

Increasing capacity and capability of GPs to provide Hepatitis B testing and follow-up management for Chinese and Vietnamese community members in Brisbane, Australia

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Background:

Chronic hepatitis B (CHB) remains a serious public health challenge within some subpopulations. While constituting approximately 5% of the Australian population, people born in the Asia-Pacific make up over 50% of the population living with CHB, the largest proportions of whom are Chinese and Vietnamese migrants. Strategies for hepatitis B have been limited primarily to universal infant vaccination, resulting in poor national hepatitis B outcomes. Hepatitis B patients face many barriers to treatment access and adherence, including unique barriers experienced by migrants. This project aimed to identify barriers and facilitators from the perspectives of those within the Chinese and Vietnamese communities.

Methods:

Data were collected by trained researchers in face-to-face or phone interviews using semi-structured interviews. Questions explored knowledge, attitudes and practices related to HBV screening and management, clinical pathways and feasible strategies for increasing access to HBV care. Participants (N=36) included healthcare workers (nurses, doctors; n = 11) from targeted GP clinics, bilingual community/cultural health workers (n = 5) and members from Chinese (n = 10) and Vietnamese communities (n = 10).

Results:

Thematic analysis of these data revealed important differences between perceived barriers to healthcare relating to HBV testing and management between healthcare workers and community members. Community members reported barriers regarding language, cost and viewing the GP as the 'expert' who should solely suggest care or testing relating to HBV. Conversely the healthcare workers reported barriers regarding limited time, lack of clear procedures for identifying at risk patients and testing and access to resources. Experiences of BLCW (what is this?) reflect themes from both groups.

Conclusion:

This project identifies key barriers as reported by key informants as well as members of the affected communities themselves, and provides useful recommendations for enhancing future targeted health promotion. Further, these findings inform a current clinical trial which aims to develop and implement interventions at the primary care level (GP clinics) to increase capacity and capability for enhanced testing and management within these priority sub-groups.

Disclosure of Interest Statement:

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