

# Hepatitis B knowledge, stigma and mistrust in healthcare among people of Filipino ethnicity in Australia: Implications for culturally responsive prevention

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Leilani Tallulah Knight, "U gonna listen now?", 2021

# Why the Filipino community?

- In Australia, around **70% of people living with chronic hepatitis B were born overseas**
- Approximately **4% of Australians living with chronic hepatitis B were born in the Philippines.**
- The Philippines remains **highly endemic** with around **1 in 10 people** estimated to be living with chronic hepatitis B.
- Roughly **394,000 Filipino-born residents** (Australia fifth largest migrant community)
- Very little Australian research focused on hepatitis B among people of Filipino ethnicity.
- Understanding hepatitis B knowledge, stigma and trust in healthcare among Filipino communities is essential for developing culturally responsive prevention and care strategies.

# Background and evidence gap

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## **Previous research has shown that:**

### **Knowledge**

- Hepatitis B knowledge is often limited
- Misconceptions about hepatitis B remain common

### **Stigma and healthcare engagement**

- Hepatitis B-related stigma may discourage testing, disclosure and care
- Language barriers, lower health literacy and mistrust in Western medicine may further reduce access to prevention and care.

### **Evidence gap**

- Most Australian hepatitis B research focusses on Chinese and Vietnamese communities.

# Research questions

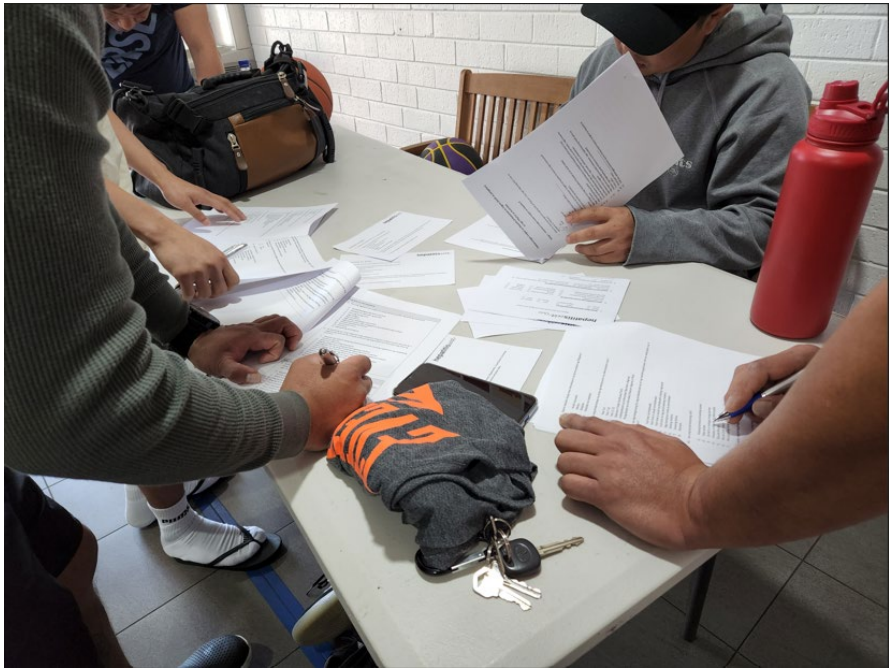
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- **Very little is known about hepatitis B knowledge, stigma and mistrust among people of Filipino ethnicity living in Australia, particularly differences between Australia-born and Philippines-born**
- **Aim of this study is to assess the following:**
  - What is the level of hepatitis B **knowledge** among people of Filipino ethnicity living in Australia?
  - What **attitudes** do people of Filipino ethnicity hold towards people living with hepatitis B?
  - What is the level of **mistrust** in Western medicine?
  - Do hepatitis B knowledge, attitudes and mistrust differ between people born in Australia and those born in the Philippines?

# Methods

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- Design: Cross-sectional survey of Filipino adults living in Australia  
Part of a broader study of hepatitis B knowledge, stigma amongst CALD communities
- Participants: 576 adults ( $\geq 18$  years)  
Filipino-born or with  $\geq 1$  Filipino-born parent or grandparent
- Recruitment: Viral hepatitis organisations, Multicultural health services  
Filipino community organisations/events, Social media
- Survey: Aug 2022 – Mar 2023  
English or Tagalog, online or paper (15–20 minutes)
- Measures: Hepatitis B knowledge  
Attitudes towards people living with hepatitis B  
Mistrust in Western medicine
- Analysis: Australia-born vs Philippines-born (Mann–Whitney U and  $\chi^2$  tests)



# Participant Characteristics

| Demographic Characteristic            | n (%)       |
|---------------------------------------|-------------|
| Born in Australia                     | 300 (51.9%) |
| Born in the Philippines               | 276 (47.8%) |
| Mean age (SD), years                  | 36.0 (10.6) |
| Male                                  | 329 (57.9%) |
| Married                               | 428 (75.8%) |
| Full-time employed                    | 397 (70.4%) |
| Proficient/very proficient in English | 477 (84.7%) |

# Participant Characteristics: Hepatitis B

| Characteristic                                  | n (%)       |
|-------------------------------------------------|-------------|
| History of hepatitis B testing                  | 362 (62.5%) |
| Hepatitis B vaccination                         | 422 (72.9%) |
| Personally knew someone living with hepatitis B | 212 (37.1%) |
| Self-reported living with hepatitis B           | 32 (5.5%)   |

# Hepatitis B Knowledge

- Significant gaps in hepatitis B knowledge were observed across the sample (N = 576)

| Knowledge item                                                        | Correct (%) |
|-----------------------------------------------------------------------|-------------|
| Hepatitis B can be transmitted through blood-to-blood contact         | 68.4%       |
| There is a vaccine that can prevent hepatitis B                       | 62.3%       |
| Hepatitis B can only be identified by a blood test                    | 52.4%       |
| Hepatitis B can be transmitted by someone who looks and feels healthy | 37.8%       |

## Median Knowledge Score

| Australia-born | Philippines-born | <i>p</i> |
|----------------|------------------|----------|
| 10.5           | 12.0             | <0.001   |

# Common Knowledge Misconceptions

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| Common misconception                                         | Incorrect (%) |
|--------------------------------------------------------------|---------------|
| Hepatitis B is caused by a damaged/weak liver                | <b>78.7%</b>  |
| Hepatitis B is caused by drinking too much alcohol           | <b>77.7%</b>  |
| Hepatitis B is caused by contaminated food/water or utensils | <b>76.7%</b>  |
| Hepatitis B is caused by poor sanitation or hygiene          | <b>76.3%</b>  |

# Key knowledge findings

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- Overall hepatitis B knowledge was **moderate**.
- Australia-born participants had significantly lower knowledge scores than Philippines-born participants.
- Knowledge was highest for **blood-borne transmission** and **vaccination**, but **misconceptions about how it is transmitted**.
- Understanding of **asymptomatic transmission** and **diagnosis** was considerably lower.

# Attitudes Towards People Living with Hepatitis B

| Statement                                                        | Agreed (%) |
|------------------------------------------------------------------|------------|
| People with hepatitis B should be tested before starting a job   | 55.9%      |
| I would avoid close contact with someone living with hepatitis B | 38.0%      |
| People with hepatitis B should be ashamed                        | 28.1%      |
| People with hepatitis B deserve their illness                    | 28.0%      |

## Median Attitude Score

| Australia-born | Philippines-born | <i>p</i> |
|----------------|------------------|----------|
| 20             | 17               | <0.001   |

# Key attitude findings

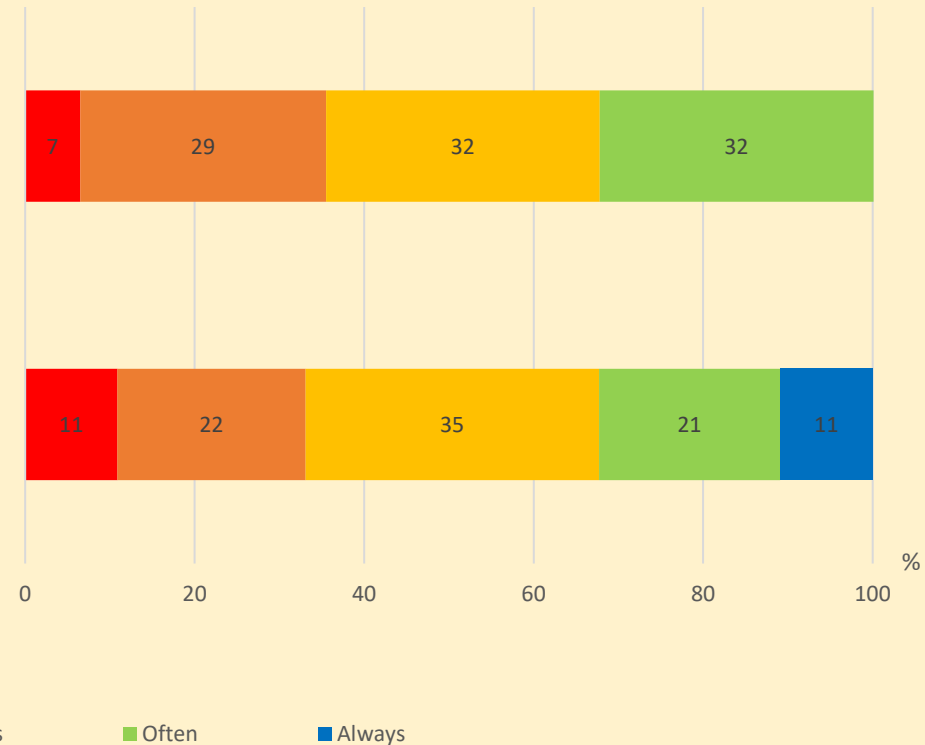
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- Negative attitudes towards people living with hepatitis B remained common.
- Over half supported hepatitis B testing before employment.
- **Australia-born participants reported significantly more negative attitudes than Philippines-born participants.**
- Findings suggest ongoing hepatitis B stigma within the Filipino community.

# Attitudes towards hepatitis B

If you have HBV, have you experienced any stigma or discrimination in relation to your HBV? (n=32)

Imagine that you had HBV, do you think you would experience stigma or discrimination in relation to your HBV? (n=547)



# Experience vs expectation of stigma

| Finding                                                                  | %   |
|--------------------------------------------------------------------------|-----|
| Expected to experience stigma if diagnosed                               | 89% |
| People living with hepatitis B who had experienced stigma/discrimination | 93% |
| Often experienced stigma or discrimination                               | 32% |

- Anticipated stigma was almost universal.
- Nearly all participants living with hepatitis B reported experiencing stigma or discrimination.
- These findings highlight the need for stigma reduction alongside hepatitis B education.

# Mistrust in Western medicine

| Selected Mistrust in Western medicine items                                    | Agreed (%)  |
|--------------------------------------------------------------------------------|-------------|
| I am suspicious of information provided by English-speaking healthcare workers | 176 (31.4%) |
| Pharmaceutical medicines have more side effects than alternative therapies     | 195 (34.7%) |
| Doctors act as if they cannot be trusted because of cultural background        | 176 (31.5%) |
| Unwilling to discuss health in detail with English-speaking healthcare workers | 173 (30.8%) |

## Median Mistrust Score

| Australia-born | Philippines-born | <i>p</i> |
|----------------|------------------|----------|
| 13             | 10               | <0.001   |

# Key Mistrust Findings

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- **Australia-born participants reported significantly higher mistrust in Western medicine.**
- Around one-third expressed concerns about healthcare providers or Western medicines
- Mistrust may present an additional barrier to hepatitis B testing, vaccination and engagement with care

# Summary of Key Findings

| Finding                    | Interpretation                             |
|----------------------------|--------------------------------------------|
| Lower knowledge            | Education required (around misconceptions) |
| Persistent stigma          | May discourage testing and disclosure      |
| Higher mistrust            | Could reduce engagement with care          |
| Australia-born differences | Tailored interventions are needed          |

- Despite relatively high rates of hepatitis B testing and vaccination, important knowledge gaps, persistent stigma and mistrust in healthcare remain within the Filipino community
- **Australia-born participants consistently demonstrating poorer** outcomes than those born in the Philippines.

# Acknowledgements

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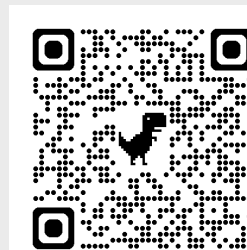
Disclosures: None to report

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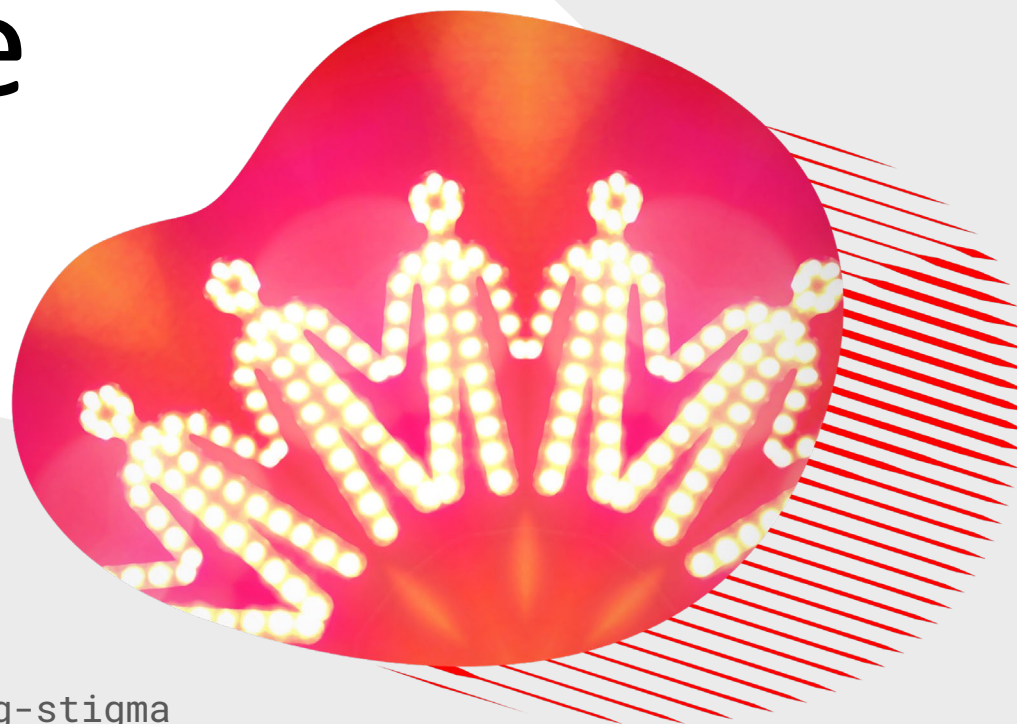
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# Tackling Stigma Conference



UNSW Sydney  
November 2026



Registrations are now open

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