

## **HOW INTERDISCIPLINARY TEAMS CAN HELP BLACK HEMODIALYSIS PATIENTS GET KIDNEY TRANSPLANTS**

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Research has shown that black dialysis patients are significantly less likely than their white peers to be evaluated and listed for a kidney transplant. Surveying 228 black hemodialysis patients in Illinois, the following research questions were addressed using an original survey: (1) What is the role of social networks in providing information about kidney transplantation to black hemodialysis patients? (2) What is the relationship between social networks and a patient's likelihood of being seen at a kidney transplant center?

94% of patients surveyed were interested in a kidney transplant, and 98% percent had insurance that would pay for a kidney transplant, but only 9% were active on a transplant waiting list. Black hemodialysis patients with lower incomes were less likely to be seen at a kidney transplant center (OR 1.38, 95%CI: 1.09-1.76,  $p<.01$ ), and patients who have people in their social network with information about kidney transplant are significantly more likely to be seen at a kidney transplant center. Specifically, black dialysis patients who get informational social support from their dialysis team (OR 1.76, 95%CI: 1.5-2.1,  $p<.001$ ) and social networks (OR 1.63, 95%CI: 1.2-2.3,  $p<.001$ ) are significantly more likely to be seen at a kidney transplant center.

This study compliments other research about black dialysis patients and their success on the pathway to kidney transplantation. Kidney transplant disparity is a multifaceted social problem, and considering black dialysis patients' social milieu can be complimentary to the important existing research regarding this public health crisis. The logistic regression models imply that correct information about a kidney transplant and success of being seen at a kidney transplant center can be differentiated on the basis of considering social network informational attributes and income. Dialysis health teams can augment patients' social networks through their own interventions or by linking patients with mentors or patient navigators.