



DRUGS & CRIME in South Africa



The MRC/ISS 3-Metros Arrestee Study (Phase 3)

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Highlights

It is becoming increasingly clear that high levels of crime pose a serious threat to democracy and development in South Africa. The Medical Research Council (MRC) and the Institute for Security Studies (ISS) in collaboration with the SAPS Crime Information Analysis Centre (CIAC) have been investigating the link between drug use and crime since 1999.

Results of Phase 3 of the 3-Metros Arrestee Study conducted during August/September 2000 continue to show high levels of drug use among arrestees, with 45% of arrestees testing positive for at least one drug including 39% for dagga (cannabis), 19% for Mandrax (methaqualone and antihistamine) and 5% for cocaine. More arrestees in Cape Town tested positive for at least one drug (56%) than in the other sites: 50% in Durban and 29% in Gauteng. The proportion testing positive for at least one drug was highest in arrestees 20 years or younger – two-thirds of whom tested positive for drugs (59% dagga, 32% Mandrax and 9% cocaine). Over all sites 50% or more of persons arrested for the following crimes tested positive for at least one drug: Drug and alcohol offences (75%), housebreaking (66%), motor vehicle theft (59%), other thefts (55%) and rape (50%). Gender, race, income and police station differences were also noted.

In particular, the findings substantiate the recommendations from Phase 1 and Phase 2 that strategies to reduce drug use and drug related crime must be area specific. The prevalence of drug use among the youth also requires specific attention, particularly from the justice and welfare sectors responsible for diversion and rehabilitation. Specific studies investigating the link between drugs and crime among juvenile arrestees are required. Protocols for dealing with arrestees under the influence of drugs are needed.

Background

High levels of crime (including drug-related crime) are having a negative impact on South African society – affecting the economy, the social environment and even the country's fledgling democracy. There have been significant changes in patterns of drug trafficking and drug use in South Africa in the 1990's with various adverse consequences, including premature death, trauma visits, poor school performance, crime and violence. Drugs and alcohol have a number of relationships to crime. These include the trafficking and possession of drugs, driving under the influence of alcohol/drugs, crimes committed under the influence of alcohol/drugs, crimes committed in order to get money or goods to buy drugs, and crimes associated with drug distribution itself (including systemic crime, e.g. inter-gang warfare and vigilantism).

There is an awareness in South Africa that more information is needed on the drugs and crime link. Data sources have been limited to arrests for driving under the influence of alcohol and other drugs, arrests for the possession of or dealing in drugs, and drug seizure amounts. In the USA a number of data sources exist, including the general population surveys (which ask about alcohol and other drug use and acts that could get people into trouble with police), the Arrestee Drug Abuse Monitoring (ADAM) Project, and surveys of incarcerated offenders.

The 3 Metros Arrestee Study is part of the SA-ADAM (South African Arrestee Drug Abuse Monitoring Project), an initiative funded by the Department of Arts, Culture and Technology, comprising a consortium of the Council for Scientific and Industrial Research (CSIR), Human Sciences Research Council (HSRC), Medical Research Council (MRC) and the Institute for Security Studies (ISS) and supported by the SAPS's Crime Information Analysis Centre (CIAC).

Aims of the 3 Metros Study

The MRC/ISS 3-Metros Arrestee Study has the following aims:

1. to gain a greater understanding of the relationship between alcohol/drug and firearm use, and crime,
2. to increase knowledge regarding the prevalence of HIV in a high-risk population,
3. to use this data to inform health policy and the provision of health services to prisoners,
4. to inform crime and drug prevention policy at a local, provincial, and national levels, and
5. to assess the feasibility of implementing and sustaining an ADAM project in South Africa.

Methods

The study has been undertaken over two years, with 3 data collection periods at six-month intervals, namely August/September 1999, February/March 2000 and August/September 2000. The total sample consisted of 3 082 arrestees. A self-report questionnaire was administered to arrestees and urine samples to be tested for drug content and HIV were requested. Participation in the study was voluntary and based on informed consent. Respondents were assured of anonymity. The HIV component was not linked to the main questionnaire or to the urinalysis for drugs.

Weighting of sample

Most of the findings have been weighted by police station and major offence category to ensure that the findings are generalizable to persons arrested during the period of the study rather than those who ended up in the sample. Weighted and unweighted percentages typically varied very little (< 1%).

Demographic profile of the sample – Phase 3

A total of 1050 arrestees were interviewed during Phase 3 of the study. Arrestees were interviewed at 8 police stations in Cape Town, Durban and Gauteng (Table 1).

Table 1: Distribution of arrestees across the selected police stations in each site

Site	Station	N	% (by site)
Cape Town (32.3% of total sample)	Mitchell's Plain	178	52.5
	Khayelitsha	109	32.2
	Sea Point	52	15.3
Durban (33.4% of total sample)	Phoenix	100	28.5
	CR Swart	251	71.5
Gauteng (34.3% of total sample)	Hillbrow	221	61.4
	Kempton Park	90	25.0
	Jabulani	49	13.6

Gender, race and age

The gender composition of the sample was 84% male in Cape Town, 79% male in Durban and 82% male in Gauteng. In Cape Town 41% of arrestees were Black/African and 57% were Coloured. In the Durban sample 66% were Black/African and 28% Indian/Asian. In Gauteng most arrestees were Black/African (93%). Most arrestees were between 18 and 30 years old. The mean age of arrestees was between 27 and 29 years.

Marital status and education:

About 69% of the arrestees were single and had never been married. Eleven percent of arrestees in Cape Town had a grade 12 education or higher, compared to 21% in Durban and 25% in Gauteng.

Nationality:

One hundred and forty-four arrestees (14% of the total sample interviewed) were non-South Africans. It should, however, be noted that 100 persons were arrested on charges related to being an illegal immigrant. Most of these arrestees were interviewed in Gauteng.

Housing, employment and monthly income:

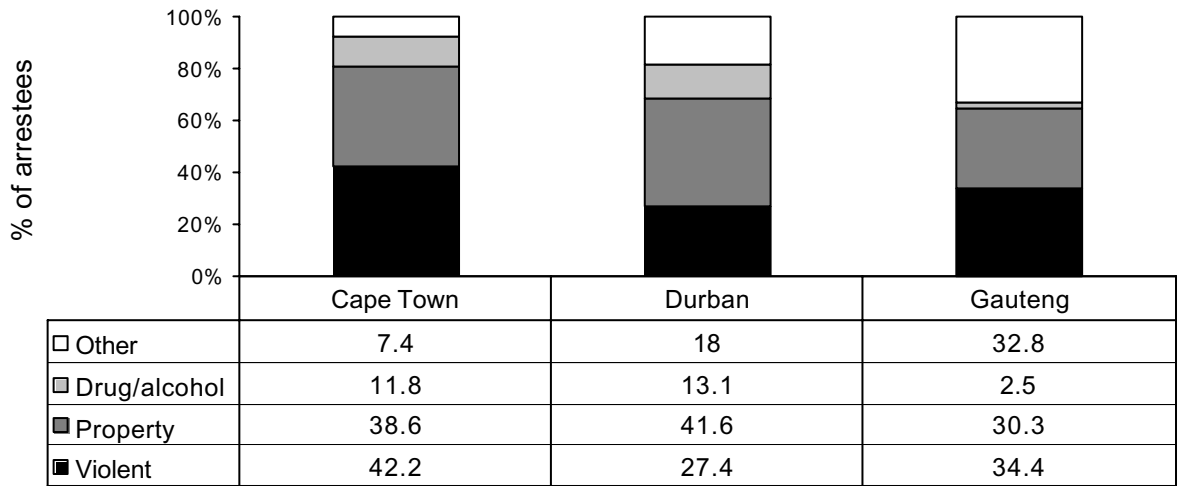
In Durban and Gauteng over two-thirds of arrestees reported living in either a formal brick/mortar structure or flat/apartment compared to 60% in Cape Town. In Cape Town 22% of arrestees reported living in a shack, compared to 9% or less in the other two sites. Across sites 16% - 27% of arrestees reported being in formal full-time employment. The median monthly income of arrestees ranged from R600 to R900 across the three sites.

Current arrest details

Details about the crime committed by arrestees at the time of interviewing provide insight into policing patterns and priorities in each area.

Most respondents were arrested for one crime only (95% in Cape Town, in 95% Durban, and 94% in Gauteng). More arrestees were arrested after a warrant had been issued for their arrest in both Cape Town and Durban during Phase 3 than during Phase 1 and Phase 2. In Cape Town 45 and in Durban 51 arrests following a warrant were recorded, though only 8 in Gauteng. However an analysis of the types of offences committed indicates that most were arrested after the police were called to the scene of a crime, or while the crime was being committed, rather than at some later stage.

Figure 1: Types of offences allegedly committed by arrestees in the three metros - Phase 3



In CapeTown and Gauteng the most common offence category was violent crime, whereas in Durban the most common category was property crimes (Figure 1). More people were arrested for violent crimes in Cape Town than in the other two metros. Compared to Cape Town (12%) and Durban (13%), few arrestees in Gauteng (3%) had committed offences related to drugs and alcohol (Figure 1).

An analysis of the specific crimes committed by arrestees shows some differences between the three metros. In Cape Town the most common offence categories (in order of most frequent occurrence) were “other thefts”, “other violent offences”, assault and housebreaking. In Durban the most common offence categories were “other theft”, “other” crimes and shoplifting, whereas in Gauteng they were offences related to being an illegal immigrant, robbery and “other” crimes (Table 2).

Table 2: Number of persons arrested in each metro by offence categories – Phase 3

	Cape Town	Durban	Gauteng
Violent offence	143 (42.2%)	96 (27.4%)	124 (34.4%)
Murder (incl. attempted murder)	24	18	17
Assault (incl. GBH, stabbing, indecent assault)	40	29	30
Weapons (incl. firing & pointing a firearm, theft of, possession of unlicensed firearm/ammunition)	15	11	14
Rape (incl. attempted rape)	12	9	9
Robbery (incl. attempted & armed)	9	24	53
Other violent (incl. kidnapping, child abuse, bomb threat, domestic violence/interdict)	43	5	1
Property Offence	131 (38.6%)	146 (41.6%)	109 (30.3%)
Shoplifting	23	39	33
Theft of motor vehicle	12	14	8
Other thefts (incl. out of vehicles)	45	64	33
Housebreaking	36	12	9
Other property (incl. trespassing, vandalism, stolen goods, forgery, arson)	15	17	26
Drug/Alcohol-Related Offence	40 (11.8%)	46 (13.1%)	9 (2.5%)
Drug dealing/possession	32	33	6
Alcohol offences	8	13	3
Miscellaneous Offences	25 (7.4%)	63 (18.0%)	118 (32.8%)
Illegal immigrant/deportation/fraud/false document	4	19	77
Other (illegal strikes, child care act, crimen injuria, warrant of arrest, other sexual offences, gambling, Section 36, traffic violations, economic crimes, crimes against the government, other family cases)	21	44	41
Total	339	351	360

These data may reflect police arrest practices rather than crime trends in each area. In terms of arrest practices, the nature of the offences in Table 2 suggest that most arrests are the result of reactive rather than proactive policing.

Apart from the offences relating to illegal immigration and 'other' in Table 2, arrests for most of these crimes would result when victims or complainants call the police to the scene of a crime. Few would result from routine police patrols or 'zero tolerance' type policing. Typically these policing approaches result in large numbers of arrests for 'less serious' crimes, such as those in the 'miscellaneous' category in Table 2. However, in the three survey sites, the opposite is true with at least 70% of all offences being 'serious' crimes.

In Gauteng, the fairly large proportion of persons arrested for less serious crimes can be attributed to the many illegal immigrants in the sample. This indicates that police in Gauteng are targeting illegal immigrants for arrest. The province, and Johannesburg in particular, has some of the highest levels of serious crime in the country. The focus by police on illegal immigrants rather than people committing serious crimes – regardless of their nationality – is cause for concern.

Firearms

In the same way that drug and alcohol use has been associated with criminal activity, the use of firearms can be linked to the level and intensity of violence in a society. Firearms and drugs, particularly when they co-occur, are among the most important variables in explaining changing levels of violent crime and to a lesser extent property crime.

Accurate data on firearm use is more likely to be obtained through questioning survey respondents about their experiences as victims of gun related crimes than about their access to firearms or use of firearms. In response to questions about victimisation, one third of arrestees had been threatened with a firearm at least once, 13% - 16% had been shot at and 9% - 13% had been injured by a gunshot (Table 4). In Gauteng 24% of arrestees reported that they had access to a firearm.

Table 4: Firearms and crime (%) – Weighted data (all participants) – Phase 3

	Cape Town	Durban	Gauteng	Total 3 metros
Been a victim of crime in past 5 years	29	35	19	28
Been threatened with a gun	33	33	34	33
Been shot at	16	13	13	14
Been injured by gunshot	9	10	13	11
Important to have a gun in own neighbourhood	47	50	57	52
Gun in possession of someone in own household	5	14	9	9
Boss/colleague carry guns when working	6	22	5	11
Personally have access to a gun	9	12	24	16
Ever shot at someone	5	4	3	4
Ever had gun when committing crime/used gun to commit crime	5	4	5	5
Had a gun when arrested	4	5	5	5

Self-reported substance use and need for treatment

Past 3 days prevalence of substances use by arrestees for alcohol and other drugs is given in Table 5. Across sites the substances most often reported by arrestees as being used were tobacco, alcohol and cannabis. In addition, in Cape Town 13% of arrestees also reported use of Mandrax/white pipes (the dagga/Mandrax combination) in the past three days.

Table 5: Self-reported substance abuse in the past 3 days (%) – Weighted data (Phase 3)

	Cape Town	Durban	Gauteng
Tobacco	76.8	69.6	51.7
Alcohol	49.1	38.2	24.8
OCM pain relievers ¹	0.0	3.4	2.8
OCM cough/allergy meds ¹	0.0	0.0	1.6
Marijuana - dagga	30.4	24.2	11.2
Inhalants-glue/snuff/petrol	0.7	0.4	0.5
Crack rocks	1.5	3.4	1.0
Cocaine powder	0.7	2.3	1.5
Amphetamines ²	0.0	0.0	0.3
Mandrax/white-pipe	12.7	6.3	0.4
LSD	0.7	0.3	0.3
Designer drugs, eg Ecstasy	0.0	0.0	0.3
Prescription pain relievers ³	0.0	0.0	0.0
Prescription relaxants ⁴	0.3	0.0	0.2
Prescription sleeping tablets ⁵	0.0	0.0	0.0
Heroin	0.2	0.0	0.5

1 Over-the-counter medicines used to achieve effects other than what they are medically used/prescribed for

2 Uppers, Speed, diet pill

3 Substances that relieve severe pain, e.g. Welconal, morphine

4 Substances that help people to relax, e.g. Valium, Librium, Ativan

5 Substances that help people to sleep, e.g. Amytal, Nembutal, Rohypnol

Across sites, dagga was reported as being mainly inhaled/smoked (sometimes ingested orally), Mandrax was either swallowed or inhaled/smoked, and crack rocks were mainly inhaled/smoked. Intravenous use of drugs such as crack, heroin, and substances that help people relieve severe pain (e.g. Welconal) was reported as being low – one arrestee in Cape Town (cocaine), 3 arrestee in Durban (1 crack and 2 heroin), and one arrestee in Gauteng (abuser of severe pain medication).

Arrestees were also asked if they ever use a combination of drugs. In Durban 9% of those who responded to this question had used a combination of drugs, compared to 2% in Gauteng, and 13% in Cape Town. In Cape Town and Durban the vast majority of these combinations involved dagga and Mandrax, or dagga, Mandrax, and crack. Less use of the dagga/Mandrax combination was reported in Gauteng.

Furthermore, arrestees were asked whether they felt they could use treatment for the range of substances they had used. In Cape Town, of persons acknowledging use at least once, 14% felt they could use treatment for tobacco, 17% for alcohol, 27% for cannabis, and 33% for Mandrax. In Durban, of persons acknowledging use at least once, 22% felt they could use treatment for tobacco, 19% for alcohol, 33% for cannabis and 48% for Mandrax. In Gauteng, of persons acknowledging use at least once, 30% felt they could use treatment for tobacco use, 30% for alcohol, 34% for cannabis and 50% for Mandrax. A small number of arrestees had received treatment for substance abuse, though this was mostly for alcohol, tobacco or cannabis. In Gauteng 3%, in Durban 5% and in Cape Town 2% of arrestees reported having received treatment for

alcohol abuse. Treatment for dagga abuse was reported by 5% of arrestees in Cape Town, 7% in Durban and 4% in Gauteng. In Cape Town 8% and in Durban 13% had been treated for Mandrax abuse.

Use of drugs and alcohol when committing crime

To establish whether drug and alcohol use is associated with criminal activities, arrestees were asked about the use of these substances at the time of committing the offence for which they were arrested. The results suggest a stronger link between self-reported drug and alcohol consumption and crime in Cape Town and Durban than Gauteng.

In Cape Town 25% of arrestees indicated that they were in need of drugs and/or alcohol when they committed the crime compared to only 9% in Gauteng (Table 6). In Durban 25% and in Cape Town 29% of arrestees reported being under the influence of alcohol at the time of arrest. In all three metros, the majority of arrestees who were under the influence, said they had consumed alcohol rather than drugs. A few arrestees also reported being under the influence of muti (traditional potion).

Few arrestees (4%-10%) admitted to using drugs or alcohol to actually commit the crime. Of those who did make use of these substances, various explanations were given, including the need for courage in order to commit the offence.

Table 6: Drug/alcohol use when committing crime – Weighted data (Phase 3)

	Cape Town	Durban	Gauteng	Total 3 metros
	%	%	%	%
In need of drugs &/or alcohol	25.0	15.4	8.5	16.2
Drugs	2.9	5.5	0.5	3.0
Alcohol	21.4	9.9	9.9	13.0
Under influence of drugs &/or alcohol	28.9	24.5	7.1	20.0
Drugs	3.6	7.0	0.5	3.7
Alcohol	23.0	16.2	5.9	14.9
Used drugs/alcohol to commit crime	9.9	9.8	4.3	9.3

Urinalysis results (testing for selected drugs)

Over 95% of arrestees agreed to provide a urine sample for drug testing. Table 7 gives the urinalysis results for each site and overall. For all sites combined 45% of arrestees tested positive for at least one substance, with 39% testing positive for dagga (cannabis), 19% testing positive for Mandrax and 5% testing positive for cocaine. Table 7 shows that overall and for each of the sites separately arrestees were most likely to test positive for dagga, followed by Mandrax, and cocaine. The use of other drugs seems to be marginal, although a surprisingly high proportion tested positive for benzodiazepines in Cape Town (13%). The percentage of arrestees testing positive for at least one drug, dagga and Mandrax was higher in Cape Town than in Durban and Gauteng. Durban had the highest proportion of arrestees testing positive for cocaine (6%). Overall 56% of arrestees in Cape Town, 50% in Durban, and 29% in Gauteng tested positive for at least one drug.

Table 7: Percentage of positive cases per site from urinalysis per site and overall – Weighted data (Phase 3)

	Cape Town N = 336	Durban N = 342	Gauteng N = 321	Overall N = 999
Dagga (cannabis)	50.2	42.6	24.2	39.2
Mandrax	31.7	21.0	5.2	19.4
Cocaine	3.4	6.3	4.9	4.9
Amphetamines	0.0	0.9	0.3	0.4
Benzodiazepines	12.7	0.2	0.2	4.4
Opiates	2.9	1.9	3.3	2.7
Any drug	55.9	50.3	29.3	45.3

Percentage drug positive by sex, age, race and income

The percent of arrestees testing positive for any drug, dagga, Mandrax and benzodiazepines was greater for males than females (Table 8). However females had a higher proportion testing positive for cocaine, amphetamines and opiates. Arrestees aged 20 years and younger were the group having the highest proportion of persons testing positive for at least one drug, dagga, Mandrax and cocaine. African arrestees furthermore appear to be less likely to have a drug in their urine than arrestees from other race groups. This may also explain the lower percentages of arrestees in Gauteng testing positive for at least one drug as compared to the other sites. Another reason is likely to be the greater number of persons arrested for immigration offences in Gauteng. This category of arrestee was found to generally have a lower probability of testing positive for drugs. Whites were the race group with the highest percentage testing positive for at least one drug (67%). They were also the group with the highest proportion of arrestees testing positive for cocaine (43%) and opiates (10%). Arrestees in the lowest income group (R0-R299 per month) were more likely to test positive for Mandrax (23%) compared to those in the highest income (\geq R1600 per month) group (17%). Arrestees testing positive for cocaine had a higher representation in the highest income group (10%) compared to arrestees in the lowest income group (3%).

Table 8: Percent Positive for Selected Drugs, by Sex, Age, and Race (3 metros combined) – Weighted data (Phase 3)

	% positive by gender		% positive by Age					% positive by Race			
	Male	Female	≤20	21-25	26-30	31-35	≥36	African	Coloured	White	Indian/Asian
Dagga	44.5	16.3	58.8	40.1	26.9	29.9	35.5	33.5	56.4	25.5	42.0
Mandrax	20.2	16.1	31.6	21.0	12.3	14.6	15.0	9.9	45.8	9.8	27.4
Cocaine	2.4	15.7	8.7	5.3	4.5	3.4	1.5	2.9	9.5	42.7	2.0
Benzodiazepines	5.3	0.4	5.7	4.7	3.2	3.7	4.4	1.5	15.7	0.0	1.2
Amphetamines	0.1	1.7	0.0	1.3	0.7	0.0	0.0	0.4	0.0	9.8	0.0
Opiates	2.3	4.4	2.5	3.2	1.4	3.4	3.3	2.6	2.3	10.2	3.1
Any drug	48.1	33.5	66.0	47.8	32.7	34.0	40.8	38.3	64.0	66.9	48.3

Percent positive for drugs by offence category

Information on drug status by offence category for the 3 metros combined is given in Table 9. Persons arrested for housebreaking and alcohol/drug related offences in particular appear to be more likely to test positive for any drugs (over two-thirds), mostly dagga and Mandrax. More than 50% of persons arrested for rape, 'other thefts' and theft of motor vehicles tested positive for at least one drug.

Further analysis showed that with regard to property offences the proportion of arrestees who were positive for any drug, dagga, Mandrax and cocaine was highest in Cape Town. In Cape Town and Durban 47% of persons arrested for violent offences tested positive for drugs. In Cape Town 82% of arrestees arrested for drug or alcohol related offences tested positive for at least one drug and in Durban 72% of arrestees arrested for weapons related offences tested positive for at least one drug. Seven percent of persons arrested for theft of a motor vehicle tested positive for cocaine.

Urinalysis by police station showed that in the CR Swart, Hillbrow and Sea Point police station samples 8%, 8% and 14% respectively of arrestees tested positive for cocaine, whereas no arrestees tested positive for this substance in Khayelitsha, Kempton Park and Jabulani. This analysis also showed that the use of Mandrax is far more common in areas such as Mitchells Plain and Phoenix than in the other sites (Table 10).

Table 9: Percent Positive for Selected Drugs, by Offence Category (metros combined) – Weighted data (Phase 3)

	Dagga	Mandrax	Cocaine	Any drug
Violent Offence				
Murder*	45.8	20.8	0.0	45.8
Assault*	30.6	12.8	1.2	38.8
Robbery	37.9	18.5	4.5	42.4
Weapons	43.1	20.0	5.9	49.0
Rape*	42.3	12.0	0.0	50.0
Family violence	25.0	16.1	1.8	26.8
Property Offence				
Shoplifting	26.0	9.0	0.0	28.2
Theft of motor vehicle	44.4	22.2	7.1	59.3
Housebreaking	61.4	34.9	4.5	65.9
Other thefts**	52.9	25.0	2.9	54.8
Drug/Alcohol Offence	65.6	37.5	9.4	75.0
Immigration/ documents	24.5	5.3	5.3	29.5
Fraud	12.2	2.4	0.0	19.5
Other***	30.9	20.4	11.2	40.8
Overall	39.2	19.4	4.9	45.2

* - includes attempted crimes

** - includes theft out of motor vehicles, theft of money or cellular phones etc.

*** - includes illegal strikes, gambling, other sexual offences, traffic violations, other family cases, crimes against the government, warrant of arrest

Table 10: Proportion of positive cases per police station - Weighted data (Phase 3)

	Number tested	Cannabis	Mandrax	Cocaine	Overall drug positive
Khayelitsha	107	35.5%	8.3%	0.0%	37.4%
Mitchells Plain	177	61.0%	50.8%	2.8%	64.4%
Sea Point	52	44.2%	15.4%	13.5%	65.4%
Hillbrow	192	21.8%	7.3%	8.3%	27.6%
Kempton Park	87	31.0%	2.3%	0.0%	33.3%
Jabulani	46	21.7%	2.2%	0.0%	28.3%
CR Swart	247	39.8%	16.7%	8.1%	49.0%
Phoenix	94	50.0%	31.9%	1.1%	53.2%

Comparison with self-reported drug use

In comparing the frequencies of self-reported drug use and urinalysis, the indication is that there is considerable under-reporting of drug use. For example:

- 25% of arrestees indicated that they had used dagga in the last 30 days, whereas 39% tested positive for THC (the active ingredient in dagga)
- 6% reported use of Mandrax (methaqualone) in the past 3 days, whereas 19% tested positive for this drug
- 3% reported using cocaine or crack on the past 3 days whereas 5% tested positive for cocaine
- 4% reported being under the influence of a drug at the time the alleged crime was committed whereas 45% tested positive for at least one drug.

Brief comparison of Phase 1, Phase 2 and Phase 3 results

Table 11 shows that overall the proportion of arrestees testing positive for any drug was fairly consistent over the three phases of the study. Overall the proportions of arrestees testing positive for dagga (cannabis) were lowest in Phase 2 results (36%). Results for Mandrax were consistent over Phase 2 and Phase 3, but higher during Phase 1 (25%). Results for cocaine ranged from 3%-5%. Proportions of arrestees testing positive for amphetamines were low during all three phases, with a peak of 2% during Phase 2. The highest proportion testing positive for benzodiazepines was found during Phase 3 (4%). Opiate-positives were consistent over all three phases at 2%-3%.

Table 11: Comparison of urinalysis results from Phase 1, Phase 2 and Phase 3 data for the overall sample

	Overall Phase 1	Overall Phase 2	Overall Phase 3	Average over 3 Phases
Number tested	863	982	999	2 844
	%	%	%	%
Dagga	43.5	36.4	39.2	39.6
Mandrax	25.3	19.0	19.4	21.1
Cocaine	4.0	3.2	4.9	4.1
Amphetamines	0.0	1.8	0.4	0.7
Benzodiazepines	2.1	0.9	4.4	2.5
Opiates	2.0	2.4	2.7	2.4
LSD	0.0	*	*	0.0
Any drug	48.4	44.1	45.3	45.9

* - not tested

Table 12 shows that proportions of arrestees testing positive for at least one drug when broken down by selected offence categories remained fairly stable for most crimes. The largest differences were noted in the 'theft of motor vehicles' category, where 35% tested positive in Phase 1, 74% in Phase 2 and 59% in Phase 3. A consistently high proportion of persons arrested for housebreaking tested positive for at least one drug over the three phases (66%-74%). The same was true for arrestees arrested for drug or alcohol related offences (63%-75%). Cocaine-positives seemed to be more inconsistent over the three phases when broken down by offence category than dagga and Mandrax, for example 9% of arrestees arrested for murder tested positive for cocaine during Phase 1 but none tested positive during phases two and three. However some consistency for cocaine positives was noted for those arrested for theft of motor vehicles (3%-7%).

Table 12: Comparison of Phase 1, Phase 2 and Phase 3 data – selected offence categories by drug positive

	Dagga (%)			Mandrax (%)			Cocaine (%)			Any drug (%)		
	Phase			Phase			Phase			Phase		
	1	2	3	1	2	3	1	2	3	1	2	3
Violent Offence												
Murder*	52	39	46	24	18	21	9	0	0	55	48	46
Assault*	31	25	31	11	9	13	0	0	1	36	30	39
Weapons	55	31	43	36	22	20	0	0	6	57	44	49
Rape*	35	36	42	18	23	12	0	0	0	44	41	50
Property Offence												
Shoplifting	25	29	26	17	14	9	3	5	0	27	37	28
Theft of motor vehicle	32	64	44	16	37	22	3	4	7	36	74	59
Housebreaking	67	63	61	55	38	35	9	0	5	74	70	66
Drug/Alcohol Offence	56	49	66	34	37	38	7	4	9	68	63	75
Immigration/ documents	21	16	25	1	0	5	1	0	5	22	16	30
Overall	43	36	39	25	19	19	4	3	5	48	44	45

* - includes attempted crimes

Recommendations

The findings continue to indicate that strategies to reduce drug use and drug related crime must be area and even suburb specific. The prevalence of drug use among the youth requires specific attention, particularly from the justice and welfare sectors responsible for diversion and rehabilitation. The National Youth Commission should also become involved. Specific studies investigating the link between drugs and crime among juvenile arrestees are also required. Given the highly addictive and socially damaging nature of cocaine, efforts need to focus on this drug in high risk areas. Health education programmes could also target users in specific police stations.

Training police to recognise particular symptoms and establishing protocols on handling arrestees under the influence will assist the police in making arrests, interviewing and handling arrestees. Better monitoring of arrest patterns by the police is also needed. The findings raise questions about whether police activity matches priority crimes and whether an appropriate balance is being achieved between arrests as a result of visible policing activity versus detection. There is little doubt that immigrants are involved in serious crime, notably the cocaine trade. Police should target these criminals through intelligence-led investigations and 'sting' operations rather than spending significant time and resources on arresting people simply because they do not have the correct travel and identification documents.

Treatment of drug offenders either as part of a sentence or through referrals by the court also deserves more consideration. Targets should be set to reduce drug positive arrestees through court ordered treatment and other means.

Further in-depth research is required to investigate the link between drug use and committing crime. This may well require the use of other kinds of research methods, e.g. qualitative methods (focus group interviews, key informant interviews and even anthropological studies).

In general, the findings add weight to other calls for state and civil society to be more proactive in addressing substance abuse. The need for ongoing monitoring of certain drugs among arrestees using biological markers is recommended.

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The authors would like to thank and acknowledge:

- The Department of Arts, Culture, Science and Technology for funding this project.
- The staff of DRA Development for their hard work in collecting and entering the data for this project speedily and efficiently, and for adding value at all times.
- Dr. Peter Smith and his team at the University of Cape Town's Pharmacology Department for analysing the urine samples for the various drugs and conveying the results speedily.
- The SAPS and their Crime Information Analysis Centre especially for their support and assistance in executing this project successfully.