EXPERIENCES OF DIAGNOSIS, CARE AND TREATMENT AMONG ABORIGINAL PEOPLE LIVING WITH HEPATITIS C

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Introduction: Aboriginal Australians are disproportionately impacted by hepatitis C (HCV) yet there is little research specifically focused specifically on this group. There are numerous barriers to HCV care and treatment for Aboriginal Australians which often starts with poor experiences around HCV diagnosis. This study aimed to describe the patterns of HCV care and treatment for Aboriginal Australians living with HCV, with specific emphasis on the impact of being informed of the diagnosis in a culturally sensitive manner.

Methods: 203 Aboriginal people living with HCV were recruited to complete a survey assessing experiences of HCV testing and care, HCV knowledge, lifestyle changes after diagnosis, perceived stigma and discrimination.

Results: Ninety six percent of the sample identified as Aboriginal, 58% were male, the mean age was 28 years and the greatest proportion of participants (40%) were diagnosed with HCV over 10 years ago. Findings indicate that pre and post-test counselling does not occur regularly enough and on-going engagement in specialist care is low and difficult to achieve, but this sample do report engaging in a range of positive lifestyle changes after diagnosis which may improve health outcomes. Furthermore correlation analysis revealed that satisfaction with the cultural appropriateness of the diagnosis was associated with being offered pre and post-test counselling, satisfaction with HCV care, decreased feelings of HCV-related stigma, lower scores on the medical mistrust scale, and greater intentions to access HCV treatment.

Conclusion: These findings confirm the importance of providing a HCV diagnosis in a culturally appropriate way for Aboriginal people. Satisfaction with HCV diagnosis appears essential in establishing patterns of greater engagement with HCV care and treatment for this group and hence may play a significant role in ensuring positive health outcomes for Aboriginal people living with HCV.

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