

CALD community knowledge & perceptions of hepatitis B stigma and discrimination

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Background



- Health-related stigma refers to a social process of exclusion on the basis of perceived health condition.
- Stigma towards HBV may be associated with negative attitudes towards potential transmission and fears of infection, often fuelled by misinformation about HBV.
- Some international studies have shown that health workers and the general population hold negative attitudes towards people living with HBV.
- Several studies have shown that stigma leads people living with HBV to feel embarrassed or ashamed, or that they have brought shame to their families.
- Stigma can act as a barrier to screening for HBV, as well as access to health care and treatment.

Our research aims to examine and monitor community attitudes towards hepatitis B in Australia inform the national response to hepatitis B.

 Chinese and Vietnamese migrant communities were chosen because HBV prevalence is high –selected by the AG in the first phase



- Korean and Filipino selected by the AG in the second phase
- Data was collected using both hard copies and online surveys
- Centre for Culture, Ethnicity and Health, LiverWELL, Hepatitis NSW, Hepatitis SA, Hepatitis WA, and Ethnic Communities Council of QLD (ECCQ), assisted in recruitment
- Choice of completing the survey in traditional or simplified Chinese, Vietnamese, Korean, Filipino, or English
- Researchers of Chinese, Vietnamese, Korean, and Filipino background performed the data entry



	Chinese sample (N=997)	Vietnamese sample (N=966)
Age Mean (SD), Range	43.68 (14.73), 18-84	36.44 (13.21), 18-90
Gender		
Male	424 (43.8)	397 (41.5)
Female	541 (55.9)	544 (56.9)
Non-binary	1 (0.1)	1 (0.1)
Different term	1 (0.1)	1 (0.1)
Prefer not to answer	1 (0.1)	13 (1.4)
Country of birth		597 (62.8)
Australia	108 (10.9)	218 (22.6)
Mainland China	717 (72.4)	-
Hong Kong	78 (7.9)	-
Taiwan	36 (3.6)	-
Vietnam	-	742 (77.0)
Other	52 (5.2)	4 (0.4)



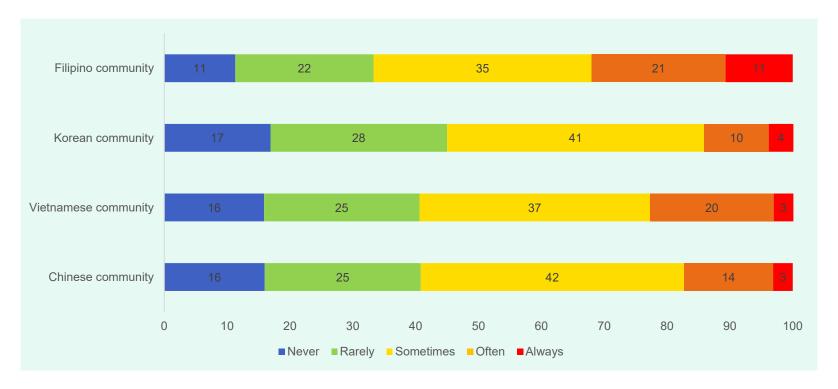


	Korean sample (N=599)	Filipino sample (N=579)
Age Mean (SD), Range	47.42 (16.06), 18-94	36.08 (10.66)
Gender		
Male	159 (26.9)	329 (57.9)
Female	428 (72.3)	228 (40.1)
Non-binary	1 (0.2)	6 (1.1)
Different term	0 (0)	1 (0.2)
Prefer not to answer	4 (0.7)	4 (0.7)
Country of birth		
Australia	7 (1.2)	300 (51.9)
Philippines	-	276 (47.8)
North Korea	3 (0.5)	-
South Korea	583 (97.3)	-
Other	6 (1.0)	2 (0.3)



Attitudes towards hepatitis B

Participants were asked whether they think they would experience stigma or discrimination if they had hepatitis B





- 64.3% of Chinese and 64.8% of Vietnamese community felt that people who have HBV should <u>not</u> be isolated by family and friends
- 32% of Chinese and 33.5% of Vietnamese community reported that if they knew that someone had HBV, they would avoid close contact with them
- 55.3% of Chinese and 52.8% of Vietnamese community felt that screening or testing for HBV is necessary for job applications because it is helpful for preventing transmission to other employees.
- 32.6% of Chinese and 41.3% of Vietnamese community would <u>not</u> have a romantic relationship with someone who has hepatitis B
- 11.6% of Chinese and 17.3% of Vietnamese community felt that people who have HBV should be ashamed of their illness



Attitudes towards people with HBV

Chinese and Vietnamese communities



- 74.4% of the Korean and 50.7% of the Filipino community felt that people who have HBV should <u>not</u> be isolated by family and friends
- 27.7% of the Korean and 38.0% of the Filipino community reported that if they knew that someone had HBV, they would avoid close contact with them
- 52.5% of the Korean and 55.5% of the Filipino community felt that screening or testing for HBV is necessary for job applications because it is helpful for preventing transmission to other employees.
- 23.6% of the Korean and 37.0% of the Filipino community would <u>not</u> have a romantic relationship with someone who has hepatitis B
- 3.2% of the Korean and 28.2% of the Filipino community felt that people who have HBV should be ashamed of their illness



Attitudes towards people with HBV

Korean and Filipino communities



Knowledge of hepatitis B causes and transmission was low among Chinese & Vietnamese



- 72.8% Chinese and 85.2% Vietnamese community knew that there is a vaccination that can prevent HBV
- Only 36.4% Chinese and 26.6% Vietnamese community were aware that there are effective pharmaceutical medicines available to treat HBV
- 77.3% Chinese and 87.8% Vietnamese community knew that HBV was a virus. However, many participants incorrectly thought that HBV is caused by:
 - a damaged/weak liver
 - drinking too much alcohol
 - contaminated food/water or utensils
- Around 2/3 both samples incorrectly thought that someone can prevent getting HBV, or giving it to others by
 - Exercising
 - Avoiding sharing eating utensils with a person who has HBV
 - Making sure food or water are not contaminated with HBV
 - Maintaining good hygiene



Knowledge of hepatitis B causes and transmission was also low among Filipino & Korean community



- 62.3% Filipino and 81.9% Korean community knew that there is a vaccination that can prevent HBV
- Only 52.4% Filipino and 58.4% Korean community were aware that HBV can only be identified by a blood test
- 61.8% Filipino and 86.3% Korean community knew that HBV was a virus. However, between 44%-55% of the participants incorrectly thought that HBV is caused by:
 - a damaged/weak liver
 - drinking too much alcohol
 - contaminated food/water or utensils
- Approx 2/3 of Korean community and more than 55% of Filipino community incorrectly thought that someone can prevent getting HBV, or giving it to others by
 - Avoiding sharing eating utensils with a person who has HBV
 - Making sure food or water are not contaminated with HBV
 - Maintaining good hygiene



Conclusion



- These findings highlight that migrant communities perceive HBV to be a significant source of stigma.
- Migrant communities hold some concerning attitudes towards HBV, with many participants:
 - Supporting screening for HBV in workplaces;
 - Reporting that they would avoid people living with HBV; and
 - Reporting that they would not have a relationship with a person who is living with HBV.
 - Nearly 1/3 of Filipino participants additionally reported that people living with HBV should be ashamed of their illness.
 - However on a positive note the majority in all samples felt that people who have HBV should not be isolated by family and friends.
- Also of concern is inconsistent knowledge about HBV among these communities
- Given that we know that misinformation about HBV is a key driver of stigma, future efforts must work
 towards improving community knowledge of the virus, including providing information and resources in
 range of languages.

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