



Research Paper

Transitions in income generation among marginalized people who use drugs: A qualitative study on recycling and vulnerability to violence

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ABSTRACT

Background: Income is an important determinant of health among people who use drugs (PWUD). However, understanding transitions between differing types of income generation within the formal and informal economy and how they can be shaped by vulnerability to risk and harm remain poorly understood. This study examines how transitions in income-generating activities are shaped by and influence exposure to violence among marginalised PWUD, in Vancouver, Canada's, Downtown Eastside (DTES) neighbourhood.

Methods: Qualitative interviews were conducted with twenty-six individuals engaged in informal and illegal income-generating activities in the DTES. Interview transcripts were analyzed thematically, focusing on relationships between income generation and violence during the study period between January 2014 to April 2015 and drew upon concepts of social violence when interpreting these themes.

Results: Participants' engagement in informal and illegal income-generating activities represented a means to negotiate survival given multiple barriers to formal employment and inadequate economic supports. Our findings highlight how informal and illegal income-generating activities in the DTES are characterized by structural, symbolic and everyday violence, while transitions from 'high risk' (e.g., sex work, drug dealing) to perceived 'low risk' (e.g., recycling) activities represent attempts to reduce exposure to violence. However, participants emphasized how informal income generation was nonetheless shaped by structural violence (e.g., gendered hierarchies and police harassment), experienced as everyday violence, and introduced exposure to alternate risks.

Conclusion: Our findings underscore the critical role of income generation in shaping exposure to violence, highlighting the need for low-threshold employment interventions targeting PWUD as a central component of harm reduction strategies.

Introduction

North American labour market participation trends have increasingly been characterized by under-employment and precarious employment, accompanied by a rapid reduction in social and economic supports and increased criminalization (Kalleberg, 2011; Wacquant, 2009). Commonly characterized as neoliberal policies, economic deregulation, welfare retrenchment, and the expansion of policies criminalizing the poor (e.g., by-law infraction ticketing), have resulted in social, economic and spatial inequalities that shape labour markets to the detriment of structurally vulnerable populations (Grabb & Hwang,

2009; Katz, 2003; Wacquant, 2010). Here, structurally vulnerable populations are understood as groups occupying marginal positions within societal hierarchies, including labour markets (Farmer, 2004), due to how socio-economic and political arrangements intersect with socio-cultural processes (e.g., racism, sexism, and other forms of discrimination) to shape opportunities and produce disparities in health and social outcomes over time (McNeil et al., 2015; Quesada, Hart, & Bourgois, 2011). Potential linkages between neoliberal labour market restructuring and inequalities in health are a critical nexus for investigation given the embeddedness of multiple forms of disadvantage in processes that link labour market and health trajectories.

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People who use drugs (PWUD) represent one population negatively impacted by neoliberal labour market structures (Bourgois, 1995; valentine, 2011). Unemployment among marginalized PWUD is common (Galea & Vlahov, 2002; Henkel, 2011; Richardson, Wood, Montaner, & Kerr, 2012), with drug-using populations typically characterized as incapable of and adverse to participation in formal employment (Richardson, Wood, & Kerr, 2013), despite evidence suggesting the capacity of PWUD to manage concurrent drug use and employment (French, Roebuck, & Alexandre, 2001; see also Moore, Pienaar, Dilkes-Frayne and Fraser (2017)). The neoliberal rhetoric of individual responsibility, which shifts responsibility from the state to the individual, further serves to characterize unemployed PWUD as unproductive and culpable, obscuring the influence of macro systemic factors (Fraser & Moore, 2008). Problematic substance use and drug use are too often framed as solely an individual health and/or criminal and moral issue, and in the context of neoliberalism are often discussed without reference to contextual and systemic forces that shape drug use. However, this framing of the willingness and readiness of PWUD to engage in formal employment ignores a lack of systematic empirical evidence to support this claim. Further, it oversimplifies heterogeneous causal pathways linking drug use and labour market trajectories, as well as the considerable social and structural barriers that limit their access to labour markets, including but not limited to: health status, limited work skills or experience, lack of education, criminal record, low self-esteem, intimate partner violence, minority status and the stigmatization of drug use (Boyd & Boyd, 2014; Chandler, Meisel, Jordan, Rienzi, & Goodwin, 2004; Gutman, McKay, Ketterlinus, & McLellan, 2003; McCoy, Comerford, & Metsch, 2007; Morgenstern et al., 2003). Paradoxically, barriers faced by many marginalized PWUD who experience socio-economic vulnerability stem from a convergence of structural factors and policies that shape access to housing, encounters with criminal justice, welfare, addiction treatment regulations, and employment (Bungay, Johnson, Varcoe, & Boyd, 2010; DeBeck et al., 2011; Galea & Vlahov, 2002; Henkel, 2011; Richardson et al., 2012, 2013, 2016). Unemployment and poverty are significant determinants of health disparities among marginalized PWUD (Galea & Vlahov, 2002; Najman, Toloo, & Williams, 2008). However, the substantial stigma experienced by PWUD, driven by multiple factors including the criminalization of drug use, impedes labour force involvement, while further contributing to health disparities (Damon et al., 2017; Hatzenbuehler, Phelan, & Link, 2013; Livingston, Milne, Fang, & Amari, 2012; Strathdee, Shoptaw, Dyer, Quan, & Aramrattana, 2012). Although the quality and quantity of labour market involvement significantly impacts health, access to formal employment for marginalized PWUD remains limited (DeBeck et al., 2011; Kalleberg, 2011; Richardson et al., 2013; valentine, 2011).

Past quantitative research has characterized the absence of and barriers to formal opportunities as prompting some PWUD to engage in informal or illegal survival work, such as drug dealing, sex work, theft, recycling, squeegeeing (windshield washing) and panhandling (Krebs et al., 2016; Richardson, Milloy et al., 2015). While the heterogeneous forms of informal and illegal income generation among socio-economically marginalized drug-using populations may be characterized by fewer entry barriers and increased flexibility, they commonly involve a broad range of occupational vulnerabilities, including employer exploitation and limited access to social and formal legal protection such as employment insurance, workplace protections and workers' compensation (International Labour Organization, 2014). In many settings, PWUD engaged in informal and illegal income generation are not protected by labour laws and are subject to varying degrees of stigmatization, harassment, violence, apprehension and arrest (Miller & Neaigus, 2002; Parizeau, 2015; Pivot Legal Society, 2016; Richardson, Long et al., 2015). How PWUD move *between* forms of income generation, however, including their attempts to and motivations for such transitions, remains poorly understood, particularly empirically.

Importantly, there is cause to consider how PWUD's income

generating activities are framed by *social violence*, a combination of violence operating at the structural, everyday, and symbolic levels. Structural violence refers to social structures or institutions embedded within our social world (i.e., capitalism, patriarchy, colonialism, drug criminalization) that perpetuate and normalize inequality and produce social suffering among structurally vulnerable populations (for example, through socio-economic marginalization, institutionalized gender inequality and racism, as well as criminalization) (Farmer, 2004; Galtung, 1969). With symbolic violence, the mechanisms that sustain and perpetuate inequality are naturalized to such an extent that the structurally vulnerable blame *themselves* for their social-structural subordination (Bourdieu, 2001). Neoliberal policies (e.g., divestment in social service provisions) and discourses (e.g., of self-management and individual responsibility) have further entrenched structural and symbolic violence (Million, 2013). The interconnection of structural and symbolic violence shape the 'everyday' violence experienced by PWUD in diverse contexts (Bourgois, Prince, & Moss, 2004; Bungay et al., 2010; Shannon, Kerr et al., 2008, Shannon, Rusch et al., 2008) while simultaneously rendering social violence invisible. Here, social suffering is normalized and thus legitimized, thereby obscuring how structural violence also shapes interpersonal violence, among a range of other adverse outcomes (Bourgois et al., 2004; McNeil, Shannon, Shaver, Kerr, & Small, 2014). Common drivers, such as stigma and criminalization, produce and entrench the social disadvantage that characterize both socio-economic marginalization and vulnerability to violence, as well as health disparities. As such, there is a need to turn attention to the relationship between manifestations of social violence and income generation activities of PWUD to better understand how broader social-structural factors mediate their everyday experiences and, in turn, shape their vulnerability to violence, exploitation, and adverse health.

Vancouver, Canada's Downtown Eastside (DTES) neighbourhood is the site of complex social-structural tensions inherent to neoliberal policies, with entrenched poverty and drug use occurring in the context of rapid gentrification and economic restructuring. Social-structural inequality stemming from neoliberal urbanism, including federal disinvestment in low-income housing, increased contract and temporary work, insufficient and stagnant levels of income assistance and the emergence of new forms of carceral control (e.g., surveillance expansion, targeted policing), shape the everyday lives of PWUD in this neighbourhood (Boyd, Cunningham, Anderson, & Kerr, 2016; Krebs et al., 2016). Over the past several decades, these forms of structural violence have driven epidemics of gendered violence (Bungay et al., 2010; Culhane, 2003; Jiwani & Young, 2006; Oppal, 2012; Shannon, Rusch et al., 2008), fatal and non-fatal overdose and infectious disease outbreaks (HIV, Hepatitis C) (BC Coroners Service, 2017; Wood et al., 2007), while disproportionately impacting women, gender minorities, and Indigenous peoples (Amnesty International, 2009; Inter-American Commission of Human Rights, 2014; Lyons et al., 2016). The province's extensive adaption of neoliberal labour and social policy measures (Grabb & Hwang, 2009; Katz, 2003; Teghtsoonian, 2003), along with the increasingly stringent restrictions on and stagnation of social assistance rates for over a decade and aggressive gentrification pressures (Burnett, 2014; Klein, Ivanova, & Leyland, 2017; Wallstam et al., 2016), contribute to entrenched poverty in the DTES.

Against this backdrop is a robust informal and illegal economic economy and visible street scene, including drug selling, sex work, and informal recycling (DeBeck et al., 2007; Parizeau, 2017). Informal recycling involves the salvaging of discarded material for the purpose of reselling, repurposing, or recycling for income (Gowan, 1997; Tremblay, Gutberlet, & Peredo, 2010; Wittmer & Parizeau, 2016). In Vancouver, such survival strategies are more often a target of policing, framed as 'public disorder', exacerbated by the proximity of the drug scene with urban redevelopment (DeBeck et al., 2011; Parizeau, 2017; Richardson, Long et al., 2015; Shannon, Kerr et al., 2008; Small et al., 2013).

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