One of the premises of sustainable development assumes that economic and social development will serve a greater public good if it takes into consideration impacts, both short- and long-term on the health of communities. Measures of development that is sustainable are possible at the global, the national, and the regional level. These different levels of development, however, can be expected to be reflected in different ways in the health of communities. There are no obvious measures of global health but global development is reflected in measures of population growth. The two major ways to measure national development in terms of health are life expectancy and infant mortality. Regional or community development is harder to measure as are indicators of health on a community level.

The US efforts to develop national and regional goals for health are provided in the ten-year projections at Health People (most recently Healthy People 2010). To measure progress towards these goals, health or health-related indicators are used that can be tracked for changes in the direction of the goal. These indicators can be applied at the community level but many lack readily available sources of data to serve this function.

This paper will examine the health indicators that are available at the regional (Merrimack valley) and community level (selected communities in the Merrimack Valley will be used) to identify indicators that can be measured and tracked at these two geographical levels. A similar effort will be undertaken using health indicators available in Sweden and, if possible, at analogous regional and community levels.

The search for possible indicators will include the Leading Health Indicators used for Healthy People 2010 (Physical Activity, Overweight and Obesity, Tobacco Use, Substance Abuse, Responsible Sexual Behavior, Mental Health, Injury and Violence, Environmental Quality, Immunization, and Access to Health Care). Additionally consideration will be given to an evolving set of health indicators being designed for public health surveillance by the Council of State and Territorial Epidemiologists to measure injury, chronic disease, environmental health, and occupational health.

Indicators available in the US will be compared and contrasted with those available from Sweden with the intention of determining what indicators might be developed in the other jurisdiction which are not currently available. Success of an indicator will be assessed both on how well it might measure aspects of community health and how responsive it might be to changes in development and related measures of sustainable development.