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.

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**How we have progressed this quarter:**
- Action 1.1
- Action 1.2
- Action 1.3
- Action 1.4
- Action 1.5
- Action 1.6
- Action 1.7
- Action 1.9
- Action 1.10
- Action 1.11

**How we have done this:**

**Georgia Ministry of Health 2nd Hepatitis C Technical Advisory Group Meeting: Tbilisi, Georgia** (Action 1.1, 1.9)

Following the launch of Georgia’s ambitious hepatitis C elimination campaign to reduce prevalence by 90% by 2020, the government has been emphasising screening and free access to treatment. WHA forms part of the Hepatitis C Technical Advisory Group (HepCTAG) and in October attended a meeting to learn of the country’s progress and advise on policies, implementation strategies and monitoring and evaluation practices of the programme.

**Elimination in Switzerland – Hepatitis – the Elimination of a Viral Disease Meeting: Zurich, Switzerland** (Actions 1.2, 1.6, 4.10)

On 31 October, international and national experts met in Zurich, Switzerland for a public health symposium entitled ‘Hepatitis – the Elimination of a Viral Disease’. The meeting explored the possibility of eliminating viral hepatitis and addressed the changing picture of chronic diseases and included a talk from WHA President Charles Gore.

**WHO Country Response Profile on Hepatitis B and C (2016/17)** (Action 1.3, 1.7)

In order to track progress towards elimination, WHO is developing a monitoring and evaluation framework. In this quarter the WHO Country Profile on Hepatitis B and C was sent to the hepatitis focal points in each country of the African region. This was the first of the 6 WHO regions to complete the WHO Country Profile with the other five regions to be sent this early in the New Year.
MSF Meeting on Hepatitis E: Geneva, Switzerland (Action 1.4, 1.6, 2.1)

In October WHA joined experts for a meeting organized by Médecins Sans Frontières to discuss hepatitis E. The meeting looked at ways to increase hepatitis E awareness and proposed a roadmap for filling the key knowledge and policy gaps to improve current control and treatment strategies, with primary focus on outbreak control for vulnerable populations. The resounding call from the meeting is that urgent action is needed on this disease.

Elimination in Europe – 2nd Exploratory Meeting Consensus Group on Viral Hepatitis Elimination in Europe: Brussels, Belgium (Action 1.4)

This quarter leading public health experts, medical professionals and civil society actors, including ELPA, EASL and EATG, met to discuss the consensus initiative for elimination of viral hepatitis in Europe. The initiative aims to bring key stakeholders together to secure political will and leadership for elimination in Europe. The initiative is set to launch in 2017.

WHO Global report on access to hepatitis C treatment – Focus on overcoming barriers: Geneva, Switzerland (Action 1.4, 1.11, 2.9)

In response to the need to improve access to new hepatitis C medicines, WHO launched a new report ‘Global report on access to hepatitis C treatment – Focus on overcoming barriers’. The report illustrates experiences from 13 pioneering countries and shows that sound policy guidelines, combined with political will and smart strategies to reduce prices can enable hepatitis C treatment scale up. Speaking at the press conference to launch the report, WHA CEO Raquel Peck stressed the need to expand access to treatment in order to achieve elimination. Read the full report here.

Regional Consultation on Viral Hepatitis Control in the WHO African Region: Brazzaville, Congo (Action 1.4, 1.10)

Following the launch of the document “Prevention, Care and Treatment of viral hepatitis in the African Region: Framework for action 2016–2020” in August, Member States in the African Region met in Brazzaville, Congo on 23–25 November to discuss ways to tackle viral hepatitis in one of the hardest hit areas of the world. The meeting was attended by WHO Regional Director, Dr Matshidiso Moeti, 18 national governments and civil society including WHA and showed that clear support for actions towards elimination in the region, most notably the suggestions of introducing the birth dose of hep B vaccine, which will be critical for preventing mother to child transmission.

World Hepatitis Summit: São Paulo, Brazil (Action 1.5, 1.6)

The World Hepatitis Summit made significant progress during the quarter with a specific focus around marketing and content development. The Summit continued its marketing activities and established a Communications Group between WHA, WHO and Brazil to coordinate promotional awareness campaigns. Invitations were sent out to all delegate categories in English and Portuguese and over 1,824 names were identified and researched for inclusion as part of these pushes.

30 expert Committee members on the Summit’s Programme Secretariat and its 5 sub–Committees began the process of developing a powerful and compelling agenda based on the Global Health Sector Strategy (GHSS) on viral hepatitis. An Abstracts Committee developed a call for submissions based around Strategic Directions 2, 3 and 5 of this Strategy.

The sub–Committees for the World Hepatitis Summit confirmed the focus of the final days’ sessions at the meeting will be content around Strategic Direction 5 (SD5) of the GHSS. This strategic direction outlines areas where research and innovation will play a key role in accelerating the hepatitis response on a scale sufficient to have the desired impact. SD5 looks at the feasibility of scaling–up innovative treatment interventions in the care of people with chronic hepatitis. Presenting authors of successful abstracts submissions will be invited to present their work around these challenges as part of these sessions. Sub–Committees also confirmed that interventions for impact will be covered on day 2 of the event through a number of parallel workshops and a plenary session.
Egyptian Liver Day: Cairo, Egypt (Action 1.9)

Coinciding with the 63rd World Health Organization (WHO) Regional Committee for the Eastern Mediterranean, 4 October was celebrated as Egyptian Liver Day in Cairo. Historically, Egypt has suffered from the highest hepatitis C prevalence worldwide but the country’s high burden could soon be a thing of the past. At the event the Minister of Health announced that since the beginning of 2016, more than 800,000 people have been treated for hepatitis C and the country aims to treat 1 million patients by the end of the year. The Ministry advanced its commitment to tackling hepatitis C by declaring that it expects the country to be hepatitis C free by 2020. WHA profiled this commitment in hepVoice and provided commentary in the Financial Times.

Inclusion of civil society in development of effective funded plans (Action 1.10, 3.8)

In each edition of our e-magazine, hepVoice, WHA profiles members from across the world who are working to eliminate viral hepatitis. In this quarter, WHA put a spotlight on activities being carried out by members in Ghana, United States, Switzerland, Sweden, Bangladesh and Taiwan. Read more here.

Strategic Goal 2

Increased access to diagnostics, vaccines and new therapies for hepatitis

Action 2.1
Strengthen partnerships with key stakeholders such as MSF, DNDI, Coalition plus, FIND and CHAI to maximise efforts in this area

Action 2.3
Deliver, in partnership with WHO and in collaboration with the Government of Brazil and partners, the second World Hepatitis Summit

Action 2.5
Conduct an annual survey of access to affordable medicines and diagnostics

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 2.9
Elevate the access issue through external media statements, including blog posts, website statements and monthly magazines

Action 2.2
Provide advice as part of the MPP’s recently formed Expert Advisory Board for hepatitis

Action 2.4
Work with governments and the pharmaceutical industry to ensure rapid registration of technologies and medicines

Action 2.6
Host two pilot meetings in different countries to explore innovative funding solutions for hepatitis

Action 2.8
Continue to promote our access to treatment open letter

Action 2.10
Educate our members around access to diagnostics and medicines
World Hepatitis Alliance Quarterly report: October – December 2016

Strategic Goal 2

How we have progressed this quarter:

✓ Action 2.1
✓ Action 2.5
✓ Action 2.6
✓ Action 2.9

How we have done this:

Working with Coalition Plus (Action 2.1)

As part of the advisory committee, WHA President Charles Gore attended the Coalition Plus Board Meeting in October where he learnt about their upcoming projects and provided direction on their activities.

Civil Society Survey (Action 2.5, 3.9)

In 2016 the first ever global strategy on viral hepatitis was adopted and national governments seem ever more committed to tackling the disease. However, we know that what governments say they are doing is not always an accurate representation of what’s happening on the ground so we launched the civil society survey, which was sent to all WHA members in this quarter. The survey focuses on three key areas – stigma and discrimination, civil society involvement in government response and access to diagnostics and treatment. Findings will be released at the World Hepatitis Summit.

Innovative Funding in Mongolia (Action 2.6)

During this quarter discussions were had with the Mongolian Ministry of Health and Sports regarding a meeting with the Minister of Health. The purpose of the meeting would be to follow up on developments made since the Innovative Health Financing Dialogue for Viral Hepatitis that was held in Ulaanbaatar in May 2016 and discuss next steps.

Elevating the access issue (Action 2.1, 2.9)

In this quarter we continued to highlight the access issue by hosting the next webinar in the Knowledge for Change series, 'An Introduction to Accessing Generic Hepatitis C Medicines'. Featuring experts Esteban Burrone, Head of Policy, Medicines Patent Pool; Andrew Hill, Senior Visiting Research Fellow, Department of Pharmacology, University of Liverpool; and Giten Khwairakpam, Project Manager for Community and Policy, TREAT Asia, the webinar explored the generics landscape for hepatitis C with discussions on legalities, quality and performance of generics medicines as well as providing examples of how people across the globe are accessing them. You can watch the recording [here](#).

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 3.2

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 3.3

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

Action 3.4

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

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 member’s capability to promote their inclusion in the development and implementation effective and funded hepatitis plans.

Action 3.9

Establish a baseline for members that are involved in the development and implementation 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
How we have progressed this quarter:

✓ Action 3.4  ✓ Action 3.7  ✓ Action 3.8

How we have done this:

American Association for the Study of Liver Diseases – The Liver Meeting: Boston, United States (Action 3.4)

WHA Executive Board Member for the Americas region Su Wang helped to spread the NOhep message to over 9,500 health professionals at the AASLD Liver Meeting in Boston on 11–15 November. Between attending sessions on the latest updates from the world of hepatology, Su could be found distributing free NOhep pins to attendees.

Pre-Summit Member Conference (Action 3.7, 3.8)

Throughout this quarter we promoted the Pre-Summit Member Conference among members and encouraged registrations.

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

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 4.3
- ✓ Action 4.4
- ✓ Action 4.6
- ✓ Action 4.8
- ✓ Action 4.12

How we have done this:

World Hepatitis Day Report Launch (Action 4.1, 4.3)

In October we launched the World Hepatitis Day Global Summary Report, showcasing the efforts from WHA members, patient groups and civil society organisations across the globe to create the most successful WHD to date. The report revealed that 174 countries took part, 106 governments commemorated the day and over 1,100 events took place worldwide. The report also highlighted the launch of NOhep, which was celebrated in 77 countries, resulting in over 1000 people signing up from 100 countries. Watch a short video about the development of NOhep and its global launch here.

Find out more about the impact of the global awareness day and how your country marked the day in the World Hepatitis Day 2016 Global Summary Report here.

NOhep Goes Global Campaign (Action 4.1)

This quarter NOhep called on supporters to help raise awareness of the elimination message by taking part in the NOhep Goes Global Campaign. Supporters were encouraged to post photos of NOhep in front of famous landmarks, iconic settings or with an object that represents where they are from. From Iran to Australia and Russia to Romania, supporters from all over the world got involved and shared their images to help increase the reach of the movement.

HepCure webinar (Action 4.1, 4.4)

On 18 October, Raquel Peck, WHA CEO, and Dr Su Wang, WHA Executive Board Member for the Americas Region, took part in a unique HepCure webinar, highlighting the central role healthcare professionals (HCPs) play in the elimination of viral hepatitis, with a focus on NOhep. With examples of great activities led by HCPs and a call for more collaboration with local patient groups, the webinar also offered a background on the current viral hepatitis landscape and ideas of testing initiatives. Watch the webinar recording here.

World Indigenous Peoples’ Conference on Viral Hepatitis (Action 4.8)

Throughout this quarter WHA liaised with partners to set motions in place for the development of the second World Indigenous Peoples’ Conference on Viral Hepatitis. Following the successful inaugural event in Alice Springs, Australia in 2014, the second conference will take place in Alaska, USA and coincide with International Day of the World’s Indigenous Peoples on the 9 August.

tve Films for Change: Taking hepatitis science to communities through film (Action 4.12)

In December WHA supported the ‘Films For Change’ initiative by media charity tve in which student filmmakers in India were given bursaries to produce films raising awareness of viral hepatitis. The films were shown at public screenings in Lucknow and WHA hosted the films online, promoting them extensively through our channels. Watch the ‘Films For Change’ videos here.
Organisation updates

New members

The World Hepatitis Alliance continues to grow as we welcome eight new member organisations this quarter: Alliance Beninoise des Organisations de la Société Civile de Lutte Contre les Hépatites Virales (ABOSCHVi), Benin; Association de Lutte Contre les Hépatites (ALCH Maroc), Morocco; Association of Asian Pacific Community Health Organisations (AAPCHO), USA; The Community Health Outreach Work to Prevent AIDS Project (CHOW Project), USA; Croatian Association of Treated and Ill with Hepatitis “HEPATOS” – Zagreb and Zagreb County, Croatia; Forum For The Study Of The Liver, Bangladesh; Northern Territory AIDS & Hepatitis Council, Australia and Project Inform, USA. Our membership is now made up of 245 groups in 82 countries in every region of the world. Find out more here.

New Executive Board

In this quarter elections for the Regional Executive Board Members for 2016-2018 took place. WHA members voted for the following people to represent them in their region:

- Africa Region: Kenneth Kabagambe (Uganda)
- Americas Region: Su Wang (United States)
- Eastern Mediterranean Region: Ammal Metwally (Egypt)
- Europe Region: Ivana Dragojevic (Serbia)
- South East Asia Region: Prof R.P. Shanmugam (India)
- Western Pacific Region: Dee Lee (China)

Our Executive Board plays a vital role in the organisation’s governance and, crucially, provides representation for our patient groups on a regional level. The Board also encourages our members to work together, both nationally and regionally, to give our activities greater cohesion and strength.
UK and mailing address:
1 Baden Place
London
SE1 1YW
UK

Swiss address:
86bis, route de Frontenex
Case Postale 6364
1211 Genève 6
Switzerland

Telephone: +41 (0) 22 518 06 16
Email: Contact@worldhepatitisalliance.org

www.worldhepatitisalliance.org