### Effective responses to inhalant use





Inhalant use can present challenges for service providers and the broader community. This information sheet presents a summary of key responses to inhalant use at both individual and community levels. It also highlights approaches to avoid.

#### **Responding to inhalant intoxication**

Intoxication is short acting. Once a person stops inhaling, they should start recovering from the effects within 15 minutes, or up to 30 minutes in cases of heavy use.

#### Safety first

Consider the person, yourself, and other people around you. Assess the physical and social environment for risks before assisting the person using inhalants.

#### Approach slowly

Stand close by initially; give the person time to know you're there. Move slowly and speak calmly when approaching. Note that the person may be too intoxicated to speak.

#### Avoid forcing, arguing, or chasing

This can cause more harm and could be dangerous for their heart. if a person becomes agitated, use standard de-escalation strategies.

#### Ventilate the space

Inhalants are flammable; have doors and windows opened if inside. Ensure things that may ignite the fumes, like cigarette lighters, are removed.

#### Monitor intoxication

Ask the person to put down the product. If they are no longer actively using the inhalant, are they recovering from the effects? Decide how long you'll monitor if the person continues to use inhalants and consider what options you have.

#### **Check for other medical issues or injuries**

The person might be using other substances too. Other conditions may include head injury, infection, sprains, or poisoning due to other chemicals/drugs/snakebites.

#### Ask how they are

Are they physically and emotionally ok? Ask what would make them feel more comfortable and if there is a parent, carer, or other responsible adult who you could contact.

#### Help as required

If the person does not recover as expected (approx. 15-30 mins), or if symptoms worsen, airway becomes compromised, person has a seizure, is unconscious, or a worker is not confident with the situation - call Triple Zero ("000").

## After someone has recovered from intoxication

#### Safe space

Encourage the person to sit in a quiet, safe space. This may require transportation to a suitable place with appropriate adult supervision.

#### Ask how they are

Are they physically and emotionally ok? Ask what would make them feel more comfortable and if you could contact a support person.

#### **Monitor the person closely**

Make sure they continue to recover from the effects within the expected timeframe.

#### Offer water then food

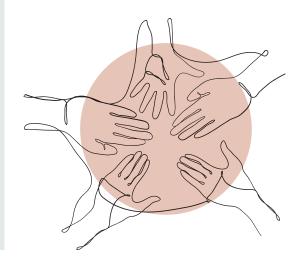
Offer water and, if they're able to swallow, some soft food (e.g. breakfast cereal or yoghurt) that is easy to eat.

#### Change clothing if required

If the inhalant has contaminated the person's clothing, it could be flammable. Offer a change of clothes.

#### Identify family or a responsible adult

Once a person has recovered from the effects of inhalants, support the person to return to the care of their family, carer, or another responsible adult.



# Coordinated community responses including shared case management with young people

High levels of inhalant use often occurs in cycles and amongst groups of young people in suburbs, towns or regions. In these cases, coordinated community responses alongside multi-agency case management for individual young people has been shown to be effective. This includes three elements:

#### Harm reduction

When young people continue to use despite our best efforts, approaches reducing harms aimed at recommended. Develop a system to identify young people who are using inhalants for shared case management among service providers. Consider running outreach services at times and places where inhalant use occurs (often after hours), respond to intoxication, provide aftercare, transport to places of safety, teach young people about the recovery position and when to call an ambulance ('you won't get in trouble').

It is recommended that young people who frequently engage with emergency and other services have a trauma-informed, culturally sensitive response plan developed in collaboration with them. With their consent, this plan should be shared with key stakeholders and may include relevant details such as their current address and key support contacts.

#### **Demand reduction**

Demand reduction strategies are activities and approaches that make young people not want to use inhalants. This can be through the provision of structured activities or cultural programs that change the focus for young people away from the places and times they would normally use inhalants. Other examples of demand reduction include drug education and engaging peer group leaders. Importantly, understanding the underlying reasons a person uses inhalants and supporting healthier alternatives will produce the best outcomes.

#### **Supply reduction**

Identify the products being used and find out where young people are accessing them. We can then work with retailers to reduce access by moving products to enable increased monitoring. Be cautious not to inadvertently identify products as inhalable where young people may not already know about those products and watch for displacement to other inhalants if supply is restricted. Dovetail has a useful resource that can assist:

A Retailer's Response to Inhalants | Dovetail

In remote communities that experience high rates of petrol sniffing, low aromatic fuel (sometimes known by a brand name like "Opal Fuel") can be introduced in place of regular unleaded fuel. For information:

Low aromatic unleaded fuel: The facts | NIAA

### Approaches to avoid

- Overly punitive responses can result in young people hiding, using inhalants in more dangerous places, or shifting inhalant use to other locations.
- Sudden sniffing death can occur when young people using inhalants undertake physical exertion, such as when they are startled or when they run.
- Scare tactics designed to shock young people out of using substances have been proven to be ineffective.
- School-based education programs that have not been evaluated can increase intentions to use substances.
- Police involvement in delivering school drug education programs should be avoided.
- Media reports that show or describe products or show methods of administering inhalants can increase interest in using inhalants.
- Signage in shops that identifies particular products as inhalable can identify products young people did not already know exist.

For further resources on responding to people using inhalants visit the Dovetail <u>Inhalants Toolkit</u>, or contact Dovetail (in Queensland).