

FROM CLIENT TO CO-WORKER: PEER WORK WITHIN A HARM REDUCTION HEPATITIS C TREATMENT PROGRAM IN TORONTO, CANADA

Authors: Tookey P¹, Broad J¹, Behm M¹, Bondy L², Dodd Z¹, Guyton M,³ Mason K¹, Powis J⁴

1. South Riverdale Community Health Centre
2. Division of Infectious Diseases, Western University
3. Sherbourne Health Centre
4. Michael Garron Hospital

Background: The Toronto Community Hep C Program is a community-based program designed to improve access to HCV treatment for people who use drugs and/or alcohol. Key to the program's ability to engage and retain clients throughout HCV treatment has been the meaningful involvement of peers in program design and delivery through: group support, patient advisory board and paid community support worker (CSW) positions filled by current/former clients. The purpose of this study was to gain an in-depth understanding of the facilitators and challenges in the transition from client to support worker.

Methods: This case study employed a collaborative approach whereby the study subjects (authors JB, MB) had input into the study design and analysis. Study cases (n=2) were purposefully selected. In-depth interviews were conducted and audio recordings transcribed verbatim. Data collected from the interviews was coded and analyzed using an inductive approach to identify emergent themes.

Results: Five main themes emerged: (1) personal qualities, (2) boundaries, (3) substance use, (4) structural factors, (5) journeys. Under each theme both facilitators and challenges emerged. Common personal qualities that contributed to success included identifying as being 'natural helpers'. The ability to identify and maintain boundaries as well as to learn from boundary breaches were key facilitators in both cases. A reduction in substance use, although not necessarily abstinence, was also cited by both as key to ongoing success. Structural factors such as stable housing, income and flexible job parameters were also key facilitators. Both CSW have made substantial life changes since becoming involved with the program that were enabled and supported by their work as CSW.

Conclusion: The cases examined here suggest that a model of peer employment with flexible qualification criteria, transition timelines, job responsibilities and a harm reduction framework can support successful integration of former clients into community-based health care teams.

Disclosure of interest statement: None of the authors have anything to disclose. No pharmaceutical grants were received in the development of this study.