World Hepatitis Alliance
Strategic Plan 2015
Foreword

The World Hepatitis Alliance is a not-for-profit international umbrella Non-Governmental Organisation (NGO). Our membership is composed of over 190 organisations who work in the field of viral hepatitis, representing every region of the world. We are patient-led and patient-driven, and we are the global voice for the 400 million people worldwide living with viral hepatitis.

Despite its prevalence, viral hepatitis remains a low priority. While this remains the case, we are committed to expanding our work in order to respond to the increasing need for action across the world that too frequently is not addressed by governments or leaders in global health. Through partnership, advocacy, monitoring and continued patient support, we aim to get viral hepatitis higher up the global agenda and to see it given the priority it deserves.

To address this urgent need for increased action, our 2015 strategic plan centres on three goals. Firstly, to see many more countries with national strategies in order to encourage governments to commit to tackling viral hepatitis. Secondly, to increase influence of the Alliance and its members to ensure that the voices of viral hepatitis patients are at the forefront of national and global health discussions. Finally, we aim to greatly increase the profile of viral hepatitis amongst policy makers and leaders in global health.

To achieve them, each goal has between six and eleven actions. Specific key performance indicators for each goal will allow us to monitor and evaluate our efforts. Together, the goals, actions and performance indicators will direct our work and will ensure that we achieve visible results that will lower the death toll from viral hepatitis.

In 2015 we will host the first World Hepatitis Summit in partnership with WHO and the Scottish government. The summit will bring together viral hepatitis stakeholders from across the world with the aim to help countries develop and implement national viral hepatitis plans as well as increase the profile of hepatitis and the work of the Alliance and its members.

Though ambitious, the goals and actions set out in our Strategic Plan 2015 are achievable. Furthermore, in following this strategy, projects delivered next year will bring us closer to our ultimate goal, the elimination of hepatitis B and hepatitis C.

Charles Gore, President of the World Hepatitis Alliance
Final goal: Eradication of HBV and HCV

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

2. Increased influence of the Alliance and its members

3. Greatly increased profile of viral hepatitis
Strategic Goal 1

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

Just a handful of countries currently have such strategies. Without government commitment little progress is possible and the clearest sign of that commitment is a comprehensive national hepatitis strategy that covers everything from awareness and prevention through to treatment. Strong patient advocacy will be critical for this goal and patient group involvement with governments will be crucial to the development of good strategies. Currently patient groups are engaged with governments in some form in about 60 countries.

Action 1.1

We will promote greater involvement of governments in World Hepatitis Day, which is an extremely useful lever to push for more action and ultimately a national strategy. This will include setting up a campaign theme, liaising with the community and governments as well as WHO.

Action 1.2

We will ensure regional strategies are in place through our work with WHO and their regional offices.

This will include advocacy work with countries ahead of relevant Regional Committee meetings.

Action 1.3

We will continue to work very closely and support WHO’s Global Hepatitis Programme, and assist them with running the Global Hepatitis Network which will help Member States develop/strengthen hepatitis plans by providing them with expert assistance and tools.
We will host a World Hepatitis Advisory Committee Meeting, bringing together key actors in the field of access to treatment and health financing to find innovative ways to finance hepatitis B and C programmes.

**Action 1.4**

We will second a full-time staff member to WHO EURO to be the hepatitis focal point for the 53 countries of the region. The position will be covered for two years starting January 2015.

**Action 1.5**

We will continue to investigate seconding a full-time staff member to WHO AFRO to be the hepatitis focal point for the 47 countries of the region and to produce a regional hepatitis strategy.

**Action 1.6**

We will continue to support patient advocacy groups in their advocacy work and, where necessary, send a task force on an ad hoc basis to a particular country where significantly more progress could be achieved with our support.

**Action 1.7**

The fourth official World Hepatitis Day took place on the 28th July 2014 and saw the largest global response to date, with 157 countries and 87 governments taking part.

Following our appointment as the civil society representatives at the Scientific and Technical Advisory Committee on Viral Hepatitis convened by Dr Margaret Chan, we will continue to provide recommendations to direct its actions.

**Action 1.8**

We will work to ensure that key elements such as blood and injection safety as well as access to treatment are part of strategies to tackle the disease.

**Action 1.9**

We will host the first World Hepatitis Summit in partnership with WHO and the government of Scotland.

*See page 6 for more details.*

**Action 1.10**

Following our hosting of the first World Indigenous Peoples’ Conference on Viral Hepatitis in 2014, we will organise a follow up meeting to continue to discuss innovative solutions to tackle the burden of hepatitis among this group.

**Action 1.11**
Strategic Goal 1

Key Performance Indicators

2015

- 100 governments participating in World Hepatitis Day
- 50 countries with national strategies either in place or in development
- The Alliance and/or patient advocacy groups engaged with government in 60 countries
- Regional Committees have adopted regional strategies in the last two regions
- Delivery of World Hepatitis Summit
- Delivery of the World Hepatitis Advisory Committee Meeting

World Hepatitis Summit

In response to the overwhelming global burden of viral hepatitis and the need to establish a forum to examine public health approaches to tackle the disease, the World Hepatitis Alliance is co-hosting the first World Hepatitis Summit in partnership with the Scottish government and the World Health Organization. The Summit will take place every two years as a joint project between the Alliance, different national governments and WHO and will bring together Alliance members, programme leads from member states, public health specialists, pharmaceuticals, global funders and the media.

In order to upscale the world’s response to viral hepatitis, the Summit aims to strengthen the community voice by promoting the exchange of experiences between patient advocates and organisations from all corners of the globe; to increase the number of countries developing practicable hepatitis action plans and to improve the implementation of plans through sharing of best practice; and to raise the global profile of viral hepatitis.

The Summit will also serve as a platform to enhance and consolidate the patient voice in viral hepatitis so prior to the start of the summit, the Alliance will also bring together its members for the first physical Annual General meeting and two days of capacity building workshops. Split by WHO regions, the workshops will be more targeted to address the local needs of the groups and will help them improve on their advocacy skills, media capabilities and fundraising capacity. There will also be the opportunity for our members to meet policy-makers from their countries and a session devoted to benefits for policy-makers in working with advocates.
Strategic Goal 2

Increased influence of the Alliance and its members

In order to stimulate political interest and action from policy makers evidence has shown that patient organisations have a pivotal role to play. 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 the Alliance and its members in order to increase our influence with governments and other key global health stakeholders. We will also deliver much needed capacity-building work in the six regions we operate in, focusing on upskilling existing members but also on creating new member organisations.

WHO Region of the Americas
WHO African Region
WHO South-East Asia Region
WHO European Region
WHO Eastern Mediterranean Region
WHO Western Pacific Region

We will host the first World Hepatitis Summit in partnership with WHO and the government of Scotland.

See page 6 for more details.

We will deliver regional workshops in which we will address our members’ needs such as building an advocacy voice, supporting their fundraising strategies, their dealings with the media, etc.

We will focus on creating new patient groups in high prevalence areas where no groups exist.
We will work with medical societies such as EASL, APASL, AASLD and ALEH and have booths at their main liver meetings.

We will develop a training program for healthcare professionals to help them create new patient groups with support from the Alliance.

We will work to increase our membership by ensuring that all existing hepatitis patient groups become members and by supporting the creation of new groups.

We will attend/be visible at high profile conferences (other than viral hepatitis).

We will use our special consultative status with the United Nations Economic and Social Council (ECOSOC) to provide our expert opinion on matters related to viral hepatitis and to engage with their statements, thus influencing the global health agenda.

We will work with medical societies such as EASL, APASL, AASLD and ALEH and have booths at their main liver meetings.

We will expand our interaction and partnership with NGOs in related areas such as International AIDS Society, Union for International Cancer Control, Pan American Health Organization, and International Drugs Policy Consortium.

Activities took part all over the world for World Hepatitis Day 2014. Clockwise from top left: Ghana; Romania; Malaysia; Democratic Republic of Congo; Egypt; United States; Austria
We will expand our interaction and partnership work with relevant inter-governmental organisations, such as ASEAN, MERCOSUR, APEC and CICA.

We will continue to develop and promote tools to support our members’ work such as our tool to customise and download posters and our tool to create multilingual leaflets.

Examples of the World Hepatitis Day posters customised by members with the Alliance poster tool

Strategic Goal 2
Key Performance Indicators

2015
- Training DVD for clinicians developed
- Partnership with 3 international non-hepatitis organisations
- 6 regional workshops delivered
- Delivery of World Hepatitis Summit

Membership
- 10 new members each year

Liver Meetings
- Be present at EASL and AASLD

The World Hepatitis Alliance booth for AASLD 2014 set up to showcase the work of the Alliance and its members
Strategic Goal 3
Greatly increased profile of viral hepatitis

Viral hepatitis is a major public health issue. It is the 7th leading cause of death worldwide, killing more people than HIV/AIDS every year. We will continue to advocate for a higher profile and priority for viral hepatitis.

Top 10 causes of death worldwide

1. Ischaemic heart disease
2. Cerebrovascular disease
3. Chronic obstructive pulmonary disease
4. Lower respiratory infections
5. Alzheimer’s disease
6. Lung cancer
7. Viral hepatitis
8. Road injuries
9. HIV/AIDS
10. Diabetes

Source: Global Burden of Disease Study 2013

The World Hepatitis Alliance represents the voice of 400 million viral hepatitis patients by attending World Health Organization meetings and providing expert advice to Ministers of Health from around the world. By attending and contributing to these high level meetings, the Alliance is at the forefront of global advocacy and gains opportunities to raise viral hepatitis higher up the global agenda.
We will work to embed hepatitis in all the developing global health trends.

**Action 3.2**

We will work with these countries in particular to mobilise resources for hepatitis, including the engagement of global donors such as the Global Fund, the World Bank, the Gates Foundation, USAID, DFID, etc.

**Action 3.3**

We will work with IARC (WHO’s cancer research arm) and other oncology partners to ensure that tackling viral hepatitis is seen as a key component of cancer and therefore non-communicable disease prevention.

**Action 3.4**

We will continue to work with champion countries to promote hepatitis as a major public health and to propose World Health Assembly Resolutions.

**Action 3.5**

We will host the first World Hepatitis Summit in partnership with WHO and the government of Scotland.

*See page 6 for more details.*

**Action 3.6**

We will co-ordinate World Hepatitis Day in partnership with WHO.

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**Strategic Goal 3**

**Key Performance Indicators**

2015

- Delivery of Global Hepatitis Summit
- 150 countries participating in World Hepatitis Day
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