

 **Acquiring hepatitis C in prison:**
a qualitative study of the HITS-p cohort

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Overview

- We know risk factors for HCV in prison
 - Injecting drug use
 - Tattooing
 - Violence
- Lack of harm reduction measures
 - Provision of sterile injecting equipment
 - ? access to OST
- This study examined accounts of inmates with documented HCV acquisition within prison

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Participants

- HITSp cohort within 30 NSW prisons
 - People with life time history of injecting drug use
 - HCV negative at enrolment
 - Survey and bloods every 3-6 months
- This sub-study
 - HITSp participants with documented HCV seroconversion
 - Continuously in prison

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Results

- 6 participants – 4 men, 2 women
- In behaviour survey of HCV risk:
 - 2 reported injecting drug use
 - 4 reported injecting drug use and tattoo or violence

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- How acquired hepatitis C?
 - Typically no change to practice/routine

“through shootin’ up. There’s not much else to say” (#18, male, 27 years)

“No, it was virtually the same as I do it any other time (#13, male, 22 years)

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- In behaviour survey of HCV risk:
 - 2 reported injecting drug use
 - 4 reported injecting drug use and tattoo or violence
- How acquired hepatitis C?
 - Typically no change to practice/routine
- One change in routine
 - Gifted a pre-loaded syringe as a result of loan of syringe

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“No, it was virtually the same as I do it any other time (#13, male, 22 years)

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Results

- Cleaning
 - Disinfectant available
 - Some did report cleaning
 - Barriers – time, fear of detection
 - Perception of futility of cleaning

Clean it with water then Fincol, then water again. ... Well it's not really safe. It's just cleaning it (#22, female, 23 years)

Well I've shared needles. Fincol-ed it. What it says to do, you know. Like three water, three Fincols, three water, and I still caught hep C, you know. (#23, female, 24 years)

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Results

- Unique perception of risk, approach to cleaning – only person to report sharing with someone with HCV

I took the chance, yeah ... I just thought I was, I don't know, I had a gene in me body that'd beat it, you know. I never thought I'd catch it. Doesn't matter how many, if I belted up bloody five units of blood, I wouldn't catch it. And now I got it. But I never, I never thought I'd get it. ... Who needs cleaning? Just get, let's get it over and done with, you know, 'cause we've got two minutes before the screws [corrections officers] walk through the gate, you know. Let's get this done quick. ... And I've got [hepatitis C] because of that stupid, bloody little ruling I made up, (#11, male, 27 years)

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Results

- Decisions about who to share equipment with
- Based on disclosure/assumptions of HCV status, trust
 - Perceptions of hygiene, don't attract too much attention
 - Irregular injector – options limited

a lot of people specifically lie to your face just to have a shot. You know what I mean? [Interviewer: About what, what do they lie to you about?] That they don't have anything. ... The two people I shared with swore to me on their kids that they didn't have hep C. Well why the fuck do I have it? So that's the way I look at it, you know. And that's how low they will stoop, to swear on their own kids, to say that they don't have [hepatitis C]. Because, if they told me, I was happy just to smoke it. (#23, female, 24 years)

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Discussion

No access to sterile equipment

- Difficult choices about risk and risk reduction (cleaning)
- Commodification of equipment

Social organisation of injecting networks

- Reliance on disclosure/assumptions of status
- Fear of exclusion if disclose positive
- Impact of new treatments?

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Thank you

- Participants
- Justice Health and Forensic Mental Health Network

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