

# **BLOCKS AND ENABLERS TO HEPATITIS C VIRUS SCREENING AND TREATMENT – A PRISONER’S PERSPECTIVE**

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## **Background:**

In Ireland, like other developed countries, the Hepatitis C Virus (HCV) disease burden is carried mainly by people who inject drugs (PWID). PWID are over represented in prison populations, leading to much higher HCV prevalence rates in prisoners than in the general population. Despite evidence that prison based HCV treatment is comparable to community treatment, uptake of screening and treatment is suboptimal. Several studies have identified barriers to PWID engaging with HCV care in the community, however very little is known about barriers and enablers to HCV care in prison settings. The aim of this qualitative study, the first in Ireland, was to identify prisoners’ experience of blocks and enablers to HCV care in an Irish prison setting.

## **Methods:**

Over a period of three months, three male prisoner focus groups (n=38) and one female (n=14) were conducted. Focus groups were recorded and transcribed. NVIVO 10.0 was used for organising and thematic coding of the transcribed data. Data collection ceased on saturation. Thematic coding was used to analyse the dataset.

## **Results:**

Prisoners identified the following blocks to screening and treatment; lack of knowledge, fear of HCV treatment and liver biopsy, poor motivation to engage with health services and concerns around confidentiality and stigma. Systemic blocks identified included, poor and inconsistent access to prison health services, delays in having screens and receiving results, confidentiality and the requirement to go to hospital. Enablers identified were access to health care, in-reach hepatology services, in-reach fibroscanning, peer support and stability of prison life.

## **Conclusion:**

Incarceration offers an ideal public health opportunity to engage a high-risk group of HCV infected PWID with prison and community based health services. Understanding the blocks and enablers to engagement will allow HCV screening and treatment services to be developed and implemented to optimise patient outcomes.

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