

# WHEN PHOTOS TELL THE STORY

I WAS SENT A DREAM BY MY GRANDFATHER WHO IS A VERY POWERFUL MEDICINE MAN AND HE KNEW I WAS STRUGGLING.

## CULTURE

HOW DO I KEEP MY SELF-ESTEEM UP? THAT'S WHY I SMOKE POT.

## DRUG USE

AH GOD MAN, I WAS HOMELESS FOR FIVE MONTHS. AND THEY ALL WATCH OVER YOU, EH. LIKE WE ALL LOOK OVER EACH OTHER. LIKE A FAMILY.

## HOMELESSNESS

MY PLANT. (LAUGHING) I'VE BEEN GROWING THAT AS THERAPY FOR MYSELF.

## PETS AND PLANTS

AND SEE HOW NATURE IS SO BEAUTIFUL AND WHAT YOU CAN ENJOY WHEN YOU'RE NOT DOING DRUGS AND STUFF LIKE THAT. AND WHEN YOU'RE CLEANING UP, HOW YOU NOTICE MORE THINGS AROUND YOU; SO I JUST I HAD TO TAKE PICTURES OF THAT.

## RESILIENCE

# WHEN PHOTOS TELL THE STORY

Using cameras to examine social support and HIV with marginalized populations.



**The participants were each offered a camera and asked to photograph the supports in their lives, with the freedom to define “support” how they needed to.**

The research examined the social networks and care experiences of people living with HIV/AIDS and their informal caregivers, with a focus on low income and stigmatized individuals in Manitoba and Saskatchewan. The study used an adaptation of Photovoice to gather information about the lives of the participants in Winnipeg.

The participants were each offered a camera and asked to photograph the supports in their lives, with the freedom to define “support” how they needed to. Their photos were used as a base for the interviews, becoming a visual representation of their experiences. Despite the cheap disposable cameras, and many “missed shots” because of them, we were privy to information and images that may never have come to light during a facilitated interview alone. The methodology fostered open conversations and the gathering of rich information.

Participants, while dealing with extreme issues of poverty, transience, violence and addictions, often rely on formal organizations for the support that they do not have in their family and friendship circles. While some create social networks among themselves, many are still isolated in the sense that while they have friends, they don’t or can’t necessarily rely on their friends for support. The terms “care giver”, “care receiver”, “formal” and “informal” care do not apply well to describe the experiences of this population. Institutional notions of boundaries between formal caregivers and “clients” are not what they seem to be.

A reader’s theatre piece was created and performed as one way of disseminating the findings of the study. In reaching a wide audience, theatre offers potential to become a catalyst for programmatic change, which is one more step in enhancing the support networks of people living with HIV.

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