

The background of the cover is a night photograph of a city skyline, likely New York City, viewed from across a body of water. A large suspension bridge, possibly the Manhattan Bridge, is the central focus, with its cables and deck illuminated by warm lights. The city buildings in the background are also lit up, creating a vibrant urban scene. The overall color palette is dominated by warm, golden-yellow and orange tones, with some cooler blue and purple accents from the sky and water.

URBAN HEALTH AND SOCIETY

Interdisciplinary Approaches
to Research and Practice

NICHOLAS FREUDENBERG • SUSAN KLITZMAN • SUSAN SAEGERT EDITORS

The book cover features a night-time photograph of a city skyline, likely New York City, with a prominent suspension bridge in the foreground. The bridge's cables and towers are illuminated with warm lights, and the city buildings in the background are lit up, reflecting on the water below. The overall color palette is dominated by dark blues and greys, with the lights providing a contrast.

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Research and Practice

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PREFACE

In this volume, we seek to bring together two emerging fields of study. The first, urban health, asks how city living shapes health and how researchers, policymakers, health professionals, and others can contribute to healthier cities around the world. The second, interdisciplinary research, seeks to transcend the limitations of research approaches informed by a single discipline. As more of the world's populations move to cities and as urban areas face more complex health problems, improving the health of urban populations has become a central challenge for public health professionals, government officials, researchers, and urban dwellers. More than ever, understanding and solving problems like obesity, depression, diabetes, heart disease, pollution-related diseases, violence, and infant mortality will require researchers who can investigate health at individual, family, community, and policy levels and integrate theories, methods, and analytic techniques from a variety of disciplines.

We wrote and edited *Urban Health and Society: Interdisciplinary Approaches to Research and Practice* to prepare researchers and practitioners to be better equipped to meet the challenges of improving the health of urban populations in the coming decades. Our intended audience is researchers and graduate students in public health, social sciences, nursing, social work, and other related fields. In Part One of the book (Chapters One and Two), we introduce the central themes of the book and highlight the connections between population health and social justice. In Part Two (Chapters Three through Seven), interdisciplinary researchers who have studied food access in low-income

urban neighborhoods, child development and poverty, asthma and air pollution in New York City, the impact of social policy on the health of African Americans, and the health consequences of the recent housing foreclosure crisis explain how they studied the causes of these problems using a variety of disciplinary, conceptual, and methodological approaches. Part Three (Chapters Eight to Eleven) focuses on creating interventions to solve urban health problems. In each chapter, authors from two or more disciplines analyze the contributions their approach offers to solving a particular problem, including teen tobacco use, responses to natural and human-origin disasters, healthy aging for immigrants in urban areas, and reducing the epidemic of diabetes in African American communities. In Part Four (Chapter Twelve), we suggest how readers can use the insights from previous chapters to bring interdisciplinary approaches to research and intervention into their own work settings.

To assist faculty and students who use this book in graduate courses, we have included objectives and discussion questions at the end of each chapter and, in the back of the book, a glossary that defines the key concepts the authors discuss.

Our work as teachers, researchers, and policy advocates motivated us to compile this book. At City University of New York, we have worked together to develop interdisciplinary approaches to teaching and research, created new courses on interdisciplinary approaches to urban health for masters and doctoral students in public health and the social sciences, and collaborated on research projects aimed at understanding how housing policies and practices influence the health of urban populations. Separately, we have each worked for decades in university, municipal government, and community settings to study and develop interventions to reduce a variety of urban health problems. While we have

benefited from the growing body of literature on the theoretical foundations of interdisciplinary approaches to health research, our focus is more practical. We want to help our colleagues and students to use these methods to improve their work and increase its relevance to improving the health of urban populations.

We were fortunate to have the support of numerous individuals and organizations to complete this volume. A Collaborative Incentive Grant from the Chancellor's Office of City University of New York (CUNY) helped us get started on this work. A Roadmap Curriculum Development Award to Nicholas Freudenberg from the National Institute of General Medical Sciences (1 K07 GM72947) supported our work on creating an interdisciplinary doctoral curriculum in urban health at CUNY and supported some of the authors of the chapters in this volume. This award also supported a faculty seminar on interdisciplinary research that served as a valuable forum for developing this volume. In June 2006, we convened a workshop of faculty from eight U.S. and Canadian universities to discuss research and teaching in urban health. These discussions informed this volume and especially our observations in Chapters One and Twelve.

Many colleagues were kind enough to read chapters and provide helpful suggestions to authors and editors. These include Tom Angotti, Mimi Fahs, Sandro Galea, Mary Clare Lennon, Shirley Lindenbaum, and Amy Schulz. Several students also helped to compile literature reviews, prepare manuscripts, and assist in other ways. We thank Tracy Chu, Zoe Meleo Erwin, Lauren Evans, and Rachel Verni. At Jossey-Bass, Andrew Pasternack and Seth Schwartz provided encouragement and helpful suggestions for improving the manuscript. Finally, we thank our students and our community and municipal agency partners in research, who continually challenge, amplify, and enrich our understanding of urban health, interdisciplinary research, and the links

between public health and social justice. We gratefully acknowledge the help we have received from all these sources but of course accept full responsibility for the content of this volume.

New York City
Nicholas Freudenberg
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February 2009

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PART 1

INTRODUCTION

CHAPTER 1

FRAMEWORKS FOR INTERDISCIPLINARY URBAN HEALTH RESEARCH AND PRACTICE

**NICHOLAS FREUDENBERG, SUSAN KLITZMAN, SUSAN
SAEGERT**

LEARNING OBJECTIVES

- Offer three reasons why interdisciplinary research approaches are especially suitable for investigation of urban health problems.
- Explain the characteristics of cities that affect the public health challenges they face and that make urban health problems particularly appropriate for interdisciplinary study.
- Compare and contrast unidisciplinary and interdisciplinary research from the point of view of both substance and the processes involved, as well as the challenges inherent in interdisciplinary research.
- Describe approaches to overcoming interdisciplinary challenges related to assumptions, methods, institutional settings, and the focus of interventions.

INTRODUCTION

For the past two centuries, cities and urbanization have been a dominant influence on health and disease, and today, more of the world's population lives in cities than ever before. In 2007, half of the world's population lived in urban areas, and by 2030, three-quarters will live in cities.^{1,2} For health researchers and practitioners, understanding how the urban environment influences health and well-being will determine how successful we are in caring for individuals and families, in promoting population health, and in achieving local, national, and global health goals.

More broadly, as the United Nations *State of the World's Cities* report noted in 2001, "For better or worse, the development of contemporary societies will depend largely on understanding and managing the growth of cities. The city will increasingly become the test bed for the adequacy of political institutions, for the performance of government agencies, and for the effectiveness of programmes to combat social exclusion, to protect and repair the environment and to promote human development."³

As the urban population grows and as cities become more diverse and complex, it becomes increasingly difficult for any single individual, academic discipline, profession, institution, or agency to develop the insights and skills needed to improve the health of urban populations or to create healthier cities. Despite the growing recognition that only interdisciplinary research and practice can solve the health challenges facing cities today, most universities still train health researchers and professionals in a single discipline, teach them only a few research methods, and do not acquaint their students with the growing literature on interdisciplinary approaches to health. In this volume, we seek to remedy this problem by introducing students, researchers, and practitioners in public health, medicine,

social work, nursing, sociology, anthropology, psychology, urban planning, geography, and other disciplines to the concepts of interdisciplinary approaches to urban health research and practice. Our goals are to familiarize readers with the emerging concepts and principles that characterize interdisciplinary urban health research, to provide case studies of interdisciplinary health research within cities, and to prepare readers to work more effectively within interdisciplinary research and intervention teams.

This volume grows out of our own experiences as researchers and teachers, from our reading of several bodies of literature, and from recent calls for more emphasis on interdisciplinary education and research. Since the early 1980s, we have separately and together studied, developed, directed, and evaluated interventions to address several quintessential urban social, health, and environmental problems: childhood lead poisoning, asthma, deteriorated housing, HIV infection, reentry from jail, violence and crime, mothers' and children's mental health problems, and obesity and diabetes. In each of these cases, our efforts to understand and reduce the health problems facing urban neighborhoods forced us to transcend the disciplinary boundaries of our professional training and to learn new languages, concepts, and methods.

As teachers at City University of New York (CUNY), the largest urban public university in the nation, and Vanderbilt University, we also bumped against disciplinary boundaries. Our graduate students in psychology, public health, environmental health, health education, nursing, public policy, and sociology—many of them working in the health field during the day—wanted to take courses, learn skills, and integrate methods from different disciplines to succeed in solving the problems they faced in their own research and in jobs at the municipal health department, in voluntary health agencies, or with community organizations. Too

often, however, the requirements of accrediting agencies, the curriculum or departmental structure of our universities, or our own limitations as disciplinary researchers made it difficult for our students to achieve their interdisciplinary objectives. Recently, we have worked to develop at CUNY a variety of interdisciplinary approaches to graduate education for social science and public health students interested in urban health. These experiences have reinforced our view of both the potential and the obstacles facing interdisciplinary study.

As social scientists and health researchers, we are influenced by several emerging bodies of literature on urban health, on social determinants of health, on social support and health, on health inequities and disparities, on various participatory research methods, and on human rights, social justice, and health. Each of these fields has been developed by investigators from several disciplines, and each has begun to establish an interdisciplinary foundation that can guide future research and intervention. Although these new developments have informed our research and teaching, we have also been frustrated with the difficulty of developing for ourselves and our students a user-friendly synthesis of these emerging principles, theories, and methods that can guide research and practice. Once again, our own and our colleagues' disciplinary roots make it difficult to integrate new scholarship across levels and disciplines.

Finally, this book is a response to several recent calls for more attention to interdisciplinary research and education. In its report *The Future of the Public's Health in the 21st Century*,⁴ the National Academies Press emphasized the importance of interdisciplinary education in health. It called on universities to "increase integrated interdisciplinary learning opportunities for students in public health and other related health science professions . . . and

interdisciplinary education and appropriate incentives for faculty to undertake such activities.” The 2003 National Academies Press report *Who Will Keep the Public Healthy?*⁵ also stressed the need for more interdisciplinary education for biomedical and social science researchers. In its 2005 report *Facilitating Interdisciplinary Research*,⁶ the National Academies Press suggested that graduate students should explore ways to broaden their experience by gaining “requisite” knowledge in one or more fields in addition to their primary field. They also suggested that researchers and faculty members desiring to work on interdisciplinary research, education, and training projects should immerse themselves in the languages, cultures, and knowledge of their collaborators.

In its effort to chart a “road map” for medical research in the twenty-first century, the National Institutes of Health observed that “the scale and complexity of today’s biomedical research problems increasingly demand that scientists move beyond the confines of their own discipline and explore new organizational models for team science.”⁷ As urban health researchers and teachers, we support these calls for new paradigms but note the lack of practical tools for achieving these ambitious aims. We hope this volume will help to fill this gap.

Finally, the Institute of Medicine, the Council on Education for Public Health, and other bodies have called on schools of public health to strengthen preparation of students in interdisciplinary collaboration and communication. Most faculty and researchers agree in principle with this call, but few have developed practical strategies for meeting this new mandate or found ways to equip students with the competencies to defuse the land mines one encounters when crossing disciplinary boundaries. This book hopes to meet that need.