



Barriers to Accessing Hepatitis C Among People Who Inject Drugs

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Background

CDC estimates more than 2 million people in the United States (approximately 1 percent of the U.S. adult population) have hepatitis C. There has been a 124% increase in the new cases of acute HCV from 2013 to 2020. 66% of new cases are among PWIDs. Treatment of HCV through DAAs has been reduced by 51% in 2020 compared to 2015.

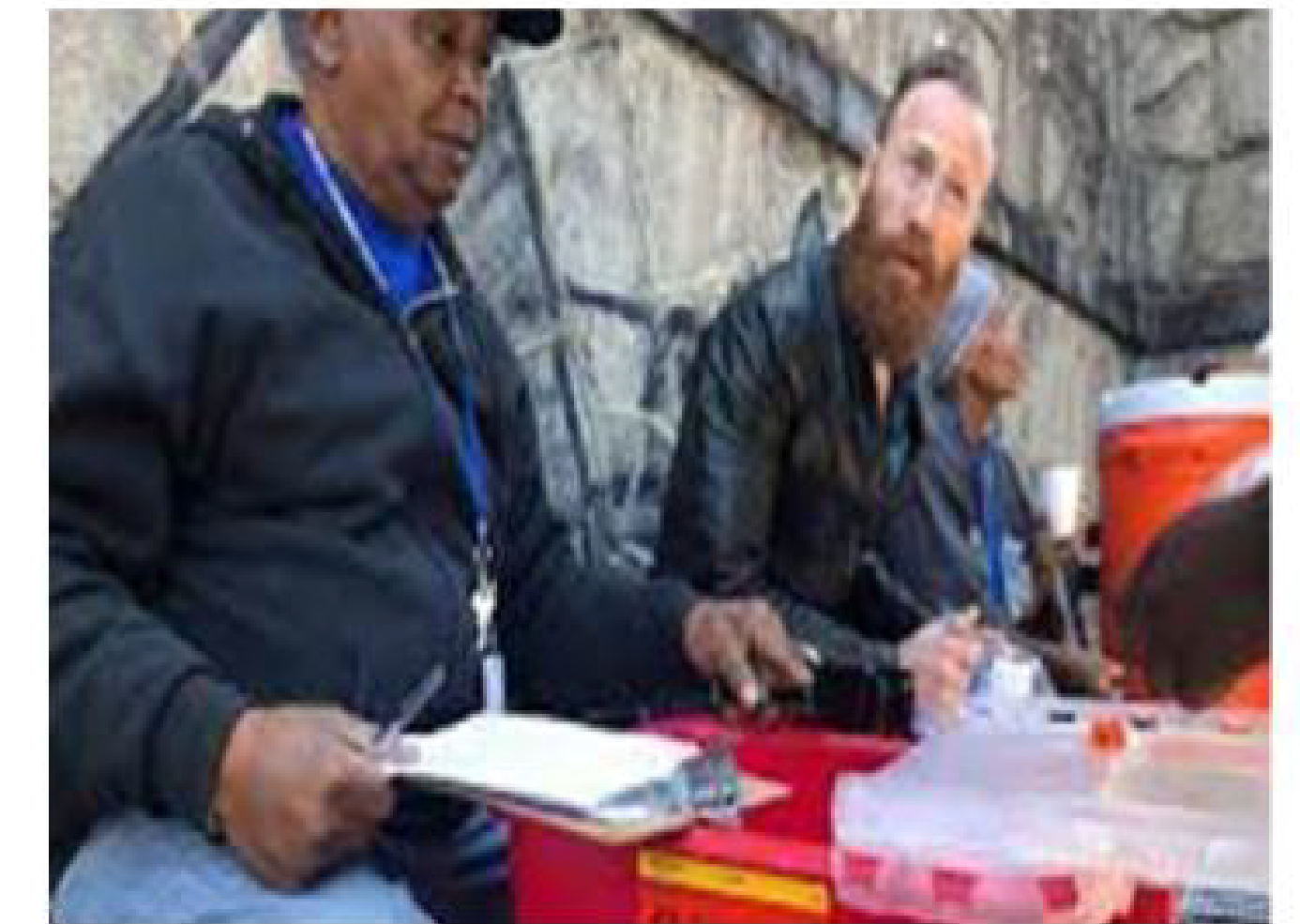
Many people who use drugs (PWUDs) are reluctant to access Direct Acting Antiviral (DAA) treatment for HCV under the false belief that they need to be drug free to commence treatment. This perceived barrier is compounded by the negative reception PWUDs often experience when accessing traditional health care settings. The combination has led to prevention of accessing HCV treatment among PWUDs even when treatment is available and accessible. The study aims to ascertain people's knowledge of HCV, access to HCV treatment and experiences navigating the health care solutions available to them.

The Georgia Harm Reduction Coalition, Inc. (GHRC) is a community-based wellness organization committed to promoting health and dignity by reducing the impact of HIV/AIDS, Hepatitis C, STI, and Substance Use within vulnerable communities.

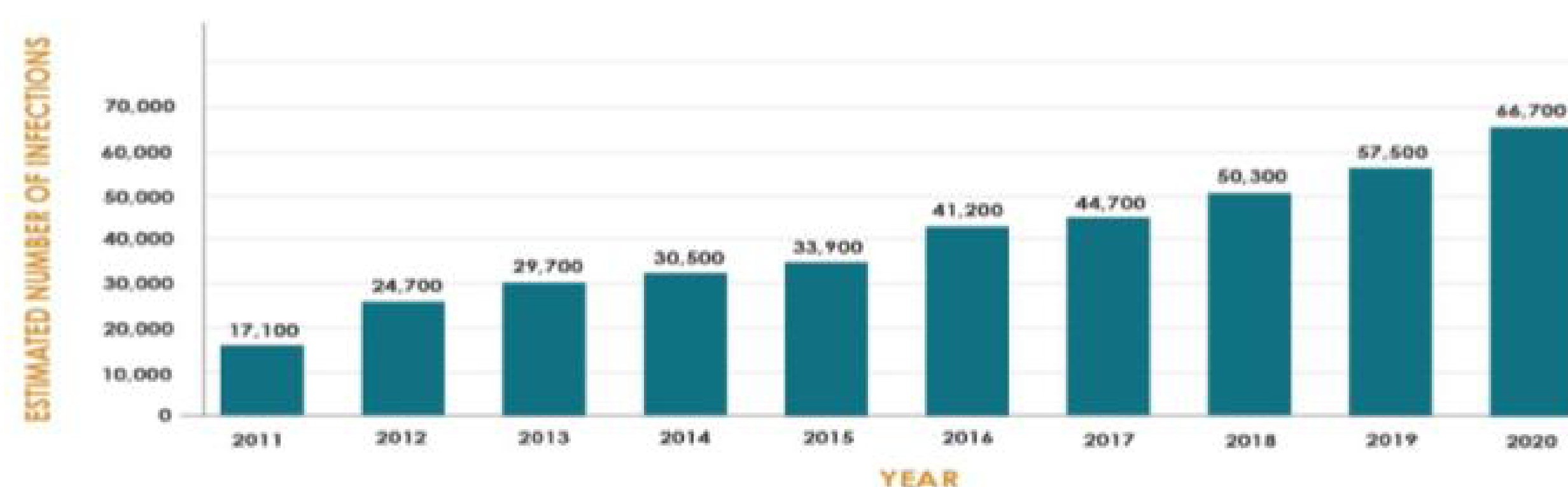
To better understand the root cause of these barrier, GHRC conducted a survey within one of our Syringe Services Program (SSP) sites where a Mobile Outreach Clinic was already established.

Results

Most respondents stated that they "felt uncomfortable," "anxious" or chose not to see a traditional health care provider. Those who did attend said that they "felt judged" and "stigmatized" about their substance use. Many believed "people who do not use drugs were given priority over them". One respondent stated they had "a good experience" but this was dependent on the provider they saw. More than half of respondents were unaware that they did not need to be sober before commencing treatment or that treatment can be free.



ESTIMATED NUMBER OF ACUTE HEPATITIS C VIRUS INFECTIONS, 2011-2020



Source: Centers for Disease Control and Prevention, Viral Hepatitis Surveillance - United States, 2020

For more information, visit [cdc.gov/nchhstp/newsroom](https://www.cdc.gov/nchhstp/newsroom)



Discussion

PWUDs continue to be stigmatized when accessing traditional health care settings. Most respondents stated that they would have preferred to get their treatment outside of a traditional healthcare environment. Harm reduction providers should be encouraged to include treatment in their range of service provisions. There remains a lack of knowledge among PWUDs as to the access criteria, cost, and the efficacy of treatment. Services providing treatment should actively engage with PWUDs to widen access to life saving treatment.

Methods

Between 01/23/2023 and 02/15/2023 35 semi structured interviews were conducted at one of GHRC's Syringe Service Program (SSP) sites in Atlanta, Georgia USA. Survey participants included 24 male, 9 female, and 1 transgender. 50% of participants identified as African American, 42% Caucasian, and 2% Latino. 4% identified as queer/bisexual and 76% identified as heterosexual. 96% of respondents resided in the city of Atlanta. 100% of participants indicated that they have been tested for HCV at one point of their life and over 30% of participants identified as living with HCV. Respondents were offered snacks and syringes as incentives to participate in the study. Respondents were asked a series of 20 questions regarding their knowledge of HCV, treatment and experiences accessing treatment through available health care provision.

Acknowledgments

We thank Gilead Sciences for funding this project.

We also thank participants from GHRC English Ave SSP site who participated in this project.

Special thanks to GHRC staff and volunteers who helped with this project.