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MINUTES OF THE HOUSE COMMITTEE ON AGRICULTURE.

The meeting was called to order at 9:15 a.m. on February 2, 1995, in Room 423-S of the Capitol.

All members were present except: Representative Bryant - Excused

Committee staff present: Raney Gilliland, Legislative Research Department

Kay Scarlett, Committee Secretary

Conferees appearing before the committee:

Marc A. Johnson, Dean of Agriculture and Director of Kansas Cooperative Extension Service, KSU

Richard D. Wootton, Associate Director of Extension, KSU

Carolyn S. Wilken, Extension Specialist, Aging and Health Care, KSU

Ronald C. Young, Extension Specialist, Local Government & Rural Health Policy, KSU

Susan Krumm, Extension Agent, Home Economics, Douglas County

Others attending: See attached list

Marc A. Johnson, Dean of Agriculture and Director of Kansas Cooperative Extension Service at Kansas State University, gave an overview of health education developments in Kansas as they relate to the Extension Service. Surveys show that the health care needs of almost 60 percent of Kansas counties are underserved. Cooperative Extension is helping with family and community based efforts which enable people and communities to work together to address health care needs. This effort makes effective use of state specialists at Kansas State University, with the cooperative efforts of state agencies, the Kansas Hospital Association, Kansas Health Foundation, University of Kansas Medical Center, and other health care providers. Extension agents and specialists provide the educational programs that focus on improving health systems and health policy at the county and community level. (Attachment 1)

Richard D. Wootton, Associate Director of Extension, Kansas State University, reported that educational health programs addressing wellness, nutrition, and safety are delivered statewide by Extension Service professionals. Until recently the emphasis in health care has been reactive. Someone was either sick or had developed the symptoms of an illness before help was sought. Now the emphasis is shifting to preventive health care. Cooperative Extension helps communities develop a comprehensive and collaborative approach to policies, systems, and financial requirements related to health.

Carolyn S. Wilken, Extension Specialist, Aging and Health Care, Kansas State University, reported that older adults are a significant part of the traditional Extension audience. The Extension Service has created educational opportunities in such areas as nutrition, retirement, living wills, grief, Alzheimer's disease, caregiving, insurance counseling, stress, nursing home choices, hospice, estate planning, and other health care decisions. She commented that with the University of Kansas Medical Center's medical expertise and Kansas State University Extension Services's educational programs, together, they can put out a lot of health information across the state.

Ronald C. Young, Extension Specialist, Local Government & Rural Health Policy, Kansas State University, reported that because of interest and expertise, Kansas received a federal grant to act as a national resource in developing educational materials in health reform. Publications and educational resources produced in Kansas are distributed nationwide. Specialists from Kansas also briefed members of Congress on rural health care economics as part of an expert panel for rural policy research. With the assistance of a \$1.6 million endowment, Cooperative Extension has established a Distinguished Professor in Community Health position and plans to establish an Extension Office for Community Health. This will greatly expand the statewide scope and impact of Extension programs in community and rural health.

Susan Krumm, Extension Agent, Home Economics, Douglas County, reported how extension professionals are actively helping individuals and communities adopt healthier lifestyles, reduce foodborne illnesses, and make better use of health-related services. Food safety and quality problems are of increasing concern because foodborne illnesses continue to escalate. Extension professionals deliver research-based education to

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON AGRICULTURE, Room 423-S Statehouse, at 9:00 a.m. on February 2, 1995.

consumers and foodhandlers about food safety and quality. She reported on several specific Extension food safety programs. She provided the committee with a sample of literature distributed by the Cooperative Extension Service. (Attachment 2)

Vice-Chairperson Steve Lloyd thanked Dean Johnson and Extension faculty and personnel for an informative presentation. The committee was asked to review the minutes of January 31. If there were corrections or additions to please notify the secretary by 5:00 p.m. today, or they would be considered approved as presented.

The meeting adjourned at 10:00 a.m. The next meeting is scheduled for February 6, 1995.

HOUSE AGRICULTURE COMMITTEE GUEST LIST

DATE:	February	2,1995

NAME	REPRESENTING
Carolyn Swilken	KSU Extension
Susan Kumn	County Extension Douglas
Suhan D Woother	KSU Cooperative Extension
Marc A. Johnson	K-State Univ.
1/on / OUNG-	1x SU Coup Extension
Patti Ongraham	5, m. Parent/Usitor
Karman White	J. M. Parent / Visitor
Hyde Tacobs	KSU
Marty Vanier	KS Ag Alliance
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HEALTH EDUCATION

DEVELOPMENTS IN KANSAS

A REPORT TO THE KANSAS LEGISLATURE

by the Kansas Cooperative Extension Service January 1995

KANSAS STATE UNIVERSITY

House Ogriculture Attachment 1 2-2-95 This report contains brief reports on health education developments in Kansas by the Kansas Cooperative Extension Service.

Overview Marc A. Johnson	1
Extension Thrusts Richard D. Wootton	2
Aging and Health Care Carolyn S. Wilken	3
Rural Health Policy Ronald C. Young	4
County Health Programs Susan Krumm	5

HEALTH EDUCATION DEVELOPMENTS IN KANSAS

OVERVIEW

Marc A. Johnson, Dean of Agriculture and Director of Kansas Cooperative Extension Service

Introduction

Health care in rural areas is a community, state, and federal issue about which many Kansans are concerned.

Surveys show that the healthcare needs (for primary care, allied health professionals, and health care administrators) of almost 60 percent of our Kansas counties are underserved, and nearly 50 percent are critically underserved. Demographics show that the proportion of our population over 65 is increasing rapidly. In 1990, 13 percent of all Kansans were older than 65, but in some counties the proportion is greater than 25 percent. Because many older citizens cannot afford long-term care, families provide 80 percent to 90 percent of the required care. However, the total need for health care services in rural areas and communities remains critical.

Educational Developments

Cooperative Extension is helping with family and community based efforts which enable people and communities to work together to address health care needs. This effort makes effective use of state specialists at KSU, specialists in five area offices, and agents in every county. It involves cooperative efforts with state agencies, the Kansas Hospital Association, Kansas Health Foundation, University of Kansas Medical Center, and other health care providers.

Extension agents and specialists provide entree to the medical and health research base located at land-grant and state universities. This linkage is critical to the success of educational programs that focus on improving health systems and health policy at the county and community level.

Health Care Programs

Health care programs in Cooperative Extension include:

The Health Specialist Work Group: This interdisciplinary group of Extension professionals is charged with organizing programs in areas such as:

- Health reform and the consumer.
- Health promotion for older Kansans.
- Nutrition and health.
- Lifestyle changes to reduce health problems.
- Mental wellness and coping skills.

Community Health: To provide program leadership, and with help from the Kansas Health Foundation, Cooperative Extension has recruited a Distinguished Professor of Community Health and established an Office of Community Health. Three important goals will be addressed:

- Personal decisions for health promotion and disease prevention.
- Personal and organizational decision-making to improve access to and affordable health care.
- Building capacity to analyze and implement actions relating to community health infrastructure needs.

Reaching Target Audiences

Our implementation plan involves active cooperation with state agencies and health-related groups and will focus on:

- Joint programs with community leaders facilitated through the PRIDE Community Improvement Program.
- Joint projects with state agencies and professionals in the health care field.
- County extension programs targeted at specific audiences, including the elderly, teenage mothers, limited-resource individuals, limited-resource communities, and rural agricultural families.

Summary

Progress of this important program will be tracked through the Extension Accomplishment Reporting System and the achievement of short- and long-term goals. We thought you would be interested in this important statewide effort which impacts the health care needs of communities and individual citizens.

Your suggestions and comments are invited.

EXTENSION THRUSTS

Richard D. Wootton, Associate Director of Extension

Introduction

Educational programming related to health issues is not new to the Kansas Cooperative Extension Service. Aggressive and successful programs have been organized for statewide delivery by Extension professionals. Those programs address wellness, nutrition, and safety and are applicable in both rural and urban settings. In the mid 1980s and again in the 1990s, many Kansans faced stressful and difficult situations because of personal or financial difficulty. Cooperative Extension also organized programs to address the special needs of an aging population that include financial and legal issues related to health.

Health Care

Until recently the entire emphasis in health care has been reactive. Before help was sought, someone was either sick or had developed the symptoms of an illness. However, in the 1990s the emphasis is shifting to preventative health. Access to personal health care is still important, but, increasingly, individuals are seeking strategies and programs by which illness and unhealthy lifestyles can be avoided. Cooperative Extension makes an excellent partner in helping communities develop a comprehensive and collaborative approach to policies, systems, and financial requirements related to health.

Assessing Community Health Care Resources

Many communities want to know what resources are needed to address health needs. They also want to know how much their community can afford to spend. Simultaneously, local interests want to know what health and infrastructure needs they must have if the community is to grow.

As part of its community and economic development efforts, Cooperative Extension helps communities assess their health delivery system and the economic consequences of their decisions. Frequently, these assessments can be part of a more extensive strategic planning effort. Extension professionals help local decision-makers in their efforts to organize, implement, and analyze local needs.

Last year, when there was considerable discussion about health care reform, KSU developed resources for the National Extension System which helped county agents and extension specialists organize programs and explain various options. These materials were distributed in every state.

Community Health

Recently, the KSU Cooperative Extension Service received a grant from the Kansas Health Foundation to hire a Distinguished Professor in Community Health. An Office of Community Health has also been established to serve as a campus- and statewide hub for addressing health-related issues. These developments will provide Cooperative Extension with an expanded capacity to deliver health-related programs. The support from the Kansas Health Foundation requires that efforts at KSU be coordinated with those of Wichita State University and the University of Kansas Medical Center. This networking among Regents' institutions will ensure that taxpayers get good value and integrated, up-to-date programs.

Information-Age Technology

Information-age technology is already impacting health care issues. Primary care physicians use interactive, compressed video to consult with specialists in large urban hospitals. Some futurists suggest that this use of the information highway will provide a level of interaction that could reverse the rural to urban population shift that has been taking place for years. If this were to happen, a whole new set of dynamics would be set in motion that would favorably impact the plight of rural communities.

Summary

I'm pleased to present this summary of health care programs in the Cooperative Extension Service—programs that address important needs for rural and urban communities.

AGING AND HEALTH CARE

Carolyn S. Wilken, Extension Specialist, Aging and Health Care

Demographics

In the United States, 13 percent of the population is aged 65 or older. In Kansas, 91 counties (87%) exceed this national average. Elk County leads the state with 29.6 percent of its population 65 or older—over twice the national average. The number of elderly over age 85 in Kansas is higher than in 45 other states, and Smith County Kansas has a higher percentage of people over 85 than any other county in the entire United States Some Kansas counties had as many aged in 1990 as the United States is expected to have by 2030 when all baby boomers born between 1946 and 1964 are over 65.

Extension Response to Issues in Aging and Health Care.

Educational Programs: Extension agents know that aging and health care issues require an interdisciplinary, multiagency approach. They create educational opportunities in areas such as nutrition, retirement, living wills, grief, Alzheimer's disease, care-giving, insurance counseling, stress, nursing home choices, hospice, estate planning, and health care decisions. Local multi-agency groups often include health care providers like hospitals or public health departments; agencies on aging; senior centers; businesses; service organizations; and religious groups.

Elderly Participants: Older adults are a significant part of the traditional Extension audience. Extension programs reach older women through family and community education groups but also through innovative programs with other agencies and organizations as well as public meetings and the print and broadcast media.

Nutrition Education: Extension agents provide nutritional and health-related lessons at nutrition and senior centers. This helps nutrition centers meet a federal mandate for regular nutrition education. Topics include the relationship between diet and cancer, diet and heart disease, and the import of various nutrients. In Mitchell County, milk consumption doubled following an Extension program on the importance of calcium for older adults.

Health Care Systems: Extension agents are key members of community health care coalitions and offer expertise in community organization, strategic planning, and adult education. A Pratt County program, Health Care in the 21st Century, focused on health care systems and was used by 27 leaders in 5 counties to inform citizens on the health care debate.

Health Fairs: County agents utilize local health fairs to present information on aging and health care. Older adults are quick to utilize any screening service and take advantage of printed materials and educational programs on stress management, choosing a nursing home or homecare environment, estate planning, mental health, or grief and mourning. In 1993, thematic health fairs focused on women's health issues and the celebration of age.

Assisted Living: Agents in Gove and Rawlins counties worked with community coalitions to survey the need for assisted living apartments for older adults. They learned that residents in rural communities prioritize the services they want differently than their urban counterparts.

Counseling: Sedgwick county provides health insurance information to clientele through volunteers trained with the help of the Kansas Commission of Insurance. Based on that success, the Kansas Department of Aging awarded a Senior Health Insurance Counseling grant to Sedgwick, Butler, and Harvey counties. One set of clients saved \$50,000 in insurance and \$10,000 in prescription drug costs.

Cooperative Programs: "A Caregiver's Guide for Alzheimer's and Related Disorders" is a joint project of the Department of Aging and Cooperative Extension. With additional funding by Western Resources, 30,000 copies were printed for use in Kansas. This program is now used throughout the state and across the nation. A similar publication about Parkinson's disease is being prepared.

In 1995, a primary strategy to address aging and health care issues will be the statewide Personal Actions for Health project funded by the Kansas Health Foundation. Utilizing the interdisciplinary, multi-agency strategies described above, Extension will join forces with colleagues in aging, health, and business to develop local programs focused on proper nutrition and physical activity.

Distinguished Professor: KSU programming in aging and health care will benefit from the appointment of Dr. Jon Rolf, Kansas Distinguished Professor of Community Health. He will work closely with faculty and others to develop innovative programs related to health care for all Kansans.

Summary

Extension professionals in aging and health care are working effectively to meet the priority needs for targeted audiences, the critical needs of older Kansans, and to foster effective health care partnerships and programs.

RURAL HEALTH POLICY

Ronald C. Young, Extension Specialist, Local Government & Rural Health Policy

Health Reform Education

The Kansas Cooperative Extension Service (CES) responds to health issues identified by county extension councils and to health initiatives suggested by the USDA Extension Service. Because of interest and expertise, Kansas received a federal grant to act as a national resource in developing educational materials in health reform. Thus, publications and educational resources produced in Kansas are distributed nationwide. These materials enable county agents in Kansas and other states to organize effective programs in health policy and health reform. Specialists from Kansas also briefed members of Congress on rural health care economics as part of an expert panel for rural policy research.

Support of State Agencies

Extension specialists often serve as an information resource for health organizations and agencies in health policy and related activities. This entails cooperative efforts with the departments of Aging; Health and Environment; Social and Rehabilitation Services; the Kansas Health Care Governing Board; and the Kansas Hospital Association. Program activities encompass work with legislative policy, senior care, emergent technology, rural health, health and chronic disease, and telemedicine. Extension specialists also serve on the Kansas Health Care Data governing board and provide information for their technical task force.

Community Health Systems

Through a series of educational and organizational activities, Cooperative Extension is proactive in helping Kansas communities in their development of local health policy and local health systems. Needed data are obtained by organizing, administering, and analyzing community health surveys. In Gove County, the surveys focused on determining the need for long-term-care facilities. In Stafford County, the emphasis was on community health need.

The Kansas PRIDE program is a statewide community improvement program. Extension and Department of Health and Environment personnel help community leaders and volunteers develop programs in local and rural health systems and other community improvement projects. County agents also cooperate with the Kansas Health Foundation in organizing and reporting the accomplishments of integrated community health projects.

With the assistance of a \$1.6 million endowment, Cooperative Extension has established a Distinguished Professor in Community Health position and plans to establish an Extension Office for Community Health. This will greatly expand the statewide scope and impact of Extension programs in community and rural health.

To demonstrate the relationship between health systems and rural economic development, specialists are analyzing the economic impact of local health systems. The studies often focus on hospitals and allow local health system administrators and policy makers to understand the link between health systems and the local economy. Last year, approximately 20 studies were completed.

Extension specialists are helping communities gain access to telecommunication resources. A few administrators have used this information to develop grants for telecommunication equipment and for resources to better access telecommunication equipment at K-State and other universities. This effort is now being extended to rural health care systems.

Regents Institutions

Extension specialists are cooperating with numerous university groups on health care and health policy. Efforts with the KSU Center for Aging and the National Resource Center, University of Kansas Medical School, focus on policy and educational materials that impact rural long-term care. KSU specialists also serve on the Medical School Primary Area Physician Education Task Force for Community Practice Support 1994. They assisted the KSU Institute for Social and Behavioral Research and the College of Human Ecology in developing the Kansas Poll, a comprehensive poll on health policy and related concerns.

KSU faculty members have cooperated with faculty from Wichita State University, Fort Hays State University, and the University of Kansas and expect those activities to expand the state's outreach capability in health-related programs.

Other Activities

Because of its county, area, and statewide network, its work with educational and industry associations, and the establishment of a Distinguished Professor and an Office for Community Health, the Cooperative Extension Service is expanding its capability to provide policy-related educational information to all sectors of the health care industry.

COUNTY HEALTH PROGRAMS

Susan Krumm, Extension Agent, Home Economics, Douglas County

Decisions for Health

Cardiovascular disease, foodborne illness, substance abuse, cancer, adolescent pregnancy, and accidents are major causes of illness, disability, and death. Each is linked to risk-increasing behavior like poor nutrition, mishandled food, insufficient exercise, use of tobacco or alcohol, and unprotected sexual activity. Each is substantially preventable at individual and community levels.

Health promotion programs enable people to improve their health. However, behavioral changes that promote good health are difficult to make unless people acquire accurate information, needed motivation, and support from their family and community. Cooperative Extension, in cooperation with community agencies and organizations, is helping people make these changes through effective health promotion and disease prevention programs.

Extension professionals are actively helping individuals and communities to 1. adopt healthier lifestyles, 2. reduce foodborne illnesses, and 3. make better use of health-related services.

Preventing Foodborne Illnesses

Food safety and quality problems are of increasing concern because foodborne illnesses continue to escalate. Currently, as many as 33 million people contract foodborne illness each year and spend about \$420 million annually on direct medical costs. Lost productivity totals another \$7.3 billion. Another benefit of reducing foodborne illness is the "implied value" of saving human life. Economists calculate that the implied value of saving a life is \$4 million to \$7 million.

In 1993, 43 percent of the family's food budget was spent on meals eaten out of the home. In 1994, this figure is expected to be over 50 percent. Although much attention is focused on chemicals in the food supply, including hormones and pesticide residues, more than 79 percent of outbreaks of foodborne illness are traced to food prepared by foodservice establishments. A second major cause of foodborne illness is improper preparation and handling in the home. Outbreaks, such as those caused by E. coli 0157:H7 bacteria, are largely preventable through education and proper food-handling practices.

Because food safety is a national and regional concern, producers, processors, distributors, retailers, foodservice industry, and consumers need accurate information about food safety and food quality issues. Extension professionals in Kansas are addressing these concerns through model programs targeted at critical segments of the public and food production system. Extension programs emphasize food

safety and critical control during the production/processing cycle and the prevention of foodborne illness in homes, foodservice establishments, and child care centers.

County Extension Educators in Action

Extension professionals deliver research-based education to consumers and foodhandlers about food safety and quality. Their critical role in this endeavor is receiving statewide recognition.

Job Skills Training

Food Safety Training for KanWork Participants: Seven Kansas counties are participating in the KanWork Food Safety pilot program. Through a targeted grant, the Social and Rehabilitation Services (SRS) and the Kansas Extension Service are cooperating to provide food safety and job skills training to KanWork participants. The objective is to increase job opportunities in the foodservice industry for KanWork participants and to reduce the incidence of foodborne illnesses in the state.

Handling Practices Adopted Through Education

Food Safety in Foodservice: Because of ideas generated in 16 public policy educational forums on food safety, training programs were implemented in numerous Kansas communities. Extension agents in over 80 Kansas counties are certified to teach food safety to foodservice employees. This helps them adopt safe food handling and personal hygiene practices. The emphasis is on implementing Hazard Analysis at Critical Control Points (HACCP) during the entire preparation and consumption process.

County agents in cooperation with various partners—Kansas Department of Health and Environment, Department of Aging, State Board of Education, KSU and KU resident hall foodservices, public school foodservices, hospitals, retirement homes, and food distributors—have presented a series of food safety courses, ranging from 5–16 hours in length. Participation in this series has changed the attitude, behavior, and action of over 500 foodservice employees who impact the health of thousands of Kansans each day.

Safe Food for Children: Young children are particularly vulnerable to foodborne illnesses because of a limited capability to resist disease. Education about food safety and food-handling practices has affected hundreds of Kansas teachers, childcare providers, Headstart families, parents, and children. Food safety topics are covered through video vignettes, lesson plans, learning activities and experiments for children, and newsletters for parents.

Reducing the Risk of Foodborne Illness at Fairs, Festivals, and Catered Events: Food handlers who prepare and serve food at fairs, festivals, and catered events are often untrained in food safety. Thus, the potential for severe outbreaks of foodborne illness is notable. Through Extension, over 450 Kansas adults and youth were trained on the importance of handwashing, personal hygiene, food temperature control, and sanitation of equipment and facilities.

4–H Enrichment Program: One Kansas county is expanding food safety education through their 4–H School Enrichment Program by offering the program "MICROORGANISMS.... Would You Put These in Your Mouth" to students 7 to 12 years of age. Safe food handling practices for youth are emphasized utilizing simple experiments and activities.

Safety Fairs: Displays on safe food handling practices were organized for 1,725 employees, youth, and parents. The programs included Safety Fairs for Children and for Hallmark Cards employees.

Safe Food for the Hungry: A satellite teleconference was downlinked in Kansas on preparing and serving safe food for the hungry. Participants included volunteers and employees from food pantries, food banks, emergency shelters, and soup shelters.

Future Directions

Food safety education is impacting the health and wellbeing of families, food handling practices, and economic opportunity for low-income employees previously on public assistance. Although the issues and challenges may change, there will be a continual need for food safety research and Extension education to ensure the safety, quality, and nutrition of our food supply.

EXTENSION













Cooperative Extension Service Kansas State University, Manhattan, Kansas

MENTAL HEALTH

INTRODUCTION













HEALTH POLICY AND HEALTH SYSTEMS DEVELOPMENT SAFETY

FINANCIAL AND LEGAL ISSUES IN HEALTH CARE

MENTAL HEALTH

WELLNESS

AGING

Nutrition

INTRODUCTION

THE KANSAS EXTENSION HEALTH EDUCATION PROJECT

or over 75 years the Kansas Cooperative Extension Service has provided you with materials and programs designed to improve your health and the health of your family. In the early years Extension sponsored baby weighings at the Kansas State Fair, war-time bandaging demonstrations and home nursing classes. Today, county Extension agents conduct health education programs on a wide range of topics. Tomorrow, we expect to do even more.

The Kansas Extension Health Education project brings together Extension faculty from across the state to focus on health issues and concerns of Kansans. Educational materials and programs discussing health issues such as caregiving, nutrition, living wills, health promotion/disease prevention, stress management, wellness, insurance, and community health policies are readily available through your county Extension office.

This booklet describes some of the Kansas Extension HealthEducation programs and publications available through your county Extension agents. Give them a call today.



INTRODUCTION

SAFETY

AGING

MENTAL HEALTH

NOMBRADIN



HEALTH POLICY AND HEALTH SYSTEMS DEVELOPMENT

In 1990, 61 Kansas counties were identified as underserved in health care, including 52 that were critically underserved. The Office of Local and Rural Health Services of the Kansas Department of Health and Environment states, "The epidemic of medical underservice is hardly news anymore. Lack of access to basic health care has become one of the major problems plaguing rural Kansas." (Primary Care Underserved Areas Report: Kansas 1993, p.3) The shortage of other allied health professionals and administrators in rural areas is equally critical.

Given this background, there is a pressing need to enlarge the pool of health care resources in Kansas. The Cooperative Extension Service is responding to the challenge of health care delivery.

Extension offers many programs in health policy and health care delivery system development. They include:

- Health Care System Economic Impact Analysis
- Heath Care System Marketing
- Community Health Councils Organization
- · Health Policy Education and Information
- Educational Programs Explaining Rural Health Systems

- Demographic Analysis
- Health Needs Assessment
- Local Health Systems and Business Community Linkages
- Long Term Care Systems Planning
- Health Systems Strategic Planning
- Data Analysis and Program Evaluation

Reports:

Health Reform Choices: A Guide to Health Reform Alternatives

Health Reform: The Clinton Health Reform Plan

Assisted Living Apartment Complexes in Rural Kansas: A Survey

of Gove County Residents

Fact Sheets:

Health Reform: Reasons for Considering Health Reform

Health Reform: The Managed Competition Health Care Reform Plan

Health Reform: The Single Payer Health Care Reform Plan

Health Reform: Insurance Reform Health Care Plan Health Reform: The Glossary of Health Care Terms

Health Reform: How a Bill Becomes a Law in the U.S. Congress

Health Reform: How to Use the Almanac Information Server at ES-USDA

Health Reform: The Republican Health Reform Plan

HEALENT POLICY

MENTAL HEALTH

FINANCIAL AND LEGAL ISSUES



SAFETY

Accidents are a leading cause of death in Kansas, claiming approximately 1,000 lives a year. Accidents are the number one cause of death for individuals from age 1 to 37. Motor vehicle crashes account for approximately half of the deaths from accidents; falls rank second, followed by poisoning, drowning, and residential fires.

Safety education programs reduce death and suffering from accidents. Simple things such as using a seat buckle, putting fresh batteries in a smoke detector, or removing clutter from walkways can reduce the risk of serious injury or accidental death.



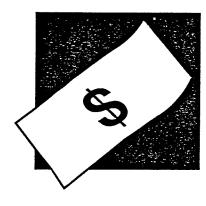
The following Kansas Cooperative Extension publications may help in reducing death or injuries from accidents:

Anhydrous Ammonia Safety, MF-990 Children's Clothing (Safety), MF-647 Ensuring Safe Drinking Water, MF-952 Farm Machinery Safety, MF-1005 Farmstead Safety, MF-1015 Farm Vehicle Safety, MF-1024 Home Fire Safety, MF-644 Household Product Disposal Guide, MF-965 Paints and Solvents, L-826 Poison Prevention, MF-645 Pesticide Safety, MF-986 Residential Air Quality: Fine Particle Pollution, NCR-393 Safe Furnishings and Equipment for Children, MF-642 Toy Safety, MF-643 Tractor Safety, MF-984 Using Household Products Wisely, L-827 Using Pesticides Safely, L-828 Water Safety for Children, MF-646

FINANGIAL AND LEGAL ISSUES

SAFETY

MENTAL HEALTH



FINANCIAL AND LEGAL ISSUES IN HEALTH CARE

Access to quality, comprehensive, and affordable health care is a major issue in today's society.

As health care costs continue to rise faster than family income, many families find it increasingly difficult to pay for health care. Concerns have intensified about employee health care, the Medicare system, the Medicaid system, the cost of treating catastrophic or chronic illnesses, and those Americans with little or no health insurance.

Growth in the number of older adults will increase demand for long-term care—either in the home or in nursing homes and other types of group care. Unfortunately, some 82 percent of those polled in a Harris survey indicated thay could not afford to pay for long-term care.

The following list describes Kansas Cooperative Extension programs and publications concerning some related financial and legal issues:

Estate Planning: Getting Started, L-849 Estate Planning: Gift, Estate, and Inheritance Taxes, L-850 Estate Planning: Wills and Probate, L-851 Estate Planning: Trusts, L-852 Estate Planning: Gifts, Life Insurance and Annuities, L-853 Organizing Household Records, L-801 Our Valuable Records, MF-685 (Rev.) Taking Inventory: Protecting Your Household Possessions, L-776 Your Wishes Made Known: The Living Will and Medical Durable Power of Attorney, S-48

MENTAL HEALTH
WELLNIESS



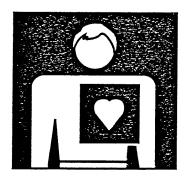
AGING

America is growing older. The proportion of the population over 65 years of age has increased far more rapidly than the rest of the population for most of this century. Kansas is no exception. In 1990, 13 percent of Kansans were over 65. In many counties, the percentage of people over 65 is more than 25 percent.

Families play an important role in the lives of older adults by providing between 80 to 90 percent of the care needed by older family members.

The following Kansas State Cooperative Extension publications were designed to help older adults and their family members understand the physical, social, economic, and emotional changes that occur with aging:

A Caregiver's Guide for Alzheimer's and Related Disorders, C-726 The Second Half of Life Series The "Old" Old Years, MF-898 The "Young" Old Years, MF-897 The Middle Years, MF-896 Second Half of Life: A Home to Live In, C-717 Wellness in Retirement, NCR-263



WELLNESS

Many of our most serious health problems are directly related to personal habits or behavior: smoking, alcohol, drug abuse, sedentary patterns of work and recreation, poor eating habits, excessive exposure to stress and environmental risks, and failure to use seat belts. A recent study showed that Kansans need to improve their lifestyles: 34 adults surveyed were obese, 30 adults do not wear their seat belts, and 21 adults surveyed currently smoke. The American Cancer Society estimates that in the United States as many as 600,000 cases of skin malignancies will be diagnosed per year, most the result of excessive exposure to UV radiation.

Scientists believe that if people at risk were to improve their eating habits, stop smoking, exercise, and control their blood pressure, they could substantially reduce seven of the ten leading causes of death.

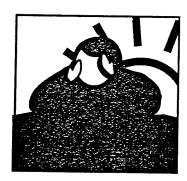
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MENTAL HEALTH
WELLINESS

The following Kansas Cooperative Extension publications discuss wellness:

Feeling Great: Exercise for All, C-616 Healthy Lifestyles, MF-783 Want to Lose Weight? Exercise! MF-895 Water: AVital Nutrient, NCR-302

See Nutrition for more titles.



MENTAL HEALTH

Cooperative Extension recognizes that Kansans need affordable, accessible and effective mental health services. Since mental health problems do not occur in isolation and are often associated with other health or personal problems, Extension supports an integration of mental health and other health and human services responses in the community. Building interagency service and prevention networks at the community and state levels is central to community mental health programs.

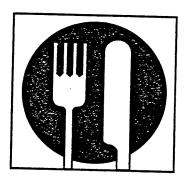
A statewide advisory council of care giving professionals serves as a clearinghouse for project information. Extension is dedicated to increasing mental health awareness; improving mental wellness; and successful adaptation to change. The Kansas Cooperative Extension Service offers many materials related to mental health, including:

Assist by Caring Today: What Can You Do to Help Farm Families in Distress, MF-1062 Building Positive Support Groups, C-686 Choice Not Chance-Enhancing Your Marital Relationship, S-32 Depression: Stop the Whispering, MF-1056 Friends In-Deed: A Course in Helping, MF-806 Learning to Live Through Loss: Grief and the Mourning Process, L-842 For Teenagers: Facing the Loss of Someone You Love, L-888 Understanding Men Who Grieve, L-889 Job Loss Triggers Grief Work, L-890 Helping Children Understand Grief, L-891 Loss of the Family Enterprise, L-766 Stress on the Farm Series Exercising for the Health of It, MF-619 Farming and Fatigue, MF-617 Team of Experts, MF-618 Transitions: Strengthening Mental Health in Kansas (newsletter)

Flood Fact Sheets:

Children May Experience Long-Term Effects of Disaster A Flood of Emotions
A Flood of Emotions: When Crisis becomes Chronic Flood of Emotions. . Will It Ever End?
Helping Children through the Flood
Helping the Helpers





NUTRITION

Good health begins with good nutrition, and good nutrition begins with choosing a healthful diet. A healthful diet is one that is low in fat and includes a variety of foods to supply the needed nutrients. At the same time, it provides the right amount of calories to maintain a healthy weight.

It is important for young children to develop sound eating habits and attitudes. If these habits and attitudes are continued throughout life, they may reduce the risk of a host of chronic diseases including obesity, heart disease, high blood pressure, stroke, diabetes, osteoporosis, and some forms of cancer.

Keeping food safe is also an important part of staying well.
Millions of cases of foodborne illnesses are reported each year in the
United States. Many of these could be prevented by keeping hands
and equipment clean and using safe food-handling techniques.

The following Extension publications and educational programs provide guidance on how to choose a healthy diet:

Abbreviations, Agencies & Laws, NCR-464 All Fats Are Not the Same, NCR-350 Avoid Too Much Sugar, MF-867 Blood Pressure Too High? Here's Help, NCR-352 Chemicals and Our Foods, L-777 Cholesterol Guidelines for Children, NCR-431 Cholesterol Too High? Here's Help, NCR-349 Determine Your Nutritional Health (Handout B), GT-332 The Diet and Cancer Connection, L-846 Eat a Variety of Foods, MF-864 Food Safety: Common Terms, Acronyms, Microorganisms and Food, NCR-447 New Food Labels, L-883 Plate It Safe (poster), NCR-448 Preventing and Treating Coronary Heart Disease by Diet, NCR-348 Preventing and Treating Hypertension by Diet, NCR-351 Red Meats: Nutrient Contributions to the Diet, MF-974 Safe Food for Children -Videos and teaching kit Starch and Fiber for Health, L-824 Tots at the Table -Newsletter series (NCR-430) and teaching kit



FOR MORE INFORMATION ABOUT HEALTH EDUCATION, VISIT YOUR COUNTY EXTENSION OFFICE



Cooperative Extension Service Kansas State University Kansas State University Manhattan, Kansas

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