

# DRUGS – WHAT YOU NEED TO KNOW

Have you done any alcohol and other drugs or AOD education before? What do you remember about it? Maybe you remember how to classify a drug, or the effects that a drug can have on your body. Or you may remember what a drug is made of and whether it comes from a plant or is synthetically made.

So let's look at a broad overview of how drugs affect us and introduces some models that can help us to better understand drug use. There is also a little revision about what a drug is and how they are commonly classified.

## WHAT'S A DRUG?

So, what do we mean when we say 'drug'? The Alcohol and Drug Foundation (2018) states that "a drug is any substance that, when taken or administered into the body has a physiological effect". 'Psychoactive' or 'psychotropic' drugs are substances from outside of the body that, when ingested, alter how you experience yourself and the world. This type of drug alters things like your mood, perceptions, thoughts and behaviours (Alcohol and Drug Foundation, 2018).

## HOW CAN WE CLASSIFY DRUGS?

We can classify psychoactive drugs a variety of ways but one of the most common is to classify them into four categories according to the effect they have on the central nervous system or CNS. Your brain is the major part of the CNS and it's here where psychoactive drugs have their main effect.

Stimulants, for example amphetamines and caffeine, speed up the activity of the CNS including the brain. They can make you feel more alert and energetic.

Depressants, such as alcohol, tend to slow down the activity of the CNS. You may feel more relaxed and sleepy.

Hallucinogens, including magic mushrooms and LSD, can alter a user's sensory perceptions by distorting the messages carried in the CNS.

Multi-action psychoactive drugs are those that don't fit neatly into one of the other classification categories.

For example, cannabis has both hallucinogen and depressant characteristics and ecstasy both hallucinogen and stimulant properties.

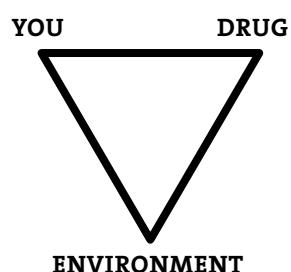
In the next section we are going to explore four well-known models that can help us to better understand drug use. Let's get started by talking about the drug use experience.

## WHAT'S THE DRUG USE EXPERIENCE AND ZINBERG'S MODEL?

Your experience of using a drug may not always be the same – even with the same drug. And your drug experience may not be the same as the experience your friends will have with the same drug.

The effects and the possible harms of using a drug will vary greatly depending on you, the drug you are using and the environment you are in when you take the drug. This is called the drug use experience.

You may have already seen Zinberg's model, the drug use triangle, used to explain the drug use experience and the effects and potential harms of drug use. These are determined by the three parts of the triangle.



**You** – looking at your age, your experience with the drug, your state of physical and mental health, what your mood is like, whether you are tired or alone, what gender you are, if you have eaten or even if you are dehydrated.

The next component of the drug use triangle is the **drug** itself – what is it? How much have you taken? How you took it – did you inject it, or snort it or smoke it? And, did you take the drug with another drug?

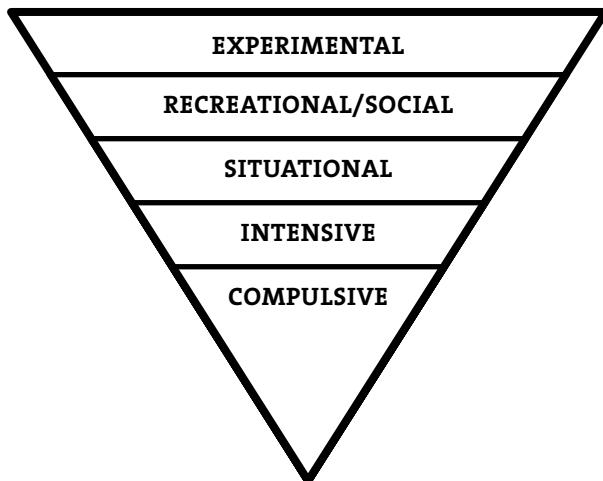


The **environment** is the last component of the drug triangle. Were you at home or at a party when you took the drug? Are you in a familiar place or not? Are there lots of drugs available? Are you safe?

The important things to remember about a drug use experience is that there are many factors that combine to create the experience you'll have. It's not just about the drug. And every experience can be different. What happens when you take a drug is hard to predict because there are so many variables that can impact your experience. You need to consider all of these before you take a drug. Be informed. Think things through. Decide carefully.

### WHAT DOES SHAFER'S MODEL TELL US?

We know that people use drugs for different reasons – to fit in, for fun, to help cope, curiosity, to rebel, to dull pain, to escape, because they are bored, they are pressured to use, they enjoy the feelings the drug gives them and many more reasons. What we often don't think about is the continuum on which drug use exists. Shafer's Model, developed in 1972 but still used today, explains that there are five very distinct patterns of AOD use. The model, using an upside down triangle, explains the patterns on the continuum.



Let's have a look at the five patterns remembering of course that any level or pattern of drug use can cause harm.

The biggest area of the triangle is **experimental** use. This can be single or short-term use and could be motivated by curiosity or to fit in.

The next section of the triangle is **recreational or social** use and includes controlled use of a drug in a social situation such as taking a drug to enhance the experience at a party.

It's important now to say that most people that use drugs use them in an experimental or recreational manner. This is particularly true for young people your age who might experiment with various substances as part of adolescence.

**Situational** use is next. And this pattern is about using a drug for a specific reason. For example, to cope in a situation you find challenging.

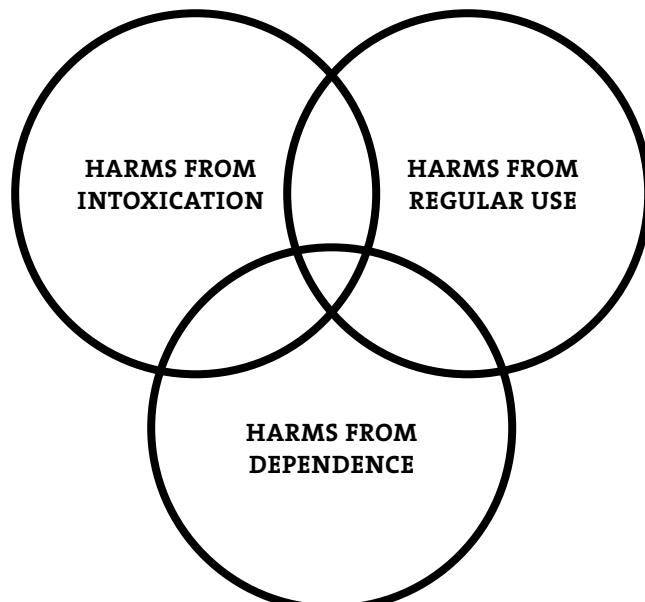
The fourth pattern is **intensive** use. This is regular and ongoing use of a drug at a high level over a period of time and/or bingeing on an excessive amount of the drug at one time.

The last pattern of use is **compulsive** where withdrawing from the drug is very challenging. Use of the drug is frequent, ongoing and at a high level. The use of the drug is central to functioning day to day.

So, why is understanding Shafer's model important to understanding drug use? It reinforces to us that all drugs have the potential to cause harm and provides us with an overview of patterns of drug use.

### WHAT DOES THORLEY'S MODEL EXPLORE?

On to Thorley's model. This model looks at problems that can arise from three different patterns of drug use. This model is important as it starts to build a complete picture of the types of problems that could be experienced through drug use. Of course, the problems you experience are relevant to your pattern and level of drug use. However, you need to remember that you can experience problems any time you take a drug – the first time, the fourth time you take a drug or even if you are a regular user of a drug. This model shows us that not just people who use drugs a lot are at risk of emotional, physical, psychological and legal harm from using drugs.



So, let's look at the three interrelated patterns of use in Thorley's model.

**Harms of intoxication** is the first section and includes a single occasion of use. So what sort of problems could be experienced? Where do you start? Accidents, drink driving, unplanned sexual encounters, pregnancy, an overdose, fighting with friends or family members, drowning, violence, catching an STI or impacts on mental health.

**Harms from regular use** looks at the potential problems that could be experienced from ongoing regular drug use. Problems could be relationship problems caused by drug use, money problems, having trouble focusing at school or completing homework, truanting, health deteriorating, withdrawing from friends, family and social situations, or not being able to hold onto a job.

**Harms from dependence** considers how usage at this level can cause isolation, anxiety, extreme stress, social problems, loss of control and sleeplessness.

### WHAT'S THE 4 LS MODEL?

The final model to explore is the four Ls model (adapted from Roizen, 1979) which considers the impact of drug use on four major spheres of your life.

**Liver** is the first L and looks at any problems to do with a person's physical, psychological or emotional health.

The second L stands for **Lover** and includes the problems caused by drug use associated with relationships, family, friends and children.

**Lifestyle/livelihood** is the third L and include the financial and work problems that could result from drug use.

And the last L is **Legal** and includes any problems associated with the law.

These four models help us to understand that people do use drugs for many different reasons and that problems with alcohol and other drugs can occur at any level of use, even experimental or one-off use.

This has been a lot to get your head around, especially if this is all new to you. However, the top three bits of information to remember are that:

1. The drug use experience is different for all.
2. People use drugs for many different reasons and at different levels. These models help us to develop an understanding of this.
3. Having a better understanding of how drugs affect us can help us to make more informed choices that can keep us safer.



### NEED HELP?

If you or anyone you know is experiencing a drug use issue, contact WA's 24hr Drug and Alcohol Support Line.

- Metro (08) 9442 5000
- Country 1800 198 024
- Emergency 000

Live chat with a qualified and experienced drug counsellor is also offered at:

<http://drugaware.com.au>



### CONTACT

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### REFERENCES

Alcohol and Drug Foundation. (2018). Retrieved from <https://adf.org.au>