



Healthy Kansas 2010

Encourage Change

Improve the Health of all Kansans

Tobacco Data and Evaluation Planning Process

Kansas Department of Health and Environment
Office of Health Promotion



What is Healthy People 2010?

Healthy People 2010 is designed to achieve two overarching goals:

- Increase the quality of years of healthy life
- Eliminate health disparities

Healthy People is designed around:

- 28 focus areas
- 467 objective



Healthy People 2010 Focus Areas

- | | |
|---|---|
| <ul style="list-style-type: none"> • Maternal Infant Child Health • Oral Health • Hearing • HIV & STD • Family Planning • Arthritis • Childhood & Adult Immunization • Disability • Environmental Health • Nutrition & Overweight • Respiratory Health • Physical Activity & Fitness • Food Safety | <ul style="list-style-type: none"> • Occupation Health • Vision • Heart Disease & Stroke • Diabetes • Mental Health • Substance Abuse • Injury and Violence • Cancer • Tobacco • Chronic Kidney Disease • Public Health Infrastructure • Access to Care • Medical Product Safety • Educational & Community Based Program • Health Communication |
|---|---|



Leading Health Indicators

Progress is measured by the 10 Leading Health Indicators, which provide a snapshot of health:

- | | |
|-------------------------------|-------------------------|
| • Physical Activity | • Mental Health |
| • Overweight and Obesity | • Injury and Violence |
| • Tobacco Use | • Environmental Quality |
| • Substance Abuse | • Immunization |
| • Responsible Sexual Behavior | • Access to Health Care |



Leading Health Indicators

Serve as a link the 467 objectives in Healthy People 2010. Indicators selected based on:

- Ability to motivate action
- Availability of data to measure their progress
- Their relevance as broad public health issues



Healthy Kansas 2010

Throughout 2005, a group of Kansans came together, using Healthy People 2010 as a guide, to identify and adopt health priorities that will improve the health of all Kansans.

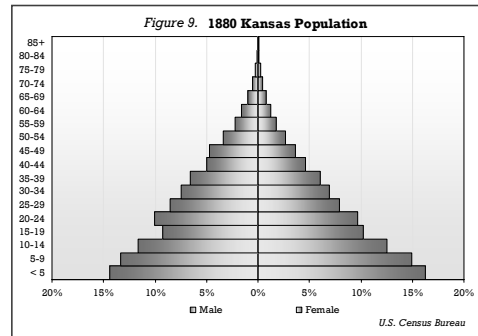
Healthy People/Kansans 2010: 10 Leading Health Indicators

Objective	Kansas Rate (Previous Rate)	Kansas Rate (Current Rate)	HP2010 Goal
Physical Activity			
Increase the proportion of adolescents who engage in vigorous physical activity that promotes cardiorespiratory fitness 3 or more days per week for 20 or more minutes per session.		70% (2005 KS Youth Risk Behavior Surveillance System, grades 9-12)	85% (grades 9-12)
Increase the proportion of adults who engage regularly, preferably daily, in moderate physical activity for at least 30 minutes per day.	38% (2005 KS BRFSS)	38% (2005 KS BRFSS)	50%
Overweight and Obesity			
Reduce the proportion of children and adolescents who are overweight or obese.		11% (ages 12-18, 2002 KS Youth Tobacco Survey)	5% (ages 12-19)
Reduce the proportion of adults who are obese.	24% (2005 KS BRFSS)	26% (2006 KS BRFSS)	15%
Tobacco Use			
Reduce cigarette smoking by adolescents		21% (2005 KS Youth Risk Behavior Surveillance Survey)	16% (grades 9-12)
Reduce cigarette smoking by adults	17.8% (2005 KS BRFSS)	20% (2006 KS BRFSS)	12%

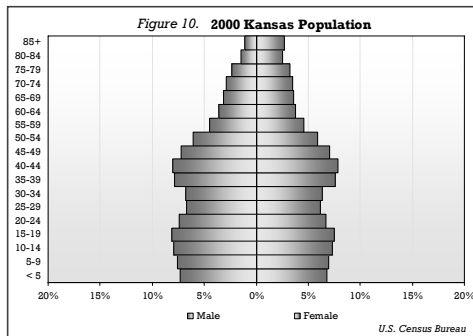
Objective	Kansas Rate (Previous Rate)	Kansas Rate (Current Rate)	HP2010 Goal
Substance Abuse			
Healthy People: Increase the proportion of adolescents not using alcohol or any illicit drugs during the past 30 days.		69% of 6 th , 8 th , 10 th , and 12 th graders reported not using alcohol at least once in the past 30 days	89%
		91% of 6 th , 8 th , 10 th , and 12 th graders reported not using marijuana at least once in the past 30 days (2005 Kansas Communities That Care Survey Youth Survey)	
Reduce the proportion of adults engaging in binge drinking of alcoholic beverages during the past month.	12% (2005 KS BRFSS)	15% (2006 KS BRFSS)	6%
Responsible Sexual Behavior			
Increase the proportion of adolescents who abstain from sexual intercourse		55% (Abstinence only - 2005 KS Youth Risk Behavior Surveillance System, grades 9-12)	95% (includes abstinence or condom use if sexually active)
Mental Health			
Increase the proportion of adults with recognized depression who receive treatment	No Kansas data available that is directly comparable to the HP2010 target	No Kansas data available that is directly comparable to the HP2010 target	50%
Injury and Violence			
Reduce deaths caused by motor vehicle crashes	17.5 deaths per 100,000 population (2004 Vital Statistics, KDHE)	17.7 deaths per 100,000 population (2005 Vital Statistics, KDHE)	9.2 deaths per 100,000 population
Reduce homicides	4.3 homicides per 100,000 population (2004 KS Vital Statistics)	3.8 homicides per 100,000 population (2005 KS Vital Statistics)	3.0 homicides per 100,000 population

Objective	Kansas Rate (Previous Rate)	Kansas Rate (Current Rate)	HP2010 Goal
Environmental Quality			
Reduce the proportion of persons exposed to air that does not meet the U.S. Environmental Protection Agency's health-based standards for ozone.	0% (EPA Aerometric Information Retrieval System)	0% (EPA Aerometric Information Retrieval System)	0%
Immunization			
HP2010 Objective: Increase the proportion of young children who are fully immunized (4:3:1:3:3 series)	77.5% (4:3:1:3:3 series - 2004 National Immunization Survey)	84% (4:3:1:3:3 series - 2005 National Immunization Survey)	80% (4:3:1:3:3 series)
Increase the proportion of noninstitutionalized adults aged 65 years and older who are vaccinated annually against influenza.	66% (2005 KS BRFSS)	72% (2006 KS BRFSS)	90%
Increase the proportion of adults aged 65 years and older ever vaccinated against pneumococcal disease.	67% (2005 KS BRFSS)	70% (2006 KS BRFSS)	90%
Access to Health Care			
Increase the proportion of persons with health insurance.	87% (2005 KS BRFSS)	87% (2006 KS BRFSS)	100%
Increase the proportion of persons who have a specific source of ongoing primary care.	84% (2005 KS BRFSS)	84% (2006 KS BRFSS)	96%
Increase the proportion of pregnant women who begin prenatal care in the first trimester of pregnancy.	87% (2004 Vital Statistics, KDHE)	76% (2005 Vital Statistics, KDHE)	90%

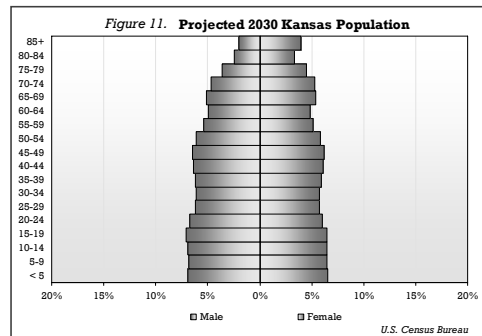
1880 Kansas Population by Age



2000 Kansas Population by Age



Projected 2030 Kansas Population by Age





Healthy Kansans 2010 Cross-Cutting Issues

Identifying the Cross-cutting Priorities

Three cross-cutting priorities impacting multiple Leading Health Indicators were identified by participants in the Healthy Kansans 2010 process

- Reducing and Eliminating Health Disparities
- System Interventions to Address Social Determinants of Health
- Early Disease Prevention, Risk Identification and Intervention for Women, Children and Adolescents

Health Disparities

At a minimum, consider these issues/needs:

- **Racial and ethnic** disparities
- **Economic-related** disparities, including disparities related to income and insurance/health benefit coverage
- **Geographic** disparities, including disparities affecting rural populations, service and provider shortages and maldistributions, and current policies and programs that negatively impact on rural populations
- **Age-related** disparities, including system biases that inhibit the participation of older adults in health/disease care and personal biases that inhibit older adults from seeking out health/disease services

Kansas Performance on Healthy People 2010 Disparities Indicators

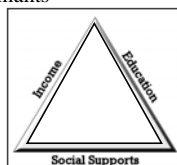
Indicator: Tobacco Use			
Percentage of adults who are current cigarette smokers			
Sub-Population Groups	Kansas Rate 2004	Kansas Rate 2005	Kansas Rate 2006
➤With Disability vs.Without Disability	24% vs. 19%	19% vs. 17%	23% vs. 19%
➤Low Income vs. High Income	30% vs. 14%	31% vs. 14%	34% vs. 16%

BRFSS Data

- Current efforts to address disparities in tobacco prevention will be highlighted later in the day

System Interventions to Address Social Determinants of Health

- Social determinants can be summarized by two variables
 - Class
 - Social supports and social connectedness
- Disparities related to Social Determinants
 - Income
 - Education
 - Social Determinants



Framework for Social Determinants Recommendations

Improve...

- Access to Care
- Cardiovascular Risk Factors
- Prevention/Wellness

By reducing disparities in...

- Income
- Education
- Social Supports



Early Disease Prevention, Risk Identification and Intervention for Women, Children and Adolescents

Three Recommendations

1. Assure access to health care and preventive services for children and parents.
2. Integrate efforts to affect the whole child's emotional and social well-being.
3. Promote the development and adoption of healthy lifestyles.

Actions Selected for Immediate Consideration

- Tobacco: Support a comprehensive tobacco use prevention and control program to reduce exposure to tobacco
- Disparities Data: Routinely collect and report data on all segments of the population (race/ethnicity, gender, rural/urban, economic status, disability status) to identify where improvements are most needed.
- Cultural Competency: Promote culturally competent health practices among health providers among health providers and organizations.

Actions Selected for Immediate Consideration

- Overweight and Obesity: Adopt and implement the 5 national overweight/obesity prevention goals. (Increase fruit and veggie consumption, increase physical activity, decrease screen time, increase breastfeeding, balance caloric intake with expenditure)
- Access: Assure access to quality health care (including oral health and mental health) and preventive services for all

HK2010 Tobacco Recommendations

- Implement Comprehensive Tobacco Control Program in Kansas based on Best Practices by CDC
- Allocate Best Practice Level Funding (\$18.1 Million per year) for tobacco control programs in Kansas
- Enact public policies at the state and local level that reduce the burden caused by tobacco use (CIA Ordinances, Youth Access Ordinances, increased tobacco taxes, etc.)
- Increase support for cessation services (reimbursement for health care providers, NRT, insurance coverage, tobacco Quitline **1-866-KAN-STOP** promotion and resources, etc.)



The Wheels in Motion

Tobacco Related Bills Introduced in the Kansas Senate 2007 Session

Senate Bill 37 – Statewide Smoking Ban

SB 37 would make it unlawful to smoke in indoor areas of public places with an expanded definition of such places that includes food service establishments (restaurants and the like) and bars, would increase the fines for violating this law, and would make the crimes of smoking in an indoor public place and failing to post no smoking signs class C non-person misdemeanors.

This bill has been amended to provide an opportunity for county commissioners to "opt out" of coverage from the proposed statewide ban of smoking.



Senate Bill 90 – Tobacco Tax Stamps

SB 90 focused on taxation relating to cigarettes and tobacco products; meter imprints. SB 90 was introduced and assigned to Senate Assessment and Taxation Committee as a procedural bill relating to sales taxation and exemptions.

Senate Bill 250 - Prohibiting Smoking in Motor Vehicles with Children 8 and Younger

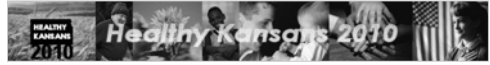
A hearing before the Senate Public Health and Welfare Committee was held on February 7 on this bill to prohibit smoking in cars transporting children eight years and younger. Tobacco control advocates spoke to the importance of protecting children from the hazards of secondhand smoke because of the illnesses such exposure causes. Data was presented on the number of Kansas children reporting such exposure. It was also noted a comprehensive approach at the community level is needed to protect children from tobacco use and secondhand smoke.



Senate Bill 318 – Allocating Bonus MSA Funds to Tobacco Prevention
 SB 318 was introduced to allocate the expected increase in Master Settlement Agreement funds from the tobacco companies to proven best practices in tobacco prevention and cessation programs for Kansas.

Senate Resolution 1803

SR 1803 was a resolution asking the Congress of the United States to end its subsidization of tobacco production because of the health harms caused by tobacco use. SR 1803 was introduced on January 8, 2007 and referred to the Senate Federal and State Affairs Committee on January 9.



The Wheels in Motion

**Tobacco Related Bills Introduced in the Kansas House
 2007 Session**

House Bill 2105 - Prohibiting the Sale of Flavored Cigarettes

HB 2105 would have made it unlawful to sell flavored cigarettes in Kansas adding a fine of not more than \$500 for those persons who did so. The bill was referred to Judiciary Committee on January 19, 2007.

House Bill 2162 - Tobacco-free School Grounds

HB 2162 would have made it unlawful to smoke or use tobacco products in school buildings or on school owned property, and would define a violation of this law as a cigarette or tobacco infraction with a fine of \$25 to \$100. The bill was referred to Health and Human Services Committee on January 24.



House Bill 2243 – Tobacco-free Hospital Grounds

HB 2243 was to amend KSA 21-4017 by expanding the prohibition on smoking in a medical care facility to a prohibition on all tobacco use in a medical care facility and to include all medical care facility property. An exception was provided for licensed long-term care units.

House Bill 2359 – Additional MSA Funds for Seniors' Health

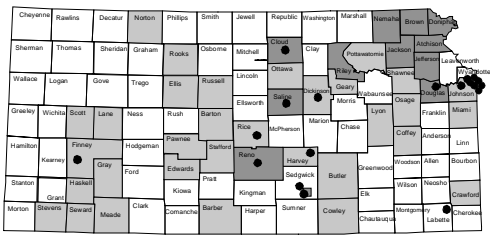
HB 2359 proposed additional disposition of tobacco litigation settlement funds for a seniors' health care fund. The bill was referred to the Appropriations Committee on February 6, 2007.

House Resolution 5014

HR 5014 was a concurrent resolution that spoke to a constitutional amendment to require a super-majority vote on any measure that would create a new tax or increase the rate of an existing tax. HR 5014 was referred to the Federal and State Affairs Committee on February 5, 2007.

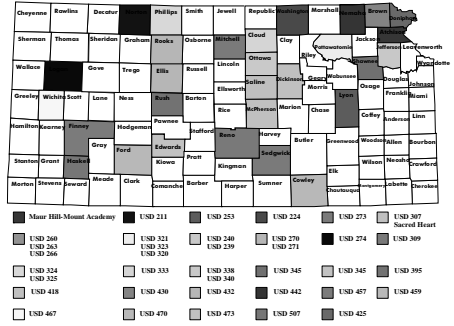


Chronic Disease Risk Reduction Grants
 State Fiscal Year '08



LEGEND Level A Level B Level C
 18
 • CIA Ordinances passed: Abilene, Bel Aire, Concordia, Derby, Fairway, Garden City, Hutchinson, Lawrence, Leaword, Lenexa, Lyons, Mission Woods, Olathe, Overland Park, Prairie Village, Roeland Park, Salina and Walton. There is also one county ordinance in Johnson County that covers unincorporated areas.

School Districts with Comprehensive Tobacco-free School Grounds Policies 2008



What Can I do?

- If you use tobacco, contact the Kansas Tobacco Quitline at 1-866-KAN-STOP
- If you are a health provider, refer patients to the Kansas Tobacco Quitline
- Support tobacco-free policies and ordinances in your community



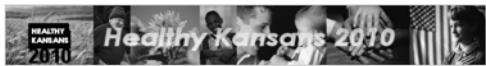
What can my organization or my community do?

- Adopt tobacco-free policies and ordinances.
- Hold meetings and events in tobacco-free facilities and on tobacco-free grounds.
- Provide tobacco cessation opportunities for employees.
- Encourage businesses to fully comply with youth tobacco cessation laws.



What can our state do?

- Increase funding to the Comprehensive Tobacco Program best-practices level (\$18.1 - \$44.7 million) recommended by the Centers for Disease Control & Prevention.
- Pass a no-compromise, statewide clean indoor air law.



Communicating Healthy Kansans 2010



healthykansans2010.org