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Health Policy *Affects* Health Outcomes: Community Determinants of Health

Regina Benjamin, MD, MBA

The Gulf States Health Policy Center funds community-academic research partnerships to improve health outcomes in the Gulf States.

The Gulf States Health Policy Center (GS-HPC) is a Transdisciplinary Collaborative Center supported by National Institutes of Health–National Institute on Minority Health and Health Disparities. It was established to educate local and academic leaders and build collaborations as a means to engage the community in conducting its own health policy research. The ultimate goal is to improve the health outcomes in the Gulf States (states bordering the Gulf of Mexico: AL, MS, LA, FL, and TX).

Health outcomes are influenced by many determinants both within and outside of the traditional health system. For example, policies related to transportation, living wages, and zoning can dramatically impact health outcomes, especially for vulnerable communities with limited resiliency due to socioeconomic barriers.

In this special issue of *Progress in Community Health Partnerships* titled *Health Policy Affects Health Outcomes: Community Determinants of Health*, the Gulf States Health Policy Center highlights the impact of policy on health outcomes and health disparities in the Southeast, with a focus on the Gulf States.

Each of the Gulf States has a rich history, culture, and diversity which should be celebrated. However, these states are among the poorest in the nation, and consistently rank at, or near, the bottom nationally on multiple health indicators, including infant mortality and premature deaths, health care access, and the proportion of uninsured.¹ Further, these social and health disparities are compounded by the region's vulnerability to natural disasters, including hurricanes, floods, and tornadoes, such as the devastating Hurricane Katrina in 2005 and the Tuscaloosa tornado in 2011. The Gulf States have also suffered consequences of the man-made Deepwater Horizon Oil Spill disaster in 2010. Understanding how to speed recovery and build resilience, while identifying which populations are less likely to recover, is paramount to preventing these populations from falling further behind.

The twelve articles in this special issue reveal the myriad ways policy can impact health, foster equity, and shape healthier communities. The “secret sauce” at the center of this special issue is policy research grounded in community-academic partnerships. Each GS-HPC-funded project required a community PI and an academic PI with equal roles and responsibilities in the project. The community did not just participate in the research, they chose the topics and **did** the research with the aid of the academic partners.

The advantages of community-academic partnerships in public health are well documented.^{2–3} Community partners have “on the ground” knowledge of the community context and often understand the strengths and needs of the communities and those who serve them. On the other hand, researchers provide evidence and evaluate the effectiveness of community programs and policies. Community-academic partnerships foster this knowledge exchange, and while mutually beneficial, are designed to ultimately promote context-sensitive approaches to improve the policies and associated health outcomes of the target populations.

This special issue presents scientific advancements in collaborations purposed to identify and evaluate policies impacting community health. It highlights the diverse partnerships community members and academic researchers can form to assess policies impacting complex, community-specific health challenges. For example, Bright et al.⁴ describe how a subgroup of the GS-HPC Coalition formed to assess health issues in Hattiesburg, Mississippi and decided to look at policies on domestic violence screening for prenatal patients.

Other community-academic partnerships have coalesced around a specific condition in underserved communities and worked to understand the influence of policies that can alleviate a condition or undue health burden. Flocks et al.,⁵ for example, discuss the value of a partnership to investigate heat-related illnesses among farmworkers and screening policies for this population. Several other examples highlight the importance of partnering with the community at each stage of the policy research process, including in the needs assessment phase.

The articles underscore community members' unique ability to evaluate health policies contextually, accounting for local populations, the health landscape, and distinctive strengths and challenges. Hernandez et al.⁶ highlight the creation and implementation of the Morehouse School of Medicine Prevention Research Center's health needs assessment, collected by and from community residents and used to inform a data-driven community engaged research agenda. Not only do these partnerships exemplify collaboration successes, but many have also produced important initiatives for understanding the impact of health policies that can be reproduced across the Southeast to further reduce health disparities. As an example, Buckner et al.⁷ highlight the benefits of the Power Breathing™ curriculum for both asthma self-management and inter-professional training.

As a whole, this special issue provides a thorough introduction to the benefits and challenges of researching health policy in the community through community-academic partnerships to improve health in the Southeast. Featuring diverse policies, partnerships, and methods, the articles detail how the partnerships' success depended on a willingness, even eagerness, to collaborate—to build research by working together in new ways. Grounded in these partnerships, these projects illumine the importance of evaluating policy impacts on health to promote better outcomes and reduce health disparities in our most vulnerable communities.

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