Displacement as a threat to good health: How self-reported experiences of social, built, natural, and economic environments relate to wellbeing

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Introduction
In epidemiology, there is a belief that one’s ZIP code may be a better predictor of health than one’s genetic code. The Healthy Neighborhoods Study, which began in 2015, aims to prove just that. The multi-site, longitudinal study will track changes in four key domains:

- resident experiences
- neighborhood conditions
- development
- health

across a cohort of nine neighborhoods that are likely to receive Transit Oriented Development (TOD) investments.

Neighborhood selection criteria:
- highly walkable
- near planned or current transit
- health disparities
- economic growth
- high levels of development

Methods: Participatory Action Research (PAR)
Community Research Partners in each neighborhood worked directly with MIT CoLab to recruit, train and certify 4-5 residents from each community to design and carry the PAR process. This approach acknowledges that people most affected by a problem experience and understand it the best, and subsequently have the most insight into how it should be addressed.

In this study, PAR centered on measuring the lived experiences of residents in communities undergoing development pressure and related changes in neighborhood conditions as mediators of individual and collective well-being.

Survey Participants
400

Across all 9 communities:
In communities that have seen rapid gentrification, people feel less stable. 40-50% of people surveyed think they will have to leave their neighborhood in the next 5 years.

A strong predictor of this appears to be whether they have moved in the past 5 years.

Results
Resident researchers have collected nearly 400 responses during the baseline data phase, which show three strong predictive relationships between wellbeing and neighborhood conditions:

1. self-determination (defined as people’s ability to meet personal priorities in the place where they live),
2. social support (defined as relationships with other people in in their communities that are supportive, affirming, inclusive, provide care and create leverage)
3. housing stability (defined as the belief that they will not have to relocate in the next five years)

have emerged as strong predictors of respondents reporting good health (defined as good overall mental and physical health).

Changing residences within the same neighborhood or relocating to a new one can shape people’s opportunities, access to resources, and overall health and wellbeing. Low-income households, renters, and younger families tend to move more often, for voluntary or involuntary reasons.

Development Implications
The present findings of this study inform future plans for urban development. Changing the conditions (built, natural, social and economic environments) in systematically underserved and historically disinvested neighborhoods is an opportunity to improve population health. However, new development that aims for health equity must be accessible to all original inhabitants.

Conclusions
- The capacity to create neighborhood conditions that foster good health starts with understanding resident perspective.
- Neighborhood conditions (also known as the social determinants of health) mediate health at the community level. Living in the same neighborhood over the long term builds social support and stability, which supports healthy people and healthy communities.
- When large numbers of people make frequent moves into and out of neighborhoods, relationships, social ties and community-connectedness can weaken. This has a negative effect on both individual and collective wellbeing.
- In the context of this study, a person’s health can be considered a physical indicator of their interactions with, and lived experiences in their neighborhood environment.

References

Healthy Neighborhoods Research Study in Partnership with:  
Funded by the Robert Wood Johnson Foundation and National institutes of Health