

# Consultation on establishing robust integrated national reporting systems for viral hepatitis

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## Introduction

Viral hepatitis is a considerable public health threat in the World Health Organization (WHO) Eastern Mediterranean Region, with hepatitis B and C causing more deaths than HIV, malaria or tuberculosis combined (1). The Region is one of the most affected in the world, with estimated of more than 15 million people chronically infected with hepatitis C and 21 million with hepatitis B (2). In addition, there is insufficient information on the magnitude of viral hepatitis in most countries of the Region due to lack of data and weak surveillance systems.

The global health sector strategy on viral hepatitis 2016–2021 has the goal of eliminating viral hepatitis as a public health problem by 2030 (3). To guide its implementation in the Region, a regional action plan for the implementation of the strategy has been developed and endorsed by Member States. Both strategy and regional action plan contain strategic directions in the area of information to understand the viral hepatitis epidemic and response, and for use as a basis for advocacy, political commitment, national planning, resource mobilization and allocation, as well as programme implementation and improvement.

In support of the strategy, WHO has developed guidance for epidemiological surveillance and programme monitoring, detailing a set of 37 hepatitis programme monitoring indicators, and identifying the global top 10 key indicators to monitor the inputs, outputs, outcomes and impact of the hepatitis response (4). This is designed to enable evidence-based planning and management of national hepatitis programmes and the monitoring of global progress in achieving targets for hepatitis.

A new global reporting tool for viral hepatitis was launched in 2018, with countries in the Region reporting on viral hepatitis for the first time (5). Although countries were very keen to report their data, there were some difficulties and challenges in collecting data at the national level. Reliable strategic information for viral hepatitis is urgently needed to generate data for advocacy, target setting, and planning in low resource settings, as well as for monitoring progress and impact. Countries therefore need to take steps to introduce, expand and/or strengthen their surveillance systems for viral hepatitis.

To support this effort, the WHO Regional Office for the Eastern Mediterranean organized a consultation on establishing robust integrated national reporting systems for viral hepatitis that was held on 10–11 December 2018 in Casablanca, Morocco (6).

The objectives of the meeting were to:

- strengthen hepatitis strategic information in countries;
- orient national focal points and experts on newly developed WHO tools and guidance on hepatitis strategic information; and
- consult on the reporting tool for viral hepatitis and on coordination between national programmes, civil society and related programmes (for example, blood safety, vaccination programmes and cancer registries) for better reporting at the national level.

In the opening session, Dr Hoda Atta, Coordinator, HIV, TB, Malaria and Tropical Diseases, WHO Regional Office for the Eastern Mediterranean, Cairo, Egypt, welcomed participants and highlighted the burden of hepatitis B and C in the Region and lack of adequate data on viral hepatitis in most countries. She stressed the importance of hepatitis elimination for progress on achieving the Sustainable Development Goals, universal health coverage and WHO's regional vision 2023, and the need to strengthen and monitor country-level responses.

## Summary of discussions

Presentations were made on global and regional hepatitis B and C epidemics and on the global health sector strategy and global monitoring and evaluation framework for hepatitis elimination. Participants highlighted the importance of standardizing national indicators to be in line with the 10 core key indicators (4), and noted the need for greater focus on strengthening mortality data for hepatitis B and C.

WHO shared the tools and guidance available to strengthen strategic information for viral hepatitis in countries, including the District Health Information Software 2 (DHIS2) module for viral hepatitis (7); tools and guidance for acute hepatitis and biomarker surveys (4); and the WHO protocol to estimate mortality from viral hepatitis (4). Participants felt that DHIS2 could be used as a platform for hepatitis surveillance where other

<sup>1</sup> This report is extracted from the Summary report on the Consultation on establishing robust integrated national reporting systems for viral hepatitis, Casablanca, Morocco, 10–11 December 2018 ([http://applications.emro.who.int/docs/IC\\_meet\\_rep\\_2019\\_22334\\_en.pdf?ua=1](http://applications.emro.who.int/docs/IC_meet_rep_2019_22334_en.pdf?ua=1)).

platforms do not exist, or as a dashboard for viewing progress using aggregate data where other electronic systems are in place.

WHO introduced the new global reporting system for viral hepatitis and the rationale behind data generation from countries, and how the data can be used to monitor country progress towards elimination. The benefit of the reporting tool for countries to better guide care interventions was outlined.

## Recommendations

### To Member States

1. Conducting regular surveillance reviews for the continuous improvement of strategic information availability and quality.
2. Ensuring that national hepatitis programmes have better coordination mechanisms with other related health departments, in addition to the private sector and civil society, for better oversight and data availability.

## References

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7. District Health Information Software 2 (DHIS 2) ([https://www.uio.no/studier/emner/matnat/ifi/INF5750/ho7/undervisningsmateriale/dhis\\_2.pdf](https://www.uio.no/studier/emner/matnat/ifi/INF5750/ho7/undervisningsmateriale/dhis_2.pdf)).

3. Identifying existing data sources by national hepatitis programmes and other stakeholders for use in generating additional data through estimations and modelling in order to achieve more comprehensive reporting at national and global levels.
4. Ensuring that national hepatitis programmes conduct regular data analysis and use outcomes for decision-making, future planning and advocacy.

### To WHO

5. Providing focused technical support on strategic information to countries, such as through holding national strategic information workshops, to strengthen surveillance systems and improve estimates for incidence and mortality.
6. Providing technical support to countries in conducting biomarker surveys.
7. Conducting advocacy for the establishment of hepatitis units at the national level for countries lacking structures and programmes.
8. Expanding DHIS2 to other countries.