

Outreach and engagement to achieve hepatitis C

micro-elimination in Cairns, Australia

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BACKGROUND

Cairns with a population of ~160,000, was one of the first locations to lead a hepatitis C micro-elimination response in Australia. Seven years since the introduction of direct acting antivirals (March 2016) the number of clients presenting to clinics for testing and treatment has dramatically declined. Engaging clients in the community via outreach models will be key to achieving hepatitis C elimination.

METHODS

The Cairns community outreach and engagement model includes nurse-led approach working closely with Aboriginal and Torres Strait Islander Health Workers to deliver rapid point-of-care (POC) RNA testing utilising cash incentives, and peer-support. We have delivered sessions across 10 services, including probation & parole, homeless shelters and mental health services.

RESULTS

From July 2022 to May 2023 366 clients completed POC RNA testing. Median age was 39 years (range 18-73), majority were male at 74% and 23% were experiencing housing instability. A large proportion of clients were Aboriginal and/or Torres Strait Islander, with 29% Aboriginal, 10% Torres Strait Islander and 16% both Aboriginal and Torres Strait Islander. The majority of participants had a risk factor for HCV such as a history of injecting drug use (46%) and a history of incarceration (47%).

The majority of participants (73%) were new clients to the outreach team, and just over half (52%) reported a history of HCV testing, of whom 37% had previously had a positive HCV diagnosis. Twelve people tested RNA positive (3%) and eight have commenced treatment (67%). Incentives were used to engage 98% of participants and peer workers were involved in recruiting 11% of participants. HCV positivity ranged from 0 - 12% across the outreach sites.

HCV positivity was highest in the over 50 years age group; 18-29 years (3.3%), 30-39 years (2.1%), 40-49 years (3.2%) and 50 to 64 years (4.9%), higher among men (3.7%) compared to women (2.1%), higher among non-Indigenous participants (4.5%) compared to than Aboriginal and Torres Strait Islander people (2.5%), and higher among those who had reported a previous HCV test (6%) compared to those who hadn't tested before (0%) or reported don't know (2.9%).

CONCLUSIONS

The micro-elimination program in Cairns is finding the remaining people who haven't yet engaged in HCV testing or treatment. We are learning more about community prevalence amongst key populations including people who inject drugs, people on probation and parole orders, people experiencing homelessness, people living in emergency accommodation, rural residents and people engaging with mental health and drug and alcohol services which is enabling us to tailor our outreach services to meet the needs of the community.

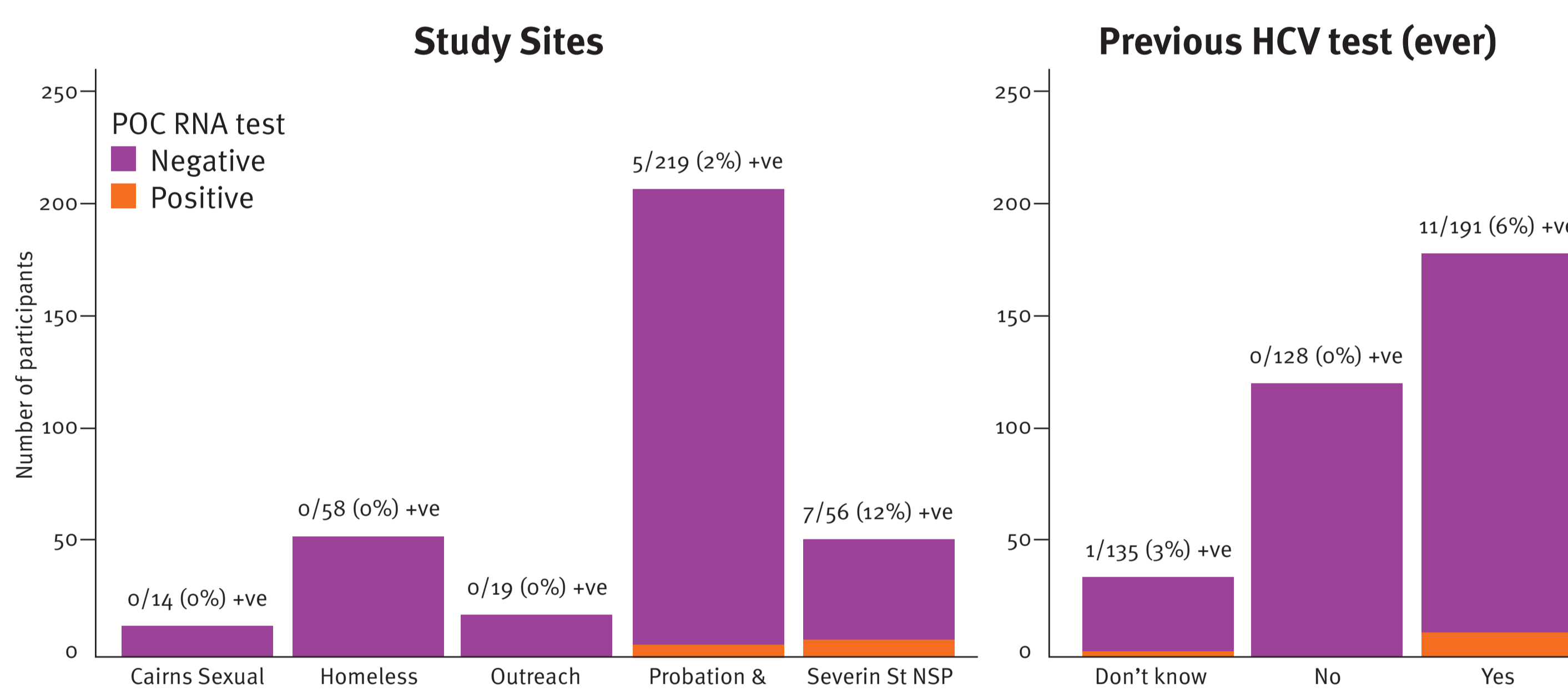
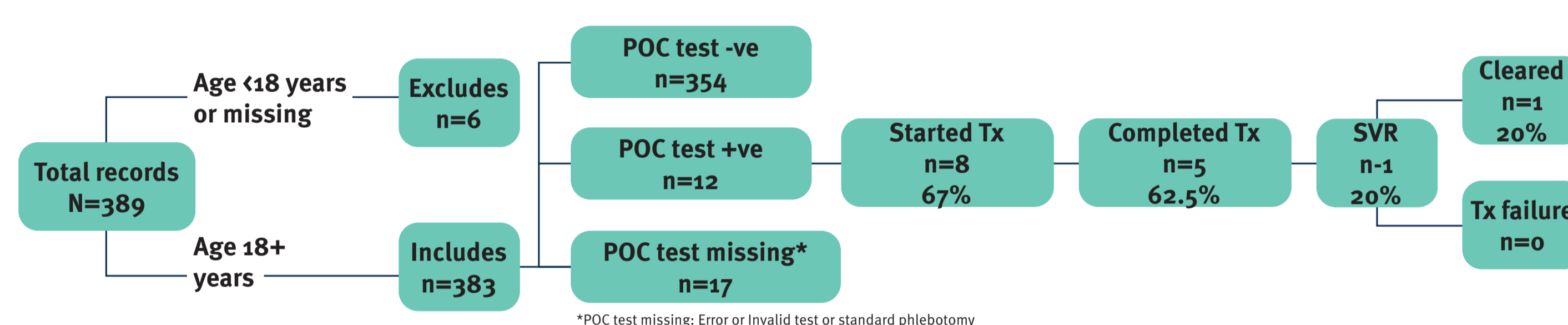
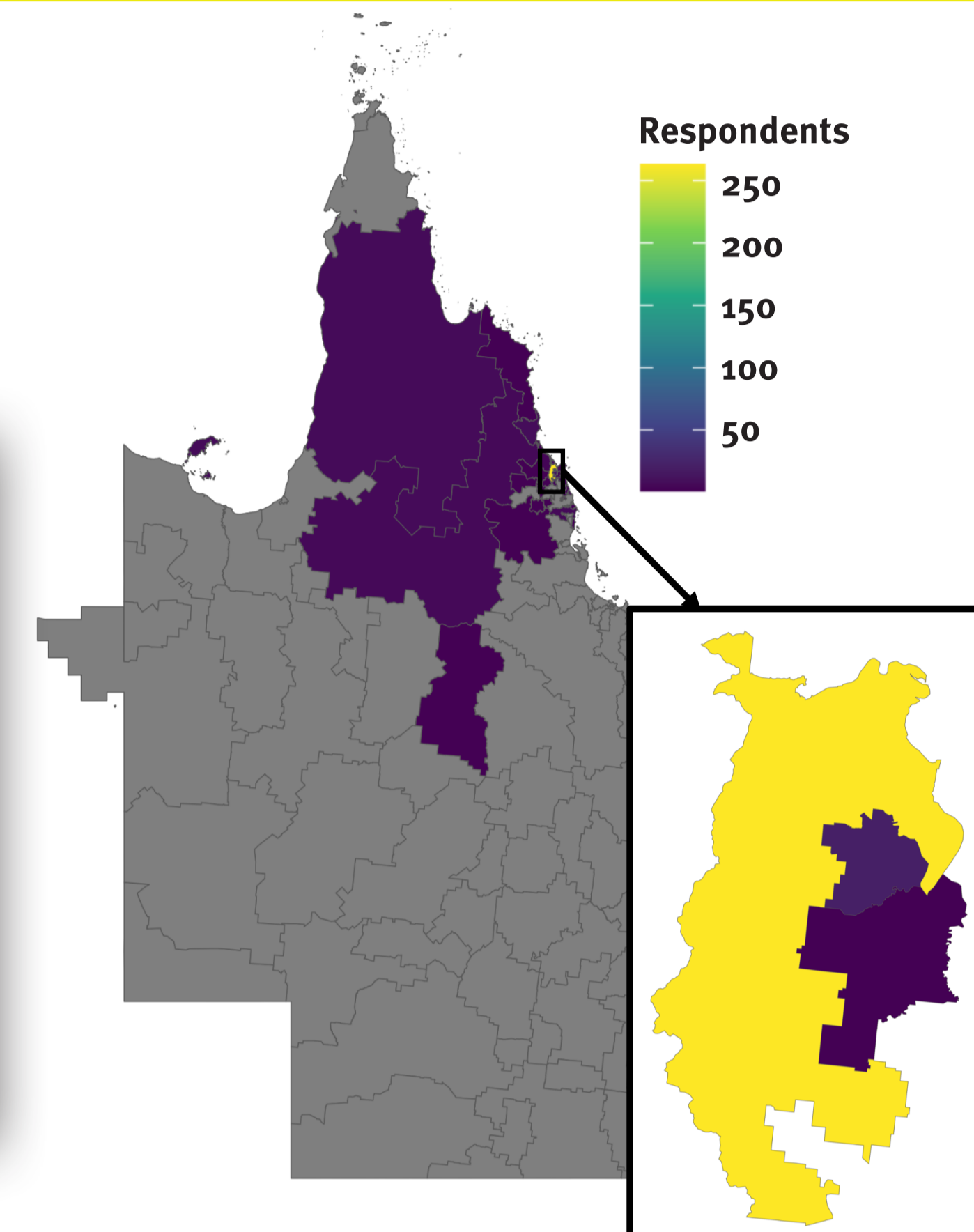


Table 1: Presentation of Point of Care (POC) data

Variable	Overall	Clients who tested Positive	Positivity
Total Clients who had POC	N=366	N = 12	3.3%
Age at interview (years)	39 (18-73)	43 (26-62)	
Gender	n=364		
Female	93 (26%)	2 (17%)	2.2%
Male	270 (74%)	10 (83%)	3.7%
Transgender	1 (0.3%)	0 (0%)	0%
Aboriginal and Torres Strait Islander status			
Don't know	9 (2.5%)	0 (0%)	0%
Not Indigenous	155 (42%)	7 (58%)	4.5%
Yes - Aboriginal	107 (29%)	4 (33%)	3.7%
Yes - both Aboriginal and Torres Strait Islander	57 (16%)	0 (0%)	0%
Yes - Torres Strait Islander	38 (10%)	1 (8.3%)	2.6%
Peer involved in recruitment	40 (11%)	4 (33%)	10%
HCV related risk factors			
History of injecting drug use	169 (46%)	9 (75%)	5.3%
History of incarceration	172 (47%)	7 (58%)	4.1%
Previous blood transfusion	4 (1.1%)	0 (0%)	0%
Opioid substitution therapy	8 (2.2%)	0 (0%)	0%
HCV ever tested before	n=354		
Don't know	35 (9.9%)	1 (8.3%)	2.9%
No	128 (36%)	0 (0%)	0%
Yes	191 (54%)	11 (92%)	6%
Has the participant ever been confirmed HCV positive?	n=146		
Don't know	27 (18%)	2 (18%)	7.4%
No	65 (45%)	2 (18%)	3.1%
Yes	54 (37%)	7 (64%)	13%
New client to Cairns Sexual Health Service	269 (73%)	8 (67%)	3.0%
Incentivised test	356 (98%)	12 (100%)	3.4%
Method for receiving POC RNA test result	n=365		
Did not receive	10 (2.7%)	1 (8.3%)	
Over the phone	299 (82%)	7 (58%)	
Returned to service at a later time or date to receive in person	38 (10%)	4 (33%)	
Stayed to receive in person	18 (4.9%)	0 (0%)	