

Strategy 1

Heightening Awareness



40. Public awareness initiatives form an important foundation for viral hepatitis prevention and control in Hong Kong. As demonstrated through public education campaigns under the 2020-2024 Action Plan— including annual World Hepatitis Day campaigns and multi-channel outreach— targeted communication effectively mobilises community engagement while reducing stigma. This strategy builds upon these established platforms to achieve three core objectives: enhancing public understanding of viral hepatitis transmission and prevention, strengthening community support for evidence-based control measures, and building a supportive environment that facilitates care-seeking behaviours.
41. Recognising the diverse needs across our population, awareness efforts will extend beyond general public messaging to prioritise key stakeholders. Healthcare workers require up-to-date clinical knowledge to support early case detection and management. Populations at elevated risk of HBV or HCV infection, such as PWID, individuals with HIV co-infection, and those with intra-familial exposure to hepatitis B, could benefit from tailored information addressing their specific transmission pathways and care options. This dual focus ensures that future awareness initiatives align with Hong Kong's epidemiological profile.



Strategy 1.1:

Enhance awareness campaign for the general population

42. Public awareness initiatives play an important role in encouraging at-risk individuals to seek testing and care for HBV and HCV infection. These efforts systematically disseminate essential information— including transmission pathways, prevention strategies, testing accessibility, treatment options, and the importance of ongoing medical monitoring— to empower the community to make informed health decisions.
43. Hong Kong's sustained public education efforts have established foundational awareness of viral hepatitis. However, the PHS 2020-22 reveals that about 40% of people with CHB remain undiagnosed, and 70% of them lack regular medical follow-up— indicating gaps in risk perception and care engagement.
44. To address these barriers, future WHD campaigns will feature themes responsive to local epidemiological changes and health needs, going beyond general information dissemination to actively motivate testing and linkage to care. The DH will expand dynamic community engagement through health talks and public events, while reinforcing timely digital communication via the Centre for Health Protection's social media channels and targeted media briefings. Moreover, impact-based evaluation for health promotion activities would be introduced to understand the health behaviour change.

Actions and activities

- 1.1.1 Launch annual World Hepatitis Day campaign with themes responsive to Hong Kong's evolving epidemiological situation, ensuring campaigns effectively address current prevention priorities and motivate behavioural change.
- 1.1.2 Expand community outreach through health talks and public engagement events with impact-based evaluation to actively disseminate viral hepatitis information, foster dialogue on prevention strategies, and encourage at-risk individuals to seek testing and maintain linkage to care.
- 1.1.3 Maintain timely public communication through regular updates on the Centre for Health Protection's social media platforms and targeted media briefings, ensuring accurate health messaging reaches diverse audience segments across multiple channels.

Strategy 1.2:

Conduct targeted education for key populations, patients and their service providers

45. Tailored education is essential for populations disproportionately affected by viral hepatitis and their service providers. To support the implementation of initiatives in the previous Action Plan, materials for pregnant women emphasising the prevention of mother-to-child HBV transmission, and targeted resources for PWID were prepared and distributed through the network of their service providers.
46. These efforts on targeted education shall be sustained to address population-specific barriers, with a view to reducing their unmet needs along the viral hepatitis care cascade. For example, the prevalence of chronic hepatitis C infection remains substantial among PWID, exceeding 50%, suggesting gaps in access to testing and subsequent treatment. Antenatal women would be the critical target group for interventions to realise a hepatitis B-free generation.
47. To boost diagnosis and treatment coverage, future efforts will emphasise two priorities: encouraging testing among high-risk groups, and promoting linkage to care for diagnosed individuals. Concurrently, training community partners and peer workers will enhance their capacity to deliver accurate prevention advice and reduce stigma with culturally competent communication tools.

Actions and activities

- 1.2.1 Develop and distribute tailored educational materials addressing specific transmission risks and care pathways for priority groups including ethnic minorities, new immigrants, people living with viral hepatitis, and their healthcare providers, supporting implementation of prevention and treatment initiatives.
- 1.2.2 Integrate viral hepatitis education into existing HIV and STI prevention programmes through coordinated training modules and resource sharing, acknowledging overlapping transmission modes and common at-risk populations for enhanced efficiency.

Strategy 1.3:

Conduct professional training for healthcare workers

48. Professional training ensures evidence-based management of HBV and HCV, expanding clinical capabilities across care settings. Since June 2021, iContinuing education (iCE) on Viral Hepatitis, an accredited online platform, has been launched, providing free, regularly updated training modules for doctors, nurses, and allied health professionals.

49. With 410 000 people living with chronic HBV infection and 70% of them receiving no regular follow-up, frontline providers need enhanced skills to: 1) identify asymptomatic at-risk individuals, and 2) perform risk stratification and manage stable cases within community settings.

50. To address Hong Kong's transition from a specialist-led hepatitis management to a shared care model supported by primary care, efforts will focus on developing targeted materials to facilitate the identification of high-risk individuals requiring HBV/HCV screening by primary care practitioners. Capacity-building programmes will be developed on person-centred chronic disease management, equipping frontline healthcare workers to deliver quality care aligned with service needs.



Actions and activities

- 1.3.1 Create specialised guidance materials to assist primary care practitioners in identifying high-risk individuals requiring HBV/HCV screening, supporting broader community case-finding initiatives outlined in the "Expanding access to screening, care and treatment" section.
- 1.3.2 Deliver professional development programmes on chronic viral hepatitis management for healthcare workers, particularly in primary care settings, focusing on person-centred approaches.

Strategy 1.4:

Build a supportive environment

51. Reducing stigma and promoting health equity facilitate effective hepatitis control. Vulnerable groups— including ethnic minorities and socially marginalised populations — often face compounded barriers to accessing health information.
52. To cultivate broader health equity, collaborations will deepen with media, DHCs, and non-governmental organisations (NGOs), ensuring culturally resonant messaging reaches vulnerable communities. Notably, DHCs— serving as hubs for health promotion and chronic disease coordination— play a central role in local primary healthcare.
53. With an aim to facilitate information access, the Viral Hepatitis Control Office website will evolve into a comprehensive resource hub, centralising access to guidelines and patient support tools.



Actions and activities

- 1.4.1 Enhance and regularly update the Viral Hepatitis Control Office website (www.hepatitis.gov.hk) as a centralised information hub, providing the latest guidelines, patient resources, and professional tools for stakeholders.
- 1.4.2 Strengthen collaborative partnerships with District Health Centres and NGOs to implement community-based health promotion activities under the evolving strategy in levels of care for viral hepatitis testing and management, leveraging complementary strengths to advance Action Plan objectives through coordinated public engagement.