

Press release: Hepatitis C deaths fall by 16 per cent between 2015 and 2017

Deaths from serious hepatitis C related liver disease fell from 380 to 319, thanks to new curative treatments. But while England has exceeded the World Health Organization's (WHO) target to reduce hepatitis C related mortality by 10% by 2020, challenges still exist to eliminate the disease in this country.

These [new data](#) were announced today (9 April 2019) at the PHE Research and Science Conference. PHE is urging those who may have been at risk of contracting hepatitis C, especially if they have ever injected drugs, to get tested.

As well as the fall in hepatitis C deaths, greater access to new curative treatments is also linked to a reduction in the number of people with the disease requiring liver transplants. In 2017, registrations for a liver transplant due to hepatitis C fell to a 10-year low of 63, a 53% decrease compared to pre-2015 levels.

Challenges remain if we are to meet the WHO's target of eliminating hepatitis C by 2030 at the latest, with 113,000 people estimated to be living with chronic hepatitis C in England in 2018.

Estimates indicate that up to 79,000 people are currently living with undiagnosed active hepatitis C infection. This is because people with the infection often have no specific symptoms until their liver has been significantly damaged and so are unaware they are infected. When symptoms do occur, they can often be mistaken for other conditions.

Dr Helen Harris, Senior Scientist at PHE, said:

Hepatitis C infection can have devastating consequences, so the fact that more people are accessing treatment and fewer people are dying from the disease, is a huge and very welcome step forward. Yet, more needs to be done if we are to eliminate this disease as a major public health threat in England. Over a hundred thousand people in this country are thought to be living with this serious infection, and we know that significant numbers of them are unaware they are infected.

Anyone who may be at risk of infection, in particular those who have ever injected drugs, even if they injected only once or in the past, should get tested. Given that new treatments provide a cure in around 95% of those who take them, there has never been a better time to get tested.

In 2018, PHE and NHS England launched a [national exercise](#) to identify and treat patients who have been diagnosed with hepatitis C in the past but who

may not have cleared their infections. The NHS is in the process of contacting these patients to offer testing, so those with current infection can be referred for assessment for treatment.

Professor Graham Foster, NHS national clinical lead for the Hepatitis C networks, said:

NHS England has invested several hundred million pounds to cure thousands of people with hepatitis C, resulting in dramatic progress on saving lives and reducing the number of liver transplants.

And, with support from drug manufacturers, there is now a real opportunity to eliminate hepatitis C in England before the World Health Organization's goal of 2030.

Rachel Halford, Chief Executive at the Hepatitis C Trust said:

It is encouraging to see deaths from hepatitis C-related liver disease falling as more patients access DAA treatments. It is, however, essential that we work to find the estimated 40 to 50% of patients who remain undiagnosed and support them to access treatment services – to stop unnecessary deaths and ensure we reach elimination of hepatitis C by 2030 at the latest. Anyone who thinks they may have been at risk of transmission should get tested – The Hepatitis C Trust website hosts a simple quiz which can tell you whether you may have been at risk.

Hepatitis C is spread through blood-to-blood contact, most commonly in England by sharing needles contaminated with the virus, but even sharing razors or toothbrushes with an infected person could pass on the virus. If untreated, infection with hepatitis C can lead to liver damage, cancer and death. If people aren't sure about whether they are at risk, they can take a short quiz on [The Hepatitis C Trust](#) website to find out if they should get tested.

Hepatitis C (HCV) is a bloodborne virus that is often asymptomatic, and symptoms may not appear until the liver is severely damaged. As a consequence, many individuals with chronic HCV infection remain undiagnosed and fail to access treatment. These individuals can then present late with complications of HCV-related end-stage liver disease (ESLD) and cancer, which have poor survival rates.

For further information on symptoms, please visit the [NHS website](#).

There was a 127% increase in treatment in 2017 compared to pre-2015 levels.

Between 2005 and 2014, death registrations for HCV-related ESLD and hepatocellular carcinoma (HCC) in England more than doubled, rising from 182

in 2005 to 381 in 2014. Since 2014, however, deaths have been falling, with a fall of 16.3% between 2014 and 2017.

Three years ago, the UK government committed to a joint ambition with 193 other countries to eliminate the disease as a major public health threat by 2030. As well as testing and treatment, prevention through needle and syringe exchange services and opiate substitution therapies need to be sustained to achieve and maintain elimination.

Injecting drugs with unsterile injecting equipment, particularly needles and syringes, can put people at risk of hepatitis C infection, even if they injected only once or twice in the past. Others at risk of hepatitis C include those who have received blood transfusions before September 1991 or blood products before 1986 in the UK. People who originate from countries with a higher prevalence of infection, such as South Asia, are also at risk, often following medical or dental treatment with unsterile equipment.

Press release: Statement from the Ambassadors of the G 19+ on Yemen

The Ambassadors of the G 19+ express our support for the UN-led political process, the efforts of UN Special Envoy for Yemen Martin Griffiths, and the implementation of the outcomes of the December 2018 consultations in Stockholm. We appreciate the Republic of Yemen Government's support for the UN-led political process.

We express our support of the Republic of Yemen Government. We welcome the Yemeni government's efforts to improve security, public services, and livelihoods, and in particular note recent progress on salary payments and agreeing a budget for 2019. We urge further efforts to pay all civilian public salaries swiftly and to ensure timely publication of the budget. We also underscore the need for the international community to support the Yemeni government's focus on providing services to the entire population in Yemen, pay salaries, alleviate humanitarian suffering, and reinforce the economic recovery and reconstruction.

We are concerned that the value of the Yemeni Riyal and the economic situation in Yemen remain fragile, which requires concerted actions to build on the achieved steps. In this regard, we commend the Saudi Government's economic support including fuel assistance, monthly financial support to the electricity sector and to the Central Bank of Yemen, which has reached \$3.2 billion.

We strongly support the emergency action plan adopted by the Central Bank of Yemen aimed at stabilizing the Yemeni Riyal to improve the economic and humanitarian situation and living conditions of all the Yemeni people. We

support the measures taken by the government to curb illicit fuel imports.

We emphasize the importance of economic development in alleviating the humanitarian situation, and stress the need for supporting small and micro enterprises which have a positive impact in relieving the humanitarian disaster in Yemen. We underline the importance of the continued and unhindered flow of humanitarian and commercial supplies, including fuel and food, through Hudaydah and Saleef, as well as onward supply routes. We commend all international efforts and assistance provided to the Yemeni people to help mitigate the humanitarian situation in Yemen.

[Speech: Penny Mordaunt on improving sexual health rights globally](#)

Thank you everyone for being here and thank you to Canada for hosting us.

A lot of people have thanked me for coming along today because they know the turmoil that Parliament is in, all the stresses and strains that are going on and it is difficult times that is for sure. And quite a lot of people say to me how do you keep going, why have you stuck with it, why have you stayed there. I say something like it is my duty, the country needs us to find a way through, we need to hold Remainers and Brexiteers together. But the real reason is that I want to stay in post to attend Women Deliver.

It is fantastic today to be able to celebrate our partnership on gender equality, announced by our Prime Ministers in 2017.

It is wonderful to be amongst so many amazing women who it is my privilege to know a few of you and the amazing work you do. And also some amazing men as well. Dom McVey, a CDC supported entrepreneur who has done fantastic work on women's economic empowerment and now is launching some new initiatives to help end period poverty worldwide. Thank you to all the fellas who are also doing their bit too.

And there is a lot to celebrate. In the UK the female employment rate is at a record high and the gender pay gap is at a record low. We've introduced new laws to protect women from domestic abuse, FGM, stalking, and forced marriage.

My department, the Government Equalities Office, this month moved into the Cabinet Office, the hub and the heart of Whitehall to really ensure that we are delivering. And the only female mouser the Cabinet Office cat, has received a promotion too.

Meanwhile, in Canada you have created a Department for Women and Gender Equality. You have made gender budgeting a mandatory part of the federal

budget-making process, and delivering your strategy to prevent gender-based violence, and have recently passed into law protections for pay equality, based on the UK's gender pay gap reporting, I am delighted at that.

But all too often, in too much of the world, women's rights are actually being rolled back. Britain and Canada has shown real leadership together on this issue and that leadership is needed now more than ever.

Millions of girls and women are living in poverty, denied an education, have inadequate healthcare, are routinely assaulted, unable to live full and happy lives. And no country has yet achieved gender equality.

The Sustainable Development Goals are a vital way to drive and measure change. This year, the UK will be reporting on our progress towards implementing them, as part of our Voluntary National Review.

Global Goal 5, on gender equality, is critical in and of itself, but without it we will never be able to deliver on the other goals. Everyone, whatever their gender, has a stake in gender equality.

Domestically and overseas, the UK is championing efforts to better understand the situation of the poorest and most marginalised women. Just last month, I announced vital new work to end period poverty and shame in the UK and overseas. I also announced our upcoming strategy to ensure that every woman in the UK has freedom, choice, capacity, resilience, support, and protection to do whatever she wants to do.

Freedom and choice are guiding principles for all our gender equality work. There are people around the world who want to control women, who want to restrict their choices and deny them their rights.

That's why it is so important that we use platforms like Women Deliver continually to renew our commitment to women's rights and specifically to comprehensive sexual and reproductive rights for all women.

Leadership means not shying away from the issues of access to safe abortion, when the evidence shows us that these services save women's lives.

Comprehensive Sexual Reproductive Health Rights (SRHR) is an area where the UK and Canada are continuing to deepen our partnership as likeminded leaders in this field.

In January this year, we co-hosted a multi sector Safe Abortion dialogue here in London to drive progress and momentum in this absolutely critical area.

And at the Commission on the Status of Women last month we held a strong line together, resisting the "pushback" as the Secretary General called it.

We are united in our efforts to work with the most complex and challenging issues that threaten women's health and lives when others are shying away from them and I thank Canada for their leadership in this area.

Everyone should have control over their own bodies and their own futures.

That means every girl and every woman having access to the information they need, the freedom to choose what's right for them, and the services and support they need to make their own decisions.

I am proud that thanks to UK aid, millions of women in the world's poorest countries are able access the desperately-needed sexual and reproductive health services they need and want to use. The UK has been a world leader in this area and will proudly continue to be one.

My Department is also supporting the deepening of civil society partnerships through our UK aid Connect programme.

A new £42 million programme looking at SRHR will support two consortia of NGO partners on this theme, and I am pleased to announce that these will be led by Marie Stopes International and the International Planned Parenthood Federation.

This programme will drive innovation and learning by bringing diverse partners together to work on complex and neglected issues such as increasing access to safe abortion and improving the provision of SRHR in crisis settings.

Some of the most marginalised women and girls in the world are those living in conflict and crisis areas. Together we are pushing for a humanitarian system that responds to women and girls' specific needs, but also sees them as active agents of change.

We worked closely with Canada to develop the landmark G7 Whistler Declaration on Gender Equality and the Empowerment of Women and Girls in Humanitarian Action.

We are now teaming up to implement these commitments, including through the Call to Action on Protection from Gender Based Violence in Emergencies.

Successful societies are those where women have control over their own bodies, are places where every mother can enjoy a wanted and healthy pregnancy, where every child can live beyond their fifth birthday, where no woman or girl is forced to marry before she is ready.

Together with our partners, including Canada, we are supporting the UNICEF and UNFPA global programme, working to end child marriage, reaching millions of adolescent girls across 12 countries, and have co-sponsored every UN resolution on ending child marriage.

We will continue to stand shoulder to shoulder with Canada on the international stage to realise the rights of all the world's women and girls.

This was demonstrated recently at a joint side event at the Commission on the Status of Women on LGBT rights. I look forwards to deepening our collaboration through Women Deliver and beyond.

We must empower women to make their own decisions. We must give women the freedom to choose what is right for them.

We must invest in them so that they can complete their education and fulfil their full potential.

And we should recognise gender equality as one of the great human rights issues of our time.

Thank you.

News story: PHE annual conference 2019: bookings open

The PHE annual conference brings together over 1,500 participants from a wide range of organisations to learn and share knowledge and experience to help improve public health.

This year's conference focuses on some of the areas where PHE can make the greatest improvements in health and reduce health inequalities:

- promoting a smokefree generation
- giving children the best start in life
- tackling antimicrobial resistance (AMR)
- supporting place-based health
- producing world-class science

Initial information about the sessions and expert speakers is now available on the [conference website](#) (including some organised by Faculty of Public Health).

We are also delighted to have the participation of Rt Hon Matt Hancock MP, Secretary of State for Health and Social Care who will give a keynote address on the second day of the conference.

Interest in the conference is high so booking early is recommended.

Press release: Funding awarded to innovative data projects

- Ten innovative schemes from across the UK have won government funding to look at new ways of using location-based data to help people in their everyday lives

- One project will look at ways to use crowdsourced information to create indoor maps to help people find their way around public buildings, such as universities and hospitals
- Other winners will create a UK database of trees and map the safest routes for cyclists to take through cities

New systems designed to highlight the safest roads for cyclists to use in busy cities, create a database of all the UK's trees, and launch an indoor mapping system to help people find their way around public buildings, could soon be created thanks to a government competition designed to find new ways to use data.

In November, the Minister for Implementation, Oliver Dowden, announced a [£1.5 million competition](#) to help organisations find innovative ways to use crowdsourcing and location-based data.

Among the 10 winners are schemes including:

- COMMUNITREE – a collaborative project to collect data on trees from across the UK to create a publicly accessible database
- RIDE – a London-based project to help cyclists find the safest routes around cities
- PINPOINT – a project to create an indoor mapping system to help people find their way around complex public buildings, such as hospitals and universities.

The Minister for Implementation, Oliver Dowden, said:

We are investing in location-based data technology to improve public services and the way people experience them.

I'm delighted to see such innovative ideas come forward, which will help people in their everyday lives and keep the UK at the forefront of this exciting new technology.

London-based Cartographix is one of the organisations which have been awarded funding through the crowdsourcing competition, which was led by the government's Geospatial Commission in partnership with Innovate UK.

By using existing infrastructure, such as WiFi hotspot locations and smartphone sensors, the programmers at Cartographix hope to create a sat-nav-style system for people to use as they walk around public buildings. Organisations would volunteer to have their buildings included on the system and the maps would be made available through existing phone apps.

Anu Joy from Cartographix said:

The aim of our mapping system is to make life easier for people. And we would not be able to do this work without the funding we are receiving from the government.

Also receiving funding are projects to highlight mobile phone signal blackspots, help tackle travel problems experienced by disabled people, and boost public understanding of the planning system.

The projects will be worked on by organisations across the UK and see research carried out by University College London, the University of Warwick, the University of Exeter and the Open University.

A full list of all the winners of the competition can be found below.

Notes for editors

What is the Geospatial Commission?

The [Geospatial Commission](#) is an impartial, expert committee within the Cabinet Office, set up in April 2018 and supported by £80 million of funding. The Geospatial Commission is chaired by Sir Andrew Dilnot. Nigel Clifford is the Deputy Chair.

The commission has been set up to drive the use of location-linked data more productively, to unlock up to £11 billion of extra value for the economy every year. The commission is currently developing the UK's national geospatial strategy, that it will publish at the end of this year. It is running a range of projects to inform this work.

About the competition

The aim of the competition is to explore the benefits and challenges of using crowdsourced data, while delivering public benefit through individual projects. It also aims to showcase the importance of geospatial data for improving public services.

The competition asked different organisations to work together to identify innovative new ways for crowdsourced data, to either:

- improve the delivery of public services
- support the third sector
- enhance the quality of open public datasets

As well as delivering this exciting range of initiatives, the Geospatial Commission will use the lessons learned from each programme to help inform the development of the national geospatial strategy.

[Original press release for the 1.5 million competition.](#)

What is crowdsourcing?

Crowdsourcing is [defined by the Oxford English Dictionary](#) as “the practice of obtaining information or input into a task or project by enlisting the services of a large number of people, either paid or unpaid, typically via the Internet.”

The sources of geospatial data are many and diverse and many services already use the concept of 'crowdsourcing' to enhance the depth and currency of the data supporting the service. Examples are 'WAZE', OpenStreetMap, Google traffic app, Uber, and Trip Advisor which is based on user feedback to inform other users.

The rise of the smart cities agenda, connected online communities and the growth of smartphones means that crowdsourcing products are part of a growing market which the Geospatial Commission wishes to explore through a competition.

Competition winners

COMMUNITREE

Project partners: Forest Research, Open University, Treework Services Limited
This project will develop the largest and highest quality urban tree map in the world for use by business, government and other research needs.

YOUR.VU.CITY

Project partners: Vu.City, Pipers Projects Limited, University College London
Vu.City will engage the public with the planning process to improve the understanding of the built environment.

Crowd Blackspot Intelligence for 5G Rollout

Project partners: Ranplan Wireless Network Design, University of Warwick
This project will look at crowdsourcing service complaints to help guide 5G rollout for rural and urban areas.

Crowdsourcing for a Digital Geospatial Joint Strategic Needs Assessment

Project partners: City Science Corporation Limited, University of Exeter
Relevant databases will be brought together to enable members of the public to take an active role in health outcomes, by crowdsourcing data such as air quality, to enable practitioners to improve targeting of resources and the health of the nation.

Precision INdoor P0sitioning INformation sysTem (PINPOINT)

Project partner: Cartographix LTD
This project will use WiFi networks and smartphone sensors to help better indoor navigation of public buildings.

StreetFocus

Project partners: Cyclestreets, Planit
Communities will be able to automatically identify areas that need improvements to street infrastructure.

Coreo

Project partner: Natural Apptitude
This platform will enable anyone to build and run geospatial citizen science projects to improve collection, management and maintenance of geospatial data.

Routing Innovation through Data Engineering (RIDE)

Project partner: Beeline

RIDE will develop route optimisation to increase cyclist safety and uptake.

Generating crowdsourcing geospatial data

Project partner: Transreport Limited

This project will undertake research to understand the accessibility issues for transportation and the user experience for a wide range of disabilities, and how the data collected can be used to improve the service.

The Neighbourhood safety index

Project partner: Synced LTD

This will produce the first integrated live score of how safe a neighbourhood is.