

## Remarks to Vermont House Judiciary Committee

Thursday April 25, 2024

Good morning-

Thank you for the opportunity to come before you today. I am Jason Conety and have been employed as a Family Services Worker for the Department of Children and Families in Bennington for the past 3 years.

Despite my short time with DCF, I have had the privilege of serving the youth of Vermont for over 25 years. More than 20 of those years were working in private residential treatment, with my last position as the Program Director for Seall/Depot Street Program in Bennington.

As a Family Services Worker, I carry a Juvenile Services (JS) caseload. These are all Court involved cases that include delinquencies, probation cases, and Youthful Offender cases. The question that is being discussed in this committee about Raise the Age has a direct impact on my work with the youth and families that I serve.

This morning, I am not coming before you to represent the views of the Department or the Family Services Division. I am speaking to you as someone who has committed his entire adult life to the youth of Vermont.

Let me begin by stating that I understand the science about brain development and that the goals of Raise the Age are important ones – and these goals can be accomplished here in Vermont. The question of whether to temporarily pause the next steps of Raise the Age is one that I wish to speak to this morning.

The current climate that my colleagues and I are facing in the course of our jobs every single day – is that we have been stretched beyond the breaking point. Our Family Services Workers are faced with the task of staffing youth when there are no beds available. This puts both our staff and, more importantly, the youth we serve at risk. The countless hours spent – both during working hours and after hours – in police stations, emergency rooms, district offices and other locations are hours that we are not doing our primary jobs of working with youth and families.

As a JS worker, the youth served by Raise the Age will be the responsibility of workers like myself and my colleagues that manage these types of caseloads. With all due respect to those that have reported that our caseloads will not be impacted by the next step of Raise the Age, I cannot disagree more.

In Bennington, we have 15 Family Services Worker positions. Five of which manage investigations and assessments, seven handle child protection and family support cases, leaving three FSW's that manage the JS cases. Since October, of those three positions – one has been vacant due to a staff departure that has not yet been filled. Best practice would show that the ideal caseload for a FSW would be approximately 16 cases. My

colleagues and I are forced to triage almost every situation that we face in the course of our daily duties.

In addition to the lack of beds, a crisis that we have been facing since Covid – the infrastructure of community supports is just not adequate to meet the needs that we have right now – much less adding older youth to mix. Our BARJ providers, designated mental health agencies, and other community agencies are stretched just as much as we are.

Southern Vermont is the primary conduit for the drugs, weapons and increased gang activity that is coming into our state –the impact of this on our communities has been devastating.

I know that this committee has been given reports from major universities and various advocacy groups, and while they can reference studies, data and numbers, my colleagues and I work with the actual children and families in our home communities. I make this offer to each and every one of you on this committee, rather than reading these studies and analyzing the numbers, let me extend an open invitation to all of you to come to my district and shadow my colleagues and I as we are in the homes with these families. I think you will find this much more eye opening than just reading about it.

In southern Vermont, our youth often face a waitlist of over four months for medication management from our designated mental health agencies. Youth that desperately need clinical support are forced to make do with “therapeutic case management” due to a lack of mental health counselors. Our BARJ providers do amazing work – but lack the capacity to meet the current needs, much less anticipating higher caseloads.

When it comes to the increasing problem of juvenile substance abuse –the resources at the community level to treat these addiction issues is simply not there. A recent YO case that I managed involved a young person – age 20, who had committed their 2<sup>nd</sup> DUI. As part of the Juvenile Probation – this young person was directed to access the local mental health agency and complete a substance abuse assessment and follow all of the treatment recommendations. This young person, who is not even of legal drinking age, was told to “drink more water, eat healthier, exercise and report to your probation officer as directed.” As the JS worker managing this case, I had to report this to the Court. We do not have substance abuse treatment resources for our youth.

I am not advocating for this committee to repeal or stop Raise the Age. My hope is that Vermont will commit to putting in place the resources and infrastructure that is needed to do this right. Our youth deserve no less. My colleagues and I in FSD will always answer the call to support the youth and families of Vermont – and have been doing so in spite of the massive challenges that we face day in and day out. But we are at our breaking point. I ask for your support so that we can provide the level of service that our families need, and this includes implementation of Raise the Age.