

# Status of Latino/ Hispanic Health

Santa Clara County 2012



Volume 2 of 2

Neighborhood Conditions that Affect Latino / Hispanic Health

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To the Residents of Santa Clara County:

In my State of the County Address this year, I proposed that part of “building our future together” means building healthy and safe communities. By 2050, it is estimated that 4 of every 10 county residents in Santa Clara County will be Latino. Today, although Latinos nationwide live longer lives and experience fewer deaths from heart disease and cancer, they are less likely to have access to healthcare coverage, and more likely to be overweight or obese and to have diabetes. This report, ***Status of Latino/Hispanic Health: Santa Clara County 2012***, provides a comprehensive health assessment of our growing Latino community, which will help us take steps to ensure that they are healthy in years to come.

Throughout my years of public service, I have sought to address the needs of the county’s most vulnerable communities through initiatives that improve public health and safety, senior and children services, and economic development. This is why this report is so important. Latinos face several pressing issues that should be a concern to us all. Latinos report an inability to live where they would like, especially given the high cost of housing; less access to a continuum of affordable healthy food options for them and their families; and a lack of safe, affordable physical activity opportunities.

Persistent barriers to eating a healthy diet, being physically active, and safety and violence prevention in Latino neighborhoods contribute to perhaps one of the most urgent issues facing Latinos in our county—obesity and overweight. The prevention and reversal of obesity is complex. It involves individual and community change, including developing and sustaining partnerships with schools, communities, work sites and healthcare systems. It is also important to understand how policy and environmental barriers play a role in obesity. Successfully addressing obesity will require a concerted effort at all these levels for sustained change.

Latinos, and all residents of Santa Clara County, should have an equal opportunity to make the choices that allow them to live a long, healthy life, regardless of their income, education, or ethnic background. This opportunity begins in our neighborhoods—where we live, learn, work, and play. As a community, only by promoting access to healthy environments and targeting the root causes of health inequities can we attain optimal health for all.

I am grateful to Dan Peddycord, Public Health Director, and his staff for their leadership on this project, and would like to acknowledge the contributions of community leaders and volunteers for their participation.

Sincerely,

A handwritten signature in black ink, appearing to read "G. Shirakawa".

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Great Things Start with Good Health

To the Residents of Santa Clara County:

We are pleased to announce the release of this special report on Latino health during Binational Health Week 2012. The mobilization of government agencies, community-based organizations, and thousands of volunteers during Binational Health Week serves as an exciting opportunity to share information in the report that can be used to generate solutions to address health disparities among Latinos.

Latinos are a large and growing segment of the population in Santa Clara County, and one that is socioeconomically disadvantaged and disproportionately affected by some poor health outcomes. Specifically, Latinos are more likely than some other racial/ethnic groups to have lower incomes, higher rates of unemployment, and lower educational attainment. Additionally, Latinos are more likely to be overweight or obese; to have lower levels of physical activity and poorer nutrition; and to experience some types of injury and violence more than some other racial/ethnic groups.

Increasingly, research is finding that the environment plays a large role in influencing our individual behaviors. Our environment shapes the choices we make, like what we choose to eat or how active we are. Since health disparities may sometimes be the consequence of environmental factors that are beyond the control of the individual, we decided to conduct an in-depth analysis of the factors associated with obesity, physical activity, nutrition, and injury/violence among Latinos in eight selected neighborhoods.

We hope that the findings from the ***Status of Latino/Hispanic Health: Santa Clara County 2012*** will be used by the community to advocate for improvements countywide and in their neighborhoods. Given the complexity of these issues, it is crucial that many people from a variety of sectors come together to generate solutions as part of a communitywide process informed by data from this report.

Special thanks to community leaders for their support of the assessment and their commitment to Latino health, and to the dedicated neighborhood residents who participated in the assessment.

Sincerely,

A handwritten signature in black ink that reads "Dan Peddycord". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

Dan Peddycord, RN, MPA/HA  
Public Health Director

A handwritten signature in black ink that reads "Martin Fenstersheib MD". The signature is cursive and includes the letters "MD" at the end.

Martin Fenstersheib, MD, MPH  
Santa Clara County Health Officer



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# Neighborhood Conditions that Affect Latino/Hispanic Health

## Introduction

In this volume, we focus on eight Santa Clara County neighborhoods with high proportions of Latino/Hispanic residents and discuss how these neighborhood environments promote or prevent obesity, good nutrition, physical activity, and safety. We highlight healthy food availability, affordability, and promotion in neighborhood stores, emergency food banks, childcare centers, and K-12 public schools. We present neighborhood street conditions for aesthetics, safety, and other elements that might discourage active living. In addition, we share results from a series of conversations, or focus groups, with community residents in the eight neighborhoods.

Please visit the Santa Clara County Public Health Department website, [www.sccgov.org/statistics2](http://www.sccgov.org/statistics2), to access additional health data, trends, and maps.

We also include several maps that highlight differences in health risks and health protective factors in neighborhoods across Santa Clara County with higher and lower percentages of Latino/Hispanic residents.

## Chapter 1: The Environment and Health

### *Not All Neighborhoods Support Good Health*

Residents who live in neighborhoods that lack abundant parks, recreational space, safe routes to schools, and access to healthy foods have a harder time making healthy choices and, therefore, are more likely to suffer from chronic disease and injury.

Santa Clara County, like many other communities across the country, is studying neighborhood conditions that may impact Latino/Hispanic health. In Santa Clara County, Latinos/Hispanics experience some poorer health outcomes relative to other racial/ethnic groups. Many Latino/Hispanic residents live in lower-income neighborhoods with fewer amenities and higher rates of crime, which may affect health.

### Access to Healthy Food

Neighborhoods with supermarkets and large grocery stores offer residents, regardless of income, an abundance of healthy food options. When healthy food options are available in our community, residents are more likely to choose these options. <sup>(1)</sup>

In Santa Clara County, only 65% of Latino/Hispanic adults compared to 89% of Whites report that they find it easy to locate a variety of good quality and affordable fresh fruits and vegetables in their

neighborhoods. In addition, the majority of Latino/Hispanic adults (75%) believe the government should do more to limit the number of new fast food restaurants in their neighborhood, compared to less than one-third (30%) of Whites.

### Mixed-Use Neighborhoods

Communities that provide an assortment of amenities such as grocery stores, health clinics, and community centers close to where residents live are called mixed-use neighborhoods. Mixed-use neighborhoods support walking and biking for transportation, leisure, and errands.

### Street Design

Street design impacts whether we walk or bike to work or school, and the distance we travel to purchase healthy foods and other necessities. Accessible sidewalks, frequent intersections, bicycle lanes, and adequate lighting improve pedestrian and bicycle safety and increase opportunities for physical activity. <sup>(2)</sup>

In Santa Clara County, 77% of Latino/Hispanic adults report having access to safe spaces for physical activity, which is significantly less than what Whites report (96%). A lower proportion of Latinos/Hispanics (55%) than Whites (78%) perceive physical activity facilities, such as parks and trails, within their neighborhood as very pleasant.

### Neighborhood Safety and Violence

Safe neighborhoods support active living. Unsafe neighborhoods or those perceived to be unsafe due to graffiti or abandoned buildings are associated with residents staying indoors and may interfere with physical activity. <sup>(3) (4)</sup>

Nearly half of Latino/Hispanic adults report concerns about neighborhood safety, compared to a third of Whites and a quarter of Asian/Pacific Islanders. A lower percentage of Latinos/Hispanics report that the level of cleanliness in their neighborhoods is excellent or good compared to all other racial/ethnic groups.

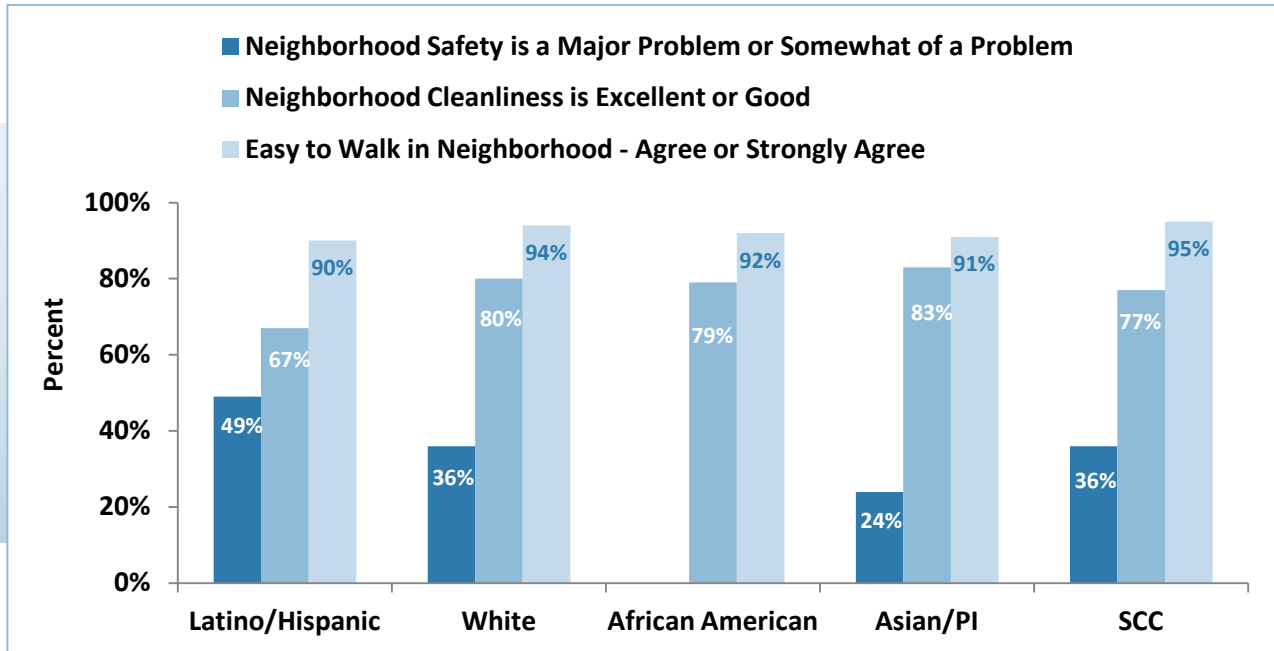
***“If Burger King, McDonald’s and Jack in the Box weren’t close, you wouldn’t go there. If there were stores with [healthy foods] nearby, you wouldn’t go far to get a hamburger. We don’t have the choice.”***

Seven Trees/Los Arboles/Serenade community member

***“Unfortunately, we’re not safe in our own homes or apartments. There is so much vandalism, drugs, and other things that you can’t even go to your front door.”***

Seven Trees/Los Arboles/Serenade community member

### Percentage of Adults with Safe, Clean, and Walkable Neighborhoods by Race/Ethnicity



**Note:** Results for African Americans for safety not reported due to small sample size. White, African American, and Asian/Pacific Islander categories do not include Latinos/Hispanics.

**Source:** Santa Clara County Public Health Department, 2009 Behavioral Risk Factor Survey



## Chapter 2: The Environment in Neighborhoods Across the County

The following section maps elements of neighborhoods across the county that support good nutrition, physical activity, and safety. The goal of the section is to determine if neighborhoods with higher percentages of Latino/Hispanic residents are disproportionately affected by issues like pedestrian collisions and violent crimes. This information can help us better understand how best to direct health and education resources in order to have the biggest impact on Latino/Hispanic health.

### *How to Read the Maps and Graphs*

Each map presents an indicator, like the number of pedestrian collisions, for neighborhoods across the county. The map legends provide color codes for higher or lower numbers or scores for neighborhoods (e.g., higher and lower numbers of collisions). For some maps, the legend describes how neighborhoods in each category compare to the county average.

To show whether neighborhoods with higher percentages of Latino/Hispanic residents are disproportionately affected by some risk factors, neighborhoods in which greater than 26% of the residents are Latino/Hispanic are outlined in blue on the maps. As a comparison, neighborhoods with 8.5% or fewer Latino/Hispanic residents are outlined in purple.

The graphs accompanying each map show the number or score for an indicator averaged across neighborhoods in each of five groups, according to the percentage of Latino/Hispanic residents.

This enables us to quickly see patterns across neighborhoods for each indicator. See the Methodology section online for more details ([www.sccgov.org/statistics2](http://www.sccgov.org/statistics2)).

### **Key Findings**

#### What is going well:

- Residents in neighborhoods with a higher proportion of Latinos/Hispanics do not need to walk as far to reach local services, such as grocery stores, restaurants, or schools.
- There is little difference in the distance to the nearest park for neighborhoods with higher and lower proportions of Latino/Hispanic residents.

#### What needs improvement:

- There are proportionately fewer stores where residents can purchase healthy foods in neighborhoods with a higher percentage of Latino/Hispanic residents.
- There are more pedestrian and bicycle collisions in or near neighborhoods with a larger percentage of Latino/Hispanic residents.
- The number of violent crimes is higher in neighborhoods with a larger percentage of Latino/Hispanic residents.
- Neighborhoods with the highest percentage of Latino/Hispanic residents have more than six times the number of violent crimes near parks and schools than those with the lowest proportion of Latino/Hispanic residents.

## Neighborhood Walk Score®

**Significance:** The more walkable, or pedestrian friendly, a neighborhood is, the more likely residents are to meet recommended physical activity guidelines. <sup>(5)</sup> It is more convenient for residents to walk in neighborhoods if stores, restaurants, and other amenities are located close to where they live.

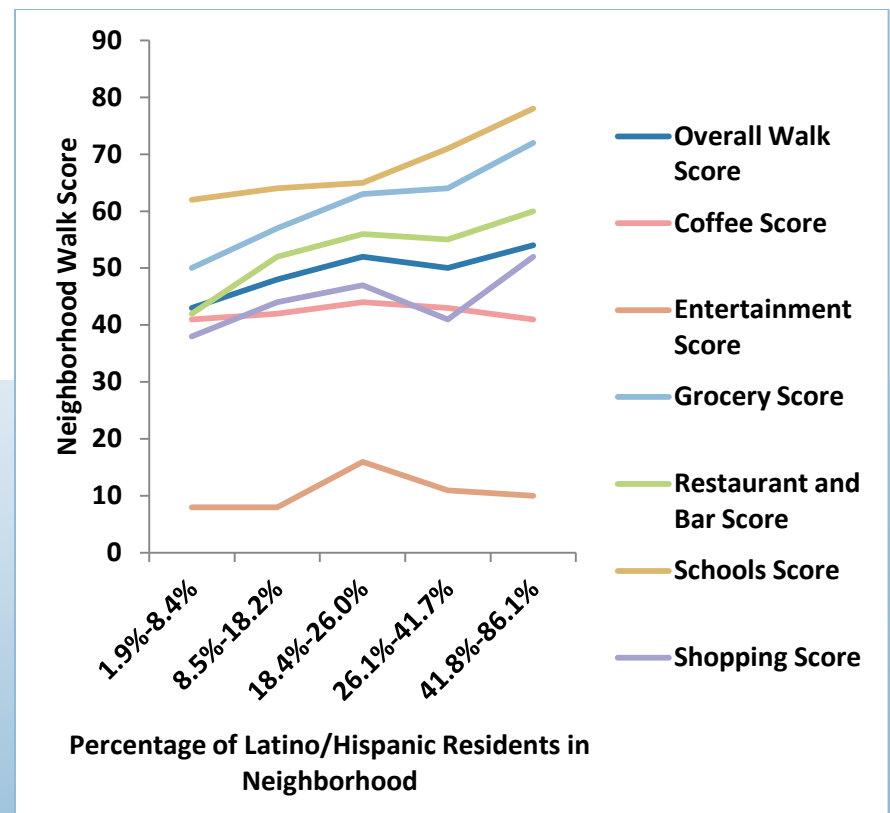
**About this Indicator:** Walk Score® measures the walking distance from residences to amenities such as stores and schools as well as the diversity of these amenities. The map shows the overall Walk Score for neighborhoods with larger versus smaller proportions of Latino/Hispanic residents. The graph shows the average scores for specific amenities like coffee shops in neighborhoods with different proportions of Latino/Hispanic residents. <sup>(6)</sup>

### Findings:

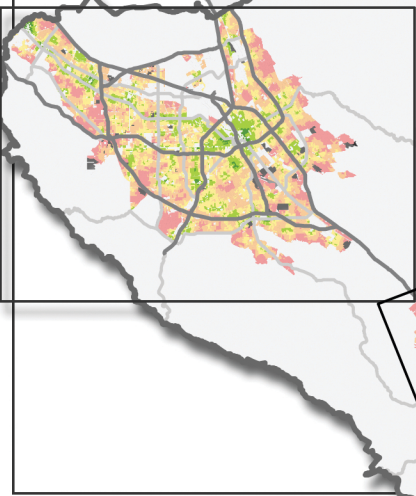
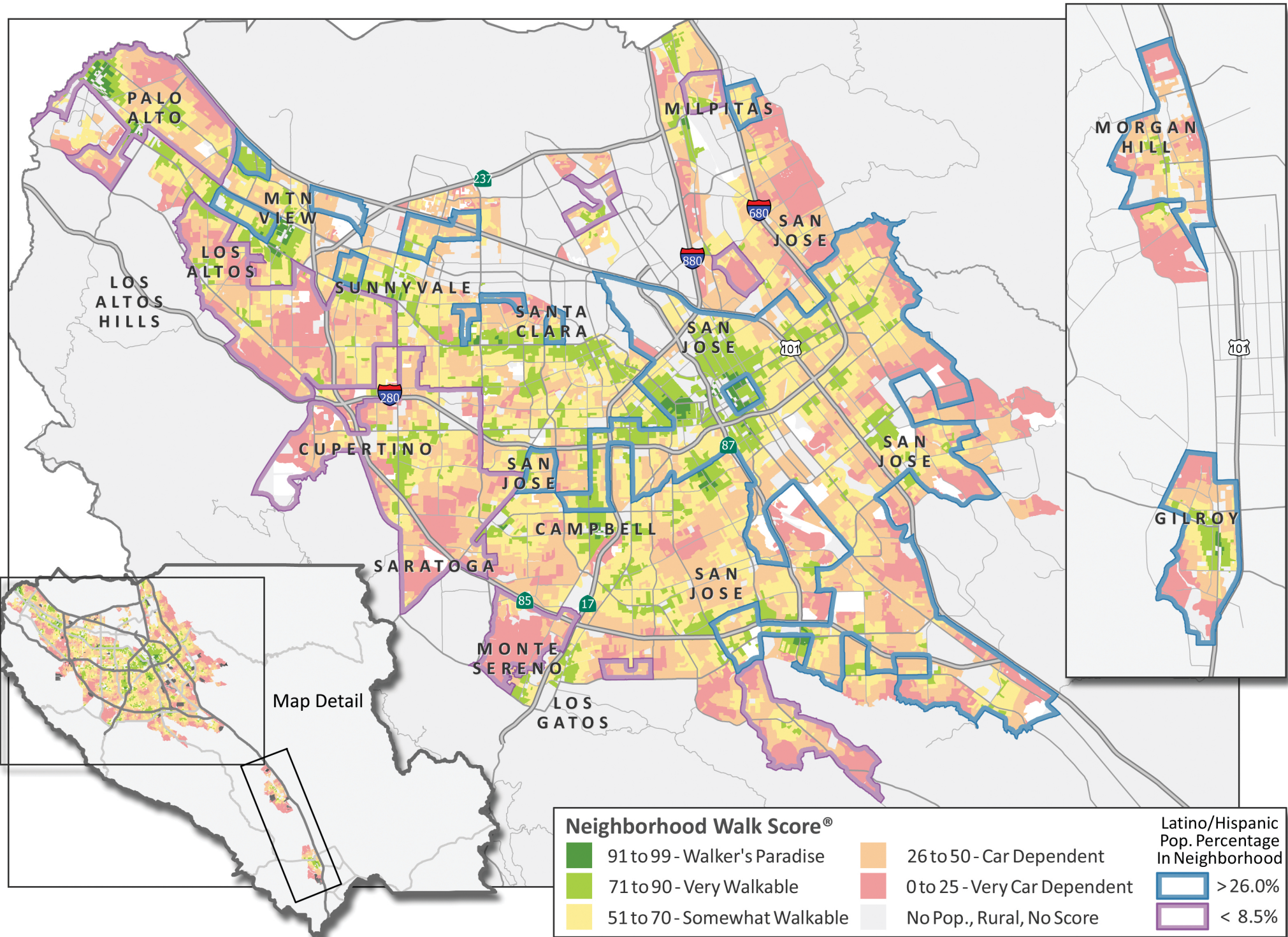
- Downtown areas of most cities have higher Walk Scores than other areas.
- Neighborhoods with a larger percentage of Latino/Hispanic residents have higher Walk Scores.
- Neighborhoods with a larger proportion of Latino/Hispanic residents have higher Walk Scores for schools, grocery stores and restaurants.

**Relationship to Latino Health:** Although neighborhoods with a larger percentage of Latinos/Hispanics are more walkable than other neighborhoods, Latinos/Hispanics may be more reluctant to walk in their neighborhoods due to concerns about violence or pedestrian safety. Neighborhood safety is explored later in this section.

### Neighborhood Walk Score® by Amenity Category by Percentage Latino/Hispanic Residents



Source: Walkscore.com, 2012 Streetsmart© Walk Score®



Map Detail

## Neighborhood Access to Supermarkets or Large Grocery Stores

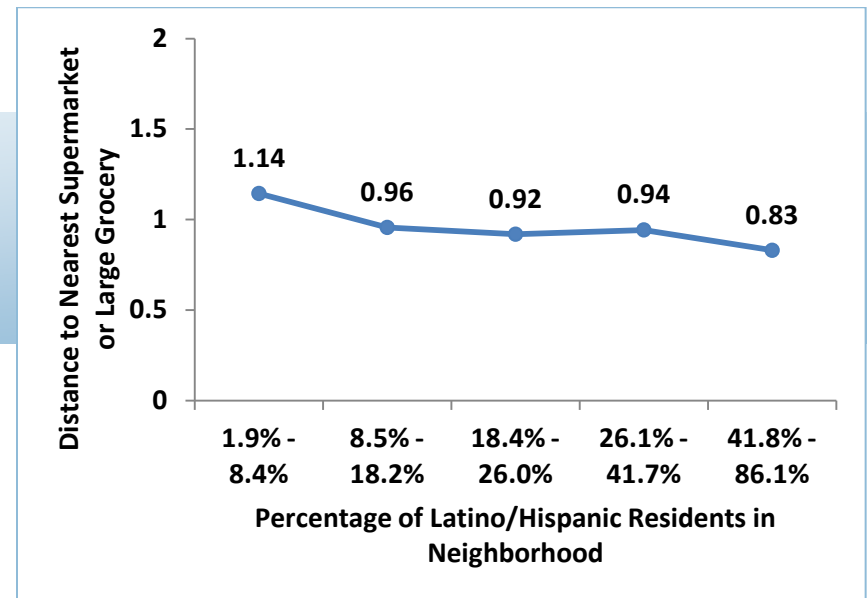
**Significance:** Living closer to markets that offer a wide variety of healthy foods encourages a healthier diet and maintenance of a healthier weight.<sup>(7) (8)</sup>

**About this Indicator:** The map shows the walking distance in miles to the nearest supermarket or large grocery store for neighborhoods with larger versus smaller proportions of Latino/Hispanic residents (compared to the countywide average of about one mile). The graph shows the average walking distance to the nearest supermarket or large grocery store in neighborhoods with different proportions of Latino/Hispanic residents.

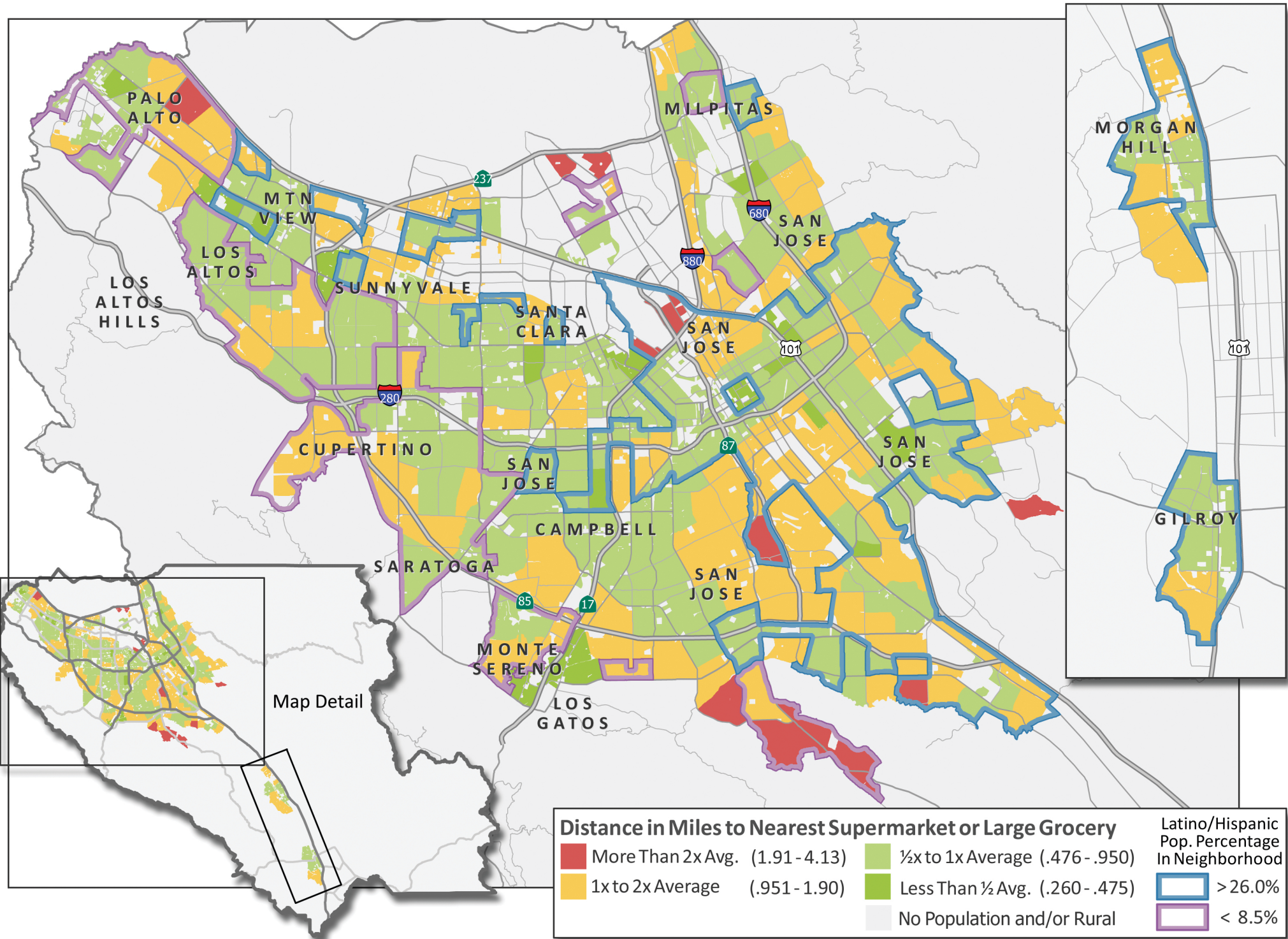
**Findings:** The average distance to the nearest supermarket or large grocery store is shorter in neighborhoods with a larger percentage of Latino/Hispanic residents.

**Relationship to Latino Health:** As described in Volume 1 of the report, Latinos/Hispanics in Santa Clara County eat fewer fresh fruits and vegetables than individuals from other racial/ethnic groups. These findings suggest that distance to supermarkets or large grocery stores may not be the most critical influence contributing to these risk factors. Other types of access issues, such as affordability, may instead be behind these patterns. See *Retail Food* and *Voices from the Community* in this volume.

### Distance to Nearest Supermarket or Large Grocery Store in Miles From Neighborhoods by Percentage Latino/Hispanic Residents



Source: InfoUSA, data acquired March 16, 2012



## Neighborhood Modified Retail Food Environment Index (mRFEI)

**Significance:** Better access to supermarkets and large grocery stores is related to a healthier diet and healthier weight. Availability of fast food in neighborhoods is connected to consumption of unhealthy food and presence of more convenience stores is related to obesity. <sup>(8)</sup>

**About this Indicator:** The modified Retail Food Environment Index (mRFEI) is the percentage of food retailers that are considered healthy within each neighborhood, out of the total number of health and unhealthy food retailers:

$$\text{Percent of Health Food Retailers} = 100 \times \frac{\text{\# of Healthy Food Retailers}}{\text{\# of Healthy Food Retailers} + \text{\# of Less Healthy Food Retailers}}$$

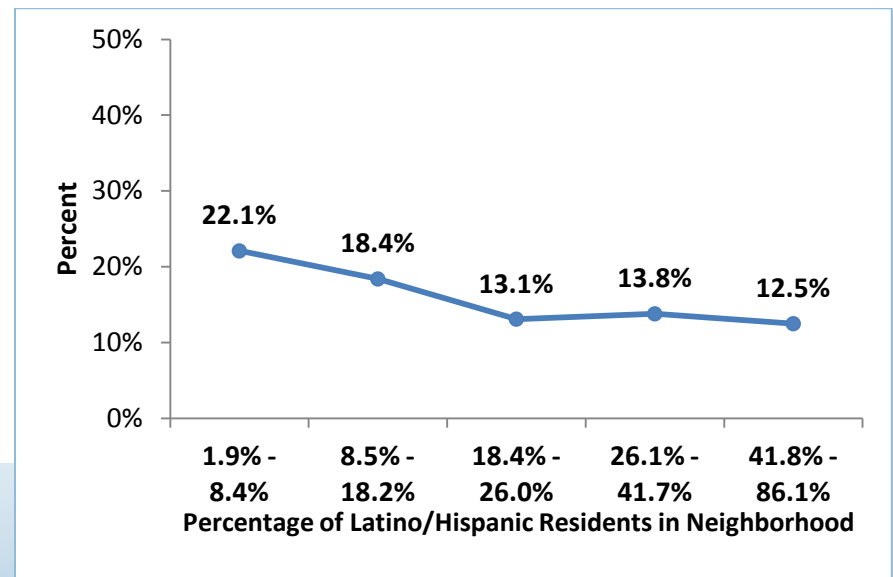
For more detail on this indicator, see CDC's mRFEI methodology. <sup>(9)</sup>

The map shows the mRFEI score for neighborhoods with larger versus smaller proportions of Latino/Hispanic residents. The graph shows the average score in neighborhoods with different proportions of Latino/Hispanic residents.

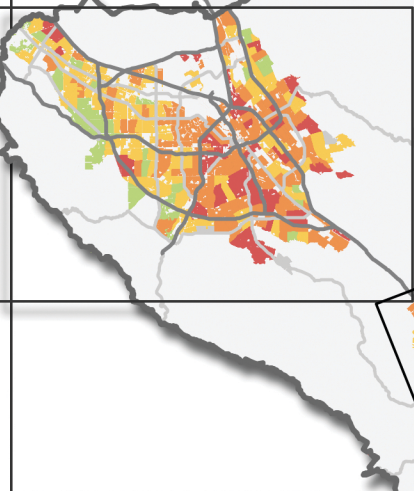
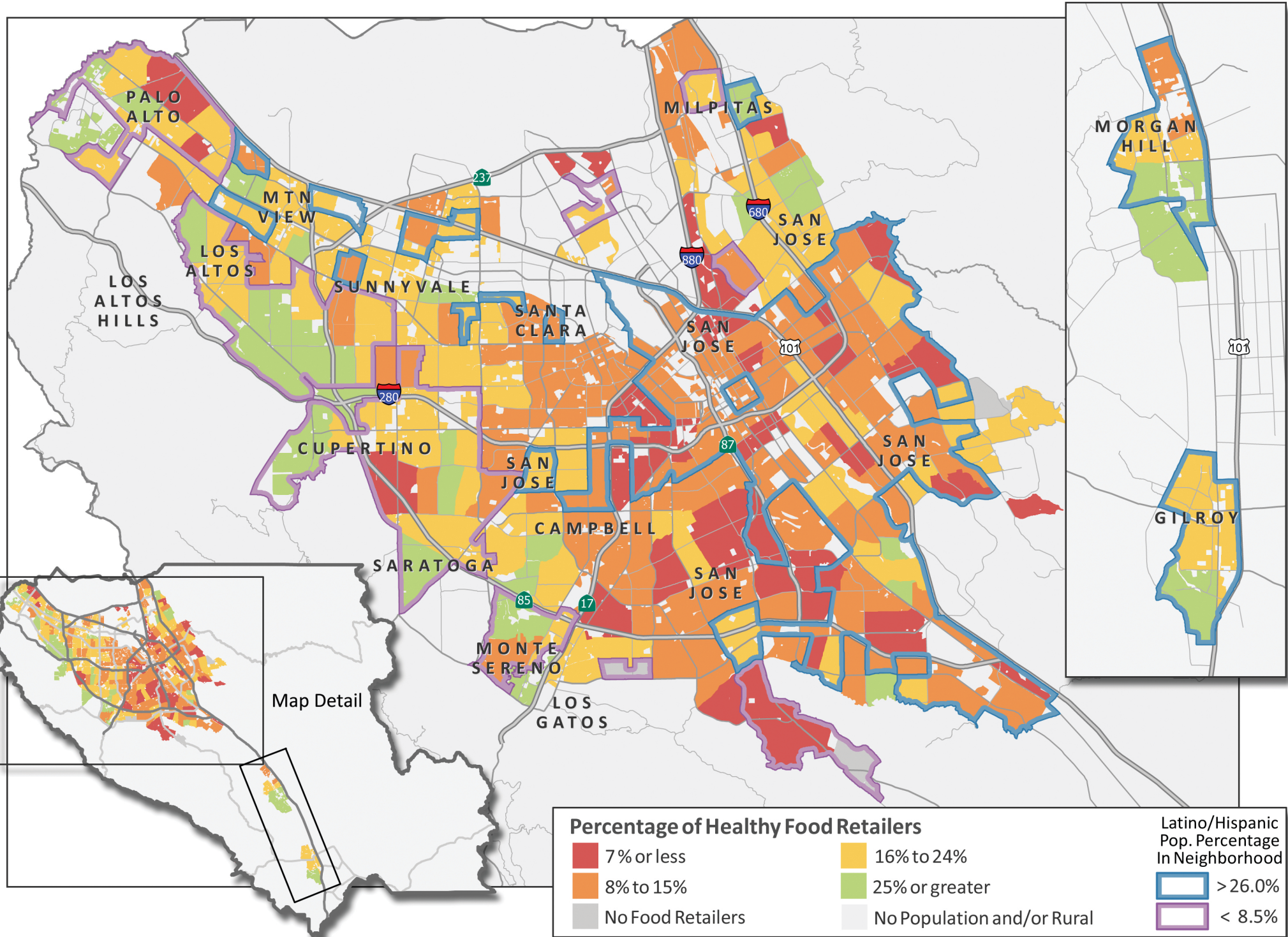
**Findings:** There is a smaller percentage of healthy food retail outlets, relative to the total number of healthy and unhealthy food retailers, in neighborhoods with a larger proportion of Latino/Hispanic residents.

**Relationship to Latino Health:** The previous map showed that people in neighborhoods with larger proportions of Latino/Hispanic residents live closer to supermarkets and large grocery stores. However, this map suggests there are proportionately fewer stores where residents can purchase healthy foods, relative to all of the healthy and unhealthy options available, in neighborhoods with a higher percentage of Latino/Hispanic residents. This may help to explain the tendency of Latinos/Hispanics countywide to eat fewer fresh fruits and vegetables and to eat fast food more frequently than other racial/ethnic groups (see Volume 1 of this report).

### Percent of Healthy Food Retailers



**Sources:** Santa Clara County Farmers' Markets 2012, Santa Clara County Division of Agriculture, 2012; InfoUSA, data acquired March 16, 2012



## ***Community Gardens and Certified Farmers' Markets***

**Significance:** Community gardens and farmers' markets provide access to healthy foods, including fresh produce, and may increase consumption of fruits and vegetables.<sup>(10)</sup> Farmers' markets that accept public assistance benefits (EBT) may help improve healthy food access in low-income neighborhoods.<sup>(11)</sup>

**About this Indicator:** The map shows the location of certified farmers' markets and community gardens in neighborhoods with larger and smaller proportions of Latino/Hispanic residents.

### **Findings:**

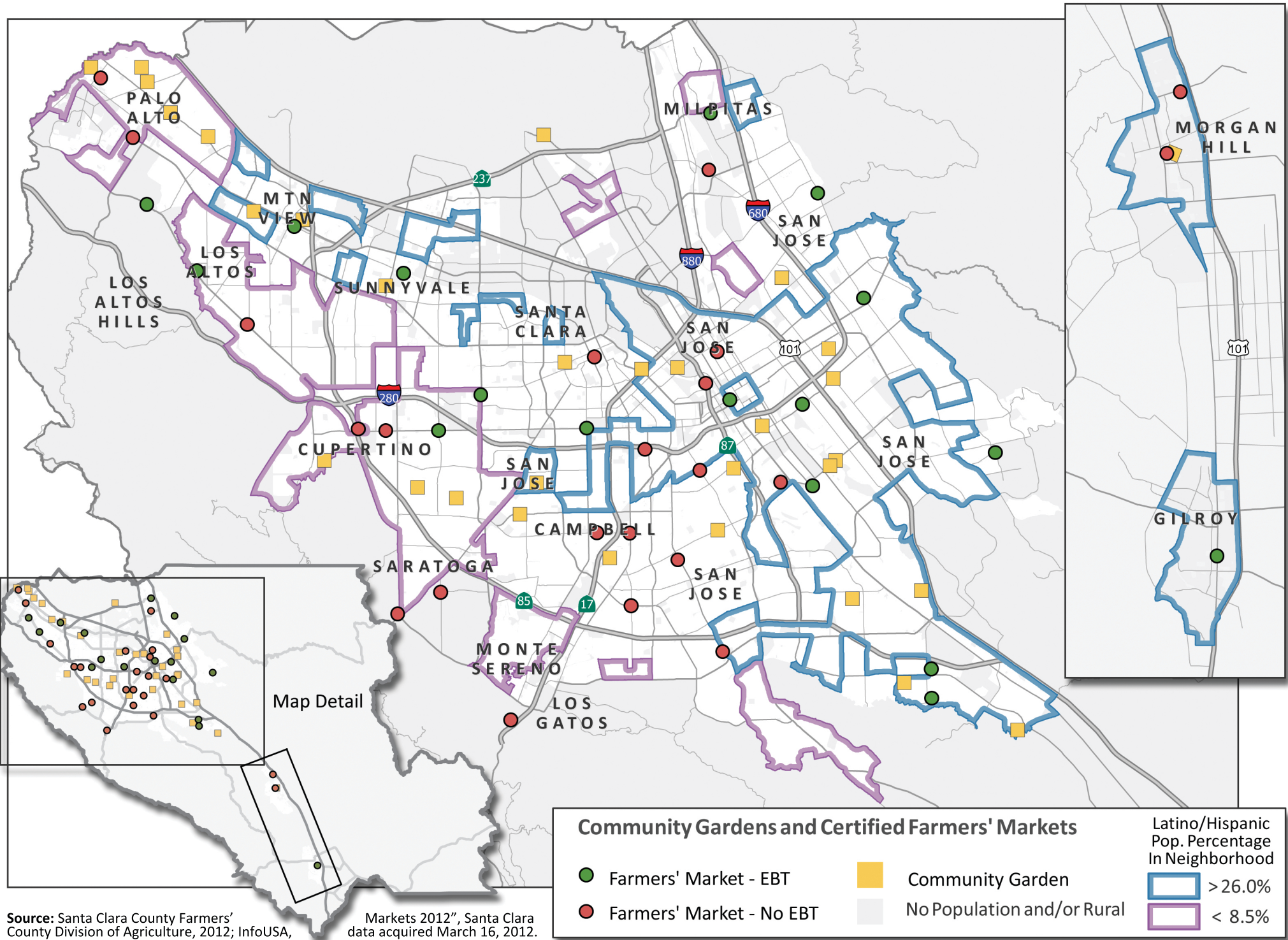
- Farmers' markets that accept EBT are predominantly located in neighborhoods with a higher percentage of Latinos/Hispanics.
- Community gardens are evenly distributed in more urban areas throughout Santa Clara County.

**Relationship to Latino Health:** As described in Volume I of this report, Latinos/Hispanics in Santa Clara County eat fewer fresh fruits and vegetables than individuals from some other racial/ethnic groups. These findings suggest that access to community gardens and certified farmers' markets may not be the most critical influence contributing to these risk factors. Other types of access issues, such as affordability, may instead be behind these patterns. See *Retail Food* and *Voices from the Community* in this volume.

**Source:** "Santa Clara County Farmers' Markets 2012", Santa Clara County Division of Agriculture, 2012; Brian Frost & Associates, 2009.







Source: Santa Clara County Farmers' County Division of Agriculture, 2012; InfoUSA,

Markets 2012", Santa Clara data acquired March 16, 2012.

## Pedestrian Collisions

**Significance:** Road safety in neighborhoods encourages walking among residents, including the number of children who walk to school.<sup>(12) (13)</sup>

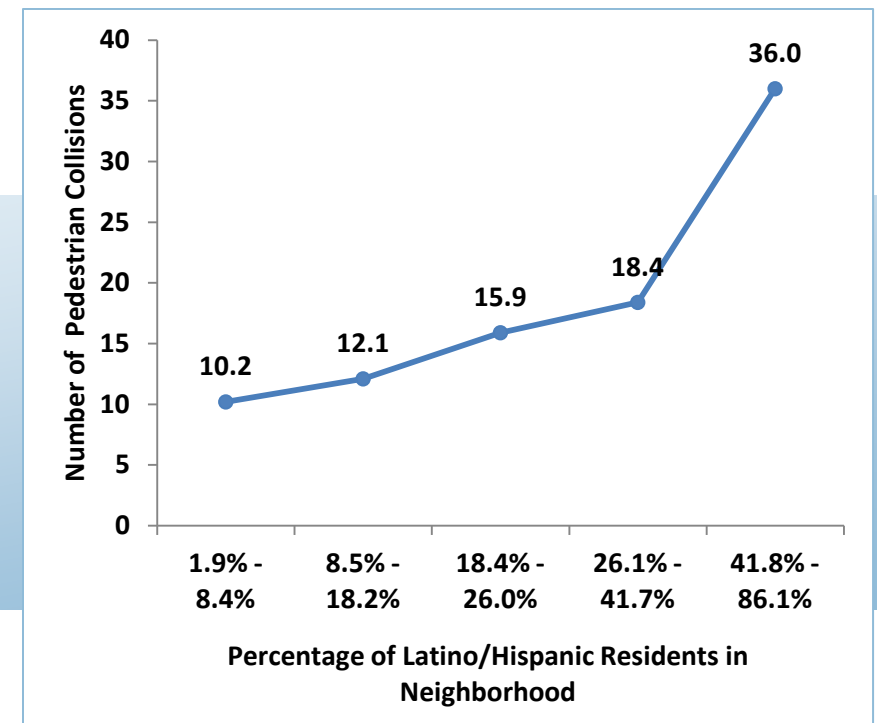
**About this Indicator:** The map shows the number of collisions involving cars and pedestrians within a one-mile radius of neighborhoods over a five-year period (compared to the countywide average of 14 collisions). These data are displayed for neighborhoods with a larger versus smaller proportion of Latino/Hispanic residents. The graph shows the average number of collisions in neighborhoods with different proportions of Latino/Hispanic residents.

### Findings:

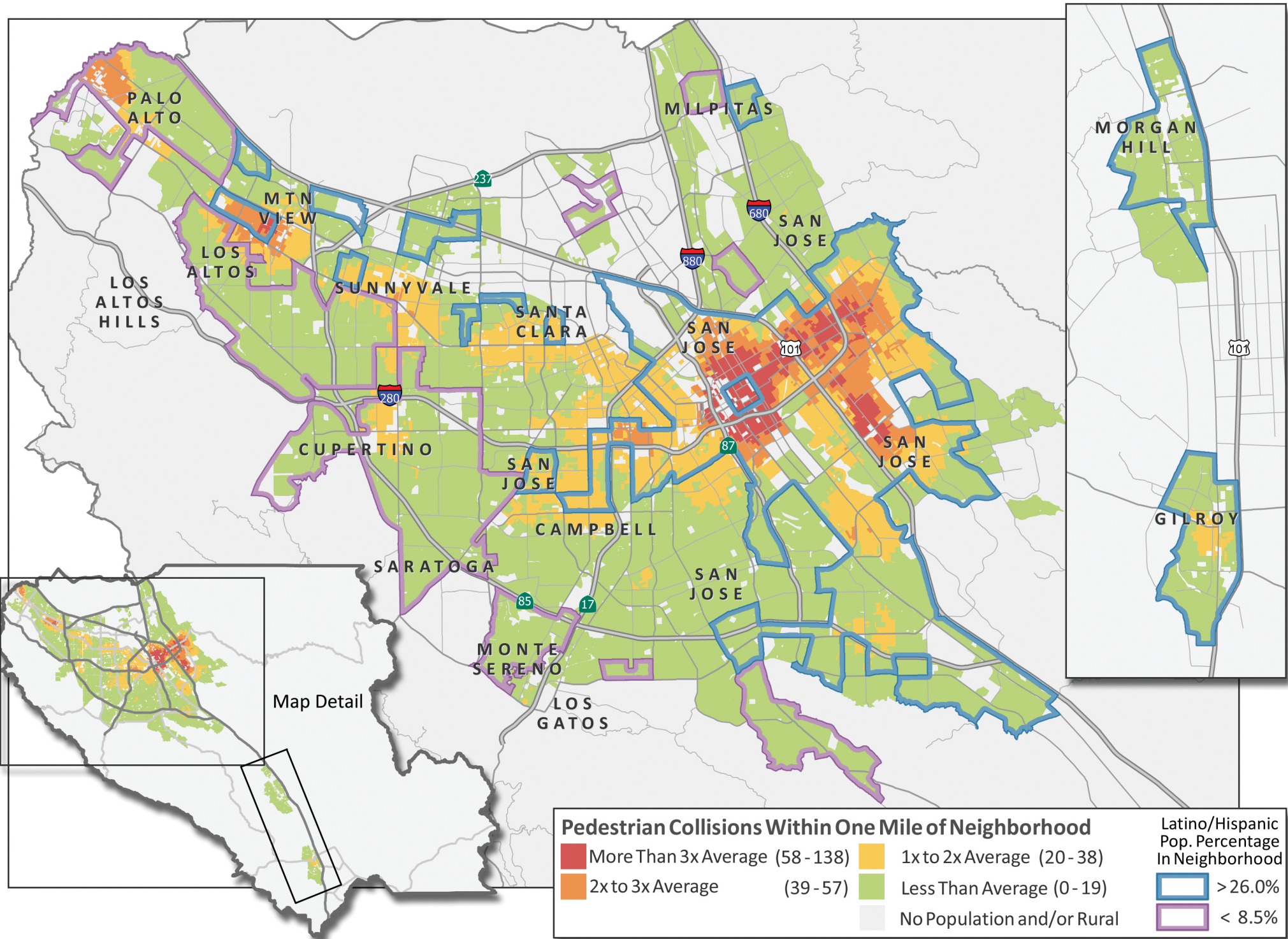
- Pedestrian collisions are more common in densely populated and high traffic areas like the downtown areas of cities.
- There are more pedestrian collisions in and around neighborhoods with a larger percentage of Latino/Hispanic residents.

**Relationship to Latino Health:** As described earlier in this section, it may be easier to walk to amenities in neighborhoods with larger proportions of Latino/Hispanic residents. However, high numbers of pedestrian collisions may discourage walking. This may be one of the many factors that help to explain higher rates of obesity among Latinos/Hispanics as well as lower levels of daily physical activity among Latino/Hispanic youth.

### Number of Pedestrian Collisions Within One Mile of Neighborhoods by Percentage Latino/Hispanic Residents



**Source:** Transportation Injury Mapping System, Statewide Integrated Traffic Records System, 2006-2010



## Bicycle Collisions

**Significance:** A safe road environment is essential for encouraging active transportation, including bicycling. Bicycling, a form of active transportation, can reduce obesity, protect the environment, reduce local congestion, and improve safety for all road users.<sup>(14) (15) (16)</sup>

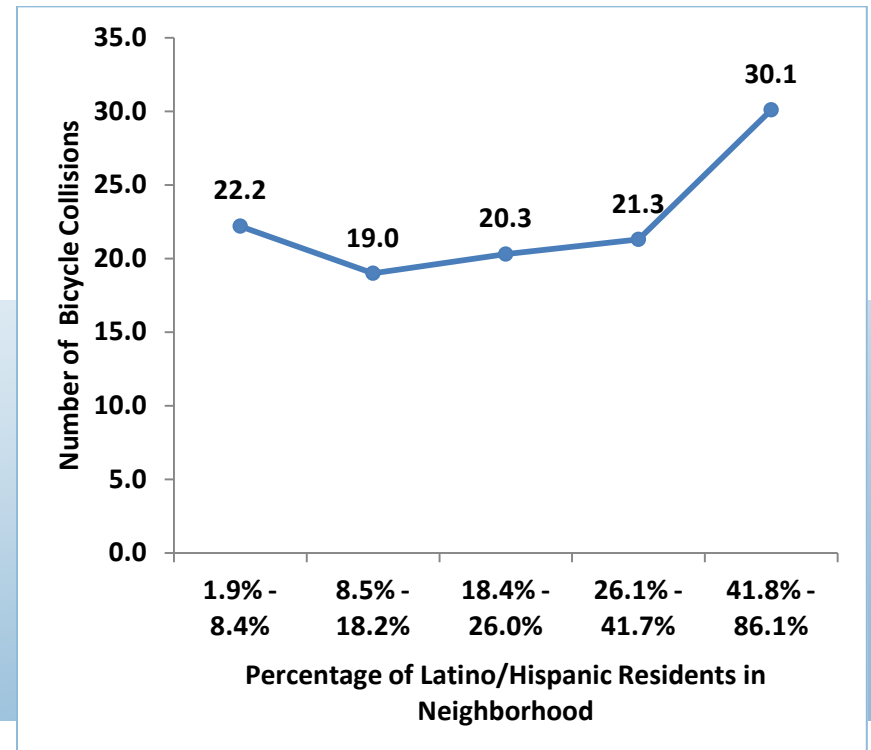
**About this Indicator:** The map shows the number of collisions involving cars and bicycles within a one-mile radius of neighborhoods over a five-year period (compared to the countywide average of 19 collisions). These data are displayed for neighborhoods with a larger versus smaller proportion of Latino/Hispanic residents. The graph shows the average number of collisions in neighborhoods with different proportions of Latino/Hispanic residents.

### Findings:

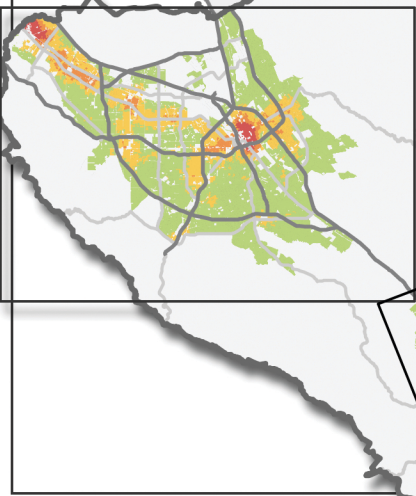
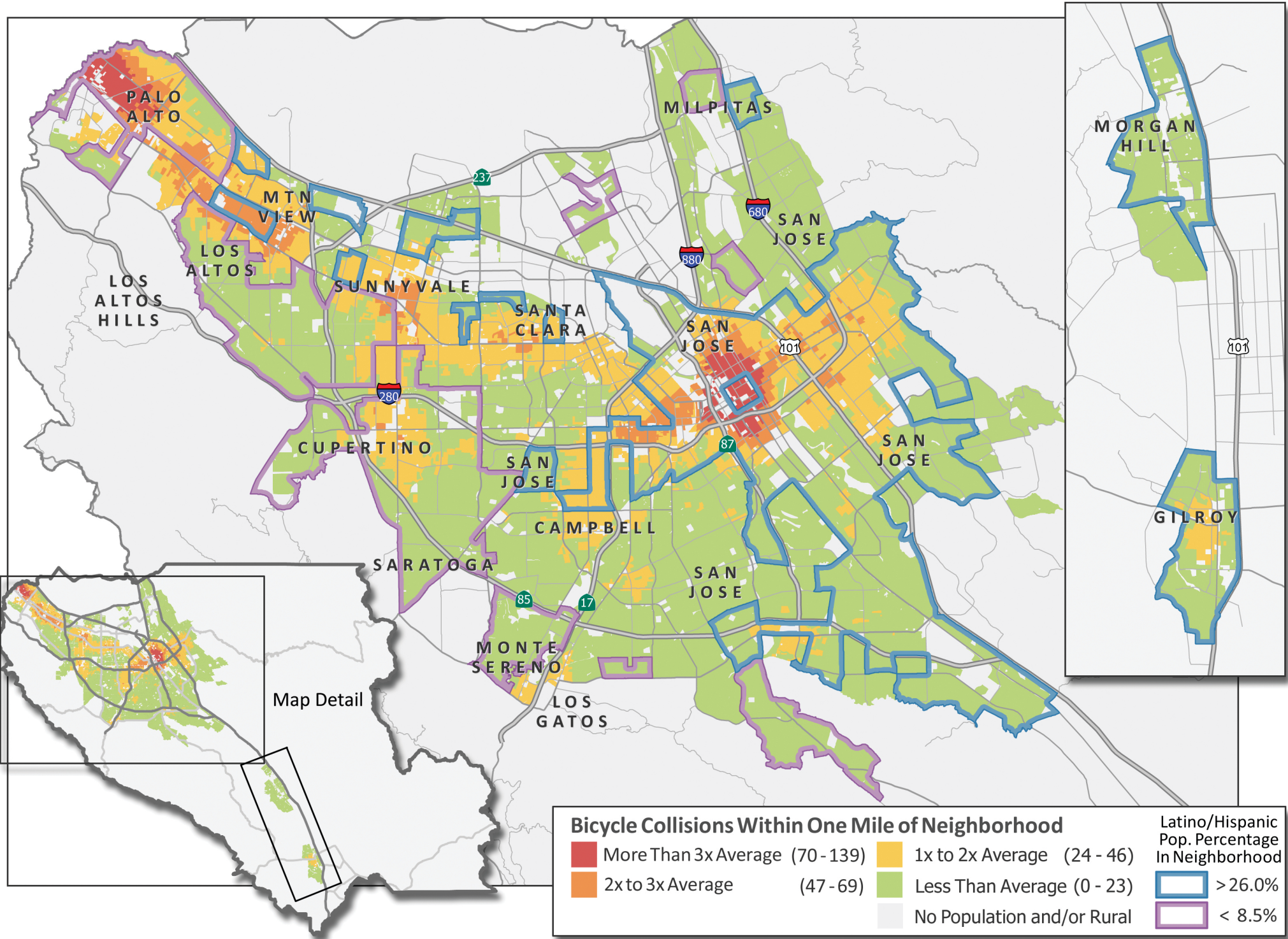
- Bicycle collisions are more common in densely populated and high traffic neighborhoods, like those in downtown areas of cities.
- There are more bicycle collisions in and around neighborhoods with a larger percentage of Latino/Hispanic residents.

**Relationship to Latino Health:** Unsafe biking conditions may discourage bicycling for errands and transportation. These conditions in predominantly Latino/Hispanic neighborhoods in Santa Clara County may help to explain higher rates of obesity among Latinos/Hispanics as well as lower levels of daily physical activity among Latino/Hispanic youth.

### Number of Bicycle Collisions Within One Mile of Neighborhoods by Percentage Latino/Hispanic Residents



Source: Transportation Injury Mapping System, Statewide Integrated Traffic Records System, 2006-2010



Map Detail

## ***Distance to the Nearest Park or Accessible Open Space***

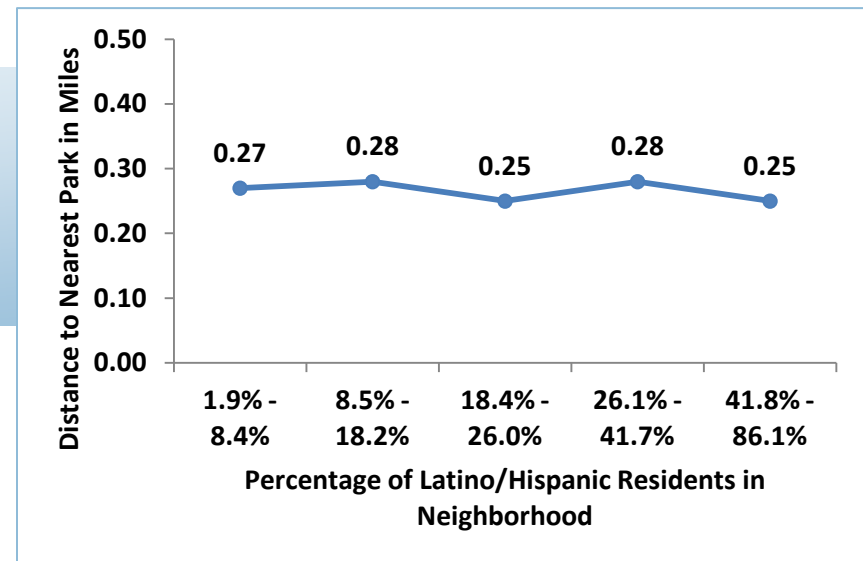
**Significance:** Parks and accessible open space encourage people to be more physically active by providing opportunities for exercise. Living near parks is shown to increase levels of physical activity.<sup>(17)</sup>

**About this Indicator:** The map shows the distance in miles from each neighborhood to the nearest park or accessible open space (compared to the countywide average of about a quarter mile). These data are displayed for neighborhoods with a larger versus smaller proportion of Latino/Hispanic residents. The graph shows the average distance to the nearest park or accessible open space in neighborhoods with different proportions of Latino/Hispanic residents.

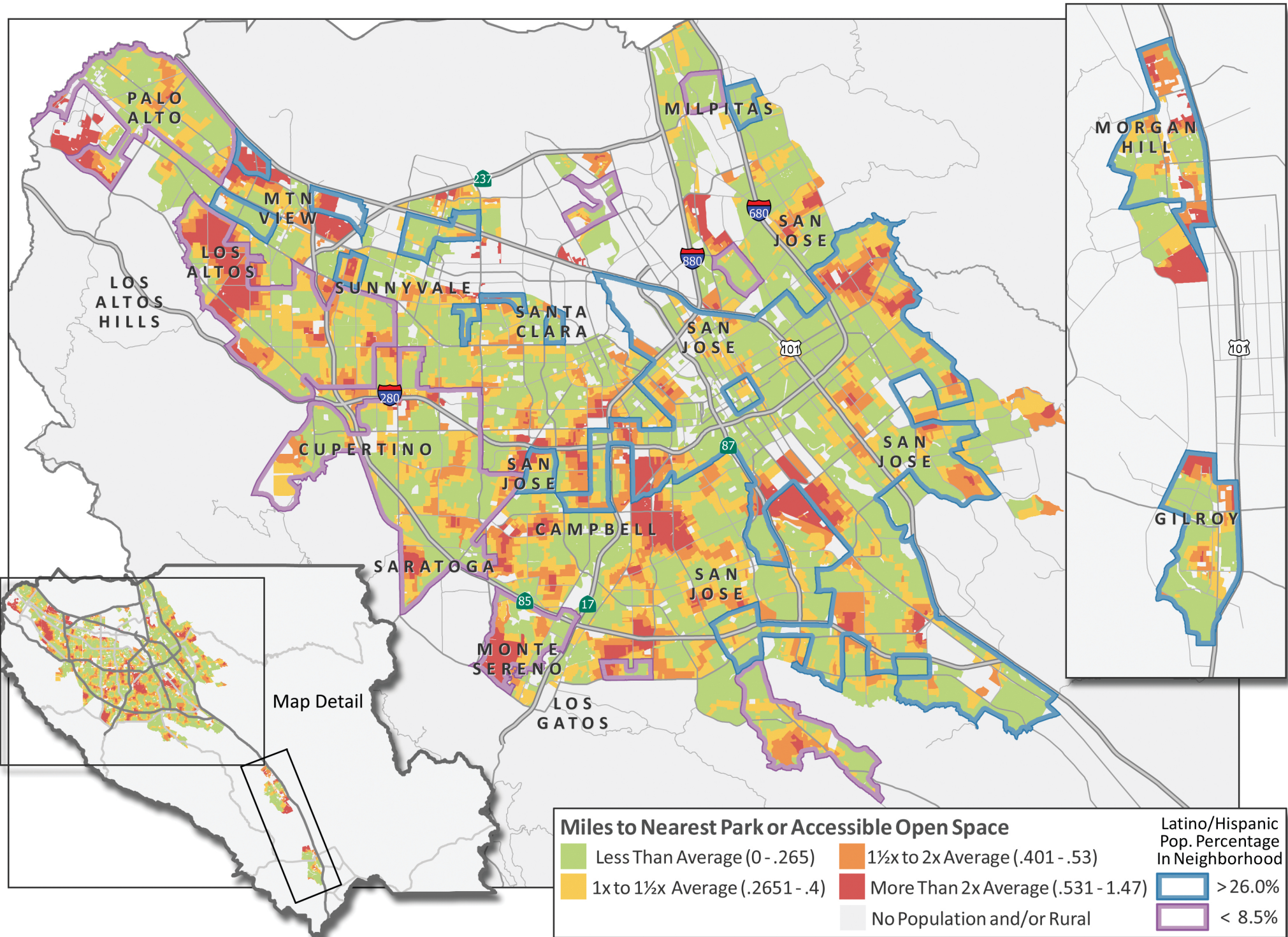
**Findings:** There is little difference in the distance to the nearest park or accessible open space for residents of neighborhoods with larger versus smaller percentages of Latino/Hispanic residents.

**Relationship to Latino Health:** Although residents of Santa Clara County neighborhoods with larger percentages of Latinos/Hispanics do not have to travel as far to parks or accessible open space, there may be other factors—such as crime or unsafe walking conditions—that discourage them from using these resources for physical activity. As described earlier, fewer Latino/Hispanic adults than White adults or adults countywide perceive that outdoor amenities in their neighborhoods are safe for walking, running or biking, and more perceive that crime is a problem in their neighborhoods. Violence around parks is explored later in this section.

### **Distance to Nearest Park or Accessible Open Space in Miles From Neighborhoods by Percentage Latino/Hispanic Residents**



**Sources:** California Protected Areas Database, 2011; Santa Clara County Parks and Recreation, 2012



## Violent Crimes in and around Neighborhoods

**Significance:** Violence is a serious public health issue, causing injury and disability, mental health issues, and premature death.<sup>(18)</sup> In addition, if residents perceive walking or playing in some areas to be unsafe, violence may interfere with physical activity.<sup>(19) (20)</sup>

**About this Indicator:** Violent crimes are defined as robberies, homicides, assaults with a deadly weapon, and sexual assaults. The map shows the number of violent crimes that occurred between August 1, 2010 and July 31, 2011 within one mile of each neighborhood (compared to the countywide average of 16 crimes). These data are displayed for neighborhoods with a larger versus smaller proportion of Latino/Hispanic residents. The graph shows the average number of violent crimes within one mile of neighborhoods with different proportions of Latino residents.

### Findings:

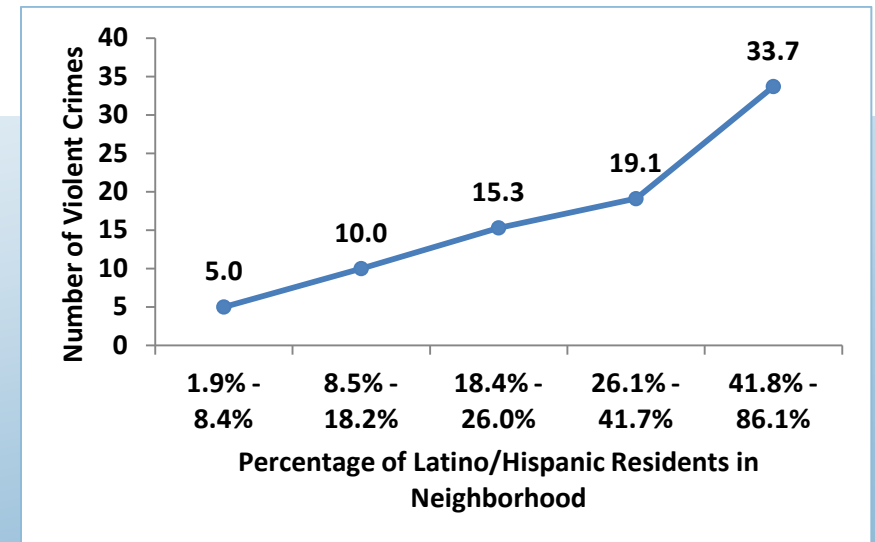
- The number of violent crimes is higher in and around neighborhoods with a larger percentage of Latino/Hispanic residents.
- Violent crime in and near neighborhoods with the largest percentage of Latino/Hispanic residents is more than six times higher than for neighborhoods with the lowest percentage.

**Relationship to Latino Health:** As described in Volume 1 of this report, Latinos/Hispanics in Santa Clara County are more likely to be overweight or obese than Whites or Asian/Pacific Islanders. Living in neighborhoods with higher crime may discourage walking and playing outside.

*“We had homicides in our neighborhood. The violence is really bad. When something like this happens we stop completely going out.”*

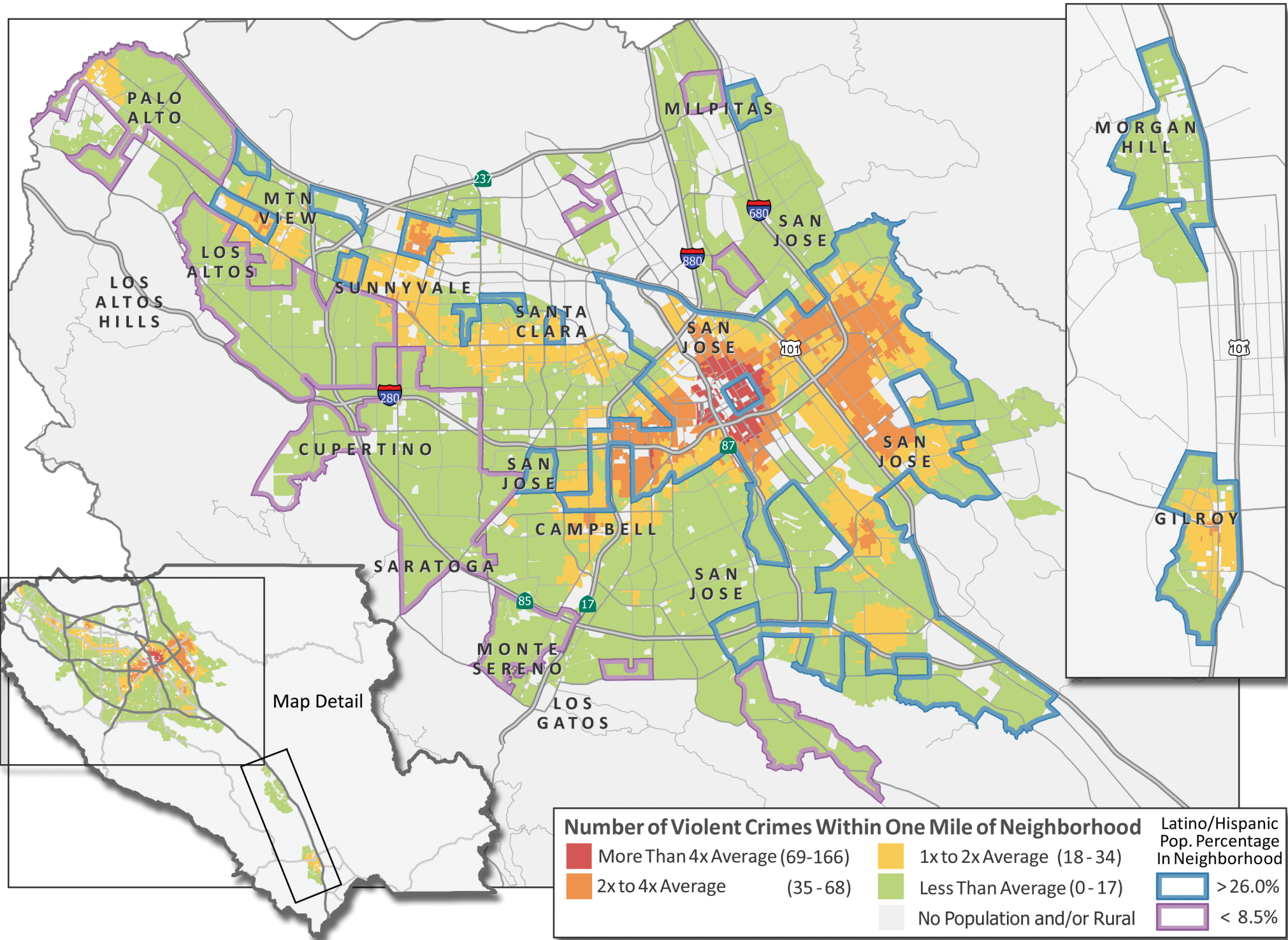
Tropicana/Dorsa/Miller community member

### Number of Violent Crimes Within One Mile of Neighborhoods by Percentage Latino/Hispanic Residents



Source: Public Engines, Inc., August 1, 2010 to July 31, 2011





PALO ALTO

MILPITAS

MORGAN HILL

MTN VIEW

SAN JOSE

LOS ALTOS HILLS

LOS ALTOS

SUNNYVALE

SANTA CLARA

SAN JOSE

CUPERTINO

SAN JOSE

SAN JOSE

CAMPBELL

SARATOGA

SAN JOSE

GILROY

MONTE SERENO

LOS GATOS

Map Detail

## Violent Crimes near Parks, Accessible Open Space, and Schools

**Significance:** Parks and schools provide opportunities for residents to be physically active. Violence near these areas may interfere with physical activity and prevent children from walking or biking to school.<sup>(21)</sup>

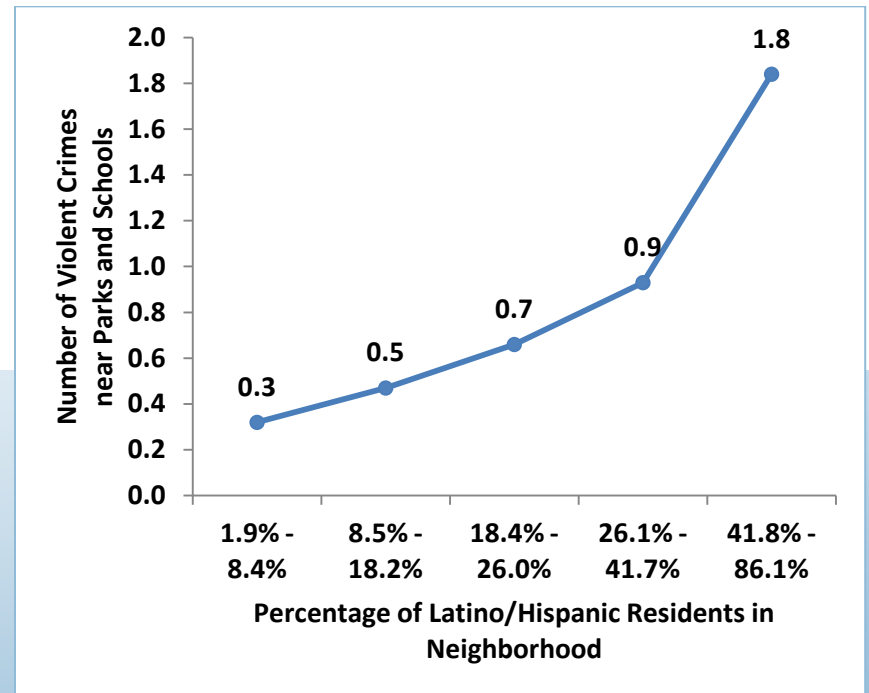
**About this Indicator:** Violent crimes are defined as robberies, homicides, assaults with a deadly weapon, and sexual assaults. The map shows the number of crimes that occurred within 500 feet of each park, accessible open space, or school between August 1, 2010 and July 31, 2011 (compared to the countywide average of about 1 crime incident per park, accessible open space, or school). This data is displayed for neighborhoods with a larger versus smaller proportion of Latino/Hispanic residents. The graph shows the average number of violent crime incidents within 500 feet of each park, accessible open space, or school in neighborhoods with different proportions of Latino residents.

### Findings:

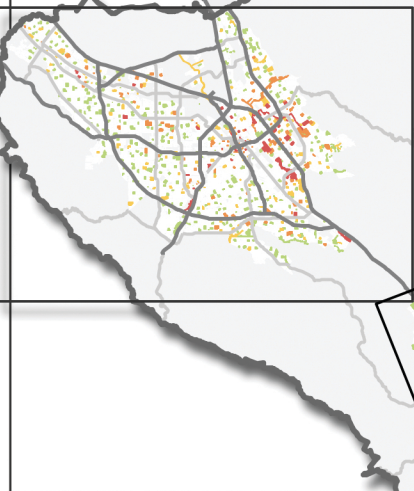
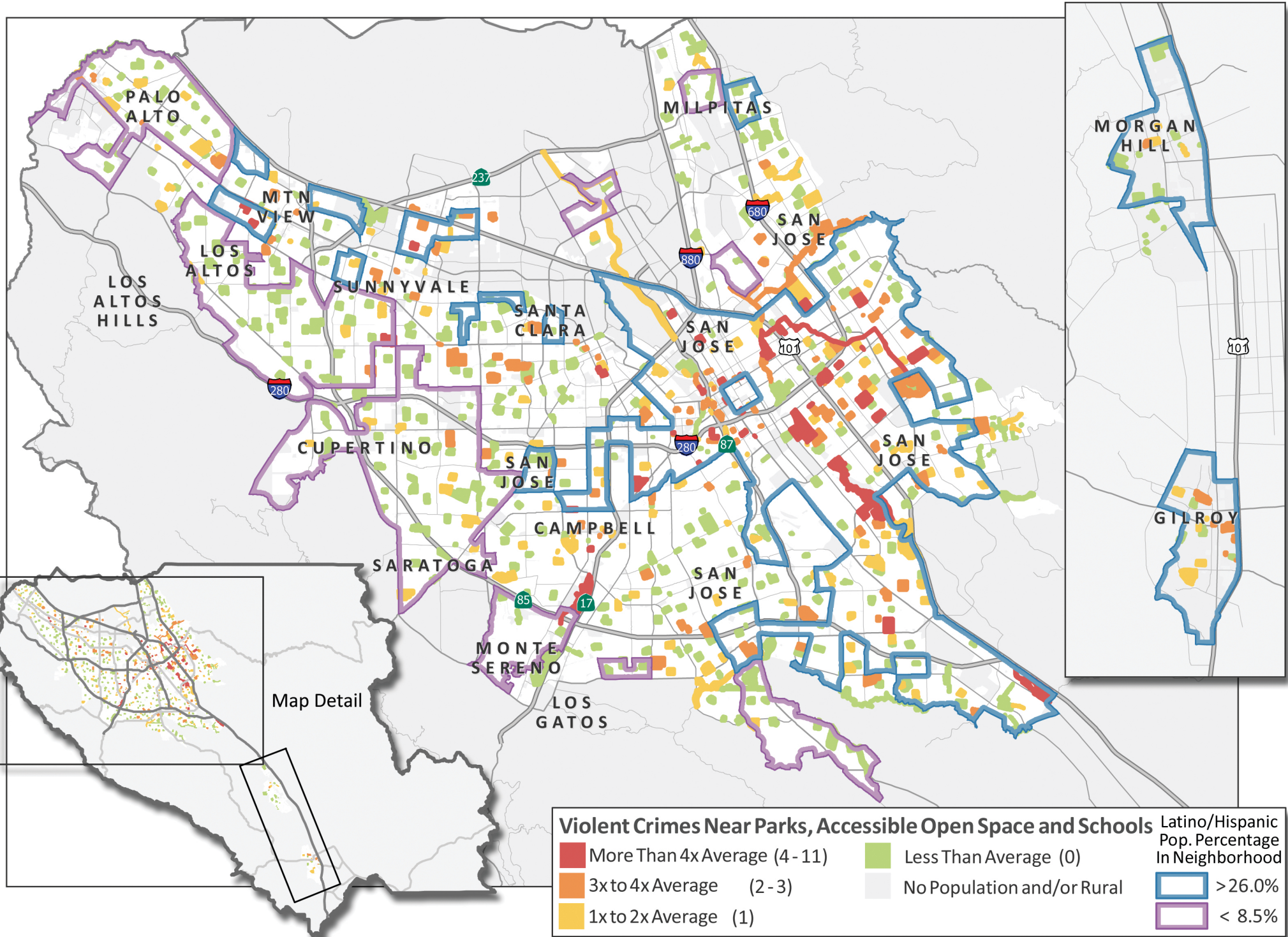
- The number of violent crimes near parks, accessible open space, and schools is higher in and around neighborhoods with a larger percentage of Latino/Hispanic residents.
- Violent crime rates near parks, accessible open space, and schools in neighborhoods with the largest percentage of Latino/Hispanic residents are six times higher than in neighborhoods with the lowest percentage of Latino/Hispanic residents.

**Relationship to Latino Health:** As described in Volume 1, Latino/Hispanic youth and adults get less physical activity than those from some other racial/ethnic groups. Although neighborhoods with the largest percentage of Latino/Hispanic residents have comparable access to parks and accessible open space as other neighborhoods, the higher number of violent crimes near these resources may discourage residents from walking and playing outside.

### Number of Violent Crimes Within 500 Feet of Parks, Accessible Open Space, and Schools in Neighborhoods by Percentage Latino/Hispanic Residents



Source: Public Engines, Inc., August 1, 2010 to July 31, 2011



## **Chapter 3: Surveys of Nutrition, Physical Activity, and Safety Conditions**

The following chapter highlights the health and safety conditions of retail food stores, food banks and emergency food outlets, childcare facilities, schools, mobile food vendors, and streets in eight selected Santa Clara County neighborhoods with a high percentage of Latino/Hispanic residents. See the Methodology section online for more details ([www.sccgov.org/statistics2](http://www.sccgov.org/statistics2)).

### ***Retail Food***

#### **Purpose of the Assessment**

As part of the assessment of the food choices available to neighborhood residents, we visited most of the stores that sell food items in the eight selected neighborhoods. The purpose of the assessment was to assess whether residents have good access to affordable, healthy, and high quality foods close to where they live, as well as how much healthy and unhealthy marketing residents are exposed to when they shop for food.

The availability of supermarkets within a neighborhood is linked to lower rates of obesity and higher rates of fruit and vegetable intake, while the presence of convenience stores is linked to higher rates of obesity and overweight.<sup>(22) (23)</sup> There are differences in the price and availability of healthy foods between poor and wealthy communities and between different types of stores in the United States.<sup>(22)</sup> Small convenience stores or independent grocery stores charge higher prices than supermarkets, and access to supermarkets is generally lower in low-income neighborhoods.<sup>(8)</sup> These factors may have a greater impact on the county's Latino/Hispanic population because, on average, they have lower household incomes and higher rates of poverty than some other racial/ethnic groups (see Volume 1 of this report).

#### **How We Did the Assessment**

To assess stores, we used a modified version of the Communities of Excellence in Nutrition, Physical Activity, and Obesity Prevention (CX3) Food Availability and Marketing Survey. This survey identifies the types of stores as well as the prices and availability of healthy foods in each neighborhood.

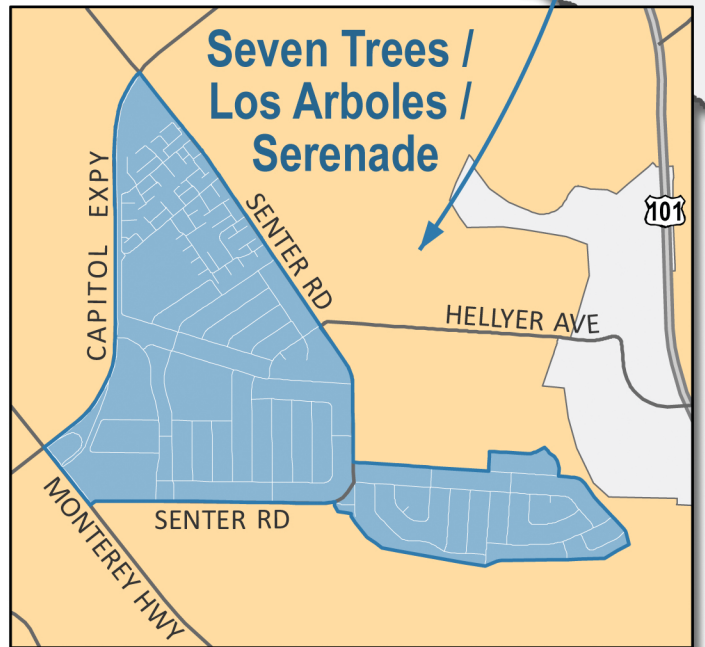
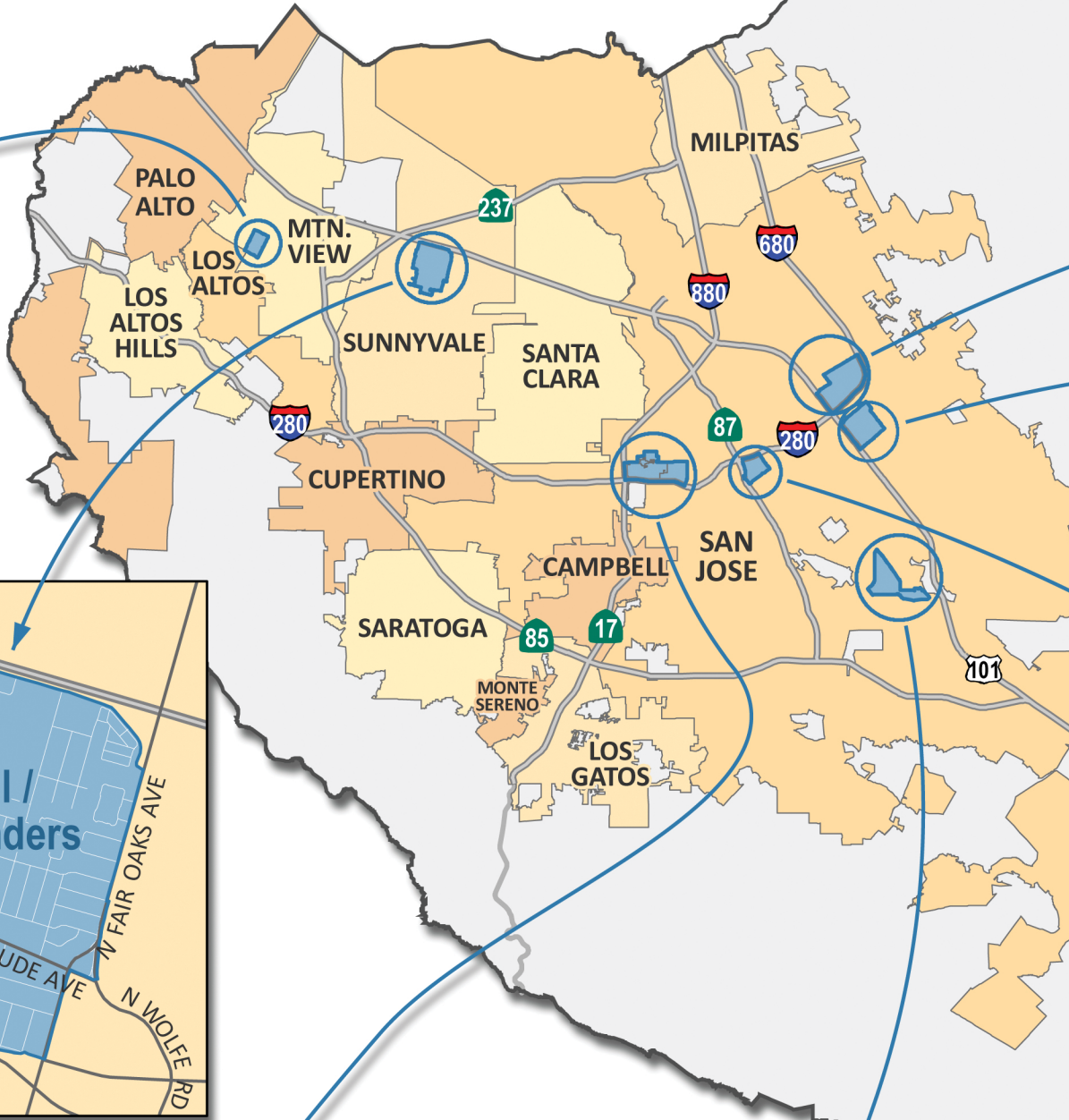
We calculated an overall score for each market in each neighborhood based on indicators such as availability, quality, and price of produce; participation in food assistance programs; and advertising of healthy and unhealthy foods. We compared the average score for each type of market within each of the neighborhoods with a "healthy standard" score set by CX3. See the Methodology section online for more details ([www.sccgov.org/statistics2](http://www.sccgov.org/statistics2)).

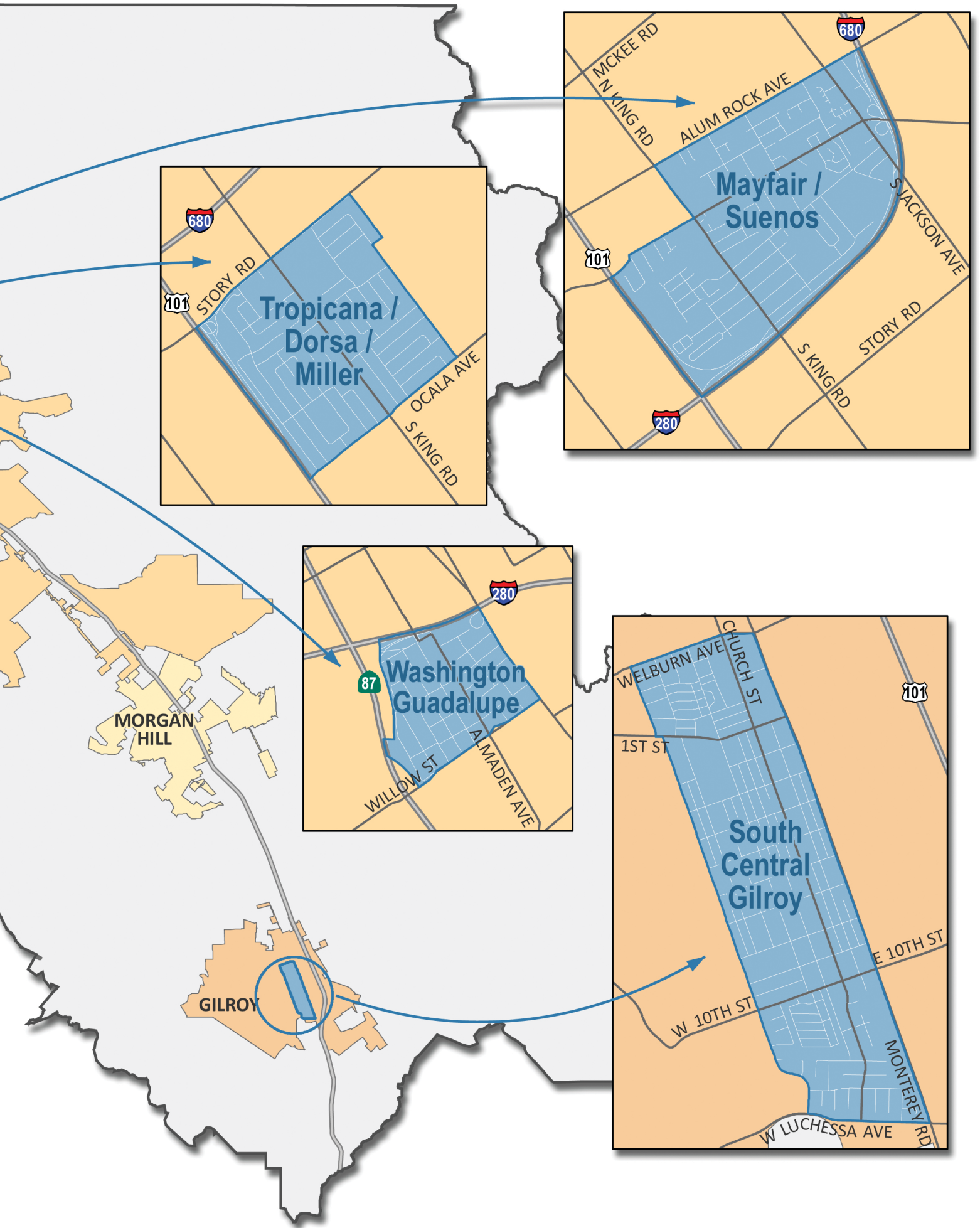
In each neighborhood, we measured four categories associated with the availability and marketing of both healthy and unhealthy foods. The detailed analysis included the following overall store scores:

- Marketing (advertising inside and outside stores)
- Produce (the availability, quality, and price of produce)
- Other Healthy Products (availability of healthy products other than produce)
- Safety and Food Programs (safety and food program access)

## Key Findings

- Very few stores scored high enough to meet the county standards for excellence in food retail.
- Supermarkets and large grocery stores received the highest scores on average and convenience stores scored the lowest.
- Stores in general were more likely to advertise for unhealthy products than healthy products, both outside the store and in the checkout area.
- Supermarkets and large grocery stores have the highest quality and widest variety of produce of any store type. Small markets tend to sell produce but have a limited variety.
- Supermarkets and large grocery stores tend to stock many healthy food options. Small markets and stores in the “other” category such as pharmacy chains and 99 cent stores often have some healthy food products. Convenience stores have the fewest healthy products of any type of store.

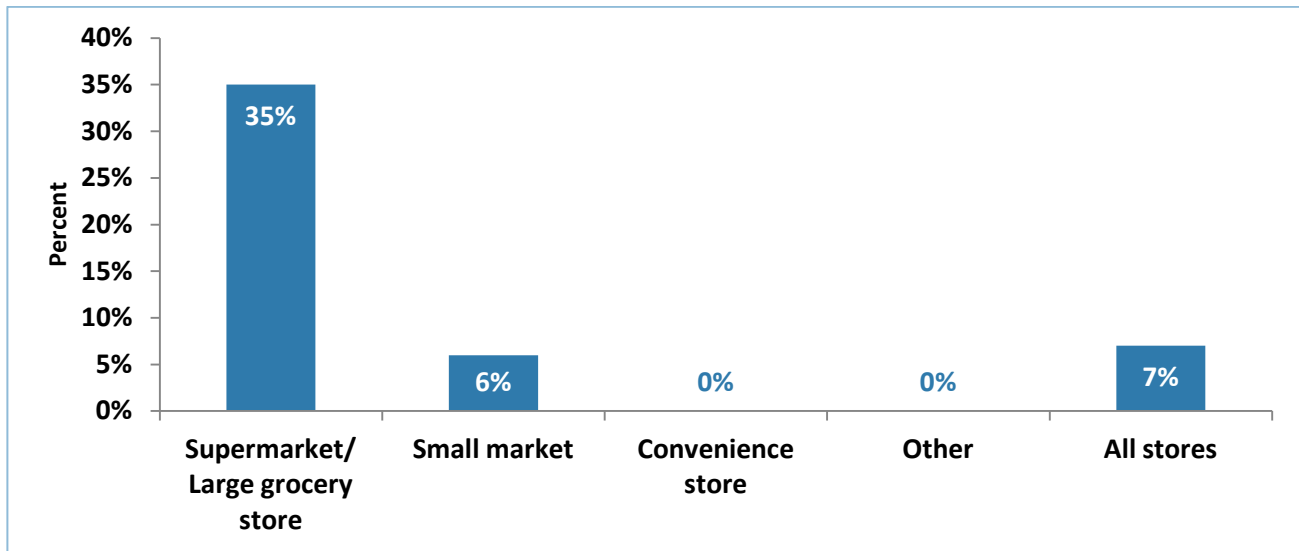




## Overall Store Scores by Store Type

The following graph displays the percentage of stores that met a “healthy standard” score of at least 75 out of a possible 100 points on the survey. Only 7% of stores surveyed across all store types met the county standard. Supermarkets and large grocery stores were most likely to meet standards. No convenience stores or stores in the “other” category that were included in the assessment met standards.

## Percentage of Stores that Met Standards by Store Type



Source: Santa Clara County Public Health Department, Status of Latino/Hispanic Health 2012, CX3

## Marketing

In-store marketing is one of the factors that can influence food purchases, diets, and health outcomes.<sup>(24)</sup> Low-income youth and adults are disproportionately exposed to marketing for unhealthy products, and children are especially vulnerable to the influence of such advertising.<sup>(25)</sup>

Stores were generally more likely to have marketing on the exterior of the store than in the checkout area. About a third of all stores had healthy advertising on the outside of the store; supermarkets and convenience stores were most likely to have advertising for healthy products on the store exterior. Very few stores had any type of healthy marketing in the checkout area. Convenience stores were the most likely to have advertising for unhealthy products both in the checkout area and outside the store. Since food and beverage marketing often targets children more than other groups, unhealthy marketing may be an especially important area for intervention.<sup>(25)</sup>





## Healthy and Unhealthy Marketing by Store Type

	Where marketing is displayed	Supermarket chain/Large grocery store	Small market	Convenience store	Other	All stores
# stores surveyed		22	18	61	19	120
Ads for healthy products	On store exterior	36%	22%	36%	21%	32%
	In checkout area	5%	6%	5%	0%	4%
Ads for unhealthy products	On store exterior	36%	56%	92%	26%	66%
	In checkout area	14%	22%	57%	26%	39%

Source: Santa Clara County Public Health Department, Status of Latino/Hispanic Health 2012, CX3

### Produce

Fruits and vegetables are often less available and more expensive in low-income neighborhoods and the price of healthy items such as produce can vary widely by store type. <sup>(26)</sup>

All supermarket chains and large grocery stores sold produce and most had a wide variety of quality fruits and vegetables. Small markets were almost as likely to have produce as supermarkets and large grocery stores, although they were much less likely to have a wide variety and less than a third had good quality produce. About a third of all convenience stores sold produce although very few were of good quality or variety. Stores in the “other” category such as 99 cent stores and pharmacy chains were less likely to sell produce than other types of stores, but those who did sell produce tended to have a wide variety of both fruits and vegetables.

***“The problem is that we go for the convenience. We could make a simple pasta soup like we used to make in Mexico, natural with tomato. You can make breakfast. Instead, we grab something quick and easy and say, “Eat it”. That’s not good for us. To find nutritious food, you don’t need science or special places or lots of money.”***

Seven Trees/Los Arboles/Serenade community member

Of the stores that sold produce, about half had at least one item priced under the average across all stores; no convenience stores had a price posted under the county average across all stores. These findings suggest that produce in many stores in the eight selected neighborhoods is more expensive than in other neighborhoods within the county. When considering the income status of many of the Latino/Hispanic residents in these areas, cost may be just as important as availability. Increasing the number of stores that sell produce and improving the quality and variety of produce offered could help to increase fruit and vegetable consumption. This is particularly important because fruit and vegetable consumption is low among Latino/Hispanic residents, and 35% of the county’s Latino/Hispanic adults do not think it is easy to find good quality produce (see Volume 1 of this report and *The Environment and Health* in this volume).

***“There is a lot of junk food around our neighborhoods. We don’t have stores to choose from or many options. Everything is far away and our children are hungry, what are we to do?”***

Seven Trees/Los Arboles/Serenade community member

**Fruit and Vegetable Variety, Quality, and Affordability by Store Type**

	Supermarket/ Large grocery store	Small market	Convenience store	Other	All stores
Store sells produce	100%	89%	30%	26%	51%
Wide variety of fruits available	91%	44%	0%	60%	49%
Wide variety of vegetables available	91%	56%	6%	60%	54%
All or most fruit is good quality	73%	33%	18%	40%	44%
All or most vegetables are good quality	77%	25%	0%	50%	47%
Has at least one produce item priced under the county average	83%	56%	0%	60%	50%

Source: Santa Clara County Public Health Department, Status of Latino/Hispanic Health 2012, CX3

**Other Healthy Products (Non-Produce)**

The availability of healthy foods in stores is positively associated with healthier diets in neighborhood residents.<sup>(27)</sup>

Supermarkets and large grocery stores, on average, had the largest number of healthy products. Almost all supermarkets and large grocery stores sold all of the 30 healthy products surveyed, selling 25 out of the 30 healthy foods on average. Small markets and stores in the “other” category often had at least some healthy foods, with two-thirds having at least 10 of the healthy products. However, few small markets had most of the healthy foods on our list. Few convenience stores had even a minimal number of the healthy foods surveyed.

### Other Healthy Products (Non-Produce) by Store Type

	Supermarket/ Large grocery store	Small market	Convenience store	Other	All stores
# stores surveyed	22	18	61	19	120
Has at least 10 of the 30 healthy foods	100%	67%	23%	72%	51%
Has at least 20 of the 30 healthy foods	86%	11%	0%	17%	20%

Source: Santa Clara County Public Health Department, Status of Latino/Hispanic Health 2012, CX3

### Safety and Food Programs

About a quarter of all stores surveyed had permanent bars or chains on the storefront windows or door; about one-third of convenience stores and a quarter of small markets had bars or chains. In addition, some stores were not in compliance with a law that prohibits stores that sell alcohol from covering more than one third of their windows with advertising of any kind. About one-third of all stores and over half of convenience stores surveyed were not in compliance with this law. These factors may contribute to residents’ sense that public areas are not safe (see *Voices from the Community* in this volume).

Out of the 120 stores surveyed, 13 were confirmed WIC vendors and more than half (67) were CalFresh/SNAP (food stamp) vendors. Not all WIC and CalFresh/SNAP vendors displayed signage indicating that they participate in these food assistance programs; 69% of WIC vendors and only 24% of CalFresh/SNAP vendors displayed visible signage on the store exterior indicating that they participate in the program. This may contribute to residents’ perceptions that healthy foods are not affordable or available in their neighborhoods, and may be especially important for Latino/Hispanic mothers and children, since this population makes up 73% of WIC participants in Santa Clara County.

***“Let me give you an example. What’s cheaper? Buying a lemon soda or buying lemons to make a lemonade? The lemon soda would be 99 cents. Getting the lemons is a healthier choice but not a lot of people have the money to buy them.”***

South Central Gilroy community member

## Outdoor Marketing

We assessed outdoor marketing of food and physical activity near schools and parks in the eight neighborhoods. There were very few to no advertisements throughout the eight neighborhoods. Although it is a positive sign that there were few advertisements for unhealthy products around schools and parks, it is also a missed opportunity to promote healthy foods and physical activity to children and their families.

## ***Food Banks and Emergency Food Outlets***

### Purpose of the Assessment

During the economic recession, an increasing number of individuals and families have relied on food pantries and other emergency food outlets to supplement their nutritional needs. In 2009, 17% of Latino/Hispanic adults in the county received food from a church, food pantry, or food bank within the past 12 months, a higher percentage than Whites (5%), Asian/Pacific Islanders (6%), and the county overall (9%). With nearly 1 in 5 Latino/Hispanic adults requiring food assistance, it is important that the county's food banks and emergency food outlets provide nutritious foods. Although some food banks have policies about what types of foods they accept as donations, many food banks are wary of turning away donations of unhealthy foods.

***“Some people have not learned how to cook. They don’t even use their oven except to store pots and pans. They fry.”***

**Food pantry distributor**

Pantry directors cite the inconsistent availability of healthy foods and lack of proper storage space as significant barriers to providing fresh produce and other healthy products on a regular basis. <sup>(28)</sup>

Food insecurity and low-income status are positively associated with obesity in certain populations, and visitors to food pantries are often obese or have poor diet quality. <sup>(29) (30)</sup> Food banks and emergency food outlets have the potential to support healthy eating and prevent obesity by adopting supportive food service policies and practices.

### How We Did the Assessment

To assess the types of foods available and the nutritional policies in place at local food banks and outlets, we used the CX3 Food Bank and Emergency Food Outlet Survey. We surveyed 57 emergency food outlets in the eight selected neighborhoods, and interviewed staff from Second Harvest Food Bank of Santa Clara and San Mateo Counties. See the Methodology section online for further details ([www.sccgov.org/statistics2](http://www.sccgov.org/statistics2)).

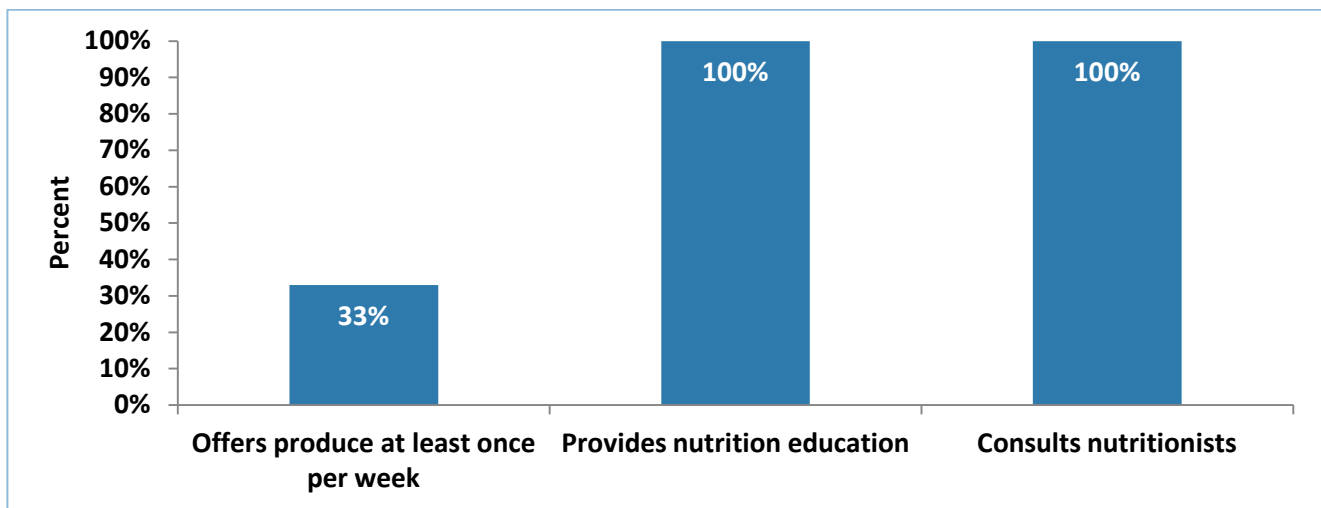
## Key Findings

- All food banks and emergency food outlets provide nutrition education.
- Only one in three food banks and emergency food outlets meet nutritional standards for providing high quality fruits, vegetables, and other healthy foods, and related nutrition education.
- Only one in three food banks and emergency food outlets offer fruits and vegetables at least once per week.
- Hunger-fighting organizations have worked to increase participation in CalFresh and WIC and encourage farmers markets to accept Electronic Benefits Transfer (EBT).

## Fruit and Vegetable Distribution to County Food Pantries

Staff at Second Harvest reported that they provide a sufficient supply of foods to food pantries in the eight neighborhoods; however, two-thirds of emergency food outlets at the time of reporting did not offer fruits and vegetables at least once per week. Not all food outlets had refrigeration units to offer fresh produce, and many distributed less healthy canned products.

## Healthy Food Access and Promotion in County Food Pantries



Source: Santa Clara County Public Health Department, Status of Latino/Hispanic Health 2012, CX3

According to the food distributors, people who access the food banks did not always want fruits and vegetables. However, they reported seeing a shift in children asking for healthy options. They believe this was the result of greater nutrition education in schools and preschools.

## Nutrition Standards in Food Banks

Only one-third of food banks surveyed met the nutrition standards set forth by CX3. They purchased only 25% of the food that they distributed. That means that most of their food came from donations, over which they have less control. Food banks also offered some traditional foods in the Latino/Hispanic diet, including rice, beans, and tortillas.

## Increasing Food Access and Cooking Education

Hunger-fighting organizations and food pantries have worked to increase food access among low-income and food insecure individuals. Food distributors reported that community organizations have assisted clients with enrollment in CalFresh/SNAP and WIC, as well as free- and reduced-price lunch programs. These efforts have often included teaching individuals where to buy healthy foods and how to prepare them since many clients do not know how to cook and do not have regular access to a kitchen. The distributors also indicated that they were seeing more middle-class families whose income levels disqualified them from receiving assistance.

## ***School Food Environments***

### Purpose of the Assessment

Food items sold separately from the National School Lunch Program are not covered by federal regulations and have no required nutritional standards. As part of our assessment of the eight selected neighborhoods, we evaluated the healthiness of a la carte food options available to students at neighborhood schools.

This assessment is important because students tend to eat fewer fruits and vegetables in schools that offer unhealthy a la carte items.<sup>(31)</sup> Students are further exposed to unhealthy foods through school fundraisers that sell chocolate, candy, cookies, cakes, and pastries.<sup>(32)</sup>

### How We Did the Assessment

Fourteen out of 22 schools (12 elementary and two middle schools) in Santa Clara County responded to an online survey regarding availability of foods and beverages for a la carte purchase in cafeterias or school stores, the existence of advertisements on school campuses, and school policies regarding foods served. At least one school responded from each of the eight neighborhoods. Food service was generally exclusive to the cafeteria, as most schools had no vending machines (12 of 14) or a student store (10 of 14). See the Methodology section online for more details ([www.sccgov.org/statistics2](http://www.sccgov.org/statistics2)).

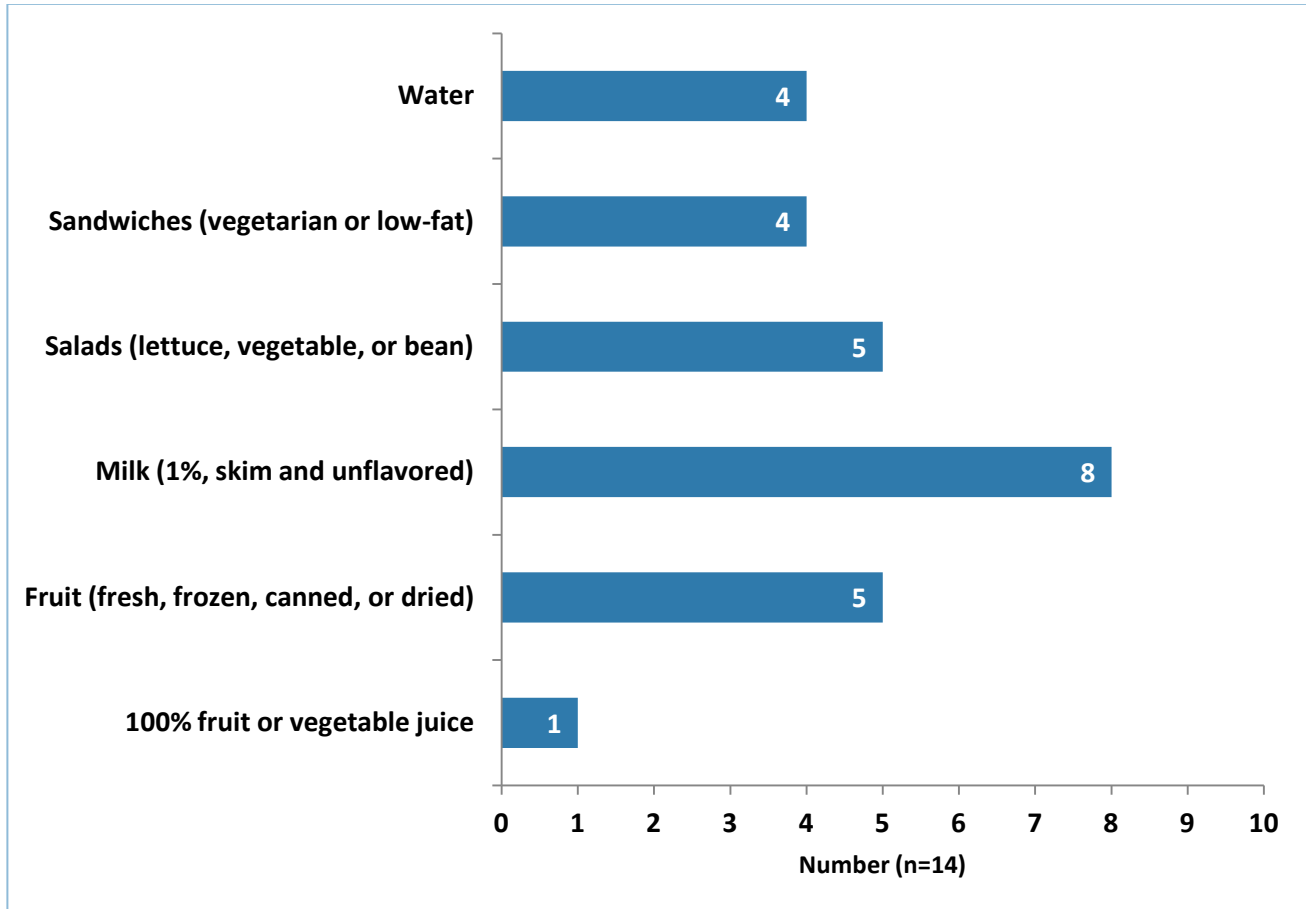
### **Key Findings**

- Less than half of schools offer healthy a la carte foods and beverages, such as fruits and vegetables.
- The majority of schools (8 of 14) offer low-fat and skim milk.
- Unhealthy foods and beverages are rarely sold in cafeterias and school stores.
- Many schools lack policies on the nutritional quality of foods/beverages offered to students outside of regular meals.
- Some schools use chocolate, candy, and high fat baked goods for fundraising.
- No schools have food or beverage advertisements outside of school buildings, on playing fields, or other areas of campus.

### Healthy Choices Available for Purchase in Schools

A majority of schools in the selected neighborhoods offered low-fat (one percent) or fat-free (skim) milk, but only one-third offered a la carte fruits, vegetables, and salads. Other healthy options were only available in a few of the schools, including low-fat sandwiches (4), bottled water (4), and 100% fruit juice (1).

### Healthy Choices Available for Purchase as a la Carte Items

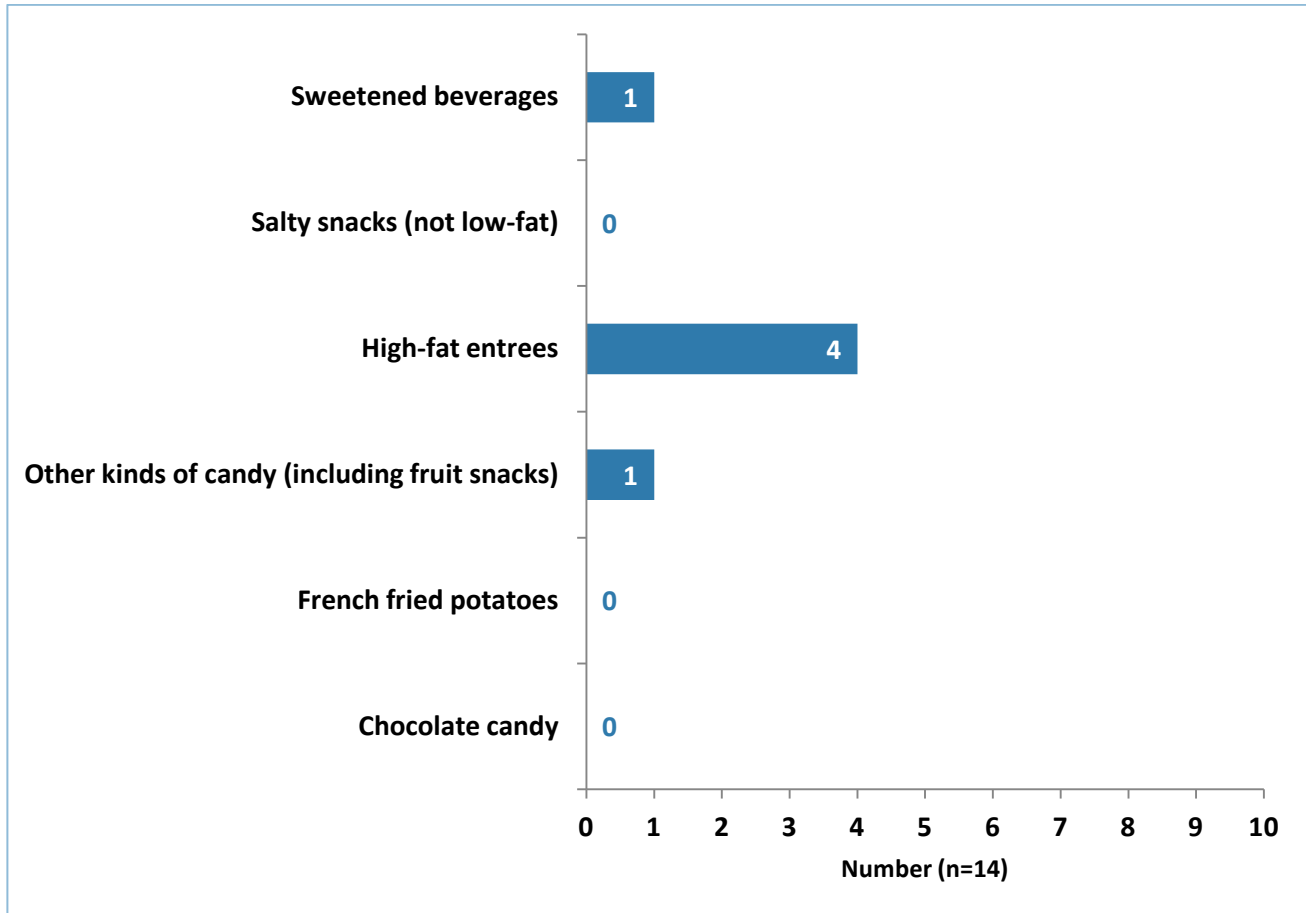


Source: Santa Clara County Public Health Department, Status of Latino/Hispanic Health 2012, School Food Survey

### Unhealthy Choices Available for Purchase in Schools

Over a quarter of the schools surveyed indicated that they sell high-fat entrees such as pizza and chicken nuggets a la carte or for student purchase outside of the school lunch program. Only one school offered sweetened beverages such as soda or sports drinks, and no schools offered French fries, ice cream (not low-fat), high-fat baked goods, or chocolate candy. Only one school reported that a commercial food vendor (like Pizza Hut, Taco Bell, or Subway) offered food as part of the lunch service. However, two schools reported that students were allowed to bring fast food into the cafeteria.

## Unhealthy Choices Available for Purchase as a la Carte Items



Source: Santa Clara County Public Health Department, Status of Latino/Hispanic Health 2012, School Food Survey

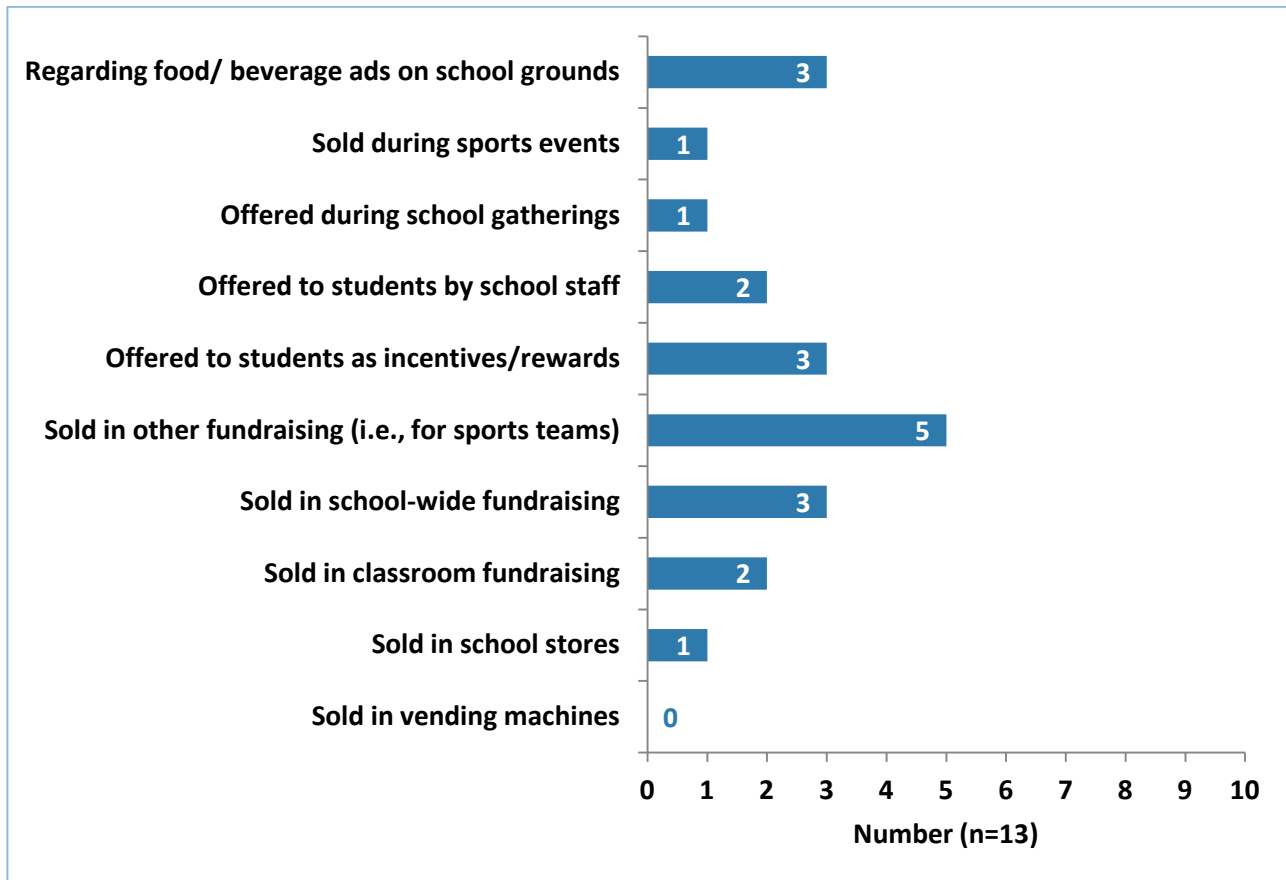
## Policies Related to Nutrient Quality of Food and Drink Items

There are no federal regulations regarding foods and beverages offered outside of the National School Lunch Program, so it is up to schools to make and enforce their own policies. While most schools within the eight neighborhoods had policies related to foods offered outside regular meals, some did not. Three schools lacked policies on the types of foods and beverages offered to students as incentives or rewards. Two did not have policies on foods and beverages offered to students by school staff. Five did not have policies regarding foods and beverages sold in fundraising efforts. Three lacked policies on foods and beverages advertised on school grounds. Additionally, four schools reported specifically using chocolate, candy, or high-fat baked goods in both classroom and school-wide fundraising.

Santa Clara County schools can improve their food environments by strengthening wellness policies around school nutrition, particularly around foods offered as incentives and used in fundraising efforts.



## Lack of Policies Related to Nutrient Quality of Food and Drink Items



Source: Santa Clara County Public Health Department, Status of Latino/Hispanic Health 2012, School Food Survey

### Advertisements

None of the schools had food or beverage advertisements on school grounds, including on the outside of school buildings, on playing fields, or other areas of campus. No schools had advertisements for soft drinks anywhere on campus. Despite this, unhealthy food advertisements at convenience stores and the presence of mobile vending near schools mean that unhealthy foods are readily available and socially acceptable to consume (see *Retail Food, Mobile Vending and Food Trucks* and *Voices from the Community* in this volume).

### **Childcare Facilities**

#### Purpose of the Assessment

In addition to the other assessments in the selected neighborhoods, we assessed childcare centers. The purpose of the assessment was to determine whether childcare centers met established standards for supporting healthy eating and physical activity among children. With many children attending childcare centers and spending more than 15 hours per week in these environments, it is important that we understand how childcare centers support developing healthy eating and active

living behaviors.<sup>(33)</sup> Young children eat much of their daily food while in childcare, and more than a quarter of children ages 2 to 5 years are at risk for becoming overweight or are overweight.<sup>(34)</sup>

### **Key Findings**

- Most childcare centers offer a variety of healthy foods and beverages.
- Many facilities do not meet best practice standards in their nutrition policies and practices.
- Many childcare centers offer a variety of play equipment with staff regularly encouraging physical activity.
- Most childcare centers lack a written policy on nutrition and physical activity.

### **How We Did the Assessment**

We identified 19 preschool/childcare facilities within the eight selected neighborhoods. Providers from 11 facilities completed an on-line survey based on the Nutritional and Physical Activity Self Assessment for Child Care (NAP SACC). The tool includes best practice recommendations for childcare centers based on extensive review of research and nutrition regulation. Responses received a score from one to four, with four being the best practice standard. See the Methodology section online for more details. At each childcare center, we collected information on the following two categories:



- Nutrition (food and beverage practices and policies)
- Physical Activity (physical activity practices and policies)

### **Nutrition**

The following table presents the average score for the nine key areas related to nutrition.

## Average Scores<sup>1</sup> for Childcare Facilities Meeting Best Practice Standards<sup>2</sup> for Nutrition

	Average score (out of 4)
<b>Nutrition</b>	
Beverages <i>Offer water and skim or 1% milk, while limiting sugar-sweetened beverages.</i>	<b>3.5</b>
Nutrition policy <i>Create and follow a written policy on nutrition and food service.</i>	<b>3.3</b>
Meats, fats, and grains <i>Offer lean meats, beans, and whole grains, while limiting fried or pre-fried foods, sweets, and salty foods.</i>	<b>3.2</b>
Healthy eating <i>Staff should consume the same food and drinks as children, and encourage children to eat healthy foods.</i>	<b>3.1</b>
Fruits and vegetables <i>Offer healthy fruits and vegetables.</i>	<b>3.0</b>
Menus and variety <i>Change menus with the season, providing both new and familiar foods from a variety of cultures.</i>	<b>2.9</b>
Feeding practices <i>Encourage children to try a variety of foods. Staff determines if children are full or still hungry prior to removing or serving additional food. Food is not used to encourage positive behavior.</i>	<b>2.7</b>
Nutrition education for staff, children, and parents <i>Educate staff, children, and parents on healthy eating.</i>	<b>2.7</b>
Foods offered outside of regular food and snacks <i>Celebrate holidays with healthy foods and non-food treats. Fundraising should consist of selling non-food items only.</i>	<b>2.2</b>

<sup>1</sup>Average scores are based on a four point rating system, ranging from minimum standards (a score of 1) to best practices (a score of 4). A higher average score indicates better performance in a certain area.

<sup>2</sup>Best practice recommendations are nutrition practices and policies that research shows will benefit children.

Source: Santa Clara County Public Health Department, Status of Latino/Hispanic Health 2012, NAP SACC

As the table shows, childcare centers generally offered healthy foods and beverages. Sodas and other sugar-sweetened beverages were not frequently available at the assessed childcare centers. Drinking water was readily available both inside the center and in outdoor play areas. Childcare facilities offered fruits and vegetables, and served a limited amount of fried or pre-fried potatoes. Staff reported not consuming unhealthy foods such as sodas, fast food or sweets in front of the children, and made a point of talking with children about trying and enjoying healthy foods. Beans or lean meats were served less frequently.

However, many facilities did not achieve best practice standards in nutrition policy and practice. Childcare staff reported that they did not frequently determine if a child was still hungry prior to serving more food. Educational opportunities for parents and staff regarding nutrition were not frequently available, though most childcare centers provided children with standardized curriculum on nutrition and healthy eating. Childcare centers were less likely to meet best practice standards in the types of foods they offered outside of regular meals and snacks, such as special foods served on holidays.

### Physical Activity

The following table presents the average score for the five key areas related to physical activity.

On average, childcare centers scored well for the play environment and supporting physical activity. During active play time, staff frequently encouraged and joined children in active play. Outdoor play equipment was readily available and there were large amounts of outdoor space for active play. There was limited television screen time at these childcare centers.

Although many childcare facilities were striving to support physical activity, many facilities could improve their practices in physical activity education and policy. In many childcare facilities, parents and children received limited physical activity education and staff did not frequently receive training in physical activity practices. Most childcare centers lacked a written policy on physical activity.

### **Average Scores<sup>1</sup> for Childcare Facilities Meeting Best Practice Standards<sup>2</sup> for Physical Activity**

	Average score (out of 4)
<b>Physical activity</b>	
Play environment <i>Offer a variety of fixed and portable play equipment.</i>	<b>3.4</b>
Supporting physical activity <i>Encourage physical activity through visual reminders such as posters, pictures, and displayed books.</i>	<b>3.3</b>
Active play and screen time <i>Provide children with active play time, while limiting screen time.</i>	<b>2.9</b>
Physical activity education for staff, children, and parents <i>Educate staff, children, and parents on physical activity.</i>	<b>2.6</b>
Physical activity policy <i>Create and follow a written policy on physical activity.</i>	<b>2.6</b>

<sup>1</sup>Average scores are based on a four point rating system, ranging from minimum standards (a score of 1) to best practices (a score of 4). A higher average score indicates better performance in a certain area.

<sup>2</sup> Best practice recommendations reflect higher quality physical activity practices and policies that research shows will benefit children.

Source: Santa Clara County Public Health Department, Status of Latino/Hispanic Health 2012, NAP SACC

## Mobile Vending and Food Trucks

### Purpose of the Assessment

We assessed mobile vending near 20 elementary, middle, and high schools in the eight selected neighborhoods. We determined how close these vendors were to schools and whether vendors sold healthy or unhealthy foods.

Poor nutrition among children and higher rates of overweight and obesity are more common when retail food environments surrounding schools are less healthy. When healthy food options, such as sliced fruit, are available from mobile vendors near schools, people are more likely to choose these alternatives. <sup>(35) (36)</sup>

***“There are vendors that sell chips and other fried foods outside of the school and the Teen Center. It worries me how close these vendors are to children. This food is cheap and not healthy.”***

**Rengstorff community member**

### **Key Findings**

- Mobile vendors are present at more than two-thirds of schools when classes are dismissed.
- Ninety-four percent (94%) sell mostly unhealthy foods, such as candy, ice cream, or chicharrón (fried pork skins).
- Only 3% sell mostly healthy foods, such as fresh fruit.
- Most vendors (7 in 10) are visible from the school grounds.

### How We Did the Assessment



Of the 20 surveyed schools, 14 had mobile vendors within a 500 foot radius. We surveyed 34 vendors in total. We conducted the assessment at the end of the school day in order to evaluate the types of foods accessible to school-aged children after school. We present data in two categories: 1) visibility of mobile vendor from schools, and 2) availability of healthy or unhealthy foods sold. See the Methodology section online for more details ([www.sccgov.org/statistics2](http://www.sccgov.org/statistics2)).

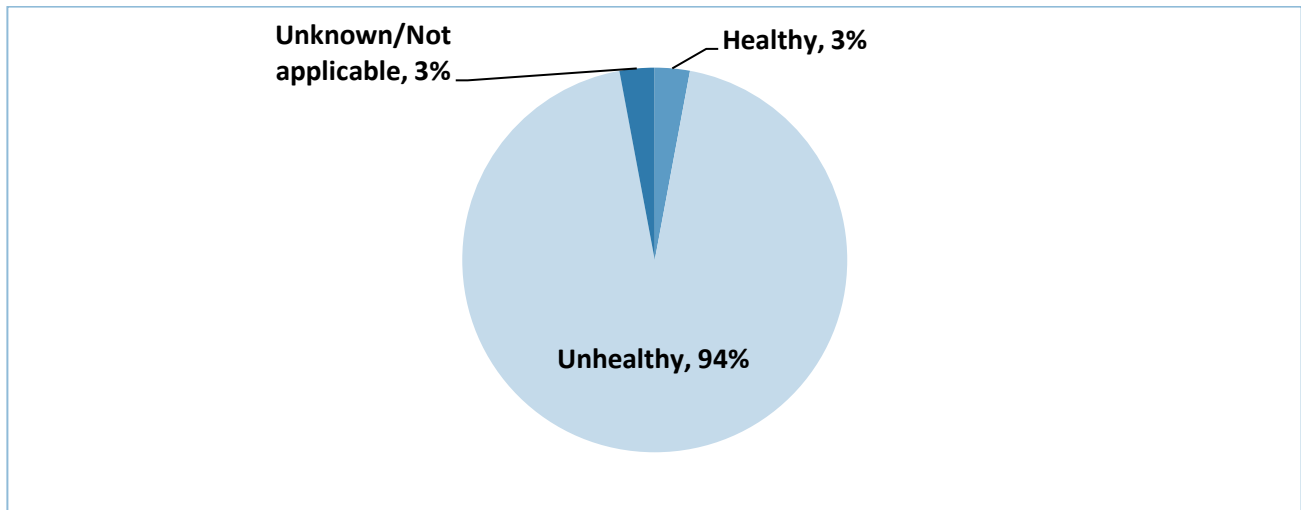
### Visibility of Mobile Vendors

At surveyed schools, the majority of mobile vendors (71%) were visible from the schools, and more than two-thirds (64%) of schools with vendors had more than one vendor present.

### Availability of Healthy Foods versus Unhealthy Foods from Mobile Vendors

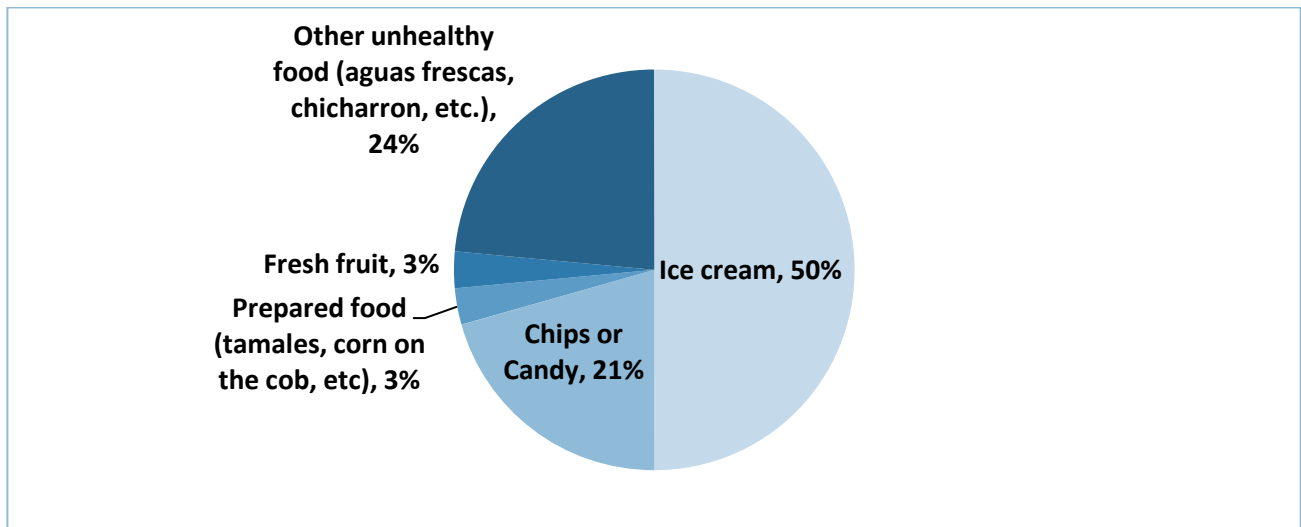
The main products sold by mobile vendors were unhealthy. Only one vendor out of 34 surveyed sold a healthy food (fresh fruit) as the main product. The most common product sold was ice cream, with half of all vendors surveyed selling it as their main product. Other unhealthy products sold included aguas frescas (sweetened fruit beverages), chicharrón (fried pork skins), and packaged candy or chips. These findings were reflected in the concerns expressed by focus group participants across the eight neighborhoods (see *Voices from the Community* in this volume). Schools could help reduce students' exposure to unhealthy foods by creating and enforcing policies regarding the presence of mobile food vendors near campus.

### **Healthy versus Unhealthy Foods Sold by Mobile Vendors**



Source: Santa Clara County Public Health Department, Status of Latino/Hispanic Health 2012, CX3

### **Types of Foods Sold by Mobile Vendors near Schools**



Source: Santa Clara County Public Health Department, Status of Latino/Hispanic Health 2012, CX3.

## Streets

### Purpose of the Assessment

We surveyed streets in the eight selected neighborhoods in order to assess whether they support physical activity for neighborhood residents. Streets that make it easier, safer, and more pleasant for individuals to walk and bike are associated with greater physical activity and can affect transportation choices.<sup>(37) (38) (39) (40) (41)</sup>

Particularly in low-income neighborhoods in some parts of the United States, not all streets are safe, convenient, or pleasant for walking or biking, and not all residents perceive their neighborhoods to be safe or attractive for physical activity.<sup>(42) (43) (44)</sup>

### **Key Findings**

- Neighborhood streets are generally pleasant and attractive for walking.
- Many streets do not feel safe or attractive for bicycling.
- There are few amenities for pedestrians and bicyclists.
- Many streets lack some of the elements that protect pedestrians and bicyclists from traffic.
- Pedestrian areas are generally complete and in good condition, although some paths have barriers that can interfere with walking.

### How We Did the Assessment

In each neighborhood, we surveyed one side of all high traffic streets (major arteries) and both sides of a random sample of 25% of low traffic streets, which are generally found in residential areas. See the Methodology section online for more details ([www.sccgov.org/statistics2](http://www.sccgov.org/statistics2)). We examined five categories that enhance walking and bicycling:

- Aesthetics (elements related to attractiveness for use by pedestrians and bicyclists)
- Amenities (permanent fixtures that make pedestrian or bicyclist use of the area easier or more pleasant)
- Violence and Safety (presence or absence of elements that make the area feel safe)
- Traffic Conditions and Pedestrian Safety (permanent fixtures that protect pedestrians from traffic conditions)
- Pedestrian Accessibility (conditions of pedestrian areas)

### Aesthetics

Streets were generally clean with well-maintained buildings. There was little to no graffiti and the dominant smell was not unpleasant on most streets.

However, on nearly one in four high traffic streets, pedestrians had to walk through a parking lot to get to most buildings. We rated one in ten streets across all neighborhoods as unattractive for walking and nearly a quarter of all streets as unattractive for bicycling. More than half of all streets and two-thirds of low traffic streets had visible electrical wiring overhead.

## Amenities

Streets had very few amenities. Only about one-third of high traffic streets had any type of street amenity, which includes public trash cans, benches, water fountains, and street vendors/vending machines. Less than a third of high traffic streets had any type of amenity for bicyclists, such as striped bicycle lanes, bicycle routes or crossing signs, or visible bicycle parking. Only about one-third of high traffic streets and only a small percentage of low traffic streets had a bus stop.

### **Presence of Amenities to Aid Walking or Bicycling by Street Type**

	High traffic streets	Low traffic streets	All streets
Has any type of bicycle facility	30%	11%	20%
Has any type of street amenity	34%	8%	21%
Has any type of bus stop	32%	2%	17%

**Note:** Street amenities are public trashcans, benches, water fountains, and street vendors/vending machines. Bicycle facilities are striped bicycle lanes, bicycle route or crossing signs, or visible bicycle parking.

**Source:** Santa Clara County Public Health Department, Status of Latino/Hispanic Health 2012, PEDS and IMI

## Pedestrian Accessibility

Almost all streets had sidewalks in good or fair condition with few cracks, bumps, and holes observed. However, one in five streets overall had some type of path obstruction which could interfere with walking such as poles, signs, parked cars, or greenery. One in ten streets did not have curb cuts to accommodate strollers and wheelchairs. Nearly all sidewalks were complete and the majority of sidewalks were four or more feet wide, although sidewalk width varied widely between high and low traffic streets.





## Violence and Safety

Although few low traffic streets had elements that made the streets feel unsafe, more than one in ten high traffic streets had these elements, such as “adult-use” businesses, which include bars, nightclubs, check cashing stores, bail bond stores, and liquor stores. A similar proportion had abandoned lots or buildings. Two in ten low traffic streets and one in ten high traffic streets had at least some buildings with bars on the windows. Nearly one in ten streets of either type lacked lighting that was either used to illuminate the street or to aid pedestrians.

The majority of both high and low volume streets felt safe for walking. However, we felt that less than half of high traffic streets felt safe for bicycling. Perceptions of lack of safety for bicycling could be related to traffic conditions and the amenities available to cyclists on high traffic streets.

Findings for walking safety were not consistent with reports from focus groups in the selected neighborhoods (see *Voices from the Community* in this volume). Many neighborhood residents reported that they did not feel safe walking in their neighborhoods. However, they confirmed our findings that streets were unsafe for bicycling. The discrepancy between residents’ perceptions and the results of these street surveys for walking warrants further attention.

***“If you are living in a nice street and you can walk out and play ball with other kids it’s okay. When you are in a poor neighborhood you feel scared to even go outside sometimes.”***

Burbank/Buena Vista community member

***“Personally I don’t even like to go out for walks by myself. To go to the store I take my car. Sometime I would like to go walking to exercise but I do not feel safe.”***

Mayfair/Suenos community member

### Violence and Safety by Street Type

		High traffic streets	Low traffic streets	All streets
Factors that make areas feel unsafe	Has an “adult use” business	13%	3%	8%
	Has any abandoned buildings or lots	11%	3%	7%
	Has any buildings with bars on the windows	15%	19%	17%
	Has any loose, barking, or threatening dogs	0%	8%	4%
Factors that make areas feel safe	Has any street lighting	91%	90%	91%
	Feels safe for walking	94%	95%	95%
	Feels safe for bicycling	39%	88%	64%

Source: Santa Clara County Public Health Department, Status of Latino/Hispanic Health 2012, PEDS and IMI

## Traffic Conditions and Pedestrian Safety

Streets lacked some of the elements that protect pedestrians from traffic conditions. More than a quarter of high traffic streets lacked any type of traffic control device, such as a traffic light or stop sign, more than one in five did not have a crosswalk, only about half had a buffer between the street and path, and nearly a third had no crossing aid. A high proportion of low traffic streets also lacked these elements, although the presence of crosswalks and other crossing aids may be less important on such streets due to less traffic and slower driving speeds. Pedestrian safety could potentially be improved by increasing the presence of elements that can protect pedestrians from traffic, such as traffic control devices, crosswalks, and crossing aids. These recommendations may also reduce the number of collisions between cars and pedestrians and cars and bicycles, which countywide data suggest are more prevalent in neighborhoods with high concentrations of Latino/Hispanic residents (see *The Environment in Neighborhoods Across the County* in this volume). Improving the conditions of streets may be especially important given that Latino/Hispanic adults in Santa Clara County are less likely to walk for transportation, exercise, or recreation than other racial/ethnic groups (see Volume 1 of this report).

***“The streets are a mess. You can easily get hurt.”***

**South Central Gilroy  
community member**

### Traffic Conditions and Pedestrian Safety Elements by Street Type

	High traffic streets	Low traffic streets	All streets
Has any type of traffic control device	73%	71%	72%
Has crosswalks	79%	41%	60%
Has any type of crossing aid	69%	23%	46%
Speed limit is posted	32%	31%	32%
Has any buffer between street and path	55%	73%	64%

**Note:** Traffic control devices are permanent fixtures designed to control traffic, such as traffic lights and stop signs. Crossing aids are permanent fixtures designed to help pedestrians cross streets such as pedestrian walking signals, crossing paddles or signs, and traffic medians.

**Source:** Santa Clara County Public Health Department, Status of Latino/Hispanic Health 2012, PEDS and IMI

## Chapter 4: Voices from the Community

We conducted focus groups in eight Santa Clara County neighborhoods for Latino/Hispanic residents and service providers to discuss their experiences with healthy eating, active living, and crime and safety in their neighborhoods. Participants helped inform solutions that will ultimately benefit them, their families, and their neighborhoods by discussing the following 11 questions:

1. When someone says the word “healthy”, what do you think about?
2. More than 1 in 3 Latino children in middle school are overweight or obese. What do you think causes obesity among Latino children?
3. In what ways do you think your surrounding neighborhood influences your and your family’s health?
4. How accessible and affordable are healthy foods in your community?
5. What do you think the community can do to promote access to healthier foods?
6. In what ways does your neighborhood make it easy or not easy to engage in physical activity and exercise?
7. What do you think the community can do to promote physical activity and safety?
8. How safe does your neighborhood feel?
9. What do you think your community can do to reduce violence and crime?
10. Other than those we have already discussed, what are the main barriers that get in the way of you and your family living a healthier lifestyle?
11. Other than what we’ve already discussed, what else could help you and your family live a more healthy and active lifestyle?

### Key Themes

The findings from the focus groups centered around four themes:

1. Neighborhood supports for and barriers to eating a healthy diet;
2. Neighborhood supports for and barriers to being physically active;
3. Neighborhood supports for and barriers to safety and violence prevention; and
4. Other findings related to socioeconomic conditions that affect health.



### ***Neighborhood Supports for and Barriers to Eating a Healthy Diet***

Limited access to a whole spectrum of quality and affordable healthy foods, combined with an overabundance of fast food restaurants and junk food outlets, makes it less appealing and challenging for families to eat a healthy diet.

Latino/Hispanic residents struggle with finding healthy food options among the many fast food and junk food retailers in their neighborhoods. At nearby markets, low quality produce rots quickly and seems higher priced than in other neighborhoods. These perceptions are reflected in findings from the assessment of produce availability, quality, and price in neighborhood markets (see *Retail Food* in this volume).

Residents return home after working long hours and struggle to quickly prepare a healthy meal from foods in their neighborhoods. Residents with cars shop at several stores within the county looking for deals on fresh, healthy foods. With cost, time, and lack of transportation as major limiting factors for many working Latino/Hispanic families, the option of shopping around is neither available nor desirable for all residents. Instead, with insufficient time and money, many families rely on options available through fast food and junk food retailers within their neighborhoods. Surveys of county residents have confirmed these responses. Latino/Hispanic adults are more likely to have consumed fast food in the past week than adults from all other racial/ethnic groups (see Volume 1 of this report).

***“I can buy vegetables near my house...salads, carrots, squash. I like to make vegetable soup with yams for the children...”***

**Tropicana/Dorsa/Miller community member**

Multiple exposures to junk food vendors throughout the day, especially around schools and community centers, make it difficult to limit the amount of unhealthy food consumed, particularly by children. These perceptions are supported by findings from the mobile vending surveys, which found a high prevalence of mobile vendors around schools and parks selling unhealthy products (see *Mobile Vending and Food Trucks* in this volume).

Low quality and processed foods served in school cafeterias influence the food choices of Latino/Hispanic children by making meals served at home less desirable.

Latino/Hispanic residents are challenged by teaching healthy eating habits to their children within an environment where junk food is widely available. Many acknowledge that healthy eating habits begin at home. Some are successful in getting their children to eat a balanced diet of healthy foods. However, for many, this changed when their children entered school. In addition to an overabundance of fast food retailers and junk food advertising in their neighborhoods, many Latino/Hispanic residents see school lunches comprised of hamburgers, pizza, and hot dogs as a major contributing factor to their children's unhealthy diet. Children are served foods at school that are typically unavailable in Latino/Hispanic homes. As a result, children return from school expecting similar foods at home and refuse to eat what is prepared.

Even though participants focused on unhealthy foods served in schools, we discovered in our assessment of the school food environment that many healthy options are also available at schools (see *School Food Environments* in this volume).

***“There are vendors that sell chips and other fried foods outside of the school and the Teen Center. It worries me how close these vendors are to children. This food is cheap and not healthy.”***

Rengstorff community member

***“We have Burger King, McDonald’s and Jack in the Box. Instead of having places with fruits and vegetables, we have about 10 times more fast food places. And we have one good store, the only one. If Burger King, McDonald’s and Jack in the Box weren’t close, you wouldn’t go there. If there were stores with [healthy foods] nearby, you wouldn’t go far to get a hamburger. We don’t have the choice.”***

Seven Trees/Los Arboles/Serenade community member

***“At home, children do not want to eat fruits or vegetables, because in school they do not offer these to them. Or they might do it once or twice but there is no consistency.”***

South Central Gilroy community member

***“School lunch is not healthy. Kids are served hot dogs, pizza, fried foods. If they are eating these types of foods at school, then it’s no wonder that this is what they are used to eating and expect to eat at home.”***

Rengstorff community member

Families with access to quality, low cost produce, and knowledge of nutrition and food preparation skills are more likely to prepare and consume home-cooked meals.

Residents understand that home-cooked meals using basic ingredients of meat, grain, and vegetables are the healthiest and least expensive option for feeding their families. However, many residents who work long hours have limited time to spend preparing foods. Residents who had been taught about basic nutrition and how to prepare quick and easy meals from basic, inexpensive ingredients are more likely to prepare these meals in their homes.

***“Someone showed me how to make yogurt, and now I make my own yogurt. I find it very affordable. The machine cost me \$20. For me, it’s the little things like that that I am changing.”***

**Burbank/Buena Vista community member**

High prices and unavailability are barriers to purchasing and consuming organic vegetables for Latino/Hispanic families, many of whom express a desire to grow their own high quality produce.

Many residents are interested in cultivating their own gardens and growing their own vegetables. The majority who identified as immigrants talked about how foods tasted better and fresher in their country of origin. They feel that many foods in the U.S. have no flavor or a bad flavor, and contain chemicals, growth hormones and pesticides. They talked about how farmworkers here are exposed to pesticides and how this affects health and contaminates the environment.

Residents want to feed their families organic foods, but cannot because of high prices and lack of neighborhood availability. They don’t trust that the products being sold are organic because “one never knows unless you grow it or raise it yourself.”

Residents want to grow their own vegetables in order to increase access to organic vegetables and eliminate the barrier of high prices. However, as renters, many are prohibited by landlords from planting gardens or having container gardens on the property. A few have found places nearby to grow vegetables in schools, churches, or community spaces, but the supply of garden space does not meet demand. These factors shed some light on findings from countywide surveys that fewer Latino/Hispanic residents consumed the recommended servings of fruits and vegetables per day than other racial/ethnic groups (see Volume 1 of this report).



### Resident Recommendations to Improve Access to and Affordability of Healthy Foods

- Provide education on easy to prepare, nutritious meals that appeal to children and use inexpensive ingredients, including those available in the neighborhood.
- Stock quality, affordable produce at neighborhood market and corner stores enabling families to shop when needed and to incorporate fresh foods into every home-cooked meal.
- Develop opportunities for residents to grow their own food. Participants suggest converting vacant lots to community gardens, installing edible landscaping in neighborhoods, incentivizing landlords to allow vegetable gardens, and developing school, park, and community center gardens.
- Restrict development of new fast food restaurants, particularly near schools and community centers.
- Work with mobile food vendors to help convert their businesses to selling healthy foods. Vendors currently sell fried food, junk food, candy, and other unhealthy foods. Provide

***“Landlords have rules against container gardens outside the door. When I planted a garden, the landlord had the gardener cut it down.”***

Mayfair/Suenos community member

***“It's important to know what to cook. The problem is that we go for the convenience. We could make a simple pasta soup like we used to make in Mexico, natural with tomato. You can make breakfast. Instead, we grab something quick and easy and say, “Eat it”. That's not good for us. To find nutritious food, you don't need science or special places or lots of money.”***

Seven Trees/Los Arboles/Serenade community member

mobile vendor education programs that incentivize and empower vendors to help the community eat better by providing healthier choices.

- Restrict mobile vending of junk food around schools and community centers allowing only healthy, fresh food options such as grilled corn and fresh fruits.
- Ban sale and consumption on school property of sodas, sugar-sweetened beverages, and junk foods, such as chips.
- Require that all foods served at school are nutritious and unprocessed, contain fresh fruits and vegetables, and are similar to healthy foods served in the home. By not serving items such as pizza, hamburgers, and hot dogs at school, participants believe that children would be less likely to request these items at home.
- Restrict junk food advertising in retail settings around schools and community centers. Work with political representatives to limit commercials for junk food during children’s television programs. With exposure to fewer ads, children will be less likely to demand junk food.
- Open farmers’ markets that carry low cost produce and accept WIC vouchers.
- Create low cost CSAs (Community Supported Agriculture) with local farms. Use schools as the registration and distribution hubs for the community.
- Assist residents in organizing bulk buying clubs. While buying items in bulk reduces the per item/pound cost of products, bulk items are usually too expensive for one family to purchase on their own. Purchasing bulk items with other families reduces the overall costs for everyone.

***“There is so much pollution in our environment... There are pesticides in the fields. It goes to our foods. It goes to the air. It goes to the water. And everything they feed the animals... they throw around the word “organic” but I think that it’s a sham so they can charge more. Even though it says organic, we don’t know if it’s true. I try to grow my own vegetables at home, like at least tomatoes and chiles. That is the only way that I really know that it’s organic.”***

Tropicana/Dorsa/Miller community member

***“I wish the city and community would work together to make green gardens and community gardens.”***

Washington neighborhood community member

***“Compared to Mexico, the meat in the US doesn’t even smell like meat. It smells really bad and doesn’t have any flavor. Fruit is really big but has no flavor. Milk has more water added to it. In Mexico, the vegetables you see in the markets are fresh, cheap and natural. Here what happens is that there are too many chemicals.”***

Burbank/Buena Vista community member



## ***Neighborhood Supports for and Barriers to Being Physically Active***

**A lack of well-maintained neighborhood spaces with kid-friendly playground equipment and open areas for sports and physical activity is a significant barrier to being physically active.**

Residents live in housing with little or no outdoor space for recreation, and in neighborhoods that lack safe playgrounds within a convenient walking distance. In the past, neighborhood school soccer fields, basketball courts, and recreation areas were open for use, but are now surrounded by fences and closed to the public.

Most parks in the neighborhoods are too dangerous for children because of illegal activity and delinquent behavior. This finding is consistent with previous surveys conducted in the county; about half of all Latino/Hispanic respondents expressed concerns about safety in their neighborhoods (see *The Environment and Health* in this volume). In these neighborhoods, parents prefer to keep children indoors in order to keep them safe. Many participants point out that more affluent neighborhoods in the county have safer, better-equipped parks and recreation areas. However, these parks are too far away for frequent use. These responses are especially important when considering findings that the majority of middle and high school students did not meet physical fitness standards (see Volume 1 of this report).

**Aggressive dogs, speed of traffic, unsafe intersections, and lack of sidewalks or bike lanes discourage residents from walking and biking.**

Many residents feel that walking and biking to parks, schools, and markets can help them to stay in shape, save money, and afford using an automobile for longer trips. Despite understanding the health benefits of walking and biking, they feel that these activities are unsafe, unpleasant, and threatening for both

***"When my children were young they were able to go play basketball, baseball, and football in the school that is two blocks away from the house. Not anymore because now it's fenced. It should be open certain hours so that children from the community can go play basketball."***

Tropicana/Dorsa/Miller community member

***"That's another problem with obesity, because if you want to keep your children safe, you have to keep them at home. You are not going to let them go out to the street or take them to the park because of what they are going to find there."***

Washington/Guadalupe community member

***"On the east side, there's a park on Forest and a lot of homeless people use that park and therefore kids and families don't go out there."***

South Central Gilroy community member

themselves and their children for even short distances. Residents described vacant lots filled with garbage, few trees for shade, limited sidewalks, dangerous intersections, vicious dogs, and distracted drivers. Participants said that biking could be a useful mode of transportation, but with no bike lanes and busy roads, it is too dangerous.

Many of these perceptions are not consistent with findings from the street surveys, including the presence of sidewalks, loose dogs, insufficient lighting, and unpleasant neighborhoods (see Street Surveys in this volume). These inconsistencies can be explained by a number of factors, such as the time of day the surveys were conducted, and warrant further research.

***“There are many vacant lots... Besides the lighting, there are some parts where there are no sidewalks... I think my neighborhood is not a place where people want to walk around and a lot of that is just the environment. You know, having sidewalks, having light, having more pleasant trees, and no vacant lots...The streets are a mess. You can easily get hurt.”***

South Central Gilroy community member

***“There is only street cleaning once per month. The city used to maintain the trees, beautiful and trimmed, but not anymore.”***

Tropicana/Dorsa/Miller community member

**Latino/Hispanic families would attend exercise classes held in their neighborhoods if the classes are free or no-cost and provided childcare or are child-friendly.**

Residents desire group exercise and physical activity classes in a community setting such as a park, community center, school, or library. Many feel that Zumba, yoga, or salsa classes are a fun way to see their friends and be more physically active. If adult and youth programs are offered concurrently or adult programs allowed for youth participation, childcare would no longer be a barrier to participation. In order to attract Latino/Hispanic adults and children, classes must be either free or “pay what you can.” Even a small fee is a barrier, especially when paying for multiple children to participate in youth programs.

### Resident Recommendations to Improve Neighborhood Physical Activity Environments

- Organize community exercise classes that are accessible and affordable (free, low cost, pay what you can) such as, Zumba, yoga, and salsa dancing.
- Organize community events that promote physical activity like Bike Party or “Sunday Streets.” Participants feel that community weekend events that close down streets for physical activity would be well received among Latino/Hispanic residents.

- Advocate for additional physical education in schools.<sup>1</sup>
- Improve the pedestrian experience by cleaning up the neighborhood, widening the sidewalks, and planting trees.
- Install speed bumps around the schools. This will reduce the speed of traffic, making it safer to walk and bike. It may also reduce drive-by violence.
- Require and enforce leash laws for all dogs.
- Develop safe, community-oriented recreational spaces in vacant lots.
- Organize free or low cost community sports programs, such as youth or adult soccer leagues.
- Allow community members to use school recreational spaces during afternoons, evenings, and weekends.
- Make streets safer for biking by reducing the speed of traffic and marking bike lanes.

### ***Neighborhood Supports for and Barriers to Safety and Violence Prevention***

Gang intimidation, public substance use, prostitution, public sex, threat of violence, and graffiti keep Latino/Hispanic families from using neighborhood parks and public spaces for physical activity and community gatherings.

Residents feel unsafe and threatened in their

***“If you have [programs] at the right time, the right cost or no cost, there [would be] 80 people out there... the families would come, they [would] participate. It’s not like they do not want to exercise, it’s just the access and the accessibility to it and how affordable it is. So, with free programs you’ll get parents and kids.”***

South Central Gilroy community member

***“I live by a park, but what do I find when I get to this park? People drinking, swearing, and fighting. I do not want to take my son there.”***

South Central Gilroy community member

***“There is no way to promote physical activity in the neighborhood because it is so unsafe. People are afraid to go outside, especially after dark.”***

Washington/Guadalupe community member

***“We cannot take our children to the park because we fear something bad is going to happen or there are people using drugs. All of this is part of our health because if I cannot take my children to the park to exercise, where I’m going to take them? Instead I’m stay home watching television with my children.”***

Mayfair/Suenos community member

<sup>1</sup> Elementary schools are required by state mandate to provide a minimum of 200 minutes of physical education every ten days. Most schools in California do not meet this mandate.

neighborhoods, especially by gangs. They worry that violence may erupt at any moment. Parents prefer to keep their children indoors so as not to expose them to gangs, drug dealing, and violence. These responses align with findings that Latinos/Hispanics accounted for a disproportionate number of homicide victims (see Volume 1 of this report).

Residents from a few neighborhoods also see prostitution as a problem. Described as lawless places, parks fill with delinquent youth who start fights between themselves and innocent bystanders. Parents worry that their children will be exposed to blatant use of drugs and alcohol and to adults engaging in public sex in remote areas of the parks. Families desire more security and law enforcement on streets and in parks so that they can safely use the spaces for physical activity and family gatherings.

**Residents perceive local police to be unresponsive to crime in neighborhoods with high concentrations of Latinos/Hispanics and believe their identity will not be protected if they report illegal activity.**

Residents feel that local police do not care about violence and crime in their community, only responding after violence has already occurred. Calls to 911 go unanswered or receive no police response or a delayed response. Participants feel that violence could be prevented if police respond to non-violent incidents instead of waiting for situations to escalate. Many in the community hesitate to report illegal activity out of fear that their identity will be revealed and they will be retaliated against. Residents with undocumented immigration status feel unsafe interacting with police out of fear of being deported.

***"I don't feel safe because if you call the police, they don't arrive when you need them."***

**Seven Trees/Los Arboles/Serenade community member**

***"We only see the police when they go to a crime scene, an accident, or fight. But they should pass by regularly, at night, and check the neighborhood."***

**Tropicana/Dorsa/Miller community member**

**Latino/Hispanic residents consider afterschool youth programs with a safe, enriching environment to be a valuable gang prevention tool.**

Residents believe that the community lacks programs to keep youth occupied and out of trouble. They feel that youth join gangs because of boredom and lack of adult supervision. In many Latino/Hispanic



families, both parents work long hours earning barely enough to cover basic necessities. They have no money to pay for afterschool care or a babysitter. Afterschool programs help youth with homework, teach useful skills, and provide emotional support to help youth develop into responsible adults. Giving youth jobs or teaching them job skills in practical arts such as carpentry, painting, woodworking, and auto repair would encourage economic stability and keep them out of trouble. The need to provide alternatives to gang membership for Latino/Hispanic youth aligns with countywide survey findings that Latino/Hispanic middle and high school students were more likely to be in a gang than youth from some other racial/ethnic groups (see Volume 1 of this report).

### Resident Recommendations to Improve Neighborhood Safety and Reduce Violence

- Require youth to do community service, such as neighborhood cleanup, as a consequence for delinquent behavior.
- Create programs for youth that teach the importance of remaining in school and the dangers of joining a gang.
- Create more community programs for youth: boxing, art, job development, life skills, emotional support, etc.
- Install security cameras to deter delinquent behavior, prohibit all substance use in parks, and prioritize enforcement.
- Improve relations between the Latino/Hispanic community and the local police force.
- Improve police response to citizen reports of illegal and dangerous neighborhood activities. As citizens begin to trust that the police are there to protect their safety, the relationship will improve.
- Assist residents in organizing Neighborhood Watch committees.
- Improve street infrastructure, particularly for people who walk and bike. Examples of infrastructure include more visible crosswalks, pedestrian crosswalk warning lights, electronic

***“We need programs for youth who are 11 and 12 years old, which is the most dangerous age. Teach them boxing... The ones that like graffiti can take art classes in drawings, paintings...That would be very good for young people...instead of being outside doing mean things, breaking windows, because there's nothing to do. Give them options.”***

Tropicana/Dorsa/Miller community member

***“The reason why there's [gang members] in this community is because we don't have a lot of money. Parents spend all day working and there's no one to take care of the children, so the only thing children do is go to the streets and they find a place there. They find their friends and their family in the street, because they don't have care and love at home. They feel a little lonely, they feel abandoned.”***

Washington/Guadalupe community member

speed signs, bulb outs, and other traffic calming measures.

- Increase street lighting to improve nighttime visibility.
- Allow community members to convert blighted vacant lots into useful community spaces, such as gardens and parks.
- Create opportunities for the community to come together to build relationships and share health and community improvement strategies.
- Organize support groups and parenting workshops. Residents felt that opportunities to come together would provide them with support and help them to cope in their role as parents and community members.
- Teach parents to spend quality time with their children.

## ***Findings on Additional Socioeconomic Conditions that Affect Health***

**Poverty is the root cause of many of the previously identified issues.**

Parents work long hours in low wage jobs and are unable to spend sufficient time with their children. The money they earn is used to cover basic necessities such as housing, transportation, and food. Because their time and money is limited, family meals consisted of cheap, convenient, and easy to prepare ingredients. Income inequality keeps them from choosing to live in neighborhoods with less crime, safer streets, and greater access to amenities.

***“If you don't have a good income, you have to work more to obtain the income necessary to feed the children...But if you work more, you don't have time to prepare food. Or to dedicate enough time to care for the children ...and if we work, we have to pay for a babysitter.”***

Washington/Guadalupe community member

***“Sometimes it's mental, all the pressure that families have. We aren't documented. Kids hear about money problems. You don't think this affects children? All of these problems add up. You all know that many people have been deported recently, and all this is affecting how families feel and act. It's easy to say, “oh you're lazy,” but really it's about all the stress that we have to deal with daily, and that's why we don't do certain things.”***

Rengstorff community member

Fear of deportation and the stress of having undocumented immigration status affects residents' physical and mental health and prevents them from advocating for improvements in their community.

Residents feel they are better off if they do not report crime or complain about unsafe housing or residential conditions. They fear that if they speak up they will be deported or targeted for harassment.

*"It's about the community having fear and not calling the authorities because of certain consequences. They live in fear... some people hesitate [to call] the police because they do not have citizenship and fear being deported."*

South Central Gilroy community member

Housing in Santa Clara County is expensive for Latino/Hispanic families.

Many participants shared how difficult it is to pay for housing. Rents are high, even in low-income and violent neighborhoods. This leads to multiple families living in overcrowded situations, which is common among Latinos/Hispanics in the county (see Volume 1 of this report). Participants blame high-technology companies and greedy landlords for increases in rent. Cost of housing and overcrowding impact the choices families make around food, often leading to overconsumption of cheap, processed foods.

Latino/Hispanic residents report discrimination in housing, public works, quality of parks, park hours, per pupil school spending, and police protection.

Residents feel that the poor treatment they receive is in part due to racism towards Latinos/Hispanics and preference for other racial/ethnic groups. As examples of discrimination, they pointed to a variety of factors including expensive, poor quality produce in their stores, fewer school programs, unclean streets, parks with fewer amenities, and neighborhood pollution.

Service providers identified a lack of internet access among a significant proportion of Latinos/Hispanics in Santa Clara County.

Most community services and programs now require online registration, but many Latino/Hispanic families do not have access to the internet at home. Youth sports leagues, for example, all have online registration. This technology gap creates a barrier to access that is not being addressed.

Since families are not online, they end up missing out on opportunities to attend classes to improve health, participate in physical activities, like community 5k races, and other opportunities that are only announced online.

### Additional Resident Recommendations

- Increase opportunities for community input on health and safety matters. Participants requested more opportunities to provide input on matters pertaining to health and safety.
- Create support groups for parents to help improve health, physical activity, and community safety.
- Use Latino/Hispanic radio stations to broadcast information about health and community classes. Participants reported that they listen to the radio frequently and consider it a useful way to find out what was happening in the neighborhood.
- Distribute health and community information through schools, markets, churches, and libraries. Participants requested that community information be available in a wide variety of venues in both English and Spanish.
- Reduce the technology gap by providing access to community classes, services, and events in a non-online format. In addition to online promotion of events, promotion should be done at the community level through schools, markets, libraries, churches, and local radio programs.

***“I have a question, why don’t city officials and leaders come here to speak with us? They should be the ones hearing this feedback. Also, when they build new facilities...why don’t they come to speak to us to understand what we want and need?”***

**Rengstorff community member**





# References

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1. Cummins, S., & Macintyre, S. (2006). Food Environments and Obesity-- neighbourhood or nation? *International Journal of Epidemiology*, 35, 100-104.
2. ChangeLab Solutions. (2012). *Healthy Planning Policies*. Oakland: ChangeLab Solutions.
3. Bennet, G., McNeil, L., Wolin, K., Duncan, D., Puleo, E., & Emmons, K. (2007). Safe To Walk? Neighborhood Safety and Physical Activity Among Public Housing Residents. *PLoS Med*, 4(10). doi:10.1371/journal.pmed.0040306
4. Gomez, J., Johnson, B., Selva, M., & Sallis, J. (2004). Violent crime and outdoor physical activity among inner-city youth. *Preventative Medicine*, 39(5), 876-81.
5. Moudon, A. V. (2006). Operational Definitions of Walkable Neighborhood: Theoretical and Empirical Insights. *Journal of Physical Activity and Health*, 99-117.
6. Walk Score Professional. (2011, July 15). Methodology. Retrieved from Walk Score Professional: <http://www.walkscore.com/professional/methodology.php>
7. Zenk, S. E. (2005). Fruit and vegetable intake in African Americans income and store characteristics. *American Journal of Preventative Medicine*, 1-9.
8. Morland, K. D. (2006). Supermarkets, other food stores, and obesity: the atherosclerosis risk in communities study. *American Journal of Preventative Medicine*, 333-339.
9. Centers for Disease Control and Prevention. (n.d.). Overweight and Obesity. Retrieved from Centers for Disease Control and Prevention: [ftp://ftp.cdc.gov/pub/Publications/dnpao/census-tract-level-state-maps-mrfei\\_TAG508.pdf](ftp://ftp.cdc.gov/pub/Publications/dnpao/census-tract-level-state-maps-mrfei_TAG508.pdf)
10. McCormack LA, L. M. (2010). Review of the nutritional implications of farmers' markets and community gardens: a call for evaluation and research efforts. *Journal of the American Dietetic Association*, 399-408.
11. Young C, K. A. (2011). Farmers' markets in low income communities: impact of community environment, food programs and public policy. *Community Development*, 208-220.
12. McDonald, N. (2008). Critical factors for active transportation to school among low-income minority students: evidence from the 2001 National Household Travel Survey. *American Journal of Preventative Medicine*, 341-344.
13. Jacobsen, P. R. (2009). Who owns the roads? How motorized traffic discourages walking and bicycling. *Injury Prevention*, 369-373.
14. Marshall, W. G. (2011). Evidence on why bike-friendly cities are safer for all road users. *Environmental Practice*, 16-27.
15. Parker, K. G. (2011). Instillation of bicycle lanes and increased ridership in an urban, mixed-income setting in New Orleans, Louisiana. *Journal of Physical Activity and Health*, 98-102.
16. Cavill, N. D. (2007). *Cycling and health: what's the evidence?* London: Cycling England.
17. Mowen, A. J. (2010). *Parks, Playgrounds and Active Living*. San Diego: Active Living Research.
18. Corso P.S., M. J. (2007). Medical costs and productivity losses due to interpersonal and self-directed violence in the United States. *American Journal of Preventative Medicine*, 471-482.
19. Egerter, S. B.-K. (2011, May). *Exploring the Social Determinants of Health: Violence, Social Disadvantage and Health*. Princeton: Robert Wood Johnson Foundation. Retrieved from Robert Wood Johnson Foundation.
20. Prevention Institute. (2010). *Addressing the Intersection: Preventing Violence and Promoting Healthy Eating and Active Living*. 2010: Prevention Institute.
21. Davison, K. L. (2006). Do attributes in the physical environment influence children's physical activity? A review of the literature. *International Journal of Behavioral Nutrition and Physical Activity*, 19.
22. Morland, K. D. (2006). Supermarkets, other food stores, and obesity: the atherosclerosis risk in communities study. *American Journal of Preventative Medicine*, 333-339.
23. Wrigley N, W. D. (2003). Deprivation, diet, and food-retail access: findings from the Leeds 'food deserts' study. *Environment and Planning*, 151-188.
24. National Research Council (2006). *Food Marketing to Children and Youth: Threat or Opportunity?* Washington DC: National Academic Press.
25. Food Research and Action Center. (2010). *Why Low-Income and Food Insecure People are Vulnerable to Overweight and Obesity*. Washington DC, Washington DC, USA.
26. Krukowski, R.A., D. S.-B. (2010). Neighborhood Impact on Healthy Food Availability and Pricing in Food Stores. *Journal of Community Health*, 315-320.
27. Cheadle A, P. B. (1991). Community-level comparisons between the grocery store environment and individual dietary practices. *Preventative Medicine*, 250-261.

28. Troy, L.M., E. A. (2011). *Hunger and Obesity: Understanding a Food Insecurity Paradigm: Workshop Summary*. The National Academies Press.
29. Townsend M.S., J. P. (2001). Food Insecurity Is Positively Related to Overweight in Women. *The Journal of Nutrition*, 1738-1745.
30. Duffy P, Z. C. (2009). Diet quality is low among female food pantry clients in Eastern Alabama. *Journal of Nutrition Education and Behavior*, 414-419.
31. Kubik, M. Y., Lytle, L. A., Hannan, P. J., Perry, C. L., & Story, M. (2003). The Association of the School Food Environment with Dietary Behaviors of Young Adolescents. *American Journal of Public Health*, 1168-1173.
32. Kubik, M. Y., Lytle, L. A., Farbaksh, K., Moe, S., & Anne Samuelson. (2009). Food use in middle and high school fundraising: Does policy support healthy practice? Results from a survey of Minnesota school principals. *Journal of American Dietetics Association*, 1215-1219.
33. Sonenstein, F. L., Gates, G. J., Schmidt, S., & Bolshun, N. (2002). *Primary Child Care Arrangements of Employed Parents: Findings from the 1999 National Survey of America's Families*. Washington, DC: The Urban Institute.
34. (n.d.). Retrieved August 14, 2012, from NAP SACC: <http://www.napsacc.org/>
35. Babey, S. H., Wolstein, J., & Diamant, A. L. (2011). *Food Environments Near Home and School Related to Consumption of Soda and Fast Food*. Los Angeles: UCLA Center for Health Policy Research.
36. Tester, J. M., Yen, I. H., & Laraia, B. (2012). Using Mobile Fruit Vendors to Increase Access to Fresh Fruit and Vegetables for Schoolchildren. *Preventing Chronic Disease*.
37. Humpel N, O. N. (2002). Environmental factors associated with adults' participation in physical activity: a review. *American Journal of Preventative Medicine*, 188-189.
38. Owen N, H. N. (2004). Understanding environmental influences on walking; Review and research agenda. *American Journal of Preventative Medicine*, 67-76.
39. Hoehner, C.M., L. K. (2005). Perceived and Objective Environmental Measures and Physical Activity Among Urban Adults. *American Journal of Preventative Medicine*, 105-116.
40. Weira, L.A., D. E. (2006). Parents' perceptions of neighborhood safety and children's physical activity. *Preventative Medicine*, 212-217.
41. Sugiyama T, N. M.-C. (2012). Destination and route attributes associated with adults' walking: a review. *Medicine and Science in Sports and Exercise*, 1275-86.
42. Sallis JF, S. D. (2011). Income disparities in perceived neighborhood built and social environment attributes. *Health and Place*, 1274-83.
43. Zhu X, L. C. (2008). Walkability and safety around elementary schools economic and ethnic disparities. *American Journal of Preventative Medicine*, 282-290.
44. Lovasi GS, H. M. (2009). Built environments and obesity in disadvantaged populations. *Epidemiologic Reviews*, 7-20.

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George Shirakawa  
President, Board of Supervisors



This mural is located at the San Jose Mexican Heritage Plaza, and was created by Susan Cervantes, Rick Sales and 50 middle school and high school students.

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