

STORY GLEANERS

SPEAK FROM THE HEART

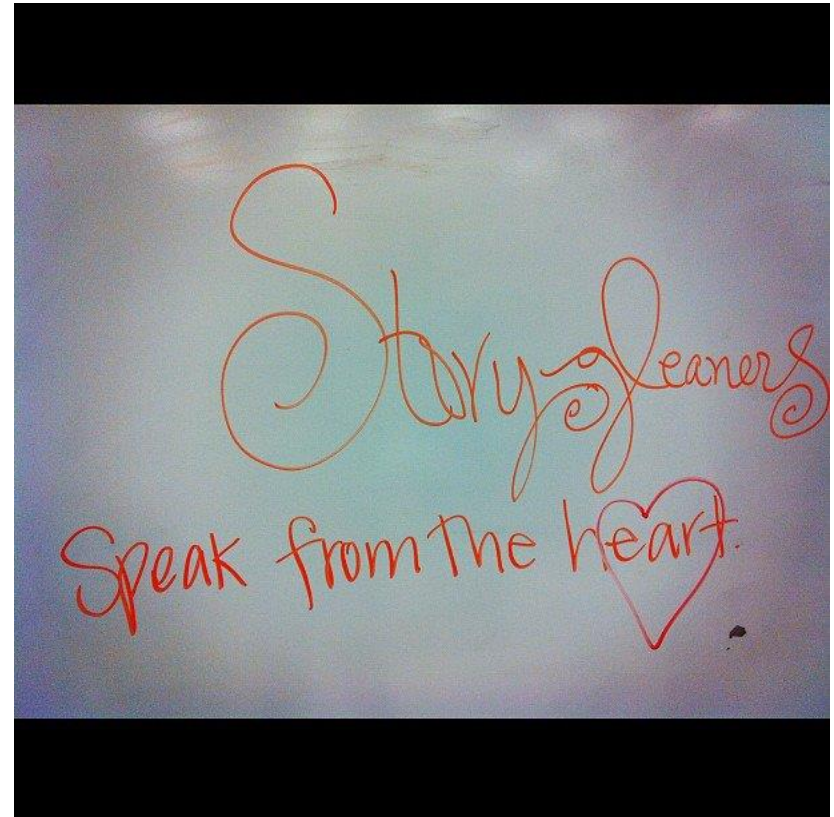
CENTRAL TORONTO COMMUNITY HEALTH CENTRES

Wednesday MAY 2, 2012, 1:30-3:30pm

PROJECT OVERVIEW: WHY STORY GLEANERS?

○ Story Gleaners is a Community-Based Research project to explore using digital storytelling to:

- document how current Canadian drug policy affects the health of people who use drugs
- engage and support people who use substances to develop health literacy and to enhance their harm reduction and safer sex practices.
- provide a platform for drug users to voice their experiences and stories



WHAT WE DID:

12 Participants

**8 storytelling circles with Jim Meeks as storytelling facilitator
(January – March, 2012)**

Guest Speakers:

- Walter Cavalieri (Drug Policy);
- Mahlikah Awer:i (Storytelling as Performance);
- Chris Cavanaugh (Storytelling and Social Change)

Community Advisory Board

- Advised on project; developed prompts; data analysis; KTE event assistance

WHAT YOU SHARED:

○ 8 stories recorded

○ Stories recorded with the help of prompts based on the 4-Pillar Drug Strategy:

- Prevention
- Treatment
- Harm Reduction
- Enforcement

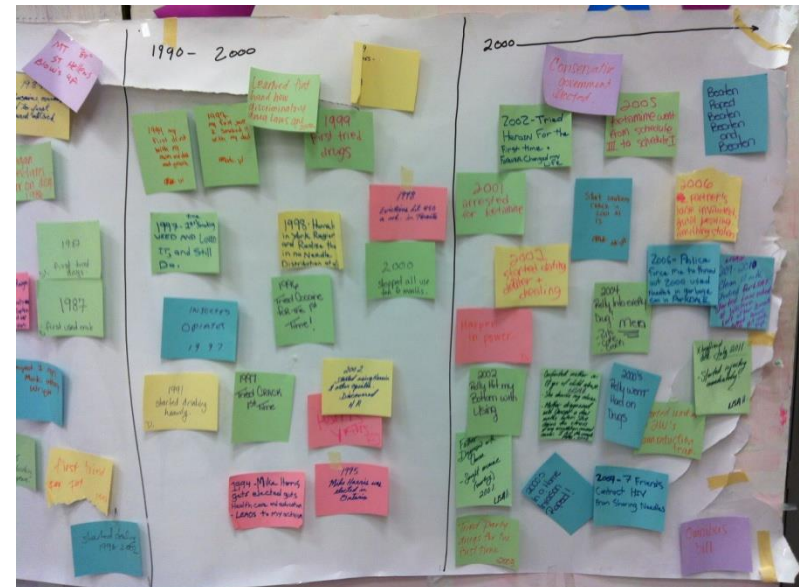
○ Drop-in editing sessions held if people wanted to add images or edit their story



WHAT WE HEARD:

• All participants surveyed reported the following:

- An increase in storytelling skills and knowledge about harm reduction during the circles
- Participating in the research has been beneficial to participants' and their communities.



• Participants enjoyed different parts of the training:

- Guest Speakers
- General knowledge on harm reduction
- Story Screening

Participants would have liked to see more:

- Storytelling articles
- First Nations Teachings
- Learning about Harm Reduction Practices
- A continued Story Gleaners project as ongoing programming

What we heard cont'd...

“Seeing the other participants” stories really inspired me to record mine so it can hopefully affect others the way other’s stories affected me”

“The impact of these projects on the participants lives and the ability to help others in their communities is HUGE and have an amazing impact in both small and large ways”

“I would like to use my videos to show other suffering from original ramifications of drug use and haunting histories of being abused that voicing our stories has the power to create change.”

When asked why the project was beneficial participants said:

“Just being able to tell mine and other story”

“Learning more things”

“Raised self esteem of participants. The first step in stabilization. Thanks for allowing me to participate in such a meaningful project”



Lack of Safe Spaces

Participants' stories spoke to how current drug policy actually decreased their access to services, acting as a facilitating factor for homelessness or involvement with the law.

- No place to use safely.
- Abstinence-only policies at shelters leading to denied access to services
- Migration, youth homeless, lack of privacy to use
- Lack of access in rural communities to harm reduction knowledge (e.g. using safely, initiation, etc.)



"You're a teenager, you're on your own and on the streets, and you move to a youth shelter, the only youth shelter in the community where you live. It's abstinence-based. [...] That was the first time shooting up. Low and behold, and they knew I was high, so I ended up being homeless and on the streets again."

Self Medication

- *"I try so hard to let my past go, try drowning it with alcohol and crack. Pushing down the pain but it still resurfaces, comes right back."*
- There are many challenges in accessing health care for people who use drugs, including accessing prescription pain medication and complimentary therapies.
- Substance use and self medication was a prominent theme in many stories.
- Individuals use drugs to cope with emotional and physical pain (mental health issues; past trauma; physical ailments etc.).
- There is a lack of access to prescription medications and complimentary therapies for pain.

Access to Health Care & Criminalization

- Despite people's varied reasons for using drugs, criminalization of drug-use continues...
- Many prescribed medications not covered by Ontario Drug Benefits and yet people are still in pain.
- Lack of accountability for police harassment and arbitrary targeting/enforcement by police

“Why government policy allows humans to carry a gun in hand, but imprisons those self-medicating with a remedy they choose to ban.”

“I was born with arthritis. [...] I was on Ritalin, and then I got off that and then the pain started getting even more worse and they telling me I can't get my medication unless I have this certain amount of money to get it. Which I don't think that's fair on my behalf. I think they should just let me have my medication instead of taking it away from me. It's very frustrating. And then, I tried to like, work it out, but it just never works out for me. So I get more frustrated, then I get arrested because I tried to go steal the medication. I don't like stealing, but I had - sometimes I have no other choice“

Peer Support: Strength in Community

- Community ('chosen family') also emerged as a prominent theme in the videos
- People who use drugs take care of one another by providing peer support and harm reduction outreach (formally and informally).
- Given dominant representations of people who use drugs in the media, the self-representation of strong, resilient communities should not be understated.
- However, while these communities are strong, people who use drugs continue to experience stigma when accessing health care services, dealing with the police, and connecting with larger communities.



"I am more open to listening and learning and interpreting."

"I know I am important in my community"

"I no longer feel isolated and disconnected from the societal masses that have turned away from me due to a lack of empathy for mental/emotional struggles that I try to self-medicate via addiction to illegal substance"

Peer Support: Strength in Community

"But I just do my own harm reduction. Carry my own stuff around, right"

"Me and my boyfriend that come pretty much everyday here and see everybody. And I'm so happy that people are always like "Hey, nice to see you guys" you know?"

"And, two of my best comrades, cause at least we don't fight each other for a bottle or for money or for crack or this. We always give something to each other, cause we're not greedy. We respect each other cause when you're in that kind of a situation you help each other out."

Recommendations

- Health care systems must acknowledge self medication when working with people who use drugs as valid, and not deny people access to medication based on their personal drug use.
- Shelters and other youth-serving agencies need to adopt harm reduction philosophies to better support youth and adults. Abstinence-based programs only serve to further stigmatize and reduce access to services for people who use drugs.
- Social assistance needs to increase rates and coverage to accurately support the needs of people with health problems, including people who use drugs.
- Drug policy needs to take into account the many reasons people use drugs (to have fun, to release anxiety, to self-medicate physical and emotional pain, etc.).

Recommendations

- More Harm Reduction Programming! Storytelling can be a powerful way of educating service providers, policy makers, law officers, and decision makers about the daily realities of people who use drugs.
- Drug Policy needs to work against the criminalization of people who use drugs; drug use is a health issue, not an issue of the courts.
- People need safe places to use; governments need to take research and professional college's views on safer consumption sites seriously and create funding opportunities to meet the need.
- Harm Reduction programming SAVES LIVES, including distribution of safer use kits; education on safer drug use; overdose prevention; and safe consumption sites.

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