Summary report on the Regional consultation on the finalization of a substance use information system

Amman, Jordan
16–18 September 2013
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World Health Organization
Regional Office for the Eastern Mediterranean
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1. Introduction

Substance use is a public health issue in the Eastern Mediterranean Region, accounting for a loss of 4 disability-adjusted life years (DALYs) per 1000 population and 9 deaths per 100 000 population, compared with the loss of 2 DALYs per 1000 population and 4 deaths per 100 000 population globally.

Despite the magnitude of the problem, information on substance use disorders in the Region is scarce. According to the WHO Atlas on Substance Use (2010), about 57% countries in the Region do not have a national data collection system for substance use care and treatment and only 21% of the countries in the Region produce regular annual reports on psychoactive substance use, health and/or social services utilization, available resources for substance use disorders and treatment demand indicators.

The regional strategy on mental health and substance use, adopted in 2011, calls for the Member States to develop information systems to produce standardized and comparable data based on a defined set of indicators. The WHO Regional Office for the Eastern Mediterranean, in line with the directions of the regional strategy, is supporting countries to develop a substance use information system based on existing evidence-based models, taking into account the available resources and specific constraints in the Region.

As part of these efforts, The Regional Office organized a regional consultation on finalization of the substance use information system in Amman, Jordan on 6–18 September 2013. The participants included mental health experts from countries of the Region as well as international experts. The objectives of the consultation were to review and finalize the tools and guidance for setting up a substance
use treatment information system and to develop an action plan for piloting the proposed substance use treatment information system in selected countries.

2. **Summary of discussions**

The participants identified and discussed the major challenges to the development of a substance use information system.

- Available data on prevalence of problematic substance use in the Region are scarce and outdated.
- The data collection tools and methodologies employed are neither standardized nor harmonized, making cross country comparisons difficult.
- Setting up of a comprehensive substance use observatory involves collaboration across health, social services, law enforcement and criminal justice systems.
- Technical capacities and financial resources for development/maintenance of a substance use treatment information system are limited and vary widely among countries of the Region.

They acknowledged the importance of and need for establishing a simple and standardized substance use treatment information system as a first step towards the development of national and regional substance use observatories in the medium to long term. The case registry model of substance use treatment information system was considered the most appropriate for countries in the Region as well as the one most closely aligned to the existing information systems.
Participants emphasized the importance of developing an anonymous unique identifier to protect the service users and of having a minimum data set and core list of indicators as the basis of substance use treatment information system. They noted that any initiative at the national level on establishment of substance use information system needs political will and commitment on one hand and harmonized action by all key stakeholders to ensure the sustainability of the system.

3. **Recommendations**

*To Member States*

1. Finalize the workplan for establishment of the substance use treatment information system in consultation with relevant stakeholders including mapping the existing treatment facilities, resources for data collection and compilation and review of the proposed data collection tools, indicators and minimum data.
2. Initiate a pilot project of the proposed information system in a defined catchment area with identified centers aimed at testing the feasibility, effectiveness and efficiency of the system.

*To WHO*

3. Finalize guidance on substance use treatment information systems based on the discussions held during the meeting.
4. Amend the data collection tools based on the agreed-upon minimum data set and core indicators.
5. Provide technical support to Member States to set up the pilot project for the substance use treatment information system,
specifically for building country capacity for data collection, compilation, and analysis and reporting.

6. Enhance partnership with other United Nations agencies involved in substance use policy and planning in Member States.

7. Organize a follow-up meeting to exchange experiences on the pilot and to plan for scale-up of the programme.