

Program #40053 - Racial and Ethnic Approaches to Community Health

2/20/2019

Department: Health Department **Program Contact:** Tameka Brazile

Program Offer Type: Existing Operating Program Program Offer Stage: As Requested

Related Programs: 40006, 40060, 40037

Program Characteristics: In Target

Executive Summary

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

Program Summary

Racial and Ethnic Approaches to Community Health (REACH) uses culturally-specific and cross-cultural approaches that combines the voice of community-identified priorities and Centers for Disease Control and Prevention (CDC)-funded communication, policy, system, and environmental change strategies focused on reducing chronic disease in local African American/Black communities, including African immigrants and refugees. The Public Health Division received a new round of REACH funding in FY19 that builds upon the partnerships and strategies developed during the previous cycle of REACH funding (2014-2018). REACH will continue to be a central component to the Health Department'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. This work entails developing and maintaining authentic partnerships with culturally-specific community based organizations, clients, faith-based organizations, civic organizations, and local governments to enact approaches and policies to decrease health inequities.

REACH's culturally-tailored programming addresses preventable risk behaviors (i.e., tobacco use, poor nutrition, and physical inactivity) to improve health, prevent chronic disease, and reduce health disparities among racial and ethnic populations with the highest risk/burden of chronic disease (i.e. hypertension, heart disease, Type 2 diabetes, and obesity). In FY20, there are three main REACH program areas focused on local Black/African American communities: nutrition, physical activity, and community-clinical linkages. Nutrition programming will increase the number of places within the County offering healthy food; increase access to healthier foods; and increase continuity of care/community support for implementing breastfeeding. Physical activity programming will increase the number of places that improve community design by connecting safe and accessible places for physical activity; and increase the number people with safe and accessible places for physical activity. Community-clinical linkage programming will increase the use of appropriate and locally available health and community programs, including increasing access and referrals to these resources; expanding the use of health professionals, such as community health workers; and improve quality of service delivery and experience of care. Together, these three program areas work to improve the overall health of neighborhoods throughout Multnomah County.

Performance Measures								
Measure Type	Primary Measure	FY18 Actual	FY19 Purchased	FY19 Estimate	FY20 Offer			
Output	# of policy, systems and environment strategies implemented	NA	NA	10	15			
Outcome	# of settings implementing policy, systems and environment strategies	NA	NA	7	10			
Outcome	# of Black/African Americans reached through policy, systems and environment changes	NA	NA	700	1,000			

Performance Measures Descriptions

These measures are new to reflect the new round of REACH funding.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2019	2019	2020	2020
Personnel	\$886,281	\$92,648	\$406,908	\$316,088
Contractual Services	\$200,000	\$67,500	\$5,000	\$381,227
Materials & Supplies	\$61,291	\$14,538	\$4,596	\$43,907
Internal Services	\$106,446	\$11,683	\$47,599	\$50,778
Total GF/non-GF	\$1,254,018	\$186,369	\$464,103	\$792,000
Program Total:	\$1,440,387		\$1,256,103	
Program FTE	6.80	0.75	3.10	2.40

Program Revenues								
Indirect for Dept. Admin	\$9,089	\$0	\$0	\$0				
Intergovernmental	\$0	\$186,369	\$0	\$792,000				
Total Revenue	\$9,089	\$186,369	\$0	\$792,000				

Explanation of Revenues

CDC REACH Grant: \$ 792,000

Significant Program Changes

Last Year this program was: FY 2019: 40053-19 Racial and Ethnic Approaches to Community Health

In FY19, this program offer included Community Powered Change (CPC)/Community Health Improvement Plan (CHIP) and all health equity staff. These programs remain core components of the Public Health Division and were moved to 40096: Public Health Office of the Director in FY20 as part of department and program offer reorganization. REACH saw an increase in Federal Grant revenue that will result in increased program capacity (FTE and scope/level of services).