

## IDUHA Hep C Peer Navigation Program (July 2014 - June 2015)

### BRIEF REPORT

#### Program Description

In 2014, New York City Council allocated funding to 16 Injection Drug User Health Alliance (IDUHA) syringe exchange and harm reduction programs, which served to establish the IDUHA Hep C Peer Navigation Program.

The funding supported one to two Peer Navigators at each of the fourteen direct services IDUHA sites, who provided Hep C prevention services, defined health counseling messages, as well as accompaniment to Hep C antibody and RNA testing and Hep C medical care.

In addition, Harm Reduction Coalition conducted a skills and knowledge assessment and provided training and technical assistance to support the program and Peers.

Praxis housing collaborated with the Peer programs on Hep C education, screening and linkage to care events for their formerly homeless residents. Three educational materials were distributed to all residents: [Hep C: The Facts](#), [Hep C Risk Assessment Checklist](#), and [Liver Health Bulletin](#).

#### **Sites Providing Direct Peer Navigation Services:**

1. After Hours Project
2. AIDS Center for Queens County
3. Boom! Health
4. Community Health Action of Staten Island
5. Family Services Network of New York, Inc.
6. Harlem United FROSTD
7. Housing Works Crosby St
8. Lower East Side Harm Reduction Center
9. New York Harm Reduction Educators
10. Positive Health Project
11. Safe Horizon Streetwork LES Project
12. St. Ann's Corner of Harm Reduction
13. VOCAL-NY
14. Washington Heights CORNER Project

#### **Training and Technical Assistance:**

15. Harm Reduction Coalition

#### **Education, Screening & Linkage to Care Events:**

16. Praxis Housing Initiatives Inc.

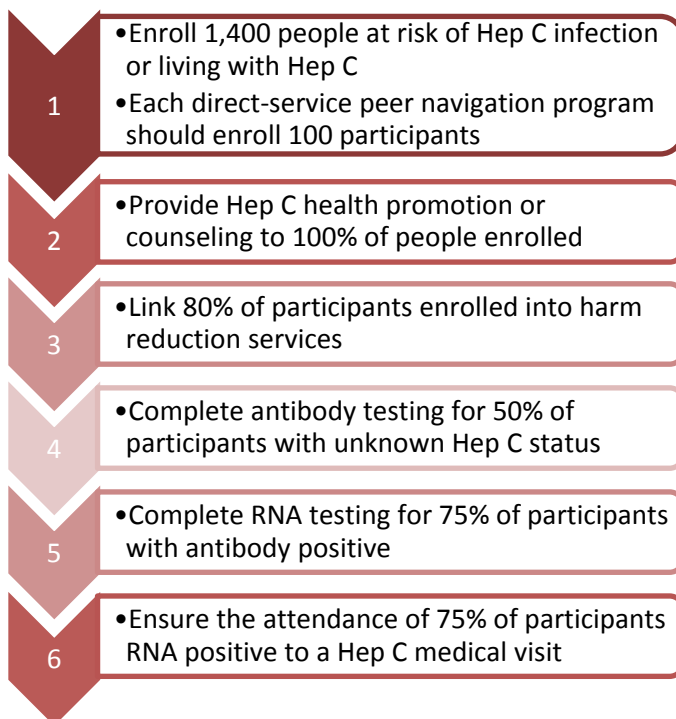
#### Program Management

The program was administered by a Program Manager, Program Coordinator and Data Specialist from the NYC Health Department (DOHMH), who provided in-kind services. DOHMH created paper forms and a Microsoft Access database to guide and report on program activity. Programs submitted monthly data reports including program status, enrollment progress and de-identified participant characteristics and activities.

DOHMH conducted quality assurance activities in the form of regular data report analysis, phone and email communications with each contracted program, and site visits with programs facing program implementation challenges.

Monthly program management meetings and trainings for Peers and Peer Supervisors were facilitated by DOHMH and Harm Reduction Coalition, which included a program data review, program implementation discussion and peer navigation training.

#### Program Objectives

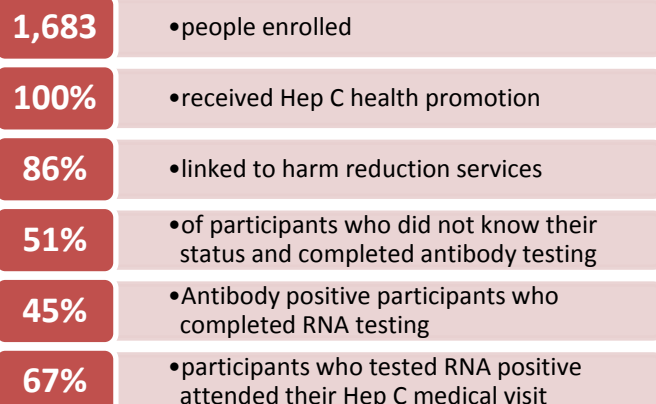


Participant Characteristics	N	Column%
<b>Year of Birth</b>		
1945-1965	650	38.62
1966-1985	820	48.72
≥1986	204	12.12
<b>Gender</b>		
Female	535	31.79
Male	1,088	64.65
Transgender	58	3.45
<b>Race/Ethnicity</b>		
Asian	2	0.12
Black Non-Hispanic	480	28.52
White Non-Hispanic	422	25.07
Hispanic	722	42.90
Hispanic Black	32	1.90
Native American	1	0.06
<b>Self-Reported Hep C Status at intake</b>		
Positive (+)	555	32.98
Negative (-)	372	22.10
Unknown (?)	756	44.92

Services Delivered	N	Column%
<b>Enrolled</b>	<b>1,683</b>	<b>n/a</b>
<b>Health Counseling</b>	1,683	100
<b>Linkage to Harm Reduction</b>		
Complete	1454	86.4
Refused	46	2.7
<b>Testing (during program)</b>		
<b>Antibody Test Complete<sup>1</sup></b>	595	--
<b>Antibody Test Refused</b>	186	--
<b>Antibody Test Result amongst those who completed Antibody test</b>		
Positive (+)	213	--
Negative (-)	344	--
<b>RNA Test Complete<sup>2</sup></b>	107	--
<b>RNA Test Refused</b>	80	--
<b>RNA Test Result amongst those who completed RNA test</b>		
Positive (+)	77	--
Negative (-)	7	--
<b>Referrals to Special Programs Total</b>	266	--
Referral to Check Hep C	32	--
Referral to Project INSPIRE	32	--
Referral to NYS DOH HepCap	21	--
Referral to Robinhood Hep Connect	2	--
Referral to Other	179	--
<b>Hep C Medical Visit Complete Total</b>	84	--
Hep C Medical Visit Complete (amongst those tested RNA+ during program)	52	--

## Program Outcomes

The IDUHA Hep C Peer Navigation Program was successful in reaching and providing important Hep C prevention services to people at risk for infection or living with Hep C, primarily those with a history of drug use and hormone injection



## Recommendations

In order to improve service delivery outcomes, peers and program managers have identified the following recommendations:

- Identify a funding source that will allow for a continuous program rather than a time limited grant funded cycle.
- Provide participant incentives to increase follow-up for navigation to Hep C RNA testing and medical care.
- Improve collaboration between Peer Program and existing Hep C screening, patient navigation and care coordination programs.
- Improve documentation and data management tools for ease-of-use for this group of peer service providers to minimize underreporting of service outcomes.

For more information visit:  
[www.HepFree.NYC/IDUHA](http://www.HepFree.NYC/IDUHA)

<sup>1</sup> Number of individuals who did not know their status and completed Antibody testing (n= 391)

<sup>2</sup> Number of individuals who tested antibody positive in program and completed RNA testing (n=96)