

Beyond Violence Prevention

A strategic analysis of recommendations for coordinated State action to promote safety in California

Becca Brownlee | June 14, 2021



The author conducted this study as part of the program of professional education at the Goldman School of Public Policy, University of California at Berkeley. This paper is submitted in partial fulfillment of the course requirements for the Master of Public Affairs degree. The judgments and conclusions are solely those of the author, and are not necessarily endorsed by the Goldman School of Public Policy, by the University of California, Health in All Policies Task Force, Public Health Institute, the government employees and others who served as interviewees for this project, or by any other agency.

Acknowledgements

The author thanks the following key interviewees and partners for their contributions to this project. Their expertise, time, and support made this report possible.

Research Sponsors

Julia Caplan*, Public Health Institute

Colin Gutierrez*, Public Health Institute

Dalila Madison Almquist*, Public Health Institute

Key Informants

Julie Nagasako, California Department of Public Health

Elena Costa, California Department of Public Health

Renay Bradley, California Department of Public Health

Sara Mann, California Department of Public Health

Katey Rosenquist, California Department of Public Health

Gail Kennedy, PACEs Connection

Lisa Fujie Parks, Prevention Institute

Dr. Flojaune Cofer, Public Health Advocates

Karen Ben-Moshe, Alameda County

Marc Philpart, PolicyLink

Sybil Grant, PolicyLink

Jessica Buendia, California Strategic Growth Council

Nanette Star, California Strategic Growth Council

Michael Jimenez, California Strategic Growth Council

Tina Yuen, Change Lab Solutions

Kanwarpal Dhaliwal, RYSE

Holly Nickel*, Public Health Institute

Dr. Joe Griffin, UC Berkeley & Pogo Park

Hye Sun Kim, FreeFrom

Sabrina Hamm, FreeFrom

Matt Schueller, California Office of the Surgeon General

Dr. Devika Bhushan, California Office of the Surgeon General

Alejandra Aguilar, California Partnership to End Domestic Violence

Pamela Mejia, Berkeley Media Studies Group

Dr. Shani Buggs, UC Davis Violence Prevention Research Program

Dr. Liz Tomsich, UC Davis Violence Prevention Research Program

Julia Schleimer, UC Davis Violence Prevention Research Program

Dr. Ken Epstein, Trauma Transformed

Kyle Trambley, California Office of Emergency Services

DeVone Boggan, Advance Peace / National Institute for Criminal Justice Reform

Kelly Fischer, Los Angeles County Department of Public Health, Office of Violence Prevention

Aarti Harper, Los Angeles County Department of Public Health, Office of Violence Prevention

Keith Baker, Los Angeles County Department of Public Health, Office of Violence Prevention

Angela Ponivas, California Department of Social Services

Michael Macias, Fathers and Families of San Joaquin

Gauri Sanchez, Fathers and Families of San Joaquin

Dr. Hiram Santisteban, Fathers and Families of San Joaquin

2 anonymous interviews

* Asterisk indicates staff to the California Health in All Policies Task Force.

Graduate Advisor

Todd Achilles, Goldman School of Public Policy, University of California, Berkeley

Executive Summary

From economic insecurity to emotional wellbeing to systemic racism, the COVID-19 pandemic continues to expose stressors impacting residents of California. [Concerns about violence and safety are also on the rise](#), underscoring the need for decisive State action to remediate past harms and cultivate conditions where we can all thrive.¹

From January to May 2021, the author conducted research on possible next steps related to preventing violence. This research included 26 interviews with key stakeholders, a literature review, and a review of previously identified recommendations for State action. Based on this data, the author has developed the following recommendations for action by the State of California:

Recommendation Bucket 1: *Programmatic enhancements – leverage existing programs, resources, and staff expertise*

Recommendation 1.1 Expand HiAP Task Force offerings focused on trauma-informed service lines and understanding the root causes of violence, creating space for dialogue and coordination between State departments and agencies.

Recommendation 1.2 Develop and adopt a State safety & justice framework in California, bringing community and government voices to one table for development.

Recommendation Bucket 2: *Structural reforms – create new pathways for violence prevention work by transforming existing systems*

Recommendation 2.1 Establish a centralized champion of violence prevention work.

Recommendation 2.2 Streamline the allocation of funds with lower burdens on administrators and shift away from perverse incentives for funding.

Recommendation Bucket 3: *Policy co-creation – pivot away from existing systems to build new services lines focused on upstream needs built with, not for, community*

Recommendation 3.1 Declare racism a public health crisis.

Recommendation 3.2 Transform government budget and services lines to further promote upstream approaches to prevention and healing.

¹ “Concerns about violence increase in California amid COVID-19 pandemic.”

Report Background

The HiAP Task Force and Rationale for Government Action

[The California HiAP Task Force](#) convenes and supports California state government departments and agencies as they integrate health, equity, and environmental sustainability into programs and policies including transportation, land use, economic opportunities, and violence prevention. The Task Force convenes 22 members of State government departments and agencies to integrate health and equity into state-level programs and policies. The Task Force is staffed through a collaboration between the Public Health Institute (PHI), Strategic Growth Council (SGC), and Department of Public Health (CDPH). Since 2018, the PHI HiAP staff team has also led the Capitol Collaborative on Race & Equity (CCORE), a racial equity capacity-building program for California State government staff focused on tackling institutional and structural racism.

Since its establishment in 2010, the Task Force has identified violence as a critical factor in healthy and equitable communities. In the ensuing 11 years, Task Force staffing on violence prevention efforts have focused on addressing risk and protective factors for violence, including domestic violence, through cross-agency action, education and narrative change, breaking down silos between sectors, providing subject matter expertise, and engaging and activating stakeholders.

As part of this work, a cross-agency Task Force working group requested informant interviews be conducted in order to inform recommendations on a multi-agency action plan on preventing violence and addressing trauma. In 2019, the Task Force delivered a set of 35 recommendations. With the onset of the COVID-19 pandemic, the creation of the Office of the Surgeon General, the country's racial reckoning, and new presidential administration, however, these recommendations need to be revisited and additional recommendations need to be brought forward to reflect the new opportunity window in the State of California.

In its [2018 “Equity in Government Practices” Action Plan](#), the Task Force also identified institutional racism as a driver of inequities, and provided a rationale for government action as critical in addressing the very problems it has created²:

² Health in All Policies Task Force Equity in Government Practices Action Plan, page 9.

From the inception of our country, government at all levels has played a role in creating and maintaining inequities, including through institutional racism. At the same time, government has a unique opportunity to address these inequities...

While many sectors have important roles to play in promoting equity, government has a unique opportunity for impact because it holds significant institutional power, allocates a broad range of resources, creates laws and policies, and is a major employer. Key government functions provide an abundance of opportunities to integrate equity. These mechanisms include hiring and workforce development practices, grant funding distribution, guidance and best practice resources, permitting and licensing processes, contracting, training, technical assistance, research, and evaluation, as well as practices such as community engagement, linguistic accessibility (including employing bilingual employees to provide services to non-English speaking clients/customers), and commitments to equity work by leadership.

Current landscape: COVID-19, systemic racism, and Adverse Childhood Experiences (ACEs)

The COVID-19 pandemic has laid bare inequities in communities throughout California, especially along racial lines. A recent study found that formerly redlined neighborhoods in communities across the country, including several cities in California, are experiencing higher COVID-19 comorbidities with worse outcomes from the pandemic. Furthermore, these same communities experience higher rates of violence and lower economic opportunity.³ Redlining, which is violence in the form of state sanctioned structural racism, continues to impact society today. When considering the intersectionality of redlining and COVID-19 risk factors, it becomes clear that violence is not ahistoric nor does it exist in a vacuum - Californians of color and those living in communities with less economic opportunities are more likely to experience violence. This is not incidental, but because of past and present oppressive systemic policy decisions trickling down and impacting individual lives.

Moreover, 62% of California adults have lived through at least one Adverse Childhood Experience⁴ (ACE) while 16% have experienced four or more ACEs.⁵ ACEs are not equally distributed, with lower income residents and communities of color disproportionately facing

³ "Not Even Past: Social Vulnerability and the Legacy of Redlining."

⁴ ACEs describe 10 categories of adversity: physical, emotional, or sexual abuse; physical or emotional neglect; and growing up in a household with incarceration, mental illness, substance use, parental separation or divorce, or intimate partner violence.

⁵ Bhushan et al, page 208.

ACEs. Additionally, ACEs not only impact short-term wellbeing, but have long standing health and economic consequences that can span multiple generations.⁶ Successful ACEs intervention strategies are also linked to positive impacts on violence prevention, meaning policies aiming to take on one of these will have a multiplier effect and address numerous factors in building healthier communities.⁷

A 2013 study estimated ACEs attributable health costs in California to be \$112.5 billion each year. ACEs experienced by California residents add an additional \$15.3 billion in costs associated with lost economic productivity, social service funding, and criminal justice intervention each year.⁸ Ultimately, maintenance of California's current trajectory perpetuates faulty systems, compromises residents' health, and also carries high fiscal consequences.

To address ACEs and target health inequities, Governor Newsom created the Office of the California Surgeon General in 2019. The office was created "with the understanding that some of the most pernicious, but least addressed health challenges are the upstream factors that eventually become chronic and acute conditions that are far more difficult and expensive to treat." To fulfill the Office's goals of cutting ACEs and toxic stress in half in one generation, the Surgeon General introduced the ACEs Aware initiative. The initiative centers on clinical care training to detect ACEs and subsequently connecting patient families to resources to build wellbeing.⁹ Rather than a focus on prevention, to date the Office is focused on direct intervention and making change on an individual level without taking on systemic factors contributing to violence and ACEs.

Research methods

To evaluate this research and address the problem statement, the author utilized Eugene Bardach's Eightfold Path, the signature policy analysis method of the Goldman School of Public Policy:¹⁰

1. Define the problem
2. Assemble the evidence
3. Construct the alternatives
4. Select the criteria
5. Project the outcomes

⁶ Merrick et al, pages 999-1005.

⁷ Egerter et al.

⁸ Bhushan et al, page 62.

⁹ Bhushan et al, page 234.

¹⁰ Bardach et al.

6. Confront the trade-offs
7. Decide
8. Tell your story

The author gathered information from a range of sources:

- Twenty six stakeholder interviews conducted by the author with subject matter experts between January and April 2021. Ten interviewees were from state government employees, 13 were from nonprofit organizations, and three were from local government staff. A standard discussion guide was tailored for each interview based on the subject matter expertise of the stakeholder.¹¹ Interview notes were coded with theme indicators in a qualitative research software, Dedoose.
- A literature review focused on promising violence prevention policies, anti-racism organizing, and what is being learned from COVID-19.
- A review of previous HiAP Task Force recommendations on violence prevention.
- Group input session of Strategic Growth Council, California Department of Public Health, and Public Health Institute HiAP staff teams.
- A stakeholder expert input session with 15 interviewees focused on closing the feedback loop and further refining the final alternatives being forward in this report.

Research limitations

This report was time bound by what the author could accomplish in four months, and each of the limitations provide opportunities for future research. For example, the author did not utilize State or local violence data or budget analysis. The author relied heavily on findings from stakeholder interviewees, who provided deep insights but do not necessarily represent a holistic perspective of the State violence landscape or programming. Future research should consider a more robust integration of statewide data in conversation with stakeholder interviews.

Understanding the Problem

The Root Causes of Violence

Violence is rooted in systemic racism, poverty, and other societal level factors, and yet a dominant narrative of individual responsibility persists, failing to recognize the complex and

¹¹ See Appendix 1 for the standard set of questions customized for each interview.

interwoven nature of violence. The state of California is no exception, with a historical legacy of causing harm to communities - which continues to this day, and current government service lines focused on treating the symptoms, rather than root causes, of violence.

Addressing the prevention of violence in California requires a new understanding of where violence comes from and how it manifests throughout various communities in the state.

Shifting our understanding of violence and its root causes, then, is a critical first step. By recognizing violence as systemic, treatable, and preventable, residents are turning to community-centered and cross-sectoral approaches. This reframe underscores the importance of collaboration across public health, education, housing, social services, transportation, and other service lines.

Defining violence

While the discussion below names some of the complex factors at play regarding the definition of violence and its implications, the reader may wish to consult additional resources on this topic, including this report by the Prevention Institute and the Big Cities Health Coalition, [*Community Safety Realized: Public Health Pathways to Preventing Violence*](#).¹² The report includes a robust discussion of truth, racial healing, and transformation; community leadership and power; data and evidence driven action; and collaboration.

No single definition can fully encapsulate the myriad of ways violence is expressed. Overreliance on definitions places the complexity of violence in a neat box rather than acknowledging the vast landscape in which it exists. However, in order to have shared language and establish a scope for this project, it has been important to identify a definition, and thus violence is defined in this report as “any human action that harms or threatens to harm people physically or psychologically.”¹³

The definition above and the Typology of Violence (See Figure 1) highlight the multifaceted and layered expressions of violence across four categories: self-inflicted, interpersonal, community, and state sanctioned.¹⁴ And while violence is often viewed as an individual exposure, this model demonstrates the shortcomings of that perspective. For example, state violence increases rates of community and family violence. Black and brown communities that

¹² Community Safety Realized: Public Health Pathways to Preventing Violence.

¹³ Los Angeles County Office of Violence Prevention, page 10.

¹⁴ Ibid.

are heavily policed often face violence and intimidation at the hands of law enforcement. Residents that have been harmed by the disproportionate presence of law enforcement in their community are more likely to be involved in domestic violence and child abuse.¹⁵

The current policy response treats and blames individuals experiencing violence through prisons, targeted interventions, and punitive services lines. If this system of policing and incarcerating communities most likely to experience violence were effective, the United States

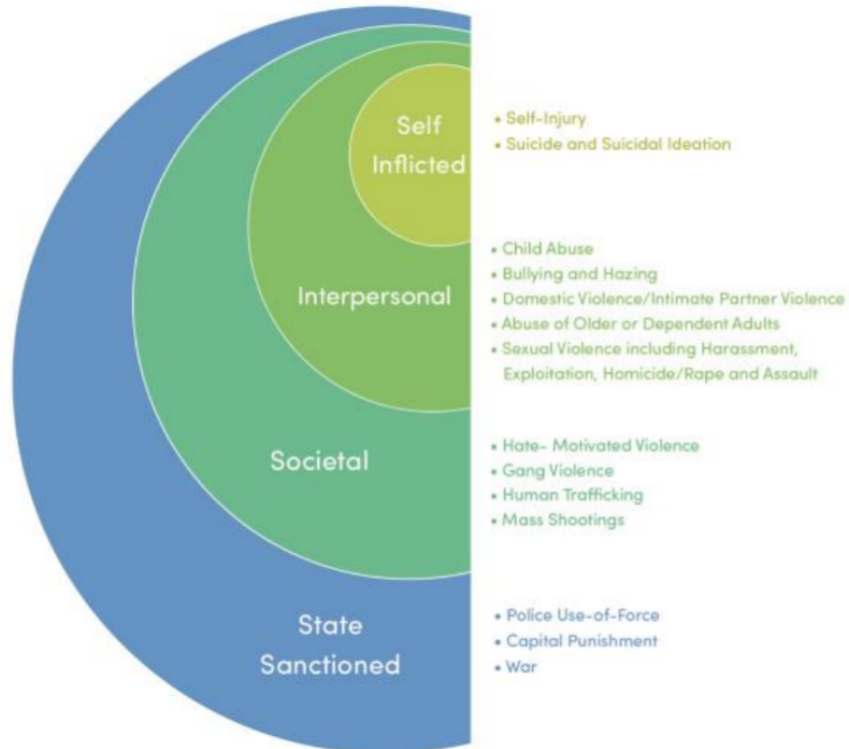
would be the safest country in the world, with more heavily policed communities experiencing lower rates of crime and other forms of violence.¹⁶ Our reality exposes a different truth - the approach of treating violence with violence is failing us.

Moving beyond violence prevention

A key element in connecting violence to broader contributors of health is being intentional about language and framing.

The typical framing of violence prevention overlooks the importance of interruption and healing. These are not three distinct intervention points for distinct members of our communities. Rather, healing is a form of violence interruption and prevention.

Figure 1. Typology of Violence Model



¹⁵ Sunshine et al, pages 513–48.

¹⁶ Sered, page 14.

“By investing in resources that facilitate relationship building and healing, we can get families the help they need before violence occurs, create alternative approaches to intervention, and support people who have caused harm — who are often survivors themselves — to end cycles of violence.” – Marc Philpart, PolicyLink¹⁷

Ultimately the common denominator between interruption, prevention and healing is a desired goal of safety. In a recent survey of state, local and nonprofit organizations to identify priority policy areas for the California HiAP Task Force, safety was identified as the fourth highest priority in improving community health.¹⁸ It is telling that safety, not violence, emerged in this survey. This public health approach of centering wellbeing as the desired outcome of our policies, as opposed to the utilization of reactive service lines, allows us to focus on healing and resilience, not just the management of violence. As such, a pivot towards a safety framing will serve us well in creating a path forward.

Themes from stakeholder interviews

Several themes arose from 26 interviews with stakeholders. Highlights are described below.

1. **Violence prevention requires cross sector collaboration** (mentioned by 79% of interviewees): Violence prevention does not fit into one policy field, nor is it the responsibility of one organization. A multi-sectoral effort is imperative not only in streamlining service lines but also creating a shared space for dialogue and advancing smart practices. Stakeholders frequently noted that there is no centralized “owner” of

How do you describe safety?

During an input session with interviewees, participants were asked how they would describe safety. Their responses articulate the importance of shifting our language from one of deficit (violence) to one of opportunity (justice and healthy communities for all).

“Liberation to be who I am without reservation”

“Feeling empowered for your own destiny”

“It’s the ability to move through space and time without having to watch my back or think about how to protect myself and my identities and other BIPOC”

“Safety is the space to live my life in a way that keeps my mind and body free from injury and assault”

“Security and wellbeing emotionally, physically, and socially”

“A sense of peace”

¹⁷ “Healing, not Policing: A Transformative Approach to Intimate Partner Violence”

¹⁸ Preliminary Findings, California Health In all Policies 5-Year Priorities Survey. Othering and Belonging Institute.

violence prevention policy or violence prevention coordination within the state, and said that collaboration was highly sought out as a way for stakeholders to be in conversation with one another.

“People are realizing the impacts of violence and seeing that there are many services but not a coordination of violence efforts. People see that issues of violence are cross-cutting and there is further need to make cohesive networks to take it on.” – Matt Schueller, California Office of the Surgeon General

2. **Heightened community partnership is key to meeting needs** (mentioned by 75% of interviewees): Communities are able to serve their own interests when government follows their lead and shares decision making power. Government should be a conduit for delivering resources, not the exclusive incubator for innovative ideas.

“We continue to lack appreciation that communities know what they need. Our lawmakers need to recognize that their constituencies increasingly do not feel safe with the current responses and are resistant to those responses for valid reasons, and they need to listen and then act accordingly to directly address underlying issues of safety.” – Shani Buggs, UC Davis Violence Prevention Research Program

3. **The many forms of violence must be considered together** (mentioned by 71% of interviewees): Interviewees, including those whose work focuses on a single form of violence, recognized that one form of violence often connects to and intersects with other forms of violence. Linkages between state administered violence, domestic violence, intrapersonal violence were especially prevalent in interviewee conversations. In addition, interviewees noted how forms of violence inform one another both cyclically and in shared determinants of health.

“If we focus on shared risk factors, that cuts across different violence prevention areas and maximizes our impact and bang for the buck.” – Renay Bradley, California Department of Public Health

4. **Work to prevent violence must be coupled with healing systems and addressing trauma** (mentioned by 67% of interviewees): Interviewees identified a relationship between trauma, healing, and violence prevention. Interviewees added that standard approaches to handling violence prevention, which often focus on direct intervention, do not address the role of trauma or provide pathways to healing.

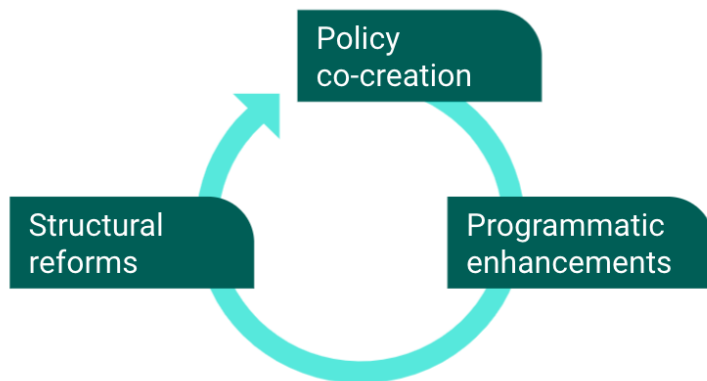
“Hurt people hurt other people. When one person in the family heals, the whole family heals.” – Hiram Santisteban, Fathers and Families of San Joaquin

5. **The State must recognize and end government’s role in administering violence, which includes punitive approaches and interventions** (mentioned by 67% of interviewees): The State was repeatedly identified as “treating violence with violence.” According to interviewees, the State is not a trusted partner or viewed as an entity looking out for the best interests of the residents of California. Instead, the State relies on service lines perpetuating violence, including family separation and incarceration.

“For so long in communities, particularly in poor and marginalized communities of color, the interaction with government has been stained by broken trust and inhumane treatment by both systems and people. The government systems have said ‘we are here to help’ but more frequently than not, we are actually the ones doing the hurting, be it intentionally or unintentionally.” – Keith Baker, Los Angeles County Department of Public Health, Office of Violence Prevention

Recommendations

Dozens of recommendations were brought forward in stakeholder interviews (see Appendix 3 for the full list). Based on analysis as described above, in concert with an assessment of the violence prevention landscape, three “buckets” or clusters of recommendations emerged for coordinated state action to prevent violence and promote healing-centered approaches:



Recommendation Bucket 1:
Programmatic enhancements – leverage existing programs, resources, and staff expertise

Recommendation Bucket 2:
Structural reforms – create new pathways for violence prevention work by transforming existing systems

Recommendation Bucket 3: *Policy co-creation – pivot away from existing systems to build new services lines focused on upstream needs built with, not for, community*

The recommendations range from minor adjustments to the status quo to radical changes in the way violence is managed and evaluated by California State government. These policy buckets are not mutually exclusive and in fact intentionally build on one another. An adopted recommendation in the programmatic enhancements bucket can, and should, eventually lead to policy adoption in the more upstream buckets. The following sections will describe these policies in more detail.

Recommendation Bucket 1: programmatic enhancements

Recommendation 1.1 Expand HiAP Task Force offerings focused on trauma-informed service lines and understanding the root causes of violence, creating space for dialogue and coordination between State departments and agencies.

Over the last decade, the HiAP Task Force has had success normalizing health equity and race equity with State partners, due to its unique convening role, creative workspace, and “unlikely relationships” across State government. Leveraging this unique positionality with additional programming will draw out the linkages between existing equity efforts and the opportunity to create a unified safety framework.¹⁹ Solutions start with the HiAP Task Force building rapport and socializing the idea of a more unified approach to violence prevention and wellbeing. As such, HiAP should:

- Host convenings and provide technical assistance to state agencies for internal policy audits (including a review of inclusive language, analysis of trauma-informed communication, etc.)for a State staff audience, laying the groundwork for larger reform in the future and encouraging policy co-creation conversations amongst convening attendees.
- Introduce forums for community organizations, funders, State staff, and local government to confer on policy opportunities related to building shared safety. While this does not replace the need for more power sharing from State agencies, it opens doors to new dialogue and plants seeds for potential collaborations.
- Incorporate healing centered engagement principles and training on root causes of violence into CCORE curriculum, leading to government staff better understanding the State’s role in perpetuating violence.

¹⁹ 37 percent of interviewees expressed interest in additional offerings or partnership with the Task Force. While many interviewees have existing relationships with Task Force, interviews for this project were the first exposure for some stakeholders.

- Establish a precedent for CCORE participants to publically share Racial Equity Action Plans, adding accountability and transparency in State government.

Recommendation 1.2 Develop and adopt a State safety & justice framework in California, bringing community and government voices to one table for development.

There is no one widely used definition of violence in California State government nor is there one unified approach to create safety & justice throughout the state. A framework that leads to an understanding of the upstream structural drivers of safety must take place before policies can be adjusted according to this centralized foundational document. This framework would help determine potential modifications to State structure and service lines in the years ahead. When considering the diversity of sectors and stakeholders that will be a part of this conversation, an organization that straddles the relationship between government, advocacy, and community is uniquely equipped to take this on. The HiAP Task Force is the best positioned organization to host convenings for the creation of a centralized framework. The drafting of a shared framework should:

- Bring stakeholders - reflecting California's diversity in terms of geography, community members, survivors, and State agencies - together to identify metrics to measure progress toward goals of safety & justice, and craft an evidence-based strategy to reach these goals. Co-creation, as identified by the top themes from stakeholder interviews, will lead to a more representative and grounded framework.
- Move beyond defining violence and also consider the goal of creating safe, justice-informed communities grounded in healing-centered approaches. A broader aspirational perspective will empower a framework that further dissolves silos by bringing more voices to the table.
- Articulate funding gaps and potential funding models for a unified safety & justice approach within State government, addressing both staff funding needs, administrative costs, non-punitive sources of funding, and longevity of funding.

Recommendation Bucket 2: structural reforms

Recommendation 2.1 Establish a centralized champion of violence prevention work.²⁰

After a framework is created, one entity should be responsible for driving implementation across State government. The exact home of this entity - whether it be a new office, a new task

²⁰ 54 percent of interviewees advocated for a centralized owner of violence prevention work.

force, or embedded within an existing State body – should be determined by those working on the violence framework. Of the utmost importance is a home with a non-punitive scope and a home deemed suitable by community representatives. This centralized torchbearer should:

- Be housed within State government in part based on where resources permit. While the exact resources required to equip this work will be determined based on where the champion sits, shifting assets from punitive downstream service lines holds promise. Given that this centralized entity spans the mission of all State government, it would also be appropriate to use General Funds to resource this champion.
- Be evaluated using formalized accountability levers to both community members and State staff. Accountability will be directly tied to scope, which should focus not on diverting existing violence prevention efforts but instead empowering existing State work to be in line with healing-centered approaches and community needs. An advisory committee or similar body might be suitable to guide this effort.

Centralization case study: How do we know this works?

Dozens of counties, cities, and departments across the county and across California have launched initiatives and begun collaborating to advance their efforts.

In particular the governance structure and staffing of the Los Angeles County Office of Violence Prevention, housed in the Department of Public Health, offers a compelling model. The Office “works to strengthen coordination, capacity and partnerships to address the root causes of violence, and to advance policies and practices that are grounded in race equity, to prevent all forms of violence and to promote healing across all communities.”

Bolstered by the Community Partnership Council, the County Leadership Committee, the Board of Supervisors and community at large, the Office intentionally uses multiple forms of accountability and partnership to guide their work.¹⁹

Recommendation 2.2 Streamline the allocation of funds with lower burdens on administrators and shift away from perverse incentives for funding.²¹

Whenever possible when funding safety, violence intervention, prevention, and healing, the State should:

- Utilize the metrics set forth in the shared framework recommended above.

²¹ 62.5 percent of interviewees called for reforms to current funding allocation through streamlined allocation processes, the most requested call to action from interviewees.

- Remove arduous reporting requirements, both for those administering funds and for those reporting back impact. State staff, local government, and community organizations alike proposed minimizing grant reporting requirements whenever possible. Pre-negotiated agreements are one avenue to reduce administrative burden, but the State should explore other innovations being put forth by other entities.
- Move to a longer-term granting model that does not redact resources in communities without alternative funding sources. With many current allocation models, just as programs are getting off the ground and as trust is being built in communities, funding evaporates.²²
- Create new sources of funding. The California Violence Intervention and Prevention Grant Program, administered by the Board of State and Community Corrections has appropriated nearly \$40 million “for competitive awards to cities and community-based organizations to support evidence-based violence reduction initiatives.”²³ New sources of funding are more important than ever, but housing the funding in an entity focused on punitivity does not support the needed goal of moving upstream. Criminal penalty levies should not be the basis for additional prevention funds moving forward. Instead, the State needs to invest in general funds with incentives for healing-centered approaches.

Recommendation Bucket 3: policy co-creation

Recommendation 3.1 Declare racism a public health crisis.²⁴

A first step in developing a path to healing is to recognize past and current harms by acknowledging the role that racism plays in driving violence. Structural racism is a significant reason the State continues to treat violence as an individual issue instead of a social justice issue with state sanctioned root causes. Nine states have already taken the step of declaring racism a public health crisis and California has the ability to follow suit through Senate Bill 17 this legislative session.

In addition to concretely calling out racism as a driver of inequities, the proposed Senate Bill 17 establishes an independent statewide Office of Racial Equity, a strong potential partner as a violence prevention framework is being developed.²⁵ The accountability structures put forth

²² Brought forward by several interviewees.

²³ “California Violence Intervention and Prevention (CalVIP) Grant Program.”

²⁴ 42 percent of interviewees mentioned Senate Bill 17 or declaring racism a public health crisis more broadly.

²⁵ “Racism is a Public Health Crisis.”

through a declaration, among other measures, would empower the State to stand by its promises and commitments to do better by all residents of California by addressing the systemic drivers of racial disparities. This process of racial healing will allow the State to build systems and create investments resulting in increased safety and healing.

Recommendation 3.2 Transform government budget and services lines to further promote upstream approaches to prevention and healing.

It is critical to consider ideas that go far beyond anything that has been done before. Co-creation implies radical imagination, community-driven approaches, and a willingness to completely transform systems. As the underlying root causes of violence have been more widely accepted in recent years, more attention has been paid to policies that not only

Co-creation case study: How do we know this works?

Pilot programs and local level policies focused on these upstream investments are effective, with several examples to call on throughout California.

All Children Thrive–California (ACT) is a network aiming to transform community wellbeing by bringing families and government staff together to “create policies, programs, and resources to address the underlying adverse conditions that lead to childhood trauma and to promote the conditions that foster child wellbeing. By building networks of people and places to co-design innovative solutions and share their experiences and expertise, ACT will spread and scale solutions that work.”

The ACT model makes seismic changes more palatable by identifying the policies that have the most buy-in as coalitions are being built. From passing living wage subsidy legislation in local jurisdictions to promoting policy on affordable housing, ACT helps communities set common goals to tackle the core issues resulting in violence, and then implement plans for action.

interrupt violence but also boost shared protective factors that nurture wellbeing. Interviewees described policy options ranging from increased use of non-punitive emergency response, eliminating the carceral state altogether, reparations, and universal basic income, to EITC expansion and innovation.²⁶ Several policies stand out as

²⁶ As Appendix 2 and Appendix 3 show, these recommendations ranged from 12.5 percent of interviewees supporting them to 50 percent of interviewees expressing support. Appendix 2 details recommendations brought forward by three or more interviewees while Appendix 3 details all other recommendations mentioned by two or fewer interviewees or recommendations on a smaller scale.

especially promising opportunities to promote safety:

- The C.R.I.S.E.S. Act (AB 2054) introduced this legislative session would shift policy intervention to upstream solutions by providing culturally informed and non-punitive responses to emergency situations like mental health crises, needs for those experiencing homelessness, and intimate partner violence. Transition to an emergency response focused on safety and solving problems as opposed to punishing those who need aid is shown to be cost effective and have a long term sustained impact.²⁷ Furthermore, these solutions do not blame individuals for their inability to thrive. Instead, the C.R.I.S.E.S. Act and other upstream policies recognize that more can be done to prevent incarceration.
- The Task Force to Study and Develop Reparation Proposals for African Americans established by AB 3121 last legislative session should make explicit recommendations on compensation, rehabilitation, and restitution based on State violence and its ongoing impacts.
- Increase access to long-term affordable housing, which has been shown to decrease rates of violent crime and bolster overall wellbeing.²⁸
- Administer multiple forms of income shocks, ranging from one time payments to staggered but consistent disbursement. While boosts to income are shown to be effective both short and long term, income streams tied to consistent schedules are deemed more impactful.²⁹

Conclusion

California State government is on the cusp of revolutionizing the violence prevention landscape. The creation of the Office of the Surgeon General and the equity-focused response to the COVID-19 pandemic show that California is ready to think differently about how best to cultivate safe and healthy communities.

Using the alternative buckets described in this report as a launching pad for short-term (programmatic enhancements), medium-term (structural reforms), and long term (policy co-creation) stepping stones would serve the State well. As mentioned in previous sections,

²⁷ AB-118 Emergency services: community response: grant program.

²⁸ John Jay

²⁹ John Jay

these policies build on one another. That being said, groundswells of opportunity can arise at any moment, opening a policy window for upstream buckets deemed as longer-term reaches in the current environment.

The top themes from stakeholder interviews for this report underscored the importance of collaboration, community partnership, and thinking broadly about violence and its impacts. While the State should begin taking action on all of the alternatives listed, each of which address these top three themes, the alternative at the heart of meaningful change is the development of a statewide framework for violence prevention. The precursor to a shared document detailing definitions, goals, and a menu of potential solutions starts, however, with the HiAP Task Force building rapport and socializing the idea of a more unified approach to violence prevention and wellbeing. The approach of creating a north star for California State government through collaborative convenings will help the State deliver on its promise to create an equitable, just environment where we can all thrive.

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Appendix 1: Interview discussion guide

1. What are your current priorities broadly? What priorities are not being met and why? What has shifted in the last year and why?
2. Are there opportunities (or challenges) you see in 2021? How many are new or bubble up as a result of events of 2020?
3. Our main question - what are things the State could do to make your work easier?
4. Are there emerging opportunities that we should know about? Are there pieces of legislation that will be implemented that we should know about?
5. What topic areas have momentum right now? What are people you work with particularly interested in working on right now?
6. Which agency/office/department project—from the past or the present—in your mind best exemplifies what your organization can and should accomplish?
 - a. Why is it important, in your view?
 - b. What factors, in your view, enabled this project to be a success?
 - c. What are some lessons that the agency could take away from this project?
7. Do you have suggestions of other organizations we should be talking with?

Appendix 2: Percentage of interviewees either proactively bringing up or responding to a recommendation

Streamline funding allocation	62.50%
Non-punitive emergency response	54.17%
Centralized office	54.17%
Expanded EITC / existing supports	50.00%
Additional government staffing and resources	41.67%
Declare racism a public health crisis	41.67%
Increased HiAP role	37.50%
Workforce equity	33.33%
Reparations	20.83%
End the carceral state	12.50%

Appendix 3: All other recommendations brought forward in stakeholder interviews

Proposed action	Count
Further invest in infrastructure and personnel in preparation for future outbreaks like COVID and/or climate change and/or fires. Invest in public health and public health workforce. Diversity investment (ex: not just public health nurses).	1
Incorporating and addressing white supremacy in ourselves and our organizations, which will likely require restructuring.	5
Office of Healing and Resilience / Violence Prevention	3
integrate youth voices. (Ex: current system is climate conference and separate youth climate conference; same with racial justice.)	3
Invest in parks, green space to address violence	2
Increase housing stability (access, Section 8 landlord enforcement, etc.)	5
Inventory analysis of how existing codes/statutes perpetuate structural inequalities	2
Collaborative task force to devise framework for violence (with tangible recommendations)	4
Equity analysis in legislative proposal process / impact assessment	2
Surgeon General needs to broaden scope and move upstream	6
Health & Human Services action plan to incorporate racial equity and violence	1
Fund local expertise	6
Adopt violence intervention certification programs and incorporate them into hospitals that serve victims of violence.	1
Expand CalVIP	3
Violence Prevention Research Program Home - UC Davis take on some of the work	2
Direct cash disbursements to families	2
Restructure MediCal	2
Increased culturally appropriate services lines across the spectrum	2
Focus on mental health, not just mental illness (especially in communities of color)	2
Broader economic supports to enhance well being	3
Strengthen gun laws	2
State investment in Advance Peace model	2

Professional development for formerly incarcerated	1
Programming for women in firearm intervention space	1
Shared data and information hubs run by State	1
Fund equitably across all parts of CA	2
Remove perverse incentives for funding (fines going to victims funds)	2
Fund for longevity and allow time for community and trust building	3
Defund the police / state violence	2
Invest in "gap" or midstream area of kids on the cusp of entry in criminal justice system	2
Look at entire families, not just individuals when devising an intervention strategy	2
Don't just fund frontline staff, but also consider administrative needs	2
State efforts should not just fund a centralized effort, but also allocate funds to community organizations and local government	2