

Health Equity & Hepatitis



Hepatitis Appropriations Partnership



The Hepatitis Appropriations Partnership (HAP) is a national coalition based in Washington, DC and includes community-based organizations, public health and provider associations, national hepatitis and HIV organizations, and diagnostic, pharmaceutical, and biotechnology companies. HAP works with policymakers and public health officials to increase federal support for viral hepatitis prevention, testing, education, research and treatment.

Join the Conversation!



Audio – Attendees on mute



Chat – Feel free to respond to open-ended poll questions in the chat, or let us know your thoughts.



Questions? Please type questions in the Q&A window.

***The session is being recorded. We will also share slide presentations.**

Agenda

Panel:

- Jessica Fung Deerin, Office of Infectious Diseases and HIV/AIDS Policy
- LCDR Lusi Martin-Braswell, Office of Minority Health
- Su Wang, Center for Asian Health, Saint Barnabas Medical Center
- Chioma Nnaji, Multicultural AIDS Coalition
- Josie Howard, We Are Oceania
- Christine Rodriguez, AIDS United

Discussion/ Q&A

Poll Question

Aside from those present today, what other federal agencies or divisions of federal agencies would we like to see be more engaged in addressing issues related to viral hepatitis?

- Centers for Medicare & Medicaid (CMS)
- Health Resources and Services Administration (HRSA)
- Indian Health Services (IHS)
- Food and Drug Administration (FDA)
- Other (place in chat)

Office of Infectious Disease and HIV/AIDS Policy

Health Equity and Hepatitis

Jessica Fung Deerin, PhD, MPH

Viral Hepatitis Policy Advisor

Office of Infectious Disease and HIV/AIDS Policy

March 17, 2022



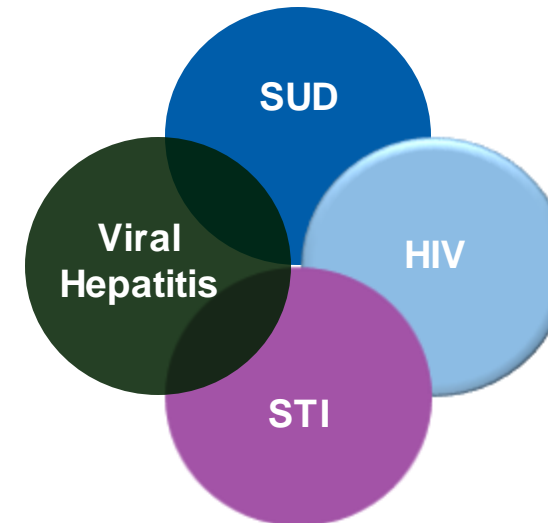
OASH

Office of the
Assistant Secretary
for Health

Viral Hepatitis National Strategic Plan 2021 – 2025: A Roadmap to Elimination

Key Highlights of the Plan

- Elimination by 2030
- Improve viral hepatitis surveillance
- Active participation by all
- **No wrong door approach**
- **Syndemic**: Holistic care, addressing co-occurring conditions and social determinants of health
- Advance research on hepatitis B cure and hepatitis C vaccine
- **Focus on disproportionately impacted populations and eliminating inequities**
- Increase vaccinations among adults



Stigma, discrimination, and social determinants of health are integral to addressing the syndemic

Goal 3: Reduce Viral Hepatitis-Related Disparities and Health Inequities

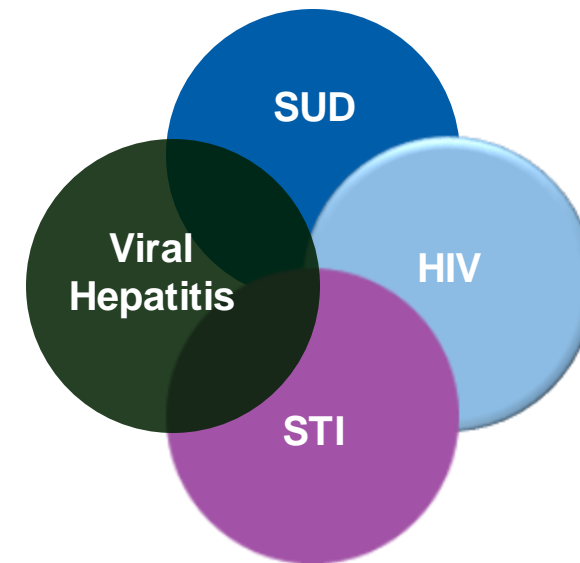
Selected Focus Areas



- Reduce stigma and discrimination faced by people with and at risk for viral hepatitis
- Reduce disparities in new viral hepatitis infections, knowledge of status, and along the cascade/continuum of care
- Expand culturally competent and linguistically appropriate viral hepatitis prevention, care, and treatment services
- Address social determinants of health and co-occurring conditions

	Incidence (Acute)	Prevalence (Chronic)	Mortality
Hepatitis A	<ul style="list-style-type: none"> • People who use drugs • People experiencing homelessness 	Not Applicable	
Hepatitis B	<ul style="list-style-type: none"> • People who inject drugs 	<ul style="list-style-type: none"> • Asian and Pacific Islander • Black, non-Hispanic 	<ul style="list-style-type: none"> • Asian and Pacific Islander • Black, non-Hispanic
Hepatitis C	<ul style="list-style-type: none"> • People who inject drugs • American Indian/ Alaska Native 	<ul style="list-style-type: none"> • People who inject drugs • Black, non-Hispanic • People born 1945-1965 • People with HIV 	<ul style="list-style-type: none"> • American Indian/ Alaska Native • Black, non-Hispanic • People born 1945-1965

Engaging the Syndemic Across National Strategic Plans



Stigma, discrimination, and social determinants of health are integral to addressing the syndemic

How OIDP is Addressing Health Equity

Area	OIDP
Leadership	HHS, OASH, and OIDP priority
Policy	Make recommendations to address payment and reimbursement barriers to integrated viral hepatitis prevention and care services in clinical and non-clinical settings
Policy	Work with federal partners and community members to identify areas of collaboration, addressing health disparities and social determinants of health
Policy	Provide transparency in how the federal government is meeting goals of the National Strategic Plan, including addressing health inequity
Programmatic	Provide viral hepatitis SME to OMH Hepatitis B Demonstration Project



Office of the
Assistant Secretary
for Health

**Office of Infectious Disease and
HIV/AIDS Policy
Office of the Assistant Secretary for
Health
Department of Health and Human
Services**

www.hhs.gov/hepatitis

@HHS_ViralHep

Hepatitis Appropriations Partnership

Policy & Advocacy Summit

Health Equity and Hepatitis

March 17, 2022

LCDR Lusi Martin-Braswell

OMH Hepatitis B Demonstration Grant Project Officer

Office of Minority Health

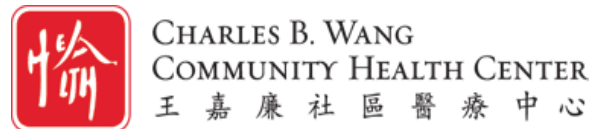
U.S. Department of Health and Human Services



OMH Hepatitis B Demonstration Grant Program

Awarded – July 2019 through June 2022

The OMH Hepatitis B Demonstration initiative would result in strategic partnerships to **identify and develop model comprehensive hepatitis B programs** that have the capacity to deliver widespread vaccination, scale-up testing, care and link/provide treatment services.



THE GEORGE WASHINGTON UNIVERSITY

WASHINGTON, DC

UC DAVIS
UNIVERSITY OF CALIFORNIA

OMH Hepatitis B Demonstration Grant Program Focus

Establish
recommendations

Capacity-building

Priority
Populations

Monitor
disparities

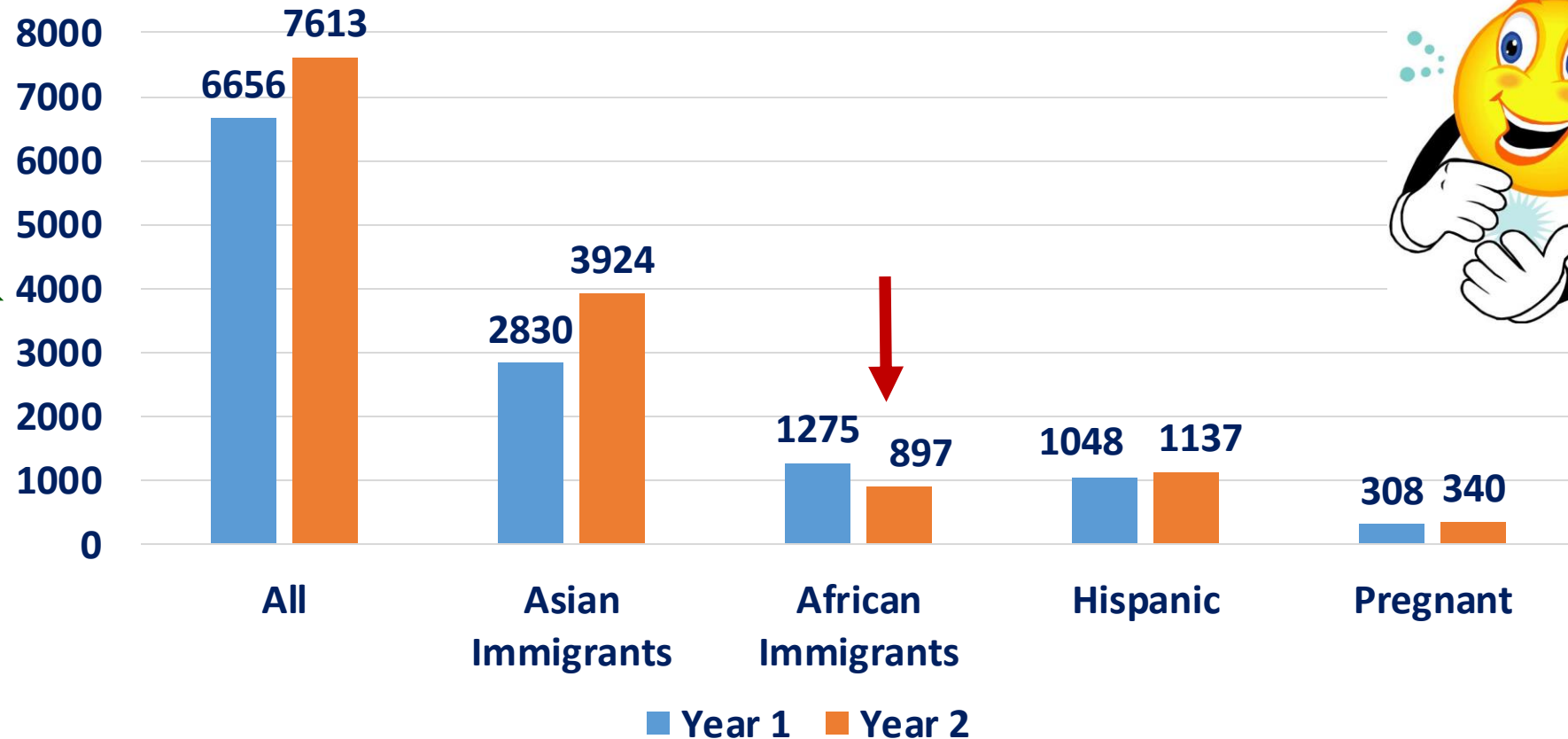
Improve disparity
research and
understanding

Community
Participation

Evaluation and
share findings

OMH Hepatitis B Testing (as reported)

July 2019 – June 2021 Comparison of New People Tested for Hep B

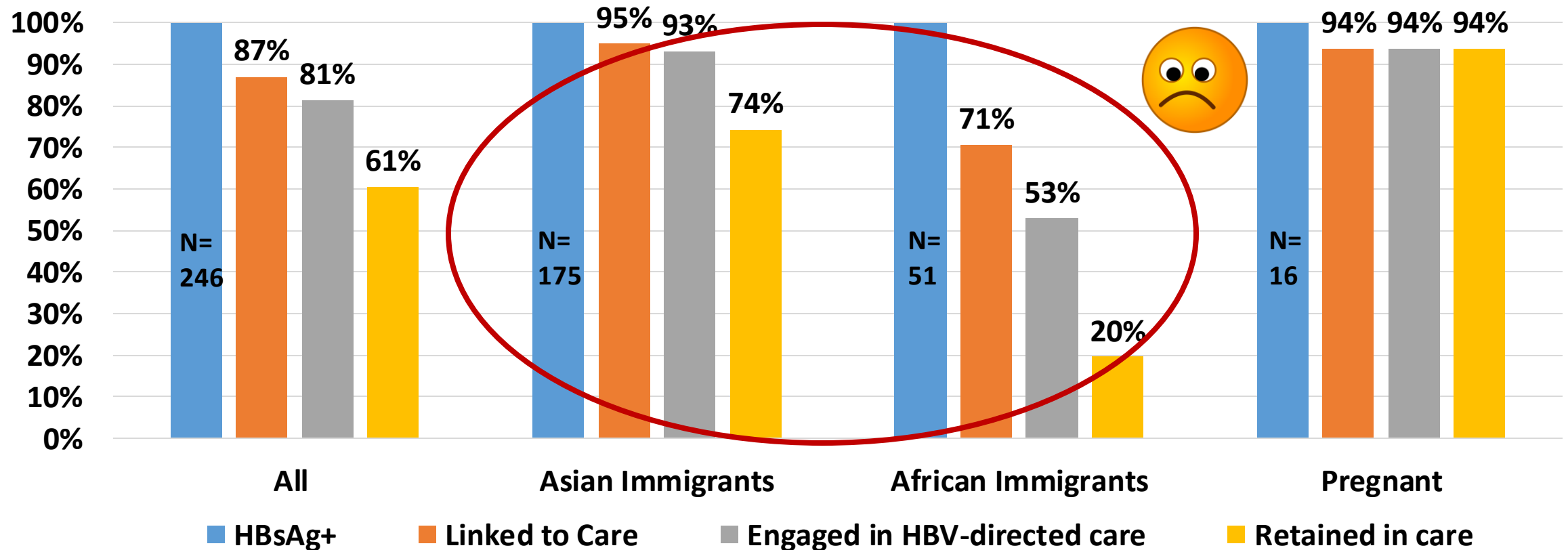


Overall
↑31%

Planned
5,805
Hep B
Testing for
Year 2

Racial Disparity identified through Care Continuum – Year 1

July 2019 – June 2020 Preliminary Data: OMH Hep B Demonstration Continuum of Care – Medical Care Clinics

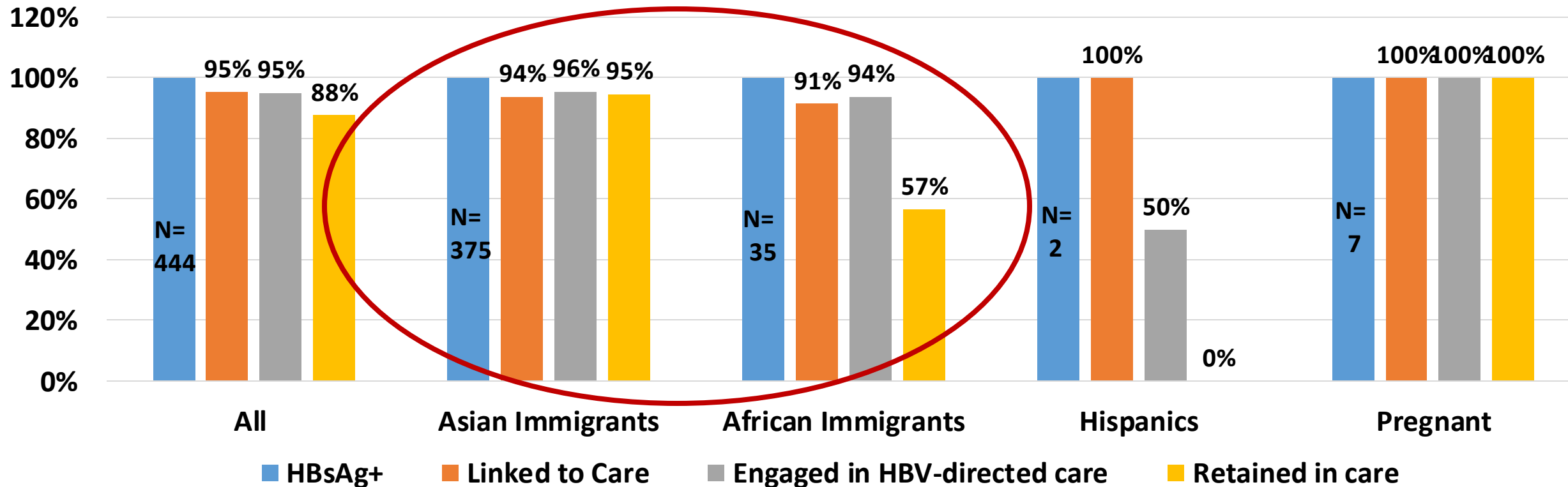


No data available for Hispanic patients; Omitted data on number prescribed antiviral treatment

Were we able to close the disparity gap in Year 2?



July 2020 – June 2021 Preliminary Data: OMH Hep B Demonstration Continuum of Care- Medical Care Clinics



Omitted data on number prescribed antiviral treatment

Hepatitis B Demonstration & Health Equity

Partner capacity building to deliver hepatitis b prevention activities, and linkage to care including:

- Enhancing Patient Navigation Programs
- Increasing availability of vaccinations on site and pharmacy partnerships
- Enhancing electronic health systems (incl. language, birthplace)
- Virtual training modules and webinars on the latest development in hepatitis b screening, vaccination and treatment (CEUs offerings)
- Data collection and reporting- disaggregation of race/ethnicity.

COVID-19 impact and opportunities for ongoing support:

- Stigma reported with immigrant populations → increased awareness and education
- Hybrid screening models
- Hepatitis B integrated care models with other priority diseases (i.e., HIV, Hep C, Diabetes, COVID-19)
- Establish telehealth process → Increase access to care

Cultural and Linguistically Appropriate Services and Approaches

- Health literacy support
- Cultural Humility + Competence Trainings for primary care providers and clinic staff.
- Community health workers and healthcare staff are representative of the priority and communities of focus.
- Tailor community education campaigns to ensure language + imaging/visuals respectful and appropriate.
- Attention to Social Determinants of Health (SDoH) – financial support, food access, healthcare access, transportation, housing.
- Maximize reach via communication channels: churches, schools, shopping centers and local ethnic businesses.

Cost: Lack of insurance coverage for immunization, cost of medication with private vs. public insurance coverage



LCDR Lusi Martin-Braswell:

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Hepatitis B Demonstration Grant Project Officer

Ms. Sonsiere Cobb-Souza:

Sonsiere.Cobb-Souza@hhs.gov

Director, OMH Division of Program Operations

Hepatitis B and Asian American Communities

Su Wang, MD MPH

Medical Director, Viral Hepatitis Program & Center for Asian Health

Saint Barnabas Medical Center, RWJBH Medical Group

Chair, NJ Hepatitis Coalition

Past-President, World Hepatitis Alliance



Hepatitis B Related Health Disparities

- Chronic hepatitis B and liver cancer represent the #1 health disparities for Asian Americans and Pacific Islanders (AAPI)
- 50% of the U.S. hepatitis B burden occurs among AAPIs
- AAPI and African immigrant communities have hepatitis B infection rates of between 5% and 15%
- **CDC Surveillance Report:** AAPIs experience the highest hepatitis B-related mortality rates (5.3x higher); this rate increased from 2015-2017

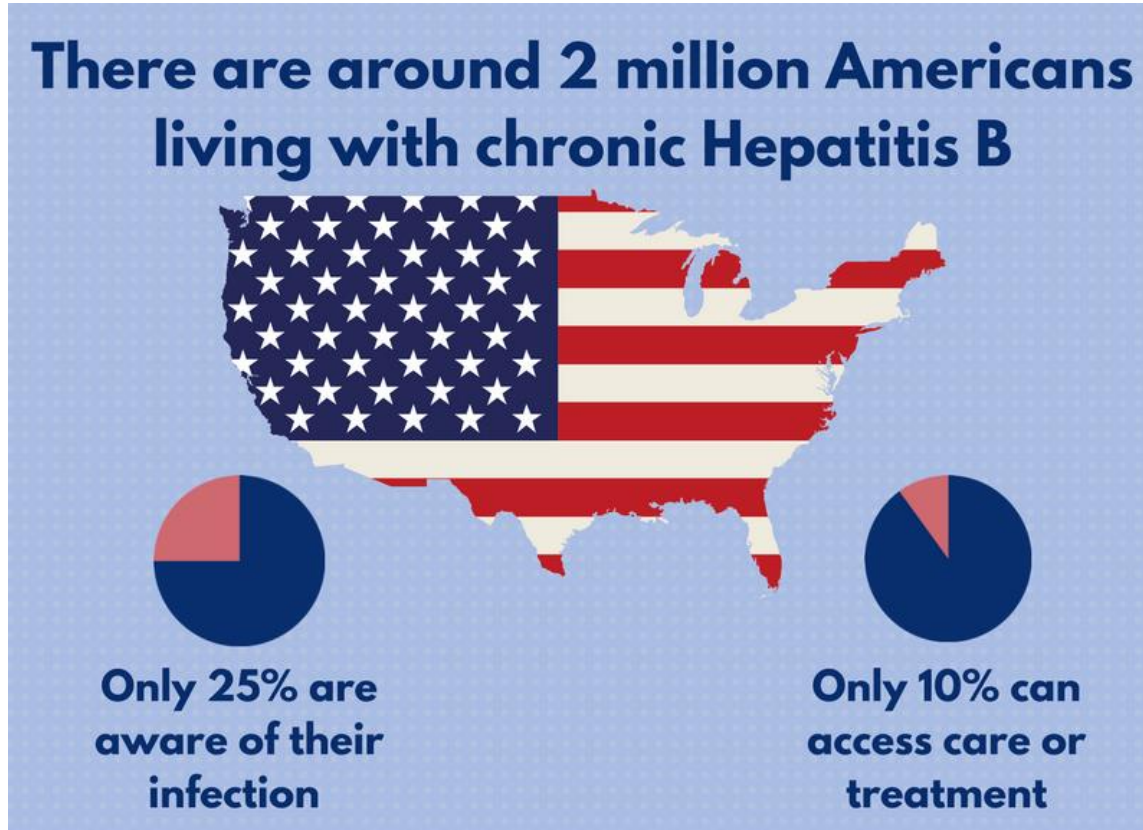


Did you know that
**1 in 12 Asian
Americans have
Hepatitis B?**



Hepatitis B in the U.S.: Low Diagnosis & Care Rates

Minority populations face even more barriers to access and care



- Very few people are screened and most don't know they are infected
- Among those diagnosed, less than 50% access sustainable care and 20% receive prescription medication
- Hepatitis B screening is NOT routinely conducted among most health care systems in the U.S.
- Only 25% of adults in the U.S. are vaccinated, and there are challenges to hepatitis B vaccine access



hepbunited.org



Hep B United: A National Coalition

- 40+ local coalitions & national organizations in 20 states
- **Mission** - Hep B United is a national coalition 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.

Goals of Hep B United

Awareness

Raise the profile of hepatitis B and liver cancer as an urgent public health priority.

Prevention

Increase hepatitis B testing and vaccination, particularly among AAPIs and other communities at higher risk.

Intervention

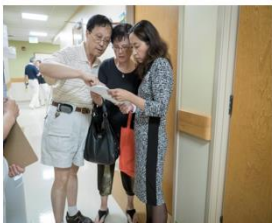
Improve access to care and treatment for individuals living with hepatitis B to prevent end-stage liver disease and liver cancer.

Center for Asian Health: Medical Practice & Community Outreach in New Jersey

Community Events



Chinese Wellness Day



THE CENTER FOR ASIAN HEALTH WELCOMES YOU TO

Chinese Wellness Day

華人健康日活動

Special Focus: Successful Aging 特別主題: 健康老化
Join us for health talks and services to help you age successfully! 讀此健康講座及服務告訴您如何健康老化

Saturday, June 8
6月8日 (周六)
9:00 am to 12:00 pm
上午9時至中午12時

Barnabas Health Ambulatory Care Center
巴拿巴門診醫療中心
200 South Orange Ave.
Livingston, NJ 07039

Don't Miss These Health Talks 健康講座

9:00 am	Welcome Remarks 歡迎致辭
9:15 am	All About Osteoporosis 認識骨質疏鬆
9:45 am	Facing Life's Challenges: Effective Strategies for Maintaining Your Peace of Mind 面對人生的困境：保持心中平靜的有效策略
10:15 am	Hepatitis B and Asians 亞裔與乙型肝炎
10:30 am	Population Health Talk: Asians and Health Equity 大眾健康講座：亞裔族群的健康公平性(大麻)
10:45 am	What You Need To Know About Low Back Pain 認識腰、背痛
11:15 am	Aging Successfully & Partnering with Your Providers 健康老化：如何有效地和醫生成為合作夥伴

For more information 詳情請洽 973-261-9080



社區團體 Community Partners: Tzu Chi Foundation
Millburn-Short Hills Chinese Association
Chinese American Nurse Association



Free Screening 免費檢查

- ▶ Blood Pressure 血壓
- ▶ Diabetic Screening 血糖
- ▶ Lung Function 肺功能篩檢
- ▶ BMI 體質指數
- ▶ Bone Density (Heel Screening) 足部骨密度篩檢
- ▶ Hepatitis B and C 乙和丙型肝炎檢查
- ▶ Colon Cancer Screening 腸癌篩檢(潛血檢查)

Meet the Doctors 認識醫生

- Internal Medicine 内科
- Behavioral Health 身心科
- Dentist 牙科
- Plastic Surgeon 整型外科
- ENT 耳鼻喉科
- Orthopedics 骨科
- Cardiology 心臟科
- GI 腸胃科
- Family Medicine 家庭科
- Endocrinology 內分泌科
- Vascular Surgery 血管外科
- Podiatry 腳科

B Informed: Hepatitis B Updates & The Road to a Cure

12:00 to 4:00 pm
Following Chinese Wellness Day, join Hepatitis B experts to learn more about current research, development of a cure and more. **Lunch will be provided.**

Register to ensure free lunch:
hepb.org/binformed

**Barnabas Health
Medical Group
Saint Barnabas
Medical Center**

Center for Asian Health
華人醫療服務中心

RWJBarnabas
HEALTH

Let's be healthy together.

新州華人健康日 群醫齊聚

聖巴拿巴醫療中心和新澤西慈濟基金會合辦 李文斯頓市長肯定

If you or your parents are from **ONE OF THESE COUNTRIES...**



You are at risk for Hepatitis B



Hepatitis B is the world's leading cause of liver cancer

Do you know your status?
Get tested for free!
About 1 in 3 with Hepatitis B are not aware.
Get tested at one of the locations on the back.
www.BWell.com



 Saint Barnabas Medical Center
 Saint Barnabas Health

Viral Hepatitis Screening in Hospitals and Emergency Departments

Automated EMR Based at Cooperman Barnabas Medical Center (2017-current)

Saint Barnabas Medical Center

Provides

Hepatitis B & C Testing



This facility performs HBV and HCV testing as part of our routine health care, as recommended by the U.S Centers for Disease Control and Prevention (CDC). Chronic hepatitis is the leading cause of liver cancer.

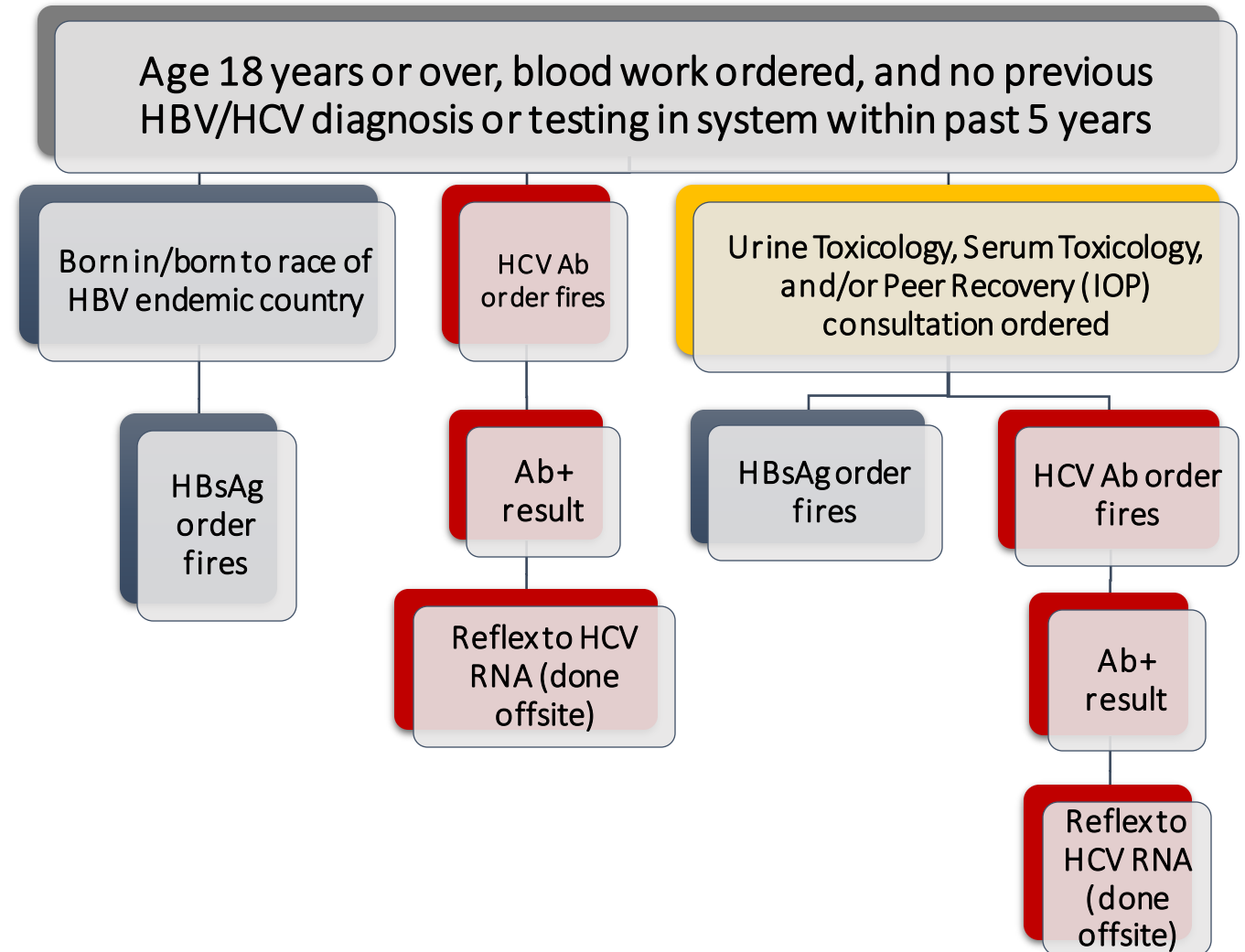
Your healthcare provider may order these tests if you have not been tested within the past year in our network and you are considered at-risk:

- **Hepatitis C** -- If you were born between 1945-1965
- **Hepatitis B** -- If you were born in a country where HBV is endemic

Incorporating hepatitis testing into routine care helps to diagnose patients and offer them care and treatment before the disease progresses.

If you test positive, you will be contacted for further follow-up.

*I understand that notification is contingent on providing accurate contact information.





HEALTH EQUITY AND HEPATITIS

HEPATITIS AMONG AFRICAN IMMIGRANT COMMUNITIES



WHAT DO WE KNOW

- Up to 15% HBV infection rate in some African immigrant communities
- HBV screening rates are low
- Limited understanding and awareness of HBV among African immigrant communities
- Culture and religious beliefs play a role in the perception of and behaviors towards HBV
- HBV is stigmatized
- Presented at late stages liver cancer and died within months of diagnosis
- Lack of HBV surveillance and culturally and linguistically appropriate education and services

Freeland, C., et al., 2020; Mohamed, E.A., et al., 2020; Carr, J., et al., 2022

INTERSECTIONALITY

PROFESSOR KIMBERLÉ CRENSHAW

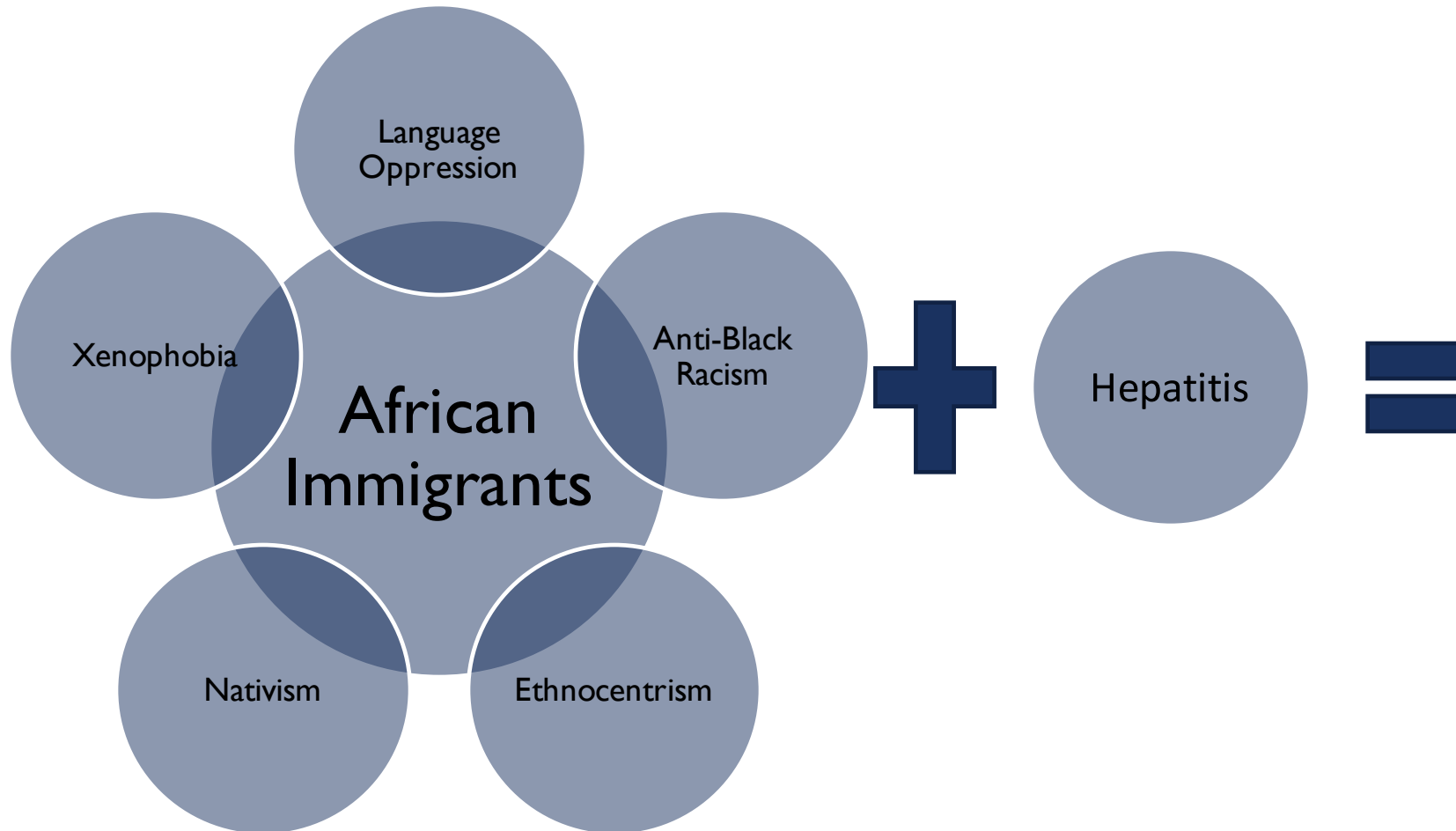
- systems of oppression and power / privilege
- historical and contemporary
- constantly being produced and reproduced
- co-occurring and interact with social identities like race, gender, nationality, sexuality, and occupation



IMPACT OF INTERSECTING SOCIAL IDENTITIES AND OPPRESSIONS

Social Identity Categories	Societal Oppressions	Marginalized Identity	Intersectional Impact
Race	Anti-Black Racism	Black	<ul style="list-style-type: none"> • Stigma • State-sanctioned violence • Targeted racialized criminalization • Economic instability • Linguistic discordance • Denied or limited health coverage • Lack of access to health resources
Nativity	Nativism, Xenophobia	Foreign-born	
Immigration Status	Nativism, Xenophobia	Undocumented, Deferred Action for Childhood Arrivals (DACA), Temporary Protected Status (TPS), Asylee, Non-Immigrant Visa or Refugee	
Ethnicity	Ethnocentrism	African country of origin	
Language	Language Oppression	African languages, dialects and accents	

INTERSECTING OPPRESSIONS AND HEPATITIS



- Poor communication between sexual partners
- Gender inequity
- Intimate partner violence
- Non-disclosure
- Isolation
- Late screening
- Delayed engagement in care

-
- Lack of culturally and linguistically appropriate services

National African Immigrant & Refugee HIV/AIDS and Hepatitis Awareness Day (NAIRHHA Day)

September 9th

- **raise awareness** about HIV/AIDS and viral Hepatitis to eliminate stigma
- **learn** about ways to protect against HIV, viral Hepatitis and other related diseases
- **take control** by encouraging screenings and treatment, including viral Hepatitis vaccination
- **get involved** by advocating for policies and practices that promote healthy African immigrant families, communities and individuals

**"HIV and HepB among African immigrants in the US is a "hidden epidemic". Join us!
Educate others. Take action.**



<https://www.facebook.com/NAIRHHA>



@NAIRHHADay

Josie Howard
We Are Oceania



Viral Hepatitis & People Who Use Drugs

**Christine Rodriguez
Senior Program Manager, Harm Reduction
AIDS United**



Hepatitis A & B

- Hepatitis A Incidence in 2019
 - 46% reported injection drug use
 - 1,325% increase 2015-2019
 - Outbreaks among people who use drugs & those experiencing homelessness
- Hepatitis B Incidence in 2019
 - 35% report injection drug use
- **Vaccination access** for people who use drugs is critical

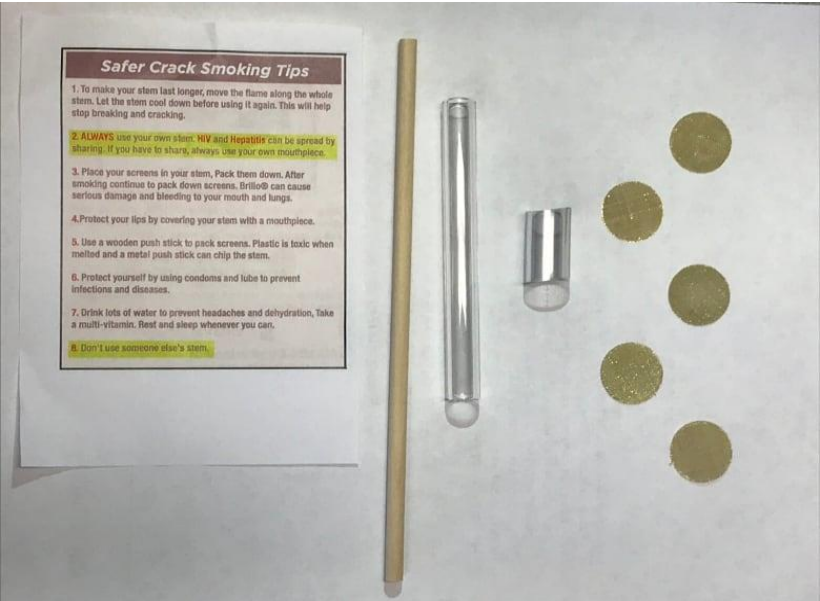
<https://www.cdc.gov/hepatitis/statistics/2019surveillance/HepA.htm>
<https://www.cdc.gov/hepatitis/statistics/2019surveillance/HepB.htm>

Hepatitis C

- Hepatitis C – **most common** blood-borne infection in the U.S.
- Acute Hepatitis C in 2019
 - **67% of cases** report injection drug use – primary risk factor
- Prevalence of **10% - 70%** depending on location and duration of injection drug use
- Onset of injection to incidence: **28% at 1 year**

<https://www.cdc.gov/hepatitis/statistics/2019surveillance/HepC.htm>
<https://ajph.aphapublications.org/doi/10.2105/AJPH.2017.304132>
<https://www.hcvguidelines.org/unique-populations/pwid>

Risks for Infection | Safer Use Supplies



Prevention – Syringe Services Programs

- SSPs are associated with an approximately **50% reduction** in HIV and HCV incidence
- When **combined with medications** for opioid use disorder, HIV and HCV transmission is reduced by **more than two-thirds**
- Treatment as Prevention – drug use **not** a contraindication

SYRINGE SERVICES PROGRAMS

SSPs are a safe, effective, and cost-saving way to **prevent the spread of HIV and HCV** through injection drug use.



Thank you!

Christine Rodriguez, MPH
crodriguez@aidsunited.org

aidsunited.org



Poll Question

Within your communities, what is the most common barrier to getting vaccinated (hepatitis A/B) and/or tested for viral hepatitis?

- Language
- Transportation
- Health insurance coverage/cost
- Hepatitis-related stigma
- Other (place in chat)

DISCUSSION

The Summit Continues:

Hepatitis & Maternal/Child Health

Thursday, March 24th
1:00 pm - 3:00pm ET



Hepatitis & Overdose

Monday, March 28th
2:30 pm - 4:30 pm



Federal Perspectives & Congressional Advocacy

Monday, April 4th



HAP Hill Day

Monday, April 11th
Register Now!



Thank you for attending!

Michaela Jackson, Prevention Policy Manager
Hepatitis B Foundation
Michaela.Jackson@hepb.org

