

Fighting the social impacts of hep B

I'd like to begin by acknowledging the Traditional Owners of the land on which we meet today. I would also like to pay my respects to Elders past and present.



vh2024



The Perspective of WHO

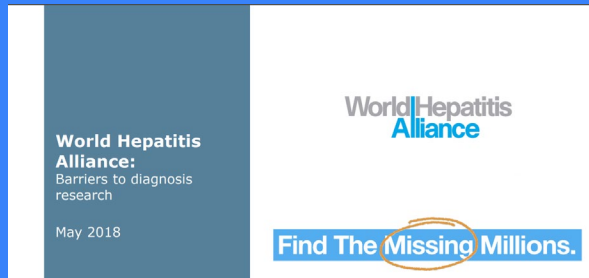
“...It was also agreed that the stigmatization and discrimination continue to act as barriers to effective hepatitis prevention and care. Only through sustained collective efforts can discrimination be addressed and prevention, diagnosis and treatment be successful.”



vh2024



Research Findings



“There are four main barriers hindering the diagnosis of both hepatitis B and C:

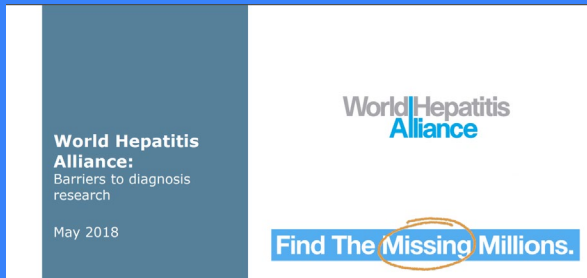
- Lack of public knowledge of the diseases
- Lack of knowledge amongst health care professionals
- Lack of easily accessible testing
- Stigma and discrimination”



vh2024



Research Findings



- This barrier has greater significance in countries in the Western Pacific
- It is more likely to act as a barrier to the diagnosis of hepatitis B in low income countries; however in relation to hepatitis C this is more likely to act as a barrier in high income countries
- In relation to hepatitis C, stigma and discrimination is experienced more keenly by people who inject drugs
- Survey participants feel that raising awareness, public health promotion and anti-stigma campaigns could be undertaken to overcome this barrier



vh2024



Research Findings

Hepatitis B

Stigma and discrimination is the only main barrier to diagnosis of hepatitis B that is felt more strongly in Western Pacific countries

Region (World Health Organization)

Overall	Africa	Americas	Europe	Eastern Mediterranean	Western Pacific	South-East Asia
54%	61%	38%	54%	47%	72%	35%

Low base of 20 for South-East Asia - data should be treated as indicative

Americas

Lack of public knowledge – 81%

Eastern Mediterranean

Lack of public knowledge – 78%

Western Pacific

Stigma and discrimination – 72%

Africa

Lack of public knowledge

Europe

Lack of public knowledge

South-East Asia

Lack of public knowledge



vh2024



Research Findings

Although lack of public knowledge is the main barrier to diagnosis, stigma and discrimination affect a broader range of people

Minority ethnic communities: Stigma and discrimination (34%)

People living with HIV: Stigma and discrimination (36%)

Migrant communities: Stigma and discrimination (45%)

People who inject drugs: Stigma and discrimination (39%)

Men who have sex with men: Stigma and discrimination (36%)

Prisoners: Lack of easily accessible testing (43%)

Underprivileged areas: Lack of easily accessible testing (42%)

Rural communities: Lack of easily accessible testing (48%)

Indigenous populations: Lack of easily accessible testing and

Diagnostic tests not approved for use in the country (33%)

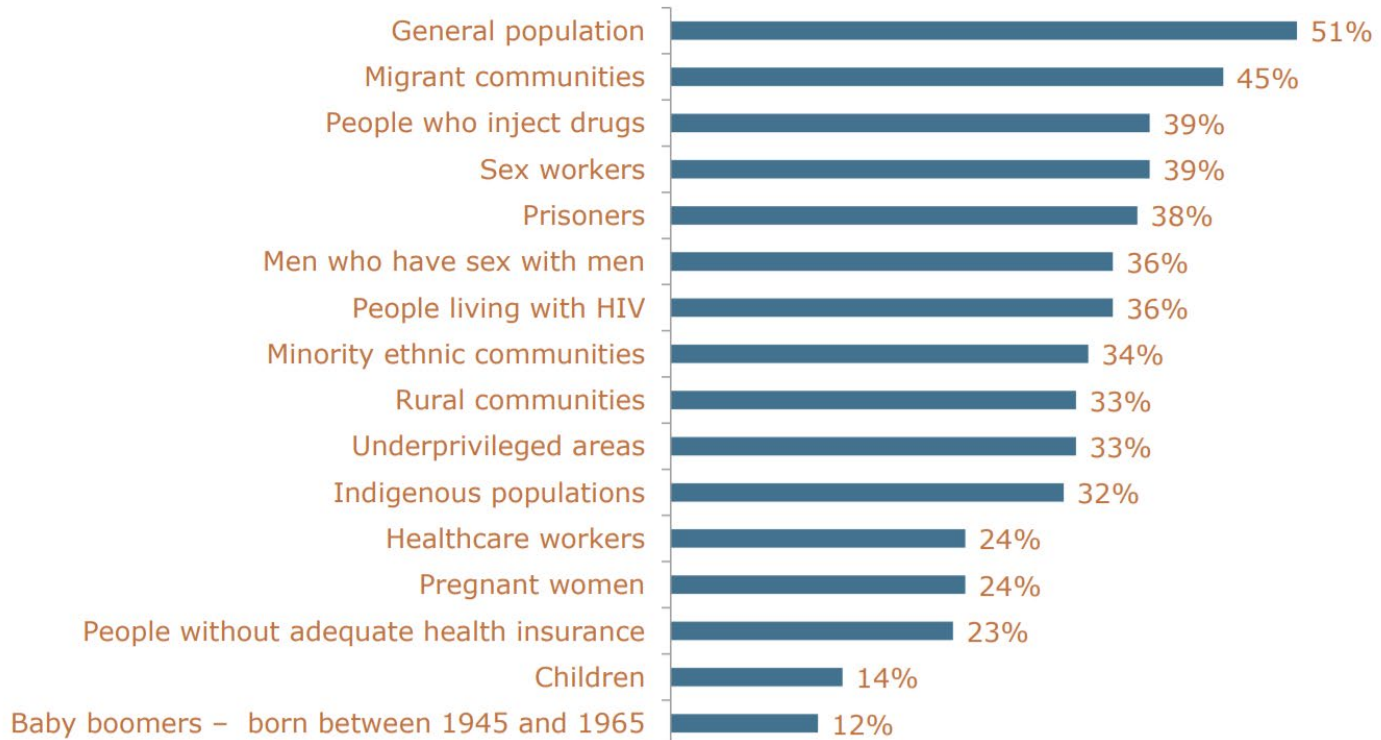


vh2024



Research Findings

Migrant communities may avoid being tested for hepatitis B because they are more likely to experience **stigma and discrimination**



vh2024



Research Findings

% ranking **stigma and discrimination** as the main barrier to diagnosis of hepatitis B

Region (World Health Organization)

Overall	Africa	Americas	Europe	Western Pacific
16%	4%	17%	17%	38%

Sub groups with base sizes of lower than 30 are not shown



vh2024



Research Findings

Hepatitis C

Stigma and discrimination as a barrier to diagnosis of hepatitis C

Region (World Health Organization)

Overall	Africa	Americas	Europe	Eastern Mediterranean	Western Pacific	South-East Asia
61%	62%	59%	65%	44%	74%	48%

Low base of 20 for South-East Asia - data should be treated as indicative



vh2024



Research Findings

Showing a similar impact to hepatitis B, stigma and discrimination is the barrier affecting the broadest range of people

People who inject drugs: Stigma and discrimination (52%)

Prisoners: Stigma and discrimination and No laboratory capacity within the country (43%)

People living with HIV: Stigma and discrimination (36%)

Sex workers: Stigma and discrimination (36%)

Migrant communities: Stigma and discrimination (35%)

Rural communities: Lack of easily accessible testing (48%)

Underprivileged areas: Lack of easily accessible testing (41%)

Children: Lack of trained health care professionals (21%)

Pregnant women: Lack of trained health care professionals (21%)

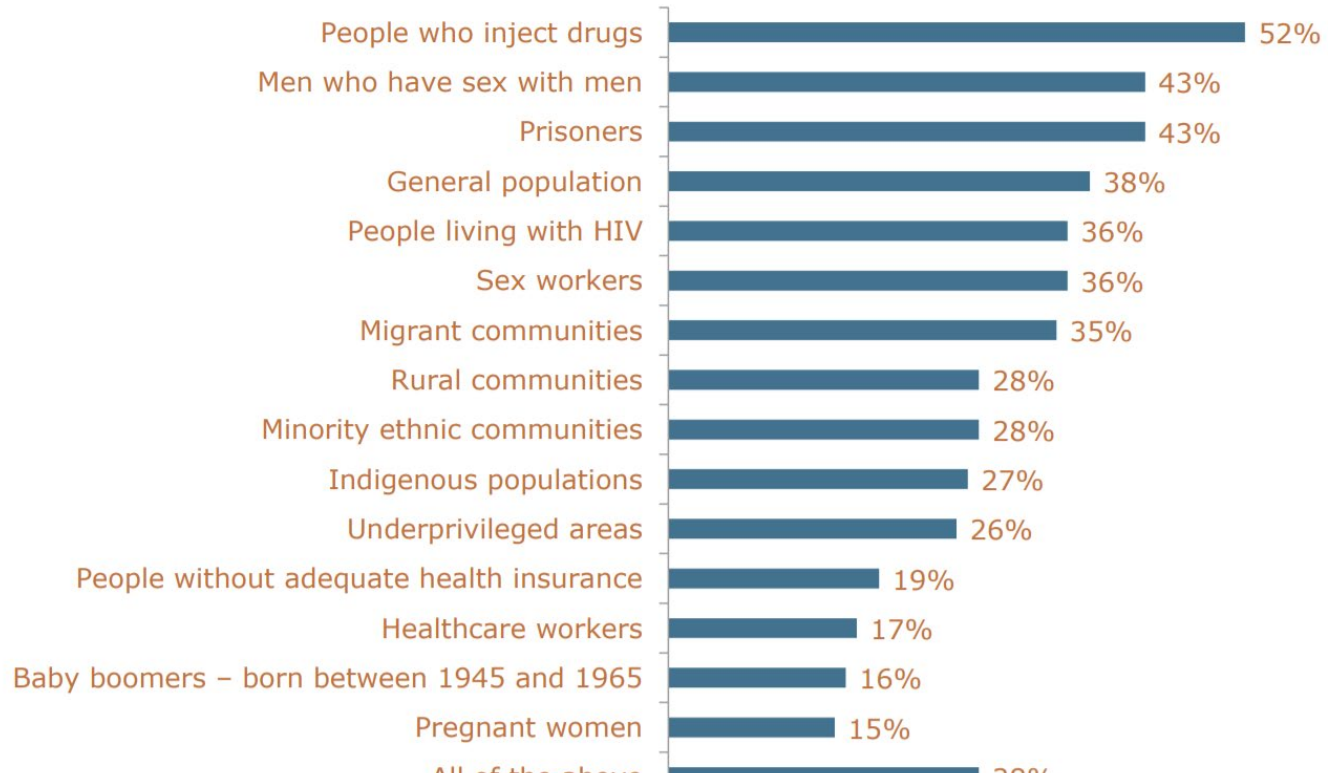


vh2024



Research Findings

In contrast to hepatitis B, **stigma and discrimination** towards hepatitis C has the greatest impact on people who inject drugs



vh2024



Research Findings

% ranking **stigma and discrimination** as the main barrier to diagnosis of hepatitis C

Region (World Health Organization)

Overall	Africa	Americas	Europe	Western Pacific
20%	6%	21%	23%	51%

Sub groups with base sizes of lower than 30 are not shown



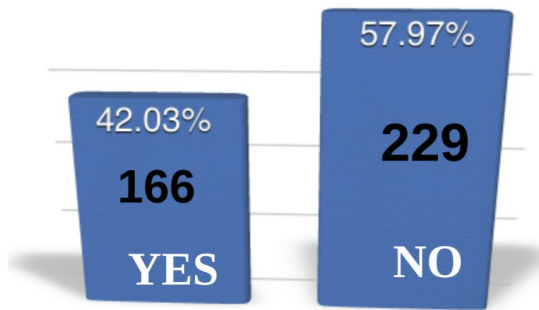
vh2024



Stigma and Discrimination in Philippines

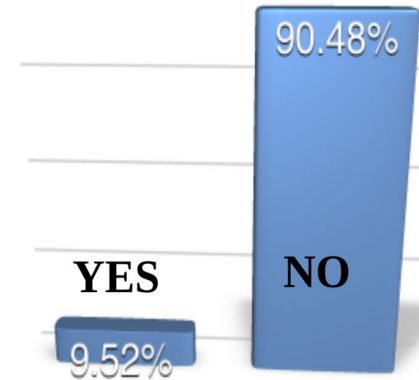
Experienced pre-employment rejection due to viral hepatitis

No. of respondents: 395



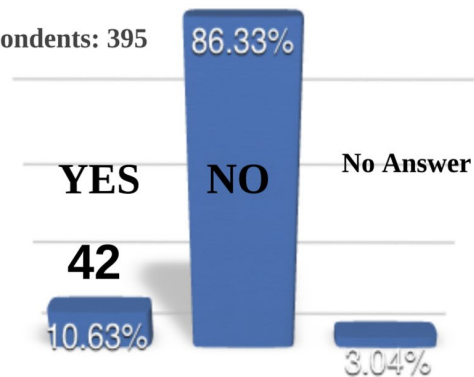
Filed a complaint after termination?

From the experience of the 42 patients terminated from employment.



Experienced employment termination due to viral hepatitis

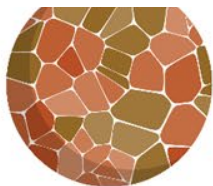
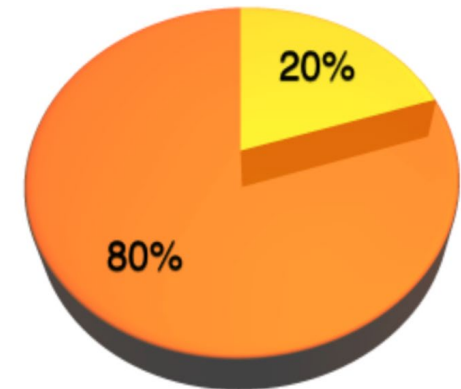
No. of respondents: 395



In Medication?

No. of respondents: 395

80 YES 20%
315 NO 80%



vh2024



Stigma and Discrimination in Philippines

“The Department of Labor and Employment (DOLE) in 2010 already came out with a set of guidelines for the implementation of a workplace policy and program on Hepatitis B. But the government should go beyond a department order by crafting a law that will prevent discrimination against Hepatitis B patients.”



vh2024



Stigma and Discrimination in Vietnam

“Among 298 enrolled patients, 4.8% experienced blame/judgement, 10.2% perceived shame, 48.5% felt discriminated in healthcare facilities, and 90.6% disclosed their health status with spouses/partners. Factors associated with lower odds of CHB-related stigma/discrimination included living with spouses/partners, old age, being employed, and the existence of comorbidities was linked with higher odds of stigma. Anti-stigma programs should target those who are younger and have comorbidities. This could be done by community-based interventions which focus on inaccurate beliefs about viral hepatitis.”

-Thieu Van Le, Social Determinants of Stigma and Discrimination in Vietnamese Patients with Chronic Hepatitis B



vh2024



Stigma and Discrimination in China

Inno went to the factories, helped wipe off the job screening. A hotline was set to answer workers' questions about hepatitis, predominantly B. The model has been extended to the other communities.

Total	Job Discrimination	Relationship	Schools	Others
3533	1892	940	517	184
100%	53.55%	26.6%	14.63%	5.2%



vh2024



Stigma and Discrimination in China

- *Hepatitis Table

- *Suicides

- *Exchange Students

- *Outbreak

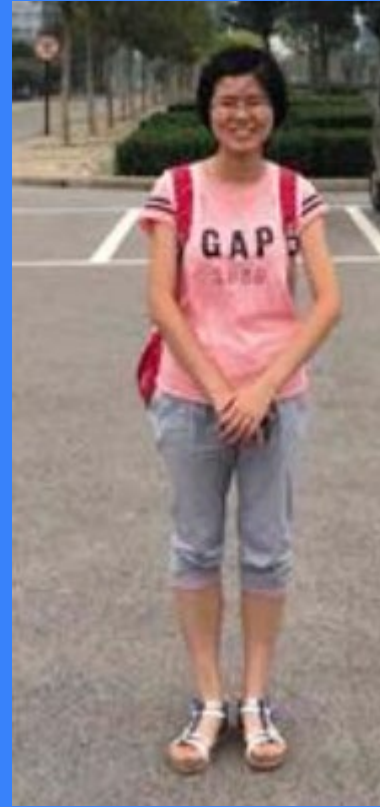
- *A TCM Market of AUD 24mil



vh2024



Stigma and Discrimination in China



vh2024



How we work

Digital LRN



vh2024



Where are we working?



vh2024



Cases

编号	用户	留言内容
1	丽丽	当看到这个帖子的视频，我感动的哭了。是的，上学被人歧视；出来就业还是因为乙肝病毒携带者而错过了很多份比较不错的工作；步入家庭，被老公及婆家的亲戚知道我是乙肝病毒携带者被嫌弃，往昔的日子，过得真的很累！现在找工作好点了，体检表不会写乙肝携带者，比较好找点。
2	六月	曾经因为乙肝受到用人单位和亲戚的歧视 防备、导致好几年我都在自卑和抑郁中度过。现在得看到乙肝这两个字才能想起自己也是乙肝患者
3	猫爪	我是乙肝大三阳，从小到大受尽了歧视，上学的时候，没有人愿意跟我一个宿舍，也不愿意和我说话，毕业后，尽管国家有规定，不准就业歧视，但是执行的单位寥寥，工作一波三折。大学毕业，也只能窝在小工厂里打工，因为不用开具健康证明，现在已经结婚生子了，但是却不能母乳喂养....这是我永远的痛，好在孩子是健康的，老公跟我在一起这么多年，也是健康的，这充分证明了一件事，乙肝病毒是不会通过日常生活传播的，大家不要再畏之如虎了！
4	奋斗	其实我们早就应该呼吁此事！政府也应该订一些规定。我是2005年毕业后出来打工的，进一些大的好的公司都要求检查乙肝。有的话就不让进公司。心里面很难受对内心打击很大。我2010年结婚的已有一小孩1岁多了妻子知道我有乙肝硬要和我离婚。我当时有死的就心就有了啊。现在还单着一直不敢对别人说我为什么离婚的！
5	半月亮	我，大学学的是药品食品检验，毕业后因为乙肝病毒携带，无法干本专业只能选择大众化的工作，亲戚朋友都感叹我白读书了。父母和我也只是微微一笑，还能说什么。虽然有文件说乙肝病毒携带可以做食品行业，可事实是什么行业都得隐瞒。找到一个爱我的老公，宝宝已经两岁，有个幸福的家。可工作还是有很多遗憾。真希望社会能没有歧视。
6	Joyce	我也是，更惨的是有的专业根本就不招乙肝携带者，只好去读了自己不喜欢的专业，导致毕业以后也找不到适合自己的工作
7	傻丫头	我也是乙肝携带者，我的妈妈也有。2004年在入学的时候被查出的，当时不了解，听到这噩耗时，以为是绝症，哭得昏天暗地的。接下来的遭遇：在学校被隔离了一段时间、被男朋友知晓提出分手、找工作曾被拒绝，无奈下（心虚）....后来就业一直叫人代替抽血，最担心的是面对每年单位要求的体检，生怕把我给辞了、更狠心的是：重来没给我的宝宝吃过母乳，觉得愧对于他呀。现在我的生活很幸福，宝宝很健康，和老公生活10余年了，他也没有被传染。我呼吁全面禁止乙肝歧视！
8	深深深々々	我也是一名乙肝病毒携带者，我从读书就开始被人歧视，到了21世纪以为社会进步了歧视会少了，结果我找工作被歧视、找男朋友男方家长极度歧视和反对（男方家长还是名医务人员）。经历了这些事情后到现在我都怕被人知道我是乙肝病毒携带者。
9	a' 丝丝 袜美腿加我Q	我十四岁那年，初中毕业，在升学的时候查出了乙肝，后来被迫退学，从此结束了我的学业生涯，就此踏入社会，在过去的十年工作中，我每到一个地方，先考虑的如何解决健康证问题。。。所以我也用楼上的那句话，请你们不要有色眼光来看待乙肝患者，他们需要社会的关爱与理解，也希望教育部门多多普及这方面的知识，帮助患者也帮助那些无知的人。

Among
3533
cases
we got

Cases

编号	用户	留言内容
1	鲍会	我也是一名乙肝携带者，找工作的体检工厂不要，现在我已经不在害怕，宝宝也六岁了，没有乙肝病毒老公也没有。我就怀疑当初是谁说会传染的。他妈的害了多少人
2	宅男	我就因为在广东东莞有一次企业招聘体检时查出我是一位乙肝携带者。被企业拒绝聘用，从那以后我就再也不会进厂上班，从此我选择了建筑行业，因为在建筑行业找不会再被筛查歧视。经过几年的发展已经注册了自己的公司投标我的建筑专业项目，做了自己的老板。中国之大不会没有容我之处。让歧视乙肝的企业关门大吉去吧！
3	风雨无阻	现在很多公司入职时都要做体检的，主要还是检查乙肝，检查出有乙肝病毒就不能进入公司工作，这要明就是对乙肝的歧视，什么时候才能让乙肝病毒携带者，不受歧视，正常的生活和工作？
4	十一、陌路。	我也是因为这个病，本来可以有更多的晋升机会的，一次一次的变成泡沫，我怕了，真的怕了，怕别人看我时那异样的眼光，哭过，也恨过。。
5	郭家源	2013年毕业，第一份工作，第一天上班前公司人事李成要求自己去体检乙肝三项。第一天上班带着体检报告上班。
6	天涯居士	我从小是乙肝携带者，2007年大学毕业时候本来有一个很好的工作，但是晋升关键时刻，因为是乙肝携带者被公司以此理由辞退。从此以后：就业、找女朋友、生活都面临各种压力，这些年整个人的精神都发生了巨大变化。晚上睡觉总梦见体检，现实生活中，很多公司都不要我们这类人。
7	哮喘哮喘 万事如意	我也是乙肝携带者，平时生活当中根本就不敢告诉身边的朋友，怕受到歧视！我在深圳这边，当初找工作的时候还看到富士康都不招乙肝的！看到这个就更不敢让朋友知道了！支持雷闯！谢谢雷闯！
8	安好	能搞个平台让我们共同维权吗？我曾经去过几家电子厂没人要因为我是小三阳
9	KK	给你赞一个，我也是乙肝携带者，也因为这样当初找的一份工作由于说要到他们制定的社区验血查看是否乙肝携带者，如果是那么将不能去那里工作，后来是我姐姐代我去抽的血，就这样我进入那里工作了2年之后自己辞职。。。。
10	木夕	我乙肝大三阳者，在2007年是在酒店工作一进去时没说要只健康证，做了半年左右就要办健康证，我知道自己本是不会过关的，为了那份工作我叫身边的朋友去抽血了，但没过关，也搞过假健康证，但也没过关，到最后没办法不干了，同事也问为什么辞工，自己的苦水无法倒，想想那时只是不想被人歧视，现在好了，现在工作都不用办健康证，感谢雷闯的付出，如果是自己有机会我真的想加入他的这个队伍中……
11	地狱来客	乙肝携带者 去几家公司应聘因体检出乙肝被拒之门外 为什么要这对待人 难过 我读书的时候发现的当时都不知道怎么办了，后来我就退学了，出去打工也没人要，我很会做菜家厨师也是因为这个也没干成，后来实再是为了生活没办法了就去工地上打杂，那里没人嫌弃我，我也很珍惜那样的环境第二年我就是个小包工头了，现在我也算得上是有几百万身家的人了，有这个病的朋友们只要你们不放弃生活一定会好起来的，证明给那些歧视我们的人看看我们一点也不弱于他们。

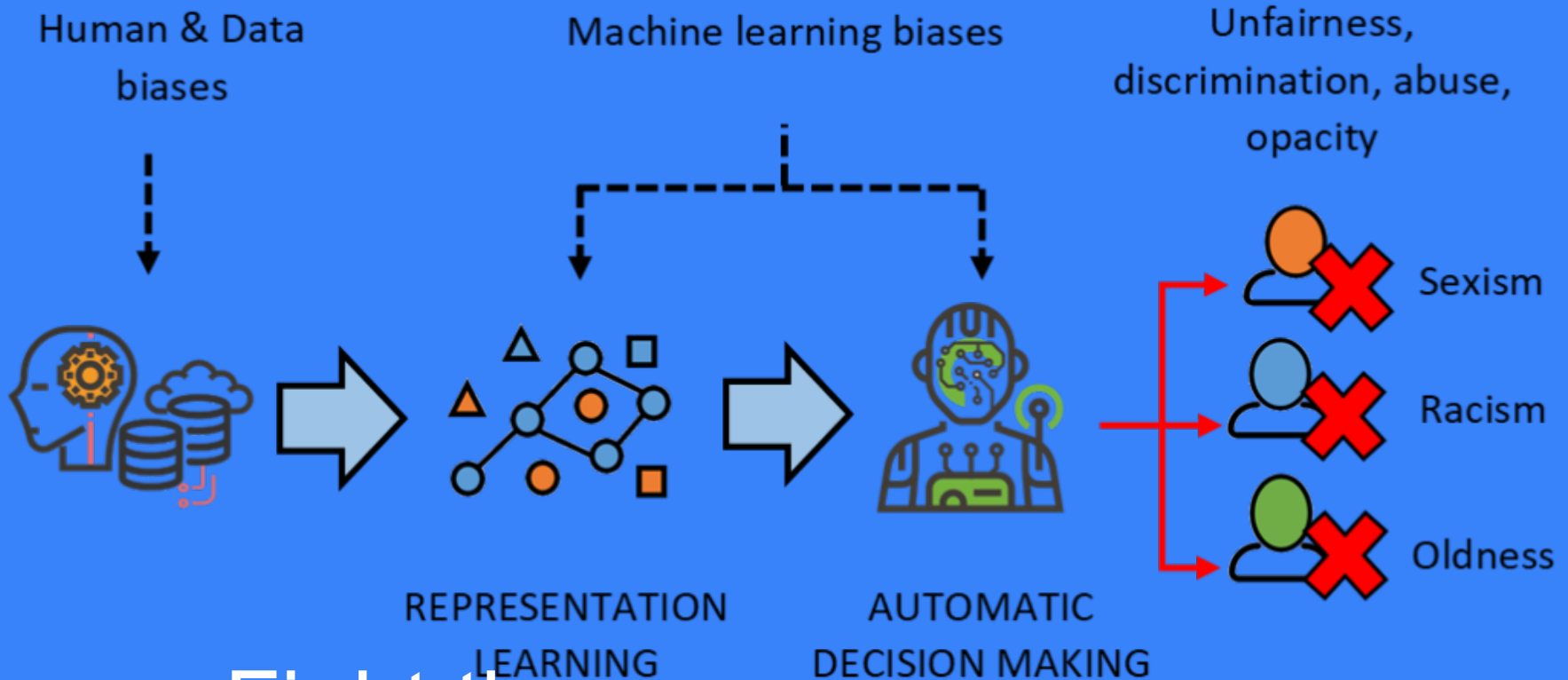
Among
3533
cases
we got



vh2024



Sth new in Asia-algorithmic discrimination



Fight the sources



vh2024



Solutions

- *A holistic approach to tackle the discrimination and stigma
- *Comfortable ways to “mingle” with policy makers
- *Balancing the nuance between public fear and awareness

But what is more important...



vh2024



Solutions

- *A holistic approach to tackle discrimination and stigma
- *Comfortable ways to engage with policy makers
- *Balancing the need between public fear and awareness

But what is more important...



vh2024





vh2024

