

A guide for media reporting on volatile substance use



Contents

/olatile substance use
The role of the media
Responsible reporting on volatile substance use
Senate Select Committee on Volatile Substance Fumes
Australian Press Council Guidelines for reporting on drugs and drug addiction
Promoting local contact numbers
nformation on volatile substances
Effects
Harms
Contacts and information

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Disclaimer:

Research in the area of volatile substance use continues to evolve. While every effort has been made to ensure the information is correct at the time of publishing, this booklet is offered for general information only and should not be considered a substitute for specific, professional advice.

Volatile substance use

Volatile substance use (VSU) is the deliberate inhalation of substances, which produce a vapour or gas at room temperature, for their intoxicating effects. VSU is also referred to as **inhalant use**, **solvent use**, **sniffing** or **chroming**.

There are hundreds of products that can be inhaled for the purpose of intoxication, many of which can be found in the home or purchased at a wide range of retail outlets.

VSU tends to be episodic and cyclical, with different products being misused in localised 'fads'. Products that are more commonly inhaled include petrol, glue, spray paint, butane gas (cigarette lighter refills), a wide range of aerosol sprays, paint thinner and other solvents.

Unlike other drugs, both licit and illicit, reducing access to volatile substance products that have legitimate uses is virtually impossible to achieve. This makes it particularly important that we avoid raising the awareness of young people to the practice of VSU, specific methods of inhalation, and the existence of certain products.

The role of the media

The media is a significant shaper of community attitudes and political responses to alcohol and other drug issues. In the case of VSU, the media is critical and can even influence behaviours (Australian Drug Foundation 2005 submission to the National Inhalant Abuse Taskforce, 2006).

The way the media reports VSU can have significant impact. Irresponsible or uninformed reporting can have an 'advertising' effect, potentially promoting 'copycat' behaviour, particularly among young people. It can also cause local hysteria about the issue, resulting in an increased sense of hopelessness, or escalate local outbreaks rather than reduce the problem.

Balanced against this is the community's right to a free press, their right to stories of interest, to know what's happening in their community and the right of agencies to work with the media to initiate social change, or inform the public debate.

While well-targeted local publicity and information campaigns can help address problems associated with VSU and assist in garnering support for local projects (National Inhalant Abuse Taskforce, 2006), care is needed to ensure the prevention of harm.

Responsible reporting on volatile substance use

Reporting or showing brand or product names, imagery, including photographs, or providing descriptions of the purpose or context of a product's use, is not essential for any media report and should be avoided.

Similarly, reporting on where a product can be purchased, or the cost of the product, is further information that can contribute to young people sourcing these products and subsequently misusing them.

Information describing or depicting methods of use, such as how to inhale or access the substance from its container, should also be avoided.

While such information is not essential for reporting on the practice, in some circumstances reference to a specific substance may be unavoidable ie: in the case of a death attributed to the inhalation of a particular substance.

An example of unhelpful reporting occurred in relation to the death of a Perth teenager from inhaling butane gas. Some reports depicted cans of butane gas and described it as a product "used to refill cigarette lighters ..." and that "it can be purchased for \$4.95 ..." "...from delicatessens or service stations". Some reports went on to state that inhaling the product "gives users a high". Some also depicted someone pressing on the nozzle of the butane gas container to access the gas.

Wherever possible it is preferable to use broader descriptions of the practice such as **VSU** or **inhalant use** and to refer to the product in question broadly as an **inhalant, solvent or aerosol** depending on the case.

Where possible, the location of the story should not be on the front page or used in headlines. This avoids increasing local concerns disproportionately and stigmatising the community. Repetition of coverage is also discouraged to avoid normalising the behaviour in any given locality.

Reports are best focused on the danger of such practices and the importance of seeking assistance whenever necessary, including calling for an ambulance in a medical emergency, or seeking help from an alcohol and other drug professional for information or support.

The above is supported by the Volatile Substance Use Media Guidelines developed by the 1985 Senate Select Committee on Volatile Fumes and the Australian Press Council's guidelines for reporting on drugs and drug addiction.

Senate Select Committee on Volatile Substance Fumes

Volatile Substance Use Media Guidelines

- Products subject to misuse should not be named and the methods used not be described nor depicted.
- Reports of inhalant use deaths should be factual, and not sensationalised or glamorised.
- Articles on casualties of volatile substance use should not be superficial.
 The causes are complex; they vary from region to region and may be different for each individual involved. Reliable organisations should be contacted for information.
- Stories should include a local contact telephone number or source organisation for further information.

Source: Senate Select Committee on Volatile Fumes (1985) Volatile substance abuse in Australia, Canberra: AGPS

Australian Press Council Guidelines for reporting on drugs and drug addiction

- Responsibly report public debate about drug use and addiction.
- The harmful effects of any particular drug should not be exaggerated or minimised.
- Avoid detailed accounts of consumption methods, even though many young people are generally familiar with them.
- Outlining the chemical composition of a drug may be justified in some reports, but avoid providing any details which could assist its manufacture.
- Do not quote the lethal dose of any particular drug.
- Guard against any reporting which might encourage readers' experimentation with a drug, for example highlighting the 'glamour' of the dangers involved.
- Highlight elements of a story which convey the message that preventive
 measures against drug abuse do exist, and that people can be protected from
 the harmful consequences of their addictive behaviours.
- Bear in mind the arguments of those who point out that tobacco and alcohol use and addiction are another major aspect of the drug story.

Source: Australian Press Council: http://www.presscouncil.org.au/advisory-quidelines/

Promoting local contact numbers

Media are encouraged to provide contact details for support and information about volatile substances.

In Western Australia these are:

Alcohol and Drug Information Service (ADIS) 9442 5000 or 1800 198 024 (toll free for country callers)

ADIS is a free, confidential telephone counselling, information and referral service for anyone concerned about their own or another's drug use which is available 24 hours, 7 days a week.

Parent Drug Information Service (PDIS) 9442 5050 or 1800 653 203 (toll free for country callers)

PDIS is a free confidential alcohol and other drug telephone counselling and referral service for **PARENTS** and **FAMILIES**, which is available 24 hours, 7 days a week. Callers can choose to speak to a professional counsellor or a trained parent volunteer with personal experience of drug use in their family.

Information on volatile substances

Effects

Volatile substances are a central nervous system depressant, which means they slow down body functions such as heart rate and breathing. Their effects are similar to those of alcohol, though with some hallucinatory effects.

Effects from inhaling volatile substances depend upon a number of factors including who is using, what substance is used, the method of use and where the substance is being used.

The effects are felt quickly (within a few minutes) and are brief in duration unless more of the substance is inhaled.

Short-term effects may include euphoria/feeling of wellbeing, loss of inhibition, drowsiness/sedation, nausea, headaches, agitation, confusion, and hallucinations.

The long-term effects of VSU will depend on factors such as the type of substances used and the length and frequency of use.

Long-term use of volatile substances can cause damage to the brain and other organs such as the heart, lungs, kidney and liver. While some damage is reversible if the person stops using, long-term/chronic use can cause permanent damage.

Harms

Harms from inhaling volatile substances can be associated with the method of administration, the product used, or the environment in which volatile substances are used.

Volatile substances such as butane gas and aerosols can cause what is known as 'sudden sniffing death', which can result from heart failure if the person is stressed or exercises heavily during or soon after use. For this reason it is important not to chase or frighten people who may be using volatile substances.

Spraying some substances directly into the mouth can freeze the throat and airways, causing the person to suffocate.

High doses can result in an overdose, causing disorientation, convulsions, seizures, unconsciousness, respiratory depression, cardiac arrhythmias and even death.

High levels of use within a short period of time can lead to depressed breathing and loss of consciousness. In this state, a person is at risk of choking if they vomit. Death from VSU can also be caused by suffocation from the gas taking the place of oxygen in the lungs, either from using in enclosed spaces or from a plastic bag being placed over the head.

Other harms related to VSU are injuries due to accidents or taking risks while intoxicated, such as drowning or from motor vehicle crashes or pedestrian accidents. There is also a risk of serious burn injury from fire or explosion due to the highly flammable nature of these substances.

Contacts and information

Media enquiries should be directed to the Drug and Alcohol Office's Media and Communications Manager on:

Tel: (08) 9370 0343 **Mob:** 0434 073 144

For more information about volatile substances visit the Drug and Alcohol Office VSU website – **Volatile Substance Use: A Resource for Professionals** at:

www.dao.health.wa.gov.au/vsu/pages/home.htm

Local contact



