In the United States, Kansas ranked the 27th healthiest state for 2013 and 2014, bucking a downward trend starting in 1991. In every Kansas community, the risk of developing obesity-related health problems — type 2 diabetes, coronary heart disease and stroke, hypertension, arthritis and obesity-related cancer — is increasing at concerning rates. In addition, one-third of cancer deaths are linked to obesity or lack of physical activity.

In Kansas, the number of adults who are obese has more than doubled in the last 20 years. In 1995, 13.5 percent of Kansas adults were obese. Twenty years later, 30 percent are obese. Wichita State University Center for Community Support and Research

THE HEALTHY COMMUNITIES INITIATIVE (HCI): IMPROVING COMMUNITY HEALTH THROUGH POLICY, SYSTEMS, AND ENVIRONMENTAL CHANGES

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CHANGES IN HEALTH

Healthy Community Initiative (HCI)

Through the Healthy Community Initiative (HCI), the Kansas Health Foundation (KHF) is partnering with 20 Kansas communities to promote policy, systems and environmental changes that support physical activity and increase access to and demand for healthy foods. HCI recognizes the health impact pyramid (Frieden, 2010) that emphasizes the importance of changing environments that make healthy choices the default decision of citizens (See Figure 1).

In addition, HCI recognizes the multiple factors influencing the environments in which people live, learn, work and play. (See Figure 2). Changing the environment to make healthy behaviors easier and more likely requires meaningful, sustainable change facilitated by strong collaborative efforts across community sectors.

Central to HCI are several key partnerships, including:

- **Local Community Leadership Teams:** Each of the 20 participating communities (See Figure 3) has a leadership team, which may include a broader coalition, that has received funding from KHF to implement a range of activities consistent with the change model (See Figure 4) that are designed to build support for policy, systems and environmental interventions that promote physical activity and/or increase access to and demand for healthy foods.

- **Kansas Health Foundation (KHF):** KHF’s primary responsibility is to support community partners in their implementation of local efforts. KHF provides direction through a HCI project director, technical assistance providers, revisions to program design, and a statewide Kansas Advisory Council (KAC).

- **Technical Assistance Providers:**
  - **Center for Community Support & Research (CCSR) at Wichita State University:** CCSR provides assistance on leadership development and the establishment and maintenance of community leadership teams. CCSR staff work closely with local community leadership teams to develop strategies consistent with the HCI change model and regularly conducts HCI community conferences with each other for peer learning.
  - **Healthy Kids Challenge (HKC):** HKC provides assistance on specific healthy eating and active living strategies and tactics necessary to create community support for policy change.

**Communities to Promote Policy, Systems, and Environmental Changes**

- **Public Health Law Center (PHLC):** PHLC provides assistance to potential public policy strategies designed to achieve HCI goals. The PHLC is a national nonprofit organization of law and policy specialists helping health leaders, officials and advocates use the law to advance public health.

HCI included two primary phases: Community Planning and Implementation. During the planning phase, local communities identified current efforts already underway in their community or region, identified community stakeholders, and created an initial action plan to advance their identified policy. After the planning, HCI community leadership teams and their allies used this policy plan.

Examples of policies strategies included:

- Policies to promote physical activities, such as encouraging walking and bicycling for transportation and recreation through improvements in the built environment, such as linking neighborhoods to schools, workplaces, recreation centers, grocery stores.
- Improving access to public transportation, increasing the safety, appearance and usability of public areas, including streets and public spaces where people are or could be physically active.
- Improving access to outdoor recreational areas.
- Establishing worksite wellness policies that encourage physical activity during the work day.
- Increasing community access to healthy foods in supermarkets, grocery stores, and convenience/convenience stores.
- Improving the availability and identification of healthy foods in restaurants/public service venues.
- Addressing zoning laws which could reduce barriers for designating portions of public property for community gardens and farmers markets.
- Improving the availability and affordability of healthier food and beverage choices in public service venues, including after-school programs, child care facilities, recreation centers and worksites.

The community change framework (See Figure 4) illustrates the activities asked of HCI partners in order to make progress on creating a community/environment supportive of access to healthy food and physical activity.

COMMUNITY MOBILIZATION

A broad constituency needs to be committed to ensuring public support for the promotion of healthy behaviors; helping mobilize the community to voice its support for the policies, and helping educate policy makers about the issues. Strong community partnerships include diverse groups of people reflecting the entire community. Community mobilization is designed to engage partners across sectors, including schools, employers, public health, health care, city/country government, food producers, faith community, and farmers.

ADVOCACY WITH ORGANIZATIONAL DECISION MAKERS

There are activities designed to change or develop organizations’ policies by creating environments that make the healthy choice the easy choice. Examples of advocacy with organizational decision makers include:

- Meeting with organizational decision makers to discuss the benefits of health promotion policies.
- Coordinating efforts with key partners to approach organizations as part of a team.
- Developing issue-specific toolkits/factsheets for organizational business leaders;

GOVERNMENT POLICY MAKER EDUCATION

This refers to educating local policy makers about the health and economic impact of the policy priority chosen by the HCI community partners. This can include (1) sending government policymakers’ information about the issues and ongoing efforts to address the issue, (2) convening local policy makers to educate them through expert presentations and the HCI initiative can provide, and (3) meetings with government policymakers to present local data related to the policy priority and build the will of policy makers to address the issue.