

Filling the void – taking action on public awareness and hepatitis C.

There is growing concern across the hepatitis C sector that the investment made in Australia's response to the hepatitis C epidemic is increasingly hampered by a combination of hostility and indifference in the general community. Both are well documented in numerous high-level inquiries and government reports...

With more than 1,000 new infections occurring every month, public awareness must be strengthened in order to capitalise on the investment already made in our response to the epidemic – both to prevent new infections and to advance serious quality of life issues experienced by a quarter of a million Australians already affected by chronic hepatitis C infection.

With a constituency of more than 200,000 people affected by hepatitis C, and an estimated 16,000 new infections each year,¹ Australia's relatively small hepatitis C workforce faces an unendingly labour-intensive, and increasingly untenable task in preventing the transmission of hepatitis C and supporting those already affected.

Without the support of broader awareness raising initiatives our response to hepatitis C is at risk of stalling, or failure.

The cost of not acting now...

Estimates of the cost of the hepatitis C epidemic to the healthcare system are substantial. To some extent these costs have been deferred against current expenditure by low treatment uptake rates among people with the virus. Over time, however, with large numbers of people experiencing progressive liver disease, the burden on health services (particularly gastroenterology services) will be a heavy one.

It is estimated that every 1,000 new hepatitis C infections will cost the healthcare system \$46 million over the ensuing 50 years.² With up to 16,000 new infections occurring annually, we must take action now to head off massive healthcare costs in future years.

Public awareness speaks for itself...

It is not without reason that governments invest in public awareness and social marketing initiatives. Whether designed as agenda-setting measures, or to alert the public about serious health risks, campaigns are an effective means to affect changes in awareness, social norms and risk-taking behaviour.

To date, only one Australian jurisdiction has undertaken a public mass media awareness campaign in relation to hepatitis C. With a relatively small outlay of \$800,000, the *'Hepatitis C, Understanding is the Answer'* campaign (NSW Health, 2000) raised awareness across NSW of transmission risks and contributed to heightened public debate and discussion about related issues such as discrimination and stigma against people with hepatitis C³. A direct result of recommendations arising out of the 1998 Legislative Council Inquiry into Hepatitis C in NSW,⁴ the campaign was a tangible commitment to dealing with the epidemic in the public arena.

New impetus for an Australia-wide campaign...

In its recently released Senate Inquiry Report into Hepatitis C and the blood supply in Australia, the Community Affairs References Committee recommended that:

1 Law MG, Dore GJ, Bath N, Thompson S, Crofts N, Dolan K, Giles W, Gow P, Kaldor J, Loveday S, Powell E, Spencer J, Wodak A, 'Modelling hepatitis C virus incidence, prevalence and long-term sequelae in Australia, 2001'. *Int. J Epidemiol* 2003;32:717-724

2 Shiell A (1998) *Economic Analysis for Hepatitis C: A Review of Australia's Response* Dept. of Public Health and Community Medicine, University of Sydney

3 Hepatitis C Public Awareness Campaign Evaluation Report, NSW Health, 2000

4 Hepatitis C: The Neglected Epidemic, Standing Committee on Social Issues, NSW Legislative Council, Nov. 1998



“the Commonwealth fund a national hepatitis C awareness campaign to increase the public’s knowledge of hepatitis C and that such a campaign emphasise all the means by which the infection may be acquired and the need for early testing and treatment.”⁵

The Australian Hepatitis Council fully supports this recommendation, particularly as a public awareness campaign is likely to reach high-risk individuals, as well as those in need of treatment and support, in ways that current prevention and education programs cannot.

In its report, the Committee notes that the 2002 Australian Government review of the National Hepatitis C Strategy, *The Road not Taken*, also calls for a national hepatitis C awareness campaign. Both reports state that such a campaign would alert those at risk of contracting hepatitis C, as well as those who may have been at risk in the past (including recipients of blood products prior to 1990), to the benefits of testing and available treatment and support services.⁶

In the case of NSW, a state-based precedent has already been set for such an initiative at the national level, one which proved that a mix of above and below-the-line public relations activities can be both cost effective, and socially worthwhile.

This campaign demonstrates that sensitive issues such as drug use and needle sharing can be dealt with in mass media channels without backlash or voter disquiet against the government of the day.

Note: the abovementioned Senate Committee report states that funding for a national community awareness campaign should come from current Australian Government Hepatitis C Education and Prevention Initiatives expenditure. The Australian Hepatitis Council does not support such a reallocation. Funding for such a campaign must be made available as supplementary funding to current initiatives.

What would a campaign achieve that current programs can’t?

The following points outline how and why an awareness campaign can achieve important public health outcomes which current activities cannot:

- The high hepatitis C incidence rate across the population suggests that the reach of existing education and prevention programs has not been sufficiently effective. A campaign targeting the general population would

substantially enhance the effectiveness of existing education and prevention programs

- Hepatitis C may pose a greater risk to the general community than is currently realised, due to poor infection control in skin-penetration practices in non-health care settings. Greater awareness of the risks of unsterile skin-penetration practices may greatly reduce the possibility of infection through this route
- A significant number of people in the general community have hepatitis C but are unaware of their status, or that they are potentially infectious to other people and may greatly benefit from recent advances in combination treatments for hepatitis. A widespread community awareness and education campaign will provide tangible health benefits to these people – particularly those who, in light of prevailing community attitudes, do not seek support out of fear of disclosure to health workers and others regarding past or present risk behaviours.
- Several high-level government inquiries and the National Hepatitis C Strategy stress the need to reduce discrimination against people with hepatitis C. A better understanding of the transmission routes and health impact of hepatitis C by the general community would create a more supportive environment for existing education programs, as well as reduce community concerns and potential discrimination faced by people living with hepatitis C.

The Australian Hepatitis Council urges the Australian Government to allocate sufficient resources in the next Federal Budget for the development and implementation of a national hepatitis C mass media public awareness campaign. The evidence warranting such a campaign is clear, as are the dangers inherent in further public silence on an epidemic which, by all accounts, is threatening our ability to reign in the social and economic costs it represents.

⁵ Recommendation 5 in Hepatitis C and the blood supply in Australia, Community Affairs References Committee, June. 2004

⁶ Other high-level reports which have called for a national community awareness campaign include Hepatitis C: The Neglected Epidemic (NSW Legislative Council, 1998) and C-Change: Report of the enquiry into hepatitis C related discrimination (Anti-Discrimination Board of NSW, 2001).