Using crystal methamphetamine (‘ice’) can affect more than just a person’s physical and mental health. Its effects can be much more far-reaching, impacting relationships with friends and family, workplaces, local communities and other contexts. Learn more about how ice use can affect different contexts below.

CRYSTAL METHAMPHETAMINE AND THE WORKPLACE

Using methamphetamines (including ice) can have implications for workplace safety. Use can impair concentration, the ability to gauge speed and distance, judgment and coordination. It is not safe to drive, operate machinery, or work in safety sensitive situations when affected by ice.

While the intoxicating effects of ice generally last around 6 hours, workplace safety may be compromised for much longer. The immediate after effects of ice use can include drowsiness, and people may find it difficult to sleep for several days following use. This can result in increased levels of fatigue, poor concentration, and impaired judgement. Longer-term physical and mental health problems associated with regular ice use may also negatively impact on workplace safety and productivity.

For more details refer to the ‘Ice and the workplace’ factsheet which provides information on methamphetamine use and its implications for workplaces.

- **Developers:** The National Centre for Education and Training on Addiction (NCETA), Flinders University, Australia.
- **Year:** 2015
- **Evidence base:** This resource has undergone expert review. Refer to the NCETA website for more information about this resource.

CRYSTAL METHAMPHETAMINE AND DRIVING

Driving under the influence of methamphetamine is a serious road safety issue. Even in low doses, methamphetamine (including ice) can impair driving skills and can lead to speeding, erratic driving, high speed collision or increased risk taking behind the wheel. In Australia, it is an offence to drive, attempt to drive or supervise a learner driver with any illicit drug in your system. For more information refer to
A national 7-year study found that the rate of methamphetamine-related deaths doubled from 2009 to 2015 in Australia (Darke et al. 2017). Motor vehicle accidents were responsible for 9.5% (156) of the total number of methamphetamine-related deaths (1649). It should be noted, however, that other drugs were also present in most cases (e.g. opioids, antidepressants, sedatives and/or alcohol).

Evidence suggests that rates of driving while under the influence of illicit drugs are relatively high among those who regularly use them. In a recent survey of people who inject drugs regularly in Australia (IDRS 2017), 75% of the 888 participants who had recently driven a vehicle reported having driven within three hours of using an illicit drug. The most commonly reported drug (not including prescription drugs) was ice (43%), followed by heroin (39%) and cannabis (36%).

**KEY SOURCES**


See the ‘Ice and Driving' fact sheet for sources related to effects of ice on driving.