A MEMORIAL

REQUESTING THE UNIVERSITY OF NEW MEXICO'S ROBERT WOOD JOHNSON
FOUNDATION CENTER FOR HEALTH POLICY TO CONDUCT A FEASIBILITY
STUDY ON HOW TO ENHANCE AND EXPAND NEW MEXICO'S
HARM-REDUCTION SERVICES RELATED TO OPIOID MISUSE AND
DEPENDENCY.

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WHEREAS, New Mexico has long been concerned about the high rates of opioid misuse and dependency and the impact on the people of New Mexico; and

WHEREAS, the federal centers for disease control and prevention has recently declared the United States to have a crisis and epidemic of opioid abuse and addiction; and

14 WHEREAS, New Mexico is facing opioid overdose death15 rates of unprecedented proportions; and

WHEREAS, New Mexico ranks number one in the country in overdose-related deaths, as reported by the centers for disease control and prevention on November 1, 2011; and

WHEREAS, the rate for New Mexico overdose-related deaths is twenty-seven per one hundred thousand population, more than twice the national average; and

22 WHEREAS, nationally, overdose death rates now outnumber23 traffic fatality rates; and

WHEREAS, the department of health's substance abuse epidemiology unit at the university of New Mexico estimates SM 45

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that there were nearly twenty-four thousand adult intravenous drug users in New Mexico in 2006, and others report that number to be as high as fifty thousand; and

WHEREAS, the federal substance abuse and mental health services administration recently conducted a review of emergency room visits for nonmedical use of opioid analgesics and found that the number of visits for nonmedical opioid use increased one hundred eleven percent between 2004 and 2008; and

WHEREAS, people who use opioids, including heroin and 10 prescription medications, are at risk for health-related harm 11 associated with the use such as blood-borne infections like 12 human immunodeficiency virus and hepatitis C, skin infections 13 at injection sites, venous damage and, ultimately, death due 14 15 to overdose; and

WHEREAS, drug abuse and dependence is a complex issue that requires innovative approaches to harm reduction in drug use; and

WHEREAS, there are evidence-based approaches that are 20 proven to work in reducing the harm associated with opioid use, including medically supervised injection facilities, opioid overdose reversal antidotes such as naloxone, access 22 to safe syringes and access to medication-assisted treatment, 23 including methadone and buprenorphine; and 24

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WHEREAS, individuals suffering from addiction need

SM 45 Page 2 access to high-quality treatment that is health-focused, yet these individuals remain highly underserved; and

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WHEREAS, harm reduction strategies for opioid use and overdose can save both lives and money; and

WHEREAS, there is a need to enhance the existing system in New Mexico and explore more comprehensive and innovative models; and

WHEREAS, medically supervised injection sites are controlled health care settings where drug users can more safely use drugs under clinical supervision, and where they have access to health care, counseling and referral to health and social services, including drug treatment; and

WHEREAS, medically supervised injection sites have 13 proven to reduce transmission of blood-borne viruses, prevent 14 15 overdose fatalities, foster safer injection practices and increase access or referrals to addiction treatment programs, 16 including medication-assisted treatment and detoxification 17 services; savings to taxpayers by reducing societal costs 18 associated with costly emergency room visits and increased 19 20 crime and violence; and a reduction in social harms associated with intravenous drug use, such as public 21 disorder, public intoxication, public injecting of drugs and 22 publicly discarded syringes; and 23

WHEREAS, medically supervised injection sites are best-suited to serve older, long-term users, who are more SM 45

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difficult to reach through more traditional prevention and treatment settings and who often avoid, or have never had contact with, the treatment system; and

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WHEREAS, worldwide, there are sixty-five safe injection facilities in twenty-seven cities in eight countries, including Vancouver, Canada;

NOW, THEREFORE, BE IT RESOLVED BY THE SENATE OF THE 8 STATE OF NEW MEXICO that the university of New Mexico's Robert Wood Johnson foundation center for health policy be 9 10 requested to conduct a feasibility study to evaluate how to expand and enhance opioid harm-reduction services in 11 New Mexico; and 12

BE IT FURTHER RESOLVED that the university of 13 New Mexico's Robert Wood Johnson foundation center for health 14 15 policy explore emerging and novel approaches to opioid harm reduction, including exploring the feasibility of 16 implementing a pilot medically supervised injection site, 17 staffed with medical professionals, to reduce overdose 18 deaths, increase access to health services and treatment and 19 20 further expand access to safe injection equipment to prevent the transmission of human immunodeficiency virus and 21 hepatitis C; and 22

BE IT FURTHER RESOLVED that the university of New Mexico's Robert Wood Johnson foundation center for health policy include in its study input from the department of SM 45

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1 health, the children, youth and families department, the 2 human services department, the interagency behavioral health 3 purchasing collaborative, the behavioral health planning council, the university of New Mexico, the New Mexico public 4 5 health association, the drug policy alliance, the New Mexico 6 women's justice project, the Navajo AIDS network, the Santa Fe mountain center, casa de salud, New Mexico AIDS services, 7 8 health care for the homeless, staff from established supervised injection sites, harm-reduction researchers, 9 10 harm-reduction advocates, people in recovery from opioid addiction and individuals or family members who have 11 experienced an overdose; and 12

BE IT FURTHER RESOLVED that the University of
New Mexico's Robert Wood Johnson foundation center for health
policy report its findings and any legislative
recommendations to the interim legislative health and human
services committee and other appropriate interim committees
by November 1, 2012; and

BE IT FURTHER RESOLVED that copies of this memorial be transmitted to the university of New Mexico's Robert Wood Johnson foundation center for health policy and to each of the agencies, organizations and individuals named to participate in the study.

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