Check It Out! Podcast Transcript
Episode #15
“‘Finding Fixes’ comes to Sno-Isle Libraries”
Sno-Isle Libraries, March 22, 2019

Speaker 1: 00:00:00 Your donation to the Sno-Isle Libraries Foundation reaches across generations with seed funding to help prepare children for kindergarten. For more information, go online and search for Sno-Isle Libraries Foundation.

Jim Hills: 00:00:12 Hi, this is Jim Hills.

Ken Harvey: 00:00:13 And I’m Ken Harvey.

Jim Hills: 00:00:15 Ken tell us about this episode.

Ken Harvey: 00:00:17 Well, in this episode, we're going to spend some time with the Finding Fixes podcast hosts who presented an evening event at Sno-Isle Libraries about their series of reports on the opioid epidemic.

Jim Hills: 00:00:29 That was Anna Boiko-Weyrauch and Kyle Norris.

Ken Harvey: 00:00:32 That's right.

Jim Hills: 00:00:33 They came to Snohomish County to see some of the innovative approaches being taken by agencies and officials here.

Ken Harvey: 00:00:38 Well, you and I spent that evening with them helping to make sure that event went on without a flaw. And we have the opportunity to share with our audience in this episode, some of the excerpts from that event that was recorded live, and also some comments that we captured from members of the audience who attended.

Jim Hills: 00:00:57 I'm looking forward to it. That was a very emotional evening.

Ken Harvey: 00:00:59 Well all that and more up next.

Speaker 4: 00:01:02 The views and opinions expressed on this podcast may not necessarily reflect the official position of Sno-Isle Libraries.
Ken Harvey: 00:01:18 Hey, we want to welcome the audience to this special episode of the Check It Out! podcast, and then you might ask, why is it special? Well, because we are spending time in this episode actually talking to another pair of podcasters, who hosts the Finding Fixers podcast, which put out a series of reports on the opioid epidemic that's been plaguing Snohomish County, Washington, and what the region is doing to respond to it.

Jim Hills: 00:01:47 Anna Boiko-Weyrauch and Kyle Norris of KUOW decided to take a deeper dive into that and they came to Snohomish County and was very interesting to see their approach to the podcast, to the reporting and to the subject matter.

Ken Harvey: 00:02:01 Well, let's listen to a few minutes that I spent with Anna and Kyle just talking to them about why they did the podcast and some of the things that they discovered in the process.

Jim Hills: 00:02:12 Great. Can't wait.

Ken Harvey: 00:02:15 Let's just start with you're describing to us how the podcast came to be. We Finding Fixes?

Anna Boiko-Weyrauch: 00:02:25 As a reporter I had noticed that the opioid epidemic was popping into almost every story I was doing, even though the stories had nothing to do with opioids. I also noticed that people around me were using drugs on the streets, visible drug use was everywhere and you couldn't avoid it ... I couldn't avoid it in my personal life either. And I wanted to know what was going on and why. And the more I read the more I wanted to know what the solutions were. Unfortunately, the journalism that I saw, didn't really talk much about solutions, it just talked about the problem and talked about how dire everything is. I thought, well, this is a really rich area to explore. There's a lot to understand here that I'm not understanding. And I kept me meeting people who were in recovery for opioid addiction, who were really excited to share their stories.

Anna Boiko-Weyrauch: 00:03:33 I was shocked because often you have to convince people to tell their story. But people in recovery wanted to talk about their successes. And so I also thought, well, there’s a lot to get into here. That's when I started to think about the idea. Initially I thought about, well, I'll do a podcast exploring the opioid epidemic and helping people understand what's going on with that. And then I took another step further and thought about, well, what's going to make my podcast unique? And I think what would really distinguish it is to talk about solutions, and solutions are really the most useful thing that we can talk about at this point.
Kyle Norris: 00:04:18 Yeah, and really this is Anna's vision I would say. And I tag teamed with Anna, we're part of a radio club in Seattle. It's a club that meets once a month of professional and enthusiasts, people who like podcasts or want to learn about radio. And this was I think in ... about a year ago, you were saying that you ... You throughout this idea out there and you were like, "So here's what I want to do." And people give you feedback and then I approached Anna and was like, "Hey, I have time on my hands. I'm not really ... I'm in between jobs. I just moved here. I would love to help you report or produce like, I'm on board." And so I jumped on board and we just step by step move forward and started talking to people. And we wanted to focus in on this county, and so we just started fleshing out what we wanted to do, and who we wanted to talk to, and just kept walking forward from there.

Anna Boiko-Weyrauch: 00:05:10 Finding Fixes was not the first name that we came up with. It took us a little while to get to that name. The first name that I was playing around with was a beginner's guide to heroin. And that was when I was thinking about doing the podcast as really exploring the heroin, the opioid epidemic step by step and really understanding it, getting into the weeds. But then as we started moving towards solutions it didn't represent the hope which was to look at solutions.

Kyle Norris: 00:05:45 Well, during that reporting, we definitely bumped up against shame. So often people would talk about it, health professionals would say how that prevented people from getting help. People would tell us about the shame they felt in their own experiences and lives. And so I would say if someone were touched by this issue and they wanted help, yeah, to let go of shame, and to reach out. There are health professionals. There are support groups of people like you, family members who have gone through this who are there for support and can help you.

Anna Boiko-Weyrauch: 00:06:16 Right now we're confronting an enormous crisis, and unfortunately the way that we've always thought about addiction in this society is wrong. That a lot of times it's seen as a moral failure or it's seen as a choice, or people with addiction are seen as weak or defective somehow, and that's not true. The first thing is to overcome the stigma, so that we can actually ... and actually seek facts, because the facts are out there. There are lots of resources to understand addiction as a disease or as a medical condition. Once we understand the true nature of addiction as a disease or a medical condition and not a choice, then I think it's a lot easier to approach it that way. If you or someone you know is struggling with addiction, or somebody
who's overdosed, you're not alone. There are a lot of resources and a lot of places that you can turn to for support.

Anna Boiko-Weyrauch: 00:07:26 For me, I think that the hopefulness of the stories is what kept me on this project so long. Because I kept meeting people who were working with people with addiction, who were in recovery, and they were seeing the transformation in their lives after they stopped using drugs. And they were seeing that it’s possible to reclaim your life, and to be happy and healthy and off drugs. Listening to this podcast, I definitely think that listeners will walk away with an idea that it’s not all doom and gloom. That there are answers and that there are ways out. And that people can and do recover.

Kyle Norris: 00:08:21 Anna and I would often do a full day of reporting, and we drive back to Seattle, from Everett, and just be like, "Wow, whew. Just decompress in the car, or ..." We’d often go get food. We’d report all day and forget to eat. I found we were doing that a lot and be super hungry. But also it’s overwhelming. There’s a lot of moving pieces. There’s a lot of intensity. There’s a lot of pain. There’s a lot of trauma that we’re turning through and walking through as reporters. So it was really heavy reporting, but yet there were always like light human moments. There were moments of hope with everyone. I’m also thinking ... We did a lot that you don't hear in the podcast, we sat in on NA meetings, Narcotics Anonymous meetings. I saw a lot of hope there. People coming through for each other and changing their lives and being raw and real. I saw and felt a lot of hope in those situations, but also from the health professionals.

Kyle Norris: 00:09:14 We spent time at Ideal Options, we spent time with police officers and social workers. And so people who are professionals who are helping, there was hope there in a big way as well. So it's a mixed bag but yeah, there's a lot of humanity too. I think I was bumping up against humanity all the time, and within humanity there's always hope. Even in the worst situations that we were in where people had just used drugs moments before they're talking to us. They wanted to change, there was hope within them. Or when we were in the in the woods behind Costco, with people living in tents they had hope and they wanted to change too. So yeah there's hope.

Jim Hills: 00:09:56 That was really interesting Ken. Just listening to them talk about how they approach this and what they found, very, very insightful.

Ken Harvey: 00:10:04 Well, it shows number one that they cared about what was happening. That they were curious about what was happening
in response to the opioid epidemic. I think the deep appreciation, insight and appreciation that came to them from discovering what responders are doing.

Jim Hills: 00:10:27 I think the other piece that I took away was how personally impacted they were by the stories that they found.

Ken Harvey: 00:10:31 Yeah, absolutely. And I think we'll hear more of that as we get into the actual event that we're going to share some excerpts from. But before we do that, let's just chat a little bit about how Sno-Isle Libraries came to be really be involved in this effort.

Jim Hills: 00:10:45 Really it was I think the kind of partnership that Sno-Isle Libraries looks for in the community. We had the Snohomish County Sheriff's Office, Snohomish County Health District, the executives office and Sno-Isle Libraries all coming together around this issue.

Ken Harvey: 00:10:59 And they simply reached out to us and said, "Hey, would you be willing to host an event like this? Where we can invite members of the community who are affected by the opioid crisis, as well as some of the responding agencies or agencies that are participating in trying to help and deal with this ... would you be interested in hosting this?? And we said, "Yeah, yeah we would."

Jim Hills: 00:11:23 It's really an extension of what we've been doing for the last 10 years with The Issues That Matter series, and so we have some expertise in bringing those kinds of voices together into a room and sharing that, so it was a great partnership.

Ken Harvey: 00:11:36 Yeah, and I want to just echo what you just said about The Issues That Matter. Over the last year or two or three, we've had a number of our own Issues That Matter community forums, panel based discussions that deal with sometimes some really uncomfortable topics, tough topics to talk about. Teen suicide and homelessness. And the most recent series of topics was around mental health.

Jim Hills: 00:12:04 Mental health yeah. The mental health series was really a broad topic. There were a lot of pieces out of mental health. I attended many of those myself. I have to say that I was really impacted on a personal level by the episodes that dealt with Alzheimer's and memory loss. Those are just so important I think in the community to bring those. And this the Finding Fixes podcast and this event that we held here was just another in that series.
Ken Harvey: 00:12:34 Well, you're absolutely right. These are topics that are meaningful, they're tough, they're tough to live through, they're tough to sometimes talk about and it can be really helpful and healing in some ways to be able to do that with others who care about the issue. We are going to come back to ... We're going to take a little bit of a break. And in the break you're going to hear some comments that were collected from some of the members of the audience who attended the evening event. And then after that some excerpts from the Finding fixes event that was hosted by Sno-Isle Libraries, The Snohomish County Sheriff's Department, the Snohomish County Executive’s Office and Snohomish County Health District.

Jim Hills: 00:13:28 Great, looking forward to it.

Speaker 7: 00:13:38 I came out tonight because I wanted to be with like minded people to help solve a problem that's facing Snohomish County, and really tackle the problem head on, and hopefully find a solution for the thousands of people that it's affecting.

Speaker 8: 00:13:55 Well, I have a couple of neighbor kids that are drug addicts and they're selling drugs and I just want to know more about what they're up against. And what can I do? What can I do as a neighbor to try to solve a neighborhood problem.

Speaker 9: 00:14:14 My son was in heroin addiction for four years, and he's been clean for about a year and a half. So my friend Kelly, whose son is also a heroin addict, he's been clean for a while too, she invited me to come so I came.

Ken Harvey: 00:14:31 Thank you.

Speaker 9: 00:14:32 Yeah and I want to see what it was all about.

Speaker 10: 00:14:35 I'm here to support Finding Fixes. I'm with Ideal Option I'm going to be working out of Snohomish County Jail and there's ... Just being able to identify the opioid addiction and abuse, and how we can facilitate change and help identify needs, and really help those people transition into a healthy life.

Speaker 11: 00:14:54 Well, I got a phone call from Lauren Rainbow. I went to treatment about nine months ago, and when I got out of treatment, the Finding Fixes people did a podcast on me. And she asked me if I wanted to come to this event tonight so that I could speak. That's why I'm here.
Ken Harvey: 00:15:24 I'm going to turn the program over to our facilitator tonight, and I want to thank her for working with us to be part of this wondrous event. So Shari.

Shari Ireton: 00:15:39 Thank you Ken. Thank you to everybody who made the journey out here tonight. I wanted to let that this event is being live streamed on Facebook. We have media in the room as well, and it is being recorded for a future podcast that Sno-Isle Libraries is going to put out. So yes, we are having a conversation about a podcast which is being recorded for a future podcast. Before I introduce our two main speakers here tonight, I just want to give you a brief overview of how this event is going to go. First, Anna and Kyle are going to talk about making the podcast. I know I'm especially interested in what they learned about Snohomish County as someone who lives here, I'm pretty close to it, but I'd like an outsider's perspective.

Shari Ireton: 00:16:26 And we have special guests here in the front row. Most of them are featured in the podcasts, we will be directing some questions to them through the evening about topics and subject matter that comes up in the episodes they put together. We will spend a portion of the evening talking about resources, as one of the things I hear all the time from community members is it's a very complex and confusing process to go through treatment, recovery assessment what does it all mean? The good news is we have again subject matter experts up here in the front, who can answer those questions. And then we're going to open it up to questions for you. We know this is a sensitive topic for a lot of folks, so we're going to do the old, write the question on the note card. If something comes up through the evening, you have a question you want asked, I'll go ahead and facilitate those. Write down your question, hold up your note card.

Shari Ireton: 00:17:21 And again, going back to the topic of this being very sensitive, I would just ask the audience to keep an open mind. And remember, there's a lot of folks in this room who have gone through recovery or are in treatment, and just be respectful of the journey they're on. With that, let me introduce Anna and Kyle. Thank you so much for bringing me into this crazy journey. Oh and I forgot one other thing really quick, I want to thank Sno-Isle Libraries by the way for putting this on because frankly, I told them it would be me with an iPhone and probably a yellow reflector vest. So it's very nice to have the pros put something together. Thank you very much. So Anna Boiko-Weyrauch. I'm very happy I can see your name now, and Kyle Norris are the host and co-producers of Finding Fixes, which is an independent media project of Investigate West.
Shari Ireton: 00:18:13 Anna and grew up in Seattle. Born in Spokane correct?

Anna Boiko-Weyrauch: 00:18:16 Born in Spokane.

Shari Ireton: 00:18:17 And is a reporter at Seattle NPR affiliate station, KUOW. In 2010, she was a producer in residence at KEXP and launched a series of stories called Why Music Matters. A nationally syndicated NPR as all things considered, and Finding Fixes she says is her passion project. Kyle is from Michigan and spent 10 years as a host and reporter with Michigan Radio. His stories are driven by deep insights into his character's motivations and personal struggles, and Norris is known for his conversational expressive tone. He can really suck you in when you're on the phone and talk you into doing a podcast. I want to introduce some of the special guests we have here. So I'll just ask you to stand while I embarrass you and read your introduction.

Shari Ireton: 00:19:06 I'm going to start with my boss Sheriff Ty Trenary. He has been the sheriff of Snohomish County since 2013. His career in law enforcement spans almost three decades. Since becoming the CEO of the largest law enforcement agency and jail in the county, he has shifted the sheriff's office focus on addressing homelessness, the opioid crisis, untreated addiction and mental illness and more. In 2017, he received the county's human rights award. And just this past month, the National Sheriffs Association and National Commission on Correctional Healthcare highlighted the Snohomish County jails, Medication Assisted Treatment or MAT program, which we'll talk about later tonight, which is quite an accomplishment for a cop.

Shari Ireton: 00:19:50 Jeff Godfrey is a nurse practitioner with Ideal options. Any of those who've listened to the podcast will recognize his wonderful sultry voice. He has a Master of Science in Nursing and many accents by the way, and has almost two decades of experience. He works with doctors and physicians across the state and in the country to help provide treatment to those in Snohomish County. Heather Thomas is the Public and Government Affairs Manager at the Snohomish Health District. She's responsible for communications and government relations. Earlier this year, she became the president elect of a Washington State Public Health Association. Her work is diverse and dynamic. On any given day you may find her talking about bat bites, measles, or salmonella and opioid overdose. I'm proud to call Heather my heroine mentor and partner in our fight against the opioid epidemic. She's a good friend as well.
Shari Ireton: 00:20:49 Alta Langdon is the Health Services Administrator for the Snohomish County Jail. She received her Master of Science in Nursing from Gonzaga, and it is under her leadership that medical and mental health services at the jail have gone through a major overhaul and partnerships have been established with folks like Ideal Options, Western State Hospital. We now do medical screening and mental health screening of all inmates on booking. And she'll talk about more of that tonight. Deputy Bud McCurry and Lauren Rainbow. They are our Office of Neighborhoods deputy and social worker. The office was created in 2015 and partners law enforcement with social workers to provide services to our most vulnerable residents in the county especially the homeless. Almost all of their clients are dealing with addiction, untreated mental illness or both. And last but not least Angie Gerson is representing Human Services tonight. She's a Behavioral Health Supervisor.

Shari Ireton: 00:21:57 She coordinates behavioral health services across the entire county and manages many, many grant programs. She is also enthusiastic, innovative and amazing, and a great partner to have. With that, I am going to start with the very first clip if you're okay, and then let the two of you talk about it.

Anna Boiko-Weyrauch: 00:22:17 Sure.

Video: 00:22:21 Behind every addiction, there's pain. That statement became real when we were at a clinic in Everett, Washington that treats addiction. And it became real when we met one patient named Amy. She had relapsed on heroin, and on this day, she's thinking of quitting again.

Video: 00:22:40 Which is scary, it's a scary thought to think about quitting.

Video: 00:22:42 But Amy says she's scared. What are you scared about? Amy speaks in a low voice, and even though we're all crammed into a tiny exam room craning forward to hear her, sometimes she's a little hard to understand.

Video: 00:22:57 I don't know, I used to not feel.

Video: 00:22:59 You used to?

Video: 00:23:00 I used to not feel.

Video: 00:23:01 Not feel.

Video: 00:23:02 She used to not feel.
Video: 00:23:06  A lot of wreckage in my past that I have to deal with.

Video: 00:23:06  A lot of wreckage in her past to have to deal with.

Video: 00:23:09  I've been using drugs since I was 12.

Video: 00:23:12  And how old are you now?

Video: 00:23:13  32. Mostly meth until I was like 28, then heroin. So, yeah.

Video: 00:23:24  Yeah, that's a long time.

Video: 00:23:24  Yeah off and on. It is a long time. And like I said my teeth are horrible. I thank God, they've been falling out from the back forward. So the front still looks okay, but it's ... so it's getting pretty close, so yeah.

Video: 00:23:35  Meth is making her teeth fall out. That's a common side effect. But she laughs because at least the ones in the back are going first. That's some dark humor. Amy really taught me something that day. People who aren't addicted to drugs like myself, don't usually understand something very key to addiction. Amy is saying once she stops using drugs, that's when life is going to get hard. She's going to have to feel, the drugs are not the problem, it's the pain of living that's the problem. And pain is driving this opioid epidemic.

Shari Ireton: 00:24:25  I would like to just start with why Snohomish County, and why opioids?

Anna Boiko-Weyrauch: 00:24:32  Why Snohomish County and why opioids. Let's see. Oh, well first I wanted to just comment on what we heard a little bit. That is the first part of the first episode, and I think that ... And I put that at the very beginning because I think that's a key takeaway in all of this, is that the way that we've understood addiction or that we often understand addiction is wrong. That it's a moral failure, when really it's a medical condition and we focus on the drugs, when really we need to understand what is it that is driving people to use the drugs in the first place. We can circle back on that. So why Snohomish County, why opioids? As a reporter, I often find that a lot of ... Sorry, I'm always a little particular about my mic placement. I always find that ... In so many stories that I've done, opioids, drugs addiction have come up even though the story seemingly has nothing to do with it.

Anna Boiko-Weyrauch: 00:25:36  The foster care system, or the criminal justice system, addiction is just ... It plays such a role in so many social issues that we see
and in so many stories that as a journalist you might cover. And so I kept seeing it over and over and over again. And I kept seeing it on the streets of Seattle where I live, that there is a house two doors down from me now that's boarded up. And every so often, and every day I walk by it in fact, and I look in the yard and there's a tourniquet and there's a syringe. So I see it. I see people using drugs in doorways. And I wanted to know why, I wanted to know what's going on. And the more that I looked at doing a project about it, I wanted to find something different, something new, something hopeful too, because there's no way that I could have done all of this reporting and spent a long time, a lot of Sunday's putting this together if it wasn't hopeful.

Anna Boiko-Weyrauch: 00:26:40 Because I also think that at this point there's a lot out there that you can read about why we have an opioid epidemic, why we're in the place that we're in, but we don't know what's working, and how we can get out of the situation that we're in. And why Snohomish County? I live in Seattle so it's close. A lot of times when we think about opioid epidemic people think Ohio, West Virginia, but ... and in the national news, this isn't really the setting from which the opioid epidemic is told. But I thought that what you all are doing in Snohomish County is interesting, and that you have ... Here's a county that from a very high level is trying to tackle this in a different way. And that there are solutions that could be relevant to the rest of the country that are happening here.

Shari Ireton: 00:27:31 I remember Kyle, you called me and said, "What are you doing in Snohomish County?" And I think I probably talked nonstop for about 48 minutes, and I think you said, "Mm-hmm (affirmative), oh that's really interesting. Because I know I was very excited to see government try to come together and break through some of the barriers too. But again, obviously something was interesting to you. I'd love to hear your perspective as well.

Kyle Norris: 00:27:56 Yeah, I'm more of a storyteller, so I'm just looking for characters who are surprising, bodies of government that are doing something for a reason, or people doing something for a reason? I'm just yeah, I'm more of the storyteller. And so I just ... Everything we kept learning about seemed really interesting, different and unique. And I don't know much about this topic at all. I come to this as a journalist, pretty open minded and curious about it. I always wanted to tell good stories. And we kept getting the green light, like you were on board, and you filtered us to people who are on board. And as a reporter, I call it the green light. Where you reach out to someone, and they'll say, "Yeah, I'll talk with you," and like, that's what you want.
And we just kept getting green lights and I was like, let's just keep going and see what happens. It just kept being a green light.

Kyle Norris: 00:28:41 Yeah, I don't know there was something here, I'm from a town that's very much ... A county in Michigan that's very much like this county. This was very familiar to me, even though I've never been here in my life. It just felt right to keep moving forward and see what we stumbled upon in our storytelling.

Shari Ireton: 00:28:55 And you did a great job. One of our goals in the county is to ... We know there's a lot of obstacles in the way. So, so many obstacles, but one of them is to humanize people who are struggling with substance abuse disorders. And what I loved about the podcast when I heard it, when I was brave enough to finally listen to it was, those stories came through. It was humans telling their struggles, or their successes, or how they were being involved.

Kyle Norris: 00:29:24 I teach journalism and radio storytelling to people. I just taught a class last week and I always say this line that if you can tell a good story, you touch people's hearts, and then it opens their ears and they'll listen to what you're saying. So that's always what I'm trying to do, too, is tell a compelling human story that is just meaningful, surprising, and human. And then people will listen to like the facts and the information but you gotta, like hook them first, and reel them in. And so that's what I'm thinking of doing whenever I tell stories.

Shari Ireton: 00:29:51 It's funny because I used to live in Seattle and commuted down there for years. And I remember when I told people we were moving to Snohomish County, their reactions Seattleites reaction was, it was like basically we were moving to the moon. We couldn't. So that's why I'm very curious about your perspective after spending a lot of time at up here in Snohomish County, what you learned about the county and our communities and how we work together. Is it different? Was it what you expected?

Anna Boiko-Weyrauch: 00:30:22 I don't know if I really expected anything or had any image of what Snohomish County is. It's like, I don't know, living in Seattle it's kind of flyover country to get to good hikes and outdoor activities. Sorry, no, I love Snohomish County now. And after this it has occurred to me a couple times like, "Wait a second in Everett, you can park downtown for free right?" And I was like, "You can't park anywhere for free in Seattle, why don't I move to Everett?" It has occurred as occurred to me. I don't know I found everybody to be really welcoming and warm and
open. And I don't know, I like it. I also feel like even though we've spent all of this time here, I don't know that I know the soul of Snohomish County yet, it might take me a little bit longer to-

Shari Ireton: 00:31:22 After 20 years, I'm still looking as well, so don't worry. I'm curious, going out with the Office of Neighborhoods, which we're going to talk about a little later. Did that change your perspective at all about cops and the role they play or social workers? Or was that ... Again did you just come into it with, let's see what they bring us?

Kyle Norris: 00:31:44 I'm always just trying to be open and not know what I'm going to come across, and that's the best way for me to be a reporter, so that's how I was entering it. It's fun. This is a different kind of reporting. We got to really spend some time with the people we were following and see them again and again over months and months. Normally as a reporter, we go in for a day and spend an hour and then come back and bang out a story, right? And it's on the radio sometimes that day and sometimes in a week, so that was a luxury to get to know people and hang out, because then both sides get to know each other, but you get to see them like acting in their natural environment. And even I think we're going to play a clip where we're in the back of the car and it's a conversation. And that just happened and that's always what you want as a reporter is just like life to happen and you just happen to have a microphone recording it. So these scenes happened, and I think that was nice to have happen because we could really spend some time and get to know people.

Shari Ireton: 00:32:33 Well in that time you spent you've developed some relationships with folks, appropriate friendly relationships with the folks in some of the features, and that's probably a new thing as well. Reporters tend to not do that so ...

Kyle Norris: 00:32:46 Yeah, I'm really rooting for a lot of the people in our stories and hope hoping they do well. And it's awesome a couple of people are here tonight, and we text with people. We talked to lots of people that aren't in the podcast. That's another thing, is like we had all kinds of cool stuff, and cool scenes, and cool people we call them characters, but like all kinds of stuff that didn't make it in there, that we stay in touch with people and are like, "How are you doing?" So yeah, it's been meaningful.

Shari Ireton: 00:33:13 Before I jump into our subject matter experts up here, what is the one main takeaway you would want your listening audience to leave with? If there was this one thing you could ask them to keep in their mind there?
Anna Boiko-Weyrauch: 00:33:30 There is hope there, there are solutions. Addiction is complicated, and it's not a choice, but people recover and they recover all the time. And it's possible. It's a medical condition, but it's a treatable medical condition it's not a death sentence.

Kyle Norris: 00:33:54 I guess it'd be something about keeping an open mind or opening your mind a little bit, because that's what I think is working. We're trying to be like, what up with Snohomish County? Why are they doing cool stuff and getting it? And I think it's because a lot of the top players have a ... they're a little more open in general. And all of that, when you put it together, something shifts. And it starts actually with perception and maybe shame and judgment and all those things. So a little openness goes a long way. And then especially when many people have that, it shifts big picture stuff.

Shari Ireton: 00:34:26 I think that's one of the things that's been really interesting sitting in for the Multi Agency Coordination Group. MAC group is to see so many decision makers from such a diverse range of ... you've got fire and EMS, and the sheriff of the county, and the head of public works in the same room all driving in the same direction, and it's very powerful, and it is the secret sauce, I think in Snohomish County that makes us good at what we do.

Anna Boiko-Weyrauch: 00:34:52 I wonder if everybody knows what you're talking about when you say Multi Agency Coordination group, so maybe could you just define that and tell people what that is a little bit.

Shari Ireton: 00:35:01 So back about a year ago, the executive, the Health District and council and Sheriff all agreed to basically call the opioid epidemic in Snohomish County what it is, a very slowly unfolding natural, well not natural, but disaster in our backyard. And directed the Department of Emergency Management. I'm going to try not to use too many acronyms for the non DEM folks. So DEM folks, please don't throw anything at me if I dumb it down too much. The Department of Emergency Management that's our counties agency, that when we have a flood, or a wildfire, or a horrific landslide steps in and coordinates all of us cops, firefighters, Public Health. they came in and set up a structure for us that's called a Multi-Agency Coordination Group. It's one of the pages from FEMAs playbook to use your phrase, that keeps policymakers and decision makers in the room, but in our own lanes so we're not walking over the top of each other.

Shari Ireton: 00:36:08 We meet twice a month. We use a list of SMART objectives. So objectives that are attainable on a timeline. We're all marched in the same direction, and we're reaching our one year
anniversary. We've achieved over 70 objectives. We have, oh, so many more to go. And one of the functions is to have a person who coordinates with media and communications. And so that's my role, and that what was why I was so excited when Kyle asked me, "Hey, would you just say, what up Snohomish County?" I have so many things to tell you. A lot of us work together in 2014 after the landslide, so we were familiar faces who had worked at that time. Approaching this and that from that perspective it was a little weird, but there are times when I remind myself and Heather and I will have these conversations a lot. Okay, how do we approach this problem? What would we do if it was a flood? Well, we would use this mechanism. And it helps us again stay in our own lane, but keep moving forward and not ...

Shari Ireton: 00:37:17 I think some of the challenges our agencies across the country have run into is being either too big, or it ... Either they're too big or the problem's too big and it's hard to move forward.

Anna Boiko-Weyrauch: 00:37:30 And something that's interesting to note about this is that Snohomish County is one of the only counties in the country that is using this approach. And now other countries are calling Sheri ... Counties are calling Sheri and saying, "How do you do this? Is this a thing that might work for us to."

Shari Ireton: 00:37:49 Yeah, so part of the podcast was featured on NPR, and my boss was lucky enough to not be in the office on Monday, but he and I both received multiple emails and phone calls from across the country, Missouri, Massachusetts, Iowa, France, asking us what ... Again, what is that secret sauce? And how are we doing it? I can't say it's perfect, but it's certainly again, we're moving together, and we've broken through some small barriers, and we have other things to do. Getting back to the podcast, episode one deals with Suboxone. And so I wanted to turn over for just a second to Jeff Godfrey, who could probably entertain us with a lot of other things besides talking about Suboxone, but you clearly have a lot of passion for what you do. And I want to talk to you about that. And what why this work is interesting to you and what motivates you?

Jeff Godfrey: 00:38:49 Well, I've been in medicine for quite a while and I've seen things that work and things that don't work. And working through the Emergency Department many years, recognizing that I've started getting an old, kind of hairy old nasty back saying, "That's just another user, let's get them out of the ER." One day I saw a middle aged woman who I had seen at another emergency department three days before coming to a different emergency department with a broken arm. And I realized that
she kept that arm broken for over a year, and she'd never healed it. And all of a sudden, I realized, what are we treating? So my passion turned to pain control and figuring out we're doing something wrong. Working in pain management for a couple of years, and then all of a sudden addiction medicine it's a disease we can heal. We can watch patients get better.

Jeff Godfrey: 00:40:06 And that filled me full of just so much passion, and when I die I'd like on my tombstone somebody to write, [inaudible 00:40:15] to do me a favor, he tried to break a little stigma okay?

Speaker 15: 00:40:19 That's my line.

Jeff Godfrey: 00:40:20 I know but I'm stealing it. Anyway so that's what we do now. I tell my patients I got a lousy bedside manner, I'm going to tell it like it is, and doggone it, they keep coming back. So you can't beat success. Does that answer the question for you?

Shari Ireton: 00:40:40 Yes.

Jeff Godfrey: 00:40:40 All right.

Shari Ireton: 00:40:43 One of the things I wanted to address is there is such a stigma within the recovery community about Suboxone, so I'm going to put you on the spot here to tackle a controversial topic.

Jeff Godfrey: 00:40:54 Cool.

Shari Ireton: 00:40:54 But I know you're a believer so tell us why Suboxone?

Jeff Godfrey: 00:40:59 Why Suboxone? Suboxone essentially is a partial opiate antagonist. What it does is it occupies the mu receptor. And I have tons of pictures and drawings, and I talk to my patients about this, and I bore them to tears. But if the opiates that we have been giving and heroin that we've been using is a full opiate antagonist, this one just partially opens it, and allows your amygdala and hippocampus the two little brats up there that say, "I want some candy. And if you don't give me my candy, I'm going to make you feel like crap." And that's what drives that opiate need constantly to try to stay away from getting sick, because the sick of opiates of what I watched is awful, is more than awful. It is akin to the sickness that people get with chemo, and just the degradation that it does to the human being.
Jeff Godfrey:  00:42:03  Alright so Suboxone, partial opiate agonist, working well in Europe but what do we say? It's just another substitute. We're just substituting one for another. Do we look at our diabetics that are on insulin and Metformin and they keep eating sugar, and we know that's bad for them and they have a trouble stopping it so they keep using the Metformin and the insulin, and the glyburide, and the glipizide and all the different things, do we treat them with that same stigma? No. If this drug then can help people stop the craving, stop the withdrawal and say, "Oh, my God, I gotta life. I can do this." And gives them a wonderful sense of all of a sudden, "Hey, wait a minute, wait a minute. You know what? I don't have to shoot up, I don't have to snort. I don't have to stick it in my butt. I don't ..." Whatever, however, they're getting their med. If it stops them for a moment, and lets them think again. And then we can have that dialogue and say, wait a minute, what else are you missing? What else ... Do we have to talk about how to get a job? And do we talk about what were the triggers? So when I'm working with my patients, and they're on the Suboxone and they're writing in the journal, and boy do I get them about the journal.

Jeff Godfrey:  00:43:29  If they are not journaling you're not stepping up to the plate with me pal. And so I am passionate about that medication. It's not a be all end all, and do people come off of it? Yes. Some people say, "Okay, I've been on it for a year, I've been on it for two years, I've been on it for six months I want to try without." Great, let's wean you off so you don't go through withdrawals again for that drug. And it's so fun to see people come back to me after they've been clean. And they've weaned it down, maybe they're on one milligram a day, maybe they're on 16 ... It doesn't matter but they've got their life back. They are working within themselves to get better, and they've broken their own stigma and that is just empowering for me. So I got a whole new life from my medicine. Yeah, I'll probably do this until I pop off.

Shari Ireton:  00:44:30  Thank you for being so candid. But one of the challenges here and you guys touched on this in the podcast is that finding providers is a challenge. We were talking a little earlier with Jeff and Alta, and you said Ideal Options has three providers on site and 800 patients, and the provider is only allowed to prescribe up to 30 patients. So the math doesn't ...
Shari Ireton: 00:45:02 ... add up. I wanted to have Heather talk little about one of the projects the MAC Group has been working on under the leadership of the health district to try to bring those numbers up, or at least recognize that there's a problem.

Heather: 00:45:16 I'm not sure where I'm supposed to stand. This is complex, and there's a couple things at play. So when a provider that's eligible, does a class and they become wavered in being able to prescribe Suboxone, they have the option of selecting whether they want their information publicly listed. So if they choose private, we can't go in and find out who those providers are. We're working on that. We're working on calling different provider groups to find out how many are wavered. And then there's the other piece of how many slots do they have? So in the first year, if they have 30 slots, are they seeing 30 patients or are they only seeing one or two. If they're not seeing their full capacity why? Is it trying to connect them with patients in the community? Are they having problems with that? We can help. Or are they just trying out to make sure they get the right balance and how to work with Suboxone and work with the clients, or are were they just doing it for one or two patients that they were already seeing, so we're working on some of those pieces.

Heather: 00:46:17 I think Snohomish County has been fortunate that we have a very responsive medical group in our community. A lot of the providers actually stopped prescribing opioids or reduced it for very severe cases. That started happening several years ago. And we also have some big provider groups that have made some big commitments. So community health centers of Snohomish County made a commitment that all eligible providers would be wavered in Suboxone by June 30 of this year. That was a huge move. Molina made a similar ask of their providers. So we're starting to see big groups step up. It's available in emergency rooms. So it's out in the community, but there is still a stigma even within the medical group about, is it possible institution and trying to make it so that we can prescribe more Suboxone and methadone in the community that's outpacing the amount of opioids.

Anna Boiko-Weyrauch: 00:47:08 [inaudible 00:47:08] Yeah. Another, a quick stat about Suboxone, or buprenorphine or this holds true from methadone too, is that these drugs prevent people from dying, it cuts overdose death by half if you're on these drugs, and it prevents ... You are 30% less likely to relapse if you're on a medication like this. So there's a lot of evidence to back up the use of these medications.
Shari Ireton: 00:47:40 Ready to move to another drug, so to speak. Episode Two focuses on ... I remember you said the star of this episode is not a person it's a nasal spray. Some people have called it the Lazarus drug but Narcan the Naloxone. Had you ever heard of Narcan before this project? You had.

Kyle Norris: 00:47:58 A little bit but I didn't know what it was. So yeah, we went to a, like a training where they taught us what it was. And yeah, we're just trying to think of like how a listener would think about it. Like you've heard the word, but you don't know what it is. You shoot it in your arm layer. How do you use it on ... So yeah. So we tried to really explain that in a basic, simple way.

Shari Ireton: 00:48:16 Yeah. And you actually went from learning about it to now you said you carry it.

Anna Boiko-Weyrauch: 00:48:20 Okay. Yeah. I have it everywhere with me. And I actually had heard about it because I had been reporting in Colorado before and they were just starting to equip all of their emergency or their law enforcement agents with Narcan. But, so we went to the training and we learned how to use it, and they gave us boxes and I have one vial with me at all times. I don't have it on me right now, because my purse is in the other room, but it's in my purse. I took it camping with me and my friends laughed. They're like, "What? You think a bear is going to overdose." And I was like, "You know what, guys, you never know when you can save a life." And now I heard recently that YMCAs are going ... and public libraries are now going to be able to get free doses of Narcan from the makers of Narcan as well.

Shari Ireton: 00:49:15 Yeah, it's amazing. I've read so many of our own incident reports when a deputy has literally taken someone who is not conscious, barely breathing to someone, 60 seconds later, who's up and ready to fight the person that's standing between them and the doorway. I wanted to turn to Angie, who's here on behalf of Amy Austin, who is the person who did that Narcan training and talk a little bit about how easy it is to get Narcan and how to administer it.

Amy: 00:49:45 Yeah, thank you. Naloxone or Narcan is available at most pharmacies, Walgreens Rite Aid, you can walk in and talk to your pharmacist about it, and it's also covered by most insurances. You're not always required to have a prescription. So the idea is that the more people that are carrying Narcan or Naloxone the more lives that are saved. I think that you don't know when you're going to park in the parking lot and get out of your car and see that someone is potentially suffering from an overdose. And Narcan, it reverses the overdose immediately. It
brings people back to life. It's an opportunity for someone who is struggling with the impact of their addiction to have a second chance. And we have some great programs in this county. We have some great treatment options. You can't get treatment if you're dead. And you never know if that person that you're able to save is who that's going to be. It's someone's sister, it's someone's Mom, it's someone's son. And the idea is that we worked really hard in the beginning to make sure law enforcement had Narcan, EMS has an Narcan.

Amy: 00:50:54 But the folks that are most likely to come across someone who's suffering from an overdose is a partner or a child, or a mother. And so the more households ... the more persons that we can make sure that have Narcan the more effective that we can be in our community.

Shari Ireton: 00:51:09 That's a great segue into one of the things you mentioned in your podcast, which actually coincided with a conversation we were having in the MAC Group, which is not all overdoses are taking place out in the woods in the homeless encampment. It's something we recognize just working with our partners in the MS. Obviously those of us in law enforcement do see more of the homeless encampments. And what was the number you found that were in home versus was it over 50%?

Anna Boiko-Weyrauch: 00:51:34 It was ... There was a study that was done in Boston, it was something like 60% of drug overdoses happen at home.

Shari Ireton: 00:51:42 So again, we had been seeing that same statistic as well. And one of the things we realized is okay, we're really good ... Well we're getting better at reaching the vulnerable folks in the homeless encampments. What are we doing for the grandmother who finds her grandson overdosed? I'm sure he goes to the ER and now he's got to try to figure out a myriad of very confusing, which we're going to talk about later resources and processes. Do you want to talk a little about the MAC Group's work Heather to try to address that overdoes? Overdoses in the home and providing the support for folks.

Heather: 00:52:19 It's in it's early stages. I'd say one of the benefits of these MAC Group efforts is we've been able to take care of some of the low hanging fruit, and then identify some projects that if we had additional resources we would be able to tackle next. One of those opportunities came, there's a CDC grant, there's been a lot of money funneling from the federal government. And because of our efforts here at the county, we were the second highest county funded through the state for this grant. It's a one-time called a surge grant. And one of those projects will be
working to try to better understand the treatment and recovery pathways. So for that grandmother who's grants overdosed and is now in the hospital ... You see these maps in a hospital or in a school or a shopping mall, you are here. Where do you need to go next?

Heather: 00:53:11 We're trying to help identify, take a right and then go down the hall and go to the left. But that's different from each person. As you said, what works for one doesn't work for each person? So trying to make it as easy as possible, work with all of our treatment providers, work with law enforcement and EMS, the hospitals, to say if you have somebody what are your normal steps for referring them? What are your obstacles? where those gaps or pinch points? And where is government best positioned? Where could we put a pilot in place either geographically or time bound? Is that an evening? Or is it a weekend? Is it a certain spot in the county? How can we help the families and those individuals that have overdose to prevent a second overdose. That's what we're in the process of doing right now. We're excited to see where this goes and then also work with our partners to figure out how Providence can play a role. How the treatment or recovery providers play a role. So government's not going to solve this, Public Health's not going to solve this. It's really all of us coming together to do or pieces to get those Naloxone kits into the hands of people. But ultimately, the goal is to prevent it from even happening in the first place.

Shari Ireton: 00:54:22 This is this project reminds me when we talked, I said it's a lot like eating an elephant, and there are some parts of the elephant that are harder to eat than others. This is going to be one of those, because it's such a challenge to put all those pieces together. I want to transition into episode three, which focuses on the MAC Group. And I want to start off by putting the sheriff on the spot. You talked about being shocked when you became the chief of police of Stanwood, not because you were the chief of police, but because a mother came into your office ... I mean we were shocked but-

Ty Trenary: 00:54:57 It's like winning the lottery.

Shari Ireton: 00:55:02 ... That there was heroin in your community. How has all of this changed your perspective on law enforcement, as CEO of this large law enforcement agency in the jail?

Ty Trenary: 00:55:12 The worst thing you can do is give a politician a microphone, so I'm going to apologize the fact that I have one now.
Shari Ireton: 00:55:16 We'll be here for a while.

Ty Trenary: 00:55:19 Yeah, so growing up here, I actually grew up in Tacoma, but growing up in law enforcement and Snohomish County there's obviously always a lot of trends that you see, there are closely tied to the Puget Sound region. When I had the opportunity as a lieutenant with the sheriff's office to go up to Stanwood and service as their chief, it was really very selfish because I have my two daughters were in school up there. My wife at the time worked in the school system, and so it was just a perfect way to go to Mayberry, and slow down a little bit. And I'll never forget the lady, the mom that came in to see me. And it was very clear that there was a problem, but I couldn't comprehend it because it was Stanwood. It was just a little tiny town where we walk down and get paper and I'd read it three times throughout the day and drink a cup of coffee. It was a it was a really slow town.

Ty Trenary: 00:56:06 But the other part I'll share is I learned a lot of lessons, because we decided, "Hey, we got to get out in front of this." We're going to get the community involved, we're going to get school involved. And I don't know if any of you remember, but pretty sure it was President Obama had come to Boeing to do an interview. And we had advertised we were going to have a big parent night community gathering about heroin in our community. And so all of the media drove from Boeing to Stanwood to participate in this community meeting, which instantly turned to don't move your children to Stanwood they're the heroin capital of the world. So it was kind of just like, "Oops, that was probably not the way to go." But I'll just end with saying that heroin is not an inner city problem. That's what I believed growing up at my age, that heroin was a homeless inner city issue that Seattle, LA, and New York had that we didn't have. And clearly I was way wrong.

Shari Ireton: 00:57:05 The reason we're all here tonight is actually because I'll take you back to 2016 when I was accepted into a program for FEMA, and I was asked to do a capstone project, and I had to get approval from my supervisor, and I said, I have this great project I'm going to do on child abduction. Do you remember what you said to me?

Ty Trenary: 00:57:25 I don't remember the exact words, but I think it was no, that won't work."

Shari Ireton: 00:57:31 It was something like, "Okay, that's fine. But I really wish you could do something about this heroin problem." And it was that paper that got us to the MAC Group in a way. I would love to
hear your take on the MAC Group. Where do you think we are? Is it working?

Ty Trenary: 00:57:50  Well, I think so. Listen, I don't ... Obviously I don't know everybody in the room. I will just say here's the challenge for me. I'm a cop. This is my 33rd year in this business. I grew up in the mindset that a pair of handcuffs and a trip to jail, solved just about anything that I'm responsible for. And I've got some colleagues in the room so I want to oversell myself. But I thought it was pretty good at that. And I look back I was with ... I happen to be with the FBI director and some national leaders and local leaders earlier today, it was fascinating to listen to everybody say the same thing. Why is it taking so long to figure out this pair of handcuffs and a trip to jail doesn't work for this addiction issue, because it doesn't. So the challenge is, this isn't hug a thug. This is what we're being hired to do. Our responsibility is to make the community safe and to create long term solutions.

Ty Trenary: 00:58:45  We're way outside or swim lane. We're way outside on partnering with Human Services and social workers, and talking about treatment, and repurposing facilities. That is not what they taught at the police academy. So what MAC did was it gave us an opportunity to take something that we know. Post 9/11 President Bush implemented the Incident Management System which was to basically teach federal and local governments how to work together after a major event. MAC is a piece of that, that's the 21st century version of what ICS is. And so I will say that sitting down and taking time to figure out how in the world are we here? And what's it going to take to fix it, has really been amazing. Now we've got a long ways to go, but in terms of finally being able to go, "Oh well that's how we got here." This is what it's going to take, it's gonna be slow. There's gonna be future sheriffs after me that are still going to be working on this, but at least we're going in the right direction, and we're seeing people get healthy and they're not coming back to our jail.

Ty Trenary: 00:59:48  Shari is ... I don't know whether you have this later or not, so I don't wanna still this but I'll leave with this. Two major statistics for me that are important, people that are arrested 12 months later, there's a 50% chance, especially with addiction, they're gonna get rearrested, constantly. We had a study we looked at ... We asked our database, give us the names of the people that have been arrested more than 30 times in the last five years, there were 53. I would have never guessed 53 people had been arrested more than 30 times over five years. 85% of those people, addicts. Why am I giving you those statistics? Because
traditional policing and booking and arrest incarceration does nothing to attack the issue, so MAC gave me hope.

Shari Ireton: 01:00:38 Thank you. And you-

Ty Trenary: 01:00:39 [crosstalk 01:00:39] I'm gonna give the microphone away now.

Shari Ireton: 01:00:39 Yes, please somebody take that from him. But it was a great tee up for the next excerpt I'd like to have you play. It's episode four, it's the phone call, because it tee's up our Office of Neighborhoods, our hug a thug marshmallows and Kevlar.

Video: 01:01:00 Lauren Rainbow talks tough, swears often and wears a bulletproof vest. Not your average social. She's on her phone a lot.

Video: 01:01:08 I'm doing ... Oh here we go, hold on. This Lauren.

Video: 01:01:12 Lauren works for Snohomish County in Washington.

Video: 01:01:14 Hey Sam, I know I heard. Dude you were almost at a year. I know man, you're not walking into a lecture, it's all good I was-

Video: 01:01:30 The person is on the phone calling to let Lauren know he's relapsed after not using drugs for a whole year.

Video: 01:01:37 You've been kicking ass and it sounds like you're wanting to get back into treatment. And let's make this a stumble not a fall down the Grand Canyon.

Video: 01:01:48 Lauren is answering this call from the passenger seat of a police car. Her coworker who is driving, motions for her to hand him the phone.

Video: 01:01:56 Hold on, deputy McCurry wants to talk to you, hold on. He relapsed be nice.

Video: 01:02:06 Sam. What are you doing, man?

Video: 01:02:07 Be nice.

Video: 01:02:08 I heard, are you okay? Yeah. Yeah. All right. Are we gonna fix it? Okay, well let's fix it.

Video: 01:02:22 All day long, this social worker and a cop drive around the county helping people struggling with addiction and homelessness, figure things out.
Ken Harvey: 01:02:36 Wow. That was pretty intense and really fascinating.

Jim Hills: 01:02:42 I don't think I realized before that event listening through the people who were involved, first the depth of the problem. You see the headline, I just didn't understand how deep it goes into the community.

Ken Harvey: 01:02:59 Well, for those folks who are listening through that, I can tell you that this was just an excerpt from the entire 90 minutes or so of the program. And it is definitely worth listening, watching the entire thing.

Jim Hills: 01:03:16 And you listen to that and see that because we did have that on Facebook Live. There's a link on the website for that, it's archived there. So we did have that available, and you can you can still catch up with that.

Ken Harvey: 01:03:31 Yeah, and we'll have a link on our show notes so that you can just click on it and pull that up, and also we'll have a transcript of it available if you'd rather just read it to yourself. A lot of very informative discussion and information that was available, and quite frankly some heart wrenching stories.

Jim Hills: 01:03:56 Yeah, listening to the physician and the nurse talk about the kind of things that they're dealing with. Listening to the sheriff talk about his awakening when he was working law enforcement at Stanwood and thinking that he was not likely to be impacted by drug addiction.

Ken Harvey: 01:04:11 Yeah, that kind of stuff doesn't happen in small communities that are so tight knit and everyone knows everyone and [crosstalk 01:04:18] that's just a big city problem.

Jim Hills: 01:04:19 [crosstalk 01:04:19] there's nowhere that wasn't Ground Zero. That was what I took away from that.

Ken Harvey: 01:04:23 Well, it's just kind of like graffiti. You find graffiti in some of the oddest places where you'd figure that wouldn't be happening here.

Jim Hills: 01:04:30 Yeah.

Ken Harvey: 01:04:34 There were also some just real interesting comments from some of the meeting attendees.

Jim Hills: 01:04:39 Yes, I really liked the man who attended, saw the notification, came to the event because he was looking for some information
that he could use in his neighborhood. He saw in his neighborhood drugs becoming an issue, and he wanted to know if there's something that he can do in a constructive way besides just calling 911. So what can he do? How can he better understand?

Ken Harvey: 01:05:03 Well, and knowing who your neighbors are, and becoming aware that there's a problem happening with your neighbors and caring about it.

Jim Hills: 01:05:13 Yeah, caring.

Ken Harvey: 01:05:13 That's what community is supposed to be about.

Jim Hills: 01:05:16 Exactly. Yep. That room was full of people who care.

Ken Harvey: 01:05:20 Yeah. We had all different kinds of people in that audience. We had the sheriff and representatives from the sheriff's department and law enforcement. We had Health District and healthcare professionals there.

Jim Hills: 01:05:34 Individuals who were counting their days of sobriety.

Ken Harvey: 01:05:37 Yeah, so some individuals who actually had ... they had been opioid addicts. And had gone through the process of becoming clean.

Jim Hills: 01:05:47 Yeah, it was just, it was really intense, I think. Very emotional for me.

Ken Harvey: 01:05:52 I have to say, I don't know that ... I don't think that we actually picked it up in the excerpts that we shared here, but well worth going back and watching, listening or reading the entire thing, was just some admission I think from a healthcare nurse that I mean kicking the habit, that it's an ugly ordeal.

Jim Hills: 01:06:13 And that she made her own transition in awareness right?

Ken Harvey: 01:06:18 Yeah.

Jim Hills: 01:06:19 She moved from blame to help, to understanding and that was also really, I think, empowering for others to hear someone on the front line have that same level of transition and understanding and to care.

Ken Harvey: 01:06:34 Right.
Jim Hills: 01:06:35 Just great.

Ken Harvey: 01:06:35 Well, I don't know if you recall, Jim, in the actual event, as they were talking about some of the ways that they are helping to treat this addiction with Narcan and Suboxone, and Narcan I think used for someone who was actually overdosed to bring them back, and then Suboxone to help them essentially start to transition off of the illegal and really bad side of the opioids. That Suboxone helps to relieve some of those symptoms. I remember there being someone in the room who had gone through the treatment, cold turkey. I mean he had gone through the withdrawal cold turkey, and who said he wished that he had been given some of the Suboxone.

Jim Hills: 01:07:19 Yeah, he goes, "Where was that for me?"

Ken Harvey: 01:07:21 Yeah, "Where was that for me?" That was a lighter note, but also a note from survivor overcomer. So that was really meaningful. Also in the audience I think there were some judges there, and some educators, and again just family members of individuals who have been affected, as well as some of the addicts in recovery.

Jim Hills: 01:07:44 Yeah, really worthwhile. I'm glad we could present this on the podcast. I urge folks to go to the the Facebook live recording and take a look at that. It's profound.

Ken Harvey: 01:07:57 Well, we want to thank the sheriff's department and Shari Ireton and Heather Thomas from the Health District, and our contacts in the in the county executives office for their work and all the other agencies and organizations that are part of this coalition, that are responding to the opioid crisis and epidemic in our region. Your work is making a difference. And boy, too many families are being touched with heartache over what's happening and you're providing a sense of hope.

Jim Hills: 01:08:32 There is a community coming together to help.

Ken Harvey: 01:08:34 Yeah, and of course, we also want to thank Anna and Kyle for taking the time to put their podcast together. We just take our hats off to them and appreciate their caring. And I know that they've got a team behind them, a behind the scenes team that are helping them edit and produce a quality podcast, and so we do a shout out on their behalf as well. If you're interested in getting in contact with Anna and Kyle or their team, they can be contacted through their website at findingfixes.com. All one word findingfixes.com.
Jim Hills: 01:09:16 And we'll have those links on the website.

Ken Harvey: 01:09:17 Yeah, we'll have those links there. I want to just encourage everyone to subscribe to this podcast. And you can do that through your podcast ... You can either download a podcast app and subscribe, or you can go to one of the podcast channels, and so wherever you find your podcasts and you can hit the subscribe button which means you get every episode fresh from being posted. You don't have to do anything else, it just magically appears on the device that you listen to it on. Also would like to encourage you to send us an email to maybe suggest additional topics for the future or a guest that you think we should take the time to interview. And of course, we always love your feedback. So we would like to have you send an email to our Check It Out!-

Jim Hills: 01:10:10 Yeah, let us know-

Ken Harvey: 01:10:11 Check It Out! podcast.

Jim Hills: 01:10:12 ... how we're doing.

Ken Harvey: 01:10:12 It's checkitoutpodcast@-


Ken Harvey: 01:10:19 @sno-isle.org just as simple as that.

Jim Hills: 01:10:21 Yeah.

Ken Harvey: 01:10:21 Okay. So yeah, please send us an email with your suggestions or feedback. And if you do, we will enter you into a drawing for a $25 gift certificate courtesy of the Sno-Isle Libraries Foundation. Or you might be eligible for tickets for two to the Edmonds Center For the Arts for an upcoming performance of one of their quality events there.

Jim Hills: 01:10:44 I bet there's some disclaimer that says I don't get to participate.

Ken Harvey: 01:10:48 Yes, unfortunately, neither you nor I, nor any of our behind the scenes team who helped produce this, or any employee of the Sno-Isle Libraries is eligible. But, if you're just a member of the audience, hey, not affiliated with any of us, then you can give us your feedback through your email and you get entered into that drawing.

Jim Hills: 01:11:15 There you go.
| Ken Harvey:          | 01:11:16 | Well thanks again for listening, and we look forward to having you join us for our next episode of Check It Out! podcast. |