THE "BELOVED COMMUNITY" PROJECT

WHAT WOULD BE THE SOCIAL CONSEQUENCES IF HARLEM'S RESIDENTS WERE GIVEN ACCESS TO CULTURALLY AFFIRMING AND QUALITY HEALTH CARE?

WHO ARE WE?

- Terri N. Watson – School of Education
- Billy Council – School of Education
- Edwin M. Lamboy – School of Education
- Susan Perkins - Division on Science
- Noel Manyindo – Community Health and Social Medicine

WHAT IS A "BELOVED COMMUNITY"?

- Theologian Josiah characterized a "Beloved Community" as "a spiritual or divine community capable of achieving the highest good as well as the common good" (Strong, 2007). Initiatives such as this are not popular in universities where individual pursuits too often outweigh the public good.

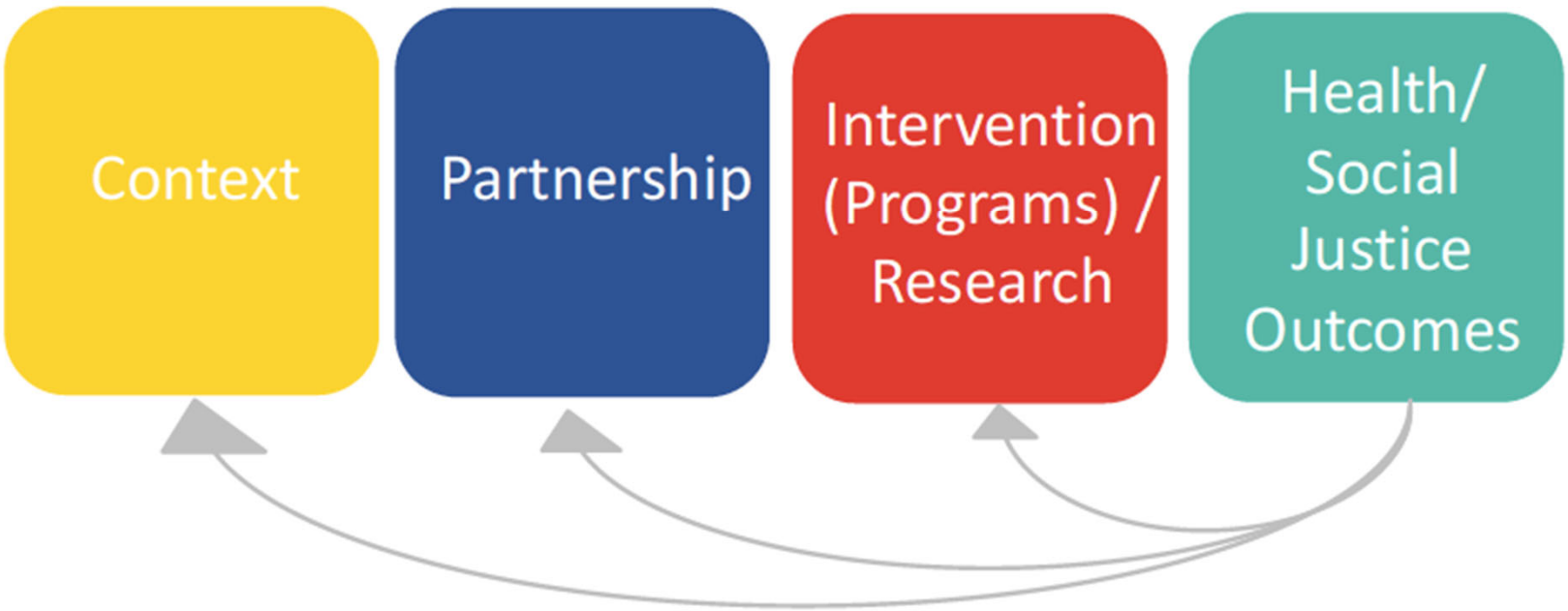
WHY US?
WHY CCNY?
WHY HARLEM?

- Historically, Harlem's Black and Hispanic residents have experienced race-based discrimination and systemic inequities.
- These inequities were exacerbated during the global COVID-19 pandemic.

COMMUNITY-BASED PARTICIPATORY RESEARCH

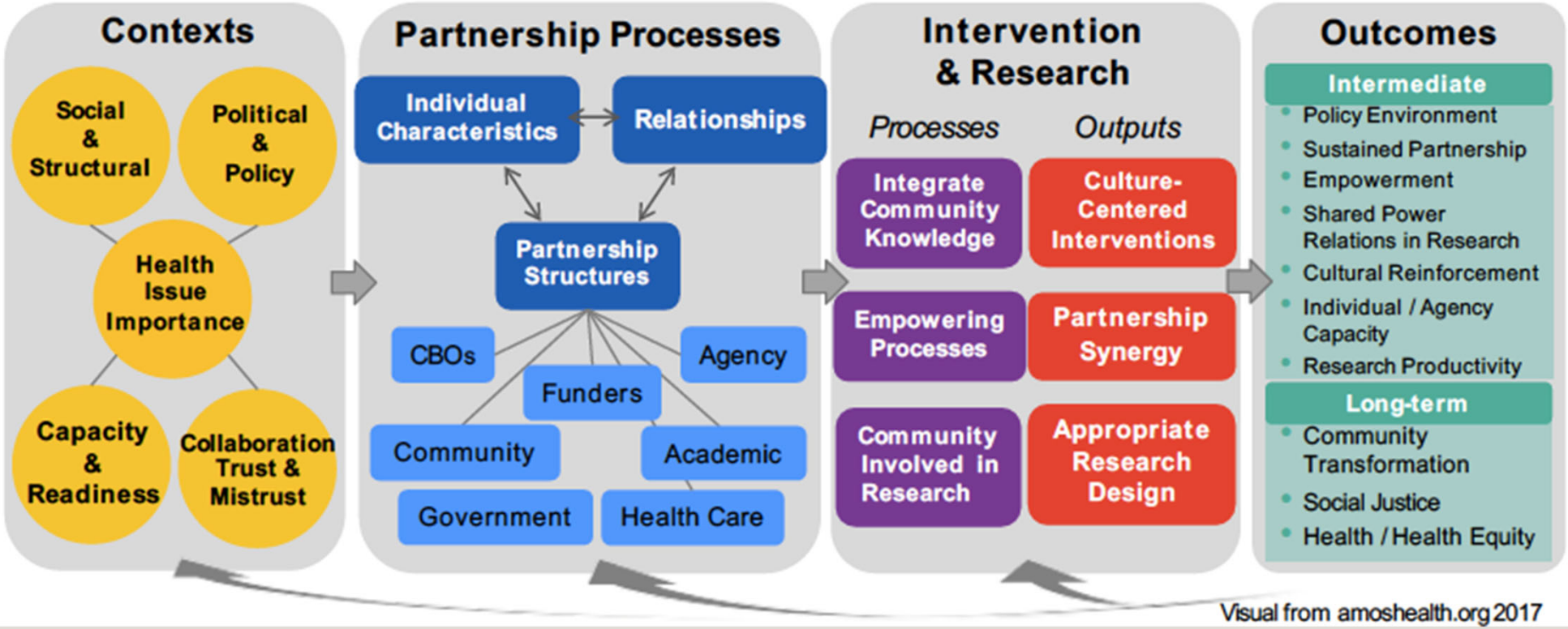
We propose an inter-disciplinary research project that will combine faculty from the School of Education, the Division of Science, CUNY's School of Medicine, along with several of Harlem's residents to improve the overall health of Harlem.

CBPR Conceptual Model



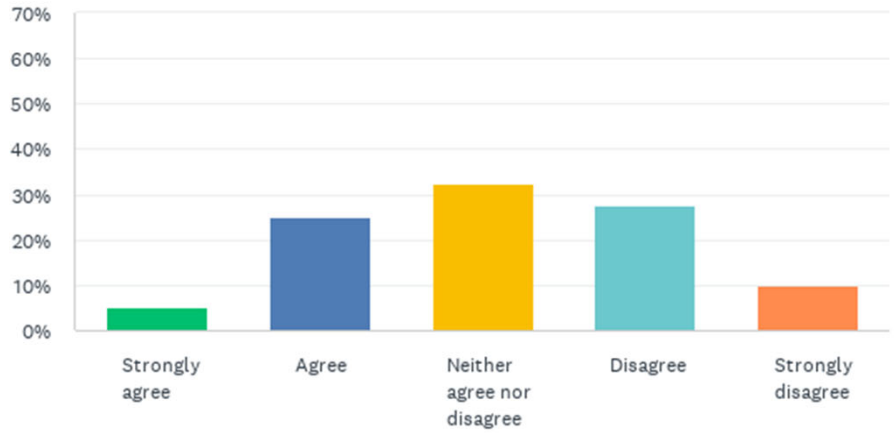
CBPR Conceptual Model

Adapted from Wallerstein et al, 2008 & Wallerstein and Duran, 2018, https://cpr.unm.edu/research-projects/cbpr-project/cbpr-model.html

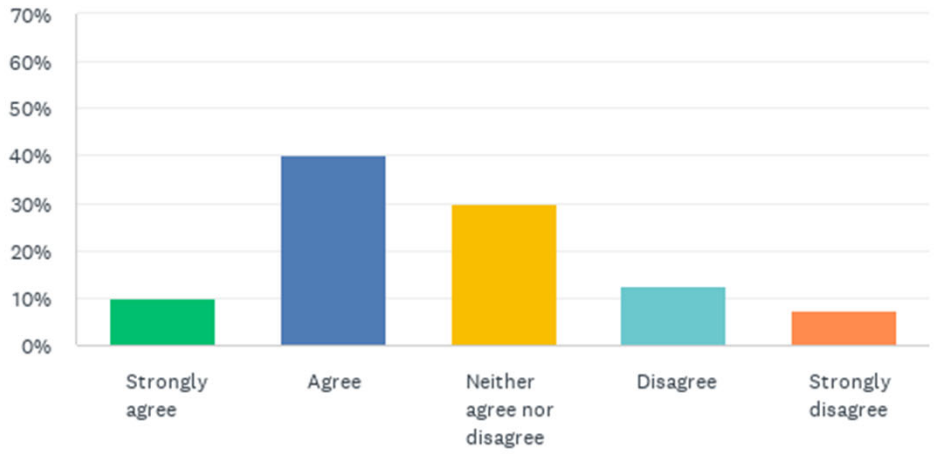


Visual from amoshealth.org 2017

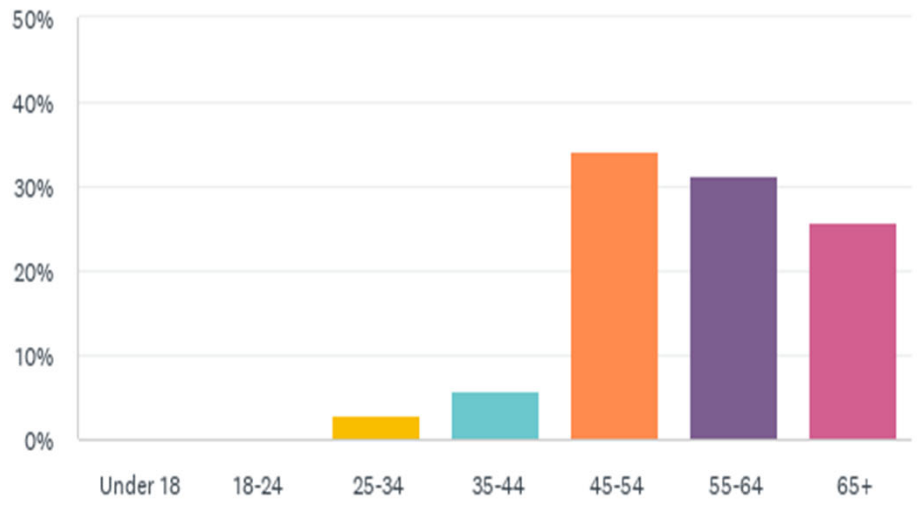
Q1 “There is good healthcare in Harlem.”Consider the cost and quality, number of options, and availability of healthcare in the Harlem community.



Q6 “There is help for people during times of need in Harlem.”Consider social support in this community: neighbors, support groups, faith community outreach, community organizations, and emergency monetary assistance.



Q10 What is your age range?



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Our aim is to create a better and healthier Harlem for the sake of all who live and work in this "Beloved Community."