

HOW DO MOTHERS WITH CHRONIC HEPATITIS B UNDERSTAND AND EXPERIENCE THE PREVENTION OF MOTHER TO CHILD TRANSMISSION INTERVENTIONS IN VICTORIA?

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Background: Mother-to-child transmission (MTCT) of hepatitis B can be prevented with vaccination, monitoring and treatment of women with high viral loads, however MTCT continues to occur both in Australia and globally. This qualitative research aimed to understand how mothers with chronic hepatitis B (CHB) understand and experience interventions seeking to prevent MTCT in Victoria.

Methods: Semi-structured interviews were conducted with mothers with CHB who gave birth in Victoria in the previous 10 years. Participants were recruited through purposive and snowballing sampling and interviews explored CHB related care and management of mothers and their infants and identified service delivery barriers in antenatal and postnatal care. The consolidated criteria for reporting qualitative research (COREQ) framework was utilised and data was thematically analysed using NVivo software. This study was co-designed with mothers with CHB through a community Advisory Group.

Results: Although most women understood the purpose of the hepatitis B vaccination, there were significant gaps in information provided to mothers and their subsequent understanding of vaccination, breastfeeding with CHB, their own hepatitis B status and post vaccination testing. There was notable fear and worry associated with hepatitis B transmission, with emotional support for mothers identified as a major gap in service delivery. Additionally, some women experienced stigma and discrimination due to their hepatitis B and refugee status.

Conclusion: This is the first Australian study to explore how mothers with CHB understand and experience prevention of MTCT. This study demonstrated the importance of improving the experiences of women with CHB and the identification of gaps in the health care services provision. This study can assist with developing evidence-based interventions to improve health care service delivery for mothers with CHB and their infants and thereby reduce possible CHB transmission and other negative outcomes including stigma and discrimination.

Disclosure of Interest Statement:

The authors have no conflicts of interest to declare.