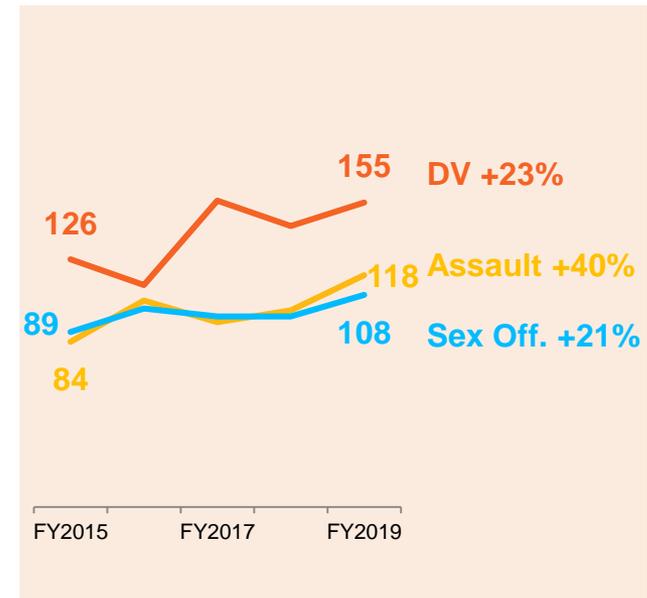


Vermont's domestic violence community programming is weakened by the current funding model and lack of state investment and support.

- ✗ Sentencing data shows that sentencing for domestic violence-related felonies has increased significantly in recent years, indicating the likelihood of more people in need of domestic violence programming and treatment moving through the system and on to community supervision.
- ✗ The community programming available for people convicted of domestic violence is a “one-size-fits-all” approach that does not target people based on their risk and needs, undermining the efficacy of the programming for different people.
- ✗ Funding for these programs comes entirely from participant fees, which can be prohibitively expensive for individuals and undermine their ability to complete or benefit from these programs.
 - In the past, Vermont blended state investment into the programs with a slide fee-for-service scale, which ensured consistency in programmatic funding while also holding people accountable to “buying in” to their treatment.
- ✗ At the same time, current funding inadequately supports many of these programs, which often do not have sufficient resources to provide their staff with the training required to meet statewide standards.
 - In some cases, counties are facing the possibility of losing programming all together.
- ✗ Vermont no longer has a statewide domestic violence program coordinator, a position that formerly worked to ensure consistency in access, quality, and compliance across all counties while also providing critical support to programs across the state.

Felony Conviction Volume by Offense Type, FY2015–FY2019



To lower recidivism and improve behavioral health, Vermont must consider up-front investments that will fund immediate improvements, with cost savings and reinvestments to follow.

Establish a protected, dedicated fund to support evidence-based programs and services that reduce recidivism and improve behavioral health among criminal justice populations.

Expand access to risk-reduction programming for all medium- to high-risk people, regardless of offense.

Increase access to gender-responsive programming.

Strengthen and sustain domestic violence programming.

- Reduce reliance on fee-for-service funding.
- Invest in statewide coordination of current programs and allow for more types of programming based on risk.

Target gaps in behavioral health services.

- Expand mental health services for the non-Serious Mental Illness (SMI) population.
- Create more services for people with co-occurring disorders.
- Explore providing counseling services for people receiving MAT.

Identify housing needs and provide additional supports.

- Use information from housing assessment tools to identify needs among people incarcerated and supervised in the community.
- Explore the potential for data matching that may support a gap analysis for housing and behavioral health needs and resources.

Expand DOC data capacity to monitor progress and provide more consistent information and guide decision-making.

Expand the Community Outreach Program to embed social workers with law enforcement agencies statewide.