

SHAPE UP SOMERVILLE

CASE REPORT

SOMERVILLE, MASSACHUSETTS

Evaluation of the Healthy Kids, Healthy Communities National Program

December 2008 to December 2012



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BACKGROUND

Healthy Kids, Healthy Communities National Program

With the goal of preventing childhood obesity, the Healthy Kids, Healthy Communities (HKHC) national program, funded by the Robert Wood Johnson Foundation (RWJF), provided grants to 49 community partnerships across the United States (Figure 1). Healthy eating and active living policy, system, and environmental changes were implemented to support healthier communities for children and families. The program placed special emphasis on reaching children at highest risk for obesity on the basis of race, ethnicity, income, or geographic location.¹

Project Officers from the HKHC National Program Office assisted community partnerships in creating and implementing annual workplans organized by goals, tactics, activities, and benchmarks. Through site visits and monthly conference calls, community partnerships also received guidance on developing and maintaining local partnerships, conducting assessments, implementing strategies, and disseminating and sustaining their local initiatives. Additional opportunities supplemented the one-on-one guidance from Project Officers, including peer engagement through annual conferences and a program website, communications training and support, and specialized technical assistance (e.g., health law and policy).

For more about the national program and grantees, visit www.healthykidshealthycommunities.org.

Figure 1: Map of Healthy Kids, Healthy Communities Partnerships



Evaluation of Healthy Kids, Healthy Communities

Transtria LLC and Washington University Institute for Public Health received funding from the Robert Wood Johnson Foundation to evaluate the HKHC national program. They tracked plans, processes, strategies, and results related to active living and healthy eating policy, system, and environmental changes as well as influences associated with partnership and community capacity and broader social determinants of health.

Reported “actions,” or steps taken by community partnerships to advance their goals, tactics, activities, or benchmarks from their workplans, formed community progress reports tracked through the HKHC Community Dashboard program website. This website included various functions, such as social networking, progress reporting, and tools and resources to maintain a steady flow of users over time and increase peer engagement across communities.

In addition to action reporting, evaluators collaborated with community partners to conduct individual and group interviews with partners and community representatives, environmental audits and direct observations in specific project areas (where applicable), and group model building sessions. Data from an online survey, photos, community annual reports, and existing surveillance systems (e.g., U.S. census) supplemented information collected alongside the community partnerships.

For more about the evaluation, visit www.transtria.com/hkhc.

Shape Up Somerville Partnership

In December 2008, the Shape Up Somerville partnership received a four-year, \$400,000 grant as part of the HKHC national program. This partnership was focused on expanding the existing healthy eating and active living efforts throughout Somerville, a dense, diverse, low-income city adjacent to Boston.

The City of Somerville Health Department was the lead agency for the Shape Up Somerville (SUS) partnership. The capacity building strategies of the partnership included:

- **Political Will:** Somerville was unique in that the city was an integral part of the SUS partnership with a supportive Mayor. Specifically, the Mayor created positions within the city, also funded by the city, to support healthy eating and active living policy, system, and environmental approaches to building and sustaining healthy communities.
- **City/Community Agency/Organization Collaboration:** With Somerville’s unique city involvement, there was significant investment in collaboration between city agencies, community-based organizations, and community residents through mini-grant opportunities. These small projects facilitated meaningful cooperation across these groups.

See Appendix A: Shape Up Somerville Evaluation Logic Model and Appendix B: Partnership and Community Capacity Survey Results for more information.

Along with partnership and capacity building strategies, the SUS partnership incorporated assessment and community engagement activities to support the partnership and the healthy eating and active living strategies.

The healthy eating and active living strategies of Shape Up Somerville included:

- **City/Comprehensive Planning:** The first Comprehensive Plan for the City of Somerville was designed to be a high-level driving document for implementing zoning changes or area-specific plans and upgrades to create access to active transportation and healthy food opportunities.
- **Parks and Play Spaces:** The Open Spaces and Recreation Master Plan was revised, and parks and play spaces were identified for development and renovations to improve opportunities for physical activity.
- **Active Transportation:** To further support active transportation through zoning and infrastructure changes, the SUS partnership aimed to support a pedestrian- and bicycle-friendly community.
- **Farmers’ Markets:** The farmers’ market program expanded to include two new markets (i.e., mobile market and winter market). The mobile market supported six locations, and all markets accepted nutrition assistance programs.
- **Restaurants:** The Shape Up Approved healthy restaurant initiative enrolled 40 participating restaurants and added menu analysis and point of purchase prompts to 21 restaurants. There was a strong focus on supporting immigrant restaurants through a partnership with The Welcome Project.
- **Other Strategies:** The SUS partnership worked on a healthy vending policy for municipal buildings, created an open streets event, and revised zoning policies for an underserved neighborhood.

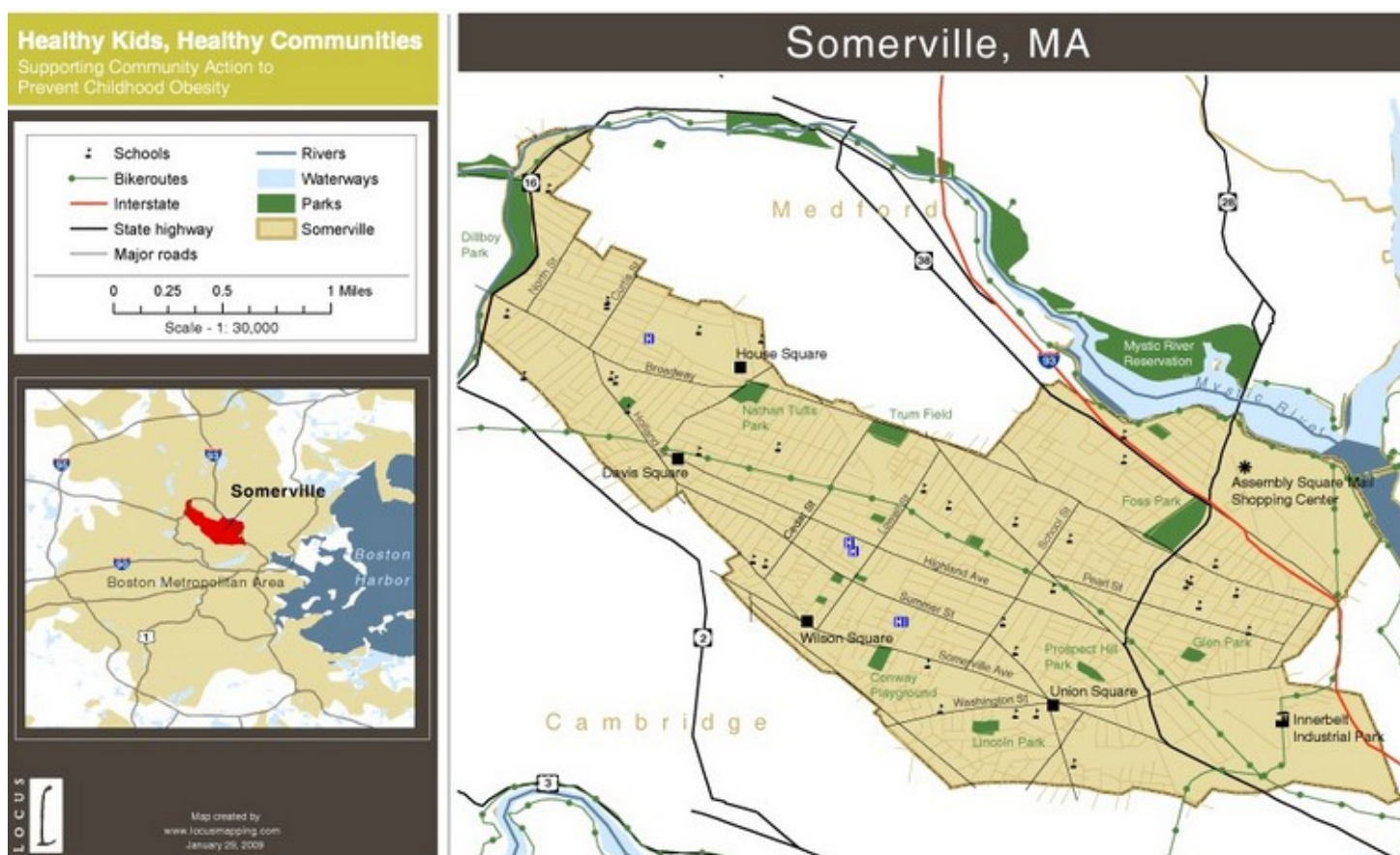
COMMUNITY DEMOGRAPHICS

Somerville, Massachusetts has a population of 75,754 and is a dense, diverse, low-income city adjacent to Boston. It was established as a town in 1842, when it was separated from Charleston. The City of Somerville, originally a farm, has a rich history as part of early American culture. Stories of George Washington setting up camp in the area and the first independent American flag being raised on the land, are just two anecdotes of early American history in Somerville.

Among residents living in Somerville, 74% are white, 8.7% are Asian, 6.7% are other races, 6.8% are black, and 10.6% are Hispanic or Latino.² Approximately 32% of residents speak a language other than English at home.³ The city has a lower per capita income (\$25,952) than the state of Massachusetts (\$32,785).³ Nine percent of families in Somerville live below the federal poverty level.³

While 22.9% of adults in Massachusetts are obese, this is lower than the national median (27.6%), with states ranging from a high of 34.0% to a low of 20.5%.⁴ Levels of child obesity have shown a decrease between 1-2% in public school children across four main racial groups (i.e., white, black, Hispanic, and Asian) in 2011 compared to the previous year.⁴

Figure 2: Map of Somerville, Massachusetts Target Areas⁵



INFLUENCE OF SOCIAL DETERMINANTS

Population Shifts

Greater than 33% of the population of Somerville has lived in Somerville for only four years or less.⁶ Racial diversity is increasing in larger percentages within Somerville public schools than in the overall demographics of the city.⁶

Local Public Transit

Although buses currently run throughout Somerville, bus routes primarily run only east-west, creating barriers in bus access. Only 15% of Somerville residents live within a half-mile radius of a rapid transit line. Project efforts focus on expanding the Green Line into central Somerville and building a new Orange Line station in East Somerville, near Assembly Square. Combined, these changes would bring a rapid transit line within a half-mile of 85% of the city's residents.⁶

Streetscape Improvements

Compared to the overall number throughout the entire state of Massachusetts, more residents ride public transportation (30.7%, 9.2%) and walk (10.1%, 4.7%) to work in Somerville, while far fewer drive or ride in a vehicle (51.0%, 80.3%).³

SHAPE UP SOMERVILLE PARTNERSHIP

Lead Agency and Leadership Teams

Under the leadership of Mayor Joseph Curtatone, the city had worked on healthy eating and active living projects. Shape Up Somerville (SUS) started as a group that came together in the early 2000s to conduct an analysis of nutrition in Somerville. It developed into a taskforce as part of a Tufts University community-based research study targeting first through third graders in the Somerville Public Schools, and eventually evolved into a steering committee based out of the City of Somerville Health Department. Shape Up Somerville grew into a city-wide campaign to increase daily physical activity and healthy eating through programming, physical infrastructure improvements, and policy work. The campaign targeted all segments of the community, including schools, city government, civic organizations, community groups, businesses, and other people who live, work, and play in Somerville.



The City of Somerville Health Department was the lead agency for the SUS partnership. The purpose of the health department was to provide public health services to the city by effectively maintaining health and wellness of citizens through related policymaking, school health programs, vaccine distribution, public health education campaigns, communicable disease investigation, and public health regulation.

The SUS partnership was previously led by a community member before the city hired a dedicated Project Director to take over this role. The Project Director reported directly to the Mayor. There were some growing pains associated with this change as leadership shifted from the community-based organizations to the city. SUS was still identifying ways to increase community members' participation in partnership activities. The Mayor was a loyal supporter of the partnership, which he demonstrated by directing city funds to support two staff positions. He continued to show commitment to the well-being of children through his support of parks and schools. In addition to the Mayor's key leadership role, there were other key leaders/organizations within the SUS partnership.

- The school superintendent was an essential supporter of the partnership, and had been supportive of collecting BMI data in Somerville schools as part of a different grant.
- The Welcome Project had provided support through its understanding of immigrant issues, language capacity, and cultural knowledge and expertise.
- Groundwork Somerville provided expertise in local food production and sustainable living.
- Green Streets Initiative provided experience around promotions of active transportation.
- Mass Farmers' Market provided expertise in starting, operating, and managing farmers' markets.
- A State Representative brought knowledge and understanding of state-level policies and potential implications for local-level work.

Additionally, key staff carried out the duties of HKHC and the SUS partnership, including the Project Director and Project Coordinator. The Project Director was involved with the partnership since 2009, and her role was to provide the Mayor with guidance on strategies for the SUS initiative. She was responsible for convening and facilitating SUS partnership meetings and funding mini-grants that were offered to local community-based organizations to implement healthy eating and active living programs and initiatives. At the end of the HKHC grant, the Director transitioned to a new position with the state working on obesity, and a replacement Director was hired to continue to work on SUS partnership activities.

The Project Coordinator was hired in 2011 as a multi-lingual staff leader who would be dedicated to working on healthy eating and active living efforts for the SUS partnership. The Coordinator worked closely with the

Director, supporting activities on the ground.

Organization and Collaboration

The partnership was comprised of approximately 35 organizations, primarily city departments and community-based organizations, but also included major universities, statewide organizations, school districts, and others. The partnership also received political support from the Mayor of Somerville, the District State Representative, the School Superintendent, and Board of Aldermen. SUS offered mini-grants to partners to work on specific projects as part of the HKHC initiative with special emphasis on engaging community residents.

“And then what the mayor has done is, he hasn’t limited the work to just the work the Shape Up Somerville staff can tackle, he’s really charged his other departments with incorporating the principles of Shape Up Somerville or healthy eating and active living in their work.” - Staff

Through the aid of several grants including Active Living by Design, Healthy Eating by Design, United States Department of Agriculture Growing Healthy Grant, Department of Education Professional Evaluation Program, and Tufts University-led SUS grant, the Somerville Health Department had either been the lead or a key player in childhood obesity prevention efforts. The health department created presentations on active transportation and healthy eating for community groups, built key partnerships with organizations such as WalkBoston and Green Streets Walk/Ride Initiative, and worked across both public health and planning disciplines to support partnership, promotion, policy, and physical changes.

See Appendix C for a list of all partners.

PARTNERSHIP FUNDING

During the second year of the project, the partnership utilized the status of the HKHC project (i.e., potential access to resources/influencing decision makers) to successfully appeal to new partners including Groundwork Somerville and The Welcome Project. Reciprocal benefits were achieved for both. The Welcome Project developed curriculum for English as a Second Language classes based on active living, healthy eating, and civic engagement.

The SUS partnership was able to leverage additional funds as a result of HKHC totaling, \$16,485,354 from several organizations, including Massachusetts Department of Public Health, Massachusetts State Transportation Agency, Center for Disease Control and Prevention Community Transformation Grant, Wal-Mart Foundation, the Harvard Catalyst, Cambridge Health Alliance, and other local organizations and foundations. In-kind contributions of staff time were significant from the City's Health Department Director, students, and interns.

Somerville was a recipient of a Community Transformation Grant, so the city provided resources for ongoing technical assistance to create and support an employee wellness policy for city employees. Although the SUS goals were not the focal point of this initiative, partners and former project staff will be sought out for funded leadership and technical assistance. This funding also provided resources to hire part-time staff to assist with evaluation tasks.

During the final year, some partners received small grants for related but targeted work that expanded HKHC activities to other population subgroups. For example, the Lesbian Gay Bisexual and Transgender Liaison Office collaborated with the Council on Aging for the Fit-4-Life project, and the National Collaborative for Childhood Healthy Weight worked with both Head Start and Cambridge Health Alliance. These two small projects expanded the HKHC work to populations beyond children.

For additional funding information see Appendix D: Sources and Amounts of Funding Leveraged.

COMMUNITY ASSESSMENT

The SUS partnership has been working on childhood obesity prevention work over the last decade. During this time SUS has collaborated with the Institute for Community Health to coordinate Body Mass Index data collection, management, and reporting for ongoing evaluation into program impacts among public school children in Somerville and to build literature on population-based change related to Body Mass Index ([see BMI Report](#)).

Active Transportation

The Green Line Design Team assessed how traffic should be modified around the proposed transit stations and what changes were needed to ensure that overall connectivity improves in the city. Zoning changes were made to accommodate a higher density in those neighborhoods with the specific intent of making those areas around the new stations much more walkable. Each station was unique, so development was tailored to the needs of each neighborhood, while taking into consideration varying elevation and the need for American Disabilities Act (ADA) accessibility. Some locations had room for new development, while others were more established and needed changes catered to their existing uses.

Parks and Play Spaces

Youth helped complete park assessments before renovation work started. These pre-assessments highlighted the contrast in the park environments before and after the renovations. This work had not yet started when the Albion Park design was in the works, but was added in current park projects.

The city listened to the voice of the community in determining priorities for park renovation. Groundwork Somerville Green Team compiled results from assessments and resident interviews regarding priority parks as identified by the City: Quincy Street Lot, North Street Park, Dilboy Park, Harris Park and Community Path (extending from Cameron Avenue to Cedar Street). Findings were presented to the City Board of Alderman and the Parks Department.

Farmers' Markets

With the support of interns and the Institute of Community Health, surveys and other data have been collected to better understand how to increase access to fresh fruits and vegetables through the farmers' markets. Another goal of assessment activities had been to identify ways to increase sustainability of the markets.

The partnership conducted a survey to discover what brought people to the markets and opportunities to improve the markets. For example, customers mentioned lines were too long, and the market committee was able to reconfigure the setup to alleviate the congestion and still be within the fire code requirements. This demonstrated both the importance of soliciting feedback from customers and the potential of low-cost changes that could improve the market experience.

Prior to starting the mobile markets, a survey was administered to determine where the mobile vending would be located, when it would be open, and what items would be sold. This informed the planning of the mobile market.

The partnership conducted farmers' market environmental audits at two locations to understand market characteristics (e.g., signage and access) along with fruit and vegetable characteristics (e.g., availability, quality, and quantity). See Appendix E for a full report.

- Both markets were open 1 day per week for 4 or more months of the year.
- The Davis Square Market and the Somerville Mobile Market both accepted Women, Infants and Children (WIC), Supplemental Nutrition Assistance Programs (SNAP), and Electronic Benefit Transfers (EBT) as payment options.
- The Davis Square Market offered the most variety of fresh fruits and vegetables (fruit n=8, vegetables n=22), Mobile Market offered 2 different types of fruit and 13 different types of vegetables.
- Prices ranged from \$0.50 per unit (e.g., watermelon, cabbages, and carrots per pound) to \$5.00 per unit (grapes and plums per bag/box).

PLANNING AND ADVOCACY EFFORTS

Community Outreach and Engagement

The SUS partnership developed an association with The Welcome Project during the second year after the Project Director was hired and there was project capacity to increase the partnership network. The Welcome Project worked mostly with new immigrant populations who lived primarily in East Somerville where there were many barriers to healthy eating and active living opportunities. Working with The Welcome Project included addressing issues important to new immigrants as well as increasing opportunities for healthy eating and active living. Developing a curriculum for English as a Second Language classes based on active living, healthy eating, and civic engagement elements, and training high school youth about interpreting health issues were two initiatives.

Healthy Kids mini-grant opportunities were available and structured as a way to engage partners in a meaningful and concrete way. Specific projects or elements were identified; then community partners received funds for implementation.

In collaboration with the Welcome Project, HKHC resources supported the development of an innovative English as a Second Language curriculum that used active living and healthy eating as the cornerstone of learning English. Unexpectedly, yet delightfully, this curriculum generated more enthusiasm and community engagement than anticipated. As the newest residents of Somerville learned English through lessons about accessing healthy food and active living opportunities in Somerville, they also became engaged in related local civic activities and took part in workshops on social determinants of health. Taking their civic responsibilities seriously, this group of immigrants shared their voices with key decision-makers as strong advocates for healthy communities through a successful request to meet with Mayor Curtatone to discuss barriers to healthy eating and active living. It is important to note that the impact of this English as a Second Language curriculum focusing on healthy eating and active living was ongoing, as it had also been adopted by many schools in Somerville.

City/Comprehensive Plan

Somerville residents, stakeholders, and city staff took part in a community planning process creating Somerville's Comprehensive Plan that included ongoing opportunities for community participation and feedback on public transit issues. During SomerVision workshops, participants were asked to identify community values that mattered most to them. The city created a visual SomerVision Word Cloud to show the value words in a unique graphic design highlighting the most popular words chosen by residents during the workshops.

Active Transportation

The State of Massachusetts had established a robust design process for the redevelopment of the Green Line that allowed for participation from a variety of stakeholders, including the Department of Transportation and Infrastructure, the Mayor's office, the Department of Strategic Planning and Community Development, representatives from the federal government, and representatives from the community. Community feedback was generated through a community charrette that was funded by an Environmental Protection Agency grant and used to develop a guiding document for design changes.

The Somerville Bicycle Committee co-led Somerville's successful application for recognition by the League of American Bicyclists as a Bronze Bicycle Friendly Community in 2011. Recommendations were then provided to Somerville on changes the city could make to become even more bicycle-friendly in the future and to compete for silver, gold, and platinum status. A main recommendation was to adopt a Complete Streets policy requiring various types of street projects to safely and equitably serve all users (e.g., bicyclists, pedestrians, transit riders, and motorists) as standard practice. Somerville Bicycle Advisory Committee reviewed models from top-rated Complete Streets ordinances and policies from other cities (e.g., Buffalo, NY and Cambridge, MA) to formulate template language from the Massachusetts Municipal Association and draft a Complete Streets ordinance for Somerville.

Parks and Play Spaces

The SUS partnership created outreach and engagement opportunities for residents of Somerville to get involved with planning and designing the parks and play spaces. At community meetings, interpretation services were provided to ensure participation was possible for all community members. Concerns about safety were consistently voiced by community members.

Neighborhood homeowners organized a “Friends Group” to take responsibility for some aspects of park maintenance and upkeep. They coordinated with the Department of Public Works to have yard waste picked up and mulch delivered, but took care of weeding and mulch spreading themselves.

Media/Promotions

Since the Mayor made the SUS partnership a priority, there was significant media coverage focused on the community-based obesity prevention work in Somerville, including:

- the Mayor’s participation on the Institute of Medicine’s Local Government Actions to Prevent Childhood Obesity report committee,
- the Mayor’s presentation on local obesity prevention initiatives during the plenary session at the Weight of the Nation conference,
- the Mayor’s presentation on Institute of Medicine Report to US Conference of Mayors Membership at a national meeting,
- the Mayor’s presentation on preventing obesity via built environment upgrades at the National League of Cities national conference,
- the Mayor’s joint presentation with Christina Economos at the Harvard Pilgrim Health Care Foundation event for Growing Up Healthy grantees,
- inclusion of SUS image portfolio in obesity-themed exhibition kiosk at the Museum of Science in Boston,
- a new PBS radio program, Innovation Hub, Let’s Move blog, Governing Magazine, and other local and regional media outlets.

Additional media coverage included: a 15-minute segment on PBS Need to Know television newsmagazine program, Men’s Health magazine article, winter farmers’ market covered by the Boston Globe, Boston Magazine, local media, two TV segments on Boston’s ABC affiliate, USA Today article, Mayor Curtatone blog posting on Boston’s NPR blog, Newsweek, CBS, and a National Public Radio program. Through the Mayor’s leadership, in 2010, Somerville received the Healthiest City in Massachusetts award from the Massachusetts Health Council, and Somerville was named one of the top ten most walkable cities in the United States.

Shape Up Somerville also collaborated with Fivi Health Networks to launch a city-wide health and wellness web portal to enhance awareness and access to available healthy eating/active living resources and opportunities. Resources included tracking and social networking tools for various fitness and eating activities, a searchable toolbar to find informative videos and blogs, walking and running routes in the community, other fitness opportunities, meal plans and recipes, and basic medical health information.

CITY/COMPREHENSIVE PLAN

The first comprehensive plan for the City of Somerville was undertaken with the intention for the plan to be a high-level framework for guiding the implementation of zoning changes or area-specific plans and upgrades in order to address current community needs, but also keeping in mind longer-term community priorities. The Community Corridor Planning Coalition formed to engage all levels of community members (i.e., residents, local businesses, public officials, and city staff) in planning for equitable and sustainable communities.

Policy, Practice, and Environmental Changes

The City of Somerville, Massachusetts Comprehensive Plan 2010-2030 (see [Somerville Vision Plan](#)) was created to incorporate active living and healthy eating design and implementation principles for the city. The plan was endorsed by Somerville Board of Aldermen and adopted by Somerville Planning Board in April 2012.

Implementation

In collaboration with the city, a three-year public participation process was undertaken to incorporate specific opportunities for community and interdisciplinary participation and input. Land use assessments were conducted during this process in order to create land use maps of Somerville to be incorporated into the city's first long-range plan. The hope was that the comprehensive plan would be used as a blueprint for land use planning in the city. The plan was and could continue to be utilized as a tool to advocate for various active living initiatives (e.g., pathways, connectivity between stations in neighborhoods, green spaces, and bikes). Community members were involved in a process of using these maps to identify transformational districts, or areas with a high potential for development, and highlighting those areas for zoning changes. The proposed plan had six specific goals to be achieved by 2030 (e.g., 50% of new trips taken by public transit, bike, or pedestrian means; 125 new acres of publicly accessible open spaces; 85% of new development in transformative areas to follow a predictable land use plan and safeguard neighborhood character; and 30,000 new jobs).

Since 2009, Somerville residents, steering committee, and city planning staff were engaged in a robust community planning process to create Somerville's Comprehensive Plan 2010-2030. After more than fifty meetings, visioning sessions, resident surveys, e-mail messages, public workshops, feedback showcase sessions, and ward- and neighborhood-based meetings, the final Somerville Vision plan was adopted. This long-range policy plan provided six implementation priorities (e.g., station area planning, sustainability programs, and zoning code overhaul) along with over 500 specific action steps to guide residents and relevant decision makers through individual projects.

Population Reach

The Comprehensive Plan targeted the entire City of Somerville, including local businesses, schools, city staff, and all residents (particularly those utilizing methods of active transportation).

Sustainability

The architects of Somerville Vision and City of Somerville recognized and advocated for ongoing study, planning and public discussion for both long-range goals and specific shorter-term small area projects. Although action steps and maps were presented, the comprehensive plan was created to be used as a tool for guiding decision making within capital projects, transportation investments, and future developments. Therefore, funding for such projects must be obtained to sustain momentum for these plans to take shape in the community. Access to funding from the United States Department of Housing and Urban Development Sustainable Communities grant helped to fund small area plans around the six Green Line stations in 2012.

The plan recommends five-year updates to be completed in order to review accomplishments and unanticipated changes in the community along with new goals and corresponding strategies and action steps to keep the plan moving forward. Funding for this review process will need to be obtained.

PARKS AND PLAY SPACES

Parks have long been identified as important assets in Somerville. A public park used to be considered an essential attribute of a vital Somerville, and there were parks that could be used as play spaces all over the city. Many of these spaces were since covered in asphalt, with limited, if any, play equipment available. The partnership worked to revitalize these existing play spaces and restore them to their potential.

Policy, Practice, and Environmental Changes

In 2009, the Open Spaces and Recreation Master Plan was updated designed to create strategies for expanding open space and recreational opportunities for increasing the number of users (see [Open Spaces Recreation Master Plan](#)). Building off of the newly revised master plan, the city purchased three properties between 2010 and 2011, and dedicated them to public open spaces. Renovations occurred at four parks (i.e., Albion Park, Grimmons Park, Zero New Washington Street, and Hodgkins-Curtin Park) and three playgrounds (i.e., Morse-Kelley, Quincy Street, and Dickerman) to respond to the demand for quality play spaces in those areas of Somerville.

In 2011, the city reached a three-year agreement with the Department of Conservation and Recreation that allowed the city to manage day-to-day and maintenance operations for the Dilboy complex (i.e., renovated stadium, swimming pool, auxiliary and little league fields, two tennis courts, a basketball court, a tot lot, and two parking lots). Efforts will ensure facility programming and usage is shaped by priorities geared toward sustaining this community recreation resource for Somerville residents.

Implementation

The Office of Strategic Planning and Community Development's Parks and Open Space Department contracted with Groundwork Somerville, a community-based organization, to conduct community and resident outreach activities during the planning and design of a neighborhood park. The youth were also trained as advocates for park improvements. The parks department benefited from community residents input and feedback that was incorporated into the revised master plan. As a result of this youth engagement, the community felt heard and felt stronger ownership over the parks. The parks department plans to continue this approach.



Source: Transtria LLC

Design

Typically, a park renovation took place over a two-year period with one year for assessment and design and one year for actual renovation. The city contracted with an outside engineering or landscape firm for completion of the park design. This placed liability outside of the Parks Department. The city awarded design contracts to local firms who were more likely to understand and invest in the needs of the community.

A site assessment was conducted to understand the location needs, particularly when the land was historically used for hazardous waste, abandoned houses, or old factories. Therefore, there was a need to determine what type of cleanup must take place to create a safe land for park development (e.g., soil remediation).

Decisions about parks and play spaces were based on available resources and the needs of the community. An assessment of nearby available resources was conducted to ensure duplication of play structures was not created unless the demand for it was present (e.g., a basketball court would not be added if a park down the street had a court). Green spaces were less expensive to develop and maintain than parks, but may not get as much use. A balance of creating both green spaces and parks was used. Often times a linear park would be cleaned up and created from land which was formerly industrial space and contained hazardous waste.

A population analysis including input from community representatives in the design process was conducted to

understand the population to be served by the space. For example, schools involved in the park design process sent homework assignments for the kids to write or draw their ideas for parks in their neighborhoods. SUS partnership continued to find new ways to engage community members in the design process. This ensured the park met the needs of the residents and created a sense of ownership and a desire for residents to help maintain and care for the parks.

Part of the design process was to establish a universal style for parks, which included a standardized bench, lighting style, light pole design, and signage with park regulations and the city seal. In the past, graffiti was an issue in some parks. Because some products were easier to clean (e.g., remove graffiti), this impacted the decision about park structures and finishes.

An important part of the park design was installing safety features. This included various types of lighting and park visibility from the perimeter. For example, when the parks were previously assessed, one of the auditors came across young teens participating in drug use. By adding light, the perception of illegal activity was minimized in the park. Additionally, security concerns were addressed at a park next to a housing authority by adding a fence around the perimeter. The perception of safety in the park increased; however, residents felt the park was not welcoming. The Parks Department was working with the housing authority to open the park up and create more access points. This should increase usage and safety.

Population Reach

Prioritization for renovation was determined by need and the politics of the administration (i.e., Aldermen and Mayor). Parts of East Somerville were prioritized because of their eligibility for Housing and Urban Development (HUD) funding or block grant funds because the parks resided in low to moderate income areas with a higher percentage of residents with English as the second language.

Population Impact

Park improvements stimulated neighborhood improvements. Homeowners around the parks improved their properties, and land value increased. Parks and green spaces may have had an impact on the community beyond increasing physical activity and raising property values.

Challenges

Funding was an ongoing challenge for improvements to parks and play spaces. For example, when planning began for renovation of Albion Park, most recent census data defined the neighborhood as a HUD-qualified area, which ensured considerable grant funding could be used for park renovation. After the next census, the neighborhood profile changed, and the HUD-related funding was no longer available. The city initially decided to delay the renovations, but after receiving ample negative community feedback through the Aldermen and the Mayor's office, city funding was allocated to complete the project.

Lessons Learned

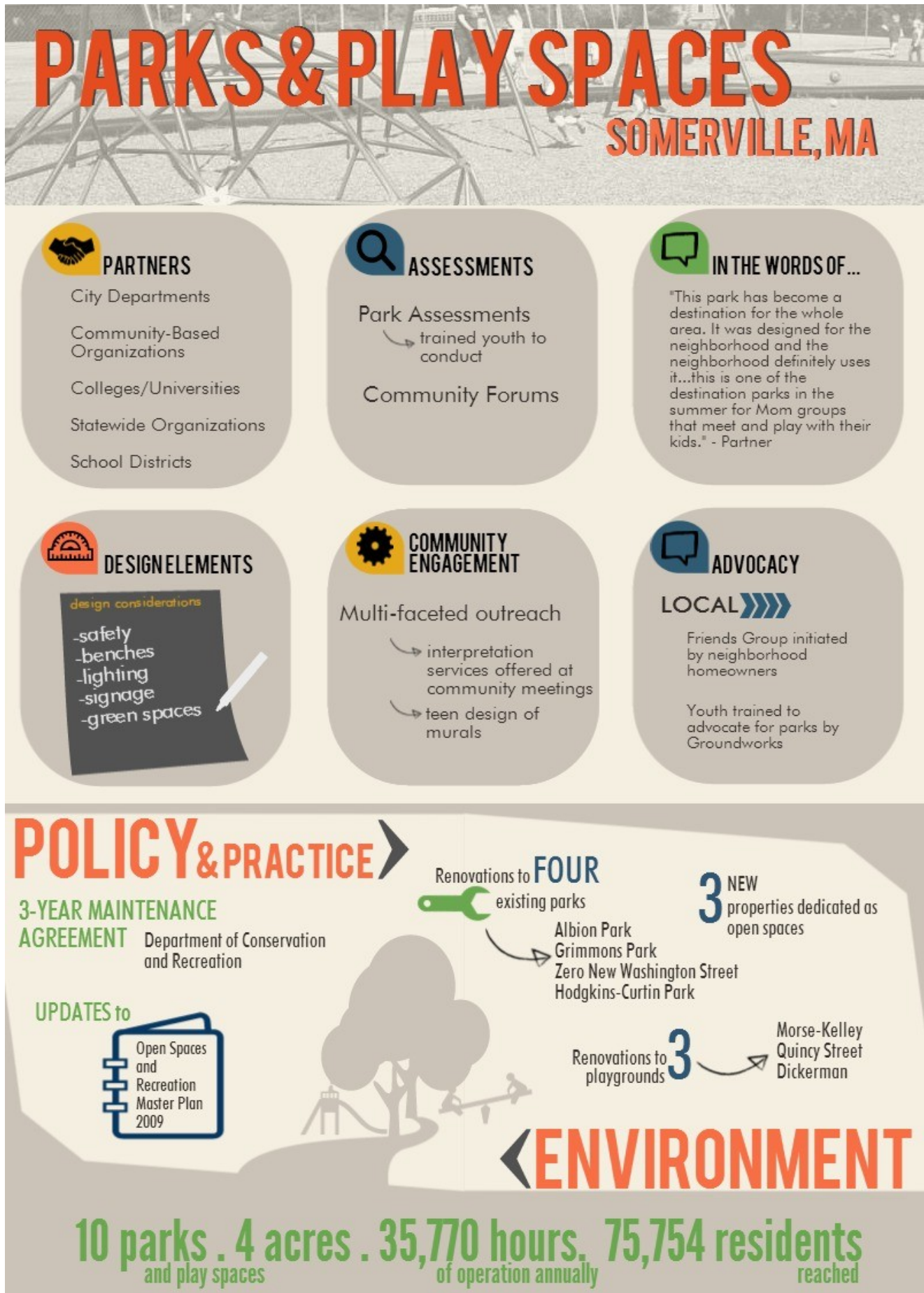
Other city departments (e.g. planning and public works) were impressed and excited about the benefits of partnering/contracting with Groundwork Somerville to conduct outreach and engage community residents, particularly in disadvantaged and immigrant communities. The mayor encouraged expansion of this youth engagement approach beyond the parks. Additionally, a multi-faceted outreach process was important for reaching all segments of the community. For example, the city worked to connect with adolescents and teens by welcoming their collaboration on a mural at Dickerman Park.

Sustainability

The SUS partnership continues to find ways to maintain a strong working relationship with the Department of Public Works, because the department will be maintaining the park. The partnership also continues to seek funding to support community outreach and equitable access to Somerville parks. In 2012, \$900,000 was obtained from state grant funding from the Department of Conservation Services for the Chuckie Harris Park and the North Street Veterans Playground.

For additional information, see Figure 3, Parks and Play Spaces Infographic.

Figure 3: Parks and Play Spaces Infographic



FARMERS' MARKETS

The Shape Up Somerville partnership worked to turn the farmers' markets into community gathering places, inclusive of various cultural traditions.

Policy, Practice, and Environmental Changes

Two new markets were created in Somerville (i.e., winter market and mobile market), EBT terminals were added to four markets, and staff were hired to run the EBT terminals. Additional policy, practice, and environmental changes included:

- the development of a winter farmers' market at the Center for Arts at the Armory, and the institutionalization of two staff positions (i.e., Executive Director and Accountant) to support operations.
- the expansion of the mobile market from one housing authority location to six locations: a second public housing location, a neighborhood school, the Somerville Council on Aging Activity Center, and two municipal buildings. The market was also renamed to the Somerville Mobile Farmers' Market.
- the installation of EBT terminals at Union Square and Davis Square Farmer's Markets in 2010 and 2011 through grants from the Department of Agriculture and Department of Transitional Assistance.

Complementary Programs/Promotions

All four farmers' markets in Somerville had a match program (e.g., double dollars) to increase affordability of produce for lower-income families who were EBT/SNAP/WIC eligible. The Somerville Mobile Farmers' Market also offered a match to Mystic Housing Authority residents, regardless of eligibility for other nutrition assistance programs.

Additionally, family-friendly spaces and fun food-related events (e.g., Grown in Somerville, Bacon Takedown, and Cupcake Camp) engaged residents in the market. These events drew in large crowds that bought out some retailers. Access to healthy food and safe places for active living formed the foundation for English as a Second Language curriculum, which led to civic engagement of immigrant populations, a meeting with the Mayor, a workshop on creating systems change and social determinants of health, and support for starting a winter mobile farmers' market.

Implementation

Market personnel varied by location and partners. Somerville Mobile Farmers' Market was staffed with a Market Manager, one to two farm staff, and a resident to run the cash register. Residents also volunteered to interpret immigrant languages. The Davis Square Farmers' Market staff included a paid Market Manager and an intern. The intern position was paid through Massachusetts Farmers' Markets in June 2010 to run the EBT terminal. Winter Farmers' Market staff included a Market Manager, a Market Assistant, and an Armory staff member. Community volunteers provided music, supervised games for children, and directed parking. Youth volunteers helped bag and load groceries.

Market staff were trained in cultural competency in order to better understand behaviors around shopping and purchasing food for certain low-income populations. For example, it was common practice for Haitians to haggle or barter over prices; it was not acceptable to pay the posted price. Other skills needed to work in a farmers' market included: familiarity with business and accounting, EBT machine training, skills to simultaneously record sales and complete other customer service tasks, ability to be patient, ability to work long shifts, ability to do manual labor, ability to drive a box truck, customer service skills to maintain partner relations, and knowledge of other languages.

A food security coalition was established renaming the Community Action Board for Food Security to the Food Security Coalition. The coalition was a large organization of local nonprofits that addressed barriers to food security for Somerville, Cambridge, and Medford residents, especially vulnerable populations, and sought solutions. The coalition formed a Farmers' Market Subcommittee to develop and implement an EBT outreach plan.

Permits were not required to sell fresh, uncut produce; however, without a commercial kitchen certification, farmers were unable to prepare, package, and slice produce. Responsibility ultimately fell to the farmers to

ensure they were properly certified, but they asked for help from the market managers. A good market manager ensured all the vendors were following regulations and properly certified.

When the Somerville Mobile Farmers' Market started, there was a lot of produce left over even after strong sales at the Mystic Housing Authority. The mobile market went to City Hall and recognized that about 20-30 people came to the mobile market in a thirty-minute period of time. The farmers saw the potential in expanding the mobile market and decided to add two city sites (i.e., Department of Public Works and City Hall) to the Thursday mobile market route. The mobile market had since expanded to six different locations.

Demand for Farmers' Markets

In 2011, market organizers and customers felt a deficit when the summer ended and farmers' markets were closed. This led to the establishment of the Winter Market in 2012, which increased the farmers' market season from 12 to 28 weeks. Farmers started greenhouses to grow year round, and in Somerville, a farmer had become a sustainable source of income again. Since the launch of the Winter Farmers' Market, other communities asked about how to start their own, Shape Up Somerville was leading the way.

Nutrition Assistance Programs

Adding EBT to the Somerville markets was a collaborative effort of Shape Up Somerville, the Center for the Arts, the Department of Natural Resources, and Union Square Main Streets. In 2010, Union Square Farmers' Market and Davis Square Farmers' Market secured EBT terminals as a result of a state grant to support EBT. It cost approximately \$1,500, and there were additional expenses from maintaining the market bank account, transaction fees, purchasing tokens, staffing the machine, providing outreach to increase usage, and sustaining the match program.

Each individual market had its own token system which was confusing for residents, especially non-English speakers. The partnership hoped to establish a universal token system within the city allowing customers to purchase and use tokens at any farmers' market in Somerville. This would also allow the creation of a consistent message to be used in advertising the markets, which would potentially increase overall EBT utilization.

Since EBT cards were used like debit or credit cards, the stigma associated with using nutrition assistance programs was reduced. It was still a barrier for WIC recipients, since WIC only existed in paper form. Also, not all vendors accepted WIC. For those that did, it was only "seasonally" accepted during the summer, so it could not be used at the Winter Farmers' Market.

Additionally, the mobile market had set up a sliding price scale that allowed regular prices at the city sites and reduced fees at the lower-income sites (i.e., housing authorities). Several youth at the market were engaged to share ideas for designing a mural on the mobile market. Their ideas informed the work of a graphic designer, who worked closely with the SUS partnership.

Population Reach

The Somerville farmers' markets targeted affluent residents, city staff, and low-income populations through SNAP benefits or the double dollars program. Specifically, the winter market expanded the buying season to allow all residents to participate indoors, and the mobile market targeted a diverse group of residents with the six different selling locations, dates, and times.

Population Impact

One unintended benefit of the partnership's work to expand the mobile market to city locations was the city's launch of an employee wellness initiative. In addition to convenient and affordable access to local produce, employees were invited to take part in healthy eating and activity promotion activities associated with SUS strategy areas, such as visible signs on stairs to mark calories burned.

Challenges

Financial record keeping was a challenge with the mobile market because of the sliding scale approach reduced the cost at lower-income sites and increased the costs at other sites.

State and City regulations prevented people from eating harmful food, but it provided extra paperwork for the farmers. For example, farmers used to bring cider until regulations notified farmers of the need to obtain a separate permit. Due to the time it took to get a permit, it was not advantageous to sell cider for a few market days.

Expanding Supplemental Nutrition Assistance Program (SNAP) benefits to an immigrant community was challenging, because many were not eligible for benefits due to their non-citizen status. System adaptations were made to extend the matching subsidy (double dollars) to consumers who were not receiving SNAP, but this did not address the larger system issue of excluding non-citizen status residents from being eligible for nutrition assistance benefits.

Lessons Learned

Giving the markets a cultural orientation helped incorporate them into the community and ensured residents and customers viewed the markets as gathering places and not just functional places to shop. The establishment of markets in each area of the city allowed more profitable markets in more affluent neighborhoods to subsidize participation in lower-income areas. This increased access and affordability. Also, farmers were considering ways to continue to diversify their portfolios by creating other sales opportunities (e.g., Community Supported Agriculture).

Sustainability

The market was able to price fruits and vegetables comparable with the most affordable supermarkets in the Somerville because Enterprise Farm, a state-based farm, agreed to sell its produce at wholesale. In 2012, the winter market was fully funded by HKHC funds. The Armory incorporated the market in their structure, which gave it a permanent home. In 2012, a cost sharing model and sustainable budget model was developed in collaboration with the Armory. Market operations were institutionalized with funding for two positions. Other market duties were shared by Armory and SUS staff.

The expansion of the Somerville Mobile Market showed a growing demand for fresh produce in housing authority locations as well as city buildings. As the farmers continued to succeed and felt more invested in the markets and in the community, their desire to participate in sustaining the markets and giving back to the community increased.

ACTIVE TRANSPORTATION

Active transportation was a high priority for many people in Somerville, as indicated by its history of successful transportation projects and goals set forth in the proposed city comprehensive plan, including Complete Streets policies and pedestrian and bike infrastructure improvements.

Policy, Practice, and Environmental Changes

The Somerville Complete Streets Ordinance was endorsed by the Mayor and was in the process of being considered by the Somerville Board of Aldermen at the end of 2013. The policy, practice, and environmental changes included:

- A new ordinance that required space for bike and car parking in the Corridor Commercial District and Transit Oriented District.
- Between 2009 and 2012, 22.5 miles of bike sharrows/routes, 5.7 miles of bike lanes, and 0.8 miles of off-street paths were installed.
- First ever on-street bicycle parking in Somerville metro area was installed (50 Powder House bike racks, u-shaped racks with Somerville symbol, 70 bike rings, and 10 bike corrals).
- A Bikeshare program with eight bike rental sites located in Somerville was launched in August 2012.
- In 2009, establishment of a city snow removal committee housed within the health department to ensure sidewalks were cleared and safe for walking during winter months.
- A ground breaking occurred in April 2012 for infrastructure improvements at Assembly Square transit station to create a mixed use and walkable environment for Somerville residents.

Complementary Programs/Promotions

Currently, five schools participate in the Safe Routes to School program, which was initiated on a school-by-school basis. For some schools, parents were the instigators in establishing Safe Routes to School, while in other schools, the principals themselves introduced the program. The original vision was one parent walking with 25 kids in a very orderly way. The reality proved to be a much bigger event with participation of many parents, younger kids in strollers, and pets. Safe Routes to School was more than just getting kids to school; it was also a time for parents to socialize and take a walk themselves. It was a community-building experience.

At Healey School, a steering committee was established to plan the Walk/Ride Day and Safe Routes to School programs in 2009. Parents participated in the Walk/Ride to School Day program by volunteering, completing a survey, and assisting an intern with developing a guidebook. Additionally, Somerville Safe Routes to School maps were updated, published, and circulated for all elementary schools in the district.

Cycle Kids, a non-profit organization based in Cambridge, was working with Somerville schools to promote active transportation to and from school. This group provided an eight-week bike safety training during PE class. Staff members trained the PE teachers and invited other bike advocates and police to participate in the classes, which were formally part of the fifth grade curriculum. Cycle Kids received third party funding from the Wheezy Foundation along with in-kind support from the city. The Wheezy Foundation also provided funding for bikes for each school to keep and establish an inventory of bike equipment.

Implementation

In 2009, the State of Massachusetts implemented a transportation reform law aimed at streamlining operations, sharing resources, and reducing costs. This law established a Healthy Transportation Compact that required the use of best practices through coordination of land use, transportation, and public health policy to achieve positive health outcomes. The Healthy Transportation Compact was co-chaired by the Secretary of the Executive Office of Health and Human Services and the Massachusetts Department of Transportation, the Commissioner of Public Health, and three other members. This transportation reform law instructed the Healthy Transportation Compact to institute the use of health impact assessments for planners, administrators, and developers to understand the effect of transportation projects on public health and

vulnerable populations.

The Somerville Bicycle Committee co-led Somerville's successful application for recognition by the League of American Bicyclists as a Bronze Bicycle Friendly Community in 2011. Recommendations were provided to Somerville on changes the city could make to become even more bicycle-friendly in the future and to compete for silver, gold, and platinum status. A main recommendation was to adopt a Complete Streets policy requiring various types of street projects to safely and equitably serve all users—bicyclists, pedestrians, transit riders, and motorists—as standard practice. Somerville Bicycle Advisory Committee reviewed models from top-rated Complete Streets ordinances and policies from other cities (e.g., Buffalo, NY and Cambridge, MA) to formulate template language from the Massachusetts Municipal Association and draft a Complete Streets ordinance for Somerville. The Somerville Complete Streets Ordinance was endorsed by the Mayor and considered by the Board of Aldermen in 2013.

A collaboration with Hubway and Metro Area Planning Council helped to launch the Bikeshare program. Users rented a bicycle for a point-to-point trip by retrieving a bike at any station and returning it to any station. Users signed up as one-day, three-day, or annual members. The first 30 minutes of each ride were free, with a tiered pricing schedule for rides over 30 minutes. Bike rental services were offered through mid-November. Alta Bike Shares provided discounts and incentives to Hubway users. An evaluation study was planned to collect utilization data to inform subsequent year budget expectations.

Infrastructure improvements were necessary for redevelopment at the Assembly Square transit station with the extensive amount of commercial, retail, housing, hotel, entertainment, and parkland investment in the station area. Federal Realty Investment Trust broke ground in April 2012 to build 1.75 million square feet of commercial space, 600,000 square feet of retail space, and 2,100 new housing units adjacent to the new station. New parkland, a hotel, and an entertainment complex were components of the plans. Shape Up Somerville partners and the Mayor were involved in planning the transit station.

Population Reach

The active transportation efforts targeted the entire City of Somerville, including local residents utilizing public transportation, bicyclists, pedestrians, and businesses.

Population Impact

There were nearly three times as many residents in Somerville commuting by bicycle as of 2009 (5%) compared to 1990 (2%) and 2000 (3%).⁷ Even more residents cycled on a daily basis for educational purposes, to run errands, and for enjoyment. Additional information about bicyclist and pedestrian activity started being collected by the City and Somerville Bicycle Committee through a multi-year bicycle and pedestrian counting project to better understand how transportation choices and preferred routes were changing. The Somerville Bicycle Committee worked with the Mayor's Office of Strategic Planning and Community Development to conduct an annual bicycle and pedestrian census. Volunteers were coordinated to count the number of cyclists, pedestrians, joggers, and other users on city streets and sidewalks for one peak morning hour and one peak evening hour at 36 intersections sometime during the late fall season. During the annual count in September 2012, 6,812 cyclists were observed throughout the city, a 46% increase from Fall 2011 total cyclists and 56% increase from Fall 2010. Full information on these counts can be found on the city's [website](#). The annual count identified a road that had increase in usage after it was striped, while a parallel road without striping suffered a 22% decrease in usage.⁸

Challenges

A few challenges were identified throughout the multi-tiered active transportation enhancements. There was staff turnover within city departments; therefore, new relationships needed to be formed and, in some cases, the institutional memory of transportation projects was lost.

The government structure of the Commonwealth of Massachusetts presented certain challenges to achieving the goals of the SUS partnership, particularly those related to the expansion and development of the Green Line and Orange Line of the T (the common name for Boston's subway and commuter rail system). The state had control over all transportation projects, and decisions and funding for such projects were generated at the state level. For example, a city could not levy a tax to raise capital for a transit project.

It was a challenge to keep enough parents involved with Safe Routes to School programming. When only a few parents participated, they eventually were burned out. Several champions were needed to maintain interest and participation in walking and biking to school.

Lessons Learned

When Safe Routes to School first started in Massachusetts, participation was generated at the school district level, and superintendents were responsible for enrolling schools in the program. This was a challenge due to variation in interest and commitment across schools in the district. The process changed, and enrollment was placed at the school level, which made it easier to generate interest in and support for participation.

Sustainability

There was a strong, positive reaction to the increased availability of bike parking, and some businesses asked how they could get more bike parking. Ongoing maintenance of the active transportation environment will continue to be a priority for the City of Somerville. For example, regular maintenance includes repainting over 700 sharrows throughout the city.

The Somerville Bicycle Committee planned to participate in the Annual Interdepartmental Bicycle Initiatives Meeting with the city departments (i.e., Department of Public Works, Police Department, Traffic and Parking, and the Mayor's Office of Strategic Planning and Community Development) to review accomplishments of the previous year, priorities for the coming year, and other potential initiatives. This meeting had previously demonstrated success at bringing together multiple departments for integrating infrastructure projects.

The Federal Highway Administration and Massachusetts Department of Transportation set aside funding for the reconstruction of Beacon Street. Working with the City of Somerville, the intent of the project was to design a state-of-the-art roadway that increased the access, safety, and mobility for all transit modes in the corridor.

Despite these challenges and the uncertainty of when the Green and Orange Line projects will be finished, there is assurance that completion will occur due to legal obligations of the state. The Conservation Law Foundation filed a lawsuit that established a required extension of the Green Line based on the Clean Air Act, and likely will sue again if work does not commence. While other projects were done to mitigate compliance with the Clean Air Act, the issue of fulfilling requirements of the State Implementation Plan would remain. Therefore, these projects will move forward, although the timeline has been pushed back to 2018, and the actual start date is unknown. The state established a steering committee to explore the potential of completing the project in installments with benchmark goals stretching beyond the original projected timeline to make the project more feasible.

RESTAURANTS — SHAPE UP APPROVED

Shape Up Approved restaurant campaign started as a collaboration with the Shape Up Somerville partnership and The Welcome Project's restaurant program, which was aimed at supporting immigrant restaurants in Somerville. All of the participating eateries underwent menu analysis and implementation of signage to become part of the Shape Up Approved program.

Policy, Practice, and Environmental Changes

Over 40 restaurants participated in the Shape Up Approved healthy restaurant initiative. In 2010, the initiative grew from 26 to 36 participating restaurants and added menu analysis and point of purchase prompts to 21 restaurants. Signage was installed in all restaurants participating in Shape Up Approved. Healthy kids menus were developed and implemented at two restaurants.

Complementary Programs/Promotions

Shape Up Approved teamed with local partners to organize events and promotions to increase awareness of restaurants participating in the restaurant initiative. In 2012, they co-sponsored the East Somerville Foodie Crawl with East Somerville Main Streets for promotion of participating restaurants. This event also encouraged other restaurant owners to serve approved dishes. Shape Up Approved menus were posted at each participating restaurant and were featured on the tasting tour of the East Somerville neighborhood. A Facebook page was created to present information about the program at an Inspectional Services Division meeting. This event helped to secure 12 additional restaurants to participate in the Shape Up Approved healthy restaurant initiative.

The Somerville Arts Council, located in the culturally diverse neighborhood of Union Square, created an ethnic cookbook featuring over 25 recipes from neighborhood restaurant owners and a local restaurant, market, and food producers guide in Spring 2012.

The Somerville Bicycle Committee organized a Somerville Tasting Bike Tour through the squares of Somerville at six restaurants in September 2012. While 25% of fee proceeds covered food costs, the majority of funds benefited The Welcome Project. All riders received a \$10 incentive card to use at local immigrant-owned restaurants. This bike tour was organized to immediately precede another bike event, SPOKES 2012, a Somerville bike festival held in Union Square Plaza offering bike riding, repairs, and other bicycle culture.

Implementation

Initial contact was made with restaurant store owners to gauge participation in the Shape Up Somerville Approved program. Then, a dietician conducted a menu analysis to understand current healthy options available and opportunities to create more healthy options. The restaurant owner and/or chef was consulted to discuss the results of the menu analysis and opportunities to offer healthier options. Finally, a list of approved items was identified and signage was tailored to denote the healthy items on the menu. Throughout the implementation process, SUS staff frequently checked-in with the restaurant owners to ensure his/her needs were being met through the program and followed up a few months after implementation to understand satisfaction with the program.

In 2010, new requirements for the Shape Up Approved menu were categorized by working with individual restaurant owners to identify and highlight healthy substitutions that fit within individual restaurant menus. Institute of Medicine Nutrition Standards for Schools were selected for trans-fat and sodium guidelines. National Heart, Lung, and Blood Institute guidelines on portion size were selected. Shape Up Somerville Director and School Food Service staff presented guidelines to approximately 90 food retail establishments during an annual informational meeting for food establishments.



The Shape Up Somerville Approved requirements were revised to be more customer friendly through increased visibility and the way in which healthy items were identified. Some restaurants preferred to write the menu themselves daily.

Weekly staff meetings occurred with three dedicated staff to discuss progress and updates regarding the Shape Up Approved Restaurant Campaign. In addition, a restaurant database was developed to track the status of participating and potential businesses, including main point-of-contact and signage visibility. Staff also collaborated with a graphic designer to develop two new signage concepts tailored to the two main restaurant types participating in the program.

Population Reach

The Shape Up Somerville Approved restaurant program targeted families and individuals eating in restaurants as well as businesses. Through the more recent partnership with The Welcome Project, specific emphasis was placed on the removal of cultural barriers to target all individuals regardless of race, ethnicity, language, and income.

Challenges

There were challenges dealing with some smaller local restaurants who perceived the project was resource intensive for the business owner. However, through relationship-building efforts by Shape Up Approved staff and the new partnership to co-brand with The Welcome Project initiative, they had more success working with smaller local restaurants. Because the changes promoted through Shape Up Somerville were not exact, or precise changes, but dependent on each restaurant's menu, each restaurant was unique and needed to be treated accordingly. Language (e.g., signage and menu labels) and cultural barriers needed to be addressed during menu development especially when working with local immigrant-owned businesses. The Shape Up Approved staff learned to compromise with restaurant owners/chefs regarding menu options even if the nutritional content did not meet an ideal standard.

Lessons Learned

Culturally competent staff was important to approach, recruit, and work in a hands-on capacity with local chefs and restaurant owners in lower-income and multi-cultural communities.

Sustainability

There was a lot of support from residents and local businesses for the Shape Up Somerville Approved program. The SUS partnership intends to continue to expand the program to include more restaurants and offer healthy foods to all residents in Somerville.

OTHER STRATEGIES

Zoning Upgrades

The Shape Up Somerville partnership was integral in the passing of zoning upgrades in the underserved Winter Hill neighborhood that promoted mixed-use development and provided protections for the existing supermarket site. Zoning regulations promoted walkability by encouraging first-floor retail establishments that activate the street and discouraging big boxes and large retail stores. Specifically, the design guidelines encouraged stores to have street frontage access, incentives for small businesses, and mixed-use development (i.e., residential living above retail stores). The zoning upgrades were designed to work in collaboration with a streetscape improvement project on lower Broadway that will reduce the road from four lanes to two lanes with wider sidewalks and extensive pedestrian and bicycle facilities, ultimately encouraging active transportation methods. Additionally, the zoning policy language encouraged the local fresh food markets and discouraged the regional big box establishments from being developed (see [zoning document](#)).

City Healthy Vending

Shape Up Somerville worked with city and school department stakeholders to create a healthy vending policy. The city sent out a request for proposal for a vendor to use the new Massachusetts Guidelines for Competitive Food in Schools (see [guidelines](#)). A vendor was selected who specialized in healthy foods. The vendor negotiated increased flexibility with nutrition guidelines in non-school locations. There were some delays with implementation of the new healthy guidelines because the vendor had difficulty identifying a local distributor. City locations were identified for the new healthy vending machines including a high school, central library, City Hall, City Hall Annex, and Traffic and Parking Department. The ice rink voluntarily upgraded its vending machines to offer healthier choices due to changes in city-wide purchasing practices. Product promotion was addressed in effort to prevent a drop in sales within different settings (e.g., city employees, students, residents, traffic, and parking).

SomerStreets

The City of Somerville's Open Streets initiative, SomerStreets, fostered community involvement and active living by closing a section of roadway and offering active, family-friendly programming along the route. Mayor Curtatone sent a city staff person to Bogota, Colombia to observe a similar event in person and bring back ideas to Somerville.

The SomerStreet events were usually one to two miles long and featured local business, set up vendors and booths, hosted physical activity programming, and provided other entertainment (e.g., music). During the first year of implementing SomerStreets, the event was held on Saturdays. This was not a popular option among Somerville residents and businesses; therefore, the second year it was moved to Sundays. Key organizations such as East Somerville Main Streets helped to organize community planning sessions to gather residents' ideas for event programs.

SUSTAINABILITY OF THE PARTNERSHIP AND INITIATIVE

The restructuring of the Shape Up Somerville Taskforce and installation of the Shape Up Somerville Steering Committee were critical vehicles for moving the HKHC policy effort forward. The steering committee is designed to bring all city and community decision makers together to set the vision and direction for the initiative, thereby increasing buy-in and involvement of decision makers at all levels and ensuring even greater success of healthy eating and active living work.

Although the Project Director was replaced during the final year of project activities, no major challenges within the lead agency, overall partnership, or specific partners were noted. The former Project Director accepted a position with the State Department of Public Health to continue work on active transportation issues at the state level.

Two important community partners (Groundwork Somerville and The Welcome Project) were recruited during the HKHC initiative and will continue to provide ongoing collaboration in the future. City and community partner collaboration was a big focus and contributed to much of the success for the SUS partnership throughout HKHC.

Two staff positions, the HKHC Director and Coordinator, were fully incorporated into the city government appropriations structure. Historically, a Bike/Ped Coordinator position was incorporated into the city budget. Overall, three staff positions currently exist to continue supporting the healthy eating and active living initiatives of HKHC.

An administrative staffing change to the Director of School Food Service position during the time period in which new nutrition guidelines were being implemented could have been challenging for HKHC project leaders. However, no transition difficulties were expected or experienced. This demonstrated the extent to which cooperative working relationships are ingrained within the school food service arena and SUS to routinely accomplish their work.

The steering committee discussed different sources of opportunities for the partnership to work together. This outcome might point toward continuing to work further within the specific HKHC strategies or it might point toward a completely different direction. The continuation of partnership activities will not be formally or informally led by the city, but it will be about community partners and the city working together, or even community partners working together and maybe not needing the city as much.

Future Funding

The partnership has already applied for funding through the Wal-Mart Foundation. This additional funding will provide opportunities for department heads to organize technical assistance trainings around strategies to make sure that the city is achieving equity around healthy eating and active living opportunities. Additionally, the partnership is collaborating with Cambridge Health Alliance to apply for American Heart Association funding for \$5,000 that will support project-related initiatives. Specific funds were be directed toward extending project initiatives, including: funding from the Department of Public Health for a health equity mitigation grant for East Somerville (\$20,000 per year continuous) and the Community Transformation Grant (\$60,000 per year to a partner agency). Approximately equal amounts will support the Mystic Market expansion and the Shape Up Approved program (e.g., Nutritionist, food demonstrations, signage, mini-grants, subsidized shares from Enterprise Farm).

The economy and strong competition for grants and other funding opportunities have presented challenges when seeking additional resources. A representative with Somerville Health Foundation involved with mini-grant awards recommended that Somerville develop a funding structure solely to fund healthy eating and active living initiatives.

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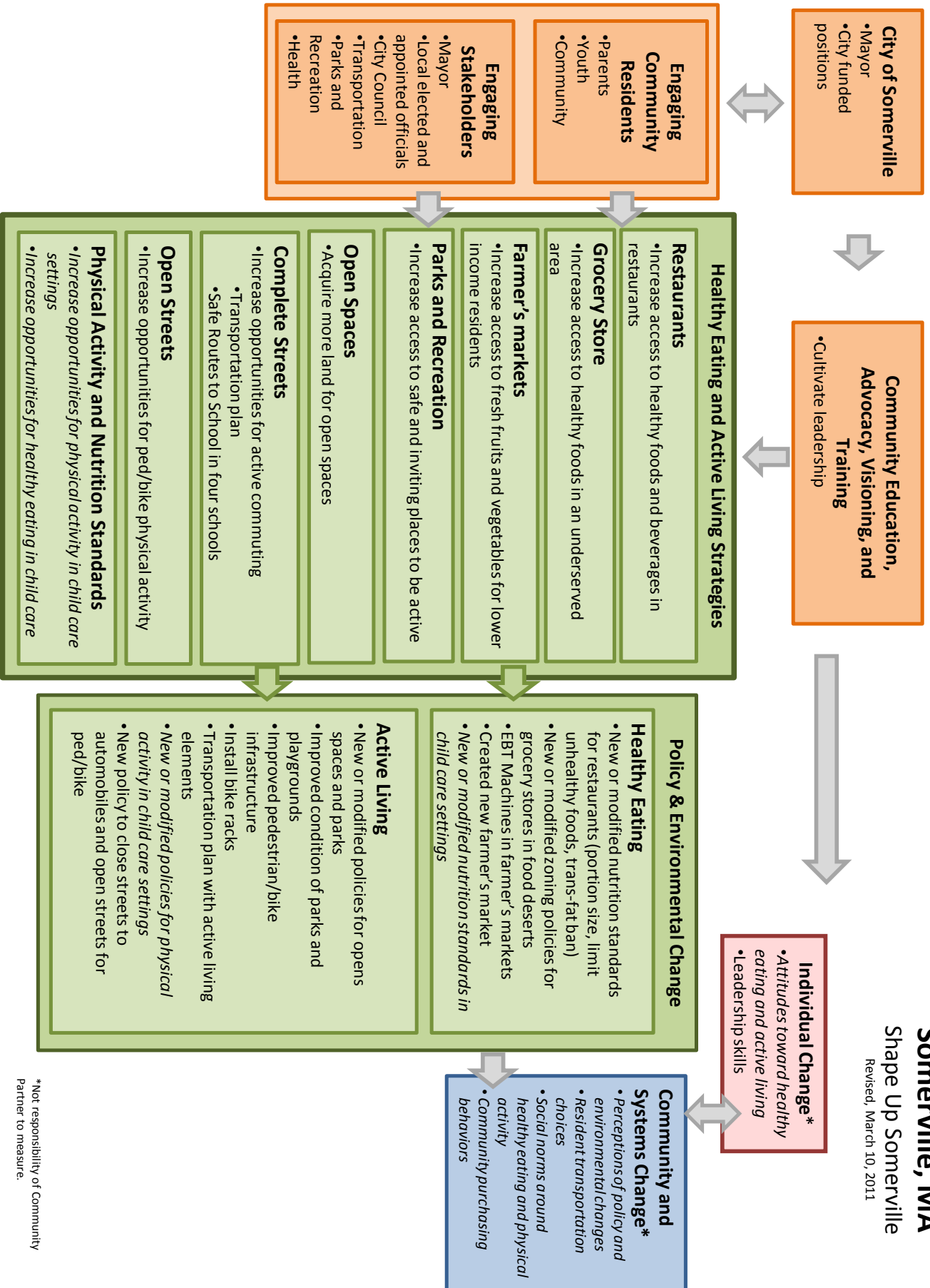
APPENDIX A: SHAPE UP SOMERVILLE EVALUATION LOGIC MODEL

In the first year of the grant, this evaluation logic model identified short-term, intermediate, and long-term community and system changes for a comprehensive evaluation to demonstrate the impact of the strategies to be implemented in the community. This model provided a basis for the evaluation team to collaborate with the Shape Up Somerville partnership to understand and prioritize opportunities for the evaluation. Because the logic model was created at the outset, it does not necessarily reflect the four years of activities implemented by the partnership (i.e., the workplans were revised on at least an annual basis).

As noted previously, healthy eating and active living strategies of Shape Up Somerville partnership included:

- **City/Comprehensive Planning:** The first comprehensive plan for the City of Somerville designed to be a high-level driving document for implementation of zoning changes or area-specific plans and upgrades to create access to active transportation and healthy food opportunities.
- **Parks and Play Spaces:** The Open Spaces and Recreation Master Plan was revised, and parks and play spaces were identified for development and renovations to improve opportunities for physical activity.
- **Active Transportation:** To further support active transportation through zoning and infrastructure changes, the SUS partnership aimed to support a pedestrian- and bicycle-friendly community.
- **Farmers' Markets:** The Farmers' Market program expanded to include two new markets (i.e., mobile market and winter market). The mobile market supports six locations, and all markets accept nutrition assistance programs.
- **Restaurants:** The Shape Up Approved healthy restaurant initiative enrolled 40 participating restaurants and added menu analysis and point of purchase prompts to 21 restaurants. There was a strong focus on supporting immigrant restaurants through a partnership with The Welcome Project.
- **Other Strategies:** The SUS partnership worked on a healthy vending policy for municipal buildings, created an open streets event (SomerStreets), and revised zoning policies for an underserved neighborhood (Winter Hill).

APPENDIX A: SHAPE UP SOMERVILLE EVALUATION LOGIC MODEL



Somerville, MA
 Shape Up Somerville
 Revised, March 10, 2011

*Not responsibility of Community Partner to measure.

APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS

Partnership and Community Capacity Survey

To enhance understanding of the capacity of each community partnership, an online survey was conducted with project staff and key partners involved with the Shape Up Somerville partnership during the final year of the grant. Partnership capacity involves the ability of communities to identify, mobilize, and address social and public health problems.¹⁻³

Methods

Modeled after earlier work from the Prevention Research Centers and the Evaluation of Active Living by Design,⁴ an 82-item partnership capacity survey solicited perspectives of the members of the Shape Up Somerville partnership on the structure and function of the partnership. The survey questions assisted evaluators in identifying characteristics of the partnership, its leadership, and its relationship to the broader community.

Questions addressed respondents' understanding of Shape Up Somerville in the following areas: structure and function of the partnership, leadership, partnership structure, relationship with partners, partner capacity, political influence of partnership, and perceptions of community members. Participants completed the survey online and rated each item using a 4-point Likert-type scale (strongly agree to strongly disagree). Responses were used to reflect partnership structure (e.g., new partners, committees) and function (e.g., processes for decision making, leadership in the community). The partnership survey topics included the following: the partnership's goals are clearly defined, partners have input into decisions made by the partnership, the leadership thinks it is important to involve the community, the partnership has access to enough space to conduct daily tasks, and the partnership faces opposition in the community it serves. The survey was open between December 2012 and April 2013 and was translated into Spanish to increase respondent participation in predominantly Hispanic/Latino communities.

To assess validity of the survey, evaluators used SPSS to perform factor analysis, using principal component analysis with Varimax with Kaiser Normalization (Eigenvalue >1). Evaluators identified 15 components or factors with a range of 1-11 items loading onto each factor, using a value of 0.4 as a minimum threshold for factor loadings for each latent construct (i.e., component or factor) in the rotated component matrix.

Survey data were imported into a database, where items were queried and grouped into the constructs identified through factor analysis. Responses to statements within each construct were summarized using weighted averages. Evaluators excluded sites with ten or fewer respondents from individual site analyses but included them in the final cross-site analysis.

Findings

Structure and Function of the Partnership (n=5 items)

A total of 14 individuals responded from Shape Up Somerville partnership. Of the sample, 11 were female (79%) and 3 were male (21%). Respondents were between the ages of 18-25 (1, or 7%), 26-45 (4, or 29%), 46-65 (7, or 50%), or 66 and over (2, or 14%). Survey participants were also asked to provide information about race and ethnicity. Respondents identified with one or more from the following race and ethnicity categories: African American, American Indian/Alaskan Native, Asian, Native Hawaiian/Pacific Islander, White, Other race, Hispanic or Latino, Not Hispanic or Latino, Ethnicity unknown/unsure, or Refuse to provide information about race or ethnicity. Of the 16 responses, 75% were White, 6% were Asian, 6% were Native Hawaiian/Pacific Islander, 6% were Hispanic or Latino, and 6% were another ethnicity. No other races or ethnicities were identified.

Respondents were asked to identify their role(s) in the partnership or community. Of the 23 identified roles, two were representative of the Community Partnership Lead (9%) and ten were Community Partnership Partners (43%). Five respondents self-identified as a Community Leaders (22%), and five as Community Members (22%). One individual (4%) self-identified with a role not listed as a response option. Individuals participating in the survey also identified their organizational affiliation. Twenty-one percent of respondents (n=3) indicated affiliation to schools/school district, and another 21% (n=3) claimed affiliation to a local government agency (city, county). Two respondents (14%) self-identified health care organizations, while

three (21%) with other types of organizations not listed as response options. The remaining three respondents affiliated to a faith- or community-based organization (1, or 7%), a university or research/evaluation organization (1, or 7%), and child care or afterschool organization (1, or 7%). No respondents associated to neighborhood associations, or advocacy organizations.

Leadership (n=8 items)

Nearly all responses showed agreement or strong agreement (96% total) to statements suggesting that the partnership had an established group of core leaders who had the skills to help the partnership achieve its goals. Responses also indicated that participants in the survey felt the core leadership is organized and retains the skills to help the partnership and its initiatives succeed. The majority of respondents strongly agreed or agreed (96%) that leaders worked to motivate others, worked with diverse groups, showed compassion, and strived to follow through on initiative promises. Most (79% agree/strongly agree) responses to the survey indicated that at least one member of the leadership team lived in the community, though 21% of respondents were not sure. When asked if they agreed with statements suggesting that at least one member of the leadership team retained a respected role in the community, 86% of respondents agreed or strongly agreed, while 7% disagreed.

Partnership Structure (n=24 items)

About half of the respondents felt that the partnership adequately provided the necessary in-kind space, equipment and supplies for partners to conduct business and meetings related to partnership initiatives (52% agree/strongly agree). Forty-four percent felt unsure provision of space and equipment was sufficient, and five percent disagreed. Most (64%) agreed that the partnership has processes in place for dealing with conflict, organizing meetings, and structuring goals, although 32% responded “I don’t know”, indicating a lack of familiarity in this area, and 4% felt these processes were not established. Partnership members (leadership and partners) were generally perceived by respondents to be involved in other communities and with various community groups, bridging the gaps between neighboring areas and helping communities work together (84%), though 14% did not know.

The majority (70%) of respondents indicated agreement with statements about the partnership’s effectiveness in seeking learning opportunities, developing the partnership, and planning for sustainability; however, 14% of responses disagreed, and 14% were not aware of partnership activities specific to development and sustainability.

Relationship with Partners (n=4 items)

Ninety-six percent of responses to statements about leadership and partner relationships were positive (agree/strongly agree), indicating that the majority of respondents felt the partners and leadership trusted and worked to support each other.

Partner Capacity (n=18 items)

Most responses (93% agree/strongly agree) indicated that respondents felt partners possess the skills and abilities to communicate with diverse groups of people and engage decision makers (e.g., public officials, community leaders). However, only 71% of individuals responding to the survey felt that partners were dedicated to the initiative, interested in enhancing a sense of community, and motivated to create change, while 26% disagreed, and 2% were not sure.

Political Influence of Partnership (n=2 items)

In general respondents felt that the leadership is visible within the community, with 82% of responses supporting statements that the leadership is known by community members and works directly with public officials to promote partnership initiatives. Only seven percent of respondents disagreed about the leadership’s role with community members and public officials.

Perceptions of Community and Community Members (n=22 items)

Statements suggesting that the community was a good place to live, with community members who share the same goals and values, help each other, and are trustworthy were supported by 81% of survey responses,

APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS

while 17% indicated a lack of knowledge about these community attributes. Respondents also strongly supported suggestions that community members help their neighbors, but may take advantage of others if given the opportunity (80% agree/strongly agree). In contrast, respondents were less convinced that community members would intervene on behalf of another individual in their community in cases of disrespect, disruptive behavior, or harmful behavior. While 59% agreed or strongly agreed, 24% disagreed/strongly disagreed. Seventeen percent of responses indicated that some respondents did not know how community members would act in these situations.

Most survey participants (86%) felt community members were aware of the partnership's initiatives and activities, though 14% were not sure. The majority of respondents agreed (86%) that the partnership equally divides resources among different community groups in need (e.g., racial/ethnic minorities, lower income). Fourteen percent were not sure.

Overall, respondents agreed or strongly agreed that partners and members of the community maintained active involvement in partnership decisions and activities (83%), and also agreed that partners and residents have the opportunity to function in leadership roles and participate in the group decision-making process (86%).

References

1. Goodman RM, Speers MA, McLeroy K, et al. Identifying and defining the dimensions of community capacity to provide a basis for measurement. *Health Educ Behav.* Jun 1998;25(3):258-278.
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3. Roussos ST, Fawcett SB. A review of collaborative partnerships as a strategy for improving community health. *Annu Rev Public Health.* 2000;21:369-402.
4. Baker E, Motton F. Is there a relationship between capacity and coalition activity: The road we've traveled. American Public Health Association 131st Annual Meeting. San Francisco, CA; 2003.

APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS

Partnership and Community Capacity Survey Respondent Summary

Community Partnership

Somerville

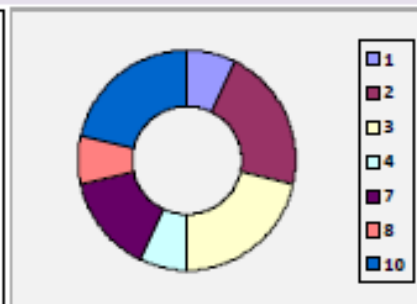
Respondents (n= 14)

Respondent Characteristics

Gender		Identified Race/Ethnicity				Identified Role	
Female	11	American Indian or Alaskan Native	0	Hispanic or Latino	1	Community Partnership Lead	2
Male	3	Asian	1	Not Hispanic or Latino	0	Community Partnership Partner	10
No response	0	White	12	Don't know/ Unsure ethnicity	0	Community Leader	5
Age Range		African American/ Black	0	Refused to identify ethnicity	0	Community Member	5
18-25	1	Pacific Islander/ Native Hawaiian	1	Other ethnicity	1	Public Official	0
26-45	4					Other role	1
46-65	7						
66+	2						
No response	0						

Type of Affiliated Organization

Faith- or Community Based Organization	1	7.1%	(1)
School (district, elementary, middle, high)	3	21.4%	(2)
Local Government Agency (city, county)	3	21.4%	(3)
University or Research/Evaluation Organization	1	7.1%	(4)
Neighborhood Organization	0	0.0%	(5)
Advocacy Organization	0	0.0%	(6)
Health Care Organization	2	14.3%	(7)
Child Care or Afterschool Organization	1	7.1%	(8)
Other	3	21.4%	(10)
No response	0	0.0%	(999)



Partnership and Community Capacity Data

Provision of required space and equipment

Participants provided level of agreement to statements indicating the community partnership provided adequate space, equipment, and supplies to conduct business and meetings.

Strongly agree	22.22%	Strongly disagree	0.00%
Agree	29.37%	I don't know	43.65%
Disagree	4.76%	No response	0.00%

Partner skills and communication

Participants provided level of agreement to statements supporting partner skills and ability to communicate with and engage multiple types of people (e.g., public officials, community leaders).

Strongly agree	24.03%	Strongly disagree	0.00%
Agree	68.83%	I don't know	3.90%
Disagree	2.60%	No response	0.65%

APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS

Community Partnership

Community and community members			
Participants provided level of agreement to statements suggesting the communities are good places to live, and that community members are helpful, can be trusted, and share the same goals or values.			
Strongly agree	28.57%	Strongly disagree	0.00%
Agree	51.95%	I don't know	16.88%
Disagree	1.95%	No response	0.65%
Partner and community involvement			
Participants provided level of agreement to statements indicating partners and the community were actively involved in partnership activities, meetings, and decisions.			
Strongly agree	35.71%	Strongly disagree	0.00%
Agree	47.14%	I don't know	5.71%
Disagree	11.43%	No response	0.00%
Partner and partnership development			
Participants provided level of agreement to statements suggesting the partnership and its partners seek ways learn, develop, and enhance sustainability.			
Strongly agree	22.86%	Strongly disagree	2.86%
Agree	47.14%	I don't know	14.29%
Disagree	11.43%	No response	1.43%
Partnership structure, organization, and goals			
Participants provided level of agreement to statements suggesting partnership has processes in place related to structure, meeting organization, and goals.			
Strongly agree	19.05%	Strongly disagree	0.00%
Agree	45.24%	I don't know	32.14%
Disagree	3.57%	No response	0.00%
Relationship between partners and leadership			
Participants provided level of agreement to statements indicating the leadership and partners trust and support each other.			
Strongly agree	39.29%	Strongly disagree	0.00%
Agree	57.14%	I don't know	0.00%
Disagree	3.57%	No response	0.00%
Community members intervene			
Participants provided level of agreement to statements indicating that community members can be counted on intervene in instances where someone is disrespectful, disruptive, or harmful to another community member.			
Strongly agree	21.43%	Strongly disagree	14.29%
Agree	38.10%	I don't know	16.67%
Disagree	9.52%	No response	0.00%
Leadership motivation			

APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS

Community Partnership

Participants provided level of agreement to statements suggesting the leadership is motivated to help others, work with diverse groups, shows compassion, and follows through.

Strongly agree	33.93%	Strongly disagree	0.00%
Agree	62.50%	I don't know	1.79%
Disagree	1.79%	No response	0.00%

Community member and partner participation

Participants provided level of agreement to statements indicating that community members and partners have opportunities to serve in leadership roles and participate in group decision-making.

Strongly agree	35.71%	Strongly disagree	0.00%
Agree	50.00%	I don't know	7.14%
Disagree	7.14%	No response	0.00%

Involvement in other communities

Participants provided level of agreement to statements suggesting leadership and partners are involved in other communities and various community groups, and help communities work together.

Strongly agree	23.21%	Strongly disagree	0.00%
Agree	60.71%	I don't know	14.29%
Disagree	0.00%	No response	1.79%

Community member willingness to assist

Participants provided level of agreement to statements suggesting most community members help neighbors and solve community problems. It also suggested some community members may take advantage of others.

Strongly agree	33.93%	Strongly disagree	0.00%
Agree	46.43%	I don't know	16.07%
Disagree	3.57%	No response	0.00%

Core leadership and leadership skills

Participants provided level of agreement to statements suggesting the community partnership has a core leadership group organizing efforts, and that leaders have the skills to help the partnership achieve its goals.

Strongly agree	35.71%	Strongly disagree	0.00%
Agree	60.71%	I don't know	3.57%
Disagree	0.00%	No response	0.00%

Partner motivation

Participants provided level of agreement to statements indicating that partners won't give up in their efforts to create change and increase sense of community through the partnership.

Strongly agree	30.95%	Strongly disagree	0.00%
Agree	40.48%	I don't know	26.19%
Disagree	2.38%	No response	0.00%

Visibility of leadership

Participants provided level of agreement to statements suggesting the leadership is known in the community and works with public officials.

Strongly agree	39.29%	Strongly disagree	0.00%
Agree	42.86%	I don't know	10.71%
Disagree	7.14%	No response	0.00%

APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS

Community Partnership

Leadership lives in the community			
Participants provided level of agreement to a statement indicating that at least one member of the leadership resides within the community.			
Strongly agree	42.86%	Strongly disagree	0.00%
Agree	35.71%	I don't know	21.43%
Disagree	0.00%	No response	0.00%
Leadership has a respected role in the community			
Participants provided level of agreement to a statement that suggests at least one member of the leadership team has a respected role in the community.			
Strongly agree	42.86%	Strongly disagree	0.00%
Agree	42.86%	I don't know	7.14%
Disagree	7.14%	No response	0.00%
Community partnership initiatives are known			
Participants provided level of agreement to a statement suggesting that community members are aware of the partnership's initiatives and activities.			
Strongly agree	14.29%	Strongly disagree	0.00%
Agree	71.43%	I don't know	14.29%
Disagree	0.00%	No response	0.00%
Division of resources			
Participants provided level of agreement to a statements suggesting that resources are equally divided among different community groups (e.g., racial/ethnic, lower income).			
Strongly agree	42.86%	Strongly disagree	0.00%
Agree	42.86%	I don't know	14.29%
Disagree	0.00%	No response	0.00%

APPENDIX C: SHAPE UP SOMERVILLE PARTNER LIST

Organization/Institution	Partner
Business/Industry/Commercial	Locally-owned businesses Cambridge Health Alliance Somerville Chamber of Commerce Metro Pedal Power
Civic Organizations	Mass Farmers' Market Association, Community Outreach Director Green Streets Initiative
College/University	Tufts University
Community Residents	Local art community
Government	City employees Somerville Office of Communications City Planning Department and Board Somerville Office of Planning and Community Development Mayor of Somerville, J. Curtatone (Key Champion) Somerville, Board of Alderman Somerville, Board of Health State Representative, Denise Provost Environmental Programs, Director Office of Somerville Commissions Somerville Police Department Community Policing, Director Somerville Recreation Department *City of Somerville Health Department Somerville Women, Infants, and Children (WIC) Somerville SomerStat Department Somerville Department of Public Works Buildings and Grounds, Director Disabilities Commission ADA Coordinator Office of Strategic Planning and Community Development (OSPCD) Transportation and Infrastructure (Director) Economic Development, Parks and Open Space Landscape Director of Buildings and Grounds Department of Traffic and Parking Somerville Youth Department
Other Community-Based Organizations	Community Corridor Planning Coalition Davis Square Area Resident Business Initiative Groundwork Somerville Main Streets Organization in Union Square and East Somerville Somerville Community Corporation Somerville Local First Friends of the Community Path Metro Pedal Power WalkBoston Somerville Community Health Agenda The Welcome Project
Other Research/Evaluation Organization	Institute for Community Health Safe, Sustainable Transportation Assessment and Recommendations Team
Other Youth Organization	Liaison Interpreter Program of Somerville
Policy/Advocacy Organization	Community Action Agency of Somerville Somerville Transportation Equity Partnership
Schools	Somerville Public Schools Physical Education Department School Committee School Food Service School Nurses Superintendent of Public Schools

*Denotes lead agency for SUS partnership

APPENDIX D: SOURCES AND AMOUNTS OF FUNDING LEVERAGED

Sources of Revenue			
Community Partnership	Somerville		
Resource source	Year	Amount	Status
Local government			
Matching funds			
	2010		Annual total \$101,485.00
		\$15,840.00	Accrued
		\$27,000.00	Accrued
		\$11,742.00	Accrued
		\$10,731.00	Accrued
		\$6,760.00	Accrued
		\$6,500.00	Accrued
		\$3,600.00	Accrued
		\$6,250.00	Accrued
		\$2,400.00	Accrued
		\$2,400.00	Accrued
		\$1,650.00	Accrued
		\$1,842.00	Accrued
		\$1,470.00	Accrued
		\$3,300.00	Accrued
	2011		Annual total \$101,485.00
		\$3,300.00	Accrued
		\$27,000.00	Accrued
		\$15,840.00	Accrued
		\$11,742.00	Accrued
		\$10,731.00	Accrued
		\$6,760.00	Accrued
		\$6,500.00	Accrued
		\$3,600.00	Accrued
		\$6,250.00	Accrued
		\$2,400.00	Accrued
		\$2,400.00	Accrued
		\$1,650.00	Accrued
		\$1,842.00	Accrued

APPENDIX D: SOURCES AND AMOUNTS OF FUNDING LEVERAGED

Community Partnership		Somerville	
Resource source	Amount	Status	
	\$1,470.00	Accrued	
2012		Annual total	\$125,645.00
	\$6,250.00	Accrued	
	\$1,650.00	Accrued	
	\$1,842.00	Accrued	
	\$1,470.00	Accrued	
	\$3,300.00	Accrued	
	\$2,400.00	Accrued	
	\$2,400.00	Accrued	
	\$27,000.00	Accrued	
	\$3,600.00	Accrued	
	\$6,500.00	Accrued	
	\$6,760.00	Accrued	
	\$10,731.00	Accrued	
	\$11,742.00	Accrued	
	\$40,000.00	Accrued	
Sum of revenue generated by resource source	\$328,615.00		
State government		Year	
Matching funds			
2010		Annual total	\$22,500.00
	\$20,000.00	Accrued	
	\$2,500.00	Accrued	
2011		Annual total	\$20,000.00
	\$20,000.00	Accrued	
2012		Annual total	\$20,000.00
	\$20,000.00	Accrued	
Other			
2012		Annual total	\$400,000.00
	\$400,000.00	Accrued	
Sum of revenue generated by resource source	\$462,500.00		
National government		Year	
Matching funds			
2010		Annual total	\$2,400,000.00

APPENDIX D: SOURCES AND AMOUNTS OF FUNDING LEVERAGED

Community Partnership		Somerville	
Resource source	Amount	Status	
	\$1,400,000.00	Accrued	
	\$1,000,000.00	Accrued	
2011		Annual total	13,900,000.00
	\$750,000.00	Accrued	
	\$950,000.00	Accrued	
	\$110,000.00	Accrued	
	12,000,000.00	Accrued	
	\$90,000.00	Accrued	
2012		Annual total	71,325,000.00
	\$7,900,000.00	Accrued	
	\$60,000.00	Accrued	
	\$60,000.00	Approved	
	\$1,800,000.00	Accrued	
	\$4,300,000.00	Accrued	
	\$1,000,000.00	Accrued	
	\$1,095,000.00	Accrued	
	\$60,000.00	Accrued	
	\$1,050,000.00	Accrued	
	\$4,000,000.00	Accrued	
Sum of revenue generated by resource source			\$87,625,000.00
Foundation	Year		
HKHC funds			
2008		Annual total	\$24,393.00
	\$25.00	Accrued	
	\$1,674.00	Accrued	
	\$1,035.00	Accrued	
	\$1,300.00	Accrued	
	\$1,890.00	Accrued	
	\$18,469.00	Accrued	
2009		Annual total	\$116,625.00
	\$30,306.00	Accrued	
	\$74,119.00	Accrued	

APPENDIX D: SOURCES AND AMOUNTS OF FUNDING LEVERAGED

Community Partnership		Somerville	
Resource source	Amount	Status	
	\$3,800.00	Accrued	
	\$4,350.00	Accrued	
	\$1,200.00	Accrued	
	\$2,300.00	Accrued	
	\$550.00	Accrued	
2010		Annual total	\$94,212.00
	\$1,300.00	Accrued	
	\$38,832.00	Accrued	
	\$3,597.00	Accrued	
	\$3,200.00	Accrued	
	\$343.00	Accrued	
	\$940.00	Accrued	
	\$46,000.00	Accrued	
2011		Annual total	\$105,788.00
	\$1,300.00	Accrued	
	\$91,085.00	Accrued	
	\$5,953.00	Accrued	
	\$3,400.00	Accrued	
	\$1,000.00	Accrued	
	\$3,000.00	Accrued	
	\$50.00	Accrued	
Sum of revenue generated by resource source			\$341,018.00
School	Year		
Matching funds			
	2010	Annual total	\$7,019.00
		Accrued	\$5,019.00
		Accrued	\$2,000.00
	2011	Annual total	\$5,019.00
		Accrued	\$5,019.00
	2012	Annual total	\$5,019.00
		Accrued	\$5,019.00
Sum of revenue generated by resource source			\$17,057.00

APPENDIX D: SOURCES AND AMOUNTS OF FUNDING LEVERAGED

Community Partnership	Resource source	Amount	Status
	Somerville		
Grand Total			\$88,774,190.00

Shape Up Somerville: Eat Smart, Move More, Live Better

Farmers' Markets Environmental Audits

Summary Report

Prepared by Transtria LLC



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Background

Healthy Kids, Healthy Communities (HKHC) is a national program of the Robert Wood Johnson Foundation (RWJF) whose primary goal is to implement healthy eating and active living policy, system, and environmental change initiatives that can support healthier communities for children and families across the United States. HKHC places special emphasis on reaching children who are at highest risk for obesity on the basis of race/ethnicity, income, and/or geographic location. For more information about HKHC, please visit www.healthykidshealthycommunities.org.

Located in Somerville, Massachusetts, the City of Somerville Health Department was selected to lead the local HKHC partnership, Shape Up Somerville. One of the main strategies for the Shape Up Somerville work was focused on creating access to healthy foods through farmers' markets and mobile markets.

Transtria LLC, a public health evaluation and research consulting firm located in St. Louis, Missouri, is funded by the Robert Wood Johnson Foundation to lead the evaluation and dissemination activities from April 2010 to March 2014. For more information about the evaluation, please visit www.transtria.com/hkhc.

A supplementary enhanced evaluation component focuses on six cross-site HKHC strategies, including: parks and plays spaces, street design, farmers' markets, corner stores, physical activity standards in childcare settings, and nutrition standards in childcare settings. Communities are trained to use two main methods as part of the enhanced evaluation, direct observation and environmental audits. Tools and training are provided by Transtria staff (see www.transtria.com/hkhc).

In order to better understand the impact of their work in farmer's markets, representatives of the Shape Up Somerville partnership chose to participate in the enhanced evaluation data collection activities for farmers' markets using the environmental audit method.

Methods

The Farmers' Market Environmental Audit Tool was modified from three existing environmental audit tools including the Farmers' Market Vendor Evaluation (created by Monika Roth), Farmers' Market Evaluation, Mystery Shopping-Farmers' Market (created by marketumbrella.org), and Nutrition Environment Measurement Survey-NEMS (created by Glanz et al.). Environmental audits assess the presence or absence of different features as well as the quality or condition of the physical environment. The tool captures overall market operations (e.g., months, days and hours of operation, accessibility, government nutrition assistance programs), vendor display areas (e.g., space and equipment), product signage and pricing (e.g., clear signs, unit and price labeled, discounts for larger sales), frozen/canned fruits and vegetables (e.g., quantity and variety of frozen or canned fruits and vegetables), other foods (e.g., availability of healthier options and foods with minimal nutritional value) and the availability, pricing, quality, and quantity of fresh fruits and vegetables.

Each audit tool was completed for one farmers' market. Two markets were selected throughout Somerville for data collection; one stationary market and one mobile market. An Evaluation Officer from Transtria LLC trained community members and partnership staff on proper data collection methods using the tool and data collection was completed between September 15 and September 19, 2012. Transtria staff performed data entry and validation, including double data entry to ensure accuracy of the data. There was 100% agreement of data entry.

Overall Results from Farmers' Markets

Operations

The two farmers' markets surveyed were open one day a week for at least four months of the year. The Davis Square Farmers' Market was open on Wednesdays, May to November, and the Mobile Market was open on Saturdays, June to September. The Davis Square Farmers' Market is located at Day and Herbert Street and the Mobile Market travels to different designated locations in Somerville. Hours of operation reported on audit for the Davis Square Farmers' Market was 12 pm to 6 pm and 10 am to 12 pm for the Mobile Market (additional hours of operation were found on individual farmers' market websites).

Both markets had a covered shelter, tent or canopy for the entire market, a wheelchair and stroller accessible entry way, and sufficient room to maneuver around the market. The Davis Square Farmer's Market had a legible sign to identify it as a farmers' market. Neither market had an ATM machine. Both markets also accepted low income discounts including WIC, SNAP or EBT. The Davis Square Farmers' Market displayed advertising for WIC and SNAP/Food Stamps and the Mobile Market only displayed a sign for SNAP/Food Stamps acceptance (see Appendix A, Table 1).



Somerville Mobile Farmers' Market

Vendor characteristics varied between the two markets. The Davis Square Farmers' Market was clean and well-organized and had between 20-29 vendors, while Mobile Market had only 1-2 vendors. The Mobile Market vendors all sold fresh produce, in comparison to only 5-9 vendors at the Davis Square Farmers' Market.

At both markets, a lot of products were identified by name. The Davis Square Farmers' Market had clear signs documenting the price of the product and displayed products by name and unit price. The Davis Square Farmers' Market indicated discounted price for larger volume purchases.

Availability of nutrient-dense and minimally nutritious food

None of the markets offered canned or frozen fruits and/or vegetables. The Davis Square Farmers' Market offered healthy food options, such as whole grain foods, lean protein foods (e.g. lean meat, poultry, fish) and other healthy food options (lamb meat beef, pasture raised chicken and local honey). Mobile Market offered other healthy foods, such as bok choy.

Availability and quality of fresh produce

At the time of the audit, the quality of fresh produce was rated as 'average/good' across both markets. The Davis Square Farmers' Market had a larger selection of fresh fruits. The only available fruit at Mobile Market during the time of the audit was apples and beets. Davis Square Farmers' Market offered seven different fruits. Both



Vegetable selection at the Davis Square Farmers' Market

markets offered more vegetables than fruits. The Davis Square Farmers' Market offered 22 vegetables compared to 13 at the Mobile Market (see Appendix A, Table 2).

Cost of produce

Cost data for produce showed slight price variation across markets for fruits and vegetables. While different unit sizes for sale at the different markets can explain some of the price differential (e.g., prices each compared to prices listed per pound, per box/bag, per bunch), there are still some notable variations in prices across markets (see Appendix A, Table 2). Across the two markets, the unit price varied most often on items sold per pound verses per box/bag or per bunch. The largest price difference was found in green peppers. Davis Square Farmers' Market sold green peppers for \$3.00 per pound and Mobile Market charged \$1.50 per pound. Plums and grapes were the highest priced fruit at \$5.00 per bag/box at the Davis Square Farmers' Market. The price range for vegetables sold was \$.25-\$3.50 per unit. Corn was the lowest priced vegetable selling for \$.25 each at Mobile Market and \$.50 each at Davis Square Farmer's Market. The Davis Square

Farmers' Market consistently had the highest price vegetables; with an average unit price of a little over \$2.00 per unit (see Appendix A, Table 2).

Key Takeaways

- Both markets were only open 1 day per week for 4 or more months of the year.
- The Davis Square Market and Mobile Market both accepted WIC/SNAP/EBT as payment options.
- Other nutritious foods were offered at both markets. High fiber/whole grain foods and lean meats, fish, and poultry were only offered at the Davis Square Market. However, other foods with minimal nutritional value, such as sweet foods were for sale at the Davis Square Market, as well.
- Canned or frozen fruit and vegetables were not available at any of the markets.
- The Davis Square Market offered the most variety of fresh fruits and vegetables (fruit n=8, vegetables n=22), Mobile Market offered 2 different types of fruit and 13 different types of vegetables.
- The majority of produce was of 'average/good' quality and rated 'a lot' in quantity.
- Prices ranged from \$0.50 per unit (e.g., Watermelon, Cabbages, and Carrots per pound) to \$5.00 per unit (grapes and plums per bag/box).
- While price comparison across markets are difficult due to variations in growing method, type, and individual size, differences ranging from \$0.50 to \$1.50 were found for the majority of produce.



Appendix A: Tables

Table 1: Characteristics across farmers' markets

Vendor Characteristics	Davis Square Market	Mobile Market
<i>Overall Market</i>		
Months of operation: May	X	
Months of operation: June	X	X
Months of operation: July	X	X
Months of operation: August	X	X
Months of operation: September	X	X
Months of operation: October	X	
Months of operation: November	X	
Days of operation: Wednesday	X	
Days of operation: Saturday		X
Market is open on Wednesday afternoon	X	
Market is open on Wednesday evening	X	
Market is open on Saturday afternoon		X
Market is open on Saturday evening		X
Frequency of operation: 1 day a week	X	X
Features: Accessible entrance	X	X
Features: Room to maneuver around market	X	X
Features: Legible signs to identify market	X	
Market accepts WIC/SNAP/EBT	X	X
Sign for WIC	X	
<i>Vendor characteristics</i>		
Number of vendors who sell goods at the market	20-29	1-2
Number of vendors who sell fresh produce at the market	5-9	1-2
Visible signs with farmers'/businesses' name: Few vendors		X
Visible signs with farmers'/businesses' name: A lot of vendors	X	
Clean and well-organized displays: Few vendors		X
Clean and well-organized displays: A lot of vendors	X	
Power cords taped down to prevent tripping: A lot of vendors	X	
<i>Product signage and pricing (for fresh fruits/vegetables only)</i>		
Products are identified by name: A lot of vendors	X	X
Clear signs document the price: No vendors		X
Clear signs document the price: A lot of vendors	X	
Units are appropriately labeled: No vendors		X
Units are appropriately labeled: A lot of vendors	X	
Discounts for larger sales: No vendors		X
Discounts for larger sales: A lot of vendors	X	
<i>Other foods</i>		
High-fiber, whole grain foods	X	
Healthier foods: Lean meats, fish, poultry	X	
Healthier foods: Other	X	X
Foods with minimal nutritional value: Sweet foods	X	

Table2: Fruits and vegetables available across farmers' markets

Produce Item	Davis Square Market				Mobile Market			
	Price	Unit	Quality	Quantity	Price	Unit	Quality	Quantity
<i>Fruits:</i>								
Apples	\$2.50	per pound	average/good	a lot	\$1.50	per pound	average/good	a lot
Grapes	\$5.00	per bag/box	average/good	a lot				
Peaches	\$3.00	per pound	average/good	a lot				
Pears	\$2.50	per pound	average/good	a lot				
Plum	\$5.00	per bag/box	average/good	a lot				
Raspberries	\$4.00	per bag/box	average/good	a lot				
Watermelons	\$0.50	per pound	average/good	few				
Other: Asian pear	\$4.00	per pound	average/good	few				
Other: Beets					\$0.50	per pound	average/good	a lot

Table 2 continued: Fruits and vegetables available across farmers' markets

Produce Item		Davis Square Market			Mobile Market			
	Price	Unit	Quality	Quantity	Price	Unit	Quality	Quantity
<i>Vegetables:</i>								
Broccoli	\$2.50	per bunch	average/good	a lot	\$1.50	per pound	average/good	a lot
Brussels sprouts	\$3.00	per pound	average/good	a lot				
Cabbages	\$1.00	per pound	average/good	a lot	\$0.50	per pound	average/good	a lot
Carrots	\$2.50	per bunch	average/good	a lot	\$0.50	per pound	average/good	a lot
Cauliflower	\$3.00	per bag/box	average/good	a lot				
Collard Greens	\$2.50	per bunch	average/good	a lot	\$1.50	per bunch	average/good	a lot
Corn	\$0.50	each	average/good	a lot	\$0.25	each	average/good	a lot
Green beans	\$2.50	per pound	average/good	a lot				
Green peppers	\$3.00	per pound	average/good	a lot	\$1.50	per pound	average/good	a lot
Kale	\$3.50	per pound		few	\$1.50	per bunch	average/good	a lot
Lettuce - Romaine	\$2.50	per bunch	average/good	few	\$1.50	each	average/good	a lot
Lima beans	\$3.00	per pound	average/good	a lot				
Okra	\$3.50	per pound	average/good	a lot				
Onions	\$1.50	per pound	average/good	a lot	\$0.75	per pound	average/good	few
Radishes	\$2.50	per bunch	average/good	few				
Red peppers	\$1.89	per pound	average/good	a lot	\$1.50	per pound	average/good	few
Spinach	\$2.50	per bunch	average/good	a lot				
Summer squash	\$2.00	per pound	average/good	few				
Tomatoes	\$2.00	per pound	average/good	a lot	\$1.50	per pound	average/good	a lot
Other: Red potatoes	\$2.00	per pound	average/good	a lot				
Other: Bok choy	\$3.50	per bunch	average/good	a lot				
Other: Mustard greens	\$2.50	per bunch	average/good	a lot	\$2.00	per box/bag		few
Other: Eggplant					\$1.50	per pound	average/good	a lot

Table 3: Other characteristics *not* found in farmers' markets

<p><i>Overall market:</i></p> <ul style="list-style-type: none">Months of operation: DecemberMonths of operation: JanuaryMonths of operation: FebruaryMonths of operation: MarchMonths of operation: AprilDays of operation: SundayDays of operation: MondayDays of operation: TuesdayDays of operation: ThursdayDays of operation: FridayFrequency of operation: DailyFrequency of operation: 2-6 days a weekFrequency of operation: 1-3 days a monthFeatures: SecurityFeatures: SeatingFeatures: Events/activitiesFeatures: ATMFeatures: Information booth/tableFeatures: Market maps	<p><i>Canned/frozen fruits/vegetables:</i></p> <ul style="list-style-type: none">No canned fruits availableNo canned vegetables availableNo frozen fruits available <p><i>Other nutritious foods:</i></p> <ul style="list-style-type: none">Healthier foods: Cottage cheese or low-fat yogurtHealthier foods: Nuts, seeds, or dry beansHealthier foods: Low-fat prepared meals <p><i>Foods with minimum nutritional value:</i></p> <ul style="list-style-type: none">Foods with minimal nutritional value: Salty foodsFoods with minimal nutritional value: Ice cream/frozen dessertsFoods with minimal nutritional value: Candy/chocolateFoods with minimal nutritional value: Regular to high-fat
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Appendix B: Farmers' Market Environmental Audit

Farmers' Market Environmental Audit Tool

Farmers' market name: _____
 Address: _____
 Number of vendors: _____
 Auditor 1: _____
 Auditor 2: _____

Farmers' market ID (for Transtria use only): _____
 Community partnership: _____
 Date: _____
 Audit start time: ____ : ____ ○ AM ○ PM
 Audit end time: ____ : ____ ○ AM ○ PM

Section A: Overall market						Section A: Overall market (cont.)					
1. What are the market months of operation?						4.c. Security features (security guard(s) and/or security camera(s))		<input type="checkbox"/>	<input type="checkbox"/>	No	Yes
1.a. January	<input type="checkbox"/>	<input type="checkbox"/>	1.g. July	<input type="checkbox"/>	<input type="checkbox"/>	4.d. On-site market manager		<input type="checkbox"/>	<input type="checkbox"/>	No	Yes
	No	Yes		No	Yes			No	Yes		
1.b. February	<input type="checkbox"/>	<input type="checkbox"/>	1.h. August	<input type="checkbox"/>	<input type="checkbox"/>	4.e. Legible signs to identify the market		<input type="checkbox"/>	<input type="checkbox"/>	No	Yes
	No	Yes		No	Yes			No	Yes		
1.c. March	<input type="checkbox"/>	<input type="checkbox"/>	1.i. September	<input type="checkbox"/>	<input type="checkbox"/>	4.f. Seating (e.g., benches, tables/chairs)		<input type="checkbox"/>	<input type="checkbox"/>	No	Yes
	No	Yes		No	Yes			No	Yes		
1.d. April	<input type="checkbox"/>	<input type="checkbox"/>	1.j. October	<input type="checkbox"/>	<input type="checkbox"/>	4.g. Events/activities (e.g., yoga, live music)		<input type="checkbox"/>	<input type="checkbox"/>	No	Yes
	No	Yes		No	Yes			No	Yes		
1.e. May	<input type="checkbox"/>	<input type="checkbox"/>	1.k. November	<input type="checkbox"/>	<input type="checkbox"/>	4.h. ATM		<input type="checkbox"/>	<input type="checkbox"/>	No	Yes
	No	Yes		No	Yes			No	Yes		
1.f. June	<input type="checkbox"/>	<input type="checkbox"/>	1.l. December	<input type="checkbox"/>	<input type="checkbox"/>	4.i. Information booth/table		<input type="checkbox"/>	<input type="checkbox"/>	No	Yes
	No	Yes		No	Yes			No	Yes		
2. What are the market days and hours of operation?						4.j. Market maps (e.g., maps with directions to market, site map with vendors)		<input type="checkbox"/>	<input type="checkbox"/>	No	Yes
2.a. Sunday (Check yes or no.) Enter operating hours (open/close):				<input type="checkbox"/>	<input type="checkbox"/>	4.k. Public transit stop visible from the farmers' market		<input type="checkbox"/>	<input type="checkbox"/>	No	Yes
				No	Yes			No	Yes		
2.b. Monday (Check yes or no.) Enter operating hours (open/close):				<input type="checkbox"/>	<input type="checkbox"/>	4.l. Parking lot adjacent to farmers' market		<input type="checkbox"/>	<input type="checkbox"/>	No	Yes
				No	Yes			No	Yes		
2.c. Tuesday (Check yes or no.) Enter operating hours (open/close):				<input type="checkbox"/>	<input type="checkbox"/>	4.m. On-street parking adjacent to farmers' market		<input type="checkbox"/>	<input type="checkbox"/>	No	Yes
				No	Yes			No	Yes		
2.d. Wednesday (Check yes or no.) Enter operating hours (open/close):				<input type="checkbox"/>	<input type="checkbox"/>	4.n. Other, specify:		<input type="checkbox"/>	<input type="checkbox"/>	No	Yes
				No	Yes			No	Yes		
2.e. Thursday (Check yes or no.) Enter operating hours (open/close):				<input type="checkbox"/>	<input type="checkbox"/>	5. Does the market accept WIC/SNAP/EBT? (If no, skip to Question 6)		<input type="checkbox"/>	<input type="checkbox"/>	No	Yes
				No	Yes			No	Yes		
2.f. Friday (Check yes or no.) Enter operating hours (open/close):				<input type="checkbox"/>	<input type="checkbox"/>	5.a. Sign for WIC		<input type="checkbox"/>	<input type="checkbox"/>	No	Yes
				No	Yes			No	Yes		
2.g. Saturday (Check yes or no.) Enter operating hours (open/close):				<input type="checkbox"/>	<input type="checkbox"/>	5.b. Sign for SNAP/Food stamps		<input type="checkbox"/>	<input type="checkbox"/>	No	Yes
				No	Yes			No	Yes		
3. What is the frequency of operation? (Circle one.)						5.c. WIC/SNAP/EBT customers use tokens to make purchases at the market.		<input type="checkbox"/>	<input type="checkbox"/>	No	Yes
Daily		2-6 days a week				5.d. Other discount, specify:		<input type="checkbox"/>	<input type="checkbox"/>	No	Yes
1 day a week		1-3 days a month						No	Yes		
4. What features are present in the market?						Section B: Vendor characteristics					
						Fill in the appropriate number of vendors for the next three items.					
4.a. Accessible entrance (allows entry for strollers and wheelchairs)				<input type="checkbox"/>	<input type="checkbox"/>	6. How many vendors sell only produce?					
				No	Yes						
4.b. Room to maneuver around market (e.g., wheelchairs, strollers)				<input type="checkbox"/>	<input type="checkbox"/>	7. How many vendors sell produce and other products?					
				No	Yes						
8. How many vendors sell no produce?											

Comments?

Evaluation of Healthy Kids, Healthy Communities

Section B: Vendor characteristics (cont.)				Section D: Frozen or canned fruits/vegetables (cont.)			
9. Circle the most appropriate response for each item.				14. How many types of frozen vegetables are available? (Circle one.)			
9.a. Amount of produce sufficient for vendor space				None (0)	Limited (1-3 types)	Variety (4+ types)	
None	Some	Most	All	Section E: Other foods			
9.b. Visible signs with farmers'/ businesses' names				15. Are any high-fiber, whole grain foods offered (e.g., whole wheat bread or pasta, brown rice)?		<input type="checkbox"/> No	<input type="checkbox"/> Yes
None	Some	Most	All	16. What other types of <u>healthier</u> foods are offered?			
9.c. Clean and well-organized displays				16.a. Cottage cheese or low-fat yogurt		<input type="checkbox"/> No	<input type="checkbox"/> Yes
None	Some	Most	All	16.b. Lean meats, fish, poultry		<input type="checkbox"/> No	<input type="checkbox"/> Yes
9.d. Power cords taped down to prevent tripping				16.c. Nuts, seeds, or dry beans		<input type="checkbox"/> No	<input type="checkbox"/> Yes
None	Some	Most	All	16.d. Low-fat prepared meals (e.g., baked chicken)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
Section C: Product signage and pricing (for fresh fruits and vegetables only)				16.e. Other, specify:		<input type="checkbox"/> No	<input type="checkbox"/> Yes
10. Circle the most appropriate response for each item.				17. What other types of foods with minimal nutritional value are offered?			
10.a. Products are identified by name.				17.a. Salty foods (e.g., potato chips, popcorn)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
None	Some	Most	All	17.b. Ice cream/frozen desserts		<input type="checkbox"/> No	<input type="checkbox"/> Yes
10.b. Clear signs document the price.				17.c. Sweet foods (e.g., cookies, cakes)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
None	Some	Most	All	17.d. Candy/chocolate		<input type="checkbox"/> No	<input type="checkbox"/> Yes
10.c. Units are appropriately labeled (e.g., weight, box, bunch).				17.e. Regular to high-fat prepared meals (e.g., fried chicken)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
None	Some	Most	All	17.f. Other, specify:		<input type="checkbox"/> No	<input type="checkbox"/> Yes
10.d. Discounts for larger sales				18. Is milk sold? (If no, audit is complete.)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
None	Some	Most	All	18.a. Skim milk		<input type="checkbox"/> No	<input type="checkbox"/> Yes
Go to the Attachments for Section C: Fresh fruits: Fruit availability, price, quality, and quantity; and Fresh vegetables: Vegetable availability, price, quality, and quantity				18.b. 1%		<input type="checkbox"/> No	<input type="checkbox"/> Yes
Section D: Frozen or canned fruits/vegetables				18.c. 2%		<input type="checkbox"/> No	<input type="checkbox"/> Yes
11. How many types of canned fruits are available? (Circle one.)				18.d. Whole or Vitamin D milk		<input type="checkbox"/> No	<input type="checkbox"/> Yes
None (0)	Limited (1-3 types)	Variety (4+ types)		18.e. Flavored whole milk		<input type="checkbox"/> No	<input type="checkbox"/> Yes
12. How many types of canned vegetables are available? (Circle one.)				18.f. Flavored skim, 1%, or 2% milk		<input type="checkbox"/> No	<input type="checkbox"/> Yes
None (0)	Limited (1-3 types)	Variety (4+ types)		18.g. Rice milk		<input type="checkbox"/> No	<input type="checkbox"/> Yes
13. How many types of frozen fruits are available? (Circle one.)				18.h. Soy milk		<input type="checkbox"/> No	<input type="checkbox"/> Yes
None (0)	Limited (1-3 types)	Variety (4+ types)		18.i. Lactaid		<input type="checkbox"/> No	<input type="checkbox"/> Yes

Comments?

Attachment for Section C: Fresh fruit availability, price, quality, and quantity

Fruit	a. Not Available	b. Lowest price	c. Unit/Weight				d. Quality		e. Quantity			f. Comments
			Per pound (lb)	Per box/bag	Each	Bunch	Avg./Good	Poor	A lot 10+	Some 3-9	Few <3	
19. Apples												
20. Bananas												
21. Blackberries												
22. Blueberries												
23. Cantaloupes												
24. Cherries												
25. Cranberries												
26. Grapefruits												
27. Grapes												
28. Honeydew melons												
29. Kiwis												
30. Mangos												
31. Nectarines												
32. Oranges												
33. Papayas												
34. Peaches												
35. Pears												
36. Pineapples												
37. Plums												
38. Raspberries												
39. Strawberries												
40. Tangerines												
41. Watermelons												
42. Other:												
43. Other:												
44. Other:												

Attachment for Section C: Fresh vegetable availability, price, quality, and quantity

Vegetable	a. Not Available	b. Lowest price	c. Unit/Weight				d. Quality		e. Quantity			f. Comments
			Per pound (lb)	Per box/bag	Each	Bunch	Avg./Good	Poor	A lot 10+	Some 3-9	Few <3	
45. Artichokes												
46. Asparagus												
47. Avocados												
48. Broccoli												
49. Brussels sprouts												
50. Cabbages												
51. Carrots												
52. Cauliflower												
53. Celery												
54. Collard greens												
55. Corn												
56. Green beans												
57. Green peppers												
58. Kale												
59. Lentils												
60. Lettuce – Romaine												
61. Lima beans												
62. Mushrooms												
63. Okra												
64. Onions												
65. Radishes												
66. Red peppers												
67. Spinach												
68. Summer squash												
69. Sweet potatoes												
70. Tomatoes												
71. Other:												
72. Other:												
73. Other:												

Farmers' Market Environmental Audit

Introduction

This tool and protocol were developed by the evaluation team from Transtria LLC (Laura Brennan, PhD, MPH, Principal Investigator; Allison Kemner, MPH; Tammy Behlmann, MPH; Jessica Stachecki, MSW, MBA; Carl Filler, MSW) and Washington University Institute for Public Health (Ross Brownson, PhD, Co-Principal Investigator; Christy Hoehner, PhD, MSPH), with feedback from national advisors and partners. This tool and protocol were adapted from Farmers' Market Vendor Evaluation (created by Monika Roth), Farmers' Market Evaluation, Mystery Shopping-Farmers' Market (created by marketumbrella.org), and Nutrition Environment Measurement Survey-NEMS (created by Glanz et al.).

Funding was provided for the *Evaluation of Healthy Kids, Healthy Communities* by a grant from the Robert Wood Johnson Foundation (#67099). Transtria LLC is leading the evaluation and dissemination activities from April 2010 to March 2014. For more information about the evaluation, please contact Laura Brennan (laura@transtria.com) or Allison Kemner (akemner@transtria.com).

Prior to conducting the audit

- Assess the safety of the environment for auditing before entering the area. If dangerous or suspicious activities are taking place, leave the premises, notify the Project Director or Coordinator, and determine whether to schedule a new observation.
- Introduce the audit team to the market manager and ask for permission to collect data. Be prepared to provide background information on the project and to share a letter from the Project Director or Coordinator explaining the reason for data collection. Offer to share data with them, if desired.
- Items to remember
 - Pencils, a copy of the paper tools for all data collectors, clipboards
 - Comfortable shoes
 - Data collectors' contact information (in case of emergency)
 - List and map of market for data collection
 - Letter from the Project Director or Coordinator explaining the reason for data collection
 - Transportation to and from the market for observers, if needed

Farmers' Market Environmental Audit (Instruction Sheet)

Top of the Farmers' Market Environmental Audit form

- Farmers' market name: Print the name of the farmers' market.
- Address: Print the street address, city, state, and zip code for the farmers' market.
- Number of vendors: Print the number of vendors that sell goods at the farmers' market.
- Auditor 1: Print the first and last name of Auditor #1
- Auditor 2: Print the first and last name of Auditor #2
- Farmers' market ID (for Transtria use only): Transtria will assign an ID for this farmers' market for the data analysis.
- Community partnership: Print the name of your community partnership for *Healthy Kids, Healthy Communities*.
- Date: Print the date of data collection.
- Audit start time: Print the time that the data collection process starts.
- Audit end time: Print the time that the data collection process ends.

Section A: Overall market

For Questions 1 – 2, place an **X** in the appropriate box () corresponding to Yes or No.

1. What are the market months of operation?
 - 1.a. – 1.l.: Indicate whether or not the market is open for each month of the year.
2. What are the market days and hours of operation?
 - 2.a. – 2.g.: Indicate whether or not the market is open for each day of the week.
 - For each day that the market is open (Yes), enter the market's operating hours (e.g., 7am-7pm).
3. What is the frequency of operation? Circle the best response.
 - Daily: The market is open every day.
 - 2-6 days a week: The market is open more than once a week but not every day.
 - 1 day a week: The market is open once a week.
 - 1 day a month: The market is open one day a month.

For questions 4 – 5, place an **X** in the appropriate box () corresponding to Yes or No.

4. What features are present in the market?
 - 4.a. Accessible entrance (allows entry for strollers and wheelchairs): The market entrance is accessible to all customers. Consider individuals that may be in wheelchairs or pushing strollers.
 - 4.b. Room to maneuver around market (e.g., wheelchairs, strollers): The market area provides enough room between vendors and product displays for customers to move around in the market. Consider individuals that may be in wheelchairs or pushing strollers.
 - 4.c. Security features (security guard(s) and/or security camera(s)): The market has a security guard present, a police sub-station on site, or a video camera surveillance in use.
 - 4.d. On-site market manager: The market is overseen by a market manager who is present during market operating hours.
 - 4.e. Legible signs to identify the market: A visible sign that identifies the name of the market.
 - 4.f. Seating (e.g., benches, tables/chairs): Is there somewhere to sit down?
 - 4.g. Events/activities (e.g., yoga, live music): The market sponsors special events or other activities to encourage attendance.
 - 4.h. ATM: An ATM is available for use inside the market.
 - 4.i. Information booth/table: There is a designated place for customers to ask questions or receive information about the market.
 - 4.j. Market maps: Maps or signs direct customers to the location of different types of products at the market.
 - 4.k. Public transit stop visible from the farmers' market: There is a public transit stop (e.g., bus, train, light-rail) visible from the market entrance.
 - 4.l. Parking lot adjacent to farmers' market: There is a parking lot alongside the market.
 - 4.m. On-street parking adjacent to farmers' market: There is on-street parking available alongside the market.
 - 4.n. Other: Note any items of interest present at the market not listed above.

5. Does the market accept WIC/SNAP/EBT?
- 5.a. Sign for WIC: Is there at least one (1) sign indicating that Women, Infants, and Children (WIC) payments are accepted?
 - 5.b. Sign for SNAP/Food stamps: Is there at least one (1) sign indicating that Supplemental Nutrition Assistance Program (SNAP) or food stamps payments are accepted?
 - 5.c. WIC/SNAP/EBT customers use tokens to make purchases at the market: Customers using nutritional assistance program benefits use tokens to pay for their purchases.
 - 5.d. Other discount: Are there signs that indicate other discounts or payments (e.g., double bucks, Benefit Security Card) are accepted?

Section B: Vendor characteristics

6. How many vendors sell only produce? Specify the number of vendors that only offer produce.
7. How many vendors sell produce and other products? Specify the number of vendors that sell other products in addition to selling produce.
8. How many vendors sell no produce? Specify the number of vendors that do not sell produce.

Comments?: An optional space for auditors to enter notes.

9. Circle the most appropriate response for each item: None (0 vendors), Some (1%-50% of vendors), Most (51%-99% of vendors), All (100% of vendors)
- 9.a. Amount of produce appropriate for vendor space
 - 9.b. Visible signs with farmers'/ businesses' names
 - 9.c. Clean and well-organized displays
 - 9.d. Power cords taped down to prevent tripping

Section C: Product signage and pricing (for fresh fruits and vegetables only)

10. Circle the most appropriate response for each item: None (0 products), Some (1%-50% of products), Most (51%-99% of products), All (100% of products)
- 10.a. Products are identified by name: Signage indicates the product names.
 - 10.b. Clear signs document the price: Visible signs state the price of each item.
 - 10.c. Units are appropriately labeled (e.g., weight, box bunch): Price signs clearly identify the unit of sale.
 - 10.d. Discounts for larger sales: Discounts are offered for larger/bulk purchases.

Go to the Attachments for Section C: Fresh fruits and Fresh vegetables

- For Questions 19 – 73, please fill in the information for fresh fruit/vegetable availability, price, quality, and quantity.
- a. Not Available: Place an **X** in the box for any fresh fruit or vegetable item that is not available at the market.
- b. Lowest price: What is the lowest retail price of the item? For example, there may be several varieties of apples available (e.g., Red Delicious and Gala), each with a different price. Print the lowest price across varieties.
- c. Unit/Weight: Place an **X** in the box that best represents how the fresh fruits or vegetables are being sold.
- Per pound: Fresh fruits are sold by the pound (e.g., apples are \$2.50 per pound or lb).
 - Per box/bag: Fresh fruits are sold by the box or bag (e.g., apples are \$2.50 per box/bag).
 - Each: Fresh fruits are sold individually (e.g., apples are \$.50 each or per piece).
 - Bunch: Fresh fruits are sold by the bunch (e.g., grapes are \$2.50 per bunch).
- d. Quality: Place an **X** in the box that best represents the quality of the fresh fruits or vegetables.
- Average/Good: Fresh fruits are in good condition, top quality, good color, fresh, firm, and clean.
 - Poor: Fresh fruits are bruised, old, mushy, dry, overripe, or have signs of mold.
- e. Quantity: Place an **X** in the box that best represents the quantity of fresh fruits or vegetables that are available for purchase.
- A lot: There are more than 10 fruits available (e.g., 10 apples).
 - Some: There are more than 3 fruits and less than 10 available (e.g., 6 apples).
 - Few: There are 2 or fewer fruits available (e.g., 1 apple).
- f. Comments: Print any important notes.

Section D: Canned/frozen fruits/vegetables

11. – 14. How many types of canned/frozen fruits or vegetables are available?
- None: No canned/frozen fruits or vegetables available.
 - Limited: 1 to 3 different types of canned/frozen fruits or vegetables available at the market.
 - Variety: 4 or more different types of canned/frozen fruits or vegetables available at the market.

Section E: Other foods

For questions 15 – 18, place an **X** in the appropriate box () corresponding to Yes or No.

15. Are any high-fiber, whole grain foods offered (e.g., whole wheat bread or pasta, brown rice)?: The market sells products made with whole grains. Check the ingredients to make the first ingredient says *whole*.
16. What other types of healthier foods are offered?
- 16.a. Cottage cheese or low-fat yogurt: The market sells products made with low- or no-fat milk (either fat-free or 1% milk).
 - 16.b. Lean meats, fish, poultry: The market sells lean meats, fish, or poultry products.
 - 16.c. Nuts, seeds, or dry beans: The market sells nuts, seeds, or dry beans. These may be sold in bulk or pre-packaged containers/bags.
 - 16.d. Low-fat prepared meals (e.g., baked chicken): The market has a prepared foods section with healthier foods.
 - 16.e. Other: Note any other healthier food items not listed above.
17. What other types of foods with minimal nutritional value are offered?
- 17.a. Salty foods: The market sells unhealthy snack foods with high salt contents.
 - 17.b. Ice cream/Frozen desserts: The market sells frozen desserts.
 - 17.c. Sweet foods: The market sells bakery items (a la carte or pre-packaged).
 - 17.d. Candy/Chocolate: The market sells chocolates or other candies (e.g., M&Ms, Skittles).
 - 17.e. Regular to high-fat prepared meals (e.g., fried chicken): The market has prepared foods with minimal nutritional value.
 - 17.f. Other: Note any other foods with minimal nutritional value not listed above.
18. Is milk sold?: The market offers at least one type of milk.
- 18.a. Skim milk
 - 18.b. 1%
 - 18.c. 2%
 - 18.d. Whole or Vitamin D milk
 - 18.e. Flavored whole milk
 - 18.f. Flavored skim, 1%, or 2% milk
 - 18.g. Rice milk
 - 18.h. Soy milk
 - 18.i. Lactaid

Comments? An optional space for auditors to enter notes.