**PORTABLE POP-UP CLINIC: CHARACTERISTICS OF ENGAGEMENT IN CARE, AN OBSERVTAIONAL PROSPECTIVE COHORT STUDY**

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**BACKGROUND:** Vancouver’s Downtown East Side (DTES) is known for its high prevalence of HCV infection, mainly attributed to injection drug use. However, relatively few individuals have been treated for HCV infection. Community Pop-up Clinics (CPCs) were developed as a tool to address this issue and to further understand factors associated with engagement of this population in health care.

**METHODS:** Participants were recruited at CPCs held at several community centres. OraQuick® HCV Rapid Antibody and HIV Rapid Antibody point-of-care testing was offered. Participants identified as HCV positive were provided the opportunity to engage in care at a multidisciplinary clinic. A questionnaire was administered to collect demographic information, HCV disease knowledge, and data regarding barriers to receiving healthcare. The was a $10 incentive for participation.

**RESULTS:** A total of 2003 participants (mean age 49.9 years, 93.4% male) were tested for HCV infection, with 641 (32%) infected with HCV including 49 (7.6%) co-infected with HIV. Among HCV infected participants, 154 (24.2%) were linked to care (76% male, 30% First Nations, 28% homeless, 78% recent PWID). Groups under-represented among those engaged in care include: females (7%), lack of knowledge about how to access health care (9%), homeless (9%), perceived their health status as good (14%), First Nations (15%).

**CONCLUSION:** Our CPC approach in a neighborhood with HCV prevalence of 70% has successfully identified over 600 HCV-infected individuals and engaged a significant proportion of them in care. Additional efforts must be undertaken to engage certain populations such as women, First Nations and those who are homeless and in ensuring that engagement leads to enhanced access to curative HCV therapies in all eligible patients.