



Building Community Capacity for Policy Change to Eliminate Health Disparities

Neighborhoods Working In Partnership Project Description:

- Neighborhoods Working in Partnership (NWP) is a community-based participatory research (CBPR) project designed to strengthen the capacity of Detroit residents to engage in local, state, and regional policy campaigns to change the social and physical environmental conditions that negatively impact their health.
- NWP is funded by The Skillman Foundation and is a project of the *Detroit Community-Academic Urban Research Center (URC)*, a collaborative partnership of eight Detroit community-based organizations (Community Health and Social Services, Communities in Schools, Detroit Hispanic Development Corporation, Detroiters Working for Environmental Justice, Friends of Parkside, Latino Family Services, Neighborhood Service Organization, Rebuilding Communities, Inc.), the Detroit Department of Health and Wellness Promotion, the Henry Ford Health System, and the University of Michigan Schools of Public Health, Nursing, and Social Work.
- The URC has recently prioritized efforts to work with Detroit neighborhood residents and organizations to explore innovative approaches that engage and persuade policy-makers to support policy solutions to address the risk factors associated with health disparities.

Background—Health Disparities in Detroit:

- Despite overall gains in average life expectancy over the past several decades, less socially and economically advantaged portions of the U.S. population increasingly lag behind the most advantaged in health outcome and life expectancy. These *health disparities* are reflected in differential rates of morbidity and mortality based on socioeconomic position (SEP), racial or ethnic status, and residence in urban, suburban or rural communities.
- For example, heart disease and stroke are the leading cause of death for all groups in the U.S.; however, African Americans die of heart disease at 30% higher rates than whites, and from stroke at 41% higher rates. Compared to whites of similar age, diabetes is at least 50% higher among African-Americans and Latinos.
- Multiple risk factors contribute to the health disparities experienced by residents of Detroit, including: low SEP; race-based residential segregation; inadequate access to basic resources required for good health, such as healthy foods, grocery stores, and physical activity spaces; and exposure to social and physical environmental stressors, such as violence and air pollution. Many of these risk factors are beyond any one individual's ability to change and require a multi-level response, with emphasis on cross-sector and community-based policy solutions to address these risk factors and their effects on health.

NWP's Policy Intervention:

- In collaboration with PolicyLink, a national policy consulting and capacity-building organization, the NWP project of the Detroit URC brings community and university partners together to be trained to be better policy advocates, and to then train neighborhood residents and organizations in east, southwest, and central Detroit to engage in policy change initiatives to address community-identified concerns.
- Over the next year (2007-2008), this project will train seven pairs of community and academic "core trainers" to conduct intensive community-level advocacy and policy training of 175-200 Detroit community members.
- This training will allow Detroit youth, community residents, community organizations, and university and health system partners to mobilize local, state, and regional policy change campaigns to reduce the level of health disparities experienced by Detroit neighborhoods.
- The NWP project will develop community-based policy products and tools to facilitate community capacity-building for policy change, including tools to help communities identify their policy assets, and Detroit-specific policy/advocacy briefs for use by community, health system, and university advocates to educate their communities and their policymakers on Detroit-area health disparities and the policy changes needed to reduce them.

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