



Charting California's Path to Racial and Health Equity

Centering Belonging and Civic Muscle in Policy

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On May 19-20th a group of 800 leaders from community, healthcare, community development, and other sectors came together virtually.

We explored how to collectively use the [Healthy Neighborhood Investments Policy Scan and Strategy Map](#) for joint action to accelerate investments in health and racial equity.

We gathered with an intention to weave belonging and civic muscle into the fabric of policy for racial and health equity—with a focus on California. We embraced the promise of everyone living their lives fully and our neighborhoods, economy and systems all working to support well-being and health. We collectively called for an explicitly prevention-centered policy agenda, putting communities at the center of policy to create health and well-being across the state. As one participant noted, we need policy with, “more human centered language to live our lives fully and have access to physical manifestation of joy, peace, security and well being.”

The convening began with a conversation moderated by Doug Jutte, Executive Director of Build Healthy Places Network and plenary speakers Angela Glover-Blackwell, Founder-in-Residence of PolicyLink, Kathleen Kelly Janus, Senior Advisor on Social Innovation for Governor Gavin Newsom, and Carolyn Wang Kong, Chief Program Director of Blue Shield of California Foundation. Together they left participants feeling inspired, engaged, and seen for their collective efforts towards advancing health and racial equity.

We need to change the question. **“From what we should do, to who do we want to become?”**

- Carolyn Wang Kong, Chief Program Director, Blue Shield of California Foundation

Census outreach efforts helped catalyze community engagement by using data-informed approaches. **“Trust was key to lift up voices of those who were marginalized, to make sure they were counted. This data will help inform the distribution of resources - and that is power.”**

- Kathleen Kelly Janus, Senior Advisor on Social Innovation for Governor Gavin Newsom

“Civic muscle is another way to talk about power.” In order to tap into that power, people need to be in a setting where they know they belong.

“We can and must do some bold things.” This is the moment for our radical imagination.

- Angela Glover-Blackwell, Founder-in-Residence of PolicyLink

The conversation moved into a lively discussion with participants, who dug into the details and inquired about the power of storytelling and shifting the narrative to one that centers lived experience and demands from resident leaders; roles of institutional stakeholders; the businesses case for racial equity; how to do this work in more conservative areas of our country. We all came away inspired, and ready to get to work.

This document summarizes some of the themes we discussed and connects those to active policy conversations in California and beyond. Our culture, how money gets invested, and the policies we implement are a reflection of our values. We heard consistently throughout the two days that all of our policies need to focus on the commons--those physical, social, and economic spaces where different people come together to share ideas, create common purpose, and build a better future. We also heard that creating opportunities to dismantle inequities requires focus, intention, and partnership. And participants stated a commitment to challenge policy as a zero sum space, that equity in policy cannot focus on individuals. Policy must center root strengths built from neighborhood voice, from lived experiences, and trust that communities know their solutions. We heard a strong interest to carry forward collective actions, solutions, and opportunities to advance this work together.

The “How”: A Vision for a Healing Policy Process with Collective Insights

As participants talked about the kinds of policy that would grow belonging and civic muscle, much of the conversation turned to how policy is made--from an idea, into the policy on paper, through implementation, and on to adapting and learning. If we want policies that heal, we need a process that heals too. We have uplifted the collective insights shared during the event to strengthen equitable policy processes that can be applied across policy domains. We found that approaching the policy process through a commitment to equity and community voice stands to create conditions that enable innovative and impactful investments to accelerate racial and health equity across a wide range of policies.

The Healthy Neighborhood Investments Policy Scan and Strategy Map points to some models of a healing policy process, such as the the ability for communities to gather and make sense of information to inform community needs, policy opportunities, and priorities; opportunities for community-led approaches to demonstrate and measure the impact of investments, partnerships, and policy; spaces for policy innovations and learning to be shared across communities, places and sector/policy areas. The Scan also invited policy design to center processes that build civic muscle, community organizing, and resident leaders, and to fund those efforts that deepen engagement and advocacy for local, state and federal policy.

The convening participants built upon these ideas and articulated some of ways policy processes can more effectively build civic muscle and belonging that are needed for California and other communities. The collective insights that emerged during the convening include:

Build Belonging and Civic Muscle

- Remove barriers to participating early in the policy process to cultivate belonging--Using plain language, inviting participation when needs and priorities are defined, addressing geographic and linguistic isolation, investing in building trust, and using good communication.
- Create more authority for partnership agreements with communities and opportunities for shared governance of spaces and leadership of programs
- Build civic muscle--Support community organizing, educating around policy process, intentional capacity building, resident leadership training
- Cultivate champions in institutions to carry equity priorities and metrics forward
- Provide education around belonging/ civic muscle and how they connect to other parts of society or sectors (e.g., Public health, transportation, housing, etc.)
- Build a learning and community-engaged environment for policy--Doing the analysis up front to inform priorities and options; doing the formative evaluation to ensure implementation; doing the summative evaluation to inform adaptation over time; agreeing to common definitions of equity and how to measure progress in a way that's asset-based, community-centered, and adaptable
- Bridge the capacity to align local and state level actions for equity (e.g., Leverage local coalitions to impact statewide actions; Provide more support/coordination for local jurisdictions to have a coordinated structure for health equity and racial equity; and Find ways to align local policies with the state level)

Focus on Community Centered Solutions

- Build upon place-based initiatives (e.g., Building Healthy Communities, Best Start; other resident engagement and priority-setting; Regional Health Equity Forums to address equity issues at a regional level instead of a local/ county level to ensure we're not further creating inequities across county lines, involving funders, health payers, collaboratives, community organizations, county-level officials in engagement and planning process)
- Support collaboratives to sustain an infrastructure for local leadership, particularly those created by and led by people of color
- Build the relationships and coalitions across boundaries needed to advance racial and health equity, regardless of party affiliation
- Improve accountability to community--By increasing budget and funding transparency and by co-creating and reporting on metrics important to community, and inviting community to hold government accountable; Be able to answer the questions about "are we getting the results we want"
- Recognize that relationships in and across all sectors need repair-- Participation is a function of trust and dedicate time to the healing process

Foster Collaborations and Bolster Existing Efforts

- Make the room and time needed for good, community-centered solutions to grow (i.e., looks to multi-session bill cycles; long-term budgets)--The pacing and cycles of urgency in the policy process make it hard for communities for participate
- Increase the share of funding that goes to community-based organizations (e.g., the balance and tension between the bigger NGOs who have the infrastructure; and the boots on the ground who could engage new people, stretch \$, but not always the most developed infrastructure)
- Continue to refine what equity means, and build in the ability to adapt and update equity definitions in policy as needed
- Make particular space for voices not heard often enough (e.g., youth)
- Create the capacity in each policy to ensure it is implemented according to the policy's intention
- Create a culture where stories of lived experiences and data that may by emergent and promising are considered as evidence
- Encourage narratives stemming from communities experiencing inequity and truly listen to them--Who controls the narrative determines priorities
- Set expectation for, and invest in ongoing capacity for community to engage in all policies (e.g., leverage Resident Leadership Academies and Leadership Equity Program into a statewide leadership academy so people can go and be trained to be an advocate, learn how the political system works so they can actually WRITE the policies)

The “What”: Opportunities for Policy Action in Practice

Participants in the [Healthy Neighborhood Investments: Policy Convening for Advancing Health and Racial Equity](#) also called out specific policy actions that California and other governments can take to advance racial and health equity. These conversations were visionary and generative. One participant noted that we were leading with our dreams and not limited by roadblocks and barriers. The ways we might collectively pursue visionary policy change ranged from immediate investments of American Rescue Act funds to longer-term commitments to reparations and anti-displacement. Ideally, all of these more specific policy actions apply to the “how” insights named above.

We heard a reverberating interest in supporting the creation of a statewide Fund to address racial and health disparities through investments in community-defined priorities, local health departments, and cross-sector coalitions. California’s legislature just recently proposed in the budget the [Health Equity and Racial Justice Fund](#) with \$100 million for grants to community-based organizations, clinics and tribal organizations to address health disparities and \$15 million for the [Transgender Wellness and Equity Fund](#). These resources represent a commitment to community-led policy and in doing so, creates opportunity to test new approaches -- investing in community priorities and impact without predetermined outcomes, trusting in locally-led coalitions and partnerships, creatively

approaching policy in new ways to accelerate equity, and building upon existing collaboratives created and led by people of color across the state.

We also heard calls for the [Office of Racial Equity](#) to be launched with commitments of budget and accountability to ensure the Office has tools to make substantial change. This office might take steps such as declaring racism as a public health crisis, and investing in local racial equity officers in state and local agencies. Appropriating funds will position this Office to make commitments actionable, and allowing for deep, ongoing accountability mechanisms from diverse community advocates across the state will ensure investments squarely aimed at creating more equitable communities across California.

We heard calls for other specific policy actions for California to take now. These include:

- Use current state budget situation and Rescue Act funds to A) make permanent innovations tested during the pandemic, and B) practice community-centered and participatory budgeting via state and regional-level planning and allocations, and evaluate the impact of temporary COVID-19 measures (e.g., unemployment benefits increasing or decreasing employment; eviction prevention increasing or decreasing housing stability and affordability).
- Create a package of anti-displacement policies and investments in affordable housing.
- Reduce the disparities in birth outcomes for Black moms (e.g., Formalize doulas/midwives as part of a maternal healthcare team statewide and legalize them to practice independently in home births, hospitals, etc.).
- Invest in healthy food systems that grow local, sustainable, regenerative small farmer ecosystems.
- Incentivize healthcare to invest in community and the social determinants of health (e.g., Incentives built into MediCal RFPs; a version of the Community Reinvestment Act for insurers; Mandates for community investment and engagement; Build on FQHCs required to have 51% of community representation to lift and center diverse voices in funding and decision making.)
- Require standardized and aligned community health needs assessments across sectors as a requirement for funding) and shift healthcare institution dollars toward community-driven collaborations.
- Create a statewide Health Information Exchange and public utility Community Information Exchange, including social determinants of health, race and ethnicity, and other forms of disaggregated data in California.
- Rebuild the capacity of communities to respond to health needs (e.g., invest in local health departments, community health workers, local Health in All Policies, and reducing disparities in access to care--mental health, maternal health, preventative care).

The groups also explored visionary approaches for policy action in ways that deepen our understanding and commitment to health equity and racial justice. What if California were the first state to allow incarcerated individuals to vote, we asked, and create a new system of public safety? What if we define and get serious about a program of reparations, starting with support

for the California Task Force with funding for at least the next decade and with as few prescriptions or boundaries as possible? And building on the discussions of equitable policy process, what if we improve accountability to communities by increasing budget and funding transparency and by co-creating and reporting on metrics that are important to communities, and inviting communities to hold their government accountable? And what if we set an expectation for, and invest in, ongoing capacity for community leaders to engage in all policies to sustain advocacy, policy design, and defining what success looks like for generations?

All of these are opportunities now, and the convening underscored how much momentum and commitment there is to create equitable change for the future of California. There was a hunger among the group to continue to come together and build on the momentum of the conversations, which begs the question, where will we take these ideas from here, together?

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