



# 03

## Seeking help

Practise and apply strategies to seek help for themselves or others (ACPPS072)

By the end of Year 8, students evaluate strategies and resources to manage changes and transitions and investigate their impact on identities. Students evaluate the impact on wellbeing of relationships and valuing diversity. They analyse factors that influence emotional responses. They investigate strategies and practices that enhance their own, others' and community health, safety and wellbeing. They investigate and apply movement concepts and select strategies to achieve movement and fitness outcomes. They examine the cultural and historical significance of physical activities and examine how connecting to the environment can enhance health and wellbeing.

Students apply personal and social skills to establish and maintain respectful relationships and promote safety, fair play and inclusivity. **They demonstrate skills to make informed decisions, and propose and implement actions that promote their own and others' health, safety and wellbeing.** Students demonstrate control and accuracy when performing specialised movement sequences and skills. They apply movement concepts and refine strategies to suit different movement situations. They apply the elements of movement to compose and perform movement sequences.

© Australian Curriculum, Assessment and Reporting Authority (ACARA)

### Organise your thinking

As part of growing up you will experience many challenging situations, including emergencies. How you respond to these situations is dependent on your personal attributes such as your ability to communicate effectively and make good decisions.

### Making connections

- How can emotions and decision-making impact the outcome of a situation?
- What communication techniques are effective when seeking help?
- What are some strategies for helping others in emergency situations?

## 3.1 Impact of behaviour on outcomes

**adolescence** the period of life between childhood and adulthood

**puberty** the stage of development when a child changes physically into an adult

**psychological** referring to the mind

The period of **adolescence** begins with the onset of **puberty** and is marked by significant physical, **psychological** and emotional changes. The start of puberty differs widely between individuals. In girls, puberty roughly begins anywhere between 10 and 14 years, while in boys it generally occurs later, between 12 and 16 years.

There is no way of knowing exactly when puberty will start as it is dependent on a number of factors, including the release of hormones, which is partly determined by your genetic make-up. There is significant variation in the 'journey' to adulthood.

During an individual's transition through adolescence into adulthood, the brain undergoes growth and change. If you look at the brain size of a six-year old, it is already about 90% of that of an adult size. But it still requires considerable remodelling to function as an adult brain.



**Figure 3.1** Adolescence is a time of significant growth within the teenage brain.

These developmental changes during adolescence affect how you think and therefore how you behave. The brain is divided into lobes or regions that are responsible for different functions. The sequence of brain development during adolescence occurs from the regions at the back of the brain first. These regions are responsible for things such as vision, learning, memory, understanding language and sensing pain. The frontal cortex is the part of the brain that is remodelled last in an **adolescent** brain. The frontal cortex is the largest part of the brain and is responsible for skills such

**adolescents** individuals between the ages of 12 and 19 years

as decision-making, planning actions, problem-solving, comprehension and attention. This may explain why some adolescents demonstrate 'adult-like' thinking skills in some instances but can also be overly emotional and illogical in others.

## Emotions and outcomes

Implications of brain growth and development on behaviour during adolescence might be that you:

- undertake high-risk activities or take more risks
- express strong emotions more frequently
- make impulsive decisions with no thought of consequences
- attempt to break free from the control of parents.

Risk-taking behaviour is one means for teenagers to learn about themselves. The social nature of teenagers usually means that risks are taken in front of peers, either to impress or as a result of peer-group pressure. Taking risks is a natural part of developing responsibility and moving towards adulthood.

Being challenged by situations that you encounter allows for the development of personal independence. Some teenagers, however, might be less skilled at thinking through the consequences of their behaviour. This has ramifications on the health and safety of themselves and others.

## ABCDE decision-making model

Decision-making involves a thinking skill that requires consideration of a range of options to reach an outcome. It is made easier by having good communication skills in order to gather information and express an opinion.

You will encounter many decision-making situations and following a simple process will give you more confidence knowing that you have considered all options before reaching an outcome.

- A** Assess what the problem is or what decision needs to be made.
- B** Brainstorm all the possible options or choices for this problem.
- C** Consequences – consider the pros and cons or positives and negatives of each option.
- D** Decide on the best option based on your understanding of the problem.
- E** Evaluate the choice you have made by reflecting on the outcome.



Figure 3.2 ABCDE model of decision-making

## 3.1

## DEEP LEARNING

Use the steps in the ABCDE decision-making model to assist in reaching a decision as to how to respond to the following scenarios that you may encounter.

- Scenario 1:** Jack has finished playing basketball at 10.30 p.m. and offers a lift home to his four teammates. When they get to the car, they realise Jack has his 'P' plates and isn't allowed more than one passenger after 11 p.m. Jack isn't concerned and crams everyone into the car.
- Scenario 2:** Liu is going to a party and on the request of his friends takes a full bottle of spirits from the kitchen cabinet.
- Scenario 3:** Aisha arrives home an hour late and is met by her angry parents at the front door. Aisha's response is to yell at her parents 'I don't care about what you think' as she pushes past them.
- Scenario 4:** Amir is dared by his peers to steal a smartphone from the display counter of a department store.

## Self-esteem and outcomes

Peers and family are the greatest influencing factors in shaping how you think about yourself. How you perceive your interactions in these relationships impacts on how you view yourself. Your **self-esteem**

**self-esteem** the personal value, self-respect and self-worth that you place on yourself

develops as a consequence of reflection on your interactions with your parents in early adolescence, and later with your peers. If you view these interactions as positive experiences, then you tend to view yourself positively. The reverse is also true. Self-esteem is how we 'see' ourselves, similar to a mirror in your mind, and is closely linked to self-confidence.

Individuals with high self-esteem tend to form constructive, positive relationships with their peers and family. They are more likely to be good communicators, able to share ideas and make informed decisions. As a consequence, they do not feel the need to undertake high-risk activities to 'prove' themselves to others. They are already confident about themselves and who they are. They

**self-image** the view you have of yourself (e.g. sporty, caring)

work well in team environments where they collaborate effectively with other team members as a result of their ability to express their opinions clearly and without putting others down.

**identity** individual characteristics, including ideas, feelings and attitudes towards self-worth and capabilities of a person; or characteristics of a social group

Individuals with low self-esteem tend to be indecisive when it comes to decision-making, as they don't trust their own ability to make decisions and therefore look to follow others. Their negative **self-image** may be a result of negative interactions with family or peers and result in negative emotions such as anger, fear or insecurity. This inability to make a decision impacts on everyday life and they rely heavily on the values and beliefs of others. These individuals struggle to develop their own **identity** but prefer to follow others or, at worst, may alienate themselves from peers by **anti-social** behaviour. This can lead to impulsive decisions with negative

**anti-social** lacking consideration for the rights of others

Consider the consequences of decisions about: drinking and driving; safe sexual health practices; whether something is right or wrong; or whether quitting school is a good option. Your ability to make positive decisions has a far-reaching impact on the choices that you make.

## 3.2



- 

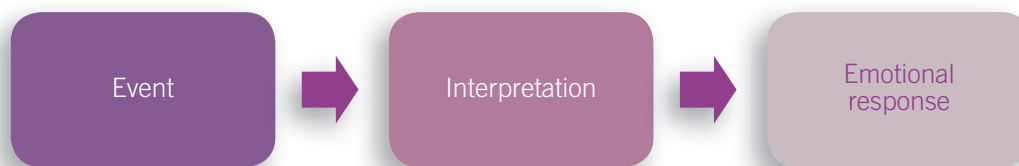
## 3.2 Communication techniques

## Feelings and emotions

Photocopying is restricted under law and this material must not be transferred to another party.

for expressing these feelings – through music, sport or other pursuits – is a positive step. The same situation can result in very different emotional responses depending on how you interpret it.

Take, for instance, the situation of yourself and a friend both being selected in the 'A' sports team. You are ecstatic and can't wait to tell your parents. Your friend, on the other hand, is terrified. She feels that she isn't as good as the other players in the A team and doesn't deserve to be there. Figure 3.4 shows how an event is perceived will impact on the emotional response to this situation. The same event can result in different emotional responses based on how you interpret the event.



**Figure 3.4** Relationship between feelings and emotions

Be aware of how you respond emotionally in different situations and what type of situations trigger these feelings. How you view yourself, your **self-concept**, also has an impact on how you interpret a situation. A positive self-concept tends to produce positive outcomes. It is important to be able to reflect on your feelings by asking the following questions:

**self-concept** how we think about ourselves; it includes how we feel about our physical appearance and personality and is shaped mostly by our interactions with significant people in our lives

**empathy** the ability to identify and understand the feelings of others

- What am I feeling?
- What is it telling me about the situation?
- What other emotions could I have responded with?

Being able to accurately identify your feelings is a difficult skill, especially if you have limited experience expressing what you think and feel. Once you are able to better identify your own feelings, there is an improved chance that you are able to more readily identify the feelings of others. This is called **empathy**. Reading people's feelings and having empathy allows us to identify situations when people may need help or extra support.

## 3.3

### DEEP LEARNING

Identify the feeling/s of the person in each of the following situations and suggest what you could say and do to help:

- 1 Tayla started at a new school midway through the term.
- 2 Julia received a text from her new boyfriend that he no longer wanted to see her.
- 3 Everyone was talking over the top of Jahlia in class.
- 4 Samantha was coming late to school every day looking really tired.

## Seeking help

Once you feel confident in acknowledging your own feelings, you may be more perceptive of the feelings of others. If you recognise that someone needs help, it is not always easy to know what to do or where to start. Sometimes it's as simple as starting a conversation. Sometimes the conversation can be the solution.

Persuading friends to seek help early is a good step towards convincing them to find a solution to a problem so that the situation doesn't get any worse. Do you know how to persuade a friend who is in need of help to become motivated to take a positive action? You can use the following communication techniques to persuade someone to seek help:

- 1 Start a conversation – preferably somewhere private or quiet. You could say: 'What's up? How you going? Haven't seen you for a while. Is there anything that's wrong?'
- 2 Listen without judgement. Guide the conversation by acknowledging you understand the problem. You could say: 'How long have you been feeling like this? How has it made you feel?'
- 3 Acknowledge the problem and encourage action. Sum up the issue and ask what actions they are considering. Encourage them to take the first step. You could say: 'What do you think you should do? Have you considered seeing a doctor or teacher to discuss the problem?'
- 4 Follow up. Ensure that you get back to them soon on how things went. You could say: 'Did you get a chance to make an appointment? What were some possible solutions?'
- 5 What if they don't want to talk? Communicate your concern for them and that you would like to help because you care about them. Don't criticise them for not opening up. You could say: 'I'll catch up with you soon to see how you are going'. Or 'Would you prefer to talk with someone else?'

## Active listening

Adolescence is also about discovering the different dimensions of interpersonal relationships – with parents, with friends and with peers. In order to develop strong positive relationships, it is necessary to learn to explore ways to express yourself in a positive way.

To communicate positively, it is important to develop two fundamental skills: the ability to listen effectively and the ability to speak assertively. Active listening is when you are fully concentrating on what the speaker is saying. A good way to check that you are using active listening is to repeat back to the speaker your understanding of the conversation. This is called **paraphrasing**. Active listening is demonstrated by both verbal and non-verbal actions. Verbal actions include:

---

**paraphrasing** restating the meaning of verbal or written information in your own words

- restating key points to confirm that you understand the speaker (e.g. 'So, if I understand you correctly, you are saying that the problem is ...')
- stating that you value their opinion (e.g. 'I really appreciate you speaking with me')
- asking questions to help you better understand the situation (e.g. 'What do you mean when you said ...')
- repeating the feelings expressed in the conversation and not passing judgement (e.g. 'I can see that you feel bullied because ...')
- providing feedback on what has been said and provide options (e.g. 'If you do nothing about it then ... some options might be to ...').

Non-verbal actions include:

- letting the person know that you are interested in what they are saying by maintaining direct eye contact
- leaning or moving closer towards them
- maintaining an open body posture (not folding arms)
- providing all your attention to the speaker and not being distracted
- nodding to confirm you understand what is being said.



**Figure 3.5** To communicate positively, it is important to listen effectively and speak assertively.

## 3.4

### DEEP LEARNING

- 1 The aim of this task is to demonstrate effective communication skills by active listening. Work in pairs.
  - a Formulate a list of questions that will allow you to get to know more about a fellow student.
  - b Conduct interview-style questions and answers.
  - c Demonstrate active listening skills.
  - d Apply active listening skills to clarify and confirm points.
  - e Create a 60-second video or podcast introducing the student to the class. Start the presentation with 'My guest today is ...'.
- 2 Your partner then completes the same activity on you.
  - a Reflect on the effectiveness of this task by debriefing with your partner about the accuracy of the information he/she presented about you.
  - b What would you do differently next time you use active listening skills?

## Assertive communication

The way you communicate with your family and peers reflects something about you as a person. Positive communication is by far the most effective way of expressing your opinion. By remaining silent you are leaving doubt in the mind of the listener as to what you are thinking or feeling and this can give rise to a misunderstanding. By being aggressive you can be seen to be threatening and controlling.

Positive relationships are characterised by effective use of assertive communication skills. This allows for the creation of clear boundaries for expressing likes and dislikes. Individuals that possess assertive communication skills are more likely to make positive decisions when it comes to situations where they don't know what to do.



### Aggressive communicators have the ability to:

- Blame or accuse others
- Threaten others to get what they want
- Use name-calling or a loud voice to get across their opinion
- Ignore the opinions of others

### Consequences:

- Generate fear or resentment
- Inability to develop socially acceptable skills for maturity
- Find decision-making difficult as can't take into account others opinions
- Develop low self-esteem

### Assertive communicators have the ability to:

- Say 'no'
- Clearly state their request or needs
- Speak with a calm and clear voice
- Be honest and direct
- Demonstrate self-confidence
- Listen attentively to the opinions of others before responding

### Consequences:

- Generate acceptance by valuing the rights and opinions of others
- Gain respect of your peers
- Feel proud of your ability to stand up for yourself
- Develop high self-esteem
- Reach positive decisions more easily

**Table 3.1** Consider the consequences of two different styles of communication.

## 3.5

## DEEP LEARNING



Use the steps in the ABCDE decision-making model on page 41 to reach the best strategy to respond to the following scenarios that you may encounter when using social networks and technology. Try to incorporate examples of assertive communication and active listening skills when preparing your response.

- 1 Your Facebook page has been tampered with without your permission. You suspect you know who has done it.
- 2 You have received a large number of text messages in one day from a girlfriend.
- 3 Your friend feels under pressure to constantly check her social network site to ensure she doesn't offend anyone by not replying immediately.
- 4 You read an email that has been CC'd to your group of friends that discloses confidential information that you revealed to a close friend.
- 5 Your chat room 'buddy' who you have communicated with for months wants to meet in person.

## 3.3 Strategies for emergencies

**emergency** an unexpected, serious, dangerous or life-threatening situation that needs immediate attention

Would you know what to do in an **emergency**? An emergency is considered to be any situation where there is an unexpected, serious, dangerous or life-threatening event that requires an immediate response. When seeking help for yourself and others, you will need to stay calm, think logically and get help from bystanders or by calling for assistance.



Figure 3.6 Preparation for an emergency is a vitally important step.

## Household emergency plan

In preparation for an emergency that impacts you and your family, you would be well advised to develop a household emergency plan. This is a plan that can be applied in a range of scenarios to assist you with dealing with possible emergencies caused by a range of possible emergencies in your home. The more prepared you are, the better you will be in managing an emergency situation.



**Figure 3.7** Downloading an emergency event app is a way of preparing for emergencies.

### STEP 1: Know your risks

Research the local community to find out what risks are more likely to occur in your local area. Do you live in a high fire region, are you in a flood-prone area, or are you located near the coast where tsunamis or cyclones can occur? Is there a high rate of home invasion?

### STEP 2: Meeting places

If you can't get to your home or need to evacuate your home and can't contact family, consider a safe place where you could meet them. Discuss options with family.

### STEP 3: Know your utilities

Do you know the location and how to turn off the water, electricity and gas utilities in your home?

### STEP 4: Evacuation plan

If you had to evacuate your home, do you have alternative routes in case an exit point is blocked or impassable?

### STEP 5: Where do I get information from?

Compile a list of information sources that can keep you updated on the emergency. List radio stations, council websites, the Bureau of Meteorology (BOM) website, relevant apps for smartphones and identify your local emergency authority contact phone number.

### STEP 6: Warning systems

Are you familiar with Standard Emergency Warning Signal (SEWS)? This is the wailing siren used throughout Australia for various emergencies including flood, cyclones and severe storms. This siren is sounded on the radio and television before an announcement regarding the emergency. Pay particular attention to the message that follows and act on the advice. A tsunami warning system has been put in place for Australian coastal regions.

### STEP 7: Neighbours

Have a list of contact numbers for your neighbours. They form a useful network of help in emergencies. Also have a checklist of family or friends that you can check on.



- 1 Record the information for each step of the Four Step action Plan.
- 2 Explain and discuss this action plan with your family to make thorough preparations.
- 3 An emergency survival kit is part of the household plan. Refer to an example via the link at <http://cambridge.edu.au/redirect/?id=6669> to prepare your own household emergency kit.
- 4 Do you have recommendations for additional items to be included in your emergency kit that are not listed?
- 5 Prioritise the top 10 items and be able to justify why these items are 'must haves'.
- 6 Compare your list with others to create a list of '10 Best Survival Kit Contents'.

Photocopying is restricted under law and this material must not be transferred to another party.

This systematic approach considers the following:

- 1 Pause and plan to allow for an overall evaluation of the scene. Stop, think and assess the situation.
  - Are you or others at risk?
  - Do you need to call triple zero (000)?
  - What has happened?
  - How many casualties are there?
  - What are the injuries or conditions you see?
- 2 Is the area safe? You do not want to become another casualty.
  - Check for hazards, such as traffic, fallen power lines, syringes, fire and leaking fuel.
- 3 Phone for help by calling 000 and be prepared to answer the four Ps questions below:
  - place – exact location of the emergency, including street address, landmark or closest motorway exit
  - problem – what has happened
  - people – how many people are involved, and their ages and conditions
  - progress – what has been done so far to assist.
- 4 Check for life-threatening injuries – follow a sequence of actions referred to as DRSABCD action plan. See Figure 3.9.

## DRSABCD action plan

In an emergency  
call **triple zero (000)**  
for an ambulance



Learn first aid | 1300 ST JOHN | [www.stjohn.org.au](http://www.stjohn.org.au)

Figure 3.9 St John's DRSABCD Action Plan



### Did you know?

Australia has several other numbers that can be called to contact emergency services; for instance, 132 500 for storm and flood assistance and 1800 333 000 for Crime Stoppers in order to help solve a crime. If a person is deaf or has a speech/hearing impairment they can call 106 in an emergency as this is a text emergency call that can be made from teletypewriters.

You only call 000 in an emergency in Australia. You can also elect to call the international standard emergency number 112, but only from a digital mobile phone. This number is accepted in some parts of the world, including Australia, as a secondary emergency number. When calling emergency services, remember the four Ps: place, problem, people and progress. Ensure that you remain on the line until instructed by emergency services to hang up.

## Unconscious patient

An unconscious person is considered a medical emergency. An unconscious person looks as though they are sleeping and does not respond. Follow the DRSABCD action plan in Figure 3.9. To assess the 'R' in this plan you need to check if the patient responds using 'talk and touch' method. To remind you of what to say and do, follow the acronym COWS:

- C** Can you hear me?
- O** Open your eyes
- W** What's your name?
- S** Squeeze my hand if you can hear me.

If the person does not respond, they are unconscious and you should continue with the rest of the action of DRSABCD. A patient can be unconscious for a few seconds, in the instance of when you faint or get a head knock in football, or for lengthier periods.

Common causes of unconsciousness include:

- car accidents
- blow to the head
- severe blood loss
- alcohol poisoning
- drug overdose.

Temporary unconsciousness can also occur in the following situations:

- low blood sugar
- dehydration
- seizure
- stroke.



Figure 3.10 Every household should have a well-equipped first aid kit.

To recognise a medical emergency and administer necessary **first aid** to help someone is a challenging situation that requires good decision-making skills. If you do not know or have forgotten what to do, calling emergency services can assist by having them explain exactly what you should do over the phone.

## The recovery position

The recovery position is a lying or prone position used to maintain an open airway when a patient is breathing and has a pulse. The recovery position could be used after an unconscious person regains consciousness by following the steps below:

- 1 Kneel beside the patient, midway between the hips and the shoulders.
- 2 Place the arm furthest away at right angles to body.
- 3 Place the arm closest to you across chest to point of shoulder.
- 4 Lift the nearer leg at knee so the foot is aligned with the opposite knee.
- 5 Using the hip and shoulder, roll the patient away from you on to their side.
- 6 Stabilise the patient by placing their knee at right angles and using their hand as support.
- 7 Maintain slight head tilt and monitor airway and breathing.



**Figure 3.11** How to move a patient into the recovery position

**first aid** the initial care or treatment of someone who is ill or injured



### HPF and science

The air we breathe contains approximately 21% oxygen and the remainder is nitrogen. The lungs use about one quarter of the oxygen in each breath so the air we expire contains approximately 16% oxygen. This is sufficient oxygen to be effective when performing CPR. The brain is very sensitive to variations in oxygen levels. The risk of brain damage occurs after as little as four minutes without oxygen, so administering CPR as soon as possible is the key to minimising brain damage.

## Common situations requiring first aid

### Cuts and abrasions

When dealing with external bleeding, first-aid principles aim to reduce blood loss. Clotting agents in the blood cause the slowing of bleeding but can be further assisted by:

- applying pressure
- elevating the injured part
- restricting movement
- immobilising the limb or part.

Lie the patient down and apply a dressing to the wound. If the wound continues to bleed, DO NOT remove the dressing, but simply apply another dressing over the top.

### Soft tissue injuries

Sprains are the result of an over-stretching or rupture of a ligament. Ligaments connect bones with bones. A strain is a stretching of a tendon. Tendons join a muscle to a bone. The site of a strain or sprain will be tender to touch, with possible swelling, discoloration and an inability to move the joint.

Treatment consists of RICER management:

- R** Rest the casualty and the injured joint.
- I** Ice – apply ice packs wrapped in cloth to the injury for 15 minutes every two hours for the first 24 hours.
- C** Compression bandages should be applied to the joint to extend well beyond the injury.
- E** Elevate the injured part.
- R** Refer to medical assistance for further treatment.



Figure 3.12 Applying an ice pack

### Recognising signs of a heart attack

A heart attack is not always a sudden chest clutching experience as depicted in the movies. The signs of a heart attack can come on over minutes or hours. If you know what they are, you can help others. The symptoms of a heart attack may include:

- discomfort or pain in the centre of the chest
- a tightening of the chest – ‘like an elephant is sitting on it’
- discomfort or pain in the upper parts of the body including shoulder, neck and jaw
- shortness of breath
- cold sweat.

If you suspect a heart attack, call 000.

## Recognising signs of a stroke

A stroke is a serious medical condition requiring immediate action. A stroke occurs when the blood supply to the brain via arteries is interrupted or blocked.

You can help if you recognise signs of a stroke using the FAST acronym below:

- F** Face – the mouth has drooped.
- A** Arms – they can't lift both arms.
- S** Speech – their speech is slurred or difficult to understand.
- T** Time – is critical. If you recognise any of these signs call 000. Care within the first three hours of a stroke can have a dramatic impact on a person's recovery.

## Anaphylaxis

Anaphylaxis is a serious allergic reaction that develops rapidly and usually occurs between 20 minutes and two hours of exposure to the **allergen** and may be life threatening.

**allergen** a substance that causes an allergic reaction (e.g. medication, food)

The symptoms include:

- swelling of the lips, face and eyes
- bumpy, red and itchy skin
- difficulty breathing
- coughing sneezing or watery eyes.

Food allergies account for one third of cases of anaphylaxis. There are nine foods responsible for 90% of all severe allergic reactions – peanuts, tree nuts, fish, shellfish, milk, soy, sesame, wheat and eggs. Other causes include insect stings, bites and drugs, such as aspirin.

First-aid treatment includes:

- Seek an adult's help immediately or send someone to do this.
- Locate the patient's medication or get it immediately.
- Adrenaline can be injected into the outer mid-thigh using an adrenaline autoinjector (such as an EpiPen® or Anapen®) – you may need to do this for the patient if their condition doesn't allow them to self-administer.
- Place patient in a comfortable sitting position and monitor their breathing until medical assistance arrives.

**Figure 3.13** Administering an EpiPen



## Diabetes

**insulin** hormone regulating glucose level in blood

**hyperglycaemia** a type of diabetic reaction where blood sugar levels are very high as a result of insufficient insulin

**hypoglycaemia** a type of diabetic reaction where blood sugar levels are very low as a result of high levels of insulin

Every day, on average, 280 Australians are diagnosed with diabetes. Diabetes is a disorder of the pancreas. The pancreas is responsible for producing **insulin**, which converts sugars into energy. In a diabetic, insulin production is impaired, and the level of sugars in the blood builds up. This is called **hyperglycaemia**. The more common type of diabetes is the result of too much insulin, which causes very low blood sugar. This is called **hypoglycaemia**.

Symptoms of high blood sugar (hyperglycaemia) are:

- excessive thirst
- frequent need to urinate
- drowsy with rapid pulse
- smell of acetone (nail polish remover) on breath.

Symptoms of low blood sugar (hypoglycaemia) are:

- feeling faint
- feeling weak
- feeling hungry
- rapid pulse
- numbness around the lips and fingers
- confusion
- unconsciousness (in serious cases).

Treatment consists of DRSABCD. If you don't know whether the patient is suffering high or low blood sugar, give them a sweet or sugar drink (e.g. soft drink, not diet drinks). If they do have low blood sugar this will have an immediate positive effect; and if they have high blood sugar, it will not cause any further serious harm.

### 3.7



## DEEP LEARNING

- 1 Collaborate with peers to discuss strategies for dealing with the following emergency situations:
  - a You are on school camp and someone starts choking.
  - b You are on the football field and a team member has sprained their ankle.
  - c You are at the beach and a surfer brings to shore an unconscious fellow surfer.
  - d At a party you notice someone is vomiting.
  - e At the pool an unsupervised toddler is struggling to make it to the side.
  - f On an excursion your friend feels dizzy and looks white.
  - g At the bus stop, an elderly person is holding their chest.

## 2 Is it an emergency?

- a Identify from the scenarios in Table 3.2 which situations you consider to be an emergency and justify your response.
- b Work in a group to provide an action plan for dealing with each situation.



A stranger is passed out from alcohol on the footpath at a party.



A classmate is sitting by himself with his head in his hands, looking dejected.



A teenage boy is showing strong affection for a girl at a party where they just met.



A friend is lying motionless next to tablets on the floor.



You overhear teenagers talking about a friend who threatened self-harm.

**Table 3.2** Identify which you consider to be an emergency scenario.

## 3.4 Strategies for managing emergencies

A study by British Red Cross in 2010 highlighted that one in seven young teens (aged 11–16) have been in an emergency situation as a result of a friend drinking too much alcohol. The study showed that in a 12 month period from 2009 to 2010, more than 532 000 British teenagers were left to cope with a drunken friend who was sick, injured or unconscious. Would you know what to do if you were in this situation?



### Did you know?

In Case of Emergency (ICE) is a universal convention. You enter the letters ICE into the 'Contacts' of your mobile phone with numbers for a person you would like contacted in case of emergency. Should you become unconscious or unable to speak in an emergency situation, it assists medical services to notify a relative or friend of the situation.

## 3.1

### CASE STUDY



Form into small groups. Read and discuss the following case study involving Jenna and her friends.

4 p.m. Jenna arrived home after her soccer match. It was a really hot day and she wished she'd packed a water bottle. She was texting her friends to see what time they would meet. Sarah said 5 p.m. at her house.

5 p.m. Jenna had raced to try to get ready. She knew she wouldn't make it on time, but her friends would wait. They always went everywhere together. They planned to meet at Sarah's house because her parents were away for the evening. Sarah's older brother, Matt, had arranged some drinks.

6 p.m. When Jenna arrived at Sarah's house she could tell her friends had been drinking for quite some time. They encouraged her to 'catch up' so she put away three glasses in quick succession.

8 p.m. Jenna and her friends arrive at the party. They didn't really know too many people as they were mostly friends of Sarah's older brother. They didn't mind because they were having a fun time together.

10 p.m. The party was just getting going. Jenna and her friends enjoyed the dance music. She accepted drinks from every guy that she danced with. She saw Sarah go outside with a guy from school, two years ahead of her.

12 a.m. Jenna wasn't feeling very well. She had no idea of the time or how she was getting home. She thought they would arrange this on the night but she hadn't seen Sarah or any of her friends for quite some time. She made her way to the toilet just in time. She didn't recall what happened next.

## Questions

- 1 Identify the physical, social and emotional risks that Jenna and her friends exposed themselves to.
- 2 List the influences on a person to consume a quantity of alcohol that makes them unconscious.
- 3 Recommend a plan to avoid another night similar to this.
- 4 Outline further sources for help that Jenna could get in order to avoid this experience.
- 5 Suggest some strategies to ensure that Jenna and her friends had fun, enjoyed themselves and stayed safe before attending another party.

**Figure 3.14** Using your better judgement can prevent risks and danger.



# CHAPTER REVIEW

- Our brains undergo growth and change through adolescence and into adulthood.
- Brain development can affect emotions and may lead to risk-taking behaviour and negative outcomes.
- The ABCDE decision-making model is helpful in assessing situations and making safe decisions.
- Self-esteem is how we perceive ourselves.
- Self-esteem can be heavily influenced by our interactions with family and peers.
- Low self-esteem can be a result of negative interactions with others, and can lead to a negative self-image.
- Active listening is essential in making sure the person who is seeking help feels that they are being understood.
- Assertive communication allows us to demonstrate confidence and say no to unsafe situations.
- Aggressive communication places blame and ignores the opinions of others.
- It is important to have strategies in place for emergencies and have knowledge of basic first aid.

# REVIEW QUESTIONS

## SECTION A – Multiple-choice questions

Choose the correct alternative.

- 1 The ability to identify and understand the feelings of others is called:
  - a sympathy
  - b empathy
  - c emotional awareness
  - d self-concept
- 2 Active listening is an important communication skill that requires the listener to:
  - a pre-judge what the person is saying
  - b concentrate hard on what the person is saying in order to understand, respond and remember what is being said
  - c interrupt to agree with what is being said
  - d provide a recount of their own experience
- 3 Adolescent brain development has an impact on which particular behaviour/s?
  - a decision-making
  - b risk taking
  - c expressing emotions
  - d all of the above
- 4 The symptoms of an anaphylactic reaction include:
  - a swelling of the lips and eyes
  - b difficulty breathing
  - c watery eyes or sneezing
  - d all of the above
- 5 The most common cause of anaphylactic reactions is:
  - a pet allergies
  - b food allergies
  - c insect stings
  - d pollen allergies
- 6 An auto-injector applied into the mid-thigh of a patient suffering from anaphylaxis contains:
  - a sucrose
  - b adrenaline
  - c morphine
  - d saline solution
- 7 The frontal cortex of the brain is responsible for:
  - a motor control and movement
  - b understanding language
  - c memory
  - d decision-making
- 8 Problem-solving and planning are controlled by a part of the brain that develops:
  - a early in adolescence
  - b late in adolescence
  - c during childhood
  - d during adulthood
- 9 Following the DRSABCD action plan, the 'B' represents checking for breathing. To check if a patient is breathing you must look for chest movements, listen for sounds of breathing from the mouth and feel for:
  - a a pulse in the neck
  - b air on your cheek being expelled from the mouth
  - c a response to your shake and shout command
  - d obstacles that block the airway
- 10 Bleeding openly from a wound requires what immediate basic first aid treatment?
  - a washing and dressing
  - b elevation and compression
  - c antiseptic and bandage
  - d calling for assistance

## SECTION B – Short-answer questions

- 1 Explain what each letter in the DRSABCD Action Plan stands for.
- 2 List five essential items of an emergency survival kit.
- 3 Justify why communication skills are considered important when persuading someone to seek help.
- 4 Identify examples of behaviours that indicate a friend may need some support or help.
- 5 Suggest ways that social media could assist someone in seeking help.

## SECTION C – Higher order thinking (HOT) questions

- 1 Create a running sheet for your 14th birthday party at home. A running sheet is a detailed outline of all the tasks that need to be completed in the lead up to and on the day of the event, including who is responsible for each task. Consider the safety of your guests and the home when planning activities. Consider some possible emergency situations that may arise and how you can best plan for these contingencies.
- 2 Evaluate the contents of the first-aid kit in your home. What medical condition/s would it currently provide assistance for and what additional resources would be needed to make it more functional?