Research for 21st Century Scholarship

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Professor

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Assignment #4 – Essay

Continuation of SR 953 Research for 21st Century paper that you began for Assignment #2 instructions for specifications). Use a Level 1 heading at the beginning of each summary. Level 2 and Level 3 headings are optional.

1. Include the following for each book from Assignment #2 (A minimum of two books ( minimum of one published in the last five years) relevant to your chosen topic.)
2. Include the following for each journal article from Assignment #2 (A minimum of five primary research journal articles relevant to your chosen topic; four articles must be less than five years old.)
* The title, year, and author(s) of the research;
* The basic categories in the literature review section;
* A brief description of the research type and methods;
* A brief description of the population being studied and how the participants were selected for the research; and
* A brief description of the findings and conclusions.

Essay Outline:

I. Introduction

 A. Statement of the problem: Arkansas's high obesity rates and over-prescription of opioid medications

 B. Importance of addressing health disparities and promoting human flourishing

 C. Role of faith-based communities in responding to health challenges

II. Addressing Health Disparities

 A. Solutions for under-resourced populations and linguistic barriers

 B. Place-based engagement and infrastructure development

 C. Importance of prevention response in the workforce and built environment

III. Understanding the Built Environment

 A. Influence of the built environment on daily experiences and well-being

 B. Role of residential and community planning in promoting human flourishing

 C. Interconnectedness of physical, emotional, social, and faith aspects

IV. Summary and Research Findings

 A. Findings from the Arkansas Prevention Needs Assessment Survey

 B. Importance of embracing healthful-living principles and addressing external exposures

 C. Contribution to public health built-environment strategies

V. Long-Term Community Recovery

 A. Efforts to address historical disinvestment and surface multiple chronic diseases

 B. Strengthening underserved neighborhoods and workforce competencies

 C. Linking health center guests with faith-based stakeholders for accountability

VI. Capacity Building and Mobilization

 A. Definition of capacity building and its importance in addressing health disparities

 B. Mobilization strategies for workforce development and continuous learning

 C. Cultural competency and understanding individual needs in diverse neighborhoods

VII. Response Clarity and Sustainable Solutions

 A. Formulating clear responses for effective community engagement

 B. Establishing frameworks through faith-based and community-based organizations

 C. Strategies for sustaining improvements and achieving health-equity access

VIII. Collaboration and Elimination of Inequities

 A. Importance of cross-sector collaboration and grassroots policy change

 B. Opportunities for collaboration in public health, workforce, and community development

 C. Recommendations for implementing racial and ethnic social determinants of health key drivers of health inequalities

IX. Topic-Specific Strategies for Community Recovery, Social Change, Narrative Change, and Policy Change

 A. Strategies for Community Recovery:

 1. Pneumatology, Virtuous Pedagogy, Phenomenology of Prejudice

 2. Intersectional collaboration and Cultural Competence

 3. Commitment and Investment, Literacy and Education, Access and Health Navigation

 B. Strategies for Social Change:

 1. Movements (SHGs) Mutual Aid, Participatory action – Unethical leader roles

 2. Eco Clean up, Life skills training (LST), Personal Competence

 3. Zoning-Stigma Needs Assessment, Training on key inequities

 C. Strategies for Narrative Change:

 1. Role of poverty subverting relationships, Socioeconomic factors

 2. Multi-chronic disease – Strength-based approached healing, Cumulative risk prevention multi-chronic disease

 3. Commitment and Investment, Nutrition, Built Environment Community Capacity

 D. Strategies for Policy Change:

 1. Positive Hospitality, Oppressive systems, Polity, Fractionalization

 2. Drug Refusal Skills, Mobility $ Workforce

 3. Care about Health Equity, Door-door / classroom to classroom

X. Additional Strategies

 A. Health Center Gaps:

 1. Congregations and Social Action, Precarious Denominations

 2. Role of Congregation in Society, Social stress and & vulnerability

 3. Nonjudgmental verbal care, Navigators through Apprenticeships

 B. Commitment and Investment – assessment survey, Community-based placed engagement teams - canvasser

 C. End the Massive Health Threat.

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**Prevention Response Built-Environment for Human-Flourishing**

Introduction, Arkansas faces significant challenges in public health, including high obesity rates and over-prescription of opioid medications. As a response, a proactive approach would guide the starting point of addressing the health disparities and ignite greater human flourishing. This essay explores the importance of prevention response in the built environment and the role of faith-based communities' response in leading from the viewpoint of nonjudgment.

Arkansas is one of the two states in twelfth position in the USA with high obesity rates and ranked second in the nation for over-prescribing opioid medications. (Arkansas Department of Health Committee, 2020)   Scholarly publications feature that health and mental hygiene are the world's biggest workforce and public health threats. I believe the faith community maintains the best principles of response to these tensions and stressors surfacing from disease.

In his dissertation work titled The Freedom of God: A Study in the Pneumatology of Robert Jenson, author: James Daryn Henry writes in The Freedom of the Church – The Spirit performs this work as a work of freedom, the freedom for the community at any one time to embody its own higher and ordained existence: “The Spirit frees an actual human community from merely historical determinisms…” Freedom, as the work of the Spirit in history, corresponds to the role of the Spirit in the Triune Life, “The Spirit’s role as the one who frees the Father and the Son is concretely his role as the one who frees the Christian community. The Christian community is freed by the Spirit to be the Body of Christ, which, of course, is a work that only God could do. Jenson describes the Spirit’s work. “ Jenson, Systematic Theology, 2:182 and Henry 84, 103.

Introduction to the Built Environment: The built environment profoundly influences daily experiences, interactions, and well-being. Urban planning public health departments and community development play vital roles in shaping health outcomes. By addressing social factors, determinants and promoting inclusivity, decision-makers can create environments that support active recreational leisure health for well-being exercise.

The solution to health disparities for under-resourced populations, and the poor including those facing education, workforce or linguistic barriers and ruddy-tint individuals, involves addressing these issues through place-based engagement and infrastructure development. Aiming to ensure equitable access to healthcare and improve health outcomes. Authors Parsell and Stambe, in the article Christianity, Helping People in Poverty, and Embodied Relationships details, why Christian volunteers desire meaningful relationships with people living in poverty whom they help? They state (Fluist, Bradustein, and Williams 2017) “through radical activism to promote societal change. ” Whether we look to the global North with advanced welfare states (Parsell, Clarke, and Perales 2021), or Iinternational aid to the so-called global South ( Offutt, Probasco, and (Vanidyanathan, 2016), it would be impossible to ignore the role of Christianity, or faith broadly, as an inspiration for practical help to people in poverty. (Robert Wuthnow, 1991) illustrates how people draw on religious teachings and religious language to anchor their actions to help others, including people in poverty. Author, Wuthnow, demonstrates the importance of people making meaning from religious language and teachings to influence the care and compassion they provide.  Prevention response in the workforce, classrooms and the built environment is needed for human flourishing. I believe faith-based centers, must become the response powerhouse for proactive inventions to create positive and generational change.

Reducing hesitancy will have to be door-to-door and classroom-to-classroom for collaborative gain success.

Introduction Addressing Health Disparities: Health disparities affect under-resourced populations, including those facing work, education, or linguistic barriers, and racial and ethnic discrimination. Place-based engagement and infrastructure development are key strategies to ensure equitable access to health and crisis care and improvement of health outcomes for youth and multiple chronic diseases. Prevention response in the workforce and built environment is crucial for human flourishing. In the introduction of the article authored by A. Susana Ramirez, in the *Journal of Communication in Healthcare*, strategies, Media and Engagement in Global Health, she shares in the introduction, “Preventable chronic disease remains a leading cause of death and disability in the United States, accounting for 7 to 10 deaths (James, 2017) .”  Although these outcomes are largely the result of individual behaviors, individuals’ health choices are influenced and constrained by context- the policies, systems, and environments (PSE) in which people live, work, learn, and play. Social Factors and or Determinants. Communication plays an essential role in changing the way the public perceives health and wellness, and by influencing policy and decision-makers by shifting norms from individual behavior change to systemic and structural change for healthier communities (Dorfman I, Wallack L., 2007).

With a career background in strategic contracts planning and urban land use development, I comprehend the significant influence of the built environment. It shapes the daily experiences, interactions, perceptions, beliefs, convictions, and well-being of our workforce and youth.  Through concentration on how residential and community planning can promote human flourishing centers, decision-makers with residential elders must together, address social factors in our environment.

Introduction The Intersection of Health and Faith: Scholarly research underscores the importance of integrating heal hand faith perspectives. By embracing holistic approaches, communities can address physical, emotional, social, and spiritual needs. Joanne M. Moyer & Claire Brandenburg (2021) This comprehensive approach acknowledges the interconnectedness of various dimensions in the promotion of well-being. Expanding this intercross-sectional topic highlights its relevance and encompasses aspects such as physical, emotional, social, faith, and leisure recreational balance.  The comprehensive approach acknowledges the interconnectedness of various dimensions in understanding the topic. My summary and theory formed after research and reading the Arkansas Prevention Needs Assessment Survey (APNA), that external or cultural exposures to tobacco use, opioids, marijuana, alcohol, indulgent eating, and physical inactivity among Arkansas’s 6th to 8th-grade youth are now the upbuilding gateways for a serious multi-chronic disease pandemic. (APNA. 2023)

The multi-chronic disease disparity from a lack of prevention measures will deepen, if health response and faith-based centers delay to ask and bring solution to the following questions, that were discussed in a book by author Bender, they are as follows: How do people practice religion in their everyday lives? How do our daily encounters with people who hold different religious beliefs shape the way we understand our own moral and spiritual selves? I agree with author Bender and the theoretical insights, written in Heaven’s Kitchen, as she writes ‘show faith as a living practice, reshaping our understanding of the role of religion in contemporary American life.’(Bender2023)

Multitudes must be taught and led to embrace, each of the healthful -living and Fruit of Spirit principles, so multitudes, flea inexhaustible ignorance of the laws of their anatomical being and value health. (White, 1864)

Through extensive scholarly research, I also, aim to contribute to the implementation, preservation, and advancement of public health built-environment strategies. Prioritization of the Governance of health is to be in all policies, well-being, and decision-making collaboration. I believe, that from equitable distribution of resources, established policy revisions, and informed health choices, a decrease in disease impacts will occur, due to knowledge-learner behaviors and improved constitution. Author Alex Shevrin Venet, in the Book, Equity-Centered Trauma Informed Education, shares in Chapter 5, Titled: Four Proactive Priorities for Decision Making on page 14, that leaders are to “foster empowerment which starts at the very basic level with ceasing all attempts to control people’s bodies within schools (Venet, 14).” This Is key also in our faith-based centers for leadership to be from the perspective of building relationships and then bullying an individual into their perceivable corrective action or measure. This is not leading from a position of Godly faith.

For the historically disinvested we must make an effort to put resources into place for long-term community recovery. Many things have been tolerated or unknown for a long time now and the onset of the pandemic surfaced multiple chronic diseases and the community must respond. In this timeframe we must focus on the long-term goal of community recovery and social change, narrative change, and policy change.

Multiple-chronic health response has no racial inclusion or equity limitation, all in humanity without a healthful-living training or policy implemented will meet a needless death due to reversible health disparities unaddressed. In the O21 Initial Evaluation of Louisiana’s “Small Changes/Healthy Habits” Pilot Program, article in Journal of Nutrition Education and Behavior, Volume 52, Issue7, Supplement, July 202, Page S10 noteworthy evidence shows gains in nutrition interventions. Authors Praja Adhikari MS, and Elizabeth Gollub Ph.D., MPH, RD write, in the use of theory section that the behavior goals were for routine automatic behaviors (habits) are needed and this study used, Transtheoretical Model and habit formation models. (Adhikari and Gollub, Supplement S10, 2020) I believe, that if nutritional guidelines are not modeled, this will remain the current massive health threat.

Introduction Role of Faith-Based Communities or Mutual-Aid, yes, Faith-based centers can serve as power hubs for proactive consistent interventions in neighborhoods for residents in the city and county. By promoting healthful living principles and addressing stigmas, these communities can contribute to positive, generational change. Reducing hesitancy requires collaborative efforts, including door-to-door and classroom-based initiatives.

Underserved neighborhoods need to be strengthened to maintain workforce competencies and resources needed to improve the health of knowledge-learners, who live in residential and commercial zoning stigmas not just community. Personal and public health nutrition should cause our decision makers and stakeholders to also think about providing resources, data collection, sharing, and greater access.  I believe when we link the health center guest with an internal faith-based stakeholder the health client due to access, gives the health guest accountability as a knowledge-learner to care for themselves and stop neglect.

In author Borkman’s work she considered seminal writer Bohm’s (1987, 1996) notion of dialogue as an underlying theoretical concept that describes the characteristic of sharing that applies to 12-step mutual aid groups. The physicist David Bohm became dissatisfied with the competitive and argumentative-based process of scientific inquiry and developed the concept of dialogue as an alternative communication process that he thought facilitated inquiry and the accumulation of knowledge.  Bohm’s dialogue is a specialized form of communication that is a sustained collective inquiry in a group setting into the assumptions, certainties, and processes that structure the everyday experience.  (Groupwork Vol. 27(#), 2017, pp. 25-46, (Borkman, p. 27)

Meaningful communication is groomed between residences and stakeholders. Typically, these community center or civic all meetings afford capacity building. What does the term “capacity building” refer to, well it means capacity building to include actions that we want to build, strengthen, and maintain? For instance, health nutrition, recreational leisure, and multichoice disease disparities.

Mobilization is definitely a must, the money for workforce development, partnerships, apprenticeships, and leadership continuous learning are pertinent layers. Yes, but also personnel, media materials, technical training, infrastructure, surveillance reporting, virtual or physical outreach, team-building retreats, or translation funding.  Cultural competency is key and knowing what the individual is working toward is so key, especially with all the growing mixed eco-social multi-ethnic, and racial diverse neighborhoods.

Cultural competency response clarity must be formulated, to allow for context effectiveness in the community. To enhance problem-solving capacities, we must focus on how our built environments are designed so the health disease disparities problem-solving can start to occur for place-based engagement.  Author Venet, again gives great support for how to mingle with under-resourced or poor and or youth, as listed in the book Equity-Centered Trauma Informed Education,  in chapter 16 on page 13, it is shared to build relationships rooted in equity – this level of healing is required and clinicians agree.  “… building resilience to guard against future trauma happens when the context of strong, supportive relationships proactively builds, setting one up for success. These relationships should not be left up to the teacher alone. ” (Venet, page 13, 2023) and in her conclusion I appreciate seeing what author Venet, states, “… teachers need to see relationship building as a skill set to learn and practice.” (Venet, page 13, 2023) All in all, building relationships, organizing relationships, and building community knowledge-learners who respond to diseased guests, from faith and not stigmas, I know will solidify greater partnerships, sharing information and knowledge. Elected officials learning from the community and listening as well as knowing what people require for improved health is the basis for one community's integrity.

Community and residents within neighborhoods must get help, but after the help how will they sustain themselves? When various frameworks are established through faith-based and community-based organizations and teaming methods, some real problems will be solved.  Considerable phases for development toward listed achievable goals, with objectives for health-equity access for the workforce, must be given some consideration.

Different buy-in meetings and focus groups with allies, with local residents and leadership must strategize from the beginning with intentions to eliminate unequal, unfair, and unjust inequities, destructing the built environment and designing persuading youth. With a study to this level, the data or the science will enrich the state of Arkansas and the Nation.

Through Vertical Absolute Global Consortium Consultancy methods, tailored media, door-to-door engagement events, and the massive disease rise, in youth and community health mishaps, I believe these disinvested groups who are often under-resourced, will have upstream movement.

Neighborhoods in disinvested cities, counties, or rural areas, need vigilant knowledgeable voice.  Seminal Author Digby Baltzell, in his 1979 Book, wrote that American society has increasingly conformed to the Philadelphia model, it has been afflicted by a mounting crisis of authority.  “The Federalist party died out after the first three decades of the Republic. That it did so was perhaps inevitable; that it was a good thing for our nation is moot point” (p. 202) With agitation of the activation point through grass-roots policy change and implementation, early gateway substance use or excessive eating, by youth, and the existing workforce will tremendously move forward in health gains and no longer disparity, as poor behaviors are decreased willingly, by the knowledge-learner.

The challenges, and opportunities: The Arkansas Prevention Needs Assessment Survey highlights the urgency of addressing external exposures contributing to multiple chronic diseases. By prioritizing governance of health in policies and decision-making, communities with educators can mitigate health disparities and improve overall health outcomes over time.

In conclusion, investments in prevention response, before the crisis and community development are essential for the effective building of health equity. In the *Journal of Urban Affairs*, in the opening chapters, the author of Grassroots Mobilization for a Just, Green Urban Future: Building Community Infrastructure against Green Gentrification and Displacement, writes “Greenwashing and (re)development of green amenities in vulnerable neighborhoods- those often most in need of support toward resilience and to be exposed to the true impacts of gentrification. Such as pricing-out and physical displacement from housing, socio-cultural displacement from public space, and associated personal and community traumas.” (Oscilowicz, 2023 )

The latter being the focus of my essay strategies and tools used in the community from community and by the community residents, will balance the sustainable foundation. Through cross-sector collaboration and health disparities advocacy. By prioritizing prevention, communities can create a healthier more robust narrative for our human-frame. Investments through cross-sector collaboration with the residents, faith, and civic community development sector are required. Barriers must be the constant discussion with resolution by design. Opportunities to peer into public health, workforce, disease, education, and community development collaboration and share recommendations from the new public primer which points toward greater access to head-off disease and implement racial ethnic horticultural mobility goals, through response for prevention and before crisis. This is what is tantamount now, for shaping our response to multi-chronic disease in the built environment for humanity.

Assignment Relevant Book and Journal Articles

Book

1. Venet, A.S. (2023). Equity-Centered Trauma-Informed Education (1st ed.). Routledge. <https://doi.org/10.4324/9781032677989>, pages 13, 15, 16)
* The basic categories in the literature review section - book
* A brief description of the research type and methods – The focus is for trauma-informed initiatives facing students outside of school. The six principles for equity-centered trauma-informed education.
* A brief description of the population being studied and how the participants were selected for the research; and – the study shared the importance of teaching decision making and building rooted relationships built in equity.
* A brief description of the findings and conclusions – The need to over through inequitable systems, together with educators and not only community.

Assignment Relevant Book and Journal Articles

Book

1. Borkman, T. (04 Jan. 2021). Self-Help/Mutual Aid Groups and Peer Support. Leiden, The Netherlands: Brill. <https://doi.org/10.1163/9789004448001>

Biography of Author and Credentials - Thomasina Borkman -

Self-Help/Mutual Aid Groups and Peer Support

Thomasina Borkman, Contributors: Carol Munn-Giddings, and Melanie Boyce

Type: Chapter; Series: Brill Research Perspectives in Humanities and Social Sciences, Volume: 23 and Voluntaristics Review, Volumen: 23; E-Book ISBN: 9789004448001 Print Publication Data 29 Dec 2020

Cite Article:

Borkman, T. (04 Jan. 2021). Self-Help/Mutual Aid Groups and Peer Support. Leiden, The Netherlands: Brill. https://doi.org/10.1163/9789004448001

About the Author Thomasina Borkman – a Columbia University graduate, Professor of Sociology Emerita at George Mason University. Known for her research on self-help groups and peer support, especially her book Understanding Self-Help/Mutual Aid: Experiential Learning in the Commons (1999). In this book she reviews the English-language social science research on North American self-help/mutual aid groups (SHGs) and organizations and some from industrialized countries. SHGs, known by many names, are voluntary, members-run groups of peers who share a common issue, utilize lived experiences, and practice mutual aid.

In Text citation format Author, 2024 and Source Locator page number or Parenthetical and or Narrative in Text Citation

About the Contributors: Carol Munn-Giddings – Ph.D. Loughborough University, is Professor of Participative Inquiry and Collaborative Practices at Anglia Ruskin University. She is known for her research on self-help/mutual aid and complementary participatory research that engage citizens and practitioners in the research process. and

Contributing Author Melanie Boyce – Ph.D. Anglia Ruskin University, is Senior Research Fellow at Anglia Fuskin University. She has expertise in undertaking community-based research with groups and communities that are often defined as marginalized, due to there health and /or social situation.

1. title, year –

Self-Help/Mutual Aid Groups and Peer Support, 2020

1. author of research - Thomasina Borkman and Carol MunnGiddings
2. basic categories in the literature review section - Article
* A brief description of the research type and methods Audio recorded meetings and observation with stress-coping Careers groups in compared with observational data from Alcoholics Anonymous groups more of the identity changing groups.
* A brief description of the population being studied and how the participants were selected for the research; and – the population did not openly disagree with one another but would share a difference of understanding in a story shared;
* A brief description of the findings and conclusions- The researches say the groups as collective learning enterprises.

Assignment Relevant Book and Journal Articles

Journal

1. Hall, P Dobkin. “Historical Perspectives on Religion, Government and Social Welfare in America.” *Can Charitable Choice Work? Covering Religion’s Impact on Urban Affairs and Social Services.* Ed. Andrew Walsh. Greenberb Center for the study of Religion in Public Life, Trinity college, 2001.
* The title, year, and author(s) of the research;
* The basic categories in the literature review section;
* A brief description of the research type and methods;
* A brief description of the population being studied and how the participants were selected for the research; and
* A brief description of the findings and conclusions.

Assignment Relevant Book and Journal Articles

Journal

1. Fine, B. (2010). Theories of Social Capital. Researchers Behaving Badly: PlutoPress. Palgrave Macmillan, a division of St. Martin’s Press LLC, British Library Cataloguing in Publication Data; A catalogue record for this book is available from the British Library, ISBN 978 0 7453 2997 0 Print Publication Data 2010, Library of Congress Cataloging in Publication Data applied for <https://library.oapen.org/bitstream/handle/20.500.12657/30775/642727.pdf;sequence=1>

Biography of Author and Credentials – Ben Fine -

Theories of Social Capital: Researchers Behaving Badly

Ben Fine

Type: Book: Pluto Press , Palgrave Macmillan, a division of St. Martin’s Press LLC, British Library Cataloguing in Publication Data; A catalogue record for this book is available from the British Library, ISBN 978 0 7453 2997 0 Print Publication Data 2010, Library of Congress Cataloging in Publication Data applied for

Cite Article:

Fine, B. (2010). Theories of Social Capital. Researchers Behaving Badly: PlutoPress. Palgrave Macmillan, a division of St. Martin’s Press LLC, British Library Cataloguing in Publication Data; A catalogue record for this book is available from the British Library, ISBN 978 0 7453 2997 0 Print Publication Data 2010, Library of Congress Cataloging in Publication Data applied for

<https://library.oapen.org/bitstream/handle/20.500.12657/30775/642727.pdf;sequence=1>

About the Author Ben Fine

1. title, year –

Theories of Social Capital. Researchers Behaving Badly, 2010

1. author of research – Ben Fine
2. basic categories in the literature review section - introduction, background section; body review and discussion of sources, conclusions and recommendations, acknowledgments
* The title, year, and author(s) of the research;
* The basic categories in the literature review section;
* A brief description of the research type and methods;
* A brief description of the population being studied and how the participants were selected for the research; and
* A brief description of the findings and conclusions.

Assignment Relevant Book and Journal Articles

Journal

1. Joanne M. Moyer & Claire Brandenbarg (2021) The landscape of faith-based environmental engagement in Canada, Local Environment, 26:10, 1267-1283, DOI: 10.1080/13549839.2021.1973395

The landscape of faith-based environmental engagement in Canada

Joanne M. Moyer & Claire Brandenbarg

Local Environment, Volume 26, 2021 – Issue 10

Published Online: 01 Sep 2021

Cite Article:

Joanne M. Moyer & Claire Brandenbarg (2021) The landscape of faith-based environmental engagement in Canada, Local Environment, 26:10, 1267-1283, DOI: 10.1080/13549839.2021.1973395

About the Author Joanne M. Moyer – is a Mennonite community volunteer for over 15 years. This Research Ethics Board was with the King’s University. The notes shared the authors had the option of using pseudonym or real names. The Author was contacted by email

About the Author Claire Brandenbarg – No detailed information was listed from this author. The notes shared the authors had the option of using pseudonym or real names. The Author was contacted by email.

* The basic categories in the literature review section – Research article
* A brief description of the research type and methods; - Faith communites are increasingly recognized as an important piece of civil society and contribute to the addressing of difficult sustainability and environmental problems
* A brief description of the population being studied and how the participants were selected for the research; and – Organizations in Canda, place where faith based environmentalism is not yet studied extensively.
* A brief description of the findings and conclusions. – focused on contemporary activites , formation activites, advocacy and activism and practical actions. Actvities like activism and worship; holistic approach to the world views

Assignment Relevant Book and Journal Articles

Journal

1. Cameron Parsell, Rose Stambe (2023) Christianity, Helping People in Poverty, and Embodied Relationships, <https://doi.org/10.1111/jssr.12899>

Christianity, Helping People in Poverty, and Embodied Relationships

Cameron Parsell, Rose Stambe

Journal for the Scientific Study of Religion, 2023, Early view

Published Online: 06 December 2023

Cite Article:

Cameron Parsell, Rose Stambe (2023) Christianity, Helping People in Poverty, and Embodied Relationships, https://doi.org/10.1111/jssr.12899

About the Authors Cameron Parsell, Rose Stambe – is a

About the Author Rose Stambe – No detailed information was listed from this author. The notes shared the authors had the option of using pseudonym or real names. The Author was contacted by email.

* The basic categories in the literature review section;
* A brief description of the research type and methods; - demonstrated that people animated by Christianity draw on faith to help people in poverty through building relationships. This as a means to change people, including through evangelizing.
* A brief description of the population being studied and how the participants were selected for the research; and -people in living, church based volunteers
* A brief description of the findings and conclusions – Authors concluded that the realities of poverty subvert relationships; And people in poverty prioritize their material needs. Relationships can be a vehicle to change oppressive systems.

Assignment Relevant Book and Journal Articles

Journal

1. A. Susana Ramirez, Kiely Houston, Clancey Bateman, Zabrina Campos-Melendez, Erendira Estrada, Kathleen Grassi, Eliana Greenberg, Katie Johnson, Stephanie Nathan & Raquel Perez-Zuniga (2023) Communicating about the social determinants of health: development of a local brand, Journal of Communication in Healthcare, 16:3, 231-238, DOI: 10.108/17538068.2023.2192579; <https://doi.org/10.1080/17538068.2023.2192579>

Communicating about the social determinants of health: development of a local brand

Author’s Contributors – A. Susana Ramirez, Kiely Houston, Clancey Bateman, Zabrina Campos-Melendez, Erendira Estrada, Kathleen Grassi, Eliana Greenberg, Katie Johnson, Stephanie Nathan & Raquel Perez-Zuniga

Cite Article:

A. Susana Ramirez, Kiely Houston, Clancey Bateman, Zabrina Campos-Melendez, Erendira Estrada, Kathleen Grassi, Eliana Greenberg, Katie Johnson, Stephanie Nathan & Raquel Perez-Zuniga (2023) Communicating about the social determinants of health: development of a local brand, Journal of Communication in Healthcare, 16:3, 231-238, DOI: 10.108/17538068.2023.2192579

https://doi.org/10.1080/17538068.2023.2192579

About the Authors A. Susana Ramirez, Kiely Houston, Clancey Bateman, Zabrina Campos-Melendez, Erendira Estrada, Kathleen Grassi, Eliana Greenberg, Katie Johnson, Stephanie Nathan & Raquel Perez-Zuniga – all of the school of Social Sciences, Humanities, and Arts, University of California – Merced, Merced, CA, USA; b John Snow, Inc., Boston, MA, USA; c Merced County Department of Public Health, Merced, CA USA No other detailed information was listed from this author. The notes shared the authors had the option of using pseudonym or real names. The Author was contacted by email.

1. title, year –
2. Communicating about the social determinants of health: development of a local brand, 2023
3. author of research - A. Susana Ramirez, Kiely Houston, Clancey Bateman, Zabrina Campos-Melendez, Erendira Estrada, Kathleen Grassi, Eliana Greenberg, Katie Johnson, Stephanie Nathan & Raquel Perez-Zuniga
4. basic categories in the literature review section - Article
5. a brief description of the research type and methods – The research type and methods had four key phases of campaign development: (1) Formative evaluation to identify priorities, guiding themes, and audience segments with resident interviews; representatives of community-based partner organizations; brand development from surveys; message testing approaches and verbal and visual appeals;
6. a brief description of the population being studied - Residents in the campaign area of English, Spanish and Hmong languages.
7. how the participants were selected for the research – Based on the diverse groups location in community or county
8. a brief description of the findings and conclusions – The conclusion was to support policy, systems, and environmental change approach to chronic disease prevention must carefully match messages with appropriate audiences. The messaging and effectiveness across multiple diverse audiences was accomplished for better understanding.
* A brief description of the research type and methods – population approaches to chronic disease prevention leverage and mass media; formative evaluation to identify priorities
* A brief description of the population being studied and how the participants were selected for the research; and – focus groups, surveys and message testing and verbal visual appeals with residents from 15 organizations
* A brief description of the findings and conclusions- reviewed major themes that was helpful for the developed message of transforming health; Residents had enthusiasm for the campaign. The Chronic campaign must directly reflect the message for effectiveness across multiple diverse audiences.

Assignment Relevant Book and Journal Articles

Journal

1. Joanne M. Moyer & Claire Brandenbarg (2021) Rethinking Religion: Toward a practice Approach: The landscape of faith-based environmental engagement in Canada, Local Environment, 26:10, 1267-1283, DOI: 10.1080/13549839.2021.1973395

Rethinking Religion: Toward a practice Approach

Joanne M. Moyer & Claire Brandenbarg

Local Environment, Volume 26, 2021 – Issue 10

Published Online: 01 Sep 2021

Cite Article:

Joanne M. Moyer & Claire Brandenbarg (2021) Rethinking Religion: Toward a practice Approach

:The landscape of faith-based environmental engagement in Canada, Local Environment, 26:10, 1267-1283, DOI: 10.1080/13549839.2021.1973395

About the Author Joanne M. Moyer – is a Mennonite community volunteer for over 15 years. This Research Ethics Board was with the King’s University. The notes shared the authors had the option of using pseudonym or real names. The Author was contacted by email

About the Author Claire Brandenbarg – No detailed information was listed from this author. The notes shared the authors had the option of using pseudonym or real names. The Author was contacted by email.

* The basic categories in the literature review section; -Article
* A brief description of the research type and methods; - volunteer center
* A brief description of the population being studied and how the participants were selected for the research; and
* A brief description of the findings and conclusions.

Assignment Relevant Book and Journal Articles

Journal

1. Adhikari, P., Gollub, R. O21 Initial Evaluation of Louisiana’s “Small Changes/Healthy Habits” Pilot Program, *Journal of Nutrition Education and Behavior 52 (7), S10, 2020.*
* The basic categories in the literature review section – Oral Abstracts
* A brief description of the research type and methods – Evaluation methods, pre/post survey to track short-term changes in eating, physical activity; Data self reported.
* A brief description of the population being studied and how the participants were selected for the research; and – The Latino children ages 5 to 9; 90-minutes/week over 10 weeks. Eligibility was being Latino or having a child ager 5 to 9 with BMI for age in 85%
* A brief description of the findings and conclusions -Behavior improvement index in consumption of vegetables, fruits and whole grains and confidence to prepare healthy food. All participants rated the program “very good.” Conclusion program effectively influenced healthy eating and physical activity behaviors and the long-term evaluation will help predict development of healthier lifestyles within our communities.

Assignment Relevant Book and Journal Articles

Journal

1. Baltzell, E. Digby. (1979). *Puritan Boston and Quaker Philadelphia: Two protestant Ethics and the Sprit of Class Authority*. New York, NY: Free Press.
* The basic categories in the literature review section - Ethics
* A brief description of the book type and methods – Written in Dutch and painful to read, per Karol Edward Soetan, University of Rochester
* A brief description of the population being studied and how the participants were selected for the research; and – E. Digby Baltzell’s distinguished study is that the cultures of Philadelphia and Boston reflect profoundly different Protestant ethics.; Stating a considered collective difference in Boston’s upper class as well as the political authority of the Philadelphia’s social elite.
* A brief description of the findings and conclusions – the book has a wide range of analysis and unavoidably leaves certain loose ends.

Assignment Relevant Book and Journal Articles

Journal

1. Bender, Courtney. 1995. “The Meals are the Message: The Growth and Congestion of an AIDS Service Organization’s Mission in Multiple Institutional Fields.” Working Paper#221. New Haven: {program on Non-Profit Organizations, Yale University.
* The basic categories in the literature review section; Spirituality Srorytelling
* A brief description of the research type and methods; Different religious beliefs shape the way we understand our own moral and spiritual selves;
* A brief description of the population being studied and how the participants were selected for the research; and - Volunteers gave voice to moral positions and religious values, in the time frame of cooking and how they saw own spiritual lives.
* A brief description of the findings and conclusions – showed how faith as a living practice, reshapes our understanding of the role of religion in contemporary American life.

Assignment Relevant Book and Journal Articles

Book

1. Bender, Courtney, *Heaven’s Kitchen:* Living Religion at God’s Love We Deliver (Chicago, IL, 2003; outline edn, Chicago Scholarship Online, 21 Mar. 2013).

New Haven: {program on Non-Profit Organizations, Yale University.

* The basic categories in the literature review section; Spirituality Srorytelling
* A brief description of the research type and methods; Different religious beliefs shape the way we understand our own moral and spiritual selves;
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* A brief description of the findings and conclusions – showed how faith as a living practice, reshapes our understanding of the role of religion in contemporary American life.

WORKCITED

Adhikari, P., Gollub, R. O21 Initial Evaluation of Louisiana’s “Small Changes/Healthy Habits” Pilot Program, *Journal of Nutrition Education and Behavior 52 (7), S10, 2020.*

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Borkman, T. (04 Jan. 2021). “Self-Help/Mutual Aid Groups and Peer Support.” Leiden, The Netherlands: Brill. <https://doi.org/10.1163/9789004448001>

Cameron Parsell, Rose Stambe (2023) “Christianity, Helping People in Poverty, and Embodied Relationships”, <https://doi.org/10.1111/jssr.12899>

Dorfman L, Wallack L., Moving nutrition upstream: the case for reframing obesty. J Nutrition Edc Behav. 2007; 39(2 Suppl.):S45-50. Doi:10.1016/j.jneb.2006.08.018

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Fluist, Todd, Ruth Bradustein, and Rhys Williams 2017, Rligion and progressive activisim – introducing and mapping the field. In *Religion and progressive activism; New stories about faith and politics, edited by* R. Braunstein, T. Fluist, and R. Williams, pp. 1-26. New York University Press

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Henry, D James. “The Freedom of God: A Study in Pneumatology of Robert Jenson” [http://hdl.handle.net/2345/bc-ir:107101](http://hdl.handle.net/2345/bc-ir%3A107101)

James SL, Abate D. Abate KH, Abay SM, Abbafati C, Abbasi N, et.al. Global regional, and national incidence, prevalence, and years lived with disability for 354 disease and injuries for 195 countries and territories, 1990-2017; a systematic analysis for the Global Burden of Disease Study 2017. Lancet. 2018;392(10159): 1789-858.

Jamie et al., Arkansas Department of Health, Prescription Drug Monitoring Program Committee, 2020.

Joanne M. Moyer & Claire Brandenbarg (2021) “The landscape of faith-based environmental engagement in Canada, Local Environment”, 26:10, 1267-1283, DOI: 10.1080/13549839.2021.1973395

Offutt, Stephen, LiErin Probasco, and Brandon Valdyanathan, 2016. Religion, poverty, and development, journal for the Scientific Study of Religion 55(2): 2-7-215.

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Ramirez, A. S.; Houston, Kiely; Clancey Bateman; Clancy, Campos-Melendez; Zabrina, Estrada, Erendira; Kathleen Grassi; Eliana Greenberg,; Katie Johnson; Stephanie Nathan & Raquel Perez-Zuniga (2023) Communicating about the social determinants of health: development of a local brand, *Journal of Communication in Healthcare*, 16:3, 231-238, DOI: 10.108/17538068.2023.2192579;https://doi.org/10.1080/17538068.2023.2192579

Turpin Jamie, PharmD, DeShawn Bryant, Priya Kakkar, Dip, Pharm, MA, *Arkansas Department of Health*, Annual Report, Prescription Drug Monitoring Program, 2020

Venet, A.S. (2023). Equity-Centered Trauma-Informed Education (1st ed.). Routledge. <https://doi.org/10.4324/9781032677989>

White, Ellen G. *Spiritual Gifts, Volume 4,* Steam Press, Battle Creek, Mich., Page 137.

 Wuthnow, Robert. 1991. *Acts of compassion: Caring for others and helping ourselves.*

Princeton: Princeton University Press.

Tiffanie, I am impressed with your Assignment #4 for SR 953-12! You went above and beyond with an outline way beyond the requirements of a 5-page essay and so much work on the essay before the focus of the assignment which was the evaluation of your sources. You wrote a good summary of each of your resources. For the books you provided a succinct biography of the author and his or her credentials. I enjoyed your assessment of each book’s (a) readability, (b) presentation of the subject, and (c) relevance to your chosen topic. For the articles, you fulfilled the assignment requirements of providing the title, year, and author(s) of the article and what keywords relate to a literature review supporting your research interests, and for the social research articles, a brief description of the research methods, the population being studied, and the findings/conclusions. Keep up the great work! -- Prof. David Ward

**Tiffanie, I am recopying the feedback from Assignment #3 for your Reference List as a reminder since you turned this in before I got the previous feedback to you to correct.**

WORKCITED

Adhikari, P., Gollub, R. O21 Initial Evaluation of Louisiana’s “Small Changes/Healthy Habits” Pilot Program, *Journal of Nutrition Education and Behavior 52 (7), S10, 2020.*

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