TEACHER’S GUIDE TO
METHAMPHETAMINE: MYTHS vs. REALITIES
ACTIVITY*

*A separate document, “Meth Myths vs. Realities Activity Cards,” also is needed for this activity.

This “Methamphetamine: Myths vs. Realities” activity was originally designed to be used in a one-session add-on component for Life Skills Training and Strengthening Families Programs. Lesson plans also have been developed for use with those programs.

Developed by:
Kristin White, MA
Iowa Consortium for Substance Abuse Research and Evaluation
Marilyn Alger, MA
Iowa Department of Public Health
Activity cards designed by:
Ericka Burns, BA

Developed for:
Iowa Prevention of Methamphetamine Abuse Project
Iowa Department of Public Health

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Disclaimer:
This meth prevention curriculum was developed primarily for use with upper middle school age youth. Some initial consultation occurred with curriculum specialists and the developers of the two model programs, however, this curriculum was not developed or endorsed by those prevention curriculum experts.

At the time of publication, this curriculum had not been evaluated for effectiveness in the classroom. We make no claims regarding its effectiveness with the programs for which it was intended, or with other programs.

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CONTENT AND SET-UP OF METH COMPONENT ACTIVITY:

Materials:

The activity materials consist of:
  o 4 myth and 4 reality statement cards
  o 8 corresponding response/fact cards
  o 1 “Myth” category card
  o 1 “Reality” category card
  o 1 optional card with slang terms for methamphetamine (for use at the teacher’s discretion).

The activity cards are found in a separate document entitled, “Meth Myths vs. Realities Activity Cards” and are ready to print. In that document, the cards are ordered so that each myth or reality statement card is immediately followed by its corresponding fact card. The activity card pages ideally should be printed on sturdy paper or laminate using a color printer.

A teacher’s reference section begins on page 3 and contains the myth and reality statements and corresponding fact statements in the order they should be presented. Additional information is provided to share with the class during the activity, and background knowledge information is provided for the teacher. Source references follow that section.

Set-up (prior to start of class):

The teacher retains the myth and reality statement cards to present to the class. Place the response/fact cards somewhere in the room out of view of the students. Sort the fact cards according to myth or reality (this information can be found in the teacher’s reference section). Arrange the myth responses separate from fact responses. Place the “Myth” and “Reality” category cards adjacent to the appropriate group of response/fact cards. It may look something like this:

![Diagram of Myth and Reality Set-up]

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CONDUCTING THE MYTHS VS. REALITIES ACTIVITY:

Object of the Activity:
The teacher introduces the activity by explaining that statements about the drug methamphetamine will be presented, and that the students are to decide whether each statement is a myth (not true) about meth, or a reality (true) about meth. Students then must identify the corresponding fact card that either debunks the myth statement or provides support for the reality statement.

Activity Steps:
1. The teacher posts on the wall or holds up the first myth or reality statement.
2. The teacher reads the statement to the class and asks the class to decide whether it is a myth or a reality. This can be done in a structured manner such as voting by holding up hands, or in a less structured manner such as having students randomly call out which they think it is, and determine if a majority can reach agreement. Do not correct them at this point if they incorrectly choose ‘myth’ when it is actually a ‘reality,’ or vice versa.
3. The teacher asks one or two students or the entire class (if small) to find the fact statement that goes with the myth/reality statement just presented. Students look in the “Myth” or “Reality” fact statement section (whichever they think the statement is) and select the card they believe fits the myth/reality statement.
4. The teacher informs the student(s) whether the selection is correct or incorrect. Allow group process to occur if an incorrect fact card is selected and encourage class input to assist the student(s) in selecting the correct fact.
5. When the correct fact card is selected, the teacher asks a student to read it to the class.
6. The teacher shares the “Additional Information to Share with the Class,” provided in the teacher’s reference section, for that statement.
7. Display the myth/reality statement and corresponding fact card together so they are in the view of the students (e.g., tape them to the wall).
8. Continue this process for the remaining 7 myth/reality statements. To conclude, have the students summarize what they learned. Emphasize that no one knows how much or how little he/she can use before it starts to cause problems, and that the line is different for each individual. The only sure way to avoid any of the potential problems meth causes is to not use it at all.
TEACHER’S REFERENCE SECTION

METHAMPHETAMINE: MYTHS VS. REALITIES
STATEMENTS

This reference section is provided for the teacher’s use during the Myths vs. Realities activity. Following each myth/reality and response statement, the “additional information” section should be read to the class. Some statements have background information provided for the teacher. This background information is not to be shared with the students without due discretion (unless specified otherwise).

MYTH VS. REALITY STATEMENT #1:
Methamphetamine increases a person’s strength and endurance. (This is a MYTH)

RESPONSE STATEMENT:
While meth gives the user a sense or feeling of energy, it does not increase physical strength or endurance. The feeling of energy from meth is usually followed by a ‘crash’ where the user feels tired, sluggish, and may sleep for extended periods of time.

ADDITIONAL INFORMATION TO SHARE WITH THE CLASS:
The crash that comes after using meth shows that the body was actually drained of energy. Food is the only real source of energy for the body. Proper nutrition, rest, and exercise are necessary to truly have more energy, strength, and endurance. People using meth often don’t eat, which not only decreases their energy level and strength, but makes them more susceptible to illness and harms the body’s ability to heal. There is also some evidence that meth use directly harms the immune system.

MYTH VS. REALITY STATEMENT #2:
Meth is safer and less addictive than ‘hard’ drugs like crack cocaine. (This is a MYTH)

RESPONSE STATEMENT:
Partly due to how long meth lasts in the body and the poisonous chemicals used in making it, meth is more harmful in some ways than crack cocaine, and users may get addicted more quickly.

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ADDITIONAL INFORMATION TO SHARE WITH THE CLASS:
A very important thing to know about meth is that no one knows how much or how little he/she can use before it starts to do damage.

It is possible for life-threatening reactions to occur even the first time someone uses meth. And, this is even more true when meth is used with alcohol or other drugs, which is a common thing users do.

Background Information for Teachers:
- Cocaine users generally binge, then have a recovery period of non-use. Meth users are more likely to keep using to maintain enough drug in the body to prevent the prolonged ‘crash’ phase, thus increasing the chance of addiction.\textsuperscript{10,35,52}
- According to Dr. Richard Rawson, Associate Director of UCLA Integrated Substance Abuse Programs, it is almost inevitable for most casual users (using more than a few times) to slip over the line to dependence, and the user can’t tell where the line is or when he/she has crossed it.\textsuperscript{41}

MYTH VS. REALITY STATEMENT #3:
\textbf{METHAMPHETAMINE MAKES PEOPLE DEPRESSED, NERVOUS AND PARANOID.}
(This is a REALITY)

RESPONSE STATEMENT:
\textbf{METH USERS OFTEN FEEL DEPRESSED AND IRRITABLE AS THE DRUG WEARS OFF.}\textsuperscript{26,27,32} \textbf{IT IS COMMON FOR REGULAR METH USERS TO FEEL ANXIOUS AND PARANOID AT THIS STAGE. HEAVY USERS CAN EASILY BECOME VIOLENT FOR NO REAL REASON.}\textsuperscript{1,2,20,22,25,28}

ADDITIONAL INFORMATION TO SHARE WITH THE CLASS:
(If the student’s aren’t familiar with the term “paranoid,” explain that it means thinking people are out to get you/harm you when they really aren’t.)

The depression and irritability when coming down from meth happen because meth depletes the brain of its natural chemicals that make you feel good.

Background Information for Teachers:
- Incidents have been reported where meth users have seriously hurt and even killed others\textsuperscript{1,22} while paranoid.
MYTH VS. REALITY STATEMENT #4:

**METHAMPHETAMINE IS ILLEGAL IN ALL STATES EXCEPT CALIFORNIA AND NEW YORK.** (This is a MYTH)

**RESPONSE STATEMENT:**
POSSESSION, USE, MANUFACTURE, AND DISTRIBUTION OF METH ARE ILLEGAL IN ALL 50 STATES. (THIS MEANS THAT NOT ONLY MAKING IT OR SELLING IT, BUT JUST USING IT, HAVING IT ON YOU, OR EVEN GIVING IT TO YOUR FRIENDS IS ILLEGAL.) EVEN POSSESSION OF A SMALL AMOUNT IS A FELONY.

**ADDITIONAL INFORMATION TO SHARE WITH THE CLASS:**
The penalty for a first offense is 5 years in prison; for second offense: 10 or more years.

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MYTH VS. REALITY STATEMENT #5:

**COOKING METH HARMS THE ENVIRONMENT -- AIR, WATER, TREES, ANIMALS.** (This is a REALITY)

**RESPONSE STATEMENT:**
MANY CHEMICALS USED IN MAKING METH ARE TOXIC AND DANGEROUS. ‘COOKING’ METH CAN NOT ONLY CAUSE FIRES & EXPLOSIONS, IT PRODUCES GASSES AND LIQUIDS THAT POISON THE AIR, SOIL AND GROUNDWATER AND EVEN KILL BIG TREES.

**ADDITIONAL INFORMATION TO SHARE WITH THE CLASS:**
Definitions: “Cooking” is a term used for making methamphetamine. A “lab” is the place where the meth was made, which can be almost anywhere: in a farm field, an abandoned building, someone’s house or the trunk of his/her car.

Some of the poisonous chemicals include kerosene, lye, paint thinner, drain cleaner, red phosphorous, and various types of acids.

For every pound of meth made, 5-6 pounds of toxic waste are produced. Hunters, hikers, and others can be harmed by coming across an abandoned meth lab accidentally. The people who clean up meth labs must wear protective suits, goggles, and gas masks.

Teachers: Tell students that if they come across combinations of items like coolers, plastic jugs and/or tubes, gas cans, empty containers for things like paint thinner or cans of lighter fluid where they shouldn’t be - such as in a park, field, or ditch - to stay away from them and not touch them.
MYTH VS. REALITY STATEMENT #6:

METHAMPHETAMINE CAN DAMAGE YOUR HEART AND KIDNEYS, AND CAN CAUSE STROKE OR DEATH.
(This is a REALITY)

RESPONSE STATEMENT:
METH CAN DRAMATICALLY INCREASE YOUR HEART RATE, BLOOD PRESSURE, AND BODY TEMPERATURE.³ LARGE DOSES CAN LEAD TO OVERHEATING, CONVULSIONS, STROKE ³⁵, AND HEART ATTACK, WHICH CAN CAUSE DEATH.¹⁴,²⁴,²⁵,²⁸,³⁵ LONG-TERM USE LEADS TO KIDNEY AND HEART DAMAGE.¹⁷,⁵¹

ADDITIONAL INFORMATION TO SHARE WITH THE CLASS:
Over-“amping” on meth (using heavy or repeated doses to get a bigger high or rush) pushes the body faster & further than it was intended to go: 60 beats/minute is a normal heart rate…meth can increase your heart rate to dangerous levels -- 210-220 bpm.³

In a study of meth-related deaths in San Francisco, 65% of the deaths were due to accidental methamphetamine toxicity.¹⁹ Again, no one knows how little or how much it will take to cause damage to your body.

MYTH VS. REALITY STATEMENT #7:

METH ONLY AFFECTS YOUR MIND AND YOUR BRAIN WHILE YOU ARE ON IT.
(This is a MYTH)

RESPONSE STATEMENT:
METH AFFECTS THE BRAIN CELLS AND CHEMISTRY²⁵,²⁸,⁴⁵ IN A WAY THAT CAN MAKE ONE IRRITABLE²⁶ AND REDUCE THE ABILITY TO FEEL PLEASURE³³,³⁷ FOR A PERIOD OF TIME AFTER STOPPING METH.¹⁷,²⁶ STUDIES SHOW CHANGES IN BRAIN CHEMISTRY SEVERAL MONTHS AFTER METH USE IS STOPPED.⁸,⁴⁷,⁴⁹
ADDITIONAL INFORMATION TO SHARE WITH THE CLASS:
This is NOT the effect meth users are looking for!
Teachers: ask students what their favorite thing to do in life is, or something they think is REALLY fun. Ask them to imagine how it feels when they do that. Then ask them to imagine doing that thing -- hearing their favorite song, doing their most favorite thing in the world, spending time with their favorite person -- and feeling nothing while they’re doing it. They’d feel about as excited as they do when they look at a blank wall (point to an empty wall, the ceiling or the floor -- which ever is least stimulating). Then ask them: Does that sound like something you’d WANT to have happen?

Human research on long-term effects of meth is still in the early stages. But one human study found that regular meth users had some concentration, memory, and movement problems that did not significantly improve 9 months after stopping meth.47,49

Background Information for Teachers (may be shared with students):
- Human studies now show that regular or heavy meth use damages the dopamine system in the brain, and that several regions of the brain are effected.8,47,49
- It is not yet known if any of the damage is permanent, but in one study, meth-induced brain changes were documented after 21 months of abstinence.8
- Fortunately, the parts of the brain responsible for mood show recovery over time in most subjects studied to-date.8,27,47,49
- And, meth abusers do show an ability to remain abstinent after treatment.11,18

MYTH VS. REALITY STATEMENT #8:

AS LONG AS A REGULAR METH USER SHOWERS AND BRUSHES HIS/HER TEETH, HE/SHE WON’T SMELL BAD OR LOOK BAD FROM USING METH.
(This is a MYTH)

RESPONSE STATEMENT:
CHRONIC METH USERS CAN DEVELOP SORES ON THE FACE AND BODY, AND THEIR TEETH BECOME BROKEN, DECAYED, AND WORN DOWN FROM GRINDING.21,34,36 REPORTS FROM PEOPLE CLOSE TO METH ABUSERS INDICATE THEY CAN DEVELOP AN UNPLEASANT BODY ODOR.

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ADDITIONAL INFORMATION TO SHARE WITH THE CLASS:
Reports from people who know and work with meth abusers say they often have a body odor similar to cat urine.\textsuperscript{13,44} Stories from users themselves indicate they develop skin sores and acne.\textsuperscript{44,50} (\textsuperscript{44}See experience ID #’s 37170 and 9617.)

What’s worse, chronic meth users often feel they have bugs crawling under their skin,\textsuperscript{20,25,28,42,44} and will scratch and pick at their arms and face,\textsuperscript{27} even past the point where they are bleeding, to get rid of them.\textsuperscript{25,28}

And, think back to the first statement when we talked about the lack of good nutrition and rest harming the body’s ability to heal…their sores usually don’t heal up or go away, or they develop permanent scars.

It’s also important to know that when someone has used meth for a while, he/she stops caring about personal hygiene. So… even if looking and smelling good is very important to you now, using meth can change that.
REFERENCES


13 Hazelden. (1999). Walking on Thin Ice [Videotape].


15 Iowa Health System. (n.d.) What Parents Need to Know About Meth [Brochure]. Des Moines, IA.


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The Vaults of Erowid. 2004. Erowid Experience Vaults: Methamphetamine. Retrieved March 21, 2005 from www.erowid.org/experiences/subs/exp_Methamphetamine.shtml *Be aware: this site may seem pro-drug, but it is included here because it does contain many stories of people’s ‘bad trips’ and other serious negative consequences associated with meth and other drug use. To read more about the purpose/intent of the website, read the “about” page at: http://www.erowid.org/general/about/about.shtml. Also see the “about” page pertaining to the experience vaults at: http://www.erowid.org/experiences/exp_about.cgi


Zickler, P. (2001). Methamphetamine, cocaine abusers have different patterns of drug use, suffer different cognitive impairments [Electronic version]. NIDA Notes, 16(2).


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