



**MENTAL HEALTH
FIRST AID®**

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PROBLEM DRUG USE

GUIDELINES FOR PROVIDING MENTAL HEALTH FIRST AID TO AN ABORIGINAL OR TORRES STRAIT ISLANDER PERSON

Purpose of these guidelines

These guidelines describe how members of the public should provide first aid to an Aboriginal or Torres Strait Islander person who may be experiencing problem drug use. The role of the first aider is to assist the person until appropriate professional help is received or the crisis resolves. The guidelines aim to be respectful to cultural differences in understanding and treating problem drug use. More information regarding culturally respectful mental health first aid practice can be found in the guideline *Cultural considerations and communication techniques: guidelines for providing Mental Health First Aid to an Aboriginal or Torres Strait Islander person*.

Development of these guidelines

The following guidelines are based on the expert opinions of Aboriginal clinicians from across Australia, who have extensive knowledge of, and experience in, mental health.

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How to use these guidelines

In these guidelines the word *Aboriginal* is used to represent all Australian Aboriginal and Torres Strait Islander people.

These guidelines are a general set of recommendations about how you can help an Aboriginal person who may be experiencing problem drug use. Each individual is unique and it is important to tailor your support to the person's needs. These recommendations therefore may not be appropriate for every person who has problem drug use.

It is important to acknowledge that Aboriginal communities are not all the same; they may differ in their understanding, approaches and treatment of problem drug use. Be aware that the individual you are helping may not understand mental health in the way that you do. Try to be familiar with their way of understanding.

Also, the guidelines are designed to provide first aid in Australian Aboriginal and Torres Strait Islander communities and may not be suitable for other cultural groups or for countries with different health systems.



Understanding problem drug use

What is problem drug use?

Problem drug use is when someone is using drugs (e.g. cannabis, amphetamines, inhalants or kava) in a way that causes them harm (see box *Harms of problem drug use*). It is not just a matter of how much of a drug the person is using, but how their use affects their life and the lives of those around them.

Alcohol is also a drug. If you are concerned that the person may have a drinking problem, please see *Problem Drinking: Guidelines for providing Mental Health First Aid to an Aboriginal or Torres Strait Islander Person*.

Harms of problem drug use

- Mental health problems (e.g. panic attacks, psychosis, suicidal thoughts and behaviours)
- Physical health problems (e.g. damage to organs such as brain or liver)
- Poor judgement and decision-making (e.g. taking risks, driving while affected by drugs)
- Injuries while using drugs (e.g. as a result of accidents, falls, violence)
- Problems with community or family relationships
- Work or financial problems
- Problems with the law

Why do people use drugs?

There are a wide range of reasons why people use drugs. For example, it may help them to cope with problems, while stopping might lead to unpleasant effects. There may also be things happening within the family or community that are contributing to the person's drug use. Some people may not even be sure why they use drugs.

Drugs are often used to cope with underlying emotional distress or mental illness. This is often called "self medication". Drug use can also cause mental health problems or make them worse. In order to reduce the person's drug use, their underlying emotional distress or mental health problems will usually need to be addressed.

For information on helping someone who may be experiencing depression, please see *Depression: Guidelines for Providing Mental Health First Aid to an Aboriginal or Torres Strait Islander Person*.

Dependence on drugs

Drug dependence is when someone is addicted to a drug and cannot get through their day without it. The person may be dependent on drugs if they get less effects from the drug over time, experience unpleasant withdrawal symptoms or have problems in cutting down or controlling their drug use. A person who is drug dependent may spend a lot of time getting the drug, using it or recovering from its effects.

Drug use and the community

Problem drug use not only affects an individual but also their family and community (see box *Impacts of problem drug use on Aboriginal communities*). In order to help a person with problem drug use, it is important to know the cultural, local, state and national laws around drug use and possession. It is also important to have an understanding of the different drugs used in the person's community.

Impacts of problem drug use on Aboriginal communities

- Increase in suicide and early death
- Increase in contagious diseases such as hepatitis C and HIV
- Social and emotional wellbeing problems
- Increase in family and community conflict, including violence, crime and time in jail
- Money spent on drugs rather than things that could benefit the community

How do I know if someone has a problem with their drug use?

A person has a drug use problem if their use causes harm to themselves or others. However, sometimes it can be difficult to tell if somebody has a drug use problem, for the following reasons:

- The effects of drugs vary from person to person
- Any use of drugs does not necessarily mean the person has a problem
- Problem drug use may be confused with depression or stress

If you suspect somebody has a drug problem it is important to respect their privacy and not search through their things to look for signs of drug use.

How do I talk to the person about their problem drug use?

Approach the person

If you don't know the person very well, try to make a connection with them before talking about their problem drug use. You could do this by sharing some information about who you are and asking the person where they are from.

Try to talk to the person in a quiet, private environment at a time when there will be no interruptions or distractions and you are both in a calm frame of mind.

It may not be easy talking to the person about their problem drug use. They may not think they have a problem or may deny that they have a problem. The person may react negatively, for example by getting angry. They may find it hard to talk about

their use with you because of the shame and stigma associated with drug use. For this reason, don't expect the person to tell you everything about their drug use.

If you are unsure about how to approach the person, you can ask a health worker for advice about how to do this.

How to talk to the person

Discuss the issue of drug use openly with the person, as this may help them feel comfortable talking about their own drug use. Express your concerns in a supportive, non-confrontational way without judging the person. Be assertive but do not blame, argue or be aggressive. Stay calm, open and honest when talking to the person about their problem drug use. Listen carefully to them without being judgmental (see box *Tips for good communication*).

What to say to the person

Consider the person's readiness to talk about their problem drug use by asking about areas of their life that it may be affecting. For example, their mood, work performance, family or community. Don't press the person to talk if they don't want to. Tell them that you will listen without judging them.

Ask the person if they consider their drug use to be a problem and whether they want help to change. Express an offer of help and discuss with them what you are willing and able to do. However, be careful not to take on the role of a counsellor.

Offer the person some information about problem drug use, but be aware that they may already know a lot about it. You could discuss how common it is, the associated risks, what treatments are available and that people can be helped. It is a good idea to have some helpful contact numbers to give to the person so they can call for confidential help or for more information if they are willing to receive it.

Discuss with the person whether they have ever tried to change their drug use in the past. If they have tried to change, discuss with them what was helpful and what wasn't. Also discuss with them that stopping drug use is hard, it may be painful and it takes time. Don't expect the person to change their drug use right away as this conversation may be the first time they have thought of their drug use as a problem. If the person does not agree they have a problem, let them know that you are available to talk again in the future.

Tips for good communication

- Don't interrupt the person while they are speaking
- Allow the person time to tell their story
- Repeat back to the person what they have said to show that you understand, (e.g. "so what you are saying is...")
- Listen carefully to the person rather than talking all the time. This allows you to think carefully about what the person is saying and doing and how you can best help them
- Don't try to quickly fill a silence in the conversation. Silence can be used to show respect and acknowledge that the person has said something important
- Tell the person that it is OK to feel the way they are feeling
- Be warm and sincere to the person to help them feel secure about discussing their problem
- Talk to the person about their problem without talking down to them
- Don't label the person, for example by calling them an "addict"
- Focus the conversation on the person's behaviour rather than their character
- Use "I" statements instead of "you" statements. For example, you could say "I feel worried when you take drugs" instead of "You make me feel worried when you take drugs"
- Use open questions that encourage the person to think about their drug use, such as, "What do you think about your drug use?" or "How do you think you can change your drug use?"
- Allow the person to talk about concerns not related to their problem drug use (e.g. family business). However, do not get drawn into arguments about other issues

If the person is pregnant or breastfeeding, or caring for a child

If the person is pregnant it is important they seek appropriate professional help as soon as possible. Discuss with the person that using drugs during pregnancy is unsafe for the baby and strongly encourage them to stop using drugs while pregnant. If the person has been using drugs regularly, discuss with them that stopping drugs suddenly without medical supervision can be dangerous for the unborn baby. If the person wants to stop using drugs, tell them that medical help is essential to do so safely.

If the person is breastfeeding discuss with them that using drugs is unsafe for the baby. Tell them not to use drugs while breastfeeding.

If the person is caring for a child encourage them not to use drugs around children.

Encouraging the person to seek professional help

Suggesting help

Before suggesting help to the person, find out about what Aboriginal health services, treatment options and support services are available in the person's community or local area. Ask the person if they would like to get professional help and encourage them to do so. Discuss with them why they need professional help.

If the person is using more than one type of drug, strongly recommend they seek professional help. Also, if the person has been using drugs regularly, they will need to seek medical advice before they attempt to stop using drugs.

Be aware that it is common for people with problem drug use to resist seeking professional help or find it difficult to accept help. Be prepared for the person to respond negatively when it is suggested.

Give the person information about how to get professional help and assure them that it is confidential. Tell the person that it takes courage to ask for and to accept professional help.

Types of help

People who use drugs do so at different levels ranging from experimentation to heavy use and people need different types of help depending on their level of use. Although abstinence (stopping all drugs) may be a suitable treatment aim for some people, many programs recognise that for others, this may not be possible or realistic. There are several treatment options and support services available for people with problem drug use. These include education, counselling, medical help to withdraw from the drug, rehabilitation and self help groups.

Give the person information about local options and be careful not to pressure them into a single type of treatment. Encourage the person to talk with a health worker, family member or respected Elder about options for professional help. Allow the person to decide which type of help would be most appropriate or useful for them. Offer to help the person find a traditional healer if they would like to see one.

Making the appointment

Be aware that the person may not like going to health services. Assure them that you will support them in getting the help they need. Help the person find a professional they are happy with. Encourage the person to ask the professional about any words they don't understand. Follow up with them to see how the appointment went.

What if the person is unwilling to change?

If the person does not want to change their problem drug use, remember that you cannot make them. Tell them you are concerned about their continuing drug use. Discuss with the person that if they are using drugs to escape problems, it is likely to make their problems worse. Give them a clear message that changing their drug use is the best option and that drug use is never completely safe.

Continue to be supportive of the person because opportunities to help them may arise in the future, when they are more willing to change (see box *Helping the person at different stages of change*). It is important to be available and show a positive response when the person says they are ready to talk. In the meantime, tell the person what behaviour you are willing to accept from them. For example, the person is not to come to your home for a social visit when they have been using drugs.

If the person does not want to change their drug use, do not:

- Deny them basic needs such as food or shelter
- Use drugs with them
- Provide them with money to buy drugs
- Cover up or make excuses for them
- Help them to get drugs (e.g. drive the person to meet their dealer)

If the person continues to take drugs, you should encourage the person to have a general health check and talk to them about ways to reduce the harms of drug use. Some possible strategies include: not using drugs near lakes, rivers or the sea where the person could drown; not using drugs near busy roads where they could be run over; and not using alone because of the danger of collapsing and passing out. If the person is sniffing, talk to them about ways to reduce harm, such as sniffing outside instead of in small places and using small containers instead of large ones.

If the person is injecting drugs, tell them that it is never OK to share injecting equipment (needles, syringes, tourniquets, filters, spoons, waters) with someone else, not even if they say they are clean, if they are family, or if the person knows them really well.

What if the person is unwilling to seek help?

Although the person may not want professional help when it is first suggested, you should continue to encourage such help or look for opportunities to suggest help again. Give the person information such as brochures, telephone helplines, or names and locations of services that they can use when they are ready to seek professional help. Be patient and remain positive. Do not use negative approaches such as threats, accusations, nagging or shaming to get the person to seek professional help.

The stigma and discrimination often associated with drug use can be barriers to help seeking. Tell the person that there is no shame in getting help to change their problem drug use.

People often only ask for help when they see that their drug use is out of control. They may be more willing to get help after an episode of drug use has led to negative consequences such as trouble with family or the law.

If the person does not want to seek help, you should respect their decision. It is ultimately their decision and you should not feel you have failed.

Helping the person at different stages of change

Stage 1: The person does not think they have a problem

Offer information about the drug and how it might be affecting them, discuss less harmful ways of using the drug and how to recognise overdose.

Stage 2: The person thinks their drug use might be a problem

Encourage them to keep thinking about quitting, talk about the good and not so good things about changing, give information and refer to a health worker.

Stage 3: The person has decided to make a change

Encourage the person and support their decision to change; help them plan how they will stop using drugs (e.g. get help from a doctor, alcohol or other drug (AOD) worker or traditional healer, or go back to country).

Stage 4: Making the change

Provide support and suggest ongoing health checks, give them help with saying 'no' and avoiding people who use drugs, practice things to do when they feel like using drugs.

Stage 5: Maintaining the change

Support the person to keep up the new behaviour.

Note: The person may try to change or stop their problem drug use more than once before they are successful.

When to disclose the person's drug use

It is important to tell the person that you will have to tell other people about their problem drug use if there are children at risk, or if the person is at risk of harm to themselves or others. You should only disclose the person's problem drug use to a significant other (e.g. friend or family member) or a professional, if one or more of the following things apply:

- You have the person's consent
- The person is a child or young person
- The person is at risk of harm to themselves
- The person is at risk of harming others
- There is a child or young person being placed at risk because of the person's drug use

Information and support for the person who wants to change

There are a range of things you can do to help the person change, including providing support, helping them deal with pressure to take drugs and suggesting self-help strategies. It is possible to make a difference to the person's problem drug use even by doing small things. If the person wants help to change, ask them what they would find most helpful.

You can speak to a professional for information and support in relation to assisting someone with problem drug use. You may also find it helpful to speak with others who have dealt with similar problems about effective ways to help the person.

Supporting the person to change

Changing problem drug use takes time, cutting back on drug use is hard and the person will experience emotional, physical and mental stress. Be positive and encouraging of any efforts the person makes to change their problem drug use. You should always support the positive choices that the person makes (e.g. playing sport or spending time with people who don't use drugs).

Encourage the person to talk to someone they trust about the efforts they are making to change. Support from the person's family, friends, respected Elders and community will help the person while they are trying to change their drug use.

Helping the person deal with social pressure to take drugs

The person may be pressured by others to take drugs. Encourage them to be strong and say "no". Help the person to think of ways to say no when offered drugs and reassure them that it will get easier the more they do it.

Self-help

Self-help strategies may help the person change their problem drug use. Offer the person information about self-help strategies such as:

- Attending a support group
- Eating healthy and trying to get a good amount of sleep so the body can be strong and work to repair itself
- Finding healthy ways to feel good instead of using drugs
- Doing more of what keeps them strong, for example, getting back to country, re-connecting with culture or talking with family
- Reading books about changing drug use

First aid for drug-affected states

Drug-affected states refer to changes in the way a person thinks, feels and acts after taking drugs. These changes result in significant distress to the person or difficulty in doing everyday things.

It may be difficult to tell what the person has taken by observing their behaviour. This is because different drugs have different effects on the body and because the effects of each drug will vary from person to person. Also, the signs of a drug-affected state may vary depending on how much the person has taken (i.e., how intoxicated the person is). In addition, illegal drugs can have different effects each time they are taken, because they are not made in a controlled or standard way.

What to do if the person is in a drug-affected state

Stay calm and assess the situation for possible dangers. Try to ensure that the person, yourself and others are safe. Try to encourage the person to avoid dangerous activities, such as driving a car or bike, or using machinery. Tell the person that it is dangerous to drive even though they may feel alert. When dealing with a group of people who have been using drugs, take extra care for your own safety.

Talk with the person in a respectful manner using simple, clear language. Be prepared to repeat simple requests and instructions as the person may find it difficult to understand what has been said. Do not speak in an angry manner. Encourage the person to tell someone nearby, or to call emergency services, if they start to feel unwell or uneasy.

Be aware that when the person is using or coming down from a drug, they might be feeling miserable and sometimes suspicious. Try to maintain a safe distance and appear non-threatening.

Drug reactions leading to medical emergencies

Drug use can lead to a range of medical emergencies. Even though drug taking may be illegal, it is important that you seek medical help for the person and that you tell medical staff that the person has been using drugs.

Physical reactions

You should be able to recognise and help someone who is showing signs of a bad physical reaction to drugs. These include worsening or loss of consciousness, breathing problems, overheating, dehydration (not drinking enough water) and overhydration (drinking too much water).

Worsening or loss of consciousness

It is a medical emergency if the person shows signs of a rapid worsening in consciousness (i.e. being confused or not knowing where they are) or unconsciousness (i.e. they fall asleep, or pass out, and cannot be woken). If the person is showing these signs, it is essential that you:

1. Check the person's airway, breathing and circulation

If the person's airway is blocked, try to clear it using your fingers. If the person is not breathing, give the person expired air resuscitation (EAR). If they don't have a pulse, give the person cardiopulmonary resuscitation (CPR). If you do not know how to give resuscitation (EAR, CPR), seek help from someone close by who knows or call "000" (or 112 on a mobile phone if 000 doesn't work) and follow the directions of the telephone operator.

2. Put the person in the recovery position

If the person is unconscious, or slipping in and out of consciousness, put them in the recovery position and ensure they do not roll out of it (see box *Helping an unconscious person*).

3. Call emergency services

When you call for emergency services, it is important that you follow the instructions of the telephone operator. When asked, describe the person's symptoms and explain that they have been using drugs (e.g. "my friend has taken a drug, has collapsed and cannot be woken up"). Try to get detailed information about what the person has taken by asking the person, their friends or looking around for clues. Have the address of where you are ready to give to the telephone operator and stay with the person until the emergency workers arrive.

Do not be afraid to tell the emergency workers what the person has taken. Nobody will get into trouble when the emergency services arrive. The emergency workers' first priority is to save the life of the person who is unwell. Police will only be called if the emergency workers feel they can't control what is happening.

Overheating and dehydration

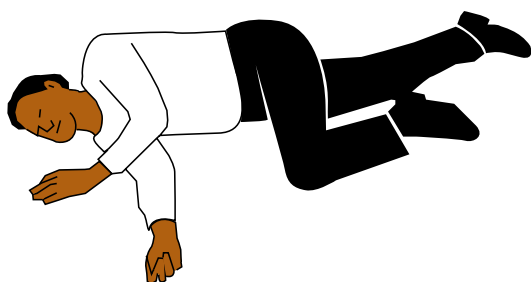
While some drugs can cause a person to slow down and become cold, other drugs (e.g. ecstasy) can encourage a person to be active and use a lot of energy. Dancing for a long time in a hot environment, without drinking water, can cause the person's body temperature to get too high. This is dangerous and can lead to overheating or dehydration. If someone is overheated or dehydrated, they will show some or all of the following symptoms:

- Feeling hot, exhausted and weak
- A headache that will not go away
- Pale, cool, clammy skin
- Rapid breathing and shortness of breath
- Tiredness, thirst and feeling sick
- Giddiness or feeling unsteady on their feet, and feeling faint

If the person is showing some or all of these symptoms, you must keep them calm and seek medical help immediately. Encourage the person to stop dancing and to rest somewhere quiet and cool. While waiting for help to arrive, reduce the person's body temperature gradually so they don't go into shock (a life threatening condition brought on by a sudden drop in blood flow throughout the body). Do this by loosening any tight clothing or removing extra layers, and encourage the person to sip non-alcoholic fluids (e.g. water and soft drinks). Prevent the person from drinking too much water at once as this may lead to coma or death. Try to stop the person from drinking alcohol as it will make them more dehydrated.

Helping an unconscious person

Any unconscious person needs immediate medical attention and their airway kept open. If they are left lying on their back they could suffocate on their vomit or their tongue could block their airway. Putting the person in the recovery position will help to keep the airway open. If necessary, clear the person's airway after they have vomited. Before rolling them into the recovery position, check for broken glass and other sharp objects.



Psychological reactions

Psychological reactions include panic attacks, psychosis, suicidal thoughts and behaviours, and aggression. Drug use can cause mental health problems or make them worse. It may be difficult to tell the difference between the symptoms of mental illness and a drug-affected state. The help you provide to someone who is experiencing a psychological reaction to a drug is the same as the help you provide to someone who has a mental illness.

Panic attacks

If the person is stressed out or panicky, try to move them to a quiet environment away from crowds, loud noise and bright lights. Watch the person carefully in case they start to become more fearful or aggressive. For more information see *Panic Attacks: First Aid Guidelines*.

Psychosis

If the person is experiencing psychosis you should encourage them to seek professional help whether you think the psychosis is drug related or not. For more information see *Psychosis: Guidelines for providing Mental Health First Aid to an Aboriginal or Torres Strait Islander Person*.

Suicidal thoughts or behaviours

Drug use increases the risk of suicide. For information on helping someone see *Suicidal thoughts & behaviours and deliberate self-injury: Guidelines for providing Mental Health First Aid to an Aboriginal or Torres Strait Islander Person*.

Helping a person who has been sniffing

Sniffing is also called huffing, bagging or chroming and it means deliberately breathing in an inhalant such as paint, glue or petrol.

If a person has been sniffing, stay with them or make sure they stay somewhere safe until the effects have worn off. Medical help should be sought if the effects are not wearing off after the person has stopped sniffing.

Be aware of the risk of sudden sniffing death (i.e. the person's heart and breathing are affected and sudden exercise or a shock can cause their heart to stop). To reduce the risk of sudden sniffing death, do not threaten or chase the person, and tell any other people around that it is dangerous to chase or overexcite the person. Also, there is a high risk that inhalants may catch on fire and cause severe burns. Keep the person away from anything that could cause the inhalant to catch on fire (e.g. a lit cigarette, a cigarette lighter or a campfire).

Try to create a calm environment for the person by asking any onlookers to move away. If possible, move the person to a safe place with plenty of fresh air or open any doors and windows. If the person is not willing to hand over their inhalants, try to keep the person talking or doing something with their hands so they are not actively sniffing.

What if the person becomes agitated or aggressive?

Sometimes drug use can cause fear, anxiety, panic or paranoia, which may result in aggression. A non-Aboriginal first aider should be aware that Aboriginal people tend to express a higher level of emotion, but this does not necessarily indicate aggression.

Assess the risks to yourself, the person and others before trying to assist someone who may become aggressive. Be aware of local resources such as community members, respected Elders or the night patrol that you can call upon to help calm the person down. It is important to prioritise your own safety. If you are feeling unsafe, seek other supports such as family members or friends.

If inside, try to keep the exits clear so that the person does not feel penned in and you and others can get away easily if needed. Talk to the person in a calm, non-confrontational manner and try to de-escalate the situation with the following techniques:

- Keep a safe distance from the person
- Try to provide the person with a quiet environment away from noise and other distractions
- Speak slowly and confidently
- Repeat things if necessary

- Reassure the person that you are there to help
- Acknowledge the person's agitation (e.g. "I can see that you are upset")
- Ask the person what they want and then repeat what they requested
- Avoid asking too many questions, as it could make the person more angry
- Tell the person what you are going to do before doing it (e.g. calling for help or asking others to leave)
- Try not to provoke the person
- Avoid getting into an argument with the person
- Avoid displaying nervous behaviour (e.g. shuffling feet, fidgeting or making sudden movements)
- Tell the person that no-one will hurt them

Continually think about whether what you are doing is helping. If it is not, try something different. When things have calmed down, encourage the person not to use any more drugs or alcohol in the short term.

If your attempts to calm the person down do not work, and the person is going to hurt themselves or someone else, it is important to call for help. Only call the police if you have tried everything else. If you need to, remove yourself from the situation to make sure you are safe. If an injury or violence occurs, seek appropriate emergency assistance.

The MHFA Training & Research Program

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