



peer based  
harm reduction wa

# Reaching Out: Spreading the Word

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## PBHRWA

Needle and Syringe  
Exchange Program

Outreach Services

Health Clinic

# Background

Peer Based Harm WA is the only peer community-based not for profit Organisation that provides peer-based support, information and education, advocacy and harm reduction services and health services for people who use drugs

>20 years in Western Australia

No medical doctors

Needle syringe exchange program with over 6 million pieces of equipment through 19,000 occasions of service

Outreach services – home delivers NSEP, outreach youth, Overdose Prevention and Management Program, Peer Administered Naloxone Project, Hep C Peer Harm Reduction Education Project

# The health clinic

Free health service

BBV/STI testing and treatments

Hepatitis C treatments

Women's Sexual Health

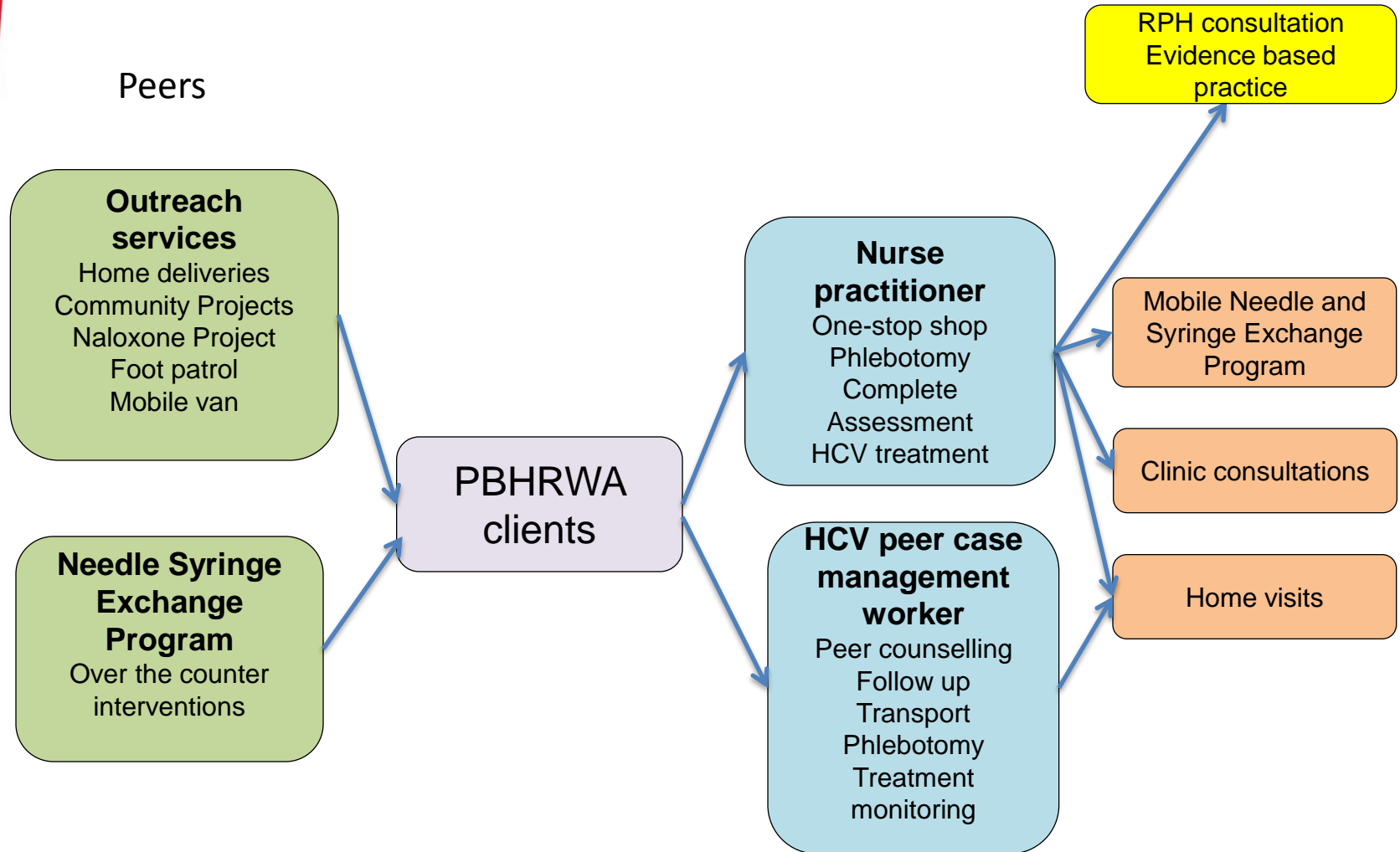
Treatment for generalized infections

Vaccinations

Prescribing for PrEP

Vein and Wound care

# Our Model of Care



# Why do we do outreach

Responding to the needs of a disenfranchised group and their networks

Reduce the burden of appointments  
Improve SVR attendance

Recognised community need  
To provide a positive health experience

Spread the word and promote BBV testing and treatments in an unconventional setting

# How do we do it in Perth?

Peer education program

Recruitment drives

Home deliveries for NSEP

Postal service

Community Projects Naloxone Project

Foot patrol

*Health clinic outreach – fortnightly home visits*

# How do we do it in Bunbury?

Monthly Mobile NSEP – conduct a clinic  
in the van – Margaret River, Busselton,  
Manjimup, Donnybrook

Recruitment drives

Home deliveries for NSEP

Postal service

Foot patrol

Bunbury health clinic fortnightly

Home visits anywhere



# How do we connect with our audience?

## **Patient**

Peer workers at the NSEPs

Different outreach and in house programs

Mobile NSEP

Hep C case management workers

Recruitment drives

## **Other Services**

Other health services and organisations

Regional NSPs

GP practices

# Injecting sub-networks

- HCV treated
- HCV Ab+ve, RNA -ve
- HCV Ab -ve
- HCV RNA+ve, HBsAg +ve
- HCV RNA+ve awaiting treatment
- HCV awaiting testing
- HBsAg positive, RNA -ve

Perth Outreach



SW WA outreach



# Barriers

## Patient

Non-return of patients following testing despite numerous follow up attempts

Venous access

Burden of follow up for the patient

Ever changing contact details

Shift in client priorities

*Confusion around treatment – eligibility, types of treatment, side effects etc.*

# Barriers

## Organisational

Other clinical commitments

Location of fixed site

Limited resources

Lack of collaborative practice with other services

*Confusion around treatment – eligibility, types of treatment, side effects etc.*

# Supporting the hep C community

- Treated 67 patients
- No treatment failures
- 2 reinfections
- Free service
- Accessing patients who otherwise would not have been treated

# Supporting the hep C community

- Patient's feel safe
- Positive health engagement
- More likely to come back for any health problems
- Reduce internalised stigma
- Economic alternative to other health models
- Incorporates harm reduction into health care
- Flexible, client centred approach

# What Makes our Model Work?

Collaboration of the peer workers and other workers in the NSEP, Outreach and other programs at PBHRWA

Support provided by the HCV case management workers in Perth and Bunbury

Flexible approach

Additional support and transport

More than one contact – NP or HCV case management worker

Seeing people in their space

Service is known

Blend of a different skill set

‘Medical nous and Street nous’ – builds trust and credibility

Clients work with us and are appreciative and respectful



## The Future

More outreach

Appropriate mobile facility in Perth and Bunbury

More resources





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Thank you