

The Need for Pharmacare in Yukon.

Hear from real Yukoners.

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GRANDMOTHER'S STORY ABOUT INTERSECTIONS BETWEEN MEDICATION INSURANCE, POVERTY AND MENTAL HEALTH:

"I have a 35 year-old daughter who grew up with some adverse childhood events, some of which I knew about, others not. I was a single mother myself. She had an early introduction to cocaine, had a child at 20 years old, and broke up with the jerk father. She lived with me for a few years, working and going to college. She was functional, but she developed diabetes. She has a new partner, but he was soon diagnosed with cancer, so she had to be the sole provider. With housing prices so high, they had to keep moving (5-6 times in 2-3 years). I helped with rent, but finally decided to give her her inheritance early and helped her put a down payment on a condo. With his sickness, COVID, and extreme isolation she started self-medicating. She split up with him, which led to a pretty awful sexual assault. She was prescribed medications for anxiety, her diabetes, and several mental health conditions. She was working poor, didn't have benefits at work, and wasn't eligible for help from the government because she was full-time, so she wasn't able to fill her prescriptions. She got heavily into crack, and then she was gone. She did anything she could not to feel, not to think about what happened. I lost contact with her. I know she's been in and out of treatment, down in BC, but haven't heard anything for a while. My grandson is living with me, he goes to school and is doing OK, but it has been so hard on all our mental health. There is a real pipeline from the mental health crisis to the opioid crisis, and Pharmacare would help divert people and get them the real medications they need."

TREATMENT STOPS WHEN COST IS A FACTOR

"I was lucky to have benefits from work and short term disability coverage after my motorcycle accident. I had a broken collar bone and ribs which had to heal on their own.

But as soon as I returned to work and had less time to focus on my healing and when recommended treatment or prescriptions were not covered, I would choose to go without. In the short term I avoided the extra costs, but long term I now live with an injury that will never go away and limits what I can choose to do and participate in."

"Pharmacare is not just a drop in the bucket, it is the bucket that will allow Canadians to get their life put back together."

Yukon Federation of Labour President Teresa Acheson

TEACHER'S STORY, PHARMACARE COULD HELP ALLEVIATE THE OPIOID CRISIS IN YUKON:

"As both a retired teacher and library clerk, I can tell you by direct experience that we have people all over town who have been prescribed mental health drugs and cannot afford them, so they medicate with street drugs instead. I am now carrying Naloxone in both my rucksack and my bike bags to deal with the inevitable opioid overdoses coming out of the lack of Pharmacare."

"It's been hard dealing with drug cost and being a single mom. Every one should have pharmacare. No one should choose between drugs you need and food."

pharmacare.canadianlabour.ca

