BLACK FEMINIST GEOGRAPHIES OF HARM REDUCTION: RACE, SPACE & THE EMBODIED CONSEQUENCES OF DRUG USE IN SOUTHERN ONTARIO, CANADA

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Abstract

With the dramatic rise in opioid overdose deaths (Toronto Public Health, 2022), harm reduction strategies (e.g., safer use education, supervised consumption sites, overdose prevention sites, naloxone supply and administration, peer support, etc.) are urgently needed (Mercer et al., 2021). Limited studies centre Black women and gender-diverse people and their perspectives, experiences, and critical insights regarding harm reduction and drug-related care (Khentii, 2014; Maynard, 2017). This is especially important because in Canada and the United States drug criminalization continues to repeatedly and disproportionately subject Black women and gender-diverse people to heightened violence (Maynard, 2017; 2020; Tanovich, 2004). Using Southern Ontario as a research site, this study examines the impact of the current policies and legislation that inform harm reduction services in relation to the unique and complex realities of Black women and gender-diverse people. This research is theoretically informed by the work of Black Feminist Geographies (namely McKittrick, 2006; Gilmore, 2002; Roy, 2011) and involved the careful analysis relevant policies and legislation and collection of semi-structured interview data (supplemented with photo elicitation) to understand the lived and living geographies of harm reduction and place-based and embodied resistance practices of Black women and gender-diverse people who use drugs. It argues for solutions to the opioid overdose crisis that target the systems and sources of violence, in lieu of the bodies that stand in place.

Keywords: Black women and gender-diverse people who use drugs, drug decriminalization, health justice, harm reduction, Black feminist geography

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To Palestine and her many Sisters in Struggle,

In the final year of writing this piece, I bore witness to a genocide perpetrated against the people of Gaza by the Zionist, settler-colonial state of Israel. As all the universities in Gaza were bombed and burned down by Israel, I sat and watched as this university not only not only refused to divest from genocide but also sought police intervention to violently prevent its own students from demonstrating their disapproval of our school's complicity. As we continue to recite land acknowledgements in the belly of the empire, I am reminded that universities operate as sites that both birth and quell revolutionary spirits. But thankfully, as the people of Palestine teach us, a university is not the only place in which that spirit is ignited, lived, acted upon, and nurtured. From Turtle Island to Palestine may Allah continue bless that have been taken from their land and have had their land taken from them. May you root yourselves on your rightful land once more. Glory to the martyrs that we do not deserve and victory to the resistance.

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BWGDP	Black women and gender diverse people
CDSA	Controlled Drugs and Substances Act
CTS	Consumption and Treatment Site
PWUD	People who use drugs
TPH	Toronto Public Health
TPS	Toronto Police Service

Chapter 1: Introduction

> What the state or the university or the private contractor working in our financialized present calls care is often continued violence, continued limits placed on Black life, possibility, education, movement, sustenance, and joy. The same instruments used to kill us are imagined as the ones that will save us; saving and killing often look a lot the same as far as Black people are concerned. (Sharpe, 2018, p.175)

1.1 Canada's War on Drugs: The Manufactured Demonization of Blackness

Extant literature has analyzed the criminalization of drug use/possession as a legacy of colonial-racial histories and associated violence enacted upon Black and Indigenous communities (Khenti, 2014; Owusu-Bempah & Luscombe, 2021; Wiese et al., 2023). With most of the Anglo-American work centred upon experiences in the United States, the few studies focused on Canadian contexts similarly demonstrate continuities of slavery via the carceral system (Browne, 2015; Maynard, 2017). Significant to this work are the technologies of surveillance and subordination that were developed and deployed in slavery and that are now reimagined and reinvented through the carceral system. Racialized surveillance is commonly operationalized through the regulation and confinement of Black people through captivity (Browne, 2015). Michelle Alexander (2010) used the term "civic death" to discuss the impact of drug law enforcement on civil liberties and impossibilities of an individual with a criminal record to subsequently vote, rent or mortgage a home, and secure decent employment. It is, as

Alexander (2010) and those who work in this realm describe (e.g., Canadian Drug Policy Coalition, 2013; Maynard, 2017), a form of civic death in that people are largely then stifled and firmly tethered to criminality (Cohen et al., 2022). In this vein, the law is repeatedly approached as a crucial site of analysis—a key or perhaps the key avenue through which Black people are managed, controlled, and contained.[1] I start this thesis by briefly tracing drug laws and police enforcement strategies within the nation now known as Canada. I do so to question the use of law within Canada—occupied territories that continue to inflict colonial violence upon and dispossess Indigenous Peoples—and refer to tools (e.g., laws, discretionary policing) of the settler colonial state to better understand the racial consequences on Black communities.

The use of law to mass incarcerate racialized people is often associated with the 'War on Drugs', a term popularized by the media after the President of the United States, Richard Nixon, declared illicit substances as "public enemy number one" at the Congress on Drug Abuse Prevention and Control on June 17, 1971. Federal drug laws introduced after his declaration sought to discourage drug production, distribution, and consumption. Enforcement however swiftly transpired into a state-sanctioned domestic attack and prosecutorial vengeance on Black people to which Canada is not immune (Khenti, 2014; Drug Policy Coalition, 2013). The now well-studied consequences on the 'War on Drugs' highlight the complex interplay between public policy, social justice, public health, and criminal justice. Drug-related offenses, especially

[1] The violent struggles against white supremacy although unique, are not exclusive to the Black experience. The struggles against white supremacy are global and experienced by Indigenous and non-white people across Turtle Island. While I recognize that the state violence inflicted on Black and Indigenous communities in reference to the drug war are deeply entangled and parallel in many ways, my specific focus will be on the lived experiences of Black people. I fear the conflation of Black and Indigenous struggles within this text will not only provide an incomplete depiction of our lived realities but also our unique demands in pursuit of our liberation. To that end, I encourage and invite readers to further research the violent realities as well as Indigenous resistance to surveillance, criminalization, and colonialism against the War on Drugs.

for non-violent crimes, accelerated rates of incarceration that disproportionately affected African Americans and Hispanics, who faced harsher penalties and higher arrest rates (Maynard, 2020). High incarceration rates disrupted families and destabilized communities across the United States, eroded civil liberties (e.g., stop-and-frisk practices), and resulted in numerous human rights violations (Alexander, 2010). Finally, the financial investment in the 'War on Drugs' diverted needed resources from healthcare, education, etc. (Cohen et al., 2022), limited access to treatment and safe supplies contributed to the spread of diseases such as HIV/AIDS and hepatitis C (Institute for Clinical and Economic Review, 2021) and remains a contentious and evolving issue in American society and politics.

In Canada, the regulation and confinement of Black people was similarly assembled through a manufactured drug war (Khenti, 2014; The Movement for Black Lives [M4BL] Organization, n.d.). Canadian Prime Minister Brian Mulroney (1984-1993) mimetically enacted the first five-year National Drug Strategy in 1987 and signed the United Nations Convention Against Illicit Trafficking in Narcotics and Psychotropic Substances in 1988, which expanded international enforcement. In 1997, the Canadian government passed the C-22: Controlled Drugs and Substances Act (CDSA), which maintained its prohibition stance, despite efforts at the time to legalize cannabis and create more compassionate, evidence-based responses (Canadian Drug Policy Coalition, n.d.).

The CDSA is a federal criminal law enforced throughout the entirety of the nation. By contrast, the power to prosecute is deferred to provincial authorities, and charges/arrests are mediated through municipal police officers, airport personnel, and agencies of border control. To this end, the CDSA federally legislates drug possession, production, and distribution within

Canada. Provincially, the Minister of Public Safety and Emergency Preparedness is responsible for designating municipal police forces that regulate its enforcement (CDSA, 2023; Santini, 2021). Municipally, and specific to Toronto, drug law enforcement is within the jurisdiction of the Toronto Police Service (TPS) (TPS, n.d.). Yet different entities are deputized to orchestrate and execute enforcement, e.g., the Canadian Borders Services Agency Intelligence, the Clandestine Laboratory Unit, the multi-agency Toronto Airport Drug Enforcement, and Street Enforcement, which form one specialized drug unit for TPS (TPS, n.d.). Owusu-Bempah and Luscombe (2021) have demonstrated that this jurisdictional overlap has largely created carceral geographies which depend upon the discretion of local authorities and heightens surveillance of racialized people in their everyday movement and migration through Canadian cities.

Drawing attention to the Downtown Eastside (DTES), a neighbourhood in Vancouver, British Columbia, that is largely concentrated by low-income Black, Indigenous, and People of Colour (BIPOC), Collins et al. (2019) examines place-based law enforcement strategies. The Vancouver Police Department (VPD) use drug laws to rewrite boundaries of the neighbourhood via anti-loitering ordinances and court-ordered restrictions, which prohibit people from re-entering an area of previous arrest (Collins et al., 2019). This is a mechanism of spatial control enacted by the police to effectively eliminate racialized and impoverished people who use drugs (PWUD) from the Downtown Eastside, and effectively block access to safe consumption and support facilities. Criminally, people are punished by the enforcement of the CDSA as well as financially penalized through the use of municipal codes (Collins et al., 2019). Rationalized through a rhetoric of urban ‘revitalization’ (gentrification), Collins et al. (2019) state that the Vancouver Police Department disrupts and destroys a “social hub for many neighbourhood

residents, in that it provides space for income generating activities and socializing, while geographically overlapping with primary drug purchasing and consumption locales" (p. 200). Through this work, one can observe the intricate connection between drug law enforcement and urban revitalization, a connection that is (whether intentionally or not) disproportionately weaponized against racialized, low-income communities.

Socially, the 'War on Drugs' produced a state-sanctioned crusade which further aligned Blackness with criminality, and in doing so, assigned Black people as the collective enemy (Khenti, 2014). Soon after the emergence of Canadian laws, which sought to 'crackdown' on drug-related offences, Indigenous and racialized people became overrepresented in prison due to the mandatory minimum sentence (Khenti, 2014; Rankin et al., 2002). 42 percent of all people admitted into prisons, deemed in violation to Section 6(1): Importing or exporting controlled substances of the CDSA, were Black—even as Black people account for only 2.9 percent of the entire Canadian population (Trinh & Whitehead, 2021). Regarding the racial representation of arrests and charges, an examination of the rates of Black people arrested and charged in Toronto, Ontario, reveals an overwhelming representation of Black women (Wortley & Jung, 2020). In Toronto, Black women are 5.2 times and 1.3 times more likely to obtain a non-cannabis drug possession charge compared to women of other racial groups and white women, respectively. Black women are also subjected to more punitive responses to drug-related offenses in Vancouver, Calgary, Regina, and Ottawa (Owisi-Bempah & Luscombe, 2021). Tanovich (2004) considers the perpetual surveillance of Black people to be a "self-fulfilling prophecy" wherein "over-surveillance, not Black proclivity for crime is the leading factor in the disproportionate arrest" (as cited by Maynard, 2017, p. 87). In 2021, mandatory minimum penalties were deemed

unconstitutional and repealed, which some argue distract from the root causes and circumstances that result in criminalization (see also, Department of Justice, 2016).

Racial disparities in arrest/charge data for drug-related offences in Canada is a consequence of colonial-racial legacies; one that intersects with, and is compounded by, the pathologizing of Black women and gender-diverse (i.e., beyond the two-sex binary) people[2]. The hyper-surveillance and over-policing of Black people through drug criminalization infringes upon their right to bodily autonomy and their right to exist and move freely without fear or threat of intimidation from state authorities (McKittrick, 2006; Maynard, 2017, 2020). Important to this work is the recognition that drug laws and their enforcement maintain the punitive power of the state but not as an aberration. Instead, such trends evidence the continual limiting of Black people, their movement, and access to their own bodies. The next section discusses the gendered aspects of such realities.

1.2. Gendered Drug Policy

Gender-diverse people and women who use or are suspected of using drugs are the unspoken and forgotten casualties in the 'War on Drugs' and are incredibly burdened by the indirect and direct consequences of mass incarceration (Jordan-Zachery, 2008; Levy-Pounds, 2006). The explosion of drug arrests that followed the declaration of the 'War on Drugs' in Canada and the United States resulted in a dramatic loss of poor and racialized men to imprisonment. In Canada and the United States, many women were saddled with the sole financial and emotional responsibility of providing care for themselves and their children, a feat typically accomplished by both parental figures (Boyd et al., 2022; Jordan-Zachery, 2008). For

[2] This study considers Black women and Black gender-diverse people. Any future reference within the text will be written as Black women and gender-diverse people, or in its abbreviated form BWGDP.

the women and gender-diverse people who directly engage in drug trafficking operations, gender-based injustices manifest within the legal system (Uggen et al., 2005 as cited in Lennox, 2011). For example, between 1990 and 2020, in the United States, women were convicted and incarcerated for non-violent drug offences at rates higher than their male counterparts (Lennox, 2011). Lennox (2011) discusses this surge of drug arrests and convictions amongst women as related to judicial attitudes that do not account for gendered-based realities. Goldfarb (2002) explains that most women play subsidiary roles within drug operations yet are punished to the same extent as high-level dealers. Although women participate in the manufacturing, trafficking, distribution, or use criminalized drugs through their own volition, their involvement can also be influenced by the recruitment of a male romantic partner (Goldfarb, 2002; Lennox, 2011; Levy-Pounds, 2006). Coercion, domestic violence, and dependency are often the entry point through which many women are recruited into the drug trade (Goldfarb, 2002). Levy-Pounds (2006) and Goldfarb (2002) write that the continual engagement of women within drug operations can be traced to financial and emotional dependency as well as dependency of women for their personal supply. And so, the 'decision' of women or gender-diverse people (namely trans* people) to participate in drug operations is often limited by intersecting vulnerabilities, which their roles in criminalized drug activities come to reflect. For example, Black women acting as 'drug mules' or couriers responsible for the transportation of drugs across international borders (Maynard, 2017) hold a small but dangerous and "particularly powerless role within drug economies, marked by little financial gain and enormous risk, not only of arrest, but also fatal overdose in stances where an error occurs with drugs that have been swallowed or otherwise stored inside the body" (Maynard, 2017, p. 146). Their subsidiary involvement later denies their ability to harness

the primary avenue through which people evade lengthy sentences, i.e., by serving as an informant.

In Canada and the United States, people criminalized through drug law enforcement are strategically approached and used to gather evidence for the duration of the judicial process. In exchange, informants are offered financial compensation or reduced sentences. The use of informants is so vital to criminal drug trials that, as Newfoundland-based criminal defence attorney, Erin Breen, concedes "[informants become the] bedrock of drug investigations" to the extent that "every drug case, or almost every drug case—particularly large-scale conspiracy cases—are built on the information of confidential informants" (Kelland, 2018, para 13). Although compelling, being a criminal informant is a status that carries unique burdens and is especially difficult to attain as a woman or gender-diverse person (Goldfarb, 2002; Lennox, 2011; Levy-Pounds, 2006; Raeder, 1993). At first glance, the reduced sentence and/or financial compensation offered to people facing drug charges appears to be an easy decision between freedom and imprisonment yet, particularly for women and gender-diverse people, it is more complicated than that (Battaglia, 2015; Levy-Pounds, 2006). Offers to financially compensate or reduce sentences, disadvantages low-level dealers with limited access to information regarding drug operations by assuming that all actors engaged in drug activity are knowledgeable to the same degree (Battaglia, 2015; Levy-Pounds, 2006). Women and gender-diverse people involved in drugs operations are most likely to occupy a subsidiary role (Goldfarb, 2002) and are thereby mostly unable to provide substantial, reliable, and relevant information that would guarantee a reduced sentence (Battaglia, 2015; Lennox, 2011; Levy-Pounds, 2006). The judicial system does not consider gender-based involvement in drug-related offences.

By extension, it is equally troubling that judicial attitudes do not consider the physical, emotional, and financial repercussions of providing incriminating information in relation to other actors—such as romantic partners, involved in drug-related criminal activities—in exchange for a reduced sentence (Brennan, 2021; Cotaina et al., 2022). To understand why some women and gender-diverse people facing criminal drug charges might not cooperate with the authorities, we must articulate the dangers associated with being an informant. For example, women and/or queer feminine people who exchange incriminating information regarding their intimate partner and/or other actors within a drug operation face the threat of physical harm ranging from injury to death (Levy-Pounds, 2006). Put simply, for many women, inclusively defined, the price of freedom from incarceration and financial compensation is either out of reach—due to their lack of substantial information or comes at the cost of severing an emotional connection, loyalty to a romantic partner, consistent financial support, physical safety, or their life. Instead of recognizing the involvement of women within drug operations as the potential result of coercion, or economic, emotional, and physical need, prosecutors lay blame on women and gender-diverse people for their choices. The justice system ultimately ignores (i) how the involvement of women within drug operations makes it so that they do not always have substantial information to provide (Lennox, 2011); (ii) how providing intel about male intimates saddles them with the burden of losing a loved-one and provider to incarceration (Goldfarb, 2002); and (iii) how eligibility for financial compensation or a reduced sentence as an informant systematically tears women further away from justice (Lennox, 2011).

These racial and gendered power differences are further complicated for people who are gender-diverse as the Drug Policy Alliance (DPA) (n.d.) states, “the majority of the criminal

legal system was set up with heterosexual, cisgender men in mind" (para 1). Gender-diverse Black people are particularly vulnerable to police surveillance and incarceration due to suspected drug use (DPA, n.d.). When incarcerated the provision of gender-affirming legal services (e.g., placement in a prison that is reflective of their gender expression) is not guaranteed and increases the possibility of physical violence, rape, and harassment (DPA, n.d.). This gender-based violence is unique to gender-diverse people and extends beyond the carceral system into harm reduction services (Boyd, et al., 2020; Lyons, et al., 2015). Within Canada, Boyd et al., (2020) found that mixed-gender supervised consumption sites "do little to abate the systemic and everyday racialized and gender-based discrimination" (p. 102733). Despite the immense attention to the opioid epidemic, there is limited efforts to centre the perspectives and experiences of Black women and gender-diverse people, as populations differentially impacted by the criminalization of drug use/possession.

1.3. Black Feminist Geographies of Harm Reduction: Overview of Project

Cross (2021) neatly described harm reduction as (i) a state response to drug use (e.g., The Works Program at Toronto Public Health); (ii) a highly localized social movement (e.g., Vancouver Area Network of Drug Users, VANDU, and Drug User Liberation Front, DULF); and (iii) an international human rights-based movement (e.g., Harm Reduction International).[3] In this research, harm reduction is first used to reference the state response to illicit drug use, be it in the form of space (supervised injection/safe consumption sites) or the provision of safe-consumption strategies (e.g., syringe/needle-exchanges, drug-checking services, naloxone

[3] This research is founded empirically and communally supported evidence by PWUD that harm reduction is indeed a life sustaining service made possible through drug users' ability to access and use clean drugs and drug supplies (e.g., NARCAN, unused syringes and pipes, etc.) (Mercer et al., 2021; Vancouver Area Network of Drug Use, nd.).

training, mobile outreach, etc.). Harm reduction in this sense is different from strictly abstinence-based approaches to potentially harmful activities. Despite the international movement to prioritize harm reduction via rights-based and evidence-informed policies, in Canada, criminal prohibition is still the primary approach to addressing drug use/possession which, as extant studies suggest, results in the under-protection and over-policing of racialized people (Khenti, 2014; Department of Justice, 2021). Criminal prohibition is in direct tension with harm reduction approaches that seek to maintain the safety and dignity of drug users, and few studies examine this tension from the perspectives and experiences of Black women and gender-diverse people who use drugs in Canada. At the same time, decriminalization of certain drug activities and the introduction of harm reduction strategies continues to be a focal point of the political debate, as political parties remain divided on the appropriate remedies to address the national opioid epidemic caused by the toxic drug crisis.[4]

Prior to the pandemic, we can observe in Toronto a relatively stable number of opioid-related deaths reported annually (Krishnan & Rukavina, 2020). Yet, the number of people who died from an opioid-related cause in 2020 and 2021 was 539 and 511, respectively: a 74 percent increase from the year 2019 and 273 percent increase from 2015. The number of opioid-related deaths is continuing to rise in Toronto (Toronto Public Health (TPH), 2023; TPH, 2022). Toronto, as the largest city Canada, housing over 30 percent of the national population, is thus a pivotal site to examine current trends and enforcement strategies.

[4] For example, effective January 31, 2023, to January 31, 2026, British Columbia decriminalized possessing certain amounts of illegal drugs most common within the toxic drug supply for adult, personal use (i.e., cumulatively possessing more than 2.5 grams of opioids [e.g., heroin or fentanyl], cocaine, methamphetamines, and MDMA for people 18 and older).

In the next chapter, I focus on Black feminist scholars who anchor this project and the numerous curiosities their scholarship continuously inspires. Their work inspires the need to critically examine the impacts of drug criminalization in Canada (e.g., the enforcement of C-22: Controlled Drugs and Substances Act, enacted in 1996) on the spaces/places and bodies of Black women and gender-diverse people, exclusively. I introduce the request of Canadian cities, specifically Toronto, to temporarily decriminalize the possession of controlled substances for personal use. I do this to better understand the *de facto* (informal, non-legislative) and *de jure* (formal policy, legislative) mechanisms that regulate substance use in Southern Ontario. I am curious about the ways in which de facto and de jure approaches are lived and encountered in the everyday, and the lived and living geographies that such approaches create, particularly for Black women and gender-diverse people who use drugs.

In chapter 3, I overview the methodology and theoretical commitments of this study. The first section details the theoretical framework, namely the work of Black feminist scholars (especially the work of Davis, 2003; Hartman 2019) and geographers (especially the work of McKittrick, 2006; Gilmore, 2002). The theoretical framework is premised on the assertion that Black geographies provide the protean context from which anti-colonial, anti-capitalist social transformation can be realized. As such, analyses are never intended to keep people in place, but rather recognize their agency and potential lines of flight. Data collection involved (i) the careful collection and analysis of relevant documents produced by and/or distributed within harm reduction spaces/places withn Southern Ontario as well as relevant federal and provincial laws and municipal codes, and (ii) semi-structured interviews supported by photovoice elicitation with six Black and/or gender-diverse people who use drugs and/or work in harm reduction (see also

Oudshoorn et al., 2021; Riessman, 2008). The semi-structured interview guide was refined through the document analysis. Interview data were transcribed and then, closely read and studied before categories were developed through a process of open-coding. Through open-coding, I refined and simultaneously saturated categories that then formed key themes (Creswell & Poth, 2017). I concluded the methodology with a brief comment on my own positionality and desire to use this work to benefit those directly involved in the process. This work would not have been possible without the close collaboration with Black women and gender-diverse people who use drugs as well as the outreach workers that generously volunteered their time and critical insights. I am hopeful that this work can lend to more evidenced-based approaches and help shift cultural sensibilities related to substance use to better recognize systems and sources of violence in Canada.

In chapter 4, "'Oh, you're treating me like a black person': On Race, Drug Law, And Harm Reduction," I devote time to the document analysis and pay particular attention to the law; especially laws and municipal codes used in Southern Ontario to regulate access to life affirming care for Black women and gender-diverse people who use drugs. I direct our attention to the Consumption and Treatment Services Compliance and Enforcement Protocol (Ministry of Health, 2021) currently in effect in Ontario and problematize the surveillance and extensive data collection practices required by its funding model. I then explore its implications on the care provided to Black and gender-diverse people who use drugs. I end this chapter with careful consideration of the innovative and alternative pathways created by Black women and gender-diverse people and needed to survive in the absence of adequate care services and harm reduction in the province.

Chapter 5, “Narratives of Life-Making: Drugs as Harm Reduction” further elaborates on the life-making practices created and adopted by Black women and gender-diverse people who use drugs. I speak to how drugs can operate as an alternative path for self-discovery and pleasure. I leave this chapter discussing the care and control offered by state authorities as informing the resistance strategies and networks of mutual aid and care created by Black women and gender-diverse people.

Finally, in the conclusion, I end with a call to step away from the paternalistic, over-surveillant, and rigid approaches to harm reduction, and emphasizing the critical perspectives of grassroots community groups. I lean on the participants—all of whom co-created the knowledge found in this research—to explore the possibilities and limits of care that prioritize Black life beyond logics of incarceration. I conclude with thoughts on future drug law reform that, as best as possible, attempts to account for the interests and priorities of the research participants involved in this project.

Chapter 2: Literature Review

> Abolition geography starts from the homely premise that freedom is a place.
>
> (Gilmore, 2017, p. 227)

This chapter is composed of three separate sections, each one builds on the next, and attempts to demonstrate the commitments to anti-Black racism in Canada via drug criminalization. To understand the lived and living legacies of Canadian anti-blackness, I first explore the body as an often-overlooked geography. In the second section, I overview literatures that examine the spatial consequences of drug criminalization as experienced by Black women and gender-diverse people, lived and expressed as a form of everyday containment. I then move to examine literatures that move beyond the oppressive consequences of drug legislation and state-imposed harm reduction, and its propensity to perpetuate geographies of anti-blackness, containment and gender oppression in Canada, to discuss the ways in which Black women and gender-diverse people continue to survive oppressive forces. I conclude with a gesture towards the possibilities for change as demonstrated at the local level yet often overlooked in more mainstream coverage of the opioid crisis, and broader conversations on tough(er) criminal sanctions.

2.1. "Police stay on us like tattoos": The Body as Geography[5]

[5] I reference Lil Kim (Kimberly Jones) and her "Lighters Up" single. In this song, Jones (2006) challenges socioeconomic and political state powers, rapping: "Police stay on us like tattoos, niggas only grind 'cuz we have to, money is power, sling crack, weed and powder" to rationalize the need of so many people to engage in the illegal drug trade. Music in many ways, and hip-hop especially is reflective of the Black experience. Music has guided so much of this work and so I would be remiss to not have any traces of it woven through this work. To answer the question of Redmond and Phillips (2017) who ask, "what do you hear when we say, 'Black Radical Tradition'?" (p. 206), I hear the voices of Black artists like Lil Kim, I hear these lyrics as anthems of freedom, and I see the prophetic images their pen draws along with all the hurt and hope their voice carries.

In 1994, Former President of Domestic Affairs John Ehrlichman revealed a significant motivation for the 'War on Drugs' in the United States:

> We knew we couldn't make it illegal to be either against the war or black, but by getting the public to associate the hippies with marijuana and blacks with heroin, and then criminalizing both heavily, we could disrupt those communities . . . arrest their leaders, raid their homes, break up their meetings, and vilify them night after night on the evening news. Did we know we were lying about drugs? Of course, we did. (Ehrlichman in Baum, 2016)

In his admission, Ehrlichman confirmed that the 'war on drugs' was manufactured to immobilize and dismantle both Black communities and political ideologies nonconductive to capitalist advancement. The state politically and ideologically tethered blackness and political dissent (articulated as communism) to drug use and societal degradation. This anti-Black rhetoric reverberated amongst federal, state, and eventual municipal enforcement strategies and dictated police actions against racialized communities (McKittrick, 2011; Wortley & Jung, 2020). The inherent racial biases of such policies and related enforcement strategies further ascribed blackness to crime and legitimated efforts that spatially contained and increased surveillance amongst predominately Black communities (Gordon, 2017; Khenti, 2014; Maynard, 2020).

In Canada, drug laws were similarly resourced to spatially manage blackness (Maynard, 2017) and further legitimate anti-Black violence and bondage (McKittrick, 2011; Walcott, 2021a, 2021b). In their report on the Racial Disparity in Arrests and Charges, Wortley and Jung (2020) highlight the disproportionate representation of Black Ontarians in cannabis and other illegal substance possession charges and arrests as compared to white and other racial minorities.

Representing only 8.8 percent of the population in the Greater Toronto Area, Black Torontonians account for 21.5 percent of the "cases involving a single charge of 'other' illegal drugs" (Wortley & Jung, 2020, p. 26). More generally, the charge and conviction rate for Black Torontonians is 7.1 and 3.9 times higher than other racial minorities and white people, respectively (Wortley & Jung, 2020). Such statistical data highlights the consequence of a legal system that is empowered to arbitrate the movement of Black people; controlling, through modernized bondage (i.e., the prison system), the underdevelopment of Black people and broader communities, and firmly establishing blackness as a reprehensible (criminalizable) diversion to the white colonial state (Massey, 1994; McKittrick, 2011).

Geographer Ruth Wilson Gilmore has examined the geographies of racial capitalism and describes the alarmingly high rates of incarceration and imprisonment of Black people as an extractive process that is able to combine place, poverty, and racial violence with future and continual profitability (see also Berman 1987; Graham 2004; McKittrick, 2011). To quote Gilmore (2017, p. 227),

> Understanding bodies as places, then criminalization transforms individuals into tiny territories primed for extractive activity to unfold—extracting and extracting again time from the territories of selves. This process opens a hole in life, furthering, perhaps to our surprise, the annihilation of space and time … the extractive process brings the mechanics of contemporary imperialism to mind: extraction.

Positioning blackness as perilous and criminal, functions to erode Black senses of place and renders Black people in need of spatial management. Tiny territories, for Gilmore (2017), then

describes the isolation from society, isolation from community, and isolation from oneself through criminalization. Tiny territories dehumanize Black people, their bodies; further connecting Black life to prison life. York University alumni, Katherine McKittrick (2011) describes the prison as an extension of plantation logics, crediting enslavement as creating the blueprint for urbicidal geographies and perpetual state punishment. The next section expands upon this work, further establishing the connection between the prison and plantation, demonstrating the spatial management afforded by the state through drug criminalization.

2.2. "Police partout, justice nulle part": The Spatial Management of Black Canadian Women and Gender-Diverse People who use Drugs[6]

Black feminist legal geographies prioritize the relation between law, space, and racial-gendered violence. This section is focused upon the use of law to spatially organize wayward Black lives. In her book, *Wayward Lives, Beautiful Experiments: Intimate Histories of Social Upheaval*, Saidiya Hartman (2019) describes being wayward as "the untiring practice of trying to live when you were never meant to survive" (p. 228), specifically in reference to "those often described as promiscuous, reckless, wild, and wayward" (xiv). Wayward in this project is approached as a counternarrative to the historically debased Black substance users and drug offenders. While borrowing from Hartman (2019), I would like to also add a spatial dimension to waywardness, in that it is the practice of living not only when, but also, *where* survival is intentionally made difficult. Her work speaks especially to the militancy and resistance of Black people to live in defiance against the continued limits impinged upon their everyday being. Spatial division begins at the (social and spatial) exclusion of Black women and gendered-

[6] "Police partout, justice nulle part" is an excerpt from a speech delivered in the 19th century by Victor Hugo to the Legislative Assembly of France which translates to "Police everywhere, justice nowhere".

diverse people from dominant institutions and cultural spaces of everyday life; an exclusion that renders alternative or peripheral spaces/places as more susceptible to state-sanctioned violence (McKittrick, 2006). Black feminist studies, which account for intersectional approaches and recognize queer feminine identities, allow me to understand rigid identity categories (e.g., binary sex system, cisgender, heteronormativity) as equally constitutive of anti-Black geographies. That is, for the wayward Black masses, spatial violence manifests in the form of violent displacement, bondage, and surveillance—limiting access to certain spaces/places but also to one's own body and desired intimacies.

It is in this analysis of physical and cultural landscapes that Walcott (2021b) points to the plantation as the producer of our current model of society writing that "how cities are organized, who is valued, and so much more … the plantation has not gone away but rather diffused, shaping innumerable aspects of modern life" (p. 17). Western constructions of space and place are underwritten by legacies of racial dispossession in which Black and Brown people are marked as 'surplus' and 'ungeographic' (McKittrick, 2006; 2011). McKittrick (2011) extends the work of Gilmore (2007) adding that prisons not only contribute to the spatial management and racial violence of Black communities but also as "logical extensions of the plantation" (p. 956). It was McKittrick (2011) who stated that "the annihilation of black geographies in the Americas is deeply connected to an economy of race, and this capitalism, wherein the process of uneven development calcifies the seemingly natural links between blackness, underdevelopment, poverty" (p. 951). To McKittrick (2011), present-day Black geographies including spatialities of containment are extensions of the historic conditions of bondage from the plantation. The *Demonic Grounds* author writes "the plantation evidences an uneven colonial-racial economy

that, while differently articulated across time and place, legalized black placelessness and constraint" (McKittrick, 2011, p. 948). To understand the legacy of race and colonial histories of bondage in North America, I lean on Smallwood (2007) who writes "the Atlantic market for slaves changed what it meant to be a socially, politically, or economically marginalized person … Captivity … was not a temporary status … not [a situation] of extreme alienation within the community but rather of absolute exclusion from any community" (p. 30).

State-imposed regimes of containment through enslavement, then, and incarceration, now, operate as the "geographical solution" to uphold the "absolute exclusion" of the Black community (Gilmore, 2002, p. 16). Drug laws, in this view, create a terrain of oppression infringing upon Black people's ability to exist free of criminalization within society. When considering the structural harms inflicted on Black women in particular, Wortley and Jung (2020) make it clear that Blackness serves as the key feature that gives direction to drug regulation, reporting that Black women are more likely to be charged and convicted by the Toronto Police Service compared to women of other racial minorities and white women. The cost of these harshly punitive measures disproportionately inflicted upon Black women have not worked to diminish the availability and distribution of drugs—and the presence of a particularly lethal, toxic drug supply. Instead, Canadian drug laws have ultimately increased the imprisonment of Black people (Tanovich, 2006; Khenti, 2014). Prior to opting to no longer preside over drug cases, Judge Weinstein of New York described the task of sentencing a Black woman caught smuggling heroin as 'dirty work' stating that she was trapped by her race and gender adding, "I need rest from the oppressive sense of futility that these drug cases leave … I simply cannot sentence another impoverished person whose destruction has no discernible effect

on the drug trade … I am just a tired old judge who has temporarily filled his quota of remorselessness" (Lawrence & Williams, 2006, p. 331). The zealous use of drug laws and punitive policing of Black spaces/places and bodies allows for the repeated relation between blackness and criminality in public debate.

Beyond the legal system and political landscapes, strategies of containment are reinforced by negative public perceptions of crime and substance use. In this respect, it is helpful to consider the work of Soyjoyner (2017) on the narrative of choice and time, used to extend the suffering of wayward Black lives. Turning to popular expressions "you do the crime, you pay the time," and notions of "following the wrong path," Soyjoyner (2017) demonstrates that calls for "tough love" or to "just say no" are extensions of systems that allow publics to divorce themselves from perilous structural conditions. In this way, the demonization of prohibited substances extends to the substance user thereby rationalizing drug interdiction and harsh penal practices (Lawrence & Williams, 2006; Khenti, 2014). The prevailing choice narrative renders drug offenders and substance users in need of governing. For example, there are active campaigns that aim to deter the opening of supervised consumption sites with current Premier Doug Ford stating that he is "dead against" supervised injections sites, investing instead in strategies to prevent opioid abuse (The Canadian Press, 2018). While it is important to have drug rehabilitation and abstinence-based programs in place, the current strategy used to address the ongoing opioid crisis in Ontario, limits harm reduction centres and ancillary services, and fails to curtail harmful consequences (e.g., increased risk of drug overdose, disease transmission, rushed injections, and drug poisoning) (Collins et al., 2019). Through this work, I hope to add to evidence-based approaches that ultimately aim to inform popular sensibilities, ideologies, and

associated geographies. As McKittrick (2006) reminds us: geography is alterable, writing: "importantly, the real and imaginary geographic processes important to black women are not just about limitations, captivities, and erasures; they are also about everyday contestations, philosophical demands, and the possibilities the production of space can engender for subaltern subjects" (McKittrick, 206, p.122). In the final section of this chapter, I explore alternative imaginaries and contemporary practices of resistance that feature compassionate harm reduction interventions beyond harshly punitive measures.

2.3. "A Different Future": Black Feminist Solidarities and Resistance in Canada

> How you get closer to love?
>
> How you lemonade all your sadness when you openin' up?
>
> How you make excuses for billionaire you broke on the bus?
>
> I need niggas around me rollin' and smokin' me up
>
> Because, because a rainforest cries (cries)
>
> Everybody dies a little
>
> And I just want to dance tonight
>
> Noname (Warner, 2021)

I open this section with a question by McKittrick (2017) that guides the writing: "if the plantation, at least in part, ushered in how and where we live now, and thus contributes to the racial contours of uneven geographies, how might we give it a different future?". The different future in question, I believe, exists both as a possibility and reality. I start with tangible examples of resistance that exist today as in the past. For this, I turn briefly to the Vancouver Area Network of Drug Users (VANDU) and Drug User Liberation Front (DULF) which are existing

insurgent groups of former and current drug users' leading Vancouver's drug user liberation movement. Together, VANDU and DULF stand for "the right to obtain, prepare, and ingest drugs, and to be intoxicated on drugs, according to our own personal decisions without criminalization or unsought interference from other individuals or organizations, as long as our drug use does not directly harm other people" (VANDU, n.d.). Central to this study, is their rejection of power dimensions that create uneven geographies, arguing that to realize a world in which people can freely and safely engage in drug use, it is necessary to end the stigma surrounding drug use and the criminalization of drugs, entirely. Further, they call for the regulation of the lethal toxic drug supply, the right to a dignified life in the form of housing, safe neighbourhoods, liveable wages, transportation, access to clean water and nutritious food for all, citing "criminalization, poverty and a lack of power [as] the fundamental problems facing our community" (VANDU, n.d.) and describe the movement as comprised of survivors of the drug war.

I connect their place-based activism to the work of Saidiya Hartman (1997) who states that "the brutal exercise of power … gave form to resistance" (p. 62). A very clear example of the type of resistance performed by VANDU and DULF is their active fight against the "Vancouver Model" which does not incorporate realistic thresholds (i.e., quantity limits for drug-related offenses) and instead, promotes the ongoing surveillance, harassment, and incarceration of drug users. Currently, the cumulative threshold is less than 2.5 grams of cocaine, methamphetamines, opioids, MDMA (ecstasy) (Shane, 2023). VANDU (n.d.) and PIVOT Legal (2023) argue that this threshold should be increased to eliminate potential abuses of police discretion, particularly exacerbated against marginalized people. The call to decriminalize drug

possession, distribution, and consumption is not unique to VANDU and DULF. Ruth Wilson Gilmore (2007) wrote on Mothers Reclaiming Our Children (ROC), using their activism as a model for challenging the mass incarceration of young Black men that resulted from drug criminalization. ROC is known for their strategies of public protest as well as everyday legal justice work (i.e., attending hearings, giving talks, hosting legal clinics, leaflet campaigns, etc.) (Gilmore, 2014). With ROC, VANDU and DULF, the fight for decriminalization is tightly tied to demands for the rights to the city to be recognized. As Isoke (2013) writes, "Black women's resistance politics involves … undoing the harsh material conditions of existence and envisioning and creating a new terrain of politics that extends from the self-outward. The politics are realized time and again by reconfiguring the spatiality of self, home, and community" (p. 4-5). To such an extent, the calls to decriminalize drug use/possession are tethered to legal geographies of cities, but also the body as an often-neglected scale, or site of analysis, through which place-based resistances cannot be fought without.

In working through future possibilities and imaginaries, I am inspired by abolitionist approaches which consider alternatives to this carceral present. Angela Davis (2003) is instrumental in this respect. Davis' (2003) scholar-activism remains committed to futurities beyond incarceration and urges us to "let go of the desire to discover one single alternative system of punishment that would occupy the same footprint as the prison system" (p. 106). Within the context of drug decriminalization, this necessitates the radical transformation of the rest of society into vehicles of decarceration and requires an investment in the dignity and health of all as articulated in the activisms of VANDU and DULF in Canada. Using alcohol prohibition as an example, Davis (2003) demonstrates decriminalization as a significant and positive action

which effectively reduced the disproportionate and discriminatory incarceration rates within Black communities. As another example, Portugal reversed their punitive drug measures and became the first country in the world to decriminalize drugs (Bajekal, 2018). Since then, the country has witnessed a dramatic decrease in overall drug-induced deaths, at a rate that is five times lower than the European average; a decrease in drug use in people ages 15–24 years old; and decreased HIV infection rates from compromised needles (Bajekal, 2018). While Portugal can and should be used as a model to address ongoing opioid crises elsewhere, we must also consider the unique and highly localized histories of gendered, racial, classed, and colonial violence that underpins this contemporary crisis in Canada. People subjected to intersectional violence should be at the forefront of future advocacy. The next chapter overviews the research design, which centres the voices, experiences, and perspectives of Black women and gender-diverse people who use drugs in Southern Ontario. The chapter begins with an overview of Black feminist legal geographies, the theoretical and methodological framework for this project, followed by a discussion of my research objectives, questions, and methods of data collection and analysis. I end the chapter with an exploration of my own positionality.

Chapter 3: Black Legal Geographies: Theory & Method

> A geographical imperative lies at the heart of every struggle for social justice; if justice is embodied, it is then therefore always spatial, which is to say, part of a process of making a place. For researchers, purpose and method determine whether one reifies race and state—chasing down fetishes—or, rather, discovers dynamic processes that renovate race and state. (Gilmore, 2002, p. 16)

3.1. Theory & Methodology: Black Feminist Legal Geographies

As outlined in the literature review, I situate my work at the nexus of Black feminism, legal studies, and human geography. Employing Black feminist legal geographies offers the methodological framework required to conduct a rigorous research project that grasps the racial, gendered, and colonial systems of oppression that shape Canada. To build a theoretical framework of Black geographies and methodologies, I called upon the scholarly work of Ruth Wilson Gilmore, Sylvia Wynter, Katherine McKittrick, and Anaya Roy. Central to their scholar-activism is the interrogation of gendered and racial systems and sources of violence, with emphasis on alternative geographies of resistance and freedom (McKittrick, 2006; Wynter & McKittrick, 2015). As McKittrick (2011) writes, Black geographies are attentive to "histories of colonialism, transatlantic slavery, contemporary practices of racism, and resistances to white supremacy" (p. 947). Gilmore (2002) and McKittrick (2011) help me understand the construction of urban geographies as the reification or concretization of racial and gendered hierarchies. In other words, the markings of humans as Man, selected against the other (e.g., les damnés/dispossessed/the

racially inferiorized negro) is cemented within space, to inform our human experiences of spatial geography (Wynter & McKittrick, 2015; Fanon, 1961; Tuan, 1977).[7]

Methodologically, Black feminist geographies compel me to consider how sustaining practices of anti-Black and gendered violence are shaped by the state and connected to geographic desires and opportunities (Bledsoe, 2021). This study is interested in interrogating the social problem that rationalized and legitimated the 'War on Drugs' and its attendant geographies (i.e., criminalization, state surveillance, incarceration) or as McKittrick (2017) remarks at the *2017 Feminist Theory Workshop,* "solving crimes often involved surveilling and marking black and/or impoverished geographies and claiming that this is not profiling because places, rather than people are being targeted" (May 8). Studies which employ a different theoretical frame have explored the role of harm reduction in major metropolitan cities. For example, Obrecht (2021) uses a Foucauldian analysis of governmentality to describe overdose prevention sites as state-building projects in Philadelphia that not only shape and regulate drug use but more importantly control the mobility, displacement, and space occupied by the 'dispossessed' drug user. It is important to consider that while the state spatially orders the city, 'race' and 'gender' continue to be categories used to justify such orderings. Even still, such orderings remain alterable, suspect, or altogether a façade. Black feminist geographic methodologies urge us to consider how "can Black women's geographies also open up the possibility to rethink, and therefore respatialize, our present sociogeographic organization?" (McKittrick, 2006, p.122). Sylvia Wynter, Katherine McKittrick,

[7] Here, I also call attention to the work of Frantz Fanon (1961) and the Manichean organization of the colonial world, in which human beings are divided: with the white settler's self-characterization as the normative 'man' and the Black native/wretched/damnés defined against it.

Ruth Wilson Gilmore, uniquely call me to take serious Black feminist geographies, its presents, and its futures—particularly for Black women and gender-diverse PWUD.

As McKittrick (2021) offers in *Dear Science: A Guide to the Intersection of Science, Art, and Politics*, scientific knowledge intersects with cultural, artistic, and political domains. Science is not just a set of objective facts but is deeply embedded in and influenced by social contexts, including race, gender, and colonialism. Through this I understand that scientific practices and concepts can both reflect and perpetuate power dynamics and how art and cultural expressions can critique and reframe scientific understandings. McKittrick's (2021) work is a critique of the traditional view of science as a purely objective and neutral pursuit. Instead, the *Dear Science* author emphasizes the need to understand science as a practice that is shaped by and shapes cultural and political conditions. By engaging with various forms of knowledge and representation, McKittrick (2021) invites readers to consider how scientific knowledge is produced and how it can be reimagined to address social injustices and promote more equitable and inclusive perspectives. Following McKittrick's (2021) work, or Black feminist geographies more broadly (as a theoretical framework) I was focused on the spatial dimensions of racialized and gendered experiences, the impact of historical and contemporary structures of oppression on space and place, and the ways in which Black women and gender diverse people lived experiences shape and are shaped by geographical contexts. Methodologically then, Black feminist geographies called me to employ participatory and community-based research approaches (further explored in section *3.4*) that centre the voices and experiences of Black women and other marginalized communities, ensuring that the research process is respectful and responsive to the communities studies but also aiming to uncover and address spatial inequalities and injustices experienced by Black women and

other marginalized groups—and ultimately empower marginalized voices and work to transform oppressive spatial and social structures.

To Black feminist geographies, I also include the work of Ananya Roy (2011) to emphasize subaltern geographies and consider the everyday, subversive ways in which Black spatial futurities—and in turn, cities, writ large—are constructed. Her specific emphasis on subaltern urbanism, or that which is overlooked in urban studies, and even the dominant projection of urban life, reveals the way (supposedly) "marginal" communities create the cities we come to live. Roy (2011) commonly maintained that cities are officially produced through separate yet unique plans. Similarly, urban studies emphasize the role of 'official' geographies, commonly produced by urban authorities and their attendant abilities to erect and discover 'new' geographies. Black feminist geographies provide me with the methodological framework to understand how law and policy shape the anti-drug landscape in Southern Ontario (i.e., Research Question 1 and 2) and in particular the ways in which these geographies are re-imagined by BWGDP who use drugs (i.e., Research Question 3) (see also, *Table 1*). This research is thus interested in understanding the ways Black women and gender-diverse PWUD intervene and interrupt 'official' processes that allege to produce cities to create a form of subaltern urbanism (*Table 1*). Not as hypothetical or imaginative but as lived and living harm reduction, from the perspective of people and communities that are discursively constructed as marginal, criminal, or seldom taken seriously. More than reifying systems and sources of violence, studies rooted in theories of subaltern urbanism and Black feminist geographies seek to renovate their dynamic processes, as Ruth Wilson Gilmore (2017) argues and as her provocation, and the work done in its vein, inspires.

Table 1. Research Objectives, Questions, Methods & Modes of Analyses

Objective	Research Question	Method
Examine current drug policies and legislation in Southern Ontario	RQ1. What are the relevant policies and legislation that inform drug use in Southern Ontario?	Conducted a document analysis of contemporary drug policies and legislation (inclusive of case law) specific to Southern Ontario
Examine current approaches to harm reduction within community outreach programs in Southern Ontario	RQ2. What are the current harm reduction strategies intended to serve Black women and gender-diverse people as provided via harm reduction service providers?	Conducted a document analysis of the current harm reduction policies used by a harm reduction service providers in Southern Ontario.
Understand the complexities and realities of safer drug use, harm reduction, and future possibilities, especially for Black women and gender-diverse people	RQ3. What are the major difficulties with respect to safer drug use harm reduction, and needed improvement or possibilities for the future?	Conducted semi-structured interviews (combined with photo elicitation) with outreach workers and BWGDP who use drugs.

3.2. Data Collection

3. 2. 1. Document analysis

Bowen (2009) describes document analysis as "finding, selecting, appraising (making sense of), and synthesizing data contained in documents" (p. 28). Within the context of this study, a document analysis was performed using organizational material disseminated to the accessible online through government organizations (e.g., municipal council meeting notes, letters written to the public by government servants, Province of Ontario's Roadmap to Wellness online platform, as well as Federal Acts and Regulations, etc.) (Appendix A), institutional drug policy reports, as well as harm reduction and drug use legislation specific to Southern Ontario,

Canada.[8] This was inspired by the approaches used by Wild et al. (2017) and Greer et al. (2016) who similarly investigated Canadian harm reduction policies and services at a national and provincial level, respectively. The work of Wild et al. (2017) and Greer et al. (2016) examines the development of harm reduction policies for people who use drugs. Inspired by this work, this study lays the groundwork for future research examining how policies and legislation shape realities, particularly for Black women and gender-diverse individuals who are frequently excluded from such analyses. Their critical insights are essential for inclusive policymaking.

3. 2. 2. Semi-Structured Interviews & Photovoice Elicitation

Semi-structured interviews are a form of data collection with open-ended questions generated prior to and during the interview covering the central themes based on the research questions (DiCicco-Bloom & Crabtree, 2006). The semi-structured nature of the interviews allows for the questioning of how certain social phenomena (i.e., the opioid epidemic, mass incarceration of Black people via drug legislation) are constructed and experienced in the lives of participants (i.e., Black women and gender-diverse PWUD) while simultaneously providing the flexibility to further probe the participants based on the responses provided during the time of the interview (Jamshed, 2014). Within the context of this study, oral accounts of experiences with and movements through services and spaces of 'harm reduction' provides a rich articulation of contemporary realities, preserved by word of mouth, and grounded in place and time; a feature that is described as essential when documenting the Black experience (Shockley, 1978). Semi-structured interviews aimed to provide a welcoming and validating space in which participants

[8] Interview participants from the following cities were involved and constitute what is considered to be Southern Ontario for the purposes of this study: Kitchener-Waterloo (1 participant), Guelph (1 Participant), Oshawa-Durham Region (1 participant), and Toronto (3 participants). Each of the geographic areas included are analyzed within the document analysis.

could freely expand upon the ways in which their racial and gender identities are continuously negotiated as people who use drugs in Southern Ontario, Canada.

Semi-structured interviews thus provided the primary data source within this study alongside photovoice elicitation. Each of the participants were interviewed between 1-3 times depending on their availability. The photos provided a springboard for critical conversations during and following the interview process through a medium accessible in non-academic spheres (Liebenberg, 2018). Photos also afforded an additional avenue to achieve intersubjectivity that might not have otherwise been available to me as a researcher with limited experience in harm reduction, a positionality I explore in this chapter, to both learn about and understand the physical spaces in which the participants occupy. Put simply, the photos allowed me to visualize the lived realities of Black women and gender-diverse people who through their routine encounters with drug policies, legislation, and contemporary approaches to harm reduction, still manage to survive.

As mentioned above, photo elicitation is often coupled with semi-structured interviews to provide a creative outlet for participants to express their realities (Baker & Wang, 2006). Consenting participants were instructed to select up to three photos that best reflect their routine encounters with drug policies, legislation, and contemporary approaches to harm reduction. The participants were encouraged to select photos that were either already found within their camera roll or newly captured for the study. Those who opted to capture their photos were allotted one week to do so with their personal cameras. To ensure that participants would not be excluded based on their access to a personal camera, disposable cameras were offered to all participants; however, it is worth noting that none of the participants required this option. Participants were

then instructed to provide a verbal or written description/caption of the photo to assist with the interview process and data analysis (similar to the process modeled by Liebenberg, 2018). We were then able to explore photos in semi-structured interviews, and meaningful discussion whatever was depicted and its connections to their experiences and encounters with harm reduction services and spaces.

With the semi-structured interviews, I wanted to think through the spaces/places afforded to Black women and gender-diverse PWUD. This required the development of an interview guide that included open-ended questions surrounding themes connected to the research questions, including how policy and legislation impact the respondents access to (i.e., in the case of PWUD) or offering of (i.e., in the case of outreach workers) harm reduction, how histories of racial-gendered violence oscillate throughout spaces/places of harm reduction, spatial practices needed by participants, etc.

Qualitative semi-structured interviews were conducted by Small et al. (2006) to examine the impact of police in the Vancouver Downtown Eastside on drug consumption activities amongst people who inject drugs. Using interviews, Small et al. (2006) were able to gather detailed accounts of the re-ordering of place—formerly assigned to drug consumption sites—through police intervention and surveillance. This project builds from Small et al. (2006) to understand the ways in which harm reduction spaces and services in Ontario reinforce racial and gendered hierarchies but also provide avenues for alternative imaginaries, even resistance. Combined, the interviews and photos illustrate the embodied social consequences of harm reduction approaches to drug use, thereby enabling the expansion of our understandings of drug use as it connects to Black spatial histories and futures.

3.3. Data Analysis

The purpose of the document analysis in this study then was to examine the relevant policies and legislation that inform (enable or constrain) safe drug use in Southern Ontario (Research Question 1) (*Table 1*). The analysis of drug policies and legislation allowed me to understand the structure through which current harm reduction approaches and/or enforcement strategies need to adhere. By doing so, I was better able to understand the landscape through which outreach staff navigate and anticipate some of the challenges that arise as a result. In a more practical sense, the initial document analysis also allowed me to refine the creation of a semi-structured interview guide. That is, through a detailed review of policies and legislation that structure possibilities for harm reduction, I refined and re-examined the interview guide (Appendix C) prior to speaking with outreach staff and/or Black women and gender-diverse people that access harm reduction. This allowed me to better approach and understand the myriad of complexities in which people navigate and the role of policies and legislation in everyday life (see also Godkhindi et al., 2022; Small et al., 2006). Document analysis is often one method layered with other forms of data collection to minimize single source bias and assist in the "confluence of evidence that breeds credibility" (Eisner, 1991, p. 110). As modeled by Watson (2014), document analysis in this study was used in conjunction with semi-structured interview data to offer a greater corroboration and convergence of knowledge between different data sources and work to minimize bias and establish credibility (Bowen, 2009; Patton, 1990; Yin, 1994).

The data from the document analysis, interview, and captions for photographs were organized and systematically analyzed using NVivo. NVivo is a qualitative data software used to

manage concepts and codes identified by the researcher (Woolf & Silver, 2018). NVivo is particularly optimal when undertaking mixed-methods data as featured in this project (Woolf & Silver, 2018). The software enables users to store, organize, and process mixed-method data securely and efficiently.

All data collected from the document analysis and semi-structured/photo elicitation interview process were closely read and categorized through a process of open coding wherein the reduction and simultaneous saturation of categories created each theme and subtheme (Creswell & Poth, 2017). I started the process of open-coding with the document analysis—and used this initial data to refine the semi-structured interview guide—and repeatedly returned to relevant documentation for further elucidation throughout the research process. As performed by Watson (2014), this study reviewed documents selected based on their relevance to the research questions. All of the documents selected for analysis were publicly available online through respective municipal, provincial, and federal government websites. The selected documents were then appraised and coded into thematic categories for further analysis (Bowen, 2009). However, as advised by Bowen (1990), "[the] absence or sparseness, or incompleteness of documents" (p. 33) involved the search for additional documents with the support of participants and, in this case, especially involved the contributions of outreach workers.

Audio-recorded interview data were downloaded and transcribed after each session. Thematic analyses were employed to best capture the nuance and complexities of meanings expressed within raw (transcribed) data. Put simply, interview transcripts, descriptions of the images collected, and documents selected for analysis were closely read, with categories developed through a process of open-coding. Open-coding is defined as the "development of

categories of information" (Creswell & Poth, 2017, p. 202). Each major theme was informed by the theoretical framework of Black feminist legal geographies and developed through the reduction and simultaneous saturation of categories to develop analyses beyond descriptive themes. Participant validation was implemented to enhance rigour and ensure that knowledge gained throughout the research process was co-created alongside research participants (Candela, 2019). Throughout the interviews, I asked questions and prompts to enhance clarity regarding the questions, answers, and sporadic interjections in conversation. For example, questions took the form of "are you saying…?" or "does this mean that...?", while prompts may take the form of phrases such as me stating "in other words…" followed by my interpretation of their response. The participants and I then reviewed preliminary concepts and themes to ensure that I had—to the best of my interpretation—valid and accurate understandings of their responses (Candela, 2019). Following the interview and throughout the data analysis, all participants were invited to review and make suggestions regarding the findings from their respective interviews as well as each of the findings chapters (Sharma & Bansal, 2020). Additionally, two participants volunteered and requested one to two additional interviews to further elaborate upon their experiences. Maintaining a commitment to the co-creation of knowledge better allowed for more thorough interpretations of the raw data and, ultimately, findings that better reflected participant experiences (Sharma & Bansal, 2020).

3.4. Rigour: Credibility, Validity and Accuracy of Data

In traditional qualitative research, definitions of validity and rigor are often debated. A positivistic stance values understandings of the world that are measurable and quantifiable, signalling to an objective truth. Other epistemological approaches that recognize multiple,

possibly conflicting, positionalities tend to be marginalized. Patricia Hill Collins argues that "prized traditional scholarship is heavily influenced by the positionalities of 'elite White men' who have controlled the academic arena since its inception" (Patterson et al., 2016, p. 55). Within traditional academic spheres, rigour is founded on non-subjective evidence-based methods, often accomplished in the form of quantitative data collection and analysis (Bledsoe, 2021; Patterson et al., 2016). While Black feminist theory decentres the values and truths of the traditional power holders and places emphasis on the truths that emerge through the Black experience through oral stories (Patterson et al., 2016). Black feminist thought extends traditional understandings found within qualitative research to include research practices that emphasize research as an inclusive and engaging practice for both the researcher and the participants (Patterson et al., 2016). In this work, I sought to build on traditions of Black feminist thought to centre the voices, experiences and lives of Black women and gender-diverse people. The understandings garnered from this research is guided by the direct engagement of the participants involved. More specifically, as a research anchored in Black feminist thought I was committed to create opportunities for everyone involved in this project to exercise self-definition and self-determination.

One technique commonly employed and used to create opportunities for self-definition and self-determination – and used in this case – is member checking. Member checking is defined as "a process where data transcripts are presented to some or all participants for feedback" (Mckim, 2023, p. 23; Candela, 2019). I shared interview transcripts along with initial themes to participants and offered regular opportunities for participants to provide feedback, if desired. Participants were encouraged (albeit not required) to comment on themes, transcripts,

and suggest modifications to ensure the data and its analysis best (or better) reflected their lived/living experiences. Additionally, I sent completed chapters to participants to review and provide feedback. I also intentionally left their longer quotes untouched and sought to centre their experiences so as to not tamper with and allow for the interpretation of their experiences to logically follow from their voices as modeled in the work of Cox (2015). The interpretation of data was further corroborated via triangulation whereby multiple data sources, in this case, document analysis, photo-voice elicitation as well as semi-structured interviews, are used to support findings (Bowen, 2009). Different data sources ultimately opened possibilities for expression whilst also corroborating unique yet shared aspects of Black experiences.

3.5. Inclusion and Participant Recruitment

In total, I was able to recruit six participants/collaborators to be interviewed for this research project (see also, Table 2) (Godkhindi et al., 2022; Obtrecht, 2020). Recruitment criteria required participants to be 18 years of age or older, current or former drug users and/or outreach workers, with preference afforded to those who identified as Black, women and/or gender diverse people. It is worth noting that four of the six participants recruited were women and one participant being a non-binary person, and one person identifying as queer but not disclosing their gender. Although a diversity in gender representation was not seen within this study, all participants were prompted to discuss the unique challenges and intersecting stigmas they have come to learn through their experience working closely with gender-diverse people. To assist with participant recruitment, I connected with harm reduction workers throughout Southern Ontario via email, social media (namely Instagram, LinkedIn, and Twitter), and through professional as well as personal connections. Additionally, I leveraged my volunteer position

with an organization that provides harm reduction services in Toronto exclusively to Black people.[9] I recruited participants via various in-person and online platforms; namely circulating digital flyers (Appendix B) and printed flyers in Community Health Centres, relying upon my personal and professional networks across Toronto and Durham Region as well as personal emails and private messages to allow for prospective participants to mark their (potential) involvement in the study. All information circulated included a project outline, purpose of the study, participant eligibility requirements, an email contact, as well as compensation details provided in exchange for participation (i.e., $30 gift card to President's Choice) (Appendix B). The recruitment process advertised the potential for people to participate in English and French. Participants did not elect to conduct interviews in another language, although I was prepared to work with a third-party translator to support and encourage the participation of non-English or -French speakers in the project.

Recruitment strategies followed processes approved by the York University Office of Research Ethics. Ethics approval was successfully obtained on 6 June 2023 (STU 2023-070, see Appendix D). In addition to disclosing my role and affiliation as a researcher, I shared digital copies of each chapter with all participants for comment. I have shared the final thesis and I plan to also share any publications resultant from their engagement. Sending all written work to participants, particularly prior to publication, will provide opportunities for additional information to be shared or clarified or not be used (Burgess-Proctor, 2015; Finlay & Ballinger, 2006). Throughout the process, participants were reminded that their involvement was entirely voluntarily and that their withdrawal from the research can occur at any point, without penalty or

[9] I have purposefully selected to not disclose the name of the organization at which I volunteered in order to protect the identity of any and all participants who have graciously participated in this study.

impact on our relationship or their relationship with any member of York University. Additionally, any identifying information was removed from written and visual data shared or used, and participants were asked to confirm their satisfaction with any omissions. Meaning that names, descriptions of physical appearances, distinctive behaviours, etc. will not be published in any of the written work produced from this project – tattoos or identifying bodily markings will also be blurred (with the exception of one participant who provided consent for the use of their image and name).

Table 2. Overview of the Participants

Participant	Gender	Title	Location	% Black Population
Feker	Woman	PWUD	Toronto	8.8%
Lee	Woman	Outreach Worker	Oshawa	19.75%
Ayra	Not disclosed	Outreach Worker & PWUD	Toronto	8.8%
Gwen	Woman	Outreach Worker & PWUD	Kitchener-Waterloo	14.85%
Carlton	Non-binary	Outreach Worker & PWUD	Guelph	5.94%
Rose	Woman	Outreach Worker	Toronto	8.8%

3.5. Ethical Considerations

In accordance with York University's research ethics protocol, written and verbal consent was obtained from all research participants before initiating any form of data collection. All research participants were informed of potential psychological or emotional risks that could be experienced as a result of their involvement in the project. For example, and as indicated on the informed consent form (Appendix E), there was the potential for psychological and/or emotional risk due to the nature of this project, particularly if their experience with racial or gendered trauma, policing, and drug use have not been particularly positive. As the researcher, it was my

responsibility to minimize any psychological and/or emotional risks that this project had the potential to create; particularly if research participants are detailing their positive and/or negative personal experiences surrounding race, policing, and drug use. As a precautionary measure, I started each interview by providing a general outline of questions. From that point, participants were invited to communicate any topics they wished to avoid. Participants were also encouraged to pause for a break wherever needed, not answer, or end the interview entirely during the interview process had any discomfort arose from a question or questions posed.

It was my duty to repeatedly remind research participants that their participation is completely voluntary and that their right to withdraw partially or completely from the study would have been without penalty. While none of the participants withdrew their participation, participants were continuously reminded of their right to withdraw consent at any point before, during, or following the interview process and that by doing so, all data created by (e.g., photo-imagery) or with (e.g., interview) them would be immediately destroyed. I also provided a list of free resources for the participants to access, if needed, as well as qualified expertise available (detailed in Appendix F, and described in more detail next) should a participant wish to debrief with a health professional afterwards.

3.7. Confidentiality

Consenting participants were invited to speak candidly about their experience as people who use drugs or as workers that operate within the field of outreach and/or harm reduction services. However, I am mindful of the fact that featuring the voices of research participants could potentially result in the loss of privacy, embarrassment, and damage to their personal and/or professional reputation if identities became known. As a measure to promote anonymity

and mitigate the risk of being identified, all participants were assigned a pseudonym, and identifying characteristics were omitted (with the exception of one participant who provided consent for the use of their image and name). The confidentiality agreement was detailed in the informed consent form (Appendix E) and verbally explained prior to the interview (Appendix C).

To follow my personal experience as an intervention worker, there is an expectation that all employees should report any suspected harm impacting the welfare of an individual to authorities (e.g., police or child protective services). However, I recognize the disproportionate and occasionally violent impact such authorities often bestow upon Black women and gender-diverse people. As such, and in the case of suspected distress or harm displayed by an interviewee, I intend to maintain full confidentiality and share useful and accessible support services that address mental health needs and equally recognize the likelihood of services to perpetuate anti-Black racism (e.g., Black Coalition for Aids Prevention Harm Reduction Program and SAPACCY: Substance Use Program for African Canadian Caribbean Youth).

Regarding data storage, all data (e.g., audio-recordings, images, electronic copies of transcripts) were anonymized and stored on a password-protected computer. All data will remain in my possession for 10 years or until the end of my research, which may extend into a doctoral study. After which, all data will be responsibly destroyed, as outlined in the research ethics application, and with particular attention paid to potentially identifiable information (Appendix D). Participants wishing to withdraw their personal data from the dataset prior to the end of the 10-year storage period are encouraged to contact myself or my supervisor, Dr. Amanda De Lisio, using the contact information provided on the consent form (Appendix E) to fulfil their request.

I also intend to use data collected from this research to produce artistic and non-academic outputs to disseminate de-identifiable stories more broadly. This could entail outputs that are co-authored with participants, if anyone is interested to do so. Anticipated artistic outputs may include an art exhibit and/or installation within harm reduction sites, featuring the images taken by research participants and meaningful interview passages. Participants maintain copyright privileges of all images taken throughout this research process. Ultimately, in addition to this thesis, I aspire to work in close collaboration with participants to develop an output that seeks to shift cultural sensibilities related to substance use and racialized gender-based harms of Canadian drug laws and state-imposed forms of harm reduction.

3.8. Researcher Positionality & Reflexivity

> The writer cannot be a mere storyteller; he cannot be a mere teacher; he cannot merely x-ray society's weaknesses, its ills, its perils. He or she [or they] must be actively involved shaping its present and its future. (Saro-Wiwa, n.d.)

This piece undoubtably builds on the histories of those affected by past and present policies, drug laws, and harm reduction services. I begin this project on the geographies of harm reduction with Black women and gender-diverse people who use drugs as someone with no direct work experience within the field—except for my current role as an intervention worker with youth aged 12-17 in a community centre located in the Sud-Ouest (South-West) borough of Montréal. Although the general 'interventionist' style adopted by my organization is centered around harm reduction, topics surrounding harm reduction as related to substance use or illicit drugs more generally are rarely broached. The rare occasions typically take the form of a teen discussing a drug or drugs that are of interest to them or their friends. Together, we work to

‘demystify’ the drug by reading up on its uses, sensations, and effects. The young person then, wherever they might be on the spectrum of curiosity, would be given the space to explore their own thoughts, feelings and concerns surrounding the substance. With this experience in mind, I still contend with the terms ‘insider’ and ‘outsider’ as they foreground a wholeness that I cannot achieve. As a Black woman who worked with other Black women and gender-diverse people, I recognize that we may share experiences as Black people in Canada. However, I was careful to not conflate our shared Black experiences and recognize that our experiences, even if incredibly similar, would never mirror one another exactly.

In writing this, I lay out the conditions of our relatedness as one that is both intertwined and partial. Intertwined in that Black people’s encounters with society provides what Johnson-Bailey (1999) describes and Obasi (2022) articulates as

> An initial common bond that sets the groundwork for the research … a connection that exists but cannot always be quantified or explained in any corporeal way. It exists in the ether and is stronger, weaker, or even invisible in different stages of many processes (p. 65).

Nonetheless, our experiences remain partial in that I recognize that our experiences with harm reduction and the law vary - despite our (potentially) shared Black and gender identities. The experiences of housing precarity, encounters with state agents and law enforcement, and the careful mediating of policies and legislation that regulate drug use are unfamiliar to my own lived experience. And so, to engage in this research, I assumed my role as a partial outsider; meaning that, in conducting this research, I relied heavily upon relevant legal documents, texts, and the lived and living consequences of law as expressed by participants. With this, my

intention is not to become a representative of/for the community; rather bringing into focus the unique ways in which Black women and gender diverse PWUD or people invested in attempts to administer harm reduction services and make sense of the opioid epidemic and related crises (i.e., housing, healthcare).

I reflected upon my insider/outsider positionality throughout the research process using kitchen table reflexivity. Kohl and McCutcheon (2013) describe kitchen table reflexivity (KTR) as a method to meaningfully engage with the distance between the researcher and the 'researched." KTR takes shape through informal conversations occurring between and during encounters with participants and in a personal diary (Kohl & McCutcheon, 2013). As Folkes (2022) suggests, "positionality is shaped in talk during qualitative research" (para. 2). Put differently, my interpretation of the data was informed by the knowledge imparted by the participants to me. The insights borne of this reflexive technique encourages the interrogation of how and where data are created and understood by the researcher (Folkes, 2022). It is important to acknowledge that the knowledge produced from this research is tied to my subjectivities and identities.[10] I carry in my positionality not only as a researcher but, first, as a Black woman. And so, KTR creates a space that allows me to negotiate my positionality through ordinary forms of communication. I utilized this form of reflexivity as a methodological and analytical tool to interrogate what it means to occupy my status as a researcher and how this status evolves over

[10] It is worth distinguishing between my definitions of subjectivity and identity and how it shapes my understanding of the self and others. To me, subjectivities are the assumptions I form through my identity and interaction with the world. While I consider identity to be a recognition of difference and socio-political formations of the self that not only shape how I move and interact with the world but also how it interacts with me. Although I do believe that my identity is important in influencing who I am today, I want to be clear that I am not subscribing to identity reductionism, a thing I believe is often inflexible and prescriptive. We all have the power to define who we are and what is possible for us.

the course of the research—i.e., how my identity ultimately shapes and informs my analyses in ways that might not centre Black women and gender-diverse people in Toronto.

Chapter 4: "Oh, you're treating me like a Black person": On Race, Drug Law, and Harm Reduction[11]

Crack Rock

Crack rock, crack rock

Crooked cop, dead cop

How much dope can you push to me?

Crooked cop, dead cop

No good for community

F*ckin' pig get shot,

Three-hundred men will search for me

My brother get popped

And don't no one hear the sound,

Don't no one hear the rounds, ooh sound,

Don't no one hear the shouts, ooh, shout

Don't no one hear a sound,

Don't no one disturb the peace for riot,

Don't no one disrupt nirvana

(Ocean, 2012)[12]

[11] These words were taken from an excerpt of my conversation with Aliza, who recounted a non-black service user making this statement when feeling socially isolated and unjustly treated by the harm reduction organization.

[12] Inspired by his familial connection to substance use as well as his time witnessing the stories of the members of Narcotics Anonymous and Alcoholic Anonymous, Ocean pens the story of a substance user abandoned by their community as a consequence of their addiction (Nicholson, 2012). He continues, singing of the police brutality and neglect inflicted on the Black community and the inaction taken to disrupt and change the status quo.

Image 1. Who is the city? Photo captured of the graffiti announcing "WE ARE THE CITY" across.[13]

As I made my way back home from my first interview, I trotted through Allan Gardens for the first time since I was a teen— well, technically the second if you count my quick scurry through the park to my interview. On this second passing, I strolled through with the pace of someone with no place to be, passing many a tent, doing the obligatory lap in the conservatory, and stopping to read the signs, and graffiti. I turned my phone brightness completely down to conceal what I was doing as if it were some dirty crime, and conspicuously took photos of words sprawled across the fence. Although the words were painted on the construction site for those passing by to read, with each click of the camera shutter, I felt as though I was an intruder in someone else's home partaking in

[13] The image was captured at a construction site; the construction called for the fencing of Allan Gardens, which punctuated and enclosed the boundaries of an encampment.

> what Leary (2011) describes as "ruin porn" or the "fascination with images of first-world urban spaces decline" (para.4).[14] In hindsight, I was an intruder. What was once a public park is now the home of many. Now, in 2023, the residents of Allan Gardens alter the terrain that is the park, thereby extending the public space as a place not just for leisure but for shelter in a city dedicated to their expulsion (McKittrick, 2006). However, that assertion of place-making in declaring "we are the city" was challenged on a neighbouring sign. Scratched into the city's "notice of change" read: "Remember when kids could come here? Now it's just crackheads" signing off urging presumably the City of Toronto to "Do something." To the graffiti artist, the city acts as facilitators and enablers perpetuating the growing sense of danger and dependence, be it drug or social assistance to the residents of the park. With these competing needs and desires of the city in mind, I was pressed to wonder: "Who is the city?" (*Image 1*).
>
> Author's fieldnote, 4 July 2023

In this chapter, I examine relevant drug policies and harm reduction services within Southern Ontario and how they inform the accessibility and quality of harm reduction of care for PWUD. I supplement this document analysis with semi-structured interview data and photovoice elicitation. I do so to address RQ1: What are the relevant policies that inform drug use in Southern Ontario? and RQ2: What are the current harm reduction strategies intended to serve Black women and gender-diverse people who use drugs? I lean especially on interview data

[14] The post-apocalyptic images Leary (2011) terms as "ruin porn" describes the aestheticization of poverty and its infrastructural consequences and challenges, specifically within Detroit. I find the term relevant, and thereby adopt it to describe conditions observed in Southern Ontario, namely its evolving encampments, and given my investigation of institutional and structural forces contributing to the growing displacement of many of its inhabitants.

collected with Ayra, Rose, Carlton, Gwen, and Lee, all of whom have experience in outreach to understand the carceral web created by drug criminalization. While Rose speaks from her more than decade long experience in harm reduction support within Toronto's downtown core, Lee brings in her expertise as both a social worker and outreach worker operating in various towns within Durham Region. Ayra and Carlton offer a unique perspective as people who both use drugs and work as outreach workers supporting their community in Toronto and Guelph respectively. Finally, Gwen worked within the Kitchener-Waterloo region at the managerial level in outreach support. Together, their lived/living experiences allow me to analyze and co-create an informed understanding of the structural constraints that exist in the creation of harm reduction services in Southern Ontario. I observed that structural constraints manifest in the form of over-policing, under-serving, and arduous bureaucratic processes that limit the accessibility and quality of care available for PWUD. I end with a review of the annihilative consequences for Black communities.

4.1. "To know the law is to survive": Law and Policing Within an Anti-Drug Landscape

To understand how Canada, and more specifically Ontario, are regulating the 'War on Drugs,' it is necessary to review the ongoing expansion of the criminalization of drug use and drug possession. In 2023, Premier Doug Ford along with the Attorney General and the Solicitor General of Ontario announced an $112 million investment into the provincial bail compliance and warrant apprehension programs (Government of Ontario, 2023) (Appendix A). Considered within this investment package is an allotment of funding dedicated to the expansion of legal resources as well as law enforcement teams (e.g., Ontario Provincial Police (OPP) Repeat Offender Parole Enforcement Squad) focused on the surveillance and apprehension of violent,

and of particular interest of this study, repeat "offenders" that do not comply with the conditions of their bail (Government of Ontario, 2023). Thus, this bail reform can also be considered as the widening of the province's carceral web, a violent system that disproportionately impacts Black and Indigenous communities as discussed in earlier chapters. Although, the bail compliance package is not limited to drug offences, repeat drug offenders are included within this state ordained legal management tactic. As Rose explains,

> There is a conversation right now that is happening where the provincial government is like "okay we have to be like tougher on bail releases. We shouldn't just let people out on bail so easily." Because it's rooted in this idea of carceral punishment and keeping them incarcerated as the only solution to crime. Which we know actually is not true. It's not like if you keep people inside longer that rehabilitation is all of a sudden happening. And so, you have people that I work with who maybe get arrested for a theft because they literally stole a bottle of vodka and then, maybe they've stolen before, so their record has a bunch of other theft in their charges or maybe an assault here and there. At the court, they just decide "we shouldn't release this person from jail" … (personal communication, July 4, 2023).

Ontario's tough(er) on crimes approach is a punitive response that in part functions to dispossess crime doers of their freedom of mobility without actually solving or regulating crime. This bail reform, as Premier Ford states, is motivated in part by the federal and provincial criminal justice system allowing violent criminals to be "arrested one day and back out on the streets the next" (Government of Ontario, 2023, para. 2). What this provincially mandated policy means for individuals arrested for drug use and drug possession is that solving crimes can be viewed as a

socio-spatial problem where it is the criminal and not the reason for the crime that is targeted, and the solution is geographic exclusion via incarceration. As Angela Davis (2003) writes, "the prison therefore functions ideologically as an abstract site into which undesirables are deposited, relieving us of the responsibility of thinking about the real issues afflicting those communities from which prisoners are drawn in such disproportionate numbers. This is the ideological work that the prison performs—it relieves us of the responsibility of seriously engaging with the problems of our society, especially those produced by racism and, increasingly, global capitalism" (p. 16). In this way, punitive responses such as this most recent bail reform are punishment-focused drug policy and legislation mandated by the provincial government rather than remedy-focused whereby the societal conditions that may have contributed to an individual's participation in "criminal activity" remain largely unexamined. Additionally, this bail compliance program can also further limit individuals' living conditions. Rose continues to outline the typical trajectory of service users caught within the province's carceral web.

> … Then this person ends up in the south [jail] for a while. With no access to things, no access to resources. All the work that maybe we had momentum in you know like getting ID's or taxes. All of those things that we were doing to build towards stability, all of that stuff gets put in jail because it's not like I can just go in there and be like alright let's keep working on this stuff. All of the work towards a person's actual stability and wellness gets halted. Thrown into an institution that is more traumatic. And like, let's get real, nobody is getting out of jail like all of a sudden magically stable and well. In fact, the rates of overdoses go up when they come out. People get released with nothing, sometimes their ODSP and government checks get cut off and they have to start all over.

> Keeping people inside for longer which is this idea of bail "reform" is not reform. Its problematic to the person's overall momentum and movement towards wellness and stability. But this is part of the conservative idea that is connected to the mandatory drug treatment where people just need to be punished and isolated and then they will magically get better. Which is not actually what happening. (personal communication, July 4, 2023).

While the government uses incarceration and policing as a means to 'stop crime' the reality, as Rose explains, is that government policy that ultimately encourages incarceration as a method of drug control disrupts social stability rather than producing and maintaining it. Incarceration and excessive policing act as a means of social control where the movement of individuals is managed and restricted (Gilmore, 2007; McKittrick, 2011). More specifically, those marked as criminals by the state are relegated out of society and geographically expelled, allowing the government to keep political and social failures hidden from white, middle-class residents and their imaginaries of the spaces/places they come to live. Rose, along with the other outreach workers interviewed, question the punitive approaches to drug use adopted by the government and calls for a restorative approach in its place. A restorative approach prioritizes solving institutional failings (e.g., unaffordable housing and toxic drug supply) rather than policing and displacing communities already most vulnerable.

Rose is not alone in this call for restorative not punitive justice, this sentiment is also echoed by the City of Toronto's Medical Officer of Health, The Toronto Police Chief, Toronto City Manager, as well as the Toronto Board of Health which submitted a request to Health Canada in 2022 to grant an exemption under the CDSA to permit the possession of all drugs for

personal use for all Canadians (Appendix A) (CBC News, 2024; de Villa, 2020).[15] In a motion rejected by one and accepted by nine board members, the Toronto Board of Health carried their motion with the support to submit a request to the federal government calling for the temporary decriminalization of simple drug possession within the city (Appendix A) (Board of Health, 2020). Put differently, once obtained, individuals would be permitted to be in possession of criminalized drugs included in Schedule I, II, III, IV, or V for personal use only.[16] Without which, many people who use drugs, namely Black and Indigenous people who are especially targeted by police would continue to face criminal charges with penalties ranging from 1 to 2 years in jail, depending on the controlled substance of which the individual is found to have in their possession (Appendix A) (Public Prosecution Service of Canada, 2020). The decriminalization of simple possession proposes an alternative model to criminal drug enforcement that aims to reduce the stigma surrounding drug use/possession, making way for people who use drugs to be able to access harm reduction services without fear of criminal punishment (Appendix A) (City of Toronto, 2023).

The incohesive approach to harm reduction between the different branches of the government makes it so that punitive racist modes of domination exerted by the police is the primary indicator of harm reduction services in Southern Ontario. As Owusu-Bempah and Luscombe (2021) share, “In its current form, Canadian legalization does not seek to provide

[15] I interrupt this thought to note that while Myron Demkiw, who serves as the incumbent Toronto Police Services (TPS) Police Chief has voiced his support for the decriminalize drug possession for personal use, the TPS remains steadfast in their support of the Control Drug and Substance Act (City of Toronto, 2023).

[16] “The Controlled Drugs and Substances Act classifies drugs by several categories, defined in Schedules I-III. If a controlled substance is mentioned in Schedule I (which includes “hard drugs” such as cocaine or heroin) or Schedule II (cannabis and derivatives) of the CDSA Act, the maximum penalty for possession with intent to sell is life imprisonment. For substances listed in Schedule III (amphetamine family, e.g., LSD) (Appendix A) (Vilkhov, 2021, para. 2).

redress to racialized communities disproportionately affected by drug prohibition in the same way that American legalization does. Many American states, for example, are taking active measures to include racialized populations in the legal cannabis industry and to direct some tax revenue from legal sales back to the communities most harmed by prohibition (p. 102937)." While the current approaches fail to minimize harm, Black women and gender-diverse endure the burden of its consequences.

4.2. Harm Reduction Delivery Within an Anti-Drug Landscape: Suffering to be saved

To understand the lived harm reduction strategies intended to serve Black women and gender-diverse people, I enlisted the help of outreach workers. I prioritized services established by/for Black women and gender-diverse people who use drugs and was almost immediately greeted with an overwhelming sense of lack. What I found, as I sifted through city reports and policies was the repeated expression of scarcity—whether in the form of affordable housing services, funding, or security.[17] Care, as López (2020) writes, "is now often configured as a patchwork of services that function to address the everyday crises of contemporary poverty" (p. 752). López (2020) articulates the lack of cohesive infrastructural support that I observed in my initial search for services directed by/for Black women and gender-diverse people. Rose explains,

> I wish that more people heard about the ways people figure out how to survive. Sometimes it's a little outside of the box. It's creative and unconventional but you have

[17] I would like to preface before I diverge into what exists of the culturally and racially competent services, it's important to note that as it stands the current assemblage of care and support offered to most individuals accessing the services does not adequately serve much of their clientele Black or otherwise. Carlton, a white harm reduction worker describes their experience within state institutions as a "space that was not welcoming and it definitely felt like that even as someone who worked there" (Carlton, personal communication, July 24, 2023).

> to be in order to exist in the ways our structures are set up (personal communication, July 4, 2023).

Available harm reduction services in Ontario seemed to demonstrate a shift described in the work of Watson et al. (2020) from ad hoc strategies created by/for drug users towards more standardized, bureaucratic services. One explanation offered was due in part to the drug consumption and treatment strategy newly adopted by the Progressive Conservatives in Ontario, which limited the number of overdose prevention sites (21 for the province), heightened bureaucratic reporting requirements, and/or subjected sites to comprehensive enforcement and audit protocols (Appendix A) (Ministry of Health and Long-Term Care, 2018). The strategy newly adopted by the Progressive Conservatives sought to standardize care across facilities and aimed to address the paucity of data to inform evidence-based solutions yet remained fixated on treatment and rehabilitation. Michaud et al. (2022) and Watson et al. (2020) describe the strategy as one that dangerously prioritizes abstinence through treatment and rehabilitation. Initial feedback on the shift from the former Overdose Prevention Sites (OPS) model to the current Consumption and Treatment Services (CTS) model suggests that its "features further restrict the ability of service providers and site volunteers to change practices to meet service users' dynamic needs, including in ways that recognize diverse drug-taking experiences and pleasure among people using OPS" (Watson et al., 2020, p. 4).

Curious then, I asked outreach workers for their thoughts regarding CTS, and the contemporary strategy adopted by the provincial government who funded their respective services. When asked how the provincial government views harm reduction, an Oshawa-based outreach worker responded,

> They define harm reduction as strictly: giving out supplies and Narcan, so harm reduction should just focus on that. And then, a lot of education, trying to educate people on how to use Narcan and trying to educate people on safer use or to try to do preventative work to prevent people from using drugs (Lee, personal communication, July 11, 2023).

Other outreach workers commented on the administrative barriers created (i.e., delayed approval processes for harm reduction services, halting social work services with community members who are imprisoned, servicing community members who qualify based on varying funding requirements rather than all individuals expressing a need, etc.). This reflected Watson et al. (2020) findings which suggest, "the rigid metrics within the reporting and evaluation requirements that privilege referrals to treatment conflate *any* drug use to problematic use" (Watson et al., 2020, p. 4, emphasis in original). Carlton succinctly compares CTS with the former unsanctioned user-oriented services:

> It was very much about community for community. It was lots of people who were from the community in which we were trying to serve who were coming up with ideas and getting people on board and trying to build a space that felt safe for them, right? And it was very, very fast. Things happen quickly because there is no like bureaucratic policy kind of like needing to talk to people and ask questions and get permission 7 months later (personal communication, July 24, 2023).

The attempt to optimize services through data/needed documentation (e.g., number of users accessing services, number of supplies distributed, number of interventions made, demographic of users, etc.) was critiqued by the outreach workers interviewed. Provincial policies requiring

specific documents further positioned the services as a site of surveillance rather than sites of compassion and care. With the need to emphasize data collection, Carlton argues:

> CTS, for example, really relies on government funding both on the provincial and federal level and so there was a lot of statistics, steps like collecting numbers and being like, "here, look at how much money we've saved the government by having these services" … that's how you get people to sign off on drug use in a room and the funding behind it. And so, trying to wrap my head around that was interesting. And like, of course, you have to get the people to say yes to the things to give you the money. But that kind of attitude carried through the whole organization. So, it felt very much like that because it is healthcare correct but it's also like it's not just healthcare. Right? It's more than healthcare. I feel like, a lot of the time, healthcare is like secondary to everything else that comes, but it was very much like healthcare first which made the space and the organization feel very like sterile in this way, you know, walking into like, like a pap test when you're like 19 years old. Not at your family doctor but at like public health and you're like in this building, and it's so weird, and like public health, and you're like, I don't fit in here. I don't belong here. I am way too dirty for this space (personal communication, July 24, 2023).

As similarly discussed in the work of Michaud et al. (2022), outreach workers interviewed felt the pressure to produce abstinence-based and data-driven care. Outreach workers frequently voiced their frustration with this newly added pressure, as it interfered with their capacity to offer compassionate services. Carlton argued that the emphasis on abstinence-based and data-driven services fortified power structures that ultimately distract from the bodily autonomy and

pleasure of service users. As an example, harm reduction sites in Oshawa required individuals to remove their jackets and backpacks to guarantee drugs would not be brought onto premises. In other locations, private security guards were instructed to remove service users presumed to be loitering (Lee, personal communication, July 11, 2023).

Many participants opted instead to sacrifice potentially life-saving services to exercise their own bodily autonomy. Lee explains:

> There are some people who would just never walk through the door of an organization because just walking through that door is a barrier to them. Whereas something that's low barrier is for example, you don't have to come to me, I'll come to you, and make that atmosphere somewhere where people can relax and not have to be on-edge or feel like they have to hide a part of themselves. If you are someone who uses drugs, and you can't really have the stuff to use it, you always have to hide a part of yourself, or you can't fully be who you are. (personal communication, July 11, 2023)

The challenges also extend beyond the scarcity or unavailability to harm reduction services generally to a scarcity of services specifically for Black women and gender-diverse people. Within a HIV and harm reduction organization created to service Black community members, Ayra describes that although some improvements have been made in recent years, one of the challenges they have faced in their role within their organization has been on extending care from a focus primarily on Black men to also include Black women and gender-diverse people. Ayra shares,

> We were looking to hire someone to do a program specifically for women living with HIV. I think it's hard because we have provided a lot more support for women and

> gender diverse folks at [name of organization] and also there needs to be more to be done. But also, there's been push back because people are like, “well, what about gay Black men or what about cis men?“ And so those conversations are still being had, which I think are really fair and also the rate for new infections for HIV are the most prevalent in Black women. I think that can be missed when we're talking about the support that we're providing for people. (Personal communication, August 22, 2023)

What can be made of such restrictive assemblages of care? The current approaches to harm reduction in Southern Ontario seem to produce an anti-drug landscape that restrict access to needed services, especially for Black women and gender-diverse people. Lee explains that the sites created for people who use drugs are increasingly stigmatized so that users are now made to conceal their actual usage, or not occupy the space. This leaves people particularly vulnerable to overdoses, or without safe sites to inject, subject to added ridicule and surveillance (*Image 2*). Carlton elaborates,

> There are a lot of cameras, kind of like all over the place [within the harm reduction site] and they were watched, frequently. And it was partially under the guise of safety. We need to be safe. People need to be safe, and the question was always: who needs to be safe? Because if you’re scared of the population that you’re working with, then there’s something wrong. And not to say that random things don’t happen … Nobody ever really attacked me … I am not saying it doesn’t happen, but a lot of the times like people will be like, “I’m afraid of my clients. We need more surveillance, security, doors locked.” This kind of thing, or more police. And it really pissed me off because I was like, I don’t know who you are afraid of. You think that your safety is being violated in some way,

but I think it's actually like peoples' sense of safety that was being rubbed up against because they perceived the people, our clients, as dangerous. Whether or not they actually were and so, there's a lot of discrimination and violence that would occur. Because they assumed the community was violent, although they were not. I read something recently. It was like, a lot of people think that their safety is being violated when in fact it's fear, their sense of safety is being threatened. And what do they do in retaliation, you know, use violence. (personal communication, July 24, 2023)

Image 2. *Safety Mirror*, self-portrait taken by an outreach worker in front of a fallen security mirror in a harm reduction site in Guelph, Ontario. Shared with permission.

Carlton names surveillance as a key feature in the harm reduction landscape and compels us to consider not only who is deserving of care and protection, but also who actually receives it. Within the current CTS model, outreach workers are made to police practices of service users, orienting care towards a model of rehabilitation and treatment—without recognizing the complexities that compel people to use drugs in the first instance. Lee elaborates on the tension created for outreach workers,

> I'm not going to tell someone, don't shoot up when they're right in front of you. This isn't my place; I'm not going to put that on you. I think a lot of organizations say that they want to be low barrier, but they actually do want to do some type of social control and operate from a lens of social control, especially when they are like "No, we're trying to reduce many barriers". It's like, no you are still trying to have power over people. We really try our best to reduce that as much as possible. It's also just an uncomfortable feeling for you as a worker if that's not what you like. I don't like controlling other people. (Personal communication, July 8, 2023)

To this end, harm reduction in Ontario fixates on the bureaucratic administration of bodies, people, most in need. As noted by both Lee and Carlton, with the broader shift from overdose prevention to treatment and rehabilitation, the role of the outreach worker has also shifted from therapeutic actor to "service providers" or people "recast and repositioned as surveillance workers responsible for the extraction of data and information from PWUD, reflecting the porous border separating care and control. Herein we can see a broader social process at play in which therapeutic workers take on surveillant functions, and at times engage in penalizing practices toward PWUD" (Michaud et al., 2022, p. 10). Beyond immediate sites of

harm reduction, outreach workers were also subject to surveillance by police and political forces. Gwen describes the relationship between her organization and law enforcement, particularly after her organization decisively increased the visibility of services offered. Soon thereafter, Gwen sensed heightened surveillance by, and increased encounters with, law enforcement:

> It became more strenuous as our outreach became more visible. In 2017 or 2018, a couple of organizations got a grant to buy a van to be able to kind of drive around town and like hand out not just harm reduction supplies, but we had like nursing staff on-site, food, clothing, hygiene items. Kind of a one-stop-shop and the idea behind it was that, you know, we would go to different locations where people were. When that program started, we had a lot of conflict with the police because they would kind of see everybody congregating to receive services at the van and then, they would pull up half a block away and park their cruisers, in case anyone they were looking for might come … People are not going to access services if they're being hunted by the police and it's a personal health violation or privacy violation for you to even be here. So kindly, f*ck off. And you know, like week to week, unfortunately, depending on the officer, sometimes that rule was followed and sometimes one of the outreach staff would have to walk over to a cruiser and be like, "hey, we have this agreement, please leave" and that would go well sometimes and not well other times. So yeah, strenuous. They didn't like us. And we don't like them. (Personal communication, July 23, 2023)

Gwen details incidences wherein police exploit relationships with harm reduction/health workers in order to extract information. Lee details similar surveillance tactics exercised by municipal by-law officers,

> We were handing out supplies to clients and they took our photos and sent it to our management, and they were like "this is breaking this by-law, you can't do this. You cannot hand out food on the side of the road." Because we are mobile, we park on the side of the road. We don't have our own places to park and hand things out so, we just did it on municipal property. Then there was a switch to have by-law officers ride-along, so you started to have people forming relationships with by-law officers and the municipal government. At that point it kind of lessened a bit, the by-law tension. They weren't taking photos; they weren't being as strict, but you were still conscious of what you should and shouldn't be doing. And then there is, of course, the fact that funding comes from these places as well, so you don't want to rock the boat too much. I know one of our programs was funded by the City of Oshawa for a while. We receive money from the region and municipality. So, you don't want to piss them off too much because you still want to have your funding. It's a line between trying to support people but then management not really supporting us as outreach workers and not coming up with solutions. Just following what they're being told by the higher powers, the City of Oshawa or Durham Region (personal communication, July 8, 2023).

As López (2020) describes, "people who use drugs are marked as 'undeserving' through both subtle and explicit institutional mechanisms. Consequently, they are forced to confront death and the prolonged anticipation of death even in their engagements with care" (López, 2020, p. 753). State-sponsored outreach must navigate this balance between care and control. Outreach workers see transgressions, and make transgressions, or break rules whenever and wherever possible, to best support communities. Transgressions are essential to their ability to deliver harm reduction.

4.3. The Attempted Annihilation of Spaces/Places for Black Women and Gender-Diverse People

The limited or reduced access to harm reduction sites is experienced as part of a broader trend towards the attempted annihilation of spaces/places for Black women and gender-diverse people, particularly through (i) the destruction, displacement, and reduction of life-sustaining care; and (ii) continual displacement of precariously housed people to urban peripheries. With respect to the destruction, displacement, and reduction of spaces for life-sustaining care, the contemporary CTS model set an arbitrary limit of 21 safe consumption sites within the province of Ontario (*Image 3*) (Appendix A) (Ministry of Health and Long-term Care, 2018b). Outreach workers expressed frustration with the inaccessibility generated as a result. In 2019, Lakeridge Health, John Howard Society of Durham Region, and the Durham Region Health Department (2019) submitted a proposal for an additional consumption site in Oshawa to address the ongoing opioid crisis through supervised consumption (Appendix A). Only 36 percent of residents surveyed rejected the proposal, yet the site was still not approved (Durham Region Health Department, 2019; Regional Municipality of Durham Council, 2019; Szekely, 2019). In Ajax, Sandy Taylor, the Public Library Board Chair, wrote to Town Council to demand a safe consumption site after the library staff responded to an influx of overdoses. Taylor (2023) writes,

> while the Ajax Public Library Board is committed to providing safe and welcoming spaces, this has been challenging, specifically at our Main Branch. In addition to medical emergencies, staff and patrons regularly find drug paraphernalia and needles in the Main Branch (Appendix A) (para. 2).

The Town responded with a motion to oppose a new CTS site, which was ultimately supported (Calis, 2023). In addition to the political opposition to new sites, as demonstrated in Ajax and

Oshawa, there remains significant barriers to maintaining the few active sites. In October 2023, following the death of a community member struck by a stray bullet near a CTS site, the Government of Ontario decided to pause the approval processes of any new applicants, and revisit all site applications already approved, citing a concern for public safety (Casey, 2023). As of writing, more than nine months have passed, and the investigation continues (Bilhete, 2024). Despite the temporary pause on new CTS site approvals, outreach workers and service users submitted to the Ontario Legislature to prevent additional closures, and/or have reopened the sites that were closed due to funding cuts (Bilhete, 2024). Lee explains,

> Not everyone who uses drugs is downtown in Oshawa and Ajax. Geographically, Oshawa goes so far north but there's no services. As soon as you leave the downtown area, you can't find services, there's barely any buses, so if you live in north Durham, and you use drugs, you're not going to get your harm reduction, or any of that stuff. Where are you going to go for services? There's nothing there. It's incredibly rural, and a lot of people don't drive and there's no buses up there. (personal communication, July 11, 2023)

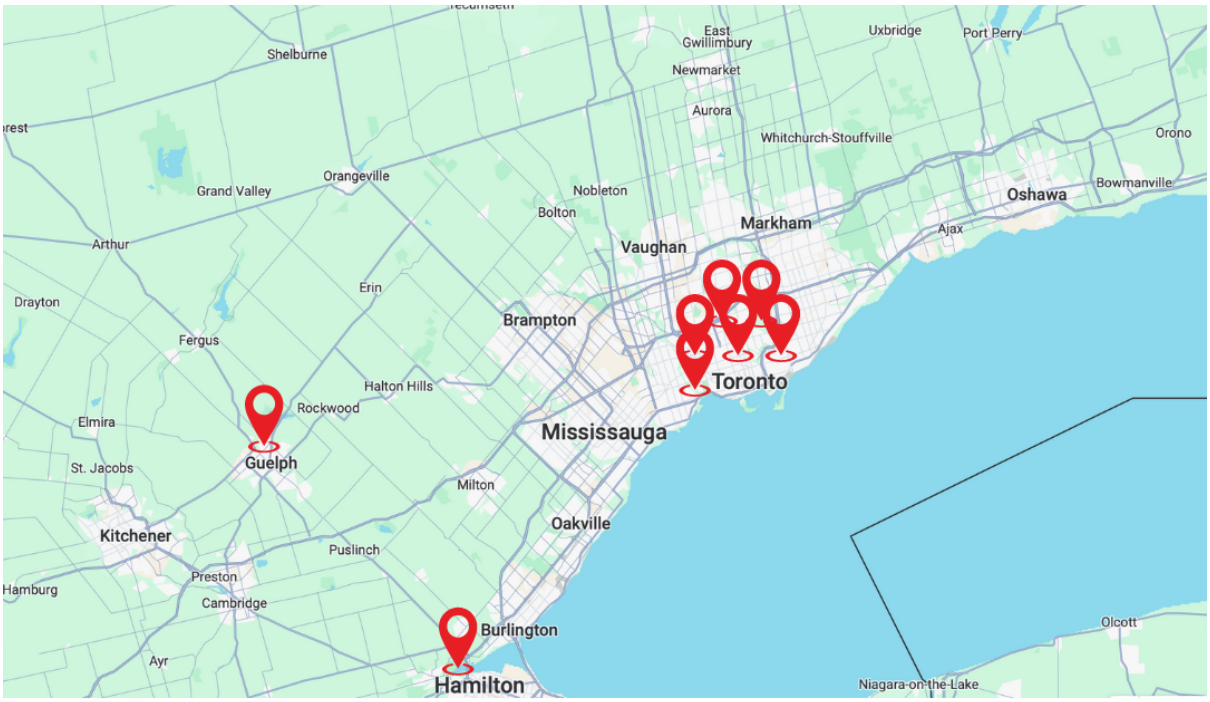

Image 3. Consumption and Treatment Services sites within Southern Ontario indicated with red pin

The destruction, displacement, and reduction of life-sustaining care is too an attempted annihilation of spaces/places for people who use drugs. In conversation, Gwen spoke to me of the repeated displacement of precariously housed people during the pandemic. She listed isolation as one of the consequences of the current government approaches to harm reduction whereby their very existence is often criminalized. She witnesses the limited access to basic necessities such as food, bathrooms, personal protective equipment, safe consumption sites, etc., and argues: "community members that are accessing our services deserve to live in the city and like be in public spaces, and a lot of the time, they are penalized for that in many different ways. For me, it is about being able to show up and facilitate them being in whatever ways they want to be, however they want to be" (personal communication, July 24, 2023). Rose adds,

> Let's say you cut this funding and we scrap our project. Just so you know, right now between the three of us workers we are supporting almost 200 people. Just so you know, if you do cut the funding. I don't know what your plan is for those 200 people, but they will be in places you don't want them to be. Just throwing it out there [laughs]. The fact that programs have to rely on such precarious funding to keep going. And they never know until a few months before, is really de-stabilizing for so many people. I think the people really understand that everything is based on funding. But yeah. It's almost like, they are pawns in the process (personal communication, July 4, 2023).

Similarly, and to return briefly to the rejected CTS site in Ajax, the refusal of Town Council to heed calls from community members has made the entire town, as Councillor Lee argues, "an unsupervised injection site" (Calis, 2023). The destruction, displacement, and reduction of life-sustaining care is too the attempted annihilation of spaces/places for people who use drugs—but Black women and gender-diverse people continue to create self-sustaining practices and survive, despite ongoing and historic oppressive forces.

To this end, we observe the eruption of visible homelessness across Southern Ontario. An outreach worker explains,

> A lot of the people that we were working with already had it so much worse than everybody else. There were no public bathrooms, there were no public spaces to be in. People were already struggling so much harder and now they were being shipped out to a hotel at the edge of town. When people started making their encampments visible and downtown, and not leaving. (personal communication, July 24, 2023)

I share this passage not to imply that encampments are a solution to the housing crisis or a form of adequate housing, but to emphasize the perpetual displacement of vulnerable populations and the solutions necessitated in response. Gwen adds,

> During the end of when I was working, housing was a big problem for everybody. But like specifically, for Black folks in our community, I think that, you know, finding a place to live if you receive social assistance and you're Black like, good f*cking luck" (personal communication, July 24, 2023).

Black women and gender-diverse people are made to Carlton explains,

> Move between place and place. Whether it is to, and oftentimes it is to, find their families or kids, you know, like something would have broken their family apart at some point. And they were trying to get back to some place. Whether that's like a physical place or an emotional place, you didn't always necessarily know. (personal communication, July 24, 2023)

For Black people, and in this case, Black women and gender-diverse people who use drugs, state-sponsored shelter services and consumption sites become an extension of historical techniques of control, violence, and surveillance (Browne, 2015), which similarly demand a renewed tactics and approaches to resist. Anti-black racism is entrenched within government responses to contemporary crises—and thereby necessitate alternative forms of care.

Carlton illuminates the repressive structural constraints that require BWGDP to pick and choose between life-sustaining housing supports and money for survival in order to live and operate within Guelph. In the instances described by Carlton, many BWGDP were made to decide between actions that were helpful in making money to pay for substances, food, and other

essentials with temporary housing offered by the state. BWGDP who are experiencing housing precarity, may at times engage in informal economies resist against state repression by organizing alternative paths of living in order to ensure their survival. As we continued our discussion, Carlton explained some of the unique challenges Black people facing housing precarity encounter within the shelter system. For BWGDP who use drugs, social and infrastructural constraints in acquiring housing extend beyond encampment removals it also reaches the alleged support networks meant to relocate people experiencing homelessness into permanent accommodations.

> There is a huge issue in Guelph I guess it was definitely anti-blackness like in housing there's not a lot of housing in Guelph and there's a very small Black community. And so, people were, Black folks in particular had and if they were using drugs and or homeless, housing was impossible nearly and so things such as like people's names being kind of like when they're on the housing application and someone has a name that is like Black, they would be, you know, denied right away. They wouldn't get a call back or if they're on ODSP, or OW. There is like that type of thing was happening frequently. A lot of like various access to housing. And then people being how do I say? Lots of white outreach workers trying to pass people off because they're like, I don't know what to do here. So like, "would somebody else take on this case, or this case, or this case?" And it was put on that [sic] we're moving around from outreach worker to outreach worker. There was no ability to like build rapport. There is no safety security and trust. And so, it was kind of like up to whoever was managing or like the case manager to make decisions about someone's like livelihood. Because it's a difficult case. Because the outreach worker was

> faced with the reality that anti-blackness really made it hard for people to access shelter and didn't know how to navigate that. Didn't know how to name it. Right? Couldn't even name it. And so, we're so uncomfortable and didn't know what to do. So, they would just try to like pass that along because they were unable to deal with it. (Carlton, personal communication, July 24, 2023)

Anti-blackness is embedded within the Southern Ontario's shelter and housing system. Even at the stage of trying to acquire permanent housing Black people face additional barriers of anti-blackness that even the outreach workers are not equipped to support.

The annihilation of spaces/places for people who use drugs is also manifested through the continual displacement of precariously housed people to urban peripheries- but, again, people continue to create self-sustaining practices and survive, despite ongoing and historic oppressive forces. The outreach workers I interviewed also explained that while some BWGDP are routinely pushed out of receiving housing aid through racial discrimination some elect to remove themselves outside of the shelter system due to the unique gender constraints inflicted upon them. For instance, for BWDGP who are sex workers are made to choose by shelters to either respect the curfew they impose, or their bed will no longer be reserved. This presents a problem as many BWGDP who use drugs and also engage in sex work must choose between earning money at times most profitable for them or having a place to sleep. While this is one uniquely gendered form of housing discrimination, housing challenges also extends to encampments as well. Braimoh et al. (2023) found that the perception of safety is one factor used to justify the displacement and forceful removal of encampment communities. De Lisio et al. (2023) explains, "encampment communities served as a direct disruption to settler fantasies (and fallacies) and

the violence these fantasies enact—the solidarities forged in response also illustrate the instabilities of settler colonialism and the desire to live land differently" (p. 1423).

This chapter examined some of the structural constraints for Black women and gender-diverse people who use drugs, namely the opposition of municipal and provincial government servants opposing harm reduction services and endorsing rehabilitation services in its place, as well as the over-surveillance and policing experienced while attempting to access services. I aimed to address RQ 1 and 2 on relevant policies and legislation that inform harm reduction services in Southern Ontario as well as the consequence on Black women and gender-diverse people. I first understood this to primarily occur via the criminalization of drug use/possession as observed in the Controlled Drugs and Substances Act and used the document analysis to understand illegalities but then, through conversations with participants, I came to appreciate the various ways in which state-funded and/or -sanctioned municipal and provincial services also act as an extension of law enforcement to police the very behaviours of outreach workers and service users. This was demonstrated using letters or public servants, reports and City Council meeting votes opposing supervised consumption sites in various regions within Southern Ontario despite the support of constituents and appointed Public Health professionals in the various regions (Appendix A). I end with Rose, and her reflections on a protest in which she participated for heating centres in Toronto. At the protest, she captured a picture of a banner that read, "Divest from policing, invest in people" (*Image 3*), aptly placed in front of a "TORONTO" sign, in which the "O" served as an Indigenous medicine wheel. The medicine wheel reminds us of the interconnectedness of our spiritual, mental, physical, and emotional health, yet the repeated investment in various modes of policing conveys another message. As Christina Sharpe (2018)

argues, social services and other state-funded care are easily coopted into, and experienced as, tools of anti-blackness. As the chapter concludes, I reflected on the annihilation of care services as also an annihilation of spaces/places for communities most in need—and, ultimately, the attempted annihilation of racialized and low-income women and gender-diverse people from the city. In the next chapter, I explore the various avenues in which Black women and gender-diverse people who use drugs work within, navigate, and create more authentic care networks, despite annihilative forces.

Image 4. *Divest from policing invest in people.* Photo captured at a rally opposing the Toronto budget in front of Toronto's New City Hall. Shared with permission. Credit: Rose.

Chapter 5: Narratives of Life-Making: Drugs as Harm Reduction

This chapter centres on the life-making practices beyond organized state violence/abandonment, as articulated in the work of Gilmore (2007), for Black women and gender-diverse people who use drugs. While the previous chapter sought to explore the *de jure*

practices that legislate substance use (as a matter of law) in Southern Ontario, this chapter describes *de facto* or lived practices from the perspectives of Black women and gender-diverse people who use drugs. To do so, I share interview and photo data collected with participants featured in the previous chapter and introduce Feker, a black woman who uses drugs, to better understand their spatial and embodied experiences of drug use; most notably the ways in which drugs: (i) magnify colonial cartographies of drug use; (ii) demonstrate harm reduction as lived contingent; and (iii) create possibilities for life/death of one's own choosing. In exploring these experiences, I use a photo taken/shared by Feker (*Image 5*) to anchor contemporary practices of resistance within anti-drug cartographies and highlight the ways in which participants redefine possibilities for care through their own agency and communities. Through conversations with participants, I better understood the legal web, and its convergence with the so-called social welfare, to create a form of carceral care. In writing, I further explored the gap created—i.e., between the desire of state agents/agencies to demonstrate compassion yet also (violently) maintain the status quo—to understand the avenues afforded to people to create their own spaces/places of care.

Image 5. Coming into myself. Photo captured of Feker holding a lit cannabis-filled blunt. Photo Shared with Permission. Credit: Neo Tempus.

5.1 Colonial cartographies of drug use

> What happens when, instead of trying to adapt Black places to white progress, we instead let Black places (and people) live, and white progress die? (Purifoy 2021, p. 830)

Important to anti-drug landscapes are its gaps and margins. López (2020) argues that contemporary state-funded harm reduction is simultaneously governed by logics of compassion and punishment. How then is this paradox lived by Black women and gender diverse people who use drugs? Black feminist geographies, specifically those attentive to prison/police abolition, reject any formulation of compassion administered by the state, recognizing its embeddedness with systems and sources of anti-Black violence (Chua et al. 2022; Syedullah & Leiner 2021). In

earlier chapters, I discussed slavery and settler colonialism as key genocidal moments within Canada and the United States. Prison/police abolitionists argue that harm reduction services and drug law enforcement are its lived and living legacies (Stein & Berger, 2021; Chua et al., 2022). According to Chua et al. (2022),

> abolitionist strategy is founded on a powerful grassroots movement that can take power from the state and fight to transform the entirety of the social system … what is most useful about insurrectionary and autonomist forms of abolition is that they do not seek permission from the state or wait for it to enact its self-preserving reforms" (pp. 4-5). The words of Chua et al. (2022) resemble the words shared by Carlton, "resistance in policy failure, hope in community (personal communication, July 21, 2023).

What Carlton emphasizes is the need to turn away from systems and institutions that constrain survival, and towards embracing self-preserving *lifeforms* and ways of collective survival. I am curious to explore ways of survival now—specifically, through the critical insights of Black women and gender diverse people who use drugs. Inspired by participants then, and the work of Black feminist geographers (namely, Ruth Wilson Gilmore and Katherine McKittrick) now, I take seriously the everyday practices of people not often consulted in the creation of harm reduction services. Rose explains,

> The status quo and the really oppressive systems count on people to just stop trying and they count on people to give up. …. They [community members] are still going to try to think collaboratively and work around the lines. Whether it is myself or somebody that I work with. So many of the people that I work with, the fact that they are still doing what they are doing and still grinding it out. That to me is resistance because they are basically

> saying “here’s a giant f*ck you to the system” and they are still going. (personal communication, July 4, 2023)

Throughout our conversation, Rose shares different types of resistance practices, but emphasizes the importance of resilience. The need for resilience or to “keep grinding it out” is sometimes met with frustration, as Carlton adds,

> Who made these rules? Somebody that hasn’t ever experienced this or if they have, they like feel like we should be grateful and like everything is very, very, very punitive and controlling. This idea that in order to be the deserving poor, or the deserving drug user, then you need to fit these criteria, which is very performative… it was frustrating to say the least. (personal communication, July 24, 2023)

The question of deservedness illustrates the limits of benevolence; a benevolence not extended to precariously housed people, particularly those who use drugs.

Carlton continues:

> Overall health and wellbeing seem to be a huge, huge, huge challenge. And like when I say surviving, I mean in this context, like very much like being alive and not being alive, you know. So many people almost died so many times so many people we’re so close to death in some capacity. That yeah, that being in a state of survival all of the time made it so difficult to be able to, you know, read a book or like do something that brought joy in some capacity. (personal communication, July 24, 2023)

Carlton illustrates the extent to which life—for Black women and gender diverse people who use drugs—is very much conditioned by death; death is constantly on the lurch. Life-affirming spaces/places are then necessary against geographies saturated with fear. Ruth Wilson Gilmore

(2007, p. 28) describes racism as the "premature vulnerability to death" or as Gwen comments, "the harm in harm reduction is more often than not coming from the system" (personal communication, July 24, 2023).

Gwen and Carlton describe state-funded and -sanctioned care as "death-making" systems for racialized, low-income people who use drugs. For example, fearful that government support would end for the mobile unit Lee established, and with several threats from bylaw officers, she stopped her food/water program to solely distribute safe supplies (personal communication, July 11, 2023). Even though Oshawa does not have a safe consumption site, she was also made to stop people from using in her mobile unit—a rule she occasionally overlooked so that people would not use in isolation, and risk an overdose, even death (see also, Toronto Public Health, 2022). Carlton demonstrates the "death-making" of systems through their experience with a young Black man, found in an alleyway near their work. Surrounded by police, Carlton recounts:

> He was saying that he wanted to die. I went to chat with him, and he was done. It wasn't like he wanted to commit suicide, it was more of like there's no way for me to live. The city is racist as shit. Nobody cares about me. I'm hungry. I'm wet. It was like [a] very basic kind of like, "I don't get treated or feel like a human being" (personal communication, July 24, 2023).

The story continues with the community member forcibly taken to hospital by law enforcement, but to what end? His life, as Marquis Bey (2021) argues, is already bound to death as "death is living life in fear, or a life constituted by fear" (p. 216).

Yet, despite this proximity to death, Black life prevails. Naming acts of organized state violence/abandonment experienced by vulnerable communities, whilst also remaining committed

to making life, liveable, is critical care work. Black women and gender-diverse people survive by escaping the trappings of "death-making" systems and finding new sources of life. As McKittrick (2022) writes, "Black humanity is the assertion of Black life under duress" (p. 48). In the next section, I explore the gap created by state-funded and -sanctioned care – i.e., between the desire of state agents/agencies to demonstrate compassion yet also (violently) maintain the status quo.

5.2 Harm Reduction as Lived Paradox

Current state-funded and -sanctioned harm reduction approaches create inconsistencies between its desire for compassion and control; inconsistencies that create pathways for alternatives. Black women and gender diverse people who use drugs play in such pathways. As Cox (2015) writes, "Black women and girls [and, I would add, gender-diverse people] live through their cities and are contained by the physical and symbolic territories whose creation they both contribute to and contest" (p. 61). The story of Feker and her time working in the legacy cannabis market – prior to the legalization the Cannabis Act– is especially illustrative of this fact.[18] Through our conversations, she emphasized the ways in which the fight for cannabis legalization in Canada harnessed inconsistencies of state agents/actors. She starts:

> Black people, Black and Hispanics, we came together. We were making routes, organizing money drops, organizing who to hire. All these political campaigns ran on the fact that they wanted cannabis legalized. So many of us got incarcerated. We caught so much bullshit for it. (personal communication, August 1, 2023)

She later continues,

[18] I use the term 'legacy cannabis market' here to describe the unlicensed cannabis industry

> They [police] were like "you, open your phone." I'm like, "my phone's broken". Like I know a little better. They're like, "Okay, I need descriptors, any tattoos on your body, this, this, that?" I'm like "I don't." I learned from my friends. I'm wearing long sleeves t-shirts, I'm wearing this, this that. I'm never that comfortable in these environments. Other people they automatically got identified. Oh, you have this many piercings. You have this type of hair. And I loved it because I had braids in too. Once I take these braids out, I'm a different person. I would always try to come looking my bummiest, like my bummiest, and they would be at work like that's not how you appeared at the interview and I'm like "that's what's going to save my life" (personal communication, August 8, 2023).

Yet, law enforcement fails to act uniformly, creating, as McKittrick (2011) describes, "uneven power geometries of white supremacy" (p. 949). Lee elaborates,

> What I found is that people who use drugs is that certain people will get arrested. I find that a lot of white substance users will get arrested but have charges dropped or lessened whereas a lot of Black substance users will have charges more likely to see more time and they're less likely to have their charges dropped… the system is inherently racist towards Black and Indigenous people… I can think of one client in particular who got over 2 years for selling basically fake drugs to an undercover cop. Got sentenced, all that, went to prison. I can think of other substance users who were white and have been charged with trafficking fentanyl, actual crystal meth and street-level drugs and have somehow had charges withdrawn or dropped. Whether that's because they cut a deal or

> because they are white and the criminal justice system benefits them. (personal communication, July 11, 2023)

Lee recounts the experience of one Black community member in the criminal 'justice' system – and who is, as of writing, serving their sentence under drug trafficking charges – with the caveat that law does not "serve or protect all people, in all places, in the same ways, all the time" (Chua et al. 2023, p. 16). A reality that other Black women and gender diverse people share, particularly in their movement through urban areas and neighbourhoods with higher proportions of Black people such as Scarborough (City of Toronto 2022; Vincent, 2018). According to Feker, in such areas, arrests are most often violent, with excessive use of force by police. Whereas, within more white, affluent neighbourhoods of Toronto, police violence is seemingly less rampant: "where you're at matters, location matters, your race matters, everything matters" (personal communication, August 1, 2023). Feker continues:

> For all these different categories of it [cannabis], there were different laws attached to them and what the packaging was what the marketing was, and we were following what they were proposing before it was even established. Or what they were going to propose because technically we influenced the law as much as they like to think they made it. It was a cross collaboration of the government trying to hurry up and legalize it [cannabis] and us enforcing civil disobedience that caused the structure to look like the way it is today. (Personal communication, August 8, 2023)

Given such inconsistencies, racialized, low-income communities are forced to engage in practical strategies, communicating police activities through end-to-end encrypted platforms, sharing escape routes, plans, and hideaways, etc. And, in doing so, they collectively alter their

physical and digital landscapes (see also, Prouse, 2017). Feker and Lee share strategies and associated geographies of survival.

Care systems in Canada continue to exclude Black people from life-affirming services while also targeting us through racial violence. Yet, as McKittrick (2011; 2013) teaches, these conditions of racial and structural violence do not foreclose Black people—and, instead, force the production of alternative, subaltern geographies. Feker and Lee share their encounters with the paradoxes Black people are made to live. In the next section, I turn to the ways in which life-making strategies of Black women and gender-diverse people create more liveable geographies, communities, cities – or as Purifoy (2021) explains, "the long black practice of recognising what makes life possible is perhaps part of what makes life precious enough to sustain" (p. 832).

5.3 A Life and Death of Our Own Choosing

I am alive.

And I have died

An infinite death

I am here.

(McDonald, 2017)

Through popular discourses of drug users as being continually represented as immoral, undeserving, and perpetually in need of saving – the stigma surrounding drug use, reinforces anti-Blackness or the notion that Blackness should be equated with criminality, to justify the neglect and over-policing of people who use drugs. Gwen articulates this idea in her frustration with social stigma:

> When I think about harm reduction work and all the places it could go, I think that the stigma is the biggest thing for me. I think that for people who use drugs compounds on top of every other identity that people hold. If we could get to a place as a culture where there was less of that, and we could see more of the reasons [why] people use drugs and not attach so much moral judgement to them. I see harm reduction programs being able to be more effective and have people have healthcare and less poverty and access to the things you need. (personal communication, July 25, 2023)

Image 6. In pursuit of collective healing. Photo captured of a lit cannabis-filled blunt being passed to Feker. Photo courtesy of Neo Tempus.

In rethinking the question of stigma surrounding the use of drugs, participants problematize the aesthetics of drugs as an act of deviancy reserved for criminals. As Sudbury (2002) insists in, *Celling Black Bodies*, 'the criminal,' like 'the crime' she commits are products of penal regimes that shift over time" (p. 59). Sudbury's words are cogent alongside Gwen to remind us that although laws – as we have seen with the Cannabis Act – shift through time, what remains constant (even if overlooked or denied) is the humanity of the drug user (*Image 6*). That being said, the humanity of the participants is much more textured than a question of stigma, that is often reduced to good/bad, deserving/undeserving, criminal/citizen. Through discourses of criminality, anti-Black racism, morality, etc., people who distribute and use drugs are occluded

from their own agency, safety, dignity, etc., without rationale or interference. Building on this, participants express the complexities of self-determination. Lee explains,

> Drugs to them [the state] is still morally wrong and people shouldn't do it. People use drugs every day and certain drugs are more acceptable but, at the end of the day, there's nothing wrong with using drugs and somebody wanting to use drugs. They should be allowed to, and they shouldn't be punished for it. Some people like it, straight up. You enjoy doing it so why stop? You're not going to stop something you enjoy. (personal communication, July 11, 2023)

Of interest here is the way in which drugs are used to humanize people, through an emphasis on their own agency. She adds to this by explaining how Black women and gender diverse people who use drugs are choosing to reaffirm their own humanity within a system that otherwise does not. Lee alludes to life-making in an otherwise terminal state – beyond incarceration, organized state-, racial- and gendered-violence, people are using drugs and fashioning their own spaces that make their life more liveable, even if it brings them closer to death. It would be a death of their choosing, not a death (or life) otherwise prescribed by the state. That, in essence, is the use of drugs *as* harm reduction. What can also be interpreted are the pleasure-making-possibilities that drugs allow:

> Oh, very, peaceful, and necessary. Peaceful and necessary are very intertwined for me. Peaceful as in there's a routine to it. Necessary as in its medicine. It's a habit not like addiction, for me habit as in my natural personality is caffeine and we automatically give me down a little bit lower. So instead of me being on full speed like, [twirling sound effect] not everybody can keep up with it, I always felt like I over talked, over shared,

> over analyzed, over thought, sometimes overreacted, all the over just goes down to normal. Suddenly I'm not thinking from a people pleaser perspective. I'm thinking from a selfish and it's not even selfish. It's just like, what would I want and how do I speak up for me that became normal once I took medication. And I call this medication. Ganja for real. But necessary as in why would I go back to a life of like overthinking or paranoia or anxiety when I'm leading such a better one with this? … But when I actually started taking THC and noticing that I was carrying a lot of baggage, I didn't need to. There's a lot of deadweight around me and all that needs to go, like it needs to get cut. THC is what helped me realize. People are like, "you know, you're a lot more dead now, you're so chill, you're this and that." I'm looking at it like "Yeah, and I like, I *like* it. I feel like I'm coming home to myself now when I smoke." (Feker, personal communication, August 8, 2023)

Feker is able to find personal peace and reprieve through drugs. She continues,

> I felt like shrooms just made me feel like I was on a fifth dimension. But like DMT, took me to a different planet. ... I was so into myself, and I couldn't escape that trip for 9 h, me myself and I. I flew to places that only existed in my imagination. I was in Tokyo; I was in New York. I built cities and destroyed them. Like I was like, "what the hell?" All this power comes from within me like this is insane. And it was a very emotional time. That's what ayahuasca is, ayahuasca is DMT. So when people take DMT, LSD, this that, it's actually meant to connect you to yourself and to nature to help you reorient because if you have a certain understanding of yourself or if you know yourself, deep down, you may be lost in the moment, lost in the sauce but if you know yourself some psychedelics

just bring you back to you. They just show you like; this is how far you've gone the wrong way. This is how far you strayed is this the direction you wanna be on? Cause this is the outcome. Or you can choose to go back, Go back to yourself. (personal communication, August 8, 2023)

Image 7. Healing every day, in every way. Photo of lush forestry on both sides of a still body of water hosting an egret atop the rock. Photo taken by Ayra.

In fulfilment of her own joy and pleasure, drugs reduce harms of the everyday and allows for the body to be amplified as a site for place-based resistance.

Through conversations with Ayra, this resistance was more than mere survival: *existence* as *living/lived resistance*. For many Black women and gender-diverse people:

> Resistance [for me] looks like taking time for myself. Yeah, I think taking time for myself and having time to rest. Whether that's like resting from a come down or resting from anything that's happened or just like just rest in general. Just taking breaks, I think is what resistance feels like to me. Yeah, and I also I think just like even just being in community with people and like having fun using substances feels like resistance. (Ayra, personal communication, August 22, 2023)

Resistance, as Ayra, emphasizes is no solo-sojourn – what is necessary also is the support of community. With a single image (*Image 7*), she transports us to a place wherein she is made to feel whole and heal. Not pictured however are those who joined Ayra on her travels. She spoke often of how the place as well as the people contribute to her healing by allowing for her to use drugs freely. In such spaces, she can explore self-healing, with the community nearby and safeguards in place.

Drug use merely afforded new and previously unthinkable avenues to re-map/imagine otherwise oppressive forces. Is this an escape or something else? My guess it is something more. The participants have taught me that it is a life in pursuit of bodily pleasure, a life that Cox (2015) would describe as not "beholden to the state and controlled through capitalism" (p. 234). The civil disobedience and resistance enacted by the participants provide the protean context through which both real and imaginary social and personal transformations were and continue to be realized. These subaltern subjects unsettle the institutional and social landscapes they occupy by transforming their shared knowledge of state violence into safeguarding tactics, through rest,

through healing, through liberatory spaces. To quote Davis (2023), such tactics “help us find ourselves in and through the world – not as a set of directions that point the way to some final destination, but as an opening up of unending possibilities and discoveries that change with each journey” (para. 2).

As the chapter ends, I am grateful for the chance to explore practices of place-making. Through semi-structured interviews and photographs, the participants welcomed me into their world, teaching me of the difficulties and practices of resistance to state violence performed by BWGDP who use drugs. In conversation, the participants outlined the complexities and realities of safer drug use and the future possibilities of harm reduction for BWGDP. The words of Davis (2023) serve as a helpful reminder that life/world-making does not solely exist in grand scale happenings such as the transformations of laws or the legalization of drugs, but in the small meaningful exchanges with, and among, communities similarly wrestling with racial capitalism. Resistance, as made through the activities of Black women and gender diverse people who use drugs, makes possible broader appeals, and those appeals redefine for care, bodily autonomy, and the right to the city.

Chapter 6: Conclusion: "Harm reduction is love induction"

This work would not be possible were it not for existing Canadian literature exploring the many contradictions that exist within state-funded harm reduction as a system that is simultaneously at risk of institutionalization and at threat of erasure due to competing political interests (Watson et al., 2020), while also compounding harms for people who use drugs (Michaud et al., 2022). Paul Kivel (2007) asks, "can we provide social service and work for social change, or do our efforts to provide human services maintain or even strengthen social inequality?" (p. 129). The emergence of state-funded harm reduction, specifically the CTS model currently enacted in Ontario, advances surveillant and punitive forms of governance (Michaud et al., 2022; Watson et al., 2020). I build upon extant literature that has critically examined harm reduction care and policy specifically in relation to the widening of the carceral web and surveillance practices with the expansion of state funded initiatives. This research complements and enhances the work of Watson et al. (2020) and Michaud et al. (2022) – two studies that critically interrogate harm reduction services in Ontario. Relatedly, this work examines the expansion of surveillance practices and policing tactics through state-funded harm reduction services. It extends in this work however through the specific focus on Black women and gender-diverse people and outreach workers who are made to fight for the scarce (and as I argue, purposefully so) life-sustaining resources made available to marginalized communities (e.g., access to safe and affordable housing, supplies, and communal spaces/places).

López (2020) reminds us that people who use drugs, and I especially focus on Black women and gender-diverse people, do not exemplify "exceptional moments of violence in their lives; rather, their narratives are examples of the prolonged everyday experiences of

marginalized people who use drugs and the systems that govern them" (p.760). Rose emphasizes this point,

> Harm reduction is about dignity and it's about recognizing that people know what they need to survive. It is an active way to work against the very paternalistic ideal. Social service work and sometimes I see it in workers, there is this idea that we know better than the person in terms of what they need. And so, for me harm reduction is saying "no, the person knows." Maybe sometimes they need some help processing. Because I think that's real, when people are in a state of crisis; when they aren't sleeping or eating well, it's hard to make clear decisions about what people need. So, I think the role for workers and service providers is to help people process through what it is that they need by asking questions. To me, harm reduction is about offering dignity to the person and knowing that they know what they need whether it is drug use, or where they are going to sleep tonight, or if they are going to engage in sex work today versus tomorrow and then offering support so that they can follow through in the decisions that they need. That to me is harm reduction. I love that [harm reduction] is love induction because it's really about seeing the person for who they are and where they are at and offering ways to support them practically. (personal communication, July 4, 2023)

While state-funded harm reduction purports to impose a version of care, in praxis the outreach workers and service users tell me that it exists to maintain social order. The paternalistic nature of harm reduction dismisses the needs of actual community members in exchange for depersonalized and bureaucratized "care." Rose calls on a change toward harm reduction that empowers and instills dignity upon its service users and their unique demands. As Watson et al.

(2020) demonstrated, “harm reduction services are often at their most dynamic, inclusive, and innovative when people with lived experience, allies, and service providers are together responding to fast-changing drug use realities in their communities” (p. 102615). Yet, as the Ontario Associate Minister of Addictions and Mental Health, Michael Tibollo, sees it, “the most important thing we can do is help that individual get into recovery treatment” (Casey, 2023, para. 20). Still, and thankfully, state actors/agencies are not the only form of harm reduction – nor is rehabilitation the sole objective of all people who use drugs.

Ayra, Feker, Carlton, Lee, Gwen, and Rose demonstrate the life-affirming possibilities and care networks created amongst people who use drugs. Outreach workers and Black women and gender-diverse people who use drugs continue to organize spaces/places against state violence, protecting one another from arrest, a toxic drug supply, and limited shelter options. Ultimately, Black women and gender-diverse people who use drugs find pleasure amongst annihilative forces. As Carlton reminds us, forms of harm reduction that are community-led address and attempt to remedy sources of harm that are not recognized or acknowledged through federal, provincial, and/or municipal strategies.

> Like any space, [I am] not trying to paint a utopic idea about things. But it was very much people showing up for each other. That was the intention behind it. It’s showing up for your community and learning to keep your community members alive, right? (personal communication, July 24, 2023)

In recounting the assemblages of care created for and by the community, Carlton reminds us of the community efforts to sustain themselves. The practices of resistance enacted by the community are the inductions of love most needed. Just as state-funded harm reduction

perpetuates sources and systems of colonial-racial violence, community-led practices of care and mutual aid equally reflect histories of Black and Indigenous resistance. An important facet of resistance practices is remembrance, and within Oshawa, community members created a memorial to honour and publicly recognize the community members lost from preventable, premature deaths. Lee explains,

> In Oshawa, they [community members] created their own memorial. They were like "f*ck you, you don't care about us that we are dying, we care." They created their own memorial, to all the people in their community who had died. They took care of it, it was really well respected. Like, you don't use drugs here, you never left paraphernalia, people would clean it, and they constantly left flowers. That was their form of resistance to what they were going through in this structure and drug crisis. (personal communication, July 4, 2023)

Lee also remembers that municipal bylaw officers attempted to destroy the memorial, but the remnants remain. The memorial is emblematic of the countless stories shared by participants and reinforces the need for everyday transgressions by Black women and gender diverse people.

In this thesis, I relied upon a document analysis of the CDSA [1996] (C-19) and provincially-funded harm reduction services in Ontario as well as semi-structured interview data to better understand: (1) What are the relevant policies and legislation that inform drug use in Southern Ontario? (2) What are the current harm reduction strategies intended to serve Black women and gender diverse people as provided via harm reduction service providers? and (3) What are the major difficulties with respect to safer drug use, harm reduction, and needed improvement or possibilities for the future? Using the insights of 6 Black women and/or gender-

diverse people who use drugs or work in outreach, I sought to contribute to Black Feminist Geographies and prison/police abolition feminist scholarship and activism. I take seriously their commitment to decriminalized forms of care that allow people to freely engage in pleasurable pursuits, but also the creation of resources and services that tackle sources and systems of violence – instead of people or communities engaged in so-called deviant or criminal activities. The policy demands of people who use drugs, outreach workers, and public health officials have long been made clear and are supported by the evidence found in this thesis. What is needed is the expansion of harm reduction services and care beyond the state-led (and constrained) initiatives, the decriminalization of all drugs and possession, and affordable housing for all. It is for this reason that future policy recommendations should continue to consult with people directly impacted by criminalized possession and excluded from viable housing options. In doing so, I am choosing to echo participants' calls to decriminalize drug use as well as its distribution in Canada. I would suggest that future research expand upon the pursuits of pleasure and community building harm reduction techniques for Black people who use drugs.

Ultimately, I hope this research can offer a reminder that drug use and the care communities created in response can offer respite from otherwise annihilative forces. I end with words from Ayra, in hopes to inspire future actors/agents/networks of care,

> Maybe it also just looks like slowing down a bit. Yeah, and like taking a beat. I feel like it's like hard to think like in a city like Toronto everything is just moving really fast all the time. And so, I think like our level of care diminishes the faster we move. And so, I think in slowing down you're able to like check on someone like if you see someone like slouched over in the subway, like you're able to be like, "Hey, are you okay?" You

know, and kind of, maybe, be more like good Samaritans. I think that only happens in a culture where we're not moving so fast. (personal communication, August 22, 2023)

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Appendix A: List of Documents, Policies and Legislation Reviewed

Level of Government	Document Type & Document, Policy, or Legislation Name*	URL
Province of Ontario	News Release: Ontario Takes Action on High-Risk and Repeat Violent Offenders	https://news.ontario.ca/en/release/1002987/ontario-takes-action-on-high-risk-and-repeat-violent-offenders
Municipality of Toronto	Report: Toronto Overdose Action Plan: Status Report 2020	https://www.toronto.ca/legdocs/mmis/2020/hl/bgrd/backgroundfile-147549.pdf
Municipality of Toronto	Board Vote: HL17.2 - Toronto Overdose Action Plan: Status Report 2020	https://secure.toronto.ca/council/agenda-item.do?item=2020.HL17.2
Federal	Act: Controlled Drug and Substance Act S.C. 1996, c. 19	https://laws.justice.gc.ca/eng/acts/C-38.8/page-1.html
Federal	Deskbook: 6.2 Mandatory Minimum Penalties for Particular Drug Offences under the *Controlled Drugs and Substances Act*	https://www.ppsc-sppc.gc.ca/eng/pub/fpsd-sfpg/fps-sfp/tpd/p6/ch02.html
Municipality of Toronto	City Report: Our Health Our City: A Mental Health, Substance Use, Harm Reduction and Treatment Strategy for Toronto	https://www.toronto.ca/wp-content/uploads/2023/11/977e-PublicHealthOurHealthOurCityMHAStrategy.pdf
Province of Ontario	News release: Ontario government connecting people with addictions to treatment and rehabilitation. Ontario Ministry of Health and Long-Term Care.	http://health.gov.on.ca/en/pro/programs/opioids/docs/CTS_application_guide_en. pdf.
Province of Ontario	Letters from the Premier of Ontario, the Associate Minister of Mental Health and Addiction and the Minister of Health: Roadmap to wellness: a plan to build Ontario's mental health and addictions system	https://www.ontario.ca/page/roadmap-wellness-plan-build-ontarios-mental-health-and-addictions-system
Municipality of Durham	Survey Report: Consumption and Treatment Services community consultation	https://www.durham.ca/en/health-and-wellness/resources/Documents/Al

		coholDrugsandSmoking/CTS-SurveyReport.pdf
Municipality of Durham	Council Vote: Council information meeting April 26, 2019	https://www.durham.ca/en/regional-government/resources/Documents/Council/CIP/CIP-2019/CIP-04262019.pdf
Municipality: Town of Ajax Public Library Services	Letter: Re: Support for Consumption and Treatment Sites (CTS) in the Town of Ajax	https://weblink.clarington.net/WebLink/0/edoc/412276/2023-06-09.pdf

*The documents are listed in order of appearance within the text

Appendix B: Recruitment Poster

Black feminist geographies of harm reduction:

Race, space and drug use in Toronto, Canada

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About the study

The research project will examine the impact of Canadian drug laws, policing, and harm reduction services. The goal is to understand how race, gender, and space interact to shape who, how, and where people use drugs in Toronto. Interviews will be approximately 1 hour in length.

Participant Eligibility

- Must identify as a Black gender-diverse person/woman who is a current or former person who uses drugs
- OR harm reduction/outreach worker
- Language: the interview may be performed in French or English - to conduct the interview in another language, please contact the email below to arrange free translation services

$30 President's Choice Gift Card compensation will be provided

This study is by **Lensa Hassan,** MA student at York University & Dr. Amanda De Lisio, PhD, Assistant Professor at York University

INTERESTED IN PARTICIPATING? QUESTIONS? CONTACT LENSA HASSAN AT [redacted]

Appendix C: Interview Guide

Preamble

I would like to thank you for sharing your time and story with me and agreeing to participate in this research. Your participation in the research project and identity will remain confidential, only myself and my supervisor will have access to any identifying information. To maintain your anonymity, you will be assigned a pseudonym and all identifying characteristics will be featured in the study (name, description, job position, names of co-workers, mannerisms, etc.) will be removed from the transcript. The interview will be approximately 1 hour in length. If, at any point in this process, you wish to pause for a break, not answer a question or questions, end the interview entirely, or withdraw consent you may do so without any consequence and without providing any reasoning. Your compensation of $30 gift card to President's Choice will be provided regardless of whether you complete this process or not. With your permission I would like your permission to record this interview. Before we begin, do you have any questions?

A) Identity

1. Can you provide your name and any other information you deem important to share with respect to your identity? Please remember that you can share as much or as little as you feel comfortable with.
   a. For example: gender, race/ethnicity, education, employment etc.

B) Information about the organization

2. Would you be able to tell me about your organization?
   a) What is the mission and mandate of your organization?
   b) What are the services provided by your organization?
   c) Who are the target populations (that is, of whom does the majority target population using your services consist of?)
3. What are common misconceptions and/or challenges experienced, organizationally?
4. Could you describe the relationship your organization has with the municipal and provincial government?
5. Could you describe the relationship your organization has with police?
   a) How would you describe the interactions between the people who access your sites and the police?

C) Your knowledge and experiences of working with Black PWUD

6. Would you tell me your role or position in the organization?
7. What is your primary duty?
8. What have been your experiences of working with Black PWUD? Would you tell me a bit about your experiences of providing support or services to people who use drugs.
9. What do you see are the issues, needs, challenges, and problems faced by Black PWUD? (e.g., health, social, education, work related issues, legal, human rights and social justice, other).

   a) What do you see as areas of misunderstanding? Or misconceptions held policymakers, outsider-publics?
10. What do you see are the issues, needs, challenges, and problems faced by women and gender- diverse people (e.g., health, social, education, work related issues, legal, human rights and social justice, other).
11. Do you think their needs are being addressed, or not? If so, how? If not, why not?

D) Understanding Harm Reduction & Misogynoir

12. What does harm reduction mean to you?
    a) Could you describe any values or principles that you associate with harm reduction?
13. How would you describe your relationship with drugs?
14. How would you describe your experience in safe-injection sites/harm reduction sites?
    a) Do you feel recognized as a Black women or gender-diverse person when accessing harm reduction services?
    b) How would you describe optimal harm reduction services?
15. How would you describe your role as a harm-reduction worker?
16. What are the current harm reduction strategies intended to serve Black women and gender-diverse people as provided via Toronto Community Health Centre?
    a) If yes, could you please specific services offered?
    b) If no, do you feel there are any challenges or barriers to addressing oppressions in the harm reduction work you do?
    c) If yes, could you describe what those challenges or barriers are?

E) Understanding Space and Blackness for PWUD

17. Have you had any interaction with law enforcement concerning the possession or use of drugs?
    a) If yes, could you describe any interactions?
    b) If no, could you describe if this has ever been a concern for you?
18. Can you talk to me about key places or spaces you go to use; what do these provide?

F) Opportunities, Resistance, and service gaps

19. What are the gaps in the support and services?
20. If there were/are gaps, how do you as a worker/person who accesses the site work through those barriers?
21. What does resistance look like to you as a Black woman/gender-diverse person?
    a) If yes, what does resistance mean to you?
    b) If no, how else would you describe your experience as a Black person who use drugs?

G) Wrap-Up

22. Is there anything you wish to share that we did not touch on in the interview? Is there anything you think I should know in order for me to better understand the services and support available to Black women and gender-diverse people who use drugs?

23. Do you have any questions for me?
24. What do you hope of this space, conversation, for the future?

Appendix D: Ethics Approval

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Certificate #:	**STU 2023-070**
Approval Period:	**06/06/23-06/06/24**

ETHICS APPROVAL

To: **Lensa Hassan**
Graduate Student of Kinesiology & Health Science
lensa15@yorku.ca

From: Alison M. Collins-Mrakas, Director, Research Ethics
(on behalf of Janessa Drake, Chair, Human Participants Review Committee)

Date: Tuesday, June 6, 2023

Title: **Black Feminist Geographies of Harm Reduction: Race, Space & the Embodied Consequences of Drug Use in Toronto, Canada**

Risk Level: ☒ Minimal Risk ☐ More than Minimal Risk

Level of Review: ☒ Delegated Review ☐ Full Committee Review

I am writing to inform you that this research project, **"Black Feminist Geographies of Harm Reduction: Race, Space & the Embodied Consequences of Drug Use in Toronto, Canada"** has received ethics review and approval by the Human Participants Review Sub-Committee, York University's Ethics Review Board and conforms to the standards of the Canadian Tri-Council Research Ethics guidelines.

Note that approval is granted for one year. Ongoing research – research that extends beyond one year – must be renewed prior to the expiry date.

Any changes to the approved protocol must be reviewed and approved through the amendment process by submission of an amendment application to the HPRC prior to its implementation.

Any adverse or unanticipated events in the research should be reported to the Office of Research ethics (ore@yorku.ca) as soon as possible.

For further information on researcher responsibilities as it pertains to this approved research ethics protocol, please refer to the attached document, **"RESEARCH ETHICS: PROCEDURES to ENSURE ONGOING COMPLIANCE".**

Should you have any questions, please feel free to contact me at acollins@yorku.ca.

Yours sincerely,

Alison M. Collins-Mrakas M.Sc., LLM
Director, Office of Research Ethics

RESEARCH ETHICS: PROCEDURES to ENSURE ONGOING COMPLIANCE

Upon receipt of an ethics approval certificate, researchers are reminded that they are required to ensure that the following measures are undertaken so as to ensure on-going compliance with Senate and TCPS ethics guidelines:

1. **RENEWALS:** Research Ethics Approval certificates are subject to annual renewal. **Failure to renew an ethics approval certificate or (to notify ORE that no further research involving human participants will be undertaken) will result in the closure of the protocol.** No further research activities may be undertaken until such time as a new protocol has been reviewed and approved. **Further, it may result in suspension of research cost fund and access to research funds may be suspended/withheld**;

2. **AMENDMENTS:** Amendments must be reviewed and approved **PRIOR** to undertaking/making the proposed amendments to an approved ethics protocol;

3. **END OF PROJECT**: ORE must be notified when a project is complete;

4. **ADVERSE EVENTS**: Adverse events must be reported to ORE as soon as possible;

5. **POST APPROVAL MONITORING:**
    a. More than minimal risk research may be subject to post approval monitoring as per TCPS guidelines;
    b. A spot sample of minimal risk research may similarly be subject to Post Approval Monitoring as per TCPS guidelines.

FORMS: As per the above, the following forms relating to on-going research ethics compliance are available on the Research website:

a. Renewal
b. Amendment
c. End of Project
d. Adverse Event

Appendix E: Informed Consent Form

[Faculty of Health, York University Letterhead]

Date:

Study Name: **Black Feminist Geographies of Harm Reduction: Race, Space & the Embodied Consequences of Drug Use in Toronto, Canada**

Researchers: Principal Investigator: Lensa Hassan (XXXX), an MA student, and her supervisor, Dr. Amanda De Lisio (XXXX), an Assistant Professor, in the School of Kinesiology and Health Science at the York University.

Purpose of the Research: The purpose of this research project is to examine the impact of Canadian drug laws, policing, and harm reduction services on Black women and gender-diverse (e.g., transgender, non-binary, agender) people who use drugs. Using Black Feminist Geographies as a methodology, this research will investigate how race, gender, space interact to shape who, how, and where people use drugs in Toronto. De-identified data will later be used in presentations, written papers, as well as creative works (e.g., art installation with powerful quotes/passages) with the intent to shift cultural sensibilities related to policing and substance use. I intend to use the research and data collected in this study to be presented and reported in my thesis, in class and conference presentations, and within articles, reports, etc.

What You Will Be Asked to Do in the Research: Your involvement in this research project will be a combination of photographic recordings as well as an interview, a method known as photo-voice elicitation. You will be instructed to take photographs on your personal camera over the course of the week that best reflects your routine encounters with drug policies, legislation, and contemporary approaches to harm reduction. Your photos will then be used to guide the interview questions, the interview will take approximately one hour. You will receive a President's Choice gift card of CDN$30 in compensation.

Risks and Discomforts: There is the potential for psychological and/or emotional risk due to the nature of this project, particularly if your experience of with racial or gendered trauma, policing, and drug use have not been particularly positive. To mitigate this, we want to emphasize that your involvement is entirely voluntary, such that a question can be skipped or withdraw without penalty. Prior to the interview, questions will be outlined, and you will be asked if any question(s) or topic(s) should be avoided. Additionally, there is a risk social risk (e.g., including possible loss of status, privacy and/or reputation) involved with your participation in this study. To mitigate the social risk any information that can identify you as a participant will be kept confidential and will not be shared with anyone outside of the Lensa, the Principal Investigator and Dr. De Lisio, or appear in any publications/reports. There is also a data security risk (e.g., risk to participant from data exposure) involved with using Zoom the video/audio conferencing software. To mitigate the data security risk, in-person and telephone interviews can be arranged.

A list of freely available resource supports is included, should you wish to debrief with someone after our conversation:

Black Coalition for Aids Prevention: Harm Reduction Program
Phone: (416)977-9955

CAMH Substance Use Program for African Canadian Caribbean Youth
80 Workman Way, Toronto, ON, M6J 1H4
Phone: 416 535-8501, ext. 2

Benefits of the Research and Benefits to You: Your involvement will (hopefully) allow for the inclusion of Black women and gender-diverse people who use drugs in future public policy and debate. The hope is to work with you to mobilize your critical knowledge through the addition of gender and race-based data in relevant scholarship, harm reduction spaces, and broader policymaking channels. At a minimum, we anticipate creating a small network to share your critical knowledge with people impacted by similar policies as well as useful resources related to resistance activities as it pertains to drug decriminalization.

Voluntary Participation and Withdrawal: Your participation in the study is completely voluntary and you may choose to stop participating at any time. Your decision not to volunteer, to stop participating, or to refuse to answer a particular question or questions will not influence your compensation, the nature of your relationship with me, or with York University either now, or in the future. If you stop participating, you will still be eligible to receive the CDN$30 President's Choice gift card for agreeing to be in the project, even if you withdraw without completion of the research. In the event you withdraw from the study, all associated data collected will be immediately destroyed wherever possible.

Confidentiality: Unless you choose otherwise all information you supply during the research will be held in confidence and unless you specifically indicate your consent, your name will not appear in any report or publication of the research. As a measure to promote anonymity and mitigate the risk of being identified, all participants will be assigned pseudonyms, and identifying characteristics will be omitted. We will keep a master list that identifies you to your coded information, but this master list will be kept secure and available only to the researchers, L. Hassan and A. De Lisio. Any information that can identify you, such as audio recorded data (which cannot be considered anonymous) will remain confidential. Confidentiality will be provided to the fullest extent possible by law. The data collected in this research project may be used –in an anonymized form] - by members of the research team in subsequent research investigations exploring similar lines of inquiry. Such projects will still undergo ethics review by the HPRC, our institutional REB. Any secondary use of anonymized data by the research team will be treated with the same degree of confidentiality and anonymity as in the original research project. This study will use the ZOOM platform to collect data, which is an externally hosted cloud-based service. When information is transmitted over the internet privacy cannot be guaranteed. There is always a risk your responses may be intercepted by a third party (e.g., government agencies, hackers). Further, while York University researchers will not collect or use

IP addresses or other information which could link your participation to your computer or electronic devices without informing you, there is a small risk with any platform such as this of data that is collected on external servers falling outside the control of the research team. If you are concerned about this, we would be happy to make alternative arrangements (where possible) for you to participate, perhaps via telephone or in-person. Please contact Lensa at XXXX or XXXX for further information. Recordings (audio/video) will be saved in a password protected file to research team members' local computer, not the cloud-based service. Please note that it is the expectation that participants agree not to make any unauthorized recordings of the content of a meeting/data collection session. Recordings (audio/video) will be saved in a password protected file to research team members' local computer, not the cloud-based service. Regarding data storage, all data (e.g., audio-recordings, images, electronic copy of transcripts) will be anonymized and stored in a password-protected hard-drive in a locked cabinet. All data will remain in my possession for 10 years (with the exception of third-party translation, see below), until the end of my research which may extend into doctoral work. After which, all data will be responsibly destroyed, as outlined in the ORE application, and with particular attention paid to potentially identifiable information.. Contact information for the myself and my supervisor (Amanda De Lisio) will be shared, should a participant wish to withdraw their data from the dataset.

- *If third-party translation is required:* All identifiable information from the audio-recording will be removed audio recordings will be shared with a translator using a password-protected hard-drive and then, immediately deleted from the hard-drive once transcribed. It is also the expectation that the translator does make not any unauthorized or undisclosed copy/recording of the content, and that if an audio file is downloaded for the purposes of transcription, that it is then immediately deleted from the computer.

Potential Risks to Data Security: If it is most convenient for you, your interview can be conducted via Zoom, an externally hosted cloud-based service. When information is transmitted over the internet privacy cannot be guaranteed. There is always a risk your responses may be intercepted by a third party (e.g., government agencies, hackers). Further, while York University researchers will not collect or use IP addresses or other information which could link your participation to your computer or electronic devices without informing you, there is a small risk with any platform such as this of data that is collected on external servers falling outside the control of the research team. If you are concerned about this, we would be happy to make alternative arrangements (where possible) for you to participate, perhaps via telephone. Please contact the researcher for further information. Recordings (audio) will be saved in a password protected file to research team members' local computer, not the cloud-based service. Please note that it is the expectation that participants agree not to make any unauthorized recordings of the content of a meeting / data collection session.

Questions About the Research? If you have questions about the research in general or about your role in the study, please feel free to contact Lensa Hassan either by telephone at or by e-mail (XXXX) and/or Dr. Amanda De Lisio (XXXX). You may also contact the Graduate Program Director in Kinesiology & Health Science, Dr. Alison Macpherson by e-mail (XXXX). This research has received ethics review and approval by the Human Participants Review Sub-

Committee, York University's Ethics Review Board and conforms to the standards of the Canadian Tri-Council Research Ethics guidelines. If you have any questions about this process, or about your rights as a participant in the study, please contact the Director, Research Ethics in the Office of Research Ethics, 3rd Floor, Kaneff Tower, York University by phone (416-736-5201) or e-mail (ore@yorku.ca).

Legal Rights and Signatures:
I, _____, consent to participate in the research study, "Black Feminist Geographies of Harm Reduction: Race, Space & the Embodied Consequences of Drug Use in Toronto, Canada" conducted by Lensa Hassan. I have understood the nature of this project and wish to participate. I am not waiving any of my legal rights by signing this form. My signature below indicates my consent.

Signature_____ **Date**_____
Participant

Signature_____ **Date**_____
Principal Investigator

Additional consent, if applicable

1. **Audio recording**
   I consent to the audio-recording of my interview(s). Y / N
2. **Video recording**
   I consent to the use of images of me (including video and other moving images), my environment and property in the following ways (please check all that apply):
   - In academic articles ☐ N ☐ Y
   - In print, digital and slide form ☐ N ☐ Y
   - In academic presentations ☐ N ☐ Y
   - In media ☐ N ☐ Y
   - In thesis materials ☐ N ☐ Y
3. **Photographs**
   I consent to the use of images of me, my environment and property in the following ways (please check all that apply):
   - In academic articles ☐ N ☐ Y
   - In print, digital and slide form ☐ N ☐ Y
   - In academic presentations ☐ N ☐ Y
   - In media ☐ N ☐ Y
   - In thesis materials ☐ N ☐ Y
4. **Consent to waive anonymity**
   I consent to the use of my name in publications arising from this research. Y / N
5. **Consent to use of quotes**
   I consent to the use of quotations in any final reports/publications. Y / N

Appendix F: List of Local Resources for Interview Participants

Last date modified: March 12, 2023

Organization Name	Services Offered	Contact Information
Black Coalition for Aids Prevention Harm Reduction Program	Bi-monthly Harm Reduction drop-in sessions "for ACB (African Caribbean, Black) substance users to share their thoughts and ideas in discussions on topics that affect our community such as racism, oppression and the excessive use of force by police" (BCAP, 2023)	Trans Engagement Coordinator Email: k.wiltshire@black-cap.com Link: https://bcapconnects.com/hr-resources/
The Centre for Addiction and Mental Health (CAMH): Substance Use Program for African Canadian Caribbean Youth	Culturally competent mental health Assessment, individual treatment, and group treatment	Address: 80 Workman Way, Toronto, ON, M6J 1H4 Contact Phone Number: Access CAMH: 416 535-8501, ext. 2 Link: https://www.camh.ca/en/your-care/programs-and-services/substance-use-program-for-african-canadian-caribbean-youth