

Using the Matrix in Your Own Community

Using a matrix such as the one on the next page, one can make clear links between various aspects of health and traditional planning elements, including information required by the Metropolitan Council. Even for communities outside of the Twin Cities region, the matrix can be a useful tool to organize efforts to integrate health into a community's comprehensive plan. The matrix includes plan content specified by the Metropolitan Council and a number of relevant health issues.

The health issues included in the matrix were identified based on a review of wide-ranging literature on the relationship between health and the built environment, drawing from research in the areas of public health, environmental management, transportation planning, urban design, and healthy eating. Frumkin, Frank and Jackson (2004) use many of these same categories of health, including air quality, physical activity, traffic safety, water quality, mental health, and social capital, relating them to urban sprawl. A recent American Planning Association "Planning Advisory Service Report" on integrating planning and public health, addresses some of these same issues but also adds obesity and inactivity, crime, hazardous waste sites, and transported materials (Morris 2006). The matrix used here (see p. 9) includes the additional concerns of food access, pollutants and epidemiological issues, such as

the concentration of diseases within particular populations or geographic areas.

Focusing on the minimum content required by the Metropolitan Council, the matrix on the next page provides a starting point in communities for discussing opportunities to integrate health into their comprehensive plans. Communities might also include other elements or content in this matrix to reflect local concerns or typical plan content (e.g., community facilities, environmental protection, urban design). To further tailor the matrix to the local context, additional health issues or specific health concerns could be included (e.g., access to supermarkets for low-income residents, high asthma rates in neighborhoods adjacent to highways). Use of this tool as part of the public participation process can be effective in increasing awareness of the relationships between health and the built environment. The public may be a significant source of information about key health issues and the feedback gathered during a participatory process may be useful in drafting goals and identifying policy options.

For more information on health and planning please visit www.designforhealth.net

References

Frumkin, H., L. Frank, and R. Jackson. 2004. *Urban sprawl and public health: Designing, planning, and building for healthy communities*. Washington, DC: Island Press.



Metropolitan Design Center

Sample Matrix for Examining the Links between Comprehensive Planning and Health

	Physical Activity	Social Capital	Mental Health	Air Quality	Water Quality	Food Access	Safety (crime & traffic)	Access	Env and Housing Quality
Land-use plan									
Future land use	x	x	x	x	x	x	x	x	x
Housing plan	x	x	x	x		x	x	x	x
Resource Protection	x	x	x	x		x	x		
Transportation									
Traffic Analysis Zone (TAZ) allocation	x			x			x	x	
Highway & roads plan	x			x			x	x	
Bike & pedestrian plan	x	x	x	x		x	x	x	
Special traffic situation	x	x		x		x	x	x	
Transit plan for facilities & services	x	x		x		x	x	x	
Aviation plan			x	x			x	x	
Water Resources									
Wastewater & sewer plan					x		x		x
Surface water management plan			x		x				x
Water supply plan					x				x
Parks & Open Space									
Identity, plan, map & plan for regional parks and open space	x	x	x	x	x	x	x		
Optional Elements									
Economic development						x	x		x
Intergovernmental coordination				x	x				
Urbanization & redevelopment areas	x	x		x	x	x	x	x	x