Surveying Perceptions of Stigmatizing Language and Misinformation Regarding Drug Use, Overdose, Substance Use Disorder Treatment, and Harm Reduction in Connecticut-based Media Coverage

2023
The Global Health Justice Partnership (GHJP) is an initiative of the Yale Law School and Yale School of Public Health established in 2012 to promote interdisciplinary, innovative, and effective responses to key problems in health justice. It is a transformative collaboration integrating different fields in order to make critical policy interventions, develop new kinds of cross-cutting research, and provide educational opportunities straddling a variety of academic disciplines. Leveraging Yale’s institutional assets, the GHJP trains students to undertake collaborative, real-world research and advocacy to promote health justice in the U.S. and globally. It also organizes conferences and events; builds partnerships with local NGOs and social movements in New Haven, the U.S., and around the world to move research and critical analyses into action; and nurtures a truly interdisciplinary brain trust dedicated to effecting social change. The cornerstone of GHJP is a practicum/clinic course fusing didactic and experiential learning on critical topics at the intersection of public health, rights, and justice in the twenty-first century.

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Foreword

Since 2017, the GHJP has partnered with New Haven- and Connecticut-based grassroots sex workers’ rights advocacy and harm reduction organizations to support the health and rights of people involved in the sex sector and people who use drugs. The present report is both a self-standing snapshot of local perceptions of stigmatizing language and misinformation regarding drug use and harm reduction in Connecticut’s media, and forms part of a larger project looking to address the role of journalists and media in reporting ethically on highly stigmatized topics here in our state, led by the GHJP and its local partners.

The GHJP and its partners turned to this work because of our long-standing commitment to health justice and engagement with the institutions and policies, including law, that affect how health and ill-health are distributed in our society. Journalistic work influences the policies and laws that govern people’s lives, affect their health and well-being, and safeguard their rights, especially when reporting touches on stigmatized issues such as drug use and harm reduction. Media professionals’ work can exacerbate or mitigate structural stigma, defined as the “societal-level conditions, cultural norms, and institutional policies that constrain the opportunities, resources, and well-being of the stigmatized.” Journalists speak to both the public and policymakers, which in turn gives them power over which issues are prioritized in policies and programs, and how those issues come to be broadly understood.¹

Additionally, research demonstrates that the media’s portrayal of political and social issues such as drug use significantly influence current public attitudes toward those issues.² Even subtle use of loaded or stigmatizing language in news stories can lead to unintentional or deliberate discrimination by society at large.³ Yet, the opportunity also exists for reporting to help instead of harm: journalists’ writing can change attitudes through careful reporting, including with stories that elevate marginalized voices, raise evidence-based questions that challenge entrenched narratives, and use terms that work against stigma.⁴ At a time when there are competing legislative efforts in Connecticut that both support and oppose the expansion of harm reduction services, the impact that journalistic coverage of substance use has on public perceptions and policy cannot be understated.

This report highlights some of the strengths and gaps in the coverage of this issue by Connecticut’s media environment, and highlights corrective steps that can be taken to reduce stigmatizing reporting and empower the public and policymakers to approach harm reduction equipped with evidence-based information.
Background & Introduction

At a time when communities across Connecticut are experiencing rising overdose deaths and there are competing legislative and advocacy efforts to establish both overdose prevention sites (OPS) and drug-induced homicide laws, there is an urgent need for a framework that assesses and evaluates the presence of substance use stigma and misinformation in Connecticut-based journalistic media. People who use drugs (PWUD) continue to face widespread stigma. Studies show that Americans hold more significantly negative attitudes towards substance use than other mental health disorders, often moralizing the condition by citing personal responsibility. The effects of stigma often present in the form of poor health, with many PWUD choosing to disengage with the healthcare system for fear of shame or judgment; of those with moderate to severe substance use disorder, less than twenty percent receive treatment. Effects of disengaging with the healthcare system include exacerbation of comorbidities, including infectious disease, cardiac conditions and mental conditions.

Beyond its effects on individuals, stigma at a societal level heavily affects policy, which in turn presents barriers to the health and rights of PWUD. For instance, a national survey examining perceptions of PWUD found that respondents were more than twice as likely to oppose insurance equality for PWUD compared to people suffering from mental illness, while also being more likely to oppose government spending for drug treatment programs or job support programs for those experiencing addiction. For this reason, understanding the elements contributing to the formation of public opinion becomes central to efforts to diminish stigma against PWUD. Specifically, media portrayal of substance use and addiction in America has been documented to have a significant impact in shaping public attitudes regarding issues such as drug use. Stigma is often perpetuated through derogatory language that frames PWUD as criminal, dangerous, and self-destructive, and in doing so undermines healthcare delivery for this population.

Stigma may be further exacerbated by inaccurate reporting by media outlets from which individuals receive their information. Independently, misinformation – such as inaccurate interpretations of research studies or non-evidence-based statements of substance use disorder pathology or treatment – published in media outlets have the ability to shape faulty understandings of issues surrounding drug use for lay people as well as policy makers. These inaccurate bases then have the potential to both negatively affect community efforts and opinions, as well as to lend itself to support efforts of anti-drug use organizations in spreading myths surrounding substance use. Given the central role that journalistic media can play in disseminating misinformation or good information, and alleviating or removing stigma, its role in shaping laws, policies, and support towards evidence-based harm reduction solutions to the overdose crisis cannot be understated.

In the present study, we begin to explore views of the effects of local Connecticut-based media outlets in regard to how their coverage relates to the perpetuation of stigma connected to substance use disorder, addiction, and harm reduction. This study focuses specifically on a survey of harm reductionists and PWUD, as they are directly involved or affected by substance use, addiction, and harm reduction and would thus have important insights on how journalistic coverage of these topics affects service provision and public attitudes. We did not carry out a survey with the general public or policy makers, although information on their viewpoints and experiences will be important to track as well. The following report summarizes key results and themes that emerged from a survey conducted by the Yale Global Health Justice Partnership in Fall 2022. We hope that these results provide a snapshot of the state of Connecticut-based media and aid in the construction of a framework that evaluates media outlets’ role in disseminating information or misinformation, and increasing or decreasing stigma on substance use and harm reduction.
Methods - Survey Development & Distribution

From October 13th until November 4th, 2022, the Yale Global Health Justice Partnership (GHJP) disseminated a survey with the purpose of assessing views on the presence of misinformation and stigma surrounding substance use and harm reduction in Connecticut-based journalistic media. The survey, which contained a mix of open-ended and multiple-choice questions, was developed by members of a student team from the Yale Global Health Justice Partnership practicum with advising from members of the Connecticut Harm Reduction Alliance (CTHRA), the Sex Workers and Allies Network (SWAN), and the Yale Program in Addiction Medicine. Representatives from these groups introduced and presented plans for the survey to the Statewide Harm Reduction Action Group and the Connecticut Harm Reduction Working Group, two state-wide networks of harm reduction practitioners and advocates, for feedback.

The survey was mainly distributed through flyers in New Haven, posted in community centers such as libraries as well as centers for substance use disorder treatment such as the APT Foundation. Email listservs of harm reduction providers and action groups, public health students and scholars, and addiction medicine groups across Connecticut were also utilized to distribute surveys. Both flyers and surveys were offered in English only. Harm reduction providers included healthcare workers working with populations of PWUD, affiliated case managers or social workers, street outreach groups, and suppliers of services such as syringe access programs and naloxone distributors, amongst others. Additional efforts were made during street harm reduction and homeless relief outreach to extend the reach of the survey. Participants responded to the self-directed survey using Qualtrics, which did not record any identifiable information and allowed participants to skip questions at any time. To access the survey, potential participants had to read and consent to the project’s research information sheet. Participants were not compensated for their participation.

Results

Respondent Identification

69 respondents filled the survey.

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<th>Question 1: I am a(n) (choose as many as apply)</th>
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Out of all 69 survey respondents, the most popular (not mutually exclusive) identifiers were:

- Friend or loved one of an individual with a prior history of drug use: 18 (26.1%)
- Friend or loved one of an individual who has experienced overdose: 17 (24.6%)
- Harm reduction service provider: 17 (24.7%)
- Individual with prior history of drug use or current drug use: 13 (18.9%)
- Case manager or social worker: 7 (10.1%)
- Mental health professional: 6 (8.7%)
- Medical provider: 4 (5.8%)
- Individual who has experienced overdose: 2 (2.9%)

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1 This research project was reviewed by and received an exemption from the Yale Internal Review Board (IRB Protocol #2000033751).
Media Platforms

Question 2: What media platforms do you usually use to get your information about drug use, substance use disorder (SUD), overdose, and harm reduction in Connecticut?

The most popular (not mutually exclusive) media sources were:

**Newspapers**
- Hartford Courant: 10
- CT mirror: 8
- New Haven Independent: 5
- Register Citizen: 3
- Waterbury Republican (now The Republican-American): 2
- New Haven Register: 2
- The CT Post: 1
- Norwich Bulletin: 1
- Willimantic Chronicle: 1
- The Patch: 1
- New London Day: 1
- Danbury News Times: 1
- DoingItLocal: 1
- Other: 3

**Televised News**
- News Channel 8: 2
- WFSB: 1
- WWIT: 1
- WTNH: 1
- Fox 61 News: 1
- NBC: 1
- CNN: 1
- Other: 4

**Radio**
- Public Radio: 1
- NPR: 1
- PBS News Hours: 1

**Other**
- Google/Internet: 2
- E-mail: 1
- Social Media (Instagram, Twitter, Facebook, TikTok, YouTube): 11
- Public Health Agencies & Organizations (CDC, DPH, NHRC, OCME, SEOW, NIDA): 3
- Statista: 1
- Peer-reviewed Journals: 1
- None/Does not watch the news: 2
Impact of Connecticut-Based Media Coverage

Question 3: What has been the impact of Connecticut-based media coverage about drug use, substance use disorders (SUD), overdose, and harm reduction on your life and/or community?

Some respondents noted that CT-based media coverage of harm reduction has had a positive impact by “increasing knowledge,” “increasing visibility of the issue and positive solutions,” and “bringing attention to the overdose crisis.” For instance, one respondent noted that media coverage about the overdose crisis led to all schools in their child’s district to start carrying naloxone. One respondent also pointed out “thoughtful articles about innovative treatment programs and changes to legislation.” Finally, another respondent noted that Connecticut media has led them to “know about services out there, events worth attending, and agencies who are doing good work.”

However, most respondents reported that CT-based media has had a negative impact by promoting stigma and misinformation regarding substance use. Participants made note of “stigmatizing language,” a “minimum” or “overly simplistic coverage” of harm reduction, “mostly disheartening” substance use coverage, or coverage that “feeds the stigma that addicts are bad people” or otherwise “creates stigma and misunderstanding.” One respondent noted that stigma from the media “prevents people from getting access to care and funding and resources getting allotted to the spaces that need it most.” Another participant pointed at media fearmongering through “headlines that scare people.” A respondent also noted that “Connecticut’s media has not done a great job at properly informing people about the benefits of harm reduction programs and the theory behind it.” Finally, another respondent noted that CT-based media has been “spreading myths” such as those of “fentanyl overdose by touch” or “colorful fentanyl marketed to kids.”

A key theme emerged from the survey’s results was a perceived tendency of Connecticut-based media to provide widely varying viewpoints on harm reduction initiatives, regardless of scientific evidence. For instance, a respondent noted that CT-based media puts “too much effort to provide balance between opposing sides in which one side is supported by evidence and the other isn’t,” which “leads to reluctance to accept and expand workable policies.” Similarly, another respondent noted that CT-based media “rarely centers the voices of people who use drugs or could benefit from harm reduction services” and instead “often centers [the] voices of people who [are] critical.”

Main Problems of Connecticut-Based Media Coverage

Question 4: What do you think are the main problems with how the media reports on drug use, substance use disorder (SUD), overdose, and harm reduction in Connecticut?

Respondents discussed sensationalizing coverage with “common use of stigmatizing language” and misinformation that creates “a lot of confusion and misunderstanding” about substance use and harm reduction. For instance, some respondents mentioned “judgmental and salacious” coverage that is “used as clickbait” and that “serves to alienate people and communities from others.”

A key theme that emerged from survey responses was Connecticut-based media’s tendency to frame substance use as a criminal or law enforcement issue. For instance, some respondents noted “minimal focus on reporting SUD,” not enough coverage about harm reduction services, or reporting that disproportionately focuses on “negative aspects of drug use” or stories about arrests, thereby treating substance use as a “moral or criminal problem” or “law
enforcement issue” rather than a public health issue. One respondent noted the need for “more compassionate” and “less punitive language” that discusses systemic rather than individual causes for the overdose crisis.

Importance of Correcting Problems

**Question 5: Do you feel these problems are important to correct? If so, why?**

Survey respondents universally agreed about the importance of correcting the misinformation and stigma perpetuated by Connecticut-based media, noting that “language used by the media affects how the general public views and discusses the problem” and that not doing so can often have “fatal” consequences. For instance, respondents discussed how “stigma reduction and community engagement are key to addressing the harms of substance use” and that correcting such issues is “essential” and “incredibly important” given that it “will change the trajectory of how our communities think about substance use and harm reduction in the long term, especially [among] those who consume media regularly.”

In the face of rising overdose rates and “people dying daily,” survey respondents noted the importance of addressing stigma that could “discourage people from helping someone during an overdose” and discussed how “the media needs to do a better job to inform the public of the resources to assist.” Similarly, survey respondents discussed how reducing stigma is important to encourage “people to seek help,” “families to gain support and resources, and communities [to] become willing to add services to their towns.” Addressing stigma and misinformation would thus be conducive to people being “treated with respect and compassion and be more inclined to seek help and maintain a better quality of life.”

Ultimately, respondents agreed that “people need to be informed,” that “it would be helpful for the public to know more information on treatment programs,” and that “we will not be able to adequately address rising overdoses and provide better services for people who use drugs without accurate information to base that on.”

Observed Issues in Connecticut-Based Media Coverage

**Question 6: Have you observed any of the following in Connecticut-based media coverage? Please choose all that apply and, if you are able, provide examples in the space next to the question.**

Out of the 69 survey responses, the nine most prevalent issues that participants identified were:

- Not including the voices of people actively using drugs and/or people with SUD: 30 (43.48%)
- Lack of harm reduction coverage: 27 (39.13%)
- Stigmatizing language surrounding PWUD: 24 (34.78%)
- Blaming those with substance use disorders for their drug use: 22 (31.88%)
- Misinformation about fentanyl and/or fentanyl exposure: 22 (31.88%)
- Misinformation and stigma around medications and/or treatment services for SUD: 21 (30.43%)
- Myths surrounding syringe service programs and/or SUD programs: 19 (27.54%)
- Misinformation about naloxone/narcan: 17 (24.64%)
- Inappropriate photos: 15 (21.74%)
**Portrayal of PWUD**

**Question 7: How does Connecticut-based media portray PWUD?**

Survey respondents discussed how Connecticut-based media “negatively” and “poorly” portrays drug users and depicts them as “dirty people, law breakers,” “bums,” “addicts,” “criminals,” “irresponsible,” “the lowest of society,” “stupid, bad, negative, ignorant, destitute, lacking,” “dredges of society,” or otherwise as “less than, unproductive members of our community.” This stigmatizing coverage dehumanizes PWUD and frames them as “morally failed and undeserving” and “at fault for systems’ failures.” One respondent, for instance, noted “many times they [media outlets] don’t even show people. If they do it is people standing on corners, needles, etc.,” while another commented on photos showing PWUD to be “dirty.” Another respondent echoed the sentiment of stigmatizing photography usage, citing the images of needles, pills, and police in HAZMAT suits responding to overdoses to be the main issue with reporting on drug use.

Some respondents noted that “we are moving in the right direction,” that coverage “can often be right-minded,” and that “stories around specific outreach days” can be “generally positive.” Nonetheless, respondents also noted that “we have a long way to go,” that “people who struggle with addiction disorders are still not treated well in general,” and that “we can bring compassion and education.” They also emphasized the need to discuss “the mental health behind addiction.” As it was mentioned in responses from previous questions, some respondents also pointed at how Connecticut-based media disproportionately covers the negative aspects of drug use, “with deaths and crime taking up much of the media space.”

**Issues Not Covered by Connecticut-Based Media**

**Question 8:** Are the important people or issues related to drug use, substance use disorder (SUD), overdose, and harm reduction that you think are not covered by Connecticut-based media?

When discussing issues or narratives that are not covered by Connecticut-based media, respondents argued that there needs to be a greater focus on “how harm reduction works” and how it “has reduced deaths, crime, and long-term drug use.” For instance, one respondent noted that media portrayals can emphasize how harm reduction leads to “less fatal overdoses, infections, [and] less needles discarded improperly,” how “relationships based on trust can be made,” and that “loving people where they are can bridge them over to a better life choice.” Similarly, respondents also discussed how Connecticut-based media could have a greater role in promoting harm reduction services such as medications for opioid use disorder and overdose prevention sites. One respondent also noted that “news media should have a list of different organizations that cover addiction and [include] their contact number on the news page and their website.”

Respondents underscored the need for Connecticut-based media to de-stigmatize drug use by “accepting that it is within every community not just urban areas,” that “many people [who use drugs] are active in their communities (working, parents, students) and “keep their use hidden,” and that “the person isn’t to blame for their addiction and that treatment is out there.” One participant, for example, noted how “the average drug user…is not exactly what most of us would consider a user” given that media outlets tend to associate drug use with homelessness or with “someone
at their lowest,” rather than with “doctors, construction workers, office workers, [or] people with children and full-on functioning families who may or may not know about their usage.”

Furthermore, respondents argued that Connecticut-based media could benefit from centering the voices of “people with lived experience” and “real stories of real people,” as well as “their contributions to society, and successful and/or realistic stories of recovery.” According to participants, media outlets could also benefit from covering narratives of recovery, such as “the success stories of people coming off of drugs and living a healthy and productive life” and the “successes [of] relative to early SBIRT,” (Screening, Brief Intervention, and Referral to Treatment) while also being mindful of how the “treatment system is broken.” Respondents also discussed the need for Connecticut-based media coverage to focus on systemic issues that shape substance use and addiction, such as “the intersection of homelessness and drug use, and the ways both are criminalized,” “the school-to-prison pipeline,” “the correlation between depression and substance use,” the “importance of addressing mental health issues,” and the ways in which “addiction is one of many social issues that [can] stem from poverty,” “trauma,” or “economic loss.”

Finally, respondents also discussed the role Connecticut-based media can take in speaking on important issues surrounding drug use, such as correcting myths about fentanyl exposure, as well discussing the “rise in drug contaminants like benzos and xylazine.” For instance, one respondent noted the importance of a “safe supply” and how the “true dangers of fentanyl [stem from] not being able to be adequately dosed,” referring to the unknown quantity of fentanyl present in the opioid supply making it difficult for PWUD to estimate safe amounts of drugs to consume. Other respondents similarly noted how fentanyl and naloxone are “not covered correctly,” urging media outlets to cover “the truth about fentanyl.”

**Ideas for other ways forward**

**Question 9: Is there anything else you would like to share with us about media reporting on drug use, substance use disorder (SUD), overdose, and/or harm reduction services in Connecticut?**

Some participants made note of the potential for the media to “help us” address rising overdoses and its role as a “key tool to share important information when used correctly.” Participants highlighted the need for Connecticut-based media to use a “multi-faceted approach” to news coverage, one that is “not just numbers or police blotters,” and stressed the importance of “compassionate” and “correct” language that avoids sensationalizing drug use. Similarly, participants mentioned the need for coverage that accurately explains harm reduction and does not talk about drug use through a criminal legal lens. One participant, for instance, noted the importance of correctly reporting on the dangers of fentanyl without falling into out-of-context stories that talk about drug confiscations, noting the minimal impact that these have on street availability and the adulteration of the illicit drug supply.

Some participants discussed the need for “more educated journalists,” underscoring the importance of journalists with “lived experiences” with drug use who could talk about their own stories. With the increasing legalization of recreational cannabis across the US, one participant also discussed the value of questioning the scheduling of drugs altogether and the need for coverage that focuses on “examples of harm reduction efforts in other locales,” such as “safe supply programs in Canada” and “OPS operations in other states.”
Disaggregated Survey Results

Generally speaking, all disaggregated groups of respondents had similarities in regard to sources of news, with proportionately the same ratio of individuals utilizing largely the same media outlets between groups. This was true between the total pool of respondents, PWUD, and harm reductionists including people in harm reduction work, first responders, case managers and social workers, and medical providers. It was noted that among providers, a small number of individuals had chosen to disengage from local media outlets altogether, opting to read peer-reviewed academic journal articles or filtered stories disseminated via specific coalition groups instead.

Both PWUD and providers reported a majority of Connecticut-based media coverage to have a negative impact, noting stigmatizing language, lack of harm reduction coverage, and failure to include voices of PWUD to be the most significant issues in reporting. While providers were more likely to emphasize the impact of fentanyl misinformation, PWUD spotlighted blame of those with substance use disorders for their drug use to be a major issue. Both groups spoke for the need to cover systemic factors contributing to addiction, including the carceral system and policies contributing to the rise in contaminants and adulteration of the illicit drug supply.

Discussion

Survey respondents discussed the lack of harm reduction coverage and the lack of voices of PWUD in substance use media coverage by Connecticut-based media. Amid rising overdoses in Connecticut, these results underscore the urgency for more media coverage on harm reduction, which could mitigate stigma surrounding substance use, increase public support for key services, and help connect people with essential life-saving resources. A 2021 study conducted in Canada – in many ways a pioneer and leader in the provision of harm reduction services – shows that “greater media exposure” to harm reduction as a practice is “associated with lesser stigmatized attitudes toward PWUD,” which in turn is “associated with greater support for harm reduction.”

By taking an active role in the coverage of harm reduction, Connecticut-based media can positively impact public perceptions of harm reduction; this shift in perception could allow for constructive engagement with new policies and programs, such as the establishment of key evidence-based services like Overdose Prevention Sites (OPS).

Some respondents also discussed that they use social media as their main source of information on substance use and harm reduction. This is a cause of concern given that content analysis studies have shown that the “majority of drug-related messages” on these platforms contain “potentially misleading or false claims that lacked credible evidence to support them.” Moreover, social media-based misinformation has been identified as a critical barrier to the uptake of essential harm reduction strategies like medication for opioid use disorder (MOUD).

Moreover, our survey results highlight the tendency of Connecticut-based media to platform ill-informed or non-evidence-based critiques of harm reduction to the same extent as evidence-based public health strategies. This tendency, which has previously been characterized as “both side-ism,” has negatively impacted public perceptions of harm reduction: both side-ism is a practice which presents arguments as if equally supported by similar evidence, without acknowledging the values undergirding certain arguments, lack of scientific legitimacy for particular positions, or other limitations in the presentation of information, such as biased or shoddy fact-checking.
Some of the limitations of this study include the fact that the survey was exclusively conducted in English, thus limiting its reach and access among non-English speakers in Connecticut. Consequently, respondents only referred to media sources in English in their answers; coverage by media sources in other languages remains unexplored. Moreover, while the specific objective of this survey was to survey harm reductionists and PWUD, it is important to note that these populations are probably more sensitive and perceptive of negative reporting on substance use compared to the general population. Additionally, surveys were largely distributed via service-connected networks; therefore, the voices of PWUD who were not connected to provider services in Connecticut were potentially not as well represented as those who are. Lastly, takeaways from survey responses are relevant to practices in Connecticut media, and therefore cannot be generalized to all media outlets nationally.

Conclusions & Future Directions

In summary, key themes and takeaways from the survey, concerning perceptions of stigma and misinformation in Connecticut media include:

- Connecticut-based media disproportionately focuses on the negative aspects of drug use, often stigmatizing, stereotyping, and dehumanizing PWUD
- Connecticut-based media has a tendency to frame substance use as a criminal-legal issue, often through the disproportionate coverage of stories of arrests
- Connecticut-based media has a tendency to "balance" evidence-based public health perspectives on harm reduction with viewpoints that are often ill-informed or contain false information on harm reduction, which ultimately negatively impacts the provision and perception of harm reduction services
- Connecticut-based media should further its efforts to include stories and voices of PWUD, and avoid moralization when reporting on issues related to drug use

As identified and discussed by survey respondents, such stigma and misinformation negatively impact the lives of people who use drugs, harm reduction service provision, and community health. Current Connecticut law, policy and programming reflect many of these deficiencies. In response to these issues in substance use coverage, Connecticut-based media could have a greater and more constructive role in accurately covering harm reduction services, correcting myths and misinformation surrounding drug use, discussing systemic issues that shape substance use and addiction and centering the voices of people with lived experiences in their coverage of substance use.

Based on the results of this survey, future research should engage in an in-depth analysis of coverage by local media outlets, identifying specific instances of stigmatization and misinformation and generating concrete recommendations to address journalistic practices. Further work should be done to engage local media outlets and journalists in conversations about best practices and current shortcomings of media coverage on these issues.
References


