Executive Summary

The California Equitable Recovery Initiative (CERI) was created to help Local Health Jurisdictions (LHJs) strengthen their health equity efforts as California recovered from the COVID-19 pandemic. CERI offered funding, tools, and technical assistance to help LHJs build systems that address long-standing inequities and improve health outcomes for communities most affected by the pandemic.

This Executive Summary gives a brief overview of CERI's goals, what the initiative supported, the challenges it faced, and its impact across the state.

Purpose

CERI aimed to expand local capacity to embed equity into public health operations by helping LHJs hire dedicated equity staff, conduct organizational equity assessments, develop Health Equity Plans, and implement targeted community engagement and workforce development strategies.

Building Equity Infrastructure Across Local Health Jurisdictions

To strengthen equity practices within LHJs, CERI supported efforts such as:

- Hiring or establishing Equity Leads and expanding other equity-focused staffing
- Creating community engagement structures, including advisory boards, co-design processes, and multi-sector partnerships
- Conducting organizational assessments to identify gaps and guide planning
- Strengthening equity-focused policies, language access, and inclusive communication
- Developing community-informed Health Equity Plans aligned with statewide frameworks

Priority Populations and Community Voice

Aligned with statewide equity goals, LHJs focused on communities hit hardest by the pandemic and long-standing inequities. They centered engagement on the lived experiences of residents, Tribes, community health workers, and community-based organizations to ensure strategies reflected local needs and supported culturally responsive solutions.

Statewide Challenges in Implementation

LHJs faced several barriers that affected their ability to advance equity:

- Staffing shortages, vacancies, and high turnover
- Fragmented data systems and limited capacity for data analysis
- Limited programmatic capacity and competing community demands
- Geographic isolation and resource constraints, especially in rural jurisdictions
- Disruptions from the temporary federal termination of CERI funding in 2025, which paused activities and required rapid re-planning once funds were reinstated

Statewide Equity Lessons and Opportunities

CERI elevated the importance of sustained leadership support, cross-sector collaboration, and shared decision making with communities. LHJs learned that advancing equity requires long term investment, structured engagement practices, and accountability mechanisms that integrate equity into daily operations.

Connection to Statewide Health Equity Planning

CERI supported activities that directly informed statewide health equity planning, including elevating key issues and opportunities, successes and lessons learned, and promising practices that could be replicated and scaled across California for greater impact.

Looking Forward

CERI strengthened essential equity infrastructure across LHJs. While challenges remain, it helped LHJs build sustainable systems, deepen partnerships, and increase capacity to continue advancing equity beyond the grant period. These lessons position California to further embed equity in public health practice and improve outcomes for communities most affected by long-standing inequities.