

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

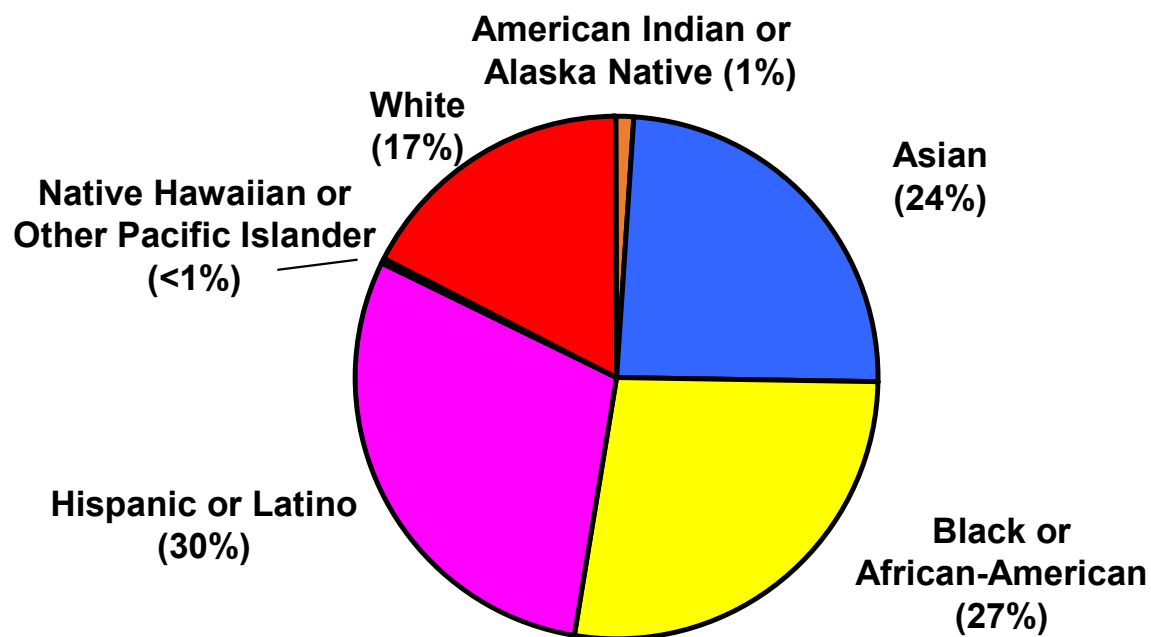
Heartland National TB Center

## 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



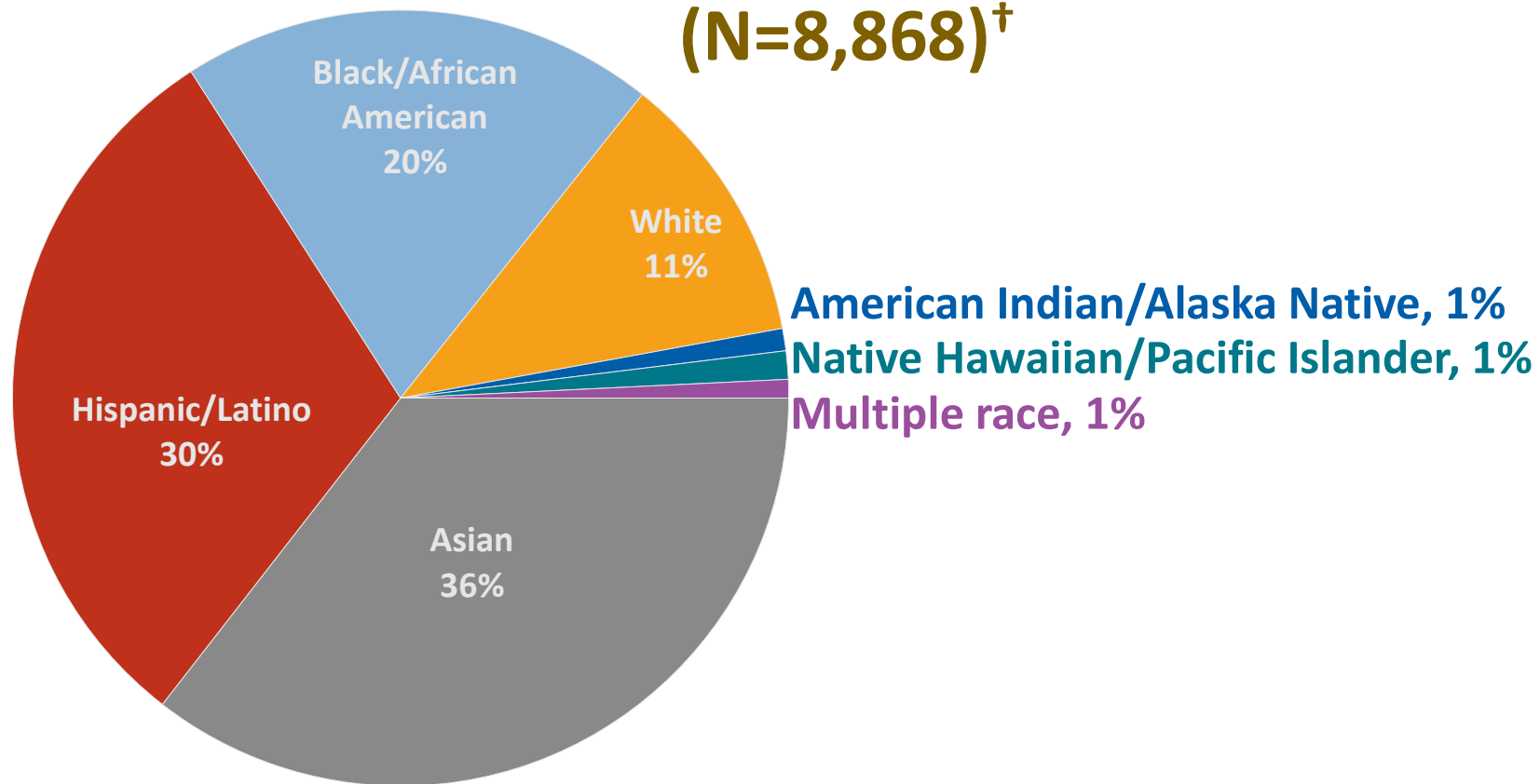
## Reported TB Cases by Race/Ethnicity\* United States, 2006



\*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)<sup>†</sup>

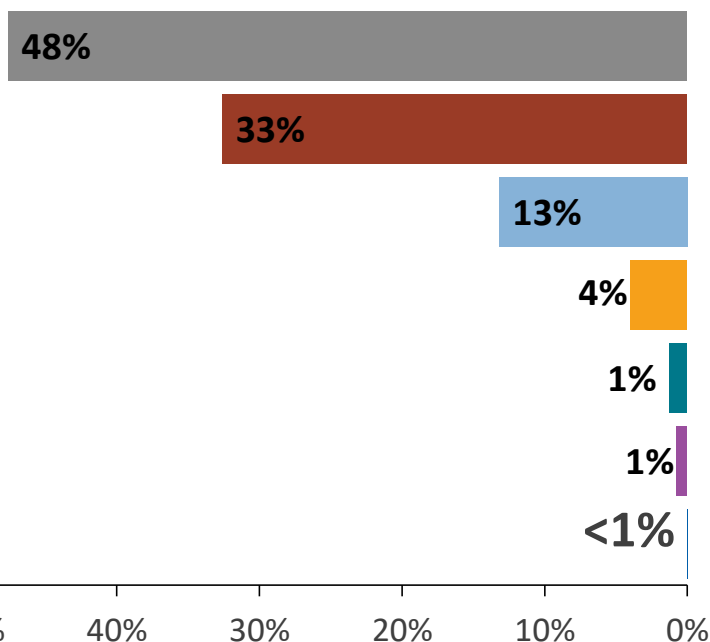


\* All races are non-Hispanic; multiple race indicates two or more races reported for a person but does not include persons of Hispanic/Latino origin.

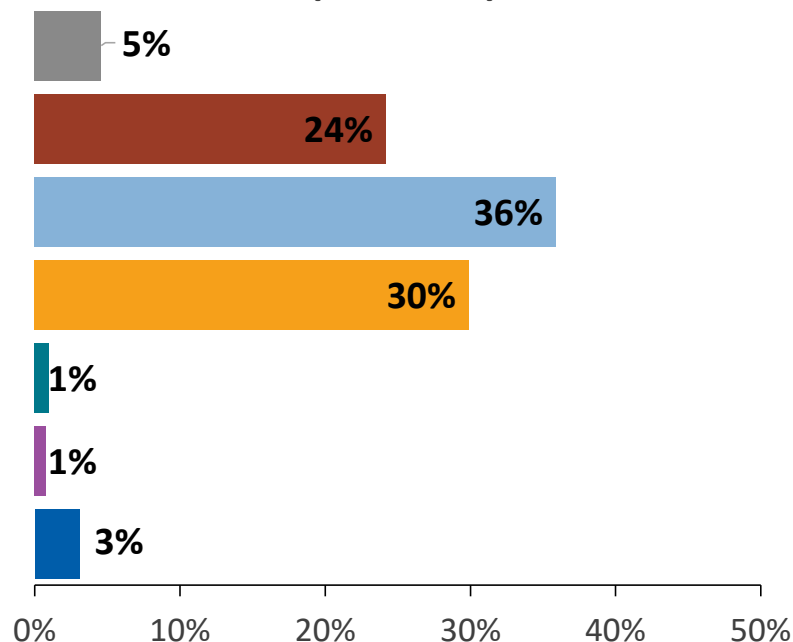
<sup>†</sup> Excludes unknown/missing values

# Reported TB Cases by Origin and Race/Ethnicity\*, United States, 2019<sup>†</sup>

Non-U.S.–born persons<sup>§</sup>  
(N=6,335)



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



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

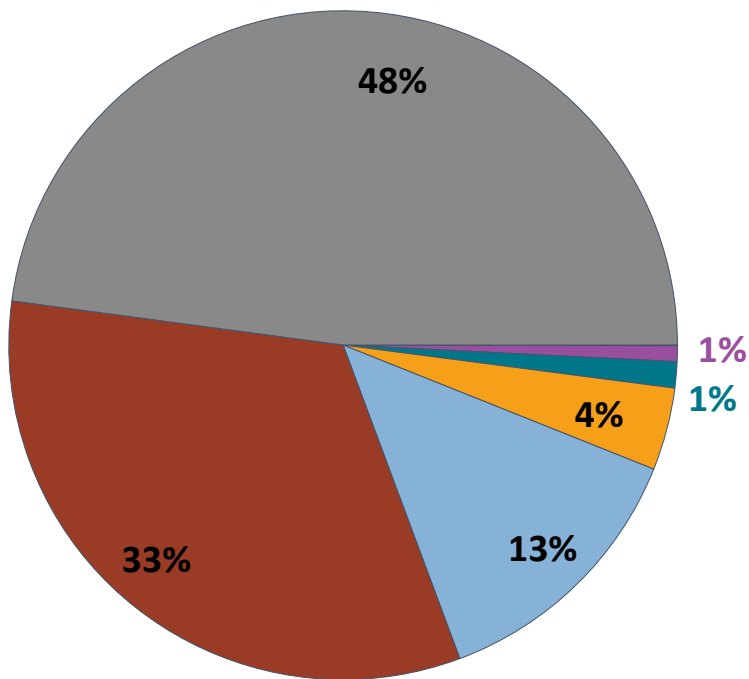
\* All races are non-Hispanic; multiple race indicates two or more races reported for a person but does not include persons of Hispanic/Latino origin.

<sup>†</sup> Percentages are rounded.

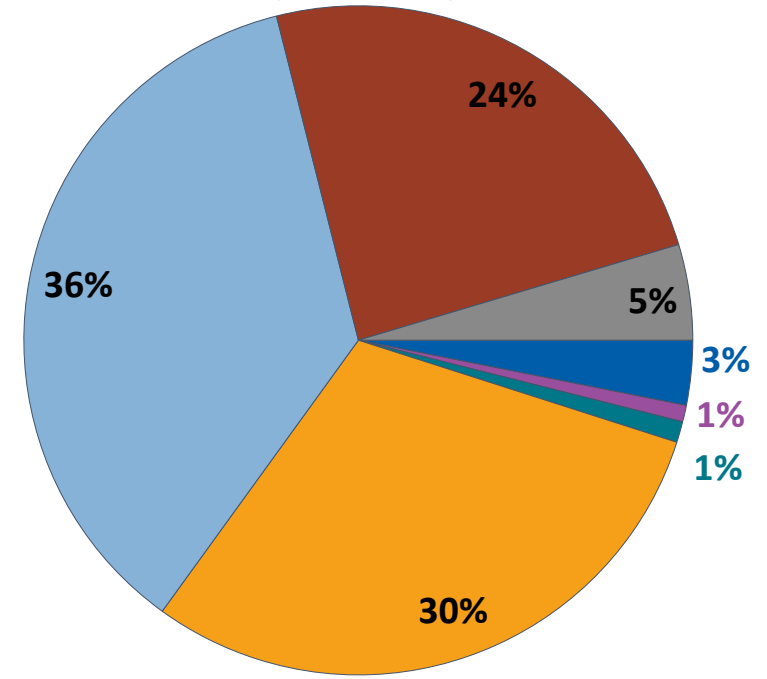
<sup>§</sup> American Indian/Alaska Native accounted for <1% of cases among non-U.S.–born persons (not shown).

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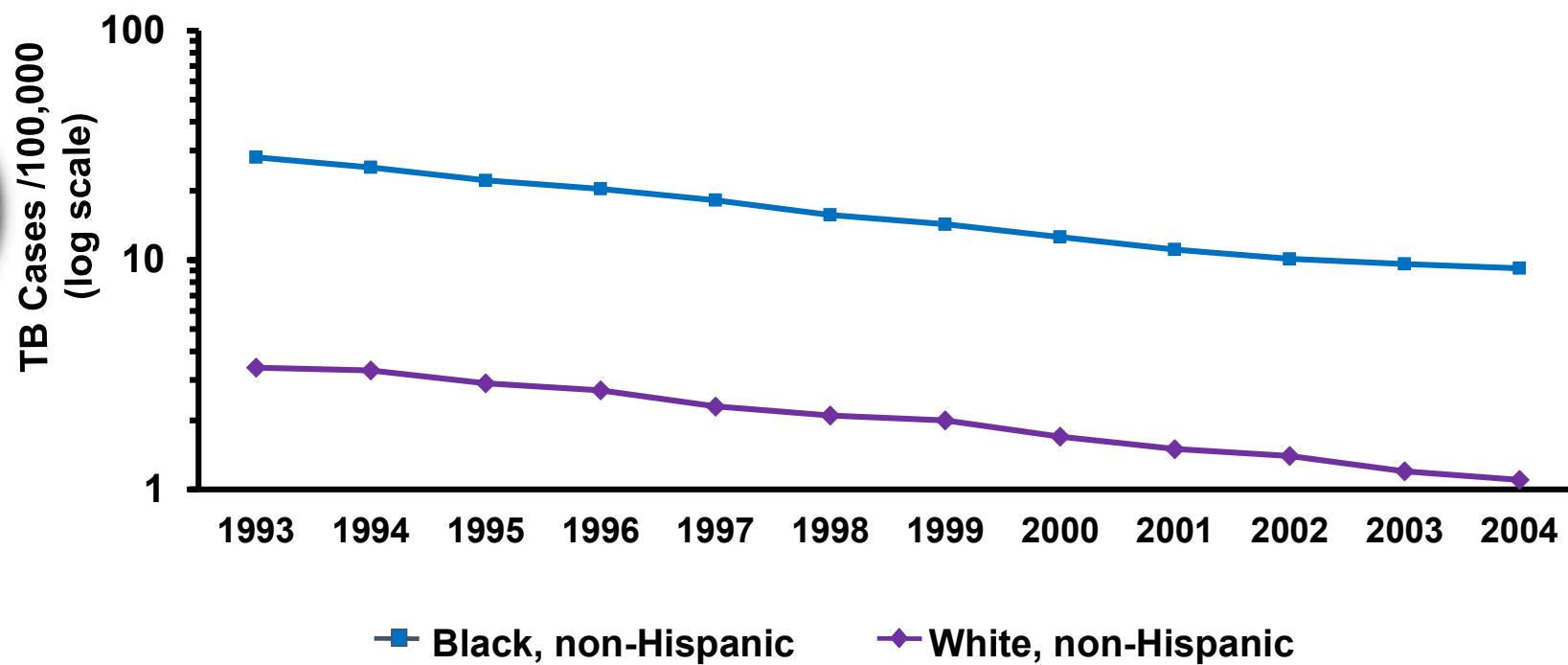
U.S.– born persons  
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White  
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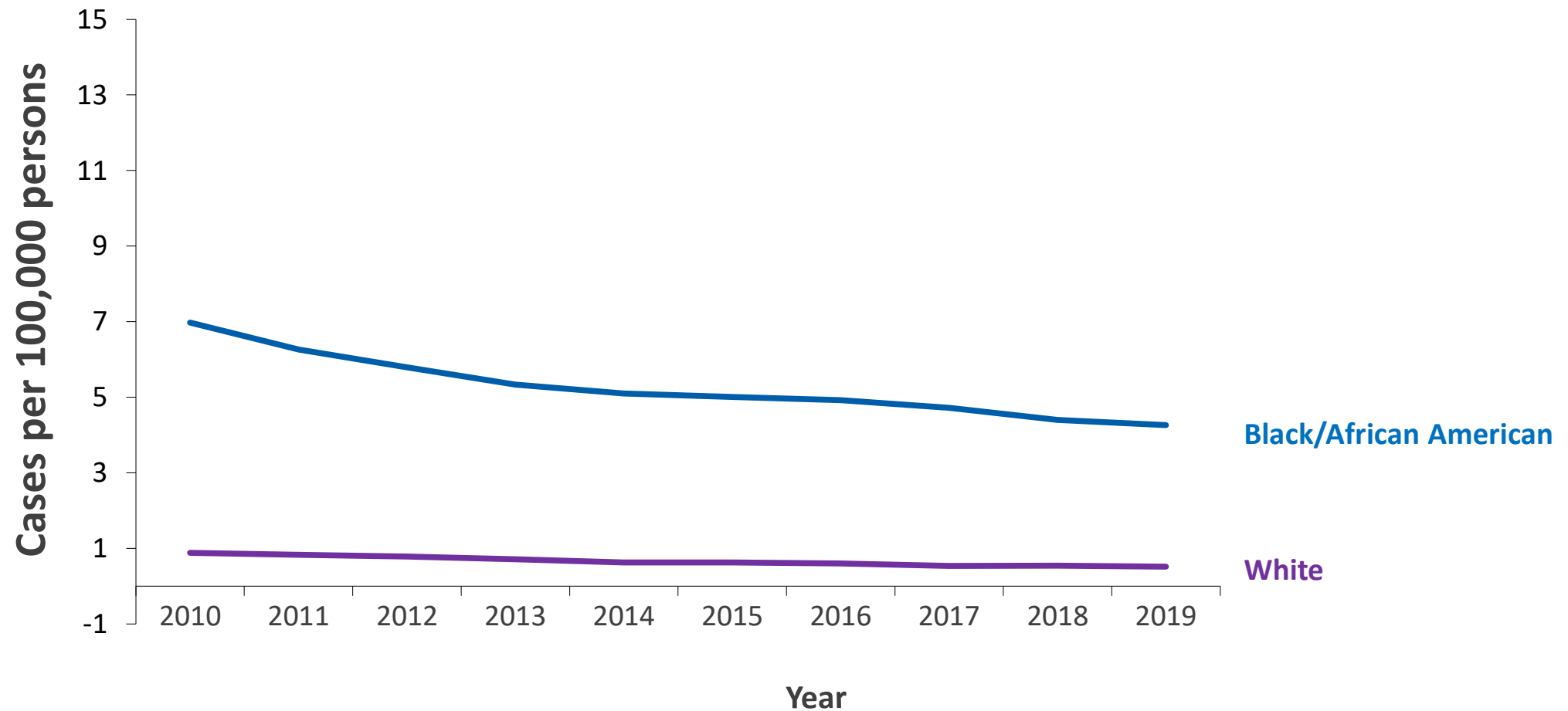
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§ American Indian/Alaska Native accounted for <1% of cases among non-U.S.–born persons (not visible).

## TB Rates in U.S.-born, by Race/Ethnicity, United States, 1993–2004





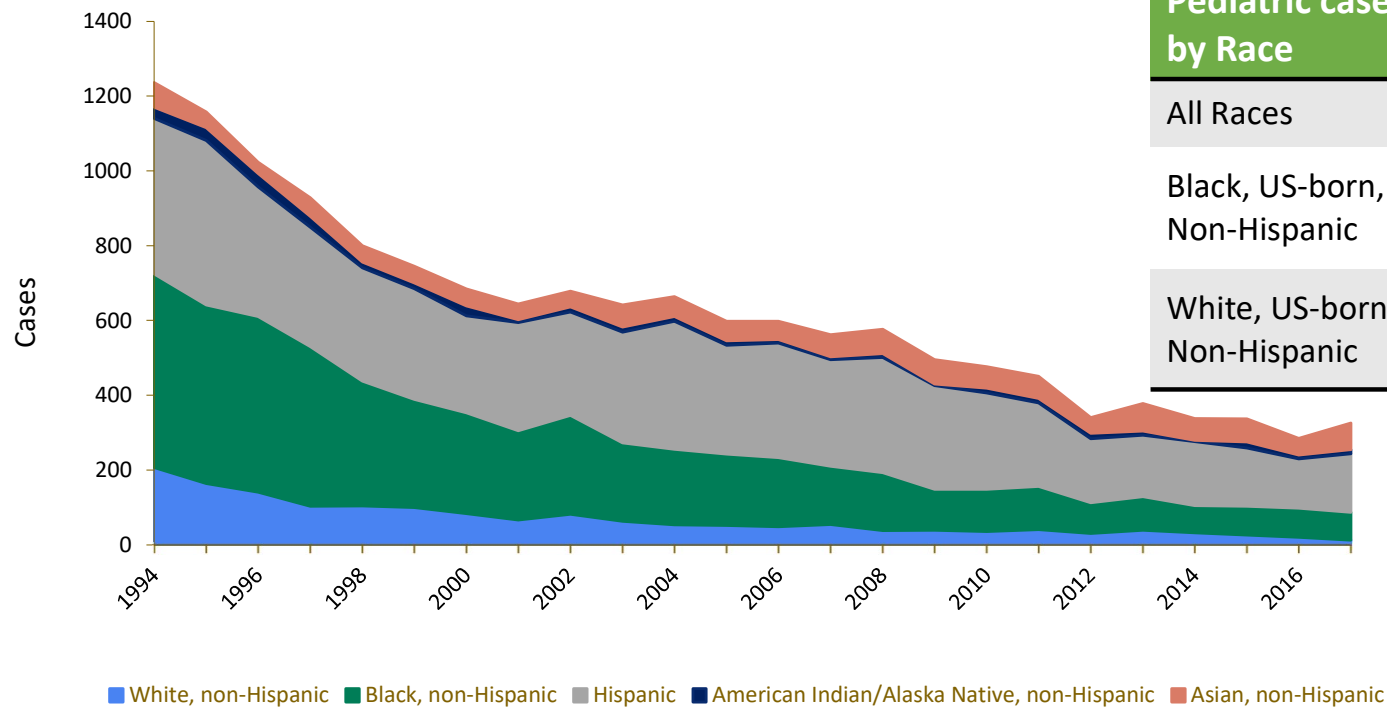
# TB Case Rates by Race/Ethnicity\*, United States, 2010–2019



\*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.

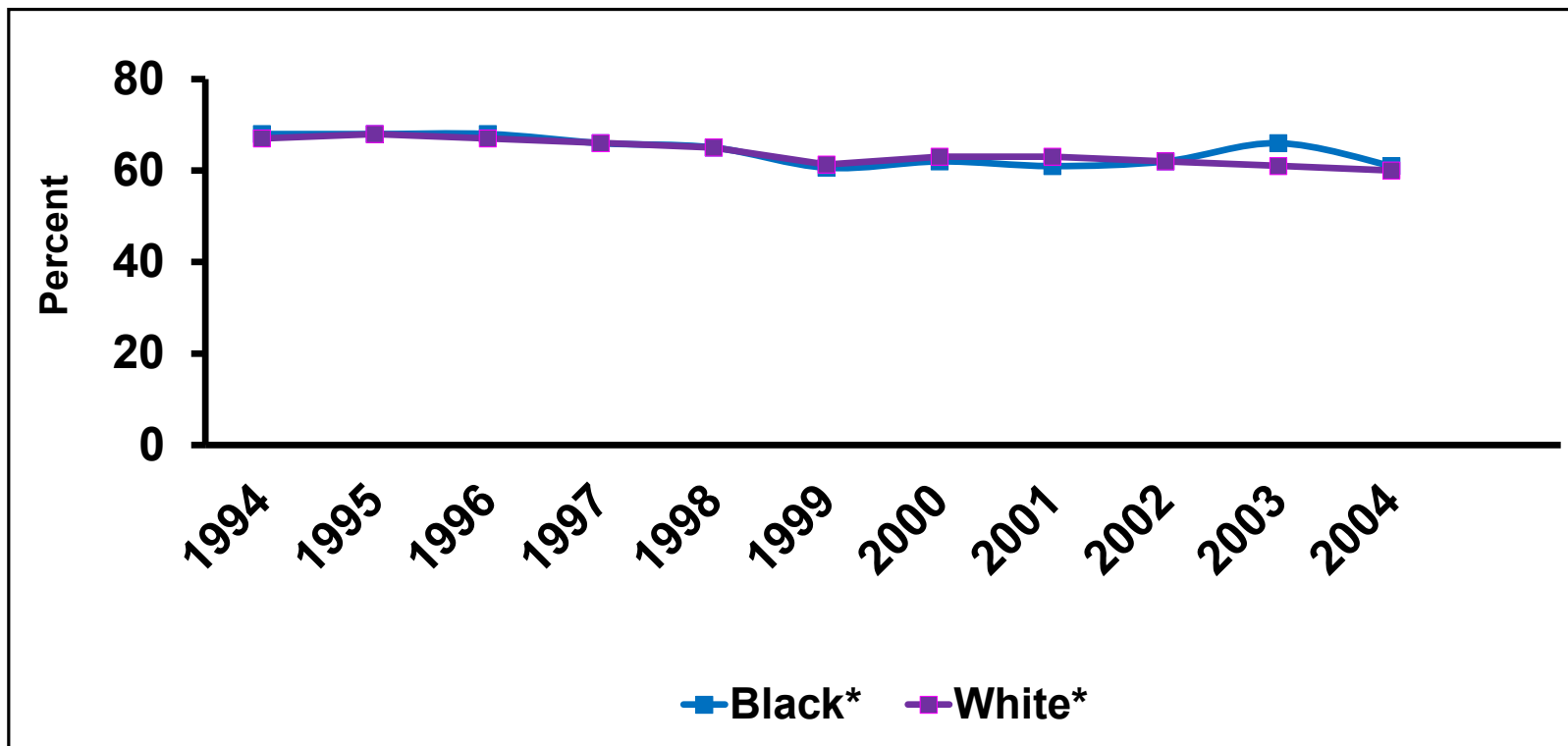
# U.S.-Born Pediatric TB Cases by Race-Ethnicity, 1994–2017

N=15,186



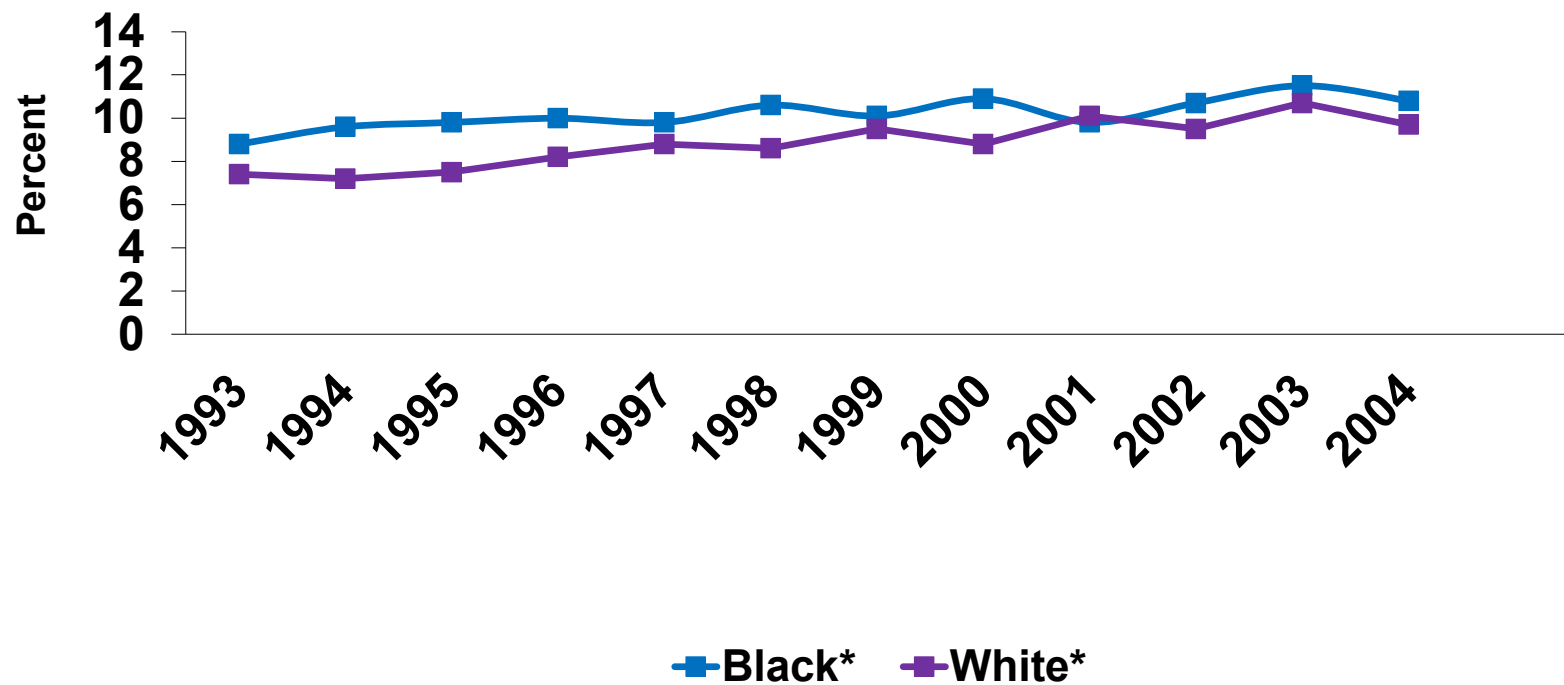
Note: Multiple race/ethnicity and unknown not shown; Native Hawaiian and Other Pacific Islander combined with Asian  
Graph begins in 1994 to match the availability of population data

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



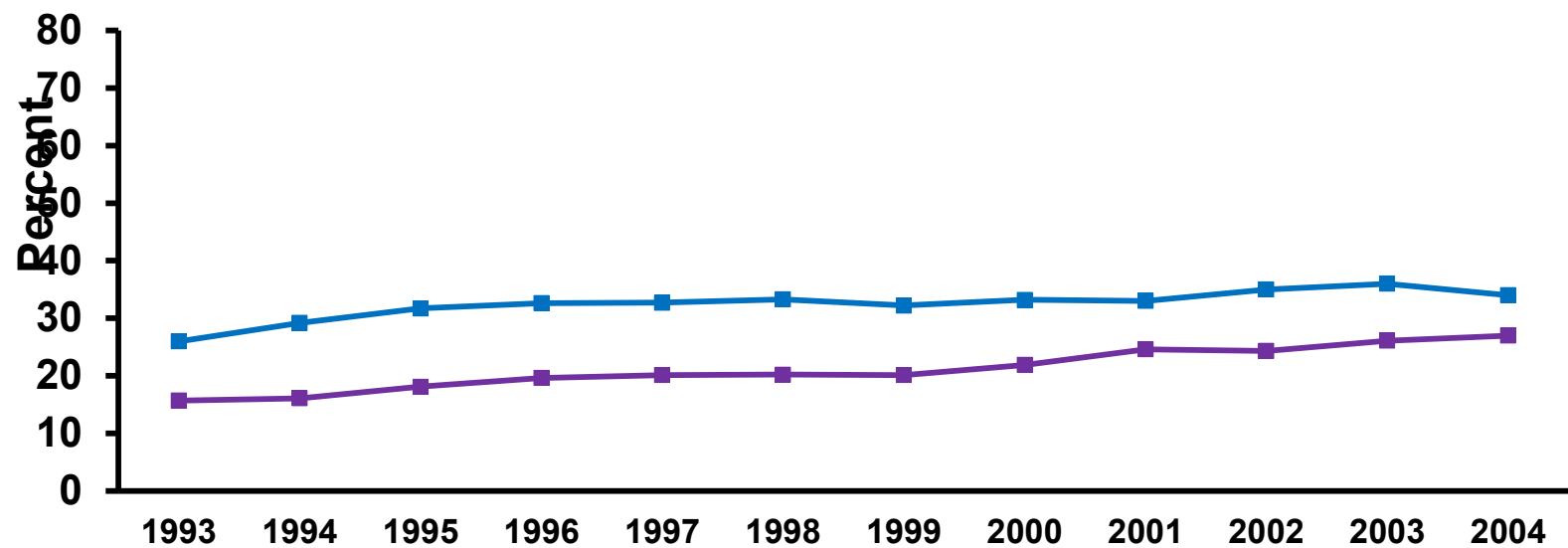
\* U.S.-born non-Hispanic

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



\* U.S.-born non-Hispanic

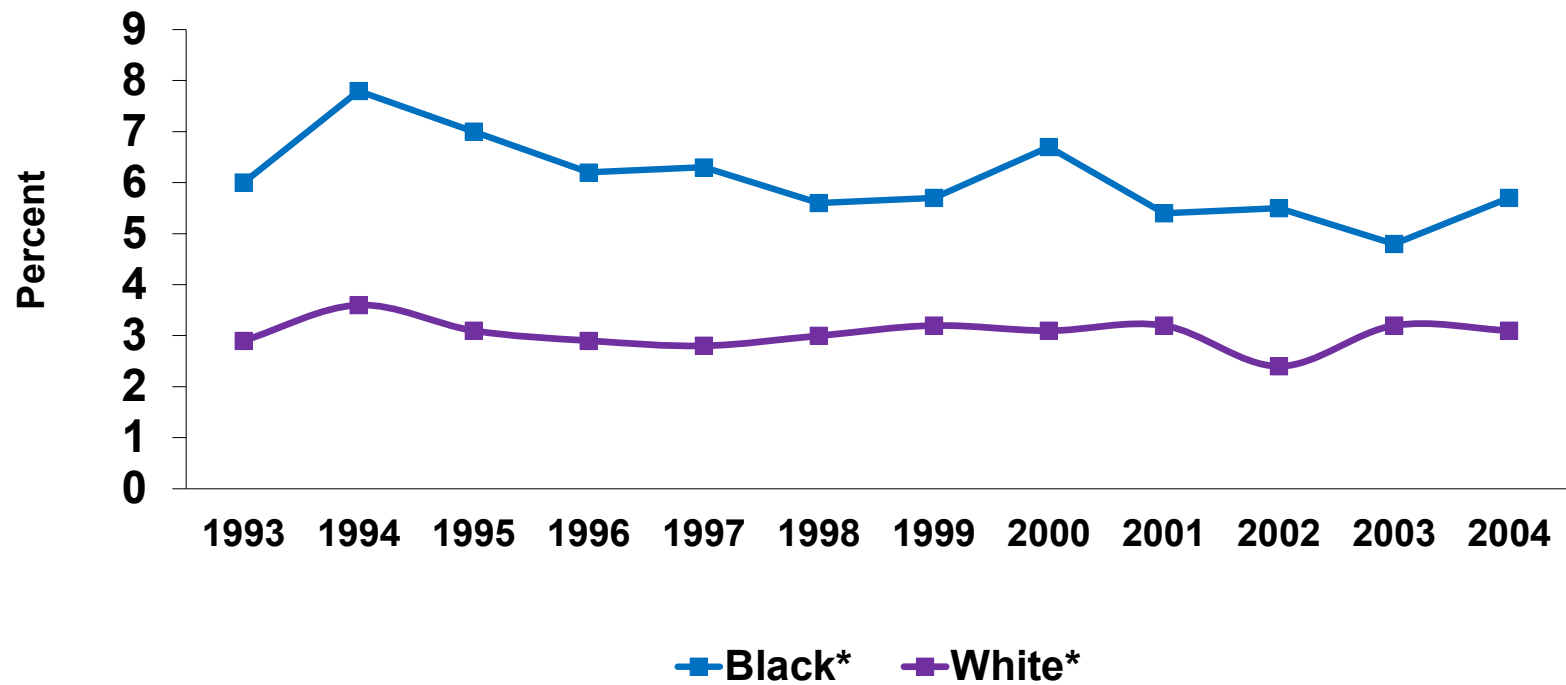
## Percent of TB Cases in Persons with History of Substance Abuse,\* 1993–2004



\*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

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



So, again

Are we making progress?





# Health inequity is a public health issue

HEALTH CARE

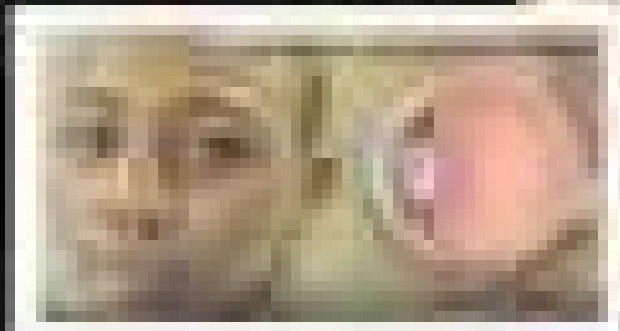
## CDC declares racism 'a serious public health threat'

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**



 **RISE**



# 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

**Lisa Armitige, MD, PhD**  
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



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



**Abe "Tye" Thomas**  
Heartland National TB Center



# Continuing Education Units

CME/CEU: 1.50

Successful completion includes:



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COMPLETE & SUBMIT  
EVALUATION SURVEY



*Thank you for joining us!*

***Questions? Please contact us at:  
[Webworkshop.currytbcenter@ucsf.edu](mailto:Webworkshop.currytbcenter@ucsf.edu)***

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