

**Patterns & Trends
of
Alcohol and Other Drug Use
in
Mauritius**

**(PTAODU)
REPORT 1**

January to June 2007



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Patterns and Trends of Alcohol and Other Drug Use in Mauritius
January - June 2007

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Abbreviations

ADSU	Anti Drug & Smuggling Unit
AIDS	Acquired Immune Deficiency Syndrome
AOD	Alcohol & Other Drugs
AYD	Ayurveda Centre for Treatment & Rehabilitation of Substance Abusers
BSMHCC	Brown Sequard Mental Health Care Centre
CASR	Centre for Applied Social Research
CATR	Centre d'Accueil de Terre Rouge
CDS	Centre de Solidarité Pour Une Nouvelle Vie
CHY	Chrysalide Centre
CPE	Certificate of Primary Education
CSO	Central Statistics Office
ETOILE	Etoile d'Esperance Women's Day Care Centre
GAP	Global Assessment Programme
GOOMANY	Dr. Idrice Goomany Centre
HELP	Help de Addiction Centre
HEP A	Hepatitis A
HEP B	Hepatitis B
HEP C	Hepatitis C
HIV	Human Immunodeficiency Virus
HSC	Higher School Certificate
IDU	Intravenous Drug Use / User (s)
Kg	Kilogram
LOTUS	Lotus Centre, Central Prison, Beau Bassin
MENDU	Mauritius Epidemiology Network on Drug Use
MPS	Mauritius Prisons Service
MRA	Mauritius Revenue Authority
NATReSA	National Agency for the Treatment and Rehabilitation of Substance Abusers
NGOs	Non-Governmental Organisations
ROD	St. Gabriel Treatment Centre for the Rehabilitation of Substance Abusers
SADC	Southern African Development Community
SC	School Certificate
SENDU	SADC Epidemiology Network on Drug Use
SSS	Sangram Sewa Sadan
UNODC	United Nations Office on Drugs and Crime
UNODCCP	United Nations Office on Drug Control and Crime Prevention

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Foreword

In the year 2001 NATReSA, in collaboration with Treatment & Rehabilitation Centres and other stakeholders involved in the area of supply and demand undertook a data collection, analysis and reporting of statistics exercise on the Substance Abuse problem in Mauritius.

Subsequently, bi-annual reports have been compiled titled MENDU 1 through MENDU X covering the period January 2002 to December 2006.

In July 2007 the data analysis and reporting exercise was reviewed and a new methodological approach was adopted so as to encompass a larger number of stakeholders involved in primary and secondary data and to provide information on what was now to be titled "Patterns and Trends of Alcohol & Other Drug Use in Mauritius". This present publication is the first under that title and serves as a Surveillance Document on Patterns and Trends of Alcohol & Other Drug Use in Mauritius. It will assist stakeholders involved in relevant activities to re-orientate strategies and to adjust the respective action programmes aimed at Substance Abuse Reduction and Prevention in Mauritius.

Data in this new presentation is only indicative and is not an exhaustive procedure such as would be achieved from an epidemiological type survey. There are restrictive factors such as prohibitive costs and time input. Therefore, it should not be considered as a reflection of the national picture of substance abuse over a six monthly period in Mauritius but rather as a very useful for understanding aspects of the Patterns and Trends of Alcohol & Other Drug Use in Mauritius during consecutively studied six month periods.

Utilising the results of these Patterns and Trends strategies will also give authorities insight as to what choices they should make regarding the type of prevention programmes that could be offered to those in the risky behaviour groups such as sex workers, prison inmates and Intravenous Drug Users. It will also be useful to those involved in monitoring and controlling illicit drug supplies.

Social workers and those working in social institutions will also benefit from the findings of this study and will be able to use the results to build better strategies and to implement more effective action in the fields of Harm Reduction and Risk Minimisation. The results also indicate where action is necessary in order to contain the number of cases of HIV/AIDS infection among risky behaviour groups.

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Summary

1. The previous bi-annual reports compiled under the banner of MENDU have been superseded by a new system of data collection and analysis titled Patterns and Trends of Alcohol & Other Drug Use in Mauritius.
2. As with the MENDU the principal factor for analysis in this report was the data collected by the administration of questionnaires at each of the Centres that take part in the exercise.
3. Some flaws in the completion of the questionnaires remain and need to be eliminated as it has an effect on the validity of the resulting data.
4. There was an increase in numbers of users of SSS, HELP, CDS, ETOILE, GOOMANY, and CATR, CHY Centres compared to the previous period of July to December 2006. LOTUS and AYD saw a decrease in reported attendance figures.
5. In the current period being reviewed the proportionality based on the religion of the individuals using the treatment centers differed from the general demographic of religion in Mauritius. This is an issue linked to the use of centres.
6. The residential areas of those using the services of the centres have remained proportionally constant between the two periods even though the numbers have increased.
7. Users of the treatment centres were more greatly concentrated among those with lower levels of education. Nevertheless, the greater percentage of the substance users presenting at the Centres had been educated up to at least Standard VI and / or Lower Secondary School Level.
8. Referral sources for the users of the treatment centres are predominantly either self-referral or through the family members of the person presenting for treatment while Social Workers and Medical Professionals account for a small number of referrals.
9. Over half of treatment centre users during this period were employed.
10. 31.6% of the users of the centres were Subutex abusers, followed by Heroin and Alcohol abusers.
11. As to methods of usage Heroin users and Subutex users predominantly inject their drugs, Cannabis users smoke theirs and alcohol abusers drink.
12. 29% of the treatment centre users had previously had treatment prior to the current episode down from 35.6 per cent in the previous period.
13. The majority of centre users had first used their primary substance before the age of 25 years.
14. 40.1% of injecting drug users admitted to having shared a needle in the month prior to admission to the relevant centre.
15. 68.9% of this group of injecting drug users had previously tested for HIV infection, 39.8 per cent for Hepatitis B and 71.2 per cent for Hepatitis C.
16. 22 % of this group of respondents said that they had never used a condom when having sex with their regular partner even though they had shared a needle in the month prior to seeking treatment.

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17. 7.6% had never used a condom with an occasional partner and 2.3% had never used a condom when having sex with a commercial sex worker.
18. 151 persons were arrested for the dealing of drugs.
19. The amounts of Cannabis seized during the arrests for dealing in Cannabis totaled just less than 2.5 Kilograms.
20. With Heroin the number of arrests was greater for the period January to June 2007, 63, than for the previous six month period, 26. The quantity of the drug seized was virtually the same at just over 4.5 Kilograms.
21. The highest number of arrests for possession was for Opioids in the period January to June 2007 followed by arrests for Heroin and for Cannabis. The amounts seized were previously very high for Subutex but for this period there were none. Although the number of arrests for possession of Cannabis was high the actual amount seized during arrest for possession was small. Similarly with Heroin where the amounts seized during arrests for possession are small.
22. 13 foreigners were arrested for offences related to dangerous drug use in the period under analysis.
23. Heroin seized in February of 2007 ranged in purity from 51% to 68% while that seized in May of the same year ranged in purity from 18% to 41%.
24. The data supplied by ADSU puts the price of cannabis for this period at Rs300 per gram, Heroin Rs10, 000 per gram and Subutex at Rs800 per full tablet.
25. In this period there were 10,214 recorded road traffic accidents, 2 Drivers/ Riders involved in Fatal Road Accidents had tested positive for alcohol and 11 Drivers / Riders had been killed whilst under the influence of alcohol. 111 out of 515 persons tested for alcohol following road accidents tested positive.
26. 36% of the 1,071 alcohol tests administered to drivers were positive and 64 per cent were negative.
27. 35% of alcohol tests related to accidents were positive and 65%, negative.
28. 249 driving licences were surrendered in the period due to alcohol.
29. 2,208 admissions were made to the Brown Squard Mental Health Care Centre of which only a very small proportion, just 0.9 per cent, were drug related in any way and 42.9 per cent of cases were in some way alcohol related.

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Introduction

This report is the first edition of the newly titled Patterns and Trends of Alcohol & Other Drug Use in Mauritius. This is the successor to what was previously referred to as the MENDU. As with the MENDU the principal factor for analysis in this report was the data collected by the administration of questionnaires at each of the Centres that take part in the exercise. These questionnaires are completed when a service user comes to a centre for the first time or on the first occasion since completing previous treatment. For the newly launched exercise the questionnaire used was redesigned so as to be easier to complete and more comprehensive in nature. This was the first time that the new questionnaire was used and, inevitably, there were some teething troubles but none that were detrimental to the completion of the exercise.

However, some flaws were identified in the completion of the questionnaires and this has led to regrettable gaps in the data collected. This is an issue that has been acknowledged and will be dealt with by training the staff that completes the questionnaires in the need to be accurate and comprehensive in their endeavours.

In some instances responses to questions had not been recorded. This has had repercussions on the analysis of the results as when a response section is blank it was not possible to ascertain if the respondent was asked the question and did not respond, if the respondent did answer but the answer was not recorded or if the person completing the questionnaire had not bothered to ask the question. In some instances the latter was suspected as the database showed patterns that indicated that certain persons avoided recording, or asking, certain questions. For example, in one centre there were no responses to the questions on condom usage; in another, the religion of the respondent was systematically not recorded. It was also noted that during one meeting held prior to the implementation of this study some members of staff of the centres indicated that they were uncomfortable asking respondents questions on sexual behaviour and condom use.

Unfortunately this has an effect on the validity of the resulting data. Nevertheless all of the usable data was entered and the results were used to compile the report.

Secondary data sources are indicated in the list of stakeholders at the end of the report.

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Review

		No.	%
Name of Centre	SSS	182	17.5%
	HELP	161	15.5%
	CDS	226	21.7%
	ETOILE	93	8.9%
	LOTUS	21	2.0%
	RODRIGUES	19	1.8%
	GOOMANY	82	7.9%
	CATR	209	20.1%
	CHY	20	1.9%
	AYD	27	2.6%
Total		1040	100.0%

These results are determined by the attendance rates of those who seek the services of the various centers. It is important to note that these are absolute figures and that they are not disaggregated by primary or repeat visits.

There was an increase in numbers of users of SSS, HELP, CDS, ETOILE, GOOMANY, and CATR, CHY Centres compared to the previous period of July to December 2006. LOTUS and AYD saw a decrease in reported attendance figures.

It is not possible to breakdown the attendance at the relevant centres by age group as the questionnaire used inadvertently lost the category for age during the printing process. This problem has been rectified for later exercises.

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In Mauritius, it has been well noted that Religion and Ethnic Group are so closely linked that one category can often be used as a proxy for the other. Table 2 shows that in the period being reviewed the proportionality based on the religion of the individuals using the treatment centers differed from the general demographic of religion in Mauritius. It appears that those of the Christian faith were more likely to use the services offered at the centres operated and supervised by NATRESA than those of any other faith. This does not necessarily mean that to those of the Christian faith are more likely to be substance abusers but it does give an indication of centre usage how the centres are presented and viewed by those using their services. This is worthy of further and deeper consideration.

Religion	July to December 2006		January to June 2007	
	No.	%	No.	%
No Response	62	8.7%	8	0.8%
Hindu	179	25%	271	26.1%
Christian	330	46.1%	474	45.6%
Muslim	136	19%	275	26.4%
Other	9	1.3%	8	0.8%
No Religion	-----	-----	2	0.2%
Preferred Not To Answer	-----	-----	2	0.2%
Total	716	100%	1040	100.0%

In Table 3 we see that the residential areas of those using the services of the centres have remained proportionally reasonably constant between the two periods even though the numbers have increased.

Residential District	July to December 2006		January to June 2007	
	No.	%	No.	%
No Response	8	1.1%	6	0.6%
Pamplemousses	61	8.5%	89	8.6%
Flacq	17	2.4%	23	2.2%
Riviere du Rempart	13	1.8%	26	2.5%
Grand Port	15	2.1%	33	3.2%
Savanne	12	1.7%	8	0.8%
Black River	38	5.3%	45	4.3%
Port Louis	247	34.5%	357	34.3%
Moka	16	2.2%	35	3.4%
Plaines Wilhems	260	36.3%	399	38.%
Rodrigues	29	4.1%	19	1.8%
Total	716	100.0%	1040	100.0%

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In Table 4 we see that users of the treatment centres were more greatly concentrated among those with lower levels of education. Subsequently, it appears that the proportion of users of treatment centres falls away beginning with those with a Higher School Certificate or other educational qualification. This is similar to the results of the previous period although the two sets of data are not presented in the table as the way in which the categories were arranged and the data collected is not compatible. Nevertheless, the greater percentage of the substance users presenting at the Centres had been educated up to at least Standard VI and / or Lower Secondary School Level.

As was stated in the previous report this does indicate that it could prove valuable to investigate the links between educational opportunity, performance, substance abuse and treatment options.

		No.	%
Highest Level of Education Achieved	No Response	40	3.8%
	No Formal Education	14	1.3%
	Incomplete Primary Education	112	10.8%
	Passed CPE / Standard VI	365	35.1%
	Lower Secondary Incomplete	253	24.3%
	SC / Equivalent	167	16.1%
	A Level / Equivalent	19	1.8%
	Degree / Equivalent	4	0.4%
	Post Graduate Degree / Equivalent / Higher	2	0.2%
	Vocational	64	6.2%
Total		1040	100.0%

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Referral sources for the users of the treatment centres are predominantly either self-referral or through the family members of the person presenting for treatment. For the period under review the Family was the most common source of referral taking over from Self in the previous period, while Self-referral was a close second for the current period. It is again surprising that Social Workers and Medical Professionals account for such a small number of referrals when one would have perhaps expected that they would be involved to a greater extent with substance abusers. It is suggested that consideration be given as to why it is that referral rates from Social Workers and Medical Professionals account for so few of the total number of referrals.

	July to December 2006		January to June 2007	
	No.	%	No.	%
No Response	21	2.9%	9	0.9%
Self	267	37.3%	358	34.4%
Family	212	29.6%	393	37.8%
Friend	90	12.6%	149	14.3%
Employer / Work	11	1.5%	7	0.7%
Private Health Professional	5	0.7%	3	0.3%
Religious Group	4	0.6%	7	0.7%
Hospital / Clinic	17	2.4%	18	1.7%
Social Services / Welfare	47	6.6%	72	6.9%
Courts / Correctional Services	33	4.6%	19	1.8%
Other	9	1.2%	5	0.5%
Total	716	100%	1040	100.0%

Over half of treatment centre users during this period were employed, with the percentage slightly higher than in the previous period.

	July to December 2006		January to June 2007	
	No.	%	No.	%
Employed (inc. Student)	378	52.8%	564	54.2%
Unemployed	264	36.9%	427	41.1%
No Response	74	10.3%	49	4.7%
Total	716	100.0%	1040	100%

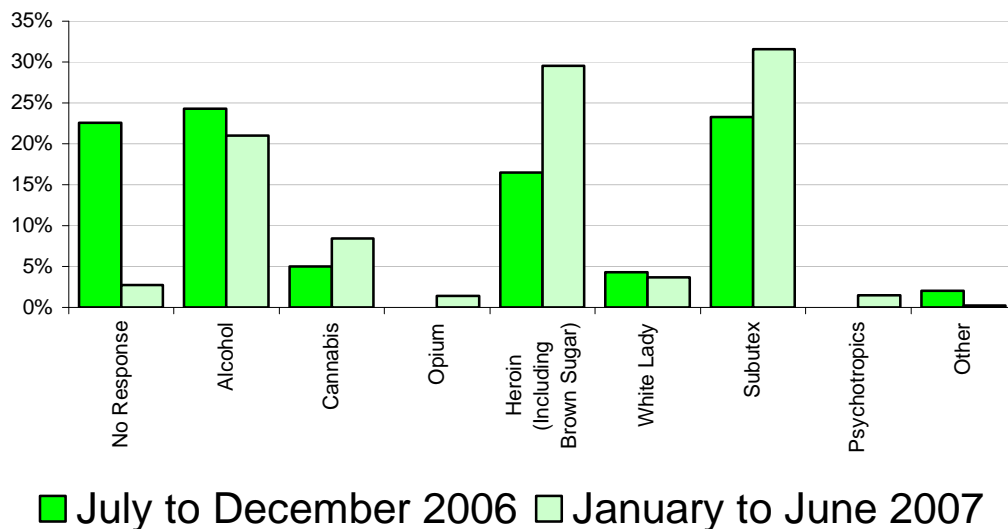
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The use of Subutex accounted for almost one third of users of the treatment centres, 31.6 per cent, followed by Heroin and Alcohol abusers. What is noticeable is the sudden leap in reported Heroin use (including Brown Sugar) when compared to the previous period, which is up from 16.5 per cent to 29.5 per cent. Why this is so is not easily explained. Alcohol abuse remains high with 21 per cent of centre users citing it as their primary substance of abuse. The rate of non-response has fallen dramatically for this reported period. (Table 7, Chart 1)

Table 7 Primary Substance Used				
Primary Substance Used	July to December 2006		January to June 2007	
	No.	%	No.	%
No Response	162	22.6%	28	2.7%
Alcohol	174	24.3%	218	21.0%
Cannabis	36	5.0%	87	8.4%
Opium	Not in previous report		15	1.4%
Heroin (Including Brown Sugar)	117	16.5%	307	29.5%
White Lady	31	4.3%	38	3.7%
Subutex	167	23.3%	329	31.6%
Psychotropics	Not in previous report		16	1.5%
Other	14	2.0%	2	0.2%
Tobacco	15	2.1%	No longer included	
Total	716	100%	1040	100.0%

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Chart 1
Primary Substance Abused
July to Dec. 2006 & Jan. to June 2007



Methods of usage appear to give no surprises with Heroin users and Subutex users predominantly injecting their drugs, Cannabis users smoking theirs and alcohol abusers drinking.

The number of treatment centre users who had previously had treatment prior to the current episode fell from 35.6 per cent, in the previous period, to 29 per cent for the period under review. However the rate recorded still indicated that around one third of the treatment centre users had previously had prior treatment. The highest proportion of repeat visitors to the centres was among the users of Heroin, 46 per cent and Subutex at 30.1 per cent.

	July to December 2006		January to June 2007	
	No.	%	No.	%
No Response	42	5.9%	115	11.1%
Yes	255	35.6%	302	29.0%
No	419	58.5%	623	59.9%
Total	716	100%	1040	100%

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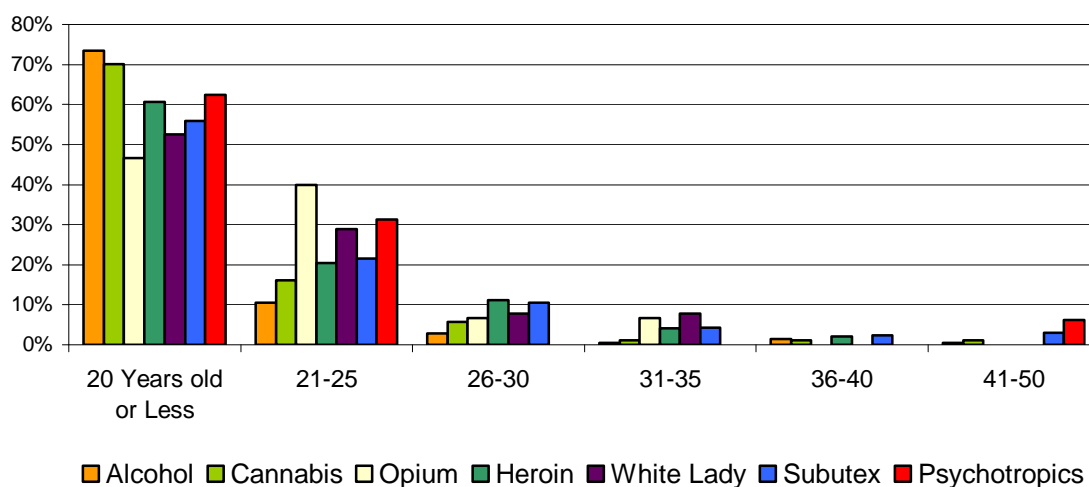
	Ever been in treatment prior to this episode						Total	
	No Response		Yes		No		No.	%
	No.	%	No.	%	No.	%		
No Response	13	11.3%	3	1.0%	12	1.9%	28	2.7%
Alcohol	44	38.3%	45	14.9%	126	20.7%	218	21.0%
Cannabis	6	5.2%	7	2.3%	74	11.9%	87	8.4%
Opium	2	1.7%	2	0.7%	11	1.8%	15	1.4%
Heroin	16	13.9%	139	46.0%	152	24.4%	307	29.5%
White Lady	4	3.5%	13	4.3%	21	3.4%	38	3.7%
Subutex	27	23.5%	91	30.1%	211	33.9%	329	31.6%
Psychotropics	3	2.6%	2	0.7%	11	1.8%	16	1.5%
Other	0	0.0%	0	0.0%	2	0.3%	2	0.2%
Total	115	100.0%	302	100.0%	623	100.0%	1040	100.0%

Most substance abusers appear to start young and it is unusual for people to take up a habit of substance abuse at a late age. The majority of centre users had first used their primary substance before the age of 25 years old.

	No.	%
No Response	48	4.6%
20 Years old or Less	642	61.7%
21-25	200	19.2%
26-30	86	8.3%
31-35	33	3.2%
36-40	18	1.7%
41-50	13	1.3%
Total	1040	100.0%

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Chart 2
Age at First Use by Primary Substance Used



We turn now to a very important aspect of intravenous drug use; whether or not respondents had shared a needle in the month prior to admission to a treatment centre. The results show that 30.5 per cent of all respondents, whether their primary substance was administered intravenously or not had shared a needle in the previous month. This result is very similar to that of the previous period and continues to indicate both the seriousness of this being a transmission route for viral infections such as Hepatitis, HIV and others and the fact that the information campaigns are not translating to action. Isolating just those respondents who used injection as a transmission route for their primary substance of abuse then we see that 40.1 per cent of them admitted to having shared a needle in the month prior to admission to the relevant centre. This is quite an alarming figure.

Needle exchanges could be a factor in reducing this rate of sharing of needles but the fact remains that a significant proportion of users of the treatment centres are sharing needles when using drugs. (Tables 11, 12)

	No.	%
No Response	146	14.0%
Yes	317	30.5%
No	577	55.5%
Total	1040	100.0%

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Table 12 Shared a Needle in Month Prior to Admission (Respondents Who Injected Primary Substance only)		
	No.	%
No Response	30	4.6%
Yes	264	40.1%
No	365	55.4%
Total	659	100.0%

Of all respondents 50 per cent had previously tested for HIV infection, 31.5 per cent for Hepatitis B and 47.2 per cent for Hepatitis C.

Of those respondents who stated that they injected their primary substance and had shared a needle in the month prior to admission 29.9 per cent had *not* tested for HIV and 22 per cent and 20.8 per cent had *not* tested for HepB and HepC respectively. (Tables 13, 14)

Table 13 Ever Tested for HIV, Hep B, Hep C			
		No.	%
Ever Knowingly Tested for HIV infection	No Response	66	6.3%
	Yes	520	50.0%
	No	454	43.7%
Group Total		1040	100.0%
Ever Knowingly Tested for Hepatitis B	No Response	278	26.7%
	Yes	328	31.5%
	No	434	41.7%
Group Total		1040	100.0%
Ever Knowingly Tested for Hepatitis C	No Response	143	13.8%
	Yes	491	47.2%
	No	406	39.0%
Group Total		1040	100.0%

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		No.	%
Ever Knowingly Tested for HIV infection	No Response	3	1.1%
	Yes	182	68.9%
	No	79	29.9%
Group Total		264	100.0%
Ever Knowingly Tested for Hepatitis B	No Response	101	38.3%
	Yes	105	39.8%
	No	58	22.0%
Group Total		264	100.0%
Ever Knowingly Tested for Hepatitis C	No Response	21	8.0%
	Yes	188	71.2%
	No	55	20.8%
Group Total		264	100.0%

Another cause for concern would be those intravenous drug users who had shared a needle in the previous month and when having had sex had not used a condom thereby opening up the infection chain. We see in Table 15 that 22 per cent of this group of respondents said that they had never used a condom when having sex with their regular partner, 7.6 per cent had never used a condom with an occasional partner and 2.3 per cent had never used a condom when having sex with a commercial sex worker. These figures are compounded when one adds the proportion of respondents who shared a needle but only *sometimes* used a condom when having sex. This gives some idea of the danger they represent to the spread of HIV infection among other members of the population who may not necessarily be injecting drug users themselves but who had unprotected sex with those who had shared a needle when taking drugs. (Table 15)

However, it has to be understood that there was a very high rate of non-response to this set of questions and it appears from the data collected that in some instances this set of questions was not put to the respondent at all affecting the accuracy of the data and the analysis.

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Table 15 Used Condom During Sex (Injecting Drug Users Who Had Shared Needle in Previous Month Only)			
		No.	%
Did You Use A Condom With Your Regular Partner	No Response	38	14.4%
	Always	33	12.5%
	Sometimes	31	11.7%
	Never	58	22.0%
	Not Applicable	104	39.4%
Group Total		264	100.0%
Did You Use A Condom With Occasional Partner	No Response	50	18.9%
	Always	11	4.2%
	Sometimes	43	16.3%
	Never	20	7.6%
	Not Applicable	140	53.0%
Group Total		264	100.0%
Did You Use A Condom With Sex Worker	No Response	72	27.3%
	Always	31	11.7%
	Sometimes	3	1.1%
	Never	6	2.3%
	Not Applicable	152	57.6%
Group Total		264	100.0%

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Arrests for Dealing of Drugs January to June 2007

In the period January to June 2007 there were 151 arrests for the dealing of drugs broken down by commodity as follows:

Table 16		
Arrests for Dealing of Drugs		
July to December 2006 & January to June 2007		
	July-December 2006	Jan-June 2007
Cannabis	121	117
Heroin	26	63
Ecstasy	1	1
White Lady	0	0
Subutex	0	0
Sedatives	0	0
Opioids	0	0
Cocaine	2	0
Psilocybin	1	0
Total	151	181

Source Data Returns Submitted by ADSU

Table 17				
Amounts of Drugs Seized (Dealing of Drugs)				
July to December 2006 & January to June 2007				
	Number / Weight of Seizures			
	July-Dec 2006		Jan-June 2007	
	Kg	Units	Kg	Units
Cannabis	3.4695		2.481	
Heroin	4.50802		4.529	
Ecstasy		103		54
White Lady	0		0	
Subutex		0		0
Sedatives		0	0	
Opioids	0		0	
Cocaine	0.10229		0	
Psilocybin	0.6188		0	

Source Data Returns Submitted by ADSU

As with the previous period the amounts associated with the arrests for dealing in Cannabis were quite small totaling just less than 2.5 Kilograms. No information is available on how the distribution of the seizures of Cannabis were related to the arrests but if there was a spread across all the arrests then simple mathematical division would suggest that the individual quantities were very small indeed.

With Heroin the number of arrests was greater for the period January to June 2007, 63, than for the previous six month period, 26. The quantity of the drug seized was virtually the same at just over 4.5 Kilograms. Although this is a significant amount of Heroin it is still not a great deal to sustain a dealership if the amount seized is spread among those arrested. As with Cannabis no details were provided on the distribution of drugs seized related to individual arrests, that is, the quantity of drugs seized during each arrest.

Patterns and Trends of Alcohol and Other Drug Use in Mauritius
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Arrests for Possession of Drugs January to June 2007

Arrests for possession of drugs show a different pattern to those of arrests for dealing in drugs. The highest number of arrests for possession was for Opioids in the period January to June 2007. Arrests for Heroin possession were also very high but in third place after arrests for Cannabis. The amounts seized were previously very high for Subutex but for this period there were none. Although the number of arrests for possession of Cannabis was high the actual amount seized during arrest for possession was miniscule; similarly with Heroin where the amounts seized during arrests for possession are very small. As with the previous report, details of distribution of amounts to arrests are not given if the amounts of cannabis in particular seized, just over 300 grams, are spread among all those arrested then the amounts seized per arrest are not that great.

Table 18						
Arrests for Possession of Drugs and Amounts of Drugs Seized						
July to December 2006 & January to June 2007						
Item	Arrests for Possession		Number / Weight of Seizures			
	July-Dec 2006	Jan-June 2007	July-Dec 2006		Jan-June 2007	
			Kg.	Units	Kg.	Units
Cannabis	248	300	0.339		0.238	
Heroin	100	198	0.020		0.063	
Ecstasy	0	0		0		0
White Lady	0	0	0			0
Subutex	517	0		8,315		0
Sedatives	33	46		1,468		791
Opioids	0	526	0			79,798
Cocaine	2	0	0			0
Psilocybin	1	0	0			0
Total	901	1,070				
Source Data Returns Submitted by ADSU						

Patterns and Trends of Alcohol and Other Drug Use in Mauritius
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Arrests of Foreigners for Dangerous Drugs January to June 2007

According to the statistics supplied a total of 13 foreigners were arrested for offences related to dangerous drug use in the period under analysis, the same number as for the previous period. The statistics are not specific as to the type of offence, whether drug use or drug dealing, and no indication of seizures made at the time and linked to each arrest is given nor, if any seizures were made, the amounts involved. However, the numbers of arrests are very small given that Mauritius has a combined resident and visitor population of close to 800,000 foreign persons per year.

Table 19				
Arrests of Foreigners for Dangerous Drugs January to June 2007				
Nationality	Month	Type of Offence	Male	Female
British	January	Cannabis		1
Danish	January	Sedative / Tranq	1	
Australian	February	Heroin	1	
French	February	Hashish	3	
Seychellois	February	Heroin	2	
French	February	Cannabis	1	
Malagasy	April	Cannabis		1
French	May	Heroin	1	
French	May	Buprenorphine	1	
German	June	Cannabis		1
Totals			10	3
			13	
Source Data Returns Submitted by ADSU				

Drug Purity (Heroin Seizures)

From January to June 2007 ADSU reported two major seizures of Heroin. The drug seized in February of 2007 ranged in purity from 51 per cent to 68 per cent while that seized in May of the same year ranged in purity from 18 per cent to 41 per cent.

Prices of Drugs

The data supplied by ADSU puts the price of cannabis for this period at Rs300 per gram, Heroin Rs10, 000 per gram and Subutex at Rs800 per full tablet. There is no indication of how these prices were determined.

Patterns and Trends of Alcohol and Other Drug Use in Mauritius
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Road Traffic Data

Between January and June 2007, according to figures supplied by the Police Dept., the number of recorded road accidents in Mauritius totaled 10,214. In the period January up to *May* 2007 2 Drivers/ Riders involved in Fatal Road Accidents had tested positive for alcohol while 11 Drivers / Riders had been killed whilst under the influence of alcohol. There were no accidents related to drug use. Of the 1,071 alcohol tests administered to drivers 36 per cent were positive and 64 per cent, were negative. 111 out of 515 persons tested for alcohol following road accidents tested positive. The total number of driving licences surrendered in the period due to alcohol problems was 249.

Violent Crimes Related to Alcohol

In the period January to June 2007 the Crime Record Office recorded 584 cases of violent crimes related to alcohol abuse.

Offence	Number of Cases
No. of Cases of Violence related to Alcohol Abuse	61
No. of Cases of Wounds & Blows related to Alcohol Abuse	327
No. of Cases of Wounds & Blows Causing Death related to Alcohol Abuse	2
No. of Cases of Assaults related to Alcohol Abuse	194
Total	584

Admissions to Brown Sequard Mental Health Care Centre

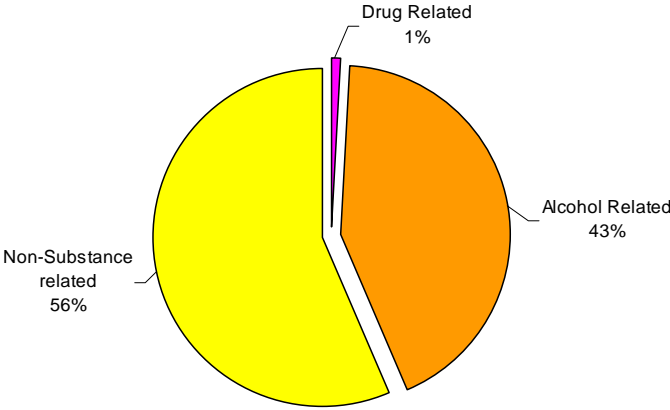
Between January and June 2007 a total of 2,208 admissions were made to the Brown Sequard Mental Health Care Centre of which only a very small proportion, just 0.9 per cent, were drug related in any way. However, the use of alcohol played a significant role in the admissions to the mental health care centre with 42.9 per cent of cases being in some way alcohol related. It has to be surmised that alcohol use and abuse is by far the greatest determinant in substance related admissions to the mental health care centre. The figures also indicate that where drug use is more evenly spread across the age groups alcohol abuse is more predominant as a factor to admission to the mental health care centre for those aged over 30 years old.

Diagnoses	10-14	15-19	20-24	25-29	30-34	35-39	40-44	> 45	Total
Alcohol related	0	3	21	34	92	127	196	438	911
Alcohol related + other	0	0	0	2	4	6	9	15	36
Drug related	0	0	2	3	2	3	3	0	13
Drug related + other	0	0	0	2	1	4	1	0	8
Non-substance related	29	67	78	131	143	156	175	461	1,240
Total	29	70	101	172	242	296	384	914	2,208

Source – Psychiatric Hospital Data

Patterns and Trends of Alcohol and Other Drug Use in Mauritius
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Chart 3
Admissions to Brown Sequard January to June 2007



Conclusion

The information contained within the official statistics and that gained from interviews with the users of Treatment Centres provides an insight into the world of substance abuse in Mauritius. The new method that has been adopted for collecting and analyzing this data gives a clearer picture of the situation.

As with previous periods reviewed under the MENDU system it is evident that the number of arrests for Cannabis use was high but that the actual amounts of the drug seized in relation to the arrests made were relatively small. It again seems that despite the clear and unambiguous warnings that are given about the inherent danger in sharing a needle many substance abusers are still sharing needles and many of these are also engaging in un-protected sexual activity.

Alcohol abuse is the main substance driving admission to the mental health institution and also puts an enormous strain on local families, their social networks and the social and medical services of the country.

Recommendations

1. Continue with the new system of data collection and analysis while making any improvements that will enable the data to be more readily used by those involved in the various aspects of prevention and caring with regard to substance abuse.
2. Provide training to the staff involved in the collection of data at the various treatment centres on the need to efficiently and fully complete every questionnaire. Following this training exercise checks should be made to ensure that all treatment centres are completing the questionnaires in way prescribed.
3. To shorten the period of time between the collection of the data and the publication of the results of the analysis. The system should be operated in such a way that it flows seamlessly from the end of the period of data collection, through data entry to data analysis and report presentation in the shortest possible period of time.
4. Alcohol abuse and drug use patterns should be analysed in a non-judgmental and non-biased fashion to present a true indicator of the current situation. Efforts should be made to make the professionals and the public aware of the real situation regarding substance abuse in Mauritius.

Patterns and Trends of Alcohol and Other Drug Use in Mauritius
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Appendix I

Table 22								
Statistics on Local Production / Imports of Excisable Goods January 2007 to June 2007								
Month	Cigarette Sticks / 1,000 Units		Beer (Litres)		Country Liquor (Litres)		Other Alcoholic Products (Litres)	
	Local	Import	Local	Import	Local	Import	Local	Import
January	83,289,200	19,918	2,815,000	6,608	410,390	-	1,161,584	235,763
February	52,459,000	15,520	2,518,000	5,666	318,434	-	581,020	135,993
March	57,769,600	29,222	2,228,000	7,039	326,457	-	701,454	239,584
April	59,172,000	27,683	3,171,679	6,978	478,086	-	999,373	200,730
May	65,306,000	27,688	2,548,894	15,857	355,480	-	180,106	178,016
June	308,867,340	35,290	5,081,692	20,694	901,287	-	2,423,547	233,702

Source: Customs Department, Mauritius Revenue Authority

Patterns and Trends of Alcohol and Other Drug Use in Mauritius
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Appendix II

Table 23 Domestic Violence Cases Involving Alcohol and / or Other Substance Abuse January to May 2007			
	Male	Female	Both Sexes
Total Number of Domestic Violence Cases	43	445	488
Physical Assault	13	174	187
Number of Cases Reported Where Nature of Problem is Alcoholism	28	138	166
Number of Cases Reported Where Nature of Problem is Substance Abuse	-	-	-
Battered Children			
Physical Abuse of Children by Parents	30	39	69
Physical Abuse of Children by Teacher	2	1	3
Physical Abuse of Children by Others	11	6	17
Total	43	46	89
Source: Ministry of Women's Rights, Child Development, Family Welfare and Consumer Protection			

Patterns and Trends of Alcohol and Other Drug Use in Mauritius
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Appendix III
HIV/AIDS Statistics
Information on Needle Exchange Programme

Table 24					
HIV Tests in Prisons and Results January – June 2007					
HIV Tests Carried Out		Positive Cases		IDU Positive Cases	
Males	Females	Males	Females	Males	Females
1,586	108	169	5	73	5

Mauritius Prisons Service

Table 25								
HIV/AIDS Cases Related to IDU January – June 2007								
Month	IDU	Prisons	ANC	B Donor	NDCCI	AIDS Unit	In-patient	Others
January	36	21	-	-	8	2	4	1
February	44	19	-	-	4	10	11	-
March	33	22	-	-	4	1	6	-
April	43	21	-	1	5	10	5	1
May	46	19	-	-	10	6	9	2
June	43	30	1	-	4	4	4	-

AIDS Unit Ministry of Health & Quality of Life

Table 26			
Needle Exchange Programme			
Organisation	Site	Date Started	No. of Clients
Collectif Urgence	Batterie Cassee	November 2006	50-80
Tox SIDA (CUT)	Baie du Tombeau	November 2006	40 Approx.

Source AIDS Unit Ministry of Health and Quality of Life

Patterns and Trends of Alcohol and Other Drug Use in Mauritius
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Appendix IV Details from Annual Report on Treatment and Rehabilitation Centres

Centre	Jan		Feb		March		April		May		June		Total New	Total Follow Up
	New	Follow Up	New	Follow Up	New	Follow Up	New	Follow Up	New	Follow Up	New	Follow Up		
SSS	43	45	19	71	22	80	38	45	40	102	21	111	183	454
CATR	42	80	50	80	52	110	50	12	110	75	175	75	479	432
HELP	17	76	17	28	35	44	42	50	46	37	21	37	178	272
Dr. I. Goomany	26	70	15	70	8	70	8	70	12	70	11	70	60	420
CDs	37	37	22	88	32	81	44	81	49	60	45	97	229	444
Etoile	15	15	15	26	16	27	19	27	12	30	19	33	95	158
Lotus	4	4	1	8	1	8	8	5	2	9	2	11	18	45
Le Roseau	0	0	NA	0	NA	NA	NA	NA	NA	NA	NA	NA	0	0
Ayurveda	6	6	7	20	5	17	6	13	10	15	5	12	39	63
Chrysalide	4	4	7	12	6	7	4	10	7	8	6	31	34	54
St. Gabriel	4	43	3	36	4	33	2	41	3	26	0	37	16	216
Alcoologie	4	23	3	16	3	16	4	18	5	24	3	29	22	126
													1,374	2,704
Total													4,078	

Centre	Jan	Feb	March	April	May	June	Total
SSS	73	79	93	115	99	130	589
CATR	Nil	Nil	Nil	Nil	Nil	Nil	0
HELP	52	44	44	46	52	52	290
Dr. I. Goomany	50	50	50	32	11	33	226
CDs	31	25	20	27	32	22	157
Etoile	Nil	Nil	Nil	Nil	Nil	Nil	0
Lotus	Nil	Nil	Nil	Nil	Nil	Nil	0
Le Roseau	Nil	Nil	Nil	Nil	Nil	Nil	0
Ayurveda	Nil	Nil	Nil	Nil	Nil	Nil	0
Chrysalide	Nil	9	10	4	8	12	43
St. Gabriel	Nil	Nil	Nil	Nil	Nil	Nil	0
Alcoologie	Nil	Nil	Nil	Nil	Nil	Nil	0
Total							1,035

	Jan	Feb	March	April	May	June	Total
National Detox							
Admissions	30	30	30	30	30	30	180
Dropouts	0	0	0	0	0	0	0
DAMA	0	0	0	0	0	0	0
No. Treated	30	30	30	30	30	30	180
BSH Ward 13							
Admissions	27	18	19	18	19	19	120
Dropouts	3	2	1	2	1	1	10
DAMA	7	2	2	5	10	0	25
No. Treated	20	16	17	13	9	19	104
Dropouts: not reported for admissions – DAMA: Discharge against medical advice							

Appendix V a - c
Acknowledgements

Va - List of Stakeholders

Primary Data from Treatment and Rehabilitation Centres

1. Centre d'Accueil de Terre Rouge
2. Centre de Solidarité Pour Une Nouvelle Vie
3. HELP De Addiction Centre
4. Dr. Idrice Goomany Treatment Centre
5. Etoile D'Esperance
6. Ayurveda Centre for Treatment & Rehabilitation of Substance Abusers
7. Sangram Sewa Sadan
8. Centre d'Accueil et de Rehabilitation de St. Gabriel, Rodrigues
9. Chrysalide Centre
10. Lotus Centre
11. Centre Alcoologie, Mont Lubin, Rodrigues

Secondary Data From:

1. Forensic Science Laboratory
2. Commissioner of Police
 - a. Crime Record Office
 - b. Road Traffic Accidents / Alcotest
 - c. Fatal Road Accidents
 - d. Number of Driving Licenses which have been surrendered due to alcohol problems
3. The Mauritius Revenue Authority (Customs)
4. Ministry of Health and Quality of Life
 - a. Brown Sequard Mental Health Care Centre
 - b. The Chief Medical Officer, Ministry of Health & Quality of Life
 - c. The Regional Health Director, Dr. Jeetoo Hospital, Port Louis
5. Mauritius Prisons Service
6. Ministry of Women's Rights, Child Development, Family Welfare & Consumer Protection
7. AIDS Secretariat, Ministry of Health & Quality of Life
8. Anti Drug & Smuggling Unit (ADSU)

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Appendix Vb

Patterns and Trends of Alcohol and Other Drug Use in Mauritius (PTAODU)

Steering Committee Members

1	Mr. G. Lesage, M.S.K	Chairperson NATReSA
2	Mr. A.K. Ghallu	Executive Director NATReSA
2	Mr. Fock Seng Ho Tu Nam	Director, Centre de Solidarite Pur Une Nouvelle Vie, Impasse Larcher, Rose Hill
3	Mrs D. Rajkumarsing	Officer in Charge, HELP De Addiction Centre, Hindu House, Cassis
4	Mr. S. P. Torul	Officer in Charge, Sangram Sewa Sadan, 1 Balgobeen Lane, St. Paul
5	Mr. I. Dhannoo	President, Dr. I. Goomany Treatment Centre, Sir Edgar Laurent Street, Plaine Verte
6	Mr. G. Leste	Director, Etoile d'Esperance, Villa Road, Moka
7	Mr. J. Ah Choon	Director, Centre d'Accueil de Terre Rouge, Village Council Road, Terre Rouge
8	Ms. Marlene Ladine	Director, Chrysalide, Royal Road, Bambous
9	Mr. Bhoojawon	Ayurveda Centre, Human Service Trust, Calebases
10	The Commissioner of Prisons	Attn. Officer in Charge, Lotus Centre, Prisons Department, Beau Bassin
11	Dr. Nagga (Mrs.)	Brown Sequard Hospital, Beau Bassin
12	Mr. R. Soorojebally, ACP	ADSU, Police Department, Line Barracks, Port Louis
13	Dr. S. Saumtally	Ag. National AIDS Coordinator, AIDS Secretariat, Ministry of Health and Quality of Life, Atchia Building, Port Louis
14	Mrs. G.M. Madhub-Dassyne	Ag. Director, Forensic Science Laboratory, 2 nd . Floor, National Laboratory Complex, Reduit
15	Nazir Soobratty	Assistant Secretary, Ministry of Social Security, National Solidarity & SCW & RI
16	Mr. Nigel Richards	Officer in Charge, Centre for Applied Social Research, Reduit
17	Mrs. S. Mussafeer	Technical Assistance, ASAPO, NATReSA
18	Permanent Secretary	Ministry of Women's Rights, Child Development, Family Welfare and Consumer Protection
19	The Comptroller of Customs	Customs Office, IKS Building, Port Louis
20	Police Constable Gokhool	Road Traffic, Accident/AlcoTest

Appendix Vc

PTAODU Report

Editorial Committee Members

1	Mr. G. Lesage, M.S.K	Chairperson NATReSA
2	Mr. A.K.Ghallu	Executive Director NATReSA
3	Mr. A. Lazer	Appointed by Minister
4	Mr. J. Ah Choon	Appointed by Minister
5	Mr. F. Elyhee	Representative of Dr. Idrice Goomany Treatment Centre
6	Mr. H. Deepchand	Representative of HELP De Addiction Centre
7	Mrs. O. Boodhoo	Representative of Sangram Sewa Sadan
8	Mr. N. Richards	Officer in Charge Centre for Applied Social Research
9	Mrs. S. Mussafeer	Technical Assistance, ASAPO, NATReSA

Patterns and Trends of Alcohol and Other Drug Use in Mauritius
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Appendix VI

**Patterns and Trends of Alcohol and Other Drug Use
in Mauritius
Questionnaire**

Number				
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Complete the Identification Boxes

Ident. Number

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Date Completed

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Interviewers Initials

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Circle the Relevant Number

Question 1 Name of Centre		Question 2 Referral Source	
SSS	1	Self	1
HELP	2	Family	2
CDS	3	Friend	3
ETOILE	4	Employer / Work	4
LOTUS	5	Private Health Professional	5
RODRIGUES	6	Religious Group	6
GOOMANY	7	Hospital / Clinic	7
CATR	8	Social Services / Welfare	8
NDC	9	Courts / Correctional Services	9
CHY	10	School	10
AYD	11	Other	11
OTHER	12	Specify if Other	
Specify if Other			

Question 3 Sex		Question 4 Religion	
Male	1	Hindu	1
Female	2	Christian	2
Q3a Age		Muslim	3
		Other	4
		Specify if Other	
		No Religion	5
		Prefer not to answer	6

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Question 5 Residential District	
Pamplemousses	1
Flacq	2
Riviere du Rempart	3
Grand Port	4
Savanne	5
Black River	6
Port Louis	7
Moka	8
Plaine Wilhems	9
Rodrigues	10

Question 6 Residential Area (<i>write clearly and exactly what respondent says</i>)
(Town or Village)

Question 7 Highest Level of Education Achieved	
No Formal Education	1
Incomplete Primary Education	2
Passed CPE / Std. VI	3
Lower Secondary Incomplete	4
SC / Equivalent	5
A Level / Equivalent	6
Degree / Equivalent	7
Post Graduate Degree / Equivalent / Higher	8
Vocational	9
Other	10
Specify if Other	

Question 8 Occupation	
a) <i>write exact job title here:</i>	
<i>Select appropriate category</i>	
b) Legislator, senior officials and managers	1
Professionals	2
Technicians & associate professionals	3
Clerks	4
Service workers & shop, market sales workers	5
Skilled Agricultural & fishery workers	6
Craft & related trade workers	7
Plant & machine operators & assemblers	8
Elementary Occupations	9
Student	10
Casual Worker	11
No occupation	12

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Question 9 Type of Employment or studies		Question 10 Marital Status	
Full-Time	1	Single	1
Part Time	2	Married	2
Casual	3	In a Union	3
Apprenticeship	4	Divorced or Separated	4
Family business	5	Widowed	5
Self-Employed	6		

Question 11 Type of Treatment Receiving		Question 12 Service Receiving	
In-Patient	1	Counselling	1
Out-Patient	2	Medical Detoxification	2
		AA/NA	3
		Traditional Medicine	4

Question 13 - 1st Most Frequently Used Substance										
<i>Write exactly and clearly here:</i>										
Method	a) Swallow 1	b) Smoke 2	c) Inhale 3	d) Inject 4						
Write exactly and clearly:	e) Other									
Substance Key <i>see below</i>	1	2	3	4	5	6	7	8	9	10

Alcohol=1, Cannabis = 2, Opium = 3, Heroin = 4, White Lady = 5, Subutex = 6, Cocaine = 7, Solvents = 8, Psychotropics = 9, Amphetamines = 10

Question 14 - 2nd Most Frequently Used Substance										
<i>Write exactly and clearly here:</i>										
Method	a) Swallow 1	b) Smoke 2	c) Inhale 3	d) Inject 4						
Write exactly and clearly:	e) Other									
Substance Key <i>see above</i>	1	2	3	4	5	6	7	8	9	10

Question 15 - 3rd Most Frequently Used Substance										
<i>Write exactly and clearly here:</i>										
Method	a) Swallow 1	b) Smoke 2	c) Inhale 3	d) Inject 4						
Write exactly and clearly:	e) Other									
Substance Key <i>see above</i>	1	2	3	4	5	6	7	8	9	10

Patterns and Trends of Alcohol and Other Drug Use in Mauritius
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Question 16 Age at 1st use of primary substance		
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Question 17 Ever been in treatment prior to this	Yes	No
	1	2

Question 18 Ever shared a needle in the previous month	Yes	No
	1	2

Question 19 Ever knowingly tested for HIV infection	Yes	No
	1	2

If yes go to Q20 if No go to Q21

Question 20 If Yes – what was the result	Positive	Negative	Don't Know	Don't Wish to Say
	1	2	3	4

Question 21 Ever knowingly tested for Hepatitis B	Yes	No
	1	2

If yes go to Q22 if No go to Q23

Question 22 If Yes – what was the result	Positive	Negative	Don't Know	Don't Wish to Say
	1	2	3	4

Question 23 Ever knowingly tested for Hepatitis C	Yes	No
	1	2

If yes go to Q24 if No go to Q25

Question 24 If Yes – what was the result	Positive	Negative	Don't Know	Don't Wish to Say
	1	2	3	4

Question 25a In the last 12 Months have you had sex with a regular partner	Yes	No	
	1	2	
Question 25b If Yes, did you or your partner use a condom	Always	Sometimes	Never
	1	2	3
Question 25c If had sex but did not use a condom, why not?			

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Question 26a In the last 12 Months have you had sex with a Occasional partner	Yes	No	
	1	2	
	Always	Sometimes	Never
Question 26b If Yes , did you or your partner use a condom	1	2	3
Question 26c If had sex but did not use a condom, why not?			

Question 27a In the last 12 Months have you had sex with a Sex worker	Yes	No	
	1	2	
	Always	Sometimes	Never
Question 27b If Yes , did you or your partner use a condom	1	2	3
Question 27c If had sex but did not use a condom, why not?			