DATA AND EVIDENCE TO DRIVE HEPATITIS B AND C SERVICE SCALE-UP

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Background: One of the biggest gaps in understanding the issues affecting people who use drugs and have hepatitis C and B is country programs not utilizing best practice and current evidence and the lack of data at global, regional and national levels to scale up services.

Harm Reduction International sought to close these data gaps by developing the hepatitis repository and including original data in the Global State of Harm Reduction 2022 report in an effort to publish (and update) vast new datasets.

Methods: Data is sourced from a range of publicly available international datasets, including the UNODC World Drug Report, UNAIDS, the Global Health Observatory, the Global Burden of Disease, the Polaris Observatory and academic modelling studies. The repository provides global and national estimates for each indicator, as well as estimates for the nine *Global State of Harm Reduction* regions.

Results: Poor access to services is a major issue in addressing hepatitis C and B among people who use drugs. Integrated, person-centred service delivery and prioritising key populations in every setting will improve accessibility. Our data shows that where there are gaps there is still an evidence base for the effectiveness of harm reduction which should inform programing.

Discussion: To improve the quality of services data must be improved, including monitoring data relating to viral hepatitis among people who inject drugs. Inaccurate and reliable hepatitis prevalence data undermines the development of strategies and allocation of budget to eliminate viral hepatitis. This should not be a reason for delaying viral hepatitis interventions. This type of data and evidence is critical, for example, to inform GF grants. HRI developed guidance to support applications for Global Fund grant cycle 7 using these datasets.