NEED FOR DECENTRALIZATION AND TASK-SHIFTING OF HEPATITIS C (HCV) SERVICES WITH A NON-JUDGEMENTAL APPROACH FOR PEOPLE WHO INJECT DRUGS: RESULTS FROM A GLOBAL VALUES AND PREFERENCES SURVEY

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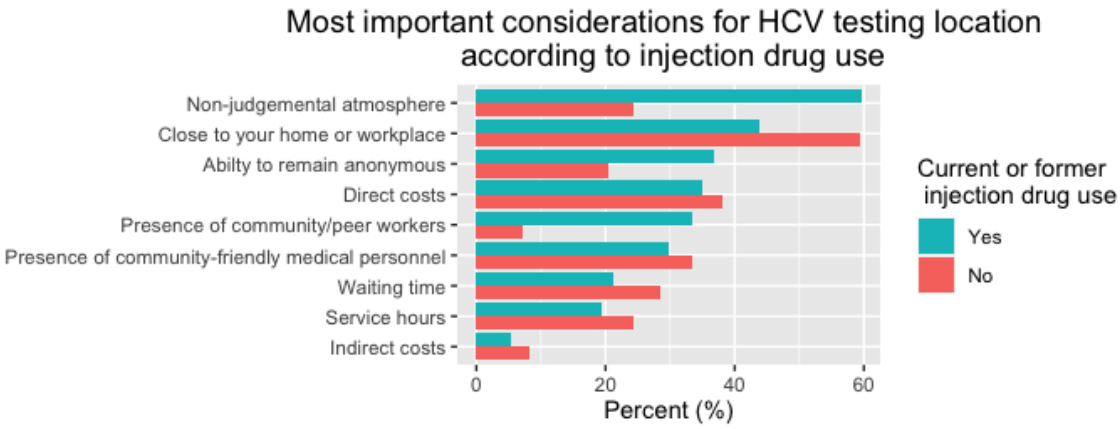
Background: The values and preferences of people who inject drugs are essential for developing and/or adapting HCV service delivery to meet their specific needs. The objective of this analysis is to identify specific needs and preferences among people who inject drugs.

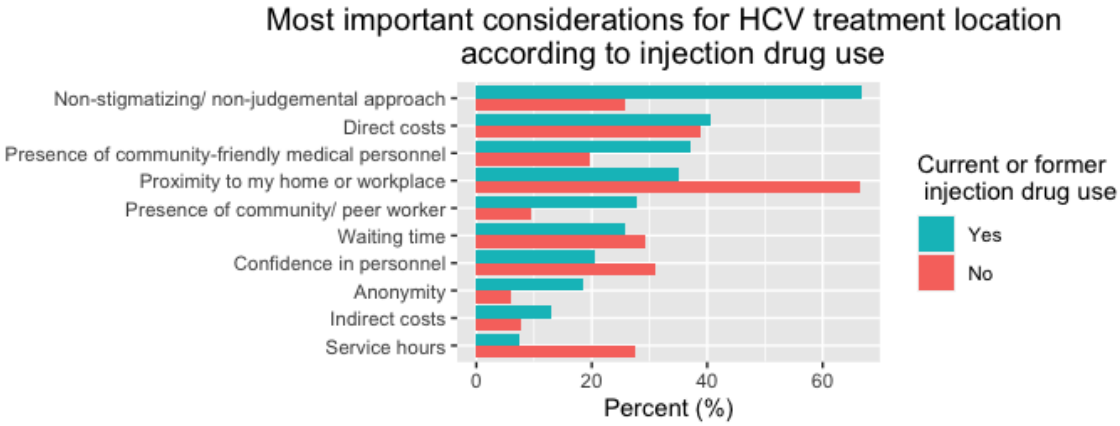
Methods: A multi-country, anonymous, self-administered online survey was conducted in 2021. The survey was developed by Coalition PLUS and the World Hepatitis Alliance in partnership with the WHO and distributed via civil society email networks, social media, and mailing lists. Information concerning preferences for simplifying HCV care, and test and treat locations, were collected among people living with or affected by HCV. Chi-2 tests were used to compare respondents who had a history of injecting drug use to other respondents.

Results: Among 202 respondents, 62 (30.7%) formerly or currently injected drugs. Compared to other respondents, respondents who formerly or current injected drugs were older (median [IQR]: 48 [36-57] vs. 39 [31-51] years, p=0.003), were more likely to have been tested for HCV (90.2% vs. 64.3%, p=0.001) and were more likely to prefer testing in a community-based center (CBC) (55.4% vs. 33.3%, p=0.005) or in a drug user support center (DUSC) (50.0 vs. 9.8%, p<0.001). Their most important considerations regarding testing locations (see figure) were the non-judgemental atmosphere (p<0.001), anonymity (p=0.018) and community worker (CW) presence (p<0.001). They would like to receive HCV treatment in a CBC (63.0% vs. 44.8%, p=0.028) or in a DUSC (46.3 vs. 9.5%, p<0.001). and their most considerations regarding treatment locations (see figure) were the non-stigmatizing/non-judgemental approach (p<0.001) and the presence of community-friendly medical personnel or CW (p=0.016 and p=0.002).

Conclusion: People who currently/formerly inject drugs showed specific needs concerning HCV services. Decentralization, task-shifting, and a non-judgemental approach are important elements to the development of adapted services to increase HCV care in this population.

Disclosure of Interest Statement:
All authors must declare any conflict of interest


Most important considerations for HCV testing location according to injection drug use
Non-judgemental atmosphere
Close to your home or workplace
Abilty to remain anonymous
Direct costs
Presence of community/peer workers
Presence of community-friendly medical personnel
Waiting time
Service hours
Indirect costs
0
20
40
60
Percent (%)
Current or former injection drug use
Yes
No


Most important considerations for HCV treatment location according to injection drug use
Non-stigmatizing/ non-judgemental approach
Direct costs
Presence of community-friendly medical personnel
Proximity to my home or workplace
Presence of community/ peer worker
Waiting time
Confidence in personnel
Anonymity
Indirect costs
Service hours
0
20
40
60
Percent (%)
Current or former injection drug use
Yes
No