



Identifying Barriers to Complete Treatment

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Introduction to TB Nurse Case Management
Online

Objective

- Identify potential barriers to completing treatment



Potential Barriers

Barrier: a circumstance or obstacle that keeps people or things apart or prevents communication or progress

- Cultural
- Socioeconomic
- Substance Abuse
- Mental Health
- Homelessness
- Educational
- Health Disparities



Cultural Barriers

- Western Medicine is frowned upon or feared in certain cultures
- Some cultural beliefs dictate that illness is deserved
- Stigma: The stigma attached to tuberculosis is far-reaching and crosses cultural borders.
 - See Heartland's #StopTheStigma campaign
- Some populations view treatment of LTBI as unnecessary or unimportant
- Language



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)

Socioeconomic Barriers

- Time=Money: Everyone's time is valuable
- Employment: time off for treatment
- Transportation: people without a vehicle or available transportation may not be able to commit fully to treatment
- Location: Distance from facility



Substance Abuse

- Competing priority: results in increased missed doses, increased risk for development of resistance
- Fear of increased judgement
- Increased prevalence of Adverse Medication Effects: hepatotoxicity prevalence is increased in persons with regular abuse of alcohol and/or other illicit substances
- Fear of legal repercussions: may be in and out of correctional facilities, may fear “getting caught” by coming into a state/government building



Mental Health

- People with various degrees of mental health issues are greatly underserved in the United States
- Diagnoses such as schizophrenia may alter the patient's perception of your intentions
- Resources may not be available for people living with mental illness
 - May not have money for medications to treat mental illness
 - May not have health insurance to be able to afford to seek treatment for diagnosis
 - Patient may not wish to treat mental health diagnosis and that is OKAY



Lack of Housing

- No address: DOT can be very difficult
- Communication and consistency are key to success
- Limited transportation: public transport, no car, no money for bus or gas
- Can be at increased risk for developing TB disease from weakened immune system: unmanaged comorbidities (HIV, Diabetes), exposure to stressors, and in some, substance abuse
- Need for treatment overshadowed by the stress of trying to survive



Educational

- Reading level
- Educational level
- Know your audience: what do they need to hear to understand your counseling?
- Provide a wide range of educational material, translation services, and illustrative information
- Some people have been taught about TB in a different way and are resistant to new conflicting information



Health Disparities

- Disparities are evident regarding tuberculosis
 - In 2015, TB was reported in 1,995 black, non-Hispanic persons, nearly 21% of all persons reported with TB nationally. Also in 2015, the rate of TB in black, non-Hispanic persons was 5.0 cases per 100,000 population, which is over 8 times higher than the rate of TB in white, non-Hispanic persons (0.6 cases per 100,000 population).
 - Statistics overwhelmingly indicate health disparities in people of color nationwide.
 - We must do our part to recognize these disparities and remedy them.



Communication is Key

- It is the responsibility of the TB healthcare worker to ensure that persons living with TB infection and disease understand their diagnosis.
- Provide open, non-judgmental, lines of communication with patients
- You are not there to alter their lifestyle but to figure out how to help them within that lifestyle.
- Be consistent.
- Show up when you say you will
- Provide services and resources you say you'll provide



Incentives

- Incentives: motivate patients
- Makes treatment worthwhile to the patient
 - Tailored to individual's needs
 - Meaningful to patient
 - Immediate gratification
- Examples:
 - Cash for DOT
 - Clothing
 - Food



Enablers

- Interventions to assist the patient in completing therapy
- Slightly different than incentives: Enables people to seek treatment while still maintaining their lifestyle
- Examples:
 - Bus passes
 - Utility bill/rent payment
 - Childcare
 - Healthcare referrals



Closing

- Components for providing successful TB treatment
 - Compassion
 - Understanding
 - Flexibility
 - Patience

