

Follow up Evaluation of Healthy Hubs Final Report

Prepared for the City of San Antonio Metropolitan Health
District

11/30/2013

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BACKGROUND

This report is submitted in fulfillment of the contract agreement between the City of San Antonio (COSA) and the University of Texas at San Antonio (UTSA). The evaluation services were conducted to provide valuable data on the effectiveness of Healthy Hubs to guide future implementation and improvements.

Healthy Hubs were implemented starting in fall 2012. Months following the original implementation in Collins Garden, data were collected to assess the effectiveness of the Hubs. Healthy Hubs are community areas where physical activity and healthy diet resources are concentrated in hopes of impacting community members' health behaviors and community cohesion. Healthy Hubs are intended to be owned and sustained by the community and have all resources within proximal distances that can be easily walked or biked by community members. This contract included the collection, analysis and dissemination of follow up data across six indicators. The data is most useful when used alongside the baseline data collected before Healthy Hubs implementation.

The contract included evaluation across six indicators. The report is presented, by indicator, in the order below:

1. Parks & Playspaces Direct Observation
2. Parks & Playspaces Environmental Audit
3. Corner Store Stakeholders Interviews
4. Restaurant Stakeholders Interviews
5. Community Engagement/Health Behavior Survey
6. Street Design Audit

This report includes descriptions of the methodology used; copies of key instruments (see appendices), a summary of preliminary findings, a brief comparison with baseline data from the previous COSA contract where relevant; and recommendations for future implementation. The evaluation was led by Dr. Erica T. Sosa, Assistant Professor in the Health & Kinesiology Department at UTSA. Any questions regarding this report should be sent to her at her contact information below.

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EXECUTIVE SUMMARY

This report includes the follow up data for the Healthy Kids, Healthy Communities San Antonio Healthy Hubs Initiative. Data were collected across six indicators – Parks & Playspaces Direct Observation, Parks & Playspaces Environmental Audits, Corner Store and Restaurant interviews, Community Engagement/Health Behavior Survey, and Street Design Audit. Taken collectively, these data provide a comprehensive cross-sectional assessment of the built and social environment in which community members live. Moreover, the data can be compared to baseline data to determine shifts in the community members' attitudes and behaviors; park use; and impacts of environmental and programmatic interventions.

Data collection took place at different locations in the Collins Garden area. All data collection was done between early June and November 2013. Preliminary findings suggest park use is still generally low. However, sometimes when data were collected the outdoor temperatures were high and this might have impacted park use. Basketball courts, walking paths and fields were used most frequently compared to other park spaces. The Collins Garden Park had several features available to promote physical activity, such as exercise equipment, walking trails, fields, courts and playgrounds.

Data from the corner stores and restaurant interviews provided several interesting themes. Por Vida initiatives seem to be feasible in both the corner stores and restaurants. However, the interest and feasibility depend largely on the owners' perceptions of the barriers and benefits of implementing the initiative. Some barriers to corner stores offering healthier items include space and shelf life of healthier foods. Barriers for restaurants included suppliers not having healthier items or not offering them at a reasonable cost to the restaurants. Some restaurant managers also believed their customers did not want healthier items and instead wanted traditional meals. The local health department can increase the chances of restaurants and corner stores implementing the Por Vida initiative by providing incentives, ongoing education and marketing initiatives.

The Community Engagement/Health Behavior survey collected data across 152 community residents in the Collins Garden area. Most community members report being physically active by walking. Although some community residents already use the streets, the primary street use was for driving to and from work. Several barriers were identified as preventing community members from using the streets more frequently including stray dogs and poorly lit streets. Community cohesion was relatively high with most community members saying that they socialized with their community members at least once a month.

The street design audit revealed clear bike lanes not previously observed in the baseline data collection. This report includes additional findings related to these six indicators. Although this report includes preliminary findings, the research team will work with the City to provide additional findings to answer their questions of interest.

1. PARKS & PLAYSPACES DIRECT OBSERVATION

The Parks & Playspaces Direct Observations were used to assess the amount of physical activity taking place in Collins Garden Park. Additionally, the type of physical activity park users engage in across various age groups were measured.

Methodology

Researchers conducted observational assessments in Collins Garden Park during the summer of 2013. Research team members visited the park in pairs on predetermined days and times. When arriving at Collins Garden, the data collectors and Dr. Sosa plotted out the different observation areas (ex: basketball court, playground). The plotted areas were done to be consistent with the designated play spaces used in the baseline data collection. Dr. Sosa trained data collectors on how to conduct the observations and one of the data collectors from the baseline data collection was present to answer questions and ensure consistency with the baseline data collection methodology. Quality assurance was done on the first three series of observations to ensure data collectors were following the appropriate protocol.

Once the data collection time began, one researcher kept track of the time while the other researcher used the Parks & Playspaces Direct Observation Tool (see Appendix A) to observe and count the number of park users in the designated area. Any park users in the designated observation area at the time of the data collection were observed for their physical activity level. Research team members observed park users in the designated area for 20 minutes and conducted observations every other minute for 30 second increments at each designated area. Anyone entering the designated park area during that time was included in the observations. Once a participant left the designated park area, he/she was no longer observed.

Researchers recorded the number of park users in the designated observation area; the activity park users engaged in (ex: basketball, skating, sitting) and park user's level of activity (sedentary, moderate, or very active). Approximate age (12 and under, 13-18, 19 and older) was the only demographic characteristic of participants that was estimated and collected by data collectors.

Park observations occurred twice each day across various times of the day – one evening and two day observations. Prior to data collection, researchers ensured that parks were not offering physical activity programming, such as sports leagues. Data collection times were scheduled around any potential programming that could impact physical activity levels or park use.

Findings

Collins Garden Park was observed across eight designated play spaces. Park use appears to be as low as it was during the baseline data collection; however, park use was the highest on the same three days as in baseline data collection. The most commonly used play spaces were fields #1 and 2 and the uncovered basketball court. Most of the activity on fields #1 and #2 seemed to be people walking between their exercises on the walking path. Walking paths were among the most used park spaces in Collins Garden by adults. Children were mostly observed on the playground. During the data collection times, one adolescent was observed using the fitness station during the week and 4 adolescents and 1 adult were observed using the fitness stations during the weekend. Many adults were observed running and walking.

Total Park Users in Designated Park Spaces (2013)														
	Basketball Court		Playground		Fitness Station		Fields 1-2 and walking path		Tennis Court		Basketball Court 2		Field 3	
	≤18	≥19	≤18	≥19	≤18	≥19	≤18	≥19	≤18	≥19	≤18	≥19	≤18	≥19
Weekday	3	1	1	0	1	0	2	9	3	0	11	0	0	8
Saturday	4	1	2	0	1	1	0	1	0	0	1	0	0	1
Sunday	1	4	2	0	3	0	3	12	0	0	0	0	0	0

Total Park Users in Designated Park Spaces (2012)													
	Basketball Court		Playground		Fields 1-2 and walking path		Tennis Court		Basketball Court 2		Field 3		
	≤18	≥19	≤18	≥19	≤18	≥19	≤18	≥19	≤18	≥19	≤18	≥19	
Weekday	0	1	6	4	0	7	0	0	0	0	0	0	3
Saturday	18	4	5	2	1	4	2	2	8	5	0	0	3
Sunday	10	4	30	6	4	7	0	0	3	0	3	0	5

The increased use of the walking paths and fields is promising. These park features were being used more frequently by adults at the post data collection, with 22 adults using them versus only 18 in the fall. We are unsure why the playground activity decreased so much but it is possible events such as birthday parties might have increased this number in the fall. Although there were few people using the exercise equipment, all were rated as being very physically active. The low use could be due to the lack of awareness of the equipment. Increased community awareness might lead to increases in fitness equipment use.

2. THE PARKS AND PLAY SPACES ENVIRONMENTAL AUDIT

The purpose of the Parks and Playspaces Environmental audit was to collect data on characteristics of the Collins Garden park environment that may influence community members' park use and physical activity while in the parks.

Methodology

A park audit was conducted in Collins Garden on June 10, 2013. The research team selected times to visit the parks in the late afternoons. Late afternoons were chosen to increase visibility of park features during the day but also to allow for assessment of the lighting once it was nighttime. One research team member visited Collins Garden to conduct the audits at a time. The research team member assessed the park environment and recorded the presence of park features and assessed the quality of each park feature as poor or average/good. The Parks and Play Spaces Environmental Audit Tool (see Appendix B) was used to collect data on the number, location & quality of built environment features, such as jogging trails, lighting, and tennis courts. Data collectors' assessments were compared to ensure inter-rater reliability.

Findings

Overall, the lighting was rated as good throughout the park. All features of the park were rated as average/good. There was a variety of playground equipment available and courts that were in good condition. The hours and name of the park were clearly posted. Differences from baseline in the environmental audit were few. The fitness stations are noted as part of the outdoor equipment available post Healthy Hub implementation.

	Poor	Average/Good	Number of features with lighting
	Outdoor	Outdoor	
Swings, toddler		2	2
Swings, youth		2	2
Slides		2	2
Monkey bars/climbing bar		2	2
Surface of the playground	Foam		
Field, multi-use		2	2
Courts, basketball only		2	2
Surface of basketball courts	Concrete/pavement		
Courts, tennis only		2	2
Surface of tennis court	Concrete/pavement		
Trails		2	2
Surface of trails	Gravel		
Fitness Station		Present	
Surface of fitness station	Concrete/pavement		

3. CORNER STORE STAKEHOLDERS INTERVIEWS

The purpose of the corner store stakeholders' interviews was to assess corner store owners and managers' perceptions regarding health promotion and their ideas for implementing ¡Por Vida! and similar healthy eating interventions.

Methodology

Individual interviews were conducted during October 28, 2013 thru November 6, 2013. A trained qualitative researcher conducted all interviews. Interviews lasted approximately 20 minutes. A semi-structured interview guide was used to guide the interviews. Each interview was audio recorded, transcribed and analyzed using NVIVO. (Appendix C)

Findings

A total of five corner store interviews were conducted. Corner store managers and owners expressed their ideas regarding healthy eating in their local communities. Corner store managers believed that community members more recently were looking for healthy eating and occasionally looked for healthy options in their stores. For example, one corner store owner said "there is a decline on the sodas are going down. The younger ones you know are going to waters non carb drinks juices but the mid age are still stuck. The older generation is noticing it and I saw some of customers walking at the park." Although customers don't necessarily ask for healthy foods, owners and managers believed that more customers are looking for them on their store shelves. Also, with the increasing rates of diabetes and other chronic diseases, owners and managers said more people were looking for sugar free options.

All except one corner store owner stated that they make the decisions regarding their purchasing. The one exception was a corner store who stated that corporate made the purchasing decisions. The decision making process was based mostly off of sales and availability of items through the supplier. Corner store owners mentioned already offering healthier options such as bananas, juices, diet sodas, milk, low sodium foods, water and Snapple.

Barriers to offering healthier options in their stores included limited space. One corner store manager said if he was building a store, he would dedicate more space to healthier food options. However, since he had limited space and already had several food items that make him a profit, he was limited on being able to dedicate more space to healthier options. Other barriers included a tough economy, corporate policies on maintaining high sales, and the potential financial loss from offering healthier items.

When asked what corner stores needed to offer healthier items, most corner store owners mentioned the demand needed to be present. They said "people wanting the items" would lead them to offer more healthy options. There were no current or past promotions that had been done for the current healthier options though. The corner store owners mentioned that the local health department could help corner stores provide healthier options by providing an incentive such as lower property taxes for participating corner stores and having a staff member visit the stores and

tell customers about the healthier options. The local health department was seen as a potential educational source for their customers.

Corner store owners were not well aware of the Por Vida Tiendita program. They were provided with explanations prior to responding to the likelihood of implementing the program and the potential success it would have with attracting new customers. Some corner store owners said if the local health department promotes it very well, it could work. The corner stores needed ongoing education from the local health department staff. The corner store owners were skeptical about how the program could help bring in new customers. Owners believed the program would be more effective with younger children. The program could counter the efforts from the soda companies to target young children. The owners didn't believe the program would be able to change adults' purchasing behaviors because they are most likely already stuck in their ways. One corner store owner, however, was very optimistic because he had opened a successful healthy restaurant in the neighborhood. He thought if customers were offered healthier options, others would be happily surprised at the success of the restaurants and the community members' reception to the options.

4. RESTAURANT STAKEHOLDERS INTERVIEWS

The purpose of the restaurant stakeholder's focus group is to learn more about the perceptions and opinions about the healthy hub environment.

Methodology

A trained qualitative researcher conducted all interviews. Interviews lasted approximately 20 minutes. A semi-structured interview guide was used to guide the interviews (See Appendix D). Each interview was audio recorded, transcribed and analyzed using NVIVO.

Findings

A total of five restaurant managers and owners were interviewed. The restaurant managers and owners were split on how they believed their customers felt about healthy food. Some managers felt their customers were interested in healthy eating but were overwhelmed with all the nutrition information and misinformation. They stated that their customers ask for more baked chicken and chips; more wheat tortillas; and less carbohydrates. Other managers believed that their usual customers choose their restaurant to eat the tasty food and were not interested in the health content of the food choices.

Purchasing decisions were done mostly by the owners and in one case by the executive chef and food chef. Food decisions were made primarily based on the demand and projected profits from each purchase. Seasonal menus provided opportunities to try new items. Although not all restaurants offered healthy items, they stated they were willing to accommodate their customers. For example, one restaurant manager said "I have some vegetarians that come and we fix the food for them." Healthier options that were already offered regularly included turkey burgers, whole grain rolls, grilled chicken, grilled fish, oatmeal, corn tortillas, vegetables, soups and salads. The healthier options were selling well at the restaurants. One restaurant offered several healthy items and prided themselves on people being able to have the restaurant as a source for healthy food "We want people to say that was an awesome meal and it was healthy not it was an awesome meal for being healthy. The idea is to get the people and community to eat it because it's good not because it's healthy...Changing the mindset that you're eating what you love not eat what you love and feel guilty about eating it later. We are trying to find the marriage between the two."

Restaurants tried different strategies to promote their healthier options. One restaurant owner mentioned the benefits of collaborations they had established. "We have made strategic partnerships with people who are like minded, Bexar County, YMCA, Humana and Aetna. We have contracts with them and their employees we also talk to HR through corporations for instance Rack Space is very conscious of meeting needs and if they have meetings that people can't eat certain things due to religious or gluten free or pork being able to accommodate that

and not breaking the bank.” Other promotions were more subtle, such as using heart icons. Two of the five restaurants mentioned not using any promotions for their healthier items.

The main barrier to purchasing healthier items was the suppliers. Many times suppliers did not carry healthier items or did not supply them in bulk. Sometimes the restaurant owners circumvented these issues by having to go through several suppliers for their recipe ingredients. There were no mentioned barriers to offering healthier foods. The main barrier to promoting healthier food items was the risk of the customers not purchasing the items. One restaurant owner mentioned the shorter shelf life of healthier items as a barrier. Also, some restaurant owners believed the promotions would waste money if people were already “stuck in their ways.”

When asked what the local health department could do to help the restaurants offer healthier items, they came up with a few suggestions. One suggestion was an incentive. One owner mentioned recognition by the Mayor and said they thought restaurants would offer healthier items “if there were incentives to opening up for these vendors to carry healthier options and better variety.” Other suggestions included help from the local health department with educating the public on healthy eating.

Restaurants were open to hearing more information about the Por Vida initiative but for the most part were not familiar with the initiative. They believed that it might work in their restaurants as long as there was a strong education component. The education could be provided for both the restaurants workers and the community members. One owner, for example, said “like I can do a lot of stuff with zucchini, mushrooms, grilled chicken or fish and all that. I do it for my customers when they come. Salads, potatoes or beans I can fix pretty much everything.” However, that owner said that learning more healthy recipes could be helpful. Education for the community would be vital to them implementing Por Vida. One owner said, “[we need] more advertising/ marketing so the community knows what’ being offered.”

Three out of the five restaurants believed Por Vida could bring in new customers. They believed that if customers knew of their restaurant and the healthy options they might visit the restaurant. However, one restaurant believed the initiative would not attract new customers but it might help the existing customers eat healthier. Finally, the other restaurant believed no initiative would bring in new customers. Their customer base is primarily based on families that live in the area and have been going there for generations. The owner said, “people come to the restaurant saying oh I met my wife here, they were boyfriend and girlfriend at [the local high school]...or I used to work here and she was a waitress and now we bring our kids and they bring their kids. It’s a restaurant of tradition it’s not like we have new customers we have the same customers.”

5. COMMUNITY ENGAGEMENT/HEALTH BEHAVIOR SURVEY

The purpose of the Community Engagement/Health Behavior Survey was to assess community members' health behaviors and attitudes regarding the built environment in their community. Questions were also asked to evaluate community cohesion.

Methodology

Interviews were conducted among community members at various locations. Most interviews were conducted using a door-to-door survey methodology. A total of 152 interviews were completed with 29 of the interviews completed at the Collins Garden library. Most interviews (approximately 80%) were conducted in English and all interviews were conducted by trained undergraduate researchers. Research teams travelled in pairs to collect the data at various times of the day at predetermined neighborhood addresses. Interviews lasted approximately 6-8 minutes each. Interviews were conducted using the attached interview script (see Appendix E) to guide the interviews.

Findings

Community resident respondents were mostly female (59%) and Hispanic. The majority rated their health as good or very good over the last 30 days (55.2%). See additional characteristics in Table 1.

Table 1. Community resident survey respondent characteristics

	%
Gender	
Female	59.0
Male	41.5
Age Range	
18-24	13.6
25-44	32.5
45-64	28.0
65 and over	24.0
Health Status	
Excellent	12.3
Very Good	18.2
Good	37.0
Fair	25.9
Poor	5.80

The most popular physical activity that community residents currently engaged in was walking. The majority of respondents (65.8%) reported engaging in walking as one of their main forms of physical activity. Other popular activities included gardening, playing a sport and jogging and running. Although each of these activities were endorsed by much fewer respondent than walking.

Community members primarily used the streets for driving to and from work. Very few residents used the streets for walking to and from the bus stop (13.8%), hanging out with friends (9.2%), walking to work (3.95%), or bicycling to nearby locations (2.63%). There were several barriers to using the streets mentioned. Several community residents (37.5%) mentioned stray dogs were barriers to using the streets. Other barriers included fast-moving cars (25.0%) and inadequate street lighting (19.7%).

Community members already used some community resources regularly. The most mentioned community resources were HEB, Collins Garden Library and Collins Garden Park mentioned by 82.9%, 73.7% and 61.8% of community residents, respectively. Please see Table 2 for other community resources, barriers and activities.

Community members gave mixed responses when asked about how much time they spent socializing with their neighbors. A few community members (18%) socialized with their neighbors about once a month. Fewer community members (14%) socialized with their neighbors a few times per month. However, almost a quarter of respondents (24%) socialized with their neighbors weekly or more often.

A dataset of all community resident responses was created and has been provided along with this report. The dataset includes all records and includes variable labels, where appropriate.

Table 2. Community resident activities and perceptions

	%
Typical physical activities	
Walking	65.8
Gardening	17.1
Playing a sport	12.5
Jogging/Running	11.2
Bicycling	9.21
Dancing	6.58
Main ways neighborhood streets are used	
Driving in their car or someone else's car	67.1
Walking to a school, park, church	35.5
Walking or bicycling with family or pet	17.7
Walking to and from the bus stop	13.8
Hanging out with friends	9.21
Walking to work	3.95
Bicycling to a school, park, church library, store	2.63
Barriers to more frequent street use	
Stray dogs	37.5
Fast-moving cars	25.0
Poor street lighting	19.7
Sidewalks are in poor condition or no sidewalks	12.5
Crime in the neighborhood	9.21
No place to walk	5.92
People hanging around on the sidewalks	5.9
Lack of shade	0.66
Neighborhood resources used	
HEB	82.9
Collins Garden Library	73.7
Collins Garden Park	61.8
Walking Trail	48.0
Church	29.6
Basketball Courts	19.1
Playground	18.4
School Playground	11.2
Open Field Space	9.87
Longoria's Restaurant	9.21
Community Center	6.57
Tennis Courts	5.26

6. STREET DESIGN AUDIT

The purpose of the street design audit was to determine the availability of built environment resources within the community which potentially directly and/or indirectly facilitate pedestrian & bicycle accessibility within Collins Garden neighborhood.

Methodology

One researcher assessed the streets surrounding the Collins Garden area on June 10, 2013. The researcher used the Street Design Audit Tool (Appendix F) to collect data on the number, location, quality & overall effectiveness of built environment features. Features assessed included presence and quality of bicycle lanes, bicycle racks, sidewalks, etc.

Findings

Collins Garden had sidewalks in the surrounding streets. The sidewalks were estimated to be at least three feet in width. Sidewalks were rated as average to good in quality. They were free of any major bumps, cracks, holes, or weeds. Sidewalks were also reported as having no major obstructions such as trees, construction or tables. This potentially increases the ability for pedestrian use. The sidewalks also had curb cuts and ramps at intersections or driveways on both sides. This potentially increases accessibility for wheelchairs.

The auditor noted that there were no “*Share the Road*” or “*Designated bike route*” signs along the streets surrounding Collins Garden.

Compared to the baseline data, there was at least one key difference in the street design audit follow up data. During the follow up data collection, there was a designated bike route that is clearly marked on the street.