

Hepatitis B knowledge, healthcare engagement and stigma among people living with hepatitis B from the Chinese and Vietnamese community in Australia: a cross-sectional research

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Background:

Over 70% of people living with hepatitis B (PLHB) in Australia were born overseas, mostly from Northeast and Southeast Asia. This research aimed to explore hepatitis B knowledge, attitudes, and health care engagement among Chinese and Vietnamese PLHB in Australia.

Methods:

A cross-sectional survey was conducted among PLHB of Chinese or Vietnamese ethnicity in Queensland. Paper surveys were available in English, simplified/traditional Chinese, or Vietnamese. The survey included diagnosis history, 14 true/false knowledge items (scored 0–14), healthcare attitudes and engagement, and stigma experiences. T-tests and Chi-square tests were used for comparisons.

Results:

A total of 105 participants were recruited (65 Chinese and 40 Vietnamese). Most were female (56.2%), heterosexual (59.0%), born overseas (98.1%), and had lived in Australia for over 10 years (68.6%) and were Australian citizens (62.9%).

Chinese PLHB had a slightly higher total knowledge score ($M=11.65$, $SD=2.53$) than Vietnamese participants ($M=10.58$, $SD=3.15$), $t(103)=1.92$, $p=0.058$. Mean item scores were high overall ($M=0.87$ vs 0.85 , $t(103)=0.85$, $p=0.40$). with a significant group difference on social contact transmission ($p<0.001$).

More Chinese PLHB were diagnosed ≥ 15 years (78.1% vs. 64.5%), while recent diagnoses were more common among Vietnamese participants (35.5% vs. 1.6%), $\chi^2(4)=25.85$, $p<0.001$. Most Chinese participants were diagnosed in China (82.8%), and most Vietnamese in Australia (75.0%), $\chi^2(3)=66.55$, $p<0.001$. Testing was commonly prompted by advice from a doctor for Chinese PLHB (61.5%) and via routine checks for Vietnamese PLHB (52.5%). Vietnamese participants were more likely to have had check-ups every 1–6 months (75.0% vs. 47.7%), $\chi^2(4)=10.50$, $p=0.033$. Chinese participants more commonly reported B-related stigma in the past year (21.3% vs. 2.6%), $\chi^2(1)=6.73$, $p=0.009$.

Conclusion:

This study highlights generally high levels of hepatitis B knowledge and healthcare engagement among Chinese and Vietnamese PLHB in Australia. Group-specific differences highlight the value of targeted, culturally tailored health promotion for subgroups of PLHB from Asian backgrounds.

Disclosure of Interest Statement:

Nothing to disclose