

The Peer Comic Book Project: Illustrating Peer Workers' Experiences Working Throughout the  
Overdose Crisis in the Suburban Lower Mainland

by

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The Peer Comic Book Project: Illustrating Peer Workers' Experiences Working Throughout the Overdose Crisis in the Suburban Lower Mainland

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submitted by Sophie McKenzie in partial fulfilment of the requirements for

the degree of Master of Art

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in Anthropology

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## Abstract

Several regions of North America and Europe are experiencing a devastating drug overdose epidemic. In Canada, the province of British Columbia (BC) has the highest death rates due to drug toxicity. Peer workers, people with lived and living experience with substance use who use that lived experience in their professional work, are at the frontlines of responding to the overdose crisis through roles such as peer-witnessing of substance use, outreach services, mobile overdose response, delivery and collection of harm reduction supplies, and advocacy. Whilst peer workers have been the subject of interdisciplinary scholarship which examines their utility to harm reduction initiatives and their workplace conditions, they have not yet been involved in arts-based collaborative projects. This thesis examines an arts-based collaboration rooted in tenets of Participatory Action Research (PAR) and Values-Based Cartooning in which I worked with three peer workers from the suburban Lower Mainland to create a series of graphic vignettes. The comic strips reflect peers' experiences working throughout the overdose crisis within contexts of escalating street violence, deepening socioeconomic inequities, and pervasive instances of drug poisoning. I describe the intricacies of collaboration between an academic researcher and people who use(d) substances, including the effects of deeply entrenched power dynamics, processes of analysis and reflection, and the capacity of art-based projects to elicit nuanced manifestations of agency and power. This thesis describes both the strengths and downfalls of an arts-based collaboration and offers practical insights for future projects.

## Lay Summary

This thesis looks at a process of collaboration between three peer workers, meaning people with lived and living experience with substance use who use that experience in their professional work, and an artist/researcher. We worked together to create a series of comic strips which depict peers' experiences working in the suburban Lower Mainland throughout the overdose crisis. The project is based off tenets of Participatory Action Research (PAR) which involves researchers and "participants" working together to create a project which promotes social change. As I was illustrating, I used a method called Values-Based Cartooning in which I deeply engaged socially and emotionally with my collaborators to produce the comic strips. Through analyzing our process of collaboration and my colleagues' processes of reflection, this thesis offers insights and recommendations on arts-based collaborations between researchers and people who use substances.

## Preface

This thesis is an original intellectual product of Sophie McKenzie, based on fieldwork conducted by the author, Sophie McKenzie, from January to June of 2023. This fieldwork was approved by the University of British Columbia (UBC) Behavioural Research Ethics Board (BREB) under the title “Peer workers and the overdose crisis in the Lower Mainland: a graphic novel project,” BREB number H22-03276. Drafts of this thesis were reviewed by her supervisor, Dr. Leslie Robertson, committee member Dr. Danya Fast, and an external reviewer. The author, Sophie McKenzie, was responsible for all major areas of concept formation, ethnographic data collection and analysis, illustration, formatting of the graphic novel, as well as manuscript composition. Portions of this thesis may be published in peer-reviewed journals and/or presented at conferences.

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## List of Submitted Files

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I am grateful to my committee member Dr. Danya Fast, who was the first to show me that I don't have to choose just art or anthropology. Thank you for showing me how to marry my two passions, and for always being willing to engage with my work.

I am indebted to my incredible 2021 anthropology cohort who entered graduate school with me. I did not expect that this new experience would bless me with the most kind, hilarious, and talented group of people who would inspire me both personally and academically. Thank you for our countless dinner parties, lunches on campus, late nights out on the town, and our deep chats. You truly got me through these past two years.

Thank you to Amy, Tracy, and Ryan for your steadfast dedication to and care for this project. I am honoured that you entrusted me with your stories, and you inspire me beyond words.

The stories compiled in this comic book are inspired by experiences which took place on the unceded traditional territories of the Semiahmoo, Katzie, Kwikwetlem, Kwantlen, Qayqayt, Tsawwassen, Songhees, Esquimalt, WSANEC, Musqueam, Squamish, and Tsleil-Watuth peoples. I am grateful to these lands for hosting me as I carried out this work.

This project was financially supported by the Canada Graduate Scholarship Master's Program (CGS-M), a project funded by the Social Sciences and Humanities Research Council (SSHRC).

I dedicate this thesis to my amazing mum, Tracy Truant, who sadly died in the spring right before I entered this program. In the acknowledgements section of her PhD dissertation, she wrote:

“I want to express my profound gratitude for being part of an incredible family that has sustained me in every way imaginable. My husband Dr. Michael McKenzie and my beautiful daughters, Sophie and Molly McKenzie are the centre of my universe, and I will be forever grateful for all they have taught me and all the joy they have brought to my life”.

My mum is still the centre of my universe, even after her passing. Everything I do is to make her proud. She knew I was entering grad school in the fall, and lived to hear that I was awarded a SSHRC grant. I wish that she were here to see how far I have come. The love that I have put into this project is part of the same thread of the love she gave to me. I am also grateful to my sister Molly, my dad Michael, and my partner Ana who have trudged through this journey of grief with me and held me up when I didn't think it was possible to keep going. Thank you for loving me through it all.



## Introduction

Fieldnote Entry - February 2<sup>nd</sup>, 2023

I was on the Expo Line<sup>1</sup> heading to Surrey Central Station when Amy Snapchatted<sup>2</sup> me to let me know that her and Ryan missed their methadone dose in the morning and had to go and pick it up later, which meant they were not feeling very well. She asked that we stay close to their apartment. I hadn't seen either of them in about three years since before the COVID-19 pandemic started. I worried that I was burdening them, but my fear quickly dissipated as they emerged from their apartment building with beaming smiles and outstretched arms. Amy shared on Ryan's behalf that he had a difficult morning because he has never missed a methadone dose before, and he felt like it was a step back in their recovery journey. He expressed frustration at how the missed dose was completely out of their control and was a scheduling error of the people working at the clinic. I was concerned that they might feel the need to cover up how unwell they really felt. It was then that I became acutely aware of the glaring power dynamic between us. The fact that our meeting was under the guise of an "academic project" and that they were going to be paid honoraria for their work made me deeply uncomfortable, although I knew that this is an ethical imperative. This tension troubled me, and I felt my teeth clench. For an instant, I considered whether the most ethical and kind decision would have been to reschedule our meeting. Nonetheless, we proceeded to the recreation room of their apartment as they chatted excitedly about how much they loved their apartment building and all its amenities, including a lush park next-door and a big balcony off their unit. Entering the unsettling role of the

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<sup>1</sup> Line on Metro Vancouver's Skytrain rapid transit system. It links the cities of Vancouver, Burnaby, New Westminster, and Surrey.

<sup>2</sup> An American multimedia instant messaging app in which pictures and messages are only available for a short time before they become inaccessible to recipients.

“researcher” for the very first time, we sat on the plush couches in the rec room to review the consent form and discuss how we would carry out the work of creating a series of comic strips together...

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At the time of this fieldnote entry, I had just set out to produce a series of graphic vignettes which reflect the experiences peer workers, approaches and practices of self-care in the context of the overdose crisis in the suburban Lower Mainland. While I was aware of peers’ unique positioning at the intersection of harm reduction service delivery, criminalized substance use, and complex poverty, I did not yet know how these dynamics would manifest in a collaborative arts-based project.

In this thesis, I describe the process of putting together a series of graphic vignettes with three peer workers living in Surrey and Maple Ridge, British Columbia (BC). As a case study of Participatory Action Research (PAR), I outline the importance and limitations of collaborations between people who are marginalized by their substance use and academic researchers who are not (Lassiter, 2005). I also outline the process of employing Penelope Mendonça’s “values-based cartooning”, a method of illustration involving deep reflection upon emotion and engagement with lived experience of the topic at hand (2016). In this way, our graphic novel is an exercise in the “commonplace labour of becoming sentient to a world’s work” (Stewart, 2011, p. 445). I conclude by offering reflections upon the utility, benefits, and drawbacks of engaging with tenets of PAR in arts-based projects with people who use criminalized substances.

### The Overdose Crisis

People throughout several regions of Europe and North America are experiencing a calamitous drug overdose epidemic. In Canada, the province of British Columbia has the highest

death rates due to drug toxicity, reporting a rate of 20.7 per 100,000 population as of 2018 (Belzak & Halverson, 2018). In 2002, overdose death rates in BC were 10% of what they are now (BC Coroners Service, 2022). The magnitude of mortality and abrupt acceleration of this overdose crisis has stressed the resources of health systems as more people seek support for drug-related harms. Most people are dying due to the presence of fentanyl, a strong synthetic opioid that is added to a broad variety of criminalized substances such as oxycodone, cocaine, heroin, and methamphetamine. Recently, benzodiazepines have also been on the rise within the illicit drug supply. The BC Coroner's Office reports that detection rates rapidly increased from 15% of samples in July 2020 to 52% of samples in January 2022 (BC Coroners Service, 2022). Unlike fentanyl, 'benzos' are a non-opioid sedative which do not respond to naloxone (the opioid overdose antidote), leading to more deaths which cannot be addressed via life-saving opioid antagonists. The unregulated nature of the criminalized drug supply allows for this lacing, and people are dying quickly and unexpectedly. Canadian colonial legislation is in many ways to blame for how certain groups are disproportionately impacted by these deaths. The Residential School System, continued histories of child removal, overrepresentation in the foster care system, and the province's housing crisis intersect to inflict disproportionate harm on people who are poor and/or racialized amid the overdose crisis (Belzak & Halverson, 2018; Cabanis et al., 2021; Lupick, 2017). More specifically, the First Nations Health Authority (FNHA) reports that although Indigenous people constitute only 3.3% of people living in BC, they represented 18% of overdose events in 2021 (First Nations Health Authority, 2022).

Hundreds of activists have organized in BC in response to these deaths, with many critiquing the extent to which the provincial and federal governments have remained nonresponsive (Mullins, n.d.). Activist groups including the Drug User Liberation Front (DULF),

Vancouver Allied Network of Drug Users (VANDU), and the Canadian Association of People Who Use Drugs (CAPUD) are united in face of overwhelming deaths in their communities, challenging policymakers, government officials, and researchers to wake up to the crisis (Denis, 2022). Many utilize social media to reach corporate and governmental elites with financial and political stakes in the illicit drug toxicity crisis. People who use drugs and their allies are often resolute in their advocacy - making sure their loved ones are not forgotten and pushing for decriminalization and safe supply (Paley, 2022).

Those who are poor and use criminalized substances transgress boundaries established by public health regimes of 'care' and therefore often occupy a liminal flux between living and death which Dr. Lauren Berlant characterizes as "slow death":

The physical wearing out of a population and the deterioration of a people in that population that is very nearly a defining condition of their existence and historical existence. (2007, p. 754)

They inhabit liminal "death worlds", which according to Dr. Achille Mbembe are "forms of social existence in which vast populations are subjected to conditions of life conferring upon them the status of living dead" (2003, p. 40). This mode of life is characterized by a steady teleological flux toward death, propagated by a set of institutions designed to enable their physical harm (Darian-Smith, 2021). For instance, the risk of prosecution obliges people who use drugs to resort to secretive practices such as (but not limited to) needle sharing, reusing supplies, using makeshift supplies, using alone, not pacing doses, and avoiding healthcare (Jozaghi et al., 2016). As highlighted by Downtown Eastside (DTES) journalist Travis Lupick:

When someone uses heroin in an alley, hurriedly injecting for fear of police, it is not the drug that causes them to rush and miscalculate their dose, possibly leading to an overdose. It is their fear of persecution. (2017, p. 15)

It is important to note, however, that this disproportionate exposure to bodily harm is specific to those marginalized by their substance use, oftentimes those who are poor. Further, some do not identify with the characterization of their lives as a “slow death”, and this notion should only be applied sensitively and where it is politically useful.

The ascension of the necropolitical state which propagates bodily harm coincides with the rise of logics of punishment as the primary mode of governing the poor (Wacquant, 2009). In other words, the provision of care is co-articulated with the exercise of punishment and control (López, 2020). As the moral and the illicit are “processes co-existing in the [lives] of drug users” (Garcia, 2014, p. 51), they are often navigating through an “institutional circuit” of hospitals, shelters, jails, and public spaces (Hopper et al., 1997).

The province of BC is known for its historically distinct approach to increasing drug-related harms. Whilst the federal government was staunchly targeting people who use drugs through anti-narcotic laws in the early to mid-20<sup>th</sup> century, BC opened the Narcotic Addiction Foundation of British Columbia (NAFCB)<sup>3</sup> in 1955 which opened Canada’s first community clinic in 1958 designed to support people who use narcotics (S. Boyd et al., 2018, p. 89). Despite the province’s unique efforts to advocate for methadone maintenance therapy (MMT) and other harm-reduction strategies, a public health emergency was declared in 1997 in response to a poisoned illegal drug supply and increasing health harms<sup>4</sup> in the Downtown Eastside (DTES) of Vancouver (Lupick, 2017) . Leading up to this crisis in the 1990s, activists called for increased harm reduction services including needle distribution, heroin-assisted treatment, and the opening

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<sup>3</sup> This foundation’s community clinic was the first in the province to offer outpatient services, a four-bed residency for men choosing to withdraw from narcotics, and a methadone withdrawal program. This was the first time that methadone was used for drug treatment in Canada (S. Boyd et al., 2018).

<sup>4</sup> These health harms include increasing rates of sexually transmitted and blood-borne infections (STBBIs), most notably HIV/AIDS and Hepatitis C (S. Boyd et al., 2018).

of an official safe injection site (SIS)<sup>5</sup> (S. Boyd et al., 2018, p. 93). In response to government inaction, people who used drugs both convened in activist circles<sup>6</sup> and set up their own unofficial supervised injection and harm reduction supply distribution sites in back alleys (S. Boyd et al., 2018; Lupick, 2017). It was this grassroots work that formed the foundation upon which the modern “peer worker” role is built.

However, these methods of reducing drug-related harms have sometimes been appropriated and mobilized to foster state legitimacy. As summarized by Primary Care Physician Alex Niculescu:

What began as...underground [strategies] to aid the socially marginalized in their daily struggle for survival [have] been co-opted and therefore occupied by the State to serve both a biopolitical, disciplinary, and necropolitical purpose. (2012, p. 86)

This co-optation is executed under the premise of state compassion in which the “provision of care is co-articulated with a politics of death” (López, 2020, p. 1). This can be seen in Vancouver’s 2001 Four Pillars Drug Strategy<sup>7</sup> which is intended “to reduce harm to individuals and communities from the sale and use of both legal and illegal substances” (Vancouver, n.d.). Whilst these methods were originally developed and advocated for my affected communities, they have become a political opportunity to assert state legitimacy in face of increasing governmental distrust and sensationalized media attention paid to people who use criminalized drugs and their communities (J. Boyd, 2017; J. Boyd et al., 2015). Susan Boyd argues that “drug prohibitionist policies create a lethal environment” in which people cannot be certain of the quantity and quality of the drugs they are buying and therefore are unsure when they are at risk

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<sup>5</sup> Opening its doors in 2003, Insite was the first sanctioned supervised drug injection site in North America. It is located on East Hastings Street in Vancouver’s Downtown Eastside (DTES) (PHS Community Services Society, n.d.). At the time of writing this thesis (2023), there are 20 overdose prevention sites across the province.

<sup>6</sup> One of these activist circles culminated into the establishment of the Vancouver Area Network of Drug Users (VANDU) in 1998 – the first drug user union in Canada (“About VANDU,” 2016). VANDU’s unique peer-led structure inspired the formation of many more drug user groups across the country.

<sup>7</sup> Harm reduction; Prevention; Treatment; Enforcement.

of overdose (S. Boyd et al., 2018, p. 94). The isolated implementation of harm reduction programming in the absence of legal access to a safe supply will not fully remedy the diverse array of harms inflicted by the criminalization of certain substances.

Whilst Vancouver's DTES has historically been the epicentre of harm reduction programming and the primary subject of grants and academic research, drug user activists in the suburban Lower Mainland have campaigned for these initiatives in their own communities. Gradually, harm reduction-oriented projects such as safe injection sites and sterile supply distribution have permeated municipalities such as Surrey and Maple Ridge. Surrey is located south of the Fraser River and is the province's second-largest city by population after Vancouver (About Surrey, 2020). Maple Ridge is located between the Fraser River and the Golden Ears mountain summits, and is roughly one eighth of the size of Surrey in population (Maple Ridge, BC, n.d.). In 2018, Maple Ridge was selected as one of the eighteen B.C. communities that received \$100,000 in funding to kickstart an on-the-ground Community Action Team (CAT) dedicated to expanding community-based, harm-reduction services, increasing naloxone availability, connecting people to services like treatment and housing, and expanding drug-checking services (Melnychuk, 2018). The Fraser Health Authority region, which covers both Surrey and Maple Ridge, has had the highest number of unregulated drug deaths each year since the public health crisis was declared in 2016 (BC Coroners Service, 2023). Maple Ridge is located in the Fraser North Health Service Delivery Area (HSDA), and Surrey is located in the Fraser South HSDA, which feature the highest illicit drug toxicity deaths within the Fraser Health region (BC Coroners Service, 2023). In May of 2023, a Maple Ridge city councillor proposed a motion to ban the use of drugs in public spaces, contributing to an increasingly hostile environment within which peers must work (Sajan, 2023).

## Peer workers

Among those at the frontlines of the overdose crisis in BC are peer workers, those with past or present substance use experience who call upon that lived/living experience to inform their professional work (Mamdani et al., 2021; Smart, 2018). Known as ‘peers’ colloquially, they are involved in a variety of roles including peer-witnessing of substance use, outreach services, mobile overdose response, delivery and collection of harm reduction supplies, advocacy, and referrals to services such as housing agencies (Bardwell, Kerr, et al., 2018; Marshall et al., 2015). Emerging public health research demonstrates that peers are integral in connecting people with supportive services, facilitating senses of safety and comfort, and reducing harms associated with criminalized substance use and structural violence (Bardwell, Kerr, et al., 2018; Greer et al., 2016; Greer, 2019; Hay et al., 2017; Kennedy et al., 2019; Latkin et al., 2003). Peers withstand the burden of the overdose crisis both in their personal and professional lives. The end of their paid working hours doesn’t constitute the end of facing the realities of the overdose crisis. Oftentimes, the people that peers are supporting are close friends or family members (Pauly et al., 2020). It is important to note that many peers are wholeheartedly devoted to their work and find great meaning in being able to help their social networks, acting as a role model, and feeling a sense of belonging in the peer worker community (Pauly et al., 2020).

Peers in BC are most often paid either via honoraria<sup>8</sup> or stipend for their work. Set working arrangements such as weekly outreach shifts are typically compensated per hour, and more loosely defined roles such as sitting on a working committee are paid via monthly or weekly stipends (Greer, 2019). The workplace training they receive is up to the discretion of their organizations. There is no central governing agency which offers concrete

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<sup>8</sup> The BCCDC Peer Payment Guide recommends \$25 per hour (Allan & Becu, 2017).



recommendations for peer worker training, and therefore there are vast skill discrepancies among peers in BC. Peers are mostly only trained in First Aid and CPR-C, as well as naloxone administration. Peer2Peer, a Health Canada-funded research project, has hosted self-defence, crisis de-escalation, mental health first aid, Indigenous cultural safety, and trauma informed practice trainings for several peer groups around the province in hopes of inspiring organizations to offer further trainings (Peer2Peer (P2P), n.d.). They also created several online training modules<sup>9</sup> in topics identified by peers which can be accessed online on any device, and from which peers earn a certificate of completion.

Whilst there is a plethora of research on how peer-led initiatives have improved program uptake and evaluating how peers are affected by the difficulties of their work as well as the structural violence to which they are subjected, little of this work has been translated into practical, immediate benefit for peers (Bardwell, Kerr, et al., 2018; Greer, 2019; Kennedy et al., 2019; Wagner et al., 2013).

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<sup>9</sup> These training modules include recognizing mental health disorders, effective communication, peer-to-peer counselling skills, conflict resolution, organizational etiquette, problem solving, identity and inclusion, and grief and healing.

## Research Methods

### Collaborations

I met my three colleagues in 2019 while working for a research project called The Peer2Peer Project (P2P) which was based out of the BC Centre for Disease Control (BCCDC). P2P aimed to “identify, implement, and evaluate peer-led support interventions for peers/experiential workers in overdose response settings” (Peer2Peer (P2P), n.d.). At the time, Amy and Ryan lived in Victoria and worked for SOLID Outreach Society, a peer-based support organization, and Tracy lived in Maple Ridge and worked for RainCity Housing, a non-profit housing agency. They acted as Peer Research Associates (PRA), providing critical direction to P2P through identifying key areas of need and carrying out the interventions we developed. Through providing logistical support to the project, I became well acquainted with Amy, Tracy, and Ryan, and developed close personal relationships with them. When I left my position in August of 2021 to pursue a master’s degree, I knew that I wanted to carry out a project that would somehow benefit them and their communities of peer workers.

I stayed in contact with them as I entered UBC and continued to reflect upon how I could capitalize upon the resources afforded to me in graduate school<sup>10</sup> to create a project which would most effectively benefit the people I worked with. I reflected upon my abilities in dance, visual arts, photography, and videography, and how these could be integrated into my thesis project. During my work with P2P, I did some digital illustration, graphic design, and animation work for the project’s knowledge translation (KT) efforts, some of which garnered thousands of viewers and social media shares (The Peer2Peer Project, n.d.). Given time restraints of a master’s degree,

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<sup>10</sup> I was fortunate to have been awarded the Social Sciences and Humanities Research Council (SSHRC) Canada Graduate Master’s (CGS-M) scholarship which allowed me to consider more resource-intensive work.

my supervisor, Dr. Leslie Robertson suggested the mode of graphic vignettes or comic strips in telling the stories that peers chose to portray, which led me to pursue this project.

I conducted fieldwork based out of Surrey and Maple Ridge, BC between January, and June of 2023. I met with my collaborators for one to two hours at a time either in-person or via online video call.<sup>11</sup> I carried out nine meetings which resembled unstructured interviews with the individual in Maple Ridge, and six with the couple living in Surrey (for fifteen meetings in total). I initially set our meeting day as Thursday, travelling to Surrey in the morning and Maple Ridge in the afternoon; however, this rigid plan dissolved as our schedules became more complex. I made myself available to my colleagues whenever they had time to meet. The in-person meeting venue in Maple Ridge was the CEED Centre, an old Japanese schoolhouse turned charity dedicated to community education on environment and development, and hosting community-building events (About, n.d.). As head of the Maple Ridge Street Outreach Society (MRSOS), my collaborator Tracy has a small office in the building. Most meetings took place virtually with my teammates in Surrey. However, we had two in-person meetings; one at the Central Branch of the Vancouver Public Library, and one in the recreation room in their apartment complex.

Both the way in which the project was coordinated, and the content of our meetings was guided by tenets Participatory Action Research (PAR) in which each step of the research process is co-conceived by all participating parties to produce something that will have a social life among peer workers in the Lower Mainland. More specifically, this approach “deliberately and explicitly” creates space for commentary from participants and negotiation of the entirety of the project from its outset (Lassiter, 2005, p. 16). This welcoming of participation is based upon strong “ethical and moral responsibilities to ethnographic consultants” in which I remain

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<sup>11</sup> Platforms included Zoom, Snapchat video call, and FaceTime.

transparent about all aspect of the fieldwork process in the aim of honouring peers' lived expertise and acting as a channel through which their stories can be amplified (Lassiter, 2008, p. 74). This approach is grounded in a constructivist lens in which I presumed that each participant has a unique mode of contribution as a peer worker and as a contributing collaborator. It is important to note, however, that I established the mode of a comic book at the outset of the project, and therefore it is not entirely reflective of PAR in which peers would be involved in deciding upon the research product. However, I drew upon the tenets of PAR in developing the comic book. My collaborators developed the narratives themselves with little interruption, critique, or interrogation. I respected their decisions to represent these specific scenarios and images via bringing them to life through my illustration.

However, upon starting my fieldwork I quickly became aware of participants' desire for a concrete project structure and defined expectations. As described in my meeting notes from a virtual meeting I had with Amy and Ryan on February 13<sup>th</sup>, 2023:

Amy...told me that she felt nervous after our first meeting together because of how open-ended this project is. She didn't quite know what was expected of her. She said she preferred clarity and structure, but then told me that after this second meeting she is much clearer on what our work together will entail. I told her that she is welcome to Snapchat me or call any time with anything that remains unclear, and that no question is a "dumb" question. I felt badly about this after the conversation wondered, which sent me into a spiral of reflection in which I doubted the efficacy of PAR.

I initially deferred to participants' direction on how they would like the project process to go and what they wanted the final comic book to look like. The guidance I provided at the project's outset was featured on the consent form signed by all participants:

This project involves collaboration with three peer workers living in the Lower Mainland. We will work together to produce a graphic novel (a book made up of a combination of

comics and text), which reflects your approaches and practices of self-care as a peer worker.<sup>12</sup>

This project is collaborative, meaning that you and Sophie work together to build a plan (decide on topics), write the scripts (storylines) and develop the artwork. Potentially, you may be interested to co-write a script during our meetings, contribute your own artwork, do some writing outside of our meetings, record ideas on your phone, meet with other study participants, and /or discuss the on-going project by phone as ideas flow. When finished, we will discuss how you want the graphic novel to be shared and distributed to other peer workers around BC.

Whilst my collaborators approved of this open-ended process as we went through the consent form together, their embrace of this approach dwindled as we began the work. I began to recognize how their engagement was contingent on their comfort in expressing judgement and energetic capacity to take on an additional activity beyond their daily demands. Whilst PAR seeks to “empower affected communities by involving them in defining needs, identifying problems and developing potential solutions”, the approach’s lack of guidance and direction can facilitate stress and discomfort among collaborators (Coupland & Maher, 2005, p. 191).

Abstractly, PAR sounds like the perfect antithesis to top-down projects in which participants are subject to a rigid research agenda and are afforded little decision-making power. However, my collaborators’ location at the intersection of racialization, poverty, substance use, and stigma often complicated their engagement with ventures outside of their usual routines. Additionally, there is a prominent power dynamic between myself and my collaborators which could make it difficult to voice ideas or disagree with my suggestions. My sturdy interpersonal relationships with each one of them and my conscious efforts to mitigate any potential barriers to engagement<sup>13</sup> did not nullify the environment of structural violence within which we are all

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<sup>12</sup> This suggested theme of “approaches and practices of self-care as a peer worker” quickly fell to the wayside as we began collaborating. My colleagues showed more interest in discussing stories about their everyday lives as peers instead.

<sup>13</sup> These conscious efforts included offering several different options for each question I asked to relieve the pressure of coming up with a novel answer, echoing/paraphrasing people’s ideas to aid them in developing their own thought,

located. A critical tension then arises between PAR's values in which collaborators' expertise is honoured and applied, and practice in which too much labour is often placed on their backs (Nygreen, 2009). Shannon Walsh cautions that collaborative arts-based projects are subject to the "dangerous romance of liberalism" in which "letting people speak for themselves" is characterized as the pinnacle of social progression (Walsh, 2016, p. 407). They argue how "voice is not enough" and that more nuanced attention to hidden politics which constrain collaborators from pursuing their desired social change is critical (Walsh, 2016, p. 409). This phenomenon emerged prominently in this research.

Given the parameters of these power relations, collaborators frequently agreed with my suggestions, were apparently indifferent to both the form and process of developing the comic book, and almost universally approved of my artistic and formatting choices. I sensed that my collaborators believed that I knew "best", as they frequently deferred to my judgement. In an example from my first meeting with Tracy on January 26<sup>th</sup>:

Sophie

So, an important question to ask is: Do you want it to have different chapters with different stories or do you want it to all be one story?

Tracy

It doesn't matter. Whatever you'd like.

## My Expectations

Whilst I (naively) hoped that my collaborators would take more of a forefront role in dictating the parameters of the project, I quickly realized that I would have to make many of the artistic decisions. This made sense, as my teammates were each facing significant personal difficulties throughout our engagement and were not already familiar with artistic processes. I

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offering multiple modes of participation such as phone calls, video calls, drawing on their own time, providing descriptions of drawings via voice note, sending me reference images, and drawing in front of them with their direction.

was attentive to the possibility that this comic book project might worsen their stress, and as such started to take more directional control as our collaboration progressed. For instance, Tracy deferred to my artistic abilities as of our first meeting:

Sophie

An important question to ask during our first meeting is are you interested in doing any drawing or does that not really interest you?

Tracy

Yeah, I do my own drawings here and there. And I like the way you draw. You can draw. You do good comics, right? I've seen them. So yeah, I'll just let you do the drawing.

(January 26<sup>th</sup> – meeting transcript)

Prior to meeting with my collaborators, I succumbed to Shannon Walsh's "dangerous romance of liberalism" in which I expected them to adopt a prominent role in directing and producing the comic book. I foolishly interpreted this research to be a project of amplification, or a medium through which peers can exercise their voices. I did not realize that instead, this would be a complex collaborative exercise in which self-representation would only be a small part.

I often worried whether I was authentically and holistically portraying my collaborators' narratives. I was concerned that they were going to harshly critique my illustrations as I often invited their commentary. When I expressed concern about how the research process was going and the visual quality of the comic strips, my collaborators were quick to remind me that they were enjoying the project:

I shared with Amy and Ryan that I have a deep-seated concern of producing a quality comic book that is long enough to make a real impact. Amy immediately responded saying they absolutely love all the comics, and how much they love working with me. (March 2<sup>nd</sup> – Meeting notes)

Amy's response illustrated how my collaborators' relationship with me was of primary importance in fostering openness and comfort throughout the research process. I frequently picked up on the value they derived from their relationship with me in addition to the value they

derived from the project. In this same vein, I noticed that my colleagues were strategically concerned with how to position themselves relative to me. They often oscillated between identifying with my decisions and my work, and at other times, emphatically distinguishing themselves from me. Through positioning themselves as either dedicated employees of an academic research project or as individuals who are morally at odds with any sort of elite institution, my collaborators moved in and out of proximity and distance with me (Fast, 2016).

Prior to beginning the project, I did not explicitly ask my colleagues what their visual expectations were, as I wanted to foster an open-ended dynamic environment in which they did not feel they must fulfill my expectations. The process for developing each comic was slightly different and varied according to our moods, energetic capacities, whether it was earlier or later in the project, and any recent revelations or ideas we had in the week prior. Our decisions on which narratives to represent involved negotiations on our momentary desires, restrictions, expectations, and our worries. As our partnership progressed, I began to realize that rather than being a project in augmenting peer worker voices, our work was an exercise in building inter-subjective meaning.

## Limitations and Challenges

My dual role of ethnographer, illustrator, editor, and acquaintance of my collaborators brought about several challenges. First, and most prominently, the process of illustrating was significantly more laborious and time-consuming than I expected. My initial goal was to have a new comic strip ready each week, but I quickly fell behind on this endeavour. I struggled to maintain a balance between producing quality illustrations which appropriately reflect my colleagues' narratives and moving the project along, given the tight 2-year timeline of an MA degree. Second, meeting with my collaborators required me to spend multiple hours on public



transit as I don't own a vehicle. I tired easily during this work due to long hours on busses and trains, continuous engagement with painful topics, and the daily manual labour of hunching over my iPad. Third, I did not yet have specialized expertise in comic illustration and formatting prior to beginning the project. I had to learn specific techniques using various online resources as I went along which took many hours.

## Creating the Graphic Vignettes

The process of collaborating on the creation of seven graphic vignettes required a great deal of careful reflection, dedicated manual labour, and holistic emotional engagement. The method of illustration with which I engaged was Mendonça's "values-based cartooning", a "social practice" underpinned by six principles: openness and clarity of purpose, self-awareness, listening, observing, emotional engagement, contextual knowledge, representing diverse experiences, and critical thinking (2021, p. 6). This process entails engaging with multiple perspectives, checking back with collaborators, explicitly inviting critique, negotiating conflicting agendas, and engaging with powerful emotions (Mendonça, 2021, p. 5). It requires both advanced digital illustration and facilitation skills, and is therefore limited to practitioners with artistic affinities and strong interpersonal skills (Mendonça, 2018, p. 35). This method was well-received by my collaborators, and they frequently identified differences from other research projects they had been involved in. As featured in the introduction of our comic book:

It has been pretty cool seeing our stories come to life. No one ever really asks us peers what we do, so it is nice to feel listened to. They'll ask you, but they don't really care to hear. This has been more fun than other projects I've been a part of which can be too serious. This process was more laid back and not so stressful (Howell, Amy et al., 2023, p. 3).

This was the first time I had heard peer workers explicitly identify other academic research projects as stressful. The ability of values-based work to elicit honest commentary on the nature of scholarly collaborations was particularly notable to me.

In this section, I will describe the process of developing each of the seven comic strips with my three peer collaborators. I will discuss the conversations from which each narrative arose, their visual choices, their modes of expressing these decisions, their reflections upon themes featured in the comics, how we mitigated collaborative difficulties, and their desired implications for each story. I hope to illustrate the mechanics of participatory, arts-based

collaborations which employ values-based cartooning. I will also suggest improvements which could be made for future projects.

### “#Chaos: Danger in the Workplace” by Amy and Ryan

This comic strip was sparked by a conversation about Thomus Donaghy, a peer worker who was killed during a violent encounter while at work at the St. Paul’s Hospital OPS in July of 2020 (Proctor, 2021). Amy and Ryan initially wanted to develop a comic strip which directly reflects this story to portray the dangers of working as a peer amid increasing rates of street violence. They felt that because it is known to many, non-peers, and peers alike, it would resonate widely and generate a substantial effect. Their personal knowledge on the incident led to a research dialogue about ethics and together we decided not to include a comic strip about it. Without concern or objection, Ryan launched into a detailed description of a new comic strip, frame by frame. I did not interject as he described the imagery and dialogue to be feature in each square:

Ryan took over and said we should depict an interaction in an OPS: 1. Someone, with their sleeves rolled up, has just taken their drug, and they are slightly nodding off. They’re talking to someone in a booth next to them. 2. Them with their head down, where they’ve nodded off completely. 3. Dope and syringe on the counter. 4. Accidentally knocks the dope off the table with his elbow. 5. Wakes up and looks for the dope. 6. “Where the fuck’s my dope?! Did you guys clean up and take my dope?” with hands up high, yelling at peers working at the front desk. 7. Two peers wearing blue gloves, standing, and talking to him: “We don’t have your dope, but if you’re done using you gotta go”. 8. Close-up of an angry face, sweat droplets, 9. Manager comes out and de-escalates the situation. He either gets them outside if they’re not behaving properly or tries to talk them down by relating to them, like calling them “brother”. He highlighted how this puts the manager in a sticky situation but reiterated how this is indeed their job. They usually try not to call the cops, but Ryan wonders if the policy on this either has changed or is different in Vancouver compared to Victoria. Ryan cautioned me how holding grudges can be serious amid “erratic” lifestyles and this can lead to violent encounters. (February 24<sup>th</sup> – Meeting Notes)

Throughout his description, he reflected and identified lessons that he hoped readers would take away. He emphasized the importance of peers identifying potential violence based on

someone's words or body language, as well as to whom it is directed. He described how you can tell something is about to go wrong when someone exhibits mood alteration or drama-scale changing. He described how he often watches Amy have conversations with others to see if it goes in a "weird" direction. They protect each other. This, he says, is critical in mitigating harm. Amy also stressed the importance of self-defence classes and suggested a month-long training for peers in which they learn the dangers of the street and how to protect themselves, especially for women. She said she doesn't go anywhere without certain utensils, even her metal water bottle which she said she can hit someone over the head with – "street survival," she calls it. Additionally, they emphasized having a buddy system for going home, and that peers should plan how they are going to get home.

Overdose prevention sites in the Lower Mainland are increasingly, scenes for violent encounters (J. Boyd et al., 2018). These encounters may be linked to deepening poverty, inequities, intensifying surveillance and regimes of control as well as the arrival of benzodiazepines on the street drug scene. According to some researchers, increase in violence may also be attributed to disruptions in daily routines, worsening financial stress and fewer opportunities to gather and foster community (Hodgkinson & Andresen, 2020; Lersch & Hart, 2022). This makes for especially dangerous environments within which peers work (Daflos, 2023). Because of their often-close relationships with people whom they are supporting, peers may become deeply implicated in their social dynamics and are therefore especially vulnerable to be subject to and/or witness violent attacks. An environment of fear and risk often pervades peer work, which makes it difficult for peers to do their job effectively, especially without proper supports. This vulnerability is amplified for women who are often subject to gendered and

sexualized violence at the intersection of financial disagreements, domestic disputes and survival sex work (Bardwell, Kerr, et al., 2018; Bourgois et al., 2004; Bungay et al., 2010).

Despite extensive discussions on violent encounters as we developed this strip, we chose to only represent the circumstances surrounding a violent event rather than the assault itself:

We had an extensive back-and-forth regarding whether there should be a violent assault depicted in the strip and whether it was necessary to convey the desired message of the comic. We ultimately decided not to because Amy and Ryan felt it would not add anything useful and settled that the length of the strip is appropriate as it is. I agreed with them, as I worried that an explicit depiction of violence might further stigmatize peer workers and I also didn't think that it would add any distinct meaning to the strip. (March 2<sup>nd</sup> – meeting notes)

I knew from the onset of the development of this strip that I did not want to illustrate an attack and I did not feel that it would add anything valuable to the story. However, I deferred to Amy and Ryan's judgement as experts in this experience and felt relieved when their reflections mirrored my own. Although this did not happen in this project, this instance prompted me to reflect upon what I would do if I disagreed with a mode of representation dictated by a collaborator.

During times when I digitally illustrated in Amy and Ryan's presence, I was self-conscious about my drawing speed. I often took out my iPad to draw if they either gestured toward my iPad as they spoke, or if I was unclear on what specific imagery they were describing. Drawing rough pencil sketches on the spot allowed me to elicit their immediate feedback and avoid later wasting time on fully formed drawings which do not reflect their artistic visions. They often offered many complex details on the context within which this violence occurs. I could not keep up with their details whilst manually illustrating with my Apple Pen<sup>14</sup>. The balance between maintaining eye contact, taking notes in the margins of the comic, illustrating

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<sup>14</sup> Pen-shaped device which enables the user to draw on an iPad.

draft images, and maintaining the flow of conversation through paraphrasing and prompting with further questions was immensely difficult. I wanted to honour the details they shared with me in my illustration, while also maintaining efficiency:

Amy and Ryan provided a few minor comments which are recorded in the margins of the comic strip in pencil. I felt stressed because they were providing feedback quickly, and I felt that I couldn't write fast enough. They also frequently switched between strips in their feedback. I worried that I spent too much time with my head down, looking at my iPad, but they didn't seem to mind. (March 2<sup>nd</sup> – Meeting notes)

The development of this strip illustrated how practical concerns, such as my body's mechanical capacity to generate material and developing rapport through engaged listening are of equal importance to higher-level concerns over representation and meaning.

### “Heart to Heart” by Tracy

This comic strip originally took the form of a different narrative entitled “Tough Love Kills” which told the story of a young boy who gets kicked out of his home, begins using drugs, and then eventually dies via an intentional overdose. The idea for this strip arose during a conversation about an overdose Tracy attended where the individual's parent was present. Tracy stated that the parent is “probably the reason he's down there in the first fucking place” and that many parents of people who use substances are “very abusive, intrusive, and controlling” (February 9<sup>th</sup> – meeting notes). She began detailing her tumultuous childhood in which her mother repeatedly broke her trust and subjected her to harsh treatment. This conversation led into several anecdotes about her upbringing, to which I listened intently. As I did often in project meetings, I gently redirected the conversation back to the development of graphic vignettes, reminding Tracy of the broader thematic we were trying to represent and the purpose of the comic book. At first, I felt guilty about doing this as it felt like an invalidation of Tracy's careful reflections on what to share with me. However, this became easier over time:

Sophie

So, back to the family thing. How do you think we could represent that in a comic? So that people would read it and be like, oh my God, that's happened to me?

Tracy

I don't know. I can give you examples. Like...

Sophie

Sure. Yeah, go for it.

Tracy

As peers, as being people that use substances... You know, when you're younger, even at our age, "If I find out you're using... if you're using again, you might as well just get the hell out". That does not help them. Tough love is not the way to go. Tough love kills. You will kill them, they will OD and die, or they will commit suicide and die which they are already doing because of it. There's got to be a way to stick that in the comics, but somehow so that it hits home to people that this can happen. But you know, they're doing tough love and I said don't do tough love. One of the ladies in my choir practiced tough love, and her son committed suicide. And you pay the ultimate price by feeling bad for going that route because people told you to go that route. Right? We tell you not to.

(February 9<sup>th</sup> – Meeting transcript)

Notable in Tracy's description is her identification of the goal of "hitting home to people" through sharing a narrative which she felt would resonate. I reflected upon the repetition of this anti, tough-love narrative and fixation on parental mistakes that I have observed throughout my engagement with people who use drugs in BC. What might Tracy's disapproval be attempting to move toward? Is this story an important one to tell which momentarily keeps them afloat?

Upon beginning to develop this comic strip, I knew in the back of my mind that there would be three central issues: (1) the absence of a peer worker figure, (2) the potential reproduction of stereotypes which victimize people who use illicit substances, and (3) oversimplification of the reasons why someone might turn to drugs. However, I did not intervene immediately because I wanted to give Tracy space to explore the potential storyline without limitations or interruptions. During a committee meeting from March 1<sup>st</sup>, Leslie, Danya

and I discussed ways to complicate the story while centralizing peer workers. I brought up the first concern to Tracy, as I thought it would be the simplest one to address:

Sophie

So, onto the so the tough love one. The main concern with this is because it doesn't directly talk about peers, they're unsure how it's going to fit in with the other ones. Because the ones that Amy and Ryan have done are just about peers. The other ones we've done are just about peers.

Tracy

These people, they go through depression, who do you think they call?

Sophie

Peers?

Tracy

Who do you think they talk to you?

Sophie

Yeah.

Tracy

Okay. And then when our backs are turned, they go and kill themselves. So yeah, it does include peers.

Sophie

Okay.

Tracy

It's just that peers are more elusive in this particular predicament. But we're still there.

Yeah. Because we are certified. Yeah. to counsel people on the street.

Sophie

Yeah. So, it sounds like maybe it's just a matter of including a peer in this.

Tracy

A counselling peer.

(March 9<sup>th</sup> – Meeting transcript)

Tracy was not especially pleased with this suggestion, and her tone suggested irritation. I reflected upon how this direction offered by three people who are not peer workers and do not use illicit substances may have come across as authoritative and potentially condescending. In response, I pivoted the conversation to focus specifically on Tracy's suggestion of including a counselling peer, and asked prompting questions aimed at complicating the original storyline:

Sophie

...it's so hard with comics, because it simplifies a very complicated story, right? So right now, this strip, really centralizes the mum as the evil figure, right? - in causing all of this.



What are some other factors that would contribute other than family, to this person's drug use and being unhoused?

Tracy

Society. The way society treats us through the way they view us. Pointing fingers instead of giving you a helping hand up, thinking you need a handout which you don't, you know, they think that we're asking for everything for free. Well, we're not.

(March 9<sup>th</sup> – Meeting transcript)

Tracy's response to my question prompted a lengthy conversation on safe supply policy in BC which took up the rest of our meeting time. Since we did not have the opportunity to discuss the specifics of how we wanted to change this comic strip, I decided to go ahead and develop a completely new strip before our next meeting to give us some material to discuss. My collaborative role in the project often involved deciding upon when and how to make executive decisions that reflected our critical conversations about content. I went ahead and illustrated a one-page comic strip which represents a peer worker seeking out support through a friend who acts as a peer counsellor in their supportive housing facility. I had witnessed similar interactions in-person and felt that Tracy would likely approve of the storyline because of its representation of peer counselling. I also included a brief remnant of the original comic strip in which the peer seeking support shares that their recent shift triggered an upsetting memory of running away from home as a teenager. In our following meeting, Tracy enthusiastically approved the comic strip and did not offer any suggested changes (March 16<sup>th</sup> – Meeting notes). The slight irritation from our previous meeting had dissipated, and I was glad that I decided to develop the new strip based on their important roles as counsellors. She told me about how these interactions occur frequently, and how the story would likely resonate with other peer workers.

As some scholars suggest, a central way in which peer workers mitigate the emotional distress they experience is by fostering social safety through shared experience (Bardwell, Kerr, et al., 2018; Pauly et al., 2020). Peer workers often refer to each other as a chosen "family," as

many no longer have relationships with their biological families (Pauly et al., 2020). Further, with many peer workers living in transitional or supportive housing facilities, peers who work together often live in the same building. Therefore, interpersonal support is often sought within these buildings. This immediate availability of support is integral to peer workers as they are often reminded of difficult memories and witness traumatic events such as overdoses. These traumatic experiences have been the subject of de-contextualized, academic and media depictions which strip people who use drugs of their representational autonomy and offer little reciprocal benefit to those involved in research (Boilevin et al., 2019). Projects focused on self-representation of peer experiences with dignity and respect and in recognition of relationships of power are integral in resisting these mainstream portrayals (J. Boyd, 2017; Robertson & Culhane, 2005).

### “White Knuckle” by Amy and Ryan

At the beginning of the meeting during which this comic was developed, Amy and Ryan shared how they were struggling financially (March 14<sup>th</sup> – meeting notes). They had trouble finding work due to their various challenges which prevent them from having a “regular” job<sup>15</sup> and their lack of formal work experience. I offered my assistance in different ways; to format and print their resumes, accompany them to potential workplaces, and apply for positions online on their behalf. However, they never asked for my assistance. They worried that, because of their struggles and the unpleasant side effects associated with methadone, they wouldn’t be able to hold a steady job. This led to a conversation on peer worker burnout, and how easy it is for peers

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<sup>15</sup> By this, I think they mean jobs which are suited for people who do not need to use drugs to stay well and are not limited by mental health concerns.

who want to stay sober to fall back into their addictions as a result. Ryan offered a detailed description of a comic strip based on this phenomenon, frame by frame:

A peer is sober for some time then starts to work which causes them to use again and they hide it from their coworkers and partner. The first frame should be two people walking hand in hand through a park. “I’m thinking about going back to work. I think I’m ready.” Partner approves. Show them shaking hands with someone and getting their job back. Amy and Ryan both described how time intervals of threes are particularly relevant for people who use drugs: 3 days, 3 weeks, 3 months... 3 months pass of constantly watching people use, which is especially difficult to witness for those who use IV drugs. The setting should be an OPS to emphasize this. Sitting on the subway on the way home from work, white knuckling close-up. This is them pretending they’re okay and losing hope in themselves. They let themselves into their apartment later at night and sneak around. Their partner turns on the light and says “You’re late. Where were you? What are you doing coming in at 9?”. Then a sweating close-up shot. Shot of them not talking to anyone at work, isolating themselves. This is when we went back and forth over how to end the comic strip. Ryan said that one option gives hope and one takes away hope. Ryan said that “addicts often catastrophize, and things escalate very quickly”. She couldn’t cope because she didn’t take the proper steps to pre-emptively support herself. It is particularly difficult because oftentimes peer workers don’t reach out to other peers for support. This is an uncommon dynamic. She goes to see her boss and asks: “Are there any supports available for me as a peer in this workplace?”. She responds, “Well, do you have a sponsor?”. Ryan suggested representing this as the boss offering their hand out to the peer, or maybe even an olive branch as a metaphorical representation. Show the meeting where everyone is sitting in a circle. (March 14<sup>th</sup> – meeting notes)

Because Amy and Ryan were often very concise and specific about what they wanted the comic strips to look like early on in our meetings, this allowed space for me to probe further about visual details. I asked about what their bedroom should look like, what the sexuality of the couple should be, and in which town this narrative should occur. During each meeting, I was careful not to overextend the energetic capacities of my collaborators, and only delved into these specificities if there was time and I could sense eagerness to discuss further.

Peer workers are particularly susceptible to compassion fatigue, secondary traumatic stress, and burnout (Mamdani et al., 2023). Although peers derive significant satisfaction and a sense of purpose from their positions (Pauly et al., 2020), this work can be emotionally taxing due to repeated exposure to others’ trauma and to substance use if the peer is trying to stay sober

(Bardwell, Kerr, et al., 2018; Declaire, 2018; Kennedy et al., 2019, 2019; Mamdani et al., 2021). Peers don't have access to the same kind of workplace supports or benefits available to other service professionals which cover counselling and paid time off in the event of mental health crises (Greer et al., 2016; Wagner et al., 2013). There is little separation between work life and personal life, as many peers continue to offer support in their off-hours in the same ways they do during their working hours (Greer, 2019). The intersection of these modes of disenfranchisement and marginalization constitute a state of psychic depletion which is a characteristic way of being among peer workers.

### “Surreal Feel” by Amy and Ryan

This story was the first one developed by Amy and Ryan, and much of the process entailed familiarizing ourselves with the mechanics of arts-based collaboration and establishing each of our roles. During the meeting prior, we went over the consent form and broadly discussed the project. In alignment with PAR in which collaborators drive the research process, I established few parameters and began with a simple open-ended question: “What kind of story do you want to be featured in our comic book?”:

Amy told me that she had a clear idea for the first comic but was curious what I needed from her to make this comic come to life. I told her that she could just walk me through the story, and I would take notes as she spoke. (February 13<sup>th</sup> – Meeting notes)

Her question took me by surprise, as I expected her and Ryan to tell me how they would like to develop the visual storyline. I hadn't equipped myself for the possibility that they may want to defer to my visual judgement. However, they seemed satisfied with my answer, and told me that they thought the experience of psychosis might be a good topic for the first comic:

I asked whether they wanted the comic to be about a peer worker supporting someone with psychosis, and Amy initially said no because she wanted this to focus on this individual's experience, but later changed her mind and began discussing the most appropriate ways to include a peer. (February 13<sup>th</sup> – Meeting notes)

The theme of describing stories which did not directly include peer workers was a prominent trend throughout the project. The only rigid thematic parameter established by the consent form was that the stories included must feature peer workers. Therefore, whilst I characterized “off-topic” storylines only as ones which did not feature peers, the subject matter of the strip was open. My approach to this involved reminding my colleagues: 1. Their intended outcome of the comic book<sup>16</sup>, 2. That their comic strips will be featured alongside others’ who are likely to centralize peer workers, and 3. That there are fewer channels which depict peers’ stories as opposed to general stories of people who use drugs. Usually, this was effective in reminding us of our specific focus and intent. However, I struggled to decide upon whether this strategic redirection and refining of focus was wholly reflective of PAR. Does this consist of an invalidation of their original, unfiltered ideas? Was my delivery of this redirection kind and respectful, and how was it received by my colleagues? Could it have been interpreted as reflective of anti-poor and anti-drug user sentiments in which their intellectual processes are denied in the setting of an academic research project? These mechanics of collaboration were an integral point of reflection throughout the project.

This comic strip was sparked by a discussion about Amy’s personal experiences and observations on psychosis, that she eagerly shared:

Amy and Ryan described psychosis as the result of two things: environmental conditioning (i.e., police brutality, constant surveillance, violence often encountered when trying to meet basic needs, culture shock, shame/stigma), and biological factors which alter chemicals in the brain (i.e., consumption of substances, sleep deprivation, sickness, hunger/thirst). Having experienced a long episode of psychosis herself, Amy described how it made her read into subliminal messages, such as feeling that you are on camera anywhere you go. You live in constant fear and anxiety. (February 13<sup>th</sup> – meeting notes)

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<sup>16</sup> “The purpose of this project was to produce comics which, upon reading, other peers can feel *validated* and *recognized* for the hard work they do. Furthermore, it serves to educate those who aren’t peer workers and have room to learn about the experiences of people who use drugs” (*Introduction*).

Without further provocation, Ryan offered a detailed description of what the strip should look like. This description flowed naturally from Amy's description of her lived experience. I noted that Amy and Ryan had little trouble shifting between discussions of their lived experiences and the abstract product of a comic book. They integrated their personal anecdotes and analyses of the topics at hand with remarkable ease:

Ryan suggested that we introduce the character either picking their skin or ground scraping. They should be isolated, with waves coming out of their head and sweating to represent what psychosis feels like. Their eyes should also be distorted, maybe with pins for pupils. We discussed whether we should mention what kind of drug the person is on, and Amy ultimately decided that it isn't necessary as each person's experience with a particular substance is different. Ryan described how those who experience psychosis are awake for days at a time, and are often seen in bent over positions, "contorted" as he called it. The peer should say something like: "how's it going man? Is everything alright?". "The basics of communication", as Ryan called it. The person should respond with what is actually going on in their mind. For instance, they might say: "Oh, there is a camera over in that corner that is recording me". The peer should respond coming from their own experience. Peers know these things and can say something like: "Well, I know from my experience, it helps when I take a break from the drug and then get some sleep. I know somewhere we can go where there are no cameras, wanna come?". The peer can then bring them inside and offer them something to eat, such as a PB&J or a banana. Bananas are a good source of potassium which helps sleep deprivation (February 13<sup>th</sup> – meeting notes).

Psychosis experienced by people who use drugs and who are ill-housed is an underrepresented phenomenon in academic literature. Whilst it is often the subject of sensationalized media representations which characterize the individual as deviant and disorderly, little attention has been paid to the lived experiences of psychosis.<sup>17</sup> Media portrayals of psychoactive substances have shifted overtime alongside changing social, economic, and political interests. Crystal meth has been the subject of a pop culture moral panic in which people who use it are discursively positioned as irrational, ungovernable, and maniacal (Fredrickson et al., 2019). Those

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<sup>17</sup> It is important to note, however, that there are many epidemiological and public health research studies which elucidate lived experiences of psychosis (McCarthy-Jones et al., 2013).

experiencing amphetamine-related psychosis have been positioned as threatening white, middle class morality (Armstrong, 2007).

I shared reflections from a March 1<sup>st</sup> committee meeting during an in-person meeting we had outside the Central Branch of the Vancouver Public Library:

I told Amy and Ryan about my conversation with Leslie and Danya the day before, and they were thrilled that university professors “approved” of their ideas. I shared that the psychosis strip was one of their favourites, which they loved. Based on conversations from our committee meeting, I suggested expanding the strip and making it less simplistic. I cautioned that the strip could be stigmatizing as it is an outsider’s view of psychosis rather than depicting what it feels like for the individual. They suggested illustrating an “Alice in Wonderland” background where the person is falling into quicksand, with one hand into another dimension. They should also have pinhole pupils and a colander on their head. They said they’ve seen this frequently, as people do this to protect themselves against outside forces. They shared a story about a guy they knew who would put red translucent material behind his glasses with the same goal. (March 2<sup>nd</sup> – meeting notes)

I was relieved upon their enthusiastic acceptance of these recommendations and proceeded with renewed confidence in my ability to effectively contribute my reflections throughout our collaboration process.

### “Things You Don’t Need to See” by Tracy

This narrative was sparked by conversation about our weekly meeting location – the CEED centre. We had just completed “The Smiling Awakening” and were ready to create a new comic strip:

Sophie

So, in the past week did you think of... so [The Smiling Awakening] is like the first story. Did you think of any other prominent ones that...

Tracy

Our very first meeting, that MRSOS had, down here, right here. We had just said, “do not use in this building. And if you need to, and it’s urgent that you have to because I get it you get sick. Ask me. Don’t just go in there and lock yourself in.”. When it was over, we were cleaning up, the choir was here. All old ladies that have never done dope. Idiot locked himself in that bathroom. Overdosed. And me and [Jessica]<sup>18</sup> are in there, we are both the same size, and this guy is huge. But I had to keep the door open. I broke the inside frame.

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<sup>18</sup> Pseudonym.

Just the back of the frame. Thank God I kicked right beside the handle. Because we get the broken locks... broken inside. You can't kick it. Basically, we get in here, and her and I both have an arm. We're both leaning all our body weight back to get him off the ground, somewhat. Finally, I said, I'm gonna get the Narcan out. I didn't know this, but she punched him in the face to wake him up. I come back, we Narcan him. That doesn't work. So, she goes to get more Narcan. I punched him in the face. I didn't know she'd already done it. Paramedics show up. It takes three huge paramedics to take him out of that bathroom into this main room. They dropped on his head three times.

(February 2<sup>nd</sup> – Meeting transcript)

I was surprised of the level of detail with which Tracy recited this story. It was clear that she had considered the story in the week leading up to our meeting, and her tone suggested that she was eager to share it with me. I noted Tracy's disapproval of the man's disobedience of the rule not to use drugs in the building. When I asked Tracy what she hoped peer readers would take away from the story, she responded: "Not to do it at a meeting if you're asked not to." (February 2<sup>nd</sup> – meeting transcript). Her first suggestion for the title of this strip was "use listening skills" (February 9<sup>th</sup> – meeting transcript). I was unsettled by the amount of blame placed upon this person, and considered the complex trajectories which may have led this person to ignore the established rule and use alone during the peer meeting. In response, I asked Tracy to come up with several different title options. I reflected upon how PAR also requires my active participation and input, and therefore eagerly approved of Tracy's second title suggestion "Things you don't need to see." The establishment of this title helped redirect the content of the comic strip to feature less individual blame and focus more on the interactions between people who are not marginalized by their drug use and those who are.

We also laboured over the most appropriate conclusion for the story. In the anecdote she shared with me, Tracy was not aware of the specific reactions of the choir members who witnessed the overdose, as she remained with her peer worker colleagues. She theorized that they were inspired by Tracy and her colleague's heroic behaviour:



Sophie

Now, how do we want to finish it? I kind of got stuck. Like, what do you think should be the resolution? We have about three squares left.

Tracy

Sometimes that's what changes people's minds about the way they think about people. To see the overdose and see other peers taking control. Bringing them back to life and doing everything right in front of them. It makes them think differently towards us about how they think towards the homeless or anything because we're actually working for you.

We're saving your kids' lives. You don't even see that, right? So, there's some way you want to incorporate that as your ending. As a way to, lesson learned here kind of thing. Well, these people knew nothing about all of this, they've heard about it, but they didn't never seen it. Once they've seen it, it changed their whole perspective even more. It's a good thing, right?

(February 16<sup>th</sup> – meeting transcript)

Tracy frequently emphasized that she was not particular about my visual choices, and that the portrayal of her identified message was of the utmost importance:

I don't know how to put that, you put it any way you want. And any amount of people I don't care. But the end result, that the end result positive was that we changed their view on things. They were, we made them open their minds and eyes to see. There's no difference between you and me. Right? Simple. It's a life, doesn't matter what walk of life it's still life. (February 16<sup>th</sup> – meeting transcript)

Peer workers do not enjoy the same professional resources afforded to many other workers/employees such as: professional ID cards, formalized policies, job descriptions and contracts, and designated meeting spaces (Bardwell, Anderson, et al., 2018; Mamdani et al., 2022). Therefore, peers must often work with makeshift, improvised arrangements, such as meeting in shared spaces. It is in non-designated spaces primarily, that interactions with people who do not use drugs occur. Exchanges that take place in liminal professional spaces between the “peer world” and the “outside world” illustrate the tensions and inequalities between those who are marginalized by their drug use and those who are not, as well as between those who work in formalized versus informal healthcare settings. By seeing through the eyes of others,

peer workers are reminded of the extent to which their work is traumatizing, and those witnessing the event are reminded of the harms occurring in their backyards.

### “ER 101” by Tracy

This comic strip was inspired by one of the “Compassionate Action” videos created through the Peer2Peer project entitled “Peer workers’ interactions with other professionals” (The Peer2Peer Project, 2020a). Initially, Tracy wanted me to directly illustrate the video, frame by frame. I explained that we couldn’t do this due to copyright regulations and my project requirement to produce original material, which irritated her slightly. She seemed to be concerned mostly about the impact of the comic book and was confused why the source of the stories mattered. This was one of many instances in which academic parameters conflicted with the goals and desires of my collaborators. I suggested that we work on a similar but slightly different storyline. Tracy immediately ran with the suggestion, and leapt into a description of a potential comic strip:

How about a guy overdosed and got hit by a car. Or something like that. A motorbike. Okay, that way there's an injury involved. Now he goes to the hospital. He's out of his overdose, but they won't give him painkillers. Okay, or anything, because that has happened. They won't give anything for his pain. So, what does this guy do? He panics. He gets up and walks out to go find the dope on the street. meanwhile, he's injured very badly. And they're not doing anything about it, is ridiculous. Right? Because they're “enabling us”. Yeah. There's a good scenario.

...

Got a concussion probably got a broken leg somewhere in there. Or femur or something. Right? He's walking out. Why? Needs painkillers. Nobody wants to help him. The only way we can get it and get it good, down the street, even if they give you morphine, they don't even give you what you need. Because your body's already, turns to heroin. If you're already doing like, a ball of heroin a day, okay. You think your itty bitty five milligrams is gonna do shit? No. And that's what they tried to do. Yeah, they go by the gun, The guy's bodyweight won't work anymore, you moron.

(February 16<sup>th</sup> – Meeting transcript)

Pleased that Tracy spontaneously composed a new narrative, I asked how we might include a peer in the story:

Sophie

So, how would we bring a peer into this? Since this book is about peer stories.

Tracy

Right, so now that he's in the hospital. I go with him. You have a peer that comes to the hospital with you because they treat you so badly or have the peer that was there. We have first aid, and we're his... he's our patient. From the time he gets hit until the ambulance arrives. We go to the ambulance, and we go to the hospital with him to advocate.

(February 16<sup>th</sup> – meeting transcript)

This comic strip highlights the life-saving care that peer workers provide and how many of their skills are like those of medically trained, first responders such as paramedics. In addition to illustrating some of their important work, the story shows the treatment that peers face themselves when seeking healthcare. The actions that the two peers carry out in this story while on shift such as calling 911 are the same tasks that they must carry out in their personal lives, both for their loved ones and for themselves.

Oftentimes experiential and medical knowledge systems clash. Tracy shared how unpleasant confrontations with paramedics permeate her personal and professional life:

Sophie

Okay, so you called them and then they hung up on you. And then you had to call them back, and then after that, it took them 45 minutes? That's insane. After someone had just been hit... That's crazy. Yeah, so in the comic strip we have CPR...

Tracy

...and we gotta keep them breathing until the ambulance arrives. CPR until then.

Sophie

And then I also put when the ambulance shows up, they forcefully took over pushing, pushing the peers...

Tracy

Out of the way.

Sophie

...aside. So, did they like actually physically push you?

Tracy

They basically go, “Go, get out, get away, get away!”, and put their arms out, pushing you back. You know what? We got them alive and coherent, you fucking moron. And technically it was my patient because I have the training.

(February 23<sup>rd</sup> – meeting transcript)

Tracy shared how this clash often manifests through the devaluation of peers’ lived expertise. In other words, peer workers can feel like they are not being recognized or valued for the lifesaving work they do:

Sophie

... These are some mean looking paramedics with some sunglasses. Is that accurate?

Tracy

Yeah. lots of them are like that. Yeah, yeah. Yeah. they're getting better. But...

Sophie

Are they getting better?

Tracy

They're totally getting better. Yeah. But it used to be like that. When we first started doing this in the first tent city, they were so mean to us, and they took credit for all of it.

(March 9<sup>th</sup> – meeting transcript)

Interactions between peer workers and first responders, particularly paramedics and police officers, constitute a central difficulty in peer work (Mamdani et al., 2021). Harmful interactions between peer workers and these figures of civic authority are rooted in a pervasive culture of surveillance in which people who use drugs are subject to a regime of control (Collins et al., 2019). This is manifest through increased police presence around OPS, alley patrols, and random searches (Collins et al., 2019). Within interactions with paramedics and other healthcare workers, this regime of control is manifest in judgemental tones, withholding information, and failure to provide proper dosages to manage pain (The Peer2Peer Project, 2020b, 2020a). Furthermore, whilst peer workers are often trained in medical skills such as first aid, CPR, and naloxone administration, much of their skill-set comes from responding to overdoses daily which allows them to develop improvised life-saving strategies (Bardwell, Kerr, et al., 2018). Disconnect

between peers' and emergency responders' modes of communication and response often exacerbates these harmful interactions.

### “The Smiling Awakening” by Tracy

This was the first comic strip created in the series. The story depicted is one that Tracy shared with me prior to us beginning to discuss the peer comic book project during a casual conversation about one of her recent outreach shifts in downtown Maple Ridge. She first walked me through her usual process for responding to someone who is overdosing but has not yet stopped breathing, without administering naloxone:

... Once he opens his eyes I tell him, “Here's a smoke. You want it? Stand up and smoke it! You close your eyes once, I call the cops, got it?”. They don't want you to call the cops. They don't want to go to the hospital, right? So, they're going to try their best to stay the fuck awake. Once you get them moving... and they did get him up and moving for us, once you get him moving, it pumps the blood. If they wouldn't just sit still and while they do their shit, they wouldn't go down so easily. If they keep moving, the blood is pumping... it pumps through your system quicker, and you don't drop right. But they don't think about that, and they just sit there all nice and cozy. You guys, fuck! Slap em' and get them moving. If they move, it'll pump it through the system faster and get it out of them. That half an hour that you have, once naloxone somebody, that's when you try to get them up and moving, right? So once the naloxone wears off, they're not going to drop because it's already gone through the system a little bit, right? You've worn some of it off, right? It's when they drop is because they're not doing anything. They're cold, they're outside. So just sitting there, they do their hit and they're not moving. Easy to die. (January 26<sup>th</sup> – meeting transcript)

I noted Tracy's incredible expertise as she recounted this procedure, as well as her attentiveness in describing the rationale behind each one of her decisions. I felt honoured that she evaluated me as a worthy vessel to transmit her knowledge to. At this early point in the project, I became immersed in my conversations with Tracy and had to remind myself of the research product we were creating together. I was not yet sure of the way in which we would translate these conversations into visual narratives. However, I listened intently, recognizing that active listening and establishing rapport is a key element in our collaborative research process. I asked why a peer worker might not use naloxone:

...I will try to wake them without a needle or without nasal if I can help it. You don't need to do that to them all the time... I don't want to make them sick if I can help it. They're going to be bitchy when they wake up. But if you do it without the naloxone, they're not going to be bitchy... Usually they are annoyed when they first wake up because they don't know they've gone down, and they're dope sick. Because the naloxone makes you dope sick... But like I said, I had the one guy that was just, I didn't use naloxone, and he was just so smiley. It's like, OK, yeah, whatever you did was real good shit. (January 26<sup>th</sup> – meeting transcript)

Naloxone/Narcan<sup>®</sup> is an antidote to opioid overdoses available in both injectable and nasal forms (Province of British Columbia, n.d.). BC's Take-Home Naloxone program was launched in 2012, and in May of 2021 the program reached a total of one million kits shipped to distribution sites (Take Home Naloxone, n.d.). However, uptake of naloxone by pharmacies and local populations varies regionally, and increased availability isn't always commensurate with more people carrying kits (Cressman et al., 2017; Macleod et al., 2021). Reasons for this include stigma related to substance use and carrying a kit, indifference toward overdose, and fear of misrecognizing the need for naloxone and ruining someone's high (Bennett et al., 2020). Peers are often concerned that they are ridding someone of their hard-earned financial investment by using naloxone. Other fears include precipitating withdrawal sickness, fear of arrest, and being outed as someone who uses drugs (Bessen et al., 2019; Bowles & Lankenau, 2019; Kirane et al., 2016; Wagner et al., 2019). Therefore, peer workers tend to exhaust all other options before choosing to use naloxone. Community members have also indicated that naloxone is simply not enough, and they demand a broader, systemic approach to curbing overdose deaths (BC Centre for Disease Control, 2021). Demands include access to a safe and affordable supply of substances, decriminalization of illicit substances, and better training on how to respond to overdoses that cannot be reversed by naloxone (BC Centre for Disease Control, 2021; Bennett et al., 2020).

Tracy's frequent use of humour as she recounted this narrative signalled that she did not want the strip to be lengthy or dark, despite its focus on a near-death situation. With our first meeting quickly ending more quickly than I anticipated, I established that I would translate the narrative Tracy shared with me into a draft comic strip for the following week. Given my longstanding rapport with Tracy, I trusted that I could make preliminary artistic decisions which she would (mostly) approve of. Leaning into my role as a collaborative arts-based researcher for the first time, I said:

Sophie

So, I'll do some drawing of that for next week. Then, we can take a look at it together, and then maybe get started on another chapter.

Tracy

And I'll just write down, jot down little things that we've done and have happened... That'd be cool.

(January 26<sup>th</sup> – meeting transcript)

Two weeks later, we moved onto reviewing a full-colour first draft together. As this was the first strip we developed, I was quite nervous to show it to her. We did not yet have a visual baseline to which we could compare this work, and I was still familiarizing myself with the mechanics of comic illustration through hours of YouTube tutorials and TikTok videos. Two weeks later, I opened our discussion by listing potential changes:

Sophie

So, what do you think about the visuals of this? Anything can be changed? So, like, just for future reference, things that can be changed: the colors, the way people look, the way their eyes look, if you think their expression isn't quite right... Like, even if there's something small where you're like, let's change it.

Tracy

The fun thing was that was without naloxone. That was cool.

Sophie

Yeah. Very cool. Yeah. I think that'll be evident to people because all you did is just knuckle him, right? Yeah. Okay, so we can say, are you comfortable with saying, this is a good, completed comic?

Tracy

Yeah.

Sophie

Okay. And just a little bit of background so the reason why I didn't make it too long is because we want to include like multiple stories. Right? Exactly. So, are you, how do you feel about like the length of it?

Tracy

I think it's good.

(February 9<sup>th</sup> – meeting transcript)

I noted Tracy's wholehearted trust in and approval of the way I visually represented her stories.

This, I came to realize, is a critical component of collaborative arts-based research and is why pre-existing robust relationships between collaborators are so important.



## Knowledge Dissemination

In alignment with PAR methodology, dissemination of the graphic novel was directed by my peer colleagues. Audiences were centrally considered during the development stage. While the book is meant to shed light on peers' unacknowledged experiences working in highly stressful environments, my teammates also expressed a desire for researchers, policymakers, practitioners, healthcare professionals, emergency responders, and government officials to read their stories. As featured in the book's introduction:

For readers who aren't addicts or of the street, some of the stories may trigger something from their past and make them see that we're real people... If you only take one thing away from this comic book, let it be: we are human and no different from you. (Howell, Amy et al., 2023)

The only specific direction I offered when discussing the comic book's audiences was: "Which peer stories do you think need to be told in a comic book format?". Usually, this was enough to provoke development of a potential narrative. Tracy described her intent for the book's impact early in our collaboration process:

We want people to learn from it. And these ones we want other peers to see these comics so that they know that they're not by themselves, they can relate, right? And that's why I said, I was going to ask you, when you print them off, if we could print off some extras, or I'm going to send them to the reserve with the peers down there that are working saving lives, they might be interested in looking at that, because that would have things that maybe they can connect to and go, wait a minute that happened to me, right? They're just little short stories in a small comic book. But they don't have debriefing down there right now. And so, I thought that little things like that would help them right to understand that they're not by themselves, that everything they're going through, we go through everywhere else, trust me. And these little stories help. Because sometimes when you go through something, you know that you're not alone, you know, someone else has, but you feel like you're the only one. Right? And so, when you read it in the book and go, wait a minute, that happened to me, right? you kind of connect better, right? Yeah. So, I'm just thinking maybe that would help. (February 9<sup>th</sup> – Meeting transcript)

The notion of the comic book validating peers' experiences and fostering a sense of solidarity was prominent in my collaborator's reflections. Their firm belief in the tangible impact of these

“little stories” restored faith and resilience in me as I laboured over my iPad into the wee hours of the morning.

I printed out 100 copies using a local printing company<sup>19</sup> which cost roughly \$650. Opening the large box of seamless, freshly printed booklets brought me indescribable satisfaction and pride. I could not wait to share them with my collaborators. Unfortunately, Amy and Ryan fell on some hard times right before copies of the comic book were printed. They were able to review and approve the final draft but did not get to see the final glossy saddle-stitched copies. Therefore, so far only Tracy has been able to participate in discussions on the distribution of our work. I kept a stack of comic books for Amy and Ryan when we connect again.

I met with Tracy on the first sunny day of June outside of the CEED Centre to deliver a heavy Dollarama bag of comic books to her. The unbridled joy on her face when I showed her one of the printed comic books made all our hard work worth it. We immediately began discussing who Tracy would like to distribute the comic books to:

Tracy

I have so many places to hand these out.

Sophie

... So, what are some ideas you have, of where...

Tracy

I'm just gonna walk right into the hospital. [Okay]. I'm trying to have the hospital learn some things. So, I'm not gonna hand it to the desk. Oh, no no no. I'm just gonna walk into the waiting room and throw them on the table so people pick them up. I'm going to go to The Caring Place. And I'm going to drop a couple off... There's doctors' offices around town that I want to walk into, especially OAT doctors. I have pharmacists that come to my building that I would like to give a couple to. And the staff in my building... and I want to go to City Hall... I'm gonna walk in, they have a table in there where you wait to see them. I'm gonna put them on the table. They may not like it when they see my name and go, “hey!”. I don't care. I think this is a wicked idea. And you know what? I think the peers that are on the street out here would really like it. These are awesome. You did such a good job. It went from something quite different from being just a project for school, eh?

(June 1<sup>st</sup> – meeting transcript)

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<sup>19</sup> Clubcard Printing – 868 E Cordova St.

I then asked about Tracy's evaluation of peer versus non-peer audiences:

Sophie

Do you want to give it mostly to people who aren't peers or mostly to peers?

Tracy

I wanna do both. I'm gonna do both. The peers need it. But I think that the people that aren't peers need to see some things because they might... with all the other information that's in here with it, explaining who we are and things like that. I think it might give them a better understanding of what we're doing out there.

(June 1<sup>st</sup> – meeting transcript)

I was thrilled at Tracy's enthusiasm upon seeing a physical copy of the comic book. Her excitement seemed to grow as she listed all the places that she wanted to hand them out to. She seemed intent on communicating her appreciation for my work, and I received it with gratitude. She told me that she wanted each contributor to sign a comic book for each person:

I think that we should have one each that is signed by everybody. And each one of us that worked on it should have one of our own that's signed by each one of us... Later on life, if it did go somewhere... Those people have the original copies that came out of the first series of them, the first shipment of books. I think that would be... I'm a sentimental person that way. (June 1<sup>st</sup> – Meeting transcript)

It was then that I realized that the peer comic book project was not just about creating a product which would have an external impact among peer workers and people who have room to learn about substance use; it is about fostering pride, an opportunity for reflection, and cultivating an artefact of meaning which signifies community, resilience, and tenacity.

Throughout our collaboration process, I noticed that Tracy tended to be more focused on the potential impact of the comic book whilst Amy and Ryan more frequently enjoyed talking about the general topics featured in the strips. For instance, whereas Tracy would often relate her visual and narrative choices back to her desired impact, Amy and Ryan would rarely refer to anyone reading these stories. Instead, they seemed to enjoy the opportunity to discuss the stories and themes featured in the book in detail with me. These different practices demonstrate how

externalizing and representing stories serve diverse functions. I reflected these preferences in my mode of communication with my collaborators and did not hyper-emphasize knowledge dissemination as a central goal of the project. I am curious whether Amy and Ryan will be intent on sharing their copies of the comic book, or if they will prefer to keep these within their circle.

To date, *Peer Life: A Degree in Street Knowledge* is being shared within the BC Centre on Substance Use, the BC Centre for Disease Control, and has been submitted to the Stimulus 2024 drug policy conference in Ottawa. I also plan to apply for community-based arts grants and connect with local news outlets. 100 additional copies are currently in-print after receiving overwhelming interest, and we will continue to distribute them to whomever is interested. The impacts of the peer comic book project have only just begun.

## Conclusions

In this thesis, I have outlined the process of co-developing a series of graphic vignettes which represent stories told by three peer workers living in Surrey and Maple Ridge, BC. Through engaging with tenets of PAR and values-based cartooning in creating comic strips which honour peer workers' lived expertise, I began to explore the nuances of arts-based collaborations with people who use criminalized substances. For my collaborators, this project was an opportunity to reconnect after many years, to see their stories reflected in an artistic format, to generate something they are proud of which they can circulate in their communities, and to reflect upon their daily lives working throughout the overdose crisis. For me, this project was a wobbly initiation into arts-based research, a test of my artistic competence, and the production of the most meaningful creative product to which I have ever contributed.

The “social practice” of values-based cartooning proved to be a potent tool in elucidating reflection and analysis of peers' lives, cultivating solidarity between peers who are marginalized by their drug use and academic researchers who (often) are not, and generating an artistic product which has a social life in our communities (Mendonça, 2018). I advise future researchers who use this method when collaborating with people who use substances to ensure they (1) are well-versed in the specific socio-political context of the people with whom they are working to foster a broader knowledge base from which they can draw when illustrating, (2) are experts in their chosen mode of illustration to ensure ease and efficiency of collaboration, and (3) are familiar with trauma-informed and anti-oppressive practices as they are grappling with the responsibility of ethically representing human suffering. It is therefore only an individual with a diversified skillset that can successfully carry out this work. PAR's process of “deliberately and explicitly” inviting commentary from participants, engaging with and harnessing emotions, and

engaging with multiplicity marries well with these tenets values-based cartooning (Lassiter, 2005, p. 16; Mendonça, 2021, p. 6). The peer comic book project demonstrated how arts-based projects are well-suited to community-based collaborations.

Amy, Tracy, and Ryan carefully reflected upon, analyzed, and translated their experiences working as peers throughout the overdose crisis into coherent comic strips which will be read and appreciated by many. Their processes and developments are a testament to the power of arts-based projects to elicit complex contemplation and generate positive social change personally, within their communities, and beyond.

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