



Silence and Stigma: the Hepatitis C Virus (HCV) Epidemic

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The Problem:

Viral hepatitis C (HCV) is the most common chronic blood-borne pathogen in the United States, impacting an estimated 4 to 5 million people. Many people living chronically with this disease do not know they are infected and there is presently no meaningful public health or political agenda to address this silent epidemic. How can public health, health care providers, and the public become more educated to address this destructive virus? Eliminating the stigma associated with this disease is a first step to stemming the tide of policy-based disease discrimination.

Research Evidence:

- Persons with addictions, in sub-standard housing, or who are incarcerated are at greatest risk of contracting HCV.
- HCV is stigmatized based upon an association of the virus with illicit drug use.
- Dehumanization of HCV-stigmatized individuals perpetuates social and health-related marginalization.
- Social and health-related marginalization leads to poor health outcomes and a noted reduction in quality-of-life.

Proposed Solutions:

- Federal and State agencies must give high priority to testing populations at risk for HCV.
- Federal and State agencies must make funds available to test persons at risk and for education for the both at risk groups and the general public.
- The health care infrastructure must begin treating HCV positive clients as any other medically-fragile population with provision of appropriate, nationally recognized interventions.
- Agencies that are responsible for local public health jurisdiction must make HCV prevention a priority.
- Federal and State funds should be directed to universities and community-based research entities to evaluate HCV prevention and care programs to identify best-practice primary, secondary, and tertiary prevention strategies.

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