# SACENDU

South African Community Epidemiology Network on Drug Use

*Vol 28 (2), 2025*

# RESEARCH BRIEF

**Monitoring Alcohol, Tobacco and Other Drug Use Trends in South Africa (July 1996 – December 2024)**

*Jodilee Erasmus, Nancy Hornsby, Mompati Kamogelo Moletsane, Kim Johnson, Andrew Scheibe, Nadine Harker, TB HIV Care, SANCA, Anova Health Institute, University of Pretoria (COSUP), NACOSA, Urban Futures Centre (DUT), Sediba Hope Medical Centre, Advanced Access and Delivery & Tintswalo Home Based Care*

saMRC advancinglife

Publication date: October 2025

**SACENDU Research Brief, Vol 28 (2), 2025**

The SACENDU Research Brief is the Mental Health, Alcohol, Substance use and Tobacco Research Unit of the South African Medical Research Council's bi-annual publication of substance-use related treatment and harm reduction data for the period July-December 2024.



Suggested citation: SACENDU Research Brief: monitoring alcohol, tobacco and other drug use trends in South Africa (July - December 2024) Vol 28 (2). Cape Town, South Africa: Mental Health, Alcohol, Substance use and Tobacco Research Unit, South African Medical Research Council; 2025.

Disclaimer: The information presented in this report are based on the data available at the time of publication.

All reasonable precautions have been taken by SACENDU to verify the information contained in this publication

# CONTENTS

# BACKGROUND AND SUMMARY

The South African Community Epidemiology Network on Drug Use (SACENDU) report back meetings for Phase 57 were virtual and PowerPoint presentations were made available to all stakeholders of SACENDU. As mentioned in the previous brief, moving forward, we will use a hybrid approach, using both virtual and face-to-face reporting meetings.

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.**

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.
To facilitate South Africa's full participation in international fora focusing on the epidemiological surveillance of drug use.

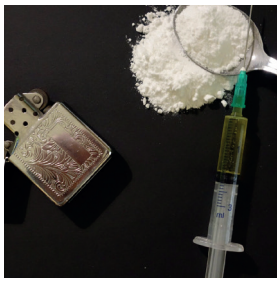
Financial support for Phase 57 was provided by the Mental Health and Substance Use Directorate of the National Department of Health.

The second half of 2024 (i.e., 2024b) saw a decrease in the number of persons admitted for AOD treatment from **8 958 in 2024a (January to June 2024) across 87 treatment centres to 7244 across 77 treatment centres in 2024b (July-December 2024).**

Nationally, **Alcohol**-related admissions comprised 24% of all service users in the July-December 2024 period, increasing from 20% in 2024a. The period saw an increase in admissions for GT (from 14% in 2024a to 19% in 2024b), while in the CR a decrease was seen (from







43% in 2024a to 38% in 2024b). Between 19% (GT) and 49% (EC) of persons accessing AOD treatment services reported alcohol as their primary substance of use.

Admission rates for **Cannabis** remained relatively high for the current period (33). Between 23% (WC) and 38% (GT and CR) of persons attending specialist treatment centres had cannabis as their primary substance of use. Changes in cannabis use were seen for most regions, with the most notable increase reported for the GT (from 29% in 2024a to 38% in 2024b) and the CR (from 32% in 2024a to 38% in 2024b). Nationally, cannabis contributed 76% of all admissions among individuals 18 years and younger, decreasing 3-percentage points from the previous review period. The WC remained the province where **Cannabis/Mandrax** (Methaqualone) combination (also known as "white pipe") was most often used as a secondary substance (31%), decreasing from 38% in the 2024a period.

**Crack/Cocaine**-related treatment admissions have remained consistently low over the past few reporting periods, with the national rate unchanged at 3%. Regional rates varied between 1% (CR) and 10% (KZN). KZN was also reported as having the highest proportion for crack/cocaine as a secondary substance of use at 25%. Between 3% (CR) and 23% (KZN) of all persons admitted to treatment used crack/cocaine as a primary or secondary substance of use. Few persons 18 years and younger (1% nationally) were admitted for crack/cocaine-related problems, however the proportions of service users 18 years and younger decreased in EC (from 9% to 2%) and WC (from 4% to 1%) from the 2024a to 2024b period.

Nationally, **Heroin/Opiates** comprised 10% of all admissions for the July-December 2024 period, decreasing from 16% since the last 2024a reporting period. The most notable decrease in heroin/opiate use was seen for GT (19% in 2024a to 10% in 2024b) and NR (25% in 2024a to 19% in 2024b). GT had the highest injection rates for heroin/opiates (n =124, 40%). Rates for heroin/opiates as a primary or secondary substance of use ranged from 1% (EC) to 22% (NR) in the current reporting period.

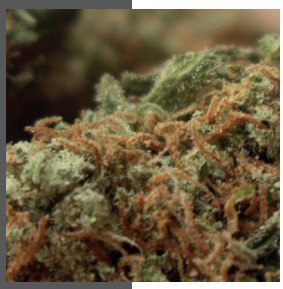
Treatment admissions for **Over-the-counter/Prescription-medicines (OTC/PRE)** as a primary drug of use was reported between 1% (NR, GT, and WC) to 4% (KZN and CR). Proportions for OTC/PRE-medicine use as primary or secondary substance ranged between 1% (NR) and 6% (KZN). During this reporting period, n=401 (6%) persons across all sites reported the non-medical use of codeine, decreasing from 9% in the preceding reporting period.

Treatment admission rates for **Crystal Methamphetamine** (MA aka 'TIK) as a primary substance of use were highest in the WC (30%) and GT (24%) compared to other regions. Most notably, MA-related admissions decreased substantially from 24% (2024a) to 16% (2024b) in GT. MA was reported as the third leading primary substance of use (17%) across regions. Treatment admissions for **Ecstasy** as a primary drug of use remained low, between <1% (WC and GT) and 1% (KZN); no ecstasy was reported in the NR, CR and EC this period. Low proportions for Ecstasy admissions were consistently reported over the last few periods. Individuals may not be seeking treatment for Ecstasy use, which explains low admission rates. **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. Rates for CAT/KHAT as primary or secondary drug of use varied from 1% (EC, KZN and WC) to 9% (GT).

**Inhalant/solvent** use remained low across regions, ranging between <1% (KZN, CR and GT) and 2% (NR). No inhalant use was reported in the EC and WC for the 2024b period. While rates were generally low, inhalant/solvent use is common among the homeless and children who live on the streets. Adolescents who use inhalants represent a subgroup of troubled youth with distinct and multiple vulnerabilities who are more likely to engage in delinquency and experience mental health problems such as depression and suicidality[2]. Additional community-based or regional studies are needed to explore the extent of inhalant/solvent use for youth, barriers to accessing specialist treatment services and other services available to support and help this vulnerable population. Nationally, indication of **Poly-substance use** (i.e., more than one substance of use indicated) remained stable at 53%; poly-substance use ranged from 41% (NR) to 61% (WC) across the regions.

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.
2 Lipari RN. Understanding adolescent inhalant use (Short Report), 2017. Substance Abuse and Mental Health and Mental Health Services Administration (SAMHSA). https://www.samhsa.gov/data/sites/default/files/report_3095/ShortReport-3095.html

# METHODOLOGY



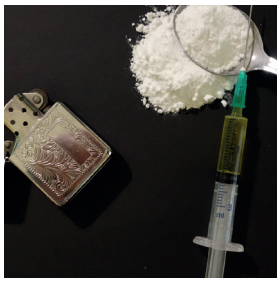
SACENDU utilises treatment admission data collected from treatment centres. These data are collected from approximately 86 specialist substance use treatment centres in South Africa, representing 70% of the available treatment sites in the country. The larger provinces such as the Gauteng and the Western 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 | 20 | 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. | 14 | 2 |
| **Western Cape** | Situated on the south-western coast of South Africa | Highly urbanised and the third most populous province in the country | 29 | 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 | 9 | 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 the few number of treatment centres found in these provinces | Mostly semi-urban | 8 | 0 |







| Sentinel site | Description and Location | Urban/Rural | Number of treatment centres* | Number of centres offering MAT |
|---|---|---|---|---|
| **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 | 6 | 0 |

*The number of treatment centres contributing data to the system fluctuate across reporting periods.

Treatment centres are invited to join the network and provide data related to their treatment admissions for each reporting period (current period July-December 2024). 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 26 specialist treatment centres/programmes were largely consistent over the last three (3) reporting periods: MA (30%), cannabis (23%), alcohol (22%), and heroin/opiates (11%), (Table 2). Collectively, these substances contributed 86% of all treatment admissions for the July-December 2024 period. The proportion of heroin-related admissions increased from 9% to 11%. Overall, 1 888 persons were treated in the WC in the second half of 2024.

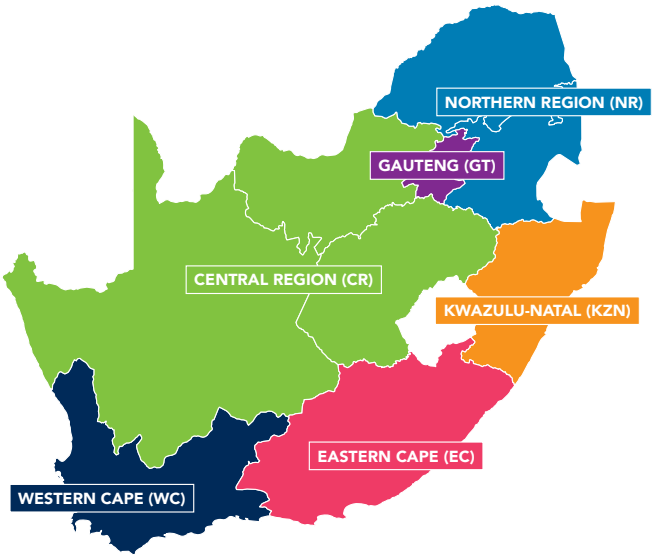
In **KwaZulu-Natal (KZN)** the main primary substance of use in the current reporting period remained alcohol (37%). Cannabis (33%) was the second most used substance, followed by crack/cocaine and heroin/opiates (10% respectively). A total of 783 persons were treated across the 10 treatment centres that submitted data in the second half of 2024b.

In the **Eastern Cape (EC)** the main primary substances of use reported by treatment centres from July-December 2024 were alcohol (increasing slightly from 46% to 49%), followed by cannabis (29%), and MA, (11%) (Table 2). A total of 399 persons were treated across 8 facilities.

In **Gauteng (GT),** which includes the metropolitan areas of Johannesburg and Pretoria, 3 199 admissions across 20 treatment centres were recorded in the second half of 2024. The three main primary substances of use remained the same over the last two reporting periods: cannabis (increasing from 29% to 38%), alcohol (increasing from 14% to 19%) and MA (decreasing from 24% to 16%) (Table 2).

The **Northern Region (NR)** includes data from 7 centres (5 in Mpumalanga and 2 in Limpopo). A total of 709 admissions were recorded for the 2024b review period. The three leading primary substances of use reported by individuals admitted to treatment were cannabis (36%), alcohol (24%), and heroin/opiates (19%) (Table 2). Admissions for heroin/opiates misuse decreased from 25% to 19% while alcohol increased from 20% to 24% (Table 2).

In the **Central Region (CR)** (comprising the Free State, Northern Cape and the North-West), 263 admissions were recorded across 6 treatment centres for the July-December 2024 period. Alcohol and cannabis were the most common primary substances of use, accounting for 38% each of all admissions for the current review period. Cannabis increased from 32% to 38%, while alcohol decreased from 43% to 38% over the last period (Table 2). Availability of specialist treatment for substance misuse remains inadequate in this region.

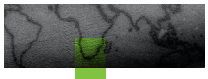


## TABLE 2: PRIMARY SUBSTANCE OF USE: BY SITE AND 6-MONTH PERIOD (%)

| Site | Period | Alcohol | Cannabis | Cannabis/ Mandrax | Crack/ Cocaine | Heroin/ Opiates | Ecstasy | OTC/PRE* | MA** | Other | Total (N) |
|---|---|---|---|---|---|---|---|---|---|---|---|
| WC | 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 |
| | 2022b | 17.6 | 22.4 | 6.1 | 1.9 | 17.8 | 0.1 | 0.7 | 32.7 | 0.2 | 1928 |
| | 2023a | 18.5 | 23.2 | 6.4 | 2.4 | 16.6 | 0.0 | 1.2 | 31.0 | 0.5 | 1483 |
| | 2023b | 18.7 | 19.5 | 8.1 | 2.2 | 13.1 | 0.1 | 1.2 | 33.9 | 3.0 | 1489 |
| | 2024a | 20.7 | 21.0 | 7.5 | 5.3 | 9.3 | 0.2 | 1.0 | 33.5 | 1.4 | 1726 |
| | **2024b** | **22.2** | **23.5** | **6.9** | **3.0** | **10.6** | **0.2** | **0.8** | **30.4** | **0.6** | **1890** |

| Site | Period | Alcohol | Cannabis | Cannabis/ Mandrax | Crack/ Cocaine | Heroin/ Opiates | Ecstasy | OTC/PRE* | MA** | Other | Total (N) |
|---|---|---|---|---|---|---|---|---|---|---|---|
| KZN[2] | 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 |
| | 2022b | 29.4 | 27.6 | 3.9 | 8.3 | 19.2 | 0.0 | 7.9 | 1.7 | 1.0 | 1279 |
| | 2023a | 35.5 | 27.7 | 2.1 | 11.1 | 14.4 | 0.3 | 2.5 | 2.9 | 2.5 | 1054 |
| | 2023b | 40.5 | 25.7 | 0.8 | 9.3 | 15.9 | 0.0 | 3.4 | 2.7 | 1.2 | 900 |
| | 2024a | 36.9 | 30.9 | 1.1 | 12.4 | 11.1 | 0.1 | 2.7 | 2.1 | 1.7 | 829 |
| | **2024b** | **37.4** | **32.6** | **1.5** | **10.2** | **10.3** | **0.8** | **2.7** | **1.7** | **1.1** | **783** |





| Site | Period | Alcohol | Cannabis | Cannabis/ Mandrax | Crack/ Cocaine | Heroin/ Opiates | Ecstasy | OTC/PRE* | MA** | Other | Total (N) |
|---|---|---|---|---|---|---|---|---|---|---|---|
| EC[3] | 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 |
| | 2022b | 36.1 | 27.0 | 4.6 | 5.3 | 0.4 | 0.0 | 1.1 | 25.1 | 0.0 | 313 |
| | 2023a | 34.0 | 28.6 | 2.9 | 3.3 | 1.2 | 0.0 | 5.2 | 23.2 | 0.4 | 241 |
| | 2023b | 38.4 | 35.7 | 1.4 | 2.7 | 0.3 | 0.0 | 2.0 | 15.0 | 3.4 | 315 |
| | 2024a | 45.6 | 28.7 | 2.7 | 5.8 | 0.8 | 0.0 | 3.8 | 11.9 | 0.4 | 261 |
| | **2024b** | **49.4** | **29.4** | **2.0** | **4.3** | **0.3** | **0.0** | **2.3** | **11.4** | **0.3** | **399** |

| Site | Period | Alcohol | Cannabis | Cannabis/ Mandrax | Crack/ Cocaine | Heroin/ Opiates | Ecstasy | OTC/PRE* | MA** | Other | Total (N) |
|---|---|---|---|---|---|---|---|---|---|---|---|
| GT | 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 |
| | 2022b | 13.6 | 32.3 | 2.9 | 1.7 | 15.9 | 0.0 | 1.1 | 25.1 | 0.3 | 5504 |
| | 2023a | 12.0 | 33.8 | 3.1 | 1.7 | 16.7 | 0.1 | 0.9 | 24.0 | 1.3 | 7482 |
| | 2023b | 12.3 | 30.0 | 2.0 | 1.5 | 19.3 | 0.0 | 1.0 | 25.9 | 1.8 | 6075 |
| | 2024a | 13.8 | 29.2 | 4.1 | 2.3 | 19.3 | 0.0 | 1.4 | 23.6 | 1.8 | 4782 |
| | **2024b** | **18.7** | **37.6** | **4.7** | **2.2** | **9.7** | **0.2** | **1.4** | **16.2** | **0.4** | **3199** |

| Site | Period | Alcohol | Cannabis | Cannabis/ Mandrax | Crack/ Cocaine | Heroin/ Opiates | Ecstasy | OTC/PRE* | MA** | Other | Total (N) |
|---|---|---|---|---|---|---|---|---|---|---|---|
| NR[4] | 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 |
| | 2022b | 14.7 | 32.7 | 0.1 | 6.0 | 38.0 | 0.1 | 0.7 | 5.6 | 0.2 | 854 |
| | 2023a | 18.4 | 36.3 | 1.7 | 7.1 | 25.5 | 0.0 | 0.8 | 5.7 | 3.0 | 772 |
| | 2023b | 28.8 | 30.0 | 3.4 | 6.1 | 20.0 | 0.0 | 0.5 | 5.9 | 2.7 | 410 |
| | 2024a | 20.4 | 37.5 | 1.3 | 4.5 | 25.0 | 0.1 | 0.5 | 6.0 | 4.0 | 980 |
| | **2024b** | **23.9** | **36.4** | **1.6** | **3.7** | **18.8** | **0.0** | **1.1** | **4.1** | **1.7** | **709** |

| Site | Period | Alcohol | Cannabis | Cannabis/ Mandrax | Crack/ Cocaine | Heroin/ Opiates | Ecstasy | OTC/PRE* | MA** | Other | Total (N) |
|---|---|---|---|---|---|---|---|---|---|---|---|
| CR[5] | 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 |
| | 2022b | 40.1 | 23.6 | 5.1 | 1.0 | 5.1 | 0.0 | 1.7 | 18.8 | 0.3 | 292 |
| | 2023a | 42.5 | 27.9 | 2.0 | 3.6 | 4.5 | 0.0 | 2.0 | 13.4 | 1.6 | 247 |
| | 2023b | 49.7 | 20.7 | 3.3 | 1.3 | 5.0 | 0.0 | 1.3 | 9.7 | 7.3 | 300 |
| | 2024a | 42.6 | 32.1 | 3.0 | 1.8 | 2.7 | 0.0 | 0.6 | 11.3 | 2.1 | 336 |
| | **2024b** | **38.0** | **38.0** | **3.4** | **1.1** | **0.8** | **0.0** | **2.7** | **9.5** | **0.0** | **263** |

[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:** Nationally, the majority of admissions were first-time admissions (75%). The proportion of first-time admissions to treatment centres ranged between 63% (WC) and 90% (NR). Compared to the other regions, WC had the highest proportion of repeat admissions (37%) for the 2024b reporting period. The majority of readmissions in the WC were for MA (39%) and heroin/opiates (22%). Nationally MA (25%), cannabis (21%), alcohol (20%), and heroin/opiates (16%) accounted for the highest readmission rates.

**Referrals:** Nationally, the most common source of referral to specialist treatment centres was 'self/family/friends' (52%) and 'social services/welfare' (19%). Referral rates for 'self/family/friends' ranged between 41% (WC) and 59% (GT) while 'social services/welfare' ranged from 10% (NR) to 24% (WC) (Table 3).

TABLE 3: REFERRAL SOURCES (JUL-DEC 2024) [COLUMN % ADD UP TO 100]

| Referral Source | WC | KZN | EC | CR | GT | NR |
|---|---|---|---|---|---|---|
| Self/family/friends | 41 | 48 | 52 | 50 | 59 | 53 |
| Work/employer | 9 | 11 | 16 | 20 | 4 | 11 |
| Social services/welfare | 24 | 22 | 23 | 15 | 18 | 10 |
| Health professionals (Doctor/psychiatrist/nurse) | 3 | 6 | 6 | 7 | 2 | 1 |
| Hospital/clinic | 6 | 4 | 1 | 1 | 1 | 1 |
| Court/correctional services | 4 | 2 | - | - | 2 | <1 |
| Schools | 8 | 6 | 2 | 5 | 12 | 23 |
| Church/religious body | 1 | 1 | - | - | <1 | <1 |
| Other e.g., radio | 5 | 1 | - | 3 | 1 | <1 |

**Gender:** The majority of persons admitted to treatment identified as male with proportions varying between 70% (WC) and 86% (KZN and CR). When gender was compared by primary substance of use across regions, variations between genders emerged (Figure 1). Nationally, OTC/PRE-medication is the only primary of substance of use for which mostly females were admitted (52%). Across the regions, OTC/PRE-medication use among females ranged from 44% (KZN) to 52% (GT). (Figure 2).

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

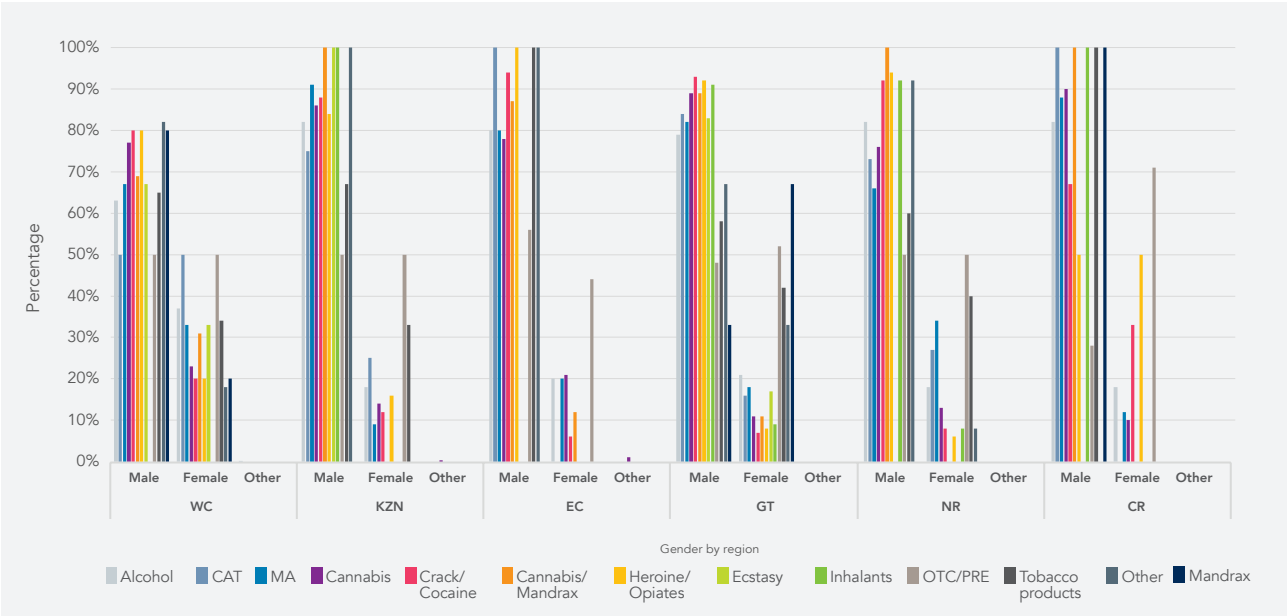
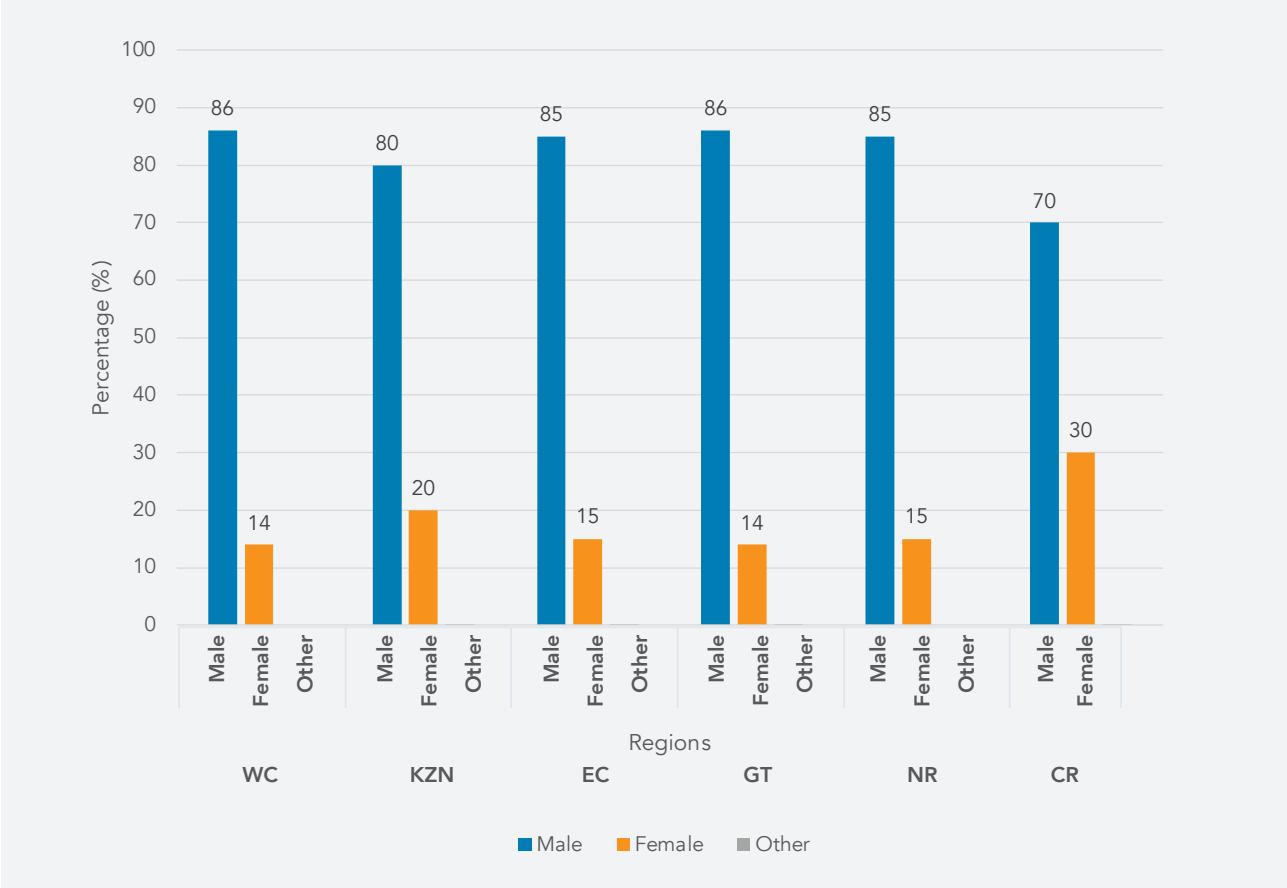


FIGURE 2: GENDER BY REGION (%)




**Employment status and education:** Between 12% (GT) and 45% (EC) of persons admitted to treatment were in full-time employment. Unemployment rates ranged between 23% (EC) and 64% (GT). GT remained the region that accounted for the highest unemployment rates (64%), including being unemployed for more than 6 months (55%). Admission rates for school-going service users ranged between 10% (WC and KZN) and 32% (NR). Across regions, the majority of individuals (82%) had a secondary school-level (grade 8-12) education. EC (27%) and KZN (20%) had the highest number of persons with a tertiary-level education. Individuals with no schooling made up a very small proportion, comprising of 1% or less across regions.

**Mode of use:** Smoking remained the most common mode of use for all substances nationally (66%) compared to other modes of use. Rates for injection drug use remained low across sites, ranging between <1% (EC) and 4% (GT and WC). Overall, rates for heroin/opiates use by injection route decreased from 34% (24a) to 30% (24b); regionally, rates ranged from 3% (KZN) to 40% (GT). There was one case in CR and no injection rates for heroin/opiates in the EC.

**Age of persons:** The national mean age for all substances was 30 years, ranging from 9 to 73 years (Table 3). However, age differences were noted for individual substance categories. Individuals were older when their primary substance of use was alcohol (mean age: 38 years), OTC (mean age: 35 years), followed by crack/cocaine and cannabis/mandrax (mean age: 33 years, respectively). Individuals who were admitted to treatment for inhalants (mean age: 24 years), cannabis (mean age: 23 years) and tobacco products use (mean age: 19 years, decreasing from 24 years in 2024a) were younger (Table 4).

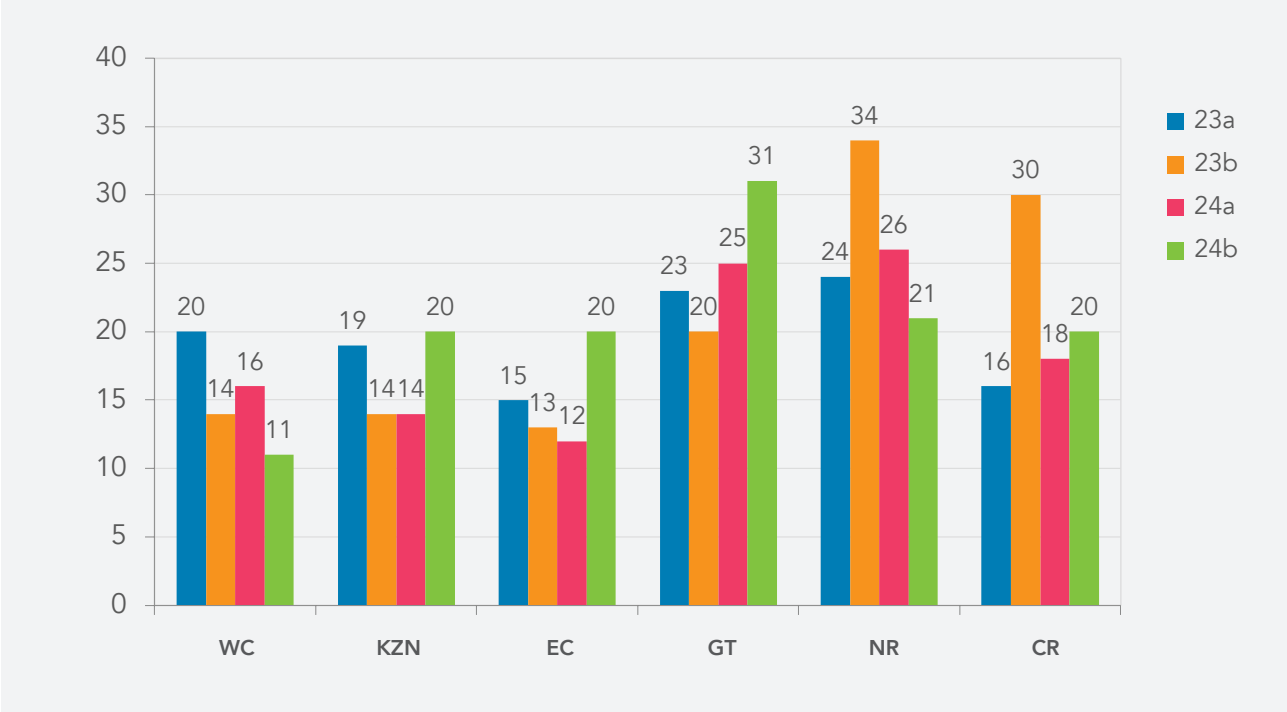
A total number of 1 289 (18%) individuals ≤18 years were admitted to specialist treatment facilities for the current reporting period. The NR was the region with the highest proportion of individuals aged ≤18 years admitted to treatment (n=221, 31%) (Figure 3).

### TABLE 4: MEAN AGE OF PERSONS IN TREATMENT CENTRES BY SELECTED PRIMARY SUBSTANCE OF USE (JUL-DEC 2024)

| Substance of use | WC* | KZN* | EC* | CR* | GT | NR | National |
|---|---|---|---|---|---|---|---|
| Alcohol | 39 | 38 | 41 | 40 | 38 | 34 | 38 |
| CAT/KHAT | 40 | 31* | 24* | 35 | 29 | 30 | 29 |
| Crack/Cocaine | 30 | 35 | 33 | 35* | 35 | 30 | 33 |
| Cannabis | 24 | 25 | 20 | 23 | 23 | 23 | 23 |
| Cannabis/Mandrax | 39 | 36 | 32 | 27 | 29 | 20 | 33 |
| Heroin/Opiates[1] | 39 | 32 | 17* | 29* | 33 | 32 | 34 |
| Inhalants | - | 14* | - | 33* | 29 | 20 | 24 |
| Methamphetamine | 35 | 35 | 26 | 26 | 29 | 27 | 32 |
| Ecstasy | 26* | 34 | - | - | 32 | - | 31 |
| OTC/PRE[2] | 34 | 32 | 40 | 37 | 36 | 27 | 35 |
| Other combinations | 33 | 33 | 32* | - | 27 | 35 | 32 |
| Tobacco Products | 13 | 25 | 46* | 22 | 19 | 20 | 19 |
| **All substances** | **33** | **32** | **33** | **31** | **29** | **28** | **30** |

[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
*N<5

### FIGURE 3: TREATMENT ADMISSION TRENDS (% OF PATIENTS ≤18 YEARS)*: JUL-DEC 2024




*Data was previously reported for <20 years. From 2022 onwards, data is reported for youths aged 18 years and younger

TABLE 5: PRIMARY SUBSTANCE OF USE FOR PERSONS ≤18 YEARS (%): JUL-DEC 2024*

| Site | Period | Alcohol | Cannabis | Cannabis/ Mandrax | Crack/ Cocaine | Heroin/ Opiates | Ecstasy | MA[a] | Tobacco products* | OTC/ PRE[b] | Total (N) |
|---|---|---|---|---|---|---|---|---|---|---|---|
| WC[1] | 22b | 2.2 | 85.1 | 3.3 | 0.3 | 1.4 | 0.0 | 7.4 | - | 0.0 | 363 |
| | 23a | 10.8 | 81.4 | 1.4 | 0.7 | 0.0 | 0.0 | 4.4 | - | 0.3 | 296 |
| | 23b | 3.0 | 75.4 | 1.0 | 1.0 | 0.0 | 0.0 | 6.4 | - | 0.5 | 209 |
| | 24a | 12.0 | 69.4 | 1.1 | 3.5 | 0.4 | 0.4 | 7.8 | 5.6 | 0.0 | 284 |
| | **24b** | **1.5** | **82.0** | **1.9** | **1.0** | **1.0** | **0.0** | **2.4** | **9.7** | **0.0** | **209** |
| KZN[2] | 22b | 6.5 | 57.8 | 0.7 | 1.1 | 4.0 | 0.0 | 0.4 | - | 27.6 | 276 |
| | 23a | 3.9 | 74.7 | 3.9 | 0.7 | 0.7 | 0.0 | 0.0 | - | 2.6 | 154 |
| | 23b | 21.5 | 63.7 | 0.0 | 0.8 | 0.8 | 0.0 | 2.5 | - | 4.1 | 121 |
| | 24a | 12.3 | 75.2 | 0.0 | 1.0 | 1.0 | 0.0 | 1.0 | 4.8 | 2.9 | 105 |
| | **24b** | **4.0** | **86.8** | **0.0** | **0.0** | **0.0** | **0.0** | **0.0** | **4.0** | **4.0** | **76** |
| EC[3] | 22b | 3.7 | 65.4 | 2.5 | 2.5 | 0.0 | 0.0 | 24.7 | - | 0.0 | 82 |
| | 23a | 8.5 | 71.2 | 0.0 | 1.7 | 0.0 | 0.0 | 15.3 | - | 0.0 | 59 |
| | 23b | 17.0 | 67.0 | 0.9 | 1.9 | 0.0 | 0.0 | 8.5 | - | 0.9 | 107 |
| | 24a | 1.5 | 76.1 | 6.0 | 9.0 | 0.0 | 0.0 | 7.5 | 0.0 | 0.0 | 67 |
| | **24b** | **6.0** | **78.3** | **1.2** | **2.4** | **1.2** | **0.0** | **10.8** | **0.0** | **0.0** | **83** |
| GT[4] | 22b | 3.4 | 74.3 | 2.0 | 0.4 | 1.0 | 0.0 | 13.2 | - | 0.7 | 955 |
| | 23a | 4.6 | 79.4 | 1.9 | 0.4 | 0.4 | 0.1 | 7.2 | - | 1.0 | 1434 |
| | 23b | 3.9 | 80.3 | 1.2 | 0.6 | 0.8 | 0.0 | 7.3 | - | 2.5 | 869 |
| | 24a | 2.2 | 84.1 | 1.2 | 0.7 | 0.3 | 0.0 | 6.7 | 2.8 | 1.9 | 672 |
| | **24b** | **3.6** | **77.3** | **1.7** | **0.5** | **0.0** | **0.0** | **4.1** | **9.8** | **1.3** | **647** |
| NR[5] | 22b | 1.7 | 80.5 | 0.0 | 2.5 | 3.4 | 0.0 | 8.5 | - | 0.8 | 119 |
| | 23a | 16.4 | 70.6 | 2.3 | 0.6 | 2.3 | 0.0 | 4.5 | - | 0.0 | 177 |
| | 23b | 29.8 | 51.2 | 7.1 | 0.0 | 4.8 | 0.0 | 0.0 | - | 0.0 | 84 |
| | 24a | 8.7 | 75.5 | 2.1 | 0.8 | 0.0 | 0.0 | 2.9 | 8.3 | 0.0 | 241 |
| | **24b** | **12.2** | **58.8** | **3.2** | **0.5** | **2.7** | **0.0** | **1.8** | **14.5** | **1.4** | **221** |
| CR[6] | 22b | 2.1 | 74.5 | 2.1 | 0.0 | 0.0 | 0.0 | 14.9 | - | 0.0 | 47 |
| | 23a | 5.1 | 71.8 | 7.7 | 0.0 | 0.0 | 0.0 | 10.3 | - | 0.0 | 39 |
| | 23b | 39.3 | 40.5 | 2.3 | 0.0 | 0.0 | 0.0 | 0.0 | - | 0.0 | 89 |
| | 24a | 4.9 | 82.3 | 1.2 | 0.7 | 0.3 | 0.0 | 5.7 | 3.2 | 1.9 | 62 |
| | **24b** | **5.7** | **79.3** | **1.9** | **0.0** | **0.0** | **0.0** | **5.7** | **7.6** | **0.0** | **53** |

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

**Sources of payment:** Overall, the 'state' (64%) was the most substantial source of payment for treatment services (including fully and partly funded). When considering source of payment by regions, the 'state' was also the most common funding source in the WC (92%), GT (70%) and KZN (32%). 'Family/friends' was the primary source of funding for treatment in the NR (48%). 'Medical aid' was the most common source of funding in the EC (45%) and CR (29%).

**HIV testing:** Across the regions, 73% of individuals admitted to treatment indicated that they had been tested for HIV, with 55% having been tested within the last 12 months. Between 27% (NR) and 73% (WC) of persons reported that they had been tested for HIV in the past 12 months. Lower testing rates remain of concern in the CR and EC regions, highlighting the need to create treatment environments that facilitate HIV testing uptake such as integrating testing into standard care, on-site rapid testing, and referral and linkage to care.

# SUMMARIES BY SUBSTANCE OF USE

## ALCOHOL

Reported rates for alcohol admissions ranged between 19% (GT) and 49% (EC) (Table 2). A rise was seen for alcohol admissions in GT, increasing from 14% in 2024a to 19% in 2024b, as well as in the NR, increasing from 20% in 2024a to 24% in 2024b. During the same period, a decrease was seen in CR from 43% to 38% (Table 2). Nationally, the average age of persons admitted for alcohol misuse remained 38 years. Average ages ranged between 34 years (NR) and 41 years (EC) (Table 4). Individuals presenting to treatment centres were more likely to be male (76%) compared to female (24%), with less than 1% identifying as 'other'. The same trend was also seen across provinces.

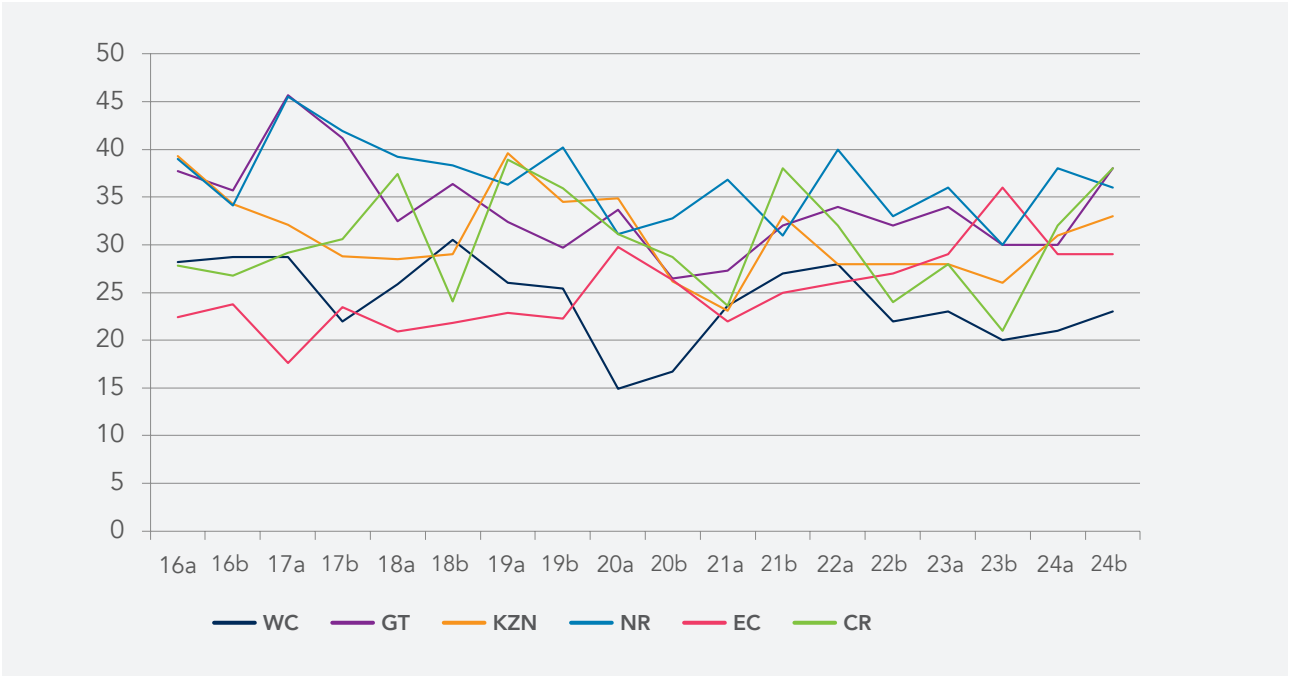
During this reporting period, service users 18 years and younger reported considerably less alcohol admissions in the WC (12% in 2024a to 2% in 2024b) and KZN (12% in 2024a to 4% in 2024b). There was an increase in alcohol admissions in the EC (2% in 2024a to 6% in 2024b), and NR (9% in 2024a to 12% in 2024b) (Table 5).

## CANNABIS (DAGGA) AND MANDRAX

Nationally, cannabis was the leading primary substance of use among persons treated at specialist facilities (33%). Regionally, admissions for cannabis use ranged from 21% (WC) to 38% (NR) (Figure 4). Cannabis-related admissions increased considerably in the GT (from 29% in 2024a to 38% in 2024b) and the CR (from 32% in 2024a to 38% in 2024b). Across regions, cannabis contributed just over three-quarters (76%) of admissions among individuals 18 years and younger, decreasing slightly from 79% in 2024a. Sizeable increases in cannabis use were seen for individuals 18 and younger in the WC (69% in 2024a to 82% in 2024b) and KZN (75% in 2024a to 87% in 2024b). A notable decrease was seen in GT (76% in 2024a to 59% in 2024b).

Admissions for cannabis/mandrax remained low, with rates ranging between 2% (KZN, EC and NR) and 7% (WC) (Table 2). Cannabis/mandrax admissions were largely unchanged across regions. As a secondary substance of use, cannabis/mandrax use was most common in the WC (decreasing from 38% in 2024a to 31% in 2024b), followed by GT (decreasing from 20% in 2024a to 12% in 2024b). A decrease was seen in the EC for individuals aged 18 years and younger, from 6% in 2024a to 1% in 2024b. No cannabis/mandrax was reported in the KZN for this age group during this period. Across sites, persons admitted to specialist treatment centres with cannabis/mandrax as their primary substance of use were older (national mean age: 33 years) compared to those who had cannabis as their primary substance of use (national mean age: 23 years). These ages remained the same since the 2024a period (Table 4).

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, a slight decrease was seen for females reporting cannabis/mandrax as a primary substance of use (21% to 18%). Admission rates for females using cannabis/mandrax as a primary substance ranged from 11% in GT to 31% in the WC. No females reported cannabis/mandrax use in CR, KZN or NR. When comparisons were made across regions, rates for cannabis use among females using cannabis/mandrax as a secondary substance ranged between 13% (GT) and 36% (EC). No females reported primary or secondary use in NR or KZN.

## CRACK/ COCAINE

The proportion of persons reporting crack/cocaine as their primary substance of use remained fairly stable across regions though a marginal decrease was reported for KZN, EC and WC (2-percentage point increase respectively) (Table 2). Rates ranged from 1% (CR) to 10% (KZN). Between 3% (CR) and 23% (KZN) of all persons reported using crack/cocaine as a primary or secondary substance of use. (Table 6).

The national average age of persons in treatment whose primary drug of use was crack/cocaine remained at 33 years (Table 4). In the EC, mean age at time of admission increased from 28 years to 33 years. The proportion of males reporting crack/cocaine as their primary substance of use were between 67% (CR) and 94% (EC); the CR had the highest rate for crack/cocaine use among females (n=3, 33%) compared to the other regions. Between 17% (GT) and 67% (CR) of persons who used crack/cocaine had experienced prior treatment episodes.

Rates remained low among youths aged 18 years and younger who reported crack/cocaine as a primary substance of use, ranging between 1% (WC, NR and GT) and 2% (EC). A notable decrease was seen in the EC for this age group, with proportions decreasing from 9% in 2024a to 2% in 2024b. No crack/cocaine use was reported for this age category in the CR.

TABLE 6: PRIMARY OR SECONDARY SUBSTANCE OF USE* (%): JUL-DEC 2024

| Site | Period | Alcohol | Cannabis | Cannabis/ Mandrax | Crack/ Cocaine | Heroin/ Opiates | Ecstasy | MA[a] | OTC/ PRE[b] | Total (N) |
|---|---|---|---|---|---|---|---|---|---|---|
| WC[1] | 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 |
| | 22b | 24.4 | 30.6 | 28.3 | 3.5 | 18.4 | 0.1 | 48.8 | 1.9 | 3028 |
| | 23a | 26.6 | 32.5 | 28.3 | 3.9 | 18.9 | 0.0 | 46.5 | 2 | 1483 |
| | 23b | 27.8 | 29.0 | 29.0 | 3.3 | 13.5 | 0.3 | 48.7 | 2.3 | 1454 |
| | 24a | 30.0 | 30.0 | 30.1 | 7.2 | 10.3 | 0.6 | 46.1 | 2.3 | 1726 |
| | **24b** | **33.1** | **32.6** | **26.1** | **4.9** | **12.4** | **0.3** | **44.8** | **1.7** | **1874** |

| Site | Period | Alcohol | Cannabis | Cannabis/ Mandrax | Crack/ Cocaine | Heroin/ Opiates | Ecstasy | MA[a] | OTC/ PRE[b] | Total (N) |
|---|---|---|---|---|---|---|---|---|---|---|
| KZN[2] | 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 |
| | 22b | 37.8 | 39.8 | 8.1 | 16.8 | 23.2 | 0.0 | 3.3 | 16.8 | 1927 |
| | 23a | 44.6 | 40.1 | 5.6 | 23.3 | 16.9 | 0.4 | 4.6 | 6.9 | 1054 |
| | 23b | 49.8 | 37.3 | 2.6 | 23.5 | 18.2 | 0.1 | 4.4 | 6.1 | 896 |
| | 24a | 46.4 | 41.0 | 2.9 | 26.8 | 17.5 | 0.6 | 3.9 | 5.5 | 829 |
| | **24b** | **49.0** | **40.9** | **4.8** | **23.4** | **15.6** | **0.9** | **3.1** | **6.0** | **668** |

| Site | Period | Alcohol | Cannabis | Cannabis/ Mandrax | Crack/ Cocaine | Heroin/ Opiates | Ecstasy | MA[a] | OTC/ PRE[b] | Total (N) |
|---|---|---|---|---|---|---|---|---|---|---|
| EC[3] | 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 |
| | 22b | 51.9 | 45.6 | 15.1 | 12.3 | 0.7 | 0.0 | 33.7 | 1.7 | 504 |
| | 23a | 51.0 | 26.4 | 8.7 | 5.4 | 1.2 | 0.1 | 31.5 | 5.4 | 241 |
| | 23b | 49.3 | 47.6 | 6.5 | 5.4 | 0.3 | 0.3 | 25.5 | 3.4 | 294 |
| | 24a | 54.0 | 44.1 | 6.5 | 12.3 | 1.1 | 0.0 | 19.2 | 5.4 | 261 |
| | **24b** | **56.7** | **40.0** | **4.8** | **11.1** | **0.5** | **0.8** | **19.5** | **3.0** | **395** |

| Site | Period | Alcohol | Cannabis | Cannabis/ Mandrax | Crack/ Cocaine | Heroin/ Opiates | Ecstasy | MA[a] | OTC/ PRE[b] | Total (N) |
|---|---|---|---|---|---|---|---|---|---|---|
| GT | 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 |
| | 22b | 17.9 | 44.8 | 10.1 | 4.0 | 19.5 | 0.1 | 36.5 | 2.0 | 8199 |
| | 23a | 16.3 | 45.1 | 10.5 | 4.5 | 20.7 | 1 | 33.9 | 1.8 | 7482 |
| | 23b | 16.6 | 43.4 | 13.5 | 5.7 | 23.9 | 0.1 | 38.9 | 1.9 | 6040 |
| | 24a | 18.4 | 43.6 | 15.6 | 7.9 | 24.7 | 0.0 | 34.2 | 2.6 | 4782 |
| | **24b** | **26.4** | **50.4** | **11.4** | **4.8** | **13.3** | **0.3** | **28.5** | **3.0** | **3192** |

| Site | Period | Alcohol | Cannabis | Cannabis/ Mandrax | Crack/ Cocaine | Heroin/ Opiates | Ecstasy | MA[a] | OTC/ PRE[b] | Total (N) |
|---|---|---|---|---|---|---|---|---|---|---|
| NR[4] | 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 |
| | 22b | 20.1 | 45.1 | 1.9 | 15.5 | 49.3 | 0.2 | 9.4 | 0.9 | 1274 |
| | 23a | 23.1 | 50 | 3.0 | 13.9 | 37.8 | 0.0 | 11.1 | 1.3 | 772 |
| | 23b | 33.9 | 50 | 6.1 | 10.2 | 33.2 | 0.2 | 11.7 | 1.0 | 410 |
| | 24a | 25.6 | 49.0 | 1.9 | 13.8 | 29.8 | 0.2 | 10.8 | 1.4 | 980 |
| | **24b** | **34.0** | **48.7** | **3.4** | **9.0** | **21.6** | **0.0** | **6.8** | **1.4** | **709** |

| Site | Period | Alcohol | Cannabis | Cannabis/ Mandrax | Crack/ Cocaine | Heroin/ Opiates | Ecstasy | MA[a] | OTC/ PRE[b] | Total (N) |
|---|---|---|---|---|---|---|---|---|---|---|
| CR[5] | 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 |
| | 22b | 43.5 | 34.9 | 9.2 | 3.1 | 6.2 | 0.0 | 29.8 | 2.7 | 402 |
| | 23a | 51.0 | 42.9 | 5.3 | 4.9 | 4.9 | 0.3 | 27.9 | 4.5 | 247 |
| | 23b | 56.0 | 30.3 | 7.7 | 3.0 | 5.3 | 0.0 | 18.3 | 2.7 | 300 |
| | 24a | 47.6 | 43.5 | 5.7 | 3.0 | 3.0 | 0.0 | 17.6 | 2.1 | 336 |
| | **24b** | **45.6** | **48.3** | **5.3** | **2.7** | **1.9** | **0.4** | **18.3** | **4.2** | **263** |

*Proportion of persons who reported these substances as primary or 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

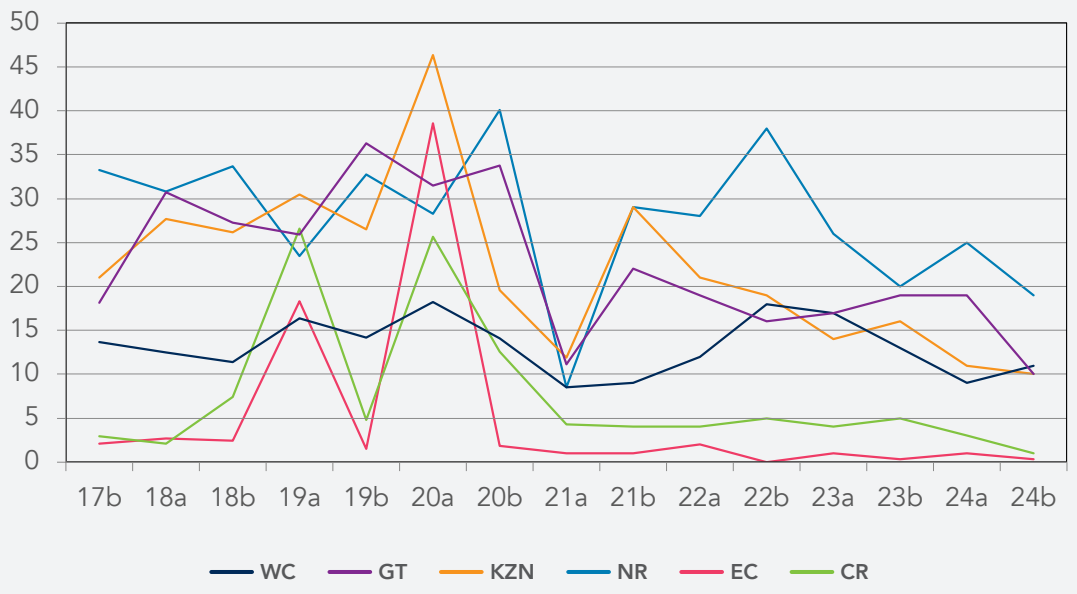
Nyaope and whoonga[3] have been incorporated into the heroin-related admission category to improve accuracy of heroin surveillance. Nationally, heroin/opiates comprised 10% of all treatment admissions for the current period. Between <1% (EC) and 19% (NR) of persons in specialist treatment centres reported heroin/opiates as their primary drug of use. Decreases were noted for heroin/opiates admissions over the last two reporting periods for both GT (19% to 10%) and NR (25% to 19%). Only two heroin/opiates-related admissions were reported in the CR and one in the EC for this period (Figure 5).

Nationally, the average age of persons who had heroin/opiates as their primary substance of use was 34 years, with mean ages ranging between 17 years (CR) and 39 years (WC) (Table 4). Between 1% (EC) and 22% (NR) of persons attending specialist treatment centres reported heroin/opiates as a primary or secondary substance of use. While national rates show heroin/opiates to most commonly be smoked (68%), a sizeable proportion of service users also report injection use (30%). Across sites between 3% (KZN) and 40% (GT) of individuals who had heroin/opiates as their primary substance of use reported injecting the drug. There was only one case of reported injection use for heroin/opiates in the CR during this period, and no injection use reported for heroin/opiates in the EC.

When comparing genders, more males reported heroin/opiates as a primary substance of use than females, ranging between 80% (WC) and 94% (NR). WC had the highest heroin/opiates rate as a primary substance of use among females (n = 40, 20%). The WC (72%) remains the province with the highest readmission rates among persons admitted for heroin/opiate use compared to other regions, decreasing from 84% in 2024a.

Service users aged 18 years and younger who reported heroin/opiate use ranged from 1% (WC and EC) to 3% (NR); no heroin/opiate use was reported in KZN, GT and CR for this age group.

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




[3] Nyaope and whoonga are street names for low-grade 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 (DoH: Province of KwaZulu-Natal. Whoonga, wceregistrations@soafrica.com)

## OVER-THE-COUNTER AND PRESCRIPTION MEDICINES

Admission rates for OTC/PRE-medicines as primary substance of use remained low, ranging between 1% (NR, WC, and GT) and 3% (CR and KZN) (Table 2); the national rate for OTC/PRE-medication as a secondary substance of use remains low ranging from 1% (NR) to 6% (KZN). Nationally, more admissions were made for females (52%) versus males (48%). Males and females were equally admitted for OTC/PRE-medicine use in the NR and KZN (50% respectively). The regions with the highest rate for OTC/PRE-medicine admissions among females was CR (71%), followed by GT (52%). EC was the only region where more males (56%) than females (44%) were admitted for OTC/PRE misuse.

The national average age for OTC/PRE-medicine treatment was 35 years, ranging from 27 years (NR) to 40 years (EC). The mean age at admission decreased in CR (from 47 years in 2024a to 37 years in 2024b), in the WC (from 39 years in 2024a to 34 years in 2024b) and in the NR (from 31 years in 2024a to 27 years in 2024b) (Table 4). OTC/PRE-medicine admissions ranged from 1% (NR) to 4% (KZN) among individuals 18 years and younger. OTC/PRE-medicine misuse was not indicated for the WC, EC, and CR for persons 18 years and younger (Table 5).

OTC/PRE-medicines as primary or secondary substances of use ranged between 1% (NR) and 6% (KZN) (Table 6). In the EC, the admission rate for OTC/PRE-medicine as a primary substance of use decreased from 4% (2024a) to 2% (2024b). Medicines used included benzodiazepines, analgesics, codeine products and sleeping pills. Nationally, 401 (6%) individuals were admitted for codeine misuse (single product); and 108 (27%) individuals who reported a first product, also reported a second codeine product of misuse, increasing from 11% in 2024a.

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

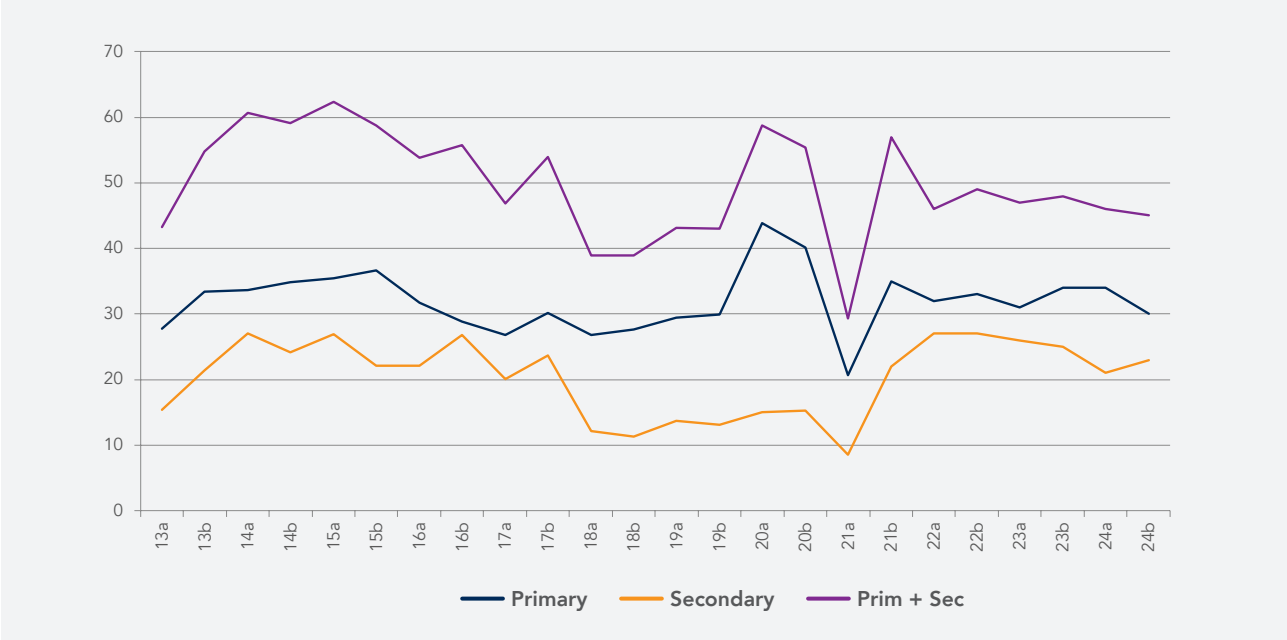
Admissions for ecstacy as a primary substance of use were low and only indicated in the WC (<1%), GT and KZ (1% respectively) (Table 2). Rates for ecstasy as primary or secondary substance of use were also very low (<1% to 1%) across sites. (Table 6).

The proportion of individuals reporting MA ('TIK') as their primary substance of use was highest in the WC (30% in 2024b decreasing from 34% in 2024a), followed by GT (16% in 2024b decreasing from 24% from 2024a). Admissions for treatment of MA use was lowest in KZN at 2% (Table 2).

The national average age of individuals reporting MA as their primary drug of use was 32 years. Average age ranged between 26 (EC and CR) and 35 years (WC and KZN) (Table 4). Nationally, males (75%) represented the group with the highest rates for MA admissions compared to females (25%); this trend has been maintained for the last few reporting periods. Males were also in the majority for MA admissions regionally, ranging from 66% in the NR to 91% in KZN. The NR had the highest proportion of females (34%) admitted for MA use compared to other regions.

National rates for MA route of administration showed that the majority of individuals smoked the substance (91%). When rates were compared across regions, a similar profile emerged with MA mostly being smoked, varying between 64% (KZN) to 100% (CR). Most individuals admitted for MA use reported daily use (57%), remaining stable over the last few reporting periods. The highest proportions for MA as a primary or secondary substance of use was found for the WC (45%) (Figure 6). This was followed by GT (29%, decreasing from 34% in 2024a) and the NR (7%, (as above) decreasing from 11% in 2024a).

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




Among persons aged 18 years and younger, 4% (n=47) reported MA as their primary substance of use. MA was indicated as a primary or secondary substance of use among 8% (n=99) of persons 18 years and younger. The EC region accounted for the highest number of persons 18 years and younger (11%) reporting MA as a primary substance of use. KZN reported no MA use for 18 years and younger during this period.

CAT/KHAT use remained low across regions. Nationally, 4% of individuals reported CAT/KHAT as their primary or secondary substance of use at the time of admission. Compared to the other regions, GT reported the highest proportions for CAT/KHAT-related admissions (6%), followed by CR and NR (2%, respectively). Rates for CAT/KHAT as primary or secondary drug of use varied from 1% (WC, KZN and EC) to 9% (GT).

## INHALANTS

Nationally, inhalant use comprised a small proportion of admissions at less than 1%. Admission rates for inhalant use remained low across regions, ranging between <1% (CR, KZN, and GT) to 2% (NR). Inhalants were not reported in the EC and the WC over this period. These proportions are 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.

## POLY-SUBSTANCE USE

Poly-substance use remained high with just over half (53%) of individuals admitted to treatment indicating the use of more than one substance. By region, rates ranged between 41% (NR) and 61% (WC).

## MENTAL HEALTH AND OTHER PHYSICAL COMORBIDITIES

Nationally, 19% (n=1 384) of individuals admitted to treatment presented with a dual diagnosis. Across regions, the largest proportion of persons in treatment presenting with a dual diagnosis reported mental health problems (47%), followed by respiratory diseases (13%), gastrointestinal illnesses and blood pressure illnesses (9% respectively). Nationally, depression (33%), anxiety and panic disorders (19%) and sleep disorders (14%) were the three most common mental illnesses reported.

# **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) and sex workers who inject drugs. 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 being piloted.

During the reporting period TB HIV Care operated in the Eastern Cape (Nelson Mandela Bay District), Gauteng (Tshwane), KwaZulu-Natal (eThekwini), 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. In Gauteng Anova Health Institute's Jab Smart Project operated in the City of Johannesburg, Indibano Victim Empowerment Project in Sedibeng, Tintswalo Home Based Care in Ekurhuleni and Tsepo Ya Bana in West Rand. Inkunzi Isematholeni Foundation provided harm reduction services in uMgungundlovu District. Financing of harm reduction services were through the Global Fund (Cape Town, eThekwini, Ekurhuleni, Johannesburg, Nelson Mandela Bay, uMgungundlovu and West Rand Districts), PEFAR/CDC (Tshwane and Ehlanzeni) and City of Tshwane (Tshwane). Harm reduction services for sex workers who inject drugs were provided through the Global Fund in Buffalo City (Eastern Cape), Lejweleputswa (Free State) and West Rand (Gauteng).

The data below reflects service delivery data for reporting period July - December 2024.

## EASTERN CAPE

In *Buffalo City* 103 female sex workers who inject drugs were reached with harm reduction services. And 2,730 needles were distributed and 79% returned. In *Nelson Mandela Bay* 607 unique PWID accessed services, with 184 500 needles and syringes distributed and 105% returned. A total of 331 PWID tested for HIV, among whom 21 tested positive. A total of 21 people started ART, with 35 PWID confirmed to be virally suppressed during the period. 712 people were screened for tuberculosis (TB), with 83 being symptomatic, 8 diagnosed; 8 starting treatment and 0 with confirmed cure. A total of 61 people were screened for HCV antibodies with 45 being reactive; 11 people had confirmed infection (of 25 tested) and six people were started on HCV treatment. Of the 70 tested for HBV surface antigen (HBsAg), 4 were reactive. Opioid substitution therapy (OST) was started during this period with 63 people on OAT at the end of the period. A total of 260 human rights violations were reported, mostly involving the confiscation and destruction of injecting equipment (59%). Five deaths among people who use drugs were reported during this period, no fatal overdoses reported.

## FREE STATE

In *Lejweleputswa* 24 female sex workers who inject drugs were reached with harm reduction services. And 990 needles were distributed and 76% returned.

## GAUTENG

In *Ekurhuleni* 1,1128 unique PWID accessed the services, with 331,120 needles and syringes distributed and 76% returned. A total of 449 PWID tested for HIV, among whom 159 tested positive; 151 people were put on ART. A total of 25 people were confirmed to be virally suppressed. A total of 1,053 PWID were screened for TB, with 4 being symptomatic, 1 TB case was confirmed, and 1 person was started on treatment. A total of 127 people were screened for HCV antibodies with 126 being reactive; 48 people had confirmed infection (of 119 tested) and 48 people were started on HCV treatment. Of the 127 tested for HBV surface antigen (HBsAg), 0 were reactive. A total of 245 people were on OST at the end of the period. A total of 223 human rights violations were reported, mostly due to the confiscation of injecting equipment (53%). Seven deaths among people who use drugs were reported during this period, no fatal overdoses reported.

In *Johannesburg* 11,567 unique PWID accessed the services, with 1,456,560 needles and syringes distributed and 82% returned. A total of 4, 380 PWID tested for HIV, among whom 187 tested positive and 161 were started on ART. Twenty-six PWID were confirmed to be HIV virally suppressed. A total of 12,311 were screened for TB, with 69 being symptomatic, 2 diagnosed, 2 starting on TB treatment and 0 reporting cure. A total of 175 people were screened for HCV antibodies with 117 being reactive. Forty-three people had confirmed infection (of 58 tested) and six people started HCV treatment. Of the 228 tested for HBV surface antigen (HBsAg), 5 were reactive. A total of 386 PWUD/ID were on OST at the end of the period. Overall, 1,593 human rights violations were reported, the majority (43%) involving the confiscation of injecting

equipment. One death was reported among people who use drugs due to a fatal drug-related overdose.

In *Sedibeng* 2,754 unique PWID accessed the service with 474,630 needles and syringes distributed and 84% returned. A total of 678 PWID tested for HIV, among whom 81 tested positive and 72 started on ART. A total of 45 PWID were confirmed to be HIV virally suppressed. Overall, 3,153 people who use drugs were screened for tuberculosis, with 46 being symptomatic, 0 infections confirmed and 0 receiving treatment. A total of 30 people were screened for HCV antibodies with 27 being reactive. Twenty-four people had confirmed infection (of 27 tested) and 16 people started HCV treatment. Of the 47 tested for HBV surface antigen (HBsAg), 1 was reactive. A total of 197 PWUD/ID were on OST at the end of the period. Overall, 664 human rights violations were reported, most (74%) linked to confiscation of injecting equipment and assault. Nine deaths among people who use drugs were reported during this period, with no fatal overdoses reported.

In *Tshwane* 5,206 unique PWID accessed the services, with 738,420 needles and syringes distributed; and 89% returned. A total of 907 people who use drugs tested for HIV among whom 249 tested positive and 287 were started on ART. HIV viral suppression data was reported for 69 people. Overall, 2,449 people who use drugs were screened for tuberculosis with 5 being symptomatic, and 0 diagnosed. A total of 44 people were screened for HCV antibodies with 32 being reactive. Twenty-seven people had confirmed infection (of 33 tested) and eight people started HCV treatment. Of the eight tested for HBV surface antigen (HBsAg), 0 were reactive. A total of 984 people were on OST at the end of the period. Ninety-one human rights violations were recorded; most (74%) linked to confiscation of injecting equipment. Eighteen deaths were reported among people who use drugs during this period, no fatal overdoses were reported.

In *West Rand* 1,042 unique PWID accessed the services, with 282,405 needles and syringes distributed; and 99% returned. A total of 428 people who use drugs tested for HIV among whom 26 tested positive and 25 were started on ART. HIV viral suppression data was reported for 40 people. A total of 788 people who use drugs were screened for tuberculosis with 32 being symptomatic, and 2 people diagnosed and 1 starting treatment. A total of 56 people were screened for HCV antibodies with 44 being reactive. Nineteen people had confirmed infection (of 44 tested) and 12 people started HCV treatment. Of the 55 tested for HBV surface antigen (HBsAg), 0 were reactive. A total of 65 people were on OST at the end of the period. Overall, 170 human rights violations were recorded, 76% due to confiscation of injecting equipment. Nine deaths were reported among people who use drugs during this period, no fatal overdoses reported. Additionally, 151 female sex workers who inject drugs were engaged in harm reduction services, with 11,565 needles distributed and 71% returned.

## KWAZULU-NATAL

In *eThekwini* 1,784 unique PWID accessed services, with 279,675 needles and syringes distributed and 103% returned. A total of 798 tested for HIV, among whom 39 tested positive and 36 were on ART. HIV viral load suppression was confirmed in 55 PWID. A total of 1,007 people who use drugs were screened for tuberculosis, 52 were symptomatic, 0 diagnosed. A total of 134 people were screened for HCV antibodies with 50 being reactive, 38 people had confirmed HCV infection (of 46 tested) and 38 started HCV treatment. Of the 145 PWID tested for HBV surface antigen (HBsAg), 6 were reactive. A total of 427 PWUD/ID were on OST at the end of the period. Overall, 475 human rights violations were reported, 81% linked to the confiscation/destruction of needles. Seven deaths were reported among people who use drugs, no fatal overdoses were reported.

In *uMgungundlovu*, 1,096 unique PWID accessed the services, with 110,325 needles and syringes distributed and 97% returned. A total of 452 PWID tested for HIV, among whom 19 tested positive and 17 started on ART. A total of 16 PWID were confirmed to be virally suppressed during this period. A total of 1,280 people who use drugs were screened for TB, with 52 being symptomatic and 0 diagnosed. A total of 88 people were screened for HCV antibodies with 38 being reactive, 16 people had confirmed HCV infection (of 23 tested) and 16 started HCV treatment. Of the 157 PWID tested for HBV surface antigen (HBsAg), 2 were reactive. A total of 166 PWUD/ID were on OST at the end of the period. Overall, 327 human rights violations were reported, the majority (81%) linked to the confiscation of injecting equipment. Six deaths were reported among people who use drugs during this period, including one fatal overdose.

In King Cetshwayo, 88 female sex workers who inject drugs were engaged in harm reduction services, with 1,710 needles distributed and 85% returned.

## MPUMALANGA

In *Ehlanzeni* 689 unique PWID accessed the services, with 62,078 needles and syringes distributed and 78% returned. A total of 232 persons tested for HIV, among whom 32 tested positive and 30 were started on ART and 18 PWID were confirmed to be virally suppressed during this period. A total of 232 people were screened for tuberculosis, with 40 being symptomatic; 2 TB case was confirmed and 1 person started treatment. A total of 14 people were screened for HCV among whom 12 were reactive and 12 had confirmed infection (of 12 tested). Of the 145 people were tested for HBsAg, with 4 people identified to be reactive. A total of 257 PWID were on OST at the end of the period. Overall, 153 human rights violations were reported; 66% linked to confiscation and destruction of injecting equipment. Seven deaths among people who use drugs were reported during this period, including one fatal overdose.

## WESTERN CAPE

In the *Cape Metro* 1,886 unique PWID accessed services, with 942,510 needles and syringes distributed and 91% returned. A total of 900 PWID tested for HIV, among whom 90 tested positive and 77 started ART and 19 PWID were confirmed to be HIV viral suppressed during the period. A total of 1,420 PWUD/ID were screened for TB, with 17 being symptomatic, 1 diagnosed, 1 starting treatment and 0 people cured. A total of 27 people were screened for HCV antibodies with 16 being reactive, one person had confirmed infection (of eight tested) and one started HCV treatment. Of the 27 PWID were screened for HBsAg and 3 were reactive. A total of 342 PWUD/ID were on OST at the end of the period. Overall, 295 human rights violations were reported, the majority (83%) linked to confiscated/ destroyed needles and syringes. No deaths were reported among people who use drugs during this period.

### TABLE 7: PWID ACCESSING NEEDLE AND SYRINGE SERVICE AND BEHAVIOUR CHANGE INTERVENTION PROGRAM (JULY - DECEMBER 2024)

| Province | Health district | Male | Female | Trans | Median age (yrs)* |
|---|---|---|---|---|---|
| | | | % | | |
| **Eastern Cape** | Nelson Mandela Bay (n=607) | 70 | 30 | 0 | - |
| **Gauteng** | Ekurhuleni (n=1,128) | 91 | 9 | 0 | - |
| | Johannesburg (n=11,567) | 95 | 5 | | - |
| | Sedibeng (n=2,754) | 93 | 7 | 0 | - |
| | Tshwane (n=5,206) | 94 | 6 | 0 | - |
| | West Rand (n=1,042) | 85 | 15 | 0 | |
| **KwaZulu-Natal** | eThekwini (n=1,784) | 87 | 13 | 0 | - |
| | uMgungundlovu (n=1,096) | 87 | 13 | 0 | - |
| **Mpumalanga** | Ehlanzeni (n=689) | 92 | 8 | 0 | - |
| **Western Cape** | Cape Metro (n=1,886) | 77 | 23 | 0 | - |

*Data on specific age not captured

### TABLE 8: COMPARISON OF PROPORTION OF PEOPLE WHO USE DRUGS ACCESSING NEEDLE AND SYRINGE SERVICES (JULY - DECEMBER 2024) WITH CENSUS DATA - BY DISTRICT[1]

| Province | District | | Black African | Indian | Coloured | White |
|---|---|---|---|---|---|---|
| | | | % | | | |
| **Eastern Cape** | Nelson Mandela Bay | Population [1] | 63 | 1 | 19 | 16 |
| | | Accessed service | 30 | 0 | 26 | 43 |
| **Gauteng** | Ekurhuleni | Population [1] | 85 | 2 | 3 | 10 |
| | | Accessed service | 91 | 1 | 4 | 4 |
| | Johannesburg | Population [1] | 85 | 4 | 5 | 7 |
| | | Accessed service | 95 | 0 | 3 | 2 |
| | Sedibeng | Population [1] | 88 | 1 | 1 | 10 |
| | | Accessed service | 96 | 0 | 1 | 3 |
| | Tshwane[2] | Population [1] | 83 | 2 | 2 | 13 |
| | | Accessed service | 96 | 0 | 1 | 3 |
| | West Rand | Population [1] | 86 | 1 | 3 | 10 |
| | | Accessed service | 81 | 0 | 7 | 12 |
| **KwaZulu-Natal** | eThekwini | Population [1] | 71 | 20 | 3 | 6 |
| | | Accessed service | 89 | 3 | 5 | 3 |
| | uMgungundlovu | Population [1] | 81 | 10 | 2 | 6 |
| | | Accessed service | 99 | 0 | 1 | 0 |
| **Mpumalanga[2]** | Ehlanzeni | Population [1] | 97 | <1 | <1 | 2 |
| | | Accessed service | ND | ND | ND | ND |
| **Western Cape** | Cape Metro | Population [1] | 46 | 2 | 35 | 16 |
| | | | 3 | 0 | 91 | 6 |

[1]Statistics South Africa, 2022 Census. Where proportions do not add to 100% it is due to rounding, or participants selecting "Other" demographic group.[2] ND: Data not captured.

TABLE 9: PEOPLE WITH OPIOID DEPENDENCE ON OPIOID SUBSTITUTION THERAPY, LOST TO FOLLOW-UP AND EXITED (JULY - DECEMBER 2024) - 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 |
|---|---|---|---|---|---|---|---|---|
| Nelson Mandela Bay | Non-injecting | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | PWID | 0 | 64 | 0 | 1 | 0 | 0 | 63 |
| | **Total** | **0** | **64** | **0** | **1** | **0** | **0** | **63** |
| Ekurhuleni | Non-injecting | 1 | 0 | 0 | 0 | 0 | 0 | 1 |
| | PWID | 118 | 142 | 0 | 0 | 16 | 0 | 244 |
| | **Total** | **119** | **142** | **0** | **0** | **16** | **0** | **245** |
| Johannesburg | Non-injecting | 16 | 12 | 0 | 0 | 1 | 0 | 27 |
| | PWID | 212 | 199 | 0 | 4 | 48 | 0 | 359 |
| | **Total** | **228** | **211** | **0** | **4** | **49** | **0** | **386** |
| Sedibeng | Non-injecting | 19 | 7 | 0 | 0 | 2 | 2 | 22 |
| | PWID | 78 | 108 | 2 | 6 | 7 | 0 | 175 |
| | **Total** | **97** | **115** | **2** | **6** | **9** | **2** | **197** |
| Tshwane | Non-injecting | 349 | 48 | 28 | 8 | 86 | 6 | 325 |
| | PWID | 593 | 75 | 11 | 6 | 10 | 4 | 659 |
| | **Total** | **942** | **123** | **39** | **14** | **96** | **10** | **984** |
| West Rand | Non-injecting | 0 | 6 | 0 | 0 | 0 | 0 | 6 |
| | PWID | 0 | 62 | 0 | 0 | 3 | 0 | 59 |
| | **Total** | **0** | **68** | **0** | **0** | **3** | **0** | **65** |
| eThekwini* | Non-injecting | 130 | 81 | 5 | 5 | 0 | 0 | 211 |
| | PWID | 177 | 46 | 3 | 9 | 1 | 0 | 216 |
| | **Total** | **307** | **127** | **8** | **14** | **1** | **0** | **427** |
| uMgungundlovu | Non-injecting | 0 | 21 | 0 | 4 | 0 | 0 | 17 |
| | PWID | 0 | 161 | 0 | 8 | 4 | | 149 |
| | **Total** | **0** | **182** | **0** | **12** | **4** | **0** | **166** |
| Ehlanzeni | Non-injecting | | | | | | | 0 |
| | PWID | 160 | 73 | 28 | 3 | 0 | 1 | 257 |
| | **Total** | **160** | **73** | **28** | **3** | **0** | **1** | **257** |
| Cape Metro | Non-injecting | 34 | 9 | 0 | 0 | 0 | 0 | 43 |
| | PWID | 201 | 105 | 6 | 12 | 1 | 0 | 299 |
| | **Total** | **235** | **114** | **6** | **12** | **1** | **0** | **342** |

# IMPLICATIONS FOR POLICY AND FUTURE RESEARCH

## SELECTED IMPLICATIONS FOR POLICY/PRACTICE[4]

During the Phase 57 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:

- Concerns around wide-reaching funding cuts and its impact on drug-related research and services related to vulnerable groups such as men having sex with men (MSM), sex workers, people living with HIV/AIDS.
- A need for evidence-based prevention initiatives that target persons under 18 in the NR, including linking younger patients to organisations that offer vocational training.
- People who use drugs should be actively referred for Hepatitis C testing as a routine part of their care. Regular screening of pregnant or breastfeeding women for alcohol or substance use should be conducted, with referrals to treatment provided as needed.
- Concerns raised regarding the high proportion of heavy episodic drinkers in the NC and FS, with limited to no access to care, especially in rural areas.
- Concerns around unregulated alcohol use in the NC and FS; better regulation is required.
- The practice model for OST in the EC can be used to inform OST models in other less resourced provinces.
- Encourage all service providers to begin collecting data on drug overdoses (fatal and non-fatal) across the country. Highlights the need for overdose surveillance systems.
- 'On-the-spot testing' of street drugs is needed to identify the range of illicit substances commonly used as adulterants or bulking agents in drugs such as heroin, methamphetamine, and crack/cocaine.
- Screening for co-occurring health conditions and facilitating referrals to care should be integrated into services for people with substance use disorders.
- Increase the availability of low-threshold services - mobile clinics can play a role in delivering substance use outpatient treatment services but also screening co-occurring health conditions and facilitating referrals to care for individuals with substance use disorders, especially in hard-to-reach or resource-limited settings.
- Promoting oral health through patient education is an essential aspect of comprehensive care and should be integrated into health promotion initiatives.
- Monitor the use of hookah pipe (HP), especially in GT.
- Investigate the scarcity of youth-centred services that remain under-resourced due to poor funding and conflicting priorities.
- The need to train/equip police to detect cannabis-impaired driving and prosecute impaired driving.
- Revision of education policies is required – substance use needs to be integrated into the curriculum as early as possible.
- Address the lack of enforcement of regulations and legislation at different levels (treatment facility, societal, community, personal/individual, etc.).
- Policy recommendations on cannabis legislation from a public health perspective are needed e.g., monitoring of private use of cannabis in the home in terms of proximity to young children (e.g. accessibility of edibles).
- Policy updates are needed on young people and facilitators/barriers to service access; legislation must also address key populations like children living on the street.
- Increased service coverage to reach female sex workers who inject drugs, where services did not previously go.

## SELECTED ISSUES TO MONITOR

- Monitor dropout rates for in and outpatient care (especially in week 5) in MP.
- Monitor alcohol and drug usage among young people in Limpopo, especially Over-the-counter (OTC) medication use.
- Monitor the use of vaping products and e-cigarettes (NR and KZN); consideration should be given to increasing literacy on vaping harms, health promotion messaging is encouraged.
- Monitor fentanyl use in SA, given the increase in fentanyl trafficking.
- Monitor the increase in cannabis use among young people, specifically in CR.
- Monitor the increase in methaqualone use in EC as both a primary and secondary substance of use.
- Monitor hookah pipe use and the various substances mixed or used in combination.
- Proliferation of registered and unregistered treatment centres in Limpopo that are not being fed into systems like SACENDU – unregistered facilities do not always provide established, evidence-based care.

[4] Outcomes emanating from regional meetings held in GP, KZN, PE and CT

- Notable scale-up of OST in existing harm reduction sites and expansion to several new areas.
- High levels of human rights violations were reported, particularly in Johannesburg.
- Uptake and consistent engagement with female sex workers reached with needle and syringe programmes.
- Outcomes of the recent expansion of OST and viral hepatitis services to an additional three districts.
- Supply of sterile injecting equipment, understanding reasons for reductions in distribution numbers and barriers to supplying sufficient quantities needed for public health impact.

Phase 57 of the SACENDU Project highlighted several conditions/factors that need to be carefully monitored over time:

## SELECTED TOPICS FOR FURTHER RESEARCH/INVESTIGATION

Phase 57 of the SACENDU Project System highlighted the following topic for further research/investigation:

- Enhance surveillance mechanisms (Early Warning Systems) to capture a comprehensive picture of substance use trends.
- Consider conducting household surveys to gather prevalence data.
- Drop in admission numbers nationally - funding cuts impacted service delivery significantly, but other barriers to treatment access also need to be investigated.
- Consider ways to decrease treatment access delay for alcohol - identify interventions that can be used to reduce this delay.
- Cause of death among reported fatalities among people who use drugs, which are not assessed to be overdose related.

## LIMITATIONS

Phase 57 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.

# SACENDU

South African Community Epidemiology Network on Drug Use

**SACENDU is funded by the SAMRC, National Department of Social Development and the National Department of Health**

**FOR FURTHER INFORMATION CONTACT**
Mental Health, Alcohol, Substance Use and Tobacco Research Unit
South African Medical Research Council
PO Box 19070
7505 Tygerberg (Cape Town)
South Africa

PH: +27-21-938-0398 | E-mail: nancy.hornsby@mrc.ac.za
https://www.samrc.ac.za/intramural-research-units/atod-sacendu