

**ANYONE.
EVERYONE.**

SOUTH DAKOTA COMMUNITY SUPPORT TOOLKIT

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AN OVERVIEW OF THE SOUTH DAKOTA METHAMPHETAMINE ISSUE

There is a meth problem in South Dakota, and we need everyone on it.

- From January to August 2019, there were 2,242 meth-related arrests in 50 counties in South Dakota. The Sioux Falls Meth Task Force made 803 of those arrests, and the Pennington County Meth Task Force made 786 of those arrests. (South Dakota HIDTA, 2019)
- In that same time frame, there were more than 57,000 grams of methamphetamine seized and three lab incidents encountered. (South Dakota HIDTA, 2019)
- In 2018, South Dakota law enforcement made 3,684 arrests for methamphetamine. These arrests resulted in more than 45,918 grams — more than 101 pounds — of meth being seized. (Statewide Drug Statistics Report, 2018)
- 83% of court admissions for controlled substances in South Dakota involved meth so far in 2019. (Corrections Secretary Mike Leidholt, summer 2019)
- Twice as many South Dakota 12-17-year-olds report using meth in the past year than the national average. (National Survey on Drug Use and Health)
- The U.S. Surgeon General's 2016 Report on Alcohol, Drugs and Health stated that evidence-based prevention strategies have returns of investment of up to \$18 for every \$1 invested in prevention (cost savings from reduced medical costs, increased productivity in work and school, reduced crime and generally better quality of life).
- From 2014 through 2018, the state saw a 200% increase in people seeking treatment with a primary diagnosis of meth addiction. (Division of Behavioral Health, State Treatment Activity Reporting System)
- Treatment success rates in South Dakota are higher than the national success rates — 72% compared to 38%. (State Fiscal Year 2019 Treatment Episode Data Set)
- Substance use disorders typically develop within three years after first use if not addressed. Effective early-intervention prevention programs demonstrate increased perception of harm and readiness to change behaviors, which reduces the likelihood of developing a substance use disorder and needing treatment.

For help with meth addiction, call 1-800-920-4343 or text "onmeth" to 898211; or visit [OnMeth.com](https://www.onmeth.com) for a list of available resources and local treatment centers.

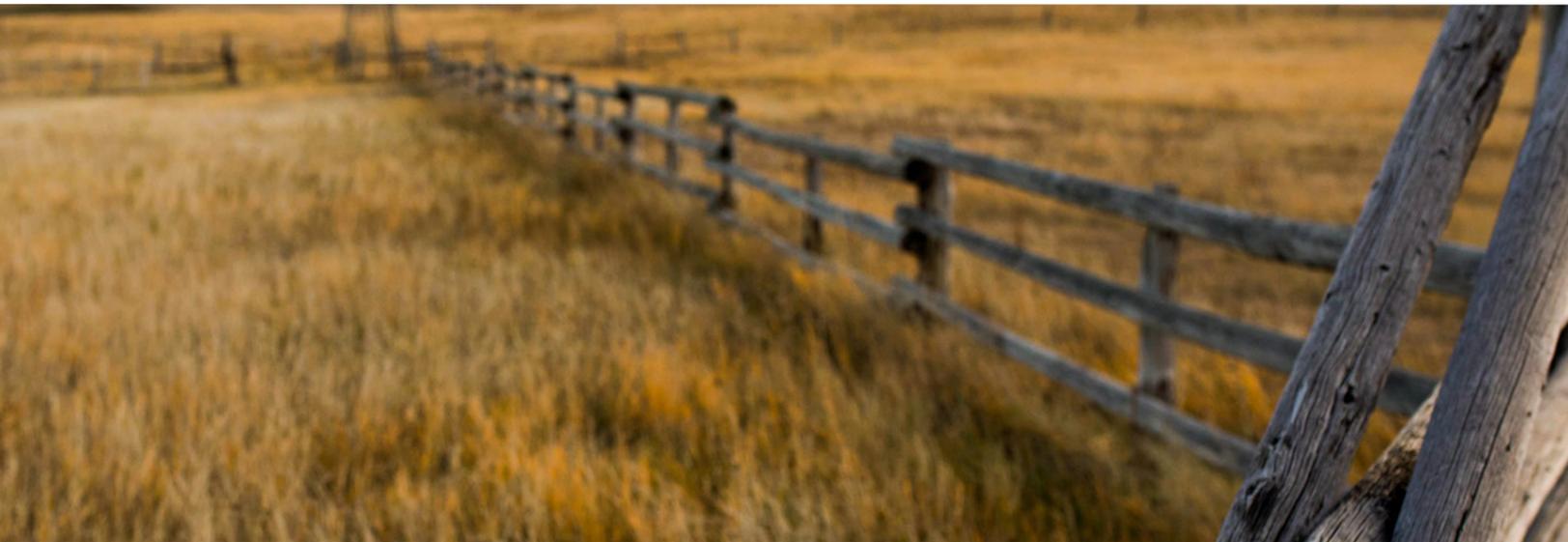
WHAT IS METHAMPHETAMINE?

Methamphetamine is a stimulant drug usually in the form of a white, bitter-tasting powder or a pill.

Methamphetamine increases the amount of the natural chemical dopamine in the brain, which stimulates feelings of euphoria and can increase wakefulness and activity, as well as rapid heartbeat, and also increases blood pressure and quickens breathing.

The long-term effects of meth use are concerning, and include extreme weight loss, severe dental problems and intense itching that leads to skin sores, anxiety, confusion, violent behavior, paranoia and hallucinations.

Individuals who become addicted to meth often feel isolated, lose friends, disconnect from family members, and are not able to hold down jobs, which can lead to financial difficulties and even homelessness.



SIGNS OF EARLY METH USE INCLUDE:

- Euphoric/"high" state (excessively happy)
- Decreased appetite
- Increased physical activity
- Anxiety, shaking hands, nervousness
- Incessant talking
- Rapid eye movement
- Increased body temperature (can rise as high as 108 degrees and cause death)
- Dilated pupils
- Sweating not related to physical activity

LONG-TERM SYMPTOMS CAN INCLUDE:

- Paranoia
- Sleeplessness and severe depression
- Nausea, vomiting, diarrhea
- Extreme irritability and anxiety
- Seizures
- Teeth grinding, bad teeth and body odor
- Skin ulceration and infections, the result of picking at the skin or imaginary bugs
- Auditory and visual hallucinations
- Violent and erratic behavior
- Nervousness
- Anhedonia (loss of pleasure)
- Dryness of mucous membranes
- Burnt or blistered lips and/or fingertips from holding hot smoking devices (aka "ice pipes")

RISK AND PROTECTIVE FACTORS

Many factors influence the likelihood that an individual will develop a substance use or related behavioral health problem. Effective prevention focuses on reducing the number of factors that put people at risk of substance abuse and strengthening those factors that protect people from the problem.

RISK FACTOR: A condition that increases the likelihood of substance abuse by individuals, groups or communities.

PROTECTIVE FACTOR: A condition that either decreases the likelihood of or would buffer the risks of substance abuse by individuals, groups or communities.



RISK AND PROTECTIVE FACTORS (CONTINUED)

The definitions below could be either considered risk or protective factors, depending on the situation and/or circumstances involved.

ACCESS/AVAILABILITY

The ease of physical access to the drug from dealers, friends, family, residence or internet.

SOCIAL/COMMUNITY NORMS

Informal expectations, standards, attitudes or values regarding the acceptability or unacceptability of certain behaviors, including substance use, associated with the perception of family, community, cultural and peer attitudes and behaviors. (e.g., family acceptance, multi-generational use and youth perceptions).

ENFORCEMENT/ADJUDICATION

Includes the enforcement of rules, laws and policies surrounding substance abuse and its consequences, as well as the public perception of such, and how likely people are to believe they will get caught and receive consequences for violations (e.g., lack of enforcement resources [shortage of officers, lack of knowledge/training], inconsistent application of laws and/or judicial practice [no prosecution by DA, low mandatory sentencing, inconsistent application of legal consequences], lack of monitoring at social events).

AGE OF FIRST USE

Early onset of alcohol/drug use predicts misuse of these substances. The earlier the onset of any substance use, the greater the involvement/frequency of use. Onset of substance use prior to the age of 15 is a consistent predictor of alcohol/drug abuse, while a later age of onset has been shown to predict lower involvement and a greater probability of discontinuation of use.

LAWS/POLICIES REGULATING SALES, USE, POSSESSION

Formal legislation, rules, policies, procedural guidelines, memorandums of understanding (MOUs) or codes of conduct that relate to any of the other variables (e.g., state and local ordinances, community policies, campus policies, school policies).

PERCEIVED RISK/HARM

Lack of knowledge of health and safety consequences. It's the perception that negative health and safety consequences are unlikely or won't happen to them (e.g., low perception of getting cited or arrested and/or they will not be punished; lack of perceived parental enforcement of consequences).

FAMILY DYNAMICS/FUNCTIONING

Children's earliest interactions occur in the family. Sometimes, family situations heighten a child's risk for later alcohol or drug use (e.g., when there is a lack of attachment and nurturing by parents or caregivers, ineffective parenting, alcohol or drug abuse by a parent/sibling, or physical/mental abuse in the home. Families can provide protection from later alcohol or drug abuse through good communication, parental management, establishing strong bonds between children and parents, parental involvement in the child's life, and establishing clear limits and consistent enforcement of discipline. By providing parents the education to influence attitudes and behaviors as well as how to set limits in age-appropriate ways, and implementing family programming, the likelihood that a young person will engage in problem behaviors can be dramatically decreased.

MENTAL HEALTH

Some mental health disorders are associated with an increased risk of substance use in youth and young adults. Anxiety, poor impulse control, depression as well as other issues are factors that are present when a teen first starts using substances. By implementing mental health promotion and prevention strategies, these mental health and secondary substance use disorders may be reduced substantially.

RISK AND PROTECTIVE FACTORS (CONTINUED)

SCHOOL CONNECTEDNESS

Students who lack a sense of belonging or attachment in school have a higher risk of becoming involved with alcohol or drug use and delinquency. Individuals who have a low degree of commitment to their school often exhibit problematic classroom behavior or poor social skills, academic failure, insufficient school achievement and peer rejection. By enhancing peer relationships and self-control; reinforcing life skills; and alcohol/drug refusal skills and addressing aggressive behaviors, poor concentration, and negative, disorderly or unsafe school climates, alcohol or drug use involvement can be lowered and the probability of discontinuation of use can be increased. In addition, by strengthening students' bonding to school, the likelihood of students dropping out of school can be reduced.



COMMUNITY CONNECTEDNESS

When community members lack a sense of belonging or attachment to their community, they have a higher risk of becoming involved with alcohol or drug use and delinquency. This could include living under extreme economic deprivation, inadequate youth services, lack of opportunities and rewards for pro-social involvement, discriminatory surroundings, community disorganization (low neighborhood attachment, lack of strong social institutions) and lack of community bonding or cohesion. By mobilizing communities to develop neighborhoods where atmosphere, appearance and safety are important, increasing supervision of young people, and providing opportunities for youth to contribute to the community, greater social connectedness and a stronger attachment to the community can be built.



CHILDREN AT RISK

RISKS TO CHILDREN INCLUDE:

- Access to methamphetamine and paraphernalia
- Presence of loaded weapons in the home
- Physical and sexual abuse
- Exposure to high-risk populations (sexual abusers, violent drug users)
- Neglect including poor nutrition, poor living conditions
- Presence of pornography

CHILDREN WHOSE PARENTS USE METH MAY EXPERIENCE:

- Respiratory problems
- Delayed speech and language skills
- Higher risk for kidney problems and leukemia
- Malnourishment
- Poor school performance/attendance problems
- Isolation
- Physical, sexual and emotional abuse
- Poor dental health
- Hyperactivity and attention disorders
- Lice
- Obesity
- Other developmental problems
- Violent behavior
- Drug usage
- Lack of boundaries/easy attachment to strangers

IF A PREGNANT WOMAN USES METH, THE BABY MAY EXPERIENCE:

- Premature birth
- Growth retardation
- Withdrawal symptoms including abnormal sleep patterns, high-pitched cry, poor feeding
- Cerebral injuries
- Limpness
- Apparent depression
- Shaking and tremors
- Irritability
- Fits of rage
- Sensitivity to stimuli including human touch and regular light
- Coordination problems
- Birth defects (six times more likely) including effects on the central nervous system, heart and kidneys
- Cerebral palsy and paralysis are common

PARENTS WHO USE METH OFTEN EXHIBIT:

- Extreme mood fluctuations
- Violent behavior
- Depression
- Poor impulse control
- Bizarre behaviors
- Lack of attention to hygiene
- Acute psychotic episodes
- Poly-drug use

As meth use continues, the parent is unable to provide basic needs to the child. Due to changes in brain chemistry, the parent loses the capacity to care about anything but meth.



WAYS TO GET INVOLVED

Stand up against meth in your community by putting some of these suggested actions into practice. Consider how you can offer support to those most impacted by the issue, even if you don't know someone who is directly impacted.

IN YOUR COMMUNITY

- Form or join a local coalition to combat substance use and provide education in your community.
- Familiarize yourself with the warning signs of meth use.
- If you suspect someone is using meth or you see meth related activity, report it to your local law enforcement or report anonymously to Project StandUp by calling 605-394-1884 or texting "DRUGS" to 82257.
- If you suspect someone you know is using meth, depending on your relationship with the individual and your comfort level, you may want to approach them about their substance use. For more information on how to approach someone about their substance abuse, visit www.onmeth.com.
- Start a fundraiser and donate proceeds to a treatment, recovery or support organization near you.
- Volunteer with an organization that supports those impacted by meth, such as a homeless shelter or food bank. To find a list of organizations, visit www.onmeth.com.
- Work with law enforcement to set up watch programs in your neighborhood.
- Ask local law enforcement to speak at a neighborhood gathering.

IN YOUR SCHOOL

- Organize a discussion or education session.
- Start a peer leader organization to educate youth on substance use and provide support for those who may need help.
- Create a pledge for classmates to sign to show their commitment to not using substances.
- Implement a school-based prevention program in your school. To learn more or to check-out a program, contact your regional [Prevention Resource Center](#).
- Provide youth with alternative activities to keep them engaged in a substance-free life.

IN YOUR HOME

- Build communication channels with your children by listening and speak about the consequences of using meth, even once.
- Employ strategies to reduce your child's risk for substance use:
 - Have ongoing conversations with your child about the dangers of substance use.
 - Role model healthy behaviors and attitudes.
 - Regularly discuss your child's interests and take time to learn about him/her.
 - Get to know your child's friends and their parents.
 - Spend time together, be fully engaged and responsible to your child.
 - Know where your child is and what they are doing.
 - Set clear rules and enforce them fairly.
 - Practice refusal skills with your children, such as direct refusal, exiting the situation or calling/texting you to get out of a pressure situation.
 - Provide alternative activities to keep them engaged in a drug-free life.
- Teach your children coping strategies to manage anger and stress:
 - Physical activity
 - Listening to music
 - Breathing exercises
 - Meditation
 - Journaling
- Encourage opportunities for connection and engagement with their school and community:
 - Extracurricular activities
 - Community club sports
 - School clubs
 - Community-service clubs
 - Mentorship programs
 - Job training programs

PREVENTION STRATEGIES

PREVENTION STRATEGIES FOR PARENTS

1. Practice refusal skills with your children, such as direct refusal, exiting the situation or calling/texting you to get out of a pressure situation.
2. Teach your children different coping strategies to manage anger and stress, such as physical activity, listening to relaxing music, breathing exercises, meditation and journaling.
3. Encourage opportunities for connection and involvement through school or extracurricular activities.
4. Encourage your children to examine their friendships to identify those with similar values and interests.
5. Build communication channels with your children by listening, asking questions and showing an interest in their lives, while being understanding and showing empathy.
6. Encourage and support your children with positive reinforcement by reminding them of their strengths, asking for their input, attending their events, displaying their work and accomplishments, making time for them each day, and offering praise.
7. Set limits with your teenagers, and ensure they have adequate parental supervision.

Source: [DrugFree.org: Parent Toolkit](https://www.drugfree.org/parent-toolkit)



PREVENTION STRATEGIES (CONTINUED)

PREVENTION STRATEGIES FOR COMMUNITY MEMBERS

When community members lack a sense of belonging or attachment to their community, they have a higher risk of becoming involved with alcohol or drug use and delinquency. This could include living under extreme economic deprivation, inadequate youth services, lack of opportunities and rewards for pro-social involvement, discriminatory surroundings, community disorganization (low neighborhood attachment, lack of strong social institutions) and lack of community bonding or cohesion.

Mobilize your community to create neighborhoods where atmosphere, appearance and safety are important. Increase supervision of young people, and provide opportunities for youth to contribute to the community to help build greater social connectedness and a stronger attachment.

BUILDING A COALITION TO COMBAT METH USE

COALITION: Groups of diverse individuals or organizations of individuals who work together to reach a common goal. It is an organization of organizations. By definition, in a coalition, not everyone agrees or has exactly the same interests.

ISSUE: A specific solution to a problem

Questions to ask when you are thinking about building a coalition with another organization:

- What would the unifying issue(s) be?
- What resources could come from this organization?
- What obstacles might be encountered?

HOW TO FORM A COALITION:

1. Develop an initial description of a possible coalition that makes sense.
2. Make a list of all the groups that might be part of the coalition.
3. Talk in person to representatives of each group. See what they think of the basic idea of the coalition. Revise the basic description so it takes other groups' concerns into account.
4. If members of the group have been attending and supporting the events of other groups in the potential coalition, it will help with recruiting.
5. Call an initial meeting and invite representatives of groups to attend. It will help to have leaders of the key groups sign the invitation letter. Consider the racial diversity of those signing the letter. Some groups have different political perspectives, and getting them represented by those doing the inviting would be important.
6. At the first meeting, it's good to have several facilitators (representing the diversity of your coalition). Make sure everyone has a chance to express his or her ideas. Work to settle on a goal(s) for the coalition that everyone supports and can be accomplished.
7. Try to get groups to send the same representatives to future meetings for consistency.
8. As work proceeds, divide up tasks. Take advantage of the strengths of different member organizations. Ask every member organization to do something to help the effort. It is important to have them as active members, not just names on a list.

STRATEGIC PREVENTION FRAMEWORK

Prevention addresses all levels of influence: individual, relationship, community and societal. Communities can play a critical role in meth prevention. The Strategic Prevention Framework (SPF) is a comprehensive approach to understanding and addressing the substance misuse and related behavioral health problems facing states and communities. The SPF includes five steps and two guiding principles:

STEP 1: ASSESSMENT

Identify local prevention needs, based on data:

- What is the greatest substance abuse problem, and what do you know about why it is happening?
- Where is the problem taking place?
- What group of people is the problem affecting the most?
- How can we deal with the problem and bring about a change?
- Is our community ready to do something about it?

STEP 3: PLANNING

Find out what works to address prevention needs and how to do it well:

- The best way(s) to tackle the problem that was discovered in Step 1, by working on a piece of the problem that you can change.
- The purpose of this project, and what you want the result to be.
- How the community will be changed by this project.

STEP 5: EVALUATION

Examine the process and outcomes of programs and practices:

- What has this plan shown us? What else do we need to know?
- Keep doing the activities that worked.
- Change or replace the activities that did not work.

STEP 2: CAPACITY BUILDING

Build local resources and readiness to address prevention needs:

- Who are the people in your community whose help you need? Are they willing and able to lead and carry out the plan?
- Get everyone “on the same page” about why the problem needs attention and what to do about it.
- How much money is needed to carry out the plan, and where do we get the funds?
- What other resources will be needed, and how do we get them?

STEP 4: IMPLEMENTATION

Deliver evidence-based programs and practices as intended:

- Do it.
- Track it.
- Record it.

ADDITIONAL INFORMATION

The SPF is also guided by two cross-cutting principles that should be integrated into each of the steps that comprise it:

- **Cultural competence:** The ability of an individual or organization to understand and interact effectively with people who have different values, lifestyles and traditions, based on their distinctive heritage and social relationships.
- **Sustainability:** The process of building an adaptive and effective system that achieves and maintains desired long-term results.

Source: [SAMHSA Prevention Framework Guide](#)



AVAILABLE RESOURCES

PHONE NUMBERS

24/7 Help Line

If you see something happening or know of someone who needs immediate help, call 1-800-920-4343, text "onmeth" to 898211, or go to [OnMeth.com](https://www.onmeth.com).

Project Stand Up Drug Tip Line

Tip line for citizens to call to report suspected illegal drug activity. Call 605-394-1884 or text "DRUGS" to 82257.

TREATMENT CENTERS

[South Dakota Intensive Methamphetamine Treatment Services](#)
(PDF brochure)

[Substance Use Disorder Treatment Agencies and Services](#) (PDF list)

[Substance Abuse and Mental Health Services Administration Treatment Finder](#)

RECOVERY GROUPS

[Face It TOGETHER](#)

[Smart Recovery](#)

[Narcotics Anonymous - South Dakota Region](#)

[Al-Anon Family Groups](#)

[Alcoholics Anonymous - South Dakota Meetings](#)

PREVENTION

[Substance Use Prevention Providers](#)