

IMPACT OF LOCALLY-LED ANTICIPATORY ACTION INTERVENTIONS IN REDUCING HEPATITIS C STIGMA AMONG SUBSTANCE ABUSERS IN KADUNA STATE, NIGERIA

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Background:

In Kaduna State, Nigeria, stigma surrounding hepatitis C among substance abusers hinders access to healthcare, leading to delays in diagnosis and treatment. Locally-led anticipatory action (LLAA) interventions, which focus on community-driven solutions and promote equity, diversity, and inclusion (EDI), are essential for addressing stigma and improving health outcomes. This study aims to identify key LLAA interventions implemented in Kaduna State, evaluate their outcomes, and identify research gaps in reducing hepatitis C stigma among substance abusers.

Program Description:

Between February 2022 and September 2023, LLAA interventions were conducted across three local government areas (Kajuru, Chikun, and Zaria), targeting 1446 individuals from various demographics. Data were collected through 45 in-depth interviews with community leaders, healthcare workers, and individuals living with hepatitis C, alongside 10 focus group discussions with 116 participants. Thematic analysis was used to assess the interventions' effectiveness, disaggregating results by age, gender, and geographic location.

Effectiveness:

Interventions included community-led hepatitis C awareness campaigns, peer education programs, and stigma-reduction advocacy groups. Outcomes showed a 38% increase in hepatitis C testing uptake, with 57% of new testers being women, primarily aged 18-35. Stigma-related incidents decreased by 42% (from 57% in 2021 to 33% in 2023). In Kajuru, peer education reached 524 individuals, leading to a 55% increase in early hepatitis C diagnosis. Advocacy efforts in Chikun and Zaria led to the formation of local EDI task forces, enhancing healthcare access for marginalized groups, including women and youth. However, engagement with men who inject drugs (MWID) remained low (less than 3%).

Conclusion and Next Steps:

LLAA interventions have significantly reduced hepatitis C stigma and improved healthcare access, particularly for women and youth. However, challenges persist in engaging MWID. Further research is needed to explore sustainable strategies to engage these groups and scale interventions statewide. These findings underscore the value of community-driven, EDI-promoting approaches to addressing hepatitis C stigma.

A Disclosure of Interest Statement

The authors declare no conflict of interest