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Title: 'Framing Addiction: Media Representations And The Impact On Societal Perceptions In Glasgow, Scotland (2019–2025)'.

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Executive Summary

Why This Research Matters:

Between 2019 and 2025, Glasgow experienced a deepening public health crisis linked to drug-related deaths and the growing stigma surrounding addiction. Often referred to as the “*Drug Capital of Europe*”, Glasgow has consistently recorded the highest number of drug-related deaths in Scotland, a trend reflecting both systemic failures and social despair. During this period, media headlines, political commentary, and public debates significantly influenced how the public understands addiction and perceives people who use drugs (PWUDs). This research examines how the media frames addiction in Glasgow and how these portrayals impact public attitudes, policy decisions, and the lived experiences of those affected.

What I Asked:

The central question was:

“How does the media in Glasgow portray addiction and its consequences?”

Three sub-questions guided the research:

- 1. “What are the dominant media narratives around addiction?”***
- 2. “How do these narratives influence public perception and stigma?”***
- 3. “How can we respond through community development?”***

What I Did:

To explore how addiction is portrayed in Glasgow’s media from 2019 to 2025, I conducted qualitative research guided by a critical interpretivist paradigm. This means I examined not only what the media says, but also how power, stigma, and meaning are shaped through language and public narratives.

I employed Critical Discourse Analysis (CDA) and Thematic Analysis (TA) to analyse a broad range of newspaper articles, reports, and headlines. These methods helped identify how the media frames addiction, who gets to speak, and how this influences public opinion and policy decisions.

The research aimed to centre lived experience, challenge stigma, and highlight the gap between public perceptions and compassionate, community-based solutions to drug use.

The Analysis & Discussion were informed by Theorists such as:

- Antonio Gramsci – on power and cultural dominance.

- Erving Goffman – on stigma and spoiled identity.
- Imogen Tyler – on social abjection.
- Michel Foucault – on media, surveillance, and social control.
- Paulo Freire – on the importance of critical dialogue and resistance.

What I Found:

Stigmatising Portrayals Dominate. Glasgow media often depicted people who use drugs as dangerous, criminal, or morally weak. Words like “*junkie*” and “*zombie*” were common, reinforcing fear and blame.

Lived Experience Is Often Silenced. Politicians and police voices were prioritised, while people in recovery or with lived experience were rarely included.

Public Support for Harm Reduction is Undermined. Sensationalist headlines created public opposition to life-saving interventions like Drug Consumption Rooms (DCRs), even when international evidence supports them.

Alternative Narratives Are Emerging. Investigative journalism, film, and grassroots storytelling are starting to challenge stigma by humanising addiction and offering new ways of thinking about PWUDs, recovery and justice.

What This Means:

Media coverage is not just information; it’s an extension of power, and how addiction is framed shapes how society treats those affected by it.

These stories influence whether policies punish or support individuals, whether services are easily accessible, and whether people feel safe asking for help.

Shifting the narrative is essential for meaningful social change.

What I Recommend:

Media Literacy for All: Equip communities, young people, and frontline workers with the tools to critically assess addiction-related media.

Support for Lived Experience Voices: Media and community groups should include people with lived experience in storytelling and reporting.

Policy Change Through Narrative Shift: Advocates, journalists, and recovery organisations must work together to promote trauma-informed, public health-based messaging.

Amplify Counter-Narratives: Invest in grassroots and recovery-led media that centres dignity, context, and complexity.

Acknowledgements

This dissertation is dedicated to the recovery community, to every individual who has felt the weight of stigma, fought to be heard, and persisted despite the odds. Your courage, resilience, and humanity are at the heart of this work.

I want to thank the individuals in recovery who have shared their experiences with me over the years, both in workshops and during conversations and community gatherings. Your voices have shaped the questions I asked and the values I carried into this research.

To my academic supervisors, lecturers, and the University of Glasgow's Community Development team, thank you for providing the space, inspiration, and critical dialogue needed to pursue this project. Your support has kept me grounded and focused.

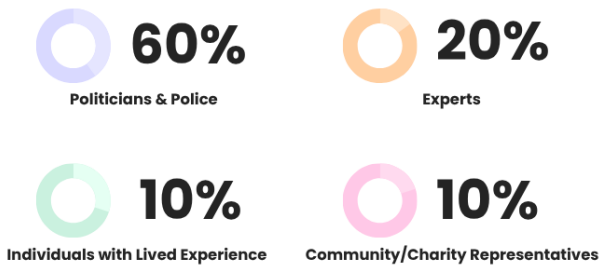
My gratitude also extends to those who amplify lived experience in their work, journalists, practitioners, educators, activists, and policy influencers. Your contributions are integral to the change this research seeks to support.

Finally, to my beautiful partner, Kirsty, dear friends, and my wonderful son, Sebastián - thank you for believing in me and reminding me why the dominant narrative surrounding addiction MUST change. I also want to thank EVERYONE who has walked alongside me in my recovery journey; your support, honesty, and compassion made this possible.

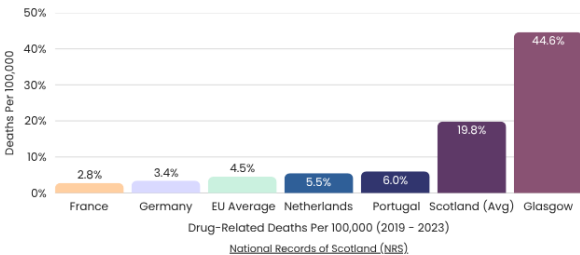
Infographic Data

Each visual emphasises how media discourse influences public perception, policy responses, and the lived experiences of people who use drugs (PWUDs) in Glasgow and beyond. From the cyclical nature of stigma to the imbalance in media representation, these graphics illustrate both the challenges and opportunities for narrative change.

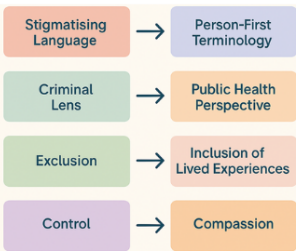
Media Voice Distribution



Drug Death Comparison: Scotland/Glasgow vs. Europe



Narrative Reframing Flow



The Stigma Cycle



These visuals support advocacy, conversation, and education. By challenging harmful narratives and illustrating the effects of inequality, they encourage more compassionate, evidence-based responses to drug use. The aim is to reframe addiction as a social issue, one that requires empathy, reform, and lived experience at its core.

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Contents

Chapter 1. Introduction.....	10
1.1 Framing the Issue.....	10
1.2 Background and Context.....	10
1.3 The Role of Media and Discourse	11
1.4 Theoretical Framework	12
1.5 Research Aims and Questions.....	12
1.6 Structure of the Dissertation	13
1.7 Summary	13
Chapter 2. Research Design and Methodology	15
2.1 Introduction	15
2.2 Research Paradigm.....	15
2.3 Data Collection and Sampling.....	16
2.4 Ethical Considerations	17
2.5 Data Analysis Procedures	17
2.6 Justification of Methodological Choices.....	18
2.7 Limitations of the Study	19
2.8 Summary	19
Chapter 3. Extended Literature Review.....	21
3.1 Introduction	21
3.2 Criminal Framing of Addiction and Its Interaction with Morality.....	21
3.3 The Dehumanisation of People Who Use Drugs (PWUD)	24
3.4 Power Dynamics.....	26
3.5 The Political Economy of Media and Stigma	28
3.6 The Historical Impact of Media on Drug Policy	30
3.7 Challenging Dominant Narratives through Film and Journalism.....	32
3.8 Gaps, Limitations, and Future Research Applications	34
4.1 Media Narratives: Framing Addiction as Crime and Moral Failure	37
4.2 Public Perceptions, Policy, and Power.....	39
4.3 Dehumanisation and Its Consequences	40
4.4 Power, Absence, and the Politics of Representation	40
4.5 The Political Economy of Media and the Entrepreneurship of Stigma	41
4.6 Alternative and Counter-Narratives: Opportunity for Change.....	43
4.7 Historical Continuity: Why Narratives Persist	44

4.8 Summary 45

Chapter 5. Conclusion 46

5.1 Summary of Key Findings 46

5.2 Deductions and Contributions 47

5.3 Recommendations for Further Research 48

5.4 Recommendations for Advocacy, Policy, and Community Response 49

5.5 Final Reflections..... 50

Reference List 52

Annexe A..... 67

Chapter 1. Introduction

1.1 Framing the Issue

Despite its complex roots in biology, psychology, and sociological context, addiction is frequently reduced to simplistic narratives by the media, shaping public perception and policy. Throughout this study, I will use the terms ‘addiction’ and ‘drug use’ interchangeably, acknowledging that while ‘addiction’ is widely used, it can be stigmatising. Where appropriate, I aim to use language that promotes dignity and reflects a person-centred, harm reduction perspective (see Annexe A).

In Scotland, particularly in Glasgow, drug-related harm has remained critically high, with the city consistently recording the highest rate of drug misuse deaths nationwide (NRS, 2024). This dissertation focuses on the period between 2019 and 2025, a time marked by escalating drug deaths, increased public debate over harm reduction, and heightened media coverage of Scotland’s so-called ‘drug crisis’ (BBC Scotland, 2021). Analysing media representations across these six years offers a unique opportunity to examine how narratives have evolved and how they may have influenced public perceptions and policy responses.

This dissertation is titled: *‘Framing Addiction: Media Representations and The Impact on Societal Perceptions in Glasgow, Scotland (2019–2025).’*

1.2 Background and Context

My own experience with addiction and recovery has ignited a passion within me to conduct this research and contribute to a greater understanding. Having shared my

story through multiple media outlets, including radio, television, and newspapers, I have witnessed firsthand how media portrayals shape public discourse by reinforcing stigma, influencing policy, and creating barriers to support for those in recovery.

Understanding how addiction is portrayed in the media is particularly relevant to community development practice focused on social justice, participation, and structural change. Media narratives influence not only public opinion but also policy decisions, funding priorities, and the level of stigma experienced in local communities and among individuals who use drugs and are in recovery. Being critically aware of these representations is essential for practitioners to develop inclusive, trauma-informed approaches that challenge marginalisation and support recovery. This research aims to contribute to these efforts by examining how media discourse influences societal responses to drug use and exploring how community development can support the reframing of those narratives.

1.3 The Role of Media and Discourse

The media significantly influences public discourse, often simplifying complex issues into moral binaries of blame and punishment. This tactic is driven by the need to attract attention, generate profit, and align with dominant political ideologies.

McGinty et al. (2019) demonstrate how addiction is frequently framed as a moral failing or criminal act, reinforcing stigma and marginalisation. Habib et al. (2023) similarly highlight how dehumanising language in the media reduces empathy and fosters social exclusion. These narratives often drive punitive policy responses, diverting attention from harm reduction and recovery-based approaches (Nielsen & Bonn, 2008).

1.4 Theoretical Framework

This research is grounded in a critical theoretical framework that seeks to challenge dominant ideologies, interrogate power structures, and uncover the social processes through which addiction is framed in the media. Goffman's (1963) stigma theory provides insight into how individuals are marked and excluded in public discourse. Tyler (2013) expands on this by exploring the role of stigma in maintaining structural inequalities. Freire's (1970) critical pedagogy underpins the study's commitment to challenging dominant narratives through dialogue and consciousness-raising. Gramsci's (1971) concept of cultural hegemony helps explain how dominant ideologies are reproduced in media, while Foucault's (1977) theory of power and discourse examines how knowledge is constructed and sustained through language and media representation.

1.5 Research Aims and Questions

This study aims to critically examine media portrayals of addiction in Glasgow between 2019 and 2025, analysing how these narratives shape public perception and influence responses to drug use. Through primary and sub-questions, it asks:

Primary Research Question:

- *How does the media in Glasgow portray addiction and the consequences?*

Sub-questions:

- *What is the media's narrative of addiction?*
- *What impact does this have on societal perceptions?*
- *How do we respond to this using a community development approach?*

Through this inquiry, the research aims to identify strategies for disrupting stigmatising narratives and promoting more compassionate, evidence-based approaches to addiction.

1.6 Structure of the Dissertation

This dissertation is organised into five chapters:

1. Introduction: Introduces the research topic, background, and guiding questions.
2. Research Design and Methodology: Outlines the study's qualitative, critical interpretivist approach, including methods and ethical considerations.
3. Extended Literature Review: Critically examines academic literature on media, addiction, stigma, and harm reduction.
4. Findings, Analysis and Discussion: Interprets the findings, connecting them to theory and community development practice.
5. Conclusion: Summarises the research, reflects on limitations and offers recommendations for future study and practice.

1.7 Summary

In summary, this dissertation examines how addiction is portrayed in Glasgow media and the consequences these portrayals have for public perception, stigma, and policy. It contributes to a growing body of work that seeks to challenge dominant, punitive narratives and advocate for more compassionate, evidence-based approaches to addiction. This research highlights the significance of community-based responses that foster inclusion, recovery, and structural transformation

through a critical analysis of media discourse. The following chapter outlines the Research Design and Methodology, including the theoretical framework, analytical approach, and ethical considerations that guide this study.

Chapter 2. Research Design and Methodology

2.1 Introduction

This chapter outlines the qualitative research design that underpins this study, detailing the philosophical orientation, methodological approach, and analytical tools used to explore media portrayals of drug use in Glasgow between 2019 and 2025. Explaining the rationale for adopting a critical interpretivist paradigm, describing the data collection and sampling process, and outlining the use of Thematic Analysis (TA) and Critical Discourse Analysis (CDA) as complementary tools. This chapter also addresses key ethical considerations, researcher reflexivity, and study limitations, providing a transparent account of how the research was designed and implemented.

2.2 Research Paradigm

Adopting a critical interpretivist paradigm, this study examines how addiction narratives are socially constructed and maintained through media discourse and how these narratives reflect and reinforce power, stigma, and community responses. The paradigm combines interpretivism, which seeks to understand meaning-making in social contexts (Bryman, 2012), with critical theory, which interrogates how discourse is shaped by ideology and power (Hall, 1980).

This approach aligns with an inductive strategy, allowing patterns to emerge from the data (Denscombe, 2007). This methodology is based on the view that reality is not fixed or objective but is shaped by social and cultural influences (Creswell & Poth, 2018). From an interpretivist perspective, knowledge is not simply discovered; it is created through the meanings people and institutions give to the world around them.

In this study, media representations are viewed not as neutral facts, but as shaped by social and political values (Fairclough, 1995).

2.3 Data Collection and Sampling

The dataset included media articles published between 2019 and 2025 in Glasgow-based media outlets, including BBC News Scotland, The Ferrett, The Scottish Daily Express, The Scottish Sun, The Daily Record, and The Daily Mail. This period captured heightened political and public discourse around drug-related deaths, harm reduction debates, and Glasgow's ongoing crisis (Atkinson et al., 2019; NRS, 2023).

Inclusion criteria:

- Articles published between 2019 and 2025.
- Coverage relating to addiction, drug use, or harm reduction in Glasgow.
- Articles referencing visible drug use or policy discussions.
- A balance of tabloid and broadsheet sources reflecting diverse political views.

Exclusion criteria:

- Articles solely about alcohol or drug use in international contexts.
- Duplicated or syndicated stories
- Opinion pieces were excluded if they lacked supporting evidence, unless they influenced public debate. (While this study recognises that all media carry bias, articles were included if they reflected broader narratives or contributed meaningfully to public discourse.)

To mitigate bias, purposive sampling included a variety of journalistic styles, ranging from sensationalist tabloids to mainstream broadsheets. This ensured a cross-section of the narratives influencing public perception and political discourse.

2.4 Ethical Considerations

The research was guided by the principles of respect, non-maleficence, and integrity (Guillemin & Gillam, 2004). Although the study relied on publicly available media content, ethical care was taken to avoid reproducing stigma, and excerpts were selected carefully (Flick, 2011). Inclusion and exclusion criteria were applied to prevent sensationalism and ensure the ethical relevance of the study.

The study also considered the ethical implications of presenting data. Language that could reinforce negative stereotypes was approached cautiously, and the analysis remained critically engaged with issues of representation, stigma, and harm. Given my lived experiences of addiction and recovery, reflexivity, supported by journaling and critical self-reflection, was employed to maintain ethical rigour throughout this research project (Finlay, 2002).

2.5 Data Analysis Procedures

The study used TA as the primary method, guided by Braun and Clarke's (2006) six-phase framework:

1. Familiarisation: Articles were reviewed repeatedly to identify early patterns.
2. Coding: The data was inductively coded for recurrent language, narratives, and tone, particularly about stigma, policy, and media framing.
3. Generating Themes: Codes were clustered into early theme candidates.
4. Reviewing Themes: Themes were tested for consistency and relevance across sources.

5. Defining and Naming Themes: Criminalisation, dehumanisation, policy resistance, and counter-narratives were clearly defined.
6. Reporting: The Extended Literature Review and Findings, Analysis & Discussion chapters presented the final themes supported by relevant examples.

While TA allowed themes to emerge organically, elements of CDA (Fairclough, 1995) were utilised to interrogate how media language reflected broader ideologies. CDA helped identify how power and stigma were embedded within linguistic structures, particularly in the portrayal of people who use drugs (PWUDs) as threats or morally deviant. While TA highlighted the emerging themes, CDA explored how they were constructed and whose interests they served.

2.6 Justification of Methodological Choices

The combination of TA and CDA supported the study's critical focus on meaning, power, and representation. Both methods have been effectively used in prior addiction and media research (McGinty et al., 2019; Habib et al., 2023), particularly in exploring how stigma is produced and sustained. Their combined use enabled a robust analysis of the language and underlying messages in media coverage, illustrating how public views and policy decisions are influenced.

A qualitative and inductive design was suitable for unpacking social meaning, especially in understanding how drug use is communicated, contested, and understood in different media contexts.

2.7 Limitations of the Study

This study acknowledges multiple limitations:

- **Geographical Focus:** The study focuses on Glasgow-based media, which may limit generalisability to broader UK or international contexts.
- **Media Bias:** Media outlets often reflect political or editorial bias (Atkinson et al., 2019). While a range of sources was included to balance perspectives, this may still introduce bias, especially when using highly sensational or politicised coverage. This was considered during the analysis.
- **Researcher Bias:** As with all qualitative research, subjectivity is inherent. However, reflexivity and journaling (Finlay, 2002) were employed to ensure transparency and authenticity.
- **Secondary Data:** The study lacked direct lived-experience voices but offers new insights by re-analysing existing data through a critical lens. Older articles may also be interpreted retrospectively, shaped by changing public opinion.
- **Timeframe:** Restricting the sample from 2019 to 2025 excludes historical developments in media framing.

2.8 Summary

This chapter outlines the study's methodological foundation, including its philosophical stance, data collection strategy, analytical tools, and ethical considerations. By integrating TA and CDA, the research is equipped to critically explore how Glasgow's media shapes societal perceptions of drug use. These methods enable the identification of recurring patterns and the interrogation of power, ideology, and stigma within media discourse, laying the groundwork for

analysing how narratives are constructed and sustained. The following chapter presents an extended review of relevant literature, highlighting key debates and theoretical perspectives that inform this study and frame the subsequent analysis.

Chapter 3. Extended Literature Review

3.1 Introduction

I examined how media narratives between 2019 and 2025 shaped public perceptions of drug use in Glasgow, Scotland, using CDA (Fairclough, 1995) to explore the power dynamics embedded within these portrayals. A preparatory TA (Braun & Clarke, 2006) was utilised to identify key patterns in the literature, such as stigma, criminalisation, and media bias. Together, these methods reveal how discourse affects attitudes, policy, and the lived experiences of PWUDs. Each theme explores a distinct yet interconnected aspect of media representations of addiction in Glasgow. The first theme begins with narratives of criminality and moral failure before addressing the dehumanisation of PWUDs. Transitioning to power dynamics, the political economy of media and stigma, and the historical influence of media on drug policy. Finally, I will examine how alternative media, including film and investigative journalism, can challenge dominant narratives. I will conclude by analysing the gaps, limitations, and prospective future research.

3.2 Criminal Framing of Addiction and Its Interaction with Morality

Media narratives play a significant role in shaping public perceptions of drug use, frequently framing it as criminal behaviour with underlying moral connotations. This emphasis on personal responsibility and law enforcement obscures broader structural factors such as poverty, trauma, and mental health (Lloyd, 2013; Killick & Salter, 2022). While the moral dimension is often implicit rather than explicit, the effect is a narrative that positions drug use as both a legal and ethical failing, limiting public empathy and undermining support for harm reduction strategies (McGinty et al., 2019; Atkinson et al., 2019; Habib et al., 2023). McGinty et al. (2019) highlight

how media coverage often depicts addiction as a personal failing, focusing on individual choices rather than structural drivers. This framing ignores the reality that humans are inherently social and communal beings, whose psychological development is shaped by their environments and relationships (Erikson, 1968; Frosh, 2003). By individualising blame, media narratives obscure the broader social and structural conditions that contribute to drug use, such as poverty, trauma, and exclusion. Yet, evidence shows a strong correlation between disadvantage and substance use, including the Scottish Drugs Forum (SDF, 2021), reporting that people from Scotland’s most deprived areas are 18 times more likely to experience a drug-related death. Public Health Scotland (2023) further states that over 70% of individuals receiving drug treatment have co-occurring mental health conditions, highlighting the link between substance use and psychological distress.

Despite this, systemic causes are often marginalised in media narratives, which sustain stigma and weaken public backing for harm reduction. In Glasgow, Atkinson et al. (2019) reveal how local media prioritise crime and public safety over public health. Their study shows that drug use is frequently associated with anti-social behaviour and violence, reinforcing harmful stereotypes. This framing limits public empathy and shifts policy toward law enforcement instead of public health. For instance, The Scottish Sun (2023) reported on a rise in “*super-strength*” crack cocaine in Glasgow (<https://www.thesun.co.uk/news/33573924/glasgow-drugs-cocaine-heroin/>), focusing on gang violence, machete attacks, and public disorder. Although health concerns were mentioned, the dominant narrative framed PWUDs as threats. This moralised discourse creates resistance to harm reduction interventions like Drug Consumption Rooms (DCRs), which provide supervised

spaces to reduce overdoses and infections (SSA, 2021). Atkinson et al. (2019) show that media portrayals of DCRs as enabling drug use, rather than reducing harm, have influenced public opposition and political resistance.

Media-driven moral panics are not new. Nielsen & Bonn (2008) document how U.S. drug coverage in the 1970s and 1980s shifted from treatment-based narratives to crime-focused rhetoric, fuelling the War on Drugs. When President Nixon labelled drug abuse “*public enemy number one*” in 1971, he invoked militaristic metaphors that cast PWUDs as enemies of the state. These rhetorical choices were strategic: terms like “war,” “enemy,” and “crackdown” carry emotional weight, legitimising punitive responses while silencing more compassionate approaches. Nielsen & Bonn (2008) highlight how the repetition of such terms embedded punitive ideologies into mainstream discourse. As Fairclough (1995) argues, language is a tool of power, its repetition constructs ideology and shapes social response.

This legacy remains embedded in UK media and political discourse, where resistance to decriminalisation and harm reduction persists despite clear evidence of effectiveness (Stevens, 2019; EMCDDA, 2022). Headlines continue to prioritise crime and control while obscuring structural causes like inequality and trauma. For example, The Daily Mail Online (Cotterill, 2025) described Scotland’s drug crisis as a “war zone” (<https://www.dailymail.co.uk/news/article-14493943/scottish-gang-war-firebomb-beauty-salon-edinburgh.html>), echoing Nixon-era metaphors. These narratives appeal to public fear and generate clicks, aligning with commercial interests (McGinty et al., 2019; Anderson, 2021). In this way, the media doesn’t just

reflect public anxiety; it manufactures it. By framing PWUDs as threats instead of individuals in need of support, media narratives entrench stigma, reduce empathy, and hinder the adoption of evidence-based policies.

3.3 The Dehumanisation of People Who Use Drugs (PWUD)

Media narratives often dehumanise PWUDs by portraying them as societal threats, which reduces public empathy and limits support for harm reduction initiatives. This framing reinforces punitive responses rather than compassionate, evidence-based interventions (Habib et al., 2023). Through stigmatising language and imagery, the media strips individuals of agency and identity, presenting them solely through their substance use and reinforcing their status as societal "others" (Atkinson et al., 2019). Labels like "junkie," "addict," and "druggie" frequently appear in coverage, shaping public perceptions of PWUDs as reckless or undeserving. Lloyd (2013) and Brown (2020) demonstrate how these derogatory terms foster stigma and reinforce the view of addiction as a moral failing. Habib et al. (2023) show that such moral framing reduces public support for interventions like DCRs.

In Glasgow, Atkinson et al. (2019) reveal how local media coverage of the city's drug crisis centres on crime and disorder, often misrepresenting DCRs as enabling drug use rather than saving lives. This distorted framing fostered public opposition, despite successful outcomes from DCRs in countries like Canada and Portugal. Beyond language, dehumanising imagery also plays a key role. Habib et al. (2023) found that PWUDs are often depicted dishevelled, unconscious, or engaging in criminal activity, rarely as people with families and struggles. Such visuals intensify associations between drug use and moral decline. For example, tabloids frequently

describe those affected by synthetic drugs like spice as "zombies" (Atkinson et al., 2019), erasing personhood and legitimising punitive policies.

In Glasgow, local outlets often accompany stories with images of public injecting or discarded needles, reinforcing the view of PWUDs as public nuisances. An article in The Scottish Sun (2019) illustrated this with photos of drug use in alleyways (<https://www.thescottishsun.co.uk/news/3495108/glasgow-junkies-needles-millerston-street-east-end/>). Harris & McElrath (2012) argue such imagery frames PWUDs as threats rather than individuals facing complex health and social issues. These portrayals shape policy: when PWUDs are seen as morally deficient, there is less political will for harm reduction. Despite strong evidence of their effectiveness, Atkinson et al. (2019) found that this framing contributed to resistance against DCRs in Glasgow. Repeated exposure to these depictions also fosters internalised stigma, with individuals avoiding healthcare due to fear of judgment (Habib et al., 2023), further marginalising PWUDs and prolonging substance use.

While some media outlets, such as BBC Scotland's (2021) anti-stigma campaign - *"Stop saying junkie' plea to end addiction stigma"* (<https://www.bbc.co.uk/news/uk-scotland-59542090>) or The Ferret's investigative reporting *"How does finding connection prevent drug deaths?"* (Goodwin, 2023) (<https://theferret.scot/the-ferret-investigates-health-gap-episode-two-drug/>) have offered more compassionate portrayals, but these remain rare. This imbalance is significant. The dominance of punitive narratives suggests that the media do not just reflect public attitudes but actively shape them. As Killick & Salter (2022) argue, the exclusion of lived

experience from media discourse sustains stigma and limits support for progressive drug policies.

3.4 Power Dynamics

Media narratives surrounding addiction often reinforce power hierarchies by framing PWUDs as deviant or morally inferior, legitimising punitive responses over public health approaches (McGinty et al., 2019; Atkinson et al., 2019). Crime-focused reporting and stigmatising language shape public discourse and policy, fuelling criminalisation and abstinence-led ideologies that further marginalise PWUDs. In Glasgow, Atkinson et al. (2019) show how coverage of DCRs portrayed them as dangerous and controversial, emphasising crime and public disorder while downplaying benefits such as overdose prevention and improved treatment access. This framing presents PWUDs as threats to community safety, entrenching resistance to harm reduction and preserving policymaker and law enforcement dominance in drug discourse.

A defining feature of this dynamic is the privileging of official voices, politicians, police, and medical professionals, while perspectives of PWUDs are often excluded (McGinty et al., 2019). This silencing reflects a top-down, state-aligned approach that frames addiction as criminal, not medical. Foucault (1977) and Goffman (1963) argue that such framings reinforce control over marginalised groups, portraying them as dangerous rather than needing support. Media narratives legitimise punitive policy and obstruct community-led alternatives by amplifying authority figures and neglecting structural causes.

In Glasgow, media reports on drug-related deaths often rely on police statements, sidelining harm reduction advocates and reinforcing criminal justice narratives (Atkinson et al., 2019). Such portrayals influence public opinion and policy; consistent depictions of PWUDs as threatening or beyond help fuel support for harsher policing and sentencing. This trend mirrors the U.S. crack epidemic, where media panic led to mandatory minimum laws (Beckett, 1997). In the UK, similar portrayals have driven tougher drug policing in cities like Glasgow, despite limited evidence of effectiveness (Atkinson et al., 2019).

Negative framing of DCRS has particularly impacted public perception. Atkinson et al. (2019) found that Glasgow media coverage frequently cast these facilities as enabling drug use and attracting crime, rather than highlighting their proven public health benefits. An article in The Scottish Sun (2025) described a DCR as: *“The controversial ‘fix’ room allows heroin and cocaine users to shoot up without fear of prosecution”* (<https://www.thescottishsun.co.uk/news/14199703/glasgow-heroin-addict-hunter-street-rehab-plea/>). This type of language reinforces the association between drug use and social danger. Media narratives prioritising control and punishment help sustain dominant ideology (Fairclough, 1995). In Glasgow, harm reduction is often framed as risky or enabling, even as evidence from countries like Portugal demonstrates the success of decriminalisation and harm reduction strategies in reducing drug-related harm (Greenwald, 2009; Hughes & Stevens, 2010). As Fairclough (1995) notes, such discourse functions to legitimise existing power structures by normalising punitive responses and marginalising alternative approaches that challenge the status quo.

3.5 The Political Economy of Media and Stigma

Media portrayals of drug use are shaped by commercial and political interests, often prioritising sensationalism, moral panic, and punitive narratives (Boyd, 2002; McGinty et al., 2018). Ownership structures, profit motives, and ideological alignment reinforce stigma against PWUDs. Petley (2012) highlights how corporate media favour profit over accuracy. Anderson (2021) argues that outlets often reflect dominant political ideologies, framing addiction through a criminal justice lens rather than as a health issue.

McGinty et al. (2019) show that fear-driven drug-related stories boost media revenue, especially when linked to violence or social disorder. Beckett & Sasson (2004) found that such reporting increases ratings and circulation. In the UK, McLaughlin (2016) notes that tabloids exploit moral panic to sell papers, often distorting the realities of addiction. Broadsheets may offer more balanced perspectives, but with lower frequency. These editorial choices reflect different economic goals and audience values.

In Glasgow, Atkinson et al. (2019) show how local coverage uses catastrophic language, depicting addiction as a crisis while ignoring structural factors like poverty and trauma. Headlines like *“John Swinney can't guarantee £2.3m 'shooting gallery' will reduce drug deaths”* by the Scottish Daily Express (2025) (<https://www.scottishdailyexpress.co.uk/news/politics/john-swinney-cant-guarantee-23m-34458103>) use stigmatising language that casts PWUDs as threats rather than

individuals in need of care. This sensationalism undermines harm reduction, fuelling public resistance and stalling progressive policy (SSA, 2021).

Political agendas further shape coverage. The media often mirror policymakers' priorities, emphasising law-and-order over health-based responses (McGinty et al., 2019). Atkinson et al. (2019) note that Glasgow media reflected the UK Government's opposition to DCRs, casting them as risky or enabling despite international evidence of effectiveness. For example, *"UK Government rejecting 'fix rooms' in Glasgow 'stands in the way of saving lives'"* - the Daily Record (2019) (<https://www.dailyrecord.co.uk/news/scottish-news/uk-government-rejecting-fix-rooms-20818254>) illustrates how the media reflect political tensions between devolved Scottish health policy and Westminster's control over drug legislation (Scottish Government, 2021).

Media consolidation intensifies these patterns. McGinty et al. (2019) argue that a few corporations dominate news coverage, often promoting punitive perspectives. In Glasgow, major outlets favour abstinence narratives, spotlighting police crackdowns while neglecting grassroots harm reduction efforts (Atkinson et al., 2019). This selective reporting skews public perception, positioning punishment as the default response.

The effects are measurable. McGinty et al. (2019) found that stigmatising media reduced support for harm reduction by 12% compared to health-oriented content. This challenges community development responses, which depend on collective

ownership of narratives and shared solutions. Media-driven fear and division erode the trust necessary to implement compassionate, evidence-based change.

Social media plays a dual role. Platforms like Instagram and TikTok can perpetuate stigma through decontextualised viral content and enable counter-narratives.

Hashtags like #EndTheStigma and #Recovery allow PWUDs to share lived experiences and humanise drug use (Schlosser et al., 2020). While these platforms help reshape public discourse, they also risk spreading misinformation.

Ultimately, the intersection of media economics and political agendas reinforces stigma and blocks harm reduction efforts. Without a systemic shift in how addiction is framed, widespread support for progressive, evidence-based drug policy will remain out of reach.

3.6 The Historical Impact of Media on Drug Policy

Media coverage has long shaped public attitudes and drug policy, often reinforcing punitive responses over evidence-based harm reduction (Nielsen & Bonn, 2008; Seddon, 2021; Atkinson et al., 2019). Early portrayals framed addiction as a health and social issue, but narratives gradually shifted to emphasise criminality and moral failure, aligning with political agendas prioritising law and order. In the 1970s, drug use was commonly seen as a public health concern, leading to treatment-focused policies like the Misuse of Drugs Act 1971 (Seddon, 2021). From the 1980s, however, the rise of neoliberalism saw the media promote punitive strategies, supporting policies such as the Criminal Justice Act 1988, which introduced harsher penalties (Stevens, 2011).

In Glasgow, Atkinson et al. (2019) show how local media have long favoured crime-focused, abstinence-based ideologies over harm reduction. In the 2000s and 2010s, addiction was often framed as a public safety threat, with little attention paid to structural causes such as poverty or trauma. This persisted even as Scotland faced Europe's highest drug death rate from 2018 onwards (Public Health Scotland, 2025). In 2022 alone, 1,051 drug-related deaths were recorded - 19.8 per 100,000, more than three times the UK average, with Glasgow accounting for 311, nearly 30% of the total (NRS, 2023)

Despite the scale of the crisis, coverage often lacked compassion, relying on sensationalist and punitive narratives. Glasgow's heroin crisis was repeatedly framed as a crime issue, legitimising police crackdowns over health-based solutions (Atkinson et al., 2019). When Scotland's first Drug Consumption Room (DCR) was proposed in 2019, the media response was largely hostile, portraying the initiative as enabling drug use. This stigmatising portrayal contributed to political resistance, with then-Home Secretary Sajid Javid rejecting the proposal, claiming it would send "the wrong message" and "condone drug use" (UK Parliament, 2019).

Portugal presents a contrasting case. Following decriminalisation in 2001, Portuguese media increasingly framed drug use as a public health issue, supporting progressive policy shifts (Nielsen & Bonn, 2008). Greenwald (2009) reports that within five years, drug-related deaths in Portugal dropped by over 50%. This comparison illustrates how media narratives can either hinder or facilitate reform. While Portugal's media contributed to a more compassionate, evidence-based

approach, UK media continues to favour punitive framings that delay meaningful change.

3.7 Challenging Dominant Narratives through Film and Journalism

While mainstream media has historically reinforced stigma and punitive drug policies, alternative media - including documentaries, investigative journalism, and grassroots storytelling, has emerged as a powerful force for challenging dominant narratives. These mediums offer humanising depictions of PWUDs, reframing addiction through compassion, complexity, and lived experience.

According to Aufderheide (2012), documentaries have a unique ability to reframe complex social issues, fostering empathy and influencing public discourse. ‘*The Gap: Two Generations Talk About How Addiction Destroyed Their Lives*’ – LADbible (2019) (<https://www.youtube.com/watch?v=u8HP4nwr9Qs>) is one such example, portraying addiction and recovery through the personal accounts of two individuals. This type of content counters dehumanising portrayals and generates public support for harm reduction policies by challenging stigma and moral panic.

Killick & Salter (2022) also highlight the power of film in offering nuanced, human-centred depictions of addiction. Unlike traditional news media, which often portray PWUDs through the lens of crime and deviance, documentary films provide a space for complexity and dignity. However, this medium can also be weaponised to reinforce stigma. Opponents of harm reduction have produced documentary-style content that selectively frames initiatives like DCRs as dangerous. For instance, a documentary titled “*Glasgow ‘Safe’ Rooms*” by The Streets Glasgow (2025)

(<https://www.youtube.com/watch?v=IXpwLldDVWY&t=1080s>) presents DCRs through a sensationalist lens, depicting disorder and reinforcing fear-based narratives. This highlights the dual potential of visual media, to either foster empathy or perpetuate punitive ideologies.

Independent journalism has also played a vital role in shifting public discourse. Güneyli et al. (2022) examine how investigative outlets such as The Ferret have exposed the human cost of punitive drug laws. For example, Goodwin's (2023) article, *"How Does Finding Connection Prevent Drug Deaths?"*

(<https://theferret.scot/the-ferret-investigates-health-gap-episode-two-drug/>) pairs data-driven analysis with personal stories from PWUDs, highlighting the impact of austerity, homelessness, and cuts to mental health services. In contrast to sensationalist tabloids, this reporting centres on structural factors rather than individual blame, providing a more accurate foundation for policy reform.

Outside traditional platforms, grassroots media, often led by individuals with lived experience, have become essential for countering stigma. Community-led podcasts, online storytelling projects, and social media campaigns provide PWUDs with an opportunity and space to share their stories, challenge criminalising narratives, and advocate for change (Killick & Salter, 2022). These bottom-up approaches amplify authentic voices and foster solidarity, contributing to a broader cultural shift in understanding and addressing addiction.

While dominant media shapes opinion through fear and stigma, alternative and grassroots media offer counter-narratives that centre lived experience and humanise

PWUDs. Using personal stories, visual media, and investigative depth, they promote empathy over fear and shift focus from individual blame to structural causes, creating space for more compassionate, evidence-based policy.

3.8 Gaps, Limitations, and Future Research Applications

Although media research on drug use has grown, several key gaps persist. Few studies adopt a longitudinal lens, missing how sustained media exposure shapes public opinion, stigma, and policy over time. Tracking these shifts could highlight the long-term effects of harm reduction advocacy and the evolution of related narratives. Most studies rely on content analysis, overlooking how PWUDs experience or interpret media. Lancaster et al. (2013) argue that qualitative approaches, such as interviews and ethnography, are necessary to better capture the lived experience and the real-world impact of policy and representation.

Social media's influence remains underexplored. While traditional media still shapes discourse, platforms like Instagram and TikTok significantly influence societal perceptions. They can reinforce stigma through viral misinformation or challenge it through personal storytelling (Killick & Salter, 2022). With 79% of the UK population (Dixon, 2024) active on social media, further research should examine how these platforms can support counter-narratives and mobilise communities.

Community-led research is also lacking. Participatory Action Research (PAR) models, like the Scottish Drugs Forum's 'Peer Research Programme' (SDF, 2022), offer a path forward by involving PWUDs as co-researchers. A community development lens can enhance these efforts, primarily through creative, accessible storytelling on platforms like TikTok and Instagram.

Positive recovery portrayals often emphasise personal resilience and self-discipline, echoing neoliberal ideals (Rose, 1999; Brown, 2015). While empowering, these narratives risk downplaying the role of structural support and community. They may also stigmatise those who relapse. A psychosocial lens (Erikson, 1968; Frosh, 2010) suggests recovery is relational and shaped by social environments. Future research should explore how to reframe recovery to reflect these collective dimensions, an area where community development can play a transformative role.

Intersectionality is rarely addressed. Research often treats PWUDs as a single group, ignoring how race, class, and gender shape stigma and media representation. Addressing these intersections is crucial for inclusive reform.

Cross-national comparisons are also limited. Countries like Portugal and Canada demonstrate how progressive policies can lead to more compassionate media coverage. In contrast, the UK's punitive framing continues to obstruct harm-reduction support (Greenwald, 2009; Nielsen & Bonn, 2008).

Localised studies are needed. City-specific analysis, such as that of Glasgow, could reveal how media influences local attitudes and policy. Media literacy campaigns also deserve attention; understanding their potential to reduce stigma and boost support for progressive approaches could be vital.

Though this study cannot address all gaps, it centres stigma and representation in Glasgow's media through a critical, community development-informed lens. It contributes to calls for a compassionate and inclusive drug policy grounded in lived experience and structural change.

Chapter 4. Findings, Analysis, and Discussion

This chapter explores how Glasgow's media portrayed addiction between 2019 and 2025, identifying key themes and critically analysing their implications for stigma, public perception, and drug policy. Drawing on a TA of selected media articles, this chapter presents key findings and critically explores how these narratives reinforce stigma, power hierarchies, and dominant social framing. The final section discusses how the findings relate to the broader literature and theoretical perspectives explored previously in the dissertation. This integrated approach presents a deeper understanding of how media representations shape public perception and influence community development responses. It also responds to the following sub-questions:

- *What is the Media's Narrative of Addiction?*
- *What Impact does this have on societal perceptions of addiction?*
- *How do we respond to this using a community development approach?*

This analysis draws on CDA and TA to explore how dominant media narratives facilitate stigma, power, and representation. The findings from media excerpts are integrated with the literature and theoretical lenses outlined in the 'Introduction' and 'Research Design and Methodology' Chapters, including those of Goffman (1963), Tyler (2013), Gramsci (1971), Freire (1970), and Foucault (1977).

4.1 Media Narratives: Framing Addiction as Crime and Moral Failure

Media coverage in Glasgow repeatedly frames addiction through lenses of criminality, deviance, and personal failure, reinforcing the idea that drug use results from individual weakness rather than societal conditions (McGinty et al., 2019; Atkinson et al., 2019; Habib et al., 2023). For example, a 2023 article in *The*

Scottish Sun described a “super-strength crack cocaine epidemic”, focusing on gang violence, machete attacks, and psychosis. PWUDs were portrayed as dangerous and disruptive, a direct reflection of Goffman’s (1963) concept of “spoiled identity,” whereby stigma reduces an individual from a whole and usual person to a tainted, discounted one (p. 3). This devaluation process erases any complexity and fuels fear.

Tyler’s (2013) notion of abjection complements this, highlighting how such individuals are socially expelled, framed as morally deficient and polluting the social order. This type of framing dehumanises PWUDs and reinforces narratives that justify punitive responses. Visual imagery, such as photographs of people injecting in alleyways (*The Scottish Sun*, 2019), evokes disgust and fear, reinforcing moral hierarchies. Despite evidence of their success (EMCDDA, 2022), interventions such as DCRs are often rejected due to sensationalist media coverage.

The persistence of these narratives reflects Foucault’s (1977) insights on discourse and knowledge. The media does not simply report on addiction but actively constructs what counts as truth, shaping public consciousness around control and punishment. As Foucault (1977) explains, “*each society has its regime of truth, its ‘general politics’ of truth*” (p. 131), which determines not only what is accepted as knowledge but also who is authorised to speak. In this context, the media’s repeated portrayal of PWUDs as threats legitimises punitive responses while marginalising alternative, health-oriented narratives.

4.2 Public Perceptions, Policy, and Power

Media outlets frequently amplify the voices of politicians and police while marginalising harm-reduction experts, lived-experienced individuals, and PWUDs themselves (McGinty et al., 2019). This silencing aligns with Gramsci's (1971) theory of cultural hegemony, where the media exerts a crucial and dynamic ideological influence, significantly shaping public opinion and sustaining the cultural dominance of the ruling class by legitimising certain voices and excluding others, thereby shaping public consciousness. However, this influence is not unidirectional; media consumers often seek content that aligns with their existing beliefs, reinforcing ideological echo chambers and creating a feedback loop in which dominant narratives are produced and sustained. In this context, the media becomes not only a source of information but also a tool through which individuals affirm identity, belonging, and perceived moral order, particularly around complex issues like drug use.

In this case, abstinence and criminalisation are positioned as commonsense solutions, forcing out the notion of public health alternatives. For example, The Herald's 2021 article "*Safe Drug Rooms Slammed*" prioritised police opposition to DCRs, with no counter-perspectives from harm reduction or recovery professionals. Foucault's (1977) analysis of disciplinary power helps to explain how institutional voices define legitimacy, constructing harm reduction as controversial and criminalisation as commonsense. In 2019, the UK government blocked Scotland's proposed DCRs. Headlines such as "*Shooting Gallery Waste of Public Money*" (Scottish Daily Express, 2023) illustrate how media narratives shape public resistance despite international success stories.

4.3 Dehumanisation and Its Consequences

The consistent use of dehumanising language, such as “junkie,” “zombie,” or “addict”. Perpetuates stigmatisation and social exclusion (Habib et al., 2023; Lloyd, 2013). In The Scottish Sun’s 2023 report, a headline read *“Zombie Addicts Take Over Glasgow Streets.”* These portrayals strip individuals of their context, identity, and humanity, rendering them as threats to our society rather than people who need support. According to Harris & McElrath (2012), images of PWUDs in distress generate fear and disgust, displacing compassion. This creates a feedback loop; the more the public sees PWUDs as dangerous, the more likely they are to support punitive policies over compassionate interventions (Atkinson et al., 2019).

Internalised stigma (Goffman, 1963) also prevents PWUDs from seeking help (Habib et al., 2023). Media representations rarely include voices of recovery or lived experience, a form of symbolic violence that reinforces silence and shame. These patterns embody Foucault’s (1977) concept of ‘discursive exclusion,’ where dominant groups determine who can speak and remain invisible. As Foucault (1977) states, *“There is not one but many silences, and they are an integral part of the strategies that underlie and permeate discourses”* (p. 27). In this context, the media’s silence surrounding recovery and lived experience narratives reinforces structural power, narrowing the public’s perception of what recovery can look like.

4.4 Power, Absence, and the Politics of Representation

The power imbalance in media narratives is evident in how authority is assigned. Across the dataset, coverage routinely places at the forefront institutional actors (e.g. police, politicians, and medical experts) while excluding those most affected by drug

use. This framing casts PWUDs as threats, fuelling resistance to harm reduction and reinforcing power structures dominated by policymakers and police. Upholding abstinence-based ideologies while discouraging social responsibility reflects Gramsci's (1971) notion of cultural hegemony, where dominant narratives suppress collective responses to inequality.

For instance, a 2023 *Glasgow Times* article on drug trends quoted multiple police officials but no one with lived experience. This lack of inclusion upholds dominant narratives and suppresses community knowledge (Atkinson et al., 2019; McGinty et al., 2019). Goffman's (1963) concept of "frame control" is relevant here when the mainstream media determines which stories are essential and whose voices are credible. Power dynamics shape policy, by centring law-and-order responses, the media legitimise increased policing and surveillance, forms of disciplinary power that Foucault (1977) describes as subtle yet pervasive tools of social control. As Foucault (1977) argues, "*Power is everywhere; not because it embraces everything, but because it comes from everywhere*" (p. 93). Through repetition and omission, media discourse becomes a vehicle through which institutional authority is normalised and internalised. At the same time, recovery, harm-reduction, and trauma-informed approaches remain marginalised, not because they lack evidence but because they disrupt the prevailing logic of power and control.

4.5 The Political Economy of Media and the Entrepreneurship of Stigma

Commercial pressures and political alignment shape addiction narratives in Glasgow's media. As Anderson (2021) and Petley (2012) argue, media ownership and market demands incentivise sensationalist reporting. For example, The Scottish

Sun's 2023 coverage of a "*crack epidemic*" focused on violence and chaos, echoing Beckett and Sasson's (2004) point that crime-related stories boost audience engagement. These portrayals generate fear rather than understanding the structural causes, like trauma and inequality (Atkinson et al., 2019).

Media alignment with political ideologies further reinforces stigmatisation. While health is devolved to the Scottish Government, drug legislation is reserved for Westminster. This dynamic was highlighted in The Scottish Daily Express's 2023 headline, "*John Swinney Can't Guarantee £2.3m 'Shooting Gallery' Will Work,*" which echoed UK Government scepticism and framed DCRs as reckless experiments. Foucault (1977) describes this as a "*regime of truth*", where institutional discourses construct what is perceived as credible or legitimate. The media, through selective framing, reinforces abstinence and enforcement as common sense while marginalising public health approaches.

Gramsci (1971) notes that cultural hegemony is sustained through repetition, where dominant ideologies become accepted as "natural" through media consensus. By failing to contextualise drug-related harm or explain legislative blockages, media coverage contributes to public confusion and resistance to reform. Atkinson et al. (2019) argue that this obstructs progressive policy change. The media, which is far from neutral, thus plays an active role in shaping both perception and possibility, privileging punishment over care. This reflects the *entrepreneurship of stigma*, where both punitive and sympathetic narratives around drug use are commodified. Stigmatising portrayals generate profit through fear and moral panic, while recovery

stories can also be commercialised, often reinforcing ideals of individual responsibility. In both cases, stigma becomes a marketable tool for political and economic interests.

4.6 Alternative and Counter-Narratives: Opportunity for Change

Within the dominant media portrayals, counter-narratives are emerging through film, journalism, and grassroots media, humanising PWUDs and challenging stigma. These efforts reflect Freire's (1970) notion of '*critical consciousness*,' which utilises storytelling to expose structural causes whilst aiming to foster empathy. Goodwin's (2023) article in *The Ferret* and *LADbible's The Gap* (2019) documentary focuses on lived experience and recovery, offering alternatives to fear-based sensationalist reporting. Yet, as seen in *The Streets Glasgow's* (2025) "*Safe Rooms*" documentary, counter-media can still reinforce stigma when shaped by sensationalism, echoing Foucault's (1977) view that discourse can be both liberating and oppressive.

Social media platforms like Instagram and TikTok offer spaces for sharing recovery stories and mobilising counter-narratives, with movements like #EndTheStigma demonstrating their reach (McCosker, 2020; Schlosser et al., 2020). However, these platforms also carry risks, including the sensationalism of suffering and spreading misinformation. Grassroots initiatives reflect community-led resistance to dominant representations, such as the Glasgow-based podcast 'Unbroken: Healing Through Storytelling' (Black, 2020). These projects amplify lived experience and embody core principles of Community Development, such as empowerment, participation, and collective voice. In doing so, they directly challenge Gramsci's (1971) concept of cultural hegemony and reframe drug use through the lens of care, dignity, and

social context. From a CD perspective, these initiatives serve as tools for dialogue, consciousness-raising, and transformative practice, offering a framework for more inclusive and compassionate public discourse.

4.7 Historical Continuity: Why Narratives Persist

The media have long shaped drug policy by framing addiction through moral panic and individual blame. Nielsen & Bonn (2008) and Seddon (2021) trace how UK narratives shifted from public health to punitive approaches, particularly during the 1980s “War on Drugs” era. As Stevens (2011) observes, this era *“recast drug use as a problem of deviant individuals rather than one of social context”*, legitimising harsher sentencing laws and expanded police surveillance.

This legacy remains in Glasgow. Despite 1,051 drug deaths in Scotland in 2022 (NRS, 2023), coverage often blames individuals while neglecting structural issues like poverty and trauma. When Scotland’s first DCR proposal was blocked in 2019, headlines such as *“Safe Injection Room Could Worsen Crisis”* echoed UK Government scepticism, reflecting media complicity in shaping resistance (UK Parliament, 2019). Yet, this resistance has also been challenged by collective efforts, including activist groups and community development initiatives advocating for health-based, inclusive drug policies.

However, international shifts in attitudes towards drug use offer hope. In Portugal, decriminalisation in 2001 was followed by more empathetic media narratives and a 50% reduction in overdose deaths (Greenwald, 2009). In Canada, early opposition

to supervised injection sites gave way to supportive reporting as evidence and lived experience reframed the discourse (Boyd, 2002). These examples demonstrate that media narratives are flexible and can evolve when challenged by advocacy, evidence, and inclusive storytelling that questions dominant frames.

4.8 Summary

This chapter critically examines how addiction is framed in Glasgow's media between 2019 - 2025, drawing on CDA and TA to interpret dominant narratives and their broader societal impact. The findings reveal a persistent portrayal of addiction as a moral failing and criminal issue, reinforcing stigma, silencing lived experience, and obstructing public health interventions such as DCRs. Through the theoretical lenses of Goffman, Tyler, Foucault, Gramsci, and Freire, it is evident that these narratives sustain power imbalances and legitimise punitive drug policies.

At the same time, emerging counter-narratives are presented through film, investigative journalism, and grassroots media, offering opportunities to reshape public discourse and foster critical consciousness. Yet, these remain marginalised within a political economy favouring sensationalism over structural insight. By exposing these dynamics, this study contributes to a deeper understanding of how media representations reflect and shape societal responses to addiction, providing a crucial insight for community development practice and future policy reform.

Chapter 5. Conclusion

This dissertation has explored how addiction is portrayed in Glasgow's media between 2019 and 2025, focusing on the social, political, and structural implications of these narratives. Guided by the central research question:

“How does the media in Glasgow portray addiction and the consequences?”

This study and its associated sub-questions critically examined the media's role in framing addiction, the societal impact of those portrayals, and the opportunities for responding through community development.

Through a qualitative methodology that integrates CDA and TA, the research analysed selected media excerpts and synthesised these findings with theoretical contributions from Goffman (1963), Tyler (2013), Gramsci (1971), Freire (1970), and Foucault (1977). The findings revealed persistent stigmatising portrayals of addiction, often constructed through narratives of criminality, moral failure, and social disorder that overlook the complex structural drivers of drug use, including poverty, trauma, and social exclusion.

5.1 Summary of Key Findings

The media in Glasgow routinely framed PWUDs as dangerous, irresponsible, or morally corrupt. These portrayals aligned with Goffman's (1963) concept of *"spoiled identity"* and Tyler's (2013) idea of abjection, which demonstrate how stigma renders PWUDs as social outcasts. The use of dehumanising language such as 'junkie' and 'zombie' in headlines and articles contributed to widespread public fear and hostility, undermining support for harm reduction approaches like DCRs.

These narratives reinforce punitive drug policies and destroy public empathy despite overwhelming evidence from international contexts, such as Portugal and Canada, demonstrating the effectiveness of harm reduction and decriminalisation (Greenwald, 2009; Boyd, 2002). By privileging institutional voices, notably politicians and law enforcement, over those of people in recovery or with lived experience, the media creates a distorted view of addiction that legitimises control and punishment, as explained by Foucault's (1977) theory of discourse and Gramsci's (1971) notion of cultural hegemony.

Despite these dominant portrayals, the analysis also uncovered the emergence of counter-narratives. These include forms of resistance found in investigative journalism, documentary storytelling, and grassroots media platforms. Aligned with Freire's (1970) concept of critical consciousness, these alternative narratives humanise PWUDs, challenge stigma, and foster support for recovery and public health-focused responses.

5.2 Deductions and Contributions

This dissertation establishes that media representations are not neutral reflections of reality but active participants in constructing public opinion and political discourse. When addiction is consistently framed through lenses of crime, decay, and deviance, it transforms from a public health concern into a matter of social control. In this context, the media operates as a mechanism of discursive power, marginalising alternative narratives and sustaining punitive paradigms.

Such framing does not merely impact policy decisions; it profoundly affects the lives of individuals and communities. It fosters stigma, shapes societal attitudes, restricts access to care, and reinforces systemic inequalities. In this sense, the dissertation contributes not only to the discourse of addiction but also to the field of community development, revealing the media's role in shaping the social conditions that practitioners must work within.

It also positions narrative change as central to community development. Reframing drug use as a health and human rights issue is not just a media literacy challenge but a strategic priority for practitioners seeking inclusive and sustainable solutions. This requires supporting lived experience leadership, facilitating inclusive dialogue, and critically interrogating dominant systems of knowledge and power.

5.3 Recommendations for Further Research

This study drew on a purposively selected sample of media excerpts, offering critical insight into how addiction is portrayed in Glasgow's media. Future research could expand this by analysing a broader range of sources to capture more diverse narratives and improve generalisability.

While the study focused on media content, it did not explore how audiences interpret or respond to these portrayals. Investigating audience reception would offer a deeper understanding of how media framing influences public attitudes, stigma, and behaviour.

Though grounded in critical theory, this research did not include direct engagement with media professionals or policymakers. Future studies could benefit from interviews with journalists, editors, or public officials to uncover how institutional pressures and editorial decisions shape addiction narratives.

Finally, this dissertation analysed media representations of PWUDs but did not include direct participation from individuals with lived experience. Future research should consider participatory approaches that involve PWUDs and recovery communities as co-researchers. This would enhance ethical rigour, ensure more authentic insights, and align with community development principles of inclusion and empowerment.

5.4 Recommendations for Advocacy, Policy, and Community Response

This research points towards numerous practical recommendations to support narrative change, advocacy, and inclusive community responses:

- **Media Literacy Education:** Community development initiatives should integrate media literacy to help individuals critically assess addiction narratives, challenge stigma, and support informed dialogue.
- **Support for Alternative Media:** Increased funding and infrastructure should be directed toward grassroots media, recovery-led platforms, and independent journalism that centre lived experience and promote nuanced portrayals of drug use.
- **Policy Advocacy and Narrative Change:** Practitioners, activists, and researchers should collaborate with media outlets to advocate for trauma-

informed, health-based coverage that supports evidence-based policies like harm reduction and decriminalisation.

- Inclusion of PWUDs in Media: Media organisations must develop ethical guidelines that include the voices of people who use drugs, ensuring representation is respectful, person-centred, and driven by lived experience.

Future research should explore how audiences interpret and respond to media portrayals of addiction. Longitudinal analysis could help assess how public attitudes shift over time in response to media discourse, advocacy efforts, and policy changes. Additionally, the role of social media platforms as both sites of resistance and spaces that reproduce stigma warrants further investigation, particularly regarding their influence on young people and marginalised communities.

5.5 Final Reflections

This dissertation contends that addiction is not only a public health concern but a deeply embedded social justice issue, interwoven with poverty, trauma, inequality, and marginalisation. How society discusses drug use and who is afforded the power to tell those stories has tangible consequences for stigma, support, and survival.

The analysis reveals that dominant media narratives in Glasgow have too often perpetuated fear, shame, and punishment. These portrayals harm those most in need of care and compassion, hindering the adoption of evidence-based strategies and reinforcing the status quo. However, it also reveals cracks in that narrative, places of resistance, hope, and transformation, offered by those reclaiming their stories through alternative and community-led media.

The power of narrative must not be underestimated. Change is possible as communities, practitioners, and individuals unite to challenge dominant discourses and build the capacity for understanding and inclusion. This research underlines the urgent need to move past punitive portrayals and centre narratives rooted in dignity, equity, and justice.

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Annexe A

Analysis of Bias and Positionality

My lived experience of addiction and recovery provides a unique and powerful perspective, allowing me to engage with this topic as both a researcher and a person with firsthand understanding. As Bourdieu (1990) argues, our social position shapes the knowledge we produce. This positionality enhances my ability to challenge dominant narratives about drug use, particularly those rooted in stigma, criminalisation, and moral judgement (Tyler, 2020). However, it also presents the risk of bias, specifically, an implicit prioritisation of trauma-informed or structural explanations over biological or behavioural models (Maté, 2010). I have sought to balance this by engaging with a broad spectrum of theoretical perspectives while remaining transparent about the interpretive lens I bring to the research.

As someone in recovery who is also a public speaker, educator, and media contributor, I have frequently engaged in national conversations about addiction, drug policy and stigma. While this platform gives me a voice to advocate for change, it also introduces further complexity. Public narratives can often be simplified or shaped by the media's framing priorities (Couldry, 2012). I am aware that my perspective may be overly dominant or representative of others' experiences. Reflexive journaling, peer discussion, and supervisor feedback have helped ensure critical distance and maintain academic rigour.

One additional ethical consideration was the difficulty of navigating news articles that featured charities, organisations, or individuals I know personally or professionally. I

excluded these articles in several cases to maintain neutrality and prevent potential bias. Where inclusion was necessary to illustrate a significant theme or discourse, I approached the analysis with critical distance and avoided drawing personal conclusions. This careful boundary-setting reflects my commitment to maintaining ethical integrity and upholding the credibility of this research.

Reflexivity, Language, Stigma, and Person-Centred Framing

Engaging with Goffman's (1963) and Tyler's (2020) work has deepened my understanding of how language reinforces stigma and structural inequality. Early in this project, I used the term "addiction" without much consideration or reflection. However, I have come to recognise its moral and pathologising connotations, which risk framing drug use as a personal failing rather than a complex response to social conditions. To challenge this, I intentionally use the term "drug use" throughout this dissertation where appropriate, acknowledging that language is never neutral and that the words we choose can either reinforce or resist stigma.

This shift reflects my commitment to a trauma-informed, person-centred, and harm-reduction approach. It also aligns with broader community development principles, centring lived experience, amplifying marginalised voices, and addressing the structural drivers of inequality. By making this linguistic and conceptual adjustment, I aim to contribute to a more compassionate and evidence-based discourse on drug use and those affected by it.

Ultimately, this reflexive approach strengthens the academic and ethical foundations of the research. It highlights the importance of transparency, humility, and critical self-awareness in research, especially when one's personal experience closely aligns with the topic under investigation.