

**Background:**

In Uganda, Hepatitis B is highly widespread with about 10% national prevalence. In the northern region, it ranges from 18% in North West to 25% in the North East. This study focused on determining the prevalence of hepatitis B infection and examining any related risk factors. Intended outcomes of the study will be used to aid planning, implementing, and evaluating programmatic Hepatitis prevention activities in Uganda.

**Objective:**

A cross sectional study aimed at establishing the burden of Hepatitis B infection among adults of reproductive age (15-49) in Arua Municipality.

**Methodology:**

There were 227 study respondents enrolled in the study and assessed of demographic characteristics and risk factors associated with prevalence of Hepatitis B. The respondents were interviewed using research administered questionnaires. Data was captured using open data source kit (ODK) and analysis done using SPSS version 21. Univariate analysis for socio-demographics, bivariate and multivariate analysis of risk factors associated with Hepatitis B.

**Results:**

Prevalence of Hepatitis B in Arua Municipality is 22%. Knowledge and awareness about Hepatitis is generally low, about 49.8% are aware of the infection implying a significant percentage of 50.2% are not aware. Risk factors associated with prevalence of Hepatitis were categorised as socio-demographic, having liver disease increased the risk 5.245 times. Family history was the most influential variable category; exposure to a family member with liver cancer increased the infection risk by odds of 14.598 while living with a family member infected with Hepatitis B increased the infection risk 56.513 times. Marital status is equally a risk factor as this group is more likely (4.601) to engage in unprotected sex hence transmission and prevalence of STDs increased the risk 4.512 times.

**Conclusion:**

There is need to sensitize the masses on the modes of HBV transmission to avert the high prevalence detected by this study Government of Uganda through MOH should immediately implement vaccination campaigns.