

## DEPARTMENT OF **HEALTH AND FAMILIES**

# ALCOHOL AND OTHER DRUGS PROGRAM - FACT SHEET

# **VOLATILE SUBSTANCE ABUSE PREVENTION ACT**

#### **BACKGROUND**

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The Northern Territory Volatile Substance Abuse Prevention Act (the Act) was introduced In February 2006, in response to community concerns about abuse of volatile substances such as petrol, paint and glue.

### **PURPOSE OF THE ACT**



The Act provides a comprehensive and systematic approach for the prevention, intervention and treatment of volatile substance abuse (VSA) in the Northern Territory. Its main focus is the protection, health and safety of children and adults who are abusing such substances. Community control is also central to the Act, providing legal support to local programs that have been in place for many years, and assisting individuals and communities to combat volatile substance abuse.

The Act provides police with the powers they need to address volatile substance abuse, courts with the tools they need to provide treatment to people at risk, and communities the support they need to control volatile substances and protect children and adults from the detrimental effects of volatile substance abuse.



This landmark legislation was taken up enthusiastically from the beginning, with many people benefiting from assessment, treatment and other interventions. Communities in many regions now have a management plan in place to control possession, use and supply of volatile substances.

The Act was recently reviewed, resulting in several amendments, streamlining its operation and facilitating administrative processes. The amended Act came into force in February 2010.

#### **VOLATILE SUBSTANCE ABUSE IS NOT ILLEGAL**

The Act does not criminalise volatile substance abuse and does not involve prison sentences.

#### THE ACT DOES NOT IMPEDE OTHER LEGISLATION

The Act does not preclude other legislation being enforced. For example, children at risk of harm due to VSA may also be dealt with under the Care and Protection of Children Act, if necessary for other issues. Or in the case of a person committing a criminal offence they can be charged and taken before a criminal court, even if they are under the treatment order process of the Act. The courts dealing with people under other legislation also have access to assessment and treatment programs funded under the Act.

#### THERE ARE FOUR MAIN AREAS WITHIN THE ACT:

# 1. Prevention and intervention

Police and authorised persons are empowered to remove and dispose of volatile substances from somebody who is inhaling, intends to inhale, or has recently inhaled a volatile substance. If it is necessary for the health and safety of the person or other people around them, the person can be taken to a responsible adult (usually a family member) or to a place of safety. A place of safety is a place declared by the Minister and can be within or outside the community. In remote areas it may be a youth centre or an outstation; in urban centres it may be a sobering up shelter or a youth accommodation service.

If there is no safe place the police can take a person into short term protective custody, until the person is no longer at risk of harm.

As many remote areas do not have police stations, the Act allows for specially trained authorised persons to remove volatile substances from persons at risk and take them to a safe place or to a responsible adult.

Authorised persons must be individually approved by the Minister. They can be health workers, youth workers, councillors, elders or night patrollers, etc. Authorised persons must successfully complete an approved training course, which includes volatile substance abuse related health information, intoxication management and first aid. They must also have a current drivers licence and undergo a criminal history check.

#### 2. Assessment and Treatment

The Department of Health and Families (DHF) employs specialist assessors for people with volatile substance abuse issues. People in the community who are concerned about a person's volatile substance

abuse can contact an assessor and apply for an assessment to be carried out on the person at risk. The following are authorised to apply for such an assessment:

- police officers or authorised persons;
- family members of persons at risk;
- responsible adults for children;
- doctors, registered nurses, Aboriginal health workers and psychologists; and
- Northern Territory Families and Children (NTFC) P2 workers.

The assessment findings determine whether a recommendation is made to the Chief Health Officer to apply to the local court for a treatment order. A court-ordered treatment program can be of up to 16 weeks' duration and can be extended if necessary. A range of treatment programs are available that include not only residential programs, but also treatment for withdrawal, stabilisation and aftercare, other appropriate therapies and health, diversionary and educational interventions.

If a person fails to participate in a court ordered treatment program or absconds, a warrant can be applied for to compel the person to attend. Persons authorised to seek a warrant include VSA assessors, police officers, authorised officers, the Chief Health Officer, or a legal representative of the above mentioned persons.

At times, a court ordered program is not the best option for a person; and other plans are made to support the person at risk, their family and community. The general goals for the person at risk remain the same as for a compulsory program: cessation of volatile substance abuse, reduced high risk behaviour, improved physical and mental health and improved social functioning.

## 3. Community Management of Volatile Substances

Community members and Shire Councils are able to apply to the Minister for a certain area in their community or their whole community to be declared a management area under the Act. A management plan is then developed for the area to establish rules for possession, supply and use of volatile substances. Delegates of the Minister hold community meetings, explaining the workings of management plans

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and consequences for the communities with such plans. The delegates also assist and guide communities through the making of the plan.

Community members, with support from Shire Council Managers, elders, police and community agencies must agree to the area and the plan. This requires one or more community meetings to ensure all relevant stakeholders are aware and consulted. The community can ban petrol and make rules on storage and disposal of paints, glues and any other volatile substances that have been abused.

The draft plan is first provided to the Commissioner of Police and the Chief Executive (DHF), who need to endorse it and then it is submitted to the Executive Director Health Protection, for approval. approved, the plan is published in the NT Government Gazette; and a copy is made available in the community for all to view. On this publication the plan becomes law in the community, and contravening it can result in fines or imprisonment.

Signs must be erected at community entry points warning people of the existence of the plan and informing of its provisions.

# 4. Unlawful supply of volatile substances and confidentiality

## **Unlawful supply**

The Act provides that a person must not supply a volatile substance to another person if the supplier knows, or ought to know, that the other person intends to inhale the substance.

Likewise a supplier must not give a person a volatile substance if the supplier knows, or ought to know, that the recipient intends to give the substance to another person for inhaling. Unlawful supply is an offence under the Act and is punishable by a fine or imprisonment.

#### Confidentiality

The Act provides that the identity of a person who supplies information to the police regarding an offence under the Act must be kept confidential. A person who disclosed the name of an informer or gives details leading to the informer's identity, commits a crime punishable by a fine or imprisonment.