

Participatory Evaluation Institute

June 2023





TABLE OF CONTENTS

One Page Summary	3
Purpose & Background	5
Methods	_ 6
Bringing It All Together: Priorities For Future Development	7
History And Current Efforts	_ 9
Asset & Opportunity Analysis	_ 13
Primary Data: Key Informant Interviews	_18
Primary Data: Community Dialogue	_26
Secondary Data	_33
Appendix A: References And Data Sources	_58
Appendix B: Data Analysis	_61
Appendix C: KI Interview Guide	_63
Appendix D: Community Dialogues – Agenda & Outline	_66
Appendix E: Community Dialogues – Mapping Activity	_69
Appendix F: AzPRC – Participatory Evaluation Institute Assessment Team	72

Cover Photo: Blue Moon Community Garden with Tucson House in the background. Photo taken by assessment team.

ONE PAGE SUMMARY

2023 Thrive in the 05 Community Health Assessment

Data Collection:

Methods

- Conducted 9 key informant interviews
- Completed 2 community dialogues with 17 community members
- Aggregated secondary data from publicly available sources

Primary Data Overview

Assets

• Current community investment, economic development and historic revitalization initiatives

- Unique history and cultural connections
- Easy access to resources including parks and social services
- Feeling of community; active and involved neighborhood associations.

Challenges

- Drug use and paraphernalia
- Homelessness and housing instability
- Industrial and vacant lots
- Potential contamination, trash and illegal dumping
- Pedestrian infrastructure and lack of shade.
- Perception of safety
- Access to healthy foods

Secondary Data Overview

- Nearly 7 in 10 (67.2%) residents participate in leisure-based physical activity
- All neighborhood blocks within Thrive in the 05 are ranked above walkable
- Cancer prevalence rate is lower in Thrive in the 05 compared to Pima County and Arizona
- Higher breast cancer screening rates compared to Pima County and Arizona
- 37.3% of people and 33.9% of children in Thrive in the 05 live under the Federal Poverty Level
- Nearly half (46.3%) of households within Thrive in the 05 spend 30% or more of their monthly gross income on housing costs
- Almost 1 in 3 (32.8%) households within Thrive in the 05 receive SNAP benefits
- 1 in 5 (20.3%) residents within Thrive in the 05 are living with a disability

Priorities for the Redevelopment of Brownfield Sites

Based on the results of this report, the priority is to redevelop a brownfield site into a **community garden** which includes an accessible walking path, public restroom, lighting, a ramada with picnic tables that can be used as gathering place, and an element of community food distribution or service such as a farmer's market or community kitchen. The garden should build on the unique history and culture of the neighborhood.

A community garden provides:

- An opportunity for residents to grow, sell or purchase healthy foods.
- A lush green space with opportunities for exercise available to individuals of all abilities.
- A gathering place for community or neighborhood meetings, health or educational programs.

2023 Thrive in the 05 Evaluación de Necesidades de la Comunidad Resumen de Una Pagina

Recopilación de datos:

Métodos

- Entrevistas con 9 informantes claves
- 2 diálogos comunitarios con 17 miembros de la comunidad
- Datos secundarios agregados de fuentes disponsibles al público

Información general sobre los datos primarios

Activos Desafíos Inversión comunitaria actual, Falta de vivienda e

- Inversión comunitaria actual, desarrollo económico e iniciativas históricas de revitalización
- Historia única y conexiones culturales
- Fácil acceso a recursos, incluidos parques y servicios sociales
- Sentimiento de comunidad
- Asociaciones de vecinos activas e involucradas

- Falta de vivienda e inestabilidad de la vivienda
- Terreno industrial y vacío
- Contaminación potencial, basura y vertido illegal
- Infraestructura peatonal y falta de sombra
- Percepción de seguridad
- Acceso a alimentos saludables

Información general sobre los datos secundarios

- Casi 7 de cada 10 (67,2%) residentes participan en actividades físicas basadas en el ocio.
- Todos los bloques del vecindario dentro de Thrive en el 05 están clasificados por encima de caminable.
- La tasa de prevalencia de cáncer es menor en Thrive en el 05 en comparación con el condado de Pima y Arizona.
- 37.3% de las personas y 33.9% de los niños dentro de Thrive in the 05 viven bajo el Nivel Federal de Pobreza.
- Casi la mitad (46.3%) de los hogares dentro de Thrive en el 05 gastan el 30% o más de su ingreso bruto mensual en costos de vivienda.
- Casi 1 de cada 3 (32.8%) hogares dentro de Thrive in the 05 recibe beneficios de SNAP1 de cada 5 adultos dentro de Thrive in the 05 viven con una discapacidad.

Prioridades para la reurbanización de sitios Brownfield

Con base en los resultados de este informe, la prioridad es redesarrollar un sitio de brownfield en un **jardín comunitario** que incluye un sendero accesible para caminar, baño público, iluminación, una ramada con mesas de picnic que se pueden usar como lugar de reunión, y un elemento de distribución o servicio comunitario de alimentos, como el mercado de un agricultor o la cocina comunitaria. El jardín debe basarse en la historia y la cultura únicas del barrio. Un jardín comunitario proporciona:

- Una oportunidad para que los residentes cultiven, vendan o compren alimentos saludables.
- Un exuberante espacio verde con oportunidades para hacer ejercicio disponibles para personas de todas las habilidades.
- Un lugar de reunión para reuniones comunitarias o vecinales, programas de salud o educativos.

PURPOSE & BACKGROUND

Introduction to the Community Health Assessments

The City of Tucson Environmental and General Services Department partnered with the Arizona Prevention Research Center (AzPRC) Participatory Evaluation Institute (PEI) to conduct community assessments in the Thrive in the 05 and the La Doce neighborhoods. This assessment was conducted under the City of Tucson's 2018 Brownfield Assessment Grant (BF-99T74201). Brownfield sites include underused or vacant properties that may be contaminated due to historical use.

The purpose of the community health assessment is to:

- Identify specific public health challenges and assets for residents within the target neighborhoods and their underlying causes.
- Identify opportunities to reuse brownfield to strengthen existing assets and prioritize community health improvement.

This assessment is guided by the EPA's approach to successful brownfield revitalization, and includes information on safety, health, social, economic, and environmental challenges. We engaged with a wide variety of community leaders, organizations, and community members to identify the most important priorities for each neighborhood.

Learn more:

- EPA Brownfield Program: https://www.epa.gov/brownfields/brownfields-program-environmental-and-economic-benefits
- Brownfield Success Story including Old Fort Lowell Park in Tucson:
 https://www.epa.gov/sites/default/files/2015 10/documents/epa oblr successstory region9 openspace v2 508.pdf

METHODS

The methods for the community assessment included secondary data review and analysis, key informant interviews, and community dialogues. All data collection methods focused on neighborhood challenges, assets and opportunities related to health, safety, economic, social, and environmental issues.

A **community asset and opportunity analysis** was completed using Google Map Software. Resources within an area extending to .5 mile beyond the neighborhood boundaries were identified and categorized by type. An analysis was conducted to understand assets and gaps for resources within easy access of the neighborhood.

Key informant interviews were conducted with representative community members and leaders who could provide broad or unique perspectives on each neighborhood. Key informant interviews were conducted virtually or in-person in Spanish or English, based on individual preference.

The **community dialogues** were an opportunity to seek input directly from community members. There was an option to participate in one virtual and one in-person community dialogue, and all activities and questions were available in both English and Spanish. The inperson community dialogues took place at the nearby community center and consisted of five stations with activities regarding neighborhood strengths, neighborhood challenges, prioritization of potential ideas for reusing brownfield sites, a mapping activity, and a storytelling activity.

Secondary data were collected from publicly available sources and analyzed based on the census tracts that correspond with neighborhood boundaries.

The data collection activities for this community assessment were iterative and built upon each other to identify the most important priorities for the reuse and revitalization of brownfield sites. For example, the options included in the prioritization activity were those identified by key informants as the most important priorities for the reuse of a brownfield site. The final priorities were identified based on the results from all data collection methods.

BRINGING IT ALL TOGETHER: PRIORITIES FOR FUTURE DEVELOPMENT

Recommendation

In the Thrive in the 05 neighborhood, the priority should be to redevelop a brownfield site into a community garden. Ideally, the community garden would be in the northern part of the neighborhood (near Grant and Oracle) and include an accessible walking path, public restroom, lighting, a ramada with picnic tables that can be used as a gathering place, and some sort of community food distribution or service such as a community kitchen.

Rationale

The assessment team considered all the data represented in this report to make this recommendation and considered the challenges and assets in the neighborhood in the decision. The specific rationales are listed below:

- Thrive in the 05 residents have high rates of food insecurity, poverty, and chronic
 diseases that are related to diet and physical activity. A community garden provides a
 place for growing and sharing healthy foods, and a small walking path provides a free
 opportunity for physical activity.
- Thrive in the 05 is home to many individuals with disabilities, and an accessible, paved walking path and ramada allows people of all abilities to access the amenities.
- Thrive in the 05 residents have easy access to many amenities including transit, social services, and parks. However, access to healthy food options is limited, and residents in the northern part of the neighborhood do not have easy access to green space.
- Key informants were concerned about mental and economic well-being, as well as a lack of space to host community gatherings. A community garden provides a safe space for activities such as gardening and walking that can improve mental health and provide affordable fruits and vegetables. The ramadas can serve as a gathering place for community events and meetings.
- A community garden builds upon the strengths of the neighborhood. There are already
 many small parks that are heavily used and will see investment in the coming years,
 and a community garden provides an additional opportunity to build upon community
 beautification efforts with accessible green space. Thrive in the 05 has many active and
 engaged neighborhood, cultural and community groups that would benefit from a
 meeting place.
- The community dialogue participants emphasized a desire for a green space, access to healthy foods, and a place to gather for community development initiatives. A community garden meets all these needs.

It's important to consider the amenities that a community garden would have. A public restroom is vital to prevent public defecation and provide unsheltered individuals with a dignified place to use the restroom. It's also important for the garden to have lighting to improve safety. The garden plots, walking path and amenities should be accessible to individuals with disabilities and to seniors. A space for cooking demonstrations or other community programs and activities could help promote the garden and support community use of the space. A small farmer's market or food share like a Community Supported Agriculture (CSA) program could make use of the space and provide additional options for healthy foods and economic support for residents.

The development plans for a community garden should consider local cultural and historic assets that can infuse the garden with the proud and unique history of the neighborhood. For example, partnering with the Pascua Yaqui nation to provide spaces for education, cultural ceremonies, traditional agricultural or food demonstrations or other programs to highlight Yaqui resilience and culture. Design elements that celebrate the heritage of the historically Black neighborhoods in and around Thrive in the 05 can also be considered. The neighborhoods in Thrive in the 05 have engaged and passionate residents who can work to create a space that respectfully honors the history of the neighborhood.

"Brownfields are blight. The opposite of blight is green space."

- Key Informant, Community Leader

Alternatives

The alternative to the community garden would be a small community or resource center that caters specifically to the community with resources, exercise equipment, and a community gathering space. A community center helps to connect individuals to resources, and organizations that provide youth or senior programs, economic assistance, and other social services could use the space to provide those resources to the community. Small-scale affordable housing would also support many of the priorities discussed in this report. However, the Thrive in the o5 Transformation Plan already includes plans for affordable housing, and we are conscious of the need to avoid duplication of efforts.

E Fort Lowell Rd CORONADO HEIGHTS 10 KEELING W Glenn St ROAD TRIAL Wells Rd W Grant Rd Grant Rd PASCUA YAQUI INDIAN VILLAGE SUGAR HILL OCOTILLO ORACLE т **EL RIO ACRES BRONX PARK** FELDMAN'S LAZA Speedway Blvd W Speedway Blvd W Speedway Blvd

HISTORY & CURRENT EFFORTS

BARRIO

HOLLYWOOD

LLS

Figure 1. Map showing the boundaries of the Thrive in the 05 neighborhood.

DUNBAR SPRING

10

History of the Thrive in the 05 Neighborhood

WEST

Thrive in the 05 refers to a 2.3 square-mile area in the 85705 zip code in Tucson. It encompasses the Oracle and Miracle Mile area and is less than two miles north of Downtown Tucson. Thrive in the 05 is bounded by Miracle Mile/Blacklidge to the North, Speedway Boulevard to the South, Stone Avenue to the East and Interstate 10 to the West. The entire neighborhood is situated within Ward 3 of the City of Tucson.

The Thrive in the 05 area is home to one of Southern Arizona's American Indian populations: the Yaqui, known as Hiaki in the Yaqui Language or Hoeme in Spanish. The Yaquis came north to the Arizona territory from their ancestral homeland along the Gulf of California in present-day Sonora and Sinaloa, Mexico, fleeing violence and persecution in the early 1900s. One of the areas first settled by the Yaquis is currently the San Ignacio Yaqui neighborhood,

also known as Old Pascua, within Thrive in the o5. The Yaquis established their community in the area that became known as "Pascua Village" and were granted official ownership in 1971. In 1978, the Yaqui communities in and around Tucson received federal recognition as the Pascua Yaqui tribe and developed the Pascua Yaqui Nation on land Southwest of Tucson. Pascua Village in Thrive in the o5 remains a thriving urban Yaqui community.

Learn more:

- San Ignacio Yaqui Council
- Old Pascua Museum and Yaqui Culture Center: https://www.facebook.com/TheOPMuseum/

Beginning in the early 1900s, the Thrive in the 05 area became an automotive and tourist gateway to Tucson. Three major highways (Routes 80, 84 and 89) met at the current intersection of Oracle and Miracle Mile, creating economic opportunities for the neighborhood. Motels and motor courts with their iconic neon signs proliferated along the newly named "Miracle Mile" to cater to travelers. In 1958, Interstate 10 was built and bypassed the center of town. The Miracle Mile saw an economic decline as air travel became more common and gas prices rose. The motels in the Miracle Mile area grew a reputation as places for criminal activity and sex work. Since the 1980s, the area had been overlooked for economic investment and the area continued to decline.

Several historically Black neighborhoods including Bronx Park, Dunbar Springs, and Sugar Hill border or are included in Thrive in the 05. The residential areas around Oracle and Grant were one of the few places where African American families lived and owned property in Tucson between World War II and the passage of Civil Rights Legislation in the 1960s.

Learn more:

- Neighborhood Link: http://www.neighborhoodlink.com/Northwest Tucson/pages/258594
- Sugar Hill History: https://sugarhillneighborhood.blogspot.com/p/history.html
- Dunbar Springs History: http://dunbarspring.org/content/about-dunbar-spring-neighborhood

Thrive in the 05 is also home to Tucson House, a high-rise public housing complex primarily designated for elderly and disabled residents. Tucson House was originally built as a luxury residential building in 1963 and was bought by the City of Tucson in 1976.

Today, Thrive in the 05 is comprised of small, diverse neighborhoods that each have unique characters. The residential cores of each neighborhood are interspersed with industrial and some commercial zoning, which makes connection between the neighborhoods or to nearby amenities challenging. Many of the neighborhoods have active neighborhood associations who are involved in community development efforts.

- For more information on neighborhood characteristics in Thrive in the 05, see the Neighborhood Section of the Thrive in the 05 Historical and Geographic Context Story Map: https://thriveinthe05.tucsonaz.gov/apps/cotgis::thrive-in-the-05-historic-geographic-context/explore.
- The Southwest Folklife Alliance's report, "Thriving Folklife: Tucson's 85705 Past, Present and Future" provides a rich window into the community and history of Thrive in the 05:

 http://southwestfolklife.org/wp-content/uploads/2017/03/230208 thrive-05
 publication for-web.pdf

Ongoing Planning Efforts and Community-Driven Priorities

Residents of the current Thrive in the 05 Neighborhood began organizing in the 1990s and early 2000s to advocate for increased investment and economic opportunity. The Oracle Project (TOP), a coalition of neighborhoods and businesses, approached the City of Tucson to launch the Oracle Area Revitalization Project (OARP) planning effort in 2007. The OARP has achieved the designation of the Miracle Mile Historic District, the adaptive reuse of motels for affordable senior housing, and new investments in community spaces such as community gardens.

The Thrive in the 05 Transformation Plan, adopted by the Tucson City Mayor and Council in March 2022, lays out a plan for sustainable, equitable, and community-driven change. The vision of the Transformation Plan is that "the Thrive in the 05 is a safe, affordable, inclusive neighborhood that cultivates sustainable transformation through resiliency, reinvestment, and shared leadership; a community that honors our unique history and cultural identity, where multiple generations share the means to thrive." The Thrive in the 05 Transformation has four goals related to neighborhoods, housing, people and education, and workforce and economic development, with specific strategies for each goal.

The Transformation Plan outlines important considerations for community development in Thrive in the 05 and should be considered in plans to reuse vacant or underutilized properties. These priorities include: providing affordable housing options suitable for diverse populations; establishing mixed use nodes with retail to serve the neighborhood; and creating amenities that build the health and environmental resilience of the neighborhood (e.g. green spaces).

The Thrive in the 05 area will also see improvements funded by Prop 407, a \$225 million bond package which was passed by Tucson voters in 2018 to improve park amenities and pedestrian and cycling infrastructure. There will be two pedestrian/bicycle projects in Thrive in 05 in the coming years: a Bicycle Boulevard going East-West on Seneca Street and Waverly Street, and a protected bike lane going North-South on Fairview Avenue from Prince to Grant Road. Jacobs Park, Jacinto Park, Manuel Valenzuela Alvarez Park, Francisco Esquer Park and

Estevan Park will all see improvements in infrastructure, safety, or recreation facilities by 2028. A map showing the planned improvements is available on the <u>City of Tucson Parks and Connections Page</u>.

Learn more:

- Thrive in the 05 Transformation Plan: https://www.tucsonaz.gov/files/hcd/Choice/ThriveTransformationPlan-2022-compressed.pdf
- Thrive in the 05 Historic and Geographic Context: https://thriveinthe05.tucsonaz.gov/apps/cotgis::thrive-in-the-05-historic-geographic-context/explore
- Thrive in the o5 Website: https://www.thriveinthe05.com/place-1
- *Prop 407 projects and improvements:* https://tucsondelivers.tucsonaz.gov/pages/parks-connections

ASSET & OPPORTUNITY ANALYSIS

Methods

The purpose of the asset and opportunity analysis is to recognize the strengths and opportunities within the Thrive in the 05 neighborhood and explore how they contribute to the overall health, economic well-being, social connection, environment, and safety of the community members. An asset map was created utilizing Google Earth, a virtual tool with satellite imagery, street views, and search functions which all aided in the identification of assets in the neighborhood.



The assessment team first outlined the neighborhood utilizing the boundaries provided by the City of Tucson. Since community members are not bound to the neighborhood when accessing resources and services, a half-mile (0.5) buffer from each boundary was added to capture a more accurate picture of the assets and opportunities in and around the neighborhood. The asset categories were then defined (see below) and a folder was created for each. The team then completed a thorough scan of the neighborhood and the buffer area utilizing Google Earth's functions, and when an asset was identified, a marker was placed on the asset and categorized in the appropriate folder. The markers were also

customized with icons to easily identify the type of asset (for example, a tree was used for parks and a cross was used for medical offices).

The asset map focuses on several categories including:

- **Medical Offices**: Healthcare facilities, hospitals, clinics, and other health-related services that are available within the neighborhood.
- **Pharmacy/Drug Stores**: Pharmacies and drug stores which may include standalone stores or those within a grocery store.
- **Social Services**: Social service organizations, counseling centers, and other resources that provide support and assistance to community members.
- **Community/Recreation Centers**: Facilities that provide community services and resources, sports facilities, and a space for community to convene.
- **Parks**: Includes playgrounds and green spaces that promote physical activity and leisure.
- **Grocery Stores**: Includes supermarkets, farmer's markets, and other sources of fresh and affordable food within the community.
- **Food Distribution/Pantry**: Entities that offer free or affordable foods for the community.

- **Places of Worship**: Religious institutions, churches, mosques, temples, and other places of worship that cater to the spiritual and social needs of community members.
- **Schools**: Educational institutions, including:
 - Elementary Schools/Headstart
 - o Middle Schools
 - High Schools
 - Academies and Community Colleges

Results

The asset map helped us visualize the volume of assets as well as their proximity to the neighborhood. The icons on the markers also helped us identify the strengths and opportunities of the availability of resources and services within the neighborhood. We then summarized our findings for each category in Figure 2 by providing the total number of assets identified and recording significant characteristics that emerged from the asset map. We also provide a summary of the strengths and opportunities of the asset categories.

Asset Map

The asset map revealed that a large majority of the markers fall within the buffer area and not within the neighborhood boundaries. Notably, most of the medical offices, community/recreation centers, grocery stores, food distribution/pantry locations, and schools fall within the buffer area while most of the social services and parks can be found within the Thrive in the 05 neighborhood boundaries. Schools, including preschools, elementary schools, middle schools, high schools, academies, and community colleges, as well as places of worship are well distributed throughout the neighborhood and in the buffer area.

Figure 2 summarizes the assets by category and provides significant characteristics.

Categories	Total Number of Assets	Significant Characteristics
Medical Offices	11	 Includes clinics and behavioral health centers Several medical offices are located within the buffer area and 3 are within the neighborhood boundaries 2 Federally Qualified Health Centers (FQHC)
Pharmacy/ Drug Stores	4	 Includes 3 stand-alone pharmacies and 1 pharmacy found within a grocery store 2 are located within neighborhood boundaries and 2 within or just outside the buffer area
Social Services	11	 Includes 2 shelters and 9 resource centers Most of the social service locations are located within the neighborhood boundaries and only 3 are in the buffer area Well dispersed throughout the neighborhood

Community/ Recreation	3	Includes 2 recreation centers and 1 youth activity
Centers		 center 2 of the community/recreation centers are located within the buffer area and 1 within the neighborhood boundaries The recreation centers cater to both youth and adults and provide yours to stee active
Parks	12	 and provide ways to stay active Includes parks with playgrounds, parks with just a field for sports, and parks with both 6 parks within the neighborhood boundaries and 3 within the buffer area The parks are well dispersed
Grocery Stores	6	 Includes grocery stores, markets, and superstores 2 grocery stores are located within the neighborhood boundaries and 4 within the buffer area Clustered in the northeast corner of the neighborhood and buffer areas
Food Distribution/ Pantry	7	 Includes 1 garden, 4 food banks, and 2 community kitchens 3 are located within the neighborhood boundaries and 4 within the buffer area Several food distribution locations run out of local places of worship
Places of Worship	31	 Includes religious institutions, churches, mosques, and temples Most of the places of worship are well dispersed throughout the neighborhood and within the buffer area Most offer a variety of social services in addition to religious services
Preschools, Elementary Schools & Middle Schools	15	Includes preschools, schools that offer preK-8 th grade enrollment, and elementary schools
High Schools	6	 Includes 3 charter high schools and 3 public high schools
Academies and Community Colleges	6	• Includes 4 academies, 1 community college, and 1 state agency school

Figure 2. List of the number of assets and their characteristics that are in the Thrive in the 05.

Strengths

The greatest strengths of Thrive in the 05 are the assets found within the medical offices, social services, parks, places of worship, and schools categories. Although most of the medical offices are located outside of the neighborhood boundaries, most may still be close enough to be easily accessed through public transit, driving, and/or walking. These medical offices offer

a variety of clinical and behavioral health services and two of the clinics are Federally Qualified Health Centers (FQHC). There are several social services available to the community, especially within the neighborhood boundaries. Shelters for the unhoused and resource centers that offer social services are mostly clustered at the southern area of the neighborhood reducing the amount of travel for the unhoused individuals seeking these services. Parks are well dispersed in and just outside the neighborhood and offer a variety of options for the community including playgrounds and large open fields for sports. There are also small parks within the smaller neighborhoods that include playgrounds. The larger parks are found just outside of the neighborhood boundaries. There is no shortage of places of worship as they are well dispersed throughout Thrive in the 05 and just outside of the neighborhood. Since some places of worship offer social services in addition to religious services, they complement the social services already offered by the shelters, resource centers, and food banks. Schools of every grade are also well scattered throughout the neighborhood providing families with choices for where to send their children.

Opportunities

The categories that had the most opportunities for improvement are pharmacy/drug stores, community/recreation centers, grocery stores, and food distribution/pantry locations. There is a scarcity of pharmacy/drug stores within and just outside of the neighborhood boundaries. While some clinics may have the ability to dispense medicines at their locations, they can only do so for their patients, further limiting the options for non-patients. While there may not always be an immediate need for pharmacies, their availability and proximity to the neighborhood are essential for ensuring community members can have access to their medicines and other health-related items without having to travel long distances.

The nearest community or recreation center is the Donna Liggins Center, which is within the buffer zone and may be difficult to access for Thrive in the 05 residents without access to reliable transportation. Community centers are a critical asset for the neighborhood since they offer various physical activity and community gathering opportunities, both essential for health, socialization, and having a sense of belonging. The northern and central areas of Thrive in the 05 would greatly benefit from the development of additional community/ recreation centers.

The grocery stores identified inside the neighborhood boundaries and buffer area were small markets that only offer food essentials. There is only one major grocery store within the buffer area which also offers other goods beyond groceries. There is a great need for more grocery stores that offer healthier food options within Thrive in the 05, especially since the food options may not be as fresh or healthy, and some community members may often resort to

foods found at gas stations to avoid traveling long distances. Food distribution/pantry locations are primarily located in the southern part of the buffer area. There is one food bank within Thrive in the 05 and a garden behind the Tucson House in the southern area within the neighborhood boundaries. The garden is utilized by the community which offers them opportunities to grow their own fruits and vegetables. Nonetheless, Thrive in the 05 may benefit from additional food distribution/pantry locations, especially in the northern area of the neighborhood.

PRIMARY DATA: KEY INFORMANT INTERVIEWS

Methods

The purpose of key informant interviews is to gain detailed information from individuals who have a broad or unique perspective on health in the Thrive in the 05 neighborhood. Initial key informants were identified based on their involvement in or knowledge of the neighborhood and included neighborhood association board members, service providers who operate within the neighborhood, and recommendations from the City of Tucson Environmental and General Services Department. Additional key informants were identified through recommendations provided during the interviews.

The assessment team sent invitations in English and Spanish to potential key informants, who were asked to sign up for a time using a scheduling link. Key informant interviews were available in English and Spanish, and the individual had the option to complete the interview in person or via Zoom. Some key informant interviews included several people who joined the discussion.

The interviews were conducted with a guide that prompted discussion about assets and challenges in the neighborhood related to health, the environment, economic well-being, social connection, and safety. The interview guide can be found in Appendix C.

The interviews were conducted by members of the assessment team according to availability. The interviewer took notes during each interview and saved the responses in a REDCap database. The results were downloaded and analyzed using Dedoose, a qualitative data analysis software. The major themes related to each of the assessment topics were identified, coded, and analyzed through an iterative content analysis process.

A total of 10 individuals completed key informant interviews, representing expertise in a wide range of topics. A full list of their roles, affiliations, expertise, and interview modalities is presented in Figure 3.

Role	Affiliation(s)	Expertise	Interview Modality
Council Aide	Ward 3	Government, community leader	Virtual
CEO	Pascua Yaqui Development Corporation	Community leader; Expertise in economic and cultural topics	Virtual
Residents and Tucson House and Community Barrio Blue Moon Community Gardeners (n=3)		Community members.	In-person; included garden tour

Pima Community	Community	
College; City of development;		Virtual
Tucson	Economic initiatives;	
Bronx Park Neighborhood Association	Community Leader	In-person
Splinter Collective	Social services; Arts and Community Space; Business Owner	Virtual
Sugar Hill Neighborhood Association	Community Leader	Virtual
Community Gardens of Tucson; Tucson House; Barrio Blue Moon Community Garden	Community Leader; Health; Food Access	Virtual
	College; City of Tucson Bronx Park Neighborhood Association Splinter Collective Sugar Hill Neighborhood Association Community Gardens of Tucson; Tucson House; Barrio Blue Moon Community	College; City of Tucson Bronx Park Neighborhood Association Social services; Arts and Community Space; Business Owner Sugar Hill Neighborhood Association Community Gardens of Tucson; Tucson House; Barrio Blue Moon Community development; Economic initiatives; Social services; Arts and Community Space; Business Owner Community Leader Community Leader; Health; Food Access

Figure 3. Key informant interview participants.

Results

We organized the results by topic according to the EPA's guidance on successful brownfield revitalization: health, economic well-being, social connection, environment, and safety. Emergent themes regarding challenges, assets and priorities are reported below. Many of the themes span multiple categories; for example, lack of shade impacts health because it makes exercise difficult, and it is also an environmental concern. The most important themes related to challenges and assets are reported below, along with a table highlighting the major themes relating to each topic.

Assets

Community-Building and Community Development Initiatives

The key informants emphasized all the benefits that have come from intentional community-building and community development activities. There are many organizations and resources that bring people together to facilitate community-building. For example, the Thrive in the o5 Initiative, Ward 6 Council Office, Splinter Collective, Pima Community College, and Barrio Blue Moon Community Garden all work to bring residents together for various activities including trash pick-up days, resource fairs, traffic painting parties, tree planting days, and artistic performances. Some of the local restaurants and businesses, including certain gem show vendors, are very involved in these efforts and provide resources and spaces to support community development.

We are "creating spaces together with unused land. Beautifying the neighborhood to revitalize the neon signs, it's a piece of history. There's a sense of pride that nice things are happening to my neighborhood."

- Community Leader

Thrive in the 05 has active and involved neighborhood associations that work to bring information to their communities and involve them in decision-making for future development. The Pascua Yaqui tribe also provides ample opportunity for tribal members to connect with their culture and heritage.

"Ceremonies in the Pascua Yaqui tribe.... they do many things to strengthen their connectedness and sense of community and belonging"

- Community Leader

Economic and Historic Revitalization

There is a pervasive feeling of hope and excitement about economic, environmental, and historical preservation initiatives in Thrive in the 05. The Thrive in the 05 Transformation Plan, upcoming park and pedestrian/cycling upgrades and efforts to revitalize the iconic neon motel signs (See 'History and Current Projects') have opened many opportunities for Thrive in the 05. Key informants were excited to be involved in these efforts and eager to ensure that economic development benefits current residents.

The neighborhood has "become home to nice collection of [vintage neon] signs, also have historic motels along Oracle, Hacienda, etc. We see these touches of history that are at a pivotal moment, being bought again. What will they become?"

- Community Leader

Easy Access to Resources

The central location of Thrive in the 05 means that, despite the transportation challenges mentioned above, residents generally have access to a wide range of services and resources. For example, there are many small parks throughout the neighborhood that are heavily used by residents, and there is easy access within the neighborhood to community centers, churches, social service agencies and other resources. The public transportation options along Speedway and Oracle help connect residents to other resources and spaces in Tucson.

At the nearby park "everything is heavily used, basketball court, community garden, one corner with a bunch of picnic tables and people are always using it. Really engaged neighborhood, many people walk around."

- Social Service Provider

Tucson House provides many resources for its residents as well. For example, the Community Food Bank of Southern Arizona drops off food boxes, and mobile health units visit frequently to provide healthcare. These resources are not always open to the rest of the community, but they serve as a resource hub for some of the residents who are most in need of these services.

Safety

Most of the Key Informants reported a general feeling of safety in many parts of the neighborhood. Many of the safety concerns mentioned above cluster along Oracle and around Tucson House.

"I actually think that the neighborhoods are quite safe. I feel very comfortable here."

- Social Service Provider

"Safety issues mostly along Tucson house/Oracle. Not an issue in the wider neighborhood. It's safe around the neighborhood, but not in Tucson house."

- Tucson house residents and gardeners

Challenges

Drug Use and Paraphernalia

All the key informants mentioned challenges related to drug use and paraphernalia in Thrive in the o5. This issue is closely tied to homelessness and squatting in vacant properties. Ubiquitous drug use not only impacts those who are using the drugs, but it also affects the perception of safety in some areas of the neighborhood (notably, along Oracle and Grant Road). Drug paraphernalia are often discarded in public areas and lead to potential contamination or safety issues.

"I go out with my 3 year old and they find foil or straws, see things like syringes in bushes or weeds."

- Community Leader

Unsheltered Population

A large unsheltered population was mentioned by most of the key informants as a challenge in the neighborhood. Unsheltered individuals may take up residence in abandoned or vacant lots which are unsafe for habitation. This contributes to excessive trash in some parts of the neighborhood as there are not enough public trash cans available. The lack of public

restrooms leads to issues of human waste throughout the neighborhood as unsheltered individuals have no options but to defecate in public areas.

Key informants were also concerned about the mental and physical health of those who are experiencing homelessness. Key informants mentioned that the City of Tucson's response to homelessness, including the recent clearing of an established encampment at Estevan Park, can create crises and additional challenges to provide services and support for unsheltered individuals.

Housing Instability

Key informants were concerned about people experiencing housing instability and its impact on mental and physical health. Unresponsive or neglectful landlords create unsafe living environments, and some people may not be able to leave these tenuous situations.

Anxiety about gentrification is also present in Thrive in the 05, along with rising prices for housing and other necessities. Several of the neighborhoods directly to the south of Thrive in the 05 are experiencing gentrification, and there is a concern that those issues will creep northwards with increased development, making housing unaffordable for current residents.

"Gentrification has been a big issue. Housing prices are increasing so much, it's changed in affordability. Concerned with pricing out the people who have been here, families who have been there for generations, and losing it to high end development and gem show warehouses, commercial stuff."

- Social service provider

Industrial and Vacant Lots

Thrive in the 05 is characterized by a mix of industrial and residential zoning and is host to many vacant or abandoned properties. Key informants mentioned that the mix of zoning leads to concerns of contamination from industrial properties as well as the possibility of asbestos, lead, mold, and pests from old or vacant buildings. In some cases, the landlords for the abandoned lots are absent or unresponsive to complaints from neighbors. Thrive in the 05 is home to many warehouses for the world-famous Tucson Gem and Mineral Show. The warehouses bring in an influx of business during the month of the show but look like vacant buildings the rest of the time. The pervasive vacant or vacant-seeming lots propagate the idea of economic deprivation and make the area undesirable for economic or personal investment. The vacant or vacant-seeming lots also attract illegal dumping and trash accumulation.

"...vacant commercial buildings, vacant or boarded up residential buildings. Because properties are vacant, they become overgrown, harbor pests. It propagates the idea that nobody cares about the area."

- Community Leader

"Asbestos, lead, and mold in many of the older buildings. Possibly some chemicals have seeped into the ground due to the old fuel used in the area and randomly disposed of barrels filled with chemicals."

- Community Leader

Transportation Infrastructure

Challenges with transportation infrastructure lead to several difficulties for residents of Thrive in the 05. The lack of shade in the day and insufficient lighting at night makes exercise difficult, and the lack of maintenance for walking and biking infrastructure makes it difficult to reach parks or public transportation options. For those without access to a car, it is difficult to access healthy food, medical care, or other necessities. Traffic and pollution related to trucking companies off 1-10 are also a concern.

"It is especially difficult to go to parks during the summer, and really anytime, because of the lack of shade and how hot it would be just to walk to the park."

- Government representative

I wish there were more access to public transit... [in some parts of] neighborhood, you can walk to busses but they are not as easy to use. [There is] nowhere to put bikes in the neighborhood.

- Social service provider

Other Concerns

Some other concerns were raised repeatedly by key informants but do not necessarily fit into the categories above. These include:

- Safety concerns centered around Tucson House. The perceived safety concerns are related to drug use and unsheltered individuals. Many key informants mentioned that they don't feel safe walking along Oracle or near Tucson House at night.
- Poverty is a pervasive issue that underpins many of the challenges mentioned above.
- Police presence is a challenge with several distinct facets. Some key informants mentioned that an officer shortage is "scary" because they do not respond to calls in a timely manner, and residents feel like they must deal with issues by themselves. Other key informants mentioned that residents don't trust the police because of experiences where police have intimidated or harassed residents.

"Since people are working too much, sometimes multiple jobs, just to make ends meet, they are too tired to participate in these types of social gatherings which prevents them from building relationships with people within their communities."

- Government/Community Leader

Themes Related to Key Categories

The assessment team analyzed the key informants' responses to identify the themes related to the challenges and assets of the health, environment, economic well-being, social connectedness, and safety of the neighborhood. Figure 4 summarizes the major themes from key informant interviews related to each category. The categories correspond to the EPA guidance on successful brownfield reutilization (see "Purpose and Background") and are organized by challenges and assets related to each category.

Category	Challenges	Assets
Health	 Access to healthy foods Access to exercise opportunities Mental health related to homelessness and housing instability Drug use 	 Access to services Tucson House provides many resources for residents Many small parks
Environment	 Old/vacant buildings (asbestos, lead, mold, pests, etc.) Contamination: human waste, illegal dumping, drug paraphernalia Mix of industrial zoning Pollution from trucking 	 Efforts to beautify neighborhood. Traffic calming measures, bike infrastructure
Economic Well-Being	 Vacant and vacant-seeming lots and buildings (prevents investment) Gentrification High poverty levels 	 Revitalization with Thrive in the 05 Transformation Plan and other economic initiatives Local businesses involved in community. Historical renovations
Social Connectedness	Lack of gathering space, especially in the summer	 Organizations and resources facilitate community processes. Community events for people to connect with neighbors. Active and involved neighborhood associations. Pascua Yaqui cultural connections and traditional ceremonies.

	• Drug naranharnalia	• Fooling of sofety in most areas
Safety	 Drug paraphernalia Perceived lack of safety in specific areas Speeding traffic Police: lack of presence and police harassment/intimidation Lack of lighting and maintenance of walking/biking paths 	 Feeling of safety in most areas of neighborhood. Traffic calming efforts Coming investment in biking and walking infrastructure

Figure 4. Key categories of neighborhoods and their associated challenges and assets.

Priorities

The assessment team asked the key informants about their priorities for potential redevelopment of brownfield sites. The priorities identified by Key Informants were used for the ranking and prioritization activity in the Community Dialogues. The priorities are presented in alphabetical order in Figure 5 below.

Priority	Rationale		
Community Center	Community Center is a gathering place and could help connect people to resources and information. Donna Liggins center is close by, but Key Informants wanted a smaller community center that caters to the neighborhood.		
Community Garden	Another community garden would provide healthy food options, additional gathering space, and more green space in the neighborhood.		
Grocery Store	Provide easy access to healthy foods without needing to use a car or public transportation.		
Mixed use Retail and Dense Housing	Dense housing can be more affordable and would not be out of place at a busy intersection such as Speedway and Oracle. Retail provides an opportunity for nearby economic opportunity and could be a space for grocery stores or social service agencies.		
Park or Green Space	More green spaces to provide additional opportunities for exercise and social connection. Investing in a small park or green space with amenities such as a walking path or playground would support the health of the neighborhood.		
Small-Scale Affordable/Low- Income Housing	Creating options for affordable housing with fewer units would create opportunities to mitigate housing instability while preventing some of the issues related to crime and safety that key informants noted with Tucson House.		
Social Service Agency	A social service agency could provide resource navigation services for individuals experiencing homelessness or those living in poverty.		

Figure 5. List of priorities identified by key informants.

PRIMARY DATA: COMMUNITY DIALOGUE

Methods

The assessment team hosted two community dialogue events, one in-person at the Donna Liggins Center and one virtual via Zoom. Both events were held in the evening.

Flyers with information about the community dialogue events were posted in public places around the neighborhood and provided to individuals who participated in key informant interviews both in electronic and paper form. The City of Tucson sent postcard mailers with information about the community dialogues to all the addresses in the neighborhood boundaries. Potential participants were directed to sign up via a web form or call one of the assessment team members to sign up for the event. Gift cards were available to the first 25 people to register and attend each event. All information about the event was provided in English and Spanish. The community dialogues were designed to be completed in English or Spanish, based on the preference of the participant.

The community dialogues were designed for community members to give their input into the strengths, challenges, and priorities for their neighborhood. The in-person community dialogue was self-paced and consisted of five stations that could be completed in any order. Each of the stations had a question and materials for the participant to write, draw or respond to the question. The participants were provided with instructions as they entered the room along with a two-page handout that explained the purpose of the community dialogue and gave some background information on the project. Two assessment team members were available to answer questions and listen to additional feedback as the participants went through the activity.

The five stations for the in-person community dialogue included:

- Station 1: Neighborhood Strengths. Question: what do you love about your neighborhood? What are some things in the neighborhood that help your health and well-being?
- Station 2: Neighborhood challenges. Question: What are some challenges that people in your neighborhood experience that may impact their health and well-being?
- Station 3: Mapping Activity. Participants were provided with stickers and sticky notes to annotate a map. A legend was provided with the meaning of each sticker (e.g. blue cross sticker referred to a place that provides health or social service support).
- Station 4: Prioritization Activity. Participants were provided with five dots that they could use to 'vote' on the top priorities for the potential redevelopment of a brownfield site. The priorities were chosen based on the results from the key informant interviews.

- Participants could provide additional information about their votes, and there was a "other" option for ideas that were not provided by the key informants.
- Station 5: Storytelling. Participants were invited to write stories about their neighborhood. They were provided with a series of prompts to choose from. For example, one prompt directs participants to write about a time when the people in the neighborhood came together for a common purpose.

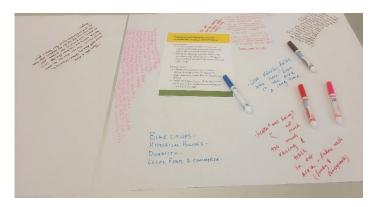


Figure 6. Photo of station within the community dialogue.

A picture of one of the stations in the community dialogue with the instruction page, markers, and some responses from participants.

The virtual community dialogue was designed as a group conversation that followed a similar format to the in-person dialogue. The facilitator, a member of the assessment team, provided a brief presentation with the background and purpose of the dialogue. The group discussed the same questions about neighborhood strengths and challenges as the in-person dialogue. The prioritization activity was completed using an online engagement tool called Slido, which allowed the participants to rank the options and view the results immediately. The virtual community dialogue concluded with the storytelling activity. The virtual community dialogue did not include a mapping activity, but participants were encouraged to share the cross streets or provide specific geographic information about their responses. The assessment team took notes of the answers provided by the participants, who were encouraged to speak or use the chat as they felt most comfortable. The assessment team was prepared to break the participants into two groups according to language preference and host conversations in both Spanish and English. However, all participants noted that they preferred English.

Participant Demographics

A total of 19 community members participated in the neighborhood community dialogues. The following section describes the demographic information collected from the voluntary demographic surveys.

In the community dialogues participants were asked to fill out a demographic survey in which they were asked to describe their role in the community and the perspective they brought to the dialogues. Participants were asked to identify their community role, gender identity, age, race and ethnicity, zip code, and cross streets closest to their residence.

In total, 14 demographic surveys were completed, and the results are shown in Figure 7 below. Note that participants could choose more than one option for most of the questions in order to provide complete information about the identities of the participants who completed the survey, so the percentages do not add up to 100.

Neighborhood CHA Demographic Survey Results		
Race/Ethnicity*		
White	93%	
Hispanic/Latinx	6.6%	
Native American	13.3%	
Black/African American	20%	
Middle Eastern	0%	
South Asian	0%	
Southeast Asian	0%	
East Asian	0%	
Gender*		
Man	46.7%	
Woman	53.3%	
Transgender	ο%	
Gender non-conforming	ο%	
Self-described	0%	
Language*		
English	100%	
Spanish	ο%	
Other	ο%	
Community Dialogue Participant Role*	•	
Community Member	80%	
Community Leader	20%	
Elected Leader	6.7%	
Government Representative	6.7%	
Schools/Education	6.7%	
Faith-based	6.7%	
Law enforcement/Neighborhood Watch	6.7%	
*Note: participants were able to choose more than one answer	6.7%	

*Note: participants were able to choose more than one answer.

Figure 7. 2023 Thrive in the 05 Neighborhood CHA Demographic Survey Results.

Results

The combined results from both community dialogue events are reported below. The themes related to the strengths and challenges questions are noted below, along with some representative quotes from the dialogues.

Question	Themes	Quotes
What do you love about your neighborhood? What are some things in the neighborhood that help your health and well-being?	 Green space. Participants noted that there are amazing parks that are well used and loved. They appreciate recent and upcoming beautification and improvement projects. Access and transportation. Participants noted that there are ample transportation options, including Sun Tran, bus routes, walking and biking options. History and uniqueness of neighborhood. Participants remarked on the unique history that is preserved in the neighborhood. Feeling of community, friendliness, and inclusiveness of the neighborhood. 	 My neighborhood is a village with vernacular architecture. I like to walk and see history. improvements at Park in 2026. I appreciate that my neighborhood is family inclusive and diverse, I see actual kids playing in the park and there are a lot of different kinds of people There is a frequent transit network, bus route, between 6am to 6pm. We love Jacinto Park also and the recent murals added to the streets!
What are some challenges that people in your neighborhood experience that may impact their health and well-being?	 Trash and illegal dumping. Traffic. Cars cut through the neighborhood and create dangerous conditions for pedestrians and bikers. Access to healthy foods requires a vehicle or bus trip. Safety: lack of light, crime, perception of danger in certain areas due to drug use and homelessness. Drug use. Homelessness. Lack of public restrooms leads to public defecation. 	 Trash, trash, trash in alley, streets, yards. Lack of sidewalks, cars cutting thru neighborhood. Homeless in alley behind house. If I didn't have access to a vehicle it would be extraordinarily difficult to access food regularly. I'd like to underscore my worry that there isn't access to restrooms or hygienic resources publicly available. People who don't have a home hangout in the bus stop area. So they may not feel safe using the public transit. There's also been a lot of trash left behind at these bus stops.

Figure 8. Summary results from the community dialogue for neighborhood strengths and challenges activity.

Mapping Activity

The list below summarizes the markers that participants put on the map during the community dialogue. Most of the stickers were placed in the southern part of the neighborhood, clustered mostly in the few blocks along Speedway Blvd. A picture of the completed map and list of locations can be found in Appendix E.

Many of the stickers placed on the map indicated environmental issues, namely trash (8 locations). Participants noted areas where illegal dumping takes place, as well as places where trash piles up and there aren't enough trash cans.

There were also many safety issues noted (6 locations), and the comments indicated that participants were worried about issues such as traffic, pedestrian safety, and crime.

Participants also noted places to find food (3 locations), social services (2 locations), meeting places (4 locations), green spaces (3 locations) and other places of note (3 locations).

Many of the stickers were clustered together. For example, green spaces were noted as meeting places but also locations where there are safety issues. For example, on the corner of 10th and W. Lee there are stickers denoting that the area is a green space, meeting space and place of note, in addition to having safety and environmental concerns. At Speedway and I-10, the participants noted a green space, meeting space, and the presence of trash. This clustering highlights the complexities that must be considered in development of brownfield sites; without appropriate upkeep, community spaces can have unintended consequences.

Storytelling

Participants shared a wide range of stories, many of them centering around times when communities gathered together or commemorating specific historical moments. It is clear from the stories that participants feel a sense of belonging in the neighborhood, despite challenges. Some of the stories are noted below.

Stories About Community

- The o5 has its issues, crime, homeless etc. In spite of that I truly believe people here care for and watch out for each other
- A neighbor who has since passed away, always knew "what was going on". I always felt safe when he was home or around.
- I don't participate in the community but I witness it happening with the kids playing basketball in the park. That's what makes the park important to me. There was an event at Jacinto park to paint murals on the streets. That was the most I've ever felt a sense of community

Stories About Shared History

• Cultural richness: neighbors who have lived in the area for 30+years and are able to share stories-like when their kids learned to bike on our streets.

- Significant event: when [Pima Community College] re-lit the historic Tucson Inn sign
- Every year in Old Pascua (Grant/Oracle), the Easter ceremonies of the Pascua Yaqui people take place. It is a good reminder to the non-Native Americans of Tucson, that the Indigenous people are still around.
- Barrio Anita: in the great depression, neighbors left hard-boiled eggs for homeless people. The eggs were in baskets in the trees.

Stories About Gathering Together

- I love the community bike events and this year we had the event pass by our street it was amazing.
- Cyclovia events have been fun and community building as a rider, a walker or a volunteer.
- Black Lives Matter gathering at Dunbar School

Stories About Conservation and Nature

- Dunbar Spring: every year the neighborhood has a mesquite bean collection and flour is made from it. Also lots of water conservation. Neighborhood books are given away at streetside displays
- Dunbar Spring: trees were planted in the right of way all over the neighborhood courtesy of a TEP grant (I believe). This was YEARS ago.

Figure 9. Sample storytelling prompts and answers provided during the community dialogue.

Most of the stories centered around having an opportunity to gather together and support neighbors. Some individuals also noted that it can be hard to get to know your neighbors, and that it's important to have a space or time for people to gather together.

Prioritization Activity

The results from the prioritization activity are shown below.

Ranking of priorities in-person community dialogue (52 votes)

- 1. Park/green space (10 votes)
- 2. Small scale affordable/low-income housing (10 votes)
- 3. Community garden (6 votes)
- 4. Grocery Store (5 votes)
- 5. Mixed use retail and dense housing (4 votes)
- 6. Community center (2 votes)
- 7. Social service agency (2 votes)
- 8. Something else (greenway, community hub) (13 votes)

Ranking of priorities virtual community dialogue (4 participants)

- 1. Community Center
- 2. Social Services
- 3. Park or Green Space
- 4. Grocery Store
- 5. Community Garden
- 6. Small scale affordable/low-income housing
- 7. Mixed use retail and dense housing

Figure 10. Ranking of prioritizations during the community dialogue by priorities identified by key informants.

The two groups had different results regarding their top priorities. A community center and social service agency were ranked last in the in-person dialogue and ranked as top options in the virtual one.

In the in-person dialogue, 'something else' ranked first in terms of votes. Most of the comments on that option indicated an interest in an outdoor space suitable for walking with safety measures such as shade, lighting, and sidewalks. Another comment in this section indicated the desire for a resource hub.

The comments in the activity also indicate some of the community priorities for redevelopment. For example, participants indicated that instead of a grocery store they would prefer a farmer's market or other local food distribution option. For mixed use retail and dense housing, participants noted that they wanted market rate housing geared towards families and that they opposed student housing.

Participants also got creative in combining several of these options. For example, one participant in the virtual dialogue noted that a park can include a walking path, community garden, covered picnic tables as a gathering area, and even a small resource hub.

SECONDARY DATA

The data included in this section are meant to give readers a sense of the most important health issues in the neighborhood, how they are changing over time and who is most affected, and how the neighborhood compares to Pima County and Arizona as a whole. We relied on publicly available data sources to give us an overview of issues in Thrive in the 05 pertaining to health, environment, safety, economic well-being, and social connectedness. These sources can give us a good starting point, but it is important to understand their limitations. Publicly available data might not capture the entire picture of a neighborhood's health because it may not include specific details or up-to-date information. For example, publicly available data sources are often at least a few years old and meant to provide population-level data. The data may also not be granular enough to show variations within the neighborhood or capture the experiences of diverse groups of people.

Most of our neighborhood-level data were gathered by census tract (see Appendix B for full description of how we chose census tract and aggregated data), which allows us to get localized data, but the census tract do not align perfectly with the neighborhood boundaries.

It is crucial to combine secondary data with insights from primary data collection to get a more comprehensive understanding of the neighborhood's health.

Icons will be used throughout this section to highlight the following:

! Notable Findings: Especially important or interesting statistic

Notable Disparity: Health issues that affect some demographic groups more than others

 $oldsymbol{\wp}$ Missing/Incomplete Data: Health area where there was a lack of publicly available data

It is important to note that racial and ethnic differences in health outcomes, risk factors, or socioeconomic disparities arise from systematic racism and discrimination, limited healthcare access, and other structural factors, and are not the result of inherent characteristics of any racial or ethnic group. Additionally, data in this report may highlight existing disparities without important context (historical, location, etc.). This framing is not meant to place responsibility for health inequities on individual populations or communities.

In this section, we sometimes report results by racial or ethnic categories to highlight these disparities. For example, the terms "Native American," "African American" and "Hispanic/Latino" are used throughout the document and correspond with the race and ethnicity categories used by secondary data sources, which are often limited and only allow for one racial or ethnic identity. While these terms serve as broad categorizations, they can be

limited in capturing the diversity and complexity within these communities. Native American tribes have distinct cultures, languages, and histories, and African Americans have diverse backgrounds and experiences shaped by factors such as immigration, regional differences, and ancestral heritage. Similarly, the Hispanic/Latino label encompasses a wide range of ethnicities, nationalities, and linguistic backgrounds. It is important to recognize the rich diversity and unique identities within these communities, going beyond generalizations based solely on these broad terms.

In the demographic survey used for the community dialogues (see "Participant Demographics"), we used an expanded and more inclusive list of racial and ethnic identities and allowed participants to choose more than one option. This complexity is not available in secondary data sources.

Below are some important definitions to help the reader understand the data presented in this report:

- Age-Adjusted: Many of the rates presented are age-adjusted. This means that the
 rates were calculated to account for the distribution of ages in the data collection
 sample. This makes the rate generalizable to the larger population and comparable to
 different populations with different age distributions.
- **Disparity**: A disparity means a preventable difference or discrepancy in health outcomes between populations. In this section, we will highlight notable health disparities, or difference in health rates or statistics by demographics including race, ethnicity, sex, and socio-economic status.
- **Prevalence**: Prevalence describes the commonness of a disease, or the number of cases of a disease or condition at any given time.
- **Incidence**: Incidence refers to the new occurrence of a case of a specific disease or condition over a specific amount of time.
- **Rate**: A rate is the quantity of something in terms of something else. The majority of rates in this section are reported as "per 100,000 population" or in other words, "for every 100,000 people in a designated area, we can expect this many individuals with the disease or condition". Each rate was calculated from the total number of cases divided by the entire population and multiplied by 100,000.
- **Ratio**: A ratio is a comparison of the quantity of two things. For example, in 2022, 29 primary care areas within Arizona have a population-to-primary care physician ratio that is greater than 5,000:1 (AzMUA report, 2022). This means that for every 5,000 people in the population there was 1 primary care physician in that same population.
- Social Determinants of Health: As defined by the U.S. Department of Health and Human Services, social determinants of health (SDOH) are "the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks." SDOH consists of five domains: economic stability, education access and quality, health care access and quality, neighborhood and built environment, and social and community context."

Below is a list of acronyms that are used throughout this section:

Abbreviation	Name	Abbreviation	Name
ACS	American Community Survey	PCA	Primary Care Area
ADEQ	Arizona Department of Environmental Quality	PDEQ	Pima County Department of Environmental Quality
ADHS	Arizona Department of Health Services	PFAS	per- and polyfluoroalkyl substances
ATSDR	Agency for Toxic Substances and Disease Registry	PM	particulate matter
AzMUA	Arizona Medically Underserved Areas	PPB	Parts per billion
BRFSS	Behavioral Risk Factors Surveillance System	SNAP	Supplemental Nutrition Assistance Program
CDC	Center for Disease	SVI	Social Vulnerability Index
DHHS	Department of Health and Human Services	TCE	Trichloroethylene
EJI	Environmental Justice Index	UNICEF	United Nations International Children's Emergency Fund
EPA	Environmental Protection Agency	VA	Veteran Affairs
FPL	Federal Poverty Level	WHO	World Health Organization

Population Demographics

Population Density

According to the 2021 American Community Survey (ACS 5-Year Estimate) the population of Thrive in the 05 was reported at 10,306. The community of Thrive in the 05 has a population density higher than Pima County and Arizona with a reported population density of 4351 people per square mile. The population density of Pima County and Arizona in 2021 was reported at 115.2 people per square mile and 64.5 people per square mile, respectively.

Age and Sex Distribution

According to 2021 ACS data, Thrive in the 05 residents are slightly more concentrated within the 20-44 and 45-64 age ranges in comparison to Pima County and Arizona residents

Age Distribution (2021)			
Age	Thrive in the 05	Pima County	Arizona
0-14	15.8%	15.8%	18.1%
15-19	6.0%	6.7%	6.6%
20-44	36.6%	33.3%	33.0%
45-64	23.4%	22.8%	23.8%
65-84	11.5%	18.6%	16.5%
85+	0.6%	2.1%	1.8%

Figure 11. Age distribution within Thrive in the 05, Pima County, and Arizona in 20211.

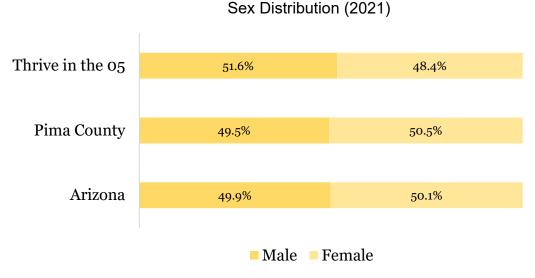


Figure 12. Sex distribution within Thrive in the 05, Pima County, and Arizona in 2021¹

Education Attainment

People with higher levels of education are more likely to live longer and healthier lives. Education quality and access can also lead to greater opportunities for children to graduate high school and attend higher education. Through continued education attainment, children are more likely to obtain better paying jobs and have better access to health insurance. Moreover, families are less likely to live in poverty and deal with daily stress resulting in better physical and mental health².

In 2021, almost 8 in 10 (78%) adults within Thrive in the 05 had obtained a high school degree; however, fewer Thrive in the 05 residents have a postsecondary degree as compared to Pima County and Arizona. Thrive in the 05 has twice as many adults who did not go past the 9th grade and twice as many adults who received some high school education but did not graduate in comparison to Pima County and Arizona (Figure 13).

Education Attainment (2021)				
	Thrive in the 05	Pima County	Arizona	
Less than 9th grade	9.7%	3.9%	5.0%	
Some HS	12.4%	5.6%	7.0%	
HS Graduate	23.6%	22.3%	23.8%	
Some College	29.6%	33.3%	24.9%	
College/Professional Degree	24.6%	34.9%	39.1%	

Figure 13: Education attainment within Thrive in the 05, Pima County, and Arizona in 20211.

Notable finding: The number of adults in Thrive in the 05 who did not obtain a high school degree in 2021 was reported at 22.1%. The number of adults without a high school degree decreased by 3.83% from 2017.

Language

In 2021, more than 4 in 10 (43.7%) of Thrive in the 05 residents speak a language other than English at home, which is significantly higher than the percent of Pima County (27.3%) and Arizona (26.6%) residents. A language barrier can make it more difficult to access services or navigate the health and social service system.

Median Income, Poverty, and Unemployment

In 2021, the median household income within Thrive in the 05 is \$23,728 which is less than half of the median household income of Pima County and Arizona at \$59,000 and \$65,000, respectively. A low household income can make it difficult to cover essential expenses and

meet basic needs. It also makes it difficult to adapt to inflation and increased prices for housing, food, education, and other essentials.

The average household size within Thrive in the 05 in 2021 was estimated to be 2.0 for all households and 3.1 for family households. A household is described as any number of persons who reside in a living unit and a family household is identified as the number of persons who reside in the same living unit and are related by birth, marriage, or adoption. According to the U.S. Department of Health and Human Services, the poverty level in 2023 for a family of four is \$30,0004. In 2023, the sole provider for a family of four with 2 adults and 2 children would need to earn \$38.78 per hour (\$80,663 per year) to make a living wage in Pima County, which is defined as a wage that is high enough to maintain a normal standard of living⁵. The living wage model accounts for geographical differences in costs for food, childcare, health insurance, housing, transportation, and other necessities such as clothing and personal care items along with income and payroll taxes⁵.

In 2021, there were more adults and children living under the Federal Poverty Level (FPL) within Thrive in the 05 than Pima County and Arizona (Figure 15). In 2021, almost 4 in 10 (37.3%) children within Thrive in the 05 were living below the FPL.

The unemployment rate within Thrive in the 05, in 2021, was significantly higher than that of Pima County and Arizona. The unemployment rate in Thrive in the 05 is almost three times the rate in Pima County and more than five times the rate in Arizona.

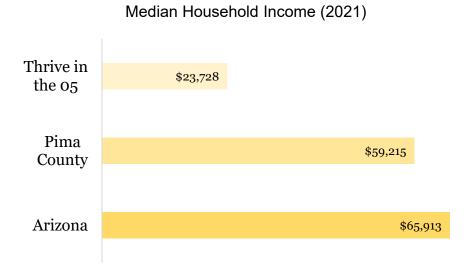


Figure 14. Median household income among residents of Thrive in the 05, Pima County, and Arizona in 2021¹.

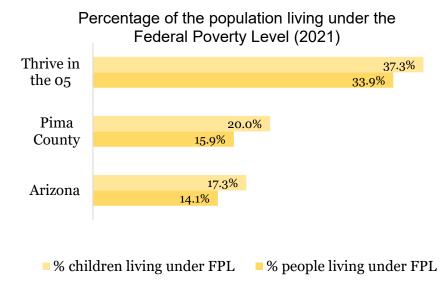


Figure 15. Percent of people and children that live under the Federal Poverty Level within Thrive in the 05, Pima County, and Arizona in 2021¹.

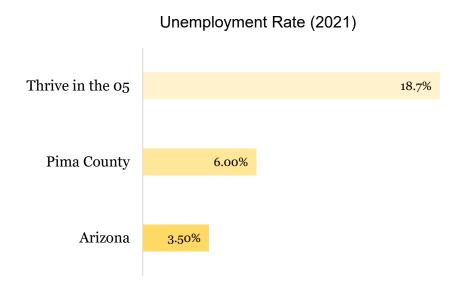


Figure 16. Unemployment rate in the Thrive in the 05, Pima County, and Arizona in 2021¹.

Notable disparity: The unemployment rate within Thrive in the o5 is almost three times that of Pima County and almost five times times that of Arizona.

Veterans

In 2021, fewer than 1 in 20 (3.2%) people within Thrive in the 05 self-identified as veterans, or as persons who served in the active military, naval, or air service, and who was discharged or released therefrom under conditions other than dishonorable⁶. According to the 2021 ACS, 14% of veterans within Thrive in the 05 are unemployed.

Disability

In 2021, 1 in 5 (20.3%) people within Thrive in the 05 identified as living with a disability. The population experiencing a disability within Thrive in the 05 is higher than that of Pima County and Arizona at 14.9% and 13.6%, respectively. The presence of a disability impacts one's life in a multitude of ways. Persons living with disabilities are more likely to experience health inequalities due to stigma, discrimination, poverty, and exclusion. Moreover, both social and physical barriers can disproportionally impact the overall health of individuals living with disabilities, who may experience poorer health and obtain limited resources to improve their quality of life.

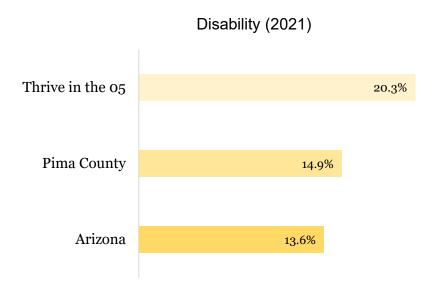


Figure 17. Percent of people living with a disability within Thrive in the 05, Pima County, and Arizona in 2021¹.

Notable finding: 1 in 5 (20.3%) adults within Thrive in the 05 identified living with a disability. This is more than what is present in adults in Pima County and Arizona.

Chronic Diseases

Figure 18 summarizes the rates of chronic disease and chronic disease risk factors in Thrive in the 05 and compares them to the rates in Pima County and Arizona in 2021. The table displays the prevalence rates, which is the percent of the population with that disease or condition. In each case, this prevalence represents the percentage of people over 18 who have been told by their doctor that they have the condition. The residents of Thrive in the 05 have higher rates of diabetes, asthma, high blood pressure, high cholesterol, obesity, smoking and

physical inactivity. The cancer prevalence rate for Thrive in the 05 is lower than Pima County and Arizona.

Chronic diseases are closely intertwined with social determinants of health, and are impacted by factors such as poverty, access to health care, access to healthy foods and access to exercise opportunities. Individuals living in poverty often face limited resources and opportunities, making it challenging to afford and access nutritious food. This contributes to the development of chronic diseases such as obesity, diabetes, and cardiovascular conditions. Additionally, poverty and limited access to healthcare services can hinder preventive measures, early detection, and management of chronic diseases.

Chronic Diseases and Chronic Disease Risk Factors (2021)				
	Thrive in the 05 (%)	Pima County (%)	Arizona (%)	
Cancer	4.1	5.6	5.5	
Diabetes	12.3	9.1	11	
Heart Disease	6.3	5.5	6.3	
Asthma	12.9	10.9	11.1	
High Blood Pressure	30.9	28	30.2	
High Cholesterol	30.4	29	28.6	
Obesity	35.1	29.3	33.3	
Smoking	24.2	15.8	18.9	
Physical Inactivity	32.8	22.7	25.3	

Figure 18. Prevalence rates of chronic diseases and risk factors among adults within Thrive in the 05, Pima County, and Arizona in 20218.

Diabetes

Diabetes is the seventh leading cause of premature death in Arizona and can significantly contribute to the early development of disabilities. Furthermore, it is estimated that 1 in 3 Arizonans have pre-diabetes⁹ which greatly increases the chances of developing diabetes later in life.

Notable disparity: Individuals of Black/African American, Hispanic/Latino, and Native American descent are at a higher risk of developing diabetes compared to other racial and ethnic groups due to historical disparities and discrimination that makes it more difficult for disadvantaged groups to access resources such as healthcare and healthy food options.

Heart Disease

Heart disease is currently the leading cause of death in both men and women of most racial and ethnic backgrounds and was ruled as the cause of death in 1 in every 5 deaths within the United States in 2020¹⁰.

Asthma

Several asthma triggers can pose severe and life-threatening situations. Triggers that can affect a person with asthma on their quality of breathing include allergens, air pollution, and other airborne irritants¹¹.

High Cholesterol

High cholesterol is defined as a total blood cholesterol of > 200 mg/dL. Individuals who are diabetic or obese also tend to have higher blood cholesterol levels. In addition, risk health behaviors such as a food diet of high saturated fats and trans fats, smoking, and being physically inactive can all contribute to an increased risk for high cholesterol¹².

Health Risk Behavior: Smoking

Cigarette smoking is the leading cause of preventable death within the United States¹³. Smoking can lead to poor overall physical health among older adults and result in a greater risk of developing cardiovascular disease, respiratory diseases, and cancer.

Access to Healthcare/Preventative Health

Access to Primary Care

According to the Arizona Medically Underserved Areas Biennial report, released in October 2022 by ADHS, census tracts encompassing Thrive in the 05 were identified as an Arizona medically underserved area (AzMUA). The community of Thrive in the 05 are within the boundaries of the Primary Care Area (PCA) of Tucson Central and was deemed medically underserved by several indicators including: population-to-primary care physician ratio, travel distance to nearest primary care physician, poverty, health insurance status, low birthweight birth rate, late or no prenatal care, infant mortality rate, and presence of populations that experience health disparities¹⁴.

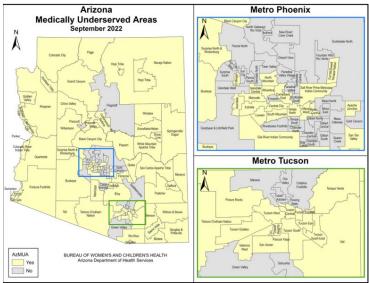


Figure 19. Map of Arizona Medically Underserved Areas in 2022 (MUAs are indicated in yellow)¹⁴.

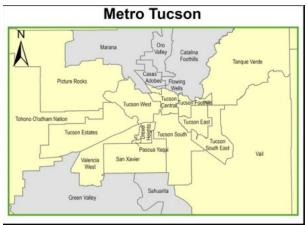


Figure 20. Map of Arizona Medically Underserved Areas in 2021, the boundaries of Thrive in the 05 fall within AzMUA Tucson Central (AzMUAS indicated in yellow)¹⁴.

Lack of Medical Insurance

According to BRFSS 2020, 26.3% of the population over 18 within Thrive in the 05 lack medical insurance, as compared to 17.7% in Pima County and 20.6% in Arizona. Lack of medical insurance can decrease the likelihood of an individual seeking primary medical and dental care. Most individuals who are uninsured come from low-income families and people of color with majority of the populations reporting the inability to afford proper health insurance coverage¹⁶.

Rate of Medically Uninsured Population (2020)

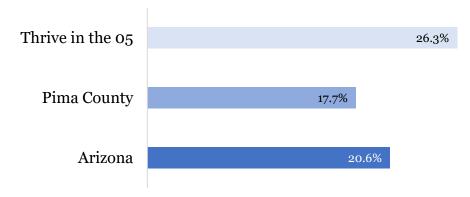


Figure 21. Percent of medically uninsured population within Thrive in the 05, Pima County, and Arizona in 2020¹.

Native American and Hispanic/Latino individuals have the lowest percent of insurance coverage compared to other racial or ethnic groups.

Public Health Insurance Coverage

Population Enrolled in Public Health Insurance (2021)				
	Thrive in the 05 (%) Pima County (%) Arizona (%)			
Public Health Insurance	54.4	43.3	39.0	
Medicare alone	4.9	8.2	7.3	
Medicaid alone	34.8	16.8	15.0	
VA coverage	0.6	0.5	0.3	

Figure 22: Percent of the population covered by a specific public health insurance program in Thrive in the 05, Pima County, and Arizona in 2021¹.

Public Health Insurance Coverage by Age Categories (2021)			
Age	Thrive in the 05 (%)	Pima County (%)	Arizona (%)
under 6	90.9	43.2	42.2
6-18	72.5	40.4	37.6
19-25	42.4	22.7	20.7
26-34	34.0	25.7	21.5
35-44	32.9	24.3	19.6
45-54	45.4	22.7	18.6
55-64	42.3	25.9	22.9
65-74	92.6	95.9	95.0
75 and over	100.0	99.0	98.5

Figure 23. Percent of the population covered by public health insurance by age categories in Thrive in the 05, Pima County, and Arizona in 2021¹.

Public health insurance programs provide free and affordable plans for low-income persons, families and children, pregnant women, the elderly, and people living with disabilities. Public health insurance plans are funded by government and include Medicare, Medicaid, the Children's Health Insurance Program (CHIP), VA coverage, state-specific plans, and Indian Health Services (IHS)¹⁶.

Within Thrive in the o5, there is a higher percent of the population that depends on public health insurance, Medicaid, and VA coverage when compared to Pima County and Arizona. Medicare coverage had a lower percentage of coverage within Thrive in the o5 as compared to Pima County and Arizona.

Children and the elderly have the greatest percentage of coverage within public health insurance programs throughout all geographic areas that were calculated. However, a higher percentage of children within Thrive in the 05 are covered by public health insurance programs than for Pima County and Arizona. All but one age demographic categories, 65–74-year-olds, within Thrive in the 05 have a higher rate of coverage through public health insurance compared to Pima County and Arizona.

Private Health Insurance

In 2021, almost 2 in 10 (19.3%) adults within Thrive in the 05 reported obtaining health insurance from their employer. Employer-based health insurance coverage rate within Thrive in the 05 is low compared to Pima County and Arizona at 39.3% and 42.4%, respectively.

In 2021, the direct-purchase private health insurance coverage rate within Thrive in the 05 (4.0%) was also lower than in Pima County and Arizona at 4.9% and 5.3%, respectively.

Annual Check Up

In 2021l, within Thrive in the 05 almost 7 in 10 (69.8%) adults reported visiting a doctor for a routine checkup within the last 12 months, which is similar to rates for Pima County and Arizona at 71.3% AND 68.3%, respectively. The rate used to describe the BRFSS 2020¹⁵ analysis did not include reports for a general physical exam, or an exam based on a specific illness or injury. Adults that routinely visit a doctor's office tend to also be able to easily access and afford their prescription medication through their health insurance policy plan.

Dental Visit

In 2020, 4 in 10 (40.7%) adults over the age of 18 reported visiting a dentist or dental clinic within the last year. This is lower than the rate of adults in Pima County and Arizona with 58% and 54.8% of adults that reported having had visited a dentist within the last year. Regular visits to an oral care professional such as a dentist can prevent the development of oral diseases and allow for continued use of teeth while aging.

Cancer Screenings

Preventative Health Care: Cancer Screening (2021)				
Thrive in the 05 (%) Pima County (%) Arizona (%)				
Mammography	73.6	70.9	64.4	
Cervical Cancer Screening	70.9	79.9	78.1	
Colorectal Cancer Screening	58.6	68.6	61.3	

Figure 24. Prevalence rates of certain cancer screenings among adults within Thrive in the 05, Pima County, and Arizona in 20218.

Figure 24 summarized the rate of cancer screening for residents of Thrive in the 05 and compares it to the rate of Pima County and Arizona in 2021. Residents of Thrive in the 05 have a higher rate of female breast cancer screening but lower rates of cervical and colorectal cancer screening compared to residents of Pima County and Arizona.

Behavioral and Mental Health

Alcohol Use: Binge Drinking

Excessive alcohol use, also called binge drinking, is one of the leading causes of preventable death among adults and can reduce the average age of death by 26 years among those whose death has been associated with excessive drinking¹⁷. Binge drinking is defined as having had 4 or more drinks for women and 5 or more drinks for men on an occasion. In Thrive in the 05, 15.9% of adults over the age of 18 reported having participated in binge drinking in the last 30 days. Chronic health effects from continued excessive alcohol consumption can result in the development of alcohol use disorder and lead to problems with learning, memory, and mental health. In addition, alcohol consumption increases the risk of injury in association with motor vehicle crashes, acts of violence, and falls.

Mental Health: Depression

Depression, also known as major depression disorder or clinical depression, is a type of mood disorder that can affect the way a person interacts with life activities such as sleeping, eating, and working and can further affect one's thoughts, emotions, and actions¹⁸. Almost 1 in 4 (24.1%) adults within Thrive in the 05 reported being told by a healthcare professional that they have a depressive disorder.

Suicide

In 2022, the suicide mortality rate within Pima County was 23.2 deaths per 100,000 population. The suicide mortality rate within Arizona was reported as 21.9 deaths per 100,000 population¹⁹. To maintain patient privacy the suicide mortality rate within Thrive in

the 05 could not be determined. The rate of suicide within Pima County rose by 8.5% from 2021, with more males being affected than females.

Missing/Incomplete data: Secondary data used within this report accessed publicly available data for this metric at the county level. (See reference in Appendix A). This data may not accurately represent the most accurate data as counties with 10 cases or fewer were not reported and the suicide mortality rate was unavailable.

Drug Overdose

Drug overdose is a current epidemic throughout the United States and Arizona. In 2022, the drug overdose death rate within Pima County was reported at 46.8 deaths per 100,000 population. The data needed to specifically locate within which neighborhood boundaries the drug overdose occurred were not reported in order to protect the privacy of the residents.

The non-fatal opioid overdose rate was slightly higher in Pima County with a rate of 57.4 non-fatal overdoses per 100,000 population as compared to 45.4 non-fatal overdoses per 100,000 population in Arizona²⁰. Moreover, within Pima County between the years of 2020-2021 hospital charges for opioid related hospitalizations cost an estimated \$700 million²¹.

Missing/Incomplete data: Secondary data within this report accessed publicly available data for this metric at the county level. (See reference in Appendix A). This data may not accurately represent the most accurate data as counties with 10 cases or fewer were not reported and the drug overdose death rate may not be available.

Environmental Health

Environmental Justice Index (EJI)

The Environmental Justice Index, also known as the Environmental Justice Rank, is a ranking system created with information from the U.S. Census Bureau, the U.S. Environmental Protection Agency, the U.S. Mine Safety and Health Administration, and the U.S. Centers for Disease Control and Prevention and cumulates a ranking based on environmental injustice factors on human health. EJI factors include environmental, social, and health factors that affect the environment and human health²².

The EJI rank ranges from 0 to 1, with zero being the best score and one being the worst. The score in Thrive in the 05 is 0.64, which means that the census tracts within the neighborhood boundary fare worse than 64% of the census tracts in the nation²³.

Air Quality

Air Quality is measured through various forms of pollutant concentrations and by the duration of time in which the pollutant is at a specific threshold within the environment. Monitors are used to collect information and report the hourly concentrations of their dictated air pollutant and thus some monitors do not report specific air pollutants concentration measurements. Only information on PM 2.5 level and PM 10 were available due to the type of air quality monitor that is located within the neighborhood boundaries. Information on ozone, nitrogen oxide species (NO_x), and sulfur dioxide (SO_2) was not reported.

Missing/Incomplete data: Specific air pollutant concentrations were unavailable due to the types of monitors that are present within the neighborhood boundaries. Data on concentration levels and days where levels met good, moderate and exceedance threshold levels were not available for ozone, nitrogen oxide species, and sulfur dioxide.

PM 2.5

Particulate Matter 2.5, or PM 2.5, encompasses inhalable particles with a diameter of 2.5 micrometers or smaller. Sources of PM 2.5 vary but can include construction sites, unpaved roads, fires, power plants, and vehicles. PM 2.5, in general, presents greater risk to human health than larger particles, as they are small enough to penetrate the lungs and enter the bloodstream²⁴.

As of January 2023, the EPA announced a proposed change in PM2.5 concentration threshold levels. At the time of this report, PM2.5 exceedance levels were defined as more than 35 $\mu g/m^3$ over a 24-hours, a moderate level as 12.0 $\mu g/m^3$ to 35 $\mu g/m^3$, and good levels below 12.0 $\mu g/m^3$ over 24-hr time frame²⁵.

The Geronimo air quality monitor reported o days of PM 2.5 exceedance within Thrive in the o5 and aggregate Tucson air quality monitors reported o days of PM 10 threshold exceedance²⁷.

Thrive in the 05 PM 2.5 2022

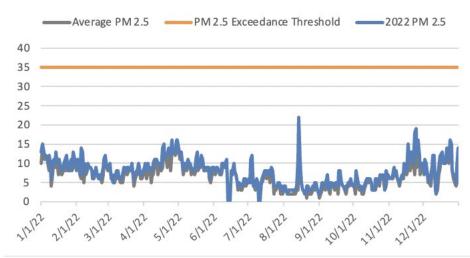


Figure 25. Annual particulate matter 2.5 in ug/m³ at Geronimo air quality station in 2022²⁷.

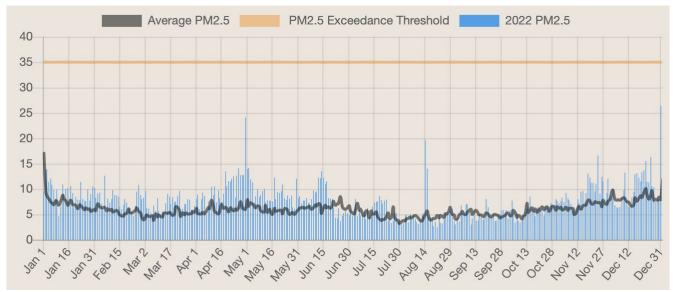


Figure 26: Annual Tucson particulate matter 2.5 level in ug/m³ in 202228.

	Good Days	Moderate Days	Exceedance days
Number of Days	332	33	0

Figure 27. Table for the number of days in Tucson in 2022 when particulate matter 2.5 levels were good, moderate, and exceeded threshold 28 .

PM 10

Particulate matter 10, or PM10, are inhalable particles that have a diameter of 10 micrometers or smaller. Particulate matter derives from similar sources as PM 2.5 but also includes dust from construction sites, landfills, wildfires, industrial sources, pollen, and fragments of certain bacteria. PM 10, through active exposure, can lead to the development of trouble breathing, lung and throat irritation, eye irritation, and even lung cancer²⁴.

The Geronimo air quality monitor reported 1 day of PM 10 threshold exceedance within Thrive in the 05 and an aggregate of Tucson air quality monitors reported 2 days of PM 10 threshold exceedance²⁶.

Thrive in the 05 PM10 2022

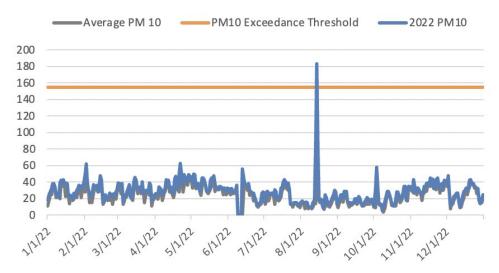


Figure 28. Annual Thrive in the 05 PM 10 concentrations in ug/m³ in 2022²⁷.

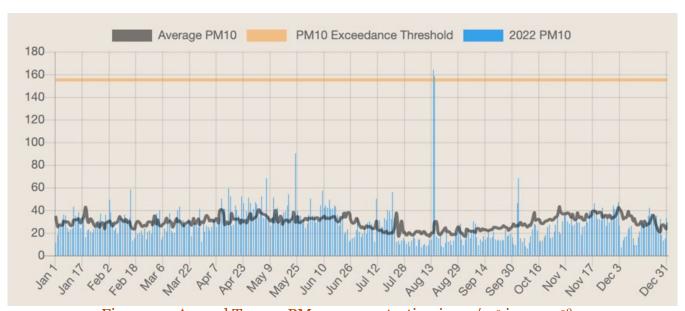


Figure 29. Annual Tucson PM 10 concentration in ug/m³ in 2022²⁸.

	Good Days	Moderate Days	Exceedance days
Number of Days	356	7	2

Figure 30. Number of days in Tucson PM 10 levels were good, moderate, and exceeded threshold levels in 2022²⁸.

Ground Pollution

Within the neighborhood boundaries of Thrive in the 05, there are no known or reported Resource Conservated and Recovery Act (RCRA) hazardous waste sites or hazardous waste-Large Quantity Generators. The RCRA hazardous sites are reported to the Arizona Department of Environmental Quality (ADEQ), and none were listed in 2022.³⁰

Water Pollution

In 2022, drinking water quality within Thrive in the 05 met EPA standards, and no contaminants have been reported to ADEQ for any of the drinking water sources²⁹.

Groundwater Pollution

Within the neighborhood boundaries of Thrive in the 05, there are 2 known groundwater pollution sites²⁹. Both sites were affected by leaking underground storage tanks that released petroleum into groundwater media within the neighborhood boundary, however both have been identified as remedied and are reviewed periodically on their status³⁰.

Leaking Underground Storage Tanks

Leaking underground storage tanks are locations where certain contaminants have been released from underground storage tanks into the environment. Such contaminant releases can pose a danger to the environment and/or human health. At the time of this report, the ADEQ underground storage tank database identified 2 leaking underground storage tank sites within the neighborhood boundaries of Thrive in the 05³⁰. Leaking underground storage tanks either are or have leaked in the past and under periodic monitoring.

The first known leaking UST is noted to be within a Circle K gas station along the corners of N. Flowing Wells Rd. and Miracle Mile. This known leaking UST was known to potentially infect groundwater through the release of petroleum but has since been remedied and is under periodic check-ins. The second leaking UST is a Chevron gas station on the corner of Drachman St. and N. Stone Ave and affected groundwater through the introduction of petroleum. Under the ADEQ dashboard both sites are no longer releasing petroleum into the environment at the time of this report³⁰.

Economic Well-Being

SNAP Benefits

Supplemental Nutrition Assistance Program, more commonly known as SNAP, is a government assistance program provided by the U.S Department of Agriculture. Individuals and families who are enrolled in the program receive nutrition supplemental assistance to aid in food budget needs to families to purchase healthy foods.

According to the 2021 ACS, 32.8% of households within Thrive in the 05 reported having received SNAP benefits in the last 12 months. This metric is twice the prevalence in comparison to Pima County and Arizona with 12.9% of households and 11.2% respectively receiving SNAP benefits.

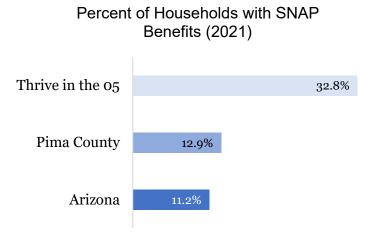


Figure 31. Percent of households who reported receiving Supplement Nutrition Assistance Program benefits in Thrive in the 05, Pima County, and Arizona in 2021¹.

Notable Finding: A much larger percent of families in Thrive in the 05 receive SNAP benefits as compared to Pima County and Arizona as a whole.

Housing Affordability

In 2021, almost 3 in 10 (29.1%) households in Thrive in the 05 reported owning the property in which they resided. The rate of owner-occupied housing within Thrive in the 05 is low compared to Pima County and Arizona with 6 in 10 households reported owning the property in which they reside.

Cost burden housing is when more than 30% of the income is spent on housing, which reduces one's ability to pay for everyday expenses such as food and transportation. Within Thrive in the 05, nearly 5 in 10 (46.3%) households reported spending more than 30% of their monthly gross income on housing costs. The rate is higher than that of Pima County (30%). And Arizona (29.6%).

The average property value within Thrive in the 05 is lower than that of Pima County and Arizona with an estimated property valued at \$143,000. Property values are dictated by various factors including neighborhood competition, location, home size and usability of the space, the local market, and economic indicators.

Percent of Household with Housing Payment Above 30% of Monthly Income (2021)

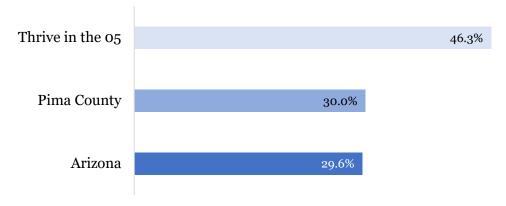


Figure 32. Percent of households that reported spending more than 30% of monthly gross income on housing in Thrive in the 05, Pima County, and Arizona in 2021¹.

Notable Finding: Nearly 5 half (46.3%) of households within Thrive in the 05 spend 30% or more of their monthly gross income on housing.

Income Inequality

Gini Index Score	Interpretation	
< 0.2	Perfect income equality	
0.2 - 0.3	Relative equality	
0.3 - 0.4	Relatively reasonable income gap	
0.4-0.5	High income disparity	
> 0.5	Severe income disparity	

Figure 33. Gini Index Rankings³².

Income inequality is the extent to which income is distributed unevenly among a population. The Gini index, also known as the Gini coefficient, is a common value indicator used in economics to determine the measure of distribution of income across a population. The Gini index ranges between 0 and 1, with zero indicating perfect equality and one indicating perfect inequality.

Thrive in the 05 has a Gini index of 0.43. According to UNICEF, this ranking qualifies Thrive in the 05 as a community with high income disparity¹.

Safety and Social Connectedness

	Violent	and Proper	ty Crime R	ates (2022)		
	No. of	Calculated	No. of	Calculated		
	reported	Crime	reported	Crime	No. of	Calculated
	crime in	Rate in	crime in	Rate in	Reported	Crime
	Thrive	Thrive in	Pima	Pima	Crime in	Rate in
	in the 05	the 05*	County	County**	Arizona	Arizona**
Homicide Mortality						
Rate	2	19.2	22	2.08	496	6.7
Aggravated Assault						
Rate	91	875.5	611	57.8	19,640	266.9
Robbery-related						
Crime Rate	20	192.4	100	9.5	4,969	672.2
Burglary Rate	107	1029.4	1199	113.4	17,889	243.1
Larceny-Theft						
Rate	213	2049.3	5650	534.2	103,142	1401.5
Arson Rate	9	86.6	46	4.3	752	10.2
Motor Vehicle						
Theft Rate	87	837.0	612	57.9	16,394	222.8

^{*}Rates calculated by methodology on Appendix B with data from Tucson Police Data and Analysis33.

Figure 34. Violent and property crime events and crime rates per 100,000 in Thrive in the 05, Pima County, and Arizona in 2022.

Violent Crimes

Violent crimes are classified to include events where a victim is harmed by or threatened with violence³⁵. Crimes within this definition include incidence of homicide, aggravated assault, and robbery-related crime. The rates for homicide, aggravated assault, and robbery are all higher compared to the rates in Pima County.

Property Crimes

Property crimes are classified as crimes in which a victim's property is either stolen or destroyed without the use or threat of force against the victim. These crimes include burglary, larceny, arson, and motor vehicle theft. All property crimes within Thrive in the 05 were found to have a higher crime-incidence rate in comparison to Pima County and Arizona.

Transportation and Walkability

Pedestrian-Vehicle Collision

In 2022, there were ten reported pedestrian-vehicle collisions in Thrive in the 05. In addition, there were 5 reported incidents of pedestrian fatalities in which a pedestrian was killed during a collision with a vehicle in 2022³⁶.

^{**}Rates calculated by methodology on Appendix B with data from Arizona Crime Statistics Report³⁴.

Notable finding: In 2022, within Thrive in the 05 there were 10 reported pedestrian-vehicle collisions in which half of them resulted in the pedestrian's death.

Walkability

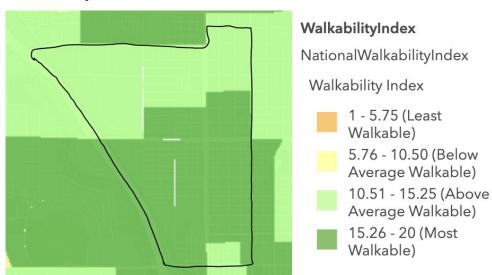


Figure 35. National walkability index ranking of Thrive in the 05 blocks in 202137.

The national walkability index provides national data on specific geographical block groups within a city. These block groups are then ranked on their relative ability to be walkable. Factors included in the process of determining a block group score include intersection density, proximity to transit stops, and the diversity of lands (employment and household mix). A neighborhood that is deemed more walkable tend to have stores, jobs, and other services within walking distance and promotes a more active lifestyle. Lifestyle changes such as walking around the neighborhood can improve human and environmental health by eliminating the number of cars on the road, removing additional air pollutants, and reducing obesity and diabetes rates among adults.

In 2021, throughout Thrive in the 05, the score for walkability ranged between 10.51 and 20, indicating that the neighborhood is considered above average in terms of walkability. However, it is important to note that the score of walkability does not consider individuals who must utilize wheelchairs and other forms of transportation besides vehicle use³⁷. It also does not consider tree cover which is an important safety consideration to avoid heat-related illness and make walking possible in summer months.

Tucson Tree Equity

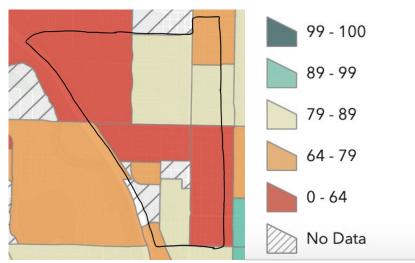


Figure 36. Tree equity scores for Thrive in the 05 in 2020³⁸.

Tree coverage can encourage walking and other outdoor recreation, especially in hot climates like that of Southern Arizona. Increased tree coverage can provide the coverage necessary to protect pedestrians from continued sun exposure, reduce heat island effects, and aide in reducing carbon emissions. Generally, higher income areas have better tree coverage.

Tree Equity Scores were reported for neighborhoods throughout Tucson by the American Forests Dashboard (2020). Data used to score each area were derived from factors based on canopy cover, climate, population demographics, and socioeconomic data. Tree equity scores range from 0-100 with lower scores being assigned to neighborhoods with the greatest need for improved tree coverage.

All Thrive in the 05 neighborhoods were identified as high priority and moderate priority, signifying the need for additional canopy coverage. The neighborhood of San Ignacio Yaqui within Thrive in the 05 received the lowest tree equity score of 50 with an existing tree canopy coverage of 5% within the boundaries. The neighborhoods of Flowing Wells, Miracle Manor, Balboa Heights, Coronado Heights, Bronx Park, Barrio Blue Moon and Adelanto reported an existing tree canopy coverage also less than 10%38.

Notable finding: All areas within the neighborhood boundaries of Thrive in the 05 fall within the high priority and moderate priority tree equity need and report a canopy coverage below 10% of the neighborhood's total area.

Social Vulnerability

Social Vulnerability Index

Social Vulnerability Index Ranking (2020)		
SVI Categories	Thrive in the 05	
Social Vulnerability Index Score	0.9752	
Socioeconomic Vulnerability Score	0.9741	
Household Characteristics Vulnerability Score	0.7615	
Housing Type and Transportation Vulnerability		
Score	0.9702	

Figure 37. Social vulnerability index rankings and SVI subcategory scores of Thrive in the 05^{39} .

Social vulnerability relates to potential negative effects on communities caused by external stressors. Such stressors may include natural or human-caused disasters or disease outbreaks⁴⁰.

The SVI score is determined based on 16 U.S. census variables including variables related to population demographics, population economic stability, population housing type and transportation, and population household characteristics.

The SVI rankings are divided by census tracts and range between 0 and 1, with 0 indicating least socially vulnerable and 1 indicating the most socially vulnerable. An SVI score for census tracts within the neighborhood boundaries of Thrive in the 05 were reported at 0.9752, indicating a very high social vulnerability as compared with other census tracts within Pima County.

APPENDIX A: REFERENCES AND DATA SOURCES

The following list of references corresponds to the superscripts noted throughout the CHA document. For example, superscript 1 refers to the first citation in the list.

- 1. American Community Survey Estimates. U.S. Census Bureau. Published September 15, 2022. https://data.census.gov/advanced
- 2. Office of Disease Prevention and Health Promotion. Education Access and Quality Healthy People 2030 | health.gov. health.gov. Published 2020. https://health.gov/healthypeople/objectives-and-data/browse-objectives/education-access-and-quality
- 3. Hansen J. Amy. *Undocumented immigrants face barriers that can affect end-of-life care, Stanford researchers suggest*, SCOPE by Stanford Medicine. Published February 26, 2018. https://scopeblog.stanford.edu/2018/02/26/new-paper-explores-health-care-barriers-for-undocumented-immigrants/
- 4. Office of the Assistant Secretary for Planning and Evaluation. Poverty Guidelines. ASPE. Published January 12, 2022. https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines
- 5. Living Wage Calculator Living Wage Calculation for Pima County, Arizona. livingwage.mit.edu. Accessed June 1, 2023. https://livingwage.mit.edu/counties/04019
- 6. Determining Veteran Status. U.S. Department of Veteran Affairs. Published October 2019. Accessed May 22, 2023. https://www.va.gov/OSDBU/docs/Determining-Veteran-Status.pdf
- 7. World Health Organization. Disability and health. Who.int. Published March 7, 2023. https://www.who.int/news-room/fact-sheets/detail/disability-and-health
- 8. CDC. PLACES: Local Data for Better Health. Centers for Disease Control and Prevention. Published March 8, 2021. https://www.cdc.gov/places/index.html
- 9. *Arizona Diabetes Action Plan and Report.*; 2023. https://www.azdhs.gov/documents/prevention/tobacco-chronic-disease/diabetes/reports-data/diabetes-action-plan-report-2023.pdf?v=20230109
- 10. CDC. Heart Disease Facts. Centers for Disease Control and Prevention. Published December 2, 2019.
 https://www.cdc.gov/heartdisease/facts.htm#:~:text=Heart%20disease%20is%20the%20leading
- 11. Asthma in Children. Asthma & Allergy Foundation of America. Accessed May 12, 2023. https://aafa.org/asthma/living-with-asthma/asthma-in-children/?gclid=CjoKCQjw6cKiBhD5ARIsAKXUdyYFAeEjKF1fCvoCg1F7eZ57eeoo2EPP9oaVSsaA5f-jzglLG81liSsaAt3oEALwwcB
- 12. CDC. Knowing Your Risk: High Cholesterol. Centers for Disease Control and Prevention. Published February 6, 2019. https://www.cdc.gov/cholesterol/risk factors.htm
- 13. Centers for Disease Control and Prevention. CDC Fact Sheet Health Effects of Cigarette Smoking Smoking & Tobacco Use. Smoking and Tobacco Use. Published October 29, 2021. https://www.cdc.gov/tobacco/data statistics/fact sheets/health effects/effects cig smokin g/index.htm

- 14. Arizona Medically Underserved Areas, Biennial Report. Arizona Department of Health Services. Published October 2022. Accessed April 2023.

 https://www.azdhs.gov/documents/prevention/health-systems-development/data-reports-maps/reports/azmua-biennial-report.pdf
- 15. CDC BRFSS. CDC. Published 2019. https://www.cdc.gov/brfss/index.html
- 16. Tolbert J, Orgera K, Damico A. Key Facts about the Uninsured Population. Kaiser Family Foundation. Published December 19, 2022. https://www.kff.org/uninsured/issue-brief/key-facts-about-the-uninsured-population/
- 17. Excessive Alcohol Use. CDC. Published 2019. https://www.cdc.gov/chronicdisease/resources/publications/factsheets/alcohol.htm
- 18. Depression. National Institute of Mental Health. Published April 2023. https://www.nimh.nih.gov/health/topics/depression
- 19. Suicide Prevention. Arizona Department of Health Services. Accessed June 13, 2023. https://www.azdhs.gov/prevention/tobacco-chronic-disease/suicide-prevention/index.php#data-and-reports
- 20. Opioid Prevention. Arizona Department of Health Services. https://www.azdhs.gov/opioid/#dashboards-nonfatal-overdoses
- 21. Opioid Overdoses Surveillance Report, Arizona, 2020-2021. https://www.azdhs.gov/opioid/documents/opioid-surveillance-report-2020-2021.pdf
- 22. Environmental Justice Index (EJI) Explorer. Agency for Toxic Substances and Disease Registry. https://onemap.cdc.gov/portal/apps/sites/#/eji-explorer
- 23. Environmental Justice Index (EJI). Centers for Disease Control and Prevention. Published August 10, 2022. https://www.atsdr.cdc.gov/placeandhealth/eji/index.html
- 24. Particulate Matter (PM) Basics. US EPA. Published 2018. https://www.epa.gov/pm-pollution/particulate-matter-pm-basics
- 25. Proposed Decision for the Reconsideration of the National Ambient Air Quality Standards for Particulate Matter (PM). www.epa.gov. Published December 8, 2022. Accessed June 5, 2023. https://www.epa.gov/pm-pollution/proposed-decision-reconsideration-national-ambient-air-quality-standards-particulate#:~:text=On%2oJanuary%2o6%2C%2o2o23%2C%2oafter
- 26. NAAQS Table. US EPA. Published December 11, 2018. https://www.epa.gov/criteria-air-pollutants/naaqs-table
- 27. Pima County Air Quality. envista.pima.gov. Accessed June 13, 2023. http://envista.pima.gov/
- 28. Air Quality Year-to-Date Report | ADEQ Arizona Department of Environmental Quality. azdeq.gov. Accessed April 13, 2023. https://azdeq.gov/aq/ytd?year=2022&pollutant=all&location=tucson&type=aqi#mtop
- 29. AZ Counties Demographic and Environmental Dashboard. Arizona Department of Environmental Quality. https://adeq.maps.arcgis.com/apps/MapSeries/index.html?appid=ccoda69679c74b8ca25125c15651805a
- 30. Arizona Department of Environmental Quality Maps. ArcGIS. Published in 2022. Accessed June 13, 2023.

- https://adeq.maps.arcgis.com/apps/webappviewer/index.html?id=e224fc0a96de4bcda4boe37af3a4daec&showLayers=Counties;UST%20-%20Tanks;UST%20-%20Releases
- 31. USDA ERS Supplemental Nutrition Assistance Program (SNAP). www.ers.usda.gov. https://www.ers.usda.gov/topics/food-nutrition-assistance/supplemental-nutrition-assistance-program-snap/
- 32. Figure 2.7 National Gini index, 2003–2017. www.unicef.cn. Published 2018. https://www.unicef.cn/en/figure-27-national-gini-index-20032017
- 33. Reported Crime Rates. Tucson Police Data & Analysis. https://qlikapps.tucsonaz.gov/sense/app/f9c063fe-fb92-4b66-9b6a-75a484285ef8/sheet/c97fdcfe-caa6-4d65-8458-259be6c0c154/state/analysis
- 34. Arizona Crime Statistics. Arizona Department of Public Safety. https://azcrimestatistics.azdps.gov/tops
- 35. Violent Crime. Bureau of Justice Statistics. https://bjs.ojp.gov/topics/crime/violent-crime
- 36. Serious accidents in Tucson 2022. Google My Maps. Accessed April 05, 2023. https://www.google.com/maps/d/viewer?mid=1Fe_myGbcoOmVTRX_CaA3nAQHtk WYGn5L&hl=en_US&ll=32.22791986987941%2C-110.92752169101563&z=10
- 37. National Walkability Index. Environmental Protection Agency.

 https://epa.maps.arcgis.com/home/webmap/viewer.html?webmap=f16f5e2f84884b93b38ocfd4be9fobba
- 38. Tree Equity Dashboard. City of Tucson, Climate Action Hub. https://climateaction.tucsonaz.gov/pages/milliontrees-tree-equity
- 39. CDC/ATSDR Social Vulnerability Index Dashboard. Agency for Toxic Substances and Disease Registry. https://www.atsdr.cdc.gov/placeandhealth/svi/interactive_map.html
- 40. CDC/ATSDR Social Vulnerability Index. Agency for Toxic Substances and Disease Registry. https://www.atsdr.cdc.gov/placeandhealth/svi/index.html

APPENDIX B: DATA ANALYSIS

Census Tracts

The following outlines the census tracts that were used to identify the secondary data that was aggregated in this report. With respect to reporting appropriate community health indicators, various census tracts were used to report the health status for the Thrive in the 05 community, within Tucson Arizona. These census tracts were derived from a report from Census Tracts for Pima County -- Arizona.

Within the Thrive in the 05, census tracts 13.02, 13.03, and 13.04 were used. These census tracts were selected in accordance with the neighborhood boundaries established by the City of Tucson, with Miracle Mile to the north and Speedway Boulevard to the south. In addition, interstate-10 was used as the western boundary and N. Stone Avenue as the eastern boundary. The selected census tracts all followed these boundaries and were therefore deemed appropriate.

Aggregated Information

I. ACS

a. To properly determine population demographics and additional health indicators the percentage of the population who self-reported to fall within the categories that were asked were pulled by census tracts for each community. The average of the percentages that were reported for each census tract were calculated and reported after direct standardization was applied.

II. CDC Places

- a. To properly determine health indicators within each neighborhood, prevalence rates from CDC places were pulled by census tracts for each community. To properly aggregate the census tract data for each neighborhood direct standardization was used to compare prevalence rates and aggregate an average within the census tracts of each community.
- b. The usage of direct standardization required a known prevalence rate which was determined for each census tract on CDC places. Given that the population of each census tract was known, we calculated the number of events that occurred and created a table where each stratum was a census tract (rows) followed by population, events, known prevalence, standard population, and expected events (columns).
- c. To determine the expected events, the known rate (prevalence of each stratum) was multiplied by the standard population. The expected events were rounded up to the nearest whole number.
- d. This method of standardizing allowed us to compare each census tract and their expected cases, given that they had the same population distribution. From the completed table, an adjusted rate was calculated by dividing the sum of expected events of the strata divided by the sum of the standard population.

e. The adjusted prevalence rate was reported for each health indicator within the report.

III. Tucson Police Data and Analysis

- a. To properly determine the crime rates for Thrive in the 05, reported crimes from 2022 were identified within the Tucson Police Reported Crimes. At the time of writing this report, a map of Tucson displayed the known locations for a reported crime which were broken down by type of crime (i.e., homicides, aggravated assault, burglary, etc.). The neighborhood boundaries that were discussed earlier in Appendix B were used to determine the number of events that were present within Thrive in the 05.
- b. After the total number of events had been identified. The number of events were divided by the total population within the specific geographic location multiplied by the length of time. Therefore, the incidence rates of each crime rate were calculated as previously stated and reported in Figure 34.

IV. Arizona Crime Statistics Report

a. To properly determine the crime rates within Pima County and Arizona, the Arizona Crime Statistics Report was used to determine the total number of events for each crime. The events (total number of times a specific crime was reported within a specific geographical boundary) were then divided by the total population of the specific geographic location multiplied by the length of time in which the number events were calculated (e.g., 1 year). A crime incidence rate was then reported and adjusted per population of 100,000 people in order to compare to other geographic locations.

APPENDIX C: KI INTERVIEW GUIDE

All KIs will be asked ten (10) questions. Nine (nine) questions are universal, for all KIs participants (Q1-Q6a and G7-Q10). With question 6b only being asked towards key informants associated with law enforcement or neighborhood watch affiliation.

Target	Question(s) and Prompt(s)
	1. Could you tell us a bit about yourself, including:
	Any identities you'd like to share with us?
	Any role(s) you have in your community?
	What services you provide for your community?
	2. Can you tell me about your neighborhood? What do you love about it? What are some challenges that you or your neighbors experience?
	Prompt:
	What are some positive aspects of the neighborhoods?
	 What are some challenges experienced by people in the neighborhood?
General/All	3. What are some resources in this neighborhood that help people get and stay healthy? Think about resources, services, programs, etc., that support:
	Physical health or exercise?
	Mental health?
	Health for specific populations (infants, youth, senior, minority populations, etc.)
	Resiliency and the ability to overcome hardships.
	Prompt:
	What are some strengths or assets in your community?
	Can you identify any barriers that prevent people in your community from achieving optimal health?
	• Can you name some specific resources, places, programs, or services?
	What programs/services are needed in the community?
	Who most needs them?
	4. What are the environmental concerns or issues that exist in the neighborhood, such as pollution, waste disposal, or access to green spaces?

	 Are there any environmental hazards or risks that affect the health and well-being of residents, such as contaminated soil, air pollution, or unsafe buildings?
	• Can you point out on a map where some of these issues are in your neighborhood?
	 Are there any ongoing environmental initiatives or efforts in the neighborhood to improve the environment? If so, how successful are they?
	5. What opportunities does your community provide to support connectedness and a sense of belonging? (i.e., social gatherings, community potlucks, community day of action, etc.)
	 What might be some barriers/challenges your community faces that prevent social connectedness and a sense of belonging?
	6a. What are the safety concerns or issues that residents face, such as crime, violence, or lack of lighting in public areas?
	 Are there existing safety measures in the neighborhood, such as police patrols, surveillance systems, or crime prevention programs? If so, how effective are they?
	• Are some areas safer than others? Why?
	Prompt:
	 If you don't feel safe, could you list some reasons why you might feel this way? (i.e., crime, drug use, vagrancy/homelessness, etc.) Can you point out these places on a map?
Law Enforcement/Neighborhood Watch	6b. What are some safety risks you've seen in the community? (i.e., crime, drug use, vagrancy/homelessness, etc.) Could you point out on a map where these risks are?
	7. What are the most important issues that affect the health of people in this neighborhood?
	Who is most affected by these?
General/All	 Are there specific health challenges that residents face, such as access to healthcare services, healthy food, or green spaces/parks?
	What might help prevent some of these issues?
	8. Considering your answer to all these questions, what do you wish existed in this neighborhood?
	 What would help the people of this neighborhood get and stay healthy?

Prompt: Consider the idea of reusing a brownfield site.
 What could be developed or built that would most benefit your community?
9. Is there anyone else you would recommend we speak with as a Key Informant?
 Are there any opportunities you can think of where we might be able to get community feedback (e.g., upcoming meetings or events in or near the neighborhood)?
10. Is there anything else you'd like us to know?

Figure 38. Key informant interview guide.

APPENDIX D: COMMUNITY DIALOGUES – AGENDA & OUTLINE

Community Dialogue Outline

The community dialogues were a self-paced activity in which residents were invited to join in discussions with other community members along with facilitators on the most pressing issues that were occurring in the neighborhood.

Part 1: Sign-in and introduction

- 1. Participants should sign-in prior to engaging in the activities that were to occur during the community dialogue. Names and phone numbers and emails/should be collected in case follow-up is needed. (See appendix x: Community dialogue sign-in sheet)
 - a. If completed virtually, participants should fill out a virtual sign-in sheet within the same information as they enter the call.
- 2. The facilitator(s) will briefly introduce themselves, the purpose of the community dialogue, and provide assistance throughout the self-paced activities.
 - a. Sample introduction
 - i. Hello, my name is, and I am helping with the neighborhood collaboration to assess the health and well-being of Thrive in the 05 residents. We welcome your active participation to share your knowledge and value the dialogue that is created through other residents. The activities are self-paced and therefore you may partake in any of the dialogues that you prefer in whatever manner you see best fit.

Part II: Community Dialogue activities

Using markers/pens participants were asked to write down or draw their answers to the following questions on the paper. You may write as much as you'd like and ensure that facilitators are able to assist the participants in understanding the activities. It is important to promote conversations between the participants during these activities. The stations used during the community dialogue along with the questions asked are provided below:

- 1. Neighborhood Strengths Activity
 - a. What do you love about your neighborhood?
 - b. What are some things in the neighborhood that help your health and well-being?
- 2. Neighborhood Challenges Activity
 - a. What are some challenges that people in your neighborhood experience that may impact their health and well-being?
- 3. Mapping Activity (See Appendix E for results)
 - a. Use the map to show what is going on in the neighborhood by placing stickers on areas of note. Please use the key below to understand what each sticker means.
 - b. You may add a sticky note to provide a little bit more information about each sticker and why it should be noted.
- 4. Prioritization Activity
 - a. A list of the top priorities for reuse/redevelopment of brownfield sites within the neighborhood were displayed.

- b. Participants were then encouraged to 'vote' on the ideas that they related to or liked the most. Each participant received 5 dots.
- c. Participants could distribute the dots in which ever manner they pleased (i.e., one idea could receive all 5 dots)

5. Storytelling Activity

- a. A list of 10 questions were displayed for participants to choose from. Participants were encouraged to share a moment in time in which one of the following prompts was noticed within their neighborhood.
 - i. Share a memorable experience you've had in the neighborhood.
 - ii. Tell us about a significant event or celebration that took place in the neighborhood.
 - iii. Describe a time when the neighborhood came together to address a challenge or achieve a common goal.
 - iv. Share a story about a neighbor who made a positive impact on the community.
 - v. Tell us about a place in the neighborhood that holds special meaning to you and why.
 - vi. Describe a time when you felt a strong sense of community in the neighborhood.
 - vii. Share a story about a tradition or cultural practice that is important to the neighborhood.
 - viii. Tell us about a historical event or moment in the neighborhood that you find interesting or significant.
 - ix. Describe a time when you witnessed acts of kindness or support among neighbors in the neighborhood.
 - x. Share a store that reflects the diversity and cultural richness of the neighborhood.

Virtual Community Dialogue

The virtual community dialogues were structured and facilitated to be completed together in a group. Two breakout rooms were offered to allow for discussion to be represented in either English or Spanish.

Section	Time	Description	Admin
Introductions	10 minutes	Introduce the CHA team and check-in participants. Allow people to get into their specified room based on their preferred language. Review Zoom etiquette and go over agenda.	Participants are asked to self-mute and if needed to confirm their presence either by using a private message in zoom chat or within the designated breakout room. Participants are placed in designated breakout rooms based on preferred

			language for discussion.
CHA Presentation	10 minutes	Presentation of CHA purpose, methods, results of data collection.	
Community Dialogue Activities	35 minutes	Ask participants a series of questions regarding the neighborhood health status and safety that encourages dialogue between the participants. Discuss the questions as stated earlier regarding the following activities: Neighborhood strength activity Neighborhood challenges activity Prioritization Activity Storytelling Activity	Facilitate and monitor the discussion to ensure that the group is moving along and speaking. While discussions are occurring a CHA member staff can document the responses and dialogue from participants. Can use Slido to share selected results. A staff member can remain in the main room to wait for late participants and guide them into the proper room and assist with technical issues.
Closing	5 minutes	Thank audience, discuss next steps (upcoming events, reports, etc.)	

Figure 39. Virtual community dialogue outline.

APPENDIX E: COMMUNITY DIALOGUES – MAPPING ACTIVITY

The mapping activity provides community members the opportunity to specifically point out, document, and engage in conversation on specific locations throughout the neighborhood that should be identified given its resources or its need.

The following is the map that was used within the mapping activity for the in-person community dialogue along with the stickers and notes that the participants added and chose to discuss:

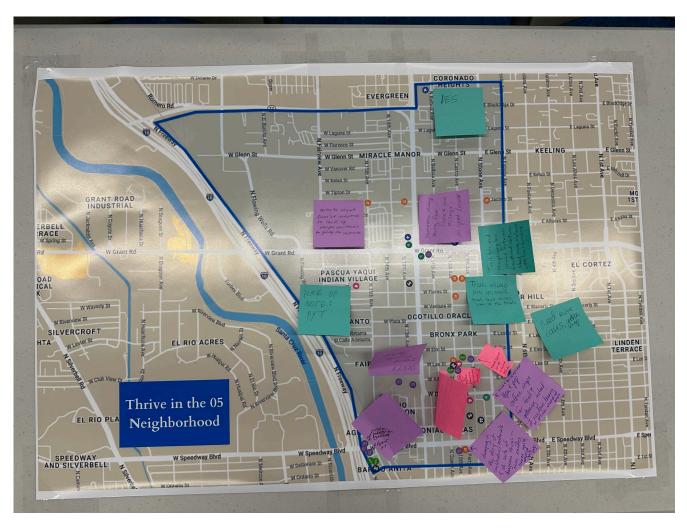


Figure 40. Community dialogue mapping activity results.

The legend for the activity can be found below:

Meaning	
Signifies a green space or a place where one can spend time outdoors (i.e., park or community garden)	
Signifies a place that provides health or social service support to the neighborhood (i.e., nonprofit, clinic, etc.)	
Signifies a food establishment (i.e., grocery store or farmer's market)	
Signifies a safety issue (i.e., a crime hotspot) or a location where one does not feel safe due to (i.e., present crime or lack of lighting)	
Signifies a place that allows for social connectedness/gatherings	
Signifies an important location to note that does not meet the criteria offered	
Signifies an environmental issue (i.e., trash, water contamination, pollution, etc.)	

Figure 41. Community dialogue mapping activity legend.

Below is the list of responses that were received during the mapping activity:

Crossroads	Sticker Icon Placed	Comment (if available)
	Lack indoor area for social gathering	Need more cafes/coffee shops
Speedway Blvd. and Perry Ave.	Trash and Safety Issue	There is an alley here where there is dumping of construction materials. I have also noticed dangerous materials such as needles, human waste, and plastics.
Speedway Blvd. and Williams St.	Important location	Vacant lot

Speedway Blvd. and Freeway St.	Safety Issue	Unsafe crosswalk/pedestrian crossing.
Oracle and Adams St	Safety Issue	Tucson House
Grant and Oracle	Safety Issue	Homeless are always stealing from nearby gas stations and convenience stores
Stone and Drachmann	Important location	Reuse buildings for mom-and- pop businesses (i.e., coffee shops) that promotes gathering
9 th Ave. and Lee St.	Safety Issue	Install a speedbump
10 th Ave. and Lee St.	Safety Issue	Lots of car accidents become apparent because of curve on the street.
10 th Ave. and Lee St.	Green space	New mini park by Bronx Wash. Would like to see rain gathering funnels installed.
9 th - 10 th Ave. and Rillito St.	Trash	Trash always piles up
10 Ave. and Flores St.	Trash	Lots of unkept trash between Grant and Ventura where people don't properly dispose of waste and recyclables
15 th Ave and Rillito St.	Important location	Pascua Yaqui Tribe
15 th Ave. and Jacinto St.	Trash	Waste management is hard to maintain

Figure 42. List of location and comments noted by community members during community dialogue mapping activity.

APPENDIX F: AZPRC – PARTICIPATORY EVALUATION INSTITUTE ASSESSMENT TEAM

About the Arizona Prevention Research Center Participatory Evaluation Institute

The Participatory Evaluation Institute (PEI) is part of the Arizona Prevention Research Center at the University of Arizona Mel and Enid Zuckerman College of Public Health. The PEI partners with organizations throughout Southern Arizona to complete health assessments and evaluate public health programs. The PEI uses a participatory methodology that is oriented to the needs of the community and grounded in community knowledge and expertise to support effective public health programs and decision-making. The PEI completed the 2021 Pima County Community Health Needs Assessment and is committed to conducting high quality, actionable assessments to guide public health programs and policies. The Pima County Community Health Assessments are excellent resources to understand health priorities and support public health planning.

Learn more:

- Arizona Prevention Research Center Participatory Evaluation Institute: https://azprc.arizona.edu/participatory-evaluation-institute-pei
- Healthy Pima; Pima County Community Health Assessments:
 https://www.healthypima.com/community-health-needs-assessments

The assessment team is listed below with brief biographies:

- Kathryn Tucker Ortiz y Pino, MPH is the program director for the Participatory
 Evaluation Institute. She has over ten years of experience in health promotion
 planning and evaluation with communities in Africa, Central and South America, and
 Southern Arizona. Since 2017, she has worked as a participatory evaluator and
 researcher on a variety of projects in Southern Arizona, particularly along the USMexico border. She led the 2021 Pima County Community Health Needs Assessment
 team.
- Rodrigo Valenzuela Cordova, MPH is a Participatory Evaluation Specialist working on several evaluation projects in Cochise County. Prior to joining the PEI, Rodrigo worked alongside various projects in the southern Arizona area that addressed health disparities in under-represented communities. Rodrigo is a Tucson native and grew up in the La Doce neighborhood.
- Alfonso Trujillo is a first year MPH student in the epidemiology concentration. He is interested in addressing health disparities that are unique to migrant health along the US-México border region and disease prevalence within migrant communities. Prior to joining the team, Alfonso worked with the Arizona Poison Center on county health

department response to monkeypox in Southern Arizona and worked to address education disparities among low-income and at-risk youth in Oregon.