

Thurston County Methamphetamine Coalition



DUMPED AND BURNED – THURSTON COUNTY

Spring 2002

Our Mission

“We value our diverse communities and recognize their health and safety is threatened by the epidemic of methamphetamine. In response, we band together to fight the epidemic by creating a comprehensive, measurable program of prevention, treatment, law and justice and cleanup. We will accomplish this mission through a wide-ranging effort involving the entire Thurston County community.”

Coalition Members

Law and Justice

Mark Bolton, Thurston County Corrections.
Ettore Castellente, East Olympia Fire District Six.
Jim Chamberlain, Thurston County Narcotics Task Force.
Jim Chromey, Washington State Patrol.
Phil Comstock, Lacey Police Department.
Larry Dickerson, Lacey Police Department.
Gary Edwards, Thurston County Sheriff.
Ellen Goodman, Thurston County Superior Court.
Ray Hansen, Thurston County Chief Criminal Deputy.
Ed Holm, Thurston County Prosecuting Attorney.
Dan Kimball, Thurston County Sheriff's Office.
Armando Mendoza, Washington State Department of Corrections.
Gary Michel, Olympia Police Chief.
Steve Nelson, Olympia Police Department.
Gary Pearson, Lacey Fire District Three.
Mike Poston, Washington State Department of Corrections.
Susan Sackett-DanPullo, Thurston County Prosecutor's Office.
John Suessman, Lacey Police Department.
Ed Thompson, Thurston County Sheriff's Swat/Lab Team.
Mike Vandiver, Tumwater Police Chief.
Chris Wickham, Thurston County Family Court.

Treatment

Donna Bosworth, Thurston County Public Health and Social Services.
Carolyn Comeau, Washington State Department of Health.
Erik Landaas, Thurston County Public Health and Social Services.
Pat Libbey, Thurston County Public Health and Social Services.
Jeffery RJ Monnett, State Child Protective Services.
Ken Patis, State Child Protective Services.
Bev Peterson, Thurston-Mason County Crisis Clinic.
Shirley Toner, Department of Recovery Services.
Jim Vollendroff, Providence Saint Peter Chemical Dependency Center.
Doctor Diana Yu, Thurston County Public Health and Social Services.

Environmental Cleanup

Gerald Tousley, Thurston County Public Health and Social Services.
Patrick Soderberg, Thurston County Public Health and Social Services.
Eric Heinitz, State Department of Ecology.
Ron Holcomb, State Department of Ecology.

Prevention/Outreach

Jim Anderson, Superintendent, Rochester Public Schools.
Tracy Brown, Providence Saint Peter Hospital Chemical Dependency Center.
Curtis Bush, 3-T Tenino Coalition.
Amy Clark, City of Olympia, Teen Lobby.
Pat Feeney, Union Gospel Mission.
Civillia Winslow Hill, State Department of Health
Jason Lewis, Washington Retail Association
Lis Merten, National Association of Chain Drug Stores.
Alison Roberts, KGY Radio.
Debbie Rosenbaum, Safeplace Women's Shelter.
Brenda Ross, City Of Olympia, Teen Lobby
Kasey Schiewe, Congressman Brian Baird's Office.
John Tennis, Thurston County Public Information Department.

Elected Officials/Others

Gary Alexander, State Representative 20th District.
Glenn Dunnam, Chief of Staff, Office of Lieutenant Governor.
Natalie Peters, Thurston County Resident.
Kevin O'Sullivan, Thurston County Commissioner.
Milt Reimers, Representing Ninth District Congressman Adam Smith.
Sandra Romero, State Representative 22nd District.
Cathy Wolfe, Thurston County Commissioner.

The Challenge

Law enforcement agencies in Thurston County began detecting scattered methamphetamine related crimes in the late 1980s and early 1990s. Since that time, the manufacture and use of meth has risen exponentially and the county consistently ranks third or fourth in the state in such activities. According to statistics kept by the Washington State Department of Ecology, there were six meth labs found in Thurston County in 1995. By the year 2000, that number had jumped to 139.

The increasing popularity of meth has brought with it corresponding program demands for law and justice, treatment, environmental cleanup and prevention. Law enforcement especially, has to confront long-term users who are frequently armed and out of control. “The addiction to Meth that results from abuse is a chronic relapsing disease, characterized by compulsive drug-seeking and drug use that is accompanied by molecular changes in the brain. Addiction often involves repeated and prolonged use of meth for days or weeks. During that time deprivation of food, water and sleep may occur as the user forgets to take care of basic human needs. As a result, physical and psychological symptoms may become unbearable for the addict. These effects may include feelings of aggression, tendency toward violence, paranoia, anxiety and hallucinations. This may bring on a state of toxic psychosis with symptoms similar to those associated with paranoid schizophrenia.”¹

A report prepared by the Thurston County Sheriff’s Office clearly demonstrates the challenges presented by increased crime related to use and manufacture of this highly addictive drug. According to the report, violent crimes increased 31 percent from 1997 through 2000. In the same period, fraud and forgery increased 34 percent. Reported domestic violence cases went up an astounding 95 percent from 1995 through 2000. Responses by law enforcement agencies to methamphetamine labs went from two in 1990 to 59 in the year 2000.² The multi-jurisdictional Thurston County Narcotics Task Force reports methamphetamine seizures worth more than \$2,900,000 from 1998 through 2001. Since 1997 there have been nine homicides related to methamphetamine and there were two deaths in 1999 due to the explosion of a meth lab in rural Thurston County. Reports from the Thurston County Sheriff’s Office show 85-percent of all drug related arrests are for methamphetamine and officials estimate more than 80 percent of all crime in the county is connected to meth sales, use or manufacture in some way.

There are also challenges on the treatment front. The Governor’s Council on Substance Abuse Report shows 112 admissions for amphetamine related infirmities in Thurston County in 1995. Five years later that figure had more than doubled to 257. Another concern is the presence of children when meth labs are busted. Even though the children are not users of the drug, they are victims just the same. In some cases they are suffering ailments due to exposure to the chemicals used to manufacture the drug. In nearly all cases they are suffering from neglect because their parents or guardians have concentrated on creating and using the drug and abdicated most other responsibilities. Chemical Dependency Mental Health Professionals in Thurston and Mason County report at least 50-percent of their crisis calls are related to methamphetamine use.³ Statewide, adult admissions for amphetamine/methamphetamine treatment increased 600-percent between 1994 and 2000 and similar treatment for youths rose more than 50-percent.⁴ Thurston County typically exceeds statewide averages for meth-related ailments and admissions. However, a continuing obstacle in the treatment arena is a lack of bed space for court-ordered and voluntary treatment.

One aspect of methamphetamine that is not present in other illegal drug manufacturing is the environmental damage done by the highly toxic chemicals used in its creation. In

Thurston County meth labs are found in hotel/motel rooms, homes, barns, sheds, garages, trailers, motor homes, cars, trucks and almost anywhere else cooks can find space and the elements needed to create the drug. Vapors from, and spills of, the chemicals can cause various levels of damage to the cooking area and sometimes complete condemnation of the site. Environmental Health officials for the county estimate four to five calls for cleanup each month in 2001. At the end of the first quarter of 2002 a cleanup backlog included 20 homes and 11 other types of structures.⁵ A separate effort is needed to dispose of vehicles that were used to contain mobile meth labs. Cleanup crews have been called out to areas all over the county, including ditches near bus stops and to rural parks, to take care of meth chemicals dumped on the ground. In one case, a Thurston County resident was injured when she opened a suitcase that had been thrown on the side of the road. It contained the toxic remnants of a meth lab.

Prevention of methamphetamine abuse among Thurston County residents is a high priority challenge. A community outreach program, run by the Thurston County Public Health and Social Services Department demonstrates the need. In the year 2000, the county's syringe exchange program replaced 268,000 soiled needles. Estimates show that 30 percent were used by methamphetamine abusers.⁶ Public education is critical as many potential users get a false impression of the so-called benefits of using from weight loss, to increased sexual pleasure to a long-lasting high from the "poor man's cocaine". What they may not know is what hazardous chemicals are used to make the drug or the effects of those chemicals on long-term users. They would not likely know that methamphetamine is extremely addictive. (Some estimates say 90 percent or more first time users become addicted.) Potential users of meth may not know how pursuit of the high becomes the preoccupation of addicts to the exclusion of relationships, sex, food and social activities. They would not know the potential ill effects of the drug including hair loss, skin abscesses from picking at "meth bugs", loss of teeth, inflamed heart lining and more. In addition, the public at large may not know the depth and scope of the methamphetamine problem in their own community. The impact on the criminal justice system, the environment, users and families of users and the general populace must be conveyed in a meaningful and useful manner to begin reparation of this epidemic.

¹ Governor's Council on Substance Abuse report, May 2000

² Report, Methamphetamine Impacts in Thurston County, September 2001

³ Thurston County Prosecutor's Office "Weed and Seed" report, Fall 2001

⁴ Methamphetamine Treatment-Myths and Facts, State Department of Social and Health Services, 2001

⁵ Gerald Tousley, Thurston County Environmental Health Specialist, April 2002

⁶ Thurston/Mason Chemical Dependency Treatment and Support Services Proposal, 2002

Community Reaction

Local governments and agencies came together in September of 2001 to form the Thurston County Methamphetamine Coalition in the wake of a statewide meeting regarding the meth epidemic. The Coalition allows impacted departments and agencies to coordinate efforts to combat the plague presented by meth use and manufacture. But even before the Coalition was formed, extraordinary steps were being taken. Those activities have been stepped up since the coalition was formed. Some of the measures include

- The assignment of a case worker from the Child Protective Services division of the State Department of Social and Health Services to the Thurston County Narcotics Task Force. This facilitates immediate attention for any minor children who may be found at the scene of drug or lab busts.
- The inclusion of medical personnel for baseline assessment and follow up care for minor children.
- The Olympia Police Department and other agencies have been proactive in outreach to businesses that sell the precursor agents used in manufacturing methamphetamine to ensure they understand new laws on the sale of such items. The enforcement of such laws against violators is also a priority.
- The Thurston County Health Department has been instrumental in street level outreach to addicts, including those who are addicted to meth.
- With assistance from the federal government, the Thurston County Prosecutor's Office has begun a Weed and Seed program in the Rochester area of the county. One of the objectives of the program is combating the menace of methamphetamine abuse.
- The Thurston County Sheriff's Office has created a Special Enforcement Team to deal primarily with the meth situation with special emphasis on pursuing drug manufacturers and those who sell methamphetamine.
- Some of the biggest steps in reacting to the meth crisis came in 1998 with the opening of the Unified Family and Juvenile Court. The unified court allows Superior and Juvenile Court officials to track felony drug offenders at the same time dependency issues for the affected families are worked out. Other programs include the Thurston County Drug Court program, also started in 1998. This program is a holistic approach to helping addicts in recovery by combining Superior Court processes with treatment, counseling and other disciplines. Based on that model, the Family Treatment Court program started in April of 2000 with the goal of reuniting dependent children with parents who are dealing with substance abuse problems. While not specific to methamphetamine, officials are finding a high percentage of those in the programs have been meth users.
- The Thurston County Public Health and Social Services Department has been proactive in seeking additional funding for expansion of chemical dependency treatment and support services for disabled addicts, including meth addicts, in Thurston and Mason counties.

- In October of 2001 a Meth Town Hall was held in conjunction with the Thurston County Methamphetamine Coalition. The event drew a packed house to the Lacey Community Center and received extensive publicity in The Olympian Newspaper, on cable access channel TCTV and on KGY Radio.
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The Next Steps

In spite of the extraordinary steps outlined above, methamphetamine manufacture and use continued to climb as Thurston County entered the 21st century. Statistics show the county consistently ranks in the top four out of 39 counties for such activities.

The high number of meth-related crimes and the associated environmental cleanup and child welfare concerns have caused a considerable strain on resources. From the criminal justice system to treatment programs to cleanup options to placement of foster children, the system is struggling to keep up with the epidemic.

Therefore, the Thurston County Methamphetamine Coalition has embarked on a comprehensive, multi-jurisdictional, interdisciplinary effort to fight the meth plague.

Below are some of the goals and objectives of the different committees established by the Coalition.

ACTIVITIES- THURSTON COUNTY METH COALITION

GOALS OBJECTIVES STRATEGIES COMMITTEE TIMELINE

Reduce manufacture and availability of meth.	More proactive meth lab enforcement.	Increase the number of lab takedowns over earlier numbers.	Law and Justice	2002-2004
Slow user purchases.	More street level dealer enforcement.	Increase arrests over previous levels.	Law and Justice	2002-2004
Diminish availability of ingredients used in meth production.	Conduct sting operations against precursor distributors.	Increase compliance with new laws regulating precursors.	Law and Justice	2002-2004
Achieve support levels for personnel and programs to combat meth.	Promote more resources for meth enforcement.	Gain legislative support for funding increases and seek federal funds.	Law and Justice	2003-2005 biennium.
Increase penalties for users/cooks who endanger minors.	Promote drug endangered children statute.	Find legislative sponsors for the revised statute.	Law and Justice	2003 Legislative session.
Reduce the availability of meth from large scale manufacturing rings.	Drug Task Force to combat major meth distribution cases.	Infiltrate and bust large manufacturers with help of other agencies.	Law and Justice	2002-2004
Get those amenable to treatment into an appropriate program.	Ensure that information on treatment is available to frontline personnel.	Cross train law enforcement and treatment personnel. Make timely information available.	Treatment	2002-2003
Provide more treatment for addicts.	Increase the number of treatment spaces available.	Apply for state meth treatment funds. Seek CSAT and SAHMSA funds.	Treatment	2002-2003
Ensure the community knows of treatment challenges.	Create awareness of scope of the problem.	Gather and disseminate information on arrests, admissions etc.	Treatment	2002-2003

GOALS	OBJECTIVES	STRATEGIES	COMMITTEE	TIMELINE
Create community awareness of the depth of the meth problem.	Gain support for anti-meth programs, help people stay and get off of meth	Create speakers bureau, media messages, outreach to schools.	Prevention-Outreach	2002-2010
Make sure addicts, families and others can get appropriate help.	Ensure those impacted by meth have access to needed resources/ services.	Create telephone hotline, web site, appropriate written materials.	Prevention-Outreach	2002-2010
Create communications that are timely and accurate for meth information.	Help community members gain correct knowledge and assistance.	Provide outreach materials and support for related agencies and jurisdictions.	Prevention-Outreach	2002-2010
Prevent unsuspecting people from buying vehicles that were used as meth labs.	Keep such vehicles from harming innocent families.	Create a computer tracking system for mobile meth lab vehicles.	Environmental Cleanup	2002-2003
Provide resources for clean up of contaminated structures.	Gain finances, personnel and training for reparation of contaminated sites.	Seek governmental and grant funding for related program activities.	Environmental Cleanup	2002-2003
Protect the public from contaminated motor homes and trailers.	Destroy condemned motor homes and similar vehicles.	Approach potential funders to seek resources for disposal.	Environmental Cleanup	2003-2005
Protect innocent people from drug labs and related chemicals.	Inform public about labs and the toxic chemicals in meth.	Work with Outreach Committee and the media.	Environmental Cleanup	2002-2004

Conclusion

The cost of methamphetamine manufacture and use in Thurston County is measured in heartbreak and tragedy in virtually all aspects of daily life. But it can also be measured in the expense of Child Protective Services investigations and foster care, criminal justice expenditures, intervention and treatment, mental health and medical care and more. The overall cost, while hard to quantify, runs into many millions of dollars.

Because meth affects so many aspects of the community any solution must be holistic as well. That's why it is imperative for our response to be cross-jurisdictional and interdisciplinary. But in a larger sense it will take every resident in the county to make in-roads into the most significant illegal drug problem in the history of the area. Creation of the Thurston County Methamphetamine Coalition is one of the most important steps in encouraging that cooperation and movement toward a potential solution.

Thurston County Methamphetamine Coalition

WWW.METHMONSTER.ORG

**METH HELPLINE- (360) 586-2800 (Information and referrals, 24 hours a day,
7 days a week from the Thurston County Crisis Clinic.)**
