



## From data to recommendation to implementation – why behavioural data is needed

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# DRUCK-Study

## Drogen und chronische Infektionskrankheiten

### Design

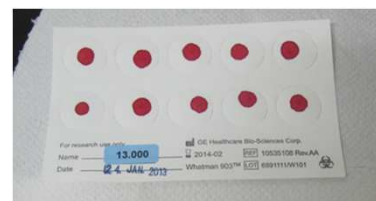
- Multicentre cross-sectional sero-behavioural survey 2011-15
- 8 cities in Germany
- People who injected drugs during the last 12 months
- Respondent driven sampling

### Data

- Behavioural data (sociodemographics, prevention and risk behaviours, testing history, knowledge of infection status, antiretroviral treatment and HCV treatment (IFN)
  - by questionnaire-assisted interviews
- **HIV, HBV, HCV** (serology & PCR)
  - testing from capillary Dried Blood Spots

The screenshot shows a questionnaire form with the following sections:

- 13. Einrichtungsname und Stadt:** A question asking where the respondent was tested, with options for 'Frankfurt' and 'sonstige Einrichtung'.
- 14. Wie oft haben Sie in den letzten 12 Monaten Drogen gespritzt?:** A question about the frequency of drug injection, with options for 'täglich', 'einmal pro Woche', 'einmal pro 2-3 Wochen', and 'nicht mehr injiziert'.
- 15. Wann haben Sie zuletzt eine Drogenuntersuchung gemacht?:** A question about the timing of the last drug test, with options for 'in den letzten 12 Tagen', 'zwischen den letzten 12 Tagen und 12 Monaten', and 'in den letzten 12 Monaten'.
- 16. Wie viele Personen denken Sie für die Teilnahme an dieser Studie gewonnen zu haben?:** A question about respondent-driven sampling, with options for 'keine', 'weniger als 10', and 'mehr als 10'.
- 17. Bekämpfung einer Drogenabhängigkeit:** A question about the respondent's experience with drug treatment, with options for 'keine', 'Behandlung ist nicht nötig', 'Behandlung ist wichtig', and 'andere Schritte'.



Ross et al, Virology Journal 2013  
Zimmermann et al, BMC Public Health 2014

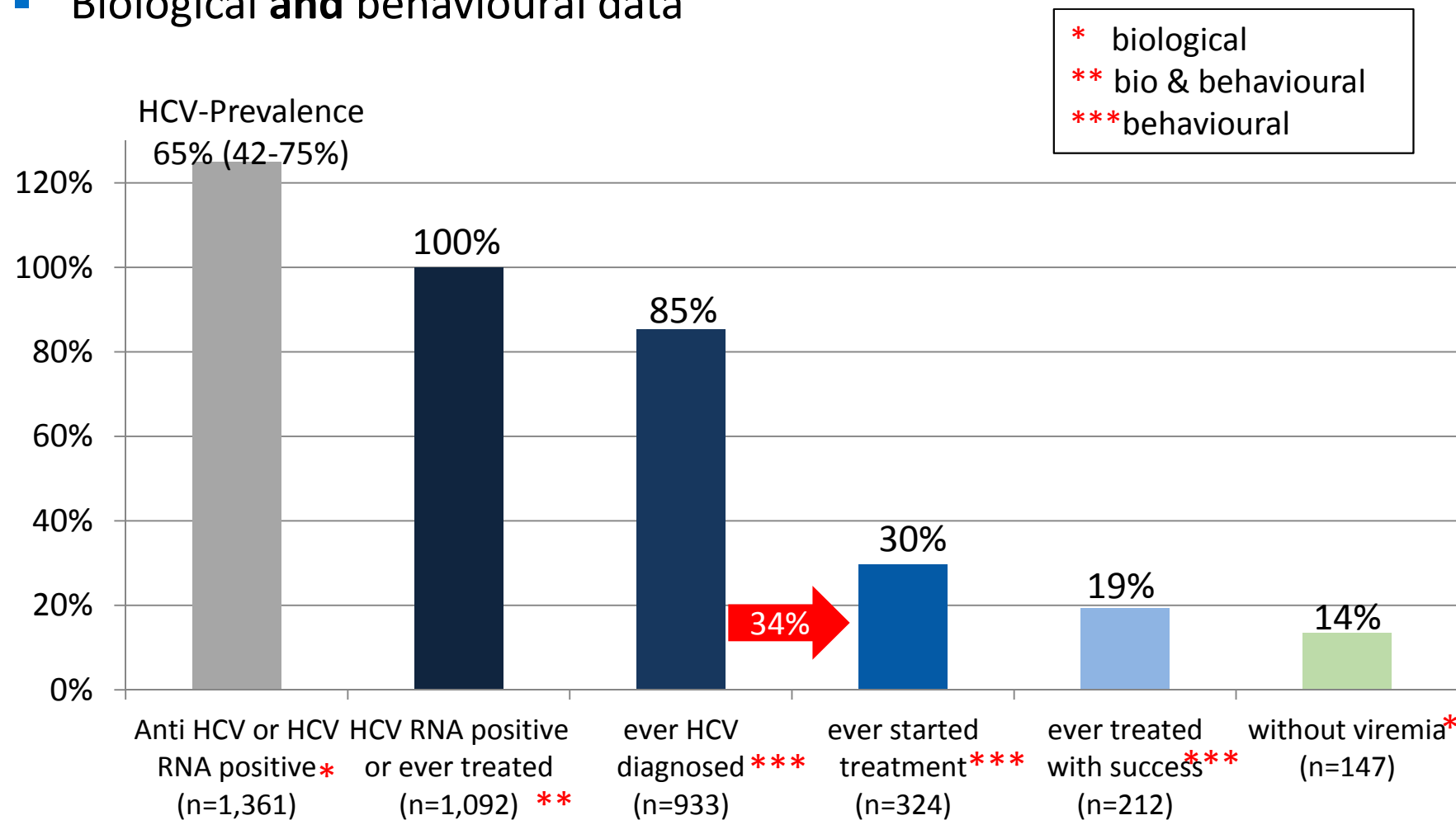


## Examples from data collection in a sero-behavioural study among PWID in Germany

- Treatment cascade data
- Knowledge
- Data on unsafe use behaviours, MVA

## (1) Treatment cascade data

- Biological **and** behavioural data



## Recommendations & Implementation

- Increase testing rate by offering low threshold testing in harm reduction services
- Increase linkage to care by ensuring local pathways and collaboration between HR services and medical system

### Implementation of the **HIV? Hepatitis? Das CHECK ICH** Project 2017-2019

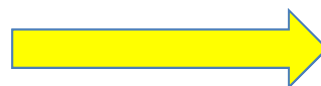


- 6 cities in Germany
- low threshold rapid POC testing for HIV & HCV in HR services and supported linkage to care if positive
- Evaluation of methods

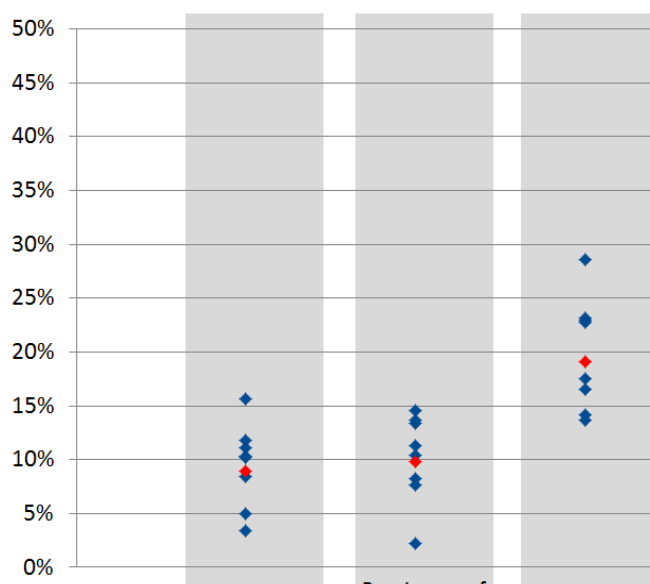


## Information material & training of staff

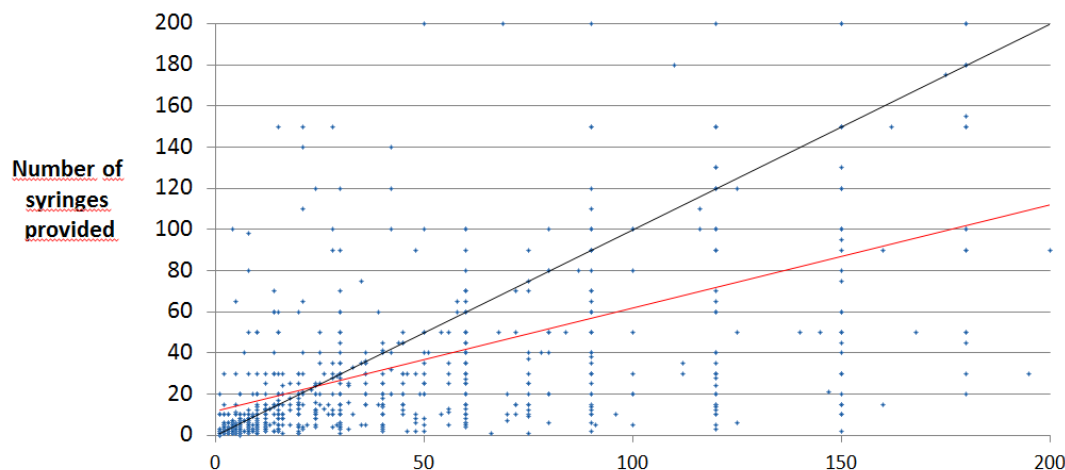
- New training offers on Hepatitis, testing and treatment options by Deutsche AIDS-Hilfe for staff of low threshold HR services
- New information leaflets /posters „Hep C can be cured“ for PWUD
- Awareness raising and information campaign on viral hepatitis for medical doctors (GPs and OST doctors)
  - Launch November 2018



## (2) Sharing of and access to equipment and knowledge



Access to sterile syringes (last 30 days)



n=1,543		% Not sure/new to me
Rinsing used n/s is not sufficient to prevent transmission of HCV		9 %
<b>HCV can be transmitted by...</b>		
... sharing needles/syringes		2 %
... sharing filters		19 %
... sharing spoons		20 %
... sharing water		22 %

## Recommendations & Implementation

- Likelihood to share needles/syringes increased with **insufficient access** to sterile n/s
- Use and passing on of filters/cookers and sharing of water was associated with **insufficient knowledge** on transmission of HCV by these behaviours

→ Increase access to clean materials

→ Improve knowledge on ways of transmission

- 
- Working group with representatives of HR services, NGOs, DAH, federal states
    - Publication of recommendations on distribution of consumption materials for HR services
    - need-adapted, no 1:1 exchange only
  - Survey on distribution of consumption materials with needs assessment in preparation





- Scale up of training of HR staff on specific modes of transmission of HCV (training workshops offered by DAH)
- Awareness raising and new information materials for PWUD (DAH)



## Make sure the study results reach local stakeholders!

- Present (local) study results to local stakeholders (low threshold HR services, addiction & medical system, politics)
- Make results available in an „easy to understand“ language



[www.rki.de/druck-studie](http://www.rki.de/druck-studie)

- Make local study results available (study city report)

