



Persistent Barriers to Hepatitis C Treatment Despite Peer Support: A Mixed Methods Analysis

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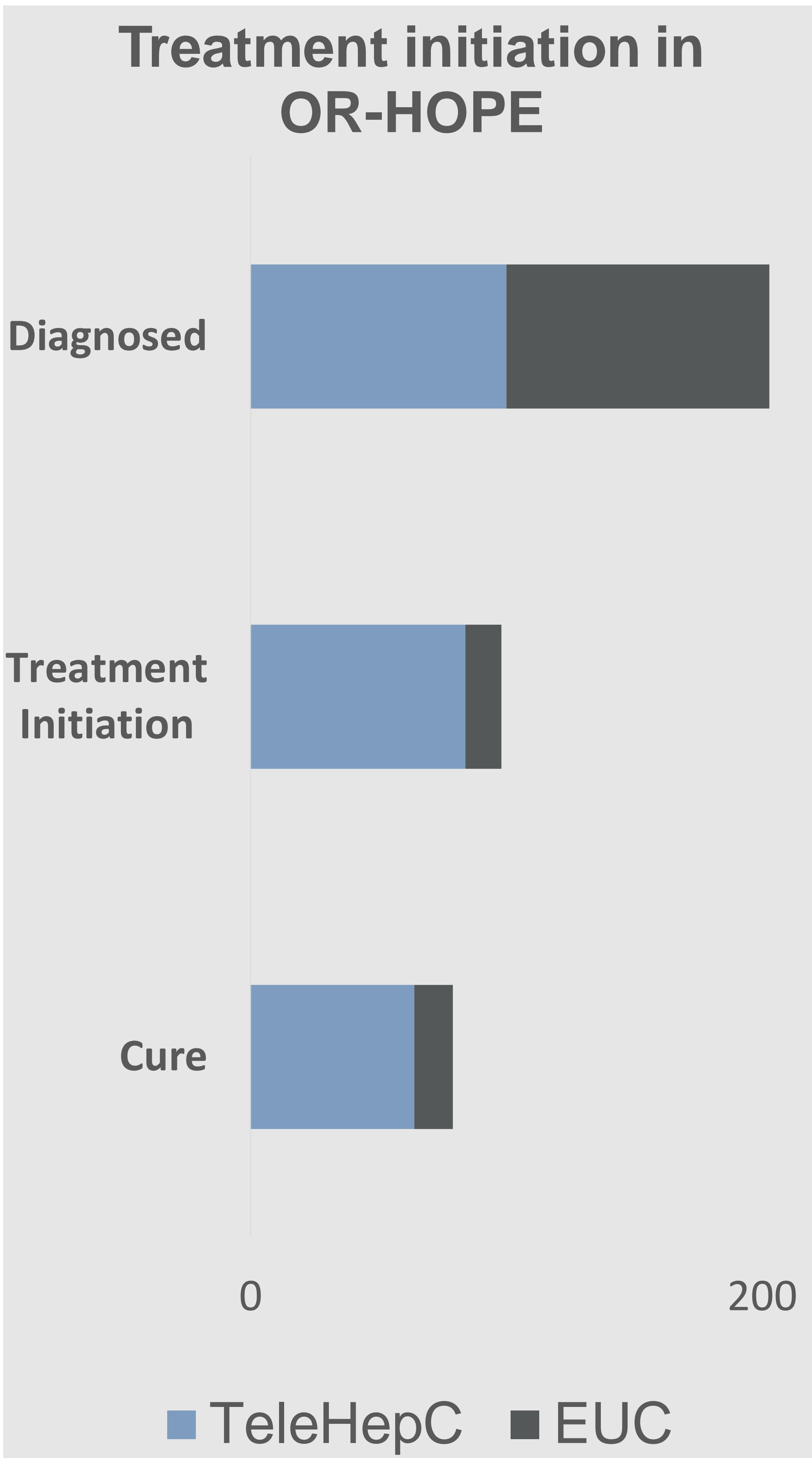
Introduction

- OR-HOPE tested peer-facilitated telemedicine for hepatitis C treatment (TeleHepC) versus peer facilitated community referral (Enhanced Usual Care [EUC]) in rural people who use drugs¹
- Across both groups, 50% of participants did not initiate treatment.
- **Question:** Among rural people who use drugs, what barriers prevented treatment initiation?

Methods

- Secondary, post-hoc analysis of RCT
- Convergent mixed methods design²
- Quantitative: Descriptive statistics analyzing response to a multiple-choice, serially administered survey item; all unique responses included
- Qualitative: Thematic, individual level analysis of peer-authored field notes³; ATLAS.ti

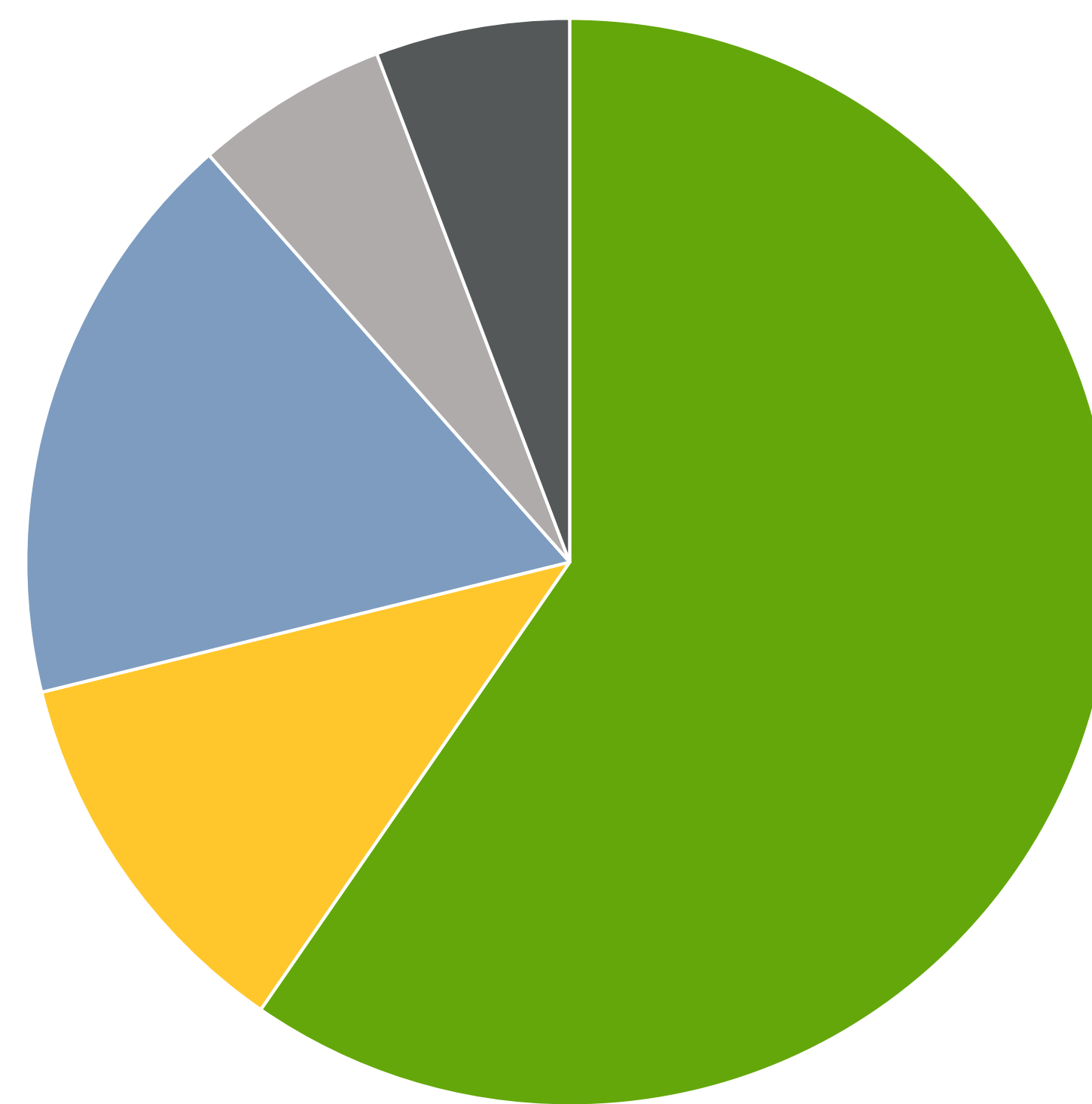
Results



Why did you not initiate treatment?

n=203

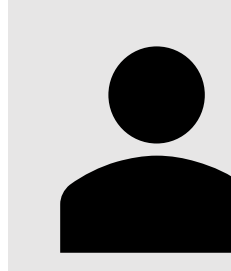
Non-initiators: n=97
Responders: n=43



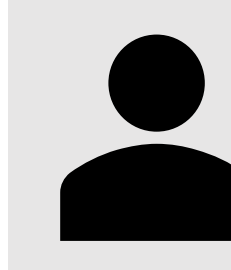
- No Primary Care Provider
- Health Care Stigma Related to Using Drugs
- Primary Care Would Not Refer
- No Health Insurance
- No Local Provider That Treats Hep C

Theme: Barriers to Linkage to Care

- No access to provider
- Relocated out of area
- Communication lapse
- Insurance lapse
- Competing illness



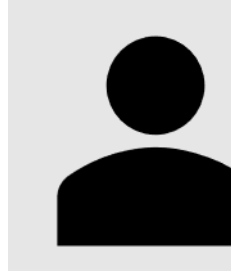
“He thought this [starting treatment] was going to be an easy thing and he has not had any success.”



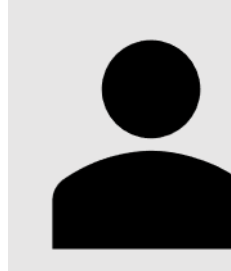
“[He] had not been able to follow thru with PCP for hep-c treatment due to depression.”

Theme: Barriers to Treatment Initiation

- Provider preference or stigma
- More tests ordered
- Incarceration
- Insurance systems



“His PCP wants to see him in a program before treating HCV.”



“She has not been treated by her PCP and would like to be treated when possible with telemedicine.”

Conclusions

- Despite Peer Support, treatment non-initiation was common
- Limited access to healthcare was the primary barrier
- TeleHepC overcame barriers to access but provider decisions, insurance systems and incarceration persisted as barriers to treatment initiation

References

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Disclosures of Interest

Work was supported by the NIH National Institute on Drug Abuse (UH3DA044831). Authors have no declarations of interest.