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Project extracts

A WAR *ON US*

Adeline Praud

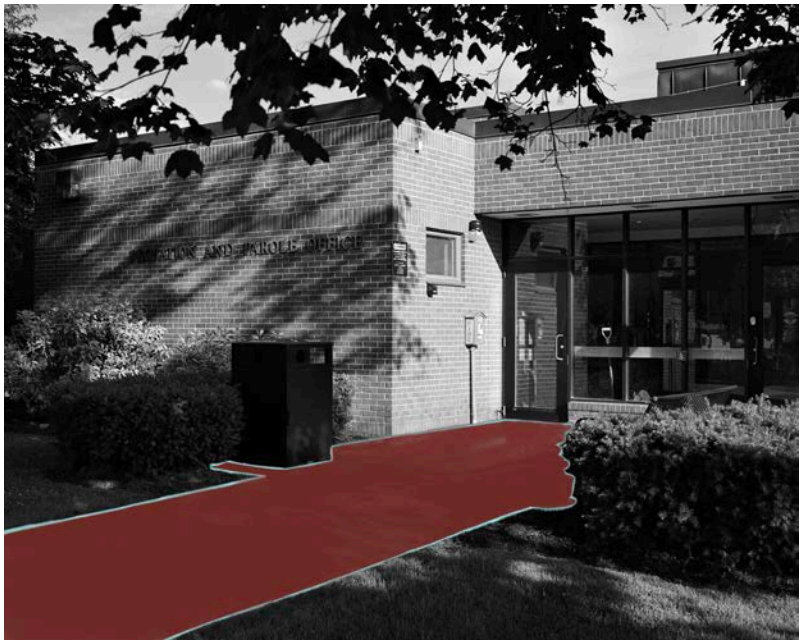
INSTITUT FRANÇAIS + Ville de Nantes
MINISTÈRE DE LA CULTURE
Liberté
Égalité
Fraternité

PROJECT *SUMMARY*

For 30 years now in the USA, the greed of the Purdue Pharma pharmaceutical company and of an entire market in its wake, combined with the policy of criminalizing drugs have created an unprecedented situation: more than a million people have died as a result of an overdose.

Across the country, activists and families are making their distress visible and shouting out their anger. They demand accountability from those responsible. In their shadow, the survivors are waging a battle on a different scale. They fight against the addiction that consumes them and the despair it carries. As the opioid epidemic infiltrates every corner of their community, these fighters struggle to reclaim what they've lost: their children, a home, a car, their dignity.

A War On Us draws attention to the causes and consequences of the opioid epidemic through the eyes of the people it has affected and the spaces it invades.



Infection: Probation and parole office

PROJECT *CONTEXT*

At the end of 2016, the French photographer Adeline Praud went to live for six months in an American transitional house, which supports people suffering from substance use disorder when they are released from prison. It wasn't the first time she had chosen - living with - as a mode of exploration of the world and a creative process. She has been developing this work since 2019. It is the fruit of a seven-year immersion in Vermont (New-England).

BIO*GRAPHY*

Since 2019, Adeline Praud has been developing a long-term project in the USA. In 2022, she was invited by Le Carré d'Art (Diagonal) to develop a body of work about mental health as part of a residency at the psychiatric hospital in Rennes. This work, entitled *Comme une branche de laquelle un oiseau s'est envolé*, was published in 2023 by Sur la crête. Since 2016, she has been running workshops and teaching photography. Finally, in 2018, she created *L'œil parlant*, an organization aiming to implement photographic projects addressed at vulnerable and marginalized audiences, in an empowering participatory approach.

Praud was born in 1979, lives in Nantes and works in France and abroad.

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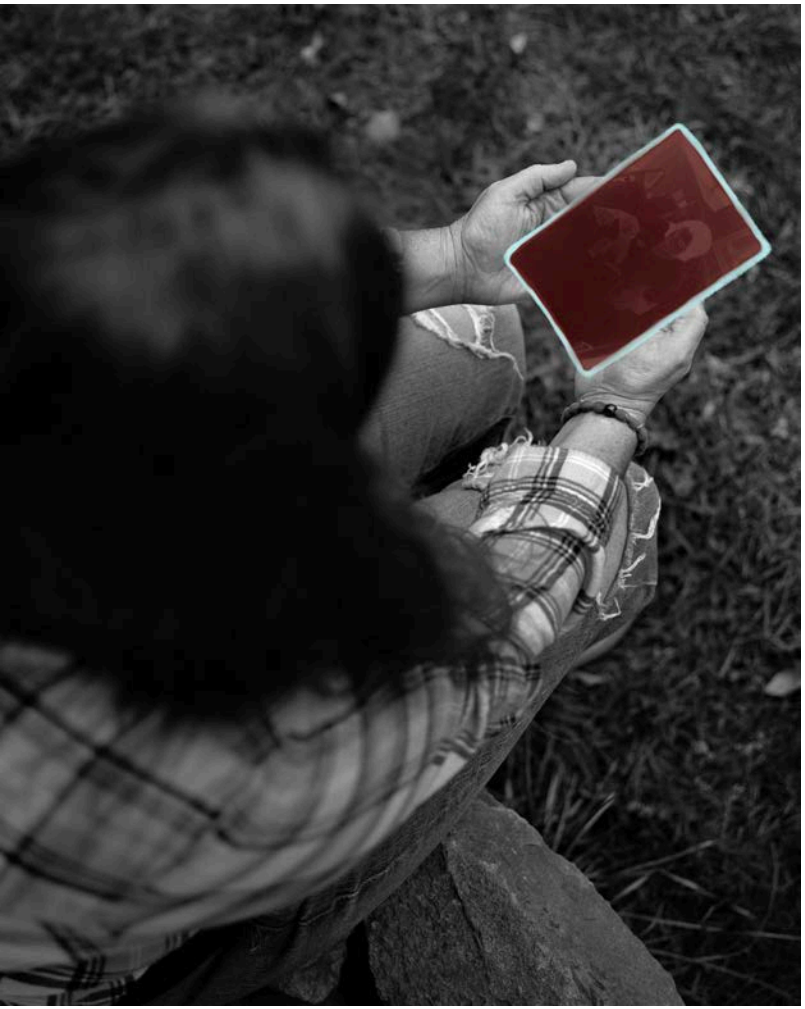

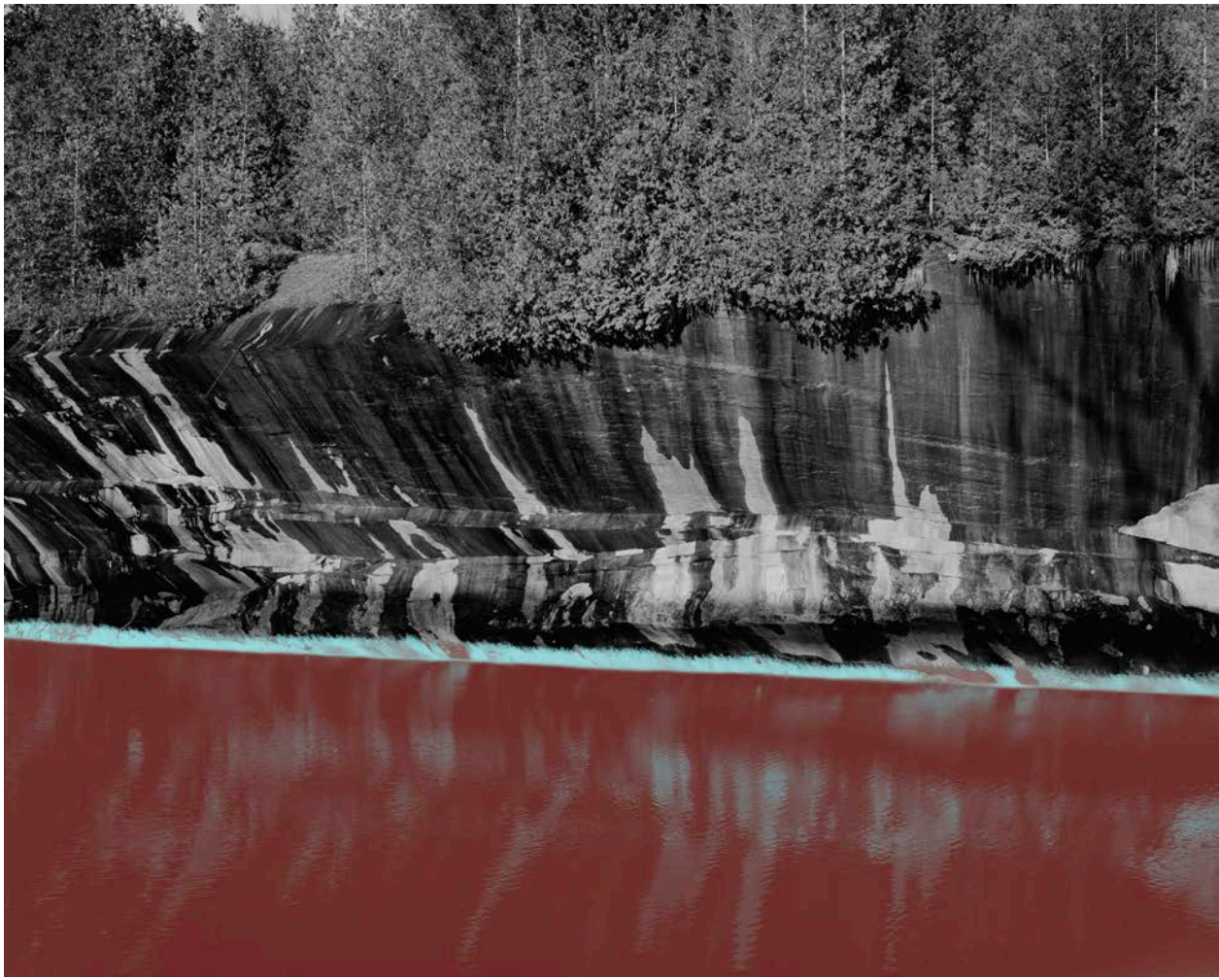


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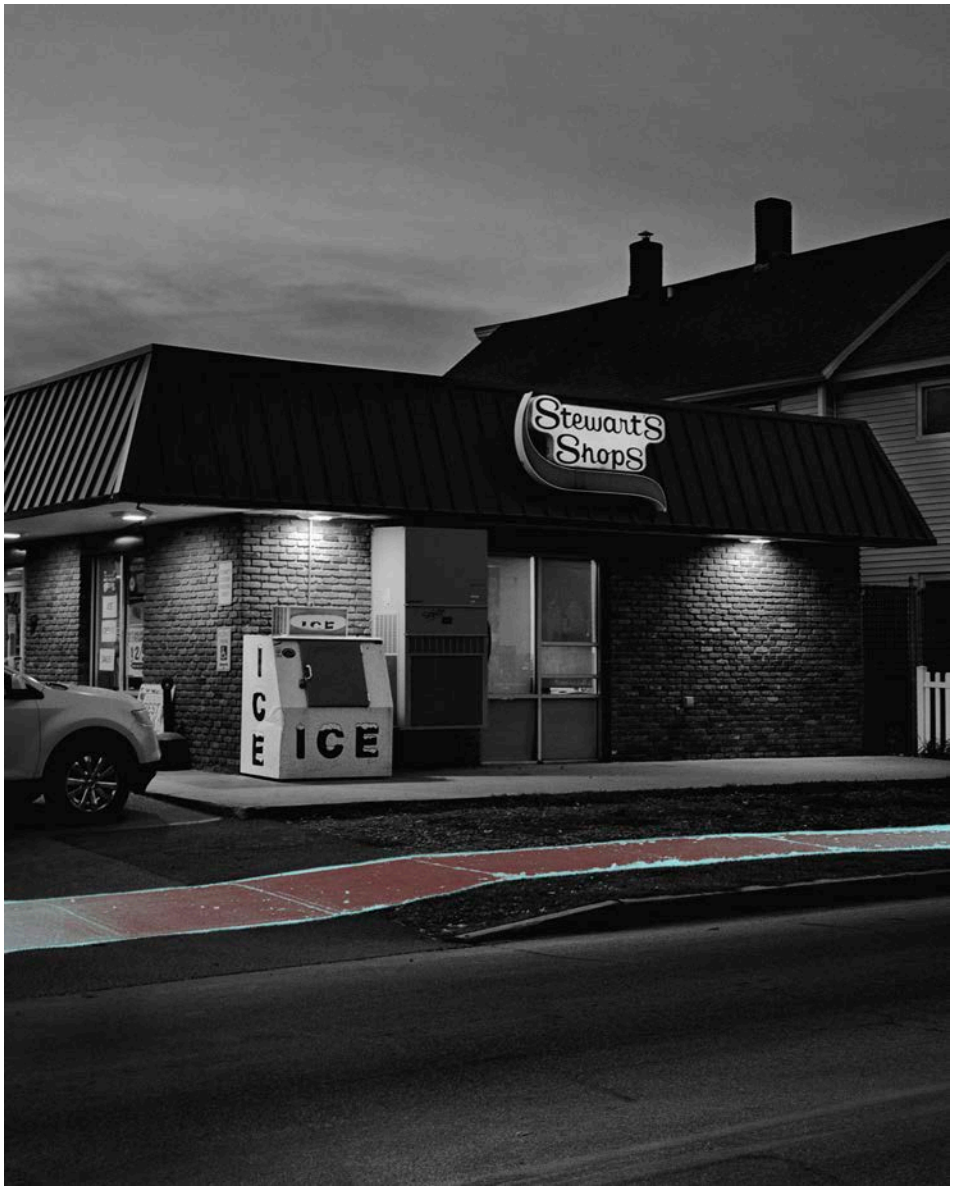
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ARTIST *STATEMENT*

The opioid epidemic, far from being an isolated phenomenon, is embedded in a system that includes North-South inequalities (drug trafficking), the criminalization of drug use (war on drugs), systemic violence (social inequalities, sexist and sexual violence, racism, etc.). Historically, does the opioid epidemic not represent the end of a system that has definitively failed to take care of its fellow citizens?

In Vermont, some communities, families and individuals have chosen to confront the crisis. Beyond the actions and systems established to repair and sustain what can be fixed (detoxification centers, rehab, transitional living, prescriptions of substitution drugs, support groups and therapeutic follow-up care), there are connections and relationships which can help to disrupt the cycle of addiction and isolatedness. In some rural communities and deindustrialized and disaffected areas, traumas both collective and individual merge. Landscapes and bodies have been affected. Communities have been shaken to their core.

What are the prerequisites for a state of resilience, both collective and individual? Where does the momentum that propels us towards healing come from? Why do many people who live with substance use disorder find it so difficult to understand that they are not solely responsible for what happens to them, and that their trajectory is the consequence of political choices that favor power and money over the well-being of citizens? These are some of the questions that guide my photographic research.

CON*TEXT*

In 1968, Richard Nixon, then President of the United States, instituted the War on Drugs. In the early 1970s, this punitive and repressive policy was put in place across America. It took aim at marijuana and heroin, whose principal consumers included the young pacifists of the counterculture and individuals from the African American community. In 2016, one of Nixon's top advisors testified that the government had targeted these drugs in order to establish a tighter legal grip over members of these two communities that they were determined to silence and disrupt.

Over the next few decades, racial and social discrimination continued to proliferate, this time between a crack-using population with strong ties to under-resourced African-American communities and another more "respectable", lighter-skinned population, the customer base of cocaine. Surprisingly recently, an individual arrested for possession of five grams of crack-cocaine was automatically imprisoned for five years without the possibility of parole, while for cocaine, this same sentence was set for 500 grams. And yet, the molecule is the same.

This makes plain that the ensuing criminalization the American legal system instituted in its embrace of this War on Drugs was built, not on the basis of the danger attributed to the drugs themselves, but instead according to the Black consumer population of these drugs which represented for successive administrations a threat to the status quo, to both the economic and social order.

At the end of the 1990s, the American pharmaceutical industry, in particular the Sackler family, owner of Purdue Pharma, gradually persuaded doctors and patients, thanks in no small part to hefty advertising campaigns, of the revolutionary nature of their new painkillers, including OxyContin, Fentanyl and Percocet. These medications are derived from oxycodone, a powerful analgesic, classified as a narcotic by WHO. Starting in the early 2000s, the number of prescriptions for these medications skyrocketed, and with it the number of overdoses. Each year in the United States, 75,000 die from overdoses, with almost 50,000 of them attributed to opioids.

Since 2016, the number of conversations has grown in recognition of this crisis, even defining it as an opioid epidemic. While an epidemic is bound to affect all aspects of the population, the most at risk, including the so-called 'white trash', will almost certainly bear the brunt of its death and destruction. Tragically, Vermont holds the record for the highest percentage increase in overdose deaths between March 2020 and March 2021. While the national increase stood at 35%, in Vermont, fatal overdoses increased by 85%.
In the shadow of these alarming figures hide the people who've survived an overdose, those who fear the next one, the children taken from their parents, the families torn apart, the prisons.

Over the past few years, other black market substances have spread massively through drug trafficking from Central America to major American cities and hubs in rural states, with Fentanyl coming in first place. Some people with substance use disorder use it pure, others an altered form, which has been mixed with other drugs by traffickers, unbeknownst to them.

ARTIST *INTERVIEW*

HOW DID YOU START THIS PROJECT?

At the end of 2016, a week after the election of Donald Trump, I arrived in the United States (Vermont). I was going to spend six months there as a volunteer in a transitional house that hosts people who are in recovery upon their release from prison. At that time, I had never heard of the opioid epidemic. It was once there that I realized that something very serious was happening, which went far beyond the individual stories of the people I met. So I started this project with research, to understand the historical, political and social context in which this crisis developed. It was not the first time that the United States had faced a drug epidemic, but this time it was through legal channels and without the knowledge of consumers that substance use disorder would spread massively.

WHY DEVELOP THIS PROJECT, MOREOVER, AS A FOREIGNER?

This is a question that I have often asked myself. In Vermont, people often told me that my position as an outsider was in fact a strength, that it induced a distance and a necessary step back. However, I very quickly developed a sense of belonging to this community. I also think that without the support of these people and organizations, this project would never have been possible. When people who live with drug dependency try to get out of it, they face a lot of shame and guilt. It is all the more difficult to forge bonds of trust with them, at this specific moment in the journey of recovery. So it was important that I was somewhat co-opted by the local communities.

In addition, it is important to remember that Vermont is a rural state. Addiction is less visible there than in the big cities, even if it is just as present there. It was really only in 2022, when I was in an artistic residency in a psychiatric hospital in France, that I understood why I was developing this project. On the one hand, the issues related to mental health problems in general captivate me. I like working with trauma. It feels like home to me. These issues interest me when they allow me to question the societies in which they are rooted. From my perspective, our personal lives are political and the violence we experience – and which produces mental health problems – is rooted in cultures and systems that allow the reproduction of this violence. Behind the use of substances, even when beginning with an opioid prescription, violence oftentimes hides that has taken place in families or within the couple, for example.

CAN YOU TELL US ABOUT THE PROJECT'S TWO BODIES OF WORK?

Finding a way out of opiate substance use is extremely difficult physically (withdrawals), psychologically (the need to face underlying trauma, shame and guilt), criminally (a round trip to prison linked to associated practices - difficulty getting out of the justice system) and economically. What motivates me the most in my work are the encounters. Yet, to really meet the person who hides behind the substance use disorder, I have to make this encounter when the person is not actively using, when the person is developing thoughts on addiction. Indeed, behind my images often hide long conversations. It is these conversations, associated with all of my research, that allow me to validate the accuracy of my work and the texts that I associate with my images. Other photographers have chosen to photograph substance use disorder directly and the ravages of the epidemic in cities. Jérôme Sessini or Jeffrey Stockbridge for instance. Their images are important. Sometimes you have to shock to provoke reactions. I chose another way because I do not want to reduce the people I work with to their dependency.

That's why some of the images in this project are in the tradition of documentary photography. This body of work combines portraits and landscapes that situate people in the territories in which they live.

This first body of work resonates with images that are part of a more contemporary tradition, so-called conceptual photography. Here, I work digitally on black-and-white analog photographs. I work with the colors blue and red (blue represents oxycontin and red recalls flesh and blood). This suggests the presence of the epidemic in different layers of society.

In my project, all these images interact with texts. It was important for me to make room for the people's anger. That's why I extracted slogans from the signs of demonstrations against the epidemic. These slogans mirror a more personal text I've been working on for several months. I'm currently working with a graphic designer on a book project that will incorporate these texts. This book will be on display during the exhibition at the Vermont Center for Photography from January 3 to March 5, 2025.

EVERY DEATH IS A DRUG POLICY FAILURE

During my flight to the United States on November 15, 2016, I didn't know precisely what I was going to find. Donald Trump had been elected only a week earlier. Many were still in shock. Polarities were asserting themselves. In Rutland, where I had just set down my suitcases, they took the form of small yard signs planted in the lawns of the wooden houses typical of the Northeastern United States. The posters provided an inkling as to what might be going on behind the windows of these homes. Some bemoaned the failure of Bernie Sanders, while others rejoiced: the man who had the power to save them would finally reach the White House.

I was embarking on a more or less serene six-month stay, during which I was to be one of the many residents of a Vermont transitional house. I wasn't addicted to opiates. I wasn't just out of prison. On the contrary, I had chosen to be there and share my life with Tim, Mark, Holly, Shawn and the others. They were all in trouble with the law. With the exception of Shawn, who was following an alternative-to-custody program offered by the local court for people with substance use disorders, the other residents had received prison sentences of varying lengths. Their incarceration was linked to their addiction.

The residents were benefiting from a reduced sentence made possible by their admission to this transitional house. For a period ranging from six to fifteen months, residents were provided with a setting capable of supporting their recovery efforts. The low rent fees and access to free food also enabled them to get back on their feet financially and regain control of their lives independently.

As a resident of this home, I had the same rights and duties as the other residents. I also had to follow the same rules of conduct. No use of psychotropic drugs, including alcohol. No violence. No romantic relationships between residents. In the end, the salaried staff and especially the director, who had agreed to take me in, expected very little of me. I was therefore free to organize my time and activities. And so I began a kind of creative residency that would last until May. Until then, I'd have to survive the winter in the far North.

Before that winter of 2016/2017, I had never heard of the opioid epidemic. It was only once I was there that I understood the context of the global crisis I found myself surrounded by. In light of the many meetings I had the opportunity to attend, I quickly realized that the situation was indeed dramatic. The way in which the local community and professionals had united around common goals spoke volumes about the scale of the battle they were waging. Together, they formed a kind of pacifist army which had united to save the lives of those already affected by the epidemic. For my part, I pushed open every door that had been shown to me: the office of Probation and Parole (the equivalent of the SPIP - Service Pénitentiaire d'Insertion et de probation), the local prison, self-help groups affiliated with AA/NA (Alcoholics and Narcotics Anonymous), social services and so on. Why were these new drugs—which were as addictive as heroin—approved by the FDA (Federal Drug Administration)? How had doctors been persuaded to prescribe these drugs on a massive scale? Why had so many people succumbed to the pressure?

I was questioning the links between capitalism and ultra-liberalism, and stumbling on the ambitions of the Sackler family and their Purdue Pharma company. To go down this pathway was to enter the heart of the system on which this epidemic was based.

[1] The word addiction is highly controversial. Its use can feed and reinforce prejudices about the use of drugs and alcohol, but also about the users. Today, it's customary to speak of substance use disorders. In this book, I will sometimes choose the term addiction, as this is the term most often used by users to talk about their disorder.

Excerpt from the artist's book designed for the exhibition in January 2025


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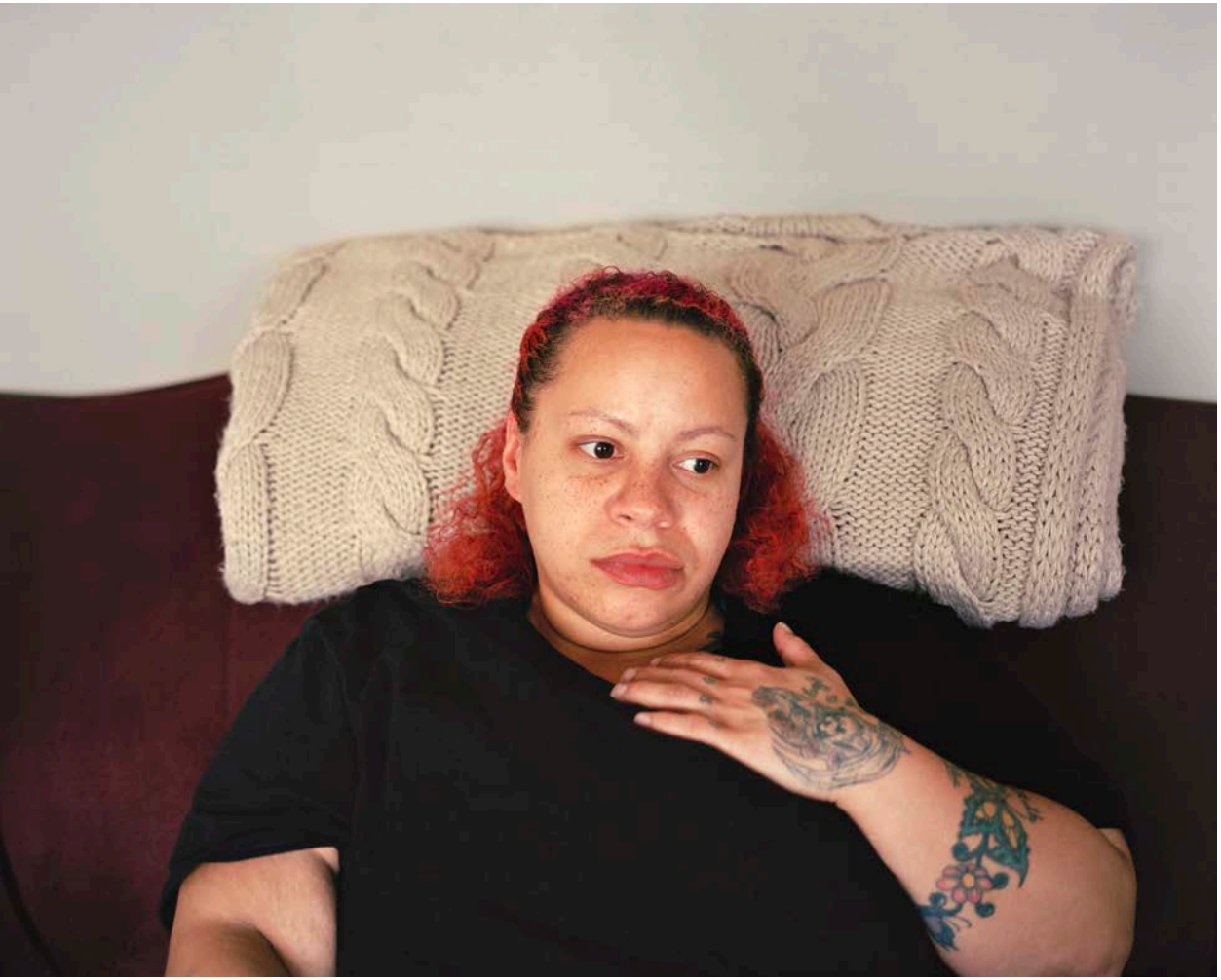

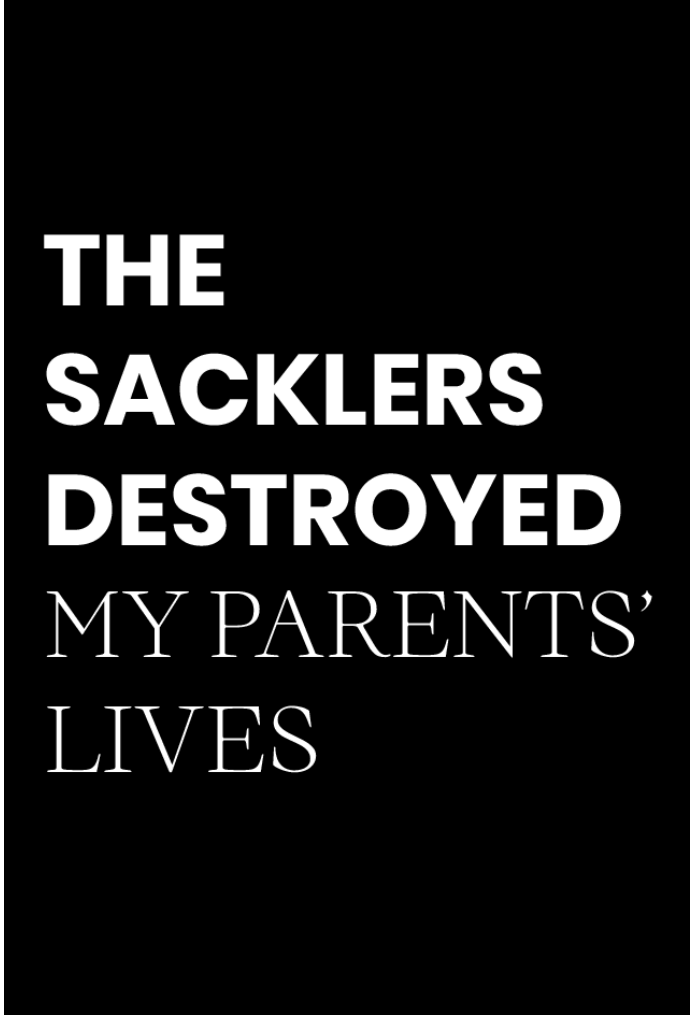

Slogans from signs of demonstrations

In addition to the images, slogans and book, the exhibition will include a chronology of the war on drugs from the early 20th century to the present day. It will be designed by French graphic artist Lucile Bihannic.

NEWS / *DEVELOPMENTS*

This work is currently being finalized.

It will be exhibited at the Vermont Center for Photography from January 3 to March 5, 2025.

Adeline Praud will be available for meetings in the USA from January 4 to 21. She can welcome you at the VCP* around her exhibition, or meet you in Boston, NYC or other locations if possible.

Praud would like to meet a variety of professionals interested in this project, with the aim of producing a more substantial exhibition and circulating the project -in- North America.

A new chapter could emerge in the near future. Indeed, Praud would like to develop visual and textual research on harm reduction, which is proving to be a major issue in the care of people living with a substance use disorder.

* VERMONT CENTER FOR PHOTOGRAPHY
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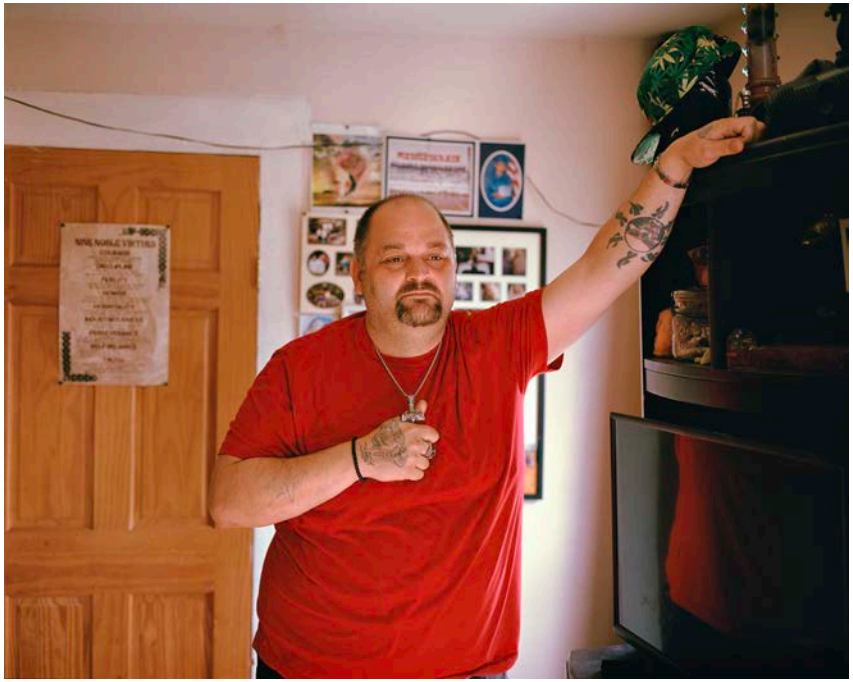

PARTNERS /*SUPPORT*

A War on Us was produced with the financial support of the French Institute, in partnership with the City of Nantes on the one hand, and the Pays de la Loire Region on the other. It also receives financial support from the French Ministry of Culture.

In 2019, Adeline Praud has been selected for a creative residency by 77 Art gallery based in Rutland, VT.

In 2024, Praud was selected for the ENSP Arles mentorship program with this project.

In 2025, this work will be exhibited for the first time at the Vermont Center for Photography.

Adeline Praud would like to thank all the people and organizations who placed their trust in her and supported her in the development of this project. This project deals with a complex and difficult subject, and without their humanity, generosity, vitality, fighting spirit and joy, it would have been extremely difficult to bring it to fruition. Adeline Praud thanks them sincerely.

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VCP

" If I were just curious, it would be very hard to say to someone, “I want to come to your house and have you talk to me and tell me the story of your life.” I mean people are going to say, “You’re crazy.” Plus they’re going to keep mighty guarded. But the camera is a kind of license. A lot of people, they want to be paid that much attention and that’s a reasonable kind of attention to be paid."

Diane Arbus

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