

Active Living by Design

An RWJF national program

In *Active Living by Design*—a national program of the Robert Wood Johnson Foundation (RWJF) that ran from 2001 to 2009—25 communities implemented projects designed to revamp the built environment, change public policies, and expand programs to make physical activity part of everyday life. The RWJF Board of Trustees authorized the program for up to \$15.5 million.

CONTEXT

In 1996, the U.S. surgeon general established the health benefits of regular physical activity, noting that it reduced the risk of heart disease, diabetes, high blood pressure, colon cancer, arthritis, depression, and anxiety, and that inactivity increased the risk of contracting these conditions.

That same year, the Centers for Disease Control and Prevention (CDC) recommended that adults get 30 minutes of moderate physical activity, such as brisk walking, at least five days a week. Yet in the years that followed, national statistics showed that:

- Only 54.6 percent of American adults met the CDC's recommendation in 2001.²
- Between 1999 and 2001, nearly six in 10 adults (57.1 percent) were overweight, and about 22 percent were obese.³

"In the years in which physical activity had been promoted as an important part of health behavior, you had a flat line in terms of the percentage of people who did it. Nothing seemed to work," said RWJF's Kraft.

"We needed a whole new paradigm...a social culture that valued physical activity, and an environment that supported it through various policies and

¹ Physical Activity and Health: A Report of the Surgeon General, 1996. Available online.

² Behavioral Risk Factor Surveillance System, 2001.

³ Health Behaviors of Adults, 1999–2001, a CDC report based on the annual National Health Interview Survey. Available online.

programs and its actual physical structure," noted Killingsworth, the original director of *Active Living by Design*.

The Built Environment

Research also showed that accumulating 30 minutes of physical activity 10 or 15 minutes at a time—such as by walking or biking to school or work, or playing in a park—is as effective as 30 minutes of continuous exercise. However, opportunities for routine physical activity had been engineered out of most people's lives. Communities often lacked sidewalks, bikeways, and trails that provided ready access to schools, shops and workplaces.

Research was also beginning to show the importance of the built environment in encouraging active living. For example:

- People walked more in densely populated neighborhoods with sidewalks and interconnected streets, and with homes, work, schools, and shopping in close proximity.⁵
- Ready access to parks, playgrounds, trails, and recreation facilities spurred physical activity. ^{6,7,8}

RWJF's Interest in This Area

In 2001, RWJF chose promoting healthy communities and lifestyles as a key goal. When Risa Lavizzo-Mourey, MD, MPH, became Foundation president in 2003, the focus of the active living work began to shift to preventing childhood obesity.

The Active Living Programs

RWJF's portfolio of active living programs launched in 2001 aimed primarily to change the built environment by supporting environmental and policy approaches that were most likely to spur physical activity. "We wanted to reengineer activity back into people's lives," said former RWJF Program Officer Karen Gerlach Joyce, PhD, who worked with Kraft to design the programs.

⁴According to U.S. Department of Health and Human Services data.

⁵ Saelens et al. "Environmental Correlates of Walking and Cycling: Findings From the Transportation, Urban Design, and Planning Literatures. *Annals of Behavioral Medicine*, 24(2): 80–91, 2003. Available online.

⁶ Ibid.

⁷ Jeffery RW. "Public Health Strategies for Obesity Treatment and Prevention." *American Journal of Health Behavior*, 25(3): 252–259, 2001. Abstract available online.

⁸ Schmitz MK and Jeffery RW. "Public Health Interventions for the Prevention and Treatment of Obesity," *Medical Clinics of North America*, 84(2): 491–512, 2000. Abstract available online.

RWJF staff members who had worked on programs that focused on tobacco control had learned from that work that policy and environmental changes were essential to promoting health and changing behavior on a large scale.

The other active living programs were:

- Active Living Network built a national coalition of leaders and organizations committed to designing healthy, active communities (2002 to 2007). See Program Results.
- Active Living Research aims to build the evidence base for active living by supporting
 research on how environments and policies influence physical activity among
 children and their families (2002 through November 2012). Also, see Program
 Results.
- Leadership for Healthy Communities (formerly Leadership for Active Living) engages policy-makers to build political will, leadership, and advocacy for active living policies and programs (2002 to 2012).
- Active Living Resource Center provided communities and public health advocates
 with tools and resources to make walking and biking part of healthy communities
 (2002 to 2010). See Program Results.
- Active for Life: Increasing Physical Activity Levels in Adults Age 50 and Older studied how to deliver and sustain research-based physical activity programs in realworld settings so that large numbers of older Americans could benefit from them. See Program Results.

THE PROGRAM

During *Active Living by Design*, 25 communities implemented projects to change the built environment and public policies to make physical activity part of everyday life. To pursue the projects, the communities relied on interdisciplinary partnerships that integrated the fields of public health, land use, transportation, parks and recreation, health care, and others.

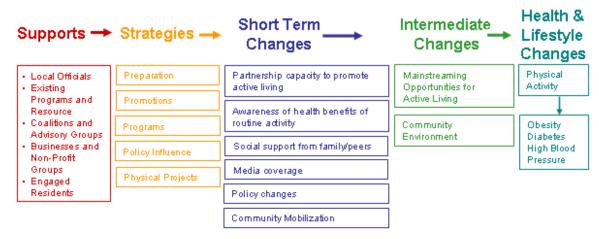
Each partnership focused on:

- Providing diverse opportunities for active living and expanding residents' access to them
- Eliminating design and policy barriers that reduce opportunities for active living
- Developing programs that expanded public awareness and understanding of the benefits of active living

The communities followed the Community Action Model, developed by the national program office, which relies on five strategies—dubbed the 5P approach—to address the many influences on physical activity:

- Preparation
- Promotions
- Programs
- Policies
- Physical projects

Active Living by Design Community Action Model



For more information on these strategies, see Appendix 1.

The Active Living by Design Partnerships

RWJF received 966 brief proposals from communities interested in participating in *Active Living by Design*—a record-breaking number of responses. "It was a perfect storm of the data and a growing understanding of connections between design and environment and physical activity," said Jamie Bussel, program officer for *Active Living by Design* since 2007.

"It was the right message at the right time," said Killingsworth, former national program director. "The concept resonated in terms of, how do we make our communities better? But also, it was this collaboration. People were stretched on resources and they were looking for ways to collaborate."

RWJF, the national program office, and a national advisory committee selected 25 partnerships from a diverse set of communities nationwide—ranging from cities such as Albuquerque, N.M., and Honolulu; to the college town of Columbia, Mo., and the

Winnebago Tribe in Walthill, Neb.; and neighborhoods in Seattle, Louisville, Ky, and the South Bronx, N.Y.

Most partnerships included elected and appointed officials or members of tribal councils, residents, and representatives from:

- Advocacy organizations and other nonprofits
- The business community
- Community and faith-based organizations, such as neighborhood associations and walking or bicycling clubs
- Health care organizations
- Media
- Parks and recreation departments
- Schools
- Urban design, planning and transportation departments
- Other government agencies, such as housing authorities, community or economic development, social services, public works, and law enforcement.

For a list of the partnerships and their lead partners, see Appendix 2.

Activities of the Partnerships

The partnerships used many tactics to promote active living. Common tactics included:

- Expanding parks, trails, and community gardens
- Promoting opportunities for walking and bicycling
- Changing local zoning laws to require sidewalks in new developments and redesigning street standards
- Developing walking clubs and programs such as Safe Routes to School
- Encouraging employers to provide bicycle lockers, showers, and gym memberships for employees
- Engaging local elected officials and the media in the problems and solutions
- Raising public awareness about the relationship between physical inactivity and the built environment

A "High-Touch, Low-Dollar" Approach

In November 2003, RWJF awarded each partnership a five-year grant of \$200,000. RWJF used a "high-touch, low-dollar" approach: providing fairly modest financial support but considerable hands-on technical assistance from the national program office.

The idea, said Kraft, was to provide "small catalytic grants" that would pay for some staff time to coordinate active living efforts and "cultivate community partnerships that could keep issues of health and the built environment front and center." RWJF also knew that communities were more likely to sustain their active living work if the partnerships had to raise other funds to support it, using the RWJF grants as a launching pad.⁹

The national program office offered technical assistance through a multidisciplinary team that provided ongoing support, such as coaching, grantee meetings, teleconferences, training sessions, site visits, a website, and an interactive extranet. To maximize their catalytic grants, RWJF and national program office staff also expected partnerships to work collaboratively with the national program office and their fellow grantees through a learning network, and encouraged them to build the active living field by presenting at conferences and serving on advisory committees.

Additional RWJF Funding

In 2005, RWJF awarded the partnerships two-year Special Opportunities grants to expand the reach and impact of their initiatives. Communities used the grants—ranging from \$15,000 to \$55,000, and averaging \$37,000—to expand their partnerships advocacy or media activity.

Also in 2005, RWJF launched *Healthy Eating by Design*, a pilot program that supported 12 of the partnerships in combating childhood obesity by expanding access to healthy foods among children and families in low-income communities and schools. See Program Results on this effort.

In 2008, RWJF awarded 12- to 18-month Transition Supplement grants to 23 of the partnerships (all that applied), to help them replicate, disseminate or sustain their *Active Living by Design* work.

⁹ RWJF's Local Funding Partnerships program, in which grantees must raise matching dollars from local funders, has shown a high sustainability rate after RWJF funding ends. Some 86 percent of all projects funded from the program's inception through 2001 lasted at least one year after their RWJF grant ended, and 75 percent were continuing to operate when surveyed in summer 2002, according to a study by Mathematica Policy Research.

Program Management

The national program office relied on two national advisory committees. The first committee, launched at the beginning of the initiative, provided guidance on overall program direction, strategies to attract communities, and grantee selection.

In 2005, RWJF and program office staff created a new national advisory committee composed of some original members as well as experts in childhood obesity and working in low-income communities. This committee helped select grantees for the *Healthy Eating by Design* program, Special Opportunities grants, and Transition Supplement grants to select initiatives. For a list of members when the committee's role ended in 2007, see Appendix 3.

Program Evaluations

Initially, there was no RWJF budget for evaluation of the program, so RWJF worked with the National Institute of Environmental Health and Safety (NIEHS), which committed resources to evaluate the program. However, several delays in implementing the NIEHS plan made it unworkable, and all parties agreed to cancel the plan fairly early in the history of the program.

RWJF then funded an overall evaluation of the program, two community-based evaluations of sites with strong relationships with local researchers who were funded by the Foundation's *Active Living Research* program, and policy case studies of some of the sites. See The Evaluations section for findings and methodology.

OVERALL PROGRAM RESULTS

The national program office reported the following results to RWJF:

Fostering Local Changes That Support Active Living

 The partnerships spearheaded or contributed to 218 projects in neighborhoods, downtowns, workplaces, schools and parks designed to create a built environment that fosters physical activity. The most common projects were street improvements to make pedestrian and bicycle travel safer, including new crosswalks, sidewalks, bike lanes, and parking.

Examples of such projects are:

— The Cleveland Metroparks Department and the Ohio Department of Transportation developed and maintained the Morgana Run Trail, which connects two Metropark facilities with a broader network. Residents can use the trail to commute to work and school and run errands, and for recreational walking and bicycling.

- Among the three participating cities in Isanti County, Minn.:
 - Isanti installed a trail along a country road to provide a safe route for children to walk to a middle school.
 - Cambridge added sidewalks to many streets and built trails to connect neighborhoods.
 - Braham built a skateboard park for kids.
- Bike, Walk and Wheel, the Active Living partnership in Columbia, Mo., improved crosswalks near elementary schools, repaired sidewalks, and added pedestrian flags and lights activated by push-buttons.
- The partnerships led or contributed to education and advocacy that produced 129 new or enhanced policies that support active living near schools, in workplaces and in public spaces. These included:
 - Municipal or county ordinances, policies, or guidelines that promote pedestrian and bike movement, such as new design standards for local streets
 - Funding for pedestrian and bike enhancements
 - Creation of municipal or county boards to advise policy-makers on active living

Examples of such policy changes are:

- The town council of Chapel Hill, N.C. (the location of the national program office) made GO! Chapel Hill, the Active Living partnership, an official board, charged with recommending capital improvements and reviewing policies related to active living.
- Seattle passed a Complete Streets policy, which requires street designers to consider pedestrians, bicyclists, and transit users as well as drivers.
- Somerville, Mass., passed a bicycle parking ordinance and a bicycle lane policy to make biking and bike parking more visible, accessible, safe, and convenient.

The partnerships also helped spearhead 45 planning documents guiding local decision-making related to active living. Although these are not policy changes, they are "an important milestone in a community change process," said Strunk.

For example:

— The City of Buffalo, N.Y., the Buffalo Niagara Medical Campus (the Active Living partnership's lead agency) and two neighborhoods created a master plan for the campus and surrounding neighborhoods that incorporated active living principles.

 The partnerships developed 128 new or expanded programs to engage people in physical activity, such as walking clubs and programs to encourage children to walk or bicycle to school. Other projects, such as bicycle recycling and education, supported active living indirectly.

Examples include:

- The Square Partnership in Chicago started a 16-week Junior Bike Ambassador program at Kelvyn Park High School. Students met three times a week to learn about bicycle mechanics and riding safety.
- Active Louisville started "Get Up, Get Out, Get Moving About" at the Presbyterian Community Center. Fitness programs included Hip-Hop-ercise, a dance exercise class for women and youth; the Pacesetters walking club for adults; and Golden Gliders, a 15-minute conditioning program for seniors.
- Active Living in Santa Ana, Calif., started the Downtown Walking Club, which met twice a week to walk from the courthouse to the farmer's market.

Building Active Living Capacity in Communities

• The partnerships helped leverage more than an additional \$275 million in grants, direct contributions, funded government policies, and in-kind contributions for active living programs—beyond the RWJF funding. Some 252 grants yielded about \$82 million; direct contributions totaled about \$33 million; funded government policies totaled \$160 million; and in-kind contributions were \$492,000.

"The communities leveraged their concentrated efforts and their relationship to RWJF to really reach out and bring in other funders," said Kraft.

Examples of funds raised:

 Columbia, Mo., used a \$22 million federal grant for nonmotorized transportation to build 125 miles of networked bikeways, pedways, and sidewalks. Columbia was one of four cities nationwide selected for these funds.

"The federal grant is completely changing the physical and social environment in Columbia," said Ian Thomas, project director for Bike, Walk and Wheel. "It will address obesity and overweight at a significant level."

— Seattle passed a transportation levy in 2006 that will provide about \$7.3 million annually for nine years for pedestrian and bicycle infrastructure "Our voice was essential," said David Levinger, the original project director for Active Seattle. "As people talked about this levy, more money was added for pedestrian improvement at every step in the process."

— Get Active Orlando used a grant from the Blue Foundation for a Healthy Florida (an affiliate of BlueCross BlueShield of Florida) to reduce childhood obesity. Grant activities include installing mile markers, repairing sidewalks, and crosswalks and offering programs on buying and cooking healthy food.

Read more about such fund-raising in Community Partnerships Use RWJF Funding as a Launching Pad for Active Living.

The national program office also secured an additional \$2.32 million by providing technical assistance to active living initiatives started by other organizations, including the W.K. Kellogg Foundation, North Carolina Health and Wellness Trust Fund, Blue Cross and Blue Shield of North Carolina Foundation, and the Blue Cross/Blue Shield of Minnesota Center for Prevention.

• Active Living by Design nurtured local partners and volunteers as well as national program staff to become leaders of an active living movement. The program provided training in advocacy and communications, and opportunities to gain exposure for active living work and to expand its scope.

Examples of such leaders are:

- Diana Straughan, mother of two schoolchildren, helped develop a Safe Routes to School program at six schools in Chapel Hill, N.C. She began her work at the school her children attended and then joined the GO! Chapel Hill partnership advisory committee, an official town board. Read more in a profile about Straughan.
- Lucy Gomez-Feliciano, health organizer for the Logan Square Neighborhood Association in Chicago, led efforts to create "walking school bus" programs and install bike racks at schools, and to build the Bloomingdale Trail and several parks. Read more in a profile about Gomez-Feliciano.
- Samina Raja, PhD, associate professor of urban and regional planning and health behavior at the University of Buffalo, helped planners understand how to design communities to provide better access to healthy foods. A partner in the Active Living by Design and Healthy Eating by Design initiative in Buffalo, Raja wrote Transforming Food Environments, Building Healthy Communities (American Planning Association). Read more in a profile about Raja.
- The partnerships engaged neighborhoods and community members in planning, advocating for and participating in active living. Examples include:
 - In Honolulu, thousands of residents from schoolchildren to senior citizens are getting exercise as a result of their work transforming an unused, overgrown state park 10 minutes from downtown into the Ho'oulu 'Aina Nature Preserve.

¹⁰ Available for purchase from the American Planning Association. Order online.

"It's a spectacularly beautiful place, and there's a real hunger to be engaged in something like this," said David D. Derauf, MD, MPH, project director.

The nature preserve includes a community farm for raising healthy food, hiking trails and a renovated caretaker's cottage, which is being used for programs on active living, healthy eating, and the environment.

- Active Living Lents helped residents of the Portland, Ore., neighborhood which had few sidewalks and bike lanes, and an eight-lane freeway splitting it in two—advocate for infrastructure funds to support active living. Results included new parks, a more walkable town center, and miles of new bike lanes and sidewalks.
- The Isanti County Active Living by Design partnership created and promoted an environment that encouraged people in the Minnesota county's three primary cities—Cambridge, Isanti, and Braham—to walk, run and bike.

The partnership created Walk the Town maps for each city and special bicycling and running/walking events, and even added a walk to Braham's annual pie day. "We were trying to show people how easy it is to use their own community to get physical activity every day," said Lisa Perlick, project coordinator.

Read more about engaging residents and neighborhoods in Community Partnerships Engage People in Active Living.

Expanding the Reach of Active Living

- Active living has become a key component of planning for land use, transportation, and parks in some communities. Examples of such institutionalization efforts:
 - The Orlando City Council approved an updated downtown transportation plan that included chapters on pedestrian improvements, bicycle transportation, and public transit. Get Active Orlando led efforts to collect data and mapped conditions for walking and bicycling.
 - The Santa Ana Parks, Recreation and Community Services Agency, a key member of the partnership, changed its mission statement to incorporate fitness and active living.
 - Somerville, Mass., funded a permanent bicycle/pedestrian coordinator in the
 Office of Strategic Planning and Community Development. Shape Up
 Somerville introduced the position by funding it for a year.
- Partnerships in low-income communities helped residents become more active; in some communities, this included helping them overcome challenges such as staying safe. Examples of work in low-income communities:

— The South Bronx (NY) Active Living Campaign helped leverage funding that led to the development of the Hunts Point Riverside Park and Barretto Point Park. The parks became part of the South Bronx Greenway linking Hunts Point, Port Morris, and the waterfront, giving residents of the dense and heavily industrial neighborhoods safe places to walk, bicycle and play.

The partnership encouraged residents to use the new parks through "Now Playing in the South Bronx," a campaign that included ads on buses and billboards, postcards mailed to homes, and community-building events such as block parties.

- Active Louisville in Kentucky created a rap video to persuade young people to ride their bikes and posted it on YouTube. Mr. Theo, a bus mechanic by day and a musician by night, leads the rap, which teaches viewers how to use the bike racks on city buses. Dancers in the video are bus drivers. Use of the bicycle racks spiked with the launch of the video, and ridership reached all-time highs. The video appears on You Tube and had close to 74,000 views as of August 2011.
- In Oakland, Calif., concerns about gangs and adults drinking, smoking, and gambling kept people away from the few open spaces, so the partnership focused on making schoolyards safe places for kids to be active outdoors.

Improvements at Garfield Elementary School, for example, included resurfacing the schoolyard and installing new basketball and tetherball courts. The city also installed new "countdown" lights at two intersections near the school and added a crossing guard.

Read more about engaging people in low-income neighborhoods in Community Partnerships to Mobilize Low-Income Communities Around Active Living.

- Partnerships received 2,710 media hits in newspapers and on television and radio, and many partnerships became sources for local and national media. Examples of such coverage:
 - In Isanti County, Minn., KBEK radio interviewed the active living project director six times on the value of physical activity and on community events. Newspaper articles also publicized the events.
 - Honolulu's weekly newsletter named the active living partnership's bicycle repair program "The Best Place to Learn How to Fix Your Bike Yourself" and published a short article on it, spurring more donations to the partnership.

THE EVALUATIONS

The Main Evaluation

RWJF-funded an evaluation of *Active Living by Design*, conducted primarily by Transtria LLC in St. Louis, Mo. Laura K. Brennan, PhD, MPH, was the lead evaluator. Brennan is

chief executive officer of Transtria and an assistant professor of behavioral science and health education at Saint Louis University's School of Public Health.

Brennan, Ross Brownson, PhD, a professor at Washington University's Institute for Public Health, and Transtria staff and advisers worked closely with a national advisory group, RWJF staff, and the *Active Living by Design* national program office to conduct the evaluation. It had three primary aims:

- To assess the impact of physical projects and policy changes on community environments
- To document intervention strategies implemented, and their intended and unintended consequences
- To identify strengths and challenges in planning, developing, and implementing interventions.

Evaluators used various methods to meet these aims, including a survey of the capacity of the partnerships, "concept mapping," a progress reporting system, key informant interviews, focus groups, photos and videos, environmental (community) audits, and direct observation. For more on these methods, see Appendix 4.

Challenges to the mixed-methods evaluation approach included a lack of data on the communities before they began their projects, the insufficient time and resources for individual communities to contribute to evaluation, and the need for a longer-term assessment. Despite these challenges, the evaluators believe that this evaluation advances efforts to assess community-based work to promote active living.

Key findings were published in a November 2012 supplement to the *American Journal of Preventive Medicine*, ¹¹ which included contributions from evaluators, other researchers, NPO staff, grantees and their community partners and National Advisory Committee members, among others. They also developed case reports on each partnership's work and its integration of the 5Ps (see Appendix 1). They are available on Transtria's website.

Evaluation of Two Active Living by Design Sites

In addition, grants from RWJF's *Active Living Research* program provided funding for deeper evaluation efforts in two *Active Living by Design* sites, Columbia, Mo., and Somerville, Mass. ¹² Stephen P. Sayers, PhD, led the evaluation of Columbia, Mo., which relied on:

¹¹ 43(5) November 2012: S267–S414

¹²Grant ID# 59452 from January 2007 to December 2008 for \$205,504 to evaluate Columbia; and Grant ID# 59453 from January 2007 to December 2008 for \$205,474 to evaluate Somerville.

- Seasonal pedestrian and bicyclist counts to study the extent to which the program's work was associated with more active living among children and adults.
- Accelerometers to measure the share of time 38 children in a walking school bus program and 39 children in a comparison group spent in moderate to vigorous exercise over seven days.

Virginia R. Chomitz, PhD, led the evaluation of Somerville; part of the evaluation surveyed middle- and high school students and adults in that city and a comparison community in Massachusetts. The survey assessed differences in attainment of recommended levels of moderate or vigorous physical activity between residents of the two cities. Survey participants were:

- In Somerville:
 - About 2,000 youth in 2003–04 (baseline), and again in 2007–08 (follow-up), after the city had implemented changes designed to promote active living
 - 1,081 adults in 2002 (baseline), and 644 in 2008 (follow-up)
- In the comparison community, Everett:
 - About 2,000 youth in 2007–08, half in high school and half in middle school
 - 608 adults in 2008

Evaluation Findings: The Main Evaluation by Transtria

All findings are from a November 2012 supplement to the *American Journal of Preventive Medicine*. ¹³ (The abstracts to all the articles are available on the program's website; most of them are available online through the RWJF website—see the Bibliography and the hyperlinks below for each source article.)

Implementation Patterns Across Communities

(Source: "Evaluation of Active Living by Design: Implementation Patterns Across Communities")

- Partnerships that prepared more for their work, such as by completing local assessments, implemented more programs, policy changes, physical projects, and promotions, attesting to the effectiveness of the *Active Living by Design* model.
- Partnerships that worked in communities where more than 40 percent of residents are non-White or impoverished implemented fewer programs, policy changes, physical projects, and promotions.

¹³ 43(5): S267–S414. November 2012.

Conclusion: The varying contexts, resources, and strategies across participating
communities provide more questions than answers about the most effective
approaches to fostering active living. The authors outline practical areas for further
inquiry for those working to improve such interventions.

Physical Projects and Policies

(Source: "Evaluation of Physical Projects and Policies from the Active Living by Design Partnerships")

- The 25 partnerships documented physical projects and policy changes in these sectors:
 - Active transportation: 23 partnerships
 - Trails, parks, recreation, and open space: 22 partnerships
 - Community-wide: 22 partnerships
 - Schools: 18 partnerships
 - Urban planning: 16 partnerships
- Challenges included securing and sustaining political will, community support, technical expertise, and resources for promoting active living.
- Creating blueprints for action and building relationships with local officials and residents were critical to changing policies and implementing projects.
- Conclusion: Although the findings warrant more research on how the changes affect physical activity and health across populations and settings, and how social, cultural, and psychosocial factors influence local responses, they provide a foundation for further work in the field.

Community Partnerships and Change

(Source: "Identifying the Role of Community Partnerships in Creating Change to Support Active Living")

- The varied types of lead agencies, partners, and partnership structures (with some more hierarchical and others more collaborative, for example) suggest that there is no one best way to bring participants together.
- Most partnerships reported challenges with engaging community members and ensuring equitable distribution of resources across different groups of residents.

The Role of Assessment

(Source: "Assessment for Active Living: Harnessing the Power of Data-Driven Planning and Action")

- The partnerships used a range of strategies to assess the needs of their communities. Qualitative methods included focus groups, individual and group interviews, and public meetings. Quantitative methods included surveys, observations, and analysis of existing data. The most common method was an environmental audit.
 - The partnerships relied on both professional staff and volunteers to perform these assessments.
- Conclusion: Assessments were essential in identifying local barriers and assets related to active living, which helped partnerships prioritize and refine their strategies. The process of completing an assessment also helped partnerships build relationships with new partners, community members, and local officials.

Findings From the Evaluation of Columbia and Somerville

Columbia, Mo.

(Source: "Bike, Walk, and Wheel: A Way of Life in Columbia, Missouri, Revisited")

- "Pedestrian counts increased significantly during July 2009 and October 2009 compared to 2007 and 2008, whereas cyclist counts increased significantly during only July 2009 compared to 2007 and 2008."
- Conclusion: The work of the program was associated with modest increases in active living, and continued evaluation is warranted. The use of multiple strategies, such as social marketing, local programming, and infrastructure changes, may be critical to promoting active living.

Source: "A Walking School Bus Program: Impact on Physical Activity in Elementary School Children in Columbia, Missouri")

- Children in a walking school bus program showed no differences in the share of time spent in moderate to vigorous exercise compared with non-participating children.
- However, the negative association between the age of the children and their level of physical activity was less pronounced among those who participated in the program.

Somerville, Mass.

(Source: "Evaluation Results from an Active Living Intervention in Somerville, Massachusetts")

- Somerville middle- and high-school students and adults were more likely to attain recommended levels of physical activity after the city implemented changes to promote active living.
- Somerville adults were significantly more likely than adults in the comparison community to fulfill recommended levels of physical activity.

The evaluators concluded that public health data can identify personal and environmental factors that predict whether residents will reach recommended levels of physical activity, which can be used to inform city policy and planning.

COMMUNICATIONS RESULTS

National program staff:

- Created a website with resources, tools, and links to support the partnerships and others engaged in active living work nationwide. The website also includes profiles, case studies, and other information on each partnership.
- Worked with Transtria, the main evaluator of *Active Living by Design*, on two journal supplements to the *American Journal of Preventive Medicine*:
 - A 2009 supplement on best practices from the program¹⁴
 - A 2012 supplement with evaluation results.¹⁵
- Published 22 articles in other journals, such as the American Journal of Health Promotion, Journal of the American Dietetic Association, Journal of Health Policy Analysis and Debate, and Journal of the American Medical Association.
- Made nearly 200 presentations at local, regional, and national meetings.

 Examples include the annual meetings of the American Public Health Association, the Society for Behavioral Medicine, and the U.S. Conference of Mayors; conferences on childhood obesity sponsored by the National Institute of Environmental Health; and a health promotion conference sponsored by the CDC.

See the Bibliography for more information.

¹⁴American Journal of Preventive Medicine, 37(6, Suppl. 2): 309–462, 2009. Abstracts of some articles are available online.

¹⁵ American Journal of Preventive Medicine, 43(5, Suppl. 4): S267–S414, 2012. Abstracts of some articles are available online.

SIGNIFICANCE OF THE PROGRAM

Active Living by Design helped spearhead a movement promoting the importance of community design in improving public health, according to Strunk, national program director.

"Ten years ago if you had said "active living," people would have looked at you, and said, 'What are you talking about'? A true movement has taken over and will change generations to come," agreed RWJF's Bussel.

Designing Communities That Support Active Living

Active Living by Design made discussions of the link between health and the built environment mainstream, and brought the right people—including mayors, legislators, city planners, residents, and advocates—together. The program showed the impact on the health of the public of zoning, transportation and land use, and launched a cadre of leaders collaborating across disciplines.

"You'd see people in their ties and their biking shorts sitting at the same table. *Active Living by Design* broke down the barriers for people to feel like they had common ground and equal opportunity to voice a solution," said Killingsworth.

Training a New Field of Urban Planners

The program had a profound impact on city planners, according to Killingsworth. In 2003, the University of North Carolina established a master's program in health behavior and city planning, and demand for graduates among state agencies and large municipalities has been strong. By 2010, more than a dozen universities offered similar programs.

Providing Models of Active Living

Participating communities with multidisciplinary partnerships showed that those partnerships can make policy and environmental changes to support active living in a reasonable amount of time. *Active Living by Design* has provided "a set of communities that see physical activity and health as an important community issue rather than an individual issue," said Kraft. "Active living as a concept has been widely successful."

The spread of active living beyond the RWJF-funded program is one measure of its accomplishments. Hundreds of communities are now engaged in active living initiatives supported by the funders in the examples below as well as the CDC, Kaiser Permanente and other private and government sources. For example:

- Through W.K. Kellogg Foundation's Food & Fitness initiative, collaboratives in nine communities are expanding access to affordable, healthy, locally grown food and creating safe and inviting places for physical activity and play.
- The North Carolina Health and Wellness Trust Fund's Fit Community program has supported efforts to promote physical activity and healthy eating and to prevent tobacco use in 38 communities.¹⁶
- Through Blue Cross/Blue Shield of Minnesota's Active Living Minnesota, eight communities are implementing a comprehensive approach to support active living, including environmental and policy change.

Overall, "Active Living by Design has quickly grown into a broader movement and a philosophy that millions of people believe can contribute to improved health, better quality of life and safer, more vibrant communities," Strunk said.

SELECTED LESSONS LEARNED

For a full collection of lessons, visit the program's website. Several of these lessons are informed by the evaluation of the program as well as the published "best practices" volume.

Building Capacity, Communication, and Leadership

- 1. **Strengthen a partnership's capacity by distributing resources among participants.** Lead agencies of *Active Living by Design* initiatives often retained a significant portion of the grant funds, and dedicated them to a staff position to help coordinate a partnership. That put pressure on partners expected to contribute significant in-kind support without much financial support. Lead agencies should carefully assess their partners' needs early on, and ensure that they have the capacity to meet a project's demands. (National Program Office)
- 2. Effective communication between lead agencies and partners is critical. Lead active living agencies sometimes believed that partners did not communicate their ideas, needs or progress clearly. Partners, in turn, sometimes felt that lead agencies did not invite ideas, feedback or involvement, or did not respond well to input. Leaders of partnerships need to make effective communication a consistent expectation, and model it. (National Program Office)
- 3. The most productive partnerships had leaders or key staff with strong project management skills who were empowered to follow through on a complex work plan. The leaders of the most effective partnerships:

¹⁶ The Health and Wellness Trust Fund was abolished by the NC General Assembly as of July 1, 2011, owing to budgetary constraints.

- Developed a consensus vision and goals to generate broad-based ownership and fair distribution of responsibilities and benefits
- Made efficient use of partners' assets and sought to institutionalize their contributions
- Understood the need to be flexible and plan for changing conditions and members
- Remained personally open to feedback and midcourse corrections
- Energized the partnership by recognizing and rewarding contributions and celebrating success
- Nurtured effective leadership throughout the partnership by establishing a culture of mutual accountability

(National Program Office)

- 4. Successful policy advocacy efforts, even when they begin at the grassroots level, almost always require a strong elected or appointed local official, school principal or business leader to act as a champion. Emerging coalitions and potential champions should seek each other out and keep each other on task. (National Program Office)
- 5. **Use learning networks to help partnerships succeed.** Local leaders emphasized the importance of:
 - Training and technical assistance
 - Opportunities to discuss the work openly with their colleagues, experts and partners
 - Opportunities to learn about new tools, resources, opportunities and best practices
 (National Program Office)

Building Local Ownership and Commitment

- 6. Engage residents as strategic partners before investing in long-term environmental and policy solutions. Successful change requires eliciting residents' perceptions and preferences, and pilot-testing initiatives. Partnerships that did not engage residents or seek their feedback sometimes missed the mark. (National Program Office)
- 7. To secure broad-based buy-in for an active living agenda, promote shared ownership by developing grassroots leaders and organizing residents.

 Communities with strong existing coalitions and organizing efforts had an advantage in sustaining improvements and outlasting resistance to change. (National Program Office)

- 8. Changing the social milieu along with the physical environment is essential to spurring active living. Some active living partnerships found it difficult to engage partners and raise money when crime and safety, economic development, affordable housing, public education, environmental justice, and access to health care were urgent priorities. Leaders need to link active living tactics to such critical concerns in low-income communities, such as by providing safe places for children to play. (National Program Office)
- 9. Risks to personal security have a major impact on residents' willingness to engage in outdoor physical activity. Improving opportunities for walking and bicycling may fall short if the threat of violent crime deters people from using them. For example, a redesigned and mapped route for children to travel to school will not work if gang members begin to hang out along the route and parents are fearful or unavailable to escort their children.

Most distressed communities began to overcome this barrier by engaging with gangs, working with law enforcement, activating citizen leaders, and improving the built environment. Leaders in distressed communities should test perceptions of crime early, work with partners who can help address public safety and develop and implement strategies for preventing crime. (National Program Office)

10. Use good stories—not just data—to make a persuasive argument. Stories helped decision-makers, especially elected officials, understand the impact on their constituents of challenges to active living or opportunities to foster it. (National Program Office)

Building Sustainability

- 11. Although an active living program can be expensive and difficult to sustain, it is possible to do so. Partnerships achieved sustainability by:
 - Institutionalizing new programs and practices within partner agencies, worksites and schools, such as sports, recreation or public health programs
 - Completing targeted, small-scale infrastructure projects
 - Changing policies governing future development patterns to make them more conducive to routine physical activity
 - Educating and inspiring existing leaders and decision-makers
 - Establishing self-sustaining promotional events
 - Finding a permanent home within a stable institution

(National Program Office)

12. School facilities and grounds are important active living assets, especially in resource-poor communities. In communities with severe shortages of open space,

recreational facilities or civic space, school playgrounds, fields, gyms, and parking lots served as important locations for physical activity.

Agreements that permit public use of school facilities, or that allow schools to use adjacent public facilities, enabled communities to make the most efficient use of existing assets. Schools and local governments should look for opportunities to share facilities and cut overall costs. (National Program Office)

AFTERWARD

Many *Active Living by Design* partnerships are still in place; some have expanded or modified their focus, according to Strunk. In communities where the partnership has disbanded, new policies, infrastructure, and social norms continue to foster physical activity. The national program office also maintains the *Active Living by Design* website.

Healthy Kids, Healthy Communities

In 2008, RWJF launched *Healthy Kids, Healthy Communities*, a \$33.4 million initiative to expand local opportunities for physical activity and access to healthy, affordable foods for children and families. The program focuses on children who are at highest risk of obesity based on race/ethnicity, income or geographic location.

Active Living by Design inspired Healthy Kids, Healthy Communities, which similarly relies on local multidisciplinary partnerships, strong technical assistance and a robust learning network, according to RWJF Program Officer Bussel. The program began with nine communities, which served as leading sites for the 41 communities selected to receive grants in 2009. Six of the lead sites also participated in Active Living by Design:

- Chicago
- Columbia, Mo.
- Louisville, Ky.
- Seattle
- Somerville, Mass.
- Oakland, Calif.

The leading sites received grants of \$400,000 for up to four years, ending in December 2012. The other sites received grants of up to \$360,000 for up to four years, ending in December 2013. (For a list of all sites, see the communities page of the *Healthy Kids*, *Healthy Communities* website.) Strunk and her team are managing the program. Their experience with *Active Living by Design* gave the team the capacity to launch *Healthy Kids*, *Healthy Communities*, which was one of the largest roll-outs of individual, highly

selected sites in a national program that RWJF ever did.¹⁷ The program is described in a Progress Report.

Healthy Kids, Healthy Communities is part of RWJF's \$500 million commitment to reverse the childhood obesity epidemic in the United States by 2015.

"Healthy Kids, Healthy Communities will be a cornerstone of our work into the next decade," said Risa Lavizzo-Mourey, MD, MBA, RWJF president and CEO. "This is one of the largest community-action programs ever supported by the Foundation, and one that holds great potential for changing many people's lives."

Prepared by: Lori De Milto

Reviewed by: Sandra Hackman and Molly McKaughan

Program Officers: M. Katherine Kraft, Terry Bazzarre, Dwayne Proctor and Jamie B. Bussel

Evaluation Officer: Laura Leviton Program Area: Childhood Obesity

Grant ID#: PAC

Program Director: Sarah L. Strunk, MHA, (919) 843-3122; sarah_strunk@unc.edu

¹⁷ RWJF funded 49 sites within a single year, and 40 of those within a single round of funding.

APPENDIX 1

The 5P Strategies of the Community Action Model

Preparation (P1)

Preparation is the deliberate process of getting ready for action, including:

- Developing and maintaining a community partnership to work collectively
- Collecting relevant data to inform program planning
- Pursuing financial and other resources

Promotions (P2)

The project connects with the public through communications. Messages include the benefits of active living and the importance of community environments in promoting healthy living. Promotions should help ensure the success of other policy, programmatic, and infrastructure goals. They should be evaluated to see whether they reach the intended audiences.

Programs (P3)

Programs consist of organized ongoing activities that engage individuals in physical activity, directly or indirectly. Active living programs:

- Provide direct access to physical activity opportunities, such as through walking clubs and bicycle recycle initiatives.
- Reward individuals for adopting more active habits through incentives or other
 encouragements, such as benefits for employees or students who walk or bicycle to
 work or school

Policies (P4)

Policy development is the key to institutionalizing environments that support active living. Partnerships should identify and attempt to influence changes in public policies and standards as well as organizational practices. Efforts include:

- Advocacy
- Relationship building with policy-makers
- Presentations to policy boards
- Influencing employer or school policies

Educating citizens, professionals, and advocates as well as policy-makers about the need for local environments that support active living is an essential part of this strategy. In general, policy tactics end with a policy change (e.g., pedestrian-friendly street design guidelines).

Physical Projects (P5)

Physical projects directly affect built environments, removing barriers to physical activity and enhancing safety (e.g., trails and pedestrian improvements at intersections). Partnerships should look for opportunities to improve physical spaces that do not rely on a policy decision. Physical projects range from community trails to sidewalks to signs about taking the stairs.

APPENDIX 2

Active Living by Design Community Partnerships

East Bay Asian Youth Center (Oakland, Calif.)

Healthy Eating and Active Living Initiative

ID# 49731(November 2003–October 2008) \$200,000

ID# 55568 (November 2005–October 2007) \$30,000

ID# 65282 (November 2008–December 2009) \$30,000

Project Director

David Kakishiba (510) 533-1092 x 25 junji@ebayc.org

WalkSacramento (Sacramento, Calif.)

Partnership for Active Communities

ID# 49748 (November 2003–November 2008) \$200,000

ID# 55573 (November 2005–June 2007) \$32,500

ID# 65356 (November 2008–October 2009) \$45,000

Project Director

Anne B. Geraghty (no longer with the organization) (916)-446-9255

Young Men's Christian Association of Orange County (YMCA) (Tustin, Calif.)

Active Living in Santa Ana

ID# 49759 (November 2003-November 2008) \$180,202

ID# 55577 (November 2005-April 2008) \$47,905

ID# 65287 (November 2008–December 2009) \$44,995

Project Director

Kristen Thompson (no longer with the organization)

(714) 852-6008

Friends of the Colorado Center for Human Nutrition (Lakewood, Co.)

Active Living Partnership of Greater Stapleton

ID# 49759 04973 (November 2003–October 2008) \$200,000

ID# 55561 (November 2005-October 2007) \$45,600

ID# 65275 (November 2008-April 2010) \$42,123

Project Director

Helen C. Thompson (retired)

(303) 315-9045

City of Orlando (Orlando, Fla.)

Get Active Orlando

ID# 49734 (November 2003–October 2008) \$200,000

ID# 55571 (November 2005–October 2007) \$35,000

ID# 65342 (November 2008-April 2010) \$45,000

Project Director

Dean Grandin, MA

(407) 246-2120

dean.grandin@cityoforlando.net

Kokua Kalihi Valley Comprehensive Family Services (Honolulu, Hawaii)

Kalihi Valley Active Living Program

ID# 49745 (November 2003–October 2008) \$200,000

ID# 55564 (November 2005-October 2007) \$27,250

ID# 64849 (November 2008-November 2009) \$39,173

Project Director

Cynthia Sturdevant

(808) 791-9413

csturdevant@kkv.net

Illinois Health Education Consortium (Chicago)

Active Living Logan Square

ID# 49762 (November 2003–October 2008) \$200,000

ID# 55556 (November 2005–October 2007) \$20,000

ID# 65281 (November 2008–April 2010) \$45,000

Project Director

Virginia Warren (no longer with the organization) (312) 996-6927

Louisville Metro Housing Authority (Louisville, Ky.)

ACTIVE Louisville

ID# 49752 (November 2003–October 2008) \$200,000

ID# 65286 (November 2008-April 2010) \$44,335

ID# 55567 (November 2005-October 2007) \$43,300

Project Director

Jennifer Clark (no longer with the organization) (502) 819-7881

City of Somerville Health Department (Somerville, Mass.)

Shape-up Somerville

ID# 49742 (November 2003–October 2008) \$200,000

ID# 55554 (January 2006–October 2007) \$45,700

ID# 65357 (November 2008-October 2009) \$45,000

Project Director

Noreen Burke (no longer with the organization) (617) 625-6600

Michigan Physical Fitness, Health and Sports Foundation dba Michigan Fitness Foundation (Lansing, Mich.)

Walkable Communities Task Force

ID# 49746 (November 2003–October 2008) \$200,000

ID# 55566 (November 2005–October 2007) \$48,600

Project Director

Risa Wilkerson, MA (no longer with the organization) (919) 843-3519

Isanti County (Cambridge, Minn.)

Isanti County Active Living

ID# 49761(November 2003–November 2008) \$199,938

ID# 55565 (November 2005-October 2007) \$20,000

ID# 65230 (November 2008–February 2010) \$45,000

Project Director

William A. Carlson

(763) 689-1442

wcarlson33@izoom.net

PedNet Coalition, Inc. (Columbia, Mo.)

Bike, Walk and Wheel

ID# 49753 (November 2003–November 2008) \$199,903

ID# 55560 (November 2005–October 2007) \$56,700

ID# 65269 (November 2008-April 2010) \$45,000

Project Director

Ian M. Thomas, PhD, MEd, MSc

(573) 239-7916

ian@pednet.org

Town of Chapel Hill (Chapel Hill, N.C.)

GO! Chapel Hill

ID# 49757 (November 2003–October 2008) \$200,000

ID# 55584 (November 2005–October 2007) \$15,000

ID#65274 (November 2008-April 2010) \$39,290

Project Director

David C. Bonk

(919) 969-5064

dbonk@townofchapelhill.org

Our Healthy Community Partnership (Omaha, Neb.)

Act!vate Omaha

ID# 49754 (November 2003-October 2008) \$200,000

ID# 55569 (November 2005-April 2007) \$53,700

ID# 65273 (November 2008-April 2010) \$45,000

Kerri R. Peterson, MS (402) 934-5886

kpeterson@livewellomaha.org

Ho-Chunk Development Corp. (Walthill, Neb.)

Winnebago Active Living by Design

ID# 49732 (November 2003–October 2008) \$200,000

ID# 55595 (November 2005-April 2007) \$15,000

Project Director

Joy Johnson

(402) 846-5353

jjohnson@hochunkcdc.org

1000 Friends of New Mexico (Albuquerque, N.M.)

Albuquerque Alliance for Active Living

ID# 49740 (November 2003–October 2008) \$199,910

ID# 55576 (December 2005-May 2008) \$39,250

ID# 65527 (December 2008-March 2010) \$45,000

Project Director

Joanne McEntire (no longer with the organization) (505) 400-1645

Sustainable South Bronx (Bronx, N.Y.)

South Bronx Active Living Campaign

ID# 49747 (November 2003–October 2008) \$200,000

ID# 55581 (November 2005–October 2007) \$35,000

Project Director

Majora J. Carter (no longer with the organization) (718) 617-4668

Buffalo Niagara Medical Campus, Inc. (Buffalo, NY)

Healthy Communities Initiative

ID# 49736 (November 2003–October 2008) \$200,000

ID# 55582 (November 2005–October 2007) \$50,000

ID# 65284 (November 2008–April 2010) \$45,000

Michael J. Ball, A.I.C.P. (716) 881-8922 mball@bnmc.org

Slavic Village Development (Cleveland, Ohio)

The Broadway: a community on the move

ID# 49751 (November 2003–October 2008) \$200,000

ID# 55559 (November 2005–October 2008) \$51,400

ID# 65280 (November 2008–October 2009) \$45,000

Project Director

Emily K. Miller 216-429-1182 x121

emilym@slavicvillage.org

Oregon Public Health Institute (formerly called the Community Health Partnership) (Portland, Ore.)

Healthy Active Lents

ID# 59270 (December 2006-November 2008) \$47,590

ID# 65271(November 2008-April 2010) \$45,000

Project Director

Noelle G. Dobson, MPH (503) 227-5502 x224

noelle@communityhealthpartnership.org

American Heart Association Inc., Pacific Mountain Affiliate (Seattle, Wash.)

ID# 49744 (November 2003–November 2008)

Project Director

Minot Cleveland, MD (Oregon Coalition for Promotion of Physical Activity) (530) 806-2007

minot.cleveland@worldnet.att.net

Feet First (Seattle, Wash.)

Active Seattle

ID# 49756 (November 2003–October 2008) \$200,000

ID# 55583 ((November 2005–September 2008) \$41,500

ID# 65272 (November 2008-April) 2010 \$45,000

Rebecca C. Deehr (no longer with the organization) (206) 652-2310

Maternal and Family Health Services, Inc. (Wilkes-Barre, Pa.)

Wyoming Valley Wellness Trails Partnership

ID# 49760 (November 2003–October 2008) \$200,000

ID# 55553 (November 2005–July 2008) \$20,000

ID# 65227 (November 2008-April 2010) \$18,340

Project Director

Cynthia A. Lombard (no longer with the organization) (570) 759-9465

Berkeley Charleston Dorchester Council of Governments (North Charleston, S.C.)

Lowcountry Connections Partnership

ID# 49741 (November 2003–January 2009) \$192,115

ID# 55585 (November 2005–January 2009) \$47,000

Project Director

Yvonne A. Gilreath

(843) 529-0400

vonieg@bcdcog.com

Metropolitan Government of Nashville and Davidson County (Nashville, Tenn.)

Music City Moves! Partnership

ID# 49758 (December 2003–November 2008) \$200,000

ID# 55550 (November 2005–October 2007) \$35,500

ID# 65343 (November 2008–November 2009) \$12,618

Project Director

Adetokunbo A. Omishakin

(615) 862-7147

adetokunbo.omishakin@nashville.gov

Upper Valley Trails Alliance, Inc. (Norwich, Vt.)

Upper Valley Trails for Life

ID# 49750 (November 2003–October 2008) \$200,000

ID# 55552 (November 2005–October 2007) \$42,200

ID# 65228 (November 2008-April 2010) \$45,000

Russell Hirschler (802) 649-9075 russell.hirschler@uvtrails.org

APPENDIX 3

Active Living by Design National Advisory Committee (as of December 2007, when the committee's role ended)

Tyler Norris (Chair)

Founding President and CEO Community Initiatives, Inc. Boulder, Colo.

Tim Blumenthal

President Bikes Belong Coalition Boulder, Colo.

Susan Handy, PhD

Professor of Environmental Science and Policy Department of Environmental Science and Policy University of California, Davis Davis, Calif.

Maxine Hayes, MD, MPH

State Health Officer Washington State Department of Health Seattle, Wash.

James H. Johnson, PhD

William R. Kenan Jr. Distinguished Professor of Strategy and Entrepreneurship

Kenan-Flagler Business School University of North Carolina-Chapel Hill Chapel Hill, NC

Michael O'Donnell, PhD, MBA

Director of Health and Wellness Cleveland Clinic Editor in Chief and President American Journal of Health Promotion Cleveland, Ohio

Daniel Rodriguez, PhD

Associate Professor Department of City and Regional Planning Adjunct Associate Professor Department of Epidemiology University of North Carolina-Chapel Hill Chapel Hill, N.C.

Howell Weschler, EdD, MPH

Director
Division of School and Adolescent Health
Centers for Disease Control and Prevention
Atlanta, Ga.

APPENDIX 4

Evaluation Methods

Partnership Capacity Survey

The 25 partnerships completed a 38-item survey of their structure and function.

Concept Mapping

This technique integrates qualitative and quantitative information to provide a visual representation of the relationships among ideas. The evaluators used it to determine the

most important and successful strategies used by the 25 communities. The method includes six steps:

- Selecting a group of participants and determining the focus
- Group brainstorming to generate statements
- Structuring statements through a sorting process to create clusters
- Representing the statements/clusters using a map
- Interpreting the maps
- Using the maps

Progress Reporting System

Key personnel from all partnerships documented specific project activities using the webbased Progress Reporting System. National program office staff monitored the entries and created progress reports. Evaluators used the data to examine partnership activities and accomplishments.

Key Informant Interviews

Evaluators interviewed lead project staff and partners.

Focus Groups

Evaluators conducted multiple focus groups with project staff, partners, and community members during site visits to all 25 partnerships.

Photos and Videos

Evaluators took photos and videos of planned and completed physical projects and people's behavior in the communities, to confirm other information.

Environmental Audits

Evaluators used a neighborhood audit tool to assess whether environmental conditions for physical activity changed as a result of the projects in each community.

Direct Observation

The evaluators observed residents in each community using facilities (such as trails and playgrounds) and environments (such as parks and streets) scheduled to be developed or redeveloped during the program.

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Richard Killingsworth, "The Importance of Transportation in Public Health: Why Safe Routes to Schools are Needed," to the United States House of Representatives Subcommittee on Highways and Transit of the Committee on Transportation and Infrastructure, July 25, 2002, Washington. Written request from Clyde Woodle.

Communications & Advocacy

Community Profiles are available on the Active Living by Design website. Just click on the location on the map to get to each Community Profile. Each profile includes the following sections: "About," "Our Story," "Opportunities" and "Accomplishments."

www.activelivingbydesign.org. Includes resources, tools and links to support community partnerships and others engaged in active living work nationwide, and profiles and other information on each partnership. Chapel Hill, NC: University of North Carolina.

SIDEBAR LIST

- Community Partnerships Use RWJF Funding as a Launching Pad for Active Living. Covers Columbia, Mo., Seattle, Santa Ana., Calif., and Orlando, Fla.
- Community Partnerships Engage People in Active Living. Covers Honolulu, Santa Ana, Calif., Portland, Ore., and Isanti County, Minn.
- Community Partnerships to Mobilize Low-Income Communities Around Active Living. Covers South Bronx, N.Y., Oakland, Calif., Louisville, Ky., and Cleveland.

PROFILE LIST

- Diana Straughan, Chapel Hill, N.C.
- Lucy Gomez-Feliciano, Chicago, Ill.
- Samina Raja, PhD, Buffalo, N.Y.