
New Slavery New Freedom

A Pastoral Message on Substance Abuse



Early this year a young man named David came before a committee of our Conference and told a powerful story of pain, hope, and challenge.

I used cocaine for a period of twelve years. I lost some very wonderful jobs, a couple of cars, and lots of money. Eventually, the material things were gone, and I began chewing through the human beings around me. . . . As I am sure you can imagine, the combination of drugs and children is uniquely horrible. Even while I was in the midst of using around my children, I had a strong feeling that this was something that God would not easily forgive. It felt like the end of the line. . . .

United States Catholic Conference

I promised myself that I would never lose a marriage because of drug use, but it happened. And I swore I would never resort to dishonesty to feed my addiction, but I did. But when it came to being a bad parent, something of my old values responded with revulsion and disgust. I showed up at my parents' house with my daughters under each arm and told my folks that there were no adults in my house, only dope addicts. I felt completely worthless, having violated everything I had ever learned. I entered detox and was referred to a six-month residential treatment center. It was my fourth stab at sobriety and something took. I got honest. I got serious. I got clean. That was fourteen months ago. . . .

Those folks who manage to stay clean for a month are really still very sick, vulnerable people. In that sense, the unconditionally loving arms of the Church could possibly mean the difference between somebody living or dying. It was hard to avoid a spiritual dimension in my own recovery. I woke up to a miracle every day that I was clean and crawled into bed each night grateful. . . .

Part of the program that I am living every day requires that I take a fearless moral inventory of myself and share it with another person. . . . The priest listened impassively as I described leaving my children parked outside the crack house on a cold winter's night. He didn't react when I talked about leaving them hungry while I took another hit. When I was finished, I was crying. I asked how I could ever be forgiven. Each sober breath you draw is an act of grace, my friend said. You are making amends every day you do not use. I found enough comfort in what he said to forgive myself. . . .

I am not a big believer in the "war on drugs." There is no war, and there are no sides. There is only addiction and the human and social consequences that go with it. The Church can do more than mitigate the gravest of those problems. In my opinion, by demonstrating a willingness to minister to those afflicted with this disease, the Church becomes better. . . . The Church has the proximity and the people to make a difference in what seems like an insoluble problem. . . .

In today's environment, drug addicts have become almost like lepers. It seems like it is an entirely appropriate place for the Church to serve. Helping people rebuild their lives sounds like noble work to me.



There are many Davids in our midst, people recovering from addiction whose daily

courage is a sign of the power of God's healing presence to all of us.

Sadly, there are millions more still caught in the deadly grip of addiction—millions of lives wasted in dependency and despair, lives diminished by fear and hopelessness, lives lost in sickness and violence. The alcohol and drug epidemic sweeping America is not a pretty picture, not for the nation and not for the many communities affected: rich and poor; urban, rural, and suburban; and all races and ethnic groups. Some signs of this crisis are dramatic, such as the drug-related violence and crime we see in our newspapers and on television. Other aspects are hidden in the quiet desperation of families struggling with alcoholism. The fundamental reality is clear: the lives and dignity of so many in our family of faith are being undermined or threatened by the abuse of alcohol and other drugs.

As pastors, we feel the pain and we know the suffering that comes with substance abuse. Many in the Catholic community have recognized the needs of chemically dependent individuals and families and have begun heroic parish, neighborhood, family, and school programs to address this tragic situation. Our Catholic Charities, hospitals, and other social and family agencies also have developed comprehensive programs in prevention, treatment, and rehabilitation.

A number of individual bishops and state Catholic conferences have already addressed this problem, calling their dioceses to new and renewed efforts to expand the pastoral care existing in hundreds of parishes and church agencies and institutions for those suffering from chemical dependency.¹ We applaud their efforts and have built upon their leadership in

¹ New Jersey Bishops, *Pastoral Statement on Substance Abuse* (May 1988); James Cardinal Hickey, *Confronting a New Slavery* (June 4, 1989); New York State Catholic Conference, *Chemical Dependency: A Challenge for the Church* (June 1989).

fashioning this pastoral message. Chemical dependency, however, is a nationwide problem of immense proportions; the entire Catholic community must demonstrate Christ's own love in opening our arms and hearts to those suffering from addiction and in advocating effective, compassionate policies to turn the tide of addiction in this country.

We must look at the harsh realities of addiction as a people of faith who recognize the power of evil to enslave us and the love and power of Jesus Christ to bring us freedom from slavery. We must look at these realities as a people of hope for whom the modern darkness of alcohol and drug addiction can be dispelled by transforming us into a people who walk in the light. We must look at these realities as a people of love strong enough to confront addiction in our own homes or crime in our streets and tender enough to extend a healing touch to those who are enslaved, alone, and broken-hearted, casualties of abuse of alcohol and other drugs.

As people of faith, we are called to share our hope and love with those whose lives are already wounded by this epidemic. We must assure them that this tragic situation can be overcome through proper recovery programs and rehabilitation and that, with the power of God's love, they can create new lives from the brokenness of past weakness and failures. As so many recovering substance abusers know, only when they acknowledge their own powerlessness over chemical dependency and that their lives have become unmanageable can they experience the power that is greater than any drug and the freedom that breaks the shackles of any slavery. What they have learned about the power and freedom of God's grace can enrich the faith of all of us as well.

The Casualties



Substance abuse creates many casualties. One in ten persons in the United States is an alcohol abuser, and one in four is affected by the abuse of alcohol in their own families. More than just a matter of statistics, chemical dependency is a reality in the lives of many members of our own Church—clergy and laity alike. Substance abuse is a critical factor in the painful stories told by millions of individuals and families served by our Catholic Charities and Catholic health agencies and institutions. Many are the children of substance abusers, who repeat the patterns of abuse in their own lives, all the while promising themselves, “it’ll never happen to me.”² Others are the co-dependents terrorized in the privacy of even the nicest homes by the erratic and threatening behavior of chemically dependent family members.

Among the casualties are young people with serious drug problems, 55 percent of whom name alcohol as their primary drug. The average starting age for alcohol use is twelve (thirteen for illegal drugs), and six percent of high school students are daily users of alcohol. Their second primary drug is marijuana, which has been tried by 50 percent of America’s youth.³ PCP (“angel dust”) is currently making a major comeback nationally, especially with urban, minority youth, for whom it is a particularly destructive drug.

Cocaine—especially when smoked as the highly addictive “crack cocaine”—is fast destroying the health and lives of many young people. For many communities, among their younger and older members, cocaine is the newest, most pervasive, and

2 Claudia Black, Ph.D., MSW, *It Will Never Happen to Me!* (Denver: M.A.C. Printing and Publications Division, 1982).

3 *Chemical Dependency: A Challenge for the Church*, p. 3.

most terrifying form of addiction, drawing down upon its users and traffickers and their families a dreadful combination of quick money, deadly violence, and personal physical and moral disintegration. A smokeable form of methamphetamine—"ice"—is now making inroads, presenting all the problems of crack cocaine with more lasting highs and more bizarre and dangerous psychological effects.

In many ways, the most tragic casualties are the children. Some are placed in foster care as substance abusing parents are no longer capable of providing home or family. Others are born addicted themselves, heirs of the drug slavery destroying their mothers. One estimate is that as many as 375,000 newborns may be damaged annually by drug and alcohol exposure during pregnancy.⁴ Abuse of alcohol and other drugs victimizes hundreds of thousands of other children in their own homes when it fuels the gratuitous violence and anger of their parents or their addict friends in patterns of child abuse.

The elders of our communities have fallen victim to substance abuse as well. For many, the most common form of chemical dependence is not the traditional use of alcohol but the newer abuse of prescription drugs, often an escape from the all too common isolation and loneliness of old age.

Ultimately, we are all casualties of substance abuse and chemical dependency. Besides the millions of individuals and families personally ruined by abuse of alcohol and other drugs, the economic and social costs are immense. The multi-billion dollar "war on drugs" and the drug-related street violence that stalks our communities and kills so many young people are the most visible signs of the severe disease infecting our country. It is estimated that over \$100 billion is spent each year on medical treatment for complications arising from untreated alcohol and drug dependency. The annual cost of illegal drug use to the business community is estimated to be an additional \$60 billion, more than half of which is in lost productivity.⁵

4 Study based on survey of thirty-six hospitals by the National Association for Perinatal Addiction Research and Education (NAPARE, August 1988).

5 The White House Conference for a Drug Free America, *Final Report* (Washington, D.C., June 1988), p. 85.

Reasons for Our Concern



Chemical dependency is a direct assault on the dignity of the human person, a destructive invasion of the lives of individual users, their families, and their communities. Each of us, created in God's own image, is intended to share our Creator's freedom, love, and happiness. People physically, mentally, or emotionally addicted to a drug, in contrast, are clearly dependent, enslaved, and unhappy—a perversion of God's creative plan for us.

Those who abuse alcohol and other drugs often believe that they must have the drug just to feel good, to feel normal, or just to get by. This psychological dependence usually leads to physical dependence, the full-blown "addiction." In both psychological and physical dependence, individuals have great difficulty stopping or even controlling their drug use. Many are so dependent upon their chemical of choice that they are incapable of mature love for those who love and reach out to them.

Chemical dependency then can lead to disorders of the nervous system, physical deterioration, and even death due to drug-related physical problems, accidents while intoxicated, or by suicide—tragically prevalent among drug using adolescents. The mushrooming growth of AIDS, transmitted by intravenous drug users by the sharing of needles and by sexual contacts, threatens increasing numbers of addicts, their spouses, and their children. At the same time, it is creating a crushing demand on medical and social services in both rural and urban communities.⁶

⁶ See our discussion of HIV / AIDS in National Conference of Catholic Bishops, *Called to Compassion and Responsibility: A Response to the HIV/AIDS Crisis* (Washington, D.C.: USCC Office for Publishing and Promotion Services, 1989).

In many ways, the spiritual symptoms of abuse and addiction reveal most poignantly the human devastation from chemical dependency. Rather than making themselves happy, dependent persons enter a world of lonely isolation, seeing their surroundings as increasingly hostile. Their reality is devoid of a caring God; they feel dominated by forces of evil. To protect their dependency, they lie to themselves and to their loved ones. They deny the evil eroding their bodies, minds, and character, and often blame others for a host of imagined wrongs, including their drug abuse. The chemical abuser's self-worth is often reduced to nothing; and even the possibility of change, recovery, treatment, and rehabilitation is overwhelmed by hopelessness, alienation, and spiritual starvation.

Left alone, most chemically dependent persons will progress more and more deeply into their addictive illness and self-destruction. Blind to their own slavery, they are least able to liberate themselves from it. Their condition cries out for others to recognize the problem and intervene to confront and support them. Responding effectively is the challenging task of family, co-workers, friends, and faith community.

Time for Action



Calming the storm of alcohol and drug abuse raging across our communities will take time and great effort. As people of faith, though, we can and must marshal the combined voices of family, community, and Church in a resounding "no" to drugs; "no" to alcohol abuse; "no" to fear and crime in our streets; and "no" to indifference, neglect, and inaction.

We must begin first in the *family*. The family plays the essential role in prevention. Positive parental role models and stable, loving relationships in the home offer the first and best hope for a drug-free and fulfilling life. This is true in all families—two-parent, single-parent, and multi-generational households, where responsible love often demands heroic efforts of parents and other caretakers. Every family member must help all members, especially the young, to make responsible choices about alcohol and drugs in the larger context of their personal responsibility to use the gifts God has given each of us in service to others.

The family remains the best resource for prevention, early detection, recovery, and treatment of chemical abuse. Families need to be helped to become aware of the early signs of substance abuse and those effective techniques for intervention designed to help individuals suffering from abuse to get into proper treatment or otherwise begin recovery. The family must also be involved in the treatment process and, certainly, in effective follow-up after formal treatment is completed and the recovering alcoholic or addict returns to the community.

Community responses begin by acknowledging that substance abuse is widespread—from our poorest to our most affluent neighborhoods. We must confront the indifference, cynicism, and even racism that imply that as long as the most brutal aspects of this crisis are confined to a few neighborhoods, it does not touch us or call for our action. Problems with abuse of alcohol and other drugs are pervasive, costly, and will have profound economic, social, and political consequences for years to come.

Specifically, we must insist that our communities recognize that they have a severe problem and that public denial only worsens it. We must call for comprehensive educational programs at all levels in all schools, as well as in the broader community, for example, in parent and neighborhood groups. Our stand against substance abuse is a stand *for* human life and dignity. Therefore, we must not let our fear and frustration turn us to means inconsistent with our values, such as the use of the

death penalty for drug-related crimes.⁷ Furthermore, the widespread use of handguns and automatic weapons in connection with drug commerce reinforces our repeated "call for effective and courageous action to control handguns, leading to their eventual elimination from our society."⁸

When we call for more police protection and swift punishment for violent crime, we must urge and be willing to pay for adequate federal, state, and local resources for prevention, treatment, and rehabilitation for all substance abusers as well. Not doing so will cost far more in the future than appropriate programs now. Good programs do exist in many communities already, but they must be supported and strengthened. Let us build on their hard work and caring service. Businesses, too, should promote drug-free workplaces and employee assistance programs that include counseling and treatment. Finally, we must address the underlying problems that contribute to the allure of these substances and promote an illegal economy based on drug trafficking—lack of employment, poverty, inadequate education, lack of purpose and meaning, poor housing, and powerlessness.

Our *church* response to drug and alcohol dependency must draw upon all of our spiritual, pastoral, social, and institutional resources. Across this nation, Catholics are already deeply involved in works of education, health care, human services, and pastoral ministry to those affected by chemical abuse. Many people in our dioceses are confronting substance abuse—in their own lives and in their families and communities—and their efforts need to be supported and affirmed. But more is needed.

Our *parishes* should pray regularly for those struggling with substance abuse, those involved in recovery, treatment, prevention, and enforcement, as well as for their families. Homilies should present the realities of substance abuse in the context of our responsibilities to one another and the power of God to enable personal change. Every parish should be reminded that

7 Cf. Committee on Social Development and World Peace, United States Catholic Conference, *Statement on Capital Punishment* (Washington, D.C.: USCC Office for Publishing and Promotion Services, 1980).

8 Committee on Social Development and World Peace, United States Catholic Conference, *Handgun Violence: A Threat to Life* (Washington, D.C.: USCC Office for Publishing and Promotion Services, 1975), no. 8.

chemical dependency tears at the fabric not just of family and community but of our faith community as well. Whenever some are tormented by chemical dependency, we all suffer. Specific parish initiatives exist across the country and span a wide variety of responses:

1. Our parishes can offer individuals and families struggling with substance abuse the abundant resources of personal and communal prayer, the power of God's word in the Scriptures, and the rich treasure of our sacramental life. They can experience healing and strengthening for life without addiction in the Sacrament of Reconciliation and know the loving presence of Christ Jesus in the celebration of the Eucharist in the midst of a supportive faith community.
2. An Alcohol and Drug Awareness effort should develop educational, informational, preventive, and advocacy programs of service to the entire community. *Wherever possible, our parishes should offer adult education programs on a regular basis to make this knowledge available to as many families as possible.* Parishes are also ideal locations for formation of parent groups to share information and concerns about substance abuse and to develop education and training resources for parental guidance in youth development.
3. Parish facilities also could be made available to self-help groups such as Alcoholics Anonymous (AA), Narcotics Anonymous (NA), Al-Anon, Alateen, Adult Children of Alcoholics, and NAR-Anon. The Twelve-Step Program, the centerpiece of these powerful groups, has a profoundly spiritual foundation based on trust in God. Our parishes ought to be places of hospitality and support for those confronting and recovering from substance abuse.
4. Parish schools and religious education programs should include an appropriate substance-abuse curriculum, with maximum appropriate parental involvement and collaboration with other schools and community educational efforts. Teachers and other professionals should be trained to present this curriculum. These efforts should stress the importance of family and the dignity, self-esteem, and responsibility of individuals.

5. Pastors and all parish and school professionals should learn to recognize early signs of abuse of alcohol and other drugs. They are often the first persons contacted by individuals and families in crisis, and they should familiarize themselves with available community resources and respond by making appropriate referrals. We are blessed in this country with some excellent treatment centers, and parishes should be prepared to help people in need to find appropriate assistance. Parishes should also advocate on behalf of the many persons who encounter obstacles when searching for appropriate and affordable treatment or other recovery programs. Parishes also should reach out to families where alcohol and drug abuse is already identified and to the children of those families, who are likely to continue substance abuse in their own lives.
6. Parishes can help people in the process of recovery, including those who return to the community after treatment. They can provide supportive services to spouses and children during this time when persons in recovery are rebuilding their lives, seeking new jobs, learning employment and social skills, and reentering the community.
7. Where possible, parish efforts should be joined to those of other churches, ecclesial communities, and other religiously sponsored programs for prevention, treatment, rehabilitation, and advocacy. Parish functions and activities need to model responsible use of alcohol. They should also support and work with local community organizations committed to the common struggle against substance abuse and its causes.

All parish efforts should flow from the faith-filled acknowledgment of our own sinfulness and from the healing power of the risen Christ mediated through the church community. We who have experienced the tender compassion of a loving God should graciously share it with others wounded by dependency and addiction.



When parishes welcome recovering alcoholics and addicts and families wrestling with this disease, they are calling people into the healing and grace-filled dynamic of penance, forgiveness, and reconciliation. Such parishes will find their celebration of the Lord's death and rising

in the Eucharist enriched by the pattern of death and resurrection fleshed out in the one-day-at-a-time recovery of those affected by addiction. Faith, hope, and love shared with people wounded by dependency will be returned in the renewed commitment of those who are so welcomed into our parish families.

As dioceses, we must also bring to bear the wealth of our diverse gifts and resources to confront chemical dependency. Days designated for diocesan-wide prayer for alcoholics, addicts, and their families and special petitions in the Prayers of the Faithful during the liturgical year can be combined with specific actions on the part of diocesan offices and agencies.

Each diocese should have a clear substance abuse policy. Catholic Charities,⁹ social services, youth services, education offices, and health care institutions and agencies should continue and expand education, prevention, treatment, and rehabilitation programs. They also should explore and develop new responses to community needs for prevention, treatment, rehabilitation, and advocacy. High priority should be given to:

- outreach programs to the poor and to minority communities;
- promotion of drug-free workplaces;
- expansion of services in conjunction with parishes;
- provision of child care for those families where parents are attending recovery groups or undergoing treatment; and

⁹ See "Addiction and Recovery: A Look at What Catholic Charities Agencies Can Do to Bring an End to Substance Abuse," in *Charities USA* 17:3 (May/June 1990).

- model employee assistance programs in dioceses and in all church institutions that will include counseling and treatment for substance abuse.

As a national conference and in our state Catholic conferences, we are concerned that government at all levels exercise its responsibility for the coordination and provision of essential services to combat substance abuse. We commit ourselves to ongoing advocacy efforts to promote public policy and to enact legislation to ensure access to adequate, affordable, and appropriate treatment and services for all those in need. No persons suffering from chemical dependency should be denied access to the treatment that could free them and their families from this slavery. Especially, no pregnant women or mother should be denied the care that can ensure the health of her children and promote the integrity of her family. We will urge legislators and other public officials to allocate sufficient funds for prevention and treatment to accomplish these goals.

We are often reminded of the vivid impact, especially on youth, of television programs, films, and recordings that present the use of alcohol and other drugs as attractive and harmless. We note, too, that some in the entertainment media have taken first steps to reverse such trends. As we applaud this beginning, we encourage the entertainment industry to do all it can to convince young people to avoid substance abuse.

Regarding efforts by our government to reduce the supply of drugs, particularly in the countries of Latin America, we will work with the Church in those countries in assessing U.S. policy there, in formulating appropriate criteria for judging U.S. programs there, and in advocating common directions for the future. We share the deep concern of the Church in the region over the increasing militarization of the U.S. drug program. Such programs may prove not only ineffective but counterproductive, potentially involving increasing U.S. military commitment within these countries. Rather than short-term, often futile, programs of crop eradication, which may do more harm to the peasant farmer and to a fragile environment than to the drug criminals, we favor effective programs of international cooperation for genuine economic development and other strategies to overcome the impact of drugs within both societies.

Conclusion



As a believing community, we try to confront chemical dependency with both the honesty to recognize its power for human destruction and the faith that we can prevail with the grace and power of God. Christ comes into our hearts and our lives whenever any one of us takes the bold steps to see addiction for the slavery it is, to act to prevent its spread, and to reach out to those suffering from its devastating power.

To every sister or brother challenging addiction in daily recovery, we extend our prayerful admiration and concern. To every family struggling to confront and heal chemical dependency in its members, we pledge the solidarity, support, and service of this faith community. The Church is called to serve, to reach out, to help rebuild lives, and to support individuals, families, and communities in the fight against the slavery of drug and alcohol abuse. This is a noble calling worthy of our most generous and dynamic response.

We ask your prayers and personal involvement in bringing the gospel message of hope and love to the terrible challenge of chemical dependency in our nation. Let us together extend the healing hand of Christ to one another and to all those suffering from substance abuse in our midst.

In 1989 and 1990, the Committees on International Policy, chaired by Archbishop Roger Mahony, and on Domestic Social Policy, chaired by Bishop James Malone, conducted joint meetings at which they received testimony concerning the problem of substance abuse and its impact on the Catholic community and wider society. Following this consultative process, the Committees drafted the statement *New Slavery, New Freedom: A Pastoral Message on Substance Abuse*, which was then presented to the USCC Administrative Board at its September 1990 meeting. This present document was approved by the full body of bishops at their November 1990 meeting and is authorized for publication by the undersigned.

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NCCB/USCC

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