

Stakeholders' perspectives on the role of stigma in authorizing and implementing safe consumption sites in the United States: a qualitative study

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Overview

We explored the ways different stigmas towards people who use drugs (PWUD), especially unhoused individuals, and harm reduction, manifested in the authorization and implementation of safe consumption sites (SCS) in the U.S. from the perspective of advocacy, policymaking, and implementation stakeholders.

Background

- In 2020, ~92,000 people in the U.S. died from a drug-involved overdose (5x the number of deaths in 1999)
- **Influx of potent synthetic opioids**, such as fentanyl, into the drug supply, which has caused **overdose death rates to increase**
- State and municipal governments have been reluctant to implement SCS, an **evidence-based intervention** to reduce drug-related morbidity and mortality
- SCS help reduce opioid-related overdose deaths by allowing people to use drugs with **sterile equipment** in a **monitored environment**
- **Policymaking frameworks** present a challenge to authorization

Methods

- 16 individuals working to authorize and implement SCS in their respective jurisdictions (mean age: 51, 94% white, 56% female)
- Purposely selected given historical efforts to legalize and implement SCS (RI, NY, CA, PA)
- Recruited informants in diverse roles (legislators, advocates, researchers, implementers)
- Conducted in person, where appropriate, or via video conferencing or telephone if necessary
- Interviews explored the experiences, barriers and facilitators of SCS authorization and implementation (~50 minutes)
- Utilized thematic analysis to document manifestations of overlapping stigmas during SCS authorization

Emerging Themes

❖ Negative views of PWUD among lawmakers and constituents

RI: "Oh, I don't want those people." Again, I heard that. "Those people," **like they were some kind of insect or bug.**

PA: People don't want their neighbors to know. There is tremendous, **tremendous stigma**, and so you're a **bad family** if your loved one uses drugs...

❖ "Not in my backyard" (NIMBYism) towards safe consumption sites

CA: You'd have neighborhood associations that were **pissed** and up in arm about homelessness and drug use... They would **harass** the DPH.

RI: The **neighbors** seem to think that the **syringe exchange brought the PWUD**. It's like, no. The drugs actually brought the people.

❖ Influence of stigma on political decision-making

PA: I think, in lots of ways, our legislators' resistance to this [bill] is **what people really feel about people who use drugs**. I think that it **drives policy**.

CA: Newsom vetoed it because he's got **larger political ambitions**, and he didn't want this to be able to be used against him.

❖ Stigma is not the only barrier

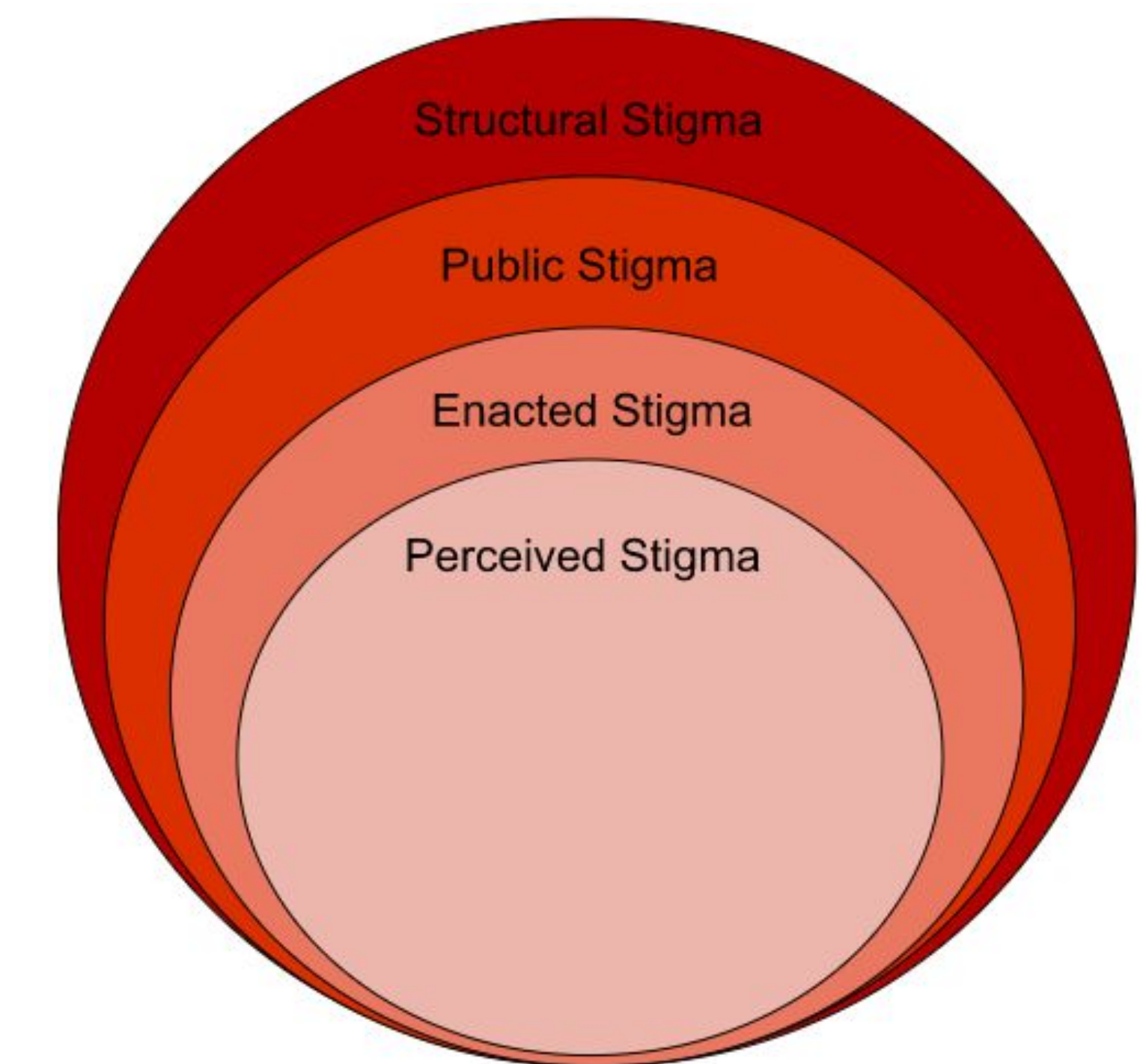
RI: There was a lot of **political opposition** to putting it in the places that were **most impacted**. Basically we're told that downtown is not an option.

NY: Not much opposition at least that I'm seeing, but that said, there's **not the kind of support either...** It's not like the money's coming.

Results

- Participants reported experiences with overlapping stigmas throughout the policymaking process, with these experiences varying across jurisdictions.
- Stakeholders described discriminatory attitudes toward PWUD, espoused by lawmakers and constituents, as impeding efforts to create and pass legislation authorizing SCS.
- NIMBYism, the public opposition to development from residents in the community, was frequently mentioned.
- Public attitudes and NIMBYism from constituents appeared to influence policymakers' decisions and political support of SCS.
- Even after authorization, stakeholders described the stigmas surrounding the logistics of planned and ongoing implementation, such as NIMBYism towards proposed locations for these sites.
- Looking beyond stigma, policymakers consistently mention additional barriers.

FIGURE 1. Types of stigma related to opioid use



Conclusion

- Multiple types of stigma appear to arise frequently in the legislative and implementation process of SCS, many of which stem from vitriol directed towards PWUD.
- These findings illustrate the importance of addressing stigma in different stages of the policymaking process and the importance of efforts to combat dehumanization of PWUD.