think some congregations simply let the manager buy whatever will be 'profitable.' Very sad." The respondent for another group on the East Coast explained her "Yes" response with three rationales that echoed other responses: "Probably because: 1) So many among them are smokers, or formerly smoked; 2) Smoking was so widely

accepted in society; 3) The difficulty of separating the morality of tobacco use from the moral judgements on tobacco users."

For their part the Protestant groups were less supportive of the statement asking if religious leaders had been perceived to be silent on tobacco. While some Seventh Day Adventists answered affirmatively, after exempting their own aggressive efforts, 62.50% of the other Protestants who answered thought there was relative silence. The respondent for the Christian Church/Disciples offered two possible reasons: "Opposition to tobacco use got identified with a narrow conservative morality. And second, many religious leaders are users of tobacco products."

Those who answered "No," offered various reasons for their position. The respondent for a hospital affiliated with the ELCA and the United Church of Christ stated: "I believe our institution, as an institution related to two national church bodies, has spoken in the ways indicated in this survey. Various church bodies are promoting health and wellness programs through their local congregations. The Parish Nurse program is growing in numbers. Whether churches speak of smoking as 'sinful' behavior is another matter. Because many religious people smoke, religious leaders included, there is a natural resistance to being judgmental." Another health care respondent noted "NO" because there were "lots of church programs."

What about Moral Issues Related to Tobacco?

The last respondent, the President and CEO, who noted "lots of church programs" available to help non-smoking efforts raised another point elsewhere: "As a hospital, we tend to make smoking an issue of primary care, not morality." This statement was echoed often in the responses to the surveys by a significant number of people. More respondents, including many who were not connected to health care institutions, seemed willing to speak to tobacco use as a health issue rather than a moral issue. One health care center sponsored by an evangelical church stated: "We do not believe it would be appropriate to make a moral statement regarding tobacco use. We do however, make a statement concerning health issues." One Seventh Day Adventist respondent from a health system sponsored by the denomination suggested: "Most religious denominations don't equate physical and spiritual health. They don't see health practices as a theological issue."

One respondent for a major Protestant denomination that had divested, but still had not made "any statement related to the morality of smoking and/or tobacco use" argued: "I suspect that there would be little openness to such a position, which would be seen as a private matter (for instance, is smoking to be considered a sin? Would smokers be allowed full communion?). There is a split between private decisions and public policy. This is rarely breached." A major superior of a Catholic men's group stated: "Unofficially we encourage people to give up smoking, but not yet from a perspective of morality. We've issued statements on alcoholism (how to deal with it, not moralizing) and sexual abuse. Perhaps smoking is still too close to us -- all of us on the Council gave it up while in office."

While some did not seem to interpret tobacco use from a moral perspective, at least one major superior of a men's group indicated a shift toward that position. Noting the virtual silence on the part of religious leaders on the topic, from his perspective, he wrote: "The only reason I know or surmise is that tobacco use in and of itself was not considered a moral issue. I stopped smoking 10 years ago for health and aesthetic reasons (smoke [as] offensive to others), but I did not consider it morally wrong at the time." He then concluded with words that I will use to end this paper. His point moves the issue more from any morality connected to individuals who smoke to the corporations who survive on their habit: "I think events in recent years and the debate over culpability, deceit and cover up by tobacco companies is raising moral concerns and issues that need church reflection and comment, and perhaps public stands."

In his follow-up response to the questionnaire, Father La Mar of Maryknoll echoed the approach of the American Baptist Church that not only addressed the morality issue toward the consumer but applied it to the tobacco industry itself. He wrote: "As I emerged myself in the ways to challenge the tobacco industry, RJR in particular, my education emoted me towards absolute disdain for the industry. Though I could make a moral argument against the smoker, my outrage was aimed at the immorality of an industry that intentionally programmed addiction for the single point of making profit to the detriment of the smoker."

Whether others make similar connections between individual morality vis-a-vis tobacco and the morality issues connected to those who produce and market it and whether tobacco production and/or use should be seen from a moral perspective as well as a health perspective remains to be seen.

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