# State of Connecticut STOP Violence Against Women Formula Grant Program FY 2022-2025 Implementation Plan



Office of Policy and Management

Criminal Justice Policy and Planning Division

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### Table of Contents

Stat	te of Connecticut	1
I.	Introduction	4
	A. The date on which the plan was approved by the State	
	B. The time period covered by the plan. (28 C.F.R. 90.12(a))	
II.	Needs and Context	5
	A. Demographic information regarding the population of the State derived from the most recent available Census Bureau data including population data on race, ethnicity, age, disability, and limited English proficie C.F.R. 90.12(g)(1))	ency. (28
	B. Description of the methods used to identify underserved populations within the State and the results of t methods, including demographic data on the distribution of underserved populations within the State. (34 U. 10446(i(2)(E); 28 C.F.R. 90.12(e))	S.C.
III.	Description of Planning Process 18	
	A. A brief description of the planning process	1
	B. Documentation from each member of the planning committee as to their participation in the planning p U.S.C. 10446(i)(2)(B); 28 C.F.R. 90.12(b)(7)).	,
	C. A description of consultation with other collaboration partners not included in the planning committee include tribes in this section. See "III. D" below for information on consulting and coordinating with tribes). (REQUIRED)	
	D. Consultation and coordination with tribes (34 U.S.C. 10446(c)(2)(F); 28 C.F.R. 90.12(b)(3) and (c)(2)(iii)	)3
	E. A summary of major concerns that were raised during the planning process and how they were address they were not addressed, which should be sent to the planning committee along with any draft implementation the final plan. (28 C.F.R. 90.12(c)(2)(i)	on plan and
	F. A description of how the State coordinated this plan with the State plan for the Family Violence Prevent Services Act and the programs under the Victims of Crime Act and section 393A of the Public Health Service Prevention Education), including the impact of that coordination on the contents of the plan. (34 U.S.C. 1044 C.F.R. 90.12(b)(6) and (g)(6)).	e Act (Rape 6(c)(3); 28
IV.	Documentation from Prosecution, Law Enforcement, Court, and Victim Services Programs	44
	This documentation may be in the form of letters from current grantees or State- or Territory-wide organizar representing prosecution, law enforcement, courts and victim services able to comment on the current and program funds. The documentation must describe:	roposed use o
V.	Plan for the Four-Year Implementation Period	45
	A. Goals and Objectives	4
	1. Concise description of the State's goal and objectives for the implementation period. 28 C.F.R. 90.12(a))	4
	2. Description of how STOP funding will be used to meet the State's goal and objectives during the implen period. (34 U.S.C. 10446(i)(1); 28 C.F.R. 90.12(a))	
	3. A description of how the funds will be distributed across the law enforcement, prosecution, courts, victing and discretionary allocation categories. (See 34 U.S.C. 10446(c)(4)).	
	B. Statutory Priority Areas	
	2. Goals and objectives for reducing domestic violence-related homicides within the State, including availa on the rates of domestic violence homicide within the State and challenges specific to the State and how the p overcome them. (34 U.S.C. 10446(i)(2)(G); 28 C.F.R. 90.12(f)).	lan can
VI.	Conclusion	74
App	pendix A	80

Appendix B 95

.

## I. Introduction

#### A. The date on which the plan was approved by the State.

The Planning Committee received a draft of the 2022-2025 STOP Implementation Plan on May 4, 2022. The 30-day review period lasted until June 3, 2022. The input provided by Planning Committee Members was reviewed and incorporated into the final draft. The approved final draft of the plan was provided to all members on June 14, 2022. Members will be given an opportunity to review the edits to the plan at a May 2023 Planning Committee meeting and any edits will be included in the 2023 Funding Application.

#### B. The time period covered by the plan. (28 C.F.R. 90.12(a))

This Implementation Plan outlines the goals, objectives, and funding priorities that the State of Connecticut will seek to accomplish and achieve through the STOP funding from July 1, 2022, to June 30, 2025.

## II. Needs and Context

A. Demographic information regarding the population of the State derived from the most recent available United States Census Bureau data including population data on race, ethnicity, age, disability, and limited English proficiency. (28 C.F.R. 90.12(g)(1))

#### Geography

The state of Connecticut has a population of 3,605,944 based on the 2020 Census, a 31,847-preson increase from the state's 2010 count. This makes Connecticut the 29th most populous state in the country. Measured by geography, Connecticut, at 5,543 square miles, is the third smallest of the 50 states. It also has been recognized as one of the five most expensive states to live in. The state has areas of great wealth and prosperity contrasted by poverty-stricken areas in need of resources. Connecticut has 8 different counties — Fairfield, Hartford, Litchfield, Middlesex, New Haven, New London, Tolland, and Windham — although they don't perform an administrative function and instead are used largely for geographical purposes. Connecticut has four cities with populations exceed 100,000 residents: Bridgeport, the state's most populous city; Stamford; New Haven; Hartford, the state capital; and Waterbury.

#### **Population**

The following table will provide a more in-depth look at the state's population racial characteristics.

Table 1. Population Characteristics- Connecticut (2020)<sup>v</sup>

#### Table 1

Race and Hispanic Origin	Percentage
White alone	66.4%
Hispanic or Latino	17.3%
Black or African American alone	10.8%
Asian alone	4.8%
American Indian and Alaska Native alone	.4%
Native Hawaiian and Other Pacific Islander	0.0% (1,598 individuals)
alone	
Some Other Race	8.3%
Two or More Races	9.2%

The following table will illustrate Connecticut's age and sex demographics based on the information reported by the 2020 Census. The strategic plan will place greater emphasis on providing both the elderly and youth equal access to services and avenues to report domestic violence, sexual assault, dating violence and stalking. The committee discussed programs that use social media and other platforms to make accessing services easier for youth in Connecticut. The committee also discussed how the pandemic has increased isolation for the elderly and youth and the impact that has as well as ways to address this issue.

Table 2. Age and Sex Characteristics- Connecticut (2020)<sup>vi</sup>

Table 2

Age and Sex	Percentage
Persons under 5 years old	5.1%
Persons under 18 years old	20.4%
Persons 65 years old and over	17.7%
Persons who reported to be female	51.2%

The Violence Against Women Act Measuring Effectiveness Initiative (VAWA MEI) collects annual data from all Connecticut subgrantees who receive STOP funding. The 2020 report regarding this data shows demographic information pertaining to victims who received services from STOP programs in 2020.

Figure 1. 2020 Victim Demographics- Connecticut STOP Programs

Figure 1

VIOLENCE	MEASURING
AGAINST	EFFECTIVENESS
WOMEN ACT	INITIATIVE

#### Demographics of victims/survivors receiving services

Demographics	Number of victims/survivors	Percent
Race/ethnicity		
American Indian and/or Alaska Native	42	0%
Asian	122	1%
Black or African American	2,097	24%
Hispanic, Latino, or Spanish origin	2,712	31%
Native Hawaiian and other Pacific Islander	18	<1%
White	3,426	40%
Some other race, ethnicity, or origin	209	2%
Unknown	3,143	
Gender	2	
Female	9,535	82%
Male	2,078	18%
Transgender or gender nonconforming Unknown	22	<1%
Age	134	
11-17	59	1%
18-24	2,754	25%
25-59	7,587	69%
60+	602	5%
Unknown	767	

#### **Education**

Education attainment levels and connectivity are two important factors to consider when viewing a population, especially as the world becomes more digital with advances in technology and as a response to the Covid pandemic.

Table 3. Educational Attainment and Connectivityvii

Table 3

High School Graduate or Higher, Persons	90.9%
aged 25 and over (2016-2020)	
Bachelor's degree or higher, Persons aged	40%
25 and over (2016-2020)	
Households with a computer (2016-2020)	92%
Households with a broadband internet	87.3%
subscription (2016-2020)	

#### **Housing, Income and Poverty**

Socioeconomic factors such as housing, income and poverty levels provide any state with insight and context into its demographic information. In addition, these factors help Connecticut to pinpoint underserved communities, so that programs and services can be tailored to their needs.

Table 4. Housing, Income and Poverty Characteristics- Connecticut<sup>viii</sup>

Table 4

Housing, Income and Poverty	Amount/Percentage
Owner-occupied housing unit rate (2016-	66.1%
2020)	
Median value of an owner-occupied	\$279,700
housing unit (2016-2020)	

Median selected monthly owner costs with	\$2,127
a mortgage (2016-2020)	
Median gross rent (2016-2020)	\$1,201
Median household income (2016-2020)	\$79,855
Per Capita income in past 12 months	\$45,668
Persons in poverty	9.7%

The median income being \$79,855 does not tell the full story of economic disparity in Connecticut. The American Community Survey reports that from 2016-2020, 4.9% of the households in the state made less than \$10,000, while 13.2% of the households made more than \$200,000.

Figure 2. Household Income in Connecticut (2016-2020)<sup>x</sup>

Figure 2 Household Income in Connecticut in 2016-2020

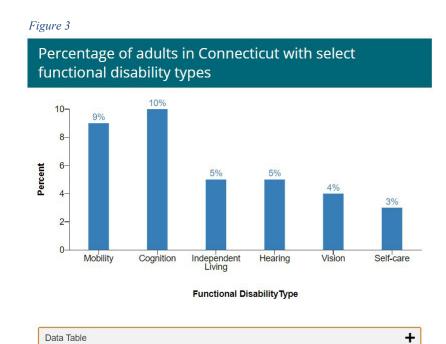


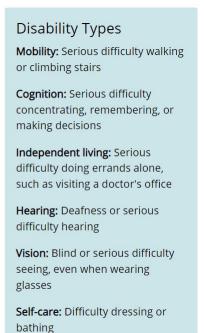
#### **Disability**

Another significant population that we must consider when thinking about STOP funding is those living with disabilities. Access to victim services and other resources must be made available to members of this community. The following figure will display information

provided by the CDC to show the percentage of adults in Connecticut who have select functional disabilities.

Figure 3. Select Functional Disabilities<sup>xi</sup>



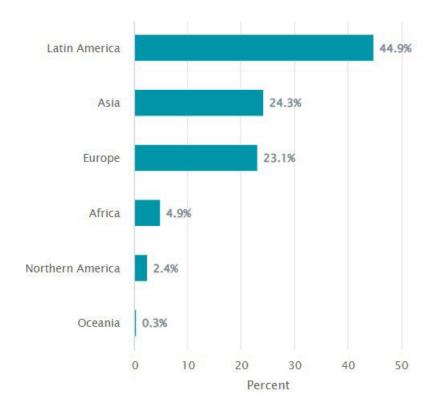


#### **Foreign-Born Residents**

Between 2016-2020, approximately 14.6% of Connecticut residents were foreignborn. 53.7% of the foreign-born population were naturalized U.S. citizens and it is estimated that 76.5% entered the country before 2010.<sup>xii</sup>

Figure 4. Region of Birth for the Foreign-Born Population in Connecticut in 2016-2020xiii

Figure 4



The unauthorized immigrant population is often one of the most vulnerable populations because of the inherent fear of coming forward to report being a victim of a crime. The Migration Policy Institute (MPI) indicates that 3,360 Connecticut residents have been recipients of the Deferred Action for Childhood Arrivals (DACA) program as of December 31, 2021. \*\*MPI\* also estimated that the unauthorized immigrant population was 113,000 people in the state of Connecticut in 2019. \*\*The planning committee discussed the need to build trust in immigrant communities by training community leaders to be liaisons, so individuals feel comfortable coming forward and seeking services.

Figure 5. Profile of Connecticut's Unauthorized Immigrant Population (2019)<sup>xvi</sup>

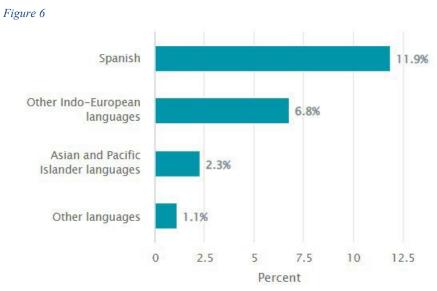
Profile of the Unauthorized Population: Connecticut

Demographics	Estimate	% of Total
Unauthorized Population	113,000	100%
Top Countries of Birth		
Mexico	17,000	15%
Guatemala	14,000	12%
Brazil	12,000	11%
Ecuador	11,000	10%
India	7,000	7%
Regions of Birth		
Mexico and Central America	41,000	36%
Caribbean	10,000	9%
South America	37,000	33%
Europe/Canada/Oceania	7,000	6%
Asia	14,000	13%
Africa	3,000	3%

#### **Limited English Proficiency**

Improving services to those who have Limited English Proficiency has been a huge emphasis for Connecticut. From 2016-2020, Connecticut residents who are five years old and above, 22.1% spoke a language other than English at home. Spanish was the language reported by the most residents and it was found that 11.9% of people at least five years old spoke Spanish. Reporting also found that 8.1% of residents stated that they did not speak English "very well." The committee members gave examples of Spanish speaking response teams and the need to collaborate with multiple agencies in the community to coordinate resources and provide comprehensive services to individuals.

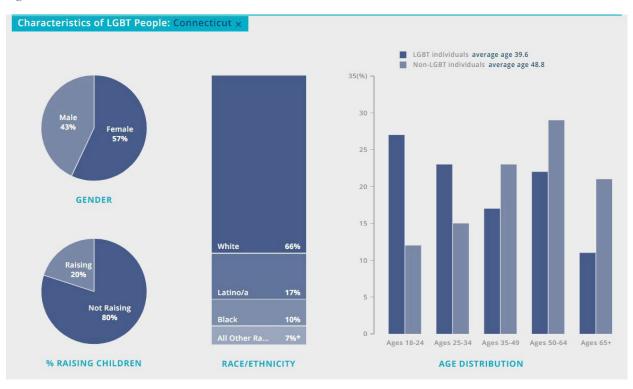
Figure 6. Population of residents 5 years and over who speak a language other than English in Connecticut in 2016-2020



#### **LGBTO+ Community**

UCLA School of Law's Williams Institute reports that 3.9% of Connecticut's population is a member of the LGBT community. \*\*xviii\* STOP funding must be used to provide services to this underserved community. The committee recognized the difficulties the LGBTQ+ community has in accessing services and stated one of the main goals of this Plan is to make sure all Connecticut residents feel safe reporting violence and seeking services.

Figure 7



B. Description of the methods used to identify underserved populations within the State and the results of those methods, including demographic data on the distribution of underserved populations within the State. (34 U.S.C. 10446(i(2)(E); 28 C.F.R. 90.12(e))

The Office of Policy and Management Criminal Justice Policy and Planning Division (OPM CJPPD) used several methods to identify underserved populations in Connecticut. First, the 2020 Census Data release was quite timely as it allowed our division to analyze the data reported and use it to help identify underserved populations in our state. In addition, the March 17, 2022, release of the American Community Survey for the five years of 2016-2020 provided additional detail and context regarding demographics in Connecticut, such as household income and Limited English Proficiency.

populations and asked them to identify communities that they believe need more resources and services. OPM CJPPD conducted outreach to and held meetings with organizations not connected to the Planning Committee that provide support and assistance to domestic violence and sexual assault victims. Each organization expressed thoughts on how to identify underserved communities best. The combination of these sources provided OPM CJPPD practical and data-driven methods to identify underserved populations.

## III. <u>Description of Planning Process</u>

#### A. A brief description of the planning process

OPM CJPPD, the State Administering Agency (SAA) for the STOP funding, partnered with non- profit organizations, representatives from state agencies, members of municipal police departments, and criminal justice stakeholders to put forth a comprehensive and thoughtful Implementation Plan for 2022-2025. Each person who participated in this process provided opinions, information, and experiences developed through real-life work with victims/survivors of domestic violence, sexual assault, dating violence, and stalking. OPM CJPPD has sought multiple ways to engage interested parties in preparation for writing this Plan. The desire was to gather information from as many diverse sources as possible to make sure that voices from all communities had the ability to participate.

#### **Pre-Planning Committee Preparation**

The planning process began in 2019, when our office applied for the STOP Intensive

Technical Assistance Project (SITAP). The project offered an opportunity for two states and/or territories to partner with the STAAR project and its partners in an assessment and technical assistance process focused on specific issues, challenges, or areas that the STOP administrator sought to enhance, improve, or grow.xx OPM CJPPD partnered with the Connecticut Alliance to End Sexual Violence (Alliance) and the Connecticut Coalition Against Domestic Violence (CCADV) for this application. The three major areas that OPM CJPPD sought assistance for were creating an effective evidence-based Implementation Plan, enhanced engagement and collaboration with underserves and underrepresented communities, and improving our grant making strategy through collaboration with Connecticut's Victims of Crime Act (VOCA) SAA.

Connecticut was chosen as one of the two states to participate in the program. OPM CJPPD worked with STAAR for over a year on a three-phase plan.xxii

- 1. Phase One- Mapping the Landscape
- 2. Phase Two- Analysis, Recommendations and Action Planning
- 3. Phase Three- Technical Assistance

The collaborative work resulted in a dashboard that was used in the planning process for this Implementation Plan and will continued to be used throughout the plan period. The dashboard provides information on equity, demographics, economics, and violence in Connecticut.

Dashboard: Funding Equity: Connecticut STOP Funding Maps (FINAL) | Tableau Public

OPM CJPPD strongly believes that collaboration with individuals who demonstrate passion and expertise for developing victim services programs is vital to the success of this planning process. The Undersecretary, who spearheads this division, chairs the Criminal Justice Policy Advisory Commission (CJPAC), which also has a Victims Issues Subcommittee. Along with the Undersecretary, several division members attend both CJPAC and the VIS subcommittee. In addition, a member of our division also attends the Connecticut Advisory Council for Victims of Crime. The meetings have allowed OPM CJPPD to discuss shortcomings in services and ways to improve and share successes with non-profit organizations, coalitions, and state agencies. These discussions have been influential on the goals and objectives we have established for the next four years. The meetings were held in person before the pandemic and have since been held through the Microsoft Teams platform.

The groundwork for this plan continued by engaging with non-profit organizations that work with victims of domestic violence and sexual assault but do not receive STOP funding

from our division. The listening sessions with these organizations provided a new perspective and expanded our knowledge base and vision. The sessions occurred through video conferencing.

#### **Planning Committee**

The Planning Committee met for the first time on December 13, 2021. It was the first of four meetings. The outreach to the organizations and individuals involved in the committee began months prior. The committee included a representative from the state sexual assault coalition, a representative from the state domestic violence coalition, a law enforcement representative from a rural town and one from the state's capital city, a member of the Division of Criminal Justice (the prosecutorial agency in Connecticut), a member of the Judicial Branch representing the Courts, and a representative from the Hispanic Health Council.

Several prominent themes originated in the planning meetings allowing for priorities to be established for the coming years. These priorities are heavily represented in the goals and objectives the plan illustrates. The Planning Committee brought forth some research ideas and potential data metrics the State can use to improve grant making strategy and measure success of our programs in a more data-driven way.

#### **Drafting and Reviewing Plan**

OPM CJPPD created a summary of the priorities and recommendations developed in the Planning Committee meetings. These ideas were used as a guide when our division developed the preliminary draft for the 2022-2025 STOP Implementation Plan. A draft of the Implementation Plan was sent to all the Planning Committee members, and they were provided with a 30-day review period. The Implementation Plan was also shared with other organizations and individuals who participated in the planning process. The Plan was then revised and updated

based on the input we received from the Planning Committee members. The final version of the Implementation Plan updated with all necessary revisions was presented to all the members of the Planning committee.

- B. Documentation from each member of the planning committee as to their participation in the planning process. (34 U.S.C. 10446(i)(2)(B); 28 C.F.R. 90.12(b)(7)).
  - 1. State sexual assault coalition
  - 2. State domestic violence coalition
  - 3. Dual domestic violence and sexual assault coalition- N/A
  - 4. Law enforcement entity or State law enforcement organization
  - 5. Prosecution entity or State prosecution organization
  - 6. A court or the State Administrative Office of the Courts
  - 7. Representatives from tribes, tribal organizations, or tribal coalitions
  - 8. Population specific organizations representing the most significant underserved populations and culturally specific populations in the State other than tribes (which are addressed separately)
  - 9. Other if relevant (including survivors, probation, parole, etc.)

The Connecticut STOP Implementation Planning Committee consisted of the following members:

- Jessie Gleckel, Director of Programs and Standards, Connecticut Alliance to End Sexual Violence (State sexual assault coalition)
- 2. Meghan Scanlon, President & CEO, Connecticut Coalition Against Domestic Violence (State domestic violence coalition
- Tonya Johnson, Executive Vice President, Connecticut Coalition Against Domestic Violence (State domestic violence coalition
- Daniel Cargill, Director of Law Enforcement Services, Connecticut Coalition Against Domestic Violence (Law enforcement)
- 5. Maria Ortiz, Community Liaison, Hispanic Health Council (Culturally Specific organization)
- 6. Melissa Conway, Grants and Contracts Manager, Division of Criminal Justice (Prosecution entity)

- 7. Joseph DiTunno, Deputy Director, Connecticut Judicial Branch (Court representative)
- 8. Captain Justin Lussier, Putnam Police Department (Law enforcement)
- 9. Jody Cummings, General Counsel (tribal representative)
- 10. Betty Ann MacDonald, Health and Welfare Executive Officer (tribal representative)
  Appendix A contains the documentation required from each member of the planning committee
  where they outline their participation in the planning process.

C. A description of consultation with other collaboration partners not included in the planning committee (do not include tribes in this section. See "III. D" below for information on consulting and coordinating with tribes). (REQUIRED)

OPM CJPPD consulted with collaborative partners not included in the planning committee.

OPM promotes collaboration across multiple state agencies. The office works on victim-related policy and services-related issues every day with agencies including the Office of Victim Services, Department of Social Services, Department of Public Health, Division of Criminal Justice, Department of Correction, and the Office of the Victim Advocate. OPM conducted meetings with Dorian Long, Social Services Program Administration Manager at the CT Department of Social Services, who administers grants relating to Domestic Violence and Sexual Assault and James Morgan, Program Manager at the CT Office of Victim Services and Victims of Crime Act (VOCA) administrator for CT.

OPM CJPPD sought to engage in conversation with agencies who provide direct services or provide grant funds to agencies providing direct services to victims of sexual assault, domestic violence, stalking, or teen dating violence.

Most of these services in Connecticut are provided by the member agencies of the two statewide coalitions, the CT Coalition Against Domestic Violence (CCADV) and the Alliance to End Sexual Violence who were included in the planning committee.

CCADV is Connecticut's leading voice for victims of domestic violence and those

agencies that serve them. They are a membership organization of Connecticut's 18 domestic violence service agencies that provide critical support to victims including safety planning, emergency shelter, court advocacy, counseling and support groups, among other services.

CCADV also directly administers the Safe Connect program, which is a statewide service that provides crisis intervention, information, referral, and follow up to survivors of domestic violence at their initial point of contact via telephone, text messaging, email or videoconference.

The Connecticut Alliance to End Sexual Violence is a statewide alliance of individual sexual assault crisis programs. The Alliance works to end sexual violence through victim assistance, community education, and public policy advocacy. Their nine member centers provide 24/7 crisis counseling and hotline services with certified sexual assault victim advocates. They can provide survivors with information and resources, make referrals to other social and legal services if needed, and discuss options for counseling and support groups. These services are available to all survivors in Connecticut—regardless of age, sex, immigration status, race, ethnicity, nationality, sexual orientation, gender identity or expression, or religious or spiritual beliefs.

The Alliance to End Sexual violence also operates a Post-Conviction Victim Advocate program, which provides support to survivors as their offenders are released back into the community on parole and probation supervision units. Specialized Post-Conviction Victim Advocates are available to victims and their families to represent their concerns as offenders are released into the community.

Through video conferencing listening sessions, OPM CJPPD consulted with the following collaborative partners not included in the planning committee:

#### LOVE146

Love146 operates statewide program that provide specialized services to suspected and confirmed victims of child trafficking throughout the state of Connecticut. Since 2014, Love146 has served over 700 youth; of these youth, 75% have been children of color (36% Hispanic; 24%)

African American/Black; 13% Multiracial; and 2% other), and 46% have been LGTBQ+. As reflected in these numbers and confirmed in research, underserved communities - in particular, children of color and LGBTQ+ children – are overrepresented among victims of child trafficking (e.g., Butler 2015; Choi 2015; Georgia State University 2019; Gibbs et al. 2018; Swaner et al. 2016; Twis 2020).

The population served by Love146 is a population of polyvictimization with 62% having experienced sexual violence beyond human trafficking, 28% having experienced domestic violence, and 14% having experienced dating violence. As a result of this polyvictimization, they have highly complex trauma needs including mental illness (65%), substance use (61%), suicidal ideation (47%), and self-injurious behaviors (45%). In addition, they are at high-risk for revictimization, which is further increased if they are unable to obtain economic independence. Discussions with LOVE146 focused on the long-term needs of sex trafficking victims and the lack of these services in CT.

#### **Department of Social Services and Office of Victim Services**

The CT Department of Social Services (DSS) administers grants relating to domestic violence and sexual assault and the CT Office of Victim Services (OVS) provides direct services to victims of sexual assault and administers the Victims of Crime Act (VOCA) grant.

The discussions focused on the impending cuts to the Victims of Crime Act fund and the potential gaps in programs and services that may occur to agencies providing direct services to victims of domestic violence, sexual violence, stalking, and dating violence.

OPM CJPPD was provided a list of VOCA funded agencies and has engaged in conversations with several service providers regarding the unmet needs of crime victims in CT. Additionally, OPM CJPPD, DSS, and OVS will be conducting quarterly meeting to assess the needs of social service agencies in CT and discuss potential funding sources that are available within each agency.

#### **Victim Issues Subcommittee**

OPM CJPPD also attended monthly meetings of the Victims Issues Subcommittee (VIS), which is a subcommittee of the Criminal Justice Policy Advisory Commission (CJPAC).

Membership includes representatives from the following statewide agencies and coalitions: the CT Office of Victim Services, the CT Coalition Against Domestic Violence, the CT Alliance to End Sexual Violence, the CT Department of Correction Victim Services Unit, the CT Office of the Victim Advocate, and Mothers Against Drunk Driving. Subcommittee members also expressed concern for cuts to the VOCA fund at a time when the need for services is increasing. OPM CJPPD reports all new funding opportunities to the CJPAC and the VIS and actively engages in discussions with committee members about the needs of the crime victims they assist.

Additionally, OPM CJPPD works on victim-related policy and services-related issues every day with agencies including the Office of Victim Services, Department of Social Services, Department of Public Health, Division of Criminal Justice, Department of Correction, and the Office of the Victim Advocate. In addition to the cross-agency collaboration OPM CJPPD does in the state, the office is fortunate to have the support of multiple victim services organizations in the state, including our coalitions, the Alliance and CCADV.

#### 2023 Revision

Sexual Assault Victim Service Provider – Sexual Assault Crisis Center of Eastern Connecticut, Inc.

The STOP grant administrator met with representatives from the Sexual Assault Crisis

Center of Eastern CT (SACCEC) Executive Director Georgette Katin and Associate Director

María Busineau. María started her career as a bilingual/bicultural advocate and has built and
maintained many of the relationships within SACCEC's geographic area for underserved
populations. SACCEC serves a primarily rural population with unique needs and barriers to
service which Georgette was able to share with the SAA. Considering the large geographic area

SACECC serves it takes more time to provide services given the distance. This also increases

the cost of providing services, for example a victim advocate needing to drive 80 minutes round-trip for a hospital visit. The rural nature of the area also means the organization cannot rely on large corporate or individual donations to support the direct services. There is no infrastructure in the area for public transportation which also increases the cost of travel for victim/survivors and employees. Georgette brought up that most grant funding does not include administrative costs. OPM CJPPD is working with the Alliance to provide resource about the use of indirect costs for member center agencies within federal guidelines.

#### **Domestic Violence Victim Service Provider – Interval House (Hartford)**

The SAA initially met President and CEO Mary-Jane Foster at the Domestic Violence Awareness walk hosted by the Hispanic Health Council. The SAA reached out to Mary-Jane and the Director of Community Programs, Emily Cintorino to receive input on the Implementation Plan. Mary-Jane discussed the importance of supporting non-traditional services, for example service that work with middle eastern and south Asian women. Mary-Jane and Emily discussed the geographic diversity of the area that their entity serves and the importance of making their presence and services known in all 24 towns.

Vicarious trauma is increasingly impacting the victim advocates, Interval House is seeing a trend of increased intensity of violence meaning not only do victims need services, victim advocates need support in their mental health when providing support in these cases. Access to behavioral health services is a national crisis and is affecting victims of domestic violence as the services needed are beyond the scope of a victim advocate. Victim advocates provide resources and referrals then access is delayed through waitlists and there is an insurmountable demand for mental health support. Interval house has partnered with behavioral health organizations in the community to provide trusted referrals and these agencies are also overwhelmed by need. Access to service includes meeting with a person as well as physically getting to where there are services. Interval House shared transportation needs as a barrier that victims are facing. Rideshare programs are expensive, victims may not have or have access to a vehicle, and public

transportation does not bring them to the necessary location. The cost of receiving services beyond what victim advocates can provide is high; transportation to the services and service costs/fees are important barriers to recognize. Financial abuse and coerced debt are additional trends that Interval House and other member centers are experiencing.

Another important partnership is between Interval House and law enforcement. Mary-Jane mentioned the increased involvement and participation of law enforcement around having conversations regarding victims of domestic violence. This is a crucial partnership to work towards the safety of victim/survivors.

Population Specific Organizations, Representatives from Underserved Populations, and Culturally Specific Organizations

The OPM CJPPD met with ALSO to discuss outreach strategies. Mary Seighman connected OPM CJPPD with consultants Dr. Quenette Walton and Olga Trujillo to discuss strategies for culturally specific outreach. Dr. Walton shared a plethora of resources around community outreach relevant to equity as well as information about historical trauma which was brought up in every tribal consultation meeting. Olga Trujillo shared their experience in building a network of underserved populations and the importance of having access to stories to bring to the table. The conversations with this consulting group gave OPM CJPPD strategies to conduct the following outreach and conversations.

OPM CJPPD met with Health Equity Solutions and Doulas4CT about the Implementation plan. Health Equity Solutions initiates and catalyzes policy programs and practices that advance and sustain health equity in Connecticut<sup>1</sup>. The STOP Grant Administrator attended a training during Health Equity week then met individually with the facilitation team to discuss the Implementation Plan. Representatives included

<sup>&</sup>lt;sup>1</sup> Health Equity Solutions - What We Do (hesct.org)

Kevin Collins, Director of Training and Outreach, Program Managers of Training & Outreach Taylor Tucker and Namandje Wali, and Janaya Laude a Training and Outreach Intern attaining a bachelor's in public health. The meeting discussed domestic and sexual violence from a health equity perspective with the intention of engaging and uplifting community health workers. The following input on services was discussed:

- Need for translators beyond bilingual. Portuguese and Haitian Creole are neglected language needs
- Uplifting the role and importance of community health workers. Discussing access
  to services, places that take insurance and/or sliding scales of payments. As well as
  building referral networks of trusted providers and building a connection to
  community-based organizations. The need for referrals as well as the ability to
  access the services.
- Cultural barriers around discussing domestic violence in addition to trust, historical trauma, and complexities of reporting for BIPOC people. The need for a clearly defined path of reporting and/or access to services that do not involve the judicial system and/or criminal justice system. Eliminating the use of over-policing in Black and Brown communities.
- Social determinants of health, access to services as an example.

The meeting closed with the OPM CJPPD writing a summary of the meeting and setting up a follow up discussion about partnering with Health Equity Solutions to set up focus groups with their network of community health workers and community members to continue conversations around trusted services.

The STOP Grant Administrator attended two public meetings with Doulas4CT, a coalition of Doulas, community voices, advocates, community including members from Earth's Natural Touch is the largest Collective of Black / BIPOC Doulas the largest Black Owned training organization of

Doulas in Connecticut.<sup>2</sup> The STOP Grant Administrator was able to make an introduction and provide a quick overview of the work at OPM CJPPD. After attending these meetings, OPM CJPPD reached out to Cynthia Hayes the Director of the Doula Advocacy Team for Doulas4CT, the statewide coalition. Cynthia shared her career as a doula and an advocate for doulas including recent partnerships with State agencies around Medicaid reimbursement for doula services. Cynthia expressed the importance of legislation and policies being doula-informed. The conversation identified pregnant and postpartum people as a vulnerable population for intimate partner violence. Takeaways from the conversation included

- Disjointed services, services may exist but function in isolation.
- Black and Puerto Rican birthing persons are vulnerable to such conditions as
   'Medical kidnapping'; medical professionals instrumental in having babies removed
   from the home based on judgment and mischaracterization towards the families'
   decisions about medical interventions or lifestyle of the family.
- Doulas as a liaison, helping clients and their families to navigate systems centered around informed consent.
- More training is necessary around IPV that will assist in engagement with families and further help navigate vulnerable clients to resources

A goal from this meeting is to build a specific training for Doulas on the resources available when they feel their clients are experiencing intimate partner violence. A specific training is needed to address complexities around services that may be available and aren't accessible for the BIPOC community. Cynthia discussed the overrepresentation of Black and Latinx parents within systems; for this reason, it is essential to build a culturally relevant training to ensure that a trusted network of services providers is provided to the Doulas as resources.

<sup>&</sup>lt;sup>2</sup> Doulas in Connecticut - Earth's Natural Touch: Birth Care and Beyond (earthsnaturaltouch.com)

The most recent culturally specific meeting was between the STOP Grant Administrator and Condencia Brade of the National Organization of Sisters of Color Ending Sexual Assault (SCESA). Olga Trujillo connected OPM CJPPD with SCESA through a Technical Assistance call with ALSO. SCESA is a national organization that is based in Connecticut and works with communities of color. Condencia was able to give the STOP Grant Administrator a detailed recent history of the landscape of culturally specific sexual assault conversations in the State of Connecticut. Moving forward from this conversation the STOP Grant Administrator learned and recognizes that mainstream organizations are not able to provide culturally specific services. Condencia shared that culturally specific services in Connecticut for domestic violence, sexual assault, dating violence, and stalking are almost nonexistent as there has not been funding for these organizations to build capacity for services. The STOP Grant Administrator recognizes the gap in culturally specific services are not for a lack of need but due to absence of meaningful involvement and funding from mainstream and systems-based entities. Recommendations from these meeting included intentional conversations and consultation at the individual level with advocates from communities of color. OPM CJPPD will continue to meet with Condencia to build a strategy of inclusion and empowerment of culturally specific service providers in the State. SCESA is conducting listening sessions with communities of color agencies addressing sexual assault in Connecticut and the STOP Grant Administrator has been invited to attend the sessions. The largest takeaway from this meeting is to the importance of contracting with communities of color (also referred to as culturally specific) agencies to lead the work on addressing issues for communities of color.

#### **Consultation Trends**

The following trends have been identified by OPM CJPPD through broader consultation meetings, attending community events, the victim issues subcommittee, and following legislative testimonies. Three broad needs came up throughout conversations:

• Protective Services: broken protective and restraining orders, resulting in DV

homicide

- Connection and access to services across providers
- Funding culturally specific/nontraditional organizations and services

A recurring conversation in a variety of meetings has been around offenders breaking protective orders. The STOP Grant Administrator received testimony of victims doing everything right within a system and the protective services fell through. Several times this resulted in a domestic violence homicide or a murder/suicide. Stakeholders voiced concern that there is no real punishment for violations and service providers sometimes don't have enough time to complete a safety plan before the offender is released from custody. There has been recent legislation introduced around statewide GPS monitoring which could begin to remedy this problem if it receives adequate funding between the court, law enforcement, and victim advocates. There is a call for increased accountability for these protective orders to be respected and upheld as the current system function is resulting in homicide.

Increased demand for services across the behavioral health field has resulted in waiting lists or inability of organizations to take on new clients. In addition, the level of staff turnover and vacancies has resulted in lost relationships between agencies. Even when a partnership is reestablished it takes more time than before for direct service providers to exchange information to provide services.

Culturally specific and community-based services are not being funded. Private and public funders use messaging of high risk or ineligibility to not fund these programs. These programs are often volunteer-run and providing crucial services to the community. These conversations led to how funders can work within grant guidelines to make funding more accessible and intentional for direct services. Another barrier to receiving funding are the bureaucratic requirements. Policies and procedures should be assessed to ensure compliance with relevant conditions while minimizing the burden on direct service providers.

## D. Consultation and coordination with tribes (34 U.S.C. 10446(c)(2)(F); 28 C.F.R. 90.12(b)(3) and (c)(2)(iii))

While developing the FY 2022-2025 STOP Implementation Plan, OPM CJPPD established or grew its relationship related to the federal program with the state- and federally recognized tribes. The state has two federally recognized tribes — the Mashantucket Pequot Tribe and the Mohegan Tribe — and three state-recognized tribes: the Eastern Pequot Tribe, Schaghticoke Tribe, and the Golden Hill Paugusset Tribe.

Regarding the federally recognized tribes, both have tribal law enforcement departments that participate in CCADV's Domestic Violence Lethality Assessment Protocol (LAP) program. CCADV, with the assistance of STOP funding, provides LAP to law enforcement departments throughout the state. OPM CJPPD sent initial correspondence to gauge interest in discussing STOP and being part of the Planning Committee or planning process. Several exchanges of emails occurred and representatives from both Tribes expressed an interest in setting up an introductory meeting. Our partners at CCADV assisted us in our efforts to connect with the Tribes by providing us with additional contact information. Unfortunately, OPM CJPPD was unable to schedule a meeting before the initial deadline to submit the plan but remained committed to fostering these relationships throughout the life of the plan. A draft of the initial Implementation Plan was provided to each of the Tribes, as well as contact information to provide feedback.

OPM CJPPD made similar attempts to contact the state-recognized tribes. Initial correspondence was sent to the Eastern Pequot and the Schaghticoke Tribes to offer a meeting to discuss STOP funding and willingness to participate in the planning process. Our division received a response from the Eastern Pequot Tribal Chairman and set up a phone call to discuss the STOP funding and Implementation Planning process. OPM CJPPD did not receive a response to our initial email from the Schaghticoke Tribe. Correspondence was not sent at this time to the Golden Hill Paugusset Tribe, due to an inability to confirm contact

Pequot and the Schaghticoke Tribes, along with contact information to provide feedback.

OPM CJPPD did not receive any feedback regarding the Implementation Plan prior to the initial draft of the plan being submitted. OPM CJPPD remains committed to continue outreach efforts to request input regarding the Implementation Plan and pursue a lasting partnership with our state recognized tribes to help address issues related to domestic violence, sexual assault, dating violence and stalking in all our communities in Connecticut.

As a part of revising the Implementation Plan, OPM CJPPD convened individual meetings with representatives from the Mohegan Tribe and the Mashantucket Pequot Tribe on April 3, 2023, and April 4, 2023, respectively. The meetings served as an introduction between OPM CJPPD, and the sovereign nations centered around VAWA-related crimes. OPM CJPPD continued outreach to state recognized tribes. After additional correspondence with Mitchel Ray, Chairman of the Eastern Pequot Tribal Nation, the division was provided contact information for Tribal Councilor Valerie Gambrell. In an effort to establish a contact with the Schaghticoke and Golden Hill Paugusset Tribes. OPM CJPPD sent email correspondence and made phone calls to the contacts gathered while researching each Tribal Nation.

#### Mohegan Tribe

Representatives from the Mohegan Tribe included Chief of Staff Charles Bunnell, Health and Welfare Executive Officer Betty Ann MacDonald, and Director of Behavioral Health Teri McHale. Discussion covered an array of topics, such as criminal justice system interactions across tribal, municipal, state, and federal governments, and centering on crime victim needs and service delivery. It was also shared that Mohegan tribal members were part of advocating for the passage of VAWA and expressing the need for awareness and action around murdered and missing Indigenous women and people. MacDonald, the lead for tribal member services, discussed the delivery of services to tribal members focusing on the holistic well-being of each person. Morton, who directs behavioral health, addiction, and social services, raised the

development and delivery of programming and interventions addressing the four VAWA crimes and engaging men and at-risk youth in the conversation on violence and harm.

MacDonald and Morton emphasized the importance, as a critical component of trauma-informed care, of meeting people where they're at in their healing journey. A fundamental component of service delivery is the acknowledgement of the historical trauma of Indigenous communities along with all people of color and starting conversations with breaking down barriers to build trust.

#### **Mashantucket Pequot Tribe**

Representatives of the Mashantucket Pequot Tribe included General Counsel Jody

Cummings and Tribal Councilor Michele Scott, who chairs the Tribe's Economic

Development and Health & Human Services Committees. The meeting covered the Tribe's willingness to partner with OPM CJPPD on STOP, with discussions including development and administration of trainings to criminal justice system professionals on improved interactions with, and service delivery to, Indigenous people residing off Tribal land. For example, the Tribe's child protective services agency works closely with the Connecticut Department of Children and Families to serve children who are in non-tribal public schools.

Councilor Scott shared insights regarding kinship within tribal communities. She provided the example that in Connecticut if one calls the police on a neighbor, that person is unlikely to be a relative, while on Mashantucket Pequot land there is likelier to be shared kinship and ancestry among neighbors.

Councilor Scott expressed praise for Connecticut's enactment of *An Act Equalizing*Comprehensive Access to Mental, Behavioral and Physical Health Care in Response to the Pandemic (Public Act 21-35), which establishes the Commission on Racial Equity in Public Health. The commission's duties include the collection, analysis, and reporting of racial disparity data. Councilor Scott also requested that OPM CJPPD work with Mashantucket Pequot to identify opportunities for subcontracting and other forms of partnership with

Mashantucket Pequot for carrying out the STOP functions to tribal citizens on and offreservation to help ensure that the program is effectively and comprehensively reaching tribal communities and doing so in culturally appropriate ways

#### **Eastern Pequot (State recognized)**

OPM CJPPD Associate Director and the STOP Grant Administrator met with Tribal Councilor Gambrell over the phone on Monday April 17th, 2023. Tribal Councilor Gambrell was given an updated version of the plan to review ahead of the meeting. Tribal Councilor Gambrell shared her thoughts as a member of the tribal councilor and from working at the Department of Children and Family Services, a CT State agency, for 23 years. The Eastern Pequot tribe lost their federal recognition in 2005 and Tribal Councilor has been fighting since then to regain federal recognition as that is when the tribe lost members and resources. Historical trauma was acknowledged as a barrier for Eastern Pequot people to access mainstream services as they are wary of government and predominately white institutions. Culturally specific services were discussed as an option as it was relayed to OPM CJPPD that issues relating to the four crimes of STOP are occurring within their community. Most of the members live in New London County. Tribal Councilor Gambrell proved to be an advocate for her people and expressed interest in attending the STOP Steering Committee that OPM CJPPD plans to establish on a regular basis. Tribal Councilor Gambrell echoed a statewide concern of lack of representation for systemically oppressed communities within statewide services. OPM CJPPD is hopeful for a continued relationship with the Eastern Pequot tribe to provide additional insight on how to move services to be more accessible to all groups.

#### **Schaghticoke Tribal Nation (State recognized)**

OPM CJPPD met with Melissa Wesaw, a member of the Schaghticoke Tribal Nation.

OPM CJPPD initially reached out to the Chief of the Schaghticoke tribe who connected OPM CJPPD with Melissa. As a state-recognized tribe there are limited resources made available to

the Schaghticoke tribal nation which means victims/survivors from their community use the State legal system. The Schaghticoke tribe has a reservation that members can visit, there are no residents on reservation land. Input from this conversation included the importance of access to a victim advocate to assist with navigation of the legal system. The conversation included the topic of legal abuse where an offender can use the legal system to perpetuate harm. Melissa has been invited to the STOP Steering committee and OPM CJPPD will continue to stay engaged with the Schaghticoke tribe.

#### **Next Steps**

Following the April meetings with the Mohegan and Mashantucket Pequot Tribes, OPM CJPPD staff shared copies of the implementation plan and a request for feedback. Staff also provided links to solicitations for OVW discretionary tribal government grant programs and offered technical assistance completing the solicitation process. Additionally, representatives or members will be invited to the next STOP Steering Committee meeting occurring in May 2023. The Mashantucket Pequot Tribal representatives mentioned a strong relationship with the State recognized Tribes. As OPM CJPPD builds a relationship with the federally recognized tribal members opportunities will be provided to include state represented tribes. Representatives from the Eastern Pequot and Schaghticoke tribes were sent an invitation to the next STOP steering committee to discuss involvement. As communication develops with other tribes, OPM CJPPD staff will invite representatives or members also to attend STOP Steering Committee meeting.

### **Tribal Officials Contacted**

## **Federally Recognized Tribal Nations**

Mashantucket Pequot Tribe Contacts	Title
Lori Potter	Director of Public Affairs
Alice Munyen	Chief of Staff
Jody Cummings	General Counsel
Michele Scott	Tribal Councilor
mptncommunications@mptn.nsn.gov	

Mohegan Tribe Contacts	Title						
Charles Bunnell	Chief of Staff						
Cathy Soper	Director of Communications						
Betty Ann MacDonald	Health and Welfare Executive Officer						
Teri McHale	Director of Behavioral Health						
communications@moheganmail.com							

### **State Recognized Tribal Nations**

Eastern Pequot Tribe Contacts	Title
Mitchel Ray	Tribal Chairman
Valerie Gambrell	Tribal Councilor
Eptn1683@yahoo.com	

Schaghticoke Tribe Contacts	Title and Comments
Melissa Wesaw	Schaghticoke Nation Tribal member
STN1699@yahoo.com	Correspondence was sent to a general inbox that was provided on the Tribal Nation's website.
860-535-1277	Attempts were made to establish a contact for the Tribe through this number.

Golden Hill Paugusset Tribe Contacts	Comments
jewel4198@yahoo.com	Correspondence was sent to a general inbox that was provided on the Tribal Nation's Facebook page.
203-377-4410	Attempts were made to establish a contact for the Tribe through this number.

E. A summary of major concerns that were raised during the planning process and how they were addressed or why they were not addressed, which should be sent to the planning committee along with any draft implementation plan and the final plan. (28 C.F.R. 90.12(c)(2)(ii)

Throughout the course of the Planning Committee meetings, multiple concerns were raised about how Connecticut provides services to victims. The committee did an excellent job of maintaining an open dialogue, discussing these concerns, and bringing forth ideas to address them. There was also an understanding that STOP funding would not be the best fit to solve every problem. The committee remained engaged and thoughtful as it discussed the real issues facing their organizations or agencies, and their plans for the future as victim services providers.

One of the main concerns expressed by most of the members was how the complexity of the cases has risen in recent years. An apt term, "Comprehensive Advocacy," was used by one of the committee members. They spoke about how service providers have shifted from a crisis management model to a case management model. Organizations and agencies are not looking to provide a "band-aid" to a victim's issues. Instead, they are looking to do their best to "meet individuals where they are" and provide comprehensive, victim-centered services, as they noted that individuals are engaged with their agencies for a longer period of time. That has led to more long-term advocacy and cases that require more resources and time, as well as additional training for staff members providing these services. The goal has been to address any underlying issues, including but not limited to mental health issues, substance abuse, housing insecurity, childcare, and employment.

Another concern brought up by members of the committee relates to an increase in the number of victims who wish to keep the family together following a domestic violence incident. This has resulted in a shift in the mindset and practice of service provision, continuing their practice of providing victim-centered services designed to achieve this goal. These services are

often complex and may be needed on a long-term basis, so additional resources are necessary to provide these services to victims and their families. The committee also discussed the need for programs focused on child and family advocacy, programs that make sure everyone in that household can express any trauma they felt from the incident so that it can be properly addressed as they attempt to move forward.

The committee discussed how we could create and fund programs that are more proactive than reactive. Service providers need flexibility because successful outcomes look different for each individual with whom they come into contact. The discussion led to ways OPM CJPPD can engage with subgrantees and support the programs that recognize this shift.

One example that was mentioned by committee members was the lack of Men's groups in the communities that focus on education and prevention of domestic violence and sexual assault. The Committee discussed how non-justice involved community-based groups have disappeared over the years. Committee members mentioned the void in prevention services multiple times. The group discussed how STOP might not be the best route to address this due to guidelines but agreed that it was an issue that could be addressed through other funding sources.

Law enforcement members of the committee expressed concern that Mobile Crisis Teams were not currently available 24 hours a day for face-to-face services. They expressed the benefits of providing services to individuals before they become justice involved. They further indicated that the presence of a trained crisis intervention professional when responding to calls involving domestic violence or sexual assault is beneficial to both the officer and the individual. A recognition brought up by the Committee was that staffing levels affect the ability to follow up on domestic violence calls. In response to these concerns, OPM CJPPD learned that the Mobile Crisis Teams are already working on providing in-person services 24/7 throughout the state. One potential plan discussed to address any gaps in following up on domestic incidents was a proposal to support domestic violence advocates embedded in police departments. CCADV informed the group that a similar program is being funded through a different funding source.

CCADV was still gathering data to determine the success of that program.

The need to improve data collection was brought up several times during the meetings. The belief is that if the correct data is collected and appropriately analyzed, the lessons learned from that data can aid in prevention efforts. A comprehensive needs assessment is something the committee supported. A state agency, Office of Victim Services within the Judicial Branch, is working on creating a Victim Needs Assessment. The committee agrees that developing better metrics and a way to track what happens to victims after they exit their programs is a goal. Members discussed LAP and how it has been an example of how improved reporting can positively affect policy, procedures, and outcomes. OPM CJPPD pledged to improve how it collects and analyzes the data it receives as part of quarterly and final progress reports. The division also intends to use a member of our Research Unit to assess our current process and provide us with ideas and tools to overhaul our current model.

Improving available services to underserved and underrepresented communities was a significant concern. The Committee wants to develop a better understanding of why some communities report at lower percentages than others and indicated this was a topic to research. The State of Connecticut needs to provide opportunities to engage and safe ways to seek services to culturally specific communities, individuals facing language barriers, people living with a disability, members of the LGBTQ community, faith-based communities, and immigrants. Accomplishing this goal is as a top priority going into the next four years by the Committee. All members discussed how their organizations and agencies had developed programs to focus on underserved communities.

The committee also recognized that victims in underserved communities often seek services from non-traditional sources. There were several discussions focused on the need to make a greater effort to identify these agencies and entities, so as to provide services to victims where they are comfortable accessing services and that effectively address their needs.

The committee discussed how collaboration between all parties could lead to more

widespread successful outcomes. OPM CJPPD will be doing more outreach in the years to come to build relationships with organizations in the state that we don't work with on a day-to-day basis but are doing fantastic work for the communities we want to support.

The final major concerns are related. At the time of the meetings, everyone was aware of the belief that there would be a cut to VOCA funding over the next two years. The other concern was a desire to improve collaboration across agencies and organizations. OPM CJPPD would like to improve its coordination with the SAA for VOCA, FVPSA, and the RPE. Making those improvements will be as vital as ever with the proposed cuts that many victim services agencies and organizations are facing. Increased collaboration between our subgrantees can also be a way to maximize the funding we do have to make sure the services are available to all communities in the state. OPM CJPPD has engaged the VOCA and FVPSA grant administrator and has already discussed ways to help offset the cuts in VOCA funding. We have discussed the potential of having regular meetings between the grant administrators so that collaboration is a continuous expectation and not just one that surfaces in crisis or when plans need to be submitted. The members of the Planning Committee expressed a willingness to continue meeting as a group on an agreed-upon schedule. OPM CJPPD believes that having this group continue to meet will strengthen bonds and produce fantastic new ideas and opportunities. During the meetings, discussion of collaborations between CCADV and the Alliance, the Alliance and DCJ, and others were already taking place. Continuing to come together will increase the chances of connections like this happening, which benefits all victims of domestic violence, sexual assault, dating violence, and stalking in our state.

F. A description of how the State coordinated this plan with the State plan for the Family Violence Prevention and Services Act and the programs under the Victims of Crime Act and section 393A of the Public Health Service Act (Rape Prevention Education), including the impact of that coordination on the contents of the plan. (34 U.S.C. 10446(c)(3); 28 C.F.R. 90.12(b)(6) and (g)(6)).

As the State Administrating Agency for STOP and the Sexual Assault Services Program

(SASP), OPM CJPPD seeks to ensure coordination between grant administrators for VOCA, the Family Violence Prevention and Services Act (FVPSA), and Rape Prevention Education (RPE) funding continues and is strengthened over the next four years. In Connecticut, all of these programs are administered out of different stage agencies. The Judicial Branch administers VOCA, The Department of Public Health oversees the RPE, and the Department of Social Services handles FVPSA. OPM CJPPD reached out to all administrators of these separate funding sources in preparation for writing this plan. The division was able to meet by way of videoconferencing with the VOCA and FVPSA grant administrators.

Collaboration between all the administrators and subgrantees maximizes the funding to provide effective programs that address state-wide victim needs and to make sure funds are efficiently used to address multiple areas of need. Discussions between the administrators focused on maintaining this collaboration and seeking ways to improve it. The possibility of scheduled meetings throughout the year was one that all wanted to pursue, so that we could discuss trends and address any funding gaps we saw much quicker. The meetings took on added importance as they provided a forum to discuss the impacts cuts to VOCA will have.

Table 5. Connecticut's VOCA Victim Assistance Award 2018-2021xxii

Table 5

Year	Amount Awarded
2018	\$36,452,243
2019	\$24,540,595
2020	\$18,131,939
2021	\$11,329,832

The significant decrease in VOCA funding was a concern among the administrators and non-profit organizations, state agencies, legislators, and the Executive Branch. The VOCA administrator provided information about cuts' impact and discussed how OPM CJPPD could

help during the next two years. Unfortunately, the amount of funding Connecticut receives for STOP, FVPSA, and RPE is not enough to replace VOCA funding cuts. Connecticut will utilize strategic planning and engagement with invested criminal justice stakeholders to use the resources intelligently, ensuring victims continue to get the services they need.

## IV. <u>Documentation from Prosecution, Law</u> <u>Enforcement, Court, and Victim Services Programs</u>

This documentation may be in the form of letters from current grantees or State- or Territory-wide organizations representing prosecution, law enforcement, courts and victim services able to comment on the current and proposed use of grant funds. The documentation must describe:

- 1. the need for the grant funds;
- 2. the intended use of the grant funds;
- 3. the expected result of the grant funds; and
- 4. the demographic characteristics of the population to be served including age, disability, race, ethnicity, and language background. (34 U.S.C. 10446(i)(2)(C))

The required documentation is provided in Appendix B.

### V. Plan for the Four-Year Implementation Period

This section should describe how the State will address the needs of sexual assault victims, domestic violence victims, dating violence victims, and stalking victims, as well as how the State will hold offenders who commit each of these crimes accountable. (28 C.F.R. 90.12(g)(3))

#### A. Goals and Objectives

1. Concise description of the State's goal and objectives for the implementation period. 28 C.F.R. 90.12(a)).

Goal 1: Intensify efforts to successfully identify obstacles to reporting and services for culturally specific and underserved populations within Connecticut.

- Objective 1.1: Identify and support projects that focus on providing services for survivors of domestic violence, sexual assault, dating violence, and stalking to populations such as racial and ethnic minorities, youth, individuals with disabilities, the LGBTQ+ community, people facing language barriers, and victims of human trafficking.
- Objective 1.2: Prioritize funding sought to address barriers to reporting violence committed against those in underserved communities.
- Objective 1.3: Provide funding to increase training and improve procedures and
  practices to victim service providers, state agencies, and local law enforcement
  related to interacting with domestic violence and sexual assault victims from these
  underserved populations.
- Objective 1.4: Identify and fund non-traditional organizations where victims from underserved communities seek services.

Goal 2: Support evidence-based programs that address offender accountability in a meaningful way to improve the long-term safety of victims of domestic violence, sexual assault, dating violence, and stalking.

- Objective 2.1: Support programs that seek to identify offenders at high risk of reoffending and develop tailored and effective programming to lower that risk.
- Objective 2.2: Provide funding to monitor and sanction offenders pre- and postadjudication of the criminal case.
- Objective 2.3: Provide support to programs seeking to ensure the Victim's voice is heard at all steps of the criminal process and victims can exercise their constitutional rights.

# Goal 3: Continue and increase the assistance provided to the advocacy and support of domestic violence and sexual assault victims.

- Objective 3.1: Ensure that outreach efforts and support services for sexual assault and domestic violence victims receive funding.
- Objective 3.2: Provide counseling and assistance to victims and their children living in domestic violence shelters and the community.
- Objective 3.3: Support programs focused on "meeting victims where there are" and demonstrate an understanding that victims may have long-term needs.
- Objective 3.4: Improve data collection and analysis to identify successful initiatives
  and ones that need improvements. Reliable data can also assist in developing
  prevention initiatives.
- Objective 3.5: Promote awareness of survivors of domestic violence, sexual
  assault, dating violence and/or stalking who experience human trafficking and
  support programs providing services to these survivors.
- Objective 3.6 Provide funding to increase training and improve procedures and

practices to victim service providers and law enforcement related to technology facilitated victimization.

# Goal 4: Provide funding to programs that enhance the prosecutorial response to domestic violence and sexual assault.

- Objective 4.1: Utilize funding for prosecutors specializing in prosecuting domestic violence cases.
- Objective 4.2: Providing funding to train prosecutors on all aspects of domestic violence and sexual assault cases, including communication with victims.
- Objective 4.3: Strengthen the relationship between sexual assault victim advocates and prosecutors. Provide opportunities for cross-training.

Goal 5: Improve upon the collaboration and coordination between non-profit organizations, state agencies, and local law enforcement to ensure reduction efforts for violence against women crimes are continuous and supported at all levels.

- Objective 5.1: Establish a STOP Advisory Work Group to meet throughout the year and discuss topical issues related to STOP's priorities.
- Objective 5.2: Create a Connecticut grant administrator's group consisting of the STOP, VOCA, FVPSA, and RPE administrators, that meets consistently to coordinate and share funding goals.
- Objective 5.3: Continue participation in state-wide commissions and advisory groups that express a stated goal of improving services for victims in Connecticut.

# Goal 6: Maintain awareness regarding the well-being of the advocates providing support to victims.

• Objective 6.1: Explore opportunities to offer administrative funding to victim service providers for training on vicarious trauma.

2. Description of how STOP funding will be used to meet the State's goal and objectives during the implementation period. (34 U.S.C. 10446(i)(1); 28 C.F.R. 90.12(a)).

OPM CJPPD has seen firsthand how STOP funding can be used to establish model policies and procedures and provide funding for the preeminent issues of our time. The office must continue to support the foundational projects and initiatives that have demonstrated positive impacts on the experience of victims. OPM CJPPD stands by its commitment to maintain funding for programs such as specialized domestic violence prosecutors, expansion and training of LAP, increased services and outreach into culturally specific communities, attempts to address barriers to services for historically underserved populations, and ensuring victim's voices are heard throughout the criminal justice process.

Throughout the implementation period, OPM CJPPD will continue to partner with non-profit organizations and state agencies to address the goals and objectives of this plan. OPM CJPPD will reach out to culturally specific and underserved communities to identify gaps in current services and create lasting relationships. The office intends to seek out victims/survivors in these communities to gain insight as to why they believe some of the historical obstacles to services have existed and the best ways to address them moving forward. Funding will be used to bolster programs that address offender accountability and have proven successful. Projects that ensure that a victim's voice and concerns are heard at every stage of the criminal case process will be supported.

OPM CJPPD will use STOP funding to meaningfully address domestic violence related homicide. Funds will support LAP and bolster collaboration between law enforcement and domestic violence advocates. The office will also support collaborative efforts between the Police Officer Standards and Training Council, Connecticut Police Chiefs Association, Connecticut State Police, and Division of Criminal Justice to address domestic violence-related homicide. OPM CJPPD intends to lead other collaborative efforts that will bring together experienced and diverse voices to discuss the best way to utilize STOP funding. The formation

of a year- round STOP Advisory Group will provide a space where best practices and bright ideas can be discussed. Those discussions will lead to the use of STOP funding in a way that adjusts to real- time data and expertise. While OPM CJPPD will rely on the people who work directly with victims of domestic violence, sexual assault, dating violence, and stalking every day, it is also imperative that we explore ways to make those front-line advocates are being cared for as well. The office intends to develop methods that use administrative funding to address vicarious trauma.

3. A description of how the funds will be distributed across the law enforcement, prosecution, courts, victim services, and discretionary allocation categories. (See 34 U.S.C. 10446(c)(4)).

OPM CJPPD has consistently complied with the STOP allocation requirements. During the years covered by this Implementation Plan, the office will continue to review project proposals with an eye on supporting those that align with the stated goals and objectives and maintain compliance with the allocation requirements. The dedicated STOP grant administrator will be tasked with ensuring that among all active STOP grants at least 25% of the award goes to prosecution. at least 25% goes to law enforcement, at least 30% to victim services of which at least 10% must go to a culturally specific community-based organization, at least 5% goes to state and local court, and the remaining 15% are discretionary funds which typically support victim services projects. Programs that address service gaps for underserved communities will be prioritized when it comes to the use of discretionary funding.

1. Information on how the State plans to meet the sexual assault set-aside, including how the State will ensure the funds are allocated for programs or projects in two or more allocations (law enforcement, prosecution, victim services, and courts). (34 U.S.C. 10446(c)(5)).

Connecticut plans to exceed the 20% sexual assault set-aside to meaningfully address sexual assault required by STOP guidelines. Historically, the state has complied with the additional requirement that the set-aside funds be allocated to programs or projects in two or more allocation categories by focusing on awarding funds to the law enforcement and victim services categories. The funding will support a collaboration between the Connecticut Parole Services Special Management Unit, which contains parole officers assigned sex offender cases, and sexual assault victim advocates. This initiative ensures that victims/survivors of sexual assault have an advocate during the entire parole process. The advocates are essential to keeping the victim informed and notified and making sure the victim has an opportunity to provide input at the appropriate times.

Designated set-aside funds also support a program that allows bilingual sexual assault victim advocates to work at multiple Alliance member centers throughout the state. These advocates provide comprehensive services to victims of sexual assault who are more comfortable speaking in a language other than English. The services include but are not limited to crisis intervention, support groups, advocacy, and being at the victim's side at the hospital, police station, and court. This program not only meaningfully addresses sexual assault but is also one of the more significant issues for underserved communities.

OPM CJPPD has made a concerted effort to identify and fund projects that seek to provide services to victims of human trafficking. STOP funds will be used to increase awareness of the intersection between the four crimes under STOP and human trafficking and train community-based organizations on how to recognize trafficking victims and provide them with the quick and comprehensive services they need. Initiatives that seek to provide those services

specific to the victims of sexual assault and human trafficking will be funded. Throughout the four-year implementation period, Connecticut will continue to seek out organizations and programs trying to address this increasing and dangerous problem.

During the Planning Committee meetings, a proposal to use STOP funding to provide a dedicated sexual assault victim advocate to a State Attorney's office was discussed. OPM CJPPD is planning to explore this possibility with the STOP Advisory Group. Exploratory conversations also centered on providing training to prosecutors focused on sexual assault cases and all aspects of prosecuting these cases.

2. Goals and objectives for reducing domestic violence-related homicides within the State, including available statistics on the rates of domestic violence homicide within the State and challenges specific to the State and how the plan can overcome them. (34 U.S.C. 10446(i)(2)(G); 28 C.F.R. 90.12(f)).

#### **Goal 1: Increase Offender Accountability.**

- Objective 1.1: Provide training to prosecutors and law enforcement to improve
  domestic violence investigations and cases handling. Training will focus on a newly
  created Domestic Violence Homicide Investigative toolkit, stalking, and strangulation
  case investigations.
- Objective 1.2: Continue to fund LAP training efforts for law enforcement, evaluations
  of LAP to identify areas needing improvement, and safety planning training for law
  enforcement and domestic violence advocates.

#### Goal 2: Increase awareness and advocacy of healthy relationships.

- Objective 2.1: Provide funding to projects designed to prevent dating violence.
- Objective 2.2: Fund programs and initiatives addressing co-occurring issues and cross-training domestic violence advocates and law enforcement.

Objective 2.3: Explore avenues to improve identification and responses to mental health issues.

#### Goal 3: Improve services to underserved communities.

• Objective 3.1: Improve outreach and services for victims from culturally specific and

underserved communities to address any barriers to reporting and seeking services.

• Objective 3.2: Fund programs that provide counseling and services to the families and children of the victim.

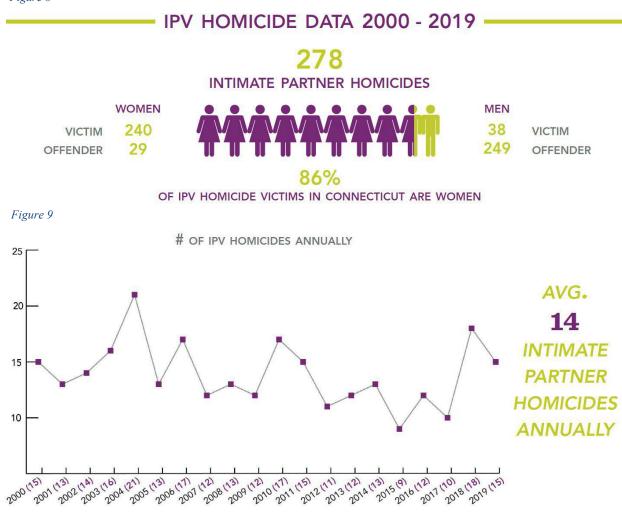
#### Goal 4: Enhance victim safety initiatives.

- Objective 4.1: Provide support for and develop training for law enforcement and domestic violence advocates on the data-driven likely precursors to escalations of violence.
- Objective 4.2: Improve Victim services available for events such as an offender's removal from GPS monitoring, an offender's release from the Department of Correction, or the end of an offender's period of probation or parole.

#### **Domestic Violence-Related Homicide**

There were 23 domestic violence homicide incidents in 2020 within Connecticut. Those incidents resulted in 29 deaths; 24 victims and five offender suicides. xxiii Intimate partner violence is one of the main areas Connecticut wants to focus on in its efforts to reduce domestic violence-related homicides.

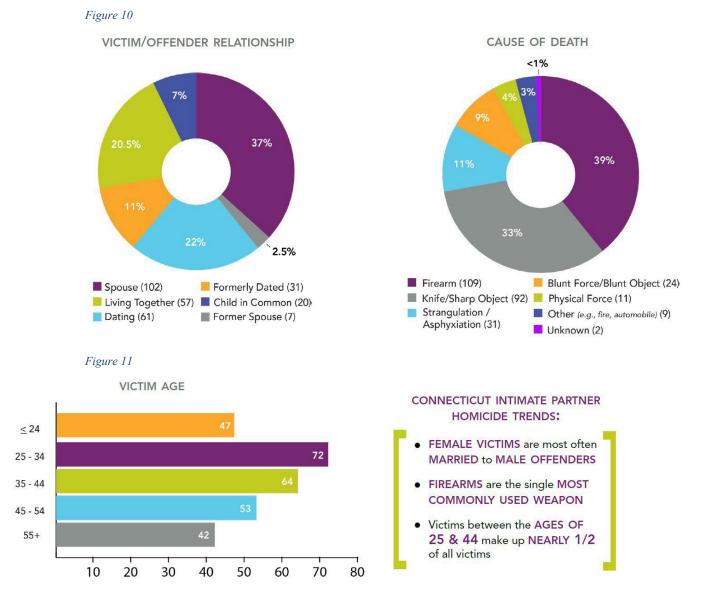
Figures 8 & 9. Intimate Partner Homicides from 2000-2019<sup>xxiv</sup>
Figure 8



To develop a plan to address domestic violence-related homicides, developers must understand the factors that led to these tragedies in the past. Awareness of the relationship between the victim and offender or the cause of death can provide insight into which programs should be funded to reduce these incidents.

Figures 10 & 11. Victim/Offender Relationship, Cause of Death, and Victim Age from 2000-

2019xxv



Connecticut has embraced the nationally recognized LAP model and has been very intentional about supporting and funding programs that increase the use and effectiveness of LAP. The model strives to reduce domestic violence-related homicides by improving the ability to address the challenges of identifying victims in high-risk situations and connecting those individuals with the proper services and support from domestic violence advocates. This program is a large part of the response to Connecticut's challenges in meaningfully addressing domestic violence-related homicides.

Offender accountability and victim safety are topics that Connecticut will continue to address during the period covered by the implementation plan. The obstacles or challenges faced in improving offender accountability and victim safety measures can be overcome through improved training of law enforcement and prosecutors, a better understanding of intervention points, and an enhanced focus on identifying an escalation in violence. Connecticut will work with domestic violence services providers, law enforcement, the courts, prosecutors, mental health professionals and all of our criminal justice stakeholders to develop programs and initiatives that positively impact the reduction of domestic violence-related homicides.

#### C. Addressing the Needs of Underserved Victims

Description of how the State will recognize and meaningfully respond to the needs of underserved populations as identified above in II.B. (34 U.S.C. 10446(e)(2)(D) and (i)(2)(F); 28 C.F.R. 90.12(d)(4)).

1. Description of how the State plans to meet the needs of the identified underserved populations, including, but not limited to, culturally specific populations, victims who are underserved because of sexual orientation or gender identity, and victims with limited English proficiency. (34 U.S.C. 10446(i)(2)(E); 28 C.F.R. 90.12(e))

Connecticut has been committed to and will continue to be throughout the implementation plan period to addressing the needs of victims from underserved communities who experience domestic violence, sexual assault, dating violence, or stalking. All of the Planning Committee's meetings involved discussions about how the state can do a better job of meeting victims where they are and identifying agencies and organizations within the community where victims may seek services. Improving our ability to listen to and learn from the perspectives of individuals from underserved and marginalized communities will allow us to serve these communities more effectively. One of the main obstacles to address is identifying and addressing barriers to reporting and seeking services in these communities. Connecticut is dedicated to creating safe environments for all its residents to come forward and report violence being done to them and seek services to help these individuals in time of need.

The Planning Committee recognized the importance of building a foundation within these communities and investing in the people and the services that they need. The goal is to develop partnerships with organizations trusted within these communities to create initiatives that the community can embrace. Building trust within these communities will be vital for the success of any future programs. Awareness months related to the four crimes under STOP are a great opportunity for the administrator to attend community events put on by stakeholders. Attending these events allows the administrator to view STOP-funded programming first-hand and build a relationship with subgrantees. In Connecticut agencies working on similar topics often collaborate. For example, for Domestic Violence Awareness month in October Hispanic Health Council hosted an awareness event at the local library and the CEO of the Domestic Violence member center in the area attended. These collaborations allow the STOP administrator to build relationships across agencies and acknowledge the importance for non-culturally specific organizations to support culturally specific organizations and their programming. This trust will help move Connecticut forward in its mission to eliminate historical barriers that victims have faced. The state will explore new ways to engage underserved communities, including racial/ethnic minorities, the LGBTQ+ community, individuals with limited English proficiency, immigrants, and individuals with disabilities. The Alliance runs a Queer Caucus and puts on events, currently through Zoom. The STOP administrator plans to attend these events, like one that was put on with Anchor Health CT, Connecticut's leading health center for the LGBTQ community. Alliance member centers also partner with the Connecticut Institute for Refugees and Immigrants (CIRI). The existing partnership with coalitions can be strengthened through strategic planning of use of STOP dollars. Connecticut is also seeking to improve interactions between Deaf and Hard of Hearing people who experience domestic violence and law enforcement. The state is looking into programs that increase the accessibility of connecting a victim with a victim advocate. CCADV recently hired a Director of Cultural Diversity and Accessibility. This position is supported by STOP funds. The CT STOP administrator will work

with this individual to assess the needs of underserved survivors in the state and identify culturally specific organizations that could benefit from STOP funding. The CCADV website lists the program objectives for this program as; developing best practices for working with underserved, under-represented and/or not served at all populations, enhancing and creating culturally and linguistically relevant materials, providing statewide, culture-specific training to improve professional capacity, and building and sustaining meaningful community partnerships with agencies who are providing culture specific services in the state. CCADV also reports there is a steering committee to inform this position comprised of committee members, representing regional, local, community and other entities who are actively engaged in working with underserved populations in Connecticut. OPM CJPPD can utilize the existing relationship with CCADV to work with this individual on building and maintaining relationships in the community to provide services to survivors.

Funding will be designated for the training of those who interact with victims to ensure they are provided with the knowledge and tools to interact and serve members of these communities in the most appropriate and helpful way.

2. A description of how the State will ensure that monies set aside to fund culturally specific services and activities for underserved populations are distributed equitably among those populations. (34 U.S.C. 10446(e)(2)(D) and (i)(2)(F); 28 C.F.R. 90.12(d)(4))

Connecticut will ensure that the STOP funding designated to be set aside to fund culturally specific services and activities for underserved populations will be distributed equitably among the populations that we identify. The outreach planned to identify and partner with organizations across the state that work with and in these communities will broaden our base of recipients of funding. OPM CJPPD will use recent census data and up-to-date criminal statistics to identify the populations with the most pressing needs. OPM CJPPD has existing relationships with the domestic violence and sexual assault coalitions. These organizations have established relationships with the community that OPM CJPPD will work with them to identify the needs of

underserved populations. For example, the CT Alliance to end sexual violence has identityspecific caucuses that OPM CJPPD can collaborate with. Groups include the Women of Color Caucus Against Sexual Assault and the Queer Caucus Against Sexual Assault. CCADV recently hired a Director of Diversity & Accessibility whose salary is partially funded through the underserved STOP grant to the coalition. OPM CJPPD will seek to build a relationship with this individual to identify organizations and programs for underserved populations. The coalitions represent member centers throughout Connecticut, each serving different geographic areas. The Hispanic Health Council (HHC) is a nationally recognized, statewide community-based organization, whose mission is to improve the health and social well-being of Latinos and other diverse communities. STOP funds are used to support programs at HHC that support raising awareness of gender-based violence in the community and providing culturally specific services. Population characteristics (Table 1) report the Latinx population makes up 17.3% of CT's population while Victim Demographics (Figure 1) report that Latinx folx make up 31% of victims receiving services. Given this information, CT has focused on funding programs that support outreach and awareness to the Latinx community. The Division of Criminal Justice (DCJ) who receive STOP funding for domestic violence prosecutors report the highest need for services in New Haven and Hartford. HHC is located in Hartford and has established a relationship with the community through their plethora of programming and services and partnership with local spaces, like the library. Connecticut will continue to work with HHC to ensure that equitable distribution of funds is achieved, and statewide culturally specific services are accessible. HHC is currently focusing on outreach and awareness to all under or unserved communities and OPM CJPPD will use STOP funds to support these efforts to ensure equitable distribution of services across underserved communities. At the moment the Latinx community demonstrates the highest need and CT will continue to monitor statewide data to assess how funds are distributed.

The office will consider the current state of domestic violence, sexual assault, dating violence,

and stalking programs available to these populations and then seek to fund programs that equitably address the service gaps.

3. Specifics on how the State plans to meet the set-aside for culturally specific community-based organizations, including a description of how the State will reach out to community-based organizations that provide linguistically and culturally specific services. This could include specific information as to which subgrantees met the required 10% set aside within the victim services allocation for culturally specific organizations during the prior funding cycle. (34 U.S.C. 10446(i)(2)(E); 28 C.F.R. 90.12(g)(2))

OPM CJPPD has partnered with the Hispanic Health Council (HHC) to create and maintain programs that meet the set-aside requirements for culturally specific community-based organizations. The two entities plan to continue this partnership through the new implementation plan period. As discussed earlier, OPM CJPPD also plans to continue outreach to other culturally specific organizations within the state to explore opportunities for future partnerships.

During this current funding cycle, the funds allocated to the 10% set-aside within the victim services category for culturally specific organizations have supported two programs at the HHC. The first program involved increasing awareness and outreach for domestic violence in Hispanic communities. The program has a fantastic Community Liaison that has led efforts to improve services available to community members. HHC provides advocacy, counseling, and access to a wide-ranging network of services that victims can use for any needs that present themselves as they navigate through an extremely tough period. The second program is a pilot program established within the last two years to address the need to provide services to raise awareness of gender-based violence and the intersection of domestic violence and sexual assault and human trafficking. Connecticut has been informed by Love146, an anti-trafficking organization that the population they serve includes 62% having experienced sexual violence beyond human trafficking, 28% having experienced domestic violence, and 14% have experienced dating violence. As a result of this polyvictimization, they have highly complex trauma needs and they are at high-risk for re-victimization. HHC continues to build on the services

available to these victims and seeks to address the real safety concerns that these victims have when they come forward. The program works in unison with the Domestic Violence programming raising awareness of gender-based violence in the community. STOP funded programming is for HHC to provide services for Latinx women, youth and other vulnerable populations at risk in the Hartford area. The staff member on this program works with community organizations to raise awareness of vulnerabilities that can lead to sexual exploitation/assault.

#### D. Grant-making Strategy

#### 1. Timeline for the STOP grant cycle. (See 28 C.F.R. 90.12(g)(8)).

Connecticut has historically relied on the OPM CJPPD website to announce new STOP funding. During the 2022-2025 plan period, OPM CJPPD will continue to use the website as a source for promoting funding opportunities but will also be more proactive about outreach to organizations in the state whose stated missions fit in line with STOP goals and objectives.

The typical grant cycle follows the state's fiscal year, which runs from July 1-June 30 or the calendar year. Applications are asked to be completed two months before the grant's start date. This request allows OPM CJPPD to provide input or ask for revisions. It also builds in time for legal review and the signature process. OPM CJPPD will notify the organizations of approved awards once all internal processes are completed, and the departments required to approve a new grant have weighed in.

OPM CJPPD has enjoyed an excellent relationship with its subgrantees and consistently meets with them throughout the year. New grantee meetings are important to establish performance reporting schedules, new user training for our current grant management system, and to provide subgrantees with an opportunity to ask any questions. Quarterly progress and expense reports are due 15 days after the end of each quarter that a grant was active. A final closeout progress and expense report are also due 15 days after a grant ends. These reports allow OPM CJPPD to stay on top of any programmatic or financial issues that may be occurring and to ensure that the programs are on pace to achieve the goals and objectives described in the initial applications. On-site visits slowed during the Covid pandemic but are expected to increase during the plan period. The office utilizes telephone calls and videoconferencing meetings to remain engaged with all of the organizations that we partner with.

2. Description of how the State will ensure that eligible entities are aware of funding opportunities, including projects serving underserved populations. (28 C.F.R. 90.12(d)(5) and (g)(4))

In the past, the state has relied on posting the funding opportunity on OPM CJPPD's website to create awareness. During this next planning period, more focus will be placed on creating awareness of the funding statewide, especially with organizations that provide services to underserved populations. Members of OPM CJPPD will seek out meetings with organizations dedicated to the goals established by STOP. The objective will be to have introductory conversations about our office's administration of STOP and their fit within the funding opportunity. These meetings will also give OPM CJPPD a chance to learn more about the great work that these organizations are already doing. To identify organizations, OPM CJPPD will rely on the aid of domestic and sexual assault service providers, state agencies, and other criminal justice stakeholders. The outreach will be made through telephone calls, emails, and letters. OPM CJPPD will also use the many committees and commissions that office members sit on to spread awareness of the STOP funding opportunity.

This more comprehensive and proactive approach to providing information about STOP funding will ensure that eligible entities and particularly the ones servicing underserved communities are aware of this opportunity. In addition, the online announcements will continue to promote awareness.

3. Description of how the State will ensure that any subgrantees will consult with victim service providers during the course of developing their grant applications in order to ensure that the proposed activities are designed to promote the safety, confidentiality, and economic independence of victims. (34 U.S.C. 10446(i)(2)(D))

OPM CJPPD views safety, confidentiality, and economic independence from perpetrators as some of the most important priorities for victims. OPM CJPPD has followed several procedures to ensure that subgrantees design their programs with this priority in mind. All subgrantees must sign the *Acknowledgement of Notice of Statutory Requirement to Comply with* 

the Confidentiality and Privacy Provisions of the Violence Against Women Act provided by the Office on Violence Against Women before any grant can be approved. The application process requires that a narrative be submitted to explain the program and all measures taken to protect the safety and confidentiality of victims. The Connecticut Division of Criminal Justice (DCJ) and the Connecticut Judicial Branch are the two subgrantees that are state agencies. DCJ is responsible for prosecuting criminal cases in the state and works with domestic violence and sexual assault advocates and service providers. CCADV and the Alliance have partnered with DCJ on STOP funded projects and Initiatives. A member of DCJ will be a part of the STOP advisory group, and future STOP grants will be discussed within the group allowing victim service provider representatives to consult on those projects. The Judicial Branch has its own Office of Victim Services and administers VOCA. The Judicial Branch will also have a representative on the advisory group allowing them a presence in the consultation process.

4. Description of how the State will identify and select applicants for subgrant funding, including whether a competitive process will be used. If different selection methods will be used for each allocation category, describe the method. (28 C.F.R. 90.12(g)(8))

OPM CJPPD does not use a competitive process to identify and select applicants who will receive STOP funding. The prosecution and courts categories follow the sole source method for the distribution of STOP funds. The 5% of STOP funding allocated to the Courts goes to the Judicial Branch Court Support Services Division. DCJ receives the 25% assigned to the prosecution category. These agencies were chosen because they are the only state agencies in each of the respective categories. The victim services, law enforcement and discretionary category allotments are distributed through the pass-through method. The state's domestic violence and sexual assault coalitions develop grant applications and submit them to OPM CJPPD. Other victim service providers who provide services to victims of domestic violence, sexual assault, dating violence, and stalking are eligible to submit applications. CCADV and the Alliance have partnered with law enforcement to develop projects submitted for the law enforcement category. OPM CJPPD does an internal review of the grant packages submitted to confirm that the proposed program addresses the goals and objectives required by STOP and is

# 5. Whether STOP subgrant projects will be funded on a multiple or single-year basis. (See 28 C.F.R. 90.12(g)(8))

STOP projects are capped at one year for an initial grant period. OPM CJPPD maintains consistent contact with its subgrantees, so if an extension of the grant period is needed as the year ends, the subgrantee will contact OPM CJPPD. Subgrantees have to explain why they want to extend the grant period and why the funds were not fully expended in the time initially provided. A new financial plan must also be submitted to detail how they plan to expend the funds in the additional time they request fully. OPM CJPPD has approved grants with grant periods of three and six months if the narrative and budgets for those projects clarify that the grant's purpose can be accomplished in a shorter time frame.

6. Description of how the State will determine the amount of subgrants based on the population and geographic area to be served. (34 U.S.C. 10446(e)(2)(B) and (i)(2)(F); 28 C.F.R. 90.12(d)(2))

Connecticut awards funds in the prosecution and courts categories to DCJ and the Judicial Branch, respectfully. Each are state agencies that provides services to all areas of the state. The STOP funded programs that have been approved from these agencies have focused on some of the larger cities in the state, New Haven and Hartford. These two cities have had the highest number of domestic violence arrests from 2016-2020.xxvi

Figure 12. Total Family Violence Arrest Incidents – Intimate Partner Arrest Incidents from 2016-2020<sup>xxvii</sup>

Figure 12

TOTAL FAMILY VIOLENCE ARREST INCIDENTS - INTIMATE PARTNER ARREST INCIDENTS CY 2016 - CY 2020 761 75.6% 1 100.0% 68 62.4% 13 65.0% 6 76.5% 2 100.0% N/A 69.9% 76.0% 71.9% 76.6% 35 81.45 53 81.55 75.8% 432 71.6% 308 74.2% 73.5% 311 33.3% 5 71.49 entral CT State Univ 76.6% 83.3% 55 75.3% 15 75.0% 18 73.8% 25 67.6% 42 60.9% 24 72.7% 37 35 87.5% 0 N/A 83.7% N/A 78.7% N/A 59.5% CT State Capitol Police 79.4% 62.5% 230 69.9% 18 72.0% 80.6% 80.6% 57.1% DMHAS 0 N//A 26 68.4% 33 76.7% 20 76.9% 19 63.3% East Hartford 256 264 182 73.1% 7 70.0% Eastern CT State Univ 7 100.0% 72.9% 105 70.9% 54 70.1% 138 78.9% 66 65.3% 57 84 86 92.55 roton Long Po 135 41 41 72.0% 25 69.4% 21 80.8% 23 71.9% 312 79.4% 42 93.3% 387 76.5% 36 75.0% 534 78.39 531 56 78.9% 0.09 100.0% 90.7% 48 87.3% 41 93.2% 44 84.2% 72.9% 116 71.2% 144 105 72.9% 72.0% 177 163 450 81.4% 11 68.8% 53.8% 13 72.2% 16 74.5% 1,350 74.9% 290 85.3% 1,696 323 333 New Milford 127 79.9% 80 67.2% 127 81.9% 84 65.6% 72 62.6% 118 79.7% 107 66.0% 128 110 162 119 Newtown North Branford 63.3% 63.9% 73.5% 35 67.3% 16 53.3% 31 70.5% 80.1% 77.2% 15 78.9% 68 81.0% 23 71.9% 56 86.2% 87.5% 79.3% 68.8% 83

TOTAL FAMILY VIOLENCE ARREST INCIDENTS - INTIMATE PARTNER ARREST INCIDENTS CY 2016 - CY 2020

Reporting Agency		2016		7	2017			2018			2019			2020		
	Total	IP	%	Total	IP	%	Total	IP	%	Total	IP.	%	Total	IP	%	
Redding	13	8	61.5%	12	9	75.0%	10	9	90.0%	3		100.0%	0	0	N/	
Ridgefield	39	21	53.8%	31	22	71.0%	31	19	61.3%	29	17	58.6%	28	19	67.99	
Rocky Hill	55	31	56.4%	61	47	77.0%	53	44	83.0%	62	44	71.0%	60	43	71.79	
Seymour	89	68	76.4%	71	51	71.8%	61	52	85.2%	70	48	68.6%	60	43	71.7	
Shelton	94	70	74.5%	104	86	82.7%	85	61	71.8%	110	87	79.1%	113	85	75.29	
Simsbury	40	29	72.5%	42	34	81.0%	54	42	77.8%	35	29	82.9%	39	34	87.2	
South Windsor	57	43	75.4%	64	41	64.1%	46	29	63.0%	70	49	70.0%	45	31	68.9	
Southern CT State Univ.	9	9	100.0%	7	7	100.0%	1	1	100.0%	1	1	100.0%	2	2	100.0	
Southington	160	114	71.3%	157	109	69.4%	163	139	85.3%	187	133	71.1%	179	141	78.8	
Stamford	347	240	69.2%	316	225	71.2%	405	304	75.1%	326	236	72.4%	385	309	80.3	
Stonington	110	84	76.4%	114	87	76.3%	98	70	71.4%	97	76	78.4%	78	62	79.5	
Stratford	165	115	69.7%	203	147	72.4%	234	164	70.1%	236	163	69.1%	237	169	71.3	
Suffield	26	16	61.5%	31	24	77.4%	33	26	78.8%	26	18	69.2%	21	12	57.1	
Thomaston	28	24	85.7%	39	31	79.5%	36	29	80.6%	44	33	75.0%	0	0	N/	
Torrington	354	290	81.9%	345	283	82.0%	300	238	79.3%	252	208	82.5%	196	169	86.2	
Trumbull	50	40	80.0%	57	39	68.4%	64	52	81.3%	43	32	74.4%	80	60	75.0	
UCONN Health	0	0	N/A	0	0	N/A	0	0	N/A	3	3	100.0%	2	2	100.0	
UCONN Storrs	29	28	96.6%	20	19	95.0%	16	16	100.0%	15	15	100.0%	6	6	100.0	
Vernon	189	134	70.9%	167	138	82.6%	171	140	81.9%	200	150	75.0%	184	143	77.7	
Wallingford	182	126	69.2%	166	129	77.7%	175	134	76.6%	172	133	77.3%	152	91	59.9	
Waterbury	1,073	794	74.0%	932	686	73.6%	993	754	75.9%	965	741	76.8%	750	587	78.3	
Waterford	82	59	72.0%	53	38	71.7%	47	36	76.6%	48	38	79.2%	65	46	70.8	
Watertown	92	55	59.8%	103	73	70.9%	80	60	75.0%	80	61	76.3%	55	38	69.1	
West Hartford	159	123	77.4%	167	130	77.8%	167	127	76.0%	197	141	71.6%	194	143	73.7	
West Haven	413	319	77.2%	393	309	78.6%	364	284	78.0%	280	210	75.0%	271	210	77.5	
Western CT State Univ.	4	4	100.0%	4	4	100.0%	2	2	100.0%	1	1	100.0%	0	0	N/	
Weston	16	9	56.3%	10	3	30.0%	14	9	64.3%	12	10	83.3%	0	0	N/	
Westport	56	43	76.8%	43	32	74.4%	39	28	71.8%	37	24	64.9%	31	20	64.5	
Wethersfield	66	52	78.8%	70	49	70.0%	77	57	74.0%	70	56	80.0%	99	80	80.8	
Willimantic	150	117	78.0%	145	118	81.4%	208	171	82.2%	201	157	78.1%	186	149	80.1	
Wilton	24	17	70.8%	31	26	83.9%	28	21	75.0%	28	15	53.6%	14	- 6	42.9	
Winchester	91	71	78.0%	88	76	86.4%	109	92	84,4%	87	73	83.9%	60	45	75.0	
Windsor	126	93	73.8%	148	109	73.6%	130	87	66.9%	121	76	62.8%	162	111	68.5	
Windsor Locks	72	52	72.2%	80	58	72.5%	80	61	76.3%	72	48	66.7%	67	51	76.1	
Wolcott	63	39	61.9%	70	54	77.1%	60	39	65.0%	63	47	74.6%	46	31	67.4	
Woodbridge	19	13	68.4%	27	21	77.8%	24	17	70.8%	12	6	50.0%	18	10	55.6	
Yale	7	7	100.0%	9	9	100.0%	- 1	1		- 5	5	100.0%	- 6	6	100.0	
Troop A CSP	124	94	75.8%	117	78	66.7%	110	88	80.0%	109	77	70.6%	96	69	71.9	
Troop B CSP	95	78	82.1%	88	69	78.4%	104	80	76.9%	82	64	78.0%	105	79	75.2	
Troop C CSP	166	133	80.1%	199	144	72.4%	139	111	79.9%	203	167	82.3%	203	163	80.3	
Troop D CSP	266	192	72.2%	234	190	81.2%	248	205	82.7%	224	180	80.4%	212	179	84.4	
Troop E CSP	202	153	75.7%	149	113	75.8%	141	119	84.4%	175	142	81.1%	157	128	81.5	
Troop F CSP	96	68	70.8%	93	60	64.5%	121	84	69.4%	91	68	74.7%	99	74	74.7	
Troop G CSP	49	44	89.8%	23	22	95.7%	25	25	100.0%	26	24	92.3%	17	17	100.0	
Troop H CSP	54	48	88.9%	46	44	95.7%	54	46	85.2%	61	54	88.5%	55	49	89.1	
Troop I CSP	99	83	83.8%	78	56	71.8%	53	42	79.2%	57	40	70.2%	60	49	81.7	
Troop K CSP	168	119	70.8%	186	139	74.7%	178	129	72.5%	181	140	77.3%	151	119	78.8	
Troop L CSP	129	92	71.3%	111	81	73.0%	99	76	76.8%	87	68	78.2%	91	69	75.8	
Total CSP	1.448	1,104	76.2%	1.324	996	75.2%	1.272	1,005	79.0%	1.296	1,024	79.0%	1.246	995	79.9	

The STOP funding not allocated to the two state agencies mentioned earlier is distributed to victim service provider organizations within Connecticut. CCADV is the state's domestic violence coalition and has member centers throughout Connecticut that service rural areas and the cities. The state administrator is able to monitor programming through quarterly progress reports provided by the coalition reporting at activities on all member centers who receive funding through the grant. Funds are distributed to CCADV for law enforcement and victim services. The law enforcement programs are law enforcement victim advocacy and police collaboration. The director of law enforcement advocacy at CCADV runs the Lethality

Assessment Program (LAP). This program is run through MOUs with all police departments in the state to use a data-driven spreadsheet to assess lethality when law enforcement responds and suspects domestic violence. Through this process, first responders give the victim an opportunity to connect with a victim advocate at CCADV either directly or the officer calls and puts the advocate on speaker. The police collaboration program supports CCADV collaborating with law enforcement for professional development and training opportunities to engage with

victims of domestic violence. CCADV has two victim service programs through STOP. Connecticut awards funding to the coalition who distributes funding to member centers to ensure that all geographic regions in Connecticut are met. Since Connecticut is a small state the most equitable practice is to distribute funds to the coalition instead of requiring each member center to compete for funding, taking time and resources away from providing services to survivors. One of the programs is the child advocacy grant. The project is designed for the provision of comprehensive support services for individuals that reside in Connecticut's domestic violence residential programs or in the community with a specific focus on improvements to better understand the complexities of serving communities of color. By gaining a greater understanding of the diversity within underserved communities and communities of color, advocacy can shift from the viewing all children as the same. An authentic advocacy response will formulate trust, openness, and a willingness to connect to the family as a whole. Child & Family Advocacy is a continuation project that supports enhanced services to parents and their children who experience domestic violence. CCADV works to deliver comprehensive and holistic services that consider the needs of different children. Families benefit the most from services that incorporate a multi-faceted approach that involves both large- and small-scale change while enhancing its service and outreach to underserved communities and communities of color. The Child & Family Advocate position is essential because it interfaces with both the parent and the child. By working with the family unit, advocates gain greater insight into the level of violence experienced by all members of the family. This information can then be relayed to other staff for effective advocacy, support and safety planning. This grant supports programs in Ansonia, New Haven, Bridgeport, Danbury, Dayville/Willimantic, Enfield, Greenwich, Hartford, Meriden, New Britain, New London, Norwalk/Stamford, Sharon, and Torrington. A map of member centers is attached to demonstrate the geographic variety of services. The second grant-funded program is the Underserved Grant. CCADV will develop and support projects, initiatives and programs aimed

at increasing services and enhancing resources for domestic violence victims of underserved and vulnerable populations. CCADV will increase public awareness, accessibility, identify content experts to develop opportunities to partner and collaborate as well as provide technical assistance and training. CCADV will utilize grant funds to retain a full-time Director of Diversity & Accessibility who will oversee project activities. The Director will serve as an active participant in the design of staff capacity building and professional development centered on comprehensive approaches to domestic violence advocacy. Professional development may include multicultural identity development, cultural trauma, language access, bias awareness, and economic justice for underserved/under-represented communities.

Figure 13. CCADV Member Centers Map<sup>xxviii</sup>

Susan B. Anthony Project

SAFETY - MEALING - GROWTH

PRUDENCE CRANDALL CENTER

Repositing Meding & Hope since 1973

The Conter for Family Journal of Control of Contr

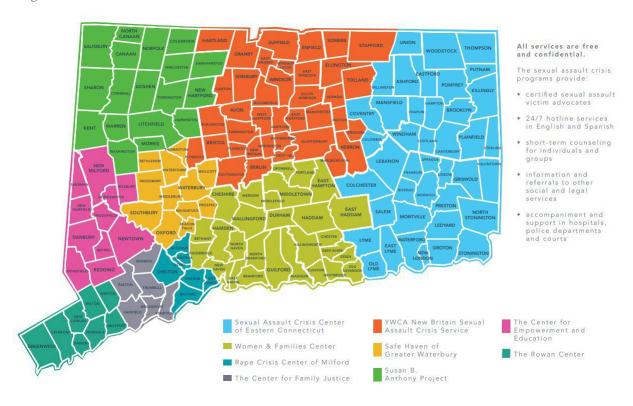
The Alliance is the state's recognized sexual assault coalition and has member centers that are disbursed throughout the state. These centers provide services to all geographic areas of Connecticut. The state administrator monitors programming through quarterly progress reports provided by the coalition reporting at activities on all member centers who receive funding through the grant. The coalition provides programming and services to meet both the law enforcement and victim services allocation categories. The law enforcement program is the Parole Victim Advocates program. There are 4 specialized PCVS victim advocates who support 17 parole officers across the 5 Parole Special Management Units. The PCVS victim advocates will serve victims, participate in unit monitoring activities and decision-making processes, assist with community notification, provide linkages between victims and the unit teams, and actively participate in offender counseling and family meetings. The victim advocate's role in the Statewide Sex Offender Parole Special Management Unit is designed to ensure victim input throughout the post-conviction process, to assist in preventing additional harm to the victim, and to share insightful suggestions regarding offender supervision. The victim advocate and other unit staff also provide community education on the unit's mission of community safety and risk reduction strategies.

As a part of the victim services allocation category the Alliance receives funding for an Underserved program and Supporting Latinx victim services and Victim Advocacy (SAVA). The SAVA program is to meet the needs of survivors who do not speak English, The Alliance will provide support to the six SAVA-funded member centers with interpretation and translation support by providing funding to each member center to support service provision or materials creation for non-English speaking survivors and communities. All interpretation and translation services will be provided by certified professionals who can itemize and document the services they provide. Through this project, The Alliance and the six designated member centers will continue to focus on statewide efforts to increase reach and sexual assault response service provision to Latinx communities. The Alliance will continue to facilitate regular

meetings with bilingual advocates from the member centers and work in concert with member centers to identify new statewide avenues for increasing awareness of Latinx/Spanish-language services and training community partners. These will include but are not limited to attending cultural celebrations throughout the state and continuing to build and strengthen partnerships with community-based organizations serving Latinx communities as well as with school districts, local public health departments, and the faith-based community. The member centers are located in Bridgeport, Danbury, Meriden, Milford, New Britain, Stamford, Torrington, Waterbury, and Willimantic, a map is attached to demonstrate geographic information. The purpose of the underserved grant program is to improve services to underserved and culturally specific populations. The Alliance's Education & Youth Services Coordinator and Training & Prevention Manager will collaborate with community-based partners, the coalition's Queer Caucus Against Sexual Assault, and coalition advocates and educators to identify skills and a training series necessary for increasing capacity and confidence, and humility of coalition staff to increase and improve sexual assault service provision to LGBTQ victims/survivors. The Alliance's Resource & Communication Coordinator will work with Recite Me to install their web-assistive, cloud-based technology to increase the accessibility of The Alliance website and content for people who are neurodiverse, visually impaired, of older age, and/or speak English as a second language. Consultants from The Consultation Center, Inc (TCC)consultants will conduct a series of capacity-building activities to increase knowledge, understanding, and use of evaluation among Alliance and member center staff (map provided for locations of member centers across the state). Staff from all nine member centers (e.g., child and campus advocates, adult advocates, community educators, and program directors) will collaborate with The Alliance staff in determining needed training and capacity building, participating in trainings and workshops, and participating in evaluation capacity building activities with TCC. The director of Programs & Standards will provide support to Alliance staff working on this project and guide any evaluation activities and data collection associated with project activities,

Figure 14. The Alliance's Member Centers Map<sup>xxix</sup>

Figure 14



7. Description of how the State will give priority to areas of varying geographic size with the greatest showing of need based on the availability of existing domestic violence, dating violence, sexual assault and stalking programs. (34 U.S.C. 10446(e)(2)(A) and (i)(2)(F); 28 C.F.R. 90.12(d)(1).

OPM CJPPD will work closely with the STOP advisory board to ensure that priority is given to the geographic areas demonstrating the greatest need for programs that address domestic violence, sexual assault, dating violence, and stalking. Connecticut has fantastic and passionate advocates for these programs leading the organizations involved in this critical work. OPM CJPPD will rely on the expertise of these advocates and data related to crime and population to fund the programs that will have the most significant positive impact on victims in this State.

8. Description of how the State will equitably distribute monies on a geographic basis including nonurban and rural areas of various geographic sizes. (34 U.S.C. 10446 (e)(2)(C) and (i)(2)(F); 28 C.F.R. 90.12(d)(3))

As referenced earlier in the Implementation Plan, Connecticut is the third smallest State in the country. The relatively small size of the State has led to STOP funding being granted to organizations and state agencies that operate state-wide instead of in one specific city or town. The smaller size of the State and partnership with subgrantees that operate state-wide does allow for an equitable distribution to service providers that cover the entire state, cities, and rural areas. The STOP Advisory Group will continue to explore the idea of equitable distribution of the funds and discuss if the State can improve upon its proposed funding plans for the period the plan will cover.

- 9. Information on projects that the State plans to fund, if known. (28 C.F.R. § 90.12(g)(5))
  - a. Crystal Judson. (34 U.S.C. § 10441(b)(13))
    - i. If the If the State plans to address the "Crystal Judson" purpose area, include narrative on providing the required training.
    - ii. If the State does not plan to use the "Crystal Judson" purpose area, include a note to this effect.

73
The State of Connecticut does not plan to use the "Crystal Judson" purpose area during the 2022-2025 plan period 2025 plan period.

#### VI. Conclusion

Connecticut has witnessed the tremendously positive impact STOP funding can have within areas that need these resources. OPM CJPPD is immensely grateful to Office on Violence Against Women for the partnership and guidance it has given over the years. STOP has directly led to improved policies and procedures across the State for victims of domestic violence, sexual assault, dating violence, and stalking. The funds have allowed Connecticut to develop and improve a victim-centric response to these crimes. The availability of training and developmental resources that law enforcement, prosecutors, and victim services providers has increased through STOP funding. The services available to victims have increased, and steps will be taken throughout this Plan to continue to fund foundational programs and exploring new ways to help victims as needs change.

One of the major themes to come out of the Planning Committee was a strong desire from all involved to continue the collaborative nature fostered in Connecticut and build upon it and strengthen it. Committee members welcomed new ideas and different perspectives from other organizations or agencies. The common belief was that working together would help Connecticut satisfy its goal of meaningfully addressing victims' issues and improving upon the services offered to them. The 2022-2025 Implementation Plan seeks to maintain Connecticut's approach of identifying and championing best practices for organizations and agencies statewide. With improved collaboration, the next four years will see the birth of outstanding new initiatives and programs that address emerging gaps and trends as victims' needs evolve.

Stakeholders emphasized throughout the strategic planning process that STOP is a vital source of funding to combat crimes against women and to enhance victim services in cases involving domestic violence, sexual assault, stalking and dating violence. Unforeseen events and

a once-in-a-lifetime global pandemic have altered how services are provided, and these funds have been vital in addressing those real-time needs. This Plan details a clear view of how Connecticut can better serve victims in the coming years and remains flexible enough to shift if the experts and data indicate changes are required. The Plan places importance on making sure that all improvements are victim-centric and consider culturally specific and underserved communities. Finally, the plan encourages statewide improvements in responses to domestic violence, sexual assault, dating violence, and stalking that will have meaningful positive impacts for years to come.

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### Appendix A

Documentation from each member of the planning committee as to their participation in the planning process

#### 1. Jessie Gleckel

Please send back to at	by		
State/Territory: Connecticut		0	·
Administering Agency: Office of Policy & MANAGEMENT			
Participant Agency: Connecticut Alliance to End S	exual	Violend	<b>:</b>
Type of Agency: Sexual Assault Coalition			
If population specific organization, please specify which population: _	S		
Other:			
Planning Team Meeting Date(s): 12/13/21, 12/16/21, 1/10/22, 1/	18122	10	2
Did you receive notification of meeting dates at least one month in	advance?		No
How were you notified? (check all that apply)		t.	
☑ Email ☐ In-person ☐ Phone call ☐ Website post ☐ Le	tter 🔲	Other:	
Were you able to participate in the meetings?		,	
If yes, how many meetings did you attend?			
Meeting format: (check all that apply) ☐Teleconference ☑Video	conferen	ce 🔲 ln-pe	rson
If no, please explain:			
During the meeting(s), were you able to freely provide input, ask questions, share concerns, and propose goals?	Yes	O No	O Partially
Did you receive a draft of the Implementation Plan and a list of major concerns raised during the planning process?	Yes	ON	o
If no, please explain:			
Were you given at least one month to review the draft plan?	Yes	ON	o
If no. please explain:			

Were the major concerns raised during the planning process included in the draft plan?	OYes	O No	
If no, please explain: Most concerns were included; however, in the plan only for DV service organizations I trainings. Did you provide comments or recommended changes to the draft!	some of the  victims nath plan? O	e concerns or than inc Yes (	were in cludy S
Did you receive a copy of the Final Implementation Plan?	<b>©</b>	Yes	ONo
If no, please explain: We did & wereable to provide some feed responding to the chaft.  If applicable, do you believe your recommended changes to the draddressed in the Final Implementation Plan?  OYes	aft plan were	though we adequately ()Not applical	
If no, please explain:		18	
Overall, were the feedback, concerns, recommended goals, etc. of group participants adequately reflected in the Final Implementation	100	Yes	⊖No
If no, please explain:	8 H	2) 6	w
Do you have any concerns with the content of the Final Implement	ation Plan?	OYes (	⊛No
If yes, please explain:		7	
Name Jessie Gleckel Signature Jessie Gleckel Date 6/15/22		26	

#### 2. Meghan Scanlon

Please send back to Maurice Reeves at OPM by 6/15/22							
State/Territory: Connecticut							
Administering Agency: Office of Policy and Management							
Participant Agency: Connecticut Coalition Against Domestic Violence							
Type of Agency: Domestic Violence Coalition							
If population specific organization, please specify which population:							
Other:							
Planning Team Meeting Date(s): 10 21 21 12 21 12 21 10 22 118 22 4  Did you receive notification of meeting dates at least one month in advance? Yes ONo 5 24 22							
Did you receive notification of meeting dates at least one month in advance? Yes ONo							
How were you notified? (check all that apply)							
☑ Email ☐ In-person ☐ Phone call ☐ Website post ☐ Letter ☐ Other:							
Were you able to participate in the meetings?   Yes ONo							
If yes, how many meetings did you attend? Some							
Meeting format: (check all that apply) ☐Teleconference ☑Video conference ☐In-person							
If no, please explain:							
During the meeting(s), were you able to freely provide input, ask questions, share concerns, and propose goals?							
Did you receive a draft of the Implementation Plan and a list of major concerns raised during the planning process?							
If no, please explain:							
Were you given at least one month to review the draft plan?  ONO							
If no, please explain:							

Were the major concerns raised during the planning process included in the draft plan?	es	ONo
If no, please explain:		
Did you provide comments or recommended changes to the draft plan?	Yes	ONo
Did you receive a copy of the Final Implementation Plan?	<b>⊙</b> Yes	ONo
If no, please explain:		
If applicable, do you believe your recommended changes to the draft plan addressed in the Final Implementation Plan?		<b>quately</b> applicable
If no, please explain:		
Overall, were the feedback, concerns, recommended goals, etc. of planning group participants adequately reflected in the Final Implementation Plan?		o No
If no, please explain:		
Do you have any concerns with the content of the Final Implementation Pl	lan? <b>O</b> Y	es No
If yes, please explain:		
Name Manuer Scaplan Signature Date 6/15/22		

#### 3. Tonya Johnson

Please send back to at by 11/22/22
State/Territory: Connecticut
Administering Agency: CT Office on Policy & Management
Participant Agency: CT Coalition Against Domestic Violence
Type of Agency: Domestic Violence Coalition
If population specific organization, please specify which population:
Other:
Planning Team Meeting Date(s): 12/31/21;12/16/21;1/10/22;1/18/22
Did you receive notification of meeting dates at least one month in advance? Yes ONo
How were you notified? (check all that apply)
☑ Email ☐ In-person ☐ Phone call ☐ Website post ☐ Letter ☐ Other:
Were you able to participate in the meetings? Wes ONO
f yes, how many meetings did you attend?
Meeting format: (check all that apply) ☐Teleconference ☑Video conference ☐In-person
f no, please explain:
During the meeting(s), were you able to freely provide input,  See No Partially ask questions, share concerns, and propose goals?
Old you receive a draft of the Implementation Plan and a list Yes No of major concerns raised during the planning process?
f no, please explain:
Were you given at least one month to review the draft plan?
f no, please explain:

Were the major concerns raised during the planning process included in the draft plan?	0	No
If no, please explain:		
Did you provide comments or recommended changes to the draft plan?	ØYes ØYes	ONo
Did you receive a copy of the Final Implementation Plan?	Yes	ONo
If no, please explain:		
If applicable, do you believe your recommended changes to the draft plan was addressed in the Final Implementation Plan?	vere adequa	
If no, please explain:		
Overall, were the feedback, concerns, recommended goals, etc. of planning group participants adequately reflected in the Final Implementation Plan?	<b>O</b> Yes	ONo
If no, please explain:	-	
Do you have any concerns with the content of the Final Implementation Plan	n? OYes	ØN <sub>0</sub>
If yes, please explain:		
Name Tonya Johnson Signature Date 11/22/22		

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### 4. Daniel Cargill

Please send back to at OPM by
State/Territory: Connecticut
Administering Agency: Office of Policy and Management
Participant Agency: CT Coalition Against Domestic Violence
Type of Agency: Domestic Violence Coalition
If population specific organization, please specify which population:
Other:
Planning Team Meeting Date(s): 12/13/21-12/16/21-01/10/22-01/18/22
Did you receive notification of meeting dates at least one month in advance? OYes ONo
How were you notified? (check all that apply)
☑ Email ☐ In-person ☐ Phone call ☐ Website post ☐ Letter ☐ Other:
Were you able to participate in the meetings?    Yes    No
If yes, how many meetings did you attend? OAII OSome
Meeting format: (check all that apply) Teleconference Video conference In-person
If no, please explain:
During the meeting(s), were you able to freely provide input,  ask questions, share concerns, and propose goals?
Did you receive a draft of the Implementation Plan and a list
If no, please explain:
Were you given at least one month to review the draft plan?
If no, please explain:

Were the major concerns raised during the planning process included in the draft plan?	OYes	○ No	
If no, please explain:			
Did you provide comments or recommended changes to the draft plan	n?	O Yes	ONo
Did you receive a copy of the Final Implementation Plan?		Yes	ONo
If no, please explain:			
If applicable, do you believe your recommended changes to the draft addressed in the Final Implementation Plan?		ere adequatel ONot applic	
If no, please explain:			
Overall, were the feedback, concerns, recommended goals, etc. of pla group participants adequately reflected in the Final Implementation F		OYes	○No
If no, please explain:			
Do you have any concerns with the content of the Final Implementati	on Plan	? OYes	ONO
If yes, please explain:			
Name Daniel Cargill Signature Date 07-11-22			

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#### 4. Maria Ortiz

Please send	back to	at		by		·
State/Territory:	CONNECTICUT					
Administering Agen	ıcy:					
Participant Agency:	Hispanic Health	Council				<u>.</u>
Type of Agency: Cr	no <b>òlea-arre</b> it		Non-pre	ofit		
If population specifi	c organization, ple	ase specify which po	pulation: _			
Other:			_			
Planning Team Mee	eting Date(s):	2/13/2021, 12/16/202	1, 1/10/202	2 and 1/18	/2022	
Did you receive not	ification of meetir	g dates at least one	month in	advance?	<b>⊙</b> Yes <b>(</b>	) No
How were you notif	fied? (check all tha	t apply)				
☑ Email ☐ In-pe	erson 🗆 Phone	call	st 🔲 Le	tter 🔲	Other:	
Were you able to pa	articipate in the m	eetings? OYes	ONo			
If yes, how many me	eetings did you att	end? OAll	<b>○</b> Some			
Meeting format: (ch	eck all that apply)	□Teleconference	e 🗹 Video	conference	ce 🔲 ln-pe	erson
If no, please explain: MICROSOFT TEAMS VIRTUAL MEETINGS						
During the meeting ask questions, share		- I-I	put,	Oyes	O No	O Partially
Did you receive a di of major concerns r	19 <del>5</del> 7		list	OYes	01	lo
If no, please explain	:		<b>^</b>	5	W	
Were you given at I	east one month to	review the draft pl	an?	OYes	O	lo
If no inlease evaluin	7					

Were the major concerns raised during the planning process included in the draft plan?	OYes	O No	
If no, please explain:		<del></del>	
Did you provide comments or recommended changes to the draft pl	an? C	) Yes	ONo
Did you receive a copy of the Final Implementation Plan?	C	Yes	ONo
If no, please explain:			
If applicable, do you believe your recommended changes to the drafaddressed in the Final Implementation Plan?  OYes		e adequately ONot applica	
If no, please explain:			
Overall, were the feedback, concerns, recommended goals, etc. of p group participants adequately reflected in the Final Implementation	700	<b>O</b> Yes	ONo
If no, please explain:		:	
Do you have any concerns with the content of the Final Implementa	tion Plan?	OYes	ONo
If yes, please explain:			
Name MARIA ORTIZ Signature Alexandra 6/15/2022			

### 5. Melissa Conway

Please send back to at by
Connecticut
State/Territory: Connecticut
Administering Agency: Office of Policy and Management
Participant Agency: Division of Criminal Justice
Type of Agency: Prosecution
If population specific organization, please specify which population:
Other:
Planning Team Meeting Date(s): 12/13/21; 12/16/21; 1/10/22; 1/18/22
Did you receive notification of meeting dates at least one month in advance? OYes ONo
How were you notified? (check all that apply)
☑ Email ☐ In-person ☐ Phone call ☐ Website post ☐ Letter ☐ Other:
Were you able to participate in the meetings? OYes ONo
If yes, how many meetings did you attend?
Meeting format: (check all that apply) ☐ Teleconference ☑ Video conference ☐ In-person
If no, please explain:
During the meeting(s), were you able to freely provide input,  Solution Yes  No  Partially ask questions, share concerns, and propose goals?
Did you receive a draft of the Implementation Plan and a list $X \bigcirc Yes$ O No of major concerns raised during the planning process?
lf no, please explain:
Were you given at least one month to review the draft plan? X OYes No
If no, please explain:

Were the major concerns raised during the planning p included in the draft plan?	rocess	X <b>O</b> Ye	o 01	No
If no, please explain:				
Did you provide comments or recommended changes	to the draf	ft plan?	<b>○</b> Yes	X ONo
Did you receive a copy of the Final Implementation Pla	an?		○Yes	x ONo
If no, please explain: No - Switched state agencies and no longer involved in S	STOP grant work at	t the time of Final	olan, but the division o	id receive a plan copy.
If applicable, do you believe your recommended chan addressed in the Final Implementation Plan?	ges to the o	draft plan v ONo	were adequa X ONot app	a 7 a a
If no, please explain:				
Overall, were the feedback, concerns, recommended group participants adequately reflected in the Final In		-	X <b>O</b> Yes	ONo
If no, please explain:				
Do you have any concerns with the content of the Fina	al Impleme	entation Pla	n? OYes	$X \cup No$
If yes, please explain:				
Name Melissa Conway				
Signature Melissa Conway Park and the control of th				
Date 11/23/22				

### 6. Joseph DiTunno

Please send back to at	<sub></sub> 7-	15-22	
Connecticut	by		
State/Territory: Connecticut			
Administering Agency: OPM			
Participant Agency: Judicial Branch			_
Type of Agency: Courts			ē.
If population specific organization, please specify which population	on:		
Other:			
Planning Team Meeting Date(s): 12/13/21, 12/16/2	1, 1/10/2	2 , 1/18	3/22
Did you receive notification of meeting dates at least one monti	h in advance?	OYes ON	o
How were you notified? (check all that apply)			
☑ Email ☐ In-person ☐ Phone call ☐ Website post [	Letter 🔲	Other:	
Were you able to participate in the meetings? OYes ONo			
If yes, how many meetings did you attend? OAII OSon	ne		
Meeting format: (check all that apply) ☐Teleconference ☑V	ideo conferenc	e 🔲 In-pers	on
If no, please explain:			
During the meeting(s), were you able to freely provide input, ask questions, share concerns, and propose goals?	<b>○</b> Yes	O No	O Partially
Did you receive a draft of the Implementation Plan and a list of major concerns raised during the planning process?	OYes	ONo	
If no, please explain:			
Were you given at least one month to review the draft plan?	OYes	ONo	
If no, please explain:			

	Were the major concerns raised during the planning process  O Yes  Included in the draft plan?
	If no, please explain:
v.	Did you provide comments or recommended changes to the draft plan? OYes
	Did you receive a copy of the Final Implementation Plan?  OYes  ONo
	If no, please explain:
	If applicable, do you believe your recommended changes to the draft plan were adequately addressed in the Final Implementation Plan?  OYes  ONO ONO Tapplicable
	If no, please explain:
	Overall, were the feedback, concerns, recommended goals, etc. of planning OYes ONo group participants adequately reflected in the Final Implementation Plan?
	If no, please explain:
	Do you have any concerns with the content of the Final Implementation Plan? OYes No
	If yes, please explain:
	Name Joseph DiTunpo Signature

### 7. Captain Justin Lussier

Please send back to at by Capt. Justin Lussier by
State/Territory: Connecticut
Administering Agency: OPM
Participant Agency: Putnam Police Department
Type of Agency: Law Enforcement
If population specific organization, please specify which population:
Other:
Planning Team Meeting Date(s): 12/13/21,12/16/21,1/10/22,1/18/22
Did you receive notification of meeting dates at least one month in advance? • Yes • No
How were you notified? (check all that apply)
✓ Email ☐ In-person ☐ Phone call ☐ Website post ☐ Letter ☐ Other:
Were you able to participate in the meetings? • ONo
If yes, how many meetings did you attend?
Meeting format: (check all that apply)
If no, please explain:
During the meeting(s), were you able to freely provide input,  ask questions, share concerns, and propose goals?
Did you receive a draft of the Implementation Plan and a list    Yes ONo of major concerns raised during the planning process?
If no, please explain:
Were you given at least one month to review the draft plan?  ONO
If no. please explain:

Were the major concerns raised during the planning process included in the draft plan?	S	<b>O</b> No
If no, please explain:		
Did you provide comments or recommended changes to the draft plan?	<b>O</b> Yes	<b>●</b> No
Did you receive a copy of the Final Implementation Plan?	Yes	ONo
If no, please explain:		
If applicable, do you believe your recommended changes to the draft plan addressed in the Final Implementation Plan?  OYes  ONO		<b>quately</b> applicable
If no, please explain:		
Overall, were the feedback, concerns, recommended goals, etc. of plannin group participants adequately reflected in the Final Implementation Plan?		ONo
If no, please explain:		
Do you have any concerns with the content of the Final Implementation Pl	an? O	′es <b>●</b> No
If yes, please explain:		
Name Tostin Lussier Signature		

**Tribal Participation Letters** 

Plea	ase send back to _		at	by		•
State/Terri	itory:					
Participant	: Agency:					
Type of Ag	ency:					
If populatio	on specific organiza	ation, please s	specify which popu	ulation:		
Other:						
Planning Te	eam Meeting Date	e(s):				
Did you red	ceive notification	of meeting da	ites at least one m	nonth in advance?	Yes	No
How were	you notified? (che	eck all that app	ply)			
Email	In-person	Phone call	Website post	Letter	Other:	
Were you a	able to participate	in the meeti	ngs? Yes	No		
If yes, how	many meetings di	d you attend?	P All	Some		
Meeting fo	rmat: (check all th	at apply)	Teleconference	Video conferen	ice In-pe	rson
If no, pleas	e explain:					
_	meeting(s), were	-		<b>rt,</b> Yes	No	Partially
-	ceive a draft of the oncerns raised dur	-		st Yes	N	0
If no, pleas	e explain:					
Were you ยู	given at least one	month to rev	iew the draft plan	? Yes	N	0
If no, pleas	e explain:					

Were the major concerns raised during the planni included in the draft plan?	ng process	Yes	No	
If no, please explain:				
Did you provide comments or recommended char	nges to the draft p	lan?	Yes	No
Did you receive a copy of the Final Implementatio	n Plan?		Yes	No
If no, please explain:				
If applicable, do you believe your recommended of addressed in the Final Implementation Plan?	t <b>hanges to the dra</b> Yes	<b>ft plan wer</b> No	e adequatel Not applic	
If no, please explain:				<del>-</del>
Overall, were the feedback, concerns, recommend group participants adequately reflected in the Fin	• .	•	Yes	No
If no, please explain:				
Do you have any concerns with the content of the	Final Implementa	ation Plan?	Yes	No
If yes, please explain:				
Name				
Signature				
Date				

Please send back to <u>Emily Burnett</u> at <u>emily.burnett@ct.gov</u> by
State/Territory: Connecticut
Administering Agency: Office of Policy and Management
Participant Agency: Mashantucket Pequot Tribal Nation
Type of Agency: Other
Mashantucket Pequot citizens f population specific organization, please specify which population:
Other:
Planning Team Meeting Date(s): $\frac{4/4/23}{2}$
Did you receive notification of meeting dates at least one month in advance? OYes ONO
How were you notified? (check all that apply)
☑ Email ☐ In-person ☐ Phone call ☐ Website post ☐ Letter ☐ Other:
Were you able to participate in the meetings? OYes ONO
f yes, how many meetings did you attend? All Some
Meeting format: (check all that apply)
f no, please explain:
During the meeting(s), were you able to freely provide input, O Yes O No O Partially ask questions, share concerns, and propose goals?
Did you receive a draft of the Implementation Plan and a list OYes No of major concerns raised during the planning process?
f no, please explain:
Were you given at least one month to review the draft plan?  ONO
We received an initial draft on 3/28/23 and an updated draft on 4/13/23. f no, please explain:

Were the major concerns raised during the planning process included in the draft plan?	○ <mark>Yes</mark>	○ No
If no, please explain:		
Did you provide comments or recommended changes to the draft pla	n? ○ <mark>Ye</mark>	es ONo
Did you receive a copy of the Final Implementation Plan?	OYe	es <mark>No</mark>
If no, please explain: We expect to receive a copy once the plan is final.		
If applicable, do you believe your recommended changes to the draft addressed in the Final Implementation Plan?  OYes	=	dequately lot applicable
If no, please explain:		
Overall, were the feedback, concerns, recommended goals, etc. of pla group participants adequately reflected in the Final Implementation F		Yes ONo
If no, please explain:		
Do you have any concerns with the content of the Final Implementati	on Plan? (	OYes ○No
If yes, please explain:		
Name Jody Page Countings, General Counsel Signature Jody L. (Jummilugs Date April 24312028455411		

### Appendix B

Documentation from Prosecution, Law Enforcement, Court, and Victim Services Programs – May 2023



#### State of Connecticut

DIVISION OF CRIMINAL JUSTICE
OFFICE OF THE CHIEF STATE'S ATTORNEY

PATRICK J. GRIFFIN CHIEF STATE'S ATTORNEY

300 CORPORATE PLACE ROCKY HILL, CONNECTICUT 06067 (860) 258 5800

December 7, 2022

Allison Randall
Principal Deputy Director
Office on Violence Against Women
United States Department of Justice
950 Pennsylvania Avenue, NW
Washington, DC 20530-001

Dear Ms. Randall,

My name is Patrick J. Griffin, and I am the Chief State's Attorney for the Connecticut Division of Criminal Justice, and the administrative head of the state's attorneys' offices in Connecticut's thirteen judicial districts. As we are charged with the investigation and prosecution of all crimes in the State of Connecticut, the Division of Criminal Justice has a commitment to the protection of victims and survivors of domestic abuse.

- Need for the STOP grant funds Dating back to 1996 in the Fairfield Judicial District, our prosecutors have had a leading role on the domestic violence docket, offering their expertise to ensure that victims and survivors received the protection and resources that they needed to live a productive life, free from abuse. The docket that began in the Fairfield Judicial District has been expanded to the Hartford Judicial District and the New Haven Judicial District, where we have three prosecutors assigned to the domestic violence dockets in those courts.
- 2. <u>Intended use of the grant funds</u> The Division of Criminal Justice is seeking STOP Violence Against Women Act (VAWA) funds to fully fund three experienced, specially trained, full-time domestic violence prosecutors in the following locations:
  - Two (2) full-time dedicated prosecutors in the Judicial District of Hartford, to serve the Geographical Area of Hartford. The domestic violence caseload in the City of Hartford is, by far, the heaviest in the state.

- One (1) full-time dedicated prosecutor position in the Judicial District of New Haven, to serve the Geographical Area of New Haven, the second busiest domestic violence docket in the state.
- 3. Expected result of the grant funds It is the intent of the Division of Criminal Justice to use the grant funds to continue to develop an effective process of prosecuting these crimes using a vertical prosecution model that is coordinated with the existing processes in each particular court. It is estimated that the New Haven prosecutor will accept 1,500 cases; and the Hartford prosecutors will accept 3,000 cases on an annual basis. The prosecutors working in these units specialize in family violence cases in order to become totally familiar with the victims, their families, the network of services available to victims, and the personnel and procedures of the other components of these projects. The ultimate goal of these units is to assist in the creation of a societal climate where women are safer because incidents of domestic violence are greatly reduced.
- 4. <u>Demographic characteristics of the population</u> Hartford and New Haven both are culturally diverse cities that consistently rank in the top three cities in Connecticut for violent crime. Hartford's poverty rate of 28.01 % makes it one of the poorest cities in the United States.
  - Age In 2020, the median age of all people in Hartford, CT was 32.9. Native-born citizens, with a median age of 29, were generally younger than foreign-born citizens, with a median age of 43. But people in Hartford, CT are getting older. In 2019, the average age of all Hartford, CT residents was 32. In 2020, the median age of all people in New Haven County, CT was 40.5. Native-born citizens, with a median age of 39, were generally younger than foreign-born citizens, with a median age of 45. But people in New Haven County, CT are getting older. In 2019, the average age of all New Haven County, CT residents was 40.
  - <u>Disability</u> The U.S. Census reported 11.3% for persons with a disability under age 65 years in Hartford for 2016-2020. The percentage for New Haven for the same period was 7.2%.
  - Race and Ethnicity According to the U.S. Census Bureau, 37.19% of Hartford's population is Black or African-American; while 29.60% are White; and 20.48% are other races; with 9.68% being of two or more races. In New Haven, the five largest ethnic groups are Black or African-American (Non-Hispanic) 31.2%; White (Non-Hispanic) 29.5%; White (Hispanic) 14.9% and Other (Hispanic) 12.9%. As many of the justice-involved in both these cities are people of color, many of the victims are people of color, as well.
  - <u>Language Background</u> The U. S. Census reported 43.3% for language other than English spoken at home, persons 5 years+ for 2016-2020. The percentage for New Haven for the same period was 34.1%.

Principal Deputy Director Randall Page 3 December 7, 2022

Thank you for your consideration. Should you have any questions, please feel free to contact me.

Very truly yours,

PATRICK J. GRIFFIN

CHIEF STATE'S ATTORNEY

#### PJG/CYW/md

c: Gail P. Hardy, Executive Assistant State's Attorney Chandra Y. Williams, Grants and Contracts Manager



### STATE OF CONNECTICUT DEPARTMENT OF CORRECTION

#### Office of the Commissioner



Angel Quiros Commissioner

Ned Lamont Governor

April 25, 2023

Allison Randall, Principal Deputy Director Office on Violence Against Women U.S. Department of Justice 145 N Street NE, Suite 10W.121 Washington, DC 20530

Dear Principal Deputy Director Randall:

I am writing as a representative of a *Law Enforcement* program to provide information associated with the Connecticut FY 2023 application for STOP Formula Grant funds. What follows is a description of the need for *Law Enforcement* funds, the intended use of the grant funds for this allocation, the expected results of the use of *Law Enforcement* grant funds, and demographic characteristics of the populations to be served with funds envisioned by the Connecticut Office of Policy and Management's Criminal Justice Policy and Planning Division (CJPPD).

#### **Need for the Grant Funds**

We have identified multiple needs in Connecticut related to domestic violence, dating violence, sexual assault, and/or stalking, and the ability of *Law Enforcement* to address the safety needs of victims and accountability of offenders. For the Connecticut Department of Correction's Division of Parole and Community Services (P&CS) Special Management Unit (SMU) these needs are:

- The ongoing need for advocacy services to maintain core victim services and criminal justice initiatives.
- Maintaining collaborative relationships between victim advocates and P&CS SMU.
- Developing training, technical assistance, and resources for parole officers and other front-line law enforcement officers on victim/survivor relevant topics.
- Strengthening of law enforcement communication and procedures for service of civil protection orders and entry of orders into state and federal databases.

#### Intended Use of Grant Funds and Expected Results

The following chart summarizes the intended use of STOP Grant funds by The CT Alliance to End Sexual Assault to fund the *Post-Conviction Victim Services (PCVS) Program*, along with the expected results. The Department of Correction endorses CT Alliance's use of funds and the continued role and responsibilities of the statewide P&CS Sex Offender Management Unit.

Phone: 860.692.7482 ◆ Fax: 860.692.7483
24 Wolcott Hill Road ◆ Wethersfield, Connecticut 06109

Intended Use of Funds	Expected Results
The Alliance will continue to partner with the Department of Correction's Division of Parole and Community Services Special Sex Offender Management Unit and sex offender treatment providers to reduce the reoccurrence of sex offense related behaviors among high-risk sex offenders.	The Alliance PCVS advocates will establish contact with the victim, when possible, gather information from the victim regarding the offender's behavior(s), and share this information regarding offender behaviors with the unit.
PCVS advocate team will continue to partner with sex offender treatment providers to develop and implement enhanced treatment and services.	PCVS advocates will serve as the communications "bridge" to providing victims/survivors with information about the purpose of the Sex Offender Management Unit, community resources, risk reduction and prevention methods.
The Alliance will continue to promote and provide educational presentations about its PCVS team and role in the collaborative supervision model.	PCVS advocates will be available to provide direct support services to victims and survivors who are dealing with trauma when an offender releases into the community. As a partner with the Sex Offender Management Unit team, PCVS advocates will assist in the victim/survivor notification process and will be able to model collaborative efforts with parole officers in the Special Management Unit and treatment providers.

STOP funding supports statewide efforts for the *Post-Conviction Victim Services (PCVS) Program*. The Alliance's PCVS victim advocates serve victims and support law enforcement by participating in unit monitoring activities and decision-making processes, assist with victim notification, provide linkages between victims and the unit teams, and actively participate in offender counseling and family meetings.

Victim notification is a priority when working with law enforcement. This program assists in taking that additional task off the law enforcement officers. A primary activity of this program is for PCVS victim advocates to maintain contact with Parole Officers in the Special Management Unit to provide victims with notifications of release, remands, other changes, and follow-ups.

#### Demographic Characteristics of Populations to be Served with Law Enforcement Funds

The following chart prepared by OJPPD provides demographic characteristics of the State/Territory of Connecticut to be served with STOP funds:

Demographic Factor	Total Population	% of Total Population
	3,605,944	100%
Age <sup>1</sup>		
15-24	43,645,580	13%
25-34	45,079,138	13.6%
35-49	63,515,886	19.1%
50-64	63,706,426	19.2%
65+	55,892,014	16.8%
Disability		
Hearing difficulty	11,642,464	3.6%
Vision difficulty	8,054,084	2.5%
Cognitive difficulty	16,529,501	5.4%
Ambulatory difficulty	20,435,576	6.6%
Self-care difficulty	7,852,976	2.5%
Independent living difficulty	14,739,809	5.8%
Race and Ethnicity		
Black or African American	360,937	12.4%
Hispanic or Latino	623,293	18.7%
White, Not Hispanic or Latino	2,279,232	61.6%
Asian	170,459	6%
Native Hawaiian and Other Pacific Islander	974	0.2%
American Indian and Alaskan Native		1.1%

<sup>&</sup>lt;sup>1</sup> The Census age groups Under 5 years, 5 to 9 years, and 10 to 14 years were taken out since the STOP funded program is for law enforcement, specifically the Post-Conviction Victim Services (PCVS) program which includes the Office of Adult Probation Sex Offender Supervision Unit, the Parole Special Management Unit, and the Center for the Treatment of Problem Sexual Behaviors.

Two or More Races	129,834	10.2%	
Other	27,076	8.4%	
Sexual Orientation		*	
LGBT+		3.9%	
Non-LGBTQ+ identifying		96.1%	
Gender Identity <sup>2</sup>	•		
Male	164,350,703		
Female	167,543,042		
Language Background (spok	ten at home 18+)³		
Speak Only English	199,887,125	83.6%	
Speak a Language Other than English	39,148,835	16.4%	
Spanish	22,828,281	6.8%	
Other Languages	16,320,554	6.8%	

Data from: <u>Census Bureau Tables</u> and <u>CONNECTICUT: 2020 Census</u>. Sexual orientation collected from: <u>Connecticut-one-sheet.pdf</u> (ucla.edu)

Receiving FY 2023 STOP Formula Grant funding is essential for maintaining Connecticut's statewide, collaboration between state agencies and departments, victim service agencies, and law enforcement agencies in holding offenders accountable and serving victims. Continued financial support for The Alliance will help to ensure that victim advocates continue to remain active and equal members of a multidisciplinary team of parole officers and providers of sex offender treatment, and that the victim's perspective always is in the forefront as we manage sex offender cases and supervise individuals in the community.

Sincerely

Angel Quiros Commissioner

<sup>2</sup> The 2020 Census only collects gender identities in the binary of male and female.

<sup>&</sup>lt;sup>3</sup> The 2020 Census only collects information from US citizens, these numbers do not account for any undocumented CT individuals.

# State of Connecticut JUDICIAL BRANCH



## OFFICE OF THE CHIEF COURT ADMINISTRATOR COURT SUPPORT SERVICES DIVISION 455 Winding Brook Drive, Glastonbury, CT 06033

December 14, 2022

Allison Randall
Principal Deputy Director
Office of Violence Against Women

The State of Connecticut Judicial Branch, Court Support Services Division, is providing the following documentation in accordance with the STOP Violence Against Women Program Implementation Plan:

## Need for STOP Grant Funds:

Domestic Violence Sanction Project -Hartford: Professionals working in the field of domestic violence in Connecticut have identified the limited availability of a targeted continuum of sanctions and intervention programs that ensure greater offender accountability, in combination with intensified victim advocacy services as significant obstacles in effectively countering the spread of violence against women across the state. Continued STOP funding will support the widening spectrum of specialized sanctions programs that have been developed for domestic violence offenders as well as providing enhanced victim advocacy services. STOP funding will assist state officials in pursuing more aggressive prosecution of domestic violence offenders, particularly in misdemeanor cases, and will impose greater accountability upon offenders, including court requirements to participate in domestic violence sanction programming designed to encourage men to cease their violent and abusive behavior. Enhanced options for sanctions supported by STOP funding, including domestic violence offender intervention programs, will provide additional opportunities to successfully effect change in domestic violence defendant/offender behavior patterns; reduce victim lethality and severe injury; and bolster enforcement of state laws in a comprehensive approach to both reduce violence and increase victim safety.

## Intended use of Grant Funds:

STOP grant funds will provide financial support to ensure the continued operation in the greater Hartford area of expanded sanction programs that have been specifically focused upon male domestic violence offenders. EXPLORE is the post plea/conviction domestic violence offender program currently in place the Hartford Geographical Area (GA) court with domestic violence offenders ordered to participate as a condition of their probation. EXPLORE often operates at capacity, demonstrating the support of the program by the Court and domestic violence prosecutors. The strength of EXPLORE resides not only in the imposition of the offender sanctions program, but in combination with the concurrent provision of enhanced services to the victims of these offenders in collaboration with community-based Family Violence Victim Advocates in the Hartford area.

STOP grant funding has been allocated since 2016 to carry out an enhancement to then-current practice to refine and improve the manner in which domestic violence offenders are placed in EXPLORE in the greater Hartford area. Prior to this enhancement, individuals were placed in EXPLORE largely based upon the

utilization rate of the program and the availability of the offender to participate in EXPLORE (based upon work schedule, other treatment responsibilities, etc.). Risk level of the offender was not considered for placement in the program.

The State of Connecticut Judicial Branch now uses a validated risk assessment instrument (DVSI-R) to identify domestic violence offenders who are most likely to recidivate and repeat negative behavior in the near future. Although many offenders referred to EXPLORE are identified as high risk, there are other individuals who plead guilty that fall along a continuum of risk. EXPLORE groups previously were comprised of offenders who were identified as both medium and high levels of risk. STOP grant funding has allowed, for the first time, for a homogenous group of high-risk offenders to be placed in an EXPLORE cycle. Outcome data for high-risk groups is now beginning to be compared to outcome data from previous EXPLORE groups to examine the effectiveness of homogenous grouping on factors including but not limited to; program completion, program discharge reasons, and recidivism post-program completion.

Additionally, the Judicial Branch Court Support Services Division has identified individuals who have been ordered by the Hartford GA court to participate in EXPLORE during or after placement in the Alert Notification/GPS program in an effort to further delineate the population of high-risk offenders. A modified EXPLORE cycle has been put in place for offenders from this high-risk population, and outcome data for each offender is being examined to determine if significant differences can be identified as a result of this placement.

Starting in 2021, STOP grant funding was utilized to evaluate a new and potentially promising Family Court procedure for adjudicating the wide continuum of matters that are filed in this most difficult system. The "Triage and Pathways" approach was put in place in Connecticut during the COVID-19 pandemic in order to facilitate improved outcomes for cases in the Family system, including those that have domestic violence as a component. The evaluation of the "Triage and Pathways" approach will examine how the initial triage process and subsequent recommendations offered to Family Court officials to identify the most appropriate pathway or "track" for a particular case affect its outcomes, particularly in matters involving victims of domestic violence. Outcome data for these specific cases will be studied and the resulting conclusions will be utilized to modify current practice. The initial data set for this project has been sent to the National Center for State Courts for analysis and preliminary results are anticipated to be made available to the Judicial Branch and STOP grant managers sometime in 2023.

All of the activities described in this section are dependent upon STOP funding and are unlikely to continue in its absence.

## **Expected Results of the Grant Funds:**

Over three hundred referrals were made to EXPLORE in 2021. Harford EXPLORE had one hundred thirty-two participants and attained a 65% completion rate for that year. Offender re-arrest rate for domestic violence related charges 12 months post-program completion was 13%, which is comparatively low and may be related to the effect of EXPLORE upon high-risk domestic violence offenders in the Hartford area. The rate of complete "no-show" outcomes to EXPLORE was 12%, which meets the goal set for this metric.

# **Demographic Characteristics of the Population Served:**

Offenders and victims of domestic violence vary in age and cross all socioeconomic, cultural, race, and ethnic populations.

The Judicial Branch collect the following demographic information for participants (offenders) in EXPLORE:

# Race/Ethnicity (self-report)

Non-Hispanic White	35%
Non-Hispanic Black	33%
Hispanic	30%
Non-Hispanic other	2%

## Age

18-24	13%
25-29	21%
30-39	36%
40-49	18%
50 and over	12%

## Language

English speaking	72%
Bi-lingual (did not specify primary language)	20%
Spanish speaking	7%
Portuguese speaking	1%

## Disability

No data relating to disability is collected.

The Connecticut Judicial Branch, Court Support Services Division continues to support the work of the Office of Violence Against Women and is pleased to be a participant in the STOP grant program.

Sincerely,

Gary A. Roberge

**Executive Director** 

State of Connecticut Judicial Branch

Fary A. Rah

Court Support Services Division



June 1, 2022

Allison Randall
Principal Deputy Director
Office on Violence Against Women
U.S. Department of Justice
950 Pennsylvania, NW
Washington D.C., 20530-0001

Dear Ms. Randall,

The Connecticut Coalition Against Domestic Violence, Inc. (CCADV) was founded in 1987. We are a membership organization that works together to lead Connecticut's response to domestic violence. Our statewide network is focused on advocacy, outreach and education and our work transforms political, economic, and social responses to create systems that better serve survivors of domestic violence and their families.

CCADV works at the state and national level to identify, offer, and support strong policies and best practice models that improve the response to domestic violence in Connecticut. As the statewide leader, CCADV identifies and initiates collaborations across various disciplines and institutions, provides comprehensive standards and supports to our member organizations, operates our 24/7 statewide domestic violence hotline, CT Safe Connect, and advocates for systemic and comprehensive approaches to victim services and offender accountability. CCADV Member Organizations and CT Safe Connect served 37,773 in FY19 and 37,223 in FY20 with 13,330 contacts into our hotline that launched just three months prior to the pandemic.

CCADV saw the demand for services continue in FY21 with 38,989 individuals served and 37,901 in FY22. During this time frame, CCADV demographic data for underserved populations was 24% Latino, 23% Black/African American and less than 1% for population identifying as Asian, American Indian/Alaska Native, and for multiple races. Approximately, 1% of: people served identify as immigrants. For limited English Proficiency, 10% victims identify translation and interpretation needs - not including Deaf/Hard of: Hearing. Individuals with cognitive, physical and/or mental health concerns account for 10% of: people served. CCADV aims to improve outreach to populations with less than 1% of: representation with a focus on Deaf/Hard of: Hearing, LGBTQ, and Veterans through outreach, awareness, and community collaborations.

STOP VAW funding is a significant source of financial support for the coalition and has allowed us to develop projects, initiatives and create critical support systems in the following key areas: 1) child advocacy, 2) law enforcement and, 3) underserved communities. As you know, these areas of focus are even more important now as we work to strengthen systems that have been drastically impacted by the effects of the pandemic.

One of our top priorities is to focus, enhance and expand our services for children experiencing domestic violence. We continue to work to increase the capacity of our domestic violence advocates through training and skill-building, with an emphasis on strength-based resiliency best practices. We work with our advocates to apply these best practices with children and their families. Additionally, CCADV continues to be committed to improving our collaboration across various disciplines with child welfare agency staff.

Through trainings and professional development opportunities we seek to continue our success in improving communications and collaborations across agencies to achieve better outcomes for survivors and their children.

STOP VAW funding has allowed CCADV to lead the nation in our successful implementation of the Lethality Assessment Program in Connecticut. We continue to provide ongoing technical assistance, training, and support to law enforcement agencies and CCADV member organizations to ensure best practices in the field. This program continues to see increased collaboration and communication across the law enforcement and domestic violence response systems. As we review the success of the program, we seek to find ways to improve the Lethality Assessment Program with an emphasis on ways we can engage underserved communities in the law enforcement response to domestic violence and support our Fatality Review and Domestic Violence Homicide Toolleit projects, especially given the new challenges both our law enforcement and domestic violence agencies face in a world forever changed by the pandemic.

Over the last several years, CCADV and our member organizations have invested heavily in outreach and education to underserved populations. It is a critical part of our work as we move forward and STOP VAW funding has helped to increase our connection to these communities and the number of individuals served from the following populations: Hispanic/Latinx, Asian, deaf, and hard of hearing, individuals suffering from mental health and substance use disorders and individuals that identify English as their second language. Additionally, this funding has helped to initiate further collaboration with organizations serving refugee and immigrant populations across Connecticut. In fact, we have entered a strategic partnership through our hotline to manage human trafficking requests for help with our partner, Connecticut Institute for Refugees and Immigrants (CIRI). CCADV remains committed to strengthening, enhancing, and expanding our work throughout the state to ensure even more individuals understand that our network is a safe and confidential place for them to seek services regardless of age, race, gender, sexual orientation, ethnicity, language, religious beliefs, disability, etc.

As we begin to envision implementation of the STOP plan over the next few years, CCADV continues to be committed to building best practices and improving systems advocacy for all experiencing domestic violence. We will continue to identify and build relationships with underserved communities, strengthen supports for children and collaborate with our law enforcement partners, all to improve outcomes for survivors and their families, but also ensure a basic right, that no one lives in fear throughout Connecticut. Thank you for you consideration and please do not hesitate to contact me if you have any questions or concerns. I can be reached at mscanlon@ctcadv.org or (959)202-5001.

Sincerely,

Meghan Scanlon
President & CEO

Meghan Scanlon



June 16, 2022

Allison Randall, Acting Director U.S. Department of Justice Office on Violence Against Women 145 N. Street, NE Washington D.C., 20530

Dear Acting Director Randall,

The Connecticut Alliance to End Sexual Violence (The Alliance) is the state's anti-sexual violence coalition of nine community-based sexual assault crisis services centers whose mission is to create communities free of sexual violence by providing culturally affirming, trauma-informed advocacy, prevention and intervention services centered on the voices of victims and survivors. The Alliance carries out this mission through statewide victim assistance, community prevention and education, and public policy advocacy.

The Alliance's nine sexual assault crisis services centers share coverage of all towns and cities in the state, creating a rich network of services for victims of sexual violence and their support networks. The Alliance and our membership have provided free and confidential services to child, adolescent, and adult victims of sexual violence throughout Connecticut since 1983.

Last year, The Alliance and its member centers provided services to more than 6,700 victims of sexual violence with a total of 43,484 services provided to those victims for a total of 32,287 service hours. Nearly one third (30.1%) were children and adolescents under 18, a 12.0% increase in the number of minors served from the previous year. Of victims served who reported their race/ethnicity, a quarter identified as Latina/o/x, 14.1% as Black or African American, 1.8% as Asian, and 4.5% as multiple races; 15.7% identified as men or boys and 0.7% identified as transgender.

Of those victims who received services from The Alliance and its member centers, 7.8% identified as having a hearing, intellectual, mental, physical, vision, or chronic illness/disability. 76.1% of those victims with disabilities identified English as their primary language, and 5.3% identified Spanish as their primary language. Of note, 0.1% identified Portuguese, Russian, Greek, or Korean as their primary language.

VAWA funds allowed The Alliance to address the needs of victims and survivors throughout the state of Connecticut including those from vulnerable and underserved communities through:

- Maintaining a 24/7 Spanish Response Team who staff the statewide 24/7 Spanish language sexual assault crisis hotline
- Providing bilingual and bicultural counseling, advocacy, and outreach services statewide for Spanish speaking communities
- Employing a Director of Public Policy, who assists centers and state partners with efforts to increase survivors' access to high-quality services and interventions in public accommodations, healthcare, and education
- Employing a Training and Prevention Manager, who provides technical assistance and support to centers in reaching victims of sexual assault and continued outreach activities to a variety of underserved communities

96 Pitkin Street
East Hartford, CT 06108
860-282-9881
EndSexualViolenceCT.org

Statewide 24 Hour Toll Free Hotline: 1-888-999-5545 ENGLISH 1-888-568-8332 ESPAÑOL

- Employing Post-Conviction Victim Services advocates who provide victim notification when an
  offender is being released back into the community or there are changes to the offender's
  status, help victims to complete victim impact statements as part of the Pre-Sentence
  Investigation to document the impacts of the crime on the victim, and provide ongoing advocacy
  to victims and their families for the duration of the supervision period
- Assisting K-12 schools and colleges and universities in improving policies and response to student victims and the school community
- Increasing community knowledge about services through outreach efforts that include the distribution of a variety of brochures, posters, and giveaways (in English and Spanish) at community-based events
- Addressing the health and forensic evidence collection needs of sexual assault victims by participating in the Sexual Assault Forensic Examiners Program Advisory Committee and the Commission on the Standardization of Evidence Collection in Sexual Assault Investigations
- Providing comprehensive training and technical assistance for Alliance member centers to enhance service delivery to victims, engage in systems change work, and ensure current knowledge in the field of victim services
- Providing a variety of training and technical assistance to community partners including law enforcement, juvenile detention, court-based victim advocates, parole and probation officers, and others to enhance service delivery to victims

Currently, through the support of VAWA funds, The Alliance is continuing to enhance services and outreach to vulnerable and underserved communities by:

- Working with tribal communities to raise awareness about services and provide training to community members
- Supporting male survivors of sexual violence by providing men's support groups, increasing male advocates at member centers, and increasing awareness about men as survivors of sexual violence
- Maintaining a coordinated and comprehensive Statewide Spanish Response Team
- Distributing linguistically appropriate and culturally specific information and outreach materials to underserved populations
- Facilitating the Women of Color Caucus Against Sexual Assault (WOCCASA) and Queer Caucus
  Against Sexual Assault (QCASA) coalition-wide affinity groups aimed at increasing skills and tools
  for advocates to support survivors from LGBTQ and communities of color
- Raising awareness and conducting outreach about sexual violence and available services to communities of color, immigrant and refugee communities, LGBTQ communities, homeless communities, addiction services, and faith-based communities

I welcome any additional opportunity to share the benefits of the STOP grant on services and community-based support for victims of sexual violence.

Best,

Beth Hamilton Executive Director



beth@endsexualviolencect.org



December 16, 2022

#### **Request for grant funds**

Dear Mrs. Randall,

On behalf of the Hispanic Health Council, I would like to thank you for the opportunity to request funding to support our Domestic Violence (DV)/ Intimate Partner Violence (IPV) Awareness initiative. The Hispanic Health Council (HHC) is requesting STOP grant funds to continue providing services to survivors of DV, sexual assault, dating violence, and/or stalking that experienced human trafficking in Hartford and greater Hartford area. Our services to raise awareness, educate, identify, advocate, and aid victims of Domestic Violence (DV)/IPV. The HHC counts with numerous partners among them healthcare clinics, community agencies, advocacy groups, among others and it has a very well-established network of supportive services serving communities of color. HHC has been providing community services for over 40 years building a reputation of trust among the community, in 2021 our sixteen current programs served about 10,000 clients within the Hartford County area, of whom 75% were Hispanic and 25% non-Hispanic.

#### The need for Stop Grants:

Intimate partner violence (IPV) and sexual violence is a public health problem in United States. Data from CDC shows that one in four women and one in ten men are affected by IPV. Thus, it is estimated that 11 million women and 5 million men have reported physical violence or sexual violence by an intimated partner. Furthermore, 43 million women and 38 million men have experienced psychological aggression by an intimated partner. Experiencing IPV negatively affects the psychological, emotional, and physical health of those affected. On many occasions IPV can even result in death. Having lower level of education and income, young age among other factors increases the risk of experiencing partner violence. In CT 32.9% of women and 33.9% of men have experienced intimate partner violence. In 2021, Safe Connect CT domestic violence resource received 10,739 victims, and made a total of 28, 094 contacts of whom 21% were Latino and 13% Black, and 85% were women. The City of Hartford has a population of 120, 576, of whom 44.7% are Hispanic and 37.2% Black. 28% of Hartford population lives in poverty<sup>1</sup>, which is a significant stressor that increase the risk of IPV. Thus, this program will focus primarily on providing services to population living in the City of Hartford. Intimate Partner Violence (IPV) is a serious public health issue especially impacting women and community of colors.

Increasing awareness about this issue helps victims and their families to feel supported and facilitate access to resources within the community. Furthermore, this issue exacerbates when it comes to undocumented individuals who fear the authorities, government, and deportation. A good amount of Hispanic Health Council Maternal and Child programs are immigrants with no access to adequate resources and living in constant fear, thus they are at increased risk for IPV.

The COVID-19 pandemic inevitably resulted in the implementation of restrictions that contributed to a significant increase in DV/IPV cases, most victims were trapped in their homes with the perpetrators. Often, victims do not seek or do not know where to seek help. Providing education on healthy relationships, the cycles of abuse, and

<sup>&</sup>lt;sup>1</sup> U.S. Census Bureau QuickFacts: Hartford city, Connecticut



intimate partner violence will provide a good understanding of the psychological impact victims are unaware of. As victims come forward, the HHC wants to be able to not only make referrals to the appropriate resource(s), but we also want to address and support their immediate needs. For example, victims will seek support when they are in a state of crisis, they experience trauma, substance abuse, and may suffer with a mental illness. The HHC has a Community Based Outpatient Clinic in Hartford and can evaluate victims for mental illness, trauma, provide crisis/mental health support, provide trauma informed care, and connect identified HT/DV clients to the Safe CT Connect Hotline/Chat feature. In addition, we are in the process of creating a Wellness Center that will help victims with their holistic needs.

This funding in combination with HHC's experience, reputation and network will help us to continue these efforts since there is still many areas in the community were raising awareness of the existence of IPV and resources available would help to prevent, help and educate victims of IPV.

For example, local providers in community clinics, hospitals, FQHCs, homeless shelters, and urgent cares may not know how to identify or assess DV victims. Additionally, community members have difficulty identifying victims because of desensitization to crime and violence. Therefore, it is incumbent to educate the community on these issues that are often overlooked, ignored, and unidentifiable.

#### **Intended use of Stop Grant Funds:**

The intended use of funds is to maintain staff who will focus on raising awareness about the existence of DV & IPV, ways to prevent it, provide information on available resources within the community as well as referrals for additional support and/or clinical services when needed. As the community becomes aware of this problem, it will know how and where to report incidents of DV/IPV. HHC can then assess and determine if residents are experiencing DV/IPV. HHC's program includes activities such as tabling at various settings to provide brochures and program information, participation in community events, IPV/DV screenings, educational sessions, providing referrals for additional services and facilitating a support group for victims of IPV/DV.

In addition, HHC plans to implement a train-the-trainer model to educate and raise awareness, incorporate a community engagement model, and include readily available mental health and psychiatric services. HHC has Spanish speaking behavioral health staff that supports monolingual Spanish speaking victims. Often, these individual's do not have access to healthcare, are undocumented, and uninsured. The HHC will support any individual regardless of their ability to pay. We provide sliding fee scales, pro-bono services, and help connect victims to services. However, additional funding to support mental health services will be beneficial for any victims of IPV, as there is a significant need for mental health services and a national shortage of Spanish speaking therapists and psychiatrists.

The following is a description of job descriptions to execute the program.

The Project Director (PD) is responsible for the implementation of DV, and behavioral/mental health services. This person will oversee the budgets, incorporate policies and procedures, manage/submit quarterly/end of year reports, revise narratives, incorporate crisis intervention, trauma informed care, incorporate an integrated care model, meet with funders to discuss programmatic concerns and strategic planning, create objectives/goals, build community partnerships, meet with stakeholders, attend monthly and quarterly meetings, incorporate trainings, and lead the department to effectively execute the deliverables and remain focused on the cause.

The Program Manager (PM) role is to supervise the work of the Community Liaison and CHW, and work with them on community event planning, this person will also attend all monthly and quarterly meetings for IPV/DV, coordinate all social media education, monitor data/demographic collection for quarterly and end of year reports,



provide coverage for the Project Director in their absence, ensure that deliverables are being met, train staff, ensure that all yearly trainings and refresher courses are completed, ensure that staff are culturally competent, trauma informed. The PM will continue to establish relationships with community partners and collaborate with new partners. In addition, the PM will assist with the planning to target all members of the community.

The Community Liaison will work with IPV individuals assisting them with their basic needs, and connecting them to supportive resources, such as food, housing, and shelter, she will also conduct follow-ups. This person will participate in coalitions and groups working to fight and prevent IPV/DV and coordinate with the other HHC programs to provide education and screening for all clients.

The Community Health Worker (CHW) will work to establish relationships with local businesses, CBOs, and other agencies, as well as facilitate presentations and screenings on IPV/DV. The CHW will also conduct street outreach and table at locations identified by the PM. The CHW will be responsible for collecting qualitative and quantitative data, feedback from their audiences, and demographics for reporting, will document all interactions, and encounters in their daily log. Internal referrals for basic needs support, housing, shelter, food pantry, and/or mental health services and external referrals including to the Safe CT hotline will be made by the CHW when appropriate.

The mental health professional such as a Licensed Clinical Social Worker (LCSW) or a Licensed Professional Counselor (LPC) will evaluate, provide crisis support, safety plan, determine the level of care, provide a diagnosis, and make treatment recommendations. When a victim experiences a traumatic event, is in an acute state of stress/trauma, under the influence of substances, the mental health professional is responsible to support the victim with the best option for care. This will include intensive outpatient care, police involvement, hospitalizations, or substance abuse treatment. The mental health professional can also provide treatment in our outpatient clinic.

#### **Expected Outcomes:**

HHC anticipates the following outcomes for each quarter and fiscal year.

1) Increasing community awareness: conducting two monthly media social media campaigns during the year in English and Spanish; 2) Conducting community presentation for providers and community at large; 3) Conduct regular education and IPV screenings among HHC clients at risk and at other community agencies; 4) facilitating access to resources and a network of support systems; and 3) provide mental health clinical support for victims in need; 4) Establish partnership with organizations and stakeholders seeking to combat IPV.

During FY 2021 IPV/DV STOP Program at the HHC conducted a total of 205 DV screens, of which 122 were conducted at events where a privacy space was offered or with HHC's walk-in clients, and 83 among clients from HHC programs, most clients were Latino/Hispanic women. A total of 40 clients were referred to the hotline or shelter. Program staff attended a total of 11 events where information about DV was given, reaching a total of 1790 individuals with bilingual information about DV. A series of virtual group presentation were provided providing information about DV, Post-traumatic stress disorder, anxiety, and other health related conditions. These presentations reached about 50 individuals with information. In October 2021 a DV Walk was organized to increase awareness about the problem of intimate violence problem, 100 individuals participated on this walk. IPV program staff also participated with partners during April on activities increasing awareness of sexual assault



during this month. Program staff is part of the CT Domestic Violence Fatality Review Task Force and participates in their monthly meetings. HHC Facebook page also post messages throughout the year to increase awareness of how to prevent IPV (intimate partner violence). The DV support group "Mujeres Empoderadas" have been meeting every Thursday at HHC premises. It counts with 7-9 participants every week.

Hartford has a dominant Hispanic, underserved and disenfranchised community, most victims come from communities of color, identify as members of the LGBTQ community, are undocumented monolingual/Spanish speaking. Presently, we target the ages of 18 to 65 and apply our cultural competence expertise to target all members of the community. In summary, the funds requested are to continue educating, raising awareness, sustain staff, to carry out the deliverables as stipulated by the grant, increase our number of presentations and contacts, and include a mental health service to support victims. Thank you for the opportunity to request funding to continue this worthy cause of increasing awareness of IPV among the Hartford Community.

Sincerely,

Sofia Segura-Perez, M.S., R.D.

Hispanic Health Council Chief Program Officer/ IPV STOP Grant Program Director 175 Main Street, Hartford CT 06106 860.527.0856 extension 1310 www.hispanichealthcouncil.org