

October 24, 2016

Ms. Patricia Bacon
Chair, Action Hepatitis Canada
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Dr. Gregory Taylor
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Dr. Taylor,

Action Hepatitis Canada (AHC) is the national coalition for hepatitis B and C, representing 55 member groups providing viral hepatitis services and programs across the country. As such, the Public Health Agency of Canada (PHAC) recognized us as a national hepatitis C stakeholder in 2015.

It is from this position, as an engaged stakeholder who does not receive nor has ever applied for funding from PHAC, that we write today with our concerns regarding the Letter of Intent (LOI) process for the Community Action Fund (CAF).

AHC supports the 7 CAF priorities, and also recognizes that during the three years that the CAF funding model was being restructured, the HCV landscape has been revolutionized. There is a CURE for HCV now, and the possibility of elimination is here: the need for a public health response with a clear and central role for community programming to support combination prevention efforts, including treatment as prevention and linkage to care, and has never been greater.

While all transitions have their growing pains, the outcome of the LOI process suggests that the hepatitis C voice was not adequately represented in the LOI review, taking into account the considerable burden of the disease and the weight placed on hepatitis C in the CAF priorities. We ask that you release to us the names of the hepatitis C content experts on this review.

We are also asking to review the supported LOIs that include hepatitis C work, so we can map the organizations that have indicated they will be offering hepatitis C services and programs, including to what populations. Despite your assertion in the press that the people of Canada will not see a decrease in services, we are gravely concerned about the impact of the LOI decisions on the people living with and at risk for hepatitis C, as defunded programs and services shut down or scale back across the country as of March 31, 2017. AHC is well poised and ready to help PHAC identify harmful gaps for the hepatitis C community resulting from this Community Action Fund transition. It is our hope that you will

accept this offer and remain open to acknowledging and remedying unforeseen gaps in hepatitis C services if they are discovered, and that it is done in time to avoid the termination of vital programs.

We also wish to express to you our disappointment in the complete lack of transparency and the seeming lack of respect for the community based organizations that PHAC has invested funding in for years to do their good work in the STBBI sector. The LOI process was utterly demoralizing in its lack of support and guidance, in its missed deadlines and broken commitments, and in the dismissive and often contradictory feedback to both successful and unsuccessful LOIs. There was nothing open about this open call for proposals, where several organizations were seemingly hand-picked to receive funding yet directed to substantially change the content of their proposal, often to include work that they have no experience in and/or that is not included in their mandate.

It is important for you to know that even though there are new projects moving forward and additional funding going to an increased number of local and national organizations, on the ground this process has gutted not just the funding but also the morale of some of your most devoted service providers. We call on the Public Health Agency of Canada to seriously consider the repercussions across the sector of the way this process has been handled, to look for ways to repair the damage done, and to take a much more transparent approach to its funding applications moving forward.

Sincerely,



Patricia Bacon

Chair, Action Hepatitis Canada

cc: Hon. Jane Philpott, Minister of Health
Siddika Mithani, President, Public Health Agency of Canada
Bersabel Ephrem, Director General, Public Health Agency of Canada

***Action Hepatitis Canada** is a national coalition of organizations responding to hepatitis B and C. Our work engages government, policy makers, and civil society across Canada to promote hepatitis B and C **prevention**,*

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*improve access to care and **treatment**, increase knowledge and innovation, create public health **awareness**,
build health-professional capacity, and **support** community-based groups and initiatives.*