

COMMUNITY ASSESSMENT FOR HEALTHY EATING AND ACTIVE LIVING

WALK AUDIT

INSTRUCTIONS: Complete one sheet for EACH BLOCK within your assigned walk area.

Audit Team: _____
Names of people completing this section of the walk audit

Street observed: _____ between _____ and _____
Street Name Cross Street 1 Cross Street 2

Date: _____ **Day of week:** _____

Time observations began: _____ **Time observations ended:** _____

ASSIGNMENT #1: BARRIERS TO WALKABILITY

Place an X next to any items that are a problem for pedestrians and note what might be especially problematic for a child, older adult or person with disabilities.

1. Were there barriers to safe walking paths? ☐ No ☐ Yes, including:

- | | |
|--|--|
| <input type="checkbox"/> There are no sidewalks, paths or shoulders | <input type="checkbox"/> The path needed more shade |
| <input type="checkbox"/> The sidewalks are not continuous (i.e. segments are missing) | <input type="checkbox"/> Not well lit |
| <input type="checkbox"/> The sidewalk is broken or cracked | <input type="checkbox"/> The sidewalk is blocked or interrupted by poles, shrubs, low-hanging trees, etc |
| <input type="checkbox"/> The sidewalk isn't wide enough for two people to walk together side-by-side | <input type="checkbox"/> Missing directional or street signs |
| <input type="checkbox"/> There's no buffer between traffic and the sidewalk | <input type="checkbox"/> Dirty, lots of litter or trash |
| <input type="checkbox"/> The curb cuts aren't textured or marked for people with visual impairments | <input type="checkbox"/> Dirty air due to automobile exhaust or nearby factory |
| | <input type="checkbox"/> Other issues observed: _____ |

2. Was it easy to cross streets? ☐ Yes ☐ No, because

- | | |
|---|---|
| <input type="checkbox"/> Street was too wide to cross safely | <input type="checkbox"/> Needed striped crosswalks or traffic signals |
| <input type="checkbox"/> Traffic signals made us wait too long or did not give us enough time to cross | <input type="checkbox"/> Parked cars blocked our view of traffic |
| <input type="checkbox"/> Drivers did not yield to people crossing, drove too fast, or otherwise put pedestrians at risk | <input type="checkbox"/> Trees or plants blocked our view of traffic |
| | <input type="checkbox"/> Needed curb ramps or ramps needed repair |
| | <input type="checkbox"/> Other issues observed: _____ |

COMMUNITY ASSESSMENT FOR HEALTHY EATING AND ACTIVE LIVING

ASSIGNMENT #2: RECREATIONAL SPACES

Complete the questions for EACH recreational space that you pass on your route.

1. Space Name: _____
Name of park or, if space doesn't have official name, what would help identify the space

a. The following amenities are offered (please underline anything that is broken/not usable):

- ☐ Playground equipment (i.e. swings, slides, play sculptures, etc)
- ☐ Outdoor exercise equipment (i.e. pull-up bars, stretching bars, etc)
- ☐ Sand box
- ☐ Open area for free plan (i.e. large grass space, rubber padded area, etc)
- ☐ Courts or fields for sports (i.e. basketball, tennis, soccer, etc)
- ☐ Concrete path for wheeled toys and bicycles
- ☐ Small wading or spray pool
- ☐ Water fountain
- ☐ Structure that provides shelter (i.e. gazebo, etc)
- ☐ Benches
- ☐ Picnic tables
- ☐ Other: _____

b. Security features include:

- ☐ Fence ☐ Staff
- ☐ Gate with lock

c. The following age groups were observed using the recreational space

- | | |
|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> 0 – 12 yrs | <input type="checkbox"/> 36 – 54 yrs |
| <input type="checkbox"/> 13 – 18 yrs | <input type="checkbox"/> 55 – 70 yrs |
| <input type="checkbox"/> 19 – 35 yrs | <input type="checkbox"/> 71 yrs + |

COMMUNITY ASSESSMENT FOR HEALTHY EATING AND ACTIVE LIVING

2. Space Name: _____
Name of park or, if space doesn't have official name, what would help identify the space

a. The following amenities are offered (please underline anything that is broken/not usable):

- ☐ Playground equipment (i.e. swings, slides, play sculptures, etc)
- ☐ Outdoor exercise equipment (i.e. pull-up bars, stretching bars, etc)
- ☐ Sand box
- ☐ Open area for free plan (i.e. large grass space, rubber padded area, etc)
- ☐ Courts or fields for sports (i.e. basketball, tennis, soccer, etc)
- ☐ Concrete path for wheeled toys and bicycles
- ☐ Small wading or spray pool
- ☐ Water fountain
- ☐ Structure that provides shelter (i.e. gazebo, etc)
- ☐ Benches
- ☐ Picnic tables
- ☐ Other: _____

b. Security features include:

- ☐ Fence ☐ Staff
- ☐ Gate with lock

c. The following age groups were observed using the recreational space

- ☐ 0 – 12 yrs ☐ 36 – 54 yrs
- ☐ 13 – 18 yrs ☐ 55 – 70 yrs
- ☐ 19 – 35 yrs ☐ 71 yrs +

COMMUNITY ASSESSMENT FOR HEALTHY EATING AND ACTIVE LIVING

ASSIGNMENT #3: HEALTHY FOOD ACCESSIBLE AT MINI MARKETS / BODEGAS / CORNER STORES

Complete questions for EACH store that you pass on your route. Use your best judgement of “fresh.”

1. Store Name: _____
 - a. Accepts EBT (food stamps): ☐ Yes ☐ No
 - b. Accepts WIC: ☐ Yes ☐ No
 - c. Has the following in in stock:
 - ☐ Fresh vegetables
 - ☐ Fresh fruits
 - ☐ Meat with expiration dates *at least* 2 days in the future
2. Store Name: _____
 - a. Accepts EBT (food stamps): ☐ Yes ☐ No
 - b. Accepts WIC: ☐ Yes ☐ No
 - c. Has the following in in stock:
 - ☐ Fresh vegetables
 - ☐ Fresh fruits
 - ☐ Meat with expiration dates *at least* 2 days in the future

ASSIGNMENT #4: AVAILABLE FITNESS ACTIVITIES

1. How many fitness activities (i.e. class, sport league) are offered and/or were observed? _____
2. Please list the fitness activities offered: _____
3. At what type of facility (i.e. park, community center, etc) are the activities offered? _____
4. What are the hours of operation? _____
5. Are the fitness activities accessible (i.e. public transit, parking, etc)? ☐ Yes ☐ No
6. The following age groups are served through existing fitness activities:

<input type="checkbox"/> 0 – 12 yrs	<input type="checkbox"/> 36 – 54 yrs
<input type="checkbox"/> 13 – 18 yrs	<input type="checkbox"/> 55 – 70 yrs
<input type="checkbox"/> 19 – 35 yrs	<input type="checkbox"/> 71 yrs +

FINAL SUMMARY:

of Stores with Healthy Food: _____

of Spaces for Gardens: _____

of Barriers to Walkability: _____

of Recreational Spaces: _____

of Available Fitness Activities: _____