Meth360 Information Kit

San Diego County Methamphetamine Strike Force (MSF)
Neighborhood Safety Workgroup (NSW)
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WHAT IS A SUBSTANCE USE DISORDER?
A substance use disorder (SUD), often called dependence, is a medical condition that affects a person’s brain and behavior and leads to an inability to control the use of alcohol, medications, as well as legal and illegal drugs. When someone is addicted, they often continue using the substance despite the harm it causes.

SUDs affect people from all walks of life and all age groups. A SUD is a chronic disease, just like heart disease and diabetes. A chronic disease is an ongoing medical condition for life. It cannot be cured, but it can be successfully managed. A person with dependence can regain a healthy, productive life. However, most people cannot just walk away from dependence. They need help to change dependent behaviors into non-dependent, healthier lifestyles. They can get this help with treatment—with the care of doctors and substance use treatment professionals and providers. Treatment is a process that helps people learn how to stop using substance and includes getting them through withdrawal and how to cope with cravings. Just as important, treatment helps people address other life issues they might have that are tied to the SUD, such as feelings of low self-worth, a bad situation at work or home, or spending time with people who use drugs. In short, treatment helps people move into healthy, dependent-free lifestyles—into a way of living referred to as recovery.

People don't plan to get addicted to drugs. Dependence can start with experimental use of a recreational drug in social situations. and, for some people, the drug use becomes more frequent. The risk of dependence and how fast someone becomes dependent varies by drug and many other factors. Attempts to stop drug use may cause intense cravings and make someone feel physically ill. These are called withdrawal symptoms.

WITHDRAWAL
Many people with SUDs continue to use substances to avoid withdrawal. Withdrawal is an uncomfortable, serious condition and should be treated and managed by professionals. If someone wants to stop using a drug, they should talk to their doctor or therapist about how to manage their withdrawal safely. Withdrawals have both physical and psychological effects.

Symptoms of methamphetamine withdrawal may include, but not limited to:

- Anxiety
- Agitation
- Anger
- Psychosis
- Extreme fatigue
- Depression
- Meth cravings
- Cravings of sugar or carbs
SUD Symptoms and Behaviors

Substance use disorder symptoms and/or behaviors include, among others:

- Someone feeling they must use the drug regularly – daily or even several times a day
- Having intense urges for the drug that block out any other thoughts
- Over time, needing more of the drug to get the same effect
- Taking larger amounts of the drug over a longer period of time than intended
- Making certain they maintain a supply of the drug
- Spending money on the drug, even if they can't afford it
- Not meeting obligations and work responsibilities, or cutting back on social or recreational activities because of drug use
- Continuing to use the drug, even though they know it's causing problems in their life or causing physical or psychological harm
- Doing things to get the drug that they normally wouldn't do, such as stealing
- Driving or doing other risky activities when they're under the influence of the drug
- Spending a good deal of time getting the drug, using the drug, or recovering from the effects of the drug
- Failing in their attempts to stop using the drug
- Experiencing withdrawal symptoms when they attempt to stop taking the drug
STIGMA
Stigma is a set of negative beliefs that a group or society holds about a topic or group of people. Stigma can negatively affect a person's self-esteem, damage relationships with loved ones, and prevent those suffering from substance use disorder from accessing treatment. When a person experiences stigma they are perceived as less than, merely because of their health status.

Stigma can negatively impact other areas, including:
- Willingness to attend treatment.
- Willingness to access to health and dental care.
- Harm reduction.
- Self-esteem and mental health.

WORDS MATTER
You can reduce stigma, and help save lives, just by changing your language. By using what's called person-centered language, you're not defining a person on any medical disorder he or she may have. It's nonjudgmental, it's neutral, and the diagnosis is purely clinical.

<table>
<thead>
<tr>
<th>AVOID THESE WORDS</th>
<th>USE THESE INSTEAD</th>
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<tbody>
<tr>
<td>Addict</td>
<td>Person with a substance use disorder</td>
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<tr>
<td>Drug Problem/Drug Habit</td>
<td>Substance use disorder</td>
</tr>
<tr>
<td>Drug Abuse</td>
<td>Drug misuse, harmful use</td>
</tr>
<tr>
<td>Clean</td>
<td>Abstinent, not actively using</td>
</tr>
<tr>
<td>Dirty</td>
<td>Actively using</td>
</tr>
<tr>
<td>Former addict</td>
<td>Person in recovery</td>
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Local Snapshot
Demographics of Meth-Related Deaths in San Diego in 2019

Meth-Related Deaths by Race/Ethnicity
rate per 100,000

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Number of Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black</td>
<td>35</td>
</tr>
<tr>
<td>White</td>
<td>20</td>
</tr>
<tr>
<td>Native American</td>
<td>15</td>
</tr>
<tr>
<td>Hispanic</td>
<td>10</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>5</td>
</tr>
<tr>
<td>Other</td>
<td>2</td>
</tr>
</tbody>
</table>

There were **546** total meth-related deaths in 2019.

The most deaths were in the **45 to 64 year old** age range.

For every 1 female that died of a meth-related cause...4 males died.

Number of Meth-Related Deaths by Age and Gender

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Female</th>
<th>Male</th>
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<tbody>
<tr>
<td>15-24</td>
<td>10</td>
<td>20</td>
</tr>
<tr>
<td>25-34</td>
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<td>30</td>
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<tr>
<td>35-44</td>
<td>10</td>
<td>25</td>
</tr>
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<td>45-54</td>
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<td>15</td>
</tr>
<tr>
<td>55-64</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>65+</td>
<td>1</td>
<td>5</td>
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</tbody>
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For more detailed information on the status of methamphetamine misuse in San Diego County view the full Meth Strike Force Report Card here: [https://www.no2meth.org/interactive-report-card](https://www.no2meth.org/interactive-report-card)
Facts About Meth

WHAT IS METH?
Methamphetamine – also known as meth, crank, crystal and speed – is an extremely addictive central nervous system stimulant.

WHAT DOES METH LOOK LIKE?
Meth is available as a crystalline powder or in rock-like chunks. Meth varies in color, and may be white, yellow, brown or pink. Meth can be smoked, injected or snorted.

WHERE IS METH MADE?
Two-thirds of our country’s meth supply is produced in super labs in Mexico and Southern California, and trafficked throughout the country. The remaining third is made in small meth labs found in basements, kitchens, garages, bedrooms, barns, vacant buildings, campgrounds, hotels and trunks of cars.

HOW IS IT MADE?
Meth can be made from household ingredients, including over-the-counter cold medications containing ephedrine or pseudoephedrine, red phosphorous, hydrochloric acid, anhydrous ammonia, drain cleaner, battery acid, lye, lantern fuel and antifreeze. The fumes, vapors, and spillage associated with cooking meth are toxic, combustible and hazardous to children, adults and the environment.

Effects on Persons Using Meth

WHAT ARE THE SHORT-TERM EFFECTS OF TAKING METH?
Immediately after smoking or injecting meth, the user experiences an intense sensation, called a “rush” or “flash,” that lasts only a few minutes and is described as extremely pleasurable. (Snorting or swallowing meth produces euphoria – a high, but not a “rush”). Following the “rush,” there is typically a state of high agitation that in some individuals can lead to violent behavior. Other possible immediate effects include increased wakefulness and insomnia, decreased appetite, irritability and aggression, anxiety, nervousness and convulsions.
WHAT ARE THE LONG-TERM EFFECTS OF TAKING METH?

Meth is addictive, and individuals using meth can develop a tolerance quickly, needing larger amounts to get high. In some cases, individuals may forego food and sleep and take more meth every few hours for days, known as bingeing until they run out of the drug or become too dysfunctional to continue using meth. Chronic use can cause paranoia, hallucinations, repetitive behavior (such as compulsively cleaning and grooming or disassembling and assembling objects), and delusions of parasites or insects crawling under the skin. Persons using meth can obsessively scratch their skin to get rid of these imagined insects. Long-term use, high dosages, or both can induce full-blown toxic psychosis. This behavior is usually coupled with extreme paranoia. Meth can also cause strokes, heart attack and death.

WHY SOME PEOPLE USE METH:

- Meth initially produces euphoria, enhanced wakefulness, increased physical activity, decreased appetite.
- Individuals who use meth experience a sense of well-being and high energy; a release of social inhibitions, feelings of cleverness, competence and power.
- Alters mood in different ways:
  - Within 5 to 10 seconds after smoking/intravenous injection, intense "rush" or "flash" that lasts only few minutes, described as extremely pleasurable.
  - Snorting/ingesting orally produces euphoria - high but not intense rush.
  - Snorting produces effects within 3–5 minutes.
  - Ingesting produces effects within 15–20 minutes.

NEGATIVE EFFECTS:

- Meth becomes focus of life – persons who use meth neglect families, home, work, personal hygiene and safety.
- Prolonged use leads to bingeing, consuming the drug continuously for up to 3 to 5 days without sleep (some sleepless binges last up to 15 days) and ends with intolerable crashes.
- The individual may be driven into severe depression, followed by worsening paranoia, belligerence, aggression – a period known as "tweaking".
- Persons who use meth eventually collapse from exhaustion and sleep for long periods of time, often forcing neglected children to try to fend for themselves.
Dopamine is the feel-good chemical produced by the brain responsible for feelings of pleasure and happiness.

Upon first use, meth kicks dopamine production into high gear — this is what produces the initial euphoric rush.

Meth changes brain chemistry, and after extended use, the brain can no longer respond to dopamine.

The result is that persons who use meth can no longer feel good, and increase consumption of the drug in an attempt to recapture the first high.

This cycle often leads to addiction.

“The crystalline white drug quickly seduces those who snort, smoke or inject it with a euphoric rush of confidence, hyper-alertness and sexiness that lasts for hours on end. And then it starts destroying lives.”

— David J. Jefferson, "America's Most Dangerous Drug", Newsweek
### PHYSICAL SYMPTOMS

- Weight loss
- Abnormal sweating
- Shortness of breath
- Sores that do not heal
- Dilated pupils
- Burns on lips or fingers
- Track marks on arms
- Dental deterioration

### MENTAL SYMPTOMS

- Paranoia
- Anxiousness
- Nervousness
- Agitation
- Extreme moodiness
- Severe depression
- Hallucinations
- Delusions of parasites or insects crawling under the skin

### BEHAVIORAL SYMPTOMS

- Decreased appetite
- Erratic attention span
- Repetitive behavior, such as picking at skin, pulling out hair, compulsively cleaning, grooming or disassembling and assembling objects such as cars and other mechanical devices
- Aggression or violent behavior
- Deceit or secretiveness
- Withdrawal from family and friends
- Change in friends
- Increased activity
- Long periods of sleeplessness
- Long periods of sleep
- Incessant talking
- Irritability
- Twitching and shaking
- Convulsions
- Carelessness about appearance

### PARAPHERNALIA

- Rolled up paper money or short straws
- Pieces of glass/mirrors
- Razor blades
- Burned spoons
- Plastic tubing
- Syringes/needles

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In all cases of meth use, a user may experience a loss of inhibitions and a false sense of control and confidence. This can lead to dangerous behavior and potential harm to the user and to those around them.
Meth can cause harm not only to those who use the drug, but their family, friends and neighbors, too. Here are a few ways meth can affect communities:

**CHILDREN AT RISK**
Thousands of children are neglected every year after living with parents, family members or caregivers who are meth users or meth cooks. Children who reside in or near meth labs are at great risk of being harmed by toxic ingredients and noxious fumes. Cooking meth is extremely dangerous, and labs often catch on fire and explode. Children whose parents have been using or making meth are often placed in foster homes, straining social services in states hit hard by meth. These children need special care: they may be malnourished, suffering the effects of physical or sexual abuse, and often have behavioral problems as a result of neglect.

**CRIME**
Meth labs, along with sales of the drug, breed crime, including burglary, identity theft, domestic violence and even murder. Teens and adults addicted to the drug may steal valuables from their friends or family to pay for their habit. Meth-related crime requires extra attention from law enforcement, and meth users are often violent, posing an added risk to the community as well as first responders.

**ENVIRONMENTAL HARM**
A meth lab can operate unnoticed in any neighborhood, posing a health hazard to everyone around. For each pound of meth produced, five to six pounds of hazardous waste are generated. The chemicals used to make meth are toxic, and —meth cooks— routinely dump waste into streams, rivers, fields, backyards and sewage systems, which can contaminate water resources. Poisonous vapors produced during cooking permeate insulation and carpets, often making homes and buildings uninhabitable. Cleaning up these sites requires specialized training and costs thousands of dollars per site. If you have questions about environmental contamination from an illegal lab, contact your state’s environmental agency.

**HEALTH CARE**
Meth use and production also strains a community’s health care resources. Meth labs often explode, and those inside the lab may suffer severe chemical burns and respiratory damage. Additionally, children removed from homes where a parent is making or using meth require medical attention. Many meth cooks are uninsured, and the cost of their care goes uncompensated. Meth use is also associated with communicable diseases including costly spreading hepatitis and HIV, as the drug lowers inhibition and increases libido, which can lead to unsafe sexual practices. Additionally, as the drug can be injected, users may share needles.

Other health care costs tied to meth use include the need for dental care to repair the damage meth can do to a user’s teeth, and SUD treatment to help meth users recover from addiction.
WHAT ARE THE SIGNS OF A METH LAB?

A typical meth lab is a mish-mash collection of chemical bottles, hoses, glass jars, tubing and pressurized cylinders containing anhydrous ammonia or hydrochloric acid — both highly poisonous and corrosive. Labs are frequently abandoned, and the toxic chemicals are left behind. Chemicals may also be burned or dumped in woods or along roads. The most common chemicals used in the meth-making process are over-the-counter cold and asthma medications containing ephedrine or pseudoephedrine.

HERE ARE THE SIGNS OF A METH LAB:

- Soft drink bottles with hoses attached
- Drain cleaner, paint thinner, toluene, denatured alcohol, ammonia, starter fluid, antifreeze, hydrogen peroxide, rock salt/iodine
- Lantern or camp stove fuel
- Iodine- or chemical-stained bathrooms or kitchen fixtures
- Excessive amounts of trash, particularly chemical containers, coffee filters with red stains, red-stained cloth and empty duct tape rolls.
- Secreterve or unfriendly occupants
- Extensive security measures or attempts to ensure privacy such as “No Trespassing” or “Beware of Dog” signs, fences, and large trees or shrubs
- Curtains always drawn or windows blackened or covered on residences, garages, sheds, or other structures
- Renters who pay their landlords in cash

- Unusual strong chemical odors such as ether, ammonia (smells similar to cat urine) and acetone (smells similar to nail polish remover)
- Large numbers of empty pill bottles or blister packs, especially of cold or asthma medication
- Propane tanks with blue corrosion on fittings or with bent or tampered valves
- Heating sources such as hotplates/torches
- Excess matchbooks
- Stripped lithium batteries
- Cookware coated with white residue
- Mason jars or other glassware
- Plastic tubing
- Hoses leading outside for ventilation
- Increased activity, especially at night
- Frequent visitors, particularly at unusual times

*** If you suspect a dwelling or property may be an illegal lab, contact your local police, or sheriff’s department. If it’s an emergency, call 911. Do not enter a site that you think may have been used for cooking meth. Meth labs present extreme dangers from explosions and exposure to hazardous chemicals.

WHAT DOES A METH LAB SMELL LIKE?

Strong chemical odors such as ether, ammonia (smells like cat urine) and acetone (smells like nail polish remover). It has also been described as have an old, industrial smell, much like old motor oil and heavy body sweat.
IT CAN HAPPEN TO ANYONE ANYWHERE
A problem with drugs or alcohol doesn't discriminate; it can happen to anyone anywhere — even a child in the most loving home. It cuts across race, gender and economic lines, and occurs in every region of this country. It’s a health issue for you, your child and your family. Tobacco, drug and alcohol abuse is one of the most important and preventable adolescent health problems today.

WHY DO KIDS EXPERIMENT WITH DRUGS?
Many experiences of young adulthood are universal such as seeking greater independence and acceptance by friends, rebellion and risk-taking, as well as physical and hormonal changes. But it’s important to remember that teens today are exposed to a unique set of societal and cultural pressures. The top two reasons why kids use drugs or alcohol are:

Recreation: Teens may experiment with or regularly use drugs or alcohol just to get high or have fun. Restless, bored or risk-taking teens may smoke a joint or have a few drinks simply to fill their time. These actions also provide a way to instantly bond with a group of like-minded kids. Soon drugs define their existence and they spend increasing amounts of time seeking ways to get high.

Self-Medication: Teenagers may turn to drugs or alcohol to cope with problems and pressures, or as an antidote to unhappy feelings or uncomfortable situations. If a teen is using drugs or alcohol for self-medication, it could also point to other, broader emotional or psychological problems.

The Right Conversation at the Right Time
What you say to your child, and how you say it, will change as your child grows and matures.

Middle School and Junior High (Age 10-14)
Be especially alert during your child’s transition from elementary to middle school. They may seem young, but their new surroundings can put them in some very adult situations. They’re going to meet new kids, seek acceptance, and start to make more — and bigger — choices. Many kids this age are exposed to older kids who use alcohol, tobacco, or other drugs. This is the most critical time to engage your kid in conversations about drugs and alcohol and set a clear no-use rule.

The High School Years (Age 14-18)
Many teenagers’ interests — such as fashion, music, television and video games — are harmless. It’s important to allow them to express their individuality and be independent, but it’s also necessary to set clear and consistent expectations and rules. Know what your child’s doing after school, who he’s hanging out with, and when he’s expected to be home. It’s not always easy. He may complain about it, but your interest shows him you care. By staying involved with your child’s daily schedule, you’re taking an important step toward keeping him healthy and drug-free.
PARENTS ARE CRUCIAL

Parents and caregivers are crucial in helping to prevent this behavior, but they are often unaware or may feel ill-equipped to respond. Parents must educate themselves, and once informed, must talk to their kids; even when it's awkward or uncomfortable. Kids who learn a lot about the risks of drugs at home are up to 50 percent less likely to use drugs; Nine out of 10 parents of teens (92 percent or 22 million) say they have talked to their teen about the dangers of drugs, yet fewer than one third of teens (31 percent or 7.4 million) say they "learn a lot about the risks of drugs" from their parents. As a parent or caregiver, you have a tremendous influence on your child's life. Your constant and caring involvement can help inspire your child to make healthy, drug-free choices.

HOW TO PROTECT YOUR CHILD

There are many ways you can protect your kids and talking with them is one of the most effective. Communicating with your son or daughter on a daily basis helps him or her feel connected to you — and research indicates that is what matters most when a child chooses to turn down drugs.

START TALKING - AND TALK OFTEN

It's never too early to start talking with your child about drugs and alcohol, and there are many ways to get the conversation going. You can use everyday events as a starting point. Recent drug- or alcohol-related incidents in your community or family, articles in the newspaper, stories on the nightly news, and plot lines in movies and television shows can all provide moments to continue a dialogue with your child about drug and alcohol abuse. You can also take advantage of blocks of time, such as before school, on the way to soccer practice, or after dinner to discuss drugs and to voice your "no use" expectation.
ROLE PLAY

A great way to help kids prepare for situations where they might be in risky situations including being offered drugs or alcohol is to act out scenarios. Kids are more likely to be offered drugs from a friend than a stranger. It may be difficult for your child to say no to friends — the people they look to for validation, recognition and fun. Teach him that it’s okay to say no to his friends, and act out scenarios together so he has the tools to do this. For example, you could ask your child what they would do in the following situation: Your child goes to a party where someone has brought a bottle of vodka or beer. Some older high school kids are there. Several kids are drinking or smoking joints and they ask your child if she’d like some too. Take the role of the older teen who casually offers a can of beer or a joint to your child. Reassure your child that friends will respect his decision not to get involved. Remind him that most people are focused on themselves, which makes it less likely that they will be concerned with what others do.

Provide Your Child with Possible Responses for to Say When Offered Drugs:

"No, thanks."
"Nah, I'm not into that."
"Nah, I'm okay. Thanks."
"No, thanks. I'm on the _______ team and I don't want to risk it."
"Nah, I'm training for _______."
"No, I gotta go soon."

ANSWERING THE QUESTION: "DID YOU EVER DO DRUGS?"

For many parents, the answer is simply "no." However, this may be a tough question to answer for other parents. The conversation doesn't have to be awkward. You can use it to your advantage by turning it into a teachable moment. Experts believe it’s best to tell the truth but it’s not necessary to share details. Use the discussion as an opportunity to speak openly about what attracted you to drugs, alcohol or tobacco, why they are dangerous, and why you want your child to avoid making the same mistake. Remember, the issue isn't about your past. It's about your child's future. What's important now is that your kid understands that you don't want him or her to use these substances.

Be a Parent, Not a Pal

P = Provide your child with responses they can use if they're offered drugs
A = Actively listen to your child. Avoid interrupting. Give your undivided attention.
R = Reinforce your love - say the words "I love you" often
E = Educate your child about the risks and consequences of drug & alcohol use
N = Never underestimate your child's vulnerability to drugs - even at a young age
T = Teach the principles of "why" I not just "what" to do or not to do
HOW TO SPOT ALCOHOL OR DRUG USE

Mood swings and unpredictable behavior are sometimes evidence of teenage "growing pains," but can also point to use of drugs or alcohol. Be aware of any unexplained changes and know the potential warning signs:

- Withdrawn, depressed, tired or careless about personal grooming
- Hostile, uncooperative and frequently breaks curfew
- Deteriorating relationships with family members
- Hanging around with a new group of friends
- Slipping grades and missing school
- Losing interest in hobbies, sports and other favorite activities
- Changed eating and sleeping patterns — up at night and sleeping during the day
- Has a hard time concentrating
- Red-rimmed eyes and runny nose, but your child doesn’t have allergies or a cold
- Household money has been disappearing
- You have found any of the following in your home: pipes, rolling papers, small medicine bottles, eye drops, butane lighters, homemade pipes or bongs (pipes that use water as a filter) made from soda cans or plastic beverage containers.

Note: Some of these warning signs could also point to broader health problems, such as an emotional issue, physical or mental illness. Research suggests that as many as half of all kids involved with drugs or alcohol may be affected by mental health problems. Before you choose a course of action, discuss your observations with your child's doctor.

The Partnership at Drugfree.org has developed a wide range of resources for parents and caregivers, which are available at https://drugfree.org/prevention-and-taking-action-early/
ARE YOU CONCERNED ABOUT PARENTS OR OLDER FAMILY MEMBERS?
Talking to a family member about their drug use can be scary, especially if they are older than you, but remember:

- I have the right to speak up.
- I have the right to get help.
- I have the right to be loved.
- I have the right to be safe.

7 Steps to Talking With a Parent About Substance Use

1. Write down your feelings first
2. Get help from someone with experience in interventions
3. Ask other relatives or concerned persons to participate
4. Arrange a time when your parent will be sober
5. Keep the conversation calm
6. State your expectations clearly and in writing
7. Get help making sure your parent follows through

If you aren't ready to speak with them, here are a few suggestions:

- Find an adult to confide in. Think of at least one older person you respect and trust, someone who understands you and makes you feel valuable. It could be a teacher, a coach, a favorite aunt or uncle, or a neighbor. Let them know about your fears, and ask them if they would be willing to help.
- Keep a journal. Writing down your feelings and recording things that happen may be a good way to remember things that have happened when you made the decision to talk to someone.
- Collect emergency numbers. Have a list of people who you could contact in a crisis. These numbers could include emergency services, teen hotlines, relatives who have helped you in the past, neighbors, coaches, or anyone else you feel you could turn to if things get really bad.

You don’t need to be an adult to call 2-1-1 and ask for resources, or search for Substance Use Disorder Services on https://my211.force.com/s/.
TALKING TO CHILDREN ABOUT TRAUMA

Childhood traumatic stress occurs when violent or dangerous events overwhelm a child’s or adolescent’s ability to cope. The signs of traumatic stress are different in each child. Young children react differently than older children. Also, not all children experience child traumatic stress after experiencing a traumatic event, but those who do can recover.

As a family member or other caring adult, you can play an important role. Remember to:

- Assure the child that he or she is safe. Talk about the measures you are taking to get the child help and keep him or her safe at home and school.
- Explain to the child that he or she is not responsible for what happened. Children often blame themselves for events, even those events that are completely out of their control.
- Be patient. There is no correct timetable for healing. Some children will recover quickly. Others recover more slowly. Try to be supportive and reassure the child that he or she does not need to feel guilty or bad about any feelings or thoughts.

Even with the support of family members and others, some children do not recover on their own. When needed, a mental health professional trained in evidence-based trauma treatment can help children and families cope with the impact of traumatic events and move toward recovery.

WHAT TO DO IF A LOVED ONE RELAPSES

Remember, addiction is a medical condition. First you need to understand what is going on medically. Relapse is a symptom of substance use disorder. It doesn’t mean someone has failed or didn’t try hard enough.

Be aware that if a person has been abstinent from a drug and then tries to go back to their old dosage, they are at risk of an overdose because their body does not have the same tolerance. Knowing this, you can be prepared for an emergency. Keep a naloxone kit with you.

Most importantly, don't blame them, but show love instead.
PEOPLE DO RECOVER FROM METH ADDICTION

Recovering from meth addiction can be difficult, but it is not impossible. Research shows that meth addiction is treatable — people do get better.

CHALLENGES OF METH TREATMENT

Because of the drug's destructive nature, treating meth addiction presents unique challenges. Upon entering treatment, a meth user may:

- Require several nights of good sleep, since meth users have often been awake for days
- Be more agitated during the first month and have a very short attention span
- Have psychiatric problems such as delusions or extreme agitation
- Have physical problems, such as wounds, seizures and advanced tooth decay
- Require longer treatment than they might from an addiction to another substance. Because it may take longer, there is a high potential for relapse, so support and understanding from family and friends is important.

WHAT WORKS?

There are many forms of treatment, but effective treatment is evidence-based and addresses physical, psychological, emotional and social problems; and will involve family and friends. Treatment is most successful when the individual has the support of loved ones.

TREATMENT FOR METH IS GETTING BETTER AND BETTER

The National Institute on Drug Abuse (NIDA) and the Substance Abuse and Mental Health Services Administration (SAMHSA) has invested tens of millions of dollars into researching the effects of meth and effective treatments. According to NIDA and other experts, one treatment method, the Matrix Model, has shown significant success in treating meth addiction.

MEET REAL PEOPLE IN RECOVERY FROM METH

You can find the Voices of Hope video series on www.no2meth.org/ or on YouTube with the search “Voices of Hope - Scott Silverman Project”.

You can also visit drugfree.org/personal-stories/, where you'll find inspiring personal stories of meth recovery.
AND KEEP IN MIND RECOVERY IS POSSIBLE

- **Treatment options vary.** Sometimes a variety of approaches are needed to help someone achieve recovery. Different types of treatment work for different people.
- **Treatment is a process that takes time and persistence, but it is worth it.** Recovery is possible, but it is not instantaneous. It is an ongoing, often challenging process that requires work to maintain, but it can lead to a profound life transformation and enormous personal growth.
- **Treatment is possible for everyone – even you.** If you’re concerned about your own drug or alcohol use, you don’t have to deal with it alone. Consider talking to a doctor, therapist, teacher or family member who can lend support. Or attend a meeting of an anonymous self-help group devoted to helping members recover and lead healthy lives.
- **Treatment does work.** People with drug or alcohol problems can get better; they can regain their physical health and well-being and improve their relationships with others.

FINDING HELP

*Act now.* First steps are often the most difficult, but when it comes to addiction, you cannot wait. Addiction is a disease — a serious health problem like heart disease, cancer or diabetes — and it can happen to anyone. If left untreated, it will can progress and may even be fatal. Don’t wait until something really bad happens. Get help now.

To receive more information about treatment:

- Call 2-1-1
- Call the Access and Crisis Line at (888) 724-7240
- Download the NAMI oscER app on your mobile device

*Find more information about these services on the resources page at the back of this toolkit.*

**Drugfree.org** has created tools for those seeking help. At this site, you can:

- Get the facts. Educating yourself about drug or alcohol addiction is the first step.
- Learn about addiction, types of treatment and where to go for help.
- Take online quizzes to find out if you or someone you know needs professional help.
- Discover what family members can do to support a loved one’s recovery.
- Get help for your problem and support to stay off drugs and alcohol.
- Read real people’s stories of how they got well.
- Find links to the best resources on the web.
EDUCATE YOURSELF
Learn more about meth at the following sites:
- www.no2meth.org/meth-101
- www.drugabuse.gov/publications/drugfacts/methamphetamine
- www.dea.gov/factsheets/methamphetamine

SPREAD THE WORD
- Once you've learned the facts about the dangers of meth, talk about them with your friends, neighbors, coworkers and most importantly your children.
- Put up educational posters in stores in your area and where you work.
- Write letters to your local newspaper and television stations to encourage them to cover meth-related news stories — or share your personal experience with them.
- Email relevant news articles to your friends to make them more aware of the dangers of this drug.

BE ALERT
- Look for signs of meth use, production and dealing throughout your neighborhood.
- Report suspicious activity to the police.
- If you're moving into a new home, ask your real estate broker about meth activity in the area.
- Share these fact sheets with local area schools to assist teachers and administrators in spotting the signs of meth use and the signals that a child may be living in a home where meth is used.

TAKE ACTION
- Go to www.no2meth.org and view available local resources.
- Call the Access and Crisis Line at (888) 724-7240 for free and confidential support and resources from a counselor, available 24/7.
- Call San Diego 2-1-1 for resources for community, health, social, and disaster services available 24/7 for free and in over 200 languages.
- Go to www.drugfree.org and subscribe to the eNewsletter.
- Talk to your kid about the dangers of meth.
- Speak out in schools, places of worship or any public community forum and educate others about the dangers of meth.
- Encourage family and friends struggling with meth use to get help.
- Volunteer at a local treatment center, hospital or burn center, or offer your time to social workers helping at-risk youth and children whose parents suffer from addiction.
- Advocate for an in-school meth education program at PTA meetings and teacher conferences.
- Work with the local police to set up a Block Watch program in your neighborhood.
- Join a meth education, support or activist group.
- Enlist the help of groups in your community: newspapers and TV stations, faith-based organizations, neighborhood watch programs, local businesses, colleges and universities, real estate and public housing agencies, secondary schools and parents' organizations.
Local Methamphetamine Resources

San Diego County Meth Strike Force
www.no2meth.org

San Diego County Access & Crisis Line: (888) 724-7240
Confidential and free of charge, the line is immediately answered 7 days a week, 24 hours a day.

2-1-1 San Diego
Call this free resource and information hub to connect with over 6,000 services, including connecting with substance abuse treatment resources. Information is available 24/7 through a stigma-free, confidential phone service and is available in more than 200 languages.

San Diego Crystal Meth Anonymous: (855) 638 - 4373
https://sandiegocma.org/

San Diego Imperial Counties Region Narcotics Anonymous: Toll Free (800) 479-0062
https://www.sandiegonaa.org/
English (619) 584-1007
Espanol (619) 546-0774

Crime Free Multi-housing
To be connected to your local prevention provider, email msf@ccrconsulting.org.

Up2SD - It's Up to Us San Diego
https://up2sd.org/

National Alliance on Mental Illness (NAMI): (800) 523-5699
https://namisandiego.org

NAMI osCER App
The mobile app "osCER San Diego" by NAMI can provide guidance during a psychiatric crisis. Scan QR code to download app.
The Partnership to End Addiction at Drugfree.org
www.drugfree.org
Comprehensive information, resources, video stories and tips from experts and parents.

National Institute on Drug Abuse (NIDA)
www.drugabuse.gov

National Institute of Mental Health (NIMH)
www.nimh.nih.gov

Substance Abuse and Mental Health Services Administration (SAMHSA)
www.samhsa.gov

SAMHSA Substance Abuse Treatment Facility Locator
www.samhsa.gov/find-treatment or findtreatment.gov

Community Anti-Drug Coalition of America
www.cadca.org

The Drug Enforcement Administration
www.dea.gov/factsheets

Just Think Twice
www.justthinktwice.com
A youth oriented site created by the Drug Enforcement Agency's Demand Reduction Program

The National Alliance for Drug Endangered Children
www.nationaldec.org
Alliance for those concerned about children endangered by caregivers who manufacture, deal or use drugs

National Association of Counties – Methamphetamine Action Clearinghouse
www.naco.org
(Search on "meth action clearinghouse") NACo is committed to raising public awareness about and helping counties respond to the nation's methamphetamine drug problem
METH 101
Presented by
San Diego County Meth Strike Force

What is Meth?
Methamphetamine, also known as “speed,” “crank,” “crystal,” or “ice” is a highly addictive, powerful central nervous system stimulant. The color and texture of meth can vary; it is usually white or slightly yellow in a crystal-like powder or rock-like chunks.

Meth use results in increased heart rate and blood pressure, elevated temperature, and wakefulness. These effects can last 8 to 24 hours.

483 meth-related deaths occurred in San Diego County during 2018

Harms of Use
Tolerance develops rapidly, often leading to addiction in a relatively short time.

Meth use can cause heart palpitations, nausea, damage to blood vessels in the brain, shortness of breath, mental confusion, malnutrition, anorexia, severe anxiety, and depression.

Continued use can lead to permanent damage to the brain, heart and death.

Common Signs of Use
The signs and symptoms of a meth addiction are both physical and psychological:

- Sleep disturbances
- Mood swings, explosive outbursts
- Relationship problems, sudden change in friends, & reduced interaction with family
- Unexplained need for money in order to purchase drugs
- Changes in eating patterns

Adults 55 to 64 years old have the highest meth-caused death rate in San Diego County.
An overdose occurs when a toxic dose is consumed. This can happen easily because meth is made illicitly from a variety of toxic chemicals and can be deadly.

Common symptoms of a meth overdose:

- Chest pain
- Arrhythmias
- Hypertension or hypotension
- Difficult or labored breathing
- Agitation
- Hallucinations
- Psychosis
- Seizures
- Rapid or slow heartbeat
- Hyperthermia

A meth overdose can occur suddenly, often without symptoms. If you think someone is suffering from a meth overdose, it is critically important that they get help right away. Call 911 as soon as signs of an overdose are evident, and then take steps to keep the person safe until emergency care arrives.

Tips on how you can help someone using meth:

- Get your facts
- Maintain open and honest communication
- Negotiate and set guidelines
- Support and encourage positive behavior
- Don’t forget to look after yourself

View our full report card online

www.no2meth.org/

Resources

Local
Access and Crisis Line: 888-724-7240
2-1-1 SD or (858) 300-1211
https://www.no2meth.org/ or 1-877-NO-2-METH

National
SMART Recovery: https://www.smartrecovery.org/
Narcotics Anonymous: https://www.na.org/
Crystal Meth Anonymous: https://www.crystalmeth.org/
Al-Anon: https://al-anon.org/
Suicide Prevention Lifeline: 1-800-273-8255
SAMHSA’s National Helpline: 1-800-662-4357