



WHAT IS A HOSPITAL-BASED VIOLENCE INTERVENTION PROGRAM(HVIP)?

Hospital-based violence intervention programs (HVIPs) are multidisciplinary programs that combine the efforts of medical staff with trusted community-based partners to provide safety planning, services, and trauma-informed care to violently injured people, many of whom are boys and men of color. Engaging patients in the hospital, during their recovery, is a golden opportunity to improve lives and reduce retaliation and recidivism. Because victims of interpersonal violence are at elevated risk for re-injury and violence perpetration, reaching them during these “teachable moments” is key to a successful hospital-based intervention.

Key Components of Hospital-based Violence Intervention Programs

HVIPs identify patients at risk of repeat violent injury and link them with hospital- and community-based resources aimed at addressing underlying risk factors for violence. HVIPs alter risk trajectories by operating at multiple levels of the social ecology.



- 1. Intervention:** Begins with a brief intervention in the emergency department or at the hospital bedside
- 2. Care:** Followed by intensive, long-term community-based case management services in the months following the injury
- 3. Follow Up Services:** Crisis intervention, linkages to community-based services, mentoring, home visits, follow-up assistance, and long-term case management are provided by culturally-competent frontline workers who are from the same or similar communities as the clients they serve

4. Addressing Social Determinants of Health: HVIPs elevate the issues of the revolving door of violence while addressing inequity and building partnerships with communities and survivors of violence.



THE
HEALTH ALLIANCE
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INTERVENTION

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Importance of Violence Prevention Professionals

Many high-risk people who have suffered violent injuries are extremely distrustful of mainstream institutions like the healthcare and criminal justice systems. Using a trauma-informed approach, violence prevention professionals can often break through this distrust. These highly trained paraprofessionals, who often come from communities in which they are working, can quickly engage violently injured patients and their families in the emergency department, at the hospital bedside, or soon after discharge. After gaining trust and introducing the program, violence prevention professionals work with clients and their families to develop a plan for after their discharge that meets their immediate safety needs, provides services, and establishes goals. This form of intensive case management promotes survivors' physical and mental recovery while also improving their social and economic conditions.

