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Message to Black Men From a Doctor at Oak Street Health



Doctor with Black male patient at Oak Street Health

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Contributing Writer

Chicago Defender

I have the privilege to work in an amazing organization, Oak Street Health, where I treat Medicare eligible adults as a primary care doctor. Today, as a board certified family physician, I work every day to solve one of our society's most enduring problems: how to end the persistent medical disparities that affect African-Americans, and in particular, African-American men.

On almost every health measure, African-American patients are more likely to have worse outcomes than their counterparts in other ethnic groups. African-Americans have higher rates of hypertension, diabetes and kidney disease. There are higher incidences of tobacco use and, consequently, higher incidences of smoking-related disease. Among African-American men, prostate cancer kills at a rate of two times that of white men and African-American men receive a diagnosis of HIV at seven times the frequency of whites. The depressing statistics go on and on.

When I came to Chicago, I believed that my experience and heritage had positioned me to take on the challenge of health disparities and turn the tide in this troubling trend. I spent most of the previous decade training for this work graduating from Harvard College and then from the Harvard School of Public Health before earning my medical degree from Tufts University. Throughout my studies and to this day, I have sought to master not only the pathophysiological roots of my patients' diseases but also the social determinants of health and how to better to reform the healthcare delivery to serve all people more equitably and justly.

I also expected that being Black would help. Many believe that health disparities are so persistent because of both a lack of trust of the medical community and an enduring paucity of African-American doctors in United States. The Tuskegee syphilis experiments which lasted for four decades until the 1970s are a chilling legacy which continues to undermine trust and dissuade many from seeking medical care. Although African-American's constitute approximately 13 percent of the population, Black physicians represent less than 5% of all practicing physicians. Research has shown that patients are more likely to adhere to a doctor's directions on matters such as exercise, diet choices, and medications if they can identify with their physician and race is a strong factor in building a lasting patient doctor relationship.

Once I arrived in Chicago, I found evidence in support of many of my assumptions but I was still surprised by what I experienced. I was struck by the burden of diseases that affected my patients and the extent to which health issues were allowed to worsen before proper care was sought. The majority of my patients were African-American in the South Side clinic in which I worked and in particular, I found that my sickest patients were men.

While many were happy to see an African-American as their doctor, these patients would only reluctantly come to see me and frequently downplayed their symptoms because they fundamentally still questioned medicine as an institution. Sadly it was among them that the cancers we diagnosed more often presented at advanced stages, hypertension was most severely under-treated; and diabetic complications on eyes, kidneys and limbs.

While my training and who I am as an African-American doctor reached before, being part of organizations that are designed to target and ultimately end them. I stress to every patient that my goal is to keep people out of the hospital and to prevent visits to the emergency room.

We know that we can do that if we see patients frequently and if we design the experience to cater to our patient's needs. As their doctor, I am part of a larger team including social workers, insurance experts and outreach associates working closely together who are all dedicated to every aspects of our patient's well-being in addition to health. It is critically important to form strong bonds of trust and to make it clear that our commitment is at the bedrock of our mission. I believe this is an important message to all of our patients but in particularly to our African-American men.



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It is a challenging but a hopeful time to be a Black doctor in America today. Focus and resources are now dedicated to primary care like never before and the needs of African-American patients are being addressed in such a way that one day soon, our efforts may make disparities a thing of the past.

Dr. Olaoluwa Fayanju is board certified in family medicine. Dr. Fayunju earned his Medical degree from Tufts University School of Medicine. Masters of Science in Public Health from Harvard University. Dr. Fayunju is a graduate of the Cook County Loyola Provident Family Medicine Residency Program where he was chief resident in his final year.

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