

# Combating Tuberculosis for Homeless Population in Downtown Eastside

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# Downtown TB Program

- ★ The program started since 1991
- ★ Consists of one nurse and an outreach worker
- ★ Responsible for active and latent TB treatment; active case finding; contacts tracing and education



# Downtown Eastside (DTES) Profile

- ★ **The Downtown Eastside of Vancouver B.C. (DTES) consists of a 10 square block area**
- ★ **The population is estimated to be 16900 and 659 people living on street (Carnegie community project September 2008)**
- ★ **The community is characterized by high rates (30%) of substance abuse, homelessness, extreme poverty, mental health and disability (Pivot legal society)**
- ★ **Extremely high rates of HIV (35%), and Hepatitis C (90%) in IVDU population (Pivot legal society)**



# TB rates in BC and Canada 2001-2007

**Tuberculosis incidence rates per 100,000 in BC and Canada, 2001-2007**

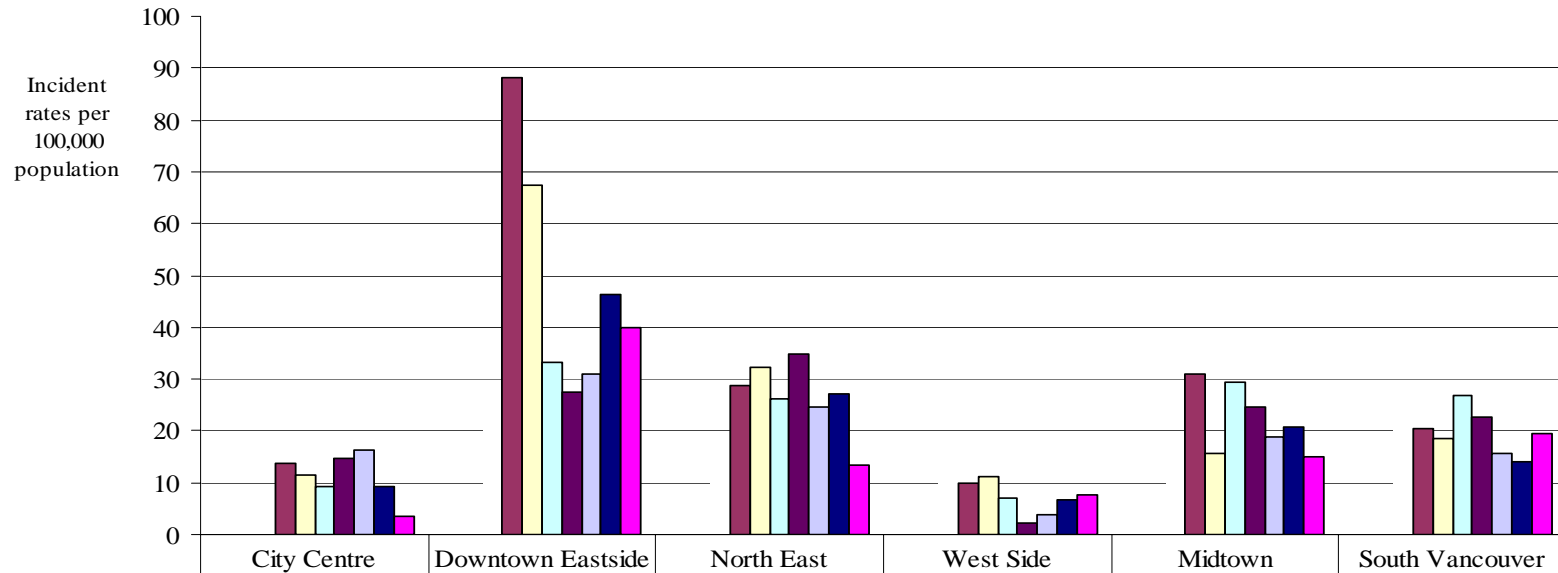


	2001	2002	2003	2004	2005	2006	2007
BC Cases	391	300	324	301	277	336	290
BC Rates	9.6	7.3	7.8	7.4	6.5	7.8	6.6
Canadian Rates	5.7	5.3	5.1	5.0	5.1	5.1	4.7

BC Populations from PEOPLE 33, BC Stats; Canadian Rates from Public Health Agency Canada "Tuberculosis in Canada 2007 Pre-release".

# TB incidences rates per 100,000 in Sub-Vancouver area 2001-2007

**Tuberculosis incidence rates per 100,000 in sub-Vancouver areas, 2001-2007, B.C.**



	City Centre	Downtown Eastside	North East	West Side	Midtown	South Vancouver
TB Cases 2005	17	17	25	5	16	21
TB Cases 2006	10	26	28	9	18	19
TB Cases 2007	4	23	14	10	13	26
■ TB Rates 2001	13.7	88.1	28.6	9.8	31.1	20.6
■ TB Rates 2002	11.6	67.4	32.4	11.1	15.5	18.5
■ TB Rates 2003	9.2	33.1	26.1	7.1	29.4	26.7
■ TB Rates 2004	14.8	27.5	34.9	2.3	24.6	22.6
■ TB Rates 2005	16.2	31.1	24.7	3.8	18.8	15.7
■ TB Rates 2006	9.2	46.3	27.3	6.8	20.9	14.1

# Strategies to decrease TB incidence in DTES

- ★ Early and increased case detection by outreach screening
- ★ Efficient contacts tracing
- ★ Compliance of active and prophylaxis treatment
- ★ A competent referral system is critical to coordinate efforts and ensure treatment success.
- ★ Providing housing and social services are effective in treatment compliance



# Collaboration with Portland Hotel Society(PHS) to decrease TB incidence in DTES

- ★ Routine screening programs (skin testing and Chest X-ray )
- ★ Portland staff play a significant role in contacts tracing
- ★ Portland staff administrate TB medications to their residence ensuring compliance
- ★ Residential care in PHS includes trained health staff enabling appropriate referrals and follow up
- ★ Low threshold barriers facilitate housing to those homeless active TB clients



# Conclusion

- ★ Housing is an essential component in reducing TB in the Homeless Population. Important in that is the comprehensiveness and quality of that housing. Building relationships characterized by mutual respect and dignity with the homeless is crucial in delivering effective TB treatment and reducing Tuberculosis in a marginalized population. The Portland Hotel Society has created a community development model that addresses the needs of the Downtown Eastside population.

