Session 2C

Impact of Eliciting Dimensions of Personhood on Outcomes of Patients with Tuberculosis and their Healthcare providers: "The Dignity Project"

**Presentation Description**

In Winnipeg, tuberculosis (TB) disproportionately affects primarily First Nations peoples and foreign-born Canadians (Winnipeg Regional Health Authority, 2012a). According to Manitoba Health, rates of TB in First Nations people in Manitoba are at least 30 times that of other Canadian-born persons, and rates in foreign-born peoples are 5 times that of Canadian-born persons. In the WHR, the inner core and northern parts of the city have TB rates that are 3-10 times the national rate (Winnipeg Regional Health Authority, 2012a). Residents of these areas are at higher risk of social and economic disadvantage leading to preventable gaps in health representing unjust health inequities. People with TB (whether active TB disease or latent TB infection [LTBI]) tend to be marginalized, disenfranchised and poorly served by the healthcare system (Hargreaves 2011). Equitable access to healthcare that supports determinants of health as well as inclusive, respectful health care services are required to address the full spectrum of TB.

A simple practical tool that can be used within the timeframe of existing HCP-patient interactions has been developed for this purpose. This project will attempt to implement such a tool, the Patient Dignity Question (PDQ), recently validated in palliative care patients (Chochinov 2014), to address TB patient personhood as a priority.

The proposed project is anticipated to start in April 15 2015 and go through to March 31, 2016 with the following objectives:

- Apply a clinically practical “dignity question” to TB and LTBI patients that will enable healthcare providers to elicit key elements of patient personhood.
- Evaluate and determine the influence that this tool has on patient satisfaction and behavior (outcomes).
- Evaluate and determine the influence that this tool has on PPH and Klinic healthcare provider experience.

Results to date are demonstrating the impact that a simple question can have on the patient and the healthcare provider relationship, as well as the care plan for the patient.