

Methamphetamine Use & Trauma Informed Approaches



A conversation starter for substance use service providers

KEY PRINCIPLES OF TIP

Trauma informed practice takes into account the common experience and enduring effects of trauma, and focuses on relational approaches. TIP is not an individual counselling technique, but rather a paradigm for providing support, structuring learning environments, and creating organizational culture change. TIP is not based on disclosing trauma. Instead, it can be seen as a “universal precaution” offered when working in substance use services that protects everyone. TIP is based on principles that include creating safety, promoting choice and building skills in a collaborative manner. A number of trauma informed practice guides have been created in Canada on trauma informed approaches in substance use and related fields (see [Trauma Informed Practice Guides](#)).




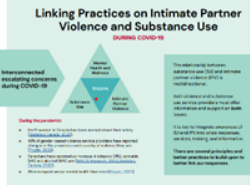
In addition there are info sheets about trauma informed approaches in the [aftercare](#) context and in [primary care](#) with a view to enacting the principles at the organizational as well as the service user level.


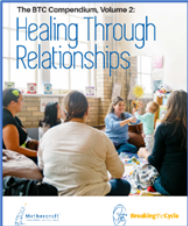
This guidance recommends using a principle-based approach to enacting trauma informed approaches, including:

Principle	Description	Applying TIP principles in work with people who use methamphetamine
Awareness	Understanding trauma and its impacts on the lives and behaviours of service users	This means learning about trauma, trauma informed approaches and the effects and issues facing methamphetamine users, for example from TIP 33 .
Safety and trustworthiness	Creating safe and trustworthy environments for service delivery	This means considering how methamphetamine use, associated cravings and withdrawal symptoms affect how people engage with services, and the importance of being calm, respectful and empathic.
Choice, collaboration, connection	Creating service environments that provide opportunities for choice, collaboration and connection	This means creating positive environments with structure and support for change in methamphetamine use, anxiety, sexual health, etc.
Strengths and skills enhancement	Creating service environments that use strengths based approaches and supports a culture of learning	This means educating about and practicing management of withdrawal symptoms, identifying cues and triggers, skills for self-regulation, stress management skills, refusal skills, finding new social connections, etc.

TRAUMA INFORMED STRATEGIES WITH SERVICE USERS WHO USE METHAMPHETAMINE

It is vital to offer trauma informed and recovery-oriented approaches. Here are some specific trauma informed strategies and approaches that have been used with methamphetamine users. This chart can be used to start discussion on what you are already doing, and what you might do, to enhance your trauma informed practices.

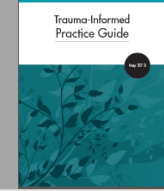
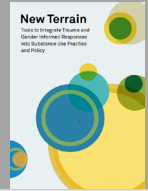
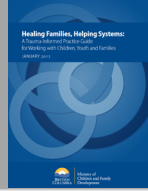
Strategy	How it may be addressed
<p>Responding to ‘in the moment’ trauma responses</p>	<p>Notice when service users are overwhelmed and experiencing fight, flight or freeze responses. Stop to offer a drink of water, co-practice box breathing, or mental, physical or self-soothing and grounding. Ask service users about what self-regulation skills work best for them ahead of time, or offer to teach in the moment.</p>
<p>Enhancing coping skills</p> 	<p>Positive affect interventions can assist service users in coping with stimulant withdrawal and sensitize them to natural rewards and positive re-appraisal coping [1, 2]. The <i>Seeking Safety</i> manual offers session outlines for single or group interventions for people with PTSD and addiction concerns. Info sheets and posters of ideas for coping skills are also available from Seeking Safety.</p>
<p>Doing trauma informed urine drug screening</p> 	<p>This info sheet can be used to inform the UDS procedure, with the goal of resisting re-traumatization and facilitating participants safety. Included in this tip sheet are guiding considerations, and examples offered by service users and experts in the field of substance use treatment. Trauma Informed Urine Drug Screenings.</p>
<p>Supporting health, self-regulation and self-care</p>	<p>Research shows that mindfulness practice, yoga, walking exercise and other activities that support breathing, regulation of emotions, coping reappraisal and self-compassion are helpful in lowering methamphetamine craving and support greater self-efficacy for managing triggers [2].</p>
<p>Addressing sexual health issues with men in a trauma-informed way</p> 	<p>The ReWired program is an example of skills and awareness-based programming aimed at helping men with strategies to change methamphetamine use and better manage their mental health. It focuses on topics such as relapse prevention, methamphetamine and the brain, sleep and nutrition, HIV and sex, mental health and mindfulness [3].</p>
<p>Working with methamphetamine users who have experienced sexual assault and IPV</p> 	<p>High risk sexual behaviours are common among methamphetamine users of all genders, increasing vulnerability to sexual assault. Addiction to methamphetamine also creates heightened risks of IPV, especially among those with previous traumas [4]. Connecting to methamphetamine users via sexual health programming and safety planning, can be an important engagement approach. Linking Practices on Intimate Partner Violence and Substance Use.</p>

Strategy	How it may be addressed
<p>Addressing methamphetamine use with Indigenous people in a trauma informed and culturally safe way</p> 	<p>Connection to culture is key to recovery for Indigenous people and enhancing the mental, physical, emotional and spiritual balance of Indigenous wellness. Traditional healers need to be involved in a community of care that values and integrates trauma and culturally informed practices. The Saskatoon Crystal Meth Working group recognizes the importance of cultural interventions and a collective approach to creating safer and healthier communities. A Community Response to Crystal Meth in Saskatoon.</p>
<p>Working with parents who are methamphetamine users in a trauma informed way</p> 	<p>Trauma and violence informed approaches have been foundational to programming that reaches and engages pregnant women and new mothers with substance use problems and their support networks. Community based outreach and drop-in programs working with women with complex needs have been highly successful at integrating trauma informed principles and practices. Healing Through Relationships.</p>
<p>Working with adolescent methamphetamine users in a trauma informed way</p>	<p>Many adolescents who have drug use problems also have a history of physical, emotional, and/or sexual abuse or other trauma. The US based National Institute of Drug Abuse (NIDA) has described the important of addressing these issues and “building skills to resist and refuse substances and deal with triggers or craving, replacing drug use with constructive and rewarding activities, improving problem-solving skills, and facilitating better interpersonal relationships” NIDA 2014 Principles of Adolescent SUD Treatment: A research based guide.</p>

Reflection questions:

- » What are we already doing to bring trauma informed practice approaches into our service delivery with methamphetamine (and other) substance users?
- » Which of these strategies might we bring into our practice?
- » How might we integrate these strategies into programming?
- » How might we monitor the impact for and with clients who use methamphetamine?

Trauma Informed Practice Guides:

						
Trauma informed practice for the substance use field overall	Trauma informed approaches in the context of the opioid crisis	Integrating trauma- & gender-informed approaches	Trauma informed practices in women's treatment	Trauma informed practice in child welfare systems	In service organizations overall	With people with sexually transmitted and blood-borne infections

References:

1. Carrico, A.W. et al., *Randomized controlled trial of a positive affect intervention for methamphetamine users*. Drug and Alcohol Dependence, 2018. **192**: p. 8-15.
2. Mutumba, M. et al., *A mindfulness-based, stress and coping model of craving in methamphetamine users*. PLoS ONE, 2021. **16**(5 May).
3. Burgess, K. et al., *Re-Wired: treatment and peer support for men who have sex with men who use methamphetamine*. Sexual Health (14485028), 2018. **15**(2): p. 157-159.
4. Watt, M.H. et al., *The mental health experiences and needs of methamphetamine users in Cape Town: A mixed methods study*. South African Medical Journal. Suid-Afrikaanse Tydskrif Vir Geneeskunde, 2015. **105**(8): p. 685-8.


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 Conversations**