



# A BRIEF HISTORY OF PROHIBITION IN BC

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Compassion, Inclusion, Engagement

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*The bulk of this document was created on the ancestral, traditional and unceded territories of the Katzie, x<sup>w</sup>məθkwəyəm (Musqueam), Skwxwú7mesh (Squamish), and selílwitulh (Tsleil-waututh) Nations. We have a responsibility to acknowledge the impacts of prohibition and racism experienced by First Nations, Inuit, and Metis Peoples and how these impacts are exacerbated by the continued criminalization of people who use drugs.*



SECTION ONE

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# A BRIEF HISTORY OF PROHIBITION IN BC



# HOW DID WE GET HERE?

In 2020, the province of British Columbia (BC) had nearly *five deaths a day* from opioid overdose.

BC is not alone, the numbers of deaths related to opioid use across Canada is *catastrophic*.

## QUESTIONS

How did this happen?

How does society get to a point where that many people die a day from overdose?

How does a society get to a point where a large part of the population is made to feel shunned and unwanted?

There are a few ways to explore these questions. If you want to know what a society values, it is important to look at where the money is being spent. You can google a government and they will have plans and reports that tell the public where money is going.

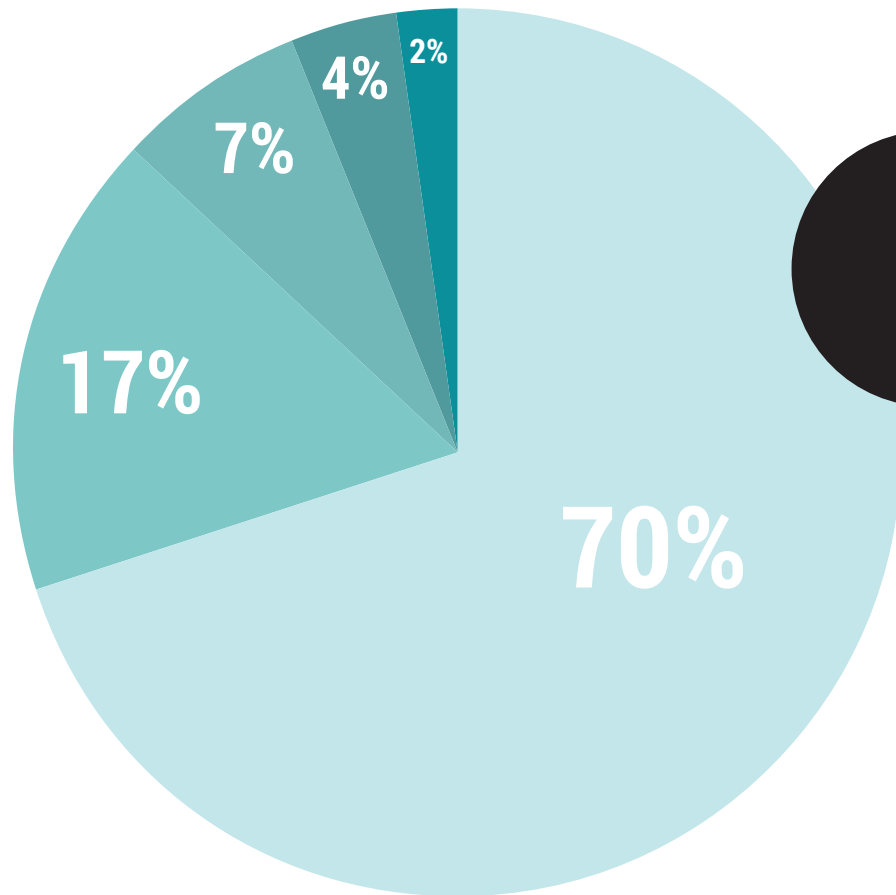
Reading government reports can be confusing as they will report once per year; or every 5 years, or even every 10 years. Or they will do things like report 'substance use' spending as 'prevention', and upon closer look they will have put the money under 'corrections', funding for prisons. They also make it really hard to find current breakdowns of the budget that is spent on substance use.

As an example, not so long ago the Canadian Federal government spent \$500 million on a National Anti-Drug Strategy. Here is a report from CBC on a study of the Strategy, which suggests that "it was a failure": <https://www.cbc.ca/news/canada/canada-s-anti-drug-strategy-a-failure-study-suggests-1.636054>

To continue our example, let's think about the National Anti-Drug Strategy from a few years back.

**Notice the amount for harm reduction.** What do you think about how the money is divided up? Think of the government at that time—Stephen Harper's conservative government. Most of it goes to enforcement, with the priority of policing. Prohibition considers drug use a criminal offence and requires police and the justice system. While harm reduction is a bigger part of the budget today, the newly revised *Canadian Drugs and Substances Strategy* still puts much of the funding into enforcement, and makes it harder to find out these current numbers and percentages.

**The logic follows like this:** drugs are a crime, people who do drugs are criminals, so people who do drugs are not valued in society and are in fact criminals (even though treating people who use drugs as criminals is a huge cost to society).



Most of the National Anti-Drug Strategy's \$500 million budget goes to enforcement, with the priority of policing.

**70% enforcement (~70 -95%)**  
**17% treatment**  
**7% coordination and research**  
**4% prevention**  
**2% harm reduction**



#### QUESTIONS

Have drugs always been a crime?

Have drugs always been considered a dangerous menace to society?

Who benefits from drug use being a crime?

If drugs weren't always a crime how did it get that way?

Is *this* the only picture of substance use?

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When you regulate substances and make them part of the everyday, it doesn't look like *this*.

The racist system of prohibition creates this picture.

LET'S TAKE A WALK DOWN MEMORY LANE...

# PROHIBITION

QUESTIONS

What is it?

Is it good or bad?

Where did it come from?

Who benefits from prohibition?

**Prohibition is a policy.**

Let's work it through:

Not so long ago, in 1870, there were 3 opium factories in BC—In Vancouver, Victoria, and New Westminster.

All three had municipal licenses. There were no apparent concerns about opium use, including opium dens, and in fact, opium dens were frequented in BC for 40 years, from 1870-1910.

## Prepare for Prohibition

And at the Same Time Insure That Your Supplies Are  
of the Highest Quality by Placing Your Orders

<p style="text-align: center;"><b>BRANDY</b></p> <p>RENAULT &amp; CO. COGNAC VINTAGE, per Imperial gal. .... <b>\$9.50</b>          CLAYTON &amp; CO. COGNAC, per Imp. gal. .... <b>\$5.00</b>          GODIET FRENES LABOUELLE, per Imp. gal. .... <b>\$5.00</b></p> <p><small>These are thoroughly dependable lines, ideal for medicinal purposes. Quantities are limited. Early ordering is advised.</small></p> <p style="text-align: center;"><b>PORT and SHERRY</b></p> <p>Per Gal. <b>\$2.50, \$2.75, \$3.50, \$4.00 and \$6.00</b></p> <p><small>Port Wines are the production of such a world-renowned firm as Comar, Gordon &amp; Co., Oporto; Sherrys by such equally well-known producers as Sandeman, Black &amp; Co., and Methuen &amp; Co., of Jerez, Spain.</small></p> <p style="text-align: center;"><b>RUM</b></p> <p>JAMAICA, 36 over proof, per Imp. gal. .... <b>\$9.50</b>          JAMAICA, 40 over proof, per Imp. gal. .... <b>\$7.50</b>          JAMAICA, per Imp. gal. .... <b>\$6.00</b>          DEMERARA, 36 over proof, per Imp. gal. .... <b>\$7.75</b>          DEMERARA, 40 over proof, per Imp. gal. .... <b>\$7.00</b>          DEMERARA, per Imp. gal. .... <b>\$5.50</b></p> <p><small>Our Rumms have for long held the highest possible reputation for purity, strength and flavor, and at the present low prices are extraordinary value.</small></p>	<p>WITH</p> <h2 style="margin: 0;">PITHER &amp; LEISER, LTD.</h2> <p style="margin: 0;">173 Water Street Vancouver, B.C.</p> <p style="margin: 0;">Phones Sey. 1081 and 6919</p> <hr/> <p style="margin: 0;">We Deliver to All Parts of the City.</p> <p style="margin: 0;">Special Attention—Country Orders</p>	<p style="text-align: center;"><b>WHISKIES</b></p> <p style="text-align: center;"><small>SCOTCH</small></p> <p>KILMARNOCK, from the famous "Johnny Walker" distillery, per Imp. gal. .... <b>\$5.50</b>          TRACHER'S CELEBRATED HIGHLAND CREAK, per Imp. gal. .... <b>\$4.00</b>          MACDONALD AND BROWN, per Imp. gal. .... <b>\$4.00</b></p> <p><small>When one speaks of "Kilmarnock" and "Tracher" is guaranteed it will be impossible to replace same. The quality of these whiskies is unsurpassable, and at the prices quoted are the greatest possible bargains.</small></p> <p style="text-align: center;"><small>IRISH</small></p> <p>SHAGRAM'S NONPAREIL, per Imp. gal. .... <b>\$3.50</b>          GOODERHAM, WALKER'S OR SHAGRAM'S, per Imp. gal. .... <b>\$4.00</b>          G. &amp; W. SPECIAL, select Rye, proofable, per Imp. gal. .... <b>\$5.00</b></p> <p style="text-align: center;"><small>GERMANY</small></p> <p>MITCHELL'S, Belfast, Ireland, per Imp. gal. .... <b>\$7.00</b></p> <p style="text-align: center;"><small>BOURBON</small></p> <p>CEDAR BROOK, finest proofable, per Imp. gal. .... <b>\$7.00</b></p> <p style="text-align: center;"><b>GIN</b></p> <p>FINE HOLLAND GIN, per Imp. gal. .... <b>\$5.25</b>          GORDON DRY GIN, per Imp. gal. .... <b>\$5.50</b>          BROTHER TOM GIN, per Imp. gal. .... <b>\$7.00</b>          SLOE GIN, per Imp. gal. .... <b>\$7.00</b></p> <p><small>"RASH" A.S.E. Dog's Head Bottling, the world's leading brand. Per case of 4 dozen bottles. .... <b>\$10.50</b></small></p>
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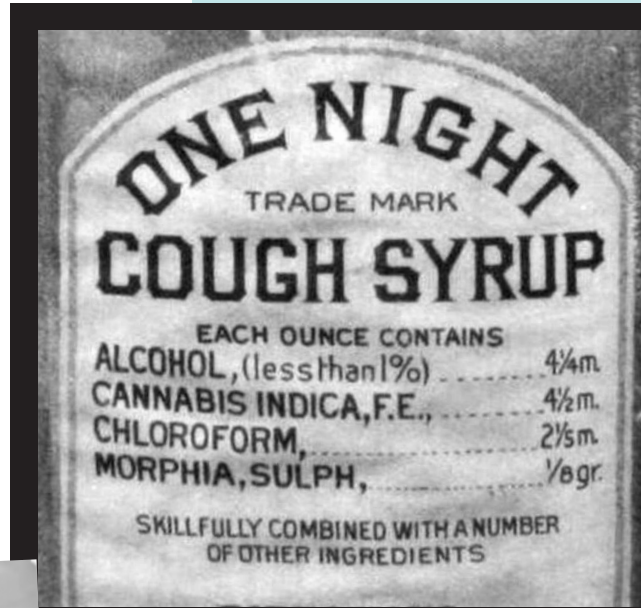
One of the Largest and Choicest Stocks in the Dominion to Be Cleared at  
**WHOLESALE PRICES**

An advertisement for Pither & Leiser, Ltd., 173 Water Street, Vancouver, BC who were selling their stock of alcohol due to prohibition. Dated September 9th, 1917.



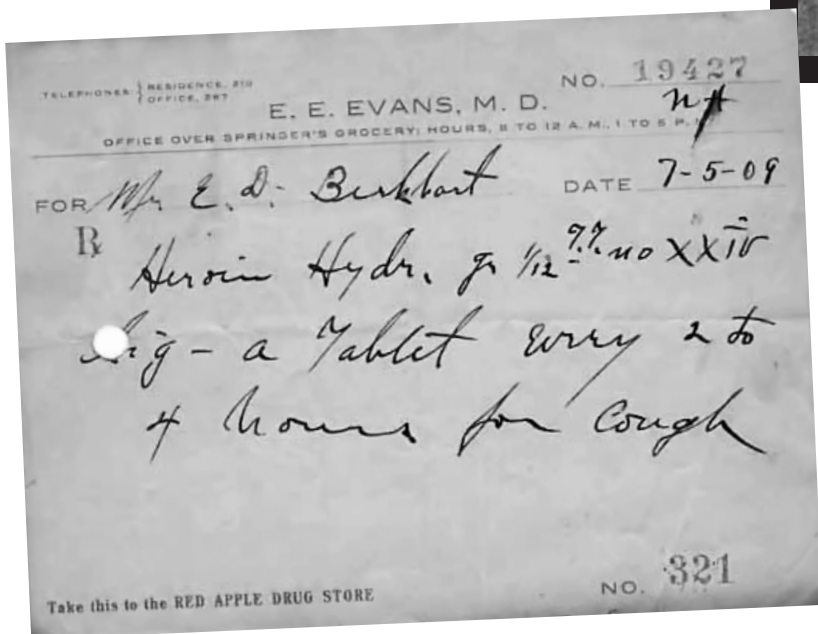
Doctors would prescribe opium for an assortment of ailments.

Here is one for cough:



*One Night Cough Syrup* was sold in the late 1800s, and it contained alcohol, cannabis, chloroform, and morphine.

This mixture was available over the counter and promised to “eliminate your cough in one night so you could sleep” (*Healthline, 2020*).



Prescription for heroin hydromorphone, 1909.



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#### AN IMPORTANT QUESTION

## WHAT WAS HAPPENING IN VANCOUVER IN 1906-1910?

By 1906, labour shortages greatly increased. In any country's history (as well as in present-times), where there is high unemployment there is racism. When people believe there are scarce resources, racism grows. Racism against Chinese migrant workers and immigrants was rampant. The railroad started being created in 1885, and by 1906 Chinese people were referred to in racist terms such as the "Yellow Peril". There was a politically influential group of white settlers called the 'Asiatic Exclusion League' that worked to keep up the racism against Chinese workers—here is a news article that shares more information about it: <https://vancouversun.com/news/local-news/this-week-in-history-1907-the-asiatic-exclusion-league-is-formed>.

In 1907, a rally against Asian people at Vancouver City Hall boiled over and spilled onto the street. People marched to Chinatown and caused a riot with serious damage to Japantown and Chinatown.



After-effects of the anti-Asian rioting in 1907.  
PHOTO BY LIBRARY AND ARCHIVES CANADA

Where there is high unemployment there is racism. In 1907, a huge anti-Asian riot occurred in Vancouver.

*"It should be made impossible to manufacture this drug anywhere in the Dominion...we will get some good out of this riot yet."*

—WILLIAM LYON MACKENZIE KING - AS CITED IN SENATE OF CANADA, 2000



William Lyon Mackenzie King

## SO WHAT HAPPENED?

WHO IS THIS MAN?

### **William Lyon Mackenzie King.**

You may recognize his name as he became the Prime Minister of Canada in 1935. But, in 1908, while Mr. King was the *Minister for Labour*, he made heroin (and other opiates) illegal.

- It is interesting to note that this legislation was not introduced by the Minister of Health, but by the *Minister of Labour*.
- Opium prohibited by the legislation was used primarily by Chinese people. However, tonics and elixirs with opiates, primarily prescribed by doctors and used by White people, were not prohibited.

In the beginning, Canada's "War on Drugs" was not born out of medical concerns or public health concerns. Its roots clearly lie in racism.

Prohibition is a racist policy. If you make opium a crime, then the people who have traditionally used the drug are criminalized and can be thrown in jail.

# Has Prohibition been successful?

## THE GOALS OF PROHIBITION LARGELY GO UNMET:

### GOALS OF PROHIBITION

Decrease substance availability

Make the cost of substances expensive

Prevent people from using drugs

Deter people from the drug trade

### RESULTS OF PROHIBITION

- ✓ Drugs are widely available
- ✓ Drugs are mostly cheap and easy to buy
- ✓ Drugs are used widely by all social and economic classes
- ✓ People make a lot of money from selling illegal drugs and prisons are full of people convicted of dealing drugs

If you make a list of the harms of heroin and a list of where those harms come from, you will see that most of the harm comes from the fact that heroin has been made illegal.

HARM	DRUG	WAR ON DRUGS
EUPHORIA	✓	
WITHDRAWAL	✓	
OVERDOSE		✓
VIRAL INFECTIONS		✓
BACTERIAL INFECTIONS		✓
VIOLENCE		✓
ILLEGAL ACTIVITY		✓



**MORE PEOPLE ARE INCARCERATED TODAY THAN AT ANY OTHER TIME IN HISTORY**

# Prohibition is a Policy

In the end, policies can be modified. Policy is created by people and governments. Policies can be changed by these groups as well.

Undoing prohibition will take time. It is not like flicking a light switch. It requires dismantling systems and creating new ones. It will require people, organizations and governments to work together. **It can be done.**



For more information about prohibition in BC and Canada, check out these two great podcasts:



## CRACKDOWN PODCAST

The drug war, covered by people who use drugs as war correspondents.

<https://crackdownpod.com/>



## CBC ON DRUGS PODCAST

On Drugs looks through the lenses of history, pop culture and personal experience to learn how drugs have shaped our world.

<https://www.cbc.ca/radio/ondrugs>

## SECTION ONE - REFERENCES

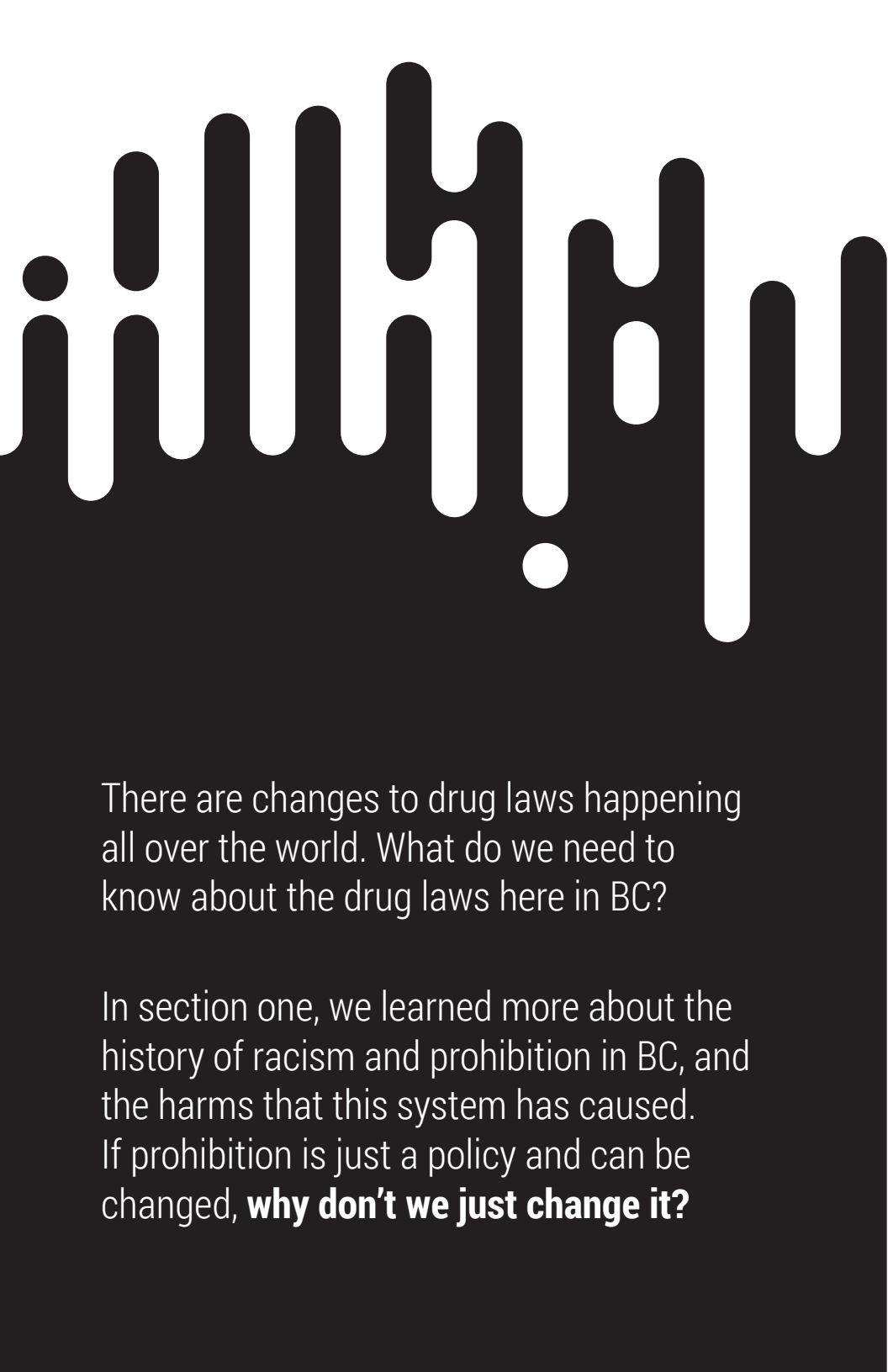
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SECTION TWO

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# DRUG LAWS IN CANADA & BC



There are changes to drug laws happening all over the world. What do we need to know about the drug laws here in BC?

In section one, we learned more about the history of racism and prohibition in BC, and the harms that this system has caused. If prohibition is just a policy and can be changed, **why don't we just change it?**



Drug laws in Canada are part of the Controlled Drugs and Substances Act, created by the Federal government. A piece of information that will help us better understand drug laws, is to know that different levels of government have different levels of control over what changes can be made.

There are three levels of government that we will be discussing:

**Municipal:** the town we live in

**Provincial:** the province of B.C.

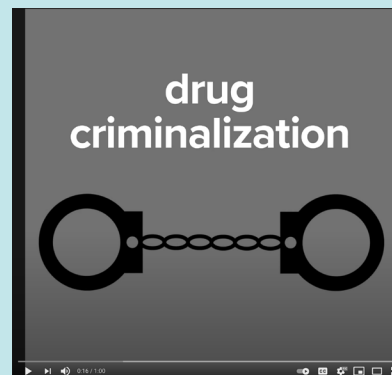
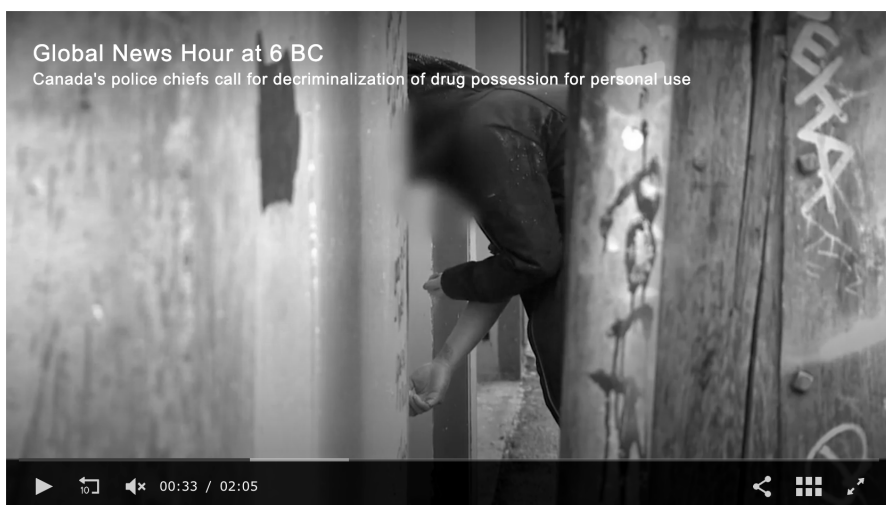
**Federal:** all of Canada

SOME OF THE OPTIONS THAT ARE BEING DISCUSSED BY DECISION-MAKERS RIGHT NOW ARE:

## Decriminalization

**Decriminalization** is a policy approach that is in between criminalization (getting punished for drug use) and full legalization (all drugs are legal). You can't be criminalized for drug use and having drugs, but it doesn't mean there will be access to legally made drugs. You won't be charged for drug use unless you're trafficking—selling drugs. It is not a one-size approach, and can be tailored to what makes sense for the area.

For example, Canada is taking steps to decriminalize drug use for personal possession: <https://globalnews.ca/news/7161215/drug-decriminalization-canada-future/>



Here is a one minute video on decriminalization, created by the Drug Policy Alliance: [https://www.youtube.com/watch?v=iXbtZw69Ugo&feature=emb\\_title](https://www.youtube.com/watch?v=iXbtZw69Ugo&feature=emb_title)

## Legalization

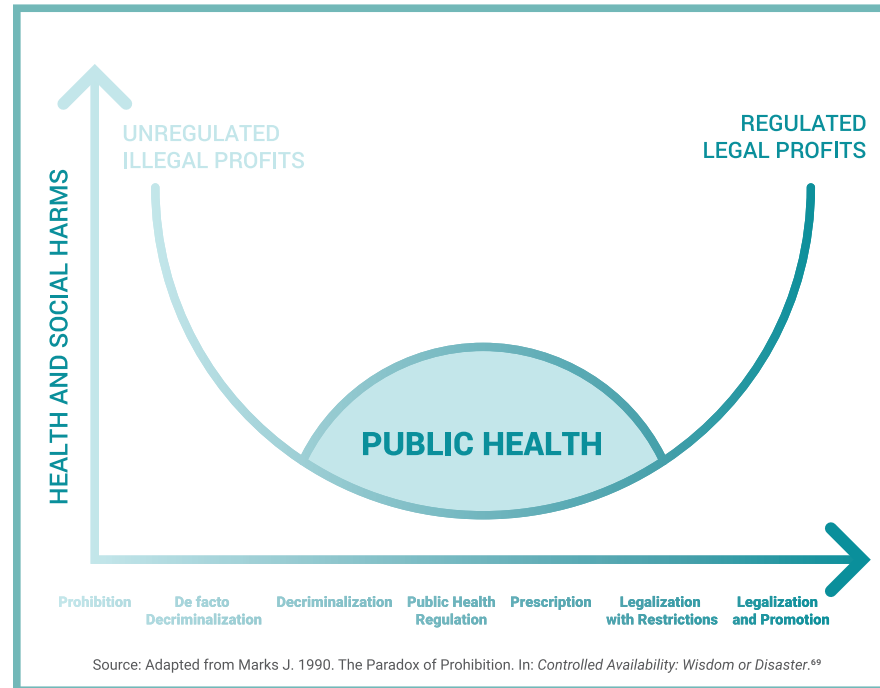
Removing criminal charges for drug use, and creating a system to make, sell and distribute drugs for legal sale.

For example, cannabis and alcohol are legal drugs in Canada.

What have you heard about these options? We will share more about each option, as these are all options that the government is considering as we move forward in changing the drug laws that keep prohibition going.

## CONTINUUM OF DRUG POLICY APPROACHES

On the left side of the curve of the graph, we have prohibition, which is connected to a higher amount of 'unregulated illegal profit', which means illegal drugs of unknown dosage are illegally sold, creating the situation we currently are in. You can also see that with the increase of unregulated illegal profit, that health and safety harms also increase.



On the right end of the graph, we have 'legalization and promotion' that is linked to a high level of '**unregulated legal profit**'—this means that legal companies are making money in a way that isn't controlled, and this approach also has an increase in health and safety harms. An example of this is what we see with alcohol advertising (i.e. lots of commercials on TV are promoting beer and liquor, and the companies that make those products make the money).

In the middle of the curve, we have the area of public health which includes decriminalization, public health regulation (which means that public health controls the substance, like how cannabis is currently approached), and prescription. The graph shows that, when we have public health control, the health and safety harms are decreased. What this all means is that we have to be very careful in which way we choose to approach this issue, as there are risks and benefits with each option.

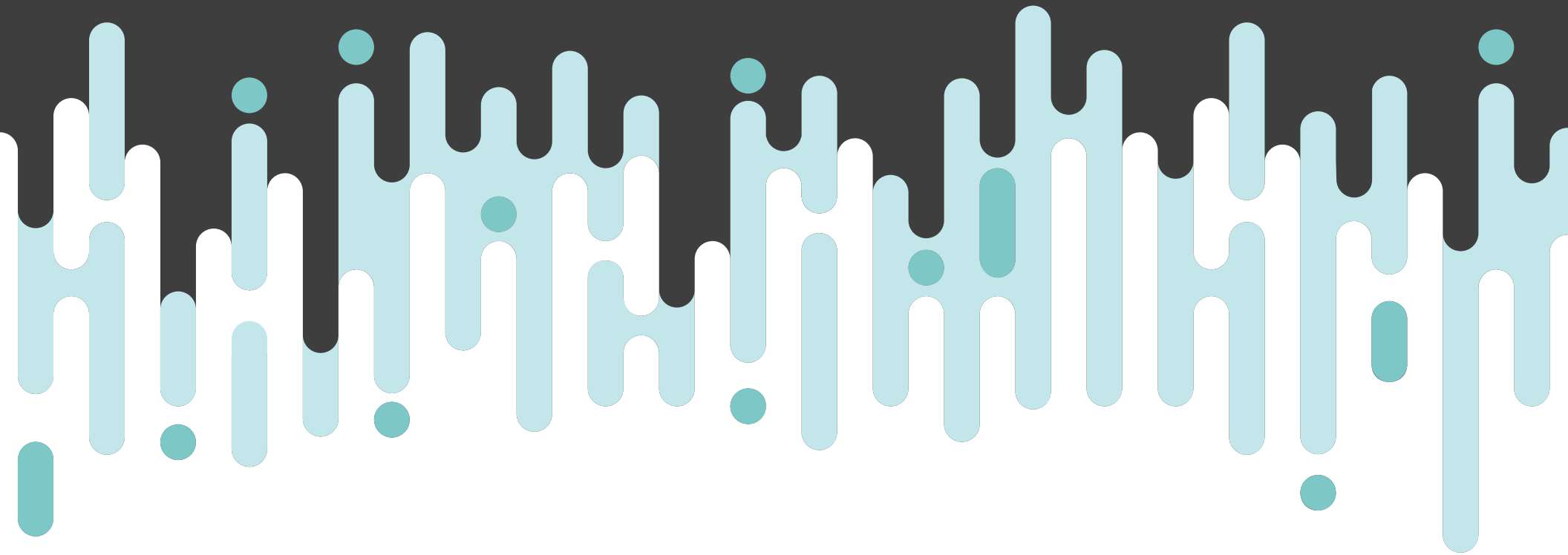
A real-life example of this is changes to drug laws is cannabis legalization in Canada. People that used cannabis before it was legal enjoyed relatively cheap prices, lots of variety and choices, and had lots of places to buy it from, but still faced the risks of criminalization, possible contamination (not always 100% sure you got what you thought you were buying) and could be charged or fined for use of cannabis. After cannabis was legalized, the government took control of the production, sale and distribution of cannabis, and this legally available cannabis was slow to get access to in a legal way (*the first and only retail store for some time was in Kamloops*), and was generally seen as more expensive and poorer quality.

So, what we mean to say here, is that what actually happened was different than what a lot of people expected to happen, which is why it is important to have information about all of the options so that we can advocate for the best option for us.



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SECTION THREE

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# STIGMA, FEAR & OTHERING

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## QUESTIONS

What is Stigma?

What is Othering?

How does it happen?

How do we keep doing this?

How do we change?

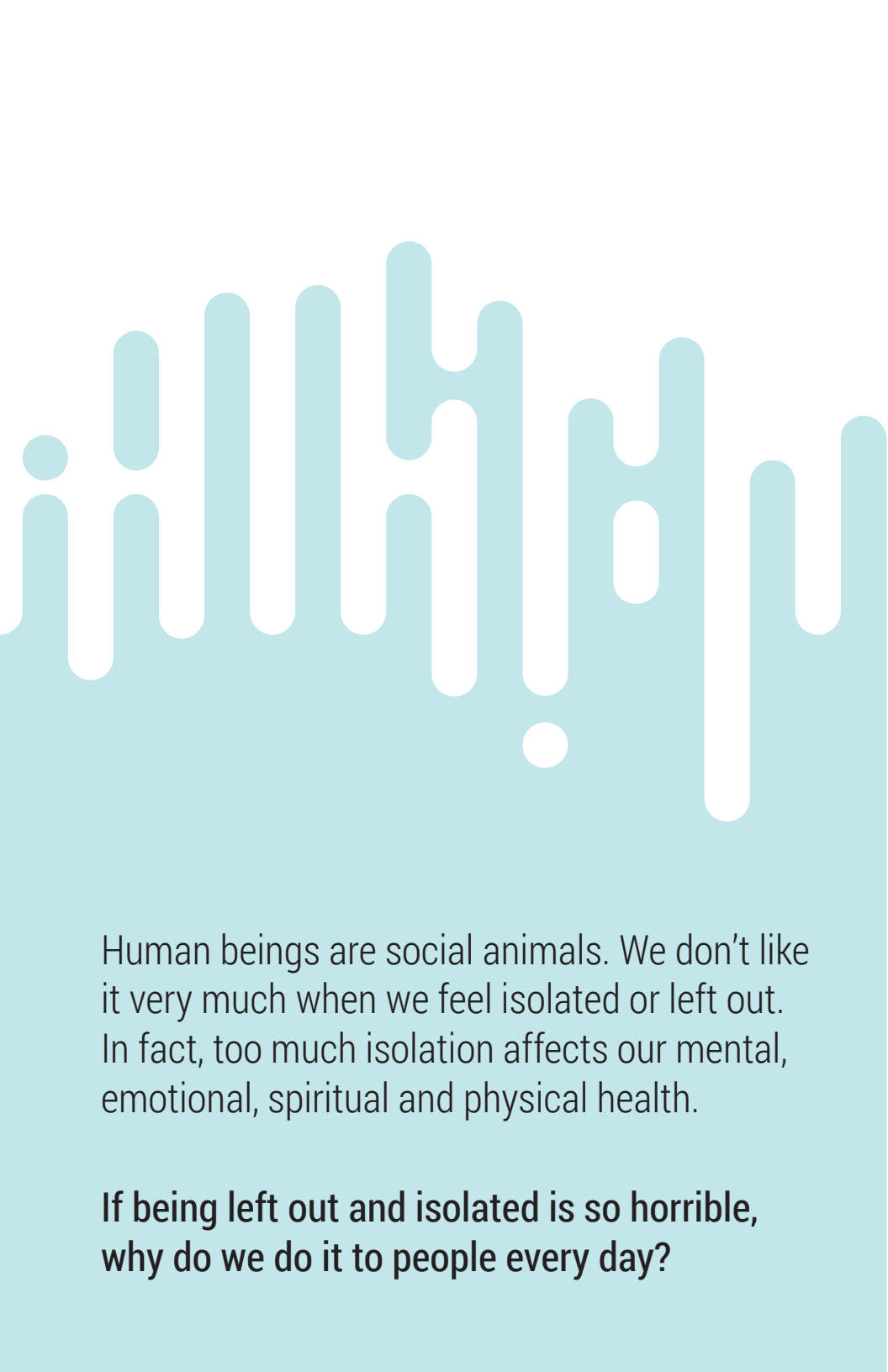
## FIRST, A DEFINITION

# STIGMA

Stigma labels people as “less than”, in ways that:

- Shrink dignity
- Increase shame
- Reduce value in society
- Create barriers to good quality services
- Affect funding

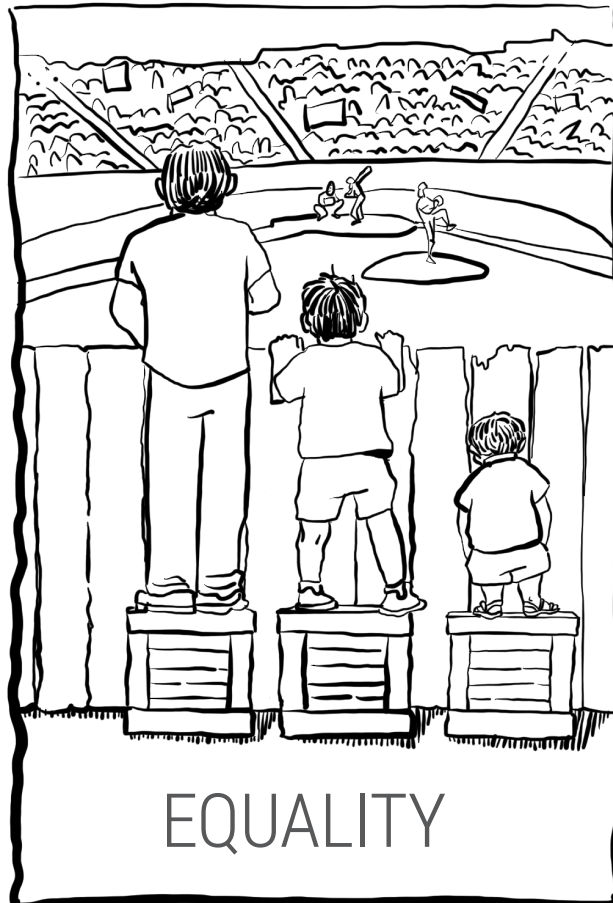
Stigma highlights social difference and causes inequity in class, race, gender, sexuality, and the other elements that make us who we are.



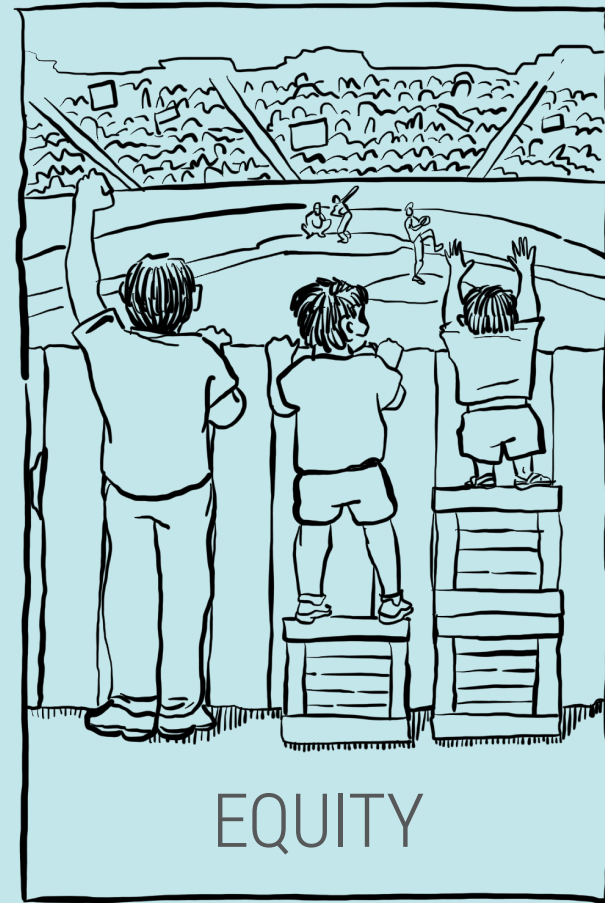
Human beings are social animals. We don't like it very much when we feel isolated or left out. In fact, too much isolation affects our mental, emotional, spiritual and physical health.

**If being left out and isolated is so horrible, why do we do it to people every day?**

## A NOTE ON EQUALITY VS EQUITY



VS



If we treat everyone exactly the same, there may still be inequities. **Imagine 3 people trying to see over a fence to watch a ballgame.**

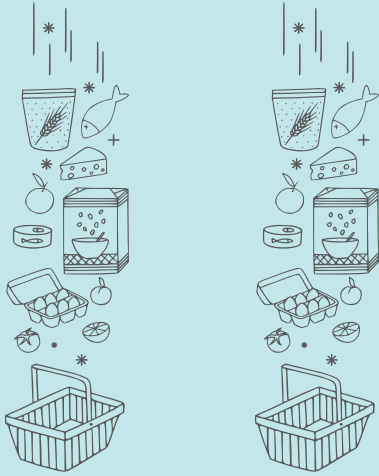
To treat them equally, we give each person one box to stand on, but the smallest person still can't see.

To achieve equity, we recognize that the tallest person doesn't actually need a box. But the smallest one needs an extra boost.

Now, they can all see over the fence. What this shows us is that different people will need different levels of resources in order to reach their full potential.

## An example of what equity vs equality looks like in real life:

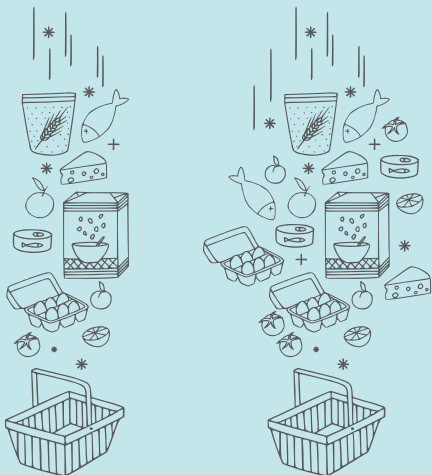
A local grocery store makes food bundles for families at Christmas:



### EQUALITY

Assumes that everyone benefits from the same supports.

Each bundle gets the same groceries.



### EQUITY

Recognizes people will need different supports.

The local store understands that some families are bigger than others and doubles up on some products. Everyone gets what they need.

## OTHERING

People are often surprised that they participate in perpetuating stigma or in “othering” behaviours.

### EFFECTS OF ‘OTHERING’

- Isolation
- Feelings of shame
- Rejection
- Depression
- The world feels unsafe

### HOW DOES IT HAPPEN?

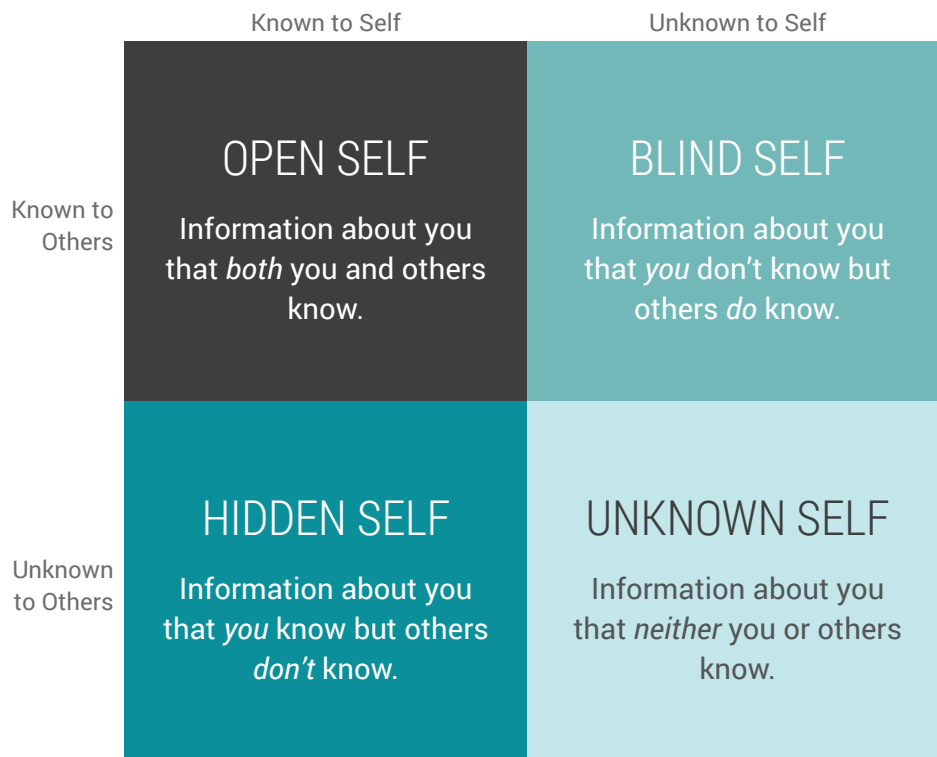
One way to understand how this happens is to consider three things:

1. How do we know ourselves?
2. What is culture?
3. How do we protect the things we value?

# How do we know ourselves?

Social scientists describe how people incorporate **what we think others are thinking of us**, to inform ourselves, about ourselves.

We create an identity for ourselves based on our perceptions of how other people see us. People strive to belong to and be accepted by a group. There is another way of thinking about how we know ourselves. Notice that our perception is always in relation to the people in our life.



Johari Window. From Successful Culture International. (2016).  
<https://www.successfulculture.com/build-more-self-awareness-stronger-culture-using-johari-window/>

People strive to belong to and be accepted by a group.

**Human beings are social animals.** Groups can be highly invested in maintaining agreed upon values and norms. More specifically, groups are highly invested in the right way and the wrong of being in that group, and 'norms' tell us how to belong.

When an individual looks or acts differently, this challenges accepted group norms. The person acting outside of the group norms is perceived as a threat and labeled as "other". When people become "other" they are seen as less valuable and less human.

Once an individual is seen as less human it is easier for the group to ridicule them and to treat them as less deserving.

We make judgments and assumptions every day: some are helpful and help us survive but others can be hurtful and harmful.

Judgments and assumptions come from our values and our understanding of what is the right way and wrong way of doing things, or our understanding of social norms

What the.....????? What are "social norms"?

Partly, social norms come from our social roles: mother, sister, brother, teacher, citizen etc. Each role has cultural norms and expectations. This brings us to culture...

# What is Culture?

## THERE ARE MANY DIFFERENT CULTURES. CAN YOU THINK OF A FEW?

Is everyone inside a culture completely the same?  
Or are there individual differences?

How do we draw boundaries around cultures? Where does one stop and another begin? African American? Chinese Canadian? How about youth culture or a workplace culture?

Most people would agree that there is a thing called culture but how do you draw lines around it? How do you define it?

We do know culture is not genetic and that it is made by human beings.

## WHAT ARE ELEMENTS OF CULTURE?

- Language
- Religion
- Arts and styles
- Customs (like good manners)
- Food (and views on what counts as food and what doesn't)
- Tastes and standards of beauty
- Family structures and notions of family dynamics
- Attitudes towards sex and gender
- Attitudes towards property
- Attitudes towards the boundaries of the self

These elements are what make up all cultures. However, it is the dominant culture that creates what is valued and what is considered 'right'.



We know that groups of people create culture and that as human beings, we want to belong to a group.

## **We create normal.**

Belonging and identity are so important to people, they are recognized as a measure of health. Without belonging and identity there is isolation, sickness and vulnerability.

People are influenced by social norms and values, and when they accept dominant values and beliefs from society, and don't question cultural or racial stereotypes they can increase stigma.

People who do not fit the decided social norms are viewed as "not a part of" and separate to the 'in' group. People who are viewed as separate, can easily be seen as a threat. This threat can be small or large. The threat is large if the dominant group is feeling vulnerable. Dominant groups feel vulnerable when resources like food, housing, land, and jobs are not plentiful. This is called *resource scarcity*.

WHAT DOES NORMAL LOOK LIKE IN EUROPE IN THE 1680S?

White, male, religious, big hair...



WHAT DOES NORMAL LOOK LIKE IN NORTH AMERICA IN THE 1980S?

Mostly white, a few more women, big hair...




People are surrounded by societal values and norms.

Dominant groups feel vulnerable when resources like food, housing, land and jobs are not plentiful. This is called *resource scarcity*.

What are some ways that humans protect themselves and their group?

Humans create systems like Prohibition to *not only* give meaning to society but to protect themselves from the idea that the world is chaotic and resources are scarce.



Crowd of people gather outside the New York Stock Exchange following the Crash of 1929

## SYSTEMS IN SOCIETY

- Religion
- Education
- Health
- Economics/ Money
- Politics

Difference is thought of as a threat, or something to be taken advantage of. When difference threatens one or more of these systems the difference needs to be controlled.

## WHAT'S ONE WAY THAT SOCIETY CONTROLS A GROUP OF PEOPLE?

If a group of people are posing a particular threat, and are perceived to be in the way of the dominant society achieving something, criminalizing a part of their culture or a typical behavior allows the dominant society to legally remove them and place them in jail.

Prohibition is an example of a policy that removes, unfairly criticizes, and isolates people.

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Prohibition ensures that a person who uses drugs is breaking the law and is therefore a *criminal*. Criminalizing and excluding people has the added '*benefit*' that the stigma is kept at the individual level.

When we blame the individual, we do not have to respond and change our systems and institutions to address the impact of social inequities because it is **seen as** the individual's fault.

For example, when a person struggles with addiction, we can blame them and not look at the larger issues at the heart of addiction. These issues include negative life events, and a lack of resources and support.

How do we change?

## FIRST, A NOTE ABOUT LANGUAGE: WHY DOES IT MATTER?

Language shapes how we understand the world and allows us to share our social values and meanings.

Using **'people-first language'** is a small but powerful way to have an impact. People-first language acknowledges that people are more than a behaviour. As an example, instead of using the word 'druggie' or 'addict, they become 'a person who uses drugs'. A 'criminal' becomes a person who has been to jail or corrections.

Using person-first language allows the human being to be all the things that they are. For example, an artist, a dancer, a sister etc. It does not label someone for a behaviour society sees as negative.

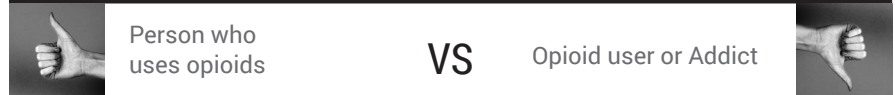
## MORE HELPFUL STRATEGIES TO COMBAT STIGMA:

- Take a cultural safety and humility course
- Learn what cultural safety means
- Check our assumptions about people, and ourselves
- Ask questions
- Explore history
- Learn about human rights
- Participate in public education
- Support anti-discrimination legislation
- Be conscious of the language we use
- Join a group that is diverse

## FOUR GUIDELINES TO USING NON-STIGMATIZING LANGUAGE

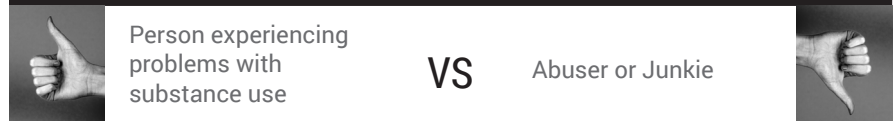
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### USE PEOPLE-FIRST LANGUAGE



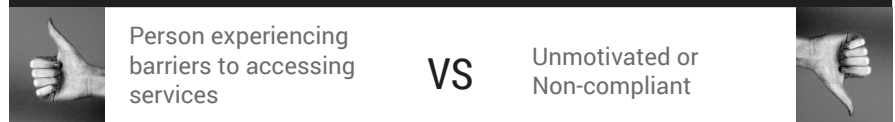
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### USE LANGUAGE THAT REFLECTS THE MEDICAL NATURE OF SUBSTANCE USE DISORDERS



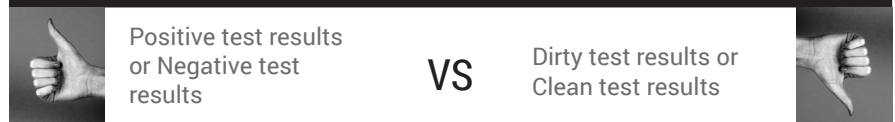
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### USE LANGUAGE THAT PROMOTES RECOVERY



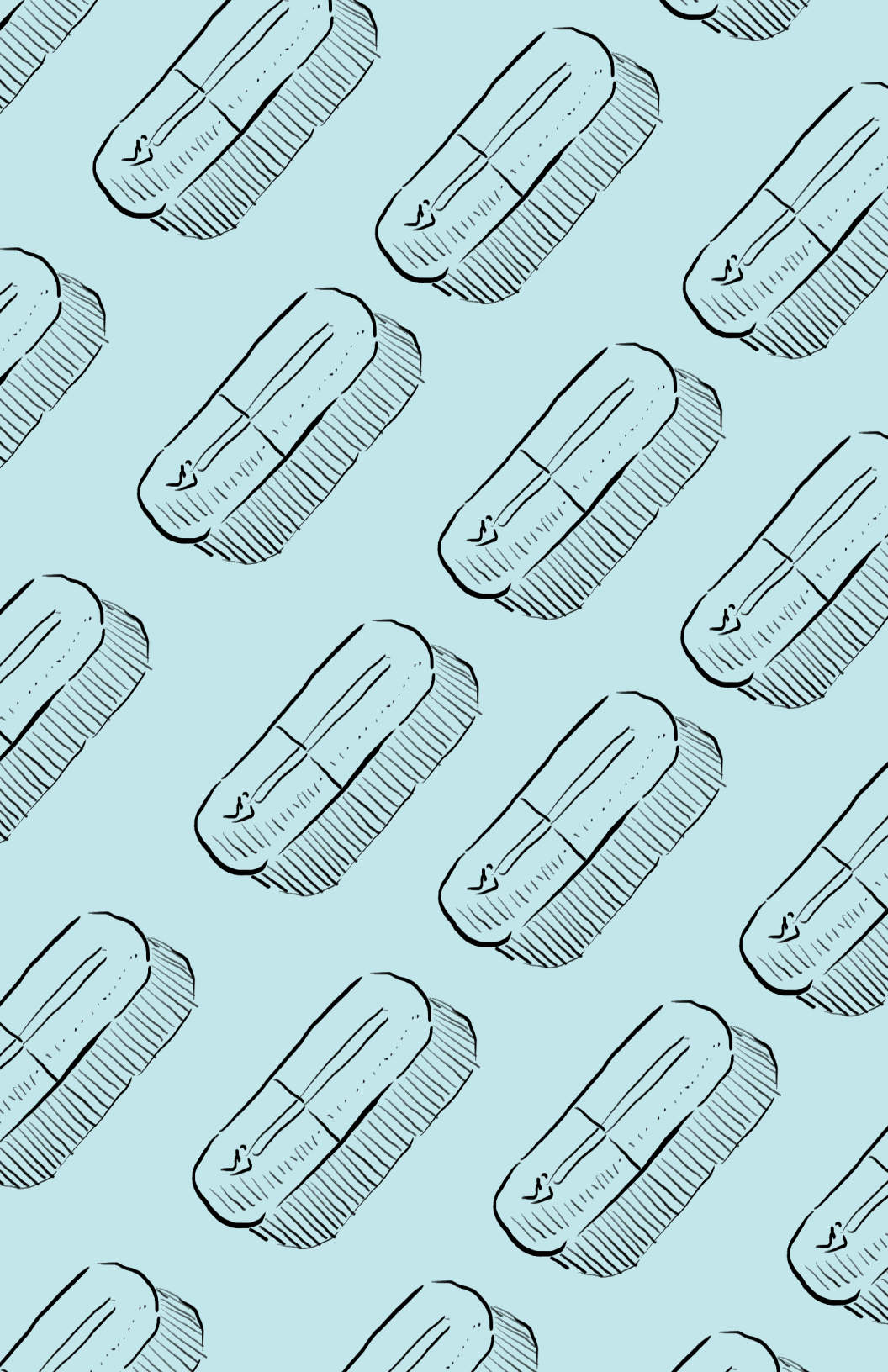
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### AVOID SLANG OR IDIOMS



Visit [towardtheheart.com](http://towardtheheart.com) for more information.

Also, read BC CDC COVID guidelines:  
<http://www.bccdc.ca/Health-Info-Site/Documents/Language-guide.pdf>



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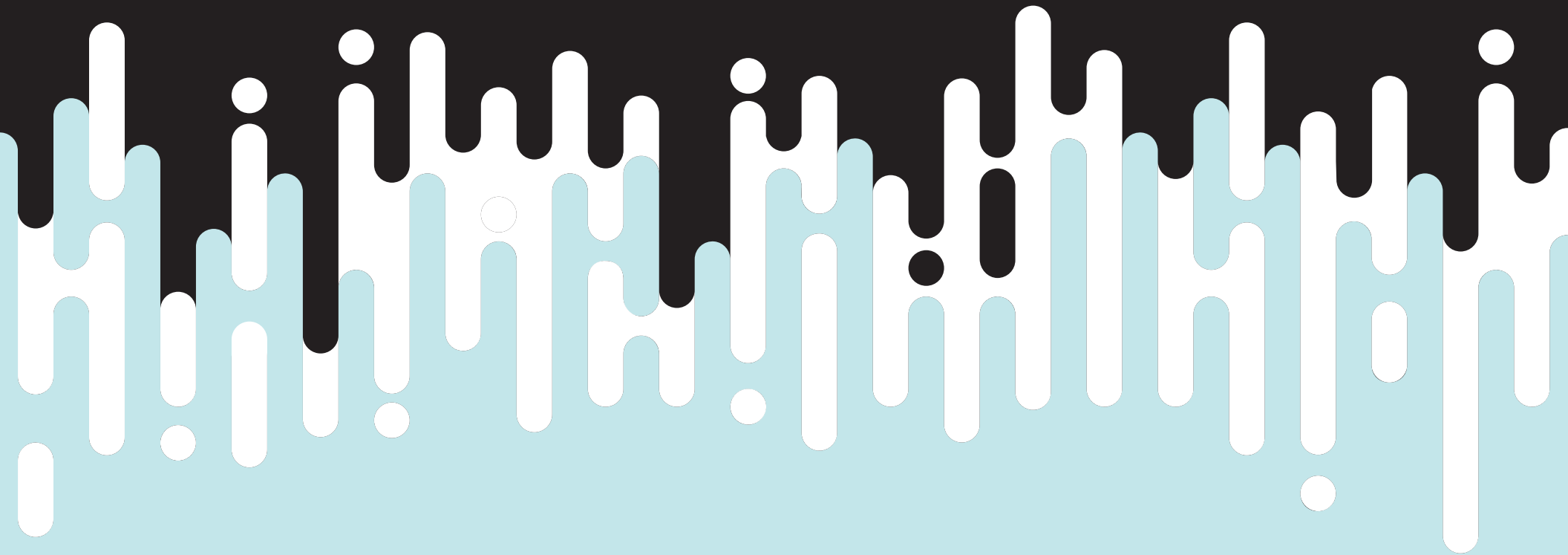
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SECTION FOUR

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# INDIGENOUS EXPERIENCES OF PROHIBITION

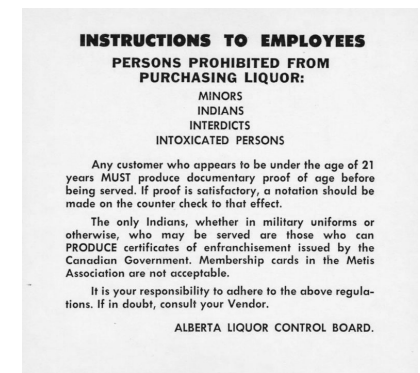
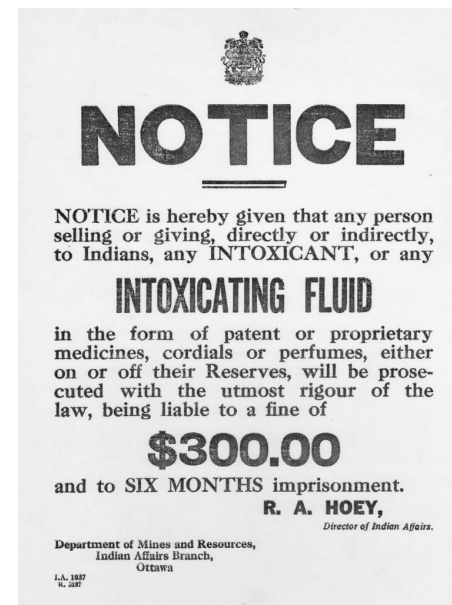


As we learn more about the impacts of prohibition, it is important that we take some time to learn more about the additional impacts of prohibition that First Nations people experience. If we are not Indigenous, we are visitors/settlers on this land, as First Nations people did not agree to give away their territories. Because they are the original caretakers of this land and because Indigenous people have been pushed down and pushed out by greater society since settlers came on this land, it is important that we learn more about Indigenous people and their experiences so that we can help support positive change and be allies in this work.

Did you know that in Canada, First Nations people were prohibited from buying alcohol from 1884-1951?

**Indigenous** is the preferred term to describe the original inhabitants of the land. If you know the Nation (i.e., Squamish or Haisla), use that name. 'Indian' is now considered a racist term, yet it is still used by the government as it has a specific legal meaning because of the **Indian Act** and is mentioned in this summary.

'**First Nations**' can be used instead of 'Indian', to describe Indigenous people with "Indian Status" (though not all First Nations people have Indian Status).



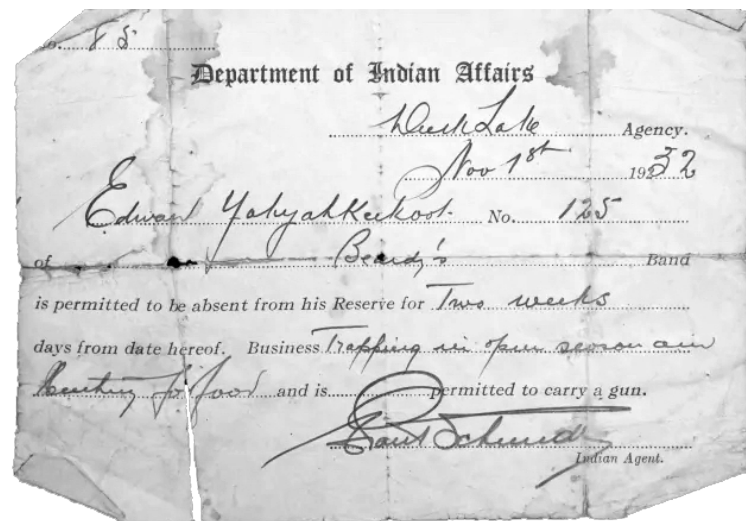
Lac La Biche Museum (n.d.).  
<https://laclabichemuseum.com/tag/first-nations/>

**IN CURRENT TIMES, THAT \$300 FINE  
WOULD BE THE EQUAL TO \$7,300!**

## HOW DO YOU THINK THIS IMPACTED PEOPLE'S DRINKING?

Though Indigenous people have many strengths and many Indigenous people have strong cultures (whether they are connected to their culture or are learning more about it), Indigenous people have experienced a lot of harms, through the negative impacts of government policies, land theft, and banning people from practicing their culture and traditions. There is a lot to say and a lot to learn about these negative impacts, and we would like to focus on how these impact Indigenous people that use drugs.

Whether or not an Indigenous person is using drugs, there is a high chance that they have experienced racism, stigma and discrimination from society, the healthcare system, the criminal justice system, and so on. We mention this not to make people feel sad, but to highlight the importance of having this discussion. With this understanding, you can imagine that an Indigenous person who uses drugs is impacted even more by these negative experiences.



The Indian Act, which was created in 1876, has now been in effect for over 145 years—and counting. We need to know about the Indian Act, because it helps us answer certain questions that might come up, such as: why does it feel like Indigenous people get ‘special’ treatment, why are we spending time talking about territory acknowledgment, why are Indigenous people at higher risk of experiencing an overdose, etc.?

The Indian Act, written in 1876, governed every aspect of a First Nations person's life. It made ‘Indians’ wards of the state, so every aspect of First Nations peoples' lives were controlled by the government:

- A First Nations person's name became tied to a ‘status number’ (still is!)
- Indigenous people were forced to live on small reservations, as their land was taken. The reservation land was much, much smaller, or sometimes not even technically ‘their’ land—they were forcefully moved, so you can imagine how this would create poverty, disconnect people from their land, culture, food and medicine, and contributes to problems we still see today
- Indigenous people had to have a pass to leave the reserve
- Indigenous people were told when, how, and where they could log or hunt—keep in mind, Indigenous people had ways of managing and sharing the land for 10,000+ years before this
- There are many more aspects to the Indian Act. There are many articles, videos and websites that can teach you more.

Saskatchewan Archives Board (n.d.), as cited in CBC. Indian Pass System. [Photo]. [https://i.cbc.ca/1.3454147.1460566069!/fileImage/httpImage/image.jpg\\_gen/derivatives/16x9\\_780/pass-system-for-yahyahkeekoot.jpg](https://i.cbc.ca/1.3454147.1460566069!/fileImage/httpImage/image.jpg_gen/derivatives/16x9_780/pass-system-for-yahyahkeekoot.jpg)

In 1951, there were some changes to the Indian Act, and one of the changes took away the ban from First Nations people to buy alcohol. We mention this because this specific piece of prohibition policy only affected First Nations people, and like other types of prohibition, it made people who drink into criminals, it isolated people, and caused people to drink in secret and unsafe ways.

## ALSO, IT DIDN'T WORK!

People still drank, bootleggers made money, and so did the people who reported the people they 'caught' drinking.

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First Nations people are **5X** more likely than non-First Nations to experience an overdose event

First Nations people are **3X** more likely than non-First Nations to die due to an overdose

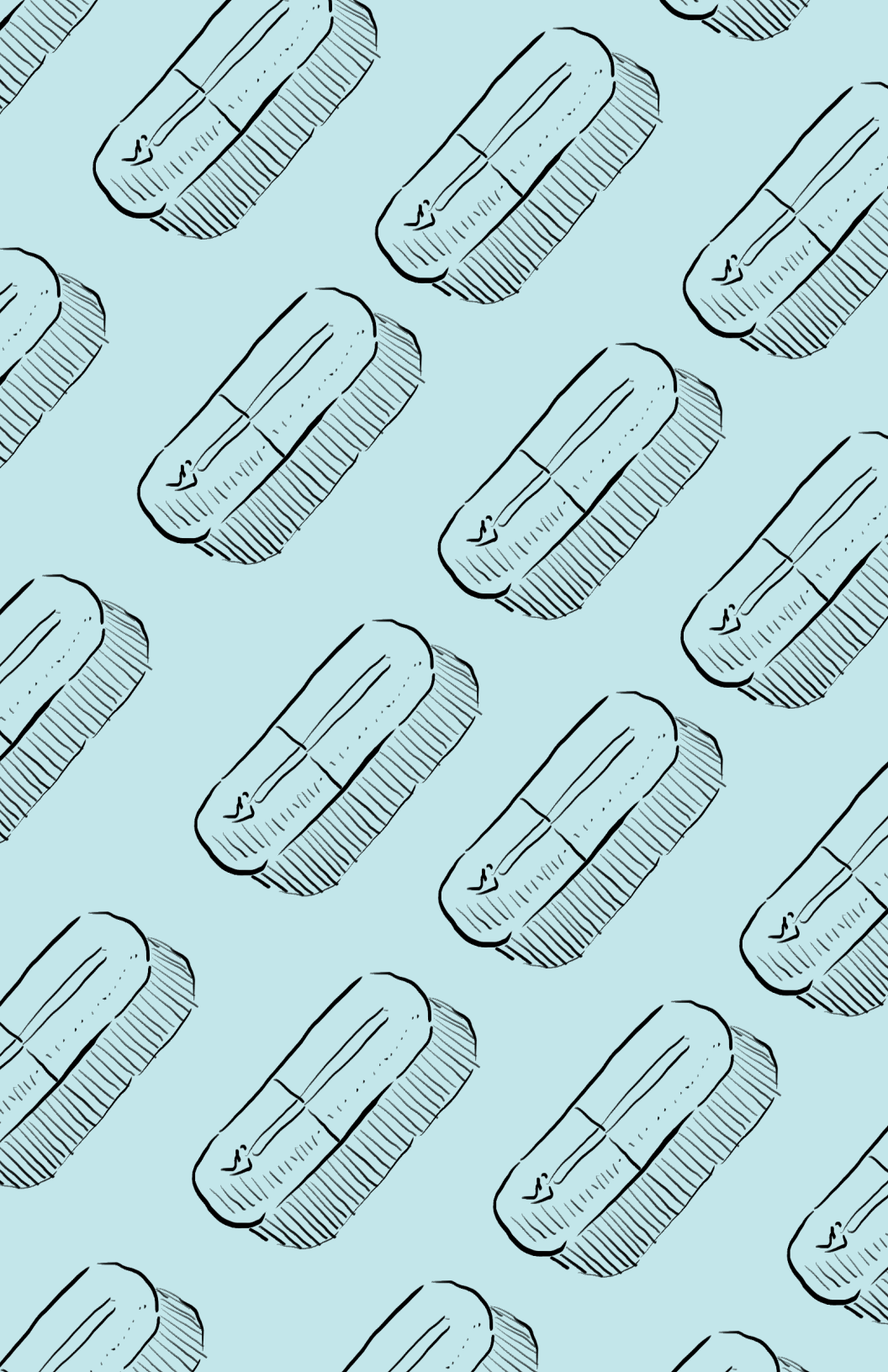
First Nations Health Authority (2017). Overdose Data and First Nations in BC. [https://www.fnha.ca/AboutSite/NewsAndEventsSite/NewsSite/Documents/FNHA\\_OverdoseDataAndFirstNationsInBC\\_PreliminaryFindings\\_FinalWeb\\_July2017.pdf](https://www.fnha.ca/AboutSite/NewsAndEventsSite/NewsSite/Documents/FNHA_OverdoseDataAndFirstNationsInBC_PreliminaryFindings_FinalWeb_July2017.pdf)

The negative impacts of the Indian Act and prohibition still affect First Nations people, and the resulting poverty, disconnect from culture, and racism, still affect First Nations and Indigenous people to this day, which is why we see that First Nations people are at higher risk of experiencing an overdose. This is a lot of sad information, and learning about it can feel hopeless. We want people to be aware of the history, and we also want people to know that First Nations and Indigenous people are doing a lot of work to improve their situations, and part of that is sharing information on this Canadian history.

First Nations people in BC are working on practicing their cultures, learning and re-learning their languages, learning more about what it means to connect to the land, are taking back control over their healthcare, land management, political organizations, and more.

First Nations people are sharing ideas about what will help improve their communities, and it feels like society is now, more than ever, ready to listen. Indigenous people don't need saving, they have the education and experiences to know what needs to be changed, and it's our job to help out when we're asked.

The best thing we can do to learn more is to listen, to do our own research, and to check out local cultural events when they are open to the public so we can learn more about different First Nations cultural practices that have helped First Nations people **survive and thrive** throughout time.



## SECTION FOUR - REFERENCES

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