

A PRISON-TAILORED MONITORING AND EVALUATION FRAMEWORK FOR VIRAL HEPATITIS B AND C IN THE EU

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Background:

In 2016 the WHO launched the global health sector strategy for the elimination of viral hepatitis alongside a dedicated monitoring&evaluation (M&E) framework to assess progress at national, regional and global levels. Despite being a priority setting for viral hepatitis elimination in Europe, prisons are rarely integrated into national monitoring efforts. We aimed to develop a minimum set of standardised indicators and a M&E framework for assessing viral hepatitis burden and coverage of prevention and control measures in prison settings.

Methods:

We adapted the WHO M&E framework for viral hepatitis elimination to the prison context using an iterative process: 1.Consultation with a group of European experts; 2.Definition of indicators and metadataset; 2.Field testing of the indicators using EMCDDA data sources; 3.Refinement of the indicators and M&E framework. The resulting framework was assessed for: timeliness; coverage; validity; completeness.

Results:

Preliminary M&E framework tailored for prison settings included 43 indicators covering four domains: context and needs; prevalence; prevention; continuum of care; impact. Through field testing, 11 indicators were dropped due to data unavailability. 15 of the retained 32 indicators were defined as core. For most indicators, the information collected scored high for timeliness and coverage, while completeness was scarce. Data points were available for most countries for at least some core indicators, with outcome indicators having the lowest completeness. Indicators validity was compromised by the lack of optimal denominator data.

Conclusion:

Availability of health data from prison settings is scarce, hampering current capacity to monitor progress towards viral hepatitis elimination in this context and its relative contribution to global health goals attainment. A standardised M&E framework tailored to this setting, by creating the need for accurate health data, may foster the improvement of prison health information system and its integration into broader national systems.

Keywords:Prison; Health services and systems; Hepatitis B; Hepatitis C