

Poche Centre for Indigenous Health

Factors associated with hepatitis C testing among clients at four Aboriginal Community Controlled Health Services

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*Joint senior



Acknowledgement of Country

The University of Queensland (UQ)
acknowledges the Traditional Owners and their
custodianship of the lands on which we meet.

We pay our respects to their Ancestors and their
descendants, who continue cultural and spiritual
connections to Country.

We recognise their valuable contributions to
Australian and global society.

Digital reproduction of *Consolidate* by proud Kalkadoon artist Sid Domic.



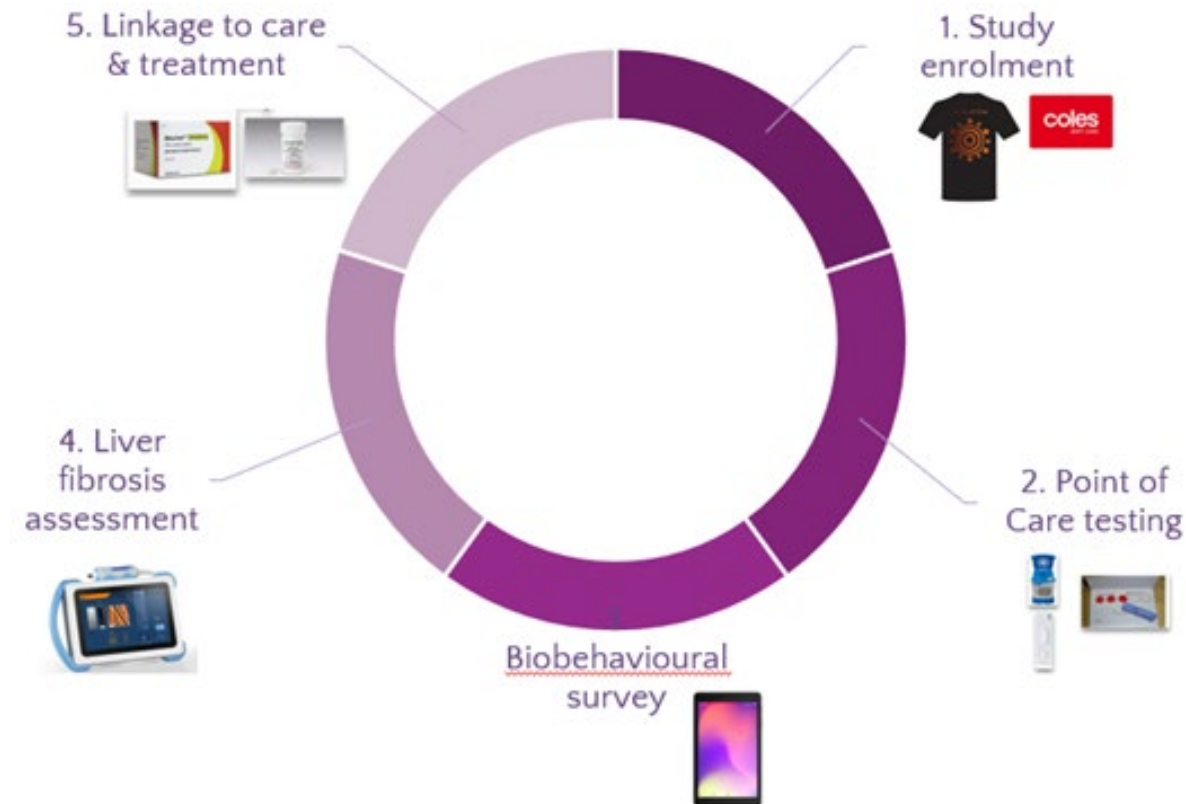
Aim and Method

Aim to identify factors associated with HCV testing

SCALE-C “Strategies for hepatitis C testing and treatment in Aboriginal communities that Lead to Elimination”

A community-based “test and treat” four ACCHS POC testing + non-invasive liver fibrosis assessment + linkage to care

May 2019 – July 2022 - **200 participants at risk** (198 completed baseline biobehavioural survey)



Results

	Tested last 12m n / N (%)	Adjusted Model† PR (95% CI)
Primary source of income		
Government support	69 / 183 (37.7%)	Ref.
Employment (Full, Part or Casual)	4 / 9 (44.4%)	1.24 (0.38, 3.03)
Other including no income	4 / 6 (66.7%)	1.68 (0.51, 4.12)
Currently resides with		
Family or friends	30 / 78 (38.5%)	Ref.
Alone	28 / 83 (33.7%)	1.19 (0.69, 2.04)
Correctional facility, rehabilitation service or other	14 / 28 (50.0%)	1.60 (0.78, 3.15)
History of prison or juvenile justice		
Never	18 / 48 (37.5%)	Ref.
Yes, >12 months	16 / 47 (34.0%)	1.03 (0.48, 2.16)
Yes, ≤12 months	43 / 102 (42.2%)	1.36 (0.68, 2.83)
Regular GP and time since previous visit		
No regular GP	21 / 65 (32.3%)	Ref.
Regular GP but not in last 6 months or cannot recall	10 / 34 (29.4%)	0.92 (0.41, 1.90)
Regular GP within last 6 months	46 / 99 (46.5%)	1.48 (0.87, 2.59)
History of injecting drug use		
Never	7 / 27 (25.9%)	Ref.
Yes, >6 months	10 / 36 (27.8%)	1.14 (0.43, 3.20)
Yes, ≤6 months	60 / 135 (44.4%)	1.75 (0.85, 4.25)
History of opioid substitution therapy		
No	51 / 141 (36.2%)	Ref.
Yes	26 / 57 (45.6%)	1.30 (0.80, 2.08)
History of HCV infection		
No	34 / 120 (28.3%)	Ref.
Yes	43 / 78 (55.1%)	1.98 (1.26, 3.13) *

† Adjusted for age, sex and Indigenous status

History of HCV test (self-reported):

- 39% (n=77) ≤12 months
- 26% (n=52) >12 months
- 35% (n=69) never

42% of people incarcerated in the last 12 months reported having a HCV test

46% of people who had seen a GP in the last 6 months reported having a HCV test

Those with a history of HCV infection were approximately twice as likely than those with no history of HCV infection to have had a HCV test in the past 12 months

Conclusions

Less than half of SCALE-C participants reported having a HCV test in the past 12 months.

Those with a history of HCV infection more likely to have been tested.

Multiple opportunities for HCV testing prior to the SCALE-C study, including within the justice system and primary care.

Interventions like SCALE-C, within primary care:

- Help simplify HCV care pathway¹
- Enables HCV care to be delivered within culturally safe settings (ACCHS)¹

¹Lafferty L, Beadman M, Ward J, Flynn E, Hosseini-Hooshyar S, Martinello M, et al. Patient and healthcare provider perceptions of acceptability of fingerstick point-of-care hepatitis C testing at Aboriginal Community Controlled Health Services in Australia. *International Journal of Drug Policy*. 2024;125:104335



Thank you

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Special thanks to:

Dr Suruchi Amarasena

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