

**2003 ACET Consultation - TB in America: Disparities in the Southeast**  
**Executive summary**

**Background**

The Advisory Council for the Elimination of Tuberculosis (ACET) and the Centers for Disease Control and Prevention (CDC) cosponsored a consultation with national non-governmental, African-American organizations and agencies whose programs could have an impact on TB control efforts in the African-American population. This was an initial step in addressing the disparity between the tuberculosis (TB) case rates of African Americans and other U.S.-born racial/ethnic groups in the Southeastern United States. The consultation was intended to raise awareness about the disparity, solicit support for eliminating TB in U.S. born African Americans, and develop recommendations for accelerating the decline in TB rates among U.S.-born African Americans in the Southeastern states.

**The Consultation**

The consultation, entitled “TB in America: Disparities in the Southeast”, was held on May 13 and 14, 2003, at the Sheraton Colony Square Hotel in Atlanta. Approximately 40 people attended this consultation (not including observers from CDC). The participants comprised a diverse group that included academicians, health care providers, public health leaders, policy- and decision-makers, religious and community leaders, state and local health department representatives, and others who represented a broad spectrum of views.

The first day of this consultation provided participants with an overview of the TB problem and more specific information about TB in African Americans. On the second day, participants were assigned to smaller breakout groups and asked to develop specific recommendations for accelerating the decline in TB rates among U.S.-born African Americans in the Southeastern states.

During the breakout sessions the participants were asked a number of predetermined questions that covered several major topics, including level of community TB knowledge, how to increase awareness of the TB problem, how to mobilize community resources, and how to enhance relationships between TB control programs and African-American communities in order to improve TB elimination activities.

**Results**

The discussion groups identified a number of unmet needs and provided important comments and specific recommendations for activities to raise awareness and stimulate actions to address and reduce TB in racial/ethnic minorities. These are attached to this executive summary. The following is a summary listing of the needs and recommendations:

## Needs

- Reframing TB disparities will be important in creating political will.
- Media and available technology need to be used for the dissemination of information (realizing that the target population may not use cell phones and computers).
- Communities and health departments must “come together” to provide holistic care that addresses more than TB care.
- The private provider-public health disconnect must be addressed.
- Internal community issues that perpetuate and magnify communicable diseases must be addressed locally.
- “Southeast” should be defined as the geographic area where disparities are greatest and there are enduring historical influences of racism, discrimination, and exploitation.
- Strategies need to reflect knowledge of the environment in which the TB patients live.
- Successful models (e.g., Mississippi) in the South exist and key elements/best practices of those programs need to be disseminated.
- The African-American community needs to hear that TB is curable, and preventable, and not an inherited condition.
- The African-American community needs easier-to-understand educational material.
- Advocates for TB elimination need one-page fact sheets describing the TB problem at the state and/or local level for presenters of TB information and advocates to hand out to community and political leaders.
- CDC needs to do more evaluation of existing TB programs in predominantly African-American communities.
- Notable figures are needed to advocate for TB elimination and reduce the associated stigma.
- The community needs to become more outraged about the TB problem, stop being so nice.
- The medical community and legislators (Congressional Black Caucus) need to be educated about the TB problem and the disparity in racial/ethnic populations.
- A national advocacy group is needed to develop relationships with a variety of groups.
- More publications on the disparity issue in the Southeast are needed to help spread the word.

## Recommendations

- Send TB experts to communities and community organizations to speak about the problem and what we can do about it.
- Use a number of venues to get the message out including public service announcements, bill boards, former patients, National Minority Health Education Network, media resources that have a largely African-American

audience, direct person-to-person (even door-to-door) education, and local gathering points (churches, shelters, emergency rooms, liquor stores).

- Seek out and partner with the private sector, CBOs, and other organizations that serve the African-American community.
- Involve public school systems and form partnerships with historically black institutions of higher learning.
- Health departments should strive to ensure that the racial/ethnic composition of their staff is similar to that in the communities.
- Place TB on the Surgeon General's Health Disparities Report, and on the agenda of the American Public Health Association conference.
- CDC should improve or establish relationships with a variety of organizations such as the National Medical Association, the Black Women's Project, and African-American fraternities and sororities.
- Improve the relationships between the health departments and African-American communities. TB programs must acquire a better understanding of black culture, maintain a level of respect for the individual, evaluate and improve community access to TB services, and create more community coalitions.

## **Next Steps**

At the end of the consultation the participants were brought back together to report on their discussions and identify the next steps. Many of the participants stated their intention to inform their organization's leadership about the TB disparity and were willing to work together on future projects. In addition, the participants identified the following specific next steps:

1. Prepare a letter to be signed by participants from nongovernmental organizations and send it to Secretary Thompson and key legislators requesting their attention to this problem and requesting that TB be included in the Surgeon General's Health Disparities Initiative. Participants also stated that they would attempt to get other affiliated or like organizations to sign the document as well.
2. ACET will also prepare a report on the consultation for Secretary Thompson.
3. The working group will circulate electronic copies of the participant list to facilitate ongoing communication and dissemination of information.
4. Specific invitations were issued during the consultation to have CDC present relevant data and latest TB treatment recommendations at upcoming meetings of NMA and NAACP.
5. The National Coalition to Eliminate Tuberculosis (NCET) will invite the participating organizations to join NCET.