

ONLINE INTERVENTIONS TO REDUCE STIGMATISING ATTITUDES AMONG THE AUSTRALIAN PUBLIC TOWARDS GROUPS AFFECTED BY BLOOD-BORNE VIRUSES

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Background:

Stigma has been shown to negatively impact population groups affected by blood-borne viruses. Reducing stigma is a major goal within Australian national health strategies, however, there is a lack of evidence regarding effective stigma reduction interventions. Drawing on Allport's intergroup contact theory, this study aimed to evaluate the effectiveness of an online stigma reduction intervention implemented among the Australian public.

Methods:

Adult members of the Australian public were recruited via Facebook advertising and randomly allocated to a control group (n=316) or one of five intervention groups: 1) people living with HIV (PLHIV, n=320); 2) people living with hepatitis C (PLHCV, n=347); 3) people living with hepatitis B (PLHBV, n=333); 4) people who inject drugs (PWID, n=316); 5) sex workers (n=296). Intervention group participants watched a short video depicting personal experiences of their assigned group and completed a series of attitudinal measures before and immediately after the video, and again at three-month follow-up. The control group completed the measures but did not watch any video. Longitudinal changes in attitudes were analysed using a mixed effects regression model with maximum likelihood estimation.

Results:

Immediately after watching the video, negative attitudes were reduced on almost all outcome measures. After three months, positive changes were maintained in attitudes towards PLHBV ($p < .01$) and PWID ($p = .02$); blame directed towards PLHIV ($p = .02$), PLHBV ($p < .001$), and PLHCV ($p < .001$); desire to maintain distance from PLHIV ($p = .02$) and PLHBV ($p < .01$); and opinions about policies regarding PLHBV ($p < .01$), PLHCV ($p < .001$), and PWID ($p < .01$).

Conclusion:

Brief videos depicting groups affected by blood-borne viruses demonstrated positive results in reducing stigmatising attitudes among the Australian public. Online contact interventions have the potential to be scaled up nationally and internationally. These interventions could effectively contribute to reducing stigma and discrimination towards population groups affected by blood-borne viruses.

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