

## Side event application / Formulaire de demande de réunion parallèle

### Contact

Name/Nom: Ministry of Internally Displaced Persons from the Occupied Territories, Labour, Health and Social Affairs of Georgia	Date of application: 14.03.2019
Delegation(s)/Délégation(s): Georgia	
Telephone, Email/Téléphone, courriel: (995) 0322510026	

### Concept

<p>Description of proposed side event, including objective, expected results, proposed programme and speakers* / Description de la réunion parallèle proposée, y compris les objectifs, les résultats attendus, l'ordre du jour et les orateurs* :</p> <p>In 2012 the Government of Georgia declared the healthcare as its political priority and started implementing major reforms to increase accessibility and affordability of population to the healthcare services. In 2013, Government introduced a Universal Healthcare Program, aiming at improving the general population's access to healthcare, particularly those relatively less well-off and being less prone to impoverishment or catastrophic out-of-pocket spending on healthcare. This was achieved through a strong political commitment and process to create an equitable health financing system.</p> <p>Health policy oriented towards the population health and well-being was reflected by unprecedented increase in state allocations for health: healthcare budget doubled; Public health spending as a share of GDP has also increased from 1.7% to 3.1%. UHC program enabled basic benefit package coverage to the 100% of country population and financing of planned ambulatory care, elective surgery, chemo-, hormone-, and radiotherapy, obstetrics and cesarean sections to uninsured and basic drugs for target groups of the population.</p> <p>As one of the best examples of the Universal Health coverage in the country we would like to introduce hepatitis C elimination program in Georgia. According to the latest population-based seroprevalence survey (2015), Georgia is among the countries with high hepatitis C prevalence. The national seroprevalence of Hepatitis C is estimated as 7.7% and the prevalence of active disease (HCV RNA positive) is 5.4%.which in absolute figures equals to 150 000 persons.</p> <p>Since 2011 Georgia started fragmented response to hepatitis C for selected groups of population: Interferon-based regimens for HIV/HCV co-infected patients financed by the Global Fund (150 patients per year since 2011) and all penitentiary patients (since 2013).</p> <p>Since 2015, after successful negotiations with Gilead Sciences and support of US CDC, WHO (HQ and Regional Office for Europe) and other partners, Georgia initiated unprecedented hepatitis C elimination program. National Hepatitis C Elimination Strategy and Action plan was elaborated, with the following targets set for 2020: 90% of HCV infected persons to be tested for the infection, 95% of people with chronic infection to be enrolled in treatment, and 95% of persons who receive treatment to be cured from HCV.</p> <p>Rapid development of the program shows that Georgia is above the world average in terms of HCV screening, active infection confirmation and treatment provided free-of-charge for entire population. As of February, 2019, more than 2.4 million screenings were performed, among which 1,519,217 were individuals with positivity rate 8.38%.</p> <p>Starting with 4 sites in 2015, currently 42 service centers in different cities, including 1 center in penitentiary system, are providing diagnostic and treatment services to the elimination program beneficiaries. It is planned to further decentralize services through extending HCV diagnostics and treatment into the primary healthcare system and harm reduction centers. Since the launch of the program in 2015 through January 28, 2019 49,853</p>
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patients completed the treatment. Direct-acting antiviral drugs (DAAs) show the high cure rates that reach 98.2%.

Progress also include significantly strengthened infection control and prevention monitoring and evaluation system; regular screening activities among PWID and their sexual partners; improved quality control mechanisms for blood banks; introduction of the unified electronic HCV screening module which captures data from all national HCV screening programs; HCV screening in more than 600 centers countrywide, including inpatient and outpatient facilities, prisons, Georgian Harm Reduction Network centers, pharmacies, etc.; research activities for the simplification of HCV diagnostics, including studies on HCV coreAg and various PCR approaches, massive awareness raising campaigns, establishment of HCV Hotline etc.

While 7-9% of those diagnosed starts HCV treatment worldwide, Georgia has the universal access to the hepatitis C diagnostic and treatment (DAAs). Furthermore, almost 44% of the target population have been already enrolled in the treatment that makes Georgia a model country in the world for hepatitis C elimination.

Objective of the side event is to promote advocacy, awareness, knowledge and partnerships for HCV elimination; To share Georgian experience and show that elimination of Hepatitis C is feasible and achievable with the strong Governmental commitment, international support, successful public private partnership; availability of modern HCV diagnostic and treatment methods; strong human resource capacity; adherence to principles of evidence-based medicine; existence of effective systems for implementing large-scale national and international health programs, including through multi-sectoral approach; availability of logistic and control mechanisms that effectively prevent leakage of medicines to local and/or neighboring markets; best practice experience in the field of HIV/AIDS that can be replicated for Hepatitis C programs.

Expected results are to advocate the countries to strengthen their efforts towards disease elimination through a strong political commitment, partnership and universal access to diagnostic and treatment services.

#### Proposed programme and speakers

Programme item	Facilitator / Speaker	time
Welcome and Introduction	Mr. David Sergeenko - Minister of Internally Displaced Persons from the Occupied Territories, Labour, Health and Social Affairs of Georgia	10 min
"Georgia as a model Country for Universal Access to the Hepatitis C Screening and Treatment" - presentation	Mr. David Sergeenko - Minister of Internally Displaced Persons from the Occupied Territories, Labour, Health and Social Affairs of Georgia	20 min
Q&A	All participants	30 min

#### Event details / details de la réunion

Date: 22/23 May (TBC)	Time/Heure: 10:30 – 11:30
Expected number of participants/Nombre de participants attendus : 100	
Exact title of the meeting/Titre exact de la réunion: Lessons Learned from Hepatitis C Elimination Program in Georgia	

#### Interpretation/Interprétation

Interpretation may be provided in the official languages and the estimated costs are as follows: 2 languages: 2561 CHF; 3 languages: 5123 CHF; 6 languages: 11953 CHF.

L'interprétation peut être assurée dans les langues officielles aux coûts estimés suivants : 2 langues-2561 CHF; 3 langues : 5123 CHF; 6 langues : 11953 CHF.

Are interpretation services requested? / L'interprétation est-elle requise ? Yes/Oui ☐ No/Non ☒

(If yes, which languages)/(Si oui, en quelle langue)

English/Anglais ☐ French/Français ☐ Russian/Russe ☐ Spanish/Espagnol ☐ Chinese/Chinois ☐ Arabic/Arabe ☐

Other language/autre langue:

**Invoice to be sent to/ Facture à envoyer à:**

Name/Nom

Postal address/ Adresse postale

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**Room Layout/Aménagement des salles**

Due to type of furniture and technical equipment in the room, the layout of the rooms cannot be changed. For information regarding the location and layout of rooms at the Palais des Nations, please see:

[http://www.unog.ch/80256EE60057CB67/\(httpPages\)/BAE3AF717207A5AF80256EF80049C552?OpenDocument](http://www.unog.ch/80256EE60057CB67/(httpPages)/BAE3AF717207A5AF80256EF80049C552?OpenDocument)

Le type de mobilier et les installations techniques dans les salles ne permettent pas de modifier l'aménagement de celles-ci. Pour tout renseignement sur l'emplacement ou la disposition des salles au Palais des Nations voir le lien :

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**\*Badges/ Badges d'accès**

WHA side events are for participants of the WHA and, as such, panellists and participants should be drawn from those participating in the Health Assembly.

Les réunions parallèles sont réservées aux participants de l'Assemblée; Les orateurs de ces réunions doivent donc être choisis parmi ceux-ci.

**Please complete the form and send it to / Merci de remplir le formulaire et de l'envoyer à**

[hqgoverningbodies@who.int](mailto:hqgoverningbodies@who.int)

**[by 29 March 2019](#)**