Mayo Clinic Q & A â€" Black History Month â€" Dr. Folakemi Odedi...

SUMMARY KEYWORDS

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SPEAKERS

DeeDee Stiepan, Narrator, Dr. Folakemi Odedina

Narrator 00:01

Coming up on Mayo Clinic Q&A, February is Black History Month, a time to honor the fullness of African American history and culture. Today we'll look at black health and wellness and address the health disparities facing our black communities.

Dr. Folakemi Odedina 00:16

There are multiple dimensions of wellness. So, when we are thinking about health and wellness in blacks, we need to think about our physical, mental, emotional, intellectual, spiritual, environmental, and social health and wellness. So, we have to focus on everything because this is what really affects us within our community.

DeeDee Stiepan 00:38

Welcome, everyone to Mayo Clinic Q&A, I'm Deedee Stiepan sitting in for Dr. Halena Gazelka. Black History Month is celebrated each February to recognize the important role black people have played in U.S. history. The theme this year for Black History Month is black health and wellness, a theme that aims to acknowledge the legacy of black scholars and medical practitioners. Joining us today to discuss is Mayo Clinic prostate cancer scientist and global health Equity researcher, Dr. Folakemi Odedina. Welcome to the program, Dr. Odedina.

Dr. Folakemi Odedina 01:09

Thank you so much, and thank you for inviting me to be a guest on the Mayo Clinic podcast. Really excited to be here.

DeeDee Stiepan 01:16

We're happy to have you and, you know, we like our audience to get to know our guests a little bit. So, tell us a little bit about your own journey and what led you to pursue biomedical sciences.

Dr. Folakemi Odedina 01:26

That is actually one of my favorite stories to tell. But first, I would like to wish everyone a Happy Black History Month. Black history is American history, and everyone should celebrate our history 365 days a year. So, real quickly as a background, my first degree is in pharmacy. And subsequently, I made a decision to get a PhD in pharmaceutical sciences and become a biomedical scientist. I would say the primary reason I chose to be in this particular field is because I grew up seeing my mom struggle with asthma on a daily basis. And every time that she goes through the night, you know, wheezing and trying to take another breath is a reminder to me that life is so precious to us. And her quality of life was really compromised with struggling to breathe, because of what we now recognize as social determinants of health. You know, so it includes the fact that the lack of or limited healthcare access, economic instability within our family, our neighborhood environment, and all the environmental pollutions that were around us all affected our health. So, for me it was an easy decision for me to devote my career to addressing health and wellness in our community, and I've been doing this for almost 30 years now. And we still have a long ways to go. We have made a little bit of progress but still a long ways to go.

DeeDee Stiepan 03:02

Oh, that is a great story. So, as I mentioned earlier, the 2022 theme for Black History Month is black health and wellness. What does that feel mean to you?

Dr. Folakemi Odedina 03:11

You know, I would say it is really about time that we focus on black health and wellness, because our community has disproportionately experienced health disparities and it means a lot to me. You know, when you look at health disparities in general, they just kind of back off, diseases start very early in blacks. So, you see the younger African Americans living with or dying from many conditions that typically are found in white Americans at older ages is really affecting us at a very young age. In addition to that, blacks are more likely to die at early ages from all causes of different diseases. And primarily the factors that really are responsible for this includes unemployment, poverty, home ownership, the fact that you cannot see a medical doctor because of cost, you know, not being active, lifestyle, and things like that. Although we do have some good news, when you look at things, the leading causes of death for blacks, such as heart diseases, cancer, and stroke, we have continued to make a little bit of progress. So, all these conditions have decreased from 1999 to 2015. But we still have a long ways to go. We have a long ways to go. And another thing that I wanted to mention to your audience, before I close up on why it's so important to focus on health and wellness, is this idea that we have to recognize that there are multiple dimensions of wellness. So, when we are thinking about

health and wellness in blacks, we need to think about our physical, mental, emotional, intellectual, spiritual, environmental and social health and wellness. So, we have to focus on everything because this is what really affects us within our community.

DeeDee Stiepan 03:11

That's a really great point. Thanks for bringing that up. You know, health disparities in the United States led to the phrase, "When white folks catch a cold, black folks get pneumonia". How do you interpret this phrase? And do you feel that it holds true today?

Dr. Folakemi Odedina 05:24

Fortunately, again, it does hold true. And we don't even have to think back to think about how it holds true. Look at COVID-19. Look at how COVID-19 has really devastated minority and underserved community, especially the black community, while you know, the impact is not as much as we see within the white community. It is still impactful, but disproportionately more in the black community, so we are much more likely to be impacted by chronic diseases compared to a white racial group. And I'll give you some unique examples, which really underscore this phrase, and lets you know that it still holds true today. For example, in 2019, the mortality by population among black men was 26% higher than in white men. By the time we got to 2020, it is now 45%, higher in black men compared to white men. For a black woman in 2019, it was 15% higher in black women compared to white women. By the time we got to 2020, it was now 32% higher in black women compared to white women. You know, another thing that really talks about this first is when we look at breast cancer in black women, right? White women are more likely to get breast cancer compared to black women. But when black women get breast cancer, they are more likely to die from breast cancer compared to white women And when you compare, you know, non-Hispanic blacks to Hispanics, as well as white non-Hispanics, non-Hispanic blacks have the lowest expectancy that we can actually think of. And I know that this kind of statistics is like people have to wonder, what is responsible for the statistics. And we cannot just be focusing on the stats, we need to know the root causes, and we need to be able to address the root causes. And if you allow me to, I can talk about the three major factors that really are responsive for the root causes that we find in these disparities. Go on?

- DeeDee Stiepan 07:43
 Absolutely, yes please do.
- Dr. Folakemi Odedina 07:45

Okay. So, you know, when we have these statistics, and they really are quite the person for the black community. There are three main factors that are responsible for the health disparities that we see in the black population. Number one is what we call the healthcare system factors. And when we talk about the healthcare system factors, it has to do with the fact that there's lack of access to screening, there's lack of access to diagnostic and therapeutic health services. The area of technological gaps that we are developing for healthcare is not being targeted or

tailored to the black populations, and so they are being left behind. So, that is the healthcare system factors. When you're talking about the provider level factors, which is where we're thinking about physicians, pharmacists, or nurses, or any other providers, there is what we know as provider bias. Sometimes when you look at a black person, a black man or black woman, you tend to think differently about what is causing their diseases or you're not personalizing the care to them. You know, in addition to bias, we have discrimination, which sometimes marginalizes blacks. Even myself, I have experienced so many discriminations within the healthcare system that is due to the bias of the provider who is providing care to me. So, that is another level. And then the third and the last level is the individual level factors, so which has to deal with us personally. And these are what we call the social determinants of health factors. And that includes education access, education quality, health care assets, health care quality, finances, economic stability, social and community factors as well as neighborhood and environmental factors. If you remember, these are some of the examples of what I gave that actually happened to my mom, you know, when she had the, you know, she was struggling with asthma when I was growing up. These social determinants of health factors are things that we really need to address to be able to improve the health of the black community.

DeeDee Stiepan 09:54

Thank you for going over that. I think that's really important information for people to hear. Why is it important to provide spaces for black people to counter economic and health disparities and the discrimination?

Dr. Folakemi Odedina 10:09

You know, so this is really a very interesting question. And it is really a very important question because a lot of times people make the mistake and say, oh, you know, well I think we made progress, or the progress that we are making, you know, don't let's look into the past. Let's just look currently into what we are still experiencing right now. We are still experiencing economic disparities. We are still experiencing discrimination. We are still experiencing bias within the healthcare system. And, you know, one of the quotes that I really, really like from Martin Luther King, MLK, is of all the forms of inequality, injustice in health care is the most shocking and inhumane, right? This is because when we are in the healthcare system, this is when we are most vulnerable. And this is where it can lead to the reduction in quality of life and lead to ultimate death. So, it's so important that we really focus, we focus on addressing health disparities. I want to give you an example, not only of why it's so important to really look at black population, but also for us to look at it across the United States as well. When we look at life expectancy by countries all over the world, U.S. is not in the top 10, we're not in the top 20, we're not in the top 30. We're not even in the top 40. Guess what number we are, we're number 46, right. And the major drivers of why life expectancy average is so low is because of the health disparities that are experienced by minority population, especially the black population. So, it's really, really very important. The key thing about why we explain this disparity is we are in a continuous and perpetual vicious cycle of economic disempowerment, discrimination in the healthcare system, as well as health disparities. I'll give you some examples. If you don't have the finances, you can't take care of your health, right. And when we are discriminated against in the healthcare system, we get very low health quality. And when we have significant burden of disease, we become economically disadvantaged, so on

and so forth. So, the economic instability affects getting the right health. If you don't have the right health, then you are economically burdened, right? And if you are discriminated against, then you have no health quality that really goes back to, you know, to economic instability. So, it's really a vicious cycle that keeps us down. And these vicious cycles really need to be addressed so that we can have a healthier and economically empowered black population. So, it means addressing the factors that I described at the healthcare system level, at the provider level, as well as the individual level focusing on social determinants of health.

DeeDee Stiepan 13:06

Absolutely. Well said. Can you tell us a little bit about how you support black health and wellness in your work as a biomedical scientist?

Dr. Folakemi Odedina 13:15

Absolutely, I could talk to you about my work, all day. But I've spent almost 30 years in my academic career. And my work is devoted to addressing the disproportionate burden of prostate cancer in black communities within the United States, as well as outside the United States. So, for example, as far back as 2005, I found that the Prostate Cancer Transatlantic Consortium, which is a global consortium of prostate cancer scientists, clinicians, survivors, and advocates, who work collaboratively across the world to fight prostate cancer in black communities. In fact, yesterday, you know, we just got the great news that we just received funding from the Department of Defense to create what is known as Care for Black Men Consortium that is going to focus on the science of survivorship. Millions of dollars being poured into our research program, academic community partnership program, for us to be able to address the quality of life of black men, not only within the United States, but outside the United States as well. In addition to my research program, another passion that I have that really is very critical for us within the black community is our participation in clinical trials. I mean, it is very important. We are underrepresented in clinical trials. Because we are underrepresented, that actually increases health disparities. That is because if we are not part of clinical trials, all those treatments and all those interventions that are developed through clinical trials, they are not being tailored to our population. So, another passion of mine is for us to be able to really increase trials within the black population. And I'm so proud to be part of the Mayo Clinic family, because Mayo Clinic is actually leading the innovation in taking trials to our community and making sure that our comments are very well represented in the trials that we do. Another thing that I'm very proud of that I really focus in on a personal level, is really increasing the diversity of the biomedical workforce. This is very important to me. And it's very important to us at Mayo Clinic, because we want to make sure that we train the next generation of black healthcare providers and scientists. This is because representation matters. When you have representation, we are able to have people who devote their life to taking care of this population and who devote their life to really generating scientific knowledge that will take us to another level and address the health disparities that we experience. So, those three things are, you know, I'm very passionate of those three things by research, representation in clinical trials, as well as making sure that the next generation of scientists are diverse.

DeeDee Stiepan 16:08

All really important work, and you touched on some of it, but could you talk about what some

other activities or initiatives that Mayo Clinic is leading or supporting to help black communities be well?

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Dr. Folakemi Odedina 16:24

We are doing a lot, I'm so proud to really be part of the family. We have so many programs that are focused on our communities. From community engagement to partnership building, to community empowerment, to outreach, and I want to just kind of plug in like if you want to find out more, please call our health equity center at 904-953-0966, and we will be happy to partner with you. But I just kind of want to take a little bit of time to give specific examples of what we do. So, for example, at the enterprise level across Mayo Clinic, we have what is known as cancer conversations. And that is focused on raising awareness about cancers that really affect our communities. We also have research education programs that focuses on training, research training from high school, all the way to college, all the way to postdoc and all the way to junior investigator. This is building the next generation of scientists and making sure that their representation matters. We also have training for advocates and for the community as well. So, for example, we have what is known as the citizen science program that anybody within the community, or person who is a survivor, or a person who is interested in advocacy can take this program and be part of our research team. Let me talk specifically about some of our campuses. In Florida we have community grants because we believe that it's very important for us to give seed funding to community organizations. This is because as you know, if the problem is in the community, then the solutions can be from the community. So, we do give many grants to community organizations. We have a program that is called Wellness RX that addresses food insecurity and wellness education in the community. We have programs such as Women in Faith Series, partnering with the Sister's Network, partnering with other multiple organizations like Urban League, American Post, 100 Black Men, The Black Male Prostate Cancer Coalition, and so on and so forth. In Arizona, we have a Coalition of Blacks Against Breast and Prostate Cancer, and they're doing wonderful work within the community. In Minnesota, we have the Community Garden, providing health education and outreach to improve nutrition in our community. And also at the global level we have several programs in black communities all over the world. And in fact, I am so proud of what we are doing. This week as you most probably know, tomorrow is his World Cancer Day, and the Mayo Clinic Cancer Center partnered with the Union for International Cancer Control to celebrate World Cancer Day, and we have done a lot in that area from videos to generate an awareness, you know, all over about cancer. The theme is closing the cancer gap. So, it is really great. I'm doing a Facebook live tomorrow organized by the by the Union for International Cancer Conference. We are doing so much, so I'm happy to continue to talk about what we do. But, you know, we look forward, we're so excited because we partner with our black communities to be able to make sure that what we do and how we do it is very responsive too. And we make sure that we are actually taking everything that we do to the community and doing it within the community. You know, another thing that I would like to mention was that last week was World Cancer Day, February 4, and I participated in the Facebook Live. This is one of the ways that Mayo Clinic is actually leading in really promoting health and wellness in black populations globally.

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DeeDee Stiepan 20:03

It just can't be underscored enough how crucial all this work is. And it's great to hear about it. And like you said. I feel like we could talk about this all day, with you especially. But is there

anything else, any final words that you wanted to add that you want to let the viewers know?

Dr. Folakemi Odedina 20:19

Yeah, absolutely. You know, if there's anything I always say, one of the things that I always want to leave is I just want to talk to the black community, my black brothers and sisters that it is very important that we are empowered to be part of our care and be part of clinical trials. We really are highly under-represented when it comes to clinical trials. And we need to develop interventions and treatments that are tailored to our community, so that we are able to really bridge the gap and close the gap to health disparities. So, if you're hearing my voice, I mean, there is so much that Mayo Clinic is doing in partnering with different organizations within the black community, including black physicians who are primarily taking care of you within the community. So, please think about participating in clinical trials. That will be what I would like to end with because that is very important to me.

DeeDee Stiepan 21:14

Wonderful. Thank you for adding that. Our thanks to Mayo Clinic prostate cancer scientist and global health equity researcher, Dr. Folakemi Odedina, for being here today to discuss black health and wellness with us during Black History Month. It was a great discussion. Thank you so much.

Dr. Folakemi Odedina 21:29 Thank you.

Narrator 21:30

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