Culture, community, and care: the key principles for connecting with hepatitis B-affected communities

CULTURE IS NOT A BARRIER; IT IS THE KEY TO CONNECTION

Background

Australia is not on track to meet the WHO targets for elimination of hepatitis B by 2030. As health systems orient themselves from a focus on hepatitis C and towards hepatitis B, significant work is required to develop the workforce to be effective in working appropriately with the communities most affected by hepatitis B.

These communities include cultures and language as different from one another as Tongan and Togolese, or Mongolian and Indonesian. They often face myriad barriers including language, differing concepts of health, cultural norms, community and societal stigma, difficulty navigating the Australian healthcare system, and misunderstandings around hepatitis B from transmission to testing to treatment. These barriers frequently lead to lower engagement with the health system and poorer health outcomes, and are also often poorly misunderstood by those working in the hepatitis B sector.

Analysis

Hepatitis NSW has been working in this space since 2016, and has developed extensive networks, expertise, understanding, and approaches. Hepatitis NSW has worked in partnership and collaboration with communities, community organisations, health, and research bodies to empower communities to engage with hepatitis B healthcare and has delivered more than 200 outreach events with communities including Korean, Vietnamese, Chinese, Indian, Tongan, and Filipino and reached over 11,000 members of community.

Results

Through many years of work Hepatitis NSW has developed a set of core principles that underpin working effectively and appropriately with affected communities. This includes:

No Google Translate!

Effective health communication requires more than word-for-word—it must be culturally adapted to ensure relevance and resonance. This involves using clear, straightforward language and avoiding clinical or technical terminology that may create confusion or distance. Materials should reflect the familiar, everyday language used within the community, making them approachable and relatable. When resources align with how people naturally communicate and understand health, they are not only easier to engage with but also more likely to build trust and encourage action. Don’t use Google Translate; utilise community communicators.

Some of Hepatitis NSW’s 18 multicultural and multilingual staff

Multilingual? Multicultural!

A multilingual staff member may know how to say “hepatitis B” in another language —but a multicultural staff member understands the stigma, fears, and cultural sensitivities that surround it. They can explain the condition in a way that’s not just accurate, but also respectful and reassuring, helping people feel safe rather than ashamed.

Listen to their 觀點

Effective care starts with listening. When we acknowledge, not judge, and aim to connect, not correct, we create space for trust. Respecting cultural views on health, illness, and healing allows people to feel seen, valued, and safe to engage in their own care.

Education session in Chinese, Meadowbank : Willis Ng, Project Officer

Let’s go to their spaces

Trust happens when people hear information in a language they understand, in a place where they feel safe. Reaching communities in their own spaces—cultural centres, local events, places of worship—makes it easier for them to listen, ask questions, and engage. It’s not just about giving information, it’s about building access, connection, and confidence.

Culturally appropriate work is ESSENTIAL

Sustained commitment to these principles is key to Australia’s Hepatitis B elimination progress

Application

By centring these principles in our work, Hepatitis NSW has achieved significant outcomes, including the rollout of hepatitis B point-of-care testing for migrant communities in NSW, development of translated resources, the employment of 19 dedicated hepatitis B staff, and playing a leading role in the hepatitis B response in NSW. Moving forward, a continued commitment to these principles will be critical in addressing existing barriers, strengthening community engagement, and advancing Australia’s progress toward hepatitis B elimination.

Disclosure of Interest Statement

Hepatitis NSW is funded by the NSW Ministry of Health. Hepatitis NSW has received funding from Gilead Sciences, WentWest PHN, Central and Eastern Sydney PHN, and South Eastern Sydney LHD for the delivery of various hepatitis B projects.

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