

CENTRAL REGION SYMPOSIUM: TREATMENT DEMAND DATA

Ms Nancy Hornsby

Phase 58 | January – June 2025

31 October 2025, Protea Hotel, Bloemfontein



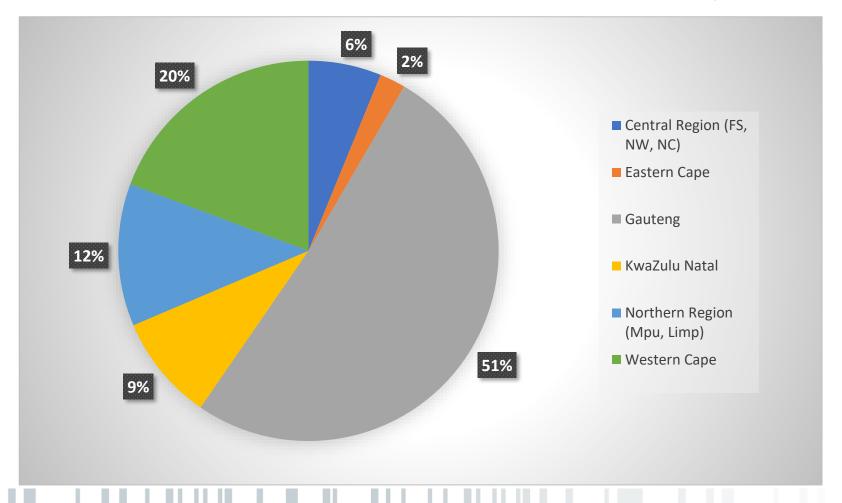
National overview





Treatment Demand Data • Service Quality Measures (SQM)

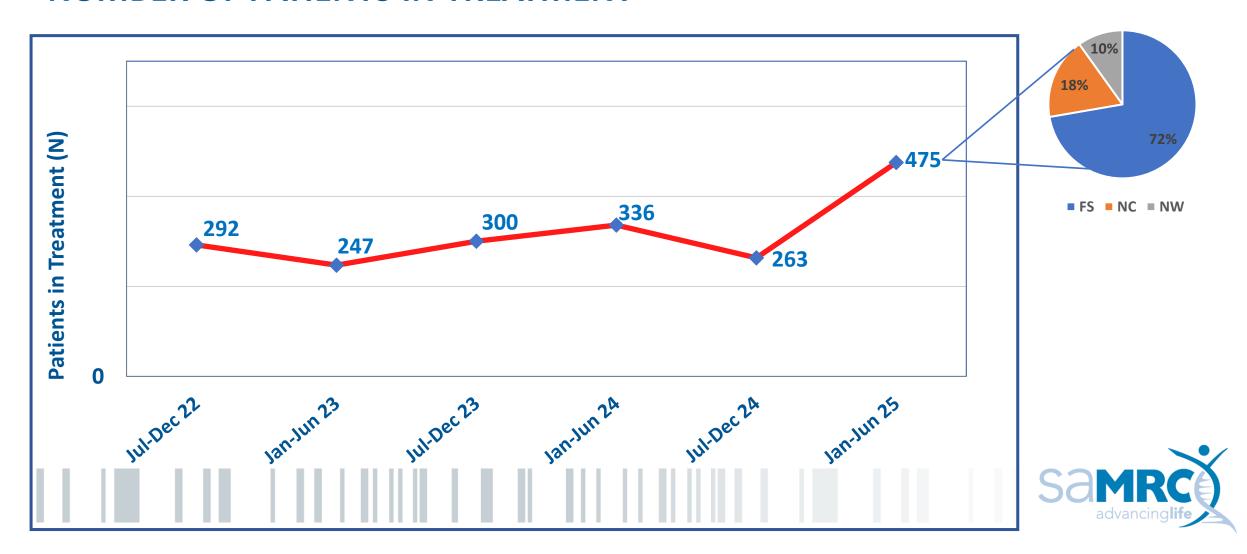
Community-Based Harm Reduction Services







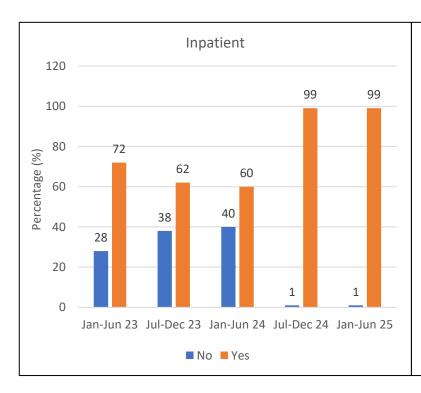
NUMBER OF PATIENTS IN TREATMENT

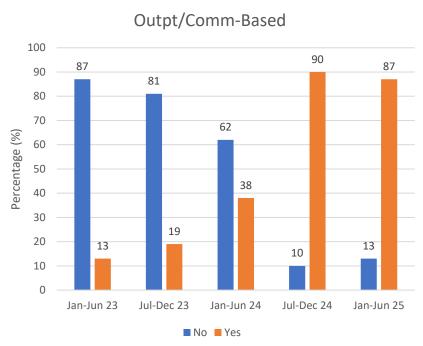


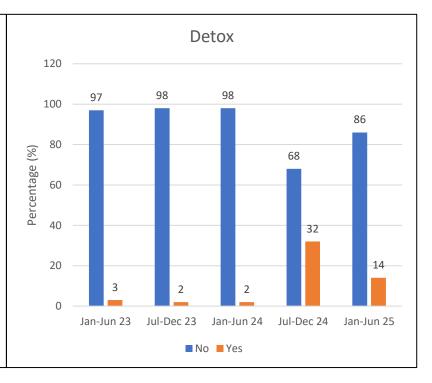
TYPE OF TREATMENT RECEIVED









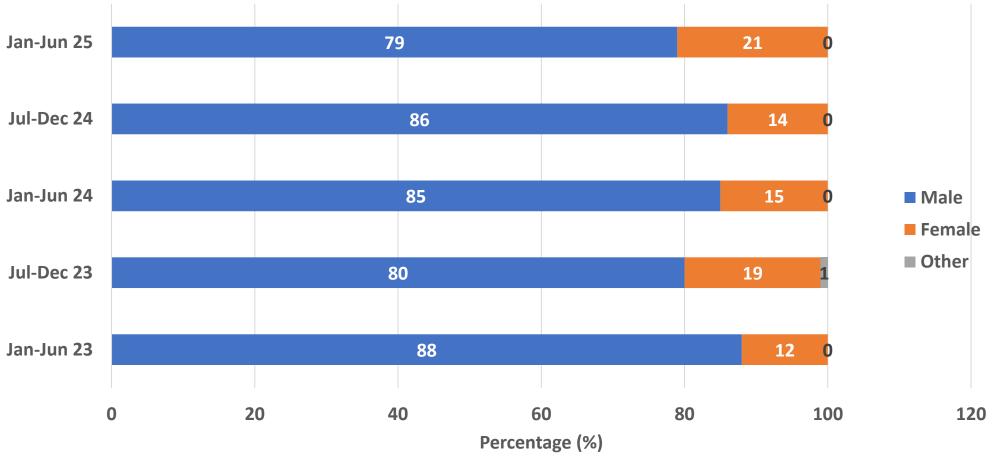




GENDER



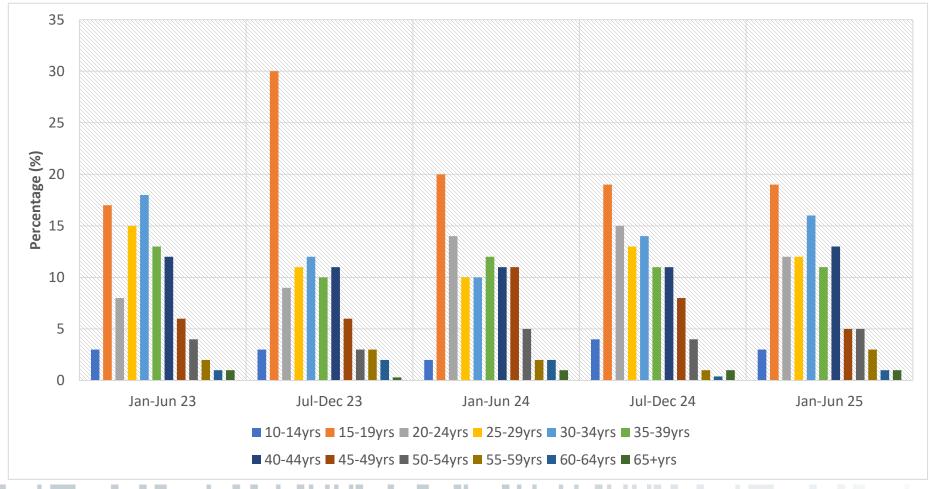
SACENDU SOUTH AFRICAN COMMUNITY EPIDEMIOLOGY NETWORK ON DRUG USE





AGE DISTRIBUTION









SACENDU SOUTH AFRICAN COMMUNITY EPIDEMIOLOGY NETWORK ON DRUG USE

Treatment Demand Data • Service Quality Measures (SQM)

Community-Based Harm Reduction Services

Jan-Jun 25		85			15	
Jul-Dec 24		88			13	
Jan-Jun 24		83			17	■Yes
						■ No
Jul-Dec 23		83			17	
Jan-Jun 23		84			16	
0	2!	5 5	0 7	75	100	0
		Percent	tage (%)			

FIRST TIME ADMISSIONS VS READMISSIONS

n
28
6
1
1
1

	In- patient (n)	Outpt/CB (n)	Detox (n)
1 time	51	7	1
2 times	7	2	-
3 times	1	-	1
4 times	1	-	1
6 times	1	-	-
Total	61	9	3

advancing **life**

READMISSION BY GENDER

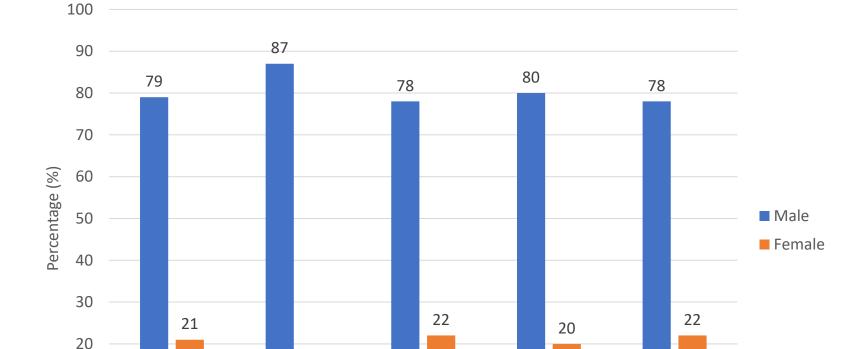
10

Jan-Jun 23





Treatment Demand Data • Service Quality Measures (SQM) • Community-Based Harm Reduction Services



Jan-Jun 24

Jul-Dec 24

Jan-Jun 25

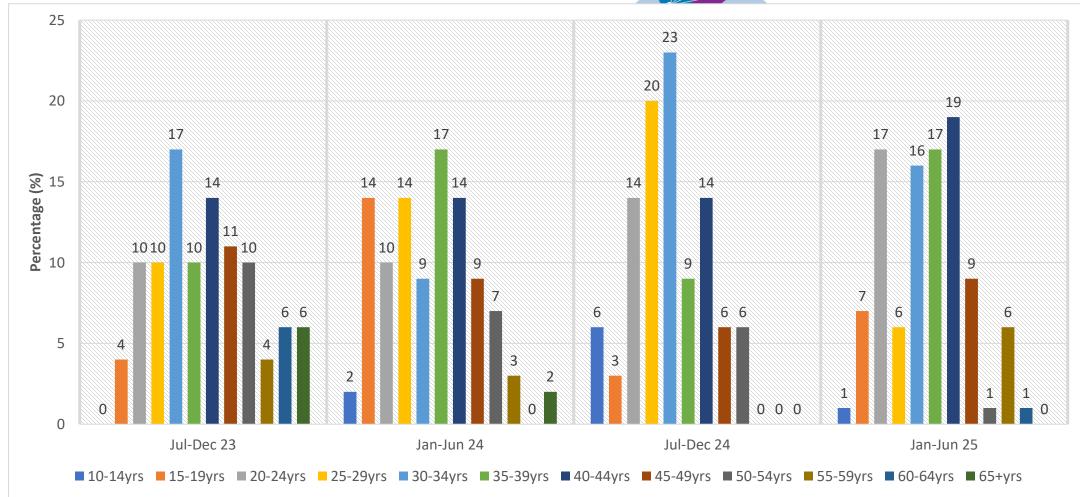
13

Jul-Dec 23



READMISSION BY AGE



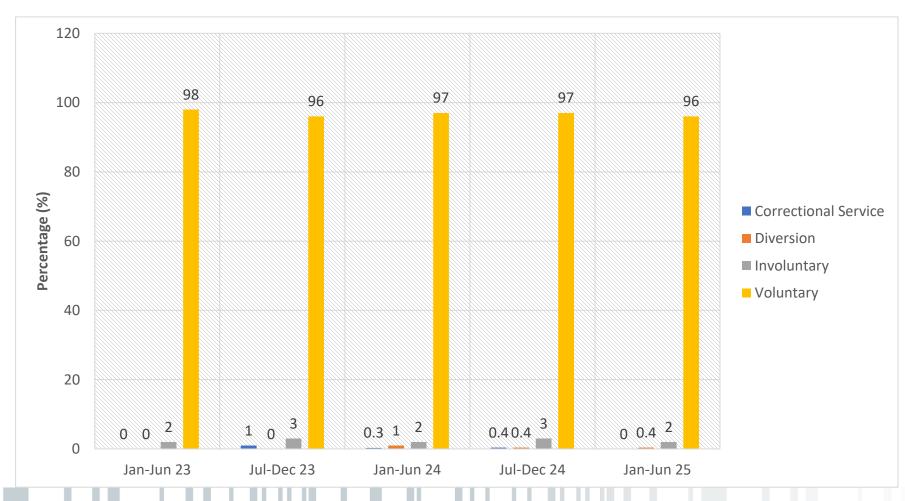




TYPE OF ADMISSION



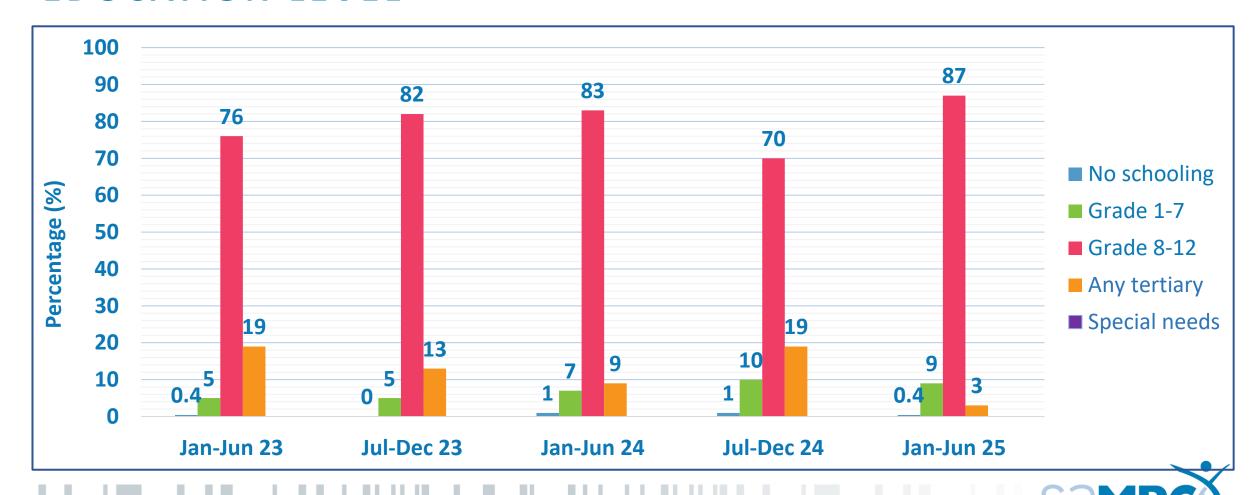
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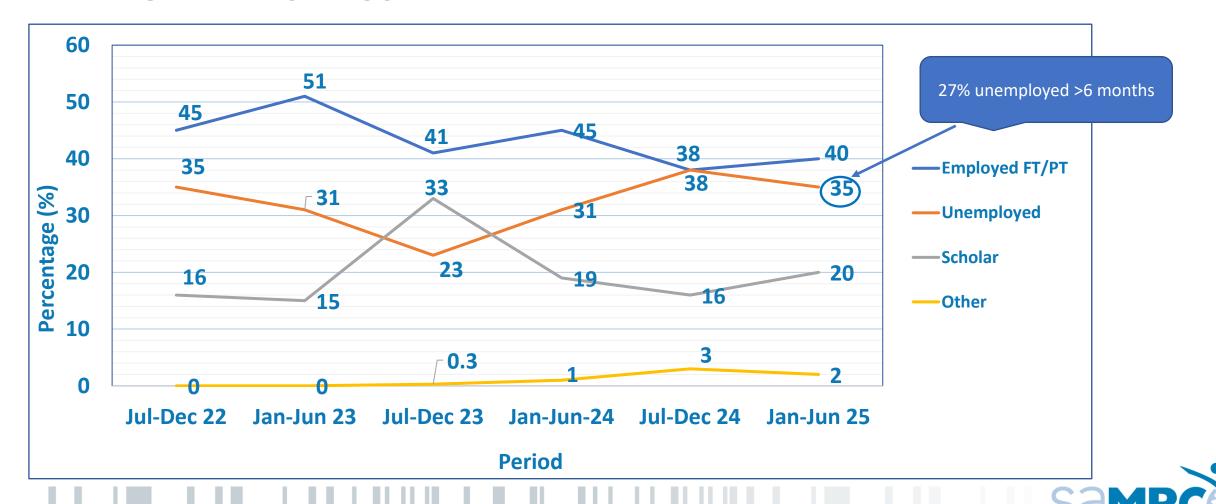


EDUCATION LEVEL



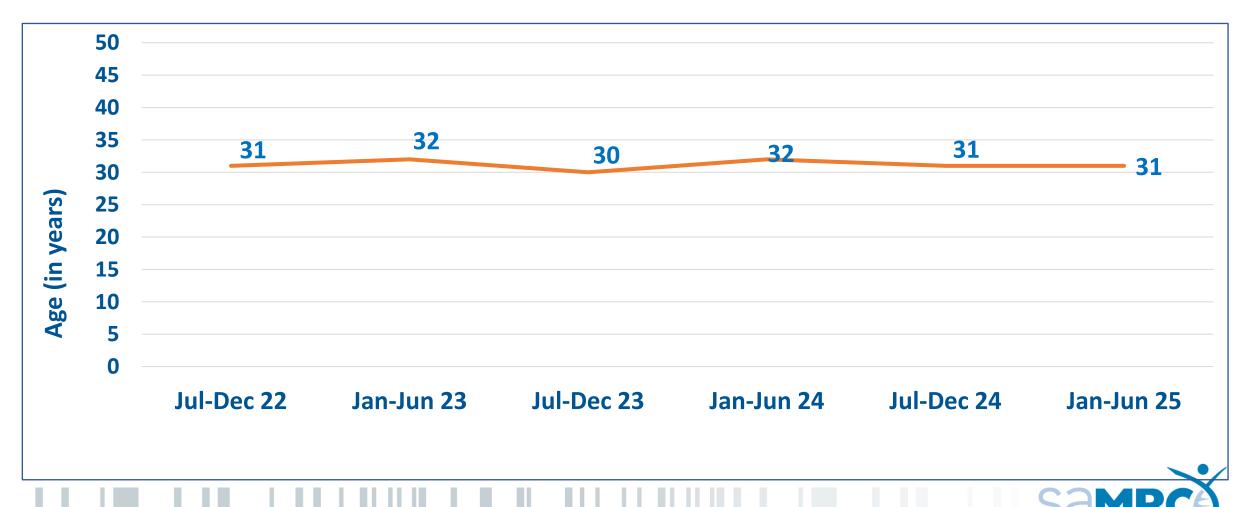


EMPLOYMENT STATUS





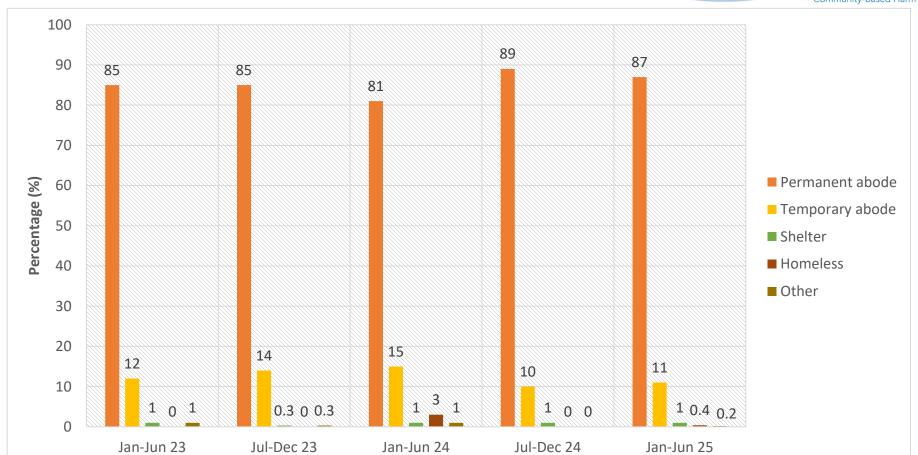
MEAN AGE



TYPE OF RESIDENCE



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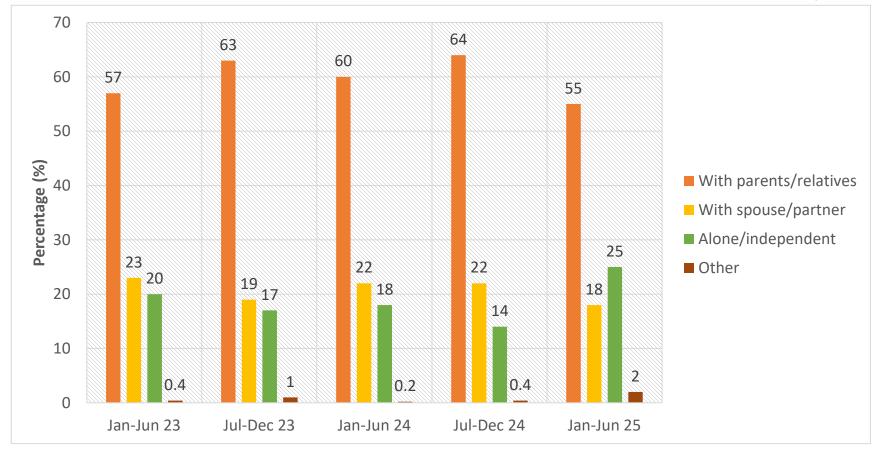


WHO CLIENT RESIDES WITH





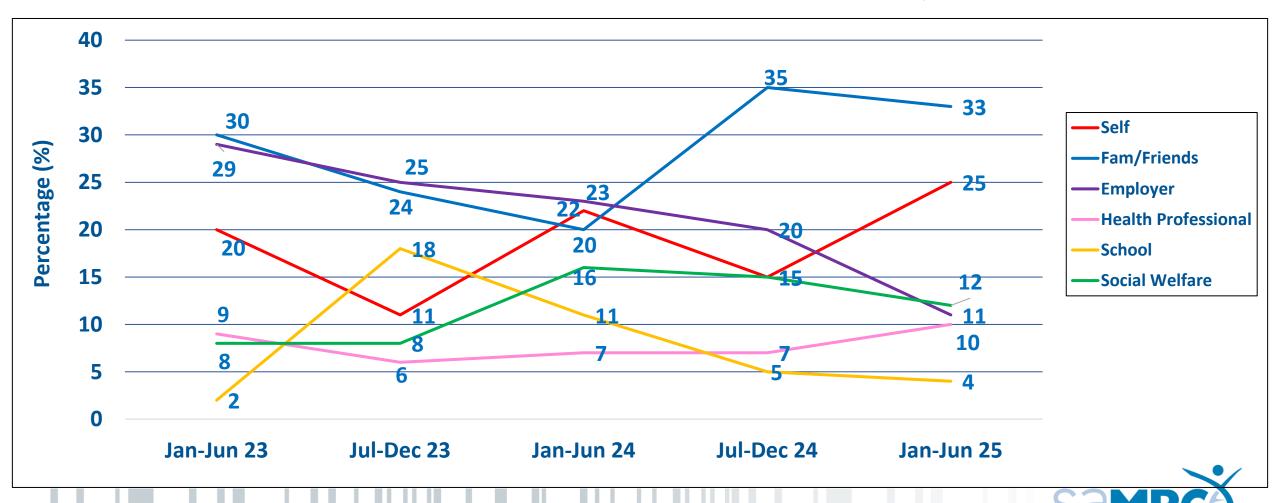








REFERRAL SOURCE OVER TIME

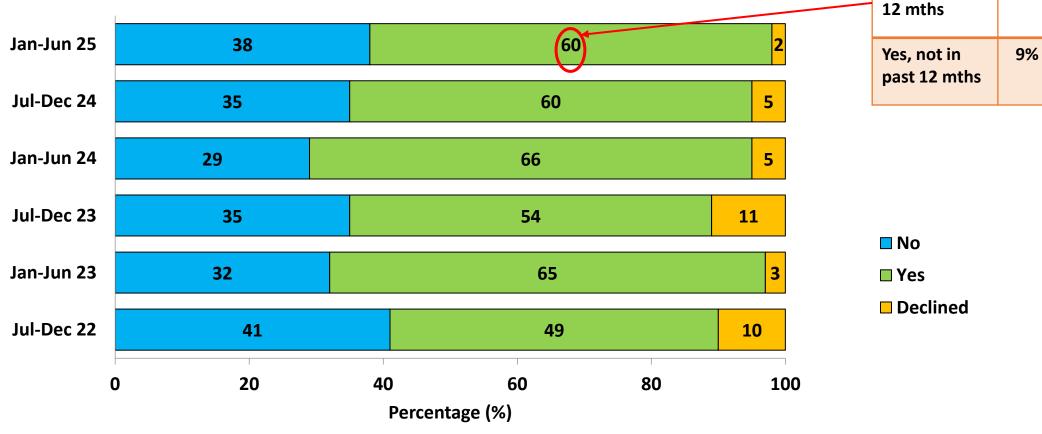




Yes, in past

51%

HIV TESTED OVER PTM

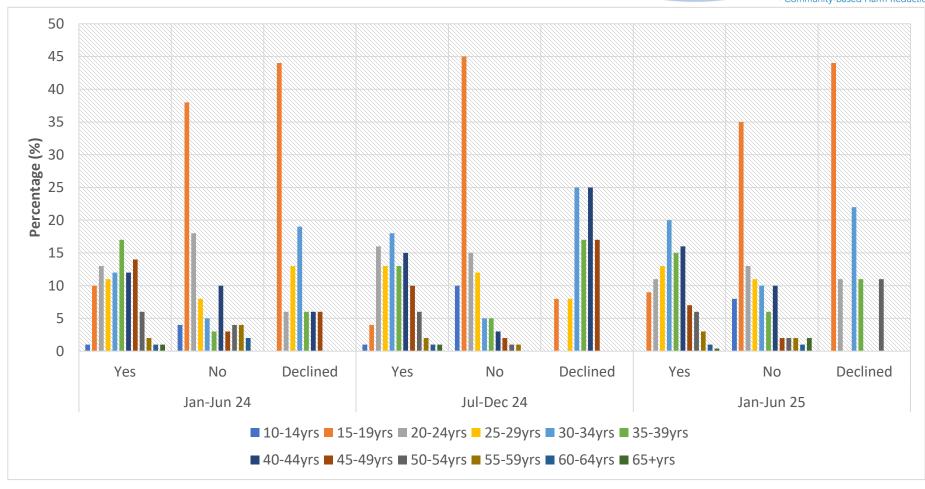




PRIOR HIV TEST BY AGE



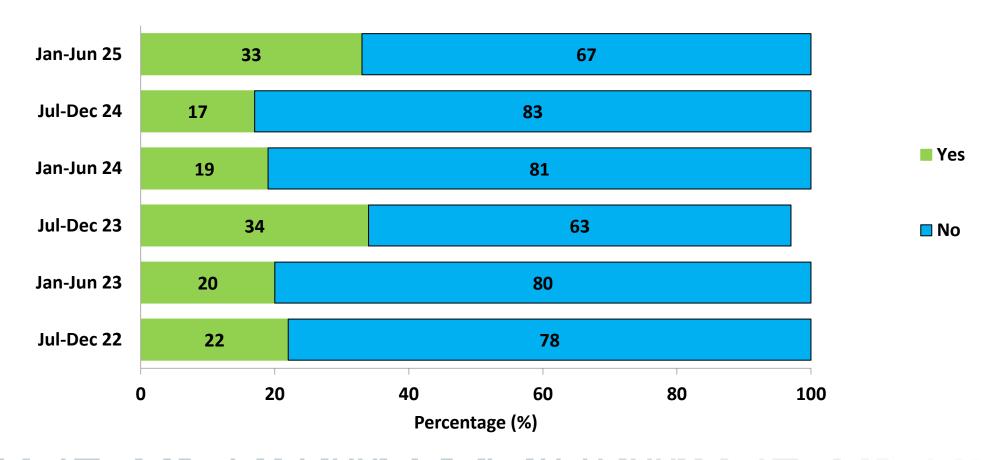








FUTURE HIV TESTING

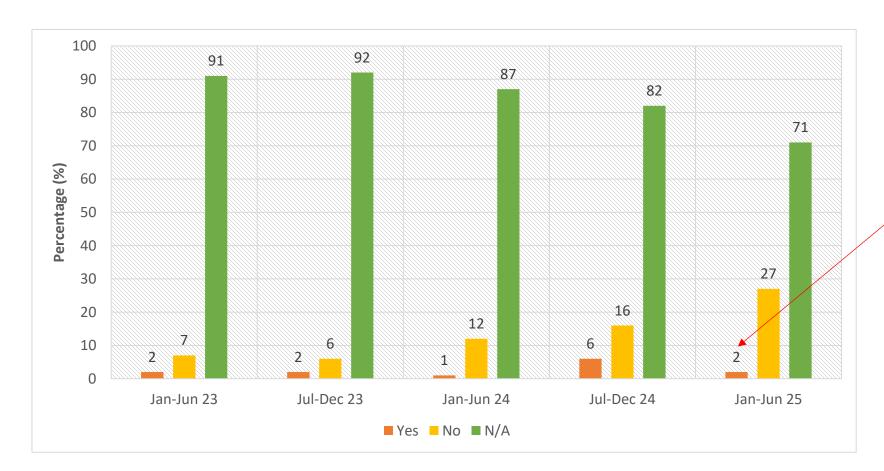




SUBSTANCE USE DURING PREGNANCY







Substances used	n
Alcohol	3
MA	2
Tobacco Prod	2
CAT/KHAT	1
Dagga	1
Other	1





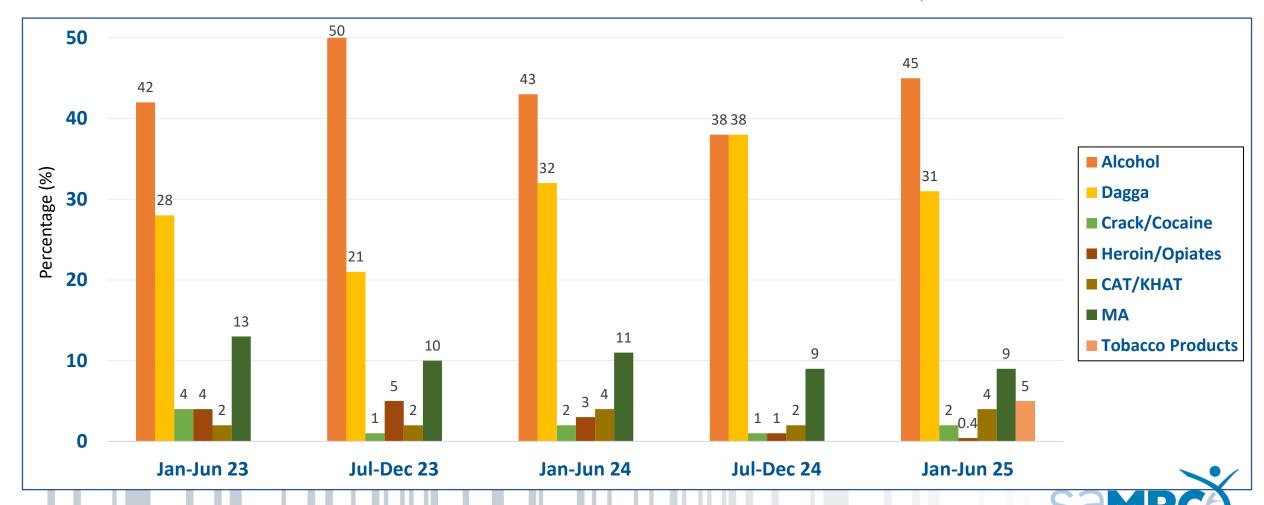
SUBSTANCES OF USE



SELECTED PRIMARY SUBSTANCES OF USE





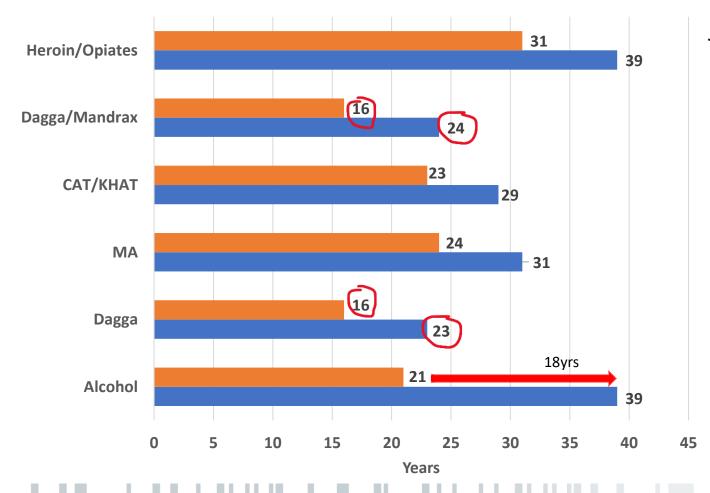


SELECTED PSOA BY MEAN AGE/MEAN AGE OF INITIATION





Treatment Demand Data • Service Quality Measures (SQM) • Community-Based Harm Reduction Services



Jan-Jun 25

■ Mean Age of Initiation

■ Mean Age



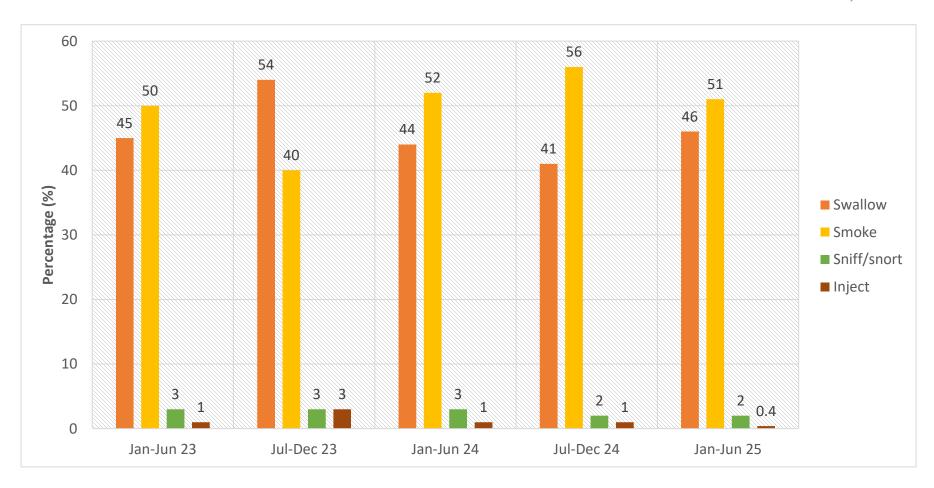
ROUTE OF ADMINISTRATION (ALL SUBSTANCES)





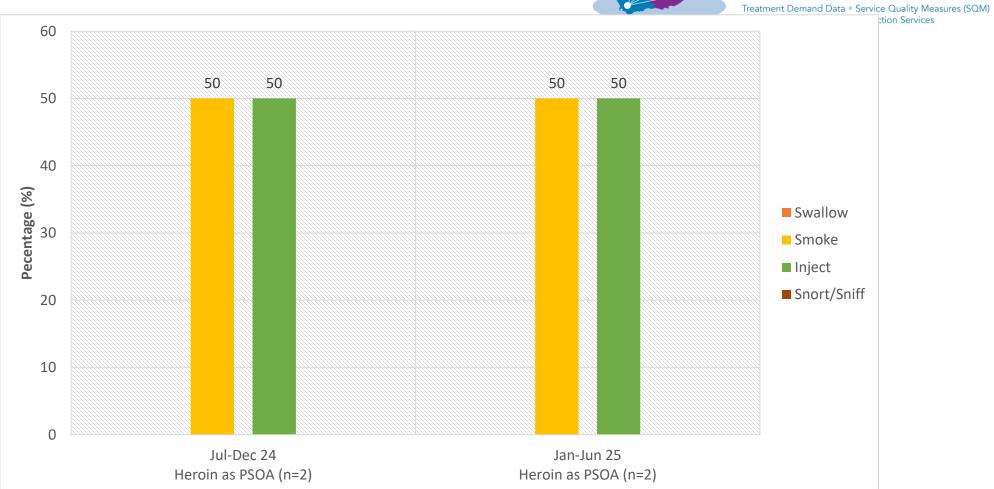
Treatment Demand Data • Service Quality Measures (SQM)

Community-Based Harm Reduction Services









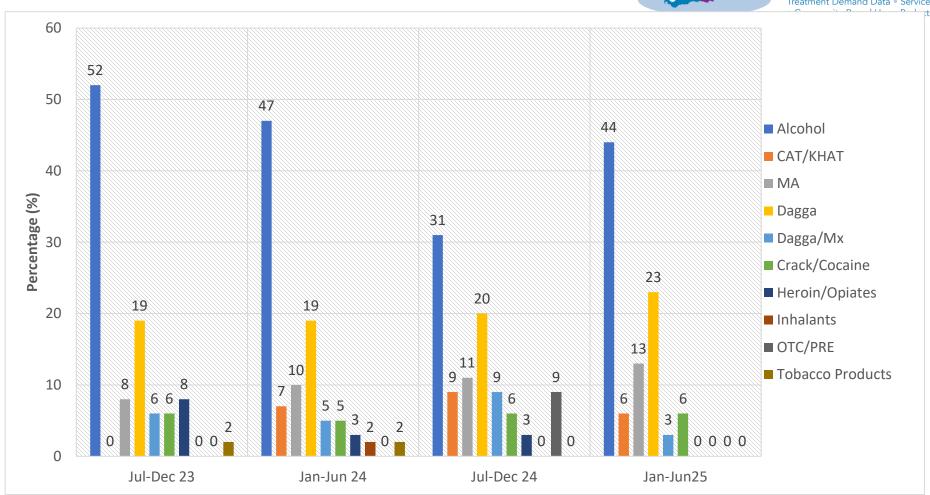


READMISSION BY SELECTED PRIMARY SUBSTANCE OF USE





Treatment Demand Data • Service Quality Measures (SQM)

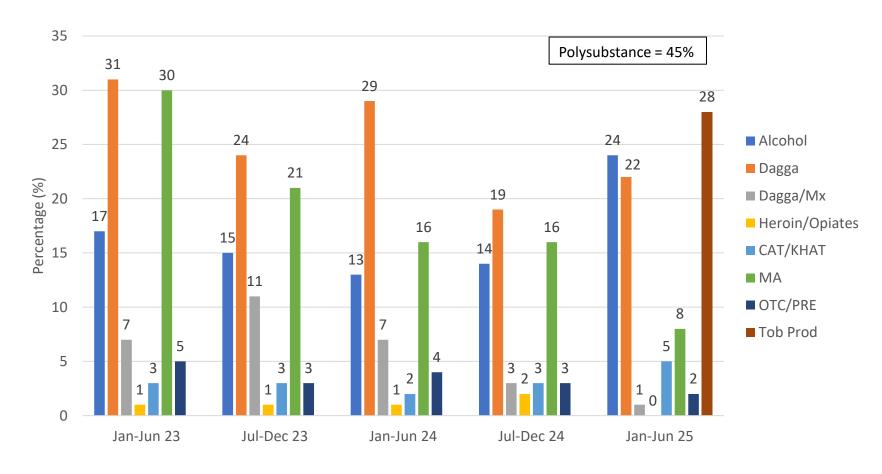




SELECTED SECONDARY SUBSTANCES OF USE





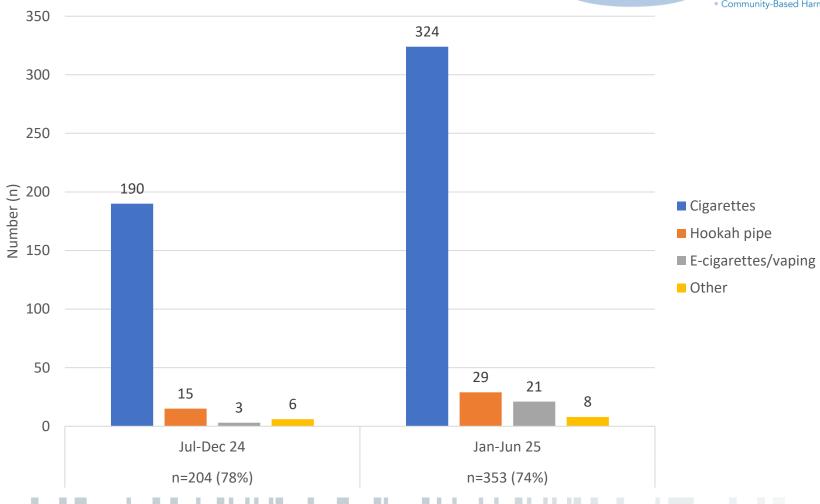




TOBACCO PRODUCTS





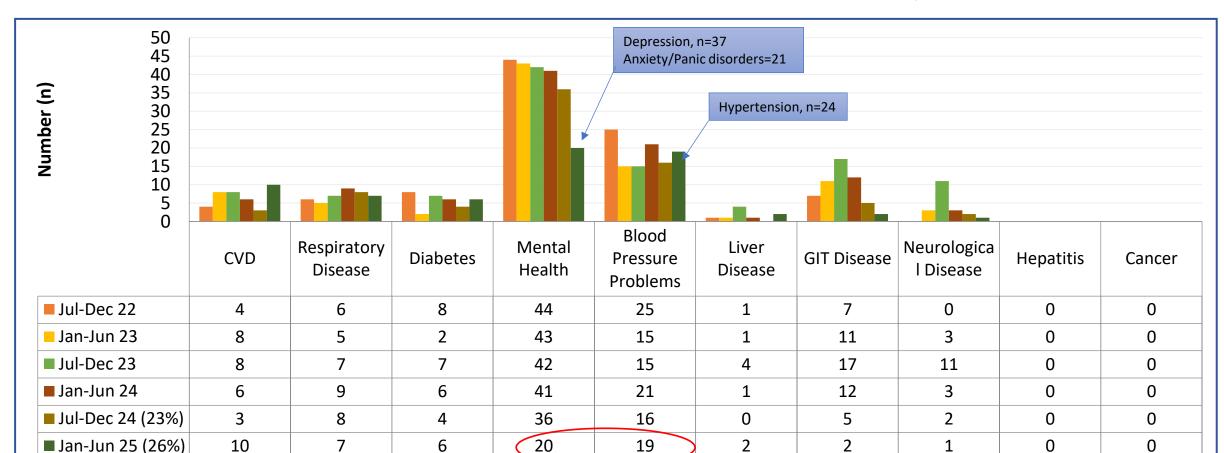




Number of NCDs



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NCD BY SELECTED PRIMARY SUBSTANCE







Profile of Individuals who use Codeine (n=17, 4%)	Number (n)	NIBIL
Gender:		NDU
Males: Females	8:9	easures (SQM)
Ages:		
15-19 years	4	
40-44 years	4	
Employment status:		
Employed (FT)	9	
Codeine product:		
First product: tablets, followed by syrup Second product: tablets, followed by syrup		
Type of codeine-containing medication:		
Adcodol; Stilpane→ Tablets		
Lenazine→ Syrup		



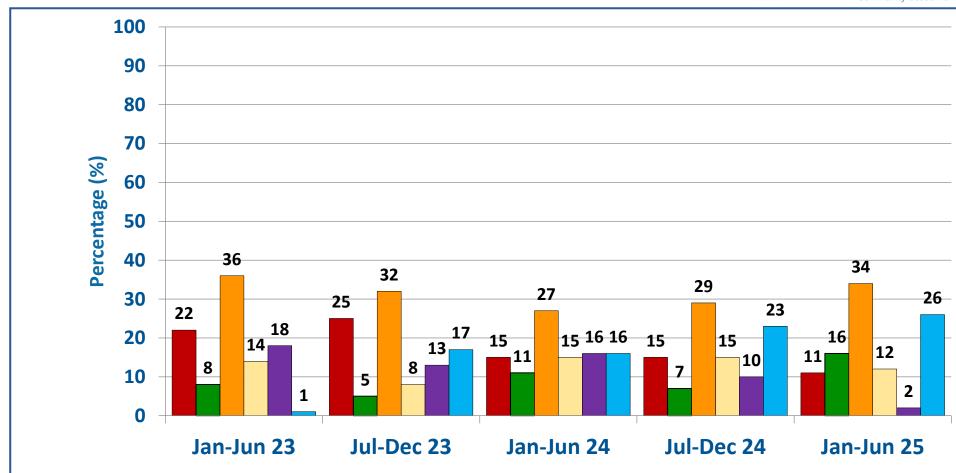
SOURCE OF PAYMENT



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SOUTH AFRICAN COMMUNITY EPIDEMIOLOGY NETWORK ON DRUG USE

Community-Based Harm Reduction Services



- **Fam/Friends**
- Self
- Medical Aid
- State
- **■** Employer
- Unkwn/Other



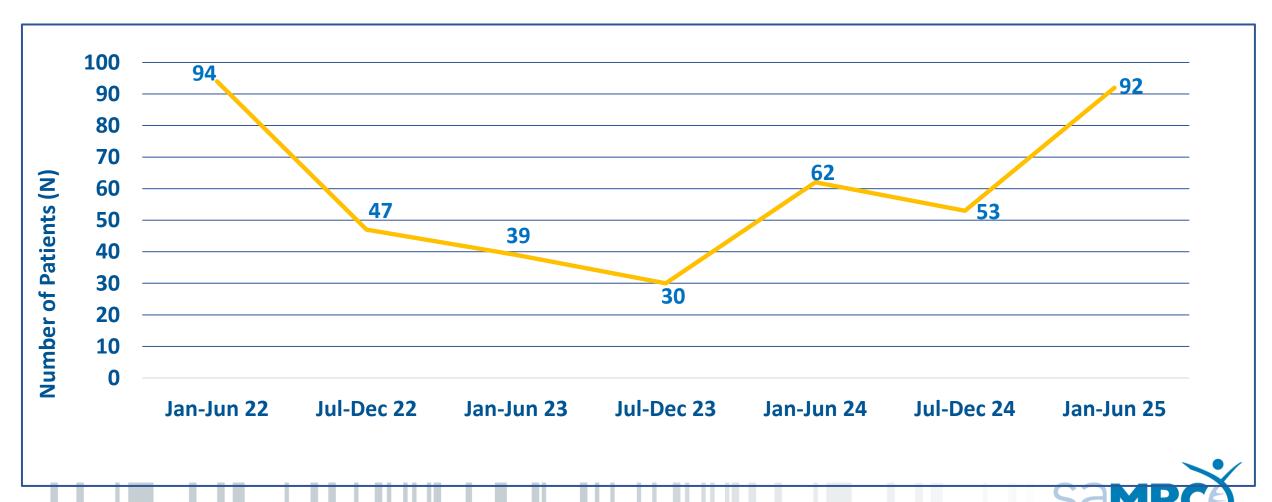


PATIENTS ≤18 YEARS



NUMBER OF PATIENTS (n=92, 19%)

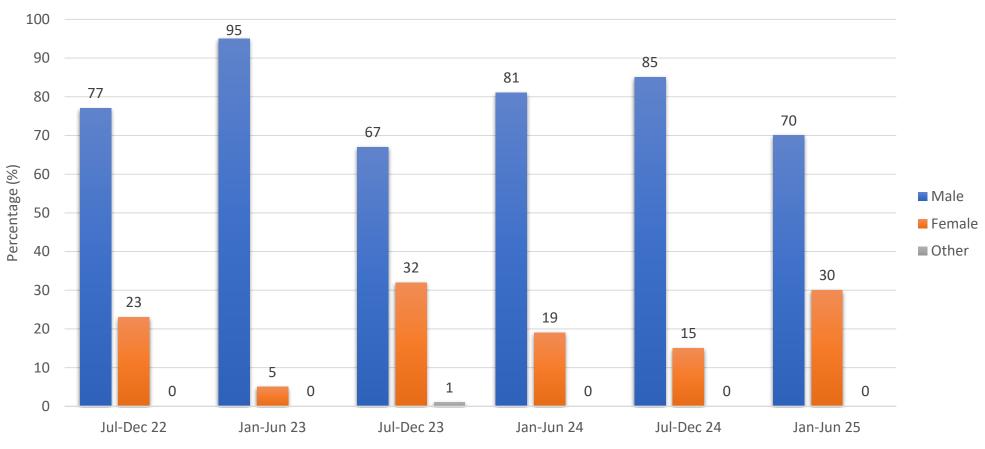






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GENDER

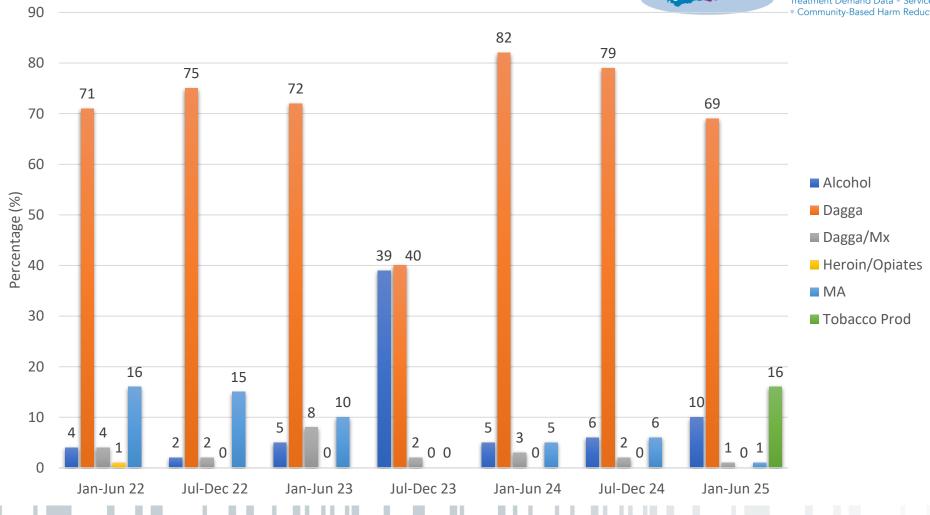




SELECTED PRIMARY SUBSTANCES OF USE





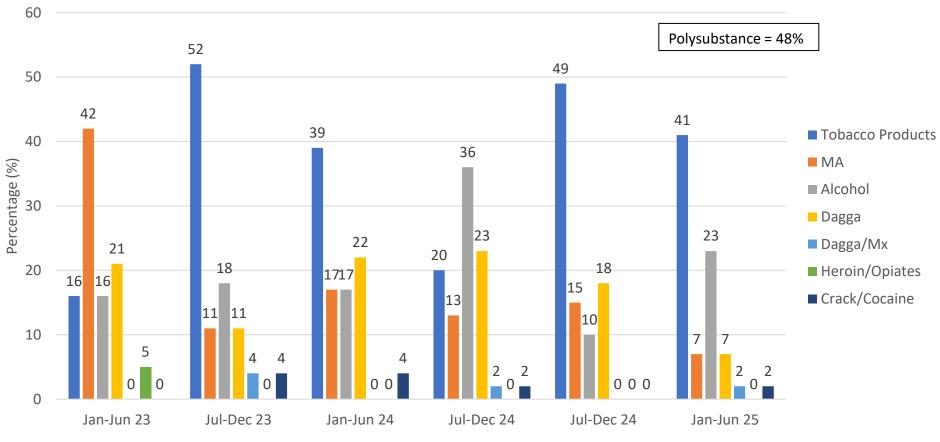




SELECTED SECONDARY SUBSTANCES OF USE









SUMMARY

- Nationally, CR comprised 6% of admissions this period.
- Number of admissions increased FS accounted for 72% of admissions in this region.
- Majority were first-time, voluntary admissions.
- Treatment access was mainly to inpatient followed by outpt/cb services. No change in inpatient treatment access.
- Predominantly males aged 15-19 years accessed treatment services no change for 15–19-year-olds. Decrease for young adults 20-24 years; increase in access for adults aged 30-34 years
- Most persons receiving treatment were employed (ft/pt) and had a high school-level.
- Readmissions were mostly for were males aged 40-44 years. Majority of individuals experienced a readmission once on an inpatient basis.
- Referral to treatment were largely through family/friends, followed by self. Self-referrals increased substantially from 15% to 25%.
- HIV testing rates remained mostly the same since the previous period. Most individuals had been tested for HIV (60%); just over half had been tested in the past 12 months (51%). The majority indicated they did not want future HIV testing but this rate declined appreciably since 24a.
- Rates for substance use during pregnancy remain low though this number is likely under-represented.
- Alcohol and dagga were, again, the two leading primary substances of use this period. Alcohol increased while dagga decreased since the last period.
- Tobacco products, followed by alcohol and dagga were the most frequently reported secondary substances of use. Polysubstance use was indicated by 45% of all persons admitted to treatment.
- Dagga and dagga/mandrax were associated with the youngest age at admission and age of initiation.
- Alcohol had the longest treatment delay (18 years). In contrast to 24b when longer treatment delay was seen for heroin/opiates (11 years), this period delay was shorter at 8 years—individuals typically access treatment for this substance much sooner.

SUMMARY

- Readmissions were mostly made for alcohol and dagga misuse; substantial increase for alcohol-related readmissions since 24b.
- Mental health problems (mainly depression and anxiety/panic disorders) and hypertension were reported as comorbidities at the time of admission.
- Comorbidity largely linked to alcohol and dagga.
 - Alcohol was mainly associated with depression and hypertension
 - Dagga mainly linked to depression and asthma.
- 'Medical aid' remained the main source of funding for treatment, followed by 'unknown/other'. In other regions, treatment is predominantly state-subsidised.
- Adolescents ≤18 years:
 - Admissions for adolescents aged ≤18 years increased since the last period. Youth comprised 19% of all admissions.
 - Most admissions were made for males. Rates for female admissions doubled over the last two periods.
 - Dagga remains the leading primary substance of use, followed by tobacco products.
 - Tobacco products and alcohol were most commonly used as secondary substances. Polysubstance use indicated in 48% of all persons in treatment.

REFERENCES:



- 1) Pinedo M, Zemore S, et al. Women's barriers to specialty substance abuse treatment: a qualitative exploration of racial/ethnic differences. J Immigr Minor Health. 2020; 22(4): 653-660. doi: 10.1007/s10903-019-00933-2
- 2) Substance Abuse and Mental Health Services Administration (SAMHSA). Addressing the Specific Needs of Women for Treatment of Substance Use Disorders. Advisory. Publication No. PEP20-06-04-002.
- 3) WHO. A technical brief: HIV and young people who inject drugs. Geneva, Switzerland: World Health Organization
- 4) Muravha T, Hoffman CJ, et al. Exploring perceptions of low-risk behaviour and drivers to test for HIV among South African youth. PLOS ONE. 2021; 16(1): e0245542. https://doi.org/10.1371/journal.pone.0245542
- 5) Khoza A, Shilubane HN. Substance use and associated factors among school adolescents in South Africa. The Open Public Health Journal. 2021; 14: 435-440. DOI: 10.2174/1874944502114010435, 2021, 14, 435-440
- 6) Nyashanu T, Visser M. Treatment barriers among young adults living with a substance use disorder in Tshwane, South Africa. 2022; 17:75. y (2022) 17:75. https://doi.org/10.1186/s13011-022-00501-2
- 7) Naughton F, Alexandrou E, et al. Accessing treatment for problem alcohol users: why the delay? Gloucestershire Research Unit, Health Psychology Department: Gloucestershire, UK; 2008.
- 8) Kamarulzaman A, Altice F.L. The challenges in managing HIV in people who use drugs. Curr Opin Infect Dis. 2015; 28(1): 10-16. doi: 10.1097/QCO.00000000000125





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Thank You
Baie Dankie
Enkosi Kakhulu
Ngiyabonga

