THE ROLE OF A HEPATITIS C CARE COORDINATOR IN PROVIDING COMPREHENSIVE CARE TO FACILITATE HEPATITIS C TREATMENT AMONG PEOPLE WHO INJECT DRUGS

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Background: People who inject drugs (PWID) are disproportionately affected with hepatitis C (HCV). Many do not engage in HCV care due to structural and social barriers. This qualitative analysis examines the role of a care coordinator at a syringe exchange program (SEP) in facilitating access and retention in HCV treatment for active PWID.

Description of model/care: Accessible Care is a strategy being studied in on-going clinical trial to examine low-threshold HCV care for PWID delivered at a SEP compared to usual referral care. The HCV care coordinator (HCV-CC), a component of the study intervention, maintains a flexible schedule and an open-door policy with participants, with the goal of providing a stigma-free environment that adapts to participant needs. This approach innovatively supports HCV treatment at a SEP while providing a safe space where the participant can openly address barriers to initiating and completing treatment and preventing reinfection. This open, stigma-free interaction with HCV-CC is designed to facilitate adherence to HCV treatment and retention in care.

Effectiveness: Using content analysis conducted by two team researchers, we evaluated the HCV-CC notes describing 34 interactions with 13 participants. The HCV-CC fosters a non-judgmental relationship with PWID, in which trust facilitates drug use disclosure, open discussion of treatment interruption, emotional exchanges of gratitude and hope of cure. The HCV-CC addressed key barriers to retention and treatment: 1) drug use (open discussion about drug use and its effect on treatment and reinfection); 2) medication management (delivering and storing medication, addressing adherence); 3) social and structural barriers to treatment (transportation, homelessness, distress at losing family member).

Conclusion and next steps: The HCV-CC fosters an open, stigma-free relationship supporting PWID in addressing the multiple barriers that compromise HCV treatment success. The relationship between the HCV-CC and initiation and retention in HCV treatment will be explored in this study.