

Moral Dimensions of Tobacco

A Study Paper Prepared by the Tobacco Study Committee North Carolina Council of Churches, 1984

The Study Committee on Tobacco was formed by the NC Council of Churches in response to a dilemma faced by the citizens of NC. On the one hand, mounting medical evidence links the use of tobacco with numerous health problems. On the other hand, the long established tobacco economy is threatened.

The tendency in NC has been to avoid or ignore the dilemma. Farmers, agribusiness people, manufacturers and distributors of tobacco products, as well as state officials, have found it difficult to deal directly with the crisis precipitated by the increasing pressure of negative health data.

The Christian churches of NC include in their constituencies persons facing this difficult dilemma. The Committee seeks to facilitate forthright and open discussion on all levels so that this dilemma may be carefully addressed.

The purpose of this paper is to provide a basis of discussion for churches and other groups. The paper does not make a pronouncement or draw final conclusions except where moral precepts are clear. This paper was first distributed in 1984 by the NC Council of Churches.

1. HISTORY OF THE COMMITTEE

Concerns for the issues in the tobacco economy in NC were brought to the NC Council of Churches by the Task Force on Hunger of the NC Conference of The United Methodist Church. The Task Force, in reflecting on the immensity of the problems of world hunger and on the health problems resulting from the use of tobacco, wondered why the investment in the production of tobacco could not be converted to the production of food stuffs.

The Task Force asked the NC Council of Churches to bring together a consultation on tobacco, health, and hunger. The matter was referred to the commission on Christian Social Ministries of the NC Council of churches, which directed the formation of a Tobacco Study Committee. Each denominational unit in the NC Council of Churches was invited by the Committee to participate. The Committee is comprised of 20 persons from nine denominational bodies. It includes pastors, lay persons, farmers, and business persons. The Tobacco study Committee can speak and act in its own name, not in the name of the NC Council of Churches as a whole.

Early on the Committee became aware of the complexity of the issue and determined the need for a public hearing as a way to gather information and to probe the issue. The hearing was held on November 29, 1983.

2. A MORAL / ETHICAL ISSUE

The threshold question – whether churches should deal with the tobacco issue – had to be considered before more specific issues could be raised. We found that there are serious moral and ethical questions involved in the production and use of tobacco, and that one function of the churches is to help people deal with such moral and ethical questions.

The section that follows will spell out the questions and issues in greater detail. For purposes of answering this threshold question, it will suffice to mention just three points.

Regarding the use of tobacco, the Christian churches have long spoken to the use of substances which injure health. Often this has been done by pointing out that our bodies are God's temples (I Cor. 6:19-20). If tobacco is injurious to one's health, it becomes (along with alcohol, illegal drugs, overeating, etc.) a viable area of concern for Christians.

Regarding the use and production of tobacco, the Christian churches have long expressed concern that we not be stumbling blocks for our brothers and sisters (Romans 14:21). If the use of tobacco by others is injurious to their health, then our production, advertising, and modeling of its use must be of concern to Christians.

Regarding economic hardship, the Christian churches have long preached and acted to prevent and alleviate suffering produced by financial distress. This concern has been especially acute for the least of Jesus' brothers and sisters (Mt. 25:31-40) and for those least powerful to affect their own situations (Amos 2:6-8, Isaiah 10:1-4). If a reduction in tobacco use and production would bring hardship to some North Carolinians, especially to farmers and business people unable to influence circumstances far beyond their control, then Christian churches must be concerned.

A final word is in order about the threshold question of appropriateness: moral perceptions change with changes in time and place. Increasing knowledge over a period of time may necessitate a change in attitude. Thirty years ago, the health questions had not surfaced. But, increasing knowledge of health problems related to tobacco use forces a reevaluation of what may have been comfortably-held ideas.

In like manner, place and custom often affect what are seen as moral issues. While some denominations in the South are well-known for their opposition to alcohol, people of these same denominations in other parts of our country and world freely and openly drink alcoholic beverages. Similarly, Christians in many parts of our country are certain that tobacco is a moral issue and that its use is immoral.

Christians in North Carolina may well reach different conclusions to the moral ethical questions raised by tobacco. But this Committee is convinced that in this place this time the questions are valid and appropriate and must be raised.

MORAL / ETHICAL QUESTION AND ISSUES

In this section we will ask what we think are relevant questions and will provide some information to help answer them. Some of these questions are easier to answer than others. Several are ones on which responsible and committed Christians will disagree.

Health

The smoking of tobacco became prevalent early in this century. The production of flue-cured tobacco, the development of cigarette rolling machines, and a public health concern over tuberculosis germs being spread through the cuspidors associated with snuff and chewing tobacco, all contributed to an increase in cigarette smoking.

As smoking became more common, health problems emerged which seemed to be related to smoking. In the 1950's, sir Richard Doll, a British researcher, studied the smoking habits of more than 34,000 physicians and found a strong correlation between smoking and disease. Throughout the 1950's, research data on the effects of tobacco on human health hazard of sufficient importance in the United States to warrant appropriate remedial action." Since then, each Surgeon General has spoken out against smoking; the current Surgeon General proclaims smoking to be the number one preventable cause of disease and death. Medical science is in general agreement that use of tobacco endangers one's health.

Lung Cancer was the first health effect to be linked to smoking. Subsequent research has linked tobacco usage to heart disease, emphysema, and several other forms of cancer. Recent research has even suggested harmful effects to unborn children of smokers and to those non-smokers exposed to the side-smoke of smokers.

The Committee heard conflicting evidence on the question of tobacco and health. The tobacco industry, through a letter from William Kloepfer, Jr. (Senior Vice-President for Public Relations, The Tobacco Institute) maintains that "the assertion that cigarette smoke is a cause of lung cancer ignores basic, unresolved questions about laboratory data, smoking patters and mortality rates, diagnostic variations and other confounding factors." Other suggested health consequences are downplayed as "guesswork," "not scientifically established," "matters of conjecture," or based on "errors resulting from clinical misdiagnoses," "conflicting evidence," or "inconsistent findings."

To the contrary, Dr. Seymour Grufferman, Duke Medical Center, offered results of numerous epidemiological studies showing a high correlation between cigarette smoking and death from lung cancer. He stated that extremely conservative statistics used by the Surgeon General indicate that cigarette smoking is responsible for approximately 30

percent of all cancers and that smoking increases the chances of lung cancer tenfold. Noting that the tobacco industry's argument of "no causation" is based on the lack of clinical proof of the mechanism by which smoking actually produces cancerous cells, Gufferman stated that a "smoking gun" is not necessary proof. He pointed out that medical science still has not demonstrated the mechanism by which aspirin works.

This Committee finds the evidence of the medical community to be convincing, especially on the relationship between smoking and lung cancer. Thousands of studies in many parts of the world, some even funded by the tobacco industry, cannot be lightly dismissed. The consistency of statements issued by the Surgeons General cannot be ignored. Almost everyone would agree that drunk driving is a proper concern for the churches partly because 25,000 people are killed each year by drunk drivers. According to Dr. Edward Brandt, Assistant Secretary of Health at the Department of Health and Human Services, about 300,000 Americans died in 1983 from smoking-related illnesses.

Two additional points are in order. First, a word about moderation. If dosage were the determining factor in the harmful effects of the use of tobacco, then the problem could be addressed by recommending moderation. Tobacco could be viewed as a pleasant aromatic, with an acceptable level of risk when used in moderation. It would be seen as analogous with spices used in food, which are not harmful when used in moderation. Cinnamon is a non-nutrient that is used only because it adds a nice flavor to food. It is not harmful when used in moderation. Similarly, the smoking of tobacco could be argued to be a way to add flavor to life, acceptable when used in moderation.

But dosage is not the sole determining factor in the harmful effects of the use of tobacco; the susceptibility of the user is an additional important issue. Medical research finds evidence indicating that some persons are susceptible to the harmful effects of even small amounts of the smoke of tobacco. For such persons, it is not the amount of smoke (dosage) that causes damage. Thus far, it is impossible to identify susceptibility prior to diagnosis of illness. The issue of susceptibility precludes solving the problem merely by encouraging moderation in the use of tobacco.

This brings us to another point, regarding habitual use. Concerns about health might be somewhat mollified were all tobacco users free to refrain from use at will. However, the experience of many regular users is that, because of either psychological or physical dependence, or both, they are unable to quit. The tobacco industry opposes the use of the word "addiction," a point made at the hearing by one representative of tobacco interests who raised the word in order to speak against it. This person attributed the inability of some to quit smoking to some kind of weakness of character or will. The fact remains, however, that many who smoke or use tobacco in other forms profess to want to quit or reduce use and are unable to do so. Several years ago a Gallop Poll indicated that 74 percent of current smokers reported wanting to quit.

Questions for Study:

In light of massive data linking use of tobacco to serious health problems:

- 1) What are the moral/ethical implications of personal use of tobacco products?
- 2) What are the moral/ethical implications of encouraging other persons to use tobacco?
- 3) What are the moral/ethical implications involvement the production, marketing and distribution of tobacco?
- 4) Is it necessary to be consistent when developing standards for substances which are detrimental to one's health? Is it morally consistent for a person of integrity to emphasize the detrimental effects of beverage alcohol and be silent on the problem related to tobacco?
- 5) Should not the user of recreational substances, such as tobacco and alcohol, evaluate the risk factor over/against the pleasure derived from the use of the substance?

What are the moral/ethical issues involved in exposing workers and/or users to dangerous chemicals used in the growing of tobacco?

Economics

The production of tobacco dates to Indian farmers long before English settlers arrived on the coast of North Carolina. The use of tobacco as a fragrant aromatic came to enjoy wide acceptance. It was used by many and tolerated by most. Production and marketing of tobacco and tobacco products quickly became an important part of the economy of North Carolina in colonial times. Many conscientious, morally upright persons and families have produced, manufactured and distributed tobacco. The tobacco economy has grown to be of great importance in North Carolina and the nation.

In 1982 total sales of tobacco generated \$1,206,528,723 of farm income. Severe growing conditions dropped the value to \$959,229,587 in 1983. Over 135,000 farmers had tobacco allotments in 1983.

In 1979 the Wharton School of the University of Pennsylvania measured the effects of tobacco's economic contribution to North Carolina. This report showed that 148,000 year round jobs are generated by tobacco, yielding \$1,592,410,000 in wages.

Tobacco production and use has strong cultural roots in North Carolina. Use of tobacco has long been regarded as a pleasant personal practice, providing a mild stimulant that does not affect the personality as alcohol and other drugs do. Data linking use of tobacco with major health problems is a relatively recent development.

The tobacco stabilization program instituted by the Federal government and approved periodically by producers has done much to stabilize the tobacco economy. The program

has limited production and supported prices at levels that enable farmers to profit. In recent years foreign competition, a surplus of tobacco already in stabilization, and criticism of taxpayer support for the tobacco program have created problems for the price stabilization program.

Tobacco has been a significant factor in enabling small farmers to survive. A small tobacco allotment, when combined with other field crops, meat and poultry production, and other income, has provided a subsistence for small farmers for many years. Any significant reduction in the price for flue-cured tobacco would mean disaster for many small farmers. Thus, the economy of North Carolina is heavily dependent upon tobacco, and many families and individuals are directly dependent upon it for their livelihood. Such persons cannot be criticized as immoral if alternative ways of economic activity are not available to them. Nor can the state be condemned if there is no alternative to a reliance upon tobacco. The society as a whole, however, is at fault if it acquiesces in tobacco dependency and fails to pursue with vigor and imagination the development of alternatives.

Surely it is preferable, in a moral sense, for a society in its major economic activities to produce goods and provide services which enhance human health and welfare. Surely most individuals, given the option, would prefer to earn their livelihood producing things that are healthful and socially beneficial. The issue of alternative forms of economic activity is, therefore, critical to the entire subject.

Currently tobacco has an advantage over the possible alternative crops because of the stable market provided by the allotment and price support system. Furthermore, in North Carolina tobacco is supported by a vast array of governmental and university related programs. Some effort is being made by public agencies to develop alternatives to tobacco and to facilitate a transition to other types of farming, but that effort is small compared to the effort to maintain and strengthen tobacco. Moreover, compared to the public support for tobacco, little effort is made to assist the farmer who by desire or necessity wants to shift to another crop.

Questions for Study:

- 1) Is tobacco essential to the economic health of North Carolina?
- 2) If so, what are the moral/ethical implications of efforts to discourage the tobacco economy?
- 3) What is the effect of radical disruption of economic well-being on physical and emotional health?
- 4) Society at large has benefited from the success of the tobacco economy. If the change in the tobacco economy is necessary, should not the larger community help assist the minority most directly threatened by this change?
- 5) If the tobacco stabilization program has been effective historically in stabilizing the

tobacco market, is it possible that similar programs could be developed to stabilize other farm commodities?

6) In the free enterprise system, what is the responsibility of the producer as to the effect of the product on the consumer? If the product is proven to be harmful. Should the producer wait for government to judge legality of production or does the entrepreneur have moral responsibility to set his/her own standards?

7) What can be done to assure the ability of the small farmer to survive if his ability to obtain cash through production of tobacco is removed? How important is the production of tobacco to the survival of the small family farm?

8) Is it morally preferable for persons to earn their livelihood by providing goods or services which contribute to human well-being, if that is possible?

Resource Utilization

As mentioned earlier, this Study committee grew out of the concern of some regarding the current crisis of world hunger. Tobacco production requires land. There is a scarcity of food in the world today resulting in starvation in certain parts of the world and severe malnutrition in many lands. An issue can be made of the use of crop land for the production of a commodity that has no current nutrient use, such as tobacco.

This issue is more complex than it first appears. Scarcity of food staples in the world is affected more by the problems of distribution than by the acres of available land in food production. It is difficult to conclude that land used in the United States for production of tobacco is a factor in causing or worsening world hunger.

But while land use in the United States may not be a factor, the use of other scarce resources may well be. The most obvious is the use of petroleum, not only as fuel for tractors and other production implements, and processing equipment, but also, as petroleum-based fertilizers and chemicals. In an effort to avoid the high cost of tobacco produced in the United States business interests have encouraged tobacco production in developing countries. The use of crop lands for a non-nutrient crop destined for export, in these countries where starvation is a problem, brings about hardship.

Questions for study:

1) Can questions about the production of tobacco be separated from the problem of human hunger?

2) How may the resources which can be used to produce food be allocated fairly so that hunger may be reduced?

3) Is the problem of hunger more a problem of adequate resources or of effective distribution?

4) If the problem is that of distribution, is the production of tobacco a major problem affecting world hunger?

Third World Marketing Issues

Some observers are especially disturbed by the increases in cigarette consumption in the Third World nations and the efforts being made by tobacco companies to expand markets in these nations. In the past decade cigarette consumption in the United States has increased by less than 5 percent. At the same time, per capita consumption has risen 33 percent in Africa and 25 percent in Latin America. Tobacco sales have stagnated in the developed nations. Producers are looking to the developing nations for expanded sales.³

Marketing techniques used in the Third World are similar to those which have been successful in the United States. Cigarettes are advertised as symbols of vitality, virility, sophistication, sexuality, adulthood, and modernity. A trade journal *World Tobacco* commented: The World is full of young people who are internationally aware and keen to express their individuality; smoking imported cigarettes is a favored way of doing so as wearing blue jeans wherever the disposable income in their pockets is rising." Erik Eckolm of Worldwatch Institute has noted: "Simple tubes of tobacco have come to represent modernity, savoir-faire, and in the minds of children, who for decades plunked down nickels for candy cigarettes and bubble-gum cigars, adulthood." He adds, "A street waif in Cairo is as apt to beg for a cigarette as coins."

For the most part governments of the Third World countries do not make an effort to inform or warn citizens about the health risks associated with smoking. The health risks have not become evident to them or caught their attention. In Brazil, however, lung cancer has been identified as the leading cause of death among males since 1974. Such statistics led the World Health Organization to conclude: "In some developing countries the epidemic of smoking-related disease is already of such magnitude as to rival even infectious diseases or malnutrition as a public health problem."

Questions for Study:

1) Is it wrong to advertise tobacco products in Countries where information about health hazards associated with smoking is not readily available?

2) Is it right for business interests to use one standard affecting marketing in the United States and another standard in another country?

3) What is the moral responsibility of individuals who benefit from marketing of tobacco products in Third World countries?

Freedom Of Choice

One of the benefits of a free society is the freedom of choice for adults, so long as this freedom does not deprive other persons of their freedom. The decision to smoke might appear to be one of those choices, since it is usually through that the health risks of smoking are borne largely by the individuals making the choice.

Factors that complicate the simplicity of this argument are: 1) Smoking is a social custom and when one person smokes, other persons in the area are exposed to the smoke. 2) Adult smoking habits provide a powerful modeling which affects the habits of children and youth. 3) Society must bear some of the social cost (increased insurance premiums and various tax burdens) of death and disability brought about by the use of tobacco.

Questions For Study

- 1) Is the risk involved in the use of tobacco borne largely by the individual making the choice?
- 3) What are the social costs of death or disability brought about the use of tobacco?
- 4) Are substances that threaten the physical health more a problem for society than substances that threaten the psychological well-being of society?
- 5) To what extent does smoking in public infringe on the rights of the non-smoker?
- 6) To what extent do efforts to reduce smoking infringe on the rights of the person who chooses to smoke?
- 7) If freedom of choice in use of tobacco is tolerated, what is the effect of advertising in enticing young persons to smoke?

SUMMARY

This Study Paper on Tobacco is intended to engage persons in forthright discussion of the moral/ethical issues generated by the tobacco economy in North Carolina. It is the hope of this Committee that the questions raised in this paper will facilitate such discussion. Such consideration may take into account the complexity of these issues and avoid simplistic

solutions or pronouncements.

Two conclusions are put forth by this Committee:

- 1) Medical data certifying the negative effects of the use of tobacco must be taken seriously.
- 2) Sudden radical changes in the tobacco economy must be avoided and the negative impact of inevitable change must be borne by all the people.

These conclusions lead the Committee to call for high priority research in several areas:

- 1) To determine the harmful and positive effects of the use of tobacco.
- 2) To remove the harmful effects from the use of tobacco.
- 3) To remove the harmful effects from the use of tobacco.
- 4) To develop alternatives to tobacco in the economy of the state.
- 5) To develop marketing in North Carolina so that producers may obtain fair market value for crops.

Larger Issues

The process of discussion dealing with the tobacco economy had led the Committee to reflect on issues larger than the immediate questions. These issues are beyond the scope of this paper, yet progress in dealing with the complex dilemma we face in North Carolina depends on eventual consideration of two of these larger issues.

- 1) Moral Responsibility in the Free Enterprise System.

The health of a system of free enterprise depends on the moral responsibility of the individual entrepreneur. It is not enough for the person in business to produce whatever is legal. The entrepreneur must take responsibility that his/her product will not on the whole do harm to the consumer. To the extent that free enterprise lacks this moral sensitivity the system is in jeopardy.

- 2) Balanced World Trade.

The world suffers greatly because of imbalance in world trade. American farmers suffer because of overproduction and the inability to market goods produced. Developing countries languish because of powerlessness to produce or to purchase needed commodities. Systems of world trade must be developed that will enable the remarkable bounty of the earth to be distributed so that every human being can generate goods and

services needed by others which can be traded for goods and services needed for him/herself.

Finally

The Christian community in North Carolina includes many persons who make their living directly from tobacco. Most denominations benefit from the various philanthropies generated by tobacco. The general economic climate in which congregations function is affected statewide by tobacco. The Christian community has received the benefits of the tobacco heritage. Now that significant data have come to light which affect the perception of their heritage and the present results of this economy, then people of integrity must deal with the contradiction implicit therein.