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To cite this article: Liviu Alexandrescu & Jack Spicer (2023) The stigma-vulnerability nexus and the framing of drug problems, *Drugs: Education, Prevention and Policy*, 30:1, 6-16, DOI: [10.1080/09687637.2022.2049214](https://doi.org/10.1080/09687637.2022.2049214)

To link to this article: <https://doi.org/10.1080/09687637.2022.2049214>



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Published online: 19 May 2022.



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The stigma-vulnerability nexus and the framing of drug problems

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ABSTRACT

This paper proposes a stigma-vulnerability nexus as a critical incursion into understandings of and responses to drug-related social problems. Considering stigma and vulnerability as sites of ostensibly empathetic interventions that aim to mitigate the impact of illicit substances, it proposes that the two concepts are best deployed when located within the political economy of drug harms. Doing so foregrounds the material inequalities resulting from existing socio-economic arrangements and highlights the limitations of them being politically mobilised in purely cultural-interactional ways, which can serve to overlook structural conditions and justify harmful political choices. As a theoretical perspective, the stigma-vulnerability nexus is therefore concerned with the macro-structural factors that shape both concepts and how they intersect. To demonstrate its value as an analytic tool, it is first applied to the framing of 'County Lines' dealing, where senior gang members are stigmatised, but the wider drivers of vulnerability among the young people they exploit are overlooked. Secondly, the nexus is applied to the case of new psychoactive substances. Here, the perceived vulnerability of young people is used to justify responses that ultimately lead to amplified harms being displaced onto structurally disadvantaged populations such as the homeless and prison inmates, compounding their economic vulnerability and class stigma.

ARTICLE HISTORY

Received 29 October 2021
Revised 6 December 2021
Accepted 23 February 2022

KEYWORDS



Stigma; vulnerability; vulnerable groups; illicit drugs; county lines; new psychoactive substances; political economy; criminal justice; drug dependence

Introduction

Stigma awareness increasingly cuts across a plethora of interventions that promote professedly more humane and empathetic ways of imagining and delivering drug (and other) policies (Global Commission for Drug Policy, 2017). Yet, as with its other uses in policy and research literatures, the term itself is rarely defined with a sufficient degree of theoretical clarity and can point to a wider range of notions, where words such as stigma and stigmatisation, labels and stereotypes, prejudice and discrimination are used interchangeably (Pescosolido & Martin, 2015). In particular, recent contributions from the sociology of stigma have observed the concept's dilution and absorption into the sphere of the cultural-interactional, while simultaneously pointing to its disconnectedness from political economy and the macro-structural field of material/power differentials (Link & Phelan, 2014; Scambler, 2020; Tyler, 2020). Bottom-up efforts that aim to de-stigmatise by altering individual beliefs and attitudes, this body of work claims, have little hope of producing emancipatory change when they ignore the top-down stigma politics mobilised by governments themselves (against welfare recipients, the poor, the disabled, migrants). Imogen Tyler (2020) refers to this as 'stigmcraft', whereby 'classificatory' forms of power from above typify entire populations as undeserving of support. As recognised by such

contributions, the stigma concept's analytical force is best considered through a political economy lens that highlights class disparities of power and material resources between stigmatisers and stigmatised, compounded by other forms of marginality such as ethnicity (Gunter, 2017).

In a similar vein and adding to de-stigmatisation discourses, critical scholars have pointed to the increased inclusion of vulnerability in the social policy arena to account for conditions and factors that see some categories, groups and individuals as being more at-risk of suffering harms. Referred to as the 'vulnerability zeitgeist' (Brown, 2014), despite its benign connotations of support for those most in need, this can arguably obscure interventionist and classificatory logics that blur boundaries of care and control, and silence deepening social inequalities and material insecurities, including those driving drug-related harms (Brown & Wincup, 2020). It has been persuasively argued that a political economy of vulnerability within the risk environments that shape drug scenes recognises that 'vulnerability to drug-related harm is closely associated with social, material and health inequalities more generally' (Rhodes, 2002, p. 92); and that the most harmful patterns of substance use (conducive to high mortality or incidence of blood-borne diseases such as HIV or HCV) tend to be concentrated among the poorest groups and in areas of widespread deprivation (Stevens, 2011). When

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considering both stigma and vulnerability, the wider social-economic arrangements and power relations that frame drug problems therefore must arguably be addressed, rather than narrowly understanding these concepts only through the isolated life narratives and personal circumstances of people who come to use drugs in harmful ways.

Carrying this line of thought into the field of critical drug studies, this paper introduces a novel theoretical perspective referred to as the stigma-vulnerability nexus. This considers the macro-structural factors that shape both concepts, how they intersect and how they interact. As stigma and vulnerability increasingly echo, both implicitly and explicitly, into understandings of drug issues and influence policy responses we argue that developing this perspective allows for critical interrogation and theorisation of contemporary drug issues. Placing theoretical primacy on political economy, the nexus also attempts to foreground the material inequalities resulting from existing socio-economic arrangements and highlights the limitations of stigma and vulnerability being politically mobilised in purely cultural-interactional ways, which can serve to overlook structural conditions and justify political and policy choices.

The paper begins by providing a thorough theoretical elaboration of the stigma-vulnerability nexus, tracing out its conceptual contours. Adopting the nexus as an analytic lens it then considers it within the context of two contemporary case studies. The first concerns responses to 'County Lines' drug dealing, where notions of vulnerability were deployed by political stakeholders and policy makers to de-stigmatise young people involved in illicit drug supply; but equally where their perceived vulnerability depends on the stigmatisation of other categories of actors such as venal gang leaders grooming young victims into the trade (Spicer, 2021a). This obscures a macro-context where government cuts to welfare and youth services have been linked with school exclusions and increased youth participation in 'gang' activities (All-Party Parliamentary Group on Knife Crime, 2019; Black, 2020). The second case study concerns the reception of new psychoactive substances (NPS) (in particular, synthetic cannabinoids) and their adoption by traditionally stigmatised populations such as rough sleepers and prison inmates, in a social context of widespread destitution following cuts to housing benefits but also rehabilitation efforts in criminal justice, in the last decade of austerity (Joseph Rowntree Foundation, 2020). As two distinct case studies, these two recent British drug scene phenomena help explore the dialectics of drug-related stigma and vulnerability by turning to the underlying structural deprivations that punctuate both. In turn, they demonstrate the value of the stigma-vulnerability nexus as an analytic tool.

The political economy of stigma and vulnerability

Critical contributions have recently questioned the political and moral undertones of how stigma and vulnerability appear in the research, policy, and public spheres (Brown, 2017; Scambler, 2020; Tyler, 2020). Recent stigma-focused analyses have noted the concept's dilution and absorption

into the spectrum of the cultural-interactional, while also pointing to its disconnectedness from the macro-structural field of material and power inequalities. This critique follows a long thread of research interrogating Ervin Goffman's (1990) influential theorisation of stigma as an 'attribute that is deeply discrediting' (p. 3). Goffman's definition primarily focused on how discrediting attributes (from 'tribal' affiliations such as ethnicity or religion, to physical deformities and disabilities, to 'blemishes of character' such as addiction or mental illness) complicate the micro-interactional strategies of those who come to bear the devaluing stereotypes inscribed into such 'spoiled identities'. This has subsequently inspired an abundance of inquiries in fields including social psychology, the medical sciences and disability studies (see Hatzenbuehler & Link, 2014; Manzo, 2004; Muller, 2020; Parker & Aggleton, 2003; Pescosolido & Martin, 2015). Yet, despite his career spanning some of the most significant freedom struggles of oppressed groups in modern American history such as those of the Civil Rights Movement, Goffman's work on the concept remained largely apolitical and primarily devoted to individual performances within interactional arenas. It was therefore arguably theoretically decoupled from the macro structural orders and power disparities that had spurred the resistance movements of his times (Tyler, 2018).

Link and Phelan (2001) are among those who notice, counter to Goffman's influential formulation, that stigma sits naturally closer to macro-sociological analyses of structural inequality where it predicts (reduced or lower quality) life opportunities, employment, housing, and material circumstances more generally, suggesting that 'stigma exists when elements of labelling, stereotyping, status loss, and discrimination co-occur in a power situation that allows these processes to unfold' (p. 3). In this sense, stigma power—meaning stigmatisers' power to exploit, control or otherwise exclude the stigmatised—can only circulate top-down (Link & Phelan, 2014; Tyler & Slater, 2018). This arguably speaks to the political climate of the last decade in the UK, where top-down definitions of shame and blame have distinguished between the worthy (in-work) and unworthy (unoccupied, dependent) poor to justify the reduction of welfare provision in the British context of state-imposed austerity. Scambler (2018, 2020) reads this as the weaponising of governance by stigma against the lower classes, the disabled and migrants, with the austerity narrative and the dismantling of welfarism serving the neoliberal logic of accumulation for the powerful and perpetual punishment for the powerless.

Tyler (2020) has also recently proposed a sociology of 'stigmcraft'. By this she refers to 'a massive propaganda exercise in which an alliance of political and media forces combined in the production of a welfare stigma machine' (p. 194) where a cast of abject 'figures of dependency' (benefit scroungers or foreigners exploiting the benefits system) were paraded by conservative newspapers, political discourse, and reality television programmes to suggest a sense of an impending budgetary crisis in times of required fiscal discipline. An architecture of symbolic violence with stigma mobilised to create anti-welfare consensus was what ultimately paved the ground for the UK government's adoption of the

Welfare Reform Act 2014, which enshrined austerity in law and led to effective cuts in public expenditure that have since taken an immense toll on the most deprived (Cooper & Whyte, 2017). Ways of seeing stigma as a dynamic cultural force that justifies widening welfare gaps have been adopted into fields such as disability studies to challenge neoliberal framings of individual autonomy that shape the oftentimes debilitating self and societal perceptions of the disabled (Charmaz, 2020; Thomas, 2021).

This critical perspective also considers the uses of stigma as a catchall term informing approaches and initiatives to change attitudes and sensitise public opinion to conditions such as those pertaining to mental health. For instance, efforts under the 'Heads Together' campaign led by the Royal Foundation of The Duke and Duchess of Cambridge (n.d.) have aimed to tackle mental health stigma, together with the British Parliament, charities, corporate sponsors, and other personalities from the world of sports, media, and culture. But by not anchoring stigma in the political economy, anti-stigma campaigns conceived this way (and often endorsed by influential actors) appear to offer limited potential for effective change themselves, as they deploy the concept in purely cultural-relational terms. Their focus is on changing individual beliefs, attitudes, and actions towards mental health from the 'bottom-up' to conceive of stigma as something that individuals do to each other. Yet, they have little to say about addressing the policy choices inflicting severe cuts to treatment services or the wider economic climate that has seen mental health problems surge (Tyler & Slater, 2018).

Similarly, vulnerability has recently become a prominent term in policy making, where it largely aims to designate conditions and groups perceived to lead or be exposed to harms or enhanced risks of being harmed (Cops & Pleyzier, 2011; Green, 2007). A 'vulnerability zeitgeist' (Brown, 2014) has informed policy areas as diverse as the resilience of socio-ecological systems confronted with climate change or other security threats (Adger, 2006; Cutter et al., 2003; Furedi, 2007); legal and social understandings of incapacity of choice and protection for vulnerable adults or those suffering disability (Dunn et al., 2008; Wishart, 2003); the life course and educational trajectories of children and young people in an increasingly risk-focused and punitive landscape of youth policy (Brown, 2017; Daniel, 2010; Ecclestone & Goodley, 2016); the fear of crime and criminal victimisation of persons and groups deemed as vulnerable (Green, 2007; Rader & Cossman, 2011; Walklate, 2011); or even welfare-focused policing (Keay & Kirby, 2018; Spicer 2021b).

Brown (2017) observes that vulnerability is conceived as resulting from natural or innate characteristics pertaining to the individual (e.g. in childhood or older age), situational factors (resulting from biographical episodes, transgressions and difficulties encountered in specific circumstances), social and environmental factors (resulting from ecological hazards but also socio-economic disadvantages), the universality of the human condition (with its unavoidable ontological and bodily insecurity) or risk-factors that call for increased actuarial control (in health, social care or welfare). Another view proposed by Rader & Cossman (2011) simply separates between

physical (age, gender) and social characteristics (socio-economic status, racial identity) that tie in with differential levels of predisposition to vulnerability. A significant strand of this body of literature has also argued, however, that despite their compassionate undertones, vulnerability-focused interventions also hide the dangers of othering, marginalising and pathologising subjects (Ecclestone & Goodley, 2016).

Though more imbued with care and needs-focused attention that render it qualitatively different to its practically and semantically neighbouring notion of risk, scholars have also raised the prospect of vulnerability's paternalistic and net-widening potential for disciplinary control, as well as to the label's application in stigmatising ways to persons or groups who might differ in their self-definitions to dominant notions of victimhood (Brown, 2011). Such classifications can justify legal interventions (court orders and welfare prohibitions) into the lives of those deemed incapable of assessing their own risks (Dunn et al., 2008). A political language of vulnerability can also serve the neoliberal logic of pushing economically marginalised populations of the supposedly unruly classes of what Tyler (2013) deems 'revolting subjects', into the remit of state control. Exclusion resulting from entrenched inequalities is thus reimagined and conveyed 'as something more palatable and benign, dressing it in a cloak of concern' (Brown, 2017, p. 192). As Fineman (2013, p. 16) equally observes in the American context, when entire groupings are defined and cast with such dye:

The political and legal response to such populations is surveillance and regulation. The response can be punitive and stigmatising, as it is with prisoners, youth deemed 'at risk,' or single mothers in need of welfare assistance. It can also be paternalistic and stigmatising, as are the responses to those deemed 'deserving,' such as the elderly, children, or individuals with disabilities. What these 'populations' have in common is that they are stigmatized.

This is not to suggest that the concept of vulnerability should be abandoned. It is of course recognised that the identification of vulnerability is needed in care practice and that it constitutes the basis of valuable professional work that can aid map out the specific needs of young people and other groups in receipt of state-funded services. Equally, it is worth acknowledging that academic or policy perspectives and definitions of vulnerability often differ to those employed by practitioners or indeed to those of the recipients of interventions (Children's Commissioner, 2017). The argument being put forward here proposes that primary acknowledgment of economic deprivation can be the common ground that informs both research and welfare efforts, as well as the quality of care received by beneficiary groups. Equally, anti-stigma efforts can be a positive cultural force for change but not solely on their own, as the next sections observe when locating the two terms in the field of drug policy.

The stigma-vulnerability nexus and drug policy

Illicit drugs mark a site of 'othering', where stigma and processes of stigmatisation occur (Room, 2005). Drug-related stigma emerges from historical processes where drugs were

associated with racial, ethnic, sexual or class marginality, framing public concerns about lower class morality (Jay, 2011; Kohn, 2001; O'Malley & Valverde, 2004); and where the expanding disciplinary ethos of modern state bureaucracies ascribed moral conditions of impaired choice-making, unproductive labour or petty criminality (that underlie notions of drug dependency and compulsion) to the sphere of the pathological (Seddon, 2016). A significant body of literature mapping out the intersections between intoxication and stigma (see Lloyd, 2013) has probed into public attitudes and those of health professionals towards (problematic) substance use, the subjective experience of undergoing drug treatment in various health care settings and recovery contexts (Cama et al., 2016; Radcliffe & Stevens, 2008; Simmonds & Coomber, 2009), and the negative labels or stereotypes about addiction disseminated by the media that cascade into the lifeworlds of oftentimes disadvantaged groups (Atkinson & Sumnall, 2021; Ayres & Taylor, 2020; Linnemann et al., 2014; Taylor, 2016).

The concept of vulnerability also now flows through English drug policy. The 2017 *Drug Strategy* (HM Government, 2017) acknowledges various vulnerable groups predisposed to experiencing more severe drug-related harms than others. This includes young people, offenders, families (and their children), victims of abuse, sex workers, the homeless, veterans, or elderly people with histories of substance use and health issues. But as Brown and Wincup (2020) point out in their detailed analysis, the strategy largely remains silent on the socio-economic status of those seen as vulnerable and the political forces that can determine it, by suggesting marginal conditions such as homelessness to occur circumstantially in the lives of people who use drugs (see also Stevens, 2011). Brown and Wincup (2020) similarly raise doubts about the 'good intentions' of labelling vulnerability, which 'often becomes unintentionally pejorative with stigmatisation as a potential subjectification effect' and can just result in a 'repackaging of stereotypes' (p. 5) that inadvertently widens the symbolic distance between the 'normal' and the 'vulnerable' it was meant to alleviate.

A stigma-vulnerability nexus can therefore be observed in stigmatising formations that result from the separation of groups that are seen to be different in their ways of being and experiencing harm. If the acceptance of vulnerability is understood to possibly constitute a de-stigmatisation strategy, it is clear it can have the opposite effect. This echoes in the drugs field, where underlying notions of dependency surround both stigma and vulnerability. For example, if the state of biological and developmental dependency is inherent and inevitable in the human life course—in infancy, illness, disability, old age—political constructions of the liberal, choice-making subject that value personal autonomy, do little to reflect that reality (Fineman, 2013). Looking at drug-using subjects and groups, a twofold stigma of addiction extends equally to the substance fixated on (Alexandrescu, 2020) as well as to the vulnerabilities that amplify its harmful use (housing and income status, school exclusion, mental health disorders etc.) (Lloyd, 1998). This signals dependency in relation to drugs but also to the authority of the state and the help required of others (welfare agencies, foster care, charity

etc.) (see Wincup & Monaghan, 2016). Strategies of 'responsibilisation' (Roy & Buchanan, 2016) reflect corresponding ideals of self-sufficiency in the English drug strategy (HM Government, 2017), among other notions by setting out aims to build resilience for young people through health or educational programmes, to empower them to make 'the right choices' (Brown & Wincup, 2020).

A macro-structural lens focused on inequality, injustice, and deprivation, expands the analytical scope of stigma-vulnerability, where both states are relevant to all actors involved in drug markets and where both lead back to poverty, inequality and the lack of hope engendered by a decade of austerity governance. It also foregrounds the ideological nature of policy making, building on the work of those such as Stevens (2011, 2021) who highlight the deficit of structural interventions introduced with the aim of reducing inequality compared to policies considered 'tougher' and more politically expedient. Using the nexus as an analytic lens, the remainder of the paper will discuss such dialectics that inform the UK drug policy landscape with reference to two recent developments.

County Lines drug dealing: stigma as blame, vulnerability as victimhood

The recent high profile UK drug market phenomenon referred to as 'County Lines' provides a useful case study for illustrating the stigma-vulnerability nexus. The term refers to a heroin and crack cocaine supply model where dealing networks from major cities set up retail markets in more provincial areas (Coomber & Moyle, 2018). Since this supply practice was first formally identified (see National Crime Agency, 2015), it has generated significant amounts of attention from politicians, law enforcement and the media, rippling out into the wider social consciousness. Particular attention has been placed on the involvement of young people, the nature of their involvement and the harms they can experience. Drawing on the stigma-vulnerability nexus to analyse understandings surrounding the involvement of young people in County Lines demonstrates how the two concepts have been deployed to frame the problem, set the associated agenda, and guide formal responses. Importantly, it also demonstrates the dynamic relationship between vulnerability and stigma. The two concepts are often reliant on each other, being regularly placed in direct opposition, with attempts to stigmatise certain groups linked to legitimising the apparent vulnerabilities of others. But closer inspection also reveals what is not considered when vulnerability and stigma are discussed in this way, with concerns of political economy overlooked.

Similarly to other contemporary areas of UK drug policy (Brown & Wincup, 2020)—as well as social policy more widely (Brown, 2017)—the establishment of the County Lines phenomenon has rested on the mobilisation of a particular conception of vulnerability. The concept is almost universally foregrounded in the body of literature published on the topic and used as a central way of understanding the problem. This is visible in official reports (e.g. HM Government, 2018;

National Crime Agency, 2018), academic work (e.g. Moyle, 2019; Spicer, 2019; Windle et al., 2020) and publications from specialist organisations (e.g. St Giles Trust, 2018). While present in other aspects associated with County Lines such as the practice of ‘cuckooing’ (see Spicer et al., 2020), it has been particularly prominent in discussions about young people involved in drug ‘running’ activities. Typically originating from the cities where County Lines supply networks form, young people have been found travelling often long distances to transport drugs, then spending prolonged time periods in foreign locales physically distributing them within satellite markets (Robinson et al., 2019). At one level, discussions of their vulnerability have stressed the range of serious harms that being involved in County Lines exposes them to, including violence and extended time away from home (Harding, 2020; Windle & Briggs, 2015). But at a second, more fundamental level, discussions of these young people’s vulnerability have suggested that their very involvement in this drug market activity should be understood as a result of them being forced, coerced, or exploited (McLean et al., 2019).

In this second sense, representing young people involved in County Lines as ‘vulnerable’ can arguably be considered an attempt at de-stigmatisation. Young people have of course long been involved in drug markets in the UK (see Dorn et al., 1992; Lupton et al., 2002), with many facing the sharp end of the criminal justice system and being punished for supply related offences. But by explaining young people’s involvement in County Lines drug supply as the result of them being exploited, an alternative signal is sent out that they should not be considered criminally culpable. The recent promotion of the category of Child Criminal Exploitation (CCE) and its seemingly purposeful parallels with the more established category of Child Sexual Exploitation (CSE) is demonstrative of this. The establishment of CSE stressed the importance of recognising that young people involved in certain forms of sexual activity should be considered victims, rather than being blamed or stigmatised (Melrose, 2013). Similarly, the recent promotion of CCE rests on the corresponding argument that young people involved in drug supply should be viewed as victims of exploitation, rather than responsible for the criminal activities they are involved in.

Notable from how vulnerability has been politically conceptualised and deployed in this context is how it is framed in relation to the specific threat of exploitation young people face from others. Put simply, their vulnerability is considered to stem from interactions with older dealers positioned above them in the County Lines networks, who expose them to the drug market and coerce them into undertaking related activities. Parallels between CCE and CSE are again visible. Similar language, for example, is evoked, with County Lines argued by some to represent the next ‘grooming scandal’ following some infamous UK sexual exploitation cases (see Andell, 2019). It is here where the dynamic features of the stigma-vulnerability nexus also become particularly apparent, with this conceptualisation of vulnerability seemingly reliant on a mobilisation of stigma. By explaining young people’s involvement in County Lines as resulting from their vulnerability to exploiters, those responsible for such exploitation

are presented in a certain way. In short, by attempting to remove the stigmatisation of young people involved in drug supply as being criminally culpable, an intensified stigmatisation of those considered responsible is pursued.

Such intensified stigmatisation has been partly achieved through the discursive techniques of ‘gang talk’ (Hallsworth, 2013), used to describe the increasingly ‘evil’ senior County Lines members who employ evermore ‘ruthless’ grooming methods to ensnare young people into their networks (see Spicer, 2021a). Such discourse has been prominent across multiple spheres, with politicians regularly being outspoken. Home Secretary Priti Patel, for example, recently stated in parliament that ‘we will not tolerate the abhorrent gangs that are terrorising our towns and exploiting our children’ (as cited in Hansard, 2020). Frequent, alarmist reports from various sections of the media have also been common. The Daily Mail newspaper (10 January 2020), for example, suggested that: ‘The odds are that ‘county lines’ drug dealing has already arrived in a town near you, bringing with it a wave of gang culture, addiction, knife crime, heartache and the trafficking and even murder of children’. Even an article in the traditionally more sober Guardian (4 October 2019) stated that ‘child slaves are being recruited in our communities, under our noses, in parks, town centres and outside schools across the country’. Before going on to suggest that:

The grooming process starts with gifts that appeal to children—sweets, some money, a bag of cannabis—and ends with children psychologically chained to a very dark world with no escape. Controlled through terrifying threats of severe violence, addiction and brainwashing, children will do what they are told.

Of course, recognising that young people involved in drug supply can be subjected to coercion by those taking advantage of power imbalances is undoubtedly a welcome development (Robinson et al., 2019). However, overly centring young people’s vulnerability on their interactions with ruthless ‘gang masters’ and explaining their involvement solely as a product of grooming and exploitation arguably closes off important considerations of the deeper mechanisms that may be driving young people’s involvement or making them ‘vulnerable’ (Spicer 2021a). Similarly to how Tyler (2020) has stressed the value of connecting the concept of stigma to macro-structural forces, in this case it appears worth connecting vulnerability to such forces too. Rather than young people’s vulnerability to County Lines simply being understood through an interactionist lens based on their relations with elder drug suppliers, it is arguably more appropriate to draw on the perspective of political economy and its tradition in criminology (see Reiner, 2020), and consider the macro forces that can make young people ‘structurally vulnerable’ (Bourgeois et al., 2017) and propel them into the County Lines drug supply.

An exhaustive account of all the relevant political economic factors is beyond the scope of this paper, but a couple of illustrative dimensions can be identified. One area to consider, for example, is how the rise in County Lines has occurred alongside the collapse of youth services in the UK, with the sector experiencing £400 million worth of spending cuts over the past decade and over 750 youth centres being

closed (Unison, 2016, 2019). Another involves how the County Lines phenomenon has coincided with a significant increase in permanent school exclusions (see Black, 2020; Just for Kids Law, 2020), with the apparent connection between these and the neoliberal 'academisation' of education provision and the practice of 'off-rolling' students to remove them from school examination statistics, worthy of consideration (Graham et al., 2019). The strains experienced by an underfunded children's social care sector and the consequences for those within it are a further relevant area of note (see Independent Review of Children's Social Care, 2020).

More broadly, through the lens of political economy it is worth highlighting the experiences many young people face of growing up in a highly unequal society that simultaneously valorises consumer capitalism while offering limited, demeaning and often precarious employment. Aligning with a wealth of criminological scholarship, Irwin-Rogers (2019) refers to such experiences as a 'toxic trap' (see also Densley & Stevens, 2015). While not overlooking that young people can be exploited by elder figures in drug supply networks, he suggests that 'such coercion is by no means universal; for many young people, their involvement is predicated predominantly on the fast money and material rewards associated with drug distribution' (Irwin-Rogers, 2019, p. 592). Such observations cut to the core of our argument regarding the role of vulnerability and stigma in this case: while young people are of course vulnerable to exploitation from those who likely deserve to be denounced for such acts, understanding their involvement in drug supply within a political-economic vacuum provides only a partial appreciation and renders notions of vulnerability and stigma conceptually impoverished. Relatedly, an over reliance on stigmatising those individuals accused of exploitation also deflects attention away from the deeper reasons why many young people might be structurally vulnerable (Spicer, 2021b).

This argument can be developed further when considering some of the responses to County Lines. Following the significant amount of attention the phenomenon has received, a number of responses have been formally instigated, with one of the most prominent, especially in the context of young people's involvement, being the promotion of the use of Modern Slavery legislation (Stone, 2018). The pursuit of such convictions highlights the particular nature of the stigma-vulnerability nexus identifiable in this context and its role in shaping the responses to it. The promotion of this response to the phenomenon by senior officials was predicated on a desire to stigmatise senior County Lines dealers who involve young people within their supply network, with it suggested that being convicted of modern slavery offences would tarnish their reputation, in direct contrast to the perceived 'badge of honour' argued to be generated for drug supply convictions (see Spicer, 2021b). A senior officer quoted in a Crest (2020, p. 38) report, for example, claimed that after County Lines dealers were convicted of Modern Slavery offences: 'they then go on the sex offenders wing and [because of the reputational damage this does] very quickly they'll drop using kids, they'll drop it completely'.

In practice, relatively few Modern Slavery convictions have been secured for County Lines offenders, undermining claims

that it represents a suitable wholesale strategy for effectively responding to the perceived problem. Notably, however, the few successful cases have received significant amounts of attention, with those found guilty being stigmatised as a serious threat to young people and their capture used as evidence of how young people's vulnerability is being addressed. The BBC, for example, reported heavily on one of the first cases, quoting Judge Nicholas Webb who stated during sentencing that the offender's role in involving young people in his drug supply network 'was to exploit their vulnerability' (BBC News, 4 October 2018). Such portrayals directly align with how stigma and vulnerability intersect within this context, with convictions used as evidence that young people's involvement should be understood as consequence of them being vulnerable to exploitation from 'evil' County Lines gangs.

Resting on the interactionist conceptualisations of stigma and vulnerability that the dominant understanding of young people's involvement in County Lines are predicated on, what the modern slavery response risks silencing are the macro forces and deeper mechanisms at play. Championing these convictions and representing them as an effective solution individualises the problem. It focuses on the elder 'monsters' who are enslaving children, rather than the wider, complex social context in which it is happening. It seeks to locate and amplify blame of the problem on certain groups that are easy to stigmatise, rather than going deeper to consider it the product of structural failings (Spicer 2021a). As a result, the genuinely concerning social problem of increasing numbers of young people becoming involved in drug supply activity becomes viewed myopically through a criminal justice lens favouring increased punitiveness. Simultaneously, the potentially insightful conceptual tools of vulnerability and stigma have reduced explanatory power and serious considerations of why this is happening and how best to respond to it are diminished.

New psychoactive substances: when vulnerability drives stigma

A second area of drug policy that can usefully illustrate the analytic value of the stigma-vulnerability nexus is that of new psychoactive substances (NPS). These were broadly referred to as 'legal highs' before legislative efforts to criminalise their production and sale had driven head shops and the NPS trade into illicit street or online dark markets. In the late 2000s, hundreds of legal and unidentified substances synthesised in China and to a lesser extent in South-East Asia, designed to imitate and fill the gap in supply for illicit drugs such as MDMA, cocaine or heroin, began finding their way to consumers in high income countries, aided by the rise of globalised digital trading fora (Chatwin & Potter, 2018; Hutton, 2020; Measham, 2021). By the end of the past decade, the European Monitoring Centre for Drugs and Drug Addiction (2020) had identified more than 820 NPS. In the UK, public attention initially focused on the synthetic cathinone mephedrone, mostly used by young people. It then shifted to synthetic cannabinoid receptor agonists (SCRAs—'Spice' or

synthetic cannabinoids, for short) that were being increasingly adopted by marginalised populations such as the homeless or prison inmates (Alexandrescu, 2018; Nutt, 2020). Running throughout this were various conceptualisations of vulnerability and stigma.

As noted by Walsh (2017), prohibitionist responses that followed the development of a 'legal highs' market—most notably the Psychoactive Substances Act (PSA) of 2016 which criminalised existing and upcoming NPS under a loose definition and understanding of 'psychoactive effects'—invoked the inherent vulnerability of young people most likely to take them, prompted by a spate of purported fatalities among teenagers brought to the fore by the tabloid media, where mephedrone was (often incorrectly) presumed to have been responsible for the tragic outcome (Alexandrescu, 2014). The initial scheduling of the substance as Class B under the Misuse of Drugs Act 1971, in April 2010, followed reports of tragic stories such as the death of 14-year-old Brighton teenager Gabriella Price who collapsed at a house party after taking the drug (Sun, 24 November 2009), later ruled as resulting from broncho-pneumonia; or those of the 'Scunthorpe 2', 18-year-old Louis Wainright and 19-year-old Nicholas Smith, whose cases were linked with a 'string of deaths' (News of the World, 21 March 2010) allegedly caused by mephedrone, but established by coroner reports to have occurred from a combination of alcohol and methadone (Forsyth, 2012). Parliamentary debates and readings preceding the adoption of the PSA 2016 in both chambers also echoed these accounts and notions of youth vulnerability, as captured by Lord (Paul) Condon's (former London Metropolitan police commissioner) intervention in the Lords (as cited in Hansard, 2015).

There is a real mischief that needs to be dealt with now: the mischief of so-called legal highs, which, tragically too often, are lethal highs. Many families are grieving in this country because youngsters, in particular, have taken these substances and died as a result. The mischief that needs remedying as soon as possible is the spread of so-called head shops and other such shops in many of our major cities around the country. [...] There is [also] real confusion among many vulnerable, naive youngsters, who assume that, because there are head shops or stands at music festivals selling these substances, they must be medically safe.

The new legislation would, in the long run, have the unintended consequences of displacing NPS from high street retailers ('head shops') and more experimental users' repertoires towards economically vulnerable groups in frequent contact with street markets. This would also shift stigma into focus for those affected by the later waves of NPS following the ban. Much attention has gone towards the negative effects of SCRA on such marginalised populations, especially in the aftermath of the PSA that effectively enacted a blanket ban on NPS, allowing the police to crack down on registered outlets selling them and push the trade underground, as revealed by the UK Home Office's (2018) own assessments. Ready integration into the illicit street market, increasingly high potency and non-detectability have made synthetic cannabinoids appealing to rough sleeping adults in urban centres, adding to the medical, mental health, and social harms directly experienced by these groups (Blackman &

Bradley, 2017; Gray et al., 2021; Ralphs et al., 2021). As existing carriers of stigma, they have been further stigmatised by mainstream media and social media users as 'zombies' or 'cannibals' for their increased presence within public spaces, where many would visibly experience the incapacitating effects of 'Spice' (Alexandrescu, 2020; Atkinson & Sumnall, 2021).

This drug policy-initiated market shift coincided with a period of mounting symbolic attacks on welfare recipients by conservative politicians and media outlets aiming to build a sense of anti-welfare 'common sense' and consensus that paved the way for the larger austerity reforms enacted by the UK government (Jensen & Tyler, 2015). At the same time, cuts to housing, unemployment or disability benefits led to evictions and surging homelessness numbers (McCulloch, 2017). At the end of 2020 and before the 'second wave' of Covid-19 infections, the British housing and homelessness charity Shelter (2020) estimated that around 253,000 people found themselves either homeless or living in temporary accommodation, in England alone, the highest recorded figure for 14 years. Similarly, the Joseph Rowntree Foundation (2020) assessed that around 2.4 million across the entire UK faced destitution even before the pandemic, not being able to regularly afford shelter, food, heating, and clothing. On top of this, independent reviews commissioned by the government showed that, despite growing drug-related deaths, funding for drug treatment had fallen by 17% from 2014/15 to 2018/19 (Black, 2020), with the £650 million spent in 2020/21 covering barely over half of the yearly expenditure needed in real terms (Black, 2021).

In this context, the vulnerability of homeless people falling through a thinning social security net could arguably be seen as resulting from policy choices and macro-structural conditions that were shaped by top-down political forces. While some media and political discourse reflected this, stigmatising tropes of 'zombies' became commonplace, with images of rough sleepers experiencing debilitating episodes on SCRA taken by urban dwellers, often being sourced by high circulation news outlets. Headlines such as 'Spice synthetic drug that turns users into "living dead"' (Daily Mail, 10 March 2017), 'The pale, wasted figures caught in a Spice nightmare that's turning Piccadilly Gardens [Manchester city centre] into hell on Earth' (Manchester Evening News, 9 April 2017) or "'Spice zombies" filmed as traders describe "awful drug issues plaguing city centre"' (Mirror, 23 September 2019) mobilised stigma against those presented as dehumanised and potentially threatening presences. Correspondingly, they would also add to a ritualistically rehearsed anti-welfare imaginary that cultivated a sense of dependency stigma attached to the socio-economically vulnerable slipping at the margins.

Alongside this, another dimension of the SCRA problem became visible within the British prison system, with a wave of images and clips filmed by inmates and leaked to the news media, hinting at the impact that synthetic cannabinoids were having on a strained criminal justice sector. 'Spice'-type drugs became popular in the later part of the previous decade mainly as they allowed prisoners to avoid detection in the absence of relevant drug identification tests, becoming the primary drug of choice for an estimated third of the carceral population surveyed in a study (User Voice, 2016;

see also Ralphs et al., 2017). Media coverage reflected this in headlines that depicted a carceral universe slipping out of control: 'Prisoners high on "zombie" drug Spice attempt to dump inmate in bin after he flies into drug-fuelled rage' (Mirror, 17 April 2017); "'Zombie prisoners high on Spice" rule Birmingham prison' (Huffington Post, 4 December 2018); 'Letters laced with zombie drug Spice seized 96 times in past year at prison' (Mirror, 7 October 2019); or 'Prison drug horror: three prisoners die from taking Spice drug smuggled into prison in dead rats' (Sun, 21 May 2019).

Penal and drug stigma were mobilised against inmates in such narrative instances, conveying a worrying picture of disorder, with the SCRA menace suggested to be fuelling the exponential increase in recorded levels of violence, self-harm, and suicide (Ministry of Justice, 2020). A much wider story unfolding in the background pointed to the deep austerity cuts affecting the prison estate. The prison and probation service had its funding reduced by 22% from 2010/11 to 2016/17, inmate-facing officer numbers in England and Wales having dropped by 30% from 2014 to 2017, a period that had seen living conditions degrading in overcrowded and poorly kept facilities, with the provision of meaningful educational and rehabilitative activities diminished for prisoners kept longer hours in their cells, and violent assaults between inmates or against staff growing by more than half from 2010 to 2018 (Ismail, 2020; see also Maitra, 2017, 2020). If the vulnerability of those at the receiving end of such harms is attributable to the vicinity of violent others that gravitate within the system, the systemic 'violence of austerity' itself also needs to be questioned (Cooper & Whyte, 2017).

As Sim (2017) observes, budgetary constraints do not cause violent harms or self-inflicted deaths on their own (nor drugs, for that matter), but rather augment and intensify existing tendencies in the system. Even if acknowledged in the public sphere, a focus on resourcing has done little 'to challenge the binary divide which places prisoners into identity categories comprising the normal, non-vulnerable majority and the abnormal, vulnerable minority' susceptible to risk of self-harm and violent victimisation (Sim, 2017, p. 197). If labels of vulnerability are sought to prioritise and secure funding in times of scarcity, it is the nature of imprisonment itself, 'the degradation and mortification they [prisoners] endure through the corrosive exercise of penal power' (p. 197) that need to be questioned to understand and prevent prison deaths and violence. Notions of vulnerability that split between the 'normal' (non-vulnerable) and 'abnormal' (vulnerable) deflect attention from the larger conditions of vulnerability shared by all inmates, that drugs (used to alleviate boredom or to medicate trauma) sit on top of. Both vulnerability and the stigma that accompanies it appear tied up with such wider forces that determine the material conditions and corrosive labels attached to the stigmatised.

Conclusion

This paper has introduced the term 'stigma-vulnerability nexus' in an attempt to generate greater theoretical depth into how these two concepts are politically deployed, as well

as scrutinising their intersections and interactions. Stigma has long played a prominent role in the drugs field, being the conceptual focus for a vast array of research and regularly emphasised by those working in this area and campaigning to reform drug policy. As part of a wider policy 'zeitgeist', the concept of vulnerability has also generated increased prominence, being regularly referenced by policy makers, practitioners, and beyond. When used appropriately, both have the conceptual capacity to shine light onto important areas of policy and lived experience. Taking inspiration from recent contributions in the macro-sociology of stigma (Scambler, 2020; Tyler 2020), what is often lacking, however, are attempts to connect them to wider factors, with interactionist conceptualisations often providing only partial analytic insight and sometimes obscuring some of the deeper structural forces at play in the issues where they are mobilised.

Demonstrating its value as an analytic tool, the stigma-vulnerability nexus has been used as a lens to analyse two case studies. The recent drug market development of County Lines in the UK demonstrates how contemporary conceptualisations of vulnerability often rely on a simultaneous interactionist mobilisation of stigma, with the vulnerability of one group (young people), understood as being a product of their exposure to others who subsequently face heightened denunciation (elder drug dealers). This understanding and political framing of the problem has notably fed into the responses. Yet, when considered through the lens of the nexus, what is demonstrated are the conceptual deficiencies of how vulnerability and stigma are mobilised. In short, their dynamic relationship and associated informed policy responses, can obscure macro forces, and prevent consideration of alternative conceptions.

Taken in a slightly different direction, the NPS case study further illustrates the analytic value of the stigma-vulnerability nexus in explaining present-day trends in drug policy. Here, policy changes were instigated by fears around the vulnerability of young people to these new and allegedly dangerous substances. They did not generally face stigmatisation for using these drugs but were instead typically characterised as victims when experiencing problems, amplified at times by mainstream media coverage and political interventions. The resulting policy response shifted the problem to two more 'structurally vulnerable' (Bourgois et al., 2017) populations in the form of rough sleepers and prison inmates. Rather than this vulnerability being recognised, however, those affected found themselves further stigmatised and dehumanised as 'zombies', potentially dangerous and discomforting presences inhabiting public space. In turn, this served to silence the existing problems they experienced, and masked the structural failings that created the conditions for NPS to become embedded in their lives.

These case studies illustrate just two analytic avenues of the stigma-vulnerability nexus. This paper should be considered a springboard for further applications, with this theoretical perspective hopefully found by others as a useful tool for analysing further specific areas in the critical drug studies field (and beyond). Conceptually, there is also scope for greater development of the nexus itself. Moving beyond the parameters sketched out here, others may seek to develop

the theoretical nature of how stigma and vulnerability cross over in political and policy texts. One avenue worth exploring concerns how applying the label of vulnerability could be considered stigmatising itself in some settings, with wider literature such as recent discussions around the implications for those providing and receiving 'care' offering potentially useful conceptual insights to draw upon (see de la Bellacasa, 2017). However it evolves, by developing the stigma-vulnerability nexus and using it to inform further lines of relevant enquiry, critical focus can be placed on areas where these two concepts are simultaneously present and increasingly used by various stakeholders and institutional actors to frame problems and inform responses.

Disclosure statement

No potential conflict of interest was reported by the author(s).

Funding

The author(s) reported there is no funding associated with the work featured in this article.

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