

# Navigating Substance Use Services among Sexually Minoritized Women Injecting Drugs in Baltimore

## Authors and Affiliations

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## Background

Sexually minoritized women include those identifying as lesbian, bisexual, queer, etc., and heterosexual women reporting romantic or sexual attractions to women. Sexually minoritized women who inject drugs (SMWWID) occupy a structurally vulnerabilized position at the intersection of gender, sexual identity, and substance use. Longstanding social and health inequities shape patterns of drug use and access to care, especially in urban settings like Baltimore, Maryland. Despite structural vulnerability, limited research examines how urban SMWWID navigate substance use services; understanding their perceptions and engagement is vital for developing responsive, affirming, low-threshold care models.

## Objective

To examine how SMWWID in Baltimore, Maryland, perceive and experience substance use-related services.

## Methods

We conducted virtual or phone-based, semi-structured, in-depth interviews with cisgender SMW in Baltimore, Maryland, between June and October 2021 as part of a larger qualitative study. Interviews lasted 60–90 minutes, were audio-recorded, transcribed verbatim, de-identified, and reviewed. The parent study included 25 participants recruited through targeted outreach. For this analysis, we examined a subset of data from the “Drug Use–Service” code report (n=16 participants). We conducted secondary coding of this subset using team-based analysis, analytic memos, and discussions to enhance rigor.

## Results

Analysis of the interviews identified five central patterns in participants’ experiences: (1) structural precarity constrained service engagement; (2) participants moved between formal treatment and harm reduction services to balance structure with autonomy; (3) stigma and trust shaped service experiences; (4) peer networks functioned as essential navigation supports; and (5) relapse and withdrawal concerns contributed to cyclical, non-linear engagement.

## Conclusions

Substance use service engagement among SMWWID in Baltimore is dynamic and shaped by structural precarity, intersecting stigma, and cyclical patterns of relapse and re-engagement rather than linear recovery trajectories.

## Recommendations

Expanding low-threshold, structurally responsive, sexually and racially affirming models of care may improve trust, continuity, and sustained engagement in substance use services.

## IRB

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