

April 2026



# AGE-FRIENDLY KANSAS

## Three-Year Action Plan

A Public Health Strategy Playbook

S T R A T E G Y   S U M M A R Y



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# Acknowledgments



Age-Friendly Kansas (AFK) was launched as part of the national Age-Friendly Public Health Systems (AFPHS) movement, a collaborative effort led by Trust for America's Health and The John A. Hartford Foundation, in partnership with the National Network of Public Health Institutes. The AFPHS movement is designed to more intentionally integrate public health into efforts to support healthy aging, enable public health agencies to better address the needs of older adults across settings, promote independence and quality of life, and establish healthy aging as a core public health function.

AFK is facilitated by **Emma Uridge, M.P.H., Analyst at the Kansas Health Institute**, who provided process facilitation, research support, and report preparation under the direction of the steering committee and advisory committee. AFK operates in partnership with the Kansas Department of Health and Environment, the Kansas Department for Aging and Disability Services and the Kansas Department for Children and Families, with continued support from national AFPHS and Age-Friendly Ecosystem (AFE) partners.

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## Steering Committee

This group provided oversight, direction and assistance with the planning, coordination and integration of the Age-Friendly Kansas (AFK) initiative across state agencies and partners from 2023-2026. Their guidance ensured alignment with existing state and local priorities and helped identify opportunities to strengthen cross-agency collaboration. Members are listed below in alphabetical order.

- **David Anderson** – *Previously Served as Commissioner, Aging Services Commission, Kansas Department for Aging and Disability Services (Retired)*
- **Yvonne Case** – *Director of Operations: Medicaid Division of Health Care Finance, Kansas Department of Health and Environment*
- **Lainey Faulkner** – *Director, Bureau of Health Promotion and Public Health Medicaid Liaison, Kansas Department of Health and Environment*
- **Derik Flerlage** – *Senior Deputy Division Director for Public Health, Kansas Department of Health and Environment*
- **Chanda Gross** – *Research Analyst, Division of Healthcare Finance, Kansas Department of Health and Environment*
- **Chrisy Khatib** – *Deputy Director, Adult Protective Services, Kansas Department for Children and Families*
- **Kimberly Reynolds** – *Commissioner, Aging Services Commission, Kansas Department for Aging and Disability Services*
- **Julie Sergeant** – *Previously Served as Deputy Bureau Director, Bureau of Health Promotion, Kansas Department of Health and Environment (Retired)*

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*For a full list of Advisory Committee members, please refer to the complete Age-Friendly Kansas Three-Year Action Plan: Public Health Strategy Playbook, April 2026.*

# Introduction

Kansas is well positioned to advance healthy aging as a core public health priority. As people age across the lifespan, maintaining independence, fostering social connection and ensuring equitable access to supportive services are essential to the health and well-being of all Kansans.

Launched in 2023, the Age-Friendly Kansas (AFK) initiative was formed through the national Age-Friendly Public Health Systems (AFPHS) initiative and the broader Age-Friendly Ecosystem (AFE) framework (see Figure 1). These frameworks were adopted to strengthen Kansas' capacity to plan for and respond to an aging population while recognizing that aging is not a distinct life stage, but a lifelong process shaped by social, economic and environmental conditions. AFK's work has demonstrated that age-friendly public health approaches are most effective when grounded in a life course perspective and situated within the aging ecosystem that supports health at every stage of life.

Figure 1. Age-Friendly Kansas Ecosystem Framework

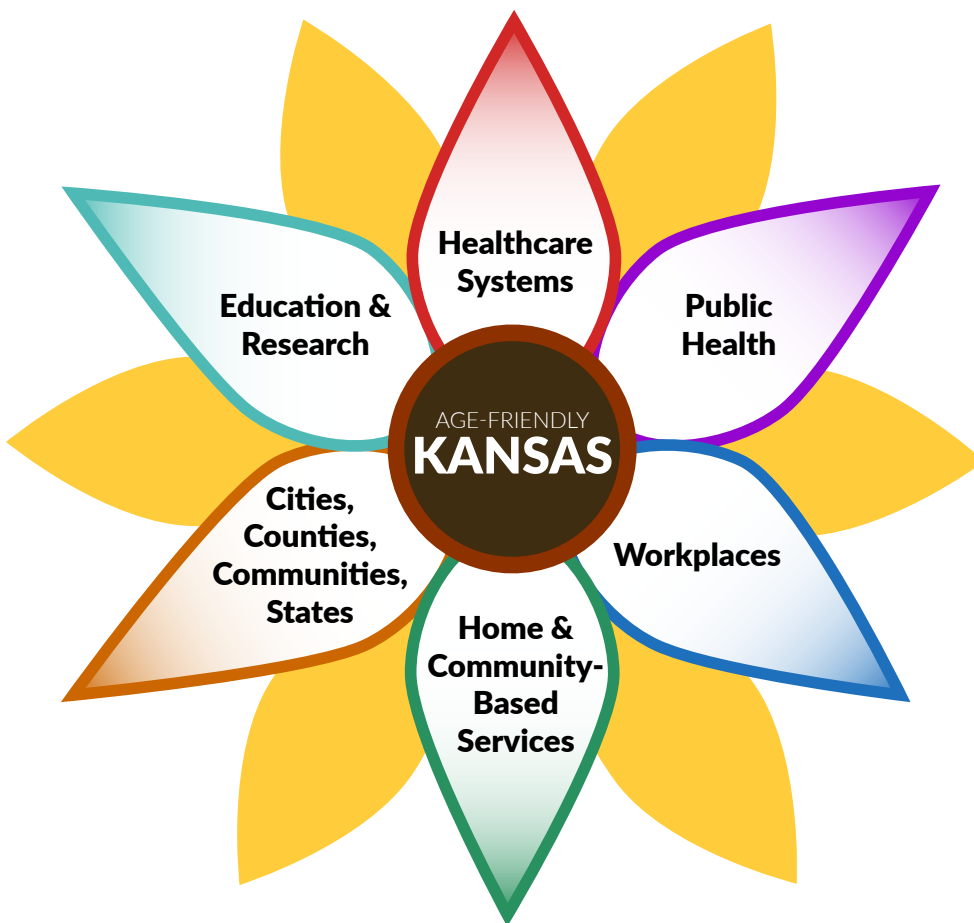
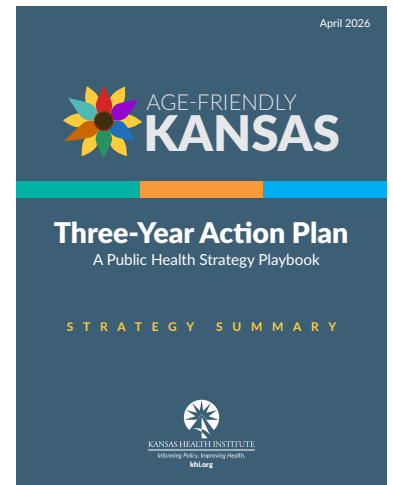


Figure Source: Kansas Health Institute, Age-Friendly Kansas framework adapted from the Age-Friendly Ecosystem Framework developed by Trust for America's Health (2024).



## How to Use This Summary

This document provides brief narrative descriptions of the 21 strategies from the Age-Friendly Kansas Three-Year Action Plan.

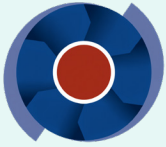
The full playbook includes detailed action steps, lead entities, collaborators and monitoring indicators for each strategy.

**P**ublic health can serve as *connectors and conveners* across the ecosystem to identify and embed healthy aging practices and age-friendly principles throughout Kansas communities, systems and sectors.

# Strategy Summary

The following pages provide a summary of each of the 21 strategies organized under the three cross-cutting themes identified by the Age-Friendly Kansas initiative. Each entry includes the playbook number, strategy title and a brief description of the strategy's intent and context for implementation. For full details, including action steps, monitoring indicators, action leads and key collaborators, refer to the complete *Age-Friendly Kansas Three-Year Action Plan: Public Health Strategy Playbook*.

## THEME 1



## Embedding Aging and Lifespan Perspectives Across Kansas Systems and Services

**Goal:** Ensure a lifespan approach is integrated into all planning, policy, service delivery processes and education curricula, benefiting Kansans at every stage of life.

### Playbook 1.1

#### Apply an Aging in All Policies Approach

The Age-Friendly Kansas initiative and partners will develop an Aging in All Policies toolkit to help local and state policymakers apply the guiding question – “Is this good for all ages across the lifespan?” – in planning, budgeting and policy decisions to ensure age-inclusive and future-ready systems. Applying an Aging in All Policies approach can help policymakers consider how decisions across sectors – such as housing, transportation, workforce and economic development – affect people across the lifespan and support healthy aging.

### Playbook 1.2

#### Embed Aging Across Systems and Sectors

Local and state policymakers will embed aging considerations into strategic plans, workplace policies, educational curricula, housing and zoning ordinances, and other policies to support longevity, accessibility and participation across the life course. Integrating aging considerations across sectors can help ensure that public systems – including housing, transportation, workforce and education – support independence, accessibility and engagement for people at all stages of life.

### Playbook 1.3

#### Pursue AFPHS Recognition Through Self-Assessment and Partnership

State and local public health agencies will pursue Age-Friendly Public Health Systems (AFPHS) recognition by integrating aging considerations into

core public health functions. This includes conducting organizational self-assessments using the AFPHS framework, embedding age-friendly principles across programs and organizational policies, strengthening partnerships with aging services, and using data to identify and address older adult health needs. Pursuing AFPHS recognition can help public health agencies systematically incorporate aging into assessment, policy development, communication and partnership activities that support healthy aging across communities.

## Playbook 1.4

### Pursue Age-Friendly Health Systems (4Ms)

Advance statewide integration of the Age-Friendly Health Systems framework (known as the 4Ms: What Matters, Medication, Mentation, and Mobility) through a reciprocal academic-community partnership that educates the health, social, and direct care workforce serving older adults and their care partners across the care continuum. The 4Ms provides a structured, evidence-based approach that aligns care with each older adults' goals and preferences; addresses key factors influencing health, safety, and quality of life; and strengthens care quality, coordination, and integration across healthcare sites, systems, and community organizations that support healthy aging.

## Playbook 1.5

### Develop Statewide Public Transportation Plan

The Kansas Department of Transportation will develop a strategic plan to establish a coordinated public transportation system that expands access across rural, frontier, suburban and urban Kansas. The plan will prioritize a life-course perspective, clearly delineating how transportation needs will be met across all age groups – including older adults, people with disabilities and low-income populations – and ensuring access to essential destinations such as health care, employment and grocery stores. Kansas currently lacks a formal statewide public transportation plan, and existing efforts tend to focus on specific populations, leaving significant gaps – particularly in non-medical transportation.

## Playbook 1.6

### Conduct Policy and Communications Language Audits

Age-Friendly Kansas partners will develop materials and resources for state and local policymakers to conduct language audits across policies, reports, programs and systems to ensure inclusive, person-

centered language that does not further stigmatize older adults. Adopters will avoid deficit-focused or dehumanizing terms such as “frail elderly,” “dependents” and phrases like “silver tsunami.” Additionally, public health professionals can avoid framing the growing aging population through “statistical panic,” where stakeholders use rising numbers of older adults primarily to signal urgency or strain – rather than framing longevity as an expected and largely positive outcome of public health progress that calls for thoughtful system adaptation.

## Playbook 1.7

### Build Local Health Department Capacity Through Alzheimer's and Dementia Care ECHO® Program

Local health departments will participate in the Alzheimer's and Dementia Care ECHO® Program, in partnership with the Kansas Department of Health and Environment and other collaborators, to build internal capacity to address aging-related issues within their communities and to elevate healthy aging as a core public health priority. Through structured learning and peer exchange, departments will strengthen their ability to support prevention, early identification of cognitive decline, caregiver support and community-based systems change related to Alzheimer's Disease and Related Dementias (ADRD). A key outcome of participation is progress toward, and potential achievement of, Age-Friendly Public Health Systems recognition.

## Playbook 1.8

### Address Elder Mistreatment as a Public Health Priority

Local and state public health agencies and partners will elevate elder mistreatment, including abuse, neglect, exploitation and self-neglect, as a public health priority by integrating it into public health surveillance, prevention and response efforts. This strategy recognizes elder mistreatment as closely linked to behavioral and mental health outcomes such as shame, embarrassment, trauma, social isolation, depression and anxiety, which often prevent disclosure and help-seeking.

### Playbook 1.9

## Create Structured Opportunities for Older Adults to Participate in Policymaking

State and local policymakers will engage older adults directly in policy discussions on issues affecting multiple generations to ensure lived experience, intergenerational relevance and shared solutions are reflected in decision-making. Meaningful participation of older adults in policy processes can strengthen civic engagement, improve policy design and ensure that decisions reflect the experiences and priorities of communities across the lifespan.

### Playbook 1.10

## Develop Aging-Focused Data Dashboard

State agency partners will establish a cross-agency data governance group to improve coordination across aging-related data systems. This group will identify and address fragmented or outdated data infrastructure, clarify statutory and regulatory constraints that limit responsible data sharing, and develop consistent policies and protocols that protect privacy while enabling appropriate, person-centered use of data. In parallel, KDHE and partner agencies will identify and/or develop the resources needed to create a publicly accessible, aging-focused data dashboard consolidating key indicators across health outcomes, social and economic conditions, caregiving and other aging-related measures to support timely decision-making, planning and policy development across Kansas.

## THEME 2



# Intergenerational Connection as Community Infrastructure

**Goal:** Advance intergenerational approaches as a cross-sector strategy that increases meaningful, reciprocal interaction between younger and older Kansans, strengthening social cohesion, reducing isolation and informing community, organizational and policy-level solutions that benefit all generations.

### Playbook 2.1

## Embed Intergenerational Activities into K-12 and Higher Education Curricula

Local school districts and higher education will embed intergenerational activities — such as life interviews and story-sharing — into K-12 and higher education curricula to reduce ageism and strengthen cross-generational connection. Higher education institutions may also support these efforts by aligning programs and campus practices with the principles of the Age-Friendly University (AFU) Global Network, expanding lifelong learning opportunities and incorporating aging-related content across disciplines. Wichita State University, Kansas' first Age-Friendly University, can serve as an early example and resource for institutions exploring these approaches.

### Playbook 2.2

## Develop and Scale Co-Located Child and Elder Care Facilities

Developers and local policymakers should develop and/or scale co-located facilities that combine child care, schools and elder care — building on existing Kansas models — to promote intergenerational interaction and efficient use of community infrastructure. Co-located care models can strengthen social connection, support caregivers and families, and maximize the use of community facilities while fostering regular interaction between younger and older generations.

### **Playbook 2.3**

## **Develop Intergenerational Housing and Infrastructure**

Local communities can advance AARP Livable Communities approaches by supporting intergenerational housing and mixed-use development that enable aging in place across Kansas. In rural communities, the strategy primarily aims to address social isolation, economic decline and limited access to affordable, adaptable housing by strengthening local infrastructure and essential services. In urban communities, it prioritizes improving coordination across housing, health and social services and embedding wraparound supports into housing developments.

### **Playbook 2.4**

## **Integrate Peer- and Group-Based Models into Community Health Programming**

When appropriate, public health and community-based organizations will implement intergenerational, small-group and peer-based approaches to community engagement when developing and implementing organizational work plans that emphasize shared activities and mutual support.

### **Playbook 2.5**

## **Pilot Intergenerational Community Programs**

Local school districts should launch low-barrier, activity-based intergenerational programs — such as drumming, art, gardening and shared physical activity — in schools and community-based settings, with older adults serving as facilitators or co-leaders. These programs can strengthen relationships between generations, promote social connection and provide accessible opportunities for engagement that support physical, emotional and social well-being.

### **Playbook 2.6**

## **Recruit Older Adults into Mentorship and Advisory Roles Across Sectors**

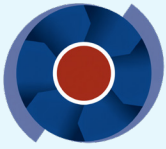
Employers across sectors should recruit older adults into mentorship, training and advisory roles before and after retirement to retain institutional knowledge and strengthen intergenerational workplaces. Engaging older adults in mentorship and advisory roles can support workforce development, strengthen knowledge transfer and promote continued economic and social participation among older adults.

### **Playbook 2.7**

## **Connect Older Adults and Youth Through Reciprocal Volunteer Outreach**

Organizations can implement reciprocal intergenerational outreach programs that connect older adults with younger volunteers and community members through regular check-ins, shared activities and mutual support. These programs strengthen social connections while allowing both younger and older participants to provide assistance, companionship and community engagement opportunities.

## THEME 3



# Addressing Social Isolation and Building Social Connection as a Core Public Health Function

**Goal:** Embed social connection into public health and community systems to improve well-being and reduce isolation across all generations.

### Playbook 3.1

#### Incorporate Civic and Social Connectedness Indicators into Public Health Planning

As social isolation and community connectedness are increasingly recognized as emerging public health priorities across the life course, civic connection is increasingly recognized as a factor associated with health and community belonging. KDHE and public health partners may consider available indicators related to social connectedness and civic engagement (e.g., volunteering, participation in community activities) as an indicator of community health and social connectedness. Embedding civic connection into routine public health programming can help address social isolation, strengthen community relationships and support population health across the life course.

### Playbook 3.2

#### Screen for Social Isolation Risk at Key Life Transitions Using Validated Tools

Health care and social service providers will use evidence-based tools such as the UCLA Loneliness Scale, during key life transitions – such as retirement, the death of a spouse, moving to an adult care home or senior living community, or becoming a caregiver – to identify individuals at risk for social isolation and connect them to appropriate supports. Screening during these transition points can help providers identify emerging risks for isolation and link individuals with community resources, social supports and services that promote health and well-being.

### Playbook 3.3

#### Implement Outreach Materials Using Strengths-Based, Connection-Focused Language

Public health and health care providers will design and deliver outreach using strengths-based, connection-focused language rather than clinical terminology to reduce stigma and increase engagement among older adults and caregivers. Framing outreach around connection, purpose and community participation can help normalize conversations about social well-being while hopefully increasing participation in programs and services that support healthy aging.

### Playbook 3.4

#### Analyze and Share Age-Disaggregated Social Isolation Data

Kansas Department of Health and Environment will analyze age-disaggregated responses to the Kansas Behavioral Risk Factor Surveillance System (BRFSS) social determinants of health questions on social and emotional support and social isolation and share findings with relevant stakeholders to inform planning and action. Making age-stratified data more accessible can help policymakers, community organizations and public health agencies better understand patterns of social isolation and develop targeted interventions to improve social connection among older adults.