

HepPEd Prisoner Peer Educator Program Training Guide

LET'S TALK ABOUT HEP C:
TEST, TREAT, REPEAT
- IT'S SIMPLE

HepPEd

National
Prisons Hepatitis
Education
Program



Kirby Institute



ashm



NPHN
NATIONAL PRISONS
HEPATITIS NETWORK

Acknowledgements

The National Prisons Hepatitis Education Project (HepPEd) is a National Prisons Hepatitis Network initiative being led by the Kirby Institute and the Australasian Society for HIV, Viral Hepatitis, and Sexual Health Medicine (ASHM). This guide was prepared by the Kirby Institute UNSW Sydney on behalf of the HepPEd Project Team. The content is based in part on the previously developed *Hep C & You* peer education program developed by the same group and disseminated by the Australian Injecting and Illicit Drug Users League (AIVL) and the *Youth Peer Education Toolkit Training of Trainers Manual* (sponsored by the United Nations Population Fund, UNAIDS, USAID, and the World Health Organization). The content was informed firstly by the HepPEd [Report of findings from the National Needs Assessment and Steering Committee Process: Public Health Literacy and Hep C Education in the Australian Prisons](#) which included insights into the educational needs of prisoners, correctional officers, and healthcare providers working in the prison setting. Secondly, guidance from the HepPEd National Steering Committees on the design concepts and delivery modes of the HepPEd Program was incorporated including on the key themes and messaging, key topics and learning objectives, and planned resource types.

About HepPEd Program

The HepPEd Program was developed as part of the National Prisons Hepatitis Education Project (HepPEd), which aimed to develop and deliver targeted prison-specific hep C education to enhance the *public health literacy* (that is the knowledge, attitudes, and practical capabilities or competencies regarding hep C) of all those in prison setting, including healthcare providers, correctional officers, and prisoners. Peer-to-peer education between prisoners is a key element of the HepPEd Program.

Funders

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Introduction

How to use this peer educators guide

Welcome to the '*Let's talk about hep C*' prisoner education session! This training guide is designed to provide you with all the information and skills you need to inform your peers about getting testing and treatment for hep C in prison as part of the HepPEd Program.

As a peer educator, you play a vital role in sharing information, providing advice, and answering questions about managing hep C in prison to your peers. This guide will equip you with the knowledge and skills to do just that. As you go through the guide and the training sessions, keep in mind that you are encouraged to adapt the material to your own personal style of providing information and advice, and to the individual learning characteristics of your peers.

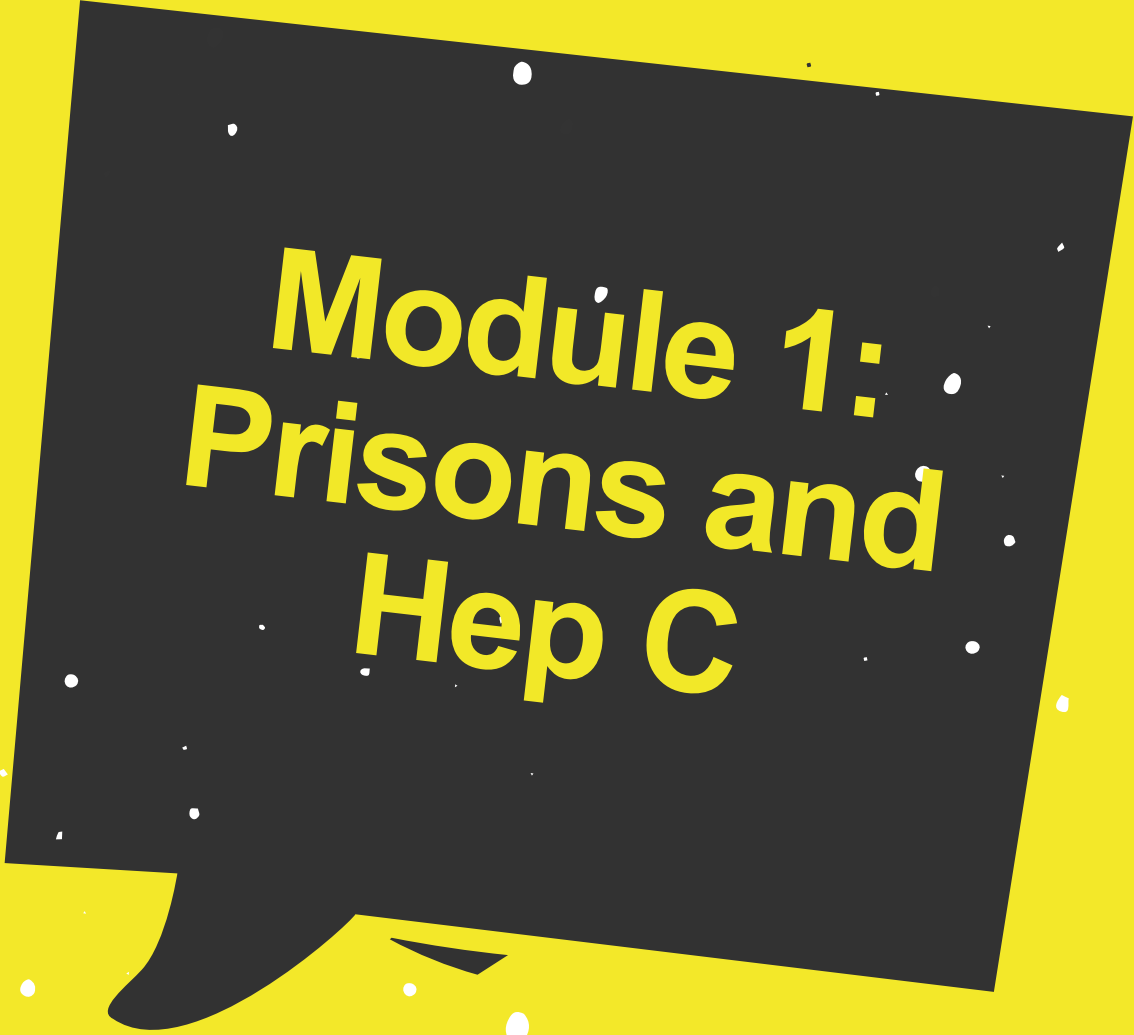
We hope that this guide will help you make a positive impact on the health and well-being of your peers. Don't hesitate to reach out to your HepPEd facilitator if you have any questions or concerns as you go through the training. Good luck and have fun!

Let's talk about hep C prisoner peer education modules

The three '*Let's talk about hep C*' prisoner peer education modules as part of this Peer Education Program have been prepared for an audience with little or no understanding of prisons and hep C, and little or no experience in peer education. The overall goal is to ensure that peer educators gain a level of knowledge at least equal to, but likely somewhat above, your fellow prisoners. The modules outlined in this training guide will be delivered to peer educators by HepPEd facilitators as three one-hour Powerpoint presentations with interactive activities. The first module aims to give provide basic understanding, from a prison perspective, of what hep C virus is, how it is transmitted, and how it affects the body, as well as how the infection is diagnosed, how it is treated, and how spread of the virus can be reduced in the prisons. The second module aims to provide training in the key skills for successful peer education. The third module covers the learning objectives developed for prisoners in the HepPEd Program, the key topics related to those objectives, and the educational resources developed for *Let's talk about hep C* prisoner education including videos, comic books, booklets and posters.

The topics included in each module are:

| Module 1: Prisons and hep C | Module 2: Peer education skills | Module 3: The HepPEd Program |
|--|--|---|
| P9: Where is the liver and what does it do? | P25: Module 2 overview & revision activity from Module 1 | P34: Module 3 overview & revision activity from Module 2 |
| P9: What is hepatitis? | P26: Good communication in peer education | P34: The HepPEd Program and its key messages |
| P11: What are the tests for liver disease? | P27: What is peer education? | P36: Familiarisation with HepPEd resources |
| P12: What is hep C and how is it spread? | P28: What are the elements of successful peer education? | P37: Practice activity – working out your style |
| P14: Why get tested for hep C? | P28: Settings of peer education in the prison | P37: Practice activity – working out your settings |
| P15: What are the tests for hep C? | P29: How should peer education happen? | P37: Practice activity – working out your messages |
| P17: What is the treatment for hep C infection? | P30: How can you become a successful peer educator | P37: Practice activity – facing tough questions/ the challenging audience |
| P19: What happens after hep C is cured? | P31: Supervision and support provided for peer educators | |
| P20: How to prevent catching hep C infection while inside? | | |



Module 1: Prisons and Hep C

Session Overview

| | |
|----------------------------|--|
| Title | Module 1: Prisons and Hep C |
| Format | PowerPoint presentation and activities |
| Length | 60 minutes |
| Learning objectives | <ul style="list-style-type: none">• Describe where the liver is in the body and what it does.• Demonstrate an understanding of 'hepatitis', 'hep C', and 'hep C transmission'.• Describe how common hep C infection is amongst prisoners and how commonly new infection occurs in the prisons.• Describe the effects of chronic hep C on the liver and on the person.• Describe what tests are used to diagnose hep C infection.• Describe the treatment for chronic hep C infection and its effectiveness.• Describe the ways in which spread of hep C in the prisons can be reduced. |

Session Structure

| | |
|----------------------|---|
| Time | 10 minutes |
| Module topics | <ul style="list-style-type: none">• Where is the liver and what does it do?• What is hepatitis?• What are the tests for liver disease?• What is hep C and how is it spread?• Why get tested for hep C?• What are the tests for hep C?• What is the treatment for hep C infection?• What to expect after cure of hep C infection?• How to prevent catching hep C infection while inside? |

Topic 1: Introduction

Learning Outcome

Participants oriented to the program, module, and topics

Peer Educator Notes

Module 1 Overview – Prisons and Hep C

Overview

This education program focuses on hep C infection and how it is diagnosed and treated in the prisons.

- Hep C is an infection from a virus which causes inflammation of the liver ('hepatitis') and slowly stops the liver working properly ('liver failure'). It can cause serious disease or death.
- Hep C is spread by contact between the blood of one person to the blood of another person (sometimes called blood-to-blood contact). This mostly happens by sharing needles and syringes when injecting drugs.
- In Australia in 2022, there are around 100,000 people living with ongoing or 'chronic' hep C, and around 5,000 new infections each year.
- There are over 40,000 people in Australian prisons at any one time, with almost double that number taken into custody each year.
- In Australian prisons, up to 50% of people (that is one in two or half) have had hep C infection at some point in their lives (either now or in the past), and up to 20% (that is as many as one in five) have ongoing or chronic hep C infection.
- Hep C infection is easily diagnosed with blood tests which should be offered to all prisoners.
- The treatments for hep C are highly effective, are available in all Australian prisons, and should be offered to all those diagnosed with chronic hep C infection.
- It is often hard to get the word out about the new treatments in health care, but the best way to get people onto a new idea is hearing advice from someone they know.

This education program cont.

The HepPEd prisoner peer educator program has three sessions designed to get participants feeling confident and comfortable sharing information about hep C and prisons with others.

There is no expectation for participants to become experts from these sessions - instead the goal is to help participants feel confident about starting a conversation about why it is a good idea to get all prisoners tested, and those infected treated and cured.

This module (Module One)

This learning module (Module One) is designed to help prisoner peer educators explain to others what the liver's role is in the body, how hep C affects the liver, how to get tested, treated, and cured for hep C, and how to reduce the spread of hep C.

The learning objectives for this module are for participants to be able to:

- Describe where the liver is in the body and what it does.
- Demonstrate an understanding of hepatitis, hep C, and hep C transmission.
- Describe how common hep C infection is amongst prisoners and how commonly new infection occurs in the prisons.
- Describe the effects of chronic hep C on the liver and on the person.
- Describe what tests are used to diagnose hep C infection.
- Describe the treatment for chronic hep C infection and its effectiveness.
- Describe the ways in which spread of hep C in the prisons can be reduced.

Topic 2: Where is the liver and what does it do?

Learning Outcome

Participants know what the liver is, its location, and its role in the body

Peer Educator Notes

What do you know about the liver?

The location of the liver:

The liver is in the upper right-hand corner of the abdomen (stomach), where it takes up most of the space under the ribs, and also extends a little under the left-sided ribs (you should visually explain this as well by pointing to the area on your body).

The function of the liver:

You can't live without your liver. People with very severe liver disease are sometimes given a liver transplant (that is a new liver) as the only hope for survival.

The liver is both a manufacturing factory and waste processing plant in your body. It cleans the blood of toxins (such as drugs that you take or alcohol that you drink) and breaks down the food you eat so that your body can use it for energy, making vitamins, and building new proteins.

Topic 3: What is hepatitis and what does it do to the liver?

Learning Outcome

Participants understand what inflammation of the liver is and how it is caused

What is hepatitis and what happens when it is chronic (or persistent)?

What is hepatitis?

- The liver can become inflamed for a number of reasons, but particularly with infection by a virus. This is known as 'hepatitis': 'hepa' = liver, 'itis' = inflamed
- When a liver becomes inflamed, this leads to liver scarring (which is also called 'fibrosis'). Over a long time, liver scarring can progress to 'cirrhosis' and sometimes to liver cancer.

The progression of liver disease in 3 pictures:



- A healthy liver (left). A healthy liver is smooth and firm to the touch.
- A liver with hepatitis becomes swollen and yellow (middle)
- A liver with severe scarring or cirrhosis (right). The liver becomes stiff, heavily scarred and nodular (bumpy).

It takes a long time for a healthy liver to turn into a liver with cirrhosis, usually many years or even decades.

Symptoms of a damaged liver:

A damaged liver is unable to do its job properly. The symptoms of liver disease some people feel are:

- Nausea (feeling sick)
- Weakness and tiredness
- Loss of appetite (not hungry)
- Yellow skin and eyes (jaundice)
- Bruising or bleeding

Topic 4: What are the tests for liver disease?

Learning Outcome

Participants can describe the tests for liver damage

Peer Educator Notes

What are the tests for liver disease?

Liver function tests (LFTs):

- If a person is thought to have liver trouble, it's important to know if they have any liver inflammation or scarring and how much.
- If the liver is damaged, it won't be working or functioning properly.
- The first step is to have a set of blood tests called Liver Function Tests (LFTs) to see how well the liver is functioning –the results of the tests tell whether the liver is inflamed or not.
- If a person has ever injected drugs, they should have LFTs to know if they have any liver damage caused by a virus like hepatitis B or hep C.

Tests for liver scarring (fibrosis):

If a person's liver has been damaged for some time, there are two options for testing to see how much scarring they have: a FibroScan®, or a blood test called an APRI test (which stands for Aspartate aminotransferase to Platelet Ratio Index):

- **FibroScan®**
 - A FibroScan® is a painless, 'sound waves' test, which uses a portable machine similar to an ultrasound, and is done in the clinic.
 - A FibroScan® measures the stiffness of the liver. The stiffer the liver, the more scarred it is.
 - The result of the test is available right away with a score which indicates how scarred the liver is.
- **APRI test**
 - An APRI test is a blood test where the results are used to calculate an APRI Score which can estimate how much scarring is in the liver.

**Peer
Educator
Notes**

A brief summary:

People can get tested for liver scarring at any prison, but the type of test chosen will depend on the type of equipment available in the centre – for example, some prisons may not have a FibroScan® machine available and so they'll do APRI tests.

The good news is that the liver can repair itself (if the damage is found in time). So even if there is some liver scarring, with treatment, it may get better. For example, someone who has liver scarring from a hep C virus infection – their liver might get better after having hep C treatment.

Topic 5: What is hep C and how is it spread?

**Learning
Outcome**

Participants can define what hepatitis c (hep C) is, how common it is, and how it is transmitted

**Peer
Educator
Notes**

What is hep C?

Hepatitis c (often called 'hep C') is a viral infection affecting the liver. It makes the liver become inflamed and slowly become scarred.

Hep C has two stages - acute and chronic:

The acute stage:

- It happens when someone first gets hep C and may last six months.
 - During the acute stage, 1 in 4 people (a quarter) will naturally get rid of the virus from the body (meaning they got rid of it on their own, without treatment).
 - Most people with acute hep C have no symptoms
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The chronic stage:

- It happens in the remaining 3 out of 4 people and stays forever unless it is treated with medication.
- Chronic hep C slowly damages the liver over time.
- Most people with chronic hep C don't feel sick at all, even though the virus is in the body and causing damage.

Peer Educator Notes

How common is hep C?

- Hep C infection is common.
 - Across the world, around 1 in every 100 people have chronic hep C.
 - In Australia, around 1 in every 250 people have chronic hep C.
- Hep C infection is especially common among people who inject drugs.
 - In Australia, 1 in every 5 of the people who inject drugs has chronic hep C.

Hep C inside the prisons:

Hep C is especially common inside the prisons. More than 1 in 10 people on the inside are living with chronic hep C.

Each year, around one in every 10 people who enter prison without hep C infection become infected while inside.

Peer Educator Notes

How do you get hep C?

The spread of hep C:

Hep C is a virus spread by blood-to-blood contact – even when the amount of blood is tiny (microscopic). Blood-to-blood contact means the blood of one person gets into the blood of another person.

- The most common way to spread hep C is by sharing injecting equipment. This is not just needles and syringes but spoons, water, tourniquets and other bits of equipment that might be used when injecting.

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- Hep C can also spread by blood-to-blood contact during fights.
 - Other ways that hep C can spread are by sharing other equipment that has blood on it, such as:
 - Tattooing and body piercing equipment
 - Razors and toothbrushes
 - Hep C can also be spread through unprotected sex (when blood is around), but this is uncommon (much lower risk).
 - For women - hep C can be transmitted from mother to baby, but this is also fairly uncommon (lower risk).
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Topic 6: Why get tested for hep C?

Learning Outcome

Participants can identify the benefits of knowing their hep C status

Peer Educator Notes

Why get tested for hep C?

The benefits of screening for hep C:

There are a range of benefits for a person in prison in getting tested for hep C. These include:

- Knowing their hep C status. It is important to get tested as they might:
 - have been infected with the virus without knowing (most people have no symptoms).
 - have been infected many years ago and forgotten about it.
 - have done something that can transmit hep C, like sharing injecting equipment, having a tattoo while inside, and want to know if they've contracted hep C.
 - Get peace of mind that they're not going to accidentally spread the virus to someone else.
 - Get treated and cured if they have chronic hep C.
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Topic 7: What are the tests for hep C?

Learning Outcome

Participants can describe each type of hep C test, and what the results will tell them.

Peer Educator Notes

What are the tests for hep C?

The two types of blood tests:

- The first test is called an antibody test. The antibody test tells whether someone has **ever** been infected with hep C (either in the past or now), but not whether someone is infected **now**.
- The second test is called an RNA test. This test looks for the RNA or genetic material of hep C (sometimes also called a 'PCR' test or a 'viral load' test). This test tells whether someone is infected with hep C **now**.

How to get tested for hep C?

If someone is interested in getting tested, they should ask the nurse to take the blood for both the hep C antibody and the RNA test. This will save having to have a second blood collection if the antibody test is positive.

- All test results are confidential between the patient and the nurse or doctor. The prisoner doesn't need to tell anyone that they've had the tests or got the results.
- Other viruses such as hepatitis B and HIV are also shared by blood-to-blood contact, so it is a good idea to get tested for these viruses at the same time.

Peer Educator Notes

What do the hep C test results mean?

The three possibilities with the results for hep C:

1. Both antibody and RNA tests are positive – this means the person has hep C infection **now**.
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2. A positive antibody but a negative RNA test means that the person has had hep C **in the past** but does not have it now. They will have got rid of the virus either naturally (their body's immune system naturally cleared it - which happens for around 1 in 4 people during the acute stage) or they may have been treated in the past.
 3. A negative antibody test means that the person has **never been infected** with hep C. In this case an RNA test is not needed as the person does not have a hep C infection.

Recap – other tests for liver disease:

If the tests results show chronic hep C, it's important to get checked for liver disease as well. A reminder of the tests:

- Liver Function Tests which look to see how well the liver is working.
- Either a FibroScan® or a blood test to calculate an APRI Score to measure liver scarring.

Peer Educator Notes

What about different strains of the virus and how much of the virus is there?

Viral strains:

There are 8 strains of the hep C virus, also known as 'genotypes'

In the past, testing for the strain (or genotype) was important to help choose the best treatment, but now the treatments work against all strains and so we often don't test for the different strains anymore.

'Viral load':

The amount of virus in the blood (or 'viral load') is also different person to person.

In the past, testing for the viral load was important to choose the best treatment, but now all the treatments work very well no matter what the viral load is.

Topic 8: What is the treatment for hep C infection?

Learning Outcome

Participants can describe the hep C treatments and what to expect while on treatment

Peer Educator Notes

How do you treat hep C?

Everyone who is diagnosed with chronic hep C (that is both hep C antibody and RNA positive) while in prison should be offered treatment.

The new hep C treatment:

- Hep C is treated with a type of medication called ‘Direct Acting Antivirals’ or ‘DAAs’
- Some people may remember the old interferon treatments – which were tough. The treatment involved injections over many months (24-48 weeks), had lots of bad side effects, and cured only around half the people.

Advantages of DAAs:

The new DAA treatments are dramatically better, as they:

- do not involve injections – DAAs are just tablets taken each day;
- are short in duration - 8-12 weeks only;
- have essentially no side effects;
- are highly effective – almost everyone (more than 95% of people) is cured, and there is also a back-up treatment for the small number who don’t get cured.

Options of DAAs:

There are two equally effective first-up DAA options:

- Maviret™ – which involves taking three tablets per day for 8 weeks
 - Epclusa™ – which involves taking one tablet per day for 12 weeks
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What to expect while on treatment for hep C?

The treatment process of DAAs:

- There are a few important visits with the nurse or doctor:
 - getting started on treatment;
 - after starting to make sure things are going well;
 - 1-3 months after finishing (to check for cure).
- If the person gets transferred to another centre while on treatment, the DAA medication should go with them so the treatment can be continued without missing doses.
- If the person gets released before the end of treatment, the nurse should arrange for the rest of the treatment course to be provided (or a prescription for more medication) to keep going on the outside.

How to manage DAA treatment?

Most of the time the person will be given tablets to take by themselves without going to the 'pill window' each day. No one needs to know that it is hep C treatment. Some people may find it easier or better have assistance with managing treatment by visiting the nurse each day.

Taking the DAA medications:

- The DAA treatments will work best if the tablets are taken every day
- The DAA treatments will work best if the full course of treatment (8 weeks or 12 weeks) is completed.
- If a dose is missed it is best taken on the day it is due, but if it's already close to the next dose, it is better skip it – don't double dose or take extra pills if a dose is missed on just one day.

The impact of DAA on other medications:

- Some medications, like those for heartburn, lowering cholesterol, or for epilepsy (seizures) can be affected by the DAAs for hep C. The nurse or doctor will check if any of the other medications will be a problem with the hep C treatment.

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- Drug treatments like methadone and buprenorphine are **not** affected by DAAs.
 - The person doesn't have to stop using drugs while they're on treatment – the treatment will work even if they keep using, but reinfection may occur.
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Topic 9: What happens after hep C is cured?

Learning Outcome

Participants can describe what happens after hep C treatment is completed and understand the risk of reinfection

Peer Educator Notes

What happens after treatment?

Check for cure:

- After the treatment course is completed, a final blood test is taken between four and 12 weeks after the medication is finished to check for cure.
 - This test is the blood test called the PCR or RNA test (the same test that's used to check for chronic infection).
 - This test is to make sure that the virus is completely gone from the body (sometimes called PCR negative) which means the person is cured.
- Most people who have DAA treatment clear the virus from their body (95% or 19 out of 20 people), meaning that person no longer has a hep C infection and is **cured**.
- About 5% of people (1 in 20) don't clear the virus with their first DAA treatment.

The back-up treatment:

For these people, there is a back-up treatment called Vosevi™ which can cure 90% (9 out of 10) who weren't cured with the first treatment

– this means more than **99%** of all those with chronic hep C can be cured.

- Treatment with Vosevi™ is also one tablet daily for 12 weeks.

**Peer
Educator
Notes**

What happens after the cure?

Successful treatment means that the virus is no longer in the blood and attacking the liver causing inflammation and scarring.

After the cure:

- People who are cured generally feel stronger and have more energy.
- As scarring in the liver generally took years to develop, it slowly reduces over a similar period (years).
- If cirrhosis has already developed, it is not likely to repair. In this case it is important to have ongoing 6 monthly checks of for complications which the nurse will arrange.

Re-infection:

- It's important to remember that being free of hep C is not the same as being immune to hep C – that is being protected from getting it again (called re-infection). Unfortunately, people can get infected with hep C again and again...
- Fortunately, each reinfection can be treated just as well as the first time.

Topic 10: How to prevent catching hep C while inside?

**Learning
Outcome**

Participants understand the things they can do to reduce the risk of hep C transmission whilst in prison

How can the risk of transmission of hep C in the prisons be reduced?

Reduce hep C transmission:

As transmission happens mostly with injecting drug use there are three main ways to reduce the spread:

- **Reducing the frequency of injecting drug use by:**
 - Opioid substitution treatment (OST) for those who regularly use opioids such as heroin. OST is provided as methadone or buprenorphine.
 - Using the drug another way, like snorting, swallowing, smoking, or shafting ('up your bum')
- **Reducing the chances of becoming infected even when injecting drugs by:**
 - Ensuring that both the person, and all those they share with, come forward for testing and that all those with chronic hep C get treated
 - Encouraging everyone who is in prison to get tested and treated. The more people who are treated, the less hep C is going around in the prison - this is called Treatment as Prevention (TasP).
- **Being 'blood aware' (see following)**

What does be 'blood aware' mean?

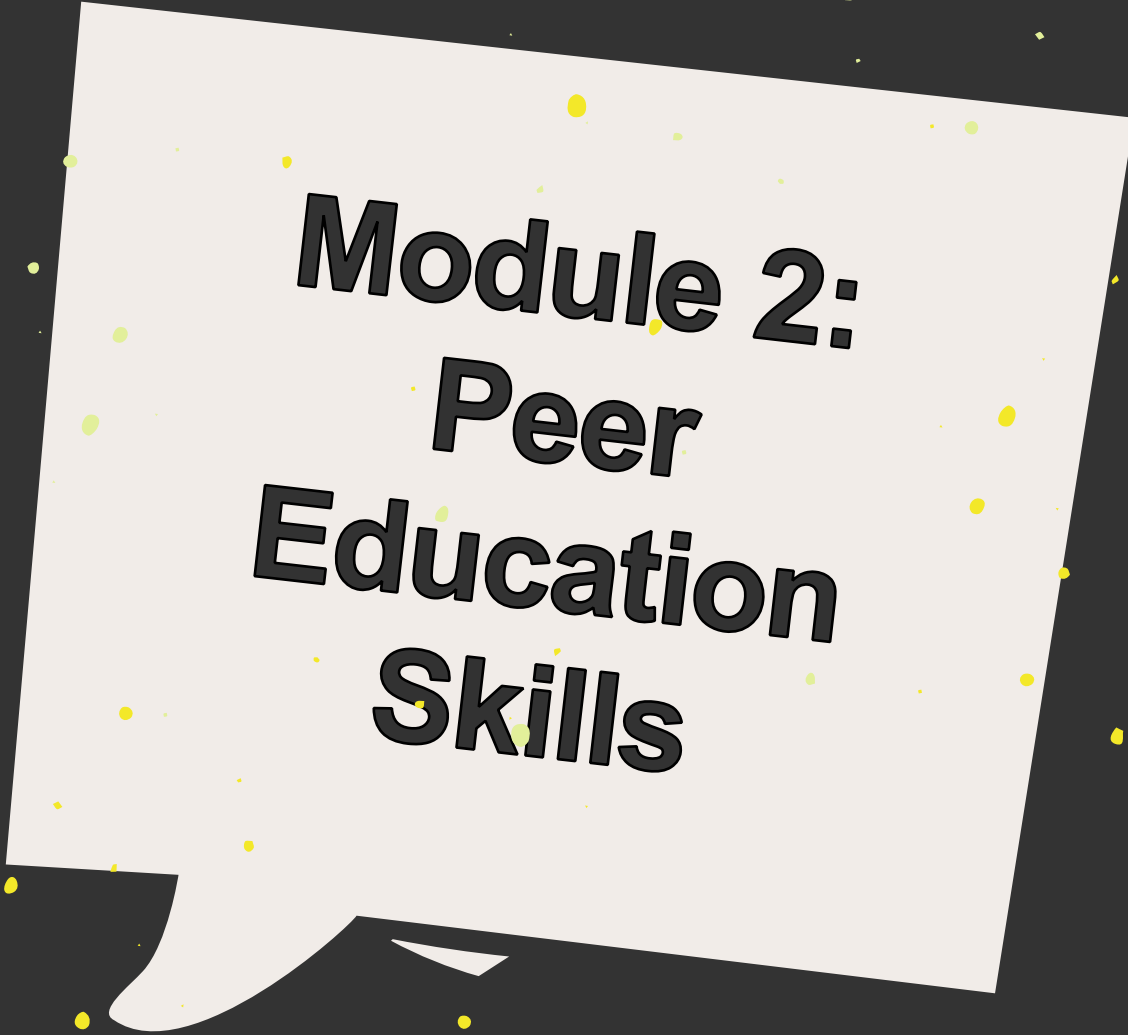
You don't have to see blood for hep C to be there. The risk of getting hep C infection can be reduced by being 'blood aware'.

Good practices of being 'blood aware':

- Avoiding sharing injecting equipment like needles, fits, water, spoons, and tourniquets
- Cleaning surfaces where blood might have spilled, preferably with a bleach or disinfectant solution
- Trying to use new tattoo needles, inks, and piercing equipment for every person

Being 'blood aware' cont.

- Wearing protection during sex
 - If new equipment isn't available, reduce the risk of hep C transmission using the 'rinse-bleach-flush' routine to clean the fit.
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**Module 2:
Peer
Education
Skills**

Session Overview

| | |
|----------------------------|---|
| Title | Module 2: Peer Education Skills |
| Format | PowerPoint presentation and interactive activities |
| Length | 60 minutes |
| Learning objectives | <ul style="list-style-type: none">• Describe what peer education is• Describe why peer education is effective• Describe the attributes of a good peer educator• Describe the possible settings in the prison where peer education could be offered• Demonstrate a potential personal approach to peer education |

Session Structure

| | |
|----------------------|---|
| Time | 10 minutes |
| Module topics | <ul style="list-style-type: none">• What is peer education and what is a peer educator?• What are the elements of successful peer education?• Settings of peer education in the prison• How should peer education happen?• How can you be a good peer educator?• Supervision and support |

Topic 1: Introduction to Module 2 – Peer Education Skills

Learning Outcome

Participants orientated to this module and topics

Peer Educator Notes

This module covers:

- **What is peer education?**
 - A **peer** is a person who is in the same social group (that is people who know each other or share something with each other – they are mates). In this case, the group may be everyone in the wing, those who exercise together, or those with the same cultural background.
 - **Education** means helping increase someone’s knowledge, change their attitudes, or alter their behaviour. In this case, it is raising awareness of hep C in the prisons, overcoming stigma, and encouraging getting tested and treated for hep C.

- **Why use peer education?**
 - A person’s peer group has a strong influence on the way he or she behaves. This is true of both risky and safe behaviours. Peer education makes use of peer influence in a positive way.
 - Peer education offers the person giving the education (the **‘peer educator’**) the opportunity to influence those around them to get tested and treated for hep C.

- **Who are good peer educators?**
 - respected by their peers
 - energetic and interested
 - non-judgemental
 - self-confident and motivated

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- **What do successful peer educators do?**
 - provide information – e.g. what is hep C, how is it spread
 - motivate their peers – convincing others to make a change
 - make things happen – helping others to make a change
 - show the way – where to get tested and treated for hep C

 - **How and where should peer education be done?**
 - Opportunistically (at any opportunity)
 - Individuals or small groups
 - Using HepPEd peer education resources

**Peer
Educator
Notes**

A revision quiz

T / F It only takes a very small amount of blood to spread hep C

T / F I can catch hep C if another someone sneezes or coughs on me

T / F Fights are the only way of catching hep C

T / F You can be treated once for hep C in the prison

T / F Treatment only takes a couple of months

T / F Getting all your mates tested and treated is a good way to stop the spread of hep C

T / F You can't get infected again once you've been treated

Topic 2: Good communication

**Learning
Outcomes**

Get to know other participants while participating in a simple example of good communication skills

Thinking Activity

Good communication in peer education

You're invited to engage in an ice-breaker exercise that will facilitate the development of a key foundational skill for peer education: effective communication. Through this game, you will have the opportunity to acquaint yourselves with each other, while also gaining valuable insight into the critical role that communication plays in the practice of peer education.

What you've learnt from this game?

Topic 3: What is peer education?

Learning Outcomes

To gain a common understanding of the concept of peer education. To identify the benefits and the limits of peer education.

Peer Educator Notes

What is peer education?

When agreeing on a working definition of peer education, it is important to come as close as possible to the following description:

- A **peer** is a person who is in the same social group (that is people you know or share something with, your crew, your mates).
 - In this case, the group may be everyone in your wing, those you exercise with, or those with the same cultural background.
- **Education** means helping increase someone's knowledge, change their attitudes, or alter their behaviour.
 - In this case, it is raising awareness of hep C in the prisons, overcoming stigma, and encouraging uptake of hep C testing and treatment.

**Thinking
Activity**

What are the pros and cons of being involved in peer education?

Topic 4: What are the elements of successful peer education?

**Learning
Outcomes**

To identify the four most important components of successful peer education.

**Thinking
Activity**

What makes up successful peer education?

| 1. | 2. | 3. | 4. |
|----|----|----|----|
| | | | |

Topic 5: Where should peer education happen?

Learning Outcomes

To identify suitable settings for peer education

Peer Educator Notes

Where should peer education happen?

An 'opportunistic' education:

- The HepPEd Program is based on 'opportunistic' education - that is education delivered whenever and wherever it is possible and suitable (whenever the opportunity arises).
- The only cautionary note would be that the peer educator should seek to ensure that no private or confidential information is disclosed by them or by the peers.

Topic 6: How should peer education happen?

Learning Outcomes

To identify ways to open the conversation about hep C

Peer Educator Notes

How should peer education happen?

Possible scenarios:

Possible opening lines:

Topic 7: How can you become a good peer educator?

Learning Outcomes

To identify the key attributes of good peer educators

Peer Educator Notes

How can you become a successful peer educator?

The roles of peer educators:

The facilitator should show the slide and discuss the various 'roles' that peer educators play, including:

- **educator** (teacher):
 - providing information about hep C testing and treatment;
 - correcting mistakes or mis-information that may be out there (e.g. you can only get treated once).
 - **friend** (mate):
 - encouraging and helping others to come forward for testing and treatment;
 - listening to others describing their challenges.
 - **activist** (battler or stirrer):
 - creating supportive groups;
 - standing-up for change.
 - **role model** (champion):
 - 'practice what you preach';
 - sharing your story.
 - **team player**:
 - supporting others;
 - contributing ideas and suggestions.
-

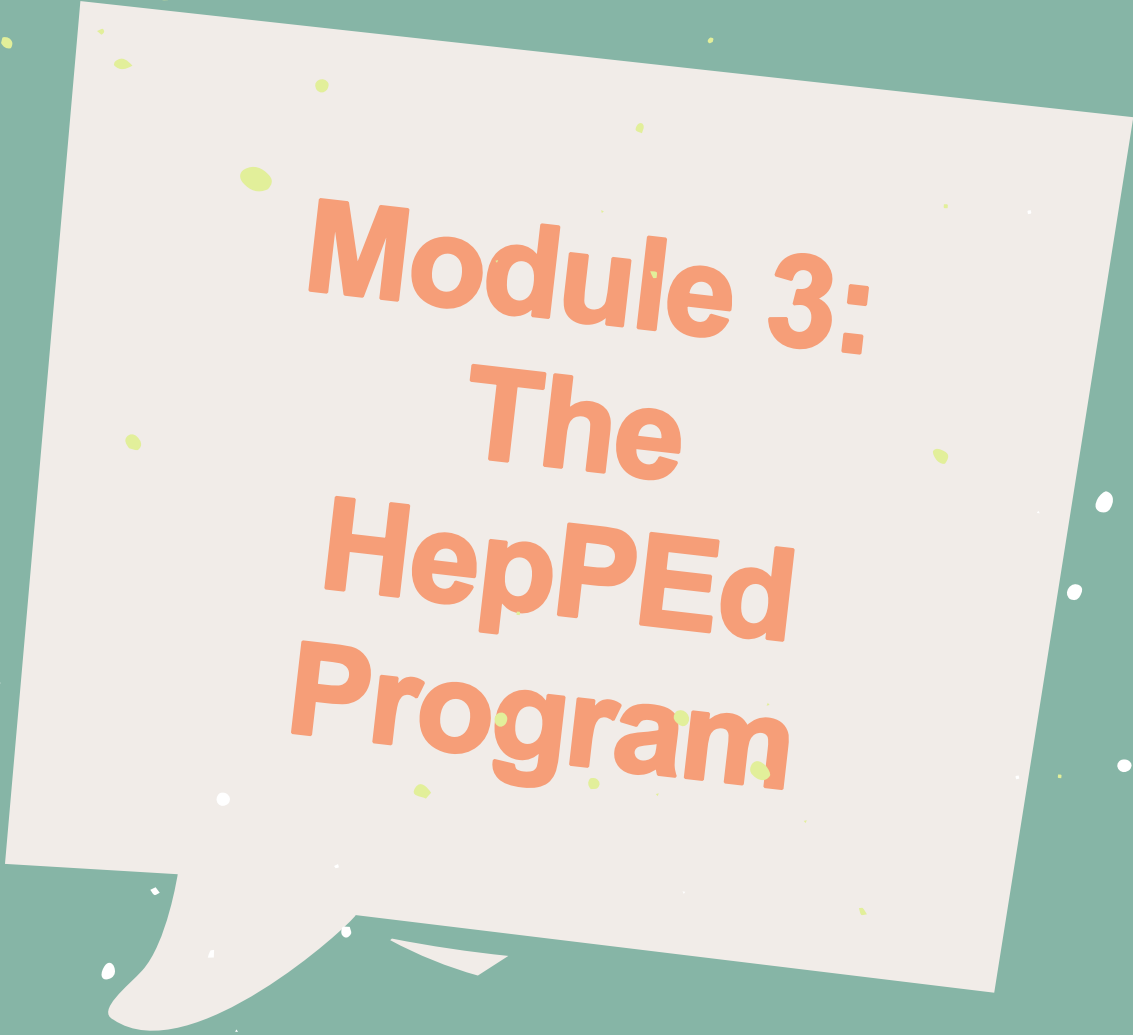
Topic 8: What supervision and support is provided for peer educators?

Learning Outcomes

To understand the support available to peer educators

Peer Educator Notes

The ongoing support provided for peer educators include:



**Module 3:
The
HepPEd
Program**

Session Overview

| | |
|----------------------------|---|
| Title | Module 3: The HepPEd Program |
| Format | PowerPoint presentation and activities |
| Length | 60 minutes |
| Learning objectives | <ul style="list-style-type: none">• Demonstrate an understanding of the learning objectives of the prisoner peer-to-peer education program• Demonstrate familiarity with the HepPEd educational resources• Demonstrate capacity to act as a peer educator |

Session Structure

| | |
|----------------------|--|
| Time | 10 minutes |
| Module topics | <ul style="list-style-type: none">• Overview of the HepPEd Program• Learning objectives of the HepPEd prisoner program• HepPEd prisoner resources• Peer education practice activities:<ul style="list-style-type: none">○ working out your style○ working out your settings○ working out your messages○ facing tough questions |

Topic 1: Introduction to HepPEd

Learning Outcome

Participants familiarised with the HepPEd program, this module, and topics

Peer Educator Notes

Module 3 Overview

- Module 3 focuses on the HepPEd program, an education program designed for prison settings.
 - The program aims to educate everyone in the prison about hep C testing, treatment, and prevention.
 - This module will familiarise peer educators with the key topics of the HepPEd program.
 - The participants will also learn about the available resources in the program and get the opportunity to develop their own styles.
-

Topic 2: What is HepPEd program?

Learning Outcomes

To become familiar with the overall HepPEd program and its objectives

Peer Educator Notes

The HepPEd program:

What is HepPEd program?

- The HepPEd program is a prison-specific education program - that is, it was designed specifically for the prison sector (and not borrowed from another setting).
 - The HepPEd program is 'whole-of-prison' – that is, it includes all three target audience groups:
 - prisoners, correctional officers, and healthcare workers
-

What is the HepPEd program trying to do?

- The HepPEd program aims to educate everyone in the prison about hep C testing, treatment, and prevention.

The aims of HepPEd:

- improve **knowledge** (get everyone in the know)
 - change **attitudes** (reduce stigma and encourage positive attitudes towards prisoners being tested and treated)
 - increase **capabilities** (practical support for hep C testing & treatment of prisoners)
-

Topic 3: What are the key messages in the HepPEd prisoner program?

Learning Outcomes

To become familiar with the HepPEd prisoner program and its messages

Peer Educator Notes

The HepPEd prisoner program – messages

The key message:

The overall message of the HepPEd prisoner program:

- Let's talk about hep C: test, treat, cure, prevent - it's simple

Key topics:

- The key topics of the HepPEd prisoner program are:
 - How simple hep C testing is
 - How simple hep C treatment is
-

- How to prevent getting infected with hep C
- How looking after hep C improves personal well being

Topic 4: What educational resources are available in the HepPEd prisoner program?

Learning Outcomes

To become familiar with the resources in HepPEd prisoner program

Peer Educator Notes

The HepPEd prisoner program – videos, comic books, booklet, and posters

The HepPEd prisoner program has developed a suite of resources as in the table below. You will be confident about the messages being portrayed in each segment of the resources and be able to respond to questions which may be posed by your peers by the end of this training session.

HepPEd resources for the prisoner program

| | |
|-----------------------------|--|
| <i>Animated video #1</i> | <i>“Get tested it’s simple”</i> |
| <i>Animated video #2</i> | <i>“Treat and repeat”</i> |
| <i>Animated video #3</i> | <i>“No judgement”</i> |
| <i>Comic book #1</i> | <i>“Talk to your mate, it’s simple”</i> |
| <i>Comic book #2</i> | <i>“Treat and repeat, it’s simple”</i> |
| <i>Information booklet*</i> | <i>“Let’s talk about hep C”</i> |
| <i>Poster</i> | <i>“Do yourself a favour, get tested and treated for hep C.”</i> |

**Remember to collect the before and after quizzes in the information booklet and return them to your facilitator.*

Topic 5: How should peer educators deliver education in the HepPEd prisoner program?

Learning Outcomes

To become confident with education delivery in HepPEd prisoner program

Peer Educator Notes

The HepPEd prisoner program – practice activities

This final topic will provide you an opportunity to practice the peer education skills you have learnt in the training sessions and become familiar with using the HepPEd resources. Following the structure below to think about your own peer education approach for the HepPEd Program.

Working out your own style: *e.g., practising the open line, based on a character or comment in the resources*

Working out your selected settings: *e.g., what to say in a scenario whilst exercising in the yard; what to say to a cell mate*

Working out your messages: *e.g., “you want to get treated for hep C so you don’t infect your partner on the outside”; “the treatment works well and it’s quick and easy...”*

Facing tough questions – how to respond to: *e.g., “it’s a waste of time because everyone gets reinfected in here”; “I don’t want the word to get out that I have hep C...”; “I am worried that if I come forward for testing the screws, correctional officers will give me a hard time me as a user...”*

Appendix 1. Getting your questions ready for the nurse or doctor: A handout for prisoners

If you decide to get tested or treated for hep C, the following questions can help make sure that you fully understand what is involved and how you can give yourself the best chance of your treatment being successful.

Take these questions along to your appointment with the nurse or doctor and work through the relevant questions. There is space at the bottom for any other questions that you might think of.

Questions to ask before treatment:

- Can I take over the counter medications or herbal remedies while I am taking my hep C treatment medications?
- I also have hepatitis B - how can I manage my hepatitis B while on hep C treatment?
- If I have side effects how and who will help me manage these?
- Do I have to stop using?
- Do I have to see a specialist?
- Do I need to do anything to prepare for treatment, or to make it work better?
- Is there anything I should tell my nurse/doctor about before starting treatment?

Questions to ask during treatment:

- Who can I talk to for help while on treatment?
- Does it really matter if I take my medication at the same time every day?
- Do I need to take it with food?

Questions to ask after treatment:

- When will I know that treatment has worked or not?
- My treatment has cured me of hep C, do I need to monitor my liver anymore?
- I didn't do my final blood tests after completing treatment, what do I do now?
- What are my future options if this treatment fails?

Other questions:

- 1.
- 2.
- 3.
- 4.