



Section 10: Challenges of Access to HCV services for PWID in Kenya

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Objectives of the session

By the end of the session the participants should be able to:

1. Identify existing gaps for access to HCV services for PWID in Kenya and proposed strategy to address them
2. Reflect on how everyone can participate in HCV advocacy

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Brainstorming (10 min)

- » In your opinion, what are the challenges for access hepatitis C services in Kenya, generally and specifically for PWID?

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Challenges

Poor awareness, partnership, resources caused by:

- » Lack of immediate symptoms,
- » Slow progression of the disease,
- » Low political will to tackle the epidemic,
- » Stigmatization of people who use drugs,
- » Lack of support for people living with hepatitis C,
- » Reliance on repressive drug control responses that prevent people who use drugs from accessing care and support.

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Challenges cont...

Limited access to treatment of Hepatitis C in Kenya

- » Price of Hepatitis C treatment is high
- » Supportive investigative tests for treatment HCV costly
- » National treatment guidelines do not include DAAs
- » DAAs are not registered in Kenya

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Challenges cont...

Lack of national policies targeting hepatitis C

- » No national strategy to tackle hepatitis C
- » Insufficient data for policy and action
- » Lack of political will and leadership
- » No public budget allocated to hepatitis C services

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Challenges cont...

Prevention for transmission coverage still poor

- » No HCV prevention campaigns
- » Sharing of injecting materials among PWIDs in areas not covered by NSP
- » Low OST coverage (4 counties only- Nairobi, Kilifi, Mombasa and Kisumu ; limited induction)

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HOW CAN WE ADDRESS THOSE CHALLENGES?



Advocacy strategic directions

1. Increase awareness of HepC in Nairobi county
2. Increase access to HCV services
3. Advocate for policy reforms to address access to screening, care and treatment of HCV

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Group work (20 min)

- » List advocacy activities that could be conducted under the strategic direction identified in your flipchart
- » List the targets and allies for each activity and their role
- » Highlight your role in the activities mentioned above

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Strategic direction 1: Create awareness

Target audience : PWIDs, CSOs working with PWID, Policy makers: NASCOP, NACC, Health CS, Health committee, Gastro society of Kenya, Nairobi County Health management team, PPB; Health care workers, General community, Police

Activities:

- » Disseminate MdM local and international tools developed for hepatitis C advocacy (field expertise documents, policy and media work) through:
 - Trainings, Meetings (one on one or group), IEC materials distribution
- » Media campaigns (press release, newspaper articles, media interviews), Social media campaigns eg #tags
- » Walks
- » Sharing Hep C human interest stories
- » Identification and support hepatitis activist



Strategic direction 2: Increase access to HCV services

Activities

- » Mapping of target HCV stakeholders (GASK, etc.)
- » Documenting and promoting MSF B - MdM Kenya HCV treatment pilot project within MdM DIC
- » Lobby for provision of hepatitis commodities within the national program (target : GASC, NCC, CSOs, NASCOP)
- » Lobby for new generation treatment (generic) registration in Kenya (target : Pharmacy and Poisons Board (PPB))
- » Document process of integration of new drug in the National health insurance scheme and document barriers faced by PWID in joining the scheme
- » Advocate for the creation of National HCV Technical Working Group



Strategic direction 3: Advocate for policy reforms to address access to screening, care and treatment of HCV

Activities

- » Continuous assessment of the Political Environment for Hepatitis Advocacy
- » Drafting of a position paper on free access to HCV services to be presented to policy makers
- » Lobby for update HCV guidelines (target : GASK; allies : CSOs, KENPUD, MSF, etc.)
- » Conducting media campaigns, walks and/or petition could be organized to support policy change.
- » Lobby :
 - For a national strategic plan targeting hepatitis C (target : GASK, NCC ; allies : NASCOP, NACC), MSF, CSOs, KENPUD
 - Allocation of public budget for hepatitis C services (target : PHC, NCC ; ally : GASK, NASCOP, NACC)

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ADVOCACY TARGETS AND ALLIES, WHAT ARE WE TALKING ABOUT?

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