

Expanding testing and treatment programs for hepatitis C into secondary needle and syringe programs

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We are faced with a number of challenges:

1. Minimal experience treating people who inject drugs.
2. Developing treatment focused community-based models for people who inject drugs.
3. Maximising needle and syringe programs in engaging with clients about hepatitis C treatment.

Objectives of project:

- Identify barriers and facilitators to hepatitis C treatment for people who inject drugs.
- To understand what Secondary NSP workers know about hepatitis C and how they currently deal with clients in relation to hepatitis C for referral and support.
- To establish, test and evaluate a 'light touch' intervention in Secondary Needle and Syringe Programs to establish and help facilitate hepatitis C treatment uptake.



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Secondary NSPs



Participant characteristics

- 34 semi-structured interviews with clients of secondary NSPs currently living with HCV
- Recruited from 6 sites in metropolitan and regional Victoria

Gender

Male	17
Female	17

Age

30-39	11
40-49	14
50-59	9

No. years living with HCV

11-20	7
21-30	5
31-40	6
n/a	7



Experience living with hepatitis C

- Knowledge about hepatitis C
 - poor

- Health of clients
 - General health poor, lived with chronic health conditions, not necessarily related to hepatitis C, but long term engagement with drug use
 - Mental health was an issue for many

Findings – Barriers and Facilitators

Facilitators

- Links with other health services.
- Expectation of a positive change after being cured
- Clients recognised secondary NSPs as a place to access more information about HCV
- Most participants reported positive relationships with staff
- Desire to undertake treatment

Barriers

- Limited knowledge of HCV and DAA treatments
- Inconveniences when accessing healthcare systems
- Concerns of side effects

Thanks to MSD for funding this work and
acknowledging the value of secondary NSPs in
treating people with hepatitis C.

