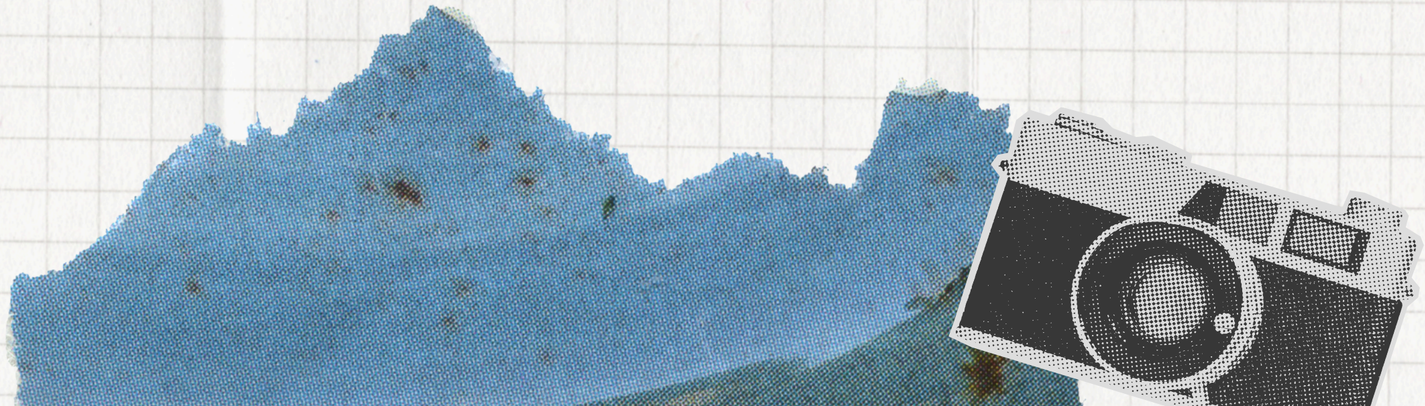
Voices from lived experiences

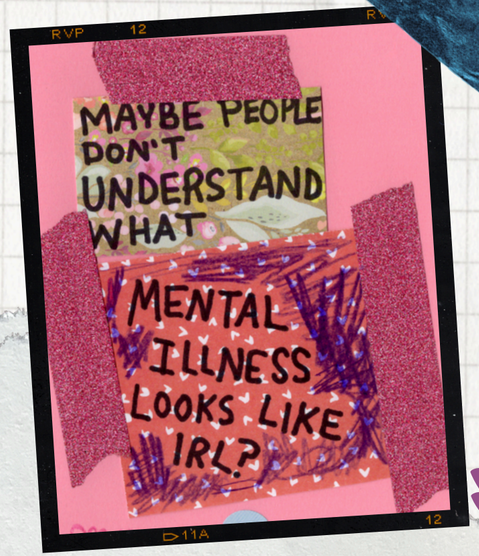
A Sensemaking Collection of Zines



MINDS
of London-Middlesex

introduction





This book is the result of a community sensemaking project on mental health and addictions in London, Ontario.

Community sensemaking is the process of turning individual stories, experiences, and creative expressions into shared understanding. The MINDS of London-Middlesex Social Innovation and Research Lab led this initiative in collaboration with community members, persons with lived and living experience, and cross-sectoral providers. Together, we worked to transform how we understand and respond to mental health and addictions in our region—through creativity, collaboration, and shared leadership.

Over the course of fourteen events, spanning from September 2023 to May 2024, more than 130 community members came together to share their stories through zine-making. In total, over 122 zines were created—small handmade booklets that gave participants a space to express their experiences with mental health, addictions, and the systems meant to support them.

Through art and conversation, common themes and insights began to emerge about the challenges our community is facing. This creative process opened the door for participants to share struggles and hopes that are often difficult to put into words.
Why does this matter? Because data is more than numbers. Behind every statistic are real people, with real lives, who carry knowledge that cannot always be captured in surveys or reports. Lived experience voices are essential because they reveal what is working, what is missing, and what needs to change. When people share their stories in their own words and through their own creativity, we gain a fuller and more honest picture of our community's needs.

This collection is both a reflection of the courage of those who participated and a call to action. The themes presented here highlight not only the gaps in our system but also the possibilities for creating care that is more compassionate, accessible, and effective. By combining research methods with lived experience and creativity, we are creating a new way forward—one where community voices are not just included, but truly centered.

Process

Each of the fourteen events in this project was designed to be welcoming, supportive, and accessible. Sessions were held at different times of day to make participation possible for more community members. We hosted the zine workshops all over the city — in coffee shops, art studios, and community spaces connected to local mental health organizations. Each session consisted of 3-4 hours of crafting, with a meal break halfway, and a one-hour sharing and discussion debrief. We provided meals, snacks, and drinks at every gathering, as well as bus tickets to reduce transportation barriers. All supplies were provided on-site, so participants didn't need to bring anything themselves, making the process as easy and accessible as possible.

To guide the zine-making and ensure that the knowledge shared could help shape system change, participants were invited to reflect on these three core questions. These prompts offered structure while still allowing space for individual creativity and expression.

HOW DO YOU FEEL ABOUT YOUR MENTAL HEALTH JOURNEY?

WHAT ARE THE BIGGEST MENTAL HEALTH ISSUES IN LONDON RIGHT NOW?

IF YOU HAD A MAGIC WAND, WHAT THREE THINGS WOULD YOU CHANGE?

Participants were also given an honorarium in recognition of their time, expertise, and contributions. At MINDS, we believe that the perspectives of people with lived experience (PWLE) are not just valuable—they are essential. Their voices carry knowledge that cannot be found in statistics alone, and it is only right that this expertise be respected and compensated.

By creating spaces that were both practical and caring, we aimed to reduce barriers, build trust, and ensure that everyone felt supported in sharing their stories and creativity.

the six themes

From over 122 zines and dozens of conversations, six interconnected themes emerged organically through the sensemaking process. These themes were identified through qualitative analysis of the zines and participant group debrief discussions, reflecting the collective experiences, systemic barriers, and hopes voiced by the community.

Together, they highlight the shared struggles and aspirations of people with lived and living experience of mental health and addictions in London—and reveal where our systems are falling short, and where change is most urgently needed.



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Homeless & Housing Instability

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Lack of Resources for Substance Use and Addictions

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Lack of Service Coordination & System Navigation

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Lack of Compassion & Humanity from Care Providers

01

Homeless & Housing Instability

Housing was the most urgent concern raised throughout this project. Participants and community members shared that without safe and affordable housing, it becomes nearly impossible to focus on mental health or recovery. One participant put it simply: “My biggest barrier to good mental health is the housing crisis.”

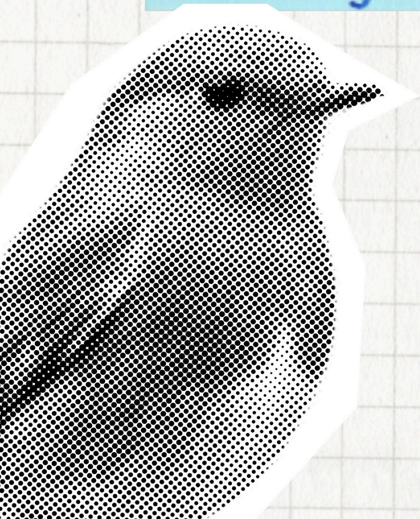
When people are unhoused or living in unstable conditions, their energy goes to survival—finding food, safety, and a place to sleep. This leaves little space to access or maintain care. Many expressed that a housing-first approach is essential: once someone is housed, other issues can begin to be addressed. As one person shared, “By being housed, you’ll be more stable mentally and it’s easier to access mental health services.”





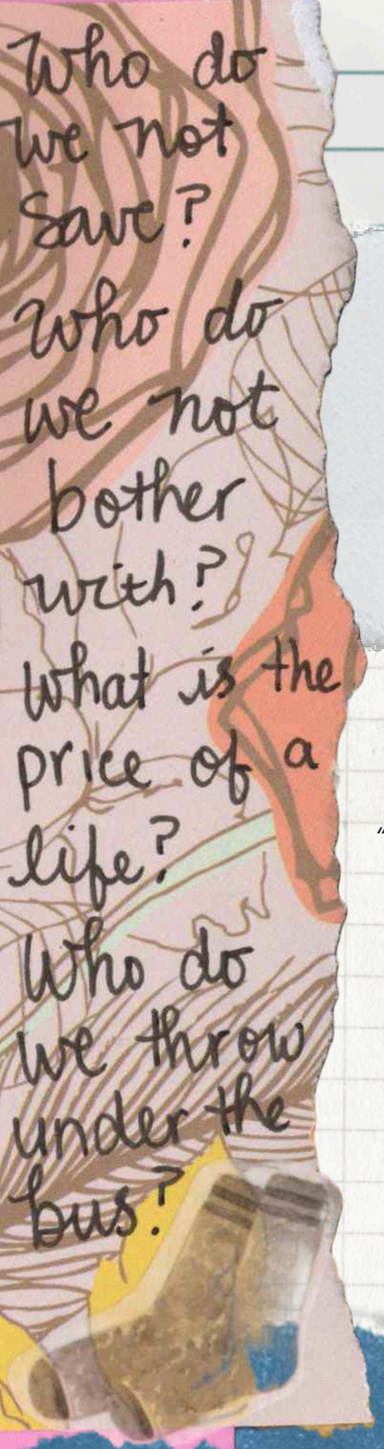
"It really comes down to like if you don't have your basic needs, you don't have anything. So how can people be mentally well?"
-Zine Participant





A TOTAL of 201 people experiencing homelessness have died since the start of 2020 — "It's devastating. These are people we know, that we've supported" - Scott Courtice Executive Director of London Intercommunity Health Centre.





02

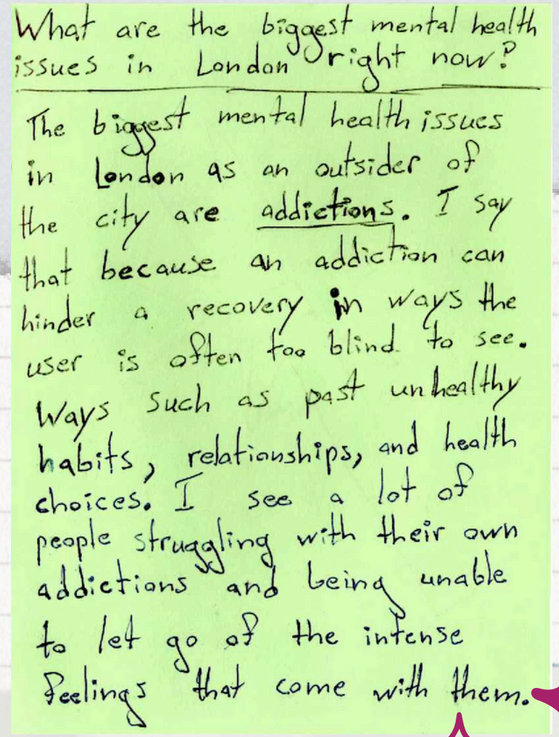
Lack of Resources for Substance Use and Addictions

Since the pandemic, many noted a rise in substance use among young people. Job loss, isolation, and stress have made things worse—yet care has not expanded to meet this need. Addiction services remain underfunded and often disconnected from broader mental health supports. Participants also spoke about the stigma surrounding substance use. Too often, people are reduced to their addiction instead of seen as whole human beings. This stigma can be deeply damaging.

One person described it with heartbreaking clarity:
"If I saw myself from the view of another person, I would hate her, pity her... I would step over her body as she sat slumped by the sidewalk and turn up my music so I could not hear her beg for help."

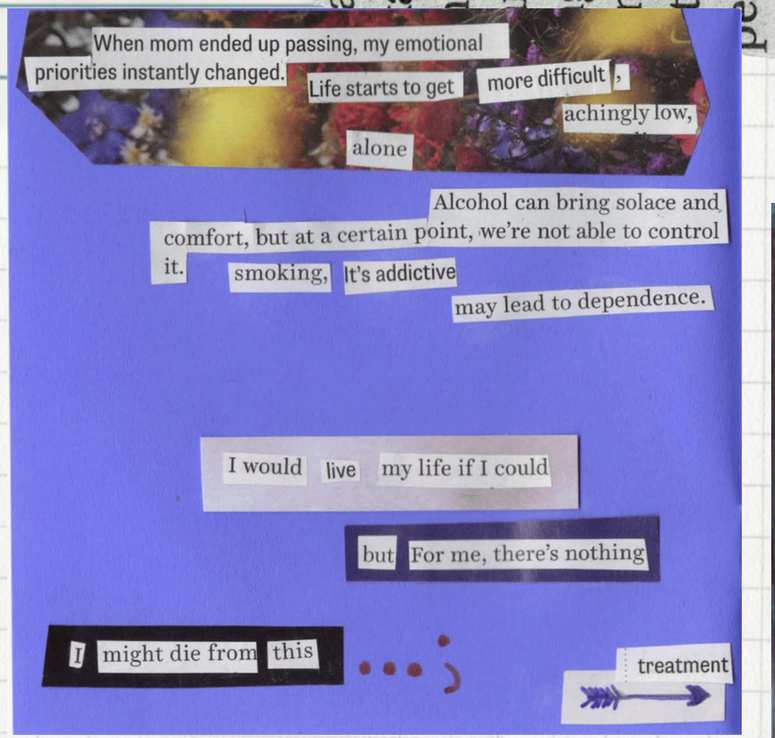
"I feel like drinking is around all the time, so quitting drinking was pretty difficult and I think a lot of people didn't care when I was showing signs of addiction and stuff like that, but a lot of people had something to say when I was stopping, so I thought that was interesting that it's more stigmatized to get help for that than it is to actually be addicted."
-Zine Participant

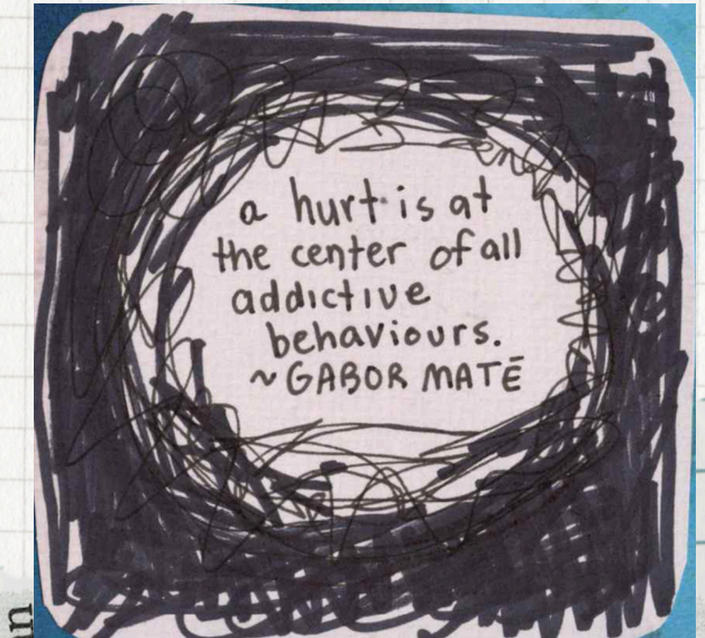
"Addicts are sick people needing to get well, not bad people needing to be good."
-Zine Participant

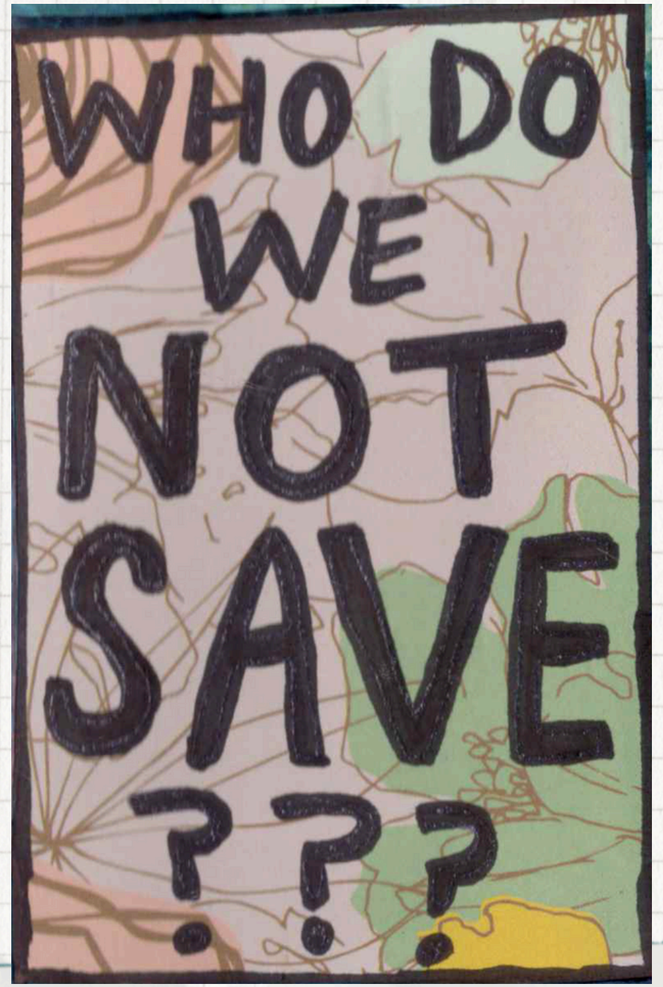

What are the biggest mental health issues in London right now?

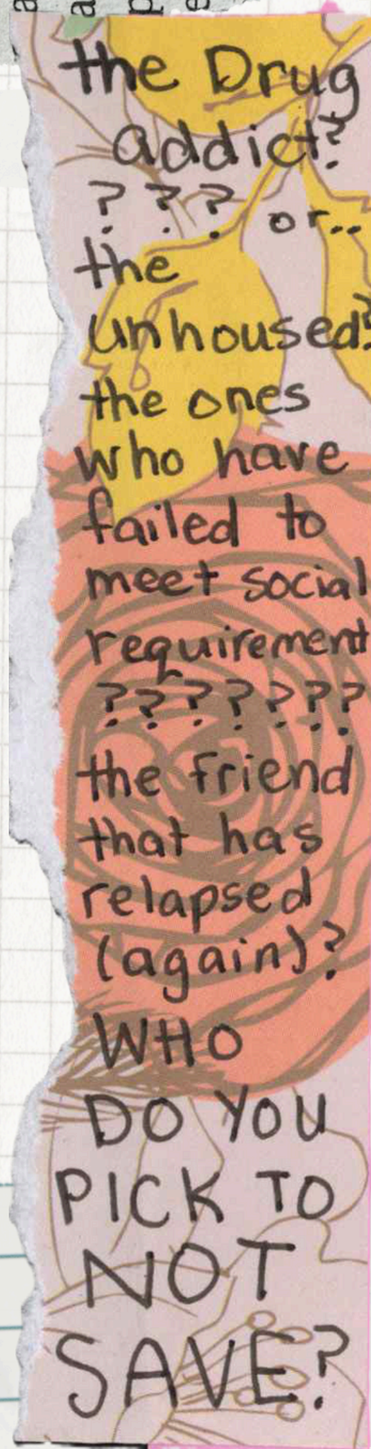
The biggest mental health issues in London as an outsider of the city are addictions. I say that because an addiction can hinder a recovery in ways the user is often too blind to see. Ways such as past unhealthy habits, relationships, and health choices. I see a lot of people struggling with their own addictions and being unable to let go of the intense feelings that come with them.


SELF MEDICATION
I don't want this anymore
I don't want to feel anymore
Let me fill the void
OH
Dissolve


When mom ended up passing, my emotional priorities instantly changed.
Life starts to get more difficult,
achingly low,
alone
Alcohol can bring solace and comfort, but at a certain point, we're not able to control it.
smoking, It's addictive
may lead to dependence.
I would live my life if I could
but For me, there's nothing
I might die from this
treatment


a hurt is at the center of all addictive behaviours.
~GABOR MATÉ

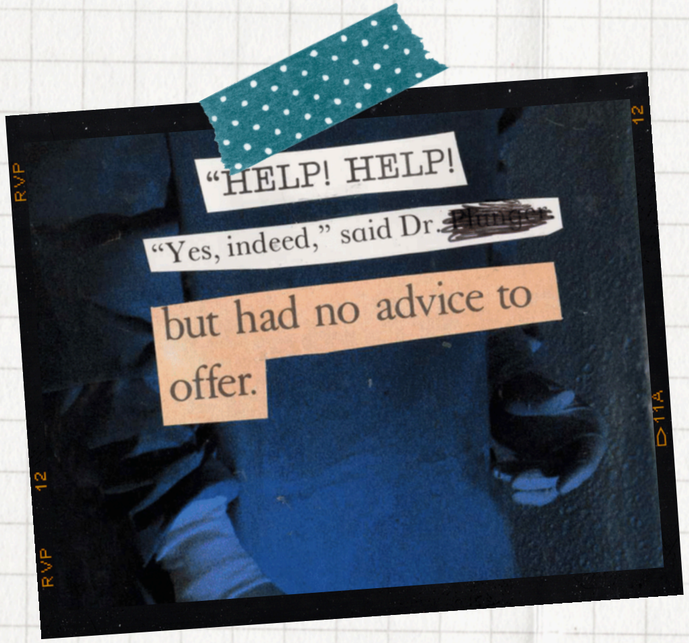

WHO DO WE NOT SAVE ???


the Drug addict???
or...
the Unhoused?
the ones who have failed to meet social requirement???????
the friend that has relapsed (again)?
WHO DO YOU PICK TO NOT SAVE?

03

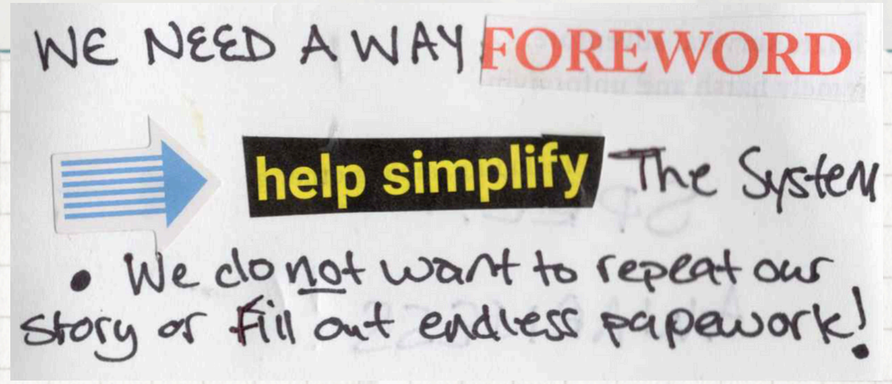
Lack of Service Coordination & System Navigation

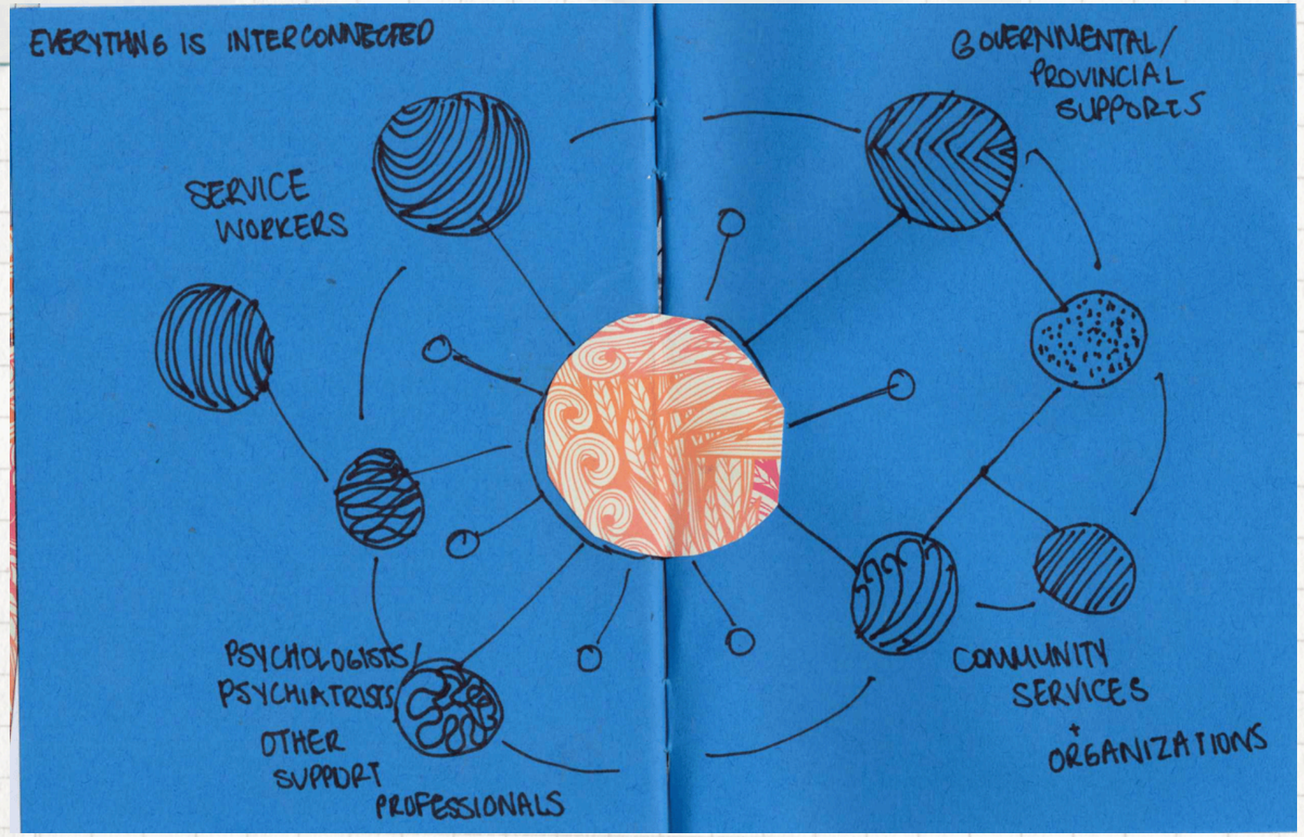


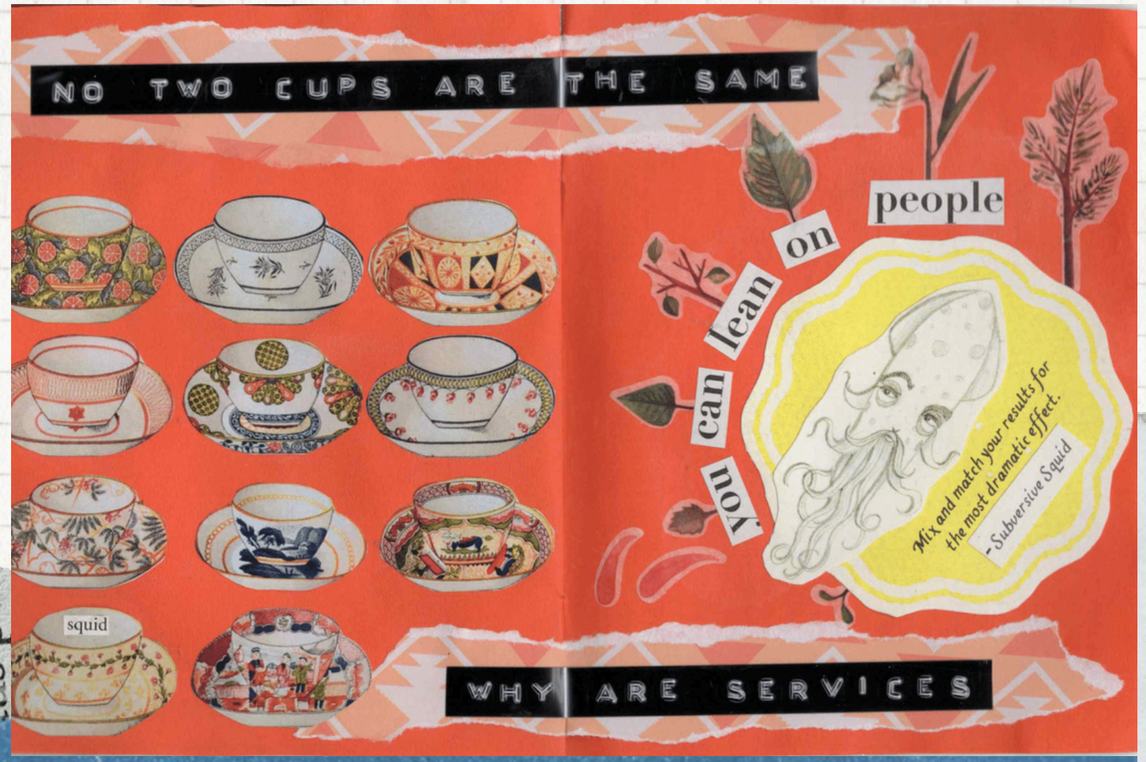


One of the biggest ongoing challenges in mental health and addiction care is the lack of integration between services. Even professionals struggle to know what's available or how to connect people with the right supports. As one person put it, "For physical health, there's a navigation system... why don't we have that for mental health? Instead, we have a system that's impossible to navigate—and the delays only make illness worse."

If the system feels confusing for providers, it can feel impossible for people with lived experience. One participant shared, "I am mostly just confused. The first time I tried to get help... the hospital did not know how to help me."

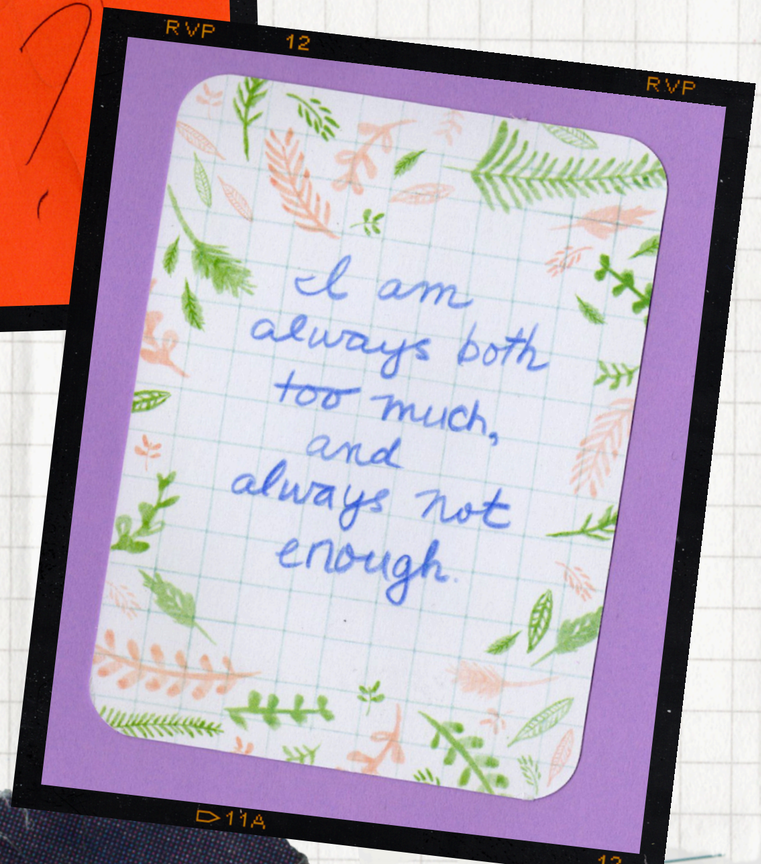






"There's a whole bunch of things that I find there's still a huge stigma. Again, my general care practitioner, i find just completely doesn't understand anything to do with mental health to the point where like i don't even really want him in my care when it comes to that but then he gets upset i don't know so that's a whole other thing but yeah stigma amongst the community and amongst the practitioners."
-Zine Participant





04

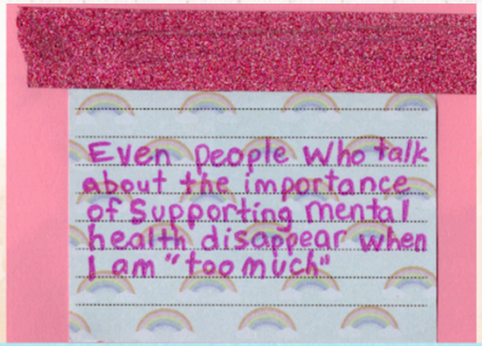
Being Denied Service for Being “Too Well” or “Too Ill”

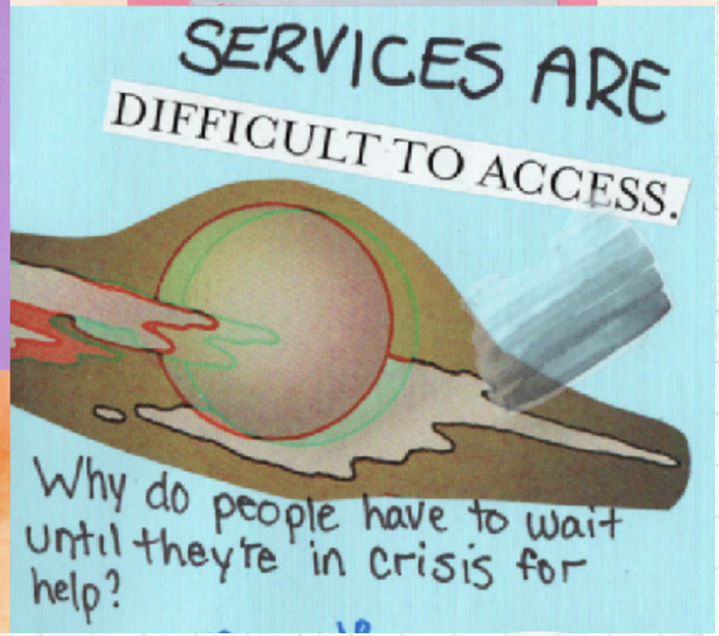
A major concern raised by people with lived experience was the inability to receive care when they needed it most. Many described seeking help in the Emergency Department, only to be turned away if they weren’t deemed “sick enough.” As one participant explained, “I present well even when I’m in crisis and I don’t get taken seriously.”

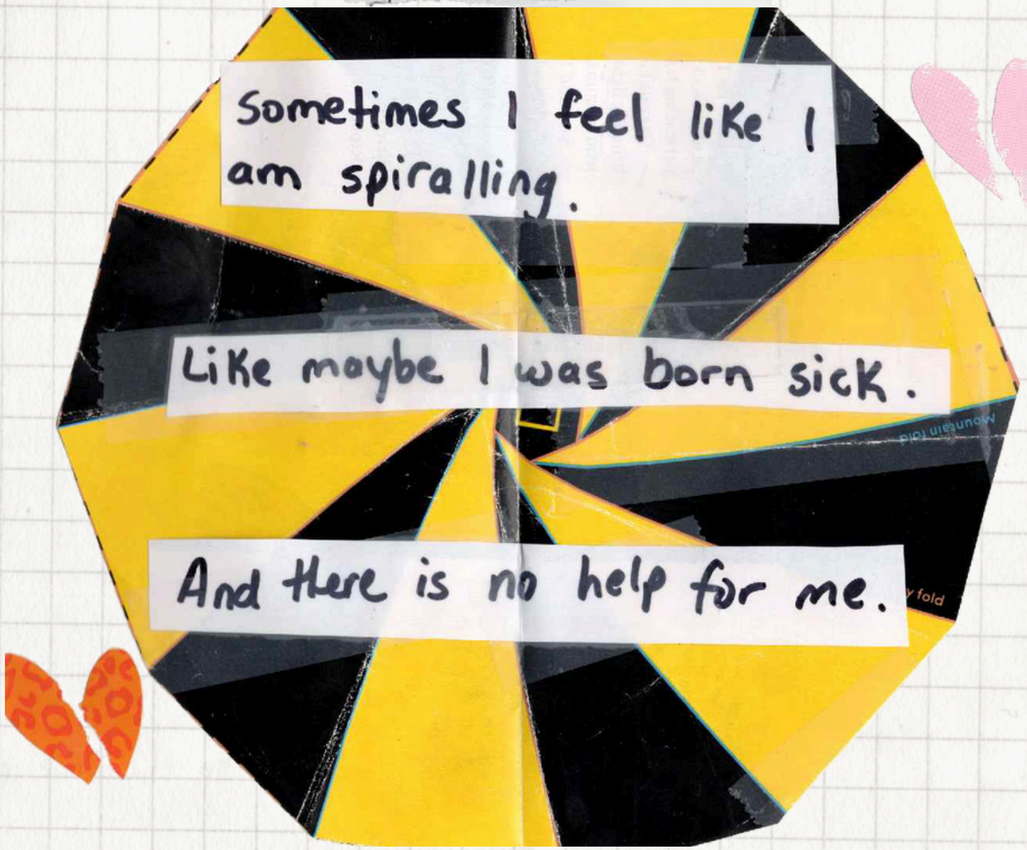
Care providers echoed this frustration, noting that “a referral to a three- to six-month waitlist isn’t a referral—it’s a deferral.” Participants described the system as a “revolving door,” where they are discharged as stable, only to end up back in crisis without lasting support. This cycle leads to burnout, discouraging people from reaching out at all.

The impact is especially severe for those who are already marginalized.









"Do I go to the hospital? No, they're going to kill me. And that shouldn't be the way that I'm doing it. No. And it shouldn't be all or nothing. You're put in the psych ward or you don't get help. But then the psych ward doesn't even have help.. It's nothing. It's a holding cell."
-Zine Participant

"Why couldn't I get the resources beforehand? And why didn't I take my life on part two to get a helping hand? Maybe I never would have reached this point if I could have had someone there, right? So I think preventative care is something that needs to be changed or looked at stronger. You shouldn't have had to lose that quality of life for someone to listen."
-Zine Participant

05

Lack of Interim and Proactive Approaches to Care

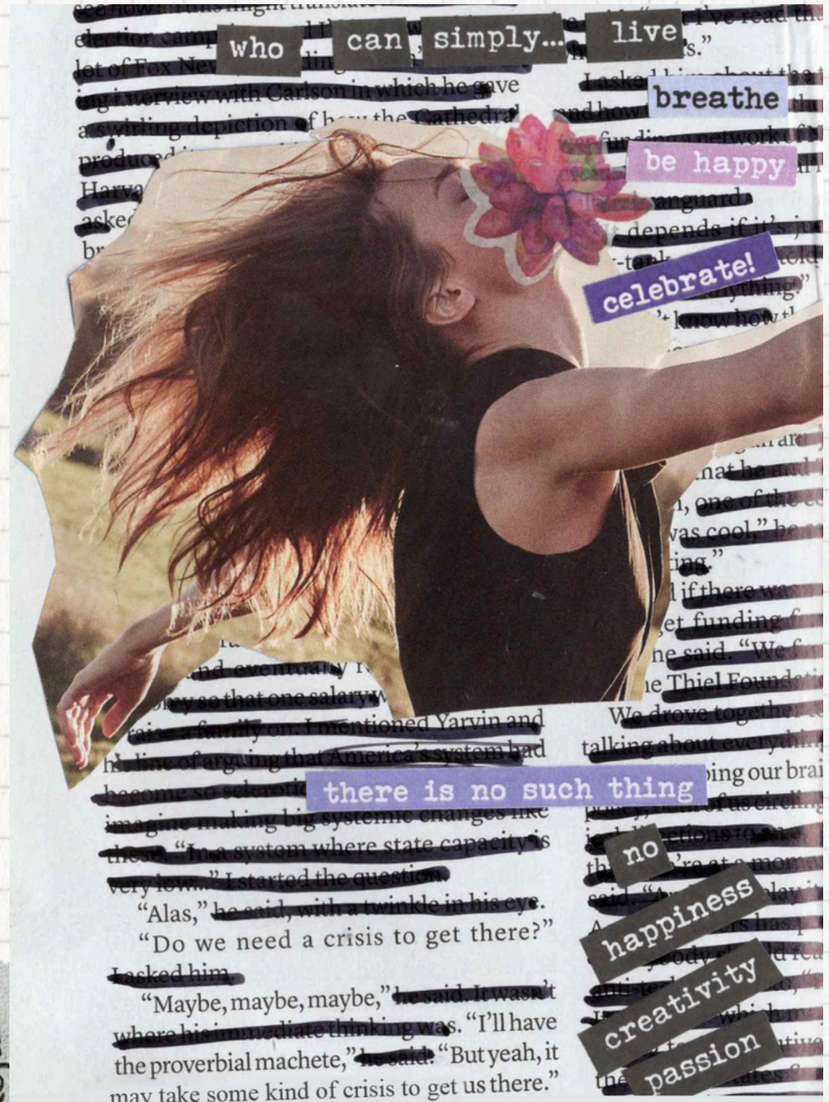


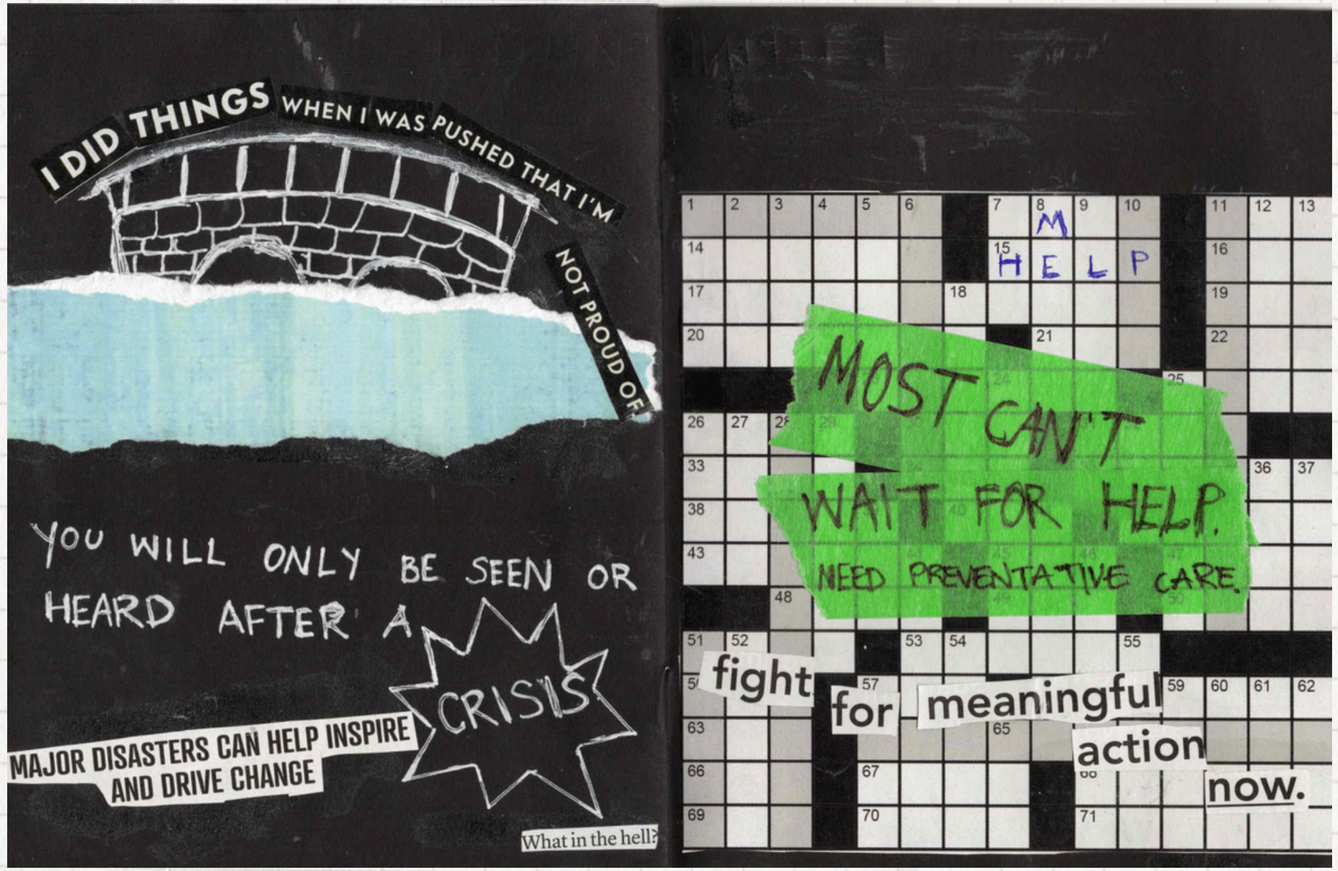
While some programs in London were described as well-run and effective, most are designed for people already in crisis. Informants and participants stressed the lack of proactive or preventative approaches in the system. As one provider explained, "we talk about exercise, diet, dental care, and all those things, about how important that is, but we don't talk about mental health care in the same way to our kids."

Participants emphasized the importance of the time between appointments, when daily life challenges continue. "Having consistent mental health support helps people with everyday life," one person shared. Most of people's time is spent in the community, not in a doctor's office—yet community-based supports are limited and often difficult to access due to cost or membership requirements.

One participant imagined a more accessible future: "It would be great to have support spaces that were like cafes where people could drop in whenever worked for them."

"It seems like the system is only there when you are flat on your face, you're ready to end your life. And even then, they're like, oh, are you bleeding enough?"
-Zine Participant





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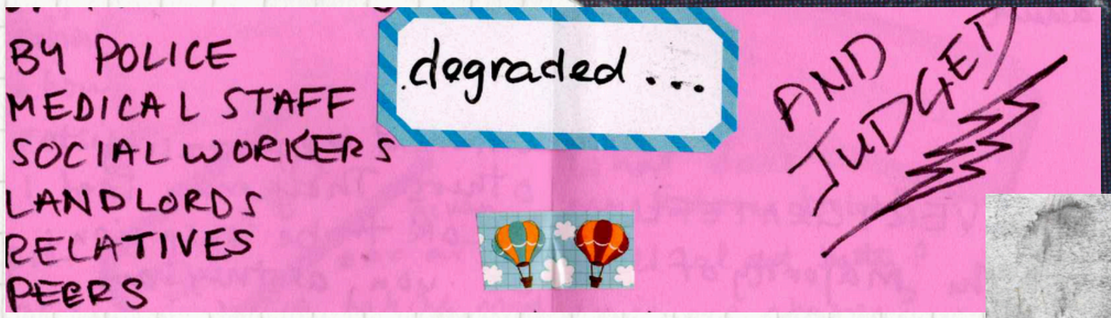
Lack of Compassion & Humanity from Care Providers



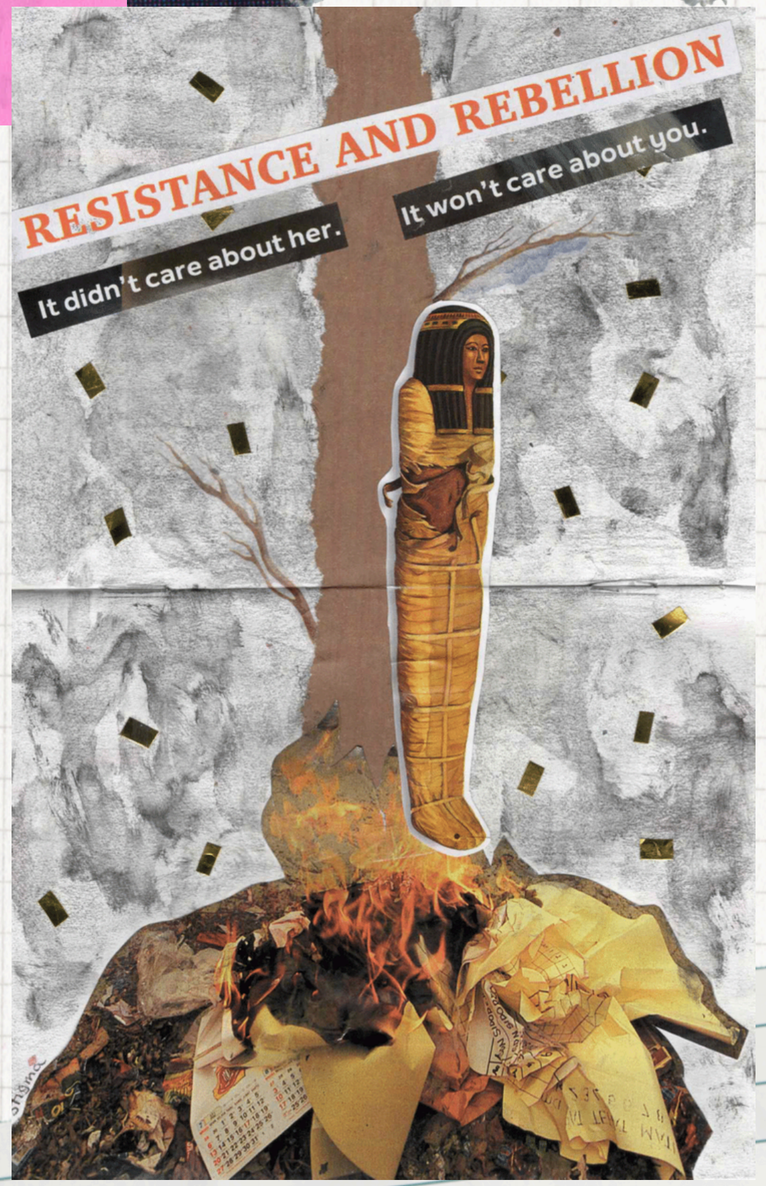
Many participants described feeling dehumanized or met with a lack of compassion within the mental health and addictions system. Instead of receiving support, they often felt criminalized. As one provider reflected, parts of the system can feel more “custodial” than caring—an observation echoed by participants who shared that “we criminalize the mentally ill.”

People spoke of stigma from those meant to help them: “You will feel at some point, or the whole time, degraded and judged. By police, medical staff, social workers…” Others reported encounters with “abusive doctors and nurses.”

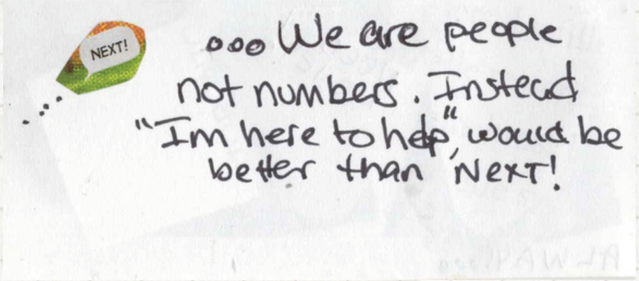
A lack of choice and voice was another common theme. One participant described being silenced when asking questions:One participant described being silenced when asking questions: “This institution is meant to help you. There is no explanation. You are here. That’s it. Take your meds. Why? Because. Keep your mouth shut. You’ll be able to leave. Side effects? Nope, you’re hallucinating. Seizures? Stop lying. This is to help you. Don’t you want help?”

Experiences like these erode trust and can leave people internalizing blame: “You aren’t really tolerated if your situation in life is different or puzzling to others… You might actually be the problem.”

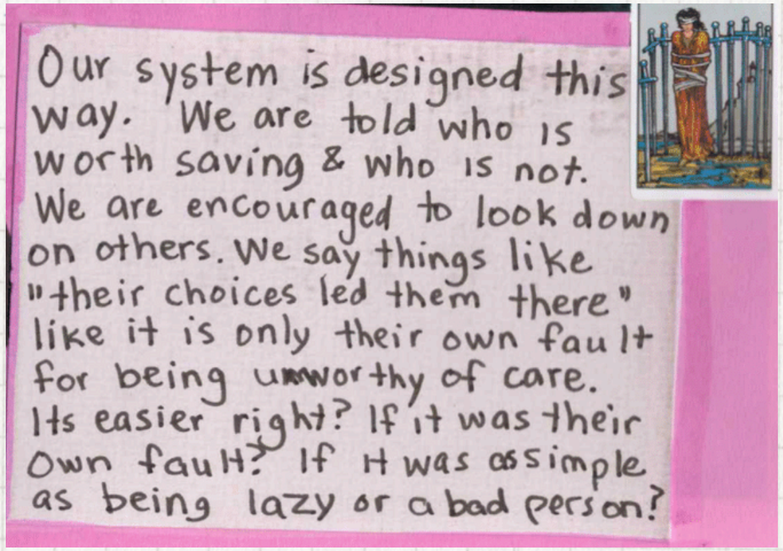
“I mean it's like there's almost this assumption like if you're open with your mental health, mental illness, people are just like, oh, you just don't want to do anything. You're lazy. You're unreliable.”
-Zine Participant

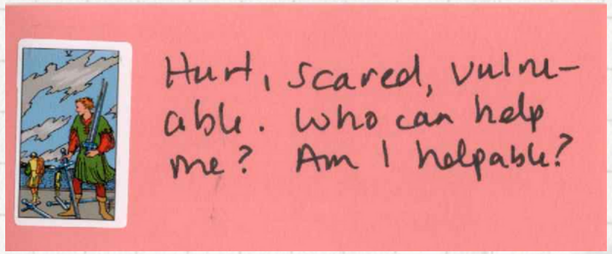


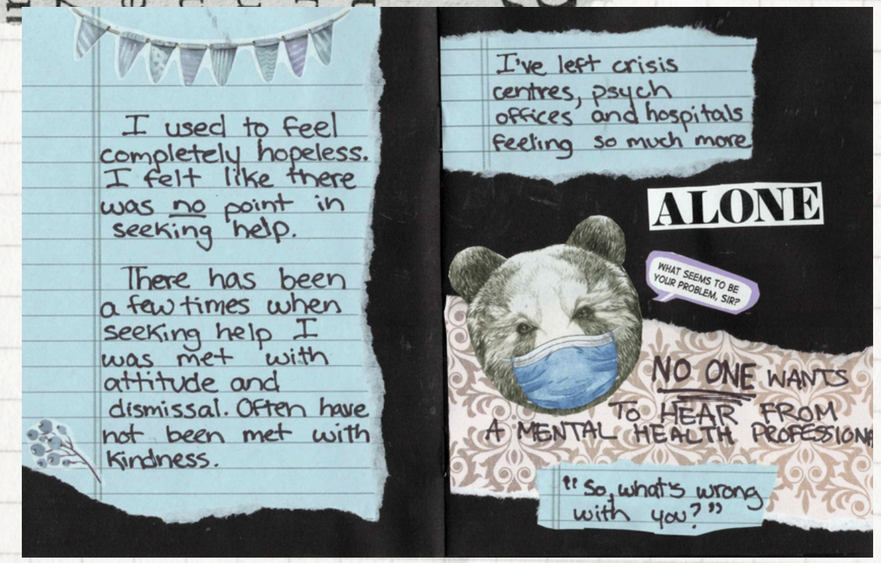
"Some of them seem like they're just irritated at you for existing."
-Zine Participant

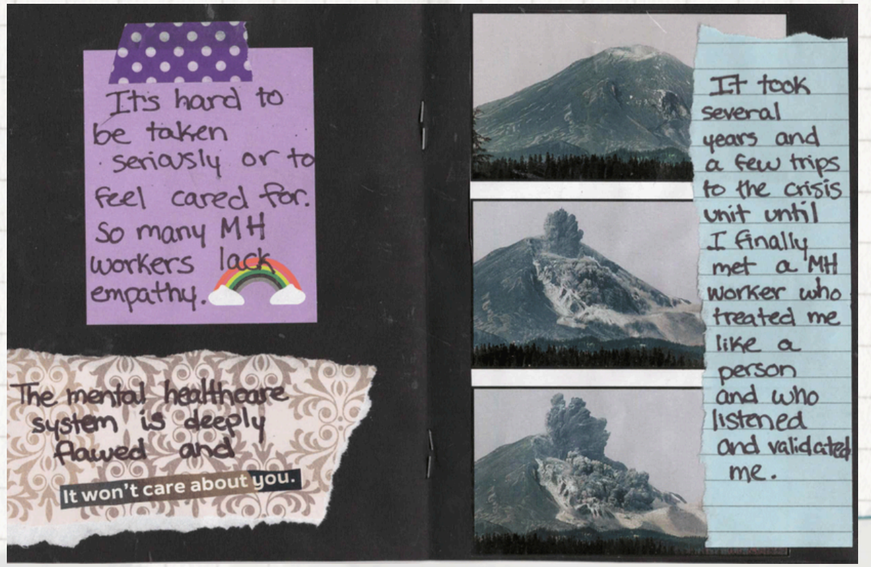


"There's maybe 40% of people I deal with to help that treat me like a human being. It's just generally the whole attitude of people working at the hospital."
-Zine Participant









Throughout this project, participants shared that the workshops themselves were meaningful — not only as a space to talk about mental health and addictions, but as a space to be heard, to create, and to connect. Many described the process of making zines and discussing them as healing, validating, and empowering. This book is not only a collection of insights, but also a reflection of the community that was built in those rooms. We are deeply grateful to everyone who trusted us with their stories and creativity.

"I loved it. This was my first time. And I found it kind of challenging... I did like the aspect of being more creative with how you communicate. So I thought that was a really, really nice take on sense making."

"It was a really wonderful experience. For myself, I think I went through different emotions... it feels very vulnerable... but I loved it at the same time because it was fun to be able to explore art and colors."

"Normally, I don't come and share anything in an environment like this. To have more places like this in London, where people could come together. That would be huge."

"I'm just really happy doing this. I think it's really important to talk about mental health... so thank you so much for opening up because I don't get to have these spaces often especially as an immigrant so it's really important for me."

"I really recommend this program for actually doing this kind of workshop and talking about it because there's just so many changes, especially in London, that needs to be made. And it's just like, it's got to start. And just doing things like this and participants like us, appreciate it."



About MINDS of London-Middlesex

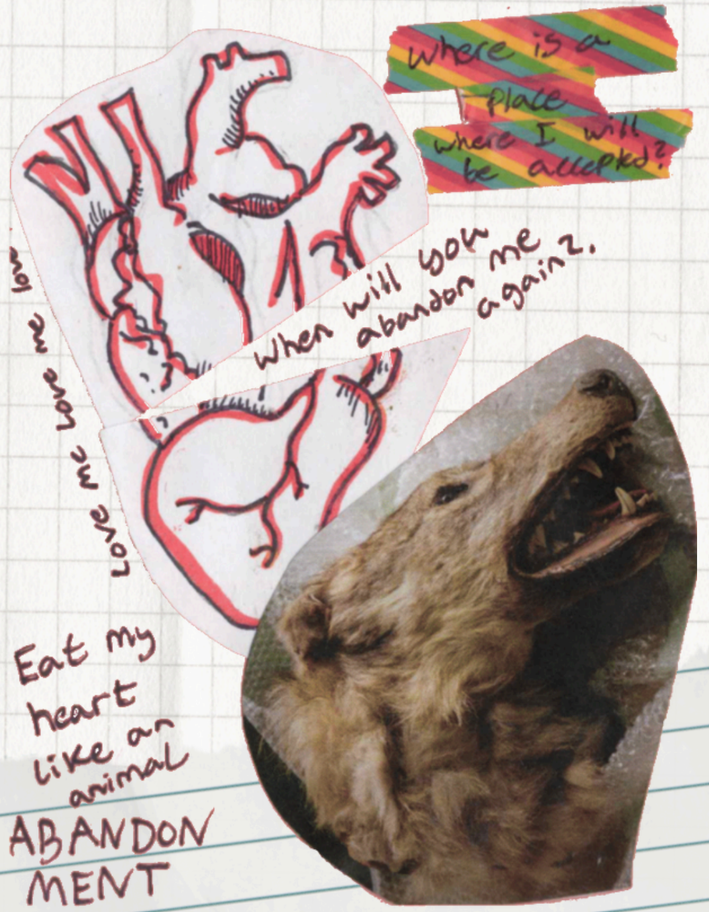
This collection of zines and the workshops that inspired it were made possible through the MINDS of London-Middlesex Social Innovation and Research Lab.

MINDS brings together people with lived and living experience, community members, service providers, and researchers to reimagine how we understand and respond to mental health and addictions. Through collaboration, creativity, and shared leadership, MINDS aims to build a more compassionate and effective system of care—one that reflects the real needs and strengths of our community.

The insights shared in this collection will continue to inform the work of MINDS and its partners as we explore new ways to support healing, belonging, and systemic change across London-Middlesex and beyond.

To learn more or get involved, visit www.mindslondon.ca.





Letter from the Facilitator

October 2025

Hi there,

I just want to take a moment to say thank you for spending time with this book. What you've read and seen here comes from people who were brave enough to share their stories and creativity, and it means a lot that you're here listening.

As someone who both helped run these workshops and has lived through my own mental health struggles, I am so proud and grateful to have been part of this project. I know firsthand how much of a difference it can make to be fully heard without judgment and to have a safe space to share and exist. The space that we created together truly mattered. Many participants told us how good it felt to be heard, to express themselves, and to know their voices were valued. That's something I'll carry with me long after this project.

These workshops showed what can happen when people are given space to share without judgment — space to make, to feel, to be heard. So many participants said it was the first time they felt seen by a system that usually overlooks them. That means everything.

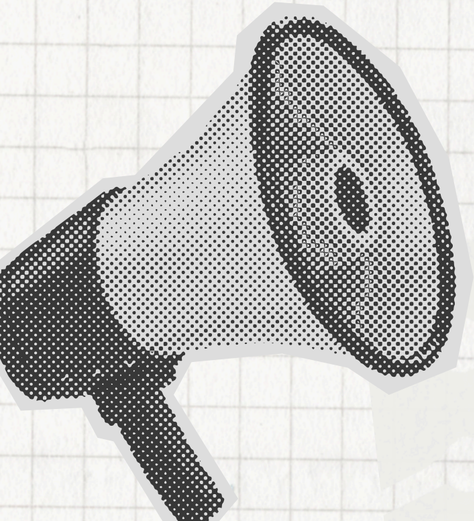
For me, being part of this wasn't just work — it was personal. It reminded me that change starts with listening, and that everyone's story holds a piece of the bigger picture.

This book isn't meant to be the end of the conversation — it's an invitation to keep going. To keep sharing, to keep listening, to keep learning, and to keep working toward a system that treats people with care, dignity, and respect.

We couldn't have made this possible without the strength and bravery of everyone who shared their journey with us.

With care,
Tandra Lepine
Facilitator & Lived Experience Voice
MINDS of London-Middlesex

The themes in this book are not just findings — they are directions. They show us what needs to change and where we must go together. Listening is not enough; the real measure is how we act. Our hope is that this collection sparks conversation, collaboration, and above all, commitment to building a system rooted in compassion, accessibility, and humanity.



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