Celebrating Solutions Award
Nomination Form

Legal name of organization Ramona’s Way Year established 2002

Program nominated for award (if different) Counseling & Case Management Year established 2002

Address 1025 Connecticut Avenue, N.W., Suite 1000

City/State/ZIP code Washington, D.C. 20036

Contact person Ali-Sha Alleman, MSW

Title Executive Director/Founder

Phone number (202) 257 - 6790 Fax number (202) 857 - 9799

E-mail address info@ramonasway.org

Website address www.ramonasway.org

Brief description of the nominated program:
Ramona’s Way (RW) is an organization whose mission is to assist chemically dependent battered women in regaining control of their lives, and empower them with the information and support they need throughout the trauma and recovery process. Since the organization’s inception, its mission has been focused on providing holistic services that address the mind, body, and spirit for women who abuse substances and are also survivors of emotional, physical, and/or sexual abuse.

Geographical area served Washington, D.C.

Is organization tax-exempt under IRS 501 (c)(3) guidelines? yes √ no

If no, is your organization a public agency/unit of government? yes √ no

Signature of contact person

Date September 10, 2006
1. Describe the overall mission of your organization in five sentences or less.

The mission of Ramona’s Way is to assist chemically dependent battered women in regaining control of their lives, and empower them with information and support they need throughout the trauma and recovery process. This is done with four main objectives in mind: increase awareness and understanding of the interrelationship of domestic violence and chemical dependency, decrease feelings of isolation in chemically dependent battered women, increase safety for women and their children in chemically and physically abusive situations, and increase access to substance abuse services for battered women with children.

2. Describe the most innovative aspects of the program you are nominating.

The most innovative aspects of Ramona’s Way are:
- We have a dual focus of substance abuse and domestic violence since program’s inception;
- We work with women who are actively using;
- We accept only self-referred women;
- We offer refreshments to women during intake;
- We encourage women’s self-determination by using individualized plans;
- We allow women to determine their own path of treatment and recovery;
- We allow clients to access services as long as they are needed;
- We offer free counseling services three to four times a week, in-person and by phone, and;
- We help women identify initial steps in addressing safety and sobriety needs simultaneously.

Founded by a childhood survivor of domestic violence, whose mother is a battered woman with ten years recovery, Ramona’s Way identifies as a women centered domestic violence and substance abuse program. Our support systems offer encouragement to the chemically dependent battered women through the change process as they emerge from victim to survivor. Clients are kept at the center of our work to assure that they are not lost. They assist with outreach, encouraging women who they know are eligible for services to come and get the support they need. Their feedback is solicited as it influences staffing and programming direction. In fact, until recently, we had a former client serving on our Board of Directors. Unfortunately, she left due to health reasons.

Moreover, our program is designed to meet the psychological, emotional, physical and practical needs of survivors through counseling & case management, out-patient mental health referrals, advocacy, support services and other relevant referrals. Specific to our support services are:
emergency food, prepaid phone cards, utility and rental assistance, paid urine tests, safety and sobriety planning, and transportation to court and treatment facilities. Offering these services is crucial to our target areas, in that, nearly all of our clients are low income and are unable to access these services through other mediums. By making these services readily available and rectifying some of the challenges that clients would normally have to experience alone, this program hastens progress toward recovery and, in certain cases, prevents repeated occurrences of victimization.

Further details concerning Ramona’s Way’s services and their implementation are as follows:

Information & Referral – Screens clients for substance abuse and domestic violence, assesses their risk factors and links them to vital resources in the community. Ramona’s Way receives approximately 200 referrals annually.

Support Group – Creates peer support and community celebration. In an intimate setting, we recognize personal achievements and holidays. For the December 2005 holiday season, Ramona’s Way partnered with students of the University of the District Columbia to give gifts of toys and personal care items to the women and children served by Ramona’s Way.

Counseling - Offers emotional support, sobriety planning, and strategies of escape. Clients are able to access the counseling support in-person or by phone. Our crisis line enables clients to contact us outside regular business hours. The average client served by Ramona’s Way receives three to four counselor contacts a week. Counseling sessions cover safety-related strategies that reduce the risk of danger to victims under the influence of drugs and alcohol. Educational materials informing chemically dependent battered women of power and control tactics, used specifically for women’s substance use, are also provided.

Case Management - Advocates for chemically dependent battered women, and helps them navigate the social service delivery system, thereby increasing their access to emergency treatment and housing facilities. By offering services, such as educating about eligibility requirements for transitional and emergency housing, paying for urine tests and escorting them to treatment facilities, we find that our clients become more motivated and better equipped to work with the complexity of the District’s social service system. Fifty percent of Ramona’s Way clients transition to stable living situations.

Through case management and advocacy, each client develops an individualized plan with self-defined goals and objectives. By encouraging clients to define their needs, they are more likely to engage in the healing process. Case management facilitates the linkage of clients to appropriate resources and counseling addresses the trauma that is at the root cause of the substance use. Women are educated on alternative ways to soothe their souls and spirit so they may be able to overcome the obstacles that make leaving abusive relationships difficult.

Community Education Workshops – Offer training to social service providers and other professionals receive training about domestic violence and substance abuse for a sliding scale fee so they may improve their service delivery to battered women struggling with substance abuse issues.

3. Describe your program’s implementation.

Ramona’s Way works collaboratively with D.C. Superior Court and other nonprofit organizations. Most chemically dependent battered women have sought legal remedies to flee abusive relationships. However, the majority of Ramona’s Way’s clients have not identified
substance abuse as playing a role in their compromised safety. During our initial intake process, we work with victims of domestic violence to determine the next steps to increase safety and sobriety in their lives through basic client education and appropriate referrals. Upon conclusion of the intake process, women decide if they would like to continue with our counseling & case management services. If so, they are contacted three to four times a week, by a Certified Addictions Counselor or Social Worker, with consistent information on safety planning strategies, boundary setting, relaxation techniques, relapse prevention and substance abuse power and control tactics.

**What barriers did your organization have to overcome?**

Since the organization is relatively young (four years old), many of the barriers it encountered were related to start-up: securing space and funding, staffing, and publicity of services to the community. Space has had the greatest impact on Ramona’s Way’s operations. At the Domestic Violence Intake Center Southeast Satellite (DVICSE) in Washington, D.C., where Ramona’s Way currently provides services on a part-time basis, we share a common area with another nonprofit organization. This has limited our ability to secure confidentiality for the clients.

In 2005, we received 200 referrals out of 856 cases that came to the DVICSE. However, there are many others who do not want to go through the judicial system to reach us. The court’s day time hours, has limited us in being able to meet with women in the evening hours. While our services have been primarily located in Wards 7 and 8, Ramona’s Way has received requests to address cases reported throughout other Wards within the District. Thus, with increasing citywide referrals, it has become evident that the scope and availability of our services needs to be increased to meet this growing demand for domestic violence assistance for chemically dependent women. Accordingly, in September 2006 we had to establish a second location to meet the need of the clients and be accessible five days a week.

Yet, a greater challenge, despite the various services available to domestic violence victims, is that serious gaps exist for chemically dependent battered women. Lack of shelter and treatment beds have become on-going obstacles for the organization to endure. Currently, in Washington, D.C. there are only 48 beds that provide a safe haven for domestic violence victims. In addition, battered women with substance abuse problems in the D.C. community need at least one month’s documented sobriety before they are able to access safe and confidential shelter for themselves and their children. Moreover, detoxification programs that are unable to accommodate children leave battered women stuck choosing between their family’s safety and their own sobriety. Waiting lists, referrals, and submitting urine tests make the system so complex that it can be mystifying and daunting for a woman with children fleeing a dangerous situation to get help. Fearful of losing their children, women are hesitant to talk freely with an organization that shares physical space with the court. It is difficult to seek treatment if the fate of their children is uncertain.

**How did you marshal the necessary resources for implementation?**

Ramona’s Way began implementing its program with a grassroots approach, reaching out to churches and other service providers to lend support. The initial staffing was volunteer-based, including the Founder/Executive Director, and space was donated in-kind. Individual donors provided initial funding support. In addition, we implemented the following strategies:

- Leveraged resources through collaboration with government agencies and other domestic violence organizations;
- Surveyed other service providers to identify gaps in services to offer the best continuum of care to clients; and
• Reached out to the academic community to assist us with staffing needs, while teaching the next generation of social workers and domestic violence advocates.

4. How do you know your program works? Please cite two examples.

A basic assessment is administered to clients upon initial intake to determine their baseline, this is conducted again every six contacts. Self-reported indicators of improved quality of life, strengthened family relationships, avoidance of drug using family and friends, and absence of violence and drugs at home are evaluated. Contact with program participants between program staff through phone calls and in person visits gathers the pertinent information. Client information is also verified by Crime Victims Compensation which we work closely with, in addition to other service providers that may interact with the client. In addition, to evaluate the overall impact of the program and not just client progress, a quarterly survey is distributed to clients for completion. As a result of our efforts to create a client-centered program, we have successfully assisted 650 chemically dependent battered women in regaining control of their lives by offering crisis counseling & case management, advocacy, and other supportive services.

One of our success stories is Renee*, who was residing in a domestic violence shelter while her two children resided with their father. The client was abusing crack cocaine and alcohol and her shelter stay was in jeopardy. She had an extensive history of trauma that was linked to the use of alcohol at the age of 14, after surviving a rape. Attending Ramona’s Way’s counseling & case management program encouraged her to stop using crack cocaine and alcohol, move to a transitional housing program, and regain custody of her children. As part of her healing journey, she was even able to establish a new healthy relationship. Renee now works as a cook at a local restaurant and has her own apartment. She demonstrates the lasting impact of our counseling & case management program that makes the connection between domestic violence and substance abuse essential.

*Name changed to protect client confidentiality.

5. Who are your key partners? What are their roles?

Domestic Violence Intake Center - Ramona’s Way has been committed to maintaining our collaboration at the Greater Southeast Domestic Violence Intake Center since October 2002. This community partnership consists of the Office of Attorney General, D.C. Coalition Against Violence, Office of the United States Attorney, Metropolitan Police Department, D.C. Superior Court, Crime Victim Compensation Program, Legal Aid Society, Child Protection Service Center, and Women Empowered Against Violence (WEAVE). This partnership enables us to continue to offer the comprehensive wrap-around services that are beneficial to our clients. Finally, the commitment of ongoing in-kind contribution of space by the D.C. Superior Court ensures Ramona’s Way’s ability to continue these necessary counseling services to the underserved African American women of Wards 6, 7 and 8.

East of the River Clergy-Police-Community Partnership - Since May 1, 2006, Ramona’s Way has been part of an exciting collaboration with the East of the River Clergy-Police-Community Partnership (ERCPCP), reaching out to underserved communities, such as Woodland Terrace located in Ward 8. We have been conducting outreach and providing counseling support to low income African American women who are struggling with substance abuse and domestic violence. What makes this partnership so remarkable is the pooling of resources to maximize the efficiency of and accessibility to services for the community. It is such a natural fit since ERCPCP provides engaging youth activities and Ramona’s Way supports the mothers, with the ultimate goal of creating safe alternatives for the women and children. This high crime
neighborhood, identified as a Mayor’s “hot spot”, makes this work all the more crucial as these women are least likely to access our services at the Southeast Domestic Violence Intake Center.

University of District of Columbia - Since June 2004, the University of The District of Columbia has been instrumental in the success of our program. By providing quality Social Work students and Criminal Justice interns, we have been able serve a greater amount of chemically dependent battered women. With a staff of only two employees, the University has helped us do a lot with a little.

Other community partners:
D.C. Comedy Central - Conducts team building exercises with the Board.
Georgetown University Medical School - Provides first-year medical students to educate clients about health issues.
Howard University - Provides graduate social work interns to assist with the Counseling & Case Management program.
The Polaris Project - Refers their sex trafficking victims who struggle with substance abuse to Ramona’s Way for counseling support.

6. Could/should your program be replicated in other areas of the country? How and why?

Yes. Our program can and should be replicated nationally for a number of reasons.

First, Ramona’s Way meets the bridges the gap in the support services for chemically dependent battered women. Nationally, there are limited programs addressing these dual issues. Locally, we are the only secular organization that is solely dedicated to meeting the specialized needs of this population. Ramona’s Way believes women should not have to choose between safety and sobriety. Addressing the domestic violence and drug use in the home is unique to domestic violence intervention services within the District. Research shows a history of abuse is the greatest predictor of substance use and the major cause of relapse in women. Over 50% of DVICSE clients seeking a temporary restraining order report the occurrence of drugs and alcohol in their intimate relationships. To respond to this outcry, Ramona’s Way uses a systematic assessment that screens for domestic violence, substance abuse, and health concerns. Also, we identify the motivations and commitment level of clients to the process. The model we use is client-centered, meeting women where they are in order to create change within their lives.

Second, Ramona’s Way vision of organizational growth encompasses chemically dependent battered women being able to immediately flee abuse and gain access to sanctuary for themselves and their children. Currently filling a gap in available domestic violence services, we propose to establish a comprehensive one-stop shop model that offers counseling, education, advocacy, children’s programs, detoxification, alternative therapies, and safe and confidential shelter. At present, Ramona’s Way is exploring establishing a transitional housing program for our clients which implements our model framework on a residential level.
1. **What are other sources of referral?**

Client self referral and word of mouth are key elements in how Ramona’s Way obtains clients. However, Ramona’s Way receives referrals from the Domestic Violence Intake Center, a comprehensive one-stop facility where we provide services on a part-time basis. It is a partnership between private domestic violence organizations and governmental agencies. Referrals also come from the Metropolitan Police Department Victim Service Center and the Crime Victims Compensation program. Partnerships with other community based organizations like the East of the River Police Clergy Collaborative bring additional referrals. They provide supportive services to at risk youth and we provide supportive services to their mothers who are dealing with domestic violence and substance abuse.

2. **Could you give more information in very specific area, was there resistance to the idea that women who are victims of intimate partner violence need to be screened and then treated if needed for substance abuse? If so, how did you address that?**

When Ramona’s Way first provided services to the community in 2002, we conducted a needs assessment of the community and met with various stakeholders to determine if there was a need for our services. We received approval from leaders in the domestic violence community and in the substance abuse community. However, there was resistance with acceptance of chemically dependent battered women into shelter until they had at least six months sobriety. We consistently addressed this issue with shelter leaders and some local officials at community based meetings. We even attempted tracking requests for shelter by chemically dependent battered women. We are pleased that our local district government funder recently allocated funds for “battered women dealing with multiple barriers” which includes battered women with substance issues. Due to our advocacy a new low barrier domestic violence shelter is being established in DC that will accept women with a history of substance abuse without a waiting period. Ramona’s Way will be part of the advisory board and help with establishing some of the shelter policies. A memorandum of understanding will be created to facilitate an ongoing referral process that addresses the needs of the women we serve. We have found that service providers are hesitant to ask questions about substance abuse, and women do not feel safe disclosing they need help with substance abuse considering it is treated as a criminal justice issue instead of a health issue. Providers have also expressed feeling uncomfortable engaging in the conversation about substance abuse with domestic violence survivors, not feeling as though they even have time to address this issue. Ramona’s Way addresses this gap by providing support to the domestic violence community around how to start the conversation. We are also working with another local domestic violence provider to develop trainings for their domestic violence advocates.
2. Could you provide descriptive information on these measures at baseline and six months? During intake all clients receive a comprehensive assessment. The three main categories reviewed with clients are quality of life issues, substance abuse and domestic violence history.

Quality of Life Issues -Baseline
Ramona’s Way defines quality of life as: Strengthened family relationships, avoidance of drug use among friends or family and absence of violence and drugs in the home. Here are the trends we frequently observe during baseline:

Frequently, clients report during assessment that they do not have any family because of their drug use or they were abandoned because of the violent relationship. Other times client will be residing in a home environment that has other active substance abusers living there. This of course puts them at risk for violence if they do not want to engage in using behavior.

Quality of Life Issues - Six Months later
Ramona’s Way works with our clients to identify ways to reconnect with family members that may be able to offer healthy support for the client. Usually, those who have family members that are able to resurrect a relationship, it will occur at this time. For clients that have been in unhealthy environments with drugs and alcohol our time is spent helping clients to find other supportive environments they can stay at. This may even be a girlfriend or lost relative. Part of this relocation is helping clients brainstorm and role play how to reconnect with these individuals. Once we have accomplished relocating them to a more supportive environment, the risk for violence has substantially decreased.

Substance Abuse-Baseline
Clients are assessed for their substance abuse history, 99% of our clients are active substance abusers, and their drug of choice is usually crack cocaine, marijuana or alcohol. They are engaged in daily use and may have had some treatment experience in the past. Most of our clients come us in a pre-contemplation stage to making changes towards drug treatment.

Substance Abuse-Six Months later
Clients involved with Ramona’s Way for six months begin to discuss treatment options and what works them. If they expressed interest earlier at intake this is the time they begin to take actions steps toward their goals. Action steps entail getting police clearances, planning for life adjustments and contacting treatment facilities.

Domestic Violence-Baseline:
Many clients come to us with safety as their main priority. At assessment our counselor usually determines that the woman has an extensive trauma history. The
woman is usually still in the abusive home, they are unaware of all their options and they have not obtained a retained a restraining order.

**Domestic Violence-Six months later:**
After six months clients have been completely informed of all their options. Clients at this stage have usually obtained Civil Protection Orders that last one year. They have found a safer living environment by either relocating or using the restraining order to remove the abuser. Clients also begin to demonstrate a deeper understanding of power & control tactics that have been evident in their relationships. They use this new information to reevaluate future relationships.

As an example of the difference between Baseline and Six Months from November 2005 to November 2006, Ramona’s Way tracked a small sample of our clients 14 women with children.

<table>
<thead>
<tr>
<th>Baseline</th>
<th>Six months</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 w/violence occurring in the home</td>
<td>14 obtained CPO</td>
</tr>
<tr>
<td>14 interacting w/ drug using friends/family</td>
<td>10 decreased interaction</td>
</tr>
<tr>
<td>14 alcohol/drugs in home</td>
<td>9 decreased drugs in home</td>
</tr>
<tr>
<td>14 unstable living environment</td>
<td>10 stable living environment</td>
</tr>
<tr>
<td></td>
<td>2 treatment facilities</td>
</tr>
<tr>
<td></td>
<td>2 domestic violence shelters</td>
</tr>
<tr>
<td></td>
<td>3 permanent housing</td>
</tr>
<tr>
<td></td>
<td>3 Stay with family</td>
</tr>
</tbody>
</table>

4. **What steps does the program take to support women’s access to safe detoxification if needed?** Ramona’s Way has established an ongoing relationship with our local treatment facilities, at every program we connect women with we have a regular point of contact. Ramona’s Way clients are assisted with all the admission information she needs and have transportation assistance with staff accompaniment when necessary. After the referral process, there is follow-up with the facility to check on the final status of the client and offer any additional assistance if there are any complications in the process. Ramona’s Way takes such care with every client that decides to pursue this route, because often it is difficult for clients to return to treatment at a future date either for safety reasons or because of lack of emotional support.

5. **What steps does the program take to ensure women’s safety when contacting them at home?** Clients are asked at intake for a safe number to reach them, in addition to other contact numbers. When staff contacts a woman they only use their first name without the name of the organization. When Ramona’s Way contacts a client our telephone system is set-up not to display the organization’s number. Clients either have government or private displayed on their caller-ID.
6. **What actions does the program take to support women’s access to ongoing mental health and psychiatric services if these will benefit and support an individual in their healing?** Ramona’s Way has a drop-in therapy group that is co-facilitated by an Addictions Counselor and Licensed Clinical Social Worker. Here is the first place a client can receive free therapeutic services to address mental health needs. Clients who need additional mental health support are referred to one of our community partners, Community Connection, they are able to provide that level of support. At this program clients are able to access a psychiatrist. A release of information is signed by the client so we maintain an ongoing relationship with the client and the other provider. We ask all clients about current medications and health history, usually, clients identified for mental health services have self-disclosed this information during assessment. At least 50% of Ramona’s Way’s clients have mental health issues such as being bipolar or schizophrenic.

7. **How do you screen potential clients to make sure that they are serving Domestic Violence victims?** If a client is referred by the Domestic Violence Intake Center or one of our domestic violence community partners then we immediately know that they are eligible for services. All other clients are asked during assessment what services are they are seeking and how they became familiar with Ramona’s Way. Through listening to the client’s story, a counselor is listening for indicators of abuse such as power and control issues, isolation and economic abuse. If any of the tactics of the power and control wheel are identified then we know that the client is in fact a domestic violence victim. Both a history of domestic violence and substance abuse are eligibility requirements for Ramona’s Way.

8. **What is the average length of time that a client accesses services?** Most clients work with us at least a year. During this time, we are able to get women emotionally stable, help them establish a safe place to live, and begin to plan for longer term options. Clients have continued to work with us for two-three years. For these clients they are struggling with the addiction process which often entails relapse and can be a lengthy path for clients to undertake, for others they are working on more permanent goals such as maintaining their own housing, securing employment or entering into new intimate relationships. Ongoing support is needed during this time, at Ramona’s Way even if you made progress you are welcomed back.

9. **What does it mean that clients are self-referred?** Self referred means that the client has been informed of our services and they have actively requested to participate. Ramona’s Way does not accept mandated clients. It inconsistent with the organization’s philosophy of self-determination, which we believe is at the core of creating personal change.
10. How do you assess the commitment level of your clients to the process? Ramona’s Way uses a Likert Scale with a range from (0-10) to determine a client’s motivation level at intake and then again within six months. The counselor documents this within the client’s file. This rating is determined based on client self report. In the past we had the counselor rate the client’s motivation level as well. We have noted that there have been differences in commitment level. Usually clients have rated their motivational level higher than the counselor’s assessment. In addition to tracking a client motivation, clients are consistently reevaluated, especially when reviewing the progress they are making towards their goals. Client’s active substance use or lack of use greatly influences their motivation level. We are consistently assessing client commitment level especially if they are not making progress towards their goals.

11. What are the parameters for the individualized plans? Every client at Ramona’s Way receives a certain level of quality service that is integrated within their individualized plans. All clients receive a comprehensive assessment, motivation levels are measured, safety is established, and all are educated about the resources available to ensure their safety such obtaining temporary restraining orders, Crime Victims Compensation benefits. Finally all clients are informed of our confidentiality policies. Ramona’s Way’s comprehensive assessment entails a biopsychosocial, a substance abuse assessment tool. Individualized plans are consistent with our philosophy of self determination. Therefore, we understand that some clients will have special needs that other clients will not have. Clients with extensive medical needs will need more assistance with accessing health care than some of our other clients. Through our client emergency fund we may use funds for clients to obtain their prescriptions or dental care, when there isn’t other funding sources available.
4) Additional Questions

a) What is the approximate number of individuals served annually by the applicant? Last year Ramona’s Way received 200 referrals from our community partners. Upon extensive assessment, 50% of the clients referred are not eligible for our services as it is the victim’s partner that is struggling with the substance issue and the victim themselves are not seeking that type of support. Of the remaining 100 eligible clients, because our services are voluntary only 50% of this number are really only ready to address the immediate safety issues and the overwhelming challenges of dealing with the substance abuse issues become to much to deal with. These clients are adequately assessed and connected to other service providers that can address their other needs. However, clients that fall in this category aren’t immediately referred, because clients are not always forthcoming that they do not want to access our services, so some time may pass before we hear from them again. The remaining 50 clients actively participate in Ramona’s Way services. These are consistent clients who receive the crisis intervention services that focus on safety and other emergency needs such as food and emergency housing, case management services then connect them to an appropriate treatment facility and the drop-in therapy group lends them support in a safe environment, finally the client emergency fund offers immediate financial relief when a client is facing a financial crisis such as rental assistance or utility assistance.

b) Are there past awards, accolades, and grants furnished upon the applicant that would further exemplify it’s success in combating domestic violence? Ramona’s Way has a substantial history of being recognized in the local community. September 2003 Ramona’s Way graduated from the Mayor’s Strengthening Partners Initiative, a competitive year long program for select small nonprofits to receive mentoring and coaching around capacity building. October 2004 Ramona’s Way received the Washington Area Women’s Foundation Leadership Award, for emerging nonprofits serving women and girls in the Washington DC area. November 2005 Ramona’s Way was selected for the Catalogue for Philanthropy, a publication that highlights a distinguished small group of nonprofits for major donors and foundations. In February 2007 the Executive Director of Ramona’s Way received the citizen of the year award by the local domestic violence coalition. Finally, spring of 2007 Ramona’s Way was featured in the Foundation Center’s Annual report as one of their success stories.

c) If funding were not an issues, what if any changes or additions would you make to your program in the future? Ramona’s Way’s vision is to continue to offer a comprehensive program for chemically dependent battered women. We plan to do this through establishing a sanctuary house that provides immediate safety for chemically dependent battered women with and without children. The environment would emphasized holistic healing approach that allows survivors to heal their mind-
body and spirit. The Sanctuary House will integrate services to address client’s medical, nutritional, spiritual and emotional needs. Partnerships with a local hospital and alternative therapies practitioner (i.e. acupuncturist and massage therapist) will help us address the many complex needs that trauma survivors with substance abuse encounter. Chemically dependent battered would be able to stay at the program for six months then move into a transitional housing program for an additional 18 months. This program will be a best practices model for other service providers to replicate.
## Ramona’s Way Operating Budget July 1, 2005 - June 30, 2006

### Revenue

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual Contributions</td>
<td>$5,000</td>
</tr>
<tr>
<td>Board Contributions</td>
<td>500</td>
</tr>
<tr>
<td>Special Events</td>
<td>500</td>
</tr>
<tr>
<td>Corporate Contributions (Restaurants)</td>
<td>200</td>
</tr>
<tr>
<td><strong>Civic Associations</strong></td>
<td></td>
</tr>
<tr>
<td>Daughters of the American Revolution</td>
<td>$5,000</td>
</tr>
<tr>
<td><strong>Corporate sponsorship (Donated Goods)</strong></td>
<td>100</td>
</tr>
<tr>
<td><strong>Local Supermarkets</strong></td>
<td></td>
</tr>
<tr>
<td><strong>In-Kind Contribution</strong></td>
<td></td>
</tr>
<tr>
<td>Space (Domestic Violence Intake Center SE)</td>
<td>3,600</td>
</tr>
<tr>
<td><strong>Foundations</strong></td>
<td></td>
</tr>
<tr>
<td>Freddie Mac Foundation</td>
<td>$50,000</td>
</tr>
<tr>
<td>Washington Area Women’s Foundation</td>
<td>$2,500</td>
</tr>
<tr>
<td><strong>Total Revenue</strong></td>
<td>$67,400</td>
</tr>
</tbody>
</table>

### Expenses

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Salary</strong></td>
<td></td>
</tr>
<tr>
<td>Executive Director (FT 40 hr./ incl. Fringe)</td>
<td>$25,000</td>
</tr>
<tr>
<td>Certified Addictions Counselor (PT)</td>
<td>16,000</td>
</tr>
<tr>
<td>Licensed Clinical Social Worker (Consultant)</td>
<td>6,000</td>
</tr>
<tr>
<td><strong>Non Personnel</strong></td>
<td></td>
</tr>
<tr>
<td>Rent</td>
<td>3,600</td>
</tr>
<tr>
<td>Payroll Taxes</td>
<td>2,267</td>
</tr>
<tr>
<td>Administration</td>
<td>1,000</td>
</tr>
<tr>
<td>Consultants (Attorney &amp; Accountant)</td>
<td>2,000</td>
</tr>
<tr>
<td>Insurance</td>
<td>2,614</td>
</tr>
<tr>
<td>Training</td>
<td>1,013</td>
</tr>
<tr>
<td>Equipment</td>
<td>1,487</td>
</tr>
<tr>
<td>Memberships &amp; Subscriptions</td>
<td>125</td>
</tr>
<tr>
<td>Client Emergency Assistance</td>
<td>500</td>
</tr>
<tr>
<td>Support Group Food</td>
<td>150</td>
</tr>
<tr>
<td>Cell Phone –Crisis Counseling</td>
<td>600</td>
</tr>
<tr>
<td>Client Urine Tests ($35 x 14)</td>
<td>490</td>
</tr>
<tr>
<td>Outreach (printing/copying)</td>
<td>500</td>
</tr>
<tr>
<td>Travel (Client Transport)</td>
<td>100</td>
</tr>
<tr>
<td>Supplies</td>
<td>600</td>
</tr>
<tr>
<td>Postage</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td>$64,146</td>
</tr>
</tbody>
</table>

### Net Reserves

<3,254>

### Budget Narrative

1. Administration – Paychex, Payroll service
2. Insurance- D&O, liability, Mental Health Insurance policies
3. Client Emergency Assistance- Emergency funds for rent and utility
4. Client Transport- Transportation funds for support group and Detox Escort
5. Client Urine Tests- Tests for Admissions to Transitional Housing Programs
May 3, 2007

Mary Byron Foundation
10401 Linn Station Road
Louisville, Kentucky 40223

Dear Mary Byron Foundation:

On behalf of the Asian/Pacific Islander Domestic Violence Resource Project (DVRP), I am extremely pleased to submit this letter of support for Ramona’s Way’s nomination for the Mary Byron Foundation’s Celebrating Solutions Award. Ramona’s Way is a truly unique organization in Washington, DC that specializes in providing services to domestic violence survivors struggling with substance abuse issues. Since 2002, Ramona’s Way has radically changed the way in which domestic violence survivors with substance abuse issues have been treated. In the past, these survivors were not only overlooked, but often times they were outright rejected by other domestic violence organizations. Now, these survivors have a place where they can receive appropriate services to address the domestic violence and substance abuse issues in their lives and they also have an agency that advocates on their behalf to challenge policies, practices, and attitudes that have resulted in denial of services in the past.

By filling a critical niche within the continuum of care for domestic violence survivors, Ramona’s Way has moved DC to the forefront of the anti-domestic violence movement. DVRP is an agency that works in Maryland, Virginia, and DC, and I have seen first hand how survivors with substance abuse issues fall through the cracks in these other states that do not have an agency like Ramona’s Way.

DVRP has greatly benefited from our association with Ramona’s Way. We have been able to rely on them to provide us with information about the substance abuse treatment system overall so that we can navigate those systems with our survivors outside of DC. Ramona’s Way has also informed other agencies, like mine, of the needs of domestic violence survivors with substance abuse issues and best practices to address those needs. As a true collaborative partner, Ramona’s Way has also been open to learning about and addressing the needs of immigrant communities that work with agencies like DVRP.

It has been an honor to work with Ramona’s Way and they are truly deserving of Mary Byron Foundation Celebrating Solutions Award.

Sincerely,

[Signature]
Anjali Nagpaul
Executive Director

Board of Directors
Courtney Chappell,
President
Junaid S. Ahmad,
Vice-President
Karen Ho,
Treasurer
Neha Hewitt,
Secretary
Nancy Cantalupo
Karen Chen
Bindi Patel
Genevieve Villamora
Board Advisors
Charlotte Chang
Lillian MacEachern
April Oh
Cindy Yeh
Alema Siddiky
Executive Director
Anjali Nagpaul
Community Outreach Director
Hannah Sin
Advocates Program Co-Director
Srijana Chettri
Advocates Program Co-Director
Jane Hwang
May 1, 2007

Mary Byron Foundation
10401 Linn Station Road
Louisville, Kentucky 40223

Dear Selection Committee:

Since September 2002, Ramona’s Way, a program for survivors of domestic violence struggling with substance abuse, has addressed a vitally important service gap in the District of Columbia. It has been an invaluable resource to other domestic violence service providers by offering education, counseling and advocacy for this underserved population. By providing both direct services to chemically dependent survivors and serving as a unique resource to providers, Ramona’s Way has proven an innovator in addressing an issue that exacerbates the effects of domestic violence in the lives of countless women.

Ramona’s Way has become a leader in our local community by boldly and expertly maneuvering systems that are unfamiliar with focusing on the needs of domestic violence survivors who are also confronted with substance abuse problems. Currently, Ramona’s Way is a critical partner in two, three-year model projects that address both comprehensive systems change and create the first city-wide public awareness campaign to address domestic violence. Without Ramona’s Way’s expertise, these model projects would lack the information and guidance necessary to assure that the needs and concerns of chemically dependent battered women are addressed. Ramona’s Way is vital to achieving comprehensive systems change within the broader context of violence against women by holding its sister providers accountable for addressing other social problems confronting survivors of intimate partner violence.

In February 2007, Ali-Sha Alleman, the executive director of Ramona’s Way, was selected by the Coalition to receive the Citizen of the Year Award from the Junior Women’s Club of Chevy Chase, Maryland. Our goal, along with the Junior Women’s Club, was to choose an award recipient that mirrored one of the objectives of the Mary Byron Foundation – to recognize the leadership of an organization/individual that demonstrates promise in breaking the cycle of violence and serves as a model for the rest of the nation. Ramona’s Way, under the leadership of Ali-Sha Alleman, has repeatedly led the way in reshaping the ways in
which domestic violence is addressed in the District of Columbia. Without
the vision provided by Ramona’s Way, and Ali-Sha Alleman, the anti-
domestic violence service provider community would fall short in its
efforts to assist all battered women.

We, therefore, wholeheartedly support Ramona’s Way for the Mary Byron
Foundation Celebrating Solutions Award. Please do not hesitate to
contact me if you have questions or require additional information.

Thank you for your consideration.

Sincerely,

Kenneth E. Noyes, Esq.
Co-Executive Director
D.C. Coalition Against Domestic Violence
May 1, 2007

Marcia Roth
Executive Director
Mary Byron Foundation
Celebrating Solutions Awards
10401 Linn Station Road
Louisville, KY 40223

Dear Ms. Roth:

Washington Area Women’s Foundation strongly supports Ramona’s Way and its application for the Celebrating Solutions Award. The Women’s Foundation has worked closely with Ali-Sha Alleman over the years – from her time as a community volunteer and then later as she founded Ramona’s Way and was awarded a Leadership Award in 2004. The Leadership Awards are The Women’s Foundation’s signature program recognizing the work of outstanding, emerging, Washington, D.C.-area community-based organizations that help women and girls achieve economic self-sufficiency and reach their full potential. Ramona’s Way is one of those outstanding organizations providing holistic services to chemically-dependent battered women; helping them to regain control of their lives and understand their power to improve their own lives and those of their family and community.

In addition to the Leadership Award, we have continued to invest in Ramona’s Way by selecting the organization to receive an Open Door Capacity Building Fund grant in 2006 to support the development and implementation of a fundraising plan. Based on their recent report they have had great success increasing their operating budget by almost fifty-percent. This directly aligns with The Women’s Foundation’s goals in the Open Door Capacity Building Fund to support and strengthen our Grantee Partner organization’s professional, administrative or management capabilities and infrastructure to better achieve their mission.

As one of our Grantee Partners, Ramona’s Way is included in a community of like-minded organizations working to create substantial, long-term social change for the region. Washington Area Women’s Foundation provides our Grantee Partners technical assistance and training workshops on important organizational development and programmatic topics such as media and communications, fundraising, and board development, as well as many networking and community engagement opportunities with other nonprofit organizations and individuals in the community. We are
committed to their success. Ali-Sha participates in many of the technical assistance opportunities, and networking and community engagement events. Through her participation and willingness to share ideas and best practices she demonstrates that she is committed to the success of her organization and the strong network of nonprofit organizations in the region.

Ramona’s Way is a critical and necessary deliverer of services to chemically dependent battered women in our community. We believe that upon review, you will find them to be an exceptional candidate for your Celebrating Solutions Award. Please feel free to contact me at (202) 347-7737, or csummers@wawf.org, if you have any questions or wish to speak further about supporting Ramona’s Way.

Sincerely,

[Signature]

Carolee Summers-Sparks
Program Officer