



That They Might Have Life



A PASTORAL LETTER FROM
MOST REVEREND SAMUEL J. AQUILA, S.T.L.



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Introduction

Sisters and Brothers in Christ,

With each passing day, we are confronted with the challenges of the broad acceptance of recreational marijuana both politically and culturally in Colorado and beyond. I write to you out of pastoral concern for the salvation of souls, and I am convinced of the need to address the impact marijuana use is having on individuals, families, and society in general.

In 2012, Colorado voted to legalize recreational marijuana, and in 2014, it became the first state to permit its sale. As more states follow (as of this writing, recreational and medical marijuana are legal in 23 and 38 states respectively),¹ there is a need to speak about the devastating effects of drugs such as methamphetamine, fentanyl, opioids, and others that we have witnessed.

During the campaigns that advocated for the legalization of marijuana and other drugs, many pro-legalization arguments were made, and visions of the future were cast which downplayed any potential negative effects of the legislation. In Colorado, we are now a decade into this experiment. As more studies come out and more deaths from fentanyl pile up, we now have an overwhelming amount of data that reinforces what we have known to be true all along: the legalization of marijuana and cultural acceptance of drug use have been disastrous to our society.

¹ Sourasis Bose, "U.S. states where recreational marijuana is legal," *Reuters*, June 1, 2023, <https://www.reuters.com/world/us/us-states-where-recreational-marijuana-is-legal-2023-05-31/>; National Conference of State Legislatures, "State Medical Cannabis Laws," June 22, 2023, <https://www.ncsl.org/health/state-medical-cannabis-laws>.



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Recently, I was in Spain and was praying in a church. A homeless man came into the church and approached me, begging for money. He needed the money not for food, water, or shelter, but for drugs. He went to great lengths to express his desperation and showed me the damage the needles had done to his arm. My heart broke for this man who was not only severely addicted to drugs but was suffering with mental illness.

Unfortunately, addiction, mental illness, and homelessness are commonly experienced together. We cannot pretend that the legalization and growing cultural acceptance of drugs do not have disproportionate effects on the most vulnerable in our society. Not only that, but it is an assault on human dignity, taking advantage of the vulnerable for the sake of financial profit.

In writing this letter, I want to help Catholics intelligently dialogue with the 70% of Americans who currently believe marijuana should be legal.² These reflections are drawn from the natural law, which is founded on reason, but also feature distinctively Christian arguments. Indeed, there is no tension between reason and faith; rather, as I hope this letter will make apparent, they complement each other well.

I hope this Pastoral Letter becomes among the first of many future resources made available to help fill the void that exists in the Catholic space on this burgeoning and critical issue. What is said here about marijuana can also be applied to other recreational drugs like psychedelic mushrooms (recently legalized in Colorado), fentanyl, and other substances.

2 "Illegal Drugs," *Gallup*, October 19, 2022, <https://news.gallup.com/poll/1657/illegal-drugs.aspx>.







How Do We Judge Drugs?

Recreational drugs may be viewed as good by some because they give pleasure or mask pain, and yet we should ask whether this is the proper standard by which to judge the goodness of drugs. It should be noted that, throughout my letter, unless a specific type of drug is noted, “drugs” will refer to any kind of psychoactive substance that is recreationally used to artificially cause significant changes in consciousness. What criteria should we use to determine if drugs are a genuine good or merely an apparent good?

We can only judge whether an action is good or bad for a thing when we understand its purpose and how it pursues that purpose. For example, when we comprehend that a car is made for transportation and that it moves by converting heat energy from burning gasoline into mechanical energy, then we can rightly judge that putting water in the tank is not good for the car. Likewise, we need to know man’s purpose and nature to assess drug use.





Made for Love

Humanity was created to know and love God.³ We were made to be in relationship with our Creator, and He designed us for that purpose. God gave each of us an intellect to know Him, a will to choose to love Him, and emotions to move us to actions that propel us toward Him and repel us from evils that draw us away from Him.⁴

Scripture sheds further light on our design by revealing the astonishing truth that “God created man in his own image.”⁵ God is a Trinity—a loving communion of Three Persons who give themselves fully to each other—and we reflect Him most fully when we make a gift of self in relationship, first with Him, and then with others.

Understanding that we are persons created for loving communion, we can judge that drugs are only an apparent good. They are bad for us since they hinder our ability to know and to love. As will be explained in greater depth in Section II, drugs diminish our self-possession by harming the very faculties that make us human: drugs inhibit our use of reason, weaken our will’s orientation toward the good, and train our emotions to expect quick relief from artificial pleasure. These effects severely limit our ability to freely give ourselves to another—whether it be temporarily, as in

³ Catholic Church, *Catechism of the Catholic Church* (Vatican City: Libreria Editrice Vaticana, 1997), no. 1.

⁴ Cf. *Ibid.*, no. 356, 1705, 1711, 1763.

⁵ Genesis 1:27. Unless otherwise noted, all Scripture passages are from the New Revised Standard Version, Catholic Edition.

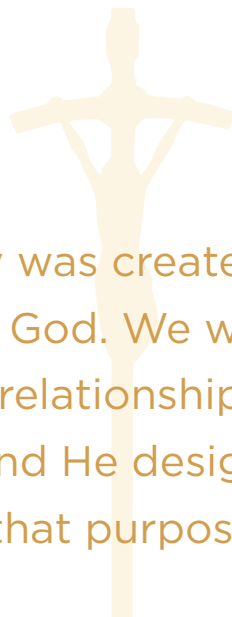


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the case of occasional drug use, or regularly, as in the case of drug addiction. We say “no” to drugs so that we may fully say “yes” to our vocation to love.

It must be noted that there are many legitimate uses of therapeutic drugs. Shown in Section V (Frequently Asked Questions), medicines that assist in restoring the body to health are a genuine good that help us fulfill our purpose. Also treated in this section is the distinction between recreational drugs and alcohol, which are fundamentally different.



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The Abundant Life

For Christians, our vocation to love is lived with and through the Person of Jesus, who said, “I came that they may have life, and have it abundantly.”⁶ This abundant life, which the Church Fathers identified as eternal life,⁷ is not simply a promise fulfilled in the next world; it is a reality we can begin to experience in this one. While drugs offer fleeting pleasure, Jesus wants to give us a fullness of love, joy, and peace⁸ that remains constant in the face of life’s peaks and valleys. Rather than reaching for chemicals when we are feeling weary and burdened, Jesus invites us to turn to him, who promises rest⁹ and abundance.

With a foundational understanding of humanity and what Christ offers us, we can fully assess drugs in theory in Section II (Drugs in Principle). We will then show in Section III (Drugs in Practice) that, as expected based on the principles in Section II, drugs are harmful in practice, causing a wide range of negative effects. Section IV (The Christian Response) will address what Christians can do to respond to the ills of drug use enumerated throughout this Pastoral Letter. Lastly, Section V (Frequently Asked Questions) will answer a series of questions that are relevant, but not central, to the topic of drug use.

⁶ John 10:10.

⁷ Cf. St. Augustine, *Commentary on John, Tractate 45*; St. John Chrysostom, *Homilies on the Gospel of John*; St. Gregory the Great, *Homilies on the Gospel of John*.

⁸ Cf. Galatians 5:22.

⁹ Cf. Matthew 11:28.







Man cannot live
without love.

POPE ST. JOHN PAUL II

Drugs in Principle

The Inestimable Value of Human Life

Love is so essential to the human condition that Pope St. John Paul II asserted, “Man cannot live without love. He remains a being that is incomprehensible for himself, his life is senseless, if love is not revealed to him, if he does not encounter love, if he does not experience it and make it his own, if he does not participate intimately in it.”¹⁰ We were made in love and for love by the God who *is* love.¹¹ And we can be confident in God’s love because “He gave his only Son, that whoever believes in him should not perish but have eternal life.”¹²

¹⁰ Pope St. John Paul II, Encyclical, *Redemptor Hominis* (Vatican City: Libreria Editrice Vaticana, 1979), no. 10.

¹¹ Cf. 1 John 4:16.

¹² John 3:16.



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Human dignity is elevated even higher in this invitation to eternal union with God. “Man is called to a fullness of life which far exceeds the dimensions of his earthly existence, because it consists in sharing the very life of God,” wrote Pope St. John Paul II. “The loftiness of this supernatural vocation reveals the greatness and the inestimable value of human life.”¹³ This leads to the first foundational reason that drugs are immoral:

Since the human person is of ***such eternal value***,
it is wrong to use any substance that is harmful to
human life.

St. Thomas Aquinas’s classic definition of love as willing the good of the other¹⁴ also applies to self-love. Since drugs are harmful to both the mind and the body (as will be demonstrated in Section III), using them is an unloving and, therefore, immoral action. The *Catechism* stresses this reality: “The *use of drugs* inflicts very grave damage on human health and life. Their use, except on strictly therapeutic grounds, is a grave offense. Clandestine production of and trafficking in drugs are scandalous practices. They constitute direct cooperation in evil, since they encourage people to practices gravely contrary to the moral law.”¹⁵ This truth is borne out in the lives of the 18.4 million Americans who are trapped in drug

¹³ Pope St. John Paul II, Encyclical, *Evangelium Vitae* (Vatican City: Libreria Editrice Vaticana, 1995), no. 2.

¹⁴ St. Thomas Aquinas, *Summa Theologiae II-II*, q. 23, a. 1.

¹⁵ Cf. *Catechism*, no. 2291, emphasis in the original.



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addiction (6.6% of the population age 12 and older).¹⁶ Pope Francis was right to call drugs “a new form of slavery.”¹⁷

The *Catechism* insightfully situates this paragraph about drugs under the fifth commandment, “You shall not kill.”¹⁸ There has been widespread desensitization to drugs because of their prevalence in daily life and their glamorization in media, but by addressing drug use in the context of this commandment, we are reminded that drugs are dangerous enough to kill. Certainly, no first-time drug user believes he is starting down a path that will end in his own death,¹⁹ but this was the tragic result for the 106,699 Americans who died from drug overdoses in 2021.²⁰

16 Substance Abuse and Mental Health Services Administration, “Behavioral Health Barometer: Colorado,” volume 6, 2020, p. 30, https://www.samhsa.gov/data/sites/default/files/reports/rpt32822/Colorado-BH-Barometer_Volume6.pdf.

17 Elise Harris, “Drugs a ‘new form of slavery’, Pope Francis says,” November 25, 2016, <https://www.catholicnewsagency.com/news/34982/drugs-a-new-form-of-slavery-pope-francis-says>.

18 Exodus 20:13.

19 We will use both types of pronouns in referring to the human person since male and female are the two ways of being human.

20 Centers for Disease Control and Prevention, “Drug Overdose Deaths,” <https://www.cdc.gov/drugoverdose/deaths/index.html>





What about “Soft” Drugs?

Drug advocates draw a distinction between “hard” and “soft” drugs, arguing that the latter are permissible because the risks of bodily harm are minimal. First, this categorization is subjective since at the pharmacological level such a distinction does not exist.²¹ Second, any drug use is implicitly encouraged when we minimize the dangers of some drug use because it teaches the culture to view drugs as an answer to its problems. Pope St. John Paul II noted, “This distinction [between soft and hard drugs] disregards and downplays the risks inherent in taking any toxic product, especially behavioral dependency, which is based on the psychic structures themselves, the blurring of conscience and the loss of one’s will and freedom, whatever the drug.”²² While a “soft” drug like marijuana might not cause physical dependency, it can cause psychological dependency. We have witnessed this phenomenon in Colorado with marijuana use disorder affecting 1.6% of the population²³ in the early 2000s but

21 Cf. Pontifical Council for the Family, *Liberalizzazione della droga?* (Vatican City: Libreria Editrice Vaticana, 1997), no. 5, http://www.laityfamilylife.va/content/dam/laityfamilylife/Magistero/Famiglia/032_Liberalizzazione_della_droga_1997.pdf; Gateway Foundation, “The Differences Between Hard and Soft Drugs,” <https://www.gatewayfoundation.org/addiction-blog/hard-vs-soft-drugs/>.

22 Pope St. John Paul II, Speech, “Address to a Colloquium on Chemical Dependency,” October 11, 1997, https://www.vatican.va/content/john-paul-ii/en/speeches/1997/october/documents/hf_jp-ii_spe_19971011_salute.html.

23 The population was measured as Colorado residents twelve years and older. Cf. “Behavioral Health Barometer: Colorado,” p. 20, https://www.samhsa.gov/data/sites/default/files/reports/rpt32822/Colorado-BH-Barometer_Volume6.pdf.



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jumping to 3.3% as of 2019²⁴—more than doubling in a span of less than twenty years. The legalization of recreational marijuana and its promotion as harmless surely downplayed the risks for those who later became psychologically dependent.

Additional psychic effects highlighted by the pope attack key aspects of our personhood: conscience, will, and freedom. This leads us to the second foundational reason not to use drugs:

Anything that diminishes man’s use of reason and will assails his dignity as a human person and is therefore harmful.

Drug use “seriously reduces the freedom of a person, sometimes to the extent of canceling it completely.”²⁵ It diminishes man’s ability to make free choices because it impedes the intellect and dulls judgment, while simultaneously weakening the will and sapping moral energy.²⁶ Pope St. John Paul II went so far as to say that taking drugs “is always illicit, because it involves an unjustified and irrational renunciation of thinking, willing and acting as free persons.... We cannot speak of the ‘freedom to take drugs’ or ‘the right to drugs,’ for the human being has no right to harm him/herself, nor the right to abdicate one’s personal dignity, which comes from God!”²⁷ He

24 “Behavioral Health Barometer: Colorado,” p. 19, Centers for Disease Control and Prevention, “Drug Overdose Deaths,” <https://www.cdc.gov/drugoverdose/deaths/index.html>

25 Pontifical Council for Health Pastoral Care, *Church: Drugs and Drug Addiction* (Vatican City: Libreria Editrice Vaticana, 2002), no. 5, p. 8.

26 *Ibid.*, no. 220, p. 81.

27 *Ibid.*, no. 43, pp. 20-21.



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additionally stressed that drugs frustrate a person’s capacity for communion and self-gift, which is her very reason for being.²⁸

The truth is that even “soft” drugs assault the human person by negatively affecting him on physical, intellectual, psychological, social, and moral levels.²⁹ For instance, marijuana causes deficits in the brain’s executive functioning, temporarily impairing coordination, concentration, working memory, and inhibition.³⁰ For those who might be tempted to sacrifice some of their dignity for the pleasure drugs bring, we are reminded of the paraphrase³¹ of Pope Benedict XVI’s words: “The world offers you comfort. But you were not made for comfort. You were made for greatness.”

28 *Church: Drugs and Drug Addiction*, no. 43, pp. 20–21.

29 Cf. *Ibid.*, no. 57, p. 27.

30 Rebecca D. Crean et al, “An evidence based review of acute and long-term effects of cannabis use on executive cognitive functions,” *Journal of Addiction Medicine*, March, 2011, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3037578/>; Stephanie Bucklin, “Marijuana Use May Impair Your Coordination,” *Live Science*, November 18, 2016, <https://www.livescience.com/56932-marijuana-use-impairs-motor-skills-coordination.html>.

31 Mark Giszczak, “Were You Made for Greatness or for God?” February 17, 2004, <https://catholicbiblestudent.com/2014/02/greatness-god.html>.





Christians and Drug Use

This call to greatness makes drug use unsuitable for Christians, who are called to reflect Christ to the world. We should live differently because Jesus has changed us!

As Pope Benedict XVI wrote, “Being Christian is not the result of an ethical choice or a lofty idea, but the encounter with an event, a person, which gives life a new horizon and a decisive direction.”³² Such a life-changing encounter with Jesus inspires us to turn to Him first in everything and reevaluate our lives in light of the Gospel. As our conversion deepens, we more fully embrace Christ’s invitation to leave behind unhealthy attachments and coping mechanisms, like drugs, and become “perfect, as [our] heavenly Father is perfect.”³³ This radical call to virtue is demanding, but love and joy propel us to work tirelessly with Jesus to remove from our hearts everything that is not of Him so that we might be filled with “every spiritual blessing.”³⁴

Part of this virtuous life is honoring God with our bodies. St. Paul’s words are challenging: “Do you not know that your body is a temple of the Holy Spirit within you, which you have from God? You are not your own; you were bought with a price. So, glorify God in your body.”³⁵ Surely drugs, which impair the faculties that make us

32 Pope Benedict XVI, Encyclical, *Deus Caritas Est* (Vatican City: Libreria Editrice Vaticana, 2005), no. 1.

33 Matthew 5:48.

34 Ephesians 1:3.

35 1 Corinthians 6:19–20.



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like God, do not glorify Him. St. Paul also reminds us, “For freedom Christ has set us free; stand fast therefore, and do not submit again to a yoke of slavery.”³⁶ Having been freed from the slavery of sin, all Christians should forgo drugs, through which a portion of all users end up enslaved in addiction, and “lead a life worthy of the calling to which you have been called.”³⁷

As then-Cardinal Joseph Ratzinger noted thirty years ago, “Drugs are an attempt to fill ... the thirst of the soul.”³⁸ If we are Christians who use drugs, we must ask ourselves hard questions about what emptiness in our souls we are trying to fill or what pain in our lives we are seeking to numb. Yet this examen must take place within the mercy of Jesus who said, “Neither do I condemn you; go, and do not sin again.”³⁹ No matter what we have done, His merciful love invites us out of sin and into abundant life. When we seek forgiveness through the Sacrament of Reconciliation, we are spiritually strengthened,⁴⁰ receiving graces that help us address the causes of our sin and root them out.

36 Galatians 5:1.

37 Ephesians 4:1.

38 Joseph Cardinal Ratzinger, *Turning Point for Europe?* (San Francisco: Ignatius Press, 1991), p. 19.

39 John 8:11.

40 Cf. *Catechism*, no. 1496.

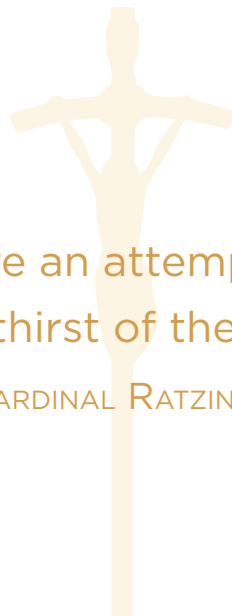


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Whatever our current relationship to drugs, we are each invited to a life set on fire with the love of God in which we joyfully live out the command to “love God with all your heart, and with all your soul, and with all your strength, and with all your mind.”⁴¹ This is within every person’s reach through the grace of God, with whom all things are possible.⁴²



Drugs are an attempt to fill ...
the thirst of the soul.

CARDINAL RATZINGER

⁴¹ Luke 10:27.

⁴² Cf. Matthew 19:26.





Drugs in Practice

The Typical Path to Drugs

Generally, drugs “do not enter into a person’s life like a bolt of lightning out of the blue, but like a seedling that takes root in a well-prepared soil.”⁴³ Though each person is unique and has her own story, at the heart of drug use we tend to find two core themes: a crisis of values and a privation of relational connection that make the person open or susceptible to drug use. Certainly, there are many factors that contribute to drug use: the breakdown of the family, elevated levels of unemployment, social injustices, and the spread of moral relativism, to name only a few.⁴⁴ The human person is at the center of the problem.⁴⁵

43 Pontifical Council for the Family, *From Despair to Hope: Family and Drug Addiction* (Vatican City: Libreria Editrice Vaticana, 1992), p. 7.

44 Pope St. John Paul II, Speech, *Address to the International Conference on Drug Abuse and Illicit Trafficking*, June 4, 1987, www.vatican.va/content/john-paul-ii/en/speeches/1987/june/documents/hf_jp-ii_spe_19870604_conference-drugabuse.html.

45 *From Despair to Hope*, p. 6.



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Drug use is much more likely when a person lives without purpose and does not believe life has meaning. As Pope St. John Paul II noted, “the vacuum of values, the conviction that nothing has sense and that, therefore, life is not worth living, the tragic and desolate feeling of being unknown wayfarers in an absurd universe, can lead some to search for exasperated and desperate escapes.”⁴⁶ Some seasons are incredibly painful and if life and its inevitable suffering appear to lack significance, it creates fertile ground for drug use to take root.⁴⁷

Such individual situations are exacerbated in a society that also lacks core values. The senselessness of life appears validated in any culture where violence, injustice, oppression, and corruption seem commonplace.⁴⁸ In the face of such a harsh world, drug use “is a protest against a reality perceived as a prison,” wrote then-Cardinal Ratzinger. “Drugs are the pseudo-mysticism of a world that does not believe yet cannot get rid of the soul’s yearning for paradise.”⁴⁹

46 Pope St. John Paul II, Homily, August 9, 1980, https://www.vatican.va/content/john-paul-ii/es/homilies/1980/documents/hf_jp-ii_hom_19800809_comitato-solidarieta.html, author’s translation.

47 *Church: Drugs and Drug Addiction* on page 7 (no. 3) reinforces this idea: “In effect, drugs testify to a kind of contempt for life and represent a personal attempt, which is certainly imaginary, of extricating oneself from reality and from the circumstances of human life.”

48 Cf. Pope St. John Paul II, Homily, August 9, 1980.

49 Joseph Cardinal Ratzinger, *Turning Point for Europe?* (San Francisco: Ignatius Press, 1991), p. 20.



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Such an escape into an “artificial paradise”⁵⁰ is even more alluring in the face of loneliness. Since we image the God who is One and Triune, we too are individual persons, made to be part of a community. The lack of intimacy with God coupled with the deprivation of authentic love from others sends people into either a despairing isolation or a cheap imitation of community that is as harmful as it is helpful. In the face of such relational pain, “drugs are an easy and immediate, but deceptive, answer to the human need for satisfaction and true love.”⁵¹

Drugs are a dangerous response to a lack of purpose and love because they provide instant gratification without addressing the root issues. They create a kind of emotional intoxication that briefly makes life feel more palatable, but it is a mere simulation of pleasure with no basis in the real world. When the effects wear off, the realities that drove users to drugs remain unchanged. This is why drugs like marijuana can be psychologically addictive: users can become dependent on artificial bursts of pleasure as a quick panacea. It is much easier to manufacture pleasure by manipulating the brain with chemicals than to build a life full of goods that cause genuine happiness.

50 Pope St. John Paul II, Homily, August 9, 1980.

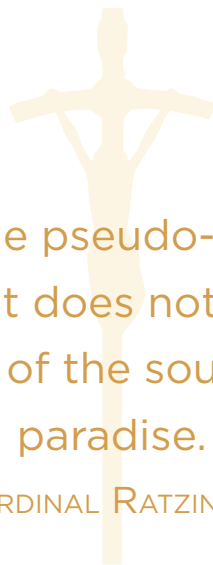
51 *From Despair to Hope*, p. 12.



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This is also part of the danger of using drugs recreationally to ease the effects of mental health issues. The National Institute on Drug Abuse warns, “Many individuals who develop substance use disorders (SUD) are also diagnosed with mental disorders, and vice versa.”⁵² With this in mind, we can compassionately understand, without condoning, the typical flight toward drugs and why they constitute such a massive industry.



Drugs are the pseudo-mysticism of
a world that does not believe yet
cannot get rid of the soul’s yearning for
paradise.

CARDINAL RATZINGER

⁵² National Institute on Drug Abuse, “Part 1: The Connection Between Substance Use Disorders and Mental Illness,” April 2020, <https://nida.nih.gov/publications/research-reports/common-comorbidities-substance-use-disorders/part-1-connection-between-substance-use-disorders-mental-illness>.





Big Money

Americans spent an estimated \$150 billion on illegal drugs in 2016, making the United States the largest market in the world.⁵³ The purchase and use of illicit drugs is harmful because it undermines the law, which ensures order in society and promotes the common good.⁵⁴ It also typically supports cartels, which resort to reprehensible means to maintain and increase their market share. These “merchants of death,”⁵⁵ as Pope St. John Paul II referred to them, traffic in the “freedom of their brothers”⁵⁶ by benefitting from, creating, and promoting addiction for the sake of profit.⁵⁷

In states where marijuana is legal, it has become big business. Medicinal and recreational sales in the United States are expected to reach \$33 billion in 2022 alone.⁵⁸ These sales are only expected to grow, which is especially alarming since most marijuana products are now “high potency” and more frequently result in cannabis addiction.⁵⁹ From the 1960s to the 1980s, the majority of marijuana

53 Gregory Midgette et al., “What America’s Users Spend on Illegal Drugs, 2006–2016,” 2019, https://www.rand.org/pubs/research_reports/RR3140.html, p. xi.

54 Cf. *Catechism*, nos. 1897–1899.

55 *Church: Drugs and Drug Addiction*, no. 42, p. 20.

56 *Ibid.*, no. 35, p. 17.

57 *Church: Drugs and Drug Addiction* on page 69 (no. 189) is equally emphatic: “Every action that favors the diffusion or consumption of drugs morally represents a serious complicity with the cartels, which draw exorbitant financial and economic advantages from the trade.”

58 Chris Morris, “Legal marijuana sales in the U.S. expected to hit \$33 billion this year,” *Fortune*, April 11, 2022, <https://fortune.com/2022/04/11/legal-marijuana-sales-33-billion-2022/>.

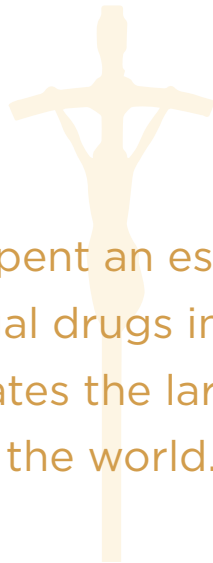
59 Sandee LaMotte, “Highly potent weed creating marijuana addicts worldwide, study says,” *CNN*, July 25, 2022, <https://www.cnn.com/2022/07/25/health/marijuana-potency-addiction-study-wellness/index.html>.



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contained 2% THC, the psychoactive component of cannabis that causes the high. In the 1990s, it grew to 4%, but since 2015, most marijuana has at least 15% THC content.⁶⁰ Highly concentrated THC oils, popular among teens⁶¹ and consumed by vaping, are often 80-95% THC!⁶²



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60 Dr. Elizabeth Stuyt, “The Problem with the Current High Potency THC Marijuana from the Perspective of an Addiction Psychiatrist,” *Missouri Medicine*, November/December 2018, https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6312155/pdf/ms115_p0482.pdf; Mary Catherine Cash et al., “Mapping cannabis potency in medical and recreational programs in the United States,” *PLOS ONE*, March 26, 2020, <https://journals.plos.org/plosone/article/file?id=10.1371/journal.pone.0230167&type=printable>.

61 Vanessa Romo, “Marijuana vaping among teens has more than doubled since 2013,” *NPR*, October 25, 2021, <https://www.npr.org/2021/10/25/1049127183/marijuana-vaping-cannabis-teens-growth-risks>.

62 Leighton Woodhouse, “How Weed Became the New OxyContin,” *Tablet*, August 30, 2022, <https://www.tabletmag.com/sections/news/articles/how-weed-became-new-oxycontin-marijuana-psychosis-addiction>.





The Truth about Marijuana

Despite being marketed as harmless, the hard data about marijuana paint a different picture. For instance, a global survey found that only 64% of 50,000 cannabis users believed the drug could cause dependence,⁶³ meaning that 36% of active users did not know they had a 10% chance of becoming addicted.⁶⁴ And that's the conservative estimate—another study found that approximately 3 in 10 people using cannabis products met the criteria for marijuana use disorder.⁶⁵

The CDC warns that “people who use marijuana are more likely to develop temporary psychosis (not knowing what is real, hallucinations, and paranoia) and long-lasting mental disorders, including schizophrenia (a type of mental illness where people might see or hear things that are not really there).”⁶⁶ This alarming connection has been confirmed by a host of studies and health agencies. The National Institute on Drug Abuse warns, “Recent research suggests that smoking high-potency marijuana every day could increase the chances of developing psychosis by nearly five times compared to people who have never used

63 Adam Winstock, “Global Drug Survey,” May 16, 2019, <https://www.globaldrugsurvey.com/wp-content/themes/globaldrugsurvey/results/GDS2019-Exec-Summary.pdf>.

64 Centers for Disease Control, “Addiction (Marijuana or Cannabis Use Disorder),” October 19, 2020, <https://www.cdc.gov/marijuana/health-effects/addiction.html>.

65 Ibid.

66 Centers for Disease Control, “Mental Health,” October 19, 2020, <https://www.cdc.gov/marijuana/health-effects/mental-health.html>.



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marijuana.”⁶⁷ The connection between psychosis and heavy marijuana use is especially frightening when we consider that about 20% of cannabis users consume it almost daily.⁶⁸ As Dr. Tyler J. VanderWeele of Harvard University summarized, “Cannabis use disorder is not responsible for most schizophrenia cases, but it is responsible for a nonnegligible and increasing proportion.”⁶⁹

Even irregular use of marijuana leads to negative effects. One study found that adolescents who occasionally used marijuana were at greater risk of using illegal drugs and developing alcohol and tobacco dependence.⁷⁰ Another study found that those who started using marijuana in their teens experienced a drop in IQ, even if usage was not regular, while nonusers saw a small rise in IQ. These researchers also found that the greater the cannabis use, the greater the decline, with losses of up to eight IQ points.⁷¹

67 National Institute on Drug Abuse, “Is there a link between marijuana use and psychiatric disorders?” July 2020, <https://nida.nih.gov/publications/research-reports/marijuana/there-link-between-marijuana-use-psychiatric-disorders>.

68 Alex Berenson, *Tell Your Children: The Truth About Marijuana, Mental Illness, and Violence* (New York: Free Press, 2019), p. xix.

69 Katie Hunt, “Schizophrenia linked to marijuana use disorder is on the rise, study finds,” *CNN*, July 26, 2021, <https://www.cnn.com/2021/07/22/health/marijuana-schizophrenia-study-wellness/index.html>; Hjorthøj C, Posselt CM, Nordentoft M, “Development Over Time of the Population-Attributable Risk Fraction for Cannabis Use Disorder in Schizophrenia in Denmark,” *JAMA Psychiatry*, 2021; 78(9):1013-1019, <https://jamanetwork.com/journals/jamapsychiatry/fullarticle/2782160?guestAccessKey=13668b0c-b3e4-45c9-a35c-e4c44d500ea9>.

70 Louisa Degenhardt et al., “Outcomes of occasional cannabis use in adolescence: 10-year follow-up study in Victoria, Australia,” *British Journal of Psychiatry*, April 2010, <https://pubmed.ncbi.nlm.nih.gov/20357305/>.

71 Madeline H. Meier et al., “Persistent cannabis users show neuropsychological decline from childhood to midlife,” *PNAS*, August 27, 2012, <https://www.pnas.org/doi/10.1073/pnas.1206820109>.



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To make matters worse, the IQ decline for those who began consuming marijuana as teens persisted even after drug use stopped.⁷² Likewise, one study that tracked college students found that those who used marijuana just twice a month were 11% more likely to be “discontinuously enrolled”—to permanently drop out or to leave college for multiple semesters but eventually return—than students who were basically nonusers.⁷³ Additionally, the National Academies of Sciences, Engineering, and Medicine found an association “between cannabis use and increased incidence of suicidal ideation and suicide attempts, with a higher incidence among heavier users.”⁷⁴

Not long after the recreational sale of marijuana began in Colorado, Pope Francis prophetically said, “Attempts, however limited, to legalize so-called ‘recreational drugs,’ are not only highly questionable from a legislative standpoint, but they fail to produce desired effects.”⁷⁵ As the pope predicted, legalization has produced unintended, harmful effects. One study that tracked UHealth University of Colorado Hospital found marijuana-related emergency room visits tripled after the sale of recreational marijuana began in

72 Cf. “Persistent cannabis users show neuropsychological decline from childhood to midlife.”

73 Arria AM et al., “Drug use patterns and continuous enrollment in college: results from a longitudinal study,” *Journal of Studies on Alcohol and Drugs*, January 2013, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3517265/>.

74 National Academies of Sciences, Engineering, and Medicine, *The Health Effects of Cannabis and Cannabinoids: The Current State of Evidence and Recommendations for Research* (Washington, DC: The National Academies Press, 2017), p. 314.

75 Kira Bindrim, “Pope Francis Speaks Out Against Legalization of Marijuana and Other Drugs,” *Newsweek*, June 20, 2014, <https://www.newsweek.com/pope-francis-says-he-opposes-marijuana-legalization-255708>.





January 2014.⁷⁶ Issues ranged from cannabis hyperemesis syndrome (uncontrolled bouts of vomiting) to acute psychiatric symptoms to cardiovascular problems.⁷⁷ As previously mentioned, marijuana use disorder now enslaves 3.3% of the state’s population, as compared to 1.6% in the early 2000s.⁷⁸ This is not surprising since Coloradans’ cannabis use has increased dramatically since legalization: the latest data show a 26% increase since 2013.⁷⁹ In practice, more people using marijuana inevitably means more addiction.

Increasing cannabis use has also ballooned other problems. Marijuana-related DUIs in the state numbered 676 in 2014 but spiked to 1,513 in 2020.⁸⁰ This is consistent with the finding of the National Academies of Sciences, Engineering, and Medicine that “there is substantial evidence of a statistical association between cannabis use and increased risk of motor vehicle crashes.”⁸¹ Tragically, traffic deaths involving drivers who tested positive for marijuana more than doubled from 55 in 2013 to 131 people killed in 2020. Whereas before legalization cannabis-related traffic fatalities

76 Andrew A. Monte et al., “Acute Illness Associated With Cannabis Use, by Route of Exposure,” *Annals of Internal Medicine*, April 16, 2019, <https://www.acpjournals.org/doi/pdf/10.7326/M18-2809>

77 Ibid.; “Marijuana-related ER visits climb at Colorado hospital,” *CBS News*, March 26, 2019, <https://www.cbsnews.com/news/after-legalization-marijuana-related-er-visits-climb-at-colorado-hospital/>.

78 “Behavioral Health Barometer: Colorado,” p. 19.

79 Rocky Mountain High Intensity Drug Trafficking Area, “The Legalization of Marijuana in Colorado: The Impact,” Volume 8, September 2021, p. 17, https://www.rmhidta.org/_files/ugd/4a67c3_b391ac360f974a8bbf868d2e3e25df3d.pdf.

80 Ibid., p. 13. It is unclear why the report does not include numbers from 2013 in this section.

81 *The Health Effects of Cannabis and Cannabinoids: The Current State of Evidence and Recommendations for Research*, p. 230.



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made up 11% of all traffic deaths, now they represent 21%.⁸² In a similarly heartrending vein, statistics show 105 Coloradans with marijuana in their systems committed suicide in 2013, whereas in 2019 that number more than doubled to 236 (representing 29% of all suicides, up from 14% in 2013).⁸³ “An analysis of survey data from more than 280,000 young adults ages 18–35 showed that cannabis use was associated with increased risks of thoughts of suicide (suicidal ideation), suicide plan, and suicide attempt.”⁸⁴ It is our hope that the abundance of harmful effects will give even the most ardent defenders of legalization pause.

82 *The Health Effects of Cannabis and Cannabinoids: The Current State of Evidence and Recommendations for Research*, p. 8.

83 *Ibid.*, p. 30.

84 National Institutes of Health, “Cannabis use may be associated with suicidality in young adults,” June 22, 2021, <https://www.nih.gov/news-events/news-releases/cannabis-use-may-be-associated-suicidality-young-adults>.





Other Pro-Legalization Arguments

When the legalization of marijuana is addressed, it is often examined from a purely economic perspective. While this is an insufficient lens—the common good is determined by more than economics—we should be ready to respond to the revenue generation argument. Since the sale of marijuana began in Colorado in January 2014, almost \$13.5 billion worth of cannabis products have been purchased.⁸⁵ However, society spends much more than government collects in taxes once all the related costs are calculated. In Colorado, one study found that “for every dollar gained in tax revenue, Coloradans spent approximately \$4.50 to mitigate the effects of legalization,”⁸⁶ after accounting for additional costs in healthcare, crime, traffic accidents and fatalities, environmental impacts, and more.⁸⁷ That astonishing ratio factored in cost savings from the sharp decrease in marijuana-related arrests and court cases after decriminalization.⁸⁸ Sadly, it seems that states are unmoved by these numbers, seemingly because they get all the tax revenue while many of the monetary burdens are spread across

85 Colorado Department of Revenue, “Marijuana Sales Reports,” accessed October 20, 2022, <https://cdor.colorado.gov/data-and-reports/marijuana-data/marijuana-sales-reports>.

86 Centennial Institute, “Economic and Social Costs of Legalized Marijuana,” November 18, 2018, p. 3, <http://2sai80zhft74386rl1kqxhyw-wpengine.netdna-ssl.com/wp-content/uploads/2019/03/Economic-and-Social-Costs-of-Legalized-Marijuana-v1.3.pdf>.

87 *Ibid.*, p. 2.

88 *Ibid.*, pp. 48–54.





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society (viz., hospitals, employers, family members, and, of course, the drug users themselves).

Another common argument is that legalization hurts the illegal market for drugs. While this seems intuitively correct, in practice it does not pan out. Both Colorado and California have seen massive growth in the marijuana underground market since legalization.⁸⁹ Ironically, the government's efforts to enforce quality control and its collection of various taxes and fees raise the cost of legal cannabis products, thereby fueling a black market that can undercut licensed dispensaries by selling much cheaper products.⁹⁰

89 Cf. John Ferrugia, "How Colorado's marijuana legalization strengthened the drug's black market," *PBS*, July 15, 2019, <https://www.pbs.org/newshour/show/how-colorados-marijuana-legalization-strengthened-the-drugs-black-market>; Paige St. John, "The reality of legal weed in California: Huge illegal grows, violence, worker exploitation and deaths," *Los Angeles Times*, September 8, 2022, <https://www.latimes.com/california/story/2022-09-08/reality-of-legal-weed-in-california-illegal-grows-deaths>.

90 Joseph Detrano, "Cannabis Black Market Thrives Despite Legalization," <https://alcoholstudies.rutgers.edu/cannabis-black-market-thrives-despite-legalization/>; Statista, "Most expensive U.S. marijuana dispensary prices compared to street prices as of January 2016, by state," January 29, 2016, <https://www.statista.com/statistics/589821/street-and-dispensary-marijuana-price-difference-by-us-state/>.



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In California, where the problem is most acute due to abundant land and favorable weather, it is estimated that its illegal dispensaries outnumber legal sellers by almost 3-to-1.⁹¹ In a sad and unexpected twist, the state’s legalization of marijuana has caused a dramatic increase in the number of illegal marijuana farms, with commensurate violence, worker exploitation, pollution, and death.⁹² The situation became so bad that the state legislature approved a \$100 million grant program, which some have characterized as a bailout, to help the struggling legal businesses compete with and drive out illegal market growers and sellers.⁹³ At the time of this writing, “there are no signs” that any of California’s efforts and reforms have “slowed down the black market.”⁹⁴

91 Dennis Romero, “California’s cannabis black market has eclipsed its legal one,” *NBC News*, September 20, 2019, <https://www.nbcnews.com/news/us-news/california-s-cannabis-black-market-has-eclipsed-its-legal-one-n1053856>.

92 Cf. “The reality of legal weed in California: Huge illegal grows, violence, worker exploitation and deaths.”

93 Cf. California Department of Cannabis Control, “Department of Cannabis Control Announces \$100 Million Local Jurisdiction Assistance Grant Program,” January 2021, <https://cannabis.ca.gov/2021/10/department-of-cannabis-control-announces-100-million-local-jurisdiction-assistance-grant-program/>; Tiffany Kary, “Lessons from California’s Pot Industry Bailout,” *Bloomberg*, June 21, 2021, <https://www.bloomberg.com/news/articles/2021-06-21/lessons-from-california-s-pot-industry-bailout-cannabis-weekly>; Jon Miltimore, “California’s \$100 Million Marijuana Bailout Tells You All You Need to Know about Its Government,” *Fee*, June 21, 2021, <https://fee.org/articles/california-s-100-million-marijuana-bailout-tells-you-all-you-need-to-know-about-its-government/>.

94 Jorge Mercado, “Six years after legalization, cannabis black market still thriving,” *Pacific Coast Business Times*, September 15, 2022, <https://www.pacbiztimes.com/2022/09/15/six-years-after-legalization-cannabis-black-market-still-thriving/>.





Other Drugs

As more states legalize marijuana, we are seeing the inevitable push to legalize other drugs, such as psychedelic mushrooms.⁹⁵ The typical argument is that if an adult's drug use does not hurt anyone else, she should be free to do as she wishes without government interference. But as the Pontifical Council for the Family notes, "In effect, what is legal is regarded as normal, and therefore as moral. Legalizing drugs does not as such liberalize the product, it instead legitimizes the reasons that lead to its consumption."⁹⁶ When a drug is illegal, it deters a certain percentage of the population from using it, and that is a good thing; both the individual and society are shielded from the deleterious effects of that use. As evidenced by the 26% increase in Coloradans' marijuana consumption cited above, more people will use a drug when it is legal, which increases the aggregate harm to society. A "live and let live" attitude refuses to acknowledge that any drug use that hurts the individual inevitably harms society as well. The monetary harm is obvious: lower worker productivity, increased absenteeism,⁹⁷ and

95 In 2022, Colorado voters approved the decriminalization of psilocybin and certain additional plant-based psychedelic substances. A similar bill to decriminalize these substances in California has been vetoed.

96 *Church: Drugs and Drug Addiction*, no. 192, p. 70.

97 Cf. "3 Reasons Why Employers Should Be Concerned About Workforce Substance Abuse," *Hire Right*, May 17, 2022, <https://www.hireright.com/blog/background-checks/3-reasons-why-employers-should-be-concerned-about-workforce-substance-abuse>.



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the annual \$40 billion cost of rehabilitation programs,⁹⁸ to name a few of the financial burdens imposed on those not using drugs. But the qualitative harm is just as real and even more taxing: the psychological and emotional toll incurred by the drug user’s family and friends.

Perhaps nowhere are the tragic effects of drug use more evident than the opioid epidemic. This class of drugs, which includes prescription painkillers such as morphine and oxycodone as well as the illegal drug heroin, is highly addictive.⁹⁹ So many fatal and nonfatal overdoses occurred as opioids became widely prescribed that the Department of Health and Human Services declared it a public health emergency in 2017.¹⁰⁰ “According to the CDC, an estimated 110,511 people in the United States died of drug overdoses and poisonings in 2022, with almost 70 percent of those deaths involving synthetic opioids like fentanyl.”¹⁰¹

98 Recovery Centers of America, “Economic cost of substance abuse disorder in the United States, 2019,” https://recoverycentersofamerica.com/resource/economic-cost-of-substance-abuse-disorder-in-united-states-2019/#post-7347-_bookmark13.

99 Cf. “How opioid addiction occurs,” *Mayo Clinic*, April 12, 2022, <https://www.mayoclinic.org/diseases-conditions/prescription-drug-abuse/in-depth/how-opioid-addiction-occurs/art-20360372>.

100 “HHS Acting Secretary Declares Public Health Emergency to Address National Opioid Crisis,” October 26, 2017, <https://public3.pagefreezer.com/browse/HHS.gov/31-12-2020T08:51/https://www.hhs.gov/about/news/2017/10/26/hhs-acting-secretary-declares-public-health-emergency-address-national-opioid-crisis.html>.

101 United States Drug Enforcement Administration Release, August 17, 2023, <https://www.dea.gov/press-releases/2023/08/17/dea-recognizes-national-fentanyl-prevention-and-awareness-day-extended>.



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Fentanyl, which is 50 to 100 times stronger than morphine,¹⁰² is the latest heartbreaking development in the opioid crisis and is considered “the single deadliest drug threat our nation has ever encountered,” by Anne Milgram, Administrator at the DEA.¹⁰³ The numbers support such a bold statement: synthetic opioids, but primarily fentanyl, were the main cause of the six-fold increase in fatal overdoses 2015 to 2020.¹⁰⁴ Since the drug is incredibly powerful, it is extremely easy to overdose (especially for the occasional drug user whose tolerance is low) and quickly leads to addiction.

Part of what is driving the spike in deaths is the practice of traffickers to lace other drugs with fentanyl because it is cheap to produce and incredibly strong, meaning less of the drug is needed to produce the desired high. This is particularly heinous because there is no way to tell by sight, taste, or smell that the drugs have been laced, often resulting in users unknowingly consuming fentanyl.¹⁰⁵ The practice is so widespread that some states give away free fentanyl test strips so users can check their

102 United States Drug Enforcement Association, “Fentanyl,” April 2020, https://www.dea.gov/sites/default/files/2020-06/Fentanyl-2020_0.pdf.

103 United States Drug Enforcement Association, “Fentanyl Awareness,” <https://www.dea.gov/fentanylawareness>.

104 National Institute on Drug Abuse, “Overdose Death Rates,” January 20, 2022, <https://nida.nih.gov/research-topics/trends-statistics/overdose-death-rates>.

105 Centers for Disease Control and Prevention, “Fentanyl Facts,” February 23, 2022, <https://www.cdc.gov/stopoverdose/fentanyl/index.html>.





illegally purchased drugs before consumption.¹⁰⁶ Once experienced, the high of fentanyl is so powerful that it often becomes “all-consuming” and drug users then knowingly risk overdose to feel it again.¹⁰⁷

We have also witnessed the tragic results of Colorado’s decision to reclassify fentanyl possession from a felony to a misdemeanor in 2019. Although well-meaning, one study estimates that the change in classification caused at least 600 additional deaths, even when accounting for the upward trend of fentanyl use in the previous years.¹⁰⁸ The tragic story of this deadly drug reinforces Pope Francis’ words, “Drug addiction is an evil, and with evil there can be no yielding or compromise.”¹⁰⁹

106 Wisconsin Department of Health Services, “Dose of Reality: Get the Facts on Opioids,” October 16, 2022, <https://www.dhs.wisconsin.gov/opioids/facts.htm>; Minnesota Department of Health, “Fentanyl Test Strips to Prevent Drug Overdose,” November 12, 2021, <https://www.health.state.mn.us/communities/opioids/documents/ftsforph.pdf>; Prevent Overdose Rhode Island, “Fentanyl Test Strips,” accessed October 24, 2022, <https://preventoverdoseri.org/fentanyl-test-strips/>.

107 Kelly Bass et al., “‘It’s my frenemy’: A qualitative exploration of knowledge and perceptions of fentanyl use during the COVID-19 pandemic in people who use drugs at a syringe services program in Philadelphia, PA,” *Frontiers in Public Health*, July 22, 2022, <https://www.frontiersin.org/articles/10.3389/fpubh.2022.882421/full>.

108 Stephen Cranney, “Does Making Fentanyl Possession a Misdemeanor Lead to More Deaths? Using A Difference-in-Difference Approach to Measure the Effect of Colorado’s HB-19-1263 on Overdose Numbers,” *SSRN*, April 5, 2022, <https://ssrn.com/abstract=4076253>.

109 Nicole Winfield, “Just say no: Pope Francis comes out strongly against legalizing recreational drugs,” *Newsweek*, June 20, 2014; Cf. Pope St. John Paul II, Speech, “Address to the Youth of the Therapeutic Community for Drug Addicts,” May 27, 1984, https://www.vatican.va/content/john-paul-ii/it/speeches/1984/may/documents/hf_jp-ii_spe_19840527_comunita-terapeutica.html.







The Christian Response

The most important thing we can do as Christians in response to a drug culture is to proclaim the Gospel. It is through the love, mercy, meaning, and hope found in Christ that people will be deterred from drug use or inspired to break free of its influence. As Pope St. Paul VI wrote, the Church must “evangelize man’s culture and cultures..., always taking the person as one’s starting point and always coming back to the relationships of people among themselves and with God.”¹¹⁰ Since relationships are so pivotal, lay people have a unique opportunity and responsibility to evangelize and transform the temporal order.¹¹¹ The proclamation of the Gospel suffuses the Church’s three-pronged effort against drugs: prevention, suppression, and rehabilitation.¹¹²

The Pontifical Council for Health Pastoral Care notes that “The family is one of the first places for the prevention of drug use.... Developing the inner life of youth, with the help of prayer, the sacraments, and above all the celebration of the Eucharist, offers them a glimpse of the eternal and blessed life

¹¹⁰ Pope St. Paul VI, Apostolic Exhortation, *Evangelii Nuntiandi* (Vatican City: Libreria Editrice Vaticana, 1975), no. 20.

¹¹¹ Cf. Pope St. John Paul II, Post Synodal Apostolic Exhortation, *Christifideles Laici* (Vatican City: Libreria Editrice Vaticana, 1988), no. 33.

¹¹² *Church: Drugs and Drug Addiction*, no. 53, p. 25.



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of Christ, thus revealing a fuller sense of human existence.”¹¹³ All Christians—whether they are parents, relatives, or friends—can help inoculate against drug use by sharing their faith and the difference it makes day-to-day. A crucial piece often neglected is the role of redemptive suffering. Everyone can find some meaning in their pain and hardships by uniting those sufferings with Christ’s sacrifice on the Cross to rain down blessings.¹¹⁴ Doing so often changes the experience of pain, as grace transforms souls that draw so near to the Suffering Servant.

Educating those who have not experimented with drugs about their detrimental effects is another important aspect of prevention to which all can contribute. Some adults are hesitant to engage in such conversations because of their own past drug use. Far from being hypocritical, it can be a springboard to share how the potency, and therefore the danger, of drugs has increased, as well as the better alternatives found in place of drug use. Furthermore, it provides hope for the drug user in that, with the grace of God, he can break free from addiction. Education on the impact of substance abuse and addiction is critical in these times and there are abundant resources available.

The Church also invites us to participate in the suppression of drug use. This could look like voting against the legalization of drugs if it appears on the ballot or supporting efforts to reverse

¹¹³ *Church: Drugs and Drug Addiction*, no. 11, p. 9.

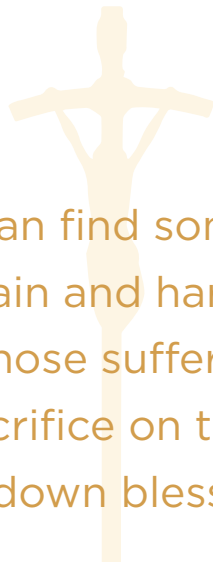
¹¹⁴ Cf. Colossians 1:24; Pope St. John Paul II, Apostolic Letter, *Salvifici Doloris* (Vatican City: Libreria Editrice Vaticana, 1984).



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prior legalization decisions. It might also include not consuming and sharing media that glorifies drug use or minimizes its dangers. Similarly, it could involve conversations with those who use drugs recreationally about their motivations for doing so and, if the relationship is sufficiently established, gently pointing them to the abundant life found in Christ.



Everyone can find some meaning
in their pain and hardships by
uniting those sufferings with
Christ's sacrifice on the Cross to
rain down blessings.



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When it comes to rehabilitation, we encounter a “contradiction of the modern world, which trivializes a phenomenon and then attempts to deal with its negative consequences.”¹¹⁵ While the Church has and will always proclaim the truth about the dangers of drugs, we gladly join in society’s efforts to aid those suffering in addiction. We follow the example of Jesus who came not to be served, but to serve,¹¹⁶ and sought out the sick.¹¹⁷ While only a fraction of Catholics will ever work in drug rehab facilities, all of us can work to end the stigma that surrounds addiction by recognizing that it is a disease, being compassionate and honest with those who use drugs, and refusing to define anyone by their drug addiction but instead by their God-given identity. Additionally, many of us will support a loved one through the excruciating trial of addiction or provide encouragement to someone taking on that role. By leaning on Christ, we can be a source of strength and hope for others as we “rejoice in hope, endure in affliction, persevere in prayer.”¹¹⁸

115 Pontifical Council for the Family, “Should ‘Soft’ Drugs Be Legalized?,” January 17, 1997, no. 16, <https://www.lenouvelesprit.com/church-documents-on-drugs/soft-drugs-legalized>.

116 Cf. Matthew 20:28.

117 Cf. Mark 2:17.

118 Romans 12:12, New American Bible translation.









Frequently Asked Questions

Why are drugs different than alcohol?

Drugs and alcohol may seem equivalent since both affect the functioning of the body, but a closer look shows stark differences.

The *Charter for Health Care Workers* sums it up nicely: “Unlike taking drugs, alcohol is not in itself illicit: ‘its moderate use as a drink is not contrary to moral law.’ Within reasonable limits, wine is a nourishment. ‘It is only the abuse that is reprehensible.’”¹¹⁹

We see this reflected in Scripture, which does not mention drugs,¹²⁰ but describes alcohol as a blessing from God:

119 The Pontifical Council for Pastoral Assistance to Health Care Workers, *Charter for Health Care Workers* (Vatican City: Libreria Editrice Vaticana, 1995), no. 97.

120 The Scriptures’ lack of endorsement or condemnation of drugs means we must use other principles found in Scripture and Tradition to determine the morality of drug use.





“You cause the grass to grow
for the cattle, and plants for people to use,
to bring forth food from the earth,
and wine to gladden the human heart,
oil to make the face shine,
and bread to strengthen the human heart.”¹²¹

Wine is grouped with bread and oil as food that is cultivated for man’s benefit and a genuine good. This may be surprising to some Christians, since we live in a culture filled with alcohol abuse, but alcohol is not meant to function primarily as a drug. Historically, it has been enjoyed not only for the taste, but also for its hydrating, nutritional, and medicinal properties.¹²² We see this idea echoed in Scripture when St. Paul tells St. Timothy, “Stop drinking only water, and use a little wine because of your stomach and your frequent illnesses.”¹²³ This is one of many places where alcohol is presented as a gift from God in Scripture.¹²⁴ Additionally, Jesus turning water into wine at the wedding in Cana¹²⁵ bolsters the case that alcohol is a good that we may moderately enjoy not just for health but also

121 Psalm 104:14-15.

122 David J. Hanson, “Historical evolution of alcohol consumption in society,” in Peter Boyle et al. (eds), *Alcohol: Science, Policy and Public Health* (Oxford: Oxford Academic, 23 May 2013), <https://doi.org/10.1093/acprof:oso/9780199655786.003.0001>.

123 1 Timothy 5:23.

124 Cf. Proverbs 3:9-10; Isaiah 25:6; Ecclesiastes 9:7; Sirach 31:27-28.

125 Cf. John 2:1-12.





for mirth. Lastly and most powerfully, that Jesus chooses to change bread and wine into His very Body, Blood, Soul, and Divinity makes clear that both substances must be good in themselves.¹²⁶

But just because alcohol is good does not mean it cannot be abused. Scripture is rife with condemnation of drunkenness.¹²⁷ St. Paul is clear: “Do not get drunk on wine, which leads to debauchery. Instead, be filled with the Spirit.”¹²⁸ Too much alcohol causes the same problems as drugs: it diminishes man’s reason, lowers his inhibitions, and inclines him toward actions he would not commit when sober. It also wreaks similar havoc upon society in terms of accidents, deaths, addiction, and economic costs.¹²⁹ Thus, the *Catechism* encourages moderation: “The virtue of temperance disposes us to avoid every kind of excess: the abuse of food, alcohol, tobacco, or medicine.”¹³⁰ Temperance, the balanced use of created goods and healthy regulation of desires,¹³¹ enables us to follow St. Paul’s dictum, “So whether you eat or drink or whatever you do, do it all for the glory of God.”¹³²

126 Cf. *Catechism*, no. 1333.

127 Cf. Proverbs 20:1, 23:29–35; Sirach 31:29–31; Luke 21:34; Romans 13:13–14; Galatians 5:19–21; 1 Corinthians 5:11; 1 Peter 4:3–4, to cite only a few.

128 Ephesians 5:18.

129 National Institute on Alcohol Abuse and Alcoholism, “Alcohol Facts and Statistics,” March 2022, <https://www.niaaa.nih.gov/publications/brochures-and-fact-sheets/alcohol-facts-and-statistics>.

130 *Catechism*, no. 2290.

131 Cf. *Ibid.*, no. 1809.

132 1 Corinthians 10:31.





Another meaningful difference is the intention. Although alcohol chemically affects the body, this alteration is not the primary reason most people drink. On the other hand, the main reason people use drugs is for their effects on the body. We know this based on consumption rates. The average American has about 3.5 drinks per week and fewer than 1 in 5 admitted to sometimes drinking “too much.”¹³³ In other words, typical consumption of alcohol is not binge drinking.¹³⁴

The limited research available on THC consumption suggests the typical marijuana user consumes 40mg of THC at a time.¹³⁵ It is estimated that 2.5–5mg of THC is the equivalent of one alcoholic drink,¹³⁶ meaning the average marijuana user is consuming the equivalent of 8–16 drinks every time he gets high. Even if we use *High Times*’ modest calculations that users “inhale about 10 to 30mg of THC every time they get high,”¹³⁷ that is still as many 6–12 drinks. Clearly Americans are using alcohol and marijuana

133 Megan Brennan, “U.S. Alcohol Consumption on Low End of Recent Readings,” *Gallup*, August 19, 2021, <https://news.gallup.com/poll/353858/alcohol-consumption-low-end-recent-readings.aspx>.

134 Binge drinking is defined as the consumption of 4–5 drinks in 2 hours. Cf. National Institute on Alcohol Abuse and Alcoholism, “Drinking Levels Defined,” <https://www.niaaa.nih.gov/alcohol-health/overview-alcohol-consumption/moderate-binge-drinking>.

135 Though some research suggests most marijuana consumed is 20 to 25% THC, we have chosen the more conservative estimate of 15%. This equates to 150mg/g of THC, and assuming about half is burned away during consumption, that leaves 75mg per gram to be consumed. A typical joint is roughly half a gram, yielding 37.5mg, which we rounded to 40mg for ease of calculation.

136 *Tell Your Children: The Truth About Marijuana, Mental Illness, and Violence*, p. 40.

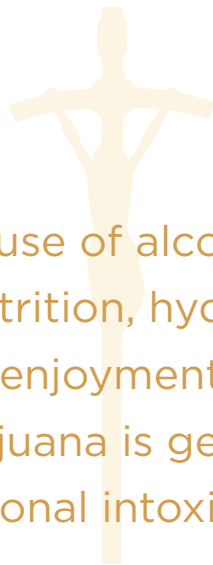
137 “How Much THC Is in a Dab, a Bowl and a Joint?” *High Times*, January 3, 2017, <https://hightimes.com/culture/how-much-thc-is-in-a-dab-a-bowl-and-a-joint/>.



That They Might Have Life



very differently, since “the normal use of alcohol is geared toward nutrition, hydration, and appreciative enjoyment. Recreational use of marijuana is geared toward emotional intoxication.”¹³⁸



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¹³⁸ John-Mark L. Miravalle, *How to Feel Good and How Not To* (Manchester, New Hampshire: Sophia Institute Press, 2020), p. 58.





Does the Church have something against pleasure?

Absolutely not! The Church recognizes pleasure as a gift from God. We can experience both bodily and spiritual pleasures, and we are free to do so temperately according to our state of life. In fact, we inherently know something is wrong if our lives become devoid of pleasure. As St. Thomas Aquinas notes, “No human being can long remain pleasureless and sad.... And the philosopher, Aristotle, accordingly says in the *Ethics* that those who cannot enjoy spiritual pleasures turn their endeavors for the most part to bodily pleasures.”¹³⁹ This is in keeping with what was noted earlier about the typical flight to drugs: when a person doesn’t experience spiritual joys (like peace, love, and communion with Christ), which are longer lasting but more difficult to obtain, he will tend toward bodily pleasures (like food, drink, and drugs), which are more accessible but short-lived. Additionally, he will be tempted to pursue bodily pleasures to excess to make up for the lack of spiritual pleasures in his life. Pursuing more important goods first helps us maintain a healthy balance where we can enjoy pleasure without being consumed by it.

Sadly, man’s history shows how easily we are consumed by pleasure when it is sought as an end. Think of the pleasure of eating food. Food is primarily meant to nourish our bodies, but it also tastes good and feels good to consume. Someone who ate solely to

139 St. Thomas Aquinas, *De Malo*, q. 11, a. 4.



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enjoy the pleasure of consumption and then promptly threw it all up to eat some more would rightly be regarded as a glutton for making the pleasure of eating an end unto itself. Pleasure is good, but only as long as it is ordered among other goods. We can appreciate the bodily pleasure that is experienced when drinking alcohol, for instance. But if that becomes the primary reason for consumption instead of an enjoyable side effect, drinking may very quickly become an addiction as pleasure becomes more important than temperance. Ironically, the thing that once gave pleasure becomes an uncontrollable source of pain and shame. This is true of all addictions, be it drugs, alcohol, masturbation, etc. As C.S. Lewis quipped, “Put first things first and we get second things thrown in: put second things first and we lose both first and second things.”¹⁴⁰

140 C.S. Lewis, “Letter to Dom Bede Griffiths, OSB,” *The Collected Letters of C.S. Lewis*, vol. 3: Narnia, Cambridge, and Joy, 1950-1963 (San Francisco: HarperOne, 2007), p. 111.





Are therapeutic drugs permissible?

Yes. The Church has always supported the practice of medicine when it is in keeping with the moral law and views it as an avenue through which God heals. As mentioned previously, the *Catechism* makes an explicit exception for drugs used for therapeutic purposes.¹⁴¹ Psycho-pharmaceuticals, broadly grouped as anti-psychotics, sedatives, and anti-depressants,¹⁴² may be used medicinally to help restore health to the body.

How can the same drug be permitted in one case but immoral in another? As the *Catechism* notes, the morality of a human act depends on the action itself, the intention, and the circumstances.¹⁴³ A close examination reveals that the intention behind therapeutic drugs is the exact opposite of recreational drugs: the therapeutic use of drugs seeks to return an unhealthy body back to its healthy state, whereas recreational use alters a normally functioning body solely for pleasure, potentially endangering its health. The former is in keeping with man's good, whereas the latter is not.

Even so, the risks associated with therapeutic drugs are serious, and therefore such drugs should be taken with medical supervision and with the patient's informed consent.¹⁴⁴

141 Cf. *Catechism*, no. 2291.

142 Cf. *Charter for Health Care Workers*, no. 100.

143 *Catechism*, no. 1750. Cf. Pope St. John Paul II, Encyclical, *Veritatis Splendor*, (Vatican City: Libreria Editrice Vaticana, 1993), nos. 77-78.

144 Cf. *Charter for Health Care Workers*, nos. 101-102.





Is medicinal marijuana permissible?

As of this writing, the FDA has approved four marijuana-based medications. Epidiolex, which is used to treat seizures, only contains CBD, and therefore does not cause a high. Marinol, Cesamet, and Syndros are used to treat the side effects of chemotherapy and do contain THC.

As with any therapeutic drug, we should ask: 1) What are the risks? 2) What are the benefits? 3) Is there a safer drug that is just as effective? After discussing these questions with a physician, one could morally take any of the FDA approved marijuana-based drugs.

People often refer to medical marijuana broadly without realizing it is specific to the four FDA-approved drugs. They feel it is acceptable to self-dose with marijuana to treat symptoms for which the drug has not been approved. Unfortunately, much of the research on cannabis and related substances has been plagued by low quality and insufficiently broad studies.¹⁴⁵ For instance, the National Academies of Sciences, Engineering, and Medicine found “limited” or “insufficient evidence” for the effectiveness of cannabis or cannabinoids on twenty health

145 Misty Pratt et al., “Benefits and harms of medical cannabis: a scoping review of systematic reviews,” *Systematic Reviews*, December 10, 2019, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6905063/>.





issues.¹⁴⁶ This included several of the ailments marijuana is most commonly used to “treat,” including anxiety and glaucoma. Their review of the research found only four health issues for which there was “conclusive” or “moderate evidence” of the effectiveness of cannabis or cannabinoids.¹⁴⁷ We hope that in the coming years, more rigorous study will be undertaken.

As far as medical marijuana is genuinely effective, it should be treated like any other medication. This means, first, that there should be limits on how much is consumed daily. Even mild pain relievers like acetaminophen cap the number of pills one should take in twenty-four hours. Likewise, any doctor recommending medical marijuana should set a daily dosage limit. Self-dosing opens the door to abuse and addiction. Second, medical marijuana should be consumed like a medication; it should not be smoked or turned into edibles. It distorts the understanding of the drug as medicine (as well as the dosage) to consume medical marijuana via common recreational means. Third, one’s intention must be examined. It would be morally illicit to use medical marijuana as a mask for recreational use. Similarly, neither should it be used as an escape from any of the existential issues enumerated in Section III. Like any other medication, medical marijuana should be used with the intention of trying to restore health to the body.

146 *The Health Effects of Cannabis and Cannabinoids: The Current State of Evidence and Recommendations for Research*, pp. 128–29. (1) treatment of chronic pain in adults; (2) treatment of chemotherapy-induced nausea and vomiting; (3) improving patient-related multiple sclerosis spasticity symptoms; and (4) improving short-term sleep outcomes for patients with sleep disturbance associated with obstructive sleep apnea syndrome, fibromyalgia, chronic pain, and multiple sclerosis. 1-3 have “conclusive or substantial evidence;” 4 has “moderate evidence.”

147 *Ibid.*, p. 128.





Drugs make me feel closer to God. How can that be wrong?

The desire to feel close to God is good and is a grace. Every human being is encouraged to seek His face¹⁴⁸ and find the happiness that only comes from union with the Lord. The trouble with drug use is that it is not a means to an authentic experience of the divine. Rather, it merely simulates the feelings that often accompany genuine religious experiences. In other words, the brain can be manipulated to create artificial feelings of closeness to God, but that only produces an imitation of the real thing. It is as imaginary as any other hallucinatory phenomena that accompany psychedelic use.

God is a Person who desires to be in relationship with us. Drugs treat Him like a mere object that can be controlled for one's personal pleasure. There is no technique that can force the God of the universe to do anything; He certainly cannot be manipulated into making Himself felt or known through drugs.

We are encouraged to seek the Lord in humility, turning our hearts and minds to Him in prayer.¹⁴⁹ This may result in a felt experience of God but even when it does not, he hears our prayer and is working for our good. The Sacraments are another primary way to encounter God. Since Christ instituted them, they are a trustworthy means of sharing in the divine life.¹⁵⁰ This is most especially true in the Eucharist, wherein we receive Jesus Himself.

148 Cf. Psalm 27:8; 105:4.

149 Cf. *Catechism*, no. 2559.

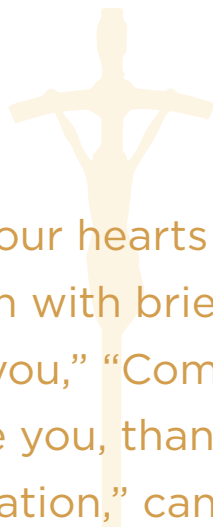
150 *Ibid.*, nos. 1115-1116, 1130-1131.



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Finally, we can “practice the presence of God,” drawing our attention back to the Lord throughout the day. In this way, we discover God’s constant presence, learning to be with the One who is always with us. Simply lifting our hearts to the Lord in gratitude, even with brief outcries like, “Jesus, I love you,” “Come Holy Spirit,” “Father I love you, thank you for the beauty of creation,” can bring us into union with God.



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Can I consume marijuana if I do it moderately?

There may be the atypical marijuana user who only smokes the equivalent of one or two alcoholic drinks. Even if it is legal, we would advise against it. Instead, we would ask what is driving her to marijuana use? Is it to feel good? There are safer and healthier ways to experience pleasure. Is it to relax? “Cannabis can sedate, but it cannot bring peace. It can tranquilize, but it cannot give tranquility.”¹⁵¹ Is it to escape from reality? We would encourage her to turn to Jesus and allow Him to transform her reality so that she does not feel the need to escape. Certainly, it is not an easy road, but it is well worth the effort.

There is no pleasure, joy, or connection experienced during a high that cannot also be experienced without drugs.¹⁵² If we only rarely experience these goods when sober, we are better served turning to Jesus so He may heal whatever is preventing them in our lives. Jesus promises us abundant life and He desperately wants us to experience it! May we never settle for less.

151 *How to Feel Good and How Not To*, p. 45.

152 The lives of the saints testify to this, the most famous example being “the ecstasy of St. Teresa of Avila,” who experienced sheer bliss when mystically united to Jesus.





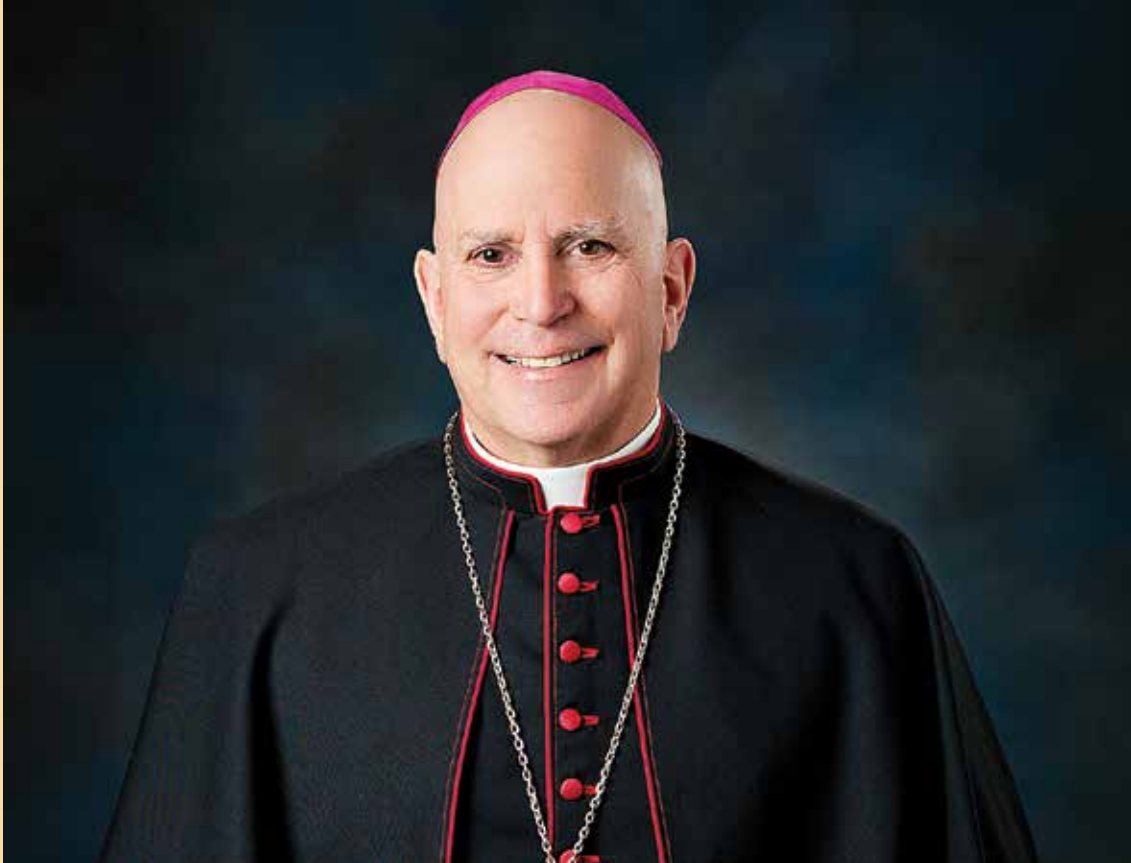
Conclusion

It is evident from the studies cited above that the cultural acceptance and legalization of drugs has been devastating to our society. While drug use can offer temporary relief and escape, it is certainly not a solution to our problems, and the costs far outweigh the benefits. Having experienced first-hand the societal consequences of legalizing marijuana, we must share the truth of what we have seen, heard, and lost. Human beings are experts at making excuses and justifying their behaviors, but any way we look at this issue, as is clear from this letter, we will conclude that the decision to allow, accept, and embrace drug use has proved to be detrimental in countless ways. We have only to look at the decline in our cities that have legalized and promoted drug use and the number of yearly deaths from drug overdoses to see their harm.

I pray for those who turn to drugs to escape reality, to avoid pain, to deal with loneliness, rejection, emotional wounds, or to deal with the struggle to find meaning in life. I ask our Lord, Jesus Christ, to have mercy on them, to turn their hearts away from what is below them, to what only he can offer: true love, joy, peace, and happiness. I pray for all those who have family members who are addicted to and suffering from drug use. I pray for their perseverance, courage, and wisdom. May the God who sent his only begotten Son out of love for humanity to give us abundant life open our hearts to the true gift of life.

*Given this the 10th day of November 2023,
feast of St. Leo the Great, Pope and Doctor of the Church.*

*Most Reverend Samuel J. Aquila, S.T.L.
Archbishop of Denver*



The Most Rev. Samuel J. Aquila

was installed as the Archbishop of Denver on July 18, 2012 at Denver's Cathedral Basilica of the Immaculate Conception. Archbishop Aquila's episcopal motto is taken from the fifth verse of the second chapter of the Gospel of St. John: "Do whatever he tells you."

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