

Visioning Towards a Decolonized, Indigenous- Centered Service Model for Drug Checking:

An Auto-Ethnographic Exploration



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Acknowledgments

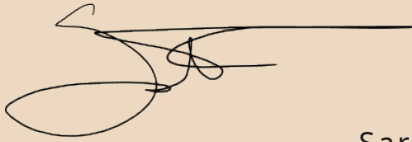
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Sarah Littlechild

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Image information

Cover image: Plant medicines, including sweetgrass braids, sage, cedar, and tobacco, available to Indigenous tenants alongside Substance’s first-held Indigenous drug checking event at a supportive housing building. Bundles were made with these medicines, along with shells collected locally and small tobacco ties, and gifted to those accessing or connecting with drug checking services.

All images, including the cover photo, by Sarah Littlechild unless noted in the captions.

Land Acknowledgements

Our project works on Indigenous land. This work, and the Substance Drug Checking project, is based upon the unceded and ancestral territories of the lək̓ʷəŋən and SENĆOŦEN speaking peoples. Specifically, lək̓ʷəŋən lands encompass the Songhees and Xwsepsum (Esquimalt) Nations, while the W̱SÁNEĆ of the SENĆOŦEN speaking peoples include the W̱JOŁEŁP (Tsartlip), WSIK̓EM (Tseycum), STÁUTW (Tsawout), BOK̓EĆEN (Pauquachin), and MÁLEXEŁ (Malahat) Nations. These territories also include the urban Indigenous communities within which much of this work has involved. We are profoundly grateful to the many individuals, communities, plant and animal beings, and spirits of these lands, and offer our deepest honor and respect to the many Nations of these territories for their stewardship, care, and strong leadership.

Substance Drug Checking also provides drug checking, harm reduction education and support across many territories on what is colonially known as 'Vancouver Island,' and we act as a resource for these services across the province colonially known as 'British Columbia.' Some of the territories we are honoured to work across include: Halalt, Lyackson, Puneluxutth', Quw'utsun, Stz-uminus, and Ts'uubaa-asatx; Hupačasath and Tseshaht; K'ómoks; and Laich-kwil-tach.

We acknowledge the inextricable links between research, colonization and racism against Indigenous peoples, which continue to this date. Ending the violence faced by people who use drugs cannot be achieved without actively facing the legacy through which we have come to be on these lands, and actively working towards decolonization and reparation.

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Executive Summary

The intersection of drug policies and colonial violence directed towards Indigenous peoples extends throughout time and space, impacting both past, present, and future generations of those who use unregulated substances. In resistance to these realities, First Nations, Inuit, and Metis communities continue to (re)center their distinct cultural wisdoms and practices towards uniquely Indigenous and decolonial harm reduction approaches – effectively, transforming mainstream harm reduction tools as guided by culturally specific ways of being, knowing, and doing – which offers a critical lifeline for those accessing services.

Drug checking as a harm reduction strategy has not yet been widely explored through these lenses. This paper presents a starting/ foundational point in which to discuss decolonial, Indigenous, and culturally centered conceptualizations of drug checking, and an offering to Indigenous Nations, communities, and/or organizations considering the possibilities and challenges associated with implementing drug checking within their own distinct contexts, should they be desired and applicable.

Amidst the ongoing overdose crisis which disproportionately impacts Indigenous Peoples and communities, drug checking, which uses a variety of technologies and methods within a harm reduction context, is becoming increasingly valued for providing service users with the knowledges needed to make informed decisions around unregulated substances. Though drug checking offers a potential benefit for decreasing the harms associated with the unregulated drug supply, how and why it is used within our Nations, communities, and organizations matters greatly. Drug checking has a history rooted within colonial and Eurocentric ideologies and interests, which can cause further harm to Indigenous peoples if practiced without acknowledging these realities. Yet, drug checking can potentially be (re) conceptualized in ways which align with Indigenous cultural, ancestral, and communal knowledge systems and worldviews for wellness, healing, and (re)connection. As an Indigenous harm reduction service provider and academic, I have explored the possibilities and challenges of drug checking within Indigenous contexts by utilizing the teachings embedded within a *nêhiyaw* grounded, *wîhkaskwa* (sweetgrass)



Plant medicines, including sweetgrass braids(wîhkaskwa), sage(paskwâwîhkwaskwa), and cedar.

methodological framework, in combination with concepts of existing Indigenous harm reduction literature, to narrate my own witnessed, experiential, and embodied autoethnographic reflections while working within an urban based drug checking pilot project (Substance Drug Checking).

Following a presentation of the primary themes located within Indigenous harm reduction literature, this paper connects each of the (w)holistic processes that go into gathering and braiding *wîhkaskwa* with drug checking to (re)conceptualize it as a possible Indigenous focused harm reduction method. Each section includes:

1) Preparation in how we as service providers and community members can (w)holistically prepare ourselves and each other to engage in drug checking. This means engaging in *personal and relational reflection, critical and decolonial reflexivity, (w) holistic wellness and healing, and curating the environments* drug checking seeks to occur in;

2) Protocols, which connects to the ethical ways we can practice drug checking following the local contexts we deliver services in. This means *fostering genuine relationships and meaningful consent, recognizing localized and culturally specific practices, and honouring data sovereignty and protection* of knowledge;

3) Gathering, which guides us to consider what drug checking methods to use in the unique contexts and environments we are in, and the ways in which we gather knowledge surrounding drug checking. This means working to *tailor and (re) conceptualize drug checking methods and consider the spirits embedded within drug checking* technologies and processes;

4) Braiding, which asks us to reflect on how we make meaning of the knowledges uncovered through drug checking, and of the knowledges encoded within the substance itself. This means centering Indigenous methodologies within meaning making and recognizing different forms of knowledge within drug checking; and

5) Giving Back, which requires that drug checking give back to individuals and communities throughout all levels. This involves providing *access to culture, Elders, land, and lifegiving resources, bridging capacity and sharing knowledge* within community, creating culturally safe and relevant *educational materials*, committing to *further knowledge illumination/research* on connecting culture with harm reduction and drug checking, and acting on *systems level transformation* for an emancipated and anti-colonial future.

Through making these connections, a vision towards a possible decolonized and Indigenous centered service model for drug checking is contemplated. Possible principles to guide practices and programs include:

1) Drug checking should be healing – it must heal all those involved, both service users and providers, through actions like critical self reflection, reconnection to our selves and to each other, and decolonization of the harms brought on by colonial violence. It must also support us in looking after ourselves and must validate our experiences and wisdoms on how to be well and live a good life;

2) Drug checking should reflect and honour the natural laws, teachings, and protocols of the lands in which it occurs upon - it is vital to recognize that the wisdom illuminated through drug checking belongs to the lands and peoples involved;

3) Drug checking should be practiced in ways which recognize the ceremonial and spiritual nature of this work - we must recognize the spirit and wisdom embedded within everything we do, including the knowledge within those who use substances, the technologies we use to do drug checking, and within the substances themselves;

4) Drug checking should be a relational, respectful, and reciprocal process - recognizing that everything is interrelated and interdependent, and that we are all relationally accountable to each other and the cosmos around us; and

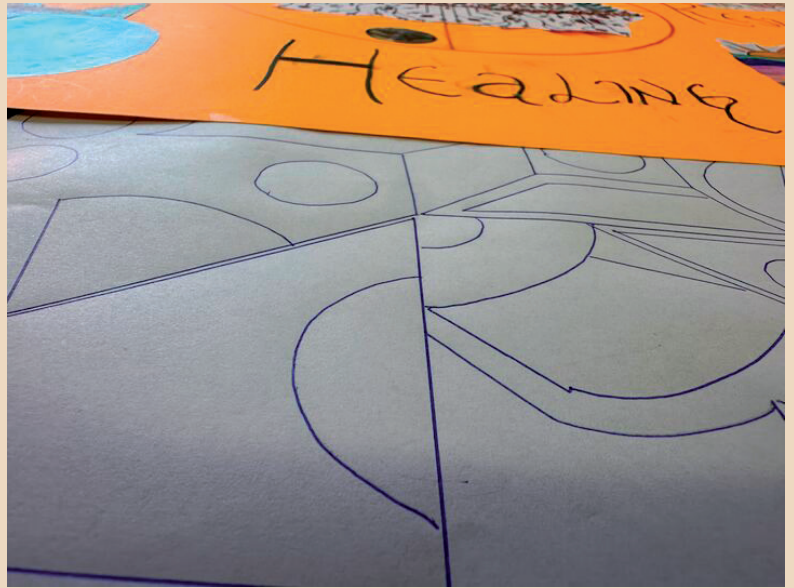
5) Drug checking should center strength, resilience, and decolonization - drug checking can help support and honour our unique resilience and resistance practices against colonial violence and the war on drugs, and if done in a way that infuses our distinct cultural teachings, then we are actively working towards a decolonial future.



An FTIR alongside a smudging bowl.

1. Introduction

The intersection of drug policies and colonial violence directed towards Indigenous Peoples extends throughout time and space, impacting both past, present, and future generations of those who use illicit substances. In resistance to these realities, mainstream harm reduction approaches and practices have been (re)envisioned through decolonial and Indigenous centered harm reduction lenses as developed by many First Nation, Inuit, and Metis organizations and communities, examples of which can be seen throughout existing literature on decolonial and Indigenous harm reduction. However, as an evidence-based harm reduction strategy, drug checking has not yet been widely explored through these lenses. Essentially, ideologies, considerations, and experiences in applying culturally specific wisdoms and worldviews to drug checking processes and practices have not specifically been conceptualized or imagined.



A portion of the art piece put together by a community member and Substance drug checking staff at the Truth and Reconciliation Day drop-in art event.

Within harm reduction contexts, drug checking is becoming increasingly valued for providing people with the knowledges needed to make informed decisions around the use of unregulated substances (Davis, et al., 2022; Gozdziński, et al., 2023; Wallace, et al., 2022). Often associated with nightclub and festival settings, drug checking began as a grassroots movement grounded in respect for people who use drugs and for the knowledges they hold through their lived experiences. Using a variety of different approaches and technologies, including test strips and spectrometers, drug checking allows individuals to identify the contents of the substances they use, receive information on both regulated and unregulated drugs, and access further support from harm reduction workers. Because of these benefits, drug checking has been used as a possible response to the unregulated overdose crisis that persists within communities. Though this tool is a complementary benefit to other harm reduction approaches, such as supervised consumption sites and needle exchanges, a discussion is needed on its potential alignment alongside Indigenous wellness methods, contexts, and knowledge systems.

As a nêhiyaw (Plains Cree) harm reduction service provider and academic working within an urban based drug checking pilot project, I have seen, felt, and experienced both tensions and successes while practicing and considering drug checking alongside Indigenous communities and worldviews. Through connecting a personal and nêhiyaw grounded, wîhkaskwa (sweetgrass) methodological framework to drug checking processes, I draw upon existing concepts within decolonial and Indigenous harm reduction literature, combined with my own witnessed, experiential, and embodied reflections as an Indigenous service provider, to conceptualize the challenges and

possibilities of drug checking within Indigenous contexts. Making visible these knowledges through the narrative style of autoethnography, this paper ultimately offers possible visions towards a decolonial and Indigenous centered drug checking service model.

Specifically, it is my hope to provide a foundation for implementing decolonial and Indigenous approaches to drug checking, explore the ways in which Indigenous harm reduction principles and practices could align with drug checking within culturally distinct urban and rural communities, and uncover pathways to which Indigenous Nations, communities, and organizations could journey towards drug checking as a harm reduction practice if they so wish. Ultimately, the goal of this work is also to critically evaluate how drug checking can be more than testing and reporting on illicit substances and move towards (w)holistic wellness for all those involved throughout its processes.

Unquestionably, this research is both timely and relevant because of the disproportionate rate at which Indigenous Peoples experience substance use-related harms, including marginalization, incarceration, overdose, death, and beyond. Harms stemming from the ongoing, harmful legacies of colonialism, including the continued drug war and unpredictable illicit drug toxicity, have greatly impacted Indigenous Peoples and communities (First Nations Health Authority, 2017). Although studies conceptualizing decolonial and Indigenous centered harm reduction have often involved combining the foundational tenets and practices of mainstream harm reduction with (w)holistic, cultural, and traditional knowledges and values, all of which is vital for healing and wellness, this has yet to be explored in the context of drug checking, as available drug checking research to-date has not utilized Indigenous methodologies and worldviews.

As this paper utilizes a (w)holistic and culturally grounded research methodological framework through an autoethnographic and circular writing style, its uniqueness may be helpful for Indigenous Nations, communities, and organizations considering the benefits and barriers associated with drug checking as a harm reduction practice. Fundamentally, Indigenous research methodologies are as much about (re) affirming and resurging traditional practices and knowledge systems as they are about resisting against dominant colonial approaches of knowledge illumination, particularly within spaces where they have been denied or distorted (Absolon, 2011; Brown & Strega, 2005). Therefore, this paper not only highlights the experiences and conceptualizations of drug checking from a personal nêhiyaw lens, but it also serves as a potential pathway for future research and practice that seeks to align drug checking with Indigenous wisdoms and values, and is ultimately an offering to all those who may desire it.

2. Cultural and Relational Protocol

Across our territories and Nations, it is cultural protocol to be transparent about who we are, where we come from, and what brings us to the work we do, as this allows others to see where our knowledges are rooted from, and who we are ultimately accountable to. Importantly, as researchers, we cannot separate ourselves from the work we do, nor should our writing be separated from ourselves; fundamentally, we must confidently locate ourselves within the relational contexts we exist within and

alongside (Wilson, 2008). As a witness, knowledge gatherer, and reflector, situating myself within this writing is necessary to hold myself accountable to the relations and spirits of those who I have walked alongside throughout this journey. Further, meaningfully locating myself within this work illuminates a critical practice that acts as an example for others seeking to do decolonial-rooted research; essentially, we cannot separate ourselves from the disciplines, spaces, and positions that we inhabit.

The worldview and approach I have taken within this work and writing stem from the inhabitation of my own intersectional identities as a cisgender, chronically ill/ disabled, and university educated nêhiyaw and Ukrainian iskewew (woman). I also hold Irish and German ancestry, though I have extremely limited knowledge of these histories, and grew up split between nêhiyaw and Ukrainian households. I am a band member of the Ermineskin Cree Nation in Maskwacis, Alberta (formally known as Hobbema), located within Treaty 6 Territory. This area is traditionally known to our peoples as *Maskwacheesihk*, which means the Bear Hills. Though not currently residing on these homelands, I hold immense privilege as a longtime visitor upon lək̓ʷəŋən and SENĆOŦEN (W̱SÁNEĆ) speaking peoples' unceded and ancestral territories, now presently known colonially as "Victoria, BC". Specifically, lək̓ʷəŋən lands encompass the Songhees and Xwsepsum (Esquimalt) Nations, while the W̱SÁNEĆ Peoples include the W̱JOŁEŁP (Tsartlip), W̱SIKEM (Tseycum), STÁUTW (Tsawout), BOKÉĆEN (Pauquachin), and MÁLEXEŁ (Malahat Nations). These territories also include the urban Indigenous communities within which much of my work has involved. I remain profoundly grateful to the many communities, individuals, animal beings, and spirits of these lands who have allowed me to study, work, and live alongside them since 2005, and I humbly raise my hands to the Knowledge Holders, Helpers, and Healers who have taught me to walk in a good way.

My own experiences with substance use, harm reduction, and healing trauma through culture have ultimately influenced my involvement within this area of work and study. Like most Indigenous Peoples, there has been a multigenerational line of dispossession and violence inflicted by the colonial state of "Canada" on my family and community. I am the daughter of a Sixties Scoop survivor, and the granddaughter and great-granddaughter of Residential School survivors. As an act of honour and



An art piece collectively made by a community member and Substance staff at a drop-in art event for Truth and Reconciliation Day, as shown in the Substance storefront window. The authors (Sarah Littlechild's) great-grandparents, grandmother, and great-uncles are honored in the upper left corner of the piece.

resistance, I also feel strongly compelled to name nôhkom's (my grandmother's) brothers, Alfred and Louis Littlechild, who both died of 'unknown' causes while attending the Ermineskin Indian Residential School – their bodies also remain unknown, though their spirits walk with their ancestors and with us. Some colonially rooted ideologies and assaults, particularly gender-based violence, have also affected the Ukrainian side of my family. However, it is important to state that none of this absolves me of the many privileges I hold, including my access to higher education and the significant recognition that I do not presently experience the harms associated with illicit substances.

I assert these histories to illustrate a foundation for which I now currently stand upon. Like all of us, our lived experiences are influenced by our intergenerational realities, and I recognize that mine set some of the stage for a somewhat disjointed growth environment and instances of childhood adversity. My early-mid teenage years were spent largely street-embedded while using a variety of illicit drugs and alcohol. Throughout this time, I existed within a community of others who shared similar attitudes and beliefs, and there was a deep connection not only to each other but also to the urban landscape of which we were all a part. Though there were harms experienced during these times, in reflection, I realize now that drug and alcohol use was also a form of harm reduction in and of itself, used to protect and nurture ourselves from unmanageable feelings and oppressive environments. We all had our own 'harm reducing' expertise, and we often needed help from each other. In this way, it was our diverse knowledges, resiliencies, and connections with one another which helped to navigate this landscape as safely as possible, despite the stigmatizing and inactive responses from all ends of society. Nonetheless, many of my friends did not physically survive the (continued) prohibition-era war on illicit drugs, and constantly losing those I loved partly influenced my decision to pursue post-secondary education at age 23. This was the beginning of my own healing journey, in which personal reflection and (re)connection to family, culture, and ceremony have been central.

My work as a social work service provider within frontline practice, project coordination, and academia has also deeply influenced the core values, beliefs, and ethical approaches I use throughout all that I do. I have been interested in how diverse Indigenous lifeways could be used to mitigate the individual and collective harms associated with illicit substance use for several years and have been privileged to walk alongside Indigenous peoples experiencing chronic houselessness and substance use-related issues throughout my work. There is incredible work happening across these lands centered on (w)holistic healing and decolonial love. However, within these environments, we have all continued to experience the loss of those we care for in their journeys onto the spirit world due to drug poisonings and colonial violence. This seemingly never-ending cycle of grief and loss is a spiritual wounding for our entire community, which is exacerbated by the fact that we are unable to fully grieve for one person before we are forced to grieve for another. The true gravity of these losses hit me the most in 2019, when I experienced responding to an overdose which was an individual who had been deceased for over two days. Ultimately, these continuous and traumatic deaths are preventable; as we reanimate and resurge our cultural knowledges to transform oppressive policies and practices, we do so in ways which honour the spirits of all those we have lost. There is much healing, reclaiming, revitalizing, and resistance work still to be done.

Over the past years, I have been working with the Substance Drug Checking Project (<https://substance.uvic.ca>), a University of Victoria initiative that provides drug checking as a public health service while pursuing research and innovations in both technologies as well as service models. Throughout this time, it has been part of my role to explore and consider drug checking through an Indigenous lens, all of which has been a continuous process, including: learning for the first time about the values, objectives, benefits, and limitations of drug checking; engaging in training using drug checking technologies; participating in direct drug checking services; connecting with Indigenous harm reduction service providers, organizations, and institutions; and planning, coordinating, and delivering drug checking outreach events with and alongside the urban Indigenous community. As a service provider with professional and academic experience in decolonial and culturally centered harm reduction, yet no previous experience with drug checking, the entirety of this work has involved intricately learning about the unique barriers, successes, and possibilities of drug checking as a harm reduction tool. Undoubtedly, this act of transparency and locating myself within this work not only recognizes relational accountability, but also serves as an act of resistance against the colonially rooted academic worlds in which this work is embedded.

This resistance is also why I chose to write in a (w)holistic, circular, and narrative autoethnographic style through the lens of my own cultural and lived knowledges. Utilizing these methodologies, I position myself as both a knower and a learner, which honours my own voice and ancestral wisdom as credible within this work, but which also fully recognizes the distinctly evolving nature of my experiences. Certainly, I believe this is who we all are – each of us inhabit multiple locations within the cosmos, and the worldviews we hold and the actions we apply to our life and work is intimately tied to all we are in relation with. Applying a sweetgrass framework to how I considered, felt, and experienced drug checking stems directly from my ancestral and lived knowledge as a nêhiyaw iskwew, and the autoethnographic nature of this research allows me to push back against the dominant narratives of the ‘rigor’ and ‘objective’ requirements of academia (Bishop, 2021; McIvor, 2010). Though there are multiple ways these research approaches divest from a colonial worldview of academic study, one significant form of resistance is through the blend of first, second, and third person writing throughout this paper. This is meant not only to elucidate my considerations in a way which feels natural to me, but which also brings you, the readers, along with me in this journey. Though this is an inquiry into the self, there is no distinction between us, as we are ultimately learning about the barriers and possibilities of drug checking together – myself as I write this, and yourself as it is read. As I have outlined my positionality, experiences, and reasonings, it is important that I approach what is written within this paper with a deep and humble acknowledgement of the challenging nature of these topics. Like harm reduction and substance use overall, drug checking may be a contentious idea when considering its benefits within our Nations, communities, and organizations. I recognize the harms and immense grief that illicit substance use has caused within our families and communities, and I understand any hesitancy to accepting drug checking as a harm reduction tool. However, it is because of these hurts that I engage in this work, as I have seen and felt firsthand the ways in which our wounds can be transformed into healing through the entwinement of culture and harm reduction. Throughout my career, I have been grateful to be a part of Indigenous, culturally centred harm reduction initiatives, and have learned deeply from the Elders, Knowledge Keepers, and community members who use unregulated substances on what they know they

need to be well and live a good life; to see the look on a person's face when they get to sit with an Elder, listen to the drum beat of a Knowledge Keeper, or enter into sacred spaces for ceremony is an incredibly nurturing experience for everyone involved – thereby creating a positive ripple effect within our entire cosmos. Through these actions, we can see the profound ways that our cultural knowledges and practices have always been used to reduce the harms within our lives, and which our relatives who need it most deserve access to. In the end, it is my hope for this writing that those reading will open their hearts – as I open my heart to you through its words – and will take these considerations as an offering of love, care, and compassion for our selves, each other, and the worlds in which we all belong. We are all connected.

3. Standing on the Shoulders of Others: Decolonial and Indigenous Harm Reduction

a. Preface to the Literature

As an Indigenous service provider and academic, I recognize that I stand upon the knowledges of all those who have come before me. Decolonial and Indigenous harm reduction theories, concepts, and practices have slowly increased within the collective consciousness over recent years, with many Indigenous Nations, communities, and organizations working to develop culturally specific projects and frameworks. Indeed, much of my professional work prior to drug checking has revolved around visioning for and practicing culturally based harm reduction approaches – which have always been embedded within the stories, perceptions, and knowledge systems of our communities. Yet, specific literature on Indigenous approaches to drug checking does not yet exist. To rectify this by reflecting on my own practice experiences within drug checking and conceptualizing it as a potentially beneficial harm reduction method within Indigenous contexts, it was first necessary to look at the work of others as outlined through existing literature on decolonial and Indigenous harm reduction, as it provides a foundation on which to stand upon.

As I consider relational accountability to be an important value within harm reduction and drug checking specifically, highlighting the themes illustrated across these works helps to contextualize the considerations I show within the *wîhkaskwa* framework I use to discuss my journey in this project; as Wilson (2008) explains, everything is seen within the context of its relationships. The work I write about in this paper is essentially a thread in a tapestry, as is all other literature on Indigenous harm reduction; together, these threads are interconnected and form a larger whole. Crucially, we also cannot explain where we hope to go without knowing where we have been and where we are currently at. Standing on the shoulders of others and making visible the foundations already conceptualized have ultimately allowed me to better consider the possible applicability of Indigenous harm reduction principles to the processes and practices of drug checking. Therefore, in the following section, I discuss first the background need for Indigenous harm reduction, followed by the core themes outlined in the literature: the colonial conceptions and historical context of substance use; traditional and culturally specific substance uses and harm reduction services; (w)holistic healing through Indigenous worldviews, and structural and systemic change. Lastly, the section ends with concluding thoughts

on ways to vision for the future with decolonial, Indigenous centered harm reduction approaches.

b. Background: Identifying the Need

It is well recognized within our communities that the harms experienced from substance use are a by-product of the complex traumas created by a continued legacy of colonialism (Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019; Levine, Medley, & Norton, 2021). Since 2016, there has been an unparalleled increase in the harms associated with illicit drug toxicity in British Columbia, including marginalization, overdose, and death, which has disproportionately affected Indigenous Peoples and communities as a direct result of ongoing colonial violence on all levels (Levine et al., 2021). To mitigate these harms associated with the toxic drug supply, harm reduction has steadily increased as an ideology and practice, rooted within principles such as respect for human dignity and choice, and has resulted in a range of public health approaches including needle-exchanges, managed alcohol and opioid substitution programs, safer consumption sites, safer sex supplies and education, and street outreach (Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019). Enabling rural and urban communities to be able to use drug checking instruments and technologies has also emerged as a promising intervention to reduce the harms of unregulated drug supplies (Teal, et al., 2024). Though these approaches are designed to minimize the harms associated with using unregulated substances, mainstream harm reduction tends to focus on individualizing substance use without interrogating and addressing systemic and structural issues (Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019).

Though harm reduction services are successful in responding to many of the immediate needs of service users and saving lives, for Indigenous Peoples, mainstream public health approaches continue to be driven, instigated, and delivered through a Eurocentric and often biomedical – or biopsychosocial at best – framework, emphasizing “disordered” individualization and marginalizing (w)holistic Indigenous ways of being, knowing, and doing (Aboriginal Coalition to End Homelessness, 2018; Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019; Goodman et al., 2017; Lavalley et al., 2020; Marshall, 2015). In resistance to these dominant concepts of harm reduction, and with the love and compassion of our community members centered, Indigenous harm reduction frameworks have been developed by Indigenous communities, organizations, government, and health bodies in ways that reconcile and infuse cultural knowledges with that of contemporary harm reduction initiatives.

Unquestionably, colonial drug prohibitionist policy, the abstinence-based influence of the church, and dominant myths surrounding substance use have not only alienated many Indigenous Peoples who use substances but have also distorted our sense of selves and our ancestral wisdoms (Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019; Dell et al., 2010; Levine et al., 2021). Specifically, there is often a deeply held belief within many Indigenous communities that abstinence is the only way to heal, and that harm reduction is inherently incompatible with Indigenous traditions and worldviews (Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019; Dell et al., 2010; First Nations Health Authority, 2023). However, the use of “substances” natural to the

environment may very well have been within many of our Indigenous communities since time immemorial, though used within different contexts and forms (Daniels, et al., 2021; First Nations Health Authority, 2017). Further, Indigenous Peoples have been reducing the harms of colonialism since contact, and harm reduction practices, and substance use itself, can also be conceptualized in this way (Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019; First Nations Health Authority, 2023; Native Youth Sexual Health Network, 2016).

For Indigenous Peoples, decolonial and culturally centered harm reduction are acts of resistance and resilience against the harms brought upon us throughout the colonial project; therefore, the distinct cultural, lived, and ancestral knowledges held within Indigenous communities is fundamental for reclaiming the narratives of our realities. Importantly, (re)connecting with practices that regenerate our traditional and culturally specific knowledge in contemporary ways can create individual and collective transformation. As existing literature on Indigenous harm reduction most commonly illustrates, principles and practices must be steeped in traditional wisdom, resistance, and resilience, combined with the best parts of mainstream harm reduction, to be truly useful and healing for those who need it most.

c. Colonial Conceptions and Historical Context

Harmful colonialist ideals, interests, and biases have both historically and contemporarily embedded themselves within the dominant laws, policies, and practices of society. Fundamentally, substance use discourse and Canadian drug policies, like the Controlled Drugs and Substances Act, as well as mainstream harm reduction mitigation approaches, are ultimately rooted within ongoing Eurocentric, white supremacist, neoliberal, and religiously moralistic beliefs (Canadian Drug Policy Coalition, 2021).

Drug policies have specifically targeted racialized groups since the colonial state's inception, including Indigenous Peoples. Beginning with the 1869 Act for the Gradual Enfranchisement of Indians, which made it illegal to sell intoxicating substances to Indigenous Peoples, namely alcohol, colonial policy was founded on the prevailing and erroneous belief that Indigenous Peoples have a predilection towards addiction (Marshall, 2015). To this day, the stereotypical myth of the "drunken Indian" remains within the master narratives of dominant society (Episkenew, 2009). This policy was further enshrined within the 1876 Indian Act, which solidified practices of criminalization and notions of shame surrounding substance use, driving Indigenous Peoples to consume more toxic forms of alcohol in the shadows (Marshall, 2015). Eventually tobacco, a sacred plant largely used in times of ceremonial, decision making, and everyday life for millennia, became regulated and controlled by the colonial government (Collishaw, 2009). Regarding opiate use, the Opium Act came into effect in 1908, which was predominately created to criminalize and control people of Asian descent; though the Act ultimately applied to all Canadians, it implemented harsher punishments for racialized communities, including Indigenous Peoples (Canadian Drug Policy Coalition, 2021).

Elements of 'criminality' within these policies cannot be understated, as over-policing and surveillance has continued to be a practice of the Canadian nation state since contact as imperialists seek to control Indigenous lands and 'resources.' As with historical policies, today's drug approaches continue to be driven by the same

imperialist ideals centered around political power, constitutional legitimacy, and neoliberal values of individualism (Jackson, 2007). Ultimately, these ideologies in turn determine how funding gets used for vital programs, and influence the hearts, minds, and spirits of service users, providers, and community.

The history of colonial terrorism surrounding substance use and drug policy, including the abstinence-centered, morally based “war on drugs” approach, has continued to criminalize and stigmatize people who use drugs (Office of the BC Provincial Health Officer, 2019). Over time, “problematic” substance use has been continuously conceptualized within the context of racialized identities and communities, resulting in socially held myths which position Indigenous Peoples close to illicit substances, thereby creating an over-enforcement of drug policies which has greatly contributed to Indigenous overrepresentation within the criminal justice system (Episkenew, 2009; Marshall, 2015). Racism and stigma intersect to overly criminalize certain communities, specifically Indigenous Peoples, and especially those in poverty, which vastly increases the harms associated with substance use. Essentially, policies supporting criminalization force people to use drugs often in unsafe and isolated environments, even when substance use and healthcare services are available (Penn, 2020). This is especially true when there are inadequate, or no Indigenous-centered, culturally specific, and safe services available; fundamentally, individuals are left with limited options. Moreover, the dominant approaches taken to ‘defeat’ the overdose crisis harm those living with chronic pain and illness by decreasing the amount of prescribed pain medication used to legitimately control physical agony. Though BC allows for services which prescribe certain prescription opiates for those already experiencing severe problematic substance use, others who do not use illicit substances are left with limited choices to effectively manage their pain (Office of the BC Provincial Health Officer, 2019). In the end, this causes people to search for unregulated, toxic substances on their own to help them cope with their pain.

Substance use is viewed as the problem, rather than a response (and in resistance) to the cultural, social, spiritual, economic, political, and environmental pain caused by past and present colonialism. As a result, mainstream treatment programs and services focus on individual deficits, rather than viewing substance use as a part of human healing and existence. Just as with past policies that outlawed traditional healing ceremonies and practices, alternative approaches to wellness are marginalized and underfunded, and “expert” opinions are taken over those of individuals and communities themselves. If mainstream services honouring these narratives are implemented, they are often given a “new face” and “marketed” as a new creation (Episkenew, 2009). For instance, the concept of “harm reduction” as it is currently conceptualized within dominant society is a relatively new approach by colonial governmental bodies. However, Indigenous Peoples have been practicing harm reduction since time immemorial, again, including reducing the harms of colonialism (Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019). We have always practiced (w)holistically caring for our-selves, communities, and worlds according to our distinct knowledges and lifeways. The lands in which we inhabit, and the relationships we hold with all the spirits of that which are around us, influence how we exist alongside all of creation. Though we have endured multigenerational harms through countless genocidal policies and practices such as Residential Schools, the Sixties Scoop, the Indian Act, and land theft, we continue to revitalize, resist, and reclaim our knowledges for a decolonial future.

d. Traditional and Culturally Specific Knowledge

Ancestral teachings for living a good life are embedded within each of our unique cultures, and Indigenous-centered harm reduction is deeply rooted within traditional Indigenous knowledge systems, languages, and ceremonies (Aboriginal Coalition to End Homelessness, 2018; Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019; First Nations Health Authority, 2017; Native Youth Sexual Health Network, 2016). Though this is spoken of broadly across the literature, Dell et al.



Sweetgrass braids (wîhkaskwa).

(2010) speaks specifically to the importance of culturally specific language in developing Indigenous harm reduction practices, including the meanings embedded within the Algonquin concepts of 'Kijigabandan' and 'Manadjitowin' in contrast to mainstream harm reduction's depiction of "respect."

Essentially, "respect" itself does not mean that individuals hold an understanding of why they are respecting the cosmos around them and teaches that each person must learn from within their own personal understandings of what it means to honour all those they are in relation with (Dell et al., 2010). Certainly, this is important to note as it signifies that the term "harm reduction" itself may not be suitable in conceptualizing a framework through Indigenous worldviews, but rather, concepts should be developed in alignment with each distinct community and culture. The First Nations Health Authority in BC (2017) and the Native Youth Sexual Health Network in Vancouver (2016), for example, have both developed Indigenous harm reduction frameworks that center the wellbeing of both individuals and communities through culturally specific worldviews, ceremonies, governance structures, and the restoration of local knowledge systems applicable to the lands they are situated upon.

While recognizing the diversity between individuals and cultures in all harm reduction work, it is also necessary to distinguish the distinct teachings of the lands, waters, and skies. As explained by the Canadian Aboriginal AIDS Network and Interagency Coalition on AIDS and Development (2019), there is a need to support policies, programs and practices that are grounded in local Indigenous knowledges, traditions, teachings, ceremonies, land, and languages, as well as those tailored to each person, the knowledge of which is rooted within their voices and stories (Lavalley et al., 2020; Levine et al., 2021).

In the end, moving away from pan-Indigenous frameworks and recognizing the vast diversity between individuals and communities is central to implementing Indigenous

harm reduction approaches (Aboriginal Coalition to End Homelessness, 2018; First Nations Health Authority, 2017; Goodman et al., 2017; Lavalley et al., 2020; Native Youth Sexual Health Network, 2016). Through using Indigenous methodologies and the voices of the Indigenous community, policy and practice can be transformed to reflect distinctly Indigenous ways of being, knowing, and doing (Aboriginal Coalition to End Homelessness, 2018; Dell, et al. 2010; Lavalley et al., 2020; Levine et al., 2021; Native Youth Sexual Health Network, 2016).

e. (W)holistic Healing Through Indigenous Worldviews

(W)holistic healing through an Indigenous worldview extends beyond the dimensions of self to include the communal, environmental, and cosmic spheres. When living as a whole – spiritually, emotionally, mentally, physically, and socially – we (re) connect deeply with all that is, was, and will be. Subsequently, Indigenous harm reduction approaches follow distinctly (w)holistic approaches to healing from deeply rooted colonial trauma, both intergenerational and lived (Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019; Dell et al., 2010, p. 118).

Indigenous harm reduction projects centralize (w)holistic healing through providing access to ceremony, natural medicines traditional teachings, Elder and Knowledge Keeper mentorship, and (re)connection with the land in combination with western medical approaches when wanted and needed (Aboriginal Coalition to End Homelessness, 2018; First Nations Health Authority, 2017; Levine et al., 2021). However, it is important to note that (w)holistic wellness and “Indigenous harm reduction” does not have to equate to only cultural supports, but rather, can additionally include an act as simple as providing food or getting a coffee with someone to help support their journey. Further, wellness and healing can also include unregulated substances themselves, as highlighted by the BC First Nation’s Health Authority (2023), relationships to substances can differ between Peoples who use illicit drugs. Not everyone who uses illicit substances habitually feel they fall within an ‘addiction’ or ‘problematic’ category, and the term ‘Indigenous harm reduction’ may mean also engaging in acts of community care, which contributes to individual and collective wellness. Essentially, Indigenous harm reduction at its core is not merely a set of practices but is a way of life rooted within relationality, community, culture, and love, viewing the natural, spiritual, and human world as interrelated and interdependent (Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019).

To provide pathways to healing, harm reduction’s values of humanity and choice must ultimately be reconciled with (w)holistic wellness and healing traditions (Dell et al., 2010). Unquestionably, healing also includes (re)connection to our spirits and identities as Indigenous Peoples, which can be nurtured through the connections we make with each other and all our plant, animal, and land relations (Kimmerer, 2013). As Indigenous Peoples, we have all been impacted by colonialism and disconnection. However, (re)connecting with who we are, where we are rooted from, and with each other as a community involves re-memembering and reclaiming the wisdom of our ancestors, which in-turn allows us to heal from continued colonial assaults. Indeed, as Rowe (2013) reminds us, coming to know who we are as individuals in relationship with our ancestral histories involves re-memembering and reclaiming the stories, wisdom, and worldviews of our ancestors, communities, and lands. In turn, this allows us to recognize the accountabilities we have to all that surrounds us. The health and

wellbeing of the lands in which we inhabit and its connection to our own wellness cannot be understated. The land gives us everything and only asks in return that we look after it, as we look after ourselves; truly, there is no separation - we are the land, and the land is us. Our identities which are born from the land we inhabit provide us with a direct link back to our ancestors (Kovach, 2009). By focusing on both individual and communal well-being and the regeneration of our unique knowledge systems, life ways, and ceremonies, Indigenous harm reduction can reduce colonial harms by making a commitment to travelling along the pathways to self-defined healing (Native Youth Sexual Health Network, 2016).

f. Systemic and Structural Change

In creating the conditions through which Indigenous Peoples can be mentally, physically, emotionally, spiritually, and socially well, we must ensure equitable access to all social determinants of health, including education, housing, language, land, and cultural and political self-determination and sovereignty (Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019; Native Youth Sexual Health Network, 2016). The literature makes clear the vast ways that mainstream harm reductions policies, practices, and services fail to address the structural and systemic issues which contribute to substance use-related harms (Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019; Lavalley et al., 2020; Marshall, 2015).

For Indigenous individuals and communities, structural and systemic barriers include racist treatment, culturally unsafe and/or incompatible care, an emphasis on abstinence, “recovery,” and religious-based treatment options, the use of disordered language such as “clean,” devastating drug policies, and a disregard for complex and continuous colonial trauma (Aboriginal Coalition to End Homelessness, 2018; Goodman et al., 2017; Lavalley et al., 2020; Levine et al., 2021; Marshall, 2015). Barriers also include over-involvement within the criminal justice system, scarce access to employment, limited culturally safe and supportive housing options, inadequate culturally traditional mental health approaches, and insufficient education which honours Indigenous histories and worldviews. As discussed throughout the literature, solutions to structural and systemic barriers must come from and be led by Indigenous individuals and communities themselves. As relational beings, we are accountable to one another and must take responsibility for ourselves and our relations (Aboriginal Coalition to End Homelessness, 2018). Through the voices of Elders, Knowledge Keepers, Peers, youths, and other community members, drug policy and practice can be transformed to reflect distinctly Indigenous ways of being, knowing, and doing (Aboriginal Coalition to End Homelessness, 2018; Lavalley et al., 2020; Levine et al., 2021; Native Youth Sexual Health Network, 2016). Lastly, there is a need to analyze the methodologies used within evaluation studies for Indigenous harm reduction projects to ensure they truly reflect Indigenous worldviews (Dell et al., 2010).

Undeniably, the historical and current approaches to substance use have caused more harm to the advancement of social justice than the substances they prohibit. For example, in BC the BC Harm Reduction Strategies and Services Policy and Guidelines (2014) attempted to provide evidence-based and socially-just regulations, particularly as it highlights the need for Indigenous specific approaches, but it was ultimately limited by federal drug laws that take a pan-Canadian, colonially driven approach

which deny the unique contexts and experiences of Indigenous Peoples. While harm reduction services are vital, interventions targeting only individual behaviours are insufficient to address the multilayered harms of colonialism, including the social and health inequities within which substance use is embedded (Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019). Ultimately, Federal drug policies and harm reduction have not equitably addressed the structural, systemic, and institutional inequities of colonial society, instead focusing on pathology, individual deficits, and behaviour modification (Office of the Provincial Health Officer, 2019; Penn, 2020). Widespread societal stigma and systemic racism towards Indigenous Peoples intersect with substance use, causing colonial governments to purposefully neglect changing laws, policies, and practices, despite the existing evidence needed for change. If society does not believe that people who use drugs are deserving of care, then governments are not compelled to invest in healthcare and social services for them (Penn, 2020).

Though current Federal and Provincial drug policies largely serve to hinder social justice, many Indigenous communities and grassroots organizations have continuously supported people who use drugs themselves, when colonial governments have refused. In BC, for example, the First Nations Health Authority has done extensive work surrounding Indigenous-centered, decolonial harm reduction approaches, including the “Not Just Naloxone” training for Indigenous service users and providers, providing pathways to education for Indigenous Peoples on the values of harm reduction practices, how its principles align with traditional worldviews, and funding community organizations in developing their own culturally specific frameworks to reducing harms (Levine et al., 2021).

Another example of this includes the work of the Aboriginal Coalition to End Homelessness (ACEH), which continues to develop and utilize their own decolonized harm reduction framework based upon the traditional and cultural knowledge of the three dominant tribal groups of Vancouver Island. Using the stories, hopes, and perspectives of the Indigenous Street Community, with guidance from local Elders and Knowledge Keepers, the ACEH uses land-based healing and learning, and provides daily access to ceremony and natural medicines in combination with safe(r) western medical approaches for (w)holistic healing (Aboriginal Coalition to End Homelessness, 2018). Through my own previous work with the ACEH, I have seen immense healing occur through these methods for both service users and providers. Ultimately, this speaks to our vast resiliencies as Indigenous Peoples and reminds us that by (re) connecting back to our cultures, lands, spirits, and selves, we can transform society. However, more work is needed to ethically gather our distinct sacred wisdoms to vision for Indigenous-led, coordinated, and implemented decolonial harm reduction policies and practices.

g. Concluding Thoughts: A Vision for the Future

It is vital that current Federal and Provincial drug policies transform for a more socially just, equitable, and decolonial future. As the literature shows, the imposition of colonially rooted approaches and practices have been ineffective and harmful (Episkenew, 2009; Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019). Indigenous approaches to substance use and harm reduction must be conceptualized, led, and delivered by Indigenous Peoples and communities themselves; specifically, Elders, Knowledge Keepers, Peers, and community members

must be fully supported by governments to (re)vision for Indigenous-centered, decolonial, and culturally specific harm reduction policies, practices, and services.

Fundamentally, we have been taking care of our Peoples and communities since time immemorial, and we know what we need to be well. The answers required to transform policy and practice come from within our selves, our communities, and our distinct ancestral and cultural knowledges, and we must be given the respect for self-determination and sovereignty we once had to fully realize these visions. Though our hearts, minds, and spirits have been individually and collectively influenced by colonialism, each of us hold enormous wisdom and resilience within ourselves to decolonize our selves and worlds. In (re)connecting to our cultural lifeways and inner wisdom, we can take back our sacred knowledges which have been disrupted by domination and oppression. Therefore, all levels of government must support in actioning Indigenous-led substance use and harm reduction initiatives, without requiring ridged guidelines steeped in colonial ideals which only further marginalize Indigenous wisdom.

Further, barriers to accessing other human-right services must have solutions rooted within Indigenous ways of being, knowing, and doing, emphasizing community over individualization. Meaningfully addressing the all-encompassing structural and systemic barriers to wellness requires a multisectoral, communal and intersectional approach to both substance use and harm reduction as well as to all other intersecting issues which negatively influence individuals and communities' lives (Collins et al., 2019). Ultimately, all sectors of society and levels of colonial governance must work together alongside Indigenous Nations, communities and organizations to transform structurally embedded imperialist policies for collective social justice. In these ways, both Federal and Provincial governments must reconceptualize "harm reduction" as reducing the harms of colonialism, center it as a priority, and enshrine it within law and policy. Further, policies must honour the ways that Indigenous Peoples already reduce the harms of colonialism and recognize the knowledges we hold as fundamental to transforming policy and practice for a socially-just, equitable, and de-colonial future.

Most imperatively, Canada and BC must collectively move to decriminalize, legalize, and regulate illicit substances. This action would not only save lives, but would support a collective decolonization of our hearts, minds, and spirits. For many Indigenous Peoples, engaging in vital healing ceremonies while on substances is a contentious issue; however, I see this as regeneration and reclamation of our old lifeways. Though I can only speak from my perspectives, there were many 'substances' Peoples throughout the world used in various ways; since time immemorial, plants and medicines have been a part of our cultures and lives – how do we truly decide what substances are useful and healing, and which are not? This is not an easy question and is one I would respectfully invite all individuals, Nations, and communities to answer themselves. The unpredictable and toxic supply of substances and the risky environments people are forced to use within are the harmful by-products of colonial violence. Despite the shame our Peoples face from all ends of society, we can dispel the dominant myths which say that substance use is something to be ashamed of. When we do so, we disrupt the colonially induced narratives within our communities that some of our relations are not worthy of wellness and healing in their present forms.

Indigenous-specific harm reduction can mean many things, including (re)connecting with the land, learning our traditional languages, and building community with each other. Through the voices of our communities, all harm reduction initiatives can truly reflect Indigenous ways of being, knowing, and doing. I perceive Indigenous approaches to substance use and harm reduction as being about love at its core, in the most non-judgemental and unconditional way possible. This is what I understand our communities to be about, and when looking at colonial conceptions of substance use through a decolonial, culture-specific lens, we break the dominant myths embedded within current drug policy and come to understand the ways in which harm reduction, substance use, and Indigenous approaches to wellness and healing are more alike than they are separate. Ultimately, a paradigm shift is needed for all of society to collectively become 'Indigenist thinkers' to centre our stories, knowledges, epistemologies, and pedagogy in our policy and practice. When we look to Indigenous and colonial history, its implications on life today, and (re)connect to our ancestral knowledges, we can transform our hurts into healing.

What is most required is that we take the time to engage in ceremony, connect with the land, talk with our ancestors, and remember our sacred knowledge, as when we do this, we honour our blood resiliencies to resist the policies which seek to subjugate our lives and wisdom. Still, in reviewing the literature, I see the work that we as Nations, communities, individuals and organizations must still do to vision for a decolonial world – one where we are totally emancipated from colonial harms and constraints. As I will illustrate in the following section, *An Indigenous Conceptualization of Drug Checking – The wîhkaskwa (Sweetgrass) Framework*, each of our distinct traditional and culturally specific knowledge systems, practices, and worldviews must be the lens through which we look at contemporary harm reduction methods like drug checking.

4. An Indigenous Conceptualization of Drug Checking – The wîhkaskwa (Sweetgrass) Framework

a. Introduction to the framework

As illustrated throughout existing decolonial and Indigenous harm reduction literature, within harm reducing practices such as drug checking, we must go well beyond testing substances by infusing (w) holistic wellness and cultural knowledge throughout the service delivery, research activities, and subsequent wisdoms made visible through its processes. In essence, how can we (re)conceptualize drug checking as a possible agent of change in ways which align with our traditional frameworks for reducing harm? Fundamentally, envisioning pathways towards an Indigenous service model for drug checking requires the (re) connection of each community's ancestral and traditional wisdoms to its practices and ideologies, if desired and applicable.

As a nêhiyaw service provider, I have done this by critically examining my own witnessed and embodied experiences and reflections within drug checking through the (w)holistic, non-linear process of gathering and braiding sweetgrass – also known as *wîhkaskwa* in nêhiyawêwin.

Throughout this writing, I use the traditional name for sweetgrass in the Plains Cree Y dialect; fundamentally, this is both in resistance to the Eurocentric academic landscape in which this paper is shared, and to maintain the ethical and relational responsibility I hold to the spirit of *wîhkaskwa* and all it has taught me. Born from the teachings of this medicine, this conceptual framework is significant to who I am and where I come from. As shared already, the First Nation to which I belong and am accountable to is located within Maskwacis, Treaty 6 Territory. Within these lands, there grows patches of *wîhkaskwa*, which is one of the four sacred medicines for many, but not all, First Nations, Inuit, and Metis Peoples, particularly those living and moving along the plains. I was shown how to use *wîhkaskwa* as a medicine for personal wellness from an early age and was taught that the smoke from its burning braid both cleanses us and carries our prayers up to the spirit world, allowing us to seek guidance from and communicate with our ancestors to support us in our healing journeys, and to re-member who we truly are. Because of this, I



Sweetgrass braids (wîhkaskwa).

have used it consistently throughout my life to both connect with the spirits of my ancestors and to heal my soul wounds. I use wîhkaskwa so regularly that, during my social work graduate studies, its sacred instructions led to the development of a wîhkaskwa centered conceptual framework for research, practice, and life. This is where I became impassioned with Indigenous research methodologies and began to understand life as a process of re-search (Absolon, 2011). Later, upon being involved with drug checking, I came to realize how truly applicable this framework is to all the work I have and continue to do. It is entirely no surprise given my knowing and history with wîhkaskwa that I came to (re)conceptualize drug checking through its teachings, which was visually laid out before me while engaging in ceremony; I was smoldering a braid, enveloping myself with the rising smoke, when my mind and heart began creating the connections that I feel are necessary to vision for the possibilities of drug checking in decolonial, Indigenous centered ways.

Ultimately, making connections to culture – specifically, thinking about and applying how drug checking intersects with the processes that go into gathering and braiding wîhkaskwa – has helped further my personal understanding of drug checking and allowed me to envision for its possible alignment with Indigenous worldviews. However, it is important to explain the inherent limitations in this work, as I recognize that I am only one individual and am engaging in drug checking on territories where I am not originally from. Essentially, I am looking at drug checking through the influences of my own ancestral teachings and cultural knowledge, which may not necessarily apply to other communities – unquestionably, our cultures are diverse, unique, and specific to the lands, histories, and Peoples in which we are rooted from. Ethically, this means that I cannot speak for anyone on the lands in which I have witnessed, learned about, and practiced drug checking upon, though I acknowledge that being on territories not of my own Peoples also holds influence over how I have come to conceptualize this work. Despite these considerations, there is nonetheless value in utilizing a voice within drug checking spaces where it has not traditionally existed. Further, I feel that despite our distinctness as Indigenous Peoples, we share many common values across our Nations and cultures, as well as collective histories of continued colonization – in these ways, we can work together as one towards our shared journey of collective liberation.

Finally, I believe there is also significance in utilizing the specific example of gathering and braiding wîhkaskwa to examine drug checking in a decolonial, Indigenous centered way, which is: gathering and braiding wîhkaskwa is itself an act of harm reduction, as it is a traditional process which supports our individual and collective healing, and holds essential teachings and values which inform us how to live and walk in a good way alongside all of creation. Though there are many different teachings varying between cultures, communities, and even families, I was taught that sweetgrass is the hair of our earth mother; gathering her sacred medicine is an act of ceremony, as is the process of braiding the grass into three sections which symbolize strength, (inter)connection, and accountability (T. Littlechild, personal communication, March 2021). I believe these values to be directly applicable to Indigenous harm reduction in general, as it speaks to our vast resiliencies as Indigenous Peoples (*strength*), how we are collectively intertwined with each other and the cosmos in which we are a part (*(inter)connection*), and how this deep connection teaches us to be accountable to all we are in relation with (*accountability*). Moreover, sweetgrass is itself strong and resilient as it bends without breaking,

comes from and is interdependent with the earth, and when we gather sweetgrass we speak to its spirit and lay down tobacco to show respect for the gifts it provides.

Though I theorize drug checking through a cultural lens, I understand the multifaceted challenges associated with its potential acceptance. Fundamentally, the relationship between drug checking and colonialism is a complex issue tied to the criminalization, oppression, and marginalization of people who use illicit substances through drug control policies. Across time and space, these colonially embedded policies and practices have continued to expand and sustain the systematic exploitation of Indigenous and other racialized Peoples, lands, and resources, as well as their hearts, minds, and spirits (Daniels, et al., 2021; Episkenew, 2009). This reality has caused an intense fear of further criminalization and a deep sense of internalized shame when accessing services like drug checking, which can often result in avoidance of services all together, or an anticipation of stigma when accessing them (Davis, et al., 2022). In addition to these links to colonialism and its ideologies is drug checking's unique engagement with technologies. This unquestionably impacts drug checking as a harm reduction practice, as many of the technologies now used for drug checking as harm reduction were created with colonially rooted interests, using Eurocentric scientific approaches, and were designed for the criminalization of people to support the war on drugs.

Many drug checking technologies – even Fentanyl and Benzodiazepine Test Strips – were created, and are still heavily used within, enforcement, border control, probationary situations, and in workplace settings to discriminate against people who use drugs (Betsos, et al., 2022). Certainly, technologies, including those of drug checking, have been used as agents of power and control throughout history (Franklin, 1990). Through connecting with different Indigenous community members and service providers myself, I have felt some sense of avoidance of drug checking due to both not knowing how it may truly be of benefit, as well as feeling mistrusting of it as a way of reducing harm. If we are to ethically provide drug checking within our Nations, communities, and organizations, we must continuously consider how we use these technologies so that we do not replicate their harms.

When I personally consider drug checking as a harm reduction practice, I think of how, at its core, it may not be a completely unfamiliar method to us as Indigenous Peoples. Essentially, we have always had our own ways to determine what medicines and plants were 'safe' for us to consume, touch, and engage with – whether that be through our creation stories, traditional practices, or observations of the natural world around us – and I believe it is this wisdom that we must re-member and re-connect with when considering harm reduction methods like drug checking. For myself, I can only truly use the knowledge which resides within my lived experiences, cultural understandings, and ancestral memories to guide conceptualizations of this work. Therefore, using a nêhiyaw-grounded epistemology, ontology, and value system, which flows from within the practices and teachings of gathering and braiding wîhkaskwa, I consider the question: What does it truly mean to align Indigenous harm reduction and cultural practices with drug checking specifically?

The (w)holistic teachings and considerations that go into the process of gathering and braiding wîhkaskwa – including the personal and relational preparation it takes before we even go out onto the land to gather, respecting the culturally specific protocols and ethics of the lands in which we are gathering upon, learning the

knowledge that we need in order to harvest and the ways in which we gather, the meaning we make of wîhkaskwa by braiding and infusing prayers and teachings into it, and lastly, sharing the benefits of the braids with others by giving them away for collective healing and wellness – all deeply align with the considerations I have thought of within this project with respect to visioning for and practicing decolonial, Indigenous specific approaches to drug checking. Although each of these processes could be understood as “steps”, it is important to understand that these are (w) holistic and non-linear considerations which should be understood as interrelated and interdependent upon each other, as we cannot truly consider one practice existing without the other. In reading through each section, you will notice that they ebb, flow, and bleed into one another, and this is an essential teaching to recognize as a distinct departure from Eurocentric forms of writing towards a decolonial, circular, and culturally grounded one.

b. Preparation

Throughout my life, I have come to recognize the need to personally and relationally prepare myself to engage in any activity for my own wellness and healing – the wellness and healing of which influences all that exists surrounding me. This process of *preparation* is also a necessary piece of gathering and braiding wîhkaskwa. In the beginning, prior to going out onto the land to gather this medicine, we must (w)holistically prepare ourselves to do so in a good way. An important part of this includes reflecting on what wîhkaskwa is and what it means to us in the context of our cultures and lives. I see gathering and braiding wîhkaskwa as engaging in a nurturing act which requires that we first show love and care for ourselves and each other, that we pray for a good day ahead of us, and that we communicate with the spirit of the medicine and seek guidance from our ancestors.

Preparation for gathering wîhkaskwa requires determining what tools we will need, including a basket or bag to hold our medicines, ensuring that we have tobacco to provide an offering to the land and spirits of the grass, as well as envisioning who we will need to consult with. Additionally, preparation includes planning the time of year in which to gather – for example, harvesting wîhkaskwa requires an understanding of the specific climates and locations we are in. In Maskwacis, gathering often happens in mid-July to late August; however, in other places, harvesting can happen in the early-mid summer months. Unfortunately, because of climate change and higher than average seasonal temperatures, traditional plants like wîhkaskwa have been negatively impacted. Once abundant along the prairies, wîhkaskwa which was “waist high” can now be found barely “knee high” and only within select areas (Indigenous Climate Hub, 2024). This is an important aspect to consider and pushes us to think of ourselves in kinship with the lands we are rooted from and to practice care for it; indeed, building relationality with the land and the spirit of the grass itself is a vital part of being a good relative, which is a necessary component overall of gathering and braiding wîhkaskwa.

i. Personal and Relational Reflection

In translating this process to how I have conceptualized possibilities for drug checking within Indigenous contexts, I reflect on how vital it is to first personally prepare for drug checking by visioning for the ways in which it could be used for healing, wellness, and (re)connection. Just as we would (w)holistically prepare for

gathering and braiding wîhkaskwa on the land by considering what tools we will need, envisioning who we will need to consult with, and determining what our relationship is to the land and grass, so too did I begin my journey within this work by considering the ways that I needed to prepare for engaging with drug checking. Primarily, I began this by reflecting on my knowledge and experiences surrounding drug checking services and programs.

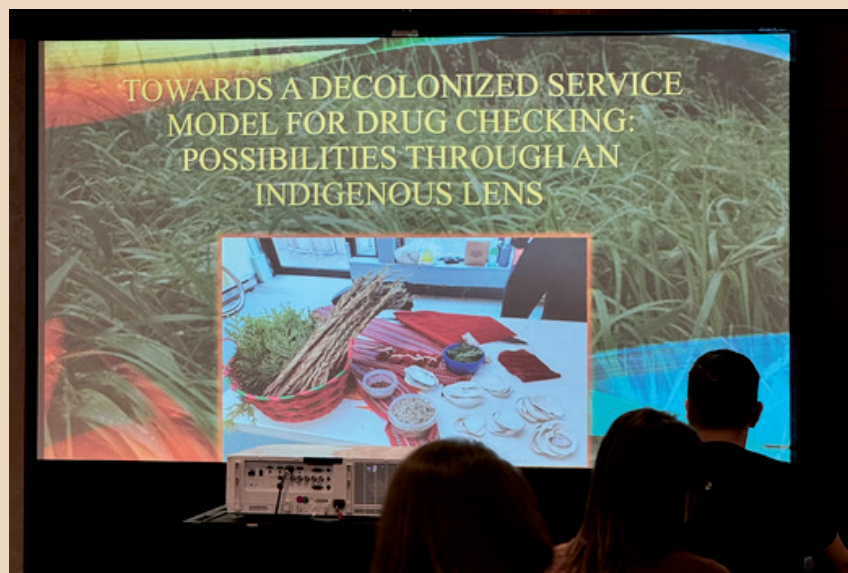
To be transparent, I came into this work as an outsider with limited to no information or experience with drug checking itself, and I was entirely unaware of the technologies and statistical data used to monitor trends and changes to the unregulated drug supply. Because of this, I had to take a considerable amount of time to learn what drug checking is, where its potential successes and barriers lie, and the dominant values and discourses which most commonly underly its practices before I could even begin conceptualizing it through an Indigenous lens. This has been a continuous and ongoing journey – one where I have sought out those with practice experience in drug checking to help enlighten me, in addition to engaging in drug checking myself.

As someone without a background in Eurocentric-based science, drug checking can be a difficult practice to become skilled in, and it has taken time and experience to understand how it could, or could not, potentially align with decolonial and Indigenous ways of being, knowing, and doing. There was great unease throughout this learning, and it originally brought up feelings of inadequacy and un-comfortability. Despite these knowledge gaps, I knew that I could bring to this work past professional and personal experience with decolonial and Indigenous centered harm reduction generally, as well as my own understanding of substances and the many uses that they have had in my life. Following nêhiyaw cultural knowledge systems, embodied and witnessed practice experiences within drug checking, and existing literature on Indigenous harm reduction, I also knew that I needed to begin my journey within this work with an understanding of my self and own needs as a service provider to heal the parts of me that require nurturance to do this work in an ethical, socially-just way. Further, I needed to consider why I wanted to do this work in the first place. Basically, it has been important that I begin engaging in this work by looking inward.

ii. Critical and Decolonial Reflexivity

Critical reflexivity is an integral piece of Indigenous harm reduction frameworks, as there is a need to recognize the continued impacts that colonial violence has had on us as individuals and collectives, and to critically deconstruct our own biases, beliefs, values, and assumptions on harm reduction and substance use (Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019). As I know well, harm reduction and substance use can be a difficult issue to discuss within our families and communities, as there have been intergenerational experiences of hurt and separation, interconnected with abstinence-centered, morally based war on drugs ideologies, which has continued to criminalize and stigmatize people who use drugs (Office of the BC Provincial Health Officer, 2019). As a result, there are many who see the problems associated with substance use as an individual issue, rather than societal and structural, and perceive harm reduction as a way to support drug use, devaluing the role of treatment options. Yet, evidence shows that harm reduction saves lives and makes space for the idea that substance use itself can be utilized

as a way to reduce the harms associated with colonial terrorism; for communities and organizations to fully reconcile with this, harm reduction services must provide opportunities for deep, (w)holistic self-reflection embedded within the very structure of programs (Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019). Within drug checking services specifically, there is a distinct need to do this as the technologies commonly used for drug checking can be practiced for both wellness and harm, as dictated by who is using them, where they are used, and for what purposes. This speaks to the need to truly begin with ourselves and the communities we walk alongside by engaging in critical self reflection on our own identities, core values, beliefs, and worldviews, as well as our biases and assumptions about harm reduction, substance use, and drug checking specifically, while recognizing their influence on how we practice harm reduction methods like drug checking.



A presentation given at the BC First Nations Health Authority's "Not Just Naloxone" Summit on conceptualizing and practicing drug checking through a decolonial, Indigenous, and culturally centered lens, based upon the preliminary work outlined in this report. Participants at the summit included Elders and Knowledge Keepers, Indigenous service providers, people with lived/living experience of substance use and harm reduction, and other Indigenous harm reduction champions within their respective communities. Photo credit: BC First Nations Health Authority.

A vital part of critically reflecting on and working to decolonize our selves involves engaging with teachings which help us to understand why Indigenous Peoples are disproportionately impacted by overdose and associated harms of continued criminalization. Within our Nations, communities, and organizations, holding open and honest conversations and training on decolonized, Indigenous-centered harm reduction and substance use can be effective for influencing the dominant beliefs and discourses of those interested in drug checking. As previously mentioned, one such example of this includes the BC First Nations Health Authority's (FNHA) *Not Just Naloxone* training, where Indigenous harm reduction teachers, peer educators, and community members come together to collectively learn about and build Indigenous harm reduction knowledge and skills within First Nations communities. This training goes beyond culturally safe harm reduction and includes understanding and linking the harms associated with substance use to a continued legacy of racism and prohibitional policies, identifying colonially embedded root causes of addiction and substance use, dismantling stigmatizing language and misinformation, connecting cultural wisdom with harm reduction approaches, as well as learning practical skills to respond to overdoses and other harms (Levine, et al., 2021). Moreover, an important aspect of decolonizing our understandings in this area also involves acknowledging the pathologizing roles that colonial, capitalist, and Eurocentric medical systems play in the demonization of certain substances as inherently 'bad' and illegal, while simultaneously accepting others as 'good' and therefore legal (Dodd & McClelland, 2016).

In our preparations for considering drug checking within our Nations and organizations, these teachings are an immense benefit and a necessary first step, as they ultimately help us to both decolonize our understanding of harm reduction and substance use and help us to begin to visualize how drug checking could look within our distinct communities according to our own cultural contexts. Moreover, learning about the unique barriers, challenges, and successes inherent within drug checking as a harm reduction method would allow community members to fully reflect on what its processes could mean within the contexts of their cultures and lives – just as we would when preparing to gather and braid wîhkaskwa. Fundamentally, once we have deconstructed the dominant ideologies forced onto us by colonial interests, the potential pathway for incorporating drug checking as a culturally specific harm reduction method within our spaces becomes clearer.

iii. (W)holistic Wellness and Healing

Through this cultural framework, *preparation* for drug checking speaks to the ways that we must critically reflect on our own ideologies and beliefs and help to facilitate that same self reflection in others so that we can approach drug checking in a good way. To do this, we must also provide pathways to healing by creating spaces in which to consider how to (w)holistically take care of our selves and each other so that drug checking becomes a healing process for all involved. Profoundly, (w)holistic wellness and healing through an Indigenous worldview extends beyond the multiple dimensions of self – spiritual, emotional, mental, and physical – to include the social/communal, environmental, and cosmic spheres. Indigenous harm reduction approaches follow these distinctly (w)holistic approaches to healing from deeply rooted colonial trauma, both intergenerational and lived, and recognize that the traumas we hold within our mind, hearts, bodies, spirits, and environments influence how we engage with and practice harm reduction methods like drug checking (Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019; Dell et al., 2010).

From an Indigenous service provider perspective, harm reduction work can be difficult and triggering, which is compounded by coming from a family and community targeted and wounded by colonialism. Feelings and experiences stemming from this can be difficult to manage across time and space; indeed, throughout my time in drug checking, trauma has been a definite factor in avoiding certain places and activities. As someone with Post Traumatic Stress Disorder (or more appropriately named by Episkenew (2009), *Post Colonial Traumatic Response*) from providing frontline practice, some spaces and places can trigger past traumas. Because of this, it is imperative that I acknowledge and am in tune with the bodily responses which present themselves, and engage in practices that help to ground me, so that I may better walk alongside others. Ultimately, traumatic experiences resulting from frontline work compound the pre-existing traumas of historical, intergenerational, and lived realities of colonialism. These are feelings that I continue to work through by engaging in acts which nurture my whole self, so that I can enter spaces and relationships with the genuine relational accountability they deserve. Sometimes, this can also mean not entering a specific space in which personal trauma has happened, and this active resistance against re-traumatization must be fully understood and supported by the drug checking program policies, practices and procedures we work within (Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019).

Prior to participating in drug checking outreach events, I often prepare myself by burning wîhkaskwa to ask my ancestors for a good day and by spending time on the land to collect medicines like shells and cedar boughs to be given away during an event – all of which ultimately prepares me to enter this work in an ethical way. In visioning for what supports will be needed for those providing services, we must recognize the need to facilitate and support space for service providers' personal, self-directed preparation techniques in ways which honour their own cultural wisdom and practices; acknowledging that for people with lived and living experience, and Indigenous Peoples in particular, this work can be reactivating traumatic symptoms. To alleviate this, meaningful structural support and wellness activities should be offered to workers in these spaces to ensure they are, both collectively and individually, not overburdened in this work. This could mean providing regularly scheduled, culturally specific activities such as peer-led storytelling circles, land-based outings, traditional ceremonies, communal feasting, and spending quality time with Elders and Knowledge Keepers. Just as we would consider what we will need to connect with the land and wîhkaskwa, what tools we will need to bring, and how we can prepare ourselves for gathering it, so too do we need to consider how we can (w)holistically prepare ourselves and each other to engage in drug checking. Ultimately, the love we hold for our communities must be balanced with the love of ourselves if we are to practice drug checking with the care it requires.

iv. Curating the Environment

Taking actions which honour the (w)holistic wellness of our selves and each other also extends to our environments. Within my work life, I have continuously witnessed how the wellness of service users is intimately tied to the environments they are in. For example, I have worked within housing programs that exist within, literally and figuratively, unwell buildings themselves – where they are inadequately funded, run down/condemned, and often have little semblance of family, community, or nurturance. In contrast, those which include dedicated spaces for connection, comforting atmospheres, and a wealth of art – especially artwork that includes languages, resources, and symbols which resonate with the community – truly lead to feeling welcomed in a way that (re)connects both service users and providers with each other. Through practicing drug checking, I have observed that this can take the form of providing physical space for service users and providers to privately discuss their stories, experiences, concerns, and successes on the substances they take together, if wanted. Preparing the space for drug checking can also include using similar spaces to plan and hold activities and workshops for community members, which would take the space where drug checking occurs beyond the process of testing substances – thereby leaving room for service users and providers to engage in acts not only connected to substance use. As well, the use of artistic expressions created directly by community members within these spaces, including allowing for the sale of such art pieces, would mutually benefit the wellness of both individuals and their surroundings. Moving towards these nurturing environments allows us to ultimately curate drug checking spaces which are communally centered, and strengths based.

Accessibility is another vital consideration when preparing spaces for drug checking. Living with both physical and mental wellness barriers myself, I recognize how imperative accessibility on a (w)holistic level is. In preparation for drug checking, this means that we must not only ensure the physical space is accessible to all bodies through providing things like ramps and lifts, but also that we acknowledge and

plan for the systemic barriers that exclude certain types of minds and/or bodies (Withers, 2012). This can mean recognizing that, although accessibility within spaces may exist, individuals may not be able to access services all together because of structural and systemic forces. One way this has been addressed through the Substance Drug Checking Project is through the development of multiple



The Substance Drug Checking storefront (Collage). Photo Credit: Substance Drug Checking

ways to access drug checking and receive results, including through a physical storefront, mail in option, outreach and sample collection, and a distributed approach that integrates drug checking within existing health and community services (Wallace, et al., 2022). Having a physical storefront for drug checking specifically helps to bring services out of the shadows and normalizes access, which pushes back against the stigmas attached to harm reduction. It is dually important to recognize that, within many First Nation communities, members who know each other well may be uncomfortable being seen entering such spaces; however, by providing services other than drug checking in these environments, it is possible to show the community that there may be many reasons why an individual chooses to access a storefront space where drug checking also happens to take place. Essentially, these spaces within the community do not have to completely revolve around drug checking services.

In the end, having access to drug checking in spaces that are non-judgmental, anti-oppressive, and reflective of the wants and needs of those using its services are vital for de-stigmatization and successful programs (Davis, et al., 2022). Consequently, questions that are important to consider include: How can we prepare for and curate the spaces and environments in which drug checking seeks to take place? As well, how can we design drug checking spaces to be safe, welcoming, and reflective of our unique cultures, communities, and landscapes? Lastly, how can we be attentive to the unique (w)holistic accessibility needs of our communities? In addressing these needs, we can honour the systems of relational accountability each of us hold to one another and the world around us.

c. Protocols

Within our communities, Indigenous protocols are representations of our cultures' distinct ethical systems and ways of being, knowing, and doing, which are ultimately defined by our languages, spiritualities, kinship, and place-based knowledges (University of Alberta, 2024). When gathering and braiding wîhkaskwa, we must ensure that we are recognizing and following these culturally specific protocols if we are to walk in kinship with the land, peoples, and ancestors we are in relation with and alongside. One such protocol is to consult with, and seek permission and

guidance from, Elders, Knowledge Keepers, and those with lived/living experience within our lives and communities; this is done because we know that without the wisdom of those who know how to gather and braid wîhkaskwa, we will not know how to do it ourselves or what to look for. This process of respect and reciprocity effectively allows sacred and ancestral knowledge to be passed down throughout the generations, despite the violent interruption of our cultural continuity (Absolon, 2011). When we do this, we also honour the time and energy of those who pass on their wisdom to help us along our journeys, which at a minimum often includes gifting tobacco. This is known as *pakitinasow*, which is nêhiyawêwin for “offering something in exchange for help, support, and/or direction” (Hart, 2009).

This engagement and relationship building does not end with other humans, but also with the entire cosmos in which we are a part, including the plants that we seek to harvest. As a necessary protocol, before we begin gathering wîhkaskwa, we must spread tobacco to where it grows upon the earth; this is often done by laying it down to the four directions to honour the grass’s spirits and the spirits of the earth, and to ask for healing. Moreover, we also do not want to select grass which is too close to each other, and we must never pull from its root. We may cut the grass well above the root, but we can also very carefully slide the grass out of its encasement which stays connected to the ground. These methods are chosen so that the plant does not die, nor have harm done to it, and that it continues to flourish for generations to come. Importantly, we must recognize that other beings rely on this plant for sustenance as we do for medicine; in many ways, it was the animals who initially had a role in teaching us which medicines to use and which to avoid, and we honour their own needs for wellness and survival. It is an injustice that places which once grew an abundance of wîhkaskwa no longer do due to both climate change and those who pull out the grasses root system. Following this ethical process is our way of taking care of the earth, its medicines, our animal kin, and ultimately ourselves, as we are the land, and the land is us – there is no separation (Kovach, 2009).

We must continuously be diligent in recognizing that guidance must come from the keepers of the land and the culturally specific protocols embedded therein, ensuring gathering and braiding is done in the correct ways according to the territories we are gathering upon, even if they are our own. Being on the land allows us to remember that we are all equal and all one; none of us are above or below anyone else, and we share the same love to all those we are in relation to, including the Knowledge Keepers we learn from, the spirits of the land and sky, the essence of the wîhkaskwa, and the lifeforce embedded within the act of gathering and braiding itself.

i. Genuine Relationships and Meaningful Consent

In considering the above teachings around respect for ethics and protocols, we know that we must consciously adhere to the natural laws and practices of our cultures and communities when engaging in service delivery and research around drug checking. Like ethical research processes, this can translate to drug checking that is respectful, empathetic, genuine, beneficial, and relevant to the lived experiences of Indigenous ways of being, knowing, and doing (Saini, 2012). When implementing drug checking within our communities and organizations, these core values can be embedded within our services by first seeking the necessary permission and consent from the individuals and communities involved. This could begin by hosting gatherings and ceremonies which bring together local Elders, Knowledge Keepers, and community

members to discuss what benefits and challenges drug checking might bring to the entire community, and address plans for collaboration, control and leadership should community members deem it to be a useful service. Those bringing the knowledge of possible drug checking to these spaces hold an ethical responsibility to ensure complete and total transparency, especially around the use of non-harm reduction drug checking as a method of penalization and social control. If drug checking is determined to be of benefit by the Nation, community, or organization, permission and consent can (and should) take many forms, which should be reflective of their own traditional practices. This process could be oral, written, visual, and/or symbolic – all of which must be respected as valid and open to change should the Nation, community, or organization desire it.

A similarly important pathway towards meaningful consent and collaboration throughout the entire drug checking implementation process is to invite local stakeholders to function as robust sets of advisory groups, which can also ensure that culturally specific protocols are followed. These advisory groups, each with their own distinct wisdoms will confirm the unique needs of those they represent. This ensures that drug checking programs are tailored to different identities of the community; for example, Elders and youth may have different needs in how and why they access drug checking. Genuine relationships with all those around us are the core of this work; as with gathering and braiding wîhkaskwa, we cannot practice drug checking without the guidance of those around us. These relationships can unquestionably take time to cultivate, and we must understand that drug checking may not always be the best fit according to the community's desires and needs. This process is not unlike how the land chooses when and where we gather medicines, reminding me of a time that I attempted to gather in a place that was once plentiful, but no wîhkaskwa was to be found.

Not only must genuine consent and permission come from the peoples and communities we walk alongside, but it must also come from the spirits of the lands and spaces in which programs will take place upon, and those of our ancestors who are embedded within. Often, this process of engagement will include blessing the ground or space where drug checking will occur. Ceremony is a central part of relational accountability, and any work we do which impacts Peoples' lives requires the permission of the spiritual world surrounding us. Prior to drug checking services being implemented within any community, consent from all stewards of the lands it seeks to be on should be utilized to ensure projects and programs are developed and delivered within the distinct worldviews and knowledge systems coinciding with where they are located. Ultimately, consent should be more than an agreement written on paper and must go beyond mere consultation; rather, consent must be continuous, multi-dimensional, and come from within all levels of communities.

ii. Localized and Culturally Specific Practices

Beyond meaningful and genuine consent of all that surrounds us, the service models and practice philosophies of drug checking programs must concurrently recognize, follow, and honour the culturally distinct protocols, natural laws, and ethical value systems of the lands they are situated upon. The term protocol includes many things, but overall, it refers to ways of interacting with Indigenous Peoples in a manner that respects traditional ways of being. Protocols are not just "manners" or "rules" – they are a representation of a culture's deeply held ethical value system (University of

Alberta, 2024). Indigenous protocols are the laws in which we follow and help to guide us in how we walk alongside others and the worlds we reside in. Though the process of gaining consent and permission is a facet of one such essential law, protocols include further acts of recognition and honour to those we are in relation with. For example, gifting is a significant part of most Indigenous ethic and worldview systems that makes visible the respect we have for one another and is especially vital when requesting of a person's time, energy, knowledge, or space. This extends beyond the idea of a simple 'exchange,' instead highlighting gifting as a process of sacredness which stems from the interrelated webs to which we all belong. Fundamentally, gifting within an Indigenous worldview is a way to sustain and renew the balance of the socio-cosmic order of our communities, lands, and spirits (Kuokkanen, 2004). Though each Nation and community will have different specified variations of this practice, considerations around how we truly honour the lands and peoples involved with potential drug checking programs, as well as how we are reciprocating the gifts which have been shared between us, are essential components of ethical practice.

To follow local and culturally specific protocols, ethically based drug checking programs also require that all service providers, particularly those who may be non-Indigenous, are offered gifts of knowledge in the form of personal and educational development surrounding localized laws and realities. This can be facilitated by inviting local Elders, Knowledge Keepers, educators, and community members, including those who use unregulated substances, to share in their wisdoms with those practicing drug checking. Learning different ways of knowing and doing allows us to open our hearts and minds up to further possibilities within our practice and is a necessary move towards cultural competency and safety. However, it is important to state that these concepts mean learning the protocols of different cultures and communities, not learning how to be those cultures; so long as distinction is honoured, we can all engage with diverse communities in a good way (British Columbia Network Environment for Indigenous Health Research, 2023).

Fundamentally, all of this means that there must be a commitment to ensure that we are rejecting pan-Indigenous approaches to program development and service delivery, which are often combined collections of various cultural practices that do not apply to the peoples, communities, and lands in which they are being offered. This need is particularly important within urban Indigenous communities and organizations to consider, as programs that use Indigenous practices and wisdom from cultures not of their own – for example, organizations adopting and applying nêhiyaw cultural teachings to Inuit Peoples – are not only unhelpful and disregard the distinct needs of varying identities and backgrounds, but are also unethical with respect to the specific communities' self sovereignty where these programs take place (Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019).

In my experience, this has often been an issue primarily within urban centers and organizations who have inadequately sought permission, consent, and guidance from the peoples of the unique lands they reside upon. In saying this, I recognize that urban Indigenous communities do in fact hold a collective of many different peoples from different First Nations, Inuit, and Metis cultures, and therefore, it can be challenging to provide services that fully meet the cultural needs and wants of the diverse community within these spaces. This is why it is so imperative to foster meaningful and genuine relationships with those we work with, and ensure varied representation on our teams, so that we may offer cultural supports that are tailored,

rather than blanketed. However, I maintain that we must first practice in ways that honours the specific lands, peoples, cultural protocols, and spirits that we are on. To ethically achieve this, it is vital to employ Indigenous service providers, especially those who are local to the area, and people with lived/living experience of substance use throughout all areas of the drug checking process, including within direct practice through both harm reduction and chemistry-based technician positions, as well as within policy and research-based positions.

iii. Data Sovereignty and Protection of Knowledge

As drug checking can include formal research, or use its service data for research, it is essential to consider ways to recognize and incorporate Indigenous specific research ethics. Throughout my time within this work, I have often thought about the nature of genuine data sovereignty/governance and protection in the context of drug checking. Data sovereignty refers to knowledge ('data') which is managed according to the laws, governance structures, practices, and customs of the Nation or community in which it is collected (University of Alberta, 2024). For Indigenous Peoples in Canada, it has been a lengthy process to which respect for and protection of knowledge through OCAP® (Ownership, Control, Access, and Possession) principles have been recognized (First Nations Information Governance Centre, 2024). However, though recognized as vital when doing research within and alongside Indigenous communities, OCAP® principles are often difficult to apply in numerous contexts. For example, in a project such as Substance Drug Checking, data illuminated through drug checking currently resides within the academic institutional setting, rather than within the community it comes from (Erb & Littlechild, 2022). Similarly, this could be an issue within First Nations where there are conflicts around who governs and has access to data of community members, as well as who approves research activities if a community has not implemented its own research ethics protocols. Regardless of if an Indigenous Nation or community has developed their own ethical research processes, each culture maintains their own traditional practices around holding, accessing, and protecting knowledge. Providing pathways towards research capacity and agency, while ensuring that ethical protocols of a specific cultural context are followed, is an important consideration regarding any form of research, including data collection and program evaluation within drug checking.

Indigenous Peoples have an intrinsic right to self-determination based upon our continuous relationships with the lands, waters, skies, and cosmos we inhabit, and there is a fundamental need to (re)assert and (re)claim our inherent rights to our own data as sovereign entities pre-dating colonial powers (Kukutai & Taylor, 2016). In the context of drug checking within and alongside Indigenous communities, enacting genuine data sovereignty must involve supporting people to control and manage decisions about all knowledge related to their substance use and harm reduction initiatives, including individual and collective results, information on drug trends within the community, and the direct reflections and experiences of those accessing its services. The protection of sacred, traditional, and cultural knowledge is also a central component of this work, as for Indigenous Peoples, our wisdoms have been appropriated, misused, and colonized using research data. Although drug checking on its surface does not currently include these knowledges, in our advocacy to align with Indigenous harm reduction and culturally specific processes (if applicable),

we must consider protocols to ensure ethical stewardship of wisdoms, stories, and perspectives should they be shared alongside quantitative drug checking data, so they are protected from outside exploitation. Vitally, concepts of OCAP® as tied to protecting Indigenous knowledge are largely placed within the context of managing, keeping, and destroying data and maintaining confidentiality; however, these considerations must go deeper in that they push drug checkers to recognize and determine which knowledges should be shared and which ones should be kept from institutional and wider public settings – remaining in the hearts, minds, and spirits of communities. In the end, this involves a respect for Nation and community specific cultural research protocols and ethical practices, which acknowledges jurisdictional power over procedures and priorities that guide drug checking projects.

The exact ways in which data sovereignty can be enacted will differ within each community according to their cultural traditions and protocols. However, as drug checking data is typically used by health bodies without the consent or collaboration of the community members accessing its services, preventing drug checking from being used as a medical device, which is connected to deeply painful histories and continued practices, is essential. Drug checking processes and practices should consciously and proactively ensure it does not continue mistrustful research practices of data extraction, appropriation of Indigenous knowledges, inequitable power relations, and lack of meaningful consent and ownership, both individually and collectively (Ermine, et al., 2004). To resist against this, drug checking projects must pursue unique ways for service users to be stewards of their own data and control their usage. Ultimately, further research into ethically and morally just data stewardship and sovereignty within the context of drug checking must be meaningfully done so that barriers and challenges associated with it can be broken down.

d. Gathering

Moving on to gathering *wîhkaskwa*, we recognize that *how* we practice collecting the grass is just as important as what ultimately becomes of the medicine once harvested. This process is multi-dimensional and (w)holistic in nature and requires that we know what to look for, as told to us through the wisdoms of Elders, Knowledge Keepers, and those with lived experience. Visually, we must be aware that *wîhkaskwa* is distinct from other grasses on the plains; reddish-purple on the bottom, it does not have many shoots coming from its primary stem (unlike something like hay), which is within an encasement connected to the ground. As spoken to within the *protocols* section, we must be conscious to never pull from the root, and we should not select grass which is too close to each other and only take what is truly needed. As explained, tobacco is to be given before taking the grass from the earth, which should be done in ways which follow the ethical protocols of the local territories we are upon. Often, we pray while gifting tobacco as well as during the act of gathering itself, and this is also a time where we can speak with the plant, tell it what it will be used for, and to give thanks for the medicine it will provide for our selves and communities. Moreover, gathering *wîhkaskwa* requires that we consider whether to go out onto the land to gather alone or with others within our community. Each option has its own benefits for our wellness; for example, if going alone, we become personally close with the spirit of the grass, speaking to it as we speak with ourselves. When harvesting alongside others, a whole communal event often takes place where food is brought, stories are shared, and laughs are heard. The primary point is that both ways of gathering

medicines are valid, healing, and necessary in their own ways; yet, deciding which way to gather requires a deep consideration of our own unique needs for wellness.

i. Tailoring and (Re)conceptualizing Drug Checking Methods

In my deliberations on possible Indigenous approaches to drug checking, I think of how the process of gathering *wîhkaskwa* is akin to the methodological approaches taken to gather knowledge about the substances tested and people's personal experiences with them. Fundamentally, this connection brings up considerations around what information we seek out, and the actions we take to locate this knowledge through drug checking technologies and other methods. As with gathering *wîhkaskwa*, it is important that we consider which methods to use in the unique contexts and environments we are in, so they align with our community's distinct cultural practices for helping and healing. In our journey towards ethical, socially just, and decolonial drug checking, we must ask our communities which methods feels the most comfortable to them, including exploring possible variations in the ways they are practiced.

Drug checking technologies most often used, such as Fourier-Transform InfraRed Spectrometers (FTIRs) and fentanyl test strips, hold their own standard operating procedures which must generally be unchanging to work effectively; however, possibilities for tailoring how those procedures are conceptualized, considered, and implemented to meet the specific needs of different Indigenous communities, including in ways which reflect local knowledge systems, languages, and contexts, could be explored. As drug checking technologies consistently evolve and grow to better meet the needs of those using their services, opportunities for customization designed by and for Indigenous communities cannot be left out. Further, while our use of technologies tells us knowledge which is widely considered uncoverable by



An FTIR and technician, alongside a smudging bowl, used at Substance's first-held Indigenous drug checking event at a supportive housing building. Staff took time to smudge before the event began, and it was offered to any of those accessing services who requested it.

other means, like the specific chemical makeup of a substance, by themselves they are an insufficient piece of the entire drug checking process. Gathering information on a substance through drug checking must go beyond illuminating their chemical composition; rather, we must utilize multiple forms of knowledge gathering, including methods innate to our cultural practices of sharing wisdom and the distinct environments we are in. Fundamentally, this is the essence of Indigenous methodologies for knowledge illumination, and examples of ways that other drug checking wisdom could be gathered include through talking and storytelling circles, or while engaging in cultural activities like blanket making, beading, and cedar bark weaving. Using these methods for gathering knowledge, drug checking can also be strengthened by additional forms of service user wisdom, potentially including, for example, those brought to light through dreams (Rowe, 2014). When combined with the prescriptive information illuminated through drug checking technologies, our data becomes enriched within a (w)holistic worldview. Essentially, we gain knowledge through the universe surrounding us in numerous ways, and we must use both those which are deemed 'empirical' and 'non-empirical' forms of wisdom (Wilson, 2008). To me, this is the essence of what Mi'kmaq Elders, Albert and Murdena Marshall, call *Two-Eyed Seeing* (Wright, et al., 2019). Within our emerging frameworks and approaches for decolonial, Indigenous centered drug checking, we must apply the best practices of both Indigenous and non-Indigenous worlds and knowledge systems. Drug checking methods and the type of data typically collected are driven only by Western scientific interests for knowledge production; therefore, it will be important for drug checking programs to consider how to utilize methods that honour the dual wisdoms inherent within Indigenous and non-Indigenous approaches.

Gathering knowledge through drug checking can and should take many forms, by which our use of technologies or direct service user expertise cannot occur in isolation. Just as gathering wîhkaskwa can happen collectively, it is possible to make drug checking a communal experience, where each person's voice surrounding its services are valued, respected, and centered. As discussed previously, many of these instruments were not originally developed for harm reduction, and are/were instead used to penalize, criminalize, and stigmatize people who use drugs; as such, I see using them in new ways and contexts as an act of resistance against the inherent violence of the war on drugs. In this way, these technologies are ultimately greatly influenced by how they are used and for what purpose – all of which should be led by those within and surrounding its services. To ensure these technologies are used in ways which recognize the (w)holistic requirements needed for our communities to be well, drug checking programs must involve those that possess and can practice these different ways of being, knowing, and doing. With this inclusion, drug checking teams, and indeed whole communities, can (re)evaluate and (re)conceptualize the unique relationships held with these technologies and methods.

ii. Considerations of Spirit within Drug Checking

Part of my reflections surrounding drug checking have come from my own personal experiences using spectrometers within unique and diverse environments, as well as working alongside the technicians that operate them. Within these spaces, I have thought about the spirits contained within and around the materials we use to reduce harm; specifically, recognizing, listening to, and honouring those which are embedded within the technologies we use to drug check. Many within the dominantly positivist driven, Eurocentric society conceptualize machines, such as spectrometers used for

drug checking, as inanimate objects designed only for us to extract knowledge from them (Franklin, 1990). However, through a nêhiyaw worldview, for example, anything that is part of our collective cosmos holds its own spirit, containing distinct wisdoms embedded within it. When recording a conversation and including technology within his research, Wilson (2008) shares: “This machine here is made from mother earth. It has a spirit of its own. This spirit probably hasn’t been recognized, and given the right respect that it should. When we work in a world of automated things, we forget that...everything is sacred, and that includes what we make” (pg. 90). Fundamentally, everything holds spirit, even those ‘objects’ which may seem less ‘natural’ – in our ways, all that exists and can be imagined is alive and contains information and teachings, which in turn influence the relationships we hold with them.

This perspective has also been elucidated in other ways, as discussed by Betsos, et al. (2022), where drug checking technologies like spectrometers and test strips act as their own non-human agents within drug checking spaces, which then influence how people using them think about, conceptualize, and relate to the substances they check. Indeed, a spectrometer itself can also be theorized as a device which enables the spirits of a substance to be seen, with the word ‘spectrum’ or ‘spectra’ visible through its process, derived from the concept of a spectre, ghost, or spirit. A Spectrometer, then, can be (re)conceptualized as a doorway to another dimension or universe, which allows us to see that which is not visible within everyday activities. Ultimately, these materials and machines are still a part of our world; their atoms come from the same places we as human beings do – we all come from the stars of our cosmos, and therefore, we are intimately interrelated and interdependent forever. Though I feel it to be important to acknowledge and respect the spirits embedded within drug checking technologies, I have also experienced the challenges associated with attempting to do this in direct practice. For example, when using a spectrometer in a heavily used harm reduction setting, the constant use of the machine causes its energy to feel chaotic. This point is highlighted within my personal journal entries after coordinating and facilitating a community drug checking event:

“I wanted to think about the essence of the FTIR and about the spirit it might hold, and it did feel chaotic because of pressure and the need to provide results in a timely manner. The ways that we were trying to slow down to and use the machine in a way that honours its spirit was a challenge because the need from people accessing services is so great...I’m not yet sure how to get around some of these barriers/challenges that exist when it comes to operating the FTIR...ultimately, to be able to do drug checking that aligns with Indigenous worldviews and approaches, the very basic foundation of (w)holistic support (for everyone involved, including the machine) needs to be there.”

This personal observation describes how difficult it is to change the ways drug checking technologies are used given the unpredictable environments and social contexts people are often in. Certainly, we are all living under the pressures brought about by colonialism, including the very real effects of drug prohibition and a persistent disparity of fundamental human needs. In this scenario, there is little winning for anyone – service users, providers, or the technology – and the pressure embedded within the entire process impacts how we relate to, access, practice, or conceptualize drug checking. When the need for services like drug checking are great, there is immense pressure to provide individuals with their results as quickly as possible. I believe this reality stresses the need to ensure there are enough service providers always practicing drug checking, and that each person is given roles and

responsibilities unique to their inherent gifts. This is in line with our traditional knowledges, as each person within our communities had their own roles to ensure the good health of the whole. Though I can learn to practice the technical aspects of drug checking, I recognize that my role within this work is more aligned with and strengthened by cultural planning, research, and relationship building. My own history with western scientific values feels uncomfortable and has made it harder to practice drug checking with the ease and speed it often demands. The Substance Drug Checking Project itself has an interdisciplinary team, consisting of those with gifts in social work as well as chemistry, public health, and software development. Yet, to bring this to a place where we can slow down, recognize and show respect for the spiritual energy of the technologies we use, and perhaps practice other culturally specific methods of gathering drug checking knowledge, requires that we ensure there are an appropriate amount of drug checkers at one time, that our drug checking teams include people with multiple different and complementary gifts, and that there is space to acknowledge the often heavy emotions that often accompany the environments we practice within.

iii. Drug checking as a Site of (Re)connection, Culture, and Ceremony

Beyond the technologies used to drug check, I have often thought about the spirits of those which exist all around us when we do this work and the ways that we should honour them, as we also honour those who access our services. During one outreach drug checking event I held within a supportive housing building, I could feel intense grief and loss surrounding me as soon as I walked into the space, which was certainly reinforced through the stories people accessing the service shared with me. This was an echo to my own experiences working in housing; the profound sadness which envelopes the spaces that many people live, love, and die in is difficult to (re)process, particularly for those of us who have been closely connected to them. To me, this highlights the importance of infusing culture and ceremony alongside harm reduction practices like drug checking; fundamentally, going beyond testing substances and centering (w)holistic wellness and healing by offering access to other supports, especially those which are cultural and spiritual, within the same spaces as drug checking, can be a vital lifeline for both people and the spirits of our community members who have been lost.

At the core of Indigenous harm reduction lies its strengths of (re)connection to culture and ceremony; throughout my practice experiences within drug checking, I have considered deeply the need to entwine these elements directly alongside services. One of the ways I have done this is by providing plant-based medicines to service users within the same environments drug checking takes place, including to-go smudge kits full of sage, wîhkaskwa, cedar, loose tobacco, shells, and matches. An important part of my own preparational wellness, as spoken to previously, has involved the actions of gathering these medicines and putting them together in easily accessible packages for on-the-go. Of course, offering plant-based medicines is only one example of supporting those who access drug checking; crucially, we must also provide pathways to (re)connection with selves and each other by offering spaces to connect with Elders and Knowledge Keepers, land-based healing, traditional languages, and ceremony, regardless of where an individual is at within their substance use and/or healing journey (Aboriginal Coalition to End Homelessness, 2018; Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019; First Nations Health Authority, 2023). These should not only be

supportive for those accessing and providing services but should also be nourishing to the spirits surrounding us and the spaces itself. Indeed, there is often no acknowledgment of those who have passed away in these spaces, which makes it appear as though these lives did not matter and disconnects us from each other and the world around us. Consequently, I deem it important to give an offering of tobacco to the space where so many of our kin and community have passed away due to unjust drug policies and regulations, and to engage in ceremonies that help both those of the living and of the spirit world receive closure.



A medicine package, with label, available at Substance's Truth and Reconciliation Day drop-in art event. Photo credit: Lea Gozdziński for Substance Drug Checking.

During these outreach events, another consideration I had connects to how the very spirit of drug checking itself, and its methods used, can be potentially (re) conceptualized in the context of our traditional practices. For example, through the cultural teachings I know, I envision a spectrometer as if it were an animal which our ancestors would patiently observe on the land. As I have shared, I was taught that animals have always shown us the wisdom we need to know. Alongside the spirit world, the animal world has demonstrated to us which plants have been safe to consume - we have always used and respected their guidance, and I believe that drug checking technologies can be contemplated through this lens. As illuminated through another portion of my practice journal:

"I connect the machine to as if we were watching animals consume and not consume certain plants on the land, because they have always been our teachers and guides in many ways to show us what is 'safe' and what is not, and I think drug checking could kind of be thought of in the same way...I wonder, how have we always practiced what is now called 'drug checking?'"

Drug checking technologies, though human-made, are a part of our world, and can be (re)aligned with the ways that we practiced "drug checking" prior to the current technologies available now. I recognize that illicit substances are also widely perceived as 'unnatural'; however, if we understand that even machinery holds a spirit according to our knowledge systems, as everything within the cosmos does, then we may consider that substances hold their own spirits as well. Through spectra analysis, drug checking instruments can permit the molecules to communicate with us, sending us messages and information from a spatial environment we cannot readily perceive, yet are intimately a part of. In these important ways, I feel that communities seeking to engage with drug checking services must hold community conversations and carefully consider how we can be attentive to the spirits and wisdoms embedded within drug checking technologies, and that we evaluate our relationships to them - what do/can they mean to us? How do they align with our traditional and cultural

knowledge on consuming any material or medicines from the land? What were our traditional methods for “drug checking”; i.e., how did we gather knowledge on and determine which plants were safe to consume? In many contexts, these knowledges would come from praying and ceremony, and in others, they would come from our observations of the cosmos around us. Ultimately, these are questions that each Indigenous Nation, community, and organization must ask and answer themselves based upon the sacred wisdom embedded within their cultural practices, languages, and knowledge systems. So often, our knowledges and practices have been colonized and given a new face, where an action like “drug checking” becomes a new term for practices we have long since held within our communities.

As we consider how drug checking can move beyond gathering only the information of substances using the various technologies we have, we must keep in mind that Indigenous harm reduction is not merely a set of practices to be followed; rather, it is a way of life which recognizes the interconnection and interdependency of the natural, spiritual, and social/human world (Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019). Transcending its primary purpose of testing substances means that we can also attend to the (w)holistic wellness of all those involved in its services directly alongside drug checking practices, and data collected on the substance and the technologies used to test them are not the only knowledge gathering activities that happen when engaging in drug checking. Individuals own bodily and lived experiences, perspectives, and stories of the substances they take are also knowledges which are exchanged between service users and providers. In collecting all these knowledges, it is important that we consider how to provide a genuinely relevant, safe, and nurturing space for people to share their wisdoms with us if they want to, including both their wisdom around the substances they use or just their lives in general over a meal and tea. This can involve making space and time for occurrences like storytelling circles between service users and providers, one on one conversations, and communal feastings.

In considering drug checking as a potential pathway towards self-directed wellness, there can not only be an infusion of cultural supports, relationship building, and ceremony alongside its services, but importantly, it could also be (re)conceptualized as its own ceremony in and of itself. Fundamentally, drug checking involves following a specific set of procedures, rituals, and instructions, and if the technologies we use for drug checking hold their own spirits and wisdoms, then the process itself of drug checking holds this same significance as well. If done in ways that diverge from mainstream colonial conceptions, drug checking can be thought of as a ceremonial practice, where community members gather in communal spaces, and can create experiences of social belonging, emotional, mental, physical, and spiritual mutual support, and decreased senses of self-stigma. Just like engaging in cultural ceremonies allows us to (re)learn practices to be passed on to the next generations, there can be opportunities in drug checking to provide teachings that service users can then offer to others within their communities, thereby creating systems of community care, self-identified safety, and wellbeing. Like our cultural ceremonies which maintained continuity despite their criminalization through genocidal policies, community care through drug checking is resistance against a social climate that aims to punish and dominate people who use drugs. (Re)conceptualized in these ways, drug checking can facilitate getting to know ourselves better by making visible the methods we use to reduce the harms in our lives.

e. Braiding

Once we have gathered the wîhkaskwa that we need, we transform it into further forms of medicine for our individual and collective healing through the act of braiding it into three sections. To do this, we must consider how, why, and where we braid, what teachings become embedded within its three sections, and the ways in which we make meaning of the process and our experiences. To begin with, wîhkaskwa should generally be braided relatively soon after it is harvested as it can become too brittle and may be harder to braid if left too long. In this way, we ourselves are accountable to the grass and must show it great care if we are to translate it into our use for medicine. Braiding wîhkaskwa can be done out on the land in the traditional way, though it is

not a necessity if that is not a possibility; importantly, this is meant to be an inclusive practice. If there is an abundance of grass, some braid while it is still connected to the earth. Traditionally, the end of the braid can also go in our mouths, which keeps it held while braiding it and allows for a closer connection with its spirit; others braid using two people – one to hold and one to weave. Through any way we engage in this process, we are deeply connecting with ourselves, our plant relations, and the earth.

Throughout this practice, prayers embed themselves within the grass, and once finished, the three strands of the braid hold teachings for us to live well; certainly, this act is how we make meaning of the braid. Lastly, when burned, our braids are then used as medicine for sending our prayers up to our ancestors into the spirit world – it also grounds us and allows us to ‘re-member’ the knowledge within us, and in this way, we can receive life teachings from our ancestors that allow us to heal ourselves. This entire process is a reciprocal and respectful one which entwines ceremony, protocol, and ancestral connection throughout it. Indeed, braided wîhkaskwa when burned is our pathway to send prayers to our ancestors into the spirit world; it grounds us and evokes our knowledges within – reminding us of who we are, where we come from, and our intergenerational resiliencies.

i. Centering Indigenous Methodologies within Meaning Making

In the same ways we make meaning of wîhkaskwa through the knowledges entrenched within gathering and braiding it, we also make meaning of the knowledges/data we have uncovered through the stories of those who access drug



Plant medicines, including sweetgrass braids, sage, cedar, and tobacco, available to Indigenous tenants alongside Substance's first-held Indigenous drug checking event at a supportive housing building. Bundles were made with these medicines, along with shells collected locally and small tobacco ties, and gifted to those accessing or connecting with drug checking services.

checking services, and of the wisdom which is illuminated and encoded within the substances themselves. To me, drug checking is inherently as much a harm reduction practice as it is a research activity, where knowledge is gathered, illuminated, and analyzed, of which the latter can be thought of as “meaning making” (Absolon, 2011). Within drug checking, how drug data is analyzed, what meanings we ascribe to it, and how those meanings/results are shared depend heavily on who is doing it, where their lived experiences are rooted from, and for what purposes they serve.

As a harm reduction method, drug checking involves analyzing substances to uncover their chemical composition and concentration so those who use them can then make informed choices for themselves, both before and after use. This ultimately honours autonomy and self-determination, in that it allows individuals choice and shines a light on the personal harm reduction methods they feel they want or need to take. Trends and insight into local drug supplies and ‘new’ and emerging substances can also be learned through drug checking, and monitoring such trends within community allows harm reduction and public health organizations to share drug ‘alerts’ or ‘warnings’ about the current supply (Rose, et al., 2023). Moreover, there is potential for understanding possible behavioural patterns, including level of awareness and reduced frequency of overdose and other harms. Though often overlooked, there is also potential for a deeper understanding of the socio-cultural systems which influence how people access and experience drug checking, and how they experience harms as a direct result of structural inequities, criminalization, marginalization, and oppression (Wallace, et al., 2021).

There are different intersections of ideologies and positions involved within drug checking, as discussed by Betsos, et al. (2022), and how we analyze drug checking results and share them within community differs based upon the epistemologies, societal locations and lived experiences that we hold. When an individual gets their substance(s) analyzed, there is a conversation between service user and provider, where knowledge such as beliefs about what the substance is and/or how it felt are shared and collected. From there, these substances are examined using technologies, where workers, typically a mix of scientifically trained technicians with a background in formal chemistry and ‘PEERS’ or peoples with lived/living experience with a background in harm reduction, often work in unison to fully analyze the data and determine their composition, and provide results back to the individual (Betsos, et al., 2022). Although experiential and lived knowledge, such as perspectives on what a substance is thought to be or how it felt, is an important component of the overall drug checking process, it is often not as highly valued as quantitative data within Eurocentric-based scientific projects. Fundamentally, white supremacist ideology situates western knowledge systems as dominant, more valid and ‘objective’, which diminishes or ignores Indigenous ways of being, knowing, and doing (Wilson, 2008). Conversely, when taking an Indigenous methodological approach and cultural lens to drug checking research, such as the autoethnographic and *nêhiyaw* centered framework of this writing, we see how both qualitative and quantitative knowledge can be analysed and interpreted through Indigenous values and voices (Yunkaporta & Moodie, 2021).

Within Indigenous contexts, research can be a ceremonial and spiritual act, centering and infusing traditional knowledges, worldviews, and practices into the data analysis/meaning-making process (Absolon, 2011; Wilson, 2008). As referred to previously, it is also vital to recognize that the term ‘research’ is inextricably tied

to colonial ideals of dishonesty, extraction, imperialism, and domination, as our experiences within western research have caused further trauma and little to no benefit for our communities (Smith, 1998). Taking a decolonial approach to research processes, including how community members themselves make meaning of the data, allows us to (re)connect back to the ancestral ways that our peoples have always done 'research'. As Kovach (2009) shares, our ancestors shared stories and teachings about their experiences, passed on orally – observing patterns and behaviours, within both the natural world and the self, and making sense of these observations in context-specific ways. Most often, Knowledge Keepers were (and unquestionably still are) the ones who held and passed these teachings on to others, of which the wisdom was then carried on by others within the community, ultimately allowing for cultural continuity. These wisdoms are not generalizable, in that they differ according to each cultural and relational context in which they are shared (Kovach, 2009). This means that the knowledges uncovered through 'research', and the meanings ascribed to them, are fluid, shapeshifting, and evolve depending on who is sharing, how it is being shared, and who it is being shared to; certainly, this is a part of the scientific process according to Indigenous Peoples.

In our continued visions for Indigenous drug checking data approaches, honouring these ways of doing and knowing within our communities can involve ensuring a deep collaboration between Knowledge Keepers, those with lived/living experience of substance use, and the service providers who practice drug checking in the interpretation of knowledge/data in ways that reflect culturally specific understandings, values, and contexts. When drug checking provides community aggregate reports, this co-creation of knowledge and collective analyses alongside those with cultural and lived expertise also supports the movement for sovereignty and ownership over not only the data itself, but also that of the entire drug checking process. Whatever the context in which drug checking data analysis occurs, using culturally specific methods can avert misinterpretations and ensure that the results genuinely reflect the community's perspectives and experiences (Lipscombe et al., 2021). Moreover, collective and one-on-one meaning making allows us to deeply understand the themes within participants' perspectives and experiences as they intend them, address power imbalances inherent within the service user-provider relationship, and honour which knowledges should be widely shared, and which ones belong only within our hearts, spirits, and communities.

It is too often that our traumas as Indigenous Peoples are fetishized, and despite the healing that occurs in sharing our experiences of both pain and resilience, not all knowledges are meant to be shared with those who could seek to colonize our intelligences (Tuck & Yang, 2014). Vitally, this collective meaning making centers healing rather than 'creating' knowledge to be 'used,' and supports the rightful ownership of the knowledges we need as individuals and communities to understand, (re)claim, (re)vitalize, and resist colonial oppression. Though these approaches may be more easily practiced within a qualitative, experiential knowledge-based context, how can these processes take place within a quantitative format, such as those around the chemical composition of a substance, which is seen as static and concrete?

ii. Forms of Knowledge

Interconnected within the process by which drug checking data is analyzed, the presentation of these meanings should also be given considerable thought within Indigenous contexts. Drug checking results are typically presented through both individual and aggregate community reports; connected to the technologies used, these results tend to privilege Eurocentric-based scientific evidence and quantitative/statistical data which largely devalue lived experiences, multiple ways of knowing, and different realities. Though these data are useful, they do not tell a complete story, and there are potential issues with

both their use as a tool of oppression for colonially rooted interests, as well as with community understandability. Firstly, Indigenous Peoples have been hyper-surveilled and over-coded within research, whereby our ways of being, knowing, doing, and feeling have been quantified and changed in ways that do not truly benefit or respect our communities, and has indeed been used as a form of social control (Tuck & Yang, 2014). This approach continues to be used by most public health systems to stigmatize and ultimately deter the community away from specific substances which are deemed to be 'dangerous.' Undoubtedly, this particular use of drug checking knowledge is often shown in a way which leaves out community members' experiential and embodied knowledge on the substances they consume, including how the substance(s) felt, what they were thought to be, and whether they consider specific substances to have harmful effects on their own; essentially, disregarding the ways that people who use drugs co-produce drug checking data alongside drug checkers (Betsos, et al., 2022). Moreover, this also serves to disregard the vast number of harms that come directly from the criminalization, stigmatization, and colonial violence surrounding illicit drugs – instead, focusing on individualized behaviours and pathology.

As a decolonial alternative to this approach, drug checking can instead meaningfully make space to ask of those who use its services: how did you feel when taking this substance? How did you experience the world around you? Additionally, how do these experiences align with what you perceive the substance to be? Unregulated substances are rarely ever described in ways that could possibly be beneficial and useful to those who use them. In my own experience of drug use, there was always a reason why I engaged with certain substances, and what was important to me was how it made me feel; basically, what effects did it have on my mind, body, and spirit, how has it differed from other occasions where I have consumed it, and how does this ultimately fit within my own wellness desires? It is when we are validated in



The literature and resource wall at the Substance Drug Checking storefront. Photo Credit: Ava Margoless.

these feelings that we can better practice our own distinct methods of personal and relational harm reduction. To me, these forms of knowledge cannot be understated within drug checking, as it is these community embedded wisdoms that, when shared in distributed results and reports, help to validate not only our experiences, but also promote the inherent strengths each of us hold to know what is best for us; each one of us is walking a pathway of wellness and healing, regardless of if it appears different from others, and as drug checking service providers, it is necessary that we honour this and work to understand how illicit substance use can (or cannot) fit alongside these journeys. Like the process we take to braiding wîhkaskwa, how we make meaning stems directly from our own knowledge systems – as spoken to many times throughout this writing, gathering and braiding wîhkaskwa requires that we are shown how to do it from those who hold knowledge, that we gain additional knowledge born from the act of experiencing it ourselves, and that we look inward to our ancestral wisdoms. Analyzing drug checking data then takes not only the information told to us through others, but also requires the experiential, lived, and embodied knowledge of those who use the substances being analyzed.

Secondly, the results of a substance are often provided using pharmaceutical names which can present as more ‘valid’ but can also be potentially confusing to understand, thereby possibly alienating the many ways of knowing about and experiencing the effects of a substance. While it is certainly not my intention to say quantitative data or pharmaceutical names should be completely left out of drug checking results, it is problematic to include only this information, particularly without the direct guidance of the communities in which it is coming from. Indigenous worldviews are not predicated on there being only one, singular truth, as is largely solidified through quantitative data; rather, there are multiple truths and realities, and each person who uses substances holds the expert wisdom of their own. Language is a large piece of this, and however community members label and name an illicit substance should be included within results and reports directed towards them. For example, fentanyl on the street is commonly called ‘down’ by those within the community, and advisory around this language should be sought. Moreover, just how we would prepare the spaces where drug checking occurs, so too can we make considerations on the visual presentation of drug checking results and community reports so that they contain culturally relevant imagery and traditional words within them. Just as there are differences in the culturally specific ways wîhkaskwa is gathered and braided, each Indigenous Nation, community, and organization could incorporate their own culturally supportive elements through results and reports, including distinct art forms, traditional languages, plant-based knowledge, and ancestral stories so that they truly meet the cultural relevance and understandability of the community. In the end, how we present results and reports back to those who need it must include a deep and collaborative consideration of how it will genuinely benefit the (w) holistic wellness of the community – encompassing needs connected to the social, cultural, relational, physical, emotional, and spiritual dimensions – which includes understanding how the data born out of the drug checking process, and of the substances themselves, impacts all aspects of community life and well-being.

As Wilson (2008) explains, knowledge is seen as belonging to the cosmos of which we are a part, where researchers are merely the interpreters of this knowledge. Through looking at drug checking knowledge/data through a decolonial, culturally (w) holistic, and personal lens, we come to understand how we interpret and analyze drug checking wisdom is just as important as the results given back to community. In this

f. Giving Back

Wîhkaskwa braids are not only to be kept for ourselves; when we finish braiding, they are to be given away as gifts to all those who need them, and we pray for their wellbeing and that of all which surrounds them. In this way, the values of reciprocity, relationality, and sharing are emphasized and put into practice. This medicine helps us to heal, which is something we all deserve and should have access to – whether we can get out onto the land ourselves or not. When gifting braided wîhkaskwa to others, it should be wrapped up to protect it, either in cloth or tissue paper. Many people will keep their braids in a cool, dark space to protect and preserve them; however, it is also acceptable to keep wîhkaskwa out so that its scent emanates throughout the places we need them to be. Wherever our braids live, they are our kin and have sacrificed themselves for us to heal, and it is important that they be treated with the utmost respect and honour. For many reasons, there may also be times where we do not burn our braids. If unused in this way, we sometimes bury it within the ground, returning it back to the land. In a deep and meaningful way, sharing our braids with others ultimately ensures a respect for balance, in that the benefits of this medicine are used not only for the wellness of individuals, but also that of the collective whole.

i. Access to Culture, Elders, Land, and Lifegiving Resources

In many ways, *giving back* is cumulative of the entire drug checking process – from the personal and relational preparation prior to practicing drug checking, to the careful consideration of culturally specific protocols and ethics, to the ways that we gather the knowledge of substances through different technologies, to what meanings we make of the data illuminated throughout the drug checking process, to finally, the ways in which we genuinely give back to the individuals and communities that we walk alongside. Going beyond checking illicit substances means that we weave and braid (w)holistic wellness, resistance and resilience, decolonization, and culturally specific wisdom throughout it. In many ways, *giving back* can be conceptualized as ‘knowledge mobilisation’ for healing and a decolonial future.

As we vision for how these teachings can align with drug checking programs and practices, we must ensure that what we are doing, throughout all levels, is giving back to the peoples and communities from which something has been taken. Although service users receive a result for the substances they check, they are also providing drug checking services with information around their own wisdoms of the substances they bring, which should be utilized in ways that provide direct benefits for both individuals and the whole community. Using multiple pathways, drug checking should place an emphasis on sharing wisdom, and supporting peoples and communities in using those knowledges in ways that work to understand what wellness, irrespective of substance use, looks like within each context it occurs in, and then promote self-directed healing, (re)connection, resilience, and unique resistance practices for all involved (Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019).

Giving back summarizes earlier thoughts, which is that drug checking should go beyond only giving the results of the drug supply through results and reports, providing harm reduction tools and education, and offering a non-judgmental space to engage with drug checking staff. While these may seem central to drug checking services, we must additionally consider how to attend to the entirety of a

person's being of wellness – physical, emotional, mental, and spiritual - including through gift giving of cultural medicines, food, spaces of safety and comfort, self-care and essential resources, and ways to meaningfully follow up personally to ensure individuals, families, and communities have all the tools they need to be well wherever they are at along their journey. Importantly, this also means ensuring all those involved in drug checking have access to Elders and Knowledge Keepers, possibly within spaces directly alongside services, provided there is structural and relational safety and support for their presence.

For our communities, Elders, Knowledge Keepers, and Language Holders are the living memories of our ancestors, and the gifts they provide around cultural ceremonies, languages, teachings, and the lands, waters, and cosmos to which we belong is a critical lifeline for our peoples (Aboriginal Coalition to End Homelessness, 2018). Combining drug checking services with programs that provide opportunities for activities such as land-based healing and learning is an essential element of *giving back*. When we sit with, learn from, and listen to the wisdom and guidance of our Elders, Knowledge Keepers, and Language Holders, the seeds of (re)connection, restoration, and healing become planted within our hearts, minds, and spirits.

However, it is also important to acknowledge and leave space for the fact that there will be variances between Indigenous Peoples' desire for cultural and ceremonial supports, and some individuals and communities may connect more with western forms of wellness. Whichever ways our peoples feel that they need to journey on the pathway to healing must ultimately be honoured and respected (Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019). Additionally, it is necessary to ensure that service users have access to Indigenous service providers with lived and living experience of substance use while drug checking, where individuals can receive support in connecting with other fundamental community services, such as those which will help gain equitable access to the fundamental determinates of health, such as housing, education, and healthcare.

The involvement of Elders, Knowledge Keepers, Language Holders, and peoples with lived/living experience should not be limited to only supporting individuals throughout the drug checking process but should also place them within positions of leadership around developing drug checking programs, practices, and policies within their communities (Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019). Going beyond drug checking by providing opportunities for cultural nurturance and genuine love are vital for illuminating the pathways towards self-directed healing. When we have access to these gifts, we can better (re) connect with our selves and the knowledges of our ancestors, which helps us to remember who we are, the strengths of our inner wisdoms, and the understanding that we know ourselves what we need to live a good life.

ii. Bridging Capacity and Sharing Knowledge

Giving back also means that we place an emphasis on sharing and supporting individuals and communities in using the knowledges that have been uncovered through drug checking to bridge capacity for a decolonial future – individually and collectively. One way this can be done is to hold teaching opportunities for those wanting to check their own substances (Basu, 2022). Giving back to community members through knowledge of practice in this way works to center the self-

determination and inherent power of those who use substances. Moreover, it places a high value on reciprocity and honours yet another way that people who use drugs resist against the structural oppression that comes with living under current colonial systems.

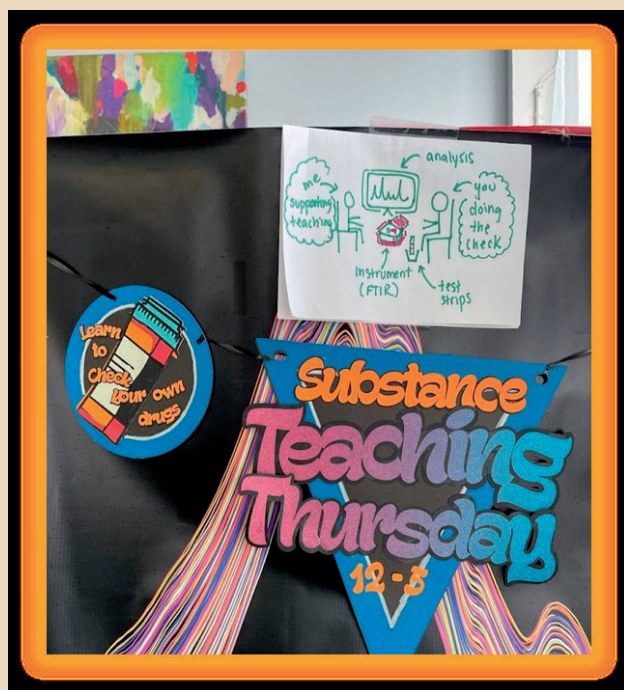
For many, drug checking adds another tool to their own bundles of wisdom. It also allows people to share the knowledge they have learned through drug checking with the rest of their communities, thereby supporting systems of community care. Teaching assists individuals to learn deeper about their choice of substance(s) and their own inherent capacities for infusing drug checking alongside personal practices of harm reduction. Drug checking can be a mysterious practice, and by making visible these processes where people can see themselves how their substances are checked, and learn to do it themselves, contributes to the already significant level of expertise of those who use illicit substances – creating further opportunities for individuals and communities (Betsos, et al. 2022).

iii. Educational Materials

In the same vein as sharing drug checking knowledge, as we conceive of other ways to *give back* to community members, we can consider how the educational materials we provide move away from a warning-centered, medicalized approach to substances and their uses, and instead center the unique resistance practices of the community, emphasize cultural relevance and safety, and make use of our own traditional languages and ways of talking about substances/medicines. Moreover, designing and sharing educational materials that frame unregulated substances in ways which decolonize our conceptions of them through the lens of non-judgment will support communities' self-determination to know what is best for themselves, including how substance use could fit alongside individuals own self-determined healing journeys, and how it can be used as an act of resistance against colonial violence. From my own personal and professional experience walking alongside those who use unregulated substances, I can see the ways that drug checking services can not only hold opportunities to destigmatize and decolonize how we look at substances, but they can also hold space for the potential role of substance use as a source of resistance, resilience, and medicine.

iv. Further Knowledge Illumination

Giving back through research is another way drug checking can ensure that its services and programs are aligned with the wants and needs of each culture and community through which it intends to take place. It is important to state that, although research in a colonial context does not equitably give back to individuals and communities, research processes through



'Teaching Thursday' - An opportunity for service users to learn to check their own substances. Implemented by Chemistry Post-Doctoral Fellow and Substance team member Lea Gozdziński (PhD). Photo Credit: Substance Drug Checking.

Indigenous worldviews and methodologies, which are rooted within culturally specific ways of being, knowing, and doing, and led by community guidance, works to center genuine and meaningful benefit over solely academic papers or grant funding. The entire research journey and how it can benefit individuals and communities becomes the focal point, and through decolonial, culturally centered methodological approaches, research around drug checking has the potential to reconceptualize and reconcile its technologies, substance use, and harm reduction in general with Indigenous values, beliefs, and experiences.

Within my own experiences, engaging in Indigenous centered research provides not only pathways to healing for everyone involved in its work, but it also contributes to healing for the whole of the cosmos. In my visions for decolonized, Indigenous centered drug checking, I realize there is much work still to be done to truly understand how its methods and practices can fit alongside our cultural knowledge bases for health and wellness and ultimately be useful for us. One area for further work which I feel is connected to these questions include determining if there is a connection to the ways we have always ‘tested’ plants and medicines, according to our oral testimonies and knowledge systems. Similarly, considerations around how, if at all, our ancestors conceptualized, interacted with, and named plant-based medicines which would now be seen as used to create many of the illicit substances we see today, as many pre-colonial peoples have (Daniels, et al., 2021). Exploring this idea could expand on the possible benefits people feel out of using substances, and how it is a method to reduce the harms within their lives.

There is also a need to better understand how the multiple intersections of identities of Indigenous Peoples impact drug checking processes, and what is needed to ensure programs and services are genuinely inclusive and tailored to the specific needs of 2Spirit, LGBTQIA+, youths, those with disabilities, and beyond, as well as the distinctions needed between rural and urban communities, and the uniqueness between First Nations, Inuit, and Metis. Lastly, exploring issues of stigma within Indigenous communities is a critical part of decolonizing harm reduction and substance use in general. We have all been impacted by the vast, intersecting, and complex harms of past and present colonialism; yet, we have also continuously resisted in multiple and nuanced ways. In the times where I have done drug checking, I have learned greatly about how people are using substances and for what reasons, and I truly believe this has significant potential for understanding deeper the ways that individuals and communities not only support their own ideas of ‘harm reduction’ and wellness, but also make visible the expertise, strength, and care they have for



Plant medicines, shells, buttons and drug checking resources at Victoria Native Friendship Centre's 2SLGBTQ+ Youth event in February 2025.

those around them. Through illuminating knowledge around drug checking's potential as a site of resistance and resilience against colonial harms, we can ultimately denigrate substance use and addiction-related stigma.

As I write this paper, I have in many ways found it difficult to fully align drug checking with an Indigenous worldview – partly because there is limited knowledge through which to build from, and because harm reduction practices and ideologies are not always accepted within our Nations, communities, families, and hearts. As First Nations, Inuit, and Metis in this country, both historical and ongoing colonially rooted violence and harm makes many feel that drugs and alcohol are at the root of our ill health and wellness as a people, and that there is only one way to heal, which often includes walking the *Red Road* in abstinence and recovery. There is frequently a systematic exclusion of Indigenous Peoples who use illicit substances from our ceremonies and cultural spaces, citing pre-colonial traditional values as reasons (Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019). However, it is important that we truly consider the roots of these beliefs, as they disregard our own relations from the spaces they need to access for wellness and healing. The legacy of genocidal and coercive policies imposed by the colonial state, such as those around prohibition of alcohol and ancestral spiritual/cultural practices within the amended 1884 Indian Act, have deeply influenced the ways we treat each other and ourselves. The very spirit of these policies was (and continues to be) rooted within colonial arrogances which viewed Indigenous Peoples as inferior, unruly and in need of civilizing, 'helping', and ultimately controlling –paternalistic discourses that persist within not only health-based programming and research today, but also within some of our own communities (Lavalley, 2025; Wilt, 2020). For example, while by-laws around 'dry' reserves were initially thought of as a way for Indigenous leaders to take back control within their own communities, it has ultimately reinforced the idea that Indigenous Peoples are unable to control their own (w)holistic selves – replicating what the colonial government and Indian Agents did to us through prohibitional laws that stole our lands and diminished our individual and collective agency.

As peoples who value relational accountability, we must be careful not to reproduce these ideologies onto our own peoples, for we are not only hurting each other, but also ourselves as sovereign Nations. Colonial ideologies have impacted us all, and many of us have their messages deeply engrained within our hearts, minds, and spirits. Yet, I believe that further research linking Indigenous harm reduction to drug checking, as led by our communities using our own methods, has the power to face these challenges with deep care, collaboration, and significance if wanted and needed. At its heart, Indigenous harm reduction is about love and care for each other, our selves, and the worlds in which we inhabit. It is decolonizing and anti-colonial, which critically deconstructs the colonial legacy of violence that continues to impact our lives, communities, and selves. It acknowledges and respects the harms that have been done to us and is about (re)connecting back to our culturally specific worldviews, wisdoms, stories, songs, dances, and ancestral powers.

As in the beginning of this writing, I must again state that I do not aim to necessarily change anyone's minds through these perspectives – I simply wish to offer a different and alternate world through which we can all live a good life and determine our own destinies. These are not easy conversations to hold, and although further research is needed to truly understand how drug checking may align with Indigenous harm reduction and specific cultural worldviews, we must continuously

walk with humility and transparency. In the end, each Nation and community must guide any infusion of drug checking with Indigenous approaches to harm reduction to limit the risk of this work being done in a way that does not concurrently respect how substance use is perceived and felt within them, while at the same time, enter these conversations with an open, honest, and respectful heart. In these important ways, giving back in drug checking means working to repair the hurts of colonialism, and to restore the compassion, empathy, and love of our communities, which will ultimately be distinct between Nations, communities, organizations, and individuals. As a written offering, this body of work also respects and acknowledges that the wisdoms shared within it, though culturally, relationally, and personally rooted, is a living, breathing entity which can be used for further inquiry and shapeshifted into the distinct needs of Nations, communities, and organizations; not unlike wîhkaskwa, it is to be used for healing and wellness for all those who need it.

v. Systems Level Transformation

For drug checking to *give back* and achieve the possibilities for decolonial and Indigenous-centered approaches, a systems approach is needed to ensure all stakeholders and sectors work together in partnership to repair the multigenerational impacts of colonialism. Firstly, as Indigenous governments, health bodies, institutions, and organizations continue to hold discussions on the overdose issue, drug checking through a decolonial, Indigenous lens can be offered by building community roundtable discussions to engage in conversations on how to move forward with a (w)holistic approach to drug checking. Though First Nations, Inuit, and Metis communities are unique and require distinct responses, we must also come together as one to enact a coordinated response, and to let each other know the potential that drug checking holds for our people. Fundamentally, all partners willing to come to the table, both Indigenous and non-Indigenous, must be included in supporting this work should Nations, communities, and organizations desire it.

Furthermore, non-Indigenous governments and policy makers must commit to rectifying the fundamental health and social inequities that Indigenous Peoples continue to experience. Addressing these issues has most often fallen on the shoulders of those Indigenous service providers on the frontlines of the drug war, and this is beyond the point of being sustainable any longer. Such repair will require adequate, wrap-around funding and removal of barriers for Indigenous Nations, communities, and service providers to lead, design, coordinate, and implement Indigenous specific drug checking programs should they desire them and feel they would be useful. Genuine support must be given to Indigenous communities by non-Indigenous institutions and organizations through collaborative partnerships, shared resources, capacity bridging, and avenues for (w)holistic wellness. This is particularly needed considering the widespread capacity resource challenges within our communities, including lack of time, space, energy, funding and sufficient wages, and trauma responses from colonial violence and frontline work. On a larger scale, this support must also include meaningful acts of reparations, such as providing rightful land, spaces, and resources back to Indigenous Nations, communities, and service providers.

Indigenous harm reduction is more than just providing practical methods for reducing harms associated with substance use; importantly, it also includes taking a (w)holistic, multi-sectoral approach that intersects to nurture individuals within

the context of their Nations, communities, and families (Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019). These multi-system approaches and large-scale partnerships must work to address structural and systemic barriers to wellness, such as adequate funding and housing. It is vital to emphasize to all involved in this work that drug checking cannot happen in isolation or within a silo; rather, it must be (w)holistic and exist alongside cultural and traditional wellness supports, just as any other harm reduction practice cannot be truly Indigenized or decolonized if used alone. Drug checking within Indigenous spaces cannot simply just include Indigenous workers but must also offer a range of culturally specific and safe supports to meet the (w)holistic needs of those accessing its services. Critically, a significant shift in current drug policies which focus on criminalization, domination, and oppression is also required to ensure the wellbeing and wholeness of those who use illicit substances. Furthermore, non-Indigenous governmental bodies must make a commitment to learn from, and respect the guidance of, Indigenous Peoples who have been engaging in reducing the harms of colonialism since contact (Canadian Aboriginal AIDS Network & Interagency Coalition on AIDS and Development, 2019).

5. Towards an Indigenous Service Model for Drug Checking: Translating this Allegory into Indigenous & Decolonized Drug Checking Principles

As we put all these considerations together – flowing from a (w)holistic, critical, and decolonial perspective, combined with the nêhiyaw knowledge, teachings, and worldview of the process which goes into gathering and braiding wîhkaskwa, we can translate these considerations into possible principles for Indigenous centered and decolonized drug checking:

The 1st principle is that drug checking should be healing. It must heal all those involved – both service users and providers – through actions like critical self reflection, reconnection to our selves and to each other, and decolonization of the harms brought on by colonial violence. It must also support us in looking after ourselves and must validate our experiences and wisdoms on how to be well and live a good life.

2nd – Drug checking should reflect the natural laws and teachings of the lands in which it is being conducted on and should honour local protocols. It is vital to recognize that the wisdom illuminated through drug checking belongs to the lands and peoples involved.

3rd – Drug checking should be practiced in ways which recognize the ceremonial and spiritual nature of this work. We must recognize the spirit and wisdom embedded within everything we do, including the knowledge within those who use substances, the technologies we use to do drug checking, and within the substances themselves.

4th – Drug checking should be a relational, respectful, and reciprocal process, recognizing that everything is (inter)related and (inter)dependent, and that we are all relationally accountable to each other and the cosmos around us.

And, 5th – Drug checking should center strength, resilience, and decolonization, and it must help and support and honour our unique resilience and resistance practices against colonial violence and the war on drugs. When enacted in a way that infuses our distinct cultural teachings, then we are actively working towards a decolonial future.



Sweetgrass braids (wîhkaskwa).

6. Conclusion

As I look back on my experiences within drug checking, which have not always been easy, I realize how much this journey has impacted my knowing as a nêhiyaw harm reduction service provider and community member. In many ways, my unease and lack of knowledge with drug checking processes in the beginning better helped me to vision for its future possibilities, as I was not committed to many preconceived notions of what it should be like. Inhabiting this location has allowed me to (re)conceptualize drug checking through learning about and practicing it for the first time, which is possibly a very similar position to those reading this paper. This process of theorizing and practicing drug checking has been deeply and (w)holistically personal, and although it has at times brought up uncomfortable feelings and thoughts, there is also great strength in illuminating the multiple vantage points of knowledge within our communities, including my own. Fundamentally, to meaningfully and ethically consider drug checking as a harm reduction tool within our Nations, communities, and organizations, I believe this is a process which we all must go through.



Another plant medicine (paskwâwîhkaskwa - Sage) that has been utilized throughout this journey.

Through using a cultural framework to (re)conceptualize and discuss possible decolonial and Indigenous centered approaches to drug checking, combined with existing literature on Indigenous harm reduction and my own witnessed, experiential, and embodied reflections, it is clear to me that drug checking processes, methods, and knowledge systems do not have to follow only the standard scientific and Eurocentric models existent within dominant programs; rather, drug checking has the potential to practice in alignment with each of our own distinct cultural and ancestral worldviews, should we desire it. Importantly, (re)conceptualizing drug checking, (and harm reduction broadly) through these lenses positions them as acts of resistance and resilience against the oppressive colonial forces impacting our lives and worlds. Indigenous Peoples have practiced reducing harm since time immemorial, and the knowledge of how to do so in the present day has always been embedded within our cultural languages, traditions, ceremonies, songs, dances, lands, and ancestral wisdoms.

Exploring Indigenous approaches to drug checking requires that we ultimately look through a decolonial worldview of its practices, which means coming back to

the cultural practices and frameworks which have kept us well for millennia. As I have done through the (w)holistic process of gathering and braiding wîhkaskwa, drug checking requires that we personally and relationally prepare to engage with it, that we consider the ethical and culturally specific protocols we are taught to honour, that we determine the best practices for gathering knowledge illuminated, that we reflect on how we make meaning of its wisdom, and lastly, that we share these gifts with others. In essence, our ways inform us that we must look to how our personal, relational, spiritual and natural worlds can be honoured within the scientific positions and processes of drug checking, and that we make meaning of the unique relationships we hold with the wisdoms embedded within its methods and technologies.

Taking a decolonial approach to drug checking and harm reduction also means that we actively reject the harmful ideologies of the settler colonial project, even if those beliefs are deeply embedded within us. Though this does not mean devaluing our sacred protocols, the values of genuine love, care, and relational accountability we intrinsically hold to one another, including to all of creation, shows us that other ways and worlds are possible. How we do this will change within the unique contexts and spaces we inhabit, and it will unquestionably take continued work, led by Indigenous Peoples ourselves, to carefully reconcile our ways of being, knowing, and doing with contemporary, evidenced-based harm reduction practices like drug checking.

Though we often share different vantage points, one thing that is constant within our communities is the intergenerational strengths entwined within our cultural knowledge systems; ultimately, we recognize that anytime we engage in our ceremonies, listen to our languages and stories, dance to our traditional songs, and gather medicines out on the land, we resist colonial harms by (re)connecting with our selves, each other, and the cosmos in which we are all a part. Just like a braid of wîhkaskwa, we must always work in ways which honour our resiliencies, how we are collectively intertwined with each other and the world around us, and how this connection teaches us to be accountable to all we are in relation with. To me, this is the pathway for where drug checking needs to consider going as a harm reduction practice if it is to be truly transformative, lifegiving, and healing for our Nations, communities, and organizations everywhere.

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