

# Health System Parameters and Racial/Ethnic Disparities in Gonorrhea

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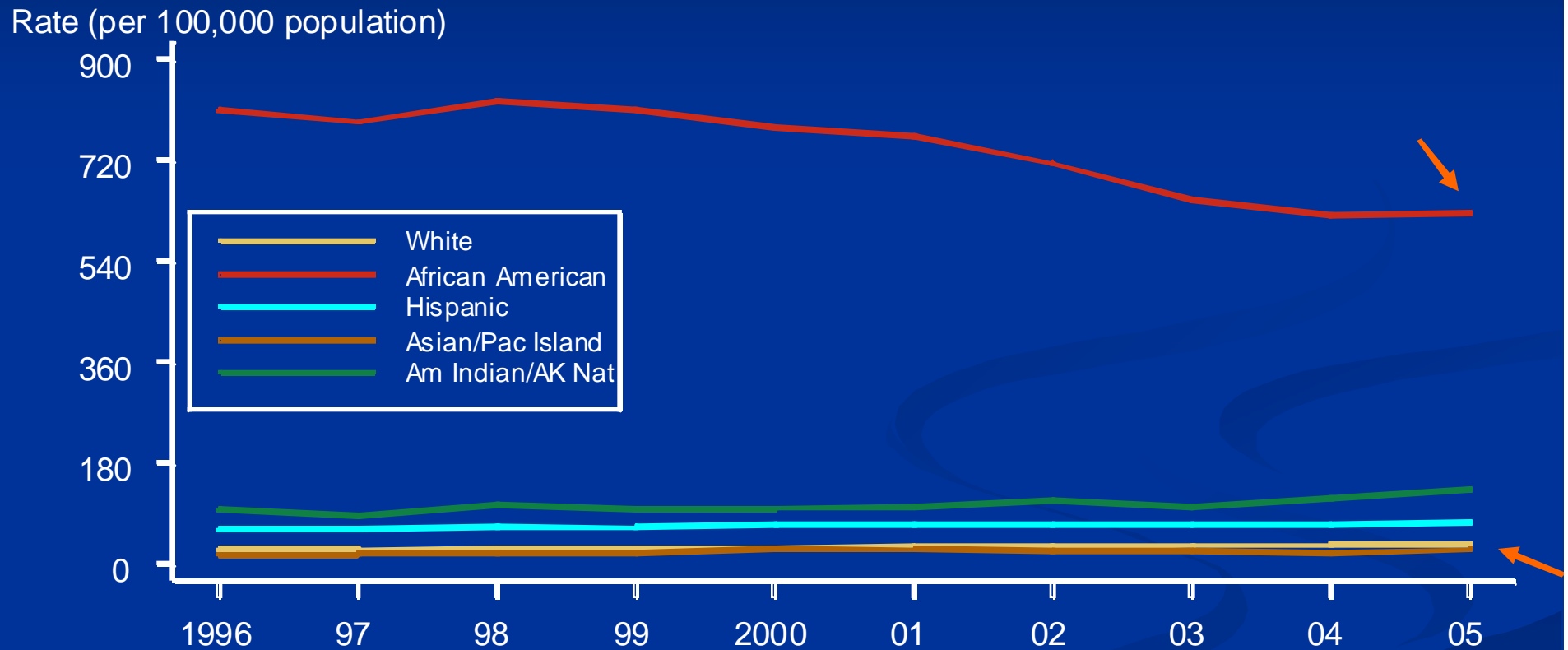


# Objectives

- To review the data on gonorrhea disparities
- To explore where care for gonorrhea is sought
- To examine health system level factors that impact STD disparities
- To outline current and proposed strategies to mitigate factors that negatively impact STD disparities



# Gonorrhea — Rates by race/ethnicity, 1996–2005



Source: CDC STD Surveillance, 2005

# Gonorrhea rates

- Caveat: Case report data has biases
  - Public clinics more likely than private clinics to report cases
  - Public clinics more likely to see African American patients



# Gonorrhea prevalence

- Support the findings of racial/ethnic disparities
  - Among persons aged 14 to 39 years participating in the 1999 – 2002 National Health and Nutrition Examination Survey (NHANES)
    - Blacks - **1.19%**
    - Mexican Americans - **0.41%**
    - Whites - **0.07%**
  - Rates for Blacks were 17 times higher than rates for whites.

(Datta SD, Sternberg M, Johnson RE et al. Gonorrhea and chlamydia in the US among persons 14 to 39 years of age, 1999 to 2002. *Annals of Internal Medicine* 2007; 147(2):89-96)



# Gonorrhea prevalence

- Among persons aged 18 to 26 years participating in the National Longitudinal Study of Adolescent Health (Add Health) from 2001-2002
  - Blacks - **2.13%**
  - Latinos - **0.2%**
  - Whites - **0.1%**
- Rates for Blacks were over 21 times higher than for whites

(Miller WC, Ford CA, Morris M et al. Prevalence of chlamydial and gonococcal infections among young adults in the United States. JAMA 2004;291(18):2229-36)



Sexual mixing patterns

Population prevalence  
and incidence

Individual risk of STI  
acquisition

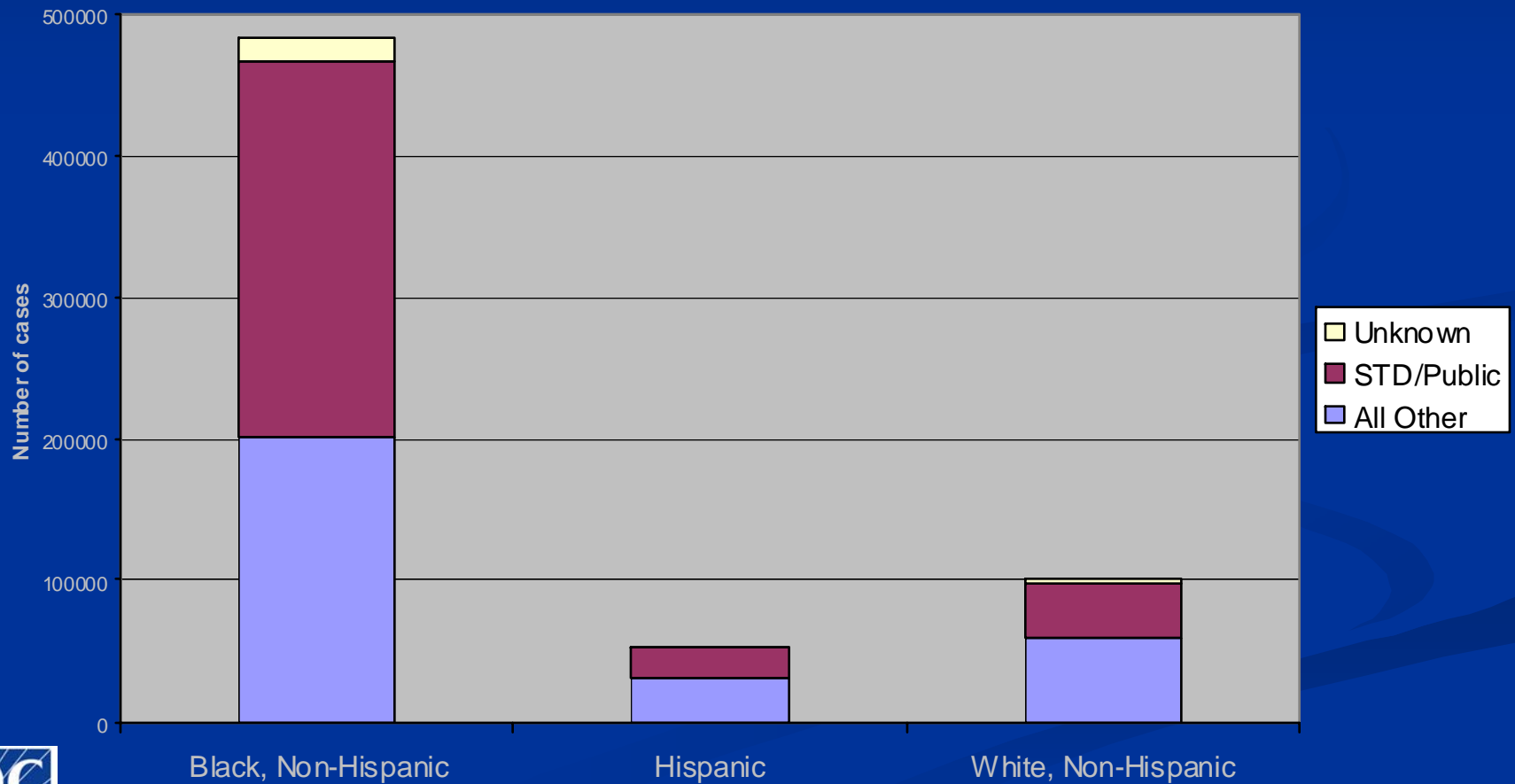
Individual risk of sequelae  
(PID, infertility, ectopic  
pregnancy)

Access to Care  
Quality of Care  
Acceptability of Care



# Where do people get care for gonorrhea?

MALE cases 2002-2006 (aggregated)

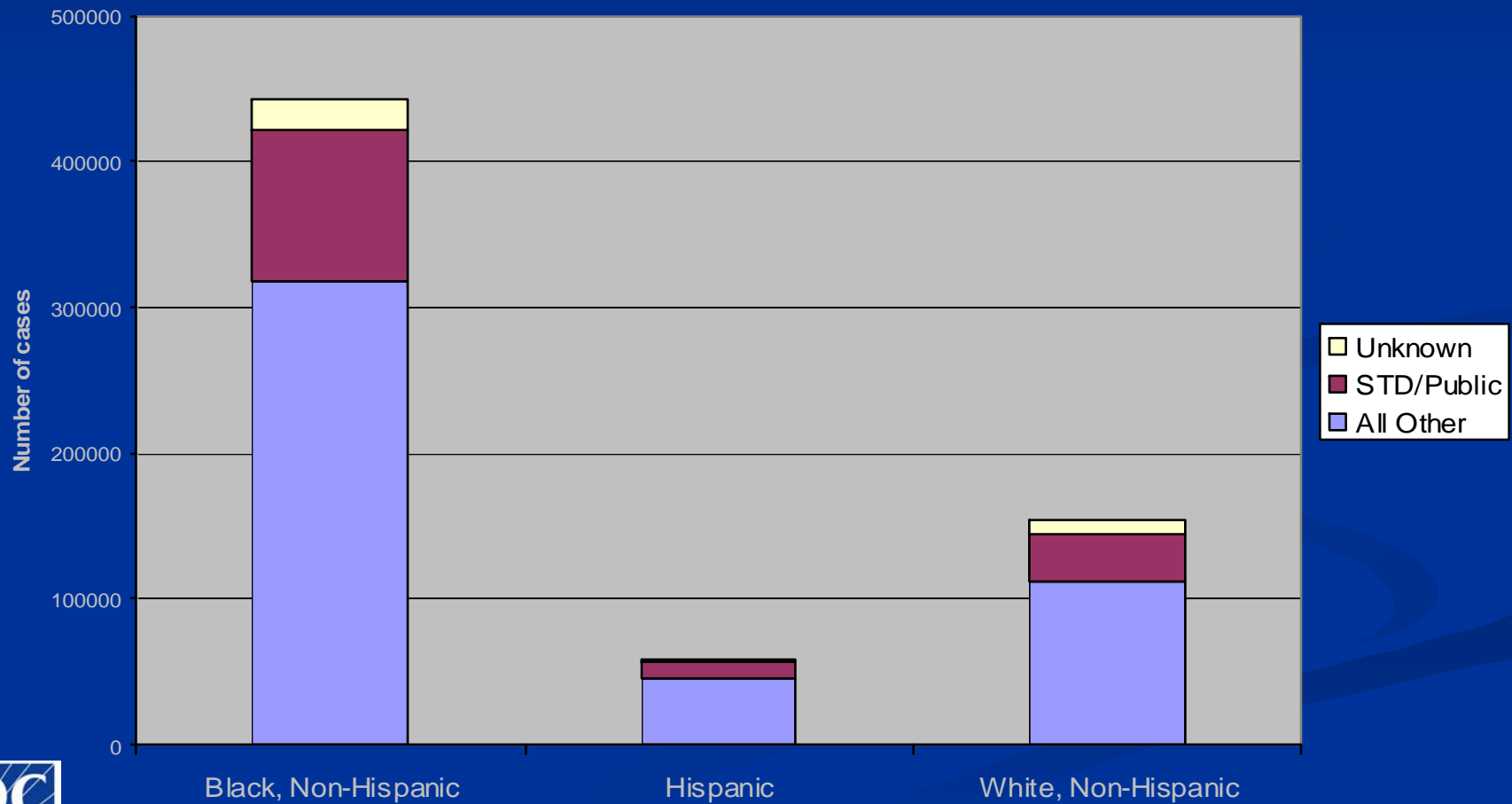


Source: CDC STDNet surveillance



# Where do people get care for gonorrhea?

FEMALE cases 2000-2006 (aggregated)



Source: CDC STDNet surveillance

# Health System factors affecting gonorrhoea disparities

- Access to care



# Health System factors affecting gonorrhea disparities

- Access to care
  - Public STD clinic funding constraints have led to
    - Reduction in services



## Budget Ax Hits Jail's STD Screening

Produced by **Chip Mitchell** on Thursday, May 17, 2007

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The Cook County Jail last year diagnosed almost 1,500 cases of sexually transmitted diseases.

This year the number is expected to be much lower.

That doesn't mean the jail is healthier. It means fewer inmates are getting tested.

The county has curtailed a nationally recognized program of screening detainees for sexually transmitted diseases. It was a move to save money.

Health experts say it's a crisis for people in the jail -- and the communities they return to.

Chicago Public Radio's Chip Mitchell has more.



# Health System factors affecting gonorrhea disparities

- Access to care
  - Public STD clinic funding constraints have led to
    - Reduction in services
    - Institution of fees or co-payments for service
      - In one city, this resulted in significantly reduced clinic attendance, especially among the poorest patients, and decreased numbers of gonorrhea diagnoses

(Reitmeijer CA, Alfonsi GA, Douglas JM et al. Trends in clinic visits and diagnosed Chlamydia trachomatis and Neisseria gonorrhoeae infections after the introduction of a co-payment in a sexually transmitted infection clinic. Sex Trans Dis 2005;32(4):243-6)



# Health System factors affecting gonorrhea disparities

- Access to care

- Private clinics

- Lack of insurance is a significant barrier for African-Americans and Latinos

- Though African Americans and Latinos each make up only about 12.5% of the US population, 17% of uninsured persons are African American and 25.8% of uninsured persons are Latino

(Groman R, Ginsburg J. Racial and ethnic disparities in health care: A position paper of the American College of Physicians. *Annals of Internal Medicine* 2004; 141:226-32)



# Health System factors affecting gonorrhea disparities

- Quality of care
  - Public STD clinics
    - Inefficiencies
      - Limited hours of operation, long wait times, etc
    - Advantage: Comprehensive STD care



# Health System factors affecting gonorrhea disparities

- Quality of care
  - Private clinics and Emergency Departments
    - Primarily treatment of symptomatic infections
      - Even symptomatic patients often do not get effective treatment before leaving the ED

(Bachman LH, Pigott D, Desmond R et al. Prevalence and risk factors associated with gonorrhea and chlamydia infection in at-risk females presenting to an urban emergency department. Sex Trans Dis 2003; 30(4):335-9)
    - Missed opportunities for risk evaluation and screening
    - Little to no partner services
  - Lack of Spanish-speaking providers and interpretation services are barriers for both the public and private sectors





# Strategies to address racial disparities in gonorrhea rates

- Last June, CDC Division of STD Prevention convened a *Consultation to Address STD Disparities in African American Communities*, during which several suggestions were raised :
  - Engage and involve affected communities in developing solutions
  - Combine messages about STD disparities and frame them in a broader context to minimize stigma (i.e. sexual health)



# Strategies to address racial disparities in gonorrhea rates

- Work collaboratively with colleagues in HIV
- Address ‘upstream’ issues that influence disparities, such as poverty, insurance coverage, incarceration rates, educational attainment and racial inequality



# CDC activities to address health systems parameters affecting STD disparities

- Developing an internal infrastructure to address disparities issues, including Division and Center level workgroups
- Collaborating with external partners on strategies formed at the consultation



# CDC activities to address health systems parameters affecting STD disparities

- Facilitating collaboration between local community organizations and health departments via programmatic initiatives
- Developing and implementing quality of care indicators to improve care delivery at public STD clinics



# CDC activities to address health systems parameters affecting STD disparities

- Highlighting the issue of STD disparities for multiple stakeholders through various communications
  - STD website
  - Fact sheets / Talking points
  - Peer-reviewed publications
  - Dear Colleague letters



# Thank you!

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*The findings and conclusions in this presentation are those of the author and do not necessarily represent the views of the Centers for Disease Control and Prevention or the Agency for Toxic Substances and Disease Registry*

