| **Sustainability Definitions** | **Preliminary Sustainability Indicators** | **Preliminary Targets** | **Comments** |
| --- | --- | --- | --- |
| **Sustainable public wellness** exists when, in the aggregate and within major socioeconomic sectors, the conditions for New Jersey residents provide:* Health conditions equivalent to the best outcomes exhibited by other states and peer nations
* Minimized at a cost to society relative to both state domestic product and household incomes
* Effective prevention of acute and chronic disease
* Health care methods that are intrinsically sustainable, and do not constitute a major burden that reduces our ability to achieve sustainability in other critical social functions.

. | 1. Lifespan increases to the best norms, aggregate and by socioeconomic cohorts
 | National health benchmark (best state) and OECD health benchmark (best nation)[[1]](#footnote-1)  |  |
| 1. Preventable injuries and chronic and acute disease incidence decreases to the best norms, aggregate and by age and socioeconomic cohorts, and within specific communities
 | National health benchmark (best state), OECD health benchmark (best nation), New Jersey benchmark (best similar community) |  |
| 1. Food access increases and food insecurity decreases for low-income households to the best norms, with very low food security decreasing to insignificant levels
 | National health benchmark (best state), OECD health benchmark (best nation), New Jersey benchmark (best similar community) |  |
| 1. Health and wellness costs are affordable, on aggregate and for low- and moderate-income households
 | Total health and wellness costs per household, including community and individual preventive and reactive interventions |  |
| 1. Acute health care costs decline relative to economy
 | Acute health care costs as a percentage of total health and wellness costs and of State GDP |  |
| 1. People feel healthy, leading to increased social and economic wellbeing
 | Health surveys |  |

**Sustainability Summit**

**Preliminary Public Wellness Sustainability Indicators and Targets: Participant Feedback Sheet Name**

**Sustainability Summit**

**Preliminary Air Quality Sustainability Indicators and Targets: Participant Feedback Sheet**

| **Sustainability Definition** | **Preliminary Sustainability Indicators** | **Preliminary Targets** | **Comments** |
| --- | --- | --- | --- |
| Ambient Air Quality is sustainable when National Ambient Air Quality Standards are achieved throughout New Jersey, and ambient air quality and the migration and deposition of air pollutants pose no significant direct or indirect health threats to sensitive populations and natural resources. | Achievement of National Ambient Air Quality Standards | Concentrations of “criteria” pollutants |  |
| Watersheds are not toxic to aquatic lifeFish consumption advisories and bans are no longer required in New Jersey waters | Aquatic life morphologic aberrations due to toxicity Bioaccumulation of toxic substances in fish |  |
| Neighborhood Air Quality is sustainable when children and other sensitive populations in urban neighborhoods have health effects related to outside air quality that are comparable to those in other areas of New Jersey. | Health outcome comparison of urban and nonurban neighborhoods | Asthma rates in children by neighborhood category and socioeconomic groupAsthma rates in sensitive adult populations by neighborhood category and socioeconomic group |  |

**Sustainability Summit**

**Preliminary Indoor Health Sustainability Indicators and Targets: Participant Feedback Sheet**

|  |  |  |  |
| --- | --- | --- | --- |
| **Sustainability Definition** | **Preliminary Sustainability Indicators** | **Preliminary Targets** | **Comments** |
| Indoor Air Quality poses no significant direct or indirect health threats for the general population or specific socioeconomic groups, as measured by effects on residents, workers, and especially sensitive populations such as children, the elderly and immune-compromised populations.  | • Asthma rates in children by neighborhood category and socioeconomic group• Asthma rates in sensitive adult populations by neighborhood category and socioeconomic group | * Reduced incidence of air quality related health issues
* Health outcome comparison of urban and poor neighborhoods to national benchmark states by socioeconomic group
 |  |
| National Air Quality and Safe Drinking Water Act Standards are achieved throughout New Jersey and heavy metals pose no significant direct or indirect health threats for the general population or specific socioeconomic groups, as measured by effects on children or other sensitive populations.  | • Incidence rate of acute heavy metal poisoning in children under 6 by neighborhood category and socioeconomic category• Blood levels of selected heavy metals in vulnerable population | * Reduced incidence of heavy metal related health issues
* Health outcome comparison of urban and poor neighborhoods to national benchmark states by socioeconomic group
 |  |
| Endocrine Disrupting Compounds (EDC) pose no significant direct or indirect health threats for the general population or sensitive populations such as children or pregnant women, as measured by incidence rates of EDC related diseases.  | • Incidence rate of endocrine related diseases and health issues  | * Reduced incidence of EDC related health issues
* Health outcome comparison of urban and poor neighborhoods to national benchmark states by socioeconomic group
 |  |

1. Quality-adjusted life year (QALY) or health-adjusted life expectancy (HALE) are noted in IOM (2012c), Table 3-2 [↑](#footnote-ref-1)