



# Building Stronger Communities for Better Health: Moving from Science to Policy and Practice

Brian D. Smedley, Ph.D.

Health Policy Institute

The Joint Center for Political and Economic Studies

[www.jointcenter.org/hpi](http://www.jointcenter.org/hpi)

# Neighborhood Factors Influence Health Through:

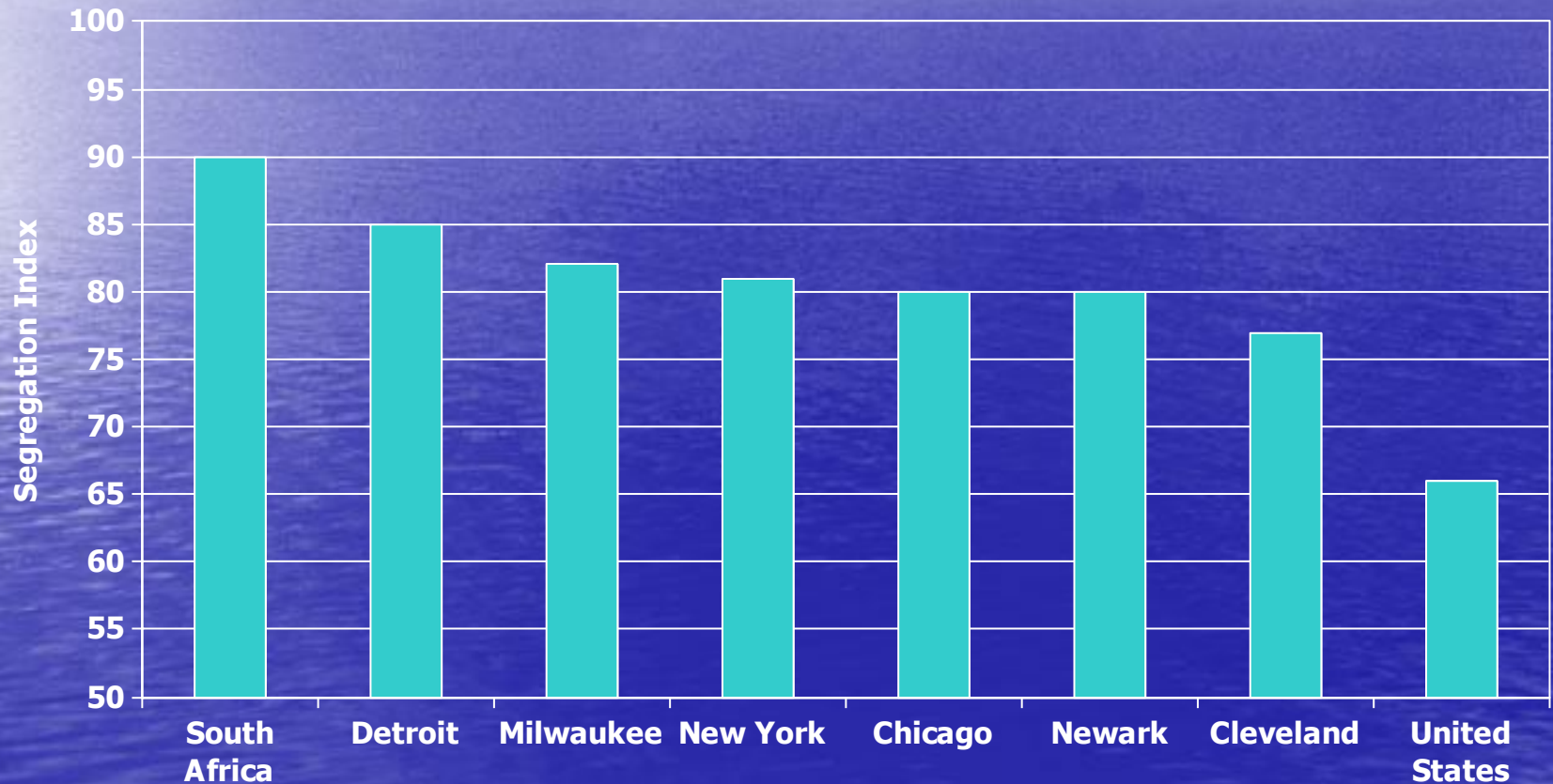
- Direct effects on both physical and mental health
- Indirect influences on behaviors that have health consequences
- Health impacts resulting from the quality and availability of health care
- Health impacts associated with the availability of opportunity structures (e.g., access to healthy food, safe spaces, capital, transportation)

The background is a smooth blue gradient, transitioning from a lighter blue at the top to a darker blue at the bottom. On the left side, there is a bright, glowing area that resembles the reflection of the sun on water, creating a shimmering effect. The overall appearance is that of a calm, vast body of water under a clear sky.

# The Role of Segregation

# Racial Residential Segregation – Apartheid-era South Africa (1991) and the US (2001)

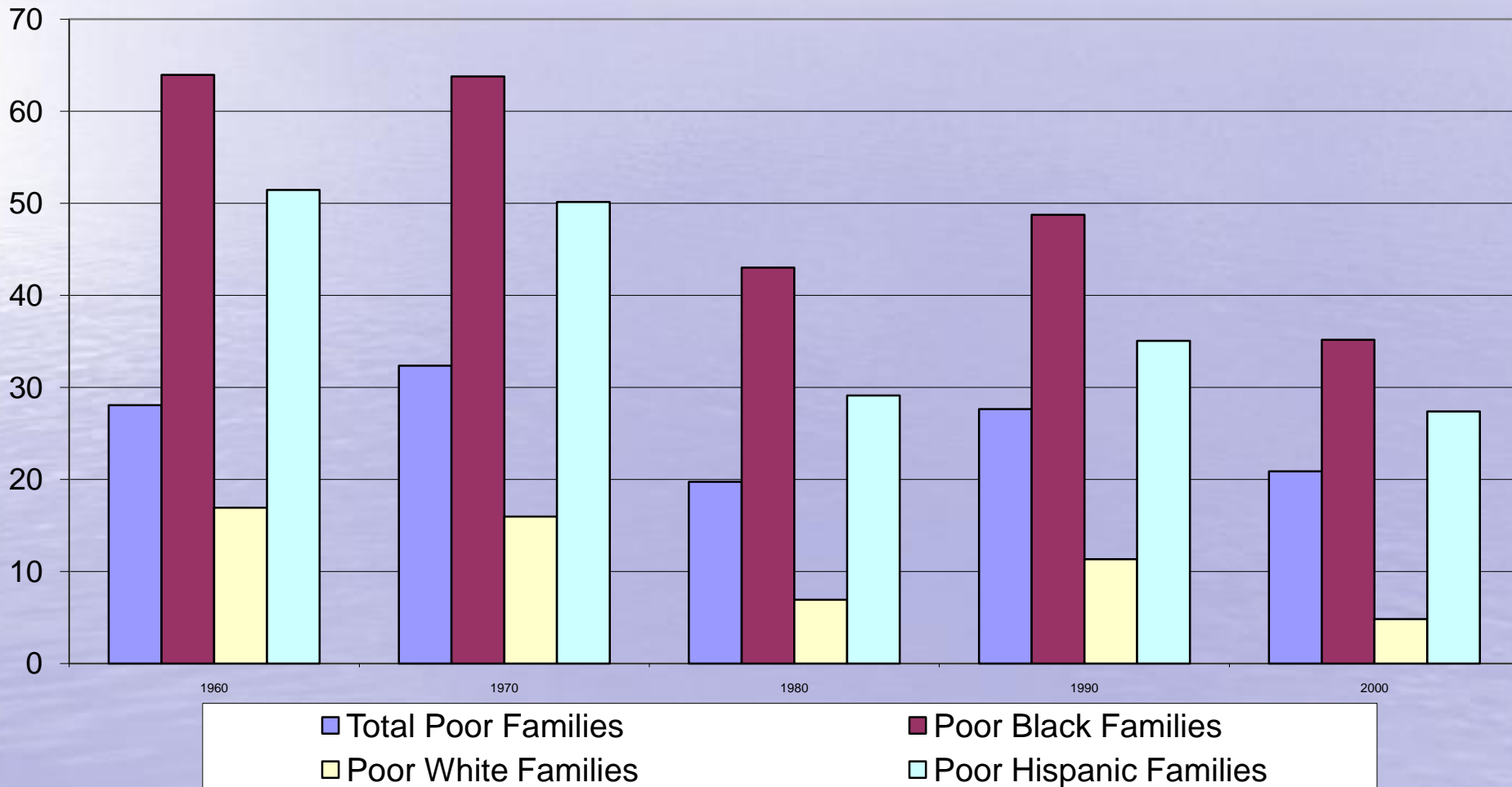
Source: Massey 2004; Iceland et al 2002; Glaeser and Vigitor 2001



# The Share of Poor Families Living in High Poverty Neighborhoods is Declining . . .

## Percentage of Poor Families Living in High Poverty (30+% in Poverty) Neighborhoods, 1960-2000

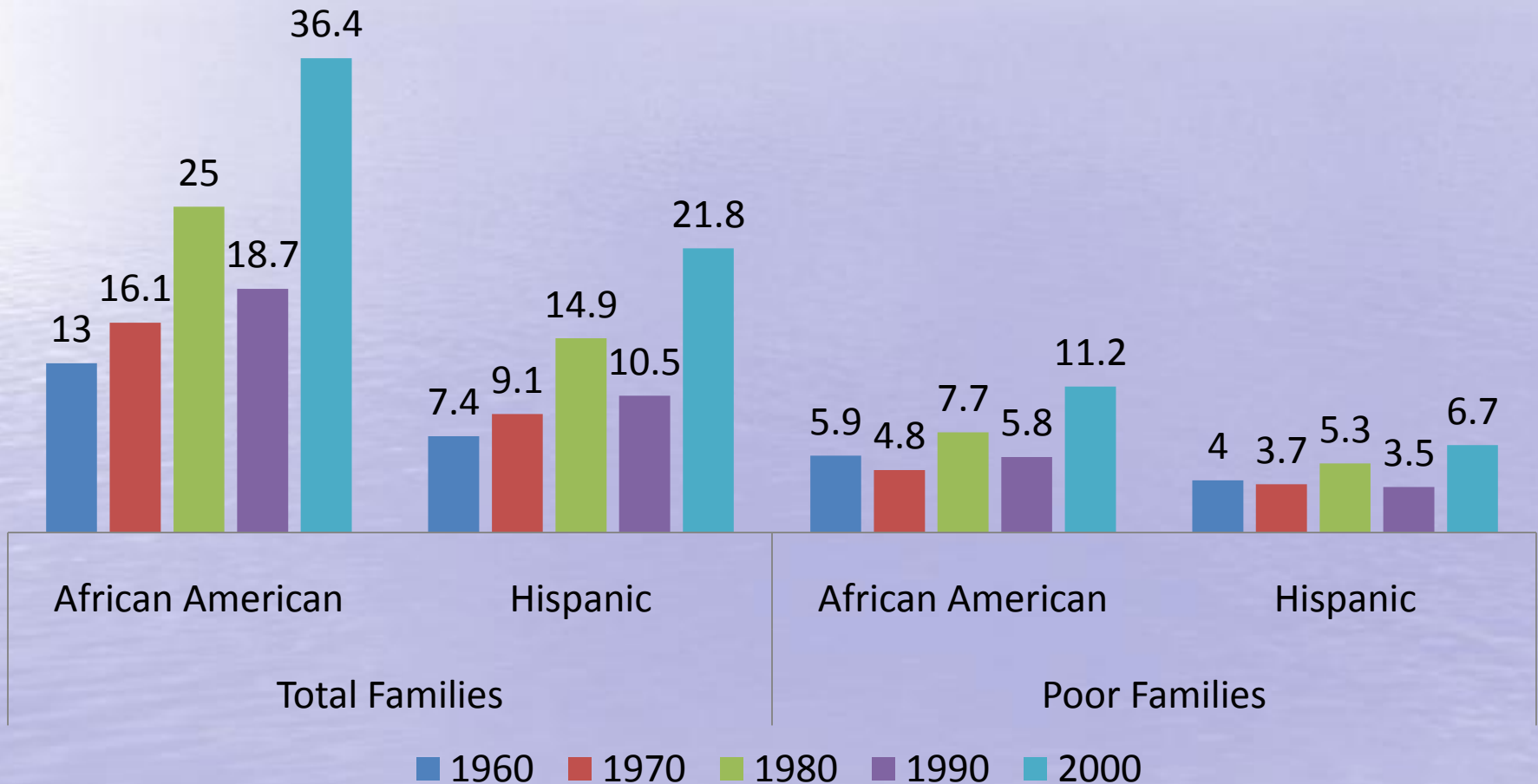
Source: PRRAC and The Opportunity Agenda, 2006



# ... But Segregation is Deepening

**Relative Risk of Living in Concentrated (40% or More) Poverty Neighborhood -- White Families = 1.00**

Source: PRRAC and The Opportunity Agenda, 2006



# Negative Effects of Segregation on Health and Human Development

- Racial segregation *concentrates poverty* and excludes and isolates communities of color from the mainstream resources needed for success. African Americans are more likely to reside in poorer neighborhoods regardless of income level.
- Segregation also *restricts socio-economic opportunity* by channeling non-whites into neighborhoods with poorer public schools, fewer employment opportunities, and smaller returns on real estate.

# Negative Effects of Segregation on Health and Human Development (cont'd)

- African Americans are *five times less likely* than whites to live in census tracts with supermarkets, and are *more likely* to live in communities with a high percentage of fast-food outlets, liquor stores and convenience stores
- Black and Latino neighborhoods also have *fewer parks and green spaces* than white neighborhoods, and *fewer safe places* to walk, jog, bike or play, including fewer gyms, recreational centers and swimming pools

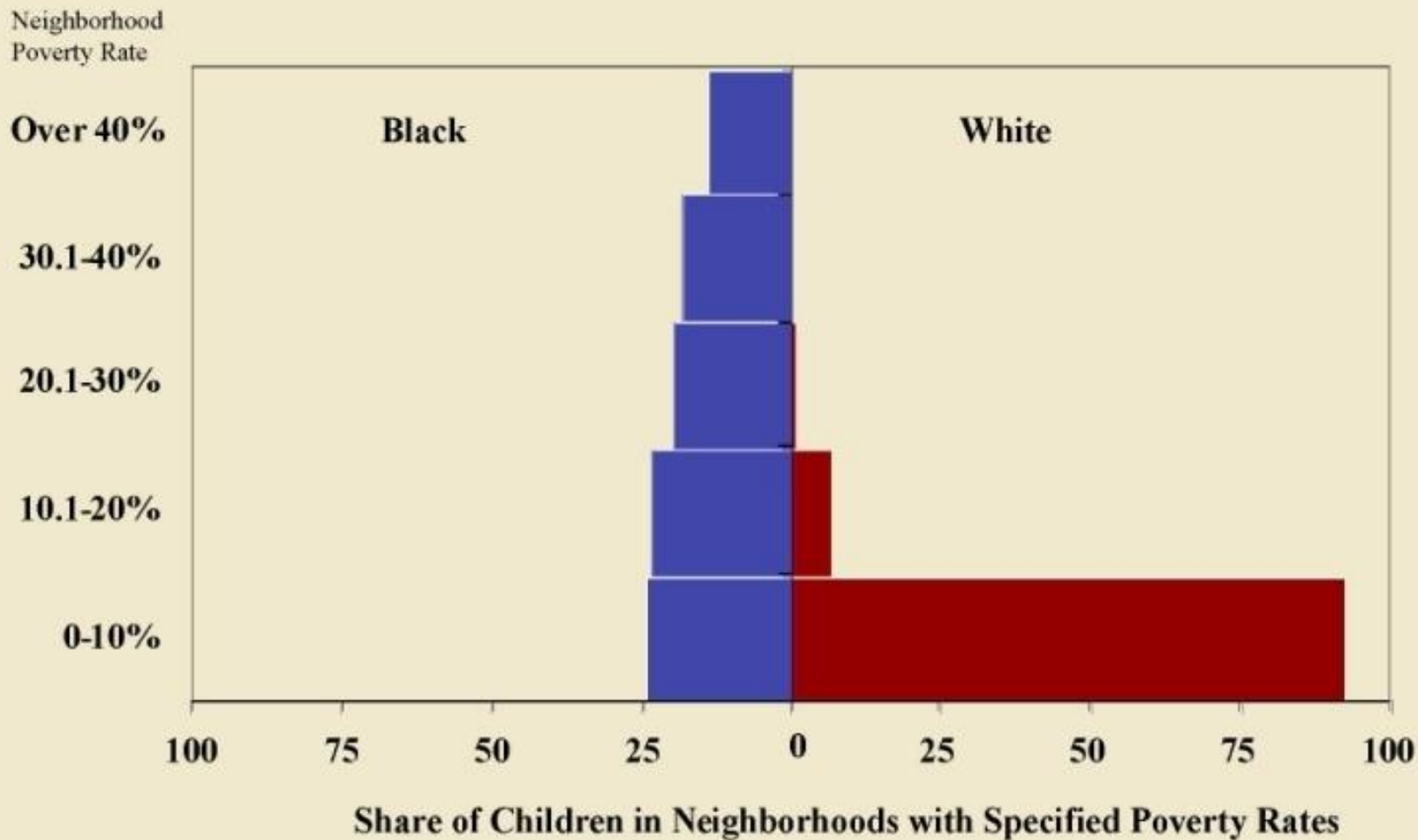


# Negative Effects of Segregation on Health and Human Development (cont'd)

- Low-income communities and communities of color are *more likely to be exposed* to environmental hazards. For example, 56% of residents in neighborhoods with commercial hazardous waste facilities are people of color even though they comprise less than 30% of the U.S. population
- The “Poverty Tax:” Residents of poor communities *pay more for the exact same consumer products* than those in higher income neighborhoods— more for auto loans, furniture, appliances, bank fees, and even groceries

# Metro Chicago

## Poverty Composition of Neighborhoods of Black v. White Children



# Metro Chicago

## Poverty Composition of Neighborhoods of Poor Black v. Poor White Children

Neighborhood  
Poverty Rate

Over 40%

Poor Black

Poor White

30.1-40%

20.1-30%

10.1-20%

0-10%

100

75

50

25

0

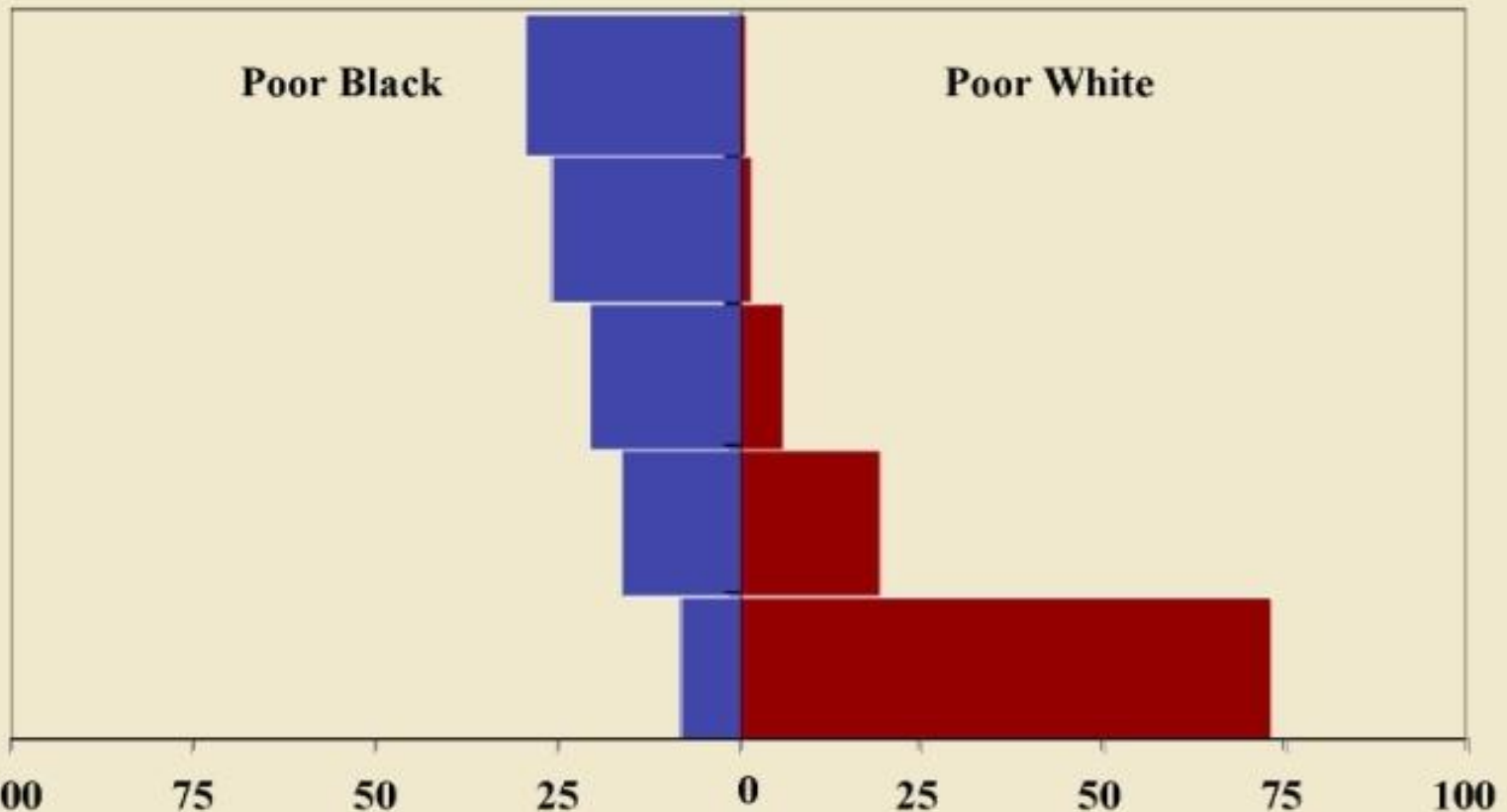
25

50

75

100

Share of Children in Neighborhoods with Specified Poverty Rates



# Metro Chicago

## Poverty Composition of Neighborhoods of All Black v. Poor White Children

Neighborhood  
Poverty Rate

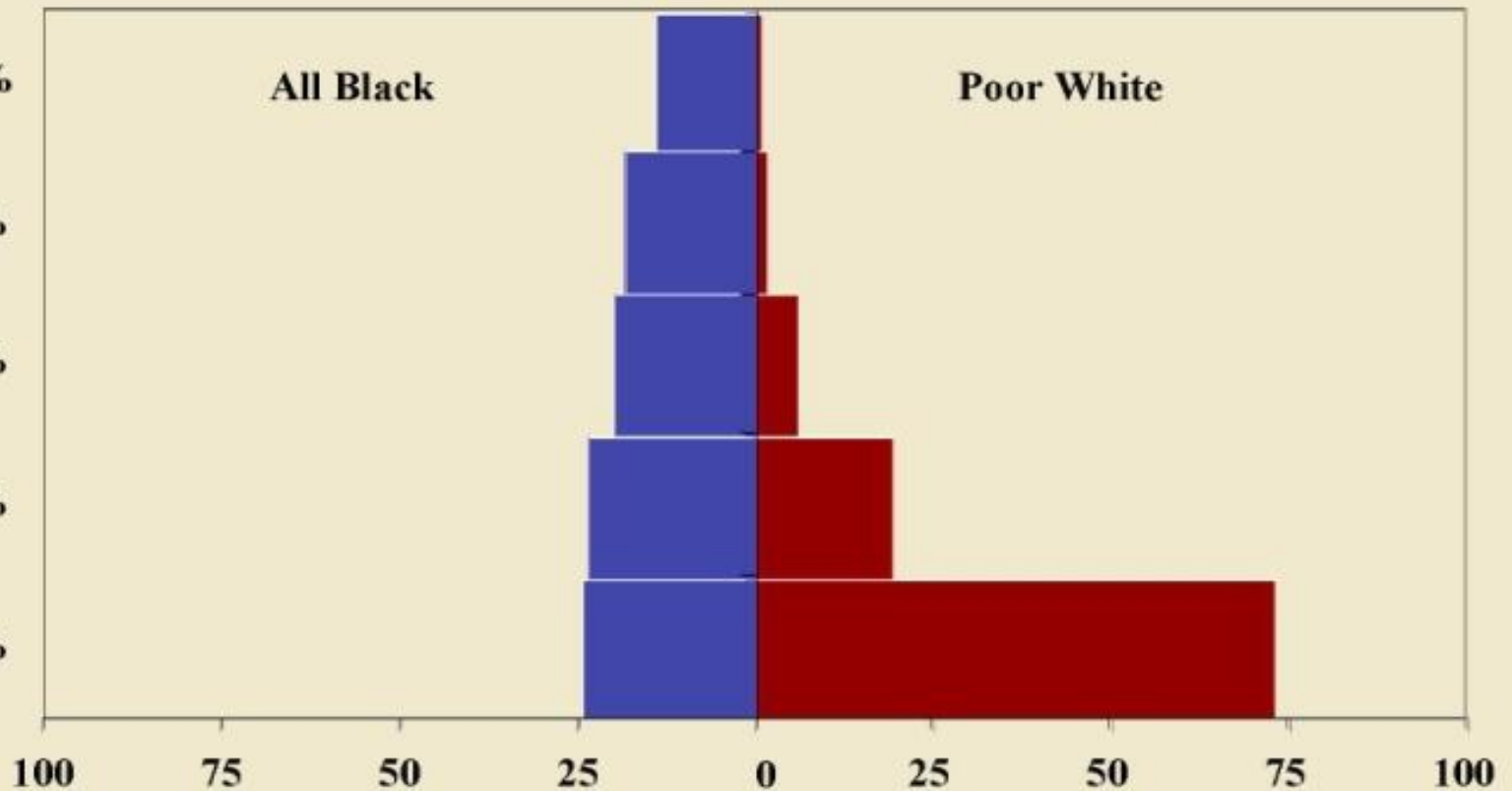
Over 40%

30.1-40%

20.1-30%

10.1-20%

0-10%



Share of Children in Neighborhoods with Specified Poverty Rates

# Science to Policy and Practice—What Does the Evidence Suggest?

- A focus on prevention, particularly on the conditions in which people live, work, play, and study
- Multiple strategies across sectors
- Sustained investment and a long-term policy agenda

# Science to Policy and Practice—What Does the Evidence Suggest?

- Place-based Strategies: Investments in Communities
- People-based Strategies: Increasing Housing Mobility Options

# Create Healthier Communities:

- Improve food and nutritional options through incentives for Farmer's Markets and grocery stores, and regulation of fast food and liquor stores
- Structure land use and zoning policy to reduce the concentration of health risks
- Institute Health Impact Assessments to determine the public health consequences of any new housing, transportation, labor, education policies

# Improve the Physical Environment of Communities:

- Improve air quality (e.g., by relocating bus depots further from homes and schools)
- Expand the availability of open space (e.g., encourage exercise- and pedestrian-friendly communities)
- Address disproportionate environmental impacts (e.g., encourage Brownfields redevelopment)



# Expanding Housing Mobility Options:

## Moving To Opportunity (MTO)

- U.S. Department of Housing and Urban Development (HUD) launched MTO demonstration in 1994 in five cities: Baltimore, Boston, Chicago, Los Angeles, and New York.
- MTO targeted families living in some of the nation's poorest, highest-crime communities and used housing subsidies to offer them a chance to move to lower-poverty neighborhoods.
- Findings from the follow up Three-City Study of MTO, in 2004 and 2005, answer some questions but also highlight the complexity of the MTO experience and the limitations of a relocation-only strategy.
- Away from concentrated poverty, would families fare better in terms of physical and mental health, risky sexual behavior and delinquency? Adolescent girls benefited from moving out of high poverty more than boys.

# Intersection of Health, Place & Equity



“[I]nequities in health [and] avoidable health inequalities arise because of the circumstances in which people grow, live, work, and age, and the systems put in place to deal with illness. The conditions in which people live and die are, in turn, shaped by political, social, and economic forces.”

World Health Organization Commission on the Social Determinants of Health (2008)