



FALL 2024

CONNECTIONS

PROVIDING WRAPAROUND SERVICES TO DIVERSE COMMUNITIES



Learn more about Mary's Center's culturally competent care and our dedicated, long-distance supporters.

A MESSAGE FROM MARY'S CENTER

Dear Friends,

With election season upon us, everyone is thinking more about the future than they usually do. People are worrying about what it might bring, hoping for specific outcomes, and trying to predict what will happen.

At Mary's Center, instead of trying to predict the future, Mary's Center is focused on helping to build it, one participant, one family, one community at a time. For over 35 years, we have been working to shape the future by focusing on what we can do in the present and by embracing our community's challenges and opportunities.

Perhaps it is human nature to fixate on one particular aspect of life or health or "success," but life is not simple. The difference between thriving and surviving is rarely a singular shift; the key to a better future does not fit diagnostic codes and reimbursable-approved services. That is why we approach care the way we do.

A future full of good health, stability, and economic independence requires attention in every part of your life. Our Social Change Model integrates healthcare, education, and social services, and allows us to offer medical, dental, and behavioral health services for the entire family, along with social services and family literacy services – all under one roof. This enables Mary's Center providers to guide participants to other services and programs with warm hand-offs. This has been our model of care for more than three decades, and we continue to innovate and build upon its success in order to meet the needs of the communities we serve.

In the pages of this newsletter, you will find stories about some of the ways we are helping our participants build better futures and how supporters and partners like you are investing in that future and our community. You will learn about the power of participants being treated by providers who speak their native language, the impact of wrap-around services on individuals and families, and a few of our supporters whose commitment to Mary's Center's unique approach is undiminished by their move out of the region.

Thank you for being an essential part of the Mary's Center community. We could not do what we do without you.

With gratitude,

Mary's Center

NAME MARY'S CENTER IN YOUR WILL

Did you know planned gifts are a great way to care for the causes that matter most to you? Including Mary's Center in your estate plan will help ensure our life-changing work for generations to come.

Naming us in your will is simple. Here is some suggested language: "I give and devise to Mary's Center, located in Washington, DC, all (or state percentage) of the rest, residue, and the remainder of my estate, both real and personal, to be used for its general support (or for the support of a specific fund)."

Interested in learning more?

**Contact Heather Morgan, Executive Vice President of Development,
at (202) 579-6198 or hmorgan@maryscenter.org.**

ENHANCING CARE THROUGH SHARED LANGUAGE & CULTURE

Dr. Gelane Workneh, Administrative Medical Director at Mary's Center's Petworth clinic, knows the power of speaking her patients' language. When she started at Mary's Center, Dr. Workneh did not speak Spanish and had to use interpreters to interact with some of her participants. Today, she can speak with them directly, using the medical Spanish she has acquired, and it has made an enormous difference. "The camaraderie changes," she notes, "and the body language."

But the places she sees the biggest impact in shared language is when she serves Mary's Center's Ethiopian participants. Dr. Workneh, herself Ethiopian, notes that many of her Ethiopian or Eritrean patients show visible signs of relief when they see her face or hear her speak that first word in their native language. "Being able to say exactly how they feel in their native, untranslatable language, is a huge benefit," she explains.

According to the Embassy of Ethiopia, the Ethiopian community in the Washington, DC area is the largest ethnic Ethiopian population outside of Africa. Many of these DC residents come to Mary's Center for care. Dr. Workneh is quick to point out that Mary's Center has been serving this community since long before she and the other Amharic-speaking providers and support staff started here. While the number of Amharic-speaking families choosing Mary's Center has increased since Dr. Workneh and other Amharic-speaking providers joined the team, Dr. Workneh is clear: the main drive for choosing Mary's Center has always been "the



Dr. Workneh provides compassionate and culturally competent care to her pediatric participants.

service [provided]. It is comprehensive and supportive to families."

Mary's Center understands the importance of offering culturally and linguistically appropriate services. That is why the organization ensures that the staff are representative of the communities served. There are 23 unique languages spoken by Mary's Center staff, including Spanish, Japanese, Hindi, Arabic, among many others. Several staff members, like Dr. Workneh, speak more than one language.

The rapport and trust Dr. Workneh and her colleagues cultivate with individuals and families means they can help their participants help themselves in ways they might not think possible. Dr. Workneh puts it this way: "A lot of times, especially for newly immigrated families, Ethiopian or otherwise, the potential to access services is there, but it is out of reach because of fear or language barriers. Being able to open that door and help people get through

it, not just 'here's the door, good luck,' but actually helping them through it, is huge."

To illustrate what she means, Dr. Workneh shares the story of a pediatric participant she saw recently. The child, whose family recently immigrated to the U.S. from Ethiopia, had a speech delay. Though there was no previous diagnosis of autism, it was clear to Dr. Workneh that an evaluation was needed. She sat with the child's mother and talked through her concerns and all the steps that were needed to get an evaluation and then access services. The process can often take years, but this mom approached the task with tenacity and resilience. Her child was diagnosed and got the services needed at optimal levels within months. When Dr. Workneh asked her how she managed, the mother told her, "It was because I could sit with you, and I trusted you."

LONG-DISTANCE DONORS KEEP MARY'S CENTER IN THEIR HEARTS

By the nature of what we do, Mary's Center is regionally based. We serve communities who reside in the neighborhoods near our clinics. But Mary's Center is also people-centered; relationships are an essential component of our success, and relationships transcend proximity. Just ask David Chalker.

David first got involved with Mary's Center over 15 years ago, both personally and professionally. David oversaw TD Bank's corporate partnership with Mary's Center, and he personally gave both time and financial support. He also utilized our excellent dental services for his dental needs.

David ran TD Bank's financial literacy workshops for Mary's Center teens. He treated his involvement as an investment, both for TD Bank and for himself: "I believe contributions have to be more than a mere season or two to be effective and consequential." In other words, David's goal was to help "Mary's Center build on its past accomplishments and current achievements." That goal did not change when he moved to Chattanooga, Tennessee in 2022, and he continues to give, now as a monthly donor. David shared, "Mary's Center's urgent needs haven't suddenly vanished because I no longer live near their operations."

David is not alone. He is one of a small army of out-of-region donors. These long-distance supporters are as close as neighboring states and as far away as California and New Mexico. Like David, these far-afeld donors know they are making a difference in real people's lives, even if they are no longer in the DC area to see it.

A handful of our long-distance supporters were there from the beginning, nurturing the work of our founder Maria Gomez, who tirelessly built Mary's Center from



Former Board Chair Virginia Apodaca, pictured with Mary's Center founder and former CEO Maria Gomez, speaks at an event held during the 1990s.

a small basement clinic to the multiple-location, wrap-around service operation with sites in DC and MD. Our "long-distance donors" send not only their financial support but their love across the miles. Maxine Rapoport in New York and Virginia Apodaca in New Mexico, are perfect examples. Both have been giving since the 1990s, and Virginia is a former chair of the board.

When asked about Mary's Center, Maxine fondly recalls

the power and warmth that characterized Maria's advocacy, as well as the sense of gratitude from the mothers and families served. "I was hooked to continue doing what I could," she explains. Maxine also remembers her very first Mary's Center gala and the necklace she still wears every summer that she bought at a silent auction, which reminds her of Mary's Center.

Similarly, Virginia tells the story of touring the Adams Morgan clinic (the only location at the time) with Maria. "When I walked into Mary's Center, I knew this was my kind of place. This was love at first sight." Under Virginia's tenure on the board, Mary's Center grew, not only in the footprint of the Adams Morgan clinic, but also in the services and programs that were offered. Virginia and Maria "bonded, like sisters," and they continue to be close today.

Maxine Rapoport lives in New York now, but she still supports Mary's Center. When asked why, she explains, "I don't believe it matters where I live to support those organizations I believe in." Virginia Apodaca retired to New Mexico, but about her financial support of Mary's Center she says, "I never left the mission of Mary's Center. It does not matter where I am. I will continue to support Mary's Center."

We are deeply grateful to all of Mary's Center's supporters, near and far, whose contributions help fund our life-changing services.

UNCOMPENSATED CARE IS AT THE HEART OF OUR PEOPLE-CENTERED APPROACH

The power of the people-centered care that Mary's Center provides does not go unnoticed. Colleagues at Medstar Georgetown University Hospital recently invited our team to present on Mary's Center's successes and methods, the Mayor's Office on Latino Affairs regularly refers constituents to Mary's Center for services; and when they see a situation they cannot address, health care providers at local hospitals and clinics call on Mary's Center.

Recently, Tara Pavao, Mary's Center's Director of Social Services, received a call from an oncologist at a local hospital. The doctor told Tara of a patient who was in the final stages of their battle with cancer, a single parent with three kids at home between the ages of 9 and 17. Their closest relative, who lived in Virginia, was doing the best they could for the children. But because this relative worked two jobs and shared a one-bedroom apartment with multiple people, their time and space were limited. The oncologist was worried about the patient's children. There was little the doctor could do to help them, so they called Mary's Center.

Tara got the Mary's Center team on the case. They helped sort things out with the landlord who had been threatening eviction. They placed all three kids into educational and emotional support programs at Mary's Center. They found legal help (with community partnerships) for the relative, to help them secure legal guardianship while the ill parent was still living.

All these children's needs were served with uncompensated programs. There is no Medicaid diagnostic code for the help Mary's Center provided to those children. But providing what is needed, far beyond what is reimbursable, is how we do what we do.

From our Bilingual Health Access Program to ensuring every pregnant participant has an obstetric care coordinator assigned to them, to helping facilitate conversations with landlords, Mary's Center is making a real difference in the Social Drivers of Health.

That difference is only possible because of philanthropic support from our community. Though we are a Federally Qualified Health Center (FQHC), the outcomes we achieve could not happen only on Medicaid and other insurance reimbursements. In fact, patient revenue makes up only approximately 50% of our overall revenue. The remainder must be raised through other revenue sources including grants, individual contributions, and institutional giving.

Ultimately, it's about the impact Mary's Center has on our participants and on our community. Tara Pavao is unequivocal on what makes that possible: "The best outcomes are the result of Mary's Center's wraparound services, which are often uncompensated and non-reimbursable". Tara adds, "It's the heart of what we do."

We are deeply grateful to donors like you, whose support enables Mary's Center to provide comprehensive wraparound services and maintain a holistic approach to care.

Please consider renewing your support, to help fund the uncompensated care we provide to thousands of individuals across the DC region. Donate by scanning the QR code below or using the enclosed envelope to send a donation via snail mail.

We thank you for your support!





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CONNECTIONS

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SUPPORT MARY'S CENTER'S THANKSGIVING DRIVE

It may only be September, but the Thanksgiving holiday will be here before you know it. Each year, we collect and distribute over 400 meal-kits to Mary's Center families that need assistance in preparing a Thanksgiving dinner. Please consider supporting the Thanksgiving Food Drive by purchasing food items from our meal-kit wishlist.

Scan the QR code to access the wishlist or visit

www.maryscenter.org/holidaydrives.



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