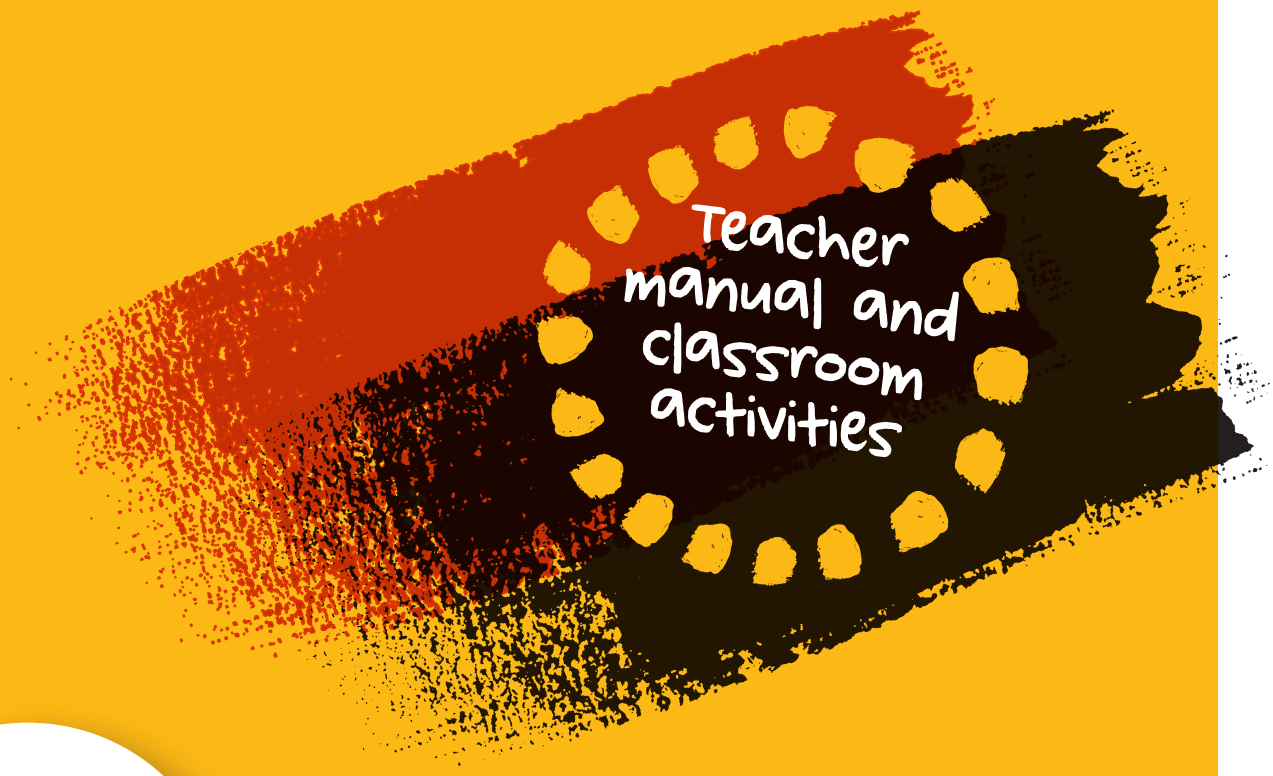
MAKINGtheLINK

Promoting Help-seeking for drug use and mental health issues among Aboriginal and Torres Strait Islander high school students



ncpic
national cannabis prevention and information centre

NCPIC is a an Australian Government Department of Health and Ageing Initiative

This program is based on the original package MAKINGtheLINK developed by Orygen Youth Health for NCPIC.

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Contents

Background Information 2

- What is this resource? 2
- Why aren't young people seeking help? 2
- Why a specific program for Aboriginal and Torres Strait Islander students? 2
- Why do Aboriginal and Torres Strait Islander young people need to seek help? 3
- Program considerations 3
- Cultural considerations for implementing the program 4
- Implementation 4

Summary of Activities 5

Activities

- Activity 1: Yes or No 6
- Activity 2: Body Trace 17
- Activity 3: Ranking Situations 19
- Activity 4: Stuck in the Mud 46
- Activity 5: The Hot Seat 48
- Activity 6: People in My Community 51
- Activity 7: Role Models 58
- Activity 8: Song Competition 60

Supplementary Activities

- Supplementary Activity: Clearing the Smoke 61
- Supplementary Activity: Cannabis – Know the Risks (Internet Activity) 62

Appendices and Further Information for Teachers 64

- Possible Helpers in a Community 65
- Aboriginal and Torres Strait Islander Young People, Drug use and Mental Health 66
- Referral Options and Helplines 68

Background Information

What is this resource?

MAKINGtheLINK: Aboriginal and Torres Strait Islander Package is an educational resource incorporating a series of activities for school-aged students, to encourage them to seek help for problems related to drug use and mental health.

By seeking help early, young people are less likely to develop long-term problems as a result of mental health and drug use issues. Young people are reluctant to seek help from professionals and tend to keep their problems to themselves or turn to friends, parents or teachers for support – people who often don't know what to do.

'Indigenous people have reported a fear of western health and its practitioners and a deliberate avoidance of them'

(Vicary & Westerman, 2004).

Why aren't young people seeking help?

Some young people believe they should be able to sort out their problems on their own or they are too embarrassed to talk to someone about their problems. They are also worried about the confidentiality of information they give to someone such as a doctor or teacher.

Why a specific program for Aboriginal and Torres Strait Islander students?

A similar program to encourage help-seeking was developed in 2010 by NCPIC and Orygen Youth Health. The program tested well with students when piloted in a suburban Melbourne school.

Unfortunately the authors of the program felt it lacked specific cultural elements and would not be as effective among Aboriginal and Torres Strait Islander students.

'Indigenous people prefer to seek help from someone interested in developing a relationship with them, with a knowledge of Aboriginality, someone vouched for by a fellow Indigenous person and with a holistic understanding of health and wellbeing'

(Westerman, 2004; Vicary & Westerman 2004).

Background Information

Why do Aboriginal and Torres Strait Islander young people need to seek help?

Despite cannabis use declining among young people in the general community, according to the limited research evidence available, its use in some Aboriginal and Torres Strait Islander communities appears to be increasing. Just as concerning is that Aboriginal and Torres Strait Islander Peoples typically begin using from a younger age than other Australians, as the evidence suggests that the earlier the onset of cannabis use and the more frequently it is used, the greater the likelihood of developing mental health problems. Alcohol, tobacco and inhalants are also drugs of concern in some Aboriginal and Torres Strait Islander communities and seeking help for all of these substances should be encouraged. Young Aboriginal and Torres Strait Islander Australians are also more likely to be hospitalised for mental health problems than other young Australians. For more information please see the appendix 'Aboriginal and Torres Strait Islander Young People, Drug use and Mental Health.'

'Very little is known about the help-seeking processes for Indigenous Australians within their own communities, nor with local services'

Help- Seeking Researcher (Bonnie Berridge)

Program considerations

The authors of this program acknowledge that Aboriginal and Torres Strait Islander communities differ widely and this program is not intended to be 'one size fits all.' For this reason many of the activities can be adapted to suit particular community needs, available resources, or facilitator confidence.

This program was developed with the following in mind:

- It can be used in rural and remote settings
- It can be facilitated by teachers as well as others who work with Aboriginal and Torres Strait Islander young people, such as social workers and youth workers
- It does not provide strict guidelines for when to implement the program as each school community will have students at different stages of development and readiness for this program. The program will be best received if/when experimenting with drug use and associated mental health problems are a real issue for students
- The quality of the help/support experienced by young people is beyond the scope of this program, however, young people should not be not discouraged by a negative experience of help-seeking and should be encouraged to seek second opinions or try different avenues when multiple help-givers are available in their community
- NCPIC is aware there are many local words that refer to cannabis. After extensive focus testing the word 'Gunja' was selected to use throughout the package, however, the term should be substituted if necessary so it is relevant to the local community.

Background Information

Cultural considerations for implementing the program

Indigenous cultural interpretations of mental health issues can differ from a non-Indigenous perspective, for example, sickness or ill health is often attributed to malevolent spirits, external forces or breaking from culture. Some experiences which others may label as mental illness – such as particular feelings, beliefs or hallucinations including hearing voices – may be seen by an Aboriginal and Torres Strait Islander person as a spiritual or personal issue.

Some activities may not be appropriate for both genders to participate in. Similarly, some activities may be enhanced by separating genders and having a discussion led by a facilitator of the same gender. Notes are made next to each activity where this is appropriate.

The topics of mental health and substance use are of a sensitive nature and facilitators need to be aware that discussion could trigger varied responses in young people. Debriefing after any negative reaction is recommended for students and facilitators.

Implementation

This program will work best if taken on by a staff/community member or small team of people with an interest in the project and enthusiasm to roll it out to a classroom, an entire school, or a small group of young people.

All resources are available to download at no charge from the NCPIC website.

For further background information on the principles of school drug education and for sample curriculum assessment criteria please consult the original MAKINGtheLINK package.

Summary of Activities

Activity 1: Yes or No

Students learn facts about the harms of cannabis and alcohol by determining whether statements about cannabis and other drugs are true or false. This is a whole class activity but can also be conducted in small groups.

Activity 2: Body Trace

Suitable for lower literacy groups or younger students, this activity provides opportunities for participants to learn how alcohol and other drugs can influence physical and mental health in the short and long term. This activity involves tracing around a student's body and then labelling the various parts that could be affected.

Activity 3: Ranking Situations

Students are presented with 30 hypothetical scenarios involving alcohol and other drugs and need to determine how serious these situations are or when they would need to intervene to help a friend. This activity can be done as a class or in smaller groups.

Activity 4: Stuck in the Mud

An outdoor game like 'tips' that involves helping friends who are frozen once tipped. This is followed by a class discussion on barriers and benefits of helping mates who have problems and how to approach them and what to say.

Activity 5: The Hot Seat

A whole class activity where 'for' and 'against' arguments are given for why they would and would not help out a mate. Dialogue to encourage friends to seek professional help is also covered.

Activity 6: People in My Community

This class brainstorming activity gets students thinking about the people who make up their community and which community members would be most suitable to talk to about problems or seek advice from.

Activity 7: Role Models

This activity involves drawing a large flower on the whiteboard with seven petals representing facets of students' life such as family, school and body. Starting with a simple problem and building up to more complex issues, students brainstorm as a class who/where they could go to access help and support.

Activity 8: Song Competition

As a class students summarise their cannabis-related knowledge in the form of a song, inspired by previous winners of the NCPIC Indigenous song competition. Students may then like to enter their own song into future competitions.

Supplementary Activity: Clearing the Smoke

Students watch segments of a cannabis information documentary to learn about how cannabis affects the human body and why young people are more susceptible to harms.

Supplementary Activity: Cannabis: Know the Risks (Internet Activity)

Students in groups of up to five play an online game to collect tokens by answering questions about cannabis correctly.

Activity 1 yes or no

Background

There are many myths surrounding the drug cannabis, especially in terms of its harms. In this activity students learn about the negative effects of cannabis on mental, physical and sexual health and uncover usage patterns in Australia. The harms of alcohol, tobacco and solvents are also considered.

Equipment/preparation

Cut out the twenty small cannabis statement cards and the three large Yes, No and Unsure? cards (laminating optional). Tape or blue tack will be needed.

Duration

20 minutes.

Gender consideration

Students may benefit from this activity if groups are split by gender.

Implementation

1. Stick the Yes, No and Unsure? cards on the wall in different areas of the room.
2. Read a statement out to students and ask them to stand near the label on the wall that indicates whether they believe the statement to be true (Yes), false (No) or whether they are not sure (Unsure?).
3. Ask willing students to explain their reasoning to the rest of the class.
4. Read out the correct statement and count how many students responded correctly (Yes). Ask a student to tally the score on a whiteboard.
5. Continue with more statements, you may like to use them all or just a sample.
6. To conclude, ask students which true (Yes) statements they found most interesting or surprising.

Alternative A

Ask students to form small groups and give each student a number of statements and a Yes, No and Unsure? card. Instruct the groups to discuss each statement and sort the cards accordingly.

Alternative B

This activity could also be run in small groups like a trivia game, with students choosing only between true (Yes) and false (No), options. Ask each group to record their responses to the statements on a piece of paper. Read the correct responses aloud to the class then tally each group's results to determine the winners. Follow this with a discussion regarding which true (Yes) statements they found interesting or surprising.

Extension

Ask students to create their own true (Yes) and false (No) scenarios for others to work through based on information they find on the NCPIC website www.ncpic.org.au. In small groups, ask students to go through their questions to see how many know the answers.

Facilitator summary

Explain to students that although cannabis is often perceived as a harmless drug it does have real effects on respiratory health, mental health (even mild depression and anxiety fall under this banner) and learning/concentration abilities. Mixing tobacco with cannabis poses additional risks and there is no safe method of smoking it. While 26% of young Australians aged 17 have tried cannabis at some point, this means that most (74%) have not. Many young people who use drugs feel that a large proportion of their peers of the same age do also, but the evidence does not support this. Alcohol is still the biggest drug of concern for young people and can lead to a range of problems including violence and risk-taking.

Activity 1 yes or no

Cut along dashed line

If a pregnant woman drinks grog, sniffs petrol or smokes, it can affect her baby

1.

It's safe to mix Gunja with tobacco

2.

You can become addicted to Gunja

3.

Gunja is natural so it's safe to smoke

4.

It's risky for people my age to use Gunja

5.

Having a bong and some beers together is ok because they are both the same type of drug

6.

You can drive better after smoking Gunja

7.

Greening out means a person has smoked too much and feels sick

8.

Activity 1 answers

Reverse side of previous page cards

YES. Drugs can pass through the woman's placenta and lead to small, unhealthy babies or long-term problems for the child

1.

NO. Mixing tobacco in means added tar, poisons and lung damage. You can also get addicted to smokes

2.

YES. This means you end up needing more of it to get stoned

3.

NO. Gunja has active ingredients that can affect your brain. It can also be sprayed with chemicals and fertilisers

4.

YES. Your brain grows until your early to mid 20s and young people are more likely to get addicted than adults

5.

NO. Smoking Gunja is just like drinking grog and makes it harder to concentrate and react on the road

7.

YES. Smoking too much can make you feel dizzy and sick, your skin may even go pale or 'green'

8.

Activity 1 yes or no

Cut along dashed line

Sniffing petrol can lead to crime, isolation from your family and problems in the community

9.

Inhaling/sniffing drugs like glue, paint or petrol is ok because people use them every day at work or school

10.

Using Gunja increases your interest in sex

11.

More young people die from alcohol and tobacco in Australia, than from illegal drugs like heroin, Gunja or speed

12.

Gunja gives you more energy

13.

Most teenagers in Australia use Gunja

14.

Gunja can make bad feelings like sadness and loneliness worse

15.

Being drunk or stoned makes you more likely to take risks – like driving a car while under the influence or having sex without a condom

16.

Activity 1 answers

Reverse side of previous page cards

NO. These drugs are poisonous and sniffing them can lead to damage of the kidneys, heart and brain

10.

YES. Research shows that sniffing doesn't just affect users but the whole community due to violence, crime, and people getting sick or injured

9.

YES. Tobacco and alcohol kill more young people, however, all drugs can be dangerous

12.

NO. Smoking cannabis can make you less interested in sex and interfere with a woman's period and a man's sperm

11.

NO. According to a survey of Australian students, most 17 year olds have never tried Gunja

14.

NO. Gunja slows down your body and can make you feel lazy

13.

YES. Drugs make it harder to think clearly and consider dangers

16.

YES. Using Gunja can 'exaggerate' your feelings and make you feel more sad or lonely

15.

Activity 1 yes or no

Cut along dashed line

Using Gunja can make you better at school work

17.

Smoking Gunja exposes a user to three times more tar than a cigarette (smoke)

18.

People who use Gunja are more likely to get in trouble with the law

19.

Males, people who live in rural or remote locations and Aboriginal and Torres Strait Islander Peoples are more at risk of suicide

20.

If you are worried about a mate and ask them if they have thought about suicide, it will put the idea in their head

21.

Having a psychosis means seeing things and hearing things that are not really there

22.

Eating junk food, vomiting and having a shower will help get rid of grog from your body faster

23.

Amphetamine drugs like 'speed', 'base' and 'ice' speed up your heart rate

24.

Activity 1 answers

Reverse side of previous page cards

YES. When people use a joint or bong they tend to puff on it harder and longer than a cigarette, meaning they do more damage to their lungs

18.

NO. Gunja makes it harder to concentrate and can make you feel lazy and unmotivated

17.

YES. These groups are more at risk but that does not mean they will choose to take their own lives. Getting help early by speaking to someone can help to reduce the risk

20.

YES. Gunja is illegal across Australia- get caught and you can have trouble finding jobs or travelling later on

19.

YES. Sometimes drugs make a person have a psychosis or 'freak out' and this can last for several hours. Keep them calm in a quiet place and let them know they will feel better soon and the symptoms will pass

22.

NO. Research shows it's OK to ask people about suicide and you won't put the idea in their head

21.

YES. These are called 'stimulants' as they make your heart beat faster and increase your alertness. They can also make you feel stressed or paranoid

24.

NO. The only thing that works to get rid of grog from your body is time

23.

Cut along dashed line

No

Yes

Unsure?

Activity 1 answers

Reverse side of previous page cards

Activity 1 Additional information for Teachers

These answers have more detail than what is written on the back of the cards

1. **If a pregnant woman drinks grog, sniffs petrol or smokes, it can affect her baby**
   YES. Research indicates smoking any substance during pregnancy can lead to lower birth weight babies and in rare cases premature birth, miscarriage and stillbirth. Substance use during pregnancy can also lead to developmental delays and behavioural issues later in life.

2. **It's safe to mix Gunja with tobacco**
   NO. There is no safe way of using cannabis. Many people who smoke cannabis in Australia mix it with tobacco, claiming it is cheaper or burns more easily. This means the person is also exposed to all the health risks associated with smoking tabacco, such as lung cancer, heart disease and respiratory problems. They are also increasing their risk of becoming addicted to nicotine/cigarettes.

3. **You can become addicted to Gunja**
   YES. Around 1 in 10 people who try Gunja become addicted to it. This means they need Gunja to function every day and to do normal activities. The risk of becoming addicted increases the younger you start smoking and the more frequently you smoke. If you smoke every day you have about a 1 in 2 chance of becoming addicted.

4 **Gunja is natural so it's safe to smoke**
   NO. Some people think that because cannabis is a plant, it is safe to smoke. These days cannabis in Australia is mostly grown hydroponically, meaning indoors under lights. Cannabis growers may also add things like pesticides and fertilisers to their crops to enhance growth. People have also been known to add dangerous substances to cannabis to make it heavier to increase their profits. Fungi and mould may also be present. As cannabis is illegal there are no health checks or regulations on plants grown and therefore no guarantees about the safety of products a person ends up smoking.

5 **It's risky for people my age to use Gunja**
   YES. Studies have shown that if a young person uses cannabis early in life (before the age of 16 years) and for a long period of time, it can lead to a number of problems. Cannabis can impact young people's memory, attention and learning, as well as leading to poorer school performance, criminal activity and an increased risk of mental health problems.

6. **Having a bong and some beers together is ok because they are both the same type of drug**
   NO. Alcohol and cannabis (for the most part) are both classified as depressants – drugs that slow down the central nervous system. Taking more than one drug/alcohol at the same time puts a strain on the body and gives the brain mixed signals. This increases the risk of things like feeling sick, passing out, headaches and confusion. Taking two of the same type of drug (e.g. depressants) makes your heart and lungs struggle even harder to keep working efficiently.

7. **You can drive better after smoking Gunja**
   NO. While some people think that driving while stoned makes them more cautious, cannabis affects a person's judgement, decision-making skills, and their ability to react quickly and pay attention to the road. Latest evidence suggests that driving while stoned increases the risk of having a crash by 200–300% (2–3 times more likely than if not stoned).

8. **Greening out means a person has smoked too much and feels sick**
   YES. 'Greening out' is a term that refers to the situation where someone feels very sick after smoking cannabis. If this happens, users can go pale or 'green' and feel sweaty, dizzy and nauseous. Mixing cannabis with alcohol appears to make the risk of 'greening out' greater.

9. **Sniffing petrol can lead to crime, isolation from your family and problems in the community**
   YES. Research on petrol sniffing in some communities has found that many chronic sniffers were socially isolated and responsible for high crime rates. Parents of users have reported feeling helpless to stop the use, while at the same time they often have to look after a child who is sick or injured because of sniffing.

10. **Inhaling/sniffing drugs like glue, paint or petrol is ok because people use them every day at work or school**
    NO. Any substance can be dangerous if used the wrong way. People may sniff these products for a short 'buzz' feeling or sense of excitement. These products often referred to 'volatile substances' are not meant to be inhaled and can lead to loss of consciousness, numbness, dizziness, chest pain, nausea and in the long-term, permanent damage to the brain, liver and kidneys.

11. **Using Gunja increases your interest in sex**
    NO. Cannabis use can decrease sex drive. In males, cannabis is thought to decrease sperm quality and testosterone levels, as well as disrupting the menstral cycle in females.

12. **More young people die from alcohol and tobacco in Australia than from illegal drugs like heroin, Gunja or speed**
    YES. Legal drugs, such as alcohol and tobacco, kill more people than illegal drugs, however, both have their dangers. Tobacco kills far more people each year than alcohol, but alcohol tends to kill in younger years when deaths from motor vehicle accidents, other accidents and violence are more common.

Activity 1 Additional information for Teachers

13. **Gunja makes bad feelings like sadness and loneliness worse**
Yes. Using Gunja tends to exaggerate existing moods so if a person smokes when they feel sad or depressed these feelings can become intensified. Drug use may temporarily mask the symptoms of depression or other mental health problems but if the problem remains untreated the symptoms will return.

14. **Most teenagers in Australia use Gunja**
NO. Cannabis is the illegal drug most likely to be used by young people but only 14% (on average) of Australian high school students aged between 12–17 years have used cannabis at some stage in their life. The use of cannabis increases with age. Three percent of 12 year olds reported ever having used cannabis compared to 26% of 17 year olds. This means that most 17 year olds (74%) have never tried cannabis.
Source: Australian School Students Alcohol and Drug Survey 2008, current as of publishing

15. **Gunja can make bad feelings like sadness and loneliness worse**
YES. Using Gunja tends to exaggerate existing moods so if a person smokes when they feel sad or depressed these feelings can become intensified. Drug use may temporarily mask the symptoms of depression or other mental health problems but if the problem remains untreated the symptoms will return.

16. **Being drunk or stoned makes you more likely to take risks – like driving a car or having sex without a condom**
YES. Some people use alcohol and cannabis to give them more confidence or take risks. However, risks can be serious, like having sex without a condom which puts both partners at risk of contracting sexually transmitted infections like Chlamydia or genital warts as well as unplanned pregnancy.

17. **Using Gunja can make you better at school work**
NO. Using cannabis affects a person's perception, attention and concentration. Some people believe using cannabis makes them more creative but there is little or no evidence to support this. When people are stoned they often lack motivation and find it hard to follow through with plans, so even the best ideas could be wasted when using cannabis.

18. **Smoking Gunja exposes a user to three times more tar than a cigarette (smoke)**
YES. When people smoke cannabis they tend to puff on a joint or bong harder and for a longer period of time than a tobacco cigarette. They also hold it in their lungs for longer before breathing the smoke out. Because of this, cannabis users get about three times more tar and carbon monoxide into their lungs and body than when smoking tobacco cigarettes.

19. **People who use Gunja are more likely to get in trouble with the law**
YES. Cannabis use is related to higher levels of delinquency and crime, although other factors may be involved too. Of those in Juvenile Justice settings, almost all have used cannabis. Criminal records can prevent employment and travel opportunities and lead to stigma.

20. **Males, people who live in rural or remote locations and Aboriginal and Torres Strait Islander people are more at risk of suicide**
YES. These people are at greater risk of suicide than others in the community so it is important that they seek help early should they experience mental health issues.

21 **If you are worried about a mate and ask them if they have thought about suicide, it will put the idea in their head**
NO. Asking about suicidal intention won't make someone take this action. If a person admits to suicidal intentions encourage them to get help and don't agree to keep anything secret. If they have a suicide plan in place, get help immediately.

22 **Having a psychosis means seeing things and hearings things that are not really there**
YES. A psychosis is a split from reality and may include symptoms such as agitation, paranoia, odd beliefs and altered perceptions. Drug-induced psychoses are usually temporary and symptoms will subside as the drugs are processed by the body. Severe cases may require medical attention such as hospital treatment.

23 **Eating junk food, vomiting and having a shower will help get rid of grog from your body faster**
NO. Guidelines recommend allowing about an hour per 'standard drink' to be processed by the liver, although this may be influenced by gender (females generally have more body fat), metabolism, body size, food eaten, medications and a range of other factors. Nothing sobers up a person apart from time.

24 **Amphetamine drugs like 'speed', 'base' and 'ice' speed up your heart rate.**
YES. Speed, base and ice are amphetamine products each with differing potencies. Agitation, sweating, heart palpitations and paranoia can result from high doses.

Activity 2 Body Trace

Background

This activity is suitable for lower literacy groups or younger students and provides students with opportunities to identify how drugs affect various parts of the human body.

Equipment/preparation

Large sheets of butcher's/tracing paper, coloured markers or pencils. This activity could also be done outdoors – use a plastic sheet to protect the students' clothing from dirt.

Duration

15 minutes.

Gender consideration

Students may benefit from this activity if groups are split by gender.

Implementation

1. Select one student to lie on their back on a large sheet of paper on the classroom floor and have another student trace their outline.
2. Ask students to consider which parts of the body could be damaged/affected by Gunja, grog or other drugs and how?
3. Have students indicate on the body trace where that body part is by drawing a picture or writing a label.

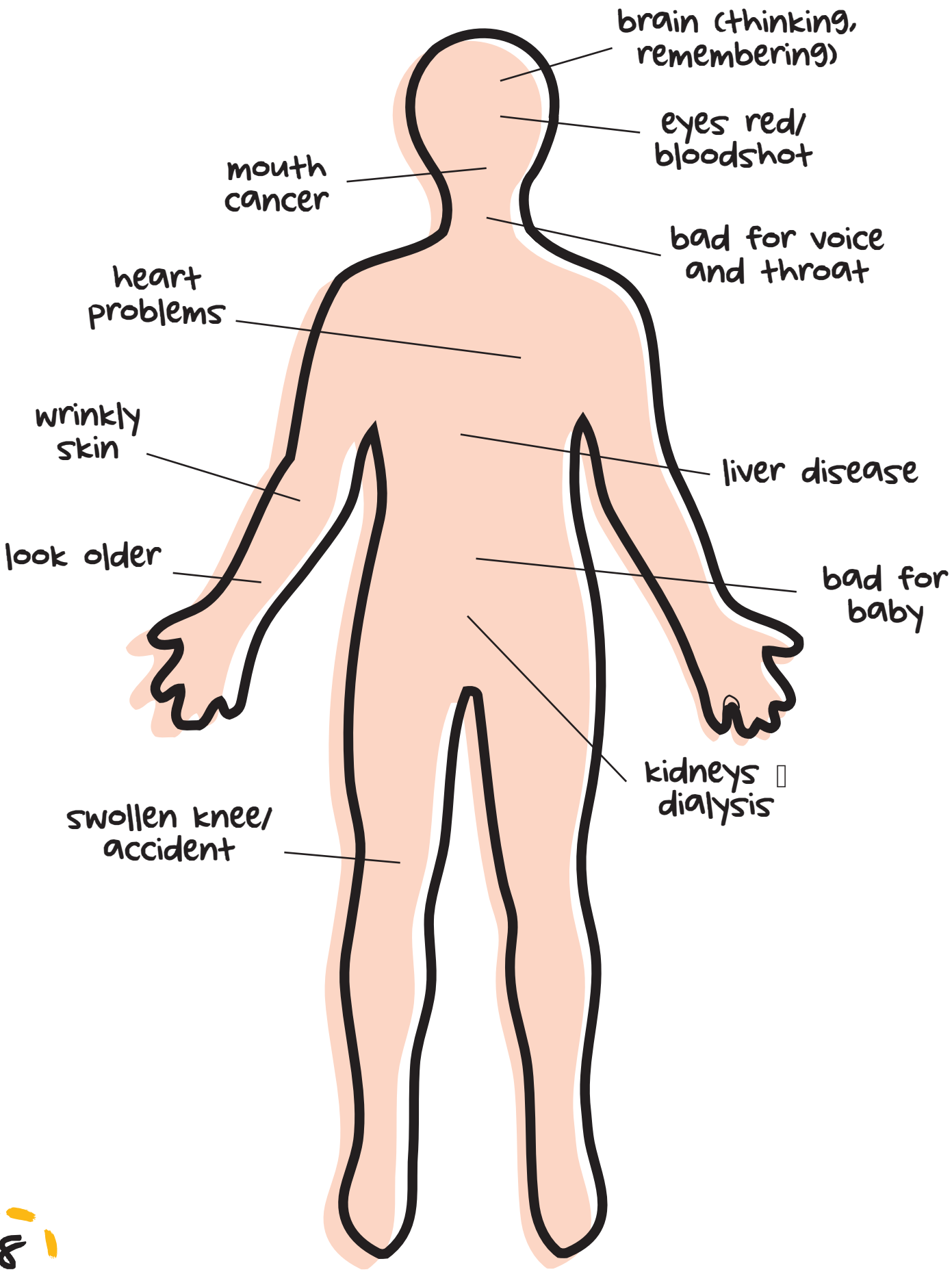
Some examples include:

- Brain – physical damage/ thoughts and remembering
- Eyes – bloodshot eyes after smoking, vision problems
- Nose – damaged nose from snorting or sniffing drugs, nose bleeds
- Mouth – mouth, tongue and throat cancer are more likely for smokers, people sometimes say things they regret when drinking grog
- Heart – smoking cigarettes and drinking a lot of grog increases the risk of having a heart attack and is bad for blood circulation
- Lungs – increased risk of lung cancer and more likely to get coughs and have breathing problems
- Liver – grog can damage your liver permanently
- Kidneys – drinking too much grog can mean needing dialysis
- Skin – premature ageing and wrinkles
- Legs/knees – falling over and accidents
- Uterus – drugs can pass through the placenta to an unborn baby and make them small and unhealthy

Facilitator summary

Cannabis and other drugs affect our thoughts, behaviours and brain functions as well as the organs in our bodies, that is, both our physical and mental health. While some drugs can be beneficial and help people who are sick, any drug has the potential to do harm. Illegal drugs such as Gunja have been made illegal in an attempt to protect people from harming themselves.

Activity 2 Body Trace



Activity 3
Ranking situations

Background

These situations involve hypothetical scenarios where mental health issues and drug use are present. The most important part of this activity is not the ranking young people assign to the situations but the discussion and sharing of opinions.

Equipment/preparation

Situation cards need to be cut out of the resource pack. Two sizes are available to suit your needs. Facilitators may laminate these cards if they wish.

Duration

10 to 20 minutes.

Implementation

1. Use the large A4 number signs 1–5 to set up a scale/continuum at the front of the classroom (or in the available space).
2. The facilitator selects a situation from the pack and reads it aloud to the group/whole class.
3. Ask students to move to/stand next to the number on the continuum that best fits their level of concern about the situation with 1 being least concerning/the person doesn't need help and 5 being most concerning/needs help now.
4. Encourage discussion by asking individual students to discuss why they ranked each scenario as they did.
5. There are 30 scenarios available and you may choose as many or as few as you like.
6. Come together as a whole class and discuss which situations were most concerning and least concerning, attempting to identify themes.

Alternative A

Students may also work in pairs to rank their scenarios. An A4 template with the numbers 1–5 listed vertically on a black-line master is provided for this purpose. Pairs can then join other pairs to rank situations as groups of four. Ask the class for examples of scenarios they rated as less serious (1) through to most serious (5) and ask them to give reasons for their choices.

Alternative/Extension B

After familiarising students with the existing cards, have students work individually or in pairs to come up with their own scenarios and give them to other students to rank. Blank templates are provided and can be photocopied. Their stories should be imaginary, not real.

Facilitator summary

Summarise to students that there are different levels of concern about young people who use drugs and have mental health problems, dependent on a range of factors.

Activity 3 Ranking situations

Cut along dashed line

Your friend prefers to smoke bongs at home rather than go out with friends

When your friend gets drunk she sends stupid texts to people. She regrets it the next day but keeps doing it

The other night your mate went to a party and drank lots of grog then pulled a bong. He vomited all night and felt sick all the next day

Your friend hardly talks to you anymore. He doesn't go to local footy matches like everyone else. When you see him he looks alone and miserable

Your mate told you he smokes Gunja at home every day before school

Your friend keeps getting tagged in photos on Facebook where she looks drunk or wasted

Your brother got in trouble with the police for getting in a fight. They also found a pipe with some leftover Gunja in his pocket

You see some paint and spray cans in your friend's school bag and think they have been sniffing them

Activity 3 Ranking situations

Cut along dashed line

Since your friend started smoking Gunja a few months ago she has been really on edge and worries a lot more

Your mate yells at the teacher in class and gets very aggressive

Your mate used to be easy going but now he is grumpy and snappy and you don't like hanging around him anymore

On the weekend your friend smoked Gunja and flipped out for hours. She said she was hearing voices and seeing things

Your little sister goes out every Saturday night and drinks vodka

Your mate got really drunk and stoned and had sex with a girl without a condom

Your friend has been shoplifting from the local store and selling the goods to buy Gunja

Your mate cheated on her boyfriend when she got really drunk on the weekend and now she feels bad

Activity 3 Ranking situations

Cut along dashed line

Your mate says he smokes bongs because he can't cope with life

Your friend smokes Gunja at lunch behind the shed then has days off and doesn't come to school

Your mate's uncle dies and he starts smoking Gunja to cope. He said he likes it and will do it again

A friend jumped in front of a car to see if the driver would stop. He takes crazy risks when he is on drugs. Luckily the driver stopped

Your friend lies to her parents and says she is watching DVDs at your house but you are all going to a party instead

You are at a party and hook up with a girl but she is really wasted

You and your friends get into a car with someone who has been drinking

You steal some grog from your parents stash and give it to your friends at a party

Activity 3 Ranking situations

Cut along dashed line

Your football coach finds some gunja in your sports bag and threatens to tell your family

You keep getting headaches from smoking gunja and can't concentrate at school

Your friend is upset about his Aunty smoking Gunja

Your friend is so hungover from the weekend they skip school on Monday

Cut along dashed line

Not worried

Cut along dashed line

Cut along dashed line

3

Middle/ unsure

Cut along dashed line

5

Very worried
needs help

How worried are you about the person in your scenario?
Place card next to a number from 1 to 5

not worried

middle/ unsure

Very worried needs help

Activity 3 Ranking situations

Cut along dashed line

Make your own!

Template for **alternative B**

Cut along dashed line

Your friend prefers to smoke bongs at home rather than go out with friends

When your friend gets drunk she sends stupid texts to people. She regrets it the next day but keeps doing it

Cut along dashed line

The other night your mate went to a party and drank lots of grog then pulled a bong. He vomited all night and felt sick all the next day

Your friend hardly talks to you anymore. He doesn't go to local footy matches like everyone else. When you see him he looks alone and miserable

Cut along dashed line

Your mate told you he smokes Gunja at home every day before school

Your friend keeps getting tagged in photos on Facebook where she looks drunk or wasted

Cut along dashed line

Your brother got in trouble with the police for getting in a fight. They also found a pipe with some leftover Gunja in his pocket

You see some paint and spray cans in your friend's school bag and think they have been sniffing them

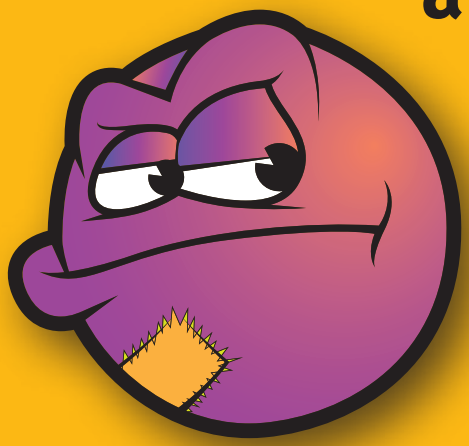
Cut along dashed line

Since your friend started smoking Gunja a few months ago she has been really on edge and worries a lot more

Your mate yells at the teacher in class and gets very aggressive

Cut along dashed line

Your mate used to be easy going but now he is grumpy and snappy and you don't like hanging around him anymore



On the weekend your friend smoked Gunja and flipped out for hours. She said she was hearing voices and seeing things

Cut along dashed line

Your little sister goes out every Saturday night and drinks vodka

Your mate got really drunk and stoned and had sex with a girl without a condom

Cut along dashed line

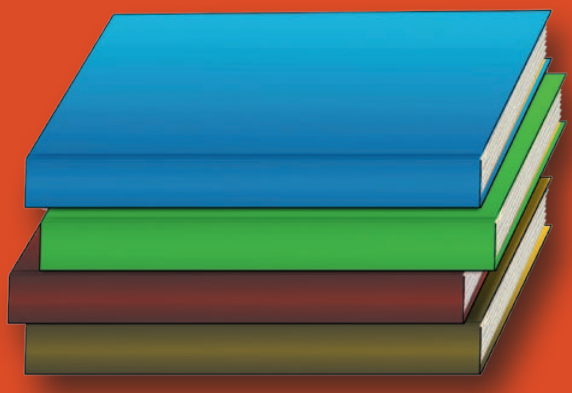
Your friend has been shoplifting from the local store and selling the goods to buy Gunja

Your mate cheated on her boyfriend when she got really drunk on the weekend and now she feels bad

Cut along dashed line

Your mate says he smokes bongs because he can't cope with life

Your friend smokes Gunja at lunch behind the shed then has days off and doesn't come to school



Cut along dashed line

Your mate's uncle dies and he starts smoking Gunja to cope. He said he likes it and will do it again

A friend jumped in front of a car to see if the driver would stop. He takes crazy risks when he is on drugs. Luckily the driver stopped

Cut along dashed line

Your friend lies to her parents and says she is watching DVDs at your house but you are all going to a party instead

You are at a party and hook up with a girl but she is really wasted

Cut along dashed line

You and your friends get into a car with someone who has been drinking

You steal some grog from your parents stash and give it to your friends at a party

Cut along dashed line

Your football coach finds some gunja in your sports bag and threatens to tell your family

Your friend is upset about his Aunty smoking Gunja

Cut along dashed line

You keep getting headaches from smoking gunja and can't concentrate at school

Your friend is so hungover from the weekend they skip school on Monday

Activity 3 Ranking situations

Cut along dashed line

Make your own!

Activity 4 Stuck in the Mud

Note

Activities 6 and 7 both examine the topic of 'mates helping mates.' Both options are given so facilitators have the flexibility to choose which activity best meets the needs of their class.

Background

This activity is suitable for younger students and allows them to move outdoors. This simple game helps young people realise it is often a natural response to want to help their peers. The activity acts as an ice breaker for a discussion about mates helping each other through difficult times.

Equipment/preparation

Outdoor space, whiteboard for brainstorming if desired.

Duration

30-40 minutes total.

Gender consideration

Students may benefit from this activity if groups are spit by gender.

Implementation

Part One:

Stuck in the Mud

1. This activity works best outdoors. Select one student to be 'the chaser'. This student has to run and 'tip' other students who then become frozen to the spot and must leave their legs slightly apart with enough space for another student to crawl through.
2. Other students who have not been tipped may crawl through the frozen students' legs to 'free' them, however if they get tipped by the chaser they also become frozen.
3. The aim is to avoid being tipped by the chaser and to free other 'frozen' students. There is no safe area or 'bar'.
4. The game ends when all students except 'the chaser' are frozen or after an arbitrary period of time determined by the facilitator.
5. The facilitator may select different chasers throughout the game.
6. To 'amp up' the game select multiple 'chasers' at the commencement of the game so the risk of getting tipped is higher for students i.e. there are increased barriers to helping free their mate.

Some barriers to young people helping their mates include:

- They believe it is none of their business
- They believe it is not their responsibility
- They think their friend may get angry with them or not want to be their friend any more
- The friend won't admit they have a problem
- They are unsure what to say or who can help
- They believe that if they raise the issue it could get worse
- They have their own problems to worry about
- They believe that if their friend wanted help they would ask for it

Adapted from MAKINGtheLINK Promoting Help-Seeking for Cannabis Use and Mental Health, Orygen Youth Health for NCPIC.

Activity 4 Stuck in the Mud

Part Two: Discussion about Helping Mates

Discuss with the group that it is natural to want to help your friends out when they are stuck, just as they did in the game. When young people experience problems, like the scenarios in the previous activity about drugs and mental health, they often don't know what to do or who to ask for help. Friends are in a great position to help out their mates but often it can be quite scary as they don't know what to say or do and are scared of the consequences of helping.

1. Ask the class to think of 'barriers' or reasons why people might not want to help their friends (see the breakout box on barriers and benefits of help-seeking). Use some of the scenarios students determined as the most serious in activity 5 'ranking situations' as prompts. What were the barriers to helping their mate in Stuck in the Mud?
2. Now ask the class what are the benefits of helping a friend or talking to them if you are worried about them?
3. Brainstorm as a group how young people could approach a mate they wanted to help and what they could say. What resistance might they meet and how could they overcome that?
4. Is it part of Aboriginal and Torres Strait Islander culture to help out mates?
5. How have students helped a friend in the past or how has a friend helped them? How did their friends feel after being freed in stuck in the Mud? Did everyone work alone or did people pair up to help a stuck friend?

Some benefits of young people helping their mates include:

- By letting them know you are worried about them you affirm you are their friend and care about them
- They might feel lonely and confused and not sure what to do
- They might not realise they have a problem
- You hope they would do the same for you
- You may be able to get them to seek professional help or support
- You can help solve or reduce their problems by sharing your ideas
- They may have been waiting for a friend to ask them and be really grateful for your support

Adapted from MAKINGtheLINK Promoting Help-Seeking for Cannabis Use and Mental Health, Orygen Youth Health for NCPIC.

Extension

In small groups ask students to come up with a short role play and act it out to the rest of the class. They should consider:

- What is the problem their friend is experiencing? How serious is it?
- What are some reasons why they would consider helping their friend and reasons why they would avoid helping?
- How they decide to approach their mate and what their reaction is
- Who they decide is the best person for their mate to go to for help – professional or otherwise
- What they think might happen when they chat to the helper

Facilitator Summary

The most important point to get across to young people is that the benefits of helping a mate outweigh the barriers. Even though young people may be scared of their friend's reaction and not quite sure what to do or say, their friend will most likely appreciate the support. As a result, they can come up with a potential solution together, such as seeking help from an older family member, teacher, or health professional.

Activity 5 The Hot Seat

Background

Young people often speak to each other about their problems rather than discussing them with professionals such as counsellors or social workers. It can be daunting for a young person to discuss personal problems they are having themselves or to approach a friend they think may be experiencing problems. This activity explores reasons for and against helping a mate and provides young people with some simple tips in how to approach the situation and where and when to get professional help.

Equipment/ preparation

Scenarios 1 and 2 and the accompanying scripts.

Duration

20 minutes.

Implementation

1. Ask one student to sit in a chair, 'The Hot Seat', facing the class.
2. Ask two more students to sit either side and assume the roles of 'for' and 'against'. They should read from their script. The roles are to represent the thoughts of the students in 'The Hot Seat'.
3. The teacher reads out the first scenario and then asks "What would you do next?"
4. When the students have finished reading their scripts, ask the student in 'The Hot Seat' to decide what they would do based on the 'for' and 'against' arguments and explain their answer.
5. Ask the class if they agree with the person in 'The Hot Seat'.
6. Repeat with scenario 2 this time choosing different students to play the three roles.

Confidentiality and Duty of care

One of the barriers to young people seeking professional help (e.g. from a nurse or school counsellor) is that they may be worried about the confidentiality of what they tell the professional and who else will find out about their situation.

Many professionals have a legal duty within their workplace, to keep information told to them by patients or clients private (confidential). These professionals can only tell other people the information if:

- the client gives permission
- the client is at risk of harming themselves (e.g. suicide) or harming someone else
- If there is a court order to do so.

Examples of helpers bound by professional confidentiality include nurses, counsellors, health workers, social workers and doctors.

Teachers are bound by a 'duty of care' which means they have a responsibility to make sure students are safe, so if they think a student is at risk of harm they have to report it. This includes illicit drug use. Family and friends do not have these responsibilities.

Encourage the young person to ask the professional helper questions before they share any information with them such as:

- Will you ask my permission before you share my private information with anyone?
- If you do tell other people my personal information, who will you tell and what will you say?

Adapted from MAKINGtheLINK Promoting Help-Seeking for Cannabis Use and Mental Health, Orygen Youth Health for NCPIC.

Activity 5 The Hot Seat

Extension

In small groups ask students to come up with a short role play and act it out to the rest of the class. They should consider:

- Who needs help and why?
- How would they approach their mates and what would they say?
- What resistance might they meet and how could they overcome that?
- If they wanted professional help who would be a good choice and where would they get help?
- What might a professional helper say and do and what may be the outcome?

Facilitator Summary

It is important to highlight to students that the benefits of helping a mate outweigh the barriers. Even though young people may be scared of their friend's reaction and not quite sure what to do or say, their friend will most likely appreciate the support. Together they can then come up with a potential solution, such as seeking help from an older family member, teacher, or health professional.

Scenario One: What would you do next?

You are worried about your mate who isn't turning up to school much anymore. Whenever you see him he is stoned and talks about getting his next lot of Gunja. He is hanging out with older kids and stealing to pay for the drugs. He always seems paranoid that people are watching or following him. The other day he said he wouldn't mind if it just all ended. You tried to ask him what he meant but he just laughed it away.

What would you do next?

FOR	AGAINST
Let him know you're his mate and you care	It's not your problem, why bother
I would want help if it was me	He can ask for help if he wants it
It's worth a try – you've got nothing to lose	He might get angry or stop being your friend
I'd feel guilty if something happened to him	You tried to talk already and he just laughed
It will get worse if he doesn't get help	It's his own fault for smoking Gunja

Activity 5 The Hot Seat

Scenario two: How could you help her?

One of your friends has been drinking way more than anyone else when you all hang out together. She ends up vomiting nearly all the time and sometimes disappears and you don't know if she is safe. She keeps losing her phone and wallet because she is so drunk. She confessed to drinking by herself at home when she is bored or lonely. She has stopped playing soccer on the weekends and doesn't care about what she looks like anymore. Her family is starting to notice too and are worried about her.

How could you help her?

FOR	AGAINST
I could just let her know I'm worried	You don't know what to say, you're not a doctor
I think talking to a teacher or the school nurse could help	Don't be a dobber, she won't trust you again
I could go to the teacher with her	That would look like you were ganging up on her
I could talk to her Aunty about it	She probably won't listen to you anyway
I could tell someone in her family, they could help too	That could make it worse
She's my friend and I need to help her, that's an important part of my culture	It's her problem, not yours

Activity 6 People in My Community

Background

This activity is to get students thinking about who lives and works in their community that they may be able to go to for advice or a chat. It encourages students not just to think of 'professionals and experts' but of friendly faces and people they already have a relationship with or feel comfortable talking to.

Equipment / preparation

Print out the four examples of community members on A3/A4 to give to students, laminating optional.

Duration

Allow 20 minutes.

To implement

1. Pick four engaged students to give the printed community member profiles to and ask them to read through.
2. Generate a short class discussion about relationships – what is a relationship? Who do we have relationships with? (family, girlfriends, neighbours) and what makes a good relationship? (trust, authority, respect).
3. Move the discussion onto 'community' – ask students who their community is made up of e.g. school students, nurses, police, teachers, business owners, religious leaders, politicians etc. Ask for a volunteer to write these answers up on the board.
4. Ask students to think about who they currently have a relationship with of the people listed on the board and circle/ highlight these.
5. Ask the four students who have read the community member profiles to summarise them for the class. What did you find interesting or most important about the person? Would you want to talk to them? Then ask students to put these profiles up in different areas of the room.
6. Ask the class if they think there is anybody on the board or among the four example profiles who they don't think would be appropriate to talk to and why? (this is important to generate a discussion about personal safety e.g. unknown to them, uncomfortable, personal risk).
7. Ask students to move to the profile of the person they would feel most comfortable talking to about the following scenarios and generate discussion about their choices:
   a) Advice on planning a camping trip
   b) Help tracing their family tree
   c) Fixing a car/motorbike
   d) A personal problem they or a friend is having.

Alternative

Initiate a class discussion about people in your community and their role. The teacher can draw a map of the community on the board and mark where each of these people live or work or what they could be good to chat to about.

Facilitator summary

Remind students that there are different people in the community who may not be medical/counselling professional helpers but are good to share problems with and have a yarn to. Not everyone will feel comfortable talking to the same people in the community and different people will be more appropriate to talk to about different topics and concerns. Students should be reminded to exercise common sense and keep their personal safety in mind. Students should only talk to people they feel comfortable with or have a relationship with.

Activity 6 People in My Community

Name: Merv Jackson

What they do: Runs local fishing shop, sells bait, fishes a lot

Where: In town, main street

Favourite footy team: Dragons

Best recipe they cook/favourite food: Grilled snapper with lemon

Interests/hobbies: Fishing, watching footy, playing footy, boats, pet rabbits

Good to talk to about: Fishing, how to run a business, cooking healthy food

Favourite holiday spot: South West Rocks, NSW

Activity 6 People in My Community

Name: Ros

What they do: Alcohol and other drug worker for young people. Helps young people with drug problems

Where: Mission clinic, Mayfair Street. Open till 5pm, free for under 16s

Favourite footy team: West Coast Eagles, also loves Matildas soccer team

Best recipe they cook/favourite food: Homemade lasagne

Interests/hobbies: Soccer, helping people who use grog, gunja and other drugs

Good to talk to about: Drug issues, how to cope with problems

Always wanted to: Play soccer for Australia

Activity 6 People in My Community

Name: Aunty Joy

What they do: School Canteen Manager

Where: In the canteen and also has a Facebook page

Favourite footy team: Brisbane Lions

Best recipe they cook/favourite food: Pizza with the lot!

Interests/hobbies: Aboriginal people's culture, loves reading history books and painting

Good to talk to about: Culture and Aboriginal people's issues

Activity 6 People in My Community

Name: Bill Cruise

What they do: Service Station Attendant

Where: Caltex Servo

Favourite footy team: Manchester United (Premier League), Port Adelaide (AFL)

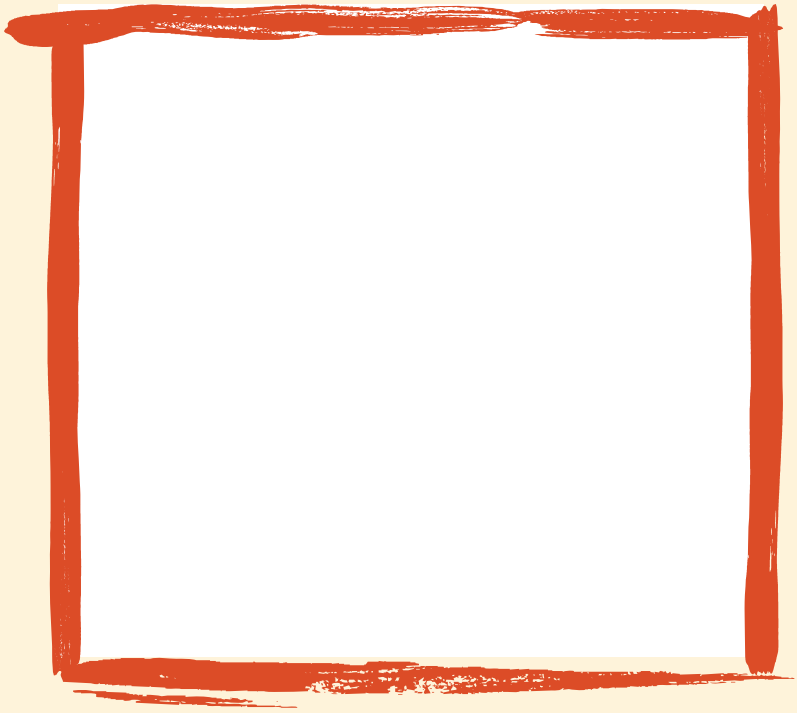
Best recipe they cook /favourite food: I leave the cooking to my wife

Interests/hobbies: Fixing up old cars (Datsuns), painting, playing cards

Good to talk to about: Datsun 1600s, history of our town, mechanics

What would you do if you won lotto: Retire to Mandurah, WA, with the wife and kids

Activity 6 People in My Community



Draw a picture or paste a photo of your community member here

Name:

What they do:

Where:

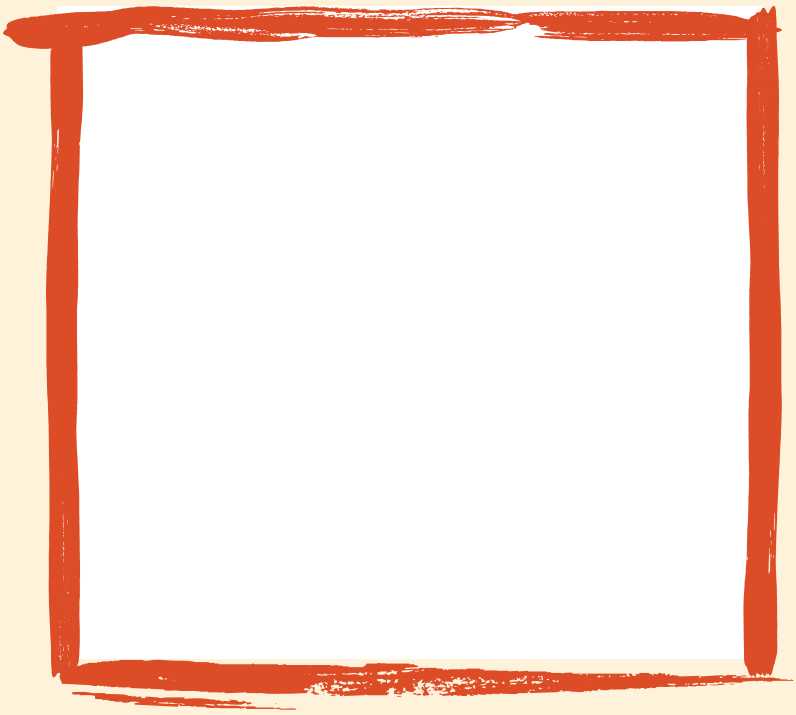
Favourite footy team:

Favourite food:

Interests/hobbies:

Good to talk to about:

Activity 6 People in My Community



Use this page as a template to translate into local languages

Activity 7 Role Models

Background

This activity aims to help young people identify who would be a good role model or helper for a particular situation. The concepts of trust, leadership, role models, and different helpers for different situations are explored. At the end of this activity each student should have identified a number of helpers that they would feel comfortable going to for help with their problems. Students should be able to visualise an 'overlap' in who they chose for what problem and therefore identify helpers who would be good to talk to about multiple issues. Brainstorming as a group will also give students ideas they may not have come up with alone.

Equipment/preparation

White board and coloured markers, list of helpers, list of problems, blue tack and post-it notes.
Plastic hoops can be used if the activity is conducted outdoors.

Implementation

1. Draw a flower with 7 petals and a centre circle on the board. Label the petals as follows:
   • Body, • Community, • Family, • School, • Peers, • Spirit (feelings and emotions), • Headspace (thoughts, mind).
2. Ask students to clarify what is meant by the terms 'spirit' and 'headspace' before commencing the activity. What do these words mean to them?
3. Ask the students to consider a simple physical problem (such as 'falling off their bike and needing stitches') and which petal of their life it affects.
4. Ask a student to write this problem onto a post-it note (or draw a picture) and stick it to the petal on the board it corresponds with (presumably body).
5. Ask students to name helpers who could help with 'body' problems and write their responses with a whiteboard marker in the 'body' petal.
6. Repeat with a more complex problem such as 'getting bullied at school' (presumably this will affect many petals – possibly all of them).
7. Ask the students to write this problem onto a post-it note (or multiple notes) and stick onto the board in any relevant petals.
8. Following the same principal as above – ask the class who they could go to for help for this issue – going through each petal to elicit a range of answers.
9. Look for any helpers identified more than once and duplicate their names/titles in the middle circle.
10. This can be repeated with any number of the problems, although the board may start to get confusing and it is recommended to only use 2–3 examples at one time.
11. Finish with a relevant drug/alcohol/mental health problem which can be an oral discussion without further adding to the board if need be e.g. 'You are worried about using Gunja and feeling depressed and lonely'.

Alternative A

Complete this activity outdoors using plastic hoops in the same flower pattern with an overlapping centre. Write names of helpers with a stick or on pieces of paper or cardboard.

Facilitator summary

Recap that help is available for all kinds of life problems and seeking help from more than one source/person for an issue is normal and healthy. Highlight that some helpers will be good to talk to and give advice about multiple issues. Students will all seek help in different ways and from different people they trust.

Activity 7 Role Models

List of Problems

- Having a really bad earache (body)
- Finding out your friend is pregnant (friends)
- Breaking up with your girlfriend/boyfriend (body/mind/spirit)
- Doing really badly in a test/school task (school)
- You/a friend starts using drugs every weekend (friends/body)
- Getting in trouble with the cops for assault (community)
- Hearing voices in your head you don't think are real (mind/spirit)
- You have been feeling very sad for no reason (mind/spirit)
- You are worried about using too much grog (body/mind)
- You are worried about your mum being sick (family)
- A friend at school is stealing from shops (community/friends)
- Your dad has stopped talking to his brother and you are upset about it (family)
- A good friend is killed in a car accident (friends/community)
- What other problems can students come up with?

Activity 8 Song Competition

Background

This activity is a fun way for students to summarise knowledge gained throughout the program. Students can choose any style of music or draw inspiration from the NCPIC song competition CD.

Equipment/preparation

Aboriginal and Torres Strait Islander Music Competition CDs can be ordered ahead free of charge from the NCPIC website. Order well in advance to avoid disappointment. You will also need a whiteboard or paper as well as a CD player.

Duration

25 minutes.

Implementation

1. Play a selection of tracks from the music competition CD to students for inspiration. Explain that these were winning entries in a competition where Aboriginal and Torres Strait Islander Peoples were encouraged to create a song about Gunja.

   Particular tracks may be more helpful to students creating their own song.

   Track 1: Yarndi Zombies (NSW)
   Track 2: Wanna-Bees (QLD)
   Track 7: Tirkandi Inabuura Boys (NSW)
   Track 10: Give it Up (NT)

2. Ask students to recall any lyrics or themes they identified in the songs and aspects they liked/disliked.

3. Brainstorm with students what they have learned throughout the program about Gunja, grog, mental health and help-seeking. Write their responses on the board as dot points. Use prompts such as how does cannabis affect the body, what can go wrong when drinking grog and who would you to for help? You may like to flick through the previous activities for further prompts.

4. Ask students to decide the three most important points on the board as these will form the chorus.

5. Work as a class to develop the dot points into verses, you may need to change the words slightly to find patterns or create rhymes.

6. Develop a tune or rhythm for the song. Individual students can be allocated lyrics to sing or the class can sing the whole song together.

7. Incorporate musical instruments if available.

Extension

Students can enter their song into the next available NCPIC Aboriginal and Torres Strait islander Music Competition, run annually by NCPIC.

Supplementary Activity

Clearing the Smoke

Background

This activity uses an audiovisual medium to teach students about cannabis. The DVD was produced by NCPIC in 2011 as an update on the latest research and information available about cannabis. The DVD is approximately 30 minutes long and is divided into eight segments. This DVD was not designed to be shown to students, however, the two segments listed below would be suitable for interested students as an extension activity when used in the broader context of this program.

Equipment/preparation

The DVD can be ordered free of charge from the NCPIC website. Order well in advance to avoid disappointment.

Duration

15 minutes.

Implementation

Particular segments of the DVD may be more relevant to students than others;

1. Chapter Two: How Does Cannabis Work? This shows the effects of cannabis on the body and discusses the main ways people consume cannabis and the harms associated with each method.
2. Chapter Five: Is Anyone More Susceptible to Harm From Cannabis? This chapter discusses the adolescent brain and why young people are more vulnerable to cannabis harms.

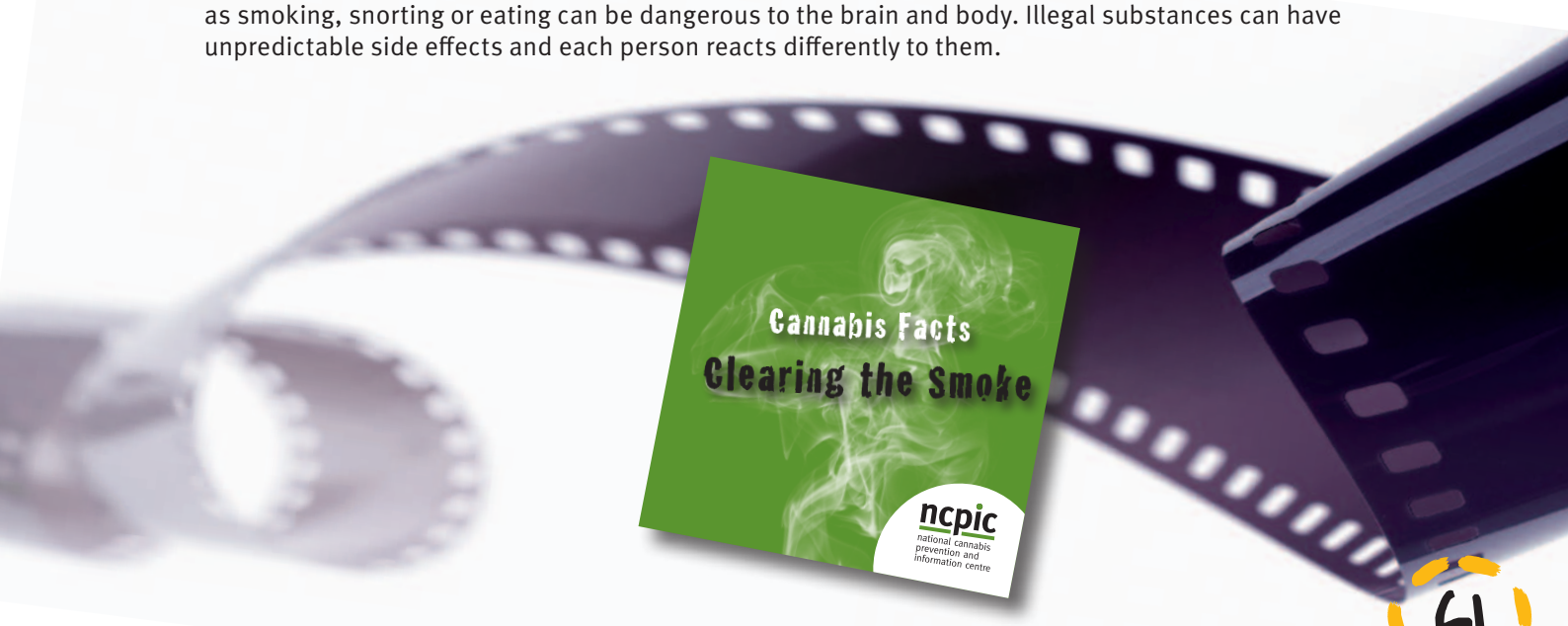
Discuss what students learned or found interesting in the DVD.

Extension

Ask students to make their own short film about an aspect of cannabis such as its effect on relationships or sporting performance. For further inspiration please see the NCPIC short film competition webpage.

Facilitator summary

Summarise to students that cannabis and other drugs are especially dangerous for young people whose brains are still developing and growing until their mid twenties. All methods of taking drugs such as smoking, snorting or eating can be dangerous to the brain and body. Illegal substances can have unpredictable side effects and each person reacts differently to them.



Supplementary Activity
Cannabis: Know the Risks
(Internet Activity)

Background

This activity involves accessing an existing online resource about cannabis that is designed to appeal to young people. In Know the Risks, students can play individually or with up to five players and must move around the virtual game board collecting prizes by answering cannabis-related questions correctly. This game was not designed specifically for Aboriginal and Torres Strait Islander young people, however, the game would be suitable for interested students as an extension activity when used in the broader context of this program.

Equipment/preparation

This activity requires students to work individually or in small groups and have access to computers and the internet.

Duration

20–30 minutes.

Implementation

Students can work independently or in groups of up to five (depending on number of computers available) to follow instructions and collect all five tokens to complete the game.

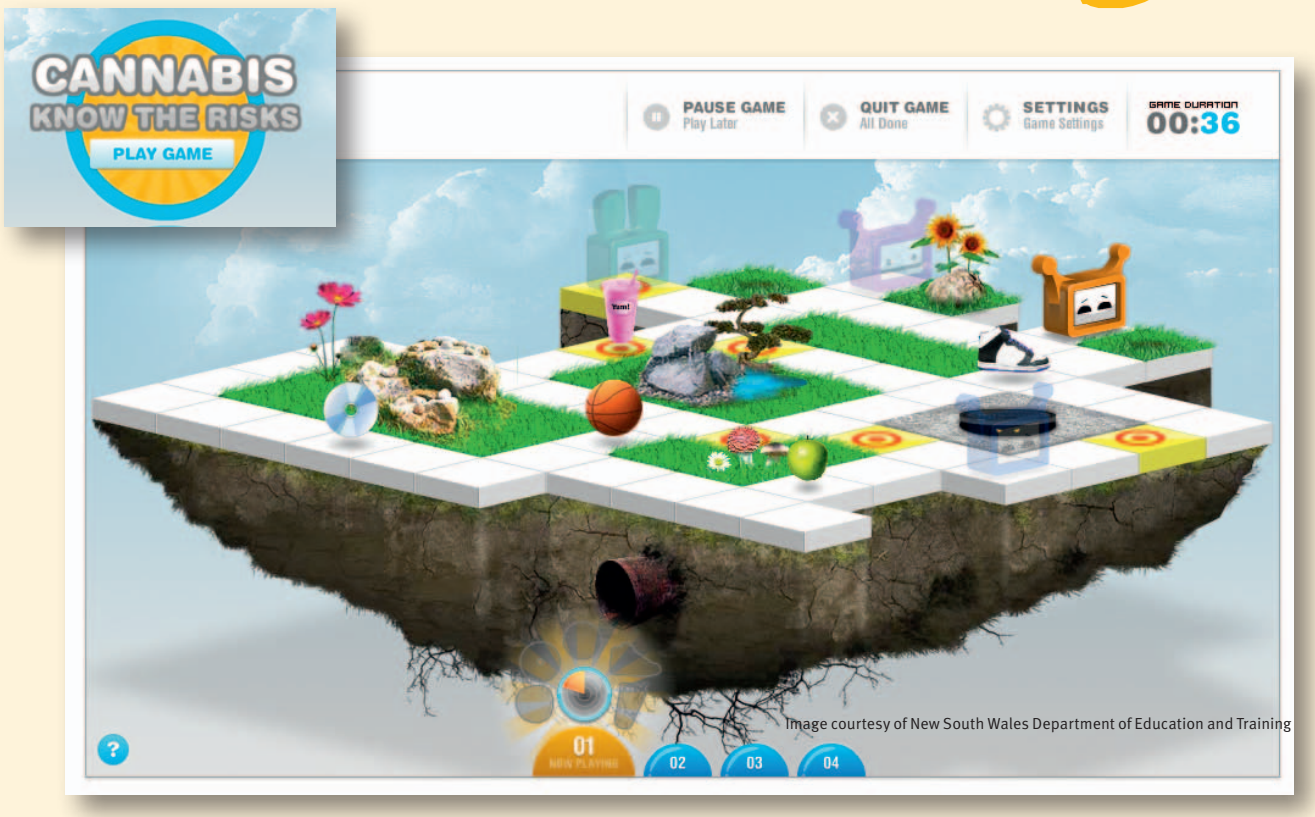


Image courtesy of New South Wales Department of Education and Training

Supplementary Activity

Cannabis: Know the Risks

(Internet Activity)

Extension

Have students go online looking for information about cannabis, alcohol and solvents and list three websites they think present balanced, factual and well-researched information relevant to them.

Facilitator summary

There is a lot of information available online about alcohol and other drugs, mental health and related topics but students should be careful about how much trust they place in this information. Government and university branded sites such as those ending in .gov.au, .edu.au and other health department sites will generally present evidence-based research rather than opinion or false information. Students should also be aware there are many 'pro-drug' forums and websites available so being able to filter the information they find and view it objectively is important.

Australian Indigenous HealthInfoNet

The Australian Indigenous HealthInfoNet is an innovative Internet resource that aims to inform practice and policy in Indigenous health by making research and other knowledge readily accessible. The Health*Info*Net aims to contribute to 'closing the gap' in health between Indigenous and other Australians. Find a map of all the Aboriginal Medical Services in Australia and access plain language information on a range of health topics affecting Aboriginal and Torres Strait Islander Peoples at their website.

MAKINGtheLINK

Appendices and Further Information for Teachers

Possible Helpers in a Community

- Teacher
- Teacher's Assistant
- School nurse
- School counsellor
- Librarian
- Principal
- Brother
- Sister
- Mum
- Dad
- Aunty
- Uncle
- Friend/mate
- Family friend
- Friend's older sibling
- Aboriginal Elder
- Aboriginal worker at Aboriginal Medical Service
- Aboriginal Education Officer
- Sports coach
- Community leader/politician
- Community member
- Shop owner/shop attendant
- Priest/religious person
- Night patrol person
- Police Officer
- Sport and Recreation Officer
- Community worker e.g. Red Cross
- Alcohol or other drug worker
- Youth worker
- Social worker
- Doctor
- Health clinic staff
- Counsellor/psychologist
- Helpline Operator

Aboriginal and Torres Strait Islander Young People, Drug use and Mental Health

Additional information and background for facilitators

cannabis and other drugs

- According to the limited research available, cannabis use appears to be increasing in some Aboriginal and Torres Strait Islander communities.
- Aboriginal and Torres Strait Islander Peoples typically begin using from a younger age than other Australians and the earlier the onset of cannabis use and the more frequently it is used, the greater the likelihood of developing mental health problems.
- At the national level, the most recent National Aboriginal and Torres Strait Islander Health Survey (2004–05) reported that 23% of non-remote Indigenous persons aged over 17 years reported using cannabis in the previous 12 months.
- Aboriginal and Torres Strait Islander Peoples were almost twice as likely to be recent users of illicit drugs as other Australians (24.2% compared with 13.0%).
- Cannabis, alcohol, tobacco and inhalants are drugs of concern in Aboriginal and Torres Strait Islander communities and seeking help for any of these substances should be encouraged.
- There are no reliable national data on petrol sniffing, but case studies indicate that the practice continues to be a major problem in some communities. Petrol sniffing causes confusion, aggression, lack of coordination, hallucinations, respiratory problems and chronic disability, including mental impairment.

Aboriginal and Torres Strait Islander Young People, Drug use and Mental Health

Alcohol

- Several surveys have shown that Aboriginal and Torres Strait Islander Peoples are less likely than other Australians to drink alcohol, but those who do drink are more likely to consume it at hazardous levels
- Aboriginal and Torres Strait Islander young people whose parent or carer was forcibly removed as a child are about twice as likely to use alcohol or other drugs than other Aboriginal and Torres Strait Islander peoples
- Young Aboriginal and Torres Strait Islander Australians are more than twice as likely as other Australians to die from alcohol-attributable causes

Mental Health

- Growing up in areas of extreme isolation, where adherence to traditional culture and ways of life is strongest, may be protective against emotional and behavioural difficulties in Aboriginal and Torres Strait Islander children. In areas of extreme isolation, only 8% of young Aboriginal people drink alcohol compared with 31% of young people in the metropolitan area
- Young male Aboriginal and Torres Strait Islander children are twice as likely as females to be at high risk of clinically significant emotional or behavioural difficulties
- In 2003, mental health conditions contributed to 16% of the total disease burden experienced by Aboriginal and Torres Strait Islander Peoples
- In 2004–05 Aboriginal and Torres Strait Islander Australians were twice as likely as non-Aboriginal and Torres Strait Islander Peoples to be hospitalised for “mental or behavioural disorders”
- The rate of hospitalisation for Aboriginal and Torres Strait Islander Peoples diagnosed with mental disorders due to psychoactive substance use was four to five times higher than the rate for other Australians

Referral Options and Helplines

Note: These services are not specific to Aboriginal and Torres Strait Islander young people, rather they provide general advice and support to all Australians.

Kids Helpline

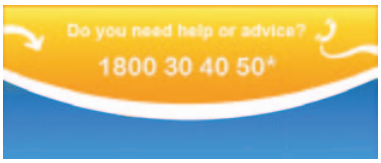
www.kidshelpline.com.au

1800 55 1800

Kids Helpline is Australia's only free, private and confidential, telephone and online counselling service specifically for young people aged between 5 and 25.

Kids Helpline counsellors are available 24 hours a day, 7 days a week. Nothing is too big or too small to call them about, and they will always listen and try to understand.

Calls from landlines and payphones are free. Some calls are free from mobile phones.



The Cannabis Information and Helpline

http://ncpic.org.au/ncpic/helpline

The Cannabis Information and Helpline is a confidential information and support line for cannabis users and friends and family who are concerned about cannabis use by those close to them.

It provides counselling, information and referrals that will assist you in your current situation. It will link you to the most appropriate support services and resources for your situation in your area.

The Helpline is available from 11am – 8pm Monday to Friday (including public holidays) and calls are free from landlines.

Lifeline

http://www.lifeline.org.au

Somewhere in Australia there is a new call to Lifeline every minute. People call Lifeline's 24 hour crisis support service **13 11 14** about many things including:

Anxiety, depression, loneliness, abuse and trauma, physical or mental wellbeing, suicidal thoughts or attempts, stresses from work, family or society and information for friends and family

Calls to Lifeline are typically the cost of just a local call, however additional charges may apply for calls from payphones, mobiles or some home phone plans.

beyondblue

www.beyondblue.org.au

1300 22 4636

For the cost of a local call, the beyondblue info line provides callers with access to information and referral to relevant services for depression and anxiety-related matters.

Counselling Online

http://www.counsellingonline.org.au/en

CounsellingOnline is a service where you can communicate with a professional counsellor about an alcohol or drug related concern, using text-interaction.

This service is free for anyone seeking help with their own drug use or the drug use of a family member, relative or friend. Counselling Online is available 24 hours a day, 7 days a week, across Australia.

SANE Australia

www.sane.org

SANE Helpline: 1800 18 SANE (7263)

Information, advice, and referral for people concerned about mental health problems.

itsallright

www.itsallright.org

Itsallright.org is SANE's website for young people with a parent or friend affected by mental illness.

State-based Alcohol and Drug Information Services

ACT – (02) 6207 9977
QLD – 1800 177 833
NSW – 1800 422 599 or (02) 9361 8000
NT – 1800 131 350
SA – 1300 131 340 or (08) 8363 8618
VIC – 1800 888 236
TAS – 1800 811 994
WA – 1800 198 024 or (08) 9442 5000

headspace

www.headspace.org.au

The National Youth Mental Health Foundation – offers a comprehensive website and one-stop-shop services that are youth-specific, and therefore youth-friendly. headspace employs a range of different health workers and programs with a focus on the needs of young people. These include; GPs, psychologists, alcohol and drug workers, as well as education and employment programs.

Orygen Youth Health

www.oyh.org.au

Orygen Youth Health aims to ensure that young people are able to access high-quality mental health, and drug and alcohol services provided in friendly, accessible environments.

ReachOut.com

www.reachout.com

ReachOut.com is a web-based service which aims to inspire young people to help themselves through tough times. The ReachOut.com site has fact sheets and personal stories about a wide range of health and lifestyle issues, as well as profiles of famous people, an e-newsletter and a database where you can look for help in your area. ReachOut.com is an initiative of the Inspire Foundation.

Reach Out Central

www.reachoutcentral.com.au

Designed specifically for young people, Reach Out Central (ROC) is an interactive program that's designed to help you explore how your thinking, behaviour and feelings all interact with each other, and to help you improve and learn new life skills.

The Inspire Foundation

www.inspire.org.au

The Inspire Foundation combines technology with the direct involvement of young people to deliver innovative and practical online programs that prevent youth suicide and improve young people's mental health and wellbeing.

Somazone

www.somazone.com.au

Somazone is a website that was developed by young people for young people, with the assistance of the Australian Drug Foundation (ADF). The website focuses on health and lifestyle issues such as mental health, drug- use, relationships and body image, with fact sheets, personal stories and advice on where to get help.

The Black Dog Institute

www.blackdoginstitute.org.au

The Black Dog Institute website contains:

- expert information on depression and Bipolar Disorder
- information about causes and treatments
- online self-assessment tools
- a section on getting help for people experiencing depression and their carers
- a page on depression in teenagers and young adults. www.blackdoginstitute.org.au/public/depression/inteenagersyoungadults.cfm

BluePages

www.bluepages.anu.edu.au

Comprehensive, evidence-based information about depression and its treatment (including medical, psychological and alternative therapies). BluePages also includes interactive depression and anxiety quizzes, descriptions of the experience and symptoms of depression, a relaxation download, and extensive resources for help. Participation is free and anonymous.

MoodGYM

www.moodgym.anu.edu.au

A popular interactive program that teaches cognitive-behaviour therapy skills for preventing and coping with depression. MoodGYM has been extensively researched and its effectiveness has been demonstrated in randomised controlled trials. Participation is free and anonymous.

BlueBoard

www.blueboard.anu.edu.au

An online support group for people aged 18 years or over and who are affected by depression, bipolar disorder or anxiety disorders. It aims to destigmatise mental disorders, and to provide support, hope and opportunities for sufferers and carers to share successful coping strategies. The group is run as a moderated bulletin board with strict protocols to enhance safety. Participation is free and anonymous.

e-couch

www.ecouch.anu.edu.au

e-hub's latest interactive self-help program includes modules for social anxiety, generalised anxiety and depression, as well as bereavement and relationship breakdown. It provides self-help training drawn from cognitive, behavioural and interpersonal therapies as well as relaxation and exercise. Participation is free and anonymous.

Beacon

www.beacon.anu.edu.au

Provides consumers and professionals with information about e-health online applications for mental health and physical health disorders. Websites throughout the world are reviewed and ranked by a panel of health researchers Consumers are invited to submit rankings and comments. Participation is free and anonymous.

Eating Disorders Foundation of Victoria

www.eatingdisorders.org.au

The Eating Disorders Foundation of Victoria is the primary source of support, information, community education and advocacy for people with eating disorders and their families in Victoria.

National Drugs Campaign

www.australia.gov.au/drugs

The National Drugs Campaign aims to reduce the uptake of ecstasy and other illicit drugs among young Australians by raising awareness of the harms associated with drug use and encouraging and supporting decisions not to use. The website provides information for young people about different illicit drugs and provides details about where to get help.