

## 2016 was one of our most productive years!

We celebrated 10 years of direct services to the community and received the Viral Hepatitis Testing Award from the US Department of Health and Human Services at the White House during the National Hepatitis Testing Day event on May 19th. A few weeks before, as a part of the “White House Champions of Change for Asian American and Pacific Islander Art and Storytelling,” founder Leslie Hsu Oh was also named one of the White House Champions of Change and had an opportunity to share her story about how hepatitis B affected her personal life.



On October 15, 2016, HBI-DC celebrated 10 years of Direct Services to the community at the Willard Hotel in Washington, DC by unveiling its new logo with its partners and sponsors.



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Since 2006, HBI-DC has screened more than 11,800 residents for hepatitis B in the Washington, DC and Baltimore metropolitan areas, with about 5% testing positive. Expanding on that effort, HBI-DC has screened over 5,500 individuals for hepatitis C since 2013, with about 3% testing positive. In 2016, we began a pilot project with the University of Maryland to also test patients for HIV co-infection. Overall, HBI-DC has provided over 18,600 people in hard to reach communities with education about viral hepatitis throughout the years.

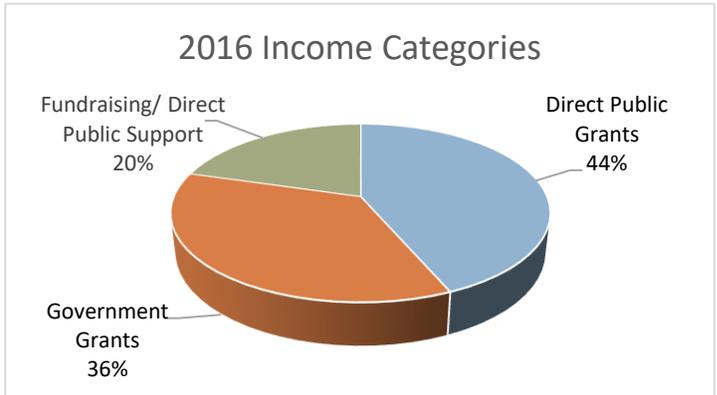
HBI-DC’s goal is to eliminate viral hepatitis. The hepatitis B virus (HBV) and hepatitis C virus (HCV) infect the liver and cause inflammation to the liver that may lead to liver cancer if not treated properly.

### HBI-DC’s accomplishments in 2016 include:

- In-person education for **over 3600** individuals
- Hepatitis B screenings for **over 2300** at-risk individuals; 83 individuals infected with HBV (average of 3%) were identified and linked to care services
- Hepatitis C screenings for **over 2200** at-risk individuals; 41 individuals infected with HCV (average of 2%) were identified and linked to care services
- HIV screenings for **over 1600** individuals; 2 individuals were found positive
- **Attendance at over 50 events**, reaching out to the Chinese, Vietnamese, Korean, Mongolian, Cambodian, Ethiopian, Ghanaian, Cameroon, India, and many more ethnic communities.

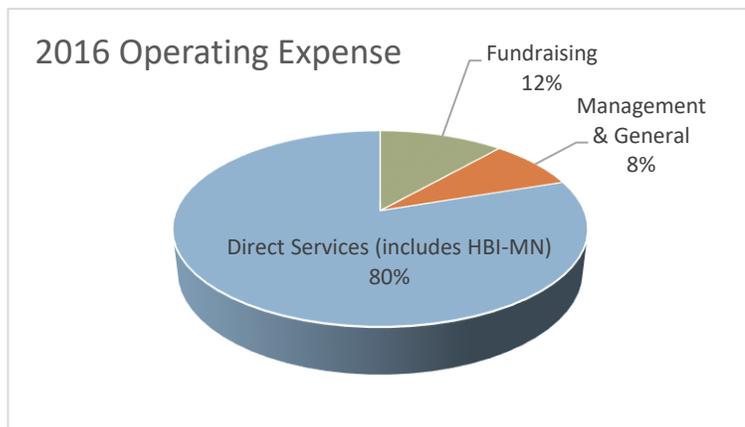


HBI-DC appreciates the overwhelming support it has received over the years to address the spread of viral hepatitis, especially among Asian and Pacific Islander Americans, African immigrants, as well as other at-risk populations. In 2016, we received \$369,196.34 in combined contributions. Of this amount, 44% were from Direct Public Grants; 36% Government Grants; and 20% from Fundraisers and Direct Public Support.



With the overwhelming community support for our programs, we were able to serve more people this year, including individuals in the Twin Cities of Minnesota through a special chartered project, “HBI-MN.”

HBI-MN is located in Minneapolis, MN and has been providing viral hepatitis education, screenings, and linkage to care and treatment services. HBI-MN was established in October 2015 and has been providing services to the Hmong, Vietnamese, and Laotian communities in the Twin Cities area. In 2016, HBI-MN educated 6,743; screened 311 for HBV and 633 for HCV. Of these numbers, HBI-MN found 5.47% tested positive for HBV and 1.11% tested positive for HCV. In addition, 39.87% of the population screened were found to need hep B vaccination; these individuals were referred to local clinics and the Health Department. In 2017, HBI-MN will expand its program to other ethnic communities, such as the Karen (ethnic tribal group in SE Asia), Cambodian, Asian Indian, American Indian, Sudanese, Somali, and Ethiopian communities while still serving the Hmong, Vietnamese, and Laotian communities.



In 2016, HBI-DC’s operating cost was \$327,592.54. Of this amount, 80% was for Direct Services (including the special chartered project in Minnesota); 12% was for fundraising expenses; and 8% was for management and general operations.

**With gratitude for our supporters, grantors, and community leaders, we look forward to having 2017 be an impactful year!**

We have a larger network of support among at-risk communities; stronger relationships with community leaders; and a data-driven approach to screenings. We anticipate linking over 100 individuals to care and treatment after they test positive for hepatitis B and/or C to prolong their lives.

Remember, you **NEED** a liver to live! With early detection and treatment, you can live a full life. Encourage your loved ones to **GET TESTED TODAY!**

Watch the video of our Mongolian screening event to understand our impact on the community: <https://www.youtube.com/watch?v=mTT8UqCnsc&feature=youtu.be&list=PL8OL5KxsZrcVfxBtbNjeA4qrM8AaNQJ3>

