A04: Drug-related mortality

Purpose of collecting these data:

The main purpose of this module is to collect information on drug-related mortality, on the main ways drugs cause death, by looking at the main drugs that are the underlying cause of deaths and population groups that are most susceptible to drug-related mortality.

The module collects data on extent and trends of mortality directly related to drug use. Data are disaggregated in relation to main types of drugs causing death and within the overall number of drug-related deaths, data are also collected on drug-related poisoning (fatal overdoses) and on deaths related to polydrug use. Given the importance of developing policies targeted at population groups which are more susceptible to drug-related deaths, the module includes data on socio-demographic characteristics including age, sex, and living and working conditions of people whose use of drugs has led to death.

Item	Type	Description	Response Options	Definitions / Specific instructions	Disaggregation	Metadata	Justification
Ranking and trends in mortality	I	Ranking of drug-related deaths by primary drug, the use of which is the main underlying cause leading to death.	1,2,3,…	Glossary	• Drug Group: cannabis, opioids, cocaine, ATS, "ecstasy"-type stimulants, tranquilizers and sedatives, hallucinogens, solvents and inhalants, NPS, other drugs • Drug Type: heroin, opium, pharmaceutical opioids, other illicit opioids, amphetamines, prescription stimulants, other stimulants, benzodiazepines, barbiturates, other sedatives and tranquilizers. • Sex	Information on the procedure used for the qualitative assessment: specify number of experts, affiliation, method (e.g. Delphi). Primary sources used for the qualitative assessment: • national data (specify collection method) • periodic government report (link) • specific study (link) • expert assessment • other (specify)	**UNGASS:** Para 1 m **PoA:** Para 2. **EWG**: This topic aims to continue to report on direct drug-related deaths (mainly FOs) while strengthening the need for low-cost capacity-building on reporting on deaths. – disaggregate mortality data by gender and age - adopt a flexible approach in order to improve the response rate across indicators and measures, so that every country can at least report some
		Trends in mortality by primary drug relative to the previous reporting year.	Large increase, Some increase, Stable, Some decrease, Large decrease, Unknown	Glossary			

New developments	I	Description of recent changes in terms of drug-related mortality, e.g.: - major increase or decrease of deaths caused by a specific drug, -any structural shocks (suddenly emerging combinations of drugs causing significant changes, etc.).	Free text	Developments for specific drug groups/types to be provided if the information is available.	*Not applicable*		basic information on drug mortality Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol
Qualitative assessment of polydrug use	II	Specification of the most common combinations of drugs causing drug-related deaths	List of drugs	Drugs to be chosen from a dropdown menu	• Primary Drug type (list *as defined above)* • Secondary drug		
Availability of data on drug-related mortality	I	Availability of quantitative data on drug-related deaths	Yes, No, Unknown	If the answer to the question is NO, the respondent skips the next part.	*Not applicable*	*Not applicable*	
Number of drug-related deaths and accidental poisoning	II	Data on total for the reported period: • Drug related deaths • Proportion of drug-related poisoning as a percentage of total drug-related deaths	Statistical data	**Instruction:** Data on drug-related deaths with all the disaggregations to be provided; in addition, percentages for drug-related poisoning are to be provided (accidental, intentional, undetermined intent) **Direct drug-related deaths:** ICD 10 (if another revision is used, country is to specify): Deaths where the main underlying cause leading to death was the intake of illicit drugs and psychotropic substances. This includes deaths defined under ICD 10: chapter V "Mental and behavioural disorders": blocks F 11-F19-*mental and behavioural disorders due to psychoactive substance use*. It also includes acute poisoning as defined in the below column. Note that indirect deaths such as Hepatitis C, HIV/AIDS, car accidents or violent deaths under the influence of drugs	• Type of disorder • Primary drug type (list *as defined above)* • Secondary drug type • Age: <18, 18-24, 25-64, >65 • Sex Note: Tramadol and Fentanyl to be explicitly given as an option.	• Geographical coverage: National vs sub-national, # provinces / states, % of national target population covered • Period of estimate • Data source • Expert opinion: Evaluation of the reported figures relative to the total number of people in treatment Low <=25% Medium 25-75% High =>75 %	

| | | | | should not be included in this variable.

Acute poisoning (fatal overdoses): deaths that occur due to poisoning by drugs and or psychotropic substances. These include deaths defined under ICD 10 chapters:
- XX "External causes of morbidity and mortality: Event of undetermined intent": _accidental_ poisoning: blocks X41-42, _intentional self-poisoning: X61-62, poisoning: event of undetermined intent: Y11, Y12_. | | | |

				- blocks are to be used, when applicable (ICD 10th revision implemented), in combination with chapter XIX "Injury, poisoning and certain other consequences of external causes": blocks T 40, T 42 and T43-*poisoning by narcotics, psychotropic substances and psychedelics.* *Polydrug use:* Cases where drugs other than the primary drug are counted in the reported figures. **Instructions:** ICD (10th revision) definitions to be used. For countries in which ICD* has not yet been implemented, national definitions are to be specified and used. **Instructions** Drug-related deaths include acute poisoning. However, acute poisoning is also to be specified separately.		
Drug-related deaths and accidental poisoning: Polydrug use	II	Cases where drugs other than the primary drug are counted in the reported figures.	Statistical data	**Polydrug use:** The use of a main drug in combination with additional drug/s. **Instruction** Specification of whether percentages or absolute figures are provided (dropdown menu)	• Drug group (list *as defined above*)	• Geographical coverage: National vs sub-national, # provinces / states, % of national target population covered • Year of estimate • Data source

		Proportion of drug-related deaths where drugs other than the primary drug are counted in the reported figures.	Statistical data			• Expert opinion: Evaluation of the reported figures relative to the total number of people in treatment Low <=25% Medium 25-75% High =>75 %	
Drug-related deaths and accidental poisoning in sub-population groups	III	Data on the number of reported drug-related deaths by socio-economic characteristics.	Statistical data	Total number of deaths by sub-population groups. If no quantitative data is available, qualitative data to be provided: *Sources WHO UNODC International Standards for the treatment of drug use disorders, UNODC 2016*: 5.1; 3.1.7 Instruction: If no quantitative data is available, an assessment of the percentage of deaths in the mentioned groups is to be provided	Specific groups: • Persons with disabilities • People living in rural areas • Indigenous people • Migrants/internally displaced persons • Homeless people • Sex workers • Other (specify)	• Geographical coverage: National vs sub-national, # provinces / states, % of national target population covered • Year of estimate • Data source • Expert opinion: Evaluation of the reported figures relative to the total number of people in treatment Low <=25% Medium 25-75% High =>75 %	**PofA:** 6a 8b
Availability of studies / research / surveys	III	Link to any studies, reports, surveys or other research on drug use (including poly-drug use) in the general population, and/or within specific groups of people in vulnerable situations in your country in the last 5 years	Provide link		*Not applicable*	*Not applicable*	

* International Statistical Classification of Diseases and Related Health Problems 10th Revision (ICD-10)-WHO Version for; 2016: https://icd.who.int/browse10/2016/en#/