ADB

Pakistan: Assessing Implementation Barriers and Program Options for Elimination of Hepatitis C

	According Implementation Parriage and Pr	rogram Options for Elimination of Hepatitis C		
Project Name Project Number	54033-001	rogram Options for Elimination of Repatitis C		
Country	Pakistan			
Project Status	Active			
Project Type / Modality of Assistance	Technical Assistance			
Source of Funding / Amount	TA 0052 DAK: Assessing Implementation	Barriers and Program Options in Halting the Hepatitis C Epidemic		
	Technical Assistance Special Fund		US\$ 200,000.00	
Strategic Agendas	Inclusive economic growth			
Drivers of Change	Governance and capacity development Knowledge solutions			
Sector / Subsector	Health - Health sector development and reform			
Gender Equity and Mainstreaming	Some gender elements			
Description	The TA will be aligned with the following impact: helping Pakistan assess and develop national and provincial testing and treatment plans for HCV and identifying barriers and bottlenecks for implementation of the National Hepatitis Strategic Framework . The TA will support recruitment of experts to help with establishing the program for HCV.			
Project Rationale and Linkage to Country/Regional Strategy	Pakistan has one of the highest Hepatitis C Virus (HCV) prevalence rates in the world, with an estimated 5% of the population living with the infection. If left untreated, HCV infection will lead to chronic liver disease, cirrhosis and/or liver cancer in one third of infected persons. Modalities of HCV transmission in Pakistan are well established, and efforts are being made to improve prevention through infection prevention and control programs in hospitals, blood screening, educating private health care providers and shop owners , and prevention of transmission within the family. However, these prevention measures often involve behavioral change and will take time to have a substantial impact on HCV transmission morbidity and mortality- as a result at great cost to the economy of Pakistan. Treatment and cure, which is achieved after a three-month course o medication, on the other hand, can quickly reduce the pool of infected persons and thereby reduce transmission, to a point that the epidemic is nu longer self-sustaining. Treatment has greatly improved with the development of new highly effective direct-acting antivirals (DAAs) which can be procured by the government at costs as low as \$60 per chronically infected person, making mass treatment within reach. National and provincial programs for HCV prevention and control have been in place since 2005, but they are not coordinated nationally and have not been scaled up to serve the population en masse. HCV screening has improved with a simple and cost-effective test that can be done in any health facility. The HCV epidemic is a large-scale but neglected national health emergency. The proposed program for HCV testing and treatment presents a unique opportunity to obtain lasting health impact for the general public, reach out to rural women, sustain impact by contributing to interruption of transmission and promotion of behavioral change, strengthen health services, which will result in major social and economic benefits.			
Impact				
Project Outcome				
Description of Outcome				
Progress Toward Outcome				
Progress Toward Outcome				
Progress Toward Outcome Implementation Progress Description of Project Outputs	ess (Outputs, Activities, and Issues)			
Progress Toward Outcome Implementation Progress Description of Project Outputs	ess (Outputs, Activities, and Issues)			
Progress Toward Outcome Implementation Progress Description of Project Outputs Status of Implementation Progr	ess (Outputs, Activities, and Issues)			
Progress Toward Outcome Implementation Progress Description of Project Outputs Status of Implementation Progr				
Progress Toward Outcome Implementation Progress Description of Project Outputs Status of Implementation Progr Geographical Location				
Progress Toward Outcome Implementation Progress Description of Project Outputs Status of Implementation Progr Geographical Location Summary of Environmental and				
Progress Toward Outcome Implementation Progress Description of Project Outputs Status of Implementation Progr Geographical Location Summary of Environmental and Environmental Aspects				
Progress Toward Outcome Implementation Progress Description of Project Outputs Status of Implementation Progr Geographical Location Summary of Environmental and Environmental Aspects Involuntary Resettlement	d Social Aspects			
Progress Toward Outcome Implementation Progress Description of Project Outputs Status of Implementation Progr Geographical Location Summary of Environmental and Environmental Aspects Involuntary Resettlement Indigenous Peoples	d Social Aspects			
Progress Toward Outcome Implementation Progress Description of Project Outputs Status of Implementation Progr Geographical Location Summary of Environmental and Environmental Aspects Involuntary Resettlement Indigenous Peoples Stakeholder Communication, Page	d Social Aspects			
Progress Toward Outcome Implementation Progress Description of Project Outputs Status of Implementation Progr Geographical Location Summary of Environmental and Environmental Aspects Involuntary Resettlement Indigenous Peoples Stakeholder Communication, Pr During Project Design	d Social Aspects			
Progress Toward Outcome Implementation Progress Description of Project Outputs Status of Implementation Progr Geographical Location Summary of Environmental and Environmental Aspects Involuntary Resettlement Indigenous Peoples Stakeholder Communication, Pr During Project Design During Project Implementation	d Social Aspects	Cebele Wong Central and West Asia Department		

Executing Agencies

Asian Development Bank 6 ADB Avenue, Mandaluyong City 1550, Philippines Ministry of Health Room No. 119, Block C Pakistan Secretariat Islamabad, Pakistan

Timetable		
Concept Clearance	-	
Fact Finding	23 Jan 2020 to 23 Jan 2020	
MRM	-	
Approval	02 Mar 2020	
Last Review Mission	-	
Last PDS Update	02 Mar 2020	

TA 9952-PAK

Financing Plan/TA Utilization							Cumulative Disbursements		
ADB	Cofinancing	Counterpar	Counterpart			Total	Date	Amount	
		Gov	Beneficiaries	Project Sponsor		Others			
200,000.00	0.00	0.00	0.00		0.00	0.00	200,000.00	-	0.00

Project Page	https://www.adb.org/projects/54033-001/main		
Request for Information	http://www.adb.org/forms/request-information-form?subject=54033-001		
Date Generated	03 March 2020		
ADB provides the information contained in this project data sheet (PDS) solely as a resource for its users without any form of assurance. Whilst ADB tries to provide high quality content, the information are provided "as is" without warranty of any kind, either express or implied, including without limitation warranties of merchantability, fitness for a particular purpose, and non-infringement. ADB specifically does not make any warranties or representations as to the accuracy or completeness of any such information.			