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NATIONAL

# People struggling with substance abuse are sometimes mistreated by medical providers

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HEARD ON MORNING EDITION

By Katia Riddle

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A program in Seattle is helping people struggling with addiction and homelessness overcome barriers to medical care, including discrimination from health care providers.

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STEVE INSKEEP, HOST:

Drug overdose deaths in this country are at a record high. A preliminary federal count indicates they hit close to 110,000 last year. People recovering from addiction say they face a problem. Doctors treat them differently because of their history. Katia Riddle reports from Seattle.

KATIA RIDDLE, BYLINE: At first, Johnny Bousquet thought he had the flu. But eventually, he got so sick, he went to urgent care. After some tests, the nurses came back. He needed to go to the ICU, they said, immediately.

JOHNNY BOUSQUET: I'm like, the flu is this bad? And they're like, we're taking you across the street. Your A1C is higher than we ever seen before.

RIDDLE: Diabetes. He didn't know he had it. Bousquet, 45 years old, is also a recovering opioid addict. He still takes methadone. He says as soon as the doctor saw that on his chart, she started treating him differently.

BOUSQUET: They're like, how are you feeling and stuff? I'm like, oh, I feel awful. And they're like, we're not giving you anything for pain.

RIDDLE: Bousquet says he wasn't asking for anything for pain, but he did need the doctor to make a call to transfer his methadone prescription. She refused, implying that he just wanted to get high. Bousquet says after that, he couldn't hold it together.

BOUSQUET: I could feel the tears coming down my face. And I was so scared about what was going on with my body. Like, I've never been in ICU before. I was really scared.

RIDDLE: Bousquet works for a program called CoLEAD. They help people struggling with addiction and homelessness get off the street. He says he sees the same kind of discrimination regularly from medical providers towards his clients, like 35-year-old Nick Barrera.

NICK BARRERA: It's already difficult to seek out help for chronic illness, but then when you have that that barrier there, it makes it almost impossible sometimes.

RIDDLE: Barrera is HIV positive. At one point, he says he worked with a doctor for months on his HIV care. Then the doctor found out he was struggling with homelessness and substance abuse.

BARRERA: The nurse came in, and they took out all the syringes in the room and everything like that, just right in front of me. And, you know, I was talking down to like a child, almost. It almost became embarrassing to show up.

RIDDLE: So embarrassing, he quit going and stopped taking his medication. That led to a life-threatening infection and an emergency surgery. Dr. Herbert Duber is an emergency room physician at Seattle's Harborview Hospital. He says he has no doubt people struggling with substance abuse experience mistreatment at the hands of the medical system.

HERBERT DUBER: Yeah, I mean, there's no question that happens. Does it happen universally? No, absolutely not. But does that happen? Absolutely.

RIDDLE: Duber is standing outside the operating theatre of the ER. This hospital is downtown. They see many patients that are dealing with both substance abuse and homelessness. Duber says part of the issue is sometimes people struggling with addiction do try to manipulate the system.

DUBER: Differentiating that is really hard sometimes. We are human. We try to do the best that we can for the patients that we see.

RIDDLE: But he says he and his staff don't always get it right.

DUBER: There is not a clear formula that you can put together.

RAHUL GUPTA: You know, where we are today with addiction care is no different than where we were with cancer 100 years ago.

RIDDLE: That's Rahul Gupta, director of national drug control policy for the White House. He says stigma towards people with substance use disorder is ingrained in the medical system. It starts as early as medical school and continues with government red tape that causes many doctors to shy away from addiction care altogether.

GUPTA: Stigma is not just a consequence of providers but also policies that have allowed that stigma to prosper over the decades.

RIDDLE: Gupta imagines a world in which addiction is treated just like any other medical problem, with clear screening protocols, best practices and robust treatment options.

GUPTA: That we begin to normalize and understand addiction as a disease. And we start to treat people who are suffering from addiction as human beings.

RIDDLE: But federal efforts to cultivate this vision are nascent. Nick Barrera says for patients like him, getting care without discrimination means being able to do his job. He's recently started working again, delivering food.

BARRERA: You know, if I'm not medically stable, on my meds like I should be, I can't physically go out and do a job.

RIDDLE: Barrera's standing outside the temporary housing he's been living in. He's planning to move in somewhere permanent soon with his fiancé. And he wants to get back to receiving the care he needs. He's still struggling with fentanyl addiction.

BARRERA: It is very much a dangerous substance. And it's dumb as hell that I'm taking it.

RIDDLE: He says if he's going to kick this habit for good, he can't do it alone. He needs to rely on a doctor that he trusts.

For NPR News, I'm Katia Riddle in Seattle.

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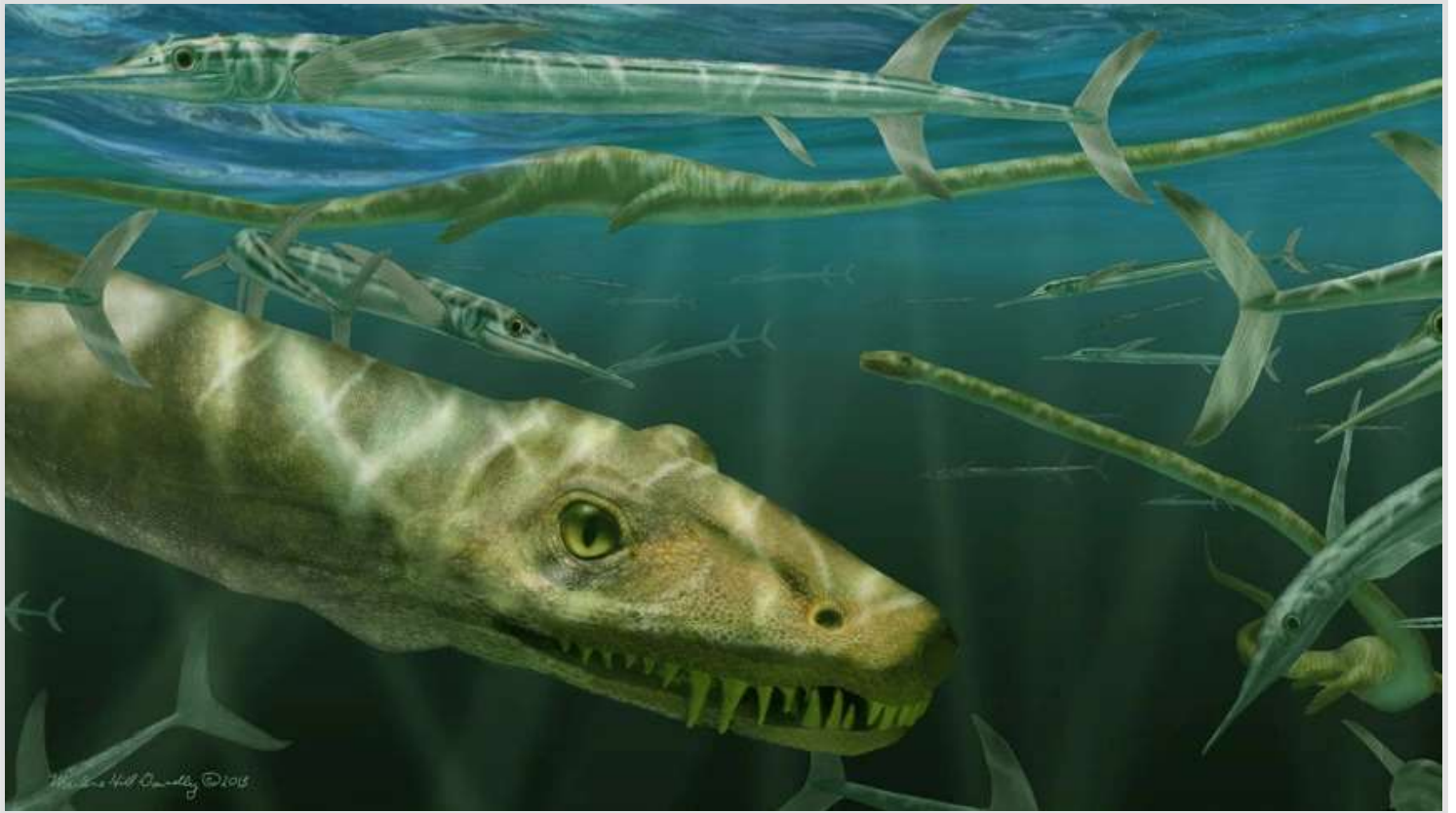
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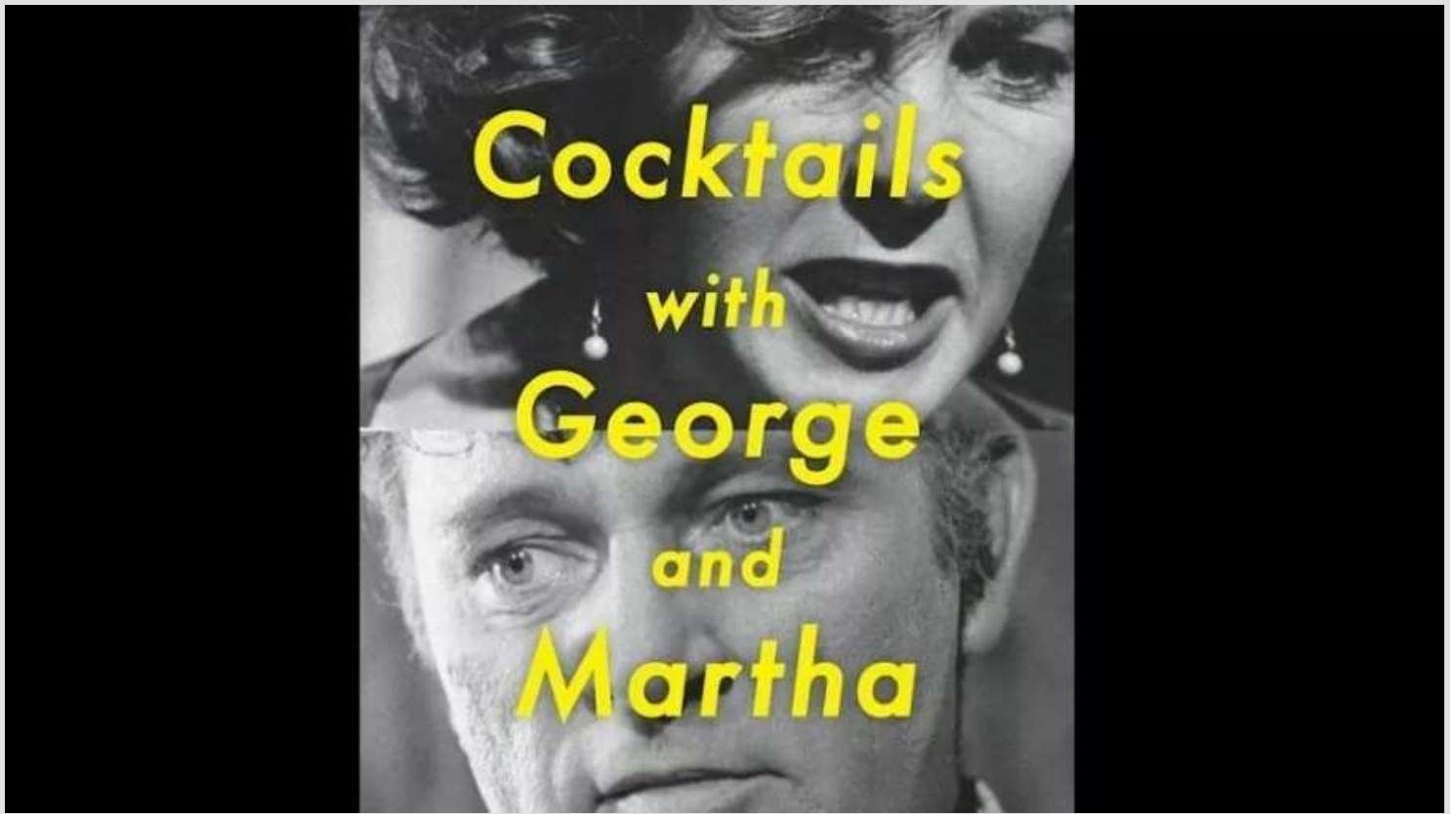
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