Montana State Legislature

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EXHIBIT 5
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Children are meth's 'innocent victims'

By CAROLYNN BRIGHT - IR Staff Writer - 11/17/04

It's pretty clear that children are the true victims of methamphetamine use and production, but a method of cushioning the drug's impact on their lives has been a little less obvious to state law enforcement and service providers.

Representatives from areas including drug enforcement, the courts, child protective services and the medical field gathered in Helena Tuesday to discuss developing a collaborative, multi-disciplinary response to help the young victims of the methamphetamine trade.

"We want to understand (the children's) unique needs and be able to treat that on a medical and emotional level," said Craig Campbell, board member of the Montana Narcotics Officers Association. "We believe the key is the awareness and the education that the meth problem is more far-reaching than an enforcement or judicial problem."

The group hosted the conference at the Red Lion Colonial Hotel in association with the Montana Division of Criminal Investigation. The National Drug Endangered Children Alliance sponsored the event.

Participants received information about the operations of methamphetamine labs and the responsibilities of law enforcement in investigating clandestine labs.

Law enforcement investigations must dove-tail with child protective services functions so that the young victims of meth use and production receive necessary psychological and medical follow-up to ensure their well-being, Campbell said.

Finally, speakers encouraged prosecutors to hold drug users and makers responsible not only for their actions, but how those actions have damaged their children.

Miles City resident Lucy Burke has seen the effects that growing up in a methamphetamine-driven household have on children.

Burke has provided foster care for a 4-year-old boy removed from a home in which a meth lab was located for the past year.

"We always knew there was something going on there," she said, explaining that she was acquainted with the boy's family before he was removed by child protective services. "There was a lot of coughing and his clothes smelled. Sometimes he'd wear the same clothes from day to day."

However, Burke and her daughter, Trista, said the true impact that being raised by members of the drug culture had on the young boy was most evident in his behavior.

"He had adult behavior he shouldn't have known about," Trista said.

Sara Lipscomb, the chief executive officer of the Montana Council for Families, wants to make sure the type of care the Burke family is providing to children affected by their family's drug use begins the second law enforcement officers execute a search warrants on suspected labs.

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"When children are removed from meth labs, they can't take anything with them (due to contamination)," she said, adding that they are often swathed in the plastic hazardous materials suits that meth investigators must wear when entering such residences. "We want to provide something these kids can take with them as theirs."

In order to provide the children with that small sense of comfort, Lipscomb's group began assembling plastic tubs filled with items like children's clothes, toys and more that drug enforcement officers can carry with them and break out when the need arises.

Campbell said the focus of today's continuation of the conference will be identifying working groups in each geographic area to facilitate the development of a state-wide alliance dedicated to helping children affected by Montana's methamphetamine epidemic.

"Ultimately, we'll try to form an alliance team," he said. "The children are the innocent victims here."

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Article published Dec 5, 2004

Groups push for meth prevention

By KIM SKORNOGOSKI
Tribune Staff Writer

Montana's Legislature has tinkered with but not tackled the growing problems caused by methamphetamine, the addictive stimulant that arrived in the state in the mid-1990s.

Now anti-meth activists want to put meth at the top of the 2005 agenda by supporting the state's first treatment facility specifically for meth abusers.

Success this time around might stem from a new alliance that joins an active group of Lewistown residents and a nonprofit company that runs the prerelease center in Butte.

For the past year and a half, they've been laying the groundwork for a new meth treatment facility in Lewistown.

Community Counseling and Correctional Services Inc. says Lewistown's central location makes it the ideal spot for the state's first meth treatment facility.

Should the Legislature make funding available, the company hopes to offer treatment for prisoners by late spring if it remodels an existing building or by late fall if it builds a structure from scratch.

To win the contract, CCCS would have to deliver the lowest price per prisoner per day. It may see some competition from other companies that run prerelease centers throughout the state.

Regardless of who gets the contract, Mike Thatcher, the head of CCCS, promises to lobby hard for a treatment program.

"This needs to happen, whether it's us or someone else," Thatcher said. "What we've done in the past isn't working. We're throwing away money locking people up. We've got to stop putting our heads in the sand."

The state spends millions on the back end of the problem, incarcerating meth users and caring for children taken away from addicts. But little is invested in prevention and treatment.

The treatment that is being offered isn't meth-specific and doesn't compensate for the years it takes to kick the drug.

Previous efforts

After the 2001 legislative session, Gov. Judy Martz and Attorney General Mike McGrath created a state task force to study Montana's meth problem and suggest solutions for the next session.

Its 100-page report quantifies the problem and offers solutions including a new state drug czar position and regional treatment facilities.

Battling a tight budget, a House committee in 2003 killed a proposal to spend $900,000 to set up two meth treatment homes for women. Other bills made sentences tougher for people charged with operating meth labs.

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People who cook the drug face the biggest health risks, including cancer, short-term and permanent brain damage and immune system and respiratory problems.

All those health problems are foisted on taxpayers as meth addicts land in jail or give up their money, jobs and families to feed their addiction.

The Department of Environmental Quality has to deal with the toxic meth waste dumped in rivers and parks and down drains. And the Department of Housing is burdened with cleaning up hazardous fumes that seep into the walls and carpet when an addict makes meth in public housing.

More than 500 people attended a series of educational forums in Great Falls sponsored by the local meth task force. Since then members of the task force, including Mayor Randy Gray and District Judge Kenneth Neill, have urged legislators to prioritize meth treatment.

Beating addiction

As the use of meth mushrooms in Montana and the West, more and more research indicates that it could be the toughest drug to kick.

Meth's 12-hour high is so powerful that users quickly become addicts. Unlike many other drugs, methamphetamine alters the brain's chemistry — a change that makes users crave the drug for two to five years after they quit.

Yet the state's treatment programs last months at most.

The drug kills brain cells in the frontal lobe, making it difficult for addicts to process information and make decisions.

Meth addicts have a short attention span, and current treatment programs cram in more information than they can process, said Dr. Dan Nauts, director of the Benefis Addiction Treatment Center.

"We've always done things backward," he said. "If you give people eight hours of treatment a day and they can only digest one hour, you're wasting your time."

Meth also alters the chemicals in the brain that motivate people and make them feel pleasure and satisfaction. Many addicts take medication for depression.

When a person uses meth over a period of time, the drug gets trapped in their fatty tissue, where it can remain for years before seeping back into the bloodstream.

The former addict can have drug "flashbacks," making it all the more difficult to fight meth cravings.

"It's almost like you're treating someone who has had a stroke," said Marci Dardis, executive director of the Rocky Mountain Treatment Center. "There's definite brain damage."

Dardis saw effective long-term treatment when she worked with a pilot program in Washington state. The program diverted people from jail for treatment that spanned three to six months.

Dardis saw a 60 to 70 percent success rate among the people she worked with.

"Long-term is most definitely the answer and has got to be our focus if we hope to have any success in treating meth addiction," she said. "Our focus has got to be on the addict."

Lewistown plan

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Thursday, December 30, 2004
Independent Record

Meth lab found; two arrested

Two children, 10 and 8, taken from home

By LAURA TODE
IR Staff Writer

Missouri River Drug Task Force investigators arrested two people Tuesday morning after an investigation led them to a home on Claimjumper Road, where the couple allegedly was manufacturing methamphetamine, according to Lewis and Clark County Sheriff Cheryl Liedle.

Inside the home, detectives found two children, ages 10 and 8.

Shortly after 11 a.m., Anthony Bailey, 32, and his wife, Lisa Bailey, 33, were arrested and charged with the unlawful operation of a clandestine lab and felony possession of dangerous drugs.

"Our belief is that this lab contributed to a fairly significant amount of methamphetamine in our area," Liedle said.

Not only did drug task force detectives find a stash of meth, they discovered lab components and significant amounts of the ingredients used in the production of meth, Liedle said.

Methamphetamine "cooks" use common chemicals to make the drug, including iodine, over-the-counter cold and sinus medications containing pseudoephedrine, red phosphorus — usually obtained from the striker plates from matches — and muriatic acid as well as acetone.

Liedle said the Missouri River Drug Task Force was tipped off by several local businesses that believed the couple was purchasing and stockpiling Sudafed.

"In the course of the investigation, our drug task force realized this past week that children were living in this home, so they involved child protective services right away," Liedle said.

After their parents were arrested, the children were taken to the hospital for examinations before being placed in temporary foster care.

Liedle said the couple will likely be charged with felony child endangerment in conjunction with the investigation.

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Meth: Idaho firm finishes clean-up

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"This case is an excellent example of good teamwork between local businesses, child protective services and the Missouri River Drug Task Force," Liedle added.

The investigation is still ongoing, and Liedle said she expects Missouri River Drug Task force officers will make more arrests.

The Baileys made their initial appearance in Justice Court, and bond was set at $100,000 apiece.

McGillibray Environmental, of Osborne, Idaho, was called for cleanup of any hazardous materials in the residence. The company finished cleanup Tuesday night.

Reporter Laura Tode *can be reached at 447-4081 or by e-mail at*

Independent Record January 16 2005

Officials: Kids pay the biggest price

By CAROLYNN BRIGHT
IR Staff Writer

For most children, Christmas is a time filled with wonder and anticipation.

But that joy was cut short for two Helena children this year when law enforcement officers arrested their parents for allegedly producing methamphetamine in their home.

Don Ferriter knew in advance that the raid was going to take place. And he knew that his department, Montana Child Protective Services, would have to work fast to get the children safe and minimize the trauma that would accompany such a frightening experience.

"We did a good job of working together on this," said Ferriter, intake supervisor for Lewis and Clark and Jefferson counties. "But we still had to explain to these kids why they couldn't bring any of their things with them, leave their Christmas presents under the Christmas tree."

Social workers who responded to the raid did the best they could. They told the children some dangerous chemicals had been kept in the house, that their toys might be contaminated and that the chemicals could make them sick.

However, the knowledge that he did his best doesn't erase the image of a bewildered little girl, standing in

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producing meth has some definite dangers associated with it. For example, various chemicals - including phospine, iodine and hydrogen chloride - were measured well above the occupational standards at various stages of the operation. In addition, it became clear to researches that "methamphetamine itself becomes airborne and produces widespread contamination in the cook area and beyond." Tests conducted on the protective gear worn by scientists indicated that "contamination of skin and clothing will occur to those present at a methamphetamine lab and sufficient decontamination must be conducted for first responders and residents." As a followup to 2003's efforts, the National Jewish Hospital and Research Center continued last year to investigate the effects of different types of meth production processes and to examine more closely the harmful effects on children. "They gave us some good information about the toxic levels and how to handle these situations (in a safer manner)," Clemens said. While researchers strive to get a grip on the physical effects of chemicals associated with meth production on children, law enforcement officials and social workers know that other dangers exist. "Children living at methamphetamine laboratories are at increased risk for severe neglect and are more likely to by physically and sexually abused by members of their own family and known individuals at the site," according to the Office for Victims of Crime Web site. The site adds that meth-addicted parents often fail to provide for their children's most basic needs, including food, sleep and immunizations. The children also run the risk of finding drugs, syringes and guns in their homes. Perhaps more insidious, however, are the psychological effects of being raised in such an environment, officials say. The Office for Victims of Crime Web site indicates that children raised in drug homes often exhibit an attachment disorder, stemming from their parents' failure to respond to their basic needs. Symptoms of an attachment disorder include an inability to trust, form relationships and adapt. Ultimately, such disorders put children at greater risk for substance abuse and criminal behavior. **Living and breathing legacy** Lewis and Clark County's chief juvenile probation officer, Dick Meeker, agrees that the bigger picture of how meth affects children is still somewhat blurry, but his dealings with the kids and their families are helping him to focus on the issue. "We probably are just beginning to see those results," he said, stating that only recently has he noticed juvenile probationers testing positive for meth use. "But in the next 10 years, they'll make up a significant portion of kids in need of some type of placement." While meth-affected children likely will be unique in their needs, Meeker said they appear to have some similarities with children who suffer from Fetal Alcohol Syndrome. How to assist individuals afflicted with that disability is a puzzle juvenile authorities have been trying to solve for the past decade. "Because of the damage these kids have received ... these kids are very seriously disabled," Meeker said, explaining that they have a difficult time processing information and picking up on social cues. They also lack long-term memory. "They walk out of the office and they promptly forget what you've told them," Meeker said, adding that the memory problems he mentioned makes these children extremely difficult to monitor on probation. "They need redundancy - more than we can give them." By the time Meeker comes into contact with these children, their dysfunction has landed them in the juvenile justice system, and he doesn't hold out much hope they won't continue on into the adult justice system. "Once damage of this sort is done, it's done," he said. "There's nothing you can do to reverse that kind of organic problem." **The future is dim** According to Meeker, programs to assist victims of Fetal Alcohol Syndrome do exist throughout the country, but access is limited in Montana. He fears that the upcoming generation of meth-affected children will only stretch resources even thinner. "All we're doing right now is providing services to the kids to try to maintain them," Meeker said. That means they are safe, sheltered and they don't have the opportunity to harm themselves or anyone else. As the number of meth-affected children increases in the future, state and federal agencies will be forced to allocate more money to serve them, he said. "The financial end of this will be great, let alone the human suffering," Meeker said. But, according to Clemens, getting these children into a safe environment and keeping them out of harm's way can be challenging as well. Once a serious drug problem within a household is identified, law enforcement's top priority is to find the children a temporary placement and get their parents into treatment. In the majority of cases, the children are eventually returned to their homes and officials with law enforcement and social services take on a supervisory role. The time frame to monitor a case is about six months. Officials are learning that the supervisory period needs to be a lot longer due to the rate of relapse associated with meth addiction. In the case of many families, Clemens said, the past is the best predictor for their future behavior, but Montana law requires prosecutors to keep reunification of families a priority in their efforts in these types of cases. "When we take

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