



VIOLENCE INTERVENTION AND PREVENTION INITIATIVE

After years of decline in violence in Milwaukee County, trends reversed and started to increase in 2019. They continued to increase through the pandemic in 2022. However, by 2023 and through today, both homicide and non-fatal shooting annual rates have been on the decline.

Since 2016, the Milwaukee Health Care Partnership (MHCP) triannual Community Health Needs Assessment (CHNA) has elevated violence as a significant issue in Milwaukee County. Findings from the most recent 2024 CHNA show violence as the top health issue according to primary data. 53% of all community survey respondents named gun violence and community violence as a top health issue.

Violence, in all its forms, does not discriminate. It affects people of all ages, races, genders, and socio-economic groups - inflicting schools, workplaces, recreational, and neighborhood settings. However, it does not impact all groups equally. Firearm and assaultive violence disproportionately affects communities of color and is concentrated in certain neighborhoods. Nearly 90% of all victims are Black/African American, with youth Black/African American rates being between 95%-100%.

Health care providers can play an important role in identifying, treating, and preventing violence for patients and their families. MHCP provider members have come together with the City of Milwaukee Office of Wellness and Safety, Milwaukee County, the Medical College of Wisconsin (MCW) Comprehensive Injury Center, and other sectors to support the advancement of the Milwaukee Blueprint for Peace.

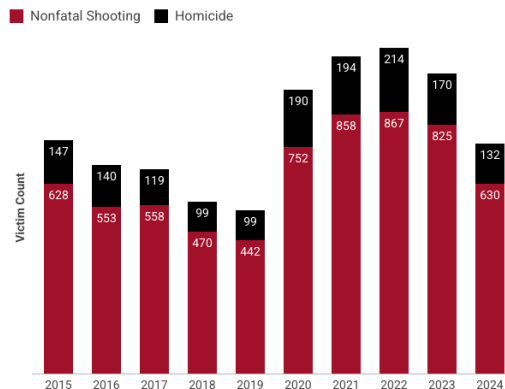
Collectively, MHCP members are working on four activities that address Blueprint for Peace goals:

- Enhance **forensic nursing assessment and supportive services** to improve treatment, advocacy, recovery, and prevent subsequent interpersonal violence incidents
- Improve and expand **hospital-based violence intervention services** to support patient victims and reduce retaliation and recidivism
- Report **patient violence incidence data via the CARDIFF model** to improve surveillance and inform community intervention strategies
- Share learning and advance collective strategies to **address and reduce violence in health care workplace settings** to protect patients and associates.

MILWAUKEE BLUEPRINT FOR PEACE

The **Milwaukee Blueprint for Peace** was established in 2016 and provides a cross-sector road map for addressing all forms of interpersonal and structural violence across the community including firearms, homicides, domestic and intimate partner violence, sexual violence, and human trafficking.

HOMICIDE AND NON-FATAL SHOOTING (NFS) VICTIM FREQUENCY BY YEAR, MILWAUKEE COUNTY, 2015-2022



Violence Response Public Health and Safety Team (VR-PHAST) 2024 Incident Report, Medical College of Wisconsin, Institute for Health and Equity.
Data Source: Milwaukee Police Department, Nonfatal Shooting and Homicide data, accessed April 2025.

“Violence prevention and intervention work is expanding in health care organizations to address this serious and escalating public health issue. By working together, we have increased our understanding of the issue and can respond on a broader scale to support victims and slow the spread.”

Reggie Moore, Director of Community Safety Policy and Engagement, MCW Comprehensive Injury Center

MHCP VIOLENCE IN HEALTH CARE FOCUS AREAS

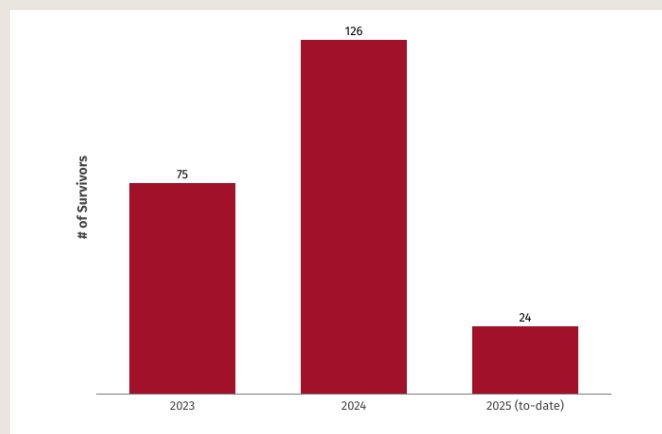
Interpersonal Violence Prevention

Shared Healing Advocate Initiative

Through collaboration with the Forensic Nurse Examiner Network (FNEN), the MHCP is working to support the expansion of interpersonal violence services across health systems and Federally Qualified Health Centers. The FNEN is comprised of health care and nurse leaders that are working to track and report interpersonal violence data, expand access to forensic nursing advocacy services in health care settings, improve the standard of practice, and inform and influence policy.

To increase access to support and advocacy services for people experiencing sexual and domestic violence, the FNEN developed and launched the **Shared Healing Advocate Initiative** in 2022 with funding from the MHCP Shared Community Investment Fund, which funds one shared and pooled advocate who serves patient survivors across all four health systems.

MHCP FNE SHARED HEALING ADVOCATE TOTAL SERVICES BY YEAR, 2023-2025



Total: 225

Hospital-based Violence Intervention Programs

414LIFE and Project Ujima

MHCP members are working to improve the coordination and expansion of existing hospital/health care-based violence intervention services. This includes, 414LIFE for youth and adults in the City of Milwaukee (Froedtert and Medical College of Wisconsin Comprehensive Injury Center) and Project Ujima for children and families with victims under age 18 in Milwaukee County (Children's Wisconsin).

2024 MHCP-Led Highlights:

- **Project Ujima:** Completed evaluation of project Ujima expansion opportunities in partnership with the HAVI
- **414LIFE:** Expanded referral pathways to include two additional hospital sites, Ascension St. Joseph's and Aurora Sinai

CARDIFF Model for Violence Prevention

CARDIFF is a comprehensive data collection and linking model that brings together information from several sectors to describe the burden of assaultive violence in a community. The model collates, links, and maps information on assaults occurring in Milwaukee and presents linked information to a community consortium to inform place-based, community-focused violence prevention activities. MHCP catalyzed and funded the initial CARDIFF data manager position to facilitate data collection, analysis, and dissemination in the first two years. MHCP continues to participate in collective efforts to improve and leverage CARDIFF data.

TARGET POPULATIONS

The MHCP violence initiative seeks to support victims of violence that present in health care settings across numerous types of violence, including:

- Victims and families of firearm violence (homicides and non-fatal shootings)
- Victims and families of assaultive violence (intentional interpersonal violence such as stabbings, domestic and intimate partner violence, physical assault, and strangulation)
- Children and youth under age 18 in Milwaukee County (Project Ujima)
- Residents age 15-35 in City of Milwaukee (414LIFE)
- Populations that are at highest risk for violence recidivism

HEALTH EQUITY

Low-income and people of color are disproportionately affected by individual, community, and structural violence in Milwaukee. Although it varies across violence types, the majority of victims are Black/African American men and women under the age of 35. The work across violence programs seeks to address health equity and reduce health disparities.

Funding

Funding for the Shared Healing Advocate and the CARDIFF data collaboration are supported by the MHCP Shared Community Investment Fund (SCIF).