



December 2024

Dear Do No Harm supporter,

In April, I found myself somewhere I never expected: on Capitol Hill, just outside Congress, to help launch a first-of-its-kind piece of federal legislation to get DEI out of medical schools.

I was there at the invitation of our legislative partner, a fellow physician and Member of Congress, Rep. Greg Murphy (R-NC). We both spoke about the urgent need to save our profession from radical identity politics. That's why we collaborated to draft the EDUCATE Act, which Rep. Murphy unveiled that day. The bill would block taxpayer funding for any medical school that teaches DEI, requires belief in DEI, and has DEI offices. As Rep. Murphy and I described the bill and the need to pass it, an army of journalists took notes and recorded videos, ultimately getting our message to millions of people.

If you had told me when I founded Do No Harm that I'd be standing in the shadow of Congress, unveiling federal legislation, I would have laughed. But ever since, we've gone about the serious work of tackling divisive and discriminatory ideology in medicine. We've driven real results every step of the way.

The EDUCATE Act is far from the only proof in 2024. We've rapidly expanded and improved on every front.

- We've now filed 12 lawsuits against discriminatory scholarships and programs, successfully shutting down four and counting.
- At this time, 32 laws have passed in 26 states, getting DEI out of medical schools and putting age limits on transgender medicalization for children.

Every week, I talk with medical professionals who thank us for taking on this fight. They tell me that our work helps them speak out in their own practices and medical associations. Without Do No Harm, healthcare would appear wholly owned by the ideologues and activists. But as we've always known, dissent is widespread, and Do No Harm helps elevate and focus it – enabling true institutional and cultural change.

I'm glad to work with an incredible team to advance this vision. And I'm grateful to all our supporters for making progress possible. A cause like ours can only exist when generous Americans have the courage to fight. But we don't just want to fight. We want to win.

Oh, that legislation I helped launch in April? The EDUCATE Act helped rally support for our cause in Congress, and in September, the House passed an even more expansive piece of legislation. Our reform could become law as early as next year. We'll continue to push for it, while pushing forward across the board. We're constantly moving into new territory, but as I've learned firsthand, that's how we'll take back medicine.

In gratitude,

Stanley Goldbarb, MD CHAIRMAN, DO NO HARM

Stauley Goldfarb MD

YEAR IN REVIEW

In 2022 and 2023, we laid the groundwork for our success by spreading awareness of the dangers of Diversity, Equity, and Inclusion (DEI) and gender ideology in American medicine. We began to take action, pushing back against these radical ideas and practices.

But 2024 was our breakout year.

Do No Harm saw an explosion in activity across all our effort areas, notching more victories than we can easily list.

Due to our aggressive legal strategy, we ended racially discriminatory programs in dozens of medical schools and healthcare institutions across the country. We published illuminating research exposing the foundations of identity politics in medicine. And Do No Harm Action, our advocacy partner, helped achieve lasting policy victories against the advancement of DEI and gender ideology in multiple states.

Here are just a few of our highlights:

LEGAL VICTORIES

- Just seven weeks after Do No Harm filed a lawsuit against the American Association of University Women, it ended its discriminatory fellowship that excluded applicants' based on race.
- The Alliance for Regenerative Medicine (ARM) removed a race requirement for its GROW RegenMed Internship program after Do No Harm filed a charge with the U.S. Equal Employment Opportunity Commission.
- Do No Harm previously sued Pfizer for excluding whites and Asians from one of its fellowships, in clear violation of federal civil rights laws. Earlier this year, we petitioned a federal appeals court to rehear our case en banc after the court ruled that Do No Harm lacked standing.
- We've now sparked over 50 federal civil rights investigations!



Dr. Goldfarb with Rep. Burgess Owens (R-UT) in the U.S. Capitol.

POLICY VICTORIES



STATEHOUSE WINS

Do No Harm Action worked to pass several pieces of legislation – that have now become law – cracking down on DEI in higher education and restricting child sex change procedures. Utah enacted a law eliminating DEI offices and policies at public universities, Indiana increased university trustees' oversight over DEI policies and ended ideological screening tests for faculty, and lowa's state budget included language eliminating DEI at public universities. New Hampshire, South Carolina, and Ohio each enacted laws putting age limits on minors' access to sex change surgeries.

CAPITOL HILL

This year, Do No Harm was more engaged at the federal level than ever before. In March, Rep. Greg Murphy (R-NC) introduced the EDUCATE Act, which would defund discriminatory programs; Do No Harm was the lead partner in rolling the legislation out. And in September, the U.S. House of Representatives passed the Accreditation for College Excellence Act, preventing accrediting organizations from imposing the DEI agenda.



RESEARCH UPDATE

Do No Harm published explosive research revealing the deficiencies in medical education and exposing racially discriminatory practices.



- In Activism Instead of Anatomy: The Sorry State of Medical School Curricula, we found medical schools mention woke, politicized terminology far more often than conventional medical terms.
- Our study Skirting SCOTUS: How Medical Schools Will Continue to Practice Racially Conscious Admissions revealed the methods medical schools use to continue racially discriminating against applicants.
- We unveiled two guides exposing the systematic flaws in the studies behind so-called "gender-affirming care" and DEI in medicine.



FELLOWS AT WORK

One of our main focuses in 2024 was increasing our impact, which required expanding our team. Through this, we are building a scaffolding to achieve long-term goals and to have a lasting impact.

Our fellows are invaluable to our work and their efforts are instrumental in advancing Do No Harm's mission. In 2024, three visiting fellows and six senior fellows joined our team.

Our new visiting fellows include Larry Brooks, Dr. Michael Ready, and Paul Terdal, while our new senior fellows include Doug Richey, D.Min., Dr. Jared Ross, Dr. Kevin Jon Williams, Dr. Aida Cerundolo, Dr. Travis Morrell, and Jamie Reed, who blew the whistle on the St. Louis Children's Hospital's gender clinic.

Dr. Jared Ross has been an exemplary standard bearer for Do No Harm, promoting many of our initiatives and providing expert commentary on the challenges that face medicine today. His work to expose the antisemitic decision by the International Federation of Medical Students' Associations to suspend the Israeli medical students' association brought awareness to the issue, and prompted Do No Harm and the National Jewish Advocacy Center to put U.S. institutions on notice that we were watching for any negative impact on students at American medical schools.

Senior Fellow Dr. Travis Morrell was featured in the Washington Examiner with a piece revealing the ideological rot at the University of Colorado's medical school. Dr. Aida Cerundolo wrote an impassioned defense of our patient advocate Chloe Cole after she was maligned by the Los Angeles Times.

PATIENT ADVOCATE AND DETRANSITIONER

Enter Chloe Cole, Do No Harm's patient advocate and a detransitioner herself. Chloe first took puberty blockers when she was 13 years old, and underwent a double mastectomy at 15 years old. She knows better

developing child.

And this year, she earned more recognition than ever, appearing as a special guest of House Speaker Mike Johnson at the State of the Union in March.

While that experience alone might make anyone's year, that

wasn't enough for Chloe; less than a month later, she presented a shareholder proposal warning the Walt Disney Company that their decision to provide insurance coverage for gender transitions without also covering detransitions violated equal protection laws.

Sometimes, in the fight against gender ideology,

personal experience is the most persuasive argument

than anyone how harmful these practices are to a

against these radical ideas and practices.

Then Chloe continued her work testifying in state houses in Wyoming and Kansas to educate lawmakers on the risks gender medical interventions pose to children.

Of course, along the way, Chloe did happen to ruffle a few feathers. The Los Angeles Times published an article attempting to frame her advocacy as political opportunism and downplay the dangers of so-called "gender-affirming care." In September, the American Academy of Pediatrics kicked her and Do No Harm Parent Advocate January Littlejohn out of its annual conference without clearly providing them a reason.

These are the surest signs that her work is making a difference.

We're so proud of Chloe for all she's accomplished, and can't wait to see what she does next.



SENIOR FELLOW

DR. KEVIN JON WILLIAMS



"When my study team files our application, it won't note my West African origins. If we don't get the grant, so be it. I refuse to engage in a moral wrong in pursuit of a moral good—even one as important as saving lives from the leading killer on earth."

WSJ

It's a lot easier to fight back against identity politics in medicine when you have courageous people at your side.

We're thankful to have Dr. Kevin Jon Williams on our team.

Dr. Williams joined Do No Harm earlier this year and immediately made an impression. While a visiting fellow, Dr. Williams, who has African heritage, wrote a powerful account of his experience grappling with the NIH's racist grant application criteria. The NIH prioritizes applications from researchers of certain races, and Williams could choose to list his racial background in his application for a better shot at getting his grant.

Dr. Williams had a choice: perpetuate the DEI regime for his advantage, or take a stand against racial discrimination. He made the noble decision.

"When my study team files our application, it won't note my West African origins. If we don't get the grant, so be it. I refuse to engage in a moral wrong in pursuit of a moral good—even one as important as saving lives from the leading killer on earth."

After his op-ed, the NIH's subsequent grant posting dropped the discriminatory language and made clear race would not be a consideration.

Since then, Dr. Williams has been a stalwart defender of integrity in medicine. He recently helped expose the Temple University Health System for spending resources on voter registration when they should be focused on medical education and care.

We're all fortunate he's joined the fight.

IN MEMORIAM



DR. MARILYN SINGLETON

1947-2024

Dr. Marilyn Singleton was a trailblazer, inspiring everyone around her with her unwavering pursuit of liberty and opposition to the diversity, equity, and inclusion mandates she felt were insulting to everyone involved in the practice and education of medicine.

Her passion started at an early age. As a teenager, she protested California's Proposition 14 in 1964 that would bring back discriminatory housing practices to the state, boycotted Woolworth's segregated lunch counters, and began a relentless pursuit of knowledge.

In defiance of those who said black people couldn't attend Stanford University, she broke barriers and graduated from Stanford, then the University of California at San Francisco's medical school, laying the foundation for a storied career in medicine.

While still practicing medicine, she attended UC Berkeley Law School to gain a greater understanding of the intersection between public policy, law, and healthcare. She interned at the National Health Law Project and eventually practiced insurance and health law while maintaining her medical licenses and practice, all the while advocating tirelessly on behalf of her patients.

And as DEI mandates began to sweep the nation, Dr. Singleton adamantly refuted the false notion of "implicit bias," calling it insulting and degrading. Never one to shy away from taking a public stand, she penned numerous op-eds, sat down for countless television interviews, hosted her own podcast, co-hosted our podcast, and even sued the state of California late last year for its implicit bias training mandate for licensure.

Dr. Singleton is very much missed.

EVENTS

In February, Dr. Goldfarb, Do No Harm's Director of Research Ian Kingsbury, Senior Fellow Dr. Tabia Lee, and Visiting Fellow Jay Greene visited **Israel,** and spoke with Israeli President Isaac Herzog. They discussed Do No Harm's mission and shared information on our efforts to combat the DEI agenda.



In April, Dr. Goldfarb led a session at the **2024 Free Market Medical Association Annual Conference** called "Prescribing Change: Medical School Reform to Save American Medicine." The presentation was so popular that audience members elected to sit on the floor to hear Dr. Goldfarb speak.





Do No Harm's Beth Serio and January Littlejohn had the opportunity to exhibit at the **Moms for Liberty National Summit** in August. They shared examples of work by our senior fellows and helped spread awareness about Do No Harm's mission at a hugely influential event.

Do No Harm Year-End Report 2024



In September, at the **Association of American Physicians and Surgeons' 81st annual banquet**, Dr. Goldfarb delivered the keynote speech: "How DEI Can Be Stopped from Destroying American Medicine." The speech explained how physicians can fight back against the forces of DEI through litigation, legislation, and advocacy.

DO NO HARM GOES TO WASHINGTON



Dr. Goldfarb testified before the House Subcommittee on Education and Workforce Development in April to educate members of Congress on the dangers of DEI on college campuses.

Dr. Goldfarb gave an excellent and succinct explanation of how DEI ideology in medical education isn't just virtue signaling, but leads to real world harm through racial discrimination.

"There are many other examples of how the medical literature is being distorted in the service of Critical Race Theory and its demands that so-called antiracism be practiced to improve health care outcomes. In reality, the solution to health care disparities is not ineffective or counterproductive implicit bias training for physicians, but rather it is better health access for patients. Minority communities do not need different health care, they need more health care."



Under Governor Whitmer, Michigan, like many other states, requires all medical professionals – physicians, nurses, dentists, therapists, and more – to take so-called "implicit bias training" as a condition of license issue or renewal.

That's over 400,000 licensees in 26 healthcare professions, and is clearly an attempt to turn medical professionals into partisan activists, rather than prioritizing the health and well-being of patients.

To provide physicians with an alternative, Do No Harm launched a continuing medical education course that fulfills Michigan's mandate for implicit bias training. The course, Implicit Bias Training for Michigan Healthcare Professionals, provides "evidence-based information about implicit bias and related concepts, rather than the common ideological-driven narratives perpetuated by other educational offerings."

This was a first-in-the-nation opportunity that we seized to free American

medical workers from divisive training at the state level.

We saw immediate success: since launching on May 1, over 1,300 healthcare professionals in Michigan have taken our course!

Our efforts have helped Michigan healthcare professionals meet their licensing requirements without being subjected to identity politics.



HERE'S WHAT PARTICIPANTS THINK ABOUT THE COURSE:



"The training provided by Do No
Harm served as a needed alternative
to the training imposed by the
state of Michigan. I had completed
Michigan's training for my previous
renewal and I found that Michigan's
training was presented as gospel,
without any evidence of why it was
needed. If Michigan's training did
cite any research, it was very weak.
If Do No Harm had not provided
this alternative, I was actually
contemplating not renewing my
license."

-Mary Mulvaine

"I am so grateful for this training. It allowed me to fulfill the Michigan mandated requirement without violating my conscience, focusing on the science rather than force feeding the ideology behind the mandate."

-Stephen Messana



"I had the privilege of taking 'Implicit Bias Training for Michigan Healthcare Professionals' recently and I will say it was a refreshing take in this woke world of blame. I thank God for finding Do No Harm because it has given me hope that the medical community is not entirely hijacked by people who are more concerned about being P.C. than about caring for individuals. Thank you, Do No Harm!"

- Nicole Phillips



"I found the Do No Harm course,
'Implicit Bias Training for Michigan
Healthcare Professionals'
enlightening and professional.
Each session carefully evaluated
a basic premise which forms the
belief that implicit bias is present in
the patient-physician interaction.
Careful examination of the evidence
reveals the fallacy of each claim.
Instead of parroting these present
erroneous racial/ethnic obsessions
this course sets the record straight."

-Kenneth A. Fisher, MD



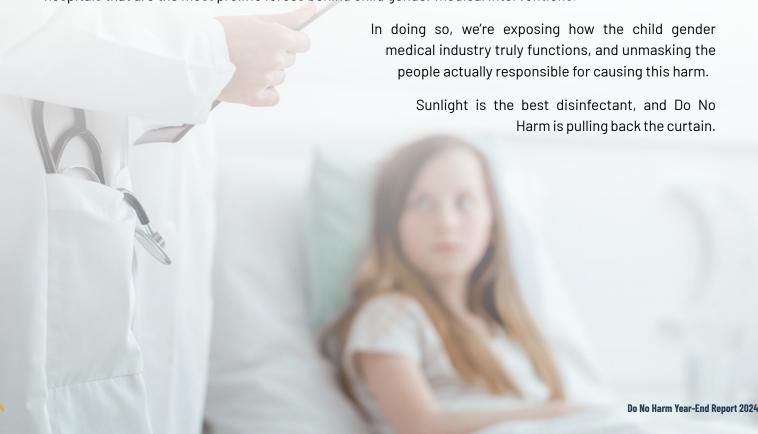
SPOTLIGHT: STOP THE HARM

In 2022 and 2023, Do No Harm worked tirelessly to spread awareness about the dangers of pediatric gender medicine. Through research, advocacy, and strategy we served as the tip of the spear in the movement to fight back against the forces behind so-called "gender-affirming care" for children.

We understood that the next step in combating these practices was to supply the public with concrete facts. Where are the procedures being performed, and who is responsible? With this information, the public can better understand just how pervasive gender ideology in medicine truly is, and encourage hospitals to do the right thing.

So, in October, we launched our most ambitious project yet: a comprehensive database of hospitals across the country that perform gender medical interventions on minors. Stop the Harm: Exposing the Child Trans Industry in America tracks which healthcare institutions are performing so-called "gender-affirming care" on our country's children and identifies which treatments – from puberty blockers to cross-sex hormones to surgeries – are being performed.

The project also shines a spotlight on those enabling these dangerous procedures. We compiled a list of the hospitals that are the most prolific forces behind child gender medical interventions.



We deployed a multi-faceted marketing and advertising campaign to publicly target the healthcare systems that are promoting – and profiting from – the medicalization of children in their care.

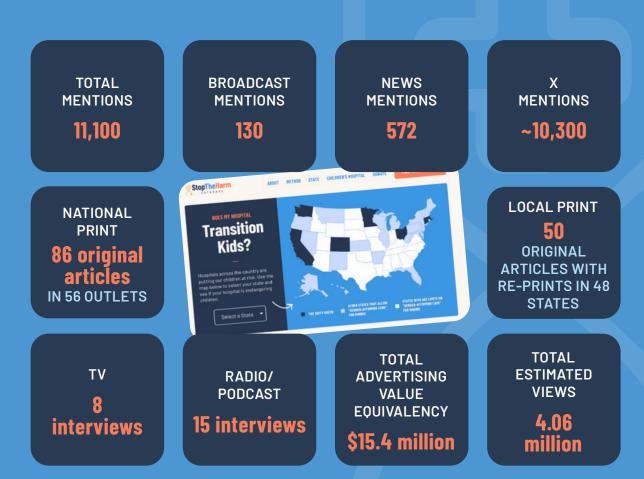
We also profiled the 12 worst-offending pediatric hospitals: these are our "Dirty Dozen." They include the Connecticut Children's Medical Center, the Children's Hospital of Philadelphia, and Children's Minnesota Specialty Center.

And we're already seeing results. Since we launched Stop the Harm, dozens of outlets have covered the initiative.

In national print outlets alone, there were 86 original articles published on Stop the Harm in 56 unique outlets. We've been featured in the Free Press, the New York Post, National Review, the Daily Wire, the Daily Caller, the Center Square, and numerous other publications!

In the local press, there were 50 original articles covering our work, with reprints reaching 48 states. Prominent social media influencers, including names like Megyn Kelly and Dr. Jordan B. Peterson, shared our work and praised us publicly, with their posts collecting millions of views.

We had over 100 broadcast mentions, and over 11,000 total mentions across news outlets and social media. **All told, that's an estimated 4 million views on our initiative.**





We accomplished a lot of great things in 2024, turning action into results and achieving tangible policy victories upon which we can continue to build. We created tools like the Stop the Harm Database that sparked a flurry of outrage and interest directed toward lasting policy change; our legal efforts have toppled discriminatory programs and practices in medical schools; and Do No Harm Action's legislative work has put in place laws that protect children from harmful medical interventions.

These successes create new, exciting opportunities for us to press our advantages and keep the momentum going in our fight against DEI and gender ideology.

In 2025, we plan to focus our efforts on creating paradigmatic change. We aren't content to rest on our laurels; we want to implement strategies that fundamentally shift the debate.

This includes litigation. Our lawsuits have been extraordinarily successful at compelling institutions to ditch their discriminatory policies, but the DEI regime is firmly entrenched. We plan to **expand our litigation**



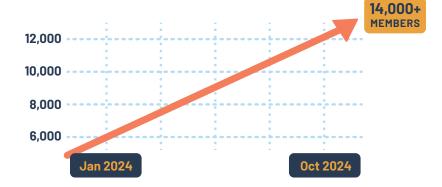
efforts to eliminate racially discriminatory practices and hold medical institutions accountable for violating federal civil rights law.

We also aim to **produce more training resources and projects**, such as the Michigan implicit bias course. These resources are incredibly valuable to healthcare professionals who practice in states that impose ideological mandates for licensing requirements. Moreover, these courses simply provide helpful education, free of identity politics, to physicians, nurses, and other medical professionals. This makes the medical field better, and improves patient care.

As our team continues to grow, we have more and more capacity to **broadcast our mission** to the medical community and the country as a whole. We plan to pound the pavement, spreading our message at medical conferences, hosting events, and expanding our platform. This will enable us to deepen our connection with the medical community that we represent and increase awareness of our mission.

MEMBERSHIP REVIEW

In 2024, Do No Harm saw a dramatic increase in membership, growing from fewer than 6,000 members at the beginning of the year to more than 14,000 as of November 1. That's over a 100% increase from 2023!



Much of our membership growth came through initiatives like our Michigan implicit bias continuing education course. This shows that the more work we do, the more we alert and attract healthcare professionals to our mission.

Here's what some of our new members have to say about why they joined:



In the media and across academic medicine, science and the English language are under attack. Genetic and biological sex are referred to as "Gender Assigned at Birth." Pregnant women must be termed "Pregnant People." Do No Harm stands for science, logic and evidence-based medicine.

- Board Certified Plastic Surgeon in New York

When the leaders of the American College of Surgeons banned me for life for objecting to their embrace of antiracism and DEI, I was totally isolated and silenced. Do No Harm gave me indispensable support and a voice with which to push back against illiberal progressive ideology in medicine.

- Plastic Surgeon in Florida



Do No Harm's support during my medical education was invaluable. They provided quick and unwavering support when I faced harassment for simply hosting open discussions on controversial topics at my medical school.

- Medical Student in Florida

MEDIA HIGHLIGHTS

Do No Harm made more than a few massive splashes in 2024.

For starters, our work was featured in over 250 articles this year alone.

We weren't just racking up the media coverage; our study with the Aristotle Foundation, "Reassigned," went viral on social media. Elon Musk even posted a summary of the study on X, with his post garnering almost 30 million views.

Then Politico profiled the work of Dr. Goldfarb – and by extension Do No Harm – in a lengthy, in-depth piece that ran in their influential Playbook newsletter. Jordan Peterson hosted Dr. Jared Ross on his podcast and explored our work and our Stop the Harm initiative.



We also expanded our own podcast, with two seasons and 22 episodes in 2024 alone!

12 LAWSUITS	550 FOIA REQUESTS	170+ OCR COMPLAINTS
50 ocr investigations	OUR IMPACT	14,000 + MEMBERS
1,140+ TIPS SUBMITTED	Do No Harm	17,000+ MEDIA MENTIONS

WHO WE ARE



Kristina Rasmussen, EXECUTIVE DIRECTOR

In 2022, Kristina helped launch Do No Harm to help stop identity politics from ruining medical education and clinical practice. She previously served as the president of the Illinois Policy Institute, the chief of staff to a governor, and as an advocate for federal government reform.



Lindsay Killen, CHIEF OPERATING OFFICER

Lindsay acts as a key member of the organization's leadership team, setting and managing executive decisions on organizational strategy, driving the development and execution of its short and long-term goals. As the nucleus for Do No Harm's operations, she brings to bear her nearly 20 years of experience in multi-state and national public policy leadership.



Scott Centorino, VICE PRESIDENT OF POLICY & PROGRAMS

Scott has worked with policymakers in more than thirty states and Washington, D.C. His previous positions include Deputy Policy Director at the Foundation for Government Accountability, Assistant Attorney General with the Louisiana Department of Justice, and Captain in the United States Army Reserve.



Laura Morgan, MSN, RN, SENIOR DIRECTOR OF PROGRAMS - ELIMINATING DELIN MEDICINE

Laura is a registered nurse with more than 40 years of experience in a variety of clinical settings. She works to advocate for merit and achievement in nursing education, professionalism in the healthcare industry, and the highest standards of individual care for patients.



Michelle Havrilla, CRNP, DIRECTOR OF PROGRAMS - PROTECTING CHILDREN FROM YOUTH GENDER IDEOLOGY

Michelle focuses on the dangers of gender ideology impacting children today. She is specifically working to expose health systems throughout the United States and their complicity in propagating unscientific and non-evidence based "gender-affirming care" to pediatric patients.



Natalie Allen, DIRECTOR OF LEGAL PROGRAMS

Natalie spent a decade passionately advocating for Americans' civil liberties in a variety of legal and policy positions. Her previous roles include communications director for Center for American Liberty and legislative communications manager at Alliance Defending Freedom.



lan Kingsbury, PhD, DIRECTOR OF RESEARCH

lan has taken the healthcare establishment to task over their lies about DEI and pediatric gender medicine. He has published several reports and his op-eds are regularly featured in leading national media outlets including The Wall Street Journal, Fox News, National Review, and the New York Post.



James Eller, DIRECTOR OF INVESTIGATIONS

James joined us after nearly a decade of experience in opposition and vulnerability research for various political campaigns and corporate clients. In addition to his work as a campaign consultant, James was a staffer on Capitol Hill, an organizer for the North Carolina GOP, and most recently assumed the role of Research Director for a 2024 Presidential campaign.

Our team more than doubled in number in 2024 with 14 new hires! We added talent across the board, expanding our capabilities in every corner of our mission.



Kelly Eustis, DIRECTOR OF MEMBER ENGAGEMENT

Kelly develops and executes outreach strategies and campaigns to cultivate new members while strengthening relationships with existing ones. Prior to joining Do No Harm, Kelly spent a decade involved in campaigns and political action committees. Most recently, Kelly was the executive director of a chamber of commerce.



Olivia McCarver, DIRECTOR OF DEVELOPMENT

Olivia brings more than a decade of experience working with nonprofit organizations to the role. She began her career in advancement at a private university, specializing in donor stewardship, development marketing, and campaign communications. More recently, she served as the philanthropy manager for a national nonprofit.



Beth Serio, EXTERNAL RELATIONS MANAGER

Beth is a registered nurse with a background in cardiac nursing. She has also been involved with nonprofit outreach work for nearly two decades. She brings a passion for grassroots organizing and community outreach, with a goal of working closely with members and partners.



Ailan Evans, MANAGING EDITOR

Ailan is the managing Editor at Do No Harm. Previously, he was the Deputy Editor at the Daily Caller News Foundation, where he oversaw long-form investigations and the development of the outlet's young reporters. He also worked as a reporter earlier in his journalism career. A native of the California Bay Area, Ailan attended the University of California, Berkeley, where he earned a Bachelor of Arts in Political Science and graduated with High Honors.



Anneliese Hughes,
SENIOR EXECUTIVE

SENIOR EXECUTIVE ASSISTANT AND EVENTS MANAGER



Jasmine Brown,
OPERATIONS

MANAGER



Philip Jenevein,

POLICY STRATEGIST



John Wesley Reid,

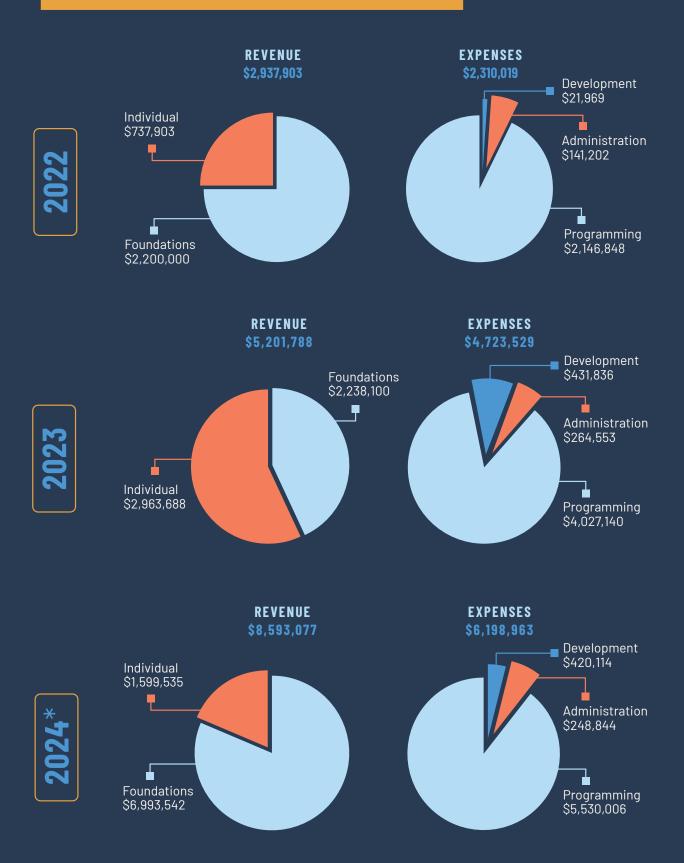
MARKETING AND COMMUNICATIONS DIRECTOR



Andrew Speth,

DEVELOPMENT STRATEGIC ADVISOR

FINANCIAL UPDATE



^{*}unaudited, through November 20, 2024



EXECUTIVE DIRECTOR

We've grown our impact dramatically in the past 12 months – more laws passed, more lawsuits won, more freedom-of-information requests, more head-turning media hits, you name it. But the biggest change has surely been to our team. We've gone from a start-up to a permanent institution.

At the start of the year, Do No Harm was small and scrappy. We've tripled in size, hiring 14 people. They specialize in the things we need to make a lasting impact. Policy development. State and federal outreach. Grassroots engagement. Aggressive comms and marketing. And we're still scrappy!

Every member of our team is defined by their courage. Many are medical professionals themselves; others have come from aligned organizations. Regardless, they've taken on the biggest and most intense fight of their lives. We also know we have momentum. Our first year was all about testing our premise – could we strike a nerve? Yes. The second year was about testing our solutions – could we actually change the system? Also yes. Now, in our third year, we're building the infrastructure that's necessary for long-term progress.

This scaling was made possible by your incredibly generous contributions. Our founding investors grew with us. New friends came into the fold. Do No Harm raised more than \$8.5 million so far in 2024, over 60 percent more than last year's recordbreaking numbers.

And yes, we know that we can leverage support to achieve success.

We envision a day when doctors can be doctors, not radical activists, and medical students can learn medicine, not hateful and harmful ideology. As we pursue this vision of medical excellence, our collaboration with state policymakers is strong and getting stronger. And while 2025 promises to be an interesting year in Washington, D.C., we've cultivated key allies to chart a path forward.

Most of all, we continue to build a movement of medical professionals and students. Shortly before I wrote this letter, I spoke with a medical student in the Midwest. He had recently confronted his state medical association for putting politics ahead of patients. He was surprised to learn that he had the support of a national organization, and by the end of the call, we'd begun drafting a plan to spur change in his state.

Three years ago, medical students and professionals thought they were fighting alone, with little hope. Now they know they have a powerful ally, and that together, we can achieve victory.

Thanks for your support.

Kristina Rasmussen

EXECUTIVE DIRECTOR, DO NO HARM

DoNoHarmMedicine.org 23

rustina Rasmussen

















