HARLEM
UNITED
ANNUAL REPORT 2020

DEAR HARLEM UNITED FAMILY

2020 was a difficult year for Harlem United staff, clients, and community members. COVID-19 dramatically changed our world overnight. It took the lives of too many family and friends, leaving millions without work, and forcing us into isolation to protect our communities. This year has been a time of mourning, for those we have lost and for our way of life prior to the global pandemic. Compounding the difficulties of this time, we also had to grapple with increases in gun violence and fatal overdoses in our communities.

Amidst the confusion and fear of the pandemic, police violence against Black communities sparked protests across the country. We experienced pain and anger as millions of voices rose in protest for justice for George Floyd, Breonna Taylor, Ahmaud Arbery, Tony McDade, and countless others whose lives have been stolen by police violence. But we still have hope.

Throughout this crisis, we continued to fight for equal access to life-saving healthcare. Through our mission of compassionate care, we came together, socially distanced and in new ways, to find hope and healing. We never closed our doors, staying available to clients who needed us, despite complex state health restrictions. We remained steadfast in our resolution to provide in-person care in our clinics, supportive housing programs, prevention programs and other supportive services.

We redoubled our pursuit to serve community members most in need. We quickly pivoted to adopt new care methods through telehealth services, training our dedicated staff in new strategies for remote work. And our staff responded with integrity and grit. I have been deeply moved by the commitment and resilience that Harlem United's staff has exhibited this year. We rose to the challenge of the pandemic, recognizing that our clients and community need us more than ever. This fight still continues as, together, we move into this next phase of the COVID-19 response.

In addition, we launched voter registration events, helping register first-time voters and informing the community about their right to vote, empowering them to use their voice to advocate for themselves. We intensified our commitment to speak out on behalf of the communities we serve, to demand access to healthcare, housing, and social services without discrimination or racism. We spoke out against institutionalized racism, naming it a public health crisis, and recommitted to an advocacy agenda designed to support the needs and rights of people of color, people with low-income, people who have experienced homelessness, and people with multiple chronic conditions.

As we look to a new year, I'm proud to move forward with Harlem United, knowing now, more than ever, that we can overcome any obstacle.

Jacqui Kilmer
CEO

24K
Healthcare visits to our Community Health Centers

1077
People living in Supportive Housing and Family Shelter Programs

2770
HIV tests conducted in our Community Health Centers and Prevention Program

135K
Clean needles distributed through our Harm Reduction Syringe Exchange Program

15K
Hot meals and pantry bags distributed by our Food and Nutrition Services

COVID-19 RESPONSE

Many of Harlem United's clients are vulnerable to COVID-19 because of homelessness and underlying chronic conditions like HIV/AIDS. A recent NYS DOH study found that people living with HIV/AIDS (PLWHA) were diagnosed with COVID-19 almost one and a half times as often as the general population, and were nearly twice as likely to be hospitalized. Our communities need more care in the face of this pandemic and depend on our extra help.

Harlem United has mobilized rapidly in response to the COVID-19 crisis: adapting most of our programs to rely heavily on telehealth; continuing to treat non-COVID-19 conditions to keep other healthcare resources available to fight the pandemic; initiating a public service campaign to educate our community about COVID-19; and starting to vaccinate our staff and other eligible New Yorkers.

21K

More than 21,000 telehealth visits across the agency

At the Nest Community Health Center, we have implemented telehealth software for high-quality, secure telehealth services.

Funder guidance suspended all in-person Adult Day Health Care services. Clients have missed the sense of community the program offers. So our staff has developed recreational group activities for Zoom, including painting parties (pictured), group meals, and community check-ins.

7589

Grab-and-go meals provided by our Adult Day Health Care

Our Property Management and Facilities teams have worked tirelessly to keep our facilities clean and safe, instituting cleaning and disinfection protocols based on CDC guidance, installing sneeze guards and shields in high traffic areas, and working with our HVAC vendor to ensure that the proper filtration, air flow cycles, and HEPA filters are in place to ensure optimal air quality.

In March, the NYC Department of Health and Mental Hygiene closed all their Sexual Health Clinics, which many New Yorkers depend on for no-cost HIV and STI testing. Harlem United has pivoted quickly to engage in NYC's Community Home Test Giveaway program, providing free, confidential HIV tests that clients can administer from the safety and comfort of their own home.

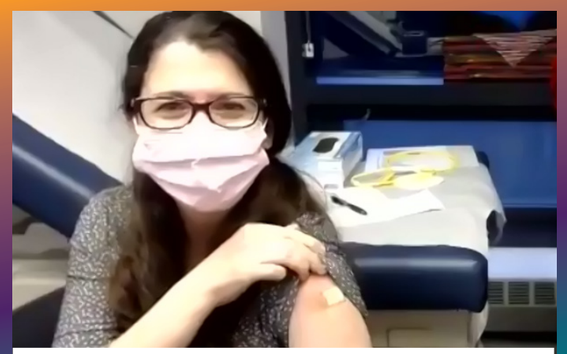
Our IT team has worked tirelessly to ensure staff are equipped to work off-site, including setting up more than 150 laptops and servers for remote services and care.

Since our Housing staff realized that our residents were experiencing increased food insecurity during the pandemic, we have provided grocery store gift cards, grab-and-go meals, and frozen food to residents in need.

100K

Personal protective equipment (PPE) items (masks, hand sanitizer, gloves, wipes) distributed to clients and community members

From the start of the pandemic through October 31, our Syringe Exchange Program distributed 89,696 safer-use supplies to our community.



In January 2021, Harlem United began offering COVID-19 vaccinations to staff and other eligible groups per NYS DOH guidelines. We hope this marks a turning point in the COVID-19 crisis, as we help protect essential workers who have been on the front lines since March.

CARING FOR EACH OTHER
Upon entering any Harlem United facility, all visitors and staff must be screened for COVID-19, including having their temperature taken as pictured

HEALTH SERVICES

Harlem United was founded in a church basement at the height of the first wave of the HIV/AIDS epidemic to provide critical care to underserved communities. So when the COVID-19 pandemic began, we knew exactly how important it was to keep providing our crucial services to those who needed us more than ever.

Our two HRSA-funded Federally Qualified Health Centers (FQHCs), The Nest Community Health Center at 169 W 133rd St. and The Willis Green Jr. Community Health Center at 123-125 W 124th St., kept their doors open during the entirety of the pandemic. We delivered primary care to low-income communities of color who were hit hard by COVID-19 and its economic repercussions.

Harlem United remains committed to offering an ever-growing array of integrated, co-located services which include primary care, behavioral health services, dentistry, substance use treatment, cardiology, podiatry, and gynecology. After temporarily reducing dental services to offer only emergency procedures, we returned to our full schedule in September.

TELEHEALTH SERVICES

The COVID-19 pandemic caused a seismic shift in every aspect of life. Overnight, simple practices that keep us healthy, like going to the doctor's office, became dangerous.

8335
Telehealth Visits

At Harlem United, we adapted quickly. We implemented telehealth services to keep our patients, who deal with chronic conditions that put them at increased risk of contracting COVID-19, safe and connected to care.

In transitioning many of our services to remote delivery, we took extensive steps to ensure that we continue to meet our high standards. We installed telehealth software for high-quality, secure telehealth services. Many of our clients did not have ready access to the necessary technology to make use of telehealth services, so we supplied prepaid cell phones and developed programs to educate clients on the new tools.

BEHAVIORAL HEALTH

Our Wellness Center provides comprehensive behavioral healthcare, including: short- and long-term individual psychotherapy; group and family psychotherapy; crisis interventions; psychological testing and evaluation; and medication management.

In response to the COVID-19 stay-at-home orders, we instituted telehealth appointments and our patients took to the new service delivery method enthusiastically.

In accordance with Harlem United's client-centered ethos, patients set their own goals for their behavioral healthcare. Our providers work to dismantle cultural stigma around mental health issues, creating an affirming environment where clients are equal partners in their own treatment.

This year, Harlem United provided 6354 behavioral health visits. Overall, we served 5858 people at our FQHCs and provided close to 13K primary care visits.

HOUSING

Safe, secure housing is foundational to building long-term health – Housing is Healthcare. That's why we take a Housing First approach, meeting clients' immediate need for shelter as an essential part of treatment and care.

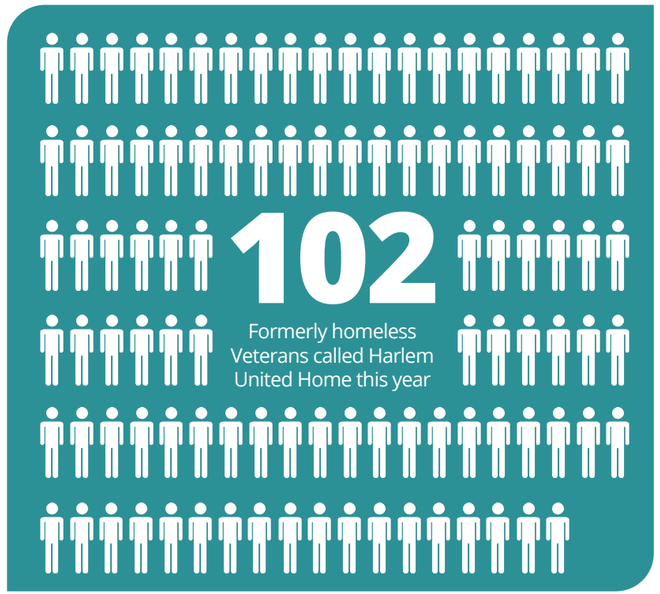
Since 1991, Harlem United has provided homes to people in need, starting by ensuring that PLWHA had food and a warm bed so that they could concentrate on staying healthy. Today, we provide transitional, permanent, and emergency shelter housing to formerly homeless populations including U.S. Veterans and PLWHA and other chronic conditions. We have 471 units of supportive housing and 72 units of emergency shelter for families which are funded by federal, state, and local governments.

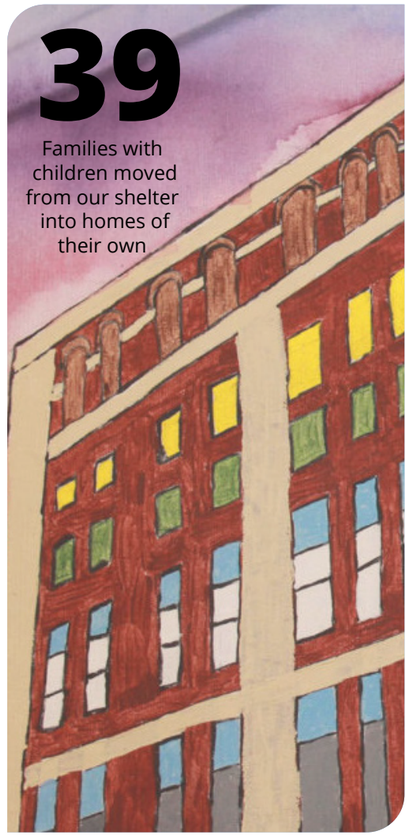
Many of our residents have long patterns of homelessness which have negatively impacted their health and made it difficult for them to secure and maintain stable housing. Without a home, clients with multiple chronic illnesses have nowhere to store food or medications so they can get stronger and be safe, creating a vicious circle of illness and poverty.

For too many of our neighbors, homelessness is chronic, and even those who enter housing programs may quickly find themselves back in shelters or on the street. At Harlem United, we support our clients to stay stably housed in our programs, with 83% of our residents remaining housed for more than a year. To build housing stability, our programs provide wrap-around supportive services like: connection to behavioral health services, primary care, and specialty treatment; substance-use support; case management; peer support groups and counseling; care coordination; and assistance applying for public benefits. Through our robust services, we help clients maintain their housing and build better health.

1077

People lived in Harlem United Housing this year





Artwork by Ellen, former resident
Read her story on page 10.

135k clean syringes distributed

3971 risk-reduction counseling sessions

458 units of Naloxone distributed

283 clients received Medication-Assisted Treatment

PREVENTION

Since 2007, Harlem United has provided life-saving services aimed at reducing infectious disease transmission in high-risk communities. We offer free safer-use supplies for people who use drugs; condom distribution; overdose prevention training; individual and group counseling; and testing for HIV, Hepatitis C (HCV), and Sexually Transmitted Infections (STIs).

Harm Reduction is a care strategy to elicit any positive change in our client's behaviors. This could be as simple as someone living with diabetes choosing more balanced meal options, or someone engaging in drug use choosing to use clean syringes.

We embrace a Harm Reduction philosophy because it works. At the time syringe exchange programs became legal in NYC in 1992, 53% of new HIV infections were among people who use injection drugs. According to a 2018 NYC DOHMH study, that number is now close to 1%.Syringe exchange programs like Harlem United's have played a critical role in preventing the spread of HIV, HCV, and other infectious diseases.

Though definitive 2020 data is not yet available, anecdotal evidence from our clients and neighbors suggests that the COVID-19 crisis has led to a rise in injection drug use and overdoses. The social isolation, eroded support networks, and additional financial strain brought on by the global pandemic are likely driving forces behind this trend.

Throughout the crisis, our testing and harm reduction staff have continued to show up for our community, recognizing that the need for our services was only growing as New York City shut down.

948
HIV Tests

372
Hepatitis C tests

256
STI tests (Syphilis, Gonorrhea, Chlamydia)

154 clients prescribed Pre-Exposure Prophylaxis (PrEP) to reduce their risk of getting HIV from sex or injection drug use

Ian, a Peer worker, awaits clients in the mobile syringe exchange van

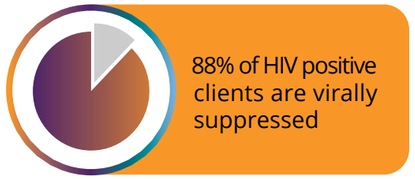
SUPPORTIVE SERVICES

ADULT DAY HEALTH CARE

Started in 1993, our Adult Day Health Care (ADHC) offers healthcare, support groups, communal meals, recreational activities,individual counseling, and more. The ADHC fosters a safe space for clients with HIV/AIDS that is non-judgmental, welcoming, and without stigma or discrimination.

On March 15th, to protect our high-risk client population from COVID-19, the ADHC shifted regular in-person services online and began providing telehealth services by order of the NYS DOH, AIDS Institute. The next day, the ADHC mobilized grab-and-go meal pick-up, recognizing that many of our clients experience food insecurity and depend on us for regular access to nutritious food.

Since March, our ADHC has provided: telehealth individual and group counseling; on-site nursing to provide medication refills and care connection for clients whose primary care providers closed due to COVID-19; and daily grab-and-go meals.



88% of HIV positive clients are virally suppressed

7589 Grab-and-go meals distributed by ADHC since the start of the COVID-19 pandemic

HEALTH HOME

Health Home offers comprehensive care management services to our clients with multiple chronic health conditions. Our client population of low-income or homeless individuals is more likely to rely solely on emergency rooms for medical care, which leads to worse health outcomes and high cost of medical care. The Health Home program's mission is to connect clients to care before they are in a state of emergency, improving their health and quality of life.

Our expert case managers assist clients in navigating convoluted medical regimens and complicated benefits applications. We work with clients to find primary care and link them to public benefits and other community programs to ensure clients successfully manage the health care system. We also offer Health Home Plus, a more intensive case management program for clients who are living with HIV and are virally unsuppressed.

Health Home's mission is particularly vital in light of the COVID-19 pandemic and the additional pressure it exerts on our healthcare system. It has never been more important to limit hospital admittances to protect vulnerable patients from being exposed to COVID-19 and conserve our healthcare resources to treat those critically ill with COVID-19.

95% of clients linked to Primary Care

84% of HIV+ clients are virally suppressed

#1 This year, our NYC Health and Hospital (HHC) Health Home team was ranked number one in the Health and Hospital's quarterly review of all agencies in their network. Our program achieved top marks in important benchmarks like annual comprehensive assessments, care plan development, monthly care plan updates, and appointment documentation.

FOOD AND NUTRITION

Since 2005, Harlem United's Food and Nutrition Services (FNS) has provided hot meals and pantry food kits to clients with HIV/AIDS. This year, our work became even more vital, as COVID-19 exacerbated the existing food insecurity crisis: According to a recent Robin Hood report, one in three New Yorkers faced food hardship before COVID-19; by October, that number had risen to 42%.

A majority of our clients experience multiple, competing chronic conditions like substance use disorder, serious mental illness, diabetes, and hypertension, all worsened by severe poverty with limited access to healthy foods. These issues make purchasing, preparing, and storing food difficult. Further, many clients are homeless. We provide healthy, nutritious food as part of a holistic care plan that builds better health by addressing the social determinants of health.

Since COVID-19 social distancing restrictions were implemented, our FNS has pivoted to exclusively grab-and-go pantry kits to ensure the safety of both clients and staff.

8670 Hot meals served

6007 Pantry bags distributed

ELLEN

Don't let her quiet demeanor fool you. Ellen is a vital community member at Harlem United's ADHC and Food and Nutrition Services: a mother figure to her peers, a talented artist, and a data entry wiz.

A mother of six and grandmother to five, Ellen came to Harlem United 16 years ago, seeking a sense of community. At the time, she was isolated, depressed and not taking her HIV medication regularly. When she started attending the day program, she was shy, wearing a hat to hide her face.

Today, all of that has changed. She receives primary care from Harlem United and takes her medication regularly to control her HIV. She receives food and nutritional services to help manage her diabetes. She loves working with our art therapist to create beautiful paintings, which are hung throughout multiple Harlem United buildings. She participates in support groups throughout the week and regularly performs in ADHC shows like the African American Heritage Month Show. The staff have won her trust and she confides in them, knowing that they will be there to listen and provide any support she needs. She's also a stipend-salaried Peer worker with Food and Nutrition Services, doing data entry to keep the program running smoothly.

PEER PROGRAM

Across Harlem United, Peers make our work in the community possible. Peers are clients who receive services from Harlem United and are members of the communities we serve. Our 85 Peers perform community outreach, syringe exchange, maintenance for our housing programs, patient navigation, food distribution, and much more.

Peers are essential to our relationship with the community. Many of our services carry significant stigma, from HIV/AIDS prevention and treatment of behavioral health issues, to services for people who use drugs. Peers help us reach past the negative biases because they are members of our client communities and can meet clients where they are. Often, clients are more comfortable speaking to others with shared life experiences, which increases the likelihood that the client will access and remain in care.

Through the Peer Program, our Peers build new skills and expertise in their service area. Peers receive training in compliance, privacy, workplace conduct and expectations, and skills specific to the program they support. In many cases, Peers have gone on to hold full-time positions at Harlem United or our partner organizations. Peers are encouraged to share their long-term goals with the staff in their assigned program so the staff can help facilitate their growth.

TRISTAN

"The smiles on the client's faces." That's what Tristan prizes most about working as a Peer at Foundation House East, one of our permanent supportive housing programs. There are few areas of Harlem United's work that Tristan hasn't experienced first-hand, and the common thread in each program is "hope."

Tristan's journey with Harlem United began with a mysterious condition and itch along his upper body. In 2013, Tristan had recently moved from Atlanta into a challenging living situation in the city. When he visited Harlem United's healthcare clinic atthe suggestion of a friend, his doctor noticed the bedbug bites on his back and immediately connected him to housing support.

After living in a shelter for a few months and attending Harlem United day programs for food assistance, Tristan moved into Harlem United housing. He says that Harlem United gave him the stability that he needed to focus on working toward the future he wanted.

Now, seven years later, Tristan is a standout Peer. He continues to receive primary and behavioral healthcare from our FQHCs. He's always eager to share his experience with the residents at Foundation House East, showing them that accepting help can be deeply transformative.

REST IN POWER

This year, due to COVID-19 and other illnesses, we lost too many beloved members of our community. We have mourned lovedones, family members, friends, neighbors, and more than a million lives lost to COVID-19 worldwide. We share several memorials to community members here.

WILHELMINA

With heavy hearts, we bid farewell to Wilhelmina Blanch, Program Director in Testing. In her more than four years at Harlem United, Wilhelmina worked tirelessly for our testing clients, making deep connections in the Harlem United community. She was a valued member of our leadership team, directly overseeing the centralized Peer program. The loss of a beloved member of the Harlem United family would have been hard to bear under any circumstances, but the suddenness of her passing has been heartbreaking for so many of us.

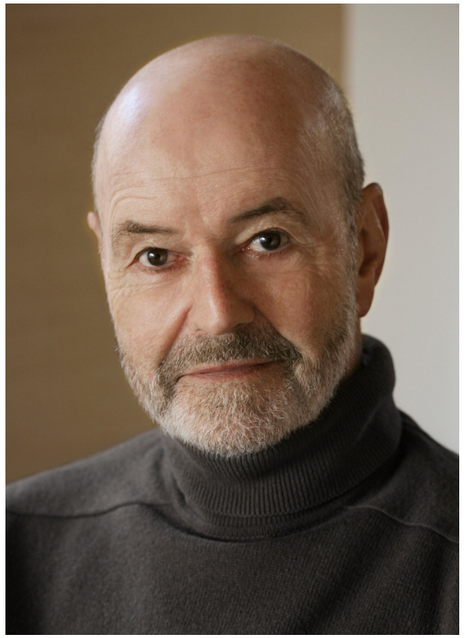
> **She had a special way of calling her colleagues and clients to be better.**

- Excerpt from Kristin Goodwin's (Managing Director of Prevention Services) words at Wilhelmina' Memorial service

H. VAN AMERINGEN

This year, we lost Henry van Ameringen, a philanthropist and LGBTQ rights advocate, whose generous contributions to Harlem United and other community-based organizations helped address health inequality across the country.

As one of our most committed funders, Mr. van Ameringen helped us bring life-saving resources to vulnerable communities in Harlem and beyond. Mr. van Ameringen spent decades supporting the LGBTQ community and fighting for human rights. Harlem United extends our love and condolences to his family, and to everyone whose life was touched by his kindness and compassion.



ADVOCACY

In 2020, the world changed, with businesses and schools shuttering their doors indefinitely while essential workers toiled to safeguard us from a virus unlike any we had ever seen before. At Harlem United, we reckoned with the disproportionate impact of COVID-19 on the communities of color that we serve, as Latino/a and Black New Yorkers faced mortality rates 2.8 times higher than non-Hispanic whites, according to the CDC. We quickly realized that COVID-19's effects on our clients underscored historical health inequities we had been fighting to change for decades; these blows were made harder as New York's vulnerable populations battled economic uncertainty, job loss, and increased homelessness.

In the midst of this collective unrest, national protests against police brutality and systemic racism called to dismantle systems of oppression that have long plagued our communities. Harlem United, in coalition with other housing, healthcare, and community groups, appealed to policy makers for investment in social services for the mentally ill and homeless, in the face of city and state budget cuts that would decimate human services nonprofits across New York, gutting social services such as HIV treatment, behavioral health, and care coordination. The Black Lives Matter movement describes much larger problems, such as inequity and access, that have long plagued Black and Brown communities.

Pivoting our response to meet the needs of our clients, Harlem United intensified existing advocacy efforts to address the issues and concerns of underserved Black and Brown communities in New York City. We shared our expertise on issues such as homelessness, the opioid crisis, food insecurity, healthcare access, mental illness, and other complex conditions with our city and state government officials to help them make more informed legislative decisions.

In 2019, we championed these causes on our social media channels and we won major victories through our coalition work including the passage of GENDA and the Reproductive Health Act. This year, we reframed our advocacy efforts to amplify the need for legislative bodies to allocate public funds to the communities that need them the most – those dealing with extreme poverty, disenfranchised communities of color, and those dealing with multiple chronic conditions.

Under our new agenda, our advocacy work spans three areas which are intersectional and must be addressed together:

Our clients living with HIV/AIDS and other chronic conditions have the right to services in a dignified environment, where their confidentiality is protected and their legal protections safeguarded. Over the last three decades, we have developed and refined our holistic model of care to address the social determinants of health for our clients. Our advocacy efforts protect that model of client-centered care and encourage the expansion of those services. Harlem United is proud to participate in the NYS End the AIDS Epidemic (EtE) initiative, working with the state and other community organizations to help New York City reach the 90-90-90 milestone last year, two years ahead of schedule.

We continue to push at the city and state levels for increased healthcare funding, advocating for comprehensive medical and behavioral health services for everyone. Better healthcare for people with low-income, safe and affordable housing for those who are homeless, more meals for those who are hungry, and increased community healthcare means a better quality of life for us all.

Communities of color are systematically deprived of high-quality, preventative healthcare and social supports by laws and provider biases that lead to worse health outcomes than their white counterparts. If Black people and white people had the same mortality rate, nearly 100,000 fewer Black people would die each year in the U.S. Not only are Black people dying at higher rates, they are being killed at higher rates as well, with African Americans about three times more likely to be killed by police than whites. Racism is a public health crisis.

PUBLIC EDUCATION & ADVOCACY

In 2020, Harlem United took a more active role in public discourses about health and social services, as befits our standing as a leader in the field. We launched a COVID-19 public education campaign in March on our digital media channels which aims to spread life-saving information about prevention strategies, raise awareness around the disproportionate impact of the COVID-19 pandemic on the communities of color we serve, and act as a thought leader in wellness and stress reduction in light of the mental health impact of the COVID-19 crisis.

This year, Harlem United launched a robust voter registration campaign. Voting is a fundamental practice in a Democracy. So, to ensure the voices of our clients are heard and to help counter long histories of racist voter suppression, we trained staff to register clients virtually, hosted in-person voter registration drives, and executed an extensive social media approach. We updated and registered new voters through community events and outreach. This is what democracy looks like.

DIVERSITY AT HARLEM UNITED

As the summer of Black Lives Matter protests against police brutality brought racism and discrimination against Black and Brown Americans to the forefront of the national conversation, we looked within our organization to ensure that we were, in fact, "walking the walk" of equitable diversity and staffing at Harlem United. Our findings are important, and prove that organizations that are reflective of their clientele can and do exist.

Our staff are overwhelmingly people of color (POC), with lived experience and personal understanding of our clients' needs for trauma-informed, culturally affirmative care. This understanding supports our ability to serve our clients, 56% of whom identify as African American, 38% as Latino/a.

WHY THIS MATTERS

Bucking the national trend in nonprofit organizations that are not racially/ethnically aligned with the communities they serve, Harlem United stands out, with POC found at all levels of governance, including frontline, leadership, senior management, and our two boards. As our pipeline to senior management and career advancement planning, almost 70% of our 37-person Leadership Team are POC, while our Executive Team is 42% POC. Diversity matters.

67%
Of 6 member Harlem United Board is POC

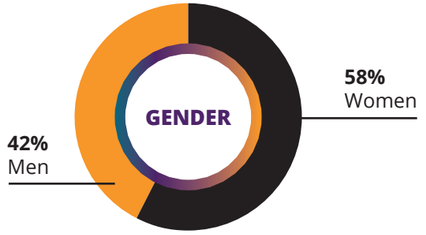
75%
Of 16 member URAM Board is POC

GENDER EQUITY AND INCLUSION

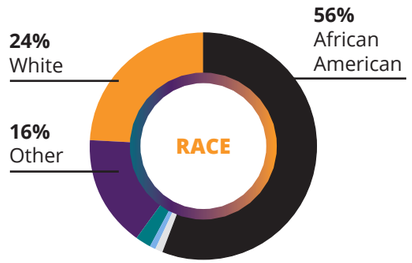
Harlem United is proud of our gender parity across the agency and within our executive leadership. In fact, 49% of our staff are women of color. According to a 2019 GuideStar Report, though the overwhelming majority of nonprofit employees are women, women CEOs run only 23% of nonprofits with a budget over $50 million. Harlem United is a proud member of that 23%, with Jacquelyn Kilmer, our first female CEO, at the helm for the last 5 years.

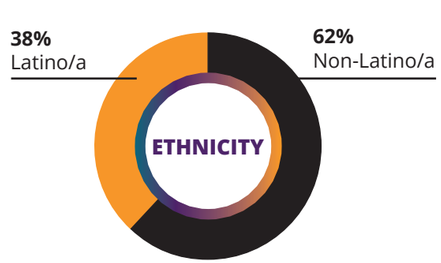
STAFF DEMOGRAPHICS

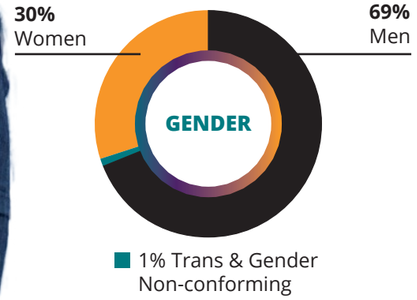
279
Staff Members

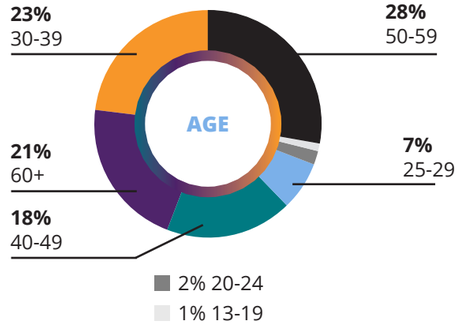


CLIENT DEMOGRAPHICS









OUR HISTORY

At Harlem United, we're proud of our history. We've been a leader in our community for more than 30 years and we continue to grow, expanding our life-changing health-care, housing, prevention, and supportive services to serve more people in need.

1988
Harlem United founded in a church basement under the name Upper Room AIDS Ministry

1991
Harlem United opens our first government-funded housing program for people living with HIV/AIDS

1993
Adult Day Health Care opens

2000
Harlem United begins providing primary care at the Willis Green Jr. Community Health Center

2003
Harlem United begins providing dental services

2004
Harlem United is one of the first organizations to offer rapid HIV testing

2007
Harlem United begins offering syringe exchange

2007
We become a Federally Qualified Health Center (FQHC)

2007
Our first permanent supportive housing building, Foundation House West, opens

2010
Harlem United begins mobile health services in neighborhoods in Upper Manhattan and the Bronx

2012
Health Home care coordination launches

2015
Harlem United opens The Nest Community Health Center, our second FQHC in Central Harlem

2016
Harlem United opens permanent housing for formerly homeless veterans

2017
We start providing emergency shelter to families with children

2019
Harlem United offers new specialties: gynecology, podiatry, and cardiology

2020-2021
In response to the COVID-19 crisis, Harlem United begins offering robust telehealth services and mobilizes for COVID-19 vaccinations for staff and eligible categories of the community

SUPPORTERS

The COVID-19 crisis eliminated funding streams and necessitated new expenses like personal protective equipment (PPE) and telehealth equipment. Our supporters rose to the challenge. In year-on-year funding comparisons, our community donated more than twice as much in 2020 individual and corporate giving than in 2019. We have been moved by the nearly 300 donors that have chosen to support our mission, especially in the midst of economic and public health crises.

A special thank you to Harlem United staff and board members who not only committed their time and energy to our mission but donated to the organization as well. This work would not be possible without your generous support!

$1,000+

Richard Fye
Marvin Griffith
Thomas Marino
Daniel McDonigle & Luis Sena
Billy Roh
Austin James Smith
David Sternlieb
Benjamin Steverman
Andrew Taumoefolau

$500+

Anonymous
Carla Briscoe
Loftin Dortch
Stuart Garrett
Paul Glimcher
Amy Holmes
Ljuban Jaksic
Steve Karas
Jacquelyn Kilmer
Vivek Kumar
Beth Levine
Pavan Makhija
Ashley Mills
Robin Moon
Bianca Reid
Armin Rosen
Nathaniel Selzer
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James Galloway
Katie Gowryluk
Sheila Healy
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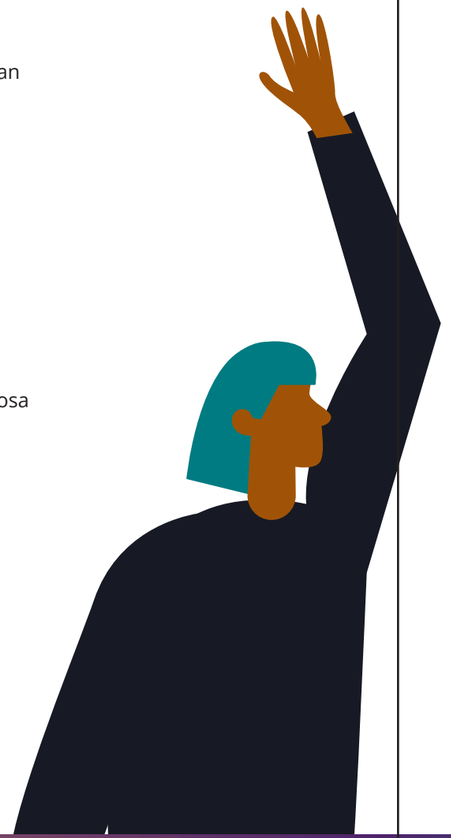
Esteban Vanegas, Jr.
Louis Waddell
Raymond Wallace, III
Joy Wendel
Tiffani Wernick
Debby Wholley
Joslyn William
Jody Yen
Kathleen Yoshida



FUNDERS

4 Voice Team
AIDS Institute
AmazonSmile Foundation
American Charities
Amida Care
The Atlantic Philanthropies
Director/Employee Designated Gift Fund
Beautiful Boy Fund
Bloomberg Philanthropies
Bright Funds
CIBC U.S.
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Postcrypt Coffeehouse
Primary Care Development Corporation
Public Health Solutions
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Siegel Family Endowment
St. Hope Leadership Academy Charter School
U.S. Department of Housing and Urban Development (HUD)
U.S. Health Resource & Service Administration (HRSA)
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IN-KIND DONORS

We have received nearly $90,000 in in-kind goods, such as PPE, food supplies, and other items that have helped us this year.

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M.A.C Cosmetics
Med Supply Drive
Amy Micallef
Project N95
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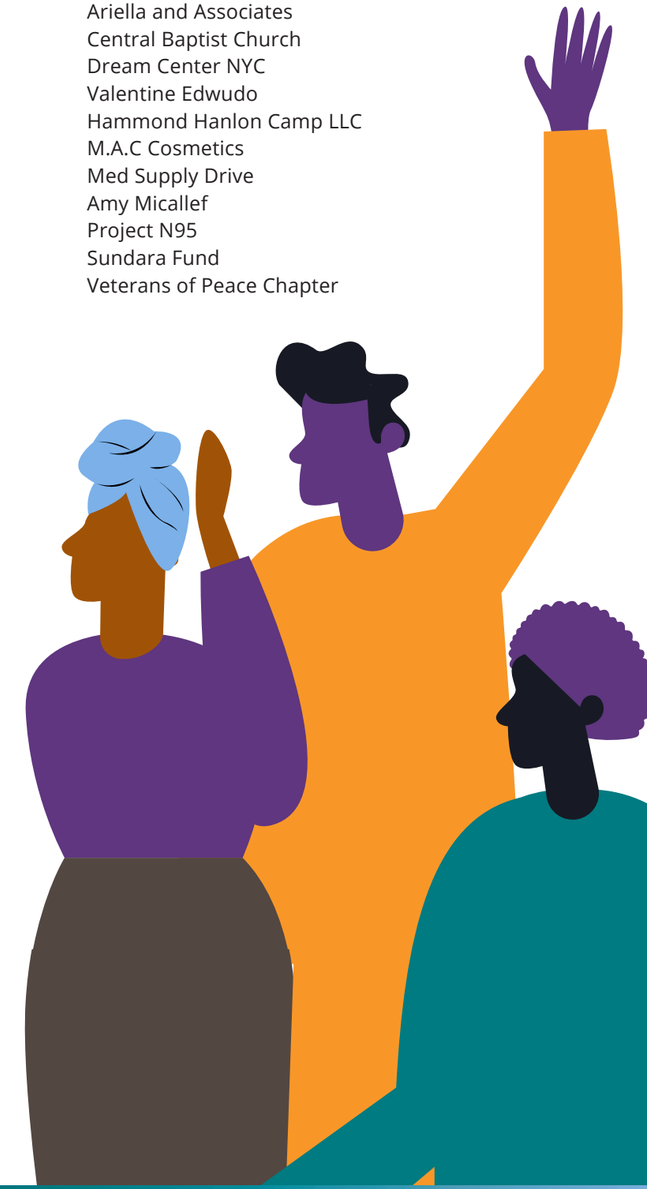
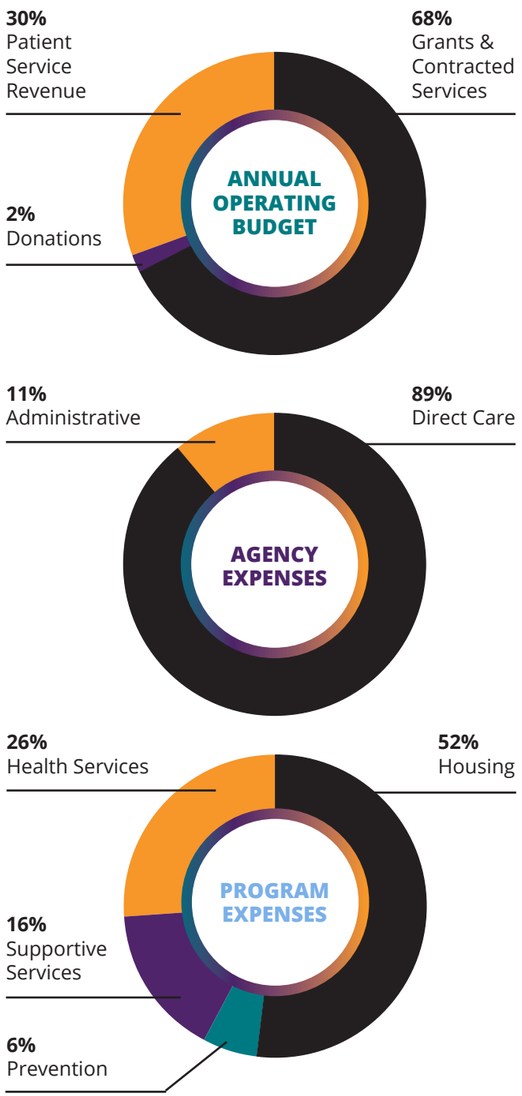


FINANCIALS

Fiscal Year 2020 - July 1, 2019 to June 30, 2020

$50,348,225

Annual Operating Budget



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URAM Executive Director
Chief External Affairs and Development Officer

THOMAS MARINO
Chief Transformation Officer

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