Strengthening the Focus of Drug Prevention Priorities in Indiana:

A Comprehensive Exploration of Methamphetamine Information and Use

Barbara Seitz de Martinez, PhD, MLS, CPP
September 15, 2010
Outline

• Amphetamines
• History and Forms of Meth
• Administration
• Consumption/Prevalence
• The TRIP
• Manufacture
• Consequences Across the Domains
• Prevention
• Treatment
• Recovery
### 2009 TEDS - Amphetamines-Indiana by Race/Ethnicity

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>93.4%</td>
</tr>
<tr>
<td>Black or African American</td>
<td>1.4%</td>
</tr>
<tr>
<td>Am Indian or Alaska Native</td>
<td>0.2%</td>
</tr>
<tr>
<td>Asian or Native Haw/Pac Island</td>
<td>0.9%</td>
</tr>
<tr>
<td>Other</td>
<td>1.1%</td>
</tr>
<tr>
<td>Unknown</td>
<td>3.1%</td>
</tr>
</tbody>
</table>

#### Ethnicity
- **Hispanic or Latino**: 1.8%
- **Not Hispanic or Latino**: 96.5%
- **Unknown**: 1.7%

Amphetamines
This category includes methamphetamine and other amphetamines to include amphetamines, Benzedrine, Dexedrine, preludin, Ritalin and any other amines and related drugs.

**SOURCE**: Office of Applied Studies, Substance Abuse and Mental Health Services Administration, TEDS
Based on administrative data reported by States to TEDS through July 1, 2010.

http://wwwdasis.samhsa.gov/webt/quicklink/IN09.htm
History
History

- Created in Germany, 1887
- Use to support military action
- U.S. availability until 1959
- 1970’s – declared Schedule II drug
- Illicit manufacture, powder/ice
Meth – 1990’s

- **Geography:** CA/Mexico → nation
- **Form:** Powder → More ice
- **Method:** Smoking mainly
- **Users:** More groups using
- **Treatment:** Often primary drug

Source: Roll, Rawlins, Ling and Shoptaw, Methamphetamine Addiction (NY: Guilford, 2009):
2000’s

- **Production**: Home labs & Imported
- **Form**: More ice, less powder
- **Method**: Smoking mainly
- **Users**: Additional groups
- **Treatment**: Often primary drug

Source: Roll, Rawlins, Ling and Shoptaw, Methamphetamine Addiction (NY: Guilford, 2009):
### 2010’s

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td><strong>Production</strong></td>
<td>One-pot method ^</td>
</tr>
<tr>
<td><strong>Form</strong></td>
<td>More urban imported, YABA</td>
</tr>
<tr>
<td><strong>Method</strong></td>
<td>Smoking mainly</td>
</tr>
<tr>
<td><strong>Users</strong></td>
<td>Additional groups</td>
</tr>
<tr>
<td><strong>Treatment</strong></td>
<td>Often primary drug</td>
</tr>
</tbody>
</table>

www.drugs.indiana.edu
Forms of Meth
The Drug -- Meth

Street Names

- Meth
- Ice
- Crystal
- Fire

- Speed
- Chalk
- Crank
- Ice

Source: DEA, Pseudoephedrine Brochure,
Methamphetamine

(Below photos courtesy of PC & TC Health Dept)

POWDER / ROCK METH

CRYSTAL METH

Methamphetamine

Methamphetamine Powder

Methamphetamine

Methamphetamine

Methamphetamine

Methamphetamine, Rx

Medications and Drugs

Brand Names: Desoxyn, Desoxyn Gradumet

Generic Name: methamphetamine (Pronunciation: meth am FET a mean)

- What is methamphetamine (Desoxyn, Desoxyn Gradumet)?
- What are the possible side effects of methamphetamine (Desoxyn, Desoxyn Gradumet)?
- What is the most important information I should know about methamphetamine (Desoxyn, Desoxyn Gradumet)?
- What should I discuss with my doctor before taking methamphetamine (Desoxyn, Desoxyn Gradumet)?
Methamphetamine

Source: www.drugfree.org Partnership for a Drug Free America, 3/28/10
Methamphetamine

Yaba

Methamphetamine

Administration
Administration

*Smoking
Injecting
Snorting
Oral ingestion

METH

INHALING THE DEVIL

Source: http://www.streetdrugs.org
Methamphetamine

Source: http://www.meth-in-douglas.com/meth_info.htm
Methamphetamine

Source: http://www.meth-in-douglas.com/meth_info.htm
Consumption / Prevalence
Scope

• Global problem

• Production highest, SE Asia and N. Am.

• Highest prevalence, The Philippines (also in Czech Republic)

• Amphetamine and MA abuse, Europe, S. Africa, Central and S America

Source: Roll, Rawlins, Ling and Shoptaw, Methamphetamine Addiction (NY: Guilford, 2009):
### National Stats, 2008 NHSDUH

<table>
<thead>
<tr>
<th>Age 12+</th>
<th>Lifetime Use</th>
<th>Past Year Use</th>
<th>Current Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>5.0</td>
<td>0.3&lt;sup&gt;nn&lt;/sup&gt;</td>
<td>0.1</td>
</tr>
<tr>
<td>2007</td>
<td>5.3</td>
<td>0.5&lt;sup&gt;n&lt;/sup&gt;</td>
<td>0.2</td>
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</table>

<sup>n</sup> Statistically significant change at the .05 level
<sup>nn</sup> Statistically significant change at .01 level
Monthly Use Select Drugs by IN Students

Monthly Use of Selected Drugs and Binge Drinking by Indiana and U.S.A. 12th Graders

Source: Indiana Prevention Resource Center at Indiana University, 2009
Monthly Use Select Drugs by IN Students

Compared to last year, the reported prevalence rates of lifetime use of meth increased for youth in Grade 6 and monthly use increased for Grades 6, 8 and 11. However, all other prevalence rates of meth use among students in Grades 6 to 12 held steady.

Prevalence of monthly meth use among IN 8th, 10th, and 12th grade youth are higher than available 2009 prevalence rates reported in Monitoring the Future.

Source: Indiana Prevention Resource Center at Indiana University, 2010
Johnston, et al., National Institute on Drug Abuse, 2009
## Monthly Use Select Drugs by IN Students

### Table 3. Methamphetamine use by youth in grades 6 to 12

<table>
<thead>
<tr>
<th>Grade</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>Nation 2009*</th>
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<tbody>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lifetime</td>
<td>0.7</td>
<td>0.5</td>
<td>0.4</td>
<td>0.4</td>
<td>0.4</td>
<td>0.5*</td>
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</tr>
<tr>
<td>Monthly</td>
<td>0.3</td>
<td>0.2</td>
<td>0.1</td>
<td>0.2</td>
<td>0.2</td>
<td>0.3*</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
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<tr>
<td>Lifetime</td>
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</tr>
<tr>
<td>Monthly</td>
<td>0.6</td>
<td>0.6</td>
<td>0.5</td>
<td>0.4</td>
<td>0.5</td>
<td>0.5</td>
<td></td>
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<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lifetime</td>
<td>2.4</td>
<td>2.0</td>
<td>1.6</td>
<td>1.5</td>
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<td>1.6</td>
</tr>
<tr>
<td>Monthly</td>
<td>1.1</td>
<td>0.9</td>
<td>0.7</td>
<td>0.7</td>
<td>0.6</td>
<td>0.8*</td>
<td>0.5</td>
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<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Lifetime</td>
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<td>2.2</td>
<td>2.0</td>
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<tr>
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<td>0.8</td>
<td>0.9</td>
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<tr>
<td>10</td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Lifetime</td>
<td>4.5</td>
<td>3.5</td>
<td>3.0</td>
<td>2.5</td>
<td>2.3</td>
<td>2.2</td>
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<tr>
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<td>1.2</td>
<td>1.0</td>
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<tr>
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<td>4.2</td>
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<td>2.8</td>
<td>2.6</td>
<td>2.6</td>
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<tr>
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<td>1.5</td>
<td>1.1</td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>Lifetime</td>
<td>5.5</td>
<td>5.0</td>
<td>3.4</td>
<td>2.7</td>
<td>2.7</td>
<td>2.5</td>
<td>2.4</td>
</tr>
<tr>
<td>Monthly</td>
<td>1.7</td>
<td>1.5</td>
<td>1.0</td>
<td>0.9</td>
<td>0.9</td>
<td>1.0</td>
<td>0.5</td>
</tr>
</tbody>
</table>

* Statistically significant changes between 2009 and 2010 prevalence rates (p<.05).
# Johnston, O’Malley, Bachman, & Schulenberg, 2010.

Source: Indiana Prevention Resource Center at Indiana University, 2010
Johnston, et al., National Institute on Drug Abuse, 2009
# Monthly Use of Meth by IN Students

<table>
<thead>
<tr>
<th>Grade</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>Nation 09</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>0.2</td>
<td>0.2</td>
<td>0.3*</td>
<td></td>
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<tr>
<td>7</td>
<td>0.4</td>
<td>0.5</td>
<td>0.5</td>
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<tr>
<td>8</td>
<td>0.7</td>
<td>0.6</td>
<td>0.8*</td>
<td>0.5</td>
</tr>
<tr>
<td>9</td>
<td>0.9</td>
<td>0.8</td>
<td>0.9</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>1.0</td>
<td>0.9</td>
<td>1.0</td>
<td>0.6</td>
</tr>
<tr>
<td>11</td>
<td>0.9</td>
<td>0.9</td>
<td>1.2*</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>0.9</td>
<td>0.9</td>
<td>1.0</td>
<td>0.5</td>
</tr>
</tbody>
</table>

Source: Indiana Prevention Resource Center at Indiana University, 2010
Johnston, et al., National Institute on Drug Abuse, 2009
THE TRIP:  Who, Why, What
Who
Scope—US—Pop at Highest Risk

- Native Americans
- Homeless
- Urban gay men
- Female sex workers
- Women for weight loss
- Multiple job workers
- Hispanics

Why
Why Use Meth?

• For energy
• To party
• Enhance sex
• To feel normal
• To feel smarter
• To feel more charming

Source: Science of Meth (UCLA, Rawson, 2005)
What
The Drug

• Why use?

• Brain function interference [SofM-BrainReward.wmv]
  Clip: Science of Meth (Rawson, Minsky)

• How the drug is absorbed/administered into body

• Slang and other terminology
The Drug

dopamine

dopamine receptor
The Drug

Clip from Meth Inside Out: Why Does It Feel So Good

How the brain creates PLEASURE

Source: Meth Inside Out, UCLA Meth Project, Rawson, 200?
## Pleasure Sensation Increase

<table>
<thead>
<tr>
<th></th>
<th>FOOD</th>
<th>SEX</th>
<th>COCAINE</th>
<th>METH</th>
<th>Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>%</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td>900</td>
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<td></td>
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<td>600</td>
</tr>
<tr>
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<td></td>
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<td>300</td>
</tr>
</tbody>
</table>

Source: Meth Inside Out, UCLA, Meth Project
The Crash

Clip from Meth Inside Out:
Why Does It Feel So Bad
HOW METH IS MADE
How it’s Made

• Labs are huge – tiny, far – near

http://www.cartoonstock.com/newscartoons/cartoonists/rma/lowres/rman7053l.jpg

www.drugs.indiana.edu
How it’s Made

• Manufacture Methods
  – Super Labs or Small Labs

http://www.streetdrugs.org
Meth Labs Emergency Responder brochure.
Chemicals
Pseudoephedrine/Ephedrine

Alcohol (isopropyl/rubbing)
Brake Cleaner/Toluene
Engine Starter/Ether
Acetone
Fertilizer/anhydrous ammonia
Drain Cleaner/Sulfuric acid
Iodine/hydric acid
Hydrochloric acid
Phosphine
Lye/Sodium hydroxide
• Table or rock salt/iodine
• Matches/road flares/Phosphorous (red/yellow)
• Batteries/Lithium
• Sodium Metal
• Gun scrubber/trichloroethane
• Kitty litter
• Liquid propane
• Drierite


www.drugs.indiana.edu
IN Labs by Method of Manufacture

2009 Total – 1,343

Source: IN State Police, Clandestine Laboratory Team, 2010
Chemicals: Precursor

Source: http://www.meth-in-douglas.com/meth_info.htm

Ephedrine / Pseudoephedrine
Birch or “Nazi” Method

- Ephedrine or pseudo-ephedrine
- Lithium
- Anhydrous ammonia

- 73% of IN labs seized in 2009
“Cold”- “Red Phosphorous” Method

- Ephedrine or pseudo-ephedrine
- Red Phosphorous
- Iodine

- 3% of IN labs seized in 2009
One-Pot “Shake & Bake” Method

- 1 container (e.g., 2-liter soda)
- Easiest
- Lower quality
- Smaller quantity
- Possibly most dangerous
- 24% of IN labs seized 2009
Meth Lab Fires/Explosions

https://adgallery.methresources.gov/media/p/360.aspx

Source: Bill O’Dell, Community Prevention Specialist, West Virginia Prevention Resource Center, “What’s Up with Meth” PowerPoint, 2004

Need To Talk Meth.wmv

www.methresources.gov
CONSEQUENCES ACROSS DOMAINS
Effects of the Drug Across Domains

- Individual
- Family
- Schools
- Community
The Individual
User
The Drug

Why It Doesn’t Feel As Good

How the brain creates TOLERANCE

Clip from Meth Inside Out:

MIO-Tolerance.wmv

Source: Meth Inside Out, UCLA Meth Project, Rawson, 200?
Changes in Brain Chemistry

Why do I Get So Crazy? So Angry?

Clip from Meth Inside Out:

- Paranoia
- Fear
- Aggression

MIO-Overstim.wmv
Changes in Brain Chemistry

Trapped.
Controlled.
Alone.

Also known as meth addiction.

SofM-hall-ch.wmv

https://adgallery.methresources.gov/media/p/343.spex

Trapped.
Controlled.
Alone.

Also known as meth addiction.
Those who use it can lose everything.
Think twice.
Long-term Effects

• Dependence and addiction psychosis
  – Paranoia, aggression
  – Hallucinogens
  – Mood disturbance
  – Repetitive motor activity
• Stroke
• Weight Loss
• Tooth damage; Hair Loss
• Possible brain damage (up to 50% of dopamine-producing cells in the brain)

Meth Mouth

Source: www.streetdrugs.org
**Long-term Effects**

**Downward Spiral:**

Source: ONDCP, Downward Spiral, 2009

**Personal commentaries:**

For user, for fetal development.

Source: Science of Meth, Rawson, Minsky, UCLA, 200?
Same Woman

Source: DOJ, DEA, Pseudoephedrine Brochure, Aug. 2003
Damage over time

Source: DOJ, DEA, Pseudoephedrine Brochure, Aug. 2003
Repetitive Action


18 months of Methamphetamine Use

Recognizing Impairing Drugs Training 402-871-3207
Scratching

Source: Bill O’Dell, Community Prevention Specialist, West Virginia Prevention Resource Center, “What’s Up with Meth” PowerPoint, 2004
Characteristics of a Meth User

Source: Crack Cocaine in Camden. “What Meth Can Do for You.”
http://www.crackcocaineincamden.co.uk/pages/drugs/what%20crack%20can%20do%20for%20you/the%20results%20of%20meth.htm

4 Years of Use

Penny Wood - 1998

Penny Wood - 2002
Demographic Characteristics of Indiana School Survey
Meth Users vs. Non MA Drug Users

• Gender
• Number of Drugs Used
• Syringe/Needle Use
• Trouble with the Police

**Possible Signs of a Meth User**

- Skinny – Gaunt
- Hyperactivity
- Paranoia
- Sweating
- Dilated Pupils
- Rapid speech followed by slurred speech
- Easily Agitated
- Dirty / Smells
- Rotten or lost teeth
- Skin sores
- Pale / discolored skin


I lost everything to meth.

800 662 HELP
methresources.gov

ONDSCP: https://adgallery.methresources.gov/media/p/357.aspx
Meth Will Affect Every Close Relationship You Have

METHAMPHETAMINE
Don't live this tragic story

PATRICIA SMITH
Loving daughter turned meth addict

BRYAN SMITH
Patricia’s neglected son who was taken away

IAN SMITH
 Estranged brother

JOE SMITH
Father who was robbed by his daughter

METH WON’T JUST HURT YOU. IT’LL AFFECT EVERY CLOSE RELATIONSHIP YOU HAVE.
or Meth

800 662 HELP
methresources.gov

https://adgallery.methresources.gov/media/p/359.aspx
LOOK AT ALL YOU COULD LOSE.

800 662 HELP
methresources.gov

https://adgallery.methresources.gov/media/p/359.aspx
The Family
Children at Risk brochure.

http://www.streetdrugs.org

Children – Meth Labs
**IN Children Present at Meth Lab**

<table>
<thead>
<tr>
<th>Year</th>
<th>Children Located at Meth Labs by ISP Only</th>
</tr>
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<tbody>
<tr>
<td>2009</td>
<td>185</td>
</tr>
<tr>
<td>2008</td>
<td>148</td>
</tr>
<tr>
<td>2007</td>
<td>124</td>
</tr>
<tr>
<td>2006</td>
<td>150</td>
</tr>
<tr>
<td>2005</td>
<td>185</td>
</tr>
</tbody>
</table>

Source: IN State Police, Clandestine Laboratory Team, 2010
Why Children Are More Vulnerable

- More exposure to vapors
- Developing body
- Metabolic and respiration rates
- Developing CNS
- Hand-to-mouth habits
- Formative years (emotionally, intellectually, self-image, self-confidence, trust, values, world-view, her/his heroes, ambitions)

Clip: Toxic Effects
Risks to Children: ABUSE

- Physical
- Emotional
- Sexual

Clip: The Unlucky Ones
Risks to Children: NEGLECT

- Nurturing
- Supervision
- Nutrition
- Sanitary Conditions
- Safe Environment
- Education
- Medical Care
Risks to Children: MODELING

• Criminal Activities

Clip: Suffer the Little Children
Case 1

- Meth using Grandma
- Neglect
- Unsafe
Case 2

- Supervision
- Education
- Unsafe - Lab
Creation of DEC

NATIONAL ALLIANCE
FOR DRUG ENDANGERED CHILDREN


• www.nationaldec.org
Drug Endangered Children

Substance-Related Consequences and Use

Effects upon Parenting:

Binge Phase:
- Physical Abuse
- Sexual Abuse
- Neglect

Crash Phase:
- Physical Abuse
- Sexual Abuse
- Neglect

1. Insomnia
2. Intense sleep
3. Intense hunger
4. Depression
The School
The Community
Scope of the Problem

- Hazards associated with meth labs
- Crime and/or violence
- Mental health
- Health care issues
Public Endangered by Labs

- Chemical exposure
- Fire / explosion
- Environmental damage
- Booby traps / weapons

Source: IN State Police, Clandestine Laboratory Team.
Scope of the Problem: Crime

- Lab Seizures
- Arrests
- Crimes committed under the influence of meth

Source: IN State Police, Clandestine Laboratory Team, 2005
# Indiana Clandestine Lab Seizures

<table>
<thead>
<tr>
<th>Year</th>
<th>No of Meth Lab Seizures</th>
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</thead>
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<tr>
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<td>1343</td>
</tr>
<tr>
<td>2008</td>
<td>1092</td>
</tr>
<tr>
<td>2007</td>
<td>833</td>
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<tr>
<td>2006</td>
<td>801</td>
</tr>
<tr>
<td>2005</td>
<td>1065</td>
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Source: IN State Police, Clandestine Laboratory Team, 2009
Total lab busts in 2009, 1364

Source: IN State Police, 2010

Indiana Prevention Resource Center
2009 Meth Lab Busts

Total lab busts in 2009, 1364

Source: IN State Police, 2010
## IN Clandestine Laboratory Arrests

<table>
<thead>
<tr>
<th>Year</th>
<th>No. of Arrests</th>
</tr>
</thead>
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<td>2004</td>
<td>885</td>
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<tr>
<td>2003</td>
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Source: IN State Police, Clandestine Laboratory Team, 2010, 2009
Strategies

Multiple Strategies Across Multiple Domains

Adapted from CSAP, Strategic Prevention Framework, Indianapolis, Feb. 21, 2006
Prevention

• Addressing Risk and Protective Factors
• Needs Assessment
• Capacity Building
• Prevention Planning
• Implementation of Programs, Policies, Practices
• Evaluation
Cooperation/Teamwork

- Child Services
- Law Enforcement
- Health Professionals
- Educators
- Prevention
- Treatment

Adapted from CSAP, Strategic Prevention Framework, Indianapolis, Feb. 21, 2006
Address
Intervening/Causal Factors

Community
- Availability
  - Price
  - Local labs, street, retail
  - Social
- Social Norms
- Enforcement

Individual
- Perceptions of risk
- Perceptions of harm

Adapted from CSAP, Strategic Prevention Framework, Indianapolis, Feb. 21, 2006
Address
Intervening/Causal Factors

Social Values
- Overachievement
- Thinness ideal
- Economic success
- Letting others set your goals
- Seeking the ‘high’
- Thrill of risk taking

Individual
- Coping mechanism
- Peer pressure

Adapted from CSAP, Strategic Prevention Framework, Indianapolis, Feb. 21, 2006
SBIRT & Referrals

Meth Tip Hotline: 877-855-6384
Prevention Is Prevention

• Parenting & life skills
• Delay/reduce/eliminate initiation of use
• Drug-free lifestyle
• Positive values
• Healthy communities

How?

Multiple strategies
across multiple domains
Methamphetamine Facts
(Meth, Crystal Meth)

What is it?
Methamphetamine, or meth, is a highly addictive synthetic chemical that acts as a stimulant. It is snorted, injected, smoked, or swallowed. Most of the methamphetamine abused in this country comes from foreign or domestic superlabs, although it can also be made in small, illegal laboratories, where its production endangers the people in the labs, their neighbors, and the environment.\textsuperscript{54}

Street Terms\textsuperscript{56,57}
Speed, meth, crystal meth, chalk, ice, crystal, chalk, crank, tweak, uppers, black beauties, glass, biker's coffee, methlies

Risks\textsuperscript{52,53}
Increased respiration, rapid heart rate, irregular heartbeat, increased blood pressure, and hyperthermia (when the body overheats) / Unhealthy weight loss / Severe dental problems / Anxiety, confusion, insomnia, mood disturbances, and violent behavior / Psychotic features, including paranoia, visual and auditory hallucinations, and delusions (for example, the sensation of insects “Meth Bugs” creeping under the skin)
2009 Anti-Meth Campaign

ONDCP launches the new 2009 Anti-Meth Campaign ads in September, with TV, radio, billboards, print, and online ads. Most will be available soon for free use.

State Resources

For more detailed information about meth in your state, use the drop down menu below.

Search the Meth Ad Gallery

For general population, American Indian/Alaska Native, or Hispanic anti-meth ads.

PSAs for your Community

ONDCP offers customizable media to support your fight against methamphetamine.
The Tackling Meth Tool Kit is a remarkable tool. Communities and coalitions all over the country should use this wonderful resource to combat the meth crisis. Oregon Partnership should be congratulated! 

General Barry R. McCaffrey (former U.S. Drug Czar)

The Tackling Meth Tool Kit is a comprehensive approach to addressing methamphetamine abuse, with a specific focus on empowering local communities. Because meth affects all of us, the Tool Kit provides community coalitions, business leaders, faith-based organizations, parent groups, schools, law enforcement, health care professionals, civic groups and other community leaders with proven and effective prevention practices. This kit teaches techniques for neighborhood involvement and community action, helps families identify signs and symptoms of meth use, and offers links to methamphetamine treatment resources. It is, in short, one-stop shopping for those involved in the fight against meth, and can make all the difference as you mobilize your community and take action.

The Tackling Meth Tool Kit is actually two kits in one! Open the red side and the Tackling Meth Community Education Tool delivers cutting-edge information to communities through a master Methamphetamine PowerPoint slide library that contains over 140 slides and talking points. These slides include the effects of meth, meth statistics, photos of meth, meth detection, identification of meth labs, meth laws, the dangers of meth and many more important drug prevention topics. Flip the
MONTANA METH PROJECT®

MONTANA METH PROJECT IS A LARGE-SCALE PREVENTION PROGRAM AIMED AT SIGNIFICANTLY REDUCING FIRST-TIME METH USE THROUGH PUBLIC SERVICE MESSAGING, PUBLIC POLICY, AND COMMUNITY OUTREACH.


Thousands of Teens March on State Capital to Support the Montana Meth Project. Read More | View Podcast.

New economic study from RAND estimates Meth use costs the nation $23.4 billion annually. Learn More.

1/5/2009 - Flathead native takes leadership role in Montana Meth Project. Read More.
TREATMENT
Figure 8.1 Percentage of Treatment Episodes with Meth Use Reported at Treatment Admission in Indiana and the United States (Treatment Episode Data Set, 2000–2007)

<table>
<thead>
<tr>
<th>Year</th>
<th>Indiana</th>
<th>U.S.</th>
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<tbody>
<tr>
<td>2000</td>
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<td>6.5%</td>
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<tr>
<td>2001</td>
<td>5.3%</td>
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<td>2002</td>
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<td>8.5%</td>
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<tr>
<td>2003</td>
<td>8.2%</td>
<td>9.3%</td>
</tr>
<tr>
<td>2004</td>
<td>9.2%</td>
<td>10.2%</td>
</tr>
<tr>
<td>2005</td>
<td>10.9%</td>
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<tr>
<td>2006</td>
<td>10.5%</td>
<td>12.0%</td>
</tr>
<tr>
<td>2007</td>
<td>9.2%</td>
<td>11.1%</td>
</tr>
</tbody>
</table>

Source: Substance Abuse and Mental Health Data Archive, 2008
By Gender: Treatment Episodes Reported

Source: Substance Abuse and Mental Health Data Archive, 2008

<table>
<thead>
<tr>
<th>Year</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
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<td>3.5%</td>
<td>4.9%</td>
</tr>
<tr>
<td>2001</td>
<td>4.6%</td>
<td>7.0%</td>
</tr>
<tr>
<td>2002</td>
<td>6.0%</td>
<td>9.5%</td>
</tr>
<tr>
<td>2003</td>
<td>7.1%</td>
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<tr>
<td>2006</td>
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<td>14.0%</td>
</tr>
<tr>
<td>2007</td>
<td>7.8%</td>
<td>11.9%</td>
</tr>
</tbody>
</table>

By Race/Ethnicity: Treatment Episodes Reported

Source: Substance Abuse and Mental Health Data Archive, 2008
By Age: Treatment Episodes Reported

Source: SEOW, The Consumption and Consequences … State Epi Profile 2009
Withdrawal: Triggers and Cravings

- Withdrawal
- Avoiding Triggers
- Avoiding Cravings

MIO-Triggers.wmv
MIO-Craving.wmv
Treatment

• Initial sobriety
• Hitting the Wall
• Relapse
• Healing
• Support needed throughout
Healing

Will I it ever get better? After years of sobriety, relapse?

Clip from Meth Inside Out:

MIO-Healing.wmv
Healing

• Clip from Meth: Deciding to Live or to Die
  The Blank Coffee Cup

28:08 to 29:26
Healing

There is Life After Meth

Clip from Meth: Deciding to Live

SofM-ReconditioningBrain.wmv
Thank You!

Q & A
Amphetamines

- Stimulant Medications
- Adderall
- Methylphenidate
- Health effects