Introduction

This article provides an overview of the annual crime statistics as released by the South Africa Police Service (SAPS) from 1994 to 2005, which will be portrayed in graphics and briefly discussed. But, as the crime rates will demonstrate, there is need for a closer look at and interpretation of South Africa’s drug-related crime. Hence the focus of this article will be on the drug-crime nexus, more specifically on the drug, methamphetamine, known colloquially as ‘tik’.

Any discussion on crime statistics and for that matter the links between drugs and crime is beset with inconclusiveness and speculation. To re-iterate the debate outlined in the first article on crime statistics,¹ the said statistics are notorious for being ambiguous, underestimating or misrepresentative of actual crime and in particular, subject to political manipulation. Those with a vested interest in crime statistics can interpret them as they see fit - to represent successes by government departments or as a reliable representation of public trust in the police, for instance.

A recent newspaper article commenting on the release of the crime statistics, describes their interpretation as a ‘spinner’s paradise’ for they are ‘as malleable as the hands of the spin doctor who holds them’.² The causative link between drugs and other consequential crime is also notoriously difficult to pinpoint with confidence as empirical studies often produce contradictory findings. Common sense would tempt us to believe that the consumption of drugs cause crime. Yet, studies have consistently shown that the relationship between drugs and crime is multifaceted. In the face of these challenges this article does not attempt to create hypotheses and prove or disprove them but will critically discuss the drug-crime nexus and so-called drug-related crime, especially with regards to the increasing prevalence of ‘tik’.

* Thanks to Elrena van der Spuy and Wilfried Schärf for their valuable comments during the drafting of this article.
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An update on South Africa’s crime statistics 1994 to 2005

Graph 1 represents the total crime rate per 100,000 of the population for the financial years 1994/1995 to 2004/2005.

Graph 1: Total recorded crime per capita in South Africa March 1994 to March 2005

Looking at this graph one can understand the optimism of Safety and Security Minister Nqakula when announcing the decline in many crime categories. It is perhaps indicative of the fact that crime really has gone down when one considers that the decrease, with exceptions, is largely across the board. For instance see also graph 2, which represents the level of violent crime\(^3\) in the country, and graph 3, which represents the level of property-related crimes\(^4\) in the country.

Graph 2: Violent crime per capita March 1994 to March 2005

\(^3\) This includes murder, attempted murder, culpable homicide, aggravated robbery, rape, indecent assault, assault with the intention to inflict grievous bodily harm and common assault.

\(^4\) This includes burglary at residential premises, burglary at business premises, common robbery, theft of motor vehicle and motorcycle, theft out of motor vehicle or motorcycle, stock-theft, all theft not mentioned elsewhere, malicious damage to property and shoplifting.
All three graphs are similar in that the current crime rate seems to be more on par with pre-1999 rates. What does this mean exactly? Did the past five years represent a surge in the crime rate and thus the present drop is the start of a lower trend? Is the current low level an anomaly with future years returning to higher levels? The predictions of Mark Shaw made in 1998 still resonate.\textsuperscript{5} At the time, he posited three scenarios: that the crime rate would continue to rise and peak in the few years after 1998; that the crime rate would stabilise after 1998 and decrease to pre-1990 levels (which would entail a level even lower than the 1996/1997 crime rate) or that the crime rate would stabilise at a high level. Shaw’s predictions were predicated on the belief that societies necessarily undergo turbulent times during transitional periods until such time as civil society and the state begin to cope with the transition. Also that development through a maturing governance infrastructure reduces certain types of crime and will eventually produce a levelling off or dropping of crime. It seems that a mix of all three of Shaw’s predictions would help to explain the crime rate – yes, the crime rate did rise and peak after 1998, yes, it did stabilise and begin to decrease – possibly even decreasing to pre-1990 levels in future years and yes, it did stabilise at a high level but that stabilisation may be over and the start of a new, lower, stabilisation may be beginning. The fact remains that each time the crime statistics are released there is a new development, new predictions are made and there is a need for the further release of statistics to fathom what the past represents and where the future crime rate is headed. Notwithstanding all of this, one must also not forget the possibility of manipulated figures, changes in reporting trends, police and other state department special efforts (such as zero tolerance policing and Bambanani Against Crime) – all of these factors have an impact on the crime rate. But again the fact that the crime rate has decreased across

\textsuperscript{5} Berg and Schärf op cit (n1) 62.
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so many crime categories may mean that actual crime has lessened. Many
violent and property crimes, which are fairly consistently well-reported or
discovered by the police such as vehicle theft, theft out of or from motor
vehicles and murder have shown significant decreases.\(^6\) In other words
the crime statistics may be representing the extent of a real drop in crime
and therefore more than simply a glitch in police processing, a successful
police strategy or a considerable decrease in public reporting of crimes.

What has shown a significant increase is the level of drug-related crime.
Graph 4 represents the total drug-related crime in the country. Drug-
related crime is ‘trading [dealing], cultivating or manufacturing prohibited
drugs or any attempt, soliciting or conspiracy to commit such crime’ as
well as the use and possession of prohibited drugs.\(^7\)

The main culprit for the surge in drug-related crime is the 120% increase
in drug-related crime in the Western Cape since 2002/2003 and to a lesser
extent the increases in drug-related crime in KwaZulu-Natal (80%) and the
North West (71%) since 2002/2003. Consider first the level of crime in
each of the provinces as shown in graph 5.

\(^6\) RP Hirschowitz, P Buwembo, J Serwadda-Luwaga and H Nasholm. Victims of Crime Survey

\(^7\) N Balfour. Details of the special remission of sentence for sentenced offenders, probationers
Drugs and Drug Trafficking Act 140 of 1992, ss 3-5.
The Western Cape still has the highest number of crimes per 100 000 of the population despite a slight decrease. This decrease could have been more pronounced was it not for the huge increase in drug-related crime, particularly over the past couple of years as graph 6 shows – also providing an area breakdown of the province showing an increase in drug-related crime across all provincial areas.

When interpreting drug-related crime statistics the data may be representative of two things – success of the police through increased detection or an increase in the volume of drugs thereby impacting on police efforts.\(^8\) Drug crimes are usually ‘police-driven’ crimes which are usually poorly reported. The statistics therefore usually represent the efforts of police during raids.

\(^8\) N South 'Drugs, alcohol, and crime' in M Maguire, R Morgan and R Reiner (eds) *The Oxford Handbook of Criminology*, 3ed (2002) 914 at 929.
However, seeing that the increase is fairly consistent throughout the Western Cape and starts to show an increase in 2003/2004, it would seem that the rise in drug-related crime is not solely due to particular drug raids by the SAPS or a sudden interest by the public in reporting drug-related crime. In fact the increase correlates with recent experiences in the Western Cape in terms of the rise in methamphetamine or ‘tik’. The remainder of this article will address this problem. First, providing a detailed overview of what ‘tik’ is, its effects, prevalence and exposing the difficulties surrounding the drug-crime nexus, concluding with a critical assessment of drug-related crime in South Africa and its implications.

What is it about ‘tik’?

‘Tik’ is a highly addictive, synthetic stimulant which has been around for some time, surfacing under different names and manifestations over the decades. Methamphetamine has a variety of colloquial names – such as ‘speed’, ‘crank’ and ‘go-fast’ – which allude to its energising effects, ‘crystal meth’, ‘ice’ and ‘rock’ – describing the way the drug looks in its solid form and ‘tick tick’ – said to have been coined to describe the sound the drug makes when smoked. But there are many more names by which the drug is known. In South Africa the crystal form of the drug is crushed and is popularly known as ‘tik’/ ‘tuk’ or ‘tuk-tuk’ – again alluding to the sound the drug emits when the powder is heated and smoked, ‘straws’ – the manner in which it is packaged, that is, in a drinking straw with the ends burnt closed, and ‘globes’ – referring to the fact that it may be smoked through a light bulb from which the metal thread has been removed. Although the drug can be smoked, snorted, taken orally or

9 A lot has been written on the topic of ‘tik’ internationally, especially from the United States. Much of this information - which is from various perspectives, from media, law enforcement, medical and criminological perspectives to name a few – will be extrapolated to the South African situation. This is due to the fact that there is a relative paucity of information on ‘tik’ in South Africa. Studies have predominantly focussed on the connection between drugs and crime but not specifically on the impact of ‘tik’ perhaps due to the relative novelty of the drug. A large part of the information utilised in this article is from the South African Community Epidemiology Network on Drug Use (SACENDU) but the article also relies heavily on media interpretations of the spread and consequences of ‘tik’ which necessarily raises issues of objectivity. Over-reliance on limited sources necessarily impacts on the type of analysis that is produced and there is a definite need for more longitudinal criminological analysis of the links between substance abuse and crime and more specifically on ‘tik’ and crime which may better inform debates on the topic.


11 T Leggett ‘On the Tuk-Tuk express: Has methamphetamine hit the Cape Flats?’ (2003) 6 ISS Crime Quarterly 33 at 34.

12 For a comprehensive list of street names used see: http://www.whitehousedrugpolicy.gov/streetterms/ByType.asp?intTypeID=14, accessed on 27 September 2005.

injected, the drug is most typically smoked in South Africa (that is, Cape Town) and produces an odourless smoke which is not as detectable like dagga.

In the United States, since the 1980s, ‘tik’ has been particularly easy to manufacture due to the fact that a recipe for the creation of the drug was developed and made publicly available and consequently allowed anyone with the right materials (and an internet connection) to create the drug. Its ingredients include cold medicines containing pseudoephedrine and fertilizer containing anhydrous ammonia.

According to research, the effects of ‘tik’ on users are manifold, including a sense of euphoria and serenity, heightened energy, insomnia and restlessness, (sometimes not sleeping for a week or two), extreme self-confidence, increased sexuality and irritability. It is known for producing violent and psychotic behaviour and an overdose may result, for instance, in convulsions, stroke or renal failure. Users may become tolerant of the drug and require increased doses. Long-term effects and the over-stimulation of the central nervous system leads to ‘severe weight loss and anorexia, severe dermatological problems, higher risk of seizures and uncontrollable rage/violent behaviour’, as well as inducing ‘a tremor similar to Parkinson’s disease’, confusion, memory loss, paranoia, psychotic and depressive reactions and panic disorders. ‘Abusers become nervous and agitated, a condition described as “tweaking” that makes them prone to violence.’

Another negative side-effect of the drug is its impact on HIV/AIDS. Studies conducted in the United States have shown that ‘tik’ use combined with

15 D Leinwand ‘Counties say meth is top drug threat’ (2005) July 5 USA Today 3 at 3.
18 Dentists in rural parts of the United States are increasingly seeing incidents of what is known as ‘meth mouth’ where the levels of dental decay due to side-effects of methamphetamine addiction are so severe that full-mouth extractions are required. Law enforcement personnel are taking advantage of this and using ‘meth mouth’ to identify potential users. AFP ‘Tik responsible for dental decay’ Sunday Times, 1 August 2005, available at http://www.sundaytimes.co.za/zones/sundaytimesNEW/basket7st/basket7st1122884265.aspx, accessed on 6 October 2005.
20 Witkin op cit (n10) 50.
HIV medication may be reducing the effects of the medication. It has also been shown that ‘tik’ users are less likely to adhere to their strict HIV medication schedule thus further impacting on the effectiveness of HIV treatment. The increased sense of sexuality when using the drug has particularly impacted on the spread of the virus as reports from the United States have shown. ‘Tik’ has been identified as ‘a new challenge related to treatment and prevention of HIV infection.’ Not only are ‘tik’ users more likely to be HIV positive, but there is some support for the claim that the HIV virus replicates and mutates more rapidly in the presence of ‘tik’.

The pervasiveness of ‘tik’ has adversely affected communities in numerous ways. For instance, the United States Office of National Drug Control Policy has identified an increase in cases of child abuse and neglect due to the abundance of ‘tik’ laboratories. Since ‘tik’ can be manufactured by almost anyone in any setting, it has been found, particularly in the United States, that children residing in locations where ‘tik’ is produced have not only suffered the negative physical effects of being exposed to volatile, toxic chemicals and drug paraphernalia, injuries related to fires and explosions but a number of children have been injured and even killed during drug raids. According to 2003 statistics from the Office of National Drug Control Policy nearly 3,500 children were affected, almost 1,300 were exposed to toxic chemicals, 44 children were injured and 3 were killed. Children residing at ‘tik’ labs are also at higher risk of being subject to physical and sexual abuse and severe neglect as their caregivers or parents may be ‘tik’ users and they may therefore also have to care for an incapacitated adult. Children at these ‘tik’ labs may also be forced to witness violence.

21 Thus far one fatality has been reported in the United States linking ‘tik’ use and HIV treatment. A Urbina and K Jones ‘Crystal methamphetamine, its analogues, and HIV infection: Medical and psychiatric aspects of a new epidemic’ (2004) 38 Clinical Infectious Diseases 890 at 890.
23 Urbina and Jones op cit (n21) 893.
24 Urbina and Jones op cit (n21) 890.
28 Swetlow op cit (n26) 4.
areas known for ‘tik’ production, found that around 10% of patients were treated for facial injuries sustained during lab accidents such as explosions of inflammable liquids or containers and spillage of toxic substances. The labs are also often booby trapped or protected in other ways (through heavily armed inhabitants and/or trained guard dogs) and are therefore hazardous for law enforcement personnel conducting raids. The manufacture of ‘tik’ has also severe consequences for the environment. ‘One pound of methamphetamine [can] release poisonous gases into the atmosphere and create 5 to 7 pounds of toxic waste’ which is most likely dumped by the lab operators rather than disposed of properly.

What is also of concern is the links between the rise of ‘tik’ use and the levels of violent crime with many law enforcers in the United States reporting huge increases in homicide and domestic violence incidences. Other crimes which have also been associated with the ‘tik’ increase are the theft of nitrogen fertilizer from farms for use as a solvent in the manufacture of the drug; the rise in identity theft, the theft of mail to obtain cheques, and other types of fraud.

According to the World Health Organisation (WHO) and United Nations Office on Drugs and Crime (UNODC) the use and production of ‘tik’ has risen throughout the world. In 2000, of those countries which reported to UNODC, 90% indicated a rise in the prevalence of ‘tik’. For instance, ‘tik’ lab raids in the United States had increased from 327 in 1995 to more than 13,000 in 2001. However, there seems to be a stabilisation trend emerging. In 2001, only 52% of those countries reporting to the UNODC reported an increase. The stabilisation appears to be taking place in countries which were initially hard hit by the drug, such as the United States, Australia and New Zealand. But it seems ‘tik’ is still on the rise in many East and South-East Asia countries, specifically Thailand. According to UNODC estimates more than 35 million people worldwide use amphetamine or methamphetamine regularly, with only 15 million regularly using cocaine and 10 million using heroin.

31 Ibid.
34 Chamberlain, McDonald, Torgersen, and Boozman op cit (n17) 104.
35 Even though the prevalence of ‘tik’ is overtaking hard drugs like cocaine and heroin in terms of popularity the dominant drug is still dagga, with around 163 million regular users worldwide.
In South Africa while there have been incidences of use occurring in Gauteng, KwaZulu-Natal and the Eastern Cape, the spread of ‘tik’ has largely been restricted to the Western Cape where it is being called an ‘epidemic’ with Cape Town schools in particular, struggling to contain the problem. Although the current number of ‘tik’ users is not known, the South African Community Epidemiology Network on Drug Use (SACENDU) collects information on alcohol and other drug use trends from six sentinel sites around South Africa, including Cape Town. The findings of SACENDU are made available every six months and consists of information collected from alcohol and other drug use treatment centres. SACENDU also provides a break-down of trends in drug and alcohol use, vulnerable groups, risk factors associated with substance use and the consequences of substance use. Drawing from SACENDU data it is clear that ‘tik’ use is clearly a Cape Town phenomenon. Of the 28 treatment centres from which the data was collected in Cape Town it is also apparent that the number of admissions of ‘tik’ users has increased to a large extent particularly since 2003. Graph 7 shows the rise in the number of ‘tik’ or methamphetamine users admitted to Cape Town treatment centres from mid-2000 in relation to admissions of users of other substances, including users of dagga/Mandrax, dagga, crack cocaine and ecstasy. The graph represents the overall proportion of drugs used – that is, substances that are the primary, secondary or tertiary drug of choice. This in contrast to a representation of substance abuse differentiated only according to primary drug of choice (to the exclusion of secondary and tertiary drugs), which SACENDU also provides. The fact is that many of these substances are used in combination with each other (and with alcohol) and therefore opting to represent the overall proportion of substances used, in graph 7, rather than just the primary substance used, best represents the current trends of poly drug use in Cape Town.
Graph 7: Overall proportion of substance users per type of substance admitted to Cape Town treatment centres between July 2000 and December 2004

One can clearly see from this graph the sudden rise in ‘tik’ users being admitted, particularly from 2003. However, there are limitations to what graph 7 represents. Admissions of ‘tik’ users to treatment centres do not necessarily reflect the number of ‘tik’ users in the general population. The rise in ‘tik’ admissions may be due to the addictive quality of the drug rather than to any exponential rise in ‘tik’ users in the community. In other words the number of ‘tik’ users may be relatively stable in relation to the number of users of other substances used and the admissions of ‘tik’ users may be over-representative of the actual numbers of users. Yet, researchers at SACENDU and treatment centres in Cape Town have claimed that the number of admissions is only a fraction of the number of users in the general population and that these admissions are in fact an accurate representation of the growth in ‘tik’ users in the community. According to one estimate there may be up to 200 users of ‘tik’ for every patient in treatment – adding up to about 140 000 users in the greater Cape Town area, spending up to R350 million on this drug per year.\(^{40}\) And the situation is apparently worsening with lengthy waiting lists for entry into Cape Town’s treatment centres – particularly the Cape Town Drug Counselling Centre which is expecting an annual total of 700 ‘tik’ clients by the end of 2005.\(^{41}\)

There are many reasons for the growth in popularity of the drug:

As mentioned, it is fairly easily manufactured as the ingredients are freely available (most can be bought at the local shop or pharmacy) and difficult to police or monitor.\(^{42}\) It is also relatively inexpensive to manufacture and, although at the time of writing local figures were unavailable, in the United States it costs ‘a hundred dollars to produce a thousand dollars’

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\(^{40}\) Special Assignment ‘Shattered Dreams’ (2005) July 5. SABC3.

\(^{41}\) Ibid.

\(^{42}\) Rawson, Anglin and Ling op cit (n14) 7. Lloyd op cit (n30) 4.
worth of drugs. The laboratories may be set up in any location and may also be portable so that they may be dismantled and set up elsewhere should a law enforcement threat present itself.

The effects of the drug are particularly attractive as its effects apparently last longer than other drugs. For instance, ‘tik’ users may experience a high of about 18 to 24 hours, whereas cocaine will last about 30 minutes. In South Africa ‘tik’ is also cheaper than most other drugs. Whereas a unit or ‘hit’ of ‘tik’ can be bought for as little as R20 to R30, ecstasy can cost up to R150, cocaine from between R100 to R200 and heroin for about R200 per ‘hit’. Whereas Mandrax and dagga are downers, ‘tik’ is an upper, and many are taking the drug because it increases self-confidence and energy and heightens the senses. This has implications for the type of person who is attracted to the drug. International studies have shown that women are taking the drug because of its ability to aid weight loss and suppress one’s appetite, while the drug is also making an appearance in the working environment as more and more workers are addicted to the energising effects of the drug. ‘As long as people need to work long hours in tedious, physically demanding jobs, and as long as people want to lose weight, the attraction of methamphetamine is likely to remain.’ However, in Cape Town, it appears that the drug is attracting a particular type of user. Graph 8 represents a profile of the type of user who used ‘tik’ as their primary substance of choice in Cape Town treatment centres for the year 2004.

Graph 8: Profile of tik users (primary substance of abuse) in treatment centres in Cape Town 2004

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45 Chamberlain, McDonald, Torgersen, and Boozman op cit (n17) 104.
44 Lloyd op cit (n30) 4.
45 Belsie op cit (n16) 1.
47 Within op cit (n10) 50.
49 Rawson, Anglin and Ling op cit (n14) 8.
In Cape Town it seems that 'tik' users being admitted to treatment centres fit a particular demographic profile – that is, most users are male, coloured, use the drug on a regular basis and are under the age of 20. However, one must be cautious as to whether this demographic profile is a good representation of 'tik' users in the community. It is not necessarily the case that all 'tik' users will opt for a treatment centre to manage their 'tik' addiction - community alternatives may be sought. Also, it may be the case that the dangers of 'tik' addiction, based on perceptions of where the drug is most prolific, has been better profiled in certain communities than in others, leading to more admissions from specific areas and specific groups of people. Yet, the fact that the number of admissions for 'tik' addiction so disproportionately represents a certain type of 'tik' user may mean that the statistics do, to an extent, represent who the average 'tik' user is in the community.

Although it has been acknowledged by the WHO that a number of youth are using the drug mistakenly believing that it is relatively safe to use, the number of youth using 'tik' in South Africa is apparently unprecedented. Nowhere in the world has the drug risen so quickly over such a short period of time with such a large contingent of users under the age of 20. There are a number of possible reasons for the high use of the drug amongst South African youth. Notwithstanding the obvious attraction of some of the effects of the drug – boost in confidence, self-esteem, energy etc, it seems that a particular reason for the rapid spread of the drug is the fact that because of its affordability, users - who may be children - are selling the drug to their peers. A gram of pure crystal methamphetamine costs about R200 to R300 of which ten straws can be extracted and smoked - each straw can be sold for between R20 to R40 or even up to R80. ‘Tik’ is spreading so rapidly that shop owners in certain Cape Town suburbs are increasing the price of drinking straws to take advantage of the market.

Also, according to Medical Research Council researcher, Charles Parry, ‘tik’ is ‘attractive to non-typical drug users’, attracting very young, first-time users, probably because of the ease of use, low cost and peer involvement. The fact that the coloured community seems to be the

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50 Notwithstanding the ambiguity and negative connotations of the term 'coloured' particularly during apartheid, the term is used in current South Africa studies to define a group of people with a similar history and common identity.

51 Special Assignment op cit (n40).


primary users of the drug (if one is to broadly interpret statistics) may be
due to the fact that the Mandrax industry, which is very much a Western
Cape drug of choice and has been linked to gangsterism, particularly since
the mid-1980s, has as Leggett states ‘paved the way’ for other types of
drugs.55 Many areas on the Cape Flats have been identified as high-risk
‘tik’ areas and at face value it seems that the rise in ‘tik’ may be related
to gangsterism in terms of for instance the number of youth taking the
drug. Studies on gangsterism have revealed that youths may be targeted
and recruited by gang members and due to the fact that they are unlikely
to receive lengthy prison sentences because of their age they may receive
favour from their gang by carrying out ‘hits’ on other gang members.56

According to Leggett, ‘tik’ is the perfect drug for carrying out a hit as it
removes inhibitions, fuels aggression and sharpens the senses. 57

The fact that it has spread so rapidly into the school environment,
unlike Mandrax, again points to the attraction to the effects of the drug
in light of the circumstances in which many youths find themselves.
According to research, 25% of schools in the Western Cape are regarded
as ‘high risk’ or ‘extremely high risk’ due to the violence generated by
neighbourhood gangs, children may be exposed to violence on a daily
basis, either witnessing or themselves becoming victims thereof.58 There
have been a number of media reports over the years of children in gang
areas suffering from injury and death in crossfire. The implications of
this exposure to violence during gang fights are manifold, but one can
understand how a confidence-inducing drug may gain popularity in the
light of these circumstances.

The spread of ‘tik’, not only in the Western Cape, but to the rest of
the country must have significant implications for the crime rate and for
health and socio-economic development in communities - especially
when the youth are the main users. What follows is an attempt to shed
light on the connection between ‘tik’ and crime by briefly outlining what
other studies have found, and other countries have experienced so as to
gauge what impact ‘tik’ is having, or will have, on crime rates and youth
development.

21 at 25.
ISS Paper 1 at 2.
58 A Kassiem ‘25% of Cape schools unsafe’ The Cape Times, 25 August 2005, available at
Author unknown ‘Children in the line of fire’, The Cape Argus, 5 August 2003, available at
Making the connection between drugs and crime: ‘tik’ and the crime rate

Many empirical studies have attempted to shed light on the connection between substance abuse and the commission of crimes. Despite the diversity of drugs under analysis, the types of user and the different types of crime focussed upon during these empirical endeavours, the conclusion of all these studies is largely similar – that there is a link between drugs and crime, but that this link cannot be reduced to a simplistic causal relationship. The links between substance abuse and crime are complex. Researchers – both locally and abroad – have recognised the heterogeneous nature of drug use and abuse and have focussed on providing analyses of types of users in relation to very specific contexts rather than attempting to provide generalised connections between the nebulous categories ‘drugs’ and ‘crime’. The shift in many countries to what South calls a ‘poly drug culture’ as well as the interplay between alcohol use and drug use has also necessitated a revision of conventional understandings and generalisations about drugs and crime.59 For instance, the possibility that drug use has become normalised has required a differentiation between ‘substance use’ and ‘substance abuse’ (many preferring the former, less value-laden, term to the latter term).60 In other words, the increasing popularity of drugs amongst the youth, public awareness and media representations of drug use as ‘normal’ or recreational have increasingly resulted in drug use being understood as forming part of mainstream culture rather than being solely a deviant subcultural activity explicitly linked to crime. This is also supported by findings that different users become dependent on different substances or may not become dependent at all and for that matter never engage in criminal activity. Therefore debunking of conventional understandings of drugs and the shift in understanding of (poly) drug use as being part of popular culture within a consumer-orientated society necessarily impacts on predictions and analyses of the links between drugs and crime.61

Consequently a range of studies have been conducted on specific types of drugs, various demographic groups and users and their relation (if any) to particular crime types.62 Various correlations have thus been found between drug use and age, geographic location, socio-economic status, death and injury (suicides, motor vehicle injury and other accidental injury and violent injury), sexual behaviour and criminality.63 It has only

59 South op cit (n8) 918, 919.
60 T Leggett Rainbow Vice: The Drugs and Sex Industries in the New South Africa (2001) x.
61 South op cit (n8) 918, 938.
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been through individual assessments of drug users that the links between crime and drugs become more apparent and that the circumstances of initially using the drug largely determine the extent to which crime – and what type of crime – is committed.64

'The concurrence of drugs and crime does not necessarily mean that 'drugs cause crime'. It simply means that drugs and crime tend to coexist and that involvement in crime may well precede drug misuse.'65

Overall what studies have found is that when the commission of a crime precedes drug use, the criminal activity (that is, acquisitive crime) may provide the means to purchase and use drugs which was previously not available to the user. Notwithstanding the fact that it is a crime on its own to be in possession, to use, manufacture or distribute drugs, when drug-taking precedes crime the initial taking of drugs may then contribute to crime. Gaining access to illicit drugs exposes one to an illegitimate economy and increasingly exposes one to situations in which crime is encouraged or frequently committed.66 As an addiction grows stronger, the user may resort to illicit means to purchase more drugs – yet, this depends on the addictive quality of the drug for instance, as some drugs have a much stronger causal relationship with crime than other drugs. Although the main types of crime committed may vary according to the user and the drug, users tend to engage more frequently in economic crimes. Yet even though the main motivation for the user may be to acquire resources, the use of violence may be a negative spin-off to these types of crimes.67 Similarly, in terms of the drug-violence link, violence can emanate from both sides of the drug spectrum – from the supply side and demand side. Not only may drugs produce a psychopharmacological effect, such as paranoia, aggression and so forth, but the illicit drug trade is beset with violent confrontations between rival dealers, disputes over supplies, debts, territory, the theft of valuable resources to trade for drugs, robbing of dealers, the killing of informers and the punishment of those selling fake drugs, for instance.68 Despite this and extensive studies conducted on illegal drug markets related to lethal violence, ‘there is no iron law that illicit markets will generate a high body count.’69 Yet, in

65 Allen op cit (n64) 358.
terms of the links between ‘tik’ and violent crime a study conducted by Zweben et al on 1,016 ‘tik’ users found that there were high levels of users having trouble controlling their anger and violent behaviour and that this corresponded to a high rate of assault and weapons charges as well as suicide attempts. What the study also found was that the rates of psychopathology and suicidal tendencies were slightly more pronounced for those who had injected the drug over and above those who had administered the drug in other ways.70

The taking of certain drugs may lead to psychopharmacological effects such as paranoia and aggression but the withdrawal symptoms may be as heightened - again the effects experienced depend on the type of drug. For instance, in terms of ‘tik’ use, there is a differentiation between casual users and binge users. Casual or low-intensity users will usually swallow or snort the drug to attain a small boost so that they can function in their daily lives - in their work life, to stay awake while driving long distances and so forth. Casual users may progress into binge users. Binge or high-intensity users will smoke or inject the drug. The difference in the methods of administration impact on the ‘rush’ experienced, with users who smoke or inject ‘tik’ experiencing an initial euphoric effect not as intensely felt by those who swallow or snort the drug. However, it is progressively more difficult to attain this euphoric state once the body adapts and ‘tweaking’ inevitably follows when no amount of ‘tik’ will produce the desired rush. Tweaking is ‘very uncomfortable’ to the user and has been identified as the ‘most dangerous stage of the methamphetamine abuse cycle’ for law enforcements officers who have to confront the user, since users are ‘extremely unpredictable and short-tempered’.71 However, just as users may be more susceptible to (violent) offending, they may be just as vulnerable to (violent) victimisation.72

So there are a number of factors impacting on the levels of crime and violence - strength of the drug, cost of the drug (the higher the cost the increased pressure to resort to crime to obtain the drug), psychopharmacological effect - including use and withdrawal symptoms, the length of effect of the drug, the individual reaction to the drug as well as the context in which the drug is taken.73 Interestingly, in terms of psychopharmacological effect, studies - both local and international

72 Rocha-Silva and Ryan op cit (n68) 325.
73 Rocha-Silva and Ryan op cit (n68) 328.
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- have found a much stronger link between alcohol use and violence than any particular drug use. 74 But, according to the gateway theory 75, the use of alcohol may lead to the use of other drugs and some studies have shown that hard substance use and multiple substance use is linked to the initial use of alcohol – particularly during adolescence. 76

‘Tik’ in the Western Cape

In light of the empirical studies conducted what can one deduce from the connections between ‘tik’ and crime in South Africa, particularly in the Western Cape?

‘Tik’ and crime

First, based on international experiences, as mentioned, it seems that law enforcement officials have recognised a connection between using ‘tik’ and the committing of certain crimes. It seems that SAPS officials on the ground are also recognising the impact of ‘tik’ on certain types of crime – prostitution, domestic violence, possession and dealing in stolen property, theft and housebreaking. 77 There have also been connections made between ‘tik’ and the illegal abalone trade based on the fact that well-known abalone traders were found at a ‘tik’ lab at one stage suggesting that, as with the Mandrax industry, abalone is being traded for ‘tik’. 78

Yet to make a prima facie correlation between ‘tik’ and crime rates is difficult. In-depth longitudinal studies are necessary to make this connection. In South Africa the 3-metros’ arrestee study was conducted by the Medical Research Council in collaboration with the Institute for Security Studies. 79 The study investigated the drugs-crime link, but unfortunately the timing of the research – conducted from mid-1999 to mid-2000 – means that the rise of ‘tik’ which started to take place later was not an explicit part of the study. The fact remains that ‘tik’ may impact on a number of crime categories and it is reasonable to assume that its proliferation will contribute to an increase in crime. Yet, the opposite seems to be true.

74 South op cit (n8) 936.
75 This theory posits that alcohol and dagga are ‘gateway’ substances in that they are usually the precursor to other illicit drugs which are considered to be more addictive or dangerous substances, such as heroin and cocaine.
77 Special Assignment op cit (n40).
78 J Steinberg ‘Drug smuggling and border control at Johannesburg International Airport and Durban Harbour’ (2005) 104 ISS Paper 1 at 3.
Currently, crime rates are decreasing. This decrease in crime in the face of an increase in 'tik' in South Africa (particularly the Western Cape) does not support the claims and experiences of international law enforcement and medical researchers that 'tik' is causing an increase in crime. The only category that is directly related to 'tik' use is the category of drug-related crimes but even these rates are heavily dependent on police activity (the instigation of investigations and raids) and do not represent the true level of drugs in circulation.

Despite these misgivings 'tik' is known for its violent side-effects. Up to 90% of 'tik' users profiled in one study in Cape Town smoke the drug and we know that smoking or injecting the drug produces the most potent high and therefore more agonising withdrawals and 'tweaking'. But then how does one correlate the sudden rise in 'tik' admissions (and therefore presumable rise in 'tik' in the community) from around the beginning of 2003 (based on graph 7) with statistics which have shown consistent decreases in most categories over the last couple of years? There are a number of factors that may explain a seeming decrease in crime in the face of increased prevalence of a violence-inducing drug.

First, we may be looking at the wrong years. Judging the crime rates from the period 2003/2004 when admissions to Cape Town treatment really started to increase may be misleading. This is due to the fact that the average time between a user’s first experience with 'tik' and first-time admission for treatment is 1.6 years, meaning that there may have been many 'tik' users well before this time and that we have already experienced a surge in crime due to 'tik', as previous years' statistics indicate. But, as stated, there are different types of 'tik' users, not all will become binge users or engage in criminal activity. A large contingent of youths is taking this drug, some at a very young age, but they may not resort to violent crime (at least not at the outset). In fact the majority of crimes committed may be no more than shoplifting to obtain light bulbs and drinking straws and stealing the rear brake light bulbs from cars. Even though they may impact on the crime statistics at some stage, they hardly count as serious crime. However, it is difficult to ascertain to what extent children on 'tik' are engaging in deviant behaviour. Station-level analysis would perhaps be appropriate to determine if certain crime categories have undergone an inexplicable rise such as acquisitive and violent crime. SAPS provide station-

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80 Zweden et al op cit (n70) at 181 and 185.
81 Parry, Plüddemann and Myers op cit (n25) 32.
82 The amount of time between first use and first treatment demonstrates the addictive nature of 'tik' when one considers that for heroin users the average time span is 3 years, 5 years for cocaine users, 4.8 years for dagga users and 7.6 years for Mandrax users. Parry, Plüddemann and Myers op cit (n25) 32.
83 McAdams-Mahmoud op cit (n54) 1. Merten op cit (n53).
level crime statistics but there are still difficulties in trying to provide a station-level correlation between drug use and crime. There are a number of areas in the Western Cape, especially on the Cape Flats, that have been identified by government departments, NGOs, drug counselling centres and the police as high-risk ‘tik’ areas, including for instance, Mitchell’s Plain, Khayelitsha, Worcester, Bonteheuwel, Manenberg and Delft. As the drug has spread so have other suburbs been identified as areas where ‘tik’ is a problem. But not all of these areas, such as Retreat and Bonteheuwel, correspond geographically with the station-level areas identified by SAPS, of which there are 149 areas. Also, a brief examination of the areas that do correspond with police stations areas, reveals that there has largely been decreases in violent and property crimes especially between 2003/2004 and 2004/2005. The only exception in most cases is the rise in drug-related crime, also between 2003/2004 and 2004/2005. Where there have been increases in violent and/or property crime these have been generally quite minor. Where there have been significant increases, it seems that different areas have experienced increases in different types of crime. For instance, Delft has shown a 64% increase in illegal possessions of firearms and ammunition from 2003/2004 to 2004/2005 while Khayelitsha has shown a 55% drop in this crime for the same period. On the other hand, Khayelitsha statistics show a rise in house robbery while Delft on the other hand shows a decrease in this crime type. In other words, there are no certainties as to exactly what crimes ‘tik’ has an impact on and it is also difficult to gauge whether increases are in any way related to ‘tik’ and if so to what extent. A more in-depth station-level analysis exploring the link between drugs and crime is beyond the purview of this article, but what can be surmised is that there is no prima facie positive correlation between the rise in drug-related crime and other types of crime.

Yet, there is also a real possibility that we have yet to feel the full extent of ‘tik’ on the crime rate and that the latest crime statistics represent a calm before the storm.

‘Tik’ and gang violence

Perhaps a more tangible connection between ‘tik’ and crime is the fact that the increasing market for ‘tik’ is in direct competition with other drug markets and this has resulted in a ‘tik war’. It is not entirely clear when this ‘war’ broke out but there have been ‘pipe-bomb attacks and execution-style killings’ of drug dealers in areas on the Cape Flats since May 2005. Apparently Chinese


85 A Smith and Z Khoisan ‘Police mount all-out drug war in Western Cape’ (2005) May 19 The Cape Argus 1 at 1.
triads who once had exclusive control over the ‘tik’ and Mandrax markets and Nigerian drug syndicates (who now want control over the market since the drugs they specialise in – cocaine and ecstasy – are falling in popularity) are vying over the market by pitting local gangsters against each other.\footnote{Ibid.} But these are recent developments and the increasing levels of violence associated with the ‘tik’ trade may only truly be revealed in 2005/2006 crime statistics. Also it is not clear to what extent this ‘tik’ war has really contributed to the levels of violent crime. Are these incidences being flagged specifically because they are related to the ‘tik’ trade and actually represent a minority of incidents amid the amount of violent crime generated in the community?

**Other effects of ‘tik’**

There are many other effects of ‘tik’ that need to be taken into account in the South African context such as the indirect effects of drug use amongst the youth such as increases in truancy and school drop-out rates leading to long-term problems of unemployment and gang proliferation. The impact on the spread of HIV/AIDS and the psychological and physical damage of ‘tik’ will mean a huge burden on South Africa’s health and welfare system not to mention increases in deaths and injuries due to driving under the influence, workplace accidents, as well as effect on those living in or near ‘tik’ labs – both children and adults. The burden on the criminal justice system is particularly problematic considering that many users are children and will have to be dealt with as such. Children should not be imprisoned. Therefore, diversion programmes and treatment facilities will have to become compulsory options. Hopefully the enactment of the Child Justice Bill (at the time of writing no real progress had been made in terms of efforts to enact the Bill) will help as the Bill requires the differential treatment of children and the implementation of viable diversion options. Even though the implementation of the Bill has already been costed, the sheer numbers of child offenders that will most probably have to be processed through the system as a result of ‘tik’ will pose a huge expense. As it is, an increasing number of children are being arrested and imprisoned for crimes such as theft which has been linked to ‘tik’.\footnote{Davies op cit (n36).}

It will also require the co-ordinated efforts of a number of government departments – the brunt of the burden falling on Social Services and Poverty Alleviation since drug treatment centres in the Western Cape are not keeping pace with the number of users needing treatment.

It is ironic that since many users of ‘tik’ are first-time users of a drug, ‘tik’ may be considered a gateway drug to other substances. Because coming down from the ‘tik’ high is so agonising, many ‘tik’ users take dagga or...
white pipe (dagga/Mandrax combination) to assist the process. According to SACENDU research on drug use amongst Cape Town users in treatment centres, 34.4% used dagga, 27.8% used ecstasy, 19.9% used Mandrax, 14.5% used cocaine, 12% used alcohol and 5.8% used heroin along with taking ‘tik’.88 Also since ‘tik’ is so addictive it is very difficult to rehabilitate the user and once this is achieved many users may return to the very setting in which they were initially introduced to the drug – that is, at school. ‘Tik’ has compounded the challenges faced by the Department of Education which is boosting efforts to deal with the problem.

Concluding Remarks

A number of law enforcement strategies have been created and implemented in the Western Cape to deal with the ‘tik’ problem. The SAPS have conducted a ‘blitz’ searching 3,000 premises on the Cape Flats (mostly in Manenberg) in May 2005 and are making efforts to solve the above-mentioned attacks on suspected drug dealers.89 The SAPS have also attempted to shift emphasis from the demand side (addicts and users) to the supply side (manufacturers, suppliers and dealers) so as to impact on the ‘tik’ and other drug trade.90 Concerned parties have focussed on controlling the ingredients for ‘tik’. They have called for the re-classification of pseudoephedrine as a schedule 5 drug, since it is currently being used as a substitute for ephedrine which was made a schedule 5 drug in mid-2003.91

There are also initiatives and programmes that have been developed to address the drug problem by, for instance, the Departments of Welfare and Education. The South African National Council on Alcoholism and Drug Dependence (SANCA) and the Cape Town Drug Counselling Centre, the Medical Research Council, amongst others, have also contributed substantially to awareness and treatment.92

The Western Cape Provincial Government Substance Abuse Strategy has been launched in June 2005 by the Western Cape Premier and members of the Provincial Cabinet. The Strategy has been devised to assist communities to work with the government and NGOs in addressing the supply, demand and rehabilitation aspects of substance abuse, especially

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88 Parry, Plüddemann and Myers op cit (n25) 32.
89 Smith and Khoisan op cit (n85) 1.
Tik. The Department of Social Services and Poverty Alleviation has started a door-to-door awareness campaign in Manenberg and launched a strategy for the creation of home-based care for addicts, particularly on the Cape Flats. There are also plans to establish a Youth Substance Abuse Treatment Centre in the southern suburbs of the Western Cape.

In mid-2003 the Ke Moja Anti-Drug Abuse Campaign was launched in the Western Cape by the Minister of Social Development in collaboration with the Central Drug Authority and the UNODC.

Besides these provincial efforts there are a number of national strategies, statutes and policies in place to address the drug problem in its entirety. But given the unprecedented impact and prevalence of ‘tik’ and the fact that certain people are particularly attracted to the drug there seems to be a need for a specialist response. Western Cape tactics seem to be on the right track in terms of adopting both a law enforcement and a rehabilitative tactic through targeting manufacturers and rehabilitating users. The main challenge is whether such efforts on the part of government and NGOs can keep up with the pace of the drug, considering for instance that the lead department – the Department of Social Services and Poverty Alleviation – is also one of the least resourced departments. It is not clear whether ‘tik’ is a passing fad, but should it gather momentum this will lead to greater challenges and long-term problems especially if it should spread more tenaciously to the rest of the country. Many Western Cape provincial departments are bracing themselves for the long-term impact of ‘tik’. It remains to be seen whether the next few years will see any changes in the popularity and dissemination of the drug within the Western Cape and in the other provinces.