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Ending the War on People with Substance Use Disorders in Health Care

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Ending the War on People with Substance Use Disorders in Health Care

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Ending the War on People with Substance Use Disorders in Health Care

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Abstract

Earp et al. (2021) provide a robust justification for the decriminalization of drugs based on the systemic racism that fuels the "war on drugs" and the ongoing harms of drug policies to individuals. The authors' call for decriminalization is a necessary but insufficient step in addressing the entrenched structural, institutional, and individual discrimination that leads to the inequitable and unjust treatment of people with substance use disorder (PWSUD). Nothing short of robust enforcement of existing legal protections and sweeping legal reforms in the regulation of addiction treatment, controlled substances, health care finance, and civil rights law will be adequate to achieve equity and remedy the malignant injustice in this area. This commentary addresses the widespread subrogation of PWSUD in the health care system, which is characterized by the disempowerment, disparagement, and sometimes outright abandonment of patients—a persistent pattern of mistreatment that would spark outrage and condemnation for people with any other health condition.

Keywords: health care, health discrimination, substance use disorder, SUD, health disparities, opioid use disorder, OUD, medication for opioid use disorders, MOUD

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