Grangeville, ID
HEAL MAPPSTM
Community Report

This report was generated by Kirstin Jensen, MA1, Kathee Tifft, MS1 and Tammy Winfield, MS2 under the direction of Deborah John, PhD2 and Kathy Gunter, PhD2 in partnership with Generating Rural Options for Weight Healthy Kids and Communities (GROW HKC) using data collected during the HEAL MAPPSTM processes and provided to the Grangeville Community to support the community’s initiative to prevent childhood obesity.

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Grangeville Community HEAL MAPPS™ Report

Grangeville is a rural city located in Idaho County, Idaho. Idaho County is the largest county, geographically, in the state of Idaho. The county shares a border with Oregon to the west and Montana to the east. It stretches close to one hundred miles in length from the northern border to the southern border located south of Riggins. According to the 2016 County Health Rankings, Idaho County is estimated to have a population of 16,215 residents. It is home to senior residents over age 65 (24%), adults in the 18-64 range (56%), and youth below age 18 (20%). The population is 91.5% Non-Hispanic white, 3.1% Hispanic, 3% American Indian and Alaskan Native, 4% Non-Hispanic African American, .5% Asian, and .1% Native Hawaiian/Other Pacific Islander.  

The closest urban city is Spokane, WA. (pop. 208,916) which is located 173 miles north of Grangeville.

Agriculture and timber are the two main industries in the county. The western half of the county is where the Camas Prairie is located. This area has rich soils that are ideally suited for the production of cereal crops and forages. Over 80 percent of the county is federal or state owned lands. Beef cattle production is the number one agricultural commodity produced in the county in terms of gross revenues generated. This is closely followed by wheat and barley. According to the Koppen climate classification system, Grangeville has a humid continental climate with an average high of 57.8 degrees, and an average low of 35.4 degrees.  

In 2014, the median household income was $39,598. The per capita income for the county was $31,842. In 2014, 16.3% of Idaho residents were below the poverty threshold, including 23.3% of those under the age of 18 and 9.9% of those 65 and older.

There is one school district in Grangeville (Mountain View School District), which has one public high school (Grangeville High School – grades 9-12), and one public primary/middle school (Grangeville Elementary/Middle School – grades K – 8). There is also one private Catholic school that runs K-8. 89.8% of Idaho County residents are high school graduates, 32.9% have had some college and/or have an associate’s degree, and 16.8% have a bachelor’s degree or higher.

Grangeville has two grocery stores (Askers Harvest Foods, Cash & Carry), four convenience stores/gas stations, and ten food service establishments.

Grangeville enjoys close access to scenic and wildlife areas. Whitewater rafting is a popular pursuit and the Clearwater River, Snake River, and Salmon River lie close by. Salmon and steelhead fishing is often a choice of recreation. Many residents of Grangeville hunt deer, elk,

1 http://www.countyhealthrankings.org/app/idaho/2016/rankings/idaho/county/outcomes/overall/snapshot
2 https://en.wikipedia.org/wiki/Grangeville,_Idaho
3 https://en.wikipedia.org/wiki/Grangeville,_Idaho
4 http://indicatorsidaho.org/
and turkeys in the nearby forests. Hiking is also popular in the Nez Perce National Forest, the Gospel Hump Wilderness, and Hells Canyon to the south of the city. The city operates the nearby Snowhaven ski area for winter recreation.

Many residents of Grangeville depend on the nearby forests for their livelihoods. In addition to timber harvesting, the U.S. Forest Service is a major source of employment in the region.

Grangeville's "Border Days" is a large public celebration on the weekend of July 4 (Independence Day), which features the state's oldest rodeo as well as parades, art shows, and the world's largest egg toss.

**Generating Rural Options for Weight Healthy Kids and Communities (GROW HKC)** is a USDA-funded, childhood obesity prevention integrated research, education and Extension study conducted by Oregon State University’s Extension researchers in partnership with rural residents and communities. GROW HKC and the Grangeville community have partnered in participatory research to map assets and features of the local context and discuss residents’ perceptions of the community supports and barriers to regularly eating healthy and being physically active, particularly for children and families. Community members were mobilized and trained to use HEAL MAPPS™ (Healthy Eating Active Living: Mapping Attributes using Participatory Photographic Surveys), our community resource and readiness tool, to assess community resources and readiness to improve and implement healthy eating and physical activity supports—environmental and policy actions that make easier these obesity preventing behaviors.

HEAL MAPPS™ projects conducted in partnership with rural communities across several Western States (ID, CO, NM, NV, OR, WA) will provide evidence and insights that will drive the development of a rural obesity prevention model. The model will be used as a framework for community actions aimed to support healthy eating and physical activity behaviors, policies, systems, and environments that prevent overweight and obesity among rural youth and families.

The problem of obesity in children is in the forefront of nationwide research efforts and there are documented physical and mental health outcomes associated with childhood obesity that contribute to lifelong chronic health problems which may disproportionately affect people living in rural places. Rural residency tends to increase the risk of overweight and obesity for children and adults; the prevalence of childhood overweight and obesity is higher among children living in rural areas.
To date, most evidence-based strategies to combat the childhood obesity epidemic have been developed and tested in non-rural settings and target either individuals or environments. The overall goal of the GROs Healthy Kids and Communities (HKC) project is to learn more about the factors influencing health behaviors in rural places in order to prevent obesity in rural children by improving their behavioral environments – at home, in school, and in the community – to make healthy eating and activity options their easy and preferred choice.

Relevance for Grangeville Community

Information obtained from the National Health and Nutrition Examination Survey (NHANES) showed an estimated 2/3 (68%) of American adults are overweight (Body Mass Index [BMI] ≥ 25) or obese (BMI ≥ 30), and an estimated 23 million children are either overweight or obese. An estimated 16.9% of U.S. children and adolescents age 2-19 years are obese, and another 14.9% are overweight.

The prevalence of overweight adults in Idaho has increased significantly in the past decade, from 55.7% in 2000, to 62.3% in 2011. About one-in-four (27%) adults in Idaho are listed as obese. According to the National Center for Chronic Disease Prevention (CDC) 57.2% of adults in Idaho participate in 150 plus minutes of aerobic physical activity per week. The 2011 Idaho BRFSS reported that 21.4% of Idaho adults indicated that they did not participate in any physical activity.

In 2012, Idaho County Poverty levels were 19.2%. Grangeville has a slightly higher rate at 20.7%. The county unemployment rate was 8.3% in 2013, which is slightly higher than the state rate of 3.8%. Idaho County food stamp participation rates are 7.41%, with 50.6% participating in free/reduced school meals in 2014.

Helping children develop healthy habits and providing healthy eating and activity supports to balance their energy intake with energy expenditure is an important aspect to maintaining healthy weight, preventing overweight and obesity, and minimizing chronic disease risk. Because obesity prevention among rural populations requires an understanding of the supports and barriers to healthy eating and active living within and among rural communities, we are pleased to provide this report of resources and readiness to prevent childhood obesity for the community of Grangeville.

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9 [http://www.census.gov/quickfacts/table/PST045215/16049,00](http://www.census.gov/quickfacts/table/PST045215/16049,00)
Methods and Preliminary Results

A HEAL MAPPS™ team (n=9) comprised of Grangeville community members with an interest in creating a healthier community volunteered and were trained to individually photograph and map the Grangeville community features that they perceived as either supports or barriers to eating healthy and being physically active most every day. Collectively, over 130 photographs were taken and mapped along 9 routes that represented the community’s active (i.e. walking, bicycling, skateboarding, etc.) and motor vehicle transportation system. The ‘mappers’ covered 61 linear road miles -- approximately 60% of the land area included within the square miles of the city of Grangeville and included features in the surrounding unincorporated areas (see Figure 2). The HEAL MAPPS™ team reconvened to discuss the photographs and maps during a focus group meeting. The most relevant 79 photographs, based on group consensus, were included in a presentation to provoke a larger community conversation. Over 20 Grangeville residents and stakeholders attended and participated in a community dinner and discussion held at the Soltman Center on July 7th, 2016. The community conversation was facilitated by a member of the GROW HKC team trained to conduct HEAL MAPPS™ processes. Following the community dinner, photographs were displayed, participants were polled as to whether the feature made eating healthy or being physically active easier or harder for themselves or others in the community, and discussed their thoughts and feelings that led to their ratings.

Community Readiness

Communities differ in many ways including their readiness to take action on an issue and implement relevant programs. The level of community readiness is a major factor in determining whether a particular program can be effectively implemented and supported by a community. Assessing the level of readiness for obesity prevention efforts is thereby a critical component of obesity prevention program planning and evaluation.

The Community Readiness Model (CRM) is an assessment tool we used to gain an understanding of the community’s readiness and capacity for changing the rural obesogenic environment. The model includes six dimensions that are known to influence a community’s readiness to take action on a community health issue. The six dimensions are: community knowledge about the issue, current community efforts, community knowledge of the efforts, local leadership, community climate, and local resources related to the issue. Open-ended questions representing each dimension were posed during the Grangeville Community Conversation, and prompted by the questions, engaged audiences shared their perception of Grangeville’s resources, readiness and capacity for change. Transcriptions of the conversation

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13 The ‘mappers’ individually determined the community boundaries as within the city and unincorporated land approximately served by the Grangeville school district.
14 For more information about the Community Readiness Model, stages of community readiness, and stage-based strategies to increase community readiness to address health issues visit: http://www.colostate.edu/Dept/TEC/article3.htm.
were coded into categories of food and physical activity, as well as the six dimensions. The indicators coded into each dimension were scored using the CRM scale by two independent evaluators. Scores from all dimensions were averaged to calculate the overall stage of readiness score.

**Findings**

Grangeville has a number of existing environmental supports related to **healthy eating**, including locally grown food, a seasonal farmer’s market, a number of local business that sell fresh fruits and vegetables, healthy eating education, and restaurants offering healthy options. Grangeville’s seasonal farmer’s market is well attended by the community and is one of the few in the area to accept food stamps. Cash and Carry, Askers Harvest foods, and a health food store all offer fresh fruits, vegetables, or other healthy eating options. In fact, local businesses and organizations are even engaged in inspiring youth to eat healthy. For example, Cash and Carry grocery, in conjunction with St. Mary’s hospital, created grocery displays geared toward children 12 and under that promoted fresh fruit for snacking. There are also a couple of youth clubs that promote healthy eating and active living in Grangeville: The Grub Club and The Kids Club. The Grub Club, which promotes healthy eating and active living for kids ages 5-12, offers food education including teaching about plants and where food comes, and how best to shop for healthy foods. There are also a number of food assistance programs in the area: the senior center offers a “Meals on Wheels” program, and a scratch made lunch at the senior center, there is the “Eat Smart Idaho” program that provides cooking classes for low income parents and there is also a backpack lunch program for youth during the summer months. Finally, a number of food businesses have started to offer vegetarian food options and calorie and nutritional information on their menus, increasing healthy eating options and empowering the community to make informed decisions.

Grangeville also has a number of **physical activity** supports that are mainly low or no cost resources. Resources available include organized sports leagues, sports fields and courts, access to school district resources, local public parks and playgrounds. The community has access to multiple playgrounds (including those on school property) within city limits and a number of multi-resource parks. Both City and Lion’s park were cited a number of times as superior resources in the community — offering a number of recreation resources/opportunities that include: a swimming pool, skate park, disc golf, basketball courts, horse shoe pits, picnic tables, and playgrounds. The school district allows community access to not only the playgrounds, but also resources like the track and gym. There are also a number of natural areas that offer hiking and fishing opportunities as well as skiing. The Ski Idaho program offers free day passes to youth that can be used at Snowhaven, Grangeville’s area ski resort. Grangeville also has a number of fee based resources, like two gyms, a bowling alley, and a golf course.

Even with the supports for physical activity and healthy eating that were cited by community members, barriers still emerged to being physically active and eating healthy on a daily basis. Most of these barriers were closely related to the overall rural nature of the community: the community is rich in natural resources, with a variety of natural lands, lakes and rivers, unfortunately, many of these lie well outside of the city limits and therefor may be difficult to
access for those without a vehicle. Conversely, services that lie within Grangeville city limits may not be available to the extended community who live farther away. There is a general lack of bike lanes, crosswalks, and sidewalks in the community. Even though the community has two exercise gyms, the cost to join these may be prohibitive for some. Community members have voiced the need for a community recreation center, which would be a low or no fee option for indoor recreation.

The overall community readiness score reflects both the community supports and barriers to healthy dietary and physically active lifestyle patterns across all six dimensions. Grangeville’s current stage of readiness to implement environmental and policy strategies to prevent obesity (3.60) falls between the Vague Awareness and Pre-planning stages as indicated by the arrow on the Stages of Readiness graph (Figure 1).

Figure 1. Stages of Community Readiness

<table>
<thead>
<tr>
<th>No Awareness</th>
<th>Denial</th>
<th>Vague Awareness</th>
<th>Pre-planning</th>
<th>Preparation</th>
<th>Initiation</th>
<th>Stabilization</th>
<th>Expansion</th>
<th>Professionalization</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
</tbody>
</table>

Grangeville’s readiness scores ranged from a low of 3.4 for the Resources Related to the Issue dimension, to a high of 4 for the Community Climate dimension (Figure 2). Grangeville is approaching the Pre-planning stage, which indicates that many community members have at least heard about local efforts. Leadership and community members are acknowledging childhood obesity as an issue in the community and have begun the discussion around this issue and are supportive of continuing and improving current efforts, but may still be limited in their knowledge of best-practice solutions to address the issue (e.g. causes, symptoms, etc.). Some resource needs have been identified and some resources acquired that will increase weight healthy lifestyle behaviors and will help prevent increased prevalence of overweight and obesity among youth and their families; resource gaps still exist in some areas.
Figure 2. Readiness scores for all six dimensions of readiness

**Recommended Strategies and Next Steps**

Continue to raise awareness of the problem, and community-driven solutions to publicize that collectively the community can reduce environmental factors related to obesity risk and positively impact rural weight health. Based on stage-match strategies suggested by the Community Readiness Model, local efforts should include:

1. Educational outreach programs that include prevalence rates of rural overweight and obesity for youth and adults, and correlates or causes of unhealthy diets and physical inactivity among diverse children and families living in rural areas.

2. Educational outreach programs that introduce the concept of obesity prevention as a community solution, developing a community culture of rural weight health, and illustrate specific prevention programs aimed at improving access to and consumption of healthful dietary choices and increasing access to and patterns of physical activity by other rural communities with similar profiles.

3. Local media campaigns emphasizing that actions and impacts to address childhood obesity are happening at every level, collectively and cohesively in the Grangeville community, and the consequences of an obesogenic community context and culture are being addressed through community-driven changes. Local events, like a community picnic or fun-run to launch new actions and kick start networking efforts.

For example, community coalitions can present information at local events and to groups unrelated to health efforts; launch and maintain a social media site – initiate meetups and post events, informational flyers, and networks. Present information, blog on the issue, publish print
and e-media articles and editorials that highlights the general problem and successful local solutions.

4. Use local data, based on resident input and barrier identification, to drive decisions and make suggestions on where and how environmental, behavioral, and educational efforts should be focused and evaluated.

5. Continue to gather information, and add to local data about childhood obesity risks, prevalence, and modifiable risk factors at every level: behavior, social supports and cultural norms, community, school, and family food systems and contexts, and available and easily accessible to all every day supports for physical activity in order to collectively plan and implement effective strategies that reach broadly across the community population and deeply into underserved groups.

6. Plan for sustainability, including how to secure resources for and evaluate the successes of your efforts. For example, partner with public health agencies and public value organizations to maintain height-weight (healthy growth) surveillance among K-12 students; participate in or host public forums to develop strategies from the grassroots level; utilize key leaders and influential people to speak to groups and participate in local radio and television. Get local leaders to champion the issue; engage across sectors and with all community groups, including demographics, to develop effective strategies that are shown to reach all segments of the community.

**Strengthen and communicate Grangeville’s culture of, context for, and commitment to weight health – “Grangeville Plans to GROW Healthy Kids!”**

**Results Summary: Themes and Indicators Emerging from Grangeville Community Conversation (2015)**

Themes relating to Active Living and Healthy Eating that emerged from HEAL MAPPS™, were related to the Community Context (the setting or circumstances of a community, e.g. physical features), Community Capacity (the ability or power to do, experience, or understand something), Community Engagement – Climate and Culture, and Efforts or Resources related to the Issues (Tables 1 & 2).

Active living supportive elements that emerged included: Leadership from the Schools and local groups (e.g. Elks club, PICH, and Snow Idaho), who are working not only to increase supports but also engaged in making those efforts sustainable by procuring further funding; Grangeville has a number of low or no cost physical activity resources like public parks and playgrounds, a community pool, trails, and a skate park to name a few (Table 1).

Healthy Eating supportive elements included: access to local food sources via the farmer’s market and local grocers; food assistance, including summer lunch programs, meals on wheels for seniors and food banks; education opportunities are offered to low income families by the
Eat Smart Idaho program; finally, community grocers and restaurants offer healthy and/or vegetarian options as well as nutrition/calorie information on their menus (Table 1).

The local hospital (Syringa) also emerged as a support for healthy lifestyles by offering a yearly wellness fair and a guided heart health walk (Table 1).

Elements that are obstructive to active living emerged as a lack of maintenance or investment in resources, especially as it concerns the unevenness, or lack, of some sidewalks—there is a lack of active transportation or walkability supports in some areas, especially for the most rural areas of Grangeville (Table 2). “Active Transportation and Walkability” emerged as both supportive and obstructive (Tables 1 & 2) to living an active lifestyle. While Grangeville does have some bike racks and sidewalks, the community conversation participants voiced need for more supports multiple times throughout the process. Access to resources emerged as an issue for those who lack transportation and live in the more rural areas of Grangeville. The lack of available and affordable indoor physical activity resources also emerged as obstructive to living a healthy lifestyle, as did the overall lack of information available to the community about what efforts, programs, and resources are available. Finally, “Leadership” also emerged as supportive and obstructive to living an active lifestyle; community members feel that the mayor and city council are not necessarily receptive to the community needs for more resources, and in fact are more concerned with liability issues that may arise from the addition of resources (Table 2).

Obstructive elements that emerged for healthy eating included a lack of healthy food options, spatial access to resources, and knowledge barriers. Healthy food options emerged as both supportive and obstructive to living a healthy lifestyle. While Grangeville has healthy food resources, some may not have access due to socioeconomic or spatial barriers or may lack the ability or knowledge base to cook with whole foods; there is also a lack of easy or “grab and go” style healthy food options; finally, food assistance programs may not always have the healthiest options (Table 2).
Table 1. Themes and Indicators of Resources supportive of weight healthy lifestyles emerging from the Grangeville Community Conversation. *Items in Red emerged as both supportive and obstructive.*

<table>
<thead>
<tr>
<th>Resource</th>
<th>Theme</th>
<th>Resource</th>
<th>Theme</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Active Transportation and Walkability</strong></td>
<td>Some sidewalks and bike racks</td>
<td><strong>Leadership</strong></td>
<td>Farmer's Market, Food bank, Eat Smart Idaho, Elks, Senior center and others are engaged in education, increasing resources and access through active participation, outreach and grant funding</td>
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<tr>
<td></td>
<td><em>Leadership</em></td>
<td></td>
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<tr>
<td></td>
<td>PICH, School district, Snow Idaho, Syringa Hospital (Heart Walk and Wellness Fair)</td>
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<td></td>
<td><strong>Community Based Activities</strong></td>
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<td></td>
<td>Youth Baseball</td>
<td></td>
<td></td>
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<tr>
<td><strong>Fee-Based Resources</strong></td>
<td>Gym, Golf Course, Ski resort</td>
<td><strong>Education</strong></td>
<td>Eat Smart Idaho cooking classes</td>
</tr>
<tr>
<td></td>
<td><em>Low or No Cost Resources</em></td>
<td></td>
<td>Healthy Food options</td>
</tr>
<tr>
<td></td>
<td>Public Parks, playgrounds and Spaces (Pool, Skate park, Trails), Youth Groups (Grub Club), Access to school facilities (Track and Gym), Community and School Sports (Baseball, Basketball), Natural Areas (Hiking, fishing). Free activities for youth sponsored by PICH</td>
<td></td>
<td>At restaurants and Grocery Stores.</td>
</tr>
<tr>
<td></td>
<td><strong>General Health Supports</strong></td>
<td></td>
<td>Local Food</td>
</tr>
<tr>
<td></td>
<td>Wellness Fair</td>
<td></td>
<td>Farmer's market, Locally grown foods carried at stores</td>
</tr>
<tr>
<td></td>
<td><strong>Wellness Fair</strong></td>
<td></td>
<td>General Health Supports</td>
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<td></td>
<td></td>
<td></td>
<td>Wellness Fair</td>
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<td></td>
<td></td>
<td></td>
<td>Food Assistance</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Back Pack program, Senior center, farmer's market accepts SNAP (double benefits), Food Bank</td>
</tr>
<tr>
<td><strong>Community Capacity</strong></td>
<td></td>
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<td></td>
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</tbody>
</table>
**Table 2.** Themes and Indicators of Resources Obstructive to weight healthy lifestyles emerging from the Grangeville Community Conversation. Items in Red emerged as both Supportive and Obstructive.

<table>
<thead>
<tr>
<th>Resource Theme</th>
<th>Active Living</th>
<th>Community Engagement - Culture and Climate</th>
<th>Healthy Eating</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Knowledge of Resources/Efforts</strong></td>
<td>Community members may not know what resources are available because access to information is lacking.</td>
<td><strong>Knowledge of the Issue</strong></td>
<td>Community members may not know what resources are available because access to information is lacking.</td>
</tr>
<tr>
<td><strong>Knowledge of the issue</strong></td>
<td>Lack of understanding of the connection between access to physical activity and health</td>
<td><strong>Knowledge of the Issue</strong></td>
<td>Lack of understanding of the connection between access to healthy foods and health</td>
</tr>
<tr>
<td><strong>Maintenance or Investment In Resources</strong></td>
<td>Sidewalks need improvement, uneven and difficult for some community members to use (e.g. seniors)</td>
<td><strong>Safety and Civility</strong></td>
<td>Perception of danger in some areas due to loose animals, Bike theft issues</td>
</tr>
<tr>
<td><strong>Safety and Civility</strong></td>
<td></td>
<td><strong>Active Transportation and Walkability</strong></td>
<td>Lack of bike racks, bike lanes, crosswalks, sidewalks, and traffic calming features in some areas. More rural and senior community members without transportation lack access</td>
</tr>
<tr>
<td><strong>Active Transportation and Walkability</strong></td>
<td></td>
<td><strong>Community Capacity</strong></td>
<td>More rural and senior community members without transportation lack access</td>
</tr>
<tr>
<td><strong>Information Access</strong></td>
<td>Overall lack of information on efforts, resources and programs</td>
<td><strong>Leadership</strong></td>
<td>Not engaged or don't believe resources, programs, efforts are needed in the community, Liability issues with resources are a concern</td>
</tr>
<tr>
<td><strong>Leadership</strong></td>
<td></td>
<td><strong>Weather</strong></td>
<td>Winter weather an impediment to PA</td>
</tr>
<tr>
<td><strong>Weather</strong></td>
<td></td>
<td><strong>Socioeconomic Disparities and Costs</strong></td>
<td>Some don't have skills to cook with whole foods. Access limited to most rural low income community members. Choices offered to neediest not always the healthiest.</td>
</tr>
<tr>
<td><strong>Socioeconomic Disparities and Costs</strong></td>
<td></td>
<td><strong>Spatial Access</strong></td>
<td>Overall lack of spatially proximate resources in more rural areas.</td>
</tr>
<tr>
<td><strong>Spatial Access</strong></td>
<td></td>
<td></td>
<td>Overall lack of information on efforts, resources and programs</td>
</tr>
<tr>
<td><strong>Information Access</strong></td>
<td></td>
<td></td>
<td><strong>Socioeconomic Disparities and Costs</strong></td>
</tr>
<tr>
<td><strong>Low or No Cost Resources</strong></td>
<td>Lack of indoor low cost PA facilities, School facilities may be inaccessible outside of school year (e.g. summer)</td>
<td><strong>Healthy Food Options</strong></td>
<td>Lack of Healthy Food Choices, especially quick or convenient options, at area restaurants and stores. Food Assistance programs don't always have healthiest options.</td>
</tr>
</tbody>
</table>
Resident-Informed Recommendations for Community Change

The following recommendations emerged from the data generated during the Grangeville, ID community conversation and represent those of the Grangeville community members who shared their ideas during the facilitated discussion of the photographed community features. These recommendations do not represent those of the GROW Healthy Kids and Communities project members or Oregon State University.

**Informational Campaigns**
- Increase knowledge of efforts and resources
  - via advertisements on website or other media
    - At events (e.g. farmer’s market)
    - On social media
    - Posted in public area (e.g. info kiosk)
  - In person
    - Public events
- Increase knowledge about resources
  - Signage with rules and regulations
- Internet connectivity in more rural areas

**Active Transportation, Walk/Bike/Wheel-Ability**
- Add bike racks around town
  - Summer lunch program location
- Sidewalks
  - Repair and add
- Add bike lanes
- More accessible trails
  - ADA

**Healthy Food and Physical Activity Policies and Programs**
- Increase physical activity resources and access to them
  - Maintenance/repair
    - Tennis courts, playground equipment
  - Increase amenities at resources
    - Lights, benches, bathrooms
  - Recreation center needed
- Promote all recreation opportunities
  - Team and individual sports
- Education on whole foods preparation
- Create check out system for play equipment
  - Tennis balls/racquets, basketball, etc.
- Increase healthy convenience food items
  - Snacks, Grab & Go, etc.
Multisector Partnerships and Shared Goals for Healthy Community Development

- Actively increase community participation
  - Engage with elected officials and business owners
    - Offer opinions and requests for healthy food and physical activity resources
Figures 3 through 8 represent the routes navigated by local residents as they mapped the physical features of the Grangeville community using participatory photographic survey methods.

Figure 3. Represents all routes generated by the Grangeville community mappers.
Figure 4. Represents an example of a personal motorized vehicle (PMV) route and features encountered along the route that enable or hinder healthy eating and/or physical activity.
Figure 5. Is the PMV map zoomed in to show the routes and resources captured within city limits.
Figure 6. Represents a walking route and the features encountered along the route that enable or hinder healthy eating and/or physical activity.
Figure 7. Shows the walking route map zoomed in to show features encountered along the route within city limits.
Figure 8. Represents a route created while biking and the features encountered along the route that enable or hinder healthy eating and/or physical activity.