Increasing Hepatitis B vaccination in homeless populations

What you need to know

Hepatitis B can be prevented through vaccination. A program that included education, tracking, a small financial incentive and case management had the best chance of completing the vaccine.

What is this research about?

Those who are homeless have a higher chance of getting hepatitis B virus (HBV). Throughout the United States there is an average of 2.9 out of 100,000 cases of HBV. A study made up of those who are homeless and have a mental illness or use substances found 32.5% tested positive for HBV.

Hepatitis B can be prevented through a course of 3 doses of a vaccine. These must be administered at intervals within a 6 month period. The period and number of doses makes it difficult to complete successfully for those experiencing homelessness.

VISIT www.homelesshub.ca for more information

KEYWORDS Homelessness, Hepatitis, Vaccination, Case Management, Prevention

Summary Date: July 2013

What did the researchers do?

Participants were aged between 18-65 and were homeless at least within the past 30 days. Of the initial group of 2036 people chosen for the study 40% were HBV positive. Therefore they were unable to participate. The final sample was made up of 865 HBV negative participants, 20% had hepatitis C. The study was completed in the ‘skid row’ area of Los Angeles.

Participants were assigned to one of three groups which offered different amounts of case management and tracking. All of those in the study were provided with education on hepatitis as well as HIV.

The study consisted of a blood test, and follow up, as well as interviews that were administered in a private location. Researchers used the interviews to look at other factors that influence the rate of completing the 3 doses for the most intensive group.

What did the researchers find?

In the most intensive group, 68% of the participants completed the vaccination. This group consisted of 7 case management sessions with a nurse as well as tracking and incentives.

In the second group 61% completed the process. The middle group consisted of tracking and an incentive for participation but no case management.

In the least intensive group, only 54% completed the vaccination process. This intervention only provided incentives without the tracking or case management.

In addition to these general trends, there were specific variables that were noted in the most intensive group. Reporting of poorer health was linked with completing the vaccine. A lack of social support was linked with not finishing it. Those who identified as African Americans in the study were more likely to complete the vaccine. Those who identified as white were less likely to complete the vaccine. Women were also more likely to complete the study as were those with higher levels of education.

Additional research should replicate this study in different cities. Expanding on this will provide greater insight into preventing hepatitis B in a variety of urban and rural areas.