

WHY DO PEOPLE USE ALCOHOL AND OTHER DRUGS?

Alcohol and other drugs (AOD) have been used by all societies throughout history. In this respect the use of psychoactive drugs can be viewed as a normal human behaviour.

WHAT ARE PSYCHOACTIVE DRUGS?

Psychoactive drugs are drugs that act on the central nervous system and can change the way a person *thinks, feels or behaves*. Drugs are classified as:

- Depressants (e.g. alcohol, benzodiazepines, heroin and other opiates, volatile substances);
- Stimulants (e.g. cocaine, meth/amphetamines, nicotine, caffeine); or,
- Hallucinogens (e.g. LSD, magic mushrooms).

Some drugs have effects in more than one domain. For example, MDMA ("ecstasy") has both stimulant and hallucinogenic properties, while a drug such as cannabis, while usually considered a depressant, can have hallucinogenic effects in high doses.

WHY DO PEOPLE USE DRUGS?

There is no single reason and reasons can vary from individual to individual and situation to situation. Important factors might include:

- to change mood;
- to be sociable, to relax, to celebrate, to have fun and for enjoyment and pleasure;
- when they feel sad, lonely, bored, depressed, in pain, or to cope with other problems;
- symbolically e.g. alcohol to celebrate an anniversary or to signal the end of the working week; and,
- to help them cope with a range of symptoms associated with experiencing traumatic events.



FACT SHEET

WHAT DO PEOPLE EXPERIENCE WHEN USING DRUGS?

The drug use experience is a function of the interaction of the following factors:

- **the individual** who is using the substances and their physical and mental health, their trauma history, gender, age and reasons for use;
- **the substance** they are using including the amount, frequency of use, whether it is legal or illegal, potency, chemical properties; and,
- **the environment** in which they are using.

PATTERNS OF ALCOHOL AND OTHER DRUG USE

- **Experimental:** This pattern of use refers to short-term use of a drug, and for some people they will only ever use a particular drug once. Experimental use may be motivated by curiosity or a desire to experience new feelings or moods. Peer influence may be a factor in experimental drug use.
- **Social:** This pattern describes drug use on specific social occasions, e.g. drinking at a party or at dinner, in a social setting.
- **Situational/Circumstantial:** This pattern is associated with use for specific situations and/or for a set period, e.g. a student drinking coffee during exam periods, or an individual under acute stress or experiencing bereavement.
- **Intensive:** This level of use may border on dependence. It is often related to an individual's need to achieve relief or to maintain a higher level of performance, e.g. taking large doses of tranquillisers or analgesics to cope with or escape from current or past trauma, or using stimulants to assist with concentration and/or for excitement.
- **Compulsive:** This pattern refers to persistent and frequent high doses of a drug producing psychological and physiological dependence where the user cannot discontinue use without experiencing significant mental or physical withdrawal. With compulsive use there is also likely to be a preoccupation with the need to obtain adequate amounts of the drug to avoid withdrawal symptoms.

This model does not intend to imply that people will progress from one type of use to another (e.g. experimental to intensive use or compulsive use) but is helpful in understanding that there are a range of ways in which people use drugs and may develop associated problems.

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