Does the Built Environment Matter for Physical Activity?

Natalie Colabianchi, PhD

Corresponding author

Natalie Colabianchi, PhD

Department of Epidemiology and Biostatistics, University of South Carolina, 800 Sumter Street, Columbia, SC 29208, USA. E-mail: colabianchi@sc.edu

Current Cardiovascular Risk Reports 2009, 3:302–307 Current Medicine Group LLC ISSN 1932-9520 Copyright © 2009 by Current Medicine Group LLC

There has been a dramatic increase in the number of studies that correlate aspects of the built environment with physical activity. Several publications have summarized the state of the field and have made recommendations on how to move the field forward. This paper describes some of the recommendations and reports on recent progress that has been made on them. Specific issues that are addressed are causality, perceived versus objective environmental measures, definitions of a neighborhood, use of audit instruments, and cost-benefit studies.

Introduction

The past decade has seen a proliferation of research that examines the relationship between physical activity and the built environment. The built environment is defined as the physical form of communities including, for example, land use patterns, parks, and transportation systems. Characteristics of the built environment that have been examined in relation to physical activity can be broadly grouped as recreational resources, land use, neighborhood form, and community environment [1]. Recreational resources include trails and parks; land use includes residential density, mix of business types, street connectivity, and proximity to shops; neighborhood form includes the availability of sidewalks and streetlights; and community environment includes crime, aesthetics, cleanliness, and social cohesion.

Many positive associations have been reported for each of these broad categories (eg, recreational availability [2–6], land use [7–12], neighborhood form [6,8,10,13], and community environment [10,11,13–19]), but many null results also have been found [8,11,13,17,19–21]. Several recent reviews have concluded that most studies examining the built environment and physical activity have had null associations [22,23]. In fact, one review of studies in adults reported that 75% of the studies examined did not find a relationship between physical activity and some aspect of the built environment [23]. The authors of these reviews suggest that poor measurement and methodology may be partly responsible for the inconsistent and null findings. Indeed, early work had substantive methodologic and theoretical limitations, as might be expected in a burgeoning field. Recent studies have begun to address these limitations, resulting in more nuanced research. In addition, several reports and publications have provided reasoned reflection on what will constitute the next generation of research. This paper describes several of the recent recommendations for advancing the field and provides highlights of recent progress that has been made on these recommendations.

Establishing Causality

The major challenge facing research that examines the built environment and physical activity is establishing causality. While providing evidence for causality is a challenge in most research, studies of the built environment are particularly plagued by the issue of self-selection $[1,24,25\bullet\bullet]$. Most research to date cannot differentiate whether the built environment leads to increases in physical activity or whether people self-select into neighborhoods conducive to activity. The latter can result in a spurious association between the built environment and physical activity, and it may occur because people who value walking may choose to live in walkable neighborhoods or because those who like to use parks may choose to live in locations with easy access to parks. Giles-Corti et al. [26•] found this to be true in adults who were planning to move in the next 2 years. Those who preferred walkable neighborhoods were more likely to plan to move to neighborhoods that had features consistent with that preference. However, the levels of walking in those with this preference were not different from those who planned to move to more conventional neighborhoods.

To address the issue of self-selection, researchers have called for study designs beyond cross-sectional studies, such as natural experiments, longitudinal studies, or analyses that statistically control for self-selection [1,24,27]. Natural experiments are defined by at least two features: 1) the change or natural experiment that occurs is a result of processes in the social and political world (versus investigator initiated) and is often sudden and 2) intervention versus control status is not defined by the investigator [28]. Although several studies of natural experiments have been completed recently, more studies are needed. Results from the completed experiments are mixed. Wells and Yang [29•] followed 32 women who moved through the Habitat for Humanity program into neotraditional neighborhoods (eg, compact communities conducive to walking and biking) or conventional suburban neighborhoods. Because only one neighborhood type was built in each region, participants were not given a choice of neighborhood. Those who moved into neotraditional neighborhoods were not more likely to increase their walking than those who moved to conventional neighborhoods. Those who moved to locations with fewer cul-de-sacs than in their previous location engaged in more walking.

In a study of renovated playgrounds, Colabianchi et al. [30•] found that 10 renovated playgrounds attracted more users than 10 matched control playgrounds. Children, particularly boys, at the renovated playgrounds were more likely to be vigorously active. The playgrounds were located in an urban area in the Midwest, and each had undergone about \$200,000 worth of renovations. Finally, Brown and Werner [31••] examined bouts of moderate activity as measured by accelerometry before and after the opening of a light-rail stop. Increases in moderate activity at follow-up were associated with use of the light rail (after controlling for baseline activity). The walk to or from the rail stop was responsible for only a part of the moderate activity; hence the use of the light rail may have increased other walking as a means of transportation during the day (ie, walking to get lunch).

An exciting natural experiment that is currently being evaluated is the Residential Environments Project (RESIDE) [26•]. This study will follow 1813 people in Perth, Western Australia, who are moving into 74 new housing developments. These developments include "livable developments," defined as neighborhoods that are pedestrian friendly with convenient access to shops, transit, and parks; hybrid developments, which have some but not all features of livable developments; and conventional housing developments. Baseline data have already been collected.

Given the limited number of natural experiments that have been completed and the diverse environments and outcomes that have been examined in these studies, many more natural experiments are needed before conclusions can be drawn about whether these studies support the association between the built environment and physical activity. One of the challenges of completing natural experiments is that the researcher is not in control of the environmental changes and external funding cycles have generally not been flexible enough to support the quick and flexible funds needed to evaluate these opportunities. This recently changed with initiation of the Active Living Research and Healthy Eating Research Rapid Response Grants (a national program of the Robert Wood Johnson Foundation). These grants are intended to support, "time-sensitive, opportunistic studies to evaluate changes in policies or environments" (http://www.activelivingresearch.org/grantsearch/grantopportunities/current). Similarly, the Canadian Institutes of Health Research's grant mechanism supports "the prompt initiation of intervention and evaluation research on rapidly unfolding programs, events, and/or policy initiatives/changes with the potential to impact healthy living and/or chronic disease prevention at the population level" (http://www.cihr-irsc.gc.ca/e/36730.html). The availability of these funds should increase the number of studies that use this design.

Although only a few results from longitudinal studies have been reported since mid 2007, many more longitudinal studies are in the works (eg, HABITAT, ENDORSE [32,33]). The most instructive longitudinal studies are those in which the participants experience an environmental change (ie, they move or the environment was modified), but longitudinal studies in the absence of change will provide better evidence for causality than a cross-sectional study because the exposure precedes the outcome. A recent longitudinal study examining physical activity levels is the Children Living in Active Neighbourhoods study [34]. The investigators found evidence of a longitudinal relationship between physical and social environments and walking behaviors among the mothers they studied. Trusting local people, satisfaction with the quality of local features, and public transport were associated with increases in walking for leisure. Practical features such as connectivity and road safety as well as the quality of local facilities and having sports venues were associated with increases in walking for transport.

The best evidence from longitudinal studies is from studies of people who have moved, thereby modifying their exposure. However, no studies since July 2007 measured physical activity as a consequence of the environment in movers over time. One study did examine self-reported physical activity levels before and after a move; both were measured at follow-up. This study found that changes in neighborhood safety, physical activity options, socializing (people out and interacting; diversity), and attractiveness of the neighborhood were associated with increases in physical activity levels [35•].

Finally, research that incorporates statistical controls for self-selection have been suggested to help address selfselection bias $[25 \bullet \bullet]$. A variety of statistical controls are available; for example, direct questioning allows one to know whether the person moved because of a preference for the environment, but it does not allow for quantitative adjustments. Another option is to collect a series of attitudinal questions about travel choices and residential choices and to control for these in the analyses. An extension of this is to compare levels of activity in participants who live in neighborhoods that match their preferences and those who do not. A few recent studies have incorporated statistical controls that measured preference for neighborhood type. Handy et al. [35•] asked participants the importance of 34 characteristics of the neighborhood when deciding to move (for movers) and if they were important for a future move (for nonmovers). These preferences were controlled for in the analyses, but none of the preferences were significant in models that predicted neighborhood physical activity levels (cross-sectional) or changes in neighborhood physical activity levels (quasi-longitudinal).

Frank et al. [36•] published another interesting study that explicitly controlled for neighborhood preference. They classified about 900 people into the following categories: 1) prefers and lives in a high-walkable neighborhood; 2) prefers a high-walkable neighborhood and lives in a low-walkable neighborhood; 3) prefers a lowwalkable neighborhood and lives in a high-walkable neighborhood; 4) prefers and lives in a low-walkable neighborhood. Among those who preferred high-walkable neighborhoods (categories 1 and 2), the number of people who walked for any purpose or for nondiscretionary purposes was double for those who lived in high-walkable neighborhoods (category 1) versus lowwalkable neighborhoods (category 2). The proportion that walked for discretionary purposes was four times as high among those living in high-walkable neighborhoods. Among those who preferred low-walkable neighborhoods (categories 3 and 4), the proportion that walked for any purpose was low regardless of the neighborhood type in which they lived. This study suggests that self-selection is not the only reason for the association between the environment and physical activity even though it does play an important role. It seems that the environment facilitates activity among those with a preference for walkable neighborhoods but has little effect on those who prefer low-walkable neighborhoods.

Perceived Versus Objective Environmental Measures

Another major issue that needs to be resolved is whether it is better to examine perceived (or subjective) environmental attributes or attributes determined objectively (eg, via an audit of the neighborhood). Most of the research has examined perceptions from self-reported data [37]. Several studies have included both perceptive and objective measures and found little correspondence. Most had κ statistics of less than 0.4, indicating very poor agreement [37]. Some have argued that perception is reality and hence that subjective reports are superior. However, it is difficult to determine whether the association between perception of available resources and physical activity is a consequence of active people being more aware of what physical activity resources are available nearby. In other words, active people would report a greater number of resources nearby whereas nonactive persons living in the same area would report fewer resources, resulting in a spurious relationship between availability of resources and physical activity levels.

A recent study examined not only the degree of mismatch between perceived reports of physical activity facilities versus objective accounts but also whether the mismatch was correlated with sociodemographics, attitudes, self-efficacy, and/or behavior [38••]. Consistent with most other studies, there was poor to fair correspondence between the perceived and objectively assessed facilities (κ 0.03–0.39) with the exception of the availability of the coast, which had high agreement. Importantly, women who were physically active were less likely to have discordance between objective and perceived reports of facilities, supporting the notion that more active people may be more aware of available resources. Similarly, the mean number of facilities used was lower among those with a mismatch between perceived and objective reports. Finally, age, income, time in the neighborhood, and enjoyment of walking were all correlated with the degree of mismatch. The authors concluded that future studies that aim to correlate actual environments with physical activity should use objective data because there was such a low correspondence between perceptions and objective reports. When using self-reported perceptions of the environment, researchers should control for the likely systematic bias by controlling for attributes that are known to be associated with mismatch.

Other recent reports have suggested measuring both objective and perceptive attributes, particularly those attributes with very poor correspondence between perceptive and objective data (eg, convenience, aesthetics, safety) [1,37]. Importantly, subjective assessments of the environment may be associated with physical activity, but the causal ordering may be reversed; in other words, being physically active (in particular, walking) may influence one's perceptions.

Defining the Neighborhood

An important issue that has received surprisingly little attention is the definition of a neighborhood. Most studies of the built environment require the researcher or participant to define the number of features that are accessible within their neighborhood, but various definitions of neighborhoods are used. Neighborhoods are sometimes self-defined by the participants: they are asked whether they have specific features, such as a park, within their neighborhood, but no definition of neighborhood is provided to them. Neighborhoods are often defined as being within the boundaries of a 10- to 15-minute walk. This metric is supported by research examining a reasonable walking distance, at least in adolescents, who defined an easy walking distance as 15 minutes [39]. The most commonly used definition of a neighborhood in US-based neighborhood research is the participant's census tract as defined by the US Census Bureau [40]. Many researchers have noted that census tract boundaries are unlikely to comport with actual definitions of one's neighborhood. Finally, buffers around a participant's home are also often used in research of the built environment. Buffers could be drawn as a euclidean distance (ie, as the crow flies) or as a network buffer, which would follow the road network. The former is usually used [41]. The choice is important because the two can represent very different neighborhoods, especially in rural areas with limited roadways and connectivity. Buffers have been drawn at multiple distances (0.1 km [42] [0.06 miles] to 5 miles [5]), but buffers around a half mile or 1 mile seem to be the most common [43–48].

Researchers have varied buffer sizes in an attempt to determine which buffer is appropriate. For example, McCormack et al. [49••] examined the relationship between destination mix and various types of physical activity using buffers of 400 meters and 1500 meters, which approximated 5- and 15-minute walks. The authors stated that larger buffers may be needed for less common destinations and smaller buffers could be used for more common destinations. They argued that because transportation-related destinations are generally closer than recreational destinations, smaller buffers may be more appropriate for the former relative to the latter. Similarly, Brownson et al. [37] speculated that the appropriate buffer may depend on the behavior of interest and the population being studied. Given the importance of this issue, much more research is needed.

Use of Audit Instruments

To successfully examine the built environment, valid and reliable audit instruments are needed. Many audit instruments have been developed in recent years [50–55]. This is likely, at least in part, a result of the Robert Wood Johnson Foundation's Active Living Research program, which focused funding on the development of reliable instruments. Despite the creation of these audit instruments, there are few published results from studies that have used them. Recent exceptions include studies by Colabianchi et al. [30•] and Kaczynski et al. [56••], who both used the Environmental Assessment of Public Recreational Spaces (EAPRS).

Kaczynski et al. [56••] examined park use at 33 parks. Using the EAPRS to characterize the facilities, amenities, condition, and cleanliness of these parks, they examined which features were associated with park use. Because there was little variability in cleanliness and condition across the 33 parks, these attributes were not examined. Parks with more features (amenities and facilities combined) were more likely to be used for physical activity. Facilities were more important than amenities, and the presence of trails had the strongest association with use of a park for physical activity. Colabianchi et al. [30•] used the EAPRS to describe playgrounds but have not to date associated the playground features with utilization or activity levels. Both researchers greatly condensed the numerous variables measured in the EAPRS into a handful of variables. Additional research is needed to streamline the number of attributes for which data are collected by either systematically determining that there is no significant relationship between the attribute and physical activity or by developing appropriate ways to summarize the attributes from these audits, which can number in the hundreds.

Cost-Benefit Studies

An important question remains to be answered: assuming an association between the built environment and physical activity, are the economic savings sufficiently large to justify the costs of the infrastructure changes? The few recent studies that have projected the economic impact have found large savings in medical costs, but the savings were not as large as the costs of the infrastructure changes. Stokes et al. [57••] found that light-rail transit could result in health care savings of \$12 million over 9 years, but the estimated construction costs of the light rail was \$427 million. Another study estimated that public transit use could be associated with medical savings of about \$5500 per person [58••]. Of course, savings in health care should not be expected to cover the complete costs of the infrastructure changes because the infrastructure is important for other reasons and has other benefits (ie, economic development, reduced congestion and pollution). Further, the health savings calculated to date focus only on physical activity and obesity, but they likely would span other health outcomes (ie, asthma, reduced injury). Additional studies that consider the economic benefits of built environment changes are needed. In particular, Heath Impact Assessments, which consider the range of health benefits, should be completed.

Conclusions

The evidence for the association between the built environment and physical activity is in its early stages. At this point, there is little evidence of a causal association. Recent studies have started to address the major limitations of this research, most notably self-selection bias and measurement issues. Future research needs to continue to address these concerns and to determine whether the effects are sufficiently large enough to justify the expense of the changes to the built environment. In addition, research needs to identify which attributes of the built environment are associated with physical activity and which factors are conducive to modification. Even in light of the limitations in the research and contradictory findings, many reports have recommended moving forward with changes in the built environment in anticipation of positive behavioral impacts [22].

Disclosure

No potential conflict of interest relevant to this article was reported.

References and Recommended Reading

Papers of particular interest, published recently, have been highlighted as:

- Of importance
- •• Of major importance
- 1. Robert Wood Johnson Foundation: **The Built Environment and Physical Activity: What Is the Relationship?** Available at http://www.rwjf.org/files/research/no11researchreport. pdf. Accessed May 19, 2009.
- Craig CL, Brownson RC, Cragg SE, Dunn AL: Exploring the effect of the environment on physical activity: a study examining walking to work. *Am J Prev Med* 2002, 23(2 Suppl):36–43.
- 3. Giles-Corti B, Broomhall MH, Knuiman M, et al.: Increasing walking: how important is distance to, attractiveness, and size of public open space? *Am J Prev Med* 2005, 28(2 Suppl 2): 169–176.
- 4. Giles-Corti B, Donovan RJ: The relative influence of individual, social and physical environment determinants of physical activity. *Soc Sci Med* 2002, 54:1793–1812.
- Gordon-Larsen P, Nelson MC, Page P, Popkin BM: Inequality in the built environment underlies key health disparities in physical activity and obesity. *Pediatrics* 2006, 117:417-424.
- 6. Sharpe PA, Granner ML, Hutto B, Ainsworth BE: Association of environmental factors to meeting physical activity recommendations in two South Carolina counties. *Am J Health Promot* 2004, 18:251–257.
- 7. Berrigan D, Troiano RP: The association between urban form and physical activity in U.S. adults. *Am J Prev Med* 2002, 23(2 Suppl):74–79.
- 8. De Bourdeaudhuij I, Sallis JF, Saelens BE: Environmental correlates of physical activity in a sample of Belgian adults. *Am J Health Promot* 2003, 18:83–92.
- 9. Ewing R, Schmid T, Killingsworth R, et al.: Relationship between urban sprawl and physical activity, obesity, and morbidity. *Am J Health Promot* 2003, 18:47–57.
- 10. Giles-Corti B, Donovan RJ: Socioeconomic status differences in recreational physical activity levels and real and perceived access to a supportive physical environment. *Prev Med* 2002, 35:601–611.
- 11. Hoehner CM, Brennan Ramirez LK, Ellitt MB, et al.: Perceived and objective environmental measures and physical activity among urban adults. *Am J Prev Med* 2005, 28(2 Suppl 2):105–116.
- 12. Li F, Fisher KJ, Brownson RC, Bosworth M: Multilevel modelling of built environment characteristics related to neighbourhood walking activity in older adults. J Epidemiol Community Health 2005, 59:558–564.
- 13. Brownson RC, Maker EA, Housemann RA, et al.: Environmental and policy determinants of physical activity in the United States. *Am J Public Health* 2001, **91**:1995–2003.
- 14. Humpel N, Marshall AL, Leslie E, et al.: Changes in neighborhood walking are related to changes in perceptions of environmental attributes. *Ann Behav Med* 2004, 27:60–67.
- 15. Humpel N, Owen N, Iverson D, et al.: Perceived environment attributes, residential location, and walking for particular purposes. *Am J Prev Med* 2004, 26:119–125.
- 16. Huston SL, Evenson KR, Bors P, Gizlice Z: Neighborhood environment, access to places for activity, and leisure-time physical activity in a diverse North Carolina population. *Am J Health Promot* 2003, 18:58–69.
- 17. King AC, Castro C, Wilcox S, et al.: Personal and environmental factors associated with physical inactivity among different racial-ethnic groups of U.S. middle-aged and older-aged women. *Health Psychol* 2000, **19**:354–364.
- Troped PJ, Saunders RP, Pate RR, et al.: Associations between self-reported and objective physical environmental factors and use of a community rail-trail. *Prev Med* 2001, 32:191–200.

- 19. Wilcox S, Castro C, King AC, et al.: Determinants of leisure time physical activity in rural compared with urban older and ethnically diverse women in the United States. *J Epidemiol Community Health* 2000, 54:667–672.
- King WC, Belle SH, Brach JS, et al.: Objective measures of neighborhood environment and physical activity in older women. Am J Prev Med 2005, 28:461–469.
- 21. Lee C, Moudon AV: Correlates of walking for transportation or recreational purposes. *J Phys Act Health* 2006, 3(Suppl 1): S77–S98.
- 22. Ferreira I, van der Horst K, Wendel-Vos W, et al.: Environmental correlates of physical activity in youth - a review and update. Obes Rev 2007, 8:129–154.
- 23. Wendel-Vos W, Droomers M, Kremers S, et al.: Potential environmental determinants of physical activity in adults: a systematic review. Obes Rev 2007, 8:425-440.
- 24. Transportation Research Board: Does the Built Environment Influence Physical Activity? Examining the Evidence. Available at http://onlinepubs.trb.org/Onlinepubs/sr/sr282.pdf. Accessed May 19, 2009.
- 25.•• Mokhtarian PL, Cao X: Examining the impacts of residential self-selection on travel behavior: a focus on methodologies. *Transportation Research Part B* 2008, **42**:204–228.

This paper describes and evaluates seven methods for controlling self-selection bias: direct questioning, statistical control, instrumental variable models, sample selection methods, joint discrete choice models, structural equational models, and longitudinal designs.

26.• Giles-Corti B, Knuiman M, Timperio A, et al.: Evaluation of the implementation of a state government community design policy aimed at increasing local walking: design issues and baseline results from RESIDE, Perth Western Australia. Prev Med 2008, 46:46–54.

This paper describes the design of an extensive natural experiment that is taking place in Perth, West Australia, and baseline results from the 1813 people enrolled in this study. The authors plan to address self-selection bias in part by controlling for baseline residential location preferences.

- 27. Sallis JF, Glanz K: The role of built environments in physical activity, eating, and obesity in childhood. *Future Child* 2006, 16:89–108.
- Ramanathan S, Allison KR, Faulkner G, Dwyer JJ: Challenges in assessing the implementation and effectiveness of physical activity and nutrition policy interventions as natural experiments. *Health Promot Int* 2008, 23:290–297.
- 29.• Wells NM, Yang Y: Neighborhood design and walking. A quasi-experimental longitudinal study. Am J Prev Med 2008, 34:313–319.

This natural experiment followed a small number of women who moved into different types of neighborhoods through the Habitat for Humanity Program. The results did not support an association between neighborhood type (neotraditional versus conventional suburban) and walking.

30. Colabianchi N, Kinsella AE, Coulton CJ, Moore SM: Utilization and physical activity levels at renovated and unrenovated school playgrounds. *Prev Med* 2009, 48:140–143.

This natural experiment examined whether renovating playgrounds resulted in greater use and increased physical activity relative to playgrounds that were not renovated. Renovated playgrounds had increased use across all age and sex groups. Children were more vigorously active at the renovated playgrounds.

31.•• Brown BB, Werner CM: A new rail stop: tracking moderate physical activity bouts and ridership. *Am J Prev Med* 2007, 33:306-309.

This study used accelerometry to assess whether moderate-activity bouts were increased with the introduction of a light-rail stop. The authors surveyed 51 people before and after the introduction of the light-rail stop. Light-rail rides were associated with increased moderate bouts of activity at follow-up.

32. Burton NW, Haynes M, Wilson LA, et al.: HABITAT: a longitudinal multilevel study of physical activity change in mid-aged adults. *BMC Public Health* 2009, 9:76–86.

- 33. van der Horst K, Oenema A, van de Looij-Jansen, Brug J: The ENDORSE study: research into environmental determinants of obesity related behaviors in Rotterdam schoolchildren. BMC Public Health 2008, 8:142–150.
- Cleland VJ, Timperio A, Crawford D: Are perceptions of the physical and social environment associated with mothers' walking for leisure and for transport? A longitudinal study. *Prev Med* 2008, 47:188–193.
- 35.• Handy SL, Cao X, Mokhtarian PL: The causal influence of neighborhood design on physical activity within the neighborhood: evidence from Northern California. Am J Health Promot 2008, 22:350–358.

This study is innovative in that the authors queried participants for their preferences for various neighborhood characteristics and controlled for these preferences in the analyses. None of the preferences, however, were significantly associated with physical activity in the cross-sectional or the quasi-longitudinal analyses.

36.• Frank LD, Saelens BE, Powell KE, Chapman JE: Stepping towards causation: do built environments or neighborhood and travel preferences explain physical activity, driving, and obesity? Soc Sci Med 2007, 65:1898–1914.

This study examined the effect of self-selection bias through a variety of mechanisms, including by examining the walking behavior of those who were living in their preferred type of neighborhood and those who were not. Among those who preferred to live in highly walkable neighborhoods, two to four times as many people walked if they lived in a high-walkable neighborhood relative to a low-walkable neighborhood.

- Brownson RC, Hoehner CM, Day K, et al.: Measuring the built environment for physical activity: state of the science. *Am J Prev Med* 2009, 36(45):S99–S123.
- 38.•• Ball K, Jeffery RW, Crawford DA, et al.: Mismatch between perceived and objective measures of physical activity environments. *Prev Med* 2008, 47:294–298.

This study not only examined whether perceptions of the neighborhood environment matched objective reports of the environment, but it also correlated the degree of mismatch with participant characteristics. More active women and the women who used more facilities were less likely to have a mismatch between their perceptions of available facilities and objective accounts of facilities.

- Colabianchi N, Dowda M, Pfeiffer KA, et al.: Towards an understanding of salient neighborhood boundaries: adolescent reports of an easy walking distance and convenient driving distance. Int J Behav Nutr Phys Act 2007, 18:66–69.
- Mujahid MS, Diex Roux AV, Morenoff JD, Raghunathan T: Assessing the measurement properties of neighborhood scales: from psychometrics to ecometrics. *Am J Epidemiol* 2007, 165:858–867.
- 41. Oliver LN, Schuurman N, Hall AW: Comparing circular and network buffers to examine the influence of land use on walking for leisure and errands. *Int J Health Geogr* 2007, 6:41–51.
- 42. Berke EM, Koepsell TD, Moudon AV, et al.: Association of the built environment with physical activity and obesity in older persons. *Am J Public Health* 2007, **97**:486–492.
- 43. Braza M, Shoemaker W, Seeley A: Neighborhood design and rates of walking and biking to elementary school in 34 California communities. Am J Health Promot 2004, 19:128–136.
- Cohen DA, Ashwood JS, Scott MM, et al.: Public parks and physical activity among adolescent girls. *Pediatrics* 2006, 118:e1381–e1389.
- 45. Jago R, Baranowski T, Baranowski JC: Observed, GIS, and self-reported environmental features and adolescent physical activity. *Am J Health Promot* 2006, 20:422–428.

- Kerr J, Rosenberg D, Sallis JF, et al.: Active commuting to school: associations with environment and parental concerns. *Med Sci Sports Exerc* 2006, 38:787–794.
- 47. Norman GJ, Nutter SK, Ryan S, et al.: Community design and access to recreational facilities as correlates of adolescent physical activity and body-mass index. J Phys Act Health 2006, 3(Suppl 1):S118–S128.
- 48. Timperio A, Ball K, Salmon J, et al.: Personal, familial, social and environmental correlates of active commuting to school. *Am J Prev Med* 2006, 30:45–51.
- 49.•• McCormack GR, Giles-Corti B, Bulsara M: The relationship between destination proximity, destination mix and physical activity behaviors. *Prev Med* 2008, 46:33–40.

This study attempted to address the problem of the unknown neighborhood boundary by examining multiple buffers around a participant's home. Other highlights include the authors' separate examination of walking for transport, walking for recreation, and vigorous activity and their investigation of a dose–response relationship.

- 50. Lee RE, Booth KM, Reese-Smith JY, et al.: The Physical Activity Resource Assessment (PARA) instrument: evaluating features, amenities and incivilities of physical activity resources in urban neighborhoods. *Int J Behav Nutr Phys* Act 2005, 2:13–21.
- 51. Saelens BE, Frank LD, Auffrey C, et al.: Measuring physical environments of parks and playgrounds: EAPRS instrument development and inter-rater reliability. J Phys Act Health 2006, 3(S1):S190-S207.
- Pikora TJ, Bull FC, Jamzorik K, et al.: Developing a reliable audit instrument to measure the physical environment for physical activity. Am J Prev Med 2002, 23:187–194.
- Day K, Boarnet M, Alfonzo M, Forsyth A: The Irvine-Minnesota inventory to measure built environments: development. Am J Prev Med 2006, 30:144–152.
- 54. Clifton KJ, Livi Smith A, Rodriguez D: The development and testing of an audit for the pedestrian environment. *Landsc Urban Plan* 2007, 1–2:95–110.
- Brownson RC, Hoehner, Brennan LK, et al.: Reliability of 2 instruments for auditing the environment for physical activity. J Phys Act Health 2004, 1:191–208.
- 56.•• Kaczynski AT, Potwarka LR, Saelens BE: Association of park size, distance, and features with physical activity in neighborhood parks. Am J Public Health 2008, 98:1451–1456.

This study examined specific features at parks using an audit tool and related these features to use of the park for physical activity. Parks with more features (facilities and amenities combined) were more likely to be used for physical activity. Facilities were more important than amenities. Trails were the most important feature associated with park use.

57.•• Stokes RJ, MacDonald J, Ridgeway G: Estimating the effects of light rail transit on health care costs. *Health Place* 2008, 14:45–58.

This economic analysis investigated the public health savings from the addition of light rail. The potential savings were substantial (\$12 million) but were dwarfed by the costs to construct and operate the system.

58.•• Edwards RD: Public transit, obesity, and medical costs: assessing the magnitudes. *Prev Med* 2008, 46:14–21.

This study was an economic analysis of the health savings from using public transit. The projected savings per person was about \$5500. This study considered only the benefits from increased physical activity and reduced obesity. The author suggested that the savings would be increased if the reductions in disability were included.