SACENDU
South African Community Epidemiology Network on Drug Use

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RESEARCH BRIEF

Monitoring Alcohol, Tobacco and Other Drug Use Trends in South Africa (July 1996 – June 2022)

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BACKGROUND & SUMMARY

The South African Community Epidemiology Network on Drug Use (SACENDU) continued holding virtual report back meetings for Phase 52 and PowerPoint presentations were made available to all stakeholders of SACENDU. We envision a move to a hybrid approach, with both virtual and face-to-face reporting meetings in the foreseeable future.

Established in 1996, SACENDU is a network of researchers, practitioners and policy makers from various sentinel areas in South Africa. Up until June 2006, these sites comprised of Cape Town, Durban, Gqeberha (formally known as Port Elizabeth), East London (EL), Gauteng Province and Mpumalanga Province (MP). As some sites were beginning to also include data from other towns/cities (e.g., Durban included data from Pietermaritzburg), it was decided to begin reporting data by province. From the second half of 2006, data were also collected from treatment centres in the Free State, Northern Cape and North West. For the purposes of this report, these three provinces have been combined into a regional group termed the "Central Region" (CR). Data were also collected from three centres in the Limpopo province, as well as seven centres from the Mpumalanga province. Since the dataset continues to be small and we are in the process of growing provincial coverage from these two provinces, it was decided to combine the data for analysis purposes and we now refer to these two provinces as the "Northern Region" (NR). Thus, this report now refers to the following six sites: Western Cape (WC), KwaZulu-Natal (KZN), Eastern Cape (EC), Gauteng (GT), the Northern Region (NR) and the Central Region (CR). The goal to include data from all nine of South Africa's provinces in the SACENDU project has therefore been achieved, though there are still gaps in coverage at some sites. Membership to the SACENDU network is voluntary and recruitment of new centres and strengthening partnerships remains a key objective.

Since 2018, SACENDU has collected data from a range of organisations implementing community-based harm reduction services for people who use drugs (PWUD), including people who inject drugs (PWID). Services provided by these organisations and reported on in this Brief include data on HIV, STIs, viral hepatitis 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. The data represented are from the following cities: Cape Town, Durban, Ekurhuleni, Ehlanzeni, Johannesburg, Sedibeng, Pietermaritzburg, Gqeberha, and Pretoria.

This report therefore comprises of data from **SPECIALIST SUBSTANCE USE DISORDER (SUD) TREATMENT CENTRES** as well as data from **COMMUNITY-BASED HARM REDUCTION AND HEALTH SERVICES CENTRES,** and the **SERVICE QUALITY MEASURES (SQM)** findings

Members of SACENDU meet every six months to provide community-level public health surveillance of alcohol and other drug (AOD) use trends and associated consequences through the presentation and discussion of quantitative and qualitative research data. Through this initiative, SACENDU provides descriptive information on the nature and patterns of AOD treatment demand and harm reduction service uptake data that allows for the monitoring of emerging trends, risk factors associated with AOD use, characteristics of vulnerable populations, and consequences of AOD use in South Africa.

The SACENDU initiative has several specific objectives:

a) To identify changes in the nature and extent of AOD use and emerging problems.
b) To identify changes in overall consequences related to alcohol and other drug use.
c) To inform policy, planning and advocacy efforts at local and other levels.
d) To support networks of local role players in the substance use area.
e) To stimulate research in new or under-researched areas that is likely to provide useful data to inform policy and/or planning decisions.
f) To facilitate South Africa's full participation in international fora focusing on the epidemiological surveillance of drug use.

Financial support for Phase 52 was provided by the Mental Health and Substance Use Directorate of the National Department of Health.

The first half of 2022 (i.e., 2022a) saw a decrease in the number of persons admitted for AOD treatment from **12 196** across **78 treatment centres/programmes in 2021b** to **11 923** across **88 treatment centres/ programmes in 2022a**.

The current period saw notable increases in the number of persons seeking treatment for **Alcohol** in KZN (from 12% in 2021b to 31% in 2022a) and the CR (from 28% in 2021b to 35% in 2022a). Between 11% (GT) and 35% (CR) of persons accessing AOD treatment services reported





Alcohol as their primary substance of use. Between 26% (EC) and 40% (NR) of persons attending specialist treatment centres had **Cannabis** as their primary substance of use. Decreases were seen in Cannabis admissions rates for KZN (from 33% to 28%) and the CR (38% to 32%) while the NR saw a 9% increase in Cannabis admissions for this period. Nationally, Cannabis contributed 70% of all admissions among individuals younger than 20 years, increasing from 52% in the preceding period. The WC remained the province where **Cannabis/Mandrax** (Methaqualone) combination (also known as "white pipe") was most often used as a secondary substance (22%), although this proportion decreased from 39% in the 2021b period. The EC (18%) was the province where Cannabis/Mandrax was the second most common secondary substance of use.

Treatment admissions for **Crack/Cocaine** have remained consistent over the past few reporting periods at generally low levels with the national rate at 3% nationally and regional rates varying between 1% [CR] and 10% [KZN]). Similarly, Crack/Cocaine was more often reported as a secondary substance of use in KZN (24%). Between 2% (CR) and 22% (KZN) of persons in treatment had Crack/Cocaine as a primary and secondary drug of use. Few persons younger than 20 years (<1% nationally) were admitted for Crack/Cocaine-related problems.

Nationally, **Heroin/Opiates** comprised 17% of all admissions during the January to June 2022 period, remaining consistent with the previous period. A decline in heroin misuse was noted for KZN (from 39% in 2021b to 23% in 2022a) while an increase was seen for the WC (from 9% in 2021b to 12% in 2022a). Heroin was mostly smoked (74%), in the EC, the majority of persons who had heroin as their primary substance of use reported injecting the drug (62%). Rates for Heroin/Opiates as a primary and secondary substance of use ranged from 3% (EC) to 41% (NR) in 2022a. The average age (31 years) of individuals who have been admitted for Heroin/Opiate misuse has largely remained unchanged over the last three (3) reporting periods.

Treatment admissions for **OTC/PRE-medicines** as a primary drug of use was reported at 1% for all regions except KZN where the rate was 3%. Proportions for OTC/PRE-medicine use as both primary and secondary substance ranged between 1% (NR) and 8% (KZN). During this reporting period, n=1 082 (9%) persons across all sites reported the non-medical use of codeine, increasing from 3% in the preceding reporting period.

Treatment admission rates for **Methamphetamine** (MA aka 'TIK) as a primary substance of use were highest in the WC (32%) and EC (31%) compared to other regions. However, the proportion for MA-related admissions decreased in the EC from 38% in 2021b to 31% in 2022a, while rates doubled for the NR from 4% in 2021b to 8% in 2022a. Similar to the previous reporting period, nationally, MA was reported as the second leading primary substance of use by persons younger than 20 years (16%). The highest rates for MA as primary and secondary drug of use were reported for the EC (48%) and WC (46%). MA as a primary and secondary substance of use decreased across all regions except the NR where a marginal increase was noted from 15% in the preceding period to 16% in the current period. Treatment admissions for Ecstasy as a primary drug of use remained low (<1%); this has remained largely unchanged over the last few reporting periods. Individuals may not be seeking treatment for Ecstasy use, which explains low admission rates although anecdotal reports suggest extensive recreational use. **Methcathinone** (CAT/KHAT)[1], an amphetamine-type stimulant, has effects similar to that of MA. Across regions, CAT/KHAT was reported as a primary substance of use by 3% of individuals admitted to treatment. CAT/KHAT admissions as primary and secondary substance of use were low at <1%. In the EC, CAT/KHAT was reported as a secondary substance of use only while in GT and the WC it was reported as a primary substance only.

Inhalant/solvent use remained low at <1% across regions. Inhalant use was not reported for the CR. While rates were generally low, inhalant use is common among the homeless and children who live on the streets. Additional community-based or regional studies are needed to explore the extent of inhalant use for youth, barriers to accessing specialist treatment services and other services available to support and help this vulnerable population. Indication of **Poly-substance use** (i.e., more than one substance of use indicated) remained unchanged from the 2021b period (53% nationally); GT (30%) contributed the highest proportion of individuals who engaged in poly-substance use.

SACENDU utilises treatment admission data collected from treatment centres. These data are collected from

[1] CAT and KHAT are often used interchangeably during reporting which makes distinguishing between the two (CAT is synthetic and KHAT is plant-based) difficult during analysis. For this reason, these two categories have been combined.

METHODOLOGY

approximately 88 specialist substance use treatment centres in South Africa, representing 70% of the available treatment sites in the country. The larger provinces such as the Gauteng and the Western Cape Province have more treatment centres compared to provinces such as the Eastern Cape. *Table 1* below provides a description of these sentinel sites as well as the number of provinces that have treatment centres that provide opioid substitution or medically assisted therapies (MAT).

TABLE 1: DESCRIPTION OF TREATMENT CENTRE LOCATION IN SOUTH AFRICA

Sentinel site	Description and Location	Urban/Rural	Number of treatment centres*	Number of centres offering MAT
Gauteng	Smallest province situated in the north-eastern part of South Africa	Highly populated, urbanised, and economic hub of the country	26	3
KwaZulu-Natal	Coastal province located in the south-eastern part of South Africa.	Second most populous, mountainous province running along the shoreline of the Indian ocean.	13	2
Western Cape	Situated on the south-western coast of South Africa	Highly urbanised and the third most populous province in the country	27	1
Eastern Cape	Second largest province by size, but poorest. Located on the south-eastern part of the country, and is bordered by the Western Cape, Northern Cape, Free State and KwaZulu-Natal provinces	Largely rural	6	0
Northern Region	Is comprised of two provinces, Mpumalanga and Limpopo provinces, both located in the north-eastern part of South Africa and share borders with Swaziland, Botswana, Zimbabwe and Mozambique. These provinces were combined into the Northern Region due to few number of treatment centres found in these provinces	Mostly semi-urban	11	0
Central Region	Comprises three provinces, Free State (located in the centre/heart of the country), Northern Cape (largest province but sparsely populated), and the North West (north-central part of the country). The Central Region is characterised by the livestock farming, agriculture, and mining industries. These provinces were grouped together due to a few number of treatment centres found in these locations.	Largely rural	5	0

*The number of treatment centres/facilities fluctuate across periods due to different numbers of facilities providing data in any given period.

Treatment centres are invited to join the network and provide data related to their treatment admissions for each reporting period (current period Jan-June 2022). For admission to a specialist treatment centre, patients are required to meet diagnostic criteria (DSM-V/ICD 10) for a substance use disorder (APA, 2013). Participating treatment centres in the SACENDU network complete a standardized two-page form for each patient enrolled into their facility. The form consists of 22 forced-choice questions collecting demographic treatment and substance use information on each patient. The SACENDU data collection form is completed by designated facility personnel once the patient has been enrolled into the treatment programme. Forms for each participating treatment centre are collated every six-months and sent to the South African Medical Research Council (SAMRC) for collation, analysis and reporting. Forms and electronic data received from specialist facilities are checked for possible miscodes and missing information and is subjected to a rigorous process of verification and correction before the data analysis process takes place. Data from each facility are aggregated to allow for provincial and regional trends on the number of substance abuse treatment episodes to be reported. As the SACENDU data is based on episodes of care, individuals may be represented more than once in the dataset (if they receive more than one treatment episode in a year).

SECTION 1: DATA FROM SPECIALIST SUD TREATMENT CENTRES

SITE SUMMARIES – PRIMARY SUBSTANCE OF USE BY PROVINCE

In the **Western Cape (WC)** the most common primary substances of use reported by 27 specialist treatment centres/programmes remained the same across the 2021b to 2022a periods: MA (32%), Cannabis (27%), and Alcohol (19%), (*Table 2*). Collectively, these substances contributed 78% of all treatment admissions for the January – June 2022 period. The proportion of Heroin/Opiate-related admissions increased from 9% in previous period to 12% in the current review period. Conversely, treatment admissions for MA misuse decreased from 35% to 32%. Overall, 2 265 persons were treated in the WC in the first half of 2022.

In **KwaZulu-Natal (KZN)** the main primary substance of use in this period was Alcohol (31%), followed by Cannabis (28%), and Heroin/Opiates (21%). Alcohol-related treatment admission increased by 19 percentage points from 12.2% in the previous period to 31.0% in the current period (*Table 2*). In contrast, treatment admissions for Heroin/Opiates decreased by 8%. Similarly, admissions for Cannabis and MA decreased by 5% respectively over the last two reporting periods. A total of 1 144 persons were treated across the 13 treatment centres that submitted data in the first half of 2022.

In the **Eastern Cape (EC)** the main primary substances of use reported by the treatment centres from January to June 2022 were MA (31%), followed by Cannabis (26%), and Alcohol (23%) (*Table 2*). The most notable changes were seen for MA (decreasing from 38% in 2021b vs. 31% in 2022a) and Cannabis/Mandrax (increasing two-fold from 4% in 2021b to 8% in 2022a). A total of n=371 persons were treated across 6 facilities, decreasing from n=487 individuals requiring treatment in the previous review period (*Table 2*).

In **Gauteng (GT)**, which includes the metropolitan areas of Johannesburg and Pretoria, 6 665 admissions across 26 treatment centres were recorded in the first semester of 2022. Cannabis (34%) was the most common primary substance of use among persons admitted to treatment, followed by MA (22%) and Heroin/Opiates (18%) (*Table 2*). Treatment admission rates remained largely constant across the substance categories, however, a slight increase was noted for Cannabis-related admissions from 32% to 34% while admissions for Heroin/Opiates misuse decreased from 21% in 2021b to 18% in 2022a (*Table 2*).

The **Northern Region (NR)** includes data from 11 centres (9 in Mpumalanga and 2 in Limpopo). A total of 1 165 admissions were recorded for the 2022a review period. The three leading primary substances of use reported by individuals admitted to treatment were Cannabis (40%), Heroin/Opiates (28%), and Alcohol (15%); this trend was consistent with substance-related admissions in the 2021b period (*Table 2*). Admissions for Alcohol misuse decreased from 19% in the preceding period to 15% in the current reporting period while Cannabis-related admissions increased from 31% (2021b) to 40% (2022a). A 4% increase was also noted for MA admissions (*Table 2*).

In the **Central Region (CR)** (comprising the Free State, Northern Cape and the North West), 314 admissions were recorded across five (5) treatment centres for the 2022a period. Alcohol was the most common primary substance of use, accounting for over a third (35%) of all admissions for the current review period. This was closely followed by Cannabis at 32%. MA was the third most common reason for treatment admissions at 19%. A considerable increase was noted for alcohol-related admissions from 28% in 2021b to 35% in 2022a. A depreciation in rates for cannabis misuse was seen from 38% in the previous review period to 32% in the current period (*Table 2*). The CR remains poorly resourced with regards to the availability of specialist treatment centres.

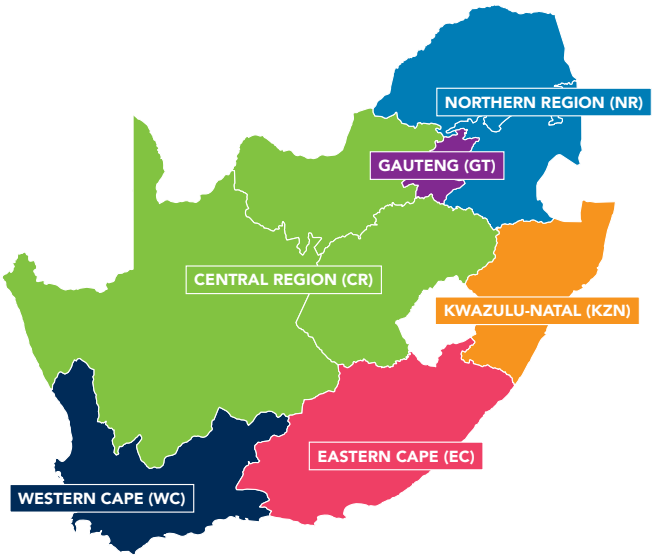


TABLE 2: PRIMARY SUBSTANCE OF USE: BY SITE AND 6-MONTH PERIOD (%)

Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	OTC/*PRE	Meth**	Other	Total (N)
WC	2005b	25.1	11.2	5.5	7.6	13.8	0.2	1.1	34.7	0.8	2131
	2006a	30.2	7.7	3.3	6.0	13.5	0.1	1.4	37.2	0.7	2660
	2006b	26.4	10.5	2.9	4.8	10.2	0.1	1.6	42.3	0.8	2798
	2007a	29.5	10.4	2.7	3.9	10.6	0.2	1.1	40.7	0.9	2862
	2007b	29.7	12.6	3.0	4.2	12.8	0.1	1.2	36.1	0.5	3058
	2008a	30.0	11.2	2.5	5.0	13.2	0.3	1.4	35.8	0.0	2637
	2008b	27.6	13.6	2.7	5.6	2.8	0.1	1.2	35.1	1.2	2807
	2009a	26.8	13.9	1.0	2.8	10.9	0.1	1.0	40.6	0.0	3667
	2009b	29.4	16.7	2.7	2.3	12.0	0.0	0.8	35.5	0.0	2642
	2010a	29.8	15.6	3.9	1.9	13.0	0.2	0.1	33.6	0.0	3134
	2010b	27.5	18.2	3.2	1.9	11.6	0.0	1.2	35.1	1.2	2933
	2011a	27.5	18.3	2.9	1.8	13.0	0.0	0.4	35.3	0.8	2927
	2011b	23.7	14.5	2.4	2.2	17.0	0.0	0.5	38.8	0.9	2733
	2012a	23.6	20.4	2.9	1.7	15.6	0.1	0.7	33.7	0.3	3912
	2012b	22.2	22.4	3.8	1.4	15.1	0.2	0.4	33.3	1.2	3178
	2013a	20.2	20.5	3.1	1.5	16.8	0.2	1.4	27.8	8.2	3717
	2013b	21.2	25.0	2.5	1.6	13.0	0.1	1.0	33.4	1.9	3478
	2014a	19.9	21.7	4.3	1.2	18.5	0.1	0.6	32.7	1.1	3510
	2014b	22.0	23.4	4.5	1.5	12.7	0.1	0.6	34.9	0.3	3444
	2015a	21.3	22.1	4.4	1.3	14.2	0.0	0.4	35.4	0.8	3524
	2015b	19.9	24.9	5.3	1.2	10.7	0.0	0.5	36.7	0.8	2674
	2016a	22.0	28.2	4.5	1.4	10.8	0.0	0.8	31.7	0.6	2977
	2016b	20.6	28.7	6.1	1.3	12.8	0.0	0.9	28.9	0.7	2808
	2017a	26.4	28.7	5.4	1.2	10.3	0.0	0.4	26.8	0.7	2902
	2017b	23.6	22.0	6.7	2.2	13.7	0.1	0.7	30.2	0.8	2541
	2018a	24.0	25.9	6.4	2.2	12.5	0.1	1.0	26.8	0.7	3182
	2018b	19.8	30.5	6.4	2.3	11.4	0.0	1.1	27.6	0.3	2719
	2019a	17.8	26.0	6.4	1.9	16.4	0.0	0.9	29.4	1.2	3013
	2019b	19.2	25.4	6.4	2.7	14.2	0.1	1.0	29.9	1.0	2654
	2020a	10.9	14.9	8.2	1.6	18.2	0.1	1.5	43.8	3.5	1323
	2020b	16.8	16.7	7.2	3.3	14.1	0.1	1.1	40.1	0.6	1890
	2021a	18.2	23.6	7.5	2.5	11.3	0.1	1.5	34.7	0.3	2433
	2021b	20.0	26.7	5.6	2.1	9.1	0.0	1.4	34.8	0.2	2195
	2022a	**18.9**	**27.5**	**5.6**	**1.9**	**12.5**	**0.1**	**1.1**	**32.2**	**0.2**	**2265**

Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	OTC/*PRE	Meth**	Other	Total (N)
KZN[2]	2005b	57.6	27.5	2.8	6.6	1.3	1.0	1.8	0.0	1.4	846
	2006a	60.4	22.5	1.0	6.8	2.1	1.0	5.2	0.2	1.0	485
	2006b	54.0	18.5	0.9	10.5	9.1	0.3	3.4	0.2	3.4	921
	2007a	49.8	20.5	1.2	9.0	15.9	0.5	2.2	0.0	0.9	1232
	2007b	38.8	17.4	0.4	8.6	31.6	1.0	1.5	0.0	0.7	943
	2008a	49.5	19.8	0.4	5.6	22.6	0.1	0.6	0.1	0.7	1531
	2008b	47.6	16.4	0.9	6.2	24.3	0.2	0.5	0.0	3.7	1537
	2009a	41.1	20.3	0.5	6.9	29.5	0.1	1.1	0.0	0.0	1575
	2009b	46.7	28.4	0.5	6.2	17.0	0.1	0.6	0.1	0.0	1138
	2010a	55.4	32.8	1.9	3.6	4.6	0.4	0.4	0.3	0.0	1009
	2010b	55.3	25.6	2.1	5.8	8.5	0.4	1.8	0.1	0.3	669
	2011a	62.9	17.1	1.3	6.7	10.0	0.0	1.1	0.0	0.9	720
	2011b	67.0	16.2	2.5	5.4	6.1	0.3	0.3	0.5	1.7	610
	2012a	64.9	18.8	1.2	6.3	4.4	0.7	1.2	0.0	2.5	569
	2012b	51.0	24.6	1.4	4.1	6.2	0.0	0.6	0.5	11.7	813
	2013a	51.1	31.5	0.6	6.1	6.1	0.6	1.1	0.3	2.6	934
	2013b	52.0	30.2	2.5	4.9	5.2	1.1	0.8	0.3	2.8	610
	2014a	42.4	36.0	3.9	2.1	10.1	0.4	1.2	0.8	3.1	484
	2014b	35.5	40.0	4.8	5.9	7.6	0.4	1.2	0.1	4.3	929
	2015a	38.2	38.9	6.2	3.5	4.7	0.3	1.2	0.4	6.5	1122
	2015b	37.2	33.8	5.5	5.2	6.6	0.4	0.9	1.1	9.3	1171
	2016a	29.4	39.3	3.0	4.7	14.6	0.8	1.5	0.6	6.1	1247
	2016b	36.8	34.3	1.3	4.3	10.3	0.5	1.1	0.7	10.7	1177
	2017a	33.6	32.1	3.3	6.2	9.9	0.4	1.0	0.9	12.4	1370
	2017b	36.9	28.8	2.5	5.9	9.9	0.3	2.2	0.9	12.6	1400
	2018a	28.9	28.5	2.6	6.7	27.7	0.2	2.1	0.9	20.5	1256
	2018b	29.2	29.0	2.4	7.7	26.2	0.5	2.1	0.9	19.0	993
	2019a	12.7	39.6	2.1	3.7	30.1	0.2	2.9	3.9	1.2	1291
	2019b	14.4	34.5	2.2	5.4	26.5	0.3	2.9	9.3	4.4	980
	2020a	14.3	34.9	2.1	6.0	25.5	0.5	3.0	8.5	5.1	565
	2020b	33.8	26.2	1.7	13.5	19.6	0.3	3.7	0.7	0.0	726
	2021a	32.8	23.1	1.7	13.3	22.9	0.3	2.5	2.0	1.3	723
	2021b	12.2	33.0	1.0	12.4	28.7	0.2	3.1	8.2	0.3	1146
	2022a	**31.0**	**28.3**	**1.3**	**10.4**	**20.7**	**0.1**	**3.2**	**2.8**	**1.5**	**1144**

Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	OTC/*PRE	Meth**	Other	Total (N)
EC[3]	2005b	48.8	12.9	9.4	14.6	6.6	0.0	4.5	3.3	0.0	693
	2006a	40.7	14.4	7.9	21.4	8.1	1.2	2.6	3.5	0.2	1215
	2007a	51.8	18.3	8.6	14.2	1.1	0.3	3.8	1.4	0.5	759
	2007b	39.0	15.6	9.2	22.9	5.4	0.5	2.8	4.3	0.3	608
	2008a	44.3	15.8	3.6	20.1	6.0	0.4	6.5	5.0	0.5	551
	2008b	44.0	16.8	9.3	12.4	5.6	0.0	5.1	5.4	1.5	612
	2009a	52.0	17.7	8.5	7.8	2.7	0.1	7.0	3.7	0.0	1206
	2009b	49.7	15.9	5.6	7.4	3.5	0.0	9.3	7.4	0.0	648
	2010a	44.1	19.2	7.8	6.4	3.1	0.2	12.3	6.3	0.0	877
	2010b	44.1	18.0	5.7	7.1	5.2	0.0	9.9	9.2	0.8	707
	2011a	48.5	15.6	3.6	5.8	2.9	0.1	11.3	12.0	0.0	723
	2011b	40.4	16.1	5.0	4.0	2.6	0.3	11.5	18.4	1.7	721
	2012a	41.6	15.8	4.4	5.8	1.3	0.1	12.1	18.4	0.5	793
	2012b	37.7	24.4	6.3	7.3	2.8	0.0	2.2	15.8	3.5	316
	2013a	36.6	11.9	4.8	5.6	1.9	0.0	18.9	19.4	0.9	587
	2013b	39.5	12.9	6.6	4.7	2.3	0.0	16.5	16.9	0.6	527
	2014a	32.6	19.9	3.4	6.0	1.5	0.0	17.5	17.9	1.1	613
	2014b	35.4	21.6	7.4	5.3	1.2	0.0	11.0	16.3	1.8	663
	2015a	28.7	27.0	12.1	5.5	3.9	0.6	4.1	15.2	3.0	363
	2015b	24.0	31.2	10.4	3.4	2.3	0.0	1.3	25.3	1.9	471
	2016a	30.1	22.4	5.8	5.8	2.4	0.0	7.2	22.9	3.4	638
	2016b	38.5	23.8	8.0	2.6	2.0	0.0	5.6	15.5	3.9	537
	2017a	45.2	17.6	6.8	5.5	3.1	0.0	3.8	16.2	1.9	425
	2017b	34.0	23.5	9.7	4.3	2.1	0.0	3.3	20.0	3.1	515
	2018a	35.0	20.9	6.9	2.9	2.7	0.2	4.6	24.3	3.1	517
	2018b	33.8	21.8	6.0	3.1	2.4	0.2	4.2	25.8	3.6	450
	2019b	26.3	22.9	3.2	3.4	18.3	0.0	3.8	20.8	1.3	475
	2019b	37.5	22.3	4.2	2.3	1.5	0.0	4.5	26.2	1.5	336
	2020a	21.4	29.8	1.4	3.3	13.5	0.0	3.7	16.7	5.1	215
	2020b	21.4	26.3	5.1	4.7	1.8	0.0	2.0	37.3	1.3	448
	2021a	26.7	22.0	5.2	4.1	2.3	0.0	2.6	36.3	0.6	386
	2021b	27.7	24.6	3.7	3.9	0.8	0.0	1.0	38.0	0.0	487
	2022a	**23.2**	**25.6**	**8.1**	**6.2**	**2.2**	**0.0**	**1.3**	**31.1**	**2.2**	**371**

Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	OTC/*PRE	Meth**	Other	Total (N)
GT	2005b	51.8	21.0	2.8	10.1	7.7	0.6	2.3	0.2	3.6	2848
	2006a	47.5	20.5	3.0	11.1	7.8	0.4	3.2	0.3	3.2	3119
	2006b	47.2	21.5	1.4	10.7	9.7	0.2	2.7	0.2	5.9	3295
	2007a	45.9	20.8	1.4	13.0	10.6	0.3	3.7	0.4	4.4	3251
	2007b	47.0	19.3	1.6	14.2	9.6	0.2	3.6	0.4	4.1	3053
	2008a	47.0	22.4	1.7	13.3	8.1	0.2	4.0	0.7	2.5	2768
	2008b	48.4	22.4	2.0	8.8	6.4	0.3	3.5	0.3	7.9	3158
	2009a	45.0	28.2	2.2	6.7	6.7	0.5	3.2	1.0	0.0	2822
	2009b	47.0	27.5	1.7	4.9	11.9	0.2	2.6	0.5	0.0	2646
	2010a	44.4	27.0	2.5	6.1	12.1	0.3	3.6	1.2	0.0	2684
	2010b	41.3	28.4	1.6	6.3	12.4	0.2	3.0	1.0	5.7	2884
	2011a	37.8	24.9	1.3	7.3	16.0	0.1	4.0	1.7	6.8	2972
	2011b	35.9	27.6	1.7	6.2	12.7	0.6	3.5	1.4	10.4	2786
	2012a	34.3	28.5	0.7	6.0	14.9	0.2	2.4	2.4	10.8	3198
	2012b	27.8	25.9	0.7	4.3	9.6	0.0	1.8	2.5	23.5	3552
	2013a	26.9	39.7	0.9	3.3	11.8	0.2	1.3	2.6	13.4	4026
	2013b	24.6	36.7	1.6	3.8	12.9	0.2	1.3	2.7	16.2	3128
	2014a	18.8	41.6	2.1	2.6	11.5	0.3	1.1	3.9	9.8	3478
	2014b	19.9	35.5	1.6	4.0	13.5	0.3	1.2	3.3	20.7	3372
	2015a	20.0	37.7	2.7	3.8	12.3	0.2	0.9	4.0	6.1	3570
	2016a	17.9	37.7	3.9	4.9	11.8	0.2	1.7	5.1	16.8	3989
	2016b	21.8	35.7	1.9	2.4	13.0	0.2	1.2	6.3	17.5	2948
	2017a	17.3	45.7	1.7	2.2	13.1	0.1	1.5	5.5	12.8	3870
	2017b	17.3	41.2	2.3	2.6	14.0	0.1	1.3	6.3	14.8	3414
	2018a	15.5	32.5	2.2	2.3	30.5	0.2	1.3	5.9	18.6	2734
	2018b	13.9	36.4	1.9	2.7	27.3	0.1	1.2	8.0	18.0	2937
	2019a	18.1	32.4	3.0	3.2	25.9	0.1	2.3	8.9	5.9	3148
	2019b	11.6	29.7	2.8	3.0	36.3	0.2	0.7	11.2	4.4	4226
	2020a	11.4	33.7	2.3	2.7	32.5	0.0	1.5	9.9	7.0	3279
	2020b	8.2	26.5	3.7	2.5	33.8	0.3	0.9	14.9	8.9	5059
	2021a	9.4	27.3	2.9	3.5	29.4	0.3	2.6	17.3	8.9	6226
	2021b	13.2	31.8	2.2	1.3	21.5	0.1	0.8	20.9	1.0	9701
	2022a	**11.4**	**33.7**	**2.5**	**2.1**	**18.4**	**0.0**	**0.9**	**22.2**	**2.6**	**6665**

Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	OTC/*PRE	Meth**	Other	Total (N)
NR[4]	2005b	54.3	23.3	0.5	6.2	10.3	0.9	2.8	0.5	1.1	562
	2006a	54.5	24.6	0.0	6.8	10.2	0.6	2.2	0.0	1.2	501
	2006b	47.3	34.1	0.4	4.6	9.6	0.2	2.4	0.0	1.3	539
	2007a	43.7	36.5	0.8	4.5	11.5	0.3	1.3	0.0	1.3	600
	2007b	43.3	38.4	0.0	7.8	6.8	0.2	1.4	0.4	0.7	602
	2008a	34.6	50.2	0. 6	4.8	7.5	0.0	1.5	0.0	0.7	667
	2008b	34.3	44.9	0.3	5.2	8.6	0.3	2.3	0.0	4.1	729
	2009a	37.8	45.2	0.6	4.2	8.3	0.5	0.9	0.2	0.0	809
	2009b	37.6	43.9	0.3	4.1	11.2	0.3	1.5	0.0	1.1	652
	2010a	35.7	37.0	0.3	3.4	20.0	0.0	1.2	0.0	0.0	762
	2010b	31.4	40.7	0.4	4.0	20.2	0.1	1.3	0.0	1.8	669
	2011a	30.4	36.1	0.0	2.2	28.3	0.0	0.3	0.3	2.5	693
	2011b	26.5	36.4	0.4	4.1	22.2	0.1	1.8	2.1	6.4	892
	2012a	31.6	38.5	0.5	3.5	16.2	0.0	1.7	1.4	6.7	655
	2012b	24.1	32.8	0.6	3.9	21.8	0.1	1.0	0.6	15.2	818
	2013a	22.3	37.9	1.1	3.0	28.6	0.1	2.4	0.4	4.1	941
	2013b	22.8	45.6	0.4	1.7	22.8	0.0	0.8	1.0	4.8	959
	2014a	15.9	50.4	1.2	2.8	22.9	0.1	0.7	0.4	5.6	1004
	2014b	18.2	41.7	0.4	1.8	26.3	0.1	0.5	0.6	10.4	1134
	2015a	16.7	37.1	1.0	2.1	30.1	0.0	0.2	0.6	12.2	1076
	2015b	16.1	37.1	4.2	1.8	28.4	0.0	0.6	0.8	10.7	1247
	2016a	17.0	39.0	3.8	2.1	25.8	0.1	0.7	0.9	10.6	1026
	2016b	18.0	34.1	0.9	2.3	36.4	0.0	0.4	0.6	7.3	929
	2017a	14.6	45.5	0.9	5.3	28.3	0.1	0.3	0.6	4.2	1122
	2017b	15.7	41.9	0.3	3.9	27.3	0.0	0.6	1.6	8.7	1269
	2018a	14.5	39.2	1.8	2.7	30.8	0.0	1.0	9.3	16.5	1372
	2018b	17.3	38.3	0.5	2.1	33.7	0.1	0.9	2.1	16.2	1171
	2019a	16.7	36.3	3.4	4.1	23.5	0.2	1.4	9.1	5.4	1025
	2019b	15.3	40.2	0.3	3.3	32.8	0.1	0.8	3.7	1.3	1423
	2020a	15.1	31.1	2.5	4.7	28.3	0.1	1.8	9.1	7.3	768
	2020b	14.7	32.8	0.4	2.6	40.1	0.0	1.1	5.4	2.9	1024
	2021a	13.6	36.8	0.6	2.6	37.2	0.2	0.7	5.6	2.5	958
	2021b	19.3	30.8	0.1	11.7	28.8	0.2	0.0	3.9	0.1	1657
	2022a	**14.8**	**40.3**	**0.2**	**5.2**	**28.1**	**0.0**	**0.7**	**7.9**	**0.9**	**1165**

Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	OTC/*PRE	Meth**	Other	Total (N)
CR[5]	2008a	65.1	21.7	1.1	5.7	0.9	0.0	2.8	0.3	0.0	636
	2008b	67.0	11.9	0.3	6.3	0.3	0.5	3.9	0.0	9.7	636
	2009a	70.0	14.6	0.1	4.2	2.1	0.3	3.3	0.7	0.0	577
	2009b	68.6	20.0	1.0	2.9	1.0	0.0	2.9	0.0	0.0	491
	2010a	64.6	20.2	1.9	5.8	1.4	0.0	3.1	0.3	0.0	642
	2010b	66.2	19.3	1.3	4.0	2.6	0.0	2.2	0.9	3.5	545
	2011a	70.4	14.3	1.5	4.8	1.1	0.4	2.6	1.1	3.7	538
	2011b	58.7	20.9	2.0	5.8	2.2	0.0	2.9	2.2	5.3	549
	2012a	55.4	25.2	2.3	2.5	1.2	0.0	1.9	3.4	8.2	932
	2012b	54.5	19.8	1.6	5.7	2.2	0.0	1.4	2.0	12.7	495
	2013a	50.8	25.8	2.1	5.5	3.4	0.2	1.9	2.3	7.8	472
	2013b	46.9	32.6	2.7	3.9	2.4	0.0	1.0	2.9	4.1	414
	2014a	42.6	33.0	5.3	4.3	2.6	0.2	0.6	4.0	7.4	530
	2014b	39.2	30.7	4.7	2.1	5.5	0.2	1.1	4.1	12.4	655
	2015a	42.2	30.2	4.1	2.5	5.5	0.0	1.6	5.1	8.8	566
	2015b	42.1	24.4	5.5	4.2	5.5	0.4	0.9	7.7	9.3	546
	2016a	49.8	27.8	4.2	2.3	1.5	0.3	1.1	4.4	8.7	663
	2016b	47.2	26.8	4.1	4.6	2.1	0.0	0.3	0.3	10.8	388
	2017a	43.3	29.2	5.6	5.9	2.5	0.0	1.4	4.8	7.3	356
	2017b	45.4	30.6	4.9	3.1	2.9	0.0	1.4	6.3	5.4	350
	2018a	34.7	37.4	7.2	2.9	2.1	0.2	4.6	24.4	4.8	334
	2018b	38.4	24.1	6.0	4.2	7.4	0.0	0.9	11.1	7.9	216
	2019a	17.4	38.9	3.2	2.9	26.6	0.0	0.3	7.3	3.5	316
	2019b	38.6	35.9	2.7	2.7	4.8	0.0	2.1	11.6	1.6	189
	2020a	16.8	31.1	2.9	5.4	25.7	0.0	1.2	8.9	7.8	167
	2020b	24.7	28.7	6.1	5.7	12.6	0.0	1.6	15.8	4.9	247
	2021a	29.7	23.6	3.8	4.7	7.1	0.0	1.4	26.4	3.3	212
	2021b	27.9	37.8	2.8	4.6	4.4	0.0	2.4	15.4	0.8	495
	2022a	**35.0**	**32.2**	**4.8**	**1.0**	**3.8**	**0.3**	**1.0**	**19.1**	**0.3**	**314**

[1] Cape Town, Atlantis, Worcester; [2] Durban, South Coast, Pietermaritzburg; [3] Port Elizabeth and East London; [4] Mpumalanga & Limpopo; [5] Free State, North West, Northern Cape
*Over-the-counter, prescription medicine; **Methamphetamine

SITE SUMMARIES: SOCIO-DEMOGRAPHIC PROFILES

First time admissions: The proportion of first-time admissions to treatment centres ranged between 57% (WC) and 94% (NR) across sites. In this period, first-time admissions made up 82% of all admissions. Nationally, Cannabis/Mandrax, Heroin/Opiates, and OTC/PRE-medication contributed the highest rates for readmissions (29% respectively). This was followed by Heroin/Opiates (27%) and MA (22%). Of note is the high readmission rate in the WC (43%) where the majority of readmissions were for MA (38%) and Heroin/Opiates (28%) misuse.

Referrals: Across all regions, the most common source of referral to specialist treatment centres was 'Self/Family/Friends', ranging between 42% (KZN) and 65% (GT). Referrals from 'Social Services/Welfare' were the second most common referral source in the WC and GT (18%) respectively. In the CR, 'Work/Employer' was the second leading source of referral to treatment (17%). See Table 3.

TABLE 3: REFERRAL SOURCES (JAN-JUN 2022) [COLUMN % ADD UP TO 100]

Source	WC	KZN	EC	CR	GT	NR
Self/Family/Friends	44	42	59	58	65	58
Work/Employer	7	7	9	17	2	9
Social services/Welfare	18	14	9	4	18	14
Health professionals (Doctor/psychiatrist/nurse)	2	18	5	4	2	1
Hospital/Clinic	5	3	1	2	1	1
Court/Correctional services	2	1	8	1	1	1
Schools	17	14	8	12	9	14
Church/Religious body	1	<1	-	2	1	1
Other e.g., radio	5	<1	<1	-	<1	<1

Gender: Across regions, between 73% (WC) and 88% (CR, GT, and NR) of persons identified as male. However, when gender was compared by primary substance of use across regions, variations between genders emerged (see Figure 1). Most notably, in the WC and EC, females accounted for 80% of OTC/PRE-medication admissions compared to 20% for males. Similarly, in GT, more females (63%) were admitted for OTC/PRE-medication misuse versus males (37%). In the NR, admissions for inhalant use was more common among females (67%) compared to males (33%). Across regions, more males than females were admitted to specialist treatment centres for the period Jan to June 2022 (see Figure 2).

FIGURE 1: GENDER BY PRIMARY SUBSTANCE OF USE (%)

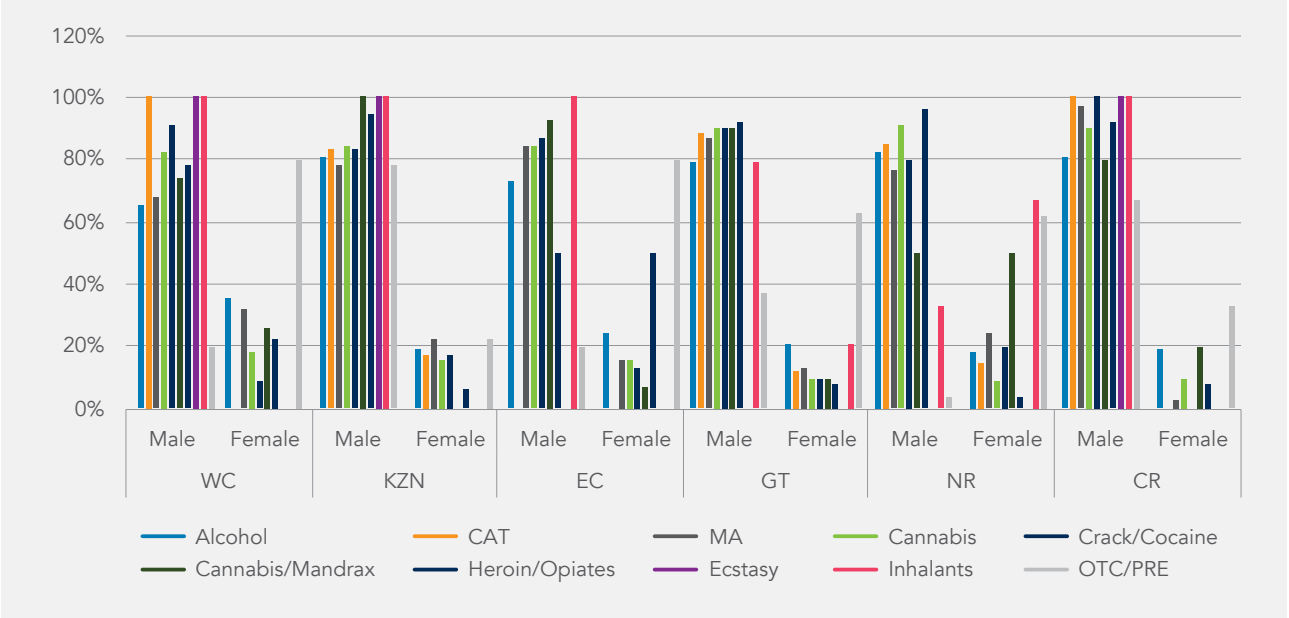
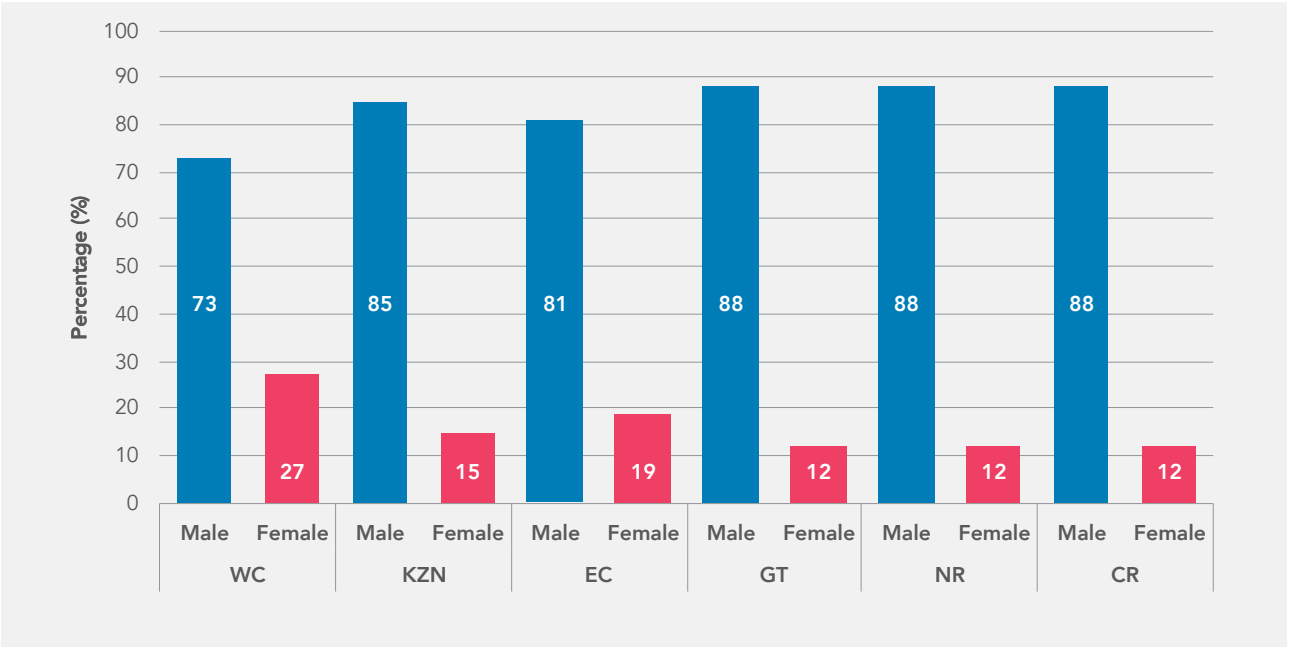


FIGURE 2: GENDER BY REGION (%)



Employment status and education: Between 17% (WC) and 37% (KZN) of persons admitted to treatment were in full-time employment across regions. Unemployment rates ranged between 34% (KZN) and 65% (GT). GT remained the region that accounted for the highest unemployment rates, including being unemployed for more than 6 months (58%). In the NR, 46% of individuals admitted to treatment had been unemployed for more than 6 months, followed by the WC with 39%. Across all provinces, the majority of individuals (85%) had a secondary school (grade 8-12) education. KZN (21%) had the highest number of persons with a tertiary level education. Individuals with no schooling made up a very small proportion comprising <1% across all provinces.

Mode of use: Smoking remained the most common mode of use for all substances nationally (71%) compared to other modes of use, increasing substantially from 58% in the previous reporting period. Rates for injection drug use remained low across sites, however, the WC replaced GT as the region with the highest reported injection rates (6%). Overall, 22% of persons who had Heroin/Opiates as their primary substance of use reported injecting as a route of administration, increasing from 18% in the preceding period. As seen in the 2021b reporting period, the EC had the highest heroin injection rates for this period (62%) compared to other regions. Heroin/Opiate use was evenly split between smoking (17%) and injection (17%).

Age of persons: The national mean age for all substances was 28 years (Table 4). However, age differences were noted for individual substance categories. In line with national rates reported for the previous period, individuals were older when their primary substance of use was Alcohol (38 years) and OTC/PRE-medication (37 years). Individuals who reported Inhalants as their primary substance of use were the youngest (average age 19 years) compared to other substance use categories, with the youngest average age at time of admission reported for KZN (13 years) and CR (14 years). Refer to Table 4.

A total number of 2 871 individuals aged <20 years were admitted to specialist treatment facilities for the current reporting period. GT remained the region with the highest proportion of individuals aged <20 years admitted to treatment (57%), however a substantial drop was seen from 72% in the previous period (Figure 3).

TABLE 4: MEAN AGE OF PERSONS IN TREATMENT CENTRES BY SELECTED PRIMARY SUBSTANCE OF USE (JAN-JUN 2022)

Substance of use	WC	KZN	EC	CR	GT	NR	National
Alcohol	39	38	40	38	39	35	38
CAT/KHAT	35	28	-	28	27	28	27
Crack/Cocaine	33	32	33	23	30	28	31
Cannabis	19	21	19	19	23	24	22
Cannabis/Mandrax	34	32	31	27	31	27	32
Heroin/Opiates1	36	26	37	29	30	30	31
Inhalants	-	13	16	14	18	31	19
Methamphetamine	33	29	24	25	25	24	27
Ecstasy	21	39	-	39	-	-	30
OTC/PRE2	38	24	47	43	42	42	37
Other combinations	28	31	26	14	28	30	28
All substances	**31**	**29**	**28**	**28**	**27**	**28**	**28**

[1]Nyaope and whoonga have been incorporated into the heroin-related admission category to improve the accuracy of heroin surveillance; [2]Over-the-counter or prescription medicines
*Inhalants not reported for these regions

FIGURE 3: TREATMENT ADMISSION TRENDS (% OF PATIENTS <20 YEARS)

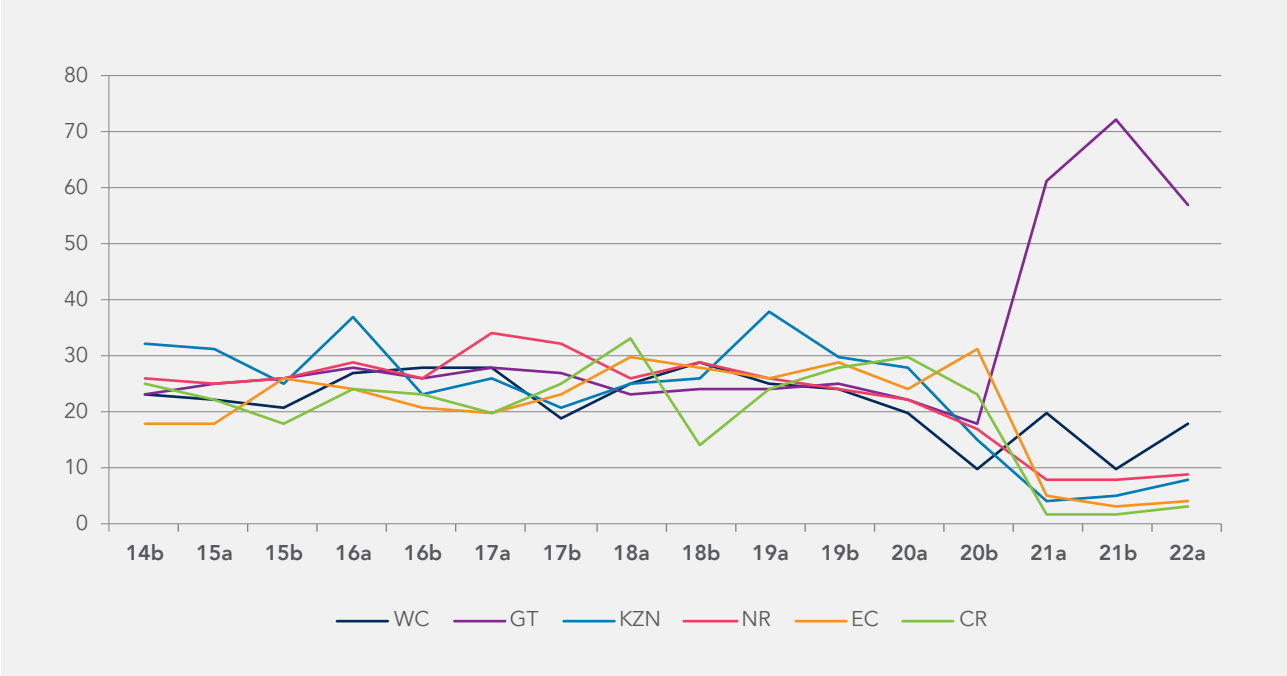


TABLE 5: PRIMARY SUBSTANCE OF USE FOR PERSONS <20 YEARS (%): JAN-JUN 2022

Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	Meth[a]	OTC/ PRE[b]	Total (N)
WC[1]	05a	2.5	24.5	9.3	1.9	11.5	0.8	48.7	-	637
	05b	3.1	22.1	6.7	1.3	12.9	0.4	53.0	-	674
	06a	1.7	17.4	3.9	0.6	15.3	0.0	60.2	-	724
	06b	2.9	26.0	2.6	0.4	7.1	0.0	58.6	-	761
	07a	3.6	24.4	2.4	0.6	9.6	0.1	56.5	-	803
	07b	5.0	35.1	3.7	0.5	11.1	0.0	43.2	-	812
	08a	5.0	33.1	3.5	0.6	10.1	0.2	45.5	-	622
	08b	3.3	42.8	2.3	2.3	7.6	0.0	39.1	-	657
	09a	5.0	39.6	3.3	0.3	6.3	0.0	42.4	-	902
	09b	5.9	45.7	2.0	0.5	7.5	0.0	36.1	-	615
	10a	6.9	45.4	5.4	0.3	6.6	0.1	33.3	-	702
	10b	14.6	38.2	4.6	0.5	7.2	0.0	33.1	-	610
	11a	6.5	60.5	2.6	0.3	3.5	0.0	25.3	-	620
	11b	4.9	58.3	2.6	0.5	7.0	0.0	24.5	-	429
	12a	8.9	63.5	2.7	0.5	2.8	0.0	17.7	-	866
	12b	4.0	70.2	2.6	0.3	3.5	0.0	17.6	-	655
	13a	3.0	69.9	3.5	0.3	3.8	0.0	15.5	-	742
	13b	6.2	66.7	2.3	0.2	5.9	0.0	17.6	-	888
	14a	23.4	32.0	2.5	1.1	10.3	0.1	27.8	-	802
	14b	10.5	46.4	4.5	1.5	11.9	0.1	24.4	-	783
	15a	2.8	75.2	4.6	0.5	1.5	0.0	15.0	-	781
	15b	7.7	69.8	2.7	0.7	3.9	0.0	14.3	-	559
	16a	11.2	71.2	2.8	0.4	2.1	0.0	11.2	-	809
	16b	10.0	80.8	2.6	0.4	0.1	0.1	5.2	-	783
	17a	10.6	79.5	2.4	1.1	0.7	0.1	4.5	-	803
	17b	7.5	76.8	4.8	0.2	1.2	0.0	8.3	-	482
	18a	13.7	76.5	1.6	0.4	0.6	0.3	6.3	-	810
	18b	13.1	74.5	2.7	0.5	0.7	0.0	7.9	-	779
	19a	8.9	75.1	1.5	0.3	6.3	0.0	6.5	-	760
	19b	15.5	33.3	6.3	2.2	12.9	0.3	26.7	-	637
	20a	9.5	23.2	7.2	0.4	18.3	0.0	39.5	-	263
	20b	11.8	60.0	4.1	1.0	1.5	0.0	21.0	-	195
	21a	10.3	51.6	6.8	0.9	8.5	0.2	20.7	1.2	426
	21b	2.8	84.3	2.1	0.2	0.6	-	8.5	1.1	470
	22a	**2.3**	**87.4**	**1.0**	**0.4**	**-**	**-**	**7.9**	**0.6**	**520**

Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	Meth[a]	OTC/ PRE[b]	Total (N)
KZN[2]	04b	25.4	47.9	20.3	2.5	0.8	0.8	0.0	-	236
	05a	21.6	63.1	6.9	4.6	1.3	0.3	0.0	-	306
	05b	24.0	64.8	3.8	1.6	1.2	0.8	0.0	-	250
	06a	25.0	67.3	1.0	1.0	0.0	1.9	0.0	-	104
	06b	31.0	41.1	0.8	3.9	13.6	0.0	0.0	-	258
	07a	18.6	51.5	1.3	3.4	22.0	0.3	0.0	-	291
	07b	15.8	37.9	0.4	2.1	38.7	2.9	0.0	-	240
	08a	26.8	42.1	0.0	0.8	26.8	0.5	0.0	-	391
	08b	21.6	47.2	1.2	1.2	20.6	0.0	0.0	-	324
	09a	14.8	48.2	0.5	0.7	33.9	0.2	0.0	-	413
	09b	15.3	63.4	0.6	2.2	17.2	0.2	0.0	-	320
	10a	23.3	64.5	3.0	0.3	7.6	0.0	0.0	-	330
	10b	20.1	63.2	0.7	2.8	10.4	0.0	0.7	-	144
	11a	51.1	31.1	1.1	0.5	11.5	0.0	0.0	-	182
	11b	47.2	39.2	3.7	0.0	7.5	0.0	0.6	-	161
	12a	69.4	19.1	0.6	4.5	5.1	0.0	0.0	-	157
	12b	23.0	54.3	1.6	0.8	4.9	0.0	0.0	-	243
	13a	52.8	30.6	0.6	6.3	7.2	0.0	0.0	-	320
	13b	40.5	49.5	2.4	0.0	4.3	0.5	0.5	-	210
	14a	25.8	57.6	4.0	0.5	8.6	0.0	0.0	-	198
	14b	11.9	74.1	3.4	2.4	4.1	0.0	0.0	-	293
	15a	39.0	43.6	8.4	2.6	1.5	0.3	0.3	-	344
	15b	7.9	73.9	6.2	0.3	2.7	0.7	0.3	-	291
	16a	9.5	69.5	2.2	0.6	11.5	0.6	0.0	-	462
	16b	8.1	78.3	1.1	0.4	7.0	0.4	0.4	-	272
	17a	23.8	58.2	1.7	3.3	5.8	0.6	0.3	-	361
	17b	17.3	65.0	1.7	1.0	5.1	0.7	0.7	-	294
	18a	13.3	71.6	0.9	2.5	7.9	0.3	0.6	-	317
	18b	45.6	33.8	1,5	3.0	10.3	0.4	0.6	-	263
	19a	13.9	40.3	1.4	4.3	30.3	0.0	2.2	-	491
	19b	5.8	50.7	2.7	3.7	19.7	0.3	12.2	-	294
	20a	8.2	52.5	1.9	1.9	19.6	0.0	8.2	-	158
	20b	31.2	23.9	0.0	18.4	22.9	0.0	0.0	-	109
	21a	7.6	64.1	0.0	5.4	11.9	0.0	2.2	7.6	92
	21b	1.5	56.9	1.1	8.4	14.1	-	10.7	6.5	262
	22a	**7.8**	**69.4**	**0.4**	**1.6**	**9.0**	**-**	**-**	**8.6**	**245**

Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	Meth[a]	OTC/ PRE[b]	Total (N)
EC[3]	04b	10.9	35.7	43.4	4.7	0.8	2.3	0.0	-	129
	05a	22.1	35.3	33.1	5.1	0.0	0.7	0.0	-	136
	05b	25.3	52.7	16.5	5.5	0.0	0.0	0.0	-	91
	06a	23.5	53.0	10.4	7.8	0.9	1.7	0.9	-	115
	06b	17.3	55.9	6.3	13.4	0.0	0.0	4.7	-	127
	07a	26.3	54.4	7.5	6.9	0.6	0.6	1.3	-	160
	07b	15.6	45.1	18.0	11.5	2.5	0.8	4.9	-	122
	08a	25.9	55.3	7.1	4.7	2.4	1.2	0.0	-	85
	08b	19.3	47.9	14.3	5.9	2.5	0.0	4.2	-	119
	09a	11.4	62.2	15.4	4.3	0.8	0.0	4.3	-	254
	09b	14.0	47.4	14.0	4.4	2.6	0.0	13.2	-	114
	10a	6.3	62.0	14.6	3.8	1.9	0.0	8.2	-	158
	10b	8.5	42.6	10.6	7.1	5.7	0.0	21.3	-	141
	11a	10.1	50.5	7.1	2.0	3.0	1.0	26.3	-	99
	11b	10.9	47.6	6.9	1.4	0.0	0.0	28.6	-	147
	12a	9.9	43.8	7.4	1.9	0.6	0.0	34.0	-	162
	12b	2.9	63.2	8.8	1.5	0.0	0.0	16.2	-	68
	13a	8.9	34.4	5.6	2.2	3.3	0.0	42.2	-	90
	13b	11.1	31.3	12.1	5.1	1.0	0.0	34.3	-	99
	14a	46.2	31.5	3.5	2.1	0.0	0.0	9.8	-	143
	14b	17.1	44.4	11.1	2.6	1.7	0.0	17.1	-	117
	15a	6.1	72.7	10.6	3.0	0.0	0.0	6.1	-	66
	15b	2.4	68.3	8.1	0.0	0.8	0.0	17.1	-	123
	16a	1.3	58.2	5.2	0.7	0.0	0.0	32.7	-	153
	16b	34.5	38.1	10.6	1.8	1.8	0.0	9.7	-	113
	17a	4.8	61.9	4.8	0.0	0.0	0.0	25.0	-	84
	17b	22.5	33.3	13.3	4.2	2.5	0.0	20.8	-	120
	18a	3.9	53.9	2.6	1.3	0.0	0.0	33.8	-	154
	18b	4.0	52.4	3.2	0.0	0.0	0.0	33.9	-	124
	19a	8.1	33.1	2.4	0.0	34.7	0.0	20.2	-	124
	19b	68.4	24.5	0.0	1.0	0.0	0.0	2.1	-	98
	20a	12.0	44.0	2.0	4.0	0.0	16.0	14.0	-	50
	20b	1.4	59.3	0.7	0.0	0.7	0.0	35.7	-	140
	21a	1.0	50.5	1.0	1.9	1.0	0.0	42.9	1.0	105
	21b	3.3	58.2	-	-	-	-	38.5	-	122
	22a	**2.8**	**60.4**	**1.9**	**0.9**	**-**	**-**	**33.0**	**-**	**106**

Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	Meth[a]	OTC/ PRE[b]	Total (N)
GT	04b	7.3	54.7	19.1	4.7	5.1	1.2	0.0	-	590
	05a	9.3	57.7	14.0	3.4	7.7	1.3	0.0	-	714
	05b	10.6	62.8	4.8	4.5	6.8	0.7	0.2	-	575
	06a	13.3	57.6	4.6	6.0	6.0	1.0	0.6	-	715
	06b	12.1	62.2	2.3	3.8	9.3	0.4	0.1	-	753
	07a	11.8	61.0	3.0	5.5	10.3	0.4	0.0	-	670
	07b	11.7	61.3	2.4	5.9	10.2	0.0	0.3	-	591
	08a	10.0	65.7	2.4	4.7	10.2	0. 4	0.2	-	531
	08b	14.0	56.6	4.5	3.3	6.3	0.2	0.5	-	606
	09a	26.5	48.4	3.4	4.0	7.1	0.6	1.9	-	645
	09b	14.0	64.3	3.0	2.2	10.7	0.2	0.5	-	599
	10a	13.2	63.2	5.1	1.4	10.1	0.3	0.8	-	642
	10b	10.0	61.7	2.4	1.9	13.8	0.5	1.0	-	621
	11a	9.7	62.5	2.0	2.3	14.4	0.2	1.3	-	610
	11b	8.5	62.3	2.1	2.4	11.6	0.2	0.9	-	576
	12a	6.4	69.2	0.6	1.3	10.7	0.6	3.1	-	702
	12b	5.1	54.9	0.6	0.7	5.9	0.0	1.3	-	862
	13a	7.8	74.6	1.2	0.7	5.9	0.3	1.2	-	1002
	13b	6.2	68.8	2.1	0.9	7.9	0.2	1.4	-	583
	14a	4.4	77.0	1.1	0.7	4.5	0.1	2.1	-	910
	14b	19.2	48.3	1.0	2.4	7.5	0.3	3.7	-	783
	15a	2.9	74.1	0.9	0.5	5.9	0.1	2.6	-	1054
	15b	2.2	75.5	1.9	0.9	5.6	0.0	1.6	-	916
	16a	2.1	76.9	4.1	1.5	4.5	0.1	2.3	-	1124
	16b	6.8	75.9	1.7	0.2	3.8	0.0	3.3	-	767
	17a	2.8	82.0	1.7	0.2	3.2	0.2	2.8	-	1090
	17b	2.3	81.0	1.3	0.2	3.7	0.0	4.2	-	910
	18a	4.1	72.7	1.9	0.8	10.9	0.5	3.2	-	630
	18b	7.8	40.2	2.5	3.6	24.8	0.1	11.4	-	719
	19a	17.9	37.7	2.4	2.8	24.7	0.0	6.8	-	756
	19b	6.2	45.7	2.9	2.9	52.2	0.1	13.2	-	993
	20a	10.8	39.3	2.5	3.2	22.2	0.1	12.7	-	725
	20b	2.4	62.8	2.1	2.0	7.3	0.1	15.7	-	894
	21a	3.6	54.8	2.0	2.6	11.1	0.2	15.5	0.5	1300
	21b	4.1	49.0	1.5	0.6	16.1	-	21.7	0.3	3491
	22a	**2.6**	**65.0**	**1.4**	**0.7**	**1.8**	**-**	**20.2**	**0.2**	**1625**

Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	Meth[a]	OTC/ PRE[b]	Total (N)
NR[4]	04b	23.0	66.7	0.0	2.2	5.7	1.1	0.0	-	87
	05a	12.0	58.3	0.0	3.7	18.5	1.9	0.0	-	108
	05b	21.4	57.3	0.0	2.9	9.7	3.9	1.0	-	103
	06a	26.1	58.7	0.0	4.3	8.7	0.0	0.0	-	92
	06b	15.6	67.9	0.0	0.9	13.8	0.0	0.0	-	109
	07a	9.6	69.2	0.7	2.7	13.7	0.0	0.0	-	146
	07b*	17.3	72.7	0.0	2.7	5.5	0.0	0.9	-	110
	08a	11.8	79.5	0.8	0.8	5.5	0.0	0.0	-	127
	08b	12.0	64.1	0.0	1.7	13.7	0.0	0.0	-	117
	09a	18.5	63.1	0.0	0.8	7.7	1.5	0.0	-	130
	09b	18.2	61.8	0.9	1.8	12.7	0.0	0.0	-	110
	10a	7.7	65.0	0.0	0.0	19.6	0.0	0.0	-	143
	10b	14.9	62.0	1.7	1.7	13.2	0.0	0.0	-	121
	11a	17.9	46.2	0.0	0.7	29.7	0.0	0.0	-	145
	11b	13.5	47.4	0.6	1.3	16.7	0.0	4.5	-	156
	12a	3.9	70.7	1.7	1.7	16.0	0.0	0.6	-	181
	12b	15.8	42.6	0.5	1.0	12.0	0.0	0.0	-	209
	13a	20.2	52.0	1.8	1.4	12.6	0.0	0.0	-	277
	13b	12.9	70.5	0.4	0.0	9.1	0.0	1.7	-	241
	14a	5.7	78.9	0.4	0.7	10.8	0.0	0.4	-	279
	14b	11.9	70.6	0.0	0.3	13.7	0.0	0.0	-	293
	15a	8.4	72.6	1.5	1.1	8.4	0.0	0.4	-	274
	15b	6.8	73.1	0.3	0.9	8.6	0.0	0.6	-	324
	16a	10.8	58.3	3.1	1.4	19.3	0.0	0.0	-	295
	16b	18.0	66.9	0.8	0.0	10.5	0.0	0.4	-	239
	17a	10.0	76.2	0.3	1.1	9.2	0.0	0.0	-	380
	17b	18.0	44.4	0.5	4.1	27.8	0.0	0.2	-	410
	18a	4.9	74.6	0.6	0.8	11.3	0.0	1.1	-	362
	18b	6.5	72.1	0.9	0.0	13.3	0.0	1.2	-	341
	19a	16.3	39.4	1.9	5.7	22.7	0.0	6.8	-	264
	19b	14.5	38.7	0.6	4.4	32.6	0.0	4.4	-	344
	20a	11.8	43.8	3.6	5.9	19.5	0.6	8.9	-	169
	20b	2.8	71.8	0.6	0.6	14.7	0.0	6.2	-	177
	21a	5.6	75.1	0.6	0.0	8.5	0.0	4.0	0.6	177
	21b	11.4	55.6	0.5	7.6	17.2	-	3.8	-	367
	22a	**6.4**	**76.3**	**-**	**1.5**	**5.6**	**-**	**9.0**	**-**	**266**

Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	Meth[a]	OTC/ PRE[b]	Total (N)
CR[5]	06b	19.7	58.4	2.2	2.2	0.0	0.0	0.0	-	137
	07a	14.2	57.4	1.4	0.7	2.1	0.0	2.1	-	141
	07b	22.3	67.0	1.0	1.9	0.0	0.0	1.9	-	103
	08a	12.1	62.4	1.2	4.2	0.6	0.0	0.6	-	165
	08b	18.2	43.4	0.0	2.0	0.0	2.0	0.0	-	99
	09a	18.4	50.6	1.1	4.6	2.3	1.1	1.1	-	87
	09b	16.2	65.7	2.0	2.0	0.0	0.0	0.0	-	99
	10a	12.4	71.9	3.3	0.0	0.8	0.0	0.8	-	121
	10b	17.1	68.6	1.0	1.0	1.9	0.0	0.0	-	105
	11a	30.4	55.7	3.8	1.3	0.0	0.0	0.0	-	79
	11b	11.8	66.7	2.9	2.9	1.0	0.0	0.0	-	102
	12a	12.1	60.3	1.9	0.4	0.8	0.0	1.2	-	257
	12b	12.6	52.4	1.9	0.0	1.0	0.0	1.0	-	103
	13a	5.2	81.3	3.1	1.0	0.0	0.0	0.0	-	96
	13b	5.7	78.3	2.8	0.0	1.9	0.0	0.0	-	106
	14a	4.0	74.5	8.1	1.3	0.7	0.0	2.7	-	149
	14b	72.7	11.5	0.0	1.2	3.0	0.0	0.0	-	165
	15a	31.7	48.0	3.3	1.6	8.1	0.0	1.6	-	123
	15b	7.2	60.8	10.3	3.1	1.0	2.1	4.1	-	97
	16a	5.7	69.2	6.9	0.6	0.0	0.6	0.6	-	159
	16b	42.0	30.7	6.8	2.3	0.0	0.0	5.7	-	88
	17a	2.2	71.8	8.5	1.4	0.0	0.0	7.0	-	71
	17b	2.3	77.0	8.0	0.0	0.0	0.0	3.4	-	87
	18a	0.9	77.1	10.1	0.0	0.0	0.0	4.5	-	109
	18b	0.0	77.4	6.5	0.0	3.2	0.0	3.2	-	31
	19a	25.9	45.5	3.9	1.3	15.6	0.0	3.9	-	77
	19b	1.9	77.4	7.6	0.0	1.9	0.0	9.4	-	53
	20a	20.0	30.0	8.0	10.0	16.0	0.0	8.0	-	50
	20b	0.0	66.1	8.9	0.0	10.7	0.0	7.1	-	56
	21a	2.2	58.7	4.3	0.0	4.3	0.0	28.3	0.0	46
	21b	4.9	67.5	1.6	-	1.6	-	19.5	-	123
	22a	**4.0**	**70.0**	**4.0**	**-**	**2.0**	**-**	**17.0**	**-**	**100**

[1] Cape Town, Atlantis, Worcester; [2] Durban, South Coast, Pietermaritzburg; [3] Port Elizabeth and East London; [4] Mpumalanga & Limpopo; [5] Free State, North West, Northern Cape
*Excludes data from Limpopo for 2007b
[a]Methamphetamine; [b]Over-the-counter, prescription medication not reported for previous periods

Sources of payment: Overall, the 'State' provided the most substantial source of payment for treatment services (57%), remaining consistent with the 2021b review period. When considering source of payment by regions, the 'State' was also the most common funding source in the GT (70%), and the WC (68%), while 'Family/Friends' was the most common source of funding in the NR (42%). In the CR and EC 'Medical aid' was the main source of funding for treatment (43% and 32% respectively).

HIV testing: Between 35% (EC) and 73% (WC) of persons reported that they had been tested for HIV in the past 12 months. A considerable increase was noted for prior HIV testing rates for the WC from 49% in the previous period to 73% in the current period. Almost two-thirds (57%) of individuals admitted to treatment in the EC indicated that they had never been tested for HIV. Low testing rates remain of concern across South African, highlighting the need for interventions that encourage voluntary counselling and testing (VCT).

SUMMARIES BY SUBSTANCE OF USE

ALCOHOL

Reported rates for Alcohol admissions ranged between 11% (GT) and 35% (CR) (Table 2).

A notable rise was seen for Alcohol admissions in KZN, increasing from 12% in 2021b to 30% in 2022a (see Table 2). Likewise, admissions for Alcohol misuse increased by 7 percentage points in the CR from 28% in the previous period to 35% in the current period. A decline in rates was noted for the EC (5% decrease) and the NR (4% decrease).

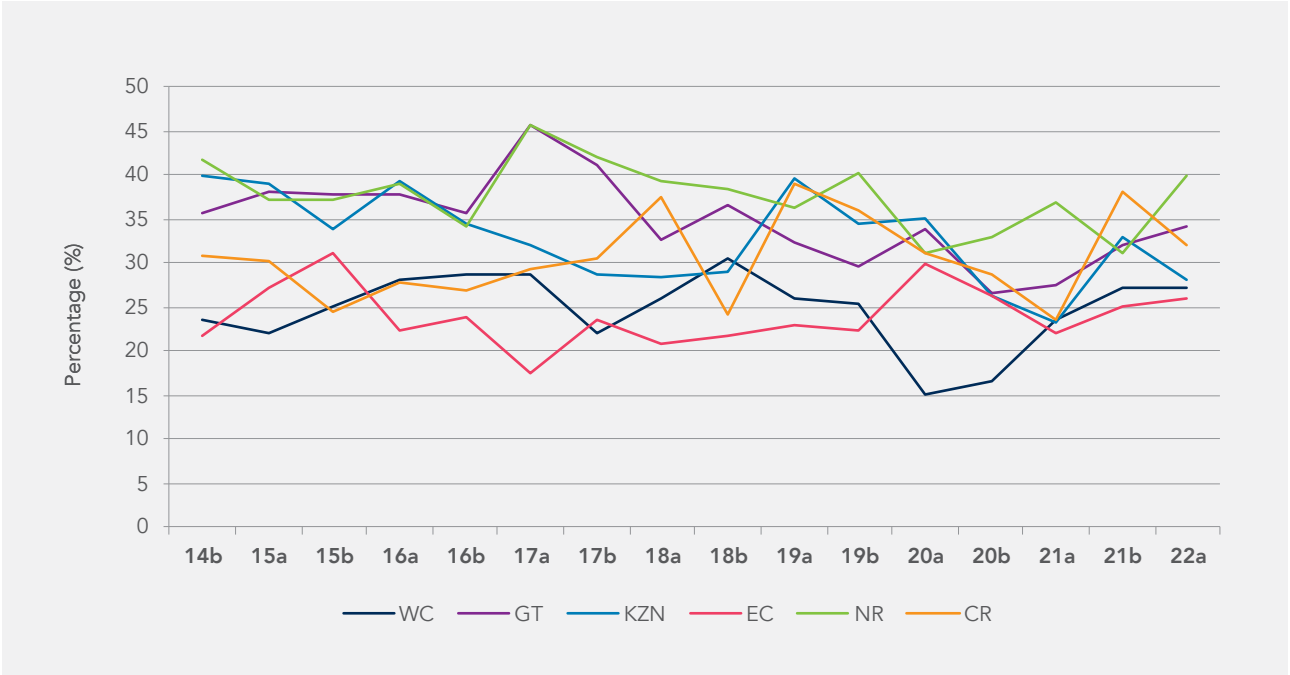
Nationally, the average age of persons admitted for Alcohol misuse was 38 years with ages ranging from 35 to 40 years (Table 4). Individuals presenting to treatment centres were more likely to be male (84%) as opposed to female (16%). The same trend was also seen across provinces.

CANNABIS (DAGGA) AND MANDRAX

Nationally, Cannabis was the most common primary substance of use among persons treated at specialist facilities (32%). Regionally, admissions for Cannabis use ranged from 26% (EC) to 40% (NR) (Figure 4). Cannabis-related admissions appreciated for most regions, most notably in the NR where rates increased from 31% in the previous review period to 40% in the current period.

Admissions for Cannabis/Mandrax admissions remained low, with rates ranging between <1% (NR) and 8% (EC) (Table 2). As a secondary substance of use, Cannabis/Mandrax was more common in the WC (33%) followed by the CR (20%). Across sites, persons admitted to specialist treatment centres with Cannabis/Mandrax as their secondary substance of use were more likely to be older (national mean age: 32 years) than those who had Cannabis as their primary substance of use (national mean age: 22 years) (Table 4). Across regions, Cannabis contributed almost three-quarters (70%) of admissions among individuals younger than 20 years.

FIGURE 4: PROPORTION OF PERSONS IN TREATMENT WITH CANNABIS AS THEIR PRIMARY SUBSTANCE OF USE (%)



Data from specialist treatment centres demonstrates that males continue to dominate treatment demand for Cannabis and Cannabis/Mandrax use in comparison to their female counterparts. Nationally, 12% of persons whose primary substance of use was Cannabis, and 16% whose substance was Cannabis/Mandrax were female. When comparisons were made across regions, rates for females who used Cannabis ranged between 9% (NR) and 18% (WC). Admission rates for Cannabis/Mandrax ranged from 6% (EC) to 50% (NR). In KZN only males were admitted for Cannabis/Mandrax use. Of particular note is the equal distribution of Cannabis/Mandrax-related admissions among males and females in the NR.

CRACK/COCAINE

The proportion of persons reporting Crack/Cocaine as their primary substance of use remained fairly stable across regions except the NR where the rate of admission declined from 12% in 2021b to 5% in 2022a (Table 2). Rates ranged from 2% in the WC to 10% in KZN. Between 2% (CR) and 22% (KZN) of all persons admitted to treatment reported using Crack/Cocaine as a primary and secondary substance of use (Table 6).

The national mean age of persons in treatment whose primary drug of use was Crack/Cocaine was 31 years with ages ranging from 23 to 33 years across regions. The CR accounted for the youngest individuals admitted for Crack/Cocaine misuse with an average age of 23 years compared to other regions (Table 4). The proportion of males reporting Crack/Cocaine as their primary substance of use were between 80% (NR) and 91 (WC); the CR only reported Crack/Cocaine use for males for this period. Rates for females ranged between 9% (WC) and 20% (NR). Among adolescents, KZN contributed the largest proportion of individuals who reported Crack/Cocaine as a primary substance of use (8%). Between 10% (NR) and 29% (GT and KZN) of Crack/Cocaine users had experienced prior treatment episodes. No prior admissions for the substance were reported in the CR.

TABLE 6: PRIMARY AND SECONDARY SUBSTANCE OF USE* (%): JAN-DEC 2022

Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	Meth[a]	OTC/ PRE[b]	Total (N)
WC[1]	05a	47.0	28.9	22.8	19.2	13.2	8.3	35.8	5.0	2469
	05b	39.0	32.9	16.0	18.2	16.3	7.0	44.7	3.8	2131
	06a	41.2	28.3	14.0	15.6	16.2	5.5	46.3	3.8	2660
	06b	41.5	33.0	13.4	12.4	12.5	3.7	51.9	4.9	2798
	07a	43.6	31.7	12.6	10.4	12.0	2.8	49.3	3.2	2864
	07b	41.2	33.0	14.7	10.0	14.6	2.3	44.3	3.6	3058
	08a	42.1	30.6	15.3	12.2	15.2	2.8	45.8	4.5	2637
	08b	38.6	32.5	15.2	11.4	14.9	1.9	44.2	3.5	2807
	09a	36.5	32.5	15.2	6.6	12.2	1.6	50.1	2.3	3667
	09b	40.1	32.2	18.4	5.4	13.4	1.1	46.6	2.2	2642
	10a	40.7	33.9	17.9	5.2	14.1	0.9	45.6	2.3	3134
	10b	40.4	36.7	18.5	4.8	12.8	0.9	46.9	2.2	2933
	11a	36.6	35.3	15.2	4.6	14.7	1.1	46.6	1.2	2927
	11b	36.4	37.0	19.6	5.9	19.1	1.6	52.1	1.6	2733
	12a	34.3	39.7	16.1	4.5	18.4	1.3	48.4	1.6	3912
	12b	34.5	43.5	20.4	3.8	17.9	1.2	49.7	1.1	3178
	13a	36.6	44.7	22.5	4.0	18.6	1.2	39.9	2.3	3717
	13b	34.1	45.6	20.6	3.8	14.3	0.9	46.6	2.0	3478
	14a	26.5	32.8	17.4	2.4	19.3	0.3	47.2	1.4	3510
	14b	29.9	33.7	16.6	2.6	13.4	0.0	45.5	1.1	3444
	15a	28.4	33.4	18.9	2.6	14.8	0.0	49.1	2.2	3524
	15b	30.3	34.4	21.1	2.2	11.2	0.0	47.9	1.9	2674
	16a	31.6	37.1	20.1	3.1	11.3	0.0	42.3	1.4	2977
	16b	29.5	37.4	19.7	3.0	13.4	0.0	41.8	1.6	2808
	17a	37.3	37.8	19.1	3.1	10.8	0.0	36.2	1.6	2902
	17b	35.9	29.9	23.7	3.7	14.4	0.4	43.5	2.7	2541
	18a	33.8	33.9	20.8	3.6	12.8	0.5	38.8	1.9	3182
	18b	33.1	39.0	20.7	4.4	11.8	0.1	38.7	2.4	2719
	19a	28.8	36.9	23.3	3.5	17.3	0.1	43.2	2.9	3013
	19b	30.9	35.5	23.0	5.0	14.9	0.3	43.1	3.3	2654
	20a	19.2	25.4	29.3	3.2	18.9	0.2	58.9	3.3	1323
	20b	26.5	41.5	27.1	5.9	14.7	0.0	55.3	3.3	1890
	21a	27.7	33.9	27.1	4.6	11.8	0.3	49.4	2.8	2433
	21b	33.9	47.7	38.8	5.4	10.9	0.3	57.0	4.2	2195
	22a	**28.4**	**35.6**	**22.1**	**3.9**	**12.7**	**0.3**	**46.2**	**1.7**	**3439**

Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	Meth[a]	OTC/ PRE[b]	Total (N)
KZN[2]	04b	74.5	46.7	32.5	19.4	1.2	11.2	0.0	3.2	689
	05a	74.0	52.9	17.6	17.1	2.5	6.2	0.0	3.1	945
	05b	82.2	45.0	11.8	14.2	2.2	6.9	0.2	3.9	846
	06a	71.1	33.8	3.7	13.2	2.7	2.7	0.4	11.8	485
	06b	71.8	37.6	8.1	21.2	11.1	4.2	0.4	5.6	921
	07a	65.0	34.1	5.4	20.0	18.2	4.0	0.0	4.3	1232
	07b	53.2	34.6	4.3	20.4	34.7	5.6	0.0	2.9	943
	08a	61	37	5	14	24	1.2	0.3	1.4	1531
	08b	60.0	31.8	4.6	14.6	25.5	1.9	0.1	1.0	1537
	09a	54.5	31.2	4.3	15.4	30.7	2.8	0.1	1.9	1575
	09b	64.4	38.9	4.7	14.9	19.3	3.3	0.4	1.3	1138
	10a	76.2	43.9	5.4	11.2	21.8	3.8	0.5	1.5	1009
	10b	75.2	47.8	9.6	14.9	10.6	3.7	0.3	2.5	669
	11a	81.3	46.1	6.9	17.4	14.7	3.3	0.4	1.4	720
	11b	82.9	42.9	7.7	16.1	8.0	3.4	0.9	1.3	610
	12a	78.4	44.6	7.4	15.5	8.1	4.9	0.4	3.3	569
	12b	70.6	55.1	8.1	12.4	9.2	4.2	0.6	2.2	813
	13a	70.9	54.8	5.6	13.1	8.9	4.7	0.9	2.2	934
	13b	69.0	54.1	10.7	11.1	13.8	7.2	1.5	1.6	610
	14a	57.6	48.3	6.2	4.1	1.4	11.2	1.0	1.7	484
	14b	46.5	51.3	7.9	10.0	8.8	0.0	0.1	2.7	929
	15a	53.5	50.2	9.5	6.9	5.5	1.2	0.5	1.5	1122
	15b	49.1	42.8	9.1	9.5	7.7	2.3	1.5	3.8	1171
	16a	44.8	51.8	6.8	8.3	15.9	2.6	1.4	3.1	1247
	16b	52.5	45.4	5.3	10.4	12.1	2.2	1.1	2.7	1177
	17a	49.3	50.9	6.7	10.8	11.0	1.9	1.5	1.9	1370
	17b	49.4	43.9	6.0	12.1	11.2	1.3	1.3	2.6	1400
	18a	41.4	48.2	5.6	15.7	30.3	1.5	2.3	4.5	1256
	18b	49.2	47.2	5.8	15.2	28.1	1.4	1.6	6.3	993
	19a	21.1	49.7	5.4	10.0	33.9	0.7	6.0	4.4	1291
	19b	21.7	45.8	5.1	12.5	29.8	0.5	12.1	5.9	980
	20a	20.7	48.1	5.3	13.5	27.3	1.1	12.0	5.5	565
	20b	46.7	41.5	4.2	26.9	22.3	1.1	1.7	8.7	726
	21a	42.5	39.8	5.4	26.3	19.9	1.0	3.6	7.3	723
	21b	33.9	63.6	3.9	26.3	39.1	0.7	20.9	7.2	1146
	22a	**39.5**	**41.8**	**4.6**	**21.6**	**23.2**	**0.2**	**4.2**	**7.6**	**1666**

Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	Meth[a]	OTC/ PRE[b]	Total (N)
EC[3]	04b	62.9	18.5	31.7	13.5	3.6	7.0	0.3	4.3	599
	05a	61.8	20.7	28.3	18.8	2.1	5.7	0.7	6.1	671
	05b	74.2	20.7	11.5	15.0	1.9	2.1	0.0	6.2	585
	06a	57.3	23.2	13.9	27.0	9.3	5.3	4.8	2.4	786
	06b	58.3	32.4	17.2	29.0	4.0	4.2	3.9	5.0	645
	07a	62.7	26.6	12.6	22.7	2.2	2.4	2.2	5.4	759
	07b	48.7	26.8	16.6	33.6	7.6	5.6	5.3	4.6	608
	08a	57.9	26.8	9.6	29.3	8.2	2.9	4.2	9.2	551
	08b	58.7	29.6	17.8	24.5	6.7	3.9	8.9	9.5	612
	09a	63.8	25.9	13.8	15.8	3.5	1.4	5.5	11.9	1206
	09b	61.3	26.5	10.8	14.8	6.5	2.6	9.6	22.1	648
	10a	54.0	28.2	14.6	11.9	3.9	1.0	9.5	15.2	877
	10b	54.2	28.7	13.0	14.7	6.1	1.1	14.1	12.0	707
	11a	56.8	25.6	10.8	10.9	4.0	1.4	16.3	13.6	723
	11b	46.5	24.8	12.3	8.6	3.6	0.8	22.7	13.5	721
	12a	49.8	26.9	11.6	11.7	1.9	1.8	23.3	14.4	793
	12b	56.3	41.1	19.3	29.4	6.1	1.2	22.8	5.7	316
	13a	43.3	22.7	12.1	11.6	2.4	2.2	23.3	21.6	587
	13b	46.3	23.5	7.8	7.8	2.7	1.9	20.9	19.4	527
	14a	36.5	26.1	8.6	8.8	1.8	0.3	21.0	20.6	613
	14a	41.9	27.1	12.2	7.5	1.5	0.0	21.9	15.4	663
	15a	42.7	34.9	18.5	9.9	4.4	0.0	25.9	5.5	363
	15b	32.5	43.1	18.3	5.5	2.8	0.0	34.4	1.7	471
	16a	42.5	36.1	14.4	7.6	3.3	0.0	29.5	9.6	638
	16b	46.6	35.4	16.9	4.7	2.2	0.0	22.3	8.6	537
	17a	56.7	28.5	14.4	9.6	3.7	0.0	24.5	4.0	425
	17b	45.0	33.4	16.7	6.6	2.5	0.0	33.6	5.2	515
	18a	45.8	32.7	13.9	5.4	2.3	0.3	35.2	6.8	517
	18b	48.7	32.7	13.1	5.1	2.9	0.4	35.3	5.3	450
	19a	30.5	45.5	9.7	4.6	20.0	0.0	23.4	7.2	475
	19b	47.6	40.8	11.0	4.5	2.1	0.0	32.7	6.3	336
	20a	25.6	47.4	5.6	10.2	19.1	0.0	24.7	6.0	215
	20b	32.8	45.1	21.1	9.4	2.2	0.0	48.2	2.9	448
	21a	63.5	40.4	17.4	8.8	2.3	0.0	49.7	2.1	386
	21b	47.3	60.9	19.7	8.5	0.8	0.7	56.6	3.0	487
	22a	**36.1**	**45.3**	**17.8**	**8.6**	**2.7**	**0.0**	**48.0**	**3.0**	**616**

Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	Meth[a]	OTC/ PRE[b]	Total (N)
GT	04b	60.2	30.6	15.5	19.2	8.3	5.2	0.3	7.2	2654
	05a	57.9	34.6	13.2	19.0	10.5	4.6	0.5	6.7	3030
	05b	62.1	34.7	8.9	20.2	11.3	3.9	0.6	7.7	2848
	06a	56.9	33.5	6.8	21.4	10.6	3.3	0.6	11.2	3119
	06b	58.1	32.7	4.3	23.6	13.2	2.9	0.7	6.0	3295
	07a	55.3	33.2	3.6	25.4	14.3	2.8	0.9	7.7	3251
	07b	54.7	30.9	3.7	26.4	13.8	3.3	1.0	6.6	3053
	08a	60.8	34.4	4.5	24.8	15.4	2.1	1.2	2.9	2768
	08b	64.8	35.0	4.2	19.4	12.2	2.7	0.9	7.9	3158
	09a	57.5	40.1	4.7	16.1	13.7	3.3	1.6	7.7	2822
	09b	58.0	38.4	3.6	12.3	21.2	1.2	1.1	5.4	2646
	10a	54.7	41.5	4.9	14.9	21.2	1.2	2.1	7.1	2684
	10b	53.6	43.2	3.9	17.6	23.9	2.2	2.6	5.5	2884
	11a	48.0	44.7	3.9	18.5	25.0	1.8	3.4	7.4	2972
	11b	47.7	44.4	3.8	15.9	21.4	2.6	3.9	8.5	2786
	12a	44.9	44.3	2.6	15.9	22.2	2.3	5.4	4.5	3198
	12b	41.7	49.9	4.6	12.6	19.7	1.3	5.2	5.2	3552
	13a	38.5	57.1	3.8	10.9	20.9	1.2	8.0	2.7	4026
	13b	34.8	56.9	4.6	13.5	18.6	1.5	6.6	3.1	3128
	14a	25.8	53.8	4.2	5.2	13.9	0.6	6.1	1.5	3479
	14b	28.1	47.2	2.5	7.8	15.6	0.6	5.9	1.8	3372
	15a	27.3	51.4	2.6	6.5	18.6	0.5	7.7	2.5	4285
	15b	26.1	48.9	3.6	6.6	17.6	0.7	6.3	2.1	3570
	16a	22.5	49.9	5.3	6.5	13.7	0.4	7.9	3.6	3989
	16b	27.6	51.3	3.5	4.6	15.8	0.3	9.1	2.2	2948
	17a	21.4	56.6	3.9	4.1	19.9	0.4	8.1	2.6	3870
	17b	22.1	54.5	4.1	4.7	18.1	0.3	9.5	3.0	3414
	18a	19.9	45.1	4.5	5.3	36.9	0.3	8.9	3.6	2734
	18b	18.9	50.0	4.9	6.9	30.3	0.2	12.2	1.7	2937
	19a	24.4	45.3	6.9	7.7	28.8	0.2	13.3	4.8	3148
	19b	17.6	46.9	7.4	8.0	39.9	0.4	15.6	2.1	4226
	20a	17.1	49.8	6.2	7.5	38.2	0.1	15.9	2.8	3279
	20b	11.9	43.5	9.5	7.3	40.1	0.4	22.7	2.5	5059
	21a	12.9	43.2	7.2	7.4	34.3	0.4	25.3	2.0	6226
	21b	22.6	62.9	12.5	9.0	29.0	0.6	39.9	3.0	9701
	22a	**16.2**	**49.7**	**7.6**	**5.8**	**22.7**	**0.1**	**33.9**	**1.8**	**10247**

Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	Meth[a]	OTC/ PRE[b]	Total (N)
NR[4]	04b	69.9	39.2	3.9	12.8	11.9	4.3	0.4	4.8	462
	05a	62.9	34.1	1.1	12.6	18.5	3.6	0.6	5.1	525
	05b	65.7	41.5	2.1	13.9	15.1	2.7	0.9	4.1	562
	06a	66.7	40.3	2.4	16.2	21.0	3.2	0.2	4.8	501
	06b	61.0	44.7	1.7	13.9	22.6	3.2	0.4	4.5	539
	07a	53.3	48.3	2.5	14.3	31.7	2.5	0.8	2.2	600
	07b	52.7	48.6	0.5	15.4	22.8	2.9	0.3	3.6	605
	08a	45.1	61.9	1.7	12.1	21.9	1.2	0.3	3.0	667
	08b	41.2	61.2	1.0	11.5	19.2	1.2	0.3	4.2	729
	09a	45.7	57.9	0.9	10.5	17.5	2.9	0.7	2.3	809
	09b	47.7	56.4	0.6	10.4	25.6	2.1	0.2	2.3	652
	10a	43.9	57.7	1.0	10.8	28.1	1.6	0.0	2.5	762
	10b	41.7	61.9	0.7	11.9	24.9	0.9	0.6	2.4	669
	11a	40.1	66.9	0.4	8.4	34.3	0.9	0.7	0.7	693
	11b	35.1	64.7	1.5	13.6	29.9	1.7	3.5	3.4	892
	12a	44.1	59.8	2.6	13.6	25.0	2.1	3.8	2.9	655
	12b	35.9	59.2	1.5	9.8	25.8	2.4	2.2	2.4	818
	13a	31.2	68.5	1.8	6.5	29.5	0.9	1.2	2.9	941
	13b	31.2	71.9	0.6	8.9	35.5	1.0	2.6	1.4	959
	14a	22.4	56.6	1.2	5.2	24.7	0.7	0.8	0.9	1004
	14b	22.7	45.9	0.4	3.3	27.4	0.0	0.7	1.1	1134
	15a	21.6	42.8	1.6	5.8	31.1	0.0	0.9	0.2	1076
	15b	20.0	40.2	4.4	4.4	28.7	0.0	1.2	1.4	1247
	16a	23.4	46.2	4.8	6.1	26.5	0.0	1.3	0.9	1026
	16b	23.5	39.1	1.4	4.3	36.9	0.0	1.6	1.5	929
	17a	33.4	51.2	1.3	6.6	31.2	0.0	0.9	1.2	1122
	17b	44.7	48.1	0.8	6.4	29.2	0.1	2.2	1.3	1269
	18a	39.3	49.9	3.1	6.1	25.1	0.1	3.8	2.1	1372
	18b	36.9	47.1	0.8	6.8	38.2	0.4	4.7	1.5	1171
	19a	23.5	48.1	6.2	8.2	24.9	0.5	13.8	2.9	1025
	19b	29.2	48.9	0.8	7.4	35.8	0.2	6.3	1.8	1423
	20a	23.9	44.5	5.7	10.8	32.3	0.2	13.9	4.2	768
	20b	30.5	51.1	1.1	6.5	45.1	0.0	8.4	1.8	1024
	21a	29.3	52.0	1.0	6.7	45.6	0.5	8.9	1.1	958
	21b	39.0	56.9	3.7	22.8	46.8	2.0	14.6	0.9	1675
	22a	**23.5**	**52.9**	**0.5**	**12.4**	**40.7**	**0.3**	**15.6**	**1.2**	**1824**

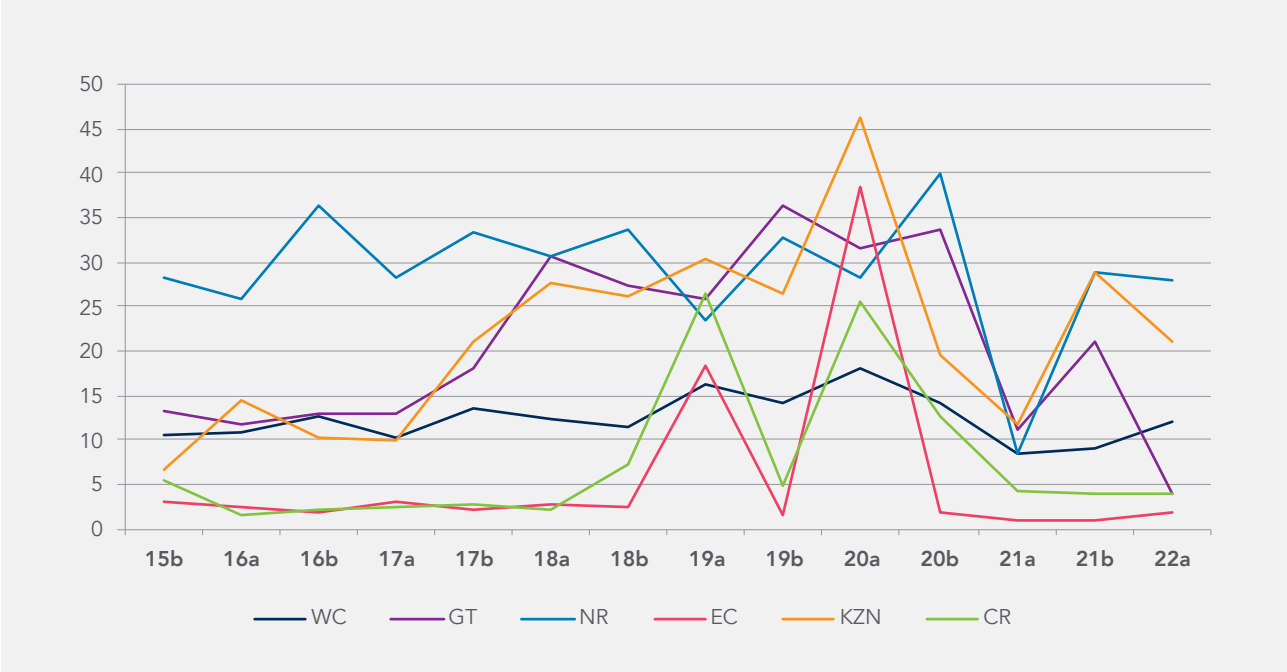
Site	Period	Alcohol	Cannabis	Cannabis/ Mandrax	Crack/ Cocaine	Heroin	Ecstasy	Meth[a]	OTC/ PRE[b]	Total (N)
CR[5]	07a	69.5	27.1	2.0	11.0	2.8	2.5	0.8	7.6	708
	07b	75.8	29.1	4.3	11.4	2.1	2.9	0.8	5.6	657
	08a	70.4	29	3.0	8.2	1.7	0.0	1.4	5.7	637
	08b	77.8	23.0	3.8	10.8	1.7	1.7	0.0	9.3	636
	09a	77.8	25.5	4.2	11.9	3.8	1.7	1.9	8.1	577
	09b	77.4	31.4	7.3	8.4	5.9	1.4	1.8	8.4	491
	10a	73.1	29.9	4.2	10.4	2.6	1.4	1.1	6.2	642
	10b	75.6	33.4	5.5	11.9	4.2	1.1	2.4	6.8	545
	11a	82.2	24.9	3.9	10.9	2.8	1.5	1.3	8.2	538
	11b	72.9	33.9	5.1	12.8	3.6	1.5	3.8	7.7	549
	12a	67.1	34.9	9.1	6.2	1.8	0.3	6.0	3.9	932
	12b	67.9	34.9	6.5	12.1	3.2	1.2	5.3	4.0	495
	13a	63.3	40.7	5.7	11.7	5.3	0.8	4.7	6.7	472
	13b	59.7	46.4	6.3	8.5	5.3	0.7	4.1	3.9	414
	14a	56.0	44.5	7.4	7.4	3.4	0.1	7.2	1.5	530
	14b	52.1	40.9	7.8	4.4	5.9	0.0	7.6	1.7	655
	15a	53.4	40.6	8.5	4.9	6.5	0.0	9.0	2.1	566
	15b	52.9	38.5	10.1	6.9	5.8	0.0	11.2	4.6	546
	16a	61.7	36.0	6.5	3.9	2.1	0.0	6.0	3.9	663
	16b	58.5	36.6	7.9	7.7	2.2	0.0	8.5	1.8	388
	17a	52.5	37.9	7.9	8.4	3.1	0.0	8.4	2.2	356
	17b	56.6	38.9	10.6	4.6	3.8	0.0	9.7	2.3	350
	18a	44.3	45.8	17.1	3.9	2.1	0.0	14.9	2.1	334
	18b	49.1	36.6	15.3	7.4	9.3	0.0	18.9	2.8	216
	19a	25.0	51.6	8.5	7.9	33.9	0.0	7.3	0.9	316
	19b	44.4	43.9	11.6	4.2	12.2	0.0	19.0	5.3	189
	20a	26.9	47.0	5.9	9.6	28.7	0.0	14.4	4.2	167
	20b	31.6	41.3	16.2	11.3	14.6	0.0	29.9	2.8	247
	21a	41.5	39.6	13.2	7.6	8.5	0.0	37.7	4.3	212
	21b	40.8	63.8	11.2	10.6	7.7	0.6	31.9	6.3	495
	22a	**39.2**	**44.3**	**12.7**	**2.2**	**5.1**	**0.3**	**28.7**	**1.9**	**441**

*Proportion of persons who reported these substances as primary and secondary substances of use
[1] Cape Town, Atlantis, Worcester; [2] Durban, South Coast, Pietermaritzburg; [3] Port Elizabeth and East London; [4] Mpumalanga & Limpopo; [5] Free State, North West, Northern Cape
[a]Methamphetamine; [b]Over-the-counter, prescription medicine

HEROIN/OPIATES

Nyaope and whoonga[2] have been incorporated into the Heroin/Opiate-related admission category to improve the accuracy of Heroin/Opiate surveillance. Nationally, Heroin/Opiates comprised 17% of all treatment admissions for this period, decreasing from 20% in the 2021b period. Between 2% (EC) and 28% (NR) of persons in specialist treatment centres reported Heroin/Opiates as their primary drug of use (Figure 5). Nationally, the mean age of persons who had Heroin/Opiates as their primary substance of use was 28 years, (age range: 26 - 37 years) (Table 4). Between 3% (EC) and 41% (NR) of persons attending specialist treatment centres reported Heroin/Opiates as a primary and secondary substance of use. The admission rate for Heroin/Opiate misuse decreased from 47% in the previous period to 41% in the current period. Although Heroin/Opiates was mostly smoked, across sites 63% (EC) and 49% (WC) of persons who had Heroin/Opiates as their primary substance of use injected the drug.

FIGURE 5: PROPORTION OF PERSONS IN TREATMENT WITH HEROIN AS THEIR PRIMARY SUBSTANCE OF USE (%)



When comparing genders, more males reported Heroin/Opiates as a primary substance of use than females, ranging between 78% (WC) and 96% (NR). Heroin/Opiate-related admissions were evenly distributed between males (50%) and females (50%) in the EC. In the WC the majority of individuals who use Heroin/Opiates reported that they had received prior treatment (81%). In the EC, an equal number of Heroin/Opiate-related admissions were first-time admissions (50%) and prior (repeat) admissions (50%). In the CR, there were no prior admissions for individuals who use Heroin/Opiates.

[2] 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.

OVER-THE-COUNTER AND PRESCRIPTION MEDICINES

Admission rates for OTC/PRE medicines as primary substance of use remained low, ranging between 1% and 3%. Most regions reported a proportion of 1% only (WC, EC, GT, NR, and CR), while KZN had the highest rate for OTC/PRE-medication admissions at 3% (Table 2). Nationally, admissions for males (51%) and females (49%) were almost similar. However, when admission rates were compared across regions, more females presented with OTC/PRE-medicine misuse at treatment facilities in the EC (80%), GT (63%), and the NR (62%).

Mostly older persons were admitted for OT/PRE-medicine misuse (national average age: 37 years) with ages ranging from 24 years (KZN) to 47 years (EC) (Table 4). OTC/PRE-medicine use for individuals younger than 20 years was only reported for GT (<1%), WC (1%), and KZN (9%).

OTC/PRE medicines as primary and secondary substances of use ranged between 1% (NR) to 8% (KZN), similar to previously reported rates (Table 5). Medicines used included benzodiazepines, analgesics, codeine products and sleeping pills. Nationally, a total of 138 (1%) of individuals were admitted for OTC/PRE-medication misuse for the 2022a reporting period, consistent with the 2021b period.

AMPHETAMINE-TYPE STIMULANTS (ECSTASY, METHAMPHETAMINE [TIK], METHCATHINONE [CAT]) AND LSD)

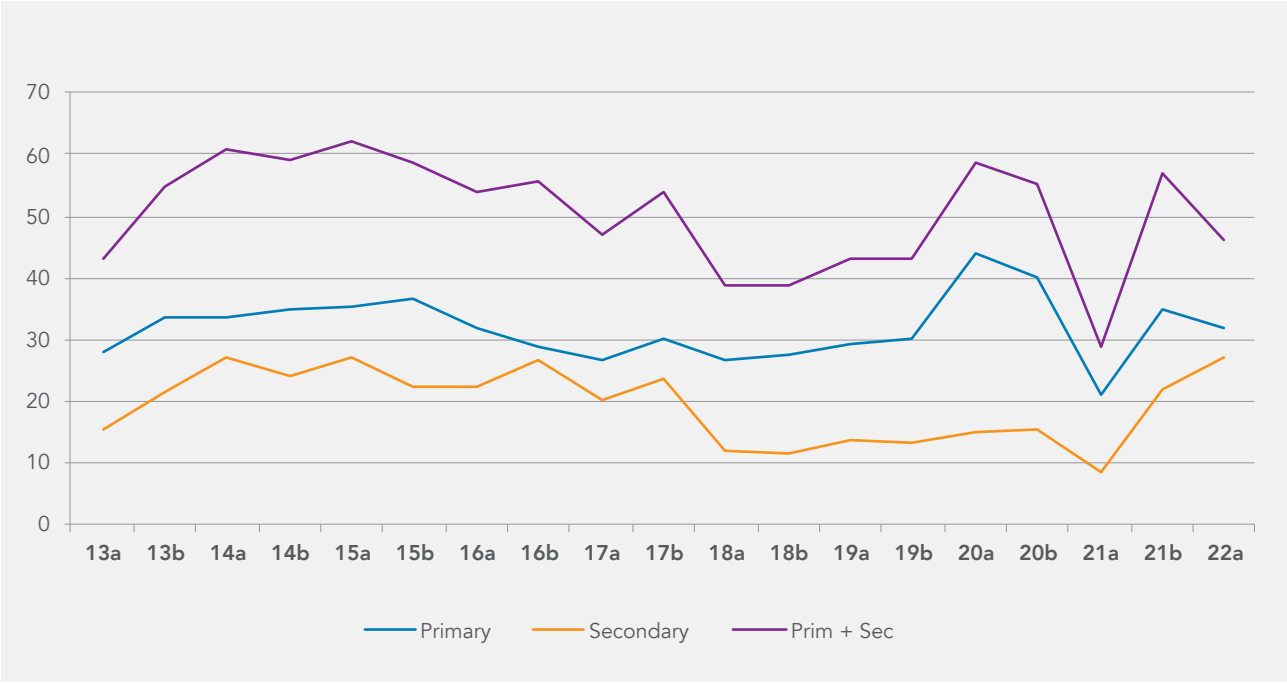
Consistent with previous periods, the proportion of persons admitted to specialist treatment services for misuse of Ecstasy remained very low across all regions (<1%). The EC and NR did not report any Ecstasy-related admissions for the 2022a period. Rates for Ecstasy as primary and secondary substance of use were also very low (<1%) across sites (Table 6). Ecstasy was not reported as a primary and secondary substance in the EC. In GT and the NR, the drug was used as a secondary substance only while in the CR it was reported as being used as a primary substance only.

The proportion of individuals reporting MA ('Tik') as their primary substance of use was the highest in the WC (32%), followed by the EC (31%), and GT (22%). These patterns varied slightly from the previous period with the WC replacing the EC as the region with the highest MA-related admissions. Admissions for treatment of MA use was lowest in KZN at 3% (Table 2).

The national average age of individuals reporting MA as their primary drug of use was 27 years, ranging between 24 and 33 years (Table 4). Similar to previous reporting periods, older users were mainly represented in the WC (mean age: 33 years). The EC and NR accounted for the youngest individuals admitted for MA use (mean age: 24 years respectively). Nationally, males (81%) represented the group with the highest rates for MA admissions compared to females (19%); this trend has been consistent with previous periods. Males were also in the majority for MA admissions regionally, ranging from 68% in the WC to 97% in the CR.

National rates for route of administration of MA showed that the majority of individuals smoked the substance (92%). When a comparison was made by region, a similar profile emerged with MA mostly being smoked with rates ranging from 62% (KZN) to 98% (WC). The highest proportion of individuals who use MA reported using the drug daily (63%), remaining stable from the last period. Daily use was followed by using the drug 2-6 days per week (28%). The highest proportions for MA use as a primary and secondary substance were found for the EC (48%), followed by the WC (46%), and GT (34%). An increase was noted when MA was used as a secondary substance while rates dropped when MA was used as a primary substance and both as a primary and secondary substance (Figure 6).

FIGURE 6: TREATMENT DEMAND TRENDS: WC METHAMPHETAMINE AS PRIMARY AND SECONDARY SUBSTANCE OF USE, WC (%)



For persons younger than 20 years, 16% reported MA as their primary substance of use, decreasing from 19% in the preceding review period. MA was reported as a secondary substance of use among 23% of persons younger than 20 years while 25% reported it as their primary and secondary substance of use. Consistent with the 21b period, the EC region accounted for the highest number of persons younger than 20 years (52%) reporting MA as a primary and secondary drug of use, followed by GT (32%), and the CR (31%). However, rates for GT and the CR decreased by 12% and 17% respectively from the previous to current review period. In KZN, MA was used as a secondary substance only (4%).

Nationally, 3% of individuals reported CAT/KHAT as their primary substance of use at the time of admission. GT reported the highest proportions for CAT/KHAT-related admissions (6%) compared to other regions. Rates for CAT/KHAT as primary and secondary drug of use varied from less than 1% in the WC to 10% in GT. In the WC, CAT/KHAT use (<1%) was reported as a primary substance only and as a secondary substance only in the EC (1%). CAT/KHAT use remained low across all regions.

OTHER SUBSTANCES/POLY-SUBSTANCE USE

Other substance combinations included inhalants. Admission rates for inhalant use remained low across regions at <1%; no inhalant use was reported for the WC. This is likely to be an underestimate given that inhalant misuse is common among those who find themselves destitute and therefore may not have easy access to care. In comparison to the other regions, only the NR had more females (67%) versus males (33%) reporting inhalant use at time of admission.

Poly-substance use was high with a national rate of 53%, remaining unchanged from the preceding period. By region, rates ranged between 40% (CR) and 66% (EC).

MENTAL HEALTH AND OTHER PHYSICAL COMORBIDITIES

Nationally, 18% (n=1 396) of individuals admitted to treatment presented with a dual diagnosis. Across regions, the largest proportion of persons in treatment presented with mental health problems (8%).

SECTION 2: DATA FROM COMMUNITY-BASED HARM REDUCTION SERVICES

A range of organisations are implementing community based harm reduction services for people who use drugs (PWUD), including people who inject drugs (PWID). Services include: HIV, STI, viral hepatitis 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. Interventions aimed at preventing and managing overdose are very limited, and community based naloxone distribution is not currently provided.

During the reporting period TB HIV Care operated in the Eastern Cape (Nelson Mandela Bay District), Gauteng (Tshwane), KwaZulu-Natal (eThekwini and uMgungundlovu Districts), Mpumalanga (Ehlanzeni district) and the Western Cape (Cape Metro). Advance Access and Delivery and the Urban Futures Centre at the Durban University of Technology ran the Bellhaven harm reduction centre in eThekwini District. The Department of Family Medicine at the University of Pretoria's Community Orientated Substance Use Programme (COSUP) operated in the City of Tshwane (Gauteng Province). Sediba Hope provided harm reduction services at two centres in Tshwane District. Anova Health Institute's Jab Smart Project operated in Gauteng (City of Johannesburg and in Sedibeng). Tintswalo Home Based Care also operated in Gauteng (City of Ekurhuleni).

The data below reflects service delivery data for reporting period January - June 2022.

EASTERN CAPE

In *Nelson Mandela* Bay 544 unique PWID accessed services, with 69 360 needles and syringes distributed and 103% returned. 185 PWID tested for HIV, among whom22 tested positive. A total of 21 people were on ART, with 2 PWID confirmed to be virally suppressed. 186 people were screened for tuberculosis (TB), with 16 being symptomatic, 5 diagnosed; 4 starting treatment and 1 with confirmed cure. No routine viral hepatitis testing was done. Opioid substitution therapy (OST) was not available. 115 human rights violations were reported, mostly involving the confiscation and destruction of injecting equipment (58%). No deaths among people who use drugs were reported during this period.

GAUTENG

In *Ekurhuleni* 369 unique PWID accessed the services, with 142 005 needles and syringes distributed and 72% returned. 214 PWID tested for HIV, among whom 6 tested positive and 6 people were confirmed on ART. A total of 4 people were confirmed to be virally suppressed. 214 PWID were screened for TB, with 1 being symptomatic, no TB was confirmed and no one was started on treatment. No routine viral hepatitis testing was done. OST was not available. 11 human rights violations were reported, mostly due the confiscation of injecting equipment (36%). No deaths among people who use drugs were reported during this period.

In *Johannesburg* 6 979 unique PWID accessed the services, with 485 430 needles and syringes distributed and 72% returned. 1965 PWID tested for HIV, among whom 375 tested positive and 277were confirmed to be on ART. 2 PWID were confirmed to be HIV virally suppressed. 2008 were screened for TB, with 5 being symptomatic, 0 diagnosed, 0 starting on TB treatment and 0 reporting cure. 84 people were screened for HCV antibodies with 78 being reactive. Resource limitations informed number of confirmatory tests that could be done, with 14 people with confirmed infection, among whom 14 people started HCV treatment. Of the 81 tested for HBV surface antigen (HBsAg), 6 were reactive. 230 PWID were on OST at the beginning of the period and 298 were on OST at the end of the period. 129 human rights violations were reported, the majority (88%) involving the confiscation of injecting equipment. 22 deaths were reported among people who use drugs, including 3 fatal drug-related overdoses.

In *Sedibeng* 1 501 unique PWID accessed the service with 56 235 needles and syringes distributed and 6% returned. 220 PWID tested for HIV, among whom104 tested positive. A total of 65 PWID were on ART. Data on HIV viral suppression was unavailable. 224 people who use drugs were screened for tuberculosis, with 1 being symptomatic, 0 infections confirmed and 0 received treatment. 10 PWID were screened for HCV, among who all had HCV antibodies and none had reactive HBsAg tests. No HCV infections were confirmed. 5 PWID were on OST at the beginning of the period and 35 at the end of the period. 100 human rights violations were reported, most (79%) linked to confiscation of injecting equipment and assault. No deaths among people who use drugs were reported during this period.

In *Tshwane* 10 467 unique PWID accessed the services, with 678 956 needles and syringes distributed; and 97% returned. 607 people who use drugs tested for HIV among whom 59 tested positive and 21 people were confirmed to be on ART. HIV viral suppression data was not available for this reporting period. 10 956 people who use drugs were screened for tuberculosis with 11 being symptomatic, with the number of people diagnosed and treatment unknown due to referrals to other facilities for testing. No viral hepatitis testing was done during this period. A total of 715 people were on OST at the beginning of the period and 738 at the end of the period. Data on human rights violations was not collected. 8 deaths were reported among people who use drugs, including one person living with TB who stopped treatment and one person living with HIV who stopped treatment.

KWAZULU-NATAL

In *eThekwini* 1 322 unique PWID accessed services, with 235 680 needles and syringes distributed and 81% returned. 385 tested for HIV, among whom 72 tested positive. A total of 41 people were started on ART. HIV viral load suppression was confirmed in 5 PWID. 463 people who use drugs were screened for tuberculosis, 70 were symptomatic, 6diagnosed, 6 started treatment. 2 reporting cure. 31 people were screened for HCV antibodies with 22 being reactive, among whom all had confirmed infection, and 10 started HCV treatment. Of the 31 PWID tested for HBV surface antigen (HBsAg), 2 were reactive. 110 PWID were on OST maintenance therapy at the beginning of the period and 138 at the end of the period. Data on the number of people on low-dose methadone was not available for this period. 145 human rights violations were reported, majority (62%) linked to the confiscation/destruction of needles. 1 death was reported among people who use drugs.

In *uMgungundlovu*, 413 unique PWID accessed the services, with 83 730 needles and syringes distributed and 80% returned. 152 PWID tested for HIV, among whom 15 tested positive. A total of 6 people were started on ART. 1 PWID was confirmed to be virally suppressed during this period.161 people who use drugs were screened for TB, with 10 being symptomatic, 0 diagnosed and 0 starting treatment. No routine viral hepatitis testing was done. OST was not available. 14 human rights violations were reported, majority (64%) linked to the confiscation of injecting equipment. No deaths among people who use drugs were reported during this period.

MPUMALANGA

In *Ehlanzeni* 680 unique PWID accessed the services, with 17 455 needles and syringes distributed and 75% returned. 125 tested for HIV, among whom 19 tested positive and 11 started on ART. Data on viral suppression was not available for this period. 125 people were screened for tuberculosis, with 5 being symptomatic, no TB was confirmed. No routine viral hepatitis testing was done. 35 people were on OST at the beginning of the reporting period and 45 people at the end. 3 human rights violations were reported; all linked to confiscation and destruction of injecting equipment. No deaths among people who use drugs were reported during this period.

WESTERN CAPE

In the *Cape Metro* 1 447 unique PWID accessed services, with 779 295 needles and syringes distributed and 83% returned. 452 PWID tested for HIV, among whom 26 tested positive. A total of 20 people were started on ART. 1 PWID was confirmed to be HIV viral suppressed. 479 PWID were screened for TB, with 18 being symptomatic, 1 diagnosed, 1 starting treatment and 1 person cured. 40 people were screened for HCV antibodies with 32 being reactive. 19 people had confirmed infection and 5 started HCV treatment. 40 PWID were screened for HBsAg and 3 were reactive. 145 people were on OST at the beginning of the period and 153 at the end. 25 human rights violations were reported, the majority (48%) linked to confiscated/ destroyed needles and syringes. 8 deaths were reported among people who use drugs.

TABLE 7: PERCENTAGE (%) PWID ACCESSING NEEDLE AND SYRINGE SERVICE AND BEHAVIOUR CHANGE INTERVENTION PROGRAM (JAN-JUN 2022)

Province	Health district	Male	Female	Trans	Median age (yrs)*
		%			
Eastern Cape	Nelson Mandela Bay (n=544)	72	28	-	-
Gauteng	City of Ekurhuleni (n=369)	90	10	-	-
	City of Johannesburg (n= 6 979)	95	5	-	-
	Sedibeng (n=1 501)	97	3	-	-
	City of Tshwane (n=10 467)	96	4	-	-
KwaZulu-Natal	eThekwini (n=1322)	88	11	-	-
	uMgungundlovu (n413)	92	8	-	-
Mpumalanga	Ehlanzeni (n=680)	94	6	-	-
Western Cape	Cape Metro (n= 1467)	82	18	-	-

TABLE 8: COMPARISON OF PROPORTION OF PEOPLE WHO USE DRUGS ACCESSING NEEDLE AND SYRINGE SERVICES (JAN-JUN 2022) WITH CENSUS DATA - BY DISTRICT[1]

Province	District		Black African	Indian	Coloured	White
			%			
Eastern Cape	Nelson Mandela Bay	Population [1]	61	1	24	14
		Accessed service	23	1	28	47
Gauteng	City of Ekurhuleni	Population [1]	79	3	2	16
		Accessed service	83	1	8	8
	City of Johannesburg	Population [1]	76	5	6	12
		Accessed service	97	0	1	2
	Sedibeng	Population [1]	74	1	1	24
		Accessed service	100	0	0	0
	City of Tshwane[2]	Population [1]	75	2	2	21
		Accessed service	84	1	11	4
KwaZulu-Natal	eThekwini	Population [1]	73	17	3	7
		Accessed service	87	4	4	5
	uMgungundlovu	Population [1]	90	3	1	6
		Accessed service	96	0	1	2
Mpumalanga	Ehlanzeni	Population [1]	92	1	<1	6
		Accessed service	-	-	-	-
Western Cape	Cape Metro	Population [1]	37	2	42	18
		Accessed service	3	0	88	9

[1] Statistics South Africa, 2011 Census. Where proportions do not add to 100% it is due to rounding, or participants selecting "Other" demographic group.
[2] Data not captured

TABLE 9: PEOPLE WITH OPIOID DEPENDENCE ON OPIOID SUBSTITUTION THERAPY, LOST TO FOLLOW-UP AND EXITED (JAN-JUN 2022) - BY DISTRICT

District	Non-injecting/ PWID	Number on OST at start of period	Number initiated on OST for first time	Number restarted	Number LTFU during period	Number exited during period	Number died during period	Number on OST at end of period
		n						
Nelson Mandela Bay	Non-injecting	-	-	-	-	-	-	-
	PWID	-	-	-	-	-	-	-
	Total	-	-	-	-	-	-	-
City of Ekurhuleni	Non-injecting	-	-	-	-	-	-	-
	PWID	-	-	-	-	-	-	-
	Total	-	-	-	-	-	-	-
City of Johannesburg	Non-injecting	0	0	0	0	0	0	0
	PWID	230	86	0	17	0	1	298
	Total	**230**	**86**	**0**	**17**	**0**	**1**	298
Sedibeng	Non-injecting	0	0	0	0	0	0	0
	PWID	5	39	0	7	0	2	35
	Total	**5**	**39**	**0**	**7**	**0**	**2**	35
City of Tshwane	Non-injecting	310	31	14	18	10	1	326
	PWID	405	54	6	30	16	7	412
	Total	**715**	**85**	**20**	**48**	**26**	**8**	738
eThekwini*	Non-injecting	0	0	0	0	0	0	0
	PWID	110	54	1	11	15	1	138
	Total	**110**	**54**	**1**	**11**	**15**	**1**	138
uMgungundlovu	Non-injecting	-	-	-	-	-	-	-
	PWID	-	-	-	-	-	-	-
	Total	-	-	-	-	-	-	-
Ehlanzeni	Non-injecting	0	0	0	0	0	0	0
	PWID	30	10	0	0	0	0	40
	Total	**30**	**10**	**0**	**0**	**0**	**0**	40
Cape Metro	Non-injecting	0	0	0	0	0	0	0
	PWID	145	50	9	50	0	1	153
	Total	**145**	**50**	**9**	**50**	**0**	**1**	153

* No data on clients on low dose methadone in eThekwini available

IMPLICATIONS FOR POLICY AND FUTURE RESEARCH

SELECTED IMPLICATIONS FOR POLICY/PRACTICE[3]

During the Phase 52 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:

- Ensure that there are initiatives to effectively prevent/delay drug initiation by children/adolescents (10-19 year old) in GT and MP.
- Initiate a range of interventions to prevent codeine misuse in GT, NR and KZN.
- Implement strategies to address gaps in harm reduction service uptake by females in GT.
- Address gaps in treatment services for females or uptake of substance abuse treatment services by females (women-focused treatment).
- Ensure that substance abuse treatment centres are adequately sensitive to suicide risk among their clients/patients and are equipped to respond if needed

SELECTED ISSUES TO MONITOR

Phase 52 of the SACENDU Project highlighted several conditions/factors that need to be carefully monitored over time:

- Increase in cannabis as a primary drug of use in GT and NR (especially among patients <20 years).
- Increase in cannabis treatment demand for individuals younger than 20 years in GT and WC.
- Decrease in age of initiation of cannabis use by young persons in WC and KZN.
- Increase in school referrals in NR and WC and in students/scholars coming to treatment.
- Decrease in referrals from social welfare services and self-referrals in NR.
- Decrease in HIV testing of patients over the past 12 months in NR.
- Increase in court referrals to treatment centres in the EC.
- Changes in the mean age of cannabis use initiation in the EC and KZN.
- Treatment demand related to codeine in the GT, NR, and KZN.

SELECTED TOPICS FOR FURTHER RESEARCH/INVESTIGATION

Phase 52 of the SACENDU Project highlighted several topics for further research/investigation:

- Are we missing older persons in GT, NR, WC, and EC who need substance abuse treatment but are not accessing it, or is their demand for treatment less?
- Should we be encouraging HIV testing among 15-19 year olds in GT?
- Are we adequately addressing mental health needs of people attending substance abuse treatment across sites?
- What are the factors affecting age of initiation of cannabis use among young persons?
- What are the factors affecting substance abuse treatment completion in the WC, especially around week 5?

LIMITATIONS

Phase 52 of the SACENDU Project highlighted a number of limitations:

- The SACENDU Project is a voluntary system that relies on data from specialist treatment centres. Data is not always submitted in a timely manner due to challenges faced by these centres such as staff constraints, staff turnover, etc.
- Due to the voluntary nature of participating in the SACENDU system, the number of treatment centres contributing data is not always consistent, impacting the comprehensiveness and coverage of the system.
- SACENDU receives admission episode data only. As the system does not receive patient-based data, information on prevalence of substance misuse cannot be generated.
- CAT (synthetic) and KHAT (plant-based) are both stimulant-type substances but fall in distinct substance categories. Due to these substance categories often being reported interchangeably, CAT and KHAT have been analysed and reported as a single class, which does not accurately represent the extent of use as discrete substance categories.


Saída

SACENDU

South African Community Epidemiology Network on Drug Use

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