

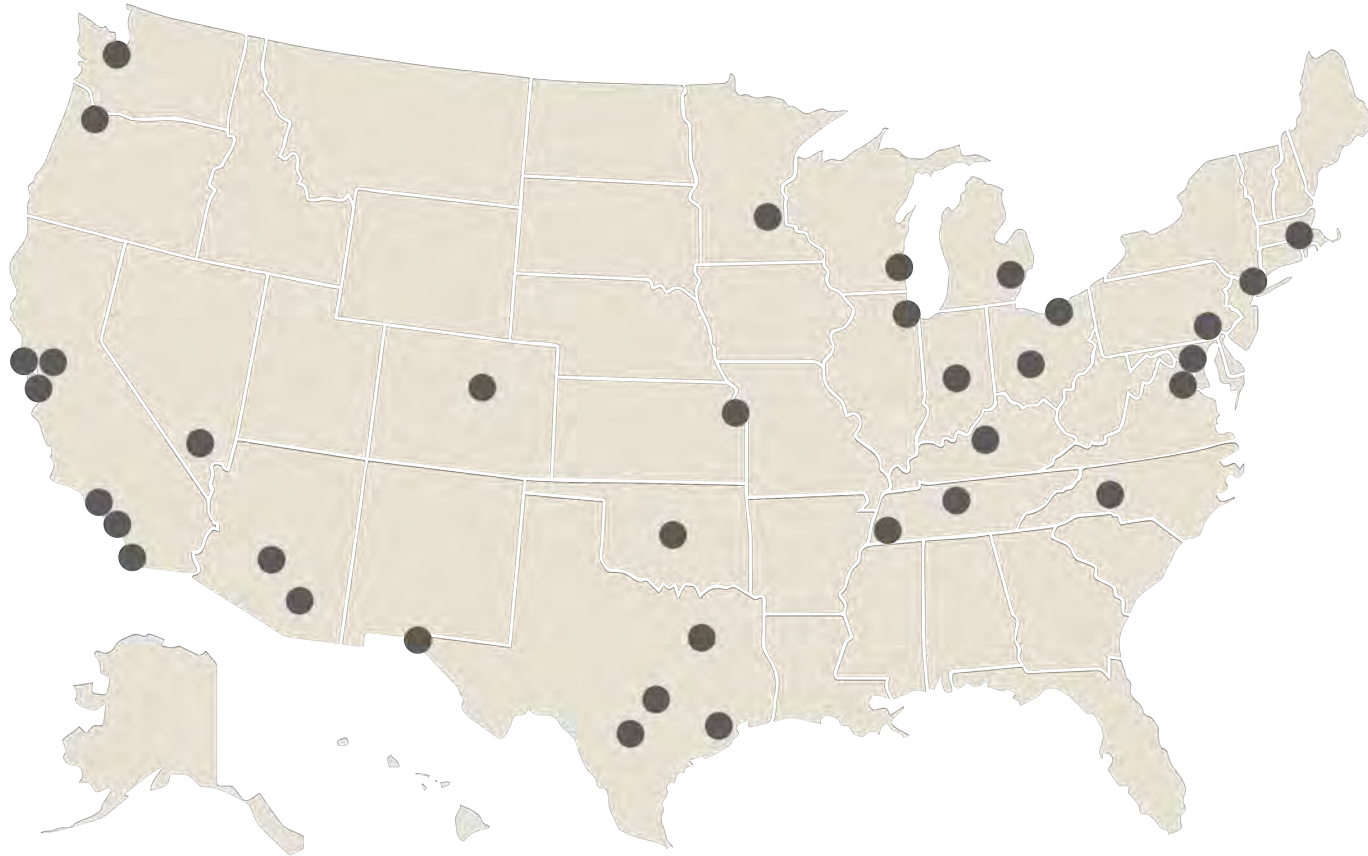


HOW TO TALK ABOUT DRUG USE & HOMELESSNESS

Messaging Research from Big Cities / Jan. 15, 2025

PHOTO: STREET MEDICINE TEAM | SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

OVERVIEW OF BCHC



Our member jurisdictions

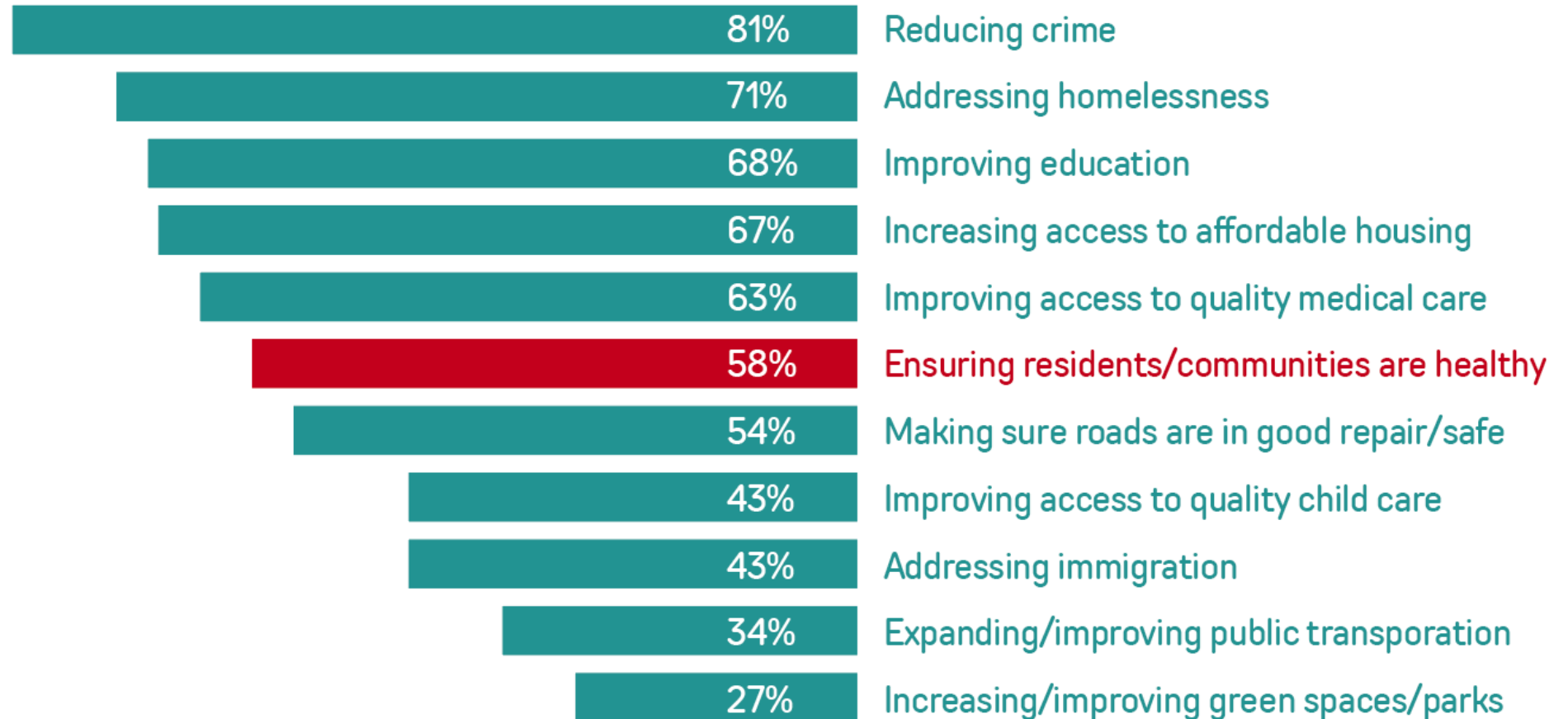
serve more than 61 million, or 1 in 5, Americans

Mission

Advancing equity and health for present and future generations, through sharing of best practices, leadership, and advocacy

PREVIOUS COMMS RESEARCH

Talking about public health & structural racism



PREVIOUS COMMS RESEARCH

Talking about public health & structural racism

Discussions of racial inequity gain more traction when framed as a human-made problem we can fix.

Percent of respondents who said messaging about racial health inequities being human-made and thus fixable was a major reason for their city to focus on the health of Black and Hispanic residents



WHERE THIS PROJECT STARTED

What we knew

We know that harm reduction strategies and other public health approaches to the drug overdose epidemic work.



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What we were hearing

These strategies often face resistance from the public and policymakers for “enabling” drug use or being ineffective. There are also headwinds in media and political narrative about the cities in which we work.

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These strategies often face resistance from the public and policymakers for “enabling” drug use or being ineffective. There are also headwinds in media and political narrative about the cities in which we work.

How could we change the conversation?

How can we talk about public health approaches to substance use in a way that persuades more people?



1,511

SURVEYED ONLINE

to determine issue priorities & audience segmentation

4

ONLINE FOCUS GROUPS

to dig deeper into attitudes & language about overdose, homelessness & crime

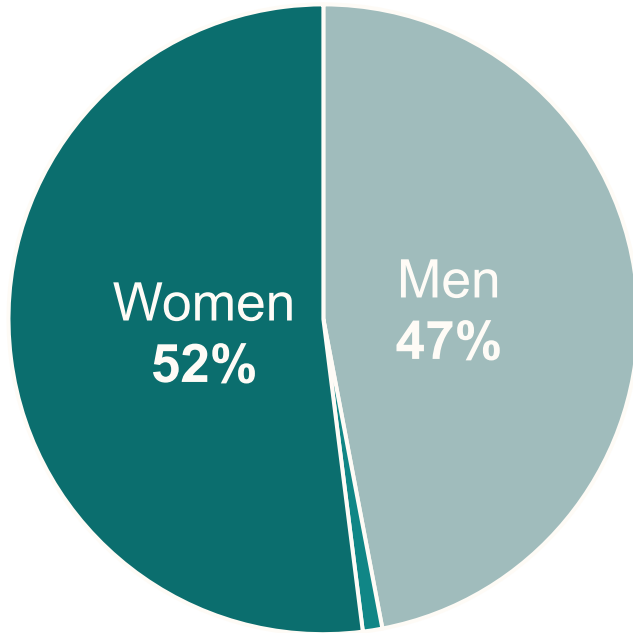
1,268

SURVEYED ONLINE

to test messaging

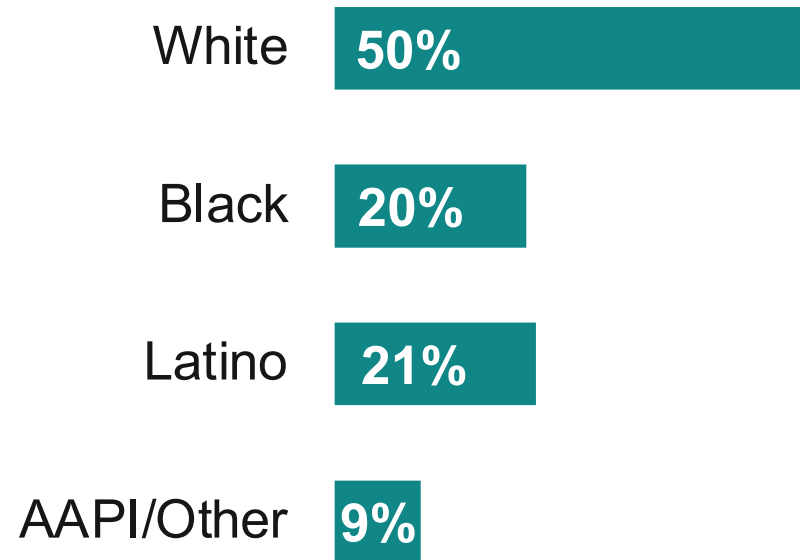
RESPONDENTS WERE A BROAD CROSS-SECTION

Gender

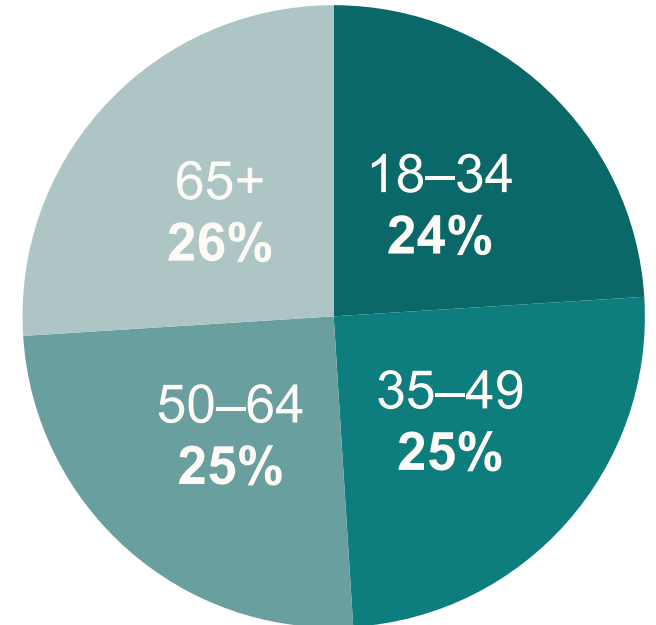


Non-binary 1%

Race

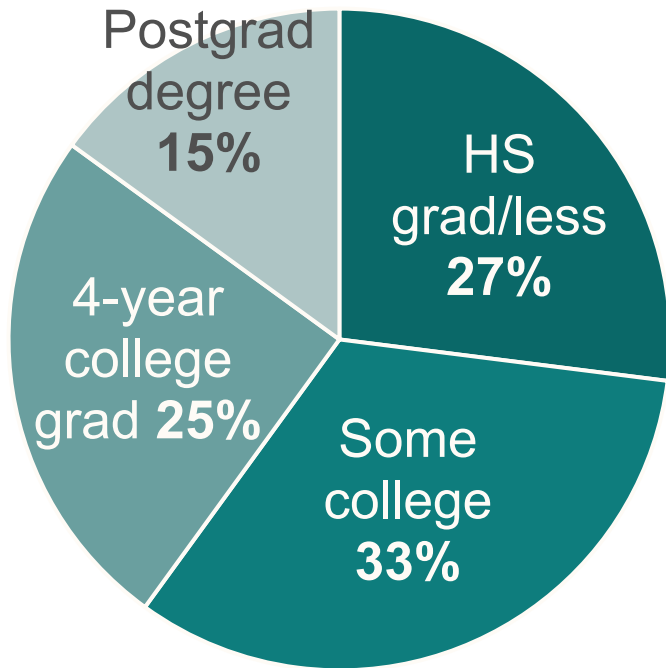


Age

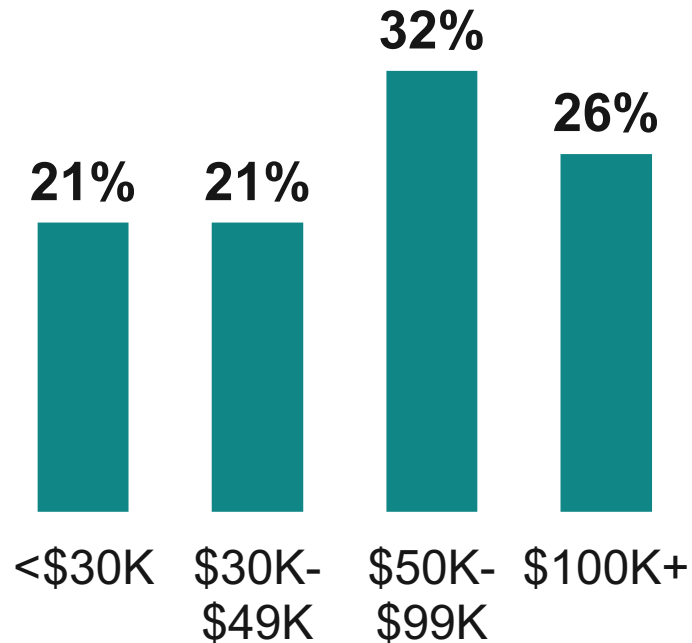


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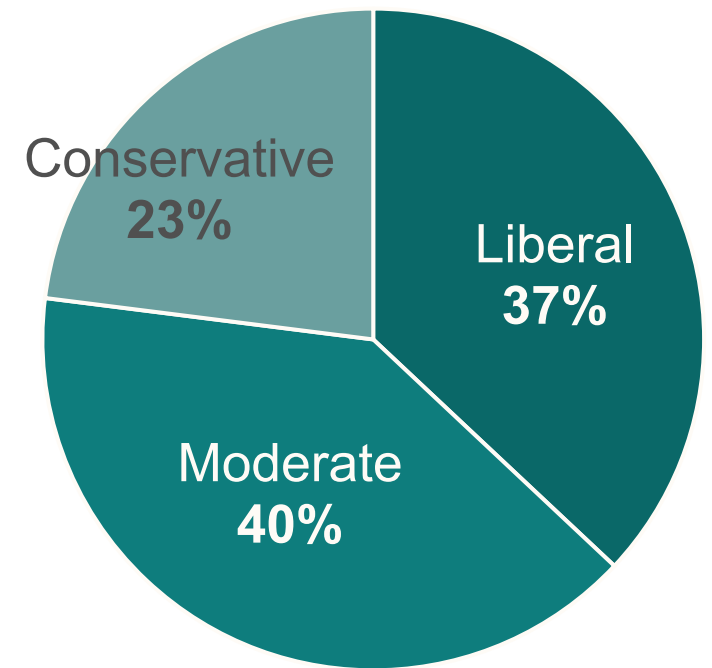
Education



Income



Political Ideology



SEGMENTATION OF CITY RESIDENTS

	Privileged Liberals	Untroubled Optimists	Progressive Reformers	Fed-up Middle	Punitive Advocates
% of population	29%	11%	28%	21%	11%
City assessment	Thriving/successful	Closer to thriving/successful	Closer to declining/failing	Declining/failing	Closer to declining/failing
Issue priorities for city	Large number of high priorities	No issue priorities	Large number of TOP priorities	Crime and homelessness TOP priorities	Crime, immigration, government spending
Partisanship	Predominantly Democratic	Predominantly Democratic	Predominantly Democratic	Even split D-R	Predominantly Republican
Race/ethnicity	Predominantly white	Mostly representative	Predominantly Black and Latino	Mostly representative	Predominantly white
Problems in OWN neighborhood (>50%)	None	None	All three	Crime and homelessness	None
Issue lens	Public health	Public health	Public health	Individual choice	Individual choice
Policy solutions	Public health-oriented	Public health-oriented	Public health-oriented	Mixed support	Punitive
City government all/a lot of responsibility (>50%)	Crime and homelessness	Crime and homelessness	All three	All three	Crime



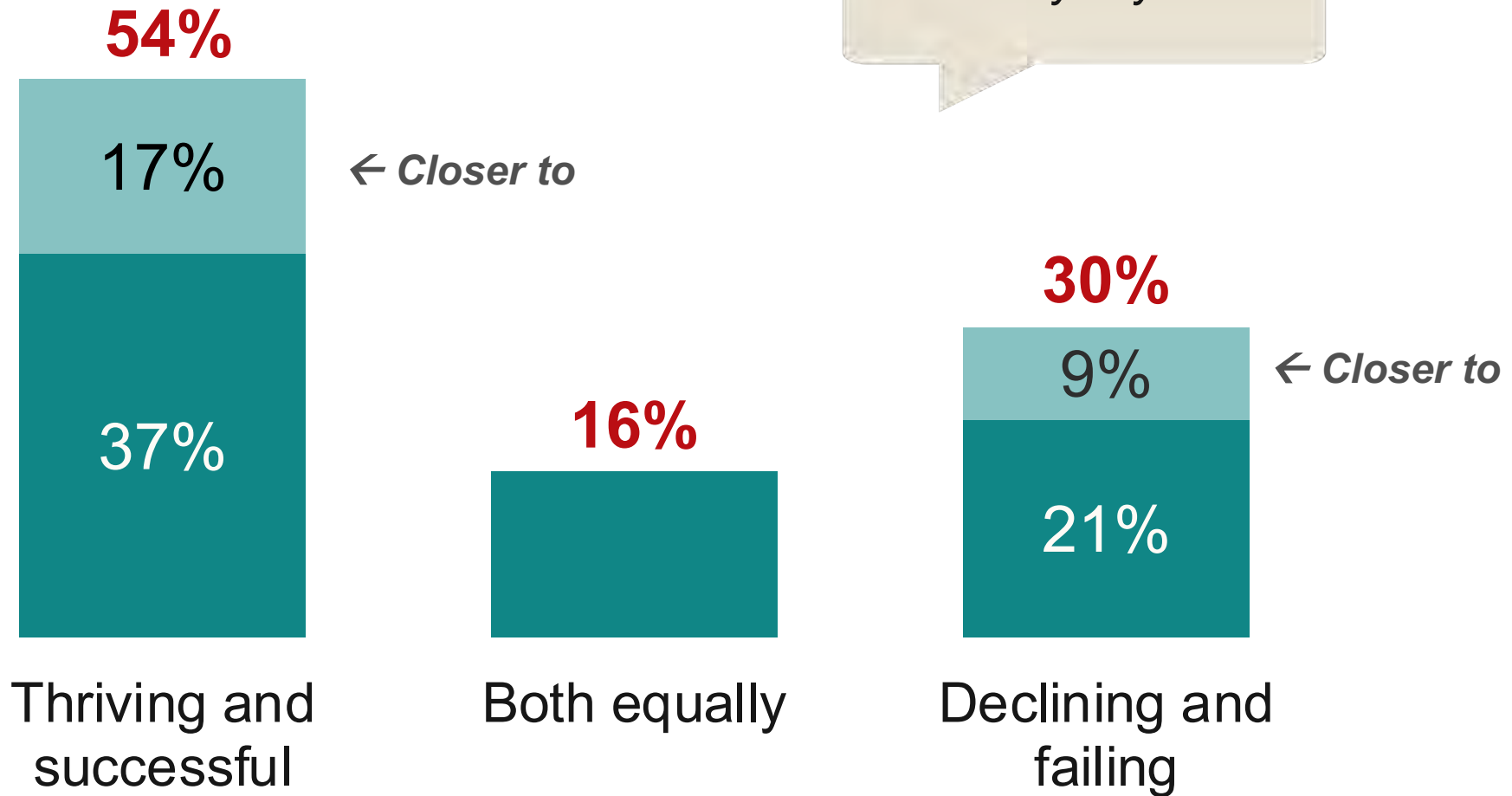
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**KEY
TAKEAWAYS**

More than half of city residents see their cities as thriving, but **all see crime, homelessness, and drugs as big issues they want their city to address.**

When asked to assess their own city, the majority saw it as thriving and successful.

I see my city as...



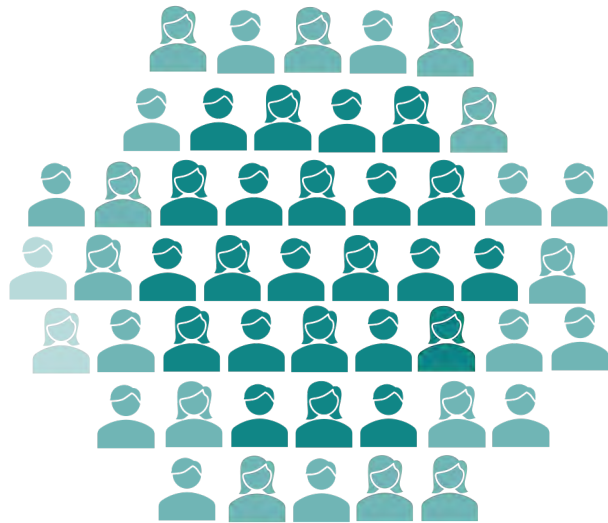
BUT they do overwhelmingly agree that crime, homelessness, and drugs are problems where they live.

This issue is a problem in my...

■ Own neighborhood

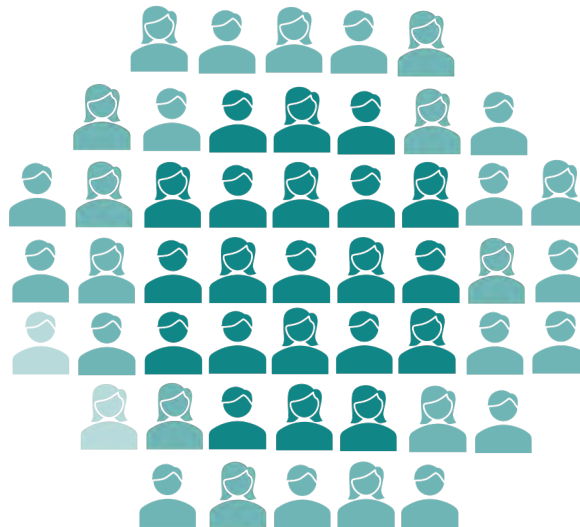
■ My city, but not neighborhood

Crime



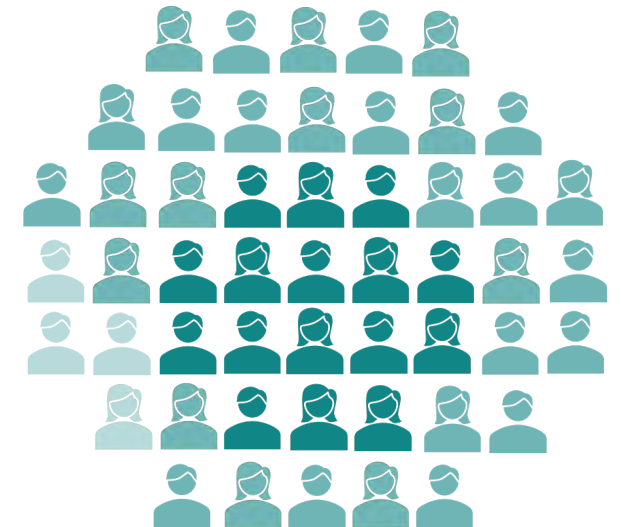
46% + 49% = 95%

Homelessness



42% + 55% = 96%

Drug addiction & OD



33% + 58% = 91%

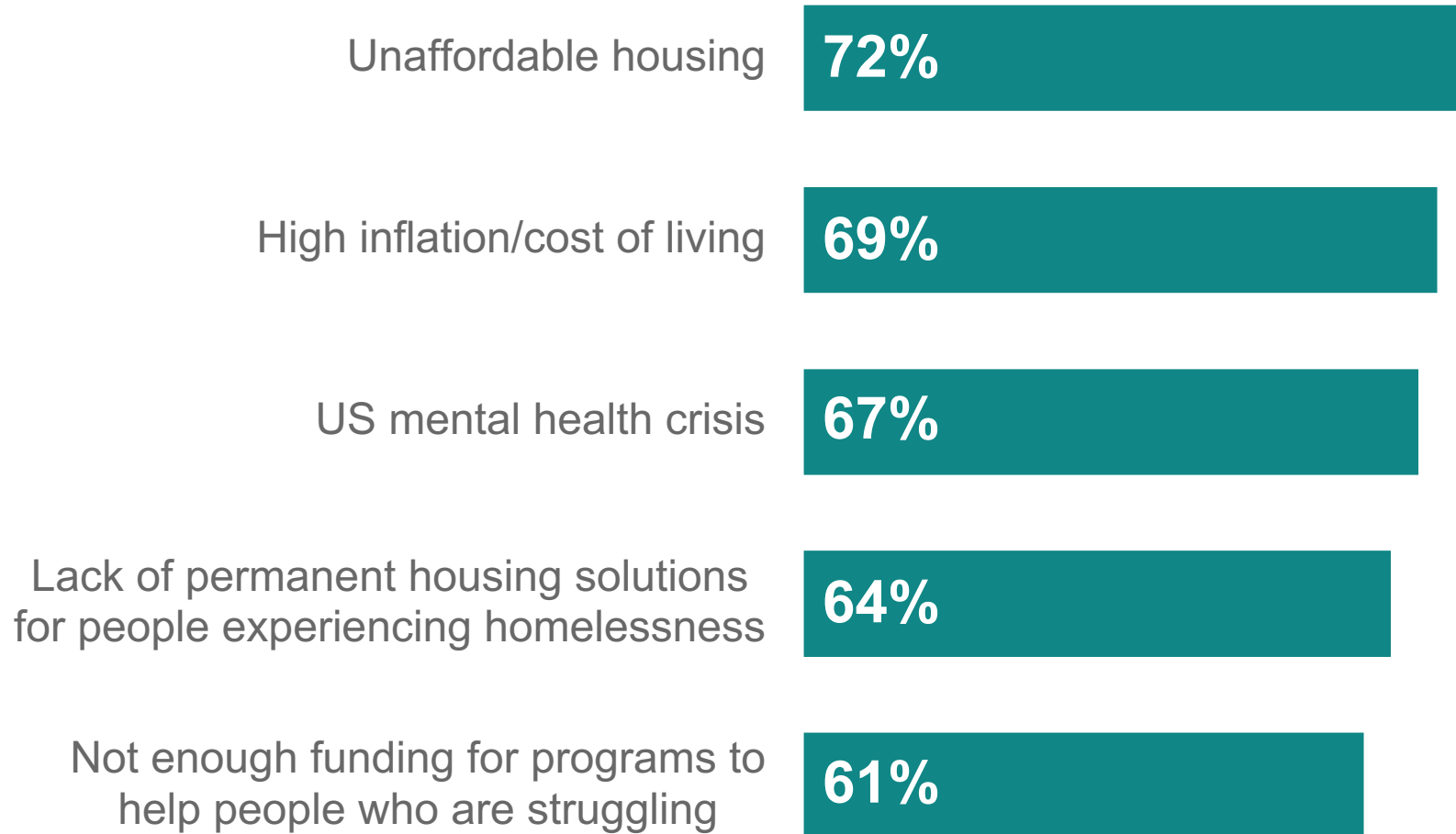


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KEY TAKEAWAYS

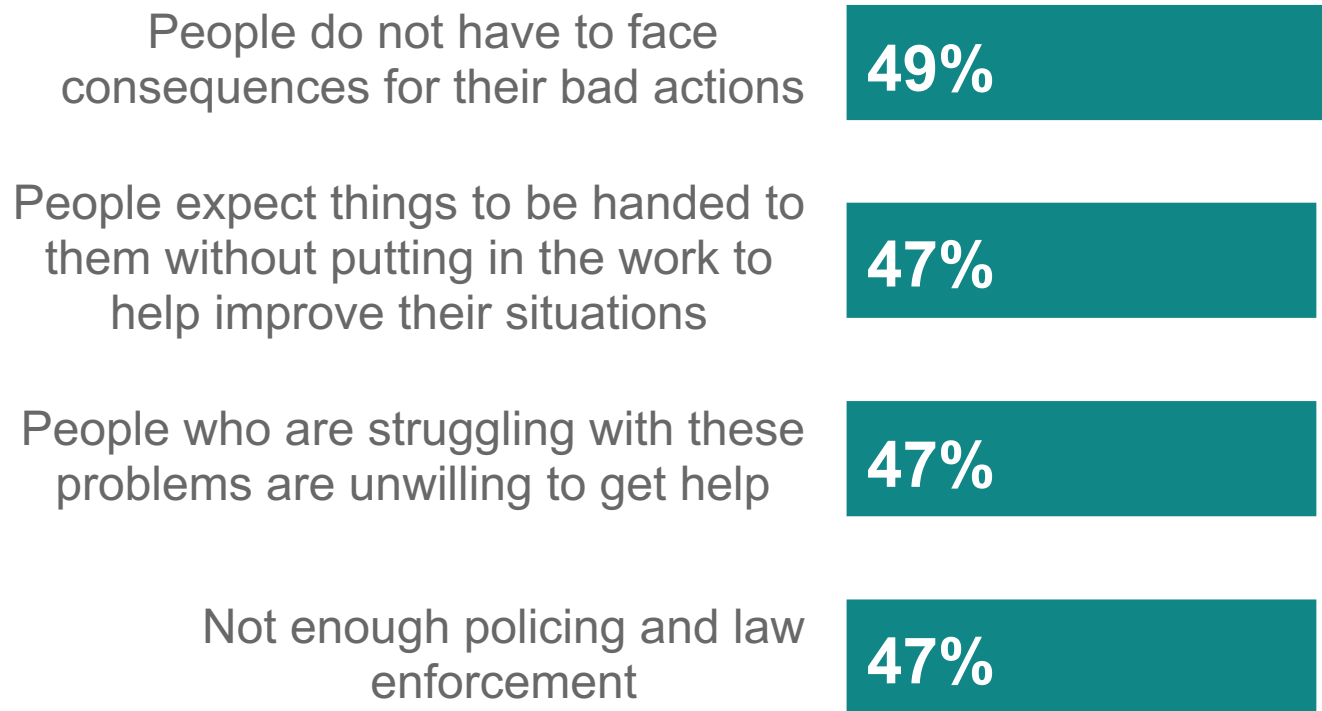
Instead of blaming individual “bad choices” as the causes of these issues, **people largely point to systemic problems**, especially housing affordability, inflation, and a national mental health crisis.

Residents blame economic and mental health issues, plus insufficient funding for public health.



The major causes of homelessness, overdose, and crime in my city are...

They also blame individual “bad choices” and insufficient policing, but not as *much* as they blame social determinants



The major causes of homelessness, overdose, and crime in my city are...



3

KEY TAKEAWAYS

Residents think a **“fix the underlying problems”** – aka public health – approach is best for dealing with homelessness and drugs in their cities.

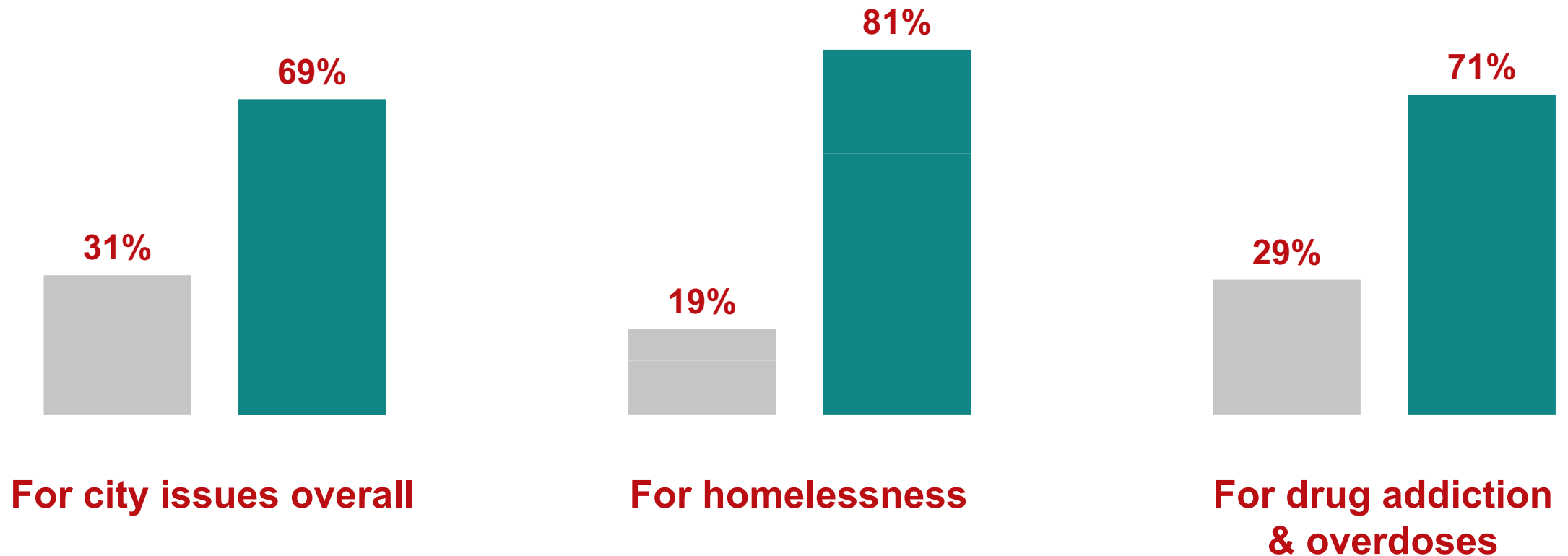
City residents strongly support a public health approach to address overdose, homelessness, and other issues.



Favor a “getting tough” approach



Favor a “fix the foundations” approach





4

KEY TAKEAWAYS

The message that tested best acknowledges the **feeling of crisis** city residents have around drug overdose and homelessness – and points out both the **short-term and long-term benefits** of investing in public health solutions.



ANATOMY OF A WINNING MESSAGE

THE WINNING MESSAGE

Our city is facing interlocking crises of homelessness, drug overdoses, and mental health. We all want healthier and safer communities, so we need both short- *and* long-term approaches. Short term, we must invest more in, and expand access to, effective treatment programs. Long term, we must continue to make housing more affordable and create more better-paying jobs.

THE WINNING MESSAGE

**Acknowledge residents
feel this as a crisis**



Our city is facing **interlocking crises** of homelessness, drug overdoses, and mental health. We all want healthier and safer communities, so we need both short- *and* long-term approaches. Short term, we must invest more in, and expand access to, effective treatment programs. Long term, we must continue to make housing more affordable and create more better-paying jobs.

THE WINNING MESSAGE

**Reinforce relationships
they already see between
health-related issues**

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THE WINNING MESSAGE

Shift discussion from problems to solutions; point to shared values

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THE WINNING MESSAGE

Satisfy need for crisis management & lasting solutions

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Fill in what's working / needed now

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Advocate for a couple of evidence-based, longer-term solutions



CRAFTING YOUR OWN PERSUASIVE MESSAGES



1

STRATEGIC RECOMMENDATIONS

Acknowledge residents' views that they are facing a multi-pronged crisis of homelessness, overdose, mental health, and community safety.



2

STRATEGIC RECOMMENDATIONS

Avoid getting bogged down in a crime debate; pivot to arguments that match residents' beliefs that a **“fix the foundations” approach is the best solution.**



3

STRATEGIC RECOMMENDATIONS

Focus on values that public health practitioners share with city residents: **people who are struggling need opportunities and support** rather than being treated like criminals.



4

STRATEGIC RECOMMENDATIONS

Emphasize that **individual and community health are affected by many factors**, including the extremely high cost of living, which is taking a toll that can lead to significant health consequences.



5

STRATEGIC RECOMMENDATIONS

Share specific examples of how prioritizing the public health approach yields both **short-term impact and long-term solutions.**



6

STRATEGIC RECOMMENDATIONS

Turn the **need for public investment** into a rallying cry. City residents do not think their cities are investing enough in public health and mental health.



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