



Progress report on the regional framework for action to strengthen the public health response to substance use

Introduction

1. Substance use disorders were responsible for 1 836 778 million disability-adjusted life years (DALYs) lost in the WHO Eastern Mediterranean Region in 2019, of which 1 217 868 were due to drug use disorders.¹ Of the DALYs lost due to drug use disorders, 974 914 were attributed to opioid use disorders, 48 439 were attributed to amphetamine use disorders and 39 427 were attributed to cannabis use disorders. Despite the magnitude of the problem in the Region, only 1 in 13 people who need treatment for substance use disorders receive it.

2. In light of the massive treatment gap for substance use disorders, the 66th session of the WHO Regional Committee for the Eastern Mediterranean adopted resolution EM/RC66/R.7 in 2019, endorsing a regional framework for action to strengthen the public health response to substance use. The regional framework proposes strategic interventions across the five domains of governance, health sector response, promotion and prevention, monitoring and surveillance, and international cooperation, and suggests indicators for monitoring the progress made in its implementation.

3. In 2021, WHO conducted a survey to monitor the progress made in implementing the regional framework in the countries and territories of the Region (17 responded). The results of this survey informed the regional *Substance use atlas 2021*.²

4. Resolution EM/RC66/R.7 also requested the Regional Director to report on progress made in implementing the regional framework for action to the 68th and 70th sessions of the Regional Committee, with a final report to the 72nd session.

5. This progress report presents an update on the status of implementation of the regional framework to strengthen the public health response to substance use, organized under the main domains and their related indicators.

Status and progress

Governance

6. According to the regional *Substance use atlas 2021*, 12 countries reported having a standalone law for the prevention and management of substance use disorders and 13 countries reported having a policy or plan on substance use that had been updated in since 2017.

7. Since 2021, Jordan and Oman have developed standalone policies on substance use, and Egypt, Iraq and Yemen have developed mental health policies with an integrated substance use component.

8. Djibouti and Libya are in the process of developing mental health and substance use strategies.

¹ Global Burden of Disease 2019 (GBD 2019) data [online database]. Institute for Health Metrics and Evaluation (IHME) (<https://ghdx.healthdata.org/gbd-2019>, accessed 12 April 2023).

² Substance use atlas 2021. Cairo: WHO Regional Office for the Eastern Mediterranean; 2023.

Health sector response

9. Treatment contact coverage¹ is generally very limited (1–10%) or limited (11–20%) in countries of the Region for people with opioid, cannabis and amphetamine dependence. Treatment contact coverage is generally higher for men than for women.

10. According to the regional *Substance use atlas 2021*, eight countries reported that they had at least one opioid agonist for maintenance treatment (OAMT). In the past two years, two additional countries have initiated use of OAMT, including Egypt in 2023 and Pakistan which plans to implement use of OAMT during 2023.

11. The integration of mental health and substance use disorders in primary health care services (measured using a composite score of five indicators) has improved in countries of the Region through capacity-building and the training of health care workers using the mhGAP suite of tools and guidance in Afghanistan, Jordan, Libya, Pakistan, Palestine, Sudan, Syrian Arab Republic, United Arab Emirates and Yemen.

12. Since 2021, an additional four countries (Islamic Republic of Iran, Morocco, Oman and Pakistan) are providing specialized services for children and adolescents with substance use disorders, and two more countries (Pakistan and Qatar) are providing services for women.

13. In Afghanistan, a project was initiated on revitalizing treatment and rehabilitation services for substance use disorders, funded by the European Union with WHO support.

14. The number of health workers, in all professional groups, available for the treatment of substance use disorders is generally less than 1 per 100 000 adult population across the Region.

15. Member States are creating networks for the exchange of experience and practice, and developing and implementing national action plans in line with the regional mental health and substance use frameworks.

16. A regional comprehensive training package on substance use for managers in ministries of health has been developed, and rollout is planned for 2023.

Promotion and prevention

17. According to the regional *Substance use atlas 2021*, 15 countries reported having interventions/programmes in place for the prevention of substance use and substance use disorders. Targeted multimedia campaigns were the most frequently implemented type of prevention intervention, reported by 94% of responding countries, and workplace prevention programmes were the least frequently implemented, reported by only 31% of responding countries. Of responding countries, 56% reported that they had specific prevention programmes and/or interventions for children, adolescents and young adults.

18. The school mental health package and its linked online course (published in 2021) is being implemented in Bahrain, Egypt, Islamic Republic of Iran, Jordan, Pakistan, Syrian Arab Republic and United Arab Emirates.

¹ The proportion of people with substance use disorders who are in contact with treatment services.

Monitoring and surveillance

19. The regional *Substance use atlas 2021*, which maps the capacities and resources for substance use disorders in countries of the Region, was published in 2023.

20. An increasing number of countries are requesting WHO support in implementing and evaluating national programmes for the management of substance use disorders, including Afghanistan, Egypt, Kuwait, Oman and Pakistan.

Challenges

21. Resource allocation for the prevention and treatment of substance use disorders is inadequate in many countries of the Region; available human and financial resources are not commensurate with needs.

22. Data on substance use and suicide are still patchy and unreliable in countries, partly due to sensitivities and stigma around the issues. The inclusion of relevant indicators in instruments such as the WHO STEPwise approach to NCD risk factor surveillance (STEPS) and other surveys measuring progress on the Sustainable Development Goals (SDGs) can help to overcome this challenge.

23. Mechanisms and processes are still lacking for the integration of cost-effective substance use-related interventions in universal health coverage benefit packages across all delivery platforms.

The way forward

24. WHO will continue to work with countries to collect data for the forthcoming edition of the regional substance use atlas and the SDG survey on alcohol and substance use, as well as to introduce a substance use module in STEPS and other household surveys.

25. WHO will support countries to close the treatment gap by increasing the capacity of health workers in managing substance use disorders through in-job training and creating postgraduate training (e.g. addiction-related diplomas for family physicians).

26. WHO will continue to support public health research on substance use disorders in countries of the Region.

27. WHO will continue to support countries to evaluate and improve their response to substance use disorders through the provision of technical support and guidance, and by utilizing the capacities available at WHO collaborating centres and regional centres of excellence.

28. The strengthening of technical capacities at the Regional Office and at country level, and ensuring the meaningful engagement of persons with lived experience of substance use disorders, will be critical to supporting Member States in implementing the regional framework and tackling stigma and discrimination.

29. WHO will establish a regional mental health technical advisory group to support accelerated implementation of global action plans and regional frameworks on mental health and substance use disorders.