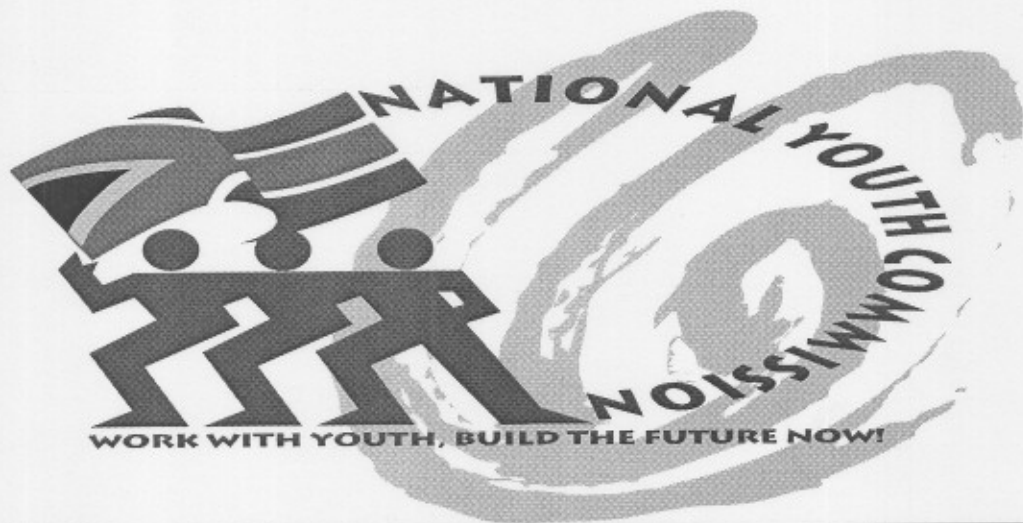


PC SOC DEV
21/MAY/08

NATIONAL YOUTH COMMISSION

SUBMISSION ON THE PREVENTION OF AND TREATMENT FOR SUBSTANCE ABUSE BILL



INTRODUCTION

Substance abuse has become an ever-increasing challenge facing the youth globally and within the South African context. Drugs affect those who are most vulnerable such as the youth. The transmission from adolescence to young adult is a critical period in which experimentation with illicit drugs in many cases begins. Drugs may have a strong appeal to young people who are beginning their struggle for independence as they search for their identity.

This can lead to a variety of social ills impacting on the health, behaviour and state of mind of the country's youth placing them at risk of developing life threatening illnesses later on in life. Due to their natural curiosity and thirst for new experiences, peer pressure, resistance to authority, sometimes low self esteem and problems in establishing positive interpersonal relationships, young people are particularly susceptible to the allure of drugs. Yet they have different reasons for abusing drugs. Marginalized youth are particularly susceptible to the enticement of drugs at the same time there is considerable abuse among socially integrated youths. Evidence suggests that experimentation of drugs is taking place at an earlier age than previously.

The global perspective should be seen against a backdrop of an environment where young people are increasingly being confronted with rapid social and technological change and a more competitive society, where the drive to succeed is high and personal fulfilment emphasized. Additionally, a weakening in traditional values and family ties and increased need for higher levels of stimulation are being experienced. Providing workers who work with these children with the necessary tools and resources is critical in enabling them to convey effective drug abuse preventative education.

This document serves as a submission of the National Youth Commission on the above mentioned challenges that often suffice in communities and families where there is substance abuse and whether the proposed bill provides sufficient legislative and policy interventions for the prevention and treatment of substance abuse within these communities with specific reference to the youth.

The submission was compiled through literature reviews of several research documentations that have been released on the impact of drugs on the country's youth as

well as possible preventative and treatment measures that could be adopted to try and deal with this challenge. The NYC views the opportunity provided as a continuous one and will continue to provide more information into the process throughout the legislative cycle of this Bill.

Current status quo on youth and drugs – Country Perspective

The National Youth Commission Act No 633 of 1996 defines the youth as persons between the ages of 14 and 35 and that will be the definition used in this document. The NYC acknowledges that for several operational reasons, different departments have differing definitions of the youth being persons below the ages of 18.

Youth, as per the definition of the NYC Act, comprise of 40% of the total South African population with Gauteng with the highest density of young people at 42.2% of the province's total population.¹ Whatever challenges that affect young people need to be effectively tackled as they affect one of the larger portions of the overall population.

In a recent study conducted by the Human Sciences Research Council Commissioned by Umsobomvu Youth Fund on the status of the country's youth, it was highlighted that there is an increase in the number of youths who abuse substances such as tobacco, alcohol and illegal substances with little gender disparities in the abuse of such substances. Substance abuse could lead to HIV infections through the use of needles for injecting substances such as heroin, but the dry use of drugs can be associated with risky behaviour such as unprotected sex or sex with multiple partners and can lead to other illnesses due to the impact of the chemical substances on the human body. There has also been a proven high correlation between substance abuse and crime as studies indicate a high prevalence of criminal detainees who test positive for drugs upon arrest. It is also important to note that much of the data obtained on the prevalence of abuse of illegal substances is often obtained from criminal detainees as well as substance abuse treatment facilities. Discussion on the prevalence of substance abuse by young people is to be divided according to the types of substances largely researched such as tobacco, alcohol and illegal and other drugs. Data for this submission has been taken

¹ Stats SA; Stats of Young People: Nov 2006

from the State of the Youth Report² and the 2002 Youth Risk survey³ conducted by the Medical Research Council and commissioned by the National Department of Health.

Youth and Tobacco

Tobacco is one of the more socially acceptable substances whose use is constantly increasing, despite documented evidence linking tobacco to lung and coronary heart diseases. Worldwide tobacco use is constantly increasing and in the South African context, there is a marked increase in the previous non-smoking sections of the population such as Africans, especially amongst young African women.⁴

Mortality due to tobacco occurs later in life but the prevention of use amongst young people is important so as to prevent death from tobacco induced illnesses later on in life. According to a report released by the World Health Organisation, the greatest portion of smokers start smoking during their adolescent years and there is strong evidence that those adolescent who do not take up the habit are less likely to begin in their later years. In the Status of the Youth Report compiled in 2003, of the sample surveyed 1/3 of the young people had indicated that they smoked with the highest numbers of respondents indicating that they smoked being white youths.⁵ Of the total sample surveyed, young males were more likely to smoke than young females but there appeared to be little difference in percentage between females and males who smoked amongst white youth. The report also highlights that there are higher probabilities of the youth smoking when they reside in metropolitan areas rather than those who reside in peri-urban and rural areas. There was also a higher correlation of youths who smoked with higher incomes and higher education levels. The data that has been provided by the Status of the Youth Report could be hypothesised to indicate that the young people who smoke tobacco are more likely than not, aware of the health dangers that smoking can cause but take the

² Human Sciences Research Council (2003), Status of the youth report,

This report largely made use of census 1996 data but they had also conducted their own research through a representative survey of the youth

³ This survey was conducted amongst secondary school learners across the 9 provinces with 23 schools per province selected for the survey. The survey is meant to assist in the provision of data to assist in developing programmes that are meant to curb the prevalence of high risk behaviour amongst the youth

⁴ State of the youth report...pg 179

⁵ Ibid

risk nonetheless as the illnesses are not imminently evident when the youths are starting out with the habit.

Government has introduced several laws and regulations that prevent smoking in prescribed public areas, banned the advertising of tobacco substances and in the process of reviewing current Anti-Tobacco legislation in Parliament and prevents the sale of tobacco to persons under the age of 18 years. It is unfortunate to note however that legislation and campaigns initiated to create awareness on the dangers of tobacco have not led to a marked decrease in the number of youth who take up the habit. This could be an indication of the need for more intensified campaigns on the prevention of young people smoking tobacco and more vigilant monitoring of the marketing strategies often adopted by tobacco companies largely targeting the youth.

Youth and Alcohol

Alcohol, as with tobacco, is one of the more socially acceptable substances that are being abused by the youth. This can be attributed to its status as a legal substance, and its wide sale and distribution across the country. The sale of alcohol to persons under the age of 18 years is prohibited but there is documented evidence that youth as young as 14 years abuse alcohol.

Heavy drinking can be defined as consuming 10cl of alcohol per day and in the status of the youth report, the highest numbers of heavy drinkers was found amongst African men and amongst persons of 14 years and older.⁶ In a survey that had been conducted by Community Agency of Social Enquiry (CASE) in 2000, 68% of the young people surveyed indicated that they had never drunk alcohol and there has been a marked decline in the numbers of youth who were captured as never drunk alcohol in the survey of the Status of the Youth Report as 42% of the respondents indicated to have never drunk alcohol.⁷ This means more young people are experimenting with alcohol with many indicating that they drank alcohol occasionally while others drank alcohol at least once a week.

As with smoking, alcohol consumption increases with level of education and location. More young people in metropolitan areas drink than youth in rural areas and the higher the level of education, the more the likelihood of the individual consuming alcohol but

⁶ Ibid

⁷ Ibid

those with higher levels of education such as tertiary education are less likely to drink excessively than youth with a secondary education.

As with other substances, the education of the youth on the damage alcohol can have on the body is extremely important. Too many young people engage in sessions of heavy drinking not taking into cognisance the manner in which the alcohol can hinder on their current state of mind, the addictive nature of alcohol as well as the damage it has to the body at a later stage in life.

Youth and Drugs

Drug abuse is the constant use of illegal and legal mind altering and illicit substances or hallucinogens. There is difficulty in obtaining sufficient data on the numbers of people who use drugs across all population groups as data is largely obtained from rehabilitation institutions and /or criminal detainees who are tested for drugs upon entry into correctional facilities. But of the data obtained in the SYR survey, 13% of the respondents responded positively for having used drugs with a high proportion of the respondents being amongst white youths.

Drugs do not have a threshold for their use as in the case of alcohol as the likelihood of a young person with secondary education using drugs and one who has a tertiary qualification are largely the same. This indicates that either the pull to use such substances is very strong or there is insufficient knowledge of the impact of such substances even amongst those sectors of our population with higher education levels.

South Africa has seen an increased use of drugs such as cocaine amongst the black youth. In the last year, there has also been extensive media coverage of young people using Tik or Meth Amphetamine as there has been a marked increase of its use amongst the youth and this has been largely attributed to its decline in price as well as the easy consumption of the drug. In the last year there was extensive media coverage of the popularity of 'tik' amongst school going youth in the country. This has led to wide distribution of the substance in poorer communities whereas with other illegal substances, use was more rapid in more affluent communities due to the cost associated with the use of the substances. Some of the effects of drugs abuse can be

mental illness as well as heart failure due to the strain some of these substances place on the human heart.

Country Response to Substance Abuse

South Africa has had concerted effort from government and non-governmental organisations on curbing the abuse of substance abuse and the impact thereof but the data provided above indicates that much more needs to be done because instead of declining, there is a marked increase of substance abuse amongst the country's youth. Several programmes are being implemented nation wide in schools, communities, the media and correctional centres on the impact of substance abuse and there has been concerted effort by government to strengthen its response. In 2000, a Central Drug Authority was established with the mandate of overseeing the National Drug Master Plan which is a policy aimed at reducing the demand and supply of illicit drugs.

Despite the presence of the Drug Master Plan, drug use continues to increase meaning the implementation of the plan is not as effective as it ought to be. With the increase of young people using these substances, treatment facilities are not adequate to deal with the demand for drug treatment facilities.

Another challenge identified is the gaps in treatment methods used by different institutions and fragmentation of the types of treatment provided between the Department of Health and the Department of Social Services.⁸ A case in point is the separation of treatment of mental health and substance abuse which are more often than not, not mutually exclusive conditions but are currently being treated in separate institutions and the political responsibility of the treatment of these falls between two separate ministers. The treatment facilities that currently exist have no uniformity in their approach of the treatment provided as some are privately run and those that are public entities are insufficient and there is a poor distribution of these across the country.

Aftercare to ensure that there is gradual re-integration of patients back into their communities is also not being sufficiently implemented resulting in many falling back into the cycle of substance abuse.

⁸Charles D. Harry (Feb 2005); Substance Abuse Intervention in South Africa; World Psychiatry v4 (1); Feb 2005; <http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=1414718>