

**2022**

**NATIONAL REPORT ON**

**THE DRUG  
SITUATION AND  
RESPONSES IN  
MALTA**



**GOVERNMENT OF MALTA  
MINISTRY FOR SOCIAL POLICY  
AND CHILDREN'S RIGHTS**



**2022**

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**THE DRUG**

**SITUATION AND**

**RESPONSES IN**

**MALTA**

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National Focal Point for Drugs and Drug Addiction

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## Minister's Foreword

Minister for Social Policy and Children's Rights

This year's annual report on the situation as to drug use and the measures in place to reduce use and aid in the recovery from drug dependence, must be viewed in the context of the exit and thus relaxing of regulations, related to the Covid pandemic. In effect, the year 2021 has been marked by the return of the functioning of most institutions as we knew them prior to Covid, with the addition of some useful practices that were kept on.

Again, the findings herein are mainly based on the measures in place to reduce access and availability, as well as the services on offer, to enable recovery from a drug use disorder. Simply put, these can be grouped under the general terms of supply and demand.

Under the category of supply, which necessarily involves law enforcement, the numbers of arraignments for trafficking and possession have taken a different road. Arraignments for trafficking have continued to be at the same level over the past five years, but those for possession, have continually gone down. With regard to the former, this is a result of the fact that seizures may be broken down into those related to the local market and those destined for Europe. Our Freeport has become a transit zone for large shipments, such as those of cocaine from South America. As to the latter, the fact that arraignments for possession have declined, this in itself is good news in that users are not necessarily being treated as criminals and this as emphasized by the Treatment not Imprisonment Act of 2015. Moreover, those individuals arraigned for possession, are now required to face the Justice Commissioner who presides over a tribunal which may in turn likely result in a fine and not a prison sentence. The cases appearing before the tribunal have also decreased over the past years, mainly due to Covid, but also due to the fact that the Police have set up Community Policing teams which have direct contact with drug agency Sedqa's community services and this too may have left a positive impact.

As to the demand indicators, which in the main relate to those coming forward for treatment, once again new-comers are up, as, they also were the previous year, and again this may also be a positive sign, in that people are coming forward to enable their drug use problem to be addressed. These new comers mainly consist of those that have a problem with their cocaine use, followed by cannabis use problems and then lastly, those related to heroin. The problem use of cocaine, cannabis and heroin, is further reflected in the number of hospital emergencies and here again there were highest for cocaine. This may potentially be related to the increase in purity levels. As for cannabis this issue is also one of content in that purity levels of some 25% of THC, have been found. The synthetic cannabinoids are also a cause of concern, as they also feature at the top of the list with regard to hospital emergencies. Fortunately, as for the newcomers entering treatment for their heroin use, hospital emergencies for such are, the lowest when compared to cocaine and cannabis. Thus, long-standing problems related to heroin use, are on the wane. This factor, along with the pilot project aimed to introduce buprenorphine, to be offered by our health services, should also have a further positive impact on the recovery of long-term problem heroin users.

Complementing this, the opening and the start of operations of the Center at Tal-Ibwar, which provides for both residential and day care services for adolescents with drug use problems, is a main undertaking, that should in turn impact positively both adolescents and their families.

It is our duty to assist those that come forward for our help, to provide them with a second and a third chance, in order for them to overcome their drug-use problem. We must always be there to help and not to judge. We must be there to reach out and not shy away.

With this in mind, this Ministry will continue to provide services of quality, to those least fortunate to be able to do so.



# 1. Drug Strategy and Coordination

## 1.0 BACKGROUND

The main body responsible for drug policy matters in Malta is the National Addictions Advisory Board. The Advisory Board is an integral structure within the Ministry for Social Policy and Children’s Rights. The Advisory Board comprises ten independent experts appointed by the Minister, from fields such as law, youth studies, education, clinical psychology, psychiatry, epidemiology and neuroscience.

The National Coordinating Unit for Drugs and Alcohol, (MSPC), is responsible for the implementation of the National Drugs Policy, while the main remit of the National Focal Point for Drugs and Drug Addiction is that of monitoring the situation and the responses, including the effectiveness of the actions put in place as a result of the National Drugs Policy. It is also required to report to the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) on a yearly basis on the drug situation and drug responses put in place by Malta.

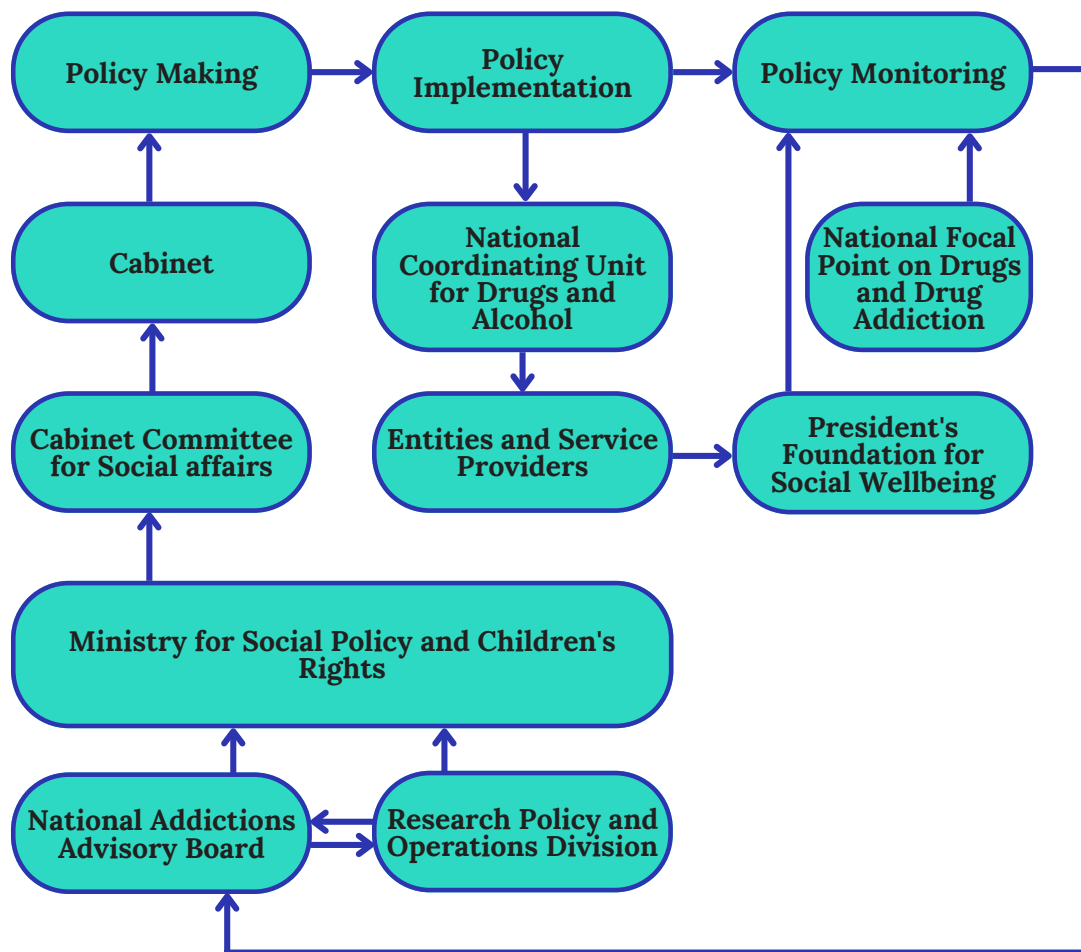


Table 1.0: Policy process



## 2. Drug Laws and Drug Offences

### 2.0 LEGAL CONTEXT

The principal legislative frameworks dealing with substance use in Malta are the Medical and Kindred Professions Ordinance 1901 (Cap. 31) and updates, which relate to psychotropic drugs, and the Dangerous Drugs Ordinance 1939 (Cap. 101) and updates such as that in 2005 relating to the prescription of methadone and the latest act, the Drug Dependence (Treatment not Imprisonment) Act 2014 (Cap 537), which relate to narcotic drugs. Drug law offence (DLO) data are the basis for monitoring drug-related crime and are also a measure of law enforcement activity and drug market dynamics. Such data inform policy makers on the implementation of drug laws and contribute towards improving strategies.

The Drug Dependence (Treatment not Imprisonment Act) 2014 (Chapter 537 of the laws of Malta) was brought into force in April of 2015. Through this Act, drug possession for personal use in stipulated amounts is not a criminal offence and those found in possession of such amounts appear before the Commissioner for Justice outside of the law courts. Specifically, the law stipulates that, possession for personal use of up to 2g or up to two pills of any drug other than cannabis, irrespective of purity, is an offence punishable by a fine. If found guilty, there will be an administrative penalty served according to the type of drug. In the case of a second offence for possession for personal use of a drug other than cannabis within the period of two years, the person is required to appear before the Drug Offenders Rehabilitation Board where an assessment of the situation is conducted for the purpose of assisting that person with his drug dependence if it can be established that the person is dependent on drugs. In case of a breach of any of the recommendations by the Commission of Justice or the Drug Offenders Rehabilitation Board, the person will be summoned in front of a Drug Court, in accordance with the Act. This act is also dependent on other pieces of legislation. Possession of more than the stipulated amounts remains a criminal offence and the case is tried before the Maltese Law Courts.

In March of 2021, a white paper on the responsible use of cannabis was presented. Following a wide consultation on the white paper, in December 2021 a new law was passed for the setting up of the Authority on the Responsible use of Cannabis (Chapter 628 of the Laws of Malta). The Authority is responsible to monitor and regulate cannabis associations under the provisions of the new law. Furthermore, the Authority is also responsible for producing research related to the monitoring of the law regulations and to produce adequate reporting on the progress and outcomes of the new law.

Additionally, Chapter 537 Drug Dependence- Treatment Not Imprisonment Act, was also amended to regulate use and distribution of cannabis in Malta. The new law states that authorized cannabis associations will now be able to have up to 500 registered members and supply cannabis in a non-for-profit framework. Each member can be supplied with up to 7g daily, capped at 50g per month from the organization. Only residents of Malta are allowed to register with the cannabis organizations. Additionally, individuals can carry up to 7g of cannabis on their person in public without the fear of sanctioning. However, the use of cannabis in public is still not permissible. The amount can be extended to 28g if deemed for personal use, but in such circumstances the case would be referred to the Commissioner for Justice in accordance with Chapter 537. The law also states that individuals can grow up to 4 plants of cannabis in their home and have up to 50g of dried produce in their residence at any given point. Such plants cannot be visible to third persons. Minors will not be allowed to register as members of associations or grow/use cannabis. Individuals using cannabis can only do so in the privacy of their home and out of reach of minors in the household and in a space not visible to the public.

## 2.1 POLICE DATA ON ARRAIGNMENTS AND SEIZURES

The Malta Police Force provides statistical data on National Enforcement Operations related to drug law offences. In this section, data related to the total amounts of arraignments and drug seizures in Malta during 2021 are presented.

## 2.2 ARRAIGNMENTS

In 2021, there were a total of 256 arraignments in court for drug related offences. The figure below shows that since 2019, there has been a notable decrease in the amounts of arraignments reported. Indeed, figures reported for 2021 show a decrease of 2.3% from 2020. The drop in cases were even more significant with a decrease of 41% when compared to 2019 (434 arraignments) and a 58% decrease when compared to 2018 (613 arraignments).

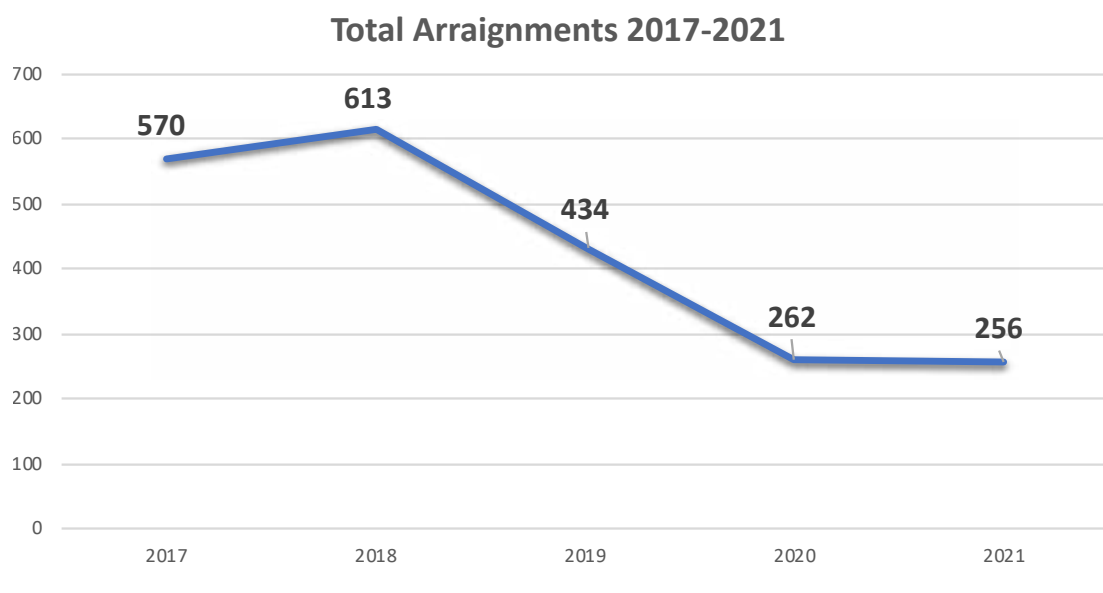


Figure 2.0: Total number of arraignments 2017 - 2021

## 2.3 ARRAIGNMENTS BY TYPE OF OFFENCE

When stratifying the number of arraignments by type of offence, in 2021 the majority of cases (142) were for possession offences, while the remaining cases (114) were trafficking offences. One can also note that over the past 5 years, there has been a sharp decrease in the number of arraignments for possession offences but those for trafficking have remained the same. The decrease in arraignments for possession may be partially attributed to the COVID-19 situation during the intervening years as well that due to the implementation of the Treatment not Imprisonment Act of 2015.

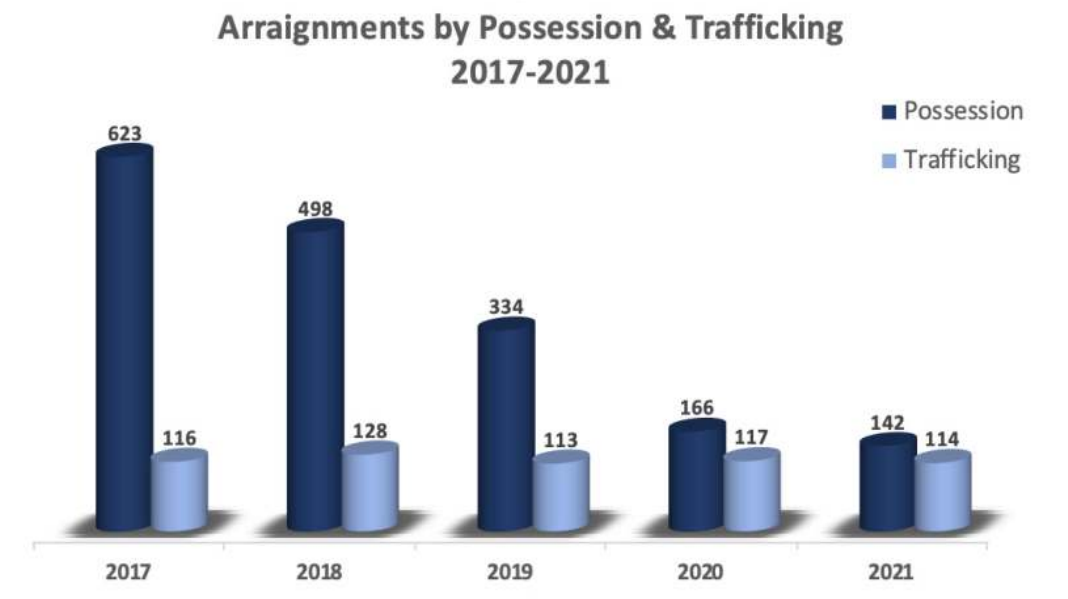


Figure 2.1: Total number of arraignment by possession and trafficking 2017 - 2021

## 2.4 ARRAIGNMENTS BY TYPE OF DRUG

The figure below depicts arraignment over the last five years by drug type. Cannabis accounted for the majority of drug-related arraignment in 2021, accounting for 153 arraignment, a slight increase from 141 arraignment recorded in 2020. When 2021 is compared to 2019, there was a 45% decrease (278 arraignment). In comparison to 2018, a 57% decrease (356 arraignment) was recorded. While the number of arraignment decreased by 41% when 2021 is compared to 2017 (259 arraignment).

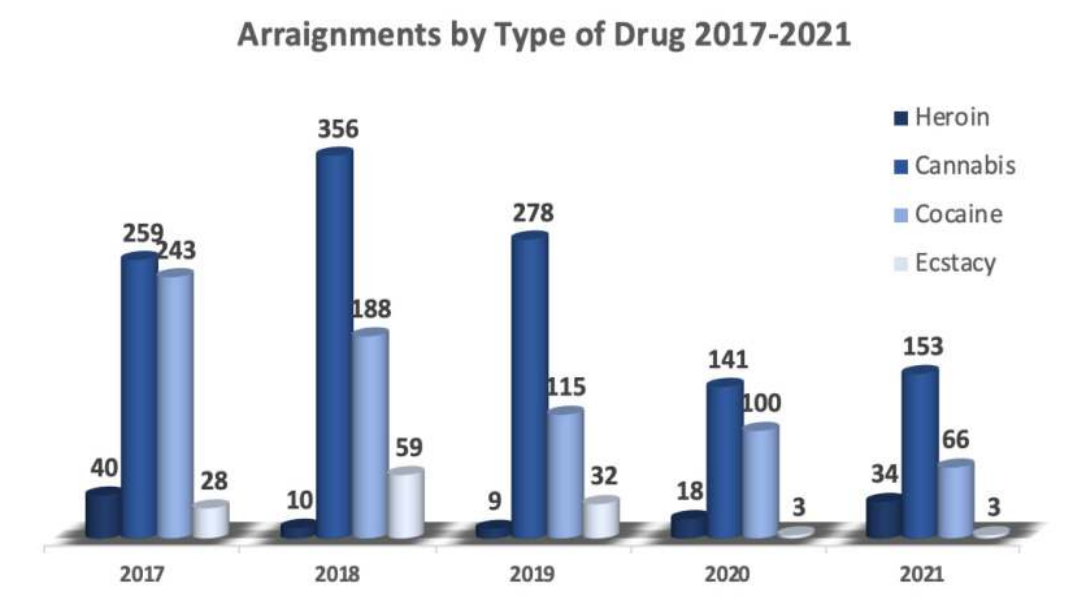


Figure 2.2: Total number of arraignment by type of drug 2017 - 2021

There was also a 73% decrease in cocaine drug-related arraignments, with 259 arraignments in 2017 dropping to 66 arraignments in 2021. The same pattern can be seen in Ecstasy related arraignments, which decreased from 59 arraignments in 2018 to 32 arraignments in 2019, and a significant decrease in 2020 with 3 arraignments and 1 arraignment in 2021.

Heroin drug-related arraignments had decreased from 40 in 2017 to 10 and 9 in 2018 and 2019, respectively. However, in contrast, an increase of 18 arraignments was recorded in 2020, followed by another increase of 34 arraignments in 2021.

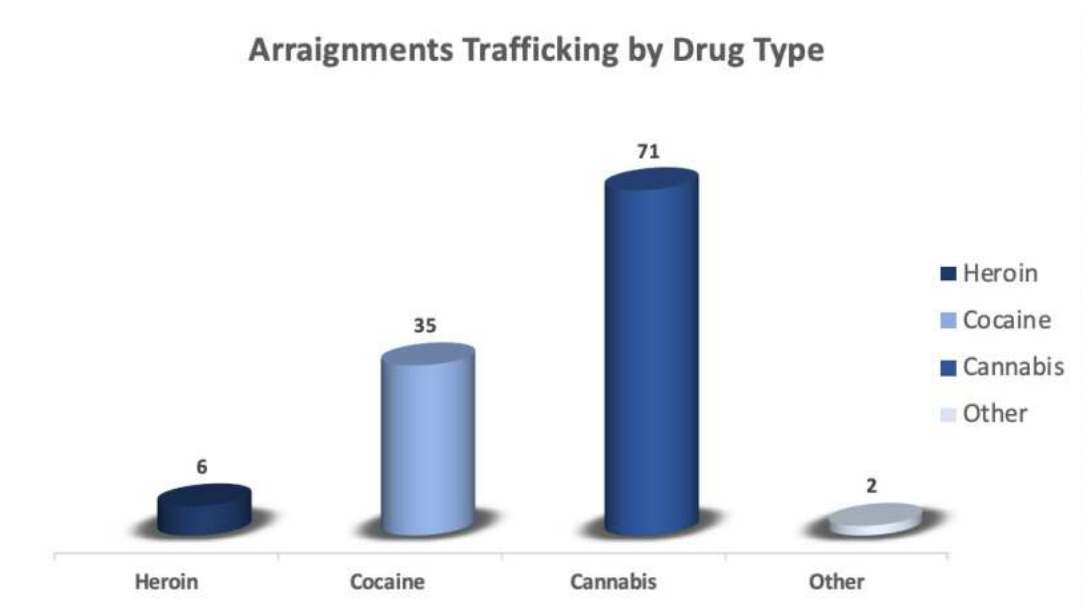


Figure 2.3: Trafficking Arraignments by Drug Type 2021

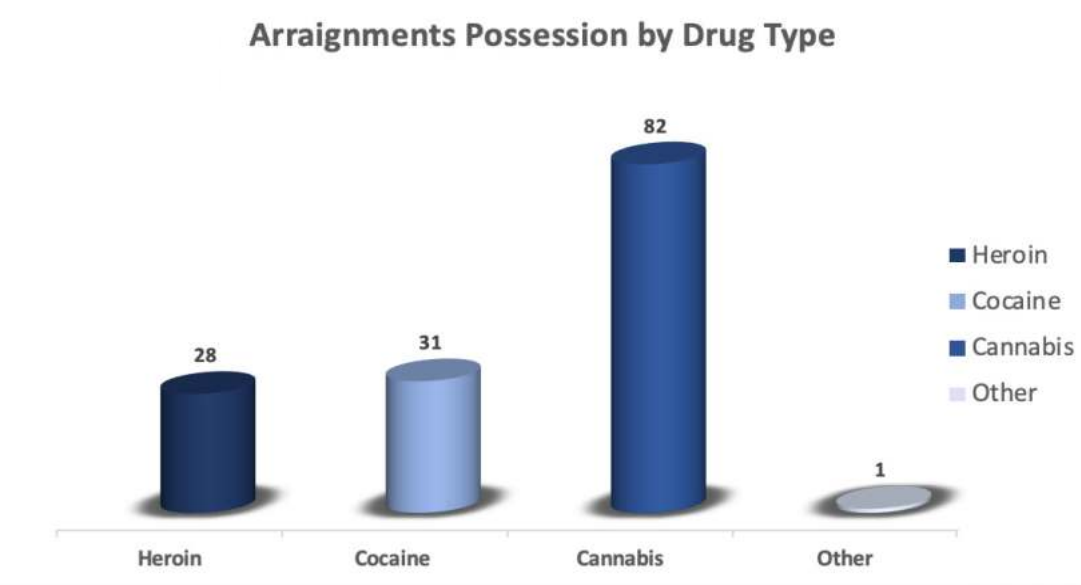


Figure 2.4: Possession Arraignments by Drug Type 2021



## 2.5 TRIBUNAL CASES: OFFENCES BY SUBSTANCE TYPE

During the period since the tribunal started processing cases of possession in 2015 until December 2021, the tribunal had processed a total of 3,666 cases. The majority of cases processed were for possession of cannabis which total some 2,124 cases, among which 1,494 cases were for possession of cannabis grass and 630 for cannabis resin. Cases appearing before the tribunal for cocaine possession amounted to 957 cases, whilst 234 cases were for possession of Ecstasy (MDMA). Cases related to heroin possession amounted to 208. Cases related to other substances amounted to 143 among which the majority of individuals appearing before the tribunal were Maltese residents, amounting to 2,484 (68%) out of the total of 3,666, while the remaining 1,182 (32%) were foreign nationals.

## 2.6 TRIBUNAL OUTCOMES

Since the enactment of Chapter 537 of the Laws of Malta entitled the Drug Dependence (Treatment Not Imprisonment) Act in 2015, the number of individuals appearing before the Commissioner of Justice for possession amounted to 135 cases in 2015, rising to 779 in 2016. In 2017, there was a slight decrease in cases with 699, whilst a further decrease to 600 cases in cases were reported in 2018. Conversely, in 2019, the number of cases appearing before the tribunal had risen to 815. In 2020, the number of cases decreased to 287, while in 2021 the total amounted to 351. The reduction in the last two years is mainly due to the fact that, for a given period of time, sittings were disrupted due to the COVID-19 pandemic during these years.

Penali	2017	2018	2019	2020	2021	Graphics
Paid	553	397	624	203	193	
Tribunal Pending Payments	144	190	172	79	116	
Cases Judged Not Guilty (Not Due)	2	13	16	4	2	
Cases Pending Judgement	0	0	3	1	40	
<b>Total</b>	<b>699</b>	<b>600</b>	<b>815</b>	<b>287</b>	<b>351</b>	

Table 2.0: List of Tribunal cases 2017 - 2021

## 2.7 PROBATION AND PAROLE

Data reported by the Department for Probation and Parole, show that in 2021, there were a total of 396 clients registered within the service. The majority of these clients, 331 individuals were males and the remaining 65 were females. Cocaine was the primary drug of choice for the majority of clients, with a total of 192 individuals. This was followed by 97 individuals reporting cannabis as their primary drug while those reporting heroin as their primary drug amounted to 85 individuals. A further 22 individuals reported that they used synthetic substances as their primary drug.

## 2.8 DRUG SEIZURES

The table below illustrates the number of drug seizures in Malta for year 2021. It is important to note that drug seizures include both seizures of drugs destined for the local market and also drugs in transit through Malta.

Type of Drug	Quantity	Number of seizures	Trafficking	Possession
Cannabis Grass	187719.759g	122	34	88
Cocaine	762409.934g	54	31	23
Heroin	63.724g	25	10	15
Cannabis Resin	27216.173g	17	7	10
Seeds	383	17	6	11
Cannabis plants	56 Plants	10	6	4
Scheduled synthetic	1078.62g	10	6	4
Cannabis joint	207	7	1	6
Crack Cocaine	22.948 g	4	2	2
Magic mushroom	403.163g	3	1	2
Ecstasy	14.5 pills	2	2	0
MDMA powder	92.47g	2	2	0
Amphetamine	31.17g	2	2	0
Synthetic not scheduled	128.175g	2	1	1
Methamphetamine	39.908g	2	2	0
Khat	118Kilos	1	1	0
Cannabis extract	6 bottles	1	1	0
4-Cmc	25g	1	1	0
CBD oil	7.2L	1	1	0
Methadone	0.38L	1	1	0

Table 2.1: Quantity and number of seizures 2021

## 2.9 PURITY

Average purity at street level of heroin in 2021 was 19%, 2% lower than in 2020 at 21%. The average purity level of cocaine increased to 48% in 2021 when compared to the 28% purity in 2020. This however may be due to large seizures of cocaine at the Malta Freeport which may affect the level of purity as substances seized in such operations are usually of high potency and will not be of street level purity. Purity of cannabis was reported at an average of 11% THC content for both resin and herbal cannabis. The THC level of cannabis has been increasing for a number of years. Indeed, following slight decreases in 2015 and 2016 when the purity at street level was 7%, in 2017, purity of cannabis resin increased to 8.5% of THC content, while a substantial increase to 15% was reported for 2018. In 2019 and 2020, there was a 3% drop with both years reporting 12% THC content. Cannabis grass THC content was reported at 7% in 2016, 8% in 2017 and increased to 15% in 2018, while in 2019 and 2020 purity had decreased slightly to 12%. As indicated above, in 2021 the average level of purity has dropped considerably to 11% THC content. However, it is important to note that cannabis seized during 2021 had a maximum of 25% THC content.

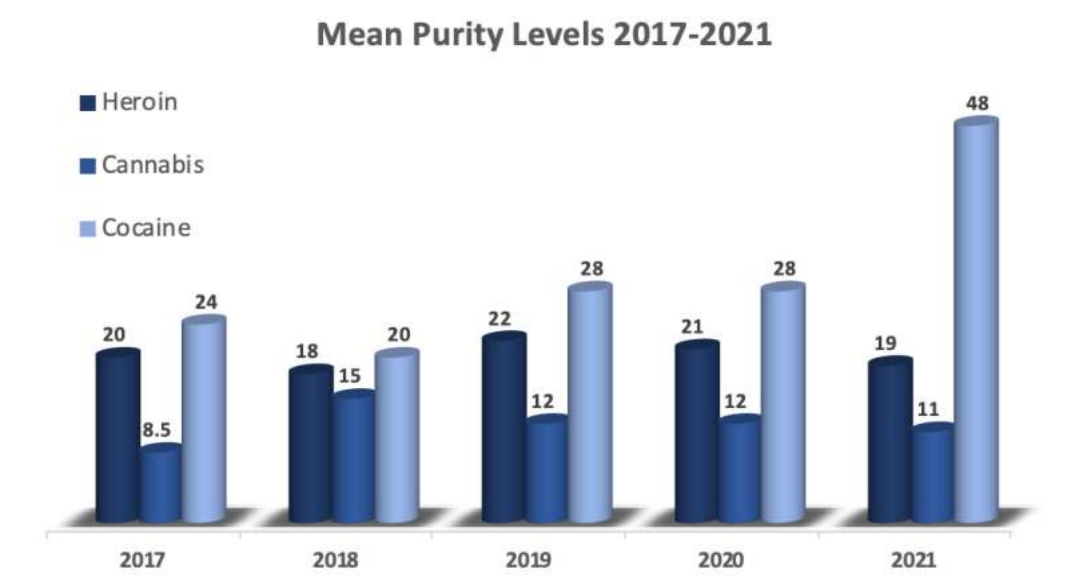


Figure 2.5: Mean purity levels by type of drug 2017 - 2021



## 3. Problem Drug Use

### 3.0 HIGH RISK DRUG USE

The reporting of estimates of high-risk drug use is a tool that contributes towards better understanding of problematic trends of substance use in Malta. For the year 2021, data are presented for estimates of high-risk heroin use and high-risk cocaine use, in light of the fact that most individuals entering treatment do so primarily for their use of heroin or cocaine. Such data are presented in the sections pertaining to heroin use and cocaine use within this chapter. In addition, this chapter also includes data pertaining to entrants to specialised drug treatment centres, including data related to first time entrants into treatment. This data provides a clearer understanding of emerging trends in overall drug use and high-risk drug use among persons in treatment.

### 3.1 SYRINGE DISTRIBUTION IN MALTA

For several years now, Malta has had a system of syringe distribution that is delivered free of charge from seven designated health centres spread across Malta and Gozo. This measure aims to reduce the incidences of individuals sharing syringes and drug paraphernalia or the use of contaminated/dirty needles. The objective of this initiative is to minimize risky behaviour which may lead to blood borne diseases and infections.

In 2021, health centres in Malta distributed circa 106,000 syringes. This figure constitutes an increase of just over 3% when compared to the previous year (2020) when 103,108 syringes were provided. Conversely, the 2021 figures show a hefty decrease over the 2018 (-66%) and 2019 (-52.5%) figures respectively.

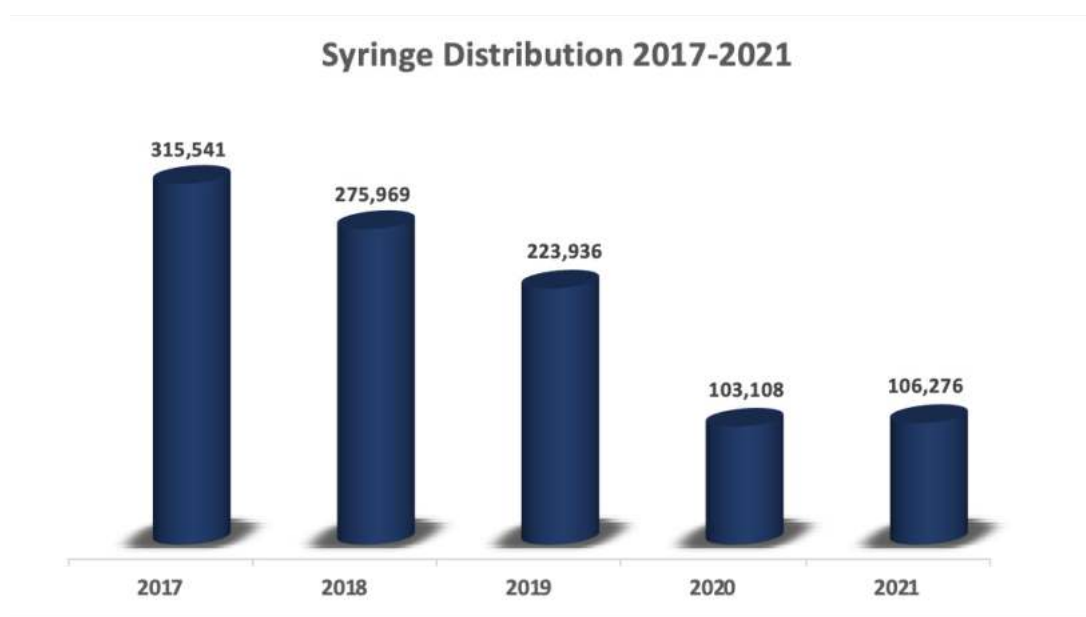


Figure 3.0: Total number of syringes distributed between 2017 - 2021

### 3.2 PRIMARY DRUG<sup>1</sup>

As highlighted in Figure 3.1 below, out of the 1990 individuals seeking treatment in 2021, heroin was the most commonly used primary drug among all treated individuals, accounting for 50% (990 individuals) of the cohort. This was followed by cocaine 34% (676 individuals), and cannabis 15% (291 individuals).

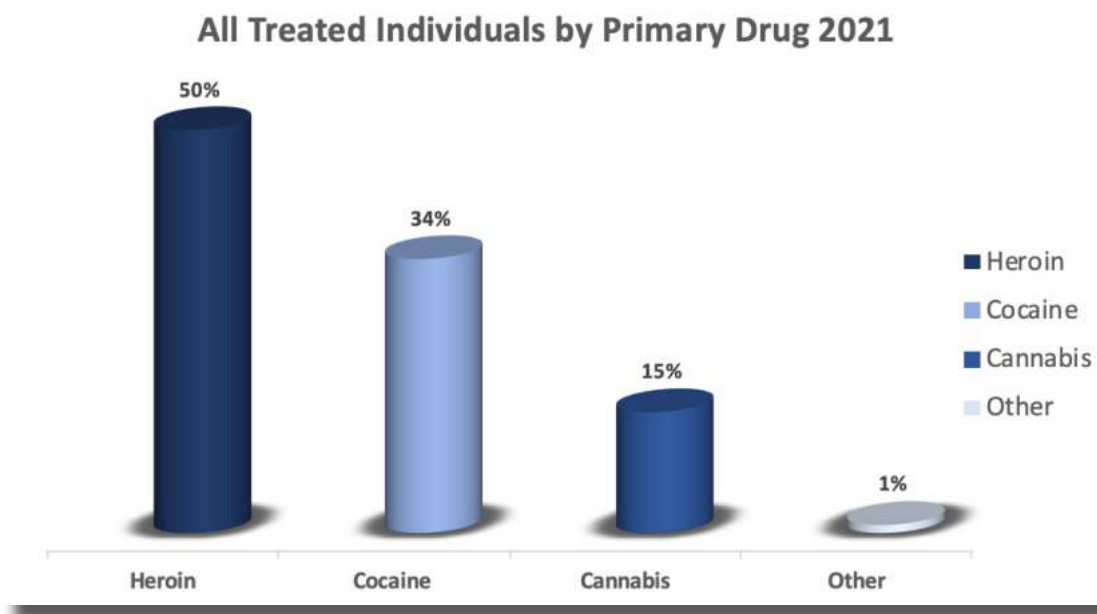


Figure 3.1: All treated individuals by primary drug 2021

Further analysis shows that 79% (1,579 individuals) had received treatment prior to 2021. Heroin was the primary drug of choice for 58% (919 individuals) of previously treated individuals, followed by cocaine 30% (469 individuals) and cannabis 11% (176 individuals).

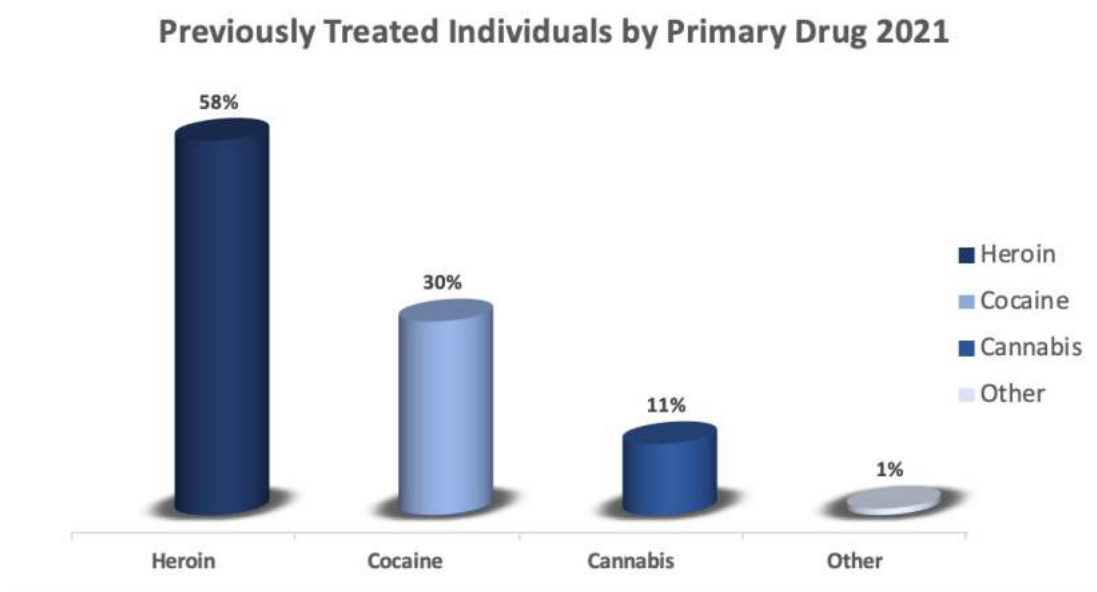


Figure 3.2: Previously treated individuals by primary drug 2021

<sup>1</sup> A primary drug is described as the substance that causes the most health, legal, or social problems for the individual.

In 2021, 21% (411 individuals) entered drug treatment services for the first time. In contrast to previously treated individuals, cocaine was the primary drug of choice for 50% as shown in Figure 3.3 below.

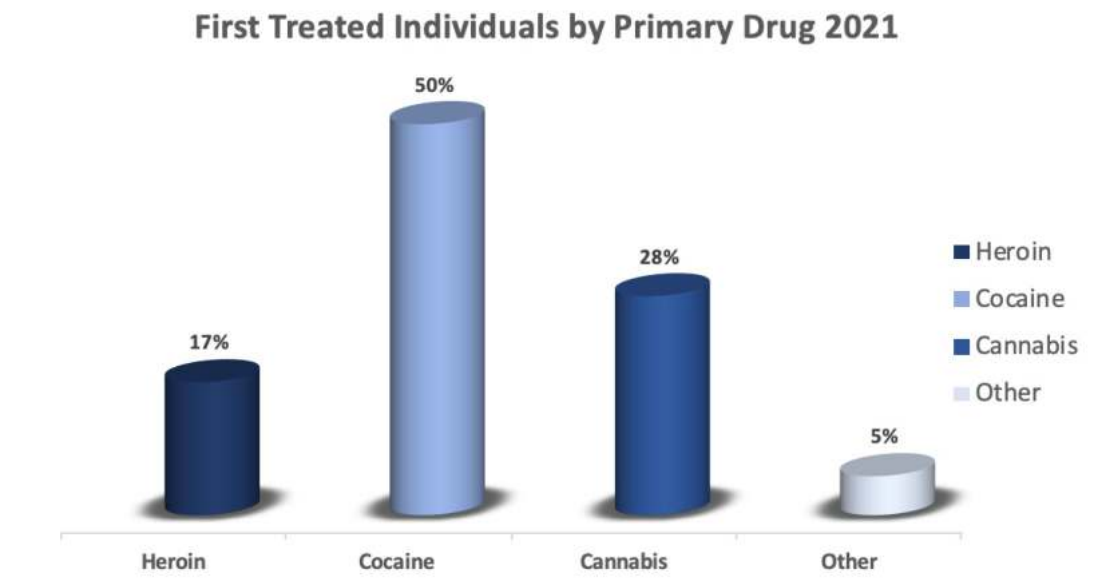


Figure 3.3: First treated individuals by primary drug 2021

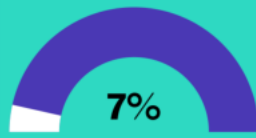
The figures above portray the continued decline in heroin as the primary drug of choice, a trend that has been observed over the past decade. Cocaine is now the most common among service users entering drug treatment for the first time. The use of cannabis among this cohort is also increasing and now falls into second place after cocaine and before heroin.



# Characteristics of Heroin Users

## 990

Total number of individuals who primarily use Heroin



New Cases

## GENDER



## MEDIAN AGE



41

Median age first use



18 years old



6 years



42%  
Currently Injecting



65%

Self Referred, Family or Friends



70%  
Opioid Agonist Treatment



94%

Stable Accommodation

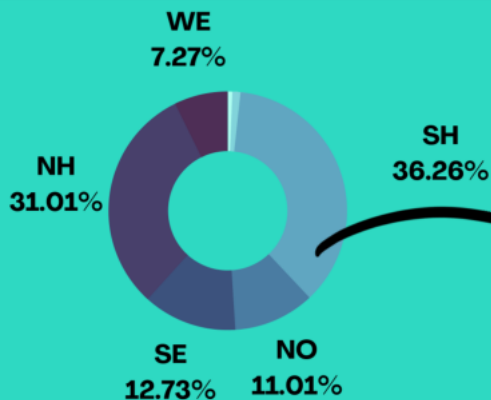


75%  
Completed Secondary Level Education

7%  
Completed Higher Education



41%  
Regularly Employed



## Region



Infographic 3.0: Characteristics of Heroin users 2021



### 3.3 HEROIN TREATMENT ENTRANTS

The most recent data for 2021, show that heroin continues to be the most commonly reported primary drug among all those receiving treatments, making up 50% of the data (990 individuals). However, this still represents a decrease from the 55% reported in 2020. These figures, indicate a continued decline in heroin use among those receiving treatment in recent years.

7% (71 individuals) of the 990 individuals registered for heroin use were reported as new cases, indicating a 2% decrease in new cases when compared to the previous year (9%; 101 individuals). This shows another downward trend relating to opioid use in the last years.

Males made up the majority of persons seeking treatment for heroin as their primary drug of choice, amounting to 80% (790 individuals) of the cohort, with females accounting for the remaining 20% (200 individuals). The median age of these individuals was 41 years old.

Data collected from individuals seeking treatment for heroin use show that, the median age when these individuals began using drugs was 18 years old, and that treatment was sought 6 years after their first use. A total of 65% (643 individuals) of these individuals either went to treatment on their own initiative or were recommended to do so by family members or friends.

94% (927 individuals) have a stable housing situation and mainly live in the island's northern and southern harbour regions. In addition, 41% (405 individuals), are regularly employed. In terms of educational background 75% have completed their secondary school level (745 individuals) whereas 7% have obtained a higher level of education (70 individuals).

A significant proportion of individuals were registered as receiving opioid agonist treatment 70% (693 individuals), while 7% (71 individuals) reported having a poly-drug use problem<sup>2</sup>.

### 3.4 FREQUENCY OF USE

The frequency of use refers to how frequently the individual used heroin on a weekly basis. In total 83% (825 individuals) of those who said heroin was the main drug of choice reported daily substance use. This has increased compared to 2020, whereby 77% (844 individuals) of heroin users used the drug on a daily basis, compared to 75% in 2019 (846 individuals). Conversely, heroin users reporting not using the drug in the previous 30 days; decreased from 14% (158 individuals) in 2020 to 8% (84 individuals) in 2021.

Analysing heroin users who reported using the drug 2 to 3 times per week, one may note a relatively stable rate hovering at around 3% over the past three years. This is similar to the percentage rate of heroin users who said they used heroin once a week or less, which remained stable at 3% in 2021.

As can be seen from Figure 3.4, heroin users who reported using the drug 4 to 6 times per week amounted to 2%. This rate is slightly less when compared to 2020 (3% or 30 individuals)

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<sup>2</sup> A poly-drug use problem occurs when the client perceives two or more drugs to be the source of the problem and it is difficult to determine which is the primary drug

### PRIMARY DRUG HEROIN BY FREQUENCY OF USE

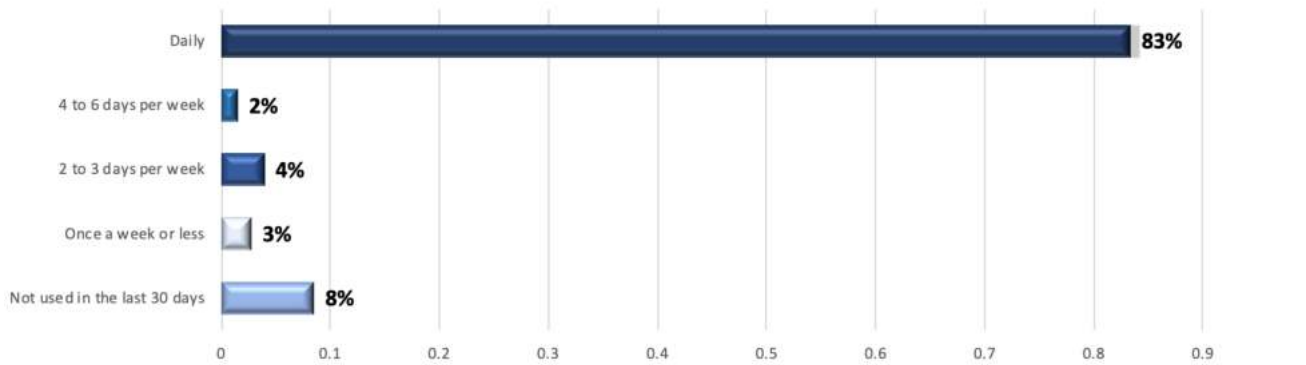


Figure 3.4: Primary drug Heroin by frequency of use 2021

### 3.5 ROUTE OF ADMINISTRATION<sup>3</sup>

A total of 53% of individuals who reported heroin as their main drug of choice, stated that injecting was their preferred route, an increase of 11% when compared to 2020 (42%). As can be seen from Figure 3.5 below, this was followed by smoking or inhaling heroin amounting to 38% which is 13 percentage points less compared to 2020 figures (51%). Sniffing the drug was reported to be route of administration for 7% (69 individuals), an increase of 1% compared to 2020 (6%).

### PRIMARY DRUG HEROIN BY ROUTE OF ADMINISTRATION

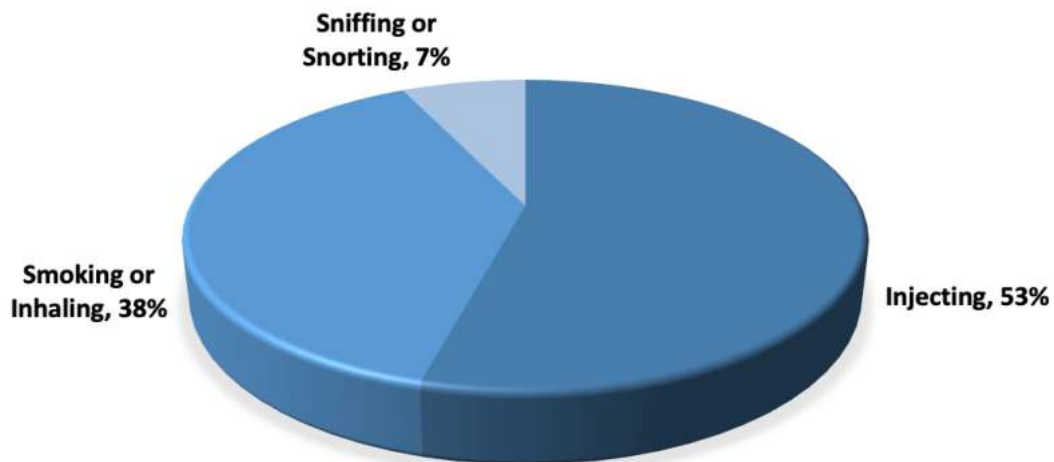


Figure 3.5: Primary drug Heroin by route of administration 2021

<sup>3</sup> The route of administration of a drug refers to how it enters the body, such as through injection or oral consumption.

### 3.6 USE OF SECONDARY SUBSTANCE

From the 990 individuals who reported heroin as their primary drug of choice, a total of 33% (328 individuals) reported using cocaine as their preferred second drug, an increase of 2% when compared to 2020 data (31%; 344 individuals) and a 4% increase when compared to 2019 (29%; 318 individuals).

As can be seen from figure 3.6 below, individuals who reported cannabis as their preferred second drug amounted to 25% in 2021, a similar percentage to 2020 (25%), and a decrease of 2% when compared to 2019 (27%).

Conversely, individuals who reported no other secondary drug, decreased by 7%, from 41% in 2019 to 34% in 2021. The remaining 8% (85 individuals) in 2021 reported using other drugs.

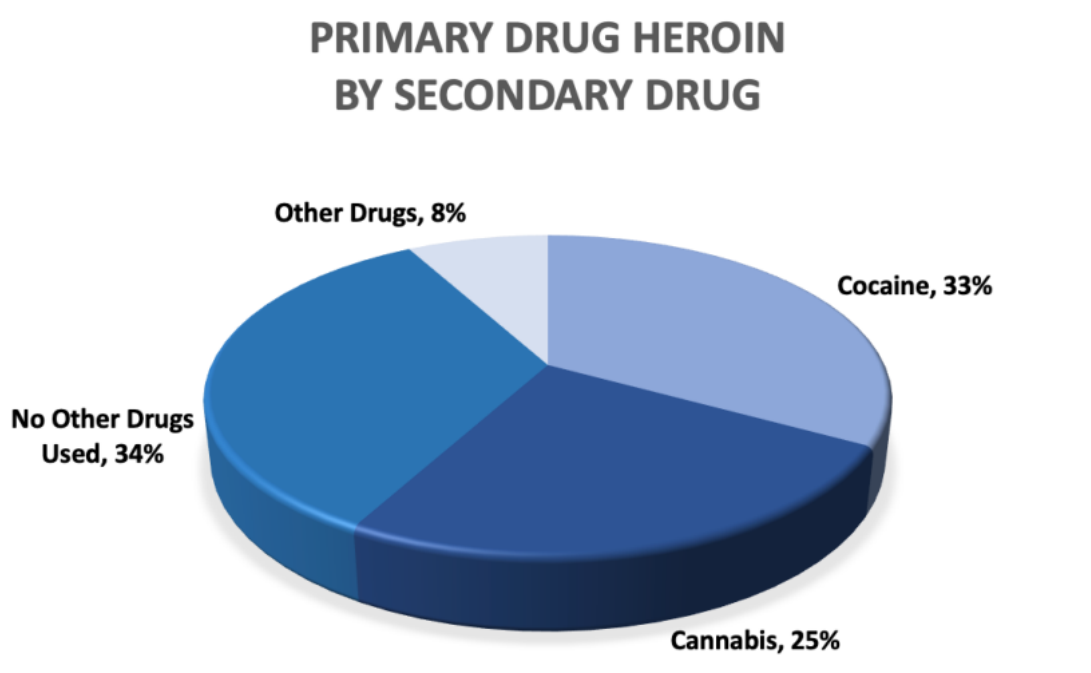


Figure 3.6: Primary drug Heroin by secondary drug 2021

### 3.7 PROBLEM HEROIN USE

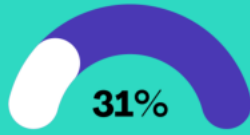
Prevalence of use of heroin among individuals in treatment has been declining for a number of years in Malta. However, when considering the severe health and social consequences experienced by people who primarily use heroin, the use of this substance remains a matter for concern. In 2020, there were an estimated 896 high-risk opioid users (2.60 per 1 000 population aged 15-64 years). This figure shows a steady decrease from the estimates registered in previous years and is on par for this year.



# Characteristics of Cocaine Users

676

Total number of individuals who primarily use Cocaine



New Cases

## GENDER



81%

19%

## MEDIAN AGE



36

Median age first use



20 years old

Median years of using before seeking treatment



11 years



5%  
Currently Injecting



75%

Self Referred, Family or Friends



11%  
Opioid Agonist Treatment



89%

Stable Accommodation



62%

Completed Secondary Level Education

17%

Completed Higher Education



56%

Regularly Employed

WE GO  
8.14 3.99

SH  
26.48

NH  
30.92

SE  
16.57

NO  
13.02



## Region



31%

Northern Harbour

Infographic 3.1: Characteristics of Cocaine users 2021

### 3.8 COCAINE TREATMENT ENTRANTS

Cocaine continues to be the second most used primary drug among the overall population of individuals seeking treatment after heroin. Cocaine use as a primary drug continues to rise, reaching 34% (676 individuals) in 2021. This upward trend indicates that the rate of individuals entering treatment primarily for cocaine use has increased by 19% since 2015 and is the highest ever recorded. Out of the 676 recorded cocaine users, 39% (265 individuals) reported crack cocaine as the problem drug, a 3% increase from 36% (215 individuals) in 2020.

A total of 31% (207 individuals) of the 676 individuals registered for cocaine use were reported as new cases, representing an 11% decrease from the previous year (42%; 256 individuals). Although there was an increase in total cocaine users, the decrease in new cases indicates that cocaine users are staying in treatment and thus increasing the overall number of such users in care.

In 2021, males constitute the majority of those seeking treatment for cocaine as their primary drug of choice, forming 81% (544 individuals) of the total cohort, with females accounting for the remaining 19% (127 individuals). The median age of these individuals was reported to be 36 years.

Data collected from individuals seeking treatment for cocaine use show that, the median age when they first began to use drugs was 20 years old, and that they then sought treatment for their drug problem 11 years after their first use. Among these individuals, 75% (509 individuals) either went to treatment on their own initiative or were recommended to do so by family members or friends.

The majority 89% (605 individuals) have a stable housing situation and live in the island's northern harbour region 31% (209 individuals), are regularly employed 56% (376 individuals), and have completed their secondary level 62% (419 individuals) or higher level of education 17% (118 individuals).

A total of 11% (73 individuals) of individuals who use cocaine as their primary substance are registered as also receiving opioid agonist treatment, indicating that a fraction of individuals who use cocaine also receive treatment for their opioid use. Additionally, 12% (78 individuals) reported having a poly-drug use problem (A poly-drug use problem occurs when the client perceives two or more drugs to be the source of the problem and it is difficult to determine which is the primary drug).

### 3.9 FREQUENCY OF USE

The frequency of use refers to how frequently the individual used cocaine on a weekly basis. 35% (236 individuals) of those who said cocaine was their main drug of choice reported they used the substance on a daily basis. In 2020, 38% (228 individuals) of cocaine users used the drug on a daily basis, compared to 36% in 2019 (182 individuals).

When compared to the previous years, an increase in cocaine users who reported using the drug 2 to 3 times per week was registered, from 13% (65 individuals) in 2019 to 23% (139 individuals) in 2020, in 2021 no change was recorded with 23% (154 individuals).

Cocaine users reporting not using the drug in the previous 30 days decreased from 18% (90 individuals) in 2019 to 11% (68 individuals) in 2020 but increased again to 15% (99 individuals) in 2021.

Figures for cocaine users who reported using the drug 4 to 6 times per week registered a decrease in 2021 (14% or 94 individuals), when compared to 2020 (15% or 90 individuals) and 2019 (19% or 95 individuals).

The percentage of cocaine users who said they used cocaine once a week or less registered a decrease in 2019 with 15% (75 individuals) to 12% (75 individuals) in 2020 and an increase of 1% in 2021 with 13% (89 individuals).

### PRIMARY DRUG COCAINE BY FREQUENCY OF USE

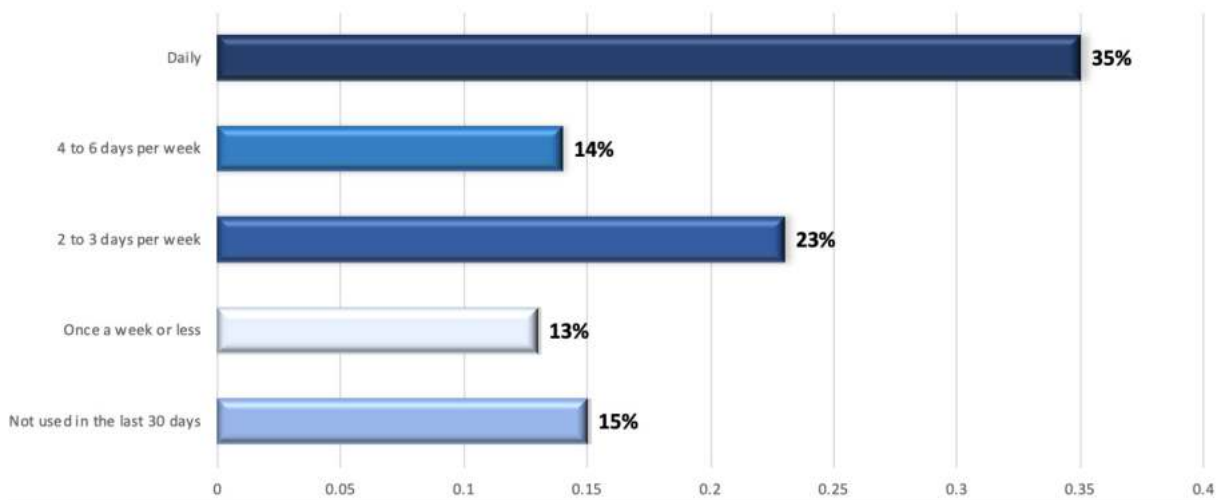


Figure 3.7: Primary drug Cocaine by frequency of use 2021

### 3.10 ROUTE OF ADMINISTRATION

The route of administration of a drug refers to how it enters the body, such as through injection or oral consumption. Among individuals who reported cocaine as their main drug of choice, 53% (358 individuals) stated that sniffing or snorting was their preferred route, a decrease of 12% when compared to 2020 when 65% reported sniffing or snorting. This was followed by 40% (273 individuals) who reported smoking or inhaling cocaine, an increase of 7% when compared to 2020 when 33% reported smoking or inhaling.

Individuals who use cocaine have very low injecting behaviour, in contrast to those who use heroin, for whom injecting behaviour is most common. Only 6% (40 individuals) of cocaine users reported injecting in 2021, though this is a 5% increase from 1% in 2020.

### PRIMARY DRUG COCAINE BY ROUTE OF ADMINISTRATION

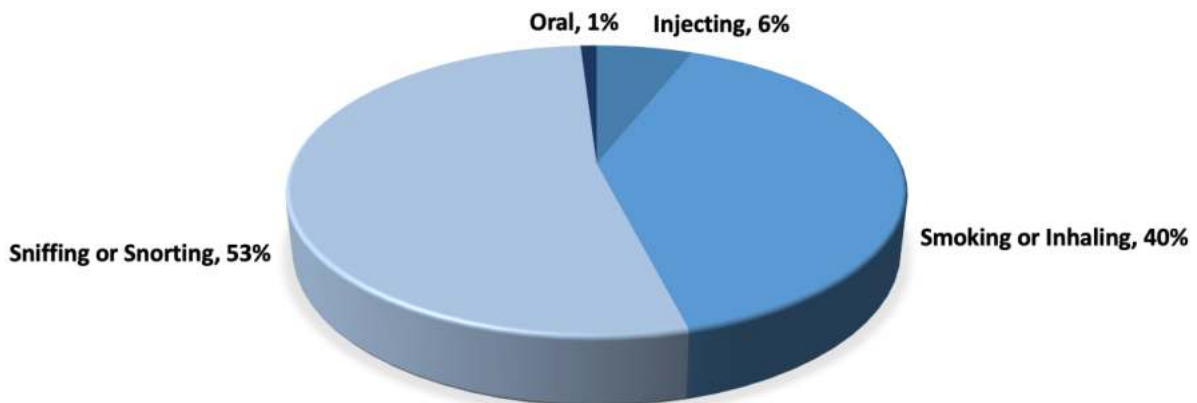


Figure 3.8: Primary drug Cocaine by route of administration 2021



### 3.11 USE OF SECONDARY SUBSTANCE

From the 676 individuals who reported cocaine as their primary drug of choice, a total of 17% (118 individuals) reported using heroin as their preferred second drug. This percentage remained stable between 2020 and 2019, when it was reported to be 17% (104 individual) and 17% (84 individuals) respectively.

Individuals who reported cannabis as their preferred second drug registered at 17% (119 individuals) in 2021, same as reported in 2020 (17%; 103 individuals) and a decrease of 10% when compared to 2019 (27%; 135 individuals).

Conversely, individuals who reported no other secondary drug, this increased by 13%, from 53% (356 individuals) in 2021 up from 40% (240 individuals) in 2020 and a 23% increase when compared to 2019 30% (154 individuals). The remaining 13% (89 individuals) in 2021 reported using other drugs.

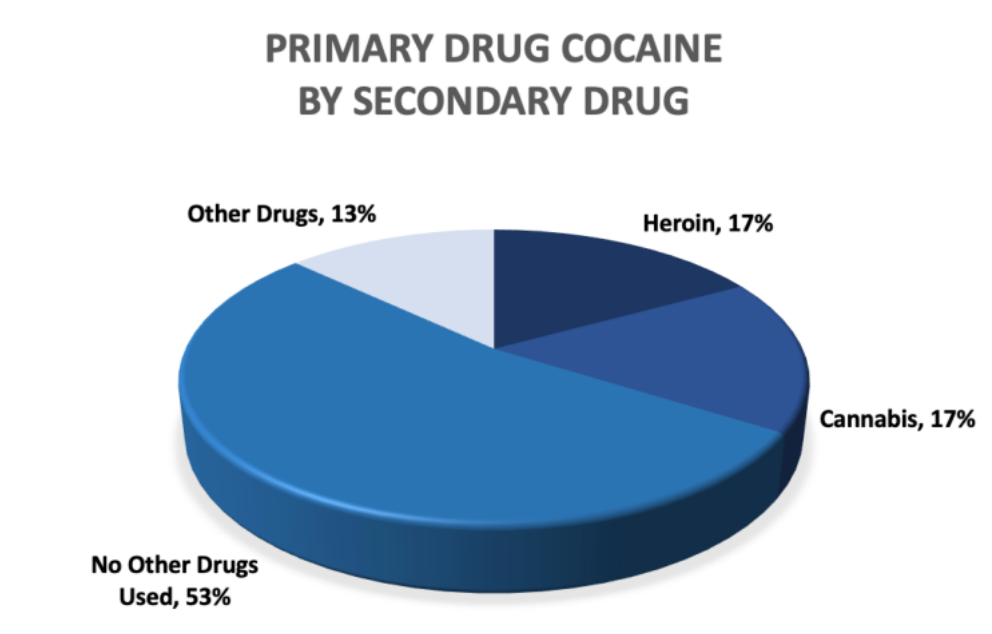


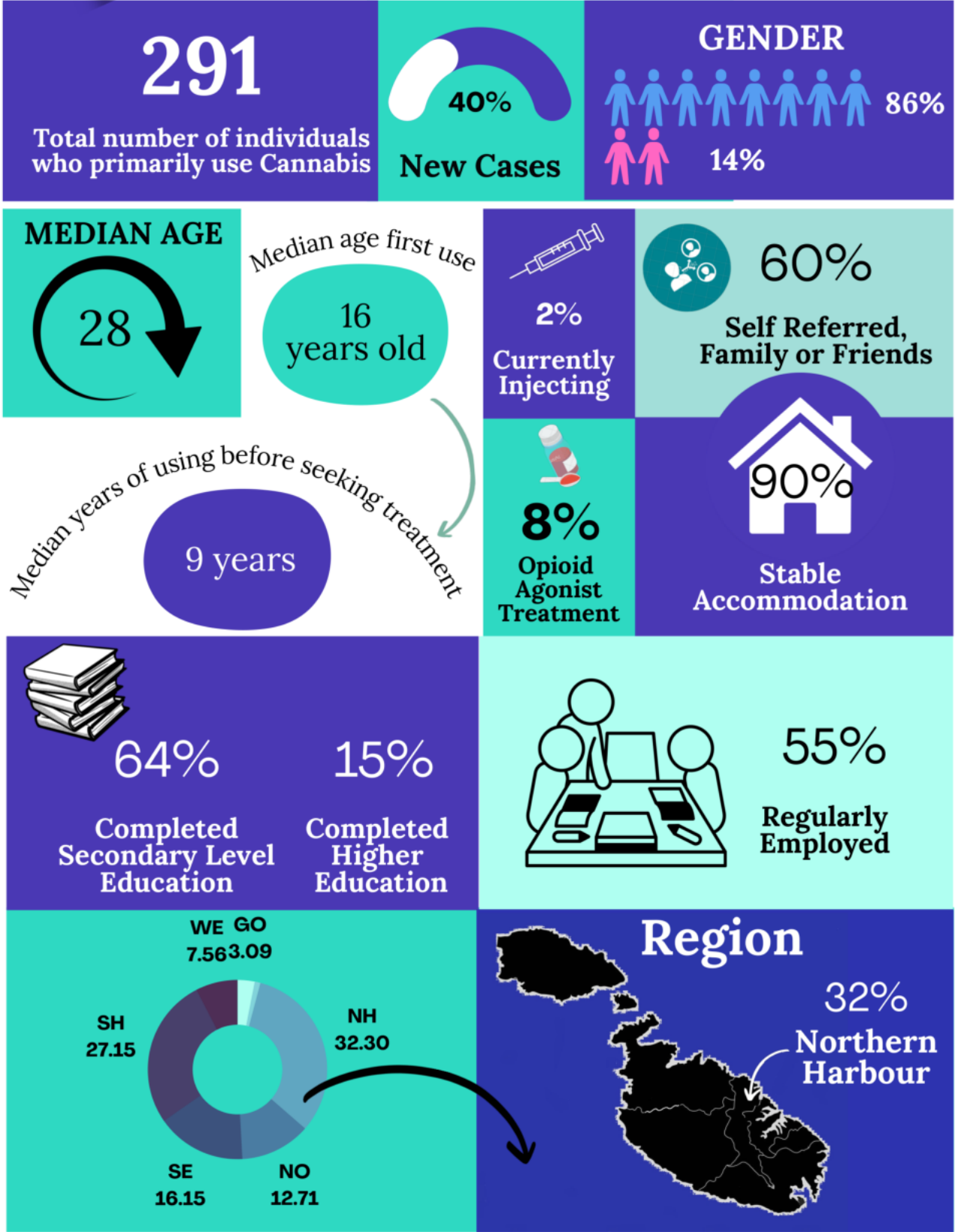
Figure 3.9: Primary drug Cocaine by secondary drug 2021

### 3.12 PROBLEM COCAINE USE

For the first time this year, estimates for high-risk cocaine use have been analysed. In 2021, an estimated 409 individuals engaged in high-risk cocaine use, which results in a figure of 3.92 per 1,000 populations (aged 16 to 64 years). This indicates that around 58% (237 individuals) of the estimated number of daily cocaine users are engaging with treatment services.



# Characteristics of Cannabis Users



Infographic 3.2: Characteristics of Cannabis users 2021



### 3.13 CANNABIS TREATMENT ENTRANTS

After heroin and cocaine, cannabis is the most commonly used primary drug among individuals seeking treatment. Cannabis use as a primary drug continues to rise, reaching 15% (291 individuals) in 2021. This upward trend indicates that the rate of individuals entering treatment primarily for cannabis use has gradually increased by 6% since 2015.

A total of 40% (115 individuals) of the 291 individuals registered for cannabis use were reported as new cases, representing a 13% increase from the previous year (27%; 135 individuals). These figures also reflect an increase of 11% when compared to 2019 and 2018 when the percentage of newly admitted individuals reporting using cannabis as primary drug totalled some 29% respectively.

In 2021, males constituted the majority of those seeking treatment for cannabis as their primary drug of choice, forming 86% (249 individuals) of the cohort, with females accounting for the remaining 14% (42 individuals). The median age of these individuals was reported to be 28 years.

Data collected from individuals seeking treatment for cannabis use show that, the median age when they first began to use drugs was 16 years old, and that they sought treatment for their drug problem 9 years after their first use. Among these individuals, 60% (176 individuals) either went to treatment on their own initiative or were recommended to do so by family members or friends.

The majority 90% (263 individuals) have a stable housing situation and live in the island's northern harbour region 32% (94 individuals), are regularly employed 55% (161 individuals), and have completed their secondary level 64% (187 individuals) or higher level of education 15% (45 individuals).

A total of 8% (24 individuals) of individuals who use cannabis as their primary substance are registered as also receiving opioid agonist treatment, indicating that a fraction of individuals who use cannabis also receive treatment for their opioid use. Additionally, 22% (63 individuals) reported having a poly-drug use problem (A poly-drug use problem occurs when the client perceives two or more drugs to be the source of the problem and it is difficult to determine which is the primary drug).

### 3.14 FREQUENCY OF USE

The frequency of use refers to how frequently the individual used cannabis on a weekly basis. 61% (180 individuals) of those who said cannabis was their main drug of choice reported they used the substance on a daily basis. In 2020, 59% (158 individuals) of cannabis users used the drug on a daily basis, compared to 56% in 2019 (155 individuals). These figures show a 5% increase in comparison to 2019 and a 2% increase in comparison to 2020.

Figures for cannabis users who reported using the drug 4 to 6 times per week decreased by 1% in 2021 (12% or 34 individuals) when compared to 2020 (13% or 35 individuals) and increased by 2% when compared to 2019 (10% or 28 individuals).

Cannabis users who said they used the drug 2 to 3 times per week in 2021 reported 11% (31 individuals), the same percentage recorded in 2020 11% (29 individuals), but an increase of 5% from the 6% (16 individuals) reported in 2019.

Cannabis users who said they had not used the drug in the previous 30 days decreased by 2% in 2021, from 10% (28 individuals) in 2021 to 12% (31 individuals) in 2020. Another 6% decrease was observed when 2021 was compared to 2019 (16% or 46 individuals).

The percentage of cannabis users who said they used cannabis once a week or less remained stable in 2021 with 6% (17 individuals) when compared to 2020 with 6% (16 individuals). A decrease of 6% was noted when 2021 was compared to 2019 with 12% (33 individuals).

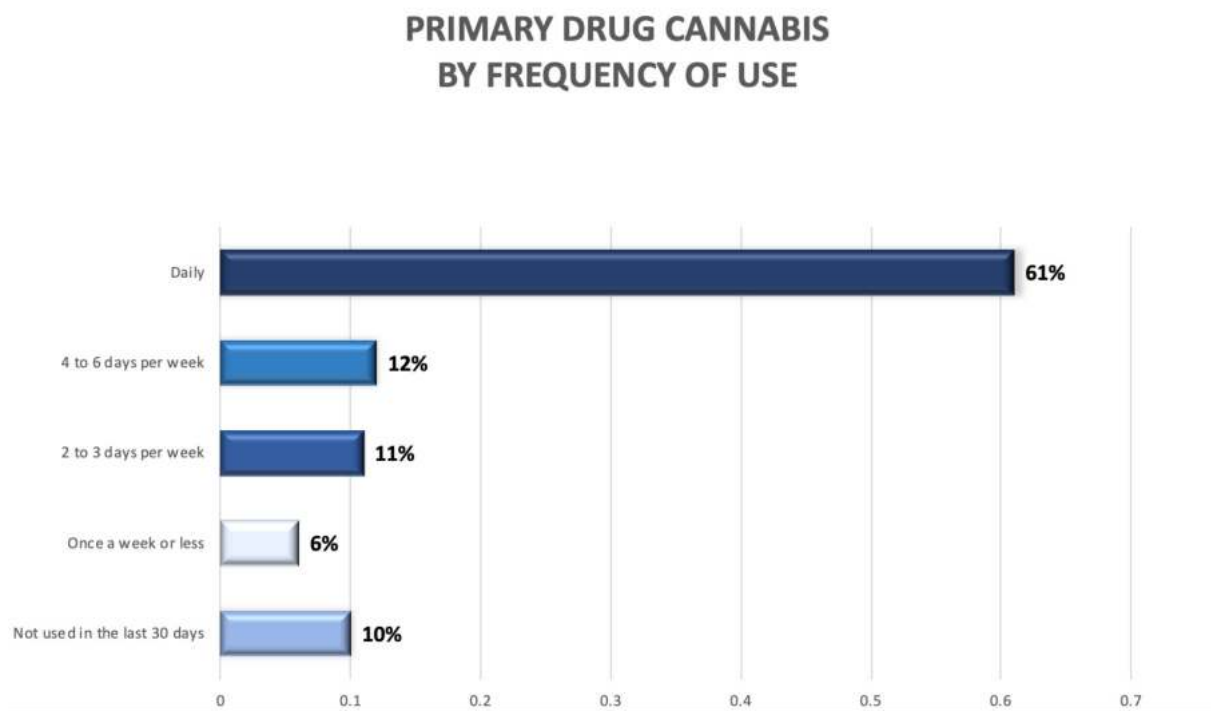


Figure 3.10: Primary drug Cannabis by frequency of use 2021

### 3.15 USE OF SECONDARY SUBSTANCE

From the 291 individuals who reported cannabis as their primary drug of choice, a total of 29% (83 individuals) reported using cocaine as their preferred second drug. This percentage increased by 5% when compared to 2020 which was 24% (53 individuals) whereas it is more or less similar to that for 2019, 27% (75 individuals).

Individuals who reported heroin as their preferred secondary drug registered at 9% (25 individuals) in 2021, same as reported in 2020 (8%; 21 individuals) and an increase of 2% when compared to 2019 (6%; 17 individuals).

Individuals who reported no other secondary drug in 2021 were 52% (152 individuals), the same or close to the percentage reported in 2020, 56% (151 individuals). Conversely a 10% increase was registered when compared to 2019 with 46% (129 individuals). The remaining 10% (23 individuals) in 2021 reported using other drugs of which 3% (8 individuals) reported cannabinoids as their secondary drug.

### PRIMARY DRUG CANNABIS BY SECONDARY DRUG

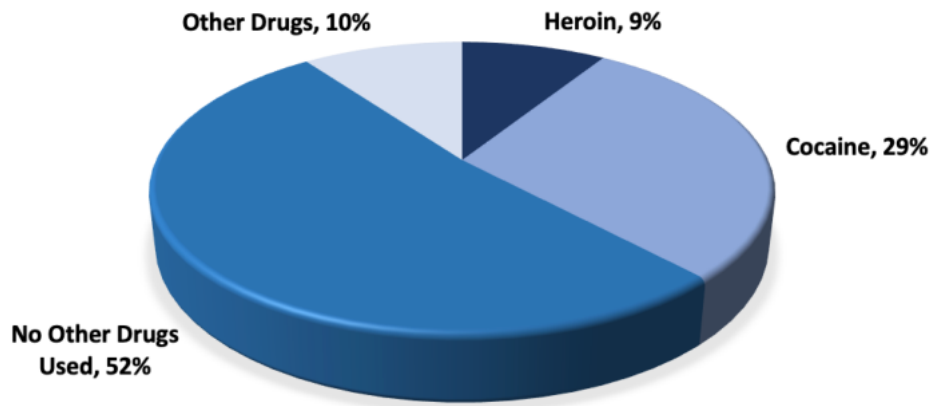


Figure 3.11: Primary drug Cannabis by secondary drug 2021



## 4. Drug Harms

### 4.0 DRUG-RELATED INFECTIOUS DISEASES

In Malta, the National Infectious Disease Surveillance Unit within the Department of Health receives notifications of positive cases from virology departments and prisons. Prevalence estimates of human immunodeficiency virus (HIV), hepatitis B virus (HBV), and hepatitis C virus (HCV), may be determined from diagnostic tests among people who inject drugs seeking treatment at the outpatient treatment unit managed by Sedqa, the Maltese government's executive agency in the drugs field.

In 2021, there were 93 (5%) individuals tested for HIV during the year. In 2021, there was 1 case reported HIV. As for HBV, data for 2021 shows that 96 individuals (5%) were tested in the year 2021 of which 3 (3%) positive cases of HBV were reported. Looking at HCV, data for 2021 showed that 116 individuals (6%) were tested during that year. From those tested a total of 36 (31%) resulted positive.

### 4.1 HEALTH CONSEQUENCES AMONG HEROIN USERS

In 2021, 74% (734 individuals) of heroin users reported being tested for HCV at least once in their lifetime, an 8% increase from 2020 (66%). In addition, a total of 30 new positive cases of HCV were reported amongst those that use heroin as a primary drug.

In the year 2021, 44 (4%) heroin users were reported to have tested for the first time for HBV. Amongst heroin users, 3 positive cases of HBV were reported of those tested in 2021. As for HIV, 44 (4%) users were also reported to have tested for the first time, no new HIV positive cases were reported.

### 4.2 HEALTH CONSEQUENCES AMONG COCAINE USERS

In 2021, 30% (204 individuals) of cocaine users reported being tested for HCV at least once in their lifetime, with 6 individuals testing positive in 2021.

As for HIV, 198 individuals (30%) reported being tested at least once in their lifetime. On the other hand, there were 204 individuals that were tested at least once in their lifetime for HBV. Data for 2021 also shows that no new positive cases of HBV and HIV were reported among cocaine users.

### 4.3 HEALTH CONSEQUENCES AMONG CANNABIS USERS

Amongst cannabis users a total of 43 individuals (15%) reported that they had tested at least once in their lifetime for HBV, with no new cases reported for 2021. As for HIV, a total of 43 individuals (15%) reported that they were tested at least once in their lifetime. It was reported that 1 new positive case resulted among cannabis users tested in the last year. Data for 2021 shows that for HCV 43 individuals (15%) reported ever being tested in their lifetime with no new cases reported for the year 2021.

#### 4.4 DRUG-RELATED EMERGENCIES

A clinical toxicology unit at Mater Dei Hospital participates in the European Drug Emergencies Network (Euro-DEN Plus) project, which was established in 2013 to monitor acute drug toxicity in sentinel centres across Europe. The figures below show a steady increase of drug-related emergencies during the last 5 reporting years, with cocaine and cannabis being the main drugs leading individuals to seek medical assistance due to intoxication. What is worthy of note is the figures for the Synthetic Cannabinoid Receptor Agonists (SCRA) in which close to some 500 individuals have sought medical assistance over the last 5 years. Though there is limited information on synthetic cannabinoids, it appears that these substances are highly available locally. Synthetic cannabinoids cause adverse health effects to people using these substances to the effect that reports have appeared in Europe in which deaths have resulted following the use of such synthetic cannabinoids.

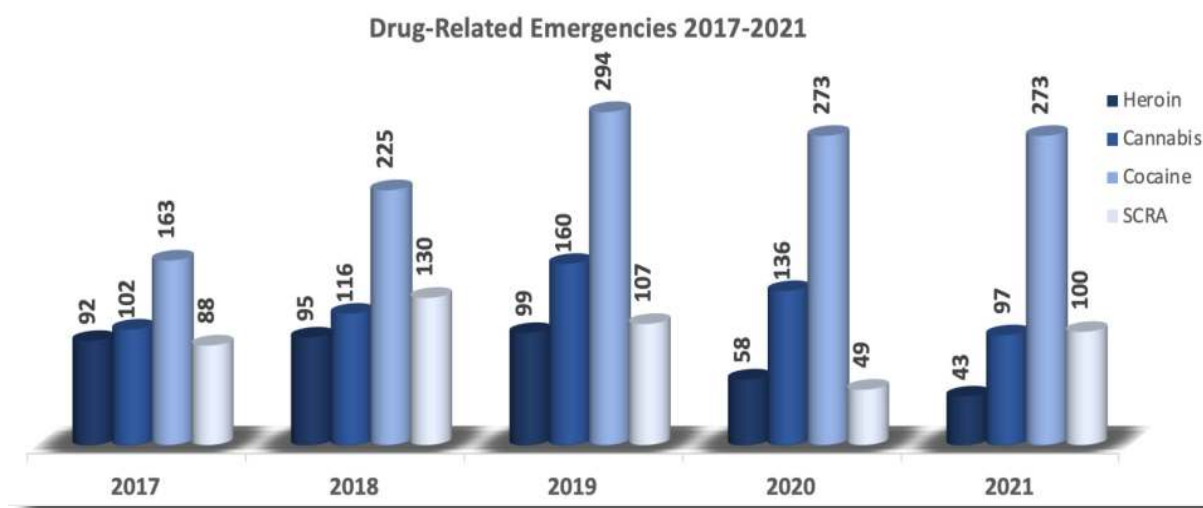


Figure 4.1: Drug-related emergencies by type of drug 2017 - 2021

#### 4.5 DRUG-INDUCED DEATHS AND MORTALITY

Drug-induced deaths refer to deaths that can be attributed directly to the use of illicit drugs (i.e., poisonings and overdoses). In 2021, the Police Special Registry registered five drug-induced deaths. In 2021, deaths reported were all male.

# 5. Prevention

## 5.0 NATIONAL DRUG STRATEGY

Launched in 2008, the Maltese National Drugs Policy document addresses illicit drug problems. The strategy aims to streamline the actions of Government and non-government bodies that are responsible for delivering prevention services and treatment for drug users.

The policy seeks to:

- (i) improve the quality and provision of drug-related services; and
- (ii) offer a better-coordinated system to lower the societal supply and demand for drugs. Assuring a high level of security, health protection, wellbeing, and social cohesion are the strategy's primary goals. Although prescription drug addiction is considered, it focuses mostly on illicit drugs.

## 5.1 PREVENTION INTERVENTIONS

Prevention services in Malta include a wide range of approaches that aim to provide services to a diverse audience among the population in Malta. Services provided include:

- universal prevention initiatives, targeting the entire population;
- selected prevention: focusing on prevention needs of specific vulnerable groups within society;
- targeted prevention services: that address the needs of individuals who may already be experimenting with substance use and are at increased risk of developing an addiction. In addition, a number of environment prevention measures are implemented with the aim to reduce the use of substances through limiting the opportunities to use substances, particularly in designated areas. Such measures in Malta include: the adoption of a complete ban on smoking in enclosed spaces and in playgrounds, non-smoking areas in several designated indoor places such as restaurants, bars and shops and the ban of smoking in cars carrying young children, amongst others.

The Foundation for Social Welfare Services and the Foundation for Medical Services implement prevention activities in close cooperation with non-governmental organisations (NGOs). Sedqa, the Maltese Government's executive agency in the drugs field, has invested in the notion that the most effective addiction treatment to achieve a healthy recovery considers the complex social, psychological, and physical factors that influence the development of an addiction. As a result, since January 2021, a new triage system, better called as MDT (Multi-disciplinary Team) is being utilized to cater for incoming new clients following an initial, preliminary assessment at intake stage. The MDT team (including a social worker/social welfare professional, a doctor and a psychologist) subsequently provides a detailed care plan to be followed by the client. Such a system has been widely praised by clients themselves, who feel their addiction-related issues are being tackled through a more personal and holistic approach.

The NGOs Caritas and the OASI Foundation run a range of prevention programmes targeting specific groups or settings.

Caritas Tal-Ibwar Adolescents Therapeutic Services is a new service that is offered by Caritas at specially built facilities aimed to support and empower 12- to 17-year-old young people who are struggling with problematic substance use, assisting them to reach their full potential and lead fulfilling lives. Together with their families and caregivers, Tal-Ibwar does this by offering educational opportunities and psycho-social treatments through day and residential therapeutic programs. Tal-Ibwar offers three different services. The therapeutic service at Caritas includes a thorough assessment with a focus on engagement, treatment retention, relationships, and education, as well as screening for psychiatric and psychological problems, trauma, drug and alcohol use, and associated health conditions.

OASI provide Secondary Prevention services, an immediate intervention to reach out to people before they start to indulge in experimentation with unhealthy behaviours. Services include individual sessions, home visits, family sessions and social support. This service opens up a process of change and growth in the person. Through coaching and support therapy, it helps individuals to recover self-confidence and thus manage their ordinary, everyday life responsibilities without fear and with a more relaxed and matter of fact attitude.

## **5.2 NEW PREVENTION INITIATIVES 2021**

### **5.2.1 The Foundation for Social Welfare Services/Sedqa**

During 2021, Sedqa's Prevention team, through FSWS Marketing, have launched a LinkedIn page, to better outreach and enhance contacts with employers and managerial staff, especially within the context of the SAFE programme, which is offered upon request to any workplace in Malta and Gozo.

Sedqa also provides a tailor made preventive and on-site interventions. The Agency has also launched prevention interventions in post-secondary and tertiary education settings. On-site social work interventions by the Addictions Community Team have been requested by UOM and MCAST. Prevention services have intensified their input in these two settings, as well as within ITS, with specific prevention activities ensuring full coverage throughout all local educational structures.

### **5.2.2 Caritas Malta**

Caritas provides outreach services through talks within smaller communities such as scout groups, football nurseries, elderly groups and others. The main aim of this outreach service is to create awareness about mental health and substance abuse, as well as provide psycho-social tools. Collaboration with community police was also developed by Caritas that focuses on promoting mental health within the community and provides knowledge about certain conditions such as Epilepsy. Radio programmes were also organised to provide the public with information about mental health and psycho-social tools they may use to better the quality of life among the population in Malta.

### **5.2.3 OASI**

In 2021, the online outpatient therapy services were fine-tuned, defining criteria as to who and how this therapy modality could be delivered more effectively. Towards the end of 2021, the Covid restriction began to ease, and thus a changeover process started to take place slowly, where therapy was delivered in hybrid mode, especially where group therapy was involved.



#### **5.2.4 JUST FACTS Campaign**

In 2021, the Ministry responsible for Social Policy through the National Addictions Advisory board, and in collaboration with Sedqa launched the Just Facts campaign through the launch of an interactive website ([justfacts.gov.mt](http://justfacts.gov.mt)) with the aim of providing a platform where young people can access accurate and transparent information related to the use of substances and also important links to substance use treatment provision for individuals who may need intervention due to their substance use.



# 6. Treatment

## 6.0 THE TREATMENT SYSTEM

The National Drugs Policy emphasises the need for synergies between service providers and other health and social professionals and institutions to ensure a multidisciplinary approach to treatment provision. There are five main drug treatment providers: three funded by the government and two non-governmental organisations (NGOs), partially funded by Government. These providers deliver different types of treatment, which can be classified into five main categories:

- (i) specialised outpatient services;
- (ii) low threshold services;
- (iii) inpatient treatment programmes;
- (iv) detoxification treatment; and
- (v) opioid agonist treatment (OAT), which was formerly known as opiate substitution treatment (OST).

NGO-based outpatient services offer long- or short-term support through social work, counselling, group therapy, and psychological interventions, while low-threshold programmes offer day-care services.

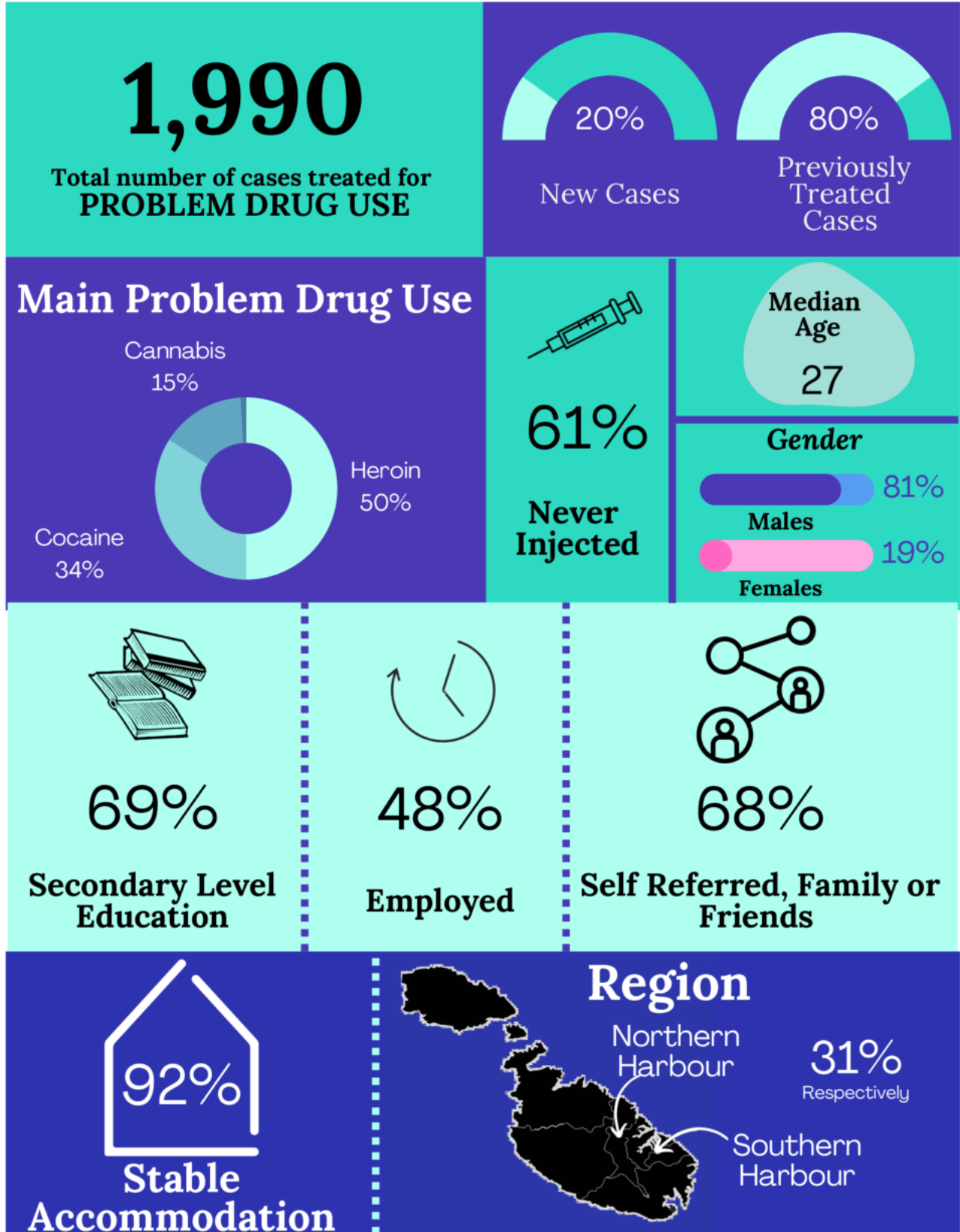
Five inpatient units are available in Malta, of which three are therapeutic communities (TC's.) The residential programmes provide a holistic, multidisciplinary approach to therapy in a communal living environment, and attempt to guide clients towards abstinence. One programme offers inpatient detoxification.

OAT is provided by the Substance Misuse Outpatient Unit (SMOPU). Methadone maintenance treatment has been available in Malta since 1987, with take-home methadone prescriptions available since 2005. Buprenorphine was introduced in 2006. It is also available as a take-home treatment by prescription from either SMOPU or a general practitioner. Dihydrocodeine is prescribed in rare instances.

## 6.1 TREATMENT PROVISION

SMOPU provided opioid agonist treatment (OAT) to 796 individuals in 2021, a 7% decrease from 855 individuals in 2020 and a 13% decrease from 920 individuals in 2019. It is still higher than the number of individuals who received OAT in 2018, when 730 individuals were provided with OAT, representing a 9% increase. The vast majority of individuals who received OAT remain those in treatment due to heroin use as their primary drug.

# Individuals in Treatment 2021



Infographic 6.0: Individuals in treatment 2021

## 6.2 INDIVIDUALS IN TREATMENT

As the table below denotes, in 2021, a total of 1,990 individuals received treatment, maintaining a consistent upward trend over the previous five years, with an average increase of 2% per year. The average number of individuals seeking treatment in the five years between 2017 and 2021 was 1,932.

	2017		2018		2019		2020		2021		Graphics
	n	%	n	%	n	%	n	%	n	%	n
All Individuals	1845	100	1898	100	1943	100	1984	100	1990	100	
Previously Treated	1600	87	1508	79	1596	82	1487	75	1579	80	
First Treated	245	13	390	21	347	18	497	25	411	20	

Table 6.0: Individuals in treatment 2017 - 2021

The number of service users entering drug treatment services for the very first time in the year 2021 accounted for 411 individuals, a slight decrease when compared to 2020 (497 individuals) but still a significant increase when compared with other years. It is also worth noting that over the last five years, there have been a total of 1,890 individuals who have sought treatment for the very first time.

In terms of primary drug of use, those entering treatment for the first time have increasingly been cocaine users, though a 2% decrease was recorded in 2021 when compared to 2020, with 50% (207 individuals) in 2021 and 52% (256 individuals) in 2020. Despite the decrease in 2021, an upward trend of individuals requesting treatment for cocaine as a problem drug has always been on an upward trend for the past several years.

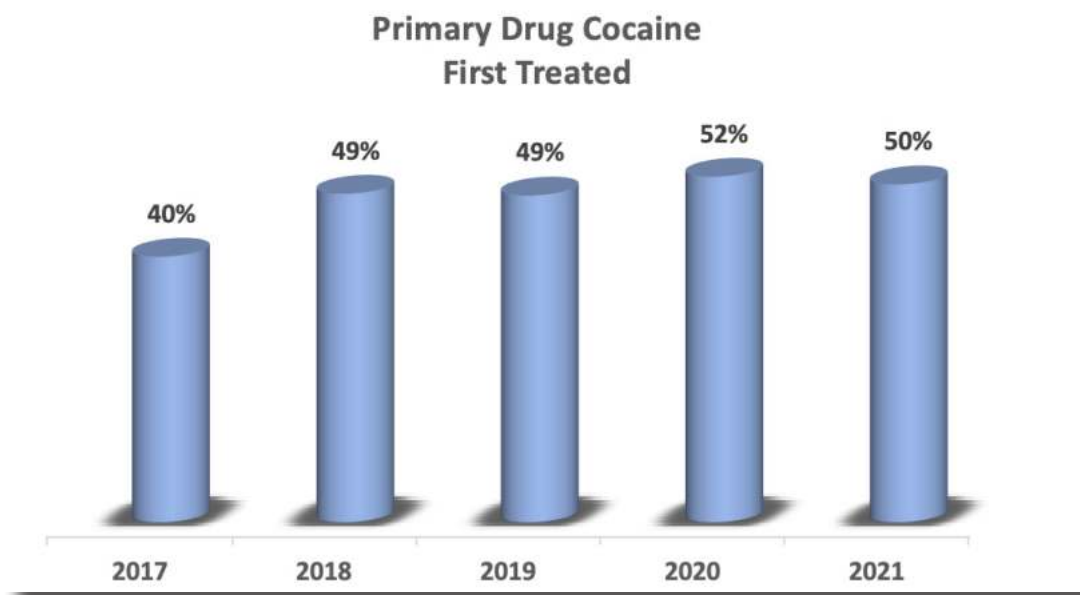


Figure 6.0 : Primary drug Cocaine by first treated 2017 - 2021

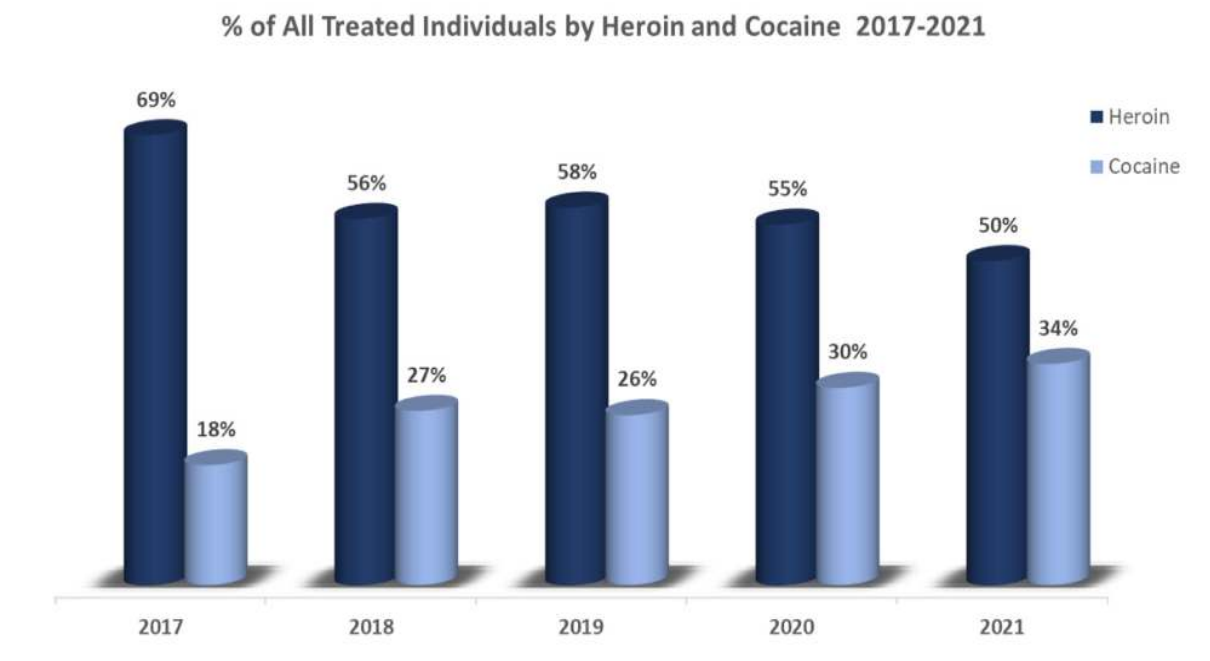


Figure 6.1: Proportion of Heroin and Cocaine from all treated individuals 2017 - 2021

The figure above shows that the shift in heroin and cocaine users seeking treatment is continuing, with double the percentage of cocaine users seeking treatment from 2017 (18%) to 2021 (34%). A downward trend in heroin users seeking treatment is also visible, with 69% in 2017 falling to 50% in 2021. The number of individuals in treatment must be considered, especially given the increase in service users and the number of heroin users, which has been constantly over 1,000 per year. Though the percentage of heroin users is decreasing, the number of individuals in treatment has remained consistent over time. This reflects the fact that heroin users remain in treatment over a long period of time.

## 6.3 GENDER

### CHARACTERISTICS OF FEMALES SEEKING TREATMENT



Females seeking treatment, accounted for **19%** of the data

#### MEDIAN AGE FIRST USE

18  
years old

#### MEDIAN YEARS USING BEFORE SEEKING TREATMENT

8 years



#### PRIMARY DRUG

Heroin is the most prevalent drug of choice among female individuals, accounting for **53%**, followed by cocaine with **34%**.

#### CHILDREN

**42%** Female individuals seeking treatment reported having children, **87%** of these females reported that they live with their children.



#### EDUCATION

**70%** of females stated to have completed secondary-level education, while **14%** have completed higher-level education.

#### EMPLOYMENT

Of the **70%** who completed secondary-level education:

- **34%** were regularly employed;
- **45%** were unemployed.

Of the **14%** who reported having a higher-level education:

- **57%** were regularly employed;
- **22%** were unemployed.



Infographic 6.1: Characteristics of females seeking treatment

## 6.4 CHARACTERISTICS OF ALL TREATMENT ENTRANTS

Males remain the vast majority of those receiving treatment, accounting for 81% of all individuals in 2021. When compared to previous years, this represents a consistent trend, with 80% of individuals in treatment in 2018, 2019, and 2020, a slight decrease from 82% in 2017.

Further analysis of females seeking treatment, which accounted for 19% of the data, reveals that heroin is still the most prevalent drug of choice among women, accounting for 53%, followed by cocaine with 34%.

When compared to 2020 data, females who use heroin as their primary drug have decreased by 7%, from 60% in 2020 to 53% in 2021, while women who use cocaine have increased by 6%, from 28% in 2020 to 34% in 2021. This is consistent with the trends examined earlier in the chapter, which show a decline in heroin use as a primary drug and an increase in cocaine use. Similarly, a 5% decrease in males who use heroin as their primary drug was registered, from 49% in 2020 to 54% in 2021. Conversely, cocaine has increased by 4 percentage points, from 30% in 2020 to 34% in 2021.

## 6.5 AGE

Information recorded from all individuals seeking treatment reveals that, the median age of female individuals was 37 years old, compared to 38 years for male individuals. The median age for when females started using drugs was 18 years old, whereas the median age for when males started using drugs was 16 years old. It also reveals that for both male and female individuals, the median time elapsed between the first use of drugs and eventually seeking treatment was 8 years.

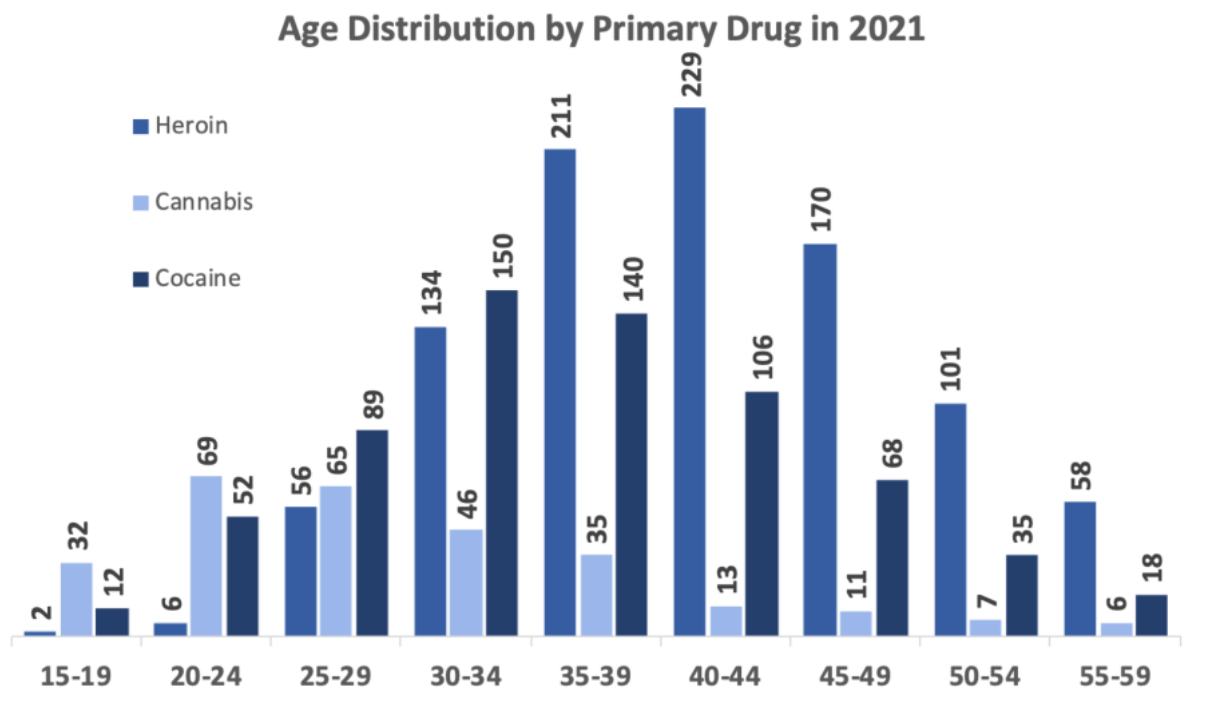


Figure 6.2: Age distribution by primary drug 2021



During 2018 the number of individuals entering treatment who were aged less than 35 years amounted to 859 individuals, which accounts for 46% of the total. The year 2019 continued with this trend, with 794 individuals being less than 35 years of age when entering treatment. This amounted to 41% of the total population. These data show a substantial decrease from previous years, with 2016 standing at 50% and with 2015 registering 52% of individuals to be within this age bracket, but similar to previous years, that is 2017. A similar trend can be seen in the years 2020 and 2021, when 37% (739 individuals) and 36% (715 individuals) of the population were under the age of 35, respectively. This figure indicates that there is a growing ageing population among those in treatment, particularly those who use heroin as their primary drug. Indeed, a total of 1,242 individuals who received treatment in 2021 were over 35. This demonstrates that older users comprised 62% of those who received treatment.

Additionally, in 2021, the most common age group in treatment was the cohort of individuals between the age of 35 and 39, and 40 to 44, with 386 and 348 individuals respectively. This marks a shift from previous years when the predominant age was frequently reported to be the 25 to 29 age brackets.

Those under the age of 35 who attended services for the first time decreased from 72% (177 individuals) in 2017 to 48% (187 individuals) in 2018. In 2019, however, this increased to 80% (276 individuals). In 2020, another decrease was registered with 56% (279 individuals) individuals seeking treatment for the first time being under the age of 35 years same as 2021 with 56% (232 individuals).

## 6.6 CHILDREN

42% of female individuals seeking treatment reported having children, of whom 87% indicated that they live with their children. The percentage of females reporting having children decreased by 2% from 2020 (44%) to 2021, but the percentage of females reporting living with their children remained steady at 87%.

## 6.7 EMPLOYMENT STATUS

Individuals who reported being gainfully employed in 2021 amounted to 48% (964 individuals) of all treatment entrants. When compared with previous years, figures for regularly employed individuals are slightly lower than in 2020, with 50%, and slightly higher than in 2019 with 47% and 43% in the years 2017 and 2018 respectively. In 2021, 60% of all gainfully employed individuals used their primary drug of choice daily. In 2021, individuals who reported being unemployed amounted to 34% (672 individuals). This figure is the lowest ever percentage of unemployment in recent years, as the average of unemployed people in the previous years was 40%. The percentage of unemployed individuals in treatment using drugs daily in 2021 was 73%. Students made up only 1% of the total treatment population.

## 6.8 EDUCATION COMPLETED

In 2021, 15% (304 individuals) reported stopping education at primary level, a 4% increase from 11% (214 individuals) in 2020 and a decrease of 2% from 17% (325 individuals) in 2019. Treatment entrants who reported stopping their education at secondary level amounted to 69% (1,367 individuals), a 3% decrease from 72% (1,426 individuals) in 2020 and a 12% increase from 57% in 2019. (1,107 individuals). Individuals who reported finishing higher education in 2021 was 12% (243 individuals) same as in 2020 with 12% (238 individuals) and 7% decrease when compared to 2019 with 19% (378 individuals). There were 4 individuals who reportedly never attended any

primary school. These figures do not imply that such individuals did not attend any secondary school at all, but it does give an indication that among the treatment seeking population there is a considerable number of service users who left education at a very early age.

In 2021, 54% of individuals who completed secondary school used heroin as their primary drug of choice, 4% decrease when compared to 2020 (58%), while 31% used cocaine, 2% increase when compared to 2020 (29%). Cannabis was reported at 14%, 1% increase when compared to 2020 (13%). Among those who completed higher education, 29% reported heroin as their primary drug of choice, 11% decrease when compared to 2020 (40%), while 49% used cocaine, 9% increase when compared to 2020 (40%). Cannabis was reported at 19%, an increase of 1% when compared to 2020 (18%). The primary drug for those who finished their primary years at school were 49% for heroin, an increase of 5% when compared to 2020 (44%), 35% for cocaine, a decrease of 4% when compared to 2020 (39%), and 14% for cannabis a decrease of 2% when compared to 2020 (16%).

During the same year, 62% of all those who finished primary school were daily users, an increase of 3% when compared to 2020 (59%), whilst those who finished secondary school amounted to 67% of daily users, an increase of 1% when compared to 2020 (66%). Those who finished higher education amounted to 49% of daily users, a decrease of 3% when compared to 2020 (52%).

70% (2021) of females stated to have completed secondary-level education, while 14% asserted to have completed higher-level education. Further analysis reveals that of the 70% of females completed secondary-level education, 5% were economically inactive, 8% worked occasionally, 34% were regularly employed, and 45% were unemployed. In comparison, among the 14% who reported having a higher-level education, 2% were economically inactive, 8% worked occasionally, 57% were regularly employed, and 22% were unemployed.

## **6.9 INJECTING BEHAVIOUR – ALL SUBSTANCES**

This section gives an overview of injecting behaviour among the treatment seeking population. In 2021, 1,212 (61%) individuals in services reported not having injected drugs in their lifetime. From the remaining individuals injecting drugs, 457 (23%) reported currently injecting, whilst the remaining 321 (16%) were not injecting. These figures suggest that, for the first time, the number of people injecting drugs is at its lowest ever, with a significant increase of individuals who have never injected when compared to the last years.

In 2021, there were 1,749 individuals who never shared a needle, accounting for 88% of the total treatment population. This is the same as that for the year 2020 with 1,756 individuals (89%) and an increase of 19% compared to 2019 in that 1,337 individuals (69%) never shared.

## **6.10 NATIONALITY OF TREATMENT SERVICE USERS**

The vast majority of individuals accessing local treatment services in the last 5 years were Maltese nationals, with 91% in 2017, 93% in 2018, 94% in 2019 and 2020 and 92% in 2021. The average of Maltese nationals in these last five years was of 93%.

## **6.11 DISTRIBUTION OF SERVICE USERS BY REGION**

The majority of individuals in treatment in 2021 were from the Southern Harbour area (31%) and the Northern Harbour Area (31%), as can be seen from Figure 6.3. This was followed by the South East Region (15%), the Northern region (12%), the Western region (8%), and 2% for the Gozo Region.

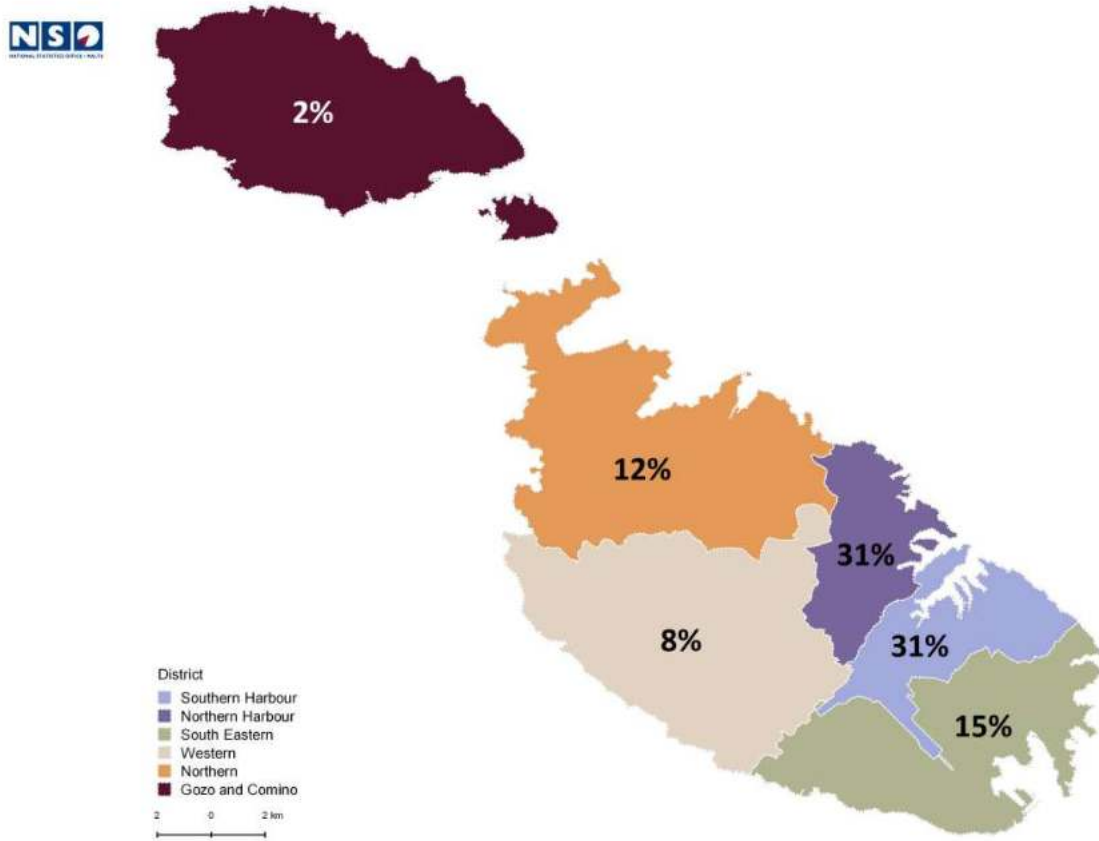


Figure 6.3: Distribution of service users by region 2021

These figures are very similar to the latest figures on record for the previous two years as can be seen from Table 6.1.

Region	2020	2021
Southern Harbour	32%	31%
Northern Harbour	30%	31%
South Eastern	15%	15%
Western	8%	8%
Northern	12%	12%
Gozo and Comino	2%	2%

Table 6.1: Service users by region 2020 and 2021

## 6.12 TAL-IBWAR ADOLESCENTS THERAPUTIC SERVICES – CARITAS MALTA

Caritas Tal-Ibwar Adolescents Therapeutic Services is a new service that is offered at a specially built facility at Tal-Ibwar limits of Siggiewi. The new service offers support and empowers 12- to 17-year-old people who are experiencing difficulties with problematic substance use. The main principle that guides all interactions at Tal-Ibwar at all levels, is that of respect towards oneself and others.

Tal-Ibwar offers three different services, namely;

- The Psycho-social and Family service
- Day service
- Residential Service

Together with the young people's families and caregivers, Tal-Ibwar supports young people by offering educational opportunities and psycho-social treatment through the day program interventions and residential programs.

The residential service at Caritas Tal-Ibwar includes:

- a thorough assessment with a focus on engagement;
- treatment retention;
- relationships;
- education;
- screening for psychiatric and psychological problems;
- trauma;
- drug and alcohol use and;
- associated health conditions.

The programme focuses on family and trauma. In fact, the therapeutic programme assesses for trauma-related symptoms whilst fostering a trauma informed and trauma-sensitive therapeutic environment and conducts family therapy interventions. Adolescents are also supported through the provision of drug screenings and substance harm awareness. Another important component of Tal-Ibwar is Aftercare planning that focuses on clinical and family issues along with the adolescent's educational, social, and recreational needs.

Psycho-social and family services provided by professionals include a holistic assessment offered to day and residential service users that integrates psychological, social work, medical aspects, and spiritual development of the individual.

Tal-Ibwar offers a mix of day and residential services to cater for clients' needs. Day Services are delivered through the learning hub. Day services combine formal and informal education with elements from psycho-educational programs aimed at substance use. At the learning hub adolescents can access an individualised and structured educational programme including accredited, modular programmes in basic literacy and numeracy amongst others. This programme is also available to referred non-resident adolescents five days a week.

On the other hand, residential Services include 24-hour care, 7 days a week. The Residential quarters include bedrooms, a kitchen, a dining / living room, a games room, a clinic, and ample use of the outdoor areas. Following a holistic assessment, adolescents are admitted within the Residence. All adolescents participating in the residential program can access the day program.

## 6.13 DRUG USE AND RESPONSES IN PRISON

The Correctional Services Agency (CSA) is made up of the Corradino main prison, the Forensic Unit (MCH), and the Centre of Residential Restorative Services (CORRs) in Mtaħleb for juvenile inmates – these institutions house both sentenced and remanded inmates. Aside from that, there are a number of inmates who are not within the confines of these institutions and are residing at rehabilitation/reintegration programmes such as Sedqa, Caritas, or RISe. The study cited below has also catered for the latter categories of inmates.

The Maltese Correctional Services Agency (CSA) randomly selected 602 individuals of the 1,593 prisoners incarcerated in 2021 to report on their history of drug use prior to incarceration. The sample was chosen using a variety of criteria and the selected inmates were required to provide their consent prior to the interview.

In 2021, the lifetime prevalence of inmates using primarily heroin outside of prison was 21%. Inmates prior use of cocaine powder was 11%, while inmates prior use of crack cocaine was 9%. Inmates who used primarily cannabis before entry was 23%. Based on the data provided, 3% of inmates were on OAT in the last 12 months and of this cohort, 14% were females and the majority 86%, were males.

## 6.14 DRUG TESTING AT CSA

The most common drug taken prior to incarceration, based on urine toxicology tests carried out on Day 0 of incarceration was cocaine, followed by marijuana. CSA have noted an overall increase in cocaine users being incarcerated across all demographics. The number of inmates who were admitted with a positive opiate result have decreased slightly. CSA upholds a stern policy on drug use inside the facility. Apart from the routine urine toxicology tests taken on admission, over 3,500 urine toxicology tests were conducted during the year in question by CSA. In the first half 2022 (from the 1st of January 2022 up until the 30th of June 2022) – 1,845 urine toxicology tests were conducted within the facility. Only 4 of those 1,845 urine tests resulted in a positive result. Screening, searches, adequate opiate replacement therapy and treatment for drug misuse plays a huge role in keeping prison relatively drug free.

## 6.15 PSYCHOSOCIAL SERVICES AT CSA

The Correctional Services Agency has confirmed that the Correctional Facilities have been in the main generally drug-free for the past three years. During this time, there was an increase in the availability of psychosocial resources. Services include the establishment of the Care, Reintegration and Education Unit (CRU), which comprises of care plan coordinators, psychology assistants, psychology practitioners, forensic psychologists, social workers, and social welfare professionals. This multidisciplinary team provides for the organisation of therapeutic sessions (both individual and group-based), care plan coordination, intervention strategies, collaboration with other disciplines including psychiatrists, and referrals to external services and agencies.

CSA has its own reintegration scheme through The Step-Out Programme (Division 7). This Division upholds the principle of restorative justice, whereby inmates undergo a number of group sessions which address psychoeducation, life skills, cognitive skills and engage in community service. A number of inmates also sit for courses which are provided by the Malta College of Arts, Science and Technology (MCAST). The establishment of this Programme has allowed CSA to deploy the services of a variety of sectors including educational institutions, church organisations, sports associations, and local councils. The availability of sectors willing to work with CSA has

provided for a more concerted effort for reintegration. Consequently, this also encourages inmates suffering from substance abuse problems to find the motivation to reform through channels such as work, education, therapy, and sports.

### **6.16 OAT AT CSA**

All the opiate agonist treatment at CSA is methadone based. There are currently 48 inmates on methadone. In totality these 48 inmates consume 1,642mL of methadone per day at present. The daily consumption is heavily audited. A total of 37 of these 48 inmates are on a stable dose whilst 11 of these 48 inmates are on a slowly decreasing methadone dosing regimen as provided by the medical incumbent.

### **6.17 DUAL DIAGNOSIS UNIT**

The Dual Diagnosis Unit (DDU) in Malta admits patients diagnosed with both a mental health disorder and a substance use disorder. Malta has established two dedicated units at Mount Carmel Hospital, one for male patients and another for female patients. Within both DDUs a total of 187 patients were admitted, with 142 patients admitted in the male DDU and 45 patients in the female DDU. The age groups of the patients in both DDU ranged from 18 to 65 with the median age of 36 years.

Data for 2021 shows that among the 187 patients, the most common primary drug reported was cocaine with 112 individuals (60%). The second most used drug was heroin with 50 individuals (27%). Looking into the individual DDUs the most common substance used among male DDU patients was cocaine with 92 individuals (65%) followed by heroin with 30 individuals (21%). Among the female DDU patients, the most used substances were cocaine with 20 individuals (45%) and heroin, also with 20 individuals (45%).



