

## **MODELS OF CARE - FROM PATIENT TO ORGANIZER OF COMMUNITY TESTING**

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### **Background:**

The Users Academy have been organizing HCV community testing among people who use drugs in Denmark for a year. The project is designed to improve access to information about HCV as well as linkage to care for. The model of care is based in a mobile clinic manned by health care takers and peer persons. The clinic offers anti-body test, fibro scan, and linkage-to-care at homeless shelters and drug consumption facilities throughout Denmark. Persons who test positive are offered a referral to a medical clinic at the nearest hospital as well as peer support meaning a peer person will offer to follow them to the clinic and support them before, during and after treatment.

Key to the program's ability to engage and retain clients is the fact that the project is founded, organized and led by persons who use drugs and HCV patients. Nevertheless, it is impossible to do community testing without engaging professional health care takers.

The aim of this presentation is to give an understanding of the challenge in making the transition from patient and PWUD to organizer of community testing. Having been on the receiving end of traditional models of care we have had to seek help in public hospitals and many of us have experienced considerable difficulties, misunderstandings and in some cases neglect from the public health system. Among professional care takers the user experience is viewed both as a valuable resource as well as a significant limitation. Both views are to some extent legitimate but if the views are left undisclosed the resources are wasted and the limitations are not overcome. Thus, the presentation will give recommendations on how to take this into account when organizing peers and care takers in community testing.

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