

# ENHANCED SELF-EFFICACY IN HCV MANAGEMENT: EVALUATING THE OUTCOMES OF A MULTIDISCIPLINARY WORKFORCE EDUCATION PROGRAMME ACROSS FIVE AFRICAN COUNTRIES

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**Background:** Education programs are crucial for training a multidisciplinary addiction health workforce in HCV management, but few have been evaluated. This project assessed changes in knowledge and self-reported confidence (self-efficacy) among participants in an HCV education program, tailored to 5 African countries. The “Hepatitis C in Primary Care and Drug and Alcohol Settings Education Program” (the Program) has been successfully delivered in 11 countries since 2016, with this expansion focusing on African.

## Description of program:

The Program consists of 1) Online learning modules, 2) An interactive virtual workshop; 3) Tailored capacity strengthening toolkit. The program was contextualized for delivery in 5 countries, including translation, between 2022-2024. Participants completed pre-, post- and 3-month post-course surveys using multiple-choice questions to measure knowledge and a 5-point Likert scale to assess confidence across 7 HCV core competencies.

## Effectiveness:

A total of 185 participants attended six sessions across South Africa (30.3%), Nigeria (25.4%), Egypt (10.3%), Morocco (10.3%), and multi-country (23.8%). Attendees included Healthcare Practitioners (38%), Managers (10%), Nurses (17%), and Community Workers (6%) from Needle and Syringe Programs (27%), Primary Healthcare (15%), Hospital-based (13%), Non-hospital (13%), and Sexual Health services (10%).

Among participants completing pre-and post- workshop surveys (n=44), knowledge increased by 12.8% with sustained gains of 25.6% at 3-month follow up (n=27). Confidence in all core competencies improved post-workshop (+35.72%), remaining 38.92% higher at follow-up. Notable improvements included assessing liver disease severity (e.g., multi-country 20% vs. 60%, Egypt 0% vs. 60%) and educating patients about HCV risk factors (e.g., South Africa 0% vs. 40% and 60% at follow up).

## Conclusion:

Self-efficacy in HCV testing care and treatment improved post-program, with changes sustained. Further work is needed to address low survey response rates and evaluate program impact. Future iterations will refine data collection methods and enhance HCV testing and treatment in drug and alcohol settings.

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