Opportunities for hepatitis C treatment uptake among people who inject drugs in Australia: a qualitative study

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Introduction

Eliminating hepatitis C virus (HCV) infection in Australia will require a nuanced understanding of the barriers to HCV treatment experienced by people who inject drugs.

Objectives

To identify opportunities/missed opportunities to increase uptake of HCV treatment

Methods

Semi-structured interviews with 15 participants who were HCV positive and had a history of injecting drug use

Thematic and framework analysis based on integrated framework by Høj and colleagues was used

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Results

Individual level

Barriers: lack of priority due to asymptomatic nature of HCV infection and other competing priorities, ongoing drug use
Enablers: Engagement in opioid agonist therapy (OAT)

Socio-structural level

Barrier: Stigma, unstable housing
Enabler: Peer and family support

System-level

Barriers: Gaps in care coordination within the prison system, poor linkage between services, shortage of OAT prescribers
Enablers: flexibility and availability of the services, good relationship with the service providers

Conclusion

Multipronged strategies that address knowledge gaps, improve service coordination, increase OAT prescribing capacity and employ peer-led model within drug and alcohol services are needed.