

SACENDU

South African Community Epidemiology Network on Drug Use

JANUARY-JUNE 2019 | PHASE 46

MONITORING ALCOHOL, TOBACCO AND OTHER DRUG ABUSE TREATMENT ADMISSIONS IN SOUTH AFRICA

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PRESENTATIONS AT THE REGIONAL SACENDU REPORT BACK MEETINGS
(Not included in this report but available on <https://www.samrc.ac.za/intramural-research-units/ATOD-sacendu>.)

PRESENTATION	PRESENTED BY	PRESENTED IN
Treatment Demand Data: Gauteng Data	Mrs Sandra Pretorius	Pretoria
Treatment Demand Data: Northern Region	Mr Warren Lucas	Pretoria
People Who Inject Drugs (PWID) data from COSUP	Dr Matilda Makhakeni	Pretoria
An economic analysis of the demand for cannabis in South Africa	Mr Shaun Riley	Pretoria
Non-Smoker's Exposure to Second-Hand Smoke in South Africa- Results from the 2017 South Africans Attitude Survey	Ms Phindile Ngobese	Pretoria
On- and off-licensed premises drinking behaviour among adults in the city of Tshwane: An analysis of data from the International Alcohol Control study (South Africa)	Mr Mukhethwa Londani	Pretoria
Looking back, moving forward: 50 years of South African Medical Research Council alcohol-related publications	Prof Charles Parry	Pretoria/Durban/PE
Discussion on Alcohol Policy in South Africa	Mr Maurice Smithers/Ms Aadielah Maker	Pretoria/Cape Town
Treatment Demand Data: KwaZulu-Natal Data	Ms Jodilee Erasmus	Durban
Update on community-based harm reduction services in eThekweni	Ms Zara von Homeyer	Durban
Opioid use in South Africa 2012 - 2017: Implications for Policy and Practice	Dr Nadine Harker	Durban/PE
Initial findings from overdose survey across three South African cities	Dr Michael Wilson	Durban
Alcoholic Venue Screening: A novel point of engagement with a hard-to-reach population of men for HIV Testing and linkage-to-care in rural South Africa	Dr Anthony Moll	Durban
"Al-anon works, it really works"	Uthica/Francis	Durban/PE
Treatment Demand Data: Port Elizabeth Data	Jodilee Erasmus	Port Elizabeth
Treatment Demand Data: East London Data	Mr Roger Weimann	Port Elizabeth
Update on community-based harm reduction services in Port Elizabeth	Ms Zoliswa Siguca	Port Elizabeth
What effect will drug and alcohol abuse have on unintended teenage pregnancies?	Mr Ruan Wright	Port Elizabeth
SACENDU WC Treatment Demand Data	Ms Siphokazi Dada	Cape Town
Update on community-based harm reduction services in Cape Town	Mr Rudolph Basson	Cape Town
Family reunification support to inpatient parents at Western Cape substance abuse treatment centres	Mr Brandon Lebuso	Cape Town
DUI (D): A preliminary investigation of drugs in deceased drivers	Dr Bronwen Davies	Cape Town
Cannabis use and hippocampal subfield volumes in males with first episode schizophrenia and health controls	Ms Freda Scheffler	Cape Town

SECTION 1: INTRODUCTION

Ms Siphokazi Dada & Dr Nadine Harker

This report contains detailed data from specialist substance use treatment centres in all nine provinces that comprise the South African Community Epidemiology Network on Drug Use in the Western Cape, KwaZulu-Natal (mostly Durban and Pietermaritzburg), Eastern Cape (Port Elizabeth and East London), Gauteng province, Mpumalanga and Limpopo provinces (now termed the Northern Region [NR]), and the Central Region (comprising of the Free State, Northern Cape and North West provinces [CR]). More recently, we have started including data from community-based harm reduction and HIV prevention services provided by TB HIV Care, Anova Health Institute, OUT Wellbeing and the University of Pretoria's Department of Family Medicine for people who use drugs, including people who inject drugs (PWID). These services are provided in Cape Town, Durban, Johannesburg, Pretoria and Port Elizabeth. Therefore, this report comprises of data from specialist treatment centres as well as data from organizations that provide Harm Reduction Services.

SUMMARY OF FINDINGS

Alcohol remained the dominant substance of use in the EC, KZN and CR; and still causes the biggest burden of harm in terms of both communicable and non-communicable diseases. Between 14% (GT) and 38% (CR) of persons accessing AOD treatment services reported alcohol as their primary substance of use. This period saw a slight increase in the proportion of patients seeking treatment for alcohol in the CR. Proportions for alcohol use remained fairly stable in other regions. Treatment admissions for alcohol-related problems in persons younger than 20 years significantly increased during this period. Between 4% (EC) and 46% (KZN) of patients under the age of 20 reported alcohol as their primary substance of use.

Cannabis is still the most common illicit drug used, especially among youth attending specialist treatment centres. Across sites, between 33% (EC) and 50% (GT) of patients attending specialist treatment centres had cannabis as their primary or secondary drug of use. Between 1% (NR) and 21% (WC) of patients had cannabis/mandrax (methaqualone aka 'white-pipe) as their primary or secondary drug of use.

Methamphetamine (MA) remains the most common primary drug reported by patients in the WC, although the proportion decreased slightly from 30% in 2017b to 28%. Among patients under 20 years, the proportion reporting MA as a primary or secondary substance of use in this region was 13%, and remained stable when compared to the last period. Across sites, between 35% (EC) and 39% (WC) of patients attending specialist treatment centres had MA as their primary or secondary drug of use.

The proportion of admissions for **cocaine** remained fairly low and stable across all sites. Cocaine is mostly reported as a secondary substance of use. Between 4% (WC) and 15% (KZN) of patients in treatment had cocaine as a primary or secondary drug of use, remaining stable across sites. Relatively few patients younger than 20 years were admitted for cocaine-related problems.

Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance. As a result, treatment admissions for heroin as a primary substance of use appear to have increased significantly in this reporting period. **Heroin** use remains a problem across most sites. Mostly heroin is smoked, with a small proportion of patients who reported injecting heroin as a chosen route of administration. According to the treatment demand data patients reporting injection drug use has remained stable over the last few years, although the proportions in Gauteng remain high (39%) compared to other sites. The Western Cape remained stable at 12% during this reporting period. While injection drug use is normally associated with heroin, this review period saw patients from treatment centres also reporting injection of other drugs, such as cocaine, **methcathinone** (CAT), MA and **over-the-counter or prescription** (OTC/PRE) medicines. This remains a major concern since injection use and sharing of needles is associated with health and social harms such as Hepatitis A and other infectious diseases, more specifically HIV/AIDS.

Club drugs and OTC/PRE medicines are still more common as secondary substances of use. The use of OTC/PRE medications such as slimming tablets, analgesics, and benzodiazepines (e.g. diazepam and flunitrazepam) continued to be an issue across sites. Treatment admissions for OTC/PRE medicine, as a primary or secondary drug of use, were between 2% (CR) and 6% (KZN). During this reporting period, 277 (3%) patients across all sites reported the non-medical use of **codeine**, with the majority of patients presenting at treatment centres in the GT region (N=117). CAT, a synthetic stimulant, continues to show an increase in most provinces particularly in Gauteng. Two hundred and twenty-four patients reported CAT as a

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

primary substance of use in the Gauteng region. **Poly-substance use** remains high across provinces, with between 39% (GT) and 54% (CR) of patients indicating the use of more than one substance of use.

Overall, and across all regions, 19% of patients presented with a **dual diagnosis** at treatment admission. The majority of patients reported **mental health** problems at the time of admission (41%), followed by **liver disease** (14%) and **hypertension** (13%). Provincial variations are however evident, for instance, a higher proportion of persons suffering from mental health problems were found in the WC, accounting for 54% and a higher proportion of persons suffering from liver diseases were found in the CR, accounting for 65% of those reporting dual diagnosis in these regions..

Presentations made at the SACENDU regional meetings are available. These can be accessed online at <http://www.mrc.ac.za/intramural-research-units/ATOD-sacendu>. For any queries, please contact Jodilee Erasmus at jodilee.erasmus@mrc.ac.za or 021-938-0313. For any queries specifically related to the Northern Region (Limpopo and Mpumalanga provinces) please contact Warren Lucas (warren.lucas@mrc.ac.za). We hope you will find this report of value to you and your work. If you have any specific feedback or comments on the report, please contact us at siphokazi.dada@mrc.ac.za /nadine.harker.burnhams@mrc.ac.za or call us on 021-938-0946. It remains for us to especially thank Dr Andrew Scheibe for his hard work in collating the data from organizations that provide community-based harm reduction services and all the provincial coordinators for their input and continued support (Arvin Bhana and Helen Keen in KZN, Sandra Pretorius in Gauteng, and Roger Weimann in the EC). Also thanks to the various members of the network who have provided data, presentations or comments, and the Mental Health & Substance Use Directorate of the National Department of Health and the National Department of Health for their financial support of this project. Their support has among other things been used to collect treatment information on almost 20 000 treatment episodes annually, to facilitate hosting regional meetings attended by approximately 200 persons every six months, and the preparation of the bi-annual reports that are sent to over 500 persons.

SECTION 2: TREATMENT CENTRE DATA

2A: TREATMENT CENTRES: WESTERN CAPE

Ms Jodilee Erasmus

Table 1: Proportion of treatment episodes (Western Cape)

Data were collected, on a monthly basis, from 38 specialist treatment centres. Overall 3013 patients were treated across all treatment centres for the period January – June 2019 when compared to 2719 in the previous six month review period.

	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%
CTDCC Observatory							
CTDCC M/Plain	16	15	15	18	14	16	16
CTDCC Atlantis							
De Novo	3	2	-	-	-	-	-
Hesketh King	<1	1	1	1	1	3	2
AKESO Kenilworth	<1	<1	-	-	1	-	-
Kensington Treatment centre	<1	-	1	2	2	2	2
Ramot	5	4	4	4	5	4	4
SANCA WC*	19	16	17	12	15	11	11
Stepping Stones	6	5	6	7	5	6	5
Stikland Neuro D	4	3	4	4	3	-	-
Sultan Bahu	8	11	7	11	12	11	13
Albow Gardens Matrix							
Tafelsig Clinic Matrix							
Delft Matrix							
Khayelitsha Matrix	19	19	20	18	14	15	24
Parkwood Matrix							
Manenberg Matrix							
Toevlug Rehab Centre	6	5	9	10	7	9	7
Ixande Recovery Centre	-	-	-	1	1	1	<1
PASCAP	1	1	-	-	-	<1	-
Mudita Centre	2	2	1	2	3	2	2
Help-me-network	2	4	2	2	1	2	1
Hope House	3	6	5	1	4	5	3
Helderberg CARES	1	<1	1	1	<1	<1	1
Houtbay CARES	2	1	2	1	3	1	1
Living Grace	3	4	2	2	2	2	2
Ithemba Lobomi	<1	-	-	-	-	-	-
Nurture Harmony	-	-	-	1	3	2	-
Namaqua Rehab Centre	-	-	1	2	1	2	1
Total in treatment	2976	2808	2902	2541	3182	2719	3013

*= Includes SANCA George

Table 2: First time admissions (Western Cape)

In Table 2 'Yes' indicates a first-time admission and 'No' indicates a repeat admission. The proportion of new admissions was 72% in this period, decreasing slightly.

	Jul-Dec 2014	Jan-Jun 2015	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%	%
Yes	75	79	75	78	77	75	77	77	81	75	72
No	25	21	25	22	23	25	23	23	19	25	28

Table 3: Type of treatment received (Western Cape)

The majority of patients who received treatment were treated on an outpatient basis.

	Jul-Dec 2014	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%
Inpatient	29	32	18	26	20	29	33	31	29	29
Outpatient	71	68	82	74	80	71	67	69	71	71

Table 4: Referral sources (Western Cape)

During this review period, the proportion of referrals from 'self/family/friends' increased slightly, while referrals from 'other sources' remained fairly stable when compared to previous periods.

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%
Self/family/friends	49	45	42	46	40	45	43	40	43
Work/employer	6	8	6	5	7	9	6	7	7
Doctor/psychiatrist/nurse	7	7	7	5	5	6	6	5	5
Religious body	1	2	1	1	1	<1	1	1	1
Hospital/clinic	4	3	4	3	3	2	3	3	3
Social services/welfare	17	15	15	13	17	20	19	18	18
Court/correctional services	5	5	4	6	4	4	3	4	3
School	12	12	17	18	19	10	17	19	18
Other e.g. radio	4	3	4	4	2	3	2	3	2

Table 5: Population profile (Western Cape)

Males continue to dominate patient intake (73%). A greater proportion of patients were of Coloured descent (72%), followed by Black African patients (16%). A greater proportion of the patients were 'unemployed' (57%), followed by patients that were learners at 'school' (20%). A greater proportion of patients had completed a secondary education (Grade 8-12) (65%), and 21% had tertiary education.

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%
GENDER									
Male	76	73	73	73	75	71	72	73	73
Female	24	27	27	27	25	29	28	27	27
ETHNIC GROUP									
Black African	16	16	15	17	17	13	17	20	16
Indian	<1	1	1	<1	1	<1	1	1	1
Coloured	70	70	70	72	70	71	68	66	72
White	14	14	14	11	13	16	14	13	11
EMPLOYMENT STATUS									
Working full-time	19	21	18	17	19	21	20	20	16
Working part-time	4	5	4	3	5	5	5	4	4
Unemployed (< 6 months)	13	17	14	16	15	17	17	18	16
Unemployed (> 6 months)	19	33	34	35	33	37	30	30	41
Student/Apprentice/ internship	1	1	1	2	2	1	3	2	1
Learner at school	17	19	25	24	23	15	22	24	20
Pensioner/ Disabled/Housewife	2	1	1	2	1	1	3	<1	2
EDUCATION LEVEL *									
None	2	1	2	2	2	2	1	1	1
Primary	8	10	8	9	10	8	9	8	6
Secondary	70	68	69	69	68	67	68	68	65
Tertiary	21	22	21	20	21	23	22	23	21

*Level of education completed

Table 6: Age distribution (Western Cape)

The age range of patients in treatment was 8 to 71 years. Thirty-three percent of the patients in treatment were younger than 25 years old, the proportion increasing slightly compared to the previous period.

Age in Years	Jul-Dec 2016		Jan-Jun 2017		Jul-Jun 2017		Jan-Dec 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%
5-9	-	-	-	-	-	-	3	<1	-	-	1	<1
10-14	228	8	203	7	108	4	236	7	-	-	181	6
15-19	555	20	600	21	387	15	571	18	223	8	548	18
20-24	270	10	297	10	296	12	330	10	552	20	270	9
25-29	526	19	485	17	471	19	509	16	272	10	488	16
30-34	456	17	450	16	482	19	583	18	445	16	578	19
35-39	271	10	294	10	328	13	361	11	493	18	387	13

40-44	165	6	188	7	153	6	203	6	305	11	224	7
45-49	134	5	143	5	132	5	150	5	162	6	147	5
50-54	86	3	102	4	93	4	109	3	122	4	80	3
55-59	54	2	70	2	50	2	51	2	79	3	48	2
60-64	12	<1	25	1	25	1	37	1	42	2	17	1
65+	14	1	19	1	16	1	13	<1	24	1	14	<1

Table 7: HIV Tested in the past 12 months (Western Cape)

Sixty-eight percent of patients reported that they had been tested for HIV in the last 12 months, this proportion remained fairly stable compared to the previous reporting period.

Tested for HIV in the past 12 months	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%
Yes	72	65	66	68
No	20	23	24	23
Decline to answer	8	12	9	9

Table 8: Primary substance of use (Western Cape)

Cannabis, alcohol and methamphetamine remained the most common primary substances of use, each accounting for 26%, 18% and 29% of patient admissions, respectively. However, a slight decrease in cannabis patients and a significant increase in heroin/opiates patients was noted during this review period. All other categories remained fairly stable when compared to the previous period.

	Jul-Dec 2014	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%
Alcohol	22	21	20	22	21	26	24	24	20	18
Cannabis	23	22	25	28	29	29	22	26	31	26
Cannabis/Mandrax**	5	4	5	5	6	5	7	6	6	6
Crack/Cocaine	2	1	1	1	1	1	2	2	2	2
Heroin/Opiates¹	13	14	11	11	13	10	14	12	11	16
OTC/PRE	1	<1	1	1	1	<1	1	1	1	1
Methamphetamine ('Tik')	35	35	37	32	29	27	30	27	28	29
Methcathinone ('CAT')	<1	1	<1	<1	<1	<1	<1	<1	<1	<1
Inhalants	-	-	<1	<1	<1	<1	<1	<1	<1	<1

**White pipe¹ or Mandrax alone

¹Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 9: Overall proportion of substances used (Western Cape)

The overall proportion of primary and secondary substances of use is shown in the table below. Methamphetamine, cannabis/mandrax, cannabis and alcohol were the most commonly used substances. A significant increase in heroin/opiates admissions, from 12% to 17%, was noted in this review period.

	Jul-Dec 2014	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%									
Alcohol	30	28	30	32	30	37	36	34	33	29
Cannabis	34	33	34	37	37	38	30	34	39	37
Cannabis/Mandrax**	17	19	21	20	20	19	24	21	21	23
Crack/Cocaine	3	3	2	3	3	3	4	4	4	6
OTC/PRE	1	2	2	1	2	2	3	2	2	3
Heroin/Opiates[^]	13	15	11	11	13	11	14	13	12	17
Methamphetamine ('Tik')	46	49	48	42	42	36	44	39	39	43
Inhalants	<1	<1	<1	<1	<1	<1	<1	<1	<1	<1
Methcathinone ('CAT')	<1	1	<1	<1	<1	<1	1	1	<1	1
Other	-	-	-	-	1	2	1	2	1	1

**'White pipe' or Mandrax alone

*N < 5 (small proportion of patients)

[^]Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

Table 10: Mode of usage of primary drug (Western Cape)

In looking at the mode of usage of the primary drug, 20% of patients reported swallowing their substances. When alcohol was excluded, 90% reported smoking as their primary mode of use. Only 3% of patients reported that they injected substances (all substance variants). The proportion of patients who specifically injected heroin slightly increased during this period.

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%								
Swallowed	22(1)	22(2)	23(2)	23(2)	28(2)	25(2)	26(2)	21(2)	20(3)
Snorted	2(2)	1(2)	2(2)	1(2)	2(2)	3(3)	2(2)	2(3)	3(3)
Injected	1(2)	1(1)	1(1)	1(1)	2(2)	1(2)	2(1)	2(2)	3(4)
Smoked	75(95)	76(95)	74(95)	75(95)	68(94)	71(93)	70(95)	75(93)	74(90)
Figures in brackets exclude alcohol									
Injected Heroin	7	8	6	5	14	7	13	12	17

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 11: Mean age by primary substance of use (Western Cape)

The overall mean age for this period was 30 years old. A slight increase in mean age for those patient admitted for alcohol and methamphetamine. The mean age for patients with other substances remained stable.

	Jul-Dec 2014	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
Years										
Alcohol	31	41	35	38	38	37	39	37	36	38
Cannabis	25	19	22	20	18	19	21	18	20	19
Cannabis/Mandrax**	30	30	31	30	30	31	31	33	32	32
Crack/Cocaine	28	35	32	33	34	29	34	32	32	33
Heroin/Opiates[^]	29	30	32	30	31	31	32	33	33	32
OTC/PRE	29	40	32	45	38	46	40	40	38	39
Methamphetamine ('Tik')	29	28	31	30	30	30	30	31	29	31
Inhalants	-	-	22*	16*	21*	14	14	33*	15	18
Methcathinone ('CAT')	29	29	31	25	29*	26	29	27	29	29
Overall mean age	29	29	30	29	29	29	30	29	29	30

**'White pipe' or Mandrax alone

*N < 5

[^]Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

Table 12: Primary substance of use by Gender (Western Cape)

Cannabis (73%), heroin/opiates (80%), alcohol (70%), crack/cocaine (84%) and the cannabis/mandrax combination (73%) remained the most used substances by males as indicated in Table 12. However, this period saw a significant decrease in the proportion of females who were treated for the use of OTC/PRE (from 59% to 45%) and alcohol, 36% to 30%.

	Jan-Jun 2016		Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F
	%		%		%		%		%		%		%	
Alcohol	66	34	63	37	69	31	66	34	67	33	64	36	70	30
Cannabis	81	19	82	18	86	14	79	21	81	19	82	18	80	20
Cannabis/Mx**	84	16	71	29	81	19	80	20	82	17	65	35	73	27
Crack/Cocaine	71	29	68	32	65	35	86	14	77	23	75	25	84	16
Heroin/Opiates[^]	82	18	85	15	85	15	78	22	81	19	82	18	80	20
OTC/PRE	32	68	42	58	50	50	47	53	30	70	41	59	55	45
Methamphetamine ('Tik')	68	32	66	34	64	36	61	39	63	37	67	33	64	36
Inhalants	100*	0	60*	40*	83*	17*	100*	0	100*	0	100*	0	80*	20*
Methcathinone ('CAT')	80*	20*	100*	0	40*	60*	75	25*	77	23*	67*	33*	83	17*

**'White pipe' or Mandrax alone

*N<5

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 13: Primary substance of use by Race (Western Cape)

The percentages shown in Table 13, total across the columns. The proportion of Coloured patients in treatment remains higher than any other race groups, with people of Indian descent make up 1% of patients in treatment. Coloured patients in treatment were more likely to be admitted for methamphetamine use (35%), followed by cannabis (21%), heroin/opiates (21%) and alcohol use (12%). Black African patients were more likely to be admitted for cannabis use (45%), alcohol (27%) and methamphetamine use (19%); while among White patients, the majority were admitted for alcohol use (42%), methamphetamine (17%), cannabis (12%), crack/cocaine and heroin/opiates problems (9%). A slight decrease in the proportion of methamphetamine admissions among Black African patients was noticed during this period, while a substantial increase in heroin/opiates use was noted for those of coloured descent.

	BLACK AFRICAN			COLOURED			INDIAN			WHITE		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%	%	%
Alcohol	35	28	27	15	13	12	38	13*	17*	49	40	42
Cannabis	43	43	45	26	30	21	23	44	12*	11	11	12
Cannabis/Mx**	3	3	4	8	8	8	4*	0	0	2	3	3
Crack/Cocaine	1*	1	1	1	1	1	12*	6*	12*	10	11	9
Heroin/Opiates¹	1	2	4	17	14	21	0	19*	18*	7	11	9
Methamphetamine ('Tik')	16	21	19	31	32	35	19*	6*	29*	15	16	17
Inhalants	0	0	0	<1*	<1*	<1	0	0	0	0	0	0
OTC/PRE	<1*	<1*	<1*	<1	<1	<1	0	0	6*	5	5	5
Methcathinone ('CAT')	1*	<1*	<1*	<1*	<1*	1	4*	13*	0	1*	1*	0

**'White pipe' or Mandrax alone

*N <5

¹Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

Table 14: Polysubstance use (Western Cape)

Up to 42% of patients reported using more than one substance, and this proportion decreased slightly compared to the last period.

	Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%
Primary substance only	1454	52	1563	54	1431	56	1635	51	1413	52	1758	58
Primary +2nd substance	1354	48	1339	46	1110	44	1253	49	1306	48	1255	42
Total no. of patients	2808	100	2902	100	2541	100	3182	100	2719	100	3013	100

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 15: Source of payment (Western Cape)

Patients often report a combination of sources of funding for treatment. The category 'State' (81%) was the most common source of payment, followed 'medical aid' (8%) and by 'family/friends' (6%). 'Other' refers to a combination of sources paying for treatment for patients.

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jul 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%
Self	7	9	8	6	6	7	6	3	3
Medical Aid	8	7	8	6	10	10	10	8	8
State	56	63	56	71	66	75	72	76	81
Family/friends	18	18	19	13	11	7	10	10	6
Work/employer	2	1	1	1	1	1	1	3	1
Unknown	3	2	3	2	2	1	<1	<1	<1
Other/combinations	5	<1	4	1	1	-	1	1	1

Table 16: Frequency of use by primary substance of use (Western Cape)

The majority of patients reported that they used their primary substances on a daily basis. The substances that had the highest number of patients reporting daily use was heroin/opiates (90%), OTC/PRE (76%) and cannabis/mandrax (64%).

	Daily			2-6 days per week			Once per week or less often			Not used in the past month		
	%			%			%			%		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
Alcohol	42	42	51	36	38	34	14	14	11	8	6	4
Cannabis	45	43	48	34	36	32	12	14	13	8	7	6
Cannabis/Mx**	68	70	64	26	22	30	2*	3	4	7	5	2
Crack/ Cocaine	47	40	37	37	35	33	11	16	26	4*	10	4*
Heroin/Opiates ¹	91	94	90	4	4	4	2	1*	5	3	1*	1
Methamphetamine ('Tik')	60	54	57	30	35	32	5	6	5	5	5	6
OTC/PRE	85	83	76	12*	14*	14*	3*	3*	7*	0	0	3*
Methcathinone ('CAT')	23*	50*	25*	77	50*	33*	0	0	33*	0	0	9*

**'White pipe' or Mandrax alone

*: N<5

¹Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

DATA ON PATIENTS YOUNGER THAN 20 YEARS

Table 17: Gender and race profile of patients <20 years (Western Cape)

The majority of patients younger than 20 years were male (79%). Coloured patients constituted 73% of these patients and 25% of patients were Black African.

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%
GENDER									
Male	83	80	82	78	83	78	78	77	79
Female	17	20	18	22	17	22	22	23	21
ETHNIC GROUP									
Black African	25	22	18	25	26	23	29	28	25
Coloured	73	75	79	73	71	75	69	69	73
Indian	-	<1	1	<1	1	-	<1	1	<1
White	2	3	3	2	2	3	2	2	2

Table 18: Primary substance of use of patients <20 years (Western Cape)

Most young patients were treated for the use of cannabis (75%), followed by alcohol (9%). A significant increase in the proportion of <20 patients admitted for heroin/opiates was noted. This requires monitoring over the next review periods. Other categories also remained stable.

	Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%
Alcohol	78	10	85	11	40	8	111	14	102	13	68	9
Cannabis	633	81	638	80	371	75	620	77	578	75	571	75
Cannabis/Mx**	20	3	19	2	23	5	13	2	20	3	11	1
Crack /Cocaine	3	<1	9	1	1	<1	3	<1	4	1	2	<1
Heroin/Opiates¹	2	<1	6	1	8	2	5	1	5	1	48	6
OTC/PRE	1	<1	-	-	2	<1	2	<1	1	<1	2	<1
Inhalants	4	1	5	1	3	1	-	-	3	<1	4	1
Methcathinone ('CAT')	-	-	1	<1	-	-	3	<1	-	-	4	1
Methamphetamine ('Tik')	41	5	37	5	45	9	51	6	61	8	49	6
Total	783	100	803	100	495	100	810	100	775	100	760	100

**'White pipe' or Mandrax alone

¹Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 19: Primary substance of use by gender of patients <20 years (Western Cape)

A third of adolescent patients who used methamphetamine were female.

	Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	M	F	M	F	M	%	M	F	M	F	M	F
	%		%		%		%		%		%	
Alcohol	56	44	65	35	67	33	63	37	63	37	79	21
Cannabis	82	18	86	14	81	19	81	19	80	20	80	20
Cannabis/Mx**	75	25*	89	11	83	17	92	8	60	40	60	37
Crack/Cocaine	67*	33*	100	0	100*	0	67*	33*	50*	50*	50*	50*
Heroin/Opiates [^]	100*	0	50*	50*	50*	50*	80*	20*	80*	20*	78	22
Inhalants	75*	25*	80*	20*	100*	0	-	-	100*	0	100*	0
Methamphetamine ('Tik')	68	32	76	24	71	29	76	24	77	23	69	31
OTC/PRE	100*	0	0	100*	100*	0	50*	50*	100*	0	50*	50*
Methcathinone ('CAT')	-	-	-	-	-	-	66*	34*	-	-	100*	0

**'White pipe' or Mandrax alone

* N<5

[^]'Nyaope and whoonga' have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

Table 20: Primary substance of use by race of patients <20 years (Western Cape)

	Jul-Dec 2018								Jan-Jun 2019							
	Black African		Coloured		Indian		White		Black African		Coloured		Indian		White	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Alcohol	34	15	66	12	0	0	2	11*	10	5	53	11	1	33*	2	17*
Crack/Cocaine	1	<1*	1	<1*	0	0	2	11*	0	0	2	<1*	0	0	0	0
Cannabis	146	66	417	78	4	100*	14	74	160	86	325	68	0	0	8	67
Cannabis/Mx**	5	2	15	3	0	0	0	0	3	2*	8	2	0	0	0	0
Heroin/Opiates [^]	1	<1*	4	1*	0	0	0	0	4	2*	45	9	0	0	0	0
Inhalants	0	0	3	1*	0	0	0	0	0	0	4	1*	0	0	0	0
Methamphetamine ('Tik')	33	15	28	5	0	0	0	0	8	4	38	8	1	33*	2	17*
OTC/PRE	0	0	1	<1*	0	0	0	0	0	0	0	0	1	33*	0	0
Methcathinone ('CAT')	-	-	-	-	-	-	-	-	0	0	4	1*	0	0	0	0

**'White pipe' or Mandrax alone

* N<5

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

2B: TREATMENT CENTERS: GAUTENG

Mrs Sandra Pretorius

Table 21: Proportion of treatment episodes (Gauteng)

Data were collected from 12 specialist treatment centres during this review period. A total of 3148 patients were treated at Gauteng treatment centres during the period January – June 2019.

	Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%
Elim Clinic	288	10	288	7	286	8	246	9	239	8	239	8
SANCA Eastern Gauteng	85	3	38	1	134	9	443	16	-	-	-	-
SANCA Central Rand	695	24	932	24	971	29	281	10	861	29	1014	32
SANCA Nishtara	69	2	67	2	61	2	-	-	54	2	190	6
SANCA Vaal Triangle	359	12	381	10	356	10	419	15	388	13	279	9
SANCA Castle Carey	267	9	280	7	252	7	104	4	7	<1	75	2
House of Mercy	49	2	130	3	81	2	78	3	84	3	-	-
Stabilis Clinic	123	4	231	6	31	1	67	4	70	2	131	4
SANCA Horizon Clinic	334	11	312	8	288	8	326	12	298	10	455	14
SANCA Thusong	186	6	208	5	225	7	244	10	249	8	340	11
Houghton House	-	-	11	<1	-	-	-	-	-	-	-	-
SANCA Wedge Gardens	94	3	100	3	80	2	82	3	112	4	107	3
SANCA Soweto	-	-	73	2	87	3	-	-	156	5	29	1
SANCA Greater Heidelberg	135	5	112	3	99	3	183	7	146	5	97	3
Fabian Ribeiro	197	7	163	4	223	7	219	8	226	8	192	6
Eden Recovery Centre	61	2	19	1	36	1	13	<1	-	-	-	-
Mighty Wings	7	<1	-	-	-	-	23	1	45	2	-	-
Palm Ridge Clinic	-	-	525	14	202	6	6	<1	-	-	-	-
Total number in treatment	2948	100	3870	100	3412	100	2734	100	2937	100	3148	100

Table 22: First time admissions (Gauteng)

Eighty-six percent of patients were admitted to treatment for the first time during this period, slightly increasing since last period.

	Jul-Dec 2014	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%
Yes	83	81	84	81	82	82	86	83	82	86
No	17	19	16	19	18	18	14	17	18	14

Table 23: Type of treatment received (Gauteng)

During January – June 2019, most patients were treated at outpatient centres while 37% were treated at inpatient centres. The proportion of inpatients remained fairly similar compared to the previous period.

	Jul-Dec 2014	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%
Inpatient	50	44	42	42	44	37	19	42	40	37
Outpatient	50	56	58	58	56	63	81	58	60	63

Table 24: Referral sources (Gauteng)

The proportion of referrals from 'self/family/friends' increased slightly, while referrals from 'correctional services' decreased during this period and all other categories remained stable.

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%
Self/family/friends	56	56	57	56	60	58	59	53	61
Work/employer	6	7	6	7	6	6	6	5	4
Doctor/psychiatrist/nurse (health professional)	3	3	3	2	3	2	2	2	2
Religious body	1	1	1	1	1	1	<1	1	1
Hospital/clinic	3	3	2	2	2	3	2	1	1
Social services/welfare	10	10	9	10	6	10	14	17	15
Court/correctional services	9	9	6	8	8	10	7	12	5
School	10	8	13	11	13	9	10	8	9
Other, e.g. radio	3	2	2	2	3	1	1	1	1

Table 25: Population profile (Gauteng)

Over the last few review periods, very little change has been noted in the population profile of patients admitted to treatment in Gauteng. Over half of patients in this cohort were unemployed. Additionally, a slight increase in the proportion of patients who were pupils/learners at school was noticed. Most patients have secondary school education.

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%
GENDER									
Male	86	88	86	86	86	85	86	86	86
Female	14	12	14	14	14	15	14	14	14
ETHNIC GROUP									
Black African	61	65	61	59	66	65	67	69	66
Indian	2	2	2	2	2	2	12	10	2
Coloured	13	12	15	17	14	17	2	15	18
White	25	21	21	21	18	16	19	7	14
EMPLOYMENT STATUS									
Working full-time	24	24	21	23	20	20	19	18	19
Working part-time	4	3	2	3	3	3	2	4	2
Unemployed (< 6 months)	11	8	10	10	9	11	9	9	8
Unemployed (> 6 months)	30	37	34	33	36	37	46	43	43
Students/apprentice/ internship	4	4	5	3	3	4	4	3	2
Pupil/learner at school	21	20	23	22	24	23	18	21	25
Medically boarded/Housewife/Pensioner	2	3	2	3	3	3	2	2	1
EDUCATION LEVEL									
None	1	1	1	1	1	1	<1	<1	1
Primary	6	6	6	7	6	7	5	7	6
Secondary	75	77	81	76	75	79	81	80	79
Tertiary	17	16	12	16	18	13	13	12	14

Table 26: Age distribution (Gauteng)

The age range of patients in treatment was between 8 and 84 years old, with the overall mean age of 28 years. For this review period, there has been a significant increase in the proportion of patients younger than 20 years and a slight decrease in the proportion of patients aged 30-34 years.

Years	Jan-Jun 2016		Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%
10-14	134	3	117	4	140	4	124	7	87	3	1	<1	145	5
15-19	989	25	650	23	950	25	782	23	543	20	110	4	611	19
20-24	823	21	579	20	720	19	684	20	548	20	608	21	603	19
25-29	733	19	552	19	761	20	662	20	549	20	584	20	665	21
30-34	475	12	401	14	494	13	466	14	417	15	614	21	453	14
35-39	293	7	206	7	289	8	280	8	238	9	445	15	301	10
40-44	153	4	145	5	174	5	152	5	127	5	237	8	129	4
45-49	133	3	34	1	125	3	93	3	95	3	128	4	109	3
50-54	83	2	79	3	85	2	68	2	50	2	89	3	49	2
55-59	73	2	54	2	52	1	36	1	42	2	45	2	33	1
60-64	31	1	31	1	29	1	23	1	18	1	30	1	23	1
≥65	37	1	18	1	23	1	16	<1	19	1	46	2	11	<1

Mean Age	27	28	27	27	28	28	28
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Table 27: Primary substance of use (Gauteng)

The most common primary substance of use in Gauteng during the January – June 2019 period was cannabis (32%). This was followed by heroin/opiates (26%) and alcohol (18%). Other categories remained fairly stable.

	Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%
Alcohol	642	22	669	17	592	17	424	16	409	14	570	18
Cannabis/Mx**	57	2	67	2	79	2	60	2	57	2	95	3
Cannabis	1052	36	1768	46	1407	41	889	33	1070	36	1021	32
Crack/Cocaine	72	2	87	2	90	3	63	2	80	3	100	3
Heroin/Opiates[^]	540	18	653	17	616	18	810	30	801	27	818	26
Ecstasy	5	<1	5	<1	2	<1	6	<1	2	<1	2	<1
OTC/PRE	35	1	57	2	43	1	35	1	33	1	71	2
Methcathinone ('CAT')	325	11	315	8	317	9	205	8	224	8	160	5
Methamphetamine ('Tik')	187	6	214	6	216	6	161	6	236	8	283	9
Inhalants	21	1	26	1	23	1	21	1	15	1	22	1
Total	2948	100	3870	100	3412	100	2734	100	2937	100	3148	100

**'White pipe' or Mandrax alone

[^]'Nyaope and whoonga' have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance.

Table 28: Mode of usage of primary substance (Gauteng)

In looking at the mode of use of the primary substances, 21% of patients reported swallowing their substances, while 67% reported smoking their substances. When alcohol was excluded, 81% reported smoking as their mode of use. Only 4% of patients reported injecting their substance of choice.

	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%
Swallowed	21(2)	20(3)	23(2)	19(2)	19(2)	17(2)	16(2)	21(4)
Snorted**	14(18)	14(17)	14(18)	11(13)	12(15)	10(11)	10(12)	8(9)
Injected	4(5)	5(6)	7(9)	7(8)	7(9)	10(12)	8(9)	4(5)
Smoked	61(76)	61(74)	56(71)	64(77)	62(75)	63(75)	67(77)	67(81)

* If alcohol is not taken into account, the figures in brackets apply

** Included with snorted are sniffed and inhaled

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 29: Primary substance of use by Gender (Gauteng)

Male patients continue to dominate admissions for treatment. A significant decrease in proportion of female patients treated for OTC/PRE was noticed in this period.

	Jan-Jun 2016		Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jul 2018		Jul-Dec 2018		Jan-Jun 2019	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F
	%	%	%	%	%	%	%	%	%	%	%	%	%	%
Alcohol	78	22	73	27	79	21	79	21	83	17	83	17	85	15
Cannabis/Mandrax**	94	6	84	16	88	12	95	5*	90	10	84	16	85	15
Cannabis	91	9	91	9	92	8	90	10	89	11	88	12	87	13
Crack/Cocaine	92	8	86	14	72	28	82	18	67	33	80	20	83	17
Heroin/Opiates[^]	90	10	92	8	88	12	84	16	88	12	88	12	87	12
OTC/PRE	59	41	85	5**	32	68	37	63	83	17	55	45	79	21
Ecstasy	86	13*	80*	20*	80*	20*	100*	0	83*	17*	100*	0	100*	0
Methcathinone ('CAT')	81	19	81	19	82	18	83	17	81	19	86	14	90	10
Inhalants	85	15	86	14*	81	19	91	9*	81	19*	100	0	86	14
Methamphetamine ('Tik')	77	23	79	21	73	27	74	26	84	16	82	18	82	18

**'White pipe' or Mandrax alone

*N<5

[^]Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

Table 30: Mean age by primary substance (Gauteng)

Patients treated for cannabis, heroin/opiates and crack/cocaine were on average the youngest. For this period, the average age for alcohol and OTC/PRE use was 30 years.

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	Years/ Mean Age in years								
Alcohol	40	40	39	37	40	39	36	33	30
Cannabis/Mandrax**	29	26	25	28	25	27	27	26	30
Cannabis	22	24	21	21	22	21	22	26	27
Crack/Cocaine	31	29	27	31	32	31	32	27	27
Heroin/Opiates[^]	26	26	26	27	27	27	27	26	27
Ecstasy	30	28	24	43*	27	35*	28	22*	29*
Methcathinone ('CAT')	28	27	27	30	29	28	30	27	28
Methamphetamine ('Tik')	27	27	27	30	27	27	30	25	28
Inhalants	15	17	21	14	15	17	27	22	28
OTC/PRE	42	40	39	34	42	43	36	31	30
Nyaope/Whoonga	26	25	26	29	26	27	31	28	28

**'White pipe' or Mandrax alone

*N<5

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 31: Primary substance of use by Race (Gauteng)

The proportion of Black African patients in treatment remains higher than any other race groups, with people of Indian descent make up 4% of patients in treatment. Coloured patients in treatment were more likely to be admitted for cannabis use (36%), followed by alcohol and heroin/opiates (21%). Black African patients were also more likely to be admitted for cannabis use (34%), heroin/opiates (27%) and alcohol (16%). Among White patients, the majority were admitted for heroin/opiates use (27%), and Indian patients were admitted for alcohol use (29%). A significant decrease in the proportion of cannabis admissions among Indian patients and increase among White patients, was noticed during this period.

	BLACK AFRICAN			COLOURED			INDIAN			WHITE		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%	%	%
Alcohol	13	12	16	9	8	21	18	11	29	27	50	22
Cannabis/Mx**	3	2	3	5	3	3	2*	3	3*	1*	0	3
Cannabis	37	38	34	38	39	36	25	37	27	14	14	24
Crack/Cocaine	2	3	3	2	3	2	4*	4	2	3	3	3
Ecstasy	<1*	<1*	<1*	0	0	0	0	0	0	<1*	0	<1*
Heroin/Opiates[^]	35	30	27	17	26	21	26	30	16	27	2*	27
Methcathinone ('CAT')	4	6	5	17	11	4	16	7	4	12	14	7
Methamphetamine ('Tik')	3	8	9	12	10	8	9	8	8	11	9	10
Inhalants	1	1	1	<1*	<1*	1*	0	1*	5*	<1*	0	0
OTC/PRE	1	1	2	<1*	<1*	4	0	<1*	2*	3	7	3

**'White pipe' or Mandrax alone

*N<5

Table 32: Second most frequently used substance (Gauteng)

Cannabis (31%), alcohol (15%), 'CAT' (9%) and crack/cocaine (11%) were the most common secondary substances of use.

	Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%
Alcohol	173	15	161	11	162	12	119	11	147	13	198	15
Cannabis/Mandrax**	46	4	84	6	62	4	64	6	86	7	124	9
Cannabis	461	40	421	28	451	33	343	32	399	35	405	31
Crack/Cocaine	64	6	72	5	72	5	83	8	123	11	141	11
Heroin/Opiates[^]	83	7	267	18	142	10	155	14	89	8	89	7
OTC/PRE	30	3	44	3	61	4	64	6	16	1	79	6
Methcathinone ('CAT')	167	14	221	15	193	14	146	14	142	12	124	9
Methamphetamine ('Tik')	82	7	99	7	110	8	81	8	121	11	135	4
Inhalants	6	1	22	2	13	1	4	<1	10	1	12	<1
Other	33	3	72	5	72	5	6	<1	11	1	8	
TOTAL	1167	100	1496	100	1383	100	1080	100	1148	100	1320	100

**'White pipe' or Mandrax alone

[^]Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance.

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 33: Overall use (reported as primary or secondary substance of use) (Gauteng)

Consistent with previous review periods, overall, methamphetamine¹, cannabis, alcohol and heroin/opiates remained the most common substances of use in this region. Other than heroin/opiates which saw a decrease in admissions, admissions for substances remained fairly stable across the previous three review periods.

	Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%
Alcohol	815	28	830	21	754	22	543	20	556	19	768	24
Cannabis/Mandrax*	103	4	151	4	141	4	124	5	143	5	219	7
Cannabis	1513	51	2189	57	1854	54	1232	45	1469	50	1426	45
Crack/Cocaine	136	5	159	4	162	5	146	5	203	7	241	8
Heroin/Opiates[^]	815	28	1109	28	938	28	1273	47	1220	42	907	29
OTC/PRE	65	2	101	3	104	3	99	4	49	2	150	5
Methcathinone ('CAT')	492	17	536	14	510	15	351	13	366	12	284	9
Methamphetamine ('Tik')	269	9	313	8	326	10	242	9	357	12	418	13
Other	45	2	81	2	114	3	35	1	20	1	21	1
Inhalants	27	1	48	1	37	1	25	1	26	1	34	1

*'White pipe' or Mandrax alone

[^]'Nyaope and whoonga' have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance.

Table 34: Suburb of residence (Gauteng)

	Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%
METRO SUBSTRUCTURE												
Greater Pretoria MS	450	15	350	10	205	6	205	7	271	9	345	11
Greater Johannesburg MS	2306	78	3325	90	2670	81	2426	89	2586	88	2673	85
OTHER PROVINCES												
Mpumalanga	45	2	62	2	31	1	29	1	22	1	50	1
Limpopo	43	2	29	8	24	1	39	1	23	1	33	1
North West	45	2	49	1	23	1	25	1	15	1	33	1
Northern Cape	2	<1	3	<1	1	<1	2	<1	-	-	1	<1
Eastern Cape	8	<1	7	<1	7	<1	7	<1	1	<1	6	<1
Free State	17	1	14	<1	12	<1	13	<1	12	<1	18	1
KwaZulu-Natal	6	<1	17	<1	9	<1	11	<1	11	<1	14	<1
Western Cape	4	<1	2	<1	1	<1	2	<1	1	<1	2	<1
OTHER COUNTRIES	8	<1	6	<1	1	<1	3	<1	2	<1	1	<1
Total number on whom information was available	2948	100	3870	100	3412	100	2734	100	2937	100	3148	100

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 35: Sources of payment (Gauteng)

A significant decrease in payments by the 'state' (from 58% to 40%), and a significant increase in payments by 'family/friends' was noticed in this period.

	Jul-Dec 2014	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%
State	41	36	40	48	56	46	48	70	58	40
Medical Aid	21	18	18	18	19	17	14	14	10	12
Family/friends	18	28	23	15	14	13	13	7	11	27
Employer	2	2	2	2	2	2	3	2	2	3
Self	9	9	8	6	5	5	7	4	6	9
Other/Comb	<1	1	1	1	1	2	2	1	<1	1
Unknown	8	6	6	9	1	15	12	2	13	9

Table 36: HIV tested in the past 12 months (Gauteng)

Fifty percent of those who completed the question 'Have you been tested for HIV in the past 12 months' indicated that they had been tested, slightly decreasing since the previous periods.

Tested for HIV in the past 12 months	Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%
Yes	1629	60	1741	59	1564	50
No	955	35	1051	36	1280	41
Declined to answer	150	5	145	5	304	9
TOTAL	2734	100	2937	100	3148	100

DATA ON PATIENTS YOUNGER THAN 20 YEARS

Table 37: Demographic profile of patients younger than 20 years (Gauteng)

The predominant profile of patients admitted for treatment were male and of Black African descent who had completed a secondary education.

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%
GENDER									
Male	90	90	88	91	89	89	85	84	87
Female	10	10	12	9	11	12	15	14	13
ETHNIC GROUP									
Black/African	76	80	73	68	97	73	77	76	75
Coloured	15	13	20	23	2	21	16	17	20
Indian	1	1	1	2	<1	1	2	5	1
White	8	6	6	7	1	5	5	2	4
EDUCATION LEVEL									
None	1	<1	<1	<1	<1	<1	<1	-	1

Primary	12	13	14	18	10	16	13	17	7
Secondary	86	84	84	80	87	82	86	82	85
Any tertiary	2	2	1	2	3	1	1	1	6

Table 38: Referral Sources for patients younger than 20 years (Gauteng)

A higher proportion of patients <20 years (40%) were referred to treatment centres by 'self/family/friends' and this proportion decreased significantly compared to the previous period. This was followed by referrals from 'school' (37%) and 'social services/welfare' (14%). The rest of the categories remained stable.

	Jul-Dec 2014	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%
Self/Family/Friends	33	39	41	38	35	37	42	42	56	40
Work/Employer	<1	-	<1	<1	<1	-	<1	1	3	1
Health professional	3	2	2	1	1	1	2	1	1	1
Religious body	<1	-	<1	<1	<1	<1	<1	-	<1	1
Hospital/Clinic	2	2	2	1	2	2	2	2	2	1
Social Services/Welfare	11	9	13	7	6	5	7	8	17	14
Court/Correctional services	11	10	9	7	14	10	12	6	10	5
School	38	37	30	45	41	43	34	40	10	37
Other	1	2	1	1	1	2	1	-	<1	<1

Table 39: Primary substance of use for patients younger than 20 years (Gauteng)

The most common primary substance of use among young patients was cannabis (38%), followed by heroin/opiates (25%) and alcohol (18%).

	Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%
Alcohol	52	7	30	3	21	2	26	4	56	8	135	18
Cannabis	582	76	894	82	736	81	458	73	289	40	285	38
Cannabis/Mx**	13	2	18	2	12	1	12	2	18	3	18	2
Crack/Cocaine	2	<1	2	<1	2	<1	5	1	26	4	21	3
Heroin/Opiates[^]	39	5	54	5	43	5	69	11	178	25	187	25
OTC/PRE	2	<1	1	<1	-	-	3	<1	10	1	14	2
Inhalants	20	3	21	2	15	2	14	2	5	1	3	<1
Methcathinone ('CAT')	32	4	37	3	38	4	17	3	53	7	39	5
Methamphetamine ('Tik')	25	3	31	3	38	4	20	3	82	11	51	7
TOTAL	767	100	1090	100	909	100	630	100	719	100	756	100

**'White pipe' or Mandrax alone

[^]'Nyaope and whoonga' have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance.

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 40: Mode of usage of primary substance of use for patients younger than 20 years (Gauteng)

	Jul-Dec 2014	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%
Swallowed	21	4	3	3	7	3	2	5	14	21
Snorted	13	12	9	7	7	6	6	5	1	7
Injected	2	1	1	2	2	1	2	2	<1	2
Smoked	65	83	87	87	85	90	89	88	71	69

Table 41: Primary substance of use by Gender for patients younger than 20 years (Gauteng)

This period saw an increase in young females accessing treatment services for all substances, with the exception of 'CAT'.

	Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	M	F	M	F	M	F	M	F	M	F	M	F
	%	%	%	%	%	%	%	%	%	%	%	%
Alcohol	79	21	73	27	71	29	65	35	87	13	79	21
Cannabis	92	8	91	9	90	10	88	12	88	12	80	20
Cannabis/Mx**	92	8*	94	6*	92	8*	92	8	94	6*	64	36
Crack/Cocaine	100*	0	100*	0	100*	0	80*	20*	81	19	50*	50*
Heroin/Opiates^	93	7*	83	17	85	15	88	12	83	17	77	23
Inhalants	90	10*	81	19*	87	13*	79	21	100	0	100*	0
OTC/PRE	50*	50*	100*	0	-	-	0	100*	70	30*	50*	50*
Methcathinone ('CAT')	84	16*	95	5*	84	16	76	24*	81	19	100*	0
Methamphetamine ('Tik')	80	20*	74	26	71	29	65	35	74	26	69	31

**White pipe or Mandrax alone

*N<5

Table 42: Primary substance of use by Race for patients younger than 20 years (Gauteng)

Across all ethnic groups, young people were more likely to be admitted for cannabis, alcohol and heroin/opiates use. A significant increase in the proportion of young Coloured and White patients admitted for alcohol use was noticed during this period.

	BLACK/AFRICAN			COLOURED			INDIAN			WHITE		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%	%	%
Alcohol	4	8	15	4*	8	27	8*	6*	50*	6*	7*	26
Cannabis	72	39	39	79	39	34	75	44	50*	58	64	23
Cannabis/Mx**	2	3	2	1*	2*	3*	8*	0	0	0	0	0
Crack/Cocaine	1*	4	3	1*	2*	2*	0	8*	0	0	0	0
Heroin/Opiates^	<1*	25	26	2*	26	20	0	22	0	16*	7*	35
Inhalants	3	1*	<1*	1*	0	1*	0	3*	0	0	0	0
OTC/PRE	<1*	2	1	1*	0	5	0	0	0	0	0	0

	BLACK/AFRICAN			COLOURED			INDIAN			WHITE		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%	%	%
Methcathinone ('CAT')	1	8	5	7*	7	3	0	6*	0	10*	0	10*
Methamphetamine ('Tik')	3	11	7	4*	14	5	0	11*	0	10*	14*	6*

**'White pipe' or Mandrax alone

*N<5

¹Nyaope and whoonga have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance.

Table 43: Secondary substance of use for patients younger than 20 years (Gauteng)

Cannabis (10%), CAT, methamphetamine and alcohol (at 5% each) were the most common secondary substances of use.

	Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	N	%	n	%	n	%	n	%
Alcohol	48	24	52	18	50	18	39	6	61	8	39	5
Cannabis	73	37	73	25	72	27	43	7	153	21	78	10
Cannabis/Mandrax**	6	3	12	4	7	3	6	1	35	5	28	4
Crack/Cocaine	2	1	8	3	5	2	6	1	48	7	30	4
Heroin/Opiates[^]	16	2	45	4	37	4	16	3	26	4	20	3
Inhalants	4	2	19	7	9	3	2	<1	8	1	3	<1
OTC/PRE	2	1	5	2	19	7	14	2	9	1	17	2
Methcathinone ('CAT')	33	17	43	15	48	18	21	3	68	9	37	5
Methamphetamine ('Tik')	10	5	23	8	20	7	18	3	59	8	34	5
Other	5	3	14	5	20	7	2	<1	4	<1	-	-
TOTAL	767	100	1090	100	909	100	630	100	719	100	756	100

**'White pipe' or Mandrax alone

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

2C: TREATMENT CENTRES: NORTHERN REGION

Mr Warren Lucas

Table 44: Number of treatment episodes

Data representing 1 025 patients were collected from 11 treatment centres during the period January – June 2019, compared to 1 171 from the previous six-month period. In Mpumalanga, most data came from SANCA Lowveld, followed by SANCA Witbank. In Limpopo, SANCA Far North collected data from 351 patients, Jahara Centre from 5 patients and Seshego Centre from 18 patients. No data was collected from the Centre of Hope during this period.

	Mpumalanga				Limpopo			
	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	Number				Number			
Swartfontein	123	110	94	-				
MARC (Inpatient)	90	62	119	23				
MARC (Outpatient)								
Sanca Witbank	518	493	331	224				
Sanca Lowveld	240	274	267	297				
SANCA Thembisile	13	44	26	34				
Bread of Life	-	16	25	19				
Pace Rehab	-	20	36	28				
Healing Wings	-	-	-	14				
Healing Wings (Youth)	-	-	-	12				
SANCA Far North (Polokwane)					285	316	266	351
Jahara Centre					14	28	7	5
Seshego Centre					-	-	-	18
Centre of Hope					-	9	-	-
Total number in treatment	984	1019	898	651	299	353	273	374

Table 45: First Time Admissions

In Table 45 'Yes' indicates a first-time admission and 'No' indicates a repeat admission. First time admissions make up most admissions across both provinces and these proportions remained high across provinces.

	Mpumalanga				Limpopo			
	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%				%			
No	9	9	11	15	7	2	2	16
Yes	91	91	89	85	93	98	98	84

Table 46: Type of treatment received

Table 46 indicates that Mpumalanga (64%) and in Limpopo (63%), most patients were treated on an outpatient basis. There has been an increase in a number of patients coming from Jahara treatment centre, which offers inpatient treatment services.

	Mpumalanga				Limpopo			
	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%				%			
Inpatient	15	14	19	36	5	10	3	37
Outpatient	85	86	81	64	95	90	97	63

Table 47: Referral sources

The most common source of referral to specialist treatment centres in both provinces was the 'self/family/friends', 65% in Mpumalanga and 67% in Limpopo. This is followed by referral from the 'school', 13% in Mpumalanga and 25% in Limpopo.

	Mpumalanga				Limpopo			
	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%				%			
Self/family/friends	56	52	57	65	74	67	64	67
Work/employer	4	7	6	8	1	1	3	3
Health professional (Dr/psychiatrist/nurse)	9	4	7	5	1	2	1	-
Religious body	1	3	1	1	-	1	-	<1
Hospital/clinic	1	1	1	2	-	-	-	-
Social services/welfare	11	9	11	5	1	<1	<1	4
Court/correctional services	2	2	1	1	4	13	1	-
School	16	21	14	13	18	15	31	25
Other, e.g. radio	<1	1	1	<1	1	1	-	1

Table 48: Age distribution

The average age of persons seen by treatment centres was 26 years in Mpumalanga and 25 years in Limpopo. The proportion of patients younger than 20 years of age in Mpumalanga was 25%, while in Limpopo this proportion was 27%.

	Mpumalanga				Limpopo			
	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%				%			
10-14	3	4	3	3	2	3	3	2
15-19	39	25	22	22	29	17	37	25
20-24	20	22	21	21	26	20	18	26
25-29	20	21	20	23	19	22	18	22
30-34	12	14	16	12	14	20	10	12
35-39	7	6	8	9	5	9	4	6
40-44	4	4	3	4	2	4	5	4
45-49	2	2	3	3	2	3	1	1
50-54	2	1	1	1	1	2	1	1
55-59	1	<1	1	2	<1	<1	<1	<1
60-64	<1	<1	1	<1	-	<1	<1	<1
≥65	<1	<1	<1	<1	<1	-	<1	<1

Table 49: Population profile

Male patients predominate in all provinces (86% in Mpumalanga and 95% in Limpopo). Black African patients (consistent with the demographic profile of the province) continue to constitute the highest number of patients seen at specialist treatment centres in both provinces. There was an increase in the proportion of patients who were 'employed' in Limpopo and an increase in 'unemployed' patients in Mpumalanga. In both provinces, over 75% of patients had secondary school education.

	Mpumalanga				Limpopo			
	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%							
GENDER								
Male	88	89	87	86	90	89	90	95
Female	12	11	13	14	10	11	10	5
RACE								
Black African	86	80	79	77	88	88	90	91
Coloured	3	4	3	2	2	1	3	5
Indian	1	<1	1	1	<1	-	-	<1
White	10	15	17	20	10	11	7	3
EMPLOYMENT STATUS								
Working full time	17	19	21	15	4	7	4	13
Working part time	4	3	7	3	4	3	2	3
Unemployed (<6 months)	5	7	9	6	6	3	1	10

Unemployed (>6 months)	42	38	35	46	59	68	44	40
Student/Apprentice/internship	<1	2	2	4	3	1	7	2
Pupil/learner at school	30	30	25	24	25	17	40	32
Medically boarded/Housewife/Pensioner	1	<1	2	2	-	<1	1	<1
EDUCATION LEVEL								
None	<1	<1	1	2	-	-	9	-
Primary	5	7	8	5	<1	3	<1	7
Secondary	80	75	75	79	93	59	63	81
Any tertiary	14	17	14	11	5	38	27	12

Table 50: Primary substance of use

In both the Mpumalanga and Limpopo provinces, cannabis was the most commonly used primary substance of use among patients in treatment; followed by heroin, alcohol and methamphetamine.

	Mpumalanga				Limpopo			
	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%
Alcohol	13	10	17	20	26	27	19	11
Cannabis	37	41	33	31	57	35	55	46
Cannabis/Mandrax**	<1	2	1	4	<1	3	<1	2
Crack/Cocaine	3	3	2	4	7	2	1	3
Methcathinone ('CAT')	2	2	2	5	2	3	4	3
Heroin/Opiates¹	42	37	41	24	4	12	11	24
Inhalants	1	2	1	1	1	14	7	1
OTC/ PRE	1	1	1	2	1	2	1	1
Methamphetamine ('Tik')	1	3	2	10	2	3	2	8

**'White pipe' or Mandrax alone

¹Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance.

Table 51: Primary substance of use by Gender

As in the previous reporting period, across both provinces and bearing in mind small samples, male patients outnumbered female patients. Overall 88% of patients were male, but gender differences were noted for various primary substances of use. In Mpumalanga, 31% of patients who reported cannabis/mandrax use were female.

	Mpumalanga						Limpopo					
	Jan-Jul 2018		Jul-Dec 2018		Jan-Jun 2019		Jan-Jul 2018		Jul-Dec 2018		Jan-Jun 2019	
	%		%		%		%		%		%	
	M	F	M	F	M	F	M	F	M	F	M	F
Alcohol	81	19	87	13	86	14	76	24	90	10*	93	7
Cannabis	94	6	87	13	91	9	95	5	92	8	95	5
Cannabis/Mx**	88	12*	80*	20*	69	31	100	0	100*	0	100	0

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Crack/ Cocaine	73	27	77	23*	86	14*	71	29*	0	100*	100	0
Heroin/Opiates	92	8	92	8	54	16	95	5	93	7*	97	3
Inhalants	89	11*	83*	16*	67	33*	98	2*	89	11*	100*	0
OTC/ PRE	50*	50*	25*	75*	83	17*	50*	50*	100*	0	50*	50*
Methcathinone ('CAT')	68	32	61	39	87	13*	100	0	80	20*	100	0
Methamphetamine ('Tik')	68	32	79	21*	83	17	70	30*	80*	20*	93	7*

***White pipe¹ or Mandrax alone

*N<5

Table 52: Primary substance of use by Race

Although majority of patients seen at treatment centres in both provinces were of Black African decent, the most commonly used substances across all races/ethnic groups were alcohol, heroin/opiates and cannabis.

Mpumalanga												
	BLACK AFRICAN			COLOURED			INDIAN			WHITE		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%			%		
Alcohol	8	13	20	5*	17*	30*	0	0	0	26	34	17
Cannabis	45	35	30	32	25	10*	20*	57*	25*	23	23	36
Cannabis/Mx**	2	<1*	4	2*	0	0	0	0	0	1*	1*	5
Crack/Cocaine	2	2	4	2*	8*	10*	0	14*	0	7	5	5
Heroin/Opiates¹	40	46	24	41	33	40*	60*	14*	50*	20	18	19
Inhalants	2	1	1	0	0	0	0	0	0	0	0	2*
OTC/PRE	<1*	<1*	2	0	0	0	0	0	0	4	3	2*
Methcathinone ('CAT')	1	<1*	5	5*	4*	10*	0	14*	0	8	8	5
Methamphetamine ('Tik')	<1*	1	10	14	4*	0	20*	0	25*	11	7	11

***White pipe¹ or Mandrax alone

*N<5

(Row% add up to 100)

¹Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance.

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Limpopo												
	BLACK AFRICAN			COLOURED			INDIAN			WHITE		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%			%		
Alcohol	26	19	11	25*	13*	10*	-	-	0	31	22*	23
Cannabis	37	56	47	25*	63	35	-	-	100*	15	44	31
Cannabis/Mx**	3	<1*	2	0	0	5*	-	-	0	0	0	0
Crack/Cocaine	1*	<1*	4	0	0	0	-	-	0	10*	6*	8*
Heroin/Opiates ¹	12	11	24	25*	13*	35	-	-	0	13	6*	8*
Inhalants	16	8	1*	0	0	0	-	-	0	0	0	0
OTC/PRE	1*	1*	0	25*	0	0	-	-	0	8*	0	15*
Methcathinone ('CAT')	1*	3	4	0	0	0	-	-	0	18	17*	0
Methamphetamine ('Tik')	3	1*	8	0	12*	15*	-	-	0	5*	6*	8*

**White pipe¹ or Mandrax alone *N<5 (Row% add up to 100)
¹Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance.

Table 53: Mean age in years, by primary substance of use

Mean age differences were noted for different substances. In Mpumalanga, the mean age of patients whose primary substance of use were alcohol, crack/cocaine, and OTC/PRE were younger than last period, and the mean age for cannabis increased to 27 years old. In Limpopo, the mean age of patients whose primary substance of use were alcohol, 'CAT' and cannabis/mandrax were slightly older.

	Mpumalanga				Limpopo			
	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	YEARS							
Alcohol	26	36	37	27	26	34	27	27
Cannabis	26	22	21	27	25	22	24	26
Cannabis/Mandrax**	23*	30	25	28	24*	26	16*	26
Crack/Cocaine	28	31	32	26	25	28	21*	26
Methcathinone ('CAT')	26	29	29	26	25	28	27	29
Heroin/Opiates ¹	25	26	26	28	21	28	22	24
Inhalants	27	19	19	24	24*	29	22	24*
OTC/ PRE	19	36	39	30	24*	29	18*	25*
Methamphetamine ('Tik')	29	28	27	27	22	25	22	25

**White pipe¹ or Mandrax alone *N < 5

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 54: Overall proportion of substances used

The overall proportion of primary and secondary substances of use is shown in Table 54 below. Cannabis, heroin and alcohol were the most common substances used in both provinces. There seems to be an increase in patients seeking treatment for Methamphetamine use in both provinces.

	Mpumalanga						Limpopo					
	Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%
Alcohol	350	34	310	35	189	29	189	54	123	45	49	13
Cannabis	483	47	373	42	305	47	201	57	179	65	187	50
Cannabis/Mandrax**	19	2	8	1	43	7	24	7	1	<1	21	6
Crack/Cocaine	70	7	70	8	60	9	14	4	3	<1	27	7
Methcathinone ('CAT')	42	4	37	4	51	8	13	4	24	9	28	7
Heroin/Opiates[^]	428	42	394	44	163	25	62	18	53	19	101	27
Inhalants	45	4	10	1	11	2	89	25	36	13	2	1
OTC/ PRE	16	2	11	1	22	3	13	4	7	3	7	2
Methamphetamine ('Tik')	37	4	42	5	88	14	14	4	13	5	51	14

**White pipe' or Mandrax alone

[^]Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance.

Table 55: Primary Source of payment

During this period, the most common source of payment for treatment of substance use in both provinces were 'State', followed by 'family/friends'.

	Mpumalanga				Limpopo			
	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%
State	48	39	32	39	1	12	87	75
Medical aid	1	1	2	10	1	-	-	2
Family/Friends	30	39	37	30	67	67	3	17
Employer	1	3	2	3	1	1	2	2
Self	20	18	26	8	30	20	6	3
Unknown	-	-	1	7	-	0	2	-
Other	-	-	<1	3	-	-	<1	<1

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 56: HIV tested in the past 12 months

Over half of the patients in both provinces reported that they had been tested for HIV in the past 12 months.

Tested for HIV in the past 12 months	Mpumalanga				Limpopo			
	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%
Yes	51	56	62	53	<1	5	2	56
No	29	34	26	32	95	95	3	43
Decline to answer	20	10	12	15	4	-	95	1

Table 57: Area of residence

	Mpumalanga				Limpopo			
	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%
Limpopo	21	<1	1	1	29	91	97	99
Mpumalanga	79	97	96	92	67	<1	1	-
Gauteng	<1	1	2	5	4	6	2	1
KwaZulu-Natal	-	<1	<1	1	-	1	-	<1
Free State	-	-	<1	-	-	-	-	-
North West	-	<1	1	<1	-	-	-	-
Eastern Cape	-	<1	-	-	-	-	-	-
Northern Cape	-	-	<1	-	-	-	-	-
Western Cape	<1	<1	<1	1	-	<1	-	-

DATA FOR PATIENTS YOUNGER THAN 20 YEARS

Table 58: Primary substance of use for patients younger than 20 years

Cannabis, heroin and alcohol still remain the most common primary substances of use for patients younger than 20 years in both provinces.

	Mpumalanga				Limpopo			
	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%
Alcohol	16	4	4	22	26	10	12	7
Cannabis	41	76	79	32	56	66	58	52
Cannabis/Mandrax*	1	<1	1	1	-	1	1	4
Crack/ Cocaine	4	1	-	7	5	-	-	3
Heroin/Opiates[†]	11	14	12	21	9	1	15	26
OTC/ PRE	1	-	-	1	-	1	3	-
Methcathinone ('CAT')	3	-	1	7	2	1	2	1
Inhalants	1	4	2	2	-	14	8	1
Methamphetamine ('Tik')	-	1	1	7	1	3	2	6
TOTAL (n)	320	291	233	164	91	71	112	100

*'White pipe' or Mandrax alone

[†]Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance.

Table 59: Profile of patients younger than 20 years

Eighty-seven percent (in Mpumalanga) and eighty-nine percent (in Limpopo) of patients younger than 20 years were Black African. A slight decrease in the proportion of female patients was noticed during the period.

	Mpumalanga				Limpopo			
	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%							
GENDER								
Male	86	91	86	90	88	89	93	95
Female	14	9	14	10	12	11	7	5
RACE								
Black African	91	90	94	87	97	96	97	89
Coloured	4	4	<1	2	1	-	2	10
Indian	1	<1	1	0	-	-	-	0
White	4	6	4	12	2	4	1	1

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

2D: TREATMENT CENTRES: EASTERN CAPE

Mr Roger Weimann

Table 60: Proportion of treatment episodes (Eastern Cape)

Data were collected from six specialist treatment centres. A total of 475 patients were treated across these treatment centres for the January – June 2019 reporting period. The majority of patients were treated at SANCA Central Eastern Cape during this period.

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%
SANCA CEC	54	32	23	43	36	42	36	41	55
Welbedacht	8	8	5	5	9	6	7	9	9
Shepherd's Field	9	11	7	8	9	9	7	8	3
Hunters Craig	-	-	34	30	28	22	26	20	13
NICRO	12	12	5	2	-	-	-	2	-
Step Away	15	10	9	8	11	11	9	13	13
Ernest Malgas	-	-	3	4	6	8	13	6	6
Mooiuitzicht	-	-	-	-	1	3	2	1	-
Total no of persons treated	363	471	638	537	425	515	517	450	475

Table 61: First time admissions (Eastern Cape)

The proportion of new admissions decreased slightly during this period.

	Jul-Dec 2014	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%
Yes	74	74	83	59	87	80	85	80	87	81
No	26	26	17	41	12	20	15	20	13	19

Table 62: Types of treatment received (Eastern Cape)

During this period, most patients were treated on an inpatient basis and this proportion decreased significantly compared to the previous period.

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%
Inpatient	71	43	76	97	82	76	74	68	61
Outpatient	29	57	24	3	18	24	26	32	39

Table 63: Referral sources (Eastern Cape)

Most referrals were from 'self/family/friends' (56%), a slight increase compared to the previous period. This was followed by an decrease in referrals from 'health professionals' (17%), and 'social services/welfare' (11%).

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%
Self/family/friends	17	52	29	23	45	57	40	49	56
Work/employer	13	11	7	7	9	12	8	9	8
Doctor/psychiatrist/nurse (health professional)	12	7	46	54	30	17	29	24	17
Religious body	-	1	<1	1	1	<1	-	<1	1
Hospital/clinic	<1	2	2	1	3	2	2	2	<1
Social services/welfare	1	3	6	10	9	10	16	9	11
Court/correctional services/police/lawyer	29	18	8	4	1	1	1	3	<1
School	-	7	2	-	2	1	3	4	7
Other e.g. radio, Children's home, adverts	-	1	<1	-	-	<1	-	<1	-

Table 64: Age distribution (Eastern Cape)

Patients who were younger than 20 years comprised 25% of the treatment population and significantly increased compared to the previous period. A slight decrease in patients between the ages 20-24 years was also noticed during this period (from 21% to 15%).

Years	Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%
10-14	7	2	6	1	22	4	42	8	-	-	15	3
15-19	39	13	78	18	98	19	112	22	30	7	109	22
20-24	35	12	50	12	77	15	63	12	94	21	69	15
25-29	42	14	66	16	66	13	66	13	63	14	67	14
30-34	52	17	48	11	74	14	63	12	60	13	65	14
35-39	39	13	53	13	63	12	51	10	69	15	39	8
40-44	27	9	35	8	34	7	40	8	42	9	42	9
45-49	30	10	33	8	29	6	32	6	25	6	36	8
50-54	14	5	28	7	21	4	21	4	27	6	13	3
55-59	11	4	15	4	11	2	15	3	21	5	14	3
60-64	5	2	10	2	12	2	8	2	12	3	3	<1
≥65	4	1	2	1	8	2	4	1	7	2	3	<1

Table 65: Population Profile (Eastern Cape)

The table below depicts the population profile of patients attending treatment centres in the Eastern Cape in the first half of 2019. The proportion of females decreased slightly (from 22% - 16%) since the last reporting period and males are still the most patients seen in treatment. There were only slight changes in the proportion of ethnic groups noticed. The proportion of those who were generally unemployed also significantly increased (33% - 42%) during this reporting period.

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%
GENDER									
Male	82	85	74	76	81	82	73	78	84
Female	18	15	26	24	19	18	27	22	16
ETHNIC GROUP									
Black African	21	36	32	31	45	52	49	54	59
Coloured	30	36	33	32	24	23	26	24	21
Indian	3	2	1	1	2	2	2	2	1
White	46	26	34	36	29	24	24	20	18
EMPLOYMENT STATUS									
Working full-time	48	40	50	46	43	38	36	38	34
Working Part-time	7	5	4	4	6	3	3	2	1
Unemployed (< 6 months)	11	15	8	10	9	10	11	6	7
Unemployed (> 6 months)	19	19	18	16	19	25	19	27	35
Student/apprentice/internship	4	10	3	7	5	5	4	5	3
School/learner at school	4	10	14	17	15	16	23	18	17
Medically boarded/Housewife/Pensioner	7	<1	4	3	4	3	4	3	3

Table 66: HIV tested in the past 12 months (Eastern Cape)

Over half of patients (57%) reported that they had been tested for HIV in the last 12 months. Only 5% of patients declined to respond.

Tested for HIV in the past 12 months	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%
Yes	56	44	49	56	57
No	40	50	50	42	38
Decline to answer	4	6	1	2	5

Table 67: Primary substance of use (Eastern Cape)

The most common primary substance of use during this period was alcohol (26%), cannabis (23%), methamphetamine (21%) and heroin/opiates (18%). Other substances seemed fairly similar. Fifty-six patients sought treatment for 'nyaope/whoonga' use during this period in this region, and this increased proportion for heroin/opiates admissions.

	Jul-Dec 2014	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Dec 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%
Alcohol	34	38	21	31	47	52	34	35	34	26
Cannabis	23	20	32	19	16	15	24	21	22	23
Cannabis/Mandrax**	6	4	6	5	3	4	10	7	6	3
Crack/Cocaine	5	3	2	7	3	7	4	3	3	3
OTC/PRE	13	8	2	9	10	6	3	5	4	4
Heroin/Opiates¹	1	2	2	2	1	3	2	2	2	18
Inhalants	<1	-	<1	-	-	-	<1	1	1	-
Methamphetamine ('Tik')	16	20	31	23	16	10	20	24	26	21
Methcathinone ('CAT')	2	2	1	3	3	1	2	1	<1	1

**'White pipe' or Mandrax alone

¹'Nyaope and whoonga' have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

Table 68: Frequency of use of primary substance of use (Eastern Cape)

Most patients attending substance use treatment centres used their primary substance of use daily (66%).

	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%
Daily	52	74	54	53	66	63	64	66
2-6 days per week	34	23	22	40	28	31	28	27
Once a week or less	12	1	17	5	4	4	5	6
Not used in past month	2	2	2	2	3	3	4	1

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 69: Primary substance of use by Gender (Eastern Cape)

Male patients continue to dominate use of substances, however, 25% of patients who reported alcohol use were females.

	Jan-Jun 2016		Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018	
	M	F	M	F	M	F	M	F	M	F	M	F
	%	%	%	%	%	%	%	%	%	%	%	%
Alcohol	82	18	81	19	82	18	67	33	70	30	75	25
Cannabis/Mandrax**	100	0	90	10	84	16	83	17	96	4	93	7*
Cannabis	75	25	96	4*	87	13	88	12	81	19	95	5
Crack/Cocaine	70	30*	70	30	68	32	87	13*	93	7	88	12*
OTC/PRE	57	43	31	69	65	35	8*	92	11*	89	22*	78
Heroin/Opiates[^]	67*	33*	69	31*	91	9*	60	40*	100	0	93	7
Inhalants	-	-	-	-	0	100*	85	14*	100	0	-	-
Methamphetamine ('Tik')	65	35	80	20	82	18	76	24	86	14	85	15
Methcathinone ('CAT')	90	10*	100*	0	75	25*	100*	0	100*	0	100*	0

**White pipe¹ or Mandrax alone

*N<5

[^]Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

Table 70: Primary substance of use by Race (Eastern Cape)

Black African patients were mostly treated for cannabis (25%), followed by alcohol (23%) and heroin/opiates (21%). The most primary substance of use among White patients was alcohol (37%), followed by methamphetamine (14%) and heroin/opiates (13%). There was a decrease in Coloured patients accessing treatment for methamphetamine during this period.

	BLACK AFRICAN			COLOURED			INDIAN			WHITE		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%			%		
Alcohol	30	36	23	31	23	27	22*	0	0	50	44	37
Cannabis/Mx**	10	9	3	5	4*	1*	11*	14*	0	3*	0	6
Cannabis	29	24	25	22	27	27	0	0	60*	5	10	10
Crack/Cocaine	1*	1*	1*	1*	3*	3*	22*	14*	0	7	8	10
OTC/PRE	<1*	0	1*	8	7	8	0	0	0	10	13	9
Heroin/Opiates[^]	2	2	21	1*	1*	15	11*	14*	20*	6	5*	13
Methamphetamine ('Tik')	25	25	24	30	33	19	33*	57*	20*	16	16	14
Methcathinone ('CAT')	0	0	1*	1*	1	0	0	0	0	2*	0	1*

**White pipe¹ or Mandrax alone

*N<5

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 71: Average/Mean age by Primary Substance (Eastern Cape)

The overall mean age of the patients in treatment during this period remains at 30 years. Patients who were treated for over-the-counter or prescribed medication, alcohol and crack/cocaine were on average older than those treated for other substances. The youngest mean age was for cannabis and heroin. The biggest change was seen in cannabis/mandrax, which increased from age 25 to 32 years.

	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	YEARS						
Alcohol	41	32	41	34	41	40	38
Cannabis/Mandrax**	29	38	29	26	28	25	32
Cannabis	22	34	20	29	18	20	25
Crack/Cocaine	32	32	30	29	29	31	33
OTC/PRE	39	36	44	36	43	41	39
Heroin/Opiates^	28	29*	31	30	30	29	25
Methamphetamine ('Tik')	24	37	24	30	23	24	26
Methcathinone ('CAT')	32	30	32*	33	33	43*	27*

White pipe^e or Mandrax

*N < 5

Table 72: Mode of use for primary drug (Eastern Cape)

Smoking was the most common mode of use.

	Jan-Jun 2016		Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Swallowed	199	40	168	55	207	48	194	38	205	40	173	38	141	30
Smoked	247	50	119	39	186	44	292	56	283	55	256	57	305	64
Snorted/Sniffed	43	9	18	6	24	6	24	5	24	4	19	4	16	3
Injected	3	1	-	-	8	2	5	1	5	1	2	<1	13	3

Table 73: Secondary substance of use (Eastern Cape)

The most common secondary substance of use was cannabis (51%), followed by cannabis/mandrax (15%) and alcohol (10%).

	Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%
Alcohol	14	12	49	26	57	23	56	23	67	31	20	10
Cannabis/Mandrax*	22	19	32	17	36	14	36	15	32	15	31	15
Cannabis	33	28	46	24	51	20	61	25	49	22	107	51
Crack/ Cocaine	7	6	18	10	12	5	13	5	9	4	6	3
OTC/PRE	16	14	1	1	19	4	11	4	5	2	16	8
Heroin/Opiates^	-	-	3	2	2	1	2	1	2	1	8	4
Methamphetamine ('Tik')	11	10	35	19	70	28	56	23	43	20	12	6

Methcathinone ('CAT')	5	4	2	1	5	2	4	2	3	1	6	3
Other	8	4	1	1	3	1	7	3	6	2	2	1
TOTAL	116	100	170	100	255	100	246	100	216	100	208	100

*'White pipe' or Mandrax alone

¹Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

Table 74: Primary Source of payment (Eastern Cape)

'Medical aid' was the most common sources of payment (38%), followed closely by 'state' (36%) and 'family/friends' (18%).

	Jul-Dec 2014	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%
Self	2	26	19	11	4	5	5	5	6	5
Medical Aid	65	49	35	63	76	54	42	46	45	38
Family/friends	9	16	34	17	11	18	23	18	22	18
Employer	2	<1	3	2	1	3	5	3	3	2
State	<1	7	<1	6	8	20	24	26	22	36
Unknown	21	1	9	2	-	<1	1	2	2	1
Other	<1	<1	<1	<1	-	-	1	-	-	1

Table 75: Treatment population – suburb of residence (Eastern Cape)

Most patients seen at substance use treatment centres in this region came from the Port Elizabeth and East London areas, although centres also provide treatment to patients from other areas of the region or provinces.

	Jul-Dec 2016		Jan-Jun 2017		Jul-Jun 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%
METRO SUBSTRUCTURE												
Greater East London & Port Elizabeth MS	246	68	324	76	331	64	321	62	281	62	353	74
OTHER PARTS OF THE PROVINCE												
Grahamstown, King Williams Town, Humansdorp, Maclear etc	47	15	85	20	134	26	105	20	79	18	106	22
Other Provinces	10	5	2	16	4	14	3	5	1	10	4	1

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

DATA ON PATIENTS YOUNGER THAN 20 YEARS

Table 76: Primary substance of use of patients younger than 20 years (Eastern Cape)

Heroin/Opiates (35%) was the most commonly used substance by patients in treatment who are younger than 20 years of age, followed by cannabis (33%) and methamphetamine (20%).

	Jan-Jun 2016		Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Alcohol	2	2	31	67	4	5	27	23	6	4	5	4	10	8
Cannabis/ Mandrax*	4	4	-	-	5	5	16	13	4	3	4	3	3	2
Cannabis	46	50	6	13	52	62	40	33	83	54	65	52	41	33
Crack/Cocaine	1	1	2	4	-	-	5	4	2	1	-	-	-	-
Heroin/Opiates ¹	-	-	1	2	-	-	3	3	-	-	-	-	43	35
OTC/PRE	1	1	2	4	-	-	2	2	-	-	1	1	1	1
Methamphetamine (‘Tik’)	37	40	3	7	21	25	25	21	54	34	42	34	25	20
Methcathinone (‘CAT’)	1	1	1	2	-	-	1	1	-	-	-	-	1	1
TOTAL	93	100	46	100	84	100	120	100	154	100	124	100	124	100

*‘White pipe’ or Mandrax alone

¹‘Nyaope and whoonga’ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

Table 77: Gender of patients abusing substances younger than 20 years (Eastern Cape)

Most young people in treatment were male.

	Jan-Jun 2016		Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Male	82	88	43	93	77	92	111	92	125	81	100	81	115	93
Female	11	12	3	7	7	8	9	8	29	19	24	19	9	7

Table 78: Race of patients younger than 20 years (Eastern Cape)

The number of patients under the age of 20 years remained the same as the second half of 2018. The proportion of Black African (76%) patients under 20 years of age who seek treatment remain high.

	Jan-Jun 2016		Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Black African	46	50	23	50	53	63	84	70	109	70	86	69	94	76
Indian	-	-	1	2	1	1	-	-	-	-	-	-	-	-
Coloured	38	41	17	37	23	27	32	27	41	27	31	25	26	21
White	9	9	5	11	7	9	4	3	4	3	7	6	4	3
TOTAL	93	100	46	100	84	100	120	100	154	100	124	100	124	100

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or ‘joint’ and smoked.

2E: TREATMENT CENTRES: KWAZULU-NATAL

Ms Siphokazi Dada

Table 79: Proportion of Treatment Episodes (KZN)

Data were collected from 12 specialist treatment centres. A total of 1291 patients were treated across these treatment centres for the January – June 2019 reporting period, a significant increase compared to the previous period. The majority of patients were treated at SANCA Durban (23%).

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%
AKESO Umhlanga	-	-	-	1	<1	13	4	3	-
Ant-Drug Forum	-	-	4	1	-	-	1	1	15
Harmony Retreat	-	-	-	-	2	1	2	2	1
SANCA Nongoma	-	-	1	3	2	2	-	2	1
SANCA Durban (In/Out)	31	30	23	28	27	23	25	22	23
Newlands Park Centre	8	13	9	16	15	15	17	15	16
SANCA Pietermaritzburg	25	25	31	23	19	17	19	24	19
SANCA Newcastle	<1	<1	4	-	6	2	6	3	2
SANCA Zululand	20	18	18	17	14	11	20	20	14
South Coast Recovery	1	3	3	3	2	2	<1	-	-
ARCA	8	5	5	6	5	5	3	7	4
Madadeni Centre	7	6	-	1	7	7	-	-	-
Siyakhula Centre	-	-	-	1	2	<1	1	2	1
Careline Crisis & Trauma Centre	-	-	-	-	-	2	2	-	2
Riverview Manor	-	-	-	-	-	-	-	-	3
Persons treated over all centres	1122	1171	1247	1177	1370	1400	1256	993	1291

Table 80: First Admissions (KZN)

A higher proportion of patients were first time admissions (79%). While the overall percentage of first time admissions remained high, closer inspection of these rates showed variations in the number of repeat patients between the various treatment centres. Patients who were admitted to inpatient centres had a slightly higher proportion of repeated admissions compared to those who were admitted to outpatient centres, 36% vs. 14% respectively.

	Jul-Dec 2014	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%
Yes	83	91	90	92	88	90	85	85	86	79
No	7	9	10	8	12	10	15	15	14	21

Table 81: Type of treatment received (KZN)

Most patients were treated on an outpatient basis during this period. This proportion increased slightly compared to the previous reporting period.

	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%
Inpatient	28	38	40	52	36	35	32
Outpatient	72	62	60	48	64	65	68

Table 82: Proportion of Race Groups in Treatment Centres (KZN)

	BLACK AFRICAN			COLOURED			INDIAN			WHITE		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%			%		
AKESO Umhlanga	42	58	-	0	3*	-	22	19	-	36	19	-
Anti-Drug forum	18*	50	44	0	8*	5	82	42	50	0	0	1
Harmony Retreat	16*	0	31	0	11*	0	8*	17*	25*	76	72	44
SANCA Durban (In/Out)	57	57	69	9	11	7	26	22	17	8	10	7
SANCA Pietermaritzburg	80	77	84	6	7	6	8	15	9	6	2	2*
South Coast	40*	-	-	0	-	-	0	-	-	60*	-	-
SANCA Zululand	88	88	89	2*	2*	1*	2	6*	5	8	4	5
SANCA Newcastle	74	62	87	7*	8*	0	13	23	13*	6	8*	0
Newlands Park	64	72	70	7	4	7	26	21	20	3	3*	3
ARCA	50	44	42	1**	3*	6*	36	38	40	13	15	12
Madadeni Centre	-	-	-	-	-	-	-	-	-	-	-	-
SANCA Nongoma	-	100	100	-	0	0	-	0	0	-	0	0
Siyakhula Centre	53	63	80	24	13*	2*	18*	19*	0	6*	6*	0
Careline Crisis & Trauma Centre	15*	-	9*	25*	-	0	8*	-	0	50	-	91
Riverview Manor	-	-	21	-	-	0	-	-	21	-	-	58

*:n<=5; **:n=1

Table 83: Population Profile of Patients (KZN)

The table below shows a significant decrease in the proportion of patients who were working full time. In the latest round of data collection, majority of patients had a secondary education (73%), increasing slightly compared to the previous period.

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%
GENDER									
Male	88	88	88	89	88	86	87	86	85
Female	12	12	12	11	12	14	13	14	15
ETHNIC GROUP									
Black African	73	69	71	71	71	67	67	69	68
Coloured	8	3	4	7	5	5	6	6	5
Indian	11	13	16	12	14	16	17	17	20
White	9	12	9	10	10	12	10	7	7
EMPLOYMENT STATUS									
Employed (full-time)	27	31	25	33	25	35	26	30	18
Employed (part-time)	3	4	3	3	6	4	8	5	6
Unemployed (< 6 months)	7	10	7	6	11	9	11	12	10
Unemployed (> 6 months)	19	25	23	26	28	26	24	24	33
Student/apprentice/Internship	2	2	4	4	3	6	3	3	2
Pupil/learner at school	32	24	35	22	24	17	25	24	31
Medically unfit/Housewife/Pensioner	3	2	1	2	2	2	1	1	1
EDUCATION LEVEL									
Primary	7	7	7	6	6	4	4	4	6
Secondary	71	72	75	67	71	66	72	69	73
Tertiary	21	20	17	25	21	27	18	20	14
None	1	1	1	-	2	3	1	1	1

Table 84: Referral Sources (KZN)

A well-established trend was that most referrals were made through a combination of 'self/family/friends' (42%), which decreased slightly compared to the previous reporting period. Referrals from 'school' (27%) also increased significantly in this period.

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%								
Self/Family/Friends	44	52	41	43	45	43	44	48	42
Social Service/ Welfare	7	9	10	14	18	18	19	16	15
Employer/Work	13	14	9	14	11	11	10	12	8
Court/Correctional Services	3	3	3	5	2	3	3	2	1
Health Professionals	4	6	7	4	4	14	5	8	3
Hospital/Clinic	4	1	5	4	3	2	3	2	3
School	20	11	23	12	15	9	14	11	27
Religious Group	1	4	<1	1	1	<1	<1	<1	1
Other	5	1	2	3	2	1	<1	-	1

Table 85: Age Distribution of the Treatment Population (KZN)

Notably, 38% of the population in treatment were younger than 20 years, this proportion increased significantly compared to the 2nd half of 2018 (27%). Sixty-eight percent of the population in treatment were between 10 and 29 years of age.

AGE Years	Jul-Dec 2014	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%
10-19	32	31	25	37	23	26	21	25	27	38
20-24	18	21	17	19	20	19	20	19	17	15
25-29	14	15	18	13	18	18	20	18	18	15
30-34	12	12	14	13	15	15	14	14	17	11
35-39	8	7	9	6	8	8	9	8	10	8
40-44	6	5	6	4	6	4	6	5	5	4
45-49	4	6	4	3	6	5	4	4	3	4
50-54	4	3	2	3	2	2	4	3	3	2
55+	2	2	3	2	2	3	2	3	2	2

Table 86: Race by age – under and over 20 years' age (KZN)

A significant increase in proportion of patients younger than 20 years across racial groups (except for Whites) was noticed during this period.

	20 years or younger						Over 20 Years					
	Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%
Black African	290	34	241	35	417	47	551	66	443	65	461	53
Coloured	20	26	17	27	31	47	57	74	45	73	35	53
Indian	27	13	30	17	76	31	188	87	146	83	176	69
White	18	15	4	6	6	7	105	85	67	94	89	93

Table 87: HIV tested in the past 12 months (KZN)

Fifty-five percent of patients reported that they had been tested for HIV in the last 12 months.

Tested for HIV in the past 12 months	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%
Yes	57	56	55	56	55
No	39	39	41	39	30
Decline to answer	4	5	4	5	15

Table 88: Primary Substance of Use – 1st most frequently used (KZN)

Cannabis (40%), heroin/opiates (31%) and alcohol (13%) were the most commonly used substances among people in treatment during this period. A significant decrease in proportion of patients reporting alcohol as their primary substance of use was noticed during this period.

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%								
Alcohol	38	37	29	37	34	37	29	29	13
Cannabis	39	34	39	34	32	29	29	29	40
Cannabis/Mandrax**	6	6	3	1	3	3	3	2	2
Crack/Cocaine	4	5	5	4	6	6	7	8	4
OTC/ PRE	1	1	2	1	1	2	2	2	3
Heroin/Opiates ('Sugars') ^	10	14	19	19	20	21	28	26	31
Inhalants	<1	1	1	<1	<1	<1	<1	<1	<1
Methcathinone ('CAT')	<1	1	1	2	2	1	1	<1	3
Methamphetamine ('Tik')	<1	1	1	1	1	1	1	1	4

**'White pipe' or Mandrax alone

^Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 89: Primary Substance of Use by Age Cohort (KZN)

Tables 89 – 90 show substances of use by age cohort and mean age of primary substances of use. An increase in heroin/opiates use by young persons was noticed during this period.

	20 Years or Younger					Over 20 Years				
	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%	%	%	%
Alcohol	24	17	14	43	45	76	83	86	57	55
Cannabis	55	62	68	34	41	45	38	32	66	59
Cannabis/Mandrax**	1	2	13*	2	30	99	98	87	98	70
Crack/Cocaine	5	1	11	3	46	95	99	89	97	54
Heroin/Opiates ('Sugars') ^	7	7	14	5	41	93	93	86	95	59
OTC/PRE	<1*	1*	27	3	38	99	99	73	97	62
Inhalants	100*	<1	25*	<1*	50*	0	99	75*	99	50*
Methamphetamine ('Tik')	<1*	1	17*	1*	26	99	99	83	99	74
Methcathinone ('CAT')	1*	1	14	<1*	58	99	99	86	99	42

**'White pipe' or Mandrax alone

*N < 5

^Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

Table 90: Mean Age by Primary Substance of Use (KZN)

	Jul-Dec 2014	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	Years									
Alcohol	35	28	37	34	36	31	35	34	27	26
Cannabis	21	27	21	20	21	23	22	20	26	26
Cannabis/Mandrax**	27	24	24	27	26	31	28	31	30	26
Crack/Cocaine	29	26	32	31	31	28	31	30	32	25
OTC/PRE	34	32	44	29	32	36	38	32	24	28
Heroin/Opiates ('Sugars') ^	26	26	28	24	25	30	26	27	28	26
Inhalants	17*	27*	17	22	24	15*	19	24	25	27
Methcathinone ('CAT')	30	25	27	26	30	31	28	31	30	24
Methamphetamine ('Tik')	39*	27*	28	28	23	29	28	30	28	28
Overall mean age	29	27	29	26	28	28	29	28	28	26

**'White pipe' or Mandrax alone

*N < 5

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 91: Primary Substance of Use by Gender (KZN)

Cannabis (84%), heroin/opiates (83%), and remained the most used substances of use by males as indicated in Table 91. However, this period saw a slight increase in the proportion of females who were treated for the use of heroin/opiates (17%) and cannabis (16%). A significant decrease was seen in women with OTC/PRE as primary substance of abuse.

	Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	%		%		%		%		%		%	
	M	F	M	F	M	F	M	F	M	F	M	F
Alcohol	87	13	87	13	78	22	87	13	82	18	85	15
Cannabis	91	9	88	12	90	10	87	13	89	11	84	16
Cannabis/ Mandrax**	100	0	91	9*	97	3*	84	16*	88	12*	96	4*
Crack/Cocaine	88	12	85	15	92	8*	87	13	89	11	96	4*
Ecstasy	67*	33*	100*	0	75*	25*	100*	0	100*	0	50*	50*
OTC/PRE	69*	31*	64*	36*	45	55	73	27	67	33	86	14
Heroin/Opiates ('Sugars') ^	93	7*	93	7*	94	6*	93	7	87	13	83	17
Inhalants	74*	25*	100*	0	50*	50*	75*	25*	100*	0	100	0
Methcathinone ('CAT')	61	39*	91	9*	80	20*	86	14*	100*	0	91	9*
Methamphetamine ('Tik')	75*	25*	100	0	67*	33*	83	17*	100	0	80	20

**White pipe¹ or Mandrax alone

*N < 5

¹Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

Table 92: : Primary Substance of Use by Race (KZN)

The proportion of Black African patients in treatment remains higher than any other race groups, with people of Coloured descent making up 5% of patients in treatment. Across all racial groups, patients in treatment were more likely to be admitted for cannabis use, followed by heroin/opiates and alcohol. An increase in admissions for cannabis and alcohol use was noticed during this period.

	BLACK AFRICAN			COLOURED			INDIAN			WHITE		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%			%		
Alcohol	31	30	14	21	23	14	27	25	10	21	38	9
Cannabis	33	30	38	25	37	41	18	25	43	19	18	45
Cannabis/Mx**	3	3	2	0	3*	3*	2*	2*	2	3*	0	0
Crack/Cocaine	3	6	4	18	13	3*	13	10	4	12	11	3*
Heroin/Opiates ('Sugars') ^	25	27	31	26	18	26	34	31	29	34	28	32
OTC/PRE	1	2	3	3*	2*	3*	4	3	5	2*	3*	1*
Methcathinone ('CAT')	<1*	<1*	4	4*	0	6*	<1*	1*	3	1*	0	1*
Inhalants	<1*	<1*	1	0	2*		0	1*	0	0	0	1*
Methamphetamine ('Tik')	1	1	4	3*	2*	5*	<1*	1*	3	1*	1*	4*

**White pipe¹ or Mandrax alone

*N <=5

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 93: Secondary Substance of Use (2nd most used) (KZN)

The second most used drugs as reported by the treatment population were cannabis, alcohol and crack/cocaine.

	Jan-Jun 2015	Jul-Dec 2015	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%								
Alcohol	38	31	35	34	29	27	23	13	22
Cannabis	28	23	28	24	35	32	37	18	26
Cannabis/Mandrax**	8	9	9	9	6	7	6	3	9
Crack/Cocaine	9	11	8	13	9	13	17	8	17
Heroin ('Sugars')	2	2	3	4	2	3	2	1	9
Ecstasy	3	5	4	4	3	2	3	1	1
OTC/PRE	1	8	4	4	2	2	5	4	4
Methamphetamine ('Tik')	<1	1	2	1	1	1	3	1	6
Inhalants	1	<1	1	<1	<1	<1	1	<1	<1
Methcathinone ('CAT')	1	1	2	1	2	2	1	1	5
Other	6	6	2	7	6	6	4	2	1

**'White pipe' or Mandrax alone

Table 94: Primary Sources of Payment (KZN)

The table below shows that 'family/friends' was the most common source of payment (45%), followed by the 'state' (25%) and 'self' (13%) during this period.

	Jul-Dec 2016		Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%
Family/friends	442	37	612	45	514	37	530	42	417	42	582	45
Self	214	19	199	15	201	14	152	12	146	15	168	13
Medical Aid	169	15	164	12	316	23	186	15	139	14	78	6
State	217	18	249	18	262	19	246	20	163	16	318	25
Employer	62	5	64	5	64	5	51	4	54	5	17	1
Other/Unknown	49	4	68	5	43	3	91	7	74	7	128	10
Total	1177	100	1370	100	1400	100	1256	100	993	100	1291	100

DATA FOR PATIENTS YOUNGER THAN 20 YEARS

Table 95: Gender and race profile of patients <20 years (KZN)

Most patients younger than 20 years were male (81%), although a slight increase in female patients coming into treatment has been noticed during this period. Black African patients constituted 79% of these patients.

	Jan-Jun 2016	Jul-Dec 2016	Jan-Jun 2017	Jul-Dec 2017	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%	%	%	%	%	%	%
GENDER							
Male	88	86	86	85	85	86	81
Female	12	14	14	15	15	14	19
ETHNIC GROUP							
Black/African	83	83	96	81	81	84	79
Coloured	4	8	1	7	6	5	6
Indian	11	6	2	5	8	10	15
White	2	3	<1	6	5	1	1

Table 96: Primary substance of use of patients <20 years (KZN)

The most common primary substance of use for patients younger than 20 years during this period was cannabis (40%), followed by heroin/opiates (30%) and alcohol (14%).

	Jan-Jun 2017		Jul-Dec 2017		Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%
Alcohol	86	24	51	17	42	13	120	46	68	14
Cannabis	210	58	191	65	227	72	89	34	198	40
Cannabis/Mandrax**	6	2	5	2	3	1	4	2	7	1
Crack/Cocaine	12	3	3	1	8	3	8	3	21	4
OTC/PRE	1	<1	2	1	6	2	10	4	12	2
Heroin/Opiates ('Sugars') ^	21	6	15	5	13	4	27	10	149	30
Inhalants/Solvents	1	<1	1	<1	1	<1	1	<1	3	<1
Methcathinone ('CAT')	2	1	3	1	-	-	1	<1	20	4
Methamphetamine ('Tik')	1	<1	2	1	2	1	2	<1	11	2
TOTAL	361	100	294	100	317	100	263	100	491	100

**White pipe¹ or Mandrax alone

*N <=5

¹Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

2F: TREATMENT CENTRES: CENTRAL REGION

Ms Siphokazi Dada

Table 97: Proportion of treatment episodes

Data representing 316 patients were collected from five treatment centres during the period January – June 2019 compared to 216 from the previous six-month period. In the Free State, Aurora collected data from 203 patients, SANCA Sasolburg from 40 patients and SANCA Goldfields from 18 patients. In the North West, SANPARK Klerksdorp collected data from 25 patients; and in the Northern Cape, SANCA Tsantsabane collected data from 30 patients during this period. Table 97 shows the proportion of patients from each treatment centre.

	Free State			Northern Cape			North West		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%		
SANCA Aurora	89	93	78						
SANCA Goldfields	11	7	7						
SANCA Sasolburg	-	-	15						
Resilia Clinic				-	-	-			
SANCA Kimberley				-	-	-			
SANCA Upington				-	-	-			
SANCA Tsantsabane				100	-	100			
SANPARK Klerksdorp							100	100	100
Total in treatment	183	161	261	135	0	30	16	55	25

Table 98: First time admissions

In Table 98 'Yes' indicates a first-time admission and 'No' indicates a repeat admission. First time admissions make up most of the admissions across all provinces and these proportions remained high across provinces.

	Free State			Northern Cape			North West		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%		
Yes	72	68	84	99	-	83	94	93	100
No	28	32	16	1	-	17	6	7	0

Table 99: Type of treatment received

Table 99 indicates that in the Free State (66%) and in the Northern Cape (57%) most patients were treated on an inpatient basis; while in the North West (100%), all patients were treated on an outpatient basis.

	Free State			Northern Cape			North West		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%		
Inpatient	85	89	34	100	-	57	55	98	0
Outpatient	15	11	66	0	-	43	45	2	100

Table 100: Referral sources

The most common source of referral to specialist treatment centres in the Free State was 'family/friends' (32%), followed by 'employer' (22%) and 'social services' (20%). In the North West both 'work/employer' and 'family/friends' were the most common sources of referral (28%), followed by 'social services' (20%). In the Northern Cape, 'family/friends' (63%), was the most common sources of referral followed by 'self' (20%).

	Free State			Northern Cape			North West		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%		
Self	9	12	14	42	-	20*	19	13	12*
Family/friends	28	25	32	20	-	63	19	25	28
Work/employer	28	29	22	10	-	3*	56	25	28
Health professional	11	6	7	-	-	3*	-	13	4*
Religious body	1	1	1	-	-	-	-	-	-
Hospital/clinic	1	-	-	1	-	-	-	4	4*
Social services/welfare	12	19	20	5	-	-	6	15	20
Court/correctional	5	6	2	-	-	-	-	2	-
School	5	2	2*	22	-	3*	-	-	4*
Other e.g. radio	-	-	-	-	-	-	-	4	-

*N < 5

Table 101: Population profile

Male patients predominate in all provinces (85% in Free State, 97% in the Northern Cape and 100% in the North West). During this period, Black African patients were in the majority in the Free State (59%) and North West (84%), while in the Northern Cape, Coloured patients were in the majority (67%). A significant increase in proportion of Black African patients in the North West province and the Free State province was noticed during this period. There was an increase in the proportion of patients who were 'unemployed' across all provinces. In the North West provinces, the majority of patients in treatment during this period were 'school/learner at school' (36%).

	Free State			Northern Cape			North West		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%		
GENDER									
Male	86	86	85	88	-	97	96	75	100
Female	14	14	15	12	-	3*	6	25	0
ETHNIC GROUP									
Black African	57	57	59	46	-	33	100	65	84
Coloured	15	17	12	48	-	67	0	6	12*
Indian	1	-	<1*	0	-	-	0	-	-
White	27	26	28	5	-	-	0	27	4*
EMPLOYMENT STATUS									
Working full-time	51	42	9	13	-	30	75	53	20
Working part-time	2	1	4	0	-	-	0	5	4*
Unemployed (< 6 months)	13	1	8	1	-	-	0	7	8*
Unemployed (> 6 months)	18	39	48	43	-	27	0	15	32
Student/Apprentice/internship	3	2	4	0	-	-	25	7	-
School/learner at school	21	11	26	42	-	37	0	9	36
Medically unfit/Housewife/Pensioner	3	4	2*	1	-	7*	0	4	-

*N < 5

Table 102: Age distribution

The average age of persons seen by treatment centres was 31 years in the Free State, 19 years in the Northern Cape and 29 years in the North West. The proportion of patients younger than 20 years of age slightly increased to 21% in the Free State, 20% in the North West and remained stable at 64% in the Northern Cape compared to the previous period.

	Free State			Northern Cape			North West		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%		
10-14	3	2	3	24	-	17	-	2	-
15-19	20	14	18	39	-	47	<1*	7	20
20-24	9	14	15	17	-	13*	13*	24	20
25-29	15	20	16	15	-	23	<1*	18	12*
30-34	16	17	17	5	-	-	2*	16	20
35-39	13	10	13	6	-	-	13*	15	16*
40-44	8	7	8	5	-	-	<1*	11	8*
45-49	5	8	3	3	-	-	19*	2	4*

50-54	4	4	3	1	-	-	-	4	-
55+	6	4	6	<1	-	-	1*	2	-

*N<5

Table 103: HIV tested in the past 12 months

Forty - seven percent of patients in the Free State, and 48% in the North West reported that they had been tested for HIV in the past 12 months; while in the Northern Cape most patients reported that they have not tested for HIV in the past 12 months (80%).

	July – December 2018			January – June 2019		
	Free State	Northern Cape	North West	Free State	Northern Cape	North West
	%			%		
Yes	66	-	76	47	20	48
No	32	-	22	47	80	28
Decline	2	-	2	6	-	24

Table 104: Primary substance of use

In both the Free State and the North West, cannabis was the most commonly used primary substance of use among people in treatment; while in the Northern Cape alcohol was the most commonly used primary substance of use. A significant increase in proportion of patients whose primary substance of use is heroin/opiates in the Free State has been noticed.

	Free State			Northern Cape			North West		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%		
Alcohol	48	37	11	17	-	53	38	42	36
Cannabis	25	25	38	55	-	37	25*	20	52
Cannabis/Mandrax**	4	6	3	11	-	-	13*	5	4*
Crack/Cocaine	2	4	3	-	-	-	13*	5	-
Heroin/Opiates¹	2	7	31	2*	-	7*	-	7	4*
Methamphetamine ('Tik')	5	9	9	12	-	-	6*	18	-
Inhalants	1	2	1*	1*	-	3*	-	-	-
Methcathinone ('CAT')	11	8	3	1*	-	-	6*	-	-
OTC/PRE	2	1	-	-	-	-	-	2	4*

**'White pipe' or Mandrax alone

*N<5

¹Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 105: Overall proportion of substances used

The overall proportion of primary and secondary substances of use is shown in Table 105 below. Alcohol, methamphetamine, heroin/opiates and cannabis were the most common substances used. A significant increase in overall use of heroin/opiates and a decrease in alcohol use in the Free State has been noticed.

	Free State			Northern Cape			North West		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%		
Alcohol	57	49	20	22	-	53	81	49	48
Cannabis	33	39	53	64	-	37	44	31	54
Cannabis/Mandrax**	8	14	10	30	-	-	19	18	4*
Crack/Cocaine	5	7	10	1	-	-	13	7	-
Heroin/Opiates¹	2	9	40	2	-	7*	-	9	4*
Inhalants	1	2	2	3	-	3*	-	-	-
Methamphetamine ('Tik')	11	15	11	19	-	-	-	31	-
Methcathinone ('CAT')	17	12	7	1	-	-	6	15	-
OTC/PRE	4	3	1*	-	-	-	-	2	4*

**White pipe¹ or Mandrax alone

Note: The table shows the proportion reporting each drug either as primary or secondary drug.

¹Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

Table 106: Mode of usage of primary drug

Seventy-four percent of patients admitted to treatment centres in the Free State, 47% in the Northern Cape and 56% in the North West smoked their drugs, making this the most popular route of administration. However, when alcohol was excluded in the analysis, smoking remained the most common mode of use, 83% in the Free State, 93% in the Northern Cape and 88% in the North West. Only eleven patients reported injecting heroin and they were in the Free State province.

	Free State			Northern Cape			North West		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%		
Swallowed	50(4)	39(2)	13(3)	18 (1)	-	50(0)	38(0)	44 (3)	36(0)
Snorted	13(24)	10(16)	7(8)	2(3)*	-	3(7)**	6(10)**	9(16)	4(6)*
Injected	2(3)*	4(6)	5(6)	1(2)*	-	-(-)	-(-)	-(-)	4(6)*
Smoked	36 (69)	48(76)	74(83)	79(94)	-	47(93)	56 (90)	47(81)	56(88)
**Figures in brackets above exclude alcohol									
Injected Heroin	75*	42*	15	-	-	-	-	-	-

*n<5; **n=1

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 107: Mean age by primary substance

Mean age differences were noted for different substances. In the Free State, patients whose primary substance of use were heroin, crack/cocaine and cannabis/mandrax were slightly older than previous the period, while in the North West patients whose primary substance of use is alcohol, cannabis and cannabis/mandrax were substantially older compared to the previous period. In the Northern Cape, patients were substantially younger for the reported primary substances of use.

	Free State			Northern Cape			North West		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	Years								
Alcohol	39	42	29	34	-	19	47	38	32
Cannabis	20	22	29	20	-	19	29*	21	28
Cannabis/Mandrax**	26	26	30	19	-	-	32*	23*	30*
Crack/Cocaine	28*	33	36	-	-	-	31*	27*	-
Heroin/Opiates¹	30*	25	35	23*	-	23*	-	32*	17*
Inhalants	18*	23*	32*	15*	-	19*	-	-	-
Methamphetamine ('Tik')	27	26	33	24	-	-	20*	27	-
Methcathinone ('CAT')	26	26	27	28*	-	-	23*	-	-
OTC/PRE	40*	48*	-	-	-	-	-	27*	22*
Overall mean age	31	31	31	23	-	19	36	31	29

**White pipe¹ or Mandrax alone

*N<5

¹Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

Table 108: Primary substance of use by Gender for the Free State

As in the previous reporting period, across all sites and bearing in mind small samples male patients outnumbered female patients. Overall 85% of patients were male, but gender differences were noted for various primary substances of use (see Tables 108-110).

	Free State					
	Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	%		%		%	
	M	F	M	F	M	F
Alcohol	84	16	83	17	90	10*
Cannabis	93	7*	93	7*	88	12
Cannabis/Mandrax**	71	29*	100	0	78	22*
Crack/Cocaine	50*	50*	100	0	56	44*
Heroin/Opiates¹	100*	0	83	17*	81	19
Inhalants	100*	0	75*	25*	100*	0
Methamphetamine ('Tik')	90	10*	71	29*	96	4*
Methcathinone ('CAT')	90	10*	92	8*	75	25*
OTC/PRE	50*	50*	0	100*	-	-

**White pipe¹ or Mandrax alone

*N<5

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 109: Primary substance of use by Gender for the Northern Cape

	Northern Cape					
	Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	%		%		%	
	M	F	M	F	M	F
Alcohol	87	13*	-	-	100	0
Cannabis	89	11	-	-	91	1*
Cannabis/Mandrax**	93	7*	-	-	-	-
Crack/Cocaine	-	-	-	-	-	-
Heroin/Opiates [^]	100*	0	-	-	100*	0
Inhalants	100*	0	-	-	100*	0
Methamphetamine ('Tik')	75	25*	-	-	-	-
Methcathinone ('CAT')	100*	0	-	-	-	-
OTC/PRE	-	-	-	-	-	-

**'White pipe' or Mandrax alone

*N<5

[^]Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

Table 110: Primary substance of use by Gender for the North West

	North West					
	Jan-Jun 2018		Jul-Dec 2018		Jan-Jun 2019	
	%		%		%	
	M	F	M	F	M	F
Alcohol	100	0	70	30	100	0
Cannabis	75*	25*	82	8*	100	0
Cannabis/Mandrax**	100*	0	100*	0	100*	0
Crack/Cocaine	100*	0	67*	33*	-	-
Heroin/Opiates [^]	-	-	75*	25*	100*	0
Inhalants	-	-	-	-	-	-
Methamphetamine ('Tik')	100*	0	70	30*	-	-
Methcathinone ('CAT')	100*	0	-	-	-	-
OTC/PRE	-	-	100*	0	100*	0

**'White pipe' or Mandrax alone

*N<5

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 111: Primary substance of use by Race for the Free State

	BLACK AFRICAN			COLOURED			INDIAN			WHITE		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%			%		
Alcohol	53	53	63	11	15	17	1*	0	0	34	32	20
Cannabis	67	66	63	24	21	11	0	0	0	9*	12	26
Cannabis/Mx**	100	70	56	0	30*	22*	0	0	0	0	0	22*
Crack/Cocaine	75*	67*	33*	0	33*	0	0	0	0	25*	0	67
Heroin/Opiates [^]	25*	50	48	0	0	14	0	0	1*	75*	50	32
Inhalants	100*	100*	100*	0	0	0	0	0	0	0	0	0
Methamphetamine ('Tik')	50*	43	74	50*	14*	0	0	0	0	0	43	26
Methcathinone ('CAT')	55	46	50*	5*	8*	25*	0	0	0	40	46	25*
OTC/PRE	0	0	0	25*	100*	0	0	0	0	75*	0	0

**White pipe^e or Mandrax alone * N<5

[^]Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

Table 112: Primary substance of use by Race for the Northern Cape

	BLACK AFRICAN			COLOURED			INDIAN			WHITE		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%			%		
Alcohol	48	-	38	39	-	63	-	-	-	13*	-	-
Cannabis	48	-	9*	47	-	91	-	-	-	5*	-	-
Cannabis/Mx**	33*	-	-	67	-	-	-	-	-	0	-	-
Crack/Cocaine	-	-	-	-	-	-	-	-	-	-	-	-
Heroin/Opiates [^]	0	-	100*	100*	-	0	-	-	-	0	-	-
Inhalants	50*	-	100*	50*	-	0	-	-	-	0	-	-
Methamphetamine ('Tik')	50	-	-	50	-	-	-	-	-	0	-	-
OTC/PRE	-	-	-	-	-	-	-	-	-	-	-	-

**White pipe^e or Mandrax alone *N<5

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 113: Primary substance of use by Race for the North West

	BLACK AFRICAN			COLOURED			INDIAN			WHITE		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%			%		
Alcohol	100*	65	67	0	4*	22*	0	0	-	0	26	11*
Cannabis	100*	91	100	0	0	0	0	0	-	0	9	0
Cannabis/Mx**	100*	100*	100*	0	0	0	0	0	-	0	0	0
Crack/Cocaine	100*	67*	-	0	0	-	0	0	-	0	37*	-
Heroin/Opiates[^]	-	0	0	-	0	100*	-	0	-	-	100*	0
Inhalants	-	-	-	-	-	-	-	-	-	-	-	-
Methcathinone ('CAT')	100*	-	-	0	-	-	0	-	-	0	-	-
Methamphetamine ('Tik')	100*	50*	-	0	20*	-	0	0	-	0	30*	-
OTC/PRE	-	100*	100*	-	0	0	-	0	-	-	0	0

**'White pipe' or Mandrax alone

*N<5

[^]Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

Table 114: Polysubstance use

In the Free State, just over half of patients (56%), in the Northern Cape (100%) and in the North West (88%), of patients reported only one substance of use.

	Free State			Northern Cape			North West		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%		
Primary substance only	63	52	53	56	-	100	31	62	88
Primary +2nd substance	37	48	47	44	-	0	69	38	12
Total no. of patients	100	100	100	100	-	100	100	100	100

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 115: Primary Source of payment

During this period, the most common source of payment for treatment in the Free State was 'state' (55%), followed by the 'unknown/sponsor' (18%); while in the Northern Cape, 'medical aid' (47%) was a common source of payment, followed by 'family/friends' (43%). In the North West, payment source was by the 'unknown/sponsor' (36%), followed by the 'state' (28%).

	Free State			Northern Cape			North West		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%		
Self	2	3	3	2	-	7*	-	4	16*
Medical Aid	49	36	8	4	-	47	38	36	-
State	30	30	55	76	-	43	-	12	28
Family/friends	8	12	15	4	-	3*	19	24	20
Employer	11	15	2	4	-	-	43	16	-
Unknown	-	-	18	10	-	-	-	-	36
Other/combinations	1	4	-	-	-	-	-	7	-

*N < 5

Table 116: Frequency of use by primary substance for the Free State

Tables 116-118 show the frequency of use of the primary substance for each province. Across all provinces, most substances were used on a daily basis.

	Frequency of use in the past month											
	Daily			2-6 days per week			Once per week or less often			Not used in the past month		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%			%		
Alcohol	66	60	50	32	37	33	1*	3*	10*	1*	0	7*
Cannabis	59	82	63	37	17	20	4*	0	13	0	0	3*
Cannabis/Mx**	100	90	67	0	10*	11*	0	0	11*	0	0	11*
Crack/Cocaine	75*	83	44*	0	0	22*	25*	0	11*	0	17*	22*
Heroin/Opiates¹	75*	100	99	0	0	1*	25*	0	0	0	0	0
Inhalants	0	75*	0	0	25*	50*	100*	0	50*	0	0	0
Methamphetamine ('Tik')	90	57	57	0	28*	30	0	14*	9*	10*	0	4*
Methcathinone ('CAT')	30	46	75	60	46	13*	5*	0	13*	5*	8*	0
OTC/PRE	100*	100*	-	0	0	-	0	0	-	0	0	-

**White pipe' or Mandrax alone

*N<5

¹Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 117: Frequency of use by primary drug for the Northern Cape

	Frequency of use in the past month											
	Daily			2-6 days per week			Once per week or less often			Not used in the past month		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%			%		
Alcohol	87	-	75	13*	-	19	-	-	0	-	-	6*
Cannabis	84	-	36	12	-	54	-	-	9*	-	-	0
Cannabis/Mx**	100	-	-	0	-	-	-	-	-	-	-	-
Crack/Cocaine	-	-	-	-	-	-	-	-	-	-	-	-
Heroin/Opiates[^]	33*	-	100*	67*	-	0	-	-	-	-	-	-
Inhalants	100*	-	0	0	-	100*	-	-	0	-	-	0
Methamphetamine ('Tik')	87	-	-	13*	-	-	-	-	-	-	-	-
Methcathinone ('CAT')	100*	-	-	0	-	-	-	-	-	-	-	-
OTC/PRE	-	-	-	-	-	-	-	-	-	-	-	-

***White pipe¹ or Mandrax alone

*N<5

Table 118: Frequency of use by primary drug for the North West

	Frequency of use in the past month											
	Daily			2-6 days per week			Once per week or less often			Not used in the past month		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%			%		
Alcohol	66	48	33*	17*	39	0	17*	13*	67*	-	-	0
Cannabis	75*	82	46	25*	18*	15*	0	0	23*	-	-	15*
Cannabis/Mx**	100*	100*	100*	0	0	0	0	0	0	-	-	0
Crack/Cocaine	100*	67*	-	0	33*	-	0	0	-	-	-	-
Heroin/Opiates[^]	-	100*	100*	-	0	0	-	0	0	-	-	0
Inhalants	-	-	-	-	-	-	-	-	-	-	-	-
Methamphetamine ('Tik')	0	60	-	0	40*	-	100*	0	-	-	-	-
Methcathinone ('CAT')	0	-	-	100*	-	-	0	-	-	-	-	-
OTC/PRE	-	100*	0	-	0	100*	-	0	0	-	-	0

***White pipe¹ or Mandrax alone

*N<5

¹Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

DATA FOR PATIENTS YOUNGER THAN 20 YEARS

Table 119: Gender and race profile of patients <20 years

Across all provinces, most patients under 20 years were male.

	Free State			Northern Cape			North West		
	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019	Jan-Jun 2018	Jul-Dec 2018	Jan-Jun 2019
	%			%			%		
GENDER									
Male	91	92	85	85	-	100	100*	100*	100*
Female	1	8*	15	15	-	0	-	-	0
ETHNIC GROUP									
Black African	79	69	85	42	-	26	100*	100*	80*
Coloured	19	27	4*	57	-	74	-	-	20*
Indian	-	-	-	-	-	-	-	-	-
White	2*	4*	11	1*	-	-	-	-	-

*N<5

Table 120: Primary substance of use of patients <20 years

In Free State and North West young people were mostly treated for cannabis, whereas the Northern Cape, most young people were treated for the use of alcohol.

	Free State				Northern Cape				North West			
	Jul-Dec 2018		Jan-Jun 2019		Jul-Dec 2018		Jan-Jun 2019		Jul-Dec 2018		Jan-Jun 2019	
	n	%	n	%	n	%	n	%	n	%	n	%
Alcohol	-	-	10	19	-	-	10	53	-	-	-	-
Cannabis	20	77	24	45	-	-	7	35	4	80	4	80*
Cannabis/Mandrax**	1	4	3	6*	-	-	-	-	1	20	-	-
Crack/Cocaine	-	-	1	2*	-	-	-	-	-	-	-	-
Heroin/Opiates¹	1	4	10	19	-	-	1	5*	-	-	1	20*
Methamphetamine ('Tik')	1	4	3	6*	-	-	-	-	-	-	-	-
Inhalants	-	-	1	2*	-	-	1	5*	-	-	-	-
OTC/PRE	-	-	-	-	-	-	-	-	-	-	-	-
Methcathinone ('CAT')	2	8	1	2*	-	-	-	-	-	-	-	-
Total	26	100	53	100	0	0	19	100	5	100	5	100

**White pipe' or Mandrax alone

*N<5

¹Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

Table 121: Primary substance of use by gender of patients <20 years

Tables 121 show that across all provinces, males make up majority of patients for most primary substances of use.

	Free State				Northern Cape				North West			
	Jul-Dec 2018		Jan-Jun 2019		Jul-Dec 2018		Jan-Jun 2019		Jul-Dec 2018		Jan-Jun 2019	
	%		%		%				%			
	M	F	M	F	M	F	M	F	-	-	M	F
Alcohol	0	100*	100	0	-	-	100	0	100*	0	-	-
Cannabis	95	5*	79	21	-	-	100	0	100*	0	100*	0
Cannabis/Mandrax**	83	17*	100*	0	-	-	-	-	-	-	-	-
Crack/Cocaine	-	-	100*	0	-	-	-	-	-	-	-	-
Heroin/Opiates[^]	-	-	70	30*	-	-	100*	0	-	-	100*	0
Methamphetamine ('Tik')	100*	0	100*	0	-	-	-	-	-	-	-	-
Inhalants	100*	0	100*	0	-	-	100*	0	-	-	-	-
OTC/PRE	-	-	-	-	-	-	-	-	-	-	-	-

**White pipe[^] or Mandrax alone

*N>5

[^]Nyaope and whoonga¹ have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance

¹ Nyaope and whoonga are street names for heroin, often mixed with other regulated and unregulated substances. In South Africa, it is usually sprinkled on cannabis and/or tobacco and the mixture is rolled into a cigarette or 'joint' and smoked.

SECTION 3: DATA ON COMMUNITY BASED HARM REDUCTION SERVICES

TB HIV Care, Anova Health Institute, OUT Wellbeing, Foundation for Professional Development (FPD) & the University of Pretoria

3A: COMMUNITY-BASED HARM REDUCTION SERVICES (JANUARY – JUNE 2019)

A range of organisations are implementing community based harm reduction services for people who use drugs (PWUD), including people who inject drugs (PWID) as per the World Health Organization's guidelines¹⁷. Services include: HIV, STI and TB prevention, testing and linkage to care; harm reduction behaviour change interventions; needle and syringe services; opioid substitution therapy (OST); monitoring of human rights violations and referral for other available substance use disorder treatment services. Routine hepatitis B (HBV) and hepatitis C (HCV) diagnostic and treatment services are limited due to resource constraints.

TB HIV Care's Step Up Project

This project provides harm reduction services to people who inject drugs (PWID) in the Cape Metro (Western Cape), Nelson Mandela Bay (Eastern Cape) and eThekweni (KwaZulu-Natal) Districts. Comprehensive services are provided mainly through community-based outreach modalities and also from Drop-In Centres in Cape Town and eThekweni. The needle and syringe services in eThekweni remained suspended in that city, while efforts were undertaken to address concerns raised by the city. Opioid substitution therapy (OST) services in eThekweni are provided in partnership with the Urban Futures Centre at the Durban University of Technology as part of an 18-month demonstration project (ending in March 2019). OST eligibility criteria for eThekweni included having stable accommodation. OST services in Cape Town was provided as part of a Global Fund programme. Funding for continuation of OST has been secured through another Global Fund round through NACOSA. Due to funder restrictions, OST services in Cape Town were restricted to people who inject drugs, and stable accommodation was not an entry requirement.

This programme continued to receive funding from the Global Fund, transitioning to NACOSA, the new Principal Recipient, in April 2019. The process to consolidate data reporting processes is ongoing.

Between January and March 2019, 1 566 unique PWID accessed the services (623 in the Cape Metro, 440 in eThekweni, and 503 in Nelson Mandela Bay). Between April and June 2019, 1 592 unique PWID accessed services across these sites (640 in the Cape Metro, 564 in eThekweni, and 388 in Nelson Mandela Bay).

Across all sites, almost all clients (98%) were over the age of 20 years, and the majority were men (ranging from 76% in Nelson Mandela Bay to 87% in eThekweni). Racial characteristics of service users varied by site; being predominantly Coloured in the Cape Metro (77%), White in Nelson Mandela Bay (80%), and Black African in eThekweni (83%). PWID service user sociodemographic characteristics by province are provided in Tables 122a and 122b.

Overall, 8 392 needle and syringe service contacts with PWID were made (0 in eThekweni, 5 722 in the Cape Metro and 2 670 in Nelson Mandela Bay) and 238 677 needles and syringes were distributed (150 659 in the Cape Metro and 88 018 in Nelson Mandela Bay), with return rates of 68% and 74% respectively.

Table 122a: Characteristics of people who use drugs who accessed needle and syringe services – Demographics (January – March 2019)

Site (N)	Male		Female		Black African		Coloured		Indian		White	
	n	%	n	%	n	%	n	%	n	%	n	%
Cape Metro (23)	525	84	92	15	29	5	0	0	478	77	115	18
eThekwini (440)	384	87	56	13	364	83	18	24	27	6	31	7
Nelson Mandela Bay (503)	380	76	121	24	73	15	20	4	9	2	400	80

*Some demographic data was not provided.

Table 122b: Characteristics of people who use drugs who accessed needle and syringe services – Demographics (April – June 2019)

Site (N)	Male		Female		Black African		Coloured		Indian		White	
	n	%	n	%	n	%	n	%	n	%	n	%
Cape Metro (640)	541	85	91	14	-	-	-	-	-	-	-	-
eThekwini (564)	491	87	73	13	-	-	-	-	-	-	-	-
Nelson Mandela Bay (388)	298	77	87	22	-	-	-	-	-	-	-	-

*Some demographic data was not provided. - : No data available

Overall, 2% of the patients were younger than 20 years. In the Cape Metro (33%), the majority of patients were between the ages of 30-34 years; while in eThekwini (45%) and in Nelson Mandela Bay (32%), the majority of patients were between the ages of 25-29 years.

Table 123a: Age distribution of people who use drugs who accessed needle and syringe services (January –March 2019)

Site	Cape Metro		eThekwini		Nelson Mandela Bay	
Age distribution (yrs)	n	%	n	%	n	%
<15	0	0	0	0	0	0
15-19	9	1	12	3	10	2
20-24	26	4	90	20	59	12
25-29	146	23	195	44	159	32
30-34	201	32	95	22	108	21
35-39	146	23	27	6	74	15
40-44	35	6	12	3	50	10
45-49	42	7	3	1	23	5
50-54	12	2	0	0	11	2
55-59	5	1	2	0	3	1
60-64	1	0	0	0	6	1
65+	0	0	0	0	0	0
Missing	0	0	4	1	0	0
Total	623	100	440	100	503	100

Table 123b: Age distribution of people who use drugs who accessed needle and syringe services (April – June 2019)

Site	Cape Metro		eThekwini		Nelson Mandela Bay	
	n	%	n	%	n	%
Age distribution (yrs)						
<15	0	0	0	0	0	0
15-19	5	1	7	1	7	2
20-24	34	5	92	16	50	13
25-29	137	21	256	45	122	31
30-34	213	33	133	24	72	19
35-39	162	25	58	10	57	15
40-44	37	6	14	2	37	10
45-49	32	5	3	1	23	6
50-54	13	2	1	0	10	3
55-59	7	1	0	0	5	1
60-64	0	0	0	0	5	1
65+	0	0	0	0	0	0
Missing	0	0	0	0	0	0
Total	640	100	564	100	388	100

Table 124a: Proportion of people who use drugs accessing needle and syringe services by age cohort (January – March 2019) - by site*

Site	Cape Metro		eThekwini		Nelson Mandela Bay	
	n	%	n	%	n	%
Age distribution						
PWID <20 yrs	11	2	12	3	10	2
PWID ≥20 yrs	612	98	424	97	493	98
Total	623	100	440	100	503	100

Table 124b: Proportion of people who use drugs accessing needle and syringe services by age cohort (April - June 2019) - by site*

Site	Cape Metro		eThekwini		Nelson Mandela Bay	
	n	%	n	%	n	%
Age distribution						
PWID <20 yrs	8	1	7	1	7	2
PWID ≥20 yrs	632	99	557	99	381	9%
Total	640	100	564	100	388	100

Table 125: Comparison of proportion of people who use drugs accessing needle and syringe services with census data - by site* (January – March 2019)**

Site		Black African	Indian	Coloured	White
Western Cape	Population ¹	33%	1%	49%	16%
	Accessing service	5%	0%	77%	18%
KwaZulu-Natal	Population ¹	87%	7%	1%	4%
	Accessing service	83%	24%	6%	7%
Eastern Cape	Population ¹	86%	<1%	8%	5%
	Accessing service	15%	2%	4%	80%

¹ Statistics South Africa, 2011 Census

* Note that proportions calculated based on available data

** Data on race not captured for period April – June 2019.

HIV and TB services

Among PWID who accessed additional health services: 440 tested for HIV (209 in eThekweni, 106 in the Cape Metro, 125 in Nelson Mandela Bay), 11% (47/440) of whom tested positive (26 in eThekweni, 15 in the Cape Metro, 6 in Nelson Mandela Bay). Eight clients were started on antiretroviral therapy (ART) (3 in eThekweni, 4 in the Cape Metro, 1 in Nelson Mandela Bay). Data on HIV viral suppression was unavailable. Additionally, 522 PWUD were screened for tuberculosis (TB) (209 in eThekweni, 188 in the Cape Metro, 125 in Nelson Mandela Bay) with 1 being symptomatic (1 in Nelson Mandela Bay).

Table 126a: Characteristics of people who use drugs tested for HIV and HIV treatment cascade* (January – March 2019)

Site	Cape Metro 58)		eThekweni (119)		Nelson Mandela Bay (61)	
	n	%	n	%	n	%
GENDER						
Men	48	83	106	89	48	79
Transgender men	0	0	0	0	0	0
Women	10	17	13	11	13	21
Transgender women	0	0	0	0	0	0
RACE						
Black African	0	0	97	82	15	25
Coloured	50	86	3	3	3	5
Indian	0	0	5	4	0	0
White	8	14	14	12	43	70
HIV TREATMENT CASCADE						
HIV positive	2	1	12	10	1	2
On ART	0	0	3	25	1	100
Virally suppressed	-	-	-	-	-	-

*Some demographic data was not provided.

:- Data not available

Table 126b: Characteristics of people who use drugs tested for HIV and HIV treatment cascade* (April - June 2019)

Site	Cape Metro (48)		eThekwini (90)		Nelson Mandela Bay (64)	
	n	%	n	%	n	%
GENDER						
Men	41	85	79	88	44	69
Transgender men	0	0	0	0	0	0
Women	6	13	11	12	20	31
Transgender women	1	2	0	0	0	0
RACE						
Black African	-	-	-	-	-	-
Coloured	-	-	-	-	-	-
Indian	-	-	-	-	-	-
White	-	-	-	-	-	-
HIV TREATMENT CASCADE						
HIV positive	13	27	14	16	5	8
On ART	4	31	0	0	0	0
Virally suppressed	-	-	-	-	-	-

*Some demographic data was not provided.

-: Data not available

Opioid substitution therapy (OST) services

In Durban, the 18-month opioid substitution therapy (OST) demonstration project started in April 2017 and 23 people were on OST on 1 January 2019. No additional people were initiated nor was anyone restarted. By the end of June 2019, all people were down titrated and offered referral to a private provider to explore options to continue self-funded OST.

Table 127: Comparison of proportion of people who use drugs initiated on opioid substitution therapy (January – June 2019)

Site	Male	Female	Black African	Indian	Coloured	White
	%		%			
Cape Metro (n=0)	0	0	0	0	0	0
eThekwini (n=0)	0	0	0	0	0	0
Nelson Mandela Bay ¹ (n=0)	0	0	0	0	0	0

In Cape Town, 31 PWID were on OST at the beginning of January 2019. During the reporting period, no new people were initiated and 2 people who were previously lost to follow-up restarted on OST, 1 person was lost to follow-up, 3 person exited and 1 person died (due to suicide in police custody). By the end of June 2019, 28 people were on methadone. The retention rate for this reporting period was 85% (28/33) (Table 6). Hepatitis testing was offered to people on OST in Cape Town during this period, with 19 people tested and 11% (2/19) HBVsAg +ve, 53% (10/19) anti-HCV +ve, 5% (1/19) HBV-HCV co-infected and 16% (3/19) HCV-HIV co-infected. During this period 9 OST clients with confirmed HCV infection were started on direct acting antiviral therapy.

* Reflects characteristics of people started on OST during the reporting period.

¹ OST services have not yet started at sites in Nelson Mandela Bay

Table 128: Clients on opioid substitution therapy, lost to follow-up and exited programme - by site (January – June 2019)

		No. on OST at start of period	No. initiated on OST for first time during period	No. restarted during period that were lost to follow-up at start of period	No. LTFU during period	No. exited during period	No. died during period	No. on OST at end of period	Retention rate for period
KZN	People who smoke heroin	23	0	0	0	23*	0	0**	N/A
	People who inject heroin	0	0	0	0	0	0	0	N/A
	Total	23	0	0	0	23*	0	0**	N/A
WC	People who inject heroin (total)	31	0	2	1	3	1	28	85% (28/33)
* All clients were down-titrated as per the time limited nature of the project.									
** Clients were offered referral to another site to continue OST through self-funding									

During this reporting period, 106 human rights violations were reported (103 in eThekweni, 0 in the Cape Metro, 3 in Nelson Mandela Bay), 25 of these related to PWID clients being assaulted and 23 (all from eThekweni) due to confiscation/ destruction of injecting equipment.

Table 129: Comparison of reported human rights violations (January – June 2019)

Reported violation	Cape Metro	eThekweni	Nelson Mandela Bay
	n		
Confiscation / destruction of injecting equipment	0	19	3
Confiscation / destruction of injecting equipment and assaulted	0	23	0
Confiscation / destruction of injecting equipment and arrested	0	0	0
Confiscation / destruction of injecting equipment and personal photos taken without consent	0	0	0
Confiscation / destruction of injecting equipment and medication taken	0	9	0
Assaulted	0	25	0
Falsely arrested	0	7	0
Personal belongings burnt by police	0	0	0
Other	0	20	0
Total number of violations reported for period	0	103	3
^Reports relating to ban on needle and syringe service			

Anova Health Institute's Jab Smart Project

This project provides harm reduction and HIV prevention services for PWID in sub-district F of the City of Johannesburg. Between January and June 2019, 1 518 unique PWID accessed services

The median age of PWID who accessed services was not available for this period. 96% were over the age of 20, most were men (92%). Most clients were black African (94%). PWID service user socio demographic characteristics by province are provided in Tables below).

Table 130: Characteristics of people who use drugs accessing needle and syringe services (January – June 2019)

Site	Male	Female	Black African	Indian	Coloured	White	Median age (yrs)
Johannesburg (n = 1 518)	%		%				
	92%	8%	94%	2%	2%	2%	-

During this period, 4 649 needle and syringe service contacts were made; and 156 420 needles and syringes were distributed, the return rate was 26%.

Among PWID who accessed additional health services: 61 tested for HIV, 41% (25/61) of whom tested positive and 3 of those were started on antiretroviral therapy (ART). Data on HIV viral suppression was unavailable. Additionally, 59 PWID were screened for tuberculosis (TB) with 22 being symptomatic. No routine viral hepatitis B or C testing was done during this period.

Table 131: Characteristics of people who use drugs initiated on opioid substitution therapy (January – June 2019)

Site	Male	Female	Black African	Indian	Coloured	White
Johannesburg (n=9)	%		%			
	78	22	100	0	0	0

In Johannesburg, the OST project started in January 2018. Between January to June 2019, 9 PWID were initiated, 3 people were restarted, 13 people were lost to follow-up (missed more than 30 consecutive doses), 4 people exited and no clients died. At the end of June, 22 remained on OST and this yields a retention rate of 56% (22/27) for this reporting period (Table 133). Human rights violations are not routinely collected in this project.

Table 132: Clients on opioid substitution therapy, lost to follow-up and exited programme – Johannesburg (January – June 2019)

	No. on OST at start of period	No. initiated on OST for first time during period	No. restarted during period that were lost to follow-up at start of period	No. LTFU during period	No. exited during period	No. died during period	No. on OST at end of period	Retention rate for period
People who inject heroin (total)	27	9	3	13	4	0	22	56% (22/39)

OUT Wellbeing and FPD's HARMless project

The HARMless Project works in Region 3 of the City of Tshwane. Comprehensive services are provided mainly through community-based outreach modalities and also from a Drop-In Centre. Between January and June 2019, 1 707 unique PWID accessed services. During this period, 264 116 needles and syringes were distributed, with a return rate of 88%. Note that implementation of the HARMless project in the Mbombela sub-district in Ehlanzeni district in Mpumalanga was delayed due to the memorandums of understanding finalization delays. Data on age and racial characteristics were not available for this time period.

Table 133: Proportion of people accessing needle and syringe service and behaviour change intervention program – Tshwane (January – June 2019)

Site	Male	Female	Black African	Indian	Coloured	White	Median age
	%		%				years
Tshwane/HARMless (n = 1 707)	96%	4%	-	-	-	-	-

Among PWID who accessed additional health services: 993 tested for HIV, 292 (29%) of whom tested positive and 169 (58%) were started on antiretroviral therapy (ART). Data on HIV viral suppression was unavailable. Additionally, 992 PWID were screened for tuberculosis (TB) with 15 being symptomatic, no PWID were diagnosed with TB. Data on human rights violations and proportion of people accessing needle and syringe service and behaviour change intervention program for this period was not available for reporting. No routine viral hepatitis B or C testing was done during this period.

Table 134: Characteristics of people who use drugs tested for HIV and HIV treatment cascade* (January – June 2019)

Site	Tshwane		Ehlanzeni	
	n	%	n	%
GENDER				
Men	917	92	-	-
Transgender men	0	0	-	-
Women	76	8	-	-
Transgender women	0	0	-	-
RACE*				
Black African	-	-	-	-
Coloured	-	-	-	-
Indian	-	-	-	-
White	-	-	-	-
HIV TREATMENT CASCADE				
HIV positive	292	29	-	-
On ART	169	58	-	-
Virally suppressed	-	-	-	-

*Some demographic data was not provided.

-: Data not available

FPD funded 242 clients on OST, administered by COSUP, during the period under review. These clients were reported by COSUP, thus not reported here to avoid double-counting.

Table 135: Characteristics of people who use drugs initiated on opioid substitution therapy (January – June 2019)

Site	Male	Female	Black African	Indian	Coloured	White
	%		%			
Tshwane (n=0)	-	-	-	-	-	-

Table 136: Clients on opioid substitution therapy, lost to follow-up and exited programme – Tshwane (January – June 2019)

	No. on OST at start of period	No. initiated on OST for first time during period	No. restarted during period that were lost to follow-up at start of period	No. LTFU during period	No. exited during period	No. died during period	No. on OST at end of period	Retention rate for period
People who inject heroin (total)	-	-	-	-	-	-	-	-

The Department of Family Medicine at the University of Pretoria's Community Orientated Substance Use Programme (COSUP)

The COSUP project offered needle and syringe services and OST across several regions of the City of Tshwane. A total of 55 659 needles were distributed with a 86% return rate. A total of 7 695 needle and syringe service contacts were made.

Table 137: Characteristics of people who use drugs started on opioid substitution therapy – Demographics (January – June 2019)

The median age of people who accessed OST services was 30 years, 87% were over the age of 20. Most (92%) were men and most (78%) were Black African. PWUD/ID service user socio demographic characteristics are provided in a table below.

Site	Male	Female	Black African	Indian	Coloured	White	Median age
	%		%				yrs
Tshwane (COSUP) (n=357)	92	8	78	4	10	8	30

Table 138: Clients on opioid substitution therapy, lost to follow-up and exited programme (January – June 2019)

A total of 770 people were on OST at the beginning of January 2019. During the period 357 people who use heroin (injecting and non-injecting) were initiated, 34 were reinitiated, 27 people were lost to follow-up, 14 people exited, 4 people died, and 1116 were on OST at the end of June. Human rights violations are not routinely collected in this project.

Tshwane / COSUP	Number on OST at start of period	Number initiated on OST for first time during period	Number restarted during period that were lost to follow-up at start of period	Number LTFU during period	Number exited during period	Number died during period	Number on OST at end of period	Retention rate for period
People who smoke heroin*	-	159	19	9	7	2	162	-
People who inject heroin	-	198	15	18	7	2	188	-
Total	770	357	34	27	14	4	1116	99% (1116/1161)**
* Data not available for this period								
** Retention influenced by high number of people started on OST during this period.								

City of Tshwane household assessments by Community Health Care workers

During this period 10 489 households were visited across 7 sub-districts (regions) of the City of Tshwane by community health care workers. As part of standard household health and social screening assessments, 705 households (7%) were identified to have at least one person residing in the household with a substance use problem (defined as “experiencing health and social problems due to substance use”). The most commonly reported substances that were used were: alcohol (53%), cannabis (17%) and heroin (4%). Thirty-three individuals were identified who reported injecting drugs for non-therapeutic reasons. Fifty-six households (8%) had at least one household member who requested assistance for their substance use.

IMPLICATIONS FOR POLICY AND FUTURE RESEARCH

Selected implications for policy/practice

During the Phase 46 regional report back meetings of SACENDU a number of recommendations were made with regard to specific interventions needed to address substance use and substance use policy in general:

- Consider setting up a national strategy to address use of opiates (use of Nyaope/heroin and misuse of codeine) and a provincial strategy to address use of “Lean” (codeine syrup & sweetened drinks) among young persons in EC & KZN.
- Consider increasing testing for HIV and viral hepatitis among patients in treatment, especially young adults/youth and PWID.
- Implement steps to address consequences of legalization of private use of cannabis (including preventive measures aimed at young people and options for persons experiencing problems).
- Counter push back on harm reduction approaches in KZN, PE, WC (e.g. needle & syringe programmes).
- Consideration to be given to making Naloxone available at a community level as a harm reduction approach to reduce the risk of opioid-related overdose.
- Increase efforts to bring women into treatment & improve access to harm reduction services.
- Address structural barriers to accessing HCV testing & make services available where PWID access clean needles.
- Address stigma aimed at PWID in hospitals.
- Scale up OST services for heroin users in the WC.
- The lack of OST in Durban now that the demonstration project has ended.
- Effectiveness of community based treatment for HCV using direct acting antivirals

Selected issues to monitor

Phase 46 of the SACENDU Project highlighted several conditions/factors that need to be carefully monitored over time:

- Increase in use of methamphetamine & cocaine in the EC.
- Increase in school referrals in the EC and KZN.
- Increase in heroin and cannabis treatment demand in the EC, including Nyaope in <20s.
- Decrease in mean age of heroin users in the EC.
- Decrease in court referrals in GT and the NR.
- Mandrax use among females in the NR.
- Decrease in mean age of patients coming to treatment for OTC/PRE medicines use in the NR and monitor the drop in number of <20s coming for treatment in that region.
- Non-medical use of Fentanyl and Tramadol/Tramaset (via treatment data and wastewater analysis).
- Increase in methamphetamine and heroin use (especially among <20s for heroin) in the WC.
- Increase in injecting of heroin in the EC and KZN.

Selected topics for further research/investigation

Phase 46 of the SACENDU Project highlighted several topics for further research/investigation:

- Extent of unmet treatment need in the EC in general & especially following closure of SANCA in PE.
- Effect of legalization of private use of cannabis among adolescents & young adults.
- What is the reason for the drop off in treatment demand related to cannabis use in GT?
- How big is the use of Lean and Xanax in schools in KZN?
- Are we adequately dealing with mental health problems at substance abuse treatment centres?
- What is the extent of youth dropping out of school because of substance use?
- Identify best ways to screen for drug use in drivers routinely, especially cannabis use.

SACENDU

South African Community Epidemiology Network on Drug Use

THREE REPORTS HAVE BEEN PRODUCED:

- a. SACENDU Update
- b. SACENDU Research Brief
- c. Monitoring Alcohol, Tobacco and Other Drug Use Treatment Admissions in South Africa (this report)

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