Emerging research suggests improving health outcomes requires interventions beyond traditional clinical care.

A more wholistic approach that focuses on population health and partnerships that integrate health and social services may be particularly important for reducing health inequities.

There is little known about the association between community diversity and population health system structure.

This study explores the association between racial composition of a community and the multisector delivery of population health activities.

We conducted a retrospective cohort study using data from the National Longitudinal Survey of Public Health Systems (NALSYS).

NALSYS measures the connectedness of community organizations who are delivering health and social services by asking local public health officials about the availability of 20 core population health activities within their community and the range of sectors that deliver each activity, including hospitals, primary care providers, insurers, employers, schools, and community-based organizations.

We categorized communities into quartiles based on the portion of the population that is black. We then descriptively examined multisector contributions to the NALSYS activities based on community quartile.

Our results suggest substantial variation in the relationship between diversity and multisector contributions to population health.

We found that community health centers, insurers, government agencies, universities, and faith-based organizations increased their participation in population health activities in more diverse communities.

Findings suggest that a subset of sectors may be focusing their population health efforts on diverse populations that have both complex health and social needs.

Special thanks to the Spinal Cord and Brain Injury Research Center (ScoBIRC) African American Research Training Scholars program for letting me conduct this research.

A big thank you to my two amazing mentors Rachel Hogg-Graham and Emily Clear.