



# Role of AOD Workers in Facilitating Access to Hepatitis C Care

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## Overview

- Hepatitis C Awareness Project- HAP
- Consultations
  - Surveys
  - Interviews
- Recommendations



# Hepatitis C Awareness Project - HAP

Raise awareness and understanding of hepatitis C:

- Testing
- Diagnosis
- Liver health and monitoring
- Treatment



## HAP Consultations

### Surveys

Feb and March 2016

Total = 35

Multiple choice, one page self- administered surveys

Completed in NSW, ACT, WA and QLD



## Survey Results Summary

### Q 1. "Do you have hepatitis C"?

Total = 25 (10 surveys didn't include this question)?

"Yes" = 22

"No" = 2

"Don't know" = 1

### Q 2. "What motivated you to get tested"?

Total = 35

Total responses = 42

"Worried about health or feeling sick" = 14

"A health care worker suggested I get tested" = 11

"Shared needles or have needle stick injury" = 9



## Survey Results Summary

### Q 3: "Do you get regular Hep C check-ups"?

Total = 35

"Yes" = 20

"No" = 14

"Don't Know" = 1

### Q 4: "What motivated you to get follow up tests to monitor your liver health"?

Total = 35 (no response by some and multiple responses by others)

"A health care worker suggested I get follow up tests" = 15

"I was worried about my health or was feeling sick" = 11

"Other reasons" = 6

"Family or friend said I should" = 3



## Survey Results Summary

### Question 5: "Are you currently on treatment or thinking about Hep C treatment"?

Total =35

"On treatment" = 2

"Thinking about treatment" = 19

"Not thinking about treatment" = 14

### Question 6: "Were there any barrier or difficulties to getting tested, getting follow-up test or getting treatment"?

Total = 34 (no response by some and multiple responses by others)

"Other reason" =10 "treatment regime too hard until new DAA's"; "transport" and "side effects".

"Blood tests are difficult for me" =7

"Don't feel sick" = 6

"Staff at clinic not friendly" = 3

"Hospital or clinic too far away" "Wasn't a priority for me" "Waiting time too long" and "Health care worker didn't mention the need for further tests" = 2 each



## Survey Results Summary

### Question 7: "What are you main sources of information about Hep C testing, monitoring and treatment"?

Total = 58 (multiple answers provided)

"Health care workers" =20

"Peers" = 9

"Pamphlets and magazines" = 8

"The internet" = 7



## Survey Results Summary

**Question 8: "If there was just ONE reason why you would start Hep C treatment, what would it be"?**

### Health

"To avoid damage"

"Getting older and concerned about increasing health impacts"

"I'd like to feel better"

"If sick or getting sicker"

"Prevent long term complication, cancer, transplant, disability, death"

"To be 100% healthy, have my life back, not be held back by my past"

### Family

"To save my life and be there for my 3 children"

"To get healthy for my kids "

"To live long enough to see my son live a full life himself"

"For living longer and happier for my family "



## Survey Results Summary

**Question 9: "Any further comments? or Suggestions on help to improve access to information, support, health services"?**

More services

More Dr's talking to patients

Discrimination laws don't extend to us drug users so don't trust treatment outlets

Stop discrimination

GP's need more training

A more understanding treatment of users instead of being looked at as criminals

More advertising and promotion of available or soon to be available treatments

Put brochures in more places

More places to get free fits to minimise the use of using dirties or used fits

Get the doctors to stop being smarty \*#\*#\* and not be so \*#\*#\*#\*#



## HAP Consultations

### Interviews

Nov and Dec 2015

Total = 77

Face to face interviews taking approx. 15 to 20 minutes

Conducted in ACT , WA ,QLD

\$10 payment for interviews



## Interview Results Summary

### Knowledge of Hep C tests

The majority of participants had been tested for Hep C  
 Very few knew what type of test– whether antibody or PCR  
 Interviews included prompts - antibody or PCR tests  
 Around half said yes  
 Very few could provide explanation

### Motivators for testing

A family member or friend had urged them to be tested  
 and/or  
 For the sake of family “Want to be around to see kids grow up.”

Money



## Interview Results Summary

### Barriers to testing and treatment

Poor experiences with health care professionals  
 Difficulty with blood test  
 Hep C not a priority

### Making testing easier to access

Many of the people interviewed in the ACT commented that they would do more to follow up on their Hep C  
 "if it was made quick and easy like today"

### Format of Hep C resources

Approx 50-50 split  
 On the internet – Not just the internet  
 Hard copy resources in reception areas -read while waiting for appointments



## Interview Results Summary

### Where do you get your Hep C information?

Drug user organisation most common response  
 From the service where the interviews were being conducted  
 Peer services/NSP  
 DUO magazines and brochures  
 Informal chats with staff at AOD (NSP and OST) services including DUO, and  
 Formal peer education sessions rated as extremely useful and informative  
 Peers

Very few from their GP  
 Did not understand or did not retain the information  
 Didn't trust the information  
 Felt GP didn't have very good knowledge of Hep C  
 GP seemed disinterested  
 Contradicted their current knowledge of Hep C



## Strategies to challenge stigma and discrimination and reduce barriers

- Being polite, non patronising and non judgemental
- Having a balance between professional and personal beliefs
- Being respectful of people regardless of their choices
- Language
- Appearances
- Building relationships
- Creating a PWID friendly environment
- Building capacity for self-management and self-care
- Compassion – understanding the pain needs of PWID



## Strategies to challenge stigma and discrimination and reduce barriers

- Confidentiality and privacy – as individual worker and organisational policies that protect confidentiality and privacy
- Speaking out
- Policy development which is consistent with human rights principles
- Revision of standard forms and questionnaires
- Providing outlets for feedback
- Supporting PWID to make complaints
- Eliminating punitive approaches – most relevant for OTS services
- Ongoing training and education





## HAP Consultation Recommendations

- Information = increased level of engagement and empowerment
- Proactive with Hep C information
- Providing written, take home information
- Testing with knowledge and informed consent
- Providing test results in a supportive, non-judgmental manner



## HAP Consultation Recommendations

- Acknowledge place of family and/or peers
- Consider options around offering incentives
- Easier access
- Building relationships



## HAP Consultation Recommendations

- Blood test easier
- Taking extra blood
- Allowing people to take their own blood
- Engaging with DUO
- Peer support workers



## Ways Forward

Include Hep C as part of core business

Ensure that all PWID have access to information that can empower them to make their own informed decisions about their health

Building relationships with consumers, developing trust, respect and understanding

Ensure ease of access to new Hep C treatment

Partnership building

Continued support for prevention initiatives



# Thanks

PWID who participated

Services/Individuals who assisted with interviews and surveys

Members of the HAP Expert Advisory Committee (EAC)

DoH for funding HAP

