Methamphetamine: The Basics

Jamie Tompkins





Agenda

- What is methamphetamine?
- How is methamphetamine made?
- How is methamphetamine used?
- How does methamphetamine affect users?
- What are the short- and long-term effects?
- How common is methamphetamine use?
- Who uses meth?
- What do meth users look like?
- Treatment and prevention of the spread of meth use?
- Who can you reach out to for help?

What is methamphetamine?

- A derivative of amphetamine
- A powerful stimulant
 - Stimulants increase energy and alertness
 - Can last up to 15 hours
- Can kill brain cells

What does meth look like?

 The powdered form is commonly referred to as speed, crank, or chalk





What does meth look like?

• It can be sold as chunks, pressed into tablets, or made into capsules









What does meth look like?

 The crystalline form is known as krank, crystal, glass, ice, shards or points

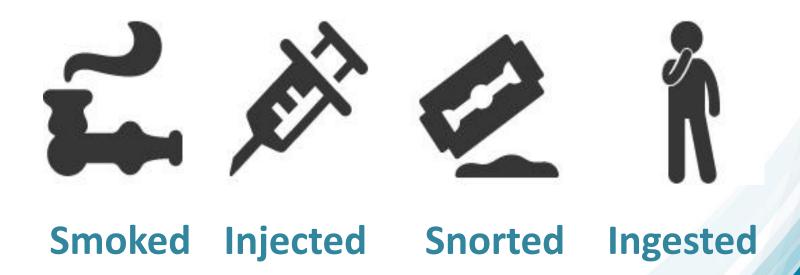


How is meth made?

 There are different types of labs and a wide variety of recipes.



• Depends on the form, the user and the location.





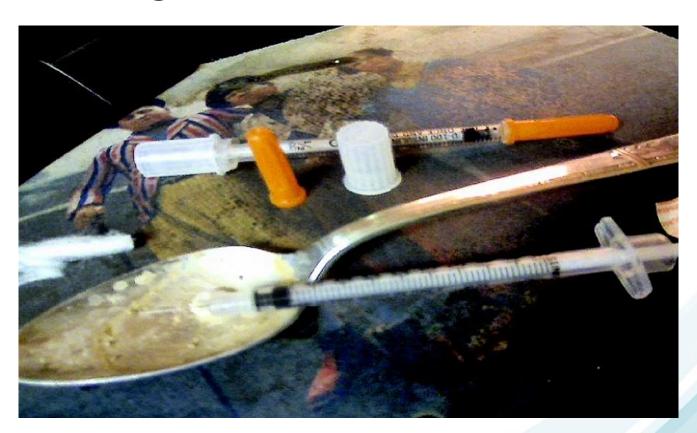
Crack or meth pipe



Light bulb pipes are common

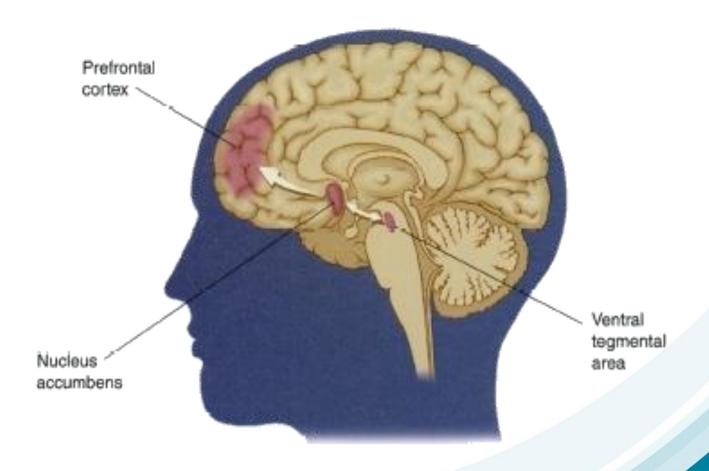


Injecting is a recent trend



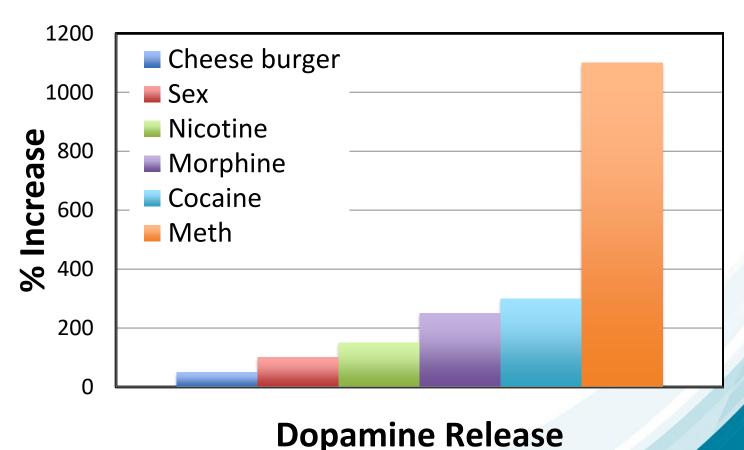
How does meth affect users?

Dopamine & Reward:



How does meth affect users?

Dopamine & Reward:



Afth

Dose-related effects

Low-moderate

Euphoria, "rush"
Alertness/wakeful
Increased confidence
Hyperactivity
Loss of appetite

Higher doses

Talkativeness

Aggression

Restlessness

Repetitive behaviour

Very high/bingeing

Agitation, confusion, panic

Anxiety, irritability

Negative mood

Violent behaviour

Impaired motor skills

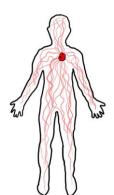
Impaired thinking

Persistent repetition of meaningless behaviours

Auditory hallucinations

Feeling of insects under skin

Paranoia





How does meth affect the user?

Common short term affects:

- Energetic & alert
- Happy & excited
- Reduced appetite
- Dry mouth/cracked lips
- Flushed clammy skin
- Increased heart rate

- Shortness of breath
- Trouble speaking
- Aggressive/violent
- Feeling suicidal
- Diarrhea/constipation
- Trouble coordinating movements

How does meth affect the user?

Severe short term affects:

- Convulsions (severe muscle spasms)
- High body temperature/blood pressure
- Irregular heart beat
- Stomach cramps
- Stroke
- Death if above side effects do not get medical attention



Long-term effects



THE BRAIN

BLEEDING OR STROKE AGGRESSION, PARANOIA, HALLUCINATIONS OR 'CRACK BUGS' DEPRESSION, ANXIETY AND MEMORY LOSS



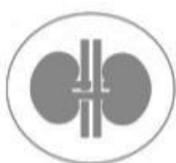
METH

DRY MOUTH, BLACK ROTTING TEETH



THE HEART

FAST, ERRATIC HEART BEAT, HIGH BLOOD PRESSURE, DAMAGED BLOOD VESSELS



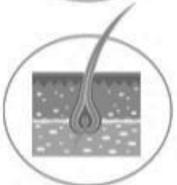
AND LIVER

DAMAGE FROM POOR NUTRITION



THE MUSCLES

WEAK, LACK OF COORDINATION



THE SKIN

AGED SKIN, SORES

Meth & Psychosis

- Meth users are much more likely to experience psychosis than the general public
- After psychotic episode, further episodes are more likely
- Almost 25% of regular meth users will have psychotic symptoms in a year
- Key risk factors:
 - Intensity of use (high doses for long periods of time)
 - Dependence on meth
 - History of schizophrenia
 - Cognitive impairment
 - Childhood trauma († adverse childhood events)
- About 1/3 of people with meth-induced psychosis go on to develop primary psychosis

How common is meth use?

• AFM:

Trend for both youth & adult clients over the past 5 years towards increased methamphetamine use

Past year use: youth 3.4 - 6.1%

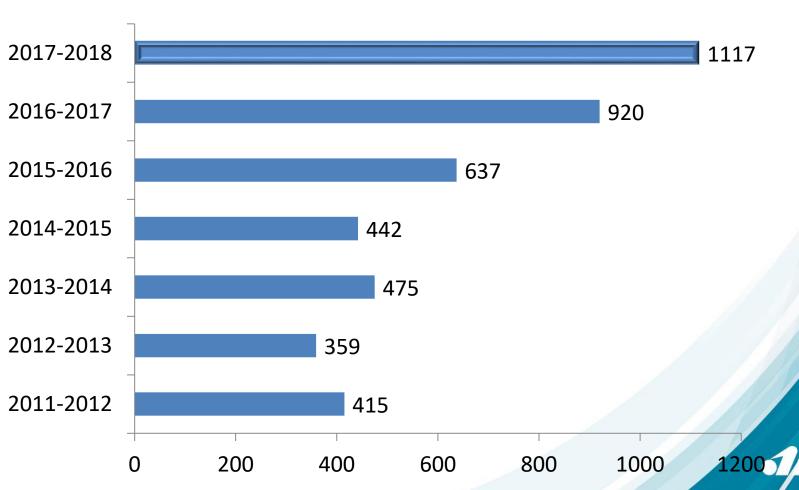
adult 3.7 - 8.4%

- Increases in crimes related to Meth
- Increase in E.R. visits related to Meth

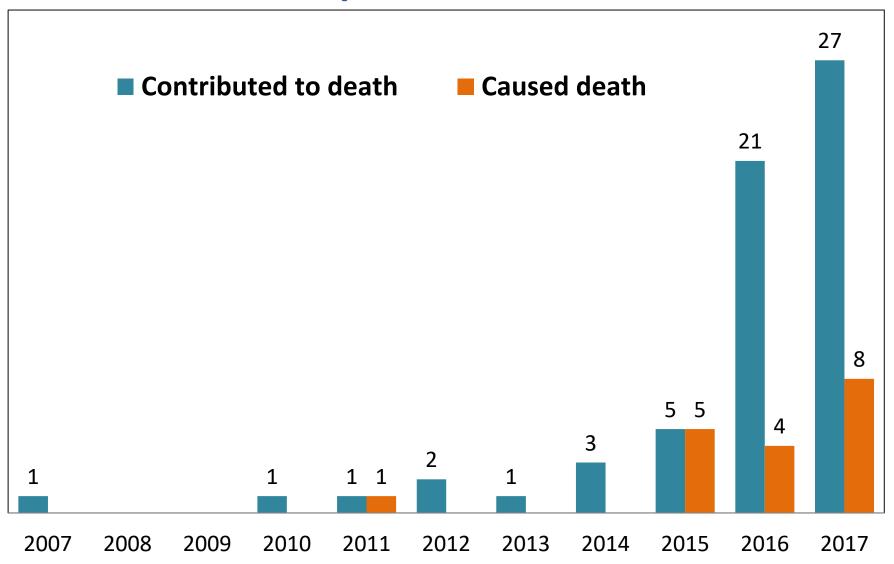


AFM statistics





Manitoba deaths related to methamphetamine overdose



Who Uses Meth?

Groups at higher risk

- Rural areas
- Students/
 Adolescents
- Low income
- Women
- White, male, bluecollar workers

- Disenfranchised
 - homeless
 - club scene
 - co-occurringdisorders
 - youth in care (CFS)

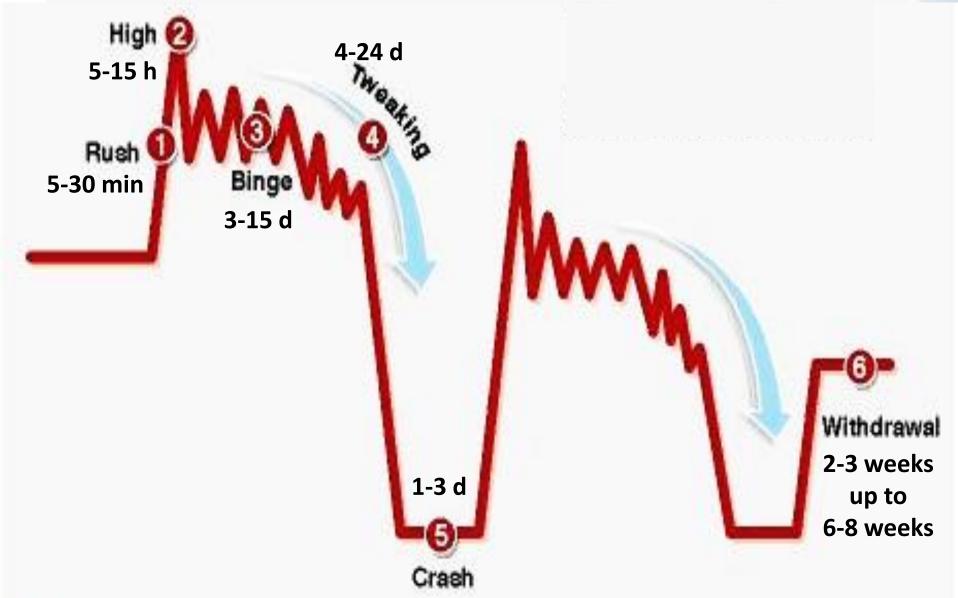


What are the patterns of meth use?

- Casual user
 - MOST common user
 - may be used to stay awake, party or control weight
- Binge user
 - "on a run"
- Chronic user
 - "speed freaks", "tweakers"



Cycles of methamphetamine use



Possible Indicators of Meth Use

- Irritability
- Anxiety & nervousness
- Lack of focus
- Fast/continuous speech
- Constant change of subject in conversation
- Incessant movement by the user
- Profuse sweating
- Aggressive/violent behaviour
- Small sores on the arms & face similar to chicken pox



Dealing with Intoxication

- Recognize the signs/symptoms
- Do not confront
- Be aware of what's going on for you
 - Control your own behavior
 - Be aware of personal space
- Reduce stimuli
- Offer water
- Encourage the person to relax
- Use person's name & repetition (broken record)
- Look for areas of agreement
- Don't be afraid to ask for help



Withdrawal and Meth

- Symptoms may last for days with occasional use and weeks/months with chronic use
- Symptoms may include:
 - Fatigue/excessive sleeping may begin with a long crash (up to 3 days)
 - Apathy
 - Depression & suicidal ideation
 - Anxiety & agitation
 - Paranoia
 - Aggression
 - Intense craving for the drug



Where can help be accessed?

- 1. AFM: 1-866-638-2562 (toll free)
- 2. Police: 911
- 3. Manitoba Health: 1-888-315-9257
- 4. Klinic Crisis Line: 1-888-322-3019
- 5. Youth Emergency Crisis Stabilization Services: 204-949-4777
- 6. Manitoba Suicide Prevention Line: 1-877-435-7170





References

Addictions Foundation of Manitoba (2013). Beyond the Basics: Methamphetamine. Retrieved from http://afm.mb.ca//wpcontent/uploads/woocommerce_uploads/2013/03/MethamphetamineBTB.pdf

Australian General Practice Network (2007). Management of patients with psychostimulant use problems – guidelines for general practitioners. Canberra: Australia. Australia Government Department of Health and Aging

CAMH (2016). Methamphetamine straight talk. Toronto, ON: Centre for Addiction and Mental Health

CAMH (2012). Methamphetamine, do you know... Toronto: ON: Centre for Addiction and Mental Health

Jenner, L. & Lee, N. (2008). Responding to challenging situations related to the use of psychostimulants: a practical guide for frontline workers. Australian Government Department of Health and Ageing, Canberra.

Jenner, L. & Lee, N. (2008). Treatment approaches for users of methamphetamine: a practical guide for frontline workers. Australian Government Department of Health and Ageing, Canberra.

Loke KS. (2014). Guidelines for the acute assessment & management of amphetamine-type stimulant intoxication & toxicity. Health Australia, St. Vincent's Hospital. Retrieved from: http://www.australiandrugsconference.org.au/wp-content/uploads/Dr-Kah-Seong-Loke-Frontline-Management-Acute-Intoxication.pdf

National Centre for Education and Training on Addiction (NCETA) (2015). *Methamphetamine: Effects and Responses*. Retrieved from http://nceta.flinders.edu.au/files/9014/3339/5938/EN597.pdf

Paulus, M. (2018). Methamphetamine use disorder: epidemiology, clinical manifestations, course, assessment, and diagnosis. In A.J. Saxon & R. Hermann (Ed.), UpToDate. Available from http://www.uptodateonline.com





Brandon Bear Clan Patrol (BBCP)

- January 19th, 2017 Brandon Friendship Centre hosted the first community meeting to bring awareness for the need to have a Bear Clan Patrol in Brandon. There had been a recent increase in attacks on women in the downtown area.
- February 6th, 2017 A Women's Council was formed and consisted of 15 community members.
- April 18, 2017 BBCP received a start up grant from Brandon Neighborhood Renewal Corporation for radios, vests, flashlights and other supplies required.
- April 23, 2017 Members of the Women's Council went to Winnipeg to patrol with Winnipeg Bear Clan to understand what they do while on patrol.
- May 18th, 2017 Second community meeting was held to seek volunteers for the Brandon Bear Clan's first patrol.
- June 2nd, 2017 Brandon Bear Clan's first patrol!



June 2, 2017 & October 5, 2018







- The Bear Clan offers help, information, supplies and respect to all community members.
- The Bear Clan is a community based solution to crime prevention, providing a sense of safety, solidarity, and belonging to both its members and to the community they serve.
- The purpose of the Bear Clan is to help people and prevent the need for police and authority interventions.
- The Bear Clan will achieve its purpose through a nonviolent, non-threatening and supportive manner primarily through relationship building and reconciliation.



- Teachings from Indigenous Knowledge Keepers inform us that like the mother bear protects her cubs, the Bear Clan is responsible for protecting their people.
- The Bear Clan Patrol brings together Indigenous and non-Indigenous community members who can effect change by recognizing the value of Indigenous practices and using them for positive collaboration.
- Respect is paramount when patrolling with BBCP. Respect other patrollers, respect community members dignity, respect confidentiality, respect laws, and respect values.



- Carried By Patrollers While On Patrol:
 - Backpacks that contain care kits, first aid kit, water, food, garbage bags, sharps containers, pliers, latex gloves, hand sanitizer, notepad, paper, rain gear, thermal blankets, socks, gloves, toques.
 - Smaller packs to carry food, water, candy.
 - Patrol vests hold latex gloves, radios /codes, flashlight, community resources cards.
- Packed in Mobile While On patrol:
 - Care kits, cooler of water, food, tea/hot chocolate, blankets, sleep mats, seasonal clothing, footwear, socks, gloves, toques, Naloxone Kits, AED, taxi chits.



Brandon Police Service Stats 2017

- Crystal Meth seized increased by 5445%
 - (44 grams 2016; 2440 grams in 2017)
- Cocaine seized increased by 147%
 - (153 grams 2016; 374.31 in 2017)
- Marijuana seized increase by 2829%
 - (72 grams 2016; 2109 in 2017)
- Break and Enter increase of 33% (cars/homes/garages)
- Fraud up 63%
- Offensive weapons charges up 92% (An increase in paranoia by meth users puts police officers and the community in danger.
- Trafficking charges are up 170% due to crystal meth use. (Meth is cheap and easy to get and the effects are long lasting.)



BPS / Brandon School Division

- More and more intoxication from meth use/other illegal drugs/ alcohol and co-occurring disorders. (Unlike Cocaine/Heroin a Meth user cannot function)
- An additional \$170,000 was added to the 2018 Brandon Police Services budget to cover the costs of a new civilian position, a police officer, and start-up costs to focus on cracking down on crystal meth distribution and associated human exploitation. (\$50,000 earmarked to convert space in the department in accordance with fentanyl protocol.)
- A recent Brandon School Division report shows a rise in drug use has seen suspensions more than double in the first semester of the school year. Between September to the end of January, there were 183 suspensions, compared to 137 within the same time frame in 2016-17 and 76 in 2015-16. (\$25,000 was included in the city's budget this year for youth addictions prevention to be offered at forums at local schools.)



BPS 2017 Report

- Total Criminal Code Violations
 - 2016=5311 2017=6022
- Total Federal Statute Offenses
 - 2016=2022017=212
- Calls for Service
 - 2016=36,748 2017=39,119
- Crimes Against Persons
 - 2016=9432017=954
- Crimes Against Property
 - 2016=2845 2017 =3074
- Other Crimes
 - 2016=1523 2017=1596
- Controlled Drug & Substance Act
 - 2016=542017=114



Brandon Bear Clan Stats

	June 2017-Dec 2017 (6 months)	Jan 2018-Sept 2018 (9 months)
Number on Patrol	741	737
Total Needles Found	31	504
Care Kits Supplied	103	483
Homeless Identified	29	50
Total Contacts Made	900	2246



BBCP & Safety

- Picking up needles; providing containers for safe disposal of needles.
- Provide supplies to the homeless (blankets, sleep pads, care kits, clothing).
- Walking vulnerable people home as a group (intoxicated, youth, concerned females).
- Have people walk with us if they need a safe place to be in the moment.
- Send people home in a cab to ensure they get home safely.
- Be present during altercations on the street.
- Teach, Mentor, and Guide with no judgement/stigma.



Needles 2018

90 pulled from a dumpster by BBCP at one time.



City of Brandon Material Recovery Facility pulled these from recycling bins. They put a plea out to the public to dispose of their needles properly





-Value Village

-Super Thrift

Sexuality Education

Resource Centre

Resources & Services

City of Brandon City of Brandon Special City of Brandon Community City of Brandon Brandon Neighborhood Renewal Poverty Committee Planning Council Mobilization Westman HUB Corporation (Homelessness) Youth Centre Safe & Warm Shelter Housing Meredith's Mary's A Way Home At Risk Youth **Brandon Ministerial** (November to March) Place Program (BSD) Association (emergency care) First House (Youth) Helping Hands Centre (M-F) Bannock In Father's Pizza & Food For Annual Christmas Christmas Cheer Hampers / (Other) Pantry Thought The Park Bible Night Dinner Addictions Brandon Friendship Salvation Army Samaritan House 7th Street Health Access Public Health - Prairie Foundation of MB Centre Mountain Health (PMH) Adult and Teen DOTC Brandon Urban Aboriginal Elspeth Reid Family Southwest MMF Mental Health Challenge Peoples' Council Resource Centre Various AA CFS Offices (7) Youth for Christ **YWCA** The Women's Resource **CMHA** Westman Immigrant Groups (10) Services Centre Nar Anon Brandon Bear Clan Patrol Westman Crisis Services United Way Police Citizens on Patrol Family Group -Brandon Daabida Bi--Dakota Ojibway Azhegiiwen Downtown Ambassador **Not Currently Available: (Needed?)** -RCMP (Keeping Program **Long Term Treatment** Coming Back) **Detox Services** Legal Manitoba Housing **Sober Housing** Westman Families Year Round Shelter / Soup Kitchen of Addicts Victim Services Safe Injection Site The Counselling Centre for Thrift stores Hope, Healing and John Howard -MCC Encouragement **Pending:** Rapid Access to Addiction Medicine Clinic Society -Nearly New

Other?

1 - 800 # Help Lines x 6



Addictions Related Services

Addiction:

Addictions Foundation of MB
Adult Teen Challenge
City of Brandon Community Mobilization Westman HUB

Harm Reduction:

7th Street Health Access Needle Exchange Program Housing First

Pending:

Rapid Access to Addiction Medicine Clinic

Not Currently Available:

Year Round Shelter / 7 day a week Soup Kitchen

Long Term Treatment (longer than 21-28 days)

Detox Services (Complete detox prior to entering treatment)

Sober Housing (Support upon exiting treatment)

Safe Injection Site (Unheard of in MB)



Gaps Remain

- All these resources and we still have:
 - No where to put people "after hours". Last October, BBCP had to make a shelter for 3 people to sleep outside after we tried for 45 minutes to find somewhere for them to sleep for the night. (Obstacles: Had to pay a fee; needed ID; had to get a hold of their worker; had to be sober.)
 - People sleeping in dumpsters...sleeping beside dumpsters using the lids as a roof.
 - People dumpster diving seeking needles to use. BBCP has witnessed this first hand.
 - Vital services closed on Statutory Holidays.
 - Too many hoops to jump through to access services.

VIRGO REPORT - 279 Pages

"Improving Access and Coordination of Mental Health and Addiction Services:

A Provincial Strategy for all

Manitobans"

https://www.gov.mb.ca/health/mha/docs/mha_strategic_plan.pdf

person- and principles Recovery-oriented family-centered Welcoming and respectful Comprehensive continuum of evidenceinformed services and support Population healthbased planning **Enabling Supports** Disparity and diversity response

Funding and accountability for quality outcomes Evidence generation / translation to policy and practice Surveillance, monitoring and performance management Community engagement and change management

Seamless delivery of integrated services across sectors, systems and the life span

> Investment in the mental wellness of children and youth

Culturally

relevant

Goals

Access Easy first contact, navigation and expanded, flexible service reach

Coordination

Delivery of more integrated, personfocused services that acknowledge people's families, communities, cultural connections and histories

Fyidenceinformed

> Investment in the mental wellness of Manitoba's Indigenous peoples

> > Healthy and competent mental health and substance use workforce

Trauma.

informed

Strategic priorities

High quality

Vision

All Manitobans enjoy the best possible mental health and well-being throughout life, and have welcoming, supportive and diverse communities in which to live, participate, recover and heal when facing mental health and substance use challenges



Virgo Report

Strategic priorities

Population healthbased planning Comprehensive continuum of evidence-informed services and support

Seamless delivery of integrated services across sectors, systems and the life span Investment in the mental wellness of children and youth Investment in the mental wellness of Manitoba's Indigenous peoples Healthy and competent mental health and substance use workforce

Enabling Supports

Disparity and diversity response Funding and accountability for quality outcomes Evidence generation / translation to policy and practice Surveillance, monitoring and performance management Community engagement and change management

Vision

All Manitobans enjoy the best possible mental health and well-being throughout life, and have welcoming, supportive and diverse communities in which to live, participate, recover and heal when facing mental health and substance use challenges

Goals

Access

Easy first contact, navigation and expanded, flexible service reach

Coordination

Delivery of more integrated, person-focused services that acknowledge people's families, communities, cultural connections and histories

Principles

Recovery-oriented

Welcoming and respectful

Person- and family-centered

Culturally relevant

Evidenceinformed

Traumainformed

High quality and innovative

Accountable



Are we there yet?

- Better defined collaborative community resources that will accommodate <u>all</u> social issues that can happen in the 24 hours of any given day.
- The process to receive help should not be cumbersome, complicated, and difficult at whatever time of day that you are seeking help.
- 24 hour, 365 day a year "One Stop Resource Centre".
- As was noted by Mark Frison, ACC President, in his column titled ""Let's Collectively Say 'No' to Crystal Meth" in the October 6th edition of the Brandon Sun it's time to stop "diagnosing" and to instead "design, prioritize and champion the solutions".



Brandon Bear Clan Patrol

Contact us:

- Facebook: Brandon Bear Clan
- Twitter: @BrandonBearClan
- Email:brandonbearclan@gmail.com