

# Advancing Collaborative Governance: A 15-Year Retrospective on the California Health in All Policies (HiAP) Task Force

Dec. 10, 2025

Authors: Julia Caplan, Colin Gutierrez

Contributors: Lianne Dillon, Holly Nickel, Meredith Lee, Karen Ben-Moshe

Reviewers: Fabián Pérez-Gove, Michael Jimenez, Mahima Ali, Haley Kugler

The following people have served as staff to the HiAP Task Force between 2010–2025, hailing from the Public Health Institute (PHI), California Department of Public Health (CDPH), and the California Strategic Growth Council (SGC): Mahima Ali, Karen Ben-Moshe, Aisha Calderon, Julia Caplan, Lazaro Cardenas, Bo Chung, Noralee Cole, Chantelle Comeau, Kimberly Davila, Lianne Dillon, Jazmine Garcia Delgadillo, Solange Gould, Chantal Griffin, Colin Gutierrez, Michael Jimenez, Alvishia Johnson, Meredith Lee, Kelsey Lyles, Dalila Madison Almquist, Connie Mitchell, Kevonna Moore, Dahir Nasser, Holly Nickel, Fabián Pérez-Gove, Ronit Ridberg, Linda Rudolph (founding chair), Jagdeep Saini, Nanette Star, Josaphine Stevenson, Aimee Sisson, Giorgianna Venetis

*This paper is submitted to the California Strategic Growth Council by State of Equity, a program of the Public Health Institute. The judgments and conclusions are solely those of the author and are not necessarily endorsed by the HiAP Task Force, the SGC, members of the HiAP Task Force, or by any other agency.*

## Table of Contents

Table of Contents.....	2
Executive Summary .....	3
Introduction: 15 Years of Innovation and Impact.....	3
Founding of California's HiAP Task Force .....	5
What is Health in All Policies? A Practical Approach to Better Governance .....	7
SGC, CDPH, PHI, and Philanthropy: An Inside-Outside Partnership.....	8
Recommendations, Action Plans, and Community Voice (2010-2017) .....	10
Helping the System Work for Everyone (2017-2020) .....	18
COVID-19, HEP, and the Task Force Relaunch (2020-2025).....	20
National and Global Influence of the California HiAP Task Force.....	23
Lessons Learned & Opportunities: What 15 Years of HiAP Teach Us About Government, Equity, and Collaboration .....	25
Conclusion .....	29

## Executive Summary

For 15 years, the California HiAP Task Force has promoted a more effective, equitable and collaborative approach to state governance. Launched in 2010 through an executive order, the Task Force brought together more than twenty state departments and agencies to address the social, economic and environmental conditions that shape health. At a time when agencies rarely collaborated, HiAP demonstrated the value of working across silos. Today, promoting public health is a routine part of state programs and policy development. The Task Force has strengthened community voice in decision making and earned national and international recognition for California as a leader in collaborative governance.

The HiAP approach recognizes that society's most pressing challenges – such as climate change, housing affordability, chronic disease, and unfair access to opportunity – cannot be solved by one agency or sector alone. By working across traditional boundaries, HiAP helps agencies meet their goals while advancing shared objectives for health, equity and sustainability.

Guided by community input, evidence, and cross-agency collaboration, the Task Force's early work addressed transportation, housing, violence prevention, healthy food access, and government practices, including grants, data, and planning. This paved the way for later initiatives such as the Capitol Collaborative on Race & Equity, statewide grant reforms, and new workgroups focused on grants, data systems, and safe communities. These efforts shifted state practice toward prevention, fairness, community partnership, and long-term systems change.

California's HiAP model has influenced national and international government practice. Its partnership between government, nonprofit, and philanthropic sectors through the SGC, CDPH, the PHI, and several foundations has provided staffing, expertise and flexibility for long-term, complex work.

The Task Force has created durable practices that embed health and equity across state operations. HiAP offers a proven approach for aligning government systems and improving outcomes for all communities. When government works collaboratively with communities at the center, action can be more effective, fair and responsive to the needs of Californians.

## Introduction: 15 Years of Innovation and Impact

Established in 2010 by Governor Arnold Schwarzenegger and sustained through the administrations of Governors Jerry Brown and Gavin Newsom, the HiAP Task Force has shown that collaborative governance can transcend political

boundaries and endure across administrations. The Task Force has helped shape many of the state's most innovative equity and governance initiatives, bringing together agencies that had not previously worked together to address complex issues through shared purpose and collective action.

The collaborative approach of HiAP is rooted in a simple idea: complex problems require collective solutions. Issues like transportation, housing, climate, and education all influence health, yet are often addressed in isolation. HiAP bridges these silos, helping agencies align their work and achieve stronger results together. This approach has shifted government culture, making cross-sector collaboration a more routine and expected part of planning and policymaking in California.

Beyond institutional change, the Task Force has fostered a culture of collaboration, shared learning, and accountability. Its recommendations helped agencies coordinate responses to complex challenges and improve state practices in areas such as planning, data, community engagement, and grantmaking. The Task Force's collaborative environment also supported the creation of the California Racial Equity Commission and the statewide Racial Equity Framework, which was finalized on Dec. 1, 2025.

*“Such a small thing – linking to another agency’s work – but it can create so many future opportunities. It’s one of the things I value the most about HiAP.”*

*— HiAP Task Force member,  
Caltrans*

## Celebrating Accomplishments:

Key outcomes from 2010-2025 include:

- **Health and equity metrics** are now embedded in transportation, housing and climate programs representing more than \$4 billion in state grants reaching over 400 communities.
- CDPH created the [Healthy Communities Data & Indicators Project](#), providing reliable, easy-to-use data on income security, housing, transportation, education, and environmental conditions so state and local leaders can assess needs, track progress, and make informed decisions.
- Staff from more than 10 state departments and agencies collaborated to provide **over 160 recommendations to California Department of Human Resources** to improve workforce diversity and address pay gaps.
- Graduate students partnered with state workers to produce **policy reports with recommendations** on pay equity, public safety, food systems, and state budgeting.

- State agencies have taken actions to plan for walkable neighborhoods, green spaces, and cleaner air, **aligning climate and transportation policy with public health goals.**
- The California Department of Food and Agriculture (CDFA) collaborated with the CDPH and California Department of Education (CDE) to establish the **Farm-to-Fork Office**, and the California Department of General Services (DGS) worked with the CDPH and the California Department of Corrections and Rehabilitation to implement **nutritional criteria for state food contracts** leveraging the buying power of the state and improving nutritional value of food served in state facilities.
- Violence prevention leaders across more than 10 departments and agencies reframed **safety as a public health issue**, bringing community members into state conversations and calling for prevention-based approaches.
- Agencies working in housing, transportation, air resources, public health, and land use planning collaborated on guidance to **improve housing siting, reduce near-roadway pollution, and promote healthy schools.** This work informed major statewide tools such as the General Plan Guidelines, California Environmental Quality Act updates, and state transportation planning documents.
- California's HiAP approach has received **national and international recognition**, including engagement with the World Health Organization, the Institute of Medicine, the American Public Health Association, and the Global Network for Health in All Policies.

## Founding of California's HiAP Task Force

### The Public Health Moment

The HiAP Task Force was established at a pivotal time in the field of public health, amid growing awareness that health and well-being are shaped by where people live, work, learn, and play, and how they are treated by society. Public health leaders were increasingly turning to “non-health” sectors, such as housing, transportation, education, and land use to address inequalities that drive health differences.

Internationally, interest in intersectoral health policy was growing following the European Union's 2006 adoption of HiAP under Finland's presidency. The 2008 documentary series *Unnatural Causes: Is Inequality Making Us Sick?* helped bring these ideas into mainstream awareness, framing health inequities as the predictable result of social and economic conditions rather than individual choices. In California, the City of Richmond adopted a HiAP approach in 2009, signaling local momentum. These developments set the stage for a state-level effort.

## Early Advocacy and Local Momentum

This shift in public health thinking coincided with growing attention to climate change and its unequal impacts on communities. In 2008, California passed Senate Bill 375 (SB 375), the first law in the United States to link regional land use, transportation, and housing planning to greenhouse gas reduction.

SB 375 created an opening for public health and equity advocates to demonstrate that climate, land use, and health were interconnected issues that could not be solved in isolation. It offered a platform to show that improving neighborhood conditions, like housing quality, access to transit, and green space, could advance both environmental and health goals. Within this context, the idea of a state-level HiAP approach gained traction as a practical and forward-thinking solution to bridge silos, align policies, and achieve better outcomes across government.

*“I benefited from the relationships formed through the Task Force, particularly the work of the HiAP staff in bringing cross-sector partners together and bridging sectoral differences through the lens of health. This is immeasurably important.”*

*— HiAP Task Force Member,  
Department of Public Health*

## Executive Order S-04-10 and the Establishment of the Task Force

In February 2010, Governor Schwarzenegger signed Executive Order S-04-10, creating California's HiAP Task Force, the first of its kind in the U.S. The order directed the Task Force to identify priority programs and policies that advance health, equity, climate action, and economic well-being. The Executive Order provided no dedicated funding or staff, and assigned facilitation of the Task Force to CDPH, with oversight by the SGC.

## What is Health in All Policies? A Practical Approach to Better Governance

HiAP is both an approach and an initiative of the State of California. The state formally adopted the HiAP approach in 2010 through the creation of the HiAP Task Force by Executive Order S-04-10.

*“HiAP helped transform how we think about public investment. As we look to tackle complex challenges—affordability, housing, climate disasters, and deep inequities—government must actively work to protect working people and make their lives better. When government leaders act with common purpose across agencies and departments, we can deliver more impact with every public dollar and realize shared prosperity.”*

*— Randall Winston, Deputy Mayor of Infrastructure for the City of Los Angeles; former Executive Director, California Strategic Growth Council*

HiAP is a practical and collaborative approach that helps governments make better decisions to improve health, fairness, and quality of life for all people. Rather than creating new programs, HiAP strengthens existing work by ensuring decisions reflect shared goals and maximize co-benefits across agencies.

HiAP recognizes that decisions about housing, transportation, education, land use, and other sectors all affect people's health. By strengthening collaboration across departments, HiAP helps agencies meet multiple objectives at once, reduce duplication of efforts, and avoid unintended consequences.

For example, a transportation plan guided by HiAP principles improves

mobility and makes streets safer, promotes physical activity through walking, biking, and transit, reduces air pollution and greenhouse gas emissions, and connects residents to schools, groceries, and parks. This framework can benefit everyone and has the most impact in communities with the greatest needs.

HiAP is valuable for addressing complex issues like poverty, violence, climate change, and chronic disease. These challenges appear across many policy areas and require shared strategies, community input, and new ways to measure success.

### The 5 Key Elements of the HiAP Approach

The HiAP Task Force's work is guided by five key elements of Health in All Policies, which were first outlined in [\*Health in All Policies: A Guide for State and Local Governments \(2013\)\*](#):

1. Advance health, equity and environmental sustainability.
2. Promote collaboration across departments and sectors.
3. Create benefits for multiple partners (co-benefits).
4. Engage communities most affected by the issue.
5. Change systems and processes to create lasting solutions and prevent future problems.

## The Four Pillars of HiAP

In 2023, the Global Network for Health in All Policies introduced [\*The Four Pillars Model of Health in All Policies\*](#), which complements these five key elements and emphasizes how public agencies influence change. California contributed to this framework alongside Thailand, Finland, South Australia, and others. The Four Pillars are:

1. Governance and accountability: Transparent structures support collaboration, goal setting, and decision making.
2. Leadership at all levels: Success depends on engagement from executives, technical experts, program staff, and community members.
3. Ways of working: Practitioners need flexibility to build relationships, collaborate, and develop solutions in ways that differ from traditional government processes.
4. Resources, financing, and capabilities: Dedicated funding and skilled staff are essential to coordinate and collaborate across agencies.

## SGC, CDPH, PHI, and Philanthropy: An Inside-Outside Partnership

The HiAP Task Force relied on an inside-outside partnership with the SGC and CDPH inside government and the nonprofit PHI and several philanthropic foundations outside.

**SGC oversight:** The Executive Order placed the HiAP Task Force under the cabinet-level SGC to ensure reach across multiple policy fields. The SGC convenes cabinet secretaries for health, transportation, land use and planning, environment, natural resources, food and agriculture, housing, and business and consumer services. Placement at the SGC helps coordinate across all these policy areas, enabling access to cabinet leadership and the Governor's office to support decision making and implementation.



**CDPH expertise:** CDPH provides public health subject matter expertise across a wide range of policy fields. This includes the Healthy Communities Data and Indicators Project, a robust climate change and health equity team that engages in cross-agency work, support for participation by the California Health and Human Services Agency on SGC's Council, and accountability through the CDPH Office of Health Equity (OHE). OHE is governed by [California Health and Safety Code Section 131019.5](#), which names HiAP as a key approach to support CDPH's statewide health equity initiatives.

**PHI backbone support:** PHI's HiAP team, State of Equity, brings subject matter expertise and experience in policy, research, facilitation, and diplomacy with greater flexibility than its state partners. PHI's role has included community partnerships, convening practitioners across state government, and responding quickly to changes in the social and political environments. PHI works across state and national lines to share best practices from other jurisdictions and replicate California's successes. (Note: The University of California, San Francisco, served as a fiscal sponsor for the first year before transferring the staffing partnership role to PHI.)

**The role of philanthropy:** Philanthropic partners have been essential in supporting PHI to provide primary staffing for over a decade, and partnership for 15 years. The earliest investor in this work was The California Endowment. They were later joined by Kaiser Permanente of Northern California Community Benefit, Blue Shield of California Foundation, and The California Wellness Foundation. The Robert Wood Johnson Foundation also supported the national spread of related work.

Philanthropy can help initiatives grow, providing flexible funding to spark collaboration across government, community, and nonprofit sectors. Strategic investments can unlock public funds, amplify community leadership, and ensure limited funds go further in improving health and opportunity. Foundation funding for the HiAP Task Force was critical for its launch. There was no government funding initially, and philanthropic foundations supported early activities that produced "proof-of-concept" – evidence of the impact of HiAP – which ultimately led to state investments. These philanthropic investments also ensured that the work continued through gubernatorial transitions and changes in state priorities.

## Key developments in the partnership and staffing structure:

**2010-2020:** Using philanthropic funding, PHI contributed staffing and technical assistance to both the CDPH and SGC, helping run the Task Force and pilot related equity initiatives.

**2012:** The HiAP Task Force was named in the enabling statute that established CDPH's Office of Health Equity (OHE). However, statutory recognition did not come with dedicated funding; staffing has varied with available resources. OHE staff have supported HiAP work as capacity allowed.

**2017-present:** During this time, PHI established the Capitol Collaborative on Race & Equity (CCORE), at the request of the HiAP Task Force, to build capacity of state agencies. CDPH and SGC played a key role in the development of this initiative, which was piloted by Task Force members and has grown significantly since.

**2019-present:** The state budget created a three-person Health & Equity Program (HEP) at SGC - California's first sustained state-funded support for HiAP - to advance cross-sector action on social determinants of health, implement SGC's racial equity plan, and support the Task Force.

**Ongoing partnership:** State funding reduced reliance on philanthropy but did not replace the value of outside partners. PHI continues to provide coaching, convening, and subject-matter leadership and represents California in national and global HiAP networks.

## Recommendations, Action Plans, and Community Voice (2010-2017)

### Grounding the Work in Community

Government exists to serve the common good, which means community involvement and community voice are essential to determining how it should operate. HiAP builds on this idea by bringing people, neighborhoods, and local networks into the heart of decision making so policies can support health and fairness for all. From the beginning, the HiAP Task Force drew on the insights and leadership of community members and grassroots partners to shape its priorities and keep its work grounded in real experiences.

### Kitchen Cabinet

While the Executive Order did not establish a formal public advisory structure, the PHI HiAP team formed an informal, voluntary "kitchen cabinet." These advisors provided input and accountability to HiAP staff and served as liaisons to community leaders and local organizations. PHI convened this group from 2010-2020, and organizations in the kitchen cabinet included:

- Alameda County Public Health Department
- Bay Area Regional Health Inequities Initiative

- Breakthrough Communities
- California Pan-Ethnic Health Network
- CA4Health
- California Rural Legal Assistance
- Cultiva La Salud
- ChangeLab Solutions
- Health in Partnership
- PolicyLink
- Prevention Institute
- Regional Asthma Management and Prevention
- San Mateo County Public Health Department
- The California Endowment
- TransForm

## What is a Healthy Community?

### *Community Workshops*

In 2010 and 2011, the Task Force held community input workshops. There was a high level of interest in this project, and despite having no compensation, community members and staff from more than 100 organizations participated. They helped create recommendations for the Task Force and identified trusted community groups and subject matter experts to support the work moving forward. SGC conducted more listening sessions in 2020.

The workshops and subsequent meetings with government workers focused on a simple question: *What is a healthy community?* The responses were strikingly consistent across California and across roles. People emphasized the same core needs for a healthy life: access to transportation, healthy food, affordable housing, high-quality education, job opportunities, arts and culture, a clean environment, and economic well-being. While government agencies often worked in silos between “health” and “non-health” policy fields, community members were clear from the start that these were all interconnected and essential to well-being.

### *The Healthy Community Framework and Health Community Indicators Project*

To help bridge divides, CDPH created the Healthy Community Framework and launched the [Healthy Communities Data and Indicators Project \(HCI\)](#) in 2010 with seed funding from the SGC. The goal was to create a standardized set of statistical measures, data, and tools for the social, economic, and environmental conditions that shape people’s lives.

The HCI brings together reliable, easy-to-use data on topics such as housing, income, transportation, education, air quality, and access to parks. The HCI makes data accessible for communities,

### What is a Healthy Community?

A Healthy Community provides for the following through all stages of life:



researchers, and government agencies. In 2012, the HCI adopted the priority areas of the newly established CDPH Office of Health Equity. The indicators were refreshed in September 2020 and used to inform an external HiAP engagement initiative in 2020 and 2021.

The HCI Project turns complex data into easily accessible information that helps people make better decisions for their communities. Leaders can use it to identify needs, track progress toward health and equity goals, and make the case for policy or funding changes. For state and local governments, the HCI helps ensure that investments

and programs are guided by evidence, focused on prevention, and responsive to the real conditions that shape health.

## HiAP Task Force Recommendations to SGC

Through an extensive process engaging with community members and state workers, the Task Force developed 34 recommendations in six\* policy areas with an aspirational goal for each area. These were outlined in detail in the Task Force's [HiAP Report to the SGC \(2010\)](#), which set a foundation for coordinated work spanning across three gubernatorial administrations (so far). The six policy areas are:

- 1) Active Transportation
- 2) Housing and Indoor Spaces
- 3) Parks, Urban Greening, and Places to be Active
- 4) Community Safety through Violence Prevention
- 5) Healthy Food
- 6) Healthy Public Policy\*

*\*note: Healthy public policy was later split into two distinct areas for implementation: Health and Equity in Government Practices and Health and Equity in State Grants.*

The recommendations were proposed by modified consensus from over 20 departments, agencies, and offices, and approved by the SGC. Engagement was voluntary, and there were significant concerns about costs. This required strategizing to ensure that actions were meaningful, realistic, and supported by political leadership. The consensus process represented a new way of working

for many government leaders at a time when there were few multi-agency convening spaces, and no other cross-agency coordination body with voluntary commitments.

## Launch of Multi-Agency Working Groups

In 2011, the Task Force established multi-agency working groups focused on the six policy areas and developed corresponding action plans (initially called implementation plans). These plans were approved through a consensus process and then presented to the SGC for endorsement throughout 2011 and 2012. The timelines and outcomes of the working groups varied depending on factors such as agency readiness, available funding, political support, and community engagement. Some groups remained active for several years, updating commitments as initiatives evolved, while others focused on discrete projects before closing out.

These Task Force Action Plans are collaborative, goal-oriented roadmaps that help state agencies translate broad HiAP principles into concrete actions. They facilitate cross-departmental coordination and learning, share resources, measure progress, and embed health and equity considerations into routine decisions. Developing action plans requires learning about different policy areas, sharing challenges, identifying strengths of Task Force members, and supporting each other as part of a collective government effort.

*“We all work for the same governor, all work for the same state...because of my work with the Task Force and my involvement with it, I make sure I am more and more inclusive of other departments as I do my work.”*

*— HiAP Task Force member*

The Task Force convened groups that rarely worked together, forming working groups to build collaboration and projects. For example, Housing, Education, and Transportation practitioners came together to discuss sustainable development practices that advance the goals of each sector. Similarly, staff at agencies responsible for food procurement like the Departments of General Services, Corrections, Education, Rehabilitation, and Public Health, had never met each other prior to being convened by the Task Force.

Many government staff shared they had not previously been authorized to meet with their counterparts in other departments. Therefore, early participants were skeptical about what the process would require and had little experience with interagency collaboration on complex issues. This required the development of trust from staff and organizational leaders, new working relationships, and new

approaches to achieving shared objectives.

## Early Outcomes from Action Plans and Working Groups

This section highlights the aspirational goals, rationale, and work that took place in each of the six policy priority areas utilizing their action plans and working groups.

### Active Transportation

**Aspirational Goal:** All California residents have the option to safely walk, bicycle, or take public transit to school, work, and essential destinations. This goal was later expanded by Caltrans to include doubling the number of walking and transit trips and tripling bicycling trips by 2020, supported by health impact modeling showing billions in potential cost savings.

**Rationale:** Making it safer and easier for people to walk, bike, and take transit can improve physical activity levels, reduce greenhouse gas emissions, and connect communities to local jobs and services.

**Activities and Outcomes:** The HiAP Task Force significantly advanced safe and accessible active transportation across California through partnerships with transportation, housing, and health agencies. Health and equity considerations are now embedded in major state grant programs, including the Active Transportation Program, Affordable Housing and Sustainable Communities Program, and Transformative Climate Communities Program. These partnerships strengthened community engagement, prioritized disadvantaged communities, and integrated public health metrics into funding and planning decisions.

In collaboration with HiAP and the CDPH, Caltrans modernized transportation planning by endorsing innovative street design standards, incorporating health goals into long-range planning, and setting quantitative targets to increase walking, biking, and transit use.

State operations and employee programs have become models for health-promoting practices.

The Department of Human Resources launched a Bicycle Commuter Benefits Program, and new state leasing policies now prioritize “location efficiency” to reduce commutes. CDPH and HiAP developed educational tools, including the updated California Driver Handbook and School Crossing Guard Training Guidelines.

Departments implemented lasting institutional changes, renaming Caltrans’ “Air

*“Without HiAP the  
bicycle commuter benefit  
would never have  
happened.”*

*— Government  
Operations Agency*



Quality and Environment Branch" to include "Health," reflecting their structural commitment to embedding health in transportation policy.

#### **Land Use, Schools, and Health Work Group**

The Active Transportation work led to creation of a multi-agency Land Use, Schools, and Health Work Group, which strengthened collaboration among education, health, transportation, and planning agencies. Building on statewide convenings in 2010 and 2012, the Work Group identified strategies connecting school facilities planning with broader goals for safety and climate resilience, ranging from infill development to drought resilience to Safe Routes to School initiatives and roundabout design near schools. The Work Group influenced multiple state policies and planning tools, providing input on the General Plan Guidelines, CEQA updates, and the Affordable Housing and Sustainable Communities Program.

#### *Housing and Indoor Spaces*

**Aspirational Goal:** All California residents live in safe, healthy, affordable housing.

**Rationale:** Location of homes and schools affects health, air quality, and access to opportunity.

**Activities and Outcomes:** The Task Force promoted sustainable housing near transit and aligned school siting practices with broader community development and environmental goals, ensuring health and equity were considered in state guidance. From 2011 to 2016, the Housing Siting and Air Quality Work Group convened six state entities including Caltrans, the California Air Resources Board (CARB), the CDPH, and the Governor's Office of Land Use and Climate Innovation (LCI) (formerly the Governor's Office of Planning and Research(OPR)) to advance goals related to housing, transportation, air quality, and public health.

These "sticky" issues sometimes placed housing advocates, climate policy leaders, and public health professionals at odds. Chaired by the California Department of Housing and Community Development and supported by HiAP, the work group sought to clarify state guidance on siting housing near high-volume roadways by convening state, regional, and local partners to address these complex, often competing, priorities. Community groups were actively engaged, ensuring that local voices and lived experiences informed state-level guidance.

The Work Group facilitated research, provided coordinated input on policy guidance, and hosted forums with more than 25 participants from local and regional governments, public health departments, air districts, housing advocates, and other experts. These efforts shaped key state resources,

including the CARB's *Strategies to Reduce Near-Roadway Pollution Exposure Technical Advisory*, LCI's *General Plan Guidelines*, and CDPH's *Public Health and Housing Near High-Volume Roadways* report.

### *Parks, Urban Greening, and Places to be Active*

**Aspirational Goal:** All California residents have access to places to be active, including parks, green space, and healthy tree canopy.

**Rationale:** Access to parks and green spaces improves mental and physical health and helps reduce the effects of extreme heat.

**Activities:** This HiAP workgroup advanced efforts to make communities healthier, cooler, and more resilient to drought and climate change while helping under-invested neighborhoods benefit from nature.

In partnership with LCI, CAL FIRE, California State Parks, and other agencies, the Task Force supported local tree canopy assessments, developed urban forestry planning resources, and shared best practices for conserving water while maintaining trees and vegetation. For example, CAL FIRE's 2013 tree canopy pilot project showed that San Jose's urban forest provides \$239 million in annual benefits, highlighting the economic and environmental value of green spaces.

*“Workgroup members learned a great deal from one another about the complexity of this issue. We also learned how other agencies and academia are grappling with solutions through local planning, policies, and California Health in All Policies Task Force research.”*

*— Participant, HiAP Housing Siting and Air Quality Workgroup*

Collaboration extended across agencies and sectors to integrate greening into state and local policies. State Parks hosted a multi-agency focus group to inform the 2020 *Statewide Comprehensive Outdoor Recreation Plan* and partnered with the CDPH to fund a pilot program increasing physical activity in un-programmed parks for Supplemental Nutrition Assistance Program–Education (SNAP-Ed) eligible communities. Greening principles were incorporated into broader initiatives on housing, transportation, and climate resilience, including the *State of California Extreme Heat Adaptation Interim Guidance Document* and updates to the *General Plan Guidelines*. Together, these efforts demonstrated how coordinated state action can create healthier and sustainable communities across California.



### *Violence Prevention (later adapted to be Safe & Equitable Communities)*

**Aspirational Goal:** All California residents can live and be active in their communities without fear of violence or crime.

**Rationale:** Violence is a public health issue that impacts both individual and community well-being.

**Activities:** For decades, community groups and policy experts have promoted community-based alternatives to policing, but the state's highly decentralized structure, spread across at least 15 departments, has made it difficult to organize resources, share information, and implement a coherent strategy.

The HiAP Task Force had been convening multi-agency working groups on violence prevention from 2012 onward, developing action plans and fostering cross-sector dialogue. In 2020, the Safe & Equitable Communities Roundtable was created to provide additional support, serving as a central space to coordinate government efforts and center community voices in violence prevention. The work of the Roundtable is described in more detail below.

### *Healthy Food: Farm to Fork and Food Procurement*

**Aspirational Goal:** All California residents have access to healthy, affordable foods at school, at work, and in their neighborhoods.

**Rationale:** Improving access to nutritious and locally produced food helps reduce chronic disease and supports California's agricultural economy.

**Activities:** The HiAP Task Force advanced multiple initiatives to improve access to healthy, affordable, and locally grown food across California through coordinated state action.

Coordination by the Task Force, in partnership with a coalition of farm-to-school advocacy groups, led to the creation of the Office of Farm to Fork. The Office was established through an interagency agreement among the California CDFA, CDE, and CDPH, and later codified in statute through AB 2413. The Office has become a central hub for connecting California farmers, schools, and communities, promoting farm-to-school programs, and expanding career pathways in agriculture and culinary arts.

The Task Force also advanced state-wide policies to improve nutrition through government purchasing. A multi-agency State Food Procurement Work Group developed [\*Nutrition Guidelines for Food Procurement and Service in Adult California Correctional Facilities\*](#), which DGS applied to state contracts to reduce sodium in meals and encourage healthier food options across state institutions, including schools, hospitals, and parks.

The Task Force also piloted employee Community Supported Agriculture (CSA) programs in Sacramento and Oakland, increasing access to fresh produce while supporting local farmers. This work informed broader policy developments, including the passage of SB 912 (2014) strengthening vending machine nutrition standards, and produced publications such as [\*California State Government Food Procurement Policies and Practices\*](#).

*Healthy Public Policy\* (through state guidance, embedding health in decision making, data and research, cross-agency collaboration and expertise, community engagement, and facilitating the HiAP Task Force)*

**Aspirational Goal:** California's decision makers are informed about the health consequences of various options during the policy development process.

**Rationale:** Embedding health and equity from the start in state guidelines and grant programs creates a multiplier effect, ensuring that investments generate broader long-term benefits, reduce disparities, and strengthen cross-sector collaboration, rather than requiring costly, last-minute adjustments.

**Activities:** HiAP efforts have resulted in concrete changes across California's policy and funding landscape. Key planning documents, such as the California Regional Transportation Plan Guidelines, General Plan Guidelines, and housing and land-use frameworks, now incorporate health and intersectoral considerations, guiding local communities toward more equitable and sustainable outcomes. Grant programs administered by the SGC, CAL FIRE, California State Parks, and other agencies have incorporated health and equity criteria, set aside funds for disadvantaged communities, and promoted partnerships with public health departments and other partners.

These changes have strengthened collaboration, local capacity for fair planning, and supported community engagement, demonstrating that deliberate integration of health and equity into state decision-making can foster well-being for all Californians.

## Helping the System Work for Everyone (2017-2020)

### Understanding California for All

The HiAP Task Force has been an essential space for state entities to deepen their understanding of why some communities face greater health challenges than others. The Task Force's founding executive order included equity as one of its core goals, highlighting a commitment to supporting the health and well-being of all Californians.

History, extensive research, community health outcomes, and public health

evidence demonstrate how institutional practices can create differences in health outcomes. Task Force members sought to understand these uneven impacts, their root causes, and the ways these have shaped health outcomes.

Governor Gavin Newsom has promoted the idea of California for All, aiming to create a more inclusive and prosperous state by focusing on opportunity and justice for everyone in the state. Many Task Force members identified a need for HiAP staff to provide training and capacity building so they could better pursue their own values and fulfill the mandate of EO S-04-10, and later N-16-22, to serve all Californians.

## From Pilot to Statewide Community: The Growth of CCORE

In 2017, the HiAP team, in partnership with the national nonprofit Government Alliance on Race & Equity (GARE), launched the Capitol Cohort pilot, a year-long training program for staff from California state agencies. While GARE had previously collaborated with cities and counties, this was the first program in the country to provide this level of support to state employees. Participation exceeded expectations, with nearly 200 staff from 19 departments joining the first year. The pilot provided a space to share lessons and explore how to use fair and transparent organizational practices across state government.

Building on the pilot's success, in 2018 the PHI HiAP team, in partnership with SGC, established the CCORE. CCORE created a community of state leaders dedicated to ensuring that government practices address historical wrongs and promote opportunity for all Californians. Through the program, agencies enhanced systems and processes, established long-term strategies and leadership teams, and strengthened institutional practices to better serve all Californians. Many early participants now hold leadership roles across state and local government, as well as the nonprofit and private sectors.

*“HiAP and CCORE built a values-driven community among state workers and laid the foundation for the Racial Equity Commission and our shared work to create a true California for All.”*

*— Dr. Larissa Estes, Executive Director, California Racial Equity Commission*

Between 2017 and 2025, more than 600 staff from nearly 60 departments, agencies, offices, and commissions have participated in CCORE. A central feature of CCORE is peer-exchange, where staff can share challenges across departments, develop collaborative solutions, and identify systemic issues requiring multi-agency action or legislative attention. These discussions inform the Task Force's continued focus on functional areas of government, including workforce, contracts, and grant-making, which remain

priorities today.

CCORE has had an impact beyond California as state workers from across the country, inspired by California's model, have sought guidance and opportunities for connection. PHI organized several informal meetups for these state employees, which led to the launch of States Advancing Racial Equity (SARE) in 2023 in partnership with GARE. SARE now supports staff in nearly 30 states. Additionally, the CCORE Transformative Leadership Cohort includes participants outside California, further extending the program's national reach.

## COVID-19, HEP, and the Task Force Relaunch (2020-2025)

### Launch of the HEP Team Amidst COVID-19

SGC's new Health & Equity Program (HEP) staff were hired in April 2020 as the COVID-19 pandemic was unfolding. COVID-19 made it clear to a much wider audience that health is deeply shaped by social and economic conditions. It also revealed how factors like stable housing, safe workplaces, paid leave, access to transportation, internet access, and government systems directly influence who gets sick, who can protect themselves, and who has the chance to recover.

At the time, most government staff were redirected to pandemic-related response and recovery, but HiAP had dedicated staff that were able to strategize for how their all-of-government approach could help understand and respond to the wide range of health and economic hardships of the pandemic.

The new HEP staff engaged with state and community partners to understand and communicate about the unequal impacts of COVID-19. While formal Task Force convenings paused, HEP and partners hosted special HiAP meetings to directly discuss the crisis and share learnings about the response.

### Community Engagement Report and Relaunch of the HiAP Task Force

In 2021, HiAP partnered with the Othering & Belonging Institute at UC Berkeley (OBI) to conduct an external engagement effort to understand community needs and next steps for state organizations. Outreach included an online survey, key informant interviews, and four online listening sessions. OBI produced a report, [\*HiAP Task Force Strategic Planning and Stakeholder Engagement Summary Fall 2020-Summer 2021\*](#), capturing feedback from local and regional partners across California on barriers and priorities for advancing public health and equity.

Survey respondents ranked indicators from CDPH's HCI tool to define priorities for

a healthy community. Housing, healthcare, employment, climate change, and safety were the highest priorities. When asked how the State could better meet these priorities, respondents indicated the need to focus on socio-political determinants of health. These include barriers local organizations face in accessing state funding; the importance of disaggregated data to reveal disparities; strengthening connections between state agencies and community groups; and agency relationships, resource sharing, and power dynamics. Partners also highlighted challenges when implementing equitable policies at the local level due to limited funding or agency support.

The report reoriented the HiAP Task Force toward strengthening community power and building authentic relationships with communities most affected by health disparities. The final summary was [presented in December 2021](#).

### Updated HiAP Task Force Structure (2022–Present):

Based on these recommendations, the HiAP Task Force launched a new structure with three new workgroups designed to address community priorities. State workers voluntarily join these groups based on their expertise, interest, and capacity in specific government operations. The workgroups include:

#### *Grant Programs, Contracts & Funding Equity Workgroup*

The Grant Programs, Contracts, and Funding Equity Workgroup identifies and addresses structural barriers in state grantmaking and contracting that limit access for under-resourced, Tribal, and community-based organizations. The workgroup is facilitated by SGC and brings together multiple state agencies to make California's funding systems fair and accessible. Key deliverables and initiatives include:

- Community Compensation Memo: This report, developed by ChangeLab Solutions, provides recommendations for compensating community partners in state-funded work.
- Forum on Outreach and Engagement Best Practices (2023): This focused on shared strategies for grant outreach and community engagement.
- Forum on Technical Assistance and Contract Equity (2024): This highlighted state efforts to improve access to technical assistance and contracting opportunities.
- Tribal Contracting Survey (with the California Transportation Commission): This assessed barriers and opportunities in Tribal contracting across state agencies.
- Inclusive Grantmaking Tools (in development): These support agencies to improve grant management, offer advance pay options, and coordinate equity-focused training.

By reforming how grants and contracts are designed and administered, the workgroup helps ensure that smaller, community-rooted, and Tribal organizations can more fully access and shape state resources and programs.

### *Equity in Data & Access to Information Workgroup*

The Equity in Data and Access to Information Workgroup strengthens how data is collected, shared, and applied to ensure that all communities are accurately represented in state data practices. It convenes agencies to identify gaps, support disaggregation for greater accuracy, and improve public access to information that drives policy decisions. Key efforts include standardizing definitions of “disadvantaged communities,” advancing Asian and Pacific Islander data disaggregation under AB 1726, and applying tools such as the National Equity Atlas.

The workgroup has also addressed challenges to information sharing by creating hubs and models for HiAP participating agencies to share and access data and resources. By improving how data is collected and shared, the workgroup helps ensure that all communities are visible in state data and policies more accurately reflect and respond to California's diverse populations and needs.

The workgroup is staffed by CDPH's OHE, bringing expertise in health equity and data systems, including its leadership of HCI. OHE has shared a climate change and health equity report that informed Tribal data access, facilitated environmental justice discussions, and expanded planning to prevent and reduce the health impacts of the climate crisis.

### *Safe & Equitable Communities Roundtable*

The Safe & Equitable Communities Roundtable was inspired by legislative efforts to reorganize California's violence prevention programs to advance public health and support community-led innovation. It addressed barriers to coordination among state programs while incorporating community voices to ground conversations in lived experience. Communities United for Restorative Youth Justice (CURYJ) was a key partner, bringing youth and community perspectives into decision-making, identifying health and equity priorities, providing feedback on guidance and grants, and ensuring strategies benefited all Californians.



The Roundtable developed the first cross-agency goals, vision, and objectives for a coordinated approach to violence prevention which centers communities most affected by structural inequities. It strengthened relationships among state departments, local governments, and community-based organizations, and helped normalize multi-sector strategies providing alternatives to policing for violence prevention.

The Roundtable informed reports identifying collaboration barriers, recommended state actions, contributed to the CDPH Roadmap for Gun Violence Prevention, and highlighted strategies including community violence intervention, urban greening, and education. It became a trusted consultation space, sharing lessons across government and community partners to strengthen violence prevention policies and practices.

Accomplishments, challenges, and lessons learned from Roundtable convenings are detailed in [Progress and Recommendations: California's Safe and Equitable Communities Roundtable](#).

*“The Roundtable is a space where directly impacted people can engage in an exchange with government employees as we work to strengthen and shift narratives regarding community safety.”*

*— Ray’Von Jones, formerly Dream Beyond Bars Program Manager at Communities United for Restorative Youth Justice*

### **Creation of the HiAP Archive**

In 2025, PHI created an archive to support the retention of HiAP Task Force records for public access. These original documents may be useful for HiAP practitioners, researchers, community members, and others seeking information about the HiAP Task Force and its methods. The archive includes:

- Founding documents such as the Executive Order and Senate Concurrent Resolution
- Action Plans and Action Reports across a range of policy areas
- Evaluation reports
- Summaries of public and community input

The archive can be accessed at <https://stateofequity.phi.org/publications-articles/>.

## **National and Global Influence**

California's HiAP Task Force has garnered national and international attention as a model for cross-sector collaboration to improve public health outcomes.

## 2013 HiAP Guide for Local and State Governments

The Public Health Institute, in collaboration with the American Public Health Association and CDPH, published the *Health in All Policies: A Guide for State and Local Governments*. This guide highlights the strategies and successes of the HiAP Task Force in embedding health considerations into state policies.

### Institute of Medicine (IOM) Report

The IOM's 2013 Roundtable on Population Health Improvement featured the California HiAP Task Force as a model of intersectoral collaboration and policy integration.

### World Health Organization (WHO)

The WHO has featured the California HiAP Task Force in various publications, including a chapter-length case study on California in [\*Progressing the Sustainable Development Goals through Health in All Policies: Case studies from around the world \(2017\)\*](#), and the [\*Global Status Report on Health in All Policies \(2019\)\*](#).

In 2020, Dr. Etienne Krug, Director of the Department for Social Determinants of Health at the WHO in Geneva, Switzerland, sent a letter of congratulations on the 10th anniversary of the HiAP Task Force.

In 2024, the WHO established a Collaborating Centre on Health in All Policies and the Social Determinants of Health at Tampere University in Finland. The HiAP Task Force was cited as a foundational example in the development of this Centre, underscoring its international impact.

### Global Network for HiAP (GNHiAP)

This international body invited participation from California's Task Force and has featured California as a case example in publications and international meetings of HiAP leaders. California staff contributed to the 2023 GNHiAP 4-pillars framework (see above), and both PHI and SGC staff have served on the GNHiAP Executive Committee.



*On the 10<sup>th</sup> anniversary of the HiAP Task Force, February 2020:*

*“California’s Health in All Policies Task Force is among a host of successful initiatives across the globe, including in Thailand, Finland, and Australia. On behalf of WHO, I extend our congratulations and appreciation to the many sectors represented on California’s Health in All Policies Task Force for their dedication to advancing health equity, and to the staff and organizational partners for their visionary leadership and commitment to collaboration.”*

*— Dr Etienne Krug, Director, Social Determinants of Health, World Health Organization*

## Lessons Learned & Opportunities: What 15 Years of HiAP Teach Us About Government, Equity, and Collaboration

Drawing on 15 years of experience supporting the HiAP Task Force, staff have compiled insights capturing challenges, lessons learned, and effective strategies that advance Health in All Policies.

### Governance and Strategic Alignment

*Focus: high-level decision-making, policy influence, executive engagement, and maintaining continuity.*

- **Community at the Center:** HiAP succeeded when community priorities guided its work. Community members have deep knowledge of local challenges, viable solutions, and implementation expertise. Engaging community partners ensures that HiAP initiatives are relevant, impactful, and aligned with the government’s purpose of advancing health, equity, and well-being for all.
- **Preparing for Turnover:** Turnover is a constant feature of government work, with staff reassignments, promotions, and administrative transitions. Staff changes can slow progress and shift attention away from policy advancement. To minimize disruptions, it is helpful to maintain at least two representatives per department, establish clear onboarding and offboarding processes, and keep executive leaders engaged to help preserve institutional knowledge and sustain momentum.

- **Secure Executive Commitment:**

Early and ongoing executive buy-in has been essential.

Departmental staff often have excellent ideas and knowledge of how to implement change but may be unable to advance projects without executive approval. Internal hierarchies can make it difficult to engage with executive leadership, even for managerial staff. HiAP staff can play an important role by getting to know executive leaders, linking HiAP goals to departmental priorities, and revisiting commitments as plans evolve to enhance alignment and accountability.

*“The HiAP Task Force has given California a unique space to tackle the hardest health challenges—poverty, violence, malnutrition—by bringing together the full range of government expertise. It has broken down silos and shown what’s possible when we use every lever across state government to build healthier communities.”*

*— Jim Suennen, Associate Secretary, External Affairs and Tribal Liaison, California Health and Human Services Agency*

- **The Trade-Offs of Consensus:** Consensus-based decision making was a cornerstone of the HiAP Task Force’s early success. Especially when this work was early and entirely voluntary, it was critical to find areas of agreement, demonstrate value to every entity involved, and convey the endorsement of action plans across state government. Achieving consensus was time-consuming and not every idea could move forward. Some promising proposals from community partners or government staff were not pursued because consensus could not be reached. Consensus can be used thoughtfully in key moments, while also allowing agencies to take the lead in areas where they have primary responsibility.

## Creating Permanence

*Focus: standardizing practices, redefining “business as usual.”*

- **Structures and roles:** The HiAP Task Force resulted in creation of staff positions, workgroups, and cross-agency committees that are long-lasting and have defined responsibilities for health and justice. For example, the Department of Transportation has hired staff with health backgrounds, SGC established a Health and Equity Program in 2019, and several organizations have included related skills in duty statements.
- **Standardized guidelines and processes:** The Task Force helped to update

grant guidelines, general plan guidelines, contracting procedures, evaluation practices, and data practices to routinely include health and equity considerations across fields such as transportation, parks, land use, and climate investments. For example, the California General Plan Guidelines provide many recommendations for improving health through land use practices.

- **Policy integration:** The Task Force helped integrate health and equity into budgeting, planning, and program evaluation frameworks so decisions systematically account for disparities and social determinants of health. For example, some departments began using assessment tools to examine how financial decisions might have disproportionate effects on the communities they serve.

## Operations and Implementation

*Focus: how to advance successful cross-agency collaboration, convert ideas to action, and measure outcomes.*

- **Backbone Staffing:** Multi-agency collaboration in a large bureaucracy required dedicated backbone staff to foster, convene, encourage, mediate, and otherwise support collaboration. In its most active years, the HiAP Task Force was supported by five full-time staff whose roles included agenda-setting, facilitation, research, engagement, relationship building, consensus building, and development of reports and presentations. Staff were empowered to communicate and coordinate across departments to continue HiAP efforts.
- **Non-Profit and Philanthropic Support:** The shared staffing model between SGC, CDPH, and PHI has been essential, with PHI bringing not only public health expertise, but also an ability to work across government (including local, state, and nationwide jurisdictions).

*“In the global field of HiAP, California’s Task Force has shown what’s possible when government, nonprofits, community, and philanthropy work together. Its enduring partnership offers a hopeful example of how collaboration can move the needle on some of our most stubborn social problems.”*

*— Dr. Ketan Shankardass, Associate Professor, Wilfrid Laurier University, Waterloo, Canada*

- **Evaluation Challenges and Strategies:**

Evaluating HiAP is difficult because initiatives are complex, long-term, and involve multiple agencies and outcomes that do not align with standard metrics. Overall, it can be difficult to capture both the full scope of HiAP's benefits and its contribution to systemic policy change. Governments may struggle to measure indirect or delayed impacts, attribute changes to specific policies, and balance quantitative data with qualitative insights on collaboration and decision-making processes. Moreover, resource constraints, limited data integration across sectors, and shifting political priorities can further complicate evaluation.

**Opportunity for Impact:**

*The California Racial Equity Commission will release its statewide framework in December 2025, with implementation beginning in 2026. This presents a prime opportunity for HiAP to coordinate efforts, support health-oriented initiatives, and advance better population outcomes across multiple policy areas. With training, coordination, and peer-exchange opportunities, state staff can effectively integrate equity and health goals across state government. The HiAP Task Force is well-positioned to guide and support these efforts.*

## Culture, Relationships, and Collaboration

*Focus: building trust, fostering communication, and cultivating an environment for innovation and shared learning.*

- **Talking about What Matters Most:** Created spaces where state staff reflected on their values, mission, and how their work serves all Californians. Government workers are deeply committed to the communities they serve, and contribute more when their core values, such as fairness, opportunities, and public service, are recognized and engaged.
- **Collaboration and Candid Conversations:** Staff spoke openly about challenges, mistakes, gaps in knowledge, and community feedback. Safe spaces for dialogue, skilled facilitation, and trust-building enabled staff to identify systemic barriers, surface innovative approaches, and align strategies to strengthen policies and programs.
- **Prioritized Trust and Relationships Across Levels:** HiAP required participants

to think and work in new ways, and this required trust and strong relationships. Building trust entails vulnerability and relational skills. It also takes time spent in cross-agency orientations, mentorship, in-person convenings, and personal check-ins. These commitments paid off by garnering unexpected generosity and building new areas of alignment, even amid turnover or structural changes.

- **Fostered Innovation Through Shared Learning:** A key part of California's success has been peer-learning opportunities, enabling state leaders and organizations to build new skills together, share knowledge with each other in real-time as they explore and pilot new approaches, and turn to each other as thought partners.
- **Adaptability was Essential:** A key strength of the California HiAP Task Force has been its flexibility in structure and priorities, allowing it to sustain focus and adapt to shifting political and financial conditions. Operating in a dynamic environment shaped by changing administrations, budget constraints, and crises, the Task Force has been able to pivot quickly to respond to emerging needs (such as COVID-19) or new legislative mandates. Running multiple projects at once has allowed work to continue even when some areas are paused, while also enabling staff to seize sudden opportunities like new laws or executive orders.
- **Connected with Other HiAP Initiatives in California and Beyond:** As an early adopter of many approaches, California frequently leads the way without established models to follow. Many cities, counties, and countries around the world are implementing HiAP approaches, including Washington, D.C.; Chicago, IL; Fairfax County, VA; Richmond, Santa Cruz, and Watsonville in California; and Australia, Thailand, Finland, Chile, and Canada. Continued engagement with other HiAP initiatives helped ensure that California has access to the best ideas and enhanced the state's ability to advance health and well-being across sectors.

## Conclusion

Over the past fifteen years, the California HiAP Task Force has demonstrated that government can be more effective, just, and resilient by working collaboratively across sectors and centering community voices. Created at a time when siloed governance was the norm, HiAP has pioneered a model that aligns agency efforts, embeds health across policies, and uses existing resources more efficiently to drive public benefit and support well-being for all Californians.

HiAP's lasting impact is evident in the systems and structures it has helped transform, from strengthening criteria for billions of dollars in state grants to launching efforts like the Capitol Collaborative on Race & Equity (CCORE) and the Health & Equity Program. Its work continues to prove that addressing complex challenges like climate change, housing, and violence requires shared governance, flexible strategies, and community guidance. Through its adaptability, HiAP has helped the state navigate emergencies like COVID-19 and respond to rapidly changing needs while sustaining progress across administrations.

As California prepares for new challenges and opportunities, the HiAP Task Force remains a vital space for creative approaches that keep government relevant, responsive, and innovative. The foundation laid by fifteen years of collaboration, grounded in trust, community partnership, and learning, will guide future efforts to harness cross-sector power and build a healthier, more just California for all.