Stop TB in the African-American Community
Summit Draws More Than 100

By Nickolas DeLuca, PhD (CDC) Rachel Royce, PhD (RTI International), and Charles Wallace (Texas Department of State Health Services)

More than 100 individuals from a myriad of organizations gathered to participate in the "Stop TB in the African-American Community" summit which took place May 16–17 2006, at CDC's new Tom Harkin Global Communications Center in Atlanta. The participants met to discuss the nature of this public health problem, exchange strategies, and identify ways to help address tuberculosis in the African-American community. The summit was sponsored by CDC's Division of Tuberculosis Elimination and RTI International. The purpose of the summit was to

1. raise awareness about the problem of tuberculosis (TB) in the African-American community, and
2. create links and build networks that will lead to ongoing activities and strategies to decrease TB in the African-American community.

In 2005, CDC provisionally reported TB in 3,927 non-Hispanic blacks, 28% of all persons reported with TB nationally. The proportion of TB in black, non-Hispanic persons is even greater if only U.S.-born persons reported with TB are examined. In 2005, 45% of TB cases reported in U.S.-born persons were among non-Hispanic blacks. Also in 2005, the TB case rate for this population was more than 8 times higher than the rate in white, non-Hispanic persons.

The summit included keynote addresses from Dr. Louis Sullivan, President Emeritus, Morehouse School of Medicine and former Secretary of Health and Human Services; and Dr. Garth Graham, Deputy Assistant Secretary for Minority Health, Office of Minority Health, U.S. Department of Health and Human Services. CDC leaders also addressed the group, including Yvonne Lewis of the Office of...
Minority Health and Health Disparities; Dr. Kevin Fenton, Director of the National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (proposed); and Dr. Kenneth Castro, Director of the Division of Tuberculosis Elimination.

Summit participants learned about state-of-the-art research and interventions addressing TB in the African-American community, and learned directly from a panel of patients about their experience having tuberculosis. The majority of the summit was devoted to participants working in small groups to strategize actions that their organizations may be able to implement to help eliminate tuberculosis in the African-American community. Participants included community and religious leaders, health care providers, public health leaders, policy and decision makers, state and local health department staff, communications professionals, academicians, and others.

The results of the group work yielded a compilation of specific goals and action items that summit participants committed to trying to achieve in the next year. A summary of all of the identified action items is forthcoming. Summit participants will maintain communication throughout the next year and measure progress towards implementing the action items.

Although modern medicine can prevent and cure tuberculosis, only the concerted efforts of the community in partnership with public health and medicine will ensure that tuberculosis is eliminated from the African-American community. These partnerships, fostered by the summit, are a key component to mobilizing support for TB elimination as outlined in the 2000 Institute of Medicine's Report, *Ending Neglect: The Elimination of Tuberculosis in the United States*.

**About the authors**

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