



Substance Abuse

1. Introduction

The 26th of June is International Day Against Drug Abuse and Illicit Trafficking. Annually, the South African Depression and Anxiety Group (SADAG) commemorates this day as Substance Abuse Awareness Day. The use, misuse and abuse of alcohol, illicit drugs, over the counter and prescription medications (OTC/PRE) affect the health and well-being of millions of people throughout the world. Substance abuse refers to the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs. One of the key impacts of substance abuse on society is the negative health consequences experienced by its members. Drug and alcohol use also puts a heavy financial burden on individuals, families and society.¹

South Africa has a particularly serious problem with alcohol and substance abuse. Drug consumption in South Africa is estimated to be twice the world norm while it is estimated that up to 60% of crimes committed involve the use of substances and 80% of male youth deaths are alcohol related. Furthermore, the rate of foetal alcohol syndrome disorder (FASD) in South Africa is five times that of the United States.² Substance abuse is underpinned by complex social, historical and economic dimensions.

2. National Drug Master Plan

Cabinet has approved the *Prevention and Treatment for Substance Use Disorder Policy*, which seeks to introduce gamechangers in curbing the scourge of substance abuse in the country. This would enable the sector to review current outdated legislation and address emerging trends.³ At its core is the *National Drug Master Plan* (NDMP) which is our “national blueprint to combat drug abuse and illicit drug

trafficking and mitigate its negative impact on the poor, vulnerable and other key populations in our communities”.⁴ According to the NDMP, addiction “is a chronic, relapsing disease that affects both the brain and behaviour. In many but not all cases, it involves the use of nicotine, alcohol and other drugs. Addiction often originates with use in adolescence when the brain is still developing and is more vulnerable to their effects. If untreated, it can become a chronic and relapsing condition, requiring ongoing professional treatment and management”.⁵

Substance abuse affects cognitive and physical functioning, reduces self-control, exacerbates financial difficulties and other family stressors, and creates conflict which can result in interpersonal violence and gender-based violence. Alcohol and drugs effect changes in the brain which can be long lasting and which can lead to the harmful behaviours seen in people who abuse them.⁶ “While South Africa has progressive legislation on preventing and treating drug and alcohol dependency, and a comprehensive National Drug Master Plan aligned to the latest strategies endorsed by the World Health Organisation (WHO), implementation is hampered by a lack of funding and ‘old ideas of treatment’”, says Dr Eugene Allers, a member of the South African Society of Psychiatrists (SASOP).⁷

3. Drug Use

Illicit drug use has increased substantially in South Africa and is associated with numerous socio-demographic characteristics.⁸ Earlier this year, Social Development Deputy Minister Ganief Hendricks⁹ told the Parliamentary Portfolio Committee on Social Development that, according to the SASOP, one out of every five adults abuse mind-altering substances.¹⁰ The most commonly used addictive substances include

the manufactured drug methamphetamine, colloquially known as tik, which is cheap and widely used in the Cape Flats; nyaope/whoonga, which is mixture of heroin, ARVs and other substances including cocaine and prescription drugs¹¹; as well as heroin, ecstasy and mandrax. South Africa was identified in 2022 by Harm Reduction International in its *Global State of Harm Reduction Report* as having become one of the world's largest methamphetamine markets.¹²

Research found that “recent drug use was associated with having multiple sexual partners in the last year, having an earlier sexual debut, reporting hazardous or harmful alcohol use and alcohol dependence, ever experiencing IPV¹³ and experiencing psychological distress, and being less likely to have ever been tested for HIV”.¹⁴ According to the *World Drug Report 2021*, the population most at risk of using drugs, young people aged 15–34, is projected to grow in the next decade, in particular in low-income countries. The average age for drug dependency in South Africa is a staggering 12, with 50% of South African teens drinking alcohol.¹⁵

4. Alcohol Abuse

According to reports from the National Department of Health, South Africans spent R7.7 billion on alcohol between December 25 and December 31, 2024.¹⁶ The high alcohol consumption during this period is linked to increased risks of accidents, violence, and health problems. A 2014 study in the *South African Medical Journal* found that “the annual cost to the country of alcohol abuse alone, in terms of absenteeism, lost productivity, health and welfare costs, and alcohol-related crime is estimated at up to 10% of the gross domestic product, or as much as R37.9 billion annually”.¹⁷ Deputy Minister Ganief Hendricks emphasized, “you can imagine how much it costs the country, especially its causal relations to gender-based violence and femicide, and all the social ills”.¹⁸ Changes in behaviour associated with alcohol are also a major cause of intentional and unintentional injuries, either to the drinker or to others. It is also an important cause of professional absenteeism and low performance, as well as family violence and disruption. Alcohol is also a potent teratogen¹⁹ and a cause of neurological and psychiatric disturbances.²⁰ However, as opposed to tobacco that is always harmful, drinking alcohol can be a harmless

activity that is very strongly rooted in our society. As a result of this duality, it becomes particularly difficult to delineate effective measures to reduce consumption, and to implement them.²¹

Alcohol is one of the key risk factors for the Western Cape's exceptionally high levels of interpersonal violence and is one of several important contributors to the disease burden, as highlighted by the Khayelitsha Commission.²² The descriptive analysis of alcohol-related trauma cases presented to the health facilities serving Khayelitsha revealed that more than half of the patients (52 per cent) injured as a result of violence were under the influence of alcohol.²³ “The consumption of alcohol is a known risk factor for the perpetration of violence by increasing aggressive behaviour and vulnerability among victims, who are more likely to provoke aggression and less able to defend themselves. In addition, alcohol consumption has a deleterious effect on a range of other health outcomes; it undermines the social fabric in communities and relationships”.²⁴

5. Impact of Substance Abuse

Dr AP Motsoaledi, Minister of Health, outlining the *Health Sector Drug Master Plan 2019-2025*, pointed out that local studies have identified the link between substance abuse and various health and social problems. He highlighted mental and physical health problems, communicable and non-communicable diseases, child abuse and neglect, family violence, intentional and unintentional injuries, road accidents and premature deaths. “Abuse of alcohol and other psychoactive substances places a heavy burden on public health systems in terms of the prevention, treatment, care and rehabilitation of substance use disorder and their health-related consequences”.²⁵ Substance abuse contributes significantly to a range of health-related conditions such as HIV/AIDS and tuberculosis, as well as chronic conditions such as cardiovascular diseases, cancers and mental disorders.

Socio-economic factors such as poverty, inequality, and unemployment remain key contributing elements to the increased use of drugs and the development of substance use disorders.²⁶ Pope Francis wrote in *Amoris Laetitia*²⁷ that drug abuse is “one of the scourges of our time, causing immense suffering and even breakup for many families. The same is true of alcoholism, gambling and other addictions...

We see the serious effects of this breakdown in families torn apart, the young uprooted and the elderly abandoned, children who are orphans of living parents, adolescents and young adults confused”.²⁸

Research conducted at the Soshanguve South African National Council on Alcoholism and Drug Dependence (SANCA) Rehabilitation Centre reported that the results of the study “identified the lack of a sense of belonging and the desire to belong within social groups, which include friends, family, and the surrounding communities at large, as contributors to youth drug misuse. Other factors, that include the family environment, community attitude, peer-pressure, drug availability and distribution, poverty and unemployment, curiosity, bottled emotions, and personality emerged as youth drug-misuse determinants”.²⁹ Ms Chantelle Pepper, Chairperson, Western Cape Substance Abuse Forum (the Forum) pointed out in a presentation to the Parliamentary Portfolio Committee on Social Development that drug trafficking and the illicit drug market remains one of the key drivers for early onset of substance use within marginalised communities.³⁰

Furthermore, substance abuse and mental illness are closely related, with one often leading to the other. “The treatment of these disorders needs a multi-professional team approach of medical interventions, psychiatric treatment, psychological therapy, social interventions and other professional assistance”.³¹ Drug use and other mental illnesses often co-exist. In some cases, mental disorders such as anxiety, depression, or schizophrenia may come before addiction. In other cases, drug use may trigger or worsen those mental health conditions, particularly in people with specific vulnerabilities.³²

6. Drug Abuse and Crime

Psychologist Martin Leoy points out that “while it is widely acknowledged that drugs and criminal activities are interconnected, the nature and extent of this relationship remain multifaceted and intricate”.³³ In the *Global State of Harm Reduction 2022* report, South Africa was identified as one of the countries that continues to criminalise individual drug use, resulting in people still being at risk of incarceration for recreational use and substance abuse. Drug-related crime continues to be a significant issue

in South Africa, with recent crime statistics revealing that drug offences now contribute to 12 per cent of total crime incidents. This category includes unlawful possession, dealing, and driving under the influence of drugs.³⁴ South Africa has strict drug laws and penalties for drug possession, which can result in fines, community service, and imprisonment. Drug possession can also result in a criminal record, which can impact an individual’s ability to find employment or travel. Possession of drugs can result in a sentence of 15-25 years depending on the number of drugs involved.

Drugs are related to crime in multiple ways. Most directly, it is a crime to use, possess, manufacture, or distribute drugs classified as having a potential for abuse. Drugs are also related to crime through the effects they have on the user’s behaviour and by generating violence and other illegal activity in connection with drug trafficking.³⁵ Gang violence and drug abuse are deeply connected, driven by structural inequalities and social disintegration. Gangs control the drug trade in many areas. Drug use is often a tool for control in that users become dependent on gang-supplied substances, while criminal gangs control drug flows and coerce participation in violent and petty crime. Gangs recruit youth as dealers or runners. Drug profits fund weapons, bribery and further crime. Addicts often commit theft, robbery, or even violent crimes to sustain their addiction. Psychoactive substance abuse is a strong predictor of interpersonal violence, domestic assault, and traffic fatalities. The presence of drug-related crime not only threatens the safety of our communities but also intensifies other criminal activities, such as theft and assault, placing additional pressure on law enforcement agencies to allocate resources towards prevention, detection, and community safety efforts.³⁶

Martin Leoy continues that “drug users may resort to theft, burglary, or drug-dealing to obtain money to purchase drugs, consequently driving up crime rates. Another dimension of this relationship involves the organized criminal networks that emerge to control the production, distribution, and sale of drugs. These illicit drug markets often operate outside the legal framework, fostering a criminal subculture where violence and other criminal activities become prevalent. The lure of lucrative profits from drug trafficking incentivizes individuals to engage in criminal behaviour, leading to

increased violence and instability in affected communities”.³⁷ Moreover, the societal impact of drug addiction can extend beyond individual criminal acts. Substance abuse can destabilize families and communities, resulting in strained relationships, financial hardships, and reduced productivity. The strain on social and economic resources further contributes to the perpetuation of criminal behaviour.³⁸

Scope for crime and violence is enhanced because of the economic opportunities provided to criminal groups by illicit drug markets, as criminals compete for a share of those markets. That, in turn, may have dire consequences for the local community. The stress, anxiety and fear generated by exposure to crime and violence, interfere with the daily lives and normal developmental progress of people. Thus, the social harm caused to communities by the involvement of both adults and young people in drug-related crime and violence is immense.³⁹

In a recent article entitled *Drug Use, Vulnerability and the Effects of Criminalisation of Drug Use on Vulnerable Groups*, researchers Palesa Maloisane and Nabeelah Mia emphasize that “addiction to drugs remains a serious public health, social and legal issue. It has serious ramifications on an individual’s health [and] the stability and wellness of the family structure and has fostered a lucrative illicit drug market that engenders crime and violence in communities”.⁴⁰ Moreover, the authors note that members of “economically marginalised communities are more likely to be arrested for drug use and possession simply because they are more visible and their communities are more aggressively policed”.⁴¹

7. The Criminal Justice System

Persistent morally-based perspectives contribute to stigma and discrimination in healthcare facilities and negatively affect treatment-seeking by people who use drugs.⁴² Furthermore, the criminalisation of personal use has not served as a deterrent to substance abuse, nor does it address the factors contributing to it. Maloisane and Mia argue that the prohibitive nature of regulation of personal use and possession of drugs not only poses a burden on the criminal justice system, but most importantly, risks grave human rights violations and the marginalisation of vulnerable groups who require support to address addiction.⁴³ Penal sanctions and the over-use of incarceration as a response to drug

use have also contributed to prison overcrowding and inhumane, degrading conditions of detention which are, ironically, prime environments for gangs and drug use to flourish.

Moreover, the South African prison system is not equipped to offer treatment or rehabilitation for drug use since illicit drugs are readily available and traded in prisons. Furthermore, criminalisation fosters illegal networks and gangs and subverts the criminal justice system. Given that the criminal justice system often targets and harasses historically disadvantaged groups and marginalised communities, this only deepens existing structural vulnerabilities and is a major obstacle to their well-being and development.⁴⁴ “The ‘war on drugs’ legal framework that prohibitionist policies are based on, disproportionately affects economically marginalised people of colour, with its criminality targeting vulnerable groups such as sex workers, homeless people, women, children and others subjected to substance abuse through the risk of drug use. Criminalisation assumes that the vulnerable are enemies of society and places them on the margins of society as outsiders that threaten society’s security and prosperity. Criminalisation and the barrier it creates are primary factors preventing people who use drugs from achieving social stability, with the effects of structural stigma compounding other forms of structural violence and trauma that many people who use drugs already experience”.⁴⁵

Substance abuse and drug-related crimes have far-reaching consequences that affect individuals, families, and communities.⁴⁶ Gang violence and drug abuse are deeply connected and driven by structural inequalities and social disintegration. Solving these problems requires a multi-layered approach that combines law enforcement, public health, education, and community resilience. Mass incarceration resulting from drug-related offenses can perpetuate cycles of criminal behaviour, hinder rehabilitation and reintegration efforts, and contribute to prison overcrowding.⁴⁷

8. The Way Forward

The Drug Master Plan recognises that the punitive approach has not been successful in tackling drug-related problems. “Instead, emphasis should be placed on evidence-based public health and social justice principles that focus on individuals, families, communities, [and]

society as a whole, and must underscore social protection and health care instead of conviction and punishment.”⁴⁸

A more rights-based approach to drugs in policy work is being advocated for through the National Drug Master Plan (NDMP), which aims to reduce the potential consequences of harmful substance use through comprehensive, rights-affirming and evidence-based approaches.⁴⁹ In addition, Cabinet has approved the *Prevention and Treatment for Substance Use Disorder Policy*, which seeks to introduce gamechangers in curbing the scourge of substance abuse in the country and would enable the sector to review current outdated legislation and address emerging trends. Another critical milestone is that the Department of Social Development has initiated a process to establish an interministerial committee to address the scourge of substance abuse. Solving these problems requires a multi-layered approach that combines law enforcement, public health, education, and community resilience so as to reduce demand

and supply and in so doing reduce harm.

There has been a recent shift in South Africa’s legal framework towards decriminalisation of the private use and possession of drugs, specifically in the context of cannabis.^{50&51} Dr Allers considers that government’s latest legislation on prevention and treatment of drug and alcohol abuse, together with the NDMP, is comprehensive and progressive, crossing boundaries of government departments and professional disciplines to address the issue from multiple perspectives – social, medical, criminal, and psychological.⁵²

Addressing the criminalisation of drug use, reducing stigma, and improving funding for drug treatment will likely reduce the harms related to drug use. “There are windows of opportunity that need to be used to protect the rights of all people and provide opportunities for all to enjoy health. Perhaps all that is needed is that our policies align with our Constitution, the highest law of the land”.⁵³

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¹ <https://www.afro.who.int/health-topics/substance-abuse#:~>

² <https://www.netcare.co.za/News-Hub/Articles/understanding-substance-abuse-and-addiction>

³ <https://www.sanews.gov.za/south-africa/sa-spent-r77-billion-alcohol-over-december-holidays>

⁴ <https://www.gov.za/Alcoholandsubstanceabuse>

⁵ https://www.gov.za/sites/default/files/gcis_document/202006/drug-master-plan.pdf

⁶ https://amj.journals.ekb.eg/article_58881_a9ea4e0995a98d8e3daf5e46201238aa.pdf

⁷ <https://grocotts.ru.ac.za/2018/08/16/substance-abuse-costs-sa-billions/>

⁸ <https://www.sciencedirect.com/science/article/pii/S0955395924000379>

⁹ The Deputy Minister led a team from the Department of Social Development and the Central Drug Authority in tabling the 2023/2024 Central Drug Authority Annual Report before the committee.

¹⁰ https://www.gov.za/sites/default/files/gcis_document/202006/drug-master-plan.pdf

¹¹ The number of people who are suffering from Prescription Drug Addiction is largely unknown.

¹² <https://www.gov.za/Alcoholandsubstanceabuse>

¹³ Interpersonal Violence

¹⁴ <https://www.sciencedirect.com/science/article/pii/S0955395924000379>

¹⁵ https://www.sadag.org/index.php?option=com_content&view=article&id=3236:new-whatsapp-helpline-launched-aimed-at-youth-substance-abuse&catid=149&Itemid=601

¹⁶ <https://www.sanews.gov.za/south-africa/sa-spent-r77-billion-alcohol-over-december-holidays>

¹⁷ <https://grocotts.ru.ac.za/2018/08/16/substance-abuse-costs-sa-billions/>

- ¹⁸ https://www.sanews.gov.za/south-africa/sa-spent-r77-billion-alcohol-over-december-holidays?utm_
- ¹⁹ A teratogen is something that can cause birth defects or abnormalities in a developing embryo or fetus upon exposure. Teratogens include some medications, recreational drugs, tobacco products, chemicals and alcohol.
- ²⁰ <https://pmc.ncbi.nlm.nih.gov/articles/PMC3513901/>
- ²¹ <https://pmc.ncbi.nlm.nih.gov/articles/PMC3513901/>
- ²² The Khayelitsha Commission of Inquiry was established in 2012 by the Premier of the Western Cape, Helen Zille, to investigate allegations of police inefficiency and a breakdown in relations between the Khayelitsha community and the South African Police Service (SAPS). The commission, co-chaired by former Constitutional Court Justice Kate O'Regan and former National Director of Public Prosecutions Vusi Pikoli, published its report in 2014.
- ²³ https://www.saferspaces.org.za/uploads/files/A_Mixed-Methods_Study_of_the_Nature_and_Extent_of_the_Alcohol_Trade_In_Khayelitsha.pdf
- ²⁴ https://www.saferspaces.org.za/uploads/files/A_Mixed-Methods_Study_of_the_Nature_and_Extent_of_the_Alcohol_Trade_In_Khayelitsha.pdf
- ²⁵ <https://www.health.gov.za/wp-content/uploads/2022/06/Published-Health-Sector-Drug-Master-Plan.pdf>
- ²⁶ https://www.gov.za/sites/default/files/gcis_document/202006/drug-master-plan.pdf
- ²⁷ *Amoris Laetitia* is a post-synodal apostolic exhortation by Pope Francis addressing the pastoral care of families.
- ²⁸ <https://tinyurl.com/muuen6am>
- ²⁹ <https://ujcontent.uj.ac.za/esploro/outputs/graduate/Exploring-substance-use-disorder-and-a/999983907691>
- ³⁰ <https://pmg.org.za/committee-meeting/39648/>
- ³¹ <https://grocotts.ru.ac.za/2018/08/16/substance-abuse-costs-sa-billions/>
- ³² <https://nida.nih.gov/publications/drugs-brains-behavior-science-addiction/addiction-health>
- ³³ <https://www.longdom.org/open-access/the-causes-and-consequences-of-drugs-and-crime-101985.html>
- ³⁴ <https://excellateservices.co.za/news/160/the-growing-drug-problem-in-south-africa>
- ³⁵ https://amj.journals.ekb.eg/article_58881_a9ea4e0995a98d8e3daf5e46201238aa.pdf
- ³⁶ https://excellateservices.co.za/news/160/the-growing-drug-problem-in-south-africa?utm_
- ³⁷ <https://www.longdom.org/open-access-pdfs/the-causes-and-consequences-of-drugs-and-crime.pdf>
- ³⁸ <https://www.longdom.org/open-access-pdfs/the-causes-and-consequences-of-drugs-and-crime.pdf>
- ³⁹ https://amj.journals.ekb.eg/article_58881_a9ea4e0995a98d8e3daf5e46201238aa.pdf
- ⁴⁰ <https://journals.co.za/doi/10.2989/CCR.2024.0010>
- ⁴¹ <https://journals.co.za/doi/full/10.2989/CCR.2024.0010>
- ⁴² <https://journals.openedition.org/poldev/4007>
- ⁴³ <https://journals.co.za/doi/full/10.2989/CCR.2024.0010>
- ⁴⁴ <https://journals.co.za/doi/full/10.2989/CCR.2024.0010>
- ⁴⁵ <https://journals.co.za/doi/full/10.2989/CCR.2024.0010>
- ⁴⁶ <https://www.longdom.org/open-access-pdfs/the-causes-and-consequences-of-drugs-and-crime.pdf>
- ⁴⁷ <https://www.longdom.org/open-access-pdfs/the-causes-and-consequences-of-drugs-and-crime.pdf>
- ⁴⁸ https://www.gov.za/sites/default/files/gcis_document/202006/drug-master-plan.pdf
- ⁴⁹ <https://www.sciencedirect.com/science/article/pii/S0955395924000379>
- ⁵⁰ <https://journals.co.za/doi/full/10.2989/CCR.2024.0010>
- ⁵¹ In 2018, the Constitutional Court of South Africa passed a law stating in Section 4b of the Drugs

and Drug Trafficking Act No. 140 of 1992 that in the case of an adult, he or she can be in possession of marijuana in a private space for personal consumption.

⁵² <https://grocotts.ru.ac.za/2018/08/16/substance-abuse-costs-sa-billions/>

⁵³ <https://journals.openedition.org/poldev/4007>

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