

Is it 'people who are hard to reach'  
or is it 'services that are hard to  
access'



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Angela Corry



## Who we are

- We are the only peer based, not for profit community based harm reduction organisation that represents the needs of people who use drugs in WA.
- We provide a range of non-judgemental evidence and consumer informed and peer led services, including services aimed at reducing the transmission of BBV's and STI's.



## Service we provide

- NSEP in the Perth metro and Southwest region of WA, including outreach and mobile service.
- Nurse Practitioner operated health services
- Peer HCV case management
- Peer education programs (overdose prevention and hep C)
- Peer Naloxone programs
- CaLD peer support program
- Youth programs
- Harm reduction information, education and advocacy, including significant emphasis on reducing stigma and discrimination
- Community and workforce development
- Postal service
- Health promotion

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## Our approach

- ✓ Recruited experienced Hepatology NP
- ✓ Research with post grad medical student: clinical audit (1074 files); recontacted tested but not treated previous consumers; focus groups with consumers
- ✓ Informed ongoing iterative model of engagement, treatment and ongoing care
- ✓ Consumer experience and input informs all aspects of service delivery including health promotion activities

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# Health promotion activities

The collage features several key health promotion materials:

- World Hepatitis Day (28th July 2016):** A central poster with a globe and text: "There's a lot you should know about Hepatitis C. After the fact it can be prevented." It also mentions "Healthy Liver Lunch" and "World Hepatitis Day Lunch at the Forum".
- WASWA (Western Australian Society of Women's Aids Services):** Multiple posters and brochures. One highlights "THE NEW HEP C TREATMENT IS FINALLY HERE" with "12-24 WEEKS DURATION", "NO INJECTIONS", and "MINIMAL SIDE EFFECTS". Another says "95% - 100% CURE RATE".
- Peer Based Harm Reduction WA:** A large campaign titled "BE FREE FROM HEP C" with icons for "NEW", "EASY", and "95% CURE". It lists "EASY ACCESS TO FREE HEPATITIS C TREATMENT AT PEER BASED HARM REDUCTION WA" and provides clinic hours: "MONDAY 12:00 PM to 1:30 PM", "TUESDAY 10:00 AM to 12:00 PM", "WEDNESDAY 10:00 AM to 12:00 PM", "THURSDAY 12:00 PM to 1:30 PM to 1:30 PM". It also states "10,416 PEOPLE CURED IN 2016".
- NSP Survey:** A poster titled "THE NSP SURVEY IS BACK" with a "\$10?" incentive and dates "15th to 19th of October".
- Informational Text:** A section titled "Peer Based Harm Reduction WA nurse-practitioner supports access to new, effective hepatitis C treatment" includes a photo of a woman and text explaining the program's goals and services.



# Consumer consultations key populations

- ✓ Tested but not treated
  - ✓ Past PBHRWA consumers
- ✓ Tested and treated
  - ✓ Current PBHRWA consumers
- ✓ Mix of tested, treated and not tested or treated
  - ✓ PBHRWA peer educators, outreach consumers and their peer networks





## What consumers said

### ✓ Tested but not treated

- ✓ Ongoing stigma and discrimination
- ✓ Interferon related treatment fear
- ✓ Existing health promotion of new treatments not resonating

### ✓ Tested and treated

- ✓ Varied but key factors: respect; kindness; and non-judgemental treatment
- ✓ Importance of peer support and flexible approach
- ✓ Not enough acknowledgement/promotion of improvements in physical and mental health post treatment

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## What consumers said

### ✓ Mix of tested, treated and not tested or treated

- ✓ Stigma and discrimination
- ✓ Unaware of new treatments
- ✓ Limited access
- ✓ Issues with veins and blood tests
- ✓ Other priorities
- ✓ Cost/benefit not resonating
- ✓ Mainstream messages not resonating/relevant
- ✓ Peer support and flexibility important

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## Our evolving model

- ✓ Commenced testing and treatment in Perth clinic once NP's authorised to prescribe
- ✓ HCV testing and treatment information and resources included in all peer education
- ✓ Ongoing consumer feedback informed development of HCV peer case management role
- ✓ Expanded clinic to include outreach model in Perth
- ✓ Expanded clinic to SW site October 2018, including HCV peer case management role
- ✓ Commenced hepatitis C peer education program in Perth

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## Our evolving model...

- ✓ Commenced hepatitis C peer educator program in Perth
- ✓ 2x Peer workers trained in phlebotomy; 1 in Perth and 1 in the Southwest
- ✓ Southwest service expanded to include mobile health clinic across the region
- ✓ Incentive payments commenced in Southwest service this month
- ✓ Consumer experience and input informs all aspects of service delivery

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## Key Learnings

- ✓ Engagement may take time
- ✓ Key role of peers
- ✓ Messaging important
- ✓ Service responsiveness, innovation and flexibility are imperative
- ✓ Trust, respect and no judgement is mutual
- ✓ Promotion of positive improvements
- ✓ Cannot overstate the impact of stigma and discriminatory experiences of people who inject drugs

**“we aren’t hard to reach, we are hiding from mainstream services”**