

Peer Support Increases Access to Hepatitis C Treatment to Care in Drug and Alcohol Settings

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"ADVANCING THE HEALTH, RIGHTS AND DIGNITY OF PEOPLE WHO USE DRUGS ILLICITLY IN NSW"

Background

The new era of DAAs has ensured that treatment rates of people living with chronic hepatitis C are increasing, as waitlisted patients are quickly engaging with clinics.

However, equity demands that more marginalised populations are also supported to undergo treatment. Often the primary point of contact that highly marginalised individuals have with the health care setting is in harm reduction or opioid substitution clinics where they may previously have experienced highly stigmatised care.

This presentation describes the work of a peer support worker (PSW) in a high volume public OST clinic in increasing access to hepatitis C treatment.

The intervention

Peer support consists of a worker with lived experience of injecting drug use and hepatitis C working in treatment settings appropriate to their skill base. NUAA upskilled a well-regarded consumer engagement officer in HCV treatment and support in an inner city drug and alcohol service.

The role involved:

- Providing brief educational interventions on hepatitis C, transmission, testing, monitoring and treatment
 - Encouraging connection with health care providers for testing, monitoring and treatment
 - Providing support to people as they navigated the new hepatitis C treatment pathways
 - Acting as a go-between the services and consumers
 - Advocating for consumers where required
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Evaluation methods

We undertook to evaluate the acceptability and efficacy of this intervention

Survey examined:

- Overall satisfaction with service
- Acceptability of PSW role
- Efficacy of the PSW role

A total of 47 clients completed the survey (out of approximately 150 service clients)

Survey was administered by a PSW who was not connected with the service

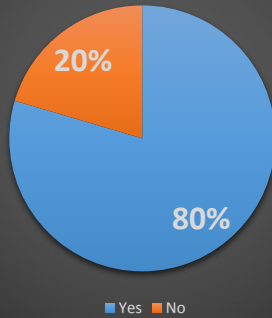
Demographics

The majority of participants were male (75%),

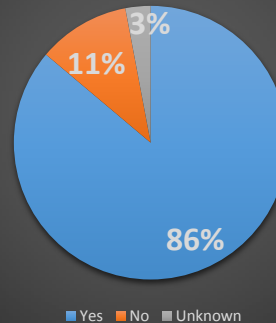
Aged over 35 years (58%)

Long term service users (77% had attended the clinic for at least 1 year)

Has the PSW chatted with you
in the last 12 months?

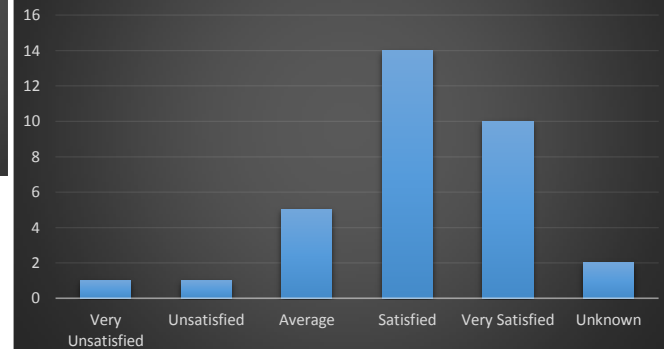


Did the PSW help you in a
concrete way?



A very high percentage (87%)
experienced the service as good
to excellent

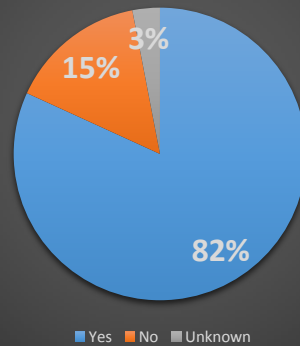
How satisfied are you with
the PSW?



Results Connecting

Results Outcomes

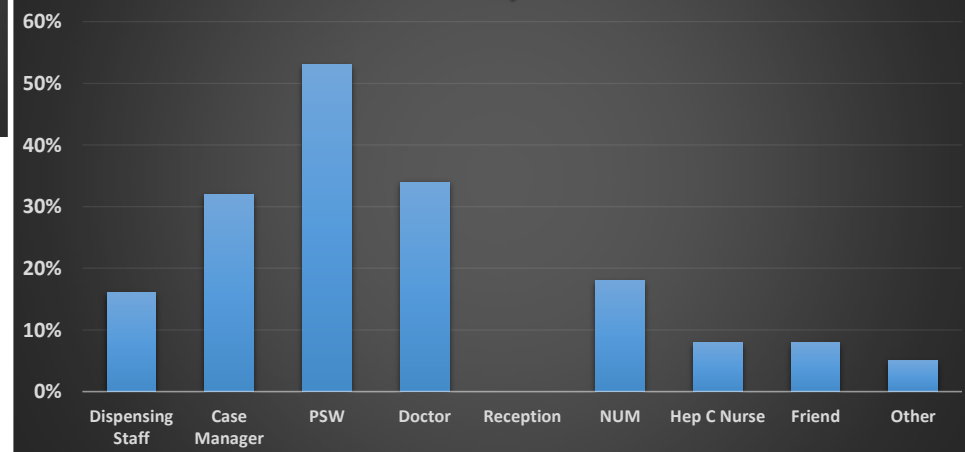
Do you feel more connected to local services due to the PSW?



The PSW had discussed hepatitis C with 30% of those surveyed

Verses;
 Doctor (20%)
 Dispensing staff (10%)
 Hepatitis C nurse (5%)

In the last 12mths who discussed hep C with you?



Nearly half (47%) of participants reported that the Peer Support Worker was involved in the decision making process to proceed with treatment

Indicating that this support was instrumental in the decision.

Learnings

- Peer support worker was highly effective in engaging with OST clients around HCV treatment
 - Peer support can facilitate hepatitis C treatment access in Opiate Substitution Treatment settings.
 - Peer Support Worker roles must be considered in all high-volume Opiate Substitution Treatment Clinics in order to ensure equity in hepatitis C treatment
 - Further, the ongoing support of a peer through the testing, decision making process and the treatment regime is the next evolution of ensuring the most vulnerable and marginalised injecting drug users and people in opiate treatment can and do access and complete hepatitis C treatment.
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Recommendations

- Structural norms in clinical practice inhibit discussion, education and support
- Peer support “meets people where they live” providing opportunities for engagement
- Peer support will be essential to achieving the target of hepatitis C elimination

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