

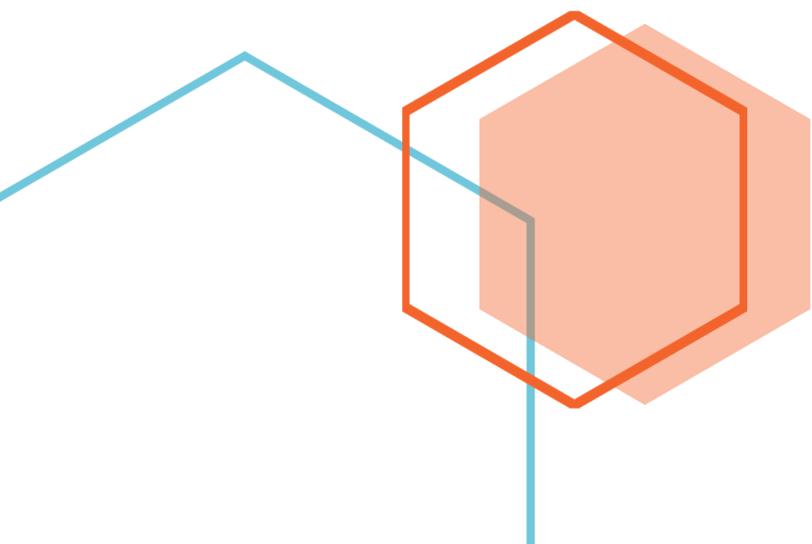


AFRICA HEALTH
ORGANISATION



PSYCHOACTIVE SUBSTANCE USE

AHO PLAN OF ACTION ON PSYCHOACTIVE
SUBSTANCE USE AND PUBLIC HEALTH





Foreword

Substance use and related disorders are included in the AHO's Strategic Plan 2020–2030. AHO approved a hemispheric drug strategy that includes five core areas: institutional strengthening, demand reduction, supply reduction, control measures, and international cooperation. The development of complementary approaches would enable resources and expertise to be shared, so as to promote a public health approach that is centered on health as a human right and on the use of evidence-based policies and interventions.

In 2016, the AHO Health Congress adopted a public health strategy to respond to the health problems associated with the use of psychoactive substances in Africa. The strategy with a public health approach focused on prevention, early intervention, treatment, rehabilitation, social reintegration, health systems management and reduction of adverse consequences of substance use comprises five strategic objectives: (a) development of national policies and resource allocation; (b) promotion of universal prevention; (c) early intervention, care and treatment systems; (d) research, monitoring, and evaluation; and (e) development of strategic partnerships. This document presents a regional plan of action for the implementation of the strategy over the next 10 years.

AHO is adapting guidelines and training materials for the management of alcohol and substance use disorders as a component of resources for other mental health priority conditions, so that alcohol and substance use disorders are better integrated at national level, and can utilize complementary and innovative models for capacity building of health professionals.

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Foreword by President

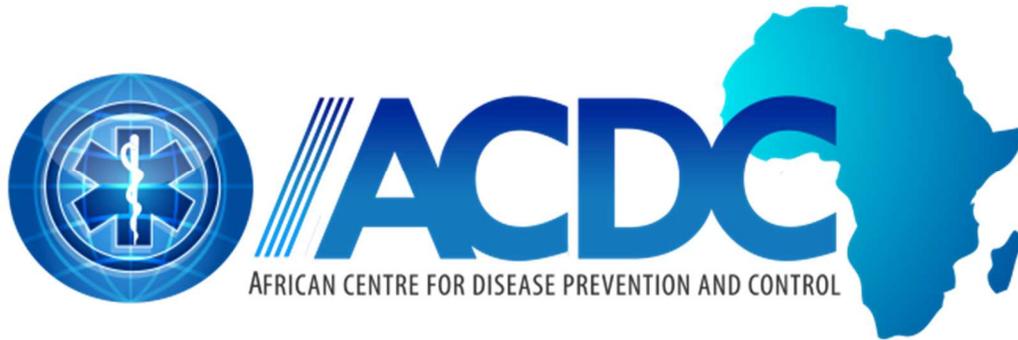


Most countries have a limited number of health professionals and services specialized in substance use. The most feasible way to improve treatment coverage is to integrate prevention and treatment services for substance use disorders into health and social welfare systems based on primary health care and the criminal justice system and to develop the capacity of the professionals and nonprofessionals involved to provide adequate care (4).

In addition, psychotropic medications also must be adequately prescribed and regulated, in order to significantly reduce their non-medical use and to increase their availability where and when they are needed. A comprehensive demand reduction response is fundamental for the sustainable development



Partners





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Introduction

1. In 2016, the AHO Health Congress adopted a public health strategy to respond to the health problems associated with the use of psychoactive substances in Africa. The strategy with a public health approach focused on prevention, early intervention, treatment, rehabilitation, social reintegration, health systems management and reduction of adverse consequences of substance use comprises five strategic objectives: (a) development of national policies and resource allocation; (b) promotion of universal prevention; (c) early intervention, care and treatment systems; (d) research, monitoring, and evaluation; and (e) development of strategic partnerships. This document presents a regional plan of action for the implementation of the strategy over the next 10 years.

Background

2. Substance use and related disorders are included in the AHO's Strategic Plan 2020–2030. AHO approved a hemispheric drug strategy that includes five core areas: institutional strengthening, demand reduction, supply reduction, control measures, and international cooperation. The development of complementary approaches would enable resources and expertise to be shared, so as to promote a public health approach that is centered on health as a human right and on the use of evidence-based policies and interventions.

Situation Analysis

3. A detailed situation analysis was included in the approved *Strategy on Substance Use and Public Health*. Since then, AHO published a report on resources for the prevention and treatment of substance use disorders which included a regional analysis based on questionnaires completed by 41 countries. Additional information also has been available through AHO publications, as well as regional and global reports and in scientific journals.

4. Most countries have a limited number of health professionals and services specialized in substance use. The most feasible way to improve treatment coverage is to integrate prevention and treatment services for substance use disorders into health and social welfare systems based on primary health care and the criminal justice system and to develop the capacity of the professionals and nonprofessionals involved to provide adequate care (4). In addition, psychotropic medications also must be adequately prescribed and regulated, in order to significantly reduce their non-medical use and to increase their availability where and when they are needed. A comprehensive demand reduction response is fundamental for the sustainable development

5. AHO is adapting guidelines and training materials for the management of alcohol and substance use disorders as a component of resources for other mental health priority conditions, so that alcohol and substance use disorders are better integrated at national level, and can utilize complementary and innovative models for capacity building of health professionals.

6. Finally, the basis for a public health approach to drug policy and demand reduction is anchored in the book *Drug Policy and the Public Good* and other regional and global documents. These publications comprehensively review research on the effectiveness of drug policies to reduce substance use and related disorders.



Proposal

7. The proposed plan of action for 2020–2030 will address each one of the strategic areas included in the strategy on substance use and public health.

Strategic Area 1: Development and implementation of national public health policies, plans, laws, and resource allocation compatible with the magnitude of the substance use problem.

Objective 1.1: To have national substance use health policies and plans in all countries as part of general health policies, plans, and laws. Such policies and plans should ensure: that they complement and coordinate with the overall national drug policy, that they support public health goals, reduce disparities, include a gender perspective, and that they adhere to the applicable human rights instruments, drug control conventions, declarations, and recommendations of the United Nations and inter-American systems.

Indicator

Number of countries that have substance use policies integrated into their national health plan. (Baseline: 11. Target: 16 by 2030.)

National Level Activities

- 1.1.1 Cooperate technically in the design, review, updating, reformulation, or improvement of national policies and plans on substance use to include a public health perspective.
- 1.1.2 Promote cooperation and coordination with national drug commissions so that public health goals in national drug policies are supported and included.

Local Level Activities

- 1.1.3 Identify a focal point or agency dedicated to substance use issues within the Ministry of Health to coordinate the health sector's response, in coordination with other government sectors and civil society organizations.
- 1.1.4 Cooperate with national drug commissions or equivalent bodies at the national level, to ensure that drug policies have a positive impact on public health.

Objective 1.2: To strengthen prevention, screening, and early intervention, treatment, rehabilitation, social reintegration, and related support services by promoting the health and social well-being of individuals, families, and communities and reducing the adverse consequences of substance use, particularly among high-risk groups.

Indicator

Number of countries that have widely implemented evidence-based programs on prevention, screening, early intervention, treatment, rehabilitation, social reintegration, and other health services for reducing the negative consequences of substance use (Baseline: 0. Target: 10 by 2030.)

National level activities

- 1.2.1 Facilitate the compilation and dissemination of innovative prevention and care models, best practices in various aspects of demand reduction, including reduction of the adverse consequences of substance use and health system integration.



1.2.2 Establish a regional network on substance use and public health to share and exchange information and expertise across the Region and facilitate collaboration among countries.

Local Level Activities

1.2.3 Implement screening and early intervention programs across a variety of health care settings, particularly primary health care.

1.2.4 Develop and evaluate innovative approaches to prevention, early intervention, treatment, rehabilitation, and/or social reintegration.

1.2.5 Document and disseminate best practices and lessons learned from the evaluation of policies, programs, and services.

Objective 1.3: To mobilize the financial and human resources necessary for the implementation of planned activities and to ensure that such resources are used primarily in community-based outpatient primary care services and integrated into the general health care system.

Indicator

Number of countries with a documented budget dedicated to health and social services for disorders related to the use of psychoactive substances. (Baseline: 10. Target: 15 by 2030.)

National Level Activities

1.3.1 To increase the visibility of and commitment to a public health response to substance use, and to increase allocation of resources to address related problems.

Local Level Activities

1.3.2 Identify financial resources for the implementation of plans and activities related to substance use and public health from national budgets dedicated to drug policy and control, as well as general health budgets.

1.3.3 Ensure that resources will be used primarily in community-based primary care outpatient services and will be integrated into the general health care system.

Strategic Area 2: Promotion of universal prevention of substance use, emphasizing the psychosocial development of children and young people.

Objective 2.1: To promote evidence-based universal prevention models and best practices that will support the psychosocial and economic development of young men and women in particular and enhance access to appropriate and evidence-based health information and services.

Indicators

- Number of countries implementing evidence-based, universal, substance use prevention programs. (Baseline: 8.6 Target: 15 by 2030.)

- Number of countries which have evaluated their evidence-based, universal, substance use prevention programs. (Baseline: 3. Target: 8 by 2030.)

National Level Activities

2.1.1 Disseminate evidence-based universal prevention programs and models throughout the Region.



2.1.2 Cooperate with countries on the development of parenting skills programs, the prevention of intrafamily violence, and the prevention of violence against children and adolescents, to decrease or delay substance use or progression to dependence.

2.1.3 Cooperate with countries on the assessment of selective intervention programs aimed at identifying and intervening with persons at risk.

Local Level Activities

2.1.4 Revise and evaluate prevention programs regarding their ability to delay or decrease substance use in the short and long term, including their cost-effectiveness.

2.1.5 Develop and implement universal prevention programs aimed at the healthy development of young men and women.

Objective 2.2: To promote community-level awareness of substance use and related disorders through education, training, and advocacy programs.

Indicator

Number of countries with at least one national advocacy event per year
(Baseline: Target: 20 by 2030.)

National Level Activities

2.2.1 Disseminate accurate and up-to-date information on substance use and related problems in the Region, disaggregated by sex and ethnic group, as well as on advances in neuroscience, social, and behavioural studies.

2.2.2 Develop information kits on the nature of substance use disorders and other related problems, age and gender differences, their link to child and adolescent development, mental disorders and the social determinants of health.

2.2.3 Organize awareness and advocacy events on substance use and public health for the celebration of International Day against Drug Abuse and Illicit Trafficking.

Local Level Activities

2.2.4 Collect, collate, and disseminate epidemiological data on substance use and related problems, disaggregated by sex and ethnic group.

2.2.5 Promote community-based programs that have clear objectives, a designated target population, and an evaluation component.

2.2.6 Support community-based initiatives to raise awareness of the nature of substance use problems, and prevent discrimination against people with substance use disorders.

Strategic Area 3: Promotion of early intervention in primary care settings and development of treatment systems linked to primary health care and related services.

Objective 3.1: To provide a package of essential, evidence-based interventions at the various levels of the health care system that can be adapted by Member States, emphasizing primary health care.

Indicator



- Number of countries implementing essential, evidence-based interventions based on AHO tools and materials. (Baseline: 0. Target: 10 by 2030.)

National Level Activities

- 3.1.1 Adapt WHO tools and materials to the Region's reality and needs, and disseminate them.
- 3.1.2 Collaborate with other regional organizations in the dissemination of evidence-based interventions at various levels of the health care system.

Local Level Activities

- 3.1.3 Adapt and utilize evidence-based information and tools for developing services for the prevention, treatment, and care of substance use disorders.
- 3.1.4 Scale up the provision of services based on primary health care and in connection with other social services aimed at integrating health care with social reintegration and community participation.

Objective 3.2: To provide tools for training and certifying the health work force to deal with substance use and related problems, including good prescribing practices.

Indicator

Number of tools developed to assist countries in the training and certification of professionals, accreditation of services, and the development of norms and standards for care and the appropriate prescription of psychoactive drugs.
(Baseline: 0. Target: 5.)

National Level Activities

- 3.2.1 Develop and disseminate tools and information on needs assessment and on effective programs of prevention, screening, and early intervention (before people become dependent), treatment, rehabilitation, social reintegration and related support services, including those aimed at reducing negative consequences related to substance use.
- 3.2.2 Cooperate with countries to build capacity for prevention, screening and early intervention, treatment, rehabilitation, social reintegration and related support services, including those aimed at reducing the negative consequences of substance use.
- 3.2.3 Develop training tools and standards for national accreditation and certification of the health work force on issues related to substance use and associated problems.

Local Level Activities

- 3.2.4 Implement training and accreditation mechanisms for the health work force and others (e.g., nonprofessionals) involved in the provision of services for substance use disorders that follow clear standards of care and adhere to applicable human rights standards.
- 3.2.5 Establish mechanisms for regular assessment of the quality of services provided to individuals with substance use disorders, including the protection of applicable human rights.

Objective 3.3: To provide tools, training, and support to unpaid health care providers and family members.



Indicator

Number of countries utilizing AHO technical support and or tools to train unpaid health care providers (Baseline: 0. Target: 5 by 2030.)

National Level Activities

3.3.1 Develop training materials and tools for unpaid health care providers and nonprofessionals involved in the care of people with substance use disorders.

3.3.2 Develop information tools and materials to support families and other caregivers living with someone with a substance use disorder.

Local Level Activities

3.3.3 Support families and caregivers of people with substance use disorders in the provision of health and social care, especially through the prevention of any discrimination they may experience.

3.3.4 Develop support and care services for families affected by substance use disorders.

Objective 3.4: To review and update curricula for health care and other related professions at the graduate and post-graduate levels and in continuing education programs on topics related to substance use.

Indicator

Number of countries with updated curricula for health care professions (Baseline: 2012 national curricula. Target: 5 by 2030.)

National Level Activities

3.4.1 Develop minimum curriculum standards for health professions and related areas involved in the prevention and care for substance use disorders.

3.4.2 Develop basic curriculum standards for non-health professionals involved in prevention and care for substance use disorders.

Local Level Activities

3.4.3 Revise and update medical and other health professionals' curricula at undergraduate and graduate levels to include issues related to psychoactive substance use problems, policies, and effective interventions.

3.4.4 Establish basic requirements and standards for the certification of professionals and nonprofessional for working in the field, particularly in the area of treatment for substance use disorders.

Objective 3.5: To promote adequate availability of internationally controlled psychoactive drugs for medical and scientific purposes, while preventing their diversion and use for non-medical purposes.

Indicator

Number of countries with functioning regulatory systems for internationally controlled psychoactive drugs that ensure an adequate provision of such medications while minimizing their non-medical use. (Baseline: 15.8 Target: 20 by 2030.)

National Level Activities



3.5.1 Develop tools, materials, and training for the appropriate prescription and dispensing of controlled psychoactive drugs for medical and scientific purposes.

Local Level Activities

3.5.2 Support international and national organizations in properly needs for controlled medicines, in order to ensure availability for medical needs.

3.5.3 Develop national guidelines for the appropriate prescription and dispensing of controlled psychoactive drugs for medical and scientific purposes.

3.5.4 Train qualified health professionals on the adequate management of controlled substances for medical and scientific use.

3.5.5 Support activities aimed at preventing unregulated markets for these substances and the misuse of prescription medications at home (access by other family members, use other than for reasons prescribed, and disposal of unused prescriptions).

Strategic Area 4: Research, monitoring, and evaluation.

Objective 4.1: To develop the capacity for research and the monitoring and evaluation of substance use prevention, early intervention, treatment, rehabilitation, social reintegration, and related support services aimed at reducing the negative consequences of substance use.

Indicator

• Number of countries that utilize standardized tools to assess and monitor their responses to substance use problems. (Baseline: 21. Target: 25 by 2030.)

National Level Activities

4.1.1 Develop a regional information system on substance use and public health.

4.1.2 Promote research with a gender perspective regarding substance use, norms, substance use problems, access to health and social services, and treatment and care service responses.

4.1.3 Build capacity for research and publication in scientific journals in middle- and low-income countries of the Region.

4.1.4 Develop tools for monitoring and evaluating programs and build capacity for monitoring and evaluation that can be tailored to the economic and cultural conditions of each country.

Local Level Activities

4.1.5 Include monitoring mechanisms to assess the public health impact of programs and policies related to substance use.

4.1.6 Build national capacity for research and the monitoring and evaluation of programs and policies, based on the economic and cultural conditions of its subpopulations.

Objective 4.2: To improve the data on substance use in national health information systems, ensuring regular collection and analysis of core data relevant for decision-making and for monitoring changes over time.



Indicator

Number of countries with a national health information system that includes indicators of substance use and its impact on health, disaggregated by sex and age group (Baseline: 0. Target: 5 by 2030.)

National Level Activities

4.2.1 Cooperate with countries on the inclusion of indicators of substance use and health problems into national health information systems and drug information systems, disaggregated by sex and ethnic group.

Local Level Activities

4.2.2 Include health indicators into national health information systems and drug information systems to ensure coherence in the health data.

Objective 4.3: To promote research and surveillance in Member States in order to create an evidence base for effective intervention strategies and to monitor substance use trends in Africa.

Indicator

Number of new research studies undertaken to assess either the nature, dimension, or impact of substance use disaggregated by sex and age group, or studies on the effectiveness of interventions. (Baseline: N/A. Target: 10 studies by 2030.)

National Level Activities

4.3.1 Promote research and technical cooperation on areas related to substance use and public health.

National Level Activities

4.3.2 Support relevant research for public health on substance use issues.

4.3.3 Promote health research, using quantitative and qualitative methodologies in the field of psychoactive substance use prevention, treatment, and care.

4.3.4 Encourage the documentation and dissemination of new results from research and evaluation studies in scientific forums, journals, and other media.

Objective 4.4: To compile and disseminate evidence-based information and materials on substance use issues, such as evaluations of policies and programs at national and local levels.

Indicator

• Number of regional-level publications disseminated with evidence based information on substance use, related problems, and/or effectiveness of interventions. (Baseline: 3. Target: At least one regional-level publication every two years.)

National Level Activities

4.4.1 With the support of collaborating centres, compile, evaluate, and disseminate information and best practices on policies and programs on substance use and related problems with an impact in public health.

Local Level Activities



4.4.2 Document experiences on and best practices in policy, program development and/or implementation, for dissemination at regional and national levels.

Strategic Area 5: Strategic partnerships.

Objective 5.1: To create and strengthen partnerships with other stakeholders to achieve a comprehensive public health response to substance use problems in Africa.

Indicator

• Number of joint activities undertaken with other international organizations and partners. (Baseline: 2. Target: 8 joint activities by 2030.)

National Level Activities

5.1.1 Coordinate activities and other international organizations, in order to ensure that public health goals and evidence-based programs and policies are implemented.

5.1.2 Promote partnerships with civil society organizations, and others with an interest in a public health approach to substance use problems.

5.1.3 Promote partnerships with various ethnic and cultural groups in order to develop an intercultural approach to substance use and public health responses that are inclusive and equitable.

5.1.4 Develop a network of collaborating centres, centres of reference, and research institutions.

Local Level Activities

5.1.5 Coordinate activities at the country level across different areas of government, civil society organizations, and with various international organizations, in order to avoid the duplication of efforts and contradictory messages to the public and policymakers.

Monitoring and Evaluation

8. This Plan of Action contributes to the achievements of AHO's Strategic Plan's Strategic Objectives 3 and 6. The specific Africa-wide Expected Results to which this Plan of Action contributes. The monitoring and assessment of this Plan will be aligned with the Organization's results-based management framework as well as its performance, monitoring and assessment processes. In this regard progress reports will be developed based on information available at the end of a biennium.

9. With a view to determine strengths and weaknesses of the overall implementation, causal factors of successes and failures, and future actions, both a midterm and final evaluation will be conducted.



Summary

Recognizing the burden of morbidity, mortality, and disability associated with substance use disorders in the world and in Africa, specifically, as well as the existing gap in treatment and care for persons affected by such disorders;

Understanding that approaches related to prevention, screening, early intervention, treatment, rehabilitation, social reintegration, and support services are necessary actions to reduce the adverse consequences of psychoactive substance use;

Recognizing that these approaches require improving access to health care services, promoting the health and social well-being of individuals, families, and communities, while protecting and promoting the right of everyone to the enjoyment of the highest attainable standard of physical and mental health;

Observing that the *Strategy on Substance Use and Public Health* adopted in 2016 sets out the principal areas of work to be addressed and identifies areas for technical cooperation to address the varying needs of Member States with regard to substance use,



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