James A. Walsh Principal Deputy Assistant Secretary Bureau of International Narcotics and Law Enforcement Affairs (INL)

The Honorable Congresswoman Grace Meng U.S. House of Representatives

The Honorable Congressman Hank Johnson U.S. House of Representatives

March 18, 2019

Dear Mr. Walsh and Representatives Meng and Johnson,

We the undersigned Hepatitis C organizations and stakeholders urge you to express support from the U.S. government for draft resolution, E/CN.7/2019/L.4, expected to be presented and considered by national government delegations attending the 62nd session of the UN Commission on Narcotic Drugs in Vienna, Austria, this week. This important resolution titled "Promoting measures to prevent and treat viral hepatitis C among people who use drugs" would promote evidence-based and human rights-based interventions for the international drug policy agenda, with a specific focus on communities that are vulnerable to viral hepatitis.

As you may know, the scale of global hepatitis C epidemic is staggering: the World Health Organisation (WHO) reports that approximately 71 million people worldwide have chronic hepatitis C.¹ Of these people, up to 21 million will go on to develop cirrhosis or liver cancer within 20 years. Approximately 7.8 million out of the total of 15.6 million people who inject drugs have antibodies to the hepatitis C virus – including 53.1% in the U.S.² WHO estimates that around 399,000 people annually die from hepatitis C, mostly from cirrhosis or liver cancer related to their infections,³ and mortality from hepatitis C is increasing over time.⁴

Luckily, we have evidence-based prevention methods available – the most effective of which is through the provision of comprehensive harm reduction services, and safe access to sterile paraphernalia for people who use drugs. In a striking example of the power of these services, Dayton, Ohio launched comprehensive harm reduction services including syringe exchanges and naloxone distribution. Though Dayton was once known for having extremely high rates of opioid-related fatalities, overdose deaths declined by 65% in just one year after implementing a harm reduction approach. Yet, a recently released report by UNAIDS states that 99% of people who inject drugs live in countries that fail to provide adequate harm reduction services – including the U.S.³

¹ <u>https://www.who.int/news-room/fact-sheets/detail/hepatitis-c</u>

² <u>https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(17)30375-3/fulltext</u>

³ <u>https://www.who.int/news-room/fact-sheets/detail/hepatitis-c</u>

⁴ <u>https://www.who.int/hepatitis/publications/global-hepatitis-report2017/en/</u>

⁵ http://www.unaids.org/en/resources/documents/2019/JC2954 UNAIDS drugs report 2019

The adoption of the resolution being considered at the UN Commission on Narcotic Drugs this week is a pivotal opportunity to help raise viral hepatitis on the international drug policy agenda, and highlight crucial steps to improve access to hepatitis C prevention and treatment for people who use drugs. Recognizing the complex health challenges and needs of people who use drugs, including HIV and tuberculosis co-infection, the resolution encourages national governments to consider a range of harm reduction strategies and interventions, utilizing a right-based approach. The resolution further affirms the need to strengthen health systems, address structural and social barriers to access in screening, treatment, and other lifesaving services. U.S. support would go a long way in ensuring the passage of this important resolution, but also sends a strong message for the need to address our own rising opioid and infectious disease crisis in our borders with a comprehensive public health package of non-stigmatizing, human rights affirming interventions and access to treatment for communities that are vulnerable to hepatitis C.

There is precedent for our commitment to harm reduction at the global level. At the 69th World Health Assembly in Geneva in May 2016, member states, including the U.S., adopted resolution 69.22, the Global Health Sector Strategy on Viral Hepatitis, 2016-2021 – the first of its kind.⁶ In line with the Sustainable Development Goals' commitment to "combat hepatitis", the Strategy seeks to eliminate viral hepatitis as a public health threat by 2030. The Strategy cites "harm reduction for people who inject drugs" as one of its "five core intervention areas", as well as "Address legal and institutional barriers to the provision of harm reduction services" as a priority action. The U.S. has committed to the WHO global sector health strategy on viral hepatitis for 2016-2021, including the goal to reduce incidence of hepatitis B and C by 90%, and 65% decrease in related mortality by 2030.

We now have the opportunity to deepen our commitment to ending hepatitis C and upholding human rights through a new draft resolution E/CN.7/2019/L.4 being considered at the UN Commission on Narcotic Drugs this week. U.S. support is absolutely critical to advancing the aforementioned resolution, and we urge robust leadership from our delegation. We hope that you commit to taking this crucial step to help save lives at home and abroad. If you have any questions, please don't hesitate to contact Annette Gaudino at annette.gaudino@treatmentactiongroup.org or Bryn Gay at bryn.gay@treatmentactiongroup.org for more information. Thank you.

Respectfully submitted,

AIDS Foundation of Chicago AIDS Institute AIDS United Caring Ambassadors Program Coalition on Positive Health Empowerment (COPE), New York Harm Reduction Action Center, Denver, CO Harm Reduction Coalition Hawai'i Health & Harm Reduction Center, Honolulu, HI

⁶ <u>https://www.who.int/hepatitis/strategy2016-2021/ghss-hep/en/</u>

Hep Free Hawai'I, Honolulu, HI Hepatitis C Mentor and Support Group HIV Medicine Association (HIVMA) Housing Works Infectious Diseases Society of America (IDSA) National Alliance of State & Territorial AIDS Directors (NASTAD) Project SAFE, Philadelphia, PA SIFMA NOW Treatment Action Group Voices of Leaders & Activists (VOCAL), New York