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## From Brenda R. Sharpe, President and CEO

### *Our Investments in Cultural Competency:*

Diversity, inclusion and non-discriminatory practices have been guiding principles of the REACH Healthcare Foundation since our beginning in 2003. The Foundation was established for the purpose of addressing the health needs of medically indigent and underserved individuals, many of whom are racial and ethnic minorities, live in areas that are geographically isolated, and represent diversities of all types.

Many experts in the field of health and health care believe it is impossible to effectively address the health needs of underserved populations without an understanding of cultural backgrounds, norms and beliefs. The REACH Board of Directors agrees, and that has been routinely reinforced over the last seven years of our grantmaking. In fact, it is that knowledge that spurred our interest and investments in cultural competence as a key strategy for improving the health of people in the communities we serve.

In my eight years with the organization, I have occasionally been questioned about what the REACH Foundation knows and understands about cultural competence. I'd like to share some background on why, personally and professionally, I strongly support the Foundation's involvement in efforts to strengthen knowledge and practice in this area.

I imagine that when people see me in my role as President and CEO of REACH, they may wonder what I, personally, and the organization I lead understand about poverty, diversity and inclusion, much less cultural competency.

I recognize that I have much to learn about diversity, inclusion and cultural competence. I am a white female who grew up in western Kansas and now live in Johnson County, Kansas. I also am the daughter of an immigrant father, raised by a single mother in a low-income household, and the first in my immediate family to attend college. Some of the challenges my family faced during my childhood greatly influenced my early commitment to social justice and working with people in crisis. Like many people who grew up in emotionally and economically fragile situations, my career path has been guided by those experiences, and included work in child abuse treatment and prevention, substance abuse services, and sexual assault and family violence programs. In my time at REACH, I've learned about another troubling and widespread type of injustice: Inequity in health care access, quality and health outcomes.

For all of my personal beliefs, experiences and work with marginalized people, however, I recognize that I have never been judged, mistreated or overlooked because of the color of my skin, or mocked or harassed because of an accent, religious perspective or sexual orientation. Furthermore, I've never been presumed to be "cheating the system" because I have qualified for and used public and charitable health services. It is a tragic fact that these types of prejudices are present in the United States and in our local communities, and they result in people being sicker and dying earlier than their white peers.

In an effort to improve health equity in our six-county service area, the REACH Foundation introduced a Cultural Competency Initiative in 2008 with an aim of reducing disparities in health access and quality. As part of the early work of the initiative, we understood that our own

organization had a lot of room for growth in the areas of diversity, inclusion and cultural competency. So we first went through an organizational assessment and examination of our personal beliefs and organizational practices in these areas.

As a result of our organizational assessment, the Foundation adopted a policy on diversity and inclusion, and adjusted some of our human resource policies and benefits plans. For the past three years, cultural competence has been a focus of Board retreats, experiences with our grantees and strategic planning. The topic is now part of every Board meeting agenda.

Our Theory of Change, a roadmap for grantmaking developed as part of REACH's five-year strategic plan, acknowledges the importance of a culturally competent workforce and nonprofit leaders. Our grant applications ask grantees to describe how their organizations address diversity and inclusion in their services, staffing and governance.

Later in 2008, the REACH Board allocated \$300,000 to further the goals of the Cultural Competency Initiative and has since invested an additional \$265,000. Most of those funds have supported intensive technical assistance, coaching and other professional development for more than two dozen nonprofit organizations to help them increase their knowledge and change practices. We have underwritten several local conferences on the subject and provided scholarships to help nonprofit leaders and health providers participate. Early on, REACH presented the initiative to area foundations and invited funders to join with us. In the past two years, we have successfully recruited two additional funders to support the technical assistance work, which has allowed us to greatly expand this component.

While REACH is a regional foundation, our early efforts have attracted national attention. Our project staff, led by Senior Program Officer Carla Gibson, has been invited to present this work at several national conferences.

Our work in this arena has certainly increased our awareness of the need to improve the racial and ethnic diversity of our Board and staff. REACH's Board nomination process is outlined in bylaws and other guidelines established as part of the legal settlement that created our foundation. Recruitment of Board candidates begins with a 13-member Community Advisory Committee (CAC), individuals appointed by the Kansas Governor, the Kansas Attorney General, the Johnson County Commission, the Unified Government of Wyandotte County/Kansas City Kansas, and the Allen County Commission. The CAC is charged with identifying and putting forth a slate of candidates to fill Board seats.

While the Board and staff recruit prospects, the CAC has primary responsibility for the development of a slate of candidates. The slate must reflect many considerations—expertise and experience, geographic representation from across our service area, gender, race, ethnicity, sexual orientation, age, religion and many others. Beyond these aspects, nominees must demonstrate understanding and commitment to the Foundation's mission and purpose.

The CAC and Board are diligent in considering all of these factors as they nominate and then select individuals to govern. Change doesn't happen rapidly, but this process is gradually producing a more diverse and representative Board.

In terms of staff, we have adjusted our personnel policies and procedures in an effort to better recruit and retain people of diverse backgrounds and experiences. Cultural competency is one of

our core values, and part of our individual and professional development plans and performance review process.

We recently invited the latest class of technical assistance recipients to join us and our two funding partners for a kick-off breakfast to introduce them to the initiative. It was exciting to see the array of organizations that have stepped forward to tackle these kinds of organizational issues which can be challenging to address. We shared our own experiences with this group of nonprofit leaders, and our belief that cultural competence is a critical thread that not only underlies our philanthropic work but also their work as valuable service providers.

As a learning organization, the REACH Foundation will continue to examine ways we can improve in this area and learn from our local partners who are tackling similar challenges.

We welcome your thoughts and ideas as we move forward.

A handwritten signature in black ink that reads "Brenda R. Sharpe".

Brenda R. Sharpe, President and CEO