

HEALTH IMPACT AREA

Overview

United Way of Greater Kansas City is creating positive community change by investing in programs that address health and human service needs, and developing strategies aimed at eliminating their underlying causes. This work is accomplished within a framework of six “impact areas”: families and neighborhoods, health, self-sufficiency, seniors, young children and youth. An Impact Committee provides leadership for United Way’s work in each area.

Through an inclusive community planning effort, United Way developed a vision and goals in each impact area and set forth priorities that guide its work in funding programs, implementing community initiatives, and advocating for changes in public policy.

Vision - Health

Communities that work to improve health status by promoting physical and mental well-being for people of all ages through prevention, education, treatment and access to affordable health care.

Why It Matters

Health care and wellness hold implications for an individual’s well-being, ability to maintain employment, and manage the financial impact of chronic and acute health care needs.

Goals

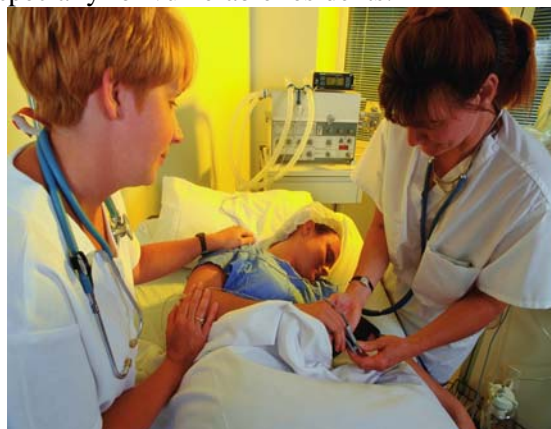
- Increase life expectancy and **quality of life** as measured by certain indicators in Healthy People 2010.
- Increase efficient use of provider resources to meet the needs of our metropolitan **healthcare system**.
- Maintain and improve the system of **physical health care** with multiple accessible points of entry so more people in our community have their healthcare needs met.
- Increase the availability of a continuum of appropriate and affordable **behavioral health care** treatment and support services for all populations.

Public Policy Advocacy

United Ways recognize that many human services are delivered through a public/private partnership, and that public sector funding and/or programs are often critical to the consumers who also benefit from the community-based programs United Way supports. Community volunteers and agency representatives from across the six-county metropolitan area identified Policy Principles that align with each impact area vision and goals.

Policy Principles that promote the Health Impact Area address:

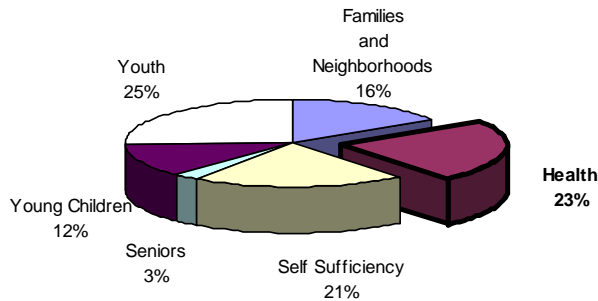
- Access to basic health care services for all people, especially the economically disadvantaged, the elderly, those with special needs and the disabled.
- Health promotion and illness prevention aimed at improving health status, increasing life expectancy and an improved quality of life for Missouri and Kansas residents.
- A comprehensive continuum of community-based public mental health and substance abuse services for individuals in need, including prevention, early intervention, treatment and rehabilitation and case management services.
- Assuring that children will be born healthy, be free from preventable disease and injury, obtain timely immunizations, have healthy diets and have access to timely and appropriate maternal and child health care.
- Effective planning on health care policy to ensure access and affordability of health care, especially for vulnerable residents.



United Way Investment in Health

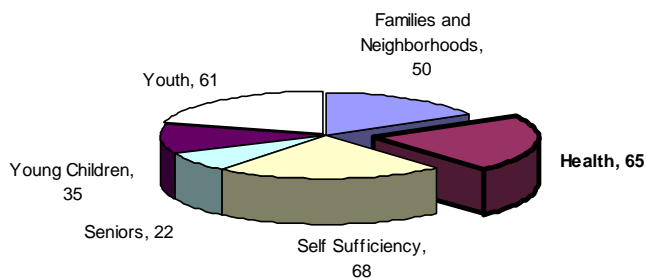
Through the volunteer-led Resource Investment Process for 2007, United Way is investing \$16.6 million to support 301 regional and local health and human service programs that are organized by six issue areas. The Health Impact Area, regional and local, represents 23 percent of the funds, or \$3,819,222.

United Way Investment by Impact Area
\$16,618,049



Sixty-five programs that address a wide range of health-related services for people of all ages are funded. Health programs represent 22 percent of the programs funded by United Way through the Resource Investment Process.

301 Funded Programs in 2007

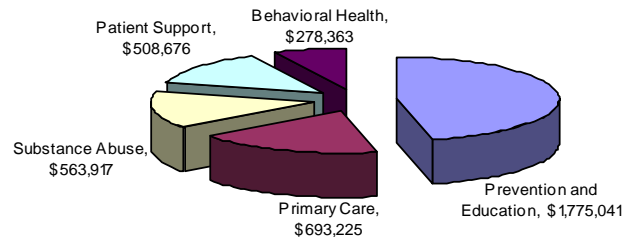


Types of United Way Investment

United Way works to improve lives with two types of investments through the Resource Investment Process. One is investing in programs that **deliver direct services** to individuals or families. Outcomes focus on the program's benefits for each participant. The other is investing in efforts to **influence community change or systems of services**. Outcomes are measured for a population group, rather than individuals. Both types of investment are essential to advance United Way's vision and goals.

Type of Programs Funded

In the Health Impact Area, United Way invests in programs and initiatives that work to improve the physical health and mental well being of all ages through prevention, education, treatment and access to affordable health care.



Health Prevention and Education Services receive nearly half of the funds invested in Health. Supported activities promote healthy lifestyles by raising awareness – of general wellness and specific diseases – through education and outreach efforts.

Primary Health Care for Uninsured and Underinsured represents 18 percent of the invested funds. Funded programs provide direct health services, such as pediatric health care, dental services and immunizations, or aid with legal counsel to obtain access to health care.

Substance Abuse Prevention, Intervention and Treatment Services include residential and outpatient treatment; outreach and education services, counseling and recovery support. The funded programs account for 15 percent of the health investments.

Patient Support Services help people maintain activities of daily living and make up 13 percent of Health funding. Activities represent rehabilitation services, and physical, occupational and speech therapy, social and emotional support, adaptive skills training and in-home volunteers.

Behavioral Health Services represent seven percent of the funded programs in health. Treatment, evaluation, medication management, and support services addressing mental health issues are examples of program activities funded in this area.

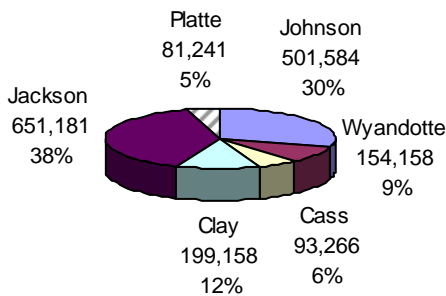
Community Profile

Why It Matters

Information about our community and the people who live here is a tool for making decisions on the investment of United Way dollars. The data alone will not provide definitive answers. This data profile does, however, establish the size and some characteristics of the target population, and point to areas where greater attention may be needed.

2005 Regional Demographics

2005 Regional Population by County
Total Population = 1.7 Million People



2005 Regional Snapshot A People Profile

1,680,588 people live in the six-county region of Cass, Clay, Jackson and Platte Counties in Missouri and Johnson and Wyandotte Counties in Kansas:

- Two in 3 residents live in our largest counties – Jackson County, Mo. and Johnson County, Ks.
- Nine in 10 (93%) live in the same county as a year ago.
- One in 4 (26%) are children/youth under age 18.
- One in 10 (11%) are seniors age 65 and over.
- One in 4 (25%) self-identifies with a racial or ethnic minority – up from 18% in 1990.
- One in 10 (10%) speak a language other than English at home.
- One in 8 (12%) non-institutionalized persons age 16 and over has a disability.
- One in 9 (11%) of the total population lives in poverty. Nearly 66,000 children (16%) and 12,000 seniors (7%) face the challenges of living in poverty.

Health Impact Area – Community Indicators

Health – Key Facts

Uninsured

- In the six-county area, 181,462 persons lack any type of healthcare coverage, approximately 11% of total population. Estimates of the uninsured should be viewed as underestimates.

Number of Uninsured

	2000
Johnson	40,856
Wyandotte	24,688
Total	65,544
	2005
Cass	7,709
Clay	17,359
Jackson	84,511
Platte	6,339
Total	115,918

Access to Healthcare

- During 2006, 33,812 additional patients enrolled in KC CareLink at one of 47 healthcare sites throughout the six-county area. Since KC CareLink data collection began during 4th quarter 2002, total enrollment in KC CareLink has grown to 153,564 individuals seeking healthcare services.
- Of new patients enrolled in KC CareLink in 2006, nearly 3 of every 5, or 58%, were under age 30. Slightly more than 1 in 4 (27%) of these persons were referred for specialty care.

Physical Health

- Cancers, cardiovascular disease and cerebrovascular disease (stroke) are the three leading causes of death in the six-county area.

- In the 15-county region, 14% of adults report smoking every day but more than half identify as having never smoked. Tobacco consumption is the leading cause of preventable death in the U.S.
- Persons with physical disabilities defined as a long-lasting sensory, physical, mental or emotional condition, face unique healthcare needs, including specialty care, access to care and associated expenses.
- In the 15-county metropolitan region, 15% of adults reported engaging in binge drinking on at least one occasion. Binge drinking is defined as males consuming five or more drinks and females consuming four or more on one occasion.
- In 2006, most persons seeking state-supported substance abuse treatment in the five-county area identified alcohol as their primary drug problem. (Wyandotte County data is not available.)

Persons over Age 5 with a Physical Disability

	2005
Johnson	24,830
Wyandotte	15,158
Cass	8,003
Clay	14,830
Jackson	56,247
Platte	5,083
Total	124,151

- In 2004, 89% of total births in the five-county area received early prenatal care (at least one prenatal visit during first trimester). This equates to 2,783 babies, plus their mothers, born without the benefit of early prenatal care. (Cass County data is not available.)

Mental Health

- One in 20 (73,556) persons age 5 and over reported a mental disability in 2005, defined as a physical, mental or emotional condition lasting six months or longer.
- A higher 1 in 9 (19,251) seniors reported such a mental disability.

Persons over Age 5 with Mental Disability

	2005
Johnson	15,025
Wyandotte	9,824
Cass	4,206
Clay	9,207
Jackson	32,820
Platte	2,654
Total	73,556

- In 2004, 6,337 children (Cass, Clay, Jackson and Platte Counties in Missouri) with serious emotional disturbances (SED) received services from the Missouri Department of Mental Health.
- In 2006, more than 1,700 children in Johnson County with SED received services from the community mental health center. (Wyandotte County data is not available.)

Primary Drug Problem Reported When Receiving State-Supported Treatment

	Alcohol	Marijuana	Stimulants*
Johnson	555	274	98
Cass	239	104	148
Clay	457	206	179
Jackson	2,035	1,355	666
Platte	137	40	47
Total	3,423	1,979	1,138

Oral Health

- In 2004, 1 of 9 Johnson County residents, 1 of 5 Wyandotte County residents, and 1 of 4 of those surveyed by the Jackson County Health Department reported not visiting a dentist or dental hygienist in the past two years.
- In 2003 in the 9-county Kansas City area (Missouri counties only), only 15% of practicing dentists accepted children with publicly-funded dental insurance.

* Note: In Jackson and Johnson Counties, more persons identified cocaine as their primary drug problem than stimulants; in Platte County, persons identified cocaine as their primary drug problem equally as often as stimulants.

Sources: U.S. Census Bureau, 2005 American Community Survey; Small Area Health Insurance Estimates Methodology, U.S. Census Bureau, July 21, 2005; Lewin Uninsured Study, 2000; KC CareLink database; Kansas Department of Health & Environment; Missouri Department of Health & Senior Services; U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System; Partnership for Children, 2006 Report Card & Data Briefing Book; Kansas Department of Education; Missouri Department of Elementary and Secondary Education; Kansas Kids Count Data; Missouri Kids Count Data; Kansas Department of Social & Rehabilitation Services; Missouri Department of Mental Health; Kansas Health Institute; Citizens for Missouri's Children.

For more information contact:
 Terri Fehr
 Health Impact Area Manager
 United Way of Greater Kansas City
 816-472-4289
www.unitedwaygkc.org