World Hepatitis Alliance

Quarterly Report

October - December 2017

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Quarterly report
October - December 2017

Our strategic plan clearly states what we will do in order to make the biggest impact and make a major contribution towards improving the lives of millions of people living with viral hepatitis. This quarterly report covers our progress towards the ambitious objectives we have set for ourselves for the months of October, November and December 2017.

Our core areas of work

1 Raising awareness of viral hepatitis

2 Advocating for viral hepatitis

3 Ending the social injustice of viral hepatitis

Key Highlights

World Hepatitis Summit 2017

750 DELEGATES ATTENDED

900 PIECES OF MEDIA COVEAGE ACROSS **53** COUNTRIES

82 PROGRAMME MANAGERS ACROSS **65** COUNTRIES

11 MINISTERIAL REPRESENTATIVES

PRE-SUMMIT MEMBER CONFERENCE
World Hepatitis Summit 2017

214 INDIVIDUALS FROM **68** COUNTRIES ATTENDED

6 GOVERNMENTS ENDORSE NOHEP

World Hepatitis Alliance

HOLDING GOVERNMENTS ACCOUNTABLE REPORT LAUNCHED

WHITE PAPER ON ECONOMIC AND DEVELOPMENT CASE LAUNCHED

FINANCING STRATEGY TEMPLATE WEBSITE LAUNCHED

7 POLICY EVENTS ATTENDED

WHA 2018-2020 STRATEGY LAUNCHED

4 NEW MEMBER ORGANISATIONS

1 RAISING AWARENESS OF VIRAL HEPATITIS

Actions

World Hepatitis Day - celebrating our global awareness day

This quarter we started preparations for World Hepatitis Day 2018 (WHD2018). Continuing with the theme of ELIMINATE HEPATITIS, the campaign will centre on increasing diagnosis and WHA's organisational focus of 'Finding the Missing Millions'. The theme and focus for WHD2018 were announced at the Pre-Summit Member Conference in Brazil, 30-31 October 2017. More details will be presented in Q1 of 2018.

NOhep - expanding awareness-raising activities beyond a single day, increasing the support for viral hepatitis and the impact on the ground

In this quarter we continued to make significant progress implementing the strategy:

NOhep Communications Strategy

The NOhep working group had the opportunity to meet at the World Hepatitis Summit (WHS2017) to develop and agree upon the 2018 NOhep strategy. The three key objectives for 2018 are to build brand recognition, mobilise and expand the NOhep supporter base and drive advocacy activity.

NOhep Visionaries Programme

Medical Professionals: This quarter we secured commitment from 17 leading medical professionals in the Americas Region. They spearheaded the launch of the programme at The Liver Meeting in October. To date, the NOhep Medical Visionaries Programme has gained over 250 supporters globally, and this is growing daily. Find out more here.

Governments: On day one of WHS17, we launched the NOhep Visionaries Programme for Governments. Six government representatives publically endorsed the movement on stage in front of a delegation of 750 people. These countries were Bangladesh, Brazil, The Gambia, Georgia, Egypt and Mongolia. Find out more here.

NOhep at WHS17

The NOhep presence at WHS17 was strengthened by the NOhep booth and media

wall in the foyer area. We used these spaces to leverage the launch of the Visionaries Programme for Governments with the overall goal being to engage and educate delegates about the movement and encourage them to sign up. A selection of factsheets on NOhep and the Visionaries Programme were made available and we also had other materials that were provided to us by our supporters.

In addition, we held a 90 minute session at the WHA Pre-Summit Member Conference (please refer to the WHA Pre-Summit Member Conference section for additional information) to demonstrate the global impact NOhep is having across the world. We invited supporters from different regions to present their national NOhep activities to other WHA members. You can find all of the presentations here.

We also used the event to implement a highly successful and engaging social media campaign. Overall it was a great success with NOhep hashtag trending on Twitter and a result of 20.9 million impressions. In addition, 25% of all #HepSummit2017 tweets also contained #NOhep.

NOhep website re-launch

To ensure that the movement continues to gain momentum we conducted a website audit in Q4 which showed that slow load times and a poor navigation were reducing signs-ups. In response, we embarked on a redesign in time for WHS17. This resulted in a 70% increase in traffic to the website during the event, which led to an 11% sign up conversion of Summit delegates. Check out the new website here.

Increase in the level of NOhep supporters

2017 has been an incredible year for the NOhep movement. In this quarter alone NOhep actions have increased from 66,557 to 80,264, leading to sign-ups from over 120 countries. In the last year, we have more than doubled the amount of likes and followers on the NOhep Twitter and Facebook pages; from 506 likes to 1271 on Facebook and from 976 on Twitter to 2,000. This huge increase is largely thanks to our strong social media presence and engagement with global events like the International Liver Congress, The Liver Meeting and WHS17.

The reality of viral hepatitis - illustrating the lives of the 325 million people worldwide living with viral hepatitis to bring home the reality of the disease beyond the statistics

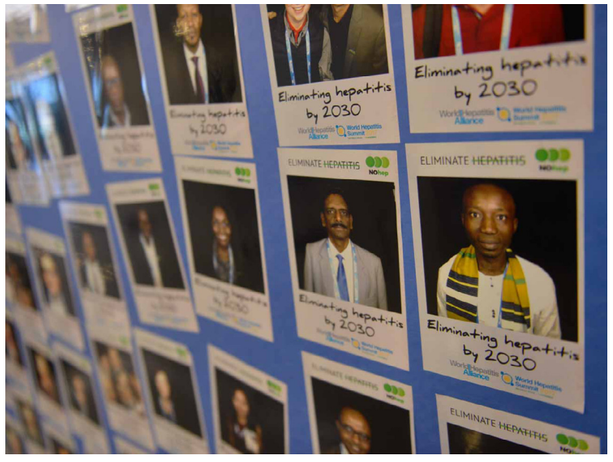
Wall of Stories

This quarter we continued to put the human side of living with viral hepatitis at the heart of our communications. We promoted the Wall of Stories through our social media channels and by profiling a different story in hepVoice each month.

World Hepatitis Summit

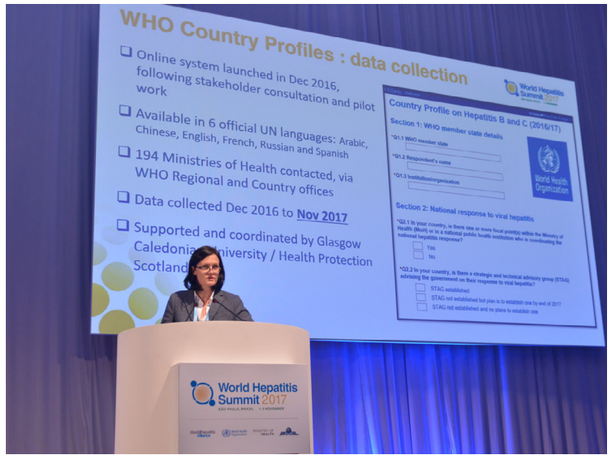
We used WHS17 as an opportunity to put a spotlight on the stories of people living with viral hepatitis. We produced six short videos with our members in Australia, Mexico, Russia, Viet Nam, Uganda and the United States, which covered topics including stigma and discrimination, receiving a diagnosis and treatment. The testimonials were shown throughout the main programme at WHS17 to highlight the devastating impact viral hepatitis has on peoples' lives and remind delegates why immediate action must be taken. Watch the videos here.

We also encouraged delegates to put a human face to the elimination goal by having their photo taken in a photo booth at the WHA stand. A total of 391 photos were taken. This provided a powerful reminder that the elimination of viral hepatitis will not be possible without people. Check out the photos here.



Data - advocating for consistent and reliable data on the diseases and develop and promote our own data

Agree on consistent global data



This quarter highlighted that inconsistencies still remain with viral hepatitis data. In the lead up to WHS17, we collaborated closely with the World Health Organization (WHO) to agree on a data set to inform media activities. However, given the lack of substantiated national data available we were unable to reach a consensus. As a result, we used data from the Centre for Disease Analysis (CDA) to support our media outreach. This example reiterates the urgent need for a consistent global and national data set in viral hepatitis. Moving forward, we will continue to work towards reaching agreement on data, especially in regards to diagnosis – our key strategic focus for 2018-2020. Globally, WHO estimate that approximately 10% of people with HBV and 20% of people with HCV have been diagnosed, yet many of these people are unaware and have not been linked to care, and as such are not eligible for treatment or able to access it and so should not properly be considered diagnosed. This will impact reaching WHO's elimination targets.

Country responses on hepatitis B and C

An interim report on the WHO Country Response profiles (2016/2017) was delivered by Glasgow Caledonian University (GCU) at WHS17. A global overview of the 132 countries that have responded to date highlighted that countries who involve civil society are more likely to have national plans in place and those plans are more likely to be funded. The presentation can be accessed here.

WHO and GCU are still accepting responses from countries and collaboration around the results of our civil society survey and the WHO Country Response Profiles is ongoing.

Holding Governments Accountable: WHA Civil Society Survey

This quarter we published the 'Holding Governments Accountable: WHA Civil Society Survey Global Findings Report', which is based on the findings of our civil society survey. The report highlights that more needs to be done to ensure that stigma and discrimination is addressed and civil society is meaningfully involved in the response.

The report was released at WHS17, with key messages presented within Strategic Direction 1 (SD1). It was also promoted at the event with an infographic based on the findings around stigma and discrimination. It will be further disseminated around key dates in 2018, such as Zero Discrimination Day on 1 March.

Sustainable Development Goals - demonstrating how tackling viral hepatitis goes beyond good health and wellbeing and contributes to the achievement of many other Sustainable Development Goals

On 12 December we used Universal Health Coverage Day as a hook to stress that efforts to eliminate viral hepatitis contribute to achieving universal health coverage. On social media we used our infographic to highlight how a comprehensive viral hepatitis response helps to achieve numerous SDGs.

SUSTAINABLE DEVELOPMENT GOALS

Target 3.3: combat viral hepatitis

3 GOOD HEALTH AND WELL-BEING

Combatting viral hepatitis goes beyond a health issue
Eliminiating viral hepatitis will successfully contribute to achieving many other targets

- 3.1: Reducing maternal mortality
- 3.4: Reducing mortality from non-communicable diseases
- 3.5: Preventing and treating substance use disorders
- 3.8: Achieving universal health coverage
- 3.b: Access to affordable medicines and vaccines
- 3.c: Health financing and health workforce

1 NO POVERTY
1: Ending poverty

6 CLEAN WATER AND SANITATION
6: Managing water and sanitation

10 REDUCED INEQUALITIES
10: Reducing inequality in access to services and commodities

16 PEACE, JUSTICE AND STRONG INSTITUTIONS
16: Promoting inclusive societies that promote non-discrimination

17 PARTNERSHIPS FOR THE GOALS
17: Financing and capacity building for implementation

2 ADVOCATING FOR VIRAL HEPATITIS

Actions

Political will - building the case for eliminating viral hepatitis and supporting governments fulfill their commitment

HCV and HBV – developing global business cases

This quarter we used the findings of our white paper on the economic and development case to develop a comment piece for *The Lancet Gastroenterology & Hepatology* journal. The article, which was published to coincide with WHS17, called for better donor involvement in the response to viral hepatitis. The full text can be accessed here.

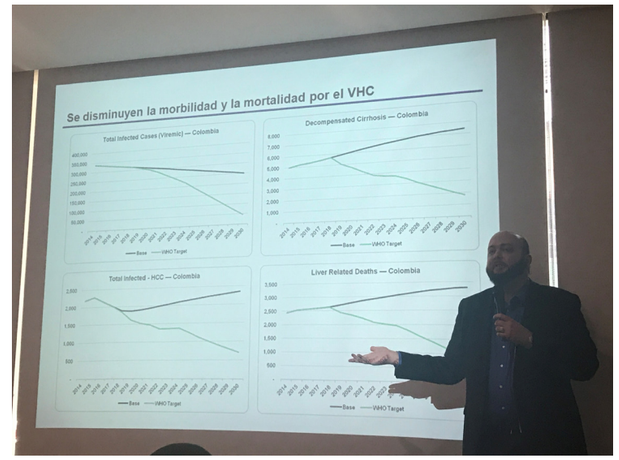
Publishing this article was the first step in our dissemination plan for this project and in early 2018 we will make the white paper available to our members and other stakeholders as an advocacy tool.

Financial Barriers to Elimination of Hepatitis C in Low and Middle Income Countries - assisting countries with costing, financing and investment case development

The Clinton Health Access Initiative (CHAI) and the Centre for Diseases Analysis (CDA) were selected to carry out this project - CHAI in Nigeria and CDA in Colombia - based on both their experience in the area of financing and their relationship with Ministries of Health.

Colombia

In October CDA convened a second technical working group meeting in Colombia to sign off the costing inputs and investment case and to discuss financing options for the scale up of their viral hepatitis programme. Following the meeting, the Colombian Programme Manager for viral hepatitis presented a summary of these discussions and highlighted Colombia's plan to scale up treatment during the Strategic Direction 4 (SD4): financing for innovation session at WHS17.



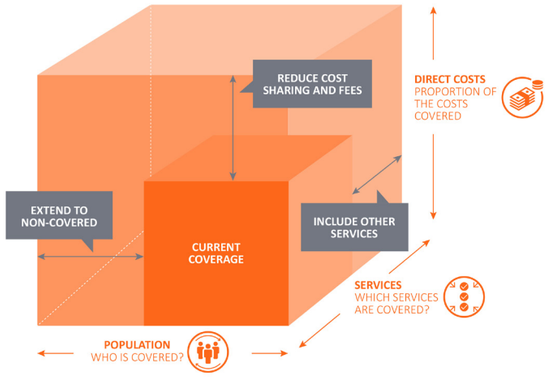
CDA are now drafting the project report, which, when finalised, will appear as a case study on our National Viral Hepatitis Programme Financing Strategy Template website.

Nigeria

The first technical working group meeting was held in Nigeria in October and the outcomes of this meeting are available as a case study on our National Viral Hepatitis Programme Financing Strategy Template website here. Work is now ongoing by CHAI to agree costs and input assumptions with stakeholders in Nigeria. Discussions on the financing options are due to take place in the first quarter of 2018.

A viral hepatitis financing strategy blueprint for countries

This quarter we collaborated closely with CHAI to finalise the text and design for the National Viral Hepatitis Programme Financing Strategy Template website. The website was launched as part of WHA's presentation within SD4: financing for innovation session at WHS17. The website can be accessed here.



This website will serve as a guide for national governments on how to adopt a strategic approach to costing and financing their viral hepatitis programme. Using a mix of theory and case studies, it explores each of the following steps which are required as part of a comprehensive financing process with particular emphasis on financing strategies: costing, creating an investment case, budgeting and catalytic financing strategies. Built in is an interactive costing tool to help countries that want to start looking at this themselves. Importantly, the website also highlights the important role advocating for financing has in achieving a funded viral hepatitis programme.

Informative handouts about the website were also made available for all WHS17's participants. Further promotion to policy makers and our members via our communication channels is ongoing.

World Hepatitis Summit (1-3 November 2017)

In this quarter, over 750 delegates from 106 countries convened at the World Trade Center in São Paulo, Brazil for the second World Hepatitis Summit.
This year's meeting was a joint initiative between the World Hepatitis Alliance (WHA), WHO and the Brazilian Government and it brought together a global audience of civil society groups, WHO representatives and its Member States, patient organisations, policy-makers, public health scientists and funders.

Sixteen months' of hard work cumulated in a spectacular event that was opened by WHA CEO Raquel Peck and the Honourable Ricardo Barros, Minister of Health for Brazil. Over the three days, 100+ international speakers presented on ways to achieve the elimination of viral hepatitis.

Government Representation

WHS17 was specifically designed as a platform for civil society and government to come together for the benefit of viral hepatitis patients. In total, 82 programme managers across 65 countries were in attendance, compared to 42 in 2015. In addition, 11 ministerial representatives from Brazil, China, Egypt, Georgia, Lesotho, Malta, Mongolia, Pakistan, Sudan, Syria and Uganda demonstrated high-level global commitment on stage.

In order to bring these two audiences together, significant work was undertaken by the Organising Committee and its partners to identify and invite national Programme Managers to the meeting. Despite concerted and collaborative efforts throughout the production cycle, this has remained one of the primary challenges for the event. In large part, this was because data for Programme Managers isn't collected and monitored globally and doesn't exist in a single place. As such the Summit team and WHO had to go through the slow process of acquiring and qualifying it, whilst the event was already in production.

Similarly, many Programme Managers did not speak English and non-funded Programme Managers in developing or low income countries did not have budget for international business travel.
It also became obvious during the marketing period that Programme Managers often weren't dedicated only to viral hepatitis but also worked with a co-infection responsibility and focus across a number of diseases – and for whom viral hepatitis wasn't necessarily a priority. As such, many of the project's difficulty in securing viral hepatitis Programme Managers were symptomatic of the problems of the disease's low profile relative to other conditions, including HIV/AIDS or TB.

Civil Society Response

Government commitment was further strengthened as the event concluded with the announcement of the São Paulo Declaration from high level government representatives. This document reaffirmed government commitment to eliminate the disease. In response, we convened civil society and patient advocates and launched the São Paulo Community Declaration on Viral Hepatitis, demanding the involvement of people living with the disease in the hepatitis response.

WHS17 media coverage

To raise awareness of viral hepatitis and profile WHS17, we launched an international media campaign. Over the course of the event we distributed seven press releases to media worldwide, which resulted in over 900 pieces of coverage in 53 countries, reaching approximately 400 million across the globe. Coverage was secured in a mixture of online, broadcast and print outlets including BBC World News, Lancet, El Mundo and AFP. This was a massive achievement given that viral hepatitis is usually largely ignored in the media. We will continue to leverage these media relationships to ensure the disease gets the recognition it needs and deserves.

Feedback has been universally positive for the event – with delegate satisfaction scores of 91% Excellent. The full report on WHS17 will be available in the first quarter of 2018.

The Why of Viral Hepatitis - sharing reasons why viral hepatitis should be championed by everyone

No updates this quarter.

Capacity / Capability building - tackling the obstacles that inhibit our members from making an even bigger impact on the ground

WHA Members Pre-Summit Conference

The WHA Pre-Summit Member Conference was held on the 30-31 October in São Paulo, Brazil. The conference convened 214 individuals from 68 different countries. Of those in attendance, 158 were members of WHA representing 138 different viral hepatitis patient groups.

The Pre-Summit Member Conference was a unique opportunity for civil society organisations from around the world to learn from one another and experts in their field. With capacity building sessions on access to medicines and diagnostics and the NOhep movement as well as the opportunity for delegates to set their own topics in our Open Space session, it proved to be an engaging and informative conference which put the patient voice at the centre.

The event also enabled us to bring our members and the WHO regional focal points together to discuss issues within their region. Participants found these sessions the most useful.

Understanding that networking and informal peer-to-peer learning is an integral part of this conference, we held a conference dinner on the first evening. The dinner was very well received and further contributed to the feeling of community that this unique event fostered.

The full report on the Pre-Summit Member Conference will be available in the first quarter of 2018.

WHA civil society survey

The findings from the civil society survey were disseminated via our 'Holding Governments Accountable: WHA Civil Society Survey Global Findings Report'. The report is a powerful advocacy tool which clearly sets out what actions are required by civil society if they are to hold governments to the commitments they have made to involve them and address stigma and discrimination. Please refer to "Holding Governments Accountable: WHA Civil Society Survey" section for additional information.

3 ENDING THE SOCIAL INJUSTICE OF VIRAL HEPATITIS

Actions

Stop the stigma and discrimination - giving people with viral hepatitis a voice and exposing prejudices suffered

Topic given prominence at the World Hepatitis Summit 2017

As highlighted above, we broadcasted a series of patient testimonials at WHS17 to highlight the stories of those living with stigma and discrimination. These included a testimonial from prominent celebrity Bollywood actor Amitabh Bachchan who is currently living with hepatitis B. Watch his video message here.

Equity - making the lack of access to lifesaving interventions a priority

Efforts must reach the furthest behind first

From Indigenous populations to children and people who use drugs to prisoners, often overlooked groups featured heavily in discussions at WHS17. Speakers throughout the event stressed the need for harm reduction policies while presentations and side meetings looked at specific issues including service delivery for priority populations, viral hepatitis in children and the burden of hepatitis D. A unique interactive workshop on delivering equitable services encouraged delegates to work together and think differently by applying an equity framework to imagined country scenarios. Fifteen civil society organisations including Médecins du Monde (MDM), International Drug Policy Consortium, Treatment Action Group, Coalition Plus and WHA launched a declaration calling on political leaders to remove barriers that prevent people using drugs from accessing services, including criminalisation of drug offences and to adopt a public health approach. Evidently, one of the resounding messages of WHS17 was not only to leave no one behind but ensure that efforts reach the furthest behind first.

STRATEGIC PARTNERSHIPS

This quarter we continued to work with important partners to advance the viral hepatitis response and WHS17 was a great opportunity to meet with many of them and discuss plans for 2018.

Furthermore, we have managed to secure funding to support two key posts at WHO EURO and WHO AFRO (2018-2019). We will work closely together with the focal points to strengthen the efforts in the regions and continue to work with the other regions to ensure countries are supported to reach their elimination targets.

Raising awareness

Government of Brazil / World Health Organisation / CEVHAP / ELPA / CDC

Government of Brazil / WHO: In preparation for WHS17 in Brazil, we worked with our event partners to develop a strong media strategy aiming to generate as many pieces of coverage as possible and raise the awareness of hepatitis on the global stage, as well as nationally.

WHO/CEVHAP/ELPA/CDC: as members of NOhep's steering committee, we all met at WHS17 to discuss plans for 2018 and form strategies to grow the movement.

Advocating for viral hepatitis

Government of Brazil / Liver Societies / CHAI / CDA

Government of Brazil: in the run up to WHS17 the Brazilian government conducted many high level meetings in Geneva with other Member States to develop the São Paulo Declaration, aiming to reiterate the countries' commitment to eliminate viral hepatitis by 2030. We were invited to participate and represent the people living with the disease. The declaration was endorsed and officially launched in the last day of WHS17.

Liver Societies: The main Liver Societies in the field (AASLD, EASL, APASL and ALEH) came together at WHS17 to host a side meeting focusing on their role towards viral hepatitis elimination. In preparation for this important meeting, a series of calls were organised to shape the programme and we were involved in those discussions.

CHAI and CDA: This quarter we continued our financing work in Colombia (in partnership with CDA) and in Nigeria (together with CHAI). As reported earlier, both financing initiatives are progressing well and national civil society is engaged with them.

Ending Social Injustice

MDM / Medicines Patent Pool (MPP)

MDM: This quarter we supported MDM with the development and dissemination of an important declaration on viral hepatitis and drug use, which they spearheaded. Please refer to the equity section for further information.

MPP: As a member of MPP's expert advisory group, we were invited to participate in their AGM and hear about their current workplan in HIV, TB and hepatitis C as well as discuss future plans.

MEETING ATTENDANCE

ELPA University: Budapest, Hungary, 30 September (goal 1)

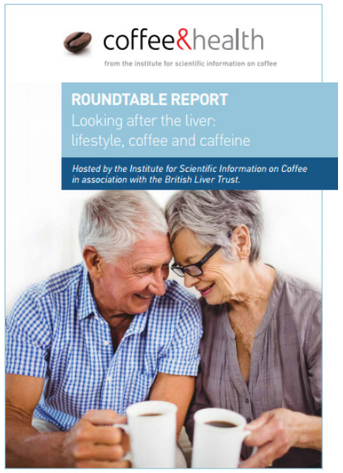
We were invited to give a seminar at ELPA University on the subject of leveraging community collaborations to enhance national activities. The interactive session helped build capacity among ELPA members (many of which are also WHA members), and in particular, emphasised the importance of collaboration, a cornerstone of WHA's mission. We also encouraged groups to think more strategically about their World Hepatitis Day activities and encouraged NOhep sign-ups by introducing the movement to many organisations. Evaluation forms showed that there was a clear understanding of the benefits of collaborating with other organisations, which is a crucial part of WHA's role as convenor.

United Arab Emirates Ministerial Meeting: Dubai, UAE, 3 October (goal 2)

This meeting brought together ministerial representatives and programme managers from seven Emirate states to discuss eliminating viral hepatitis. WHA President presented on the global viral hepatitis landscape and highlighted the different challenges and opportunities that exist for governments. WHA's presentation touched on financing, hard-to-reach populations, diagnosis and treatment. This was a unique meeting for the Emirates, which we hope will drive action towards elimination.

Coffee and Health Roundtable: London, UK, 18 October (goal 1)

We were invited by the Institute for Scientific Information on Coffee to participate in a roundtable discussion on the benefits of coffee on liver health. The theme of the roundtable was "Looking after the liver: Coffee, caffeine and lifestyle factors" discussing lifestyle changes such as diet that HCPs can educate patients with. The roundtable was hosted in association with the British Liver Trust. The outcome of the meeting was a scientific report, which you can access here.



ELPA Stakeholders Meeting: Palermo, Italy, 27 November (goal 1)

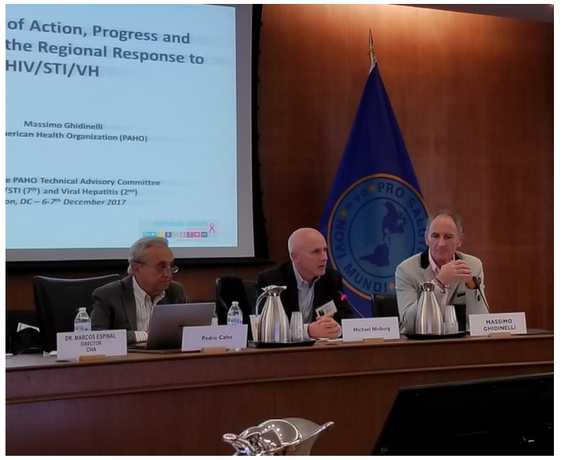
WHA Board Members Ivana Dragojevic (Europe) and Ammal Mokhtar Metwally (Eastern Mediterranean) presented WHA's 2018-2020 strategy at ELPA's annual stakeholder meeting. The meeting was attended by a number of civil society groups including ECDC, EATG, CORRELATION NETWORK, INHSU and others, who also shared their plans for 2018. One of the main ideas that came out of the meeting was to create a separate testing week for viral hepatitis. We will explore this further in 2018.

HCV Elimination Seminar: Dublin, Ireland, 29 November (goal 2)

We were invited by Hepatitis C Partnership, our member organisation, to give a key note address in Dublin, Ireland. The half-day meeting was opened by Catherine Byrne T.D. Minister of State at the Department of Health with responsibility for Health Promotion and the National Drugs Strategy, who listened intently to our presentation about Ireland's slow progression to meet the WHO targets. According to Polaris Observatory, Ireland is lagging far behind other European countries and must scale-up screening and treatment to meet the 2030 targets.

PAHO Meeting: Washington, USA, 6-7 December (goal 2)

WHA Board Member for Americas (Su Wang), WHA Regional Advisor for Americas (Patricia Vélez Möller) and our President-Elect (Michael Ninburg), attended the Pan American Health Organization (PAHO) Technical Advisory Committee to assist PAHO with leading and supporting the region in moving forward and achieving the goals of hepatitis elimination by 2030. The two day meeting cumulated with the development of recommendations on strategic key interventions with the goal of enhancing PAHO's technical collaboration to accelerate the regional response towards elimination targets. These were presented to Dr. Carissa F. Etienne, Director of PAHO, who received them favourably.



Regional consultation on strengthening the role of civil society organisations:Cairo, Egypt, 20 December (goal 2)

We attended the HCV treatment update guidelines development group meeting to discuss which of the new drugs should be recommended (Glecaprevir/Pibrentasvir, Sofosbuvir/Velpatasvir, Sofosbuvir/Velpatasvir/Voxilaprevir) either alongside or in place of current recommendations. In addition, the GDG considered whether there is enough evidence to recommend treating everyone rather than prioritising certain groups. The GDG came to some tentative conclusions but there is still much to be finalised before it goes to the Guidelines Review Committee, which will make sure that any recommendations have followed the strict GRADE process and are therefore justified.

ORGANISATIONAL UPDATES

Governance

2018 – 2020 Strategy

In this quarter, we launched our strategic plan for 2018 – 2020, which unveiled our new, refreshed mission to "Harness the power of people living with viral hepatitis to achieve its elimination". Read it here.

We took the opportunity of having all our members under the same roof at the Pre-Summit Member Conference to gather for an Extraordinary General Meeting. At the meeting, Raquel Peck, CEO, shared the story behind our new, refreshed mission and introduced WHA's focus of "Finding the missing millions" for the next three years. This was accompanied by discussions on members' engagement and how crucial it is for us to work together if we are to achieve elimination. The meeting was closed by Michael Ninburg, WHA President for 2018 – 2019.

To coincide with the launch of our 2018-2020 Strategic Plan, we have also developed a special video that celebrates WHA's trailblazing journey so far and sets out our vision for the future. Watch the video here. (Français ici) (Español aqui)

WHA Board Meeting

With all WHA Board Members attending WHS17, this was an opportunity to hold a board meeting. Board Members kicked off the meeting by sharing their thoughts on the Pre-Summit activities as well as initial feedback from members in their region. 2018 activities were also briefly discussed. It was agreed that virtual Board meetings should take place quarterly from January 2018 and that the Board should take every opportunity to meet face to face.

Finally, the Board unanimously confirmed Michael Ninburg as President, commencing in January 2018, and Karine Belondrade, COO, as Acting CEO from January to July to cover Raquel Peck's maternity leave.

Welcoming new members

In December the Board approved four new organisations for membership. Two of these members come from Colombia, a country where we have not had any member presence until now. The remaining two members comefrom USA and Argentina. Sadly, we lost one voting member based in the USA, Hepatitis Foundation International, who ceased operating after 23 years. We now have 256 members spanning across 87 countries (123 voting members and 133 non-voting members).

Fundación Ifarma (Colombia) – Non-voting

They have recently moved away from just focusing on HIV and now work predominantly in the field of viral hepatitis. They are currently working on a project with Coalition Plus called "Regalate Un Minuto" (Give yourself a minute). This project focuses on increasing access for hepatitis C treatment in Colombia.

Asociación Norte Santandereana de Hepatitis Virales (Colombia) – Non-voting

This organisation first applied to become members in early 2016 but due to communication breakdown it has taken a long time to process. Patricia Velez (WHA Regional Advisor for Latin America) helped with the translation and application process for this organisation and they have her endorsement. The organisation's efforts are predominantly focused on raising awareness and educating the population. They have provided evidence to show that they were active in the development of the Colombian National Plan for Viral Hepatitis 2014-2017.

Community Initiatives (USA) – Non-voting

We approached Community Initiatives to apply directly for membership after receiving an original application from San Francisco Hep B Free Project (SFHBF). Community Initiatives are the fiscal agents responsible for the San Francisco Hep B Free Project. SFHBF is a citywide campaign to turn San Francisco into the first hepatitis B free city in the nation. They aim to provide free and low-cost hepatitis B testing and vaccinations to Asian and Pacific Islander (API) throughout San Francisco.

ABV - Asociación Civil Buena Vida (Argentina) – Non-voting

This highly-active organisation is predominantly a patient support group. Their main activities consist of participating in round tables. Their aim is to occupy a space in the media's agenda to position the problem of viral hepatitis from the patient's perspective.

WHA TEAM CHANGES

After four years of commitment to the organisation, we are delighted to announce that Bridie Taylor has been promoted to Communications Manager. Bridie joined the team as an intern in 2014 and rapidly becoming an asset, she has gone from strength to strength in the organisation.

We are also pleased to note that Ben Murray, Office Manager, will be taking on further responsibilities within the operations team from January 2018 as Office Manager / Operations Assistant.

Additionally, following her exceptional work as Project Assistant at the WHS17, Naomi Robertson will re-join the team as Project Coordinator working across different projects until the summer. They are all are very valuable assets to the WHA team and will be instrumental to the successful delivery of our ambitious strategy.

WELCOME

Finally, this quarter we are also pleased to welcome Ruth Jessop, Part-time Finance Manager as a new addition to our operations team. Ruth will lead on all aspects of finances of the organisation and will be responsible for the maintenance of the organisation's financial records including ensuring that the WHA complies with all financial regulations. Ruth has extensive experience managing the finances within both the for-profit and the third sector, most recently at the Local Clinical Research Network of the University of Leeds. She is particularly excited at the opportunity to use her skills to play a part in achieving our goal of eliminating viral hepatitis by 2030.

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