

Abstract

HCV prevalence and incidence are highest in the incarcerated, male, population in the USA, putting this patient population at highest risk. 90% of jailed persons in the United States are male; these males have lower literacy levels compared to the general population. Over 80% of studied high-risk patients infected with HCV are unaware of their seropositivity, and only do a minority of patients have severe signs and symptoms of infection. Educating the high-risk male population has been proven to improve treatment outcomes. Education should be specific to low-literacy populations when aimed at these patients directly; however, education of providers indirectly increases the amount of HCV education patients receive based. The present before and after Evidence Based Practice study offered PowerPoint and Brochure education to 2 health-care providers in El Paso County CO Criminal Justice Center. And these providers subsequently did significantly increase the amount of charted education time provided to the correctional patient population with a chi-squared test result of 5.937 (p-value of 0.01483). Based upon these findings and a review of literature, future criminal justice system efforts should emphasize the follow: psychological education, emotional teaching, social comprehension, direct-acting antiviral drugs, major autohemotherapy, and other proven effective complementary and alternative medicine. It is recommended that educational effort be digitally accessible, incorporate motivation therapy techniques, and be applicable internationally in rural and prison populations.

Keywords: 'hepatitis C virus', 'awareness', 'low health literacy', 'knowledge barriers', and 'hepatitis C education'