



Drug and Alcohol Interagency Strategic Framework for Western Australia 2011-2015

Volatile Substance Use Support Plan 2012-2015



Government of **Western Australia**
Drug and Alcohol Office

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> Volatile Substance Use Support Plan 2012-2015

The *Volatile Substance Use Support Plan 2012-2015* (the VSU Support Plan) summarises the key strategic areas and supporting initiatives that will be pursued over the coming years to prevent and respond to volatile substance use (VSU).

The VSU Support Plan is a supporting document to the *Drug and Alcohol Interagency Strategic Framework for Western Australia 2011-2015* (the Interagency Strategic Framework), which seeks to prevent and reduce the adverse impacts of alcohol and other drugs (AOD) in the Western Australian community. There are other support plans for the following priority areas:

- *Alcohol Support Plan 2012-2015.*
- *Illicit Drug Support Plan 2012-2015.*
- *Capacity Building, Coordination and Monitoring Support Plan 2012-2015.*

The VSU Support Plan's initiatives are in support of the Interagency Strategic Framework's strategic areas of:

- Focusing on prevention.
- Intervening before problems become entrenched.
- Effective law enforcement approaches.
- Effective treatment and support services.
- Strategic coordination and capacity building.

A copy of the Interagency Strategic Framework is available on the Drug and Alcohol Office website: www.dao.health.wa.gov.au

The VSU Support Plan is also underpinned by the *Strong Spirit Strong Mind - Aboriginal Drug and Alcohol Framework for Western Australia 2011-2015*, that was developed to provide guidance to key stakeholders towards delivering culturally secure programs and supporting Aboriginal ways of working in order to strengthen efforts to prevent and reduce AOD related harm in Aboriginal communities.





> The aim

The primary aim of the VSU Support Plan is to prevent and/or reduce volatile substance use, and protect the health and welfare of volatile substance users and their families.



> Coordination and collaboration

The VSU Support Plan provides a framework for a collaborative, inter-sectoral response to preventing and reducing VSU related harm. It has been developed as a guide for Western Australian government departments to address VSU issues at a state, regional and local community level. The VSU Support Plan summarises the key strategic areas and initiatives that will be pursued over the coming years to prevent and respond to VSU.

Responsibility for action exists across a broad range of government sectors including health, law enforcement, criminal justice, social welfare, recreation and education. The community-based sector, business and industry, the media, research institutions and local communities affected by VSU also have a role in action to address VSU as it relates to their areas of social and community life.

As the lead State Government agency responsible for AOD strategies and services in Western Australia, the Drug

and Alcohol Office (DAO) aims to provide guidance and support to an integrated approach to VSU across the state.

DAO also supports broader coordination efforts and strategies to reduce VSU related problems at the national, state and local level, including those led by the Commonwealth Departments of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) and Health and Ageing (DoHA). For example, DAO, in conjunction with other State and non-government agencies, work with FaHCSIA to implement the Commonwealth Government's Petrol Sniffing Strategy in the Goldfields and East Kimberley regions.

The VSU Support Plan represents the commitment by State Government departments represented on the Drug and Alcohol Strategic Senior Officers' Group (DASSOG) to respond effectively to VSU.



> Regional and local approaches

DAO, in conjunction with FaHCSIA, will continue to support a network of regional VSU coordination groups in high priority areas working collaboratively to implement strategies at a regional and local level.

The Goldfields, East Kimberley and East Pilbara VSU coordination groups are led by FaHCSIA and consist of a range of key regional stakeholders from relevant Commonwealth, State, and local government, non-government agencies and Aboriginal Community Controlled Organisations. Regional VSU coordination groups have been established outside of the Commonwealth Government's Petrol Sniffing Strategy zone. Leadership of these groups varies and is determined by the capacity and expertise of the local stakeholders within each group.

It is vital that regional VSU coordination groups enjoy the sponsorship and support of interagency regional managers groups and networks to ensure the successful implementation of effective regional and local strategies.

The regional VSU coordination groups will work closely with local communities experiencing ongoing VSU issues to develop local community strategies. These strategies should be evidence based, informed by experience and consistent with the VSU Support Plan. Priorities will vary from community to community depending on local needs and issues.





> Volatile substance use

The term volatile substance use (VSU) refers to the deliberate inhalation of substances, which give off a vapour or gas at room temperature, for their intoxicating effects.

Products containing volatile substances known to be used in Western Australia include glues, petrol, toluene and other solvents; spray paints and other aerosol products; butane, nitrous oxide and amyl nitrite.

Prevalence:

VSU occurs across pockets of metropolitan, regional and remote communities, and includes both non-Aboriginal and Aboriginal people. The extent of volatile substance use in Western Australia is difficult to determine, however it has been identified as an issue of concern in some communities in the Kimberley, the Goldfields (including the Ngaanyatjarra Lands), the Pilbara, the Midwest and some parts of metropolitan Perth.

Issues associated with VSU differ from other kinds of substances by virtue of the legality of the products, which are designed for common, everyday use; the low cost and easy accessibility of volatile substances; and the public nature of use (often in parks and other public areas).

VSU tends to be episodic, cyclical and highly localised in nature. Use of volatile substances is mostly characterised by young users (many are aged 12-16 years), and is often experimental or opportunistic in nature.

Experimental use can occur as a 'fad', particularly in urban settings. The majority of young people tend to experiment once or twice and generally do not continue to use.

However, harm can occur with just one occasion of use. Dependent use is less common and is likely to be underpinned by other family, social and psychological problems. Chronic, long term use is also seen in adults.

In regional and remote settings, most VSU appears to be opportunistic in nature, based on availability and movement of users between communities.

Some VSU in Aboriginal communities relates to a range of underlying historic, cultural and socio-economic factors. VSU cannot be dealt with in isolation from these other social determinants. However, action addressing VSU should not be constrained due to a lack of progress on these determinants.

For those families and communities where VSU occurs either on a cyclical or on-going basis the impact is significant. In remote communities VSU can have a disproportionate effect, not only on the physical health of individual users but also on the social and developmental wellbeing of the whole community.



> Volatile substance use

Prevalence (continued):

Statistical data on the prevalence of volatile substance use is known to be inadequate due to difficulties capturing VSU related data. As VSU is not a criminal offence, presentations to the criminal justice system that may be related to VSU are not recorded as such. Standard AOD prevalence data collection surveys also experience many limitations capturing VSU data. For example, household surveys do not capture the homeless, those detained in a correctional facility, or those in special accommodation, and only small numbers of those in remote locations, and those with English as a second language. School student surveys are representative of only those young persons engaged within the school system.

In 2008, 2660 responses for Western Australian school students in Years 7 to 12¹ indicated that:

- 11.0% reported having used inhalants in the year prior to survey.
- 6.2% reported having used inhalants in the month prior to survey.

- 3.9% reported having used inhalants in the week prior to survey.
- Of those students who had deliberately inhaled substances in the past year, substances used were petrol (63.6%), glue (40.2%) and paint (38.1%).

The Western Australian results of the National Drug Strategy Household Survey² undertaken in 2010 indicate:

- Of respondents aged 14 and older, 0.4% had used inhalants in the previous year.
- Of those who had used in the past year, 57.8% obtained the inhalant from a shop and 31.2% from a friend or acquaintance.
- The average age of initiation was 17.2 years.

The Alcohol and Drug Information Service (ADIS) and the Parent Drug Information Service (PDIS) (confidential helpline services provided by the Drug and Alcohol Office) received an average of 58 VSU related calls per year during 2009 to 2011. VSU related calls to ADIS and PDIS made up approximately 0.3 per cent of total calls received over this three year period.

1. Haynes R., Kalic R., Griffiths P., McGregor C. & Gunnell A. (2010) *Australian School Student Alcohol and Drug Survey: Illicit drug report 2008 - Western Australia results*. Drug and Alcohol Office Surveillance Report: Number 02. Perth: Drug and Alcohol Office.

2. Australian Institute of Health and Welfare (2011) *2010 National Drug Strategy Household Survey (NDSHS) report*. Drug statistics series no. 25. Cat. no. PHE 145. Canberra: AIHW.



> Volatile substance use

Harms:

VSU can contribute to accidents, antisocial behaviours and death. Harms associated with VSU can result from both short and long-term use. It is important to note that significant harm can occur from a single occasion of use.

- Short-term harms can include uncoordinated movements, disorientation/confusion, hallucinations and, on occasions, unconsciousness from overdose. Injury or sudden death can occur from direct toxic effects, suffocation, burns/explosions or accidents whilst intoxicated.
- Long-term harms can include neurological and cognitive impairment; damage to heart, lungs, kidneys and liver; seizures, muscle weakness, and a range of social and psychological developmental problems. Brain damage and physical effects of long-term use can pose significant health management problems, particularly in areas where access to support services is limited.

- Dependent use is rare, however in some individuals chronic, dependent VSU has led to significant health and social problems.
- The anti-social behaviour often associated with VSU poses a high risk to families, communities and the individual.

Since 2006, the total number of volatile substance related hospitalisations in Western Australia increased from 43 to 74 by 2010.³ During the 5 year period, the male rate of volatile substance hospitalisations increased significantly with an annual percentage change of 30.1 per cent, while the female rate of volatile substance related hospitalisations did not change significantly over the same period.⁴

3. Epidemiology Branch & Cooperative Research Centre for Spatial Information (2012) Generated using data from the WA Hospital Morbidity Data Collection. Proportion of drug related hospitalisations identified by aetiological fractions. Accessed Tuesday, 5 June 2012 by Rebecca Hood (Drug and Alcohol Office).

4. Ibid.



> Guiding principles

- VSU is a complex problem that requires a coordinated, multifaceted response comprised of a range of complementary interventions, including those aimed at:
 - supply reduction
 - demand reduction
 - harm reduction
- Wherever possible, strategies to address VSU should be informed by evidence from rigorous research, critical evaluation, practitioner and community expertise, and the needs and preferences of the individual client.
- Prevention strategies targeting individuals, families and communities are critical to reducing the harms associated with VSU.
- Effective responses to VSU require a collaborative approach between a range of stakeholders locally, statewide and nationally.
- The support and involvement of local communities in any response is essential.
- Strategies that address VSU issues should take broader AOD interventions into consideration.
- Addressing VSU within a community is best implemented within the context of a comprehensive, holistic approach to health that includes physical, spiritual, cultural, emotional and social wellbeing, community development and capacity building.
- In circumstances where prevalence is low and knowledge among young people is not widespread, discretion must underlie action relating to VSU in order that the problem is not exacerbated or spread.
- Strategies are best applied on a regional basis to avoid displacement of the issue from one community to another.
- When addressing VSU in Aboriginal communities, responses must be culturally secure to address the needs of the community in the planning, development and implementation of appropriate strategies.
- Vigilance must be maintained to protect the confidentiality and privacy rights of volatile substance users and their families.



> Summary of key outcomes & initiatives

The summary table below outlines the outcomes and initiatives as they relate to the key strategic areas of the VSU Support Plan. These strategic areas align to the Interagency Strategic Framework and include focusing on prevention, intervening before problems become entrenched, effective law enforcement approaches, effective treatment and support services and strategic coordination and capacity building. The key initiatives will be undertaken across DASSOG agencies to meet the outcomes outlined under the Interagency Strategic Framework.

| Key Outcomes | Key Initiatives |
|--|--|
| <i>Focusing on prevention</i> | |
| <ul style="list-style-type: none">• Increased resilience in individuals, families and communities through education, support and initiatives to prevent VSU.• Reduced availability of volatile substances with the potential to be misused.• Responsible media reporting about VSU through engagement with, and education of, the media. | <ul style="list-style-type: none">• Work closely with local and regional communities to identify appropriate prevention and early intervention models/ activities.• Support existing effective strategies and programs targeting early childhood intervention and strengthening families.• Work collaboratively across agencies and communities to provide a range of activities and support programs to engage young people and families in positive healthy lifestyle choices and engagement in employment, education and training.• Ensure the availability of accurate, targeted and appropriate* VSU information for individuals, families, schools and communities. <p>(*N.B. evidence suggests that providing young people with information about inhalants can have the undesirable effect of stimulating interest in the use of these substances.)</p> |



> Summary of key outcomes & initiatives

| Key Outcomes | Key Initiatives |
|---|---|
| <i>Focusing on prevention (continued)</i> | |
| | <ul style="list-style-type: none">• Investigate the development of consensus-based school VSU guidelines to assist in the prevention and early intervention of VSU in young people.• Engage with retailers and industry to limit supply of volatile substances through understanding the harms associated with VSU.• Disseminate information kits for both retailers and industry and work with them to encourage and support adherence to the recognised code of conduct.• Improve systems to monitor compliance, and report non-compliance, with the code of conduct.• Support other supply control measures, including the rollout of low aromatic fuel to Western Australian communities and national investigation of the possible modification of butane aerosol products and consideration of alternative non-intoxicating products.• Engage media organisations, through provision of accurate information and education, and encourage adherence to media guidelines on the responsible reporting of VSU. |



> Summary of key outcomes & initiatives

| Key Outcomes | Key Initiatives |
|---|--|
| <i>Intervening before problems become entrenched</i> | |
| <ul style="list-style-type: none">• An increase in early intervention through coordinated efforts of key stakeholders.• Improved capacity for Individuals, families and communities to respond to VSU.• Increased range of diversionary activities for young people at risk of VSU.• Improved skills and capacity of health and human services workforce to assist early intervention in VSU issues. | <ul style="list-style-type: none">• Work collaboratively with all stakeholders to establish and support regional coordination groups and contribute to regional strategies.• Develop and promote regional incident reporting and response protocols for responding to VSU incidents and gain commitment from communities and stakeholders to implement.• Improve monitoring for the early detection of VSU incidents through the use of VSU incident response protocols.• Develop and disseminate early intervention information and resources, such as a VSU website and CD ROM.• Work with schools to develop targeted school-based responses, as appropriate.• Provide training to a range of health and human services professionals to increase the capacity to respond effectively to VSU issues.• Enlist regional coordination groups to facilitate local level action, such as the development of local VSU management plans.• Support the development of a diverse range of diversionary programs to engage young people in positive, alternative activities.• Support the development of supply reduction policies in settings where people at high risk of VSU, or with a history of VSU, are involved (e.g. prisons and detention centres, residential accommodation). |



> Summary of key outcomes & initiatives

| Key Outcomes | Key Initiatives |
|--|--|
| <i>Effective law enforcement approaches</i> | |
| <ul style="list-style-type: none">• Improved awareness of existing legislation to assist in dealing with VSU.• Investigation of effectiveness of legislative options to assist in dealing with VSU.• Evidence-based legislation to support supply, demand and harm reduction strategies. | <ul style="list-style-type: none">• Emphasise the current legislation available to relevant stakeholders to manage volatile substance use.• Investigate ways to improve the application of the Protective Custody Act 2000 in partnership with relevant agencies.• Continue to enforce the Western Australian Criminal Code (s.206) to reduce access to volatile substances when there is sufficient credible evidence to do so.• Continue to investigate legislative options to address volatile substance supply, demand and harm reduction.• Continue to examine the evidence surrounding treatment options, including compulsory treatment, and the effectiveness of legislation in Western Australia and other jurisdictions.• Support the Commonwealth Government to explore other legislative options, such as reducing access to volatile substances through product modification.• Continue to conduct operations targeting VSU (as well as alcohol and other drugs) in metropolitan, regional and remote areas of Western Australia. |



> Summary of key outcomes & initiatives

| Key Outcomes | Key Initiatives |
|--|---|
| <i>Effective treatment and support services</i> | |
| <ul style="list-style-type: none">• Effective and innovative service responses to VSU.• Improved ability of services to respond to VSU issues.• Strengthened treatment and support options for users.• Improved access to treatment and support.• Effective and innovative service responses to engage hard to reach groups including young people and volatile substance users. | <ul style="list-style-type: none">• Foster proactive approaches to working with VSU clients.• Provide training to the staff of a broad range of organisations that provide services to communities and people with VSU issues.• Examine and develop options for the treatment of young people with high needs, particularly in regional and remote areas, that also improve the protective factors within the community.• Continue to support and enhance access to treatment approaches currently used in Western Australia such as individual and group counselling, VSU withdrawal management, and residential treatment and rehabilitation services.• Investigate innovative treatment approaches to support chronic users.• Encourage a case management approach between agencies assisting clients with VSU issues.• Provide harm reduction information to a broad range of health and human service providers, volatile substance users and their families.• Explore innovations in service responses for expanding reach and engagement with at-risk and priority population groups. |



> Summary of key outcomes & initiatives

| Key Outcomes | Key Initiatives |
|---|--|
| <i>Strategic coordination and capacity building</i> | |
| <ul style="list-style-type: none">• Improved coordination across government and non-government sectors in the management of VSU issues.• Improved capacity of the workforce, services and communities to respond appropriately to VSU.• Research and monitoring of use, prevalence and trends to inform effective responses to VSU. | <ul style="list-style-type: none">• Where appropriate, utilise across government and sector groups to develop and implement effective (including culturally secure) responses to emerging VSU issues.• Further the working relationship between the AOD sector and other key sectors (including mental health, corrections, child protection and housing) to provide improved and coordinated services for people with VSU and other co-occurring problems.• Build local and regional partnerships through supporting regional VSU coordination groups and local responses.• Provide comprehensive workforce development for service providers to build expertise, capacity, cultural competence and a sustainable workforce in relation to VSU.• Encourage engagement and partnership with communities, particularly those at high risk, to build their capacity and involvement in reducing VSU.• Collect, verify and analyse data to monitor use and trends in relation to VSU, and improve incident reporting and monitoring mechanisms.• Advocate at a national level to increase the body of research relating to VSU.• Utilise the Drug and Alcohol Senior Officers' Group to coordinate VSU responses at a whole-of-government level. |



> Working together

The VSU Support Plan represents the commitment of State Government departments represented on the Drug and Alcohol Strategic Senior Officers' Group (DASSOG) and key partners to prevent and respond effectively to VSU.

Members of DASSOG consist of high-level representatives from the following departments:

- Department of the Attorney General.
- Department for Child Protection.
- Department for Communities.
- Department of Corrective Services.
- Department of Education.
- Department of Health.
- Department of Housing.
- Department of Indigenous Affairs.
- Department of Local Government (including Office of Multicultural Interests).

- Department of Racing, Gaming and Liquor.
- Drug and Alcohol Office.
- Mental Health Commission.
- Office of Road Safety.
- Western Australia Police (including Office of Crime Prevention).

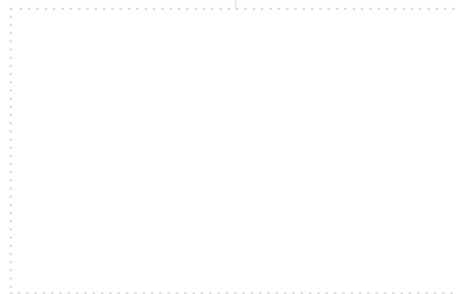
Key partners in implementing actions to prevent and respond to VSU also include:

- Department of Sport and Recreation.
- Department of Training and Workforce Development.
- Commonwealth Government agencies, particularly FaHCSIA and DoHA.
- Local Governments.
- Non-government AOD and Community Controlled Organisations.
- Retail Traders Association.
- Industry.



> Monitoring, evaluation and review

Progress towards achieving the strategic priorities of the Volatile Substance Use Support Plan will be monitored as part of the annual reporting processes of the *Drug and Alcohol Interagency Strategic Framework for Western Australia 2011-2015*. The report will include outcome-based key performance indicators and other quantitative measures. Longitudinal reporting will also be collated at the end of the four-year implementation period.



> Who can help?

If you are worried about your volatile substance use or use by family or friends, contact the Alcohol and Drug Information Service (ADIS) Telephone: (08) 9442 5000, Country toll-free: 1800 198 024 or email: adis@health.wa.gov.au, or the Parent Drug Information Service (PDIS) Telephone: (08) 9442 5050, Country toll-free: 1800 653 203 or email: pdis@health.wa.gov.au

If you require more information or support regarding how communities can address volatile substance use, call the Coordinator, Volatile Substances Program, Drug and Alcohol Office on (08) 9370 0333.





> Notes



> Notes



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