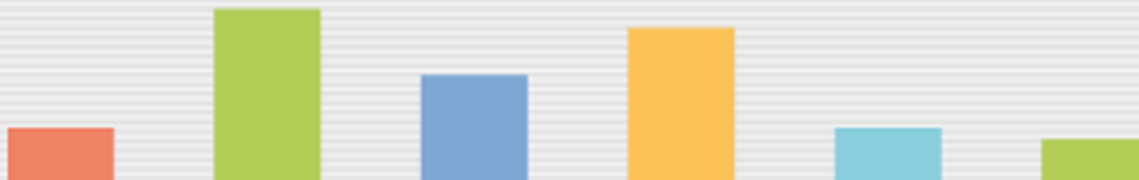




European Monitoring Centre
for Drugs and Drug Addiction

Assessment of the implementation of the key indicators

Short briefing - Facilitated discussions in 3 groups
DRID national expert meeting 7 June 2016



The 5 key indicators

One of the pillars of the monitoring



Rationale for the assessment of the implementation of the indicators

- **Aim of the assessment**
 - improve data quality, implementation, and ultimately utility
- **Objectives**
 - To develop harmonised/consensual assessment tool and process
 - And together with the national focal points/experts, provide every 3 years a national assessment to the management board
- **Criteria established in 2008**
 - Process
 - Data Quality



Criteria

Process

- National Activities
- Respect of deadlines
- Resources
- Assessment of data quality
- Legislation/Legal basis
- Progress on-going

Data Quality

- Data availability (national)
- Harmonisation with EMCDDA guidelines
- Timeliness
- Coverage
- Consistency

Operational
definitions

Rating

Minimum
Requirements-
Desirable
implementation



Template

Categories	Time period	Question number	Operational definitions	Minimum requirements	Desirable implementation	Rating
Data availability at national level	Reporting year or previous two calendar years	1	Data on HIV, HCV and HBV prevalence in IDUs provided to EMCDDA for the reporting year or preceding 2 calendar years	At least one HIV and one HCV data point for the reporting year or preceding 2 calendar years	HIV, HCV and HBV data available in reporting year and preceding 2 calendar years	
		2	National HIV case reports and HCV and HBV notifications , including data specific for injecting drug users, provided to the ECDC / WHO-Europe / EMCDDA for the reporting year or preceding 2 calendar years	National HIV case reports data provided to ECDC / WHO-Europe for the current reporting year or preceding 2 calendar years	National HIV case reports data provided to the ECDC/ WHO-Europe and HCV and HBV notifications provided to EMCDDA for the reporting year and preceding 2 years	



Objectives for today

- Assessments in 2009 – 2012 – 2015
- Timely ‘consultation’ or ‘brain storming’ to
 - discuss the DRID implementation assessment, including the process, the tool itself and its impact
 - consider the strengths and weaknesses of the current assessment, including overall usefulness (nationally & EU level)
 - consider the appropriateness of the dimensions covered (prevalence, incidence, & behavioural data)
 - suggest general areas for improvement
- Feedback generated will be used to inform work by EMCDDA to develop and propose improvements



Questions to address

Strengths

Weaknesses

Area for improvement



Process

- **Facilitated discussions from 14:15 to 15:15**
- With Ruth Zimmerman - Room 106 – Group 1
- With Magda Rosinska - Room 107 – Group 2
- With Elena Alvares Room – 012 – Group 3
- Please see lists of participants
- **Feed-back in plenary from 15:15 to 16:00**





More slides

to keep for the general discussion if useful
not for the briefing



Main achievements (2015 results)

- **General positive results**

- Good level of implementation of the indicators in all countries
- Improved data availability in all indicators and all countries
- Improved data comparability
- Increase knowledge and clarity on methodologies implemented

- **Achievements by Indicator:**

- GPS: Greater comparability and compatibility with the EMQ
- PDU: Increase data availability, 24 countries providing estimates
- TDI: Completeness and internal consistency; harmonisation with TDI ver 3.0
- DRD: Availability of data both for overdose deaths and mortality cohort studies
- DRID: New estimates provided, especially in countries with recent HIV outbreaks



Main issues

- **General critical issues:**

- Country's specific problems
- Timeliness
- Data compatibility across countries
- Effect of economic context on National Focal Point and data collection

- **Main issues by indicator:**

- GPS: maintain series of surveys, response rate, need to adapt to new methods (targeted surveys, internet, etc.)
- PDU: converge of estimates, little cross countries comparability (different methods used), difficult to use PDU as denominator of needs
- TDI: coverage and information on representativeness of the TDI data
- DRD: underreporting, need to make more use of toxicological information, updated mortality cohort studies
- DRID: lack of sufficient data on HIV, HBV and HCV infectious in a relevant number of countries and data often from small samples; need to consider drug-mediated sexual risks



Moving forward....

- Useful to increase awareness on data quality and implement necessary changes
- Look at main critical points in general (timeliness, comparability, data availability)
- Address critical points by indicator, working towards improvement
- Address specific issues bilaterally with countries, including availability of resources and of data in some areas
- Consider emerging needs and changing context (e.g. Internet role in surveys, treatment, etc..)
- Make necessary adaptation to the assessment process, considering changes in the current context and lessons learned from the three exercise



Key indicator - 3 Groups - Tuesday 7/6 from 14:15 to 15:15

Group 1 – Room CDS 106 -Viv Hope		Group 2 – Room CDS 107 – Isabelle Giraudon		Group 3 - Room 012 – Eleni Kalamara Dagmar Hedrich	
Austria	Irene Schmutterer	Belgium	Jerome Antoine	Bulgaria	Violeta Bogdanova
Finland	Marko Markus	Cyprus	Ioanna Yasemi	Czech Republic	Barbara Janikova
Denmark	Jan Fouchard	Estonia	Maris Salekesin	Finland	Kirsi Liitsola
France	Anne-Claire Brisacier	Germany	Esther Dammer	Greece	Anastasios Fotiou
Germany	Ruth Zimmerman	Ireland	Margaret Curtin	Italy	Barbara Suligoj
Hungary	Anna Tarján	Lithuania	Valerij Dobrovolskij	Luxembourg	Carole Devaux
Latvia	Anda Kivite	Finland	Rikard Rykkvin	Portugal	Domingos Duran
Netherlands	Esther Croes	Poland	Magdalena Rosinska	Slovakia	Zuzana Alexandercikova
Portugal	Graça Vilar	Romenia	Lavinus Sava	Spain	Elena Alvarez
Slovenia	Tanja Kustec	Sweden	Maria Axelsson	Turkey	Mustafa Kemal Çetin
Turkey	Elif Mutlu	Bosnia and Herzegovina	Višnja Banjac	United Kingdom	Fortune Ncube
Albania	Roland Bani	Serbia	Danijela Simic	Kosovo	Shemsedin Dreshaj
Macedonia	Meri Trajkovska	Israel	Rebecca Rich	Armenia	Karine Poghosyan
Georgia	Lasha Kiladze	Switzerland	Axel Schmidt	Moldova	Valeriu Plesca
Ukraine	Ruslan Meleshko	Spain	Percy Davila	UK (Scotland)	Louise Carroll
WHO	Antons Mozalevskis	ECDC	Erika Duffell	France	Anne Batisse

