

The Community affected by Hepatitis C voice the barriers to reaching the 2030 Hepatitis C elimination goals in Australia.

Authors:

Kennedy R¹, Gorringe A¹, Gobeil J¹, Howes M¹, Dormany J¹, Morrison E¹

¹ Australian Injecting & Illicit Drug Users League (AIVL)

Background/Approach:

Injecting drug use remains the primary mode of Hepatitis C (HCV) transmission in Australia. Despite the national commitment to eliminating HCV by 2030, strong systemic barriers persist. These include the criminalisation of drug use, lack of harm reduction and culturally appropriate services in prisons and wider community, inequitable access to treatment, and inadequate funding for and implementation of peer led support. This presentation explores these barriers, and the necessary peer driven policy reform, advocacy and service levels required to achieve these goals,

Analysis/Argument:

People who inject drugs (PWID) face a significantly higher prevalence of HCV than the general population, with ongoing transmission driven by systemic barriers to harm reduction. The lack of widespread, accessible needle and syringe programs (NSPs), in custodial settings, remains a critical gap despite their proven effectiveness in reducing BBV transmission. Criminalisation and stigma further hinder access to essential health and social services, exacerbating health and well-being disparities, particularly for First Nations and those in rural or remote areas. Existing harm reduction efforts remain insufficient due to inconsistent NSP coverage, limited drug treatment options, and a lack of culturally appropriate and gender-responsive services tailored to the needs of PWID.

Outcome/Results:

Current policies undermine national health strategies, including the *6th National HCV Strategy draft* and *National Aboriginal and Torres Strait Islander Health Plan*. Key recommendations for reform include implementing NSPs in custodial settings, expanding peer-based harm reduction programs, ensuring continuity of care during prison transitions, and addressing Medicare access barriers.

Conclusions/Applications:

Achieving HCV elimination requires a shift towards evidence-based harm reduction, decriminalisation, and prison health reforms. Without addressing systemic inequities, Australia risks failing to meet its 2030 targets. The findings highlight the need for policy alignment with public health goals to reduce HCV transmission effectively.

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