Welcome to the webinar!

INCREASING HEPATITIS B AWARENESS AND EDUCATION AMONG NAIL SALON WORKERS

September 27, 2018
Hep B United is a national coalition that was established by the Hepatitis B Foundation and the Association of Asian Pacific Community Health Organizations to address the public health challenge of hepatitis B.

The coalition is dedicated to reducing the health disparities associated with hepatitis B by increasing awareness, screening, vaccination, and linkage to care for high-risk communities across the United States.

The Hepatitis B Foundation is a national nonprofit organization dedicated to finding a cure and improving the quality of life for those affected by hepatitis B worldwide.

Our commitment includes funding focused research, promoting disease awareness, supporting immunization and treatment initiatives, and serving as the primary source of information for patients and their families, the medical and scientific community, and the general public.
Speakers

- **Eugene Ng**, Office of Minority Health Fellow, Hepatitis B Foundation
- **Lisa Fu**, MPH, Director, California Healthy Nail Salon Collaborative
- **Xuan Man**, Refugee Health Program Coordinator, Tacoma-Pierce County Health Department
The Impact of Nail Salon Industry Policies and Regulations on Hepatitis B Awareness and Prevention

Prepared for Hepatitis B Foundation | September 27, 2018
Workforce Quick Facts

- $8.53 billion industry
- Median income: $23,230
- Approx. 440,000 licensed nail techs
- Approx. 56% Vietnamese
- 97% female
Nail Tech Distribution Across US
Vietnamese Distribution in US

Vietnamese Population in US

Number of People

647,589

283

[Map showing the distribution of Vietnamese population in the US with a focus on California, Texas, and Louisiana.]
Workforce Demographics

Age Distribution of Nail Salon Workforce
Licensing Curriculum

- Curriculum consists of theory and practical
- Great variation in number of hours of training between states
- Some require specific training on infectious disease control
- Few states require continuing education credits in sanitation
Barriers for Nail Salon Workers

• Language
• Cost – many lack or have minimal insurance
• Mistrust in government – immigration status
• Confusion between HBV, HCV, and HAV
• High worker turnover
State Board Policies

- Connecticut has no governing board for nail salons
- Utah has no regulations for sanitation
- Great variation between states
- 48 states indicate tools must be sanitized between clients
- Many states do not delineate specific protocol for effective disinfection
States mandating the use of an EPA-registered disinfectant. States shaded blue require the use of EPA-registered.
State Board Policies

States with blood spill protocol. States shaded orange do not possess a blood spill protocol.
Institutional Discrimination

States Barring HBV Infected Individuals From Working in Nail Salons
Institutional Discrimination

• AL: all HBV workers must disclose status to all co-workers and clients
• DC, MT, and WV: require HBV disclosure on license application
  – Handled on case-by-case basis
Oregon State Case Study

• “A practitioner providing service or working in a facility after diagnosis of immunodeficiency disease or condition or Hepatitis B, C, or D shall observe and follow all current Centers for Disease Control (CDC) standards for public service workers regarding personal protection equipment and disposal of blood or bodily fluid contaminated articles, tools and equipment” (2012)
Oregon State Case Study

• “Repeal rules related to communicable and blood borne disease as it is unlawful under the American with Disabilities Act (ADA) for a state to prevent an individual from practicing cosmetology based on that individual’s communicable and blood borne disease status” (2013)
CA Healthy Nail Salon Collaborative

**Mission:** To improve the health, safety and rights of the nail and beauty care workforce to achieve a healthier, more sustainable and just industry
Nail Salon Workers in CA

- Over 336,000 manicurists and cosmetologists in CA
- 67% are Vietnamese
- Recent immigrants
- Limited English Proficient
- Average income: $21,800 a year
Nail Salon Worker Health Concerns

• Adverse Reproductive Outcomes
• Cancer
• Ergonomic problems
• Respiratory illness
• Skin irritations
CA Healthy Nail Salon Collaborative

Strategy #1: Leadership Development
Strategy #2: Policy Advocacy
Strategy #3: Research
Health, Safety and Workers Rights

Trainings

• Gel Nails
• Healthy Nail Salons
• Green Tips for Your Salon
• Infectious Diseases
• Workers’ Rights
Example: Healthy Nail Salon Recognition Program

1. Use nail polishes that do not contain the Toxic Trio
2. Use safer nail polish removers such as acetone
3. Avoid using nail polish thinners
4. Wear nitrile gloves
5. Ventilation (especially for artificial nail services)
6. Install mechanical ventilation unit(s)
7. Use safer artificial nail products
8. Train all nail salon staff on safer practices
9. Do not allow customers to bring in products unless they meet the program’s criteria
Expanding the HNSRP
Contact Us!

Email: lfu@cahealthynailsalons.org
www.cahealthynailsalons.org

CA Healthy Nail Salon Collaborative

@CA_HNSC
Addressing Chronic Hepatitis B in Foreign-Born Adult Persons: A Community Response

Hep B United Webinar – September 27, 2018

Xuan Man, B.A.
Refugee Health Program
Communicable Disease Control
Presentation Agenda

- Community Collaboration
- Community Conversation
- Hep B Vietnamese Engagement Council
- Hep B Nail Salon Outreach Project
- Next Steps
Community Collaboration

- Tacoma-Pierce County Health Department (TPCHD)
- Hepatitis B Vietnamese Engagement Council of Tacoma, Pierce County
- Hepatitis B Coalition of Washington (HBCW)
- Pierce County Project Access
- Primary Care Providers
Community Conversation

Goals:
• Assess awareness and knowledge of Hep B
• Identify barriers, needs, outreach strategies
• Engage Vietnamese community members
• Identify opportunities for future collaboration (interests, ideas, capacity, resources, etc.)
Community Conversation

Process:
• Happened October 2009
• Relied on current relationships to recruit participants
• Phone calls, invite letters
• Facilitated in-language

Outcomes:
• 15 participants (14 adults, 1 young adult)
• Various perspectives about hepatitis B
From Conversation to Commitment

- Report back, June 2010
- Hep B Vietnamese Engagement Council formed
- Hepatitis B educational 101 training
- Spread word to community, families, friends
- Distribute hepatitis B materials
- Community event and project planning
Hepatitis B Vietnamese Engagement Council

Source: Vietnamese Council Meeting Photos
Hep B Nail Salon Outreach Project

- Target outreach to high-risk group: Nail salon workers
- Increase awareness of chronic hepatitis B
- Provide hepatitis B educational materials
- Provide hepatitis B testing and vaccination
- Provide links to care for clients with positive HBsAg results
Planning

• Project began January 2012 and ended June 2012
• Engagement Council members considered to be the key contact of project
• Meetings and planning occurred
• Council members provided outreach:
  – Nail Salon visits
  – Other locations such as grocery stores, temples, churches, business, etc.
  – Reported issues, problems, positive feedback, etc. to the Health Department
Activities

• Training
  – Key messages to be delivered to salon staff
  – Initial salon visits with Health Department staff
• Site selections, division of work and mapping
• Salon visits on their own
  – Providing hepatitis B educational materials and flyer
  – Referring back to Health Department staff
Activities (continued)

• Health Department staff met with clients for:
  – Interview
  – Referral for testing
  – Testing result provided to clients
  – Vaccination provided by Health Department nurses

• Developed referral system for patients with positive HBsAg results

• Reported activities and outcomes to HBCW
## Outcomes

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<thead>
<tr>
<th>Category</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salons Visited</td>
<td>203</td>
<td></td>
</tr>
<tr>
<td>People Interviewed</td>
<td>143</td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>92</td>
<td>64%</td>
</tr>
<tr>
<td>Women of Childbearing Age</td>
<td>59</td>
<td>64%</td>
</tr>
<tr>
<td>Men</td>
<td>51</td>
<td>36%</td>
</tr>
<tr>
<td>In the United States ≤ 5 Years</td>
<td>56</td>
<td>39%</td>
</tr>
<tr>
<td>In the United States ≤ 10 Years</td>
<td>16</td>
<td>11%</td>
</tr>
<tr>
<td>In the United States &gt;10 Years</td>
<td>71</td>
<td>50%</td>
</tr>
<tr>
<td>People Tested</td>
<td>135</td>
<td></td>
</tr>
</tbody>
</table>
## Results

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<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>HBsAg Positive</strong></td>
<td>8</td>
</tr>
<tr>
<td>Referred for Care</td>
<td>5</td>
</tr>
<tr>
<td>Refuse Care</td>
<td>3</td>
</tr>
<tr>
<td><em>Did not want to pay nominal fee for visit</em></td>
<td></td>
</tr>
<tr>
<td><strong>Immune</strong></td>
<td>72</td>
</tr>
<tr>
<td><strong>Susceptible</strong></td>
<td>63</td>
</tr>
<tr>
<td>Completed Vaccination Series</td>
<td>59</td>
</tr>
<tr>
<td>Started Vaccination Series</td>
<td>4</td>
</tr>
<tr>
<td><em>But lost to follow-up</em></td>
<td></td>
</tr>
</tbody>
</table>
Challenges

• Visits to salons made early during the day
• Salon workers not available all the time
• Salon owners were sometimes not cooperative or responsive
• Some HBsAg-positive clients refused linkage to care
Successes

• **94%** completed series of vaccine
• Clients refer their friends, families to the Health Department for testing and vaccination
• Quest Diagnostics is right across the street
• Project presented at the Hepatitis B Coalition of Washington Forum, 2013, the National Influenza Vaccine Summit, Atlanta, Georgia, 2013, the Joint Conference on Health, Wenatchee, Washington, 2013, and others
After June 2012

- Continued receiving calls for interviews and referrals for testing
- Continued providing vaccinations when needed
- Counseled patients identified with positive HBsAg results
- Developed referral system for further testing and follow-up for patients identified as HBsAg positive
Next Steps

• Replicable to other populations or communities
• More hepatitis educational community events and outreach projects (Nail and Hair Salons, Restaurant Business, Grocery Stores, etc.)
• Council members continue to meet
Questions

Contact Xuan Man
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(253) 798-4732
Recommendations
& Conclusions

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Recommendations

• Sustainability
  – Programs incorporated into public health infrastructure
  – Knowledge ≠ action
Cosmetology Board Policy Recommendations

• Utilize inspectors as educational source when violations are noticed
• Adopt a sanitation rating system
• Incorporation of multilingual resources and licensing exams
Educational Recommendations

• Require Continuing Education courses to include HBV education and infectious disease control
• Require HBV as part of licensing curriculum
• Multi-lingual educators and materials
Vaccination Recommendations

• Partner with community-based organizations to support CDC recommendation for testing, vaccination, and education
  – Protect all workers
  – Community stakeholders should be involved in further discussions to alleviate fears and mistrust in the government or the healthcare system.
Vaccination Recommendations

- OSHA Bloodborne Pathogens standard 1910.1030
  - Employer must offer HBV vaccine series without charge if you are likely to be exposed to blood or other infectious material during your work
Conclusions

• Sustainable programs such as the California Healthy Nails Program can be integrated to include further HBV education, screening, and linkage to care

• Further state level advocacy is needed to address areas of institutional discrimination
Please submit questions in the chat box!
Thank you for joining!

Contact us:
connect@hepbunited.org
www.hepbunited.org