**Promoting Health Communities Windshield Survey**

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Windshield and walking surveys are systematic observations of a community from a moving vehicle and on foot (Rabinowtiz, 2021). Windshield and walking surveys are an important part of a community evaluation, as they are crucial in determining community characteristics by understanding its general/specific conditions such as physical, social, or economic characteristics. This essay presents a Windshield and walking survey of Manhattan valley in New York, United States.

**Data Overview**

| Data | Strengths | Weaknesses |
| --- | --- | --- |
| 1. The age, nature, and condition of the community’s available housing
 | Most houses are 60 years old but in good condition. The houses are mostly concrete, while the architectural design varies due to preferences and economic conditions. Homes are spacious, with sidewalks on the front and back.New affordable housing projects. | A few run-down buildings and rows of dilapidated tenements.Several low–income apartments.Several homeless families.  |
| 1. Infrastructure needs - Roads, bridges, streetlights, etc.
 | Most roads, streetlights, sidewalks and badges are in functional condition. Accessible two subway lines | A few damaged roads with potholes, nonfunctional streetlights and damaged sidewalks.  |
| 1. The presence or absence of functioning businesses and industrial facilities
 | Several small, medium and big business premises. No business/industrial parks but has access to neighboring business parks  | Few businesses in substandard buildings. |
| 1. The location, condition, and use of public spaces
 | The neighborhood in the northern part of Upper West Side in Manhattan, New York City.Several gathering squares andChildren playgrounds | Most public places are occupied, leading to traffic jams and human congestion during rush hours. |
| 1. The amount of activity on the streets at various times of the day, week, or year
 | There is lots of activity during the morning (7 am – 10 am), evening hours (5 pm – 10 pm), and holidays. | More street activities during the day (7 am – 6 pm) and during warm months. This increases crime rates. |
| 1. The noise level in various parts of the community
 | Quite and moderate noise levels in residential apartments, health facilities and high-end residential blocks. | High noise levels along major highways, in restaurants, bars and in low-income neighborhoods. |
| 1. The amount and movement of traffic at various times of day
 | The movement of traffic includes individuals going to and from work daily.  | Traffic movement is high during rush hours. During warm months, the amount of traffic and movement increases. An increase in traffic is associated with a high crime rate.  |
| 1. The location and condition of public buildings: The city or town hall,courthouse, etc.
 | The neighborhood has running and effective schools, post offices, museums, community centers, a police station, and a library.  | The neighborhood lacks courthouses, town/city halls, consulates, embassies. |
| 1. The walkability of community: Are there walking paths/biking paths/safety?
 | Most community resources are walking distances away. There are well maintained walking paths/biking paths path  | A seasonal upsurge in crime rates prevents individuals from walking in some areas. |
| 1. What is the proximity for walkability to community resources?
 | Most community resources are few blocks away. | Walkability is limited during the winter and rainy seasons. |
| 1. Availability of public transportation: It’s the cost? It’s accessibility?
 | Public transportation is available via bus, rail or subway operated by MTA. The average cost of transport is about $2.75 for most people. Express buses cost $6.75.Rail fare varies with time.Disabled people are legible for a reduced fareChildren under 44inches tall rides for free. Subways operate 24/7.Enhanced overnight bus service available | Social distancing due to pandemics has reduced operation capacity. No shared rides.Low-income households cannot use public transport. |
| 1. Availability of community centers and public spaces, such as social service centers, public libraries, parks, churches, community centers, recreation centers
 | Several communities and public service centers are Trinity Lutheran Church of Manhattan, Holy Name of Jesus and St. Gregory the Great, etc. Bloomingdale Library. Frederic Douglass Centre. Franciscan community Centre  | Most of these community centers and public spaces have specific operating times, conditions, and costs. The Covid-19 pandemic limitation of gathering has affected the functionality of these centers/spaces.  |
| 1. Availability of health care facilities and resources, such as clinics and hospitals. How many are there?
 | There are three health centers, i.e., Riverside health Centre, Ryan health Centre and Ryan Health, women and children.There are two clinics, i.e., Riverside Sexual Health Clinic and Northwell Health-GoHealth. | Big hospitals are in the neighboring communities. This increases the risk of death in critical cases. Most homeless and uninsured families’ access to these healthcare institutions is limited.  |
| 1. Food options available and presence of nutrition: Does the area have characteristics of food deserts?
 | There several food options available for both low-income and high-income residents. | Organic and healthy food options are expensive, and affordability depends on family income.Perishable and fresh food desserts are common among middle and high-income households.  |
| 1. Are there grocery stores?
 | There are various grocery stores accessible to most households. |  |
| 1. The presence of homelessness: Is there a homeless population?
 | Homelessness is on the rise.  | Homelessness predisposes individuals to various health factors, including cold and microorganisms. Homeless people are also exposed to significant cases of communicable diseases, HIV, and insecurity. |
| 1. Are there homeless services?
 | There are homeless services, include:Trinity place shelter | An increase in homelessness is associated with increased crime. |
| 1. Police/Fire presence
 | There is a police and fire department presence in the neighborhood. | The neighborhood is overpopulated and cannot be optimally served by single police and fire presence. |
| 1. Schools in the area
 | Schools include: Montclare Children’s School, Holy Name School, Public School 163, Schechter Manhattan, BASIS Independent School, Edward A. Reynolds West Side High School, The Alfred E. Smith School, Morningside Montessori School, The Bloomingdale  | There are no public universities or private higher institutions in the neighborhood. Covid-19 pandemic has disrupted the normal in-attendance learning method.  |
| 1. What are the location and physical condition of the schools?
 | Schools are uniformly distributed in the neighborhood. The schools are in an appropriate state in terms of structures and facilities.  | Segregation between high and low-income students in schools is prominent.  |

**Data Summary**

Please summarize your data by responding to the following:

1. Describe the strengths of the community as evidenced by Windshield Survey.

The strengths of the community rely on the availability of community and social services for its population. These resources, both public and private, serve to promote healthy living and in meeting certain needs. According to DeSalvo et al. (2017), community resources and services are crucial for socio-economic and environmental conditions that affect health and health equity. For instance, local schools serve as learning centers, churches serve as places for spiritual growth, health centers provide clinical services, and police stations provide security.

1. Describe the weaknesses (gaps in service) as evidenced by Windshield Survey.

The community’s weakness is the upsurge in the crime rate attributed to increased homelessness and low-income levels. Another significant weakness in the community is the lack of high-level hospitals to meet critical needs, e.g., accidents. Statistics show that the population density in Manhattan Valley 88,223 people/mi2 against 27,486 people/mi2 in the wide New York state (City-Data.com, 2020). Lack of these vital services predisposes individuals to disparities, which can encourage crime rates, as is the case in the neighborhood. Increasing homelessness is also associated with more cases of covid-19 infections. Consequently, the lack of high-level hospitals has led to the conversion of hotel rooms to isolation centers for covid-19 patients.

1. Identify one problembased on the identified gap in community resources as an indicator of potential poor health outcomes.

A significant gap in the Manhattan Valley neighborhood is homelessness - a social health determinant (Healthy People, 2020). With the upsurge in homelessness, most people are predisposed to poor living conditions and food insecurity. When sick, homeless patients often face relapse due to inadequate conditions and exacerbating factors. Safe homes and neighborhoods constitute healthier people (Rolfe et al., 2020). Besides, the places that people live affect their health. In Manhattan Valley, homeless individuals live from food deserts and have meager incomes.

**References**

City-Data.com, (2020). Manhattan Valley neighborhood in New York, New York (NY), 10025 detailed profile. Available at <http://www.city-data.com/neighborhood/Manhattan-Valley-New-York-NY.html> (Accessed 10 June 2021)

DeSalvo, K. B., Wang, Y. C., Harris, A., Auerbach, J., Koo, D., & O’Carroll, P. A Call to Action for Public Health to Meet the Challenges of the 21st Century. [10.5888/pcd14.170017](https://dx.doi.org/10.5888/pcd14.170017)

Healthy People 2020. <https://www.healthypeople.gov/2020/leading-health-indicators/2020-LHI-Topics> (Accessed 10 June 2021)

Rabinowtiz, P. (2021). Chapter3: Section 21. Windshield and Walking Surveys. *Community Tool Box*. Available at <https://ctb.ku.edu/en/table-of-contents/assessment/assessing-community-needs-and-resources/windshield-walking-surveys/main> (Accessed 10 June 2021).

Rolfe, S., Garnham, L., Godwin, J., Anderson, I., Seaman, P., & Donaldson, C. (2020). Housing as a social determinant of health and wellbeing: developing an empirically-informed realist theoretical framework. *BMC public health*, *20*(1), 1-19. <https://doi.org/10.1186/s12889-020-09224-0>