Working with Intoxicated People – Case Studies

Learning Activity: Recognising intoxication

As we have discussed previously in this learning unit, most drugs can have different effects on different people at different times. The model of Drug, Set and Setting demonstrates this by taking into account the ways that both internal and external factors can influence a person’s response to a specific drug. However, many drugs do cause some telltale signs of intoxication, some of which are presented below for the more commonly used illicit drugs.

Cannabis
- Relaxation
- Laughter
- Increased appetite
- Poor concentration
- Lack of coordination
- Bloodshot eyes
- Impaired memory

Ecstasy
- Increased feeling of closeness with others
- Dilated pupils
- Feelings of being relaxed
- Sometimes anxiety and paranoia
- Dehydration
- Insomnia
- Feeling of floating

Heroin
- Feelings of wellbeing
- Sleepiness/unconsciousness
- Lack of coordination
- Blurred vision
- Shallow breathing
- Blue lips

LSD
- Hallucinations
- Present as being distant from others
- Anxiety
- Vomiting
- Flashbacks
- Paranoia

Amphetamines
- Restlessness
- Decreased appetite
- Excessive sniffing
- Insomnia
- Aggressive behaviour
- Irrational behaviour
- Sometimes dehydrated

Cocaine
- Feelings of self-confidence
- Busy behaviour
- Decreased appetite
- Excessive sniffing
- Lethargy
- Dizziness
- Aggressive behaviour
Learning Activity: Self-protection and risk management

As with other public assistance services, working in the AOD field can sometimes involve situations where clients become aggressive. Such cases generally involve a ‘trigger’ of some kind (for example, frustration, fear or anger), which might not have anything to do with situations that take place in your workplace. A client may have been involved in a negative, aggravating situation earlier in the day and your workplace simply becomes an outlet for this aggression.

For this activity, think about different ways you could diffuse a situation involving an aggressive client. For each of the categories below, list five behavioral tactics that you could employ to calm a client down.

**Body language**
(Actions, gestures, movement, stance)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

**Speech**
(Volume, speed, tone, language)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Conversation
(What to say, suggestions, advice)

Cultural context
(Different tactics for different people)
Learning Activity: Attending to client needs

As mentioned earlier in this learning unit, different drugs have different effects. This means that the strategies you would use to address client needs would differ from client to client and from drug to drug. Keeping this in mind, describe how you would assist clients who presented to you with the symptoms of intoxication listed below. (NB: You may need to conduct some research on the effects of different drugs. Some useful Internet sites can be found in this learning unit and in the Library, under ‘web-sites’).

Anxiety after using cannabis for the first time.

Exhaustion after using amphetamine and dancing all night.

Unconsciousness after excessive alcohol consumption.

Nausea after consuming MDMA (ecstasy).

Shortness of breath and a persistant cough after long-term tobacco use.

Nausea after consuming a mushroom believed to produce hallucinations.
Disturbing hallucinations following LSD ingestion.

Sweating and shallow breathing after heroin use.
Learning Activity: Attending to client needs

Now apply what you have learnt from your research to the following case study.

Kylie is a St John’s Ambulance officer who works at rave parties in Melbourne. One night, a young woman rushes up to Kylie in an anxious state. The woman explains that one of her friends is sick and asks Kylie to help her. Kylie follows the woman outside the venue, where a teenage girl is lying on the ground, looking pale, cold and very frightened. The girl is breathing rapidly, and seems somewhat unaware of her surroundings.

What should Kylie do? Select 2 responses from this list:

- check vital signs (pulse, blood pressure, etc.)
- Ascertain nature of intoxication
- place a blanket over the girl
- Administer adrenaline
- force the girl to drink some water

Kylie asks the girl’s friend whether they have had any drugs tonight. The young woman hesitantly says that they have only had a few drinks, and that they never use drugs. Kylie is not sure whether to believe this.

What should Kylie say? Select 2 responses from this list:

- ‘It’s okay, I’m not going to call the police – I just want to help.’
- ‘I need to know what she’s had, so that I can provide the appropriate assistance.’
- ‘If she’s only had alcohol, she should be alright – just leave her here and enjoy the party.’
- ‘See? This is what happens when you kids do drugs.’
- ‘If you don’t tell me what she’s had, I’m going to call the police.’

The young woman eventually tells Kylie that her friend has had LSD. It is the first time she has ever used the drug, and she became quite anxious once it affected her. She was not expecting the intensity of the experience and felt that the environment of the rave was ‘overwhelming’. Kylie ascertains that the girl is in no physical danger.

What do you think the immediate needs of the girl might be?

How can Kylie meet these needs?