

# Legislative Toolkit

## 2023



**PREPARED FOR**  
KPHA Members and the Kansas  
Public Health Workforce  
**PREPARED BY**  
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For many public health professionals, serving our communities is a calling, and it is the [responsibility of those in public health](#) to **fight for a justice-centered future**. It is critical to **advocate** at every turn for the betterment of our communities.

**For Kansans to reclaim their right to a healthier tomorrow** we, as public health professionals, must be civically engaged.

The [Kansas Public Health Association](#) (KPHA) was founded by [Dr. Samuel Crumbine](#), a public health pioneer in the state, and is the, "Oldest and largest organization of public health professionals in the state, representing more than 800 members from over 50 occupations [and] organizations." KPHA is an affiliate of the American Public Health Association (APHA) and has helped to set priorities in policy in public health for all since 1920.

**Kansas faces monumental health challenges** and needs to **invest in its public health workforce**, but this **can only come from us**, members of KPHA, coalitions of public health workers and organizations, and so forth.

As public health professionals, we not only have the **RESPONSIBILITY** to stand up and advocate/lobby for our communities, but we have the **RIGHT** to do so as well!

As a result of the **increase of attacks undermining the authority of public health officers** and [public health infrastructure](#) via [organized anti-public health groups](#), [members of the legislature](#), and [proposed](#) and [passed](#) legislation, **KPHA has authorized this document to aid its members, and other public health professionals, in navigating the complexities of the Kansas Legislature.**

**Kansas is on the frontline** of combating these efforts that have seen politicians attempt to **subvert the will of the voters**. [This study](#) of Kansas' public health infrastructure concluded turnover is a result of, "Extreme political divisiveness;

threats to the public health officials and their families; lack of support...stress and burnout resulting from working extreme hours, perceived pressure to be perfect and accessible, and the fallout experienced by their families; and the public health infrastructure not working."

**Disparities and inequities**, in the form of barriers to accessing resources or care, widespread poverty and lack of opportunity, and a general lack of awareness of resources [by public health practitioners](#) to the plight of Kansas's public health infrastructure exist daily. To put these into perspective, **Kansas consistently scores** in the bottom half of states (via [national ratings](#)) in health measures and outcomes (e.g., [funding](#), [overall health rating](#)) and ranked last overall out of 50 states and Washington D.C. in Mental Health America's 2023 assessment, [THE STATE OF MENTAL HEALTH IN AMERICA](#).

While the **2023** legislative session saw **KPHA** and others secure a number of **public health wins**, such as Tobacco 21 and fentanyl test strip decriminalization, it also saw many of the aforementioned **challenges**. This is where we need to **STEP UP and SPEAK OUT**.

**This necessitates educating on the importance** of voting, enrolling voters, and advocating and lobbying for/against policies from city councils up to state and national legislators. Civic engagement, based especially on the history of [disenfranchisement in Kansas](#), is a [social determinant of health](#) (SDoH). While public health interventions [typically address down-stream issues](#), through civic engagement and policy-making it is possible to go [up-stream](#) and directly confront the root of the many inequities our communities face. Through civic engagement, public health professionals can help facilitate [proven](#) mechanisms of change.

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## **Purpose**

To provide a multifaceted approach to understanding the Kansas Legislature, its participants and practices, and points of action and intervention for KPHA members, state and local health departments, and the broader Kansas public. Within this toolkit, each individual and organization should be able to determine and identify resources that will allow them to interact with their legislators and the system at large to propel their voices and policy priorities adequately. Users of this toolkit will find definitions, best-practice recommendations for civic engagement, written and verbal testimonial templates, and an abundant collection of local and national resources to fully engage in advocating and lobbying for their communities.

## **What will I get out of this toolkit?**

- Context of Kansas' Public Health Opportunities and Challenges
- KPHA Policy Priorities
- How to Differentiate Advocacy vs. Lobbying
- Knowledge of the Kansas Legislature, Committees, and Statutes
  - How Bills Go Through the Process
- How to Identify Personal Legislators, Mechanisms to Interact with them, and How to Build Networks and Coalitions of Public Health Professionals
- Civic engagement (personally and via networks/communities)
- Methods and Resources to Write and Present Testimonials
- Education and Resources on Engaging Community Members and Legislators with Evidence-Based and Framed Content
  - Overcoming Dis/Mis-information
- Local and National resources



## KPHA Policy Priorities

The Kansas Public Health Association advocates for various policy priorities during the Kansas legislative session each year. The policy platform is determined by members and informed by [KPHA's strategic priorities](#).

### Public Health Capacity and Preparedness

While ranked in the "high" tier of preparedness by *Trust for America's Health 2023 Annual report*, Kansas policy is still in need of a strong governmental public health system (locally and across the state) to better protect Kansas communities, prepare for adverse events and improve health. This will be done via evidence-informed policies mitigating the spread of disease, strategies to improve local health officer capacities, strengthening public health authority, and increasing public health funding and support for public health modernization, infrastructure and workforce support.

### Tobacco

Advocate for passage of bills such as the Kansas Roots Act (Tobacco 21), to protect youth from easy access to harmful tobacco products (e.g., e-cigarettes, vape, synthetic nicotine).

- *Successful advocacy led to the raising of the age of sale in Kansas (18) to the federal age (21), effective July 1, 2023.*

### Infectious Disease

Protect daycare, schools, health care providers, and congregate settings through strong vaccination efforts based on the latest science (e.g., CDC, ACIP, and KDHE). This can be done by implementing local efforts to increase immunization rates on par with CDC recommendations and by opposing exemptions

### Oral Health

Address the inequity of dental provider access to underserved communities by expanding KanCare and strengthening the dental benefits for ALL adult beneficiaries.

### Behavioral Health

Kansas ranks dead last in the nation in multiple metrics concerning mental, behavioral, and substance abuse health problems. Community-based and inpatient (both state and private psychiatric hospitals) crisis stabilization and treatment centers, school partnerships, and enhanced access to evidence-based interventions for substance misuse (e.g., harm reduction and reduced criminalization) will lead to better outcomes and reduce suicide risks.

### Health Care and Access

Kansas continues to trend in the wrong direction for both maternal/fetal mortality and access to adequate medical insurance/coverages. By prioritizing reproductive health measures and expanding KanCare, more than 100,000 are estimated to benefit directly (not including those who lost coverage following the end of the COVID-19 Public Health Emergency (PHE)). These 2023 [County Health Rankings](#) of Kansas show health outcome breakdowns by city, county, and congressional district as well as this [assessment](#) of shifts in rural health and well-being.

### Community Health

Kansas needs to implement better programs to address the growing health and nutrition disparities among young families and youth who are experiencing food insecurity and a wider range of chronic conditions. This can be done by strengthening child nutrition and school meal programs, re-up guidelines for physical activity in schools, and improving the built environments via "Safe Routes to School" programs. Additionally, better data is needed to show the need to remove barriers to maximize the number of people receiving social access programs (e.g., [SNAP](#), TANF, etc.). Overall, there is a need to address the concerns around growing rates of distracted drivers, [gun violence](#), and a wide array of community-based factors.

### Environmental Health

Seeing firsthand the effects of environmental disasters ([natural](#) and [man-made](#)) we must work to support restoring the Local Environmental Protection Program (LEPP), work to mitigate climate harmful policies, support the lead service line as a part of the Lead and Copper Pipe Rule, and bring water testing and fluoridation to private water systems. As home to [14 SuperFund sites](#), Kansas must implement increased fees to be paid to funds, such as the [Dry Cleaner Trust Fund](#), which are used to clean contaminated groundwater and give authority to investigate other potential sites across the state.

For specific bills (prioritizations), see [KPHA website](#)

# Advocacy and Lobbying

***Aren't lobbying and advocating the same thing?***

**- No! Lobbying is a type of Advocacy**

## **Advocacy**

APHA definition: "An advocate is a person who argues for a cause - a supporter or a defender. To advocate is to act in support of a particular issue or cause. Being a public health advocate gives you the opportunity to influence the way the public and policy-makers think and act on public health policies."

- **In essence**: Anyone, regardless of role (citizen or state employee), can advocate for a topic by informing policy-makers via testimonials **WITHOUT** stating directly to vote for or against a piece of legislation.

## **Lobbying (two terms)**

### IRS definitions:

**Direct** lobbying refers to attempts to influence a legislative body through communication with a member or employee of a legislative body, or with a government official who participates in formulating legislation.

**Grassroots** lobbying refers to attempts to influence legislation by attempting to affect the opinion of the public with respect to the legislation and encouraging the audience to take action with respect to the legislation. In either case, the communications must refer to and reflect a view on the legislation."

- **In essence**: Lobbying is a type of advocacy, however, it is not allowed in official capacities by state employees as it requires contact with policy-makers with the purpose of influencing voting either for or against legislation. It can be used to garner public support (lobbying) for or against a piece of legislation.

## ***The Takeaway: Advocacy vs. Lobbying:***

- **Advocacy** can be done by anyone, especially all citizens in their private capacity and state employees, but can **NOT** ask a policy-maker or anyone else to vote explicitly for or against a policy, but can be used to inform on a matter via expertise or as a constituent.
- **Lobbying** is a form of advocacy that results in someone attempting to influence a policy-maker to vote for or against something and can only be done as a private citizen or by third-party entities, such as KPHA or KALHD on behalf of state organizations

***I work for a non-profit/state organization, so I can't participate***

**- Not necessarily, some organizations have specific requirements to advocate or lobby, especially in the public health realm, that allow some degree of professional involvement**

- Click [here](#) for an in-depth guide on non-profit/charity/organizational requirements and limitations for lobbying

# Proven Methods of Advocating AND Lobbying

Activity	Example	Designation
Dropping off materials with lawmakers about your organization or issue.	<p>Facts over Fears education campaign – materials also were shared with lawmakers, and one lawmaker waved it on the floor of the Senate. <a href="https://www.immunizekansascoalition.org/news/article-04122023">https://www.immunizekansascoalition.org/news/article-04122023</a>;</p> <p>Legislative materials: <a href="https://www.immunizekansascoalition.org/news/article-02132023.asp">https://www.immunizekansascoalition.org/news/article-02132023.asp</a></p>	Advocacy
Organizations and coalitions host a day, events, and/or rally at the Statehouse (e.g., speakers, lunch/appointments with lawmakers, and material drop-off.	<p><b>Immunize Kansas Coalition</b> did this around vaccines in early February, which included House members recognizing the coalition and the KS-AAP chapter for their work;</p> <p><b>Alliance for a Healthy Kansas</b> held a rally in mid-March in support of expanding KanCare;</p> <p><b>Child Care and Early Education Advocacy day</b> in early March, held by child care and education groups. This included lawmakers reading stories to young children.</p>	Advocacy
Writing letters and notes to lawmakers; appearing at their legislative update coffees in-district and asking questions.	<p><a href="https://www.immunizekansascoalition.org/news/article-04252023">https://www.immunizekansascoalition.org/news/article-04252023</a></p>	Both; Generally meeting with and discussing topics is advocacy, directly asking (as in example) is Lobbying
Letters to the editor (other media releases)	<p><a href="https://www.cjonline.com/story/opinion/columns/2022/11/25/sup-porting-kansas-families-means-preparing-kids-for-lifelong-success/69675110007/">https://www.cjonline.com/story/opinion/columns/2022/11/25/sup-porting-kansas-families-means-preparing-kids-for-lifelong-success/69675110007/</a></p>	Advocacy
Grassroots campaigning/lobbying	<p>The public taking action through phone calls and emails to push back against harmful proposals on taxes (flat tax); SNAP benefits and non-custodial parents; and child care-related legislation succeeded – these bills failed to have the governor’s veto overridden (taxes and child care-related bills) or failed to pass both chambers (SNAP benefits and non-custodial parents)</p>	Lobbying based upon definition given on previous page; Both depending on if "ask" occurs to vote for or against a specific bill
Introduced legislations	<p>Legislature appropriating money to cover dentures for adults in the KanCare program. <a href="http://oralhealthkansas.org/DentureAdvocacy.html">http://oralhealthkansas.org/DentureAdvocacy.html</a></p>	Advocacy (result of efforts outside of legislative body leading to self-adoption)
Submitting and offering testimony (written/verbal) against certain bills	<p>Opposition testimonials to SB 6; SB 314; SB 315, anti-public health and anti-vaccine bills via media release statements <a href="https://www.immunizekansascoalition.org/news/article-03222023">https://www.immunizekansascoalition.org/news/article-03222023</a> and <a href="https://www.immunizekansascoalition.org/news/article-03232023">https://www.immunizekansascoalition.org/news/article-03232023</a> and <a href="https://www.immunizekansascoalition.org/news/article-03242023">https://www.immunizekansascoalition.org/news/article-03242023</a></p>	Lobbying (directly telling to oppose); can be advocacy is passive voice used to inform of harms of passing vs. outright telling how to vote

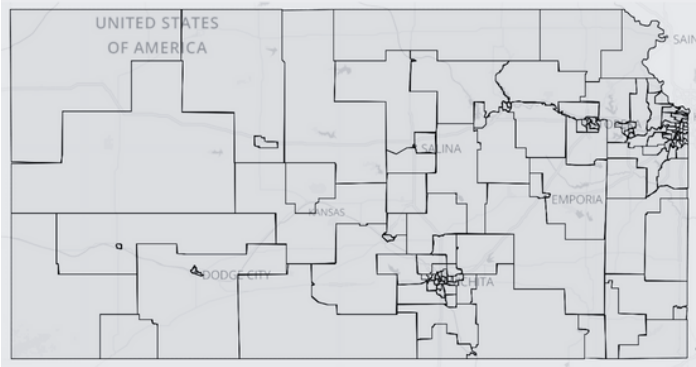
# Overview of Kansas Legislature (via Ballotpedia)

## Legislative Procedures for the State of Kansas

### House and Senate Committee Assignments (2023-2024)

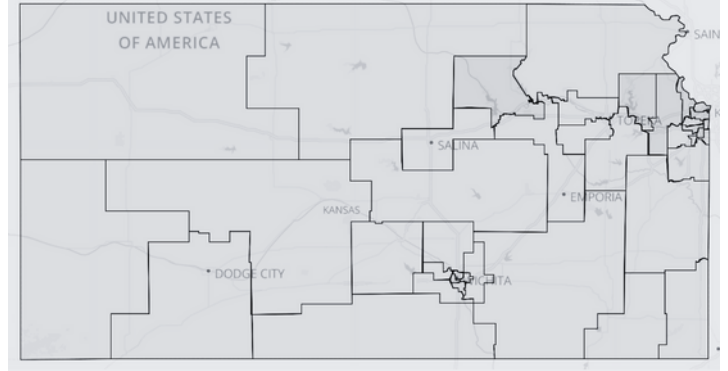
#### Current House Roster (2023-2024)

House District Lines



#### Current Senate Roster (2023-2024)

Senate District Lines



"The Kansas legislative process mirrors the Federal process in terms of reliance on committees, dual chambers, and the divide between the legislative and executive branches. Kansas is further complicated by this model by a heavy reliance on conference committees (small teams that negotiate bill language between the two chambers and whose products cannot be amended by the full legislative bodies), gut-and-go tactics (where bills have contents stripped and added in, confusing the ability for people to track legislation and bypass steps in the traditional legislative process), and the condensed timeframe given our use of a part-time legislature."

**Dennis Kriesel, Executive Director, Kansas Association of Local Health Departments**

As of 2022, these are the Statutes defining Kansas State Law with regard to Public Health



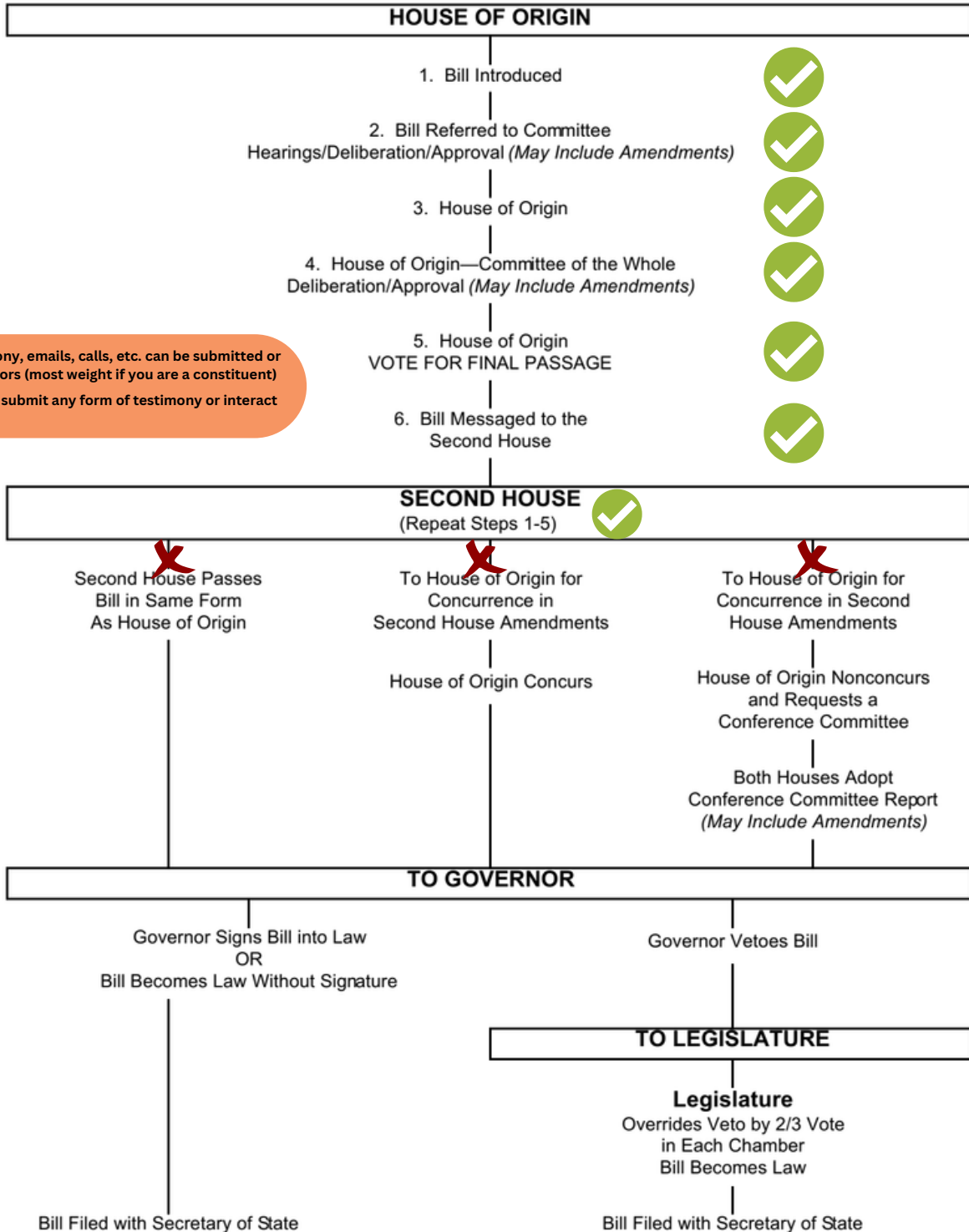


# Legislative Flowchart - State of Kansas

## Where to Intervene?

### HOW A BILL BECOMES LAW

The Kansas Legislature consists of Two Houses—The House of Representatives (125 members) and the Senate (40 members). A bill may be introduced in either house. The main steps in the process of a bill becoming a law are shown below.



Of note: outside of legislative sessions/cycles - it is highly encouraged to meet with legislators to convey your priorities and to try and discuss your concerns and the community's needs

"In public health, we care about our communities and we have a responsibility to ensure that everyone has what they need to live happy and healthy lives. The policies that shape our environments should reflect our values."

- Shaddai Martinez Cuestas, Head of Training, Berkeley Media Studies Group

## Getting Involved

1. *Determine your values and objectives/topics of interest to address*
2. *Track Legislation of interest [here](#)*
3. Find your legislator [here](#)
4. *Decide if you will be advocating or lobbying for this topic*
  - a. **Reminder:** As a private citizen, you have every right to advocate AND lobby for any issue. As a state/non-profit employee, you are limited in your capacity to lobby (tell policymakers to vote for or against), but you can advocate and inform.
5. *Consider options to interact with policy-makers and/or the process and commit to that and encourage others to as well*
  - a. Write to your legislator (email or letter)
  - b. Call your legislator
  - c. Visit the legislator in person (at office or public setting during term recess)
  - d. Submit [written testimony](#) to the committee
  - e. Present [verbal testimony](#) before the committee
  - f. Participate in town hall (or the like) events
  - g. Engage in [coalition building](#) and networking
6. *Make sure you are registered to vote [here](#)*
  - a. If you are NOT registered to vote, REGISTER! It is the most important thing we can do to be engaged and shape the future of our state! Check your polling station [here](#)
7. ***Encourage everyone in your network to check their voter registration status, get them registered, and GET THEM INVOLVED!!***

The goal is to get as many eligible voters registered and to the polls, to place pressure on legislators, and make our voices heard!

For more, see the **APHA Voting Toolkit** [here](#)

## APHA Recommendations for Preparing and Presenting Testimony

- A successful witness will do the necessary homework to find out about the committee members and their particular interests and record in the subject at hand. Be sure to address these legislators' concerns when presenting your testimony.
- Your written statement will be a part of the official record. A written statement can be longer than your oral statement. Use your oral statement as an opportunity to make a brief summation of your written testimony. If possible, summarize your concerns in three concise points.
- Be precise and concise. Your oral statement generally should be kept to five minutes. Stick to the allocated amount of time. Speak clearly, loudly, and make eye contact when presenting your remarks.
- Concentrate your remarks on what can be done and keep your remarks as positive as possible. Instead of reinforcing negatives, concentrate on what will enhance or improve the program.
- Try to avoid scientific or professional jargon. Excessive detail will lose the audience. Follow this suggestion: "Tell the committee what time it is— not how the watch works."
- Use your best professional judgment in suggesting what action committee members should take. Policy-makers are looking to learn from your experience and recommendations.
- Be polite. Address the policy-makers as Chairman or Madame Chair \_\_\_\_\_, Senator or Representative \_\_\_\_\_, Mayor \_\_\_\_\_, or Mr. or Ms. \_\_\_\_\_.

### American Public Health Association: Top Ten Tips for Advocacy

1. **Get to know legislators well**—their districts and constituencies, voting records, personal schedules for when they are in the capital and when they are home in the district, opinions, expertise, and interests. Be sure to have a good understanding of the legislator and his/her concerns, priorities and perspectives.
2. **Establish a relationship** by contacting your policy-makers before you have an issue to be addressed. Pique the interest of the policy-maker in the issue, so that when you have a need you will get the policy-maker's attention.
3. **Acquaint yourself with the staff members** of the legislators, committees and resource officials with whom you will be working. These people are essential sources of information and opinion for the policy-maker and can have significant influence in the development of policy.
4. **Learn the legislative process** and understand it well. Keep on top of the issues and be aware of controversial and contentious areas.
5. **Identify fellow advocates and partners** in the public health community and beyond with whom you can partner. Finding common ground on an issue sometimes brings together strange bedfellows but makes for a stronger coalition. Foster and strengthen relationships with allies and work with legislators who are flexible and tend to keep an open mind.
6. **Be open to negotiation.** Identify the groups and other legislators with whom you may need to negotiate for changes in legislation. Do not dismiss anyone because of previous disagreements or because you lack a history of working together. Remember, "yesterday's opponent may be today's ally."
7. **Be polite, remember names, and thank those who help you**—both in the legislature and in the public health advocacy community.
8. **Be honest, straightforward, and realistic** when working with legislators and their staff. Do not make promises you cannot keep. Never lie or mislead a legislator about the importance of an issue, the opposition's position or strength, or other matters.
9. **Timing is everything** for successful participation in the legislative process. The earlier in the process that you involve yourself, the better chance you have at influencing the outcome of legislation or a policy proposal.
10. **Be sure to follow up with legislators and their staff.** Send a thank-you letter, which is also a useful tool to remind policy-makers and their staff of your visit and the issues. If you offer your assistance or promise to provide additional information, do so in a timely and professional manner. Be a reliable resource for them today and in the future.

# Example Written Testimonials (Lobbying)



Written Proponent Testimony of the **Kansas Public Health Association** to the  
House Social Services Budget Committee  
HB 2330 | February 21, 2023

Chairman Mason and members of the committee:

Thank you for allowing the Kansas Public Health Association to provide written, proponent testimony for HB 2330 which increases the amount of state moneys distributed to local health departments.

The Kansas Public Health Association is a membership organization of over 800 individuals in Kansas that represent both public health and healthcare practitioners, professionals, and advocates. As such, The KPHA supports the critical services that local health departments provide including monitoring disease outbreaks, health promotion programs and advancing community health. By increasing the state financial assistance for local health departments would significantly help health departments in providing these critical services.

The Kansas Public Health Association encourages the committee to vote to support HB 2330 in full as presented and increase state financial assistance to local health departments.

Respectfully submitted,

Shelby  
Policy Chair, Kansas Public Health Association

*KPHA is a professional association for Kansas public health practitioners, professionals, and advocates. As a voice for public health, KPHA provides a forum for individuals and organizations to work collectively to assure conditions in which Kansans' lives will be healthy. (This position reflects the collective position of association members through the action of the Board of Directors and may not necessarily reflect the views of each KPHA member's employer.)*



Purpose, organization (or private citizen constituency)  
The legislator or committee testimony is directed  
Bill number and date

Written Opposition Testimony of the **Kansas Public Health Association** to the  
Senate Public Health and Welfare Committee  
HB 2141 | March 22, 2023

**1) Address legislator/chair-person and/or committee members**

Chairwoman Gossage and members of the committee:

**2) Gratitude + purpose of writing testimony**

Thank you for allowing the Kansas Public Health Association to provide opposition written testimony for HB 2141, which would require custodial and non-custodial parents to cooperate with child support enforcement programs and disqualifying such parents for being delinquent in payments.

**3) Brief explanation of support/opposition and how it will impact communities/state**

This bill adds more barriers for parents needing to access food assistance programs including disturbing families existing support systems that include informal agreements with non-custodial and custodial parents, added risk for parents and children in domestic violence situations, and overall reducing access for food assistance to children and parents that make reunification after foster care more difficult for those who cannot meet the requirements.

**4) Concluding remarks/summarization**

In addition, HB 2141 would increase administrative costs for the state, and complicate the food assistance program for agency staff and program recipients. These new requirements would increase the likelihood of households being removed from the food assistance program and forced to reapply, which would require an additional administrative burden to the state.

**5) Restate the ask (e.g., vote no on XX for Y reason)**

The Kansas Public Health Association encourages the committee to vote no on HB 2141, that would make it harder for parents to provide for their children.

**6) Signature and title**

Respectfully submitted,

Shelby  
Policy Chair, Kansas Public Health Association

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Written Proponent Testimony of the **Kansas Public Health Association** to the  
Senate Public Health and Welfare Committee  
HB 2142 | February 14, 2023

Chairman Thomas and members of the committee:

Thank you for allowing the Kansas Public Health Association (KPHA) to provide written proponent testimony in support of HB 2142, which creates the get the lead out of school drinking water act to require schools to comply with legal limits on lead content in school drinking water.

According to data from [The Centers for Disease Control and Prevention \(CDC\)](#), lead in drinking water can lead to significant problems for children including learning and behavior problems and brain damage, which continue through a child's lifespan. We have seen the effects of lead in water on young children through the Flint, Michigan water crisis, and have an obligation to prevent another crisis of that magnitude here in Kansas by providing lead-free water to school-aged children.

By taking the steps outlined in HB 2142, Kansas can continue to protect the health and well-being of school children throughout the state by offering lead-free drinking water in schools. The Kansas Public Health Association encourages the committee to pass HB 2142 as presented.

Respectfully submitted,

Shelby  
Policy Chair, Kansas Public Health Association

KPHA is a professional association for Kansas public health practitioners, professionals, and advocates. As a voice for public health, KPHA provides a forum for individuals and organizations to work collectively to assure conditions in which Kansans' lives will be healthy. *(This position reflects the collective position of association members through the action of the Board of Directors and may not necessarily reflect the views of each KPHA member's employer.)*

# Framing, Policy, and Public Health

## What is Framing?

**Framing** is defined by [The FrameWorks Institute](#) as,

"The choices we make in what we say, how we say it, what we emphasize, and what we leave unsaid, and how these choices shape how people think, feel, and act."

**Framing** is an optional tool in presenting both information/testimonials to policymakers and in discussing and implementing public health programming.

- These [legislative framing](#) toolkits were developed by the FrameWorks Institute to aid in presenting the most cohesive and impactful testimonials (e.g., [Oral Health](#))

## Challenges of Framing:

The [Berkeley Media Studies Group](#) (BMSG), a Public Health Institute initiative on research in driving social change, describes **Framing** and **Reframing** [health] issues on the basis of a portrait and landscape view.

- **Portrait Framing** - Moving from individual behaviors/responsibility towards collective choices that impact the health of communities
- **Landscape Framing** - The social responsibility wherein framing is critical in communication AND promoting solutions via policy

## Instead of...Try Saying... Strategy

An effective method of Reframing topics/statements, etc. in order to have a greater impact and succinctly convey a message

- FrameWorks has extensive topic-by-topic [framing strategies and resources](#) on how to do this
- The image to the right is an example of FrameWorks Institute's [Strategic Framing Recommendations](#)

RECOMMENDATION #1:  
**Connect oral health to overall health.**

**Instead of:** Using frames that narrow the scope of the issue to the teeth.

**Try:** Using images, examples, and explanations that show the connection between oral health and overall health.

RECOMMENDATION #2:  
**Use the value of Targeted Justice to cue a collective and systemic perspective.**

**Instead of:** Using unframed data about disparities.

**Try:** Telling a fuller story about promoting equitable access to quality care.

RECOMMENDATION #3:  
**Use the value of Responsible Management to broaden the concept of prevention.**

**Instead of:** Leaving prevention undefined, undescribed, or individualized.

**Try:** Showing how poor oral health imposes unnecessary and avoidable costs to our health care system.

RECOMMENDATION #4:  
**Use the Keys to Oral Health metaphor to explain systemic barriers.**

**Instead of:** Zooming in on individual cases to illustrate systemic problems.

**Try:** Comparing systemic barriers to "locked doors" and solutions as "keys" that unlock greater access.

RECOMMENDATION #5:  
**Emphasize that oral health involves a broad team of professionals.**

**Instead of:** Leaving solutions to the public's imagination.

**Try:** Advancing the idea that oral health involves a team of professionals who work across the community.

# Networking and Coalition Building: Show up. Together.

The opportunity to invite others (e.g., organizations, charities, individuals) and encourage them to "add their voice" to the mix.

The [Association of Public Health Nurses](#) (APHN) defines coalition building as, "A group of interdependent people focused on advancing or opposing a particular issue. A coalition's power to affect public policy lies in its ability to present a united front representing many members."

Similarly, APHA states, "A coalition can work towards accomplishing a goal in a way that individuals cannot. For instance, a coalition can choose as a goal: establishing a program; educating the public about a particular public health problem; gaining community support for a public health issue or program; or stopping a problem."

The [APHA](#) and [APHN](#) Legislative toolkits are great resources for an even greater in-depth look and analysis of advocacy on a grander scale.

## American Public Health Association (APHA) Legislative Guide

### STEPS TO COALITION BUILDING

**1. Define your objectives and needs.** Why are you forming this coalition and what goals need to be accomplished? What is the scope of interest and influence—for instance, tackling a federal regulatory issue or a state legislative issue? Size of the coalition? Is the coalition intended to solve a short-term finite problem, or will the coalition be in place for the long-term? When, where, and how often will the coalition meet?

**2. Secure Resources.** Adequate resources are needed to formulate and sustain the coalition, including staff time to build and coordinate the coalition, office space, phone line, copier, fax, supplies, storage space, and research and data collection capacity.

**3. Identify potential members.** Recruit the right people and organizations for your group. Identify who is already doing work in the issue area. Throw the net wide. Create a diverse list of individuals and groups that are stakeholders in your key issue. Be sure to seek representatives from all sectors so that the coalition reflects the community. Remember to use the opportunity to build bridges.

**4. Get the ball rolling.** Invite individuals and representatives of the chosen organizations to join the coalition. As a first step, ask them to endorse the statement of purpose—a mission statement. Be sure to include information about who else is invited, how the coalition will function, and what will be expected of them as a coalition partner.

**5. Convene** the coalition's first meeting to develop an action plan. Develop strategies, activities, and tactics for accomplishing the coalition's goals. Formulate an agenda for achieving next steps. Remember to target the coalition's efforts and to remain focused on your goals. Determine what resources each partner brings to the coalition.

**6. Establish an identity** for the Coalition. Prepare the coalition's statement of purpose. Create coalition letterhead.

**7. Follow up** with coalition members and potential members. Send a follow-up letter to meeting attendees thanking them for their interest and informing them of the next activity and the progress of coalition.

**8. Develop coalition materials.** This includes fact sheets, issue briefs and a coalition member list with contact information. Be sure to give each coalition member copies of the materials.

**9. Keep the ball moving.** Be sure to maintain momentum and interest. Follow up with participants and keep them posted on progress or action in the issue area.

**10. Keep the lines of communication open.** Do not overwhelm coalition participants with too much information, too many meetings, or unrealistic expectations. Be sure to check in periodically with coalition partners to make sure that they feel they are benefiting from their affiliation with the coalition. Encourage feedback and suggestions from participants.

Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has.

-Margaret Mead, Cultural Anthropologist



# National Organizations and Resources

## American Public Health Association (APHA) ([Home](#))

- [Advocacy and Policy Homepage](#)
- [Legislative Toolkit](#)

## FrameWorks Institute ([Home](#))

- [Toolkits Library](#)
- [Report on Mindset Shifts](#)
- [Toolkit: Framing the Foundation of Community Health](#)
- [How American Culture is Changing](#)
- [Fast Frames \(video series\)](#)
- [Reframing the Conversation about Child and Adolescent Vaccinations](#)
- [Explaining the Social Determinants of Health](#)
- [Talking about Health Equity](#)
- [Framing with Data](#)
- [Framing Community Safety: Guidance for Effective Communication](#)

## Berkeley Media Studies Group (BMSG) ([Home](#))

- [Message Development Worksheet](#)
- [Communication and Media Advocacy Guide](#) (Layers Strategy)
- [Championing Public Health Amid Legal and Legislative Threats](#) (Framing & Language)
- [Social Math to Support an Issue](#)
- [Writing op-eds](#)
- [Letters to the Editor template\(s\)](#)
- [Elements of Newsworthiness](#)

## Association of Public Health Nurses (APHN) ([Home](#))

- [Policy Advocacy Toolkit](#)

## National Association of County and City Health Officials (NACCHO) ([Home](#))

- [Advocacy Toolkit](#)
- [Policy Statements and Letters](#)
- [Resource Toolbox](#)
- [Metaphor guide: Foundation](#)

## Public Health Reaching Across Sectors (PHRASES) ([Home](#))

- [Resources Library](#)
- [Programs Resources](#)

## ChangeLab Solutions ([Home](#))

- [Solutions Resources Homepage](#)

## Centers for Disease Control and Prevention (CDC) ([Public Health Gateway Home](#))

- [Public Health Law](#)

## Association of State and Territorial Health Officials (ASTHO) ([Home](#))

- [Health Equity Policy Toolkit](#)
- [Work Resources Homepage](#)

## National Rural Health Association (NRHA) ([Home](#))

- [Advocacy Guide Homepage](#)

## American Academy of Child and Adolescent Psychiatry (AACAP)

- [Legislative Advocacy Tips](#)

## Rural Health Information Hub (RHIfhub) ([Home](#))

- [Frontiers Resources](#)

## National Network of Public Health Institutes (NNPHI) ([Home](#))

- [Services](#)

## Partners in Health ([Home](#))

- [Advocacy Page](#)

## University of Chicago - Loyola Public Health ([Home](#))

- [Databases and Resources](#)
- [Statistics and Data](#)
- [Foundations, Policy, and Advocacy Organizations](#) (Most notable listed, more on Home)
  - [The Commonwealth Fund](#)
  - [Kaiser Family Foundation \(KFF\)](#)
  - [Public Health Foundation \(PHF\)](#)
  - [Robert Wood Johnson Foundation \(RWJF\)](#)
  - [Association for Public Policy Analysis and Management \(APPAM\)](#)
  - [Carter Center](#)
  - [Center for Law and Social Policy \(CLASP\)](#)
  - [Children's Defense Fund \(CDF\)](#)
  - [Urban Institute \(UI\)](#)

## Other Reputable Public Health Entities and Organizations

Health Resources and Service Administration (HRSA) ([Home](#))

The Community Guide ([Home](#))

de Beaumont Foundation ([Home](#))

America's Health Rankings ([Home](#))

County Health Rankings ([Home](#))

Public Health National Center for Innovations ([Home](#))

Cochrane Library ([Home](#))

Health Evidence ([Home](#))

NonProfit Quarterly (NPQ) ([Home](#))

# Kansas Organizations and Resources

**Kansas Department of Health and Environment ([Home](#))**  
**The Community Toolbox ([Home](#))**  
**Kansas Health Foundation (KHF) ([Home](#))**  
**Kansas Health Institute (KHI) ([Home](#))**  
**Kansas Leadership Center (KLC) ([Home](#))**  
**Kansas Health Matters ([Home](#))**  
**Kansas Public Health Collaborative (KPHC) ([Home](#))**  
**Kansas Action for Children ([Home](#))**  
**Kansas Association of Counties ([Home](#))**  
**Oral Health Kansas ([Home](#))**  
**Mid-America Regional Council (MARC) ([Home](#))**  
• KC Metro and beyond  
**Community Care Network of Kansas ([Home](#))**  
**Kansas Association of Community Action Partners ([Home](#))**  
**Kansas Center for Rural Health ([Home](#))**  
**Kansas Emergency Medical Services Association ([Home](#))**  
**Kansas Healthcare Collaborative ([Home](#))**  
**Institute for Policy & Social Research ([Home](#))**  
**Kansas Office of Rural Prosperity ([Home](#))**  
**Kansas Rural Center ([Home](#))**  
**Kansas Rural Health Association ([Home](#))**  
**North Central Regional Center for Rural Development ([Home](#))**  
**Housing and Urban Development (HUD): Kansas ([Home](#))**  
**U.S. Dept. of Agriculture Rural Development: Kansas ([Home](#))**  
**Rural Health Education and Services ([Home](#))**  
**Kansas Rural Health Council ([Home](#))**  
**KU Health Education Center ([Home](#))**  
**Immunize Kansas Coalition (IKC) ([Home](#))**  
**Kansas Association of Local Health Departments (KALHD) ([Home](#))**  
**Center for Public Health Initiatives ([Home](#))**





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