BUILDING CAPACITY TO IMPROVE COMMUNITY HEALTH

2007
Dear Readers,

On behalf of the Genesee County Community Board, we are pleased to bring you this report from the Prevention Research Center of Michigan. The purpose of the PRC/MI Community Board is to plan and carry out a community-driven research agenda to improve the health of Genesee County residents, especially African Americans, who experience a greater share of poor health outcomes. Community Board partners work together to expand and share their knowledge about effective ways to prevent disease and promote health. This report focuses on two projects that translate this purpose into action: *Genesee County REACH 2010 and Capacity Building to Reduce Health Disparities*.

The REACH 2010 initiative was launched in 2000 to reduce the three-fold disparity in infant mortality between African Americans and European Americans. REACH works to enhance the baby care system, foster community mobilization, and reduce racism, which partnership members have identified as a root cause of health disparities. The African American infant mortality rate in Genesee County has been reduced and the disparity has narrowed. The PRC/MI is conducting an evaluation of REACH to better understand how the various components of the initiative have contributed to an improvement in birth outcomes for African American infants.

Community partnerships are critical to the success of prevention research, yet if community organizations lack the resources and skills to be full partners in research, then the potential of a partnership will not be realized. The PRC/MI Capacity Building project was developed to empower community organizations to engage in research projects as equal partners. The project focuses on building skills in areas such as understanding and using survey data and constructing logic models. Organizations participating in the project have taken the lead on successful proposals in partnership with investigators at the School of Public Health. The evaluation of the Capacity Building project focuses on how the participating organizations have enhanced their abilities to develop, implement and evaluate interventions to improve health in their community.

We hope you enjoy this report and invite you to visit the PRC/MI website (www.sph.umich.edu/prc) to find out more about our Community Board and its work in Genesee County.

In good health,
Arlene Sparks, PRC/MI Community Board Chair
*Genesee County Community Action Resource Department*

Ward Lindsay, PRC/MI Community Board Chair-Elect
*Genesee County Health Department*

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We would like to share a few of the highlights of a very exciting and productive year for our Center. In October we hosted the PRC National Community Committee (NCC) retreat. Over forty NCC members from around the country convened in Flint to share experiences and make plans for the future. In November, PRC/MI faculty and community partners conducted four presentations at the American Public Health Association’s annual meeting in Boston. This spring, one of our core projects, Fathers and Sons, was featured at a briefing for Michigan state legislators. Throughout the year, PRC/MI staff and several of our community partners have been working with the Michigan Department of Community Health to develop a state-wide plan for youth violence prevention. We recently received news that our proposal to conduct a community-level participatory evaluation of the Ruth Mott Foundation’s Beautification Plan was funded. Finally, in 2006/2007 PRC/MI faculty, staff and community partners were authors of eight peer reviewed publications, three of which are highlighted in this report. We are looking forward to new challenges and accomplishments in the months ahead.

Marc Zimmerman, Ph.D.
*Principal Investigator & Director*

Susan Morrel-Samuels, MA, MPH
*Managing Director*
A new baby brings joy to a family, lights up the eyes of adults, and represents hope for the future. Unfortunately, African American babies are more likely to die than babies of any other racial or ethnic group in the United States. The Genesee County REACH project has mobilized the entire community to ensure that African American babies are born healthy and stay healthy throughout the crucial first year of life. In 1999, before this initiative began, the African American infant mortality rate in the county was 23.5/1000, more than three times that of white infants. By 2005, the African American infant mortality rate had fallen dramatically to 15.2/1000 and the disparity was reduced by 25%. The improvement in infant mortality is striking given that other indicators of family health in the REACH focus zip code areas such as percentage of children in single parent households and families living in poverty have worsened over the last five years. The Genesee County REACH 2010 partnership uses a model for infant mortality reduction.
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Reduction that encompasses individual women, their partners and families, their social networks, the social environment, the healthcare system and local and state policies. Underlying the model is the belief that racism contributes to infant mortality and that it must be addressed as part of any effort to reduce disparities. The REACH partnership includes the local health department, community-based organizations, the University of Michigan and a coalition of health care providers, insurers and businesses. REACH is funded by the Centers for Disease Control and Prevention.

The spirit of the REACH partnership is best expressed by the word Harambee, which means “pulling together” in Swahili. In fact, REACH initiated its community campaign with a series of Harambee dinners and community dialogues. These events included food, cultural presentations, education, and conversations about health disparities. The initiative includes a constellation of activities designed to enhance the baby care system, foster community mobilization, and reduce racism.

Local health systems use a perinatal risk assessment tool to ensure that women and their babies receive optimal care. They also promote a Safe Sleep campaign to raise awareness of the importance of putting babies to sleep on their backs. Every new medical resident at a local hospital now takes a guided windshield tour of the community to give them a better understanding of the barriers to health faced by their patients. Maternal/Infant Health Advocates conduct home visits to pregnant
and parenting women with identified risks to connect them to services and provide peer support. Over 750 community members and health care providers, representing over 100 organizations, have participated in Undoing Racism workshops that explore how the social and historical aspects of racism affect the health of African Americans. A community-based organization developed an African Culture, Education Development Center to foster awareness of the history, values, and culture of African Americans and to provide an inspirational setting for REACH classes and community gatherings.

The Prevention Research Center of Michigan (PRC/MI) is conducting an evaluation of the Genesee County REACH 2010 project to better understand the ways in which the initiative has contributed to reducing infant mortality. PRC/MI researchers at the University of Michigan School of Public Health are examining birth records of infants born in the focus zip codes in Genesee County and those born in comparable areas in other counties. Preliminary findings indicate that Genesee County African American women complete more prenatal visits than those in demographically similar areas. They are also less likely to be diagnosed...
A goal of the evaluation is to identify effective elements of REACH that could be translated to other communities struggling to reduce African American infant mortality. With medical risks during pregnancy. There has been a small increase in average weeks of gestation for African American infants since 2002, though average birth weight has not increased. The evaluation also includes a survey of a representative sample of residents in Genesee County and a comparison county. The focus of the survey is to determine the effects of REACH on the experiences, attitudes and beliefs of residents concerning race and health. In the coming year, the PRC/MI will expand and enhance the REACH evaluation by looking at birth records from a larger number of comparison areas over a longer period of time, conducting analyses of the networks between organizations involved in the initiative, and exploring the geographic and temporal connections between maternal and infant health outcomes and REACH programming. A goal of the evaluation is to identify effective elements of REACH that could be translated to other communities struggling to reduce African American infant mortality. The PRC/MI State Board will assist in disseminating the REACH experience throughout Michigan.

**ANNUAL INFANT MORTALITY RATES BY RACE - GENNESSE COUNTY 1999-2005**

Source: Michigan Department of Community Health, Vital Records & Health Data Development Section.
COMMUNITY-BASED ORGANIZATIONS (CBOs) face many competing priorities. They must be responsive to the needs of those they serve, comply with the expectations and requirements of funders, cultivate relationships with larger agencies, and recruit, train and retain staff to carry out their programs. When a CBO becomes a partner in a Prevention Research Center, the staff members take on the responsibility of participating in research projects that place additional demands on their time and the organization’s resources. The PRC/MI has initiated a Capacity Building research project to study how best to assist CBOs to become equal partners in community-based participatory research. Six community-based organizations have participated, along with the UM School of Public Health and Flint campus, the Genesee County Health Department and the Greater Flint Health Coalition. Although the primary focus is on increasing the capacity of CBOs, the flow of expertise goes in both directions, building the skills of the institutions to partner more successfully with communities in prevention research.
One outcome of the capacity-building project was the successful development and implementation of YOUR Blessed Health (YBH), a faith-based project designed to reduce the incidence of HIV/AIDS and sexually transmitted infections (STIs) among 11-19 year old African American males and females. YOUR Center staff took the lead on the proposal, assisted by UM School of Public Health faculty. The proposal included a needs assessment, based in part on data from the PRC/MI’s Speak to Your Health! Community Survey, a pre-test, post-test evaluation design. YOUR Center was successful in obtaining funding from the Ruth Mott Foundation to carry out the project.

YOUR Blessed Health provided an open and accepting setting where youth and adults discussed the behaviors that put them at risk for HIV/AIDS and sexually transmitted infections (STIs). The goals of the program were to increase youths awareness of their risks of contracting HIV or STIs, enhance their skills to communicate and negotiate with partners, and develop plans to reduce their

The Capacity Building project is designed to enhance CBOs’ ability to collaborate in and lead community-based participatory research projects by increasing their ability to (a) utilize data for program planning and evaluation (especially from the PRC/MI’s Speak to Your Health! Community Survey), (b) collaborate with the university and other institutional partners, (c) influence state and local policy, and (d) efficiently acquire and utilize financial resources. The CBOs have participated in organizational self-assessments, technical assistance, trainings, and workshops. Preliminary results of the project were presented at the 2006 American Public Health Association annual meeting. They highlight the dilemma facing CBOs: despite strong leadership and their ability to connect with and mobilize the community, CBOs often lack access to relationships and resources that lead to economic viability. Addressing the economic viability and stability of CBOs is essential to the future success of community partnerships and community-based participatory research.

To address these challenges, the Capacity Building partners have developed grant proposals, engaged in advocacy, and presented their work to local and national audiences. In the coming year the Capacity Building committee plans to submit proposals for HIV/AIDS and cancer prevention research projects led by community partners. They also plan to tell their story by presenting at conferences and writing papers about the model they have developed for strengthening community-based research partnerships.

**YOUR Blessed Health – Capacity-building in Action**

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HIV and STI risk. An additional goal of YBH was to help pastors, pastors' wives, and other adults to be positive forces in efforts to reduce HIV and STI transmission by promoting safer sex behaviors and abstinence.

YBH successfully engaged eleven churches and two housing communities over a six-month period. The staff trained over 365 people, including 189 youth, 121 adults, and 55 pastors' wives and church leaders. Although the quantitative results did not demonstrate significant changes in youths' skills or risk behaviors during the pilot period, the qualitative findings suggest important areas of success and lessons learned. Some particularly noteworthy findings are that many churches are interested in continuing this ministry and that eighty people were tested for HIV during YBH events, including several pastors. YOUR Center has submitted another proposal to refine and expand the intervention.

E. Hill De Loney, MA and Derek Griffith, PhD, Capacity-Building Co-Principal Investigators

Mrs. E. Hill De Loney and Dr. Derek Griffith have provided collaborative leadership for the Capacity Building project, an experience that they have found to be both challenging and rewarding. In the words of Mrs. De Loney: "Having the opportunity to co-lead the Capacity Building Committee emphatically reinforced for me the fact that, when conducted authentically, community based participatory research is the greatest force for change there is: change for the better."

E. Hill De Loney is the Director of Flint Odyssey House Health Awareness Center, an organization dedicated to promoting positive development and cultural awareness among African American youth. She was one of the original participants in the Kellogg Foundation's Community Based Public Health initiative, a collaborative (the Broome Team) whose members represented several CBOs, the local health department, UM-Flint and UM School of Public Health. The Broome Team laid the groundwork for the Prevention Research Center of Michigan. She is also the founder of the Flint Martin Luther King Day and Juneteenth celebrations, and the Harambee ceremonies which have become community traditions.

Derek Griffith is an Assistant Professor in the Department of Health Behavior and Health Education at the UM School of Public Health. His research explores four broad areas: social determinants of health, community-based participatory research, men's health, and health care disparities. He recently received a grant from the American Cancer Society: “Building Capacity to Reduce African American Men’s Dietary Cancer Risk”. Several of the Capacity Building organizations are partners in this project. Before joining the Prevention Research Center of Michigan, Dr. Griffith completed the Kellogg Community Health Scholar post-doctoral program at the University of North Carolina.
National Data for Monitoring and Evaluating Racial and Ethnic Health Inequities: Where do we go from here?

The elimination of racial and ethnic health inequities has become a central focus of health education and the national health agenda. Although the sophistication and volume of health data available have increased dramatically in recent years, this article examines the quality of the current data collected to achieve the goal of eliminating racial and ethnic health inequities. The authors provide recommendations for refining data collection to facilitate the elimination of racial and ethnic health inequities.


This study develops an explanatory framework for fear of neighborhood crime that includes social context and rates of assault injuries. Rates of assault injuries from hospital discharge records and responses to a representative community health survey were analyzed by zip code. Four variables have a significant unique contribution to fear of crime: respondent’s sex, perceptions of neighborhood social capital, and the rates of struck by/against assault injuries for the 10-24 and 50+ age groups. Those who perceive a high level of neighborhood social capital are less sensitive to assault injury rates.

The effects of cumulative risks and promotive factors on urban adolescent alcohol and other drug use: A longitudinal study of resiliency.

Resiliency theory provides a framework for studying why some youth exposed to risk factors do not develop negative behaviors. The purpose of this study was to test different models of resiliency in a longitudinal sample of urban adolescents. The study examined effects of cumulative risk and promotive factors on adolescent polydrug use including alcohol, tobacco and marijuana. Measures of risk and promotive factors included individual characteristics, peer influence, and family influence. The findings support resiliency theory and the use of cumulative risk and promotive measures in resiliency research. The article discusses the implications for prevention programming.
Speak to Your Health! Community Survey and Qualitative Assessment: This bi-annual survey is designed by community, health department and university partners to understand and monitor community health and well-being and to promote changes that benefit Genesee County residents. The goals are to: 1) understand residents’ health-related behaviors and perceptions; 2) provide information for needs assessments and evaluations of projects; 3) identify community assets; 4) understand the associations between residents’ health-related behaviors and perceptions, social determinants, and health outcomes; 5) provide training opportunities; and 6) develop a community health agenda that is widely disseminated and democratic.

Youth Empowerment Solutions for Peaceful Communities (YES): The goals of the YES project are to provide youth with opportunities for meaningful involvement in preventing youth violence and creating community change, enhance neighborhood organizations’ ability to engage youth in their activities, and improve the social and physical environment to reduce and prevent violence. The program includes three components: 1) youth empowerment activities; 2) neighborhood organization development; and 3) community development projects that involve youth and organizations working together. The evaluation includes student surveys, property ratings, and police incident data.

Friendly AccessSM Infant Mortality Initiative (FAIMI): FAIMI provides culturally competent education and advocacy, and promotes early, continuous, and appropriate care for African American women. The goal of the program is to reduce the disparity in infant mortality associated with low birth weight, preterm-birth and Sudden Infant Death Syndrome (SIDS). FAIMI’s primary intervention is the African American Family Resource Center (AFRICAN), a service that links African American women to resources in the community. The AFRICAN provides outreach through client follow-up, provider education, and social marketing. Lead organization: Greater Flint Health Coalition.

Improving Cancer Outcomes of African Americans in Michigan: The goal of this project is to increase awareness, communication and utilization of cancer screening programs and to decrease myths about cancer in the African American community. Teams in Detroit, Flint, Saginaw and Lansing have developed locally tailored strategies to address these issues. Recently, the project hosted a Cancer Awareness Conference in collaboration with the Great Lakes Cancer Institute. Lead organization: Faith Access to Community Economic Development.

Jackson County Community Survey: The PRC/MI is partnering with the Foote Hospital Foundation for a Healthy Community to conduct a county-wide representative survey that focuses on physical and mental health status, health behaviors and health services access and utilization. The Jackson Health Improvement Organization will use the results of the survey to focus and improve programs and policies that affect the health of county residents.

Collaborative Evaluation of the Ruth Mott Foundation’s Beautification Program: This project will document beautification activities of Ruth Mott grantees and the effects of these efforts on community and resident outcomes. The evaluation will engage stakeholders in a participatory process; facilitate critical deliberations about effective strategies and efficient allocation of resources required to sustain community revitalization; and document and disseminate the results of a comprehensive approach to creating a safe, attractive and livable community.
STATE BOARD ORGANIZATIONS

Blue Cross Blue Shield of Michigan
Michigan Association of Health Plans
Michigan Association for Local Public Health
Michigan Council for Maternal Child Health
Michigan Department of Community Health
Michigan League for Human Services
Michigan Nurses Association
Michigan Osteopathic Association
Michigan Primary Care Association
Michigan Public Health Institute
Michigan State Medical Society
United Auto Workers
University of Michigan School of Public Health

GENESEE COUNTY COMMUNITY BOARD ORGANIZATIONS

Dort Oak Park Neighborhood House
Faith Access to Community Economic Development
Flint/Genesee County Neighborhood Roundtable
Flint Odyssey House Health Awareness Center
Genesee County Community Action Resource Department
Genesee County Health Department
Greater Flint Health Coalition
University of Michigan-Flint
University of Michigan School of Public Health
YOUR Center

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