SHARED VISION
SHARED COMMITMENT

Toward a World Free of Viral Hepatitis
For Generations to Come

Activity Report
2019 - 2021

END HEP 2030
The Hepatitis Fund
We gratefully acknowledge

for incubating the EndHep2030 project and seed funding The Hepatitis Fund
With a limited lifespan to sunset in 2035, The Hepatitis Fund (a.k.a. “EndHep2030”) was conceived as a collective funding platform to mobilize public and private financial resources globally to accelerate action to eliminate viral hepatitis as a major public health threat, for a hepatitis-free world for generations to come.

The EndHep2030 project has been supported by:

[Logos of various organizations]

and individual donors and volunteers

[Logos of organizations]
## Contents

2. Foreword by the Co-Founders  
3. About the Hepatitis Fund  
5. The EndHep2030 Grants Programme  
7. Current Grants Portfolio  
9. The EndHep2030 M&E Framework  
11. The Evolution of the EndHep2030 Project  
13. Hepatitis by the Numbers  

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*It takes concerted global efforts to tackle a major public health threat like viral hepatitis. I urge international health funding bodies and private foundations, large and small, to join The Hepatitis Fund by stepping out of their comfort zones with bold and decisive actions. Hepatitis can’t wait.*

**Dr. SHIN Young-soo**, director emeritus, WHO Western Pacific Region
The World Hepatitis Summit (2 – 4 September 2015. Glasgow, Scotland) will go down in history as a note-worthy milestone in the global campaign to eliminate viral hepatitis as a major public health threat. It was during the summit that Wangsheng Li (then president of ZeShan Foundation) initiated a conversation with Dr. John Ward (then director of US CDC Division of Viral Hepatitis) and Dr. Shin Young-soo (then regional director for WHO Western Pacific region) to explore setting up an international funding mechanism to support efforts in hepatitis elimination, building on a tripartite partnership between the three organizations since 2009.

Fast-forwarding to summer 2019 while co-chairing the EndHep2030 initiative as a sponsored project of the Rockefeller Philanthropy Advisors (New York City), Wangsheng Li and Charles Gore (Founder of the World Hepatitis Alliance) began to set it in motion to transition the EndHep2030 project to be an independent grantmaking foundation dedicated to the elimination of viral hepatitis. Hence The Hepatitis Fund (aka “EndHep2030”), which remains the only hepatitis funding platform to date.

Having been incubating the EndHep2030 project since 2007, ZeShan Foundation, under the visionary leadership of its executive chair, the late Mrs. Laura Chen, became the seed funder for The Hepatitis Fund, while the Rockefeller Philanthropy Advisors provided start-up funding for the newly minted foundation. The rest is history.

As a young organization, little did we imagine we would be confronted by an unprecedented global pandemic like COVID-19. Led by a small group of highly dedicated volunteer Board Directors, The Hepatitis Fund managed to stay the course through institutional development and organizational growth: establishing a robust governance structure and management system, and a grants programme underpinned by a strong M&E framework.

Finally, the EndHep2030 project would not have been where we are today if it had not been for a group of highly committed thought leaders and experts who served as advisors and/or committee members throughout the project’s formulation phases.

Wangsheng Li
Co-Founder

Charles Gore
Co-Founder
The Hepatitis Fund (aka “EndHep2030”) is a tax-exempt, grantmaking charity foundation registered in the Canton of Geneva, Switzerland. The Fund is under the supervision of the Swiss Federal Department of Interior.

The Hepatitis Fund is governed by an international Board of Directors, which sets the strategic directions and operational guidelines for the organization.

Co-Founders:
Wangsheng Li and Charles Gore

Board of Directors:
- Gregg Alton
- Manal El-Sayed
- Etienne Gard, board secretary and general counsel (till July 2020)
- Charles Gore, vice president and treasurer
- Gottfried Hirnschall
- Kenneth Kabagambe
- Wangsheng Li, founding president (till February 2021)
- Hwei Lynn Lau
- Carol Tissot, board secretary and general counsel

The following governance documents are available for inspection upon request by concerned parties:
- Business Registration
- Exemption Letter
- Articles of Association
- Board Bylaws
- Policy on Conflict of Interest
- Policy on Safeguarding
- Policy on Grant Making
- Auditor’s Statement
- Statutory Financial Statement

Please send your request in writing to: admin@endhep2030.org

About The Hepatitis Fund

Official observer: Zeshan Foundation
The EndHep2030 Advisory Council

The scope of The Hepatitis Fund’s activities spans many areas concerning hepatitis elimination, prevention of mother to child transmission, and care interventions.

Members of the Advisory Council have broad expertise in policy and advocacy, programmatic aspects of hepatitis prevention and care; they advise the Board and contribute to programmes with their diverse perspectives and expertise.

Joan Block
executive director (ret.), Hepatitis B Foundation

Saeed Hamid
co-chair, Coalition to Eradicate Viral Hepatitis in Asia Pacific

Homie Razavi
executive director, Center for Disease Analysis Foundation

Lewis Roberts
director, Gastroenterology and Hepatology Cancer Center at the Mayo Clinic

Shin Young-Soo
director emeritus, WHO Western Pacific Regional Office

Su Wang
president, World Hepatitis Alliance

ZeShan Foundation

Shared vision. Shared commitment

The EndHep2030 project is a product of collective commitment and dedication by many individuals who are recognized as thought leaders and experts in the hepatitis space. We gratefully acknowledge in particular the following for their contributions to the project over the years leading to the establishment of The Hepatitis Fund:

Melissa Berman, President and CEO Rockefeller Philanthropy Advisors as fiscal sponsor (November 2017 – October 2019)

David Ho (ADARC), Chair, High-Level Roundtable on PMTCT. October 2010. Beijing, China

Gottfried Hirnschall (WHO HQ) and Ray Yip (Gates Foundation), Co-chairs, International Roundtable Summit on Funding for Hepatitis Elimination. June 2016. Hong Kong SAR, China.
The EndHep2030 Grants Programme

Recognizing viral hepatitis as a major public health threat globally, The Hepatitis Fund strategically focuses on the Asia and Pacific and Sub-Saharan African regions while not losing sight of the rest of the world. This geographic emphasis guides our grants programme by focusing on the following three strategic areas:

1. **Accelerating planning and implementation of national strategies**
   - Systems approach to achieving national elimination goals
   - Decentralizing hepatitis services and task shifting of hepatitis care to the most effective level of care
   - Strengthening hepatitis capacity at national and regional levels

2. **Integrating hepatitis services delivery with Universal Health Coverage**
   - Elimination of mother to child transmission of hepatitis B by integrating with antenatal care
   - Increase of birth dose of HBV vaccination coverage and inclusion of complete HBV vaccination in national immunization plans
   - Enhance equity and service accessibility by rolling out cutting edge technologies

3. **Strengthening public health response capability**
   - Establishing quality national data collection and modeling
   - Improving existing data systems for better policy formulation and planning
   - Integrating hepatitis with national sentinel network

The Hepatitis Fund’s strategic investments demonstrate how best to introduce or augment interventions in low-income or under-resourced settings to overcome regional, national, or local barriers that hinder viral hepatitis response efforts so that we can save more lives more quickly.
The Hepatitis Fund uniquely raises and directs funding to programs and initiatives that can achieve strong impact towards hepatitis elimination. The THF aims to provide the spark that stakeholders on the ground need to set transformative action in motion. This report contains key highlights of the catalytic work initiated in 2020, which will greatly improve the lives of those living with viral hepatitis.

Dr. Gottfried Hirnschall, director (ret.), WHO Department of HIV, Hepatitis, and STIs
**Current Grant Portfolio**

**Africa**
- **Grant Recipient:** University Teaching Hospital (UTH-HAP)
- **Purpose:** Implement a decentralized and integrated strategy through a national capacity building training programme in Zambia which could become a model for the African continent
- **Expected outcomes:**
  - 5 million people reached
  - 30,000 people tested
  - 2,000 people treated
- **Areas of implementation:**
- **Grant** US $ 530,125

**Africa/Zambia**
- **Grant Recipient:** Coalition for the Elimination of Hepatitis in the Andean region. (PAHO-SAM-ORAS-CONHU)
- **Purpose:** Support a regional approach to hepatitis policy change in the Andean Region as a pilot for broader use in the Americas Region
- **Expected outcomes:**
  - 130.5 million people reached
- **Areas of implementation:**
- **Grant** US $169,839

**Americas/Andes**
- **Grant Recipient:** Association for Social Development ASD
- **Purpose:** Demonstrate how to effectively increase hepatitis C screening and treatment by mobilizing rural health centres in high prevalence settings and then integrating hepatitis care into the regional healthcare systems
- **Expected outcomes:**
  - 110 million people reached
  - 40,000 people tested
  - 2,000 people treated
- **Areas of implementation:**
- **Grant** US $ 557,036

**Asia/Pakistan**
- **Grant Recipient:** Center for Disease Analysis Foundation, Inc.
- **Purpose:** Support national data analytics to inform policy formulation, national planning and implementation in ten African countries
- **Expected outcomes:**
  - 10 African countries reached
- **Areas of implementation:**
- **Grant** US $ 225,000

**Global**
- **Grant Recipient:** Columbia University
- **Purpose:** Develop a monitoring and evaluation framework for viral hepatitis catalytic funding.
- **Expected outcomes:**
  - High quality monitoring and evaluation tool for all hepatitis related grants
  - Better understanding of progress towards hepatitis elimination
- **Areas of implementation:**
- **Grant** US $45,523

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**Current Grant Portfolio**

- **Acceleration**
- **Integration**
- **Task-shifting**
## Current Grant Portfolio

<table>
<thead>
<tr>
<th>Grant Recipient</th>
<th>Purpose</th>
<th>Expected outcomes</th>
<th>Areas of implementation</th>
<th>Grant</th>
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</table>
| London School of Hygiene & Tropical Medicine | Expand public engagement in HBV/HCV and crowdsource to spur hepatitis policy | • Decreased stigma  
• Increased community engagement  
• Build local ownership of hepatitis programs |  | US $ 250,000 |
| World Health Organization | Develop and demonstrate the WHO-One Health Tool for costing of national hepatitis responses, and for adoption in all member states. | • WHO Regional Advisors for hepatitis trained in four WHO regions.  
• 5 countries reached  
• WHO-One Health Tool for standard for costing of national hepatitis responses developed to be used as the future standard for all countries |  | US $200,000 |
| World Hepatitis Alliance | Support efforts to maintain the momentum for a global campaign to eliminate viral hepatitis | • Global hepatitis community strengthened  
• Increased capacity for advocacy at the national, regional and global levels  
• Common acceptance that hepatitis elimination can be embedded in Universal Health Coverage post COVID-19 |  | US $32,970 |
| PATH Vietnam | Demonstrate an integrated viral hepatitis strategy to increase access to diagnostic and treatment services in major urban areas with high prevalence in East Asia (HepLink). | • 41 million people reached  
• 20,000 people tested  
• 90% of people treated |  | US $715,000 |
| The Peter Doherty Institute for Infection and Immunity | Develop and roll out an operational guide to assist countries in performing monitoring and evaluation in the WPRO and SEARO regions | • Increased capacity in the Asia Pacific Region to analyse the hepatitis landscape across countries  
• Augmented resources for advocacy  
• National planning, resource mobilization and allocation supported |  | US $225,000 |

**Funded areas key:**
- Biomedical Prevention
- Epidemiology
- Screening and Testing
- Human Resources
- Other Prevention
- Economics and Financing
- Treatment and Cure
- Policy and Advocacy
The catalytic impact of The Hepatitis Fund's philanthropic investment is measured through a comprehensive and cohesive monitoring and evaluation (M&E) framework, which reflects the five pillars of the WHO Strategies for Elimination of Viral Hepatitis and at the same time affords ample flexibility for funded projects to develop a tailored log-frame for implementation and evaluation.

The EndHep2030 M&E framework is not only a monitoring tool but also a platform for creating a community of learning and sharing for capacity building at national and local levels. It was designed with the lens to accelerate policy formulation and planning, enhance efficiency, and increase access to quality care by following the principles of systems approach. It provides the vocabulary necessary to articulate the catalytic impact of the funded projects.

The EndHep2030 M&E framework serves as an overarching rubric for evaluating the EndHep2030 grants programme as a whole and for tailoring thematic grants portfolios. It defines common denominators for assessing process, deliverables, and catalytic impact. It enables real-time learning and timely adjustment to mitigate the impact of force majeure events such as disruptions brought about by the Covid-19 global pandemic. Lessons learned and information accumulated will be valuable contribution to the body of knowledge for the global campaign to eliminate viral hepatitis as a major public health threat.

The EndHep2030 M&E Framework is a work in progress. With input from our grantees and partners, and new insights from on-going operations research, the Framework will be further enhanced and put to practice by the broad hepatitis community globally.

HepLink is an exciting opportunity to initiate proactive community-based case detection and treatment of chronic hepatitis at the primary care level of the health system. Demonstrations of effective interventions that can accelerate attainment of this goal are essential to accelerating hepatitis elimination to reach SDG3

Kim Green, global program director, Primary Health Care, PATH

* Developed in partnership with the International Epidemiology and Global Health Services Delivery programme at Columbia University (New York City)
### Framework for Catalytic Impact on Viral Hepatitis Elimination

#### Service delivery
- Intervention specification prevention-treatment cascade
  - Biomedical prevention
  - Accelerated testing and linkage to care
  - Care and support
  - Cure
  - Other prevention
    - Awareness raising
    - Demand creation
    - Injection safety
    - Harm reduction

#### Phases of implementation at the health systems level

<table>
<thead>
<tr>
<th>Phase</th>
<th>Activities</th>
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| Introduction        | - Communications strategy  
                      - Target setting  
                      - Logistics, supply chain and commodities planning  
                      - Human resource planning  
                      - Monitoring & evaluation  
                      - Information systems |
| Scale up            | - Similar activities as Introduction, but informed by ongoing intelligence and population segmentation  
                      - Characterized by refinement and revision of program based on data intelligence (e.g. cost effectiveness and efficiency)  
                      - Targeting strategies for subpopulations |
| Institutionalization| - Resource allocation and planning for optimized sustainment  
                      - Communication strategy for optimization  
                      - Ongoing monitoring |

#### Investment
- Regulatory approval
- Policy development
- Budget planning / economics and financing / commodities pricing / human resource planning
- Accessibility / availability

#### Data Intelligence
- Formative research
- Clinical, behavioral research
- Epidemiologic research
- Implementation science
- Monitoring & evaluation

#### Service delivery
- Stakeholder engagement and advocacy
- Health system capacity assessment

#### Decision-Making
- Viral Hepatitis Elimination

#### Individual and Population-level Hepatitis Impacts
Evolution of the EndHep2030 Project: A journey in catalytic philanthropy

The EndHep2030 project is the culminating result of a tripartite partnership dating back to 2008 between ZeShan Foundation, World Health Organization, and US Centers for Disease Control and Prevention.

The EndHep2030 project owes its existence to the late Mrs. Laura Chen, the then executive chair of ZeShan Foundation, who had the leadership vision of an international philanthropist to recognize hepatitis B as a major public health challenge that affects tens of millions of people throughout the world.

ZeShan Foundation was rightfully a trailblazer in urging its philanthropic peers to step up to the challenge of viral hepatitis. ZeShan started incubating the EndHep2030 project in its gestation phase by providing operating and staff support while providing millions in cash grants to various projects. With US CDC as a co-funding partner, ZeShan helped establish dedicated staff for hepatitis for WHO’s Western Pacific Region with a decade-long commitment in funding.

It was during the first World Hepatitis Summit (September 2015, Glasgow Scotland) that Wangsheng Li (then president of ZeShan Foundation) initiated a conversation with Dr. John Ward (then director of US CDC Division of Viral Hepatitis) and Dr. Shin Young-soo (then regional director for WHO Western Pacific region) to explore setting up an international funding mechanism to support efforts in hepatitis elimination.

In 2015 the Member States of the United Nations adopted the 2030 Agenda for Sustainable Development providing “a shared blueprint for peace and prosperity for people and the planet, now and into the future.” The agenda for the first time officially acknowledged hepatitis as a global health and development priority. The WHO Global Strategies for the Health Sector provided the road map for achieving the ambitious goals to eliminate viral hepatitis.
To set the stage for rallying and mobilizing private philanthropy to invest in hepatitis elimination, ZeShan, WHO, and US CDC collaborated to organize the first International Roundtable Summit on Funding for Elimination of Viral Hepatitis (June 21 – 22 2016. Hong Kong SAR China). Thought leaders, leading hepatitis advocates, and public health officials from over 50 countries converged for this historic convening. A concrete action plan out of the summit was to address the yawning gap between the funding needs of the global campaign to eliminate viral hepatitis as a major public health threat and the lack luster response by the institutionalized philanthropy.

Hence EndHep2030, an international funding platform for philanthropic investment in the global campaign against viral hepatitis.

ZeShan is proud to have seeded The Hepatitis Fund, a capstone to our decade-long effort in helping the world move towards the goal of eliminating viral hepatitis. While ambitious, the goal is actually an achievable one, and it is this belief that had driven our late sister Laura, when she was leading our family foundation, to make a strategic commitment to this cause, including the incubation of The Hepatitis Fund, the only grant-making foundation of its kind dedicated to the global elimination of viral hepatitis as a major public health threat.

Wynnie and Annie Chen, Grants Committee Members, ZeShan Foundation
Hepatitis by the numbers: Global Burden of Diseases Compared*

2,000,000,000+
Number of people who have been exposed to hepatitis viruses (HIV: 70+ million)

360,000,000
Number of people living chronically with viral hepatitis

The hepatitis B virus is 50-100x more infectious than HIV

Number of people living with HIV/AIDS: 37 million

Today, in the Asia-Pacific region, more people die from hepatitis than from HIV, TB, and malaria combined.
Every year, 1,000,000 newborns are infected with hepatitis B - a resounding failure to preventing mother to child transmission despite the availability of the hepatitis B birth dose vaccine. These babies join the 360 million people living with viral hepatitis around the world and every 30 seconds, one of these people die. We have the tools for putting an end to the hepatitis B and C epidemics, but these interventions urgently need to be made available for everyone living with hepatitis. Hepatitis is one of the greatest global health tragedies, overlooked by international funders and development partners. Hepatitis Fund provides a much-needed funding vehicle to support and accelerate hepatitis elimination worldwide and save these lives. #HepCantWait

Dr. Su Wang, president, World Hepatitis Alliance

The need is great. The solutions are here. The time is now to end viral hepatitis.

EndHep2030’s catalytic funding will be the spark that sets this historic effort in motion.

A number of barriers keep countries from properly addressing viral hepatitis. By funding highly effective activities to increase awareness of the problem and speed (or catalyze) prevention, diagnosis and treatment, EndHep2030 can help partners to overcome those barriers.

Our Goals:

Increase Awareness
Most people, including many policy makers, don’t understand the severity of this world-wide epidemic nor know that measures exist now to prevent and treat hepatitis.

Raise and Disperse Catalytic Funding
Prioritize efforts and programs that will accelerate progress toward the elimination of viral hepatitis as a public health threat:
- Developing sustainable strategic plans at the national and sub-national level to guide effective program implementation.
- Optimizing human and financial resources within health budgets so funds are effectively used.
- Increasing availability of country-specific data that inform where and how to intervene most efficiently and effectively.
- Building health system capacity to deliver quality hepatitis prevention and treatment services.

Bring an End to Hepatitis as a Global Health Threat by 2030
EndHep2030’s catalytic funding will be the impetus for this effort:
- Preventing childhood hepatitis B infections by improving vaccine delivery to newborns.
- Preventing new infections by promoting safer injection practices in healthcare settings and among people who inject drugs.
- Increasing the number of people diagnosed and linked to treatment through improved access to testing services.
Turning investment into impact.

01 EndHep2030 develops high impact signature initiatives by convening strategic partners, including governments and key implementers.

02 EndHep2030 engages prospective investors regarding signature initiative donation opportunities.

03 An investor joins a coalition of like-minded contributing donors to a signature initiative.

04 The investment is directed to signature initiative planning and implementation by national governments, local experts, and other partners.

05 Every investment can save lives and move the global community closer to eliminating viral hepatitis by 2030.
Join the fight.

Be part of this history-making endeavor.

EndHep2030.org