Healthy Here

Communities Leading
Healthy Change

Baseline Walkability Evaluation Report

UNM SCHOOL of MEDICINE
PREVENTION RESEARCH CENTER
Prevention & Population Sciences

Acknowledgments

Report prepared by:
Theresa H. Cruz, PhD
Reese Cuddy, MPH
Courtney FitzGerald, MSSW

May 2016

Preparation of this report was supported by Presbyterian Healthcare Services through Cooperative Agreement Number U58 DP005868 from the Centers for Disease Control and Prevention (CDC). This is a Racial and Ethnic Approaches to Community Health (REACH) award. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the CDC or the US Department of Health and Human Services.

Leigh Caswell, MPH, Director of Presbyterian Healthcare Services Center for Community Health, is the Principal Investigator of this project.

Thank you to all of the *Healthy Here* initiative partners for their continued support and commitment to improving access to opportunities for physical activity.

Contents

Healthy Here
Communities Leading Healthy Change

Baseline Walkability Report Executive Summary

The purpose of the *Healthy Here* walkability assessment is to measure access to opportunities for physical activity in the South Valley and International District of Bernalillo County.

Healthy Here's Active Living Objectives:

1. To increase the number of neighborhoods with access to physical activity by implementing improvements in pedestrian safety infrastructure in the South Valley and the International District communities of Bernalillo County.

2. To increase the number of walking trails in the South Valley to support physical activity.

To assess current walkability in the two communities, the *Healthy Here* evaluation team conducted a walkability audit of roadway segments in three areas of the International District and two areas in the South Valley. Previous assessments conducted in the two communities were reviewed. Findings from those assessments, combined with recommendations from *Healthy Here* partners, informed the selection of locations and elements for the audit. This report provides information about baseline conditions, and its findings will be compared with follow-up data obtained in 2017 to determine whether walkability has improved.

Evaluation Question 1: *Do residents of the International District and South Valley communities have access to safe places to walk?*

We used the Healthy Workplace Initiative's Workplace Walkability Audit Tool of the Centers for Disease Control and Prevention (CDC) (2010) to measure features of the built environment that influence a neighborhood's walkability. The tool ranks features according to low, medium, and high levels of importance and establishes a walkability score for each road segment audited. Baseline measurement of the International District was conducted in September 2015; that of the South Valley was done in February 2016.

Walkability scores are derived from ranking features, such as pedestrian conflict potential and transit availability, by level of importance. Features considered to have "high" importance are weighted more heavily than those with "medium" or "low" importance. Each feature was assigned a value from 1 to 5, with higher values indicating the presence of more complete features. A road segment could earn a maximum of 115 points. Table 1 shows the system used.

Table 1. Walkability Scoring System

	Importance	Value 1 2 3 4 5	Weighting
Existence of sidewalks/sidewalk continuity	High	LOWEST POSSIBLE SCORE ⟷ HIGHEST POSSIBLE SCORE	SUM x 3 (max of 60)
Potential for pedestrian/vehicle conflicts			
Crosswalks			
Availability and features of public transit			
Maintenance of walking path/sidewalk	Medium		SUM x 2 (max of 50)
Path size			
Buffer			
Mobility access			
Aesthetics			
Shade	Low		SUM x 1 (max of 5)

Segments of road were assessed separately, and we calculated an average score for each area (Table 2). Percentages ranged from a low of 25.2% (a segment of road leading into the South Valley Health Commons) to a high of 72.2% (a section of Bridge Boulevard). Overall, scores in the International District were higher than those in the South Valley. This was because many streets in the South Valley have no sidewalks on one or both sides of the road. Bridge Boulevard's overall score was low primarily because of pedestrian conflict potential and crosswalk scores.

Table 2. Average walkability audit scores (%) for the assessed areas

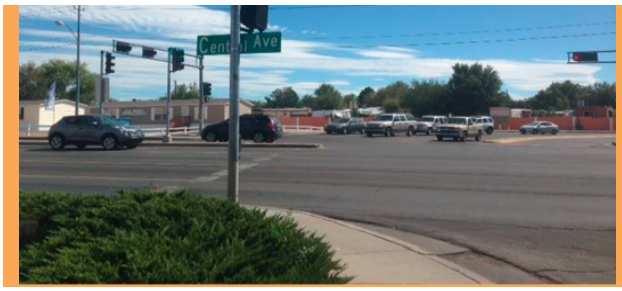
International District			South Valley	
Central Ave & San Mateo Blvd Intersection	**Central Ave & Zuni Rd Intersection**	**Zuni Rd**	**Bridge Boulevard**	**South Valley Health Commons**
60.8	**57.7**	**60.8**	**46.6**	**45.8**

Evaluation Question 2: *To what extent do access to and enhancement of safe places to walk increase over the duration of the* REACH *Healthy Here grant?*

Follow-up data collected in summer 2017 will be compared with the 2015-2016 data to determine whether walkability audit scores have improved.

Summary of Preliminary Results

Barriers to walkability documented in both the South Valley and International District included poorly maintained sidewalks, high-speed traffic, a lack of a buffer between pedestrians and traffic, high-volume driveways, and improper curb cuts (e.g., cuts in a sidewalk to allow for vehicle access that occur too frequently, are too steep, and/or are placed in locations without a driveway). In addition, barriers in the South Valley included the lack of a sidewalk on one or both sides of the road, increasing the risk of pedestrian conflicts. These barriers closely reflect those identified by the communities in previous planning processes. *Healthy Here* will work to improve safety-related infrastructure in both areas, through both short-term physical improvements (installing lighting) and advocacy regarding regional government planning efforts.



Background

The International District and South Valley are vibrant communities in Bernalillo County with racially and ethnically diverse populations. Both areas, however, are under-resourced and have disproportionately high rates of obesity and chronic disease, as well as high rates of conflicts between motor vehicles and pedestrians or bicycle conflicts.

Environmental factors in these areas have resulted in limited access to safe opportunities for being physically active. Physical activity is known to be a protective factor against many chronic diseases, including diabetes, obesity, and hypertension (CDC, 2016).

Residents of the International District and South Valley communities, along with public and private community planning agencies, have engaged in planning processes (including development of the International District Sector Plan) to voice their concerns and propose solutions that would encourage community members to engage in physical activity in an attractive and safe environment. These processes identified the following conditions as barriers to engaging in physical activity, including active transportation:

- Long distances between road crossings and inconsistent size of city blocks
- High volume traffic with wide lanes that encourage high speeds
- Steep, frequent curb cuts (i.e., cuts into curbs to allow vehicle access or pedestrian crossing; see photo)
- Uneven surfaces on walking paths and sidewalks
- Commercial spaces that are car focused rather than oriented for pedestrian and bicycle access
- Poor lighting, landscaping, and shade
- Actual and perceived crime, which discourages active transportation and physical activity in the area because of fear for one's safety

Source: (www.encorekalamazoo.com)

Given the concerns expressed by the residents of the International District and South Valley, the *Healthy Here* evaluation team posed the following evaluation questions regarding walkability and active transportation in these communities:

1. **Do residents of the International District and South Valley communities have access to safe places to walk?**
2. **To what extent do access to and enhancement of safe places to walk increase over the duration of the *Healthy Here* grant?**

Methods

Drawing from the evidence that factors within the built environment influence one's desire to walk for recreation or transportation, the *Healthy Here* evaluation team conducted a walkability audit of roadway segments in the International District and South Valley.

Measures

The evaluation team reviewed several instruments to assess their applicability to urban communities with a high proportion of low-income communities of color. Factors such as reliability, validity, inclusion of factors of interest to the *Healthy Here* initiative, and the ability to measure changes of interest in the built environment over time were also considered. The review identified six potential instruments that ranged from short checklists to complex environmental scans.

The CDC's Walkability Audit Tool (2010) (Appendix A) was selected. The audit measures those features of the built environment that influence the walkability of a neighborhood. Features are ranked as either low, medium, or high for the level of importance. An average walkability score is then assigned (out of 100 points) for each segment audited. The score can be used to compare the same segment at different points in time. The instrument's development and corresponding reliability assessment are described by Dannenburg et al. (2005).

To address concerns raised in the International District Sector Plan about safe and convenient access to public transportation, an additional question about transit features (adapted from the Robert Wood Johnson Foundation's Pedestrian Environmental Data Scan [PEDS]) (Clifton, Livi Smith, and Rodriguez, 2007) was added to the walkability audit. In accordance with the original instrument's logic that all questions concerning safety be given a high level of importance, the supplemental transit question was ranked similarly. The addition of this question added 15 possible points to the scale, making the highest possible walkability score for any segment 115 points (Table 1). Overall average scores are reported as percentages.

Table 1. Walkability Scoring System

	Importance	Value 1 2 3 4 5	Weighting
Existence of sidewalks/sidewalk continuity	High	LOWEST POSSIBLE SCORE ⟷ HIGHEST POSSIBLE SCORE	SUM x 3 (max of 60)
Potential for pedestrian/vehicle conflicts			
Crosswalks			
Availability and features of public transit			
Maintenance of walking path/sidewalk	Medium		SUM x 2 (max of 50)
Path size			
Buffer			
Mobility access			
Aesthetics			
Shade	Low		SUM x 1 (max of 5)

Two evaluators conducted a pilot test of the Walkability Audit Tool on August 4, 2015, along Zuni Road SE, between San Pedro Drive and Wyoming Boulevard SE. Twelve segments were audited with the original tool, and it became apparent that the definitions for scoring were not specific enough. The *Healthy Here* evaluation team reviewed the protocols from several validated tools including PEDS (Clifton et al., 2007) and MAPS (Cain et al., 2012) and contacted the author of the Walkability Audit Tool to discuss definitions and score assignment. A new instrument protocol was developed to clarify scoring definitions and improve inter-rater reliability (Appendix B). The revised protocol was used to assess three areas in the International District.

International District

On September 18, 2015, and September 21, 2015, using the newly developed protocol, two members of the *Healthy Here* evaluation team independently conducted audits of 1) the intersection of Central Avenue and San Mateo Boulevard (SM) 2) the intersection of Central Avenue and Zuni Road (CZ), and 3) Zuni Road between San Pedro Drive and Wyoming Boulevard (Zu). Each side of the street was assessed separately. Ten audits were conducted of the SM intersection and related segments, and an additional eight were conducted of the CZ intersection. The Zu audit included 8 additional segments. In addition to scoring each segment, evaluators made qualitative comments on the ranking. At the end of each audit of a section, evaluators shared their results and comments regarding the sections and reached a consensus on a score (1 to 5) for each factor addressed. In 27 instances (10.4%), the initial scores differed. The two most common areas of discrepancy were crosswalks and aesthetics. All disagreements were resolved after discussion and review of the protocols and definitions by the evaluation team. The results were entered into a spreadsheet for analysis.

Overall Results in the International District

Table 2 shows the walkability audit scores (percentages) for each of the 26 audited segments in the International District, as well as the overall average for the three locations assessed.

Table 2. Walkability Audit Scores (%) for the Segments in the International District, 2015

Segment Number	Central Ave & San Mateo Blvd Intersection (SM)	Central Ave & Zuni Rd Intersection (CZ)	Zuni Rd (Zu)
1	59.1	52.2	59.1
2	58.3	44.4	68.7
3	41.7	58.3	48.7
4	68.7	56.5	68.7
5	61.7	65.2	60.9
6	69.6	60.9	51.3
7	58.3	58.3	66.1
8	67.8	66.1	62.6
9	65.2	-	-
10	55.7	-	-
Overall Average	**60.6**	**57.7**	**60.8**

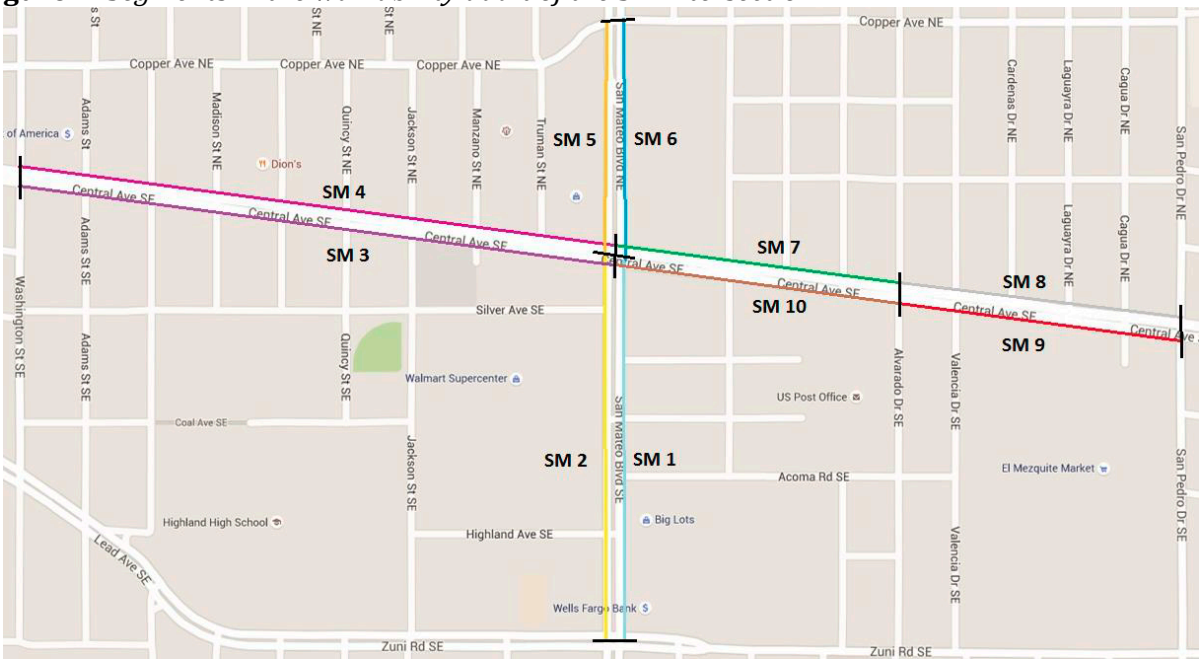
The CZ intersection had the lowest average score (57.7%). None of the individual segments received a score of 70% or higher. The lowest scores were given to segments SM 3, CZ 2, and Zu 3.

All the audited segments have continuous sidewalks on both sides of the street, except for CZ 2. Lack of a continuous sidewalk lowered the CZ 2 segment score substantially in the *Pedestrian Facilities*, *Path Size*, and *Wheelchair Access* categories. None of the sections audited have buffers separating the sidewalk from the road. This creates a potential for motor vehicle and pedestrian conflicts and resulted in assignment of a value of 1 (out of 5) for that category. Other notable concerns were faded crosswalks, long distances between crossings, high traffic volume, potential for high speed traffic, and debris on the sidewalks that might constitute a tripping hazard. These concerns are consistent with those previously identified by community members, and addressing them would improve the overall walkability of segments SM 3, CZ 2, and Zu 3 in particular.

Intersection at Central Avenue and San Mateo Boulevard

The SM intersection audit included segments of San Mateo Boulevard from Zuni Road to Central Avenue (SM 1 and 2) and Central Avenue to Copper Avenue (SM 5 and 6).The Central Avenue segments were from Washington Street to San Mateo Boulevard (SM 3 and 4), San Mateo Boulevard to Alvarado Drive (SM 7 and 10), and Alvarado Drive to San Pedro Drive (SM 8 and 9) (Figure 1).

Figure 1. *Segments in the walkability audit of the SM intersection.*



The SM intersection has been under review by local, state, and federal agencies because of the high number of pedestrian fatalities that have occurred there. The review has determined that traffic speeds, coupled with the high volume of vehicle and pedestrian traffic, make this intersection particularly dangerous for pedestrians.

The SM intersection received an overall rating of 60.6%, with the lowest value (1) assigned to SM 3 because the path decreases to less than 2 feet wide between Madison Street and Monroe Street (minor arterials) (Figure 2). The path is too narrow and nearly impassable for wheelchairs because of a lack of curb cuts (Figure 3).

Figure 2. *Narrow sidewalk in SM 3.*

SM 4 and SM 6 received the highest scores in this section. SM 4 received the top scores for Crosswalks, Path Size, and Transit, whereas SM 6 received high scores for Path Size, Transit, and Maintenance. The two categories in which the lowest values (1 or 2) were consistently assigned were Pedestrian Conflicts and Buffer. High-volume driveways were observed throughout this area. Traffic noise and poor air quality lowered the Aesthetics scores. A low frequency of shaded areas and places for pedestrians to rest was noted.

Figure 3. *Lack of curb cuts and faded crosswalk in SM3.*

Intersection at Central Avenue and Zuni Road

The CZ intersection audit included eight segments (Figure 4). The Zuni Road segments were from

Figure 4. *Segments in the walkability audit of the CZ intersection.*

Wyoming Boulevard to Central Avenue (CZ 1 and 2). The segments along Central Avenue were from Wyoming Boulevard to Zuni Road (CZ 3 and 4) and from Zuni Road to Moon Street (CZ 7 and 8). CZ 5 and 6 were between Central Avenue and Chico Road. This section received an overall rating of 57.7%.

Segments CZ 5 and CZ 8 received the highest scores. CZ 5 is in a residential neighborhood, which has lower speed limits and more shade, and has undergone efforts toward beautification, such as landscaping. CZ 5 and CZ 6 were the most pleasant segments in which to walk. CZ 8 received the highest scores (4 of 5) for Pedestrian Facilities, Maintenance, Path Size, and Transit. The lowest percentage score (44.3%) was given to CZ 2 because of excessive amounts of litter and a discontinuity in the sidewalk, which becomes a 200-foot dirt path with permanent barriers to passage at the sharp curve near the intersection, forcing pedestrians into traffic. The east side of the CZ intersection has no crosswalk (Figure 5). It also has poor wheelchair access, maintenance issues, poor aesthetics, and very little shade.

Figure 5. *Lack of a marked sidewalk at CZ intersection.*

Zuni Road

The Zu walkability audit included eight segments: from San Mateo Boulevard to San Pedro Drive (Z 4 and 5), San Pedro Drive to Louisiana Boulevard (Z 3 and 6), Louisiana Boulevard to Pennsylvania Boulevard (Z 2 and 7), and Pennsylvania Boulevard to Wyoming Boulevard (Z 1 and 8) (Figure 6).

Figure 6. *Segments in the Zu walkability audit.*

This section received an overall percentage score of 60.8%. Higher values were associated with segments that included many bus stops with shelters and public art in Z 7 (Figure 7). Z 2 received a score of 5 for crosswalks because there are four traffic-calming devices at the minor arterial roads.

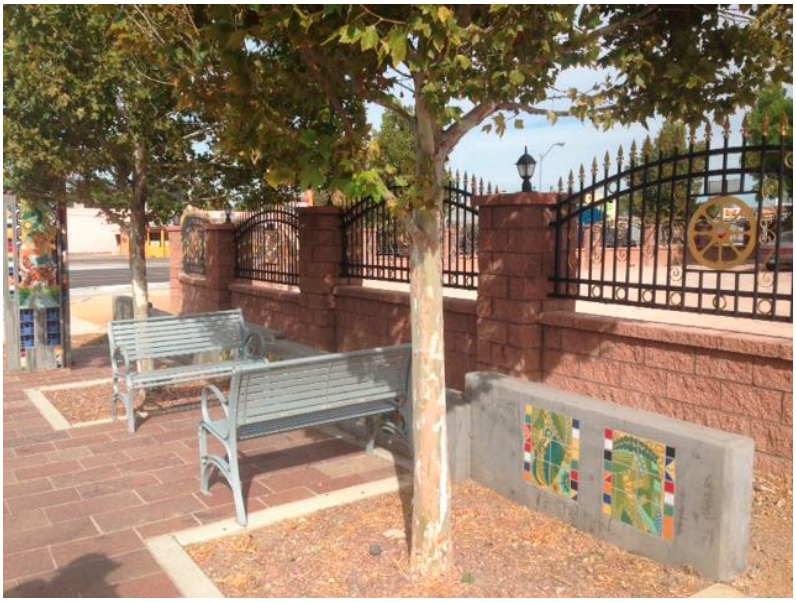


Figure 7. *Shaded area with benches, public art, and landscaping in Z 7.*

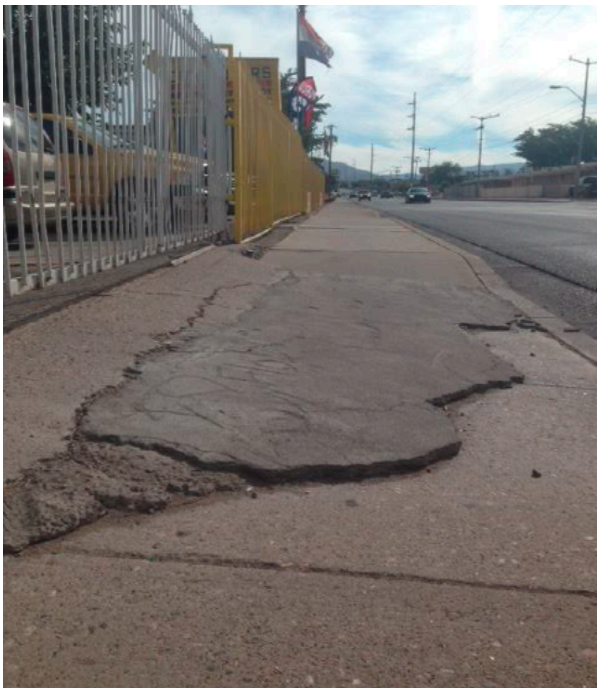


Figure 8. *Poorly maintained sidewalk in Z 8.*

In Z 8, the University of New Mexico's Southeast Heights Clinic has a notable buffer and pleasant landscaping. Lower segment scores were associated with high-volume driveways and poorly maintained sidewalks (Figure 8) that present tripping hazards for pedestrians and make it difficult for wheelchairs to pass.

South Valley

Bernalillo County's South Valley is a very large, predominantly rural area. On February 9 and 10, 2016, two members of the *Healthy Here* evaluation team independently conducted audits of 1) the area around the South Valley Health Commons (SVHC), and 2) a section of Bridge Boulevard (BB) from its intersection with Isleta Boulevard to its intersection with Five Points Road. Each side of the street was assessed separately. Ten segment audits were conducted in the BB assessment and eight in the SVHC area. As with the International District assessment, evaluators made qualitative comments on each ranking. At the end of each audit of a section, evaluators shared their results and comments regarding the sections and reached a consensus on a score (1 to 5) for each factor addressed. In 16 instances (22.9%) for the SVHC area, the initial scores differed. The BB assessment had 20 (20.0%) score discrepancies, typically pertaining to crosswalks and sidewalks. All scoring disagreements were resolved after discussion and review of the protocols and definitions by the evaluation team.

Overall Results in the South Valley

Table 3 shows the walkability audit scores for the 18 segments in the South Valley.

Table 3. Walkability Audit Scores (%) for the Segments in the South Valley, 2016

Segment Number	South Valley Health Commons (SVHC)	Bridge Boulevard (BB)
1	53.0	72.2
2	62.6	52.2
3	44.3	47.8
4	35.7	43.5
5	40.9	34.8
6	68.7	33.0
7	35.7	63.5
8	25.2	56.5
9	-	35.7
10	-	27.0
Overall Average	**45.8**	**46.6**

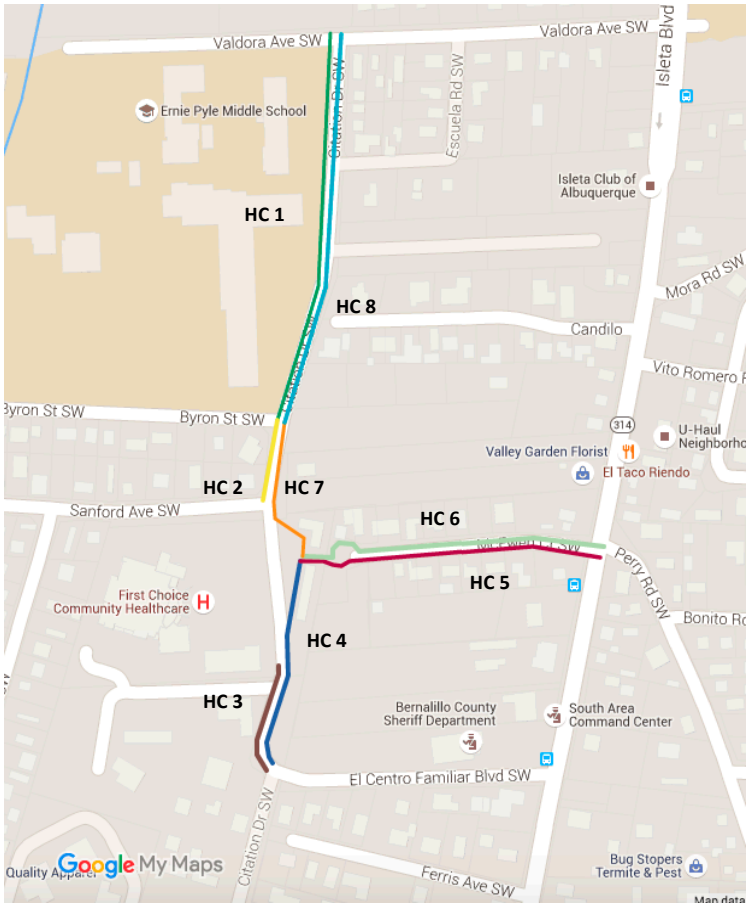
Overall, the South Valley areas scored lower than the International District areas. Assessed areas in the South Valley were very inconsistent with respect to walkability factors, and scoring varied widely, even within a given area. The community's history as a rural, agricultural region

likely contributed to the inconsistencies. The lowest-scoring segments, HC 8 and B 10, do not have continuous sidewalks on either side of the road, forcing pedestrians to walk in the street. The highest-scoring segment was a section of Bridge Boulevard, B 1, near its intersection with Isleta Boulevard. The overall score for Bridge Boulevard was quite low, however, because of traffic, noise, and frequent, unused curb cuts (i.e., curb cuts for vehicles that were not connected to driveways), unmarked crossings at the intersection with Five Points Road, and short crossing times at the traffic lights.

Area Surrounding the South Valley Health Commons

The SVHC area included eight segments (Figure 9). Segments HC 1 and HC 8 were along Citation Drive in front of Ernie Pyle Middle School, from Valdora Avenue to Byron Street. Section HC 2 covered the west side of Citation Drive from Byron Street to Sanford Avenue and the northern edge of the parking lot for the SVHC. Section HC 3 began at the south end of that parking lot and extended along the west side of the road to the intersection of Citation Drive and El Centro Familiar Boulevard. HC 4 was the east side of the road, parallel to HC 3, and continued at the east edge of the SVHC parking lot to a pedestrian gate leading to McEwen Court. HC 5 and HC 6 covered the section from this gate along McEwen Court to Isleta Boulevard. HC 7 included a sidewalk from the pedestrian gate north through the SVHC parking lot to Byron Street.

Figure 9. *Segments in the SVHC walkability audit.*



The SVHC section received an overall score of 45.8%. Scores were low because nearly every segment has sidewalks on only one side of the road. In addition, marked crosswalks are inconsistently present. Some intersections (particularly at the entrances to the SVHC parking lot) have new, well-marked crosswalks, whereas others have no crosswalks at all. The high-intensity activated crosswalk light at the end of McEwen Court at Isleta Blvd raised the score of HC 6. However, the evaluators observed that students walking home from Ernie Pyle Middle School walked in the middle of the street or on its south side, which does not have a sidewalk. When asked why they chose that side, one group of students indicated that they preferred to cross Isleta Boulevard on the south side because "most of us live over there." HC 8 received the lowest scores because it has no sidewalk and smaller roads that connect to the main road (arterial roads) provide limited visibility for pedestrians to see approaching cars. Moreover, several dogs were loose in this area during the assessment.

The south entrance to the SVHC parking lot also presents difficulties for pedestrians. There are no sidewalks on either side of the road, forcing pedestrians to walk in the street. A parking area on the east side empties directly into the road (without crossing a sidewalk), increasing the possibility for pedestrian conflicts (Figure 10). Walking on the west side of the street is also unsafe. The intersection at El Centro Familiar Boulevard and Citation Drive is unmarked, and there is no stop sign for vehicles traveling from El Centro Familiar Boulevard to Citation Drive. Visibility is limited by the building on the southwest corner of the intersection (Figure 10). The sidewalk leading out of the SVHC parking lot places pedestrians on the west side of the road, into the intersection of El Centro Familiar Boulevard and Citation Drive (Figure 11).

Figure 10. *El Centro Familiar Blvd at Citation Dr. Walking on either side of the road (HC 3 & HC 4) places pedestrians at risk for conflict.*

Figure 11. *Citation Dr at the entrance to the SVHC. The sidewalk on the west side of the street directs pedestrians into the path of traffic coming from El Centro Familiar. The east side of the road has no sidewalk (HC 3 & HC 4).*

Bridge Boulevard to Five Points Road

Bridge Boulevard is a major thoroughfare at the northern end of the South Valley community. Segments B 7 and B 8 extended from the intersection at Bridge Boulevard and Isleta Boulevard to the intersection with Five Points Road. We audited short segments (approximately 1,000 feet) extending from the Five Points Road intersection down each connecting road (Figure 12). The overall score for this area was 46.6%, slightly higher than the score for the SVHC area.

Figure 12. *Segments in the walkability audit along Bridge Boulevard and the Five Points intersection.*

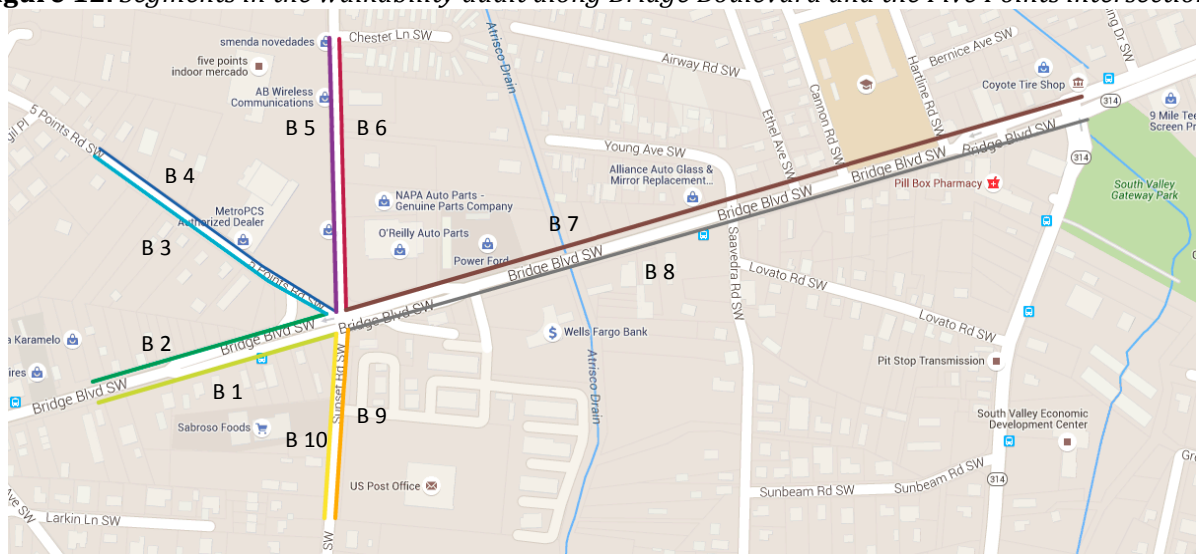


Figure 13. *Bridge Boulevard's unused curb cuts and deteriorating infrastructure lowered its scores (B 8).*

Bridge Boulevard

Unlike many other roads in the South Valley, Bridge Boulevard has continuous sidewalks on both sides of the street. There are no buffers between the road and sidewalk, but the street does have a wide, well-marked bicycle lane (though there is no buffer between the car lanes and the bicycle lane). Bus stops, many of which were covered and all of which had benches, raised some BB scores. Lower scores were due to a high number of unused curb cuts (Figure 13), many business driveways that put pedestrians at risk of conflict, and a lack of landscaping and beautification. The posted speed limit was 35 miles per hour, however the perception of auditors was that traffic was moving much faster. We also observed a motor vehicle accident being cleared on Bridge Boulevard at the southwest corner of Bridge Boulevard and Sunset Road, at the intersection with Five Points Road.

Bridge Boulevard also has a large number of abandoned buildings, vacant lots, and deteriorating infrastructure features (Figure 14). The sidewalk is cracked and buckled in many places, which could restrict access for people using wheelchairs. Evaluators saw a person using a motorized wheelchair in the bicycle lane.

Finally, although the intersection of Bridge and Isleta Boulevards scored highly, the evaluators were nearly struck by a right-turning vehicle while crossing with the light from the north side of Bridge Boulevard on the east side of Isleta Boulevard.

Figure 14. *The presence of abandoned buildings and empty lots decrease Bridge Boulevard's walkability (B 8).*

Five Points Intersection

At the time of the assessment, the crossing lights at the Five Points Road intersection were not functioning. The buttons for those lights are placed far from curb cuts (where curb cuts existed) and positioned so that users are forced into a very small area of sidewalk between the post and the road. Accessing the buttons would be difficult for a person using a wheelchair (Figure 15). Crosswalks are very faded and curb cuts into crosswalks are inconsistently placed (i.e., not aligned with crosswalks). As a result, all sections of road at this intersection received low scores. Streets connected at the Bridge Boulevard/Five Points Road intersection (Sunset Road and Five Points Road) had low scores because of a lack of shade, buckled sidewalks or a sidewalk on only one side of the street, and business entrances that increased the risk of pedestrian conflicts.

Figure 15. *Difficult-to-reach buttons, faded crosswalks, and a non-working signal lowered scores for all segments connected to the Five Points Road intersection (B1–B6 and B9 & 10).*

Figure 16. *Area in front of the Sunset Road post office.*

Sections B 5 and B 6, on Sunset Road north of Bridge Boulevard, received low scores because of the potential for pedestrian conflicts at the Five Points Road intersection, the lack of a sidewalk on one side of the road, and a large number of business driveways. Segments B 9 and B 10 along Sunset Road south of Bridge Boulevard have no sidewalks on either side of the street. On the east side, a busy post office has driveways without stop signs for exiting traffic. There is a large dirt area between the post office grounds and the street that could be developed into a pedestrian-friendly walking space that is buffered from the road (Figure 16).

Discussion

We collected baseline data on the walkability in specific areas of the South Valley and International District communities of Bernalillo County by using the CDC's Walkability Audit Tool. Only one of the segments audited scored above 70%: segment B 1 (Bridge Boulevard).

Problems observed in both communities included poorly maintained sidewalks, potential for high-speed traffic, a lack of a buffer between pedestrians and traffic, high-volume driveways, and a large number of improperly placed and/or unused curb cuts. In the South Valley, the lowest scores were assessed in segments that did not have a sidewalk on one or both sides of the road. The area surrounding the SVHC had very inconsistent walkability, mostly as a result of a lack of sidewalks. Our findings are consistent with the concerns expressed by community members in previous planning processes and during sector plan development.

Positive findings from the assessments in the International District included the existence of pedestrian signals with sufficient crossing time and segments with landscaping and public art. In the South Valley, positive findings included the good walkability at the intersection of Bridge Boulevard and Isleta Boulevard.

The *Healthy Here* initiative will promote community involvement in planning for and implementation of environmental changes that provide enhanced access to safe places to be physically active. Enhanced access to places for physical activity is a recommendation for increasing physical activity made in *The Guide to Community Preventive Services: What Works to Promote Health: Increasing Physical Activity* (Community Preventive Services Task Force). Although changes to the public right-of-way take considerable time, effort, and financing, some improvements could result from relatively modest investments (e.g., in lighting, signage, and litter control). Follow-up walkability audits will be conducted in summer 2017 to determine whether there have been any improvements in walkability.

References

Cain KL, Millstein RA, Geremia CM (2012). *Microscale Audit of Pedestrian Streetscapes (MAPS): Data Collection & Scoring Manual*. University California San Diego. Retrieved from: http://sallis.ucsd.edu/measures/maps.

Centers for Disease Control and Prevention. (2010). *Healthier worksite initiative: audit tool*. Retrieved from: http://www.cdc.gov/nccdphp/dnpao/hwi/toolkits/walkability/audit_tool.htm.

Centers for Disease Control and Prevention. (2016). *Healthy Places: Physical Activity*. Retrieved from: http://www.cdc.gov/healthyplaces/healthtopics/physactivity.htm.

Clifton, K. J., Livi Smith, A. D., & Rodriguez, D. (2007). The development and testing of an audit for the pedestrian environment. *Landscape and Urban Planning*, *80*, 95-110.

Community Preventive Services Task Force. (2001). *The Guide to Community Preventive Services: What Works to Promote Health: Increasing Physical Activity.* Retrieved from: http://www.thecommunityguide.org/pa/index.html.

Dannenberg, A. L., Cramer, T. W., & Gibson, C. J. (2005). Assessing the walkability of the workplace: a new audit tool. *American Journal of Health Promotion*, *20*, 39–44.