

WASHINGTON STATE MEDICAL ASSOCIATION
HOUSE OF DELEGATES

Resolution: C-19
(A-20)

Subject: Treat Substance Use Disorder Using Public
Health and Medical Principles

Introduced by: Robert Wood, MD, Delegate
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King County Medical Society

Referred to: Reference Committee C

1 WHEREAS, Substance Use Disorder (SUD), the persistent use of drugs (including alcohol)
2 despite substantial harm and adverse consequences, is a serious medical and public health
3 problem afflicting millions of individuals nationally and hundreds of thousands in Washington
4 state¹; and

5
6 WHEREAS, in Washington 1,173 persons died from drug overdoses in 2018 and overdose
7 deaths in our state have been increasing. (In King County in 1997 11 per 100,000 persons died
8 of overdoses, increasing by 2016 to 16/100,000 – a 48% increase.) In addition to deaths from
9 SUD, among persons with SUD in 2017, 44% experienced abscesses, 31% MRSA, and 3% had
10 endocarditis; and

11
12 WHEREAS, our current drug use laws can ruin lives based on a single mistake. Possession of
13 even a small quantity of drugs can land someone in jail and saddle them with a lifelong criminal
14 record, interfering with employment, housing, education, and rehabilitation; and

15
16 WHEREAS, the current drug laws have been disproportionately applied to people of color,
17 greatly exacerbating racial disparities²; and

18
19 WHEREAS, men and women with a history of incarceration have increased chronic health
20 conditions, decreased access to care, and increased incidence of infectious diseases³, including
21 increased rates of COVID-19⁴; and

22
23 WHEREAS, mass incarceration is a major driver of poverty. If not for our current trends of
24 increasing prison population over the past few decades, we would have a 20% decrease in the
25 U.S. poverty rate⁵; and

26
27 WHEREAS, the current coronavirus pandemic has greatly increased the dangers from
28 incarceration, and has heightened the disparities adversely impacting people of color; and

29
30 WHEREAS, instead of fines, legal entanglements, and incarceration, public health strategies
31 would address the harms from substance use disorders by implementing 24/7 triage centers for

¹ “Among people aged 12 or older in Washington, during 2015–2017, 8.6% (or 523,000) had a substance use disorder in the past year, similar to both the regional average (9.2%) and the national average (7.5%).” - <https://www.samhsa.gov/data/sites/default/files/cbhsq-reports/Washington-BH-BarometerVolume5.pdf>

² <https://www.sentencingproject.org/publications/un-report-on-racial-disparities/>

³ <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/incarceration>

⁴ <https://jamanetwork.com/journals/jama/fullarticle/2768249>

⁵ <https://journals.sagepub.com/doi/pdf/10.1177/0011128708328864>

WSMA Policy

Drugs - Treatment

The WSMA endorses court-supervised drug treatment with preservation of physician-patient confidentiality in lieu of incarceration for persons in need of such treatment arrested solely for the use of controlled substances. (Res A-1, A-01) (Reaffirmed A-17)

The WSMA endorses the three central recommendations of the Drug Addiction Treatment Task Force's drug treatment plan: 1) drug addiction treatment should be available to every Washington resident who needs it; 2) drug treatment should be complemented by other needed treatment and assistance, including mental health treatment; and, 3) special efforts should be made to assure that drug treatment, including inpatient treatment, is promptly available to children who need it. (Res A-2, A-01) (Reaffirmed A-17)

Drugs - Substance Use Disorder

The WSMA supports promoting research and attempts to better recognize and address within the medical profession implicit bias and stigma regarding patients who have substance use disorder. (Res C-8, A-18)

The WSMA supports policy that requires any state-licensed entity providing care for substance use disorders to have a medical director at the doctorate level with one of the essential duties of the medical director being to help ensure that individuals are informed of and have access to pertinent FDA-approved therapies as well as other evidence-based interventions. (Res C-19, A-18)

Drugs - Narcotics and Drug Use

The WSMA supports increased state financial resources for substance abuse treatment through alcohol and drug addiction treatment support programs and/or methadone treatment programs. (Res 31, C-89) Amended A-17)

Drugs - Marijuana

The WSMA supports reclassification of marijuana's status as a Schedule I controlled substance to a more appropriate schedule. (Res A-2, A-08)

The WSMA supports efforts to cease the criminal prosecution and other enforcement actions against physicians and patients acting in accordance with state medical marijuana law. (Res A-2, A-08)

Access to Health Care – Health Care Reform in the Criminal Justice System

The WSMA support the development and implementation of a rigorous statewide set of standards for the delivery of health care within the criminal justice system. (Res C-7, A-19)

The WSMA support increased access to preventative and emergent health care, substance abuse services, and mental health services throughout the criminal justice system. (Res C-7, A-19)