Since its release in 1980, Healthy People has proven an invaluable resource and tool for national, state and local partners working to improve the health of their communities. Kansas has actively engaged in planning processes to address healthy people objectives since the mid-1980’s. These processes have evolved to include a more diverse set of partners to reflect the changing nature of healthy people.

The latest iteration of Healthy People, Healthy People 2020, provides a comprehensive set of 10-year, national goals and objectives for improving the health of all Americans. With nearly 1,200 health objectives and measures spanning 42 topic areas, Healthy People 2020 illustrates the complex and diverse nature of issues which now face the public health system. While all the topic areas and objectives included in Healthy People 2020 are noteworthy, further refinement was needed to prioritize a more manageable set of topics for review. More than 1,700 Kansans responded to a public opinion survey in 2010 to prioritize the 42 topic areas of Healthy People 2020 to a more practical 12.

In 2012, the Kansas State Health Officer convened a 50-member steering committee to complete an in-depth review of the 12 topic areas and develop recommendations to guide the development of a state health improvement plan. The committee was supported by a team of Kansas content matter experts and state health department staff tasked with researching topics, analyzing data, presenting information and providing insight into the current assets and barriers to specific health issues. In 2013, the steering committee released the Healthy Kansans 2020 Framework, outlining three cross-cutting themes and 11 strategies to assist Kansas stakeholders in the development of the state health improvement plan. What follows is a description of the priority strategies that determined the objectives and actions recommended in the plan.
Moving from Planning to Action

The challenges Kansas faces are in many ways the same as those faced by the majority of states—rising health care costs, chronic disease and a public health and health care system treading water in a sea of technology changes. And if these challenges weren’t enough, many states, including Kansas, are still grappling with public health threats that have been a mainstay for decades such as infant mortality, injuries and communicable and infectious diseases. But while the challenges may be similar, the context in which states are working to address these issues are not. As a primarily rural state with a population of more than 2.8 million people, the Kansas landscape is divided into 105 counties whose populations range from 1,500 residents to more than 500,000 residents. Critical public services such as public health and education operate in a decentralized system controlled by local boards of health and education. Kansas is home to 100 independent local health departments and 286 school districts. This loosely connected patchwork of critical partners requires well developed networks to support collaboration and to ensure the most basic public health services are delivered effectively and efficiently. And while not without its challenges, this loosely connected system has proven adequate to supporting public health work in Kansas since the state’s first set of public health recommendations were released in 1885. Public health in Kansas must continue
to rely on these existing partner channels, while actively forging new relationships to address the growing complexity of the public health system demands.

The changing landscape of public health partners reflects the diverse and challenging issues which now face the public health system. Once dominated by infectious, preventable diseases, the leading causes of death in Kansas have shifted to reflect the rise in chronic disease and injuries.

While many of these issues remain preventable, they disproportionately impact African-Americans, Hispanic and Latinos, Native Americans and other minority groups living in Kansas. These issues are more prevalent in individuals living in poverty, in areas with limited access to healthy foods and quality medical services, areas void of safe and reliable public transportation, areas with limited access to quality schools and a host of other environmental, economic and social characteristics that can impact health and well-being.

The leading health challenges and their impact on vulnerable population groups in Kansas were the focus of ongoing discussions by the steering committee and state content experts throughout 2012 and 2013. The discussions lead to the development of the Healthy Kansans 2020 Framework, which calls attention to 11 health strategies. The Framework set the stage for a stakeholder driven process to develop a plan to improve the health of Kansans by 2020. The resulting state health improvement plan includes a focus on five of the 11 health strategies with 13 targeted objectives and more than 50 partner driven activities.
Kansas Health Improvement Plan Priority Strategies

Priority Strategy One

Healthy Living - Promote healthy eating and physical activity in Kansas through increased access to farmer’s markets and community gardens and through food policy councils and a growing network of schools, worksites and early childhood care providers.

Priority Strategy Two

Healthy Living - Promote a comprehensive approach to tobacco use prevention and control to reduce initiation and provide support for Kansans trying to quit tobacco through cessation interventions, including promotion and use of the Kansas Tobacco Quitline.

Priority Strategy Three

Healthy Communities - Promote environments and community design that impact health and support healthy behaviors with roadways designed to accommodate all users, access to trails connecting business and residential areas, initiatives to ensure clean air (indoor and outdoor), safe housing, access to quality drinking water and implementation of best practices such as community driven recycling.

Priority Strategy Four

Access to Services - Address the root causes of poor health through a renewed focus on improving health literacy, and by establishing more direct links between health initiatives and initiatives focused on decreasing the number of Kansans living in and impacted by poverty.

Priority Strategy Five

Access to Services - Promote integrated health care delivery by encouraging providers to move toward integrative models of care, increase health care access and the use of telemedicine, and expand the number of providers who adopt electronic health records (EHR) systems and connect to and use a health information exchange.
Healthy Kansans 2020 Timeline

- **4/2010 - 10/2010** Convene HK 2020 Steering Committee
- **8/2012** Conduct the HK 2020 public opinion survey
- **12/2011** Launch HK 2020 health assessment process
- **1/2013** Steering Committee releases HK2020 Framework
- **2/2014** Stakeholders prioritize strategies and approaches for health improvement plan
- **3/2014** Content experts review the evidence-base for each identified approach
- **4/2014** Draft of health improvement plan completed and released for comment
- **5/2014** Plan submitted with KDHE public health accreditation application

- **11/2012** Kansas conducts National Public Health Performance Standards State Assessment
- **11/2013** Steering Committee and content experts identify key health improvement plan approaches