

HARM REDUCTION PROGRAM AND DCR HCV CAPACITY BUILDING

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Background: With success of advocacy efforts, increased numbers of drug users (DUs) are accessing HCV treatment. Making the provision of comprehensive harm reduction services more critical. Therefore, Needle Syringe Programs (NSPs), and Drug Consumption Rooms (DCRs) will need to tailor screening, enrolment and service delivery protocols to ensure drug injectors/users gain the knowledge and skills to prevent HCV infection and re-infection.

Methods: The Correlation Network's EU Hepatitis C and Drug Use Initiative developed capacity building trainings to assist harm reduction programs become capable to offer integrated HCV prevention and treatment support services. Additionally, in collaboration with the DCR network, a HCV needs assessment survey was conducted. Based upon the DCR HCV survey and information collected from capacity building trainings, we now have capacity building trainings tailored to the needs of each setting.

Results: Post training evaluation showed 85% reporting the training provided information that was direly needed. 60% who participated in the trainings reported not having formal harm reduction risk counselling training, safer injection training, or knowledge of HCV prevention needs for PWID. Additionally, preliminary findings from DCRs and our capacity building trainings show that enhancing safer injection education and offering access to HCV testing is needed. Modules reported most needed were 67% transmission risks for PWID; 59% other risks of HCV transmission; and 56% safer injection information.

Conclusion: As the HCV treatment becomes widely available and the DCR model becomes increasingly accepted it is critically important to develop best practices on how to integrate HCV testing and various primary/secondary prevention interventions. Despite gaps in knowledge and skills, we see an overwhelming willingness to adapt and integrate science based behavioural interventions, rapid testing and Fibroscan screenings. Whereby, making HCV capacity building in DCRs and harm reduction programs critical towards eliminating HCV within the PWID community.