



**Program #40053 - Racial and Ethnic Approaches to Community Health** FY 2024 Department Requested

**Department:** Health Department **Program Contact:** Charlene McGee  
**Program Offer Type:** Existing **Program Offer Stage:** Department Requested  
**Related Programs:** 40199T, 40199U  
**Program Characteristics:** In Target

**Executive Summary**

Racial and Ethnic Approaches to Community Health (REACH) aims to end chronic disease and related racial/ethnic health disparities within the Black/African American/African immigrant and refugee communities by ensuring opportunities to realize optimal health potential. REACH programming values a culture- and strength-based approach, relying on community wisdom to implement culturally tailored interventions that address root causes of health inequities and preventable risk behaviors through communications, policy, systems, and environmental change strategies in partnership with community.

**Program Description**

Racial and Ethnic Approaches to Community Health (REACH) uses culturally specific and cross-cultural approaches that combine the community-identified priorities and CDC-funded communication, policy, systems, and environmental change strategies focused on reducing chronic disease in local African American/Black communities, including African immigrants and refugees. REACH continues to be a foundational component to the Public Health Division’s commitment to equity by addressing the ways that societal conditions, built environment, and systems and policies create health disparities among racial and ethnic populations. REACH has three current areas of focus: nutrition, physical activity, and community-clinical linkages. Nutrition programming increases the number of community settings offering healthy food, retail access to healthy food through innovative procurement practices, and community support for breastfeeding. Physical activity programming increases the number of safe, desirable locations for physical activity, including active transportation, and increases the number of people with access to them. Community-clinical linkage programming increases the use of health and community programs, including referrals to these resources; expands the use of health professionals, such as community health workers; and improves quality of service delivery and experience of care. Together, these program areas work to redress social determinants of health challenges and barriers and improve the overall health of neighborhoods throughout Multnomah County.

REACH uses social determinants, health behavior, disease prevalence, mortality, and a variety of other data to monitor the well-documented chronic disease health disparities experienced by Black/African American/African communities and plans responsive strategies. Community-voiced data on lived experience is especially valued and incorporated into planning, given the limitations of institutional data, such as not disaggregating data for Black immigrants/refugees. REACH is steered by its multi-sectoral community advisory committee, the ACHIEVE Coalition. REACH and its partners regularly hold focus groups, community webinars, and events to gather community concerns.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	# of policy, systems, and environment strategies implemented	25	25	25	25
Outcome	# of Black/African American/African Immigrants and other communities reached through policy, systems, and enviro	5,214	4,000	14,054	5,000
Output	# of settings implementing policy, systems and environment strategies	11	20	67	50

**Performance Measures Descriptions**

Performance Measures 1 and 3 are for settings that are occupied by Black/African American/African Immigrant communities.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Department Requested General Fund	Department Requested Other Funds
<b>Program Expenses</b>	<b>2023</b>	<b>2023</b>	<b>2024</b>	<b>2024</b>
Personnel	\$41,256	\$921,222	\$394,167	\$427,712
Contractual Services	\$320,510	\$0	\$150,000	\$499,823
Materials & Supplies	\$18,744	\$0	\$28,524	\$57,408
Internal Services	\$129,262	\$123,247	\$137,453	\$59,752
<b>Total GF/non-GF</b>	<b>\$509,772</b>	<b>\$1,044,469</b>	<b>\$710,144</b>	<b>\$1,044,695</b>
<b>Program Total:</b>	<b>\$1,554,241</b>		<b>\$1,754,839</b>	
<b>Program FTE</b>	0.32	7.33	2.60	3.47

Program Revenues				
Intergovernmental	\$0	\$1,044,469	\$0	\$1,044,695
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,044,469</b>	<b>\$0</b>	<b>\$1,044,695</b>

Explanation of Revenues

This program generates \$59,752 in indirect revenues.  
 Federal: \$ 975,000 - REACH GY08  
 Federal: \$ 824,999 - COVID-19 Federal REACH - Flu Vaccination  
 State: \$ 69,695 - PE04-02 Community Chronic Disease Prevention

Significant Program Changes

**Last Year this program was:** FY 2023: 40053 Racial and Ethnic Approaches to Community Health

This current round of REACH funding is set to end September 2023 and the reapplication process has begun with a due date in Spring 2023. This round of funding covers 6 FTEs which includes a Program Supervisor, 4-Program Specialists who are staff leads for the 3 strategies areas (nutrition, Community Clinical Linkages, Built Environment) and Communications, a Community Health Specialist who supports the ACHIEVE Coalition.