

"This year the field of community violence intervention (CVI) has seen unprecedented energy and momentum, and the HAVI is proud to be an integral part of that growth. Not only have dozens of new hospital-based violence intervention programs been launched in cities, but existing member programs have expanded and become vital contributors to a broader ecosystem of CVI strategies. Our inaugural launch of Standards and Indicators for HVIPs has helped clarify the model and transformed the field, creating new opportunities for peer learning and research. Together with our partners, we have supported frontline violence prevention professionals through our Medicaid reimbursement campaigns, generating new resources to sustain the work. We have seen, time and time again, that when leaders in community, government, healthcare, the academy, business, advocacy, and philanthropy come together, we are unstoppable in our quest to end gun violence for good. I hope you feel as energized and hopeful as I do by all we've accomplished together. We thank you for making 2022 a breakthrough year!"



Fatimah Loren Dreier
Executive Director, The Health Alliance for Violence Intervention



Founded in 2009, the Health Alliance for Violence Intervention (the HAVI) is the only national organization that fosters a network of hospital-based violence intervention programs (HVIPS). HVIPs provide intensive case management to address the social determinants of health for victims of community violence who are at elevated risk for future violent incidents. These programs are a critical component of a comprehensive community violence intervention (CVI) ecosystem.

The HAVI serves over 85 cities in the U.S. and beyond, providing training and technical assistance (TTA) and support with strategic communications, policy development, peer learning, and research. The HAVI also works to shift narratives about violence and trauma in communities of color and partners with its members to advance policy and research that address violence as a public health emergency.

The HAVI is fiscally sponsored by Health Resources in Action (HRiA), a non-profit social change organization committed to advancing health and racial equity by providing project and grant management, strategic communications, research and evaluation, and backbone administrative services to support and sustain a range of public health activities. The HAVI and HRiA established a partnership in 2020 founded on a shared vision and commitment to advance health and racial equity through transformative, community-centered approaches.





57

Grew our network of member HVIPs to 57



419

Held 419 engagements with HAVI member programs



176

Received 176 requests for training & technical assistance



85

Worked in 85 cities across the U.S.





700

Convened nearly 700 attendees at our annual conference



\$250M

Successfully advocated for \$250 million in funding for community violence intervention in the Bipartisan Safer Communities Act



Worked in 3 states to develop and pass legislation to create a new Medicaid benefit for violence prevention services



Served 94 hospitals and health systems through member services and/or training and technical assistance





94 Hospitals & Health Systems Served

THROUGH MEMBER SERVICES AND/OR TRAINING AND TECHNICAL ASSISTANCE





HAVI Membership

The HAVI's membership grew to 57 members—an increase of 16% from the previous year—including full member programs, emerging member programs, and organizational members. HAVI staff held 419 engagements with HAVI member programs and hosted 47 working group meetings.



The **Empowering the Frontline Working Group** serves as a safe space for frontline violence prevention professionals to share stories and resources, learn from each other's experiences, and celebrate the outstanding work they do on the frontlines of community violence intervention.



The Mental Health Working Group provides clinical staff a venue to share challenges and best practices related to the provision of mental health and trauma-informed services for violently injured clients.



The **Policy Working Group** utilizes the expertise of the HAVI network to facilitate the expansion and development of hospital-based violence intervention programs (HVIPs) and related best practices throughout the country.



The Research and Evaluation Working Group keeps abreast of current research about and evaluations of HVIPs, develops standardized protocols for data collection and tracking, and works to build evidence.



The Workforce Development Working Group provides support and coordination of best practices related to HVIP staff development, staff training, program development, and human resources.



The Reimagining the Public's Safety Working Group focuses on the interactions between HVIP staff and law enforcement as well as policies and practices that promote patient rights in health care systems.



Requests for TTA



25

HVIP partners



Training and Technical Assistance

Over the course of the year, the HAVI's training and technical assistance (TTA) department received 176 requests for TTA and provided TTA to 25 HVIP partners.

OTHER TTA HIGHLIGHTS INCLUDE:

The training for violence prevention professional certification was revised to standardize each module and embed racial equity, trauma-informed care, and sustainability throughout.

The TTA team developed a three-part training series on cultural humility and identity and a two-part series on facilitation for the HAVI faculty.

TTA staff created a racial equity rubric and training to address racial biases in HVIP trainings.





















Advancing Hospital-Based Victim Services (AHVS)

The Advancing Hospital-Based Victim Services (AHVS) project is a multi-year initiative—funded by the Office for Victims of Crime (OVC) within the Department of Justice—focused on advancing hospital-based victim services by providing technical assistance to AHVS grantee sites; facilitating a community of practice across the sites, OVC, and the expansive U.S. network of hospital-based violence intervention programs; and fostering opportunities for continued peer-to-peer learning, networking, and connections. The HAVI's Peer Learning Department serves as the lead technical assistance provider on the OVC AHVS project.



HAVI Faculty

HAVI faculty members play an instrumental role in the organization's training and technical assistance for new and emerging HVIPs and contribute to the development of HAVI training materials and best practices for HVIPs. The faculty was first established in July 2020 and included a total of 17 faculty members representing nine member programs. In 2022, the HAVI welcomed a second cohort of 10 new faculty members who represent member HVIPs from across the country.



Paris Davis Youth ALIVE!



Masika Gadson Boston Public Schools



Esmeralda Huerta **Wraparound Sacramento**



Carlos Jackson Youth ALIVE!



Jacqueline Kendrick Children's Hospital of Philadelphia Violence Intervention Program



Nicky MacCallum Youth ALIVE!



Michelle McDaniel At-Risk Intervention and Mentoring (AIM)



Carol Olson Bridging the Gap/VCU Health



Joseph Richardson **Violence Intervention Program** at the University of Maryland **Shock Trauma Center**

David Wiley

Medical Center

Violence Intervention Advocacy Program (VIAP) at Boston



Tolulope Sonuyi Detroit Life is Valuable Everyday (DLIVE)



John Torres Youth ALIVE!



Johnnie Williams At-Risk Intervention and Mentoring (AIM)









Planning and Design



Service Delivery



Community Partnerships



Data Collection, Evaluation, & Research



Staff
Development



Hospital Systems Transformation



Participant Engagement



Sustainability & Funding

Standards and **Indicators**

In 2022, the HAVI announced an important milestone for the field—the launch of *Standards and Indicators for Hospital-based Violence Intervention Programs*, which includes 43 standards across 8 domains.

Our members and partners have indicated that these standards help clarify the tools and strategies most needed for transformative healing and systems change. Additionally, they have allowed the field to advocate for investments in the frontline violence prevention workforce, training and technical assistance, research to advance the HVIP model, and sustainable funding streams for HVIPs as well as other community-based solutions.



Technical Assistance Provider is Essential Voice in HVIP Sustainability

For the past three years, the HAVI has worked closely with nine HVIPs across New Jersey to provide training and technical assistance for the development of the programs, which were established or expanded in 2020 with \$20 million in federal Victims of Crime Act (VOCA) funding awarded by the New Jersey Attorney General's Office. When the HAVI learned in July 2022 that the state had no proposed plans to continue funding the HVIPs past September, the HAVI stood alongside our partners with the New Jersey Violence Intervention and Prevention Coalition to call for Governor Phil Murphy to immediately provide \$10 million to bridge the funding gap. Through these efforts, the state's Office of the Attorney General announced on Aug. 8 the allocation of \$10 million in federal American Recovery Plan (ARP) funds to sustain the HVIP programs through 2024.





HAVI Conference

The HAVI's 13th annual conference—*Going Further, Together: Building the CVI Ecosystem*—was our largest yet, with nearly 700 attendees and speakers who gathered virtually from Nov. 1-3, 2022. Nearly half of the attendees were frontline violence prevention professionals, and 80 percent of HAVI member programs were represented.

The conference included powerful plenary discussions and engaging workshop sessions led by frontline workers, HVIP staff, community leaders, activists, health and mental health experts, researchers, government officials, and philanthropists.

Featured plenary speakers included Steve Ballmer, a philanthropist, chairman of the Los Angeles Clippers, and former CEO of Microsoft; Dr. Arthur Evans, CEO of the American Psychological Association; Dr. Marvin Carr, Director of the Center for Racial Equity at Walmart; and Dr. Jeffrey Kerby, Chair of the American College of Surgeons.



Steve Ballmer
Philanthropist, Chairman of the
Los Angeles Clippers, and former
CEO of Microsoft



Dr. Arthur EvansCEO of the American Psychological Association



Dr. Jeffrey KerbyChair of the American College of Surgeons



Dr. Marvin CarrDirector, Center for Racial Equity,
Walmart



HAVI in the Field









Dr. Kyndra SimmonsDirector, Frontline Training & Technical Assistance

Engaging and Empowering Frontline Violence Prevention Professionals

The HAVI has long advocated for more investment in comprehensive support for frontline violence prevention professionals, whose jobs involve a unique set of risks and challenges. The HAVI's efforts to better support this workforce have included the creation of a new department focused on training and technical assistance for frontline workers, which is led by Dr. Kyndra Simmons, a nationally recognized expert in urban violence prevention. Additionally, in 2022, the HAVI developed a pay equity survey for frontline workers, which will inform our education and advocacy efforts around frontline worker compensation.



Brave Space

Every other month, the HAVI hosts Brave Space, a gathering open to all frontline violence intervention workers, whether employed at a HAVI member program or another violence intervention program. Created by and for frontline workers, it is a space for networking, collective care, and advocacy, as well as to come together and share, learn, heal, and be brave.



Working in Coalition White House Community Violence Intervention Collaborative

The HAVI served as one of five lead technical assistance providers for the White House Community Violence Intervention Collaborative (CVIC), a cohort of 16 jurisdictions committed to using public funding to strengthen and scale their community violence intervention infrastructure. As part of the 18-month CVIC initiative, the HAVI supported 13 organizations in Memphis, Newark, Detroit, and Minneapolis and provided data for the first national Data Snapshot on the capacity of 52 community-based organizations that participated in the CVIC initiative.



Ras Baraka, Mayor, Newark, NJ; Fatimah Loren Dreier, Executive Director, the HAVI; Aqeela Sherrills, Co-Founder, Community-Based Public Safety Collective











Working in Coalition Coalition to Advance Public Safety

In 2022, the HAVI kicked off its work with the Coalition to Advance Public Safety (CAPS), a five-year initiative funded by gifts from Ballmer Group, the Charles and Lynn Schusterman Family Foundation, and the Kendeda Fund. The CAPS coalition will work with mayors, local community-based organizations, and hospitals in 12 cities with high rates of gun violence to scale up and bring cohesion and additional funding to local community violence intervention (CVI) ecosystems. The goal of the initiative is to reduce gun homicides and non-fatal shootings in the 12 cities by 20 percent over the next five years.

The four organizations that comprise the CAPS coalition—the Health Alliance for Violence Intervention, the National Institute for Criminal Justice Reform, the Community-Based Public Safety Collective, and Cities United—previously served as the training and technical assistance providers for the recently concluded White House Community Violence Intervention Collaborative. The new CAPS initiative will build on the lessons learned and strategies utilized in support of CVIC to expand the ongoing work with mayors and communities across the country and systematically deploy training and technical assistance to the 12 participating cities.





A Focus on Racial Equity

Racial equity is fundamental to the DNA of the HAVI. Both internally and externally, we commit to anti-racist practices and policies. In the past year, the HAVI authored and disseminated a framework to advance equity in grantmaking, *Racial Equity Framework for Community Violence Intervention Solicitations*. Additionally, we contributed to coalitions and worked with partners that center racial equity, including the Black and Brown Gun Violence Prevention Research Collective.

Internally, the HAVI's new Organizational Growth and Equity division coordinated a series of monthly racial equity affinity groups for staff to learn and reflect on our own biases and internalized white supremacy culture. Additionally, the HAVI hosted three all-staff workshops on giving and receiving feedback and conflict transformation.

The FREE (Forging a Racial Equity Ecosystem) Task Force—comprised of HAVI staff, board members, and staff of HAVI member programs—provides input, feedback, and guidance around the HAVI's organizational efforts to address pervasive structural and systemic racism and work toward equitable healing and collective liberation. This past year, FREE also provided extensive consultation, thought leadership, and technical support for the development of a pay equity survey for frontline workers.



RACIAL EQUITY FRAMEWO

for Community Violence Intervention Solicit



BACIAL COURT SCAMPAGE FOR COMMUNITY VIOLENCE INTERVENTION AND COMMONS

Recommendations are as follows:



RECOMMENDATION #1:

Define Equity in Community Violence Intervention as both a Process and Outcome



RECOMMENDATION #2:

Define the Community Violence Intervention Strategies that Comprise an Integrated and Coordinated Violence Reduction Ecosystem



RECOMMENDATION #3:

To Maximize Impact, Prioritize High-Need Jurisdictions



RECOMMENDATION #4:

Prioritize Training and Technical Assistance Providers Led/Staffed By Those Directly Impacted By Community Violence



RECOMMENDATION #5:

Partner with Intermediary Organizations to Help CVI Sites and Community-based Organizations Compete for Federal Funds



RECOMMENDATION #6:

Examine and Ease Burdensome Compliance and Reporting Requirement



RECOMMENDATION #7:

Recognize Partnership Challenges and Power Disparities Between CVI Programs and Law Enforcement/Criminal Justice Agencies



RECOMMENDATION #8:

Maintain Active Engagement with CVI Sites Throughout the Lifecycle of Grant



RECOMMENDATION #9:

Create an Agenda for Actionable Research Priorities That Focus on Implementation Science, Process, and Outcome Measures Across the CVI Ecosystem

4



Advancing Public Policies to Support Community Violence Intervention





Federal Funding for Community Violence Intervention

In coordination with our coalition partners, the HAVI successfully advocated for the inclusion of \$250 million in funding for community violence intervention in the Bipartisan Safer Communities Act, which President Biden signed into law in June. Numerous HAVI staff, members, and partners attended the White House ceremony to celebrate the passage of this historic bill.



Fatimah Loren Dreier, Executive Director, the HAVI; Kyle Fischer, Director, Policy & Advocacy, the HAVI



Medicaid Coverage of HVIPs and other CVI Services

The HAVI worked closely with state legislators on the development and passage of legislation to create a new Medicaid benefit for violence prevention services in Oregon, California, and Maryland, bringing the total number of states offering this benefit to five. Additionally, several other states have expressed interest in the HAVI's support to advance these policies and scale these vital resources.

The HAVI has been the driving force behind a growing movement to use Medicaid as a key funding component of the community violence intervention ecosystem. In 2015, the HAVI secured recognition by the National Uniform Claim Committee for a new type of health care provider for violence intervention—the Violence Prevention Professional (VPP)—which created a pathway for VPPs to obtain reimbursement through traditional medical financing systems, including Medicaid. In 2021, through the HAVI's advocacy, the Biden-Harris Administration directed the Centers for Medicare and Medicaid Services to issue guidance on how states can use Medicaid to reimburse HVIP services. Shortly thereafter, Connecticut and Illinois became the first states in the nation to enact laws to ensure HVIP services are a reimbursable Medicaid benefit for violently injured patients.





Andrew Woods, Senior Advisor, Training & Technical Assistance, the HAVI;
Fatimah Loren Dreier, Executive Director, the HAVI; Kyle Fischer, Director,
Policy & Advocacy, the HAVI



"The human brain does not differentiate between a gunshot wound in Oakland and a gunshot wound in Afghanistan."



Kyle FischerDirector, Policy & Advocacy, The Health Alliance for Violence Intervention





KAISER PERMANENTE



HAVI Selected to Co-Lead Kaiser Permanente's Center for Gun Violence Research and Education

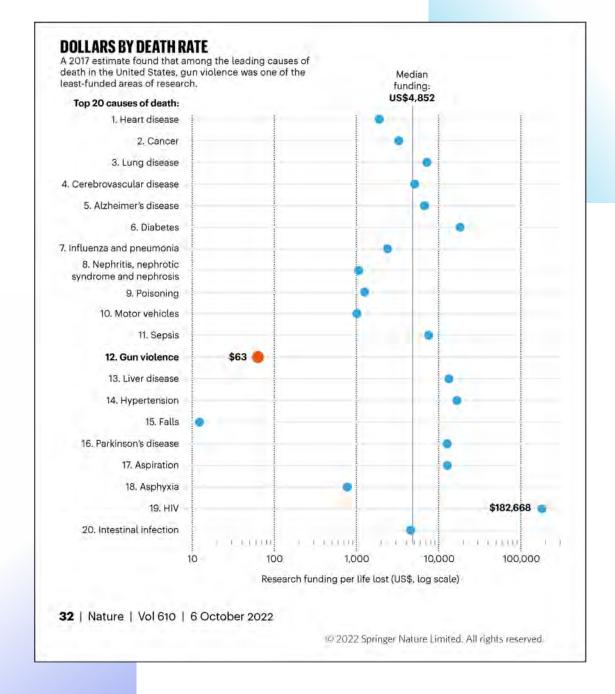
In December, the HAVI was selected by Kaiser Permanente to colead their Center for Gun Violence Research and Education. The partnership, which will kick-off in 2023, is grounded in a shared belief by both organizations that a robust public health approach is the most effective way to address gun violence.

Along with this new partnership, Kaiser Permanente committed \$25 million to the center—the single-largest investment in gun violence research and education by an institution in the U.S. health care sector—which will extend over 5 years and allow the center to expand and scale its prevention research efforts, foster innovative public and professional education programs, and support evidence-backed community initiatives, including hospital-based violence intervention programs. The overarching goal of the center is to provide a pathway for health care leaders, communities, scientists, public health practitioners, and elected officials to develop and implement a range of strategies that have been shown to work.



To Prevent Gun Injury, Build Better Research

Fatimah Loren Dreier, Executive Director of the HAVI, co-authored an article published in the October 2022 edition of the journal *Nature*, "To prevent gun injury, build better research." The article points out that even as other leading causes of death have fallen in the U.S.—cancer rates by 27% from 2001-2020 and traffic fatality rates by 21% during the same period—the rate of U.S. gun deaths increased—by 24% for suicide and 48% for homicide, and in 2020, firearms became the leading cause of death for U.S. children. Despite these alarming numbers, firearm injury remains among the least researched and worst funded of the leading causes of death in the U.S., but the authors lay out a compelling case for why—and how—that needs to change.





"Given the prevalence of firearm injury and death in the United States, it is astounding that scientific understanding of the problem is so poor and that the research infrastructure and workforce are so underdeveloped. As further funding emerges, it is crucial to build a field that honors the magnitude of the problem and builds up the collaborations and innovations necessary to save lives and create a more equitable society."

"To prevent gun injury, build better research" (Nature, 2022)

Chethan Sathya, Fatimah Loren Dreier, Megan L Ranney





National Press Club Briefing

In February, the HAVI hosted a media briefing at the National Press Club in Washington, D.C. The event featured a panel of leading experts on gun violence who engaged in a powerful discussion about reimagining public safety through the creation of a new community violence intervention ecosystem. The discussion was moderated by Emefa Addo Agawu, a Washington Post writer and producer of the Post's groundbreaking editorial board project, *Reimagine* Safety, with opening remarks by Julie Rodriguez, Director of the White House Office of Intergovernmental Affairs. The panelists included Baltimore Mayor Brandon M. Scott; Fatimah Loren Dreier, Executive Director of the HAVI; Ageela Sherrills, Executive Director of the Community Based Public Safety Collective; and Greg Jackson, Executive Director of Community Justice Action Fund.

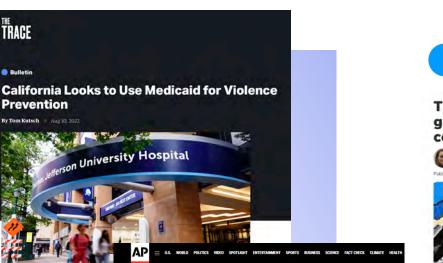


Greg Jackson, Community Justice Action Fund; Emefa Agawu, The Washington Post; Aqeela Sherrills, Community-Based Public Safety Collective; Julie Chavez Rodriguez, White House Office of Intergovernmental Affairs; Fatimah Loren Dreier, the HAVI; Baltimore Mayor Brandon M. Scott





The HAVI was featured in more than 65 news stories in 2022–including coverage by national outlets such as the Associated Press, The Chronicle of Philanthropy, Forbes, The Trace, and USA Today–for its work addressing violence as a public health emergency, elevating the voices of violence prevention professionals (VPPs), and securing Medicaid reimbursement for VPPs in several U.S. states.





The US is investing millions to stop gun deaths. Is it going to the right communities?





Here's how social media and the COVID-19 pandemic have contributed to rising gun ng a sudden rise in gun violence across the U.S. Just the FAQs, USA TODAY

Forbes

Mass shootings intensify reform

efforts at grassroots level

How Cities Have Reduced Gun Violence—And Saved Millions

Bu Nazish Dholakia, Senior Writer, Vera Institute of Justice

TRACE

Prevention



THE CHRONICLE OF PHILANTHROPY

How a Philanthropic Bet on Violence Intervention Is Winning Public **Dollars**



Terrance Henderson, a former gang member, is the coordinator of street-outreach workers sometimes called "violence interrupters" - for Chicago CRED, a violence-prevention group backed by philanthropist Laurene Powell Jobs.





Data for Progress Polling Conducted in Partnership with the HAVI

In July, the HAVI partnered with Data for Progress, a progressive think tank and polling firm, to conduct polling that assessed attitudes among likely voters toward gun violence and solutions. The findings revealed that a plurality of American voters—no matter where they sit on the political spectrum—are concerned about violence and are receptive to public health approaches to address it.

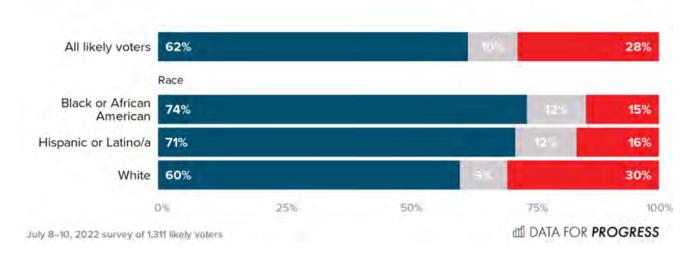
A Majority of Voters Prefer Community Intervention Over Increasing Law Enforcement to Prevent Violence

When thinking about responses to gun violence in communities, which of the following statements comes closest to your view, even if neither is completely right?

We should provide more resources to community violence intervention workers to stay in touch with victims of violence long-term and connect them to support programs like job readiness and housing.

Dan't know

We should not spend more taxpayer money on wasteful social programs and instead simply increase the presence of law enforcement, which is the best response.



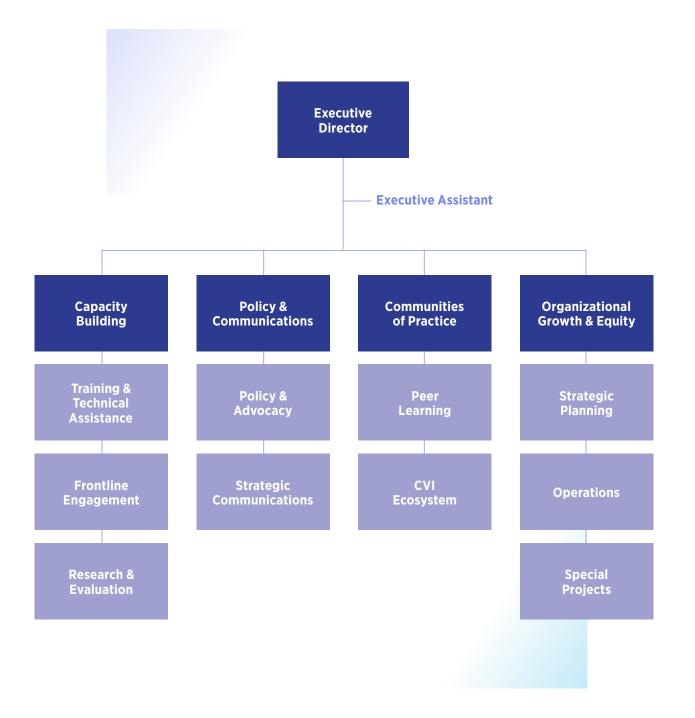




Growth of HAVI Staff

The HAVI has experienced tremendous growth over the past year, with the addition of 16 new staff and two new departments—Frontline Training and Technical Assistance and Research and Evaluation—and two new organizational divisions—Organizational Growth and Equity and Communities of Practice.

In June, the HAVI kicked off an organization-wide strategic planning process to chart the next phase for our rapidly growing organization. This included our first in-person all-staff retreat since 2020, which was held in Boston in July. During the retreat, strategic planning facilitators and HAVI leadership and staff worked together to clarify roles and define strategic opportunities to enhance our cross-organizational work and effectiveness.





Collective Care

A core tenet of the HAVI's workplace culture is the belief that the organization has a responsibility to actively promote and contribute to the wellbeing of each HAVI staff member through structures, policies, and practices. The HAVI Collective Care Committee works to operationalize this belief, and over the past year, this has included the development of a collective care framework and a survey to gather information about how staff perceive collective care at the HAVI with the goal of continuing to build and support an inclusive and equitable workplace culture.

Fatimah Loren Dreier, Executive Director, the HAVI; Steve Ridini, President & CEO, Health Resources in Action



Claudia Zavala, Senior Manager, Organizational Growth & Equity; Janene Brown, Senior Coordinator, Research & Evaluation



Tina Nappi, Managing Director, Organizational Growth & Equity; Jamie Ramola, Director, Training & Technical Assistance; Jermaine Belcher, Senior Coordinator, Policy & Advocacy





Advisory Board

The Advisory Board is comprised of a diverse group of professionals committed to furthering the work of violence prevention and intervention. In addition to their oversight responsibilities, board members support the HAVI's fundraising and resource development efforts and serve as ambassadors for the organization by championing its mission and programs.



Carnell Cooper, MD

Chief Medical Officer, Violence Intervention Program, LewisGale Medical Center Salem, VA



Brian Kern, Esq.

Attorney and Partner, Acadia Professional, LLC *Morristown. NJ*



Jerome Carter*

Digital Product Manager, Kaiser Permanente Washington, DC



Mike Levas, MD, MS

Medical Director, Project Ujima *Milwaukee, WI*



Rochelle Dicker, MD (Chair)

Vice Chair for Critical Care, Chief of Surgical Critical Care, Ronald Reagan UCLA Medical Center Los Angeles



Anne Marks (Treasurer)

Executive Director, YouthAlive! *Oakland, CA*



Thomas K. Duncan, DO, FACS, FICS

Trauma Medical Director, Ventura County Medical Center Ventura, CA



Michelle McDaniel

Program Manager, At-Risk Intervention and Mentoring

Denver CO



Joel Fein, MD, MPH

Co-Director, Children's Hospital of Philadelphia Violence Intervention Program *Philadelphia, PA*



Mike McLively, JD

Senior Staff Attorney, Giffords Law Center San Francisco, CA



Masika Gadson

Community Engagement Manager, Boston Public Schools *Boston, MA*



Selwyn Rogers Jr., MD, MPH, FACS*

Chief of Trauma and Acute Care Surgery; Founding Director, Trauma Center; Executive Vice President of Community Health Engagement; University of Chicago Medicine Chicago, IL



Thea James, MD

Vice President of Mission & Associate Chief Medical Officer, Violence Intervention Advocacy Program at Boston Medical Center Boston. MA





Advancement Council

The Advancement Council supports the HAVI's fundraising needs, including assisting with the development and implementation of fundraising strategies and helping to secure sponsorships for the HAVI's annual conference. Advancement Council members serve as ambassadors for the organization and facilitate introductions to prominent community leaders, foundations, and corporate trustees.



Brian Kern, Esq. Attorney and Partner, Acadia Professional, LLC



Carnell Cooper, MD
Chief Medical Officer, Violence
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Chethan Sathya, MDDirector, Center for Gun Violence
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Natasha D'Agrosa Senior Manager of People Positive and Global Social Impact, Starbucks



Marvin Carr, PhD
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Walmart



Lauren Collins *
Chief of Staff in the Office of the CEO,



Michael Dowling
President and CEO, Northwell Health



Michael G. Roque President and CEO, Positive Physicians Insurance Company



Tracy Ward, LCSW
National Program Lead,
Intergenerational Trauma and Healing,
Kaiser Permanente



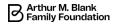
^{*} Term began in 2023

HAVI Funders

The HAVI's accomplishments and growth would not have been possible without the support of many organizations and individuals. We deeply appreciate these contributions and look forward to continuing to work together to prevent violence, support survivors, and advance racial equity in communities impacted by violence. We extend a heartfelt thank you to our individual and organizational supporters for their generosity, partnership, and commitment to our mission.

















Area Foundation

































Let's reimagine public health together.

JOIN US



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@TheHAVI



@Wearethehavi



The Health Alliance for Violence Intervention





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