

# LINKING HEPATITIS C INFECTION PEOPLE WHO INJECT DRUGS TO TREATMENT AND CARE, SOUTH AFRICA

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## **Background:**

A recent viral hepatitis study conducted in South Africa through community-based service delivery organizations for People Who Inject Drugs (PWID) found high HCV prevalence among PWID in two cities, Pretoria (84%) and Cape Town (42%). This same study found that few hepatitis-infected individuals attended follow-up hepatitis care appointments. We therefore explored facilitators and barriers to accessing care for HCV-infected individuals.

## **Methods:**

This study used two sets of interviews. The first interview asked participants (N=17) to reflect on past experiences of health care provision, plans to attend their appointment and perceived facilitators and barriers. The second interview was conducted with a subset (n=10) of the same participants subsequent to the date planned for follow up care appointments. In the latter set of interviews we asked about appointment attendance and treatment experience.

## **Results:**

In the initial interview the majority of participants ( $n = 16$ , 94%) indicated that they intended to attend their follow up care appointments despite their prior experiences of stigmatization, fears about extended waiting periods and withdrawals, insufficient finances, and (in Pretoria) lack of accessible treatment. Appointment attendance was, however, low ( $n=5$ , 29%) across both cities, despite the availability of Direct Acting Antivirals and tertiary care systems in Cape Town. Non-attendance was partly explained in relation to the barriers described in initial interviews. Yet a more insidious and powerful sub-narrative of low self-worth and a limited sense of urgency also emerged as key explanatory factors for non-attendance.

## **Conclusion:**

Our findings indicate that successful linkage to HCV treatment and care may require more than accessible, sensitive, available services. It may also require the inclusion of psychosocial support for hepatitis patients which emphasizes that delayed treatment hampers health outcomes and focuses on building and maintaining a sense of self-worth.

## **Disclosure of Interest Statement:**

The study was funded by the Bristol Myers Squibb Foundation