

## **Abstract**

**Background:** Half of the people with hepatitis C virus infection in the Czech Republic are injecting drug users. Low-threshold harm reduction-based treatment programs are an important pillar in the prevention and elimination of hepatitis C virus (HCV); and for the continuity of care, it is essential to actively search for people with the infection (high rate of testing) and to follow up with further diagnosis and treatment. Identifying and responding to client barriers is necessary to maintain the continuum of care.

**Objectives:** The aim of the bachelor thesis was to describe the continuum of care in case of hepatitis C virus in clients of an outpatient and outreach programme for substance abusers in a low-threshold centre in Jihlava, from anti-HCV antibody screening to treatment entry and completion, and to describe the factors that influence the continuum of care.

**Methods:** In June and July 2022, a quantitative analysis of existing data was conducted among clients of a low-threshold facility for drug users in Jihlava. For the monitored period from 2017 to 2021, 243 clients of the outpatient program and 171 clients of the outreach program were included in the research. The obtained data were analysed in Microsoft Excel using descriptive statistics.

**Results:** The research shows that 81 (33 %) clients of the outpatient program and 112 (65 %) clients of the outreach program had been tested. A total of 34 clients were identified with a reactive result of the VHC orientation test (56% of outpatient clients and 44 % of outreach program clients). Then 18 (53 %) reactive clients underwent follow-up testing at a specialized clinic, 72 % of reactive outpatient clients and 28 % of outreach clients. Chronic hepatitis C was diagnosed in 16 cases, 13 clients entered and completed the treatment, whereas 38 % completed treatment in prison. Identified factors that were found to affect continuity of care were related to the lack of motivation, additional client responsibilities, return to prison, and fear of stigma.

**Conclusion and recommendations:** The research paper offers an overview of the care provided in the area of hepatitis C virus to clients of low-threshold programmes. The results point to identified shortcomings. Higher testing rate in the field but better continuity of care in the centre (KC). The findings may help to bring about changes in set-up and collaboration of stakeholders and institutions that are involved in the continuum of care.

**Keywords:** hepatitis C virus, low-threshold programs, drug users, substance users, continuum of care, barriers to care