

PEERS POWER: INCREASING THE UPTAKE OF HCV TESTING AND TREATMENT AMONGST PEOPLE WHO INJECT DRUGS

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Background:

To increase the uptake of hepatitis C virus (HCV) treatments amongst people who inject drugs, our community model of care overseen by a clinical practitioner has evolved to include peer workers. A range of tailored peer-driven programs, informed by the experience of our consumers and employing peer workers, have been implemented since 2017.

Description of model of care/intervention:

Programs developed by identifying tasks performed by peers, and educating and training peer workers. Peer-driven model included HCV treatment support and HCV peer education. Initiatives such as the Testing Initiatives, outreach to patient's homes, and expansion of the clinical health service were implemented to improve treatment accessibility for dispersed population of at-risk people who do not typically access mainstream health services.

Effectiveness:

100 people have received HCV treatment through our Drop in Center, with 50 of these people receiving HCV peer support. 100 HCV peer educators have been trained with a total of 3120 of their drug using peers being reached in the community. Testing Initiatives involved 1396 people being tested for Blood Borne Viruses with subsequent 50 people undertaking HCV treatment. 30 peer workers and clinicians have been trained to deliver identify signs of possible acute and long term infection of Hepatitis C virus.

Conclusion and next steps:

Peer workers foster a high level of trust and engagement, providing an interface between people who inject drugs and health professionals. Task shifting, educating peers, and involving peers in HCV programs has improved engagement with people who inject drugs and increased the uptake of hepatitis C testing and treatment. Increasing peer involvement is integral to improving other aspects of our model of care

Disclosure of Interest Statement:

Nothing to disclose.
