

Getting to Know Your CNPH Diversity, Equity and Inclusion Council Member

Korede Yusuf, M.D., Ph.D

Assistant Professor

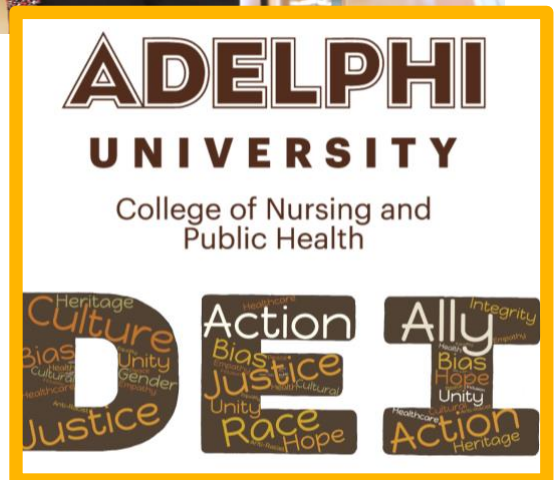


Growing up in Nigeria

Growing up in Nigeria, a racially homogenous country, while we may have had tribal and social status prejudices, racism was not a concept. Nigerians are known to treat foreigners and or visitors and individuals from other races better than their fellow citizens. Based on my understanding and experience, I associated this superior treatment of foreigners with the Nigerian culture of being hospitable to visitors, but there are probably other reasons, such as; the effect of Nigeria being colonized by the British. There are over 200 ethnic groups in Nigeria, including four major ones. In an attempt to protect their interests, power tussles occur intermittently between ethnic groups. As a result, segregation occurs across ethnic lines in some communities, and ethnic minorities in those areas experience discrimination. I am of the Yoruba tribe, one of the major ethnic groups. Growing up, I resided mainly in states where the Yorubas predominantly occupied. However, even when I lived in other parts of Nigeria, I never experienced discrimination.

Racism and Health Equity in the US

There was never a reason to think about race and its impact until I migrated to the United States (US) about a decade ago. In Nigeria, discrimination may occur against minority ethnic groups, but not at the level of health care, a fundamental human right. As a physician, the type of care I delivered to a patient of my ethnic group was not different from that given to an ethnic minority. This issue is not documented in the literature as well. Socioeconomic status (SES) and culture constitute the key determinants of health outcomes in Nigeria. In the US, the experience of racial discrimination is an additional and crucial health determinant. As a Maternal and Child Health Epidemiologist, I have found in my research and other studies that racism predicts health outcomes in the US's maternal and child population. According to the Centers for Disease Control and Prevention (CDC), Black women are three times more likely to die from a pregnancy-related cause than White women. Several factors contribute to these disparities, such as differences in quality healthcare, underlying chronic conditions, structural racism, and implicit bias.



Getting to Know Your CNPH Diversity, Equity and Inclusion Council Member

***Korede Yusuf,
PhD, MBBS***

Assistant Professor

My Belief System

Any form of racial bias within the healthcare system that results in variation in healthcare quality and health disparities, whether conscious or subconscious, is unacceptable. I am passionate about maternal and child health disparities and addressing this issue and racism are critical drivers through my research and interactions with students in the classroom. When the opportunity to join the Diversity, Equity and Inclusion (DEI) Council of the College of Nursing and Public Health (CNPH) came, I thought it was a perfect service fit; an excellent opportunity to learn more about DEI and anti-racism and contribute to the Council's efforts. The DEI Council aims to create a respectful culture that embraces the virtues of diversity, equity, inclusivity, civility, and anti-racism at the Adelphi University CNPH.

A Challenge to Fight for Racial Justice

We all need to stand against racism and learn to treat people the way we would like to be treated. I challenge you to join in the fight for racial justice. Families are the basic building blocks of societies and bear the primary duty to educate children and instill values. So, ask yourself what you can do differently within your family to raise individuals who are anti-racist and speak up against any form of racism or discrimination. If we discuss racism, diversity, and the need to be good and open-minded citizens in our homes and organizations, the community as a whole will become better and healthier. As health care providers and educators, it is crucial for our students and us to be knowledgeable about racial and ethnic disparities in maternal and child health outcomes and make conscious efforts to address our implicit biases to improve the quality of care and health outcomes.

