

Missoula Invest Health

A Tale of Three Neighborhoods: A study of health equity

A Project of the Robert Wood Johnson Foundation and Reinvestment Fund



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Photo: MIH Team: Laval Means, Kaia Peterson, Susan Hay Patrick, and Lisa Beczkiewicz. Not pictured: Merry Hutton

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Thank you,

The Missoula Invest Health Team

Lisa Beczkiewicz, Merry Hutton, Laval Means, Susan Hay Patrick, and Kaia Peterson

Executive Summary

Missoula Invest Health: An Introduction

Missoula was one of 50 mid-size cities in 31 states that received a \$60,000 planning grant in 2016 from Invest Health, an initiative of the Robert Wood Johnson Foundation and Reinvestment Fund. The goal of this groundbreaking initiative is to transform how city leaders work together to help low-income communities thrive, with specific attention to community features that drive health such as access to safe and affordable housing, places to play and exercise, and quality jobs¹.

Applicants were required to form five-member teams including representatives from the public sector, community development, and an anchor institution, preferably academic or health-related. Providence/St. Patrick Hospital serves as the anchor institution for the Missoula Invest Health grant.

¹ Invest Health: 50 Cities Selected for Invest Health. Robert Wood Johnson Foundation. 2016. Accessible at: <https://www.investhealth.org/news-archive/50-cities-selected-for-invest-health/>

Members of the Missoula Invest Health team are:

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Merry Hutton², Regional Director for Community Benefit & Care Transitions, Providence St. Patrick Hospital

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Kaia Peterson, Assistant Director, NeighborWorks Montana

The Missoula team is focusing on improvements to community infrastructure that will positively affect health outcomes related to obesity and mental health. Missoula, like other cities, faces some of the nation's deepest challenges, including entrenched poverty, poor health and a lack of investment. But it also offers fertile ground for the development and implementation of strategies that improve health and have the potential to boost local economies. Invest Health has the potential to fundamentally transform the way Missoula improves opportunities for its citizens to lead healthy lives, including by effectively changing the built environment to support positive health outcomes.

This report looks at Missoula's three lowest-income neighborhoods: Franklin to the Fort, North/Westside and River Road. These areas face some of the biggest barriers to better mental and physical health, and the neighborhood data illustrate the health relationship between income and well-being – a major focus area in public health.

Poverty cuts across all demographics, and may lead to increased risk of premature death, higher disease burden, and lower life expectancy.³ Neighborhoods with persistent poverty (20% or more of individuals in poverty for the past 30 years)⁴ experience poor housing and health conditions, increased crime, and lower educational attainment.⁵ One recent national study observed over a billion tax records in the United States and found that life expectancy steadily increased with income. The study found that health behaviors, including smoking, obesity, and low rates of exercise, were highly correlated with differences in life expectancy among low-income populations, suggesting that health professionals target efforts and that communities enact policies to improve the health among the low-income populations.⁶

By using data to identify which members of the community experience unhealthy behaviors and are at risk for poor health outcomes, and by determining the barriers they face that impede better health, Missoula can better focus its work and resources on improving systems that support health equity.

² Replaced Apryle Pickering, original team member from Providence/St. Patrick Hospital, who moved on to another institution

³ Frieden TR. CDC health disparities and inequalities report-United States, 2013. Foreword. MMWR. Surveillance Summaries (Washington, DC: 2002). 2013;62:1-2.

⁴ Crandall, K. (2015). Persistent Poverty on a Neighborhood Scale. PolicyMaps. Available at: <https://www.policymap.com/blog/2015/03/persistent-poverty-on-a-neighborhood-scale/>

⁵ United States Department of Agriculture. (2015). Geography of Poverty. Available at: <http://www.ers.usda.gov/topics/rural-economy-population/rural-poverty-well-being/geography-of-poverty.aspx>.

⁶ Chetty R, Stepner M, Abraham S, et al. The association between income and life expectancy in the United States, 2001-2014. JAMA. 2016;315(16):1750-1766.

About This Study

A key principle of the Invest Health project is to include the voice of the residents of the three targeted neighborhoods. Accordingly, in 2016, the Missoula Invest Health team completed both quantitative and qualitative community data collection to examine neighborhood conditions. Specifically the goals of the Missoula Invest Health study were:

Goal 1: Provide a snapshot of the conditions, perceptions, needs, and opportunities for three (3) low-income Missoula neighborhoods.

Goal 2: Identify relationships between community conditions and personal health risk and protective behaviors.

Goal 3: Investigate whether the health behaviors among residents differed between the neighborhoods.

Goal 4: Missoula Invest Health will use the data from this study to develop public health interventions.

Study Methods

The Invest Health Team used a mixed-methods approach, including:

- 1) An analysis of existing city and neighborhood community health data,
- 2) Neighborhood walkabouts, or walking focus groups, in all three (3) neighborhoods,
- 3) Collection of qualitative visual materials including photographs taken by participants during walkabout sessions, and
- 4) A 42-question resident survey.

Study Participants

One element of this project included facilitated walkabouts with key stakeholders in each neighborhood. The attendees of the walkabouts received a 15-minute introduction and then proceeded to walk around their neighborhood for 90 minutes, during which they answered questions, took photographs and discussed neighborhood features that were identified as assets or as in need of improvement. Resident attendance varied by neighborhood: Franklin to the Fort N= 10, Northside Westside N= 9, and River Road Neighborhood N= 7.

The second element of this project was the resident survey. The Missoula Invest Health team mailed a 42-question, postage-paid survey to all households in the Franklin to the Fort, Northside/Westside, and River Road neighborhoods. In the Franklin to the Fort neighborhood, 295 individuals participated in the survey, representing 40% of all survey respondents; 243 participated from the Northside/Westside neighborhood, representing 33% of participants; and 115 participated from the River Road neighborhood, representing 15% of participants. A total of 653 participants completed the survey, which collected demographic information as well as information related to neighborhood perceptions, physical activity and mental health measures.

Summary of Findings

This section summarizes key findings related to survey and walkabout responses gathered for this report. Economic indicators, access to health services, and nutrition variables do not vary significantly between the three neighborhoods and are summarized across the three neighborhoods below. The main areas of difference between the neighborhoods are needed infrastructure as it relates to physical activity and use of active transportation. For these variables, the information is discussed for each neighborhood.

Economic Indicators: Income, Employment, Education and Housing

The survey sample resembles the broader City of Missoula population in the areas of income, employment, education, and housing. Census data, however, indicates that there is a significant difference in household income between the three neighborhoods collectively and the city overall.

The estimated median income for all households in Missoula is \$41,421⁷. Citywide, income indicators show higher numbers of households with annual income of \$75,000 than reported by survey participants, where 11% of participants report earning \$75,000 or higher and the average household income was \$35-45,000.

The survey respondents were representative of Missoula in reported unemployment rates, with 3% of respondents indicating unemployment compared to 3.6% at the city level⁸.

In the area of education, the survey respondents were again representative of trends reported in Missoula. Forty-eight percent of survey respondents have a bachelor's degree or higher, while that figure is 46%⁹ at the city level. Similarly, within Missoula city limits almost 3% of the total population aged 25 and older do not have a high school diploma (or equivalency) or higher. Three percent of survey respondents do not have a high school diploma (or equivalent).

Citywide, 48% of units are owner occupied while 52% are renter occupied¹⁰; 57% of survey respondents were homeowners, and 43% renters.

Nutrition

Residents with access to supermarkets and grocery stores often have greater access to healthy food options. The Franklin to the Fort neighborhood has one (1) grocery store, Northside/Westside has two (2) and also houses the Missoula Community Food Co-op (which may explain the higher rates of use of a food co-op reported in that neighborhood), and River Road has one (1) grocery store which is also the primary store for Missoula offering organic food and natural products.

In Missoula an estimated 14% of adults are consuming less than 5 servings of fruits and vegetables each day¹¹ compared to 48% of survey participants.

⁷ Data Source: Policy Map, Census tract 2015.

⁸ Data Source: US Department of Labor, Bureau of Labor Statistics. 2016 . Source geography: Tract

⁹ Data Source: US Census Bureau, American Community Survey. 2011-15. Source geography: Tract

¹⁰ Data Source: US Census Bureau, American Community Survey. 2015. Source geography: Tract.

¹¹ Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health Human Services, Health Indicators Warehouse. 2013.

Physical Activity

Franklin to the Fort Neighborhood

Franklin to Fort neighborhood had more survey participants than the other two neighborhoods, with 295 residents responding to the survey. In this neighborhood, 29% report being able to get exercise when they want to; the most frequent barriers to exercise reported are bad weather (34%), lack of time (27%), and a lack of motivation (24%).

When asked what features respondents feel best support physical activity and mental health in their neighborhoods, parks and playgrounds was the second most frequently chosen feature (behind grocery stores). It should also be noted that when asked why they do not currently use parks and playgrounds, residents reported that they either do not have time or interest, or there is a lack of parks nearby. During the neighborhood walkabouts, the participants noted that there had been great improvements to Franklin Park and that the pocket park on 8th Street was particularly nice and offered neighborhood social activities such as educational programming and recreation, such as horseshoes. One area for further consideration is a noted park deficit in the area south of 14th Street.

Northside/Westside Neighborhood

The Northside/Westside neighborhood represented 37% of survey participants, with 243 residents responding to the survey. In this neighborhood, 39% report being able to get exercise when they want to and the most frequent barriers to exercise reported are bad weather (39%), lack of time (32%), and a lack of motivation (32%).

When asked what features respondents feel best support physical activity and mental health in their neighborhoods, proximity to downtown was the second most frequently chosen feature (behind grocery stores). Downtown Missoula offers an abundance of shopping, restaurants, riverfront trails, and social activities that neighborhood residents can access. During the neighborhood walkabout, one major topic of discussion was a lack of things to do in the Northside/Westside neighborhood. Participants identified the need for improved play area for middle school age children, a community center, and recreational opportunities such as basketball hoops, ice-skating rinks, and indoor spaces for play. However, they also noted several assets to the neighborhood including Westside Park, which has, a splash deck, and a popular playground area. The park is adjacent to the neighborhood school. The neighborhood also has both a dance and clay studio, another asset identified by the walkabout participants.

River Road Neighborhood

The River Road neighborhood represented 18% of survey participants, with 110 residents responding. In this neighborhood, 25% report being able to get exercise when they want to; the most frequent barriers to exercise reported are bad weather (35%), a lack of motivation (30%), and not having a place to exercise (30%). During the neighborhood walkabouts, however, participants noted that the “best things about the neighborhood” are the Milwaukee trail, safe streets due to an abundance of cul-de-sacs, and the fact that Missoula Parks and Recreation “does a good job plowing the trail in the winter.” Lack of a place to exercise was also echoed in the neighborhood walkabouts; participants noted wanting a community gym space, and tennis and basketball courts, and playground equipment.

There is one park with a playground, and green space along the trail but a couple of the park

areas are owned by “defunct” homeowners associations and are neither maintained nor available to the public for use. LaFray Park was noted as being underutilized. The need for lighting along the Milwaukee trail was indicated as a priority need to enhance access to physical activity year round.

Active Transportation

Franklin to the Fort Neighborhood

In the Franklin to Fort neighborhood, a large portion of survey respondents still rely on their car as their primary mode of transportation (72%). During the neighborhood walkabouts, traffic calming was discussed, and participants noted that there is an abundance of uncontrolled intersections and disconnected roadways that reduce ease of travel through the neighborhood. Additionally, participants discussed the need for traffic calming, but were concerned about the cost of such improvements and the burden it would place on property owners.

The above concerns identified during the neighborhood walkabouts were also mentioned as a contributing factor for limited biking and walking. Thirty-seven percent of survey respondents reported using neighborhood sidewalks, 31% report use of recreational paths and trails, and 19% use bike lanes. Walkabout participants noted that the abundance of uncontrolled intersections creates challenges for pedestrians and bicyclists, and the lack of sidewalks and also the condition of sidewalks on side streets make walking around the neighborhood unsafe and undesirable. The lack of sidewalks and safe walking routes was also discussed by walkabout participants as being a hindrance to safe routes to school. Of the main roadways in the neighborhood, Eaton Street was identified as lacking in basic features that improve active transportation such as curbs, sidewalks, bike lanes, and greenery. The other two main thruways, Catlin and Johnson have those features.

Participants acknowledge that the availability of non-motorized trail systems in the area assist in connecting different parts of the neighborhood where motorized streets do not, and provide a safer active for residents to walk and bike.

Overall, walkabout participants agreed that the neighborhood has accessible bus routes but lacks bus-stop shelters. While the walkabout participants note that bus routes are generally good in their neighborhood, only 11% of survey respondents report using the bus for regular transportation. This is an area that could be explored further.

Northside/Westside Neighborhood

In the Northside/Westside neighborhood, a large portion of survey respondents still rely on their car as their primary mode of transportation (63%). Less than 10% of neighborhood survey participants report walking or biking as a regular mode of transportation. During the neighborhood walkabouts, participants noted that improvements needed in the neighborhood are sidewalks, better lighting, access to trails, and safer walk-to-school routes. The safe walk to schools rose to the top as a topic of discussion, with participants noting a lack of lighting under the bridge (on the route), and unsafe conditions in the neighborhood, such as abandoned vehicles and the rail yard. While walking routes were generally considered unsafe, the walkabout participants recognized that the neighborhood has a “nice bike path,” even though just 10% of survey respondents in this neighborhood report using bicycles as a regular mode of transportation. Low use of the bike path may be an area for future inquiry.

River Road Neighborhood

In the River Road neighborhood, a large portion of survey respondents still rely on their car as their primary mode of transportation (74%). Less than 1% of survey respondents in this neighborhood report regularly walking or biking as a primary mode of transportation. The Milwaukee trail, noted as an asset during the walkabout, connects the River Road neighborhood to Missoula's bicycle/commuter trail system, yet does not seem to be utilized much by survey respondents. The walkabout participants noted that the trail crosses two major roadways, which might hinder ease of use. This could be an area deserving a future inquiry.

During the neighborhood walkabout, a lack of sidewalks and lighting in the area was noted as areas in need of improvement, along with a lack of connectivity throughout the neighborhood. While the abundance of cul-de-sacs was noted as an asset to the neighborhood, they also restrict mobility within the neighborhood. Few through-streets exist in the neighborhood; thus traffic is concentrated on a few main arteries: River Road, Wyoming Street, Curtis Street, and Davis Street. Walkabout participants noted that this makes sidewalks and sidewalk connectivity even more important.

Health Equity and Access to Services

Health equity is achieved when every person has the opportunity to "attain his or her full health potential."¹² In the United States, access to insurance coverage broadens an individual's opportunity to attain health potential, by relieving the financial burden of healthcare. It is a significant indicator of a person's ability to receive needed care. Access to regular primary care is important to preventing major health issues and emergency department visits.

In Missoula, 69% of adults aged 18 and older self-report that they do not have at least one person whom they think of as their personal doctor or health care provider¹³. Across all three surveyed neighborhoods, 80% of respondents report having a primary care provider, a figure significantly higher than the city average.

Accessing regular dental and preventive care is an important indicator because engaging in preventive behaviors decreases the likelihood of developing future health problems. In the three surveyed neighborhoods, 65% of respondents report visiting a dentist in the previous 12 months, while only 1% report having never visited a dentist.

¹² Health Equity Institute. San Francisco State University.

¹³ Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2011-12.



Photo: Franklin to the Fort Neighborhood Walkabout Participants

A Tale of Three Neighborhoods: A Study of Health Equity

About the Health Equity Framework

This report summarizes data collected through the Missoula Invest Health project and the findings are organized utilizing the Health Equity Framework, a model that underscores the belief that everyone deserves the opportunity to reach the highest level of health¹⁴. To achieve health equity, it is important to first understand the root causes of existing health disparities, or the differences in health outcomes among different groups of people. Social, economic, and environmental conditions are interrelated and can affect health in a number of ways.

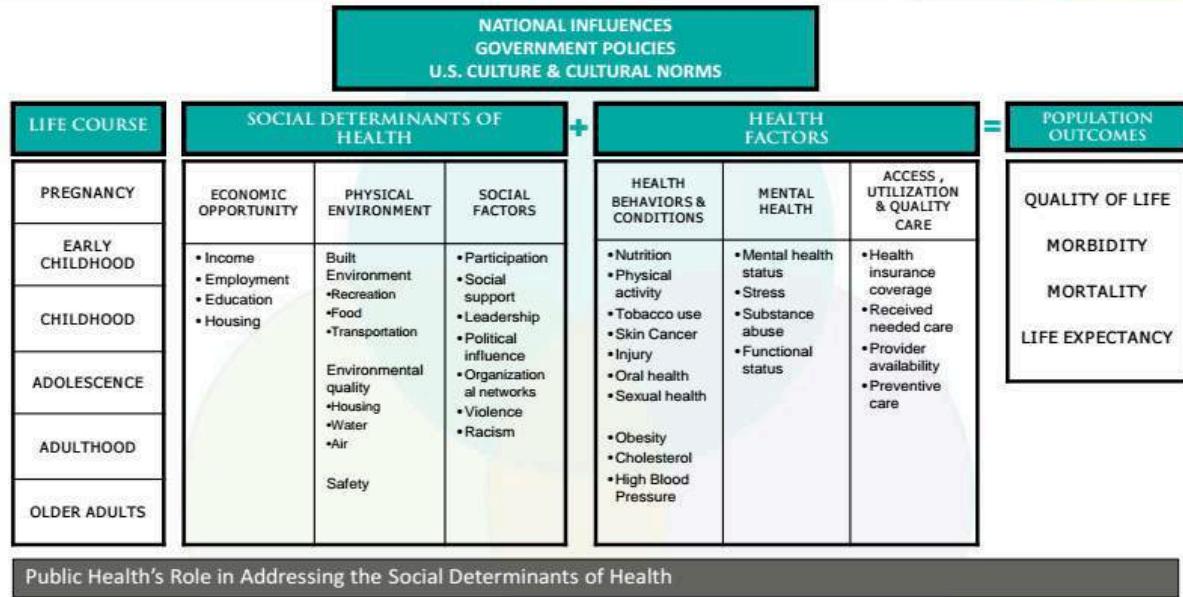
The Healthy Equity Framework suggests that any actions taken to address health equity must address the social determinants of health. The term “social determinants of health” refers to conditions (e.g., economic, physical, and social) that affect the quality of life and have a significant impact on neighborhood health outcomes¹⁵. Examples of these resources include safe and affordable housing, access to education, public safety, availability of healthy foods, access to local emergency/health services, and built environments that promote social participation and physical activity.

¹⁴ Colorado Department of Public Health. Healthy Equity Framework. Social Determinants of Health Workgroup. 2009.

¹⁵ U.S. Department of Health and Human Services Office of Disease Prevention and Health Promotion. Healthy People 2020. 2010.

Health Equity

AN EXPLANATORY MODEL FOR CONCEPTUALIZING THE SOCIAL DETERMINANTS OF HEALTH



Public Health's Role in Addressing the Social Determinants of Health

- Advocating for and defining public policy to achieve health equity
- Coordinated interagency efforts
- Creating organizational environments that enable change
- Data collection, monitoring and surveillance
- Population based interventions to address health factors
- Community engagement and capacity building

Colorado Department of Public Health – Social Determinants of Health Workgroup

Community Health Literature Review

Data from existing secondary sources were used to provide a comprehensive assessment of the neighborhood results gathered through the Missoula Invest Health project. A review of existing public health research in the areas of health equity, obesity, mental health, and the built environment aid in highlighting noteworthy relationships between trends, and situating local data into a broader context. A review of the literature also serves as a framework for identifying emerging or best practices on any recommended actionable items.

Neighborhood Walkabout

The Missoula Invest Health team partnered with neighborhood councils to coordinate three neighborhood walkabout and focus groups. The neighborhood walkabouts were a chance for neighborhood residents to walk through portions of the neighborhood, while discussing a series of questions asked by facilitators, participants also photographed the experience. Participants of the neighborhood walkabouts included Missoula Invest Health team members, University of Montana Community Health graduate students, Neighborhood Council Leadership Team members and community residents. Members of the Missoula Invest Health team facilitated the walkabouts, and University of Montana Community Health students transcribed the session, took photos and summarized the information (See Appendix B). The full walkabout notes and photo albums are included in the appendix of this report.

Resident Survey

Residents from three Missoula neighborhoods were surveyed: Franklin to the Fort, Northside/Westside, and River Road. The Missoula Invest Health team identified the three lowest-income neighborhoods by identifying areas with persistent poverty—namely, those areas in which, over the past 30 years (from 1980 to 2010) 20% of more of the population was living at or below the Federal Poverty Level ¹⁶.

TABLE 1: POVERTY OVERVIEW

	Franklin to the Fort	Northside/Westside	River Road East block*	River Road West block*	City of Missoula
All people in poverty	23%	30%	25%	25%	20%
Families with one adult and children that live in poverty	20%	59%	34%	0%	39%
Families with one female adult and children that live in poverty	33%	65%	55%	0%	46%
Families that live in deep poverty	4%	5%	3%	3%	3%
Persistent poverty	Yes	Yes	Yes		

Source: Policy Map, Census tract 2010. * Data is only available via Block group, 2010

According to the 2010 U.S. Census, there are a total of 7,722 residents in the Franklin to the Fort neighborhood, 8,851 in the Northside/Westside neighborhood, and 3,604 in the River Road neighborhood (See Appendix A).

The survey was mailed home to all residents in each neighborhood with postage paid-return envelopes, to improve the survey response rate (See Appendix C). The Missoula Invest Health team conducted outreach to vulnerable population groups through Missoula Aging Services, Missoula Urban Indian Health Center, the Salvation Army, Council Groves, At-Risk Housing Coalition members, and Summit Disability to help distribute the survey. The Neighborhood Council Leadership Team followed up with an outreach email to neighborhood residents.

The 42-question survey asked respondents to self-report demographic information such as gender, education, employment, income, and home ownership status. The survey then asked respondents questions relating to their use and perceptions of neighborhood features, to describe their health behaviors relating to physical activity and mental health, and to describe their level of access to businesses, services, and healthcare.

Survey Responses and Analytic Approach

A total of 736 respondents completed a 42-question survey; the survey included both

¹⁶ PolicyMap, American Community Survey. 2010-2014.

quantitative and qualitative data. University of Montana Community Health students entered the survey data into an online data platform, Survey Monkey. Prior to analysis, a process of data cleaning¹⁷ was complete, resulting in a valid sample size of 653. Survey items were analyzed using analysis functions available through Survey Monkey, including measures of central tendency (median, mean, min, max and standard deviation).

A cross tab shows the relationship between two or more survey questions and provides a side-by-side comparison of how different groups of respondents answered survey questions and the key variables of interest were compared for residents in each neighborhood. The analyses shown are descriptive in nature.

Thirteen survey questions had open-ended response options. For these survey items, the open-ended responses were coded for main emergent themes, and responses were compared by neighborhood. If a response did not fit into an existing response category, it was coded into additional response categories to aid in identifying themes and sub-themes for further analysis. Responses were aggregated within each category and compared by neighborhood.

Methodological and Data Limitations

When interpreting the findings in this report, it is important to note that they may not be considered a representative sample due to sample size, and that the participants were self-selected, rather than randomized. This report reflects a review of neighborhood conditions at a single point in time and can be utilized to design future areas of inquiry.



Photo: Franklin to the Fort Neighborhood Walkabout Participants

¹⁷ Three survey questions had the response options “I do not know” or “not sure”. These responses were removed from data analysis, and the central tendency for those questions was re-calculated. During reporting, these questions are discussed based on the ‘valid responses’.

Resident Survey Findings

Number of Surveys Submitted

Altogether, 736 people participated in the survey (N=736); see Table 1.

TABLE 2: SURVEY RESPONDENTS (N=736)

	Number of Completed Surveys	Percent of Total Sample
Franklin to Fort	295	40%
North/Westside	243	33%
River Road	115	15.5%
I do not know	70	9.5%
Skipped question	13	2%
GRAND TOTAL	736	100%

The 83 surveys with missing data related to neighborhood residence were omitted from the analysis. This yielded a final analytic sample of 653 completed surveys. The remaining analyses in this report focused on these 653 respondents.

Demographic Profile of Survey Participants

The three surveyed neighborhoods were similar demographically. The current sample was 63% female, 33% male, and >1% transgender. In terms of race/ethnicity, 92% self-identified as White, 5% as American Indian, 2.4% multiple races, 1.3% as Hispanic/Latino, and >1% as African American. 3.7% of respondents did not answer this question.

By comparison, based on census data, Missoula residents are 50% female, 50% male¹⁸, 91% white, and 2.5% American Indian, 4% multiple races, 3% as Hispanic/Latino, and >1% as African American¹⁹.

Economic: Income, Employment, Education and Housing

TABLE 3: SURVEY RESPONDENT DEMOGRAPHIC INFORMATION

	Franklin to the Fort	Northside/ Westside	River Road	Neighborhood Totals
INCOME				
\$0-35,000	37%	49%	44%	51%
\$35,001- 45,000	17%	13%	10%	15%
\$45,001- 55,000	8%	11%	11%	10%
\$55,001-65,000	9%	7%	5%	8%
\$65,001-75,000	7%	6%	7%	7%
Above \$75,000	14%	10%	13%	13%
EMPLOYMENT				
Employed full-time	50%	44%	34%	46%
Retired	21%	17%	28%	22%
Employed part-time	9%	12%	14%	12%

¹⁸ Data Source: US Census Bureau, American Community Survey. 2011-15

¹⁹ Data Source: US Census Bureau. 2010.

SSI Disabled	7%	8%	5%	9%
Student	1%	3%	5%	3%
Stay-at-home caregiver	4%	5%	5%	5%
Unemployed	2%	4%	1%	3%
EDUCATION				
Associate's Degree	6%	5%	4%	6%
Bachelor's Degree	30%	32%	30%	34%
Doctorate Degree	4%	2%	4%	4%
High school diploma/GED	11%	10%	12%	12%
Master's Degree	17%	20%	21%	20%
Some college, no degree	16%	16%	17%	19%
Some high school	3%	2%	3%	3%
Trade/Technical/Vocational	5%	9%	4%	8%

Income

Income is the most commonly used measure of economic resources in public health research. This survey captured a point in time measure of neighborhood participants' annual household income and provides limited information about lifetime economic circumstances.

Across the three (3) neighborhoods, 51% of respondents reported earning \$0-35,000 annual household income, 15% reported \$35,001-45,000, and 13% report earning \$75,000 or higher. In Missoula, the median household income is \$41,424²⁰.

TABLE 4: INCOME

	Franklin to the Fort	Northside/ Westside	River Road	City of Missoula
Median family income	\$44,682	\$36,200	N/A	\$41,424
Single female with children	N/A	\$16,594	\$23,472	\$19,145
Homeowners	\$46,536	\$32,674	\$47,684	\$67,323
Renters	\$30,670	\$27,656	\$22,981	\$26,530

Source: Policy Map, Census tract 2010. * Data is only available via Block group, 2010

Employment

Steady employment can provide necessary components to good health such as income, health insurance, and stability²¹. Of the survey respondents, 46% were employed full-time, 22% were retired, 12% were employed part-time, 9% were SSI Disabled, 5% were stay-at-home caregivers, and 3% were students. In Missoula, 37,257 residents are employed²² meaning they participate in any paid work (full- or part-time, self-employment, seasonal, and temporary workers) and the total unemployment rate for those aged 16 and older is 3.6% (non-seasonally

²⁰ Data Source: US Census Bureau, American Community Survey. 2011-15.

²¹ How Does Employment – Or Unemployment- Affect Health? Health Policy Snapshot. Robert Wood Johnson Foundation. Issue Brief, March 2013.

²² U.S. Bureau of Labor and Statistics. Missoula. 2015.

adjusted)²³. The survey respondents reflected the city level unemployment rate with 3% of respondents reporting unemployment.

The Franklin to the Fort neighborhood respondents shows higher rates of full-time employment (50%), than the Northside/Westside (44%) and River Road (34%) neighborhood respondents.

Education

Educational attainment has also been linked to positive health outcomes; postsecondary educational attainment is often linked with greater access to income, access to healthcare, and access to social support networks²⁴. In Missoula, 46% of the population holds a Bachelor's Degree or higher, while 5% do not have a high school diploma (or equivalency)²⁵.

In this survey, 58% of respondents have a Bachelor's degree or higher, 39% have postsecondary education or vocational training, 12% have a high school diploma (or equivalency), and 3% do not have a high school diploma (or equivalency).

TABLE 5: EDUCATION

	Franklin to the Fort	Northside/Westside	River Road East block	River Road West block*	City of Missoula
Number of children attending public school K – 12	593	585	634	N/A	8273
Percent of people with some high school but no diploma	5%	6%	5%	2%	3%
Percent of people over 25 with a high school diploma	36%	23%	35%	27%	19%
Percent of people with a bachelor's degree	18%	21%	19%	21%	28%

Source: Policy Map, Census tract 2011-2015. * Data is only available via Block group, 2015

Housing

Home ownership is an important indicator because it represents housing and income stability, an indicator linked to positive health outcomes and investment in the neighborhood²⁶. According to the survey, the distribution of renters is 43% and homeowners represent 57%. More than half (54%) of respondents in the Franklin to the Fort neighborhood have lived in their homes for more than 11 years, while 40% of the Northside/Westside respondents and 43% River Road respondents report living in their home for 11 years or more.

²³ Data Source: US Census Bureau, American Community Survey. 2011-15.

²⁴ Education and Health. Exploring the Social Determinants of Health. Robert Wood Johnson Foundation. Issue Brief 5, May 2011.

²⁵ US Census Bureau, American Community Survey. 2011-15

²⁶ Housing and Health. Exploring the Social Determinants of Health. Robert Wood Johnson Foundation. Issue Brief 7, May 2011.

TABLE 6: HOME OWNERSHIP PROFILE

Neighborhood	Own/Rent	Time in Home	Percent of Responses
Franklin to Fort	Own = 59%	1-5 years	28%
		6-10 years	21%
		Less than 1 year	9%
		More than 11 years	43%
	Rent = 41%	1-5 years	51%
		6-10 years	16%
		Less than 1 year	21%
		More than 11 years	11%
North/Westside	Own = 53%	1-5 years	36%
		6-10 years	26%
		Less than 1 year	5%
		More than 11 years	33%
	Rent = 47%	1-5 years	46%
		6-10 years	13%
		Less than 1 year	34%
		More than 11 years	7%
River Road	Own = 57%	1-5 years	37%
		6-10 years	22%
		Less than 1 year	6%
		More than 11 years	35%
	Rent = 43%	1-5 years	49%
		6-10 years	14%
		Less than 1 year	29%
		More than 11 years	8%
Neighborhood Totals	Own = 57%	1-5 years	18%
		6-10 years	13%
		Less than 1 year	4%
		More than 11 years	22%
	Rent = 43%	1-5 years	21%
		6-10 years	9%
		Less than 1 year	12%
		More than 11 years	4%

Housing is well understood to be an important social determinant of physical and mental health and well-being. Families paying excessive amounts of their income for housing often have insufficient resources remaining for other essential needs, including food, medical insurance, and health care. Households that spend more than half their income on housing costs, and are therefore severely housing cost burdened, spent less on food and health care compared to similar households spending 30 percent or less of their income on housing.

Median owner costs as percent of income = Estimated median selected monthly owner costs as a Estimated percentage of household income, for all owner-occupied housing units (with and without a mortgage), between 2010-2014. Owner housing costs include all mortgage principal payments, interest payments, real estate taxes, property insurance, homeowner fees, condo or coop fees and utilities (not including telephone or cable television)

Median owner costs as percent of income = Estimated median selected monthly owner costs as a Estimated percentage of household income, for all owner-occupied housing units (with and without a mortgage), between 2010-2014. Owner housing costs include all mortgage principal payments, interest payments, real estate taxes, property insurance, homeowner fees, condo or coop fees and utilities (not including telephone or cable television)

Cost burdened households = Estimated percent of owner households for whom selected monthly owner costs are 30% or more of household income between 2010-2014

Extremely cost burdened = Estimated percent of owner households for whom selected monthly owner costs are 50% or more of household income between 2010-2014. Table 3: Housing homeowner status

TABLE 7: HOUSING STATUS AND COST BURDEN

	Franklin to the Fort	Northside/ Westside	River Road East block*	River Road West block*	City of Missoula
Renter rate	59%	69%	62%	45%	52%
Renter cost burdened households	33%	31%	38%	29%	33%
Median renter cost as a percent of income	33%	31%	38%	29%	33%
Homeownership rate	41%	31%	38%	55%	48%
Homeowner cost burdened households	36%	32%	17%	35%	26%
Median owner costs as a percent of income	23%	20%	18%	22%	20%

Source: Policy Map, Census tract 2015. * Data is only available via Block group, 2015.

Physical Environment: Recreation, Transportation, Food, and Neighborhood Safety

Recreation

The Healthy People 2020 initiative²⁷ is a 10-year national initiative for improving the health of all Americans. The physical activity objectives for the initiative highlight how structural environments such as parks and trails positively affect activity levels.

Survey respondents were asked to indicate whether they had utilized parks, playgrounds, or other green space in the past 12 months. This question was not answered by 8% of respondents (n=55).

A majority of residents in the Northside/Westside neighborhood utilize parks, playgrounds, and other green space, with 90% of those neighborhood respondents indicating they had used these features in the prior 12 months. The other two neighborhoods also reported high usage numbers: River Road (85%) and Franklin to the Fort (83%).

Chart 1

Use of park, playground, or greenspace in past 12 months.

Percent of responses by neighborhood



Source: MIH Neighborhood Survey

Survey respondents who answered “no” to using parks, playgrounds, and other green space in the previous 12 months were prompted to answer another question about their reasons for not using these features. Eighty-nine respondents answered this question. Of those who answered this question, 42% stated they were not interested in going to the park/playground/or other green space, 19% reported a lack of access nearby, and 25% reported “other” as reason (see below for further explanation about these responses)²⁸.

In the Franklin to the Fort neighborhood, the top two reasons for not using parks, playgrounds or green spaces were a lack of interest by the respondent, and “other”. A summary of the Franklin to Fort, “Other” responses are outlined below (listed in order of highest number of responses to lowest):

- 1) Time (33%)
- 2) No park near me (16%)

²⁷ U.S. Department of Health and Human Services Office of Disease Prevention and Health Promotion. Healthy People 2020. 2010.

²⁸ The percentages may exceed 100%, as respondents were able to choose more than one option.

- 3) Homebound (16%)
- 4) Not age appropriate (respondents reported being “too old” to use these neighborhood features, or reported that their children were “too young” to use these features) (16%)

In the Northside/Westside neighborhood, the top two reasons for not using parks, playgrounds or green spaces were a lack of interest by the respondent, and “other”. A summary of the Northside/Westside, “Other” responses are outlined below (listed in order of highest number of responses, to lowest):

- 1) Time (50%)
- 2) No park near me (25%)
- 3) Homebound (25%)
- 4) Not age appropriate (respondents reported being “too old” to use these neighborhood features, or reported that their children were “too young” to use these features) (25%)

In the River Road neighborhood, the top two reasons for not using parks, playgrounds or green spaces were a lack of interest by the respondent (50%), and a lack of access nearby (50%).

When asked to indicate what three (3) improvements to park and recreation facilities respondents believe would best support physical activity in their neighborhood, **the top** three (3) items out of fifteen (15) options were: complete sidewalks (46%), better street lighting (40%), and sports fields²⁹ (31%). This question was skipped by 11% of respondents (n=71).

Survey respondents were asked to indicate whether they had used recreational trails in the past 12 months. A small percentage (7%) of respondents did not answer this question (n=44).

Overall, 69% of survey respondents reported regularly³⁰ using recreational paths or trails and 25% report rarely/never using paths and trails. In addition, 7% reported limited use due to lack of nearby access.

Transportation

The Centers for Disease Control and Prevention (CDC) have gathered longitudinal data that suggest that when people utilize active transportation, they are more likely to increase their daily physical activity levels³¹. In the most recent 5-year (2011-2015) City of Missoula report on commuting methods, 69% drive alone, 8% carpool, 7% walk, 6% bike, 2% use public transit, and less than 1% use a taxicab, motorcycle or other means of transportation³².

Survey respondents were asked to indicate the mode of transportation they use the most. Car use was the most commonly indicated mode of transportation with 75% of respondents across the three (3) neighborhoods choosing this option. Nearly a quarter (21%) of respondents reported using some form of active transportation, such as walking, biking, carpooling, or utilizing the bus on a regular basis in the previous 12 months. Bicycle and bus use were less common with 11% and 5% respondents reporting regular use respectively. A small percentage (8%) of respondents did not answer this question (n=54).

²⁹ Five (5) categories were combined under one umbrella category for the purposes of analysis: Baseball fields, Soccer fields, Basketball courts, Tennis courts, Volleyball courts were combined into one category titled, “sports fields”.

³⁰ Regular use is defined as “Often” or “Sometimes”.

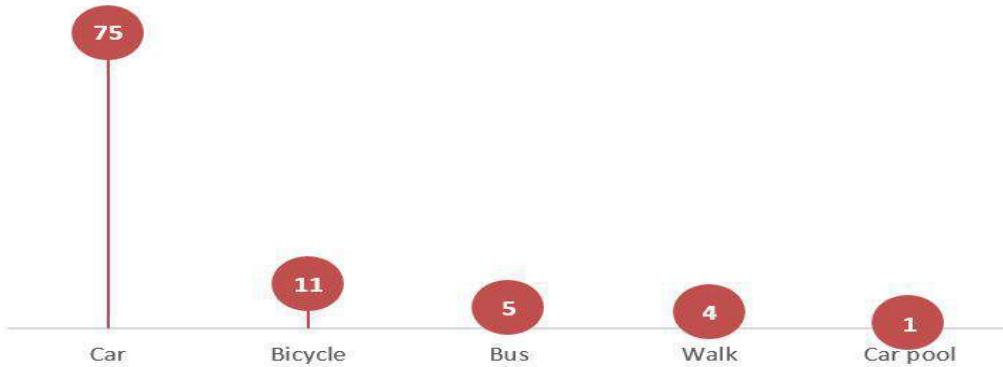
³¹ Centers for Disease Control and Prevention (CDC). 2011. Strategies to prevent obesity and other chronic diseases: The CDC Guide to Strategies to Increase Physical Activity in the Community.

³² Data Source: US Census Bureau, American Community Survey. 2011-15.

Chart 2

Modes of Transportation

Percent of all responses



Source: MIH Neighborhood Survey

River Road respondents indicated less regular use of active transportation, sidewalks, and bike lanes compared to the other two neighborhoods and were more likely than the other two neighborhoods to report “not near me” as the reason for infrequent use.

Analysis of survey responses shows that while car use was the most frequently reported mode of transportation, 60% of car users said they believe active transportation supports physical health. This indicates that while people recognize the benefits of active transportation, they experience barriers to regular use as outlined below.

BIKING

In the Franklin to the Fort neighborhood, the top two reasons respondents do not bike are (1) unpaved streets make it difficult, and (2) the respondent is usually in a hurry and/or biking takes too long.

In the Northside/Westside neighborhood, the top two reasons respondents do not bike are (1) unpaved streets make it difficult, and (2) the respondent feels unsafe.

In the River Road neighborhood, the top two reasons respondents do not bike are 1) the respondent is usually in a hurry and/or biking takes too long, and (2) the second response was a tie between unpaved streets make it difficult and the respondent feels unsafe.

WALKING

In all three (3) neighborhoods, the top two reasons respondents do not walk are 1) the respondent is usually in hurry and/or walking takes too long, and 2) there is a lack of sidewalks in the area.

BUS UTILIZATION

In all three neighborhoods, the top two reasons respondents do not use the bus are 1) bus schedules do not work for them, and 2) respondent is in a hurry and taking the bus takes too long.

Food

The CDC has gathered longitudinal data that suggest that when people have access to healthy food sources such as supermarkets, farmers markets, and community garden and urban farming opportunities, they have a lower risk for obesity and increased positive food consumption habits³³.

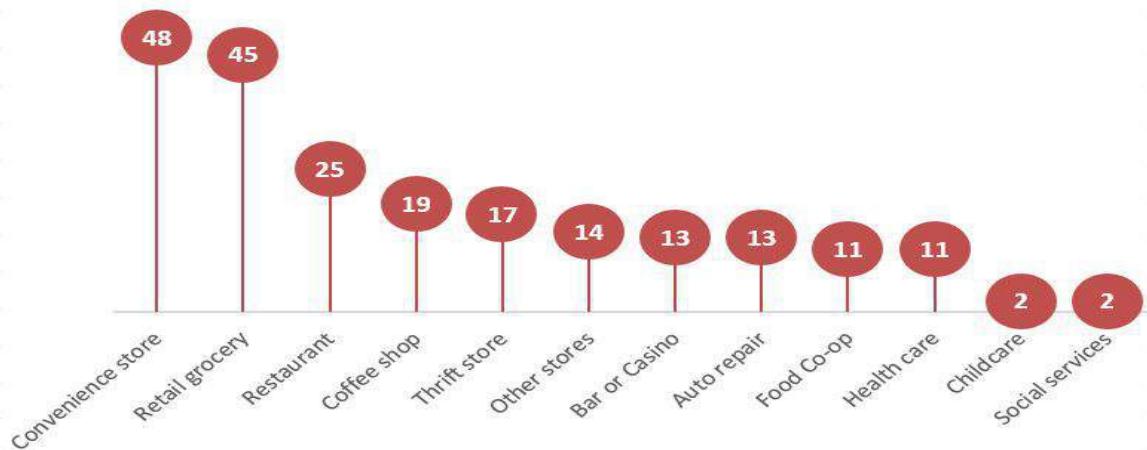
When asked about the current businesses and services respondents (N=611) utilize most in their neighborhood, across all of the neighborhoods, three (3) items consistently rose to the top: gas station or convenience store (48%), retail grocery (45%), and restaurants (25%).

Northside/Westside neighborhood respondents report higher use of a food co-op (n=64 or 7%).

Chart 3

Neighborhood services used in previous 12 months

Percent of all responses



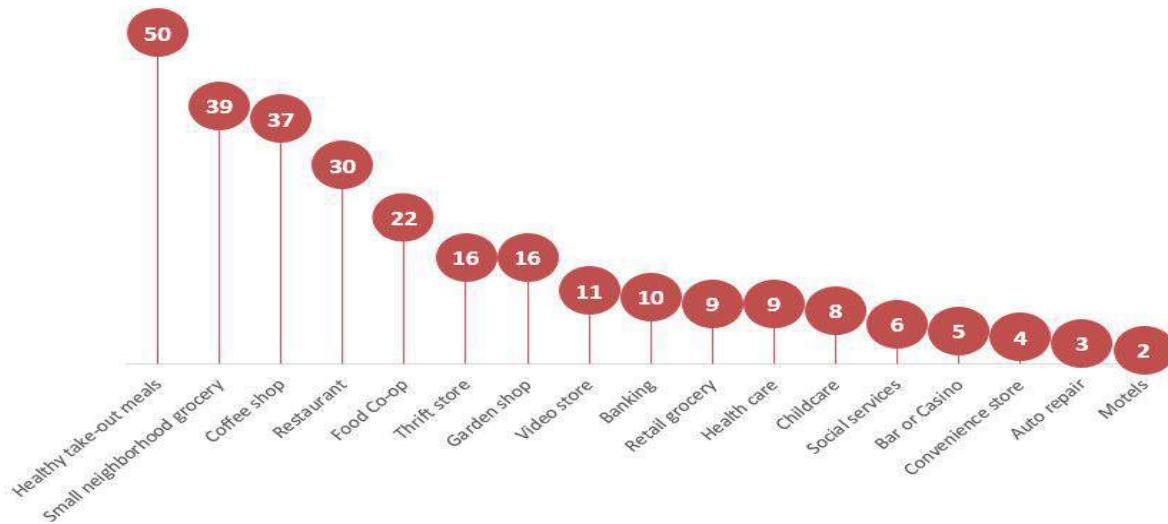
Source: MIH Neighborhood Survey

Survey respondents were asked to choose from the list of 17 businesses and services that residents feel are needed, and consistently, across the three (3) neighborhoods, five (5) items rose to the top. Ranked highest to lowest, these are: healthy take-out meals (50%), small neighborhood grocery (39%), and a coffee shop (37%), restaurant (30%), and food co-op (22%). Almost 18% of respondents skipped this question (n=115).

³³ The Centers for Disease Control and Prevention (CDC). 2011. Healthy Places Initiative.

Chart 4**Business or services you feel are needed in your neighborhood**

Percent of all responses



Source: MIH Neighborhood Survey

Across all three (3) neighborhoods, roughly half (48%) of the sample reports growing some of their own food, and the other half does not (52%).

Neighborhood Safety

The perception of neighborhood safety can influence health and well-being of residents and also influence their likelihood to utilize neighborhood features (i.e., parks, trails, and community-centered events)³⁴. Survey respondents were asked to state the degree to which they agree with the statement using a Likert scale from 1 (strongly disagree) to 5 (strongly agree), “My neighborhood is safe”.

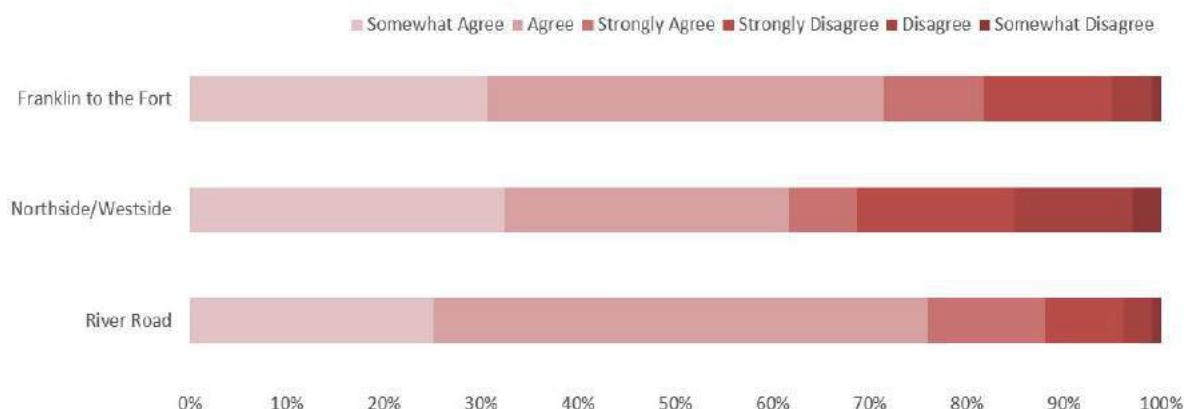
Overall, 78% of respondents in all three (3) neighborhoods report that they somewhat agree, agree, or strongly agree with the statement. This question was skipped by 8% of respondents (n=51).

³⁴ Where We Live Matters for Our Health: Neighborhoods and Health. Robert Wood Johnson Foundation. Issue Brief 3, September 2008.

Chart 5

Do you agree with the statement, "My neighborhood is safe."

Percent of responses by neighborhood



Source: MIH Neighborhood Survey

Perceptions of crime are higher in the Northside/Westside neighborhood, with 32% of respondents indicating they believe their neighborhood is unsafe compared to 19% in the Franklin to Fort neighborhood and 12% in the River Road neighborhood.

When looking at the relationship between the question about whether respondents agree with the statement, "My Neighborhood is Safe" and self reported days of "Feeling Worried, Tense, or Anxious" the data shows that when people reported feeling safe in their neighborhood, they were also likely to report fewer days each month (0-7 days) feeling worried, tense, or anxious. Similarly when comparing responses of neighborhood safety with self-reported days of overall health status, respondents are also likely to self-report their overall health status as excellent, very good, or good when they also report feeling safe in their neighborhood.

Social Factors: Participation in Neighborhood Activities

A vital source of well-being is participation, or opportunity to participate, in the activities of the local communities where individuals live. Improving quality of life and well-being is a Healthy People 2020 objective, and the World Health Organization recognizes the importance of the level of community integration or involvement, based on a person's level of participation³⁵.

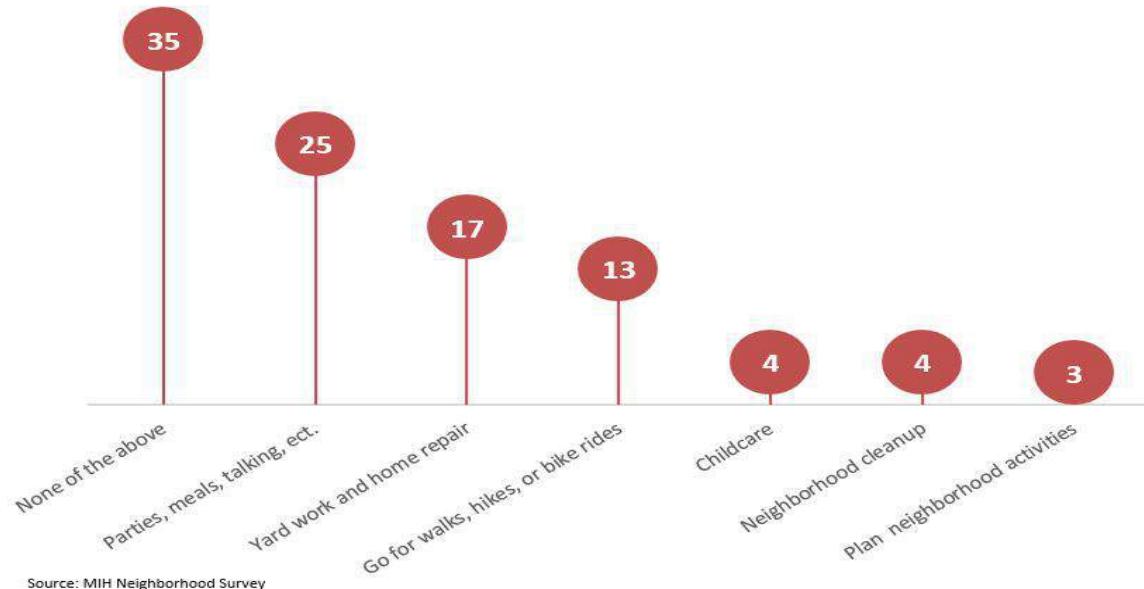
Survey respondents were asked to indicate, from the list of 7 activities, which if any they participated in with their neighbors. Residents could indicate more than one response, thus the total may equal over 100%. Neighborhoods were similar in their responses. This question was not answered by 4% of respondents (n=25).

About one third (35%) of respondents report not engaging in any social activities with their neighbors. Of those who reported engaging in social activities, 25% report having meals or parties, 17% report doing yard work or home repair with their neighbors, and 13% report going on walks, hikes, or bike rides with their neighbors.

³⁵ World Health Organization. The World Health Organization Quality of Life assessment (WHOQOL): position paper from the World Health Organization. Soc Sci Med 2005; 41(10):1403–1409.

Chart 6**What kinds of activities do you do with your neighbors?**

Percent of all responses



Source: MIH Neighborhood Survey

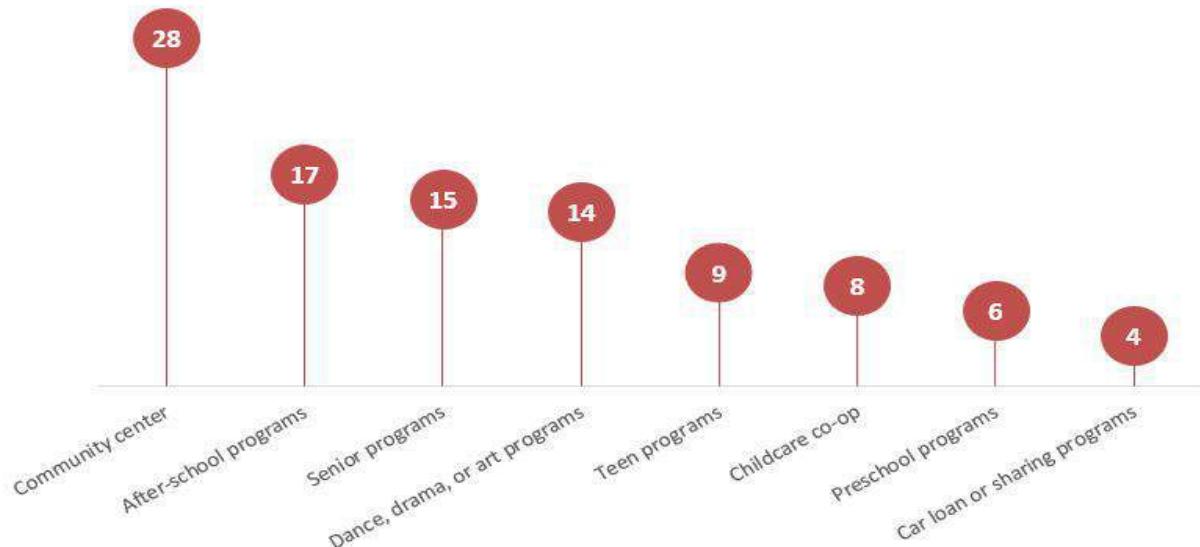
When looking at the relationship between the question about whether or not participants engage in social activities with their neighbors and self reported days of “Feeling Worried, Tense, or Anxious” the data shows that when people engaging in social activities with neighbors, they were also likely to report fewer days each month (0-7 days) feeling worried, tense, or anxious. Similarly, when comparing responses of the same question with self-reported days of overall health status, respondents are also likely to self-report their overall health status as excellent, very good, or good when they also report engaging in social activities with neighbors.

Survey respondents were asked to choose 3 options from the list of 8 neighborhood features that residents feel best support social participation. Consistently across all neighborhoods, 4 items rose to the top (ranked highest to lowest): community center (28%), after-school programs (17%), and senior programs (15%), and Dance/Drama/Art programs (14%). This question was skipped by 15% of respondents (n=97).

Chart 7

What 3 social activities do you think best support physical activity and mental health in your neighborhood?

Percent of all responses



Source: MIH Neighborhood Survey

Individual Health Factors: Nutrition and Physical Activity

Nutrition

What people choose to eat can directly influence their ability to prevent chronic diseases like heart disease and diabetes, influence their likelihood of experiencing complications related to obesity, and generally contribute to a person's overall quality of life³⁶. Respondents (n=229) who report eating five (5) servings of fruits and vegetables per day have a low likelihood (23%) to report "excellent" or "very good" health. The highest frequency of respondents reporting very good (n=168) and good (n=178) health were more likely to respond "no" to eating at least five (5) servings of fruits/vegetables per day.

We would expect to see health outcomes improve when people either grow their own food or consume at least five (5) servings of fruits/vegetables, as suggested by longitudinal studies conducted by the CDC as part of the Healthy Places Initiative³⁷. However, since this is a point in time survey, we cannot draw a conclusion of causation between consumption of fruits and vegetables with positive reported health outcomes.

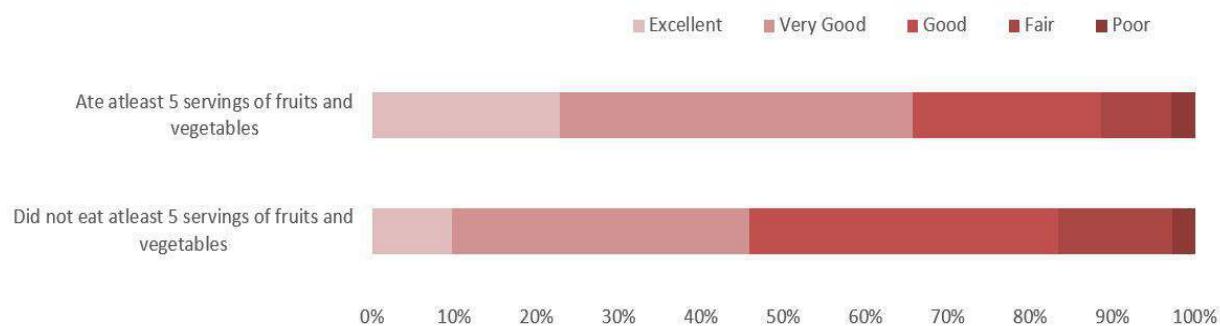
³⁶ U.S. Department of Agriculture, Office of Nutrition. 2015–2020 Dietary Guidelines for Americans. Eighth Edition.

³⁷ The Centers for Disease Control and Prevention (CDC). 2011. Healthy Places Initiative.

Chart 8

How individuals rate their health (from excellent to poor) in comparison to eating 5 servings of fruits and vegetables per day

Percent of all responses



Source: MIH Neighborhood Survey

Survey respondents (N=618) were asked about the proximity of a local supermarket or grocery store to their home. Less than half (42%) of respondents report not being able to access a supermarket or grocery store within 5 blocks of their home.

While 48% of survey respondents report lower intake of fruits/vegetables per day, they also report low consumption of sugar-sweetened drinks (such as sweetened coffee, sports drinks, etc.). More than half (57%) report consuming zero (0) sugar-sweetened drinks on a daily basis, 37% report having one (1) or two (2), and 5% report consuming three (3) or more per day.

Physical Activity

Regular physical activity can improve health and quality of life, regardless of the presence of a chronic disease or disability³⁸.

Survey respondents were asked to indicate, of the past 30 days, how often they exercised: 31% report 0-7 days, 30% report 8-15 days, 22% report 16-23, and 15% report 24-30 days. Nearly one-third (30%) of all respondents report “getting the amount of exercise they want”.

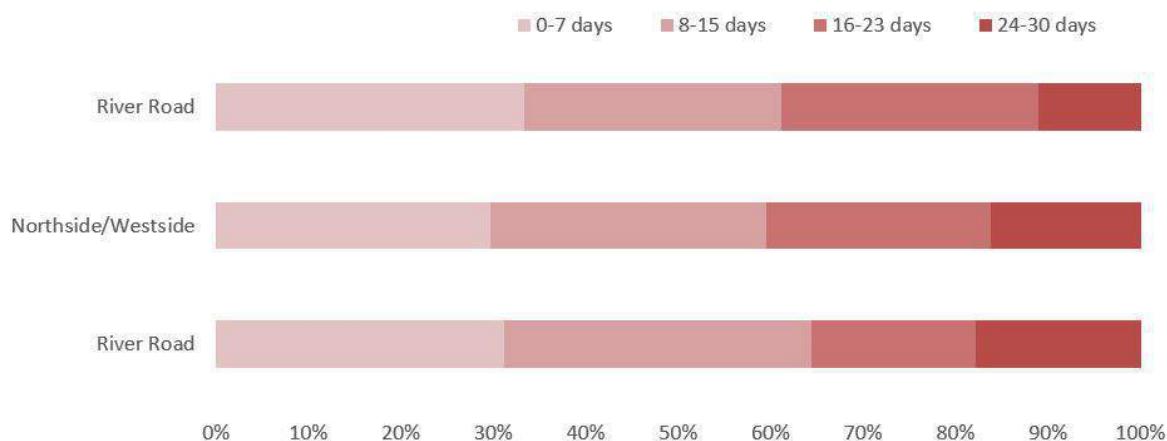
Almost half (49%) of all survey respondents identified neighborhood features such as parks, playgrounds and green space as positive contributors to physical health, yet report significant barriers to regular use of these features. Across the three (3) neighborhoods, the most frequently cited reason for not using neighborhood features such as parks, trails, and green space is due to weather (36%), lack of time (30%) and lack of interest/motivation (28%).

³⁸ U.S. Department of Health and Human Services (HHS), Office of Disease Prevention and Health Promotion. 2008 Physical activity guidelines for Americans. Washington, DC: HHS; 2008.

Chart 9

How many days of exercise did you get?

Percent of responses by neighborhood



Source: MIH Neighborhood Survey

Mental Health Factors: Mental Health Status and Stress

Survey respondents were asked to self-report whether they had experienced depression, emotional fragility, isolation, stress, or thoughts of suicide in the previous 90 days. The most frequently endorsed conditions, from highest to lowest responses, were: feeling stressed (63%), depressed (34%), emotionally fragile (26%), isolated (18%), and suicidal (3%). 27% of respondents indicated that they had not experienced any of the above in the past 90 days. This question was not answered by 1% of respondents (n=8).

The most frequently reported mental health symptom among all survey participants is stress, with over half of the respondents indicating that they have felt stress in the previous 90 days. When asked how often they think about ways to reduce stress, respondents typically answered “a little” (35%) or “a fair amount” (29%), while 21% reported thinking about stress reduction “a great deal.” This question was skipped by 1% of respondents (n=9).

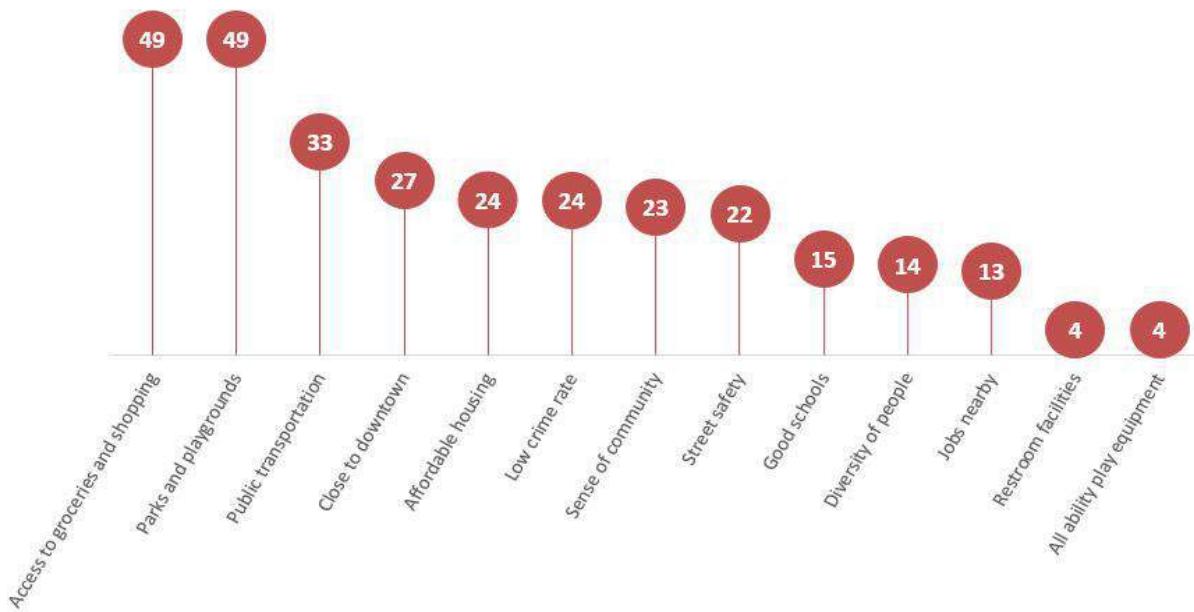
Finally, when asked about their engagement in stress-relieving activities, residents most often reported: reading or listening to music (63%), exercising, running, or walking (58%), social activities (48%), watching television (46%), and doing things for other people (41%). This question was skipped by 1% of respondents (n=9).

When asked about neighborhood features that participants believe positively influence health and mental well-being, across the three (3) neighborhoods, three (3) items rose to the top (ranked highest to lowest): parks and playgrounds (49%), access to groceries and shopping (49%), and public transportation (33%). Survey respondents (N=637) were asked to choose just three (3) options from the list of 12 neighborhood features. Two percent (n=16) of respondents skipped this question.

Chart 10

What 3 features do you think best support physical activity and mental health in your neighborhood?

Percent of all responses



Source: MIH Neighborhood Survey

Access to Health: Insurance Coverage and Receiving Needed Care

Access to comprehensive, quality healthcare services are important factors in the achievement of health equity. Access to health services impacts overall physical and mental health status, early detection and treatment of health conditions, and quality of life³⁹. Barriers to receiving needed health services often include lack of insurance coverage and high cost, which can lead to unmet needs, delayed care, preventable hospitalizations, and inability to access preventive care.

Survey respondents were asked to describe their current healthcare coverage. These are, listed in order of highest number of responses, to lowest: insured by employer (45%), Medicare (20%), Medicaid (13%), insurance obtained through the Affordable Care Act (9%), private insurance (5%), and uninsured (7%). This question was not answered by 4% of respondents (n=27).

Across all three (3) neighborhoods, 80% of respondents report having a primary care provider and 81% report being able to receive medical care when needed. For the 20% reporting no primary care provider, they receive their healthcare at urgent care clinics (47%), the emergency room (5%) or through telemedical services (>1%).

³⁹ U.S. Department of Health and Human Services Office of Disease Prevention and Health Promotion. Healthy People 2020. 2010

Of all the survey respondents, either with or without insurance coverage of some form, 79% report not having used the emergency room in the prior year.

A similar number of survey participants (65%) report going to the dentist in the past year, 11% report a dental visit in the past 5-years, and 1% report never having been to a dentist.

Of respondents not able to access needed medical care, 28% report their health insurance would not cover the cost and 20% report that the cost of care was too high.

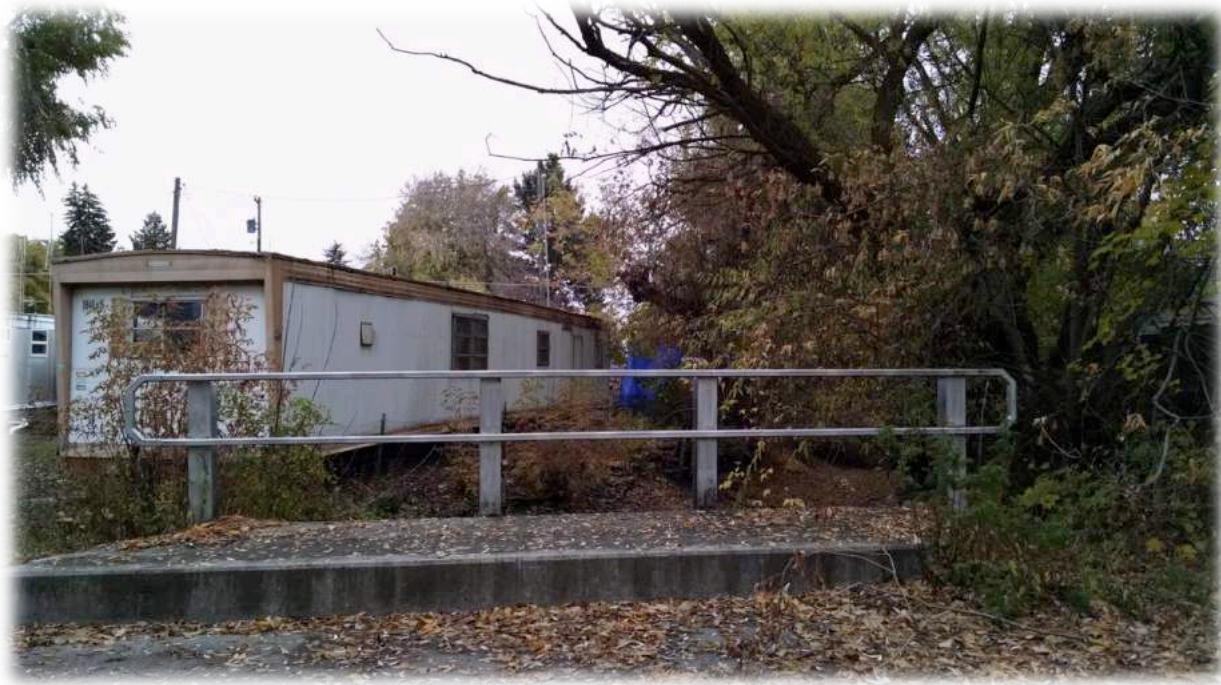


Photo: Neighborhood Walkabout/Ditch

Neighborhood Needs

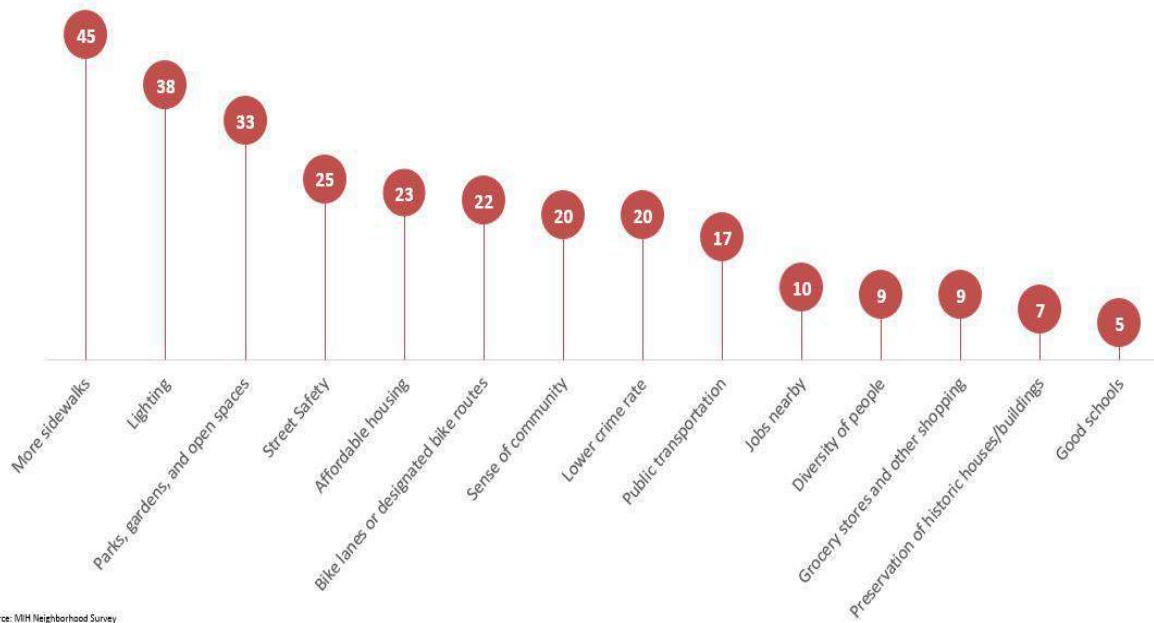
Neighborhood Features

Survey respondents were asked to choose three (3) options from the list of 12 neighborhood features that residents feel are needed to better support physical activity and mental health. Consistently across the three (3) neighborhoods, three (3) items rose to the top (ranked highest to lowest): more sidewalks (45%), better lighting (38%), and parks, gardens and open spaces (33%). This question was skipped by 5% of respondents (n=35). In two neighborhoods, a significant percentage (over 20%) of respondents chose “other”, the details are outlined below.

Chart 11

What 3 features does your neighborhood need to support physical activity and mental health in your neighborhood?

Percent of all responses



Source: MiH Neighborhood Survey

In the Franklin to the Fort neighborhood 21% of respondents chose “other”, the “other” responses are defined below:

- 1) More traffic calming
- 2) None needed
- 3) Less taxes/government
- 4) Access to trails/sidewalks
- 5) Snow removal

In the Northside/Westside neighborhood 26% of respondents chose “other”, the “other” responses are defined below:

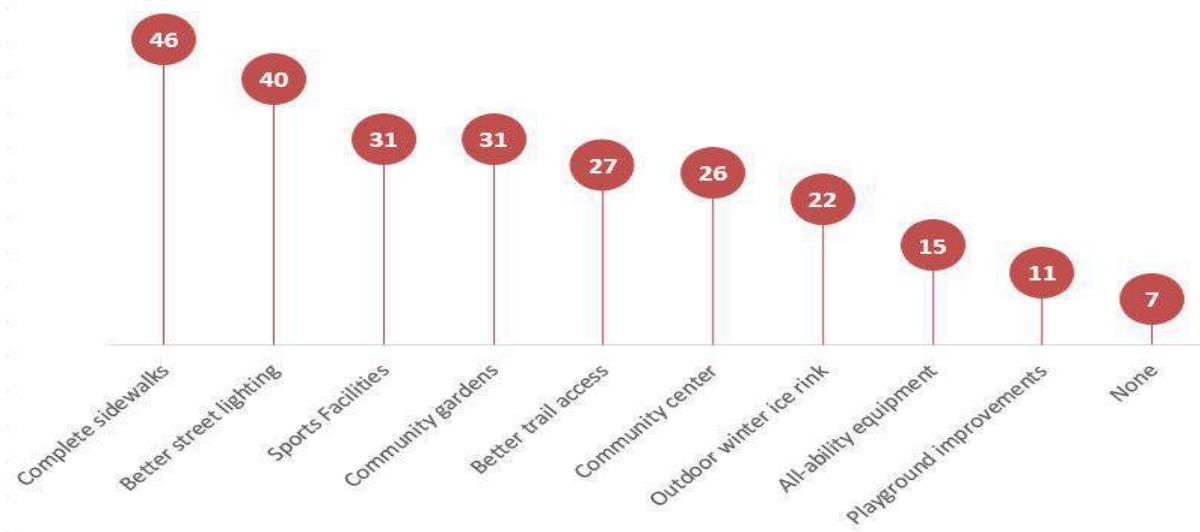
- 1) More traffic calming
- 2) None needed
- 3) Access to nearby services
- 4) Low perception of safety
- 5) Snow removal
- 6) Rail yard pollution

Survey respondents were asked to choose three (3) options for improvements to recreation facilities from the list of 15, neighborhood features that residents feel best support physical activity and mental health, and across the three neighborhoods three items rose to the top (ranked highest to lowest): complete sidewalks (46%), better street lighting (40%), and sports facilities (31%). 11% of respondents (n=71) skipped this question.

Chart 12

What 3 improvements to park and recreation facilities do you think would best support physical activity and mental health in your neighborhood?

Percent of all responses



Source: MIH Neighborhood Survey

The Franklin to the Fort neighborhood ranked needed improvements to recreation facilities (in order from highest to lowest):

- 1) Complete sidewalks
- 2) Community gardens, and
- 3) Community center

The Northside/Westside neighborhood ranked needed improvements to recreation facilities (in order from highest to lowest):

- 1) Complete sidewalks
- 2) Better street lighting, and
- 3) Better trail access

The River Road neighborhood ranked needed improvements to recreation facilities (in order from highest to lowest):

- 1) Complete sidewalks
- 2) Better street lighting, and
- 3) Sports fields

Neighborhood Businesses and Services

Survey respondents were asked to choose from the list of 17 businesses and services that residents feel are needed, and consistently across the three (3) neighborhoods, the top five (5) items were food related as discussed above (see: chart 4).

Almost 18% of respondents skipped this question (n=115).



Photo: Neiahborhood Walkabout

Neighborhood Walk-About/Focus Group Summary

Neighborhood Walkabouts/Focus groups were held for two reasons:

- As an opportunity for the Invest Health Team to see each neighborhood through the eyes of the residents and champions regarding what it is like to live, work, and play in their neighborhoods.
- To help the neighborhoods, champions and Invest Health Team work toward the goal of developing strategies to improve neighborhood health and well-being through transportations, parks, trails, housing and other possible means.

Team leader Lisa Beczkiewicz facilitated three walkabout sessions along with University of Montana Community Health Graduate students in the Franklin to Fort, Northside/Westside and River Road Neighborhoods. Recruitment for attendance was done by advertising the walkabouts through the Neighborhood Councils as well as personal contacts made through individuals designated as Neighborhood Champions. Invest Health team members recorded and compiled the notes of the sessions, which were used as data for this analysis section. Resident attendance varied by neighborhood: Franklin to the Fort N= 10, Northside Westside

N= 9, and River Road Neighborhood N= 7. Attendees of the walkabouts received a 15-minute introduction and then proceeded to walk around their neighborhood for 90 minutes, during which they answered questions and looked for examples of neighborhood features that related to the discussion questions. The questions asked were as follows:

1. What are the best things about your neighborhood?
2. In what areas does your neighborhood need improvement?
3. Are there any particular projects you are working on now, or would like to see happening your neighborhood?
4. Are there specific properties that you think could be put to better/different use?
5. What business or service do you need or wish you had more of in your neighborhood?
6. What social activities or community facilities would you like to have in your neighborhood?

In looking at the data from the focus groups in the walkabout sessions, the information was reviewed at two levels: once across all three neighborhoods and the second level for each individual neighborhood. The data was reviewed by question, and themes were developed under each question. The following summaries are using the framework of how the neighborhoods were similar and how the neighborhoods were different across all three neighborhoods. These summaries were created using the notes taken at the walkabout/focus groups.

What are the best things about your neighborhood?

Where the neighborhoods were similar:

All three neighborhoods noted having positive feelings about how people worked together for the good of the neighborhood. Services such as medical care, social services and food access were cited as positive. The trails and limited lighting that were present were noted and seen as positives.

Where the neighborhoods were different:

Franklin to Fort and River Road both talked about trail access and street calming but the Northside/Westside talked about cross walks

In what areas does your neighborhood need improvement?

Where the neighborhoods were similar:

All three neighborhoods noted needing:

- Better sidewalks
- Improved lighting
- More parks or pocket parks, as well as better up keep for current parks
- Better affordable housing that fit in with the neighborhood
- Traffic calming

Where the neighborhoods were different:

Franklin to Fort noted concern around zoning. This concern was around the potential for bad development and the desire for more commercial development to help provide a higher tax base for the neighborhood. Community engagement was mentioned as a concern. The potential

causes noted were a high rate of renters and the fact the neighborhood is broken up by 14th Street.

North/Westside neighborhood mentioned the increased need for police patrol and requested that the Railroad to stop idling their engines. (Note: this is the only neighborhood where the railroad park is a border.

Are there any projects you are working on now, or would like to see in your neighborhood?

Where the neighborhoods were similar:

All three neighborhoods mention interest in having way finding signs and connectivity to improve walkability through neighborhoods.

Where the neighborhoods were different:

North/Westside would like to see projects that advertise events in the neighborhood; Little Free Libraries and crosswalks

Franklin to Fort would like to see more commercial businesses, particularly small markets and coffee shops.

River Road would like to see trail lighting.

Are there specific properties that you think could be put to better/different use?

Where the neighborhoods were similar:

All three neighborhood residents on the walkabout were able to identify areas that could be utilized better such as improving natural areas and turning unused lots into public spaces.

Where the neighborhoods were different:

River Road identified more areas than the other neighborhoods and identified two specific parks for improvements.

What business or service do you need or wish you had more of in your neighborhood?

Where the neighborhoods were similar:

All three neighborhoods would like to have more or a coffee shop. Franklin to Fort and the Northside/Westside residents reported wanting healthcare facilities, including dentists, eye doctors and a pediatrician. While the Northside/Westside has access to Partnership Health Center and Blue Mountain Clinic, they report no dentist, eye doctor or pediatrician. There is a school-based health clinic.

Where the neighborhoods were different:

River Road would like an affordable grocery store and the Franklin to Fort Neighborhood would like a small neighborhood market, artisanal things and a hair-cutting salon.

What social activities or community facilities would you like to have in your neighborhood?

Where the neighborhoods were similar:

All three neighborhoods would like community center, recreation/exercise space that could benefit all ages and be accessible year round.

Where the neighborhoods were different:

Franklin to Fort would like Adult classes and skill sharing. Northside/Westside would like childcare, a dog park, spay & neuter clinic, redevelopment along river.



Photo: Neighborhood walkabout/housing mix

Discussion

Throughout this data collection process, the Missoula Invest Health team sought to enlist those who are most affected by their neighborhood environments, with the goal of working together to identify neighborhood issues or problems, and to improve the quality of life for the community as a whole. People who experience issues or barriers in their neighborhoods have a keen sense of not only the underlying causes of the issue, but also how to contribute to a solution.

Neighborhood-level research can serve many purposes; it can produce appropriate information to guide a community initiative, it can secure community buy-in and support for that initiative, and, perhaps most importantly, it can lead to long-term social change that improves the quality of life for everyone.

By involving the residents of these three neighborhoods, the study brings to light the best information available about what's happening on the ground at a single point in time. The approach to this study was one where the goal was to bring as many people who are disadvantaged economically, educationally, or in other ways to the table and create spaces for

meaningful participation. The study amplified some very real obstacles to including the most disadvantaged members of the community in the process, but also brought to light opportunities for improving future efforts to increase participation.

The neighborhood plans for two of the three neighborhoods have not been updated in years, and with the development of Missoula's Growth Policy (2015)⁴⁰ this research provides a snapshot of how the growth policy relates to the needs of these neighborhoods. Neighborhood plans can subsequently be updated in a way that integrates health considerations into neighborhood design with an eye toward shaping the way neighborhood residents live, learn, work, and play.

Missoula recently adopted a comprehensive [growth policy](#) that represents a shift in planning: from single-issue problem solving focused on auto-centric suburban development toward a multi-faceted approach of balancing growth elements with the services and qualities that make Missoula healthier and sustainable.

Community members that were engaged in the process of developing the growth policy envisioned Missoula's future to include a healthy environment, a high quality of life, and a community-oriented city by providing good housing, employment, and social services for all budget and lifestyle needs. Addressing the health and wellness of the community requires taking a look at how the community grows with an emphasis on how well the community grows.

A goal of the growth policy is to "encourage the close connection between development patterns, community infrastructure and the environment as well as the importance of a healthy environment to our sense of social, economic, and physical well-being." This can be accomplished in part through addressing healthy components directly related to the built environment and the demographics of the growing community through an emphasis on the need to improve community connectivity, accessibility and affordability.

Creating a culture of health requires doing a multitude of different things all at the same time. The Missoula community is fortunate to have many organizations, businesses, government entities and individuals working on various pieces of the health equity puzzle in Missoula. The Invest Health Team hopes that this report contributes to those efforts, and encourages even more resident engagement, collaboration, and coordination to create a culture of health in Missoula.

⁴⁰ Missoula Growth Policy (2015). The growth policy can be accessed here: <http://www.ci.missoula.mt.us/DocumentCenter/View/34746>

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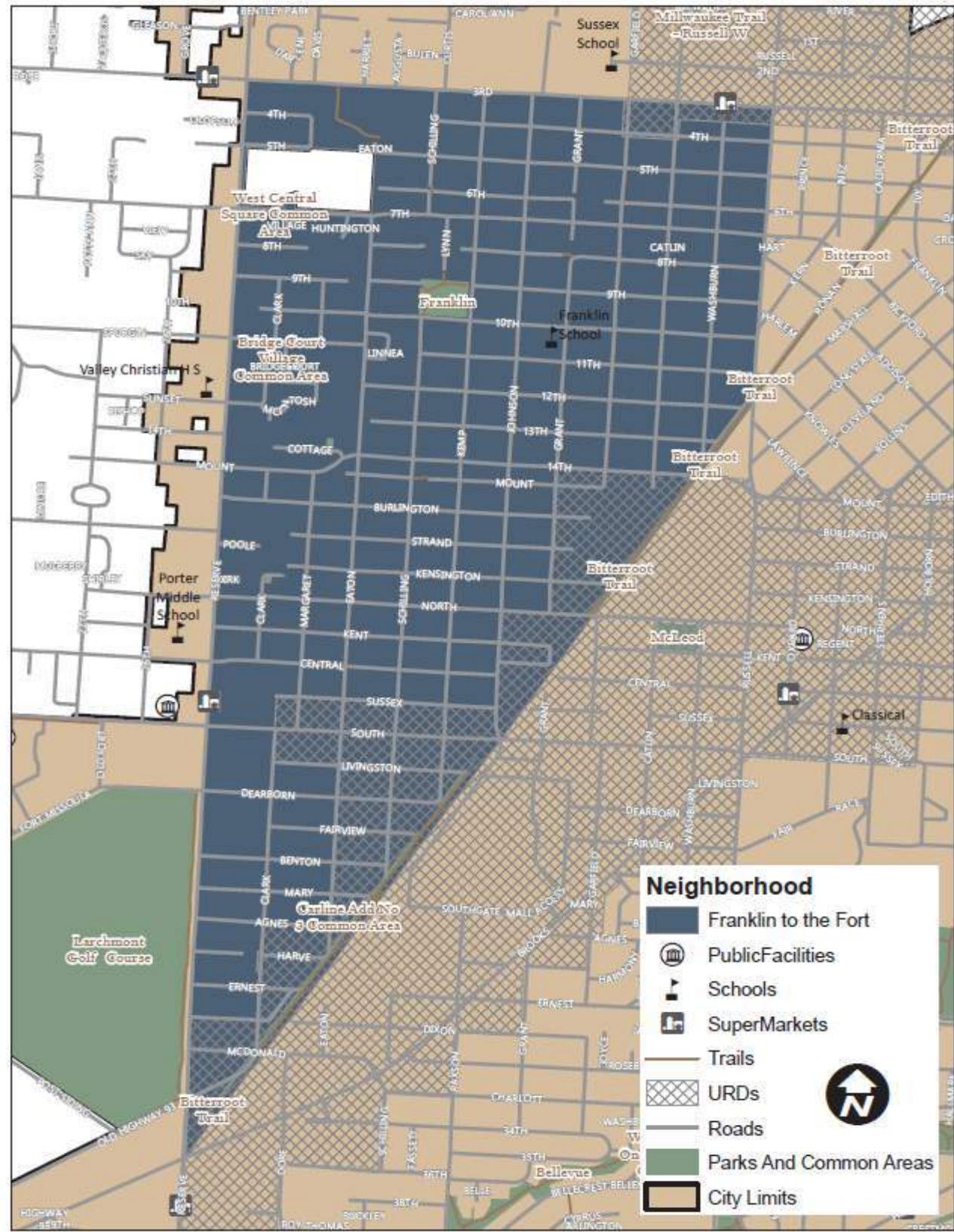
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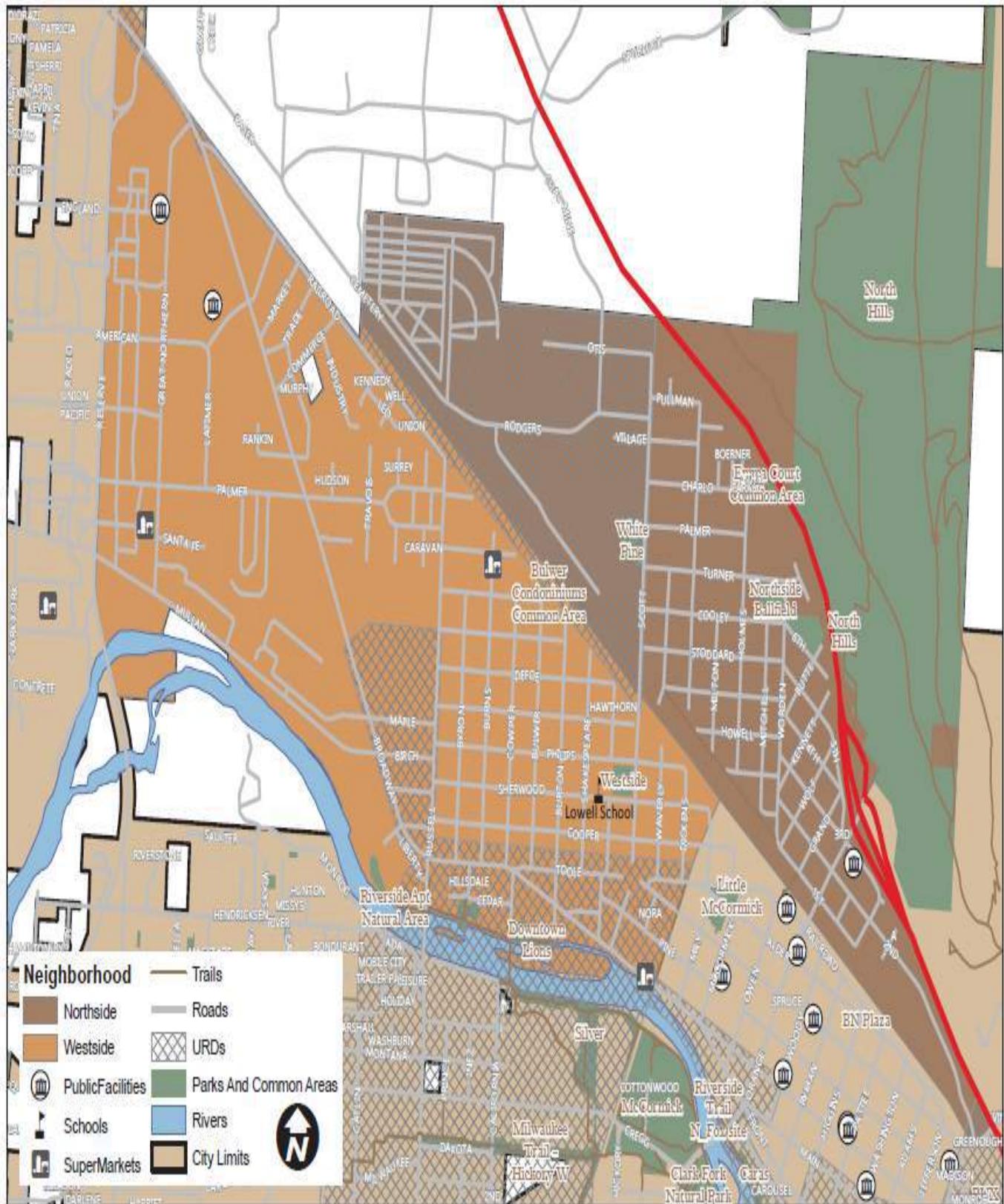
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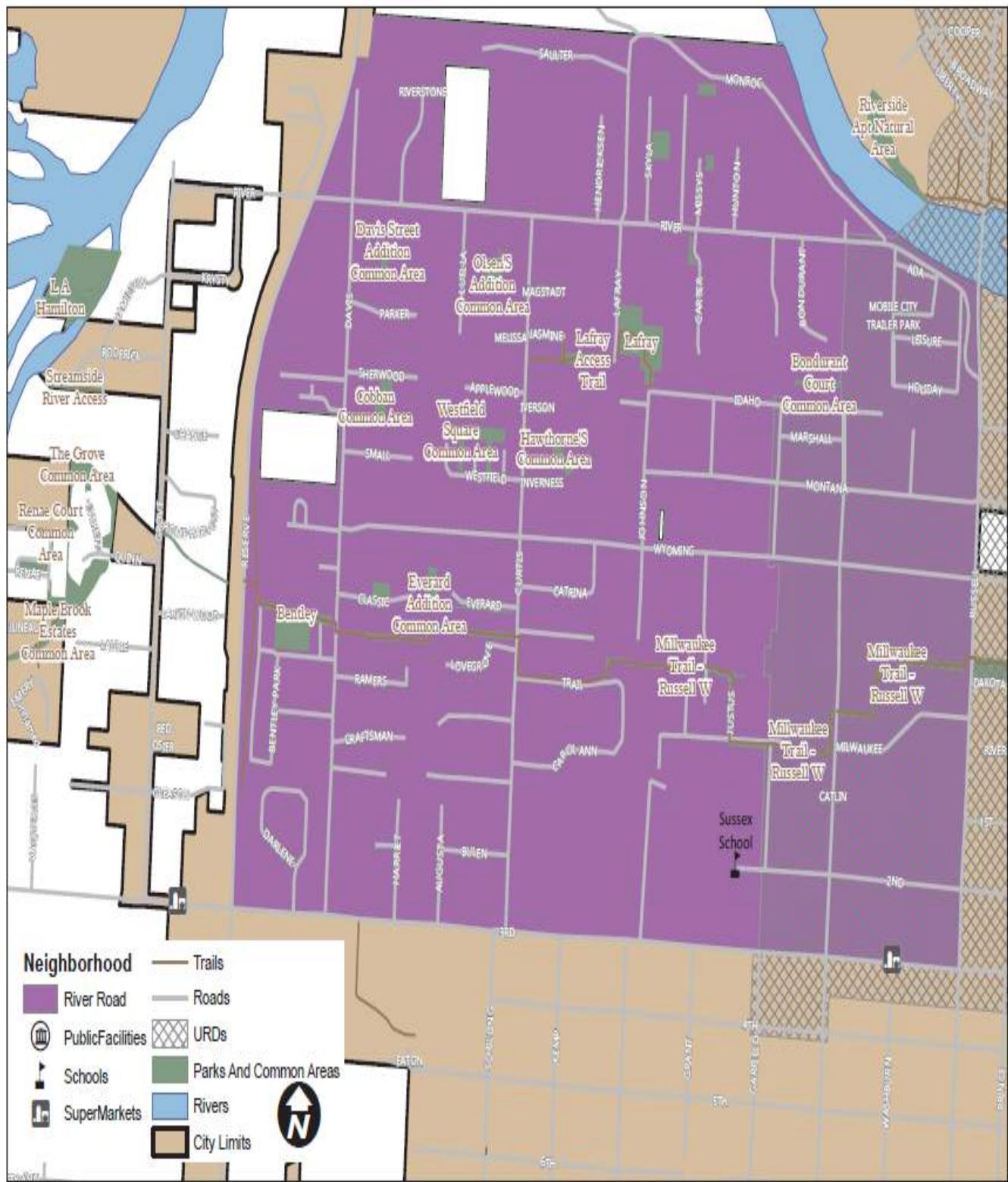
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Appendix

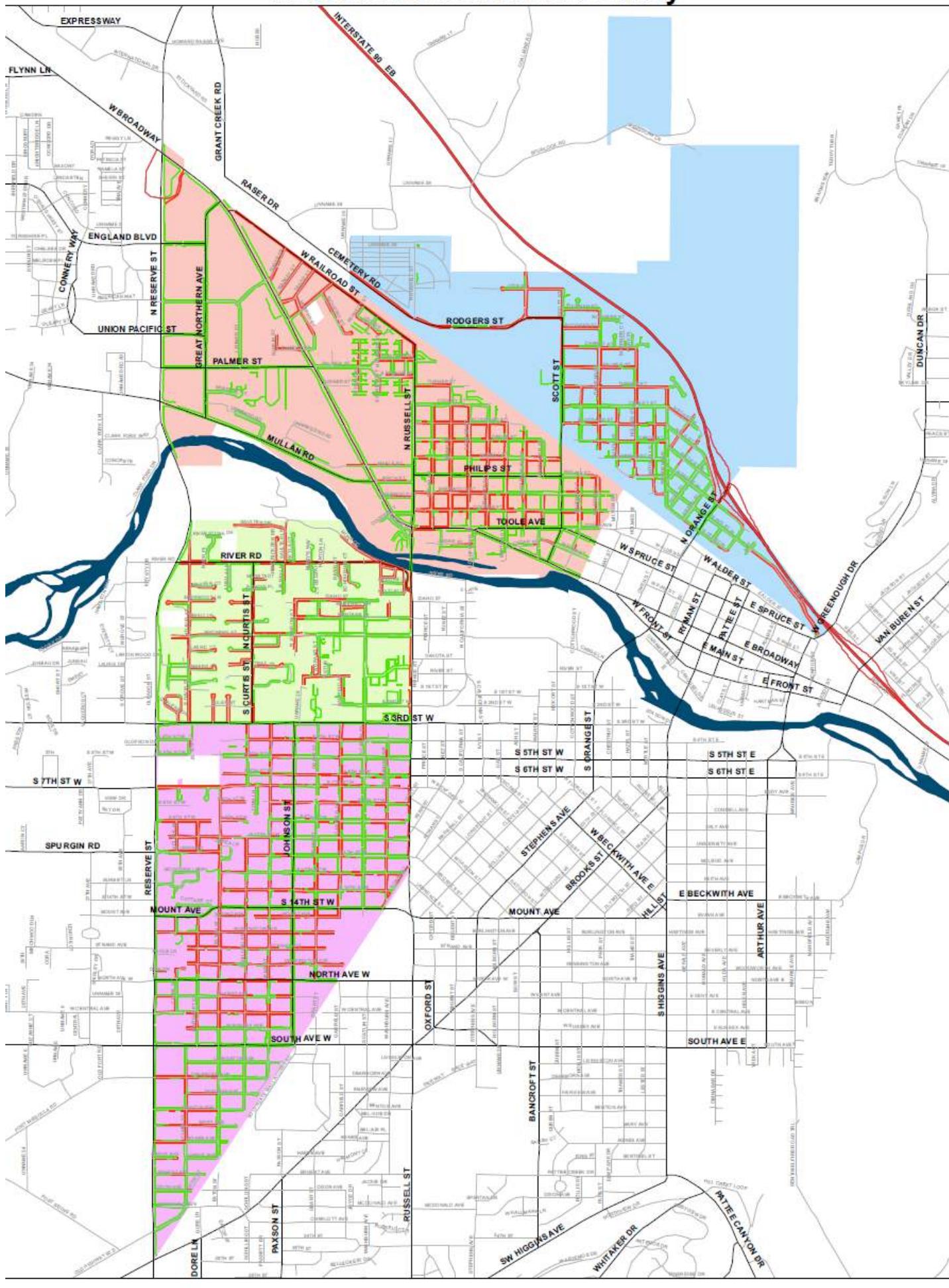
APPENDIX A



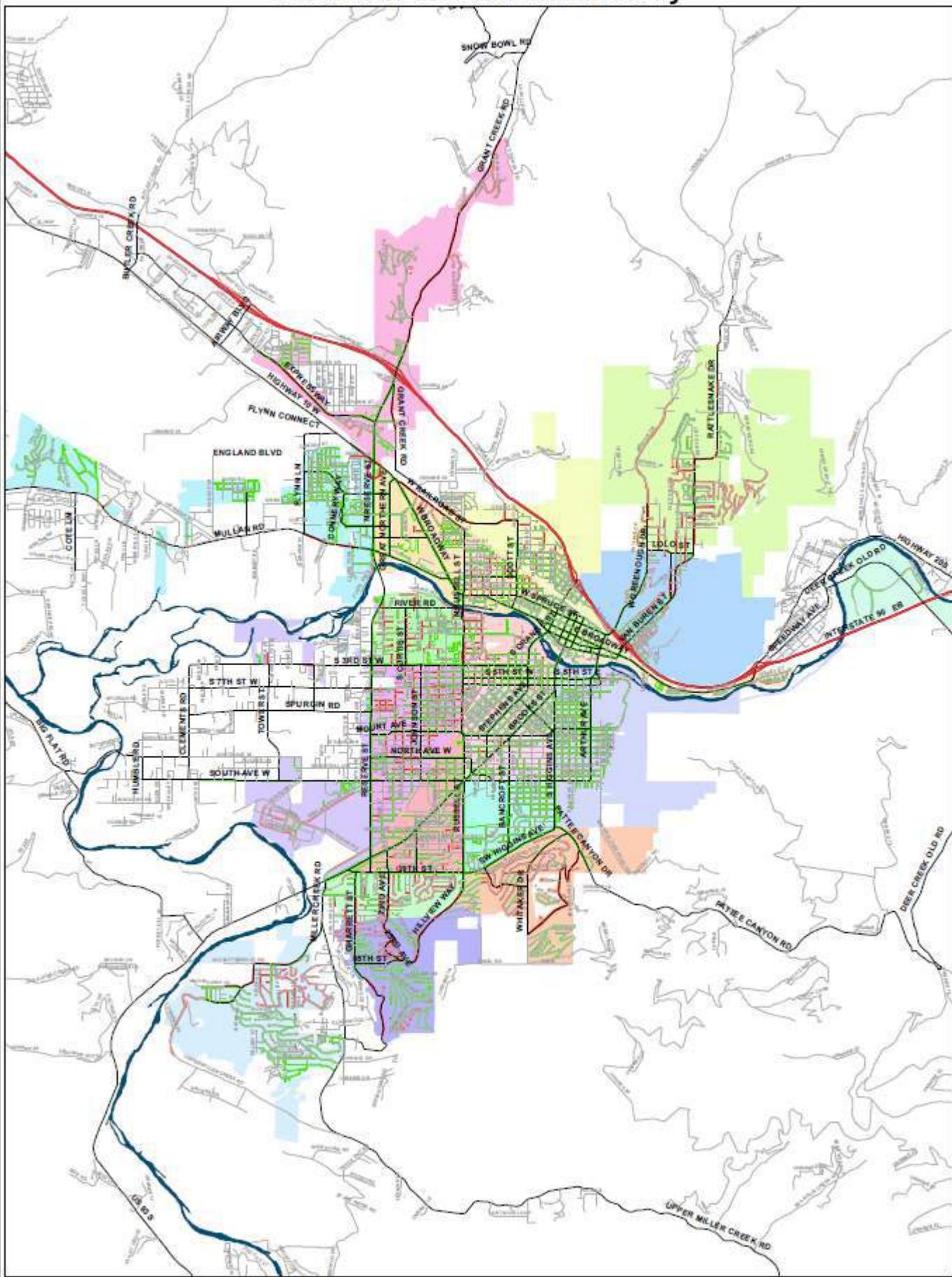




Missoula Sidewalk Inventory



Missoula Sidewalk Inventory



0 1.25 2.5 Miles



APPENDIX B

INVEST HEALTH

Strategies for Healthier Cities

A Project of the *Robert Wood Johnson Foundation*
and *Reinvestment Fund*

The Missoula Invest Health team is conducting a health survey to learn more about the health and quality of life in the Franklin to Fort, North/Westside and River Road neighborhoods. Responses are confidential and will be reported as totals, not as individual responses, we will use the results of this survey to help address the major health and community issues in the neighborhoods.

1. Which neighborhood do you live in?

- Franklin to Fort
- North/Westside
- River Road
- I don't know

These questions are about your personal health.

2. How would you describe your health

- Excellent
- Very Good
- Good
- Fair
- Poor

3. Does anyone in your household smoke or use tobacco

- Yes
- No

4. In the past 30 days, how many days did you enjoy good physical health?

- 0 - 7 days
- 8 - 15 days
- 16 - 23 days
- 24 - 30 days

5. In the past 30 days, how often did you exercise?

- 0 - 7 days
- 8 - 15 days
- 16 - 23 days
- 24 - 30 days

6. What stops you from getting more exercise? (Check all that apply.)

- Bad weather keeps me from exercising.
- I am not motivated to exercise.
- I am physically unable to exercise.
- I don't enjoy exercising.
- I don't have a place to exercise.
- I don't have time to exercise.
- I have no one to exercise with.
- It costs too much to exercise.
- Nothing; I am able to get the amount of exercise I want/need
- Other: _____

7. Do you eat 5 servings of fruits and vegetables a day?

- No
- Yes

8. How many sugar-sweetened drinks do you typically drink daily? (Including sweetened coffee, sports drinks, etc.)

- None
- 1 - 2
- 3 - 4
- 4 or more

9. Do you have a primary health care provider?

- No
- Yes

If you answered NO, where do you usually get your health care?

- Emergency room
- Telemedicine
- Urgent care
- Other: _____

10. In the last 12 months, how many times have you visited the emergency room?

- None
- 1 - 2 times
- 3 - 4 times
- 4 or more times

11. In the last 12 months, was there a time when you needed medical care but did not get it?

- No
- Yes

If you answered YES, why didn't you get medical care?

- I did not know where to go
- I did not have time to go
- I did not have transportation to get there
- The place was not open when I could get there
- My health insurance would not pay enough for it or cover it
- It costs too much
- There were no appointments available
- None of the above
- Other: _____

12. How long has it been since you last visited a dentist or dental clinic for any reason? Include visits to dental specialist, such as orthodontist.

- Within the past 12 months
- Within the past 2 years
- Within the past 5 years
- More than 5 years ago
- Don't know, not sure
- Never



13. In the past 30 days, how often were you worried, tense or anxious?

- 0 - 7 days
- 8 - 15 days
- 16 - 23 days
- 24 - 30 days

14. In the past 90 days have you felt (check all that apply)

- Depressed
- Emotionally fragile
- Isolated
- Stressed
- Suicidal
- None of the above

15. Which of the following best describes your health coverage?

- I pay for insurance that I got through the Affordable Care Act (also known as Health Insurance Marketplace, Health Insurance Exchange, Obamacare)
- I pay for insurance that I set up myself (not through the Affordable Care Act)
- Insured through employer
- Medicaid
- Medicare
- Uninsured
- Don't know

16. Over the past 12 months, how much have you thought about ways you can reduce your stress?

- A great deal
- A fair amount
- A little
- None

17. What do you do to reduce stress? (Choose all that you do.)

- Do things for other people
- Draw, paint, or play a musical instrument
- Drink
- Eat
- Exercise, run, or walk
- Meditate, pray, yoga, or other restful activity
- None of these
- Read or listen to music
- Religious or spiritual activity
- Smoke or use tobacco products
- Social activities - visit with friends, eat with friends, etc.
- Spend time on the computer
- Talk about my stress with a professional counselor or therapist
- Talk about my stress with friends and family
- Watch television
- Other: _____

These questions are about your home and neighborhood.

18. Do you own or rent your home?

- Own
- Rent

19. How would you describe your home in the winter?

- Too cold
- Comfortable
- Too warm

20. How would you describe your home in the summer?

- Too cold
- Comfortable
- Too warm

21. How long have you lived in your current home?

- Less than 1 year
- 1-5 years
- 6-10 years
- More than 11 years

22. What 3 features do you think support physical activity and mental health in your neighborhood? (Choose only 3.)

- Access to grocery and other shopping
- Affordable housing
- Close to downtown
- Diversity of people
- Good schools
- Jobs nearby
- Low crime rate
- Parks and playgrounds
- Rest room facilities
- All ability play equipment
- Public transportation
- Sense of community
- Street safety
- Other: _____

23. What 3 features does your neighborhood need to better support physical activity and mental health? (Choose only 3.)

- Access to grocery stores and other shopping
- Affordable housing
- Bike lanes or designated bike routes
- Crime rate
- Diversity of people
- Good schools
- Jobs nearby
- Lighting
- More sidewalks
- More traffic calming
- Parks, gardens, and open spaces
- Protection/preservation of historic houses and buildings
- Public transportation
- Sense of community
- Street safety
- Other: _____

24. What kinds of activities do you do with your neighbors?

- Go for walks, hikes, or bike rides
- Childcare
- Neighborhood cleanup
- Parties, meals, talking, etc.
- Plan neighborhood activities
- Yard work and home repair
- None of the above
- Other: _____

25. Do you grow some of your own food?

- Yes
- No

26. During the last 12 months, have you gone to a supermarket or grocery store within 5 blocks of your home?

- Yes
- No

27. Think about the businesses and services in your neighborhood. Which of them do you currently use? (Check all that apply.)

- Auto repair
- Gas station or convenience store
- Food Co-op
- Retail grocery
- Thrift store
- Other stores
- Health care
- Social services
- Childcare
- Bar or casino
- Coffee shop
- Restaurant
- Other: _____

28. Which of these types of businesses and services would you like to see in your neighborhood? (Check all that apply.)

- Auto repair
- Gas station or convenience store
- Food Co-op
- Retail grocery
- Small neighborhood grocery
- Garden shop
- Thrift store
- Video store
- Other stores
- Health care
- Social services
- Childcare
- Bar or casino
- Coffee shop
- Restaurant
- Healthy take-out meals
- Banking
- Motels
- Other: _____

29. What 3 social activities do you think would best support physical activity and mental health in your neighborhood? (Choose only 3)

- After-school programs
- Car loan or sharing programs
- Childcare co-op
- Community center with space for physical activity
- Dance, drama, or art programs
- Preschool programs
- Senior programs
- Teen programs
- Other: _____

30. During the last 12 months, how often did you use each of the following near where you live:

	Often	Sometimes	Rarely	Never	Not near me
Public transportation	<input type="checkbox"/>				
Sidewalks	<input type="checkbox"/>				
Bike lanes	<input type="checkbox"/>				
Recreational paths or trails	<input type="checkbox"/>				
Local streets and roads	<input type="checkbox"/>				

31. During the last 12 months, have you gone to a park, playground, or other green space?

- Yes
- No

If you answered **NO**, what is the major reason you did not go to a park, playground, or green space? (Choose only one.)

- There are no places like that near me
- I am not interested in going
- I have no way of getting there
- It is not safe there
- Other: _____

32. What 3 improvements to park and recreation facilities do you think would best support physical activity and mental health in your neighborhood? (Choose only 3.)

- Baseball fields
- Soccer fields
- Basketball courts
- Tennis courts
- Volleyball courts
- Better street lighting
- Better trail access
- Community center
- Community gardens
- Complete sidewalks
- Outdoor winter ice rink
- Playground improvements
- All-ability equipment
- None
- Other: _____

33. What form of transportation do you use the most? (Choose one.)

- Bicycle
- Bus
- Car
- Car pool
- Motorcycle or scooter
- Walking
- Other: _____

34. What factors make it difficult for you to bike, walk and bus?

Bike:

- It takes too long
- I feel unsafe biking
- I am always in a hurry
- I don't have a bike
- Unpaved streets make it difficult for me to bike
- Other: _____

Walk:

- It takes too long
- I have problems getting around
- I am always in a hurry
- There are no sidewalks
- Unpaved streets make it difficult for me to walk
- Other: _____

Bus:

- It takes too long
- Too far between bus stops
- Bus schedules don't work well for me
- I don't know the bus schedules
- I am always in a hurry
- Other: _____

35. My neighborhood is safe.

- Somewhat agree
- Agree
- Strongly agree
- Somewhat disagree
- Disagree
- Strongly disagree

These questions are about your household.

36. What is your marital status?

- Married
- Single
- Divorced
- Widowed

37. How many people live in your household? Count yourself.

- 1 - 3 people
- 4 - 6 people
- 7 - 9 people

38. What is your total gross annual household income?

- \$0 - 35,000
- \$35,001 - 45,000
- \$45,001 - 55,000
- \$55,001 - 65,000
- 65,001 - 75,000
- Above \$75,000

39. How do you define your gender?

- Female
- Male
- Transgender
- Other: _____
- Prefer not to answer

40. What is your race?

- American Indian/Alaskan Native
- Asian
- Black African American
- Caucasian/White
- Hispanic/Latino
- Mixed Race
- Native Hawaiian/Pacific Islander
- Prefer not to answer

41. Which of the following best describes your work? (Check only one.)

- Employed full time
- Employed part time
- Unemployed
- SSI Disabled
- Retired
- Stay-at-home caregiver/Parent
- Student
- Other: _____

42. How much schooling do you have?

- Some high school, no diploma
- High school diploma or GED
- Some College, no degree
- Trade, technical, or vocational training
- Associate's Degree
- Bachelor's Degree
- Master's Degree
- Doctorate Degree

Thank you for completing the survey!

Please return by Wednesday, December 21, 2016

Drawing for cash prizes will be held on Friday, January 6, 2017

FOLD THE SURVEY ON THE DASHED LINE, TAPE IT CLOSED, AND DROP IT IN A MAILBOX. NO POSTAGE NECESSARY

This survey is made possible thanks to the support of City of Missoula, Missoula City-County Health Department, NeighborWorks Montana, Providence St. Patrick Hospital, and United Way of Missoula County

RAFFLE TICKET

Write in your Name, Email and Phone Number and we will clip the ticket to enter you for a cash prize.

Each neighborhood will have three cash prize drawings: \$300, \$200, OR \$100

Your answers will remain anonymous.

Name:

Phone number:

Email:

APPENDIX C

Franklin to the Fort Neighborhood Walkabout

10/15/16

Focus Areas:

Parks and Open Spaces

Connectivity

Safety

Services

Note: The Walkabout focused on the northern portion of the Neighborhood

PARKS AND OPEN SPACE



Franklin Park

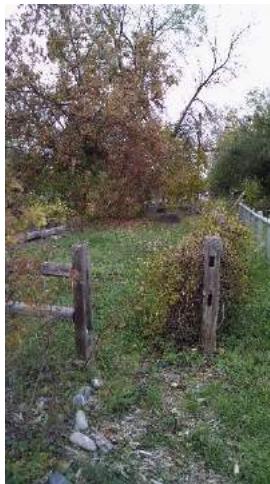
- Asset to the neighborhood
- Large, central location for the northern portion of the neighborhood
- Bridges near the park provide good connectivity to the neighborhood
- Great improvements made at the park but some equipment is also deteriorating
- There is likely a small portion of Franklin Park land that is on the other side of a ditch, separate from the park. Is there any benefit to attempting to reclaim it for public use? It is currently being used as storage for adjacent property owners (see bottom photo this page). Would need to confirm the details and the interests.



8th St. Pocket Park

- Small reclaimed property
- Portrays neighborhood pride
- Small park with a lot going on – education, activity (horse shoes)

The Neighborhood is park deficit – especially south of 14th Street





Ditch & Green Infrastructure

- Several ditches run through the neighborhood
- Unique characteristic of this neighborhood
- Can be lush in the summer and attracts wildlife
- Results in many disconnected streets.
- Creative use of bridges for non-motorized crossing
- Watch for safety concerns



CONNECTIVITY



Trail & Connectivity

- Non-motorized trail system helps to connect areas of the neighborhood
- Disconnected streets create extra travel patterns and are especially challenging when alternative routes and sidewalks are not available
- Since lots of uncontrolled intersections it can be difficult for pedestrians and bicyclists to cross busier streets



Bus Stop

- Good bus routes through the neighborhood, but
- Very limited curb, gutter and sidewalk on some routes
- No bus shelters

SAFETY



Roads

- Very few roads are considered complete streets with curb, gutter, sidewalk, street trees, bicycle lanes, etc.
- Eaton Street is a main road in the neighborhood with no sidewalks, curb or gutter



6th Street - Gravel Road

- Perhaps the last gravel road left in Missoula
- With improvements comes potential loss of perceived yard space
- Pavement is an important way to address air quality concerns
- No sidewalks or curb and gutter
- Some may enjoy the unpaved road
- Costs to pave would be on the property owners directly accessing road



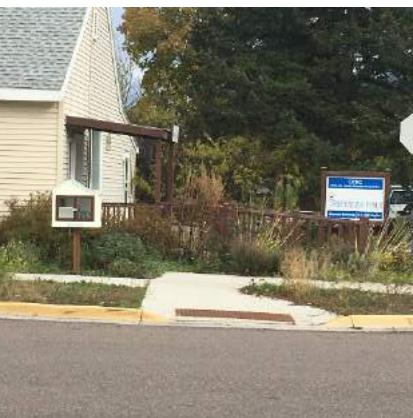
  	<p>Drainage and Curb & Gutter</p> <ul style="list-style-type: none"> • Drainage issues make this sidewalk impassable • Many other streets without curb and gutter – lead to greater disrepair of the pavement and issues with connectivity
	<p>Traffic Calming:</p> <ul style="list-style-type: none"> • Lots of uncontrolled intersections • Traffic is funneled to a few main roads through the neighborhood • Attempts to install traffic calming are very costly, and the burden would be on the adjacent property owners to cover the cost • Traffic calming requires adjacent curbs to be installed – an added expense • Potential increases in traffic through neighborhood with improvements to Russell Street



Sidewalks:

- Lack complete sidewalks through most of neighborhood
- Lack of safe routes to school because of lack of sidewalks
- Disjointed
- Deep curbs in some cases and no curbs in other cases
- Condition of existing sidewalks vary greatly
- Can travel from concrete to gravel to grass/asphalt or dirt

SERVICES & DEVELOPMENT



Community Services

- Churches
- Neighborhood services vastly spread apart in such a large neighborhood
- No current neighborhood commercial located within the neighborhood.
- Some services are placed at the neighborhood edges
- Some parcels with commercial zoning could support new interests in neighborhood commercial
- Previous commercial spaces could be reconsidered for neighborhood commercial
- Little Free Libraries in a few locations



Residential Character

- A mix of housing types
- Strong character of older houses with great landscaping surrounding them
- Infill development has been changing the character – in some cases beneficial and in other cases not
- Potential for additional resident displacement
- Additional redevelopment expected





Redevelopment

- Use of townhome exemption development could circumvent typical subdivision requirement to establish park space for developments over a certain size (although new zoning requirement works to address this)

Northside/Westside Neighborhood Walkabout
10/26/16

**North/West Side Neighborhood Neighborhood
Walkabout 10/26/16**

- Asset
- Nice park



- Asset
- School yard can be used by the public when school is not in session



- Lowell Health Clinic
- Not a lot of people know that anyone in the family of the child who goes to the school can use this clinic
- Good resource

	<p>Asset</p> <ul style="list-style-type: none"> - Dance Studio - Clay studio
	<p>“Safe” walk to school</p>
	<p>“Safe” walk to school</p> <ul style="list-style-type: none"> - No lights under the bridge - No graffiti is good 🎉

	<p>“Safe” walk to school</p>
	<p>“Safe” walk to school People living in the bus</p>
	<p>Asset - Nice bike path</p>

	<p>Asset - Nice bike path</p>
	<p>Positive comments about this space that has vegetation</p>
	<p>Nice apartment s, but expensive</p>



Nice
apartments, but
expensive

River Road Neighborhood Walkabout

10/15/16

Focus Areas:
Parks and Open Spaces
Safety
Way-finding

Parks and Open Spaces



Lafray Park

Lafray Park

- Asset to the neighborhood
- Trail connectivity is lacking
- Not well utilized – question was raised as to why this is
- Residents would like more playground equipment



Public area adjoining Lafray Park

Underutilized public area

- Paved and fenced on one side, but no clear purpose



Luella Ln.

Effective common area

- Actively maintained by homeowner's association
- Frequently used
- Available only to residents who are part of this homeowner's association



Sherwood Ln.

Underutilized common area

- Defunct homeowner's association owns common area
- No one is responsible for maintenance
- Area is neglected and largely unused.



Milwaukee Trail & private drive south of N. Grant St.

Effective pocket park

- Good provision of amenities (dog bags, garbage can, park bench, signage)
- Positive aesthetics (landscaping)



Milwaukee Trail between Curtis St. & Davis St.

Pocket park that could be further developed

- Currently has a bench and grass
- Trail lighting would improve safety at this corner

Safety



Milwaukee Trail adjacent Corso apartments

Lighting on a portion of the Milwaukee Trail

- Promotes safe navigation at night
- More is needed: lighting extends only a short way into the neighborhood (Russell St. to S. Garfield St.)



River Rd.

Sidewalk discontinuity

- Few through-streets exist in the neighborhood, thus traffic is concentrated on these streets and sidewalk connectivity is especially important on these streets: River Rd., Wyoming St., Curtis St., & Davis St.



N. Davis St.



N. Curtis St.¹

¹ Although some form of sidewalk exists past the point in the photo on N. Curtis St., it is constructed of asphalt, making it difficult to distinguish from the road



River Rd.

A section of road with adequate sidewalks; this is unfrequent in the neighborhood



Junction of S. Garfield St. & Trail St.

Trail route creates some safety concerns

- Current trail route in this location forces two road crossings
- Suggested improvement: move trail to the opposite side of Trail St.



Junction of Milwaukee Trail & Davis St.

Concern exists that excessive signage in this location distracts motorists from seeing pedestrians



Milwaukee Trail between Catlin St. & S. Garfield St.

Blind corner on Milwaukee Trail: Safety concern for trail users when bicyclists are travelling at speed



N. Johnson St. & N. Grant St.

Open/unfenced irrigation canals

- Potentially dangerous to trail users
- Good place for dogs to get a drink on walks
- Suggestion: railing directly along trail, while maintaining access for people with dogs



N. Johnson St.



Wyoming St. & Garfield St.



Trail St.

Traffic calming and trail placement are of limited effectiveness

- Motorists sometimes drive on this portion of the trail



Wyoming St., between N. Johnson St. and N. Garfield St.

Parked vehicles obstructing sidewalk

- Cause believed to be inadequate parking infrastructure for housing density



Wyoming St., between N. Johnson St. and N. Garfield St.

Street too narrow for two lanes of vehicular traffic to pass safely

Way-finding: Pedestrian and Bicyclist traffic



Milwaukee Trail between Trail St. & N. Johnson St.

Sidewalk-trail discontinuity

- Uncertainty exists as to why this portion of fence was erected across sidewalk-trail junction



N. Johnson St. & Idaho St.

Trail discontinuity

- If walkway through Lafray Park extended two blocks it would connect the park to the Milwaukee Trail



Junction of Milwaukee Trail & Catlin St.

Way-finding signs are effective in some areas



Justus Ln. & Trail St.¹



Justus Lane²



Justus Lane³



Milwaukee Trail & N. Johnson St.⁴



Milwaukee Trail & Catlin St. crosswalk⁵

Way-finding is difficult in several areas along the Milwaukee Trail: Improved signage is needed

^{1 & 2} Trail changes from a separate path to the street; clarification re: location of trail route is needed

³ Larger sign would improve visibility from a distance

⁴ Signage is needed pointing to Lafay Park (3 blocks north on N. Johnson St.)

⁵ Although the crosswalk is well marked, increased signage is needed for route clarity for trail users here