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Representations of Indigenous Peoples and Use of Pain Medication in Canadian News Media

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Abstract
Using media coverage of the withdrawal of OxyContin in Canada in 2011 and 2012 as an example, this article describes a systematic analysis of how news media depict First Nations peoples in Canada. Stark differences can be seen in how First Nations and non-First Nations individuals and communities are represented. In First Nations communities, problematic substance use is discussed without considering the context of pain management, broad generalizations are made, and language of hopelessness and victimization is employed. An analysis of the differences in language, tone, sources of information, and what is left unsaid, makes visible the ways in which misinformation about First Nations peoples and communities is constructed and perpetuated in media discourses.

Keywords
First Nations peoples, media analysis, pain management, opiates, OxyContin, Canada

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In Canada, the complex history of colonialism, as well as current policies and practices, have resulted in profound social and economic disruptions within many Indigenous communities. The forms of social and structural inequities and structural violence that shape the experiences of many Indigenous peoples and communities are deeply embedded in history, historical and contemporary policies, and pervasive social practices.

The consequences of these structural influences are myriad. In 2014, the Report of the Special Rapporteur on the Rights of Indigenous Peoples found:

The well-being gap between Aboriginal and non-Aboriginal people in Canada has not narrowed over the last several years, treaty and Aboriginal claims remain persistently unresolved, Indigenous women and girls remain vulnerable to abuse, and overall there appear to be high levels of distrust among Indigenous peoples toward government at both the federal and provincial levels. (Anaya, 2014, p. 1)

Consequently, the health and well-being of Indigenous peoples continues to lag behind that of the overall Canadian population on virtually every measure.

Throughout the history of Canada, negative images and portrayals of Indigenous peoples have been used to justify and support the colonial project. Browne (2009) wrote, “as social tensions continue to rise in the competition for diminishing economic resources, misinformation about Aboriginal peoples is becoming even more visible” (p. 172). One of the means of propagating images of Indigenous peoples is through the media; as such, media items related to Indigenous peoples can provide an important starting point for analysis regarding the types of discourse that may be influencing the larger public in Canada and elsewhere.

In this article, our purpose is to consider the ways in which Canadian news media represent First Nations peoples and prescription drug use. This analysis was sparked by the media flurry in 2011 and 2012 about OxyContin use in First Nations communities in Canada. We employ critical discourse analysis to consider the ways in which First Nations individuals’ and communities’ experiences with opioid pain medication are represented in the media. We do this by examining the language used in

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1 Over 1.4 million (4.3%) of Canada’s overall population of approximately 32.9 million identify as Indigenous (Statistics Canada, 2013). We use the term Indigenous peoples to refer to those who identify as the original inhabitants of the land (United Nations, 2008), and within Canada, Indigenous peoples include First Nations, Métis, and Inuit peoples. In Canada, the term Aboriginal is also commonly used to refer to Indigenous peoples. The colonial term “Indian” also continues to be used in federal government policy documents (e.g., the Indian Act). Approximately 50% of Indigenous people are registered with the federal Department of Indigenous and Northern Affairs Canada (formerly Aboriginal Affairs and Northern Development Canada) and are therefore considered “Status” Indians (First Nations), 30% are Métis, 15% are non-Status First Nations, and 4% are Inuit. There are currently 617 First Nations “bands” or tribal groups in Canada representing over 50 cultural groups and living in about 1,000 communities and major cities.

2 OxyContin is an opioid (narcotic) pain medication used to treat moderate to severe pain.
news reports, looking for silences or gaps in information, and comparing reports on different population
groups, such as First Nations and non-First Nations peoples. For the purpose of this paper, we are
dichotomizing the articles into two broad groups: those that directly address First Nations peoples,
communities, leaders or issues, and those that reflect all other groups of people in Canada other than
First Nations peoples. Henceforth, the latter group will be referred to as “non-First Nations.” This
division is useful for the sake of comparison. Analyzing only articles related to First Nations peoples and
communities would be instructive, but comparing these articles to those that are focused on non-First
Nations peoples brings further differences in tone, language, and content to light and contributes to a
richer and more comprehensive analysis.

The entry points for our analysis are the reactions as documented in the Canadian news media in 2011
and 2012 to the withdrawal of coverage for OxyContin under public drug plans, and OxyContin’s
possible replacement with OxyNEO in Canada (as discussed below). We compare news articles and
broadcasts that focus on First Nations communities to those that address the general public (not
identified explicitly as First Nations). The content and messages of these news articles and broadcasts
are analyzed with a view to explicating the similarities and differences in the portrayal of both the
experiences of pain and the medications and treatments used for pain management for First Nations and
non-First Nations peoples.

**Literature Review**

**The Case of OxyContin**

In 2007, the Purdue Frederick Company Inc. (hereafter Purdue), manufacturer of the opioid pain relief
medication, OxyContin, pleaded guilty to charges of misbranding of OxyContin in the US state of
Virginia (Brownlee & Coy, 2007; Canadian Medical Association Journal, 2012). Purdue had claimed
that due to its long-acting, slow-release properties, OxyContin was far less likely to create substance use
problems than other opioid pain medications. According to United States Attorney John L. Brownlee,
however, “OxyContin was being widely abused and causing harm to [American] citizens” (Brownlee &
Coy, 2007, p. 1). Purdue was required to pay over $600 million US in compensation (Brownlee & Coy,
2007). Class action lawsuits have also been launched in recent years in Canada based on the same

In March 2012, in Canada, Purdue replaced OxyContin with a new medication called OxyNEO, which
contained the same formulation but was altered to be tamper-proof by making it more difficult to crush,
snort, or inject (Canadian Medical Association Journal, 2012). OxyNEO replaced OxyContin in
Canada, but most provinces decided against funding OxyNEO so it is not currently available except
under private health insurance plans or out-of-pocket payment. In response to the withdrawal of
OxyContin, the media reported stories from doctors and community leaders, including the leaders of
the Nishnawbe Aski Nation (NAN) in Ontario, who spoke out about problematic use of OxyContin in
their communities, highlighting concerns that abruptly discontinuing OxyContin would result in large
numbers of people experiencing devastating withdrawal symptoms (Canadian Broadcasting
Corporation [CBC], February 17, 2012a). The NAN is an organization representing 49 First Nations
communities in northern Ontario, covering about two-thirds of the land mass of the province
(Nishnawbe Aski Nation, 2014). Media stories quoted NAN leaders stating they had not been given
enough notice that OxyContin was going to be discontinued, stressing that there were not enough substance use treatment facilities available in NAN communities to help such potentially high numbers of people to manage the symptoms of withdrawal (CBC, February 27, 2012a, 2012b). The story of OxyContin as portrayed in the news media provides an important window into the ways in which issues and perspectives related to First Nations and substance use are reflected in media discourses.

**Media Effects**

Theory on media effects has moved beyond making simple associations between exposure and influence to take into account active participation of the audience in shaping the meaning of messages received in the news and other media, as well as the social, institutional, and political contexts in which information is received (Neuman & Guggenheim, 2011). Still, controlled experiments in laboratory settings as well as analyses of surveys, interviews, and news media content have shown that exposure to the types of information conveyed in news reporting can have a significant effect on the importance that the public places on certain issues (Iyengar, Peters, & Kinder, 1982; McCombs & Shaw, 1972; Neuman & Guggenheim, 2011). As Iyengar and colleagues (1982) put it, “media provide compelling descriptions of a public world that people cannot directly experience;” therefore, “by ignoring some problems and attending to others, television news programs profoundly affect which problems viewers take seriously” (p. 855). Results from studies of media effects have varied; however, research has continually demonstrated that mass media, and in particular news media, play an important role in shaping public perceptions (Iyengar et al., 1982; Neuman & Guggenheim, 2011).

**Terminology**

In conducting the search of media items for this study, it was necessary to use the term “addiction” in searching news articles because using terms such as “substance use” or “substance use problem” yielded far fewer results. “Addiction” is a popularly used term, and one which generally carries negative connotations (National Opioid Use Guideline Group, 2010; Varcoe, Browne, & Michaelson, 2014). Recognizing the frequent misuse of the term “addiction,” the American Psychiatric Association (APA) makes a clear distinction between dependence and addiction, noting that “most people link dependence with ‘addiction’ when in fact dependence can be a normal body response to a substance” (American Psychiatric Association, 2013, p. 1). Distinctions between these terms are not merely semantic. As O’Brien (2010) argued:

> The major reason given for the under-treatment of pain with opioids has been the fear that the physician will create an addiction when, in reality, addiction in the course of pain treatment is relatively uncommon. Thus patients have been made to suffer by receiving inadequate pain medication doses when there is evidence of tolerance or withdrawal symptoms. (p. 867)

The need for clarity related to these terms—which are often used in diagnoses—has underpinned the APA’s revisions in the most recent edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-V). In the DSM-V, only one condition is categorized as an addiction: “gambling disorder” is the sole entry under the category of “behavioral addictions” (American Psychiatric Association, 2013). Further, the DSM-V revised the diagnostic categories “substance abuse” and “substance dependence” from the previous version of the DSM (DSM-IV), combining the previous diagnoses under the heading “substance use disorder” and placing people on a continuum from mild to severe depending on their
experiences of symptoms (American Psychiatric Association, 2013). In this article, we use the terms “substance use” or “problematic substance use;” however, the continued use of the term “addiction” in the media items analyzed here signals a perpetuation of the stigma associated with the term as well as a failure to convey an understanding of the distinction between addiction and dependence.

**Methods**

**Media Items Included in the Present Study**

This analysis included news articles and radio broadcasts, accessible online, published in English within a 13-month period between July 1, 2011 and July 31, 2012. This time frame was chosen to include most coverage of the recall of OxyContin in March 2012, up to the time initial analysis was conducted (in August, 2012). This was considered sufficient to gather the majority of news reports relating to this event, and also to provide enough results for a comprehensive analysis of how the relationship between First Nations and pain medication is portrayed in the news media. Because of the recent recall of OxyContin in Canada, we focused the analysis on media coverage within Canada. In order to get an overview of Canadian coverage, we focused on news sources that were national in scope. Three major national Canadian news sources were chosen: the Globe and Mail, the Canadian Broadcasting Corporation (CBC), and the National Post.

The Globe and Mail website and the CBC website both permit archival searching of news reports and broadcasts, but the National Post website does not; therefore, National Post media items were accessed via the online database ProQuest. Media items from the other two sources were retrieved from their respective websites through a series of searches. Media items that did not engage specifically with First Nations communities, but addressed issues related to the problematic use and/or the discontinuation of OxyContin, were included in the analysis as points of comparison.

Several searches, combining different search terms (First Nations, Native, Indigenous, Aboriginal, pain medication, pain management, chronic pain, prescription medication, addiction, opiate, and/or OxyContin), of each website or database were performed and all results that fell within the chosen date range were collected. Each result was then read or listened to, to determine relevance. Systematic keyword searches for news articles and broadcasts relevant to this study produced no media reports focused specifically on Inuit or Métis peoples. This is the reason for the focus on First Nations peoples in the present article, and also points to a significant gap in the information produced in Canadian media.

From the Globe and Mail, 148 media items were found in the initial search. Of these, there were four First Nations-related media items; 12 media items not specific to First Nations communities were retained. From the CBC, there were initially 38 media items; of these, 14 were First Nations-related media items, and 15 non-First Nations-related media items were retained. From the National Post the searches returned 31 media items, with only one explicitly related to First Nations and four non-First Nations-related media items that were retained. In total, 50 media items were retained for analysis; 19 related to First Nations communities and 31 related to non-First Nations populations.
The search strategy uncovered articles which generally fell into one of four main categories:

a. The kidnapping and murder of 8-year-old Woodstock, Ontario resident Victoria Stafford, with a focus on the use of OxyContin by both her murderer and her family;\(^3\)

b. An increase in problematic prescription drug use in the National Hockey League (NHL);\(^4\)

c. The inquiry into the role of police in the investigation of convicted serial killer Robert Pickton;\(^5\) and

d. The replacement in March 2012 of OxyContin with a new formulation called OxyNEO.

All retained articles (\(n = 50\)) fell into this last category. These articles had to do with the replacement in Canada of OxyContin with OxyNEO in March of 2012, and the problems that surfaced with problematic use of OxyContin prior to its being replaced. Table 1 presents a summary of the search results (see Appendix A for table listing articles retained).

All 19 articles focused on First Nations communities were included in the analysis. As mentioned above, articles related to opioid pain medication and substance use, but not specifically related to First Nations communities, were included for the sake of comparison. In total, 31 of these articles were retained. These articles were particularly instructive in illustrating the differences between the type of language that is used when portraying First Nations peoples and the general public, who, as implicated in the news articles, are assumed to be non-First Nations.

**Analysis of News Articles and Broadcasts**

Critical discourse analysis was the methodology used in analyzing the media items (see for example Fairclough, 1995; Gee, 1999). Critical discourse analysis “is concerned with ‘understanding the nature of power and dominance’ and how ‘discourse contributes to their production’” (Van Dijk cited in MacMillan, 2005, p. 4). That is, critical discourse analysis takes as its object not merely the text itself, but the ways in which a text reflects, reproduces, or challenges institutions and ideologies of power.

In order to achieve this type of analysis, it is important in critical discourse analysis to maintain focus on the text as a whole, rather than focusing on small segments of text, as in coding. As MacMillan points out, “critical linguistics and critical discourse analysis differ from traditional linguistics in that textual context is crucial—with the text ‘not the sentence (or the word, or the sound)’ important as ‘the basic unit’ of analysis (Kress cited in MacMillan, 2005, p. 5).

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\(^3\) Victoria Stafford, an eight-year-old European-Canadian girl, was kidnapped and murdered in 2009 in her hometown of Woodstock, Ontario. During the course of the trial it came to light that both her murderer and her family members struggled with problematic use of OxyContin.

\(^4\) Several articles described the heavy demands placed on NHL players in terms of teams’ training schedules and high amounts of travel time, and related these demands to a perceived rising trend in addiction to prescription medication among players.

\(^5\) Robert Pickton was convicted of the murder of six women in 2009; later an inquiry was conducted to scrutinize the role of the police in investigating the disappearances of these and other women.
## Table 1. Search Results from Selected Media Sources.

<table>
<thead>
<tr>
<th>Source</th>
<th>Number of initial search results</th>
<th>Number of retained results with First Nations focus</th>
<th>Number of retained results without First Nations focus</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Globe and Mail</td>
<td>148</td>
<td>4</td>
<td>12</td>
</tr>
<tr>
<td>The Canadian Broadcasting Corporation (CBC)</td>
<td>38</td>
<td>14</td>
<td>15</td>
</tr>
<tr>
<td>The National Post</td>
<td>31</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Total</td>
<td>217</td>
<td>19</td>
<td>31</td>
</tr>
</tbody>
</table>

Therefore, in order to analyze and compare media items related to First Nations versus non-First Nations, several criteria were used. The language of the media item, including its headline, was assessed. Critical assessment of the language was used to determine the media item’s orientation to the subject matter, including implicit assumptions and biases, as well as the media item’s intended audience, and the way it represented different individuals or groups. Sources of information used in writing the media items were evaluated, when available, and silences or gaps in information were identified. Table 2 offers a summary of these criteria and examples of how they were applied.

### Results

Upon analysis, three major themes were apparent in the news articles and media broadcasts. These themes were:

a. A lack of analysis regarding experiences of pain and pain management in relation to First Nations individuals or communities;

b. A tendency to generalize First Nations individuals as representative of entire communities or populations; and

c. A discourse of victimhood and hopelessness, especially striking in media items related to First Nations communities.
Table 2. Criteria for Comparison of Media Items.

<table>
<thead>
<tr>
<th>Criterion</th>
<th>Method of analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Language</td>
<td>What underlying assumptions are revealed in the choice of language?</td>
</tr>
<tr>
<td></td>
<td>Who is the intended audience?</td>
</tr>
<tr>
<td></td>
<td>How are the subjects of the media item portrayed or represented?</td>
</tr>
<tr>
<td>Source of information</td>
<td>What types of sources are referred to?</td>
</tr>
<tr>
<td></td>
<td>Why might these sources have been chosen?</td>
</tr>
<tr>
<td></td>
<td>How credible are the sources?</td>
</tr>
<tr>
<td>Silences</td>
<td>What is the media item not saying?</td>
</tr>
<tr>
<td></td>
<td>Does the media item present multiple viewpoints on a story?</td>
</tr>
</tbody>
</table>

The first theme had to do with the lack of analysis regarding experiences of pain and pain management in relation to First Nations individuals or communities. Media items that pertained directly to First Nations peoples focused almost exclusively on First Nations peoples’ experiences of problematic use of prescription opioids; in general, there was a lack of attention given to individuals’ pain experiences as underlying the need for prescription medication. The second theme refers to the way in which media items representing First Nations individuals tended to make claims that generalized broadly to the whole community, in contrast with non-First Nations media items, which focused on individual people regardless of their community context. This generalization tended to construct First Nations individuals as somehow representing the collective behaviours of an entire community, whereas such generalized representations were not applied to analyses of substance use among people living in non-First Nations contexts. The third theme addressed the discourse of victimhood and hopelessness, which was especially striking in media items which discussed substance use problems in First Nations communities. First Nations communities and individuals tended to be portrayed as caught in a vicious cycle of substance use problems with no way out.

Opiates and the Management of Pain

The news articles and broadcasts analyzed in this article emphasized problems with opioid use in First Nations communities, rather than the use of opioids such as OxyContin for the treatment of pain. Research shows that self-reported chronic pain levels among First Nations populations are high and, in many cases, there is not always a clear organic cause to the pain (Browne, Varcoe & Fridkin, 2011; Reading, 2009; Wallace et al., 2015). The scientific literature acknowledges that chronic pain is closely tied to issues of trauma, including historical trauma and other psychosocial issues. However, chronic pain is typically quite poorly managed because the only real “tools” available in Canada are opiates. However, rather than examining the use of opioids for pain management for First Nations peoples, the
media items analyzed here emphasize problematic opioid use. The following is an example of how the use of OxyContin in a First Nations community tended to be portrayed:

Prescription drugs are so pervasive in Cat Lake First Nation, even an 11-year-old interviewed by CBC News casually referred to them as “Oxys.” “I see people doing drugs, needles and Oxys, any time of day,” the youngster said. “They usually do it at their house. I think it’s weird, kind of.” Cat Lake Deputy Chief Dora Leadbeater said it’s been painful to see her community slide into the grip of addiction. (CBC, April 16, 2012, paras. 6-8)

The use of testimonials from a child and a community leader gives this news report a particular air of authenticity. It is difficult to refute the words of a child who seems in need of protection from what he or she witnesses every day, or those of a community leader who one presumes to be an expert on her own community. However, these types of testimonial can be interpreted as the whole truth, preventing those who might be interested in such problems from looking for more in-depth, contextual information or other data that might demonstrate the extent of the problem, or from investigating the ways in which wider social issues might be contributing to these types of community-wide difficulties.

Also, using terminology such as “slid[ing] into the grip of addiction” gives readers the impression of an inevitable progression towards substance use problems that the community, including its leader, feels helpless to prevent. It focuses attention on the substances themselves rather than on broader societal conditions influencing problematic substance use or notions of addiction, including social, economic, and historical factors rooted in colonialism and problems stemming from colonialism. The inevitability of such statements perpetuates mistaken messages about First Nations communities being inherently susceptible to problematic substance use, rather than appealing to wider social and historical contexts shaping these issues, or calling for actions to ameliorate such problems.

Of all the media items analyzed that addressed the use of opioid pain medication with respect to First Nations populations, only one (Paperny, March 5, 2012) actually addressed the issue of pain. All other media items (n = 18) portrayed the use of opioid pain medication among First Nations peoples as a substance use problem, rather than as a way of managing chronic pain. Claims about opioid use and misuse as abstracted from the prevalence of chronic pain are particularly problematic in the case of population groups, such as Indigenous peoples, because of the high rates of chronic pain from various forms of injuries, trauma, and interpersonal and structural violence rooted in many peoples’ ongoing experience of colonialism (Barkwell, 2005; Elliott, Johnson, Elliott, & Day, 1999; Green et al., 2003; Haskell & Randall, 2009; Jimenez, Garroutte, Kundu, Morales, & Buchwald, 2011). The silence regarding experiences of pain is especially troubling when contrasted with media items relating to non-First Nations populations, which focused more often on the use of opioids for pain management than on substance use problems (Picard, March 5, 2012; the National Post, November 14, 2011; Weeks, February 26, 2012). As an example of coverage focusing on non-First Nations populations, in an article titled “Chronic Pain Patients Collateral Damage of Drug-Abuse Policy,” Picard (March 5, 2012) wrote:

An estimated six million to seven million Canadians suffer from serious chronic pain. In the past decade, they have been treated increasingly with opioids, OxyContin in particular . . . [When OxyContin is delisted] patients will be switched to other drugs, like Dilaudid, which are just as addictive and far more powerful. These “conversions” are difficult for physicians and patients
alike; the Ontario Pharmacists’ Association has warned its members that “unintentional dose escalation” is a serious concern. For many patients, the risk of overdose is very real—and one death has already been linked to conversion. (paras. 16, 19)

In the articles analysed in this study, First Nations populations are rarely portrayed as patients with legitimate needs for treatment of chronic pain.

There was one counterexample in these results; that is, an article about a First Nations individual that focused on the use of opioids for the treatment of chronic pain rather than as a source of substance use problems. As referred to above, Paperny (March 5, 2012), in an article titled, “Fatal Overdose Sparks Warning About Switch from OxyContin,” described the accidental overdose of a man whose “doctor switched him to a different opioid, and he died of an apparent overdose shortly thereafter” (para. 4). This article expressed concern over the need to manage chronic pain in a similar way to the article described above (Picard, March 5, 2012). However, the only way in which the man was identified as First Nations (or Inuit) is through reference to his coverage through the Non-Insured Health Benefits plan administered by the First Nations and Inuit Health Branch of Health Canada (Paperny, March 5, 2012). His identity as a First Nations or Indigenous person was not highlighted in the same manner as in articles discussing problematic substance use (see for example CBC, July 4, 2012; Globe and Mail, April 16, 2012a, 2012b; Porter, April 17, 2012). All of this can be seen as reinforcing mistaken assumptions about First Nations peoples’ propensity toward problematic substance use without addressing the root causes of First Nations individuals’ pain and its impact on communities.

**From the Individual to the Collective**

The above analysis points to a second important theme, which is the ways in which media contribute to representations of a collective identity for First Nations peoples. First Nations peoples, as individuals, were most often portrayed in the media items analyzed here as not only part of a larger group, but as representative of that group. For example, in a radio program focusing on problematic use of OxyContin in Aboriginal communities in Northern Ontario, the introduction read as follows:

Doctors and nurses in some northern Ontario communities say they know there’s trouble when they hear a newborn’s cry . . . Frightened, unhealthy babies are just one symptom. To pay for the drugs, crime is on the rise. Grocery stores seem strangely well stocked—because so many people are using their money to buy pills instead of food. Other research estimates as many as 75-percent of adults in the community of Fort Hope use OxyContin, including young mothers and pregnant women. Doris Slipperjack is a twenty-two year old Aboriginal mother of three. She's in treatment for her OxyContin addiction. She joined us from Fort Hope, in northern Ontario. (Tremonti, January 6, 2012, paras. 1-3, 4)

Through the order in which information was presented in this introduction, from the general (Northern Ontario communities) to the more specific (the community of Fort Hope), to the particular (one young woman), Doris Slipperjack appeared to represent not only all of the “young mothers and pregnant women” in her community, but she was also positioned as someone who can bring insight into the situation in all communities through her own experiences. This had the effect of erasing differences between individuals and nations, as well as perpetuating a colonial imagination that sees First Nations as one group instead of many. Placing an individual with substance use problems in a position to represent
all First Nations individuals in Northern Ontario also risks perpetuating a view of First Nations communities as “damaged,” disordered, or particularly susceptible to problematic substance use (O’Neil, Reading, & Leader, 1998; Salmon, 2011; Tuck, 2009).

Further, in the language of the media items analyzed for this study, substance use problems in First Nations communities were often referred to as a “crisis” or an “epidemic,” suggesting that the problems were widespread throughout the entire community (see for example CBC, February 17, 2012a; Porter, April 17, 2012). Media items frequently extended the problem of widespread substance use from one First Nations community to First Nations communities and populations in general. As an example, the Globe and Mail (April 16, 2012a) published, “governments and local health authorities are slowly gearing up to deal with the runaway addiction that has slammed communities across the country, but especially First Nations” (para. 4). A radio broadcast on problems with OxyContin use noted that “addiction is an especially acute problem in First Nation communities” (CBC, February 27, 2012b, para. 3), in spite of the fact that only a handful of small communities in northern Ontario were actually named in the broadcast.

This same extension—of one small group to represent a larger collective—was evident in the representation of small towns and rural or remote areas, including in media items focused on non-First Nations communities (e.g., CBC, March 16, 2012; Moore, October 7, 2011). As one article, titled “Annapolis Valley’s Drug Crisis Snapshot of National Problem,” put it:

National statistics on opioid abuse are still scant, but the problem has become all too apparent in the Annapolis Valley, an agricultural belt northwest of Halifax with a population of 85,000. Officials suspect as many as 14 deaths last year were related to prescription-drug abuse—five times the toll in 2009—but the number has yet to be verified because the provincial medical examiner has not been able to sift through all the cases. (Moore, October 7, 2011, para. 6)

The author of this article asserted that an “all too apparent” problem existed in the rural areas of the Annapolis Valley, based on numbers which were unconfirmed—and then, as seen in the article’s headline, extended the problem to Canada as a whole, despite “scant” statistics.

In contrast, media items focused on non-First Nations peoples, especially in urban areas, portrayed problematic substance use as a difficulty particular to individuals who were in some way different or unusual. These media items either included individual interviews with (non-First Nations) people who successfully overcame substance use problems, portraying these individual stories as exceptional, or cast substance use as a problem of criminals. For example, one CBC News report began by stating that “Oxycontin is no longer manufactured in Canada as of today, replaced by a new formulation called OxyNeo, but some police forces across Ontario are concerned about an increase in pharmacy robberies” (CBC, March 1, 2012c, para.1; see also Blackwell, January 23, 2012; Moore, October 7, 2011). Problematic use of OxyContin was associated with people committing crimes; that is, people who were outside of a presumed “norm” and did not represent a community or racialized group as a whole. Non-First Nations peoples who struggle with substance use problems were portrayed as individuals who not only did not represent a larger racial group, but were specifically excluded from it. Their identity as cultural or racialized individuals was not associated with their problems with substance use, whereas for
First Nations individuals experiencing substance use problems, their First Nations identity was portrayed as central.

The ways in which First Nations individuals were portrayed as representing all First Nations peoples is problematic in several ways. First of all, it involves a simplification. No one person can embody the qualities of an entire cultural or racialized group, and when such an embodiment is implied in a news article or radio broadcast, the audience can be led to make mistaken assumptions about other First Nations peoples based on a representation of one person. More importantly, such portrayals of an individual representing the collective tended to focus on individuals who possessed characteristics that fit with already existing stereotypes of who a First Nations person is or what a First Nations person does (Salmon, 2011); in this case, the ways in which individuals with substance use problems were portrayed can reinforce myths that associate First Nations peoples in general with problematic substance use. In the media items analyzed for this study, the portrayal of First Nations as deviant contrasted with the ways in which non-First Nations individuals were portrayed as deviant: First Nations deviance was linked to broader communities, whereas non-First-Nations deviance was portrayed as exceptional, or at least not linked to the individual's cultural background or racialized identity.

Images of Victimization and Hopelessness

Our analysis identified a third theme reflecting the portrayal of people with problematic substance use as victims, and the situation of First Nations communities as hopeless. For example, media items often referred to the “desperation” of being “an addict” (CBC, February 17, 2012a, 2012b, 2012c; CBC, February 20, 2012). The use of these terms implied that people would stop at nothing to get the drugs to which they were supposedly addicted. The sense of desperation linked with addiction was heightened by a projection of the rising cost of such medications as OxyContin (due to a limited supply after its being withdrawn from the market in Canada), and detailed descriptions of the horrific effects of opiate withdrawal—described as “a miserable and prolonged illness” in one article (CBC, February 17, 2012a, para. 12).

One article described the situation of one community in which 80 percent of adults were estimated to be struggling with problematic use of OxyContin (CBC, April 16, 2012). This community ran its own treatment program for substance use problems, part of which “involves recovering addicts building their own shelter in the bush and hunting for their own food to rebuild self-sufficiency” (CBC, April 16, 2012, para. 23). However, representation of the program’s effectiveness was undermined by an interview with one resident who “turned to his traditional roots and went out hunting,” in an effort to fight his substance use problems, but who immediately “went back to the drug once he returned home” (CBC, April 16, 2012, paras. 16, 19). Including the story of someone who was unsuccessful in overcoming his substance use problems leads readers to form the impression that existing programs will ultimately be unsuccessful.

The sense of desperation related to substance use conveyed in these media items was often accompanied by statements eliciting hopelessness. OxyContin’s “extremely addictive properties” (CBC, March 8, 2012a, para. 5) were often cited as what led to substance use problems—addiction was portrayed as a property of the medication itself. Thus, substance use problems were portrayed as insurmountable as long as addictive medications, illicit or otherwise, remain available. Portraying substance use problems in...
this way ignores the effects of centuries of dislocation and repression through ongoing colonialism in First Nations communities in Canada, and instead conveys the message that First Nations individuals are at risk of falling victim to the drug itself. Implicit in the ways these media items framed the issues was that prohibition of specific medications would be the solution to problematic use of opiates in First Nations communities, rather than attention to other broader contextual and sociopolitical factors. This implied assumption ignores the possibility that, even in the absence of OxyContin, there would still be ways for people to obtain other types of medications or illicit drugs, which may be used as a way of coping with unmanaged pain. Portraying substance use problems as a characteristic of a given medication rather than contextualizing such problems as being influenced by broader social factors can lead to substance use problems seeming hopeless or inevitable.

Further, in many media items several issues remained unaddressed with reference to First Nations. For example, media items portraying non-First Nations populations often cited doctors’ lack of adequate education about opiate use as the cause of problematic substance use, as in Mills’ (March 12, 2012) description of an Ontario study:

> A standardized dose [of pain medication including opioids such as OxyContin] is often prescribed regardless of anticipated post-operative pain, the study says. Dr. Bell [the senior researcher in the study] said improved communication between the surgeon and primary care provider would help to assess anticipated pain level and duration, so that the right prescription is given. (para. 9; see also CBC, February 24, 2012)

This contextualizing information was not offered in media items that discuss opiate use among First Nations, specifically.

Media articles and broadcasts related to non-First Nations communities and individuals also present the hardships of problematic substance use alongside stories of success. For example, an article in the Globe and Mail about the death of CBC broadcaster Scott Oake’s son due to an accidental overdose of opioid medication concludes with the story of an Edmonton family:

> Laurie de Grace of Edmonton, shared her story of first becoming aware of her daughter’s addiction in Grade 9. Her daughter was diagnosed with a learning disability and suffered from attention deficit disorder. She did drugs, and her parents would often find empty bottles under her bed, Ms. de Grace said. Now, at the age of 23, her daughter has just completed her first year of sobriety. (Alphonso, May 1, 2012, paras. 9-10)

Rather than ending with a return to problematic substance use, which conveys the impression that it is a difficult if not impossible problem to overcome, this article highlights families who have gone through hardship but are seeing successes, leaving the reader with an overall feeling of hope.

**Discussion**

Based on previous research on the influence of discourses regarding Indigenous peoples on health and well-being, as well as the intensive media interest in the recall of OxyContin in Canada in 2012, the objective of this study was to analyze Canadian media reports portraying First Nations peoples and prescription opioid use between 2011 and 2012. Based on analysis of 50 media items from three major
Canadian news organizations, results highlighted significant areas of discrepancy between the ways in which First Nations and non-First Nations populations are represented in the media. In particular, when First Nations communities were the subject of a media item, there was a focus on problematic substance use, a tendency to generalize from one individual to entire populations, and a prominent discourse of victimhood and hopelessness.

Overall, we found that news reports reflected a broader tendency in the media to perpetuate images that, in turn, reinforce stereotypes that often lead to negative consequences for First Nations and other Indigenous peoples. Scholars have demonstrated that media representations of First Nations peoples in Canada tend to perpetuate colonial stereotypes and negative assumptions (Anderson & Robertson, 2011; Krebs, 2011; McKenzie, 2012; Stoneham, Goodman, & Daube, 2014), such as the portrayal of First Nations individuals as living in “sick, disorganized communities,” with high rates of dependence on (and a proclivity to misuse) substances such as alcohol, illicit and prescription drugs (O’Neil et al., 1998, p. 230). These stereotypes, in turn, contribute to the significant emphasis in the media and in academic literature on the role of problematic substance use in the lives of First Nations peoples. This emphasis can erroneously promote public perceptions that substance use problems are closely or necessarily associated with First Nations peoples or First Nations cultures, which in turn can negatively influence the quality of care provided in health care settings (see for example Browne, 2007; Browne & Varcoe, 2006; Browne, Smye, et al., 2011; Browne et al., 2012; Welch, 2014).

A Critical Examination of the Prevalence of Prescription Drug Use in First Nations Communities

According to the literature, there is a severe lack of empirical research on the prevalence of prescription drug use in First Nations communities in Canada (Dell et al., 2012). Studies that do exist show little difference between rates of substance use in First Nations and non-First Nations populations (Anderson & McEwan, 2000; MacMillan et al., 2008; Wardman & Khan, 2004). In some cases that have received a great deal of media attention, the rates of substance use in First Nations communities may have been overstated (Wale & Lavoie, 2015). For example, the October Report of the Auditor General of Canada in 1997 expressed concern that Health Canada was not tracking or managing prescriptions among First Nations individuals, and was not addressing problems of overprescription (Auditor General of Canada, 1997). This in turn sparked a storm of media reports decrying a system “rife with overprescription and “doctor-shopping” among pill addicts, which allow them to get drugs from a number of sources” (Alberts & Lowey, October 8, 1997, n.p.; see also Bueckert, October 7, 1997). In fact, the media’s reactions to the Auditor General’s 1997 report seem out of proportion to the actual figures for prescription drug misuse among First Nations claimants, which were relatively low (Wale & Lavoie, in press), perpetuating assumptions that link First Nations peoples and popularized notions of addiction. In the articles and broadcasts analyzed for this study, similar problematic assumptions can be found regarding substance use in First Nations communities in Canada, in spite of a lack of empirical evidence.

Limitations

The present study was subject to two main limitations. The review of the literature was completed by one researcher (the lead author) and therefore is influenced by the approaches used, and her knowledge
and assumptions. The use of online web search tools embedded in Canadian news organization websites may have missed some media items that were not kept in the online archive by these organizations themselves. Nonetheless, analysis of the available media items suggests a troubling tendency in the national media towards reinforcing stereotypes of First Nations peoples and problematic substance use.

**Implications and Conclusions**

The findings from this study reflect wider scholarship on the representation of Indigenous peoples in the media and popular discourse. Stark differences can be seen in the ways that First Nations and non-First Nations individuals and communities are represented in the media items reviewed for this article. In First Nations communities, problematic opioid substance use is discussed in the absence of a context of pain management; broad generalizations are made and individuals or specific communities are portrayed as representative of all First Nations in Canada; and language of hopelessness and victimization is employed, implying that substance use problems are prevalent and will remain the status quo in First Nations communities. In contrast, in media items focused on non-First Nations populations, discussion of high rates of substance use are considered in the context of peoples’ needs for pain management; individuals are generally not identified as members of a racialized or cultural group, and people with substance use problems are portrayed as individuals rather than as representative of a larger group; and stories of suffering due to substance use problems are countered with success stories of people who overcame these problems. Further, the lack of media items related to Métis peoples or Inuit points to an important gap in information regarding Indigenous peoples in Canada.

Differences in language, tone, sources of information, and what is said or left unsaid reveal that the media items analyzed portray many troubling assumptions about First Nations individuals and communities. These assumptions reflect wider social discourses in Canada that continue to construct Indigenous peoples in ways that perpetuate negative stereotypes. This analysis reveals that First Nations peoples and individuals are not represented on the same terms as other members of the general population, instead being assigned to racialized categories and assumed to have certain characteristics on the basis of such categories. Discourses in Canada that reflect colonialism, culturalism, and paternalism with regard to First Nations and other Indigenous peoples are perpetuated and aggravated, rather than addressed, by such discourses. These discourses can cause First Nations peoples to be treated differently than members of the general public, including in health care settings or in policy. This causes a range of problems, from feelings of discomfort and mistrust on the part of First Nations peoples accessing health care, especially for pain management, to health care actually being withheld from First Nations patients, which has profound negative health consequences (Browne, 2007; Browne, Smye, et al., 2011). Recognizing the root causes, both of such negative discourses in the media and of substance use problems that may exist in First Nations communities, as well as having an accurate estimation of the actual (rather than imagined) prevalence of substance use problems is imperative if these negative social discourses and negative health outcomes are to be prevented.
References


McKenzie, H. A. (2012). The different stories of Cree woman, Daleen Kay Bosse (Muskego), and Dakota-Sioux woman, Amber Tara-Lynn Redman: Understanding their disappearances and murders through media re-presentations and family members’ narratives (Unpublished master’s thesis). University of Regina, Regina.


http://dx.doi.org/10.5820/aian.1103.2004.43


## Appendix A

### Articles retained by criteria and source

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<th>Criteria for Inclusion</th>
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<th>Medium</th>
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<td>Monday, April 16, 2012</td>
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<td>Monday, April 16, 2012</td>
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<td>Anna Mehler Papereny, “Fatal overdose sparks warning about switch from OxyContin”</td>
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<td>Anna Mehler Papereny, “Treating the tiny victims of Canada’s fastest-growing addiction”</td>
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<td>The Canadian Broadcasting Corporation (CBC)</td>
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<td>Jody Porter, “First Nations seek healing by reconnecting to the land: Outdoor activities seen as key to ending addiction crisis”</td>
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<td>No author, “Doctor wants action on First Nation drug crisis: Some First Nations say 80 percent of their population is hooked on prescription painkillers”</td>
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<td>Prithi Yelaja, “OxyContin replacement may not solve abuse: Thousands of addicts face involuntary withdrawal”</td>
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<td>Tuesday, February 28, 2012</td>
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<td>Tom Blackwell, “Painkillers, pregnancy a tragic combination”</td>
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<td>Carys Mills, “Painkiller prescriptions after minor surgery puts patients at risk of addiction: Study”</td>
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<td>Friday, March 16, 2012</td>
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<td>Radio</td>
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