

**Michigan State Methamphetamine Task Force  
Prevention Subcommittee  
Adult Methamphetamine Education/Awareness Guidelines  
July, 2006**

The Prevention Subcommittee of the Michigan Methamphetamine Task Force would like to recommend the following document as a guideline for best practices in methamphetamine community education.

Due to the growing methamphetamine problem in southwestern Michigan the Office of Drug Control Policy (ODCP) awarded a three-year Methamphetamine Prevention Infrastructure Initiative Grant to the four substance abuse coordinating agencies covering 21 counties in southwestern Michigan.

The grant was designated to support local “meth” task forces with the goal of providing a forum to promote enhanced cooperation and provide opportunities for communities to respond to the multiple problems associated with “meth” manufacture, sale and use. In response to the issues communities face, unique to the “meth” challenge, substance abuse professionals have engaged with other community organizations, groups and individuals to address multiple sector concerns including: public health, child endangerment, contamination/clean-up, law enforcement, “meth” component availability, law/standards, as well as treatment and prevention education.

A Regional Methamphetamine Workgroup was formed in the Kalamazoo Community Mental Health & Substance Abuse Services (KCMHSAS) region, including Barry, Branch, Kalamazoo, St. Joseph, and Van Buren Counties. This workgroup was formed in part to develop guidelines for methamphetamine prevention education in the region. Made up of prevention professionals, representing the five county task forces in the region, the workgroup has developed the following guiding principles, tenets, delivery models, and intervention strategies for methamphetamine prevention education based on established best practices, current research literature, and existing prevention programming knowledge.

The following is based on the work of the Kalamazoo regional workgroup. This document is intended for use as a guide when educating the community residents and various stakeholders. This document is in no way intended to be used exclusively, and should serve as a guide to begin the process; and then explore further the target audiences' knowledge, cultural, and educational background, and depth of information necessary to each group specifically.

**Guiding Principles:**

To be effective meth education/awareness presentations should:

- When ever possible utilize multiple presenters in a multi-agency approach
- Protect confidentiality – avoid using local faces of meth
- Use appropriate language
- Know your audience
- Presentations containing adult content should stipulate adults only
- Present creditable facts with appropriate references
- Presentations are an appropriate length for audience
- No self/agency promotion or solicitation
- Provide examples of positive community responses e.g. reporting, protecting. treatment
- Utilize presenters trained in and knowledgeable about methamphetamine issues
- If you do not know how to respond to a specific question please refer to an appropriate source

## Tenets:

### **Basic Meth 101:** - one-hour presentation maximum

#### What is meth

- Lab seizure increases in recent years
- Why is meth a problem
- History of meth
- What might be considered suspicious behavior
- Physical effects (faces of meth)
- Psychological effects
- Where labs might be found
- How to spot a meth lab
- Importation of meth

#### Meth's affect on the public

- Why labs are harmful
- How meth affects kids
- How meth can affect your family
- Why labs are harmful to the environment
- Photos of labs
- Personal risks to individuals

#### Solutions to the meth problem

- Treatment
- Law enforcement
- What is being done in their county
- How can they help
- How can they report a meth lab
- What not to do
- Victims of meth
- What the task force has done
- Meth legislation

**Tailored presentations to specific populations: (special emphasis). Tailored presentations are designed to supplement basic Meth 101. However, if time is limited, focus on areas of special emphasis.**

#### **a. Realtors/landlords/bank officials**

- Environmental perspective
- How to protect your property
- Options available if something happens: what to do
- Liability issues
- Effective decontamination measures
- Who is responsible for the costs associated with decontamination
- Who they should be talking to in terms of being covered
- What is being done locally (e.g.: to identify contaminated property)
- Disclosure issues

- b. Service clubs – 20-30 minute limited time**
- What is meth
  - What are the dangers to the community
  - What is being done
  - How can you report it
  - What do people who use meth look like
  - What are the physical effects
  - What does a meth lab look like
  - Road side pick-up issues
  - What is being done to fight meth
- c. People working with children – teachers, DHS workers, bus drivers**
- Slang names
  - Paraphernalia
  - How it is taken
  - Meth effects on pregnancy
  - Meth effects on children
  - How to protect yourself
  - How parents/care givers meth use affects children
  - How meth manufacture and use affects families and communities
  - Sign and symptoms on children/parents
  - How can you report it
- d. Farmers/agricultural community**
- How can farmers be affected (e.g.: loss of money)
  - Impact on farming (e.g.: dead animals, anhydrous theft)
  - Labs on rural property
  - Liability issues
  - Where to get additional information
  - What are anhydrous suppliers doing
  - What is suspicious behavior
  - How can you report it
- e. Parents/care givers**
- The focus is on ATOD, not just meth
  - Signs and symptoms of meth use in homes
  - Over-the-counter stimulants
  - Faces of meth
  - Internet use issues
- f. Elected officials**
- Emphasize progress being made in treating addicted individuals
  - What has been done to address the meth problem
  - What is being planned
  - Ask for support (e.g.: sign a petition, issue a proclamation)

- g. Health professionals**
- What are the contaminants they will be dealing with
  - Personal risk of exposure
  - Decontamination issues
  - Signs and symptoms of meth use
  - How is the patient going to present to them in the ER/doctors office
  - How can you report it
- h. Employers**
- What is it going to cost them (e.g.: lost productivity, sick time, accidents)
  - Drug free work place policies and how they operate
  - How do they report suspicious behavior
  - Sign and symptoms of meth use
  - How to tell if an employee is using
  - What is the probability of recovery
  - Who are the referral sources for employees in trouble
  - How does their EAP interface with referral sources and troubled employees
- i. Infrequent home visitors ( pizza delivery, meter readers, TV cable workers)**
- Signs and symptoms of meth manufacture or use
  - What to look for
  - How to report suspicious activity
  - How to protect themselves