## Alcohol Brief Assessment

The purpose of this tool is to provide you with a better understanding of your alcohol use.



#### Worker's notes

This tool is not intended to replace a full assessment. It is designed to be used alongside other Check Tools as part of a tailored brief intervention. Please consider all risk, safety, consent and confidentiality issues before commencing. If now is not a good time, this and other Check Tools can be taken away by the person and read at a later date.

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Date:

At what age did you first try alcohol?



#### Can you describe to me the way that you drink?

e.g. When do you have your first / last drink? Do you drink slowly/steadily throughout the day, or a larger amount in a shorter period of time?

#### Are there particular times, events, places or people that influence the way you drink?

e.g. Do you drink more or less on a work/non-work day or weekend/holidays? Or when you're with certain people or do/don't have children in your care (or other caregiving responsibilities)? Or when having certain thoughts or feelings? What about special occasions or anniversaries?

#### Would you say your overall level of alcohol use is...

O Increasing? O Decreasing? O Staying roughly the same?

## These next three questions use a scoring system to see if you may be experiencing harm from your alcohol use

| How often do you have a drink containing alcohol? (please circle/select score to the right) | Never | Monthly or<br>less | 2-4 times<br>per month | 2-3 times<br>per week | 4+ times per<br>week |
|---|-------|--------------------|------------------------|-----------------------|----------------------|
|   | 0     | 1                  | 2                      | 3                     | 4                    |

How many standard drinks of alcohol do you drink on a typical day when you are drinking?

We're going to use the table below to help calculate this (NB: the table contains approximate measures only)

|                    |  | Beer              | / Cider            |                                      |                   |                | Wine            |             |               | Spirits         |                 |
|--------------------|--|-------------------|--------------------|--------------------------------------|-------------------|----------------|-----------------|-------------|---------------|-----------------|-----------------|
| Mid                | Mid-strength beer<br>(3.5%)  |                   |                    | Full-strength beer / Cider<br>(4.5%) |                   | 100mL<br>Glass | 750mL<br>Bottle | 2L<br>Cask  | Shot<br>(40%) | 375mL<br>Premix | 700mL<br>Bottle |
| Stubbie<br>(375mL) | Pint<br>(570mL)  | Tallie<br>(750mL) | Stubbie<br>(375mL) | Pint<br>(570mL)                      | Tallie<br>(750mL) | (12%)          | (12%)           | (12%)       |               | Can<br>(5%)     | (40%)           |
| For each o         | lrink above  | , count how       | many you w         | ould consu                           | ime on a ty       | pical day an   | d enter inte    | o the box b | elow          |                 | 1               |
|                    |  |                   |                    |                                      |                   |                |                 |             |               |                 |                 |
| Now multi          | ow multiply each number above by the number of standard drinks below and enter into the boxes underneath |                   |                    |                                      |                   |                |                 |             |               |                 |                 |
| 1.0                | 1.5  | 2.0               | 1.5                | 2.0                                  | 2.5               | 1              | 7.5             | 20          | 1             | 1.5             | 22              |
|                    |  |                   |                    |                                      |                   |                |                 |             |               |                 |                 |
|                    |  |                   |                    |                                      |                   |                |                 |             |               |                 |                 |

Enter total number of standard drinks here

Now circle/select the score to the right that matches the number of standard drinks

How often do you have 5 or more standard drinks on one occasion? (please circle/select the score to the right)

|        |  | I      |        |        |
|--------|--|--------|--------|--------|
| 0-2    | 3-4  | 5-6    | 7-9    | 10+    |
| drinks | drinks   | drinks | drinks | drinks |
| 0      | 1  | 2      | 3      | 4      |
|        | i de la companya de la | 1      | 1      | ,      |

| Never | Less than | Monthly | Weekly | Daily or     |
|-------|-----------|---------|--------|--------------|
|       | monthly   |         |        | almost daily |
| 0     | 1         | 2       | 3      | 4            |

Now add up your score from the 3 questions and write it here:

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#### What does your total score mean?

| 0-3 | Low risk      | You are either a non-drinker or drink at low risk levels.            |
|-----|---------------|--|
| 4-5 | Moderate risk | Your drinking may be causing some harm to your health and wellbeing. |
| 5+  | High risk     | Your drinking is causing harm to your health and wellbeing.          |

#### What are your initial thoughts or reactions about this result?

#### According to the Australian Drinking Guidelines, to reduce the risk of harm from alcohol...

#### Healthy Adults

Should not drink more than 10 standard drinks a week, and no more than 4 standard drinks on one day. **Children and people under 18 years of age** Should not drink any alcohol. Women who are pregnant, planning pregnancy or breastfeeding Should not drink alcohol to prevent harm from alcohol to their unborn child or baby.

Key message: the less you drink, the lower your risk of harm.

Would you like to explore your - relationship with alcohol further? See Check Tool 2 "Understanding your substance use"

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**Would you like to make changes to your alcohol use?** See Check Tool 3 "Thinking about cutting back or quitting?"



Would you like information on ways to use alcohol more safely? See Check Tool 4 "Ways to reduce harms"



## Understanding your substance use



#### Name:

Date:

The purpose of this tool is to explore your overall relationship with substances.

#### 1. Does your substance use cause you any concerns with your...

#### Physical, mental or emotional health?

e.g. Illness, injury, poor sleep, unhealthy eating, bad teeth/gums, feeling sad/worried/stressed/paranoid/ shame, etc.

#### What about your relationships/kinship?

e.g. Loss of connection or troubles/worries with family, partners, friends, children, parenting issues etc.

#### What about your lifestyle?

e.g. Work, school, money, housing, caregiving responsibilities, chores, hobbies, goals etc.

#### What about legal concerns?

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e.g. Contact with police, debts/fines, court, loss of driver's licence, parenting arrangements, child protection / youth justice involvement etc.

#### 2. Does your substance use cause you any concerns with your...

| <b>Connection to your community?</b><br>(including religion/faith) | What about your connection to<br>Country, or the place you are<br>originally from? | What about your culture?<br>(including cultural responsibilities) |
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#### Is there anything else?

e.g. Embarrassing or harmful incidents or events (making a fool of yourself, regretting sex, getting into fights, getting ripped off, passing out, losing phone/wallet/purse etc.)

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| 3. How much do you spend on substances?         TIP: Average out how much you spend on a heavy session or a "big night out" across the week or month (including if it's your shout on pay day)         You may need a calculator for this section:         Per week \$  |   |
|---|---|
| Per year \$ (multiply the monthly number by 13 to equal 52 weeks)   | J |
| After buying substances, do you find that you have enough money left over for daily expenses? e.g. food, rent, transport, bills (please tick) <ul> <li>Always</li> <li>Mostly</li> <li>Sometimes</li> <li>Rarely</li> <li>Never</li> </ul> Is there anything else other than substances that you would like to spend this money on? |   |
|   |   |

#### 4. This next question is about whether you could be physically or psychologically dependent

Over the past 3 months... (tick all that apply)

Have you experienced cravings or urges to drink/use?

Have you felt anxious or worried if you did not have it?

Have you felt like you needed more to feel the same effects?

Have you tried to cut back or stop but couldn't?

Have there been times where you haven't managed to do what was expected of you at home, school or work because of your substance use?

#### And how soon after waking up do you first drink/use?

If you ticked any of the boxes above, or if you start drinking/using soon after waking up, it could be a sign that you are dependent on (or 'addicted' to) the substance.

#### 5. So where are things at for you right now?

| On a scale of 1-5, how worried are you about your substance use? (please tick)  | 1<br>Not worried<br>at all | 2       | 3      | 4          | 5<br>Very<br>worried   |
|---|----------------------------|---------|--------|------------|------------------------|
| Would you like to cut back or quit one or more substance  | s? 🔿 Yes                   | O Unsur | e 🔿 No | ) (go to q | uestion 6)             |
| Can you specify which substance/s here?   |                            |         |        |            |                        |
| If you're thinking about cutting back or quitting, how<br>confident are you that you can make these changes?<br>(please tick) | 1<br>Not<br>confident      | 2       | 3      | 4          | 5<br>Very<br>confident |

## 6. Do you have any worries or concerns about what would happen if you cut back or stopped your substance use?



#### 7. So where to from here?

#### We could... (please tick)

- Talk about some ways to stay safer? (see Check Tool 4: "Ways to reduce harms")
- We could talk about ways to cut back or quit? (see Check Tool 3: "Thinking about cutting back or quitting?")
- We could talk about both?
  - We could talk about another substance?
- ] Or you're okay for now... If so, would you like to arrange a follow up appointment?  $\bigcirc$  Yes  $\bigcirc$  No  $\bigcirc$  Unsure

Date/time:

Also, is there someone else you feel you can talk to about your substance use if you felt you needed to? Name or service:

Thanks for your honesty. You can take this tool away with you to refer back to in the future.



# Thinking about cutting back or quitting?



#### Name:

Date:

Firstly, what would you like to change about your substance use?

You're making a change because...

The people who could support you are... (think about family and friends as well as professional support workers)

The things which might make it hard to reach your goal/s are...

#### Some strategies to help you reach your goal/s are...

e.g. Avoiding things, places or people who make you think about drinking/using, putting your money in a secure account, monitoring your cravings/unplanned use in your phone, reconnecting with people who don't drink/use...

#### PLEASE NOTE:

Cutting back or quitting can be easy for some people and hard for others. You may experience withdrawal symptoms – things like having difficulty concentrating, being irritable, feeling anxious, sick or having cravings.

Sudden withdrawal from daily/heavy use of certain substances - especially alcohol and benzos - can cause serious medical problems such as seizures. In these instances, follow a structured, gradual reduction plan created with a medical professional (which may include specific withdrawal medications). There are also effective longer-term substitution medications available for some substances (e.g. opioids).

If you experience a sudden and/or significant change in mood or see, feel or hear things that are not real when withdrawing from a substance, please seek immediate help by calling triple zero '000' or going to your nearest hospital emergency department.

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The following page lists some useful craving management strategies you might like to try.

#### Looking after yourself during cravings

A craving is a strong desire or urge to use a substance. This might be an unpleasant physical sensation, such as a taste in your mouth, tight chest or stomach tension. It could also be a strong emotion, such as feeling anxious or panicked, or having racing thoughts.

#### Cravings are normal, however there is good news!

They are not constant – they will pass. They lose their power over time. Just like a stray cat, they stop coming back when you don't feed them. Here are some strategies below which you might find helpful.

#### The 3 D's can help you deal with stress or cravings...

#### DELAY

If you can delay the decision to drink or use for 5 minutes, or half an hour, a craving can eventually pass <u>on its own.</u> DISTRACT

It is easier to delay the decision if you are doing something to distract yourself (e.g. playing a game on your phone, eating, going for walk, listening to music, watching TV etc).



Breathing and other relaxation techniques can help you to stay calm during a craving.



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## Self-awareness

Mindfulness is a strategy that has been found to help with cravings by redirecting attention and memory away from the sensation. It is a way of helping your mind to focus on the present.

If you want to learn more, speak to a counsellor, join a group or download an app.

#### **Urge surfing**

Urge surfing is another strategy. With this technique, you don't fight the craving – instead you focus on it.

**STEP 1** Begin by noticing where you feel the craving (e.g. in your mouth, chest or stomach). Name it. Say to yourself "this is a craving, and it will pass."

**STEP 2** Next, notice yourself breathing in and out, keeping your eyes open or closed, whichever feels more comfortable.

**STEP 3** Now think of your craving as a wave at the beach, starting off small and building to a peak, then eventually breaking and flowing away.

**STEP 4** Imagine yourself surfing these waves the way a surfer would successfully ride a wave at the beach.

**STEP 5** Continue to picture this until the intensity of the craving passes.

## Other common causes of cravings

**HALTS** and ask yourself if you feel...

- Hungry/thirsty?
- Angry?
- Lonely?
- Tired?
- Sad/stressed/sick?

Try and minimise being in any of these states as much as possible.

#### REMEMBER...

- Cravings are a normal part of changing substance use. Like a muscle, each time you practise a new skill you will gain more strength and confidence. Remember to ask yourself each time: "What did I learn from coping with that craving that will help me in the future?"
- Find ways to remind yourself of the reasons why you made the change in the first place (e.g. photos, screensavers, messages, mantras).
- Finally, remember to celebrate your achievements, even small ones (such as saying no or using less, cooking a meal, exercising - nothing is too small!) all the way through to big ones such as reconnecting with family or friends, or reengaging in study or work.

#### It might also help to...

- Catch up again to discuss your progress
- See a doctor or other health professional, such as a specialist alcohol and drug worker.
- REMEMBER:
- Help is available
- Treatment works
- People can make successful changes around their substance use.
- If you are trying to quit, sometimes it can take a few attempts. Learn from any slipups and keep going.

WHERE TO GO FOR MORE HELP... Call the National Alcohol and Other Drug Hotline for free, confidential, 24-hour telephone counselling, advice and referral. Phone 1800 250 015

Congratulations! You now have a plan. Take this tool with you to refer back to at any time.





#### Firstly, a few key things to know about alcohol...

- Alcohol can make you feel happy and relaxed, however if you have anxiety or depression, over time regular or heavy drinking can make these things feel worse.
- Whilst alcohol can help you fall asleep more easily, it often stops you from getting deep, uninterrupted sleep.
- Alcohol interferes with the absorption of vitamin B1 (thiamine), which your brain needs to function properly. If you drink regularly, consider taking a vitamin B1 supplement every day.
- Mixing alcohol with other depressants such as opioids or benzodiazepines (e.g. Valium<sup>®</sup>) can be risky and increases your risk of overdose.

#### It's important to know that there is no safe level of alcohol use.

| Would you try any of these strategies below? (or maybe you do them already?)   | Yes | Maybe | No |
|--|-----|-------|----|
| Setting limits on how much you will drink each day/week/month?   |     |       |    |
| Delaying your first drink until after you have finished certain jobs/tasks/activities or at a certain time of the day?                               |     |       |    |
| Setting a limit on how many drinks you will have before you start drinking?  |     |       |    |
| Choosing drinks with lower alcohol content (e.g. mid-strength beer)?   |     |       |    |
| Alternating each alcoholic drink with a non-alcoholic drink?   |     |       |    |
| Eating healthy foods such as fruit, vegetables, protein-rich foods like meat and eggs, soups, yoghurt, smoothies etc?                                |     |       |    |
| Eating a meal before (and during) drinking?  |     |       |    |
| Taking a vitamin B1 supplement every day?  |     |       |    |
| If you're heading out, making sure your phone is charged and has credit?   |     |       |    |
| Not getting into buying rounds?  |     |       |    |
| Not mixing alcohol with other depressants such as benzodiazepines or opioids?  |     |       |    |
| When drinking, having someone around (or someone you could quickly contact) if you find yourself in trouble who is able to get help in an emergency? |     |       |    |
| Having a meal ready at home to eat before you go to bed?   |     |       |    |
| If you have alcohol at home, storing it safely out of reach of children?   |     |       |    |
| Having 2 alcohol-free days per week? NB: unless physically dependent on alcohol – see warning on next page   |     |       |    |
| Having a break for 2 weeks or more semi-regularly? NB: again, unless physically dependent on alcohol - see warning on next page                      |     |       |    |

#### Alcohol and driving

Alcohol can reduce your ability to drive safely. Open licence holders must have a BAC lower than 0.05 to drive legally.

It's also difficult to know how much your driving has been affected or how long alcohol remains in your system. Fatigue, hangovers or come-downs can also affect your driving skills. If in doubt, do not drive (and this includes scooting/cycling).

Consider purchasing a mini home breath-testing device to help work out if you are over-the-limit before you drive (noting, these may not always be 100% accurate).



#### Try to prevent accidents or bad experiences from occurring. Avoid high-risk situations when under the influence (e.g. around traffic, waterways, heavy machinery) or places where an overdose or accident may go unnoticed.



#### Do you use regular medications?

Sometimes alcohol can affect how these medicines work. Check the medicine packet and/or ask your doctor.



#### Practice safe sex

Carry and use condoms and access regular STI testing, especially whenever you start having sex with a new partner.

### WARNING

If you are a heavy daily drinker, we recommend you seek medical advice before stopping or cutting back to avoid severe and/or dangerous withdrawal. Withdrawal is different for everybody and can last up to 10 days.

Common symptoms include nausea, vomiting, stomach upset, headache, sleeplessness, sweating, and shaking.

Severe alcohol withdrawal can cause hallucinations and seizures - this requires urgent medical attention.

#### Are you pregnant, breastfeeding or parenting?

Using any substance when planning a pregnancy, pregnant, or while breastfeeding can affect your baby's body and brain development. Talk to a medical professional for advice, especially if considering detoxing whilst pregnant.

Substance use can affect your children and others around you. Ensure your children remain safe and supervised at all times. Make a plan prior to drinking and be prepared for the hangover in advance.

Note: Sleeping with a child in the same bed while under the influence of alcohol can be particularly dangerous.

#### Responding to an alcohol overdose

Signs of an alcohol overdose include:

- Cannot be woken up
- Very slow breathing, choking, snoring or gurgling
- Blue lips, skin or fingertips
- Very low body temperature
- Vomiting, especially while unconscious
- Extreme confusion/agitation
- Hallucinations
- Seizures



If this occurs, seek assistance by calling triple zero (000) and ask for 'AMBULANCE'. If someone is unconscious and breathing, turn them on their side in the recovery position. If they are not breathing, perform CPR if you are able to and wait with them until help arrives. Don't confuse sleep with loss of consciousness. If someone cannot be woken up, it is likely they are unconscious.

Unfortunately, there's no way to reverse an alcohol overdose. The effects have to wear off over time.

What would be signs that your alcohol use is becoming more of a problem? When would you know it's time to take a break and/or seek help?



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## Unplanned substance use recording tool



Name:

Date:

Use this tool to track any unplanned substance use from week to week to help better understand when, where and why it happens.

#### My aim for this week:

- Change or reduce my substance use (please describe):
- Not use any substances at all

| Date/day | Did you have<br>cravings? Y/N | How much used?<br>(e.g. \$/volume) | The situation (place/time/people) related to the unplanned use? | What happened? What did I learn about myself? And what could I do differently next time? |
|----------|-------------------------------|------------------------------------|---|--|
|          |                               |                                    |   |  |
|          |                               |                                    |   |  |
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