

State Street United Methodist Church Tobacco Free Policy

State Street United Methodist church is committed to providing a healthy, comfortable and productive environment for the members, constituents and staff of this facility.

The 2006 U.S. Surgeon General's Report, *The Health Consequences of Involuntary Exposure to Tobacco Smoke*, has concluded that:

1. Second-hand smoke exposure causes disease and premature death in children and adults who do not smoke;
2. Children exposed to second-hand smoke are at an increased risk for sudden infant death syndrome (SIDS), acute respiratory problems, ear infections and asthma attacks, and that smoking by parents causes respiratory symptoms and slows lung growth in their children;
3. Exposure of adults to second hand smoke has immediate adverse effects on the cardiovascular system and causes coronary heart disease and lung cancer;
4. There is no risk-free level of exposure to second-hand smoke;
5. Establishing smoke-free workplaces is the only effective way to ensure that second-hand smoke exposure does not occur in the workplace because ventilation and other air cleaning technologies cannot completely control for exposure of nonsmokers to second-hand smoke;
6. Evidence from peer-reviewed studies shows that smoke-free policies and laws do not have an adverse economic impact on the hospitality industry.

(U.S. Department of Health and Human Services. *The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General*. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2006)

According to the 2010 U.S. Surgeon General's Report, *How Tobacco Smoke Causes Disease*, even occasional exposure to second-hand smoke is harmful and low levels of exposure to second-hand tobacco smoke lead to a rapid and sharp increase in dysfunction and inflammation of the lining of the blood vessels, which are implicated in heart attacks and stroke.

(U.S. Department of Health and Human Services, *How Tobacco Smoke Causes Disease: The Biology and Behavioral Basis for Smoking-Attributable Disease: A Report of the Surgeon General*. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2010)

Numerous studies have found that tobacco smoke is a major contributor to indoor air pollution, and that breathing second-hand smoke (also known as environmental tobacco smoke) is a cause of disease in healthy nonsmokers, including heart disease, stroke, respiratory disease and lung cancer. The National Cancer Institute determined in 1999 that second-hand smoke is responsible for the early deaths of approximately 53,000 Americans annually.

Based on a finding by the California Environmental Protection Agency in 2005, the California Air Resources Board has determined that second-hand smoke is a toxic air contaminant; finding that exposure to second-hand smoke has serious health effects including low birth-weight babies, sudden infant death syndrome (SIDS), increased respiratory infections in children, asthma in children and adults, lung cancer, sinus cancer, breast cancer in younger premenopausal women, heart disease and death.

According to the World Health Organization, scientific evidence has firmly established that there is no safe level of exposure to second-hand tobacco smoke, a pollutant that causes serious illness in adults and children, and that implementing 100% smoke-free environments is the only effective way to protect the population from the harmful effects of exposure to second-hand smoke.

The Americans with Disabilities Act, which requires that disabled persons have access to public places and workplaces, deems impaired respiratory function to be a disability.

The U.S. Centers for Disease Control and Prevention has determined that the risk of acute myocardial infarction and coronary heart disease associated with exposure to tobacco smoke is non-linear at low doses, increasing rapidly with relatively small doses such as those received from second-hand smoke or actively smoking one or two cigarettes a day, and has warned that all patients at increased risk of coronary heart disease or with known coronary artery disease should avoid all indoor environments that permit smoking.

Unregulated high-tech smoking devices, commonly referred to as electronic cigarettes, or “e-cigarettes,” closely resemble and purposefully mimic the act of smoking by having users inhale vaporized liquid nicotine created by heat through an electronic ignition system. After testing a number of e-cigarettes from two leading manufacturers, the Food and Drug Administration (FDA) determined that various samples tested contained not only nicotine but also detectable levels of known carcinogens and toxic chemicals, including tobacco-specific nitrosamines and diethylene glycol, a toxic chemical used in antifreeze. The FDA’s testing also suggested that “quality control processes used to manufacture these products are inconsistent or non-existent.”

(Summary of Results: Laboratory Analysis of Electronic Cigarettes Conducted by FDA. Food and Drug Administration (FDA), July 22, 2009. www.fda.gov/NewsEvents/PublicHealthFocus.htm.)

E-cigarettes produce a vapor of undetermined and potentially harmful substances, which may appear similar to the smoke emitted by traditional tobacco products. Their use in workplaces and public places where smoking of traditional tobacco products is prohibited creates concern and confusion and leads to difficulties in enforcing the smoking prohibitions.

In light of these findings, SSUMC shall be entirely tobacco-free effective December 15, 2011.

The Tobacco-Free Policy applies to all SSUMC facilities and vehicles, owned or leased, regardless of location. Smoking, including the use of an e-cigarette, and use of other tobacco products shall not be permitted in any enclosed place. Smoking and use of other tobacco products shall also be prohibited outdoors on all SSUMC property, including parking lots, except in the designated tobacco use area outside the east entrance (stairwell from fellowship hall to sanctuary) facing Valley Drive. When

Family Promise guest families are overnight guests in the facility, they are permitted to smoke in the outdoor area between the chapel and the children's addition, accessible by the double doors at the intersection of the chapel and prayer room corridors. This policy applies to all members, constituents, staff and visitors.

Copies of this policy shall be available to all members and staff. Announcements shall also be printed in church newsletter and bulletins to ensure that everyone understands the policy. "No Smoking" signs shall be posted at all points of entry to the church building. No ashtrays shall be provided at any location on church property except in the designated tobacco use area(s).

This policy is being announced two (2) months prior to its implementation in order to give smokers time to adapt to its restrictions and to facilitate a smooth transition to a tobacco-free environment. On-site smoking cessation programs shall be made available to assist and encourage individuals who wish to quit smoking. Questions and problems regarding this policy should be handled through existing administrative channels and administrative procedures.

The success of this policy will depend on the thoughtfulness, consideration and cooperation of smokers and non-smokers. All members, constituents and staff share in the responsibility for adhering to and enforcing this policy. Violations of the policy by staff will be treated in accordance with current disciplinary procedures.

In recognition of incompatibilities with SSUMC's mission and the promotion of tobacco products, effective December 15, 2011:

No tobacco-related advertising or sponsorship shall be encouraged on church property, at church-sponsored events, or in publications produced by the church.

--Adopted by the church council in October 2011; amended March 2016.

Appendix 1

The 2012 Book of Discipline of the United Methodist Church

¶162. M) *Tobacco*—We affirm our historic tradition of high standards of personal discipline and social responsibility. In light of the overwhelming evidence that tobacco smoking and the use of smokeless tobacco are hazardous to the health of persons of all ages, we recommend total abstinence from the use of tobacco. We urge that our educational and communication resources be utilized to support and encourage such abstinence. Further, we recognize the harmful effects of passive smoke and support the restriction of smoking in public areas and workplaces.

Appendix 2

The 2012 Book of Resolutions of the United Methodist Church

Resolution 3042. Alcohol and Other Drugs

II. Tobacco

The use of tobacco is another form of drug abuse, even though it is legal. Overwhelming evidence links cigarette-smoking with lung cancer, cardiovascular diseases, emphysema, and chronic bronchitis. In addition, cigarette-smoking can negatively affect a developing fetus, and secondary smoke is a known carcinogen. The United Methodist Church discourages all persons, particularly children, youths and young adults, from using any form of tobacco.

We commend the suspension of cigarette advertising on radio and television. We are concerned about other advertisements that associate smoking with physical and social maturity, attractiveness, and success, especially those targeted at youth, racial minorities, and women. We support the rules of the US Federal Trade Commission and agencies of other governments requiring health warning statements in cigarette packaging. We are also concerned that the tobacco industry is marketing tobacco in developing countries. Therefore:

1. We recommend that tobacco use be banned in all church facilities.
2. We recommend a tobacco-free environment in all public areas.
3. We recommend the prohibition of all commercial advertising of tobacco products.
4. We support expanded research to discover the specific mechanisms of addiction to nicotine. We urge the development of educational methods that effectively discourage the use of tobacco and methods to assist those who wish to stop using tobacco.

5. We urge the Department of Agriculture and other government agencies to plan for and assist the orderly economic transition of the tobacco industry—tobacco growers, processors, and distributors—into industries more compatible with the general welfare of the people.

6. We support comprehensive tobacco control policies and legislation that includes provisions to: a) support The Framework Convention on Tobacco Control (FCTC), the Global Tobacco Treaty and its provisions; b) reduce the rate of youth smoking by increasing the price of cigarettes; c) protect tobacco farmers by helping them shift from tobacco to other crops; d) give the US Food and Drug Administration full authority to regulate nicotine as a drug in the United States; and e) fund anti-tobacco research and advertising, as well as education and prevention campaigns.