



‘Desperados, Druggies and Delinquents’: Devising a Community-based Security Regime to Combat Drug Related Crime

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Abstract

Drug abuse amongst African youths makes them vulnerable to numerous threats. Many easily succumb to crime and violence. In South Africa, drug abuse is on the rise. In 2012, the World Health Organization reported that 15 per cent of South Africa’s population had a drug problem, giving it a reputation as one of the drug capitals of the world. The South African Depression and Anxiety Group in 2013 notes that illegal drug consumption in South Africa is double the global norm. Situated within national and sub-regional contexts, this article examines the growing drugs threat and links this to insecurity in Kokstad Municipality. Through interviews, the article proposes an appropriate community-based response mechanism to address the causes and effects of drug abuse. Drawing from Human Security and the Conflict Theory of Drug Abuse, community-based responses that prevent and reduce drug induced crime at the grassroots are seen as the way forward.

Résumé

L’abus de drogues rend les jeunes africains vulnérables à de nombreuses menaces. Beaucoup succombent facilement au crime et à la violence. En Afrique du Sud, ce phénomène est en pleine expansion. Selon l’Organisation mondiale de la santé, en 2012, 15 pour cent de la population était concernée par le problème de la drogue, ce qui lui conférait la réputation d’être l’une des capitales mondiales de la drogue. Le Groupe sud-africain pour la dépression et l’anxiété note qu’en 2013 la consommation illégale de drogues en Afrique du Sud était le double de la norme mondiale. Dans les contextes nationaux et sous-régionaux, cet article examine la menace croissante de la drogue et le lien à l’insécurité dans la municipalité de Kokstad. À travers des entretiens,

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cet article propose un mécanisme de réponse communautaire approprié pour traiter les causes et les effets de l'abus de drogue. Partant de la sécurité humaine, les réponses communautaires basées sur la prévention et réduisant les crimes induits par les drogues sont perçues comme la voie à suivre.

Introduction

Illicit drugs have become common across Africa, largely because of easy production, access and affordability. In addition to a burgeoning local market, Africa has become a major transit point for the global trade in narcotics. While history shows that Africa was a 'mere footnote' in the global narcotics trade, this has changed dramatically due to its advantage as a key location linking drug cartels in countries such as Colombia and Venezuela to the global North (Mungai 2015a). Although Africa's geographic location makes it a major transit point for drugs, a local market has easily emerged in these instances (*ibid.*). As of March 2015, about US\$ 1.25 billion worth of cocaine is smuggled annually through West Africa to Europe and North America (Mungai 2015b).

The African Union (2014) notes that in addition to cannabis (the most widely produced illicit drug in Africa), there is an increasing use of cocaine, heroin, amphetamine-type stimulants (ATS) and emerging new-psychoactive substances (NPS). The presence of illegal laboratories producing ATS for trafficking and consumption has also become a grave concern on the continent (AU 2014). While various legal frameworks are in place, such as the SADC Protocol on Combating Illicit Drug Trafficking (2006), Africa's porous borders and weak border security mechanisms have failed to prevent the flow of illicit drugs. Poorly guarded coastlines and unregulated airfields have further made parts of the continent a safe hub for traffickers (AU 2012).

The threat of illicit drugs requires collective action from the grassroots to the national, sub-regional and African Union (AU) levels. Appropriate policy responses are integral to tackling drug abuse and drug-related crime, but must also address structural violence. This requires an understanding of the causes of insecurity, which vary from underdevelopment, uneven development and inequality, to the legacies of exclusion and alienation. Particularly in a country such as South Africa, racialized capitalism and industrialization led to significant economic imbalances and educational differences between blacks and whites. In addition to this, other factors like unemployment, the lack of access to education and other services and the failure of the current political elite to address historical imbalances in a post-apartheid South Africa has resulted in various pathological symptoms. Drug abuse, drug trafficking and drug-related crime are part of this.

Emmett (2003) concludes that social analyses must go beyond a singular focus on specific criminal and violent activities to an examination of the broader structural causes of the social ills in South African society. This requires a shift from specific programmes that target the poor to measures that significantly reduce the gaps between the poor and the rest of South Africa's population (*ibid.*). While policymakers are vital in devising appropriate policies, this article argues that local and grassroots opinions and perspectives need to be prioritized in order to strengthen and improve the success of policies.

This article examines drug induced and drug-related crimes in South Africa, focusing particularly on Kokstad Municipality in the KwaZulu Natal province. Kokstad was selected due to the increasing concerns of communities there on the impact of drug abuse and links to the high incidence of crime in its (black) townships. Furthermore, Kokstad was selected as it is a major service and commercial centre, bordering both the Eastern Cape and KwaZulu-Natal provinces. The fundamental objectives of this article are to explore the critical problem of illicit drug abuse and its role in escalating insecurity in communities; interrogate existing responses by the municipality and other sectors; and devise appropriate security responses. Subsequently, the underlying research goal is to explore an appropriate community-based response mechanisms that may prevent future drug-related insecurity.

The article begins by examining the drug crisis in South Africa, Kokstad and its impact on the community. It goes on to establish the links between illicit drug use, human security problems and the conflict theory of drug abuse to better understand the causes and underlying factors that contribute to illicit drug use. The article then examines current responses to the drug crisis in Kokstad and through that presents and discusses an appropriate community-based response.

Human Security

Human security includes not only physical safety from violence and crime, but also economic safety from critical poverty, social marginalisation and fundamental under-provision of such elemental social and public goods as infrastructure, education, health care and rule of law. While the physical protection of an individual is key, economic inclusion, improving access to health, and creating social safety nets are important in ensuring that individuals are secure. Human security therefore ensures protection from structural violence such as poverty, unemployment, marginalization, economic exclusion, crime, sickness and hunger. These underlying causes

of insecurity have created a breeding ground for the sale of illicit drugs and drug trafficking. Entrenched structural violence, maintained by existing economic and political structures, has resulted in the perpetuation of crime and the spread of terror by the marginalized, excluded and voiceless in communities.

Kokstad is a prime example of the threat of illicit drugs to human security. As a deeper discussion of the case of Kokstad will show below, illicit drugs are a threat to not only personal security (crime, domestic violence), but also to community (poor inter-group relations), economic (poverty, unemployment), food (hunger) and health security (disease and illness). Ensuring human security therefore requires a 'people-centred, multi-sectoral, comprehensive, context-specific and prevention-oriented approach' (UN Human Security Unit 2016:7). Applying the human security approach to Kokstad, requires that solutions take the individual as the key unit of analysis and identify threats to their survival, their economic livelihood and their human dignity. It also requires a broad examination of the causes of drug use and related insecurity, which includes inter alia South Africa's historical legacies; past and current political systems of government; social gaps; longstanding economic needs and inequalities; and inefficient health sectors. Achieving human security also requires the cooperation and involvement of not only the security sector, but the state, the health sector, community-based organizations and relevant government ministries. A human security approach must be tailored to meet the unique needs of communities within Kokstad.

A Conflict Theory of Drug Abuse

Understanding why individuals use and eventually abuse illicit drugs is important in devising appropriate responses. Goode (2011) notes the motive of the user and the availability of drugs as the two combined reasons for why individuals use drugs. In the case of Kokstad, drug addicts abuse drugs for a wide range of economic, social and psychological reasons and the availability of cheap drugs ensures that they can abuse these easily. While three broad theoretical reasons exist for drug use (namely: biological, psychological and sociological), this article focuses on sociological theories as explanations for drug use within the Kokstad context. Sociological theories see substance abuse as a phenomenon emerging from and embedded in cultural, social and economic linkages (Goode 2011). These causes are usually external to the individual and focus on their immediate and distant environment. In understanding the motive for drug use within Kokstad, it is important to understand the factors external to the individual. These include society,

the individuals' relationships to others (of a different economic or racial background), and the structures that they have to function and live in. All of these could contribute to their abuse of illicit drugs.

While multiple sub-theories exist¹ the focus of this article is on a conflict theory of drug abuse. A conflict theory of drug abuse employs a macro approach which explains the 'big picture, the larger structural factors – forces that influence not merely individuals but members of entire societies, cities, neighbourhoods and communities' (Goode 2011:163). This theory is guided by the logic that the use of hard drugs is more popular amongst lower and working class individuals than the affluent and that various structural factors, embedded in economics and politics, are the reasons for this (ibid.). Applying the work of key authors (Goode 2011) to structural factors and drug abuse in South Africa, it can be concluded that limited economic and employment opportunities for unskilled and uneducated black South Africans, the generally low-income position of those who can actually obtain work and increased impoverishment have all contributed to an increase in the consumption of drugs and their sale as an alternative and viable form of income. In South Africa, the ever-increasing gap between the haves and the have-nots and the fact that social grants have not helped to reduce large income disparities has led to the involvement of mainly poor black youth in illicit drug trafficking. As Goode (2011:169) notes, 'inequities in the control of economic and political resources' bring understanding as to why some individuals and communities are likely to use drugs or become drug addicts.

Illicit drug use has also flourished because users see it as an escape from their poor and unchanging economic predicament. Drug abuse brings a high, an excitement and pleasure to escape the hopelessness, depression and exclusion that the poor and marginalized experience. In addition, poor communities are more susceptible to drug dealers and drug abuse because they are 'short-changed by local, state, and federal governments and bypassed by developers and entrepreneurs' (Goode 2011: 167). Thus available and cheap drugs continue to provide a form of escape for many South Africans due to feelings brought on by a failed state and unchanging economic and politically oppressive conditions.

South Africa's Drug Threat

Different illicit drugs are in use across South Africa² and they are commonly used by unemployed and economically excluded individuals. Illicit drugs are those illicitly used psychoactive substances 'bought through illicit channels or obtained legally but used by persons for whom they were not prescribed

or in quantities larger than prescribed for purposes other than those for which they were prescribed' (Robins 1980:215). Drug abuse refers to all such illicit use up to the point of addiction. Goode (2011) notes that drug use becomes abuse when it is uncontrollable, persistent and heavy i.e. when the drug user reaches a point of complete dependence on the drugs. This is usually accompanied by social and personal harm. Illicit drugs are often cheap and easily accessible, which further draws users into a life of constant and uninhibited drug use. Furthermore, across South Africa there is poor law enforcement of drug use and supply with reports of bribes given to police to cover and sustain these acts (Ephraim 2014).

One of the most dangerous and cheapest substances in contemporary South Africa is *Whoonga*. Also locally known as *Nyaope*, *Whoonga* has become a common drug of choice in urban centres and townships and locations across the country. According to the South African Justice Department, *Nyaope* was discovered in the 2000s in townships such as Mamelodi, Soshanguve and Atteridgeville in the Pretoria area (Ephraim 2014). While *Nyaope* is a white powdery street drug made up of heroin and cannabis, it can also be a rough mix of poor grade heroin and other elements, including rat poison and chlorine (Ephraim 2014). Maseko (2015) describes it as a mix of low grade heroin, marijuana, rat poison, cleaning detergents and chlorine, costing about US\$² for one hit. Others add crushed up anti-retrovirals (ARVs) (medication prescribed for HIV patients) into the drug's recipe. While it took a while for the government of South Africa to class *Whoonga* as an illicit drug,³ selling the drug now carries a fifteen-year sentence. While stronger sentences seem to be useful, Maseko (2015) notes that this does not deter addicts.

Illicit Drugs in Kokstad Municipality

All respondents noted the increasing availability of illicit drugs in Kokstad (KII 2016). The reasons for this increase was attributed to the rise in the number of referrals, increased calls for assistance with drug addicts by family members, clients and stakeholders, and the large presence of drug dealers in Kokstad. These drugs are sold in schools, by the road, in some shops in town and particularly between 5pm and 10pm in some areas. Most respondents (KII 2016) noted that a majority of these drugs are brought in by drug dealers from big cities such as Durban, Johannesburg and Cape Town, as well as from Lesotho (a seven to eight hour drive from Kokstad). It was noted by most respondents that drugs are mostly found and used in the following locations across Kokstad: the town centre, Bongweni, Shayamoya, Extension 7, Horseshoe and Twist Valley. A respondent noted that some of these drugs can also be found at teenage parties (KII 2016).

The age range of drug users varied from as young as nine years to as old as fifty-five years. Most respondents noted that the majority of drug users are from poor economic backgrounds and low income groups (KII 2016). This is in line with Goode's (2011) assertion that drug abuse has a larger bearing on the poor communities because they lack the resources to fight back and are more vulnerable to drug dealers and the glaring presence of drug abuse. Another respondent (KII 2016) noted that homeless or street children also use illicit drugs and beg for money to obtain these drugs.

A wide range of reasons were given for increased and sustained illicit drug abuse in Kokstad. These included economic factors such as the desire for financial gain and easy ways to make money. Unemployment and joblessness were cited as one of the most common reasons for starting along this path. Social factors included poor parenting and a lack of discipline in the home; the presence of teen-led homes as a result of absent, sick or dead parents; abusive parents; personal tragedies; disappointments in relationships or significant change in family dynamics such as broken homes and children ending up in foster care. It was evident that young men particularly ended up using drugs because of significant personal and emotional experiences as children. Drugs therefore became a form of escape as users tried to battle with behavioural changes, feelings of low self-esteem, self-blame, rejection, resentment and anger. Parental habits of drug abuse are also passed down to children. Other reasons for drug use included boredom and a lack of activity amongst students, especially after the end of the school day. The lack of education in families on how to prevent drug use, how to recognize a user, and how to carry out an intervention have hindered efforts to prevent drug abuse or rehabilitate existing users (KII 2016).

Beyond the general threats to the safety and security of the community, respondents noted that drug addiction has had very negative results on family relationships, schools and the community in general. Drug addiction has resulted in the physical separation of families because of arrests, exclusion of family members who abuse drugs, parental neglect of children, and the forceful removal of children from homes by social workers or by their families. It has also led to dysfunctional family relationships, increasing poverty, financial ruin, bankruptcy and debt, especially when providers are drug addicts. In schools, drug abuse has had a damaging impact on learners, a result of which is that they perform poorly, have trouble concentrating in class and are unruly and loud. Others have dropped out of school completely. Some drug users have been violent to staff and other learners.

Goode (2011) states that drug abuse not only harms users but the whole community.

In some areas in Kokstad, relationships are no longer cordial. There is little community trust and neighbours do not freely visit each other due to the fear of theft. Neighbours have blamed and accused each other for stealing whilst drug addicts and their families have been shunned by neighbours. The drug users themselves are not immune as they are exposed to various outcomes ranging from medical complications, overdose, crime, violence, imprisonment and death (Goode 2011: 166). Drug addicts undergo major psychological and physical challenges. Ephraim (2014) notes that without regular fixes, individuals have to battle with anxiety and physical pain. Respondents noted a wide range of physical and mental effects from excessive drug use including schizophrenia, hallucinations, skin disorders, changes in skin complexion, self-neglect and sores around the mouth. Drug addicts also experience significant weight loss as the drugs greatly reduce their appetite. Withdrawal symptoms can also include cramps, nausea, mood swings and aggression (Ephraim 2014), all of which trigger long-term addiction. Users of *Whoonga* in Kokstad particularly experience cold chills, intense stomach cramps and profuse sweating during withdrawal.

Relationship Between Drug Use and Drug-related Crime

It was widely established that illicit drug use and drug addiction has become a threat to the safety and security of residents in the municipality. Goldstein (1985) presents three models that link alcohol and drug use to crime, namely the economic model, the psycho-pharmacological model, and the systemic model. The economic model argues that maintaining one's drug addiction will require accessing income through theft or robbery (Goldstein 1985). This argument holds some weight as addicts are constantly looking for income to feed their addiction. Most respondents agreed that *Whoonga* addicts will steal anything and even kill in order to feed and maintain their addiction (KII 2016). Some argued that there has been a high increase in theft and break-ins in Kokstad since *Whoonga* became a major drug in the area (KII 2016). This is in line with the assertion made by authors like Maseko (2015) and Ross (2013) that addicts have resorted to stealing from family and neighbours in order to purchase drugs. Some respondents noted the strong relationship between drug use and crime attributing the high numbers of robberies, stabbings and deaths to drug use. Respondents also described drug users as aggressive, psychologically unstable, short-tempered and unable to think logically (KII 2016). They have also become violent at home and in the community. Peaceful protests in Kokstad have turned violent as some protesters are under the influence of drugs.

The psycho-pharmalogical model proposes that the intoxication of drugs and alcohol results in 'disinhibition, cognitive-perceptual distortions, attention deficits, bad judgment and neurochemical changes which cause criminal and highly violent behaviour' (White and Gorman 2000: 170; Collins 1981; Fagan 1990). Thus the contents of these drugs create irregular behaviours in drug users which trigger violent responses. Others noted that the combined use of drugs and alcohol⁴ has been a catalyst for many accidents, crimes and societal vices (KII 2016). Chronic intoxication, according to Virkkunen and Linnoila (1993) and White and Gorman (2000: 170), can increase aggression and crime due to factors such as withdrawal, sleep deprivation, nutritional deficits, impairment of neuropsychological functioning, or enhancement of psychopathologic personality disorders.

The systemic model notes that violent crime is integral to drug trafficking and drug distribution. Violence thus occurs through 'fights over organizational and territorial issues, enforcement of rules, punishments of and efforts to protect buyers and sellers, and transaction-related crimes – such as robberies of dealers or buyers, assaults to collect debts, and resolution of disputes over quality or amount' (White and Gorman 2000: 174; see also Miczek et al. 1994). As far back as 2007 in Ghana, drug barons have hired contract killers and the drugs trade has been the major reason for the increase in contract killings in the country (Mills 2007). In addition to drug use, others attributed the rise in crime to other factors like poverty, hunger and unemployment (KII 2016).

A Kokstad Community-based Response Mechanism

An appropriate response is necessary in responding to illicit drug use, drug addiction and related crime. Various community responses have been in the form of prayer days, prayer walks, and increasing alertness to criminal activities in their communities. The impact, however, has been minimal, as the root causes for drug abuse and addiction have not been addressed. Thus the absence of more concerted and organized responses impedes efforts at preventing drug dealers and drug abuse. A putative security mechanism for Kokstad was derived based on the views and perspectives of respondents on how drug abuse can be prevented and how drug-related crime can be reduced in Kokstad. A two-pronged approach is therefore proposed below (see Table 1). One approach focuses on drug prevention and drug support programmes for addicts; the other focuses on initiatives to prevent drug induced crime.

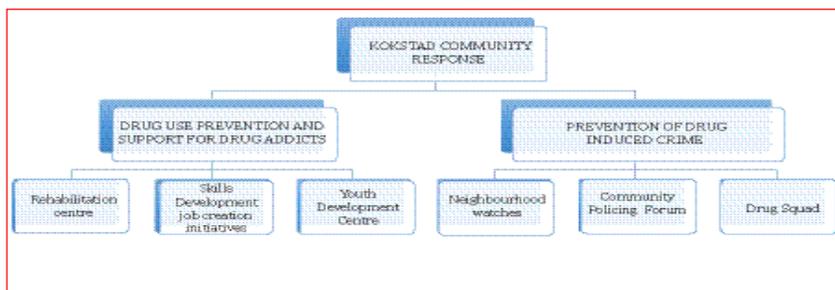


Figure 1: Kokstad community-based response

Source: KII (2016)

Drug Use Prevention and Support for Drug Addicts

Drug abuse prevention programmes should be community-based and benefit from the involvement of the whole community (UNODCPP 2002). For the case of Kokstad, drug use prevention and providing sufficient support to drug addicts requires the following programmes: a rehabilitation centre, a youth development centre and skills development initiatives. This is in line with a respondent's view that drug dealers can be stopped by addressing the needs and challenges of drug addicts and individuals at risk of using drugs (KII 2016). These programmes address the issues of unemployment, joblessness, lack of skills, and the absence of support and prevention programmes for at-risk youth. Drug use prevention generally covers activities that focus on 'preventing or delaying the initiation of drug use and the potential transition to the problem of drug use' (UNODC 2015: 18).

Rehabilitation Centres

The South African government committed to include drug rehabilitation centres (residential treatment facilities) in each of South Africa's nine provinces to address the rise in drug addiction. However this has been crippled by insufficient funds and the high demand for rehabilitation (Ross 2013). As a result of this, unlicensed rehabilitation centres have popped up across the country in efforts to meet the demands from families desperately looking for help (Maseko 2015). A majority of respondents noted the need for a local Kokstad Rehabilitation Centre where detox and rehabilitation support could be provided (KII 2016). This demand emanates from the fact that addicts who are brought or referred to social workers in the Department of Social Development and the local East Griqualand and Usher Memorial (EGUM) Hospital are usually referred to government-owned rehabilitation

centres in Newlands Park (a respondent noted that there is a long waiting list), and others like the Thembetsha and Mthatha rehabilitation centres.

A rehabilitation centre that services the community will increase accessibility for drug users and their families. This requires the support of government because currently rehabilitation centres are far away and private facilities are too expensive.⁵ This centre could work with existing local organizations such as UNTWISTED, which holds five-day detox programmes to check the readiness of individuals for rehabilitation as well as twenty-one-day rehabilitation programmes for addicts. This organisation also provides post-rehabilitation support programmes to prevent further relapse. Individuals can be referred to the rehabilitation centre for three to six months depending on the individual's level of addiction.

While some respondents noted the importance of having a rehabilitation centre away from family and friends, this proposed centre could still be situated on the many vast farmlands around Kokstad. For instance, Oupa Segone, a former mayor of a small farming town in Delmas in the Mpumalanga province of South Africa has a rehabilitation centre on his farm and uses group therapy, farming and mediation to assist drug addicts (Maseko 2015). Examples like this would ensure that individuals could access local-based rehabilitation support.

In addition, another community centre could be developed in Kokstad town to provide support group programmes for families, sensitisation and awareness raising sessions for community members and post-rehabilitation support. Drug prevention classes are also needed for fatherless and motherless families, low-income and single-parent families. These sessions could be provided for addicts and their families in addition to the support provided by social workers in the Department of Social Development and Department of Health. This will ensure that support is provided on an ongoing basis, even after the residential treatments provided by rehabilitation centres have concluded. UNODC (2015) notes that the best and most effective treatment for drug addicts are those that are ongoing, integrated into the community, accessible to individuals and those that provide drug support under a continuing care model.

Skills Development and Job Creation Initiatives

A major cause of drug abuse and drug trafficking is unemployment, lack of skills and access to only low income jobs. In addressing these challenges, skills development and job creation is important in providing alternative sources of income and bringing development to communities. Thus prevention programmes work better when economic and social improvement is assured

(UNODCCP 2015). In deprived communities then, prevention programmes should be jointly implemented with community development work, which includes improving education, health and social services, housing, sanitation and income-generating activities (UNODCCP 2015). As a more precautionary and preventive response, the community, NGOs, and the municipal government must collaborate in developing initiatives that focus on developing and honing the skills of unemployed individuals in a wide range of necessary professions including baking, carpentry, plumbing, gardening and brick-making (KII 2016). A respondent noted that there are many buildings in Kokstad which could be used for building libraries and centres to develop computer skills (KII 2016). In Kokstad, social workers usually carry out assessments on at risk individuals and if there is no addiction, they hold counselling sessions with these individuals and refer them to the NGO Khulisa for skills training (the NGO has since closed down).

Beyond developing skills, it is important to create projects for unemployed individuals who have undergone and completed training. This will ensure that they can provide for their families and utilize their energies for more profitable and beneficial enterprises. Temporary job projects can also be provided for unemployed individuals under the government's Expanded Public Works Programme (EPWP). Appropriate programmes for skills development can be provided through partnerships and support from local businesses and identifying avenues for income-generation that address developmental needs in communities. Essentially, the sustainability and effectiveness of treatment and rehabilitation support for drug users will require 'sustainable livelihood interventions' to decrease the possibility of relapse and give individuals 'a perspective for a future self-sustaining and content life' (UNODCCP 2010:9).

Youth Development Centre

South Africa's National Youth Policy Framework (2002–07) notes that while multi-purpose youth centres are effective in bringing together youth-specific services in local communities, many local communities do not have adequate facilities in which these youth development programmes, services and activities can be located. There is some consensus among experts, practitioners and youth that designing prevention programmes for the youth involves creating accessible and low-cost opportunities where youth can interact and develop an appreciation for the arts, engage in sports and take part in other activities that develop self-confidence (UNODCCP 2010). Youth development centres focus on developing the passions, interests and skills of youth and children in areas such as sports and the arts.

These centres are extremely important in preventing boredom amongst the youth and preventing them from engaging in activities such as illicit drug use (KII 2016). These facilities are needed to allow the youth to express their passions in the arts through drama, dance and cultural festivals outside the school environment. These centres can also develop a wide range of sports activities and sports tournaments throughout the year. There is also a need for safe public playgrounds to keep children busy with active play. On that basis, the youth centre based in the Bongweni location and the Shayamoya public playground should be completed. A more centralized youth development centre will improve accessibility for those in other locations. Activities that are both educational and fun include life skills sessions, sports development, and basic computer skills training. A respondent noted that if these youth centres and youth programmes existed, the use of drugs will reduce significantly (KII 2016).

Prevention of Drug Induced Crime

The South African government adopted a four pillar approach which identifies areas for crime prevention, namely, criminal justice processes; community values and education, environmental design and transnational crime (IST 1996). Community values and education focuses on the inclusion of communities in crime prevention efforts (IST 1996), as proposed by this study. This calls for educating and informing citizens on how to actively participate in crime prevention. In the context of this article, community crime prevention will focus on programmes that engage community residents, involves them in community watches and policing and accords them the opportunity to act as watchdogs in the prevention of drug induced crime.

In order to address and prevent drug-induced crime in Kokstad, it is important to strengthen neighbourhood watches, extend the reach and develop the capacity of the Community Policing Forum (CPF) and create a drug squad for Kokstad Municipality (KII 2016). The magnitude of the problem requires a decentralized approach with easy information sharing channels between these three groups.

Neighbourhood Watches

Neighbourhood watches (also referred to as street patrols or night watch groups) are valuable in cutting drug use and supply through patrols, checking suspicious behaviour, and monitoring activities (particularly late in the night). Residents helped police end a family-run drugs gang by reporting their concerns in Birmingham, United Kingdom (Lillington 2015). Neighbourhood watch members reported suspicious activity to the police in Coventry, United

Kingdom leading to arrests of drug suppliers (Express and Star 2016). The case of Rooderport in South Africa provides a successful case of 'a sustainable patrolling system operating as an effective anti-crime organisation' (Meyer and Van Graan 2011: 134). In this case, significant changes⁶ in the neighbourhood watch system resulted in a shift from the involvement of only two to three streets to more than 150 streets and from a handful of patrollers to over a 150 (Meyer and Van Graan 2011: 134). The findings showed that 18 per cent of crimes were committed during patrols in comparison to 82 per cent when there were no patrols (Meyer and Van Graan 2011).

While neighbourhood watches were active in areas like Twist Valley, their sustainability has been brought into question. A respondent noted that these night watch groups have collapsed due to a lack of financial support and the lack of sufficient members to allow for seamless rotation, especially in the long winter months (KII 2016). In the Rooderport case, Meyer and Van Graan (2011) noted the unavailability of patrollers for scheduled shifts and the lack of interest and motivation as reasons for the termination of patrols in the past. In another community, it was noted that there were no actions to stop drug-related crime and there were no patrols, neighbourhood watches and the police station was quite a distance from the community (KII 2016). Neighbourhood watches are needed in each community, particularly in locations like Bongweni, Horseshoe, and Shayamoya. They will need to be more organized and it will require the active involvement of members of the community. It is important that there are sufficient members in neighbourhood watches to reduce the stress on the very few who have to work for long watch periods. Having high numbers of patrollers would make it more sustainable, particularly during the winter. Training for members of the neighbourhood watch is also needed.

However, Emmett (2003) notes existing evidence that shows that neighbourhood watches are unsuccessful in poor neighbourhoods due to high levels of crime, high risk factors for violence, distrust of neighbours and refusal to attend meetings. With these challenges, he notes that the focus should be on addressing inequalities in these neighbourhoods to better improve the success rates of neighbourhood watches in South Africa. A comparative study of crime prevention in two informal settlements (Slovo Park and Mandela Square) and an affluent formerly white neighbourhood (Meyerspark) highlighted stark differences between crime prevention efforts in low and middle income neighbourhoods (Emmett *et al.* 2000). The study concluded that high levels of violence and injury, low rates of per capita income, a lack of basic services, social isolation and the lack of social and material resources to take action against crime, all pointed to an attitude of

passivity, powerlessness and withdrawal in reaction to crime in the informal settlements (Emmett *et al.* 2000). Emmett (2003) therefore proffers a solution borrowing from Kawachi, Kennedy and Wilkinson (1999: 727):

If people shun their neighbours due to fear of crime, fewer opportunities exist for local networks and associations to take hold. The resulting disorganisation of community structure in turn fuels further crime, producing a vicious cycle of declining social capital, followed by rising crime, followed by further disinvestment in social capital.

As Goode (2011: 166) writes, 'powerlessness and community disorganization contribute to drug abuse and drug dealing in a community; which in turn, entrench these communities in even greater powerlessness and disorganisation'. Without addressing the inequalities and developmental gaps faced in low-income areas, community organization and involvement in crime prevention efforts will be impeded. Without community mobilization and involvement, threats to their safety and security will remain for the long term.

Community Policing Forum

Using the definition by Friedmann (cited in Eck and Rosenbaum 1994), community policing is:

a policy or strategy aimed at achieving more effective and efficient crime control, reducing the fear of crime, improving quality of life and improving police services and police legitimacy through a pro-active reliance on community resources that seeks to change crime causing conditions (Meyer and Van Graan 2011: 132).

In South Africa, the Community Policing Forum (CPF) was created as a legal partnership between communities and the South African Police Service (SAPS) in efforts to build a united front against crime. These forums can access communities, work closely with the police and contribute to citizen responsibility to decisions related to crime. In Kokstad, they meet monthly and work together on conducting awareness, physically identifying hotspots for crime and working with the police to monitor these areas (KII 2016). Community structures can also inform the CPF of security developments. The CPF is responsive in its approach as their members are tipped off and they have been armed and trained by the police. The CPF also holds 'crime *indabas*', where they discuss issues of crime prevention and victim empowerment. The CPF chairperson also has an office at the police station.

There were varying views on the CPF, with one respondent noting that the CPF is effective in some areas. Another respondent was not aware of whether they were still functioning and two other respondents noted that

they have never heard of the CPF (KII 2016). While the CPF's efforts are useful, it was noted by a respondent that it needed to further engage the community on the drug problem (KII 2016).

The CPF can play a pivotal role in the fight against drug-related crime because it bridges the gap between both the police and the community. In bridging this gap, it is important that they increase their engagement with the community; sensitise them of their roles and activities through town hall meetings and community forums. In addition, they must work closely with neighbourhood watches since the latter are decentralized. Meyer and Van Graan (2011) also recommend that neighbourhood watches should not be separate, but integrated as sub-structures of the CPF and empowered to take ownership of community security. Even though they are in a legal partnership with the police, the CPF must be seen as independent by the community and not as a branch of the police. In strengthening the CPF, it is important that they are provided with specialist training, uniforms, and sufficient funding to run their various programmes. A respondent noted the need to provide stipends and a vehicle to the CPF (KII 2016).

Drug Squad

The police were generally regarded as corrupt, inefficient, passive and poor in their response (KII 2016). Some police officers are known to protect drug smugglers and suppliers while others actually sell and use drugs. A respondent noted that individuals who are jailed for drug-related charges are usually released the following day because of corrupt police officials; and drugs taken in as evidence disappears (KII 2016). The poor police response has led to a reliance on private security agencies or self-protection methods to ensure individual and family security. A respondent noted that poor salaries were a reason for the inefficient and weak response by the police (KII 2016). The AU Plan of Action on Drug Crime 2013-2017 (AU 2012) also noted that weak and under-resourced criminal justice systems, intimidation by criminal groups and corrupt officials have limited efforts at combating the illicit drug trade.

A few respondents noted that Kokstad requires its own drug squad to help combat and prevent drug-related crime. This unit should act autonomously from the police to avert corruption. The drug squad would require individuals with specialist investigative skills, the ability to go undercover and conduct regular raids with the sole aim of crippling drug traffickers and drug suppliers. Regular patrols and bi-weekly raids of known drug spaces including taxi ranks, public parks in the town centre, and key shops will be integral in preventing the spread of illicit drugs in Kokstad.

All these initiatives will require information from neighbourhood watches and the CPF.

Drug raids have proved successful in the arrests of drug merchants and criminals in South Africa. The South African Police Service (SAPS) in collaboration with the Directorate for Priority Crime Investigation (Hawks), Department of Home Affairs, traffic police and the fire brigade were successful in targeting drug dens in hotspots like Eldorado Park in Gauteng, Gelvandale in the Eastern Cape and Pinetown in KwaZulu-Natal (SA News 2016). This led to the arrest of a major drug kingpin in Eldorado Park and the confiscation of a wide range of drugs worth 2.6 million Rand (SA News 2016). Two new elite crime fighting units, called the South African Narcotics Enforcement Bureau (SANEB) and the Illegal Firearms Control and Priority Violent Crime unit, have been created to target drug gangs and arms dealers in Buffalo City Metro and Mthatha (Majangaza 2016). These specialized anti-drug units will be incorporated into the Hawks and made up of experienced and capable police officers from criminal investigation divisions throughout the Eastern Cape province (*ibid.*).

A significant challenge in many countries including South Africa is how to provide sufficient treatment and care for prisoners as an alternative to imprisonment. This is because convictions and imprisonment fail to address drug use, drug addiction or drug related crime in the long term and in a sustainable manner (UNODCCP 2010). Furthermore, giving severe verdicts for drug use and drug related crime creates overpopulated prisons and contradicts human rights (UNODCCP 2010). Thus treating drug users as criminals is a failed approach while human rights and health-based approaches are more successful, as noted by the United Nations General Assembly Special Session on Drugs (Shelly 2016). Utilizing a public health rather than a criminal justice approach involves using treatment, rehabilitation, social reintegration and after-care; thus drug offenders are encouraged to enter treatment as an alternative to criminal justice sanctions (UNODCCP 2010). These alternative approaches have been successful and effective in encouraging recovery, limiting dependence on drugs and reducing drug related crime (UNODCCP 2010).

Conclusion

The presence of illicit drugs and drug trafficking requires a stronger response from state governments. At the community level, this requires strengthening drug prevention and support programmes and preventing drug-related crime. It also requires concerted efforts at limiting and preventing the activities of drug barons and drug traffickers in underdeveloped communities. Any

successful approach to addressing drug-related crime and drug addiction must be conducted through a human security lens. In doing so, attention must be paid to the structural and underlying factors that have resulted in drug addiction as an escape from a grave reality and the reliance on drug trafficking as an income generating scheme. The community-based mechanism presented in this article focuses on addressing structural inequalities in communities which includes ensuring their economic, social and security needs are met.

The fight against illicit drugs requires stronger cross-border and inter-provincial collaboration and information sharing. Border officials and police require stricter controls and should face prosecution if caught pushing and peddling drugs or supporting drug dealers. Stronger jail sentences, increased fines, and removal of bail for drug dealers are ways through which drug related crimes are prevented. In addressing the strong links between drug and alcohol abuse and violence, the cost and taxation on alcohol can be increased to prevent excessive consumption.

Beyond state governments, provincial authorities and cross-border mechanisms, much responsibility for crime and drug prevention lies with communities. Families, religious institutions, schools, and community-based organizations must work together in fighting the scourge of drugs. Without collaboration, cooperation and community organization, illicit drugs will threaten the stability and security of many.

Notes

1. See Goode (2011) for his examination of seven interlinked sociological theories.
2. The most common drugs found in Kokstad include heroine, dagga, marijuana (cannabis), *Whoonga* (*Nyaope*), mandrax, ecstasy and crack/cocaine (rocks). A respondent noted that medical drugs such as painkillers and cough medicine are also sold by hawkers who buy them in bulk from major cities like Durban (KII 2016).
3. According to Maseko (2015), *Whoonga* was only deemed illegal in March 2014 after its contents were identified by officials.
4. A few respondents noted that the combined use of drugs and alcohol in crime should not be downplayed. Using both drugs and alcohol together is a reason for the increase in crime and for domestic violence. For another respondent, using alcohol and smoking creates a need for something stronger.
5. Respondents noted that rehabilitation processes are very expensive and because most addicts are from a low income bracket, they are unable to afford these services (KII 2016). For instance, rehabilitation sessions could cost up to 35,000 Rand per month for a four-month programme. Another respondent noted that these costs could go up to 19,000 Rand for two months (KII 2016).

6. These changes included collecting equipment from local petrol garages rather than each other's residences, creating a large pool of patrollers and the involvement of residents from various professions and walks of life (Meyer and Van Graan 2011).

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