



An Overview of Drug Use in Africa – a Continental Perspective

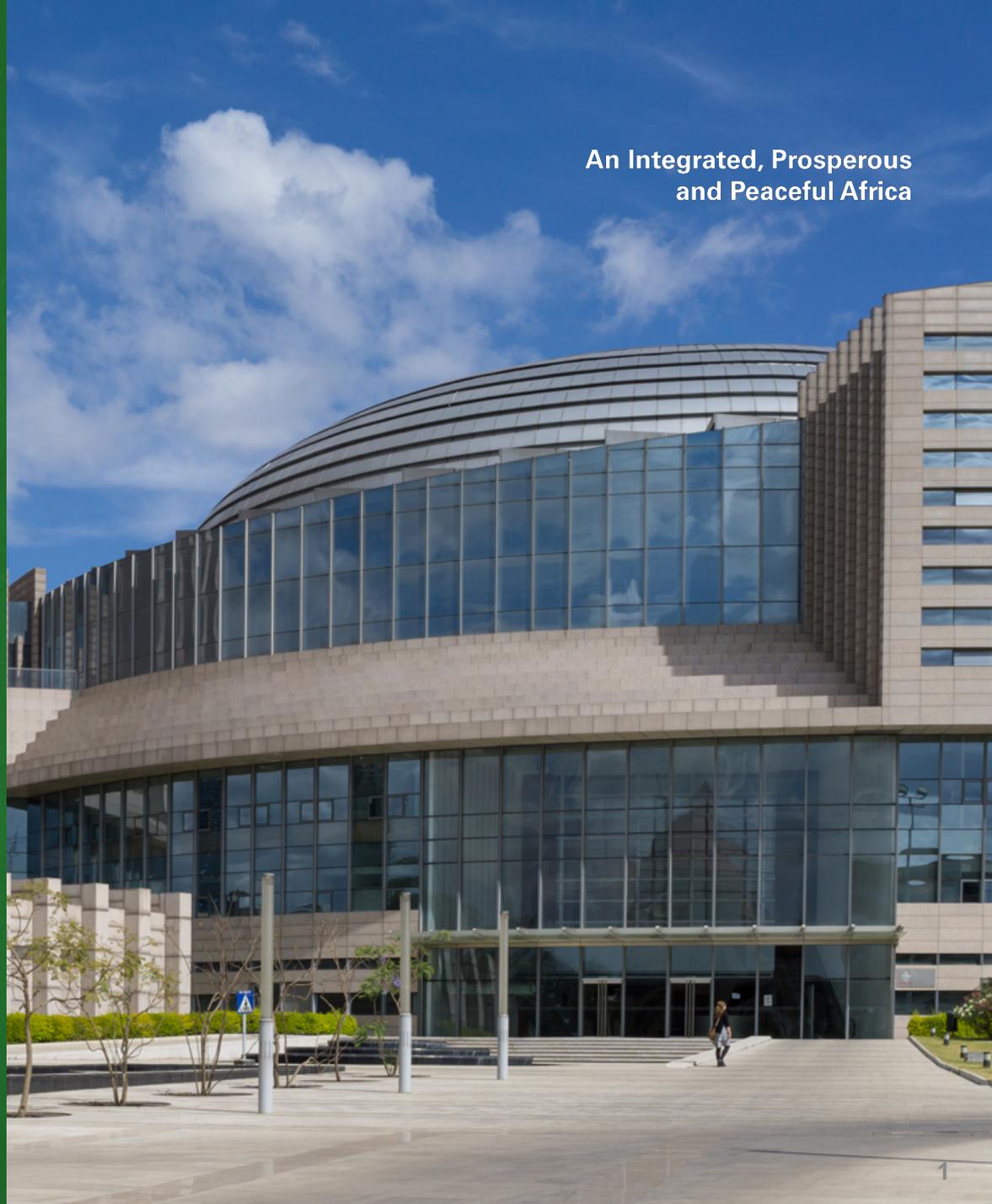
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An Integrated, Prosperous
and Peaceful Africa

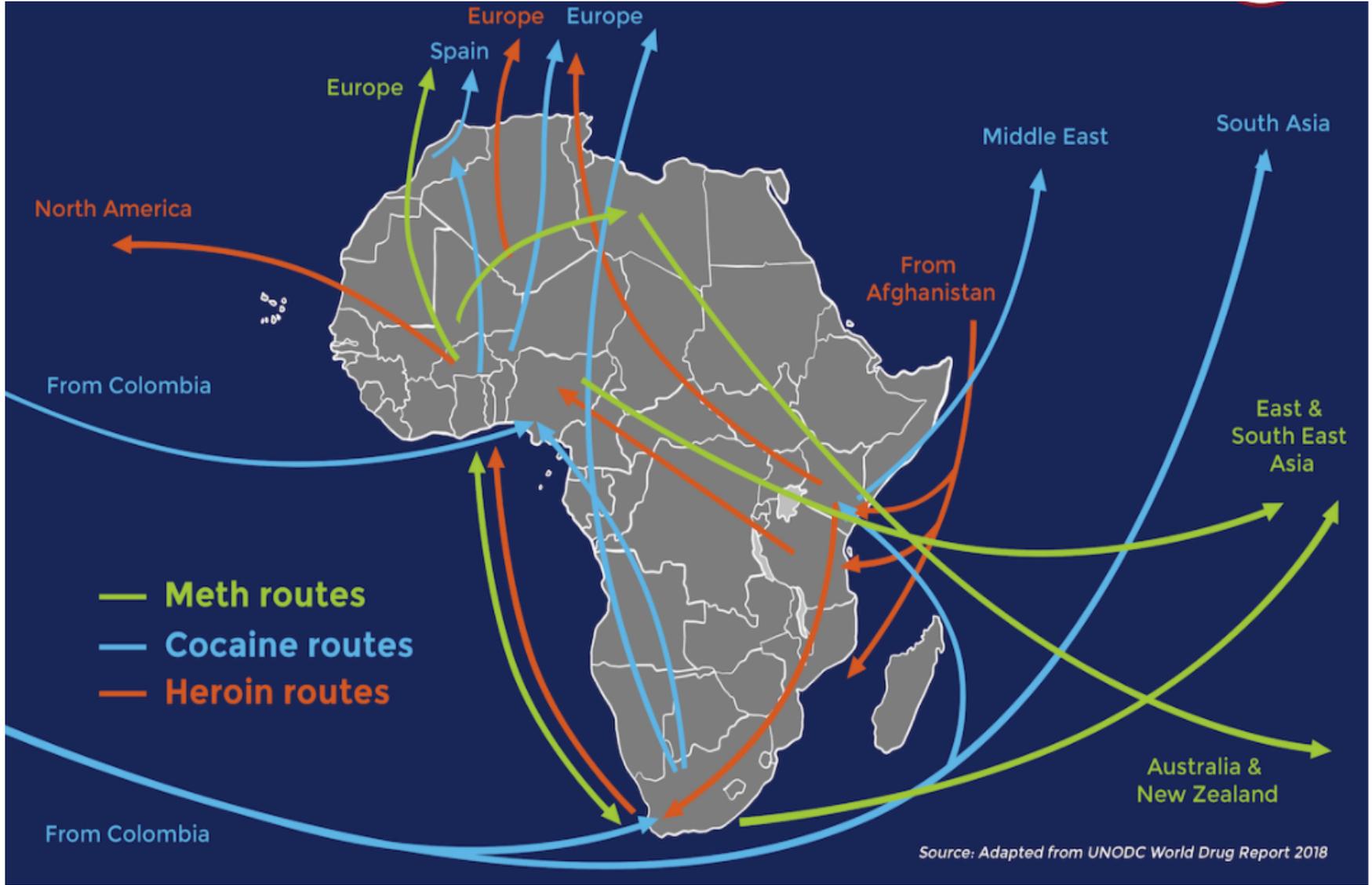


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- Consumption of psychoactive substances age-old practice in Africa- for medical, ceremonial or recreational purposes
- Complicated by emerging role as transit region in the global drug trade (With time transit spills to consumption).
 - Intensified international law enforcement efforts in the 2000s
 - Drug trafficking displaced to Africa- perceived as path of least resistance
 - Global demand for drugs and Changing consumption patterns

Introduction

Africa is a major transit route in the global trade in narcotics



- Significant threat to security, health, rule of law and sustainable development
- Exponential growth of drug users: Experts from African States noticed substantial increase in illicit drugs use in Sub-Saharan Africa after 2005.
 - ❑ 210 million - 4.8 per cent of global population aged 15–64 in 2009 (UNDOC)
 - ❑ 9 million in Africa -1.6% of the population (ENACT/ISS).
 - ❑ Modelling projections to 2050 not encouraging – 150% increase

Opiates: Heroin 0.3 % pop & 2% of global trade

Consumption mainly along the East African coast (in Kenya, Mauritius, Seychelles and the United Republic of Tanzania). The region remains significant entry point for heroin in Africa both as destination & transit area



- Heroin is cheap and highly addictive
- Increasing numbers of injecting heroin use

Opioids (including synthetic opioid analgesic **tramadol**) 0.3% pop & 79% of global seizures.

4.6M estimated to have used in West, Central and North Africa

Non medical use of tramadol,
Synthetic opioid and emerging
threat and growing concern.



Perceived by recreational users as boosting energy and improving mood.

Cocaine

0.4 % pop.

West & Central Africa
largest cocaine
seizures in Africa
over last two
decades (66%) and
80% seized in 2019



ATS excluding “ecstasy”-0.9 %

Egypt, Sudan, Nigeria
& South Africa reported
overall largest quantities
of ATS seized in
Africa (2014-2018)

Amphetamine-Type Stimulants (ATS)

- Methamphetamine
- Amphetamine
- Ecstasy



Cannabis

□ 12.45% higher than global average 3.8 %

□ **Africa** accounted for almost 60% of cannabis resin seized globally in 2018

□ Within Africa, **northern Africa** accounted for **98%** of all quantities of cannabis resin seized (57% of all cannabis herb seized in 2018)



Main Substances of Abuse in Africa

Primary and secondary drugs of abuse

➤ AU MSs reported high prevalence of two types of drugs- alcohol & cannabis among people seeking treatment for SUD in facilities across the continent (2016, 2017, 2018).

(Where one was the primary substance the other tended to be the secondary substance, except in a couple of cases where opiates, including tramadol, and cocaine were the secondary substances of abuse in treatment populations in Egypt and Nigeria respectively and NPS in Mauritius.)



Source. Report of the Pan African Epidemiology Network on Drug Use (PAENDU) for 2019, African Union Commission

Main Substances of Abuse in Africa

Main substances of abuse by clients in treatment centres in Africa (2016) :

Country	Primary	Secondary	Tertiary
Angola	Cannabis/alcohol	--	--
Cameroon	Alcohol	Cannabis	Tramadol
Nigeria	Cannabis	Opiates (incl. heroin)	Alcohol
Senegal	Cannabis	Alcohol	--
South Africa	Cannabis	Alcohol	Heroin
Tanzania	--	--	--
Uganda	Alcohol	Cannabis	Opiates
Zambia	Cannabis	Alcohol	--

Source – Report of the Pan African Epidemiology Network on Drug Use (PAENDU) for 2017, African Union Commission

Main Substances of Abuse in Africa

Main substances of abuse by clients in treatment centres in Africa (2017) :

Country	Primary	Secondary	Tertiary
Angola	Cannabis/alcohol	--	--
Botswana	Alcohol	Cannabis	--
Ghana	Alcohol	Cannabis	--
Guinea	Cannabis	Cocaine	--
Kenya	Alcohol	Cannabis	Heroin
Liberia	Cocaine	Cannabis	Alcohol
Mauritius	NPS	Opiates/opioids	--
Nigeria	Cannabis	Opiates (incl. heroin)	Alcohol
Senegal	Cannabis	Alcohol	Heroin
South Africa	Cannabis	Alcohol	Heroin (incl. nyaope)

Source – Report of the Pan African Epidemiology Network on Drug Use (PAENDU) for 2018, African Union Commission

Other Substances of Abuse in Africa

- Cannabis clearly remains the regions' most commonly used drug- higher prevalence than global average
- Range of drugs and drug markets expanding and diversifying as never before
- Cocaine markets are emerging and opiate markets seem to be expanding
- Non-medical use of prescription drugs such as tramadol becoming a major threat
- Practitioners struggling to address new challenges and new forms of addictions, e.g. NPS

Pharmaceutical Opioids

Rising non-medical use of opioids in many countries in Africa, (generally cheap and widely available due to unregulated production)

Tramadol – North, West and Central Africa

Codeine (typically found in cough syrups)- Southern Africa

Heroin

- Growing heroin use in over 50% countries notably, Comoros, Madagascar, Tanzania, Mauritius, Mozambique, South Africa, Lesotho, Kenya, Senegal (PAENDU rpt.).
- Many countries report IDU: Angola, Cameroon, Chad, Tanzania, Uganda, Zambia, Botswana, Ghana, Namibia, Togo, Tunisia, Cabo Verde, Gambia, Guinea, Malawi, Swaziland, Burkina Faso, Cote d'Ivoire, Comoros, Niger, Liberia, Ethiopia, Lesotho, Egypt, Madagascar, Kenya, Mauritius, Nigeria, Senegal, and South Africa.

Higher HIV prevalence in IDU populations

Other Substances of Abuse in Africa

Beyond opioids and Alcohol

New Psychoactive Substances

➤ **Smoking lizard parts and dung**, known to possess psychoactive qualities. Rampant in parts of Africa

➤ **Nyaope or whoonga** - a cocktail of anti-retroviral drugs, low-grade heroin, marijuana and sometimes rat poison.

➤ **Sniffing glue, petrol, sewage and Urine as inhalants** has also become common. (Hydrocarbons in petrol suppress the central nervous system to deliver effects similar to getting drunk while gas from the fermented sewage has attributes of a hallucinogenic and delivers a “euphoric high similar to ingesting cocaine)



Source: African Union Commission Drug Epidemiology Country Assessment reports, Quarts Africa

Beyond opioids and Alcohol

Khat (*Catha edulis*) – a plant-based substance not under international control is consumed widely in Africa (Djibouti, Ethiopia, Somalia, and to a lesser extent Madagascar)

Concerns about the harm associated with Khat, and the combination of Khat with other substances led to its control in Eritrea, Madagascar, Rwanda, Sudan and Tanzania)

Rohypnol-a benzodiazepine (Streetname – Green Beans, Rafs, 542, blue-boys, roche) – various parts of Africa

(when Rohypnol is ingested, after 20 minutes the effects of the high will kick-in. Rohypnol is a drug which is commonly used as date rape drug internationally including Africa.)

- Appreciable improvement recorded
- Range of treatment options limited
 - 1/18 compared to 1/6 global access
- Treatment in prisons settings/ alternatives to incarceration limited
- Social protection coverage for PWUDs not universal
- Evidence-based prevention, public awareness and community involvement inadequate

- AU Agenda 2063 and its Social Agenda 2063
- African Union Plan of Action on Drug Control and Crime Prevention (2019-2023)
- The “African Union Comprehensive Socio-economic Response to the COVID-19 Health Pandemic”
- The Pan African Epidemiology Network on Drug Use (PAENDU).
- Training & capacity building cooperation through relevant networks/partnerships (ISSUP, ICUDDR, Colombo Plan, UNODC, OAS/CICAD)

Building body of evidence

- More data could help curb the continent's increase in the use of illegal substances

Investing in prevention and treatment

- cuts crime, saves money to health, criminal justice and prisons costs , promotes better public health outcomes as the aim of treatment is to help individuals achieve stable, long-term recovery and become productive members of society, and to eliminate the public health, public safety, and economic consequences associated with addiction.

Investing in balanced approaches

Biggest challenge remains for countries to invest sufficiently and scale up

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