



**The Australian Indigenous Doctors' Association**

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**SUBMISSION TO THE SENATE COMMUNITY AFFAIRS REFERENCE  
COMMITTEE INQUIRY INTO PETROL SNIFFING IN REMOTE  
ABORIGINAL COMMUNITIES**

**Introduction**

The Australian Indigenous Doctors' Association (AIDA) is a not for profit organisation striving for excellence in Aboriginal and Torres Strait Islander health, wellbeing and life outcomes through leadership, partnership and scholarship and in the spirit of cultural integrity. As the sole national body for Aboriginal and Torres Strait Islander doctors and medical students, AIDA is deeply concerned with the health and wellbeing of our people. We embrace the philosophy that *Life is Health is Life* including the social, emotional, spiritual and cultural wellbeing of the whole community.

AIDA strongly believes that all levels of Government – Australian, State/Territory and local - need to work together with Aboriginal and Torres Strait Islander communities to respond in a positive, coordinated and holistic way to the continuing poor state of our health and the whole-of-life needs of our people.

This includes working to achieve equitable access to, and delivery of health, education, employment, infrastructure and other essential services. Shared Responsibility and Regional Partnership agreements are a primary opportunity and mechanism to mobilise this approach, if implemented in a way that respects the self determination of Aboriginal and Torres Strait Islander communities.

**Petrol sniffing**

The issue of petrol sniffing must also be addressed from an holistic perspective. Just as the physical, psychological, economic and societal impacts of petrol sniffing reverberate through families, communities and regions, the causes of petrol sniffing extend well beyond the circumstances of the individual.

As noted in the joint submission by the Australian Government Department of Health and Ageing (DoHA) and the Department of Immigration and Multicultural and Indigenous Affairs (DIMIA) 'petrol sniffing is just one of a range of 'risk' behaviours ...[and] is the product of a complex mix of interrelated causes and contextual factors including dispossession and trans-generational grief, cultural breakdown, individual psycho-social factors, poverty and trauma.'<sup>i</sup>

Dr Noel Hayman, AIDA Secretary and Director of Inala Indigenous Health Service, Queensland, recently commented in the *Of Substance* magazine that,

*...the sensation of euphoria and excitement, the feeling of numbness, help users forget the daily troubles of growing up in dysfunctional circumstances'<sup>ii</sup>*

While petrol sniffing can be devastating for those affected, at a population level the impact of petrol sniffing must be considered relative to the significant burden of disease attributed to factors such as alcohol and smoking. Evidence also suggests that measures aimed only at combating petrol sniffing are not sufficient of themselves and there is a need to address the root causes of petrol sniffing if any lasting impact is to be achieved.<sup>iii</sup>

This indicates that strategies to combat petrol sniffing should be located within wider, whole-of-government initiatives to improve the health, education, and socioeconomic status of Aboriginal and Torres Strait Islander people and communities. It also indicates that a harm minimisation approach is most effective, including supply, demand and harm reduction. This includes policing, health, education, employment, recreational, rehabilitation, cultural and outstation programs, as well as the widespread implementation of *Opal* fuel.

## **Petrol Sniffing Strategies**

AIDA supports the Australian Government's *Eight Point Regional Strategy for Central Australia* and believes it is a comprehensive strategy that works towards longer term, holistic solutions, while also addressing the immediate petrol sniffing situation. The Strategy comprises of:

1. Implement a consistent legal framework across the region
2. Provide an appropriate level of policing
3. Implement regional roll-out of Opal fuel
4. Facilitate alternative activities for people in the region
5. Provide treatment and respite facilities
6. Implement communication and education strategies
7. Strengthen and support communities
8. Implement an evaluation strategy

The Department of Health and Ageing and the Office of Indigenous Policy Coordination state that the Strategy will be implemented at a regional and local level and 'will take

account of the different circumstances and needs of the communities in the region and will therefore need to be implemented on a community-by-community basis.<sup>iv</sup>

## Summary

In summary, AIDA strongly recommends that specific, comprehensive and sustainable action is required to address petrol sniffing in Aboriginal and Torres Strait Islander communities.

This action requires direct and tangible commitment and effort by governments as well as individuals, families and communities themselves. No one party can achieve the results on their own. Policies, partnerships and services are necessary along the entire age and care spectrum in a way that builds individual, family and community strength, choice and prospects for a better future.

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<sup>i</sup> Joint submission by the *Australian Government Department of Health and Ageing* and the *Department of Immigration and Multicultural and Indigenous Affairs* to the Senate Community Affairs References Committee Inquiry into Petrol Sniffing in Remote Aboriginal Communities.pp,21.

<sup>ii</sup> Hayman, Noel, 2006, 'Petrol Sniffing in Aboriginal Communities' Guest Editorial, *Of Substance* magazine, Vol. 4 No.1, January 2006.

<sup>iii</sup> Op Cit, *Australian Government Department of Health and Ageing* and the *Department of Immigration and Multicultural and Indigenous Affairs* References.pp,11.

<sup>iv</sup> Ibid, p,5.