



Mutitjulu Tjunga Waakaripayi Project 'Working Together'

A joint initiative of the Aboriginal people of Uluru, the Northern Territory and Australian Governments, and the private and non-government sectors

Media background briefing

Petrol sniffing in Mutitjulu and the Central Deserts

- The escalating problem of petrol sniffing is causing egregious human harm and considerable social and health problems in the Central Deserts.
 - 600 people are sniffing petrol in the region – 20 to 40 of them are in Mutitjulu.
 - Young people are asphyxiating, hanging themselves or ending up in wheel chairs and their parents are tired and worn out from grieving.
 - Up to 120 petrol sniffers will acquire brain injury or die in the next few years.
- Petrol sniffing is just one manifestation of an addiction 'epidemic' in Mutitjulu.
 - Excessive daily use of alcohol and marijuana is actually causing more human harm and social dysfunction than petrol.
 - One of the young men who died from sniffing in 2004 told his father before he started sniffing, "if you don't stop drinking, I'm going to start sniffing petrol".

Economic, moral and National interest arguments for fixing petrol sniffing

- A conservative estimate of the costs of rolling out OPAL ULP in the Central Deserts (which could dramatically reduce petrol sniffing) is around \$8 million pa.
 - The health costs of doing nothing could be as high as \$80 million per annum.
 - : The average health costs of maintaining an ex-sniffer with brain injury are \$300,000 per annum.
 - Other social costs are also high.
 - : Sniffing caused \$160,000 in criminal damage in Mutitjulu during the second half of 2004 - the health clinic and adult education centre were both trashed.
- The moral and humanitarian arguments are also strong.
 - The Australian government provides fuel subsidies for farmers, miners and other industries of around \$3 billion per annum. And in May the Prime Minister announced an additional \$1.25 billion of drought assistance.
 - : None of the farmers children have died from the drought.
 - : In contrast 120 young sniffers in the NT will be dead or in wheel-chairs in the next few years if nothing is done.

- The 'Territory' and 'National' Interest arguments are based on the demographic express train that is gathering speed in the Northern Territory.
 - The Indigenous share of the Territory's population is already one-third.
 - : It is growing fast and Aboriginal children already comprise half of primary school enrolments.
 - If the social addiction epidemics effecting remote Aboriginal communities are not addressed, regional centres like Alice Springs will become warehouses of disabled sniffers and psychotic cannabis users.
 - : Sniffers are already moving to Alice and stealing petrol from used car dealers.
 - Significant tourism benefits associated with Uluru are also at risk.
 - : Tourism at the Rock creates over 1,200 jobs and injects over \$300,000 pa into the Territory's economy.

Need for a universal roll-out of Opal Unleaded

- The Australian Government's subsidy scheme for supplying Opal Unleaded unsniffable fuel is having some positive effects.
 - But sniffable petrol is still widely available because Opal's supply is ad hoc.
 - : Sniffers move to where sniffable petrol is available, obtain it from dealers in exchange for money or sex. Or they steal it from vehicles.
 - : Mutitjulu has no petrol station but 600ml bottles of petrol are readily available for around \$50.
- An extension of the existing subsidy scheme is needed to replace sniffable petrol across the Central Deserts.
 - The previous unsniffable fuel, Avgas, damaged car engines so universal distribution was not possible. But Opal has no negative effects on car engines.
 - BP has advised that the cost of producing the fuel would drop significantly if it were supplied more broadly.

Treatment facilities are severely lacking

- Funding for treatment and rehabilitation facilities is severely lacking.
 - Up to 20 disabled sniffers in Mutitjulu are cared for by their families or left to fend for themselves.
 - : It is not uncommon to see people in wheelchairs sniffing petrol.
- Some petrol sniffers are a serious risk of harm to themselves or others, but they remain in the community with little or no professional care and treatment.
 - One young man has tried to kill himself at least four times in the past few months and pregnant women have been seen sniffing openly in the community.
 - It is not unreasonable to say that if these young people resided in the suburbs of Northern Sydney or Canberra, treatment would be provided to them.

The systemic policy environment is fostering addiction and requires reform

- Government policies and programs over the past decades have contributed to the protracted social problems in Aboriginal communities like Mutitjulu.
 - While communities are often labelled as ‘dysfunctional’, it can be argued that the relationships governments have with communities are also ‘dysfunctional’.
- There is an urgent need for more active participation and support from governments in the delivery of programs aimed at addressing addiction.
 - Under the auspices of self-determination, governments have tended to provide financial resources but have then disengaged and left project implementation up to communities themselves.
 - Disempowered communities suffering from addiction epidemics and social dysfunction cannot effectively instigate and control responses to complex issues such as petrol sniffing by themselves.
 - : As one Old Man said, “the petrol comes from outside, its like the Maralinga Bomb tests, so the solution has to come from the outside too”.
 - : The people of Cabramatta would not be expected to fix up the heroin problem there by themselves.
 - Governments have an obligation to intervene more strongly when necessary.
 - : The Aboriginal people of Mutitjulu are Australian citizens who have the same rights to a peaceful society and a healthy upbringing and education as mainstream Australians.
 - : Governments’ commitment to build a police post in Mutitjulu is an example of this. But more active interventions in the areas of substance abuse programs and night patrol services are also needed.
- Welfare reform is critical because passive welfare dependency is directly linked to the addiction epidemics occurring in many Aboriginal communities.
 - Passive welfare dependence and substance abuse are feeding off each another and undermining other efforts towards social recovery.
 - As Noel Pearson has stated, “a major contributor to the weekly drug habits of young Australians is Centrelink. If we want to ameliorate the tragic situation in remote Indigenous communities, then we have to end unconditional welfare payments.”
- Other areas requiring reform to address ‘governmental dysfunction’ include:
 - Robust up-front and on-going analysis of government-funded programs and activities rather than just ‘throwing money around like chook food’.
 - Genuine on-going policy and program evaluation to target resources effectively and disseminate lessons learned.
 - More flexible, pooled and long-term funding arrangements rather than the uncoordinated stop-start funding mechanisms to date.

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Background

Petrol sniffing and its costs

The intensity and damage of petrol sniffing in the Central Deserts region of the Northern Territory (NT), Western Australia (WA) and South Australia (SA) is increasing with more users sniffing for longer periods of time. The Australian Government funded *Central Australian Youth Link Up Service* (CALYUS), which works to address petrol sniffing, estimates that over 600 people are sniffing petrol in the Central Deserts. On the Anangu Pitjantjatjara Lands alone, covering around 120,000 square kilometres in SA, over 200 people are sniffing petrol - eight per cent of the population. This number has doubled in the last two years.

Sniffing has caused dozens of deaths in the Central Deserts over the past two decades and significant heartache to the region's people. As one old lady said, "our children are dying, you don't know our sadness, ... , we are tired and worn out from grieving".

Acquired Brain Injury (ABI) caused by petrol sniffing is a major form of disability in the Central Deserts. The number of disabled sniffers in the NT will rise to around 120 in the next few years. The health costs of maintaining an ex-sniffer with ABI are between \$150,000 and \$300,000 per annum. They can reach \$750,000 for more serious cases. The total costs of caring for disabled sniffers in the NT alone could be \$36 million per annum. If WA and SA are also included, the figure could be considerably higher - up to \$80 million per annum. Capacity for such care is currently very limited and governments will at some stage have to face this issue, including the question of capital costs. Already in Alice Springs, support services are struggling to find accommodation for sniffers who have moved to town.

Petrol sniffing challenges traditional Aboriginal authority and cultural structures. Indicative of the de-humanising and antisocial effects of sniffing, older members of some communities have been driven out of their homes and are sleeping in the sand dunes for their safety. In one community alone, vandalism associated with sniffing cost \$160,000 in repairs to community infrastructure over the last six months of 2004. Petrol sniffing poses a public health threat through its association with violence and STDs. While reducing sexual inhibition, chronic sniffing also causes male sexual dysfunction. This is a dangerous precursor for sexually-related violence.

Aboriginal voices about petrol sniffing

- All our children are dying, ... , you don't know our sadness.
- Listen to us, ... , help us protect our kids, not just kill them.
- You all have a responsibility to help us fix this problem.
- I sleep next to a petrol sniffer, ... , I'm their family.
- The petrol doesn't belong to us. Its not part of our law. The problem comes from the outside, its like the Maralinga bomb tests, the solution should come from the outside too.
- We are tired and worn out from grieving.

Non-Aboriginal voices about Petrol sniffing

- I was completely ignorant as a white middle-class Australian.
- Governments have to get their act together.
- Money has been chucked around like chook food.
- Solutions cannot come from Aboriginal communities alone.
- Petrol sniffing is the highest cause of disability on the Anangu Pitjantjatjara lands.
- Alice Springs will become a warehouse of disabled sniffers and psychotic cannabis users.

Petrol sniffing has no precedence in Aboriginal cultures. Its causes are many and relate to each other in complex ways. Outbreaks are often associated with gatherings for ceremonies, football, royalties, and school breaks. There is a link between alcohol dependence of family members and young sniffers. 80 per cent of sniffers come from families characterised by social and cultural breakdown associated with alcohol misuse.

The history of policy responses to petrol sniffing has largely been reactive and ad hoc. Evaluation has shown that a combination of strategies is the most successful - including supply reduction, community-based prevention, treatment and rehabilitation, and the application of Aboriginal laws or sanctions.

The Avgas scheme and the new fuel Opal ULP

Avgas supplied through the Australian Government's Comgas Scheme has been effective in reducing petrol sniffing, particularly when part of a broader strategy. The Avgas scheme began in 1998 after several communities successfully petitioned the Australian Government for relief from the excise that contributes to its price. At least 36 communities have used Avgas for varying periods of time. Its introduction in one community resulted in an immediate reduction in the number of sniffers - from 15 to two. The number of sniffers in this community has remained very low, with some of the chronic users migrating to Alice Springs to access sniffable fuel.

While Avgas has been used for over a decade, changes in aviation industry fuel standards mean that it is about to become sniffable - to remove its lead content, higher aromatics had to be introduced. Anticipating this, OATSIH commissioned BP to create an alternative unsniffable fuel called Opal Unleaded petrol, which has no lead and no negative effects on motors. Avgas was bad for motors, but many communities accepted this as a better alternative to having their youth sniffing. Opal has no negative effects on motors - this additional advantage augurs well for more comprehensive supply.

The development of Opal provides a valuable opportunity to extend the effectiveness of the Avgas scheme and dramatically reduce sniffing in the Central Deserts Region. But a major weakness in the scheme remains its ad hoc geographic distribution. Some relatively remote or isolated communities reduced sniffing by selling Avgas. But because Avgas was not supplied comprehensively across the region, sniffable fuel remained available. This will continue to occur with Opal, unless it is rolled out universally in the region. Mutitjulu has no petrol station, for example, but 750ml bottles of petrol are readily available for around \$50.

Young Aboriginal people are mobile and have ample time to travel and find alternative sources of sniffable petrol. Petrol is also very portable and dealers manage to evade police with great success and 'promote' new recruits. Around 20 regular sniffers in Mutitjulu are at risk of ABI. Two died in 2004. Many are in wheelchairs.

Comprehensive supply of Opal across the region would eliminate the supply of sniffable petrol and dramatically reduce the incidence of sniffing. Sources of supply that would need to be addressed to supply the fuel comprehensively in the region include Alice Springs, the roadhouses on the Stuart, Tanami and Lassiters Highways; Yulara, and Aboriginal communities including Ikuntji, Yuendumu, Nyirripi, Willowra, Titjikala, Santa Teresa, Laramba, Yuelamu, Harts Range, Ampilatwatja, Utopia and Ali Curung. CAYLUS has conservatively costed the subsidisation of this roll-out at \$8 million per annum - based on a subsidy of around 40¢ per litre. BP has advised that economies of scale generated by greater demand associated with a regional roll-out could narrow the subsidy gap substantially. A regional roll out of Opal would prevent significant human and social harm while also saving governments in the region significant health care costs associated with caring for brain injured sniffers.

Addiction has become an ‘epidemic’ and transgenerational

The legacy of injustice, indifference and insensitivity is a necessary but not a sufficient prerequisite for the present disaster in remote Aboriginal communities like Mutitjulu. The social acceptability of participation in alcohol, drug and petrol abuse - through both consumption and supply - indicates that a decisive factor about substance abuse is that it has become a social ‘epidemic’ in itself. This is consistent with evidence from the Central Deserts region more broadly, where 80 per cent of sniffers come from families characterised by “social and cultural breakdown associated with alcohol misuse”.ⁱ

When addiction becomes socially entrenched, opposing or avoiding substance abuse becomes anti-social because, as Cape York Aboriginal Leader Noel Pearson has argued, a new culture emerges where “to drink is to be Aboriginal”.ⁱⁱ As one senior man in Mutitjulu said, “family pressure to drink is big”.

The addiction epidemic in Mutitjulu has also become trans-generational. This is reinforcing its auto-catalytic nature. Children are learning about addiction from their parents. As one old lady said “Parents are on the grog ... kids, ... they sniff petrol”. Kunmanara Coulthard’s petrol sniffing was a direct example of the trans-generational nature of the addiction in Mutitjulu. According to his mother, before he started sniffing petrol, Kunmanara Coulthard challenged his father, “if you don’t stop drinking grog we [my brothers and I] are going to start sniffing petrol”.

Acknowledging that substance abuse and addiction have reached epidemic and transgenerational proportions is essential for developing and implementing successful policy interventions. Focusing on one particular strategy, such as demand-side interventions, is less effective when addiction is socially acceptable and community members are participating in, or unwilling or afraid to challenge the abuse. In these circumstances, strategic and comprehensive approaches that include both demand and supply-side interventions, harm management and social controls are necessary. Needless to say, the effectiveness of the principle of ‘self determination’ in the solution to addiction is weakened considerably.

Key factors facilitating auto-catalytic addiction epidemics

- availability of addictive substances;
- spare time;
- money;
- the example of others in the immediate environment;
- permissive social standards and ideology.

The link between passive welfare and addiction

This history of dependency imposed on Aboriginal people extends beyond the 1967 referendum granting human rights. In Central Australia, the supply of food rations in the 1930s associated with the concentration of populations onto missions and government settlements discouraged Aboriginal people from hunting bush tucker and had a ‘pauperising influence on community life’.ⁱⁱⁱ A fear by governments that Alice Springs would be flooded by thousands of ‘primitive natives ... creating pestilence because they would not have the rudiments of civilised living’^{iv} resulted in the provision of food and other supplies unconditionally at remote camps West of Alice Springs. Governmental determination to curtail the drift to town thus created welfare dependency and undermined Aboriginal economies and societies. As one old lady in Mutitjulu said “in my Grandfather’s day we were strong, ... , we ate bush tucker and were not dependent on sit-down money, marijuana or grog”.

Some people have used civil and human rights approaches to argue against passive welfare reform. But rights-based approaches can also be used to support the argument for welfare reform. It is undeniable that passive welfare is contributing to significant human rights abuses, particularly by facilitating and financing the social harm associated with addiction epidemics. Murder, rape, domestic violence and the sexual molestation of children are some examples of the human rights abuses in Aboriginal communities that are *inter-alia* being fuelled by passive welfare. It can also be argued that the children suffering malnutrition in communities overwhelmed by addiction epidemics have a right to benefit from the child endowment payments that their parents receive on their behalf.

Notwithstanding the significant human and civil rights issues attached to welfare reform, there is an urgent need to move from discourse to action. Many Aboriginal people agree that “if we are to survive, ... , we have to get rid of the passive welfare mentality that has taken over our people”.^v The social disaster confronting Aboriginal communities dictates this urgency - “we can’t just all agree that passive welfare is a problem, we have to do something about it”.^{vi}

Passive welfare and addiction have contributed to the undermining of traditional values and relationships that govern Aboriginal society. In many communities they have played a significant role in corrupting Aboriginal values of responsibility and sharing and changing them into exploitation and manipulation. The social disintegration associated with passive welfare and addiction cannot be resolved “without confronting the issue of unconditional payments to able-bodied people”.^{vii}

The oldest people remember the traditional economy, which demanded responsibility - if they didn’t work, they starved. But their children and grandchildren have grown up in a passive welfare economy that has distorted the cultural values of responsibility or reciprocity that were part of the traditional economy. The passive welfare economy’s resources are susceptible to irrational appropriation and expenditure. Money acquired without principle is more easily expended without principle. This ‘gammon’ economy in Aboriginal communities of ‘money for nothing’ has resulted in what Noel Pearson has called the human right to “misery, mass incarceration and early death”^{viii}.

Integral to overcoming the culture of passive welfare and its associated dysfunction is the restoration of cultural legitimacy in Aboriginal social and economic structures. Welfare is potentially a valuable resource for Aboriginal people, but first Aboriginal people need to “leech the poison out of it”.^{ix} The majority of the legitimate cultural knowledge needed for this process lies with Elders who recall the traditional economy, and who are now at the end of their lives and passing away. Hence the urgency of reform.

The consensus is that the welfare economy has created and compounded Mutitjulu’s social and economic dysfunction. As one Elder said:

“Sit-down money is killing our young people. When the welfare money come in it really killed the work. Now young ones don’t know work, they welfare trained. No more sit-down money. Cut it out. Level-im up, everyone gotta work.”

The need for governments to play a more active role

Under the auspices of ‘self determination’, Aboriginal communities are expected to deal with a complex range of issues including: street lighting, community sanitation, housing policies, primary health care programs, employment programs, juvenile diversion, night patrol programs and, of course, petrol sniffing programs.

Disempowered communities suffering from addiction epidemics and social dysfunction cannot effectively instigate and control responses to complex issues such as petrol sniffing. Mutitjulu, for example, has significantly less institutional resources and capacity to control petrol sniffing than mainstream communities. Particularly given that many of its residents have their own personal addiction problems, it is inappropriate that they be called upon to develop and implement programs to address the dysfunction. As one Mutitjulu community member said about the failure of the night patrol:

“No one has the strength to do it. The council meets and is strong on talk ... there are too many other distractions ... there was an excellent Aboriginal Community Police officer who did great work for a couple of years, then one day he just took off his uniform and joined the drinkers. He’s now in jail.”^x

People in Mutitjulu are also seriously traumatised by the on-going dysfunction in their lives. This seriously limits their capacity for ‘self determination’. Indicative of the level of trauma suffered by the people in Mutitjulu, when the Health Clinic was trashed in 2004, its floor was covered in anti-depression medication.

It can be argued that ‘self determination’ has been used as an excuse by governments not to intervene when perhaps they should. For example, many parents’ devastating relationship with alcohol and marijuana in their own lives - and in that of their parents - has severely damaged their capacity to care for their children. While some of the children in Mutitjulu enjoy loving and protective care, many do not. What ‘self determination’ is being enjoyed by the children who arrive at school malnourished and chronically ill? And what ‘self determination’ do the unborn children of young expectant mothers sniffing petrol have? As one experienced anthropologist has said,

“those of us who encounter such situations know that, while severe cases of neglect do result in official intervention, there often seems to be an unwritten rule that more neglect is tolerated for some Australian children than others, notably Aboriginal children in more isolated communities”.^{xi}

Mainstream communities with higher standards of living and more available services and resources would not be expected to solve their own substance abuse problems. The wider Australian community has a responsibility to assist in addressing petrol sniffing, which has no precedent in traditional Anangu culture. And Aboriginal people have been forthright in rejecting the notion that the solution to petrol sniffing lies with them alone. The father of a young Anangu man from South Australia who died from sniffing argued:

“The petrol doesn’t belong to us. It’s not part of Anangu law. The problem comes from the outside, its like the Maralinga bomb tests, the solution should come from the outside too.”^{xii}

Different communities need different levels of intervention along a spectrum of their capacity and motivation. Many communities and Elders feel that they must solve the problems themselves. Communities where local capacity and motivation have been strong have had success. But governments also have an obligation to intervene more strongly when necessary. The Aboriginal people of Mutitjulu are Australian citizens who have the same rights to live in a peaceful society and enjoy a healthy upbringing and education as mainstream Australians.

The Mutitjulu Working Together Project

The Mutitjulu *Working Together* Project is unique in Central Australia. It is addressing Aboriginal community dysfunction - including that related to addiction and petrol sniffing - in a whole-of-government whole-of-community manner. The Australian and NT Governments are working together with Mutitjulu Community Incorporated (MCI), the Central Land Council, and the private and non-government sectors to overcome the community's serious dysfunction. The project is approaching the complex and interdependent issues in Mutitjulu in a holistic and collaborative manner and according to best-practice principles that have proven to work in 'difficult development partnerships'.

The 'difficult development partnership' model is based on international experience in dealing with fragile states such as the Solomon Islands or Zimbabwe which demonstrate similar social, economic and political conditions to remote Indigenous Australia. Despite long term aid from donor states, poverty, weak governance and dependency have remained significant limitations to growth in these countries.

The *Working Together* Project's principal foci have been law and order, governance, addressing addiction and investment in youth. These foci were derived using 'difficult development partnership' methodology and were informed by grass-roots community consultation, and dialogue with government and non-government stakeholders.

In addition to programming analysis and design, the *Working Together* Project is directly building the capacity of MCI, which receives on-going support from the Project Manager. He attends MCI meetings regularly and assists MCI to make more informed choices, including through the use of cross-cultural capacity building tools.

Governance capacity building is making incremental progress by developing ideas from within the community to reduce complexity and improve accountability. MCI now regularly reaches a quorums - compared to about one-third of the time prior to the project's commencement. It is making more responsible and transparent decisions.

Reflecting the *Working Together* Project's identification of the need for law and order as the first building block for sustainable community development, additional policing resources have been secured. And they are having a positive impact. A whole-of-government agreement to establish a permanent police post in the community will further improve law and order. Reflecting the strong national interests associated with a safe and harmonious Mutitjulu, the Australian government has agreed to fund the capital costs for the Police Post (around \$2 million) and the NT government will meet the recurrent costs.

Reopening the Childcare Centre has provided a place of refuge for women and children and is also ensuring an early childhood intervention approach to education by exposing children to a learning environment. It has also had very positive flow-on effects more broadly in the community. Two young women have been working at the Childcare Centre and are hoping to commence formal training. Nine young mothers have been working at the community store knowing that their children will be cared for and safe. Some of these women have begun working at the tourist facilities at the National Park.

Apart from its application of international best practice principles, the *Working Together* Project's success to date has also been based on the provision of adequate financial and physical resources; the engagement of appropriate human resources; effective and cooperative planning; good ongoing consultation; and a commitment by all of the Project's partners to work together.

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- ⁱ NPY Women's Council Report on Petrol Sniffing in the NPY Lands, October 2004.
- ⁱⁱ Pearson, N., On the Human Right to Misery, Mass Incarceration and Early Death, Dr Charles Perkins Memorial Oration, University of Sydney, October 2001
- ⁱⁱⁱ Henson, B., A straight out man: F. W. Albrecht and Central Australian Aborigines, Melbourne University Press, 1992.
- ^{iv} Gartrell, M., Dear Primitive. A nurse among the Aborigines, Angus and Robertson, 1957.
- ^v Noel Pearson, Our Right to Take Responsibility, 2000.
- ^{vi} The Age, 23 April 2004
- ^{vii} The Age, 23 April 2004
- ^{viii} Pearson, N., *On the human rights to misery, mass incarceration and early death*, Dr Charles Perkins Memorial Oration, University of Sydney, 25 October 2001.
- ^{ix} Noel Pearson, Our Right to Take Responsibility, 2000.
- ^x An Overview of Night Patrol Services in Australia, Attorney-General's Department, Canberra, March 2003.
- ^{xi} Peter Sutton, The politics of suffering: Indigenous policy in Australia since the seventies, 2001.
- ^{xii} Coroner Chivell, Report on the death of Kunmanara Thompson, Umawa, South Australia.