

Speaking in Support of LD 666: "An Act to Prevent Domestic Violence by Providing Adequate Funding Support for Court-Ordered Certified Domestic Violence Intervention Programs."

Before the Joint Standing Committee on Criminal Justice and Public Safety

Date of Public Hearing: Monday, March 3, 2025

Senator Beebe-Center, Representative Hasenfus, and honorable members of the Committee,

My name is Jenna Ostrowski, and I am a Maine Licensed Clinical Professional Counselor (LCPC) and a PhD Candidate in Criminal Justice currently in All But Dissertation (ABD) status. I am completing a dissertation called "Perceptions of Maine Batterer Intervention Program Directors on Treatment Challenges," in which I have researched treatment challenges not only in the state of Maine, but nationwide. During my research period, I connected with Maine Certified Domestic Violence Intervention Programs (CDVIPs) staff to understand the current challenges within Maine CDVIPs. I plan to continue Maine CDVIP research once I am in post-doctoral status.

In my literature review research phase, DVIPs nationwide identified funding as a common issue. Many agencies do not have secure and reliable funding sources, jeopardizing the operations of DVIPs. Most agencies rely on fees collected from their participants, but participants often cannot pay the full cost and may need to rely on sliding-scale accommodations. Agencies have determined that self-sufficiency is impossible with participant fees alone and need to rely on funding sources to remain operational. Maine CDVIPs are no strangers to this practice. The "2023 Annual Report on Certified Domestic Violence Intervention Programs," published by the Maine Coalition to End Domestic Violence (MCEDV), highlighted the funding crisis just in York County with the closure of two CDVIPs, causing strain on other programs and presenting safety concerns for survivors. When considering the current national funding crisis combined with Maine CDVIP funding issues, my concern is that Maine CDVIPs will not have the appropriate financial support to be fully operational, causing further strain on existing systems and increasing the overall safety risks to survivors in our community.

Furthermore, I feel the most alarming issue that I found in my research was the rates of homicide-related domestic violence cases just in the state of Maine. In 2015, the Violence Policy Center ranked Maine as ninth among all states in which women are murdered by men in domestic violence related cases, as referenced in the Zeller et al. (2015) report. Since this time, nearly 50% of all homicides in the state are domestic violence related. Even before 2015, The 11th Biennial Report of the Maine Domestic Abuse Homicide Review Panel, published in 2016, refers to the prior 10 years of domestic violence related homicides

accounting for nearly 50% of all state homicides. If programs were reduced or closed due to funding issues, I fear these rates of domestic violence related homicides would increase on a significant level.

Research studies such as Boots et al. (2016) and Cheng et al. (2019) suggest that DVIP treatment is more effective than no treatment or jail time, even more so effective when the treatment program is longer in duration and fully completed by the participant, sentiments also echoed in the MCEDV 2020 Survivor Impact Survey. From a qualitative perspective, the researchers of the Morrison et al. (2018) study interviewed 76 male participants selected from DVIPs that utilized either the EMERGE or the Duluth Model. Participant data produced four primary themes from participants, which included 1) a greater understanding of domestic violence, 2) increased accountability, 3) improved anger management skills, and 4) improved communication skills. In the Holtrop et al. (2017) study, data produced similar findings among 15 male participants who completed a DVIP that utilized a feminist-type modality. These themes suggest that treatment outcomes align with the overall goals of CDVIPs of increased safety for survivors and accountability amongst CDVIP participants.

Lastly, as a licensed mental health professional in our community, I am deeply concerned about the issues affecting our nation, which will affect our Maine residents on some level, especially in a financial sense. I work as a private practice mental health therapist with adult clients on a variety of issues, and I have noticed a significant number of my own clients expressing stress and anxiety due to financial hardships and concerns. I see how these situations negatively impact their intimate relationships at times. The overwhelming universal stress and anxiety that we currently (and will continue to) experience as a nation and a state impact our overall mental health and stress levels. These issues are likely to create further problems, such as increased substance abuse and difficulties within intimate relationships. For some relationships, intensified stress and tension increase the risk and severity of domestic violence incidents, furthering the significant problem of domestic violence in our community.

Our community needs robust and effective tools to not only treat domestic violence but prevent domestic violence. With the ultimate goals of survivor safety and participant accountability in mind, CDVIP may be a literal lifeline to our survivor community. Increased funding for CDVIPs is fundamental for not only maintaining current programming but it is imperative to expand and develop essential aspects of CDVIP programming to increase safety for our survivors and reduce domestic violence in our community.

Thank you for your time to allow me to share my perspective on this issue.

Jenna Ostrowski, MS, LCPC

Ph.D. Candidate

Department of Criminal Justice

Nova Southeastern University

jo882@mynsu.nova.edu

207-209-0105