

**Results:** Qualitative assessment and logistic regression analysis will be performed to determine any significant associations and predisposing factors associated with CHB knowledge.

**Conclusion:** The results of this study will be central to informing the design of additional educational material to improve information delivery to patients, and provide the basis for a client engagement protocol to provide all patients with CHB the opportunity to improve their awareness of their condition, in line with the guiding principles of the National Hepatitis B Strategy.

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### **HEPATITIS B HEALTH PROMOTION BASED ON BEHAVIOURAL THEORY: A NEW MODEL**

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Health-related decisions are complex processes influenced by a variety of factors including demographics, knowledge, psycho-social and cultural factors, as well as health care provider factors. With regard to hepatitis B, people have to make decisions about preventive action such as screening, monitoring, or immunization. Health promotion is increasingly based on behavioural theory in order to address variables outside the health care system such as health beliefs, risk perceptions, social norms, and perceived stigma. Applying a theoretical framework helps to make interventions consistent with assessments, and to ensure construct and external validity. However, existing hepatitis B health promotion efforts rarely make use of behavioural theory.

This presentation introduces a new theoretical model which covers the many factors that may influence people's decisions about preventive behaviours related to hepatitis B. Constructs from two existing models were used as a guide, and the new components of medical-social self-efficacy and antenatal care were added. Based on this new model, a questionnaire was constructed to assess hepatitis B-related knowledge, awareness, beliefs and behaviour in the North Queensland Hmong community. This is an important study population because prevalence studies generally show a high prevalence of chronic hepatitis B (CHB) in Hmong samples (~15%).

The next step is a culturally appropriate educational intervention based on narrative communication theory and incorporating constructs of the new model. The results from the baseline assessment help to optimize the balance between perceived threat and efficacy which is crucial for message acceptance. Delivery of the educational intervention is followed by a community screening program and a post-intervention assessment. Post-intervention data is collected from the intervention group as well as a control group.

The use of a theoretical framework and the consistent approach will facilitate replication with other populations or health conditions.