POCHE CENTRES FOR INDIGENOUS HEALTH

MEDIA RELEASE
EMBARGOED 11 July 2014

ABORIGINAL AND TORRES STRAIT ISLANDER SUBSTANCE USE IN THE SPOTLIGHT

Indigenous Health experts meet in Darwin - July 11

Health experts from Poche Centres around Australia are convening in Darwin on July 11 for a Key Thinkers' Forum to discuss substance use in Aboriginal and Torres Strait Islander (Indigenous) communities.

The Poche Centres are specialist Indigenous health and research institutes operating out of leading Australian universities. Researchers, alumni, faculty and students work with communities to find sustainable solutions to health issues affecting Indigenous Australians.

The Key Thinkers' Forum will be focusing on the topic “Alcohol, Tobacco, Drugs and other substance use: what’s the evidence, what’s working, what’s not, what are the issues and opportunities for the future?”

Chair of the Key Thinkers' Forum, Dr Tom Calma, AO stated, “By bringing a range of health experts together we can look at ways we can really improve the delivery of health services to address substance use in Aboriginal and Torres Strait Islander communities. We will be examining what is working and what we can do to advance our understanding.”

Indigenous Australians are more likely than non-Indigenous Australians to experience mental health disorders and alcohol and drug use dependency. Indigenous Australians are hospitalised or die because of alcohol-related conditions four times as often as non-Indigenous Australians.1

Alcohol or other drug (AOD) problems are also a key factor in the high imprisonment rates of Indigenous Australians. For example, more than two out of every three Indigenous prisoners in New South Wales report being intoxicated at the time of their offence.2 Furthermore, just under half of male inmates in surveys conducted in both Queensland and New South Wales report evidence of dependence on alcohol.2,3

Indigenous Australians also suffer a greater proportion of smoking-related disease and yet are twice as likely to be smokers.1

Dr Calma continued, “Alcohol and tobacco are also known factors for a range of common chronic diseases including heart disease, diabetes, cancers and brain damage, so addressing these issues is key to closing the health gap.”

While illicit drug use is less common than alcohol or tobacco, some communities report major problems related to cannabis, including dependence and mental health concerns.4

There is also growing concern in many Indigenous communities about a rise in stimulant use, and the violence that can be associated with ‘ice’. As for all Australians, injecting drug use is less common than the use of licit drugs or cannabis, but poses particular concern around transmission of viruses including Hepatitis C and HIV. Jail is often the place where indigenous Australians are introduced both to injecting and sharing of injecting equipment.
Petrol sniffing has become less common in isolated communities, which have been supported to switch over non-sniffable (OPAL) fuel, but remains a concern in other regions.

Indigenous Australians are at an increased risk of AOD disorders because of ongoing marginalisation, disempowerment, stressors and the intergenerational impacts of colonisation.

Indigenous Australians are far more likely to suffer from recurrent stress and trauma than the remainder of the population.\(^1\) In any population of relative disempowerment, lower educational opportunity, and a lack of a sense of connectedness with community or society are risk factors for excessive drinking and smoking. Childhood separation from parents or childhood emotional trauma, are additional well-recognised risk factors for later substance use and mental health disorders. Indeed, early or recurrent life stress may lead to permanent changes in the way the brain reacts to alcohol or other drugs and leave a person vulnerable to AOD disorders\(^6\).

While the social determinants of substance misuse are well recognised, a vicious cycle can be established, where an adult's substance use can then create a stressful foetal or childhood environment and so increase the risk of substance use in the next generation. In this way, trans-generational transmission of alcohol or drug problems occurs. For this reason, state-of-the-art treatment for adults and effective prevention measures for whole communities (and the whole country) are vital.

The Forum will look at these issues through a “wicked problems” lens and consider what is occurring in Australia to address these facts including community-wide measures, education, early detection and treatment.

At the conclusion of the Forum a Poche Opinion paper will be produced on the substance use issue. Poche Opinion Papers are used by Poche Centres to contribute to knowledge and to draw the wider community into the key debates and issues in Indigenous health.

ENDS

For further information or to arrange an interview please contact:

Steve Riethoff  Reservoir Network  steve@reservoirnetwork.com.au /  02 9955 8000 / 0417 047 837

References

About Poche Centres
Poche Centres at The University of Sydney, The University of Western Australia, The University of Melbourne, and Flinders University specialise in indigenous health and research and work with leading researchers, alumni, faculty and students to bring their knowledge together with communities to find sustainable, workable, affordable solutions to health issues including oral health, specialist medical, Foetal Alcohol Spectrum Disorders, allied health, social and emotional well-being, chronic disease, workforce development, leadership and health promotion.