

# Stigma Snapshot

## Health care workers 2022

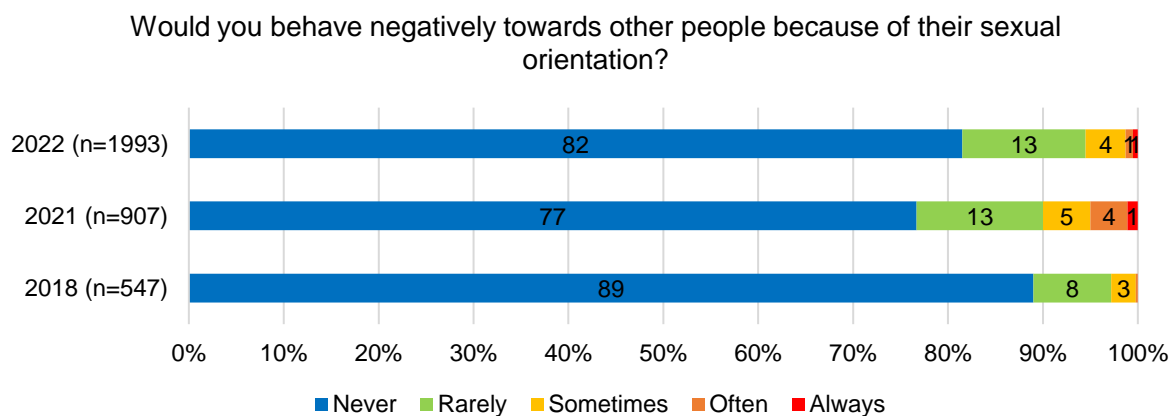
Stigma has a major impact on health outcomes for people living with blood borne viruses (BBVs) and sexually transmissible infections (STIs). The Australian Government Department of Health strategies for BBVs and STIs explicitly aim to “eliminate the negative impact of stigma, discrimination, and legal and human rights issues on people’s health”.

In 2022, an indicator of expressed stigma was included in an online survey of Australian health care workers, recruited via a paid research panel. Participants were asked if they would behave negatively towards other people because of certain behaviours, identities, or infections. The indicator had previously been included in an online survey of Australian health care workers in 2018 and 2021. The same recruitment approach was used in 2021 and 2022, while the 2018 sample was recruited via paid social media advertising. Due to the different recruitment approaches, the demographic profile of participants in 2018 was significantly different from those in 2021 and 2022 (which were largely similar), and the 2018 sample was less likely to report that they would behave negatively towards other people because of any of the listed behaviours, infections, or identities.

**1,993 people completed the 2022 survey**

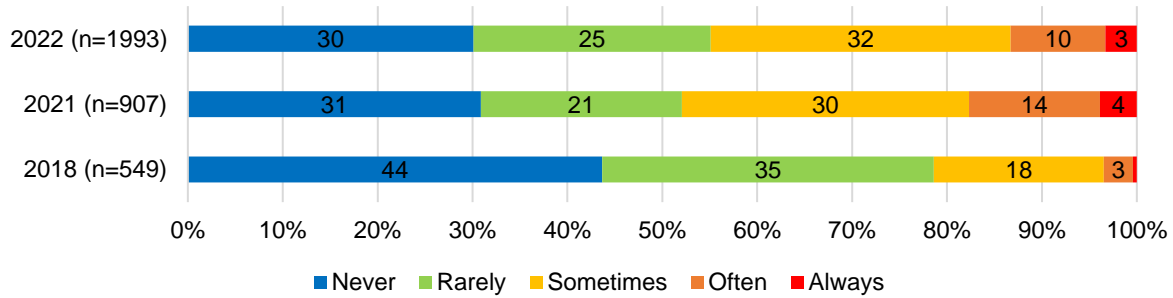
88% female – average age 33 years – 3% Aboriginal or Torres Strait Islander  
19% born overseas – 26% more than 10 years’ experience

At each time point, health care workers were least likely to indicate they would behave negatively towards other people because of their sexual orientation. Between 2021 and 2022, this proportion decreased from 23% to 18%.



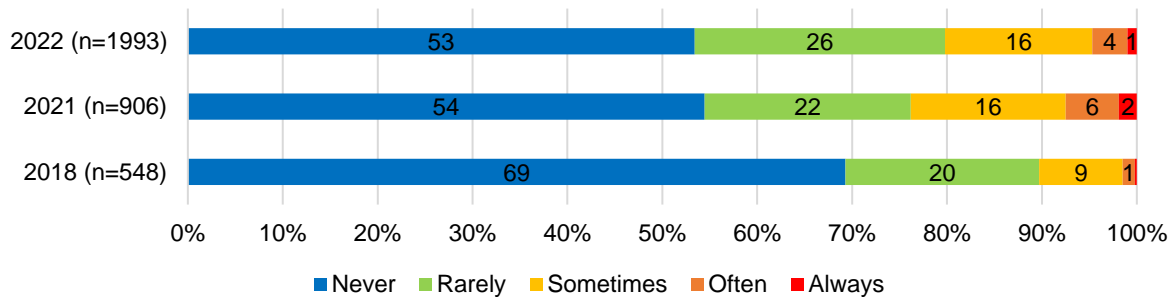
Participants at each time point were most likely to report that they would behave negatively towards other people because of their injecting drug use. This proportion did not significantly change between 2021 (69%) and 2022 (70%). It is also noteworthy that 13% of health care workers in 2022 indicated that they would ‘often’ or ‘always’ behave negatively towards other people because of their injecting drug use – a smaller proportion than in 2021 (18%).

Would you behave negatively towards other people because of their injecting drug use?

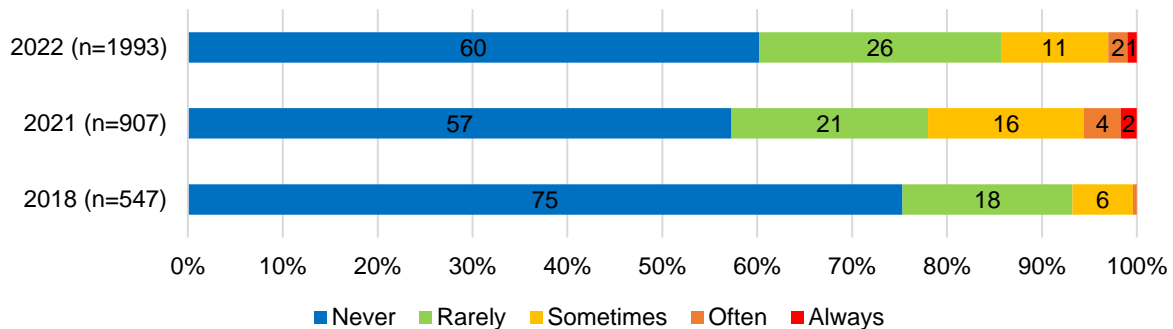


Similarly, the proportions of participants who indicated they would behave negatively towards other people because of their sex work or STIs remained similar between 2021 and 2022 (46-47% for sex work and 40-43% for STIs).

Would you behave negatively towards other people because of their sex work?

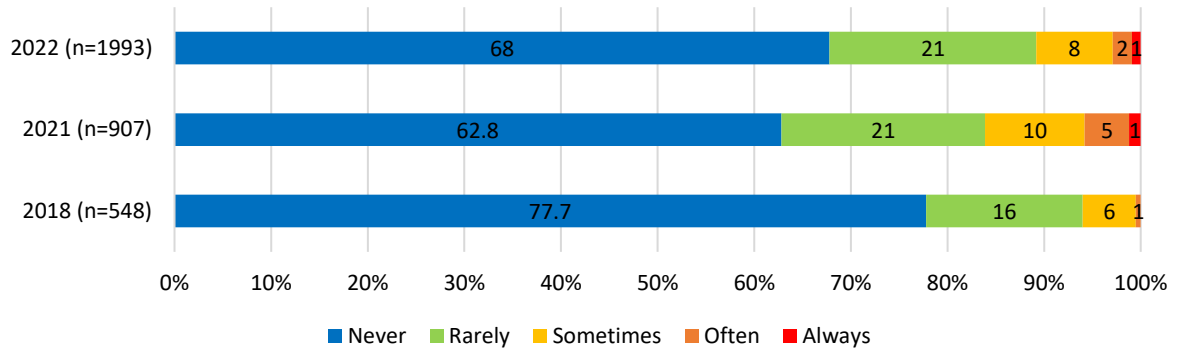


Would you behave negatively towards other people because of their STI?

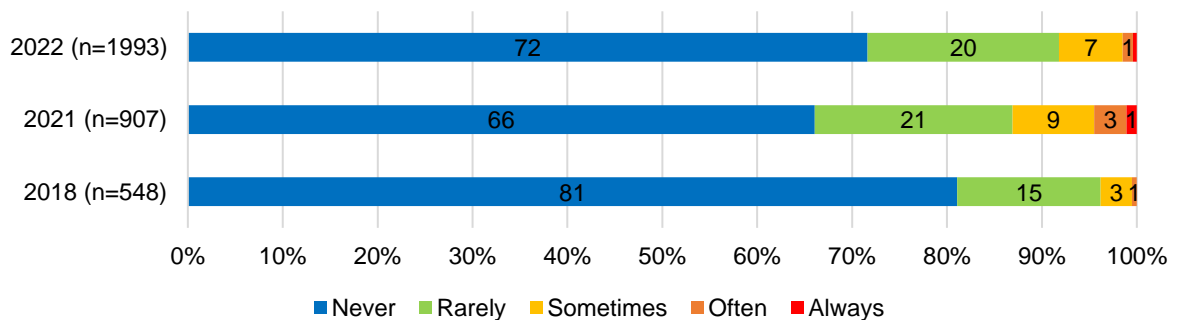


The proportion of health care workers who indicated they would behave negatively towards other people because of their HIV decreased from 37% in 2021 to 32% in 2022. Similar decreases were evident in the proportions who would behave negatively towards others because of their hepatitis B (from 34% in 2021 to 28% in 2022) and hepatitis C (from 36% in 2021 to 30% in 2022).

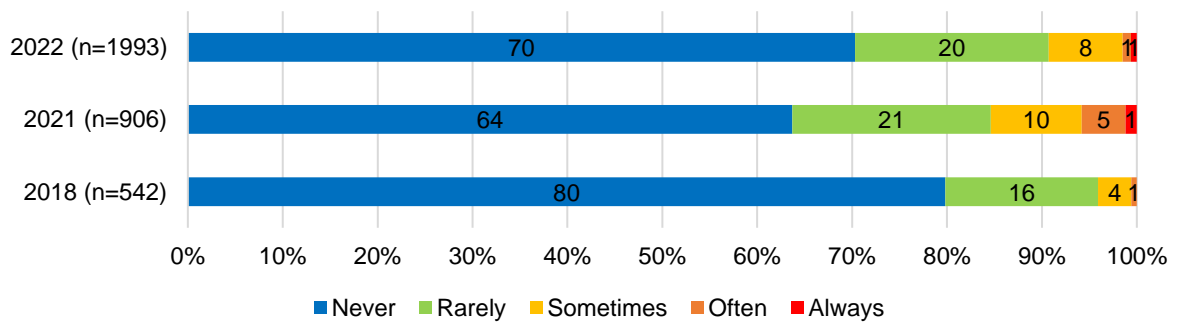
Would you behave negatively towards other people because of their HIV?



Would you behave negatively towards other people because of their hepatitis B?



Would you behave negatively towards other people because of their hepatitis C?



Although participants in 2021 and 2022 were more likely to indicate they would behave negatively towards other people than those in 2018, these differences should be considered in light of the different recruitment methods and participant profiles. Results highlight that stigma and negative behaviours towards population groups affected by BBVs and STIs persist throughout the Australian health care system. While the proportions of health care workers who would behave negatively towards others because of their sexual orientation, HIV, hepatitis B, or hepatitis C decreased slightly between 2021 and 2022, the substantial proportions who continue to report that they would behave negatively remain a concern. Further, no discernible difference was evident between 2021 and 2022 in the proportions of health care workers who would behave negatively towards other people because of their STIs, sex work, or injecting drug use. Wide-ranging interventions are needed to address stigma and negative behaviour from health care workers towards population groups affected by BBVs and STIs to remove these barriers to health care access. It is also imperative that expressed stigma is routinely monitored among Australian health care workers to track progress towards eliminating stigma and its negative effects within the health care system.

If the results presented here have upset you in any way, we encourage you to seek support from Lifeline (13 11 44).

This project was supported by a grant from the Australian Government Department of Health.

We would like to thank everyone who completed the survey.

For more information on this project, please see [http://bit.ly/stigma\\_indicators](http://bit.ly/stigma_indicators)

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