

Hepatitis C

Briefing for homelessness services

Let's end homelessness together

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Introduction

This briefing provides information about the hepatitis C virus (also known as hep C or HCV) and how staff working in homelessness services should support people to access screening and treatment. It also includes information about what to do if you think you have been exposed to hepatitis C in the course of your work.

About Hepatitis C

Hep C is a blood borne virus which lives, and replicates itself, in the liver. Most people won't know they are infected as there are few symptoms. If left untreated however, the virus can begin to damage and scar the liver leading to liver cirrhosis. This affects its ability to function properly and can lead to further health problems, some of which are potentially fatal.

Hep C is now a curable disease and Public Health England (PHE) aim to eliminate it, in line with the World Health Organisation's international ambition, by 2030.¹ Screening is important to support people to access treatment and to reduce the risk of the virus progressing too far.

This video, created by the London Joint Working Group on hep C and substance misuse, captures peoples experience of the impact of the virus and available treatment: https://youtu.be/zU_nDCwj7RI

How is Hep C transmitted?

Hep C is a blood borne virus which means it is only transmitted through infected blood finding its way into the blood stream of another person. Those most at risk of contracting hep C are those who inject or have injected drugs or shared drug paraphernalia (this includes those who snort drugs), those who had tattoos or piercings in unclean environments or where the equipment is unclean, those who had blood transfusions or received blood products before 1992. Hep C is not a sexually transmitted infection, but it can be transmitted through sexual intercourse if blood from one person enters the bloodstream of another.

Hep C and drug use

People are at increased risk of contracting or transmitting hep C if they have, or are, injecting drugs or inhaling them nasally with a tube. In 2017, PHE² reported that around 160,000 people across England were chronically infected with hep C and that most of these came from disadvantaged backgrounds. 50% of injecting drug users showed evidence of HCV infection. In a blog that year, PHE said 'injecting drug use continues to be the biggest risk factor for hep C infection'.³

Needles, syringes, used filters, shared water and spoons used to 'cook' the drugs, can all carry infected blood. Research shows that the virus can live on a hard surface up to 5 days, and longer in a used syringe.⁴ Many people know that it is not safe to share needles, but may not know that sharing other equipment is risky too.

In 2019, PHE estimated that the number of people affected by hep C in England had reduced to 113,000.⁵ However, those still living with the virus are mostly in groups that are at high risk of infection, such as injecting

¹ See reports on www.gov.uk/government/publications/hepatitis-c-in-the-uk

² <http://hcvaction.org.uk/resource/hepatitis-c-england-2017-report>

³ <https://publichealthmatters.blog.gov.uk/2017/07/28/the-importance-of-hepatitis-c-treatment-for-people-who-inject-drugs/>

⁴ www.ncbi.nlm.nih.gov/pubmed/22013220

⁵ <https://publichealthmatters.blog.gov.uk/2019/07/28/tackling-inequalities-in-hepatitis-c-testing-and-treatment/>

drug users, and who often need additional support to help them access treatment. Steps are being taken to raise awareness and take steps to address the inequalities of access to health services.

Migrants

Migrants from some countries may be at increased risk of carrying the hep C virus because it is more prevalent in their countries, often due to health care practices. Regions with the highest prevalence include North Africa and Central and East Asia. Research from the UK shows that there is a higher rate of hep C in individuals from South Asia; including Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Sri Lanka.⁶ Additionally, migrants from Eastern Europe have an increased risk

Prevention, screening and treatment

All organisations working with high risk groups have a key role to play in ensuring people are screened for hep C and are able to access treatment if this is required. This means working with other agencies to ensure there is fair access to health services for your clients, increasing pathways and fostering partnership working across services.

Prevention

There is no vaccination against hep C but there are several steps that can be taken to reduce the risk of transmission:

- Raise awareness of hep C and the high risk of transmission for people who inject drugs
- Provide information about how to get screened and make links with your local clinics
- Encourage people to access clean works and that all paraphernalia can carry the virus
- Ensure drug users have access to sharps boxes and that these are removed regularly

Screening

Screening for hep C is essential for anyone who may be carrying the virus; if someone does not know they have hep C they cannot get treatment. Screening is simple and minimally invasive; in some cases, this can be done through a finger prick testing kit but it's usually a blood test. Testing is available from GPs, sexual health and GUM clinics and in drug treatment services.

Treatment

In the past, hep C treatment was invasive and caused terrible side effects. It has greatly improved now and is provided through taking one tablet each day. There are minimal side effects but is highly effective at curing people.

People who have successfully been through treatment share their experiences in this video:

<https://youtu.be/DHcN5p7iXVM>

It can be difficult for individuals in high-risk groups to adhere to the treatment pathway due to their complex lifestyles. Consider how best you can support individuals with their treatment through your support work and by building partnerships with local health and advocacy services that are designed to make treatment more accessible.

⁶ www.gov.uk/government/publications/hepatitis-c-in-the-uk

National peer advocacy

The Hepatitis C Trust are working closely with homelessness services to make contact and engage with individuals who may have hep C. They try to reduce stigma by fostering an open dialogue about the disease and support staff and individuals to feel more comfortable to talk about it. They have been delivering peer-to-peer support nationally since 2010 and can offer staff training, poster campaigns, workshops and presentations. Not only that, their vans visit hostels to screen residents and HCT Peers support people through the care pathway to access treatment.

More information can be found on their website: www.hepctrust.org.uk/services/community-services-team

There's a great video about them here: www.hcvaction.org.uk/resource/hepatitis-c-trust-peer-peer-programme

The Hepatitis C Trust also offers a free confidential helpline available Monday to Friday 10.30am - 4.30pm, and can also be contacted by email: helpline@hepctrust.org.uk. You can find out who your local peer lead is via this route. For information about training contact admin@hepctrust.org.uk.

Occupational exposure

As the virus is transmitted through being exposed to infected blood, the risk of contamination is fairly low in day to day work. However, this risk increases if staff may be directly exposed accidentally through needle stick injuries or from other sharp objects which may be contaminated. Extra caution should also be taken if staff and clients have open wounds, skin abrasions or where skin is damaged.

As an employee you are legally required to take care of your own health and safety, and that of others affected by your actions. Your employers have a legal duty to protect staff at work and should have clear policies and procedures to assess and prevent the risk of transmission, and how to respond if an accident does happen. Ensure you're aware of your organisation's policy.

The Health and Safety Executive have created this useful guide on how to mitigate against, and manage occupational exposure to, blood borne viruses at work: www.hse.gov.uk/pubns/indg342.pdf

Taking action on Hep C in your service

People in homelessness services are among the high risk groups for hep C. Some of the people you work with will have been tested in the past and been given a diagnosis of hep C, but avoided treatment due to stigma and the unpleasant side effects that used to be a feature of treatment.

There is a real opportunity for service providers to improve the health of the people they work with, and to help eliminate hep C for good:

- ✓ Train your staff
- ✓ Raise awareness among the people you support
- ✓ Invite the Hepatitis C Trust to offer peer advocacy and make use of their expertise
- ✓ Create accessible opportunities for testing
- ✓ Support people through treatment
- ✓ Challenge the stigma

Further information

Hepatitis C Trust website

www.hepctrust.org.uk/

Hepatitis C Action

www.hcvaction.org.uk/

Forward Leeds video

www.youtube.com/watch?v=Bca92_v1-60

London Joint Working Group on hep C and substance misuse

<http://ljwg.org.uk/>

NHS pages on hep C

www.nhs.uk/conditions/hepatitis-c/

NHS guidance on hep C

www.nhs.uk/Livewell/hepatitisc/Documents/Information-for-professionals-19.05.061for-web-15600.pdf

PHE free e-learning course

<https://elearning.rcgp.org.uk/course/info.php?id=175&popup=0>

PHE information for people infected with hep C

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/755411/Hepatitis_C_information_for_patients.pdf

Turning Point hep C peer mentor video

www.youtube.com/watch?v=W6MIDJ3ZCks



What we do

Homeless Link is the national membership charity for frontline homelessness services. We work to improve services through research, guidance and learning, and campaign for policy change that will ensure everyone has a place to call home and the support they need to keep it.

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