June 12, 2018

The Honorable Tom Cole
Chairman
Subcommittee on Labor, HHS and Education
Committee on Appropriations
U.S. House of Representatives
Washington, DC 20515

The Honorable Rosa DeLauro
Ranking Member
Subcommittee on Labor, HHS and Education
Committee on Appropriations
U.S. House of Representatives
Washington, DC 20515

Dear Chairman Cole and Ranking Member DeLauro:

On behalf of organizations and communities working toward ensuring healthy opportunities are available to all individuals regardless of race, ethnicity, or socioeconomic status, we are writing to urge you to include $57.95 million for the Racial and Ethnic Approaches to Community Health program (REACH) in the Fiscal Year 2019 Labor, HHS and Education Appropriations Bill.

While we deeply appreciate that REACH was funded in the final FY2018 omnibus, REACH has not received a funding increase since FY 2015, when it was boosted by just $950,000. The program is the only federal investment directly addressing health disparities and the only community health program currently funded at the Centers for Disease Control and Prevention (CDC). Given our country’s costly chronic health problems and the fact that population based health interventions are a proven way to improve health outcomes, it is time for Congress to better invest in REACH.

The CDC’s recent grants notice for REACH reflects a new five-year initiative and wraps up the previous funding period in which 49 grantees came from a variety of governmental and nongovernmental organizations, including state and local health departments, tribes/tribal organizations, universities and community-based organizations. REACH partners identify, develop, and disseminate effective strategies for addressing health disparities across a wide range of health priority areas such as cardiovascular disease, diabetes, breast and cervical cancer, infant mortality, asthma, immunization, and obesity. Awardees create healthier communities by strengthening the capacity and implementing tailored evidence- and practice-based strategies that will reach the selected priority population across multiple settings.

REACH is advancing locally driven strategies that work to eliminate racial and ethnic health disparities in chronic disease and related risk factors. Some highlights of current grantees include:

- The Coeur d’Alene Tribe in Northern Idaho has improved participation in aerobic workout programs by adopting traditional dance, leveraging what their community is most familiar with.
- The Montgomery Area Community Wellness Coalition in Alabama has partnered with corner stores to both improve their sales of produce by over 30%, with customers reporting eating more fruits and vegetables during the initiative.
- In Ohio, Salaam Cleveland worked with the local Muslim community to convert an underused warehouse space into a gym, hosting reactional activities particularly for women and girls.
- Cultiva La Salud, has worked with underserved Latino communities in the Fresno, California area to bring farm stands to locations where healthy food is hard to find or afford.

Data demonstrates the value of REACH. CDC conducted a REACH US Risk Factor Survey from 2009 to 2012 gathering health and behavior information from REACH US communities about chronic disease prevalence, fruit and vegetable consumption, physical activity levels, prevention services use, and adult immunizations rates.
• Over the 3-year intervention period, smoking prevalence decreased on average 7.5% (or an average of 2.5% per year) among African Americans and 4.5% among Hispanics.

• In REACH communities that focused on cardiovascular disease or diabetes during this time, the percentage of adults who reported eating five or more fruits and vegetables daily increased 3.9% among African Americans and 9.3% among Hispanics.

• The percentage of adults aged 65 years or older who had an influenza shot in the past year increased on average 11.1% across the 3-year intervention period.

Since FY 2017, REACH has set aside $16 million for Good Health and Wellness in Indian Country grants to improve health outcomes for American Indians and Alaska Natives. The program has funded 12 tribes to work on effective community-chosen and culturally adapted strategies to reduce the leading causes of chronic conditions, increase health literacy, and strengthen community-clinical links. To ensure best practices are followed, 11 tribal epidemiology centers provide technical assistance and evaluate the program at the tribe and area levels.

We urge you to increase investment in public health through REACH, allowing the new round of grantees to improve health outcomes and address disparities. Thank you in advance for your consideration.

Sincerely,

ADAP Advocacy Association
Advocates for Better Children's Diets
American Association on Health and Disability
American College of Sports Medicine
American Council on Exercise
American Medical Student Association
American Muslim Health Professionals
Asian & Pacific Islander American Health Forum
Asian Health Coalition (IL)
Asian Services In Action (OH)
Association of University Centers on Disabilities
Bronx Health REACH (NY)
CA4Health
California Pan-Ethnic Health Network
Cancer Council of the Pacific Islands
Center for Asian Health Equity (IL)
Center for Health Progress (CO)
Center for Southeast Asians (RI)

CenterLink: The Community of LGBT Centers
Central Valley Immigrant Integration Collaborative (CA)
ChangeLab Solutions
Chinese American Planning Council (NY)
CHOW Project (HI)
Community Access National Network
Community Catalyst
Congregation of Our Lady of Charity of the Good Shepherd, US Provinces
Consumers for Affordable Health Care (ME)
Empowering Pacific Islander Communities
EverThrive Illinois
Florida Policy Institute
Georgia Watch
Georgians for a Healthy Future
GLMA: Health Professionals Advancing LGBT Equality
Hannahville Indian Community (MI)
Having Our Say Coalition (CA)
Health & Medicine
Policy
Research Group (IL)
Health Care for All Oregon-Action
Healthy Gen (WA)
Hep B United
Hep Free Hawaii
Hepatitis B Foundation
Hispanic Health Network
Illinois Public Health Association
Institute for Family Health (NY)
Inter Tribal Council of Michigan
Justice in Aging
Korean Community Services of Metropolitan New York, Inc.
Lake County Health Department and Community Health Center (IL)
Lakeshore Foundation
Latino Commission on AIDS
The Latino Health Insurance Program, Inc. (MA)
Life Foundation (HI)
The Los Angeles Trust for Children's Health (CA)
Michigan Disability Rights Coalition
National Advocacy Center of the Sisters of the Good Shepherd
National Association of County and City Health Officials
National Association for Health and Fitness
National Birth Equity Collaborative
National Black Justice Coalition
National Center for Lesbian Rights
National Health Care for the Homeless Council
National Hispanic Medical Association
National REACH Coalition
National Recreation and Park Association
National Tongan American Society
New Yorkers for Accessible Health Coverage
NOELA Community Health Center (LA)
Ohio Asian American Health Coalition
Planned Parenthood Federation of America
The Praxis Project
Prevent Blindness
Prevention Institute
Public Justice Center (MD)
Rails-to-Trails Conservancy
Raimi + Associates
Redstone Global Center for Prevention and Wellness, George Washington University
RESULTS
Safe Kids Oakland County (MI)
Safe Routes to School National Partnership
Sargent Shriver National Center on Poverty Law
Sexuality Information and Education Council of the United States
Society for Public Health Education
South Los Angeles Health Projects (CA)
Southeast Asian Mutual Assistance Associations Coalition (PA)
Southwest Center for Health Innovation (NM)
Southwest Women's Law Center
Summit Health Institute for Research and Education, Inc.
Tennessee Justice Center
Trust for America's Health
United Methodist Church - General Board of Church and Society
Universal Health Care Action Network of Ohio
University of Hawaii John A. Burns School of Medicine
West Valley Neighborhoods Coalition (AZ)
YMCA of the USA