

## CHAPTER 3

### FINDING THE SOLUTION

*I saw program after program start and then abruptly stop because there was no more funding left, there were no more staff and the community eventually lost interest in trying to keep programs going. They were getting stressed and sick themselves. No-one was there to help.<sup>1</sup>*

#### Introduction

3.1 Governments, non-government organisations and Indigenous communities themselves have sought to put in place interventions to stem the tide of young people sniffing petrol. In some Indigenous communities the incidence of petrol sniffing has declined.

3.2 However, despite the inordinate number of inquiries and the flood of recommendations that have been made, Indigenous communities continue to struggle to control petrol sniffing and expressed frustration at the lack of progress:

The feeling in the Bush is that there have been enough enquiries, meetings, workshops, seminars, reports and committees on sniffing - some real action is required in 2005.<sup>2</sup>

ADCA [Alcohol and other Drugs Council of Australia] supports an inquiry into this matter, however is conscious that despite numerous reports & inquiries in the past calling for a Government response to petrol sniffing (d'Abbs & Brady 2004), there has yet to be a sustained approach, creating much frustration within effected communities. The Royal Commission into Aboriginal Deaths in Custody (RCIADIC), numerous coronial inquiries & the NT Inquiry into Petrol Sniffing in Remote Northern Territory Communities are some examples that have demonstrated clear recommendations, many of which that have not been implemented to the satisfaction of communities concerned.<sup>3</sup>

3.3 Other witnesses pointed to the lack of coordination of programs and lack of understanding of the needs of Indigenous communities:

Just look at all the non-indigenous people engaged in the field of indigenous support. You have the ICC, ILC, NLC, IBA, ABTA, NT Govt, Centrelink, and on and on it goes. Lots of non-indigenous people on fat salaries in fancy office buildings and brand new vehicles. They come out here in their droves. They fill out forms, write reports, express all sorts of sympathetic attitudes, then go back to their neat offices incapable of

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1 *Committee Hansard* 16.5.06, p.2 (Ms N Tur).

2 *Submission* 16, p.2 (Mr D and Ms M Hewitt).

3 *Submission* 17, p.2 (Alcohol and other Drugs Council of Australia).

actually making a difference. I see it every week. Millions and millions of dollars spent on bureaucracy, with very little actually reaching this community.<sup>4</sup>

That is why I keep returning to that lack of commitment, that lack of embedded support and skill in communities. There are no more excuses that can be made for the inaction, spin and deceit about what it is really like in these communities and for how little action governments have really taken over the years.<sup>5</sup>

The service providers and the government are running around there. If you get a bunch of marbles and chuck them on a table, what happens to them? They scatter. This is exactly how the government and the service providers are running around out there. They are putting their little programs in their pockets and not working together. They should put their heads together and work as one. They should establish an office in Umuwa or somewhere, where every service provider can meet to talk and run programs. We have to do a trial in one of the communities and see how that goes, as well as still doing those other programs.<sup>6</sup>

## **Comprehensive approach**

3.4 It is clear that short-term solutions will not be found to prevent petrol sniffing in Indigenous communities. As highlighted in the previous chapter, the causes of petrol sniffing are diverse and go to the very nature of life in remote communities. The programs to overcome the problem need to be comprehensive and sustained. Without this, petrol sniffers will either move to areas where they can obtain sniffable petrol or move onto another form of substance abuse. This has been highlighted in over twenty years of reports and inquiries.

3.5 Witnesses argued that neither an approach which is based fully on the delivery of services by government nor an approach which relies on often small Indigenous communities to deliver a range of services to address a complex issue will be successful. The need for a holistic approach was advocated. It was also argued that there is no 'quick fix' and intervention programs are likely to fail if they are too narrow in their focus and provided without appropriate supports. Mrs Ngitji Ngitji Mona Kennedy Tur commented:

I believe change can be effective only if a holistic approach is taken – that is, that the government, with the APY community, consider all social indicators, such as health, housing, education, employment and economic status, which impact on why Anangu might take up petrol sniffing. We do not want to lose our children and family to this poison. We need to understand the long-term impacts of petrol sniffing on generations of

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4 *Submission 23*, pp.1-2 (Mr A Koeppen).

5 *Committee Hansard 16.5.06*, p.69 (Ms K Reynolds).

6 *Committee Hansard 16.5.06*, p.40 (Mr D Colson – Turkey Bore Community).

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Anangu families. Anangu have a strong culture and we want to continue to keep our culture strong. The government need to take this seriously.<sup>7</sup>

3.6 The Australian Indigenous Doctors' Association (AIDA) supported the need for commitment and effort by governments 'as well as individuals, families and communities themselves. No one party can achieve the results on their own.'<sup>8</sup> The Waltja Tjutangku Palyapayi Aboriginal Corporation stated:

An holistic and sustained response addressing the reasons why so many young Aboriginal people are sniffing petrol or engaging in less publicised but equally destructive behaviours – in our region, bringing together community members, key Aboriginal organisations and other service providers and all tiers of government, including local governance bodies in communities is required if we are to have any lasting positive impact on petrol sniffing and similar behaviour in remote communities.<sup>9</sup>

3.7 Associate Professor Dennis Gray argued, like many others, that imposing a solution will not work:

There is a long history within Indigenous Affairs that demonstrates that defining problems and imposing solutions from outside does not work. This has led to the policies of self-determination and self-management but unfortunately, as Peter d'Abbs pointed out to the coronial inquiry into petrol sniffing, all too often that has meant that government agencies have abrogated their responsibility to communities and just left it to communities. That does not work either.<sup>10</sup>

3.8 Associate Professor Peter d'Abbs also commented that 'for many years the standard response from all levels of government and all political persuasions was that it was a community problem...that was often dressed up as self-determination'. In recent years a number of governments have acknowledged that they have a vital part to play and that there are 'welcome signs of cooperation between governments and between levels of government'.<sup>11</sup>

3.9 Professor d'Abbs went on to argue that rather than looking at what interventions would work, the preconditions that need to be established for the interventions to be successful need to be identified. Professor d'Abbs saw the need for people in communities who have an understanding of the problems of petrol sniffing and who stay on a long-term basis, for sustained funding of programs and for the

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7 *Committee Hansard* 16.5.06, p.2 (Ms N Tur).

8 *Submission 32*, p.3 (AIDA).

9 *Submission 27*, p.4 (Waltja Tjutangku Palyapayi Aboriginal Corporation).

10 *Committee Hansard* 20.2.06, p.30 (Ass Prof DA Gray).

11 *Committee Hansard* 27.4.06, p.14 (Ass Prof P d'Abbs).

identification of key challenges including the development of models of service delivery.<sup>12</sup>

3.10 Other witnesses argued that in order to address petrol sniffing, the underlying causes need to be addressed. Professor Ted Wilkes commented:

Clearly, short-term solutions will only be effective if the structural determinants of petrol abuse are also addressed. In the short term, sniffable fuel resources accessible to sniffers need to be stopped and abrogated, services available need to be upgraded, youth workers need to be accessible and well resourced, and legislation that supports these strategies needs to be put in place. In the long term, petrol sniffing needs to be viewed in the context of the social circumstances in which it is occurring. It is the habitual feelings of hopelessness, boredom and lack of opportunity, not the petrol itself, which make the addiction chronic.<sup>13</sup>

3.11 Concerns were expressed about the common tendency for chronic abusers of volatile substances to switch to another available substance or move to another community if the only strategy employed was the restriction of the supply of the preferred substance:

Despite the success of measures to reduce the supply of sniffable fuels, it is clear that such measures are not sufficient, of themselves. For example, there have been recent anecdotal reports that where *Opal* has been introduced, petrol sniffers have turned to using paint. This highlights the need to address the root causes of petrol sniffing if any lasting impact is to be achieved.<sup>14</sup>

Whilst effective supply reduction strategies (such as replacement fuels) in remote communities can have great impact, it is vital that proportionate effort is devoted to other concurrent strategies addressing the complex issues underlying substance misuse. Supply reduction measures targeting one type of volatile substance alone can precipitate a shift among users to another volatile substance or a different drug altogether.<sup>15</sup>

3.12 The transient nature of Indigenous people also means sniffers readily move from one State or Territory to another if their supply is restricted and petrol is accessible in a nearby community. In addition, traffickers cross borders to supply petrol to sniffers. The tri-state (Western Australia, South Australia and Northern Territory) strategies that aim to address these cross border issues are discussed in chapter 4.

3.13 The key components to solving the problems of petrol sniffing will be a holistic approach: a whole-of-government approach, matched with on-going

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12 *Committee Hansard* 27.4.06, pp.14-15 (Ass Prof P d'Abbs).

13 *Committee Hansard* 20.2.06, pp.28-29 (Prof ET Wilkes).

14 *Submission* 25, p.11 (DoHA & DIMIA).

15 *Submission* 36, p.2 (Wuchopperen Health Service).

commitment and sustained funding of programs, which engages Indigenous communities.

### ***Whole-of-government approach***

3.14 The need for improved coordination of government programs and a whole-of-government approach has been well recognised:

It is particularly important that Inter-Governmental coordination of approach be a high priority in order to avoid the fragmentation of effort and confusion and alienation of service-providers which are features of current service delivery to Anangu communities.<sup>16</sup>

3.15 The Remote Area Health Service commented on the problems of dealing with multiple agencies in undertaking projects:

Projects are written in a very short-sighted way. They are written in silos. I would love to work in communities with the Department of Housing... But we do not work with the Department of Housing. It is very rare to get projects integrated – not just across the education and health agencies but energy and housing.<sup>17</sup>

3.16 State and Territory Governments support a whole-of-government approach.<sup>18</sup> The Western Australian Government commented that such an approach may be difficult but that:

...a whole-of-government approach has to be taken to this issue and it needs to encompass prevention, supply control and reduction of demand. Obviously, the coordination of that whole-of-government approach is easier said than done...petrol sniffing is both a problem of itself, with its own causes and consequences, and symptomatic of a long history, the experience of Aboriginal people in remote communities over time and their social and economic circumstances.<sup>19</sup>

3.17 The AIDA suggested that initiatives must encompass wider whole-of-government strategies that address the underlying cause of sniffing:

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. This indicates that strategies to combat petrol sniffing should be located within wider, whole-of-government initiatives to improve the health, education,

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16 Coroner Wayne Chivell, *Finding of Inquest into the Deaths of Kunmanara Ward, Kunmanara Ken, Kunmanara Ryan and Kunmanara Copper*, Umuwa, SA, 2005.

17 *Committee Hansard* 8.3.06, p.35 (Remote Area Health Service Qld).

18 *Submission 22*, p.2 (Northern Territory Government).

19 *Committee Hansard* 20.2.06, p.2 (Western Australia Government).

and socioeconomic status of Aboriginal and Torres Strait Islander people and communities.<sup>20</sup>

3.18 At the national level a number of strategies have been put in place: the National Inhalant Abuse Taskforce; the National Drug Strategy; and the Eight Point Regional Strategy for Central Australia.

#### *National Inhalant Abuse Taskforce*

3.19 The National Inhalant Abuse Taskforce (NIAT) was established in recognition that there is currently no coordinated systematic response to inhalant abuse.

3.20 Over an 18-month period, NIAT extensively researched and investigated programs and interventions and consulted a wide range of stakeholders in relation to inhalant abuse and concluded:

Inhalant abuse is a complex phenomenon that demands a truly whole-of-government and cross-sectorial response. Government departments at different levels, across a breadth of diverse portfolio areas, including health, education, justice, police, youth, sport and recreation, must work together to offer a collaborative and seamless response to inhalant abuse.<sup>21</sup>

#### *National Drug Strategy*

3.21 The National Drug Strategy recommends a comprehensive approach to drug-related harm involving a balance between demand reduction, supply reduction and harm reduction strategies.<sup>22</sup> Under the National Drug Strategy, the Aboriginal and Torres Strait Islander Peoples Complementary Action Plan 2003-06 complements the issues raised in the Strategy. The Complementary Action Plan 'stresses the need for culturally appropriate solutions that cover the whole-of-life and the entire population. Partnerships across governments and portfolios, and with communities are needed'.<sup>23</sup>

3.22 Associate Professor Gray commented that the National Drug Strategy provides a framework for addressing petrol sniffing:

...we should not be reinventing the wheel. Australia already has a National Drug Strategy. It has been evaluated. It has been effective and it is seen as a model in other countries. As well as the main plan, there is a complementary action plan for dealing with substance misuse issues

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20 *Submission 32*, p.2 (AIDA).

21 National Inhalant Abuse Taskforce. *National Directions on Inhalant Abuse: Final Report*, p.iv, November 2005.

22 Ministerial Council on Drug Strategy, *The National Drug Strategy. Australia's Integrated Framework 2004-2009*, Canberra, 2004, Commonwealth of Australia, p.17.

23 Ministerial Council on Drug Strategy, *National Drug Strategy, Aboriginal and Torres Strait Islander Peoples Complementary Action Plan 2003-2006*, 'Summary', p.1.

amongst Indigenous people...Together, those documents provide a framework for addressing petrol sniffing.

There are some key elements in that, in both of those documents. We have to address issues of supply, issues of demand and issues of immediate harm from drugs. They are three central planks of the National Drug Strategy. The other, which is encapsulated in the complementary action plan, is that we should be working with Aboriginal groups and not imposing solutions.<sup>24</sup>

*Eight Point Regional Strategy for Central Australia*

3.23 The need to work cooperatively to address the problem of petrol sniffing has been recognised by the South Australian, Western Australian, Northern Territory and Commonwealth Governments. The Governments have agreed to implement a comprehensive strategy, the Eight Point Regional Strategy for Central Australia (the Eight Point Plan), with Indigenous people in a designated area of Central Australia. The goals of the Strategy are:

- to reduce the incidence and impact of petrol sniffing in a defined area of Central Australia by addressing the complex mix of interrelated causes and contextual factors contributing to this activity; and
- to evaluate the effectiveness of a regional and comprehensive response to petrol sniffing to determine whether and how it might usefully be expanded to other regions with similar issues.

3.24 The Eight Point Plan involves the following elements:

- implement a consistent legal framework across the region;
- provide an appropriate level of policing;
- implement regional roll-out of Opal fuel;
- facilitate alternative activities for people in the region;
- provide treatment and respite facilities;
- implement communication and education strategies;
- strengthen and support communities; and
- implement an evaluation strategy.<sup>25</sup>

3.25 The Department of Health and Ageing (DoHA) and the Department of Immigration and Multicultural and Indigenous Affairs (DIMIA) noted that the strategy will be implemented at a regional and local level: at the regional level governments will address issues such as trafficking, supplying non-sniffable fuel and treatment facilities; and at the local level the strategy will be jointly implemented by Indigenous people from the region, State/Territory Governments and the Commonwealth. The

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24 *Committee Hansard* 20.2.06, p.30 (Ass Prof DA Gray).

25 *Submission 25*, p.5 (DoHA & DIMIA).

Strategy 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.

3.26 The Office of Indigenous Policy Coordination (OIPC) stated that this strategy was aimed at 'introducing a holistic approach to the problem of petrol sniffing' which will cover a range of issues other than the roll out of Opal, for example diversionary programs:

The government decided that the response required more than just Opal fuel and that we had to deal with supply issues, which meant non-sniffable fuel that stopped the trafficking of sniffable fuels and other harmful substances. So there is a strategy around that. The government knew that, once the availability of these substances was denied these communities, there would have to be some action to help them recover – some diversionary programs.<sup>26</sup>

3.27 Specific responsibilities will be spelt out in Shared Responsibility Agreements with each affected Indigenous community and reinforced through the development of Regional Partnership Agreements where necessary. It was noted that:

...where the community is seeking to take the initiative to address petrol sniffing issues in the community, as opposed to a range of other activities, and where it is seeking to develop a coordinated and holistic approach, then basically we are seeking with each of those communities to bring those things together under shared responsibility agreements or regional partnership agreements where we spell out what the Australian government will provide, what the Territory government will provide or what any third parties will provide and also what the community itself will do. An example at the moment is that in the last couple of days we have signed an agreement with the Nganampa community that will provide them with a community store, but it is also part of a broader endeavour within the community to address their petrol sniffing problems.<sup>27</sup>

3.28 The Commonwealth will also seek to have the strategy itself become a schedule to the Overarching Bilateral Agreements regarding Indigenous affairs signed or being negotiated by each of the State/Territory Governments with the Commonwealth.

3.29 An Advisory Group of experts is assisting the Commonwealth on the development of diversionary strategies and preventative measures under the strategy. Its members are Mrs Sue Gordon, Dr Peter d'Abbs, Mr John Thurtell, Mr Damian McLean and (until February 2006) Mr Gregory Andrews.<sup>28</sup>

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26 *Committee Hansard* 27.4.06, p.79 (OIPC).

27 *Committee Hansard* 27.4.06, p.74 (OIPC).

28 OIPC, Additional information 15.6.06, p.2.



3.30 The strategy will link with the work being done by and, as appropriate, be implemented with the support of the Central Australian Cross Border Reference Group on Volatile Substance Use (VSU) and other key related activities such as the tri-state policing initiatives being implemented under the Cross Border Justice Project. The Reference Group consists of representatives of the Commonwealth, State and Territory Governments, Aboriginal Health Forums, and service providers such as Nganampa Health Council, Ngaanyatjarra Pitjantjatjara Yankunytjatjara Women's Council, Anangu Pitjantjatjara Yankunytjatjara Council, Ngaanyatjarra Health Service and Ngaanyatjarra Council.

3.31 The Departments indicated that given the complexity of the issues being addressed, the Eight Point Plan will need to be in place for a number of years. It was stated that 'while the rolling evaluation strategy and ongoing relationships between the stakeholders will inform adjustments to the strategy, a long-term commitment from the respective governments is required to give communities the confidence to tackle this issue in a sustained way'.<sup>29</sup>

3.32 DoHA and DIMIA concluded:

The regional strategy seeks to strengthen partnerships between communities, service providers, State/Territory and Australian Governments for tailored, consistent and sustained initiatives that will make a long-lasting impact on petrol sniffing and potentially other substance misuse.

Increasingly governments will need to rapidly build on whole of government approaches which support action at community and regional level if a significant impact is to be made on both petrol sniffing activities and the social and economic environments which encourage them.<sup>30</sup>

3.33 On the whole, the Eight Point Plan has been welcomed and there is general acceptance that the elements represent what is needed to address the problem of petrol sniffing. The Northern Territory Government stated that:

The elements of the eight-point plan have provided us with a good framework for beginning discussions. I think it would be fair to say that more work needs to be done. The Northern Territory police express great appreciation of the process. As a result of the process, the Commonwealth has funded, with NT funding for ongoing operations, the Central Australian intelligence drug desk, which will fill a key gap around trafficking. It is a key strategy linked with Opal and our ongoing efforts in community engagement.<sup>31</sup>

3.34 However, the limited geographic scope and the trial nature of the strategy drew much criticism. CAYLUS commented that the plan covers only three

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29 *Submission 25*, p.6 (DoHA & DIMIA).

30 *Submission 25*, p.17 (DoHA & DIMIA).

31 *Committee Hansard* 21.2.06, p.26 (Northern Territory Government).

communities in the Northern Territory (Mutitjulu, Docker River and Imanpa) 'which is only a tiny fragment of the problem'.<sup>32</sup> Other communities will not be included:

...it sounds like Central Australia is going to benefit from the eight-point plan, whereas really only three communities in Central Australia are going to directly benefit from the eight-point plan. Because the money comes from the ABA and it is Northern Territory money, that money can only be spent in the Northern Territory, and so it will be spent in those three communities. Finke, across the road, gets nothing. Areyonga, another Pitjantjatjara community just up, gets nothing.<sup>33</sup>

3.35 Waltja Tjutangku Palyapayi Aboriginal Corporation also noted that not only is the strategy limited to three communities in the Northern Territory but also it is a trial:

...that the project itself was another "trial" or "pilot project"...people already know basically what is required so we don't need any more "pilots" or "trials"...we are concerned about "pilots" because our experience of them is that even if you do a really successful project there is either a gap in being re-funded on a more permanent basis (which means you often lose the experienced staff members who were employed in the "pilot" stage) or more often, that the funding bucket simply "disappears".<sup>34</sup>

3.36 A perceived lack of comprehensiveness of the individual elements and insufficient consultation as the plan was rolled out were also voiced in evidence. The Alice Springs Council argued that remote health workforces should be included in the plan particularly in training programs on petrol sniffing.<sup>35</sup> Tangentyere Council voiced their disappointment at the lack of consultation with Indigenous people and the target group.<sup>36</sup> This concern was echoed by Professor Ted Wilkes:

I again would refer to the fact that the government of the day, in developing plans, is always going to be flying in the face of Aboriginal leaders. Your ministers right through to senior bureaucrats have to be advised that the better way to do this is to ask the leaders of a particular sector.<sup>37</sup>

3.37 OIPC responded to these comments indicating that while there was no 'broad' community consultation, there had been input from an expert advisory group and a range of stakeholders had commented on various elements of the plan.<sup>38</sup> OIPC added:

The message coming to government from the community and from inquiries like the coronial inquiry that my colleague mentioned is that there

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32 *Committee Hansard* 22.2.06, p.26 (CAYLUS).

33 *Committee Hansard* 22.2.06, p.27 (CAYLUS).

34 *Submission* 27c, p.2 (Waltja Tjutangku Palyapayi Aboriginal Corporation).

35 *Committee Hansard* 22.2.06, p.65 (Alice Springs Town Council).

36 *Committee Hansard* 22.2.06, p.28 (Tangentyere Council).

37 *Committee Hansard* 20.2.06, p.39 (Prof E Wilkes).

38 *Committee Hansard* 27.4.06, pp.67 and 79 (OIPC).

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is a crisis, particularly in Central Australia, that needs the attention of governments. So the Australian government took the lead in drawing together three jurisdictions, putting additional resources on the table and suggesting a way forward. We got agreement with those jurisdictions and we are now proceeding with the implementation arrangements. Depending on what aspect we are working on, that involves consultation with agencies or with communities.<sup>39</sup>

3.38 In relation to concerns about the inclusiveness of the strategy, OIPC noted that it was a 'work in progress':

We have a plan that we are putting into effect. We are not pretending that all of the issues are covered; it is very much a work in progress. As we learn more about the challenge, we are adding to the approach we are taking. It certainly should not be inferred that we are focusing on petrol sniffing only in the central regions of Australia. We are of course tackling issues of substance misuse wherever they occur.<sup>40</sup>

3.39 DoHA also stated that it is clear that one of the goals of the strategy is to evaluate the effectiveness of a regional and comprehensive response to petrol sniffing to determine whether and how it might be usefully expanded to other regions with similar issues. The identification of a designated region was to see whether, in cooperation with jurisdictions, a comprehensive multi-government approach could be undertaken within a geographic area and to evaluate the approach to ascertain what lessons could be learnt.<sup>41</sup> OIPC also commented that it is consulting with the Western Australian Government about a further priority area and it has agreed on two priority areas in the Northern Territory. OIPC concluded:

We are now talking about what we will do and how we will do it, and in that discussion we are applying the learning from this. So it is a reasonable expectation that the relevant results of this trial will flow elsewhere in due course.<sup>42</sup>

### ***Engagement with communities***

3.40 The effective engagement of Indigenous communities is essential in successfully addressing the issue of petrol sniffing. All successful approaches examined by the Committee contained a critical common element, which was the engagement and support of the Aboriginal communities in the planning and implementation of the initiatives.

3.41 Tangentyere Council provided evidence on the importance of community driven initiatives in combating sniffing:

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39 *Committee Hansard* 27.4.06, p.79 (OIPC).

40 *Committee Hansard* 27.4.06, p.62 (OIPC).

41 *Committee Hansard* 27.4.06, p.100 (DoHA).

42 *Committee Hansard* 27.4.06, p.100 (OIPC).

In the central Australian region the most effective initiatives have been those directed and initiated by Indigenous people. In many cases the success has required support from external bodies or people working in partnership with local people to achieve this success. The most successful initiatives are Mt Theo and the Yarrenyty Arltere Learning Centre.<sup>43</sup>

3.42 Mrs Tur commented on the need to involve communities, particularly women in communities:

The solution is really not with people like me but actually going to talk with the community face to face. I think that is where you will find the solution. I read out what the women from Spear Creek said. They are amazing solutions coming from traditional women who want those things to go ahead to save their children.<sup>44</sup>

Mrs Tur went on to provide this example of the type of consultation with Indigenous communities that is required:

I would sit down on the manta, on the land, with the Anangu and say, 'How can we do it together? I would not send in people from outside to make all the decisions. That is the only way that I would do it. I would go back and sit with the people and say: 'We've got this problem here. How are we going to look at it as a family, as a walytjapiti? How are we going to look at it? Once we had talked, I would then reach out to the people. I really feel that it should come from the people – like those women who want this complex for their people. I do not think they have been given the opportunity to even interview the people who they want there. It is chosen by other people who know nothing about Anangu and the culture.'<sup>45</sup>

3.43 Mrs Wendy Casey, Western Australian Aboriginal Alcohol and Other Drugs Program, provided this example of community involvement and leadership to stamp out sniffing:

In my experience in the Warmun community...the Warmun Local Drug Action Group did have a little outbreak of sniffing and they very quickly nipped it in the bud by using the whole-of-community approach, isolating where they were getting the fuel from, getting the whole community together, having a meeting, bringing the kids out and trying to work out where these kids' families were. Part of the issue was that the kids' families were not present. They were able to place those kids into their extended family and they nipped it in the bud within a matter of a week. That happened a few years ago, but it was the persistence of the community that identified that. I think in other communities that is often the case. Kids who are not well supervised and supported tend to run amok.<sup>46</sup>

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43 *Submission 21*, p.4 (Tangentyere Council).

44 *Committee Hansard* 16.5.06, p.7 (Mrs N Tur).

45 *Committee Hansard* 16.5.06, p.8 (Mrs N Tur).

46 *Committee Hansard* 20.2.06, p.13 (Western Australia Government).

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The Western Australia Police Service concluded:

Community leadership is absolutely crucial. You see some real model communities, particularly in WA, and others where leadership and mentoring really need to come to the fore.<sup>47</sup>

3.44 The Commonwealth and State and Territory Governments have recognised the need for an approach which effectively engages Indigenous communities. The South Australia Government stated:

The South Australian Government is fundamentally committed to the practice of genuine consultation with Aboriginal communities and their leadership...In the [State Department for Aboriginal Affairs and Reconciliations (DAARE) Doing it Right] policy, the Government pledges that: "engagement and partnership with Aboriginal communities will be the platform for sustained improvement in the well being of Aboriginal families." This commitment has enabled this Government to forge strong partnerships through which Aboriginal communities and the Government are working together to address entrenched disadvantage and its effects, including petrol sniffing.<sup>48</sup>

3.45 DoHA and DIMIA outlined the Commonwealth's view:

The most successful strategies are community initiated, enjoy widespread community support and involve strong participation of community members. Interventions proposed by the community need to complement those undertaken by families, and family actions must be consistent with community strategies. Developing and fostering community cohesion and support for interventions is therefore critical in any anti-petrol sniffing campaign. Some communities have requested ongoing support to assist them in dealing with petrol sniffing, thus it is important to maintain the continuity of any intervention.<sup>49</sup>

3.46 Governments have been attempting to improve the operation of their programs in Indigenous communities. The South Australia Government stated that it has committed, in the APY Lands and Yalata, to respond 'to local challenges in a thorough and coordinated way, and by working in close partnership with local communities and the Australian Government'.<sup>50</sup>

3.47 The Commonwealth operates Indigenous Coordination Centres (ICC) in 30 locations around Australia which coordinate Commonwealth program funding and services to local Indigenous people. The Commonwealth has stated that:

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47 *Committee Hansard* 20.2.06, p.13 (Western Australia Police Service).

48 *Submission* 29, p.2 (South Australia Government).

49 *Submission* 25, p 17 (DoHA & DIMIA).

50 *Submission* 29, p.3. (South Australia Government).

The Government wants to find better ways to work with Indigenous people, and knows that it alone cannot make life better for Indigenous communities and families. Both government and Indigenous people have rights and obligations and all must share responsibility for making real and beneficial change in people's lives.<sup>51</sup>

3.48 During the Community Affairs Legislation Committee's examination of estimates in May 2006, concerns about the staffing and location of staff of ICCs were raised. The Department of Families, Community Services and Indigenous Affairs stated that some staff at ICCs were being changed as more senior, experienced and well-educated staff were required to do the work the Government wants to do: 'some have rationalised those arrangements so that they have core contract management *and* grant management cells and are replacing those staff with more senior people who can perform the solution broker type activity'. In some cases this has been proceeding more slowly than preferred.<sup>52</sup>

3.49 In some instances, these more senior staff are being placed in a hub that services a number of ICCs:

That may have been seen as some withdrawal of involvement, but it is essentially agencies coming to terms with the fact that they need a higher level of skills for the more strategic work that they are involved with in contributing to SRAs and more effectively managing programs.<sup>53</sup>

3.50 While these initiatives have been a step in the right direction, greater coordination and cooperation between all levels of government on the delivery of programs aimed at Indigenous societies is needed.

### ***Ongoing commitment to programs***

3.51 A major concern in evidence was the need to ensure that there is ongoing commitment to programs particularly funding commitment. This was seen as being crucial to ensuring that the full benefits from initiatives that address petrol sniffing and broader social and economic problems are gained. Associate Professor Peter d'Abbs emphasised to the Committee that sustained funding was one of the preconditions that needed to be established in order for any intervention to have any chance of success. Professor d'Abbs stated that it did not have to be 'unconditional, unaccountable funding, but it has to be something more than stopgap pilot funding'.<sup>54</sup>

3.52 The concerns about the limited life span, the trial nature and the poor or unclear exit strategy of many initiatives were echoed by many witnesses and were

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51 *Indigenous Coordination Centres, Questions and Answers*, <http://www.indigenous.gov.au>

52 Senate Community Affairs Legislation Committee, *Committee Hansard* 30.5.06, p.CA94.

53 Senate Community Affairs Legislation Committee, *Committee Hansard* 30.5.06, p.CA93.

54 *Committee Hansard* 27.4.06, p.15 (Ass Prof P d'Abbs).

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seen as major factors in undermining long-term success.<sup>55</sup> A lack of flexibility regarding unspent funding in any one financial year will also act to prevent achievement of agreed outcomes. Alcohol, Tobacco and other Drug Services Queensland commented:

We go in there with our program and we are successful for that period, and then when the program and the funding is finished everything collapses – the whole structure collapses again – and everybody goes back to the norm. We need to address some of the funding issues: for instance, funding for support workers.<sup>56</sup>

3.53 Tangentyere Council noted the disruptive effect of constantly renegotiating funding arrangements for staff positions and programs and the need for on-going funding:

If you do not have consistency, you start all over again. The minute you stop a program and all the staff leave, because they have no ongoing job, everything falls in a big heap. A new person comes along and you start 10 steps back from what you already had before. I think Larapinta would suffer the same consequence. I will probably have to spend a lot of my time between now and June figuring out where we can get funding, because our funding will finish, and that will be incredibly time consuming.<sup>57</sup>

3.54 Tangentyere Council concluded:

...everything that we can seem to access is short-term, and short-term funding is never going to solve these sorts of problems. So, unless the government commits to recurrent funding and long-term solutions, we will always be chasing our tails and what we have done will be completely undone.<sup>58</sup>

3.55 The example of CAYLUS was given as a program where inconsistent funding can undermine an outstanding initiative:

We play a fairly important coordinating role. We were independently evaluated before they gave us the current lot of three years of funding. The evaluation said that we were doing a really good job, but who knows what will happen. When CAYLUS first started, it had 18 months of funding and we kicked a heap of goals in those 18 months to the point where the evaluation that they commissioned at the last minute, in about March when we were running out of money in June, said that we were really state-of-the-art. They looked at a couple of other petrol-sniffing programs that have been funded and were not doing so well and said that they should look at how CAYLUS is doing it. Our funding ran out in June and there was a bit of money left over in some of our budgets, so we continued on.

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55 *Committee Hansard* 20.2.06, p.32 (Ass Prof D Gray)

56 *Committee Hansard* 8.3.06, p.15 (Alcohol, Tobacco and other Drug Services, Queensland).

57 *Committee Hansard* 22.2.06, p.19 (Tangentyere Council).

58 *Committee Hansard* 22.2.06, p.29 (Tangentyere Council).

Tangentyere carried us at that point...Eventually they re-funded us and we got the money in the bank in December.<sup>59</sup>

3.56 CAYLUS voiced the fear that without its services petrol sniffing would increase and many other important activities that CAYLUS had generated would be lost. It concluded that 'the corporate knowledge can just walk out the door in the gaps that are created by the funding bodies. We have 18 months to fix petrol sniffing in Central Australia'.<sup>60</sup>

3.57 State and Territory Governments also recognised the problems in short-term funding of programs. The Northern Territory Government stated:

One of the areas that I think needs strengthening is the reliance on one-off projects, particularly in the area of prevention. People have talked to us about that for a very long time – pilots and one-off tied funding. The problem is that, in some communities, gaining momentum is very difficult in the first place; to have gained momentum and have the program end is very discouraging; and then to try to rebuild that momentum is very difficult...'communities' – I use the term very broadly there – have been very explicit about what they think the gaps are, so an overreliance on one-off funding in the prevention area I think needs to be considered.<sup>61</sup>

3.58 The Western Australia Government pointed to a recent review of Aboriginal health which concluded that 'the endless search for innovation ends up in stop-start funding that works against the continuation of basic services. This is an area where we really need to consolidate the basics.'<sup>62</sup>

3.59 The Western Australian Government commented that it had generally adopted the position in the funding of non-government services that it ought to be tri-annually based and indexed. In its negotiations with the Commonwealth over the bilateral agreement on Indigenous affairs, the Government has 'insisted on the same policy principle being adopted into that bilateral agreement as well'. The Government concluded:

It is a recognition that, within the limits of our respective financial administration acts, when we enter into these agreements or contracts there ought to be some certainty to allow for planning and continuity. That has been an important development in the state jurisdiction, which we are hoping the Commonwealth will agree to in the context of the bilateral agreement.<sup>63</sup>

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59 *Committee Hansard* 22.2.06, p.30 (CAYLUS).

60 *Committee Hansard* 22.2.06, pp.30-31 (CAYLUS).

61 *Committee Hansard* 21.2.06, p.33 (Northern Territory Government).

62 *Committee Hansard* 20.2.06, p.17 (Western Australia Government).

63 *Committee Hansard* 20.2.06, pp.17-18 (Western Australia Government).



3.60 The South Australian Government also supported the need for greater funding stability and stated:

Finally, it is incumbent on all parties and on all levels of government to acknowledge the importance of developing, funding, delivering and sustaining comprehensive programmatic responses, as opposed to the ad hoc, short-term and isolationist ones that have proliferated over the last twenty-five years.<sup>64</sup>

3.61 The Commonwealth has also recognised the disruptive effects of short-term funding. OIPC stated that:

...we are concerned that the short-term nature of funding contracts, particularly in remote Australia, makes it almost impossible to effectively manage a cadre of support workers and that is something we are looking to change. That involves consultation with the state and territory jurisdictions, because they also contribute funding to these organisations and we need to reach agreement on a model. Our objective is to move to at least a three-year model for funding and...to move away from a lot of little organisations to a bigger organisation.<sup>65</sup>

## Conclusion

3.62 The problem that petrol sniffing poses for sniffers, their families and the community is well known: with twenty years of reports, inquiries and coronial inquests it could not be otherwise.

3.63 The Committee considers it is now time to move on from inquiries and reports. To do so will require a comprehensive approach to eradicating petrol sniffing. This means that there cannot be reliance solely on small communities to provide programs to address a very complex problem nor can there be a total reliance on government to deliver programs suitable to individual communities that are self-governing and have different needs and goals. The evidence is quite clear that the most successful programs are those which combine an initiative that has come from the community and has strong community ownership, but also has strong support from outside in its planning, implementation and management. There must also be, as noted by Professor d'Abbs, necessary preconditions for interventions to be successful and the identification of key challenges and appropriate service delivery models.

3.64 However, during the Committee's deliberations comments were received which indicated that whole-of-government coordination was not working effectively. While the Indigenous Coordination Centres have been established to coordinate government program funding and services, the Committee considers that there is a need to evaluate their operation with a view to improving coordination of government programs.

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64 *Submission 29*, p.5 (South Australian Government).

65 *Committee Hansard 27.4.06*, p.91 (OIPC).

## **Recommendation 6**

**3.65 That the Commonwealth evaluate, as a matter of urgency, the effectiveness of Indigenous Coordination Centres' implementation of the whole-of-government policy with a view to improving coordination of government programs.**

3.66 The Committee notes the introduction of the Eight Point Plan into the designated areas of Central Australia and considers that the Eight Point Plan is an important initiative. However, the Committee was disappointed that there were complaints about the lack of effective consultation with Indigenous communities before it was implemented. The Committee considers that the lessons learnt from this initial implementation in the designated area must be applied to all communities where petrol sniffing is evident as quickly as possible. The Committee considers that the problem of petrol sniffing is so wide-spread, so disruptive to communities (some to the point where communities are on the verge of collapse) and robs so many young Indigenous people of their future that there should be no restrictions on funding of successful programs arising from the Eight Point Plan.

## **Recommendation 7**

**3.67 The Committee notes that the Eight Point Plan is being developed for a designated area of Central Australia and considers that this is an important step in addressing petrol sniffing. The Committee considers that, as a matter of urgency, the Plan must be implemented more widely and that effective community consultation must be part of the implementation process. The Committee recommends that:**

- **the Commonwealth and State and Territory Governments, as a matter of urgency, commit to the implementation of the Eight Point Plan in all areas across Australia that have a substantial petrol sniffing problem;**
- **a transparent strategy be developed for the Plans further implementation including timing, evaluation and adaptive management processes; and**
- **effective consultation be undertaken with Indigenous communities before the Plan is implemented.**

3.68 The Committee also notes that the evidence received pointed to many successful programs that had been implemented in the past but had ceased because of problems with funding, because they were only a trial or because of lack of appropriate support. The Committee considers there are many successful programs currently in place but these may fail to proceed for exactly the same reasons. These programs are too important to be lost not only because of the help they provide to individual communities but also because they provide a way ahead for other communities to tackle petrol sniffing.

**Recommendation 8**

**3.69 That the Commonwealth and State and Territory Governments address the sporadic nature of funding and disruption of successful programs by:**

- **committing to longer term funding models;**
- **actively assisting communities to access government programs and meet the governance requirements; and**
- **providing long term support to successful programs in Indigenous communities.**

