

Ider tion peer support counselors Bradley Walser and Casey Gibson stop for a quick photo before heading out to transport a person to detox following a community conversation about opioid use disorder on Thursday, June 27, 2024, at the St. Vincent DePaul Resource Center in Monroe, Washington. Walter and Gibson are part of a pilot program that aims to give transportation to those seeking treatment for addiction. (Ryan Berry / The Herald)

In rural Snohomish County, outreach workers unpack stigma of addiction

How does a person "make that leap" to opioid treatment? Open conversation — like two recent talks in Monroe and Darrington, said April Provost, who is in recovery too.

By Sydney Jackson

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MONROE — Seeing opioid use disorder up close, day in and day out, has made Garret Winfrey reevaluate his approach as a police officer. It's clear people on drugs like fentanyl have "changed brains," said Winfrey, the community outreach officer for Monroe.

April Provost agrees. She has been in recovery for about five years.

"Imagine that you're starving and you're locked in a cell away from food for several days," said Provost, of Everett, who co-leads the Snohomish County Recovery Coalition. "All you can think about is how hungry you are. That's what it's like."



Ideal Option's April Provost helps guide a discussion during a community conversation about opioid use disorder on Thursday, June 27, 2024, at the St. Vincent DePaul Resource Center in Monroe, Washington. (Ryan Berry / The Herald)

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Barriers to opioid use disorder recovery run deep in Snohomish County.

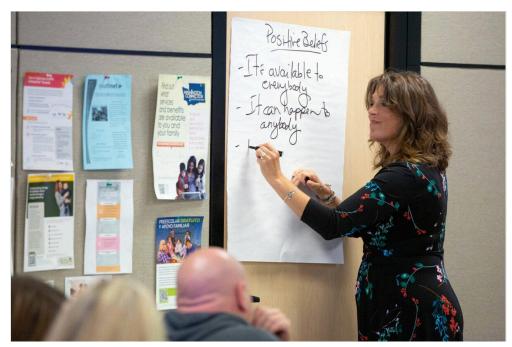
Loc ieaders and recovery advocates say the first step to tear down those barriers is open conversation.

So this week, Provost helped put on two "community conversations" in Darrington and Monroe about opioid use misconceptions and stigma, facilitated by Tedra Cobb, a consult trainer for the Medicine Recovery Center of Excellence based in New York.

Dozens attended the events, part of Snohomish County's efforts to address racial, income and geographic barriers in behavioral health care. Overdoses and related hospitalization rates in the county are <u>disproportionately high</u> among those who are non-white or live in rural areas, county outreach specialists said at a Board of Health meeting this month.

Provost and Erin Lopez, who is also in recovery and works as an Ideal Option outreach specialist, recalled how addiction brought them into situations they never would have imagined.

"It's survival mode," Lopez said.



Tedra Cobb, consult trainer for the Medicine Recovery Center of Excellence out of New York, guides a group in listing positive beliefs during a community conversation about opioid use disorder on Thursday, June 27, 2024, at the St. Vincent DePaul Resource Center in Monroe, Washington. (Ryan Berry / The Herald)

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Opioids caused 269 out of 334 overdose deaths in Snohomish County last year, <u>all-time high figures</u>. Nearly all of those deaths involved the powerful synthetic opioid fentanyl.

Seeking recovery is "the most isolating and polarizing thing you can do," Provost said. "Some people aren't able to make that leap because they're so fearful."

Earlier this year, Snohomish County <u>began distributing</u> thousands of its \$2c, million in opioid settlement money to local recovery agencies. The county plans to spend about <u>\$1.5 million</u> of the first of its 17 settlement installments on direct opioid response efforts.

Provost, who is also the outreach coordinator for drug treatment provider Ideal Option, said her addiction to prescription opioids — and later, street drugs — took root while she lived in the Skykomish Valley. She struggled to find resources on her own, she said. And without transportation, Provost and others she knew had to hitchhike or bike up and down U.S. 2.

Over the past year, federal money has helped map resources in East Snohomish County to identify service needs. The county, partnering with recovery nonprofit Courage to Change, launched a free shuttle for East County residents who need rides to essential services, including appointments at a new Ideal Option clinic in downtown Monroe.

Gold Bar has a mental health clinic, City Council member Lee Russell noted, but access to social services pales in comparison to bigger cities like Everett. A county-led mobile opioid treatment program that will reach Gold Bar is in the works, he said.

Earlier this week, Russell rode along with local deputies as they patrolled the U.S. 2 corridor. Deputies tried to help residents with mental health and substance use disorders, some of whom lived in "unimaginable squalor," he said. The "armed men" refused to <u>travel</u> some roads without backup, he added.

"They're not just acting as law enforcement," Russell said. "They're having to act as therapists, paramedics, social workers in some situations."

People may judge those who use medication-assisted treatment to recover from addiction, said Cobb, the Medicine Recovery Center trainer. Suboxone is the most common medication for opioid use disorder. It's a combination of the opioid buprenorphine and a small dose of naloxone, also known by the brand name Narcan, to prevent abuse. Buprenorphine fills the brain's opioid receptors without triggering the dopamine surge that makes opioids pleasurable and addictive.

Medication is an alternative to detox and 28 days of rehab, a traditional approach that "doesn't work for everyone," said Bradley Walser, a peer outreach specialist who operates the new east county shuttle service. Evidence has shown fentanyl alters a person's brain chemistry days or even weeks longer than other drugs.

"Substance use disorder is a disease," said Dr. James Lewis, the health officer for Snohomish County. "A disease is something you can have through no fault of your own."



Tedra Cobb, of the Medicine Recover Center of Excellence in New York, leads a community conversation about opioid use disorder on Thursday, June 27, 2024, at the St. Vincent DePaul Resource Center in Monroe, Washington. (Ryan Berry / The Herald)

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Community conversation attendees in Monroe agreed local perceptions about drug use and recovery are overwhelmingly negative.

More than 100 Snohomish residents have <u>died from opioids</u> so far this year. But overall, overdoses have declined 20% compared to last year.

At Ideal Option clinics, at least 3,000 Washington residents sought recovery last year. Almost all of them reported confidence in their long-term recovery.

"There are more people in recovery than in active use," Cobb said.

Cobb has trained about 500 people for peer recovery outreach across the country. The goal is to empower residents to start conversations about substance use disorders in their own communities, she said.

Provost plans to host more conversations with residents in East Snohomish County. She also hopes to collaborate with other local organizations to reach multi-cultural and multi-lingual populations.

Meanwhile, Russell plans to use what he's learned to help break stigma against substance use disorder in Gold Bar.

"The attitude we take when people need help makes them not want to get help," Russell said. "I hope people understand that when we help others, we also nelp ourselves."

To make an appointment for the free shuttle on Mondays and Thursdays, call 425-217-7567.



Sydney Jackson is a health reporter for The Daily Herald. Her work is supported by the Health Reporting Initiative, which is sponsored in part by Premera Blue Cross. Learn more and donate: heraldnet.com/health-reporting.

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Medicine Recovery Center of Excellence out of New York, guides a ing a community conversation about opioid use disorder on Vincent DePaul Resource Center in Monroe, Washington. (Ryan Berry

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