COMMONWEALTH OF AUSTRALIA

Official Committee Hansard

SENATE

COMMUNITY AFFAIRS REFERENCES COMMITTEE

Reference: Petrol sniffing in remote Aboriginal communities

WEDNESDAY, 22 FEBRUARY 2006

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SENATE

COMMUNITY AFFAIRS REFERENCES COMMITTEE

Wednesday, 22 February 2006

Members: Senator Moore *(Chair)*, Senator Humphries *(Deputy Chair)*, Senators Adams, Allison, Carol Brown and Polley

Substitute members: Senator Bartlett for Senator Alison and Senator Crossin for Senator Carol Brown

Participating members: Senators Abetz, Barnett, Bartlett, Mark Bishop, Bob Brown, George Campbell, Carr, Chapman, Colbeck, Coonan, Crossin, Eggleston, Chris Evans, Faulkner, Ferguson, Ferris, Fielding, Forshaw, Hurley, Joyce, Lightfoot, Ludwig, Lundy, Mason, McGauran, Milne, Murray, Nettle, O'Brien, Parry, Payne, Siewert, Stephens, Stott Despoja, Watson, Webber and Wong

Senators in attendance: Senators Adams, Crossin, Humphries, Moore, Polley and Siewert

Terms of reference for the inquiry:

To inquire into and report on:

a. the effectiveness of existing laws and policing with respect to petrol sniffing in affected Indigenous communities;

b. the effectiveness of diversionary initiatives and community level activities; and

c. lessons that can be learned from the success some communities have had in reducing petrol sniffing including the impact of non-sniffable Opal petrol.

WITNESSES

Committee met at 10.41 am

FOSTER, Dr Stephen John, Private capacity

THOMPSON, Dr Russell, Private capacity

WHITE, Dr Andrew Vernon, Private capacity

CHAIR (Senator Moore)—I declare open the Alice Springs hearing of the Senate Community Affairs References Committee inquiry into petrol sniffing in remote Indigenous communities. On behalf of our committee, I acknowledge the traditional owners of this land and I thank them for welcoming us here today. I welcome representatives of the Central Australia District Medical Officers. Do you wish to comment on the capacity in which you are appearing?

Dr Foster—I am appearing on my own behalf as a medical practitioner in the Central Dessert.

Dr Thompson—I am appearing as a medical practitioner working in the Warlpiri Homelands as a GP.

Dr White—I am appearing on my own behalf. I work as a paediatrician in the Central Australian region.

CHAIR—I know that you have received information on parliamentary privilege and that information on the protection of witnesses and evidence has been provided. The committee prefers evidence to be heard in public, but you may also have evidence heard in camera if you have a particular need for that facility. We have a submission from you. I now invite you to make an opening presentation and then we will go into questions.

Dr Foster—The community that I represent has about 400 people in the population. Of that 400, there are about 60 current sniffers. The age range of those petrol sniffers is between 12 and 40. Petrol sniffing has been a chronic problem in this community and in this area for a long time, probably 10 years. The behaviours that we see in the community regularly as a result of petrol sniffing are manifold—not only is there structural vandalisation of equipment and buildings but there is also intimidation of families, stealing and bullying of elderly people, and there are break-ins and disruption of activities, particularly at night, with noise.

I believe that petrol sniffing is the tip of the iceberg. It is one symptom of a community that is struggling. I therefore see that there is no bandaid measure that we can bring about as a Senate inquiry, as a group of medics or as a group of whitefellas in an Indigenous community that will change that overnight. The difficulties that we see in the sort of community that I am working in include. poor language skills from lack of educational achievement. There are issues with parenting young children within that community. School attendance is poor. The traditional owners in that community are getting old and very tired. The communities have been established in those areas—they are not traditional lands of ownership—and over 40 to 60 years the elderly people have become very tired. The infrastructure within the communities—the church, the school, the council, CDP programs, the clinic, the store—has difficult issues to cope with, particularly in retaining personnel.

So we see a traumatised community that is constantly in tension. Every new trauma that happens adds to previous traumas. Indigenous people have had trauma over a long period of time and every additional trauma adds to their trauma. We are looking at the mental health issues of a whole community. One could summarise the mental health issues as some form of post-traumatic stress syndrome or disorder. One of the fears that I have of imposing new programs and interventions is that, from an Indigenous perspective, whitefellas coming in with new programs is yet another trauma. I will stop there.

Dr Thompson—I think Steve has painted a fairly grim picture of the environment where he is working. That was Yuendumu five years ago. I work as a GP in the Warlpiri Homelands. If you talk to people who were around at that time, they will say that there were up to a hundred young people sniffing in Yuendumu in 2001. There were more children in the school grounds misusing petrol after-hours than were attending school during classroom time. I have been working in the Warlpiri Homelands for the last two years and, thankfully, I have rarely had to deal with petrol misuse. This change has been a product of a Warlpiri controlled and owned program to tackle petrol misuse.

It is a credit to Mount Theo and the youth diversionary petrol-sniffing program that they have managed to do what no-one else has been able to do. The key to this is that the problem of petrol misuse has been owned by the local community and the response has been grassroots—it has come from the local community—and it has worked. It is very difficult to address a dysfunctional youth culture. Five years ago in the Warlpiri Homelands, petrol sniffing was the dominant youth culture. The dominant youth culture now revolves around multimedia, music and sports, and it is very vibrant and very healthy.

I would like to relate two anecdotes to the committee. The first comes from only a fortnight ago when I was out on the Warlpiri Homelands running clinics. I had a knock on my door and there were three adolescents, ex-petrol sniffers, and I invited them into my home. They noticed some DVDs sitting on my table. They pointed to them and said, 'We did that. We want to see our films that we made.' They had been supplied by the youth program with the tools to produce, edit and polish off some films in language that are of a quality where they could quite easily be submitted to international short film festivals and win. If Mount Theo had not been there, these children would still be abusing petrol and the knock-on effects—the social disruption to families, to these children, to the community—would probably be of a type that Steve is dealing with from day to day.

The other anecdote I would like to relate is one of the few times I have had to address an outbreak of petrol misuse in the Warlpiri Homelands. This situation would have occurred about eight months ago. We heard that there were four children between the ages of 11 and 13 who were misusing petrol. Of note is that it was peer reporting that made us aware of it. It was not policing, it was not any council, whitefellas or any sort of clinic staff; it was same-age peers who reported this substance abuse. We immediately assessed the situation and called Mount Theo. They indicated that they would be there within 24 hours. Within 48 hours these children were at Mount Theo out-station. That expedient response to outbreaks of sniffing activity is absolutely necessary to put out these spot fires.

The epidemiology of petrol sniffing is that, if you have one or two sniffers, within 72 hours you are going to have four and within another 72 hours you are going to have 16. The way the

outbreaks happen is exponential. That sort of response needs to be in place. There needs to be that sort of mechanism. That cannot come from outside, that cannot come from policing and that cannot come from a clinic; that must come from the community itself. It must be controlled by community members if it is going to work. I think I have said enough so I will pass on to Andrew.

Dr White—I have been visiting communities in Central Australia for the last five years as a paediatrician. I have visited places that both Russell and Steve go to regularly over that time. When I first was working here at Yuendumu where Russell works, there were a lot of sniffers. Now there are very few or none. I more often see young children than adolescents who are sniffing but I see the effects of sniffing on young babies, young infants, who are not getting well fed or well looked after because parents, other family members or other people in the community are making it hard for those kids.

When I was first visiting Yuendumu, I used to do three-day visits. Probably half of my time would have been spent dealing with young children who were failing to thrive, who were malnourished and who were not being well cared for. These days, when I do a visit there, the number has dropped very considerably to one or two children. The reduction in sniffing is probably only one factor, but it is one significant factor that has had an impact on the whole community. I would certainly support any initiative like Opal fuel that may reduce petrol sniffing but, in isolation, I do not see that that sort of program would have a big effect on the region.

I would like to talk about diversionary programs. I see diversionary programs as any program that would divert a person away from sniffing into another path. One of the biggest potential diversionary schemes is school, but unfortunately, in a lot of the places that I go to, a lot of children do not attend school. I see children and young adults, including 12- to 14-year-old young men, who have not attended much school, have not got good literacy or numeracy skills and do not have many opportunities for further education, further training or employment. Often they may take up petrol sniffing as a diversion from their own lives. Anything that can help young people do better at school, stay at school and attend school is something that may move them away from sniffing.

In looking at that, we have to look right back to day one of life. We should think about the literature on the early years which shows that babies, if they are brought up in a home where they are safe, get good food and get stimulation, are set up to do well emotionally and developmentally over their whole life span. There is a lot of research, mainly from North America, about the early years. So we should look at programs that can support young parents, new parents. Such programs are occurring in some places, where creches, playgroups and child care, as well as looking after children, have a developmental focus and a supporting focus for parents. We should look at early kick-start programs to try to help children be prepared to attend school.

I also wonder—and I am not an educationalist—if the style of teaching in school is the best style for Aboriginal children. I wonder if a style that has more storytelling and creativity may work better, but I am not an expert on that; it is what I wonder. The other big impediment to learning in schools is hearing. In a lot of the places that I visit maybe half of the children have a significant hearing impairment that makes it hard for them to learn and to enjoy school, and it probably contributes to nonattendance. Classrooms are not acoustically good on the whole.

Some children are provided with hearing aids but, in general, there are no classroom systems for hearing aids.

CHAIR—I was remiss earlier in not advising you—which you have all seen—that the media is covering this particular hearing. If anyone has any particular issues about the media let us know. I forgot to mention that at the start and I apologise. I hope none of you have any media problems, as you have been filmed all the way through. Thank you for your comments. We will now go to questions.

Senator ADAMS—Thank you for coming—I know just how busy you are—and for spending this time. It is very valuable for us. I am a midwife, and I have worked extensively throughout Western Australia, especially up in the Kimberley. Dr White—I was really interested to ask this question in Darwin—in relation to some of the younger women who are pregnant and who are petrol sniffers, can you give us a description of how that will affect their baby and the problems for that child later.

Dr White—There is not a lot of published literature about that, so it is really anecdotal. The difficulty is determining what is due to petrol and what is due to other factors that come along with petrol sniffing, like poor nutrition. My view—but without data and without published studies—is that those children are more likely to be small at birth. They are often living in a home where there is dysfunction and petrol sniffing, so development may be impaired, but whether it is due to what has happened to them in utero or what happens to them as they are growing up, I do not really know. I think there are higher rates of illness, and I suspect there may be higher rates of developmental and learning problems later on. But I do not have good science to back that up.

Senator ADAMS—If the young people who are constant sniffers are not given an opportunity to go to Mount Theo and they continue, how do they deteriorate and where does it all finish? Is there any way back as far as rehabilitation goes?

Dr Foster—Petrol sniffing affects many organs of the body. But without lead now, there are probably fewer long-term effects because lead poisoning is less of an issue. But many organs—heart, lungs, liver, kidneys—can be affected as well as the obvious issues of malnutrition, multiple violence and the other things that occur as a result of petrol sniffing. I have met many people who are quite bad petrol sniffers who now no longer sniff. One cannot measure intellectual deficit to any great extent, but I have seen some very well rehabilitated—and I am sure Russell has in Yuendumu—who were chronic sniffers who now are not and are functional.

Dr Thompson—Certainly, in my experience, a lot of the ex-sniffers are running parts of the youth diversionary program now, and they definitely have those organisational skills. Some are able to use multi-media software to edit a video and throw it together in a fully formatted film. That would indicate that people's capacity is not necessarily always affected long term.

Senator ADAMS—So there is a road back—that is the main thing.

Senator CROSSIN—In your submission you talk about acknowledging that the provision of Opal is by no means a panacea but then you say that rolling it out to selected communities in a limited supply in Alice Springs is grossly inadequate. What would you prefer to see?

Dr Thompson—Having a piecemeal provision of Opal is going to make it ineffective as a measure to dissuade petrol misuse. I guess I see Opal fuel provision as a harm minimisation strategy—it is one of a number of possible harm minimisation strategies. But if sniffable fuel is available in Alice Springs then it is very easy for that fuel to make its way to remote communities where sniffing is a problem. Cars run on it; it is very mobile; it sits in people's fuel tanks. So I cannot see that provisioning Opal to select remote communities is going to be an effective strategy. It has to be regional if it is going to be effective.

Senator CROSSIN—We have yet to have the federal Department of Health and Ageing come before us, but I am led to believe—and it has been revealed to me in the last couple of days—that perhaps the Opal fuel is rolled out according to the amount of money the federal government has got. For example, they have just decided that Peppimenarti will get Opal fuel because that is the amount of money they have got to spend—so they have matched the size of the community with the amount of money they have, which is disappointing. It seems to me that Opal is not rolled out on the basis of need or prevalence. As doctors, are you consulted in any way about the needs of communities before a decision is made as to which community gets Opal?

Dr Foster—I have never been approached, and I do not know of any of my colleagues who have been approached either.

Senator CROSSIN—I want to talk about the benefits of diversionary or rehabilitation programs that are Aboriginal owned and controlled. Dr Foster, I guess this question is probably one for your communities in a sense. How do we kick-start an Aboriginal owned and controlled community program when communities are perhaps not at a stage where they are able to get organised or take a lead in doing that? What needs to happen before we get an Aboriginal controlled and owned program? How did Mount Theo become so successful? What happened there to create that?

Dr Foster—Maybe Russ should answer that as far as how it happened in Yuendumu—and that would have to be my answer for the hope that that will occur in the communities that I work in, because I do not have an answer. The answer lies somewhere within the community, maybe with or without some assistance. But I think Russ could explain how it happened generically.

Dr Thompson—I will have to qualify this by saying that I was not living and working in the Warlpiri Homelands when this activity was happening, so a lot of this is what I have heard through storytelling and word of mouth from people on the ground in Yuendumu. I think one of the key features that has made Mount Theo successful is the fact that it is community controlled and community operated. From the start, it was totally independent from external sources of funding or resources. It is probably a question that could be more thoroughly answered by people at Yuendumu, but, from the stories I have heard, community members acknowledged that this was a problem, and that they did not like the effects of petrol on their young people and the effects of sniffing on their community. They acknowledged that a response was not going to come from somewhere else—government was not going to respond, aid agencies were not going to respond, the clinic was not going to respond, the school was not going to respond, the council was not going to respond.

Warlpiri elders put their heads together and decided that they had to do something about it. Two beautiful people—Japangardi and Nampitjiupa, who are two traditional owners from Mount

Theo—went out on a bit of a limb and agreed that they would be happy to have sniffers come out to the Mount Theo out-station, which is about 150 kilometres away from Yuendumu. It is isolated geographically enough so that people cannot make their own way back. I say that they went out on a limb because they agreed to take people who were not necessarily of their family.

They had very strict criteria for entry into the program. The people who participated had to be Warlpiri. The families had to agree to these people being taken to Mount Theo. Keeping those entry criteria quite strict was also important because Warlpiri were not prepared to take on the problems of other tribes, other language groups. I think that, if they had tried to sort out the problems of other people, it would have undermined the program and it would have undermined their control.

I think that, initially, all the resources were local. The vehicles were local. There was no external funding source. The food that these participants and clients were fed was all locally sourced and bought. If anything, the program was starved of funding and starved of resources early on. People who were involved in the program from early on actually identify that as potentially something that made the program stronger, in that everyone was sincere—they were doing it out of compassion and empathy and wanting to own and address this problem. Had it been overly resourced, there would have potentially been people who were not sincere who were involved, and that could have undermined the strategy.

It is a unique example. I do not know if there is a Mount Theo that has happened anywhere else in Australia, if not the world over. To say that other regions need a Mount Theo is just another external influence, another external interference. Looking at ways to build the capacity of local communities as a catalyst for the development of such strategies may be a useful approach, but the imposition of a youth diversionary program on a particular place may not work.

Senator CROSSIN—Can I ask you about support from the Commonwealth or—with the chair's indulgence—gaps in the Commonwealth's support. People in Perth suggested that there is a lack of leadership, which they were looking for, from the federal government and that there is not a national strategy to combat this—there are no protocols, perhaps, in place. Is that the case? Should those sorts of things be developed?

Dr Foster—That sounds like a very political question. Trying to get away from the politics: if we are to see the changes that Russ is describing, they are not looking at petrol sniffing; they are looking at community development, which is much deeper and much more complex than the issue of petrol sniffing. We will need funding in Aboriginal communities to lift education, nutrition, medical services—all of those things—and, yes, I believe we will need Commonwealth funding for that.

Senator CROSSIN—Let me put it another way: if you all left the communities at the end of this year, does the next person who follows you have to start again? With a lack of protocols or a lack of strategy out there, how does the next person continue the work that you are doing? How do we stop reinventing the wheel every couple of years?

Dr Thompson—I think it is important for the federal government and people in Canberra to acknowledge that the Indigenous communities are not homogeneous and that every place has its

unique dynamics and its unique local politics. Working in this region, you soon come to realise that there are several different groups with different languages and different local Indigenous legal structures and social structures. I cannot see how a blanket policy would really help things, because of the heterogeneity of communities. Each place needs to be approached afresh and in a way that takes into account local people, local systems and local dynamics, so I cannot see how a policy in Canberra is going to change anything.

Senator CROSSIN—An issue I have followed throughout the estimates process for the last couple of years is hearing and the access of Indigenous people to Australian Hearing Services. You would be aware that, finally, last December, there was an announcement that people on CDEP could now access hearing services. But my understanding is that very little of Australian Hearing's budget is spent on Indigenous communities. What else needs to be done to improve access to hearing assistance for Indigenous kids?

Dr White—I am not sure how much is spent. In Central Australia, the workers who work for Australian Hearing are very good and very active. They do not visit every community but they do provide pretty good services for children with significant hearing loss. A problem I see is that often children are provided with hearing aids but may not wear them. I would like to see classroom acoustics improved and sound-field systems put into classrooms. That would not help children who have profound hearing loss, but children with mild hearing loss would be helped by that sort of system. They do not have to put on a hearing aid; the system is there and it works for everyone whether or not they have had their hearing tested or seen Australian Hearing. Does that answer the question?

Senator CROSSIN—Thanks, that is fine.

Senator SIEWERT—Dr Foster, you talked about the trauma of new programs in communities. We have also heard about the tyranny of short-term funding, whereby a community just gets going with a project or a program and then the funding stops. Have you got suggestions for how we should deal with the trauma of new programs? We need to find a way of dealing with these issues.

Dr Foster—My personal strategy is to be in a community and make relationships with the members of that community, and to identify people with energy and knowledge and those who may be able to move forward with an issue. As Russ has said, and as I think history has shown, if a program comes from within a community, and is driven and owned by that community, it is likely to have longevity. But if whitefella programs are imposed—even with recognition by the local community that that is what they want—they will last only as long as those whitefellas are there. And there is the chance that it will fall over because there is no local ownership.

My personal way of looking at that issue is to make relationships, get an understanding and get to know people within the community and then maybe facilitating, where I can, the bringing together of local people with knowledge, strength and ability and seeing if there is anything that I can do to facilitate what they are doing, but at least encouraging them. That is a very slow process and it does not get ticks on the board. I strongly believe that it must come from within the community—as Russ said, a geographical location; it may not be one township but it may be a language group area. It would include the establishment of, for instance, a health board or a

health committee, which in Russ's area has been established. It is a phenomenally successful galvaniser of energy within the community.

Senator SIEWERT—That leads me on to my next question. Drawing out some experience that we have heard about from other witnesses, some communities are saying: 'Don't put the responsibility all back on us. We need help with this.' There is a danger in just saying, 'It has to come from the community.' I agree, but one of the responses to that could be to say: 'Just leave the community alone. They don't need help. If you just leave them alone, they'll manage.' I do not think that is what you are trying to say, is it?

Dr Foster—No.

Dr Thompson—I think capacity building is a very slow process. It is based on person-to-person relationships—very much so—and it is not very visible. To the outside observer it is not always obvious that people are being empowered in that way locally. It is very difficult to measure as well. We are always looking for outcomes. With capacity building and community empowerment—owning problems and solutions—it is very difficult to measure outcomes and glean evidence to support what you are doing. Taking Mount Theo as an example, they were working for five years before any changes started to become apparent. It takes time and patience. Kardia—that is Warlpiri for 'whitefella'—often have a paucity of patience. They tend to be not very patient at all and they give up very easily when they cannot see immediate outcomes. To give people that time and to build those relationships takes time and patience. If anything, that is what we can give as people coming from the outside.

Dr White—I could give an example. A number of places that I visit have had new child-care facilities built in the last few years. I do not really know the background of that, but in some places they are operating and in other places the buildings hardly ever open. In other places there are playgroups that have been started by local people who are operating out of buildings that they have found in the community. It is very tricky for someone to fund, because how can you be responsive to something that is starting out of the community and provide some funding support immediately? But if there is a way of supporting what is starting up then I think it will work much better than trying to fund something that does not have a lot of local support. The other thing is that if something is supported financially, it probably has to be a longer-term commitment—for 10 years or something like that—before we say that it is not working or we let them continue by supporting themselves. It probably will not be sustained if the funding is for only two or three years.

Senator SIEWERT—While I would love to continue along that line, I know that I am short of time.

CHAIR—You can have another one. For the sake of the people in the group, I am not being fascist with time today, because we are here. Normally we would be keeping much closer to the time. Just so you know, it is spreading out a bit.

Senator CROSSIN—We will let you go before midnight—is that the message?

CHAIR—Sometime on today's calendar date you will be released.

Senator SIEWERT—In that case, I do want to ask a question about after-care, but I would like to summarise what you have just been saying. Capacity building is in many cases what is needed, but it is not one size fits all—each community is different. It takes resources but investment in capacity building to enable communities to make decisions, and it has to be long term. Would that be an accurate summary of what we have just been talking about?

Dr White—Yes.

Senator SIEWERT—Thanks. I would like to go on to after-care for people who have come out of immediate rehabilitation and who are coming back into community. Are there problems? What is the rate of recidivism? Is there help in enabling them to come back into the community? Is that that an issue? Are there support facilities for people that are coming back in? Are we monitoring how people coming back into the community are managing and where they are going?

Dr Thompson—Are you asking about what is happening in the Warlpiri Homelands?

Senator SIEWERT—From your experience around this central region.

Dr Thompson—From what I have observed, there still are young people regularly who are taken, with parental and family consent, out to Mount Theo. The numbers are fewer and fewer, though. I think one of the most important things in terms of after-care is changing the dominant youth culture into a more positive, organic environment. Then you get peer after-care, in a sense. If there are diversional activities, if there is a disco three nights a week, if there is a movie on every other night, if there are sports, if there is the opportunity to surf the internet in an internet cafe that is operational every day, if there is band equipment to practise with—if those things are there and those activities are happening—then that after-care is just part of living, part of life as a young person.

If someone is peer reported to be abusing petrol and the response is quick and expedient then these adolescent Warlpiri people soon realise that there is a consequence of that behaviour: if you sniff, you go to Mount Theo for a month. There is that disincentive because at the out-station there is not a lot to do. Those activities that are happening back at home are not there. It is just not as much fun. It is not a very tempting place for a young person to go, whereas being back on community is.

It is important to have a strong, cohesive group of youth workers. In Yuendumu there is a team of four or five youth workers who constantly keep their ears to the ground. They are there to talk through issues. Some of them are very skilled at talking with young people, hearing them out, addressing their concerns. I guess it is a form of counselling, but not in the confines of a practice or a specific place. There is no formality about it. It is just an informal, ongoing debriefing service, I guess, if someone needs that—someone to talk to. So there are a few mechanisms that dissuade people from returning to substance misuse. I hope that answers your question.

Senator SIEWERT—What about in other centres besides Yuendumu—around Alice, for example? Are there after-care facilities and support?

Dr Foster—You will speak to people later today who will be able to answer that question. We can really only represent what is happening in the communities that we are used to. In Yuendumu and the Warlpiri Homelands there is a lot more facility, as Russ has described, than there is for the areas that I work in. For instance, CAYLUS and people you will be speaking to later on have a presence. They would be involved with after-care. The sad thing is that when many people who have been out of the area that I service and who have got off petrol sniffing come back, within 48 hours they are sniffing again.

Senator SIEWERT—In the areas that you are working in?

Dr Foster—Yes, because there is very little diversional therapy. There is very little else going on and to get back to that crowd is very tempting.

Senator ADAMS—Is your group involved with the Division of General Practice?

Dr Foster—Individually we have an option to be involved with the division, yes.

Senator ADAMS—Is the division doing any proactive work in this area?

Dr Foster—I cannot speak for the division here.

Senator ADAMS—So if there is interaction with your group and Western Australia and South Australia, do you share any ideas or do any work with them? Or individually?

Dr Thompson—Informally, on a one-to-one basis, we sometimes chat with medicos who are working in the Pitlands or elsewhere, but there is no formal kind of approach that we work with these people.

Dr Foster—There is more of a formal approach with the DMO service in the Top End, but not a formal liaison with South Australia, Queensland or Western Australia.

Senator ADAMS—It seems a shame. Every community is different, but there must be common threads running through. It would be terribly helpful to be able to spread the word through. Hopefully, this inquiry might be able to do that. Are there any employment opportunities in these smaller communities for adolescents?

Dr Foster—The CDEP program has been tried, and has had some successes, but it is pretty limited in the area that I am working in.

Senator ADAMS—I realise it is all different, but this is obviously boredom and if they had something to move on to, at least it is a goal to work towards.

Dr Foster—But again, the structure of the community is one of limited education and limited expectations. To become a CDEP recipient is to get $20 a week more and have to work four hours every day. Is picking up rubbish really an incentive to work? The answer is no. The CDEP program has lots of potential but, again, every community will pick it up and work with it and run with it in a different way. So it is not a panacea for each community.

CHAIR—I have one question, and it is to do with evidence we have received about people who use a range of different drugs. I think the Western Australian Health Commission called it 'poly drug use'. There has been some evidence that petrol sniffing is but one option, and that if you address the petrol-sniffing issue, then something else will come into the community or is already there—it is the combined effects on the people. Could any of you, from your own experience in the communities talk, on that issue?

The other question I have is about rehab. We have asked particularly about the rehabilitation processes, and all of you have mentioned that it is possible. I am interested in whether there needs to be specific rehabilitation for petrol sniffing or whether a general rehabilitation methodology could be addressed for people who perhaps have different issues. It is kind of a general question and it is picking up on evidence we received in Perth and also in Darwin.

Dr Foster—The first drug used was obviously alcohol. Petrol has been around. We are seeing an increased use of strong marijuana—

CHAIR—Local marijuana?

Dr Foster—Local and imported. The hydroponic stuff is around. There is evidence to suggest that in communities where the petrol-sniffing numbers go down the use of marijuana goes up. So we have to work with all of those. In the areas that I am involved in, there is not a major use of other drugs, and intravenous drugs and such things have not yet made a presence that I am aware of.

CHAIR—Dr Thompson, do yo have anything to add from your areas?

Dr Thompson—Polypharmacy use is present in the region I am working in. Five years ago local people would have said that petrol sniffing is the No. 1 substance misuse issue for that region. Now people are saying that cannabis misuse is the No. 1 issue for local people. I am not sure whether that is because one substance has replaced the other or just that petrol misuse is not present and they are just going to the next peg on the rung but there is particular concern, especially with self-harm, suicide and chronic cannabis misuse. I do know that the Mount Theo program is putting quite a bit of energy into that at the moment. Having a specific petrol-sniffing program and not taking into account other substances would probably be short-sighted. People will take drugs. There are reasons that they do it. If those underlying reasons are not addressed then it is quite likely that another substance will just replace the first one.

CHAIR—Dr White?

Dr White—I do not think I have anything to add.

CHAIR—Do any of you have anything you would like to add before your evidence is concluded?

Dr Foster—To answer your question about rehabilitation—not as a specialist at all—I think there is some overlap of rehabilitation of drug users and any success that is found to be with one would have some crossover effect generally.

CHAIR—Thank you very much for your evidence and your submission. If you think of anything you would like to add—sometimes you go away and think of exactly what you would have liked to have given as evidence—please get in contact with the committee, because we are gathering information for a couple of weeks.

[11.40 am]

ABBOTT, Mr Barry, Ilpurla Aboriginal Corporation

McFARLAND, Mr Blair, Coordinator, Central Australian Youth Link-up Service, Tangentyere Council

RAY, Mr Tristan Michael, Coordinator, Central Australian Youth Link-up Service, Tangentyere Council

SHEEDY, Ms Leonie, Coordinator, Yarrenyty-Arltere Learning Centre, Tangentyere Council

TILMOUTH, Mr William, Executive Director, Tangentyere Council

CHAIR—Welcome. Information on parliamentary privilege and the protection of witnesses and evidence has been provided to all of you. Whilst we do prefer to have evidence given in public, if you have a need to ask for an in camera process that is available. As none of you has a concern about the media covering your evidence, that will be fine. I invite you to make an opening presentation and we will then go to questions from senators.

Mr Abbott—I have been working with kids for 47 years and won the Prime Minister's award last year. I have people from the age of 21 right down to 15 at the moment. When some of the kids that we have are finished with us, I talk to the community about getting a job for them when they are old enough. If they are under age, I talk to people about getting them back in school. Quite a few of them have gone back to school and are doing pretty well. Before they got to me, they would just run away from school and get into petrol, drugs and whatever. I have been dealing with kids who are on drugs, petrol, glue, paint, grog and just about everything. And it is not just the kids—I have been dealing with six-year-old kids right up to 40- and 50-year-old men. I have being doing this for 47 years.

Mr McFarland—People talk about reinventing the wheel. CAYLUS is one of those wheels that occasionally gets reinvented. CAYLUS is the product of the need for a wheel which has been evident for a long time. After a photo of a petrol sniffer in front of Ayers Rock was published in an east coast newspaper—in, I think, the *Australian*—funding from the deal that the federal government did with the NT government which was going to the police for diversionary programs was diverted to a program relating specifically to petrol sniffing in Central Australia and another one in the Top End. That money went to Tangentyere Council. They hired me in November 2002 to start off that wheel.

Everyone in the region has known that that wheel has been necessary for a long time. Petrol sniffing is a distinct thing but nobody except CAYLUS has that as their primary agenda. It is on the bottom of everyone else's list. Doctors deal with it, the police deal with it and education deals with it. Everybody deals with it but nobody has it as a focus. That is the wheel that was needed, and CAYLUS has been that wheel. We have been running since November 2002, and we are funded until June 2007. We do community development and supply and demand reduction.

Recently we have had a small capacity to do casework that nobody else can do. It is particularly difficult with older men, because a lot of the casework agencies are more orientated towards young people, and the involvement of welfare agencies cuts out 17. So that is CAYLUS.

I have been in this region for coming up to 20 years, in about a month, and I have been involved in this business for the whole 20 years. I was in corrections for eight years, working with petrol sniffers, because they were always breaking the law. I was doing community development to do with community service orders and home detention and that sort of stuff. I started working with Tangentyere in 1995, supporting remote communities, developing night patrol services. Since 2002 petrol sniffing has been my prime focus.

I listened to the questions you asked before of the doctors. I have more information about each and every one of those things. I feel like a real expert in this zone, partly because I have been here and seen it all. I know where the bodies are buried. I probably helped bury them. I was here for HALT, the Healthy Aboriginal Lifestyle Team. I was here for Petrol Link Up and for the attempted federal refunding of Petrol Link Up, which failed. I was here during the interim with another group of people who were called at that time CAISAN—Central Australian Inhalant Substance Abuse Network. That has continued. It was a lobby group to try to get something like this wheel going again. So I have a lot of corporate knowledge about petrol sniffing and what has happened—what the division of general practice has done in the past, how the rehab works and how Mount Theo started. I was there in the very beginning. I saw it and supported it as best I could. With Tangentyere's help we shuffled a few resources their way. So that is CAYLUS and that is my background. Tristan was the second person who came on board.

CHAIR—Would you like to add something, Mr Ray?

Mr Ray—I started working with CAYLUS at the end of 2003. Prior to that I lived at Yuendumu for four years and worked for the Warlpiri Media Association, doing some of the multimedia solutions that Russell mentioned earlier. Prior to that I lived in Canberra.

CHAIR—You are not going to give us any details of that experience? No! Mr Tilmouth and Ms Sheedy, would you like to comment?

Mr Tilmouth—I am the executive director of Tangentyere Council. Tangentyere Council was incorporated in the seventies. It is made up of the town camps, the independent autonomous bodies that are incorporated through the Corporations Act. They make up the membership of Tangentyere Council. There are 18 of those town camps. We would like to call them housing associations but town camps is the name that they are branded with. Sticking with the mechanical theme of wheels, we are the axle that drives that wheel. Also, we supply the gearbox and the motor.

CHAIR—You are getting way too technical for me, Mr Tilmouth.

Mr Tilmouth—I want to give you the idea that the infrastructure behind the programs is important. It is imperative that this infrastructure is there, because these programs do not work without the proper infrastructure, administration and support that people get from the organisation in order to run the programs. Mr McFarland was not idly boasting about his career. One of the reasons we employed him in the first place was that we knew he had had a very

extensive relationship with this area for some time. It was one of the reasons why we targeted Mr McFarland for this.

Tangentyere Council provides services to those town camps in Alice Springs, in town as well as in remote areas. Services in remote areas include programs such as youth programs, employment programs, construction programs and social justice programs. As Blair mentioned, we get behind the remote area night patrols and support them and export our expertise out to them in order that they become entities in their own right.

Tangentyere has been addressing the impact of substance misuse over the last 25 years and has a strong base on experience in this area. In relation to petrol sniffing, we have provided services through our youth programs and our social justice programs for approximately 15 years. Over the last six years we have established and targeted programs in response to petrol and other inhalant substance abuse.

The Yarrenyty Arltere-Learning Centre is run by Leonie. Blair and Tristan are working in the CAYLUS program. We finally got the dry area legislation for one of the camps which is in close proximity to three liquor outlets. Historically, we have been involved in setting up the CAAAPU dry-out rehabilitation centre just outside of town, with a lot of support from Tangentyere and the town campers. We have trialled the social club strategy, the day patrols to night patrols, youth activity services and family wellbeing programs. We go into the jails and teach people about how to own up to their agency and to the problems they are involved in, especially violence and domestic violence. We work with people inside the jail so that, hopefully, they can come out a lot more prepared to take on society in a different light. Basically, we have a multifaceted approach to a whole heap of issues not only in and around town camps but also in remote areas and in town, because we believe working upstream helps prevent the impact on us in the town camps.

CHAIR—Ms Sheedy, did you want to add something from your perspective?

Ms Sheedy—I would like to outline the program I work in.

CHAIR—Is that the education one?

Ms Sheedy—It is a multiple stream of programs, in essence. It is a community driven project that was initiated five years ago, in partnership with Tangentyere, through one of the housing associations, Larapinta Valley, which was chronically stressed by petrol sniffing. Just before I came on board, it had a community of young people who were seriously in trouble with the legal system, incarceration. There was nobody at school, health programs were extreme and people were in dire straits. So it was a critical response to that situation.

What is unique about Larapinta is that it was community driven. With the support of Tangentyere Council, they responded to that community's wishes to use their community centre to have their own program and to address their own program with their own solutions. Previously, there had been a lot of agencies in Alice Springs trying to cope with the situation. They also held a meeting to ask families and young people what they wanted to do, because a lot of energy was going into this small group of people but there was virtually no outcome and it was consuming so much time.

So that was the solution. That community sat down and said: 'We want something in our own backyard. We do not want everybody in and out hitting on us. We want something that we have control over.' The community set up the Yarrenyty-Arltere Learning Centre, which has a multidisciplinary response to the issues that families are facing. Of course petrol sniffing creates the most chaos in people's lives. It creates the most violence and it creates all sorts of other issues that feed right down to everybody in the family. It stops kids from going to school, it stops people being able to take care of their own problems, it stops health being supported et cetera. The community saw that if they did not have an overall approach that addressed everybody in the community, not just the sniffers, there would be little change. So the centre took that multidisciplinary approach and started off with the department of education coming on board with a special school that is auspiced by one of the primary schools in Alice Springs. It delivers its education program there in just one room.

We had a partnership with some of the RTOs in town to have adult classes. People identified the different health issues, employment issues, family problems et cetera. Through meetings and the committee that was set up there, which consisted of the young people themselves and their older family members, we identified what services we needed to get in and what other organisations we needed to talk to. The program is run from there.

CHAIR—There will be questions, Ms Sheedy. That is your perspective on those things for the record.

Senator ADAMS—Mr McFarland, on the issues that you raised, would you like to run through the things you can help us with on the questions we asked previously?

CHAIR—He might need a little bit of help along the way.

Mr McFarland—One issue which came up was how or whether you can take a Mount Theo and put it somewhere else. That is, interestingly, paralleled by the HALT thing. HALT worked successfully in Yuendumu but when they tried to export it to Kintore and later to the Pitlands it did not work. From that you can learn that you cannot export the same thing to another community and expect it to work. But other things will work in that community that are suitable for that community.

Kintore community, for example, has a substance abuse worker attached to the council who is helping that community. They have a good recreation program. It has been great for the last year and a bit. It is going through a shaky patch because a really well qualified and excellent person has just left to continue her medical studies. It will need help to recruit a really good person and support that person. That community is looking at out-stations and not at a Mount Theo model. That community wants support for taking kids to family out-stations—so a family has an out-station and with a bit of support they can take their kids to that out-station but not anybody else's kids. From that similar base of support in the community another family can take their kids to their out-station. Kintore is surrounded by out-stations that are mostly not used anymore. Most people have moved into the small regional centre of Kintore for health reasons and because there are a lot more resources in Kintore than at the out-stations, but the out-stations are still there and the infrastructure is still mostly there.

That community's solution is not a Mount Theo; it is a more versatile base from which to fund smaller family based Mount Theos. The point is that you cannot export a model, but you can export the core components of what made that model work. In Yuendumu, it is that the community wanted to do something. Each and every community wants to do something. Sometimes people talk about them as if they are dysfunctional communities, but often they have a strong desire to deal with the kids and stop the sniffing. Often they have never had any help or the help they have had has been patchy—they have had a bit of help from this agency and a bit from that and nothing consistent and nothing that really looks at what they want. So many government agencies come out with their own agendas. It is the nature of government. You talk to health person and you say you need help for this and they say, 'That is not really a health issue, so I cannot help you.' So you are trapped. There is that silo effect of government which makes it harder for communities to get things going which are holistic—the Yarrenyty-Arltere thing addressed all of the issues it had to address.

Yuendumu had that community will as well as support from local agencies which put the basic resources behind the elders to get it going. One of the crucial things was that the school put in a full-time worker with a school car, whose job was to listen to the elders, support what the elders were trying to do and what the Brown family was trying to do at Mount Theo. That was the thing that made it go from a desire for it to happen to really happening. That worker was fully dedicated and worked 100 hours a week for eight years basically to get it up and going.

Whilst he would always say that it is the community that did it, which is true, and it is the elders who were pivotal in it happening, which is also true; it would not have happened without that level of resourcing. That is the key element of the model. It is not a model where you can say, 'Here it is, community; you go and do it.' It is a model in which you put people and resources to develop the capacity, not only of the community but also of the funding bodies, to respond to what the community wants, to organise funding and to make those sorts of things happen. The Mount Theo model is exportable if you look at what it really is, as opposed to what HALT tried to do. They tried to move the same people into different places and use the skills those people could use in their own community in other communities where they were just not connected in the same way. So Mount Theo is replicable, but it will not look exactly like Mount Theo in every community.

Senator ADAMS—What about the divisions?

Mr McFarland—The division gets Tristan and me to go and talk to new recruits. Whenever they have new doctors who are working as part of their induction training, we have a session with them in which we talk to them about petrol sniffing and what they might experience. We have extensive literature, a lot of which is from Sheree Cairney and the Menzies School of Health Research in Darwin, on the medical side of things. We also have all the really seminal texts about petrol sniffing and lots of community development type resources and places where you can get grants. We have a whole library on a disk, which we give to the doctors so that they can pursue their own interests and whatever aspect of it they want to. That is what the division of general practice is doing—trying to set up those doctors so that, when they go to a community and see a sniffer, they have some context on it. We answer all the really basic questions to which people would find it hard to get answers, because they are fresh to the community and they do not have relationships with people. Often Aboriginal people take a little while to start answering questions, because so many people come and go that they get tired of explaining the same things

over and over to people. There is also a degree of sadness and angst that those questions cut to, so maybe they do not really want to open their souls to every passing whitefella. The division gets us to fill in those gaps and answer really basic questions like: why don't the parents stop them and what has been done before?

We have a lot of corporate knowledge about each community. I have been working in all those communities for 20 years and I know what the communities have tried. I know that a particular community tried something that worked for a while but then they could not get funding and so it collapsed—I know that that community did this and that. I can fill in the backgrounds that you would not get if you just went to a community and looked at it and saw sniffers and thought: 'Obviously this community doesn't care and the parents don't love their kids. What am I doing here? I'm out on the next plane.' That is what happens on a fairly regular basis, not so much with doctors but with recreational workers, town clerks, ESOs and people like that. People do not stay in the communities, and that is bad for the community. But it is avoidable with a bit more orientation so that people can get more of a handle on what is going on and what role they can play in relation to it.

CHAIR—We have a very detailed submission from CAYLUS, which covers a whole range of information. Is there any information on the disk to which you refer that we do not have? If we do not have it, can we get it?

Mr McFarland—I am happy to give you a copy of the disk. It has a lot of stuff on it.

CHAIR—I think that the kinds of issues you are raising are the core parts of our inquiry. While we have a really detailed submission which covers a lot of the methods, if you can get the disk to the secretariat, I am sure we would be interested.

Mr McFarland—Absolutely. We give this to rec workers, youth workers and anybody in the field. We provide a supportive infrastructure for people working in the field and on the coalface. The seminal text we always refer people to is the d'Abbs-MacLean text. That is the core, useful information and you should read that. Also on the disk is a d'Abbs-Brady—

CHAIR—Maggie Brady.

Mr McFarland—report on the policy background to petrol sniffing. It looks particularly at federal government policy responses to petrol sniffing and traces it back to a 1985 Senate submission which ran the line that Aboriginal communities should deal with it themselves. Since then, that has been a sort of impediment to Aboriginal communities getting the help they needed. For all the best of intentions, that Senate committee basically supported—

CHAIR—Do you agree with that?

Mr McFarland—Absolutely not.

CHAIR—Do you agree with that proposition that that has blocked some of the development that was necessary?

Mr McFarland—Yes, I think it has. It has been a rhetorical position that people could take, which is really a form of blame the victim. It is not a useful position.

Senator CROSSIN—Thank you for your time and effort to appear today and for your submission, which is very comprehensive. I have many questions that I would like to ask you. I will start off first with the learning centre. The Commonwealth is funding the coordinator, but how long is that funding for?

Ms Sheedy—The funding ends in June this year. It ends every year or every two years. It is also the situation for our caseworker, which is an extremely important position that we have had for the last year and a half. I would say that a third of my time goes on funding reports or funding applications. It is very good to have an interdisciplinary approach among all the different departments, but it is a lot of office work. I literally go from people dying in hospital to writing a report, 'What will I do?' It is incredibly frustrating. We do need accountability, but we also need some sort of togetherness about that accountability.

Senator CROSSIN—That is quite a common story we are hearing now; this is the third day of hearings. We are certainly hearing about the patchy nature of funding or the uncertainty about funding, if you have it for only a year or so. For you, would it make the running of the centre easier if those sorts of positions were funded for, say, five or six years, rather than yearly?

Ms Sheedy—There is no doubt about that. That is what Blair was underlining before, about people in remote communities and having consistency. 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.

Senator CROSSIN—And this is funding through the Commonwealth Department of Family and Community Services?

Ms Sheedy—Yes.

Senator CROSSIN—What is it about your centre that makes it successful? It somehow seems to straddle Family and Community Services and Education. We have heard from medical officers that the kind of schooling that is offered in remote communities does not quite hit the mark for people who might be substance users. What is it then about your school that makes it different from mainstream education?

Ms Sheedy—It gets back to how we started and the way it was set up, and that was that it was a community driven program. It was basically driven by the core group of people who were affected by the sniffing, and it involved all the families of the young people and the young people themselves. It identified what they needed and acted on the identification of that solution, and that was a school program that kids could access, because they were totally marginalised, even though they were living in Alice Springs. Basically those kids were not able to go to school through a myriad of problems. The department, in a huge leap of faith, acknowledged that and came on board. It is significant that a school has been flexible enough for these kids to participate in it.

We have Pathways and trying to push those kids out into a bigger environment with mainstream school, but essentially it gives family an input into a position that is culturally safe, acknowledges the cultural strengths and builds on those, and builds on the strengths of people and the solutions they have. As Blair said, people do know. They have strong opinions. They do not want their kids or themselves living like this. I think that is the essence.

Senator CROSSIN—But are the children at this school required to meet the national benchmarks, or is there some degree of flexibility about that provision?

Ms Sheedy—We are still roped into the system, but, through the partnership we have with Gillen Primary School, they understand our needs. They managed to work their books to make it accessible, so that—

Senator CROSSIN—I think maybe you are trying to say 'accommodate your students' needs'.

Ms Sheedy—Accommodate our students. But our students do remarkably well. Our students do better than a lot of the kids in the mainstream schools and in remote schools. So, although we are slightly below the benchmarks, I would suggest that we are actually above average in a lot of other school programs that are run in remote circumstances with the same sort of situation. We know from our kids that, when they do go into the mainstream school, they can read and write better than a lot of the kids in the program. These kids can read and write and manage systems that their brothers and sisters could not, so we have a group of young people who are now coming through from those families, who have skills in literacy and numeracy. For their brothers and sisters, by the time the program came on board, it was too late to be able to address that as well as we have. The strength of the program is the whole new generation who have options that their siblings did not have.

Senator CROSSIN—Mr McFarland, I wanted to ask you about the response from the federal government. The 1985 Senate select committee reported on volatile substance fumes and abuse in Australia. I understand that one of the main recommendations out of that was that we produce a few more charts and a couple more graphic pictures about the impact of petrol sniffing. I noticed that last year Minister Abbott also released another flip-chart about education, I suppose, for young kids about the impact of petrol sniffing. Are they adequate?

Mr McFarland—No, definitely not. The MacLean-d'Abbs report, on page 50, has a section on education which quotes a number of other research papers that were done—and a lot of research was done—about the value of education. They are very scathing about it. One of the studies was in the Western Desert, where they talked to petrol sniffers. They asked 105 petrol sniffers: 'Do you know that it's bad for you?' 'Yes.' 'Do you think it might kill you?' 'Yes.' 'Do you think that there's anything you can do about it?' 'No.' So people know it is bad for you really. You do not have to tell the Aboriginal people—who have watched their relations burnt or killed or whose relations have hanged themselves—that it is bad for them.

Senator CROSSIN—I suspect you would probably get the same response from non-Indigenous people who smoke.

Mr McFarland—Precisely. Those programs have a place, but as a thing in themselves they are of very limited value.

Senator CROSSIN—In the roll-out of the Opal fuel, is there any consultation with CAYLUS about where it is rolled out to, or is there any other transparent process that you can see about which communities seem to get assistance for the funding for it? I go back to the case of Peppimenarti, because to hear in the last week or so that Peppimenarti is going to get Opal fuel but Wadeye is not at this point in time does not seem to make sense to someone like me who knows those communities. Can you shed some light on what sort of transparent process there is, if there is any, in the decisions about where Opal goes to?

Mr McFarland—There does not seem to be. We try and make recommendations to OATSIH about those issues. For example, at one stage in the Western Desert, Papunya, Mount Liebig and Kintore all had Opal, but right in the middle of them was another community called Ikuntji that did not have Opal. It was not on the original list. It is now. Now they have Opal, and that is great. But we sort of humbugged the department and sent them emails, letters and stuff like that, pointing out the tactical advantages of making that region an Opal region.

We have been working in consultation with all of the communities around that. We have twice had meetings, in different communities, with the pastors' group, which is an active group in the Western Desert, to talk about that issue. They all see the usefulness of not having that source of sniffable petrol in that zone. We, on their behalf, humbugged the department about it, and the department, to their credit, has put it on to the list. There does not seen to be a particular, transparent methodology to have some input into it.

Senator CROSSIN—You make the comment in your submission that the law enforcement in remote areas is patchy. I have a number of questions that arise from that. We know that the Northern Territory government has just recently passed the new Volatile Substance Abuse Prevention Act. It is only a fortnight old. I am assuming there will be mechanisms to coordinate the roll-out of that legislation. Were you involved in drafting that legislation? What input will you have to ensure that your view about law enforcement being patchy is addressed in the roll-out of that legislation?

Mr McFarland—We did have some input into it. Once again, it was not solicited, but we wrote to the Attorney-General of the Northern Territory making suggestions about how the law could be better framed. Some of those recommendations have certainly been picked up on. We are also going to be going to remote communities. Part of the legislation allows for community plans to be developed in remote communities. They are like by-laws, so they will be able to control supply issues in those communities. We are involved with NPY and Waltja in going to the communities, having meetings and working up local strategies to deal with that. So we have a certain part to play.

The legislation has been very good for police morale, it seems. A policeman we were talking to the other day is really happy about it because he does not have to watch sniffers any more and not be able to do anything about it. The police are now empowered legally to take petrol off them and dispose of it. But, at the same time, the police recommendations around how they are going to be enforcing that are fairly tight. Whilst they are sensible to some degree, to some degree some of the provisions are so cumbersome that they might not actually get up. It might be

such a cumbersome process to use the VSA legislation for some things that it might not be effective. That harkens back to the 1985 Senate inquiry. Section 18 of the Misuse of Drugs Act was in response to that inquiry's recommendation to make a law so that dealers could be arrested and people who were chronic users could be arrested and streamed into programs and dried out and all that sort of stuff. That all sounded great, but the practice of it was never taken up by the Northern Territory police and it was very patchily enforced. In fact, various high-level policemen were unaware of that law until we brought their attention to it. That the law existed and how to use it was certainly not part of what they told remote area policeman when they were sent out. Rather, they were told, 'This law exists but it is too cumbersome; we cannot use it, so do not use it.' Some policeman did not do that. When Kintore police station started they got right behind that law and used it to bust a bunch of dealers. They really did achieve a lot of supply reduction around that law.

But this is what I mean about how it is patchy. At one stage, I was talking to a high-level policeman in the drug squad. First, he said the law did not exist, and then he said that it had never been used. We told him that it had been used; it had been used just a few weeks before in Katherine at that stage. Also, there was a policeman at Wadeye, outside of Port Keats, who had been using it extensively and often in collaboration with the community to get particular individual chronic petrol sniffers—who were dealing and getting young kids going—out and into programs. The head policeman from the drug squad was unaware of that. It is better now. The new legislation sort of pulls it all in. And they have taken that section 18 and put it into the new legislation with a few extra protections for informers, which we suggested. So it is all there.

Senator CROSSIN—So it strengthens what was previously there, in a way?

Mr McFarland—Yes. But at the same time some of its provisions are so complicated that they are not going to happen.

Senator CROSSIN—I have just two more questions. I wanted to ask you, Mr McFarland, or even you, Mr Abbott, or Mr Tilmouth, this. You have a lot of recommendations in your submission to us that the Northern Territory government do certain things or take up certain issues. Far be it from us in the federal arena to suggest what the Northern Territory government should do, and I am not sure that Senate committees can go down that path. Is there some sort of cross-agency body or forum set up within this region, of which you might be a member, where you can take these recommendations to government or is everyone acting as a bit of a silo in combating petrol sniffing?

Mr Abbott—We only deal with the agency in town here, ageing and health care. That is the only mob we get funding from. Ilpurla has had the lowest funding we ever received. I did it from 1971 up until 1987, when Steve Hatton was in power. That was the only time we started to get a bit of funding. I used to do it out of my pocket. Now everyone gets funding before they even start. At the lowest, we run them now on $165 a year. That is to get all the fuel, generators and supply for the place and we have 1½ staff. I have been working 24 hours plus year in year out. This year could be better because we are employing one of my own sons. We have no white people in our community to do all the paperwork and the chasing around. We are still cooking out in the flat. We are hoping to get a kitchen. We have the highest number of kids that we have had for years. We cook with a fire under a tree. We only have places to camp in and we have not got the proper resource for them. It has been going for that long.

CHAIR—Mr Abbott, where do the kids come from that go to your service?

Mr Abbott—The kids come from Kintore, Papunya, Nyyirripi, Alice Springs, Docker River, Ayers Rock—everywhere. I have kids with all different languages kids, because I speak seven different languages.

CHAIR—How do they get to you?

Mr Abbott—Through FaCS, Blair or the courts.

CHAIR—So they are formally referred to your service through other government agencies, through correctional services?

Mr Abbott—We have a few of them, yes. I have about seven from correctional services.

Senator CROSSIN—Do you have any ideas about how systems or government departments can respond better or change? Who do you tell that to? Do you have to go to each department?

Mr Abbott—We have been talking to ageing and health care. I talked personally to the Territory health minister. I meet with all these fellas and they all say: 'Oh, you've been doing it for too long. We'll have to do something.' But that has been going on for the last 10 years. I think there are seven funding bodies coming out to Ilpurla tomorrow. That is the first time we will have all seven all in one hit.

CHAIR—All together?

Mr Abbott—Yes.

CHAIR—Are they going to get out?

Mr Abbott—They are going to leave with a bit of a headache!

CHAIR—I was just wondering: they might all arrive there together, but how are they going to go?

Mr Abbott—I sit back and watch the parliament sitting and they talk about this Opal fuel. How is that going to solve the problem? Will it be just on the communities? What about the towns? They are going to push all the problems from the communities back into towns.

CHAIR—Your submission says that.

Senator CROSSIN—I want to ask you about that, actually. This question is perhaps to Mr Tilmouth. Tangentyere Council has responsibility for the town camps. What is the prevalence of petrol sniffing in Alice Springs? Are more kids moving into Alice? What sort of coordinated response is there within the town to assist your council?

Mr Tilmouth—We will always have an influx of young people using petrol but they also cross-educate each other in regard to paint sniffing, glue sniffing—things like that. We are very aware of the problem. We try, wherever we can, to put out spot fires, if I can use that terminology, by having the CAYLUS workers go out. We also run a 'return to country' program, which will assist in getting people back. We work very closely with the presidents of the town camps. They are the first ones to warn us about the issues. They are the ones who have to put up with the effects of young people at night, taking food and generally showing antisocial behaviour. So ours is more of a response strategy for the time being. I don't think we can keep going with this unless we start working upstream. By 'upstream' I mean working with communities, building capacity within communities, creating employment and training opportunities, working on job creation, employment, education and the development of adequate youth infrastructure within those communities. We need to work through those conduits so that it becomes an inclusive system.

At the moment, without the CAYLUS program, we would probably be working in isolation. So there has to be that upstream preventative model that empowers the community and families, and which will work with families. That is the only way that I can see that we can stop people coming into town and substance abusing. As Mr Abbott said, that sort of support needs to be given to programs like his and the one at Mount Theo. The only options we have are to put out spot fires every now and then, but the fire is always burning out in the bush. We need to work out in the bush as well.

Senator SIEWERT—Can we continue to talk about this issue and then I have some other issues to raise. Virtually all the submissions we have received have said that it needs to be rolled out across towns or regionally. I understand from your submissions, and from Mr Abbott's comment a moment ago, that that is your position—that Opal should be rolled out regionally?

Mr Abbott—It is not just a matter of the Opal fuel; you can drive back into Alice Springs for that. If the government put out that much money in order to distribute these fuels, why don't they put more money back into the community to cut the price of goods in the stores? One tin of corned beef costs about $8 or $9. People are only getting $390 to $440 on the dole. They have to live for another fortnight before they get their next payment. Why don't the government subsidise the shop or cut the GST? GST is the thing that is pushing up prices in the communities. The people are suffering. That is why a lot of kids go hungry and then they break into shops and the community staff houses—so that they can get a feed.

Senator SIEWERT—There is another question that I want to ask about the roll-out and then I will come back to that issue. Some evidence was presented earlier that one of the issues about rolling it out across Alice in particular would be the provision of other fuels—ultimate, which is the high octane. I have asked a couple of people if they have any suggestions about how that could be addressed, and I have not really had an answer. Have you thought about it? Have you got some suggestions as to how that could happen—if, in fact, we can overcome that obstacle?

Mr McFarland—Yes, we have certainly thought about it and we certainly think it is controllable. We think it is controllable in the same way that we are currently attempting to control spray paint supplies. A couple of years ago, about when avgas started rolling out comprehensively in the Western Desert, there was a big influx of people into town. In town, it is like William said—the kids teach each other new tricks and so there was an awful lot of spray

paint sniffing going on. It got to be really bad, and it was in all the newspapers. The NT Attorney-General called a crisis meeting of youth services and said, 'What can we do about it?' Various sorts of options were put on the table, for instance to increase how long some youth services were open at night, and that sort of stuff.

We undertook to do a supply reduction strategy with the paint retailers which, with the cooperation of the police, we have put into place and which we are maintaining as best we can, given our obligations in the rest of the region. This is certainly something which could definitely justify a full-time position, particularly if it was expanded to deal with petrol and high-octane petrol.

The strategy operates when people come to buy spray paint from stores. Leonie will bring us cans that the kids have been sniffing. They are one particular brand and we know it comes from a particular shop. We have basically chased the dealers through a number of shops and closed down their options for readily getting their hands on that stuff. Part of the process is locking it all up and getting the cooperation of the stores to make it hard to get at. But also, if you went into the shop to buy some silver paint, your name and licence would be taken. So if you came in the next day and bought six more cans of paint, and the next day six more, that information would be recorded. Then once in a while the shops will ring us and say, 'Come and collect the information'. We will analyse it and talk to the NT police, and the NT police hopefully will then send people around to talk to those people who are potentially dealing.

That is something that we hope will come out of this new funded arrangement that is part of the eight-point plan—the $500,000 that has gone to increase the policing—although it seems like that policing is going to be increased just for that southern region, and the police are not taking on board, to the degree which we had hoped, dealing with dealers in Alice Springs.

We have got that mechanism in place, and it works. The crisis situation went away but there are still outbreaks. It still leaks out more than we would like it to, but it is a matter of resources. We have not got the time to chase that up all the time, but it is a mechanism that works.

Ms Sheedy—Can I just add to that that it has led to a very good community response for us too. It empowered the members of our community to ring and put forward names, because they knew that that was being followed up. Parents and family came forward. That resulted, through their own intervention, in certain people being arrested and other people not repeating that buying of spray for the kids. The community very quickly worked in with that system. Also, people went around with CAYLUS to the different shops to tell them their situation. That was a very empowering process.

Mr McFarland—And certain people are banned from shops; the shops will not sell to those people because we have said that they are dealers, with the support of the police. That mechanism could be expanded to high-octane petrol.

CHAIR—It is a voluntary model, so the suppliers voluntarily publicly became involved in that process?

Mr McFarland—That is correct.

Senator SIEWERT—A similar sort of model could operate with service stations who supplied high-octane fuel. There could be a register and perhaps that bowser would only be accessible if you registered to use it—anybody wanting to obtain high octane fuel would then go into the service station and register.

Mr McFarland—If we used the same model, they would have to produce their licence in order to access that fuel. And then if, for instance, people were coming in in bomb cars and buying high-octane fuel, we could identify that it would be well worth the police going and having a talk to them. And as Leonie said, often people are known by the community to be dealing, but the question is: how do you act on that? This would be another mechanism for that. We have thought about that and we think that there is definitely a way of dealing with it. If we had a staff position to deal with it, they could deal with that and the paint sniffing through protection and supply-reduction strategies for Alice Springs.

Senator SIEWERT—That brings me to my next question—and you touched on it—which is about the money that has been set aside for policing. I think it is half a million dollars. My question is a bit bigger than that: have you been consulted? Senator Crossin asked about the specifics of the consultation of the communities that were to get Opal. Has there been consultation around the program funding for what should be funded, a comprehensive program? Has there been consultation with community organisations and with your organisations? If so, when?

Mr McFarland—I am unaware of any consultation.

Mr Ray—In relation to the policing facility?

Senator SIEWERT—Sorry, I should have made that more precise. That just reminded me of the question. The program in general and the policing reminded me to ask that because you said that the policing money is more for the southern area, whereas it seems like there are issues throughout the community requiring policing and resources.

CHAIR—Is this the state program or the eight-point plan?

Senator SIEWERT—The eight-point plan.

CHAIR—The national program.

Senator SIEWERT—Yes.

Mr McFarland—We should clarify about the eight-point plan. I know William has some views about the region that the eight-point plan is targeting. It is possibly something that should really go to the general media and the general population. When they talk about putting all these resources into the ‘central desert region’, they do not mean the same thing that we mean by the ‘central desert region’. Barry is in the central desert region. He is getting nothing for it, even though he is running the biggest resource available in that whole region for dealing with petrol sniffing. That region in the NT covers three communities: Mutitjulu, Docker River and Imanpa—only those three. They are talking about maybe doing something in Alice Springs as well, but what that might be is pretty nebulous. Certainly the rest of what we call the central

desert region, which is akin to Papunya and all of those other places, are not going to be addressed by that eight-point plan. That is just the way it is.

Yesterday I was at a forum where the people in charge of the eight-point plan put that to the youth workers from Alice Springs. They all said, 'Well, it's really not appropriate, not suitable, not a really sensible way of dealing with it.' One factor of that is that the money that has gone to the police is focused on those three communities. It is the same with the money that they got off the Aboriginal Benefits Account. The $3 million that they got for the eight-point plan can only be spent in the Northern Territory, so it can only be spent, really, on those three communities. There is another Pitjantjatjara community on the other side of the highway called Finke, or Aputula, which everybody has totally forgotten about. It is another Pitjantjatjara community in the southern region that is still affected by the same issues, but everyone has forgotten about that. So it does not seem like it is going to get a bite of that $3 million either. I just point out that the central desert region that they are talking about in the eight-point plan is only a tiny fragment of the problem.

CHAIR—So who set the definition? The definition that we hear is 'the central lands'. We have not got a map that says, 'This is the area.' Who set that definition of the areas to be covered?

Mr McFarland—Somebody decided that would be the COAG site, and that is the way it is.

CHAIR—So it is the COAG site definition, so it would have been a federal government, federal department, decision.

Mr McFarland—It is confusing terminology, because 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. Barry, nothing.

Senator SIEWERT—I could pursue that for ages, but I have got a number of other questions. I was reading the NPY submission. They talk about the Opal Alliance. It is about to commission a cost-benefit study. I understood it to be in relation to how much it would cost to roll out Opal more widely. Has that been done? If it has, what is the cost?

Mr McFarland—It is nearly finished and we are hoping it will be finished in time to be able to give it to your guys because obviously this is the best possible forum where that document could have some value. Access Economics has done a cost-benefit analysis of sniffing. It has compared the cost of rolling out Opal and complementary measures, which would include funding for Barry and possibly Ngaanyatjarra and things like that. It has done an analysis. It has weighed those costs against the current costs that the system is bearing in terms of health, morbidity, educational problems, vandalism, community disruption, court time, prison time—all of those factors. All of that has been looked at by the report by Access Economics and it is a really solid document. Without stealing its thunder—because it is really close to being released—we will certainly get it to you.

I was glad to hear that you said you would still be accepting submissions for the next few weeks because it will be ready within the next few weeks. We would have liked to have had it ready by now but that just was not possible. It will be available in the next few weeks, so we are really glad to hear that you will be continuing to accept submissions for the next few weeks. It demonstrates a very clear cost-benefit advantage—not looking at the human advantages but just in terms of dollars. It makes a lot of sense for the Commonwealth government to invest the dollars in preventing petrol sniffing rather than generation after generation continuing to pay the price for not addressing it and neglecting that issue.

Senator SIEWERT—That would be a really helpful document for us to have. Mr Tilmouth, I understand you wanted to add a comment about your feelings on the eight-point plan and consultation.

Mr Tilmouth—I am very disappointed that this eight-point plan was never in consultation with Indigenous people and the target group, the stakeholders, who are directly involved in this, including Tangentyere Council, Mr Abbott and those other communities that are going to be left in the lurch, so to speak, without any support funding or progress whilst these three communities receive that money—even though $3 million is probably not enough to go right across. Anything that is tried has to have community participation, has to have Indigenous involvement and has to have Indigenous ownership because that is the only way that you can ensure success of programs. That is clear from Tangentyere's perspective because in everything we do we have participation with first and foremost the target group involved. Their ideas and decisions gives them ownership of it. It is those programs that are the most successful. There is a saying that a camel is a horse designed by a committee and I think we are going to end up with a camel. It is not what we really need.

Senator SIEWERT—I would like to talk about a couple of things in regard to town camps, following up a couple of questions that I think Senator Crossin asked. The learning centre is in one town camp; that is my understanding.

Mr Tilmouth—Yes.

Senator SIEWERT—And there are 20—

Mr Tilmouth—There are 18 registered town camps. Each of them has their own strategies according to what they want to do. The Larapinta Yarrenyty-Arltere Learning Centre came about because people got tired of welfare and the police falling over each other trying to get to these kids, chasing them through their houses and across the flats and things like that. People got really tired of that, and said: 'Listen. It's time the community got up and did something because these people do not know what they are doing, and they cannot find any solutions.' So the community got together and they decided to start an intergenerational learning centre, where the old people sat down and learnt with the children. On the periphery of that were arts programs as well as nutrition programs, and various other community activities, including CDEP and the ability for the community to hold meetings at the centre.

The centre has become the focal point of the whole community and everybody accesses it—whether you have worked in it or you are waiting outside to get the bus to get your food voucher at the bank; that sort of stuff. That sort of involvement has built up the community from being

probably one of the most crime-ridden communities, with petrol sniffing and other substance abuse. There were a lot of murders, a lot of violence, in that community. The effort by the community council has diminished that. In fact, for a period of about five months they were sniffer-free. The young people are doing things and it is giving them purpose and a sense of self-worth. They feel empowered by doing things. But every now and then we get an influx of young people coming in. In the remote areas some old grandmothers whose young people were sniffing left them at Larapinta Valley just for some respite for themselves. Whilst they saw that as respite, it was a problem for Larapinta Valley. In the end, we have to work with these people and unless we get solutions from them and give them ownership of their solutions, you can never guarantee success.

Senator SIEWERT—What is the capacity of other town camps to do similar things, if they could access resources? Where would they get them?

Mr Tilmouth—There is another town camp that has a women's softball team, which plays in the town competition. We run a small soccer team for young people, which also plays in the town competition, called the Tangentyere Tigers. Soccer is an option outside of football and rugby, which is what they are very accustomed to. Yet their skill in soccer is extreme. There are a whole heap of programs within Tangentyere that give people options. Not all town camps have community facilities. Larapinta is one of those camps that have a community facility which they have converted to a school. Hidden Valley is looking at women and babies programs—like sewing programs. They have different ways of dealing with the issues, but all have the same outcomes. They get more community harmony. People can work through issues a lot easier in that environment. But, as I said earlier, not all town camps have that community facility.

Senator SIEWERT—If they did want to develop the community facilities, where do they go to get resources? Are there resources available? How complex is it to get access to them?

Mr Tilmouth—The funding side of it I think Leone can talk about, from the inception of Larapinta.

Ms Sheedy—That is the same question that I want answered, because 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. It is the same as you have identified, I think, in the last few days about the amount of reporting—that is, part of the problem is that we are continually trying to identify where we can go now. The Stronger Families and Communities Strategy has been very good for our program. We have had support there for the last four years, but that ends in June, so I am now applying to all sorts of different places that we are trying to identify. Our outcomes fit in the health outcomes, education outcomes, prevention of crime outcomes et cetera. It is right across the board and it is really a small amount of money to put in programs that can affect all those different areas. But I do not know the answer to that question.

Senator SIEWERT—In your submission and earlier you mentioned that the CAYLUS program has to run to 2007. What happens after that?

Mr McFarland—I guess we will have fixed petrol sniffing by then and we can just go home! If further funding is made recurrent then the wheels will fall off and everything we have done will be undone, which is sort of what happened in the Pitlands before. CAYLUS is sort of like 'son of Petrol Link-Up' in the sense that we have the same methodology. Petrol Link-Up ran in the mid-nineties and it was very effective in the Pitlands. It brought in avgas. There was then supposed to be an extension of Petrol Link-Up that would bring in all the ancillary measures to develop and support out-stations, such as Barry runs, to tie up all the recreation programs and do all the other things as well as introduce an unsniffable fuel, but that did not happen.

The amount of petrol sniffing went right down when avgas came in. In theory, all the other things would then keep it down, but those other things did not happen and the amount of petrol sniffing just went up and up. The more it went up the more disillusioned the community got about avgas, which is bad for cars, and they said: 'We've got avgas in our cars and its ruining our cars, and we've got petrol sniffers. What's going on here?' So more and more communities would drop out of the avgas scheme, there was more petrol on the lands, and so it went on.

Senator SIEWERT—It is catch 22 then.

Mr McFarland—That is right. That is what will happen if CAYLUS falls off. 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. Tangentyere carried us at that point. It is like when you said that they are the axle: at that stage the fuel tank was empty, but Tangentyere kept carrying us. Eventually they re-funded us and we got the money in the bank in December.

Mr Ray—But that was a reduced amount of funding.

Mr McFarland—That is right. They will argue that they gave us the same level of funding, but we will argue that it was actually less funding. So, if were not for Tangentyere carrying that program for five months then there would not be a CAYLUS and, arguably, there would not be a whole lot of other things that CAYLUS has spawned and done because of that. If the funding bodies were evaluated in the way that we are evaluated, they would not make it—they would not be up to scratch—even with everybody in the field. We got letters of support from everybody. They could all see that the wheel was a good idea and it was carrying a load. Even with that and a positive evaluation, Tangentyere did not get any money until December.

What will happen? Who knows? Judging by the previous things, it may be the same—either they will not commission an evaluation at all so they can stop funding us and not have the inconvenience of a report saying what a great job we are doing and that we should be refunded or they might get around to refunding us in December. It was really touch and go. Tristan and I were looking at other jobs, because we have to think about feeding our families. As Leonie said,

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.

CHAIR—Good luck. I have a couple of questions on tying it together. One is about the rehab program. Mr Abbott, when people go through your process and then they come home or go somewhere, what happens to them after that in terms of following them through?

Mr Abbott—At the time of leaving my place, I have already organised with their communities for them to get a job. They can go back on the CDEP and do something. If they are young enough—I deal with Yirara—they can go back to school. I have about four there now going to school. I got a report the other day that they are doing better than when they were there before. I have two going back to jobs already; one started this morning back at Kintore.

CHAIR—So once they conclude the period of time that they work with you, is there a plan?

Mr Abbott—I take the worst ones—I do not take the amateurs—the ones these fellas cannot handle. They throw it at me. The doctors say, 'He's never going to survive; he's going to be dead any time.' I have proved those few people wrong. I have a couple of people there now. They are just about ready to go home. There were supposed to have been dead within a week when they came to me about seven months ago.

CHAIR—Do people come back to you? Do you have return visits?

Mr Abbott—I get a lot of kids ringing me up when they go back to their community. They say, 'My little brother is playing up; can you take him?' I say, 'No, get onto welfare or CAYLUS.' Somebody has to pay for tucker et cetera. Because of FaCS, that is the only place people can go to now. When I have kids under 18, they pay for tucker et cetera; that is how they survive. Otherwise, I would have still been paying it out of my pocket; that is what I have been doing all through the years.

CHAIR—Hopefully, after tomorrow that could be improved.

Mr Abbott—As long as you pay for food et cetera; otherwise, how can you keep going? You get $165,000 a year to run the joint, and that has to cover wages for two blokes—two halves and me—but all my wages go back into tucker to feed them, anyway.

Mr Ray—A similar residential service to Barry's has about 12 clients at the moment, 24 hours a day. You would be expecting about $1.2 million per annum in funding.

Mr McFarland—That is what the South Australian one is looking at. They are looking at $1 million a year to look after about four to six people. Barry does the best he can with the resources he has got—he does an incredible job with those resources—and, with more resources, he could do more and better things.

Mr Abbott—I just scrape through. I work out in the open; I do not have a workshop. These fellas get a workshop; I do not have a workshop. I have a tin shed on a mountable that cost me two cartons of beer. A bloke, a contractor, had some stuff left over from somewhere. For an office, we have an old mountable, which we got for about $1,200. That is all. We work out in the

open. We do not have a shed for the kids to play in, we do not have proper grounds for the kids play in, and we do not have a proper kitchen for the kids to eat in. We cook out in the open; we eat out in the open. That goes for all of us.

CHAIR—We have had evidence about whole-of-government responses, focusing on prevention, treatment and rehabilitation in those processes.

Mr Abbott—Yes, a lot of government people were going out there. Scrymgour, the minister, went out there and had a cup of tea with us. She knows where we are, and she knows what we eat out of and where we are cooking. She had a look at it and she said, 'That shouldn't be on.' It is all very good for her to say that but she gets back to her office and does nothing. We had the opposition over there—not the Territory one. We had Peter Toyne's office out there. The Chief Minister's people were out there. They all had a look at it. What are they doing about it? We only have two motor cars—one for running the kids in for emergencies and another one for bringing people into the shops. It is 258 kilometres and our roads are not that flash. You only have to blow a couple of tyres. We have to cut down on fuel some way, otherwise we can't pick up for the next 12 months.

CHAIR—The need for specialised rehabilitation and using the services that have already been in place is certainly in your submission.

Mr Abbott—All the Territory government knows what we have got, because we took them out there and we showed them. They had a look. They have it all in their records, but they are not doing anything about it. Every time they ring up, they say, 'Yeah, we have got to do this.' But that is as far as it goes. Tomorrow I will know where they are going.

CHAIR—If we had time I would like to find out how seven funding bodies could be travelling to one place on one day.

Mr Abbott—They are blaming one another all the time.

CHAIR—I will talk to you off the record on that, Mr Abbott.

Mr Abbott—They are blaming one another all the way around. They do it every year, year in, year out.

CHAIR—Mr Ray, I am conscious that I want to get everybody to have something on record in this process. You mentioned that you were involved in some of the multimedia stuff. That was in a previous life. We had evidence this morning that you may have heard from one of the doctors about the media process at Mount Theo and getting young people involved in that kind of process. Do you want to add anything about the kind of diversionary processes that can work and how that can happen, because I have this terrible fear that because something worked somewhere there will be a churning out using exactly that same response everywhere? I would like to get something on record from your experience along those lines.

Mr Abbott—We should not just be talking about Mount Theo, too; we should be talking about the rest of the communities—they are all Aboriginal people and they are all suffering, mate. I know, because I talk to the people. I go out and see them. I grew up with them and I

speak the language. I know why they are suffering: they are not getting enough—the shops are too dear because the government puts the price up all the time. I am not here just because of Ilpurla; I am here because all Aboriginal people—it does not matter what tribe it is—are suffering because there is not enough money going to the community. Even Centrelink is sitting back pretty. The government says, 'Oh, we've put that much money at it.' What, $450 a fortnight to feed about five or six kids? If they are married they only get half of that. They have a lot of kids and the shops are too dear. That $450 is not going to feed them for a fortnight. Just because old people cannot speak up, they are sitting back pretty and saying: 'Yeah, good. You are all right.' That is where the problem starts. The kids are hungry and the family is hungry. That is why they move into town—the prices are cheaper in town. Half the people living in Alice Springs—all from different camps and different tribes—are here just because of that. They are bringing all the trouble back into Alice Springs. All kids start following. If only one or two goes, the tribe starts to follow. We have to start thinking about the people out in the communities. I can come into town and do my shopping and it is pretty cheap. But those poor people cannot travel 500 or 600 kilometres just to buy stuff and go back again.

CHAIR—We had similar information, Mr Abbott, from Western Australia, and we will have it in Queensland as well.

Mr Abbott—I have been on the media quite a bit on this. I have been on the media this morning, on ABC radio Alice Springs and Darwin. I am in for my people, mate, and the kids who are suffering; I am not in it for myself. It is not only petrol—there is glue, drugs, marijuana. The kids are now drinking grog, too. Then there are all sorts of sprays. If they are going to stop all the spray, they have got to stop the body spray as well, because they do that. If they spray it into a Coolabah packet and chuck it out in the sun for a while, they get a lot of kick out of it.

CHAIR—That is another way of doing it?

Mr Abbott—They have learned all those tricks. I talk to the kids, and a lot of the kids come and tell me what is going on. Who has done what. They say, 'That one there done this last night.' Things that happen in Alice Springs, I just about know from out there. A lot of the kids ring me up and talk to me about it or they talk to their family and they come and tell me anyway. I speak all different languages, except Warlpiri.

Mr Ray—In relation to diversionary initiatives that I have seen that work well in communities, at Yuendumu there is a project called Jaru Pirrjirdi, meaning 'strong voices', which still runs. I am sure you will hear much more about it tomorrow. In essence it is more than about entertaining kids; it is about working with those kids to look at where they want Yuendumu to be in 10 years time and working towards achieving that. It is building up the leaders of tomorrow in a meaningful and sustained way.

Barry has talked about hunger being a major issue. The Gimme and Milner coronial inquest in Balgo in 2004 surveyed chronic petrol sniffers in the community. On average, they had not had a substantial meal for four days. Hunger is a significant issue in communities. Malnutrition is a significant issue. The local rehab facility, the Drug and Alcohol Association, DASA, tells stories about kids eating—and I am sure Barry has the same stories. When they come there, people eat two dozen eggs in a day and then they have a meat meal. They do that several times a day. They have not eaten properly for a very long time.

Other initiatives that are meaningful in communities and are often overlooked are things like art centres, which, when they are run well, provide really good daily activity. They have old people's programs and cultural transfer programs. When they are run well they are very beneficial in communities. Media associations are another good example. The BRAC scheme, which runs across Central Australia, engages many young people. The Warlpiri Media Association, which I worked for, employed about 70 people per year from local communities in different ways. Those figures are phenomenal in terms of the employment of people in communities.

I want to make a comment on Senator Siewert's question about the management of premium fuel. Blair talked about successful models of managing fuel. We have done that. We have worked with retailers and have told them that the jerry cans they are selling are going to dealers. They stop selling them when they know who the dealers are, because nobody likes petrol sniffing. But even if that did not happen we would still be talking about eradicating 90 per cent of sniffable fuel from Central Australia. In fact, it is my understanding that of the 10 per cent of cars that now use premium fuel—and I am sure that the fuel manufacturers association or BP could confirm this—only a small percentage absolutely have to use premium fuel. We also have a model in GPT, General Properties Trust, who are a major roadhouse owner and a partner with CAYLUS and NPY in the Opal Alliance. They own the roadhouse at Yulara and at Kings Canyon. They have already committed to taking out premium completely. They are going to keep a drum of it out the back. When they need to, they will get the drum out and put it in the car.

CHAIR—So you can do it.

Senator SIEWERT—Yes, if there is a will.

Mr Ray—There are examples. Even if it all went wrong, still 90 per cent of sniffable fuel would be gone. It is about availability. When we talk about polydrug use, about ganja—marijuana—versus petrol, we fully work with all drugs. When we support initiatives in remote communities they are initiatives that are going to support families in relation to quality of life and the management of all sorts of drugs generally. But petrol is much more available to kids than any other drug in remote communities. You have to buy ganja. Unlike petrol, it is not everywhere.

CHAIR—Everybody has a chance now to make a final comment. It would be a waste of your resources not to have the chance to say something now. Do you want to start, Mr McFarland?

Mr McFarland—Yes. In relation to Opal, it was very heartening to see in the media that the Australian Institute of Petroleum said there was really no limit to the amount of Opal or that sort of fuel that could be produced by the industry if a subsidy were made available. Some people have said that BP cannot make more than this much, so they cannot roll it out as widely as many agencies, including LGANT, the Northern Territory government and all of us, are asking for, but that apparently is not the case. The Australian Institute of Petroleum says that the formula is available to any distributor. A number of distributors could make it if the market were there. Of course they would; they are a business concern.

The only impediment to rolling out Opal across the whole region that we are talking about is the political will in Canberra to make the funds available. It is probably worth remembering that the federal government take 30c a litre excise on every litre of fuel that is sold, so what we are really asking for is the return of a portion of that excise that they are actually taking from the consumer. In terms of the amount of fuel sold in the Northern Territory, if they rolled it out extensively I think they would still be making millions of dollars on the excise. So there is no real impediment to rolling it out, beyond the will of Canberra to come up with the dollars to do it.

Ms Sheedy—In relation to the roll-out of Opal fuel, I do not know if it was mentioned before that it would be very good if Alice Springs had some sort of monitoring of the effect on the number of people coming into Alice Springs and if there is an increase in petrol sniffing as a result of the roll-out in remote communities. I believe Tangentyere has put in a submission to do that. Certainly, as a community driven project, we are very interested to know if this is going to impact on our project. We feel that potentially it possibly already is, so we would certainly like that documented.

I would also like to address a question from Senator Siewert about whether I knew where we could get funding for community centres. I do know a lot of places. We do have applications in. We are just putting ones in at the moment with the Attorney-General's ICC, and you mentioned one before. We very much fit into the criteria to achieve those outcomes, so I hope that they will be successful. I believe other town camps have put in applications. We certainly have applications in regarding crime prevention. We hope they will be looked upon favourably as there is a lot of potential to do good work there.

Mr Tilmouth—I want to close by saying that we have talked a lot about reducing the supply. I think there also has to be an emphasis on reducing the need. That can be done by building capacity and working with families and creating employment and training—overcoming a lot of that historical powerlessness that Aboriginal people have felt through the ages from the process of colonisation and bringing them back to take their rightful place in Australia by having the same services that we in the urban setting take for granted. There are a lot of youth programs and other things that can be done in remote areas that are not being done. We need to also look at that, because once people get some quality of life I think there will be less demand for petrol sniffing.

Mr Ray—I want to comment on visiting Yuendumu and Mornington Island in relation to the conduct of the inquiry. I have not been to Mornington Island, but my understanding is that there are multiple funded youth services on Mornington, and I know for sure that there are multiple funded youth services in Yuendumu. This makes them atypical of normal communities. Across Central Australia generally the only services in remote communities are schools, clinics and generally a dysfunctional local council that has a whole heap of hopes and dreams pinned upon it that it does not deliver. So when you look at Yuendumu and Mornington Island keep in mind that not every remote community is as well resourced as those places. We fully endorse them and congratulate them on what has been achieved in those communities, but they are atypical.

Mr Abbott—The only other thing I can say is that this other community of ours is Wallace Rockhole. It is pretty small, but we have a school there. The kids go through the school there, and when they are finished they fit straight into the European type schools in Alice and they get

to the same level. They get up to year 6 at our school at Wallace Rockhole. We have only one white teacher there, and we have three Aboriginal teachers at Wallace Rockhole. The workshop is run by Aboriginal people. We have one person in the office. My daughter does the books and things like that, and there are other nieces. When we get Ilpurla going we will not be looking for any outside bookkeepers, school teachers or workshop mechanics. It will all be run by the people on the land, and that is it.

CHAIR—Thank you all very much. Your evidence has been very valuable. As I said before, if there is anything you wish to add—particularly, Mr McFarland, the report you mentioned—please get it to the committee when you can.

Proceedings suspended from 1.15 pm to 2.21 pm

ALLEN, Ms Katharine Lynne, Reconnect Field Worker, Waltja Tjutangku Palyapayi Aboriginal Corporation

ARCHER, Ms Liz, Youth Services Team Leader, Waltja Tjutangku Palyapayi Aboriginal Corporation

HOLDER, Ms Sarah, Reconnect Field Officer, Waltja Tjutangku Palyapayi Aboriginal Corporation

CHAIR—Welcome. Information on parliamentary privilege and the protection of witnesses and evidence has been provided. We prefer to have evidence given in public but if there is something that you wish to talk to us about in confidence we have the in camera facility. We have before us some information that you provided to the committee. I invite you to make an opening statement and then we will move to questions.

Ms Archer—On behalf of our executive members, our board and our manager I formally welcome you here. We have a big workshop that is happening in Coober Pedy around community development and the development of child-care services. Waltja started off as a child-care support type agency. Our executive members, our board and our manager would have liked to have been here but they have been called away to other things. We are their representatives here at the inquiry. I will first hand over to Sarah and Katy to talk a bit about their backgrounds and then I will finish up our opening presentation.

Ms Allen—I will start with a bit of background as to why I am here today. I have been in the Territory since 1994. I first went to live in the remote Aboriginal community of Kintore, where I resided from 1994 to 2000. After that I came to Alice Springs, and I have been working with Waltja since 2000. In the time that I lived in Kintore, I did see a number of young people engaged in petrol sniffing. Originally the number of people was small but, over the years, it has increased. Generally they were young people. There were people who sniffed petrol into their 20s, but generally they were young children from the age of about 12.

There was evidence of petrol sniffing in Kintore in the mid to late 80s as well. There was a petrol related death prior to my arrival in Kintore in 1994, possibly some time in the nineties, which indicates that the issue of petrol sniffing has been around for some time—possibly for about 20 years in a place like Kintore. It has ebbed and flowed over the years, with numbers of young people involved ranging at times from half-a-dozen to even 50 or 60.

Dr Russell Thompson mentioned this morning that at times it was seen as a dominant youth culture activity. In some instances it seemed that young people who were not engaging in petrol sniffing were actually different from the norm. This was often in the eyes of the young people, not in the eyes of the families. Often, peer pressure was a contributing factor. In later years there has been an outbreak of petrol sniffing in urban areas, and in places like Alice Springs there has been some kind of reaction to what is going on.

There has been a lot of labelling of young people as petrol sniffers. Sarah will comment further on that matter. Often, young people who hang out with known, identified petrol sniffers

also are given the label of being a petrol sniffer. In fact, those young people are not always petrol sniffers; they are just associating with those who are. Of course, in some instances that may contribute to young people turning that way.

With respect to Tangentyere, CAYLUS spoke this morning about some of the factors that contributed to petrol sniffing. There are a lot of people here who have a lot of knowledge of some of the reasons why people do sniff petrol. My personal opinion is that there are a range of reasons. Poverty—no food, hunger—is a big one. People sometimes sniff petrol to alleviate hunger. Other reasons are boredom and low self-esteem. There is also the matter of absent parents or care givers. This can mean anything from those care givers being unable to provide support to even being deceased and thus not present in those young people's lives. We do know that statistically a lot of young Indigenous children grow up without parents, and that a lot of the older people are the care givers.

There are other things such as unemployment, lack of activities, oppression, peer pressure, lack of support, lack of school opportunities. Many remote communities have no post-primary education; consequently, young people wishing to continue their education must often live away from home, which causes other problems, often resulting in young people leaving school to return home, where there are very few activities for those young people.

There is a need for more investment in resources, skills and the development of remote communities. There is also a need to skill workers who work with remote communities, as well as people in remote communities who live there all the time. There is the need for increased housing and issues relating to the training of youth workers and meaningful employment. They are all really important in giving family support to these communities. This morning Dr Foster mentioned something to do with meaningful employment and CDEP. That does not mean young people going around picking up rubbish—that does nothing for people's self-esteem and does not engage people and make them feel a sense of self-worth.

I will give a good example regarding training programs. When I lived in Kintore we received a capital grant to run a small building program. We sought the support of CAT, the Centre for Appropriate Technology, to run a training program whereby the young women built a women's museum or a women's keeping place for the housing of traditional artefacts and important cultural objects. Those young women were engaged in that process.

It was a long project. It took probably a year to 18 months to complete, and it involved a skilled teacher trainer who would come out, who had technical skills. With that person, the young women built this fantastic museum, which was a good example of community control over and ownership of something that was built in a community. Those young women would speak about that time when they did not engage in petrol sniffing, they had a job—they received Abstudy at the time—and they got a lot of fulfilment, a lot of skills and a lot of support from the community. It was a great project. I know that Liz is going to speak more about training, employment and things like that. I think that is pretty much all I want to say.

There was also a comment this morning about people's perceptions of petrol and whether they identify it as a problem. Most often, when you sit down with people in remote communities—and, I am sure, people from all over the place, but often just sitting down out bush with people—people can tell you and identify that it is a problem and a worry that they have with their

children. They are concerned about it, and they want to deal with this—they want to stop this young person. They do not know what to do. They are trying really hard.

It is something that is ever-present in people's lives. It is not as if someone will deal with it in the morning and that person will be okay in the afternoon; it is 24/7. I often use the analogy of smoking when people say, 'Why do people sniff petrol?' and 'Why don't they stop their kids sniffing petrol?' It is like if your children smoke cigarettes and you take the cigarettes away. They go and get them. You tell them not to smoke and you tell them not to smoke, and they smoke—or sometimes they do not. But it is a hard one, and I think that there are communities that are weighted down and trying really hard to deal with this as an issue.

Ms Holder—I probably do not have too much more to add to what Katie has already said. I think she has put it very well. I will just briefly let you know my background in this sort of area. I started working in Papunya in May 2003, I think it was. My father used to work out in Papunya, working for the land council, so we would visit Papunya on and off throughout my childhood and university life. So I have had a good relationship with the place for a while. I worked for the council as a Centrelink agent. That role encompassed a lot of other things as well; it was not solely related to Centrelink. I then started working for Waltja in November 2003 in the Reconnect program.

This is something that we feel very passionate about. We have lived in the communities and we get to know the young people who are sniffing petrol and who are attempting suicide, so it is a really emotional subject for us—and for them. There are a few things that I want to talk about, mostly in relation to Papunya. Sorry; I should say that I am now working in Mount Liebig, which is 310 kilometres west of Alice Springs, just down the road from Papunya.

When I was working in Papunya, a lot of the young people were sent to Barry Abbott's out-station by FaCS or through intervention by CAYLUS or Waltja. The feedback that we got, mostly from CAYLUS and from families, was that these young people were really healthy. One comment that we heard a lot was, 'They're really fat now; they're really good and they're really happy.' And then, as soon as they went back to Papunya, they started sniffing petrol immediately. They do come back a lot happier, and their English skills and self-confidence tend to be a lot better, but they do start sniffing petrol immediately. We think that that is because there is very little support on the ground at Papunya. It just seems such a shame that all Barry Abbott's good work is being undone because of lack of support.

Another thing is that often, when young people stop sniffing petrol, they start using other drugs like marijuana or drinking. Something we hear a lot is, 'It's really good. I'm not sniffing petrol anymore; I'm drinking.' That is not really monitored so, when we have it on the database that they have stopped sniffing, that seems to be a closed case. It is not the case at all; they have switched onto other drug use. As the doctors mentioned this morning, there is a lot of polydrug use as well.

We try not to label the young people as petrol sniffers. Some time back, a man out at Papunya said that young people took that term on and turned it into almost a gang label, where they were saying, 'We're sniffers, we're really tough, we're really strong!' There is a bit of graffiti out at Papunya that says, 'Sniffers will never die!'—which is ironic. So there is a culture around sniffing, and that is a problem.

When we were in Papunya and also in Mt Leibig, community members asked Waltja to put the young people into cars and take them away—take them to Mount Theo or to Barry Abbott's out-station. Waltja works only with voluntary clients, so we do not have the power to do that anyway, but we found that the community members were desperate. They are really worried about their young people. It is completely untrue that they do not care—I know you hear that a bit. These people are really worried for their children. They are seeing their children dying and they do not really known what to do. They want the help and support of organisations like Waltja and the police, and departments like Health and Education. They really need those organisations and departments to help so they can deflect the blame away from the community and from individuals, so the community leaders do not have to take on the responsibility for this. In a way, we are somewhat removed from the community so it is easier to get us to do these sorts of things.

I should also mention that overwhelmingly the people out in Mt Leibig and Papunya say that they fully support the roll-out of Opal and that they would like it to be widespread. A comment that is also commonly made to me by people living in town—people who have children who live out bush and the people also sometimes live out bush—is that their children are sniffing in town. They say: 'They should not sniff in town. You got to send them back out to Papunya or send them back out bush to sniff, because it is not safe to sniff in town.' So it seems that the education has sort of worked to say that you should not be sniffing petrol, but it has really been interpreted as, 'You should not be sniffing petrol in town—you should go back to Papunya where everyone sniffs.'

I also wanted to pick up on a point that one of the doctors made this morning. Any successful project like Mount Theo needs to be community owned and run, and that is why Mount Theo is so successful. When I was living in Papunya, World Vision and the school and I, through Waltja, set up an activities project where we would take the kids swimming and all sorts of fun things. Because of that program, a few young people were not sniffing as frequently, but we also managed to not get any new sniffing recruits over this particular period of time. But then, due to various factors, that program fell apart and, because it was not community owned and run, because the whitefellas were pulled out of it the project just completely fell apart. So Waltja really supports building up a community base and training Anangu workers and supporting the Anangu to take control of these projects.

Ms Archer—I have lived in Alice Springs for about six years. I have worked with Waltja as youth services team leader for the past three years. I have a background spanning 22 years in the youth sector, including 10 in training youth workers in three states and territories. That is some of the expertise that I bring to Waltja. I have learnt a great deal as a non-Indigenous worker working with a whole group of Indigenous people who are very passionate about and very committed to what they are doing.

What I can leave for the committee is a map that shows the current funding that we have for each of the youth specific services—not for all of Waltja but just the youth specific stuff. It will indicate some of the distances that projects have to travel in each different area. None of our funding is secure beyond June 2007—that is just in terms of our program delivery. Also, Waltja tends to focus more on training and development—we are a registered training organisation. We do not tend to do so much of the actual service delivery, so the stuff that Katie and Sarah are talking about in terms of our Reconnect project is a little bit different as well.

CHAIR—If you could give that map to our secretary that would be helpful, thank you.

Ms Archer—We would also like to point to some of the bigger strategies or sets of principles that we have noticed that are guiding these sorts of initiatives. There is the overarching agreement between the Commonwealth and the NT government that also includes the COAG principles. There is the report on overcoming Indigenous disadvantage which had a very interesting appendix that looked at Aboriginal population demographics. It has particular relevance for the Northern Territory and in particular for the remote communities that we work with. At Territory level, we have *Building a better future for young Territorians*, and two or three of the five or six key areas in there focus on things that are related broadly or specifically to petrol sniffing, including sport and recreation, activity programs, employment and education outcomes and some of the other things that people have been talking about.

What our members are saying to us is: 'Okay, we've got all of this stuff here, but how much of it is being driven by the community and how much is coming from the community?' Big programs are a great idea. Everyone things: 'Yep, there need to be activities out in communities. So, okay, we'll fund a bit from here and a bit from there and we'll say that these communities should have them.' But then the auspice agency carries the load of trying to implement the strategies within a government time frame, rather than perhaps that money being available over a longer period of time and us being able to work directly with the women, with the families, with the fellas, so that they can say, 'Yes, this is what we want,' and we can then say, 'Okay, let's see how we might make that happen.'

Community councils by and large are so fragile and they have such huge jobs. I would not want to be a town clerk. They are responsible for all sorts of management within communities. Very few people have got experience in youth work or community development. Often when youth workers are employed in communities it might be a very pragmatic decision that gets made because there is no staff accommodation for someone outside the community. You might get someone who comes in to work, for instance, in the clinic as a nurse or whatever, and that person has a partner who can kick a footy around with the kids so he becomes the sport and recreation officer. And that arrangement lasts for as long as that couple lasts in the community. So what our members are also saying is: 'Yes, we know the situation is desperate, we know the situation is critical, but we want our people trained up properly to run services in our way in our communities.' That is all I would like to say at this point, thank you.

Senator ADAMS—You say that increasing the number of fieldworkers and providing accommodation in remote areas would be the best things to contribute to improved service delivery. With the shortage of skilled workers or anyone trained in this area how are you getting on with regard to supply?

Ms Archer—It is really difficult, for all of those practical reasons that I just mentioned. Often organised agents like Waltja have very limited influence upon what an individual community council is doing—and that is quite right: the power should rest with the local community. But the local community then needs to have some support and skills in getting better infrastructure. Also, services for young people often come pretty low on the pecking order of huge undeniable needs in the community. So we were really pleased when the NT coroner suggested that youth workers should be viewed as essential services in a remote community context.

Senator ADAMS—As far as asking younger people what they want, are they able to give you really good direction in that respect?

Ms Archer—Yes.

Senator ADAMS—What would a few of those things be?

Ms Archer—They are wanting training, they are wanting not to be bored, they are wanting trips to the waterhole, they are wanting to go to town. They would not mind a trip to Melbourne to see how other people live. They might want a bit of encouragement or support with art.

Ms Holder—They want meaningful employment.

Ms Allen—Some of the women say they want some hairdressing skills or they want to do some sewing or they want some more art or they want a job—all sorts of things.

Senator ADAMS—To address the supply of fieldworkers, is there any opportunity to train some of the people up there to help in their community? Can you access that?

Ms Archer—That is what we are trying to do in our model at the moment. We have got Katie and Sarah employed as our fieldworkers and then, within each of the four communities where we offer Reconnect, we have got capacity to employ two part-time local workers. We have five of those eight positions filled at the moment.

What makes it difficult is that our workers are working across two communities and are trying to work in an intensive way, particularly where there are big problems in those communities. If you are visiting a community it is not the same as if you are actually living in a community, particularly in terms of that mentoring with local people and learning from local people what culturally appropriate service provision might mean too.

Senator ADAMS—Do either of you have a comment about training these people and acting as mentors?

Ms Holder—I am sorry?

Senator ADAMS—Ms Allen or Ms Holder, do either of you have any comment about how we can go further forward in training these fieldworkers to help you—you mentor them and bring them up so they can assist in their own communities—seeing as you are saying that it is difficult when you are visiting? What we are really looking at is trying to get the community people to take carriage of looking after their own people. We have to come up with some recommendations. I am just trying to tease it out.

Ms Allen—One thing I find often in communities is that people who have a lot of get up and go and are committed end up wearing a lot of hats in the community. They are overworked and on a lot of committees. There is the old saying: if you want to get a job done, ask a busy person. I find that the people who I work with out bush—the people who are employed in Reconnect—also have other things, other priorities and other work and they want to give as much as they can to their work. They also are the best people for that job. They have got a real interest in what

they are doing. They have got some really good skills. They would like to be doing more and yet they are also struggling with all those other issues that people struggle with when they have got families and are living in a place where they have environmental and social issues in the community or whatever.

It is a long process in lots of ways. Our committee members will say to us that they want to work slowly and steadily. They want us to walk with them and work with them and not rush people through the process. We often tend to rush people through the process because we want to get our results, so we will push people through without people being allowed to set their own goals and learn their own steps and set their own direction of how things are going to be. So it is a process that does take time and it does take concentrated effort to actually support people and not dictate or be paternalistic about how you do it. Going back to the mentoring issue, we find that it is a process and it will take time. I think we need a few more resources for people to do that and training for people all along the way to do that too.

Ms Holder—It is very difficult for people who live in really remote communities to access training. Most of the formal training that they are offered is based in Alice Springs or in Batchelor. It would definitely be extremely helpful if these people could receive training in their communities.

Ms Archer—Or with their one language groups. So you might be training people across a number of communities but it is a smaller training group and it is one language. There is a tension; some people would say, 'What you need to do is put your mentor out and have them living in the community.' For us, it gets back to what the skills base of that person is to begin with. So what we are needing throughout Central Australia are people with a really sound community development background who can actually do that growing up. As the doctors were saying this morning, it can be quite a complicated process.

Senator CROSSIN—Thank you for your time today. I will ask you about something that was also in the CAYLUS submission following on from the coroner's report about youth services being seen as essential services. How does that happen or how can that happen?

Ms Archer—I think it comes from valuing our young people better. Young people are quite a disadvantaged group across Australia; they are the most disadvantaged of the disadvantaged, in some ways. I guess it is having people who can advocate for youth work as being an important function within community life. We are hearing that from our members the whole time. We had a big training workshop at Waltja where women from 15 different communities were giving us their ideas on training, and we did not say 'young people' once—it was across the board. And yet youth and young people came up the whole time in terms of that training.

Senator CROSSIN—Is this about perhaps putting a youth services officer in communities or developing a department of youth services? How do you see it?

Ms Archer—I think most communities are too small to sustain their own youth office. I guess what you need is an agency or an auspice that is separate from community councils and that has employed qualified, experienced staff to begin with who can be doing that advocacy work for fledgling youth type agencies. The other thing that people need to be pretty clear about in developing that is the difference between activity based youth work and support based youth

work. The activity based youth work is the sport and rec, the arts activities—that sort of stuff. The support youth work is the stuff around referrals, what to do if someone attempts suicide, child protection and all those other issues.

CHAIR—More the social work side.

Senator CROSSIN—Your submission also recommends that the Australian government take a lead role in ensuring participatory consultation with remote stakeholders and a whole-of-government response to petrol sniffing. This is something that was raised with us in Perth. Is there a role for the federal government to do this? Is there a place for them to do this?

CHAIR—And how would they do it?

Ms Archer—When I look at most of the organisations in Alice Springs that I am aware of, and particularly those that are resourcing remote communities and those with identified petrol-sniffing problems, most of our funding comes from the Commonwealth government. Also, given the whole-of-community, whole-of-government approach that seems to have been taken up so strongly, the Australian government is resourced to take carriage of that. But in terms of processes, really it is about working in closely with people who have first-hand knowledge of what is going on in communities and it is about improving linkages with remote communities. I am not too sure whether that is best achieved by people actually visiting communities. Some people say the bureaucrats should go out there and they should be visiting these communities, but then the communities go: 'My gosh, we've seen all of these troupies come and go, come and go, and we're not too sure what those people are doing.'

CHAIR—Seven in one day, we believe.

Ms Archer—I think it is developing better linkages with the people who are providing the services and, in particular, the people who are living in those communities through those services.

Senator CROSSIN—The eight-point plan from OIPC with $1 million to Docker, Mutitjulu and Imanpa: should every other community in Central Australia get a million dollars? What would they do with it?

Ms Allen—We would have to say yes to that one, but of course we know that.

Senator CROSSIN—That is why I asked! Before you go on, can I ask: why those three communities—do you know why they were chosen? Why not other communities? Is $1 million too much for some communities or is that a good starting point?

Ms Allen—Personally I cannot comment on that because I do not work with those three communities. I will leave it for someone who does work with those communities to make a comment. I might even pass this over to Liz. I think the money issue is a big issue. If we are looking at addressing and solving this then we have to be real about it, and that means we have to actually spend some money in this area. But the way we spend the money is what is really important. It is about how we resource it, how we train people and how we listen to what people

are saying they want to do with that money out bush and also in town. I think that is really important. I might ask Liz to comment on that a bit more.

Ms Archer—When we heard 'whole of government, whole of community' we thought it would be whole of government and it would be whole of community, that it would be all communities somehow and that it sounds great.

Senator CROSSIN—That would probably be a reasonable assumption to make.

Ms Archer—There are all sorts of different consultation processes that seem to be happening at different levels with different people. We hear about some of them; we might not hear about others. Maybe it is not necessary for everyone to be in on everything, but we need to have enough coordination between everyone who is doing things to make some unified comments, I guess, or to look at regional needs.

I was at a meeting yesterday where a number of people expressed concerns with the idea of another regional trial. People already know how many more regional trials we need to have. That was one concern that some people were raising. Another concern was about regional boundaries, because they do not seem to make much sense in the overall context. If the argument is put for rolling out Opal regionally—and we are saying that Opal is not going to work unless it is rolled out regionally—we think that the same is true for reducing demand as well as reducing supply. There are a number of identified communities that are not included in that site that have a crying need for those services.

A third thing that was said in the meeting was about the danger in identifying some communities as being petrol-sniffing communities and some as not, because we know that the other substance abuse issues and other concerns in most communities can be equally as pressing but they are not likely to get resourced if they are not included in a more holistic strategy.

Senator CROSSIN—I want to ask about the roll out of Opal. Is it something that the people you work with want to see happen at any cost?

Ms Holder—The people that we have spoken to do want Opal rolled out across the Central Australian region but not at the expense of other projects. Basically, we want to see support for community workers in this area. We want to see more support for the families. The people that we speak to want to see these things.

Senator CROSSIN—I suppose when I say 'at any cost', I will requote the figure that $12 billion is gained for the federal government in fuel excises and they spend about $19 billion on rolling out Opal fuel. We understand from our meeting with BP on Monday in Perth that there is not a problem with supply. There is not a problem with transporting it to communities. In fact, they even take it to Croker Island and Elcho Island here in the Northern Territory. They just need to be paid to do that.

Ms Archer—We were informed at the meeting yesterday that a full roll out, including Alice Springs, was not affordable with government dollars and there was not enough supply. In any case, there was that argument that with the two per cent or whatever it is that it is unfeasible to use Opal in mitigating against that.

CHAIR—Who told you that?

Ms Archer—It was one of the OIPC delegates at the meeting yesterday.

CHAIR—We will follow up on that because it is a key point that that was information given to the community.

Senator CROSSIN—You will find the *Hansard* from Monday's meeting in Perth interesting then, particularly the evidence given to us from BP.

Senator SIEWERT—Since we have been talking about recruiting and training, I want to follow up on that, and I have another question separate to that. A number of the submissions have been talking about the difficulty in recruiting the sort of skilled staff that communities need. I am just wondering if you have encountered the same problems and have any recommendations or suggestions about how those problems can be overcome.

Ms Archer—It is a problem across the region and in a whole lot of disciplines, not just youth work or even community services. Some things that we have talked about are getting onto the university websites to try to attract new graduates and getting a pool of workers who might be available for short-term projects and could come in at specific times. We have talked about maybe getting some support in specific communities from the Indigenous community volunteers who are starting up here. Apart from that, it is pretty much word of mouth and a lot of us end up working around town in different agencies over a long period of time.

Senator SIEWERT—There are two things in that. In Perth a couple of agencies are looking at each other pinching each other's staff. I think the CAYLUS submission—although, to tell you the truth, I have read so many submissions that I might be wrong about that—suggested that you could take a regional approach to recruiting staff and that an organisation could take responsibility for being like a broking house—my words, not theirs. Do you think that would work, and do you think it would get the support of other organisations?

Ms Archer—I think it would take the pressure off community councils in terms of employing staff. There could be some benchmarks that could be developed through that as to how you recruit. There probably needs to be some finetuning or some agreement about what competencies we were looking for and that sort of thing. I do not know: I have not spoken with our management or executive about this, so you are hearing a personal view from me in this instance.

Senator SIEWERT—My next question goes to after-treatment care. How much is there at the moment? If there is any, how important is it? If it is important and it is lacking, what could we do to improve the situation?

Ms Archer—I would like to precede my answer by saying that we have a real difficulty with treatment services themselves. We actually do not have any in our region—sorry, we have two beds in one facility—under that treatment model. There is some very good work that Barry Abbott, Mavis Malbunka and others are doing on their homelands in terms of respite. That is the closest approximation that we have to treatment that is working at some level. Then there is just the individual family support that different agencies are giving to individual young people,

parents or whoever around petrol-sniffing related issues. That needs to be addressed, and the NT government has dedicated some funding to it to get that happening. But even if kids do choose to stop and they have support et cetera, it is what Sarah and Katie were talking about before: often, as soon as they leave whatever facility, there is inadequate follow-up and support. Basically, nothing has changed in the situation that has led them to start sniffing petrol in the first place. That is also why our management committee is so strong on the diversionary activities and the education and training for young people.

Another thing that they are also really strong on is the cultural component of youth work: things like taking kids out on bush tucker trips. You do not just take the young people or the little kids; you have an aunty there, you might have a grandmother there, you have other people who can talk about the country. It gives everyone a little bit of a break from the community. People are learning the whole time. When we talk about educational outcomes at Waltja we always include Indigenous as well as mainstream.

Ms Holder—To add to that, in Papunya, the community that I have worked most closely with in regard to this, when the young people do come back from Barry Abbott's out-station—the main out-station they come back from—at present there really is no follow-up support for them, except for one sport and rec officer who is seriously overworked. He does not really have any support himself. So there really is no follow-up for these young people whatsoever.

Senator SIEWERT—You were talking about that before. People are coming straight out and going back into the cycle again. So, in order to break that, not only do they need the things we have been talking about, such as the diversionary approach, but they also need immediate after-care support from people with expertise, which you cannot expect youth activity workers to provide. Is that the point?

Ms Holder—Yes. Like Liz said, we do support diversionary activities—they are incredibly important—but these young people need more than just activity based support. We think that they should happen in unison.

Senator SIEWERT—Yes, and that is not provided at the moment?

Ms Holder—No.

Ms Archer—Often not in the community. There might be occasional support available through visiting agencies. They could be non-government agencies like CAYLUS or the casework component of our project; it could be mental health or it could be other visiting people, but it is very thin and patchy.

Ms Holder—And the main worker from CAYLUS who does the follow-up work is Phil Hassell, and he is one man trying to help a lot of people from a lot of different communities.

CHAIR—As I have told other witnesses, if you think of something you would like to share with us, please get it to us, because the committee will not be reporting for a couple of weeks.

Ms Archer—Just one last thing—we are going to table some magazines that will give you an idea of some of the projects that are happening in Central Australia.

CHAIR—Thank you.

[3.07 pm]

GILLICK, Ms Vicki, Coordinator, Ngaanyatjarra Pitjantjatjara Yankunytjatjara Women's Council

INYIKA, Mrs Janet, Worker, ESWB, Ngaanyatjarra Pitjantjatjara Yankunytjatjara Women's Council, through Ms Holly Webb, interpreter

SMITH, Mrs Margaret, Vice President (Chairwoman), Ngaanyatjarra Pitjantjatjara Yankunytjatjara Women's Council

CHAIR—Welcome. Do you have any comments to make on the capacity in which you appear?

Ms Gillick—I am employed by the Ngaanyatjarra Pitjantjatjara Yankunytjatjara Women's Council and I am answerable to the executive. I manage the organisation on a daily basis.

CHAIR—Information on parliamentary privilege and the protection of witnesses and evidence has been provided to you. The committee prefers evidence to be heard in public, but if there is an issue you would like to have heard in camera please let us know and we can make provision for that. We have the submission from the council, but we have the opportunity for people to make a short opening statement and then we will go to questions.

Ms Gillick—I have been nominated for that honour. I will be brief. The senators would probably have some awareness of NPY Women's Council's involvement in the issue of petrol sniffing and matters relating to youth over many years. We have been involved in two inquests in South Australia, two in the Northern Territory and various other inquiries. The organisation has over many years been heavily involved in lobbying in relation to having a sworn police presence in each of its main communities in the cross-border region. The organisation has actively supported the avgas or Comgas scheme. We employ staff, using mainly Commonwealth funding, to do youth development work in communities.

Since BP created the Opal fuel—which, as you know, is low in hydrocarbons and generally referred to as being unsniffable—we have been involved in lobbying to have that subsidised and made available in communities other than just in communities that are on avgas or that are eligible for avgas. We have been working in the last year with CAYLUS, from whom you heard this morning, and General Property Trust, who own a number of hotels, including resorts, in the region. Together, we are doing a cost-benefit analysis of the implementation of the use of Opal in a much wider region than it is used in now.

We have also been actively lobbying the federal government during that period, and we note that there has been a substantial extension of the original availability of subsidised Opal, which was previously just available to communities which were on the avgas register. It is now being offered to a number of commercial outlets at a subsidised rate, although we also understand that some of those in the area are for their own reasons resisting taking that on at the moment.

We have been involved in discussions with the South Australian government about their proposed rehabilitation facility to be built on or near the Ngaanyatjarra, Pitjantjatjara and Yankunytjatjara lands. We have also been involved in discussions about the new Northern Territory legislation which, on my reading of it, it appears might become a complicated process in terms of community management plans and so on. We have yet to see how that will pan out.

The members of the NPY Women's Council have an enormous interest in this because many of our 26 or 28 member communities are affected, particularly those on the South Australian side. You would probably be aware from the most recent South Australian coronial inquest that at that stage there were around 222 sniffers out of a population of under 3,000 people in that north-west region of South Australia. There is an enormous generational loss from sniffing.

The members are very keen to try supply reduction, because with avgas there was some reduction in the incidence of sniffing. However, the proximity to regular and unleaded fuel was noted in the evaluation and anecdotally as the greatest barrier to supply reduction. The members are very keen to see that the new fuel is made available in a bigger region in pursuing that. The organisation believes that without stopping the supply and trafficking—and that includes grog and cannabis as well—you cannot really put a dampener on what is happening in communities. People cannot really even think about getting on with their lives unless you deal with that upfront.

We possibly take a different view to some other organisations or people who continually talk about the underlying causes in that we think it is such a crisis that you really need to deal with that addiction or habit of sniffing and substance misuse. The generational loss is so great and the crisis is so bad that if you do not deal with that immediately or in the short-term future then there are not going to be too many people to worry about underlying causes. That is why the NPY Women's Council is involved: because it affects our members and their families.

We do the cross-border care respite for the region, and many of the people for whom we are doing that are young people who are looked after by ageing parents. Their parents are getting older and passing away, and these young people are being left with no carers, and they require pretty intensive care. We also provide disability case management services for the cross-border region and many of our disability clients have physical and intellectual disabilities secondary to petrol sniffing. Our staff deal with that every day.

I want to note some references that have been made to Mount Theo. I noticed a story in the *Age* the other day and people have talked about it here today. I really think the committee should be very clear that Mount Theo took quite a long time to get to the point it is at now. It was not just a matter of a couple of Aboriginal people popping up out of the desert and suddenly deciding to take the kids away. It was very much a team effort with very skilled non-Aboriginal people working together with those people. To believe that that can be replicated all over the place just by pumping in a bit of money or finding a couple of people is probably not a very sensible avenue to pursue. Mount Theo is a great model and we all wish it could be happening everywhere. But it did not just pop up overnight. It involved 10, 12 or more years of very intensive work, starting from very little, with people who agreed to take any Warlpiri kids to their out-station and overcame or decided to disregard particular cultural things in order to deal with this issue.

I hear people such as Minister Abbott talk about Mount Theo in a way that suggests it should just happen and that somehow the so-called elders should rise up and deal with this. If communities could deal with this problem they probably all would have done so many years ago—and I think Maggie Brady's letter to your inquiry sets that out very succinctly. A lot of communities are crying out for help, which is why I think our members really like the idea of Opal—that someone has invented something that is really useful and could really help them—and therefore think why not make the best use of it they possibly can.

I think you have already been addressed on the issue of whether the Opal cost- benefit analysis will be completed. I think you will find that the cost of having Opal in a very wide central region and quarantining it, if you like, provided that BP can provide enough fuel—which, I think, is still being discussed—would be far cheaper than the associated social, economic and health costs of not having it in the region.

CHAIR—Ms Gillick, are you doing the opening statement for everybody?

Ms Gillick—Yes.

CHAIR—We will now go to questions.

Senator SIEWERT—You mentioned the proposed rehabilitation centre for the AP lands. Was your organisation consulted on that? What is your opinion of the location and how effective it will be?

Ms Gillick—The women's council held an executive meeting at Warburton in Western Australia last year and Mr Kaye—a South Australian government employee, who is here today—came and spoke to the executive about it. There have been numerous discussions, as you would probably be aware. I think the coroner originally recommended that a facility be built on the lands, and there have been quite extensive consultations.

I think it would be fair to say that a lot of the women would like to see something built on the AP lands. However, Margaret raised with me late last year that that of course would only be available to people from South Australia. We certainly talked about that at that stage and suggested that that was not very suitable. Of course, if it is ever built and utilised, it will probably fill up very quickly with people from South Australia. In terms of practical issues, I have raised a couple of things with the executive. Whilst many of the women are of the view that it would be great to have something just about anywhere and that on the lands would be terrific, the cost of building and the issues of recruitment and retention of staff, from a practical point of view, will be extremely difficult. They are practical considerations.

We have a lot of trouble recruiting. Health services in the region have a lot of trouble recruiting at the moment. Central Australia is no longer flavour of the month and the more dysfunctional communities get, the less likely people will want to live and/or work in them. It is really hard to get skilled workers and accommodation is always an issue. We now have three staff houses, which were built last year. Until then, we had one in Wingellina, Western Australia, which a community council whipped off us in the last few months. Being in that position is very difficult. You can rarely get a written lease, regardless of the fact that you might have paid rent for six years and had the house and the office. They just decided to move someone else in late

last year. So we have lost what used to be our only staff accommodation. We have not seen any detailed costings or plans yet.

The other issue that we were discussing this morning is the Commonwealth's role in this eight-point implementation plan and the Commonwealth telling us that it will deal with this issue and put some money and some resources into it. I think the Commonwealth should be taking a lead in this. I think Coroner Donald—as he then was—in 1998 recommended that a detox and rehabilitation facility be built in Alice Springs. Of course, that has not happened. It would be nice to see the Commonwealth take a role and try to pull the states together in this. We know that the South Australian government would like to have something in South Australia. The Northern Territory is finally making some efforts to have some treatment available in Alice Springs. Whether it is a good idea to plonk something in the middle of Alice Springs is also debatable, because people might run away and get homesick and whatever. But, at the moment, we virtually have nothing. There may be better places to build a facility.

Another suggestion that we recently put to South Australia about this is to perhaps have something that is movable—and I do not mean a caravan service—something that could fit in with the Anangu Aboriginal lifestyle. You could use good, demountable buildings, and set them up somewhere—maybe near Anmatyerre or Mutitjulu or somewhere—if you can bear to look at it in a cross-border sense, and of course we would like that. You could work in an area for a year, then if you had dealt with some things there or there were cultural reasons or the weather was too hot or whatever, that facility could possibly be moved. We have asked the South Australian government to consider that possibility as well. You do not want to have something that is built in one place and which may end up being a white elephant where you cannot get any staff or people decide they do not want to go near that particular place anymore. So some sort of mobility might be a solution to that.

Mrs Smith—I think it would be a good thing for South Australia if something were built out there, instead of looking at cities all the time.

Ms Gillick—It will be a rehabilitation centre; it will not deal with detoxification—that is our understanding at the moment. It will be for longer term rehabilitation and it will not deal with chronic brain damaged sniffers. That is my understanding, unless that has changed. I am told that has not changed. You have different levels as you have people who presumably need different treatment. At the moment we do not really have anything. We would say that people who are sniffing need to be assessed, detoxed and have some sort of treatment. I am not a treatment expert. There are no treatment facilities for petrol sniffers apart from the out-stations in Australia, so we really do not know what works, so people who tell you that you can only approach it through a voluntary drug and alcohol framework may be right or may be wrong, because we do not have anything at the moment so we do not know. We want an approach of supply reduction, intervention and assessment. We want decent youth workers in communities who have decent salaries, accommodation, support and supervision. We do not want any old person who happens to be plucked out while wandering through the community at the time but someone who has a criminal history check and has some skills if not formal qualifications.

We want trafficking—or smuggling, as Margaret likes to call it—dealt with, which may happen with this eight-point plan with a trafficking intelligence desk. There would be only a couple of extra police officers but they would be trying to take a coordinated cross-border

approach—and if they do manage to get a couple of sniffer dogs, that would be all the better: some of the dealers in the region might start having second thoughts about whether or not they can sustain their business. Cannabis use is enormous as well. I think that on the Western Australian side it is currently a bigger problem than petrol sniffing, because those on the Ngaanyatjarra lands have had the advantage of being more remote and further away from roadhouse outlets, even with avgas and even prior to Opal, whereas the South Australian and Northern Territory communities are worse—it is just up the road. If you accept the argument that proximity is a barrier then if you quarantine the whole region that at least might have a sporting chance. It may not necessarily work, but what has worked? We think doing that is worth a try.

Senator CROSSIN—Where are Mrs Smith and Mrs Inyika from?

Mrs Smith—I am from Imanpa in the Northern Territory, near the Lasseter Highway.

Mrs Inyika—I am from Amata in South Australia.

Senator CROSSIN—I wish to go to some of the things you said in your submission. You have questioned the usefulness of the voluntary code of behaviour for fuel suppliers. Do you want to make a comment about the implications there?

Ms Gillick—Are you talking about whether commercial outlets should have a choice as to whether—

Senator CROSSIN—Yes. It was raised with us in Darwin. I am wondering if you have a view on that.

Ms Gillick—Margaret is saying that people should listen to people from the region—the landowners, meaning landowners in a traditional sense, because the local population does not necessarily have title to what the roadhouses are on although in some places they might. A number of them have said to me that, if people in the region do not voluntarily take up the subsidy and do not take on Opal if they are offered it then the women would like to go around and talk to them because they really should respect the people's wish to try to do this. Margaret says governments should be behind people on that.

Senator CROSSIN—Mrs Inyika wants actually to put something on *Hansard* for us in Aboriginal language through Ms Webb. That would be great.

Mrs Inyika—So we are thinking that the Senate should think about all the people working in the roadhouse. They should try and help the Aboriginal people, the people who are working at the roadhouse. They should think about putting Opal fuel into the roadhouses to help with this problem. Already our family is passing away from this problem, and we want the people of the roadhouse and everywhere else to help us deal with this problem. I think that the government should put strong laws in so that roadhouses have to put Opal in, so it is not their choice.

Ms Gillick—We understand from Health and Ageing, with whom we had a meeting—and some of our staff also here have had discussions with the eight-point implementation team—that this week in Alice Springs a number of the roadhouses who had earlier indicated that they were resisting are now happy to take on Opal. But there are a couple, one quite close to Alice Springs

and another one a bit further out—and I have not confirmed these personally so I thought we would not name them—who are saying that they will not take on Opal fuel. They may be able to be embarrassed into it. But, ideally, yes, the federal government could legislate; I just very much doubt that they would.

Senator CROSSIN—Certainly, BP distributors yesterday indicated that they are putting Opal in a number of the roadhouses. They did not suggest to us that there was resistance. I just want to show you something. The committee, all of us, actually went to the refinery in Perth, out at Kwinana, on Monday. I suppose this gets back to my point about where the federal government can take a lead role in this. BP Australia gave us these kits; they have obviously put a lot of thought into promoting Opal. They have a fact sheet which is designed for Indigenous people so Indigenous people can learn about Opal fuel and the fact that it is not different to other fuels in that you can put it into your car; there is no downside to it. They have also produced these stickers. This sticker is so that, when you purchase Opal fuel, you put it on your car or your motorbike and it is a very clear sign to sniffers that there is no point siphoning off this petrol, because it is Opal. So I am wondering if you know about this merchandise and whether or not this committee can play a role in saying to BP, 'This is great, but what is your strategy to get it out there on the ground?'

Ms Gillick—There is also a sticker that CAYLUS—with our assistance with translation and design—produced last year. It is a bit different to that one. You will also find that BP will very soon have a coloured brochure with Janet's photo on it. We signed the permission form to use her photo just the other day. Last February, Janet launched the fuel in Adelaide with Tony Abbott.

Senator CROSSIN—BP are working with you?

Ms Gillick—They have been working with the so-called Opal Alliance. We have had a fair bit of consultation with them. I do not know quite how far BP wants to go in promoting as well as producing it. I have not seen the sticker, because I have not yet used the Opal bowser in Alice Springs, which is the one and only Opal pump.

Senator CROSSIN—I am assuming they want to promote it because they sell it. They are the only company in this country selling it, so they would be keen to promote it.

Ms Gillick—They are, but they will make the formula freely available to other companies if they want to make it. BP is also happy for others to distribute it. What is that?

Senator CROSSIN—I will pass it over to you, if you like. It belongs to Claire. Is this stuff getting out on the ground, or is there a role for the federal government to take a lead in being the conduit between your people on the ground and BP, for example?

Ms Gillick—Yesterday at a meeting in Umuwa, South Australia, I had a brief discussion with the First Assistant Secretary of OATSI and I was given to understand that some sort of communication campaign is planned. I have not seen these stickers before. Margaret is aware of the ones that we helped CAYLUS produce, and a number of those are around.

Senator CROSSIN—We were led to believe by BP that many of those stickers would be available in roadhouses or at BP pumps and that they were hoping to get them out and to get everyone on board pretty quickly.

Ms Gillick—I am not sure what stage this is at yet. I know it was only recently that they asked permission to use Janet's photo on a colour brochure. Hopefully, this stuff is getting out and about. But I do not know whether you can alter people's consciences with the use of stickers, brochures and so on. I think they are great. But if you have a region where everybody, except for a couple of roadhouse owners, is happy to take on this fuel then do you legislate, shame them into using it, persuade people to go elsewhere or round up all the sniffers and take them there and cut out the middleman?

Senator CROSSIN—The point I am really making is there are a few good things happening around the place.

Ms Gillick—There are. Definitely.

Senator CROSSIN—We have BP doing this, and some roadhouses are on board. But I do not see anyone taking a lead in trying to coordinate all of this.

Ms Gillick—I am told that the person who has taken the lead is Ms Wendy Key. She arrived in Alice Springs this week from Tasmania and is working for the OIPC, or the ICC—the Indigenous Coordination Centre here. She is heading up this team. I think some of our staff met with her yesterday. I am not sure as yet what sort of communication strategy the federal government plans to run, but we hope that it would include this sort of information. I do not think the communities need too much convincing because, unlike avgas, most people understand that Opal does not damage vehicles, even in the long term—and even if you accept that avgas did with some newer models. If BP wants to play a part in promoting this material—which they obviously do—and some of the other stuff that they have talked to us about, that would be great. There is also the question of premium unleaded, which we had a talk about this morning. I do not think that is an insurmountable issue.

Senator CROSSIN—I want to ask Mrs Inyika another question. Mrs Inyika, you are a very senior woman in your community. Can you give us an understanding of what some of the issues are that senior people in communities have to think about or deal with?

CHAIR—I want to put on the record that this is an issue that Senator Adams is very deeply interested in as well.

Senator CROSSIN—When you get together and talk about how you can help the young people in your community to stop sniffing, what do you talk about?

Mrs Inyika—We talk about putting Opal fuel everywhere, as one of the issues that can help.

Senator CROSSIN—Are there other ideas you have come up with?

Mrs Inyika—There has been talk about sending the sniffers to a community a long way away, to somewhere in the bush—a homeland or something like that. We have been talking about

making a home for them in the bush, far away from all these problems. We have been talking about that for a long time.

When they are in a large community they are learning whitefella ways, and they do not understand about the culture—the stories of their grandfathers and grandmothers. They do not know how to learn about it because the drugs have come in—the grog, drugs and sniffing. I am thinking: 'Why are we always talking about this?' Already there are problems, and we are thinking we want the government to help us because we do not know what to do. We need help from the government.

Mrs Smith—And from other organisations.

Mrs Inyika—This has been going on for a long time. We are losing our people and the problem is getting bigger—and all their friends. We have been talking about the same problem for many years through the women's council. Now our children are not thinking about this and are not talking up for themselves to the government and other organisations.

Mrs Smith—We have our AGM out in the bush. About 200 or 300 women turn up from every community, and we talk about every problem that we have in the community, mainly sniffing. Every grandmother, auntie or mother talks of their sons and daughters. It really hurts them. As they talk and speak, they cry about it. It is an issue where mostly women are strong—petrol, drugs coming in, grog coming in, violence and all that stuff. We talk about that in our AGM in the bush. It is a worry for the women out in the communities. Fathers, brothers and grandfathers do not worry about it; it is mostly the women who want to protect the community. The sniffing is sad. In South Australia it affects the whole lot of us. We cry. It affects the whole community. Grog or drugs hurts all the women and kids in the community. It is a really sad story. Vicki and all our staff know what goes on when we have the AGM out in the bush. That is all I will say.

Ms Gillick—Sometimes at general meetings I do not really want to put anything about sniffing on the agenda, although of course I have to advise the organisation. But people get so upset about it. Mrs Smith says that sometimes it becomes almost a free-for-all because it is so distressing. The women say, 'Why haven't we got police in every community?' Last year they were so excited about Opal fuel when it was introduced. Janet was asked to launch it with Minister Abbott and so on, and people were really excited. The Amata community where Janet lives—and Janet can tell you this herself—organised a little celebration. They wanted all the members and the staff to come, and we all did. Women got up at May in a general meeting and talked about how quiet it was in the community because they had Opal and the sniffing had really gone down.

But, in a matter of months, of course, because of the proximity issue, because people were still bringing it in—and it is not illegal to bring it in in any case; supplying another person with petrol for the purpose of sniffing is an offence, but actually taking it into communities is not in itself an offence at this stage, and that is something else that the three jurisdictions, hopefully with a bit of a cattle prod from the Commonwealth, need to look at and say they are looking at—it was really terrible because there had been this excitement about Opal. Janet told me this morning it is not quite as bad in Amata at the moment because some of the people we talked about this morning are not sniffing now—but they are probably some of the ones who have been sniffing

for so long that they probably cannot go anywhere else to get petrol. So they are not sniffing at the moment. But generally the problem has come back.

Mrs Inyika—All the women from the Northern Territory, South Australia and Western Australia always put forward reports about the trouble and talk about it. We always have one voice to talk to the government. All the women put their different stories in from the three states but it always comes out to be one voice, one story. I am thinking that Alice Springs is a big place. Silica and petrol are coming out from Alice Springs into the communities and destroying them. We want you to go back to the government and say, 'We want Opal everywhere and to make it work.' Then maybe our family can start getting a bit better. Everyone was really happy when Opal fuel was launched at Amata and all the other communities. But sometimes still we get really sad and upset when things happen and we see other sniffers still sniffing.

Senator ADAMS—Ms Gillick, I have a nursing background and I spent quite a lot of time working in the Kimberley, so there are a few health questions I would like to ask you, as the women's council, as to how the women's council deal with the older women. Are they able to have influence over the younger girls who are pregnant—with their babies, with STDs and the whole thing and with domestic violence thrown into it too? If you do not want to answer it, don't worry about it.

Ms Gillick—No, it is just that there is another member of the women's council who would probably talk to you for about three hours about this, and she would love to, but she is not here today.

Senator ADAMS—The reason I raised it is that the petrol sniffing is coming forward, but I am also aware there are other issues there. I wondered how you are dealing with them.

Mrs Inyika—Some of the young girls who are sniffing end up pregnant, and the mothers and fathers think: 'That happened because of petrol. I've got grandchildren because of petrol.' They are too young to have a baby.

CHAIR—If there is information from the council and there is another councillor who is particularly interested, perhaps you could send us something.

Ms Gillick—I can tell you briefly what I know. As far as we understand, there is no research into the effects on the foetus of sniffing. There have been, as you would know, a number of petrol affected babies born in this region. We also deal, and have done for many years, with a number of children who have foetal alcohol syndrome, and there is some research on foetal alcohol syndrome, as you would know. Most sniffers are still boys and men; however, the number of girls has increased. We do deal with young women who sniff and then become pregnant, and it really is just awful because you can see the developmental effects on the baby.

We are not a health service as such. As you would be aware, we are not a medical or clinical health service but we do deal with failure-to-thrive children and young girls who, as Janet says, have babies far too young. The women often talk about that. They try to discourage the young women from doing this. As you would know, petrol sniffing reduces sexual inhibition. There are communities where sniffing is really bad and where you have houses in which only teenage sniffers of both sexes are living. I refer you to the 2002 inquest in which one of the deceased was

a young woman, a sniffer with the surname of Hunt whom we had dealt with for many years. So it is difficult, and the behaviour of sniffers is erratic, unpredictable and difficult. We have recently had dealings with a very young and under-aged girl, a minor, who has had a baby delivered in Alice Springs hospital. There are emotional effects for her because she is affected by petrol sniffing and she has been in a relationship with a much older man, and that is probably a police matter. Hopefully, it is going to be. These sorts of things are arising more and more frequently. It is a pretty horrendous start to your life not only to have a baby when you are too young—the women worry about that anyway—but to have your brain affected or damaged by petrol sniffing.

Senator ADAMS—I am from Perth. We heard some evidence during our Western Australian inquiry so I wanted to make sure that that was an issue that was being gone through. By the sound of things, the older women in the community are accepting the role of trying to sort their way through this.

Ms Gillick—Yes. But how do you do it? If parents or grandmothers could control their children's or grandchildren's behaviour, you would not have chronic or regular sniffers; that would not be happening. I am thinking of Maggie Brady's references to child-rearing practices and people having personal autonomy from a very young age in Western Desert cultures. I will make sure about this with Janet. We have talked about this before. Margaret is saying the young people are uncontrollable. It is very easy to say, 'Why don't people stop their kids?' Some people do.

Senator ADAMS—I am sure they do.

Ms Gillick—A lot of families do try but that does not work. There are public policy issues such as whether you let the kid go because there is not that discipline.

Mrs Smith—Some kids are the boss of the parents.

Mrs Inyika—They think they are the boss, just like all teenagers do. When the young ones have kids, they think they are women and the young boys think they are men and can do what they want. They give their kids to the grandparents to look after and go.

Mrs Smith—They wander off.

Mrs Inyika—They will not listen. They do not like their parents. They will not talk to their parents or listen to their parents. They will back-chat them and do exactly the opposite of what they are asked to do.

Ms Gillick—We have an aged client who is a stroke victim and a former executive member. We set her up in a house in the Ernabella community. We had a lot of repairs made to the house and organised a family carer. This is going back nearly two years. She has been virtually unable to live in that house because she has two adult, chronic petrol-sniffing children, of whom the male child has been in court many times but hardly ever seems to get a custodial sentence regardless of what he gets up to.

She is now staying in the Nganampa health respite house at Ernabella-Pukatja. It is only a respite house, but she is there semipermanently at the moment because there is nowhere else and she refuses to go into an aged care home in Alice Springs, which is her right. We cannot get a carer. The house has been trashed. The sniffers have taken it over. Her sniffing son has, in the last few months, twice broken into the respite house, threatened the staff and stood over his mother to get money from her. That is the sort of thing we are dealing with in case management. She is frail, aged and has disabilities. He is a chronic, long-term sniffer. If, in the last 10 years, there had been some treatment centre or rehabilitation to which a magistrate on the APY court circuit could have compelled him to go, they would have done so. That is on the public record. The magistrates have made comments on this particular man and on many others.

It just escalates and it affects everybody. You have the frail, aged mother with disabilities who cannot live in her house. No family member will be her carer, because they are terrified of the sniffers who come around every night. There is no permanent police presence in the community and when he is charged, he is bailed. I think he has actually been remanded this week, but it just goes on and on. That is just one example. Of course she does not like being stood over for money by her children, but she wants to see her kids—regardless of the state they are in. That is the sort of day-to-day stuff we are dealing with.

We have another disability client who is disabled from chronic petrol sniffing. There is no permanent place in Alice Springs for him. We cannot find family carers; there is no-one. His mother is aged. She is in the same place as the other lady I mentioned before and she has dementia. The elderly father has passed away. The brother is in permanent care in Alice Springs, and this young bloke just goes back and forth. We have to get contract carers at $400 a day in Alice Springs in a self-contained motel room because there is no other accommodation in Alice. The local supported accommodation place has nowhere for him. This just goes on and on. He gets into such a terrible physical state in terms of hygiene that we are concerned about our duty of care, being the disability case manager.

Those are just a couple of cases. So it is not just the sniffers roaming around the community at night—it is the disabilities, the ongoing care, the ageing parents who are becoming disabled, frail or are dying themselves and cannot look after those kids, and the huge loss of physical and brain power across a small population. Margaret said to me this morning, 'Soon there will not be any Anangu left on the AP lands.'

Mrs Smith—Anywhere.

Ms Gillick—Or anywhere, because the kids are all just writing themselves off. That is why we think it would be cheaper to have Opal than to keep dealing with death, disability and mayhem. Even from an economic rationalist point of view, I think it would probably be cheaper.

CHAIR—We are rapidly running out of time. Would anyone like to add some further comment? The information you have given us has been extremely valuable. It is always difficult to pull evidence like yours to a close, because we could just go on and on. Is there anything you would like to have on the record before we formalise the end of this session?

Mrs Inyika—I would like to see Opal fuel put in all the roadhouses everywhere in the region, even in Alice Springs. If the government helps us and does something good for us then maybe we might do something good for them!

Ms Gillick—That is a very appropriate comment.

Senator CROSSIN—It is an interesting twist on a shared responsibility agreement.

Mrs Inyika—I would like to see Opal fuel put everywhere. We would like to see police stations put in all the communities, so we can stop the smugglers. We are happy to talk about this and get the government to help us with this problem.

CHAIR—Thank you.

[4.11 pm]

BLACKBURN, Mr Mark Douglas, Director, Corporate and Community Services, Alice Springs Town Council

MOONEY, Mr Rex Roger, Chief Executive Officer, Alice Springs Town Council

van HAAREN, Alderman Melanie Jane, Alderman, Alice Springs Town Council

ACTING CHAIR (Senator Humphries)—Welcome. I am sorry that Senator Polley and I have come late, but we are here to hear your testimony and we are very glad we have the chance to do that. I think information on parliamentary privilege and the protection of witnesses and evidence has been given to you. The committee prefers to take evidence in public but we do have the capacity to take evidence in camera if you would like to give evidence of that kind. We have before us your submission, and we thank you very much for it. Would you like to make an opening statement before we proceed to ask you questions?

Mr Mooney—I will make a brief opening statement. First of all, the council appreciates the opportunity and thanks you for coming here today. I would like to tender an apology on behalf of our mayor, Her Worship Fran Kilgariff. The mayor would have liked to have been here but, unfortunately, other commitments precluded that attendance. I draw your attention to our submission where we stated that the most notable Senate inquiry was back in 1985, and the terms of reference were prepared by Senators Robinson and Kilgariff, both from the NC. Of course, Mr Bernie Kilgariff is the father of our mayor and is still a resident of Alice Springs. The Commonwealth and state governments in 1976 recognised that petrol sniffing was a serious problem and here we are, 30 years later, still talking about it. We are pleased that it has got to the stage where we are having these discussions with you today.

I have a quick comment on Alice Springs. We are the Alice Springs Town Council but, for all intents and purposes, we are a city. We have a greater population than centres such as Broken Hill, Mount Isa, Mount Gambier and those sorts of places. We retain the title Alice Springs Town Council because we are a town like Alice, with the Neville Shute connotation there. Our resident population is 30,000. There are 19 town camps—you have heard from Tangentyere Council today. The 2001 data from the Australian Bureau of Statistics showed that there were 975 people living in those town camps. It is more like 2,000 or 3,000 people. The 30,000 really underscores the fact that Alice Springs is a service centre for a very large population drift in the centre of Australia.

One-third of our population is Indigenous. The best estimates, or guesstimates, say that by 2021 that will be about 42 per cent; other forecasts say about 50 per cent. The council's position generally is that the roll-out of non-sniffable fuel, Opal fuel, should be right across the Northern Territory. That is a view supported by the local government association of the NT, LGANT. The council has taken this up with the Australian Local Government Association, ALGA. We have also, as a council, written to all senators on the subject as well. The council believes it is a very serious issue. It has forged partnerships with Tangentyere Council through an MOU and with Lhere Artepe, the native title holders, through a partnership agreement. It is doing all it can to

highlight to the community the very serious nature of this problem. We talk about the 'eight points', and our submission refers to eight specific recommendations.

ACTING CHAIR—Mr Blackburn or Alderman van Haaren, do you wish to make an opening statement at this stage?

Alderman van Haaren—I would just like to reiterate Alice Springs Town Council's request that Opal fuel be rolled out throughout the region. We are particularly concerned about the impact of having sniffable fuel available in the regional centre. There is an artificial perception that Alice Springs stands alone. In reality, it does not. The mobility of people between the bush and this town is very obvious, and there is data to back up the fact that people move between the bush and Alice Springs very regularly. In many instances, the population is one and the same—certainly when you are talking about extended families and problems for families. We certainly are of the belief that, unless Opal fuel is more broadly rolled out, it may not succeed in achieving the desired outcomes.

ACTING CHAIR—Thank you very much for those opening statements. I will start off by picking up the point that you just made, Alderman van Haaren, about the mobility of people between Alice Springs and surrounding communities. The concern in my mind is the extent to which it is possible to banish alternatives to sniffable fuels from Central Australia. We heard evidence yesterday, for example, in Darwin that there are high-octane fuels used in high-performance cars which are not substitutable with Opal. I assume the nature of a community like this is that a lot of people would have high-performance cars because of the distances that have to be travelled and so forth. I assume it is not possible to totally replace all fuel used in Alice Springs with Opal. That being the case, is there a danger that the means of access to those alternative fuels would continue to supply those who wish to sniff? Even if it were possible to completely eliminate those sniffable fuels, what is the danger in your opinion of people turning to alternatives like paint?

Alderman van Haaren—I imagine that this community would be reflective of many communities in terms of the volume of cars that require the high-octane, premium fuel. We certainly appreciate that, and we do not advocate that Opal fuel is substituted in those cars. However, to my knowledge there has already been at least one roadhouse that has come up with the solution of having the premium fuel locked away, and access for cars needing that is formal, structured and monitored and so on. We are not advocating that that sort of fuel should be completely taken off the market, but we obviously think that there should be the same level of security around it as in roadhouses down the track.

A high percentage of vehicles use diesel. Once again, Opal fuel does not substitute for diesel and so we are not advocating for that. But I think it is very feasible for Opal to be substituted for the remainder of the fuel, and there would be a very positive community response if that were to be the case. There is a consciousness in Alice Springs that we can be either part of the problem or part of the solution. I am 100 per cent sure that most people would prefer to be part of the latter and would have no problem with converting to Opal fuel if their vehicles permit that. The other fuel, as I say, is not an issue for the community.

If we do not do that in Alice Springs, we will increase the risk of people moving to Alice Springs for the express purpose of sniffing. We will increase the numbers of youth staying

behind because they have access to sniffable fuel that they do not have in the community, and it will potentially increase the level of black-market trafficking because of that accessibility. As you would be well aware, we have communities located from one to eight hours away by road. All of them are accessible within one day's travel, and the travelling between them all is very frequent.

In terms of my prediction as to whether, once we eliminate sniffable fuel, people will turn to another form of drug, it is impossible for anybody to answer that. Experience within the drug and alcohol field suggests that, if you have a very comprehensive plan and if you approach the misuse of one drug with a well-thought out and well-considered repertoire of interventions, the likelihood of that is less because you are starting to deal with the problem not the drug use itself. So one could only feel confident that the conscientious approach would minimise the risk of that happening.

For instance, chroming in Alice Springs, through a similar and concerted effort, has to my understanding been almost eliminated. The chance of our youth being destroyed to the same extent is, I think, certainly less. This is only one problem. The problems facing Aboriginal people in Alice Springs are overwhelming. There are no easy answers to any of the problems. With petrol sniffing we are faced with something that does have an easy answer, so let us just do it. I do not say that it will make up for all the other things we are not able to address, but when we are given a clear solution let's grab it.

ACTING CHAIR—We read in another submission that, some time ago, the retailers of spray paints in Alice Springs were part of a coordinated campaign to stem the supply of spray paint to illicit users. Do you think there would be the same level of cooperation among petrol station owners and fuel distributors if you were to have a campaign to limit access of, say, those high-octane fuels to users?

Alderman van Haaren—Yes, I do. I think the population of Alice Springs is, on the whole, very conscientious. They are immersed in an environment that is rich in Aboriginal culture and rich in its own heritage. Many people are disturbed about issues such as petrol sniffing. As I say, I honestly believe that people want to be part of the solution and that you would get that level of cooperation.

Senator CROSSIN—I want to ask about one of your recommendations, the one about the intergovernmental committee and the National Inhalant Abuse Task Force.

Mr Blackburn—I declare my hat from a previous life as a member of the National Drug Strategy Committee. I continue to liaise with my peers and colleagues around Australia. I spoke to Mr David Crosbie from the Australian National Council on Drugs, who currently still resides on that committee, and he suggested that we refer the senators to it for some scientific advice.

Senator CROSSIN—So they have some more recent research on the effects of petrol sniffing?

Mr Blackburn—They are looking at the whole of the volatile substances themselves. There are some leading researchers right around Australia, and I think it would be a good opportunity

for the senators to listen to them. A number of them have done a lot of work throughout rural Australia and have researched and published.

Senator CROSSIN—Do you know if anything has been done on evaluating particular programs or activities?

Mr Blackburn—There is some research which has been done and evaluated. I did not quote that. I left that for you to follow up with them.

Senator CROSSIN—We will find that out then. Alderman, I know the Alice Springs Town Council has a memorandum of understanding with the Lhere Artepe people. Has that assisted in trying to work cooperatively in combating petrol sniffing around the town?

Alderman van Haaren—I think that is yet to be tested, inasmuch as Lhere Artepe itself has had a number of initiatives that are only now coming to the fore, such as local cultural protocols. I may be able to answer that question a lot more confidently in, say, 12 months time. There obviously would be some people who are very optimistic about the fact that they can at least influence behaviour to some degree, and of course there would be other people who say the problem has become far bigger than any one organisation, even be it traditional owners, is able to address, certainly not in isolation of a whole range of other strategies to support them.

Senator POLLEY—We have had evidence given to us over the last couple of days about the programs on the ground that there is not adequate cooperation and communication between the agencies involved. I was wondering whether you had any views on that.

Alderman van Haaren—I have been a nurse for 33 years now, of which the last 15 years have been in senior management within the department of health, and at least six of those were spent as the director of nursing for remote areas in Central Australia. So I have been very much involved in on-the-ground issues to do with tackling the problem of petrol sniffing. I would certainly agree with the statement that there are not enough resources in Alice Springs and definitely not in the remote areas to deal with the issue of petrol sniffing. But I do not necessarily agree that their linkages are poor. They may be from time to time, but on the whole I think that one thing that Central Australia has in its favour is that it tends to work together a lot better than other places because of its size, because of its colloquial style and because of the necessity.

Certainly in remote areas, apart from a couple of programs that you are well familiar with, there is very little to support communities tackling petrol sniffing. That really needs to be looked at, because from my experience the most successful programs have been those that were decentralised, linked to communities, initiated by communities and involving traditional responses to the youth and their problems. The idea of a centralised approach and a centralised respite centre alarms me in terms of its capacity to make a long-term impact.

Senator POLLEY—We have heard evidence that there is a desperate need for more safe houses in remote areas to deal with issues relating to mental health complications arising from sniffing. Have you had any experience there? Do you want to share your experiences?

Alderman van Haaren—I could not agree more with that evidence. I have been immediately responsible for remote health workforces for six or more years. Whilst petrol sniffers are a minority in communities and their numbers wax and wane, if they exist within a community they create the majority of the problems in that area. There is nowhere for them to go. The majority of petrol sniffers will congregate in derelict houses on the outskirts of town. Family members are fearful of approaching them. They usually sleep all day and sniff all night. They create havoc in the community, damaging property, including health centres and health centre vehicles. In many communities there are no police whatsoever. So the people most often called upon to try and defuse the situation are health staff.

Whilst I think that the eight-point plan is excellent and right on track, should it be rolled out, I also believe that remote health workforces have been missed in the equation for additional support. In every instance that I can think of, they are often the front-liners. Many of these communities do not have youth workers. Many of them do not have the presence of organisations such as the one you just heard from and they really do go it alone, apart from one or two nurses in a health centre that have to try and address everything. I think education for the remote health workforce should be a part of the plan, because education on petrol sniffing—even how to manage a petrol sniffer—is non-existent when you are looking at generic training programs for people working out in the bush.

I think we have just got by by the seat of our pants. To a large degree, petrol sniffers have been out-of-sight, out-of-mind people. You only see the damage they cause. They do not access health services regularly, which is part of the problem. With the heat up, so to speak, on petrol sniffing, you are going to find an increased expectation and need within the existing remote health workforce to manage better than they have been. In order to manage better, they are going to require more support and more education.

Senator POLLEY—Apart from the fact that you have reiterated what so many others have said about the roll-out of Opal fuel and the need for it to be done on a regional basis, I would be interested to hear what your other main priorities are for the federal government as part of its responsibility in helping to alleviate the problem.

Mr Blackburn—When we faxed all the senators just before the inquiry, we were going to attach a dollar coin. For $20 million—which equates to about a dollar per head of population—you could roll out Opal fuel right throughout the Northern Territory. When you do the economics from that perspective, you are looking at sustaining 66 people per annum for that cost. I know you made reference to some cost-benefit analysis there. The issue about a supply control is something that could be done now, but we all recognise that the demand reduction strategies themselves will have the greatest long-term impact.

I refer to the report that was produced by Tangentyere earlier on. They listed a range of demand strategies. That is quite consistent with our understanding. One of the issues we are facing here in Alice Springs is, as Alderman van Haaren referred to, the influx of people into town. You heard previously the elders women saying that people do travel distance. Alice Springs is not far away—people from the communities come here. We have our wardens working with the Tangentyere day patrol on a regular basis, looking for people who have come into the city, many of them with complicated problems.

If you talk about the Department of Family and Community Services and the strengthening of communities then you need to be looking at community driven strategies, the development of adequate youth infrastructure and support programs, real job creation and economic development, employment, education and training and a number of community driven initiatives. That is where the long-term benefits will come from, quite clearly. Even the director who is responsible for rolling out the eight point plan got up and spoke in this very room saying that Alice Springs is going to suffer from a honey pot effect.

You spoke with Senator Crossin about the distances that are travelled here. We have people returning to country, to Kintore and Docker River, and by the time the people who have taken them back out to those places are back in Alice Springs the returned people are back in Alice Springs too—they have beaten them back. Distances from Alice Springs are not a problem. If you are looking for a real opportunity for a supply control strategy that is available to government now, then that is something that can be done. Certainly, the long-term demand reduction is where the long-term benefits will come from. But there is an opportunity for a short-term response.

Alderman van Haaren—We all take it as a given and we all agree with the fact that in order to address petrol sniffing you have to address the cause. That is one of those overwhelming statements that, at the end of the day, sometimes cripple you from doing anything. If you track back too broadly too far it just gets to a point where each and every one of us at some point in time has felt absolutely disempowered. If we are talking about rolling out Opal fuel, what would I suggest be the next priority in trying to address petrol sniffing? I would agree with the previous councillor's perspective that if Aboriginal elders had the power to stop petrol sniffing we would have seen that happen by now. We need to acknowledge that the elders themselves are crying out for help.

From all the initiatives I have seen in relation to trying to address petrol sniffing, those that have been most successful have been local solutions where it has not been one size fits all. They are all involved, with the community determining what their local response will be. That would be very critical. So whilst on one hand I implore the government to put both feet in, on the other hand I suggest that we need to be very cautious if we are talking about roundups and bringing people into Alice Springs for treatment and therapy. At the end of the day I see that as being the most costly and the most ineffective strategy and the strategy that has the least chance of long-term success.

Let me lobby and advocate for one other thing. I know I have spoken about remote area nurses and their need for additional support in these circumstances, particularly in the absence of police. The trouble with recruiting people to care for petrol sniffers once disabilities are apparent was also mentioned. I cannot agree with that more. I have been in a position where I had to employ somebody with only one arm as a carer and he had to roll a gentleman with his feet to get him washed. It is just absolutely impossible in some communities to employ people to provide care using the normal framework and models that are around.

That is another reason I advocate really strongly for exploiting and harnessing the potential that our remote area workforce has to actually be part of the solution and the equation. I do not see that they are written into the plan as effectively or nearly enough as they could be. In fact, to be honest, I cannot see them written into it at all.

ACTING CHAIR—I have a question about boredom. We are told that boredom is one of the big factors that leads young people to sniff. What does the Alice Springs council do to alleviate that kind of problem among Aboriginal people within its borders?

Mr Blackburn—We do a range of programs, which are listed within the submission itself. We fund the Gap Youth Centre here. Hopefully you have had an opportunity to get out to the centre. We fund a number of programs. We funded for CrocFest this year. You talked about engaging and retaining young people in schools. If they can go along to school and they are interested in developing their performance for CrocFest, the benefit of the performance itself at CrocFest is probably second rate compared to the benefit in them actually going along to school and participating in that program. We provide a range of sporting facilities across the community and encourage the sporting clubs to run junior programs. The Imparja Cup is being held here, as you would have seen up at the mall. So there is a range of support programs which we put in place. We see local government's role as being around those activity programs to engage young people in things that they want to do.

Mr Mooney—I think it would be fair to say that, in terms of local government assistance across Australia, Alice Springs would stand alone in the sorts of money that we spend in our community, whether it is for sport, culture, social or youth. A very large proportion of our income goes right back into the sorts of activities that you were alluding to, Senator.

Alderman van Haaren—Can I impress upon the committee that, whilst we certainly do put such enormous effort into that, petrol sniffers do not access Gap youth centres in general or the Friday night basketball—and we need your help if they are ever to be in a position to be able to. We need some support in Alice Springs in relation to the eight-point plan. My understanding is that the eight-point plan is only going to be rolled out in an area shown as a box on the map that is basically, from the Northern Territory's perspective, down along the highway and that Alice Springs to a large degree is excluded from accessing additional moneys, including Opal fuel. So on a broader note: we need to be one of the towns that can access all the components of that eight-point plan.

Senator ADAMS—On the justice system, with the new legislation that is coming through, I would like to know how you have dealt with it in the past. I guess the courts are fairly full. Is this going to push it over the edge? I am referring to the new legislation that has just come in for the Territory.

Alderman van Haaren—It is hard to say. If you are talking about people who sniff, they may have damaged property but my experience with them is that that does not get them to court. Normally that is dealt with, particular if you are talking about remote communities, at a local level. If you are talking about what happens here in Alice Springs, it is very hard to identify somebody and bring them to justice in that respect.

Senator ADAMS—Domestic violence?

Alderman van Haaren—Domestic violence, certainly.

Senator ADAMS—These are all the issues. I am a JP and I was just wondering if you have got more—

Alderman van Haaren—We anticipate that there will be a huge demand on our justice system. Right now, in addition to the Volatile Substance Abuse Prevention Act, it is proposed that we have an alcohol court. We are concerned that people who commit an offence and who admit to being dependent will be shunted through into what will be called an alcohol court and they may be placed on intervention and prohibition orders. Because of the clinical resources to be attached to that, we fear that will create an enormous additional demand on our justice system and associated bottlenecks. It is almost predictable that Alice Springs could end up being a refuge for people just waiting to get through the system, and that worries us enormously.

In fact, in relation to the alcohol court bill, an approximation of the number of people that will be waiting in Alice Springs to go through the alcohol court is 2,500 per annum. That is many additional people sitting in Alice Springs, away from country. Very often, given the nature of their crime and their background, they are the ones that put the demands on all forms of community services.

Senator ADAMS—Is petrol sniffing creating more work for health services in Alice Springs?

Alderman van Haaren—Yes, it is. The co-morbidity factor with petrol sniffing is very high. The likelihood of petrol sniffers becoming unwell—through chest infection, unwanted pregnancy, acts of violence and accidents—is extremely high. Obviously there is an impact on the health system and, in particular, on our emergency department here in Alice Springs which deals with all those issues in the first instance, and on our PAT system, by which we fly people in from remote communities to be sorted out and assisted medically as a result of some injury, accident or medical condition.

Senator ADAMS—Then there are ongoing mental health problems, which unfortunately seem to be a part of this. How strong are your mental health services here?

Alderman van Haaren—They are inadequate. A recent study is available regarding the capacity of the mental health system in the Northern Territory. If you were to read it I think you would join me in concluding that the mental health system will not have the resources necessary to address the solutions that are proposed and that involve its expertise.

Senator ADAMS—Another statistic that we have been given in evidence is that STDs appear to be rising in this particular cohort of people. Does the town council have any background on that aspect of public health?

Alderman van Haaren—Not as far as the town council is concerned. But, with my other hat on, that is certainly the case. The problem with genuinely entrenched petrol sniffers is that they do not access health services until something goes badly wrong and usually it is a third-party intervention. But STD rates are rising. There is always the risk of young women becoming pregnant and people having accidents here in Central Australia. Quite a few accidents have occurred that are related to petrol sniffing and burns. In the dead of winter, there is a requirement for night fires in community settings and accidents occur when community members fall into them and so on. They all create enormous pressure on the health system, particularly when coupled with a few of our statistics that we are not that proud of, such as having the highest rate of rheumatic heart disease in the whole world. When young people have that quadrupled risk and

the risk of petrol sniffing, it is of immense concern, which is why the government is taking action in the first place.

Mr Blackburn—I would like to add to that. Just picking up on the typo in our submission, I do not think the Senate inquiry actually met in 1885. But in 1985 the Senate committee said that there was a strong need for the collection of epidemiology data, and here you are some 20 years down the track and that is still a major problem that should be addressed. That is what we consider as one of the key recommendations of the report itself. Where you are developing any good policy or any good intervention, you need good epidemiological data. I erred with regard to your passion in the public health perspective, so I think it is probably worth while us highlighting that in our submission.

ACTING CHAIR—I thank the three of you for your appearance here today. The evidence you have provided to us has been very useful. I also want to thank all the other witnesses who have appeared before the inquiry today. That concludes the hearings in Alice Springs. Tomorrow the committee is undertaking a tour of some relevant facilities in this region.

Committee adjourned at 4.51 pm