



# DOMINICAN REPUBLIC

## CULTURAL COMPETENCY AND TUBERCULOSIS CONTROL

A Practical Guide for Health Professionals  
Working with Foreign-born Clients



## **GEOGRAPHIC LOCATION<sup>1</sup>**

- The Dominican Republic is located in the Caribbean.
- The capital is Santo Domingo.
- The country is located on the eastern side of the island of Hispaniola, and is bordered to the west by Haiti.
- Surrounding the island is the Caribbean Sea and the North Atlantic Ocean.

*Note: The information provided within is an introduction only and does not characterize all individuals from this country.*

# BACKGROUND INFORMATION

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**OFFICIAL LANGUAGE(S):**

Spanish<sup>1</sup>

Note: English is widely spoken in the tourist areas.<sup>2</sup>

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**POPULATION:**

10,478,756 (July 2015 est.)<sup>1</sup>

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**ETHNIC GROUPS:**

**Majority:** mixed 73% (European and African ancestry)<sup>1</sup>

**Minority:** White 16%, Black 11%<sup>1</sup>

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**DOMINANT RELIGION(S) WITHIN THIS COUNTRY:**

Roman Catholic 95%<sup>1</sup>

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**LITERACY OF CITIZENS:** Defined as persons age 15 years and older who can read and write.

Total population: 91.8%<sup>1</sup>

Male: 91.2%<sup>1</sup>

Female: 92.3% (2015 est.)<sup>1</sup>

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**MEDICAL SYSTEM:**

- The medical system within the Dominican Republic is a mix of private (nonprofit and for-profit) and public services. Within the public sector, care is free but with no guarantee of access.<sup>3</sup>

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**MAJOR INFECTIOUS DISEASES WITHIN THE BIRTH COUNTRY:**

- **Vector-borne:** Dengue fever<sup>1</sup>
- **Food or waterborne:** bacterial diarrhea, Hepatitis A, and Typhoid fever<sup>1</sup>

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**FERTILITY RATE OF WOMEN RESIDING WITHIN THE BIRTH COUNTRY:**

- 2.33 children born/woman (2015 est.)<sup>1</sup>

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**THE ESTIMATED NUMBER OF INDIVIDUALS FROM THIS COUNTRY EMIGRATING ANNUALLY TO THE UNITED STATES:**

- According to data collected in 2010 by the U.S. Census Bureau, approximately 879,000 individuals originating from the Dominican Republic reside in the United States.<sup>4</sup>
- 41,311 persons from the Dominican Republic obtained legal permanent resident\* status within the USA during fiscal year 2013.<sup>5</sup>
- 4.2% of all persons granted legal permanent resident status in 2013 were born in the Dominican Republic.<sup>5</sup>

*Note: A number of illegal migrants from the Dominican Republic cross the Mona Passage to Puerto Rico to find work.<sup>1</sup>*

*\*Legal permanent residents are foreign nationals who have been granted the right to reside permanently in the United States. Often referred to simply as “immigrants,” they are also known as “permanent resident aliens” and “green card holders.”*

**According to 2013 US Homeland Security Data, individuals who became legal permanent residents from this country indicated the following top 10 states as their state of residence.**

The percentage of the total number of legal permanent residents by state:<sup>7</sup>

1. New York	45.4%
2. New Jersey	17.0%
3. Florida	8.2%
4. Massachusetts	7.9%
5. Pennsylvania	5.4%
6. Connecticut	1.5%
7. Maryland	0.8%
8. Texas	0.8%
9. North Carolina	0.8%
10. Georgia	0.5%

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**THE ESTIMATED NUMBER OF INDIVIDUALS FROM THIS COUNTRY EMIGRATING ANNUALLY TO CANADA:**

- In 2013, 589 persons born in the Dominican Republic were granted permanent resident status in Canada.<sup>6</sup>
- The Dominican Republic is not among the top ten source countries from which immigrants apply for permanent resident status in Canada.<sup>6</sup>

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**THE ESTIMATED NUMBER OF INDIVIDUALS FROM THIS COUNTRY EMIGRATING ANNUALLY TO COUNTRIES WITHIN THE EUROPEAN UNION:**

- Statistics available indicate that the majority of people from Dominican Republic that immigrate to the European Union have migrated to Spain, Germany and France.<sup>8</sup>

# TUBERCULOSIS EPIDEMIOLOGY

**BASED ON THE ESTIMATED INCIDENT CASES (ALL FORMS) OF TUBERCULOSIS IN 2007, THIS COUNTRY IS RANKED NUMBER 70 OUT OF 176 COUNTRIES WORLD-WIDE.<sup>9</sup>**

## **Estimated Burden of Tuberculosis (2014):**

**Incidence:** 60/100,000<sup>10</sup>

**Prevalence:** 73/100,000<sup>10</sup>

## **Reported Cases of TB (2014):**

4,405 (total new and relapse)

4,605 (total cases notified)

## **Estimated Burden of HIV Infection (2014):**

**Estimated prevalence:** 0.7%<sup>11</sup>

**Low estimate (adults):** 0.6%<sup>11</sup>

**High estimate (adults):** 0.8%<sup>11</sup>

WHO Estimates 37,000 – 49,000 persons (age 15 and older) in the Dominican Republic are living with HIV.<sup>11</sup>

## **TB/HIV Co-infection (2014):**

### **Estimated burden of co-infection:**

Adults Ages 15-49 yrs:

– **Incidence of TB among HIV patients:** 0.16/100,000<sup>10</sup>

**LEVEL OF MULTI-DRUG RESISTANT TB\*:** \* *Multi-drug Resistance is defined as resistance to at least Isoniazid and Rifampicin.*

- In 2014 Dominican Republic reported that multi-drug resistance was found in 2.5% new TB cases.<sup>10</sup>
- Retreatment TB cases with MDR-TB is 11%<sup>10</sup>

## **STANDARD TB DRUG TREATMENT/TB MEDICATIONS READILY AVAILABLE FOR THE TREATMENT OF TB IN THIS COUNTRY:**

- **First-line drugs:** Isoniazid, Rifampin, Pyrazinamide, Ethambutol
- **Second-line drugs:** Streptomycin, Kanamycin, Ciprofloxacin, Ethionamide, Cycloserine, Capreomycin, p-Aminosalicylic<sup>12</sup>

## **TB CONTROL/DOTS COVERAGE:**

- According to the DR Ministry of Health, 94% of the country's citizens are covered by DOTS. (data from 2012)<sup>13</sup>

## **TB MEDICATION AVAILABLE AT NO COST:**

Yes  No  Information Not found/Unknown

**Comments:** TB medications are available at no cost.<sup>14</sup>

## **TB MEDICATIONS AVAILABLE ONLY THROUGH NATIONAL TB PROGRAM:**

Yes  No<sup>16</sup>  Information Not found/Unknown

**Comments:** The majority of TB medications are distributed by the NTP at health institutions in the public sector. <sup>15</sup>

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**TB MEDICATIONS AVAILABLE THROUGH PRIVATE PHARMACIES WITH A PRESCRIPTION:**

Yes  No  Information Not found/Unknown

**Comments:** In addition to the NTP, some non-governmental agencies (eg, Profamilia) offer TB medications at no cost.<sup>15</sup>

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**USE OF BCG VACCINE:**

Yes  No  Information Not found/Unknown

**Approximately what percent of the population is covered by the BCG vaccine:**

Greater than 98% coverage (WHO-UNICEF estimates, 2011)<sup>16</sup>

## COMMON ATTITUDES, BELIEFS AND PRACTICES RELATED TO TUBERCULOSIS

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**GENERAL COMMENTS:**

- As an upper-middle-income country in the Caribbean, the Dominican Republic has high levels of multidrug resistant TB (MDR-TB; 2.5% of initial cases)<sup>10</sup> and HIV co-infection rate of 16 per 100,000 population.<sup>10</sup>

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**COMMON MISPERCEPTIONS RELATED TO DISEASE TRANSMISSION:**

- TB may be spread by sharing eating utensils, clothes or toilets with a TB patient.<sup>15, 20</sup>
- Burning or discarding the clothes of a person who has died of TB will help to prevent transmission of the disease.<sup>20</sup>

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**Common Misperceptions Related to TB Etiology/Cause:**

*Note: No information concerning common misperceptions specific to the etiology/cause of TB was found in the literature. The following information describes misperceptions or beliefs related to illness in general within the Dominican Republic.*

- Illness/disease is thought to be related to spirits.<sup>17</sup>
  - Illness caused by a bad spirit sent by an enemy is called *envoi*.
  - Another spirit that can make people sick is the *bacá*. A *bacá* is a created spirit that serves its owner to protect property, but it can also be sent to another person to make him/her sick.
- Slight ailments, such as a cold, are not considered to be caused by spirits.
- Additionally, more severe diseases are not always thought to have a spiritual cause.<sup>17</sup>
- “The evil eye” (*mal de ojo*) is believed to cause illness in babies and small children. The thought is that illness occurs when another person looks with envy at a child and compliments the child without including the words “God bless you.”<sup>17</sup>
- Disease may be caused by “dirty blood” or a rapid change between heat and cold.<sup>17</sup>
- Disease/illness may be the result of not paying sufficient attention to *misterios* or *luases* – Spirits that often appear in the form of Catholic saints.<sup>17</sup>

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**CURES/TREATMENTS THAT MAY BE USED:**

*Note: Cures or treatments that may be used specifically to treat TB were not found in the literature. The following information describes treatments that may be used among persons from the Dominican Republic to treat illnesses in general. While some traditional health practices or traditional health beliefs resemble Voodoo practices or rites – traditional practices/beliefs in the Dominican Republic are different from Voodoo and it may be offensive to ask a person from the Dominican Republic if they practice Voodoo.<sup>15</sup>*

- Within the Dominican Republic an array of medications (antibiotics) can be purchased without a prescription. Dominicans may obtain medications during return trips to the Dominican Republic or from family members or friends who send medicines. Self-treatment can lead to drug resistance and other TB management complications.<sup>15</sup>
- Illnesses that are not attributed to a spiritual cause are often treated with herbs at home or with the help of a local herbalist. Persons from the Dominican Republic may also consult biomedical doctors.<sup>17</sup>
- Illnesses or diseases thought to have a spiritual cause are often treated by folk healers. Treatment may include:<sup>17</sup>
  - Prayer
  - To heal an illness caused by a bad spirit, a trap is set inside a bottle. The patient is then instructed to spit into the bottle a number of times, thereby capturing the bad spirit.
  - *Resguardos* may be used to prevent illness or to support the effect of treatments for a person who is sick. Common types of *resguardos* include: (1) a mixture of chemical or herbal ingredients used on three consecutive days to wash the patient's body, (2) amulets containing images of saints or "magical weapons," such as shark or crocodile teeth, (3) a plea written on a sheet of paper with magical formulas – the paper is then burned and the patient is instructed to swallow the ashes with sugar and water.

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**USE OF TRADITIONAL HEALERS:**

- Traditional practices are popular, stemming from the Caribbean's African influence.<sup>19</sup>
- The decision to seek care from a healer is not due to a mistrust of doctors and does not exclude the use of biomedical treatments. Instead, Dominicans may also visit healers to ensure that not only the symptoms of the disease are treated but also the cause of the disease is addressed.
- Traditional healers include:<sup>17, 19</sup>
  - *Espiritista* or *Brujos* (sorcerer) – a person believed to have spiritual powers capable of curing disease and controlling spirits.
  - *Curandero* (healer) – a person who helps to solve problems and sells herbs.
  - *Botánica* – stores that sell herbs or traditional remedies.

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**STIGMA AND STIGMATIZING PRACTICES SURROUNDING TB IN THIS COUNTRY:**

*Note: While stigma related to TB exists, no information concerning stigmatizing practices specific to TB or TB patients was found in the literature.*

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**IMPORTANT TUBERCULOSIS EDUCATION POINTS:**

- Assess patients' perceptions of the treatment they require to treat their illness and explain that the prescribed medications can help to put an end to their symptoms and the underlying cause of their illness.
- Emphasize the need for, and reasons why, TB medications must be taken even when symptoms resolve.
- Discuss the causes of drug resistant tuberculosis and the fact that some people can have drug resistant forms of TB even if they have never been treated for TB in the past. Explain that the drugs prescribed may need to be changed at a later date if tests done in the lab indicate the need for a change. Emphasize the need to adhere to treatment. (Do not describe the drugs used to treat MDR-TB as “stronger,” “better,” or more “toxic.” Patients may interpret this to mean that 2nd and 3rd line medications are superior or better for the treatment of TB. Subsequently, this could have a negative effect on treatment adherence.)
- Explain that the BCG vaccine does not provide complete protection against TB. Explain how BCG differs from other vaccines.<sup>20</sup>
- For persons diagnosed with LTBI, emphasize the rationale for preventive therapy, despite the absence of symptoms.
- A number of Dominicans immigrate without following proper legal procedures. Assure patients that a diagnosis of TB is not a cause for deportation. Discuss confidentiality policies.

## COMMON ATTITUDES, BELIEFS AND PRACTICES RELATED TO HIV AND AIDS

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**GENERAL COMMENTS:**

- Nearly half of all AIDS cases in the Dominican Republic occur in the National District (48%), followed by Puerto Plata (5.6%), Santiago (5%), San Cristobal (4.2%) and San Juan de la Maguana (3.5%) (data from 2004)<sup>21</sup>
- Some Dominicans believe that HIV/AIDS is confined to the Haitian population residing in the Bateyes (towns originally built to house Haitian workers employed by sugar plantations – these areas are home to descendants of original Haitian immigrants and new immigrants).<sup>21, 22</sup>
- Within the Dominican Republic, approximately 74.8% of the cases are due to heterosexual transmission and 7.6% due to homosexual or bisexual contact.<sup>21</sup>

**Relevant Terms:**<sup>18</sup>

- *Bardaje* – A transvestite; in the Dominican Republic transvestites see sex work as part of their culture.
- *Bugarrones* – Same sex-oriented sex workers (male or female).
- *Sanky-pankies, Controllers, Pimps* – Heterosexual male sex workers



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**COMMON MISPERCEPTIONS RELATED TO HIV/AIDS ETIOLOGY/CAUSE:**

*Note: No information concerning common misperceptions specific to the etiology/cause of HIV was found in the literature.*

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**COMMON MISPERCEPTIONS RELATED TO DISEASE TRANSMISSION:**

- HIV/AIDS is believed to be transmitted by:
  - Touching/casual physical contact with an HIV positive person.
  - Sharing/touching clothing, toilets, and eating utensils used by an HIV positive person.<sup>18</sup>
  - A warm seat (*silla caliente*). More specifically, if a person has HIV and gets up from their chair, a person should wait until the chair “cools down” before sitting down to prevent the transmission of HIV.<sup>19</sup>
- Individuals from the Dominican Republic may also believe:
  - The penis “absorbs” HIV through a “gap” that is produced at the moment of ejaculation. (As a result, a common belief is that condom use is only necessary for a partner in the penetration role, but is not necessary for the partner in the receptive role).<sup>18</sup>
  - Condom use is necessary only for “dangerous persons” such as sex workers, men who have sex with men, and unfaithful husbands.<sup>15, 23</sup>

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**CURES/TREATMENTS THAT MAY BE USED:**

- Massage Therapy<sup>7</sup>
- Traditional healers may be consulted for the treatment and cure of HIV.<sup>18</sup>
  - In a survey of traditional healers, those with the greatest experience working with HIV positive people indicated that they knew they could not cure HIV/AIDS, and they did not expect anyone to think they could. Among those healers interviewed, the healers reported they felt their task was to help patients “calm down” emotionally, to provide support and advice, and to help patients achieve greater serenity and composure.<sup>18</sup>

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**STIGMA AND STIGMATIZING PRACTICES:**

- Within the Dominican Republic HIV/AIDS is highly stigmatized. The disease is viewed by those who associate the disease with perversion, sex, promiscuity, homosexuality, and infidelity as a threat to the social health of a community.<sup>18</sup>
- Families often try to conceal a family member’s illness from the community by reporting that their loved one is suffering from a less stigmatized disease such as cancer or anemia.<sup>18</sup>
- Family members of HIV positive persons may require an infected person to wash their own dishes, clean the bathroom after each use, and may not permit the person to have physical contact with children or members of the family in an effort to prevent transmission of HIV/AIDS within the household.<sup>18</sup>

- Other forms of discrimination include:<sup>23</sup>
  - Employers in the tourism and import/export industry check on the sero-status of employees or conduct involuntary testing and terminate employment of HIV positive individuals.
  - Hospital staff often release confidential HIV test results without the authorization of patients.
  - The placement of signs with “HIV” in red letters over patient beds in some hospitals.
  - Hospital staff refusing to provide treatment or care to HIV positive patients.
- It is important to note that differences in discrimination/stigma based on gender have been reported. Women tend to suffer the effects of stigma more than men.<sup>23</sup>
  - A woman may be accused of infidelity or being HIV positive if she asks a male partner to use a condom.
- HIV-positive individuals who look healthy and can interact “normally” in the community are seen as a threat because of their power to infect others.<sup>18</sup>

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#### **IMPORTANT HIV EDUCATION POINTS:**

- Assess clients’ knowledge of HIV and AIDS, prepare to provide basic/general information.
- Discuss stigma with clients as well as confidentiality policies.
- Discuss the benefits associated with condom use (for both men and women), offer instruction in the proper use of condoms.
  - The use of condoms in the Dominican Republic is among the lowest in Latin America and the Caribbean.<sup>23</sup>

## GENERAL PRACTICES

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#### **CULTURAL COURTESIES TO OBSERVE:**

- In the Dominican Republic, a standard greeting is the use of a handshake, welcoming smile and direct eye contact.<sup>24</sup>
- Another greeting is kissing cheeks; however a male will tend to shake hands with another male.<sup>24</sup>
- Appropriate greeting should be used when shaking hands:<sup>24</sup>
  - *Buenos días* (Good morning)
  - *Buenas tardes* (Good afternoon)
  - *Buenas noches* (Good evening)

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#### **IS THERE A NEED TO MATCH CLIENT AND PROVIDER BY GENDER?**

Yes  No  Information Not found/Unknown

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**FAMILY:**

- The immediate and extended family is the center of social activities, major decision-making, and daily life. Generations of a family will often live together or in close proximity. Healthcare professionals should ask adult patients which family members they would like to include in discussions concerning care or decision-making.<sup>2, 19</sup>
- While the father may be the primary decision maker, the mother or grandmother may provide the majority of care and carry out medical instructions.<sup>2</sup>
- When meeting family members, show deference to elderly/older family members.<sup>2</sup>

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**CULTURAL VALUES:**

- Respect is important as well as not doing anything to cause another person to “lose face.”<sup>2</sup>
- In Dominican society appearance is very important. Dominicans take pride in their appearance and tend to judge others based on their clothing.<sup>2</sup>
- A well-groomed, formal clothing style (men: ties, jackets; women: blouses, skirts with stockings) is expected of professionals.<sup>2</sup>
- Personal relationships are valued and are considered more important than being on time. Often people will stop and talk with friends and acquaintances, in doing so they risk being late for appointments. Healthcare providers may want to discuss time schedules at the start of treatment/therapy.<sup>19</sup>

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**COMMUNICATION PATTERNS (VERBAL AND NON-VERBAL):**

- If a person from the Dominican Republic must make a decision (such as choosing to initiate treatment for Latent TB Infection) be patient and avoid high pressure tactics. Attempts to accelerate the decision making process can be viewed as rude.<sup>2</sup>
- To avoid appearing rude, patients may agree with a healthcare professional or say they understand even when they disagree or do not understand.<sup>15</sup>
- Maintaining eye contact when talking with a person from the Dominican Republic is important as this indicates interest in what is being said. If a conversation will entail note-taking, explain this prior to asking questions.<sup>2</sup>

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**DIET AND NUTRITION:**

- **Popular foods in the diet:** white rice, beans (garbanzo and black beans/*habichuelas* or *frijoles negros*), meat, vegetables (potatoes and yucca) and fried ripe plantains (*maduros*).<sup>24</sup>

# TRANSLATED EDUCATIONAL MATERIALS AVAILABLE ONLINE

## TUBERCULOSIS SPECIFIC MATERIALS:

### BROCHURES AND FACT SHEETS:

#### General disease information:

- **Tuberculosis - ¡Entérese!/Tuberculosis – an introduction**  
<http://ethnomed.org/patient-education/tuberculosis/tb-facts-spanish.pdf/view>
- **Enfermedad activa de TB/Active TB disease**  
<http://www.health.state.mn.us/divs/idepc/diseases/tb/factsheets/activespan.pdf>
- **¡Vivir a todo pulmón! Una historia de TB novela/¡Vivir a todo pulmón! A story of TB**  
[https://sntc.medicine.ufl.edu/Files/OnTheFly/Content/sntc\\_vivir\\_fotonovela.pdf](https://sntc.medicine.ufl.edu/Files/OnTheFly/Content/sntc_vivir_fotonovela.pdf)
- **Tu puedes prevenir la tuberculosis/You can Prevent TB(Videos)**  
<https://sntc.medicine.ufl.edu/Files/OnTheFly/YCPTB.html>
- **Tu puedes prevenir la tuberculosis/You can Prevent TB(Handout)**  
<http://sntc.medicine.ufl.edu/Files/Products/0UFTB%20Spanish%20Flyer.pdf>
- **Vivir a Todo Pulmon! Poster**  
<http://sntc.medicine.ufl.edu/Files/Products/12011%20Vivir%20poster-FINAL-PRINT--Spanish.pdf>
- **La Tuberculosis: ¡proteja a su familia!/Tuberculosis: protect your family!**  
<http://www.cdc.gov/usmexicohealth/pdf/tuberculosis-8.5x11.pdf>
- **Preguntas y respuestas sobre la tuberculosis/Questions and answers about TB**  
<http://www.cdc.gov/tb/esp/publications/faqs/TBQASP.pdf>
- **La tuberculosis: Conexión entre la TB y el VIH (el virus del SIDA)/Tuberculosis: link between TB and HIV**  
<http://www.cdc.gov/tb/esp/publications/pamphlets/TB-HIVSpan.PDF>
- **La tuberculosis: ¡Debe saber esto!/Tuberculosis: You should know this!**  
<http://www.cdc.gov/tb/esp/publications/pamphlets/TBgtfctsSpan.PDF>
- **Detectemos la TB. Tratemos la TB. Trabajemos juntos para eliminar la TB/Find TB. Treat TB. Working together to eliminate TB. (CDC Podcasts)**  
<http://www2c.cdc.gov/podcasts/player.asp?f=8631395>

#### Diagnostics:

- **El examen de la tuberculosis en la piel/The TB Skin Test**  
<http://ethnomed.org/patient-education/tuberculosis/tb-test-spanish.pdf>
- **Instrucciones para obtener muestras de esputo (flema) para la prueba TB/ Instructions for collecting a sputum sample for diagnosis of TB**  
<http://www.health.state.mn.us/divs/idepc/diseases/tb/factsheets/sputspan.pdf>
- **Eliminación de la TB: Diagnóstico de la enfermedad de la tuberculosis/TB Elimination: Diagnosis of TB**  
[http://www.cdc.gov/tb/esp/publications/factsheets/testing/diagnosis\\_es.pdf](http://www.cdc.gov/tb/esp/publications/factsheets/testing/diagnosis_es.pdf)

### Treatment:

- **Para usted y su familia: El secreto para prevenir la TB son pastillas!/For you and your family -- the secret for preventing TB is medication!**  
<http://ethnomed.org/patient-education/tuberculosis/tb-pills-spanish.pdf>
- **La Tuberculosis Puede Ser Tratada/Tuberculosis Facts: TB Can Be Treated**  
[http://www.cdc.gov/tb/esp/publications/factsheets/tbcanbetreated\\_es.pdf](http://www.cdc.gov/tb/esp/publications/factsheets/tbcanbetreated_es.pdf)
- **Lo que usted necesita saber sobre sus medicamentos contra la infección de tuberculosis (TB) latente (isoniazida)/What you need to know about your medicines against latent tuberculosis (TB) infection (isoniazida)**  
<http://www.cdc.gov/tb/esp/publications/factsheets/Isoniazida.pdf>
- **Lo que usted necesita saber sobre sus medicamentos contra la infección de tuberculosis (TB) latente (rifampicina)/What you need to know about your medicines against latent tuberculosis (TB) infection (rifampicina)**  
<http://www.cdc.gov/tb/esp/publications/factsheets/Rifampicina.pdf>
- **Lo que usted necesita saber sobre sus medicamentos contra la infección de tuberculosis (TB) latente (isoniazida y rifapentina)/What you need to know about your medicines against latent tuberculosis (TB) infection (isoniazida y rifapentina)**  
[http://www.cdc.gov/tb/esp/publications/factsheets/Isoniazida\\_Rifapentina.pdf](http://www.cdc.gov/tb/esp/publications/factsheets/Isoniazida_Rifapentina.pdf)
- **Folleto instructivo para pacientes sobre el esquema de 12 dosis para el tratamiento de la infección de tuberculosis latente/Instructional booklet for patients under the 12 doses scheme treatment for latent TB infection**  
<http://www.cdc.gov/tb/esp/topic/treatment/SPANISH%2012%20Dose%208.5X11.pdf>

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### HIV/AIDS SPECIFIC MATERIALS:

#### BROCHURES AND FACT SHEETS:

- **Datos sobre el VIH y el SIDA/HIV Facts**  
<http://www.health.ny.gov/publications/9243.pdf>
- **Esté alerta. No comparta/Be Aware. Don't Share**  
<http://www.health.ny.gov/publications/9406.pdf>
- **Razones para hacerse la prueba del VIH/Reasons to get an HIV test**  
<http://www.health.ny.gov/publications/0233.pdf>
- **El alcohol y el VIH : Una mezcla que debe evitar /Alcohol and HIV: A mix you should avoid**  
<http://www.health.ny.gov/publications/9618.pdf>
- **¿Será infección aguda por el VIH?/Could It Be Active HIV?**  
<http://www.health.ny.gov/publications/9586.pdf>
- **100 preguntas y respuestas sobre el VIH/SIDA/100 Questions about HIV**  
<http://www.health.ny.gov/publications/0214.pdf>
- **Información básica sobre el VIH/Basic Information about HIV/Información básica sobre el VIH**  
<http://www.cdc.gov/hiv/spanish/basics/>

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## **Staff-to-Staff Tips and Insights**

Do you have experience working with clients who were born in this country?

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