

National Webinar
Tuesday, April 27, 2021

Bridges to Build: Improving TB Care for African American Patients

WELCOME!



HEARTLAND
NATIONAL TB CENTER
THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT TYLER

UCSF
University of California
San Francisco

 CURRY
INTERNATIONAL
TUBERCULOSIS
CENTER



Tuberculosis and African Americans in the US

Are We Making Progress?

Lisa Armitige, MD, PhD

Assistant Medical Director

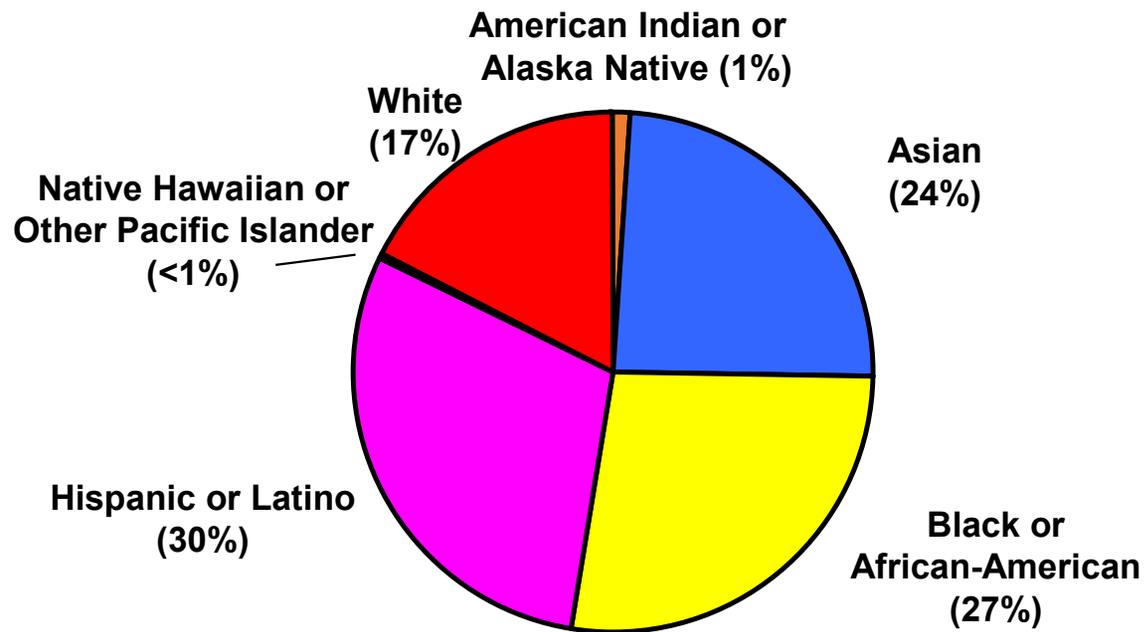
Heartland National TB Center

Reported TB Cases in U.S.-born, by Race/Ethnicity, U.S., 1993–2004

	N	%
White, Non-Hispanic	47534	36
Black, Non-Hispanic	61379	47
Hispanic	16613	13
American Indian/ Alaska Native	2881	2
Asian/Pacific Islander	2561	2



Reported TB Cases by Race/Ethnicity* United States, 2006

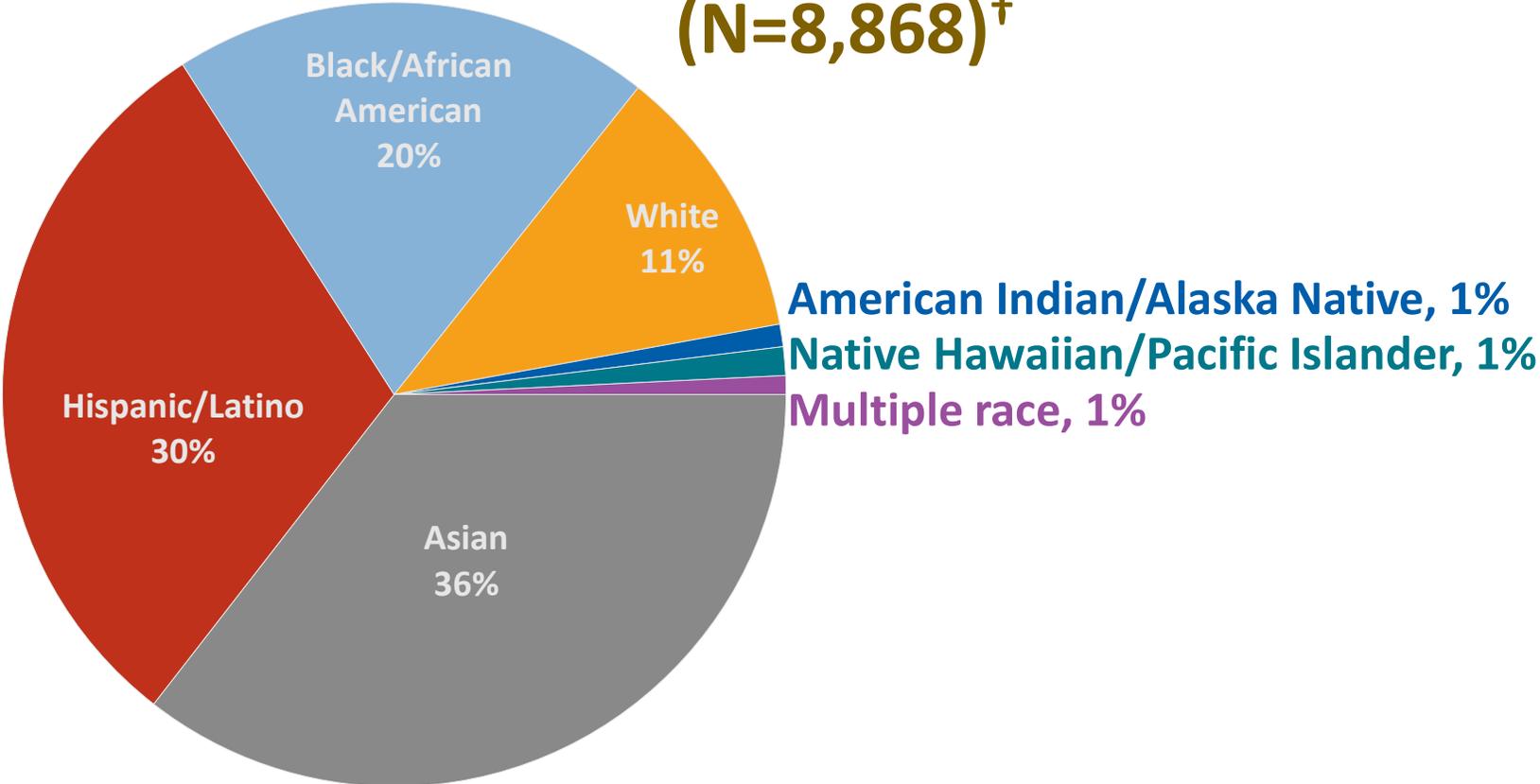


*All races are non-Hispanic. Persons reporting two or more races accounted for less than 1% of all cases



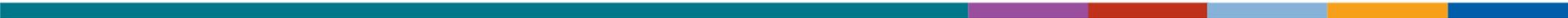
Reported TB Cases by Race/Ethnicity,* United States, 2019

(N=8,868)[†]



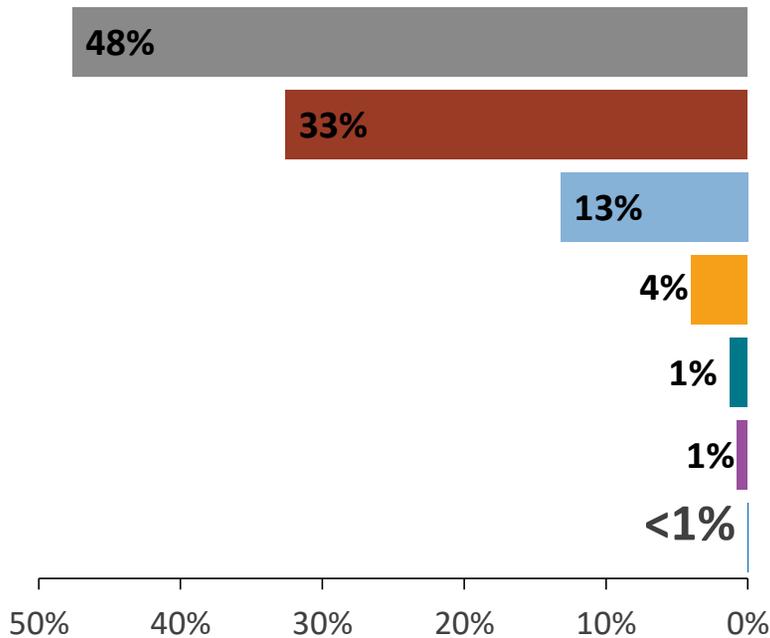
* All races are non-Hispanic; multiple race indicates two or more races reported for a person but does not include persons of Hispanic/Latino origin.

[†] Excludes unknown/missing values



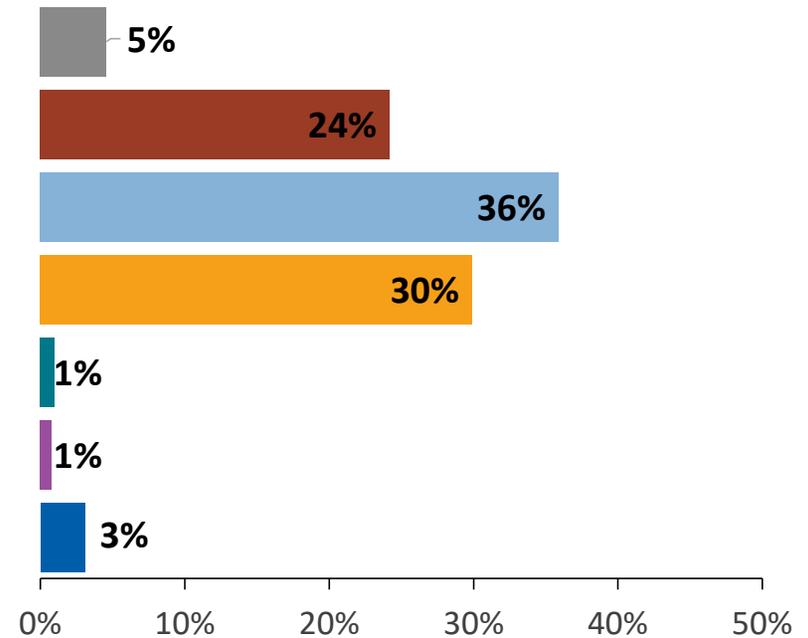
Reported TB Cases by Origin and Race/Ethnicity*, United States, 2019[†]

Non-U.S.–born persons[§]
(N=6,335)



Asian
Hispanic/Latino
Black/African American
White
Native Hawaiian/
Pacific Islander
Multiple Race
American Indian/
Alaska Native

U.S.-born persons
(N=2,541)



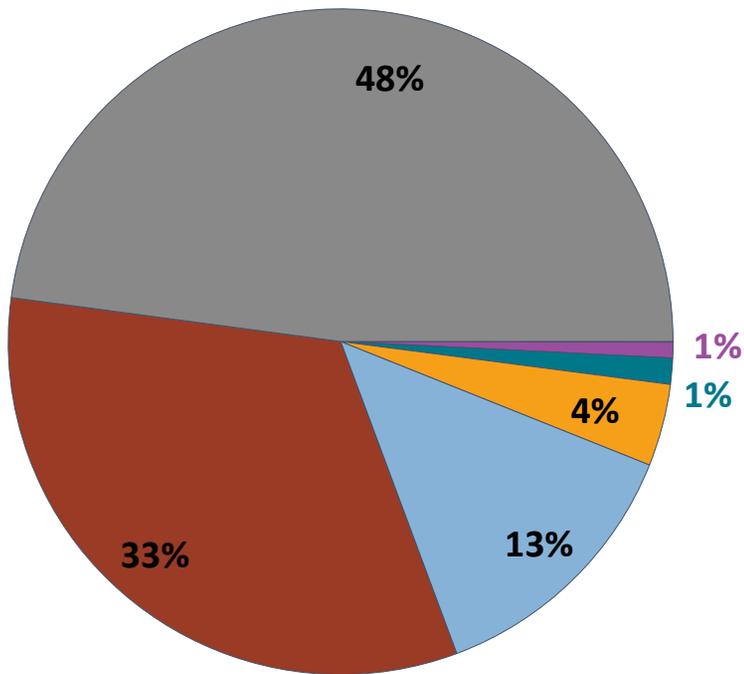
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[†] Percentages are rounded.

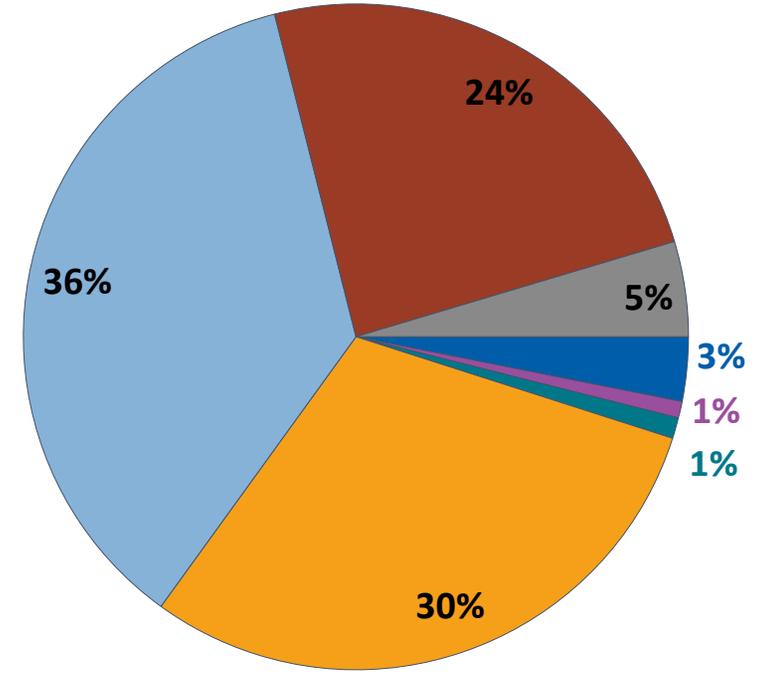
[§] American Indian/Alaska Native accounted for <1% of cases among non-U.S.–born persons (not shown).

Reported TB Cases by Origin and Race/Ethnicity*, United States, 2019[†]

Non-U.S.–born persons[§]
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U.S.– born persons
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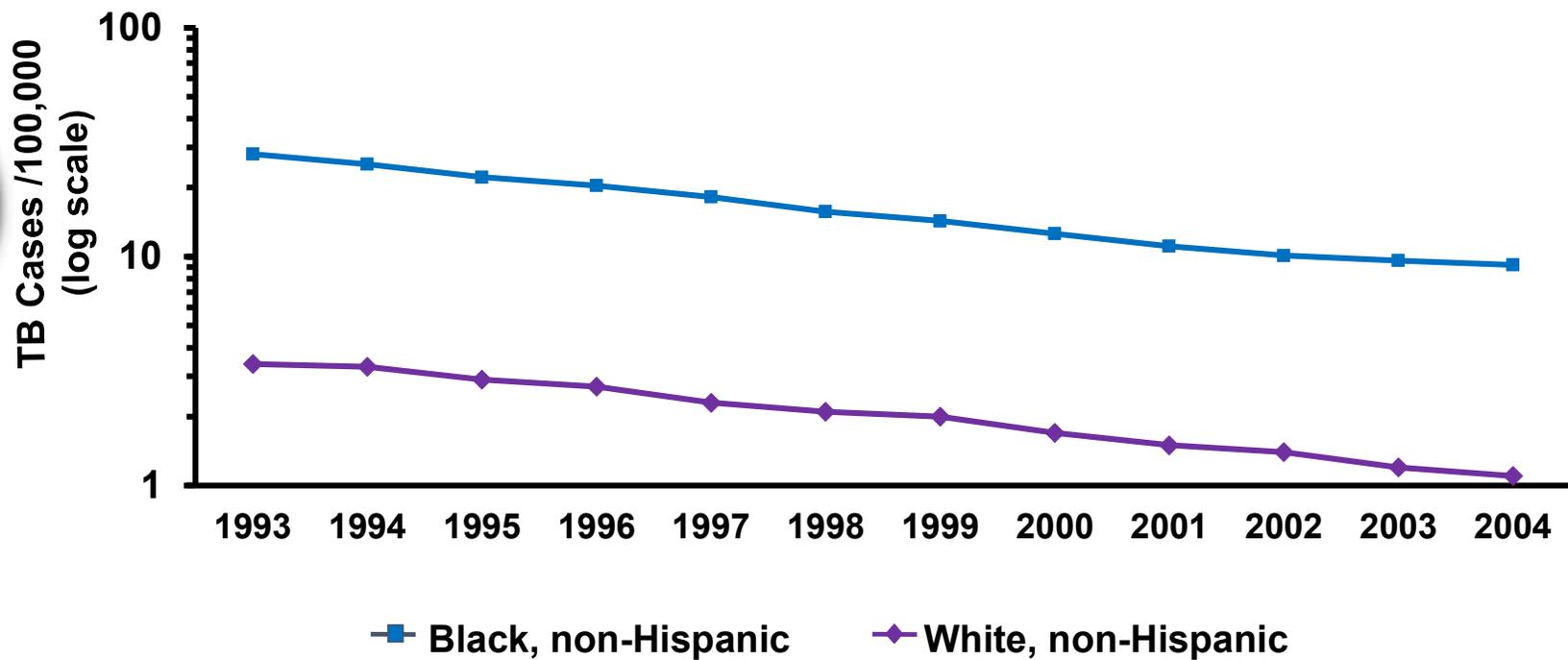
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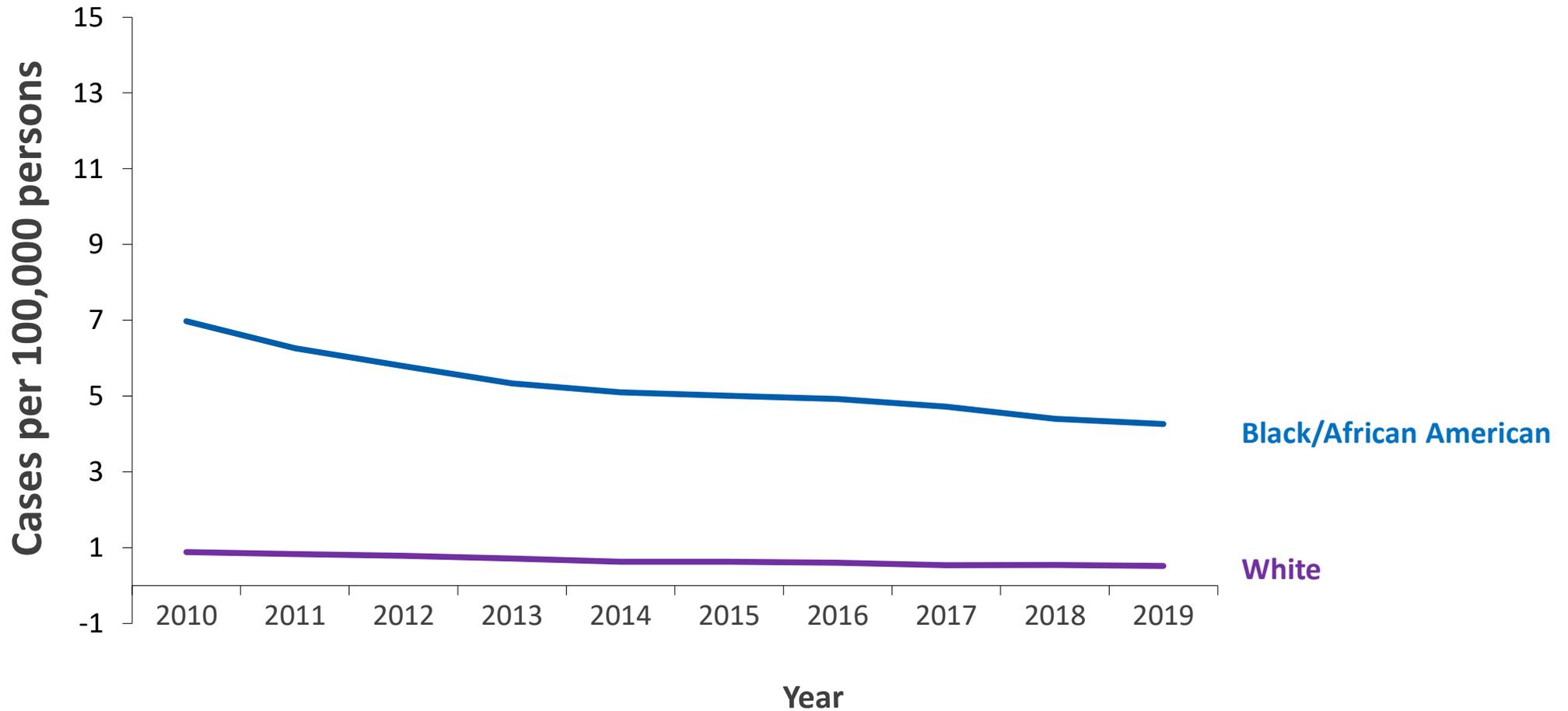
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TB Rates in U.S.-born, by Race/Ethnicity, United States, 1993–2004



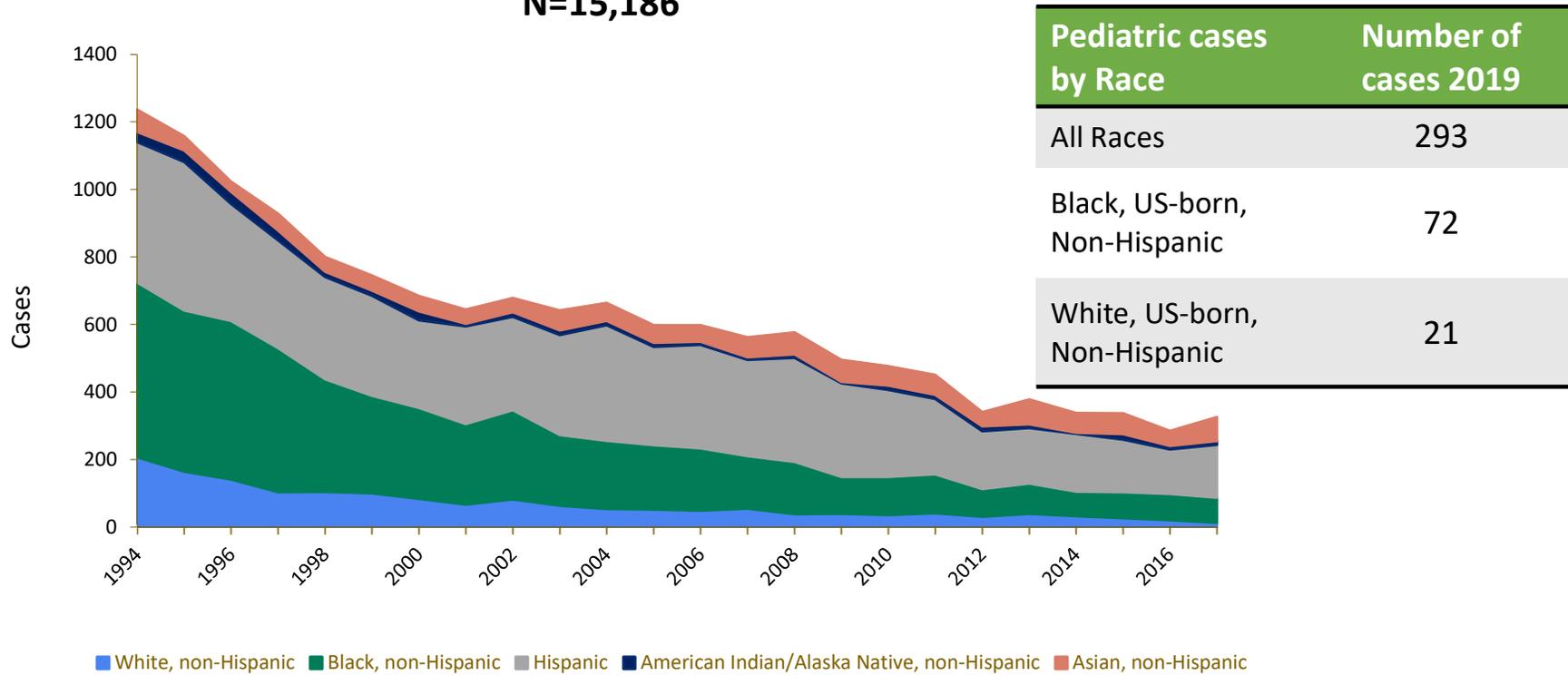
TB Case Rates by Race/Ethnicity*, United States, 2010–2019



*All races are non-Hispanic; multiple race indicates two or more races reported for a person but does not include persons of Hispanic/Latino origin.

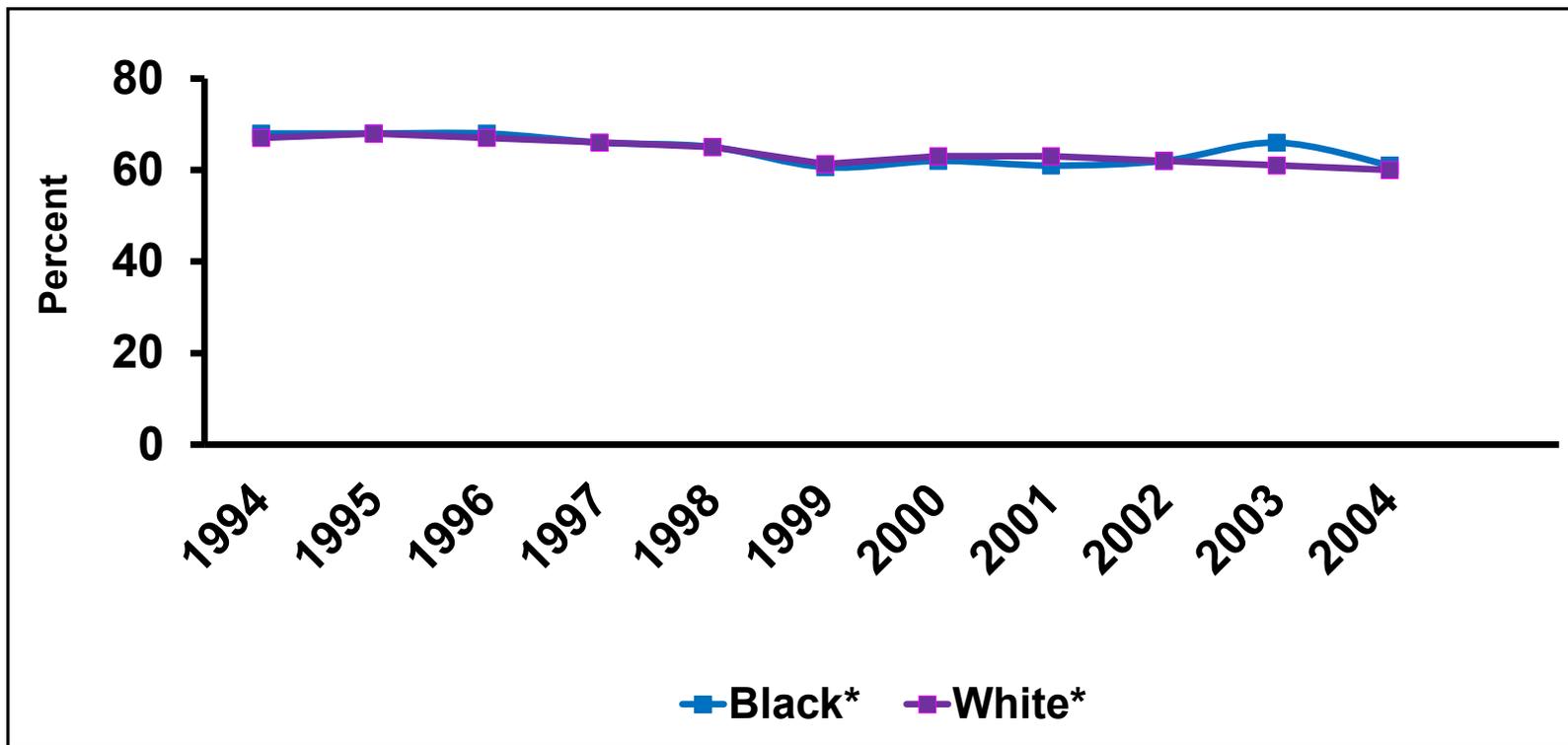
U.S.-Born Pediatric TB Cases by Race-Ethnicity, 1994–2017

N=15,186



Note: Multiple race/ethnicity and unknown not shown; Native Hawaiian and Other Pacific Islander combined with Asian
 Graph begins in 1994 to match the availability of population data

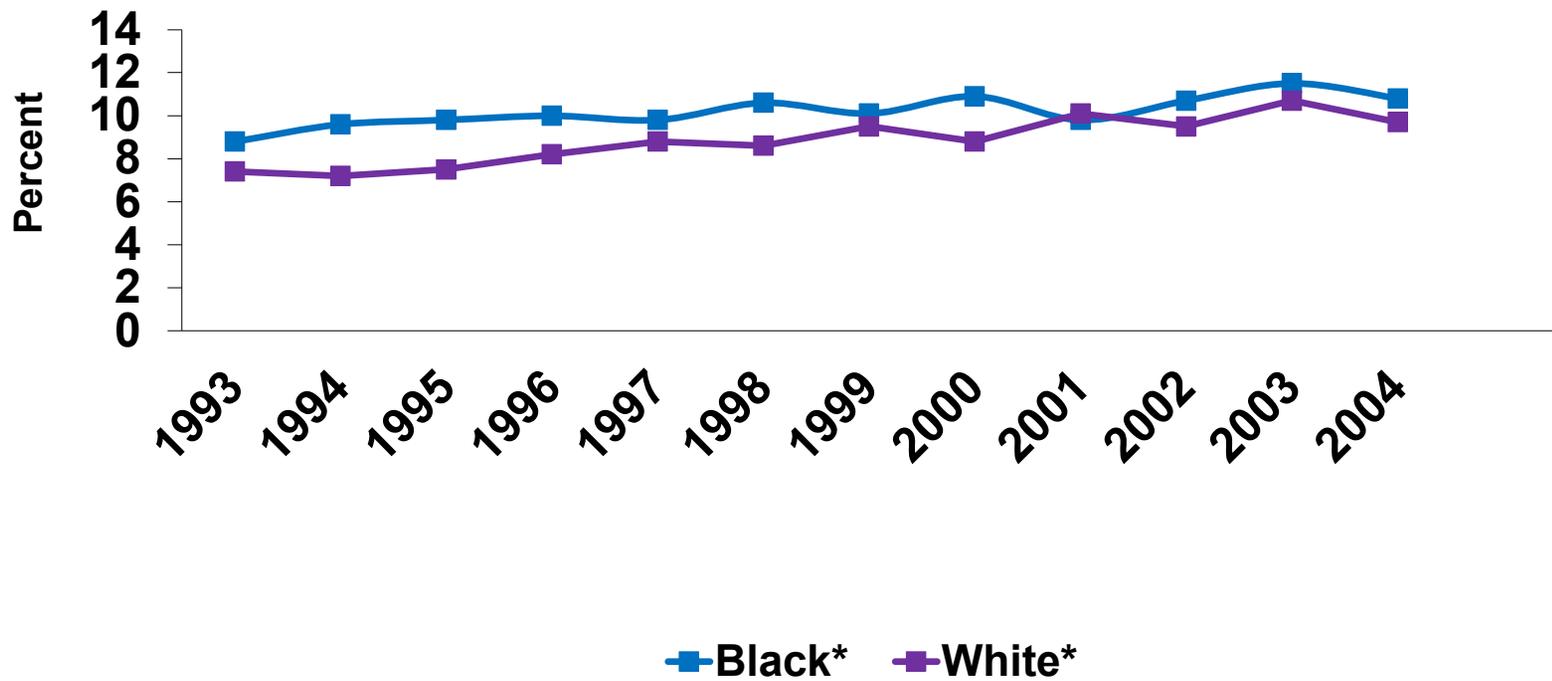
Percent of TB Cases in Unemployed Persons (in 2 Years Prior to Diagnosis), 1994-2004



* U.S.-born non-Hispanic

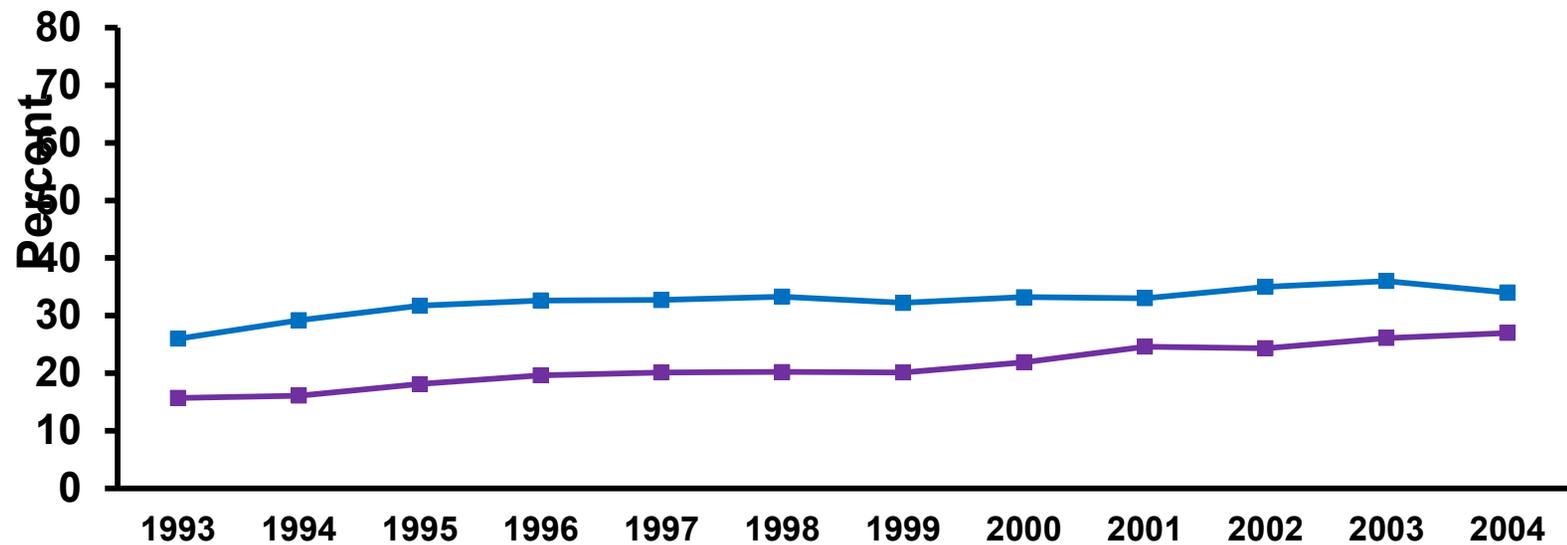


Percent of TB Cases in Homeless Persons (Year Prior to Diagnosis), 1993-2004



* U.S.-born non-Hispanic

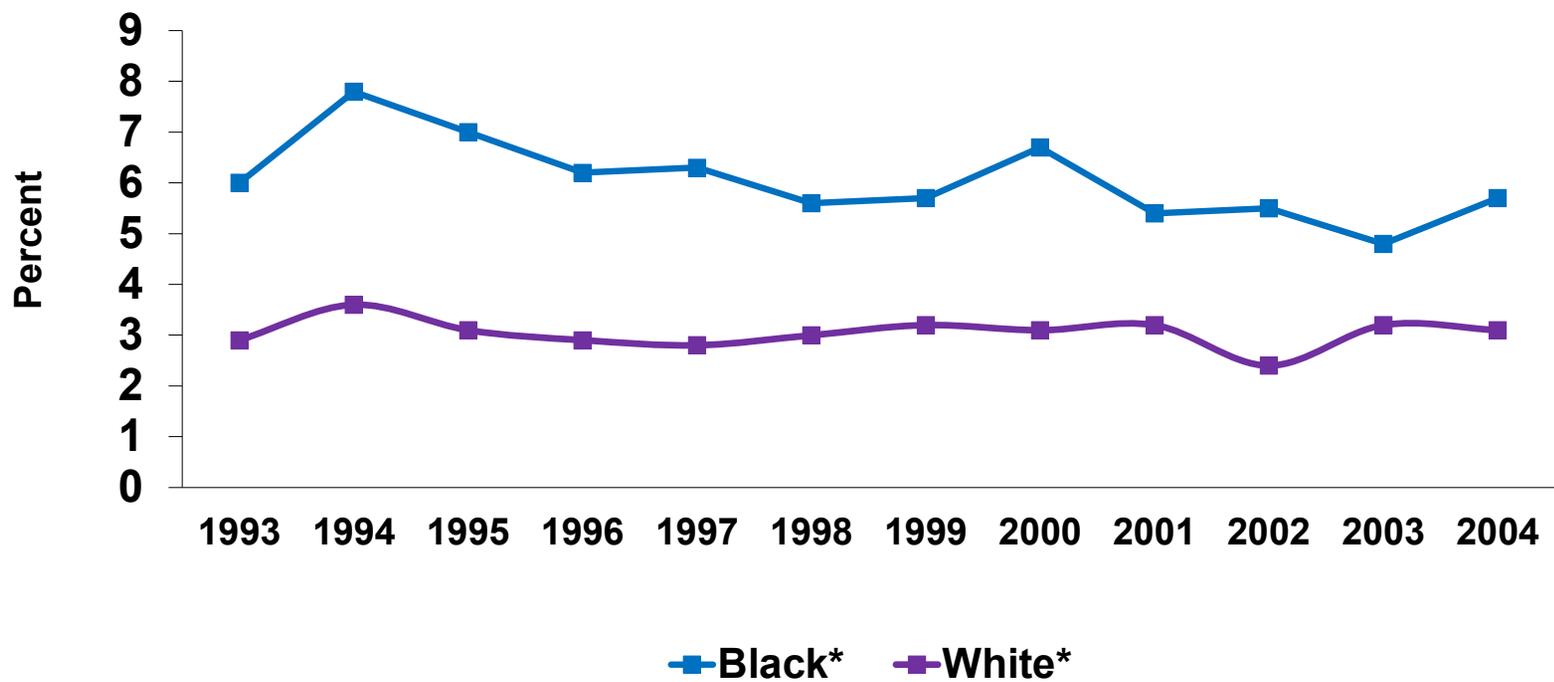
Percent of TB Cases in Persons with History of Substance Abuse,* 1993–2004



*Injecting drug, non-injecting drug, or excess alcohol use in year prior to TB diagnosis

**U.S.-born non-Hispanic

Percent of Persons with TB Diagnosed in a Correctional Facility, 1993-2004



* U.S.-born non-Hispanic

Reported TB Cases, by Completion of Therapy, U.S., 1993–2002

	Overall Completion Rate (%)	Completed within 1 year (%)
White, Non-Hispanic	86	76
Black, Non-Hispanic	85	72
Hispanic	81	73
American Indian/ Alaska Native	88	79
Asian/Pacific Islander	83	76



So, again

Are we making progress?



Health inequity is a public health issue

HEALTH CARE

CDC declares racism 'a serious public health threat'

Rochelle Walensky, the CDC director, said the agency would take steps to address an issue affecting "the health of our entire nation."



Rochelle Walensky is the latest administration health official to highlight the issue of racism in public health. | AP Photo/Susan Walsh, Pool





EQUALITY



EQUITY





Stigmatizing Language and its Effect on Healthcare

RoShonda Booker, BS

April 27, 2021

Heartland National TB Center

What is Stigma?

“Stigma is a mark of disgrace that sets a person apart from others. When a person is labeled by their illness they are no longer seen as an individual but as part of a stereotyped group. Negative attitudes and beliefs toward this group create prejudice which leads to negative actions and discrimination.”

Stigma-Free Society. <https://stigmafreesociety.com/stigma/> Accessed June 16, 2020.

*“A sign or a mark that designates the bearer as *spoiled* and therefore as valued less than *normal* people.”-Goffman E. (1963)*



How Can Stigma Affect TB Care?

- ❖ Contributes to a delay in diagnosis
- ❖ “At-risk individuals report that fear of TB stigma and the social and economic impact of stigma affects their willingness to undergo TB screening and to seek medical care after the onset of symptoms associated with TB.”
- ❖ “Individuals with TB and their health-care providers also identify TB stigma as a cause of non-completion of treatment.”

Courtwright, A., & Turner, A. N. (2010). Tuberculosis and Stigmatization: Pathways and Interventions. *Public Health Reports*, 125(Suppl 4), 34–42.



Words Matter...Choose them Wisely

Don't use

Preferred

Defaulter

✓ Person lost to follow up

TB Suspect

✓ Person to be evaluated for TB

TB Control

✓ TB Prevention and care

TB Case

✓ Person with TB disease





Eliminating Stigmatizing Language

Non-hurtful Replacement Language

Key Terms suggested by the Stop TB Partnership

Use this.....	Not that.....
Adherence / Non-adherence	Compliance / Non-compliance
Person lost to follow up	Defaulter
TB Prevention and Care	TB Control
Person to be evaluated for TB	TB Suspect
HIV-Positive	HIV-infected

HNTC Survey Results

Language suggested by participants

Use this.....	Not that.....
TB Infection	Latent TB
Lack of housing; Under-housed; People experiencing homelessness	Homeless/Homelessness
Immigrant	Alien
Undocumented	Illegal; Illegal alien
Person with TB disease	TB case
Treatment failed	Treatment failure
Missed doses/Non-adherent	Delinquent
Contact Analysis; Contact Elicitation; Contact Identification	Investigation; Investigate
Exposed to TB	TB contact
Tuberculosis	Consumption; White Plague

Stigmatizing language and suggested replacements was identified by an HNTC survey requesting pledgers to identify language that they personally experienced or witnessed.

***This list is non-inclusive.*

Supported by Treatment Action Group (TAG)

Stigma Product

Heartland offers educational material on preferred language to help eliminate TB stigma.

If you would like a copy, please visit Heartland's website for a downloadable copy.

Heartland National TB Center

<https://heartlandntbc.org/>

Cultural humility
is a process of
self-
reflection
and **lifelong**
inquiry...

“One thing I will do in the next
two weeks to improve TB care
for African American patients is
_____”

Share in chat:
Final thoughts

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Heartland National TB Center



RoShonda Booker, BS
Heartland National TB Center



Lisa Chen, MD
Curry International TB Center



LaMisha Hill, PhD
University of California, San Francisco



Kay Wallis, MPH
Curry International TB Center



Abe "Tye" Thomas
Heartland National TB Center



Sheila Davis-Jackson, BA
San Francisco Dept. of Public Health

Continuing Education Units

CME/CEU: 1.50

Successful completion includes:



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WEBINAR



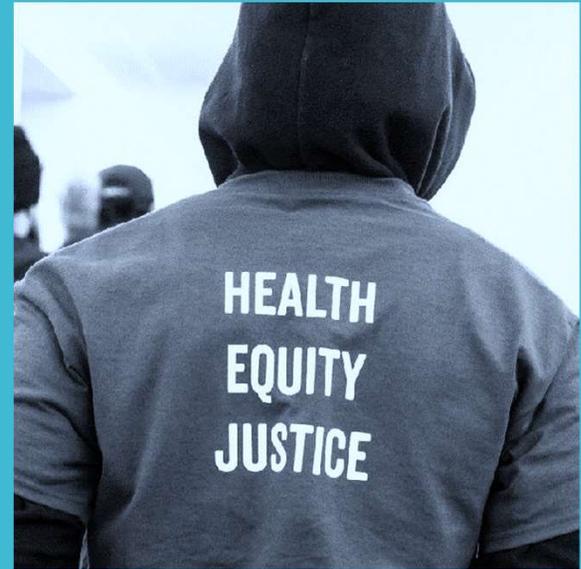
LOG INTO ZOOM WITH
YOUR FULL NAME



COMPLETE & SUBMIT
EVALUATION SURVEY

Thank you for joining us!

***Questions? Please contact us at:
Webworkshop.currytbcenter@ucsf.edu***



HEALTH
EQUITY
JUSTICE

NOTE: Find a list of resource materials in the materials link provided in your final confirmation email.