

Neighborhoods and Health

The RAND Center for Population Health and Health Disparities

Where you live affects your health. Recent research has shown, for example, that infant mortality, life expectancy, and the development of chronic diseases such as heart disease and asthma are all affected by the qualities of residential environments.

We know that neighborhoods “get under the skin” – but we don’t know exactly how. Most prior research on neighborhoods has focused on social processes and mechanisms. There has been relatively little research on how built environments – such as street patterns, housing density, transportation networks, and land use – affect health outcomes. Built environments, however, may strongly influence health outcomes, and may help to explain some persistent and troubling health disparities (such as the fact that people with lower socioeconomic status have poorer health than the general population). Built environments are susceptible to policy intervention. If we can improve our understanding of how built environments affect health, we can give policymakers powerful tools for improving health.

Center Goals

To advance understanding of how built environments affect health outcomes, RAND has established the Center for Population Health and Health Disparities. Five main objectives guide the Center’s work:

- To study the effects of neighborhoods on health throughout the life cycle and the pathways by which these effects are felt.
- To develop a rich data resource that can be used to enhance understanding of how neighborhoods influence health.
- To develop robust community-based participatory research partnerships within each of the three cities in which RAND is located (Santa Monica, California; the Washington, D.C. area; and Pittsburgh, Pennsylvania).
- To foster a community of interdisciplinary researchers—particularly biological and social scientists—focused on the social determinants of health, specifically the role of neighborhoods.
- To inform public policies aimed at improving population health.

Center Activities and Staff

To pursue these goals, the center will conduct a series of multidisciplinary research tasks using a range of approaches. Some of these tasks include:

Project 1 uses community-based participatory research to examine the impact of Proposition K (a 30 million dollar a year bonding initiative in Los Angeles to develop and renovate parks) on physical activity and other health outcomes. *Co-Principal Investigators: Deborah Cohen, MD, MPH, and Nicole Lurie, MD, MSPH*

Project 2 builds on two large national data sets (the Health Retirement Study and the Panel Study of Income Dynamics) to examine how physical and social aspects of neighborhoods affect functional and cognitive aspects of disability among the elderly. *Principal Investigator: Jeannette Rogowski, PhD*

Project 3 examines the relationships between neighborhood characteristics and the cumulative wear and tear on multiple organ systems as a result of life stress. *Co-Principal Investigators: Chloe Bird, PhD, and Brian Finch, PhD*

Project 4 examines the impact of the built environment on mental health, including emotional well-being and the development of mental illness in adults. *Principal Investigator: Roland Sturm, PhD*

To help integrate these projects and to promote synergies across them, the Center will maintain a Data and Methods Core. The intent of the core is to create a comprehensive repository of contextual data on neighborhoods that will be used by multiple projects, and to provide a locus for addressing challenging measurement and analytic issues. *Core Director: Jose Escarce, MD, PhD*

The Center's Director is Dr. Nicole Lurie, Senior Natural Scientist and the Paul O'Neill Alcoa Professor of Health Policy at RAND. For more information, contact project director Sarah Myers, 703-413-1100, x5460 or smyers@rand.org.