

# World Hepatitis Alliance

QUARTERLY REPORT  
JANUARY – MARCH 2016



[www.worldhepatitisalliance.org](http://www.worldhepatitisalliance.org)

## Strategic Goal 1

Many more countries with effective comprehensive national hepatitis strategies in place or at least in development.

### Action 1.1

When no patient groups exist, respond to requests from national governments to support them in the development of effective and funded national plans

### Action 1.2

Upon request, work directly with our members to support them in their collaboration with national governments in the development of effective and funded national plans

### Action 1.3

Work with WHO to develop a monitoring mechanism in line with WHA Resolution 67.6

### Action 1.4

Continue to ensure the voice of patients are at the forefront of high level policy discussions (i.e. address WHO Executive Board and the World Health Assembly, contribute to WHO regional committee meetings, participate in STAC and civil society reference groups, and other key meetings)

### Action 1.5

Deliver, in partnership with WHO and in collaboration with the Government of Brazil and partners, the second World Hepatitis Summit

### Action 1.6

Encourage and promote research into effective scale up interventions through a variety of methods, including the World Hepatitis Summit programme, our affiliation to the Hepatology, Medicine and Policy open access journal and the University of Deusto's Hub.

### Action 1.7

In partnership with WHO and the Scottish Government, establish a baseline for countries with effective national strategies either in place or in development

### Action 1.8

Continue to second a technical officer to WHO EURO to support the development and implementation of a regional action plan

### Action 1.9

Support the policy work focused on the elimination of viral hepatitis in Egypt, Scotland, Mongolia, and Georgia

### Action 1.10

Promote the inclusion of civil society in the development of effective and funded plans

### Action 1.11

Support WHO with the production, update and dissemination of guidelines, in particular on hepatitis testing and treatment

## Strategic Goal 1

How we have progressed this quarter:

- ✓ Action 1.1
- ✓ Action 1.2
- ✓ Action 1.4
- ✓ Action 1.5
- ✓ Action 1.6
- ✓ Action 1.8
- ✓ Action 1.9
- ✓ Action 1.10
- ✓ Action 1.11

How we have done this:

### African Viral Hepatitis Summit: Dakar, Senegal (Actions 1.1, 1.4)

On 19 – 20 January, WHA presented at the first African Viral Hepatitis Summit in Dakar, Senegal. Spearheaded by Danjuma Adda, WHA Executive Board Member for the African Region, the Summit gathered leading African and international public health experts, patient representatives, policymakers and physicians to discuss and better understand the burden of hepatitis B and C in Africa. The outcomes called for:

- Comprehensive national plans which have robust prevention measures and access to affordable diagnostics and treatment
- Stronger healthcare systems and accurate data on the huge disease burden
- Adequate surveillance of the disease's patterns
- Reduction in the cost of diagnostics and increased access to testing
- Increased awareness of hepatitis and transmission routes



### Hepatitis C: Beginning of the end: Zagreb, Croatia (Actions 1.1, 1.2, 1.4)



On 19 February, Raquel Peck, CEO of the WHA, chaired a discussion on hepatitis C elimination in the Republic of Croatia and how it can be achieved. A number of high-profile national policymakers, WHO EURO representatives, civil society groups and media were in attendance to discuss its feasibility. The main take away was that elimination **is feasible** but would require a scale up in interventions and investment which could be recovered by 2021. However this can only be achieved with strong political commitment.

## World Health Organization Executive Board meeting: Geneva, Switzerland (Actions 1.4, 4.2)

On 28 January, Member States and civil society groups, including the World Hepatitis Alliance, convened at the World Health Organization (WHO) Executive Board (EB) meeting in Geneva to discuss the draft Global Health Sector Strategy on Viral Hepatitis and the aspirational targets included.

Following targeted outreach by WHA and its member organisations to the Executive Board, encouragingly, a high majority of countries endorsed the strategy saying that it was a welcome advancement in combatting viral hepatitis and key to achieving the Sustainable Development Goals (SDGs). Brazil in particular showcased its support by advocating for its adoption at the World Health Assembly in May, which many countries agreed with. The strategy is the single most important document on viral hepatitis to date because it represents, for the first time, very specific commitments in the form of targets and includes a goal of eliminating viral hepatitis as a public health threat by 2030. Although the meeting signalled an important step forward, more needs to be done ahead of the World Health Assembly in May. It will be crucial for WHA members and civil society groups to continue to advocate to their national policymakers to ensure the adoption of the strategy happens, ultimately signalling a pathway to the elimination of viral hepatitis as a public threat by 2030.



## EU HCV Policy Summit: Brussels, Belgium (Action 1.4)



On 16 February, George Kalamitsis, WHA Executive Board Member for the European Region and Charles Gore, WHA President took part in the first EU HCV Policy Summit to discuss the viability of hepatitis C elimination and to launch the first Hepatitis C European Elimination Manifesto.

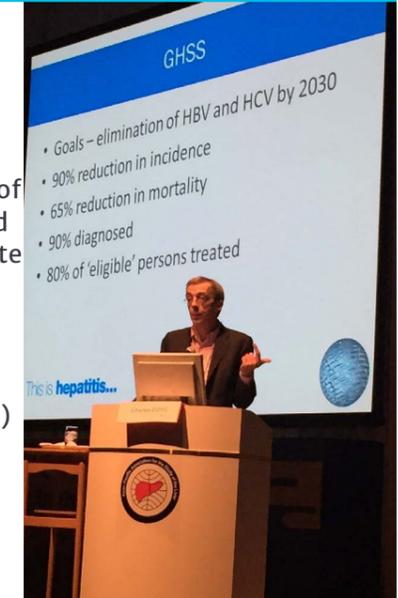
This manifesto outlined the steps needed to eliminate hepatitis C in Europe by 2030 and ensure commitment from EU and national policy makers. Specifically, signatories of the Manifesto pledged to:

- Make hepatitis C and its elimination in Europe an explicit public health priority to be pursued at all levels
- Ensure that patients, civil society groups and other relevant stakeholders are directly involved in developing and implementing hepatitis C elimination strategies
- Pay particular attention to the links between hepatitis C and social marginalisation
- Introduce a European Hepatitis Awareness Week during the week of World Hepatitis Day (28 July)

## Asian Pacific Association for the Study of the Liver (APASL) conference: Tokyo, Japan (Actions 1.4, 3.4, 4.4, 4.8, 4.10)

During the APASL conference (20–24 February) the WHA, together with partners, delivered the 2016 World Indigenous People's Conference Workshop on Viral Hepatitis, where panellists called for better data on the prevalence and mortality in Indigenous peoples in Asia, more engagement with these communities and more specific WHO recognition of their plight. This meeting is a prelude to the upcoming World Indigenous People's Conference scheduled to take place in late 2017 in Manaus in the Brazilian Amazon.

WHA was also involved in a policy symposium organised by the Coalition to Eradicate Viral Hepatitis in Asia Pacific (CEVHAP), on how the Sustainable Development Goals (SDGs) can drive change towards elimination. The meeting called for Member States within the Asia region to support the elimination targets and adopt WHO's Global Health Sector Strategy at the World Health Assembly in May.



## HCV2020, Transforming HCV Care: Barcelona, Spain (Action 1.4, 1.6)



On 3–4 March, World Hepatitis Alliance co-chaired the HCV2020, an international forum for expert exchange of ideas about best-practice care for patients with hepatitis C. The meeting convened over 150 people with an aim to develop a comprehensive overview of hepatitis C from a patient, clinical and policy perspective and to establish frameworks that encourage successful implementation of learned best practices into local areas.

At the meeting, a new global hepatitis C resource hub was launched. The HCV HUB Planning and Implementation is a database which includes global and national hepatitis C data, action plans, interventions and tools, which can be used for advocates across the world. Sign up to it [here](#).

## WHO Regional Office for the Western Pacific (WPRO) Strategic Technical Advisory Committee (STAC): Hanoi, Viet Nam (Actions 1.4, 1.6)

On 25–27 January 2016, WHA attended WHO WPRO's Fourth Hepatitis B Immunization Expert Resource Panel Consultation in Hanoi, Viet Nam. The meeting was convened to share experiences that will contribute to increasing the rate of hepatitis B vaccination in the region.



## World Hepatitis Summit 2017 (Actions 1.5, 2.3)



In this quarter, preparations have begun for the second World Hepatitis Summit, which is due to take place in Brazil in early 2017. Paul Taylor has been recruited as Project Manager and is working with WHA, WHO and the government of Brazil to launch a Summit that builds on the huge successes of last year.

This event is currently in production. Further information will be announced shortly.

## Seconding a technical officer to WHO EURO (Action 1.8)

WHO Regional Office for the European Region (EURO) are in the process of developing a comprehensive viral hepatitis Action Plan for the Region. Throughout the development of the plan, we have been in close contact with the WHO EURO hepatitis focal point, who we second to WHO and who has been instrumental to driving progress of the plan.



## Supporting policy work (Action 1.9)



We have continued to feed into the Scottish Government's HCV Treatment and Therapies Advisory Group, which is currently examining how to increase treatment numbers within the constraints of the Health Boards' already stretched budgets. In addition we are part of the Scottish Government's Short Life Working Group which is advising on how best to fulfil the Penrose Report's single recommendation to offer a HCV test to everyone who had a blood transfusion in Scotland prior to September 1991. We are advising that a screening exercise to find these people could also be used to find others who were infected in other ways in the same period and that this would make the search for transfusion recipients more cost-effective.

## Inclusion of civil society in development of effective funded plans

(Actions 1.10, 3.8)

WHA has been highlighting the importance of civil society's role in the development of national plans by showcasing examples of member organisations influencing strategies. In January's edition of WHA's monthly e-magazine, *hepVoice*, HCV Sin Fronteras were featured as a case study for their involvement in Argentina's national strategy and its financing of hepatitis C treatment. Similarly the first webinar in the Tools For Change series, 'Understanding the Global Health Sector Strategy for Viral Hepatitis: Driving national policy change' highlighted a crucial cause in World Health Assembly resolution 67.6 which calls for civil society involvement in national strategies.

### WHA MEMBER UPDATES FROM AROUND THE WORLD



## Supporting WHO guidelines (Action 1.11)



We have concluded our work on the updated WHO HCV treatment guidelines due to be released at the EASL ILC in April and are continuing to work on the WHO HBV and HCV testing guidelines. This has included sitting on the steering and judging committee of a competition to find examples of innovative testing programmes to be featured in the guidelines.

## Strategic Goal 2

Increased access to diagnostics, vaccines and new therapies for hepatitis

### Action 2.1

Continue discussions and look into strengthening partnerships with key stakeholders such as MSF to maximise efforts in this area

### Action 2.2

Provide advice as part of the MPP's recently formed Expert Advisory Board for hepatitis

### Action 2.3

Deliver, in partnership with WHO and in collaboration with the Government of Brazil and partners, the second World Hepatitis Summit

### Action 2.4

Work with governments and the pharmaceutical industry to ensure rapid registration of technologies and medicines

### Action 2.5

Conduct an annual survey of access to affordable medicines and diagnostics

### Action 2.6

Host two pilot meetings in different countries to explore innovative funding solutions for hepatitis

### Action 2.7

Support discussions with our African members and partners focusing on the creation of an African structure focused on access to medicines and diagnostics

### Action 2.8

Continue to promote our access to treatment open letter

### Action 2.9

Elevate the access issue through external media statements, including blog posts, website statements and monthly magazines

## Strategic Goal 2

How we have progressed this quarter:

- ✓ Action 2.1
- ✓ Action 2.2
- ✓ Action 2.3

How we have done this:

### Strengthening partnerships to improve access (Action 2.1)

With numerous organisations working on the issue of access, building partnerships is key to elevating the issue. This quarter we connected with the communications department of Médecins Sans Frontières and supported their involvement in the African Viral Hepatitis Summit. We have also assisted the organisation with their research on hepatitis C drug pricing by reaching out to our membership base in Africa. Furthermore, we hosted a meeting with the Clinton Health Access Initiative (CHAI) to strengthen our partnership with them.



### Helping to facilitate a Medicines Patent Pool meeting (Action 2.2)



As part of our role on the Medicines Patent Pool's (MPP) Expert Advisory Board for hepatitis, we have assisted in connecting key stakeholders and highlighting the importance of the MPP's work. Most recently this has resulted in MPP hosting meetings at the upcoming European Association of the Study of the Liver (EASL) International Liver Congress in April.

## Strategic Goal 3

Increased influence of the World Hepatitis Alliance and its members through capability building programmes

### Action 3.1

Create a capacity/capability building hub initially in the areas of advocacy, access to medicines and diagnostics and communications to be hosted on our website

### Action 3.3

Make the outcomes from the WHO/WHA monitoring mechanism available to members to inform their advocacy efforts

### Action 3.5

Connect our members with strategic partners such as WHO country and regional offices and equip them to build a strong advocacy voice at a national level

### Action 3.7

Deliver capacity/capability building workshops for our members during the second World Hepatitis Summit in Brazil

### Action 3.9

Establish a baseline for members that are involved in the development of effective and funded hepatitis plans

### Action 3.2

Produce an advocacy webinar series and a user guide and tools that focus on developing advocacy capacity to effectively engage policy makers, share policy developments and opportunities, share/train advocates on new surveys, tools etc

### Action 3.4

Strengthen the visibility and influence of our member groups at high profile conferences such as EASL and AASLD

### Action 3.6

Partner with professional medical societies to set up new patient groups in target countries using our Patient Advocacy Creation Tool (PACT)

### Action 3.8

Build member's capability to promote their inclusion in the development of effective and funded national plans in line with resolution WHA67.6

## Strategic Goal 3

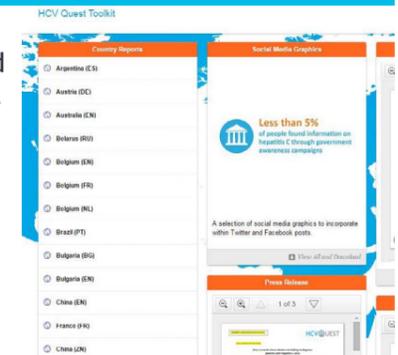
How we have progressed this quarter:

- ✓ Action 3.1
- ✓ Action 3.2
- ✓ Action 3.4
- ✓ Action 3.8

How we have done this:

### HCV Quest Toolkit (Actions 3.1, 3.3, 4.6)

Good survey findings can make powerful tools for patient advocacy. The HCV Quest Global Patient Survey has produced compelling data on the real impact of living with hepatitis C. To ensure the survey data can be leveraged on a local level, on 29 February, WHA launched the HCV Quest Toolkit: an online hub with all the documents patient groups need to develop and use survey findings in advocacy activities.



Access the *HCV Quest Toolkit* [here](#).

### Tools for Change webinar series (Actions 3.2, 4.2, 4.6)



From February – April, WHA produced Tools For Change, a three-part webinar series aimed at educating and upskilling viewers on various aspects of advocacy and the tools needed to effectively lobby for change. A number of panellists, including representatives from the World Health Organization, national governments and WHA member organisations, convened to share their perspectives and insights on how patient advocates can best engage with policy makers, the media and key stakeholders to effect real, on-the-ground change.

Click [here](#) to access the recordings.

## Strategic Goal 4

Greatly increased profile and priority of viral hepatitis

### Action 4.1

Run a consultation with the community and develop, launch and host a global hepatitis movement with elimination as the theme

### Action 4.2

Ensure that the WHO Global Health Sector Strategy for viral hepatitis, together with its targets on diagnosis and treatment, is adopted at the World Health Assembly 2016

### Action 4.3

Continue to support our members' efforts to raise awareness of hepatitis through the promotion of World Hepatitis Day

### Action 4.4

Co-host parallel sessions at both APASL and EASL to address how clinicians and patient groups can further the SDGs and GHSS agenda

### Action 4.5

Continue to fight stigma through our work with the media

### Action 4.6

Utilise the findings of our HCV Quest (a global survey on the impact of hepatitis C on patients) to educate the general public about the disease

### Action 4.7

Examine replicating the concept of the HCV Quest by undertaking a survey on the impact of hepatitis B on patients

### Action 4.8

Hold a World Indigenous Peoples meeting at APASL to promote engagement in the region ahead of the second World Indigenous Peoples Conference on hepatitis to be held in Brazil, September 2017

### Action 4.9

Work to raise the profile of hepatitis within the field of global health through our ECOSOC consultative status, participation on NCD Consultation and UNGASS events

### Action 4.10

Highlight the inclusion of hepatitis in the SDGs to the wider global health community

### Action 4.11

Engage non-traditional supporters through strategic corporate partnerships

### Action 4.12

Elevate the profile viral hepatitis by systematically reviewing and creating new website content and collaterals

## Strategic Goal 4

How we have progressed this quarter:

- ✓ Action 4.1
- ✓ Action 4.2
- ✓ Action 4.3
- ✓ Action 4.4
- ✓ Action 4.6
- ✓ Action 4.8
- ✓ Action 4.9
- ✓ Action 4.11
- ✓ Action 4.12

How we have done this:

### NOhep, a global movement to eliminate viral hepatitis by 2030

(Actions 4.1, 4.3)

In March, WHA announced the title and shared the logo of the Global Elimination Movement – NOhep. NOhep is a global movement aimed at uniting the hepatitis community and beyond to take action, to speak out and be engaged to ensure global commitments are met and viral hepatitis is eliminated by 2030. NOhep will be launched on World Hepatitis Day (WHD) 2016 and will run until 2030, to coincide with the [WHO Elimination Strategy](#). We are inviting members and campaign supporters to incorporate the launch of NOhep in WHD activities. The WHD2016 website will go live on 29 April, where you will be able to download a full set of NOhep materials and resources. The official NOhep website will be launched on WHD. To find out more, tune into the [Tools For Change webinar](#).



### Commission on Narcotic Drugs: Vienna, Austria (Action 4.9)



At the CND meeting in March, WHA joined civil society groups from all over the world by supporting a [statement](#) condemning governments for failing to acknowledge the consequences of punitive and repressive drug policies. This statement comes ahead of the UN General Assembly Special Session (UNGASS) which will take place from 19–21 April. This is the first UNGASS meeting on the topic in 20 years and marks a critical moment for the future of global drug policy.

### Engaging strategic corporate partnerships (Action 4.11)

Building relationships with partners and diversifying the organisations we work with will be key to achieving our goals so this quarter WHA engaged with an external agency who are providing expertise and assistance in approaching corporates.



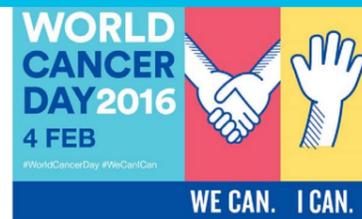
## hepVoice (Action 4.12)



In January, WHA launched the first edition of *hepVoice*, a monthly magazine which provides an update on activities from WHA and its members. The magazine is distributed at the beginning of each month and is available in French, Spanish and English. You can view it [here](#).

## World Cancer Day (Action 4.12)

On 4 February, WHA issued a [press release](#) to global media calling for the establishment of comprehensive hepatitis strategies to help prevent the 800,000 liver cancer deaths each year. The release celebrated UICC'S theme for World Cancer Day, 'We can. I can.' which explored how everyone – together or as individuals – can do their part to reduce the global burden of cancer.



## Organisation updates

### Launch of WHA Strategic Plan and WHA Executive Board Member meeting

On 11 – 12 February, the WHA [Executive Board](#) met in London for the annual board meeting to help set the vision for the organisation over the next two years. Following the meeting, the WHA Strategic Plan 2016 – 2017 was agreed, with the addition this year of a new goal to reflect the need for the huge scale-up in diagnosis and treatment.

Read our Strategic Plan 2016 – 2017 [here](#).



### WHA welcomes Homie Razavi as a Non-Executive Board Member



In March, Homie A. Razavi, PhD joined the WHA Executive Board as a Non-Executive Board Member. Leading the Center for Disease Analysis (CDA), a public health research firm with expertise in epidemiology and disease modelling, Homie brings a wealth of knowledge on viral hepatitis and access to the latest data. He has been instrumental in the development of the [Polaris Observatory](#), which maps viral hepatitis current and projected data. His appointment to the WHA Executive Board will greatly enhance WHA's work, given his important contributions to hepatitis research and his ability to provide expertise and knowledge.

### Three new employees join WHA

As WHA's work evolves, the organisation is also growing and in the past quarter, WHA has recruited three new members of staff.

Paul Taylor joined the team in January as World Hepatitis Summit (WHS2017) Project Manager. Paul is a charity events specialist and project manager who started his career in the B2B commercial events industry before moving into the not-for-profit sector where he has worked for the last 10 years. Paul has developed, commercialised and launched dozens of large-scale health and medical conferences in this space where he has worked with numerous high-profile charities, including: the Cystic Fibrosis Trust; the National Children's Bureau; Play England; Childhood Bereavement Network; the Anti-Bullying Alliance and the Council for Disabled Children.



In March, Jessica Hicks was appointed as Project Manager. She will deliver a number of projects for WHA and will drive the World Hepatitis Alliance Pre-Summit Member Conference ahead of WHS2017. Jessica is a certified project manager with experience working for a membership organisation within the charity health sector. Her last role was at the Royal College of Paediatrics and Child Health where she led on a variety of member-focused projects. Jessica also has extensive experience in event management, coordinating a wide range of events; from specialist summits to national conferences.

Joining Paul to complete the WHA World Hepatitis Summit team, Meg Collington was recruited as Project Assistant in March. Meg has a passion for international development events. Previously she helped organise a learning event with Womankind Worldwide which focused on women's political participation in developing countries. Meg recently completed a Masters in 'Conflict, Security and Development', which included a module on public health and security. She hopes to develop her public health experience working on the Summit.



### Expanding WHA membership base



In this quarter WHA welcomed 5 new members. WHA's membership is now composed of 230 members in 81 countries across the world. WHA is always actively looking for new members as further expanding this network helps to create greater unity and cooperation among the global hepatitis community, which is fundamental to efforts in tackling the global hepatitis epidemic.

View all WHA member organisations [here](#) and find out how you can become a member on the [WHA website](#).

# World Hepatitis Alliance

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