October 16, 2017

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

The Honorable Roy Blunt
Chairman
Subcommittee on Labor, HHS and Education
Committee on Appropriations
United States Senate
Washington, DC 20510

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

The Honorable Patty Murray
Ranking Member
Subcommittee on Labor, HHS and Education
Committee on Appropriations
United States Senate
Washington, DC 20510

Dear Chairs and Ranking Members:

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 $50.95 million in the final FY 2018 Labor, HHS and Education Appropriations bill for the Racial and Ethnic Approaches to Community Health program (REACH) as it was provided in the previous FY 2017 appropriations act. 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). While the program was not funded under the House or Senate Labor, Health, and Humans Services Appropriations bills, we ask that you revisit the program so that REACH grantees can continue their evidence-based work to achieve health equity.

Everyone should have the opportunity to achieve his or her full potential. Unfortunately, so many individuals are unable to adopt and maintain healthy lifestyles due to a lack of availability of healthy choices in their communities. The REACH program serves as a crucial way to help these communities make healthy living a reality by tackling risk factors for some of the most expensive and burdensome health conditions impacting racial and ethnic groups. By fully funding REACH, you will be ensuring we continue making valuable ground in tackling racial and ethnic disparities.

REACH serves as the nation’s only community-based, culturally relevant and multi-disciplinary program dedicated to the elimination of racial and ethnic health disparities. Health disparities, like the examples listed below, continue to rise and widen in communities because of poverty, and other social, economic and environmental factors. According to CDC and other health experts:

- Non-Hispanic blacks are 40% more likely to have high blood pressure than non-Hispanic whites, and they are less likely to effectively manage these conditions.
- Non-Hispanic blacks have the highest rate of obesity (44%), followed by Mexican Americans (39%).
- The rate of diagnosed diabetes is 18% higher among Asian Americans, 66% higher among Hispanic/Latinos, and 77% higher among non-Hispanic blacks compared to non-Hispanic whites.
- American Indians and Alaskan Natives are 60% more likely to be obese than non-Hispanic whites.
• Life expectancy for American Indians and Alaska Natives is 4.4 years less than all US races
• American Indians and Alaska Natives have the highest prevalence of diabetes, with a rate more than double that of non-Hispanic whites
• Asians are 60% more likely to be diagnosed with end stage renal disease than non-Hispanic whites
• The incidence rate of cervical cancer is 41% higher among non-Hispanic black women and 44% higher among Hispanic/Latino women compared to non-Hispanic white women

CDC conducted a REACH US Risk Factor Survey annually from 2009 to 2012. The survey gathered health and behavior information from 28 REACH US communities about chronic disease prevalence, fruit and vegetable consumption, physical activity levels, prevention services use, and adult immunizations rates. The following are some of the findings from REACH communities:

• 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.

REACH currently funds 49 grantees 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 at least 75% of the selected priority population across multiple settings.

Starting in 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.

The REACH program is advancing community-level strategies that work to eliminate racial and ethnic health disparities in chronic disease and related risk factors. Investing directly in community coalitions with multiple years of awards allows the time and resources necessary to address the many root causes of racial and ethnic disparities and reverse the upward trend of chronic disease.

We urge you to maintain the same level of investment for these REACH communities to improve health outcomes and address disparities as was provided in FY 2017. Thank you in advance for your consideration.

Sincerely,
Guam Regional Medical City
Hadassah, The Women's Zionist Organization of America, Inc.
Health Care for All Oregon Action
Healthy House Within a MATCH Coalition (CA)
Hep B United
Hep Free Hawaii
Hepatitis C Allies of Philadelphia (HepCAP)
Hepatitis Education Project (WA)
Hispanic Health Network
Immunization Action Coalition (MN)
Immunize Nevada
Impetus - Let's Get Started, LLC. (MN)
In Our Own Voice: National Black Women's Reproductive Justice Agenda
Institute for Community Collaborative Studies, California State University Monterey Bay
Institute of Social Medicine & Community Health
Inter-Tribal Council of Michigan
Iowa Public Health Association
Iowa Society for Public Health Education
Kalusugan Coalition, Inc. (NC)
Kentucky Equal Justice Center
Korean American Association of Greater Cleveland (OH)
Korean Community Services of Metropolitan New York, Inc.
Lakeshore Foundation
Lao Assistance Center of Minnesota
Lao Association of Connecticut
Latino Commission on AIDS
Long Beach Immigrant Rights Coalition (CA)
The Los Angeles Trust for Children's Health (CA)
Mandela MarketPlace (CA)
Maternal and Child Health Access
Meharry Medical College (TN)
Minnesota SOPHE
Mississippi Center for Justice
Mo and Associates
Monona County Public Health (IA)
Morehouse School of Medicine
National Advocacy Center of the Sisters of the Good Shepherd
The National Alliance to Advance Adolescent Health
National Association for Health and Fitness
National Association for the Advancement of Colored People
National Association of County and City Health Officials
National Black Justice Coalition
National Center for Transgender Equality
National Coalition for LGBT Health
National Complete Streets Coalition
National Council of Asian Pacific Americans
National Council of Asian Pacific Islander Physicians
National Family Planning & Reproductive Health Association
National Health Law Program
National Hispanic Medical Association
National Immigration Law Center
National LGBTQ Task Force Action Fund
National Minority AIDS Council
National Network of Abortion Funds
National Organization for Women
National REACH Coalition
National Recreation and Park Association
National Tongan American Society
National Viral Hepatitis Roundtable
New Jersey Public Health Association
New Jersey Society for Public Health Education
New Mexico Asian Family Center
New York Legal Assistance Group
Northern California SOPHE Chapter
OCA Greater Cleveland Chapter (OH)
Ohio Asian American Health Coalition
Ohio Society for Public Health Education
Operation Samahan, Inc. (CA)
Oregon Center for Public Policy
Oregon Community Health Workers Association
Oregon Foundation for Reproductive Health
Pacific Northwest Chapter of the Society for Public Health Education
Peer Health Exchange (CA)
Philippine American Society of Ohio
Physicians Action Network
Planned Parenthood Federation of America
The Praxis Project
Prevent Blindness
Prevention Institute
Project Inform
Public Health Advocates
Public Health Institute
Public Justice Center
The Queen Center (UT)
Raimi & Associates
Raising Women's Voices for the Health Care We Need
Redstone Global Center for Prevention and Wellness
Regional Asthma Management and Prevention Roadmap to Peace Initiative
Safe Routes to School National Partnership
Salaam Cleveland (OH)
San Francisco AIDS Foundation (CA)
Sargent Shriver National Center on Poverty Law
SC Appleseed
Service Employees Internation Union- Oregon State Council
Sexuality Information Council of the United States
Society for Public Health Education
South Los Angeles Projects (CA)
Southeast Asian Mutual Assistance Association Coalition (PA)
St. Clair Superior Development Corporation (OH)
Staten Island Partnership for Community Wellness (NY)
Steps Coalition (MS)
Tennessee Justice Center
Transportation For America
Trust for America's Health
Tufts University
Tuskegee University College of Veterinary Medicine
U.S. Breastfeeding Committee
UCLA Department of Community Health Sciences
Unity Care NW (WA)
University of Nevada Reno
University of Nevada Reno Community Health Sciences
University of North Carolina at Chapel Hill Gillings School of Global Public Health
University of North Carolina at Greensboro
Urban League of Portland (OR)
Utah Chinese Community Center
Utah Pacific Islander Civic Engagement Coalition
Utah Women Of Color Council

Vermont Public Health Association
Vietnamese American Civic Association
We Can Do Better (OR)
Westlake Chinese Culture Association (OH)
Wisconsin Alliance for Women's Health
Yeshua Adonai Bible International
YMCA of Greater Seattle (WA)
YMCA of the USA