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NDLERF

Policing, volatile substance misuse,
and Indigenous Australians

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Policing, volatile substance misuse, and Indigenous Australians

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Executive summary

Chapter one: Introduction

Volatile substance misuse is the inhalation of substances containing hydrocarbons to induce a state of intoxication; and there are a number of acute and chronic health and social problems with which it can be associated.

Police have an important role to play in the minimisation of both volatile substance misuse and related harm – a role that has been established within the framework of Australia's National Drug Strategy.

The objective of this project was to enhance the understanding of the law enforcement sector concerning the extent and nature of petrol sniffing and other inhalant misuse by Aboriginal and Torres Strait Islander Peoples predominantly in rural and remote, but also urban communities.

A qualitative case study approach was taken to the project, which was conducted in Warburton in the Ngaanyatjarra Lands in Western Australian, four communities in the Anangu Pitjantjatjara Lands in South Australia, Kintore and Alice Springs in the Northern Territory, Mount Isa and Cairns in Queensland, and Perth in Western Australia.

We conducted 160 interviews with a total of 195 people, including: police officers; Indigenous police liaison officers or community constables; representatives of Indigenous community-controlled organisations; Indigenous community members; representatives of non-Indigenous non-government organisations; and representatives of government agencies.

Chapter two: Volatile substance misuse as a policing issue

Volatile substance misuse poses a number of challenges and dilemmas for police services because: volatile substances are readily available and their inhalation is not illegal; users are usually young and from marginalised and/or Indigenous backgrounds; volatile substances are not used as frequently as other drugs and the occurrence of use is often sporadic; and there is little evidence to guide practice.

Volatile substances include volatile solvents, gases, aerosols and nitrites. Inhalants typically produce pleasurable effects by depressing the central nervous system, with a rapid 'high' followed by drowsiness, disinhibition, light-headedness and agitation.

Volatile substance misuse can result in both acute and chronic health problems and can lead to death. It has consequences for users, their families, local communities and the wider society that are out of all proportion to the number of users.

Data on the prevalence of volatile substance misuse is notoriously poor and likely to underestimate use. However, a large survey of students aged 12-17 years found that: 21% had deliberately sniffed inhalants at least once during their lives; 15% had done so at some time in the past year; 9% had sniffed inhalants within the past month; and 6% had done so in the past week. Volatile substances are often used with other drugs. There are several categories of users: 'average' young people who experiment; marginalised young people; petrol sniffers in remote communities; and, disadvantaged adults. There is some evidence that volatile substance misuse is increasing and expanding to wider geographic and age groups.

Volatile substance misuse is not a criminal offence. However, there is legislation in each jurisdiction relating to the public intoxication and child welfare aspects of use – although there is some debate about how satisfactory this is. Governments in Victoria and Queensland have recently amended legislation, and the Northern Territory has introduced new legislation, with the aim of providing police with more clearly defined and appropriate powers for responding to volatile substance misuse.

Chapter three: Police responses to volatile substance misuse – a literature review

While numerous reports attest to the frustrations experienced by police in attempting to respond to incidents of volatile substance misuse, few studies offer empirical evidence about the available short-term options. We identified five reports that deal with various aspects of 'reactive' interventions. The content of each was varied and it was difficult to draw firm conclusions from them but a common theme was apparent. That is, the need for clear definition of the roles and responsibilities, not only of police, but also of other agencies, in particular health and welfare agencies, and for mechanisms to ensure that these agencies and procedures are utilized to address the medium and longer-term needs of inhalant users.

The number of reports on 'proactive' responses to volatile substance misuse was considerably larger but most provided only descriptions of interventions and few provided details of either the processes involved (although two provided information on the steps to be taken in applying a community development approach) or outcomes. They emphasised the importance of: cooperation with other agencies and community groups; planned action; a focus on supply reduction; the provision of police support for community interventions; concerted police action (as in the case of a targeted operation in the Anangu Pitjantjatjara Lands); the formalisation of cooperative arrangements; and the effectiveness of community night patrols.

As well as reports on reactive and proactive policing responses we also identified guidelines and protocols developed by: the Victorian Department of Human Services relevant to management of volatile substance misuse; and by Queensland Police and Ambulance Services, which have jointly developed an immediate response protocol for dealing with volatile substance misuse.

The literature review highlights the fact that few policing interventions for volatile substance misuse have been systematically evaluated. There is an important need for evidence on which to base policing practice in this area and there is no reason why any intervention should not be evaluated. We provide a brief guide and some references to facilitate the evaluation process.

Chapter four: Seven regional case studies

The policing of volatile substance misuse is conducted over all state and territory jurisdictions – each with its own legislative framework. Within these jurisdictions, policing takes place in a range of environments – from small remote communities to metropolitan cities. Within these again, there are different conditions under which officers must operate, different relationships between officers and Indigenous communities, different community responses to volatile substance misuse, and differential availability of other services and personnel to assist in addressing these problems. In Chapter 4, we present case studies from each of the areas in which we conducted fieldwork to give readers a flavour for these differences and similarities. These case studies are not summarised here, as findings from them are incorporated in subsequent chapters of the report.

Chapter five: The policing context of volatile substance misuse

The extent of volatile substance misuse in the communities we visited reflected that reported in the literature. Data on prevalence were not systematically recorded and within communities there were wide variations in estimates. There was considerable variation in levels of use between communities and fluctuations in use within communities. There appear to have been significant reductions in the level of use over time in Warburton, and to a lesser extent in the Anangu Pitjantjatjara Lands. Nevertheless, in all communities it remains an on-going problem.

Volatile substances were generally the drug of last choice for users and were used primarily because they were cheap and available. A focus on reducing the supply of volatile substances can result in users switching to other drugs. Thus, strategies to address volatile substance misuse in particular should be part of a broad approach to reducing substance misuse in general.

Despite some dissent, it was most commonly held that *there is a wide, shared responsibility for addressing the problem*. Where there was disagreement, it focused upon the extent to which other groups or individuals were shouldering – or were able to shoulder – their share of responsibility. The responsibility of police in particular is three-fold: to protect the safety of the broader community and its individual members; to deal with offences that are indirectly, or directly, associated with volatile substance misuse; and, to prevent crime that might be associated with, or arise from, volatile substance misuse.

Particularly in remote areas, the role of police officers is often expanded into areas that normally would be regarded as the responsibility of other agencies. Decisions about the extent to which they get involved should not be left to the discretion of individual officers. The extent of intervention needs to be negotiated with members of community councils and representatives of health and welfare agencies, and there is a need to establish forums where this can be discussed.

While some responsible family members were reported to have supplied volatile substances to users, this was not condoned by the vast majority of Indigenous people.

Communities have taken action to varying degrees, but the extent of this is contingent on: the prevalence of volatile substance misuse in the community; the relative strength of community organisations; the support given by other agencies; and the resources and trained personnel available.

Community-based interventions have included: the introduction of by-laws which make petrol sniffing and the sale of petrol for purposes of inhalation illegal; prohibition of the sale of regular petrol and allowing only the sale of fuel that cannot be inhaled; and, the development of a range of broadly targeted interventions including recreational activities and family support services.

Community members are reluctant to intervene in 'particular' incidents in which users are either actively using volatile substances and/or are intoxicated. Reasons include fear of violence and culturally-based views on autonomy. They see this as the role of the police.

Community members want police involvement in volatile substance misuse. Although, there are sometimes conflicting views about the extent of such intervention. Where such conflict exists, senior officers need to negotiate the role of the police with communities and to ensure that all sections of them understand the strategies to be employed.

In remote communities, the presence and support of police officers can have an effect beyond their specific roles. A police presence can encourage community members to take action. However, its absence can weaken the resolve of community members to take action against users.

Effective policing of volatile substance misuse is dependent upon positive relationships between police officers and members of Indigenous communities, which in turn confer recognition of police 'authority' to intervene (not simply the 'power' to do so).

The authority of police officers working in Indigenous communities is enhanced by positive policing styles. Those who developed good rapport with young people, demonstrated they cared, were approachable, non-judgemental, respectful and consistent were better able to manage incidents and participate in proactive strategies, and less likely to be threatened.

Policing styles that undermined relationships and effectiveness included limited communication with communities and other agencies, failure to observe local community etiquette, overtly negative attitudes to users and their behaviour, and what was several times referred to as 'heavy-handed policing'. Most complaints about 'heavy-handed policing' were made against junior officers, suggesting that this can be addressed by appropriate training and mentoring.

In all jurisdictions in which the study was conducted, police services employed Indigenous people to work in their own communities as community constables or liaison officers. However, there was considerable variation in the roles they played, the expectations placed upon them, and views of their effectiveness. They were often placed in difficult positions as they faced conflicting pressures to intervene or not from family and community members and police. Use of such personnel should not be a major component of the police response to acute incidents of volatile substance misuse. They can be employed more fruitfully in building community-police relations and in proactive responses to the problem.

While some training is provided in all jurisdictions in which the study was conducted, police officers at various levels reported that they – or those they supervised – had insufficient training to deal with volatile substance misuse. They identified a need for training on: the effects of volatile substances; the assessment of users and their needs; 'dos and don'ts' when dealing with intoxicated users; clarification of police powers; the background to the problem; and, working with young people and Indigenous communities. Such training would be best provided 'in-service' and, in this regard, that provided by the Queensland Police Service has much to recommend it.

Chapter six: Reactive policing – responding to intoxication

Volatile substance misuse incidents come to the attention of police in the context of attending to other jobs, routine patrolling, calls to attend to volatile substance misuse-related incidents or calls to specifically attend to volatile substance misuse. Also, people who have been using sometimes present themselves to officers for assistance. Decisions about whether or not to intervene, and the extent of intervention depend on factors such as: the legislative and administrative frameworks within which officers work; threats to safety, distance officers must travel to incidents; the ranking of the seriousness of incidents in relation to other policing priorities; local police culture; perceived community expectations; and perceived consequences of intervention.

When encountering users, the objectives of intervention by officers in particular incidents vary according to the nature of the situation, but they include: ensuring the safety of users and other members of the public; the protection of property; and dealing with any offence that has been committed.

The way in which officers engage with users is critical to the outcome of any intervention. Key principles that should guide such intervention include: careful assessment and monitoring of any encounter or incident, including monitoring their own behaviour; putting first their own safety and that of their colleagues, users and members of the general public; treating users with empathy and

respect; keeping users calm; maintaining effective communication; formulating a clear plan of action; and maintaining control and not acting in a manner that might exacerbate any incident. A list of particular 'dos and don'ts' based on these principles is provided in Table 4.

We identified a range of responses that, theoretically, are open to officers. These response are to:

- take no action or to move users on;
- enlist the aid of other agencies, such as night patrols;
- place users in non-police protective custody;
- place users in police protective custody;
- charge users where an offence has been committed; and/or
- refer users to other agencies, such as welfare or treatment services.

However, in most localities this range of options is limited. Without the provision of safe places and referral options by governments or other agencies, the actions of the police are constrained. The limited range of options – combined with beliefs that intervention is not their role, or is likely to be ineffective, and fears for their own safety – can lead some officers to avoid intervention.

The policing of volatile substance misuse is more effective when a consistent approach is employed, and when officers are known to members of the communities in which they work.

Positive engagement with users and consistency of response can be achieved with training and the use of clear protocols. Where possible, these should be standardised across jurisdictions – especially where people frequently move between them, as in the tri-state area of Western Australia, South Australia and the Northern Territory. We are aware that there are existing protocols – both formal and informal – in all jurisdictions in which the study was conducted and we recommend that these be reviewed and, if necessary, amended in the light of the material presented in Chapter 6.

Police intervention in incidents of intoxication is not a solution to the problem of volatile substance misuse, but it is a necessary part of harm reduction.

Chapter seven: Proactive policing

Proactive policing activities include those for which the police have prime responsibility and those in which they have a supportive role. The former include supply reduction, routine patrolling, targeted operations and, to a lesser extent, the use of other legislation to control misuse – activities in which there is some overlap with reactive strategies. Proactive activities in which police have a supportive – though no less important – role include: recreational activities; school and community-based education; coordination, cooperation and support of other agencies; and working with communities.

Supply reduction can be a challenge because volatile substances are widely available and cheap. However, supply reduction strategies can result in reduced sniffing, and sniffers becoming less intoxicated and causing less harm to themselves and others when they do sniff. There are two aspects to supply reduction: policing illegal supply; and restriction of availability from retail outlets.

The supply of petrol or other volatile substances for the purposes of inhalation is illegal under various pieces of legislation. Such supply is of particular concern in remote communities but it is also an issue in urban areas where there have been reports of older men supplying volatile

(and other) substances to young people in exchange for sexual favours. Gathering intelligence on, and prosecuting such people can be difficult. However, police have had some success and effectiveness can be enhanced by good community relations.

Police, working alone or with community groups, have used various strategies to restrict availability – including 'accords' with retailers, development of brochures, and talking directly to retailers of volatile substances. Problems with the approach include: the unwillingness of some retailers to participate; junior staff lacking confidence to question customers; and substitution. Nevertheless this can be an effective strategy and should be pursued.

Generalised and targeted patrolling cannot address the causes of volatile substance misuse, but can increase safety for communities and the users themselves and can prevent some crime that might be associated with volatile substance misuse. Care needs to be taken to not victimise young people or infringe upon their rights to associate and to access public space.

Dedicated police operations targeting substance misuse, violence and other crime have been successful in significantly reducing the level of recorded crime in the short-term and in identifying persons involved in sniffing. However, when police resources were reduced at the completion of such operations, crime and sniffing quickly increased. These operations had some positive effect in pressuring health and welfare agencies to make greater efforts to address volatile substance misuse.

Trespass legislation and restraining orders have been used to keep users and individuals known to be supplying volatile substances away from particular areas.

The establishment of special units or the assignment of individual officers to address problems among 'at-risk' minors (rather than volatile substance users *per se*) have been reported as being successful. These have important resource implications and are most suitable in locations where sufficient resources can be allocated to them.

Police have been involved in a broad range of recreational and cultural activities. Such activities are not only valuable to participants, but contribute to establishing positive relationships between police and users and communities. Evidence from published research suggests that the use of recreational activities should be: sensitive to the needs of particular communities; seen as a preventive measure and targeted at all young people – not simply chronic 'sniffers' who are unlikely to be attracted to them; and not be regarded as a substitute for the treatment for 'sniffing'.

Police commonly engage in school-based drug education and sometimes community education. This can be effective if officers are trained to use evidence-based teaching methods. However, if not it can be counter-productive. As with recreational activities, these initiatives can be important for building links with young people and communities.

Coordination of police responses with, cooperation with, and support of other agencies are essential to and/or can greatly enhance the response to volatile substance misuse and can result in more effective use of limited services and resources. Strategies to facilitate coordination and cooperation include:

- establishing formal memoranda-of-understanding between agencies regarding their respective roles;
- regularly attending inter-agency meetings to exchange information and explore ways of enhancing current responses;
- providing support to community groups; and
- taking a lead role in the development of new initiatives – including calling meetings to discuss the volatile substance misuse and to canvas views on possible responses.

Coordination of police responses with those of other agencies and community organisations requires information sharing, inter-agency cooperation and the support of community groups and officers. Activities can include:

- interagency meetings;
- information sharing – discussing police activities and plans with communities and other agencies;
- development of protocols for dealing with sniffers;
- support of community action groups including community-based night patrols;
- support for non-government organisation initiatives, for example, police attendance when individuals are being collected to be taken to a treatment facility; and
- support for community leaders.

Coordination of responses is most effective where it is formalised.

Police can also play an important role by providing active support to community groups that aim to address volatile substance misuse – a role that can benefit both parties. Where community responses to volatile substance misuse have not been strong, officers can also work with communities and community organisations to promote particular interventions and/or to help them to develop strategies to implement them. Support of leaders and elders by the police can give them – and other community members – the confidence to take action. Tactics to avoid the creation of dependence include: development of memoranda-of-understanding that clearly state what is expected of community members in any initiative; and refusal to undertake planned activities if senior community members are not present.

A special aspect of police cooperation with communities involves working with night patrols. Relationships between police and patrols are most effective where there is a clear understanding and agreement between them as to their respective roles and the mutual support that they are able to provide.

Chapter eight: Summary and conclusions

The higher prevalence of volatile substance misuse observed among Indigenous Australians is a consequence of a complex inter-play of historical, social and economic factors, and it will not be solved until the problems stemming from these factors are more effectively addressed. This is clearly beyond the scope of policing. Nevertheless, police – in partnership with other agencies and Indigenous communities – have an important role to play.

There is little in the way of formal evaluation of current interventions. However, reports by police officers and community members indicate that – although it is not 'the solution' to the problem – policing can make an important contribution to the protection of individual users, the communities in which users live, and the wider society. In doing so, it must be remembered that just as there is 'no easy solution' to the problems associated with volatile substance misuse, there is 'no one solution'. What is required is a range of strategies.

Despite the collective experience of those working in the area, no one we interviewed suggested any radical new approach to the problem – no 'magic bullet'. Rather, the overall tenor of what we discovered was that there is an urgent need to improve the effectiveness of what is currently being done. This includes strengthening relationships and partnerships between key stakeholders – particularly between Indigenous community members and police – and the provision of mutual support. It also involves improved training for police officers to enable them to more confidently

deal with acute incidents, but also to work more effectively with community members. Finally, a greater commitment from the Australian and state/territory governments is required to provide a wider range of appropriate and accessible support services – without which police responses to volatile substance misuse are severely constrained.

Chapter one: Introduction

Volatile substance misuse is the inhalation of substances containing hydrocarbons to induce a state of intoxication. Volatile substances include petrol, paint thinners, glues and a wide range of other products that are readily available from a variety of retail sources. From a population perspective, the number of people who have ever used or who currently misuse volatile substances is relatively small when compared to the numbers who use psychoactive substances such as alcohol, tobacco and various illicit drugs such as cannabis. The majority of people who engage in the practice do so in their early teens, their use is experimental and infrequent and has no lasting effects. For these people, misuse of volatile substances is abandoned as they gain access to other, more desirable substances.

Nevertheless, there is a small proportion of people in the population who regularly, or chronically, misuse volatile substances. Among these are some whose use has continued into adulthood and who also use other drugs as well. However, volatile substance misuse is not evenly distributed within the population. The prevalence is higher among Indigenous Australians (as it is among Indigenous minority populations in countries such as Canada and the United States); and one form of it – 'petrol sniffing' – is more prevalent in some remote communities.

There are a number of acute and chronic health and social problems which can be associated with volatile substance misuse. These are summarised in Chapter 2 of this report. However, acute problems include the risk of self-harm or harm to others due to intoxication, and respiratory and cardiac distress. Intoxication may also be associated with (although not necessarily causative of) violent behaviour and other criminal offences. Chronic problems can include both cognitive and physical disability.

Generally, volatile substance misuse is seen primarily as a health and social problem rather than a legal or policing issue. Except in some remote areas – where Indigenous communities have passed by-laws prohibiting the practice – volatile substance misuse itself is not illegal. However, in all jurisdictions in which the study was conducted, it is illegal to sell or otherwise supply volatile substances for the purpose of inhalation. Police officers are responsible for the enforcement of both by-laws against volatile substance misuse (where they are in place) and laws against supply. Despite the views of some individual officers that, because it is not illegal, volatile substance misuse is not a policing issue, the police have an important role to play in the minimisation of both volatile substance misuse and related harm – a role that has been established within the framework of Australia's National Drug Strategy (Ministerial Council on Drug Strategy 2004). It is this role which we explore in this report.

Objective

This research project was commissioned by the National Drug Law Enforcement Research Fund (NDLERF). As set out in NDLERF's Request for Tender RFT 02/03 the objective of the study was to:

... conduct a project that will enhance the understanding of the law enforcement sector concerning the extent and nature of petrol sniffing and other inhalant misuse by Aboriginal and Torres Strait Islander Peoples predominantly in rural and remote, but also urban communities. The project will also seek to define best practice in addressing those issues (NDLERF 2003, p.18).

NDLERF (2003, p.12) stipulated that this was to be achieved by:

- Documenting the extent and nature of the policing problems that are associated with petrol sniffing and where it exists, the misuse of other inhalants, in a selection of communities.
- Ascertaining the perspectives of police and Aboriginal and Torres Strait Islander communities and their representatives as to how these problems could more effectively be addressed.
- Developing and documenting a knowledge base concerning past and present policing responses to this problem from Australia and internationally, including responses that have been successful and unsuccessful. This includes an examination of the efficacy of petrol sniffing by-laws.
- Providing an overview of any evaluations of these responses that have occurred and a critique of the appropriateness of those evaluation methodologies.
- Identifying the particular roles for police in such areas as:
 - the prevention of petrol sniffing and other inhalant misuse;
 - reducing the supply of petrol and other inhalants;
 - the enforcement of petrol sniffing by-laws;
 - community consultation and liaison and joint problem solving strategies;
 - dealing safely with intoxicated individuals; and
 - reducing violence, crime and public disorder.
- Developing recommendations for police to assist in the evaluation of future responses to these problems.
- Developing a resource for operational police that condenses the main findings of the project and contains best practice guidelines for these police to reduce the harms associated with petrol sniffing and other inhalant misuse.

The research team

The research team consisted of six principle investigators with experience in Indigenous health and substance misuse research (Dennis Gray, Gill Shaw, Peter d'Abbs, Anna Stearne and Anne Mosey) and policing and substance misuse research (Catherine Spooner) – one of whom (Anna Stearne) is an Indigenous Australian. This team was assisted by: Mona Phillips, Donna Campbell and Nathan Barrow – three Indigenous staff members, each of whom moved to other positions during the course of the project; Brooke Sputoré and Anthea Duquemin who assisted with interviewing; and David Brooks who conducted interviews and assisted with data analysis and the writing of the report.

Research methods

The first step in the research process was to conduct a literature review (see Chapter 3). As part of this, we identified several key reports which included sections on the policing and/or legislative aspects of volatile substance misuse (Parliament of Victoria Drugs and Crime Prevention Committee 2002; Australasian Centre for Policing Research 2004; National Inhalant Abuse Task Force 2005). It was not our intention to replicate these but to focus particularly on policing initiatives. However, while there are a number of descriptive reports, there are few formal evaluations of these initiatives. Accordingly, we have had to rely on the assessments of local police officers and others about the effectiveness of particular policing interventions. For this, reason, and because we wanted to develop a picture of policing 'on-the-ground' in particular locations we took a qualitative, case study approach to the project.

Research settings

It was a condition of the tender that research for the project be undertaken in remote and urban settings:

... in sites in most or all of the following jurisdictions – South Australia, Western Australia, the Northern Territory, Queensland and New South Wales (NDLERF 2003, p.12).

Resources were not available to us to undertake research in all of these state or territory jurisdictions, accordingly, we selected the following sites which provide a broad spread of 'community' types: Warburton in the Ngaanyatjarra Lands in Western Australian, four communities in the Anangu Pitjantjatjara Lands in South Australia, Kintore and Alice Springs in the Northern Territory, Mount Isa and Cairns in Queensland, and Perth in Western Australia. As well as meeting the criteria established by NDLERF, these particular sites were selected because each of the chief investigators had previously conducted research in one or more of them and had long established contacts there – thus facilitating access to the sites and people within them.

Data collection

As we were concerned to ascertain the views of people 'on-the-ground' we decided to use a semi-structured approach to interviewing. To this end, the team members developed two checklists to guide the interview process – one for police officers, the other for community members and representatives of other agencies working to address the problem. Broad topics included in both checklists were:

- Indigenous and police perceptions about the nature of volatile substance misuse;
- law enforcement issues relating to petrol sniffing and other volatile substance misuse;
- current initiatives to address petrol sniffing and other volatile substance misuse within communities; and,
- the current problems associated with policing volatile substance misuse.

In addition to these general topics, police officers were also asked to describe recent, particular volatile substance misuse incidents in which they had been involved.

Participants in the study were nominated or identified based on their experience in addressing volatile substance use. We conducted 160 interviews with a total of 195 people. These included:

- 51 police officers with responsibilities and/or experience in dealing with volatile substance misuse and related issues, from the rank of probationary constable to superintendent;
- eight Indigenous police liaison officers or community constables;
- 54 representatives of Indigenous community-controlled organisations;
- 34 Indigenous community members;
- 27 representatives of non-Indigenous non-government organisations; and,
- 20 representatives of government agencies.

These categories of people are listed by location in Table 1.

Data analysis

Those team members responsible for data collection in each of the locations prepared case studies based on the interview data and their prior experience in those locations. These case studies – which are presented in Chapter 4 of the report – were designed to give readers an overview of the

environments in which volatile substance misuse takes place and the responses of communities and the police to the problem in each location. They were also designed to provide a locational context to the data that are reported thematically in other chapters of the report.

Interview transcripts and summaries were initially coded according to broad thematic categories which reflected the foci of the study. These included: general background issues, the policing context (including community responses and attitudes), reactive and proactive elements of policing, and the activities of other service agencies. These interview data were then entered into a database – which included identification of interviewees, their organisational affiliations and their geographic location – and the coding further refined. This database formed the basis for the analysis in which we sought to compare and contrast current approaches to policing practice across jurisdictions.

In reporting the results of our analyses, we have made extensive use of representative direct quotes from both police officers and others. These provide concrete illustrations of the views of both groups and provide an immediacy to our abstractions from the interview data.

Table 1: Categories of person interviewed by location.

Location	Category of interviewee						Total
	Police officers	APLO/ CCs	Indigenous community org reps	Community members	NGO reps	Government agency reps	
Ngaanyatjarra Lands	8	0	7	11	0	2	28
Anangu Pitjantjatjara Lands	5	2	14	14	0	5	40
Kintore	3	0	2	6	0	1	12
Alice Springs	7	1	1	1	5	1	16
Mount Isa	4	0	9	0	3	0	16
Cairns	4	2	3	1	6	3	19
Perth	20	3	19	1	13	8	64
Total	51	8	55	34	27	20	195

Ethical issues

The project was conducted within the framework of the National Health and Medical Research Council's (2003) *Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research* (2003). During the preparation of the research proposal, contact was made with representatives of relevant community organisations in each of the proposed study sites, the nature of the project explained to them, and agreement sought from them to approve and participate in the study. Subsequently written approval was provided by these organisations:

- Noongar Alcohol and Substance Abuse Service (Perth, WA);
- Warburton Community Council (Warburton, WA);
- Ngaanyatjarra Pitjantjatjara Yangkunyjatjara Women's Council (WA, NT, SA);
- Walungurru Community Council Aboriginal Corporation (Kintore, NT);
- Tangentyere Council (Alice Springs, NT);

- Central Australian Aboriginal Congress (Alice Springs, NT);
- Mount Isa Volatile Substance Misuse Action Group (Mt Isa, QLD); and,
- Cairns Inhalant Action Group (Cairns, QLD).

Once approval had been obtained from these organisations, human research ethics applications were submitted to, and approval was given by: Curtin University Human Research Ethics Committee (HR 96/2004), James Cook University Ethics Review Committee (H 1953), and the Centralian Australian Human Research Ethics Committee (23/9/04).

Chapter two: Volatile substance misuse as a policing issue

Introduction

Volatile substance misuse or inhalant misuse refers to the deliberate inhalation of volatile substances in order to achieve an intoxicated state (Parliament of Victoria, Drugs and Crime Prevention Committee 2002, p.2). Inhalants have in turn been defined by the US National Institute on Drug Abuse as:

... volatile substances that produce chemical vapours that can be inhaled to induce a psychoactive, or mind-altering, effect. Although other abused substances can be inhaled, the term 'inhalants' is used to describe a variety of substances whose main common characteristic is that they are rarely, if ever, taken by any route other than inhalation (National Institute on Drug Abuse 2005, p.1).

Volatile substance misuse can have serious, even fatal consequences. Partly for this reason – and partly because the related image of Aboriginal youths with tins of petrol round their necks – it has come to stand as a metaphor for the wider problems of remote communities and it has received significant media attention in recent times. For this and other reasons, it poses a number of challenges and dilemmas for police services. These are summarised below.

- Most volatile substances are cheap, readily available household or industrial products; possession and inhalation of them is not illegal.
- Many inhalant users are young – sometimes very young – and therefore not necessarily subject to adult legal sanctions and procedures.
- Partly because the possession of most volatile substances is not illegal, the legal sanctions available to police for dealing with volatile substance misuse are limited – although, as shown below, several Australian jurisdictions have recently amended, or introduced new legislation, in an attempt to redress this problem.
- Although the inhalation of volatile substances is not itself an offence, volatile substance misuse is often associated with violence and other illegal acts such as property damage, breaking and entering or sexual offences.
- Inhalant users tend to come from marginalised backgrounds, to have high levels of homelessness, poverty, a history of family dysfunction, and involvement in both the welfare and criminal justice systems (Quinn 1989; Parliament of Victoria Drugs and Crime Prevention Committee 2002; Wu et al. 2004). For many users, inhalants are not a drug of choice, but of necessity, adopted because they are cheap, readily available, and offer an immediate 'high'. In a number of remote Aboriginal communities where petrol sniffing – a form of volatile substance misuse – is virtually endemic, communities themselves are beset by high unemployment, dismal levels of health and education, and chronic governance problems.
- Volatile substance misuse does not occur exclusively among Indigenous people, but a significant proportion of inhalant users in Australia are Indigenous. Police responses to volatile substance misuse must take account of the general challenges associated with policing in a cross-cultural context and, in the case of remote communities, of the difficulties entailed in remoteness *per se*, such as a dearth of suitable agencies for referral.
- There is considerable uncertainty, if not confusion, about how volatile substance misuse should be 'framed' as an issue. Although volatile substance misuse is widely regarded as a form of drug use – since the volatile substances are used for their mind-altering effects – it is also seen as a response to personal and social marginalisation rather than an outcome

of addiction. Thus, the respective roles and responsibilities of the health, welfare and law enforcement sectors with regard to volatile substance misuse are poorly defined.

- Despite the sensational attention sometimes brought to bear on volatile substance misuse in the media and the very serious health effects in particular cases, as a source of drug-related harm among young people it ranks statistically a long way behind alcohol, tobacco and illicit drugs; the claims of volatile substance misuse on limited resources are therefore not strong.
- In many settings, expectations that police will respond promptly to incidents of volatile substance misuse are often seen by police as competing with demands generated by more serious offences.
- Occurrence of volatile substance misuse is usually sporadic; it is not uncommon for attention to be focused on volatile substance misuse in a particular locality, and for resources to be mobilised only to find that the phenomenon has virtually disappeared by the time these resources are actually available.
- Little evidence is available regarding the effectiveness of measures taken to deal with volatile substance misuse.

This report is designed primarily to address the last of these factors. In doing so, however, we have attempted to keep in mind the relevance of all the other factors to the 'real world' context of policing.

Inhalants: An overview

Approximately 250 household, medical and industrial products available on Australian shelves contain potentially intoxicating inhalants (Australian Drug Foundation 2004a). While various systems of classification have been proposed, a commonly accepted system distinguishes four categories of inhalants: volatile solvents, gases, aerosols and nitrites. Characteristics and examples of each of these are set out in Table 2.

Because nitrites do not produce an intoxicating effect, they do not present the kinds of policing problems associated with misuse of volatile solvents, gases and aerosols. For that reason they are often omitted from the scope of inquiries into policing volatile substance misuse – a practice that will be followed here. This is not to imply, however, that misuse of nitrites carries no risk of serious health consequences.

The main ways of using inhalants are:

- 'sniffing' or 'snorting' fumes from containers;
- spraying aerosols directly into the nose or mouth;
- 'bagging' – inhaling fumes from substances sprayed or deposited inside a plastic or paper bag ('chroming' refers to spraying paint from an aerosol can into a container and inhaling the fumes from the container);
- 'huffing' from an inhalant-soaked rag stuffed in mouth;
- heating and filling a sink or bathtub in a closed room; and
- inhaling from balloons filled with nitrous oxide (National Institute on Drug Abuse 2005).

Table 2: Types of volatile substances.

Category	Characteristics	Examples
Volatile solvents	Liquids or semi-liquids that vaporize at room temperature	<ul style="list-style-type: none"> • Paint thinners and removers • Dry cleaning fluids • Degreasers • Petrol (gasoline) • Glues • Correction fluids • Felt-tip marker fluids
Gases	Medical anaesthetics, and gases used in household and commercial products. Active chemicals include butane, isopropane, bromochlorodifluorometane and nitrous oxide	<ul style="list-style-type: none"> • Medical anaesthetic gases such as ether, chloroform, halothane, nitrous oxide • Butane cigarette lighters • Whipped cream dispensers • Refrigerants • Bottled cylinder gas • Cylinder propane gas
Aerosols	Sprays containing propellants and solvents	<ul style="list-style-type: none"> • Spray paint • Hair and deodorant sprays • Fabric protector sprays • Vegetable oil cooking sprays
Nitrites	Organic nitrites known as poppers, used primarily to enhance sexual pleasure rather than to alter moods. Unlike other inhalants that act directly on the central nervous system, nitrites act by dilating blood vessels and relaxing muscles. Nitrites include cyclohexyl nitrite, amyl nitrite, butyl nitrite and isobutyl nitrite (Australasian Centre for Policing Research 2004)	<ul style="list-style-type: none"> • Cyclohexyl nitrite – found in room deodorizers • Illegally diverted amyl nitrite (used in certain diagnostic procedures and prescribed to some patients for heart pain), called 'poppers'

Source: Based on National Institute on Drug Abuse (2005).

With the exception of nitrites – which achieve their effects by dilating and relaxing blood vessels – inhalants typically produce pleasurable effects by depressing the central nervous system. Most inhalants induce a rapid 'high' resembling alcohol intoxication, with initial excitation followed by drowsiness, disinhibition, light-headedness and agitation. When used in sufficient quantities, most inhalants will lead to anaesthesia, loss of sensation and possible unconsciousness. The US National Institute on Drug Abuse (2005) reports that chronic inhalant users experience a strong need to continue use, and that a mild withdrawal syndrome can occur with long-term use.

Consequences of volatile substance misuse

In their review of interventions into petrol sniffing in remote Australian Indigenous communities, d'Abbs and MacLean distinguished between consequences experienced by inhalant users themselves, those experienced by users' families, those by local communities and, finally, those experienced by the wider society (d'Abbs & MacLean 2000; MacLean & d'Abbs 2002). They also argued that no single intervention could provide a solution to all of the problems associated with volatile substance misuse in any given context, and that multi-sectoral strategies were therefore vital.

Some of the physiological, psychological and behavioural consequences of volatile substance misuse on users remain a matter of debate, as the Parliament of Victoria Drugs and Crime Prevention Committee (2002) noted in its recent inquiry. Nonetheless, a number of consequences are clearly supported by evidence.

Firstly, inhalant misuse can have serious, including fatal consequences – as indicated in Table 3. Prolonged episodes of sniffing inhalants can induce irregular heart rhythms, leading to heart failure and death within minutes – the so-called 'sudden sniffing death' that can come about in a single sniffing session by an otherwise healthy young person. Other ways in which inhalant abuse can lead to death are:

- asphyxiation – repeated inhalations leading to high concentrations of fumes displacing available oxygen in lungs;
- suffocation – inhaling fumes from a plastic bag placed over the head, blocking air from entering lungs;
- convulsions or seizures caused by abnormal electrical discharges in the brain;
- coma – the brain shuts down all but most vital functions;
- choking from inhalation of vomit after inhalant use; or
- fatal injury from accidents suffered while intoxicated (National Institute on Drug Abuse 2005).

The most significant toxic effect of chronic volatile substance misuse is widespread and long-lasting damage to the brain – including those parts involved in controlling cognition, movement, vision and hearing – and other parts of the nervous system. For example, chronic abuse of solvents such as toluene has been shown to damage the protective sheath around some nerve fibres in the brain and peripheral nervous system, leading to outcomes similar to those caused by multiple sclerosis. Chronic exposure can also damage heart, lungs, liver and kidneys (National Institute on Drug Abuse 2005). Recently published research suggests that some of the neurological damage caused by chronic petrol sniffing is reversible following prolonged abstinence (Cairney et al. 2005).

Table 3: Hazards of chemicals found in commonly misused volatile substances.

Amyl nitrite, butyl nitrite ('poppers', 'video head cleaner')	sudden sniffing death syndrome, suppressed immunologic function, injury to red blood cells (interfering with oxygen supply to vital tissues)
Benzene (found in petrol)	bone marrow injury, impaired immunologic function, increased risk of leukaemia, reproductive system toxicity
Butane, propane (found in lighter fluid, hair and paint sprays)	sudden sniffing death syndrome via cardiac effects, serious burn injuries (because of flammability)
Freon (used as a refrigerant and aerosol propellant)	sudden sniffing death syndrome, respiratory obstruction and death (from sudden cooling/cold injury to airways), liver damage
Methylene chloride (found in paint thinners and removers, degreasers)	reduction of oxygen-carrying capacity of blood, changes to the heart muscle and heartbeat

Table 3 continued.

Nitrous oxide ('laughing gas'), hexane	death from lack of oxygen to the brain, altered perception and motor coordination, loss of sensation, limb spasms, blackouts caused by blood pressure changes, depression of heart muscle functioning
Toluene (found in petrol, paint thinners and removers, correction fluid)	brain damage (loss of brain tissue mass, impaired cognition, gait disturbance, loss of coordination, loss of equilibrium, limb spasms, hearing and vision loss), liver and kidney damage
Trichlorethylene (found in spot removers, degreasers)	sudden sniffing death syndrome, cirrhosis of the liver, reproductive complications, hearing and vision damage

Source: National Institute on Drug Abuse (2005).

For the families of inhalant users, volatile substance misuse is often both a product of family dysfunction or breakdown, and a cause of further anguish. For local communities – especially some remote Indigenous communities where petrol sniffing is endemic – the social, cultural and material damage wrought by users is out of all proportion to their numbers. South Australian Coroner Chivell concluded an inquest into the deaths of three men in the Anangu Pitjantjatjara Lands by calling upon governments to recognize the threat posed by petrol sniffing to:

... the very substance of the Anangu communities on the Anangu Pitjantjatjara Lands. It threatens not only death and serious and permanent disability, but also the peace, order and security of communities, cultural and family structures, education, health and community development (South Australia Coroner's Court 2002, p.13).

For the wider society, volatile substance misuse generates demands on policing, health and welfare resources. These include not only the need for short term responses to acute volatile substance misuse-related intoxication, but also the long term needs generated by users and ex-users who have sustained serious disabilities.

Prevalence and patterns of volatile substance misuse in Australia

Data on prevalence and patterns of volatile substance misuse are notoriously poor, for several reasons. First, most drug use surveys draw samples of people aged 14 or 15 years and over, thereby excluding a significant proportion of the volatile substance misuse-using population. Second, another major source of data on youth drug use patterns – secondary school drug use surveys – tend to under-state the prevalence of volatile substance misuse because many inhalant users are poor school attendees. Third, as already mentioned, in many places where it occurs, the prevalence of volatile substance misuse fluctuates widely over short periods, making it difficult to establish reliable prevalence levels. Finally, volatile substance misuse is often a semi-clandestine activity carried out at night in remote settings where any kind of data gathering is logistically difficult.

According to the 2004 National Drug Strategy (NDS) Household Survey, 2.5 per cent of persons in Australia aged 14 years and over had ever inhaled volatile substances, while 0.4 per cent had done so within the last 12 months (Australian Institute of Health and Welfare 2005). This is similar to the findings of the 2001 NDS Household Survey (Australian Institute of Health and Welfare 2002). To

put this into perspective, the level of inhalant use within the previous 12 months was below those of marijuana, amphetamines, non-medical use of analgesics, ecstasy, cocaine, non-medical use of tranquillisers, hallucinogens and injected drugs, but slightly above usage of heroin and other opiates.

Additional information about poly-drug use and settings has been published from the 2001 NDS survey (Australian Institute of Health and Welfare 2002). These findings indicate that volatile substances are often used with other drugs. Almost two-thirds of those who had used inhalants within the previous 12 months had also, on at least one occasion, used another drug at the same time – with alcohol and cannabis use being reported by 45.5 per cent and 40.5 per cent respectively, followed by amphetamines (27.2 per cent) and ecstasy/designer drugs (27.1 per cent).

When asked about the locations where they usually used inhalants, only 20 per cent of recent inhalant users in the 2001 survey mentioned public establishments or public places such as parks. This compares with 74.5 per cent who nominated private homes, 26.6 per cent private parties and 26.0 per cent raves or dance parties. This suggests that the inhalant users who come to the attention of police – most of whom are using in public places – may not be typical of the inhalant using population, but rather a particularly socially-disadvantaged subset of that population.

For other reasons, the National Drug Strategy Household Surveys, although based on large samples, almost certainly under-estimate the extent of volatile substance misuse in Australia. First, as already indicated, until 2004, these surveys excluded persons aged under 14 years, and we know from other studies that volatile substance misuse is more common among 12–13 year olds than among older teenagers (see below). Second, interviews were conducted by phone, which means that Indigenous, institutionalised and homeless persons were under-represented or excluded. Again, volatile substance misuse is known to be more common among disadvantaged youths than among the broader population.

A more focused picture of volatile substance misuse comes from surveys of secondary school students. In 2002, the Cancer Council of Victoria's Centre for Behavioural Research in Cancer – in collaboration with government agencies in each state and territory – conducted the third in a series of national surveys of use of over-the-counter and illicit substances by Australian secondary school students. Data was collected from 23,417 male and female students aged 12–17 years, surveyed in 363 schools (White and Hayman 2004a). The 2002 survey found that:

- just over one-fifth of all students (21 per cent) had deliberately sniffed inhalants at least once during their lives;
- 15 per cent had done so at some time in the past year;
- 9 per cent had sniffed inhalants within the past month; and
- 6 per cent had done so in the past week.

Inhalant use was related to age; however, unlike the pattern seen for other substances, prevalence decreased significantly from the youngest to the oldest students. While a quarter (26 per cent) of 12 year old students had ever used inhalants, this proportion decreased to 12 per cent of those aged 17 years.

These figures give little sense of the variety of forms that volatile substance misuse can take. Following Rose (2001), we can distinguish several distinct categories of inhalant use.

- 'Average' young people who experiment with inhalants – and in most instances do not persist.
- Volatile substance misuse among marginalised young people. In Australian towns and cities, this most commonly takes the form of 'chroming' or sniffing aerosol paints. The Parliament of Victoria Drugs and Crime Prevention Committee (2002, p.113) reported that of 243 Children's

Court Search Warrants involving children aged 11 years and over, issued in the state of Victoria between December 2001 and March 2002, evidence of volatile substance misuse (often in conjunction with other drugs, especially alcohol and cannabis) was cited in 30 per cent of accompanying affidavits.

- Petrol sniffing in some remote Aboriginal communities.
- Volatile substance misuse amongst disadvantaged and, often, homeless adults (often 'loners') who sometimes turn to inhalants when they cannot obtain alcohol. There has been little research into this group to date (Parliament of Victoria Drugs and Crime Prevention Committee 2002, p.136).

Whereas 'chroming' in urban settings did not emerge as an issue for police until around 2000, petrol sniffing has been present in some remote Aboriginal communities in the so-called 'tri-state' region of South Australia, Western Australia and the Northern Territory and parts of the Top End of the Northern Territory since the 1960s. More recently, it has also been reported in the Cape York region of north Queensland, south west Queensland, western New South Wales and northern Victoria (Commonwealth Department of Health and Family Services 1998; MacLean and d'Abbs 2002).

Anecdotal evidence points to two recent changes in patterns of petrol sniffing. Firstly, in at least some places, the phenomenon appears to be increasing. The Northern Territory Department of Health and Community Services, in a submission to a parliamentary inquiry into petrol sniffing in the NT, reported an increase in the number of petrol sniffers between 2000 and 2002, particularly among older chronic sniffers. In Central Australia alone in 2002, according to the Department, fifteen communities reported sniffing, with 320 individuals across the region engaging in the practice, of whom 130 were identified as chronic sniffers and 190 as occasional sniffers. In the 'Top End' of the NT, sporadic sniffing appeared to have become more entrenched, and to have spread to communities in the East Arnhem and Katherine regions previously unaffected, although the number of users in each community was said to be small. The submission also noted that a small number of communities had eliminated petrol sniffing over the previous two years through *a concerted community approach to prevention* (Northern Territory Department of Health and Community Services 2002, p.3).

Second, the age range in which petrol sniffing occurs appears to be expanding. Northern Territory Police reported in 2003 that, whereas until recently most petrol sniffers in remote communities were aged between 10 and 14 years, police had begun to encounter sniffing by children as young as five and as old as their thirties (Northern Territory, Legislative Assembly 2004).

Not surprisingly, most of the limited literature on volatile substance misuse focuses on its harmful consequences and, in seeking to understand users' reasons for inhaling, explores contributory factors such as family dysfunction and peer group pressure. However, as MacLean (2005) points out, the primary reason that inhalant users engage in the practice is because it is pleasurable, and if we are to understand users' motives, we need to be aware of those pleasures. MacLean (2005), drawing on in-depth interviews with 26 current and ex-inhalers of aerosol paints in Melbourne, found that most users experienced a mixture of shame and pleasure in chroming. The former came from awareness of the potential risks of chroming for their health, and of the stigma associated with the practice. The pleasures derived from one or more of heightened physical and emotional feelings, a sense of escaping to an alternative reality, hallucinatory experiences, a sense of enhanced power and capacity while intoxicated, and from the association with socialising and communicating with friends.

The changing legislative context of volatile substance misuse

Although all Australian jurisdictions have legislation in place to deal with public intoxication and child welfare, the adequacy of existing legislation to enable police to respond to volatile substance misuse has long been a matter of debate, with some individuals and groups periodically calling for the practice to be made a criminal offence. As mentioned above, governments in several Australian jurisdictions have recently amended, or introduced new legislation, with the aim of providing police with more clearly defined and appropriate powers for responding to volatile substance misuse.

In 2002 the Victorian Parliamentary Drugs and Crime Prevention Committee (DCPC) examined the case for and against criminalisation. It recommended against doing so; instead it called for the introduction of a 'civil apprehension and detention' model under which intoxicated users can be apprehended and detained in either public places (such as detoxification centres) or in police cells without charge – along the lines of provisions in the *New South Wales Intoxicated Persons Act 1979* and the *Western Australia Protective Custody Act 2000* (Parliament of Victoria Drugs and Crime Prevention Committee 2002, p.536). In doing so, the Committee argued that volatile substance misuse was essentially a health issue, rather than a criminal justice issue, and that increased police powers should be complemented with increased funding for youth mental health and other welfare services.

The DCPC's call for a civil apprehension and detention model was accepted by the Victorian government. Under the Victorian *Drugs, Poisons and Controlled Substances (Volatile Substances) Act 2003* which came into effect 1 July 2004, police were, henceforth, authorized to search a person aged less than 18 years whom they suspected to be in possession of volatile substances or volatile substance misuse related items, or a person regardless of age whom police suspected intended to provide a volatile substance to a person aged less than 18 years for purposes of inhalation. The Act also empowers police to seize volatile substances or items used for inhalation, and to detain persons aged less than 18 years suspected of inhaling or intending to inhale. Persons detained are to be released into the care of a suitable person, who can include parent, carer, guardian, other responsible family member, or health or welfare worker. If police are unable to find a suitable person, they can release or detain the person, if necessary at a police station, but not in a police cell (Australian Drug Foundation 2004b).

The new Victorian legislation was accompanied by an 'Interagency Protocol' designed to ensure integration of responses from other agencies, including alcohol and other drug services, child protection services, Indigenous services, and out-of-home care services (Victoria Department of Human Services 2004a). The effects of the Victorian legislation are subject to an evaluation due for completion in 2006.

In October 2003 the Queensland Government introduced the *Police Powers and Responsibilities and Other Legislation Amendment Bill* which, like the Victorian amendments, expanded police powers to apprehend and detain persons believed to be engaging in volatile substance misuse, without making volatile substance misuse an offence (Giskes 2003). The new powers took effect on 1 July 2004 on a trial basis in five selected sites – Mount Isa, Cairns, Townsville, inner Brisbane and the Brisbane suburb of Logan. The Queensland legislation also provided for a trial of a 'places of safety' scheme, under which, at the five selected sites, designated facilities were identified for the care of persons intoxicated by volatile substance misuse. The impact of the scheme was to be evaluated over the trial period by the Queensland Crime and Misconduct Commission (CMC). Pending completion of the evaluation, the trial legislation was subsequently extended for a further 12 month period, until 30th June 2006 (National Inhalant Abuse Task Force 2005).

Late in 2005 the CMC reported its findings on the amended legislation and the places of safety scheme respectively in two separate reports (Crime and Misconduct Commission (Queensland) 2005a; Crime and Misconduct Commission (Queensland) 2005b). The CMC concluded that the amended police powers had served a useful role as a *central component of the broader government response to the difficult issue of volatile substance misuse* (Crime and Misconduct Commission (Queensland) 2005b, p.xiii), and should be extended statewide, subject to modifications. On the negative side, the evaluation reported a widely held perception that, as a result of the new legislation, police had been given primary responsibility for addressing volatile substance misuse without either sufficient authority or adequate operational guidelines, and without mechanisms to ensure that follow-up health and welfare activities were taken up by the appropriate agencies and not left with the police.

To address these and related deficiencies, the CMC made 26 recommendations (Crime and Misconduct Commission (Queensland) 2005b), including calls for police powers to be further extended to authorize police to compel persons apprehended to give their names and addresses and, in the absence of available places of safety, to hold persons apprehended for up to four hours for their own wellbeing. The CMC also proposed the introduction of an 'alert' system under which, following initial apprehension and referral by the police, the Department of Child Safety would be notified, and obliged to initiate appropriate assessment and case management procedures. (The CMC's evaluation of the places of safety model is outlined below, in Chapter 3) At the time of writing, the Queensland Government was still formulating its response to the CMC recommendations.

The most comprehensive legislative initiative to address volatile substance misuse is the Northern Territory *Volatile Substance Abuse Prevention Bill 2004*, which passed into law early in 2005 and took effect on 6 February 2006 (Northern Territory Government Media Release 2006). The new act incorporates similar provisions relating to search, seizure and supply of volatile substances to those in the amended Victorian and Queensland legislation and, as in Victoria and Queensland, the legislation stops short of making inhalant misuse an offence. The Northern Territory legislation, however, contains two additional elements:

- provision for mandatory treatment for persons deemed to be at risk of severe harm from inhalant misuse; and
- provision for 'management areas', under which communities can gain legal recognition for locally-specific laws relating to the possession, supply and use of volatile substances.

The Northern Territory Government has also committed \$10 million over five years to a program of new and expanded services that includes:

- treatment facilities for volatile substance misuse in both Alice Springs and Darwin;
- government-employed clinical teams based in Alice Springs and Darwin to provide support for remote health services in managing volatile substance misuse-related problems;
- support for upgrading of five outstations in Central Australia that regularly accept petrol sniffers on a diversion basis, and for identifying and upgrading similar options in the 'Top End';
- six youth case workers, to be based with a non-government organisation; and
- non-recurrent funds for a series of bush camps.

In June 2005 the National Inhalant Abuse Taskforce, a body established under the Inter-Governmental Committee on Drugs, published a consultation paper entitled *National Directions on Inhalant Abuse* (National Inhalant Abuse Task Force 2005) in which the Taskforce endorsed the 'civil apprehension' legislative approach in preference to criminalization, and presented a set of guiding principles for inhalant legislation based on the following core principles.

- The primary aim of legislation should be to protect the health and welfare of inhalant users.
- Legislation should not criminalise the behaviour of inhalant users and should protect their civil rights.
- Communities may be best placed to make their own decisions and rules about inhalant use issues in their community.
- It may be appropriate for the legislation to include the power to confiscate inhalant products to protect the health and safety of an inhalant user.
- It may be appropriate for the legislation to include the power to apprehend and detain an inhalant user to protect his/her health and safety, or to link him/her to treatment.
- Persons selling volatile substances have a responsibility not to sell in situations where they suspect the person will inhale the product.
- The dangerousness or pattern of use of some volatile substances may warrant the introduction of specific sale restrictions.
- The legislation should be enforced in keeping with its primary objectives of protecting the health and welfare of inhalant users.
- Legislation should be supported by a commitment to adequately resource its implementation.
- The operation of legislation should be monitored and reviewed to ensure that its objectives are being met and to assess its impact.

Summary

In this introductory overview, we have outlined:

- the constraints governing police responses to volatile substance misuse;
- the nature of volatile substances and consequences of volatile substance misuse;
- current prevalence and patterns of volatile substance misuse in Australia; and
- recent changes in legislative frameworks applying to volatile substance misuse in Australia.

Since possession of most volatile substances is not, in itself, an offence, the rationale for insisting upon a police role in responding to volatile substance misuse is not based primarily on the capacity of police to enforce the law, but rather on their vital role in crime prevention and promoting community safety. As the rest of this report makes clear, however, this is not something that police are trained, mandated or resourced to do on their own. An effective police response requires not only effective policing, but adequate support from other agencies and sectors.

Chapter three: Police responses to volatile substance misuse – a literature review

Introduction

As various observers have pointed out, compared with other recreational drugs, volatile substance misuse has been poorly served by research. d'Abbs and Brady (2004) examined publications by Australia's two leading drug research bodies and found, amongst several hundred articles, papers and monographs, almost no publications dealing with inhalants or volatile substances. For this project, we conducted a review of literature relevant to policing volatile substance misuse.

A number of search strategies were used to identify relevant literature. The databases Google Scholar, Psycarticles and Psycinfo were searched using keywords 'volatile substance', 'petrol sniffing', 'gasoline sniffing', 'inhalant misuse', 'inhalant abuse', and/or 'chroming' in combination with 'police', 'policing' or 'law enforcement'. In addition, a search was conducted using keywords 'petrol sniffing', 'inhalant* use', 'volatile substance*' and 'chroming', for literature published between 2001 and 2005 inclusive, as recorded on the Australian Education Index, which in turn incorporates 34 databases, among them the Australasian Medical Index, Australian Criminology Database (CINCH) and DRUG database. Finally, the same keywords were used for a search of the US National Criminal Justice Reference Service Database.

Most of the literature identified could be included within six categories.

- *Overviews of volatile substance misuse* – ranging from comprehensive reports such as *Volatile Substance Abuse: A Global Overview* (World Health Organization 1999) to introductory pamphlets, such as the US National Institute on Drug Abuse's *Community Drug Alert Bulletin on Inhalants* (National Institute on Drug Abuse 2004).
- *Reports of government inquiries into volatile substance misuse* – such as the final report of the Parliament of Victoria Drugs and Crime Prevention Committee (2002) or, in the case of petrol sniffing in Australian Indigenous communities, reports resulting from coronial inquests into petrol-sniffing related deaths (Northern Territory of Australia Coroner's Court 1998; South Australia Coroner's Court 2002; South Australia Coroner's Court 2005; Northern Territory of Australia Coroner's Court 2005).
- *Prevalence studies* – some focusing on inhalants, such as surveys of inhalant use conducted in the United States (Howard et al. 1999; Beauvais et al. 2002; Wu et al. 2004), or the United Kingdom (Best et al. 2004), and others reporting levels of inhalant use as part of broader drug use surveys, such as the National Drug Strategy Household Surveys conducted regularly by the Australian Institute of Health and Welfare (Australian Institute of Health and Welfare 2002; Australian Institute of Health and Welfare 2005), and the surveys of drug use among Australian secondary school students (e.g. White and Hayman 2004).
- *Papers on strategic directions and policies* – again, these may focus specifically on volatile substance misuse, such as Cleary's argument against basing responses to 'chroming' on law enforcement (Cleary 2003), Rose's (2001) background paper on approaches to volatile substance misuse prepared for a Western Australian working party, and the discussion paper prepared for the Conference of Police Commissioners of Australasia and the South West Pacific Region (Australasian Centre for Policing Research 2004). They may also refer to volatile substance misuse as part of a broader approach to drug issues, such as *The National Drug Strategy: Australia's Integrated Framework 2004–2009* (Ministerial Council on Drug Strategy 2004) and *The National Drug Strategy: Aboriginal and Torres Strait Islander Peoples, Complementary Action Plan 2003–2006* (Ministerial Council on Drug Strategy 2003).

- *Descriptions of interventions* – that is, descriptions of responses to volatile substance misuse in which police have played either a lead role or been involved as participants.
- *Outlines of guidelines and protocols* – codified procedures, often developed for particular jurisdictions but made more widely available, intended as guidelines for police practice in responding to volatile substance misuse.

While all of these categories contain information that may be of interest to police (and others) engaged in dealing with volatile substance misuse, it is the last two categories – descriptions of interventions and outlines of guidelines and protocols – that directly address the subject of this report. This review of literature, therefore, is restricted to papers, reports, etc., that fall into these two categories.

Descriptions of interventions

Volatile substance misuse typically presents police with two sets of challenges: how to respond in the short term to acute episodes of intoxication resulting from volatile substance misuse; and how to engage more strategically in the prevention and management of volatile substance misuse at a local community level (Australasian Centre for Policing Research 2004). We refer to these as 'reactive' and 'proactive' responses respectively. The literature on police-related interventions into volatile substance misuse can be divided along the same lines into a small number of studies that address reactive responses, and a larger – but still modest – number of papers and reports on proactive responses.

Reactive interventions

While numerous reports attest to the frustrations experienced by police in attempting to respond to incidents of volatile substance misuse (for an overview, see Parliament of Victoria Drugs and Crime Prevention Committee 2002, Chapter 13), few studies offer empirical evidence about the available short-term options.

A discussion paper prepared by the Australasian Centre for Policing Research identified the major role of police in responding to volatile substance misuse-related intoxication as that of reducing the risk of death or injury to users (Australasian Centre for Policing Research 2004).

Anders (2000) has described a referral system developed and trialled in Gippsland, Victoria, between May 1998 and March 2000, under which youths identified as 'high risk adolescents' (HRA) – as a result of mental health, substance abuse, accommodation problems or domestic violence – were referred by police to appropriate support or service agencies. Central to the system was a 'Common Assessment Referral Form' – a single page assessment sheet designed to enable police to identify the client's most pressing needs and thereby to direct officers to making the most appropriate referral. The system was also supported by a High Risk Adolescent Reference Group formed by representatives from government and non-government agencies, including the Department of Human Services, Gippsland Child and Adolescent Mental Health Service, and local police.

Referral wall charts were also prepared, identifying the most appropriate agency or contact for each risk type; these were laminated and displayed in police stations, with fax numbers shown, so the Common Assessment Referral Form could be faxed to the appropriate agency/service at the time of completion. Officers in each police station were also given a short training session, including an overview of how to identify target groups and how to use the system.

A pilot study carried out in May 1999 found that the system had proved successful in helping police to identify High Risk Adolescents, and to establish connections with appropriate agencies. The scheme was subsequently extended to all police stations in the Gippsland region, as well as to six local secondary schools and five medical services.

The Common Assessment Referral Project (CARP), described by Riddell (2003), built on the assessment procedure developed in Gippsland for use in the Melbourne suburb of Mooney Valley. Following media attention on inhalant use in the area, a local youth organisation monitored chroming sites over a four week period, and a local steering group was formed comprising representatives of various government and non-government agencies, including the police. A modified form of the Common Assessment Referral Form was adopted and used with a view to ensuring that young inhalant users were linked with appropriate services. A study of the project showed that it led to improved relationships between police and local services and helped to clarify police understanding of their 'duty of care'. Effectiveness of the project, however, was limited by staff turnover among agencies and transience among the inhalant user population.

Another initiative designed to help police respond more effectively to incidents of volatile substance misuse is described by Scanlon (2003). When 'chroming' emerged in Townsville, Queensland, in the 2000–2001 school holidays, police knew little about the effects or symptoms of volatile substance misuse, or about how to respond. They began by training officers to recognize users, and by establishing a tracking system to monitor both users and locations of use. School-based police officers compiled a list recording experimental, social and chronic users. In the first year more than 140 persons aged under 18 were identified. Monitoring locations proved difficult, however, as users were quick to avoid detection by finding more isolated places.

The main frustration experienced by police, according to Scanlon, was the absence of any long term solutions. Early identification of users and locations of use enabled police to make a timely response, and in a few cases it was possible to consult with families, including extended families, and through them to provide alternative care for users. However, police lacked either the facilities or the authority to refer users for treatment. What was needed, argued Scanlon (2003, p.7), was a *treatment model accepted by the families, the professional community, and the users themselves.*

The most detailed analysis of issues facing police in responding to volatile substance misuse-related intoxication comes from an evaluation – conducted by the Queensland Crime and Misconduct Commission (CMC) – of the trial of extended powers to deal with intoxicated volatile substance users introduced under the *Police Powers and Responsibilities and Other Legislation Amendment Act 2003*. As indicated in Chapter 2, the amendments to police powers were accompanied by designation of 'places of safety' in five locations throughout Queensland, to which police were expected to take young people affected by inhalants (Crime and Misconduct Commission (Queensland) 2005a; Crime and Misconduct Commission (Queensland) 2005b). In evaluating the Places of Safety trial, the CMC gathered data on all volatile substance misuse-related contacts occurring at the five trial sites by police, places of safety, ambulance or hospitals between 1 July 2004 and 31 March 2005 (Crime and Misconduct Commission (Queensland) 2005a). A total of 2,210 such contacts were recorded, 1,848 of them at places of safety. These contacts were accounted for by 316 clients, indicating a high rate of repeat admissions (with 50 clients having 10 or more admissions during this period). Of the 316 clients, 64 per cent were Aboriginal and 60 per cent were male.

The CMC found that, while the places of safety appeared to have succeeded in accessing the intended client group (youths affected by inhalants), they had not fulfilled their intended function of providing a referral option for police. In fact, only 120 referrals during this period (7 per cent of the total) came from police, compared with 807 self-referrals and 806 referrals

by outreach services. The major flaw in the model, the CMC concluded, was that the places of safety themselves were expected to combine two mutually incompatible functions: intoxication-recovery and welfare-oriented referrals. In order to achieve the second function, the place of safety service had to provide an attractive, safe setting – which undermined any disincentives to engage in volatile substance misuse and no doubt contributed to the high rate of repeat admissions. In place of the existing place of safety system, the CMC proposed a new model, in which these two functions were to be separated. Under this model, the police role was to be limited to making an immediate response, involving two steps. In the first step, police would take an inhalant-affected person home, to an emergency department, or to an intoxication-recovery service (place of safety), or – in the event of none of these options being available – hold the person until one did become available or the person was no longer intoxicated. In the second step, police would issue an alert to the Department of Child Safety, which would then be responsible for implementing a medium-term response, to include screening, developing and coordinating case management, and contacting other agencies as appropriate (Crime and Misconduct Commission (Queensland) 2005a).

Problems and dilemmas associated with policing in remote Indigenous communities have received close attention in the context of three separate inquiries relating to petrol sniffing in the Anangu Pitjantjatjara Lands, an area of 160,000 square kilometres in the far north-west of South Australia, forming part of the larger remote cross-border region of Western Australia, South Australia and the Northern Territory known as the Ngaanyatjarra, Pitjantjatjara and Yangkuntjatjara, or NPY lands. The inquiries were a coronial inquest conducted in 2002 into the deaths of three youths from the Anangu Pitjantjatjara Lands, a second inquest held in November 2004 following further deaths associated with petrol sniffing, and an examination carried out in 2003 by the Human Rights and Equal Opportunity Commission into progress in implementing recommendations from the 2002 inquest (South Australia Coroner's Court 2002; Human Rights and Equal Opportunity Commission 2003; South Australia Coroner's Court 2005). Taken together, these three reports provide a graphic account both of policing activities in the Anangu Pitjantjatjara Lands, and of the difficulties faced by police in remote areas in which volatile substance misuse is widespread.

The 2002 inquest revealed that, at the time, there were no sworn police officers in the Anangu Pitjantjatjara Lands. The nearest police were stationed at Marla, some six or seven hours away – in good conditions – from some communities. Although Marla Police Station had positions for eight operational police officers plus a clerical officer and a sergeant overseeing Indigenous Community Constables, difficulties in recruiting staff had resulted in it being chronically understaffed.

Responsibility for day to day policing in Anangu Pitjantjatjara communities lay with locally appointed Community Constables. Witnesses told the inquest that, while the Community Constables performed a valuable role on communities, especially in defusing local disputes, their kinship ties and obligations to other community members placed them in a difficult position when dealing with petrol sniffers, especially if a need arose to arrest a sniffer. Community Constables would be exposed to severe community retribution in the event of any mishap befalling sniffers with whom they had intervened.

Among Anangu, the coroner found ambivalent attitudes towards a police presence: on the one hand, they appeared to want police available to deal with immediate crises, but were warier of any ongoing police involvement. One police witness also drew attention to difficulties created by Anangu expectations of police. Many people, he claimed, wanted police to remove sniffers and imprison them. However, especially in the light of the Royal Commission into Aboriginal Deaths in Custody, police were bound to use imprisonment only as an option of last resort, and not at all in the case of minors committing minor offences.

Non-Anangu witnesses, on the other hand, were adamant in calling for a greater police presence, arguing that, in their absence, Anangu were being denied the basic security and protection taken for granted by other Australian citizens. The absence of sworn police officers was also said to hamper the efforts of other developmental programs. One witness explained how a successful outstation program associated with the community of Yuendumu – Mount Theo – depended for its success on the presence and support of local police, who would stand by him (the witness) during negotiations to take minors to Mount Theo, sometimes following a court appearance.

The 2002 inquest exposed a number of significant barriers to a more effective police presence and role, in particular:

- difficulties in recruitment to remote localities;
- lack of appropriate detention facilities;
- distances involved; and
- lack of sentencing options available to courts.

The November 2004-05 inquest was conducted by the same coroner (Wayne Chivell). It was occasioned by four more deaths of young people in the Anangu Pitjantjatjara Lands, and also provided a forum in which to investigate governmental responses to problems exposed by the earlier inquest. This time the coroner found that – almost alone of all the State and Commonwealth agencies involved – the South Australian Police response to the recommendations of the 2002 inquest had been *prompt and comprehensive* (South Australia Coroner's Court 2005, p.11). Staffing strength at Marla had been increased to its full capacity of 11 sworn officers. Under a strategy 'Delivery of Police Services – Anangu Pitjantjatjara Lands', developed in October 2003, it was agreed to station six sworn police officers permanently in the Lands, in addition to the Community Constables. This commitment had subsequently been increased to a target of placing eight resident police officers in the Lands. Funds also had been made available for upgrading police cells and stations. Deputy SA Police Commissioner White told the inquest:

The increased police presence and quickened response has already decreased the observable levels of petrol sniffing and offences against the person and property. Police are very active within the communities, making numerous apprehensions for serious criminal offences and are strengthening liaison and partnerships with the communities and other government agencies. Operations are continually undertaken against those involved in bringing alcohol, petrol and illegal drugs onto the Lands using intelligence provided by Community Constables, community members and having a presence during the hours of darkness on routes used. As part of the policing operations SAPOL shares intelligence with the Western Australia and Northern Territory Police (South Australia Coroner's Court 2005, p.11).

Petrol sniffers were said to be less visible but still active and family violence remained an issue. However, police reported that their increased visibility, as well as a partnership operation with Ngaanyatjarra, Pitjantjatjara and Yangkuntjatjara (NPY) Women's Council, were having an impact and women were becoming more willing to report incidents. Police had also initiated programs under a crime prevention strategy. Blue Light Discos, school visits, film nights, road safety education, domestic violence programs, radio programs, bicycle safety programs, petrol sniffing prevention programs, and Community Safety/Crime Prevention Committees were all said to have been undertaken to combat crime and drug abuse on the Lands. As part of a recent Enterprise Bargaining Agreement, a range of incentives had been introduced to assist recruitment to the Anangu Pitjantjatjara Lands.

The coroner was also told that the Department for Correctional Services had developed a new service model for the Anangu Pitjantjatjara Lands involving significant staffing increases, and that a new correctional facility was to be built, at a site yet to be determined. In addition, funds were said to have been committed to a new secure care facility on the Lands for sobering up, detoxification and rehabilitation of substance abusers. These facilities, should they eventuate, would no doubt help to meet a critical need identified by the Human Rights and Equal Opportunity Commission in its 2003 report:

The police continue, however, to face pressures of being heavily relied upon in the absence of other necessary forms of service delivery. Overall, there also remains a significant challenge of balancing law and order responses with adequate provision of services, particularly those which are health related. The dilemma relating to the proposed application of the Public Intoxication Act, in absence of detoxification and other support services, is an example of this ongoing, longer term problem (Human Rights and Equal Opportunity Commission 2003).

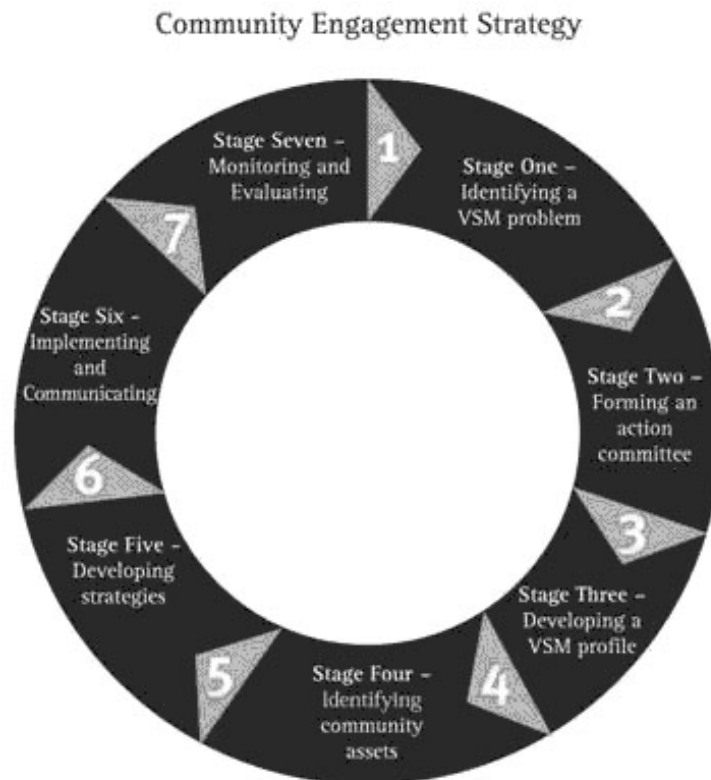
While it is difficult to draw any conclusions on the basis of such a modest number of published studies, at least one common theme is apparent: namely, the need for clear definition of the roles and responsibilities not only of police but also of other agencies, in particular health and welfare agencies (where present – which is not always the case in remote settings), and for mechanisms to ensure that these agencies and procedures are utilized to address the medium and longer-term needs of inhalant users.

Proactive interventions

It is widely recognized that any strategic approach to volatile substance misuse must go beyond responding to those already intoxicated from inhalants to identifying and ameliorating, as far as possible, the personal and environmental precursors that give rise to volatile substance misuse, and that this in turn requires a multi-faceted, multi-agency approach, with collaboration at a local community level (Madigan 1994; d'Abbs & MacLean 2000; MacLean & d'Abbs 2002; Parliament of Victoria Drugs and Crime Prevention Committee 2002; Australasian Centre for Policing Research 2004). From a policing point of view, such a stance is consistent with general principles of crime prevention, which incorporate not only criminal justice approaches (for example, cautions, fines and arrests) but also situational approaches (e.g. supply reduction, and policing 'hot-spots'), developmental approaches (e.g. mentoring, school-based education, and youth development programs), and community development approaches (e.g. working with community action groups). Each of these forms of crime prevention has a substantial evidence base on best practice that is likely to be applicable to policing volatile substance misuse (Midford et al. 2001; Midford et al. 2002; National Crime Prevention 1999; Roth & Brooks-Gunn 2003; Sherman et al. 1997; Spooner et al. 2004; Weisburd & Eck 2004). We do not attempt here to review the broader literature on these models and approaches, but confine ourselves to studies specifically addressing volatile substance misuse (VSM).

Two 'how to do it' publications set out steps to be taken in applying a community development approach to volatile substance misuse. The *Petrol Sniffing and Other Solvents* resource kit published by the Aboriginal Drug and Alcohol Council contains a plain language booklet designed to help people in remote Indigenous communities identify and prioritise issues and select strategies (Aboriginal Drug and Alcohol Council (SA) Inc. 2000). A report published in 2002 in Queensland by the Commission for Children and Young People (Queensland) (2002) outlines a strategy of 'community engagement' addressing volatile substance misuse-related issues. The strategy involves seven steps, as shown in Figure 1.

Figure 1: Community Engagement Strategy for dealing with volatile substance misuse



Source: Commission for Children and Young People (Queensland) 2002.

Moran (2003) has outlined the application of a Problem Oriented and Partnership Policing (POPP) approach to addressing volatile substance misuse problems at a community level in Queensland. Initially developed by Goldstein in the US in the 1970s, POPP has been endorsed by the Queensland Police Service as a complement to a more traditional, reactive police role, and combined with a four-step implementation strategy called SARA (scanning, analysis, response, assessment). The steps (Moran 2003) cover the following:

- scanning – gathering data in order to define and describe a problem, including description of locations and an assessment of seriousness;
- analysis – identifying underlying contributory conditions; identifying stakeholders and their interests, needs, demands, expectations; specifying options and positioning the local police service for an optimal response;
- response – clarifying objective(s) and specifying performance indicators; developing an implementation plan, to include stakeholders, roles, time frame, list of resources required; and
- assessment – assessing outcomes by basic impact and process evaluation.

Moran (2003) identified 17 locations in Queensland where police had become involved in community based actions targeting volatile substance misuse, in some instances using the POPP model. While activities varied from place to place, most according to Moran (2003, p.4) involved one or more of the following:

- involvement in a local committee, usually incorporating representatives from a range of other government and non-government agencies to address volatile substance misuse concerns;
- provision of referral information for young people with whom police come into contact (when such services are available);

- involvement in discussions with local retailers regarding supply reduction and staff safety issues;
- increased patrols or enforcement of the legislation regarding the removal of volatile substances being misused (under section 371A of the *Police Powers and Responsibilities Act 2000*);
- development of local protocols or memoranda of understanding between police and other agencies (in particular hospitals) in responding to volatile substance misuse incidents; and
- involvement in or assistance with the provision of diversion activities for young people including camps, sporting activities or cultural activities.

Almost all of the published reports on proactive interventions into volatile substance misuse in which police have played a role come from Queensland. It is not clear why this should be so: although the fact that the only major conference in Australia to focus on inhalants – entitled *Inhalant Use and Disorder*, convened by the Australian Institute of Criminology – was held in Townsville, Queensland, in July 2003, may have helped to foster the production of Queensland based papers. Most of these reports located for this review offer descriptions of interventions; some say a little about the 'processes' through which the interventions were implemented; while few present anything more than anecdotal outcome data.

Wheeler (1999) has briefly described a multi-level intervention strategy developed in response to petrol sniffing in the far north Queensland community of Aurukun in 1997. The 'Aurukun recipe' involved mobilising both external agencies, including Queensland Health and Police, as well as local officials and elders, and developing a series of initiatives. These, according to Wheeler (1999), included:

- ensuring community male elders 'owned the problem' (although it is not stated how this was done);
- devising appropriate punishments through the local justice group;
- education and awareness programs;
- encouraging parents to take more responsibility for children who were sniffing petrol;
- sending 'ring leaders' away to outstations, at least during the time of the intervention program;
- setting up skills training activities; and
- instituting counselling programs for petrol sniffers and their families with qualified mental health staff.

According to Wheeler (1999), implementation of the strategy led to a reduction in petrol sniffing. In March 1999 the strategy was still in place and petrol sniffing and associated crime were almost non-existent.

One well-documented instance of police involvement is a 'police initiated community partnership' aimed at reducing volatile substance misuse in the Queensland city of Rockhampton (Taylor & Lawson 2004). In 2002 volatile substance misuse was identified as a problem in Rockhampton. A workshop convened in part by local police led to the formation of the Rockhampton and Capricorn Coast Volatile Substance Abuse Working Party, made up of representatives from government and non-government agencies. The Working Party (Taylor & Lawson 2004) identified four issues for action:

- introduction of a voluntary code of practice restricting point of sale availability of inhalants in local retail outlets;
- media representation of volatile substance misuse – the group identified unfavourable and/or sensational coverage of volatile substance misuse as a problem, and took up the issue with local outlets;

- legislation – the group explored the option of introducing council by-laws, but decided against doing so on the grounds that this approach was best left to the state government; and
- research – the group identified local sources of data on prevalence and patterns of volatile substance misuse in Rockhampton, and decided to conduct its own survey in order to provide a snapshot of use, and as a basis to develop and test further strategies.

Two similar accounts of multi-level community based strategies in which police took part, both of them in regional centres in Queensland, are Gostzyla and George's (2003) account of an intervention in Charters Towers and Polsen and Chiauzzi's (2003) description of activities in Mount Isa. In contrast to other interventions, the organizers of the Charters Towers program avoided a committee structure in order to retain engagement by the young people themselves, working instead through existing networks, and a staged implementation involving partnerships between police, night patrols, local Indigenous community leaders, security firms, retailers and schools. The program is said to have reduced volatile substance misuse in Charters Towers to a point where there were only one or two young people who were continuing to misuse inhalants sporadically, with the majority of users being involved in other activities, while the program also had other community building benefits.

In Mount Isa, an action plan was developed on the basis of harm minimisation (demand reduction, supply reduction and harm reduction) to include a voluntary supply reduction project in collaboration with local traders; a Family Healing Program, which used: bush camps, school and youth centre activities; mentoring and family case management to address the psychosocial issues relating to chronic volatile substance misuse; upskilling teachers, parents and other interested adult community members in volatile substance misuse; developing and implementing appropriate protocols with Queensland Police Service and Mount Isa Base Hospital; and implementing programs that build the capacity of young people to recognise and address issues of self-esteem, resilience and other emotional wellbeing (Polsen and Chiauzzi 2003).

A police-initiated intervention that focused on supply reduction in a local shopping centre, and paved the way for broader-based activities, is *Project Kit-volatile substance misuse*, developed by officers at a suburban police station in Cairns, north Queensland, in 2003 (Queensland Police Service 2003, unpublished). Faced with increasing levels of paint sniffing in the area, police approached local retail outlets and proposed a two-part intervention: outlets were urged to restrict availability of inhalants not only in order to reduce volatile substance misuse but also as part of a strategy to reduce their own vulnerability to stealing from their premises. Following successful introduction of the supply reduction intervention, two related activities were initiated (Davis 2005). First, two local officers were inducted as 'Adopt-a-Cops' to help address issues of road safety, substance abuse and crime prevention. Second, a Police Liaison Officer began taking part in joint foot patrols on Thursday nights in targeted areas, with staff from WuChopperen Aboriginal Health Service and Cairns City Council. In 2005 the project won a Queensland Police Service Gold Award for Excellence in Crime Prevention.

With the exception of the Aurukun intervention, all of the proactive programs cited above addressed volatile substance misuse in urban settings. However, another remote area program that has attracted considerable attention is the Mount Theo-Yuendumu Substance Misuse Program on Central Australia (Stojanovski 1999). This program commenced in 1994 as a community response to a petrol sniffing crisis in Yuendumu community and has since broadened to deliver two main services – an outstation (Mount Theo) and a local youth program. Although not a police initiative, one of the factors behind the program's success is considered to be the availability of police to support both the youth program and removal to the outstation. By 1999 the program had reduced the number of sniffers from 70 to six, and in May 2001 the program co-ordinator (Andrew Stojanovski) reported to a coronial inquest that out of 125 nights there were only 25 nights with

people sniffing, and the maximum number of sniffers on any of these nights was five (South Australia Coroner's Court 2002, p.10).

From mid January to 27 February 2002, police in the Anangu Pitjantjatjara Lands mounted a preventive operation known as Operation *Pitulu Wantima* ('Petrol – Leave it Alone') (South Australia Coroner's Court 2002, 2005; Bristow 2004, p.4). The operation involved placing four police officers on the Lands every day, working with all available Community Constables. One aspect of the operation involved identifying petrol sniffers and, where it was safe to do so, emptying and crushing their petrol cans. Another aspect involved collecting data on the prevalence of petrol sniffing. During the operation, 302 instances of petrol sniffing were detected, involving 95 individual sniffers. A report into the operation, made available to the coroner, concluded that the expanded police presence had been well received in communities, and had led to many requests for assistance with issues other than petrol sniffing, leading to the conclusion that there is considerable under-reporting of crime on the Anangu Pitjantjatjara Lands when police are not available. The report also found that most reported crimes were resolved quickly, response times improved and Community Constables performed at a higher level with the additional police support. The incidence of break-ins and of violent crimes normally attributed to petrol induced rages also declined. This and two similar police operations are discussed further in Chapter 7 of this report.

One preventive approach to managing problems associated with intoxication among Aboriginal people is provided by night patrols. As Cuneen (2001) points out, night patrols differ according to whether they operate in urban, rural or remote settings, and in kinds of relationships maintained with police. However, common to all of them, he suggests, is a high level of local Indigenous community ownership, and a reliance on volunteer staffing.

One of the first to be established was the Julalikari Night Patrol in Tennant Creek, Northern Territory. It was set up by concerned community members in the mid-1980s, attracted wider attention through the Royal Commission into Aboriginal Deaths in Custody, and in 1992 was awarded the inaugural Australian Violence Prevention Award by the Australian Institute of Criminology (Curtis 1993; Cuneen 2001). According to one of the Patrol's founders, Dave Curtis, night patrols such as the Julalikari Night Patrol are often mistakenly seen by non-Indigenous agencies and groups as serving a law-enforcement function – primarily that of removing Indigenous intoxicated person from the street (Curtis 1993). However, the fundamental purpose of the patrol in Curtis's view was not law enforcement, but rather the care and well-being of members of the local Indigenous community, and the good order of local town camps. It was partly for this reason that Julalikari Council insisted on the patrol being staffed on a voluntary basis. Relations with the local police were formalized through a jointly negotiated *Agreement on Practices and Procedures* that set out the respective roles of police and the patrol.

Cuneen (2001), reviewing crime prevention approaches in Indigenous communities, concluded that night patrols – together with community justice groups – represented one of the few categories of initiatives that had been evaluated at all systematically, and reported that evaluation had tended to be positive. Evaluations of night patrols, he concluded, indicated that they can achieve:

- reductions in juvenile crime rates including for offences such as malicious damage, motor vehicle theft and street offences;
- enhanced perceptions of safety;
- reduction in harms associated with alcohol and other drug misuse;
- encouragement of Aboriginal leadership, community self-management and self-determination; and
- fostering of partnerships between Indigenous and non-Indigenous organizations.

Indemauro (1999) states that in rural areas where night patrols have been introduced, they have been accompanied by significant reductions in arrests and detentions of Aboriginal people. Blanchard and Lui (2001), drawing on an evaluation of four night patrols established in NSW in 1998, reported that the patrols demonstrated a capacity to reduce Aboriginal youths' involvement in anti-social behaviour and in crimes such as street offences, theft and malicious damage. They also helped to foster a greater sense of community safety, reduced harm associated with alcohol and other drug misuse, and encouraged community management in accordance with principles of self-determination. Night patrols were also, in Blanchard and Lui's views, positive expressions of Aboriginal citizenship:

The key to understanding night patrols as an exercise of citizenship is the notion of participation. This in turn raises issues of how people are encouraged and supported in their participation. The essential 'grass roots' involvement of Aboriginal community members in night patrols is on a voluntary basis. It is unpaid 'community' work, mostly unacknowledged by the non-indigenous community (Blanchard & Lui 2001).

Blanchard and Lui (2001) also found, however, that the patrols evaluated were forced to depend on inadequate, piecemeal funding:

The funding given to night patrols in NSW is barely enough for a single patrol. The resources needed for even one night patrol group to be sustained total approximately \$70,000 a year, little more than the annual cost of one incarcerated youth. Basic costs to be covered include: bus hire and ongoing running costs of the vehicle; personal and property insurance for volunteers; equipment including radio communications, uniforms; and training including first aid courses, drivers licences and child protection workshops. A coordinator should also be funded if the community chooses to have one. In some communities, such as Walgett and Redfern, the NSW Police Service provides this support. In others, such as Kempsey, a shire worker coordinates patrol activities. This is an extremely valuable 'hidden' cost of patrol operations. However, most night patrol operations in NSW struggle with donations from business or short term government contracts. This piecemeal approach to funding is undesirable. An alternative would be a pool of funds available to patrols to complement support acquired at the local level.

Mitchell (2004) has outlined issues that need to be addressed in setting up night patrols.

Guidelines and protocols

The Victorian Department of Human Services has published a number of guidelines and protocols relevant to management of inhalant misuse. An 'Interagency Protocol between Victoria Police and Nominated Agencies' sets out the respective roles and responsibilities of police, drug and alcohol agencies and out of home care services under the *Drugs Poisons and Controlled Substances (Volatile Substances) Act 2003* (Victoria Department of Human Services 2004a). The Department has also published guidelines on management of inhalant misuse for the community care and drug and alcohol sectors (Victoria Department of Human Services 2002). A one page *Volatile substances legislation alcohol and drug agency response form*, to be filled out whenever an alcohol and drug agency receives a young person from the police under the provisions of the *Drugs Poisons and Controlled Substances (Volatile Substances) Act*, has also been published (Victoria Department of Human Services 2004b). All of these guidelines are available on the internet at addresses shown in the reference list of this report under Victoria Department of Human Services.

The Queensland Police Service and Queensland Ambulance Service have jointly developed an immediate response protocol for dealing with volatile substance misuse (Moran & Henderson 2004). The protocol has been made available as an online learning resources on the Queensland Police intranet, and also includes a training manual for face-to-face training, a CD ROM, and Immediate Response Protocols.

Evaluating petrol-sniffing interventions

It hardly needs stating that, if we are to make any progress in efforts to address complex problems such as volatile substance misuse, we need to learn from our efforts – both from those that prove successful and from those that do not. Yet, as our literature review shows, few interventions into volatile substance in general, or the policing of volatile substance misuse in particular, have been systematically evaluated.

This practice need not and should not be allowed to continue. There is no reason why any intervention – however grand or modest in scale or objectives – should not be evaluated. Here we cannot provide a 'how to do it' manual in program evaluation (although books by Hall & Hall (2004), Pawson & Tilley (1997) Rossi et al. (2004), Windsor et al. (2004) and various articles in the journal *Evaluation and Program Planning* do so). We can, however, offer some pointers towards informed decision-making about evaluation of volatile substance misuse interventions.

First of all, it is important to recognise that, while evaluation has become something of a specialised discipline, with its own models, jargon, conferences, etc. all program evaluations are designed to address a number of conceptually simple questions:

- Was the program/intervention implemented as intended?
- If not, why not?
- If so, did it have the intended effects?
- If not, why not?
- Did it have any unintended effects (and if so, what were they)?
- If so, why?
- Did these unintended effects impact on overall program outcomes?
- What lessons can we learn from the evaluation in order to improve program outcomes?
- What lessons can we learn from the evaluation for application in other settings?

These questions are logically related. For example, it makes little sense to spend time interpreting data on program effects (or their absence) without knowing whether the program was actually implemented. To answer the questions, a number of steps should be taken by those associated with interventions or programs.

1. Clarify what it is that is to be evaluated: that is, describe the program/intervention by specifying:

- intervention objectives;
- target groups;
- resources;
- intervention methods/strategies; and
- context – with respect to place, time and other contextual factors.

2. Preliminary decisions to be made:
 - Who is/are the audience(s) for an evaluation? (It may be that different audiences require different kinds of information, or different formats. An evaluation that satisfies a funding body may not be useful to program participants. Clear specification of audiences and their needs will facilitate gathering optimum information.)
 - Should the evaluation be conducted internally – by program participants – or externally? (The former builds on 'insider' knowledge but may be seen as lacking independence; the latter is more likely to be objective, but will probably be more costly.)
 - What resources are required? (Expertise, money, time, and does the agency have these resources?)
3. Design questions (which may require specialized knowledge):
 - What relative attention should be paid to implementation processes, and what to intervention outcomes?
 - What is the most appropriate research design: eg experimental, quasi-experimental, pre-test post-test; case study?
4. Data collection questions:
 - What are the most appropriate indicators of program effects?
 - What sampling strategies are required for data collection?
 - Is baseline data available for selected indicators? If not, what sort of baseline data are available?
 - What procedures and resources are required for ongoing data collection?
5. Data analysis questions:
 - How should the data be analysed in order to enable conclusions to be drawn?
 - What specialist skills (and associated resources) are required to make data analysis possible?
6. Dissemination questions:
 - To whom should evaluators report?
 - Who owns the evaluation?

By attending to all of these questions, those involved in designing and/or implementing interventions should be able to make informed decisions about program evaluation, which in turn can provide a base for planning, resourcing and implementing an evaluation.

Conclusions

Most of the reports reviewed above are descriptive, and most evidence of outcomes anecdotal. One likely reason for this is that community-based interventions, by virtue of their diffuse, multi-dimensional structure, are difficult to document and evaluate. Another may be that there are few incentives for police officers taking part in these interventions to document their activities. Whatever the reasons, it is highly likely that many community-based initiatives in which police are involved go unrecorded in the literature. The few that have been reported and summarized here, however, offer ideas and models for adaptation to other settings.

It is worth noting that interventions that were regarded as successful were generally consistent with research on best practice in policing and crime prevention. For example, programs incorporated best practice in:

- community-based crime prevention by emphasising community ownership of the problem, community empowerment approaches and partnerships with community members and other agencies (Lane & Henry 2004); and,
- proactive policing when police incorporated problem oriented policing methods to address the multiple risk factors that contribute to volatile substance misuse (Weisburd & Eck 2004).

Underlying any such approaches is the importance of police style. Research has demonstrated that it is not only what police do that affects outcomes, but how they do it. A respectful style will increase police legitimacy and, in turn, public support and cooperation (Sherman et al. 1997). The successes that have been achieved so far could not have been achieved without an effective policing style that engaged community members, agencies and users (Tyler 2004).

While this review has provided useful examples for consideration by police in Australia we would like to emphasize that the policing of volatile substance misuse is not so unique that the broader literature on policing and crime prevention is not relevant.

Chapter four: Seven regional case studies

The policing of volatile substance misuse is conducted over all state and territory jurisdictions – each with its own legislative framework. Within these jurisdictions, policing takes place in a range of environments – from small remote communities to metropolitan cities. Within these again, there are different conditions under which officers must operate, different relationships between officers and Indigenous communities, different community responses to volatile substance misuse, and differential availability of other services and personnel to assist in addressing these problems. Nevertheless there are also commonalities. In this chapter, we present case studies from each of the areas in which we conducted fieldwork to give readers a flavour for these differences and similarities.

Kintore and Kiwirrkura

Kintore is a remote community in the Northern Territory, situated approximately 500 kilometres west of Alice Springs. It was established in about 1980 when Pintupi people returned to their homelands from communities such as Papunya to the east. Currently, Kintore has a population of approximately 400 people. Kiwirrkura is a smaller Pintupi community located 200 kilometres west of Kintore in Western Australia. It has a population of about 150 people.

A permanent police station was established at Kintore in 2004. It is staffed by three officers, one of whom is a member of the Western Australian Police Service and who is primarily responsible for Kiwirrkura. Prior to the establishment of the station, Kiwirrkura was visited every six weeks by Western Australian police based in Laverton.

There have been sporadic outbursts of petrol sniffing at Kintore since the community was established. Community members have succeeded in eliminating petrol sniffing several times. However, to date, it has always recurred. In October 2004 there were approximately 25 young people sniffing there. Although some of these individuals were as young as six, most fell within the age range of 10 to 15 years. Of these people, approximately seven were sniffing continuously and the remainder sniffed periodically. Although there was some sniffing at night, most occurred during the day in public places such as the vicinity of the community store and around family homes.

Local responses to volatile substance misuse

The Kintore Community Council has employed a sport and recreation officer and, assisted by this person and staff from the local school, community members have taken young people out on camps, especially on the weekends. They have also encouraged sporting activities in the community. Staff from the Central Australian Youth Link-up Services (CAYLUS) and Waljta Tjutanku Palyapayi Aboriginal Corporation (a non-government organisation providing family support services) have sometimes come out from Alice Springs and helped to organise activities such as musical performances and concerts. Truancy programs and night patrols have also been conducted in the community. At the time fieldwork was conducted, there were plans for an outstation to help sniffers. This has since come to fruition and has been well used by young people.

While these initiatives have had some success, it is fair to say that Kintore seems to have a high level of reliance on police officers and the staff of other agencies (when they are available) to deal with volatile substance misuse. At the same time, there appears to be some ambivalence about police involvement. This is reflected, for example, in some local people simultaneously expressing the desire that police should stop the sniffing, yet indicating concern about them taking active steps to do so (such as pouring out petrol from cans).

The police response

The fieldwork for this report was conducted before the implementation of the Northern Territory's new *Volatile Substance Abuse Prevention Act (2005)*. At that time, the Northern Territory police had no set response to petrol sniffing, and dealt with it in an entirely discretionary manner. However the police were under pressure from residents of Kintore to deal with the problem. One officer described a common situation in which:

Families call out to me '... (person's name is) sniffing' and point to the person who's sniffing – thinking that I'll fix it.

The two Northern Territory officers stationed at Kintore reported responding to sniffing in different ways. One officer is pro-active, and takes part in recreational activities. (There were reports of this officer sometimes showing great dedication in trying to ensure the well-being of sniffers who were at risk of engaging in self harm). The other officer is concerned that if the police become too closely involved in the welfare of individual sniffers, the members of the community will not assume responsibility for their actions or their own welfare. This officer, therefore, only intervenes if petrol sniffers are breaking the law or behaving in a way that calls for police intervention.

While differing responses may be individually valid, there is clearly a negative aspect to the inconsistency of the police response to petrol sniffing. If levels of petrol sniffing are to be reduced, it is important that users (and community members) know the negative consequences of their behaviour. A consistent response is also important in creating and reinforcing the social norm that it is not acceptable to sniff petrol.

Prior to the establishment of the Kintore police station, at Kiwirrkura there were approximately 30 petrol sniffers and the community had been experiencing problems with petrol sniffing for about a year. At the time we conducted fieldwork there were only three (although the numbers have since continued to fluctuate). The officer responsible for Kiwirrkura said that this decrease occurred rapidly due to a decision, made at a community meeting, that people who are sniffing petrol must do community work each morning. It seems that the regular presence of a police officer had a catalytic effect on community members who – once they knew they had support from him – decided to take their own action to stop petrol sniffing.

Although petrol sniffing is not illegal in the Northern Territory, the supply of petrol for the purpose of sniffing is. However, although police have successfully prosecuted several individuals for this offence, from their perspective, there are some difficulties. For example, a successful prosecution in 2004 resulted in a jail sentence for the offender. However, the sentence was successfully appealed by Legal Aid, and the offender quickly returned to the community.

As well as reacting to specific incidents of both sniffing and the supply of petrol, the police at Kintore have also been involved in a number of proactive strategies. These include: patrolling public buildings at night in an attempt to ensure they are not damaged by sniffers; working with members of the local night patrol to supervise night time activities in the community, such as the concerts mentioned above; participation in recreational activities, such as football and hunting; referring individuals to treatment facilities at outstations close to other communities; and referring individuals to the Department of Family and Community Services for welfare support.

Key issues

The officers at Kintore said that they were very wary of becoming involved with intoxicated individuals because of the latter's uncertain state of health, and the potential problems arising from the definition of 'custody'. According to these officers, the High Court of Australia has found *custody to extend for 24 hours after an officer has spoken to a person on a roadside*. The officers

at Kintore were concerned that this definition might mean that should one of them speak with an intoxicated sniffer, who later died in circumstances beyond the officer's control, the officer concerned would be involved in a 'death in custody', which would have a negative impact on his or her career. This concern is functioning to lessen the involvement of officers in sniffing incidents.

Commenting on being told by community members that there was sniffing at a particular house, one officer said:

I think that, if there are sniffers in that house, it should be looked at by that family. They play cards and ignore them. There are a dozen adults doing nothing, and a dozen sniffers. I don't want to waste police time and do something that the family should do.

This response raises the legitimate, but difficult issue of what should be the respective roles of the police, the families of sniffers and the broader community?

The police also expressed frustration at the lack of support from other agencies that might be expected to offer services to individuals. They claimed that often, referrals to the Department of Family and Community Services are ignored, or not responded to for periods of up to three months after the initial referral. They also expressed concern that no mental health services of any kind are available.

Despite these concerns, the success in decreasing the level of sniffing at Kiwirrkura highlights the positive impact of a regular police presence within a community. As indicated above, the officer's regular presence there appears to have given community members the confidence to deal with the issue themselves.

The Ngaanyatjarra Lands

The Ngaanyatjarra Lands cover an area of some 200,000 square kilometres in Western Australia, to the west of the South Australian and Northern Territory borders. Warburton, with a population of approximately 400 people, is the largest of the nine widely-spaced communities in this area. At the time we conducted fieldwork, members of the Western Australian Police Service patrolled the Ngaanyatjarra Lands from Laverton, 500 kilometres to the south-west. Patrols of up to four officers were present in the Lands for up to four days in most weeks. (Recently, a permanently staffed police station has begun operating at Warburton).

Commencing in the 1970s, Warburton had severe problems with petrol sniffing which, for many years, was conducted in the open and occurred continuously. At least 20 young people from there have died as a direct result of sniffing (Shaw et al. 2004) – the last such deaths having occurred in the late 1990s. Most of those who now engage in sniffing are between 10 and 24 years of age, and a number of young men have each been sniffing for at least seven years.

Local responses to volatile substance misuse

Petrol sniffing at Warburton is prohibited under community by-laws enacted under Section 7(g) of the *Aboriginal Communities Act* which enables communities to make by-laws for:

... the prohibition, restriction or regulation of the possession, use or supply of alcoholic liquor or deleterious substances.

When the by-laws were first introduced, those convicted of sniffing could be fined or sentenced to up to three months in custody. However, since the passage of the Western Australian *Sentencing Act (1995)*, which abolished custodial sentences of less than six months (Section 86), the latter option has not been available. While the imposition of custodial sentences led to some reduction, sniffing continued to cause significant community disruption at Warburton.

In 1994 the Warburton community started to use avgas as a replacement fuel for leaded and unleaded petrol. This intervention also further reduced sniffing activity (Shaw et al. 2004). More recently, avgas has been replaced by 'Opal' – a new highly refined fuel which is also low in volatile hydrocarbons and is un-sniffable.

Petrol sniffing at Warburton is now episodic. When petrol enters the community, there may be 20 to 30 young people sniffing. While most will sniff for only a short period time, there are several who sniff intensively whenever they can, and who cause a great deal of disruption when they are sniffing. However there can be periods of several months when there is no available petrol and, therefore, no sniffing.

The Ngaanyatjarra communities have engaged youth workers and instituted a youth program, partly to address petrol sniffing, and have also employed community wardens who have functioned largely in conjunction with the police. Most of the initiatives taken by the community to address sniffing have had some police involvement.

The police response

The police officers at Warburton reported consistently using a standard protocol when encountering, or responding to calls about, petrol sniffing. First, they seize and tip out any petrol in the possession of sniffers. Second, if the sniffers are intoxicated, the officers place them in protective custody in the police cells where they are given something to eat and much to drink and where, the officers commented, they often sleep for long periods. While in custody they are checked regularly by the officers at the station. The police are empowered to take these actions – with regard to both minors and adults – under Sections 5 and 6 of the Western Australian *Protective Custody Act 2000*.

If any of the sniffers become upset or distressed, officers use the WA Aboriginal Visitors Scheme (a program aimed at providing support for prisoners, which was introduced in Western Australia following the Royal Commission into Aboriginal Deaths in Custody) to allow members of their families to sit with them in the cells. If the officers are concerned about the health of any individuals, they contact the local health clinic and ask a nurse to conduct a health check on them in the cells.

Once sober, sniffers are either released with a caution or are charged to appear before local justices of the peace (JPS). (Under the by-laws, sniffers receive five cautions before they are charged.) If the sniffers are minors their parents are called to collect them and the police talk to both the children and their parents about the negative aspects of petrol sniffing.

In some cases those who are bailed for sniffing or related offences may have conditions imposed on them as part of their bail – such as being required to reside at a particular location, for example, a neighbouring community, until their hearing in court. The officers stressed their consistency in responding this way, so that users know exactly what will happen to them.

In addition to addressing particular petrol sniffing incidents, officers from Warburton also reported responding to community concerns about the excessive sniffing behaviour of particular individuals. In response to anxieties expressed by family members, they described monitoring

users and, where appropriate, charging them with offences that were likely to attract custodial sentences – thus ensuring their removal from the community and giving them time out from sniffing.

Officers at Warburton put a high priority on targeting individuals who are supplying petrol to sniffers. They have had several successful prosecutions because sniffers themselves will tell the officers who is supplying them. At the time we conducted fieldwork the fine for supplying was \$600, considerably less than the profit made on selling a 20 litre jerry-can of petrol. However, recent legislation has been passed which provides for a prison sentence for supplying petrol for the purpose of inhalation and – at the time of writing two people have been convicted under the legislation.

Over time the police have been involved in other proactive strategies to help prevent petrol sniffing at the community level in the Ngaanyatjarra Lands. These have included: getting to know young people whenever possible; conducting education sessions about the harms of petrol sniffing at the local schools; running a Blue Light disco in each community every year; running camps for young people; attendance at, and participation in, community events such as football carnivals; attendance at football carnivals in Perth; and supporting and working with Community Wardens at Warburton. However, the Officer-in-Charge commented that such strategies were the first things to go when resources become restricted.

Key issues

The police officers at Warburton expressed frustration that there were no services or facilities to which 'problem individuals' could be referred so that any underlying problems they have could be addressed, and that they had no recourse available to help members of the families of sniffers who were worried about the health and welfare sniffers. Officers also expressed frustration that the powers of the Court had been curtailed (in 1995) so that sniffers could no longer be given custodial sentences for petrol sniffing. They felt that the abolition of custodial sentences of less than three months meant that an important deterrent to sniffing had been removed and that there was an increase in sniffing after that change. According to an officer from Warburton:

Imprisonment used to work really well. When their health started to deteriorate we'd put them away for three months. When they came back they'd be fine and healthy. Their family would be happy to see them like that. Then gradually they'd slip back into sniffing heavily again, and the cycle would start again.

In noting the officer's comment, we should add that short-term imprisonment, however, attractive as a local option, is likely to add to existing concerns about the high rates of incarceration among Indigenous people. In some communities, it may also have little deterrent value.

Officers also commented on the importance of knowing individuals in the community. They felt that having experienced officers who knew many people on the Ngaanyatjarra Lands made their presence far more effective in dealing with sniffers. One officer said:

If you don't know them, they'll give you grief – no matter who you are.

Anangu Pitjantjatjara Lands

The Anangu Pitjantjatjara Lands cover approximately 103,000 square kilometres in the north west of South Australia, immediately south of the Northern Territory border. Within these Lands there are six main communities with many outstations surrounding each. The total population of the region is approximately 2,500 people – about one-third of whom are aged less than fifteen years.

The region has a history of petrol sniffing dating back to the 1970s and in four of the six communities it is common to see people walking around with cans of petrol under their noses. In 2004, it was estimated that there were about 220 individuals in the Anangu Pitjantjatjara Lands who sniffed petrol. In 2006, the estimate has dropped to about 180. The age range of these sniffers is roughly 10 to 40 years. A large number are chronic sniffers and many have been sniffing for up to 20 years. A police aide commented:

Since I've been a little boy these same ones have been sniffing. Sniffing is very difficult for us.

Between 1998 and 2004, at least eleven deaths resulting from sniffing occurred in the Anangu Pitjantjatjara Lands (Shaw et al. 2004).

In early 2004 evidence also emerged of an increase in suicidal and self-harming behaviour among youths in the Anangu Pitjantjatjara Lands, much of it apparently associated with petrol sniffing. A coronial inquest conducted in November 2004 into the deaths of four men – all associated with sniffing and three of them resulting from suicide – was told by police that, since March of that year there had been 67 incidents of suicide or attempted suicide (South Australia Coroner's Court 2005).

Local responses to volatile substance misuse

The Anangu Pitjantjatjara communities have tried many different strategies to control sniffing levels. As in the Ngaanyatjarra Lands, the Anangu Pitjantjatjara communities have established by-laws – under provisions of Section 43(3) of the *Anangu Pitjantjatjara Land Rights Act (1981)* – which prohibit the inhalation of petrol and the supply of petrol for inhalation. Many communities have also established homelands where sniffers are taken to be away from the petrol, and engage in cultural activity, which is perceived as a healing process. These homelands have functioned for varying lengths of time, but currently none are operating. Similarly, individual families have taken their children who sniff to live at other places where they have kinship connections, and where there is no sniffing. Communities have also employed youth workers who have organised sporadic sport and recreation programs to give the young people something to do. A regional non-government organisation, the Ngaanyatjarra, Pitjantjatjara, Yankunytjatjara Women's Council, also employs a youth worker who does some case management with sniffers, and offers recreational activities. These various strategies have had short-term successes. However, in recent decades, petrol sniffing has never entirely disappeared from the region.

The police response

Police services in the Anangu Pitjantjatjara Lands are provided by both police officers and a network of community constables, local Indigenous officers who provide a front line service to the communities in which they live (c.f. *Reactive interventions section*). However, if the community constables need help to deal with any particular situation, it is intended that they call for police back-up. The region is policed by officers who are flown up from Adelaide, and by officers who operate from Marla, on the Stuart Highway 40 kilometres east of to the closest community, and 600 kilometres from the most distant. However, after many years, there are now plans for a permanent police presence on the Anangu Pitjantjatjara Lands.

Generally, the community constables tend not to respond to sniffing. One commented:

I tipped it out last year (meaning a long time ago), but people get angry – 'I'll break your door. I'll burn down office'.

Another summarised the situation that exists with the older, chronic sniffers:

We can't arrest them long time sniffers. They might die if we lock them up. Boss tell us that and families tell us that – 'He been sniffing long time; you can't touch'.

A community member commented that the police *must be scared* of the sniffers, because they often leave them alone. However, police officers said that petrol sniffing is so common that, if they responded to every instance they encountered they would have no time to do anything else. As it is, they estimated that responses to petrol sniffing take approximately 50 per cent of their time. They reported that when they see large groups of individuals sniffing they tend to leave them alone. Such groups often throw rocks at police vehicles and run into the bush. The officers felt that, in these circumstances, they could not catch the sniffers even if they were to chase them – which they were aware is not recommended. On other occasions, the police leave sniffers when they are being very aggressive, but return the next morning and arrest them.

When the police do apprehend individuals sniffing they either tip the petrol out themselves, or get the sniffers to do so, and then squash the cans by driving over them. On these occasions, sniffers are arrested and bailed to appear in the next Magistrates Court. As only eight courts are held each year, this may be some weeks away and, by that time, many individuals may have several charges to answer. At Court, individuals are generally convicted without penalty under the provisions of the by-laws which prohibit sniffing. Occasionally, \$75 fines are handed down.

The police do not take intoxicated sniffers into protective custody unless the sniffers are uncontrollable and an extreme danger to themselves and others, in which case they are detained under provisions of the South Australian *Mental Health Act (1993)*. Once detained, officers are obliged to have sniffers examined by a medical practitioner – often hard to find in the region. As there are no safe facilities in the Anangu Pitjantjatjara Lands which can be used to place individuals in protective custody, they have to be taken to the town of Coober Pedy (a minimum distance of 400 kilometres). For this trip, officers must stop every 15 minutes to check on the welfare of prisoners in the back of the vehicle. This procedure is a deterrent to any individual being put into any form of protective custody.

There are plans to remedy the lack of safe facilities in the Anangu Pitjantjatjara Lands. However, police officers insisted that supervising intoxicated sniffers is not their role, and that health service staff would have to be involved. At the time of writing, there was no agreement between agencies on this issue.

Officers commented that they find policing the supply of petrol very difficult. In comparison with the Ngaanyatjarra Lands, the area is much closer to a number of outlets which sell unleaded petrol and there are more entry points for petrol to the Anangu Pitjantjatjara Lands. Also, unlike those in the Ngaanyatjarra Lands, sniffers will not tell the police how they obtain supplies of petrol. If the police see people with jerry-cans of petrol, the latter can easily claim that it is for use in their own vehicles.

From time-to-time, the police have conducted a number of 'operations' in which they have targeted petrol sniffing and alcohol offences. During these periods they have patrolled the communities and arrested every offender they encounter. Both police and community members agree that these operations reduce sniffing and alcohol-related offences. However, as soon as they cease, incidents rapidly return to pre-operational levels.

The police have used these operations to highlight the level of sniffing and alcohol-related offences in the Lands. Officers commented that they *flood the court lists*, which stresses the magistrates and the Justice Department. The police hope that this strategy will increase pressure on the whole of government for the provision of resources necessary for a more sustainable response to petrol sniffing issues.

The officers who patrol the Anangu Pitjantjatjara Lands from Marla Police Station are engaging in other pro-active strategies. They are working with community councils to establish night patrols and, in two communities, are working with local people to establish homelands to which petrol sniffers can be taken to de-toxify. Community comments suggest that these initiatives are welcomed. The police also are proactive in speaking to individuals who are suspected of bootlegging petrol; and, recently, they have been active in encouraging petrol outlets to switch to Opal fuel.

Key issues

The fact that petrol is not difficult to obtain in the Anangu Pitjantjatjara Lands contributes to the high level of sniffing. As sniffing is an offence under community by-laws, the police are obliged to respond to it. Even though they do not respond to all instances that come to their attention, the police response to petrol sniffing takes a great deal of time – but achieves little. In part, this is because there are currently no treatment facilities to which sniffers can be referred or sentenced and because few other deterrents are available. (The South Australian government has recently announced an initiative to build a treatment centre on the AP Lands, which is intended to answer this need.) Furthermore the option of taking sniffers into protective custody is not used because of the lack of facilities. Lack of agreement as to who should supervise the sobering up process is also currently impeding any progress on this option.

Anangu themselves are divided over the best response to sniffing. Some say *Take the can, but not the kid!*, while others want sniffers removed. Given this, the non-response by community constables and the fact that police officers do not respond to every instance of petrol sniffing, there is no consistent response to sniffing – which sends an ambivalent message to those engaged in petrol sniffing.

The fact that there are approximately 180 sniffers in the Anangu Pitjantjatjara Lands suggests that the police and communities' responses have had limited success – both in deterring those who want to sniff, and in curtailing those individuals who limit the effectiveness of Opal by supplying petrol into the region for personal profit. The lack of a consistent response, and the lack of any immediate deterrent, such as being placed in protective custody, mean that there are no real consequences to being arrested for sniffing. This is exacerbated by the limited sentencing options for sniffers when they appear before a court.

Alice Springs

Alice Springs is the regional centre for Central Australia. It has a population of approximately 25,000 people of whom about 5,000 are Indigenous Australians. In addition, a further 8,000 people reside in the surrounding region, mostly in small Indigenous communities. A complex set of language and cultural groupings exist across the region.

Though low levels of volatile substance misuse have been present for many years, mostly among Indigenous youths, Alice Springs experienced a sharp upswing in volatile substance misuse in 2004. Some interviewees expressed the belief that the use of aviation fuel (avgas or COMGAS), and now Opal, in remote communities has led young people from those communities who want

to 'sniff' going to Alice Springs where volatile substances are more readily available. It should be noted that – as in other urban areas – the main volatile substances used in Alice Springs are paints, glues and aerosols, rather than petrol. Those who use petrol when they are in remote communities generally shift to these other substances when they are in town.

The number of volatile substance users in Alice Springs fluctuates. At the time we conducted fieldwork for this project staff from the CAYLUS estimated that there were between 20 and 30. However, at times during 2005 it has been estimated that there were as many as 60 inhalant users in Alice Springs.

Local responses to volatile substance misuse

The response to volatile substance misuse in Alice Springs has been broad-based and multi-stranded. CAYLUS operates a comprehensive intervention project aimed at improving the quality of life of young Indigenous people and reducing volatile substance misuse. It was jointly developed by a number of agencies located in Alice Springs and surrounding areas in Central Australia – including Tangentyere Council, Central Australian Aboriginal Congress (an Aboriginal community-controlled health service based in Alice Springs, known locally as 'Congress'), the governing bodies of remote Indigenous communities, and outstation-based petrol sniffing treatment services. CAYLUS is based at Tangentyere Council (an umbrella organisation for the Alice Springs 'town camps') and works across Central Australia. Among its various activities, CAYLUS provides case management and support for individual users and supports communities to develop their own responses to petrol sniffing and other volatile substance misuse. It has been active in promoting supply reduction measures including the use of COMGAS and now Opal and has developed a 'retailers kit' and worked with retail outlets to monitor and limit the sale of other volatile substances.

Tangentyere Council conducts a Night Patrol service in the town camps for which it won the Australian Violence Prevention Award in 2002. Although most of its encounters are alcohol-related, it actively targets volatile substance users – most of whom are taken to their homes or placed in the care of responsible adults. The Night Patrol has a memorandum of understanding, and works closely, with the Alice Springs police. Between late-2002 and early-2006, Tangentyere Council also conducted a Day Patrol which concentrated its activities on public spaces in the town. It was established as part of a package of measures introduced to complement a trial of liquor licensing restrictions in the town and it included a focus on volatile substance misuse. The Day Patrol was funded jointly by the Alcohol Education and Rehabilitation Foundation (AERF) and the Northern Territory Government. However, at the time of writing this report, there was uncertainty about the availability of ongoing funding for the Day Patrol.

The Drug and Alcohol Services Association (DASA) – a non-Indigenous non-government organisation – operates a sobering-up shelter in Alice Springs; most of the clients of which are Indigenous people intoxicated by alcohol. However, it also accepts adult – but not minor – intoxicated, volatile substance users and is used as a place of safe custody by the police for non-violent intoxicated users. DASA also operates a 16-day *Inhalant User Program* for adults. The program provides supervised detoxification for users and helps them to re-establish family and other supports.

Several agencies in Alice Springs provide short-term accommodation for young people from different age groups – some of whom may be volatile substance users. These include: Anglicare; Tangentyere Council which, under its Safe Families Program, has ten beds for under-15s; and Alice Springs Youth Accommodation and Support Services (ASYASS) which provides accommodation, including a youth refuge, for 15 to 17 year-olds at two locations. However, because they provide accommodation for other young people at risk, these services are not able to act as places of safe custody for 'intoxicated' users.

Youth counselling is conducted by both ASYASS and Congress, which also runs a late-night caravan at the Alice Springs Youth Centre that provides activities such as gymnastics and skateboarding. ASYASS also has a drop-in centre and has undertaken recreational programs, such as a bicycle rebuilding project. It has also provided training on working with volatile substance users for youth workers employed by other non-government organisations. Other initiatives have included: case work with the families of users; video-making and multi-media courses for youth conducted by the Gap Youth Centre's Reconnect Program; school holiday programs for youth at risk and a youth Community Development Employment Program (CDEP) program (for those aged over 16) run by Tangentyere Council; and a youth night patrol run by the Alice Springs Town Council. In the Lhere Artepe (Anmatyerre) and Yarrenyty-Arltere (Larapinta Valley) town camps, the Education Department has also run 'outreach schools' with an emphasis on arts and recreation programs to encourage users, or potential users, of volatile substances to attend school.

Apart from the detoxification and support program conducted by DASA, there are no treatment facilities for volatile substance users in Alice Springs itself. However, as mentioned previously, in the Central Australian region there are three outstation-based treatment programs at Ilpurla, Injartnama and Mount Theo. The latter has had considerable success in reducing petrol sniffing at Yuendumu.

Trespass orders – taken out under the *Northern Territory Trespass Act* – have also been used creatively in Alice Springs. They have been used to keep inhalant users away from private residences and Tangentyere Council staff, and some town camps leaders – with the support of the police – have used them in an attempt to reduce the bootlegging of petrol. The use of these orders has been reported to be effective and a worker from CAYLUS said that most people listed on trespass orders do not challenge their listing, but stay away.

In addition to the initiatives discussed above, staff from a number of agencies – including CAYLUS, Tangentyere Council, Congress, the Gap Youth Centre, ASYASS, the NT Department of Family and Community Services and the NT Police – have also established an inter-agency case committee. Participants in this reported a high level of effective cooperation.

The police response

At the time field work was conducted, the police response to volatile substance misuse was undertaken within the framework of Section 18 of the *Misuse of Drugs Act*, under which it is an offence to supply petrol for the purpose of sniffing, and Section 11 of the *Community Welfare Act* which authorises members of the police force to take minors into custody if they believe such minors are in need of care. An officer stressed that the police response is also determined by the common law duty of police officers to protect the lives of individuals – that is to have a 'duty-of-care'. Providing an example, he described finding a thirteen year old boy intoxicated by a volatile substance, wearing light clothes on a very cold night. The child had committed no offence but – as the officers on patrol were concerned that he might die of exposure during the night – they took him into custody. They initially tried to find a place of safety for him. However, he was behaving aggressively, and neither his family nor the supported accommodation facilities would accept him. After exhausting these options, the child was taken to the police cells where he was kept under observation until the morning.

A major police response to volatile substance misuse in Alice Springs is to patrol areas where sniffing is known to occur and request young people to move on. In cases where intoxicated adult users are encountered, if they have committed no other offence, officers usually take them to the DASA sobering-up shelter. However, if officers apprehend minors, they notify their Watch Commander and follow the instructions they receive: usually to find a place of safety in which the minors can be left. If they are not behaving aggressively they are taken home if possible, or to one

of the supported accommodation facilities. However, problems arise if the user is behaving in an intoxicated or aggressive manner. As indicated in the previous section and the example above, there is no place of safe custody to which intoxicated juvenile users can be taken. Thus, officers frequently find themselves driving around with minors until the latter are sober enough to be accepted into the youth shelter. If officers are concerned for the health of minors they take them to the Alice Springs Hospital for assessment. This can result in users being admitted. However, if users are acting aggressively, hospital staff are reluctant to take them. In cases where all other options fail, minors are taken to police cells for protective custody under provisions of the *Community Welfare Act*.

Where particular minors are frequently encountered, or otherwise perceived as being at risk, officers refer them to staff from agencies such as Family and Children's Services. Officers told us that, apart from their concern for the users involved, they also make such referrals to highlight the inadequate response of such agencies to the problem of volatile substance misuse.

In Alice Springs, police are also engaged in number of proactive strategies. These include:

- participation of senior officers in interagency meetings aimed at coordinating responses;
- checking the protocols of non-government agencies for dealing with volatile substance users; and
- providing support to staff of agencies such as CAYLUS on occasions when they go to pick up users from their homes to take them to treatment facilities.

Key issues

Police officers noted the difficulty in finding places of safety to accommodate juvenile volatile substance users who are intoxicated. Officers may expend considerable time exploring alternatives, yet may often have to take minors to the police cells for their safety.

Both the police and non-government agencies were very positive about their working relationships with each other. They reported common understandings of what each agency does, and efficient sharing of the response to volatile substance misuse between agencies.

The use of trespass legislation has been effective in giving to families, who are experiencing disruption from sniffers, a means by which to protect themselves, and has also been of some value in tackling the problem of bootlegging.

Mount Isa

Mount Isa is a regional centre in north-west Queensland, located some 1,900 kilometres from Brisbane. It has a population of about 20,600 people, of whom just over 15 per cent are Indigenous. Of the latter, almost half (about 1,500 people) are aged less than 18 years. The city is located in the country of the Kalkadoon people.

Volatile substance misuse emerged as an issue in Mount Isa, as it did in several other urban centres in Queensland, around mid 2000. Anecdotal reports at the time suggested that between 50 and 70 youths were engaging in volatile substance misuse, 25 to 30 of whom were chronic users (Polson & Chiauzzi 2003). Most were aged between 10 and 16, with reports of children as young as five years inhaling.

In November 2001, local officers of the Queensland Police Service and the (then) Department of Families jointly convened a public meeting in Mount Isa to consider responses to volatile

substance misuse. This in turn led to the formation of the Mount Isa Volatile Substance Misuse Action Group (MIVSMAG), later re-named the Mount Isa Substance Misuse Action Group (MISMAG). This Group developed a local community-based strategy (described below).

Evidence about prevalence remains anecdotal; however, there appeared to be a consensus that, in May 2005, there were 10 to 15 regular, or chronic, users in Mount Isa, and another 30 to 50 occasional users. In the view of some local observers, the apparent decline in usage reflected the likelihood that while older users may have graduated to other recreational drugs, fewer young people were commencing to sniff than previously.

Regular volatile substances users in Mount Isa are well known to local police, and many are in the care of the Department of Child Safety and have been involved with the Youth Justice System. The most commonly used substance is paint, often stolen from shops, although aerosol cans of deodorant or other substances are also used. As in other urban contexts, petrol is rarely used. Usage patterns were described by local observers as being influenced by seasonal factors, and by the presence of ring-leaders and visitors.

Local responses to inhalant misuse

Participants in the MISMAG initiative included several individuals and agencies, including a regional youth worker, Queensland Health, Turning Point Youth Services, Queensland Police, Injilinj Child and Youth Health Service, Aboriginal and Islander Child Care Agency, Centacare, several Indigenous elders, Yapatjarra Aboriginal Medical Service, and Mount Isa Centre for Rural and Remote Health.

An action plan (Polsen & Chiauzzi 2003) was developed incorporating five programs:

- a voluntary supply reduction project in collaboration with local traders;
- a pilot 'family healing program', designed to address psychosocial issues relating to chronic volatile substance misuse;
- up-skilling teachers, parents and other adults interested in addressing volatile substance misuse;
- supporting implementation of existing programs designed to promote young people's self-esteem, resilience and other emotional wellbeing issues; and
- developing and implementing protocols for police and hospital personnel to ensure a care pathway for users.

These programs were implemented between 2002 and 2004.

In July 2004 the *Police Powers and Responsibilities and Other Legislation Amendment Act* came into effect in Queensland, increasing police powers to deal with volatile substance misuse (without making the misuse an offence) and establishing a 12-month trial of a system of 'safe places' in five locations, one of which was Mount Isa (Giskes 2003). Under the amendments, police were authorised to search and apprehend persons known or suspected to be engaging in volatile substance misuse and to remove them to a place of safety. This could be a hospital, a user's home, or a designated 'safe place'. The 12-month trial included provision for the establishment or upgrading of safe places in each of the five locations.

The police response

The police role in response to volatile substance misuse in Mount Isa can be considered under three headings:

- a reactive role, responding to incidents as they come to their attention – under the legislative amendments referred to above since July 2004;
- preventive initiatives, largely conducted under the auspices of a school-based constable and a crime prevention officer; and
- involvement by individual police officers in the activities of MISMAG.

When the police find young people sniffing, if it is early evening the young people generally run and the police let them go, being aware of the health risks involved if they give chase. The police also know that, if they take inhalant users to a safe place early in the evening, the users will probably discharge themselves (as they are entitled to do under the legislation) and return to their friends. Later in the evening, when the young people are hungry and tired, they are generally more willing to be taken to a safe place. The police know most regular volatile substance misuse users individually and discuss where they want to be taken, knowing that the young people are free to leave if taken elsewhere. Often the user's home is not an option, but not all young people want to be taken to a designated safe place. If young people are incoherent or if the police are in any doubt about their condition, they call an ambulance to take them to hospital. According to police interviewed for this study, the new legislation has not had significant impact on their work.

Police engagement in activities of an educational or other preventive nature is undertaken mainly by two officers (a school-based constable and a crime prevention officer) and by Indigenous police liaison officers. Police also have linkages with agencies such as the Night Patrol and Turning Point Youth Service. The latter was said to be the first youth service in Queensland to implement the 'Adopt-a-Cop' scheme, under which two police officers regularly visit the service and form positive relationships with the young people. A previous officer-in-charge of the police station used to visit Turning Point and coached interested youths in boxing, and would talk to them and listen to their views.

As previously indicated, police officers in Mount Isa have been involved in MISMAG from the outset, and have made a significant contribution to the development of the group's multi-sectoral nature and its commitment to a multi-pronged approach to addressing volatile substance misuse.

While several of those interviewed commented favourably on police involvement in community-based preventive work, some also identified a number of factors that reduced police effectiveness, notably:

- high staff turnover among police, and the consequent difficulties in developing and sustaining relationships with other agencies;
- an emphasis on inter-agency linkages on the part of police at the expense of a more 'grass roots' approach; and
- a perception, especially among young people, that Aboriginal Police Liaison officers were 'gammon cops' (i.e. not 'real' police) and therefore not accorded the same degree of respect.

Key issues

Despite there being limited resources in the town to draw upon, the workers who are in place have worked and cooperated in such a way as to make good use of available resources and have made significant progress with substance misuse problems. The police have played an important positive role in this.

Cairns

Cairns is a major urban centre located on the north Queensland coast, with an estimated population in 2001 of 126,364 persons. The Indigenous population of 8,819 (7 per cent of the total) includes many Torres Strait Islanders as well as Aboriginal Australians, reflecting Cairns' role as a regional centre not only for the Cape York district but also for the Torres Strait Islands.

Cairns, along with Mount Isa, was one of five urban sites selected by the Queensland Government in 2004 as trial sites for the implementation of the *Police Powers and Responsibilities and Other Legislation Amendment Act* which – as indicated previously – enabled police officers to apprehend and detain persons believed to be engaging in volatile substance misuse, without making the misuse an offence.

Although several remote Aboriginal communities in Cape York experienced intermittent waves of petrol sniffing during the 1990s, volatile substance misuse did not become a prominent issue in Cairns until early in 2002, when Aboriginal Police Liaison Officers in Cairns reported coming into contact with increased numbers of youths inhaling paint. At the time, Aboriginal Police Liaison Officers began referring anxious parents and others looking for guidance to the local Aboriginal medical service – WuChopperen Health Service – which included a substance misuse service under its *Social Health* program. Faced with signs of widespread alarm about perceived dangers of self-harm and property damage associated with paint sniffing, the Substance Misuse Worker at WuChopperen, in conjunction with local police officers, concluded that two initiatives were urgently needed:

- provision of information about the issues to the community; and
- a forum to enable service providers to work together.

Out of these decisions grew the Cairns Inhalant Action Group (CIAG), activities of which are outlined below.

No reliable data are available from which to estimate the number of volatile substance users in Cairns. Anecdotal reports obtained from interviews suggested that, in February 2005, there were approximately 50 regular users in the city, about 20 of whom sniffed virtually every day. Anecdotal reports also indicate that the substance most commonly inhaled was spray paint, although there were some reports of deodorants being used.

Users ranged in age from 7 to 18 years of age, with most participants being between 10 and 15 years of age. Several of those interviewed suggested that most young inhalant users stopped sniffing at about the age of 15, and turned to other substances such as cannabis or alcohol. While many of the regular inhalant users are resident in Cairns, others are more transient young people who have come down to Cairns from communities in Cape York for a variety of reasons (including being evicted from communities).

Local responses to volatile substance misuse

The most significant local response to volatile substance misuse in Cairns has been the formation and development of the CIAG. Among the main activities of CIAG have been:

- production of a pamphlet advising parents and others of the short and long term effects of volatile substance misuse, and how to respond when encountering it;
- development of a street outreach program – involving collaboration between a youth worker employed by Cairns City Council, Aboriginal Police Liaison Officers, and a substance misuse worker employed by WuChopperen Health Service – in which team members regularly go to places where youths at risk are likely to be found, talking with them, trying to establish relationships and identify needs, and sometimes referring them to services;

- preparation of a CIAG Strategic Plan, used as the basis for monitoring progress at monthly meetings;
- successful application to the Alcohol Education and Rehabilitation Foundation for funds to employ a specialist Indigenous substance misuse worker; and
- preparation of a flow-chart designed to enable people to recognise options and appropriate actions when dealing with persons intoxicated on volatile substances and/or exhibiting signs of self-harm (see Appendix).

The Strategic Plan developed by the CIAG focused on six key strategies:

- limiting access of young people to volatile substances – by assisting with selection and distribution of a retailers kit for responsible sale of volatile substances and promoting responsible retail practices;
- supporting and assisting with staff development for appropriate service providers – including developing street intoxication protocols, assisting with development of protocols for the hospital accident and emergency department, and continuing to develop awareness of patterns and consequences of inhalant use, and options for addressing the issue;
- improving inter-agency case management by sharing information among service providers and developing inter-agency case management protocols;
- identifying patterns of use and gaps in services for the at-risk group – by conducting needs assessments among service providers, and monitoring changes in volatile substance misuse in Cairns district;
- being a conduit for information to both community members and service providers – including maintaining a clearing-house of volatile substance misuse-related information, and disseminating information to media outlets (within recommended guidelines); and
- promoting, encouraging and supporting community action – by promoting CIAG as a resource for the Cairns community and surrounding districts and supporting further diversionary activities for youth (although these have been limited by lack of resources).

The police response

According to police officers, on an average month in Cairns about 4,000 jobs were allocated through the Computer Assisted Dispatch system – i.e. about 130 per day. Volatile substance misuse accounted for about 20 jobs per month – less than one per cent. When an incident of volatile substance misuse was reported it was normally allocated a 'code 3' in a four tier system (1. life in danger or police officer requesting assistance; 2. offender on premises and/or person in distress; 3. not a criminal matter; 4. not core business, e.g. bike reported stolen, no sign of thief).

During the study period, the immediate response of police to volatile substance misuse in Cairns was largely shaped by the city's inclusion as a trial site for the new *Police Powers and Responsibilities and Other Legislation Amendment Act* and the establishment of a 'place of safety' (see description in Mount Isa case study). When picking up an intoxicated minor, police referred the case to the Juvenile Aid Bureau (JAB) within the Police Service. The JAB could then refer the case to the Department of Child Safety through the weekly Suspected Child Abuse and Neglect (SCAN) inter-departmental process. However, because of resource limitations, the SCAN process tended to be reserved for children aged less than ten years. Thus, many inhalant users were excluded from the SCAN process. Officers were also required to record interactions with intoxicated minors in a field of the Queensland Police database created for the purposes of monitoring the new legislation.

Officers reported that they normally explored options for taking young people home before resorting to the 'safe place', which in Cairns was operated by Anglicare. The police also have a memorandum of understanding with the Queensland Ambulance Service for responding to incidents of volatile substance misuse, and have additional powers under the *Mental Health Act*.

Police officers reported a number of concerns about the arrangements under which they dealt with volatile substance misuse. The first was the apparent anomaly of being given increased powers to apprehend and detain young persons believed to be engaging in volatile substance misuse (and being expected to use those powers), without being given the powers to compel persons detained to remain in the selected 'safe place'. Police acknowledged that in some instances the lack of enforcement powers made them reluctant to engage with inhalant users.

A second source of concern was the absence of any services or facilities to address the needs of inhalant users beyond the capacity to remove them from harm's way while they were intoxicated. Several police expressed the view – shared by many others who came into contact with inhalant users – that some sort of follow-up facility or program was required to help inhalant users deal with their problems. Yet no such facility or program existed. In the view of police, volatile substance misuse was not primarily a policing problem, but police had in effect been left to respond to it without the support of adequate referral pathways.

It appeared to us that the health and welfare sectors, in particular the Alcohol and Other Drugs Service of Queensland Health, had made little effort to engage with the issue of volatile substance misuse. It was as if the police – having been given increased powers to address the immediate issues of public order generated by volatile substance misuse – had been left holding the young people (if not the baby) in need of other support services. The absence of health and welfare representatives from local initiatives to address volatile substance misuse makes coordinated case management of individual inhalant users virtually impossible.

Since its inception, Cairns police have played a central role in the activities of CIAG. In particular they have been key players in the street outreach program described above. In addition, the JAB of the Queensland Police Service has been engaged in identifying young people considered at risk of engaging in volatile substance misuse and, through CIAG, alerting other agencies in the hope that interventions can occur 'before' the young people concerned become caught up in the juvenile justice system.

In addition, in 2003, officers at one station in Cairns initiated 'Project KIT – VSM', an exercise in prevention that earned commendation from the Queensland Police Service. The project, which relates to issues of supply of volatile substances by local traders, is described in Figure 2.

Figure 2: Project KIT – VSM: A community-based exercise in prevention

Project KIT – VSM (Volatile Substance Misuse) was a community policing initiative introduced by staff at Raintrees Police Beat, a Queensland Police Service 'shopfront' station located in Raintrees Shopping Centre, Cairns. The shopping centre serves three Cairns suburbs – Westcourt, Mooroolool and Manoora – all of which contain an above-average proportion of low income households and families from a range of cultural backgrounds, including Aboriginal, Torres Strait Islander, Samoan, Papuan New Guinean and others.

In July 2003, Raintrees Police officers observed an increase in incidents involving young people engaging in volatile substance misuse – especially paint sniffing and aerosol misuse – and consumption of methylated spirits (Queensland Police Service 2004, unpublished). Consultation between police and other agencies, including a local Indigenous community-controlled health service – WuChopperen Health Service – pointed to linkages between volatile substance misuse, juvenile crime, anti-social behaviour, truancy and health problems. Senior Constable Michael Musumeci of Raintrees Police Beat concluded that one significant factor contributing to local problems was the easy availability of volatile substances.

In January 2004, a conference was held at the Police Beat attended by managers of local supermarkets. Representatives of Cairns City Council Youth Action Group and WuChopperen gave a briefing on social and health effects of volatile substance misuse. A number of issues were identified through the consultations, in particular:

- lack of awareness on the part of retailers with regard to selling volatile substances;
- absence of protocols governing placement of volatile substances on shelves; and
- uncertainty among retailers about how to respond to would-be purchasers already under the influence of volatile substances.

The meeting was also attended by local media outlets, who reported positively on the police-community engagement.

Following the meeting, retailers agreed to remove two-litre bottles of methylated spirits from the shelves, and to place other substances liable to abuse, such as aerosol paints, directly under the control of counter staff. Education materials were also made available.

One store manager commented that some staff were abused for refusing to supply people who were clearly already intoxicated. However, the local police support made it possible, and in time both the visits and the abuse ceased.

In a final phase of the project, two police officers were inducted as Adopt-a-Cops and an Aboriginal Police Liaison Officer was brought into the project. In 2004 the project was recognized by Queensland Police with a Gold Award for Excellence in Crime Prevention (Davis 2005).

Project KIT – VSM reduced volatile substance misuse and related activities in the area. While police who were interviewed acknowledged that there may have been a displacement effect, it appeared that the overall level of VSM in Cairns fell as a result of the initiative.

Davis, B. (2005) Winning project targets volatile substance abuse. *Police Bulletin: Queensland Police Service* No.292, April, p.14.

Queensland Police Service (2004) QPS Executive Summary 2004 Proposal: Project KIT – VSM

Key issues

The Cairns case study furnishes both positive and negative lessons for policing volatile substance misuse. On the positive side, police involvement in establishing Cairns Inhalant Action Group, their subsequent participation in the street outreach program, and their initiative in developing the 'Project KIT – VSM' are all examples of community engagement by local officers that have helped coordinate and support responses to volatile substance misuse and to make maximum use of resources available.

On the negative side, the absence of adequate support from both the health and welfare sectors, and of medium and longer-term treatment options for addressing volatile substance misuse, have exposed police to a danger that they will be called upon to play a role for which they are not trained, and therefore made them wary about becoming involved in individual incidents in the first place.

Perth

Perth is the capital city of Western Australia and is Australia's fourth largest metropolitan city. It has a population of approximately 1.4 million people of whom about 1.6 per cent are of Indigenous Australian origin (compared to a state-wide percentage of about 3.5 per cent).

Concern about volatile substance misuse in Perth has been strong since the early 1990s. While there are non-Indigenous volatile substance users in Perth, most appear to be Indigenous. According to descriptions from both Indigenous community members and the police, these can be grouped – based on the nature of their use – into three non-exclusive categories: young users, cyclic users and chronic users. The age range of these users is wide – from as young as 5 to as old as 65 years – although most are in their early to mid teens.

In Perth the most frequently used volatile substances are commercially available products such as spray paints, toluene, felt-tipped pens and liquid paper. As in the other urban contexts considered in this report, petrol is not often used.

Most volatile substance misuse appears to take place in Northbridge (a popular entertainment precinct adjacent to the central city), and in outer suburban centres such as Armadale, Midland and Fremantle, where young people congregate and which they access by means of the suburban rail system. In these areas, there are small numbers of easily identifiable users. However, the overall extent of volatile substance misuse in Perth is difficult to quantify. Many community members and police officers claimed that there has been a decline in the number of inhalers, but if this is so, the extent to which it might be due to counter-measures or to more ready access to other drugs is not clear.

Local responses to volatile substance misuse

Most of those interviewed from Indigenous and non-Indigenous community organisations, the Western Australian Police Service (WAPS) and other government agencies viewed volatile substance misuse as being associated with a wider range of problems. In line with this, agencies in Perth which are involved in responding to volatile substance misuse also deal with other problems: 'no agency focuses solely on volatile substance misuse'. Several services or facilities exist which provide some health and substance misuse services (among others) to a youth and/or Indigenous clientele – often to a limited extent or only in particular geographical sectors of the city. In many cases there is little collaboration between these services and the police.

An important service is provided by the Nyoongar Patrols, which cover central Perth (Northbridge and the central business district), Midland, and Fremantle. The patrols provide early intervention to Aboriginal people at risk of substance abuse, self harm, violence, and incarceration. In central Perth, the patrol has a formal memorandum of understanding with WAPS that defines the roles of its members and police officers in various situations.

In Northbridge, Mission Australia conducts its On-TRACK program. This program, which provides counselling services and a safe place for young people who are intoxicated or at risk of harm, is operated out of the same building that houses the WAPS' Juvenile Aid Group (JAG), and two officers from the Department of Community Development's Crisis Care group, with which it cooperates closely. On-TRACK staff also work closely with staff from the Nyoongar Patrol and these agencies meet regularly.

A multi-agency reference group, set up by JAG in 1996, aims to provide an ongoing joint service response to the youth problems in Northbridge. The group is made up of representatives from both government and non-government agencies that deal with youth, justice, welfare and drug-related issues. This in turn led to the development of the Inner City Youth Partnership agreement, which outlined protocols for service delivery and information exchange, further strengthening the collaborative relationship shared by this reference group.

There are two sobering up shelters in Perth. These were established to provide safe places for adults intoxicated by alcohol and are not set up to deal with minors or volatile substance users. The only sobering up service in the Perth metropolitan area which accepts minors under the influence of volatile substances is that provided by Drug Arm WA in Kelmscott, near Armadale – and that only has three places.

The police response

Incidents of volatile substance misuse in Perth take place on most days of the week, both day and night, often in and around public places. Such incidents come to the attention of police officers in various ways including encounters on regular vehicular or foot patrols, or in response to call-outs from the general public. Such encounters are not always for volatile substance misuse *per se*, but include instances of erratic behaviour, disturbances, or are the result of concerns among business owners and others about young Indigenous people congregating near their premises. With regard to call-outs, an officer said:

We have to prioritise our time and sometimes we can't attend reports of sniffing. Like today, this serious domestic we're dealing with is tying-up our only available car, and three or four officers. So cases like this will always take priority.

Several officers of various ranks echoed the words of a constable who said:

It's not a police function to pick up people who've been sniffing; but if reported, or we come across an incident, we have a duty-of-care.

According to the officers we interviewed, the first task when encountering, or responding to call-outs, is to conduct an initial assessment of the situation. How many are there? Are they intoxicated – on volatile and/or other substances? Are they behaving irrationally or aggressively? Do they have weapons or objects that might be used as weapons? Do they need medical attention? Are they likely to take flight? A key element in such an assessment is to ensure that the officers do not do anything to put the users, other people, or themselves in danger.

In Western Australia (apart from the Ngaanyatjarra Lands), volatile substance use or intoxication are not offences. However, police officers are empowered to apprehend and detain intoxicated persons – both adults and minors – and to confiscate volatile substances and other intoxicants under the *Protective Custody Act 2000*. They are also empowered to apprehend minors who they believe to be at risk and take them to a parent, some other responsible adult, to a safe place, under Section 138B of the *Child Welfare Act 1947*.

Often, the first response of people who have been using volatile substances is to run from the police. As one officer put it:

They want to sniff and ... you're ruining their fun.

Officers were generally aware of the health danger to users of pursuing them and did not do so. A sergeant said that, in the Northbridge area, they could use the security system, radio other officers, or contact the Nyoongar Patrol – users would inevitably be apprehended later in the evening.

When users have been encountered and the situation has been stabilised, users are asked to hand over the substance they have been using or it is taken from them. As users often attempt to hide their 'sniff' (as both users and officers often describe volatile substances), officers look for potential hiding places and retrieve the substances. In Western Australia, police officers are empowered to seize substances used for the purpose of inhalation. In any case, most of those interviewed said that they confiscate and dispose of the 'sniff' as part of a general duty-of-care, and because they are aware that it is important in the eyes of the public. Officers said that, even if minor offences have been committed, charges are rarely laid as the individuals are intoxicated, and will be seen by the courts to be not of full capacity. The usual police procedure is to tell the users to go home.

However, where a person is identified as being at risk – because he or she is a minor, and/or is intoxicated or in need of medical attention – there was a clear recognition among officers of their duty-of-care. As one might reasonably expect, officers were also concerned about the implications that failure to exercise such care might have for themselves. A senior sergeant said:

Our biggest issue is our duty-of-care. If something happens to them (users) up to 48 hours after we've dealt with them then we may still be accountable.

The medical well-being of users is considered as being of primary concern. Generally, if they are unconscious or injured, an ambulance is called to take them to hospital. If the users are ambulatory, depending upon location, those at medical risk may be taken to the nearest hospital emergency department. However, officers noted that general hospital staff were often reluctant to accept persons who were intoxicated and/or likely to be aggressive. In such instances, officers were often required to remain for some time at the hospital, thus tying up resources. Similarly, mental health services were also reported to be unwilling to accept persons who are intoxicated.

Some officers prefer to take intoxicated juvenile users to the latter's homes. However, as such minors may be apprehended in police districts considerable distances from where they live, this option can also be limited. Furthermore, in at least some instances, parents or guardians might not want to accept their intoxicated, potentially aggressive, children; and, in others, the children might actually be at greater risk if returned home (for example, if members of a child's family have been drinking heavily).

Despite the size of Perth, there is a limited range of options available to officers seeking to take apprehended users to places of safety. This applies to both adults and minors. As indicated above, there are only two sobering-up shelters for adults and one with limited places for minors. One

option available to officers is the referral of apprehended minors to the Crisis Care service operated by the Western Australian Government Department of Community Development. A sergeant reported that, on occasion, this had worked well, but another officer commented:

We refer them to Crisis Care but they're in the same boat. They're overloaded too, because they have to deal with a broad spectrum of situations.

Speaking of this situation an inspector from the Fremantle district said:

At the moment there are only two choices that are practicable: hospital or lock-up.

Many volatile substance users who are intoxicated or at risk to themselves or others are placed in police cells where no other option is available. However, many officers are not happy with this option because of the time and resources consumed:

... it may be quite time consuming and tie up a lot of man-power, so lots of our work comes down to priority.

In 1992, WAPS established its Juvenile Action Group (JAG) in response to the growing number of 'street kids' in Northbridge and central Perth. JAG aims to prevent serious social, criminal and physical harm caused to, or by, young people in those locations. JAG team members have both reactive and proactive roles and deal with a range of youth issues including homelessness, child abuse, substance misuse and juvenile crime. As many young Aboriginal volatile substance users congregate in Northbridge, JAG officers encounter them on a daily basis. They have got to know many of the regular users, and their personal situations, and the rapport between them leads to enhanced responses. A JAG officer said:

We believe in them. If you give them time and listen to them, they see you as a stable force in their lives. They say 'I have a friend who's a cop'. We're trying to break the cycle and the image that we are the enemy ...

The key is relatedness to the kids. We are more of a service, and our job is to serve. They love and hate us.

As indicated above, JAG initiated the formation of a multi-agency reference group in 1996 and JAG is generally credited with contributing to the reduction of volatile substance misuse among young Indigenous people in the Northbridge area. Its success has been attributed to:

- a specific work charter and aims;
- strong links with other relevant service providers;
- close proximity and easy access to relevant services;
- effective, regular inter-agency communication and information sharing; and
- well selected staff apt in policing youth.

JAG's ability to focus on long-term harm reduction is unique in this area. While police officers stationed elsewhere expressed concern about the social and welfare problems with which volatile substance use is associated, for most, dealing with these issues is beyond their work charter and much of their work is limited to preventing immediate harms.

Reducing supply has been a part of the police response to volatile substance misuse in at least three police districts – centred on the Perth, Midland and Fremantle areas. The focus of these efforts has been to work with local retailers to restrict the sale of volatile substances to minors and/or known volatile substance users and to prevent the theft of volatile substances.

Complementing the supply reduction initiative, alone and in conjunction with others, the WAPS Crime Prevention Unit in Midland has been involved in a number of preventive strategies and has dedicated a considerable proportion of its resources to this. Activities have included: establishment of a Mobile Police Station in a park where young people at risk congregated; Police and Citizens Youth Club activities; and establishment of the 'Boom Room' – a drop-in centre for younger children where recreational activities and snacks are provided.

Key issues

In terms of reactive policing, the options available in Perth are a function of the condition of the person apprehended, the police district in which they are located and the other services available there (and police awareness of them), the capacity of those services and the policies and attitudes of their staff, and police priorities and pressures on police resources.

Officers expressed frustration about dealing with volatile substance misuse when it is not an offence, and about the limited options and support available to them, especially at night. In this regard, many saw their response as simply being a 'band-aid' for a problem better tackled by health and welfare agencies. Nevertheless, anecdotal evidence suggests that reactive policing of the problem does have some impact on limiting the extent of the problem and in reducing harm to individual users.

Proactive, preventive policing strategies were seen by police officers, and representatives of other agencies and the Indigenous community as being more effective. Most importantly, they have made a contribution to reducing the supply of volatile substances. Police officers, particularly those from special units such as JAG and Crime Prevention, are often the first point of contact for young people at risk. By building relationships – no matter how limited – with them, officers can get users involved in alternative activities and can refer them to agencies that can potentially address the broader range of problems they often face.

Despite the apparently positive impact of community policing strategies, some concern was expressed about the resourcing of them. In the past, community policing was a discrete branch of the WAPS. However, the branch was disbanded and community policing officers operate out of local stations, where it may not be viewed as a priority. Under a recent WAPS 'front-line' initiative, sworn officers are being taken from other duties to increase the number of officers 'on-the-beat'. As one officer said:

Unfortunately, community police officers are often the first to be taken from their role.

Chapter five: Policing volatile substance misuse – themes and issues

The cases studied presented in the previous chapter were designed to give readers a flavour of volatile substance misuse and the policing of it in a broad cross-section of communities – remote and urban. They also provide the opportunity to identify the similarities and differences between communities and to raise a number of key issues and lessons common across all of them. In subsequent chapters, we discuss the reactive and proactive aspects of these. However, in this chapter we consider those factors that cut across all aspects, and frame the contexts in which police are called upon to respond to volatile substance misuse. After describing the prevalence of inhalant misuse in each of the study sites, and its common association with poly-drug use, we consider issues of family, community and police responsibilities with respect to volatile substance misuse, community expectations of police, productive and unproductive aspects of policing styles with respect to volatile substance misuse, the role of Indigenous police officers, and the need for specific training.

Extent of volatile substance misuse in the study sites

For the reasons discussed in Chapter two, estimating the prevalence of volatile substance misuse is extremely difficult. At the time this study was conducted, in none of the communities we visited was data on the prevalence of volatile substance misuse systematically collected. Thus, it is necessary to rely on estimates made by people working, or living, within communities. The extent to which such estimates can be relied upon is made difficult by variations in people's definitions of 'sniffers', the fluctuating levels of volatile substance misuse within communities, and people's opportunities to observe inhalant users. Consequently, even local estimates can vary widely.

In October 2004, there were about 25 sniffers in Kintore, of whom about seven were sniffing continuously and the others periodically. Most of were aged between 10 and 15 years of ages, although some were as young as six. In the Ngaanyatjarra Lands, we were told by a long-serving officer that in the community of Warburton:

There's bouts (of petrol sniffing) here now. Sometimes (in the past) there'd be twenty or thirty kids sniffing. They all try it sometime. I think it's associated with boredom. Before, there was nothing between school and when you were eligible for CDEP (Community Development Employment Program) and footy. Now there's other things to do.

Another officer said of petrol sniffing in the Ngaanyatjarra Lands:

There aren't that many involved now. It seems to be that kids do it and they move on quite quickly. The numbers sniffing has definitely decreased over the four years I've been coming out here.

In the Anangu Pitjantjatjara Lands, the best long-term estimates of the number of sniffers come from Nganampa Health data and from the work of Roper (a long-term resident health worker). These data – which have been summarised by Shaw et al. (2004, pp.43-44) – show that in 1984 there were between 150 and 170 petrol sniffers and that subsequently there was an overall decline. There have been fluctuations in numbers and the decline has not been uniform across all communities. Nevertheless, it was estimated that in 2002 the number of sniffers was about 116.

Roper also showed that male sniffers outnumbered females by about three-to-one in the Anangu Pitjantjatjara Lands (Roper 1998, pp.46-47); and that the age profile of sniffers had risen as a consequence of fewer young people being recruited (Roper 1998, pp.41-45). When we conducted this study it was difficult to obtain accurate estimates of the numbers of sniffers in the Pitjantjatjara communities. However, two communities reported an apparent increase. In one of them, according to the school principal:

There's about forty sniffers ... Nearly all the secondary (students) are sniffing – probably casually. Its mainly recreational sniffing, and mainly at night.

In Alice Springs, a worker from CAYLUS reported that, in October 2004, there were approximately 100 'sniffers'. During 2005, the numbers had varied but there had been a maximum of about 60. The CAYLUS worker said that in August 2005 there were between 20 and 30. The general downward movement at that time was confirmed by a worker from another agency.

As elsewhere, observers in Mount Isa reported ebbs and flows in inhalant misuse, with a decline in use in recent years. At the time of our research, one community worker claimed that there were 25 to 30 full-time users and an additional 25 to 30 who used volatile substances 'off-and-on'. Another community worker estimated a similar total number of sniffers (50) but considered only 10 of them to be 'chronic' users. This latter estimate was closer to those of the police and night patrol workers.

Most inhalant users in Mount Isa were believed to be between the ages of 12 and 15, with some as young as 8 and as old as 18. Most sniffers were Indigenous, but there was also a small number of non-Indigenous sniffers. As among petrol sniffers in the Anangu Pitjantjatjara Lands, most sniffers were male. Paint was the most frequently used substance, but aerosols and deodorants were used – as is some petrol among young people from out of town. As one police officer said:

The substances are always changing, depending on what they can get.

Although one community worker in Cairns reported that there were 'a couple of hundred' (sniffers) in Cairns, there was general agreement that there were between 10 and 20 regular or 'every-day' users, with perhaps up to 40 occasional users. As in other locations, there was some evidence of fluctuation in the prevalence of volatile substance misuse, with an increase being reported in 2001, but stable levels over recent years. Most users were Indigenous and in their early teens. Most stopped using after the age of about fifteen.

In Perth, because of its size and the fact that most people only see parts of the whole picture, it was difficult to get reliable estimates of the magnitude of the problem. Nevertheless, both police officers and community workers agreed that volatile substance misuse had declined in recent years across various areas within the city. According to a youth worker, use had peaked about five years previously. A comment by an officer from the Midland area reflected those of others when he said:

We have some sniffers, but it's not a big problem. There's core group of about 10 to 15 users.

As in Mount Isa and Cairns, users in Perth were said to be mainly Indigenous – although, as one officer said, that might be because they were more visible than non-Indigenous users. Most of these users were said to be in their mid-teens. However, there were reports of younger users and one Indigenous community worker reported contact with a group of 6 to 10 users aged in their forties. Again, as in Mount Isa and Cairns, paint and aerosols were the substances most commonly used.

Poly-drug use

Given the wide-spread concern over volatile substance misuse *per se*, it is easy to lose sight of the context in which it takes place. Inhalation of volatile substances is part of a broad spectrum of substance use and misuse (particularly licit but also illicit) in which individuals may engage – often for similar reasons. Poly-drug use was an issue across the range of Indigenous communities. In Perth there were some people for whom volatile substances were the most commonly used drugs (or in some cases the drugs of choice). However, as a youth worker reported, for most of those involved in some kind of drug use:

Sniffing is the last choice. On pay weeks, speed, ganja (cannabis), alcohol; and then volatile substances to get them through to the next pay.

Poly-drug use was found even in remote communities. At Warburton, a police officer said:

... ganja has replaced petrol for some people. The older ones mostly. The younger kids seem to sniff, but they don't stick with the petrol as long.

Similarly, in the Anangu Pitjantjatjara Lands, misuse of both cannabis and alcohol was identified by police officers and community workers as being a problem.

The availability of other drugs, particularly cannabis, in remote communities means that a focus on reducing the supply of regular petrol may result in a switch to other drugs. The extent to which this switch might occur is related, among other things, to cost factors – with petrol use being partially associated, in part, with extremely low household incomes in those areas. The implication of this is that strategies to reduce the supply of volatile substances in particular should be part of a broad approach to reducing substance misuse in general.

Volatile substance misuse intervention: Whose responsibility?

When considering strategies to address volatile substance misuse, the perennial question arises as to 'who is responsible for intervening?'. This is the issue raised by the officer from Kintore when he talked about the expectation of families that he fix the problem. A small, but significant, number of – mostly junior – police officers with whom we spoke argued that responsibility for addressing volatile substance misuse *per se* should not be the concern of the police, on several grounds. Firstly, some took the view that the proper role of police was simply the apprehension of criminals. In the words of an officer from Queensland:

There needs to be some clarity over whether or not it's an offence. If it is, then it's our core business. If it's not, then it's not our business.

A second view was that volatile substance misuse was a health and/or welfare issue, and should therefore be the responsibility of health and welfare agencies. According to a third view, responsibility for addressing the problem lay with Indigenous families and/or communities. Related to this was a concern that intervention in volatile substance misuse, as a non-criminal matter, created or maintained a dependence upon the police. A fourth view was that responsibility lay with users themselves:

Unless someone wants to stop, you can't make them.

Among representatives of Indigenous community organisations and community members the same range of views was expressed – with the added view that dealing with volatile substance misuse was the responsibility of the police.

Generally, however, – across all groups, including the police – it was more commonly held that 'there is a wide, shared responsibility for addressing the problem'. Where there was disagreement, it focused upon the extent to which other groups or individuals were prepared or able to shoulder their share of the responsibility.

The responsibility of police officers

The responsibility of police officers in addressing volatile substance misuse is three-fold. First, they have a responsibility to protect the safety of the broader community and its individual members. This extends to the common law duty-of-care that officers have for the safety of individuals who are at risk of harm – including the harmful consequences of volatile substance misuse. Second, they have a responsibility to deal with offences that are indirectly, or directly, associated with volatile substance misuse. These offences may include vandalism, theft, assault, and the supply of volatile substances for the purposes of inhalation. Third, police officers have a responsibility to prevent crime – again, including crime that might be associated with, or arise from, volatile substance misuse.

Particularly in remote areas, due to absence of, or limited access to, other services the role that the police must take in addressing volatile substance misuse is expanded into areas that normally would be regarded as the responsibility of such other agencies. This is a concern for officers as it both has the potential to divert resources from other priorities and because they are often required to undertake health and welfare activities for which they are not adequately trained. As one officer put it:

The police have a lot of expectations bestowed upon them. People have got to realise we're not trained medics.

Furthermore, this creates dissatisfaction and resentment among some officers. Nevertheless, in the absence of other services, the expectation that the police will take on additional responsibilities is held by community members, government officers and, in some instances, by senior police officers themselves. It is, after all, the case that all professionals (nurses being a notable example) take on a wider range of responsibilities in the remote area context, precisely because of the limited range of service providers.

Responsibility and dependence

While accepting that police are often expected to become involved beyond their 'core business' of enforcing the law, the issue often arises of the 'extent to which they should become involved'. Some officers interviewed expressed frustration at *families, passivity and dependence*. They felt that families thought it a police responsibility to respond to users – not theirs. These officers were concerned that the more responsibility they took for responding to volatile substance misuse, the less responsibility would be taken by the families of users. Accordingly, the response of some of these officers is to intervene only when there is a risk of harm to a user or another member of the general public. As one officer put it:

I only do the minimum and intervene when it looks as though there'll be an injury.

Such a response stands in sharp contrast to that of other officers – sometimes working in the same communities – who become heavily involved in trying to help individual users.

Ideally, in any given setting, the nature and extent of police involvement in family and community problems should be a matter for negotiation between police and other agencies and groups. When there is an agreed framework for responding to volatile substance misuse within a community, officers can remind families that they too have responsibilities. Strategies for police involvement in formulating community responses to sniffing are discussed more fully in Chapter 6.

Parental supply or 'condoning'

Some of those we interviewed alleged that – in both remote and urban communities – some parents, or other responsible family members, either supplied young people with volatile substances or condoned the use of them. In Perth an employee of a drug intervention service claimed that *if the kids can't get the solvents, then the parents get it for them*, while a police constable claimed to have seen a *grandparent in the park, looking after the grandkids as they were all sniffing*. Similarly, in the Anangu Pitjantjatjara Lands, it was alleged that, in one community at least, parents ignored petrol sniffing by their children.

According to a family worker in Perth, families justified supplying youths by claiming:

At least we know where they are and what they're using.

In some cases, what might look like families condoning use is a product of despair. As a member of a Pitjantjatjara community said:

A lot of families have given up.

Apart from the issue of the involvement of 'responsible' family members, there are questions that arise about the supply of substances by other persons from a community or the local area. However, although such instances occur, the supply of volatile substances to users is not condoned by the vast majority of Indigenous people. This is evidenced by the responsibility and action they have taken at the community level to address the problem.

Community action

In his testimony at the inquest into the petrol sniffing related deaths of three young men in Central Australia, d'Abbs made the point that both Australian and state/territory governments had taken the position that petrol sniffing:

... is really a community problem and the community has to take ownership (Northern Territory of Australia Coroner's Court 2005, p.28).

This view is reflected not only in statements emanating from police officers and representatives of other government agencies but, also in some statements from representatives of non-government agencies. Indeed, so strong has been the mantra of 'community responsibility' that, at times, a casual observer might get the impression that communities have taken no action. However, nothing could be further from the truth. Communities have taken action to varying degrees, but the extent of such action is contingent on a number of factors, including the prevalence of volatile substance misuse in communities, the relative strength of community organisations (in part a reflection of the state of the community itself), the support given by other agencies and the resources and trained personnel available.

As we showed in the previous chapter, several communities in which this study was conducted have initiated attempts to prevent volatile substance misuse. In both the Anangu Pitjantjatjara and the Ngaanyatjarra Lands, community organisations have introduced by-laws which make petrol sniffing and the sale of petrol for purposes of inhalation illegal. There appears to be continuing community support for these by-laws – more so in the Ngaanyatjarra Lands where they have been quite effective and less so in the Anangu Pitjantjatjara Lands where their implementation seems to have been not as successful. However, alone they are not the answer. The by-laws need to be supported by an appropriate range of options to deal with those who infringe against them and they need to be part of a comprehensive approach to addressing substance misuse.

Another major community-based preventive initiative has been to prohibit the sale of regular petrol and allow only the sale of aviation fuel (avgas or COMGAS) or, more recently, Opal. At the time this report was prepared, over 35 remote communities were using Opal – many of them in the Anangu Pitjantjatjara and Ngaanyatjarra Lands and in the Northern Territory. The use of avgas is one of the few interventions that have been evaluated and its use was found by Shaw et al. (2004) to be effective in reducing the prevalence of petrol sniffing. However, it is most effective where other sources of sniffable petrol are closed off. The fact that Opal has not been made available over large contiguous areas is likely to limit its effectiveness.

In both Mount Isa and Cairns, community-based groups – comprised of representatives of government agencies (including the police) and Indigenous and non-Indigenous community organisations – have been formed to develop comprehensive strategies to specifically address volatile substance misuse. In Alice Springs, CAYLUS was established to provide a holistic response to the needs of young people who are involved in volatile substance misuse or who are otherwise at risk. Another example of an intervention aimed specifically at petrol sniffing is that of the 'work program' initiated for petrol sniffers by the community at Kiwirrkura. As indicated in the case study, this is reported to have had a significant effect in reducing the prevalence of volatile substance misuse there.

In addition, a variety of more broadly targeted, community initiated, interventions has been developed to address the needs of young people and their families. These include recreational activities and programs such as that developed by the Armadale Aboriginal Family Support Service in suburban Perth. The scope of these interventions varies considerably and few have been formally evaluated. Nevertheless, they clearly indicate community commitments to addressing volatile substance misuse.

Community responses to volatile substance misuse incidents

While some Indigenous communities have demonstrated a willingness to take action to address volatile substance misuse, there is one area in which they have been reluctant to do so. That is, in acute episodes in which users are either actively using volatile substances and/or are intoxicated. This reluctance stems from a number of factors including fear of violence, culturally-based views about respecting the autonomy of individuals, fear of escalating incidents of sniffing alone, or minor problems associated with it, into situations in which they have no control or support; and the fact that users are often members of families or communities in which substance misuse and family breakdown are endemic and in which they have no ability and/or desire to intervene. Furthermore, generally, community members believe that it is one of the roles of the police to ensure community safety and, thus, that their intervention is required. A senior man from Warburton said:

We all got to help. But some kids are too hard for us. One boy – he's sniffing a lot. They're telling us that it's a community thing – but we can't do it.

As a consequence of these factors, most community intervention has taken place in the area of prevention and of removing sniffers from the sniffing environment, rather than intervention in particular sniffing incidents.

Community attitudes to police intervention

As the case studies show, people from remote communities do want a police presence there; and people from all of the sites in which this study was conducted welcomed police involvement in strategies to reduce volatile substance misuse. They also held strong, though varied, views about

the roles they wanted the police to play in dealing with particular incidents. This was especially the case in remote areas, where communities are relatively small and in which volatile substance misuse often has a quite immediate effect on community members and community life.

In these remote communities – and in at least one Alice Springs town camp – people indicated that they wanted the police to actively patrol and intervene when they encountered people inhaling petrol or other volatile substances. Again in these communities – but also in Cairns – the view was commonly expressed that the police should respond to calls by community members to intervene in volatile substance misuse incidents; and both community members and police cited numerous incidents in which community members had made such calls. As indicated previously, however, this was an area in which there was reluctance (if not refusal) of some officers to act – seeing intervention in such incidents as being the responsibility of parents or other community members.

The most common views on what the police should do when they encountered users were that they should confiscate the substance, tell them to stop sniffing, and either 'send them home' or remove them from public places (such as around community facilities) or private homes where they were not wanted. Beyond that, there was less agreement. Even within the same communities, for example in the Anangu Pitjantjatjara Lands, there were conflicting views on whether sniffers should be 'locked-up' for their own safety, charged, temporarily removed from the communities, and/or charged and imprisoned for sniffing-related offences. Such conflicting views and the pressure emanating from them can often make policing difficult. In such places, senior officers need to engage community members with the aim of developing and articulating consistent strategies that are clear to the community, and have some level of support. Where consensus is not possible, police need to make sure that all sections of the community understand the strategy used by the police, even if they do not agree with it.

While there was a heavy emphasis on addressing particular incidents of volatile substance misuse, community desire for police intervention also extended to preventive activities. A community worker from Mount Isa stated:

The police have taken on a community development, preventative role, which is what the volatile substance misuse group supports ...

Similarly, in the Anangu Pitjantjatjara Lands, at Warburton and at Kintore, community members expressed support for policing the supply of petrol and for police involvement in youth activities such as Blue Light Discos and sporting events.

Police support for community action

As well as a wish for a police response to particular incidents and their participation in preventive activities, there was also a more general desire among community residents that the police support and enforce community-based decisions aimed at reducing volatile substance misuse. Such decisions most commonly include action in response to 'call-outs' by community members. However, people also wanted the police to be active in supporting the eviction and transportation of sniffers who were visiting communities from elsewhere, or of resident sniffers whom community members have decided to banish. Thus, even the leader who said his community was best able to deal with petrol sniffing provided us with an example (which he viewed positively) of police support for a community decision to prohibit a sniffer, who had abused the store-keeper, from entering the community store. However, while people have such expectations, officers need to make clear to them that they cannot act unless there is a legal basis for doing so.

In Alice Springs, some householders in town camps have taken out trespass orders to keep people away from specified houses or areas. A community worker reported that, when called to enforce these orders, the police *always respond*. She felt that such action was important in supporting families not to *tolerate crap*. She said it gives people some degree of power over bad behaviour and has been effective in keeping a particular group of young men from disrupting the community in which she works.

Other community-based workers also provided examples which highlight the way in which police support provides encouragement to community members to take further action themselves. In remote communities, the presence and support of police officers can have an effect beyond their specific roles. The Kiwirrkura case study, for example, suggests that a police presence gave community members the support needed to pursue their work program for petrol sniffers. Conversely, it was suggested to us that the absence of a permanent police presence in the Anangu Pitjantjatjara Lands – and the support that can provide – had weakened the resolve of community members to take action against petrol sniffers.

Community-police relations, police authority and policing style

Effective policing of volatile substance misuse is particularly dependent upon positive relationships between police officers and members of the Indigenous communities in which they work. A key element of this is the support of community members, and recognition by them of the authority of the police to intervene – rather than the power to do so. Power is the ability of an individual or group to govern or use force (physical, economic, political), or its threat, to compel others to act in certain ways. Authority is the exercise of power that is recognised as legitimate by those who are subject to it. In the context of volatile substance misuse in Indigenous communities, the 'authority' of police officers to act is dependent upon the broad support of the communities in which they exercise their power.

Importantly, power and authority are not binary opposites. Rather, there may be a range of contexts in which some exercises of police power are regarded as legitimate by community members and others where they are not. Furthermore, legitimisation of police authority is under continual negotiation – whether this is obvious to officers on the ground or not. There are also contexts in which community members and police officers are seen as having different fields of authority. Thus for example in more traditionally oriented Aboriginal communities older people are seen as having limited authority over the behaviour of children. However, police officers as outside authority figures are, and can thus more legitimately intervene to stop them from inhaling petrol or other volatile substances.

Positive elements of policing style

The authority of police officers working in Indigenous communities is enhanced by positive policing styles across all interactions with both members of the communities in which they work and with volatile substance users themselves. Many of those we interviewed made positive comments on – and we made positive observations of – various aspects of this. These comments related to both the attitudes and behaviours of particular individual officers and general policing procedures.

Some of the officers we interviewed, or whom others told us about, obviously had a gift for, and commitment to, working with young people. Where these officers were given flexibility, they developed excellent rapport with people and were able to make a constructive contribution to the communities in which they were stationed. At Kintore, several community members made positive comments on the role played by an officer stationed there and one commented:

Libby comes every Tuesday and takes the sniffers out bush – takes the family as well. She asks them, 'What will help you stop sniffing'. Girls stop sniffing when they see her. One girl stopped so she could play sport with her ... She shows that she cares about them – she's not just telling them what to do.

Similarly, a community member in Mount Isa said:

It's important that the community group should be able to liaise with the police – regardless of the position of the person involved. What's needed is police with a certain attitude. This is why Donna and John are good. We need police who are non-judgemental, who are able to build relationships with people. They mustn't think that they're above anyone else. They must be approachable. With Donna and John, you don't even realise they're wearing a uniform. They don't think they've got the answers: no one does.

Across all of the sites we visited, both community workers and (less frequently) police officers emphasised the need to get to know volatile substance users, and to treat them with respect. A youth worker said:

You need to get to know them – develop a friendship – so that when they're high they'll still respect you.

A senior sergeant from one of the Perth police districts said:

You have to remember that they aren't really doing anything wrong (i.e. illegal), and you need to afford them some dignity.

Police officers from various jurisdictions cited several reasons for such an approach. These included gaining the respect of the wider Aboriginal community and of the users themselves. In turn – reflecting the comment of the youth worker cited above – knowing and having the respect of users meant the latter were less likely to be abusive or violent when they were encountered in an intoxicated state and more likely to stop sniffing when asked to do so. Of course this is not always the case. A strong police advocate of this approach said of the users:

They love us and they hate us ... (but) relatedness helps.

Establishing good relations was also seen to have consequences for proactive, preventive policing. We were told that, by getting to know users, police were aware of where they were likely to hang out and what they might get up to. The effects can also be more indirect – as an officer from Perth said:

If you give them time and listen to them, they see you as a stable force in their lives.

Other important elements in the development of positive relationships between the police, volatile substance users, and other community members are a relatively permanent and stable police presence in communities. This is illustrated by comparison of the Ngaanyatjarra and Anangu Pitjantjatjara communities we visited. In the Ngaanyatjarra Lands there has been a relatively stable police presence – with one officer having served there for four and another for nine years – and they have become known to both petrol sniffers and the wider community. There, since the mid-1970s, community-police relations have been generally positive and petrol sniffing has been reasonably well controlled.

This is in marked contrast to the Anangu Pitjantjatjara Lands. It has proven difficult to fill police vacancies in the north of South Australia and officers have been flown from Adelaide on four week rosters to conduct patrols into the Lands. Thus there is little or no opportunity for the officers on patrol to establish relationships with either community members or users. Under these circumstances there has been a troubled history between the police and members of some communities. This has ranged from relatively minor incidents such as the stoning of police vehicles through to more serious incidents such as threats to the physical safety of police officers and to 'riots'; and petrol sniffing is poorly controlled.

Not only has the stable presence of police in the Ngaanyatjarra Lands facilitated the relatively good relations with the communities, but it has enabled officers to gain considerable experience in dealing with petrol sniffing and associated problems. Such stability and experience was also seen as important by police officers and community workers in urban areas – not only among officers on the beat but among more senior officers who supervised them. A community worker summed up the attitudes of members of both groups when he said:

The senior officers need to be there a while for things to work. The rank-and-file officers need to know what is happening.

Another factor that enhances the legitimacy of the police authority is consistency in the response to volatile substance misuse. Where the response is inconsistent, the exercise of police power is viewed as arbitrary and can undermine respect for officers and their authority. Again, as discussed later, comparison of police practices in the Ngaanyatjarra and Anangu Pitjantjatjara Lands in this regard is instructive, but officers and community workers and members from elsewhere also stressed the importance of consistency of response.

Undermining community respect and police authority

Just as there are positive elements of policing style that can enhance relationships with communities and legitimate police authority, there are negative elements of policing style that can undermine respect for officers and their authority. These were highlighted by both police officers and community members. They include limited communication with communities and other agencies, failure to observe local community etiquette, overtly negative attitudes to users and their behaviour, and what was several times referred to as 'heavy-handed policing'. These negative aspects of policing style can lead to less than optimal resolution of particular volatile substance misuse incidents, but can also inhibit the development and effectiveness of proactive policing strategies.

An example of a recent failure to observe local etiquette caused considerable consternation in a community that has otherwise enjoyed a positive relationship with the police, and was raised by several people we interviewed. In this remote community, where family residential areas are often less obviously marked than in urban areas, an officer was pursuing a person and chased him through the dwelling of a community member. This caused great concern. A senior community leader said:

Police should have respect. They walk into peoples' houses. I wouldn't do that to them. ... They treat this place like they own it!

Another community member said:

Police should stay long way from house. If someone in there that they want, they should get someone to go in and call him.

It is not possible to set out a list of rules of etiquette that apply in all communities at all times. An understanding of much local etiquette only comes with time and close contact. However, if they are not to undermine respect for themselves and their colleagues, officers need to behave cautiously and with restraint in their social interactions.

As indicated previously, some officers do not regard dealing with volatile substance users as a proper police role. A senior sergeant said:

Crime prevention is often viewed as the warm and fuzzies, not real police work.

A view echoed by an ex-sergeant who said that officers were:

... pretty upset about having to spend time baby-sitting these kids (volatile substance users).

In a similar vein, a community worker reported that:

It's (dealing volatile substance users) such a menial job for them (police) to be dealing with. They don't like it.

Such attitudes are not conducive to effective policing of volatile substance misuse. Several of those we interviewed – both police and community workers – emphasised the need for better education and training of officers in this aspect of police work, on the premise that police attitudes and approaches to dealing with volatile substance misuse were more likely to be positive if officers had a broader understanding of the problem and could empathise with Indigenous perspectives on it.

There was wide-spread agreement that a 'heavy-handed' approach to dealing with volatile substance users was not effective and could be counter-productive. Again this point – and some allegations of police harassment of users – was made most often by community workers and members. However, several police officers also gave strong reasons for not taking such an approach.

Most, but not all, complaints about 'heavy-handed policing' were made against junior officers. The most common reasons given for such behaviour were lack of experience and negative attitudes to volatile substance misuse and Indigenous people. As community workers from Amata and Mount Isa said:

The police we get are changing all the time anyway. They hardly ever seem to come up twice. A lot of them are very young and tend to overreact.

... the police straight out of cadetship think they are tough, they don't listen. It's a power thing being a copper. Instead of working with us they're working against us.

In a similar vein, a senior sergeant from Perth said:

You need to be firm but fair. Some coppers are a bit intolerant and get a bit impatient with them (sniffers).

Whatever the reason for it, however, there was agreement that such an approach was likely to lead to an unproductive escalation of encounters with users.

Among senior and more experienced officers there was agreement that 'rough stuff doesn't work'. An inspector from South Australia said:

For new police I say 'Your batons, guns and spray will get you into trouble. Use your brains and your mouth'.

Mentoring of junior officers by more senior or experienced officers was seen as one way of addressing this problem, by both community workers and police officers. One officer stated:

I'll always put a junior officer with a more senior officer so they may gain the knowledge that the senior officer has.

Indigenous 'policing'

In each of the state or territory jurisdictions in which we conducted fieldwork, the police services employ Indigenous people to work in their own communities as Aboriginal Police Liaison Officers (WA), Community Constables (SA), Aboriginal Community Police Officers (NT) or Police Liaison Officers (QLD). Individuals employed in these positions are often called upon to address volatile substance misuse. However, there is considerable variation in the roles they play (even within communities), the expectations placed upon them, and views of their effectiveness.

In Cairns one Aboriginal Police Liaison Officer had developed rapport with several individuals, and offered them information about their options.

A parent rang up about her daughter sniffing paint and staying out late. Couple of nights later, I went round there and met her daughters. Talked to them about sniffing. Explained that they could go to a safe house. Said 'If you're high you can go there'.

There's no way you can stop them – give them options, and they'll stop when they're ready. I took them to the safe house and they had a look round. They were happy about it. I think their mum felt better, too. At least she knew they had somewhere safe to go.

A couple of kids have stopped. They're back with their family and changing friends. If those kids have dramas they know they can come and see me. I don't take them away from their family though. They'd be offended if I did.

In Perth officers spoke positively of the work of Aboriginal Police Liaison Officers (APLOS) – particularly in regard to both community policing and dealing with specific incidents. We were told by a senior constable that:

The APLOS that we have out here are very good at dealing with these situations and some times their inside knowledge of the family can greatly help.

This view was echoed by a community worker who said:

I think the APLOS are a good idea. They visit the families. Particularly, the ones based with JAG go out and make home visits.

While there were generally positive views of the roles played by liaison officers in Cairns and Perth, views on their effectiveness were polarised in Mount Isa. On the one hand police officers spoke positively about their roles in increasing understanding of Indigenous issues within the police service and in community policing. However, representatives of both Indigenous and non-Indigenous community organisations had a negative view of them – at least in a reactive role, claiming that they had *no credibility* or were *gammon cops*.

In the Anangu Pitjantjatjara lands Community Constables find themselves in a difficult position in responding to petrol sniffing. Within their communities, they face conflicting pressures. On the one hand some people expect that they will deal with the problem. On the other – because of kinship connections and obligations – they are often pressured not to intervene. Speaking of this one Community Constable said:

This job is really hard. We're all family here. We've got to respect the elders and that. I'm right here all the time. It's really hard.

Added to this, their own experience suggests that there is little they can do when the problem is so entrenched. One long serving Community Constable commented:

Sniffing is no good – but we can't stop them.

These problems also mean that the police service has difficulty in recruiting and retaining Community Constables – a difficulty exacerbated by the fact that the employment of some has had to be terminated for unsatisfactory performance of their duties.

Nevertheless, despite such pressures, a senior officer from the South Australian Police emphasised the important role that the Community Constables play. This included liaising between the police and community members, providing mutual support to officers on the ground, and supporting communities including the transportation of petrol sniffers from large communities to 'home-land' communities. The experience of both Community Constables and police officers suggests that it is unrealistic to expect the Community Constables to deal with incidents of intoxication unaided. Rather they are more effective when they are supported by police officers, when they provide support and advice to officers, and when employed in a broader liaison role. A senior officer said:

The biggest advice I give to new staff is to be guided by the Community Constables. Ask them, and follow the process they set out. If they say 'don't' – you don't.

When the police are there (in the communities) and support the Community Constables they're effective. Not all the police that come up here know the families – so they need the Community Constables.

Given the experience of Community Constables in the Anangu Pitjantjatjara Lands and the conflicting views of the effectiveness of Police Liaison Officers in Mount Isa (and to a lesser extent in other locations), we believe that the use of such officers should not be a major component of the police response to acute incidents of volatile substance misuse. Rather, they can be employed more fruitfully in building community-police relations and in proactive responses to the problem.

Training

The issue of police training was raised directly by many of those we interviewed. Officers at various levels said that they, or those they were responsible for supervising, had insufficient training to deal with volatile substance misuse. An officer working in the Anangu Pitjantjatjara Lands said:

We've had no training. Its all self-taught and self learned ... Some training would be useful.

The fact that most of the 'training' they had received was 'on-the-job' or self taught was also reflected in comments by several officers working in Western Australia.

A number of important training needs were identified. These included areas specific to volatile substance misuse, such as the effects of volatile substances, the assessment of users and their needs, 'dos and don'ts' when dealing with intoxicated users, and clarification of police powers under various pieces of legislation. They also included more general areas such as the background to the problem and working with young people and Indigenous communities.

It should not be inferred from these comments that various police services are not actively involved in the provision of training for their officers. Some or all of these issues are touched upon in police academy training in all jurisdictions in which the study was conducted. However, as one officer told us, because of the demands of the curriculum, the time that could be allocated to specific training sessions was limited and as a consequence the teaching was 'straight down the line' – that is, confined to the minimum. This was echoed by a police training officer who said:

When leaving the academy the police have so much to remember and it's impossible for them to remember everything they've learnt: but dealing with drug use (including volatile substance misuse) is a priority area.

We were told that in South Australia, before going to work in the Anangu Pitjantjatjara Lands, officers were given an induction program. However, this did not include training 'specific to sniffing'.

In Western Australia, at the time we were conducting this research, it was announced that the Police Service was introducing an eleven week course for officers who were to take up new positions in remote communities that were created as part of the Service's response to the *Inquiry into Response by Government Agencies to Complaints of Family Violence and Child Abuse in Aboriginal Communities* (Gordon et al. 2002). While this is an important initiative and is to be commended, it does not, itself, address the need for additional training on volatile substance misuse for officers who are already working in remote locations or the needs of those working in urban areas. This has been recognised by a Police Service Training Coordinator who informed us that she was in the process of developing a training package around the *Protective Custody Act* and volatile substance misuse. In addition to these initiatives, some less formal training has taken place – with an officer from the Ngaanyatjarra Lands reporting that he had attended a half-day workshop on volatile substance misuse at the Laverton Hospital.

In Queensland, the Police Service has introduced special training on volatile substance misuse which includes a mandatory one-day course and a self-guided web course – completion of which results in the provision of points towards promotion. Speaking of this, a commissioned officer said:

Police do get training in volatile substance misuse. They're taught what to look for – warning signs. But they don't have the training in a medical background. There's a compulsory computer based training program and training sessions that all have to attend. So there should be no one in the police force not aware of volatile substance and the warning signs of people affected by volatile substance misuse. This was additional training, added after the new legislation was introduced. But in reality, it takes actual first hand experience to know how to make use of that training.

Clearly there are training initiatives underway although they are varied in content and accessibility to officers. The Western Australian approach for the training of new remote area officers is quite comprehensive, but its intensiveness would appear to restrict wider applicability. In this regard, we believe that the Queensland approach has much to recommend it – particularly as it recognises the needs of officers in urban, as well as, remote situations. Like initiatives elsewhere, the in-service approach to training appears to be the most appropriate. In this regard, it was suggested by both police officers and the representatives of government agencies in the Northern Territory, that there was much to be gained by conducting joint in-service training.

Summary

In this chapter, we have canvassed the broad contextual issues of policing volatile substance misuse. The issues include the need to recognise that policing is a necessary, but not sufficient, element in addressing the problem and that there is a shared responsibility for it. This responsibility has been acknowledged to varying degrees by Indigenous communities and is reflected in a range of community intervention initiatives – largely in the area of prevention. Importantly, there is a reluctance among Indigenous community members to address incidents of intoxication – which they see primarily as a police role. We found general support across communities for police intervention in this area, but also for their involvement in various proactive strategies.

Good relationships with Indigenous community members are an essential element in effective policing. Such relationships are constantly under review – whether explicitly or implicitly – and we identified elements of policing style which can either enhance or undermine the authority of officers. Indigenous police staff – such as Aboriginal Police Liaison Officers and Community Constables – can play an important mediating role between police officers and communities and can enhance relationships between them, and hence the effectiveness of policing activities. However, given competing pressures on them – particularly in remote communities – with regard to the policing of particular sniffing incidents, they are more appropriately employed in support of sworn officers, rather than instead of them.

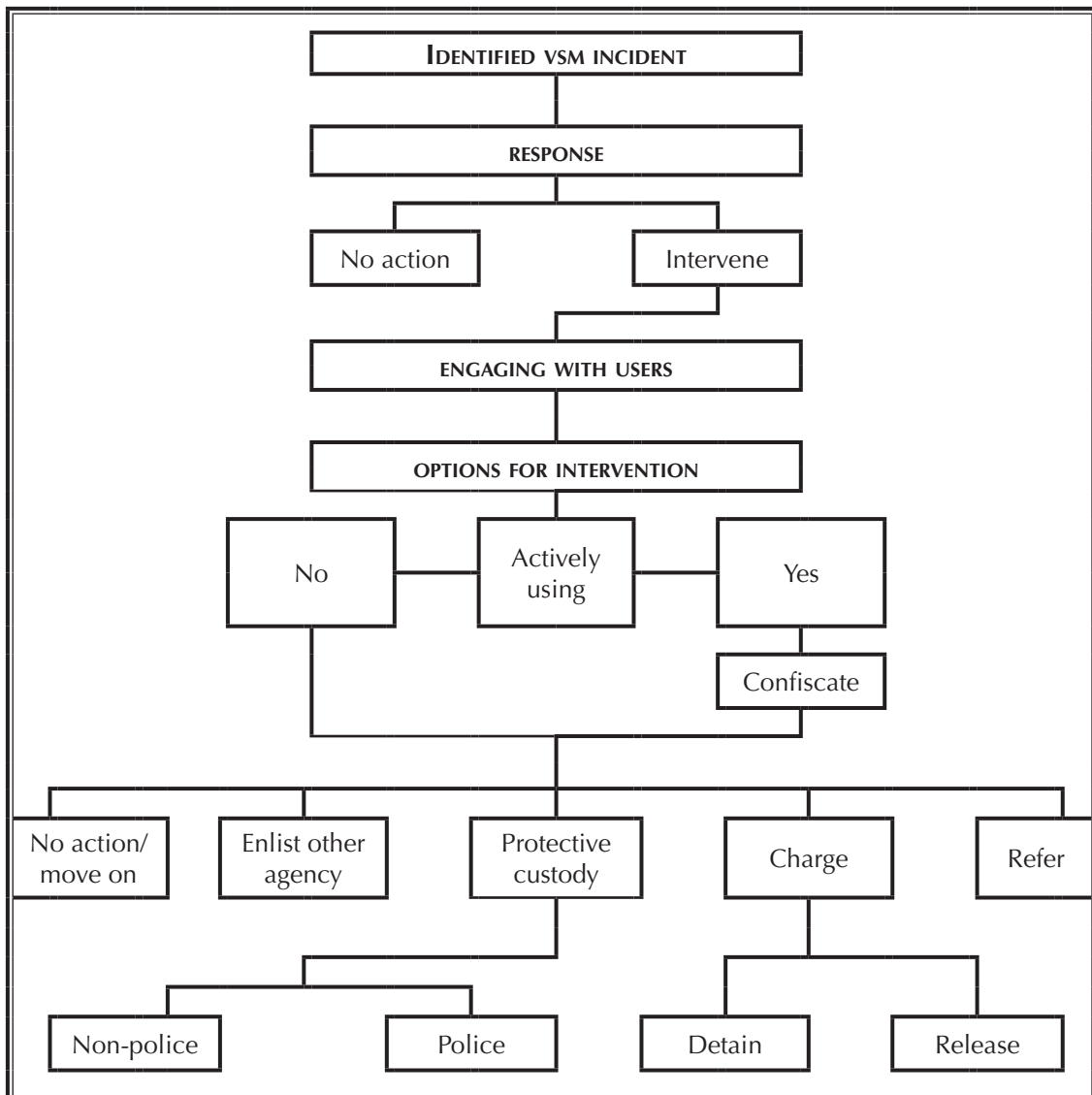
Adequacy of training is an issue that impinges on all aspects of policing activity. However, we found that many officers 'on-the-ground' – from remote to urban areas – felt that the training they had received with regard to volatile substances misuse was inadequate. This has been recognised to varying degrees across jurisdictions and, in addition to that received in police academies, there are several training initiatives underway. It appears that in-service training is the most effective means of providing this and that the model used in Queensland could be usefully considered for use – with appropriate modification – in other jurisdictions.

The issues we have covered in this chapter apply to policing activities across-the-board. In the next chapter, we focus specifically with the policing of particular incidents of volatile substance intoxication.

Chapter six: Reactive policing – responding to intoxication

In this chapter, we examine the response of police officers to particular incidents of volatile substance misuse – including the constraints and supports that are in place to assist in their role. Figure 3 provides a schematic overview of the processes involved.

Figure 3: Responding to intoxication



Identifying and responding to incidents

There are three general ways in which volatile substance misuse incidents come to the attention of police officers. The first of these is encountering users while on routine patrols or while attending to other jobs. For example, a long serving officer from Warburton reported the following incident:

We saw a guy who was sniffing while attending another job. We chased him and got him in his back yard. Took hold of the bloke, tipped out the petrol and took him to the lock up to sober up.

The second way in which incidents come to the attention of officers is when they are called out to address other problems but find that the offenders are intoxicated. An officer from Perth described such an encounter:

There were two Aboriginal youths at a bus stop in Kingsley. You could tell they were intoxicated. They were incoherent. We were called out because locals were suspicious of them because they were Aboriginals and there aren't many Aboriginal people in that suburb. So I guessed people were starting to wonder what they were doing there – you know with 'break-and-enters'. You could tell they'd been using. Sitting on the ground and leaning on the fence, a bit out of it.

The third way in which incidents come to the attention police is when they are called out to deal specifically with incidents that are directly related to volatile substance misuse – as in the example described in the case study from Kintore. An officer from Warburton provided another example of such an encounter:

Last Thursday we got a complaint from the (community) warden and from ... (the local Justice of the Peace) that some kids were sniffing at a particular house. We went and tipped out the petrol and brought the kids up to the police station under 'Children needing care and protection' – Child Welfare Act 38b.

While it is not strictly speaking identification of a volatile substance misuse incident, people who have been using sometimes present themselves to officers for assistance. Examples of this were provided from both Mount Isa and Perth. A sergeant from Perth said:

We'll always take those kids who self-present. This in turn makes the best of a situation which can become out of hand.

The levels of priority for responding to identified incidents of volatile substance misuse may be assigned by officers on patrol or by an officer based at a police station and can range from a decision to take no action to high priority. Decisions about whether or not to intervene, and the extent of intervention depend upon a number of factors. These vary in importance and include:

- the legislative and administrative framework within which officers must work (has an offence been committed under state/territory law or local by-laws?);
- threats to the safety of members of the public, or to property;
- potential threats to the safety of officers;
- the geographical setting (remote, rural, urban), including the distance officers must travel to reach the location at which an incident has been reported;
- the ranking of the seriousness of the incident in relation to other policing priorities;
- options for intervention;
- the source of a call-out (if there was one);
- local police culture – including attitudes about where the responsibility for dealing with volatile substance misuse lies;
- perception of community expectations; and
- the perceived consequences of intervention.

Describing the prioritisation of incidents an officer working in the Ngaanyatjarra Lands said:

... at ... (a remote community) about a month ago. Someone had brought some petrol in and sold it. Five or six kids kept sniffing it intensively. The community adviser faxed us an incident report. We prioritise incident reports; and pure sniffing doesn't rate very highly. It's a six hour drive to ... (that community), so we don't do it just for that. We prioritise violence generally.

Such prioritisation is closely linked to the availability of resources. One officer from the Anangu Pitjantjatjara Lands said they simply did not have the resources to deal with all incidents of petrol sniffing, and another said:

In real terms sniffing gets ignored. Other offences have priority.

Engaging with users

In some cases – for example when called out to deal with sniffing incidents – officers know in advance that those with whom they will be dealing have been inhaling volatile substances. In others, however, they have no way of knowing whether individuals have been using other substances or not. In such cases officers make a quick, informal assessment – for their own safety and for that of the users – which is part of a broader assessment of the situation which they are about to enter. They use a combination of visual, auditory and olfactory cues to make such an assessment – none of which alone are diagnostic, but together provide strong grounds for suspicion that a person has been 'sniffing'.

Depending on the substance, these clues include: carrying cans (sometimes slung around the neck) containing or likely to contain petrol, or rags that might be soaked in petrol; soft drink bottles or cans filled with paint or other substances; and sometimes attempts to conceal such containers under clothing. Other visual clues include unsteady gait and diminished coordination and paint on a person's body or clothing. A constable from Perth said:

You will sometimes notice paint or chrome around their mouth and they are often walking around in a daze.

Often, a person's speech is slurred, they are sometimes argumentative, and importantly they smell of petrol or other volatile hydrocarbons. According to a sergeant from Perth:

You can usually tell if they have been sniffing as opposed to other stuff like alcohol. They have some symptoms the same as alcohol. They have slurred voice, shaky demeanour, an increase in violence. But the one that lets you know it's a volatile substance is the smell.

Among other things, the effects of volatile substance on users depend on the amounts inhaled, users' learned or expected responses to the substances, their previous mood states, and their present situation. As a consequence of inhalation, to a greater or lesser degree, they may be dazed, irrational, and may not fully comprehend what is said to them or what is happening to them. Similarly, user perceptions of police officers are also varied. They usually see the police as 'ruining their fun', a nuisance or (especially if the officers do not have some kind of personal relationship with them) as threatening. Thus, their responses to encounters with police officers are also varied and are often unpredictable.

Users often run on the approach of officers and/or try to hide the substances they have been using – either in their clothing or in some handy location from which the substances can be retrieved at a later time. If they are apprehended, users' responses can range from passivity, through verbally loud and/or rude behaviour, to threats, to actual physical violence. Violent behaviour

among volatile substance users was a frequently reported problem in all jurisdictions in which the study was conducted, with officers reporting having been assaulted with fists and weapons such as sticks. However, violence is not an invariant accompaniment of volatile substance misuse. Several people we interviewed also commented on the passive nature of users and an Aboriginal community worker in Perth said:

Sometimes when they are out to it they can be docile. They're vulnerable ...

When encountering users, the objectives of intervention by officers in particular incidents vary according to the nature of the situation, but they include: ensuring the safety of users and other members of the public; the protection of property; and dealing with an offence (where one has been committed). Bearing these objectives and the unpredictable behaviour of users in mind, officers (and others) we interviewed highlighted a number of inter-related, key principles that should guide any intervention by the police. These include:

- careful assessment and monitoring of any encounter or incident, including monitoring their own behaviour;
- putting first their own safety and that of their colleagues, users and members of the general public;
- treating users with empathy and respect;
- keeping them calm;
- maintaining effective communication;
- formulating a clear plan of action; and
- maintaining control and not acting in a manner that might exacerbate any incident.

Experienced officers emphasised the importance of careful assessment before intervening in any situation. Such assessment should include ascertaining the number of users, whether they are intoxicated and on what substance or substances (given what we said about poly-drug use, Chapter five, p.54), whether users are in need of medical or other attention, and whether there are community members or others who might be called upon to provide assistance in communicating or handling users should the need arise. As one officer said:

When you come across a person, police need to use their experience to assess the situation and look for evidence ... You shouldn't assume anything.

This latter comment is particularly important, as some individuals encountered might be suffering from mental illness – the symptoms of which can mimic those of intoxication. While it should not be expected that officers are able to diagnose mental illness, as a possibility this should be considered – especially when there is no evidence of an intoxicant on or about the person.

Flowing from the initial assessment of the situation is the need for officers to ensure their own safety. Given the unpredictability of the behaviour of intoxicated individuals and the potential for violence, this involves approaching users slowly and with caution, ascertaining whether or not they are in possession of anything that might be used as a weapon and whether the officers are able to deal with a situation should it get out of hand. Officers also need to ensure the safety of those they have encountered. This includes the common law duty-of-care that they have to minors and intoxicated persons. To meet this obligation, as discussed above, officers need to carefully assess and monitor the behaviour and condition of users, or suspected users, and to respond accordingly. Summarising several aspect of this, a senior constable from Perth said:

When dealing with a person who's affected by a volatile substance or who's clearly affected by something, I'd recommend that the attending officer would try to establish if they're under the influence. If so, what they've been using. And then to check if they're hurt in any way. From there, if the person's injured then they'd be taken to hospital if possible, or an ambulance would be called to attend. Then, if not as severe as that, the normal situation of duty-of-care would be the main issue to be looked at.

As indicated previously, a common response of users is to take flight on the approach of officers. However, one of the effects of volatile substances on the body is to elevate the heart rate and, under such circumstances, the additional physical exertion involved in fleeing can result in cardiac arrest. Although one officer reported having pursued a fleeing substance user, a significant number of those officers we interviewed indicated that it was not appropriate to do so, and that they had been advised of this as part of their training or had been instructed not to do so. A typical comment was:

Sniffers will usually run, but you shouldn't chase them because they might have a heart attack or stroke.

While most of the officers to whom we spoke were aware that it was not appropriate to pursue intoxicated users, in four of the locations we visited, community workers or members complained that they had witnessed police officers doing just that. However, it is important to note here that where officers are dealing with those who have come to their attention as a result of committing an offence that is not clearly related to volatile substance use, the officers will often not know whether they have been using. As an officer from the Northern Territory said:

You can't tell if they're intoxicated until you're close to them. You can't tell whether to chase or not.

In addition, officers who had worked in two desert communities reported that they had sometimes been under pressure from community members to pursue petrol sniffers and there was an implication in interviews with members from other communities that officers were not doing their duty by not more actively dealing with users. This highlights the conflicting pressures that officers sometimes face and it suggests that it is not only police officers who need to be educated and reminded about not chasing individuals who are intoxicated by volatile substances.

It is important to remember that the outcome of any intervention is the result of the 'interaction' between users and the police, and that the behaviour of 'both' affects the outcome. This means that, as well as monitoring the behaviour of users, officers need to be aware of the attitudes they bring to the situation. No one expects that officers should approve of what users are doing. However, they need to understand why users are doing what they are doing – they need to focus on the person, not on the negative behaviour. Highlighting this, a commissioned officer from Perth said:

Sympathy and empathy are both needed, as you haven't had the same background as these kids. Be aware of their life being different than yours.

Similarly an Aboriginal Police Liaison Officer said:

You got to remember what's happened in the past (why they are sniffing and their possible previous experiences with the police). You need to be sympathetic ... You need to realise they're doing it for a reason. Using it to escape problems. Some of them have trouble at home – are abused and sniff to get away from it.

Clearly, not everyone is able to achieve such empathy. However, it is important not to express judgemental attitudes towards users – although, this does not mean that officers should not tell users that their behaviour is not acceptable.

A corollary of the empathic approach to users is the need to treat them with respect. If they are not treated respectfully themselves, users are unlikely to treat police officers with respect. This was emphasised by experienced officers across the sites we visited. A commissioned officer from Cairns said:

Put yourself in the person's shoes. Treat them how you'd like to be treated.

Again, this was echoed by community workers and community members. Such respect can be demonstrated by common courtesies such as greeting users in a non-threatening manner, asking their names and who they are, and explaining to them why they have been apprehended. Officers and community workers in several locations commented upon the importance (if possible) of knowing users personally from contacts in other situations in which mutual respect can be established, and the positive effect this can have upon the outcomes of encounters which require police intervention. A community worker said:

First you need to treat the individual with respect. Especially because the volatile substance users are usually considered the bottom of the barrel. You need to find out who they are and use their name. This helps the individual feel valued and they (police) may get a better response if they use this approach.

The positive outcomes of such an approach are reflected in the comments of officers who said:

By treating these kids with some respect you'll get more done. It'll be more productive;

and

Relatedness (i.e. previously established relationships) helps when they're under the influence. We can normally get them to stop (sniffing).

The approach of officers can trigger a range of feelings among those intoxicated including fear, anxiety and aggression – sometimes with negative consequences. Discussing this, a community worker from Cairns said:

Police can make things worse sometimes. Rev things up, rather than calming them. Sometimes its just their presence ...

A senior sergeant from Perth also said:

Sometimes it's just the body language that sends them off. The coppers don't have to say anything.

Accordingly, several community workers and police officers emphasised the need to approach users in a calm manner so as to minimise or contain such feelings and reactions.

A key element – identified by community members and workers and police officers – in keeping users calm in potentially difficult situations is the way in which officers communicate with them. A senior man from Warburton said:

It's good when they (police) talk steady – not aggressive. The kids wont listen to them when they (police)'re agro.

The use of the word 'steady' in this quote encapsulates two elements of appropriate oral communication style. The first is the need for a friendly approach. As an officer from Perth put it:

When you approach a group it's important to be chatty. Chatty, it's the key. We greet them with 'How's it going?'. The whole time you are eye-balling the group. 'Alright where's the grog and the sniff?' They generally hand it over.

The other element in the quote from the Warburton elder is to speak clearly and slowly as intoxicated users are often confused and this may be compounded by the fact that English is their second language. A community worker said:

You need to be calm and to speak calmly and slowly. They'll take what you say wrongly – especially if you're in a uniform.

This means that officers need to take special care that what they have said is actually understood by users.

As mentioned with regard to the initial approach, in communicating with users, body language is also important. An experienced youth worker from Perth said:

If you approach smiling it changes the response you'll get. Have a sense of humour. If you give them what they aren't expecting then the response will be different ... Body language is important. Don't stand over them; sit next to them.

Once a decision has been made to intervene in a particular incident, officers need to develop a clear plan of action. Here too, appropriate communication plays a key role in the execution of the plan. As well as selecting from the range of available options, based on their assessment of situation, officers need to clearly state their intent to those who have been apprehended, to ensure that any instructions they give are comprehended, that users are actually able to comply, and that they are given sufficient opportunity to do so. As users may be in a confused state of mind, this also includes providing them with possible alternatives or solutions to requests made of them.

An effective outcome of any intervention requires that the police maintain control of any incident. An ex-sergeant from Perth emphasised the importance of this when he said:

Stay in control of the situation – don't let the situation control you.

As well as ensuring the implementation of an action plan, this also means that any intervention should not exacerbate the situation – resulting in the laying of charges against users because of their response to the police intervention, when they had not otherwise committed an offence. As the same ex-officer went on to say:

There's a difference between an offender and a kid affected by substances. The offender needs to be arrested, the kid needs to be protected and kept safe

Table 4: Dos and don'ts when engaging with volatile substance users.

Do	Don't
Assess and monitor	
Assess and monitor the situation	Don't assume anything
Ascertain whether the person is intoxicated and on what	
Determine whether the person is in need of medical, or other specialist, attention	
Check whether there are community members who can be called upon for assistance if needed	
Put safety first	
Approach with care	Don't chase
Does the person have anything that can be used as a weapon	
Is assistance needed	
Exercise duty of care	
Be empathic	
Focus on the person not the behaviour	Don't express judgemental attitudes about the person
Be respectful	
Treat users with respect	
Greet them	
Ask who they are	
Build trust	
Take time – go slowly	
Keep users calm	
Look, listen, settle down	Don't be aggressive
Keep happy without endangering them or you	Don't handle roughly
Communicate effectively	
Speak softly, slowly and surely	Don't raise your voice
Explain why they are being apprehended	
Formulate an action plan	
Provide solutions	
Give users the opportunity to comply	
Maintain control	
Monitor the situation and modify your behaviour accordingly	Don't exacerbate
Stay calm	Don't react to insults, shouting and screaming

As indicated above, the outcome of any intervention is result of the 'interaction' between users and the police. This means that in order to maintain control – as well as monitoring the behaviour of users – officers need to monitor their own behaviour. This includes ensuring the empathic, calm approach and non-threatening communication style discussed previously and not reacting to insults or shouting and screaming. A constable said:

Don't take what they say as personal. They're trying to get a reaction.

It is important to remember that, as well as being a genuine expression of aggression, such behaviour is often a defensive reaction on the part of frightened and confused young people and the situation needs to be defused.

Options for intervention

Confiscation

A first step in active intervention is to ascertain whether or not those encountered are in possession of volatile substances. If they are – after having established initial contact – we found a general consensus that officers should confiscate such substances. A commissioned officer in Fremantle said:

The main practice is to take the volatile substance off them and tell them to catch a bus or train home.

Similarly in the Anangu Pitjantjatjara Lands, officers will seize cans containing petrol from 'sniffers', tip out the contents and crush the cans. An officer working there told us:

In the past we didn't approach a sniffer because they might get violent. That was three years ago. If you could get the petrol off them, then you tipped it out and ran over the can. The change to now is that we tip out the petrol whether they like it or not. We're trying to push for an alternative – treatment.

Commenting on this strategy, a community worker said:

In general the police just take the bottle (containing a volatile substance) off them. Put it in the car. They (users) just go and get some more.

However, as a senior sergeant in Perth said:

We need to take it (a volatile substance) off them ... even if its for thirty minutes, at least the person's having a break from sniffing.

The manner in which the substance is removed is important and it should be done in a way which ensures the safety of the officers involved and the users. Ideally, users should be convinced to hand over substances rather than officers physically seizing them. Also when a substance has been seized, it should be disposed of safely.

Despite the comment by the community worker quoted above, there appears to be community support for the confiscation of petrol and other substances. This was summed up simply by a woman from Kintore:

Police take the can off them. That's good!

The practice of confiscating volatile substances from minors where there is reasonable cause to believe that they are at risk is sanctioned in all jurisdictions in which the study was conducted by provisions of child protection and child welfare legislation. In some jurisdictions, however, the police and others claimed that the legal basis for the confiscation of volatile substances from adults is a 'grey' area. Clarification of this power was one of the reasons behind the introduction of the *Protective Custody Act 2000* in Western Australia and, more recently, the Northern Territory's *Volatile Substance Abuse Prevention Act 2005*.

No action – move-on

The first option available to officers responding to a potential volatile substance use-related incident is to take no action at all, or to take no immediate action. One reason for this might be that those encountered have not been using volatile substances at all. Describing what he said was a common occurrence, when called out to incidents in which young people were alleged to have been 'sniffing', an ex-police officer said:

Retailers at shopping centres say, 'The kids come here and there's always a problem'. They want to get rid of them. The cops can't act if they (the kids)'re just walking through. Security see the kids and ask them to leave. They can't touch them (the kids) if they haven't done anything. They ask them to leave and if they don't they call the cops and ask them to get rid of them (the kids).

He said that often they were just young people who were 'hanging out'. He and other officers expressed frustration at the amount of time that was wasted on such incidents, simply because they had to be seen to be responding to calls from the public.

Officers also reported taking no action in circumstances where users were assessed as having committed no offence and as being no danger to themselves or others. As a senior officer from Alice Springs said, there is often:

... no basis to take them off the streets.

In such cases, once they have made an assessment, officers may simply leave them or tell them to move on.

Users are often moved on when they are judged not to be at immediate risk, to disperse them or get them out of locations where there is a potential for problems to arise, or in response to the demands or requests of community members. However, simply moving users on is not necessarily a solution. As a senior officer from Fremantle said:

Sometimes if you say 'Its time to leave', they'll sometimes go home if they have a relative with them. But moving them on sometimes puts the problem in another location and we just end up getting called out to get them again.

Speaking of a more proactive effort to move young people on an ex-sergeant in Perth told us that:

We also closed down the Perth (railway) station one night to see what would happen. We were meeting the trains and if it looked like the kids would be up to something we spoke to them and then sent them back home on the next train. Basically we were sending home all the problems! We got calls from Fremantle (police) station telling us to stop because we were moving the problems to them. I think with the lock down of stations the problems will change – there will be an upsurge in stolen cars and thus pursuits.

In moving young people on, there is also a danger that they might be subjected to greater risk. A youth worker warned:

Don't hound them out of a location, because of perceived dangers. The problem will just be transferred to the suburbs where the dangers may actually be greater.

In moving them on, the importance of giving users options was sometimes stressed – that is making suggestions to them, such as going home or to some other safe place. A youth drug worker advised:

(The police should not) ... just say 'move on' without giving alternatives. You've got to remember, when sniffing, kids are in a haze and can't make clear decisions. Therefore the police should offer suggestions, 'Can you go home, or can we take you to a relative, have you got someone who can look after you?'

In other cases, even though those encountered are clearly intoxicated, officers may take no action for other reasons: because there is nothing practical that can be done to avoid escalating a situation and for fear of violence. An officer from the Anangu Pitjantjatjara Lands said that:

When a sniffer gets really violent and it's (the encounter) only for sniffing we walk away and come back and get them tomorrow.

Another officer from the same location told us:

If there's a bunch of kids sniffing, there's not much that can be done. There's only one or two police and the kids throw rocks and take off into the hills.

The real danger in which officers can find themselves and the concerns they have is demonstrated in the following quote about an incident from an officer in a remote community.

About 6pm I was directed by a community member to attend a house. They said 'We don't want these sniffers in our house' ... I attended the house and the sniffers ran away. The residents of the house told me to chase the sniffers. I said 'No. It's not my job to chase sniffers'. Then one of the sniffers – a boy – came at me with an iron bar and rocks. He was yelling and off his face. He kept charging and then walking away. I didn't want to run. I got the pepper spray and said that I'd use it. A few people stepped in then and started trying to reason with the sniffer ...

If that sniffer had got between me and the car I would've used the pepper spray. I got in the car, but he still had the iron bar. There were forty people there now. He kept charging the car with the iron bar. I drove slowly away and called another officer as backup. The sniffer walked to the police station, but a woman took the iron bar off him. The sniffer picked up a jerry can and sprayed the vehicle. Then he fell down and started puffing. I went to pick him up, but as soon as I opened the car door he got aggro again. He ran away when we (the other officer and I) came towards him and then he fell on the ground.

He looked small and his family said he was only ten years old. I went and talked to night patrol and the council president that night. I got them to supervise him and take him to his parents.

I don't want to apprehend a ten year old, or pepper spray him, or take him into custody. If I'd sprayed or harmed a ten year old that would be the end of my job out here, and my family's livelihood. I'd be vilified and my career ruined.

It turned out that the boy was fifteen years old. His father and brother had been there for the incident. I'm worried that they'd let the police deal with him rather than intervene themselves.

In uncertain circumstances, fears and concerns over incidents such as this can sometimes lead to a reluctance to intervene in volatile substance misuse incidents.

Finally, officers may take no action because there are simply no practical alternatives, such as the availability of safe places, other service providers who can provide more appropriate interventions, or because there are no police cells in a community. This is commonly the situation in remote communities, but in suburban areas of Perth also there is also a dearth of safe places for users.

Enlistment of other agencies

Another option available to police when intervening in volatile substance misuse incidents is not to apprehend users but to enlist other services to provide assistance. Generally, this occurs where those encountered have not committed an offence and where they are perceived to be at risk and/or in need of care. (However, where users have committed an offence – depending on the seriousness of the offence and the state of the users – the option might also be employed.)

In cases where users are, or are suspected of being, medically at risk a common response is to call an ambulance – at least in locations where such a service is available, as in towns and cities. An officer from Mount Isa speaking of those under his command said:

If they (users)‘re very incoherent, or in a coma, they (officers)‘d call the ambulance. If there’s any doubt they ring the ambulance, because it’s hard to monitor them in the back of the car. The good thing in Mount Isa is it’s very quick – only short journeys.

Similarly, in Perth a constable reported:

If they’re injured or seriously effected, we may have to call an ambulance.

However, such an option is not always open. Speaking of the situation in Cairns, an officer said:

The biggest issue for JAB is the issue of custody. If they’re intoxicated the ambos won’t take them. So the police take them to hospital. The hospital will check them out – but they don’t want to keep them.

An important potential source of support for police when dealing with volatile substance users is night patrols – sometimes known as mobile assistance patrols. Most of the sites we visited had such patrols which are a common community-based response to problems arising from intoxication – including intoxication from volatile substances. Patrols act in their own right to deal with acute incidents arising from intoxication and attempt to intervene to prevent potentially problematic situations from escalating – wherever possible without involving the police. For night patrols, the most common response to volatile substance misuse is to take users home or to some other safe place – including sobering-up shelters where they are available.

In central Perth officers said that they used the night patrol to help them talk to users, to take users home or to other safe places, and to keep an eye out for users who had run from the police. A commissioned officer said that they made use of community resources including the patrol whenever possible, and a senior constable said:

Most of the time when there’s a situation at night, the night patrol’s on the scene and they can help straight away.

Officers can play an important proactive role in working with night patrols and this and related issues are discussed in the 'working with night patrols and community wardens' section.

Non-police protective custody

Legislation in all the states or territories in which we conducted research for this report makes provision for intoxicated persons and/or persons at risk of harming themselves or others to be placed in protective custody – with responsible adults or in designated safe places on the one hand, or in police facilities on the other. Officers can also exercise such options as part of their common law duty-of-care.

If a person is a minor – but under some legislation, also if a person is an adult – such provisions allow for the person at risk to be placed in the care of a responsible adult or, as in the case of South Australian *Public Intoxication Act 1984*, to be taken to the person's place of residence. This was generally seen by officers we interviewed as being the most preferable option. A senior constable from Perth said:

If we were dealing with a juvenile then we we'd first try and take them home. That is, if they're just intoxicated or sniffing.

In at least one location, this was the most common intervention. A senior sergeant from Cairns told us:

There were ninety jobs in the July – October 2004 period; and, of these, twelve went to the safe house. The cops check out home first. Most of them will go there.

Although the care of a parent or home was generally regarded as the most preferable non-police custodial option, it is not always practical or feasible. In Perth, for example, a young person might be apprehended in the central city but his or her home could be 25 kilometres away in an outer suburb. Even in small communities, however, some difficulties might be encountered. An officer from Kintore said there can be a:

... problem finding a family member to take care of sniffers once their can's been taken (from them).

On some occasions this can be because the family of the user might not want to take him or her. An officer from Alice Springs said that:

The family don't want the sniffer until they're sober.

An important reason for this was indicated by Superintendent Bristow (Bristow 2004, p.10) in his affidavit to the coronial inquiry conducted by Chivell (South Australia Coroner's Court 2005) when he stated that the alternative of taking a sniffer to his family:

... exposes the family to the risk of violence and the sniffer to further opportunities to sniff.

For this reason, as an officer from Alice Springs said, it is important not to force family members to take sniffers.

When considering the option of taking a person to his or her guardian or home, it is important to be aware that – although in general it might be preferable – in at least some instances home might not always be the safest option. An Aboriginal community worker from Perth said:

You need to get the sniffers off the street into a safe place, which isn't always home. In some cases it is better for them to be on the streets.

The reason for this is that family members might themselves be intoxicated or the young might be subject to harsh discipline. With regard to the latter, a police officer reported:

One advantage (of taking them home) is it provides a quick solution. But sometimes it can be a problem and the child can be even more worse off when they get home.

As indicated above, police are empowered to take intoxicated persons to designated places of safety. These include sobering-up shelters such as those run by the Drug and Alcohol Services Association in Alice Springs and by the Salvation Army in central Perth and Noongar Alcohol and Substance Abuse Service (now Aboriginal Alcohol and Drug Service) in the Perth suburb of Midland. However, some of these are either not suitable for, or have limited capacity to deal with, minors. Furthermore, they are not able to provide a 'round-the-clock' service. As a community worker commented with regard to the Perth shelter:

The sobering-up centre only has certain days and hours. What do we do outside of this time?

Again in towns and cities, there are some places that minors can be taken by the police and left in safe custody. They include St Paul's safe house in Cairns, the Safe House in Mount Isa, Mission Australia's On-TRACK facility (co-housed with the Western Australian Police Service's Juvenile Action Group) in central Perth, and Drug Arm's Time Out Centre in the outer Perth suburb of Kelmscott. In most remote communities, however, there are no facilities which provide officers with such an alternative.

Nevertheless, even in a city such as Perth the options available are limited. The On-TRACK facility is well appointed. It includes rooms with a television set and computer games, lounges and tea and coffee facilities. The toilet and shower facilities are designed to prevent suicide attempts by hanging and the police also have an observation window (two-way mirror) which looks into one of the holding/coffee rooms. However, it can only handle ten young people at any one time. The only other centre able to accept minors in Perth was Drug Arm's Time Out Centre and it only had the capacity to take three people at a time. In other parts of the city, there are no appropriate facilities for the non-police custodial care of young people. A commissioned officer from the extensive Fremantle police district said:

If we had somewhere, it'd work, but at the moment the coppers are dealing with it on the street ... There's no shelter that we can use in our district.

In those incidents in which volatile substance users are, or are suspected of being, medically at risk, the priority is to take them to a hospital or health clinic to be assessed. A commissioned officer from Perth said:

The 'duty-of-care' says that we should use the hospital to insure their health is OK.

Similarly in Kintore an officer told us that it was important to:

... take them to the clinic rather than police cells.

However, while hospitals are able to provide assessments of those taken to them by the police and to admit those who are in need of medical care, most hospitals are not able to provide protective custody for intoxicated persons – especially if the person is aggressive or potentially violent. This is source of frustration for many officers, who regard hospitals as being more appropriate providers of safe care for users than the police themselves. A youth worker from Mount Isa claimed that:

The hospital ... just don't know what to do with chroming; and don't want to know;

and an officer from Perth said:

Crisis Care don't want to deal with it (sniffing), nor do the hospitals.

Reflecting this frustration, an officer from a police district in Perth said:

At the moment the only two choices that are practicable are either the hospital or the lockup ... The regulars do need to be detained. However, it's pointless in taking them to the hospital as the police officer is unable to leave them because of their violent behaviour. So coppers won't usually take them to hospital unless necessary because they'd be held up there.

Clearly, in such a situation, the absence of suitable alternative exposes both the users and the police officers concerned to some degree of risk.

Police custody

There is widespread agreement in the literature, among community workers, police officers themselves, and in some legislation that using police cells as a place of safe custody for intoxicated people should be the option of last resort – especially for minors. Nevertheless, because of the absence, or limited availability, of other safe places, or because of the behaviour of users themselves, there is sometimes no other option. With regard to the latter, a worker from the Alice Springs Sobering-up Shelter said that, because shelter staff are unable to deal with them:

If they (sniffers)'re agro, the police take them to the watch house.

This problem was also reflected in the quotes in the previous section regarding the concerns of hospital staff about the potential for violence.

There are both formal and informal reasons for the reluctance of officers to take users into police custody. The first is concern for the safety of both users and police officers. A senior officer in the Northern Territory commented:

... (I do not) want to put them (sniffers) in cells. It's too stressful and risky for everyone.

As well as this, however, some officers are reluctant to take users into police care as they do not see it as their role. Another reason for such reluctance is fear of the consequences should a user be accidentally injured or die while in custody. An officer from Queensland said:

If a kid died while they were in our car, we'd have another Palm Island here;

and an officer from the Northern Territory said:

Being associated with a death in custody is bad for your career.

The concern over the safety of both those taken into custody and his officers, expressed by the senior officer from the Northern Territory, was reflected in comments made by officers from other jurisdictions. Due to the reluctance of family members or the employees of other agencies to take responsibility for users who might be violent, such people are often more likely to be taken into police custody. A senior constable from Perth told us:

If they're violent we do what we need to do to ensure theirs' and others' safety. In some cases we may take them into custody and put them in a padded cell ... But we try and avoid this. Sometimes we don't have any other alternative.

Whether those taken into custody are violent or not, several officers impressed upon us the need to ensure their safety and comfort. The type of care and supervision necessary was well described by the same senior constable from Perth and is worth quoting at length.

Basically a happy prisoner is a good prisoner. As the officer who's now brought the offender into the station you'd now be considering how to best look after them. If they were quiet, then you may offer them stuff like some food and water. A happy person is more responsive than an agitated or upset person. However, as the case may often be for a person who's been sniffing then you maybe encountering some hostility. In some cases, although rare with sniffers, they may be suicidal and you may have to go as far as stripping them down to nothing and putting them in the padded cell and then keeping a watch on them. This would of course all come down to the duty-of-care for a person who's at risk of self harm. If the prisoner is female we always try to have a female officer present and, if need be, carry out a search or remove clothes.

Importantly, ensuring the safety of users does not end when they have sobered up; and the duty-of-care that officers must exercise includes ensuring the safety of users on their release from custody.

In some locations – even as a last resort – taking users into police care is not, itself, a practical alternative. In some remote communities there are no police cells at all or the cells are not appropriate for holding users who are at risk. However, the lack of appropriate facilities can also be a problem in metropolitan areas. A commissioned officer from Fremantle told us:

In the station here we have two cells that are compliant; and then the next station we have to help us is Rockingham, and it only has three compliant cells. This is just not enough to be able to do as much as we'd like to. The shelter idea has to be worth a shot.

Laying charges

In those instances where a person apprehended by the police has committed an offence under by-laws prohibiting the use of volatile substances (as in the Ngaanyatjarra and Anangu Pitjantjatjara Lands) or under some other legislation, officers have the option of charging that person. However, they do not always take that option. A senior sergeant from Perth said:

I don't think I've ever arrested someone for an offence while they were intoxicated by sniff.

A senior constable, also from Perth, reported that:

We rarely end up charging them if it's a minor offence as it's a waste of time. Because in the eyes of the courts they were under the influence at the time of the crime and were not of full capacity.

Furthermore, officers also exercise the option of issuing cautions for minor offences. However, where more serious offences have been committed they are charged, and if appropriate kept in custody. When in custody for the commission of an offence, officers are required to exercise the same precautions and duty-of-care discussed previously with regard to users taken into protective police custody and the same issues arise. In this regard, an option available in Western Australia (but not other jurisdictions) is to make use of the Aboriginal Visitors Scheme and to bring in

Aboriginal people to sit with and monitor users. As indicated in the Warburton case study, also under the ægis of the Aboriginal Visitors Scheme, family members are taken to provide support for users when they appear in court at Laverton, several hundred kilometres to the south-west. Speaking of the Scheme an officer said:

In WA there's an Aboriginal Visitors Scheme through which designated people are allowed to sit with people. Up here we let the designated people be family. We don't generally let them stay overnight; but if they say they're suicidal we do. We sometimes take people hundreds of kilometres to court and so on with family just to keep them calm.

As discussed previously, in both the Ngaanyatjarra and Anangu Pitjantjatjara Lands petrol sniffing is an offence under community by-laws. These by-laws were developed at the request of Aboriginal communities and continue to have their support, and in both areas the police prosecute offenders. A long-time resident at Warburton told us that:

There seems to be a high level of agreement over the response to petrol sniffing. It's seen as a police and a community matter. The police are informed by the community when it's happening, and they respond according to the community by-laws.

As indicated in the case studies, in Warburton, where there are police cells, users are taken into custody until they are sober and are either cautioned or charged and then released – into the care of their parents if they are minors. An officer said:

With a juvenile caution, there's a note made on the computer so that if that person is picked up again we know their history. You get five cautions, and then you get charged with sniffing as a by-law offence – Section 9d.

Officers from Warburton regarded detention of users as having a deterrent effect. One officer said that young people do not like being taken into custody as it disrupts other activities such as watching videos. He went on to say:

We bring their parents up to the station and talk with them. It shames the parents a bit.

The effect of this being that the parents themselves were more likely to play an active role in addressing the problem.

The situation in the Anangu Pitjantjatjara Lands with regard to charging users stands in marked contrast to that at Warburton. As there are no appropriate facilities for their detention, unless they are at serious risk, users are charged and immediately bailed. Speaking of the way in which the police deal with those charged, a commissioned officer said:

The lack of a safe facility has a big impact. If people are being disorderly, you can't drive them 700 to 800 kilometres just for disorderly conduct – so you have to bail them and they return to the community

Not only does this mean that users do not see being charged as a deterrent, but this constraint on the ability of officers to take users into custody 'within the community' impacts negatively on perceptions of the role of the police. This – and the fact that they do not have the resources to deal with all incidents of sniffing – means that they are seen as being ineffective which, in turn, means that people are less likely to call them when petrol sniffing incidents occur. A youth worker in one community said:

Last Friday they had a disco and the senior secondary girls left their cans outside – but still sniffing intermittently. I didn't call the police though. They're too far away. If they do come they can't arrest them. They only take their cans and they'll get more.

In some instances in both the Ngaanyatjarra and Anangu Pitjantjatjara Lands, officers can set, as a condition of bail, that sniffers reside at an outstation or neighbouring community until they are due to appear in court. However, there are problems related to this option – including the degree of remoteness of some locations and lack of adequate supervision – and it appears to be used infrequently.

One option available to the courts, whether for sniffing itself in the Ngaanyatjarra and Anangu Pitjantjatjara Lands, or for other offences committed by volatile substance users elsewhere, is to fine them. However, many chronic users accumulate fines which they are unable to pay. A senior officer from Western Australia said:

People are fined for sniffing and this puts them into a cycle of non-payment of fines from which they can never get out because they don't have the money.

Although it varies by geographical location, for offenders in remote areas, community work orders are a common sanction handed down by the courts. These were seen by both police officers and justice officials as having some positive effect. An officer from the Anangu Pitjantjatjara Lands said:

... you work out a work order with the family – like do something at the store if they've broken in there. That works well because it's a bit of a shame job.

Speaking of such orders in the Ngaanyatjarra Lands, a Ministry of Justice employee said:

The community orders do work here to some extent. They (offenders) do actually do some work. People prefer it to jail – offenders and families.

However, such orders are not without their problems. The first of these is ensuring adequate supervision. This is being addressed in both the Ngaanyatjarra and Anangu Pitjantjatjara Lands. In the former, we were told that attempts were being made to facilitate the supervision of orders by communities themselves. In the latter, a parole officer informed us that:

The impact of the first coronial (inquiry) was to increase the number of officers supervising work orders on the Lands.

The second problem is the breaching of the orders – in some cases, because of the cognitive impairment caused by petrol sniffing. A youth worker from South Australia said:

Chronic sniffers don't even know that they're on a bond or work order.

Breaches of these orders compound the problem and the Ministry of Justice employee quoted above told us that:

Breaching a community order gets you a fine – and quite a lot of people here go to prison for not paying fines.

The outcome of charging sniffers was of particular concern to many officers. When the by-laws in the Ngaanyatjarra lands were first introduced, those found to be in breach of them could be given a short custodial sentence. However, as indicated in the Warburton case study, since the

abolition of custodial sentences of less than six months this option has not been available. This was lamented by the community advisor/justice of the peace and two officers, who were of the view that this had provided a deterrent effect.

Here, it must be noted that – in their review of petrol sniffing interventions – d’Abbs and MacLean (2000, p.74) found:

Legal sanctions ... offer few keys to the petrol sniffing problem. Sanctions currently available can certainly deprive petrol sniffers of access to petrol for a limited period, but offer little prospect of inducing any longer-term behavioural change.

However, in addition to providing enforced time out from sniffing, Shaw (1996) found that jail prevented sniffers from recruiting others to the practice. It should also be noted that custodial sentences can provide short-term relief for communities from the disruption caused by some sniffers. Nevertheless, incarceration of people with substance misuse problems is generally regarded as inappropriate and in no jurisdiction are volatile substance users jailed unless they are convicted of another offence.

These findings, and lament by the officers from Warburton, reflect a wider concern about the limited range, or limited effectiveness, of sentencing options available to the courts that was expressed by officers from all jurisdictions in which the study was conducted. What they indicate, however, is that – rather than reverting to criminalisation and imprisonment – what is needed are appropriate treatment facilities and other options.

Although they have some limited degree of effectiveness, each of these options – fines, community work orders, and jail for related offences – was perceived by both police officers and community workers as failing to address the problem of substance misuse itself. This is a cause of considerable frustration for many officers who see volatile substance users successfully prosecuted (or, in some instances, see the charges dismissed by a magistrate) only to return to the community and resume sniffing.

Police officers in all jurisdictions in which the study was conducted reflected the sentiment expressed by two officers from South Australia, when they said:

We want an alternative that the court diverts (offenders) to treatment as part of a bond.

While courts do have the option of requiring users to undergo treatment as part of their sentences, there are two important limitations on this. The first is the shortage of appropriate treatment options and facilities. This has been highlighted in the coronial inquires conducted by Chivell in South Australia (South Australia Coroner’s Court 2002, 2005) and Cavanagh in the Northern Territory (Northern Territory of Australia Coroner’s Court 2005), and there are plans in both jurisdictions to address the problem. It should be noted, however, that there are some important Aboriginal community initiatives in this area (such as those at Mount Theo and Ilpurla in the Northern Territory) and that these should be supported – not by-passed.

The second limitation is that where volatile substance misuse itself is not an offence and users have committed no other offence, court referral to treatment is not an option for the police or others to pursue. To address this, some officers have taken the position that volatile substances should be made illegal. This is also a call that has been made by some politicians. However, as indicated previously, criminalisation of volatile substance misuse flies in the face of moves over the past two decades to decriminalise public drunkenness. The recently passed Northern Territory *Volatile Substance Abuse Prevention Act 2005* seeks to address this problem – among others. *The Volatile Substance Abuse Prevention Act 2005* (Sec.33(1), p.14) provides that where a police officer or other designated person:

... reasonably believes a child or adult is at risk of severe harm, the person may request the Minister (for Family and Community Services) to apply for a treatment order in respect of the child or adult named in the request.

Given that provision already exists under child welfare legislation to deal with volatile substance misuse among minors, this provision is likely to be most effective in dealing with adult volatile substance users. It seems to us that the Act provides a useful model for addressing the issue of compulsory treatment. However, its effectiveness will be dependent upon appropriate treatment programs being made available. It is also important that the approach not be seen as 'the answer' to volatile substance misuse. It is, potentially, one part of a broad range of mutually supportive strategies that need to be employed.

Referral

The other option available to the police when intervening in volatile substance misuse incidents is to refer users to specialist agencies. On occasion, they might apprehend and take users directly to such an agency or they might contact such an agency regarding users who have come to their attention. Such referrals can be made for a variety of purposes – including assessment, medical or health care, welfare or safety concerns, treatment for volatile substance misuse, or for disability services for those who are impaired by their substance misuse. While the range of potential referrals is relatively wide, in practice the options are often constrained.

Within all jurisdictions in which the study was conducted there is a range of government agencies which have been established to address the needs of people (especially minors) who are at risk. These include child protection agencies, and accommodation, drug and alcohol, and mental health services. However, it was the experience of most officers we interviewed that these services were difficult to access. An officer in Perth said:

We refer them to Crisis Care, but they're in the same boat. They're overloaded too because they have to deal with a broad spectrum of situations.

Making the same point, another officer in Perth said:

DCD (Department for Community Development) state that they'll make a file on a particular person and situation, but the fact is that you are lucky to see some action in six months.

Such difficulty of access is exacerbated in remote communities where there are few if any welfare services 'on-the-ground'. In such situations, officers reported that after notifying welfare agencies that minors are at risk, it might be weeks (if not months) before an officer from the agency makes a scheduled visit to a community. For example, an officer from Kintore reported preparing a written report to Family and Children's Services stating that a minor was in need of 'care and protection'. The officer also reported making weekly follow-up calls to the FACS office in Alice Springs, but it was three months before a FACS officer visited Kintore regarding the case. The officer claimed that this was not an unusual situation.

In addition to broad-based welfare agencies, there are also some specialist alcohol and other drug service providers. However, most such services focus on alcohol and/or illicit drug problems among adults. Few are set up to address the needs of minors or volatile substance users. Nevertheless, as mentioned in the case studies, there are some petrol sniffing treatment programs in central Australia – including those at Mount Theo and Ilpurla (to the west of Alice Springs) and the Drug and Alcohol Services' 16-day program for adult users. However, many of these services are under-resourced and in practice, in all the centres that we visited, access to such services was limited.

In both the Northern Territory and the Anangu Pitjantjatjara Lands, officers commented specifically on the paucity of services to which they could refer those who were disabled as a result of chronic petrol sniffing. This problem has been also highlighted by community groups. In a deposition to the 2004-05 Chivell coronial inquiry, Vicki Gillick (2004, p.12) of the Ngaanyatjarra, Pitjantjatjara and Yankunytjatjara Women's Council (NPYWC) stated:

NPYWC is of the view that there has been insufficient progress on the part of the SA Government and its agencies in dealing with Anangu on the AP Lands who have disabilities, in particular those acquired through sniffing petrol or through other substance misuse or abuse, whether physical, mental, or both.

Police officers in each of the locations in which we conducted fieldwork reported using the option of referring users to other specialised agencies. However, they (and community workers) expressed exasperation at the limited range of options available and the ability of those agencies to respond adequately to the problem. In turn, this leads to frustration among officers – many of whom feel that they are 'left carrying the can' for what is essentially a health and welfare problem.

Consistent policing by officers known to community members

There is evidence to indicate that the policing of volatile substance misuse is more effective when a consistent approach is employed, and when officers are known to members of the communities in which they work.

Fieldwork undertaken for this project revealed very different pictures of common policing experiences in the Ngaanyatjarra and Anangu Pitjantjatjara regions. In the Ngaanyatjarra lands, particularly in Warburton, police reported responding to every identified petrol sniffing incident. They claimed this had led to the development of a situation in which users were likely to be apprehended by police officers known to them on the majority of occasions on which they sniffed. The officers said that, as a consequence, users were not often aggressive when apprehended. As one told us:

Saw a guy who was sniffing while attending another job. Took hold of the bloke, tipped out the petrol, took him to the lockup to sober up. He (sniffer) said 'Sorry' the whole time. He's been picked up many times before.

If the incident had happened with another policeman the young fella could've been abusive et cetera. But when you know them and have built some trust, they're fine. There isn't any short cut to this – you have to stick around.

Speaking of this relationship between police officers and young people at Warburton, a youth worker commented:

The kids here have got a good rapport with the police. They (the police) treat them like normal people.

This was in contrast to the Anangu Pitjantjatjara Lands where the response to petrol sniffing was less consistent – with users sometimes being charged and bailed and sometimes not. There, sniffing was not effectively controlled and – as well as having their vehicles stoned – an officer told us that:

There've been several riots when we try to pick people up.

This was reflected in the evidence to the Chivell coronial inquiry given by a senior sergeant (South Australia Coroner's Court 2002, p.65, sec.11, para.43) who testified that:

... we've had occasions where the station's become under siege and where other petrol sniffers or relatives have come to try and release the prisoner.

However, as discussed in more detail in chapter six of this report, police in the Anangu Pitjantjatjara Lands have conducted three operations during which they responded to every identified incident of petrol sniffing. One of these was Operation 'Pitjulu Wantima', which was conducted over a six week period in late-2002. In his coronial inquest, citing a report on the operation, Chivell (South Australia Coroner's Court 2002, p.67, sec.11, para.49) wrote:

One interesting outcome of the operation was the police noted a behavioural change among sniffers who became 'progressively more passive and cooperative'... In many cases sniffers voluntarily poured out their petrol, discarded their cans, and were relatively cooperative in providing personal details.

This Operation created conditions where the response to sniffing was consistent, and was carried out by officers who were spending more time in the community. It appears that in such conditions users know what to expect, the policing of users becomes more of an everyday affair and is attended by less opposition.

The need for consistency across jurisdictions also needs to be reflected at the individual officer level. An Aboriginal ex-police officer from Perth said:

You need a consistency among cops, so that they all do the same ... You need consistency in dealing with it.

Reflecting the need for both jurisdictional and individual officer level consistency, a senior police officer from Western Australia said:

Best practice would be consistent policing across the tri-state (WA, NT, SA) area. That way we can take the best of what all three areas are doing.

Summary

Several key lessons emerge from this discussion of police responses to intoxication from volatile substances. The first of these is that there is no simple solution to the problem. However, often, police are best placed to intervene in volatile substance misuse incidents and – as can be seen in Chapter 5 of this report – there is a general expectation within Aboriginal communities that they do so.

Apart from the Ngaanyatjarra and Anangu Pitjantjatjara Lands where petrol inhalation is prohibited under community by-laws, volatile substance use is not illegal. But whether it is legal or not, the key objective of police intervention should be to ensure the safety of users and the community, and to avoid escalating any incident.

When intervening in an incident – unless a person has committed some other offence – the priority should be to ensure that the intoxicated user is taken to a safe place or placed in the care of a responsible adult. The greater the range of options available to officers, the more likely it will be that an incident can be successfully resolved. Importantly, whatever the range of options, placing intoxicated users in police cells for safe custody should be the option of last resort.

It must be recognised that in most localities (urban, rural or remote) the range of intervention options practically available to officers is often limited; and that, without the provision of such options by governments or other agencies, the actions of officers are constrained. Not only that, but the limited range of options – combined with beliefs that intervention is not their role or is likely to be ineffective and fears for their own safety – can lead some officers to avoid intervention altogether.

Officers can be more effective in dealing with volatile substances users if they engage positively with them. This includes, where practical, getting to know users personally in other contexts. It also includes employing a calm, controlled, empathic approach with careful attention to communication when intervening in specific incidents. Dealing with intoxication can also be more effective if there is a consistent police response to volatile substance misuse incidents – as the comparison between practices in the Ngaanyatjarra and Anangu Pitjantjatjara Lands and the experiences of officers in other jurisdictions indicates.

Positive engagement with users and consistency of response can be achieved with training and the use of clear protocols. Where possible, these should be standardised across jurisdictions – especially where people frequently move between them, as in the tri-state area of Western Australia, South Australia and the Northern Territory. We are aware that there are existing protocols – both formal and informal – in all jurisdictions in which the study was conducted and we recommend that these be reviewed and, if necessary, amended in the light of the material presented in this chapter.

Police intervention in incidents of intoxication is clearly not a solution to the problem of volatile substance misuse. It is, however, a necessary part of reducing the harm to users and members of their communities arising from the problem. The solution to the problem requires a multi-faceted approach to intervention – one in which the police can play an important proactive role.

Chapter seven: Proactive policing

In this chapter we discuss the role of the police in pro-active responses to volatile substance misuse. That is, the ways in which police officers can be involved in activity which is aimed at preventing or minimising the prevalence of volatile substance misuse. According to a chief inspector from Queensland, the highest priority for the police should be crime prevention, and reactive policing is *the last line of defence*. This view was reflected by a police training coordinator from Western Australia who said:

We need to get out of the habit of reactive policing and should be more proactive as police.

Although they are not mutually exclusive and the content might vary according to the local or regional context, there are two broad categories of activities within the area of proactive policing – those for which the police have prime responsibility and those in which they have an essentially supportive role to play. The category of activities for which police have prime responsibility includes supply reduction, targeted operations and routine patrolling – activities in which there is some overlap with reactive strategies. Those proactive activities in which the police have a supportive – though no less important – role include: recreational activities; community education; and support and/or coordination with other community and agency activities.

Supply reduction

Along with harm reduction and demand reduction, supply reduction is one of the three broad approaches within Australia's National Drug Strategy (Ministerial Council on Drug Strategy 2004, p.2). With regard to volatile substance misuse, there are two aspects to this – policing the illegal supply of inhalants to users and restriction of availability from retail sources.

Policing illegal supply

There are two important, inter-related, aspects to the issue of supply – physical availability and price. In towns and cities, volatile substances are widely available and cheap. However, in remote areas – where other volatile substances or other psychoactive substance are not widely available, and where there have been restrictions on the availability of petrol – sniffers are prepared to pay high prices for small amounts of petrol (as examples cited previously demonstrate). In these circumstances, there are people who are prepared to profit from supplying petrol to sniffers. As a community member in the Pitjantjatjara Lands said:

Anangu are selling petrol sneaky way.

In the Ngaanyatjarra and Pitjantjatjara Lands, the supply of petrol for the purpose of inhalation is illegal under community by-laws. It is also illegal under Section 19 of the *Controlled Substances Act 1984* and the *Petroleum Products Regulation Act 1995* in South Australia; the *Criminal Code Act Compilation Act 1913* in Western Australia; and under Section 18(1) of the *Misuse of Drugs Act 2004* in the Northern Territory.

In each of these jurisdictions, police reported targeting those supplying petrol for the purpose of inhaling but they have encountered several difficulties. The first of these is identification. Incidents such as one in a Pitjantjatjara community where the police actually observed a person giving out

petrol are rare, and gathering intelligence on suppliers is often difficult – especially when police officers are not resident in a settlement. In this regard, links with members of communities are important. According to the Justice of the Peace at Warburton:

There seems to be a high level of agreement over the response to petrol sniffing. It's seen as a police and community matter. The police are informed by the community when it's happening, and they respond according to the community by-laws.

However, as an officer from South Australia said of Pitjantjatjara communities:

The community will come up and tell us (who is supplying) if they know the cop. That's the trouble with fly-in/fly-out policemen.

Community perceptions of what the police are able, or likely, to do also play a role. Two informants in a Pitjantjatjara settlement reported that they and others knew who was supplying petrol but did not bother reporting those involved because of a perception that 'the police are not able to do anything'.

In some cases, relationships with sniffers themselves can also be important. Police working in the Anangu Pitjantjatjara Lands reported that sniffers would not 'dob-in' suppliers and one officer working in the Ngaanyatjarra Lands reported the same. However, the local justice of the peace at Warburton said:

When there's clearly a regular supply coming in, and frequent bouts of sniffing, I, or the police, ask the sniffers who's supplying them with petrol. The kids will generally point the finger at someone – which they won't do for ganja. There's then a lot of effort put into preventing that person for supplying.

In the Ngaanyatjarra and Anangu Pitjantjatjara Lands and at Kintore, officers identified problems in obtaining sufficient evidence to prosecute those believed to be supplying petrol to sniffers. The first is being able to prove that a person apprehended does not have the fuel for legitimate use in that or another vehicle. For example, an officer from Kintore reported having stopped diesel vehicles carrying drums of petrol, but has had insufficient evidence to prosecute.

Another difficulty lies in the evidence of sniffers – some of whom might be cognitively impaired – against suppliers. In the Anangu Pitjantjatjara Lands, there may be several weeks delay between the time a charge is laid and when it is heard in court. As two officers independently reported:

We can't depend on testimony that was given to us a month ago to be reliable in court;

and

Evidence from petrol sniffers won't hold up in court several months down the track.

Despite such difficulties, the police have had some success. Officers from Kintore reported that they have had several successful prosecutions for the supply of petrol in the Northern Territory; and eight successful prosecutions at Kiwirrkura under the Western Australian *Misuse of Drugs Act*. Similarly, an officer reported that, at Warburton, in the previous six months, they had averaged about two prosecutions a month for supplying.

An issue arising from successful prosecutions is the penalty. Under the by-laws in the Ngaanyatjarra Lands, the maximum fine for supplying petrol is \$600 and there is no provision for imprisonment of offenders. However, the contents of a jerry-can can be sold for between three and four thousand dollars. One officer reported:

... they picked up a guy who was charging \$50 for 300ml. They got statements and charged him. He only got a fine. Got fined less than he sold it for and landed up with a profit!

In the past, to overcome the problem the police have laid other, more serious charges and we were told, for example, that one person had successfully been prosecuted on two charges of 'to cause a child to be in need of care and protection'. However, the need for this approach has recently been obviated in Western Australia by the introduction of stronger penalties for supplying.

At Warburton both the police and the local justice of the peace reported that successful prosecution of suppliers had some positive effect. The JP stated that:

It's important to keep a handle on supply, because there are some people in the community who would sniff all the time if they could,

and supply reduction activities curtailed this.

Just as there are unscrupulous individuals who seek to take advantage of the demand for petrol among sniffers in remote communities, there are individuals in towns and cities who take advantage of the demand for other volatile substances. As a representative of the Western Australian Aboriginal Legal Service said:

... sniffers are very vulnerable – especially (but not only) the girls.

Instances were reported to us of older men supplying volatile (and other) substances to young people in exchange for sexual favours in both Cairns and Perth. As a police officer from Perth said:

There's a problem with older men preying on the younger girls by giving them 'sniff' for sexual favours.

As with petrol, obtaining evidence of the supply of other volatile substances that will stand up in court is difficult. Nevertheless, an officer from Alice Springs reported the police had recently been successful in prosecuting an elderly man for supplying paint to minors. He regarded this as being an important precedent that could be used in other cases.

Restriction of availability from retail sources

Most volatile substances can be purchased legally over-the-counter. Nevertheless, police – working alone or with community groups – have actively targeted the supply of volatile substances for inhalation in Cairns, Mount Isa, Alice Springs, in various suburbs of Perth (including Northbridge, Midland and Fremantle), and a senior officer responsible for policing in the Ngaanyatjarra Lands has been involved in similar activities in Kalgoorlie. For example, police in the Perth suburb of Midland developed an 'accord' – between the police, retailers and the local municipal council – under which the retailers undertook to lock-up volatile substances or to use only empty containers for display. As part of this approach, to assist retailers, the police also developed a brochure entitled *Retailers Against Volatile Substance Misuse*.

In Perth police have had a generally positive response to this strategy – especially from large retail hardware chains such as Bunnings and Ross'. A senior officer from Fremantle commented:

Some shops in the local area have taken to locking up the volatile substances so as to assist the community combat the problem. We met with Ross' Hardware and they were great. Took the stuff off the shelves straight away. Others openly sell it to people who they know are going to harm themselves with it. The sales are still happening and we're left unable to stop it.

As the quote above illustrates, in some instances, retailers have cooperated because of a genuine concern for users and the problems associated with volatile substance misuse. In other instances, the police have appealed to the self-interest of store owners and managers – that is, to reduce theft from their stores. In this regard, the police can sometimes be more effective than their community organisation counterparts who have undertaken similar activities in most areas.

It is important to note that, in most of the sites we visited, the community sector has also been vigilant in attempting to restrict supply. For example, in Alice Springs, workers from CAYLUS have developed positive relationships with staff from the town's major points of supply. They have given staff at these outlets a form to fill in when they sell small containers of paint. The form lists the colour, the reason for buying it, the number of cans sold, and the person's name. Thus enabling CAYLUS staff to monitor sales within the town as a whole and to follow-up where necessary.

Attempts to restrict the supply of volatile substances from retail outlets are not without their limitations. As indicated above, some retailers are unwilling to cooperate with the strategy. In large stores, ultimate enforcement of voluntary prohibitions on supply to minors often rests on the discretion of junior staff at check-out counters, who may not feel confident enough to question customers. Substitution is also an issue. For example, in Mount Isa it was reported that when paint and glue were locked away by retailers, users switched to other products containing volatile substances, such as hair-sprays and deodorants. A third limitation is circumvention of sales restrictions through theft – hence, the security advice provided to retailers as part of accords in places such as Mount Isa and Perth. However, these limitations are not reasons for not utilising the strategy. As an Aboriginal ex-police officer in Perth said:

It's not going to stop it, but if you have little barriers along the way you can reduce it. The more deterrents the better.

There have been no formal evaluations of attempts to reduce the supply of volatile substances through retail outlets. That some retailers are prepared to continue selling volatile substances to those who are likely to misuse them, and that security of volatile substances within some stores is not as effective as it could be, means that there are some limitations to the strategy. Nevertheless – despite one community worker in Mount Isa labelling it a 'band-aid approach' – police in both Mount Isa and Perth believe that it is effective. In Mount Isa an officer reported:

Restrictions are, on the whole, working. There are still some shops where paint isn't hidden away; but we don't come across theft in the same way as we used to. Now we're not coming across aerosols in the creek bed as often (as we did).

Similarly a senior officer from Midland in Perth said:

... I think it's working. All the local shops seem to be working with us and the rates of people sniffing and the crime rates are lower here than they were.

To reduce the supply of petrol for sniffing, most of the remote settlements visited as part of this study had been substituting aviation fuel or 'avgas' for unleaded petrol. Avgas contains high levels of ethyl-lead and, to recoup the cost of the environmental damage this causes, is subject to high levels of excise duty making it considerably more expensive than regular petrol. However, it also contains low levels of volatile hydrocarbons – making it un-sniffable. To enable communities to substitute avgas for petrol at no extra financial burden, the Australian Government Department of Health and Ageing introduced the COMGAS Scheme which subsidised the cost of the excise duty. The scheme has been evaluated and was found to make an effective contribution to the reduction of petrol sniffing and related harms – although its effectiveness was, in part, related to the degree of isolation of settlements. (Shaw et al. 2004). Since the time that fieldwork for this project

commenced, subsidisation of avgas has been phased out and replaced by subsidy on the cost of Opal. Where this substitution strategy has been adopted, there remains an important role for the police – the vigorous policing of 'bootlegging' unleaded petrol into the settlements.

As with regard to other volatile substances, working with retailers can be an effective strategy to reduce the supply of petrol. At the time fieldwork for this project was conducted, within the Anangu Pitjantjatjara Lands there were two outlets which sold unleaded petrol. One of these had limited sales to the filling of vehicles. The other, however, also sold large amounts in jerry-cans – at least some of which was on-sold, or 'bootlegged', to sniffers for up to \$50 per soft-drink bottle. According to the school principal from a nearby settlement, at the latter outlet people were *queuing up to buy unleaded*. However, the South Australian police successfully intervened and an agreement was reached that the outlet would, in the future, no longer sell unleaded petrol in jerry-cans.

Initiatives to reduce supply are important. As the evaluation of the COMGAS Scheme demonstrated, areas in which the supply of unleaded petrol has been effectively reduced tend to have less sniffing. Not only is there less sniffing – but sniffers become less intoxicated and cause less harm to themselves and others when they do sniff (Shaw et al. 2004).

Routine patrolling

Active, local patrolling was highlighted by police officers in both remote settlements and in urban areas as a means of reducing volatile substance misuse and related crime. Such patrolling may be generalised, as in Perth where officers often encounter users on routine patrols. It may also be more targeted: as in Kintore where officers patrol to protect community facilities from vandalism by sniffers; or in Alice Springs where police reported patrolling 'trouble spots'. As an officer in Alice Springs told us:

We're now proactive. We go to target areas to spot trouble before it happens.

Such regular patrols have the effect of dispersing users, who might otherwise become involved in incidents. In both Alice Springs and Mount Isa officers also reported picking-up minors and taking them home or to some other safe place both to prevent crime and for the safety of the minors themselves.

An officer from Cairns stated that:

Police patrolled those areas (potential trouble spots) and dispersed them (sniffers). It hasn't really decreased the numbers.

However, this misses the point. It should not be expected that such patrols can address the causes of volatile substance misuse. They can, however, increase safety for communities and the users themselves and can prevent some crime that might be associated with volatile substance misuse. A potentially more serious criticism of patrols which target users, or locations in which they congregate, is that they might victimise young people and infringe upon their rights to associate and to access public space. However, this is essentially a criticism of the way that some officers might conduct them and their failure to engage constructively with users, rather than being a valid criticism of patrols themselves. As with many other interventions, the effectiveness of such patrols in dealing with volatile substance misuse and related crime has not specifically been evaluated – although individual police officers and Aboriginal police liaison officers regarded them positively.

Police operations

In the Anangu Pitjantjatjara Lands, in 2002 and 2003, the police conducted Operation *Pitula Wantima*, Operation Safelands 1, and Operation Safelands 2 in which they targeted petrol sniffing and other substance misuse and violence and other crime. The operations required extra resources and additional officers had to be flown in. In an affidavit to the 2004-05 coronial inquiry by Chivell (South Australia Coroner's Office 2005), Superintendent Bristow (2004, p.4) stated that Operation *Pitula Wantima*:

... was successful in significantly reducing the level of recorded crime for a period and in identifying persons involved in petrol sniffing.

He went on to state (Bristow 2004, p.5) that:

Both Safelands Operations concentrated on substance abuse and had considerable impact on the trafficking of cannabis, alcohol and petrol with flow on effects of reducing violence and crime.

However, he also reported (Bristow 2004, p.5):

It was very noticeable that when police resources were reduced at the completion of an operation, offending violence and petrol sniffing quickly increased.

A similar approach was taken by the Northern Territory police in the settlement of Mutitjulu, adjacent to Uluru. There, a 'zero tolerance' approach was introduced at the behest of the Minister of Police. Under this approach all offences were prosecuted, which – as one officer put it – made Mutitjulu *uncomfortable for sniffers*. It resulted in many sniffers appearing before the court and put additional pressure on other agencies such as Family and Children's Services. However, a senior officer commented that the zero tolerance approach is *only dealing with symptoms* and that what was needed was to provide a safe environment. Nevertheless, he also stated:

So far, the disorder has reduced. There's less violence. Can't prove it in stats, but the community say things are marginally safer.

In both these South Australian and Northern Territory examples, one of the objectives of the police had been to use the justice system to put pressure on health and welfare agencies to make greater efforts to address the problem. It appears that this approach has had some limited, effect – with at least some offenders getting help that they might not have otherwise received from those agencies.

Use of other legislation

As indicated in the case studies, staff from the Central Australian Youth Link Up Service (CAYLUS) in Alice Springs have used the *Northern Territory Trespass Act* to control the impact of individual users on particular families and localities. Trespass legislation has also been used to keep individuals known to be supplying inhalants away from particular areas. In essence the person who wants to keep particular individuals away signs a form stating that these people are not allowed at a particular location. The individuals then have to be made aware of the trespass order against them. This can be done by giving them a copy of the order, or by posting it to them. In Alice Springs it is most commonly done by the Aboriginal Community Police Officers. Once the individuals have seen the order they are not allowed to trespass in that particular location. If they do, the police have an obligation to remove them. If they are asked to leave and comply, there is no penalty under the act. If they refuse to leave they are summonsed to appear before a court. In

Alice Springs this has only happened on one occasion. The individuals were fined, and agreed to return to their home community. The operation of this act depends on the ownership of the land. The Police in Alice Springs have accepted the use of trespass orders in 'town camp' communities where the ownership of the land does not rest with individuals. In these cases someone on the Board of Tangentyere Council, or some other position of authority, must sign the trespass order. Again, as indicated in the Alice Springs case study, this has been regarded as an effective strategy.

Restraining orders have been used to similar effect. In Perth restraining orders have been used to keep a group of young volatile substances users away from a youth centre, and away from a town area.

Special police units

Both the Queensland and Western Australian Police Services had special units to deal with young people. As described in the case studies, in Perth the Juvenile Action Group (JAG), which deals with youth under the age of 18 years, is co-located with other non-police youth-related services in central Perth – an area to which many young people gravitate. JAG focuses on building relationships with young people and, where appropriate, referring them to other services. This group has been credited with positive interventions with a number of young people, and with decreasing the level of volatile substance misuse in the Northbridge area of Perth. The co-location of JAG with welfare agencies, as opposed to other police units, also allows the officers to play a wider role than ordinarily associated with policing. Speaking of the success of JAG, an ex-sergeant said:

In that first year (of JAG operation) the damage, assaults on police, graffiti, the number of children apprehended under the Child Welfare Act and then passed on to the courts, all decreased.

For this work, the JAG team won a violence prevention award. Speaking of the reason for the teams success the ex-sergeant went on to say:

My two years with JAG was a great learning experience. It made me realise that for a program like that to be successful you had to have good working relationship with the relevant services. You need vision but you also need stability. And the success of JAG is the result of a team effort, made up of the right players.

The Juvenile Aid Bureau (JAB) in Cairns has a different approach. It is located in police headquarters, and focuses on children under ten years of age. The reason for this being the high number children of this age who come to police attention. Echoing comments by others, a youth shelter worker speaking of the JAB team said:

The JAB come to talk to the kids in the Shelter when they're involved in an issue. They're plain clothes, more youth friendly, very good. When the kids go to see the JAB, even the rooms are different, they have teddy bears et cetera. They genuinely engage young people.

Despite the positive aspects of the JAB officers' work with under-10s, an untoward consequence of this focus is that there is no specialised policing service targeting older children who may need more intensive intervention. A youth worker commenting on this, asserted that some older children tend to move to more serious crime because there is no service to prevent them from progressing in that direction.

In the smaller town of Mount Isa – where there are fewer police resources available – rather than having a special unit (as in Cairns) the Queensland Police Service has a single officer responsible for crime prevention among young people. This officer's role focuses on education and liaison with other agencies and it includes work on the prevention of volatile substance misuse. The officer provides school visits and works closely with the Mount Isa Substance Misuse Group (which is supportive of this work).

Recreational activities

An important aspect of proactive policing has been the involvement of officers in a range of recreational activities. This was the case in all of the locations in which this study was conducted – but particularly in remote locations where there are few such pursuits for either young residents or the officers stationed or visiting there. These activities included: Police and Citizens Youth Clubs in Perth; attendance at drop-in centres in the Ngaanyatjarra Lands; blue light discos in the Anangu Pitjantjatjara and Ngaanyatjarra Lands and Kintore; film nights in the Anangu Pitjantjatjara and Ngaanyatjarra Lands; sporting activities such as football and basket-ball at Mount Isa, Mutitjulu, Kintore and the Ngaanyatjarra Lands; football trips to Adelaide, Kalgoorlie and Perth from the Anangu Pitjantjatjara and Ngaanyatjarra Lands and Kintore; hunting and camping expeditions at Kintore and in the Ngaanyatjarra Lands; assisting people to obtain drivers licences in the Ngaanyatjarra Lands; a bicycle program in an Anangu Pitjantjatjara community; and participation in community events such as sporting carnivals and festivals.

The flavour of such activities was captured in an interview with a crime prevention officer in Perth.

The PCYC (Police and Citizens Youth Council) out this way works very hard to keep the kids involved and happy to come back again. By doing this they're trying to keep the idle hands occupied and so they won't turn to crime or drugs. The 'Boom Room' is one of the activities aimed at the 'at risk' kids here. The target group here is the 12 to 18 year olds. We found that while targeting these kids we were getting kids very much younger than this who'd come along with their older brother, sister or cousin. So we had to look at something that was more appropriate than this for them. We decided with some help from the local community we would use the Fun Centre around the corner from the hall where the older ones would be. Being at this occasion we'd do things like make sure they got a feed and some attention to the basic things we take for granted.

Again, most of these interventions have not been evaluated in an Indigenous context. Summarising the limited available evidence, d'Abbs and MacLean (2006, pp.36-38) point out that the use of recreational activities should be:

Sensitive to the needs of particular communities; seen as preventive measures and targeted at all young people – not simply chronic 'sniffers' who are unlikely to be attracted to them; and not be regarded as a substitute for the treatment for 'sniffing'.

Officers made the point that participation in these activities also allowed them to get to know people outside of a law enforcement situation. Members of the community reinforced this perception, with one saying:

They're a positive presence, and are seen to be enjoying themselves.

These activities are preventive and are targeted at all young people rather than users *per se*. In this regard, several officers made comments to the effect that *the good kids need to be rewarded*.

From a police perspective strategies such as these let community members know that sniffing is an issue with regard to which they are active and gives them support to undertake their own proactive strategies.

In some remote locations, community workers and members commented that when these activities were conducted by visiting police officers they were sometimes not well coordinated with the communities. Community workers commented that to get maximum effect from these events it is important that where possible officers give communities advance notice. One youth worker in a remote community commented:

They run a blue light disco once a year – but they never tell anyone they're coming, which means that people can't look forward to it – really cuts the effectiveness of it.

Nevertheless, generally, police participation in such activities was welcomed by young people and other community members and as a group from Kintore said, *they should be conducted more often.*

Unfortunately such activities by police officers can be 'squeezed out' by decreased resources for policing or changing priorities in local jurisdictions. One officer commented:

The drop in our staff numbers from 18 to 15 and the back to back policing has meant that we don't have as much time to do things like that.

School- and community-based education

Another common proactive strategy used by police officers has been to take part in a range of initiatives aiming at educating young people about the consequences of volatile substance misuse. Police officers have visited schools to talk with students in both the Ngaanyatjarra and Anangu Pitjantjatjara Lands. Commenting on this, a young woman from Warburton said:

When I was a little girl they came to talk at the school about how not to sniff. I listened.

In Mount Isa – as part of the 'Adopt a Cop' scheme – school based constables talk to students about drug and alcohol issues in general. However, to avoid focusing attention on the issue, they do not address sniffing directly unless they are asked specific questions.

Activities such as talks at schools may be easier to organise in smaller, less formal communities such as are found in remote areas. In urban areas such initiatives often need to be more formalised. An officer in Perth commented that:

There's a need for community-based programs which educate the community. At the moment we're only able to attend schools if we're invited for such a program.

Importantly, in addition to their potentially educative function, the provision of school-based talks can provide students with the opportunity to get to know officers in a non-threatening environment – especially in remote communities. In this regard, visits by officers to schools can be important in their own right and contribute to the building of the positive relationships discussed in Chapter five.

Evidence regarding the impact of drug education delivered through schools suggests that it can be an effective strategy for reducing later levels of drug use (Ministerial Council on Drug Strategy 2004, p.20). However, among other things, lessons need to be provided before drug use patterns

are established and they need to use evidence-based pedagogy, for example, by employing interactive teaching approaches (Loxley et al. 2004, pp.118-9). Importantly, officers should receive some form of training if they are to provide school-based education. If they provide education based on these principles, police officers can play a positive role. However, poorly planned lessons based upon 'scare tactics' and delivered by un-trained personnel can actually be counter-productive (Midford et al. 2001, 2002).

Coordination, cooperation and support

As the case studies, and the chapter on the response to intoxicated users show, there is a wide range of agencies and community groups – with over-lapping areas of responsibility – involved in addressing volatile substance misuse. Those chapters also show that there are both points at which coordinated responses are essential to, and/or can greatly, enhance the response to volatile substance misuse. Coordination and cooperation with, and support of, other agencies can also result in more effective use of the limited services and resources that are available to address the problem.

The officers we interviewed identified a number of strategies to facilitate coordination and cooperation. These included:

- establishing formal memoranda-of-understanding between agencies regarding their respective roles;
- regularly attending inter-agency meetings to exchange information and explore ways of enhancing current responses;
- providing support to community groups; and
- taking a lead role in the development of new initiatives – including calling meetings to discuss the volatile substance misuse and to canvas views on possible responses.

Coordination of responses is most effective where it is formalised. The experience of the Western Australian Police Service's Juvenile Action Group provides a concrete example of such an approach. The JAG, Mission Australia (a non-government organisation) and the Department of Family and Community Services worked out of shared premises and had mutually agreed upon roles, and were widely regarded as having had a positive impact on the reduction of volatile substance misuse and associated harms.

Cooperation and coordination can also be effective where they are less formalised. In response to a rise in volatile substance misuse related incidents, workers in Alice Springs developed a strong inter-agency approach to the problem. All the agencies involved – including the police – met regularly to discuss and coordinate their activities. Representatives of several agencies commented on the improvement in joint problem solving once the police began attending the meetings and said that this attendance was the cornerstone of the cooperative relationships that existed between the police and other agencies. Commenting on police involvement, an officer said that:

Since participation in agency meetings we've moved from reactive to proactive policing.

As well as providing benefits for both other agencies and the police, a youth worker was of the view that seeing the police and agency staff working together – riding in the same car for example – sent a strong message to young people about the unacceptability of volatile substance misuse. He said that:

It (cooperation) gives a message that everyone is singing from the same song sheet.

Here a word is apposite about the involvement of officers in inter-agency and community meetings. A point made by several community workers, but also by some officers, was that simple attendance at such meetings was not sufficient. For example, it was claimed that difficulties sometimes arose because senior officers who attended meetings did not appear to pass on information or relay decisions to general duties officers and, thus, that the effectiveness of such meetings was compromised. Similarly, it was claimed the high turnover of police personnel was not conducive to maintaining good inter-agency relationships.

As the case studies and subsequent chapters demonstrate, many police officers have a great deal of expertise in working with volatile substance users and they can provide considerable support to both government and non-government agencies by sharing this expertise. In Alice Springs for example, several agencies have developed their own protocols for dealing with users – to ensure the safety of users and agency staff and that staff are acting legally – and police officers have contributed to the development of these. An employee of one non-government organisation said:

We've developed protocols on what happens if clients of the services get picked up at night. The responsibility of different services and the contact points for services have all been agreed. The policy and procedures manual for the youth drop in centre has been checked by police.

Working with communities

As well as providing support to other agencies, police can also play an important role by providing active support to community groups that aim to address volatile substance misuse. For example, as indicated in the Cairns case study, officers have been involved in the Cairns Inhalant Action Group (CIAG) – a community action group with membership drawn from concerned teachers, local health service personnel, and others including the police. Police support for this group has had benefits for all concerned – including the sharing of resources. Officers were able to connect the group to people within the criminal justice system – such as prosecutors and magistrates – whom they might otherwise have had difficulty accessing. They also worked with other members of CIAG to discuss more appropriate reporting of volatile substance misuse with local media representatives. Benefits for the police have included training of officers (by other CIAG members) on appropriate handling of users and coordination of their activities with those of other agencies. An officer said that:

Involvement in the Cairns Inhalant Action Group puts us into contact with the social side of it (volatile substance misuse). It meshes us into an interagency approach – which is where the Police Service is heading. It's part of the development of working with communities.

Where community responses to volatile substance misuse have not been strong, officers can also work with communities and community organisations to promote particular interventions and/or to help them to develop strategies to implement them. For example, in the Anangu Pitjantjatjara Lands, an officer told us that he had been holding meetings and talking with members of a particular community to set guidelines for a night patrol and an outstation project. These guidelines include community responsibility for conducting the programs. He said:

I've been trying for six months and it's beginning to work.

As this quote shows, such proactive policing initiatives can be time consuming. However, they have the potential to pay significant dividends.

As indicated previously, sometimes it can be difficult for community leaders to take action on volatile substance misuse. However, as the case studies and our interview data demonstrate, support of leaders and elders by the police can give them – and other community members – the confidence to take action. For example, as illustrated in the case studies, the support of police officers at Kintore was a spur to the development of a community work program for petrol sniffers. Similarly, at Mutitjulu in Central Australia, police support of workers from CAYLUS who, at the request of community leaders, were taking young sniffers to an outstation was important in reinforcing community sentiment against petrol sniffing. Again, at a community event in the Ngaanyatjarra community of Blackstone, leaders took the opportunity of police support to promote community action against substance misuse. Describing this, a community worker said:

The police came for a festival. There were bands, football and so on. At the beginning of the weekend the police were sitting in their van. But by the end they were out on the oval kicking the footie and having a good time like everyone else. The community leaders took the opportunity of the police being there to have a big talk about sniffing and ganja.

In supporting communities, concern about the creation of dependence on the police is an issue. As we have indicated, many officers interviewed did not want to create a situation where communities looked to the police to solve the problem of volatile substance misuse and, thus, did not take, or took only a minimal role, in community initiatives. However, as we have discussed in *Responsibility and dependence* section of this report (p.55), many communities are not in a position to control volatile substance misuse without the help of outside agencies – including the police. This does not have to entail the creation of dependence and various tactics can be employed to avoid it. These include development of memoranda-of-understanding that clearly state what is expected of community members in any initiative, and refusal to undertake planned activities if senior community members are not present.

Working with night patrols and community wardens

A special aspect of police cooperation with communities involves working with night patrols. As discussed in Chapter 3, night patrols are a common community based response to intoxication and the problems arising from it. They seek to prevent intoxicated persons from harming themselves and other by removing them from public to safe locations, and to reduce the number of Indigenous people in police custody (Gray & Saggars 2005a). The focus of most patrols is alcohol-related problems – although most also deal with intoxication arising from other substances.

In Western Australia, Aboriginal communities – as defined under the provisions of the *Aboriginal Communities Act 1979* – are able to appoint wardens to promote compliance with community by-laws, such as those against substance misuse in the Ngaanyatjarra Lands. While they are involved in the prevention of substance misuse, wardens have more of an enforcement role than do patrols. The work of patrols and wardens is not a substitute for policing. However, it is complementary and – when effective – can reduce the call on scarce police resources.

Most of the sites we visited had either patrols or wardens. However, the models on which they were based and their relationships to the local police varied considerably. The relationships between police and patrols were most effective where there was a clear understanding and agreement between them as to their respective roles and the mutual support that they were able to provide. Such an understanding can be formal (as in Alice Springs and central Perth where there are memoranda-of-understanding between the respective police services and the Tangentyere Council Night Patrol and the Nyoongar Patrol) or they can be informal as in some remote communities. Commenting on such relationships a community worker in Perth said:

The patrol, police and sobering up all work together. The patrol talk to people, warn them that their behaviour needs to change, and offer them assistance – transport home or to the sobering up. The patrol phones the police if problems occur.

In Kintore a community member said:

Police and night patrol working together every night – telling them to go home and tip out their can.

Nevertheless, even with a formal memorandum-of-understanding in place, the relationship has to be worked upon. The coordinator of the Nyoongar Patrol System told us that:

In (central) Perth we have a good working relationship with the police. The biggest issue is the changeover of officers. Even the senior officers are newcomers. The change means us having to define the boundaries all the time.

Where there is no agreement between police and patrols, relationships can become strained and less than effective. This was reflected in comments by both police officers and patrol workers in the Perth suburbs of Fremantle and Midland where there were no memoranda-of-understanding in place (as in central Perth). In both sets of comments there appeared to be less understanding of each other's roles and more negative attitudes to each other.

Each of the three wardens we interviewed in Warburton reported working differently when encountering petrol sniffers. One reported actively confiscating petrol from users, but even he told us that was a dangerous strategy. More generally it appears that the wardens work cooperatively with the police – in identifying where sniffers are active and directing the police to them, and on community policing activities. A commissioned officer commented that:

Wardens shouldn't be a primary policing tool. Their place is to work on some of the community issues with the back up of the police. There should be no wardens scheme running if there's no police presence.

These comments were in part supported by those of the community advisor at Warburton and a Ministry of Justice officer who both commented that like night patrols – wardens were more effective where they had the support of police officers.

Summary

In this chapter we have canvassed a number of options in the domain of proactive policing. Some of these reflect what is often perceived, from a traditional perspective, as the 'core business' of police services; others are more closely tied to 'community policing'. Perhaps the most important, and potentially the most effective, role for police is in the area of supply reduction. Certainly, the policing of illicit supply of volatile substances – particularly petrol in remote areas – is an area in which only the police are empowered to act. However, they can also play a role in restricting the supply of volatile substances from retail outlets. Community groups have been active in this area, however, police involvement can support the actions of those groups and – due to the authority attached to their roles – officers can be effective in situations where community groups might not.

Two other elements in the domain of traditional policing that can be effective are routine patrolling and the mounting of special operations. The former are generally regarded as effective in preventing potentially problematic incidents from escalating and minimising harms associated

with volatile substance misuse. Operations can be effective in the short-term but they are resource intensive and the level of policing activity involved difficult to sustain. Nevertheless, they are a useful component of available police responses.

When we move towards the community policing end of the spectrum, an important – and reportedly successful – initiative has not been directed at volatile substance users in particular but at groups from which they are drawn. That is, 'at-risk' minors. While it was claimed that the Juvenile Action Group in Perth was established by re-directing existing resources, it is important to note that the initiative was under-taken in a relatively resource rich city and is unlikely that it could be replicated in small town or remote community.

In a number of communities, officers have been involved in various recreational activities for young people. Such involvement is important – particularly in those remote locations where there are few other community-based workers – as they provide young people with some alternatives to volatile substance misuse. It is important, however, that such activities are planned and coordinated with communities and not conducted in an *ad hoc* manner. Officers have also been involved in school and community-based education programs. Participation of officers was positively regarded but it is important to note that the literature shows that such education needs to be evidence-based and based on sound learning principles – otherwise it can be counter-productive. Importantly, police participation in both recreational and educational activities was seen as important in building links with communities and users.

Addressing volatile substance misuse is a responsibility that police services share with government and non-government agencies and with communities in general. All of these groups work with limited resources and to be optimally effective they need to coordinate their activities and to support each other; and this is best achieved when arrangements are formalised and all parties are clear about their respective roles and responsibilities. However, informal support, particularly of community leaders and elders, is also important and can empower them to take further action themselves.

Chapter eight: Summary and conclusions

Policing problems associated with volatile substance misuse

The responsibility for addressing volatile substance misuse is one shared between health and welfare agencies, the police and communities. Volatile substance misuse *per se* is not illegal (except in some Indigenous communities where it is prohibited under by-laws). Nevertheless, it is a policing issue for several reasons: first, police have a responsibility to protect the safety of the community, including individuals who are at risk such as volatile substance users; second, they have a responsibility to deal with offences that are directly or indirectly associated with volatile substance misuse; and, third, they have a responsibility to prevent crime, including crime that might be associated with volatile substance misuse. In addition, the supply of volatile substances for the purpose of inhalation, especially to minors, is an offence and officers have a responsibility to prosecute offenders. It is important to note, however, that policing is not 'the answer' to volatile substance misuse. It needs to be part of a broader strategy based on shared responsibilities.

Major reviews undertaken by the Parliament of Victoria Drugs and Crime Prevention Committee (2002) and the National Inhalant Abuse Task Force (2005) strongly recommended against the criminalisation of volatile substance misuse. Nevertheless, there are still occasional calls for the practice to be declared illegal from some politicians, police officers and community members. Certainly part of the reason for such calls arises from frustration at the apparent intractability of the problem. However, the negative effect of increasing the numbers of incarcerated Indigenous people is likely to far out-weight any deterrent effect of criminalisation.

Most of the issues arising from the inhalation of petrol are the same as those arising from the use of other volatile substances. The physiological and psychological effects of these substances are similar, the behaviour of intoxicated individuals is much the same, and the response of officers to intoxicated users is generally the same. The difference in the prevalence of petrol sniffing as opposed to other volatile substance misuse is largely related to availability. That is, in many remote communities, petrol is the only psychoactive substance readily available to young people (who make up the majority of users). In urban areas, there is a much wider range of volatile substances (and other drugs) available. Differences in police responses to petrol sniffing and other volatile substances are largely a function of the environments in which use takes place, rather than differences in the substances themselves and their effects.

There is a considerable amount of collective expertise in dealing with volatile substance misuse among those whom we interviewed for this project. However, no-one identified new strategies for addressing the problem. That is, there is no 'magic bullet' laying around undiscovered that will solve the problem of volatile substance misuse or the associated policing problems. *All of the suggestions made by both police officers and community workers emphasised doing what is currently done more efficiently and more effectively.*

Perspectives on the policing of volatile substance misuse

Most of the officers we interviewed demonstrated an understanding of the underlying issues, empathy towards users and a recognition of the importance of dealing with volatile substance misuse. However, there was some divergence from this, with a group of mostly junior officers having less understanding of the issues and being more likely to regard volatile substance misuse as not being a part of 'core policing business'. This can constitute a problem in itself, particularly

(but not exclusively) in small remote communities – where there are fewer people to address the problem and where it is desirable for the small number of officers available to engage fully with the issue.

Among the officers we interviewed, we found high levels of frustration at the lack of options available to them when dealing with intoxicated users and at the fact that they encounter many of the same users over-and-over again. They feel that, while volatile substance misuse is generally referred to as a health and welfare issue, police are left to deal with its manifestations.

It has often been stated that Indigenous communities are not homogeneous. However, it is a statement that bears repeating. Although we identified some commonalities of perspective, we also identified differences both between and within communities.

Volatile substance misuse is sometimes accepted out of despair and people are often reluctant to intervene in particular incidents or in relation to particular individuals. However, apart from users themselves and those profiting from supply – and despite some claims to the contrary – Indigenous people do not approve of volatile substance misuse and, in various communities, they have taken a range of initiatives to address it.

Generally, Indigenous community members are reluctant to intervene in particular incidents of volatile substance misuse – because of fear for their own safety, for cultural reasons relating to the autonomy of individuals and because of lack of support. Intervention in particular incidents is generally seen as being the role of the police (although, where they are functioning effectively, in some communities there is a preference for incidents to be handled by night patrols). Despite this general consensus about the need for police intervention, there are often different views about the extent and form such intervention should take. For this reason, it is important that, where feasible, police intervention should be negotiated with local community organisations.

We also identified a general acceptance within communities of proactive community-policing approaches such as participation in recreational and educational activities.

Policing responses to volatile substance misuse

Effective policing of volatile substance misuse – like all policing – is dependent upon positive relationships between police and community members and on acceptance by community members of the authority of police officers to intervene. This community-police relationship can be fraught with difficulties particularly in cross-cultural situations. However, it can be enhanced by adopting a positive policing style. This includes getting to know community members (including users) and treating them with respect. Such an approach was shown to result in beneficial outcomes in all aspects of police responses to volatile substance misuse.

Conversely, negative aspects of policing style – limited communication with other agencies and community members, failure to observe local etiquette, overtly negative attitudes to users and their behaviour, and 'heavy-handed policing' – can lead to less than optimal resolution of particular incidents. It can also inhibit the development and effectiveness of proactive policing strategies.

There are a number of inter-related staffing issues which impact upon the policing response to volatile substance misuse. First, is the obvious need for staffing levels to be adequate for the situation. Second, there is a premium on staff who display the positive policing style referred to above. Third, is the need for continuity of staffing. This latter issue was raised frequently by those we interviewed and it is a significant factor in developing and maintaining positive working relationships with community members and the staff of other agencies.

To enhance relationships with Indigenous communities, police services in each of the jurisdictions in which this study was conducted employ police liaison officers or community constables. The role they play in addressing volatile substance misuse varies. However, evidence from both the South Australian coronial enquiries (South Australia Coroner's Court 2002, 2005) and our interviews indicated that such personnel face considerable and conflicting community pressures, and that they should not be required to take the leading role in dealing with volatile substance misuse incidents. Rather, they should play a supporting role to sworn police officers in responding to such incidents and be used largely in a community policing role.

While some training is provided in all jurisdictions in which the study was conducted, police officers at various levels reported that they – or those they supervised – had insufficient training to deal with volatile substance misuse. They identified a need for training on the effects of volatile substances, the assessment of users and their needs, 'dos and don'ts' when dealing with intoxicated users, clarification of police powers, the background to the problem, and working with young people and Indigenous communities. Such training would be best provided 'in-service' and, where possible, should include a local component.

The issues we have highlighted in this section relate to policing in general not only to the policing of volatile substance misuse. In this regard it is important to state that: *good policing of volatile substance misuse is essentially good policing practice.*

Responding to intoxication

Key objectives in responding to incidents of volatile substance-related intoxication are to ensure the safety of users and other members of the public, the protection of property, and dealing with any offence that might have been committed.

The way in which officers engage with users is critical to the outcome of any intervention. Key principles that should guide the intervention of officers include:

- careful assessment and monitoring of any encounter or incident, including monitoring their own behaviour;
- putting first their own safety and that of their colleagues, users and members of the general public;
- treating users with empathy and respect;
- keeping users calm;
- maintaining effective communication;
- formulating a clear plan of action; and
- maintaining control and not acting in a manner that might exacerbate any incident.

We identified a range of options that are theoretically open to officers when responding to volatile substance misuse incidents. These included:

- confiscation of substances being used for inhalation;
- taking no action or moving users on;
- enlisting the aid of other agencies;
- non-police protective custody;
- police protective custody;
- charging users in circumstances where an offence had been committed; and
- referral of users to health and welfare agencies.

However, as indicated previously, in many locations not all of these options are practically available to officers and this constitutes a significant problem. Police officers have a responsibility to ensure the safety of the intoxicated volatile substance users they encounter or apprehend – either legislatively or in terms of a common law duty-of-care. However, as the case studies illustrate, officers are often severely limited in their ability to fulfil this responsibility by absence, or limited availability, of facilities in which users can be detained safely. This inadequacy of available facilities includes lack of appropriate or 'compliant' police cells – and the personnel to supervise those who have been apprehended. However, more important (as police custody should be the option of last resort for those intoxicated users who have not committed an offence) is the absence of facilities such as safe-houses and sobering-up shelters, especially those that cater for minors. As the case studies demonstrate, this inadequacy of facilities is found across remote, rural and urban locations. The paucity of options constrains the effectiveness of police interventions, can put users at risk, and creates considerable frustration among officers.

There has been some action to address this problem. Most notably – as a result of the coronial enquiries in South Australia (South Australia Coroner's Court 2002, 2005) and as part of initiatives to support the implementation of the Northern Territory Government's *Volatile Substance Abuse Prevention Act 2005* – resources have been committed by both these state/territory jurisdictions and by the Australian Government to the provision of treatment and other services. The impact of these is yet to be seen. However, similar action is required to address the paucity of services in other areas. While this may create budgetary concerns for governments, it must be recognised that the failure to address this problem hampers the ability of police to undertake a major aspect of their role in this area – that is, to deal effectively with intoxicated volatile substance users.

As we have indicated, there is no state or territory legislation which defines volatile substance misuse as an offence. However, it is an offence under community by-laws in the Ngaanyatjarra and Anangu Pitjantjatjara Lands (and communities in the Northern Territory may now have this option open to them under provisions of the *Volatile Substance Abuse Prevention Act 2005* which allow them to develop local 'management plans'). In the Ngaanyatjarra and Anangu Pitjantjatjara Lands these by-laws were introduced at the instigation of Indigenous people themselves. Generally, we found that – although some individuals might take issue with particular applications of them – there was continuing support for the by-laws.

Like any legislation, the effectiveness of petrol sniffing by-laws is dependent upon consistent enforcement and appropriate sanctions. Dissatisfaction with the by-laws appeared largely to be a consequence of the limited range of options to deal with users once they had been apprehended and the limited range of sentencing options (including sentencing to treatment). Differences in these factors, including the absence of a permanent police presence and a reliance on Community Constables is behind a higher level of dissatisfaction with the operation of by-laws in the Anangu Pitjantjatjara Lands compared to the Ngaanyatjarra Lands.

There is no evidence that the by-laws *per se* are ineffective – rather it is that structures are not in place to make them more effective. The by-laws are an important expression of community concern to address the problem of volatile substance misuse and this should be supported.

Proactive policing

The major proactive role for police is that of policing the supply of volatile substances. As we discussed in Chapter 7, there are two aspects to this: policing the illicit supply of volatile substances; and working with retailers and other community groups to restrict the availability of volatile substances through retail outlets. Both strategies were regarded by police officers and community members as being beneficial – although officers noted the difficulties of apprehending suppliers.

Other key proactive strategies included routine patrolling and the use of targeted operations. The former were regarded as effective in increasing safety for communities and the users themselves, and can prevent some crime that might be associated with volatile substance misuse. However, care needs to be taken to not victimise young people or infringe upon their rights to associate and to access public space. Targeted operations were also shown to be effective in the short-term but were resource intensive and the levels of substance misuse and other crime increased when the operations ceased.

Proactive strategies in which police have been involved, but for which they do not have prime responsibility, include recreational and educational activities. These are activities that have been evaluated (although not specifically when conducted by police officers) and have been shown to be effective (d'Abbs & MacLean 2000). However, officers conducting substance misuse education need to ensure that lessons are evidence-based and based on sound educational practice – otherwise they can be counter-productive. Ideally, officers conducting educational activities should have some form of training. Importantly, participation by officers in these kind of activities has positive benefits in terms of building relationships within communities.

Other proactive strategies include coordination of police responses with those of other organisations, cooperation with and support of other agencies, and providing support to community groups. These activities can have positive benefits but it is important that, wherever possible, relationships should be formalised and that there are clear understandings of mutual expectations.

Evaluations of policing responses

As shown in the literature review in Chapter 3, there have been few evaluations of policing strategies targeting volatile substance misuse. Those that deal with reactive strategies focused mainly on approaches to facilitate referrals and/or to make greater use of available options. The main lesson from these evaluations – as it was from our interviews with police officers and representatives of other agencies – was that cooperation between agencies was most effective when roles were clearly defined and arrangements were formalised, for example in the form of inter-agency protocols and/or memoranda of understanding. While there were more of them, evaluations of proactive strategies were also limited in scope. They do, however, provide some limited support for the wider range of options described in this report. Nevertheless, these published evaluations provide little overall guidance for policing practice. There is clearly a need for systematic work to be conducted in this area. In the meantime, the best guides for effective policing of volatile substance misuse are the observations of police officers and representative of Indigenous community organisations working 'at the coal face'.

Conclusion

In the words of one of the police officers we interviewed:

There's no easy solution (to the problem of volatile substance misuse).

The higher prevalence of volatile substance misuse (and other drug misuse and health problems) observed among Indigenous Australians is a consequence of a complex inter-play of historical, social and economic factors, and it will not be solved until the problems stemming from these factors are more effectively addressed (Gray & Siggers 2005b). This is clearly beyond the scope of policing. Nevertheless, police – in partnership with other agencies and Indigenous communities – have an important role to play.

In this report we have outlined the range of policing interventions currently employed to address volatile substance misuse. There is little in the way of formal evaluation of such interventions. However, reports by police officers and community members indicate that – although it is not 'the solution' to the problem – policing can make an important contribution to the protection of individual users, the communities in which users live and the wider society. In doing so, it must be remembered that – just as there is 'no easy solution' to the problems associated with volatile substance misuse – there is 'no one solution'. What is required is a range of strategies.

Despite the collective experience of those working in the area, no one we interviewed suggested any radical new approach to the problem – no 'magic bullet'. Rather, the overall tenor of what we discovered was that there is an urgent need to improve the effectiveness of what is currently being done. This includes strengthening relationships and partnerships between key stakeholders – particularly between Indigenous community members and police – and the provision of mutual support. It also involves improved training for police officers to enable them to more confidently deal with acute incidents, but also to work more effectively with community members. Finally, a greater commitment from the Australian and state/territory governments is required to provide a wider range of appropriate and accessible support services – without which police responses to volatile substance misuse are severely constrained.

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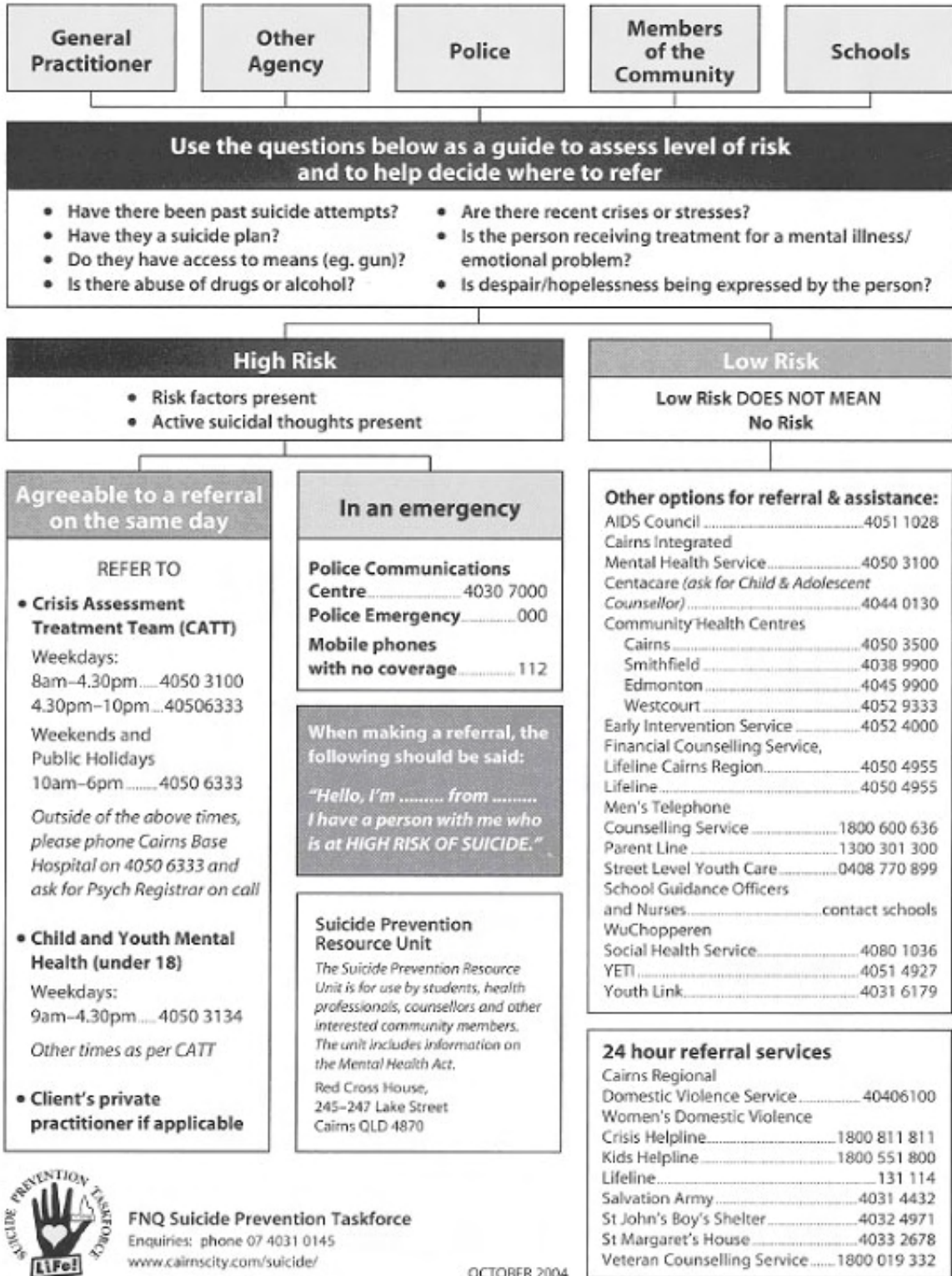
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Appendix: The Cairns Community flow chart

The Cairns Community Flow Chart

A guide for individuals working with people at risk of self harm and suicide



Chroming/Sniffing

A guide for people involved with youth using volatile substances

How can you tell if someone is sniffing?

Staying out and/or skipping school combined with:

- Strong chemical smells on clothes
- Appearing to be drunk
- Paint on clothes or body
- Big mood swings
- Losing their appetite
- Headaches

What to do if someone is really out of it or passed out

- Try and get the person to relax and stay calm (*getting stressed or running away can be fatal*)
- Remove the container they have been using and get them to breathe fresh air
- If unconscious:
 - Call ambulance (DIAL 000) immediately – DO NOT LEAVE THE PERSON ALONE
 - Lay them on their side to prevent breathing in vomit
- Contact one of the agencies listed below for follow-up

How to decide where to go for help

Known to be using	Danger to others and/or self	Danger to self	Suicide Risk
<p>AGENCIES For information, counselling and/or support for users, families, community groups and service providers (<i>see list below</i>).</p>	<ul style="list-style-type: none"> • Aggressive to others • Damaging property • Danger of falling off buildings • Walking into traffic <p>POLICE 000 or 4030 7000 (<i>For mobile phones with no coverage – dial 112</i>)</p>	<ul style="list-style-type: none"> • Seeing and hearing things that others don't • Fitting • Unconscious <p>AMBULANCE 000 (<i>For mobile phones with no coverage – dial 112</i>)</p>	<ul style="list-style-type: none"> • Risk factors present (<i>see flowchart overleaf</i>) • Talking about wanting to die <p>CRISIS ASSESSMENT TREATMENT TEAM (<i>see overleaf</i>)</p>

Agencies

ATODS.....40503900	Lifeline.....4050 4955
Cairns Inhalant Action Group.....4080 1036	School Guidance Officers and Nurses.....contact schools
Child & Youth Mental Health.....4050 3134	St Johns Crisis Accommodation & Support Service (males).....4032 4971
Community Health Centres	St Margarets Crisis Accommodation (females).....4033 2678
Cairns.....4050 3500	WuChopperen Social Health Service.....4080 1036
Smithfield.....4038 9900	24 hour drug & alcohol information & counselling.....FREECALL 1800 177 833
Edmonton.....4045 9900	
Westcourt.....4052 9333	
Early Intervention Service.....4052 4000	