

Special Topic: Considerations for Children & Families Affected by Methamphetamine Use

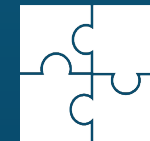
Child Welfare Training Toolkit



National Center on
Substance Abuse
and Child Welfare

Acknowledgement

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National Center on
Substance Abuse
and Child Welfare

Learning Objectives

After completing this training,
child welfare workers will:

- Recognize current methamphetamine terminology
- Identify physical indicators of methamphetamine use including long-term physical and psychological effects
- Understand changes to methamphetamine purity with knowledge of current data trends
- Discuss types of illegal manufacturing including multiagency efforts to increase public health and safety
- Recognize potential signs of methamphetamine production exposure with steps to ensure child and worker field safety
- Identify the short- and long-term effects of parental methamphetamine use on the prenatal, postnatal, childhood, and adolescence periods
- Improve their engagement, case planning, and referral practice with increased knowledge of evidence-based and emerging treatment considerations for methamphetamine use disorders

History of Methamphetamine



Developed in the 20th century from its parent drug, amphetamine

Known primarily for its illegal use but does have legitimate medical purposes

Methamphetamine Terminology

Speed	Crank	Gak	Ice	Fizz	Chalk
Crystal	Glass	Diamond	Hawaiian Salt	Shaved Ice	Wash
Trash	Dunk	Christina	Scooby Snax	Pookie	Popsicle
Cookies	Yellow Cake	Peanut Butter Crank	No Doze	Soap Dope	Stove Top
Tupperware	Evil Sister	Shiny Girl	Cotton Candy	Witches Teeth	Rocket Fuel

Slang Terms That Describe the Act of Using Methamphetamine

- Getting geared up
- Chicken flipping
- Hot rolling
- Getting fried or foiled
- Tweaking
- Zooming
- Getting scattered or spun out

Slang Terms for Combining Methamphetamine with Other Illicit Drugs

- Fire
- Twisters
- Hugs and kisses
- Party and play

Methamphetamine 101

DRUG TYPE

- Stimulant
- Schedule II-controlled substance



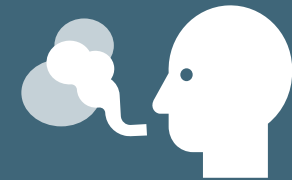
FORMS

- Powders
- Crystals
- Pills



METHODS OF USE

- Smoking
- Snorting
- Swallowing
- Injecting



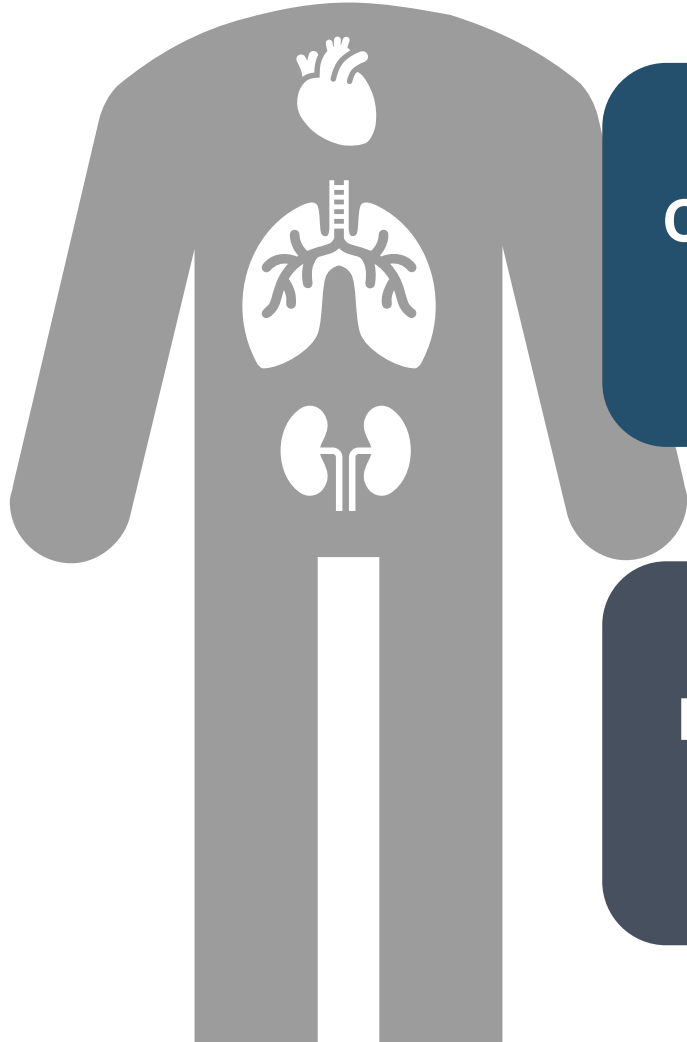


Physical Signs of Methamphetamine Use

Euphoria	Hyperactivity	Rapid heartbeat or breathing	Pressured speech	Pacing or repetitive movements
Weight loss	Sweating	Tremor (shaky hands)	Dry mouth	Tooth decay or gum disease
Skin lesions	Sensitivity to light	Depression (from drug wearing off)	Anxiety	Irritability or aggression



Long-Term Physical Effects of Chronic Methamphetamine Use



**Communicable
diseases**

Kidney failure

Seizures

**Lung or nerve
damage**

**Heart attack
or stroke**

Death

Short- & Long-Term Psychological Effects of Chronic Methamphetamine Use

Psychosis

Hallucinations

Paranoia

Delusions



The background of the slide features a close-up, high-contrast photograph of a rope knot. The rope is a thick, braided material, possibly nylon or polyester, with a dark grey or black color. The knot is a complex, multi-looped structure, likely a reef knot or a similar maritime knot, which is centered in the upper half of the frame. The lighting is dramatic, highlighting the texture of the rope and the intricate details of the knot. The background is a solid, light blue color that transitions from a slightly darker shade at the top to a lighter shade at the bottom, creating a subtle gradient effect.

Methamphetamine: Efforts to Improve Public Health & Safety

Methamphetamine Production

The rise of
methamphetamine
production:

Super Labs



Makeshift Labs



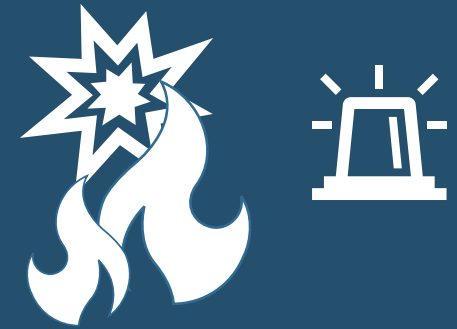
Methamphetamine Public Health & Safety Considerations

Safety and health hazards include:

**Dangerous
chemicals and
toxic waste**



**Fire and
explosions**



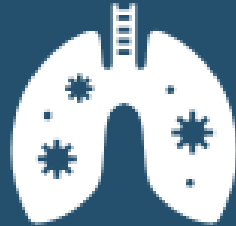
Safety & Risk Considerations: Acute Health Effects

Toxic Poisoning



Infections or
Other Health Risks

Respiratory Issues



Burns and Other
Physical Injuries

Safety Tips for Suspected Methamphetamine Manufacturing



Awareness of warning signs:

Presence of unusual or strong odors

Possession of unusual or hazardous materials

Observation of discarded items or hazardous materials

Additional Safety Tips for Suspected Methamphetamine Manufacturing



Additional warning signs include:

Covered or blacked out windows

Unusual ventilation systems

Elaborate security measures

Yard with dead vegetation

Heavy traffic during late night hours

Steps to Ensure Child Welfare Worker Field Safety



What to do if you suspect a makeshift lab:

Remain calm

Protect yourself and others

Notify law enforcement

Follow agency policies and protocols

Practice Considerations for Children Exposed to Methamphetamine Production

Follow agency exposure protocols including:

- ▶▶ Safety precautions for child removal and decontamination process
- ▶▶ Child comprehensive health screening

Multi-Agency Efforts to Address Public Health & Safety



High Intensity Drug Trafficking Areas (HIDTA) Program

Drug Endangered Children (DEC) Program

NIDA Methamphetamine Initiative

DOJ Community Oriented Policing Services (COPS)
Methamphetamine Initiative

Methamphetamine Clinical Trials Group at UCLA

NIDA Methamphetamine Addiction Treatment Think Tank

Combat Methamphetamine Epidemic Act (CMEA)

Changes to Methamphetamine Purity

Pre-CMEA
Federal
Regulations

35.3% - 57.4%

95.6% - 97.5%

Post-CMEA
Federal
Regulations

New Manufacturing Formula

P2P Method



Meth 2.0 or Super Meth



What the Data Tells Us About Methamphetamine Use



Percentage of Treatment Admissions (age 12 or older)

35.5%
440,540

Alcohol

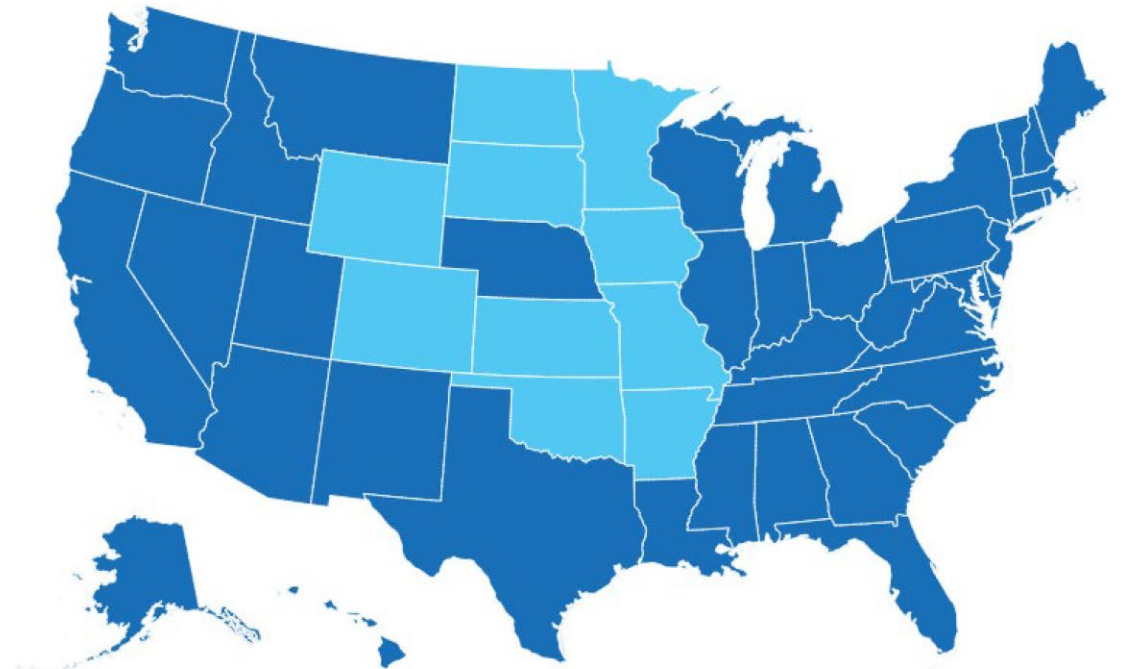
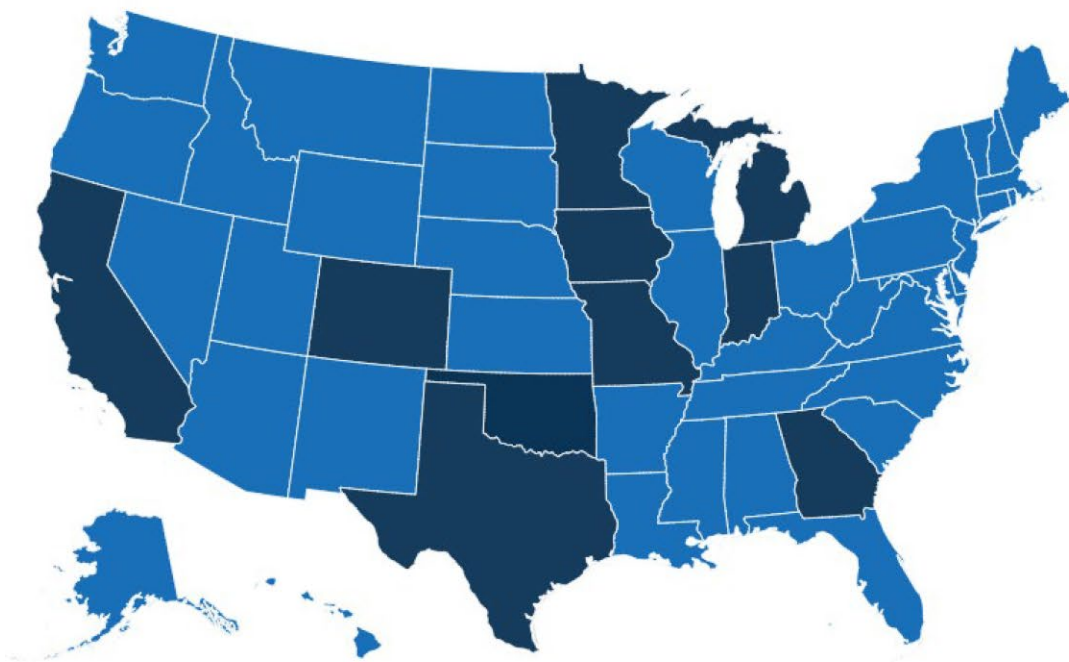
16.9%
209,466

Heroin

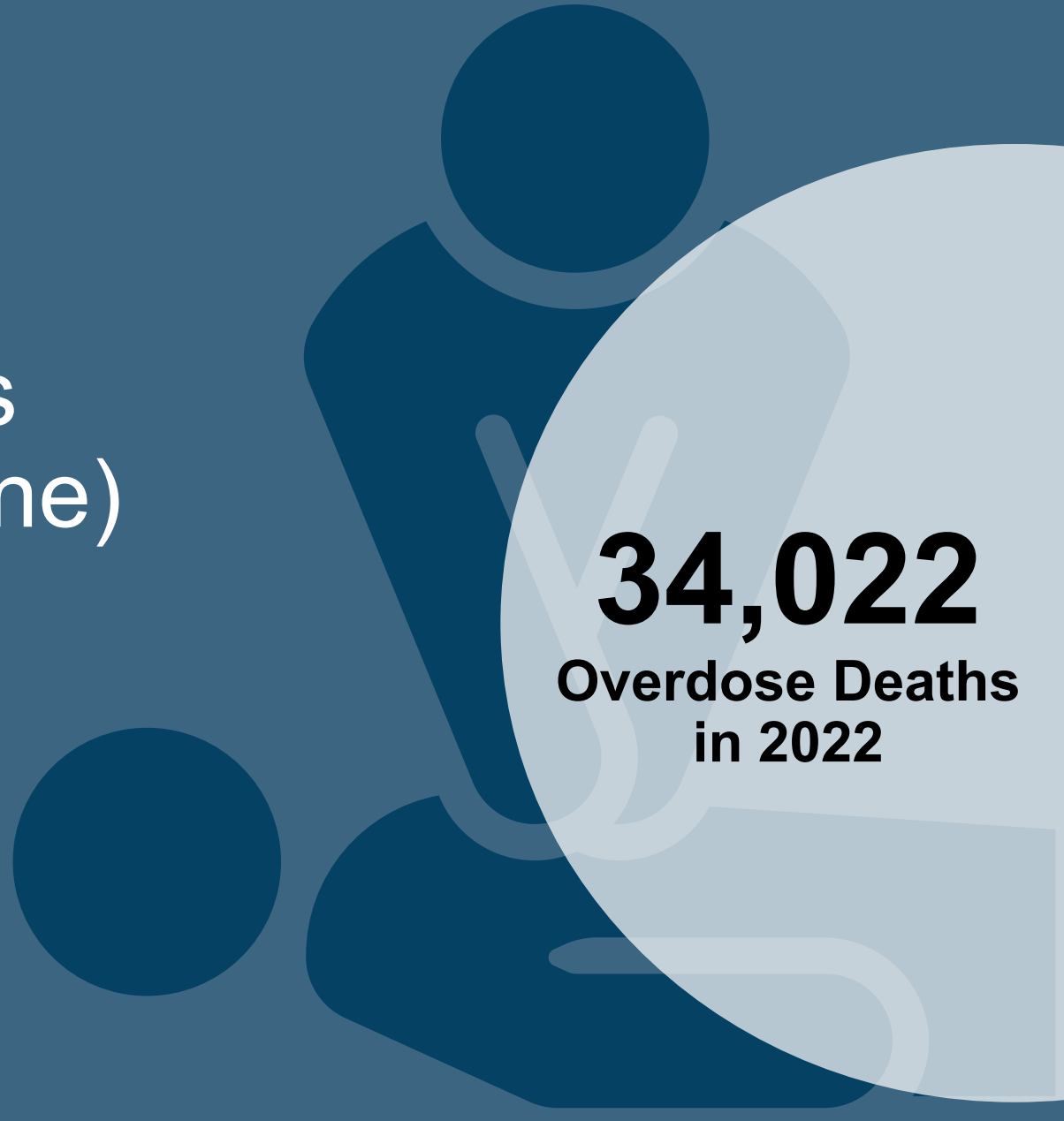
13.9%
171,882

Methamphetamine

Understanding Counts vs. Rates of Methamphetamine Treatment Admissions

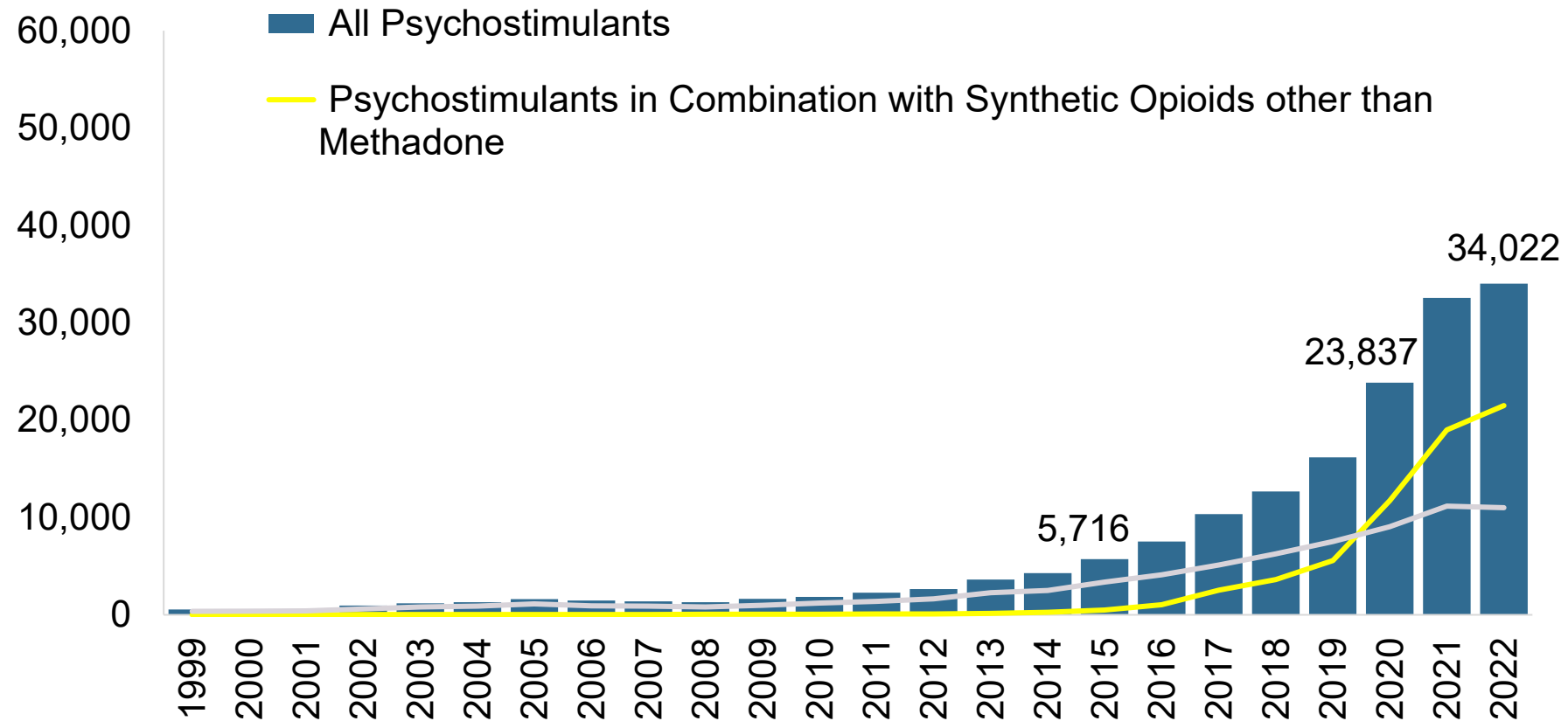


Overdose Deaths Involving Psychostimulants (Primarily Methamphetamine)



34,022
Overdose Deaths
in 2022

National Overdose Deaths Involving Psychostimulants with Abuse Potential (Primarily Methamphetamine)*, by Opioid Involvement, Number Among All Ages, 1999-2022



*Among deaths with drug overdose as the underlying cause, the psychostimulants with abuse potential (primarily methamphetamine) category was determined by the T43.6 ICD-10 multiple cause-of-death code. Abbreviated to *psychostimulants* in the bar chart above. Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2022 on CDC WONDER Online Database, released 4/2024.

Understanding the Initial Effects of the COVID-19 Pandemic on Overdose Death Rates



(Addictions, Drug and Alcohol Institute, 2021)

Twin Epidemics: Methamphetamine & Opioids

Rise in methamphetamine use in combination with opioid use

Important considerations for concurrent use of methamphetamine and opioids

Past-month use of heroin coincided with a 5-fold increase in methamphetamine use (up from 9 to 44%) between 2015-2019

Synergistic Effects
Heightened Overdose Risks

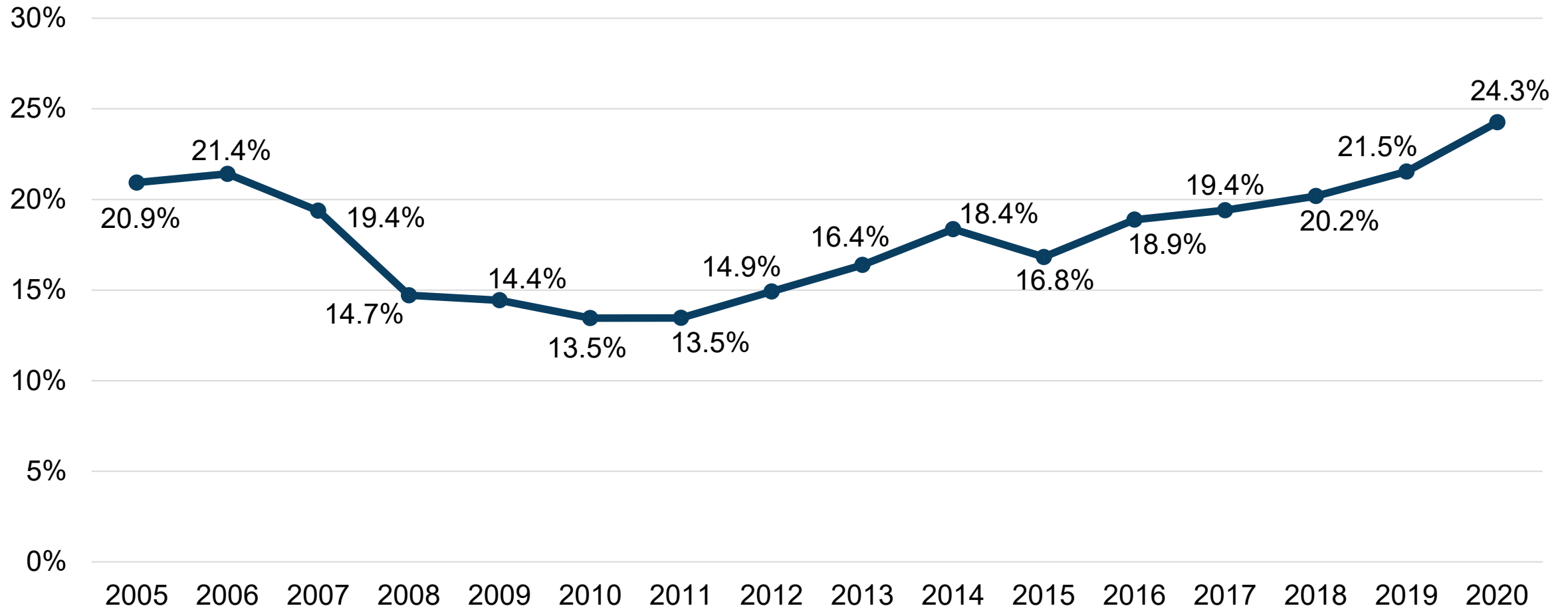
Understanding the Effects of Methamphetamine Exposure



A photograph of a pregnant woman wearing a white t-shirt, with her hands resting on her belly. The image is faded and serves as a background for the text.

What the Data Tells Us About Prenatal Methamphetamine Exposure

Percent of Treatment Admissions for Pregnant Women Who Reported Methamphetamine as a Primary Substance at Treatment Admission



Note: Estimates based on entry into substance use treatment for **pregnant women** during fiscal year.

Source: TEDS-A Data, 2005-2020

Short-Term Outcomes of Prenatal Exposure to Methamphetamine

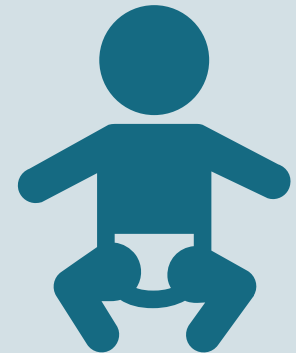
Fetal Growth Effects

Low birth weight

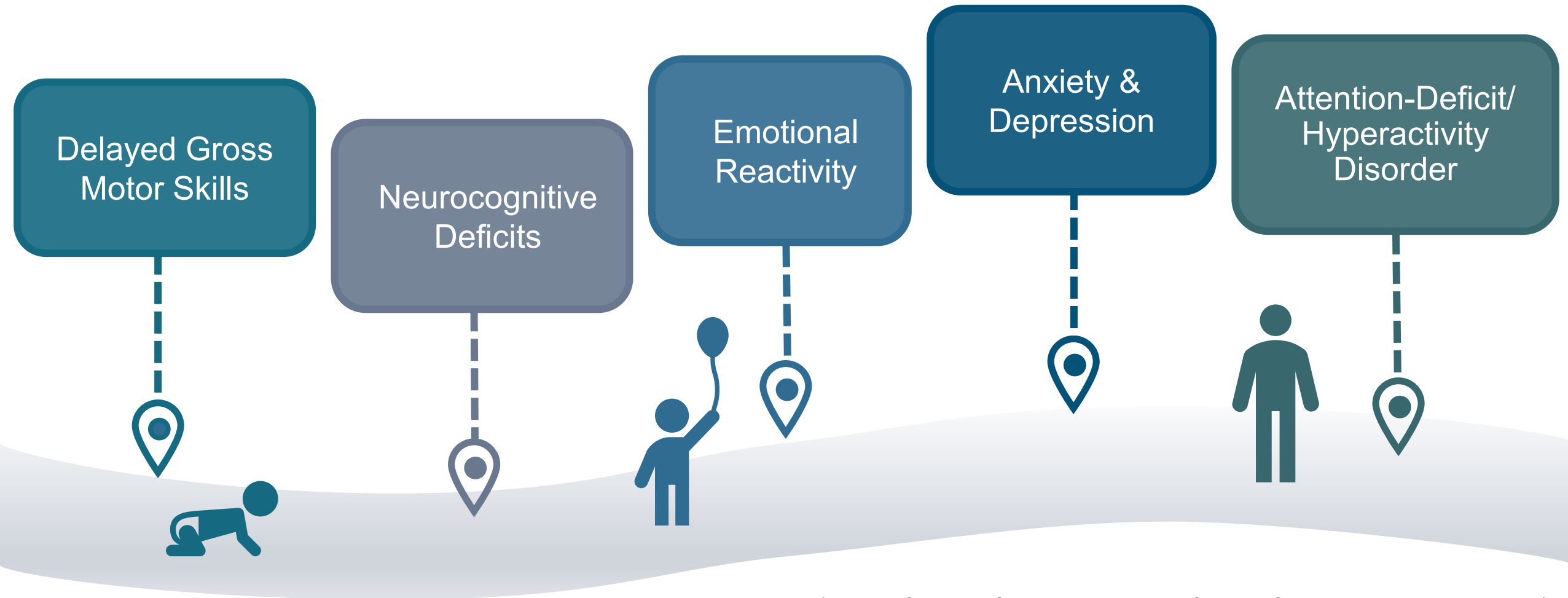


Abnormal Neurobehavioral Patterns

- Poor movement quality
- Decreased arousal
- Increased stress



Long-Term Outcomes of Prenatal Exposure to Methamphetamine



Exposure to Parental Methamphetamine Use During Childhood & Adolescence

Parental methamphetamine use is often associated with the following experiences for children and adolescents:



Exposure to parental violence, irritability, and anger



Increased likelihood of removal and placement in out-of-home care



Lower likelihood of successful reunification and higher rates of adoption compared to other parental substance use disorders

Strategies to Support Families Affected by Methamphetamine Use Disorder





Value of Personal Experience

“

Peer support services can effectively extend the reach of treatment beyond the clinical setting into the everyday environment of those seeking a successful, sustained recovery process.

”

How Peer Recovery Support Engages Families in the Change Process



Provide mentoring and coaching



Serve as a recovery role model



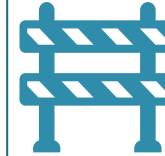
Help families navigate public systems



Parent engagement in child welfare settings



Connect families to services, community resources, and recovery supports



Help remove barriers to services and programs



Transportation, childcare referrals, court and family meetings



Help raise awareness, reduce stigma, and promote advocacy and recovery



Help establish new recovery supports in community



Change organizational culture where they work



Share experience, strength, and hope

Family-Centered Practice Strategies



Collaborate	Collaborate with the experts on substance use disorders in your community.
Talk	Talk with the treatment provider to learn what evidence-based treatment and therapeutic approaches are used to treat methamphetamine use disorders.
Understand	Understand that outpatient treatment can be as effective as inpatient treatment when supportive services and community supports are provided.
Refer	Refer and link parent and families to tailored services and supports that meet their unique needs.
Ensure	Ensure that co-occurring disorders, such as depression and anxiety disorders, are addressed in treatment.
Support	Belief and understanding that recovery from methamphetamine is possible; just may require extra support.
Convey	Convey empathy and a sense of hope in your interactions with parents.

Important Reminder About Methamphetamine Treatment Retention



53.5%

**Methamphetamine
Dropout Rate**

39.3%

**Opioids
Dropout Rate**

34.9%

**Cannabis
Dropout Rate**

How Engagement Might Look Differently for Methamphetamine Use...

Real-Time Coaching & Skill Building:



Accessing treatment and supportive services



Completing intake or enrollment paperwork



Scheduling appointments and setting up reminders



Arranging transportation services or help with navigating public transportation system



Reinforcing positive steps toward recovery—
big or small!

A woman in a long dress is lifting a young child into the air. They are silhouetted against a vibrant sunset sky with large, colorful clouds in shades of orange, yellow, and purple. The ocean is visible in the background. The scene is overlaid with a semi-transparent white box containing the text.

Recovery Is Possible!

A blurred background image showing two people shaking hands, suggesting a professional or therapeutic interaction. The image is overlaid with three dark blue boxes containing text and a dark blue footer bar at the bottom.

Motivational
Interviewing

Cognitive
Behavioral
Therapy

Contingency
Management

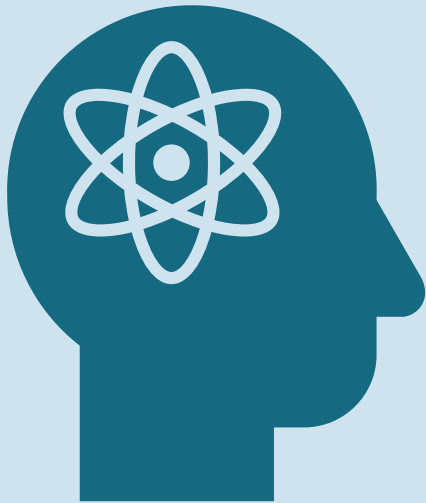
Evidence-Based Interventions for Methamphetamine Use Disorder

Evidence-Based Interventions for Methamphetamine Use Disorder

Motivational Interviewing



Cognitive Behavioral Therapy



Evidence-Based
Interventions for
Methamphetamine
Use Disorder

Evidence-Based Interventions for Methamphetamine Use Disorder

Contingency Management



Effective Treatment Models for Methamphetamine Use Disorders

The Matrix Model



16-week

comprehensive
treatment approach

Delivered in an intensive
outpatient setting

Combines various modalities to promote recovery from stimulants:

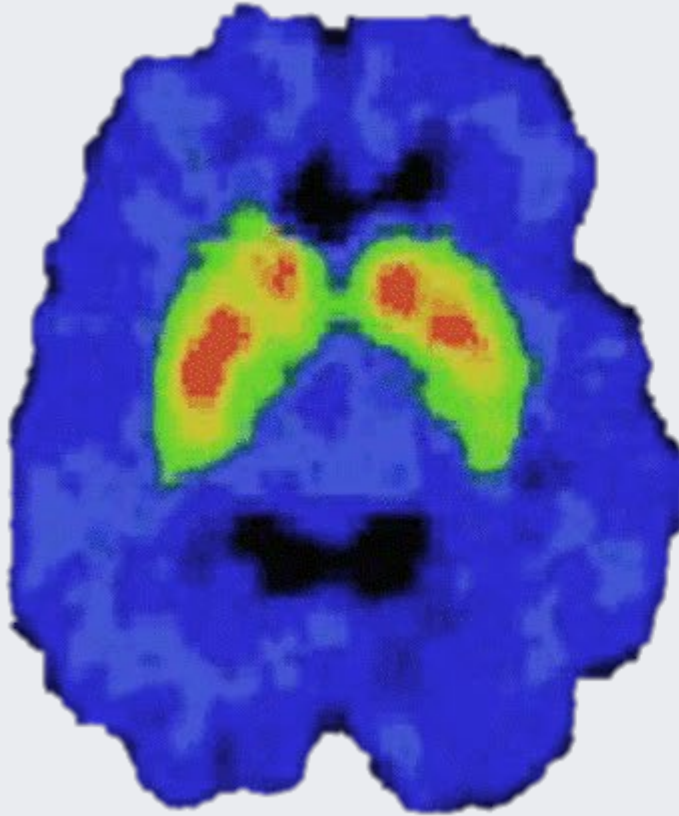
- Individual and family counseling
- Early recovery skills groups
- Relapse prevention groups
- Family education groups
- 12-step programs
- Random drug testing
- Social support groups



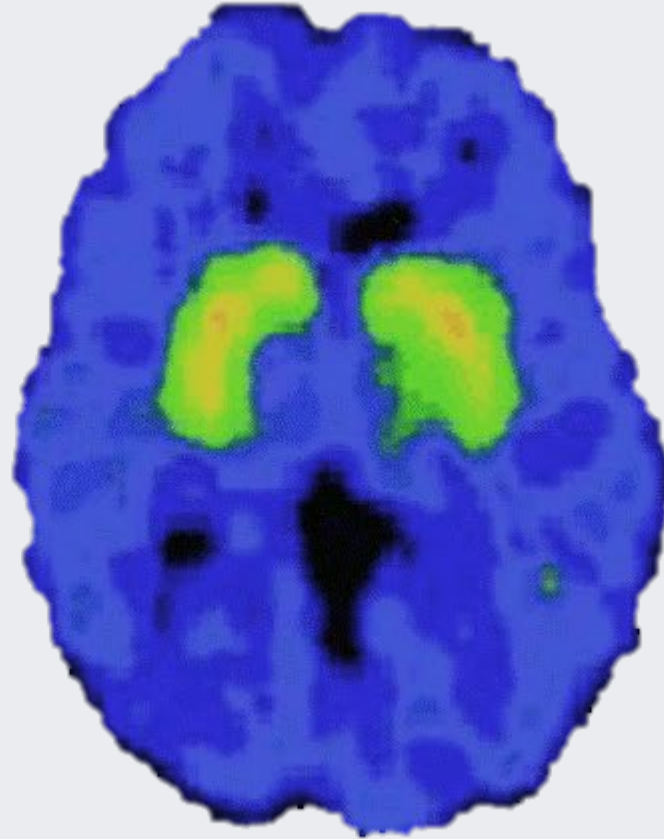
Emerging Treatment Considerations for Methamphetamine Use Disorders



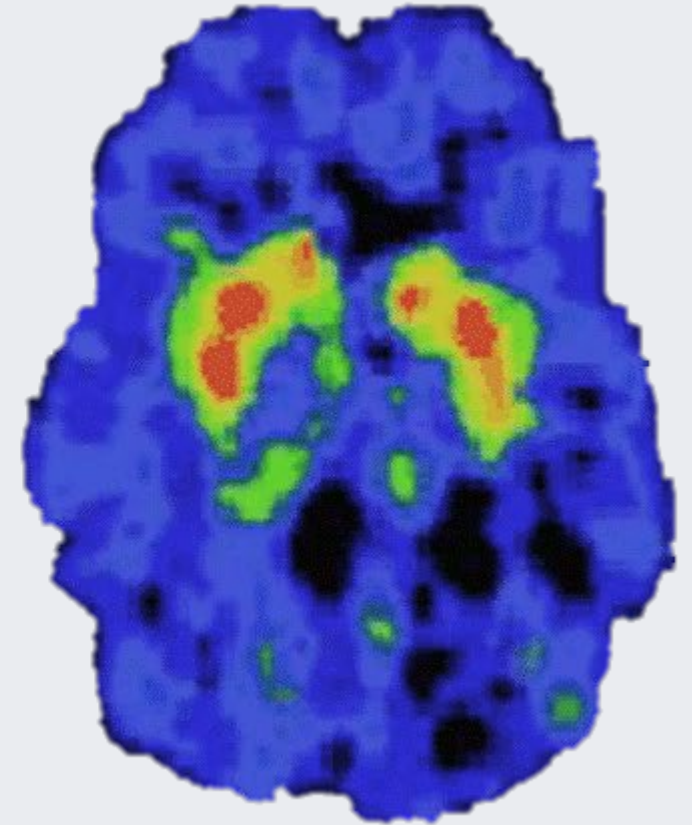
Length of Treatment & Recovery Matters



No SUD



**MUD 1 month
recovery**



**MUD 14 months
recovery**

Doorway Recovery Videos

Permission to Use & Video Credit provided by
New Hampshire Department of Health and Human Services

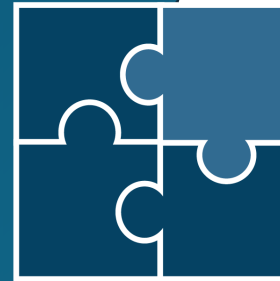
[Ira's Story: Getting Real with Addiction](#)

Contact

Contact the NCSACW TTA Program

Connect with programs that are developing tools and implementing practices and protocols to support their collaborative

Training and technical assistance to support collaboration and systems change



National Center on Substance Abuse and Child Welfare



<https://ncsacw.acf.hhs.gov/>



ncsacw@cffutures.org



Toll-Free @ 1-866-493-2758

References

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- U.S. Environmental Protection Agency. (2021). *Voluntary guidelines for methamphetamine and fentanyl laboratory cleanup* (Revised ed.). https://www.epa.gov/sites/production/files/documents/meth_lab_guidelines.pdf
- U.S. Environmental Protection Agency. (2024). *Waste & debris fact sheets: Methamphetamine labs* [Fact sheet]. <https://iwaste.epa.gov/guidance/natural-disaster/fact-sheets/types-of-waste?id=methamphetamine-labs>

Resources

Resources, 1 of 2

- Department of Justice/Drug Enforcement Administration: [Methamphetamine Drug Fact Sheet](#) (2020)
- National Center on Substance Abuse and Child Welfare: [Children Affected by Methamphetamine Program: Implementation Progress and Performance Measure Report](#) (2016)
- National Center on Substance Abuse and Child Welfare: [How Using Contingency Management Can Support Families Affected by Substance Use Disorders Webinar](#) (2022)
- National Center on Substance Abuse and Child Welfare: [Strategies to Support Parents with Methamphetamine Use Disorder and Their Families](#) (2022)
- National Center on Substance Abuse and Child Welfare: [Supporting Children Affected by Parental Methamphetamine Use](#) (2021)
- National Center on Substance Abuse and Child Welfare: [Working with Adolescents: Practice Tips and Resource Guide](#) (2021)
- National Center on Substance Abuse and Child Welfare: [Child Welfare & Planning for Safety: A Collaborative Approach for Families with Parental Substance Use Disorders and Child Welfare Involvement](#) (2023)
- National Center on Substance Abuse and Child Welfare: [Engagement and Safety Decision-Making in Substance Use Disorder Cases](#) (2023)
- National Center on Substance Abuse and Child Welfare: [Identifying Safety and Protective Capacities for Families with Parental Substance Use Disorders and Child Welfare](#) (2023)
- National Center on Substance Abuse and Child Welfare: [Planning for Safety in Cases When Parental Substance Use Disorder is Present](#) (2023)

Resources, 2 of 2

- National Center on Substance Abuse and Child Welfare: [*The Use of Peers and Recovery Specialists in Child Welfare Settings*](#) (2019)
- National Center on Substance Abuse and Child Welfare: [*Understanding Engagement of Families Affected by Substance Use Disorders: Child Welfare Practice Tips*](#) (updated 2023)
- National Center on Substance Abuse and Child Welfare: [*Understanding Screening and Assessment of Substance Use Disorders — Child Welfare Practice Tips*](#) (updated 2022)
- National Center on Substance Abuse and Child Welfare: [*Understanding Substance Use Disorders —What Child Welfare Staff Need to Know*](#) (updated 2022)
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