

The State of The Youth Opioid Crisis in Canada and Possible Remedies

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Every day, families across Canada lose sons and daughters, siblings and students to opioid overdoses. In recent years, opioid-related deaths among Canadian teens and young adults have skyrocketed, with emergency hospital visits quadrupling between 2014 and 2021 in Ontario alone (Public Health Ontario, 2023). The Canadian Institute for Health Information (CIHI) reports that opioid toxicity deaths remain one of the most common causes of preventable mortality among young Canadians aged 15 to 29 (CIHI, n.d.). Despite clear, documented evidence of this escalating crisis, provincial health systems have struggled to implement effective public awareness campaigns and treatments tailored to the needs of young people (Public Health Ontario, 2023). Failures in education, drug policy, and healthcare support have contributed to the prevalence of this alarming trend. Therefore, this essay argues that youth-led, culturally embedded digital platforms and community initiatives, built with leadership combined with technological skills offer a powerful, underused intervention to prevent opioid harms. First I will map the crisis' digital and social forces, critique the current failing system, and propose fandom rooted platforms, policy reforms, and measurable outcomes. As a student skilled in media and social curation as well as computer programming, I propose actionable efforts to meet struggling youth where they are, in order to transform passive prevention tactics into active peer-driven resilience.

The opioid crisis is not simply an isolated tragedy, but a reflection of intersecting social, technological, and healthcare failures. According to the Canadian Centre of Substance Use and Addiction (CCSA, 2015), young people often encounter opioids through the misuse of medical pain-relief prescriptions, "Among 15–19 year olds who used opioid pain relievers

in 2013, 5.8% reported that they had used them to get high”. The COVID-19 pandemic worsened these risks by streamlining social experimentation through peer influence and digital exposure, as well as limiting access to mental-health resources (Friesen et al., 2021). On social media, substances often appear through coded hashtags, aestheticized drug cultures, and influencers such as rappers that depict drug related entertainment without the realism of consequences. American rapper ‘Playboi Carti’, whose record label is literally named “Opium”, commands a large teenage to young adult fanbase while glamourizing substance use. His 2020 arrest—which uncovered cannabis, three guns, Xanax, codeine, and oxycodone in his Lamborghini (Scott, 2020)—became another chapter in his mythos, rather than a lifestyle to be avoided. For young, impressionable fans, such incidents reinforce opioid use as a marker of success and rebellion rather than medical risk, demonstrating how influencer culture reframes addiction as aesthetic rather than crisis. On Reddit, the subreddit r/opiates has a 0.35 subreddit user overlap with r/vancouver and r/toronto, a 0.31 user overlap with r/personalfinancecanada, as well as a 0.30 overlap with r/canada. This data suggests that opioid discourse is embedded into the everyday questions of Canadian digital spaces, not just isolated to specialized addiction forums (“Similar Subreddits to r/opiates,” n.d.). This normalization means young Canadians are exposed to opioid content while navigating local or personal finance discussions. Social media shapes their understanding of risk through repeated encounters rather than targeted education. I believe that there is a great need for interventions rooted in media literacy, cultural awareness, and digital fluency.

Recent Canadian news cycles and social media discussions increasingly feature stories of young people lost to opioid addiction, some starting as early as middle school. “The number of children in grades 7 to 12 using opioids in Ottawa roughly doubled from 2021 to 2023, according

to recent data from Ottawa Public Health (OPH) and the Centre for Mental Health and Addiction.” (Huston & Weller, 2025) These tales are portrayed with a tragic finality but limited systemic oversight, “When Sean O’Leary tried to get help for his daughter, he found that addictions treatment services weren’t usually designed for children — and that children’s services weren’t usually designed to manage addiction.” (Huston & Weller, 2025) Young people face unique vulnerabilities with drug addiction in this era. The Ontario health curriculum for Grade 6 in 2019 states the learning goals for the Substance Use, Addictions, and Related Behaviours unit to be to “describe the range of effects associated with using cannabis, other drugs (e.g., prescription medications such as opioids; illicit opioids such as heroin, crack, cocaine, Ecstasy, crystal methamphetamine), and intoxicating substances (e.g., gas, glue)” (Ontario Ministry of Education, 2019) The Canadian health curriculum addresses substance use in an abstract way, focusing more on the effects and individual’s choice to do drugs instead of emphasizing systemic pressures such as trauma or digital culture as motivations of drug use.

An initiative to combat the effects of opioid addiction would have to have a large reach, and be applicable to youths from all walks of life. Traditional awareness campaigns tend to rely on static websites, or public service announcements written in scientific, institutional tones, which may alienate youth more inclined to modern language. As a result, these messages ultimately fail to build cultural or emotional relevance among its audience. Youth interact through dynamic participatory media ecosystems such as memes, short-form videos, online servers and fandom communities, while institutions communicate through hierarchical formats ill-suited for direct engagement. Mainstream awareness and prevention frameworks also depend heavily on abstinence based narratives, as CanadaHelps promotes a ‘Say no’ campaign without recourse (CanadaHelps, n.d.). These strategies lack harm-reduction realities, such as the need for

accessible pain-medication, peer check-ins, or normalized mental health discussions online and offline.

Likewise, there is also a leadership gap. Few public-health programs train or fund youth to co-design opioid related interventions. According to a study done by the Melbourne Graduate School of Education, programs co-created by youth tend to increase the benefits of “learning, enjoyment, teamwork, achievement and pride.”(Vella-Brodrick et al., 2023) Yet most funding remains directed towards medical institutions rather than innovation networks. Without combining youth creativity with policy, effective prevention remains ambitious, yet not in reach.

From the perspective of a first-year CCIT and Linguistics major, fluency in both cultural and technical environments gives me unique leverage to tackle this issue. My knowledge of anime fandom culture may appear unrelated, yet it cultivates high awareness of narrative symbolism, character empathy, and community belonging. All key points for effective mental health aid to drug-addicted youths. Anime fandom groups constantly function as informal support networks, where users discuss personal themes like trauma, perseverance, and friendship through artistic metaphors. This emotional, engaging media could anchor digital harm-reduction content, in the form of age-appropriate short or long-form animations or comics, in relatable emotional language rather than clinical, institutional detachment. TV series tackling complex, relevant themes such as bullying or parental loss, such as *A Silent Voice*(Koe no Katachi), or *Your Lie in April*(Shigatsu wa Kimi no Uso), model redemptive experiences around loss and depression, offering frameworks for dialogue that traditional education might typically overlook. Beyond cultural empathy, programming and system design enable youth-led solutions that lead to awareness toward sustainable infrastructure. Building Discord bots to share harm-reduction resources or developing interactive websites to encourage gamified learning, will make major

information accessible where youth already gather. These fandom-rooted tactics would also prime students with media literacy skills, training them to spot and identify romanticized views of opioid-addicted lifestyles, and warn their social groups accordingly. These interventions would combat the disconnect between where youth actually spend their time, on social media, fandom spaces, and peer networks, and where traditional help systems expect them to seek help. It would transform the youths from passive consumers of technology to communication leaders ready to mobilize, moderate, and maintain ethical, safe, peer networks.

In addition to creative resources, another complementary initiative would involve building a primary student-developed digital hub accessible via web and mobile platforms. The platform would combine anonymous chat features, local resource directories, and harm-reduction guides reviewed by healthcare professionals. For example, a youth experiencing withdrawal anxiety at 2 AM could access an AI-moderated chatbot providing immediate coping strategies, ‘Try the 5-4-3-2-1 grounding technique’, while being directly connected to local crisis lines, all within interfaces designed by and for their peer community. This non-profit digital space would bridge university services, public health data, and peer narratives in real time. Models such as Kids Help Phone’s online text system demonstrate the viability of digital interaction to youth, yet such services lack customizable cultural tone and community ownership. A platform developed by youth for youth would integrate multimedia storytelling, such as short-form videos, gamified prevention challenges, and peer-created recovery blogs to sustain engagement. Open source languages like React or Flask along with platforms like GitHub and freeCodeCamp, would allow student programmers across Canada to collaborate on this project. Partnerships with public health agencies would ensure factual accuracy while preserving youth-focused aesthetics and tone.

Furthermore, coordinated campaigns on platforms such as Instagram, YouTube, TikTok, and school specific digital signage would extend the visibility of youth-led prevention. For instance, a hashtag called ‘#Nopiod’ could feature 60-second or shorter clips combining creative expression such as video editing, digital art, or first-hand stories from peers recovering from opioid related substance abuse to contribute not only content, but effective infrastructure. Digital story-telling workshops integrated into their day-to-day education would encourage youths to create media for academic credit with added social impact. These campaigns would make mental health dialogue visible, interactive, and normalized, converting social feeds from vulnerability risk zones to resilience speakers.

In addition to digital coordinated campaigns, media and tech engagement must be combined with social policy reform. Youth-led initiatives are able to advocate for reforms such as digital-harm reduction literacy in curriculum as well as funding streams for tech-driven community health toolkits. Presenting to municipal or provincial youth councils would form a feedback loop mixing policy-making with grassroots initiatives. These initiatives would further reframe the youth no longer as passive collectors of information, but co-designers in public spaces with fresh ideas to make reality. Formal recognition, such as grants specifically for youth-marketed digital harm-reduction tools from reputable organizations, would institutionalize these projects while retaining youth governance over design and tone. Engagement metrics would be used such as peer sharing, community leadership, and overall retention, and youth seats on municipal health boards and school-board committees would ensure that the data on opioid harms remains relevant and translated onto platforms, and languages young people use. I would like the long-term vision to be a system where youth narrative media informs healthcare messaging, and healthcare data improves digital content created by youth creators.

In conclusion, the youth opioid crisis in Canada is not only a policy and educational failure, but a failure of communication, systems, and generations. Young Canadians are frequently cast as helpless, at-risk populations but rarely as the independent forces capable of designing their own rescue. The solution is that the skills powering digital culture, storytelling, programming, understanding of language, and audiovisual editing, are exactly those needed to re-imagine prevention. Youth who moderate Discord servers, create art, curate posts for subreddits, or maintain niche fandom wiki activity already practice and are capable of the care necessary to practice digital harm prevention daily, most times without recognition or resources. By channeling those innate skills into structured initiatives such as peer-coded digital hubs, anime-themed harm reduction circles, and student-run campaigns, youth can transform passive awareness into active action. As a student immersed in creative fandom networks every day, my role is not only to consume media but to reshape it, transforming digital spaces from sites of passive risk into infrastructures of active peer care. Through pairing cultural empathy and participatory energy with technical architecture, a generation may reclaim its narrative from loss with a community-oriented, collective design.

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