Demographic Changes, Health Disparities, and Tuberculosis
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Delivering Culturally Competent Patient Education and Care to
Tuberculosis Program Clients
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Joan M. Mangan, PhD, MST has the following disclosures to make:

• No conflict of interests
• No relevant financial relationships with any commercial companies pertaining to this educational activity
The U.S. Population is Getting Older, Bigger, and More Racially & Ethnically Diverse
Several Decades of Population Aging

US population was relatively “young” in the first half of the 20th century:

- Relatively high fertility
- Decline in infant and childhood mortality
- High rates of net immigration - young workers & families

Since 1950:

- Fertility rates have declined to slightly below “replacement levels”
- **1950**: 8.1% of population was 65 or older
- **2014**: 15% were 65 yrs. or older

Population Expansion

The U.S. population is projected to increase to 400 million in 2051.

This growth is slower than the past because U.S. Census projections assume:

- Fertility rates will continue to decline
- A modest decline in the overall rate of net international migration

**Additional projections**

- **2030**: 1 in 5 will be 65 and over
- **2044**: More than half of all Americans are projected to belong to a minority group
- **2060**: Nearly one in five of the nation’s total population is projected to be foreign born
Population by Race and Hispanic Origin: 2014 and 2060
(Percent of total population)

AIAN = American Indian and Alaska Native; NHPI = Native Hawaiian and other Pacific Islander

Change in Total Population by Race and Hispanic Origin: 2014-2060
(In percent)

AIAN = American Indian and Alaska Native; NHPI = Native Hawaiian and other Pacific Islander
Demographic Changes, Healthcare, and Health

Changes in the population size, racial and ethnic composition, and age structure affect:

• Health and healthcare needs of the population;
• Healthcare resources needed;
• Spending levels & policy.

Also….. observed differences in:

• How / when groups use health services;
• Types of care sought;
• Health conditions…. such as tuberculosis.
### TB Morbidity
**United States, 2009—2014**

<table>
<thead>
<tr>
<th>Year</th>
<th>No.</th>
<th>Rate*</th>
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<tbody>
<tr>
<td>2009</td>
<td>11,523</td>
<td>3.8</td>
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<tr>
<td>2010</td>
<td>11,161</td>
<td>3.6</td>
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<tr>
<td>2011</td>
<td>10,510</td>
<td>3.4</td>
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<td>2012</td>
<td>9,941</td>
<td>3.2</td>
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<tr>
<td>2013</td>
<td>9,565</td>
<td>3.0</td>
</tr>
<tr>
<td>2014</td>
<td>9,421</td>
<td>3.0</td>
</tr>
</tbody>
</table>

*Cases per 100,000. Updated as of June 5, 2015.

### Reported TB Cases by Race/Ethnicity,*
**United States, 2014**

- **Asian**: 32%
- **Hispanic or Latino**: 29%
- **Multiple Race**: 2%
- **Black or African American**: 21%
- **American Indian or Alaska Native**: 1%
- **Native Hawaiian or Other Pacific Islander**: 1%

*All races are non-Hispanic. Multiple Race indicates two or more races reported for a person. Does not include persons of Hispanic or Latino origin.
What do these data mean to you?

Reported TB Cases

Trends in TB Cases in Foreign-born Persons, United States, 1993 – 2014*

*Updated as of June 5, 2015.
Characteristics of Net Immigration

The leading regions of origin of legal immigrants were North America and Asia.

The leading source countries (of birth) for legal immigrants (2013):
- Mexico (13.6%)
- China (7.2%)
- The Philippines (5.5%)
- India (6.9%)
- Dominican Republic (4.2%)
- Cuba (3.3%)
- Vietnam (2.7%)

The primary destination states of immigrants (2011-2013):
- California, New York, Florida, Texas, New Jersey, and Illinois


Countries of Birth of Foreign-Born Persons Reported with Tuberculosis (TB), U.S. (2014)

- Mexico (21%)
- Philippines (12%)
- India (8%)
- Vietnam (8%)
- China (7%)
- Guatemala (3%)
- Haiti (3%)
- Other Countries 39%

CDC
Percentage of TB Cases Among Foreign-Born Persons, United States*

In 2014, 36 states reported ≥ 50% of their cases among the foreign-born.

*Updated as of June 5, 2015

U.S. Census Bureau Population Projection:
Over the next 16 years, the aging of the baby boomers will drive up the ranks of the native population at ages 65 and over...
The aging of the current foreign-born population will also contribute to increases in the share of the foreign-born population that is aged 65 and over.

How does this Census projection relate to your work?
TB Case Rates by Age Group and Sex, United States, 2014

Caring for Persons with Tuberculosis

Concentration of groups at greater risk for poor health outcomes.

Each group’s culture varies & influences:

- View of their environment
- Trust/mistrust
- Care seeking
- Communication style
- Understanding of health & illness
- Decision making
  - Values / Beliefs
  - Traditions, customs, & spirituality
Considerations for 21st Century Health Care (1)

Diversity issues are differences, NOT disparities in and of themselves. When not understood, valued, or appreciated For their impact on:
- The delivery of patient care
- The healing process
- Communication/trust

Diversity issues become contributors to disparities and unequal medical outcomes.

Considerations for 21st Century Health Care (2)

Diversity (Differences)
- Language differences
- Culture & Values
- Gender
- Sexuality
- Socio economic status
- Education
- Religion
- Race & Ethnicity

Disparities (Inequalities)
- Access
- Therapeutics
- Diagnostics
- Medical Outcomes
Examples: When Diversity Contributes to Disparities

- **Language Differences**: Could affect understanding of medical information from which patients and caregivers make choices.

- **Religious Differences**: Could affect belief systems and healing processes.

- **Sexual Orientation Differences**: Could affect the acceptance of a gay or lesbian patient or caregiver and the trust that must be present between them.

The Impact of Health Disparities

For the individual, health disparities can result in:
- Increased morbidity;
- Earlier deaths;
- Decreased quality of life;
- Loss of economic opportunities;
- Perceptions of injustice.

For society, health disparities can lead to:
- Less than optimal productivity;
- Higher health-care costs;
- Social inequity.
Questions?

References


