

PROVIDING CELL PHONES AND PEER SUPPORT IS EFFECTIVE AT ENGAGING PEOPLE WHO EXPERIENCE CRIMINALIZATION IN HEPATITIS C CARE

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Background:

People who experience criminalization (PWEC), including people who use drugs or who are incarcerated, have high prevalence of hepatitis C virus (HCV) infection. PWEC are often unsuccessfully reached by care providers, resulting in low HCV treatment uptake. A key reason for this is PWEC frequently do not have stable a contact number. Strategies to address this and enhance engagement in HCV care among PWEC are needed.

Description of model of care/intervention:

'Test Link Call' (TLC) launched in British Columbia, Canada in October 2021. It provides PWEC living with HCV a free cell phone and 6 month plan, plus connection to a Peer Health Mentor (PHM) to support engagement in HCV care. PHMs receive referrals from correctional centres and meet clients at release to provide phone and connect to care. A network of 11 services identify additional PWEC through outreach or among those that present for care, and have cell phones on site to provide immediately.

Effectiveness:

Over 15 months, 205 PWEC enrolled in TLC. Semi-structured interviews were conducted with clients (n=10), PHMs (n=3) and care providers (n=5). Interviewees described TLC as highly effective at increasing engagement in HCV care among PWEC, with five themes emerging to explain why:

- 1) sense of personal value;
- 2) convenience in accessing care;
- 3) communication and trust;
- 4) social connection; and
- 5) motivation to change.

In-depth data collection was conducted in October 2022. Data were analysed to create an HCV care cascade (Figure 1). Overall, 49% (74/151) of clients had no fixed address and 38% (58/151) were on opioid agonist therapy (OAT). Among clients who received a prescription, 81% (58/72) started HCV treatment.

Conclusion and next steps:

TLC effectively engages PWEC in HCV care. We are currently expanding this model to support engagement in care among PWEC for other sexually transmitted and blood-borne infections.

Disclosure of Interest Statement:

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Figure 1.

