

## IDENTIFYING AND UNDERSTANDING THE NEEDS FOR HEPATITIS C (HCV) EDUCATION TO ENHANCE HCV HEALTH LITERACY AND HCV CARE FOR PEOPLE IN AUSTRALIAN PRISONS

### Authors:

Sheehan Y<sup>1</sup>, Cochrane A<sup>1,2</sup>, Grebely J<sup>1</sup>, Tedla N<sup>3</sup>, Lloyd AR<sup>1</sup>, Lafferty L<sup>1,4</sup>

<sup>1</sup> The Kirby Institute, UNSW Sydney, <sup>2</sup>Justice Health and Forensic Mental Health Network, NSW Health, <sup>3</sup> School of Biomedical Sciences, UNSW Sydney, <sup>4</sup>Centre for Social Research in Health, UNSW Sydney

### Background:

Hepatitis C (HCV) is prevalent in Australian prisons and prison-based services are reasonably well-established. However, barriers remain to engagement in the HCV care cascade for people in prison. The PIVOT study evaluated a 'one-stop-shop' intervention (point-of-care HCV RNA testing, Fibrosan<sup>®</sup>, nurse-led clinical assessment, and fast-tracked direct-acting antiviral prescription) to enhance HCV testing and treatment at a reception prison in New South Wales, Australia. Utilising Squier et al's Health Literacy Skills Framework, this analysis sought to identify and understand the need for HCV education to improve HCV health literacy (knowledge; attitudes; capabilities) and enhance engagement with HCV care for people in prison.

### Methods:

Semi-structured interviews were conducted with twenty-four male PIVOT study participants. Purposive sampling ensured comparable representation of those with: 1) prior HCV testing history (standard pathology / no prior testing) and, 2) injecting drug use history (IDU; ever / never).

### Results:

Participants widely viewed HCV education as important in both improving awareness of disease, risks, and prevention, and enhancing engagement with HCV testing and treatment services. *Prior knowledge* (such as history of IDU, prior testing experience, community-based drug rehabilitation programs) highly influenced *Comprehension* and perceptions of existing HCV education. Whilst educational videos at prison induction contributed to *Health Literacy Skills*, *Comprehension* remained moderate to low among most participants. Participants recommended normalising conversations around HCV and utilising peer educators as potential modes for improving *Health Literacy Skills* and *Comprehension*; it was believed these strategies would likely reduce stigma and barriers for engagement with HCV services in prison.

### Conclusion:

HCV education was considered to have an important role in improving awareness of disease and prevention measures and reducing stigma in prisons. A more targeted, comprehensive, and multi-modal HCV education program for people in prison may help overcome barriers to enhanced HCV testing and treatment, by fostering stronger HCV health literacy among people in prison.

### Disclosure of Interest Statement:

The PIVOT study was supported by an investigator-initiated grant to the Kirby Institute UNSW Sydney by AbbVie. YS is a co-investigator on investigator-initiated research grants from Gilead and AbbVie. LL and AC have received speaker fees from AbbVie. JG is a consultant/advisor and has received research grants from AbbVie, Cepheid, Gilead Sciences, Hologic, Indivior, and Merck/MSD. ARL has received investigator-initiated research support from Gilead and AbbVie.