Currently, 400 million people are living with viral hepatitis around the world, a liver disease that kills more people than the other major infectious diseases – HIV, malaria and tuberculosis. In fact, 1.4 million people are dying of hepatitis every year – that’s 4,000 people every day — a figure that has been rising inexorably year after year until it is now the 7th biggest cause of death. This is made all the more shocking and disgraceful as hepatitis is largely preventable.

The World Hepatitis Alliance provides global leadership to drive action to help eliminate viral hepatitis as a public health threat by 2030. We work with governments, members and other key partners to support and elevate the voices of people living with viral hepatitis, to raise the profile of viral hepatitis and to help establish comprehensive hepatitis strategies which have robust prevention measures and access to affordable diagnostics and treatment.

Foreword from the President

Charles Gore
President of the World Hepatitis Alliance

Currently, 400 million people are living with viral hepatitis around the world, a liver disease that kills more people than the other major infectious diseases – HIV, malaria and tuberculosis. In fact, 1.4 million people are dying of hepatitis every year — that’s 4,000 people every day — a figure that has been rising inexorably year after year until it is now the 7th biggest cause of death. This is made all the more shocking and disgraceful as hepatitis is largely preventable.

The World Hepatitis Alliance provides global leadership and supports action on a global scale that will change this and have a direct and positive impact on the lives of hundreds of millions of individuals. We are committed to halting the viral hepatitis death toll and moving towards its final elimination.

Awareness is crucial in the fight against this epidemic; even today, the general population’s understanding of the different hepatitis viruses (A, B, C, D & E) and the damage they can cause to the liver, a vital organ, is scant at best. Whereas the life-threatening significance of heart disease or lung cancer is well understood by the public, more needs to be done to drive the message home about the dangers of viral hepatitis and the complications, like cirrhosis and liver cancer, it can cause.

Advocacy is equally important, given the many challenges we face, and the urgent need for action by governments and multinational organisations. Some of these challenges:

• The lack of thorough, up-to-date, and consistent epidemiological information on the magnitude and distribution of viral hepatitis;
• The gaps in vaccination provision to newborns and to adults outside of the healthcare workforce;
• Access to drugs and to diagnostics;
• Workforce capacity;
• The lack of a global funding mechanism to support national hepatitis programmes

Although we have made very significant progress in the last few years at putting in place increasing commitment from national governments, there is still a long road ahead of us. To steal Winston Churchill’s words: “This is not the end, it is not even the beginning of the end, but it is perhaps the end of the beginning.”

Charles Gore, President of the World Hepatitis Alliance

About the World Hepatitis Alliance

The World Hepatitis Alliance (WHA) is a patient-led and patient driven non-governmental organisation (NGO). With over 200 member patient groups from nearly 100 countries across the world, WHA provides global leadership to drive action to help eliminate viral hepatitis as a public health threat by 2030. Their aim is to work with governments, members and other key partners to support and elevate patient voices, to raise the profile of viral hepatitis and to help establish comprehensive hepatitis strategies which have robust prevention measures and access to affordable diagnostics and treatment.

Our mission

We provide global leadership to drive action to help eliminate viral hepatitis as a public health threat by 2030. We work with governments, members and other key partners to support and elevate the voices of people living with viral hepatitis, to raise the profile of viral hepatitis and to help establish comprehensive hepatitis strategies which have robust prevention measures and access to affordable diagnostics and treatment.

Our values

Making a difference

Central to every action and decision we make is our core value of making a difference. We consider driving action and making a difference part of our day-to-day life as well as our overall commitment to our members and the work we do.

Ambition

Each day we strive to achieve a set of ambitious goals to improve the quality of everything we do for people living with viral hepatitis.

Integrity

We aspire to live to the highest standards of personal honesty and behaviour; we never compromise our reputation and always act in the best interests of our membership.

Trust

We work in an environment based on respect and trust. Trust is essential for us to maintain a successful relationship with members and key partners. We use trust to strengthen our efforts worldwide.
Note from the CEO

As a result of the achievements of our last Strategic Plan, the viral hepatitis landscape is changing. In particular, the 2014 World Health Assembly Resolution, with which we were intimately involved from its inception, has driven significant progress. WHO has developed a Global Health Sector Strategy (GHSS) on viral hepatitis with ambitious targets and there is a much stronger focus by governments on developing national hepatitis plans that will be necessary to achieve those targets.

The success of our work has meant that we have kept many of the elements of our previous Strategic Plan in our new 2016–17 plan but it has evolved to take account of the changing environment. We have kept our three strategic goals:

1. Many more countries with effective and funded hepatitis plans in place or at least in development
2. Increased influence of the World Hepatitis Alliance and its members through capability building programmes
3. Greatly increased profile and priority of viral hepatitis

However, we have introduced a fourth goal – Increased access to diagnostics, vaccines and new therapies for hepatitis. This reflects the need for the huge scale-up in diagnosis and treatment that will be required to achieve the global targets proposed by the GHSS.

We are also acutely aware that this scale-up is going to require very significant investment by national governments and we are convinced that this simply will not happen unless the advocacy voice is greatly enhanced. Our new Strategic Plan therefore reflects our focus on this, given that we are not only uniquely placed to do this but may indeed be the only organisation capable of doing it. As before, our strategic goals are made up of a series of actions and each has a set of key performance indicators so we can monitor our progress. We report on these actions and KPIs every 3 months.

This new 2016–17 Strategic Plan is part of our long-term strategy which is designed to deliver our single over-arching goal: the elimination of hepatitis B and C. What is so exciting for us is that the Global Strategy is proposing exactly the same goal. Part of Strategic Plan will be to ensure that all 194 UN Member States sign up to this goal.
More countries have recently started the process of developing national plans and we estimate that around 30 now either have real plans or are developing them. This still leaves the great majority with no comprehensive national approach and even countries with plans are finding huge challenges in getting the financial resources needed. Strong patient advocacy will be critical to ensure the necessary resources are allocated to hepatitis.

**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, Polaris Observatory 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.

**WHA attends WHO EMRO Regional Committee**
World Hepatitis Alliance Strategic Plan 2016 – 2017

Strategic Goal 1
Key Performance Indicators

2016/2017

- An additional 10 countries with effective and funded national strategies either in place or in development.

Deliverables

2016

- Participation in key WHO meetings
- A regional action plan to tackle hepatitis in Europe is developed
- Hold broad consultations to develop the programme of the second World Hepatitis Summit
- Produce a Pre-Summit survey on our members’ involvement in the development of effective and funded hepatitis plans

2017

- Participation in key WHO meetings
- A regional action plan to tackle hepatitis in Europe is launched
- Progress on elimination strategies showcased on our website
- Co-host the second World Hepatitis Summit
- Policy case studies are showcased at the second World Hepatitis Summit
- Produce a Post-Summit survey on our members’ involvement in the development of effective and funded hepatitis plans

World Hepatitis Summit

The Summit is a joint World Health Organization and World Hepatitis Alliance event that directly addresses the overwhelming global burden of viral hepatitis. As global momentum towards tackling hepatitis grows, the World Hepatitis Summit provides a unique platform to strengthen the hepatitis community voice, assist countries in developing national hepatitis action plans and to raise the global profile of viral hepatitis. The Summit is a focus for action and central to driving commitment from global funders, the pharmaceutical industry and other key actors to make real lasting progress in drastically reducing the burden of viral hepatitis. The inaugural 2015 Summit was hosted by the Scottish Government and supported by Glasgow Caledonian University and Health Protection Scotland.

Strategic Goal 2
Increased access to diagnostics, vaccines and new therapies for hepatitis

With the vast majority of people living with viral hepatitis still undiagnosed, it will be impossible to reduce the 1.4 million annual death toll without a huge scale-up in testing and treatment. To achieve this it is essential that neither availability nor price are barriers. Even access to the birth dose of hepatitis B vaccine is currently an issue with GAVI only supporting the pentavalent vaccine that cannot be given at birth.

Action 2.1
Strengthen partnerships with key stakeholders such as MSF, DNDI, Coalition plus, FIND and CHAI 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
In order to stimulate political interest and action from policy makers, advocacy is ever more important in a world of strongly competing priorities and in particular the new emphasis on non-communicable diseases. Robust data, effective therapies and public health/clinical champions are vital but without the patient perspective (the human face), civil servants, politicians and governments are less likely to respond effectively. We will continue to promote the work of WHA and its members in order to increase our influence with governments and other key global health stakeholders. We will also deliver much needed capability-building work, focusing on upskilling existing members but also on creating new member organisations, making full use of our Patient Advocacy Creation Tool.
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 3.6
Partner with professional medical societies to set up new patient groups in target countries using our Patient Advocacy Creation Tool (PACT).

Action 3.7
Deliver capacity/capability building workshops for our members during the second World Hepatitis Summit in Brazil.

Action 3.8
Build members’ capability to promote their inclusion in the development of effective and funded national plans in line with resolution WHA67.6 / action 1.3.

Action 3.9
Establish a baseline for members that are involved in the development and implementation of effective and funded hepatitis plans.

Action 3.10
Conduct a survey to identify the levels of stigma and discrimination in different countries.

Strategic Goal 3
Key Performance Indicators

2016/2017

• 20% increase in the number of members involved in the development of effective and funded hepatitis plans.

Deliverables

2016

• Work with professional medical societies to scope opportunities for creating new patient groups
• Booth at EASL
• Launch of the webinar series and user guide and tools
• Put our members in touch with their respective WHO regional offices (and through them country offices)
• Survey establishing a baseline for members that are involved in the development of effective and funding hepatitis plans conducted

2017

• Creation of new patient groups in target countries
• Booth at EASL
• Capacity/capability workshops successfully delivered at the second World Hepatitis Summit
• Disseminate findings of the survey establishing a baseline for members that are involved in the development of effective and funding hepatitis plans.
Viral hepatitis kills more each year than any of the other communicable diseases and yet its profile and priority still do not reflect this properly. It is now the 7th leading cause of death and we will continue to work to ensure it is recognised as such.

### TOP 10 LEADING CAUSES OF MORTALITY 1990 – 2013*

<table>
<thead>
<tr>
<th>Year</th>
<th>Cause</th>
</tr>
</thead>
<tbody>
<tr>
<td>1990</td>
<td>1. Heart disease</td>
</tr>
<tr>
<td></td>
<td>3. Lower respiratory infections</td>
</tr>
<tr>
<td></td>
<td>5. Stroke</td>
</tr>
<tr>
<td></td>
<td>7. Viral hepatitis</td>
</tr>
<tr>
<td></td>
<td>9. Lower respiratory infections</td>
</tr>
</tbody>
</table>

*The grouping of viral hepatitis in this analysis differs from the standard Global Burden of Disease data ranking.

### 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**  
Work with healthcare professionals to strengthen their partnerships with patient groups and to 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 to educate the hepatitis community, healthcare professionals and the general public about the impact of hepatitis C

Nearly *7/10* people did not know what HCV was before their diagnosis (Global data based on 3780 responses)

**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**  
Enterprise non-traditional supporters through strategic corporate partnerships

**Action 4.12**  
Elevate the profile of viral hepatitis by systematically reviewing and creating new website content and collaterals

**Strategic Goal 4**

**Key Performance Indicators**

**2016**

- 90 governments participating in World Hepatitis Day
- Launch of the hepatitis community movement
- Provide our members with concepts and collaterals to support their activities on World Hepatitis Day

**2017**

- 100 governments participating in World Hepatitis Day
- Successful holding of second World Indigenous Peoples Conference on viral hepatitis
- Provide our members with concepts and collaterals to support their activities on World Hepatitis Day

**Deliverables**

**2016**

- Launch of the hepatitis community movement
- Provide our members with concepts and collaterals to support their activities on World Hepatitis Day

**2017**

- Successful holding of second World Indigenous Peoples Conference on viral hepatitis
- Provide our members with concepts and collaterals to support their activities on World Hepatitis Day
World Hepatitis Alliance Strategic Plan 2016 – 2017

WHA Board

Charles Gore
President

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Executive Board Member for the African Region

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Executive Board Member for the Eastern Mediterranean Region

Shia Lee
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