

One Resident, Thirty-Five Cameras: Sharing the Stories of Inuvik Youth

Ranita H. Manocha, BA^a

^aUBCMJ Staff Writer

Assumptions are a funny thing. In medical school, we learn to observe our patients carefully. We mentally note patients' clothing, gait, ethnicity, and affect, clues that may guide us toward a particular diagnosis. If we assume too much, however, not only might we travel down the wrong diagnostic path, but we also lose the opportunity to relate to a patient and truly understand his or her experience.

Dr. Janet Ip, a Vancouver-based family physician, is all too aware of assumptions. During her residency, Ip noticed that the media often portrayed Inuit youth as struggling with solvent abuse and suicide. Interested in adolescent health, Ip wondered whether these media portrayals were accurate.

In 2004 Ip travelled to Inuvik, Northwest Territories to complete a two-month rural family medicine elective. Located two degrees above the Arctic Circle, this town of 3,500 people is also known as the “Land of the Midnight Sun” because of its 24-hours of sunlight during the summer.¹ Along with her stethoscope, Ip packed 35 disposable cameras: Ip hoped to use a qualitative research technique known as photo novella to ascertain “what really mattered” to Inuvik youth. In photo novella, marginalized populations are asked to take photographs of “life as they see it,” explains Ip. She adds, “The community illustrates its concerns and is asked to provide relevant solutions” to its perceived problems.

Thus, Ip handed her cameras out to 35 Inuvik youth, 14 of whom agreed to be interviewed about their photographs. Several themes emerged from these encounters. Youth were concerned about the loss of their culture, the use of their land, the role of



mothers in their society, and the boredom that they witnessed in their community. Ip was most surprised, however, to discover that the youths' main health concerns paralleled those voiced by urban youth. Smoking, drug and alcohol abuse, and teenage pregnancy dominated the conversations. Youth linked these issues to isolation, depression, boredom, and poor parenting. They proposed bringing a shopping mall or movie theatre to their community and upgrading their skateboard park to address these concerns.²

No stranger to the arts—Ip had been an actress and a film writer, and as a medical student she had created a documentary about the challenges of rural medicine—Ip produced the film *We Don't Live in Igloos: Inuvik Youth Speak Out* to illustrate these youths' experiences.

To Ip, photography is not only a powerful way to engage a marginalized community, but it also gives healthcare practitioners the chance to truly understand their patients' perspectives, enhancing their ability to heal. Assumptions are important in medical practice. Yet Ip and these Inuvik youth demonstrate that so, too, is asking patients what they think, see, and experience. 



Left: Dr. Janet Ip, a family physician and filmmaker, conducted a photographic project with Inuvik youth in 2004. She created a documentary based on the youths' stories.

Right: One youth took this photograph, entitled, “Nothing to do.”

Correspondence

Ranita H. Manocha, rmanoch@interchange.ubc.ca