

HB

114

HFIN

FILE

Representative Mary Sattler Kapsner

State Capitol • Juneau, Alaska 99801-1182

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House District 39
Lower Kuskokwim and Upper Bristol Bay

Resources Committee
Fisheries Committee
Regulation Review Committee

Akiachak
Akiak
Aleknagik
Atmautluak
Bethel
Cheformak
Clarks Point
Dillingham
Eek
Ekuk
Ekwok
Goodnews Bay
Kasigluk
Kipnuk
Koliganek
Kongiganak
Kwethluk
Kwigillingok
Manokotak
Napakiak
Napaskiak
New Stuyahok
Nunapitchuk
Oscarville
Platinum
Portage Creek
Quinhagak
Togiak
Tuntutuliak
Twin Hills

Sponsor Statement

HOUSE BILL NO. 114

"An Act relating to the abuse of Inhalants"

House Bill 114 targets a problem in Alaska that has been neglected for many years. It will provide public safety officials, medical personnel and the courts leverage to place individuals who use and abuse inhalants into rehabilitation. I introduced HB 114 after listening to the concerns of many providers working with young people and to VPSO's who feel they have no tools to intervene when they see someone huffing.

Although the abuse of inhalants is not a new problem, it is reaching rampant proportions throughout Alaska and among youth across the nation. As of January 1999, twenty-four states have passed laws addressing inhalant problems. These laws vary greatly in content, ranging from sending individuals to treatment to criminalizing the behavior.

One of the problems in forging a direction to deal with inhalant abuse is the lack of appropriate treatment facilities. Most substance abuse treatment programs are geared toward problems of alcohol and drugs. Nationally, there are only two residential treatment facilities designed for inhalant abusers, in Texas and South Dakota. Thanks to the efforts of Senators Frank Murkowski and Ted Stevens, the Yukon Kuskokwim Health Corporation in Southwest Alaska received a grant in 1999 to build an inhalant abuse treatment facility. Construction of the facility is presently underway with completion scheduled for August 2001.

A 1998 survey by the YKHC found that during 1996 and 1997, 161 Alaskan sought treatment for inhalant abuse at drug and alcohol programs. During the same period they found 46 people with a history of inhalant abuse died. A 1993 study by the Indian Health Service in Alaska looked at the cost to society if inhalant abusers are left untreated. That study found that a 19 year old with a chronic history of inhalant abuse and significant brain or organic damage will cost society \$1.4 million over a lifetime of treatment, medical care, social services, law enforcement and court costs.

We are fortunate in Alaska to be at a threshold of a new era in addressing inhalant abuse with the coming residential treatment facility. I would hope the legislature takes a pro-active look at ways in which we can raise awareness and address statutory needs to complete a package approach that includes prevention, intervention and treatment.

Thank you for your consideration.

Inhalant Abuse in Alaska Fast Facts

- The Division on Alcoholism and Drug Abuse convened an Inhalant Abuse Steering Committee March 12, 1998. The Committee was composed of representatives from, The Alaska Rural and Native Drug and Alcohol Programs (ARANDAP), the Substance Abuse Directors Association (SADA), the Yukon Kuskokwim Health Corporation, the Advisory Board on Alcoholism and Drug Abuse, the Department of Education, and the Division of Alcoholism and Drug Abuse. The Committee submitted its Preliminary Report and Recommendations, October 30, 1998.
- Potential data sources were identified, including The Alaska Trauma Registry, Vital Statistics-Death Certificates, the Youth Risk Behavior Survey, and ADA's Management Information System - Treatment Client Admission data. Additionally, data was sought from the Tribal Courts and the Youth Courts within the State of Alaska. All data sources had limitations.
- The Alaska Trauma Registry collects information on all injuries resulting in admission to an Alaska hospital. Therefore it does not include patients stabilized without hospitalization or those served by clinics. The data goes back to 1991. However, they only began collecting poisoning data as of July 1993. For the time period July 1993 - December 1996 for people under the age of 20, only two cases were found. They were, one 12-year-old sniffing gas in 1993, and one 15-year-old huffing gas with friends in 1995.
- Vital Statistics data from Death Certificates indicated 9 deaths attributable to inhalants in the past ten years. Age at time of death ranged from 12 to 62 years. The major limitation of the Death Certificate data is the manner in which deaths are coded. For example if someone inhaled gasoline while in a boat, got high, fell overboard, and drowned, it would be coded as a drowning accident.
- The Youth Risk Behavior Survey (YRBS) for 1995 indicates that 22.2% of high school students indicated that they had ever sniffed glue, breathed the contents of spray cans or inhaled paints or sprays to get high, as compared to 20.3% nationally. Middle School (7-8th grade) students surveyed indicated that 19.6% of students reported ever using inhalants.
- Client Treatment Admission data for the past six years was reviewed for primary, secondary, and tertiary problem. The data for FY 98 indicates that 46 admissions had inhalants as a primary problem, 18 as a secondary problem, and 34 as a tertiary problem upon admission to treatment. The major limitation of this Treatment Admission data is that up until July 1998 only the Primary Problem data field was required. Up until that time a secondary or tertiary problem with inhalants might not have been indicated.
- To supplement the existing data, the Steering Committee designed two separate survey instruments, one for youth and one for adults. The protocol called for the survey to be

distributed to all division funded treatment programs for administration to all active clients during one seven day period. The week selected (by convenience) was August 9-15, 1998. This was a "snap shot" sample, which can be compared to data gathered in the future. From the distribution of the surveys, 550 adult and 91 youth responses were captured, representing better than 80% of active clients during the survey week.

- Of the 550 adults responding (age 18 and above), 175 (31.8%) said they had used an inhalant at some time. Of those who had said yes to use, 16 (9.1%) reported having used an inhalant within the past 12 months. The youngest reported age of use was four and the oldest reported age of use was 61. The average number of years using an inhalant reported was 5.8, with a range of using from less than 1 year to using inhalants for 28 years. Also, of the adults who reported having used an inhalant (175) at some point, only 41 (23.4%) reported using only one or two times. Leaving 134 (76.6%) with a reported history of use beyond experimentation.
- Of the 91 youth (age 17 and below) responding, 48 (52.7%) said they had used an inhalant at some time. Of those who had said yes to use, 29 (60.4%) reported having used an inhalant within the past 12 months. The youngest reported age of use was eight and the oldest reported age of use was 17. Of all those who responded to the survey (whether answering yes or no to use) 67.8% reported having friends who used inhalants, and 32.2% reported having friends who were experiencing problems related to inhalant use.
- July 1, 1989 the powers and duties of the Division of Alcoholism and Drug Abuse were extended to include programs and activities relating to the misuse of hazardous volatile substances by inhalant abusers. This was done through an amendment to Title 47. Since that time, the Division has funded three public information campaigns designed specifically to educate parents and children about the harmful effects of inhalants.
- The Division does not fund any treatment programs that address inhalant abusers only. Several of the treatment programs however, have internal expertise for this population and address these client needs in the larger milieu. There are only two specialized treatment programs in the nation, both of which were initially federally funded as demonstration projects. One is for adults (Texas) and the other is for adolescents (South Dakota).
- The Steering Committee had four recommendations addressing the need for good data upon which to make better-informed decisions.

The prevention recommendations included:

- In partnership with the Department of Education, local school districts, the Alaska Association of School Boards, SADA, and ARANDAP support the implementation of age appropriate education and skill building curricula for preschool and elementary students.
- Support initiatives that educate parents and enhance local communities' capacity for local problem solving.

- Develop and distribute educational materials for merchants, including strategies on product placement of commonly abused products.
- In partnership with the Department of Public Safety, support the implementation of training for Village Public Safety Officers and Alaska State Troopers on the signs and symptoms of inhalant use and on reporting of use in investigations where not currently included, such as accidents and drowning.

In regard to treatment there were two recommendations:

- Support the development and dissemination of in-service training materials on inhalants and inhalant abuse for clinical and diagnostic use at the regional and local program level.
- Enhance the knowledge and skill level of current practitioners (both prevention and treatment) through the inclusion of inhalant abuse training at statewide training events.

The Steering Committee is scheduled to reconvene in the Spring of 2000 to review the recommendations and progress made.



INHALANTS & POISONS
THEY'RE UNDER YOUR NOSE.

Inhalants FACT SHEET

February 20, 2001

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| <ul style="list-style-type: none">▼ Inhalants are not drugs. They are toxic chemicals that when used inappropriately, such as by sniffing or "huffing" the vapors, can cause toxic effects, similar to the "high" obtained with drugs.▼ Inhalants can kill the very first time they are used. Death is usually from heart failure or suffocation.▼ Inhalant highs are the result of intensive penetration of toxic chemicals into the brain tissue, where they are capable of causing irreversible damage.▼ In addition to brain, liver, lung and bone marrow damage, there is evidence that chronic abuse of some inhalants causes chromosome and fetal damage.▼ Inhalants are the fourth most abused substance after alcohol, tobacco, and marijuana among high school students.▼ A 1999 nationwide survey of students indicates that 19.5% of eighth graders have used inhalants compared to 22% who have used marijuana/hashish.▼ However, there are Alaska communities where it is reported that up to 90% of the elementary school students have tried or are using inhalants.▼ Chronic inhalant users can suffer severe and permanent brain damage; some die the first time they try it; other possible risks include loss of consciousness and irreversible damage to the liver, kidneys and bone marrow. | <ul style="list-style-type: none">▼ Inhalants are often a "gateway" to the abuse of other illicit substances. 70% of one group of substance abusers, in treatment, indicated they had started with inhalants and 50% of those indicated they would go back to inhalants (primarily gas) if alcohol was not available.▼ More than 1,400 common, useful and legal household, office and classroom products can be used to "get high".▼ Every year kids die from inhalant use, but many parents and educators remain ignorant of this silent epidemic.▼ Because the chemicals in inhalants enter the lungs in such high concentrations they have a more formidable toxic profile than other types of abused drugs.▼ Inhalant treatment is significantly more complex than most drug abuse treatment. The toxic chemicals remain in the body tissues for extended periods of time, resulting in the need for a four to six week period of detoxification, prior to actual intensive treatment having much positive effect.▼ Youth with a history of chronic inhalant use have strikingly high rates of relapse. Because of the difficult problems associated with inhalant abuse treatment, these youth are often excluded from some drug abuse programs.▼ Chronic inhalant users may suffer withdrawal symptoms, including: hand tremors, chronic headaches, nervousness, anxiety and excessive sweating. |
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Signs of Use	Harmful Effects
<p>There is a common link between inhalant abuse and problems in school – failing grades, chronic absences and general apathy. Other signs include the following:</p>	<p>Potential long-term effects of inhalant use include:</p>
<ul style="list-style-type: none"> ▼ Paint or stains on body, clothing, rags or bags ▼ Spots or sores around the mouth ▼ Red or runny eyes or nose ▼ Chemical breath odor ▼ Drunk, dazed or dizzy appearance ▼ Nausea, loss of appetite ▼ Anxiety, excitability, irritability ▼ Restlessness or unexplained moodiness and anger outbursts ▼ Missing abusable household items ▼ Slurred or disoriented speech 	<ul style="list-style-type: none"> ▼ Short-term memory loss ▼ Hearing loss ▼ Limb spasms ▼ Permanent brain damage ▼ Bone marrow damage ▼ Liver and kidney damage ▼ Possible fetal effects similar to fetal alcohol syndrome ▼ Intoxication ▼ Death
Typical Profile of an Inhalant Abuser	RESOURCES
<p>There is no typical profile of an inhalant abuser. Sniffers and huffers are represented by both sexes and all socioeconomic groups throughout the country and Alaska. It is not unusual to see elementary and middle-school age youth involved with inhalant abuse. Although often typified as a "rural" problem, the misuse of inhalable products, besides gas, is, unfortunately, very common in schools and homes throughout both urban and rural Alaska.</p>	<p>Local Substance Abuse Programs</p> <p>Local Community Mental Health Services Programs</p> <p>Yukon-Kuskokwim Health Corporation Inhalant Intervention Project, Bethel, Alaska</p> <ul style="list-style-type: none"> - Jim Henkelman, Statewide Outreach Coordinator - Toll Free: 866-HUFFING [483-3464] - Or: 907-230-6693 <p>National Inhalant Prevention Coalition 1-800-269-4237, or on the World Wide Web at: http://www.inhalants.org</p> <p>National Drug and Alcohol Treatment Referral Service – 1-800-662-HELP</p> <p>National Clearinghouse for Alcohol and Drug Information – 1-800-729-6686 http://www.health.org</p>

States with Current Inhalant Statutes

Confirmed as of January 1999

Arizona	13-3403—Possession and sale of a vapor releasing substance containing a toxic substance; regulation of sale; exceptions; classification.
Arkansas	5-64-12—Nitrous Oxide-possession, distribution, exemptions.
California	Penal Code. Title 10. Sec 380-1.—Regulates toluene.
Colorado	18-18-412—Abusing toxic vapors-prohibited.
Florida	877.111—Inhalation, ingestion, possession, sale purchase or transfer of harmful chemical substances; penalties.
Hawaii	712-1250—Promoting intoxicating compounds.
Idaho	18-1502B—Possession of inhalants by minors.
Indiana	35-46-6—Glue Sniffing.
Kentucky	217.900—Volatile substance defined-Inhalation unlawful. 217.902—Repackaging volatile substances.
Louisiana	§93.1—Model glue; use of; abuse of toxic vapors; unlawful sales to minors; penalties.
Maine	22§2383-C—Unlawful use or possession of inhalants.
Maryland	27-301—"It is unlawful for any person to deliberately smell or inhale substances or chemicals..."
Massachusetts	270-18— Substances having property off releasing toxic vapors; sale, possession and use; 270-19—Sale of glue or cement to minors; smelling deterrent ingredients; register.
Nebraska	28-419—Inhaling or drinking certain compounds; unlawful. 28-420—Selling and offering for sale certain compounds; use; knowledge of seller; unlawful. 28-421—Act, exceptions. 28-422—Selling or offering for sale certain compounds; register, maintain for one year. 28-423—Inducing or enticing; violation. 28-424—Violations; penalty.

Nevada	454.346—Use or possession with intent to use drug, chemical, poison or organic solvent to induce euphoria or hallucinations unlawful; exception.
New Hampshire	644.5a—Inhaling toxic vapors for effect.
New Jersey	2C:35-10.4—Toxic chemicals.
North Carolina	90-113.8A through 113.14—North Carolina Toxic Vapors Act
Ohio	2925.31—harmful intoxicant 2925.32—nitrous oxide
Oregon	1999 Ch. 229. (HB 3276)—Relating to inhalants; and declaring an emergency.
Rhode Island	Ch. 11-48—Substances releasing toxic vapors.
Texas	Health and Safety Code Chapter 484—Inhalants. Chapter 485—Abusable glues and aerosol paints.
Virginia	18.2-264—Inhaling drugs or other noxious chemical substances or causing, etc., others to do so.
Wisconsin	134.63—Nitrous oxide; restrictions on sales; records of certain sales; labeling. 346.935—Intoxicants in motor vehicles. 941.315—Possession, distribution or delivery of nitrous oxide.

STATE INHALANT LEGISLATION


NOTE: The following information was compiled by the National Conference on State Legislatures and may not be a complete report on legislative efforts.

* indicates state which provides a fine, jail time or treatment option for violation of inhalant laws

State	Law Prohibits	Substances Prohibited	Fine	Jail	Treatment
Arizona	sale, transfer, or offer to sell to minor	vapor releasing substance containing toxic substance	*	*	
California	sale, distribution, dispensation, possession to minor	toluene, materials containing toluene, nitrous oxide	*	*	
Colorado	inhaling certain compounds for intoxication	general prohibition of inhalable compounds			
Connecticut	sale, distribution to minor	nitrous oxide, including "whippet kits"	*		
Georgia	general inhalants; also prosecutes inhalants under DUI law	general prohibition of inhalable compounds	*	*	
Florida	inhaling certain compounds for intoxication	general prohibition of inhalable compounds			
Hawaii	knowingly selling toluol or inhalable compounds to minors	liquid/chemical containing toluol, inhalable substances			
Idaho	possession by minors or use of inhalant for intoxication	aerosol spray, other inhalant	*	*	
Illinois	knowingly sell, offer or deliver to minor	liquid/chemical containing toluol, inhalable substances			
Iowa	sale, distribution or use for the purpose of intoxication	nitrous oxide	*	*	
Kentucky	inhaling certain compounds for intoxication	general prohibition of inhalable compounds			
Louisiana	prohibits sale or transfer of possession to minor	model glue, inhalable toluene substances	*	*	
New Mexico	sale to minors; inhaling or possessing for intoxication	model glue, aerosol spray, & chemicals for intoxication	*	*	*

Maine	inhaling toxic vapors for effect; sale or distribution for purpose of intoxicification to minor	general prohibition of inhalable compounds	*	*
Maryland	distribution, instruction to minor; sale or distribution to minor	drugs/noxious substances, including butyl nitrite & butane	*	*
Massachusetts	retailers must require ID for sale and maintain register of minors which is available for police inspection; inhalants are required to have noxious deterrents against intoxicification	glue or cement	*	*
Michigan	inhaling certain compounds for intoxicification	general prohibition of inhalable compounds		
Minnesota	sale to minors; use and possession for intoxicification; businesses must post signs stating it is illegal to sell butane/butane lighters to minors	general inhalable compounds, butane/butane lighters		
Mississippi	inhaling certain compounds for intoxicification	general prohibition of inhalable compounds		
Nebraska	inhaling certain compounds for intoxicification; retailers must maintain registry of sale	general inhalable compounds		
New Hampshire	inhaling certain compounds for intoxicification	toxic vapors, not including anesthesia		*
New Jersey	sell or offer to sell to minors	product containing chlorofluorocarbon that is used in refrigerant		
Nevada	sale or offer to give to minors	aerosol paint, glue, cement containing toluene	*	
North Carolina	inhaling certain compounds for intoxicification	general prohibition of inhalable compounds		
North Dakota	inhaling certain compounds for intoxicification	general prohibition of inhalable compounds		
Ohio	inhaling certain compounds for intoxicification	general prohibition of inhalable compounds		

Oklahoma	inhaling certain compounds for intoxicification	general prohibition of inhalable compounds		
Oregon	inhaling certain compounds for intoxicification	general prohibition of inhalable compounds		
Pennsylvania	inhaling certain compounds for intoxicification	general prohibition of inhalable compounds; butane/canisters		
Rhode Island	inhaling certain compounds for intoxicification	general prohibition of inhalable compounds		
South Carolina	inhaling certain compounds for intoxicification	general prohibition of inhalable compounds		
South Dakota	inhaling certain compounds for intoxicification	general prohibition of inhalable compounds		
Tennessee	inhaling certain compounds for intoxicification	general prohibition of inhalable compounds		
Texas	possess, sell or buy; businesses required to post warning signage & pay license fees designated for prevention fund	abusable volatile chemicals	*	*
Utah	inhaling certain compounds for intoxicification	general prohibition of inhalable compounds		
Vermont	inhaling fumes for effect	certain hazardous inhalants, glues	*	
Virginia	inhaling certain compounds for intoxicification	general prohibition of inhalable compounds		

 HOME PAGE



CITY/BOROUGH OF JUNEAU
ALASKA'S CAPITAL CITY

OFFICE OF THE MAYOR

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April 9, 2001

Honorable Mary Kapsner
Representative
Alaska State Legislature
State Capitol, Rm. 424
Juneau, AK 99801-1182

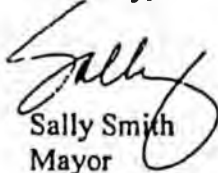
Subject: Resolution of the City & Borough of Juneau, Serial No. 2091
A Resolution Supporting Adoption by the Alaska Legislature of Inhalant Abuse
Legislation

Dear Representative Kapsner:

Enclosed is a copy of a resolution adopted at the April 2, 2001 meeting of the City and Borough of Juneau, Alaska Assembly, in support of House Bill 114, addressing the problem of inhalant abuse in Alaska.

The City and Borough of Juneau unanimously supports the adoption and enactment of House Bill 114, and appreciates your support of the Legislature's leadership on this issue. I would be happy to discuss this with you at your convenience.

Sincerely,


Sally Smith
Mayor

cc: Honorable Kim Elton, Senator
Honorable Bill Hudson, Representative
Honorable Beth Kerttula, Representative
Jim Ayers, Chief of Staff, Governor's Office
Clark Gruening

Presented by: Assemblymember
Wheeler
Introduced: 04/02/2001
Drafted by: J.R. Corso

RESOLUTION OF THE CITY AND BOROUGH OF JUNEAU, ALASKA

Serial No. 2091

A Resolution Supporting Adoption by the Alaska Legislature of Inhalant Abuse Legislation.

WHEREAS, a national survey of 45,000 teenagers has found that for students after the eighth grade, inhalant abuse is the fourth most common intoxicant, ranking after alcohol, tobacco, and marijuana, and

WHEREAS, the percentage of youths who use marijuana increases as they age, from 16% of eighth graders to 38% of twelfth graders, and

WHEREAS the pattern is reversed for inhalants, which are used by 10% of eighth graders but only 6% of twelfth graders, making inhalants the only class of drugs which younger children are using more heavily than older ones, and

WHEREAS, The Center for Disease Control reports that 27% of troubled youth abuse inhalants, and more than half of these do so at least once a month, and

WHEREAS, inhalants are abused by Juneau youths in all cultural and economic groups, and

WHEREAS, the compounds inhaled by these children include cooking spray, disinfectants, furniture polish and wax, hair spray, nail polish remover, oven cleaner, spray deodorant, butane, gasoline, glues and adhesives, paint and paint thinner and rust remover, and

WHEREAS, ingestion of these chemicals can dissolve fatty tissues, arrest breathing, cause cardiac seizure and irreversibly damage the brain, liver, kidneys, and other organs, and

WHEREAS, the risk of sudden death, known as "sudden sniffing death" or SSD is particularly acute with this form of substance abuse, and

WHEREAS, prevention of inhalant abuse requires involved parents, alert educators, and a society that shows its children there is more to life than getting by and getting high, and

WHEREAS, legislative action is an essential part of the solution, with at least 27 states having enacted legislation to address the problem of inhalant abuse, and

WHEREAS, the Alaska Legislature is considering adoption of inhalant abuse legislation, presently before the House as HB 114, and

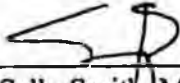
WHEREAS, the Assembly proposes to defer action on any municipal inhalant policy until the legislature has exercised its leadership on this issue;

NOW, THEREFORE, BE IT RESOLVED BY THE ASSEMBLY OF THE CITY AND BOROUGH OF JUNEAU, ALASKA:

Section 1. The Assembly endorses HB 114 and respectfully urges the Alaska Legislature to enact it and the Governor of Alaska to enforce it in a manner that will preserve for municipalities an opportunity to implement solutions for local aspects of the inhalant abuse problem.

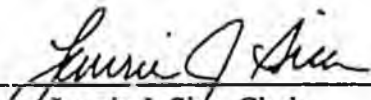
Section 2. Effective Date. This resolution shall be effective immediately upon adoption.

Adopted this 2nd day of April, 2001.



Sally Smith Mayor

Attest:



Laurie J. Sica, Clerk



April 4, 2001

The Honorable Mary Kapsner
Room #424
Alaska State Capitol
Juneau, AK 99801-1182

Dear Representative Kapsner:

On behalf of all Alaskan School Districts, thank you for initiating HB 114. Because of your commitment to the health and safety of Alaska's children, you addressed the statutory need for protective custody and admission to an approved treatment facility for these persons who appear to be incapacitated by alcohol, inhalants, or other drugs.

As you are well aware, drug related problems, including inhalant, alcohol, tobacco, and other drug use, are major debilitating influences on the lives of youth in Alaska. They have also proven to be the primary contributing factor in the alarming number of youth suicides in the State.

Too many children are harmed each year by inhalant use, and inhalants are the third most abused substance among those in their early teens. Furthermore, after some effective prevention in the 1980's, studies show that inhalant abuse is on the rise.

To address some of the manifestations of these problems, law enforcement officials and other professionals must be given the power to protect the health and safety of our children. In our opinion, HB 114 does just that. This bill represents a straightforward approach to providing the necessary tools for intervention and treatment of abuse of all types by our young people. Thank you for your advocacy on behalf of Alaska's children.

Sincerely,

Carl Rose
Executive Director
Association of Alaska School Boards



AASB POSITION PAPER HB 114, AN ACT RELATING TO ABUSE OF INHALANTS

While there are laws concerning alcohol and other drug use, there is to date, nothing in Alaska statute which addresses the issue of inhalant abuse.

AASB believes that we must acknowledge the seriousness of the inhalant abuse problem among our youth, and equip our law enforcement with the ability to take action. Although the problem of inhalant abuse is widespread, there are no laws to restrict inhaling dangerous substances and there are no residential treatment facilities within the State for those young people who are addicted to inhalants.

AASB supports legislation that would:

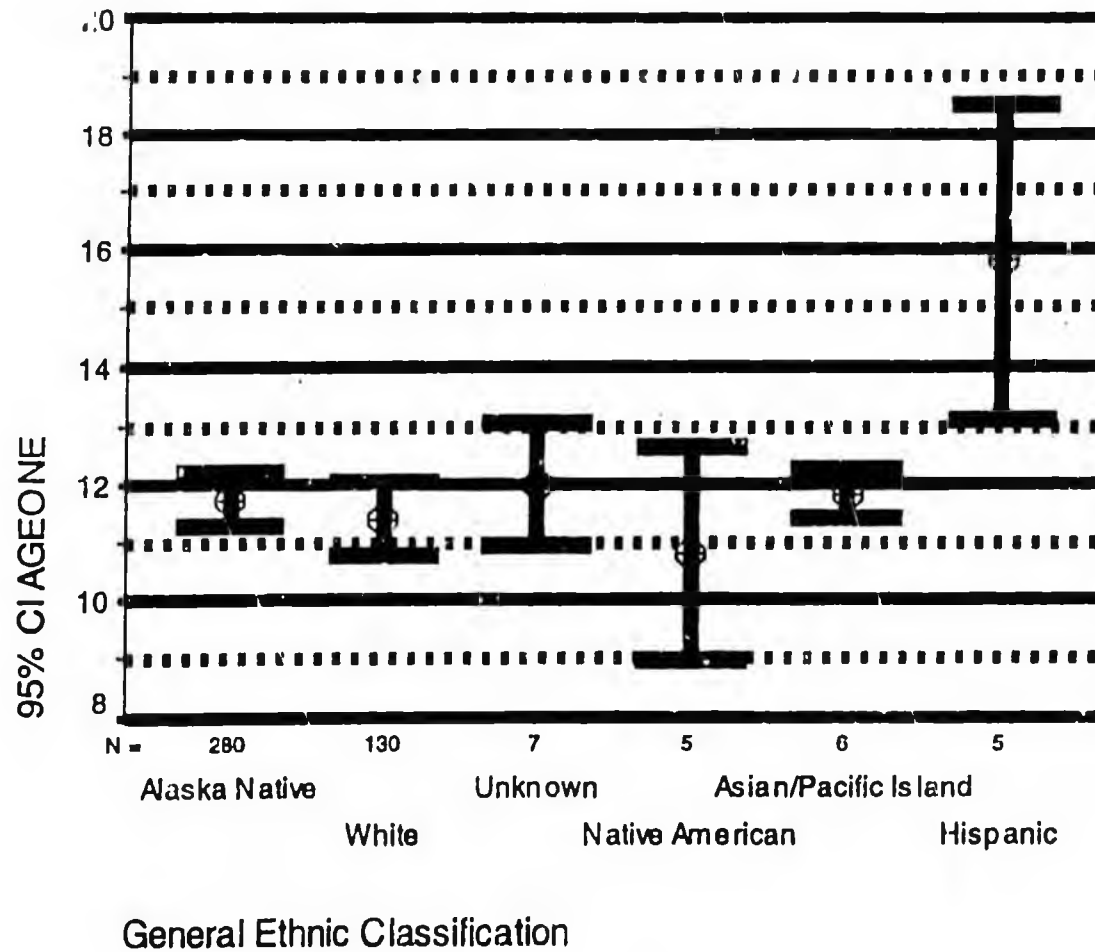
- Enable law enforcement officials to place persons who appear to be incapacitated by inhalants in protective custody;
- Compel admission to an approved treatment facility;
- Provide for a 30-day involuntary commitment of an inhalant abuser to an approved treatment facility, if said person has threatened, attempted to inflict, is likely to inflict, or has inflicted harm on another person, or is incapacitated by inhalants;
- Provide for at least a 180-day involuntary commitment of the inhalant abuser by the director of the treatment facility during the initial 30-day commitment if the director deems the extended treatment necessary.

AASB supports the efforts of the legislature to address the problem of inhalant abuse among the youth of Alaska. With this legislation, we can provide a basic level of protection to our young people and provide treatment for those who are in need.

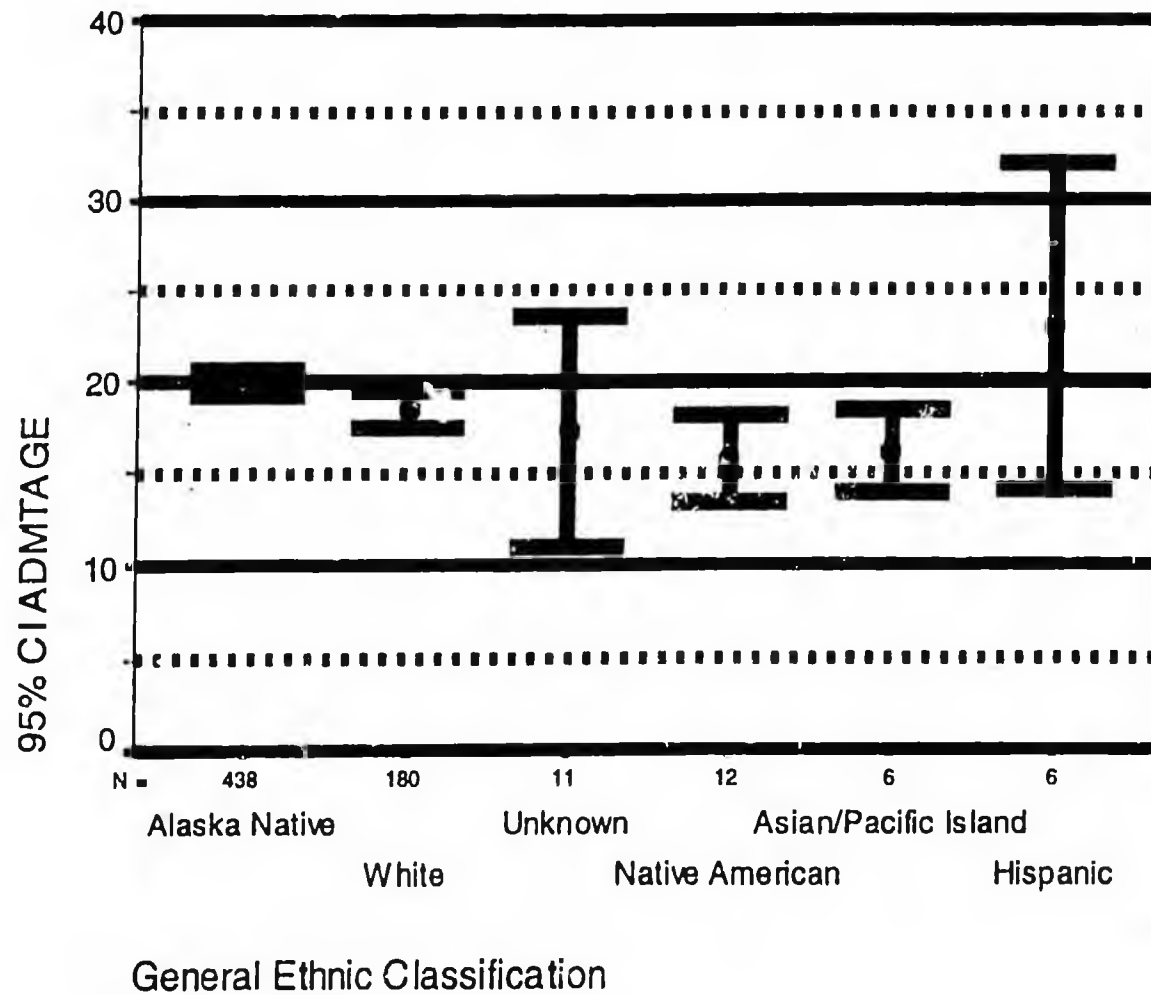
It is not enough to stop the pain and repair the damage that is caused by inhalants. What we must do is strive to prevent all kids from ever beginning to use inhalants in the first place. The book, *Helping Kids Succeed-Alaskan Style*, shows what we each can do to protect the health and safety of all our children and youth. The graphs on pages four and five of the book, show that the more assets a youth has, the less likely she/he is to use inhalants (and participate in other risk behaviors).

It is far easier to start building assets than it is to stop inhalant use. To this end, Alaskans have identified common sense and practical things that each of us can do to help all our kids be successful and healthy. How can the Alaska Legislature use its power and voice to ensure that Alaskan youth have the assets necessary to be healthy, strong, and successful?

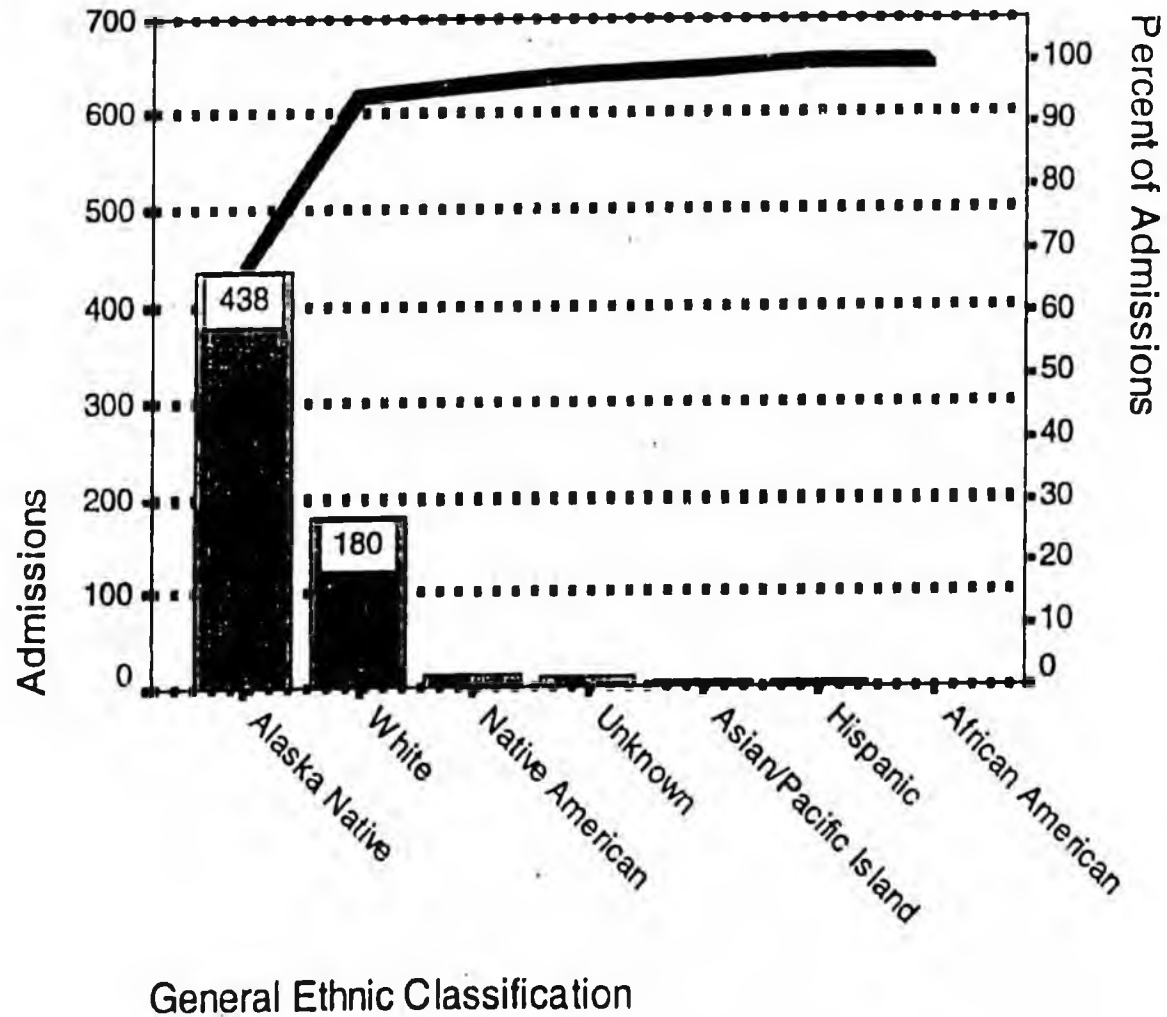
Inhalant Abuse: Average Age of First Use - Alaska MIS 1988-1999



Inhalant Abuse: Average Age at Admission - Alaska MIS 1988-1999



Inhalant Abuse: Frequency of Admissions - Alaska MIS 1988-1999



Inhalant Abuse: Total Admissions Per Year - Alaska MIS 1998-1999

