



Archdiocese of Vancouver
ARCHBISHOP'S OFFICE

Pastoral Statement on Vancouver's Overdose Crisis

Dear Brothers and Sisters in Christ:

Following the teaching of Jesus, the Second Vatican Council calls us to scrutinize “the signs of the times.” In the Lower Mainland, these signs are calling the Church to address today’s lethal crisis of drug overdoses, in particular fentanyl and other opioids.

Last year, more than 900 British Columbians died from overdoses. On average, a life is taken every 10 hours – more than double the number of homicides and traffic fatalities combined. And the situation is not getting better.

This health emergency is widespread, cutting across every segment of society, devastating families and communities. It is claiming the lives of people on the street and those struggling with mental illness and trauma. It is killing our youth, students, workers, and elderly. Sadly, many of those who survive suffer brain damage and from other long-term consequences.

Our hospitals, such as St. Paul’s, are particularly affected by the overdose crisis. St. Paul’s dealt with 42 overdoses between Christmas Eve and New Year’s Day. Everyone feels the impact: from emergency room personnel, to hospital staff, to health-care workers at all levels. The toll is especially brutal on first responders who find themselves physically and mentally exhausted by their exceptionally difficult job.

The Government admits this is a public health emergency. On top of the \$1.4 billion it spends annually on mental health and substance abuse, \$10 million is being added for an addiction treatment research and training centre, as well as a Joint Task Force on Overdose Prevention focussing on addiction prevention, treatment and recovery.

Police call the situation a crisis and are holding public awareness workshops and visiting schools. They are prioritizing the investigation of drug-related crimes and adding advanced equipment and training to detect fentanyl better.

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“You shall love your neighbour as yourself” (Mark 12:31).

As for Catholics, we recognize in this scourge a pressing call to see the face of Jesus in those who suffer and those who are tragically claimed by lethal drug overdoses.

By means of this Statement, I am inviting the Church in Vancouver to respond to the overdose crisis by reaching out to our society’s suffering men, women and young people.

Before responding, however, we must first identify the causes of this health emergency. While there are many contributing factors, three of them deserve special consideration.

Over-prescribing Opioids

Skyrocketing prescription opioid use is identified as a major source of the problem. Opioid prescription rates in North America are more than six times higher than in Europe, and were rising several years before the current overdose crisis. As our population increasingly turns to prescription drugs to treat acute and chronic pain, the number of prescriptions continues to grow. Unfortunately, some patients become dependent on these drugs, turning to the street when they are no longer available by prescription. Moreover, friends often share or sell their drugs, resulting in others becoming addicted.

Clearly the disproportionate use of highly addictive opioids and finding new ways to deal with acute and chronic pain both need more of our attention.

Social Isolation

Among the most salient challenges we face is the growing sense of social isolation in our cities. More Canadians now live alone than at any other time in history, and large numbers of them report feeling lonely. Research shows that the more people feel isolated, the higher the likelihood of substance abuse, setting up a vicious circle of loneliness and addiction.

Social relationships in the community, which are the foundation of every society, are breaking down because an excessively individualistic worldview prevails in many quarters. Sacrifice and love of neighbour are taking a back seat to instant gratification.

Poverty, economic uncertainty and family disintegration make it difficult to deal with people who are increasingly cut off from one another and left alone to deal with their psychological and physical pain. Drug use and abuse appeal to those seeking to escape suffering, loneliness and isolation.

On the other hand, when communities are welcoming and people know one another and feel as if they belong to a broader group, crime rates drop, as do levels of depression and suicide. Close-knit communities experience less substance abuse, less child abuse and lower teen pregnancy rates.

Mental Illness

Addressing substance abuse demands that we examine more closely the prevalence of mental illness among drug users. More than half of those seeking help for addiction suffer from a mental disorder, making them particularly vulnerable to drug dependency as a remedy for their pain. Once addicted, a lifelong struggle to break the habit begins.

An estimated 20 per cent of Canadians experience a form of mental illness at some point in their lives, most of it beginning at a young age. Very few will ever get the mental health services they need, and even fewer will receive early intervention and treatment.

People who suffer from mental illness need our help, our friendship, our outreach, our resources and our prayer. We can assume our responsibility by educating ourselves and others about this mental health crisis and its causes.

Experts on substance dependence agree that addiction is a disease over which people have little control, producing suffering as real as any physical disease. For this reason, as Pope Francis has said, “We cannot stoop to the injustice of categorizing drug addicts as if they were mere objects or broken machines; each person must be valued and appreciated in his or her dignity in order to enable them to be healed.” We must not abandon them, casting them aside as victims of our “throwaway culture.”

Imitating Christ the Healer, the Church is obliged to bring His compassion to everyone in pain, whether physical, emotional or spiritual. We need to rid ourselves of judgmental attitudes that contribute to the social stigmatization of our brothers and sisters. We must stamp out the stigma of mental illness.

Why not respond to those struggling with mental illness and addiction by inviting them to be fully integrated into your parish and school communities? Ask

yourselves: do you include them and make them feel welcome, or do you shun them? Are you open to residential housing or community health centres in your own neighbourhood?

In young people, substance addiction and suicide are closely linked. The increasing erosion of the family leaves too many children and adolescents unsupported and fending for themselves. Not enough child and adolescent psychologists and psychiatrists are available to address these concerns, and the waiting lists for publicly funded counselling are too long.

If we are serious about tackling the overdose crisis, we must improve access to psychological and psychiatric support for this extremely high risk and vulnerable age group. Our young people are crying out for help, often silently, but they are not receiving the assistance they need in time to head off a substance abuse problem.

Now is the time to open a conversation on youth and mental illness. It is an issue of vital public importance. With a provincial election this spring, addiction and mental health intervention for youth should be a priority issue for all parties.

Responding Together

I invite our school and parish communities to consider how they can respond to the reality of drug abuse and mental illness. We have just ended our celebration of the Year of Mercy, which inspired us to practise more intentionally the corporal and spiritual works of mercy. Let us continue to reach beyond our pews and parish organizations, recognizing the face of Christ in the marginalized – the lonely, the homeless, the imprisoned, the mentally ill, and the addicted.

As a community of believers, how are we addressing this addiction crisis?

At an institutional level, Providence Health Care is on the front line. It is responding to addiction and mental illness needs with a wide range of services, which include research and treatment, addictions consultation, emergency psychiatry, psychiatric nursing, social work, and occupational therapy services. St. Paul's Hospital Emergency receives 43 per cent of the most severe mental health emergency patients in the Lower Mainland.

As people of faith, we can speak up, increase public awareness about our mental health and addiction crisis, and take practical steps to address it. Specifically, we can:

- urge elected officials to give the overdose crisis the attention it deserves by emphasizing the need for more treatment and residential care for those addicted;
- ask Government to tighten regulation of opioid manufacturing;
- call for more education around safe-prescribing practices;
- advocate for improved pain management training for physicians and care providers, and better management of chronic pain for all;
- support police in doing educational presentations in schools and communities; and
- promote support services in parishes and entities, such as 12-step programs and other recovery methods;
- contribute financially to organizations on the front lines of this battle.

The Church's response to the overdose crisis must imitate that of Jesus, who told us: "Whatever you do to the least of my brothers and sisters, you do unto me" (Mt. 25:40). He identified himself with those who in his day were in need: the hungry, the thirsty, the stranger, the naked, the sick and the incarcerated.

In 2017 Vancouver, Jesus would also identify himself with those afflicted by mental illness and addiction. As His disciples, we are called to do likewise.

Sincerely yours in Christ,



✠ J. Michael Miller, CSB
Archbishop of Vancouver
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* The contribution of Providence Health Care to this document is gratefully appreciated.