Initial Findings on the Effectiveness of Maine’s Certified Batterer Intervention Programs

Report to Maine’s Joint Standing Committee on Criminal Justice and Public Safety

Pursuant to Public Law Chapter 431, “An Act to Enhance Maine’s Response to Domestic Violence”

December 2020
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Acknowledgements

MCEDV thanks the survivors of domestic violence who participated in our survey of the impact of Maine’s Certified Batterer Intervention Programs (CBIPs). Survivors whose partners were referred to CBIP shared their experiences with these programs and Coordinated Community Response partners. We thank them for the stories that they shared with us. Their willingness to provide that crucial insight situates our understanding of the impact and effectiveness of Maine’s Certified Batterer Intervention Programs in their lived experience.

This report was authored by Karen Wyman, Violence Prevention and Intervention Coordinator at the Maine Coalition to End Domestic Violence, but it represents and reflects the work and thoughts of many contributors. MCEDV thanks our collaborative partners in this process for the contributions, dedication, and expertise they have offered to this report, including:

- The nine MCEDV member programs across the state and their advocates who administered and helped develop the survey for survivors
- The directors and staff of Maine’s Certified Batterer Intervention Programs who steadfastly hold offenders accountable and believe in their capacity for change
- The Wabanaki Women’s Coalition
- The staff of the Maine Coalition to End Domestic Violence
- Professor Nicole Westmarland and her research team of the University of Durham for their work on Project Mirabal
- Erin Whitham who volunteered to consult on survey development
- Melissa Scaia for training and consulting with Maine’s CBIPs
- Coordinated Community Response partners around the state who join across disciplines to ensure greater safety for survivors and meaningful accountability for offenders

We are deeply grateful for their labor and their contributions to this project.

Finally, MCEDV thanks the Maine Department of Corrections for their support of this project. They have been stellar partners in this effort as both funders and collaborators.
Introduction

Domestic violence continues to be a significant factor in approximately half of the homicides committed in Maine, including most homicide/suicides. The 2014 Homicide Review Panel¹ report observed that “7 of the 21 perpetrators had previously been arrested for [DV crimes]”. The data is less clear in the two subsequent reports from 2016² and 2018³: 2016 says “In 5 cases, [of 16] the parties were involved with the legal system [civil Protection from Abuse Orders or criminal justice system]” and in 2018 “6 perpetrators [of 15] had prior criminal convictions and had been served with PFAs.” Based on this, at least a third of DV homicide perpetrators have had prior DV criminal history.

Maine’s Certified Batterer Intervention Programs (CBIPs) “are designed specifically to intervene with court referred adults but are not limited to court referrals.”⁴ The staff of these programs are trained in nationally recognized approaches and are connected through local Coordinated Community Response efforts with other stakeholders in victim safety and offender accountability. This coordination is essential to the effectiveness of violence intervention. Whatever door victims enter, they should hear that their safety is paramount; whatever door offenders enter, they should hear that they will be held accountable and expected to change their abusive behaviors. Every single Mainer should be able to rely on this Coordinated Community Response wherever in the state they are.

To achieve that end, the existing support for statewide coordination, training, and reduced fee reimbursement should continue.

Legislative Charge

The 128th Legislature, by way of “An Act to Enhance Maine’s Response to Domestic Violence, P.L. 2018, ch. 341, § 1 (L.D. 525) directed the Department of Corrections to provide “a report regarding the effectiveness of [Maine’s] Certified Batterer Intervention Programs, including any suggested implementing legislation.” As indicated in that legislation, the Maine Coalition to End Domestic Violence (MCEDV) administered the funding appropriated by the 128th Legislature to support statewide CBIP coordination, training of CBIP staff and monitors, reimbursement to CBIPs of reduced fees for indigent participants, and mileage for staff to travel to court and training. As part of this work, MCEDV conducted a Survivor Impact Survey, the results of which are referenced below. This act was companion legislation to LD 814⁵, which recognizes in statute that CBIP is the appropriate intervention in cases involving

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¹ 10th Report of the Maine Domestic Abuse Homicide Review Panel, April 2014
⁴ 03-201 Chapter 15, Batterer Intervention Program Certification, section 1.1 (B) 2.
⁵ P.L. 2018, ch.105, Sec. 4. 17-A MRSA §, sub-§6 (LD 814)
domestic violence, rather than anger management, individual counseling, or other interventions, and requires a court to note its reasoning on the record in any case where one of these alternatives is ordered in place of CBIP. Together, these are part of the policy effort to build a solid infrastructure around domestic abuse interventions in Maine.

Overview of Maine’s Certified Batterer Intervention Programs

An effective response to domestic abuse relies upon a Coordinated Community Response (CCR) in which the various entities in a community that interact with victims and offenders respond with consistent messages and interventions that prioritize victim safety and autonomy alongside accountability for offenders6. A Coordinated Community Response can take a variety of forms. Typically, it involves a task force or other multi-disciplinary work group focused on improving systemic and community prevention and intervention regarding domestic abuse and violence. A CCR may include High-Risk Response Teams (HRRT) to address specific cases with particularly dangerous factors. An effective CCR, however, is more than a monthly or quarterly meeting; it is a community that comes together to say:

- abuse will not be tolerated,
- victims will be kept safe and free, and
- those who abuse will face meaningful accountability.

This happens in formal systemic ways, like through courts, health care, and child protective services, and in informal ways, through friends, family, and neighbors. In this report, CCR refers to the formal networks of professionals who interact with victims and perpetrators of abuse and to the concept of how our work and communities are organized to send the clear and consistent message that domestic abuse is unacceptable, that victims deserve safety, autonomy, and freedom, and that those who abuse should be held accountable for the harm they’ve done.

Maine’s Coordinated Community Response efforts are at varying stages of effectiveness and organization statewide. The structure of the Coordinated Community Response to domestic abuse varies statewide. In some areas of the state, that effort is organized effectively around principles of offender accountability and victim safety. In other areas, the response varies between municipalities or depends upon the particular professionals involved in cases. This lack of consistency compounds the challenge of CBIPs in creating conditions that lead to sustained behavior change, and it increases the chances of offenders avoiding accountability, putting victims at greater risk of further harm.

6 We are using the term “offender” throughout to be concise and understood, while also recognizing that those referred to CBIP are full humans who deserve to be known by more than the crimes they have committed. We recognize that they are also parents, spouses, siblings, workers, and members of our communities.

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Abuse intervention programs, like Maine’s CBIPs, with appropriate oversight and monitoring are an essential part of the coordinated community response, but they cannot solve the problem of domestic abuse alone. Intervention efforts work best when in concert with the efforts of legal systems, healthcare, education, social services, and other community entities, including informal connections like friends, families, and neighbors.

When MCEDV surveyed survivors whose partners had been referred to one of Maine’s CBIPs, many of them noted the vital importance of communication and coordination between and among CCR partners, including a way for survivors to make their own voices heard. This reinforces existing research about effectiveness of intervention programs being greatest when they are nested within an effective Coordinated Community Response. Certified Batterer Intervention Programs continue to be the most appropriate and effective response to domestic abuse as they address the belief structure that supports abusive actions. Anger management and individual counseling are sometimes ordered in place of CBIP, but these interventions situate the cause of domestic abuse incorrectly.

Anger management as an intervention suggests that domestic abuse stems from a lack of skill in regulating one’s emotions, but that is not the cause or nature of domestic abuse. Domestic abuse is purposeful and deliberate with the intent to exert power and control over the victim. Anger is one of the justifications for aggression and violence – weapons of coercive control that seek to mask intentional behavior as uncontrollable outburst of spontaneous emotion.

Individual counseling is generally sought to treat mental health disorders, and domestic abuse is not caused by or symptomatic of a mental health disorder, though a person who uses abuse may also have mental health issues. These are separate issues that require distinct means of intervention.

Maine’s certified Batterer Intervention Programs (CBIPs) are designed specifically to intervene with court-referred adults, and are educational programs with the goals of: “1) working toward the safety of victims; and 2) holding domestic abuse offenders accountable for their actions.” All programs are required to use curricula and practices that challenge common justifications and misconceptions about domestic abuse, including these principles as articulated in Maine’s Certification Standards:

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7 There is a global shift toward labeling these programs by the behavior rather than the person, from “Batterer Intervention” to “Abuse Intervention.” This shift also more accurately covers the behaviors used by women referred to these programs, the vast majority of whom, while having used violence, have not engaged in the ongoing and effective pattern of coercive, controlling behavior that characterizes “battering.”
9 03-201 Chapter 15, Batterer Intervention Program Certification, section 1 (B).

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1. Stress, life crises, and/or chemical dependency are not causes of domestic abuse; however, ongoing substance abuse increases the risk of re-offense;
2. Domestic abuse is one choice a domestic abuse offender makes to gain and then maintain an imbalance of power and control in the domestic abuse offender’s relationship with an intimate partner;
3. Domestic abuse offenders are solely and exclusively responsible for their controlling and abusive behavior;
4. The effect of abuse on victims, including children who witness abuse, is harmful; and
5. Abuse is never justified.\textsuperscript{10}

Currently, there are 16 Maine’s Certified Batterer Intervention Programs (CBIPs), 9 for male offenders and 7 for female offenders. The CBIPs for male offenders serve all sixteen counties of the state, and there are programs for women available in twelve counties. Four programs for women currently have classes, while the other programs do not have the minimum three participants required to run classes. As part of their certification process, all CBIPs are required to participate in the Coordinated Community Response in their areas. Specific information about the CCR efforts in each county can be found in Appendix B.

All of Maine’s CBIPs are certified by the Maine Department of Corrections according to the state’s legal standards.\textsuperscript{11} Under those standards, Maine’s CBIPs are required to collaborate with local Domestic Violence Centers (DVCs), and some of them are housed within and operated by the DVCs. In those cases, the DVCs have taken precautions to create a strong and secure data firewall between the information regarding the victims of domestic abuse they serve in their advocacy programs and the information regarding perpetrators of abuse served in their intervention programs. In cases where the CBIP is separate from the DVC, Maine’s standards require them to collaborate with their local DVC for the purposes of ensuring the greatest degree of victim safety possible, program monitoring, and a coordinated community response.

Maine is fortunate to have a range of victim advocacy agencies available to meet the needs of survivors. The Wabanaki Women’s Coalition (WWC) membership includes five tribal domestic abuse and advocacy centers, and MCEDV’s member programs include eight domestic violence resource centers and the Immigrant Resource Center of Maine which provides culturally specific services to both domestic abuse and sexual assault survivors. The WWC reports that they have rarely, if ever, received partner contact information from Maine’s CBIPs.

\textsuperscript{10} BIP Certification, section 4.6.
\textsuperscript{11} State of Maine Rule Chapters for the Department of Corrections, 03-201 Chapter 15
All the intervention programs for women are run by MCEDV member programs except for Respect ME in Kennebec and Somerset counties, which is run by Kennebec Behavioral Health in close partnership with the local DVC, Family Violence Project. Four of the men’s programs are run by DVCs, while the other five are operated independently but collaborate with the local DVC as required by Maine’s CBIP standards. The chart below provides a list of Maine’s intervention programs and parent organizations, the counties they serve, partnering DVCs, curriculum used, population(s) served, and number of classes offered per week.

<table>
<thead>
<tr>
<th>Counties Served</th>
<th>Program Name (Parent Organization)</th>
<th>Domestic Violence Center</th>
<th>Curriculum Used(^{12})</th>
<th>Population(s) Served – Number of Classes per Week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Androscoggin</td>
<td>Alternatives to Abuse (Safe Voices)</td>
<td>Safe Voices</td>
<td>Women – Turning Points Men – Duluth</td>
<td>Women – 1 class Men – 12 classes</td>
</tr>
<tr>
<td>Franklin</td>
<td></td>
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<tr>
<td>Oxford</td>
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<tr>
<td>Aroostook</td>
<td>Northern New England Community Resource Center</td>
<td>Hope and Justice Project</td>
<td>Emerge</td>
<td>Men – 3 classes</td>
</tr>
<tr>
<td></td>
<td>Choices (Hope and Justice Project)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Cumberland</td>
<td>A Different Choice (Through These Doors)</td>
<td>Through These Doors</td>
<td>Duluth</td>
<td>Men – 6 classes</td>
</tr>
<tr>
<td></td>
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<tr>
<td>Knox</td>
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<td>Lincoln</td>
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<td>Sagadahoc</td>
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<tr>
<td>Waldo</td>
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<tr>
<td></td>
<td>Time for Change Women’s Group</td>
<td>New Hope for Women</td>
<td>Turning Points</td>
<td>Women – no classes at this time</td>
</tr>
<tr>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

\(^{12}\) Links to mentioned curricula: [Duluth Model for Men](#), [Turning Points](#), [Emerge](#)

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<table>
<thead>
<tr>
<th>County</th>
<th>Program Name</th>
<th>Class Type</th>
<th>Provider</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hancock</td>
<td>Choice V</td>
<td>Next Step Domestic Violence Project</td>
<td>Emerge</td>
<td>Men – 2 classes</td>
</tr>
<tr>
<td></td>
<td>DV Turning Points</td>
<td>Next Step Domestic Violence Project</td>
<td>Turning Points</td>
<td>Women – 1 class</td>
</tr>
<tr>
<td>Kennebec</td>
<td>Menswork (Family Violence Project)</td>
<td></td>
<td>Duluth</td>
<td>Men – 10 classes</td>
</tr>
<tr>
<td>Somerset</td>
<td>Respect ME (Kennebec Behavioral Health)</td>
<td></td>
<td>Turning Points</td>
<td>Women – 4 classes</td>
</tr>
<tr>
<td>Penobscot</td>
<td>DV Classes for Men (Penquis)</td>
<td>Partners for Peace</td>
<td>Duluth</td>
<td>Men – 6 classes</td>
</tr>
<tr>
<td>Piscataquis</td>
<td>Turning Points (Partners for Peace)</td>
<td></td>
<td>Turning Points</td>
<td>Women – no classes at this time</td>
</tr>
<tr>
<td>Washington</td>
<td>Step Forward, Leaving Violence Behind (Next Step DV Project)</td>
<td></td>
<td>Duluth</td>
<td>Men – 1 class</td>
</tr>
<tr>
<td>York</td>
<td>Violence No More (Caring Unlimited)</td>
<td>Caring Unlimited</td>
<td>Program-Created</td>
<td>Men – 6 classes</td>
</tr>
<tr>
<td></td>
<td>Turning Points (Caring Unlimited)</td>
<td>Caring Unlimited</td>
<td>Turning Points</td>
<td>Women – 1 class</td>
</tr>
</tbody>
</table>

**MCEDV Observations**

This is the first time that there has been funded statewide coordination of Maine's CBIPs, and that coordination, begun in April 2019, has been fruitful. MCEDV’s Violence Prevention and Intervention Coordinator has been able to conduct site visits with all of Maine’s CBIPs, observe classes and provide feedback, and field technical assistance questions. It is sometimes challenging for the CBIPs that are not housed within DVCs to stay connected to

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the realities of victim experience as they lack daily access to colleagues engaging with survivors through advocacy services and having coordination through MCEDV has provided a liaison between intervention programs and advocacy organizations, as well as a central source for up-to-date research and training opportunities. One CBIP Director described the value of MCEDV’s statewide coordination in this way:

The statewide coordination has created a relationship between the CBIPs across Maine. This has never been done in such a meaningful way. It has allowed us to learn from colleagues with whom previously we had little contact. I believe this is creating a more robust professionalized service delivery, so that participants now receive a similar experience no matter where they attended CBIP in Maine. The statewide coordination, especially during such a challenging year as this, has kept folks connected and feeling supported in the work. It has facilitated a better flow of information from MDOC to CBIPs and back to MDOC, which translates to CBIPs performing better than ever before... I would go as far as saying that CBIP would have been at risk of going out of business this year without MCEDV working to find a way for CBIP providers to deliver services outside of in person groups.

Through the monitoring process, technical assistance, site visits, and feedback about trainings, needs and promising practices have been identified that inform the recommendations in this report. During COVID-19, MCEDV was able to convene regular meetings of the CBIP network - first weekly, then twice monthly – to support and facilitate the programs in responding to the rapidly evolving circumstances of the pandemic. This resulted in greater efficiency of response and a more consistent approach statewide. As a result of this, MCEDV was able to provide comprehensive statewide CBIP updates to the Maine Commission on Domestic and Sexual Abuse as well as our legal system partners, including the Judicial Branch and the Maine Prosecutor’s Association.

Maine’s CBIPs have noted the following among their needs:

1. **Training** for new educators to understand the dynamics of domestic abuse and to gain certification, as well as opportunities for more experienced educators to reinforce their skills and knowledge and meet continuing education requirements. Cost and availability of trainings are barriers.

2. **Program management support** is needed, including the hiring, training, supervising, and retaining qualified educators and monitors; implementation of consistent practices statewide; efficient systems for attendance, fee, and data collection and tracking.

3. **Supports to reduce barriers to participation**, including transportation for both participants and educators; childcare; and resources for co-occurring issues (substance use, mental health, physical health). Participants in intervention programs for women noted the need for these childcare and transportation resources.
particularly, and survivors who responded to the survey noted the financial burden of CBIP participation as well as a desire for substance use and mental health treatment for their partners/former partners who were referred to CBIP.

4. Stronger statewide Coordinated Community Response to include consistent CBIP practices statewide and training of community partners, particularly within the criminal and civil legal systems and with behavioral health professionals to whom referrals are made for anger management or counseling when CBIP is the appropriate response.

5. Responding to diverse populations including people with limited English proficiency, culturally specific populations, including New Mainers, tribal members, and LGBTQ+ communities.

6. Men’s programs noted a need for greater connection to victim advocates and survivor experience to keep the safety and wellbeing of survivors at the center of the work.

7. Managing volume of referrals – in some areas, high volume creates a caseload that is difficult to manage, and in other areas, low volume makes it difficult to run classes consistently.

Each program tailors its approach to the community in which it resides, and some promising practices have been observed:

1. Monitors attend 3 consecutive classes instead of one per quarter. This allows for more robust feedback, stronger relationship between educators and monitors, and stronger connection to survivor perspective.

2. Partnership with “Raising Readers” so that CBIP participants who are parents can bring books home to their children. Many of the CBIP educators cite a desire to prevent ill effects on their children as a motivator for change among participants. More work needs to be done to explore the best and safest ways to engage those who have used abuse in their roles as parents along with their abuse of the other parent.

Without statewide coordination and communication, these needs and promising practices might exist in separate silos around the state, but instead MCEDV has been able to bring common needs and effective strategies forward for statewide problem-solving and idea-sharing. One CBIP Director described the impact of MCEDV’s statewide coordination in this way:

We have found MCEDV to be an invaluable resource since the transfer of oversight and management of Maine CBIP’s from MABIPs. [MCEDV’s] leadership, knowledge, and willingness to work with us, as a group & as individual programs, has been exceptional, especially through a pandemic. [MCEDV]’s determination to bring us together to give us all a space to overcome barriers and to resolve problems was key. As was [the]
acceptance to be the agent to move the process further, even when it sometimes seemed as if we had run into a wall. The Coalition’s ability to create forms, assist in creating procedures & policies, organizing timely meetings, setting up training opportunities and capturing all our voices was so helpful in a time when no individual CBIP had the time to take on any of those projects.

MCEDV observes that, despite the change in statute, courts continue to order inappropriate and ineffective intervention. The Maine legislature has recognized CBIPs as the appropriate response to domestic abuse and violence. Judges must make findings on the record when an intervention other than participation in one of Maine’s Certified Batterer Intervention Programs is ordered. This was based in part on substantial research that supports BIPs as the appropriate intervention; no evidence that anger management effectively prevents recidivism; and some evidence that anger management may increase rather than decrease abusive behavior.

Despite this, MCEDV continues to hear anecdotal reports of inappropriate intervention being ordered in domestic abuse cases. Alternative interventions often include options built upon common justifications and misunderstandings of the cause of domestic abuse. It is tempting to attribute domestic abuse to untreated substance use disorders or mental health problems, but those co-occurring issues, while they can exacerbate the danger of domestic abuse, do not cause the violence. Similarly, anger management is only an appropriate intervention if the cause of the actions is an inability to control one’s anger. Domestic abuse is not an issue of skill deficiency or inability to regulate emotion; it is deliberate and purposeful.

Unfortunately, there is currently no consistent mechanism for collecting data to fully understand how often orders for something other than CBIP happen, what the alternate orders include (anger management, counseling, etc.), or the reasons for those orders. If a judge is called upon to decide whether to order CBIP or not, and makes findings that support not ordering CBIP, there is currently no simple way to collect data on those cases in the aggregate. It would require physically pulling and reviewing every criminal case file wherein a crime of domestic abuse and violence was charged. A similar challenge exists in understanding the criteria for including CBIP as part of the conditions of deferred dispositions. Understanding the criteria for including CBIP as part of the conditions of deferred dispositions would help create a complete picture of the state’s response to domestic abuse. Tracking the consequences for compliance and non-compliance, regardless of referral source, would help further determine where gaps exist in efforts to protect the safety of survivors and to hold offenders accountable in meaningful ways. The data and rationale regarding the circumstances under which inappropriate interventions are ordered would help clarify what remedy would effectively address and correct it.
Key Accomplishments

MCEDV is proud of the strides that have been made in the first two years of this funding. Those accomplishments have included:

- Successful development and implementation of reimbursement for reduced fees for income eligible participants, including eligibility determination, data collection, and reimbursement processes.
- Supporting the certification of two new intervention programs in previously unserved areas – a women’s program in Hancock County and a men’s program in Washington County.
- Convening and facilitating meetings of the network of CBIP providers to promote consistent, responsible, and effective program adaptations to the COVID-19 pandemic and its restrictions.
- Providing both foundational and advanced training from nationally recognized violence intervention experts, including training specific to the use of videoconferencing during COVID-19.
- Administering a survey to explore the impact of CBIP participation on the lives of survivors whose partners are referred to Maine’s men’s programs to better understand the effectiveness of Maine’s CBIPs.

In addition to these accomplishments, MCEDV’s ongoing statewide coordination and technical assistance have helped Maine’s CBIPs overcome both large and small hurdles. MCEDV has provided a place for both intervention educators and victim advocates to turn with their questions, and MCEDV has been able to connect them with appropriate resources and, when needed, act as a liaison between the two.

While these accomplishments are significant, they have also revealed that there is substantial work still to be done to ensure that Maine’s CBIPs, along with their victim advocacy partners and Coordinated Community Response teams, are achieving their aims of increased safety and freedom for victims and meaningful accountability for offenders. In the next sections of this report, each of these accomplishments will be explored more fully.

Reduced Fees for Income Eligible Participants

The implementation of partial reimbursement for reduced fees for income eligible participants has yielded new knowledge about the economic status of people ordered to Maine’s CBIPs. The income threshold set for income eligibility for this program is 138% of Federal Poverty Levels (FPL) to be in line with guidelines for common safety net programs like Medicaid, TANF, and SNAP benefits. Eligibility guidelines were established to minimize administrative burdens on the CBIPs, which already operate on shoestring budgets. By
aligning eligibility with other programs, participants can use verification from those programs to demonstrate their eligibility for reduced fees, and CBIP staff are often saved additional work. Statewide, approximately 36% of CBIP participants, an average of 204 individuals per quarter, in participating programs were eligible for reduced fees. This is roughly three times the rate of people living in poverty in Maine.\textsuperscript{13}

One survivor noted that, “BIP was really expensive for our family.” While the cost of the program is intended to be a part of how a participant is held accountable, it is impossible to situate that responsibility solely on the participant’s shoulders in all circumstances, particularly when the survivor is still living with the person who abused them.

In 2019, the first year of this funding, MCEDV created reimbursement forms, guidance documentation, and a recommended practice for implementation of LD 525 (2018 Chapter 431 Public Law) to partially reimburse fees for income-eligible participants. By the end of 2019, six of the eight programs for men and one of the programs for women were requesting reimbursement for income-eligible participants. Staff at programs that are offering reduced fees ($10/session minimum) reported that it makes a significant difference in participants’ ability to complete the program. At one women’s program, approximately 80% of the women are eligible for reduced fees, and the Program Director has observed that the availability of these funds to support their attendance has resulted in fewer absences and more successful completions of the program. Some of the men’s programs also show high rates of eligibility at nearly 50%, which reveals disproportionate representation of people with low-income levels in Maine’s CBIP classes. The Director of Menswork which is the CBIP for Kennebec and Somerset Counties explained the impact that these funds have had on their program and its participants:

\begin{quote}
Ending 2018, Menswork was experiencing a 10-year steady decline in referrals. When the indigent participant funding was provided, we saw an immediate uptick in referrals and have learned that defense attorneys were successfully arguing program cost at sentencing, and judges were listening. In 2018, we received 115 referrals; in 2019, 125 referrals; and this past fiscal year from October 2019 to October 2020 we received 143 intakes with 70 completions... These enrollment stats are directly linked to the indigent funding. If it goes away, judges will again be considering the financial state of a defendant when sentencing domestic violence cases.
\end{quote}

County-level data regarding the percentage of the population living below poverty as well as that data separated by sex, compared to the percentage of income-eligible CBIP participants

\begin{quote}
\end{quote}
in the programs that serve that area\textsuperscript{14} demonstrates clearly, a significantly higher proportion of CBIP participants are indigent or low-income as compared to the poverty level of the population at large in the respective geographical area. This was true for every county.

CBIP staff also acknowledged that the additional administrative work can be a challenge to manage with limited staff and budget. In 2020, the second year of this funding, participation increased to all nine programs and two of the women’s programs.

In the proposal for this funding that was appropriated by Maine’s legislature, the quarterly need was estimated at $25,000 statewide. The actual need has proven to be significantly greater, even without all programs requesting reduced fee reimbursement. The most recent (July – September 2020) quarter’s reimbursement requests totaled approximately $45,000. The chart below maps out how reimbursement requests have changed over the course of this funding.\textsuperscript{15} MCEDV estimates $50,000 per quarter as a minimum ongoing amount, and the economic impacts of the COVID-19 pandemic may cause that need to be even greater. Additional information about expenditures to date can be found in Appendix D.

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{participant_fee_reimbursement.png}
\caption{Participant Fee Reimbursement}
\end{figure}

\textsuperscript{14} United States Census Bureau Poverty Rate by County, accessed 10/22/2020: https://data.census.gov/cedsci/table?q=Poverty\%20rate\%20by\%20county&g=0400000US23.05000&tid=ACSST5Y2018.S1701&hidePreview=false

\textsuperscript{15} The quarter ending 6/30/20 reflects the April – June 2020 quarter in which many programs temporarily closed due to COVID-19 restrictions.
One CBIP director described the precarity of relying on participant fees in this way:

We are completely reliant on participant fees to cover the costs of our CBIP. We seek no other funds to support the CBIP program as we apply all our fundraising efforts on programming for victims/survivors and educational and prevention efforts. The costs that are offset by participant fees are only the most direct costs of CBIP: personnel expenses of direct CBIP staff, costs of renting space for classes, and other very direct overhead costs of the CBIP program (utilities, etc.) but no other indirect, overhead, or administrative costs. If we tried to include other costs, which are very appropriate but not included, the program would not pay for itself. We want participant fees to remain as affordable as possible to encourage a full 48 weeks of engagement.

The funds to support reimbursement of reduced fees for indigent participants have several layers of impact. They alleviate potential financial strain on survivors, they encourage and make possible completion of the full course of the CBIP classes, they grant dignity to indigent participants, they reduce systemic inequities due to economic status, and they provide vital operating support to the CBIPs.

New Programs Certified in Hancock and Washington Counties

To meet the goal of a consistent, predictable, and equitable response to domestic abuse throughout the state, it is essential that the most appropriate and effective intervention is available in all areas of the state. Washington County was without a Certified Batterers’ Intervention Program until Next Step Domestic Violence Project earned certification for their new initiative, Step Forward, Leaving Violence Behind in December 2019.

Next Step Domestic Violence Project took on the challenge of designing, planning, and implementing a CBIP for male offenders in Washington County. Program staff was able to attend a national BIP conference with a track of workshops specifically for new BIPs with the financial support of MCEDV through the DOC contract funds. The program started classes in early 2020 and was operational for approximately 6 weeks when COVID-19 restrictions were instituted. They are now offering classes once again via videoconference.

Additionally, Next Step’s Violence Prevention and Intervention Coordinator worked with the Director of the Hancock County program, Choice V, to certify a women’s intervention program in Hancock County. Most referrals to that program originate from DHHS Child Protective Services, rather than from Probation. This was one of the few classes that continued meeting without interruption throughout the pandemic because of their resourcefulness and willingness to use outdoor meeting spaces. With winter fast approaching, they have moved to videoconferencing classes.
The Maine Coalition to End Domestic Violence (MCEDV), the Maine Department of Corrections (DOC), along with Certified Batterer Intervention Programs (CBIPs) and their partnering Domestic Violence Centers (DVCs) have worked together to craft safe, effective, and appropriate responses during COVID-19. Since Governor Mills announced restrictions necessary to protect Mainers’ health, MCEDV and the DOC have been in regular communication with the network of people involved with Maine’s Certified Batterer Intervention Programs. The primary shared objectives have been to find response strategies that ensure to the greatest extent possible:

1. Safety of victim/survivors, children, and other household members,
2. Equitable access to programming by all participants, and
3. Continued engagement with local Coordinated Community Response efforts.

MCEDV has made the following efforts to support the statewide coordination of Maine’s CBIPs during COVID-19, including:

- Convened regular meetings of CBIPs, DVCs, DOC, and the Wabanaki Women’s Coalition (weekly March through June, twice monthly July to present);
- Shared regular email updates about training opportunities, status of Coordinated Community Response efforts statewide, and COVID-19 response resources;
- Consulted with national and international experts on best practices for intervention education;
- Drafted guidance for Maine’s CBIPs and the Maine DOC in the development and assessment of COVID-19 response plans; and
- Provided 15 hours of training in Fall 2020 on the use of videoconferencing software and videoconferencing facilitation skills to CBIP staff. Recordings of the trainings were made available to the full CBIP network.

A Director of one of Maine’s CBIPs for men shared, “The transition to videoconference would never have been achievable were it not for the statewide coordination provided by MCEDV. MCEDV conducted hours and hours of statewide zoom meetings for CBIP providers to determine the best way to keep victims safe and deliver CBIP in the face of this current pandemic.”

The DOC, in collaboration with MCEDV, recommended the modification of programming from in-person classes to one-on-one phone check-ins with participants with an emphasis on supportive crisis management. This approach allowed CBIP participants to continue to progress in their programs while minimizing dangers to victims and providing equitable
access to participants and followed the international best practice guidelines that were available at the start of the pandemic\(^\text{16}\).

Maine’s CBIPs centered safety in their work, based on the best available guidance, and initially suspended in-person classes due to COVID-19 following public health guidance. In November 2020, per the waiver process as allowed in the CBIP standards section 4.1, most programs requested permission from the Maine Department of Corrections to:

1. Offer in-person classes when it is feasible to do so based on current public health guidance and the availability of space that allows for physical distancing;
2. Offer classes via videoconferencing when in-person classes are not feasible due to public health and safety concerns; and
3. Consult with referral sources regarding participants who are unable to join either in-person or videoconferencing classes prior to allowing audio-only participation.

The Maine Department of Corrections (DOC) has encouraged all CBIPs to create back-up plans that include videoconferencing options for times when in-person classes are cannot safely be offered due to the ongoing COVID-19 pandemic. The Maine DOC, in collaboration with members of the Maine Commission on Domestic and Sexual Abuse, is pursuing a rule change to the CBIP standards related to the ongoing states of emergency declared by Governor Janet Mills.

As of November 2, 2020, the individual calls to CBIP participants were no longer permitted. When videoconferencing classes are needed due to health and safety concerns, participants will be expected to join from a private space with a reliable internet connection and to use headphones with an appropriate device (personal computer, tablet, or smartphone). CBIPs will consult with referral sources if participants report an inability to join the videoconference classes in this way.

To support the inclusion of videoconferencing classes and the specific planning that is needed to address the safety concerns it poses, MCEDV provided 15 hours of training in October with Melissa Scaia, an international expert in the use of videoconferencing with domestic abuse perpetrators. The training sessions addressed key decision points in planning and implementation, emphasized the importance of a coordinated community response across systems, and close collaboration with referral sources, courts, and victim advocacy organizations to minimize danger to victims.

CBIP staff have worked diligently to determine the ability of their participants to join via alternate means if in-person classes are not feasible in their areas. They have also worked

to find spaces that allow for physically distanced in-person classes in areas when possible. Through the collaboration and support of both the MCEDV and the Maine DOC, Maine’s CBIPs are better able to respond to the changing circumstances of the ongoing pandemic.

MCEDV Training Efforts

All CBIP staff are required to be trained in a nationally recognized intervention curriculum within six months of their hire, and they are required to attend a minimum of 6.25 hours of continuing education each year thereafter. One CBIP Director explained what this requirement means in practical terms:

"The trainings provided by these funds have allowed CBIPs to hire more qualified individuals, rather than recycle a smaller pool of folks who already had the training. Formerly, CBIP providers would have to fund a trip to Minnesota or various other out of state locations, just to have a very part-time employee trained in the national model as required by MDOC. The statewide trainings have proven invaluable, specific to the pandemic, as we have had to temporarily change our method of in person service delivery with COVID-19 risk increasing. The trainings for CBIPS has allowed Maine CBIP staff to be trained by experts in the field who have participated in studies of how best to use videoconference for CBIP. Lastly the national model trainings that have been brought to Maine have created a place for CBIP providers to form relationships with victim/survivor advocates, and research indicates CBIP staff who understand the lived experience of victim/survivors do better work within CBIP classes, and victim/survivors are made safer."

This training is essential to doing intervention work safely and responsibly, and it is a costly investment for these programs that rely on participant fees for operational costs and often have educators who are working on a very part-time basis. With these funds, MCEDV was able to alleviate some of that expense by providing both foundational and advanced trainings to CBIP educators with costs for lodging, mileage, and travel-related expenses reimbursed. When COVID-19 made in-person trainings impossible, MCEDV was able to pivot to provide advanced trainings online and to use training funds to pay the tuition of foundational trainings for new educators. One CBIP Director shared the impact of the provision of this training:

"It is very difficult to cover the costs of CBIP programs through fees alone. Educators and program coordinators must be paid for their challenging work, and often separate space, technology, and equipment are required. To make the program pay for itself, the fees can become untenable and disproportionate, yet few other resources are available for this work. We want..."
educators to remain up to date in their information and skill development and prioritize training though this adds to the financial burden of the program.

It is also important to find quality, relevant training so we are not just ‘checking the box’ of training. We have been grateful for the quality trainings made available since MCEDV became responsible for this element of CBIP work. Their understanding of the needs of the program have meant that all trainings are well worth our time and the financial reimbursements make it possible to send all educators rather than having to select a few. In this way, our full complement of educators are trained regularly and consistently, while at the same time making sure that the financial impact is minimized.

In 2019, MCEDV provided substantial training to CBIP staff that included opportunities for certification in national models for both men’s and women’s intervention programs. In May of 2019, Melissa Scaia of Global Rights for Women and Scott Miller of Domestic Abuse Intervention Program provided certification training for 60 people on Creating a Process of Change for Men Who Batter. Melissa Scaia returned in December 2019 to train 45 people in the Domestic Violence Turning Points curriculum for women who have used force. While here, Melissa provided an additional full day of training on Advanced Facilitation for 49 participants, including educators, monitors, and directors of both men’s and women’s programs. All the trainings were well-received and were at full capacity. In addition to providing initial certification and continuing education, the trainings offered valuable opportunities for networking and information-sharing among CBIPs and DVCs across the state. Training participants included staff members from all the state’s CBIPs and DVCs, the Wabanaki Women’s Coalition, Immigrant Resource Center of Maine, and the Department of Corrections.

In 2020, MCEDV shifted its training priorities and practices in response to the COVID-19 pandemic as it became clear that CBIPs needed to be able to offer programming via videoconferencing software. Fortunately for Maine’s CBIPs, Melissa Scaia has been involved in a pilot project testing the use of videoconferencing software in intervention programs with men, and she was able to partner with Jon Heath of Family Violence Project’s Menswork (Kennebec/Somerset) to facilitate classes in that new format through the Pathways to Family Peace program. Melissa provided online trainings, tailored to the specific needs of Maine’s CBIPs in the fall of 2020. Staff from Maine’s CBIPs attended the live online sessions, and recordings of the trainings were shared with those staff members who were not able to attend.

Trainings included:
- Engaging Responsibly with Perpetrators of Domestic Abuse during COVID-19 – 6 hours
• Use of Videoconferencing in Abuse Intervention Programs for Men – 3 hours
• Use of Videoconferencing in Abuse Intervention Programs for Women – 3 hours
• Effective Facilitation Skills for Abuse Intervention Using Videoconferencing – 3 hours

Due to the pandemic, MCEDV was also forced to shift from providing in-person foundational training to new CBIP educators in 2020. In the past, MCEDV has contracted with the creators of the Duluth Model’s Creating a Process of Change for Men who Batter curriculum and the Turning Points curriculum to provide this foundational multi-day training. Due to COVID-19, the Duluth trainers are offering Creating a Process of Change training in an online format, and MCEDV, with the support of the DOC, paid for the registration fees of new CBIP staff who needed foundational training so that they could attend.

Data Related to Evaluating Effectiveness of CBIP

The question of effectiveness is a complicated answer to provide because domestic abuse is a complicated problem to solve. “Do they work?” seems simple, but the answer is not. It depends on several variables, not all of which are within the control of an intervention program. One survivor provided a succinct answer to this perennial question, “People only make change when they identify their behavior and want to make change.” Given that behavior change is dependent to a large degree on personal motivation, it is important to consider how effective programs are at creating conditions that inspire that motivation. Jon Heath, Director of Menswork in Kennebec and Somerset Counties, described the difficulty of measuring “success”:

The difficulties in assessing success in a CBIP are challenging. Can we count it as a completer’s success if they are never again arrested for domestic violence? Or does that just mean were there no future arrests because they became smarter about how they batter? Or were there no future arrests because their victim grew weary of reporting the abuse, and carrying the burden of having to testify in court against the person who in a complex way, was both a loving partner and an abuser? The truth of effectiveness of CBIP like Menswork, is in its relationship to the Coordinated Community Response to domestic violence. CBIP is not and was never intended to be a standalone response to domestic violence and yet we live in an “evidence-based” world that expects clear results. Most “evidence-based” services spend lots of energy touting the effectiveness of their service. For CBIP this is not the case. We are part of a movement to end domestic violence which began at a time when it was legal for a man to rape and abuse his wife. The historical narrative we collectively created in the DV movement since the mid-1970s was to never give a victim/survivor false hope that a perpetrator had changed, and to never give a perpetrator false clout to wave a completion certificate as proof he had
changed. The result of that historical narrative has made an impact on the way CBIP is viewed by all today. CBIP providers seem to be shedding that self-deprecating storyline but doing so from a place of relationship with victim/survivor services with a goal of increasing victim/survivor safety.

There are various measures that can be considered indicators of effectiveness, and most of them are incomplete. The most readily available data is often related to criminal recidivism rates, but not all re-offenses are reported to and acted upon by law enforcement. There are also no consistent data collection practices around recidivism in Maine such that we could confidently give a clear picture even regarding the criminal recidivism rates at this point. Additionally, many forms of abuse that offenders commit are not obviously or wholly illegal, despite their detrimental impact on survivors and their children.

In many programs geared to change behavior, evaluation relies to some degree on the self-assessment of participants; however, domestic abuse offenders cannot be relied upon to accurately report changed behavior. They are invested in the appearance of changed behavior, but minimizing, denying, and avoiding blame for their abusive behaviors are core tactics of many people who use abuse and violence. In the following sections, several sources of data will be explored in more depth – the MCEDV CBIP Survivor Impact Survey, MCEDV Site Visits and Class Observations, and data available from the Maine DOC.

**CBIP Survivor Impact Survey**

The best insight and information about the effectiveness of intervention programs is held by the victim-survivors who are or were partnered with the CBIP participants and are or were the targets of the CBIP participants’ abuse and violence. To that end, MCEDV developed a CBIP Survivor Impact Survey modeled on Project Mirabal, a four-year longitudinal study in the U.K. that examined the impact of intervention program participation on the lives of partners and their children. Project Mirabal identified six areas of impact, listed below:

1. Respectful communication
2. Expanded space for action
3. Safety and freedom from violence and abuse for women and children
4. Safe, positive and shared parenting
5. Awareness of self and others
6. Safer, healthier childhoods

MCEDV created an abbreviated version of the Project Mirabal survey that sought information about whether survivor experience in those areas improved, worsened, or

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stayed the same when their partners/former partners were referred to CBIP. The survey also explored the efficacy of systemic responses to domestic abuse. In creating the survey, MCEDV consulted with the Nicole Westmarland who was one of the researchers on the Project Mirabal study, met with advocates who do CBIP partner contact work at MCEDV member programs, and consulted with a Maine-based researcher, Erin Whitham, to ensure reliable and useful results.

**A Note on Implementation Challenges:**

The original plan was to administer the survey in the spring and summer of 2020, but that timeline was interrupted by the COVID-19 pandemic. The survey was delayed, allowing both CBIPs and victim advocacy organizations time to adapt to the public health crisis. The survey was administered in the fall of 2020, with a much tighter timeframe of just three weeks for response collection. This resulted in a smaller pool of responses than hoped.

Additionally, a portion of respondents whose partners and former partners are currently enrolled in CBIPs were receiving services adapted to accommodate pandemic restrictions. Many of these participants received individual crisis management calls rather than typical weekly 90-minute in-person classes for several months. These responses measure the effectiveness of a non-standard approach and should not be interpreted as reflective of the effectiveness of standard class provision.

Administration of the survey revealed a systemic challenge in obtaining accurate contact information for partners of CBIP participants. As standards are currently written, it is the responsibility of the CBIP participants to provide that information. This is problematic as CBIP participants may want to prevent their current and former partners’ contact with organizations that support their safety and autonomy, and if separated from their partners, it may be unsafe to encourage them to seek their contact information. In some cases, the participants are under court orders of no contact with their former partners. CBIPs are in a difficult position in their efforts to get accurate information as they do not want to encourage harassing or stalking by the CBIP participants of their victims. This challenge, on top of the difficulty of reaching people through “cold-calling” generally made it particularly difficult to get a substantial sample size.

Lastly, some of Maine’s Domestic Violence Resource Centers also noted that response rates were somewhat depressed due to a significant portion of survivors either did not want to participate in the survey or for whom the DVC assessed that contact could not be safely done.

Despite these significant challenges, forty-two responses were collected over a three-week period from eight organizations, including Caring Unlimited, Family Violence Project, Hope and Justice Project, New Hope for Women, Next Step Domestic Violence Project, Partners...
for Peace, Safe Voices, and Through These Doors. Advocates at these programs expressed interest and enthusiasm at continuing to administer the survey in an ongoing manner to be able to collect more robust data.

The Survivor Impact Survey was shared with advocates at Maine’s eight domestic violence resource centers (DVCs), the Immigrant Resource Center of Maine, and Maine’s five tribal domestic and sexual abuse advocacy centers. While a larger response pool would allow more definitive and broad-based conclusions, the forty-two responses provided:

- Valuable information about the impact of CBIP participation on survivors,
- An opportunity to test the survey tool,
- Insight about the ways in which our systems both succeed and fail survivors, and
- An understanding of some of the lived experiences of those directly impacted by domestic abuse and our systemic interventions.

Survivors were asked to assess overall effectiveness of the CBIP, the impact of the offender’s participation in CBIP in various areas of their lives, the effectiveness of other community partners, as well as about re-offense and Protection from Abuse Orders.

When asked to evaluate overall effectiveness of the CBIP, survivor responses reinforced existing research\(^\text{18}\) that indicates that intervention programs are most successful when the participant completes the full course of the program. The only survivors who rated CBIP as “very effective” were those whose offenders completed or were still attending CBIP. This supports both the value of completion of the full program and also the value of ongoing supervision and monitoring that occurs while a person is in the program. For instance, one survivor reflected that the combination of CBIP and their partner’s sobriety made a significant difference in her safety and freedom, “He is a different person today than he was when he assaulted me and got arrested. CBIP, his stopping using (drugs and alcohol) and attending church, have made him into a better man and husband. I knew when he stopped using that things would get better, but every night he came back from class he just seemed energized.”

Conversely, survivors whose offenders dropped out or were expelled rated CBIP as “not at all effective” without exception. One survivor noted, “I had no idea that he wasn't doing well in the classes nor not attending. I just feel like that made things more dangerous for me and my children.”

Overall, survivors reported greater degrees of safety after the offender’s attendance at CBIP. As the table below shows, the number of survivors feeling “not at all safe” went

down, and the number of survivors reporting any degree of safety from “a little safe” to “very safe” went up. While this is heartening news, it is also important to note that survivors attributed their increased feelings of safety to a variety of sources, including CBIP, participants’ fear of arrest, probation, victim advocacy services, protection orders, sobriety, and survivors’ relocating away from the offenders. Some survivors specifically noted that they did not consider CBIP to be a significant factor in their increased feelings of safety, and others noted that it was one of a combination of factors. This survivor’s comments show the complexity that can be found in the combined interventions of probation and CBIP, “I don’t think it was him taking the BIP class that got him to stop being abusive. I think he’s damn scared of going back to jail and having probation. He also was never violent towards the kids and never would be. BIP may have showed him to be more respectful of women and me. BIP was really expensive for our family and if the probation ordered it, then they should pay for it.”

<table>
<thead>
<tr>
<th>How safe do you feel?</th>
<th>Before CBIP - #</th>
<th>Since CBIP - #</th>
<th>Before %</th>
<th>Since %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at all safe</td>
<td>25</td>
<td>10</td>
<td>60%</td>
<td>24%</td>
</tr>
<tr>
<td>A little safe</td>
<td>1</td>
<td>4</td>
<td>2%</td>
<td>10%</td>
</tr>
<tr>
<td>Somewhat safe</td>
<td>9</td>
<td>13</td>
<td>21%</td>
<td>31%</td>
</tr>
<tr>
<td>Very safe</td>
<td>5</td>
<td>9</td>
<td>12%</td>
<td>21%</td>
</tr>
<tr>
<td>N/A</td>
<td>2</td>
<td>5</td>
<td>5%</td>
<td>12%</td>
</tr>
<tr>
<td>Unanswered</td>
<td>0</td>
<td>1</td>
<td>0%</td>
<td>2%</td>
</tr>
<tr>
<td>Total</td>
<td>42</td>
<td>42</td>
<td>100%</td>
<td>100%</td>
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</table>

To explore more deeply the impact of CBIP participation, survivors were asked a series of questions related to the areas identified in Project Mirabal and asked whether behaviors had gotten better, stayed the same, or gotten worse since the CBIP referral. Feedback from survivors whose offenders were still attending, had completed, or whose status was

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Connecting people, creating frameworks for change.

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unknown indicated mixed results in all six areas. Some reported improvement, some reported worsening, and some reported that behaviors stayed the same. These results differed from those whose offenders dropped out or were expelled. In cases when offenders dropped out or were expelled none of their current or former partners reported improvements in any of the six areas\(^\text{19}\).

An area that warrants additional examination is whether the reduction of illegal behaviors (particularly physical violence) coincided with an increase in legal forms of coercive control. In open-ended answers on the survey, several survivors noted this happening, and some types of non-physical abuse were more likely to worsen, regardless of the participant’s completion/attendance status. The types of non-physical abuse that survivors noted increasing included financial abuse, intimidation, and threats. One particularly troubling comment from a survivor illustrated how offenders can “fly under the radar” even while enrolled in CBIP:

> He had a no contact order with me (because he was on probation for DV against me) while attending Batterers Intervention but was living with me. I was his ride and payment for Batterers Intervention, and he was angry every time I picked him up from it and we would argue the remainder of the evening about it. He would tell me that I wasn't being abused because the stories he heard from the other men were ‘worse’ than what he does. He started calling ME the abusive one. He would blame me for having to go to CBIP and would brag about how smart he was for ‘tricking' the people in charge because he would lie and ‘tell them what they want to hear.’ It was a horrible experience for me and just made him more angry, and he never took it seriously. I safely ended things with him for good just recently though! Yay!

The survey provided several opportunities for survivors to reflect on what worked and did not work well for them, both in terms of the offender's participation in CBIP and the overall response of the community to the abuse they experienced. Survivors were asked about their interactions with various community entities and the effectiveness and helpfulness of their responses. One such response seems simple on the surface, “My primary challenge is affordable housing for my children which is the only reason I am still living with him, and now I am pregnant.” The simple need for housing is complicated by the survivor’s pregnancy, which is a known risk indicator, both for re-assault and for lethality according to two validated risk assessment tools used in Maine.\(^\text{20}\) Along the same lines, legal assistance

\(^\text{19}\) One small exception to this was the question related to sexual coercion which had considerably fewer responses than other questions. It is not clear whether the improvement in this area for the few survivors who noted it was due to a change in behavior or a lack of continued contact with the offender.

was sought and received comparatively infrequently, but when it was available, survivors reported significant levels of helpfulness and effectiveness.

Survivors mentioned the vital role that personal motivation plays in sustained behavior change of their partners and former partners who were referred to CBIP. The leadership at A Different Choice, Cumberland County’s CBIP, agreed and expanded on both the opportunity presented to the CBIP participant and to the community striving to effectively respond to domestic abuse:

CBIPs are an important part of the CCR model. CBIPs are the agent that brings organized education to those who have shown they could benefit from this opportunity. That is what CBIP is, an opportunity. A lot of men complete the CBIP educational program, but many choose not to seize the opportunity to learn new ways of being, acting, and behaving in relationships. One can mandate someone to CBIP, but not to learn, grow, and change. We believe strongly in giving participants the opportunity to access this education, but that does not mean they will take anything from it. Just because a person completes a CBIP successfully, doesn’t mean he will change his behavior. Though if he does not change his behavior, his enrollment in CBIP has offered the community [an opportunity] to work and communicate together to keep his victim safer. Having participated in CBIP also provides information to the person he has chosen to victimize about whether he engages in good faith and takes advantage of what might be his best opportunity to learn new behaviors.

The responses to the open-ended questions resulted in the identification of key themes:

• Survivors want meaningful accountability and swift and certain consequences for abuse and non-compliance with CBIP requirements.
• Survivors need accurate information and clear lines of communication with all professionals involved so that they can plan for their safety.
• Survivors want professionals responding to abuse to coordinate their efforts with one another.
• Survivors often found value and safety when protection from abuse orders and/or probation were in effect.
• Survivors were concerned both about the abuse they experienced and the harm that their former partners went on to commit against subsequent partners.
• Survivors attributed changed behavior to a variety of sources, including threat of criminal sanctions (arrest, probation, incarceration), protection from abuse orders, sobriety, education, and personal motivation.
• Survivors who engaged with victim advocacy services found those services helpful and effective, and, in some cases, lifesaving.
• Survivors need resources for themselves and their children, including financial support/resources, safe and stable housing, and access to legal representation. They also want their partners and former partners to get the help they need to address their choice to abuse as well as with substance use and mental health issues when applicable.

One survivor offered this request to those in a position to respond to domestic abuse:

I think there should be some sort of way for victims to be involved with/have a voice in some way in the CBIP process while their partner is attending. He has told me he learned to ‘walk away’ from conflict but his understanding of conflict is any discomfort (even if it is something that has nothing to do with her) and he sometimes leaves for days, even when he is needed in the home. The program gave him a heightened sense of conflict and avoiding any sort of natural day-to-day challenges, instead of learning how to deal honestly with those. If anything, he is more psychologically controlling and abusive now. He learned how not to get arrested. It’s an effective program as far as participants learning how to communicate productively or cooperatively. He still has to control everything and has escalated in his verbal and psychological and financial and other types of abuse.

The responsibility is on all of us to find a way to provide survivors an opportunity to have a voice in these processes, while still maintaining essential confidentiality protections. Further, we must find ways to hold offenders accountable for all the abusive tactics they use, not just those that are against the law.

What we have learned from the survey indicates that we need to continue gathering this information and listening to the real-life impact our interventions have on survivor safety and autonomy. While it is a relief to learn that most survivors experience greater safety after an offender has attended CBIP, it is also concerning that some abusive behaviors worsened, and that no improvement was seen in any area for survivors whose partners or former partners dropped out or were expelled from the programs.

**MCEDV Site Visits and Class Observation**

MCEDV visited and observed at least one class at each CBIP with active classes in 2019. Overall, the classes observed were found to be meeting DOC standards and using identified best practices. The one observed exception was related to class content and was promptly and effectively addressed by the program.

MCEDV was able to consult with each CBIP about how and to what degree they meet each of Maine’s standards related to program certification. This helped to determine areas of
need in terms of training and technical assistance, and to give MCEDV the information it needed to connect CBIP staff with appropriate resources for skill development and problem-solving, as well as to update the Maine DOC about statewide challenges and developments.

One of the topics addressed in site visits was the status of local Coordinated Community Response efforts. A summary of those findings by county can be found in Appendix B.

**DOC Data**
The Maine Department of Corrections collects data from Maine’s CBIPs annually about enrollment and outcomes. Some key pieces of information from the 2018 and 2019 data are in the tables below. It is important to note that this data reflects totals for a calendar year, so there are some enrolled participants who may not complete until the following year due to the 48-week duration of Maine’s CBIPs.

One significant point to make here is the difference in numbers between male and female programs. Programs for women consistently have about one-tenth the number of participants as programs for men, and many of the women’s programs never have the minimum three participants to run a class. This is likely because most women who use force against their partners do so to protect themselves from the abuse and violence of their male partners. When rates of referrals to women’s programs rise, it raises the question of whether women are using more violence or if they are being wrongly deemed the predominant aggressor in a case where they have tried to resist harm being done to themselves.

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<tbody>
<tr>
<td>Probationers with DV Convictions</td>
<td>Male: 650</td>
<td>Female: 68</td>
</tr>
<tr>
<td>Enrolled in CBIP</td>
<td>Male: 977</td>
<td>Female: 40</td>
</tr>
<tr>
<td>Completed CBIP</td>
<td>Male: 270</td>
<td>Female: 9</td>
</tr>
<tr>
<td>Re-offended due to DV-related incident while attending and went to jail</td>
<td>Male: 24</td>
<td>Female: 0</td>
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</thead>
<tbody>
<tr>
<td>Probationers with DV Convictions</td>
<td>Male: 470</td>
<td>Female: 49</td>
</tr>
<tr>
<td>Enrolled in CBIP</td>
<td>Male: 1072</td>
<td>Female: 67</td>
</tr>
<tr>
<td>Completed CBIP</td>
<td>Male: 364</td>
<td>Female: 22</td>
</tr>
<tr>
<td>Re-offended due to DV-related incident while attending and went to jail</td>
<td>Male: 38</td>
<td>Female: 1</td>
</tr>
</tbody>
</table>
The full annual reports from the Maine DOC for 2018 and 2019 are available upon request from the Maine DOC.

**Recommendations:**

1) **Continue Statewide Coordination, Technical Assistance, and Support.**

   MCEDV has provided opportunities for peer collaboration, training, and support, as well as created model paperwork for Maine’s CBIPs to use. These supports are important to these programs which have limited funds for core operations, let alone additional administrative and support functions. One CBIP director said of MCEDV’s coordination efforts during COVID-19, “we would be floundering without you.” Several CBIP staff members have noted that, despite strong teams at their programs, this challenging work feels isolated and a network of colleagues engaged in the same effort has value to their ability to do this work well and sustainably. Priorities for continued statewide coordination include:
   a) Strengthening accessibility of Maine’s CBIPs to all Mainers
   b) Engage diverse community members in a way that is culturally competent and safe for participants.
      i) Needs assessment for New Mainers and people with LEP.
      ii) LGBTQ+: Partners for Peace, Maine Trans Net, Health Equity Alliance, and Penquis are collaborating on the planning and implementation of an intervention program to address the specific needs and context of Q+ individuals ordered to intervention programs.
      iii) Access for people who are Deaf or Hard of Hearing
      iv) People with disabilities

2) **Continue Current Funding and Seek Additional Funding.**

   The current financial structure for CBIPs poses an operational and funding challenge. CBIPs have minimal resources and depend almost exclusively on participant fees, which inhibits their ability to sustain and improve programming.

   Many CBIPs function with very part-time employees who have substantial initial training and professional development requirements that compound the difficulty of sustaining programs with this fiscal structure. COVID-19 has compounded the financial challenge. The need for reduced fees and the COVID-19 pandemic have brought into sharp relief the precarity of sole reliance on participant fees for program operations.

   At the same time, it is important that intervention programs not compete with or usurp funds for serving victims of domestic abuse. In order to run effective and sustainable
programs over the long term, intervention programs need to have reliable sources of core operational funds to support their work.

Therefore, this report recommends:

i) Identifying and supporting funding for core operations for CBIPs as reliance on participant fees is precarious, prevents advance planning, and creates an incentive for CBIPs to keep participants in class even when they are non-compliant;

ii) Identifying and supporting funding for CBIP teacher training and for CBIP representatives to attend CCR meetings and Judicial Monitoring sessions was an important step and should continue;

iii) Continuing and enhancing the funding for the provision of training;

iv) Continuing and increasing funding for the reimbursement of reduced fees for indigent participants to ensure equitable access for all those referred to CBIPs; and

v) Continuing and increasing funds to support ongoing statewide coordination of Maine’s violence intervention work.

3) Prevent Abuse by Changing the Culture that Supports It.

The tools of dialogue, critical inquiry, and examination of the beliefs that support one’s actions can be applied to prevention as well as to intervention. Possibilities for expanding the use of these tools into vitally important prevention work should be explored.

4) Address Victim Safety Risks.

a) Address CBIP Non-Compliance and Non-Completion. Retain current program duration and consider response to those who do not complete the full duration, whether that is because they drop out or because they are expelled. “Swift and certain” sanctions for non-compliance for BIP participants through effective compliance monitoring.

b) Develop protocols for compliance monitoring to ensure consistent and equitable responses regardless of the source of the referral to one of Maine’s CBIPs or the offender’s location.

c) Explore with women’s intervention programs the potential use of validated risk assessment tools with women referred to violence intervention programs to better understand their experiences and the risk they may face from partners who use abuse against them.

d) Promote timely notification of victims by prosecutors related to details of their cases.
5) **Increase Opportunities to Connect Victim-Survivors with Advocacy Services.**
   a) Ensure robust system of advocate-initiated contacts with current and former partners of CBIP participants, including ongoing administration of the Survivor Impact Survey.
   b) Expand availability of legal representation and advocacy to domestic abuse survivors, including those who have used force in resisting the abuse committed against them.
   c) Recognize that most women referred to Maine’s intervention programs are also the victims of coercive controlling violence by their partners, and explore what additional resources, services, safety planning, and protections should be available to them.

6) **Strengthen the Coordinated Community Response Statewide.**
   a) Improve communication between and among CCR partners and with victim-survivors about factors that impact their safety and autonomy. In the Survivor Impact Survey, a significant number of survivors raised the concern that lack of communication about compliance/non-compliance was a risk to their safety. There need to be effective and safe ways for survivors to share information about what their partner/former partner is doing and ways for information to be provided to survivors about the participant’s status in class.
   b) Consistent provision of ODARA scores to CBIPs for the purposes of informed decision-making and safety planning.
   c) Educate behavioral health professionals about CBIP as the most appropriate and effective response to domestic abuse and how they should respond to inappropriate court referrals for anger management and/or individual counseling.
   d) Provide and require training for both civil and criminal justice system partners, to include all members of the judiciary, on:
      i) the prevalence and impact of non-violent abuse on survivors and their children; and
      ii) the importance of attending to financial security of victims through the issuance of restitution and support orders at the earliest possible opportunities.

7) **Improve Program Evaluation and Data Collection across Systems.**
   a) The Maine Judicial Branch and the Maine Prosecutors Association should collaborate to create an effective mechanism for inputting data in cases involving domestic abuse and violence that allows aggregate data to be retrieved on:
      i) cases in which CBIP is ordered;
      ii) cases in which CBIP is not ordered;
      iii) the findings made regarding why CBIP was not ordered in a case involving domestic abuse and violence; and
iv) whether or not a participant ordered to CBIPs by the court completed the program or not.

b) Training for the Maine Judicial Branch, in collaboration with the Maine Department of Corrections, the Maine Certified Batterer Intervention Program network\(^{21}\), and the Maine Coalition Against Domestic Violence on Certified Batterer Intervention Programs and the benefit of Coordinated Community Response to ensure broad understanding of when and in what context these interventions are most effective.

c) Ongoing administration of Survivor Impact Survey by MCEDV

d) Continue with monitoring practices as outlined in Maine’s CBIP standards.

8) Review Maine’s CBIP Standards to Prioritize Victim Safety and Autonomy, Offender Accountability, and Equity of Response.

a) Consider changing terminology from “Batterer Intervention Programs” to Abuse Intervention Programs.

b) Retain gender-specific, educational approaches while continuing BIP standards accommodation of programming specific for women that acknowledge differences between men’s and women’s uses of violence.

i) Explore the use of the Danger Assessment as a tool to better understand the risk of harm that women referred to these programs may face.

ii) Explore avenues to address challenges of LGBTQ+ offenders and binary gender requirements for facilitators of men’s programs, including the emerging and promising collaboration between Partners for Peace, MaineTransNet, Health Equity Alliance, and Penquis.

c) Explore alternate means to provide partner contact information that does not rely upon the CBIP participant.

Conclusion

Over the last two years, MCEDV and its member programs, the Maine DOC, and Maine’s CBIPs have learned a lot and built a sturdy foundation for the ongoing work of ending domestic abuse through education aimed at reforming the belief structures that support abuse and coercive control. This work is not done, and its continuation will help us to create communities across the state who make it clear that their priorities when it comes to domestic abuse is keeping victims safe, autonomous, and free, and holding the person who has done the harm accountable. Support for this ongoing work will mean that this message becomes clearer, more widespread, and more consistent.

\(^{21}\) There is no formal organization of Maine’s CBIPs, though there has been in the past, which was called the Maine Association of Batterer Intervention Programs (MABIP), but it was administratively dissolved.
Central priorities of the next phase of this work are outlined in the recommendations above, but they boil down to the need to listen carefully to what survivors are saying they need from us, the network of people and organizations who respond to them formally and informally: that they need systems and people within those systems working together in a coordinated way to ensure their safety and the accountability of the person who harmed them. They also recognize that so much depends on the personal motivation of the offender:

He went all the time, he showed up, he was ready. Life was so different after that. But he used to mention there were people there who weren't ready to change and that it wouldn't work for them. It made him a changed man. If you aren't ready, you're not ready.

We need to improve our ability to motivate the offenders who are ready to make change along with our ability to quickly respond to those who make their lack of readiness clear through non-compliance and continued harmful actions.
Appendices

Appendix A: 2020 CBIP Survivor Impact Survey

Below is the text and full set of questions asked of survivors in the MCEDV CBIP Survivor Impact Survey.

Welcome to the MCEDV's Survivor Impact Survey. Thank you for taking approximately 30 minutes to answer these questions so we can better understand your experiences.

Form Information
Hello, the Maine Coalition to End Domestic Violence and your local Domestic Violence Resource Center invite you to take this anonymous survey. Below are the answers to some questions you might have.

Who should take this survey?
People whose partners or former partners have ever been referred to Maine's Certified Batterer Intervention Programs (CBIPs).

Why is MCEDV doing this survey?
The goal of Maine's CBIPs is to end domestic abuse. The only way we can know if they do that is to ask the people who experienced the abuse of men sent to the programs. Those questions have never been asked in Maine before, and we hope to find out if these programs help keep survivors and children safer. You can help us understand if these programs work and how we can make them better. What we learn will be shared with Maine's legislature so that programs can be improved.

Do I have to take this survey?
No. This survey is completely voluntary. You do not have to participate. You can skip any questions you don't want to answer by leaving it blank or choosing unanswered. You can stop at any time.

What will happen with my answers?
All answers are anonymous and confidential. The overall results of the survey will be used to tell Maine's legislature how CBIP programs affect the lives of survivors and their children generally. No personally identifying information will be collected or shared.

How long will it take?
It will vary, but we think it will take between 15 and 30 minutes.
What if I need help with safety or just need to talk about my experiences?
Help is available. You can call Maine's statewide helpline any time:
1-866-834-HELP
Deaf/Hard of Hearing 1-800-437-1220

Date:

<table>
<thead>
<tr>
<th>CBIP Attendance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. When your partner/ex-partner attended CBIP, did he:</td>
</tr>
<tr>
<td>• He completed the full 48 weeks of CBIP</td>
</tr>
<tr>
<td>• He stopped attending voluntarily before completing.</td>
</tr>
<tr>
<td>• He was expelled from the program before completing.</td>
</tr>
<tr>
<td>• Unknown</td>
</tr>
<tr>
<td>• Unanswered</td>
</tr>
</tbody>
</table>

| 2. How long ago did he attend: |
| • Currently attending |
| • Less than a year ago |
| • 1 – 3 years ago |
| • More than 3 years ago |
| • Don’t know |
| • Unanswered |

Respectful Communication

| 3. [If separated] Since he attended CBIP, has his respect for whether and how you want to be in contact with him: |
| • Stayed the same |
| • Gotten better |
| • Gotten worse |
| • Unanswered |

| 4. Since he attended CBIP, has his support and respect for your choices and decisions: |
| • Stayed the same |
| • Gotten better |
| • Gotten worse |
| • Unanswered |

Expanded Space for Action

| 5. Since he attended CBIP, have his actions to prevent you from seeing your friends, family or support system: |
| • Stayed the same |
6. Since he attended CBIP, have his actions to try to restrict where you go and what you do:
   - Stayed the same
   - Gotten better
   - Gotten worse
   - Unanswered

7. Since he attended CBIP, have his actions to use money or finances to control you:
   - Stayed the same
   - Gotten better
   - Gotten worse
   - Unanswered

Safety and Freedom from Violence

8. Since he attended CBIP, has his physical violence - punching, slapping, pushing, kicking, strangling:
   - Stayed the same
   - Gotten better
   - Gotten worse
   - Unanswered

9. Since he attended CBIP, have his actions to intimidate and threaten you:
   - Stayed the same
   - Gotten better
   - Gotten worse
   - Unanswered

10. Since he attended CBIP, have his actions to make you do things you do not want to do sexually:
    - Stayed the same
    - Gotten better
    - Gotten worse
    - Unanswered

11. Prior to his attending CBIP, how safe did you feel:
    - Not at all safe
    - A little safe
12. Since he attended CBIP, how safe do you feel:
   • Not at all safe
   • A little safe
   • Somewhat safe
   • Very safe

13. Since he attended CBIP, has his blaming you for his abuse:
   • Stayed the same
   • Gotten better
   • Gotten worse
   • Unanswered

14. Since he attended CBIP, has your fear of leaving the children alone with him:
   • Stayed the same
   • Gotten better
   • Gotten worse
   • Unanswered

15. Since he attended CBIP, have his actions to make the children report what you are doing and where you have been:
   • Stayed the same
   • Gotten better
   • Gotten worse
   • Unanswered

16. Since he attended CBIP, has your worry for your children's safety:
   • Stayed the same
   • Gotten better
   • Gotten worse
   • Unanswered

17. Since he attended CBIP, has he been arrested for DV-related offenses, other offenses, or both?
   Yes, DV
18. Have you ever obtained (or tried to obtain) any type of civil order against him (PFA or PHA). Select all that apply:
Yes - before CBIP
Yes - during CBIP
Yes - after CBIP
No

19. How effective and helpful was his attendance at CBIP in ending his violence against you?
   o Not at all effective and helpful
   o A little effective and helpful
   o Somewhat effective and helpful
   o Very effective and helpful

20. When you think about his participation in CBIP, is there anything else you'd like to share?

21. Have you ever received services from any of these people or agencies for his behavior toward you?
Batterer Intervention Program
Domestic Violence Resource Center
Friends/Family
Colleagues
Religious Group/Church
Doctor/Other healthcare provider
Helpline or online support
Mental Health Provider
Social Service Provider
Police
Lawyer/Legal Aid
Other

22. When you think about your experience with these resources, is there anything else you'd like to share?

23. Which CBIP did he attend?
   - Dropdown list of all Maine CBIPs for men

24. What agency helps survivors in your area?
- Dropdown list of MCEDV member programs and WWC tribal advocacy centers

**Demographics**

**25. Age:**
Choose: 18 – 24; 25 – 29; 30 – 44; 45 – 59; 60+

**26. Gender:**
Choose: Male; Female; Transgender, Nonbinary, Other

**27. Race:**
Choose: Black or African-American; White; American Indian or Alaska Native; Asian; Native Hawaiian or other Pacific Islander; Multi-race; Other
Appendix B: Maine’s Coordinated Community Response to Domestic Abuse by County

**Androscoggin, Oxford, and Franklin Counties**
Safe Voices oversees certified violence intervention programs called Alternatives to Abuse for both men and women in Androscoggin, Oxford, and Franklin counties. There is one class for women each week, and there are eleven classes for men. Safe Voices began requesting partial fee reimbursement in 2019 and has continued to do so in 2020.

There are family violence working groups in each county, frequently organized by Safe Voices educators. CBIP director looks forward to attending in the future as this first year of her role has been focused on programmatic issues. The CBIP director has a close connection to the High-Risk Response Coordinator at Safe Voices and is in communication with probation regularly.

Safe Voices participated in the following Coordinated Community Response (CCR) activities as reported on their quarterly reimbursement request forms: Judicial Review for Domestic Violence Cases once monthly at the Androscoggin County Court; participated in a High Risk Response meeting with DVC Staff re: one of our participants; participated in a Team Meeting with a participant and CPS caseworker to increase victim safety and offender accountability; dozens of one-on-one conversations by phone, email and in person with Probation officers and Deferred Disposition Staff at the District Attorney’s office regarding both individual clients specifically and our overall program more generally; consistently send letters to Victims of Domestic Violence whose partners and former partners are participants in our classes to link victims to our local DVC.

**Aroostook County**
Hope and Justice Project (HJP) oversees the certified violence intervention program for women called Choices in Aroostook County. They have not had the required minimum of 3 participants to run classes in 2019 and 2020.

Northern New England Community Resource Center (NNECRC) operates the certified violence intervention program for men in Aroostook county. NNECRC currently runs three classes weekly. NNECRC did not request partial fee reimbursement in 2019, but they have done so in 2020. NNECRC works with probation and parole a lot and feels they have a good relationship with their partnering DVC, Hope and Justice Project, who provides their monitoring. The Houlton police chief started the Aroostook County DV/SA Task Force about twelve years ago. CBIP director has not been able to attend due to scheduling conflicts, but he does stay updated about events. NNECRC reports that there seems to be good engagement from victim service agencies, tribal organizations, law enforcement (both local and state), and the local university.
Cumberland County
There is currently no certified violence intervention program for women in Cumberland county.

Through These Doors runs A Different Choice which is the certified violence intervention program for men in Cumberland County. They offer six classes weekly. A Different Choice began requesting partial fee reimbursement in 2019 and has continued to do so in 2020.

The director of A Different Choice understands the goal of CBIP within a coordinated community response as victim safety through education of men in lives who have victimized them. That is the paramount reason that the CCR is assembled. Communities cannot respond in silos. All of the lenses and perspectives need to be applied to see the full picture and effectively plan for safety. The Violence Intervention Partnership has been in existence for 20 years. It takes a long time to build trust and bring people together. The CCR in Cumberland County is very justice system focused.

A Different Choice participated in the following Coordinated Community Response (CCR) activities as reported on their quarterly reimbursement request forms: CCR meetings (Violence Intervention Partnership); meeting with new DA and staff; CBIP seat on Maine Homicide Review Panel (attend monthly meetings); Participate in pre-Judicial Monitoring meeting/attend monthly JM; meeting to discuss ADC classes with Windham PD; MCEDV CPS Advance Training; CBIP panel; and DV Case Coordination meetings.

Hancock and Washington Counties
Hancock and Washington Counties are in the same prosecutorial district, and many of the stakeholders in the Coordinated Community Response efforts in the two counties are the same.

This region is home to the two most recently certified programs. A violence intervention program for women was certified in 2019 in Hancock county. Choice V operates the certified violence intervention program for men in Hancock county. Choice V currently runs two classes weekly. Choice V began requesting partial fee reimbursement in 2019. Next Step Domestic Violence Project’s program for men, Step Forward, Leave Violence Behind, was certified by the Department of Corrections and began offering one class per week in January 2020.

Choice V regards the work of their partnering DVC, Next Step DV Project, highly. The Hancock County task force meets quarterly. They last met via Zoom in July 2020 with a good turnout. Representation includes someone from the District Attorney’s office, usually a
prosecutor and a victim witness advocate. There is also representation from the local sexual assault response agency, probation, sheriff’s department, Ellsworth police department, and the Maine State Police.

The Choice V director has a robust network of connections within the community. Reflecting on the task force, the meetings were good. The Choice V director works closely with the local DVC, law enforcement, and the District Attorney’s office. They get together at yearly events. The Choice V director has regular contact with probation and appears in court for DHHS often and sometimes for probation. Probation supports efforts at accountability as needed.

Choice V participated in the following Coordinated Community Response (CCR) activities as reported on their quarterly reimbursement request forms: Duluth Model training through MCEDV; communication with probation (weekly); court appearances and testimony; consultations with attorneys and probation; family team meetings; work with DVC advocates; referrals to parenting classes, substance abuse treatment, victim services; consultations with DHHS CPS workers, attorneys, and probation officers.

In developing its new CBIP program in Washington County (Step Forward, Leaving Violence Behind), Next Step reached out to community partners. They held a Lunch and Learn training session with DV-CPS Liaison at DHHS and met with the DA’s office. DA’s office and CPS have been making referrals to CBIP. They have a close working relationship with probation in which they work together to find solutions. In the near future, Next Step plans to set up a Zoom meeting to update CPS about current status of the program. They also plans to improve referral process by adopting forms recommended and developed by national CBIP expert, Melissa Scaia.

While there is no formal CCR structure in Washington County, there are good working relationships between Next Step and community partners. These relationships have been cultivated over time with law enforcement, DAs, and CPS.

**Kennebec and Somerset Counties**

Kennebec Behavioral Health collaborates with Family Violence Project to run Respect ME, the certified violence intervention program for women in Kennebec and Somerset counties. They have recently had to add additional classes in both Waterville and Skowhegan.

Family Violence Project’s Menswork Program operates the certified violence intervention program for men in Kennebec and Somerset counties. Menswork has nine classes per week.
Both Respect ME and Menswork requested partial fee reimbursement in 2019 and 2020. The director of Menswork cites the goal of the coordinated community response effort as recognizing that domestic abuse is not an isolated event and that it takes the whole community to change the culture. Members of the CCR are interested in what is happening in class, and CBIP director emphasizes importance of reinforcement of the same anti-violence message from everyone in community. Men in CBIP say that going back to communities where belief systems have not changes is a difficult challenge.

Menswork serves two counties, and there are distinct differences in the coordinated community response in each county. In Somerset County, the DV Task Force has been meeting for more than 20 years and has broad representation from the community. In Kennebec County, the CCR is still building its membership and strength.

Respect ME’s director is involved in the Somerset County Task Force and sees CCR goals as including networking and relationship building. They have been meeting for nearly 25 years. Over that time, they have done a variety of work and been able to have difficult discussions. They have looked at the law enforcement response to DV cases, about which they wrote a report. They have been trained on predominant aggressor, formed a high-risk response team, and have presentations when the Homicide Review Panel releases their report. Fatality rates are high in Somerset County. There’s good representation in Somerset County, and they have had joint meetings with the Kennebec County Task Force. Another Respect ME educator attends the Kennebec County Task Force.

Respect ME participated in the following Coordinated Community Response (CCR) activities as reported on their quarterly reimbursement request forms: Collaborate and co-teach Respect ME Program with FVP; participate in the Somerset County and Kennebec County Domestic Violence Task Forces; participate in High-Risk Response Team on an as-needed basis; participate in DV Court.

Menswork participated in the following Coordinated Community Response (CCR) activities as reported on their quarterly reimbursement request forms: judicial monitoring in Kennebec (Augusta and Waterville DV courts) and Somerset (Skowhegan DV Court); DHHS Caseworker Training on DV Perpetrators hosted by MCEDV; pilot study on videoconference BIP in partnership with Melissa Scaia and Dr. Nicole Westmarland; attendance at the monthly Kennebec and Somerset Task Force; and attendance at the Maine Commission on Domestic and Sexual Violence.

**Penobscot and Piscataquis Counties**

Partners for Peace (PFP) oversees the certified violence intervention program for women in Penobscot and Piscataquis counties. They do not currently have the minimum 3 participants required to run classes at this time. Partners for Peace is currently working with Maine Trans Net, the Health Equity Alliance, and Penquis to develop, plan, and implement an
intervention program that would safely and appropriately address the needs of members of the Q+ community.  

Penquis operates the certified violence intervention program for men in Penobscot and Piscataquis counties. Penquis currently runs three classes weekly. Penquis participated in the partial fee reimbursement in 2019 and 2020.

Penquis serves two counties, and those two counties are in different developmental stages with their CCRs. In Penobscot County, the CBIP is still finding its way into the Task Force. They have been on the agenda for meetings, and they share how they approach their work and aim to increase awareness of CBIP. The DV Task Force revisited its goals before summer and plans to have a four-part strangulation training soon.

In Piscataquis County, there is deeper awareness of CBIP, and it is easier to move into more substantive conversations. Penquis’ CBIP has very strong relationships with probation in Piscataquis, and a probation officer attends CBIP class monthly to help with accountability. His probationers know that he cares about the group and thinks it is important. The Piscataquis County Corrections Meeting is focused on connections within community and between organizations. A lot of valuable problem-solving happens at these meetings. Staff from the local District Attorney’s office often attends as do local emergency responders. Penquis participated in the following Coordinated Community Response (CCR) activities as reported on their quarterly reimbursement request forms: monthly reports to probation officers through email with the report about each participant; weekly reports on a handful of participants due to some issues probation been having with them; if participant is asked to leave class or has two reoccurring absences, we email probation officers; attend the DV Task Force for Penobscot, Jail Diversion for Penobscot County, and chair the Community Corrections Meeting in Piscataquis county; presented at the DV task force in December about what we do; and two of us also attended a Strangulation training put on by our local DVC.

Sagadahoc, Knox, Lincoln, and Waldo Counties
New Hope for Women oversees the certified violence intervention program for women in these counties. They do not have the minimum of 3 participants required to run classes at this time.

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22 Q+ is a shortened version of LGBTQ+ which stands for lesbian, gay, bisexual, transgender, and queer. The plus sign indicates that there are additional identities and orientations that are not reflected in this list, and that those should also be included under this umbrella. Members of these communities are likely to be disproportionately impacted by domestic abuse, and participation in the existing CBIPs which are organized according to a binary view of gender and an assumption of heterosexuality may not be safe or appropriate.
Volunteers of America Northern New England runs Choices which is the certified violence intervention program for men in these counties. Choices currently runs seven classes weekly. Choices participated in the partial fee reimbursement in 2019 and 2020.

CBIP director represents CBIP at the Sagadahoc County Working Group on DV, and she notes that there has been spotty attendance and the group sets a goal for each season during which they meet. Years ago, they created DV Bail, but that has now fallen by the wayside. They have discussed responses to LGBTQ+ DV, but no action has been taken. Representation from the LGBTQ+ community is missing. There is a strong connection to parenting classes. Membership includes parenting class facilitators, DVC (New Hope), DV investigator, Bath PD, Sheriff, CBIP, Maine Pre-Trial, and the CAP agency.

Choices participated in the following Coordinated Community Response (CCR) activities as reported on their quarterly reimbursement request forms: participation in Community Response Meetings in Sagadahoc County; participated in Judicial Review in West Bath; and weekly communication with Probation Officers re: BIP participants.

**York County**

Caring Unlimited (CU) oversees the certified violence intervention program for women in York county. They have one weekly class. CU did not participate in the partial fee reimbursement.

Violence No More (VNM) operates the certified violence intervention program for men in York county. VNM currently runs three classes weekly. VNM did not participate in the partial fee reimbursement in 2019 but began participating in 2020.

The York County CCR team meets quarterly. The core group also makes up high risk response team. The team discusses violence intervention programs occasionally, usually when initiated by the District Attorney’s office. The women’s intervention program, Turning Points, has been a good addition because the themes can be used anecdotally to connect the impact of interventions to lived experience. This group started from law enforcement and criminal justice, so most participants are within or adjacent to those systems, and it would be good to have broader representation from the community, particularly the health care community. York county’s CCR prioritizes safety of victims, accountability for perpetrators, and educating the community. Each meeting includes an hour of education for the members on a variety of topics.
## Appendix C: Listing of Maine’s CBIPs According to Maine DOC

### Androscoggin, Franklin and Oxford Counties

<table>
<thead>
<tr>
<th>Program</th>
<th>Meeting Time</th>
<th>Meeting Location</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Alternatives to Abuse (Safe Voices)</strong> (Male Program)</td>
<td>Monday, 4:00 p.m. - 5:30 p.m. &amp; 6:00 p.m. - 7:30 p.m. Wednesday, Noon - 1:30 p.m. &amp; 2:00 p.m. - 3:30 p.m. &amp; 6:00 p.m. - 7:30 p.m. Saturday, 8:30 a.m. - 10:00 a.m. &amp; 10:30 a.m. - 12:00 p.m.</td>
<td>Zoom only</td>
</tr>
<tr>
<td>Director: Courtney O’Brien</td>
<td>Tuesday, 1:30 p.m. - 3:00 p.m.</td>
<td>Zoom only</td>
</tr>
<tr>
<td>P.O. Box 713</td>
<td>Tuesday, 4:15 p.m. - 5:45 p.m. (zoom only) &amp; 6:00 p.m. - 7:30 p.m.</td>
<td>UU Church, 479 Main Street, Norway, ME</td>
</tr>
<tr>
<td>Auburn, ME 04212</td>
<td>Thursday, 4:00 p.m. - 5:30 p.m. &amp; 6:00 p.m. - 7:30 p.m.</td>
<td>Zoom only</td>
</tr>
<tr>
<td>(207) 207-212-6827</td>
<td>(Certified until 9/13/2021)</td>
<td></td>
</tr>
<tr>
<td><strong>Alternatives to Abuse (Female Program)</strong></td>
<td>Monday, 4:30 p.m. - 6:00 p.m.</td>
<td>Zoom only</td>
</tr>
<tr>
<td>Director: Courtney O’Brien</td>
<td></td>
<td></td>
</tr>
<tr>
<td>P.O. Box 713</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Auburn, ME 04212</td>
<td></td>
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</tr>
<tr>
<td>(207) 207-212-6827</td>
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<tr>
<td>(Certified until 9/13/2021)</td>
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### Aroostook County

<table>
<thead>
<tr>
<th>Program</th>
<th>Meeting Time</th>
<th>Meeting Location</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Northern New England Community Resource Center (Male Program)</strong></td>
<td>Monday, 6:00 p.m. - 7:30 p.m.</td>
<td>Chamber of Commerce, Presque Isle, ME</td>
</tr>
<tr>
<td>Director: Charles Moody</td>
<td>Wednesday, 6:00 p.m. - 7:30 p.m.</td>
<td>Houlton Regional Hospital Houlton, ME</td>
</tr>
<tr>
<td>P.O. Box 164</td>
<td>Thursday, 6:00 p.m. - 7:30 p.m.</td>
<td>Cary Medical Center Caribou, ME</td>
</tr>
<tr>
<td>Houlton, ME 04730</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(207) 694-3066</td>
<td></td>
<td></td>
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<tr>
<td>(Certified until 5/4/2022)</td>
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<td></td>
</tr>
</tbody>
</table>
### Choices (Female Program)

Director: Desiree Chasse  
Contact: (207) 728-3199  
Call for more details

### Cumberland County

<table>
<thead>
<tr>
<th>Program</th>
<th>Meeting Time</th>
<th>Meeting Location</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A Different Choice (Male Program)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director: Matthew Perry</td>
<td>Monday, 6:00 p.m.</td>
<td>St. Anne's Episcopal Church</td>
</tr>
<tr>
<td>P.O. Box 704</td>
<td>Thursday, 5:00 p.m.</td>
<td>40 Windham Center Road Windham, ME</td>
</tr>
<tr>
<td>Portland, ME 04104</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(207) 233-5997</td>
<td>Wednesday, 4:00 p.m. and 6:00</td>
<td>999 Forest Avenue, Unit 5 Portland, ME</td>
</tr>
<tr>
<td>(Certified until 7/11/2021)</td>
<td>p.m.</td>
<td></td>
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</tbody>
</table>

### Cumberland, Sagadahoc, Knox, Lincoln, and Waldo Counties Counties

<table>
<thead>
<tr>
<th>Program</th>
<th>Meeting Time</th>
<th>Meeting Location</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Choices - The Men's Group (Male Program)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director: Mary O'Leary</td>
<td>Tuesday, 5:15 p.m. - 6:45 p.m.</td>
<td>MCRRC Public Safety 45 Congress Street Belfast, ME</td>
</tr>
<tr>
<td>14 Maine St.</td>
<td>&amp; 7:00 p.m. - 8:30 p.m.</td>
<td></td>
</tr>
<tr>
<td>Brunswick, ME 04011</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(207) 240-4846</td>
<td>Wednesday, 5:15 p.m. - 6:45 p</td>
<td>m</td>
</tr>
<tr>
<td>(207) 373-1140</td>
<td>&amp; 7:00 p.m. - 8:30 p.m.</td>
<td></td>
</tr>
<tr>
<td>(207) 594-0270</td>
<td>Thursday, 5:15 p.m. - 6:45 p</td>
<td>m</td>
</tr>
<tr>
<td>(Certified until 1/11/2021)</td>
<td>&amp; 7:15 p.m. - 8:45 p.m.</td>
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<tr>
<td></td>
<td>Friday, 9:00 a.m. - 10:30 a.m.</td>
<td>Bath Police Dept., Conference Room 250 Water Street Bath, ME</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program</th>
<th>Meeting Time</th>
<th>Meeting Location</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Time for Change Women's Group (Female Program)</strong></td>
<td>Call for more details</td>
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</table>
### Hancock County

<table>
<thead>
<tr>
<th>Program</th>
<th>Meeting Time</th>
<th>Meeting Location</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Choice V (Male Program)</strong></td>
<td>Tuesday, 3:00 p.m. - 4:30 p.m. &amp; 5:00 p.m. - 6:30 p.m.</td>
<td>59 Franklin Street, B Ellsworth, ME</td>
</tr>
<tr>
<td>Supervisor: Astor Gillis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>59 Franklin St., B</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ellsworth, ME 04605</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(207) 667-2730</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Certified until 11/08/2021)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>DV Turning Points (Female Program)</strong></td>
<td>Call for more details</td>
<td></td>
</tr>
<tr>
<td>Supervisor: Astor Gillis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>59 Franklin St., B</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ellsworth, ME 04605</td>
<td></td>
<td></td>
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<tr>
<td>(207) 667-2730</td>
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<td>(Certified until 02/21/2022)</td>
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### Kennebec and Somerset Counties

<table>
<thead>
<tr>
<th>Program</th>
<th>Meeting Time</th>
<th>Meeting Location</th>
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<tbody>
<tr>
<td><strong>Menswork (Male Program)</strong></td>
<td>Tuesday, 5:00 p.m. - 6:30 p.m. &amp; 7:00 p.m. - 8:30 p.m. &amp; Friday, 12:00 p.m. - 1:30 p.m. &amp; Saturday, 8:00 a.m. - 9:30 a.m.</td>
<td>South Parish Congregational Church 9 Church Street Augusta, ME</td>
</tr>
<tr>
<td>Director: Jon Heath</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Menswork</td>
<td>Thursday, 5:00 p.m. - 6:30 p.m. &amp; 7:00 p.m. - 8:30 p.m.; Friday, 9:00 a.m. - 10:30 a.m.</td>
<td>Centerpoint Community Church 155 West River Road Waterville, ME</td>
</tr>
<tr>
<td>P.O. Box 304</td>
<td>Wednesday, 3:00 p.m. - 4:30 p.m. &amp; 5:00 p.m. - 6:30 p.m. &amp; 7:00 p.m. - 8:30 p.m.</td>
<td>Skowhegan Federated Church 13 Island Ave. Skowhegan, ME</td>
</tr>
<tr>
<td>Augusta, ME 04332</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(207) 446-3386</td>
<td></td>
<td></td>
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<tr>
<td>(Certified until 7/15/2021)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Respect ME (Female Program)</strong></td>
<td>Monday, 9:00 a.m. - 10:30 a.m.</td>
<td>Kennebec Behavioral Health</td>
</tr>
</tbody>
</table>

* Rolling intakes for Menswork are held weekly, please call 207-446-3386 for scheduling.
Director: Robert Rogers, KBH; Michelle LeClair, FVP; Skyla Littlefield
Contact: rogers@kbhmaine.org or 207-474-8368 ext. 3607; cell phone: 207-861-2465; 5 Commerce Drive Skowhegan, ME 04976 (207) 873-2136 x 3607
Certified until: 8/4/2021

### Penobscot and Piscataquis Counties

<table>
<thead>
<tr>
<th>Program</th>
<th>Meeting Time</th>
<th>Meeting Location</th>
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<tbody>
<tr>
<td><strong>DV Classes for Men (Male Program)</strong></td>
<td>Tuesday, 1:00 p.m. - 2:30 p.m., 4:30 p.m. - 6:00 p.m. &amp; 6:30 p.m. - 8:00 p.m. Wednesday, 1:00 p.m. - 2:30 p.m. &amp; 3:30 p.m. - 5:00 p.m.</td>
<td>Penquis 262 Harlowe Street Bangor, ME</td>
</tr>
<tr>
<td>Director: Saige Weeks</td>
<td>Wednesday, 1:00 p.m. - 2:30 p.m. &amp; 3:30 p.m. - 5:00 p.m.</td>
<td>Charlotte White Center Admin Building 572 Bangor Road Dover-Foxcroft, ME</td>
</tr>
<tr>
<td>262 Harlow Street Bangor, ME 04401</td>
<td>Thursday, 6:00 p.m. - 7:30 p.m.</td>
<td>* For Class Information: Stephen Madera</td>
</tr>
<tr>
<td>(207) 876-6210 (207) 973-3699 (fax)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Certified until 10/18/2022)</td>
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</tr>
<tr>
<td><strong>Turning Points: A non-Violent curriculum for Women (Female Program)</strong></td>
<td>Call for more details</td>
<td></td>
</tr>
<tr>
<td>Director: Amanda Cost</td>
<td></td>
<td></td>
</tr>
<tr>
<td>P.O. Box 653</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bangor, ME 04402</td>
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<td></td>
</tr>
<tr>
<td>(207) 945-5102</td>
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<td>(Certified until 11/19/2022)</td>
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### Washington County

<table>
<thead>
<tr>
<th>Program</th>
<th>Meeting Time</th>
<th>Meeting Location</th>
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</thead>
<tbody>
<tr>
<td><strong>Step Forward, Leaving Violence Behind (Male Program)</strong></td>
<td>Call for details</td>
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<tr>
<td>Director: Missy Fairfield</td>
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### York County

<table>
<thead>
<tr>
<th>Program</th>
<th>Meeting Time</th>
<th>Meeting Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Violence No More (Male Program)</td>
<td>Tuesday, 7:30 p.m. - 9:00 p.m.</td>
<td>15 York Street, Building 9, Suite 201-H Biddeford, ME</td>
</tr>
<tr>
<td>Director: Martin Burgess</td>
<td>Wednesday, 5:30 p.m. - 7:00 p.m. &amp; 7:30 p.m. - 9:00 p.m.</td>
<td></td>
</tr>
<tr>
<td>15 York Street, Building 9, Suite 201-H</td>
<td>Thursday, 9:30 a.m. - 11:00 a.m., 5:30 p.m. - 7:00 p.m. &amp; 7:30 p.m. - 9:00 p.m.</td>
<td>Sanford, ME</td>
</tr>
<tr>
<td>Biddeford, ME (Certified until 06/19/2021)</td>
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<tr>
<td>Caring Unlimited (Female Program)</td>
<td>Call for more details</td>
<td></td>
</tr>
<tr>
<td>Director: Susan Giambalvo</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(800) 239-7298</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(207) 490-3227</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Certified until 06/26/2021)</td>
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Last modified 8/17/2020
Appendix D: Expenditures to Date

The funds from this contract provide essential support to Maine’s Certified Batterer Intervention Programs (CBIPs) in the form of statewide coordination, partial reimbursement of reduced fees for indigent participants, and high-quality training opportunities. The initial funding allowed MCEDV to better understand the statewide needs, and we now know that the actual degree of need is greater than the original funding estimated.

CBIP Expenditures in Past Year (10/1/2019 - 9/30/2020)

<table>
<thead>
<tr>
<th></th>
<th>Annual Budget</th>
<th>Actual Invoiced Expenses</th>
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<tbody>
<tr>
<td>Indigent Participant Fee Reimbursement</td>
<td>$100,000</td>
<td>$142,325</td>
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<tr>
<td>Travel</td>
<td>$5,000</td>
<td>$462.79</td>
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<tr>
<td>Training</td>
<td>$20,000</td>
<td>$19,540.40</td>
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<tr>
<td>Administration</td>
<td>$25,000</td>
<td>$21,060.20</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$150,000</strong></td>
<td><strong>$183,388.39</strong></td>
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</table>

**Observations**

*Indigent Participant Fee Reimbursements*
There has been a steady increase of participating CBIP programs and a higher need for Indigent Participant Fee Reimbursements. Our most recent invoices show total request amounts of over $45,000 per quarter. The current allocation is $25,000, with an expected shortfall of $20,000 per quarter.

*Travel*
We have had few requests for travel reimbursement, and the COVID-19 pandemic has impacted travel since March 2020, further reducing requests.

*Training*
There is an increased need for more training opportunities, particularly with the move to the use of videoconferencing software for classes due to COVID-19.
Administration
There was an initial delay in fully utilizing the funds in this line. As with any brand-new program, staff needed to be hired, new processes initiated, and new relationships formed. Now that it is established, we better understand the amount of administrative time needed to oversee reimbursement, provide statewide coordination, and offer training. Statewide coordination, technical assistance, and support of Maine’s CBIPs has been needed at increasingly higher rates than currently allocated.

TOTAL CBIP Expenditures to Date (1/1/2019 - 9/30/2020)

<table>
<thead>
<tr>
<th></th>
<th>3 Year Budget</th>
<th>Actual Invoiced Expenses</th>
<th>Remaining Balance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indigent Participant Fee Reimbursement</td>
<td>$300,000</td>
<td>$183,525</td>
<td>$116,475</td>
</tr>
<tr>
<td>Travel</td>
<td>$15,000</td>
<td>$2,587.04</td>
<td>$9,888.46</td>
</tr>
<tr>
<td>(2,524.50 of unspent funds were not used in time)</td>
<td></td>
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<tr>
<td>Training</td>
<td>$60,000</td>
<td>$39,310.31</td>
<td>$20,689.69</td>
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<tr>
<td>Administration</td>
<td>$75,000</td>
<td>$43,403.87</td>
<td>$31,596.13</td>
</tr>
<tr>
<td>TOTAL</td>
<td>$450,000</td>
<td>$268,826.22</td>
<td>$178,649.28 (to be spent by 6/30/2021)</td>
</tr>
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