DEFENSE TASK FORCE ON
DOMESTIC VIOLENCE

Third Year Report 2003
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DOMESTIC VIOLENCE

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SECTION I

Executive Summary
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Executive Summary

OVERVIEW
As the Defense Task Force on Domestic Violence (DTFDV) completes its work and fulfills its Congressionally-mandated charter with the submission of this, its third and final annual report, we complete our task with mixed emotions. We are greatly encouraged by two things:

1. The many, many dedicated and professional people we have encountered over our three years working throughout the Department of Defense (DoD) and surrounding communities who are committed to helping make the lives of service members and their families better through their efforts to prevent and respond to domestic violence; and,

2. The fact that the DoD has committed resources to establish a separate implementation team to take the vast majority of our recommendations and turn them into positive policy and practice changes throughout the DoD.

We were also deeply concerned about two things:

1. In our visits to installations and in the input we received from military and civilian personnel intervening in domestic violence cases, we were often advised of the many ways in which the current system fell short and could be improved to make victims safer and/or to hold offenders accountable and stop the violence.

2. On an even more somber note, members of the Task Force were deeply saddened by the domestic violence related murders and murder/suicides that occurred at Fort Bragg, North Carolina in the summer of 2002. These horrible incidents served as a wake up call to the entire nation.

While we believe that our almost 200 recommendations to improve prevention of and response to domestic violence in the military will put the DoD on the right track to thwart such incidents in the future, there is still much work to be done. To best accomplish this work, we recommend that the Secretary of Defense accept, develop, and implement the policies and practices outlined in the following Strategic Plan.
Strategic Plan

Section 591 (a) of the National Defense Authorization Act for Fiscal Year 2000 (NDAA FY 2000), P.L. 106-65, required that the “Defense Task Force on Domestic Violence… submit to the Secretary of Defense a long-term plan (referred to as a ‘strategic plan’) for means by which the Department of Defense may address matters relating to domestic violence within the military more effectively.” Over the past three years, members of the Task Force have never lost sight of this primary mission. To that end, attached at the end of this Executive Summary is a fold out page that graphically portrays our recommended Strategic Plan for the Secretary of Defense. It consists of the following four parts, all of which are interrelated and interdependent:

1. Key Points from the Reports of the DTFDV;
2. The Domestic Violence Intervention Process Model;
3. Core Principles of Domestic Violence Intervention; and
4. Domestic Violence Prevention Conceptual Model.

Key Points from Reports of the DTFDV
The DTFDV was charged by Congress to make recommendations to the Secretary of Defense for measures to improve the Department’s response to domestic violence in the following areas:

- Victim safety programs
- Offender accountability
- Climate for effective prevention of domestic violence
- Coordination and collaboration among all military organizations with responsibility or jurisdiction with respect to domestic violence
- Coordination between military and civilian communities with respect to domestic violence
- Research priorities
- Data collection and case management and tracking
- Curriculum and training for military commanding officers
- Prevention and response to domestic violence at overseas military installations
- Other issues identified by the DTFDV relating to domestic violence in the military
In its three annual reports, the DTFDV has made some 200 specific recommendations pertaining to the issues above. In its responses to the first two reports, the DoD agreed with the vast majority of our recommendations for improvement, and we have no reason to believe the Department’s response to this final report will be significantly different. While all of the Task Force’s recommendations are valid and each will result in improvement of DoD’s prevention of and/or response to domestic violence, there are nine points that we have listed as key to DoD’s Strategic Plan. If implemented by the DoD as recommended by the Task Force, these key points will have the most lasting, significant, and positive effect on the prevention of and response to domestic violence in the military. While we believe that all the following key points are equally important, first and foremost, the Department of Defense should…

**Demand a culture shift that…**

- Does not tolerate domestic violence
- Moves from victims holding offenders accountable to the system holding offenders accountable
- Punishes criminal behavior

Supporting this culture shift are the following additional key points:

**Establish a Victim Advocate Program with provisions for nondisclosure to enhance victim safety and provide a well-defined, distinct program where victims can receive the advocacy, support, information, options, and resources necessary to address the violence in their lives without a requirement for mandatory reporting.**

**Implement the proposed Domestic Violence Intervention Process Model with the following protocols:** (1) Victim Advocate Protocol, (2) Commanding Officer’s Protocol/Guidelines, (3) Law Enforcement Protocol, and (4) Offender Intervention Protocol. The Intervention Process Model and the amplifying protocols provide both a graphic and narrative description of the recommended intervention process with specific guidance for those components of the system most often responding to domestic violence. Additional protocols are recommended for other professionals who play a role in intervention and prevention.

**Replace the Case Review Committee (CRC) with the Domestic Violence Assessment and Intervention Team (DVAIT) and separate substantiation decisions from clinical decisions to enhance victim safety and support commanding officers in ensuring offender accountability and intervention.**
Enhance system and command accountability and include a fatality review process as one on-going mechanism for identifying policy and system deficiencies with a goal of increasing accountability throughout the system, reducing domestic violence, and preventing future fatalities.

Implement DoD-wide training and prevention programs that encompass not only general awareness training, but also include specific training for commanding officers and senior noncommissioned officers, law enforcement personnel, healthcare personnel, and chaplains.

Hold offenders accountable in keeping with the Deputy Secretary of Defense November 19, 2001 memorandum that highlighted the non-tolerance of domestic violence and challenged the Military Departments and commanding officers to intensify their efforts to prevent domestic violence.

Strengthen local military and civilian community collaboration in preventing and responding to domestic violence.

Evaluate results of domestic violence prevention and intervention efforts, using that information to further improve these efforts.

Domestic Violence Intervention Process Model
As stated above, the Domestic Violence Intervention Process Model and the amplifying protocols provide both a graphic and narrative description of the recommended intervention process with specific guidance for those components of the system most often initially responding to domestic violence. The model itself is not a flow chart, but is intended merely to show the various parts of the system that are called into play when responding to an incident of domestic violence and how these entities are connected to and interact with each other. The four protocols portrayed in this model (Victim Advocate, Command, Law Enforcement, and Offender Intervention) are all described in detail in Section III, Chapter 1 of this report.

Core Principles of Intervention
At a Verizon Wireless sponsored Domestic Violence Business Seminar held in June 2002 to explore the costs of and cures for domestic violence for American businesses, data was presented that shows domestic violence costs U.S. businesses an estimated $3-5 billion annually in terms of lost productivity and direct medical costs. While the dollar costs in the DoD have never been calculated, it is fair to say that domestic violence in the military adversely affects unit readiness. The following core principles of domestic violence intervention are founded on the precept that we must make every possible effort to establish effective programs to prevent domestic violence in the military. This is tantamount to
enhancing mission and family readiness. However, if domestic violence does occur, the DoD has a duty to protect the victims and take appropriate action to hold offenders accountable. To ensure the maximum effectiveness of the Department’s response to domestic violence, all intervention programs should adhere to the following core principles:

- **Respond to the needs of victims and provide for their safety.** Ensure that the stated needs of victims are fully considered. Safe housing, safety planning, and free, confidential advocacy services are essential, but not all inclusive. Recognize potential victim safety consequences when confronting the offender, validate victim input, encourage victim autonomy, and support the victim’s relationship with her/his children.

- **Hold offenders accountable.** Ensure that the institution, not the victim, is responsible for holding the offender accountable. Where possible and appropriate, the focus should be on changing the behavior of the offender to prevent future acts of domestic violence. However, offenders must be held accountable for all criminal conduct through punishment, deterrence, and when possible, rehabilitation. Monitor and supervise offenders to ensure compliance and progress during any intervention programs.

- **Consider multi-cultural and cross-cultural factors.** Ensure development of policies and practices that are sensitive and attuned to the backgrounds and needs of both victims and offenders in terms of economic, cultural, ethnic, religious, immigrant status, and other related circumstances. Policies and practices should be reviewed and monitored by community members from the diverse cultures being served.

- **Consider the context of the violence and provide a measured response.** Ensure that the victim’s need for protection from further harm and the need to hold the offender accountable determine the intensity and direction of the command response to domestic violence.

- **Coordinate military and civilian response.** Ensure a cooperative relationship between military and civilian organizations. Synchronize procedures to ensure a coordinated community response between the military and civilian communities.

- **Involve victims in monitoring domestic violence services.** Ensure the establishment of mechanisms for monitoring intervention policies and procedures that include input from victims, advocates, and community members in order to evaluate program effectiveness. Monitoring should include development of specific, focused measures of accountability and effectiveness as well as leveraging existing inspection programs.

- **Provide early intervention.** Ensure early intervention and utilize all available resources.
**Domestic Violence Prevention Conceptual Model**

The Domestic Violence Prevention Conceptual Model was developed by the Task Force as a graphic representation of the continuum of risk, examples of target populations, and examples of possible tools to be used to prevent domestic violence. It is not intended to be an all-inclusive list of tools, actions, and programs to prevent domestic violence, but is presented as a way for the DoD to begin thinking about and organizing a concerted and focused effort to prevent domestic violence in the military. The Prevention Conceptual Model is discussed in detail in Section III, Chapter 4, Prevention of Domestic Violence, pages 127-132.

**Organizing for Action**

Members of the Task Force understand that sorting out and prioritizing three reports, a comprehensive Strategic Plan, and almost 200 separate recommendations will be a daunting challenge for the DoD. Thus, we have attempted to help. At Appendix A on page 148 is a matrix showing each recommendation of the Task Force from all three annual reports. It also contains the DoD response to each recommendation from the Initial and Second Year Reports as well as the status of implementation of each recommendation as known by the Task Force at the time of publication of this report. Also, contained in Appendix A on page 170 is a listing of each Key Point and Core Principle of Intervention from the Strategic Plan as described above. Since each individual recommendation contributes to the overall efficacy of the Strategic Plan, the listing links each recommendation to the appropriate Key Point and Core Principle. Additionally, a CD is furnished with this report that contains and links the following documents to the Recommendation Matrix and the Key Points/Core Principles Listing at Appendix A:

- Initial Report of the DTFDV
- DoD Response to the Initial Report of the DTFDV
- Second Year Report of the DTFDV
- DoD Response to the Second Year Report of the DTFDV
- Third Year Report of the DTFDV
- Report Recommendation/Response/Status Matrix

From the matrix or listing, a user will need only click on the reference shown, and he/she will be linked directly to the section of the Task Force Report or DoD Response that deals with that recommendation. It is hoped that this tool will assist the DoD in managing the complex project of implementing our recommendations and will enhance DoD’s effort to improve the prevention of and response to domestic violence in the military.
Other Issues

Section 591(b)(10) of the NDAA FY 2000, P.L. 106-65, invites the DTFDV to submit “Other issues identified by the task force relating to domestic violence within the military.” Following are several such “other issues.”

Multi-Culturalism and Cross-Culturalism

Arguably, the Department of Defense is one of the most diverse elements of our society. The American military prides itself on being closer to a true meritocracy than other segments of our society. While the military can be justifiably proud of its record in managing its diversity and making diversity an institutional strength, it must remain vigilant against growing complacent. The DoD faces great challenges in being responsive to the varying needs of its almost 1.4 million active duty service members and their more than 1.9 million family members, many of whom come from vastly different cultures and backgrounds. In no area is this challenge greater than in the Department’s response to domestic violence.

Domestic violence is an extremely complex crime that crosses all socioeconomic, age, gender, ethnic, racial and cultural strata. The root cause of domestic violence is one individual’s desire to exert power and control over another person, by any means necessary. However, it is important to recognize that social conditioning, as well as deeply held cultural values and beliefs can influence whether and where victims seek help and how abusers respond to intervention. Cultural awareness, cultural sensitivity and an appropriate level of competence in dealing with these issues are critical in the civilian, as well as the military community. However, because of the military’s worldwide presence and its greater levels of multi-cultural and cross-cultural exchange, cultural awareness, sensitivity and competence are even more important for those who deal with uniformed personnel and their families. The Task Force is not recommending “special” or preferential treatment for anyone based on his/her background. What we are asking for is simply an acknowledgement and understanding that cultural background influences how all of us bring our own complex perceptions and experiences – cultural, religious, class, rank gender, etc. – to our ideas about domestic violence. Therefore, we are saying that it is not only acceptable, but also often necessary, to treat different people in different ways. Treating someone from one cultural background in exactly the same way we treat someone from another cultural background may actually result in unequal treatment.

All personnel who deal with domestic violence cases, whether they be Family Advocacy Program personnel, first responders (medical, law enforcement, etc.), legal, chaplains, or command representatives, need to be sensitized to the fact that the complex issues surrounding domestic violence can be further compounded when the persons involved come from varied ethnic/cultural backgrounds. Male/female relationships differ greatly from culture
to culture and within cultures. For example, issues of culture, trust, language, etc., may significantly complicate access to needed domestic violence prevention or response resources for immigrant and/or minority ethnicity spouses. When domestic violence is added to the cross-cultural mixtures often found in military couples, the proper handling of both the offender and the victim is made even more difficult and more crucial to a successful outcome.

The questions for all personnel who deal with domestic violence then become, “How do I most effectively work with people who don’t look like me, don’t think like me, and may not even speak the same language as me?” — and, “Will the intervention create or result in disparate consequences for this family because of their culture, ethnicity, class, etc. If so, what additional services, remedies, etc. may be necessary or appropriate?” Obviously, at least a general understanding of where the victim and the offender “are coming from” culturally is key to the answers. Uppermost in the mind of anyone who deals with a victim of domestic violence must be the goal to ensure that any intervention portrays respect and support for the victim whether the responder fully understands the victim’s unique “differences” or not. The ultimate goal, through cultural sensitivity and competence training, must be to make all aspects of military domestic violence services (prevention, victim safety, offender intervention, etc.) available, understandable, and desirable to the widest possible segment of the military community.

Because of its great diversity, the DoD faces special challenges and has great opportunities for good work in this area. Therefore, we not only highlighted the issue in this executive summary, but we also carefully examined every part of our report to ensure that we had properly considered all aspects of multi-culturalism and cross-culturalism in each of our recommendations.

Children and Domestic Violence

Another issue members of the Task Force would like to highlight is that of children and domestic violence. Ironically, during our visits to installations it was often difficult for interveners to separate the practices applicable to domestic violence and child abuse, yet rarely did the actual interventions in families where multiple victims were identified occur simultaneously. In most cases, the Family Advocacy Program was seen as “responsible” for both, and many of the same staff might be involved in designing interventions, but operations were very separate as far as individual families were concerned. Although the Congressional mandate for the Task Force focused on adult domestic violence, Task Force members are keenly aware of the co-occurrence of adult domestic violence and child abuse as well as the significant impact on children who witness domestic violence. Addressing the overlap of domestic violence and child maltreatment, including sexual abuse, as well as the multiple needs of families who experience violence provide unique challenges to both the civilian and military communities. When they co-occur, it is different manifestations of
the same problem and should be addressed holistically. It is important that the DoD be cognizant of the intersection between domestic violence and child maltreatment and proactively address the following:

- Training for all interveners regarding the intersection of domestic violence and child maltreatment.
- Training in the investigation and assessment of both domestic violence and child maltreatment.
- Screening for both domestic violence and child maltreatment on every report of family violence.
- Simultaneous response to the needs of domestic violence victims and their children.
- Appropriate protection and intervention for both children who are abused and children who witness domestic violence.
- Appropriate protection, intervention, and support for victims of domestic violence, so the victims and their children can be safe.
- Appropriate policy and training to ensure offenders are held accountable for their behavior and avoid the practice of expecting domestic violence victims to stop child abuse perpetrated by their abuser.

Sexual Violence and the Trafficking in Women

Members of the Task Force realize that domestic violence is but one aspect of the overall problem of violence against women. Sexual violence is an important concern for the military as well. Such violence often exists within families and is a common aspect of domestic violence and child abuse. It is important that all our recommendations for training, assessment, safety planning, investigation, and intervention, as well as prevention, acknowledge that sexual violence is an often co-existing aspect of domestic violence. Any efforts to target sexual violence within families will also serve to educate and further condemn sexual violence against strangers, co-workers, and acquaintances. Another area that has received significant publicity over the past year is the issue of trafficking in women and in many instances, the involvement of military personnel as customers has been documented. Because of our military’s worldwide presence, the scourge of such trafficking and the violence normally attendant to it, must be of special concern to the DoD. While recognizing the problem, since it is outside our charter, the Task Force has not attempted to deal with the issue of trafficking in women in this body of work. However, we urge the leadership in DoD to be mindful of the problem, to recognize that it is but another aspect of the overall tragedy of violence perpetrated against women, to reach out to collaborate with other federal agencies and advocacy groups seeking to end it, and to actively ensure that DoD personnel in no way contribute to or condone the problem.
Research

Section 591 of P.L. 106-65 specifically tasked the DTFDV to comment on domestic violence research priorities in the DoD. The Initial Report of the Task Force included a section (Section VI, pages 97-118) on pending, completed, and recommended research relating to domestic violence. This section included detailed recommendations for a DoD research agenda on domestic violence. In the two years subsequent to the Initial Report, the Task Force has had an opportunity to gain additional insights into the DoD system for preventing and responding to domestic violence. In addition, Task Force members participated in a DoD sponsored Symposium on Domestic Violence Prevention Research in May 2002. Participants, including DoD subject matter experts and nationally recognized researchers on domestic violence developed recommendations for specific prevention research projects that can provide data that will help to answer the question, “What works to prevent domestic violence?” (Symposium recommendations can be found at http://mfrc.calib.com/domestic_violence)

Given these subsequent experiences, there are several points regarding domestic violence research the Task Force wants to highlight:

▶ Research is extremely important for the ongoing evaluation and effectiveness of the DoD efforts for preventing and responding to domestic violence.

▶ DoD must partner with civilian organizations and civilian experts engaging in domestic violence research in order to be on the forefront of emerging issues relating to domestic violence.

▶ DoD is encouraged to establish a well-defined, joint Service effort that provides for the implementation of a clear domestic violence research agenda and includes a consistent funding mechanism with established and regular peer review mechanisms for determination of the most suitable projects for funding. These peer review panels should be interdisciplinary and made up of both civilian and military domestic violence research experts as well as domestic violence advocate and intervention experts.

▶ DoD should use the Prevention Symposium list of prioritized research projects developed by civilian and military domestic violence experts as the basis for a Request for Proposal (RFP) for needed prevention research. These proposals then would be peer reviewed according to the mechanisms suggested above.

▶ Symposia similar to the Prevention Symposium and DoD participation in other National Institutes of Health, National Institute of Justice, and Centers for Disease Control and Prevention domestic violence research priority-setting forums should be utilized to set future DoD research agendas and as the basis for funding and future RFP decisions.
Recommendations

We have two overall recommendations that we think will help ensure success as the DoD now proceeds to implement our recommendations:

Resources

Many of the recommendations contained in the DTFDV three annual reports have resource implications. The Task Force has not attempted to quantify the resources necessary to support these recommendations, nor was in it our charter to do so. The realities and limitations attendant to the DoD budget process (especially in terms of family support programs) make any significant “top line” increase to support these programs unlikely at the present time. Thus, the challenge for the DoD in deciding how to fund the implementation of many of our recommendations will be to decide on how to reallocate funds currently available for domestic violence prevention and intervention programs. Therefore,

- Recommend that the DoD, in conjunction with the Military Services and in collaboration with other governmental agencies that provide domestic violence research and intervention and prevention services to DoD personnel and their families…
- Identify all funds allocated for DoD domestic violence prevention and intervention programs and initiatives (to include research, studies, grants, etc.)
- Develop a prioritization and budget distribution (re-distribution) of all resources that are or could be dedicated to domestic violence prevention and intervention programs to ensure that funds are allocated in a manner that most effectively supports implementation of the recommendations of the DTFDV.¹

Accountability

Members of the Task Force were encouraged by the passage of Section 8148 (c) of the Department of Defense Appropriations Act for Fiscal Year 2003, P.L. 107-248, which requires that “Not later than June 30, 2003, the Secretary of Defense shall submit to the Congress a report on the implementation of the recommendations included in the reports submitted to the Secretary of Defense by the Defense Task Force on Domestic Violence.” Recognizing that the implementation of our recommendations will still be very much a work in progress on June 30th of this year, recommend that the DoD—

- Within two years of receiving this final report, convene a small, independent group with a composition similar to the DTFDV to review, assess, and report implementation progress to the Secretary of Defense. We believe that such a group would be most effective if it were composed of a blend of original Task Force members willing to serve and new members who were not part of the original DTFDV process to provide a fresh perspective.

¹ To facilitate this effort, when examining DoD funds, recommend the DoD use the Unified Legislation and Budget Process (ULB). For funds external to the DoD, recommend coordination through the Federal Interagency Coordinating Board on Violence Against Women that is chaired by the Director, Office on Violence Against Women in the DoJ.
Conclusion

We wish to thank the many members of the Department of Defense who have assisted us with our work over the past three years. The outstanding Executive Director and staff provided for us by the Secretary of Defense, without whom none of our work would have been possible, are commended for their skills, their openness, and their dedication to the mission of the Task Force. The Family Advocacy Program Managers from the Office of the Secretary of Defense and all the Military Services as well as high level DoD policy makers struggled with us throughout our three years of work.

Our sincere thanks go to the many battered women who showed great courage in telling us of their experiences, especially when they were entrusting us to maintain confidentiality for fear of reprisal. These women were our heroines and without understanding the impact of policy and practice on individuals, our recommendations would not hold the validity they do. Countless dedicated men and women we have met in our travels around the world were open, honest, and helpful to a fault. As we conducted our site visits, we could not have asked for or received any better support. We were provided insight by military and civilian professionals both in the United States and in overseas commands – advocates, law enforcement, attorneys, judges, commanding officers, medical personnel, chaplains, Family Advocacy Program staff, and others who saw the weakness in the current response to domestic violence in the military. In some cases, these individuals also demonstrated courage by taking the risk of describing serious incidents of domestic violence and inadequate response that could have been used to discredit them or their colleagues. Members of the Task Force pledged to use this information to the general benefit of our work and only when the continuing danger to victims warranted did we intervene in an ongoing case or provide direction to personnel at a particular installation. Refraining was difficult in that some members of the Task Force, fueled by fears for victims of domestic violence and the input of military and civilian professionals, wanted to “fix it now”. We are gratified that the Services and many installations have already begun to change policy and practice. This lets us know that they have been transformed, as we have, by our collaborative research and development of recommendations.

Also, we would particularly like to thank the Department of Justice (DoJ) and the Department of Health and Human Services (DHHS), both for providing outstanding representatives to the Task Force and for the tremendous overall support provided by DoJ and DHHS in their collaboration with the DoD in its response to domestic violence in the military.

As we complete our work as members of the Defense Task Force on Domestic Violence, we stand in awe of the tremendous trust and responsibility placed in our young men and women in the military by our Nation’s leaders. The freedoms we enjoy in this country today rest, in large part, on the sacrifices made by the members of our military since the founding of the United States. Suffice it to say, that we will owe our continued freedom largely in part
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to the efforts and sacrifices of the men and women in uniform today and their families and to those who will come after them. Expecting nothing short of complete dedication from our military men and women and their family members, the DoD can and must dedicate itself to providing the best possible policies, practices, and procedures to address and prevent domestic violence in the military. We believe our proposed Strategic Plan and the almost 200 specific recommendations that give it substance offer the best course of action for the DoD to follow in developing a domestic violence prevention and response system that will not only improve the lives of our service members and their families, but will stand as a shining example for all segments of American society to emulate.

It is often said that the conclusion of any endeavor simply marks the beginning of another. We believe that this is entirely true in this case. As we conclude our research and recommendations, we pledge our continued support and offer our best wishes to the Department of Defense as it begins the challenging and most worthwhile task of implementing our recommendations.

Our proposed Strategic Plan will not only improve the lives of our service members and their families, but will stand as a shining example for all segments of American society to emulate.
Core Principles of Domestic Violence Intervention

- Respond to the Needs of Victims and Provide for Their Safety
- Hold Offenders Accountable
- Consider Multi-cultural and Cross-cultural Factors
- Consider the Context of the Violence and Provide a Measured Response
- Coordinate Military and Civilian Response
- Involve Victims in Monitoring Domestic Violence Services
- Provide Early Intervention

**Domestic Violence Intervention Process Model**

- DV Incident
  - Report may come from one/more sources (victim, FAP, chaplain, medical, civilian law enforcement, 3rd party, etc.) and may enter model through one/more protocol(s) below.

- Victim Advocate Protocol
- Command Protocol
- Law Enforcement Protocol

**Key Points from the Reports of the DTFDV**

- Create a Culture Shift that . . .
  - Does Not Tolerate Domestic Violence
  - Moves from Victims Holding Offenders Accountable to the System Holding Offenders Accountable
  - Punishes Criminal Behavior
- Establish a Victim Advocate Program with Provisions for Nondisclosure
- Implement the Proposed Intervention Process Model
- Replace the Case Review Committee (CRC) with Domestic Violence Assessment and Intervention Team (DV AIT)
- Enhance System and Command Accountability and Include Fatality Review Process
- Implement DoD-wide Training and Prevention Programs
- Hold Offenders Accountable
- Strengthen Local Military and Civilian Community Collaboration
- Evaluate Results of Domestic Violence Prevention and Intervention Efforts

**Domestic Violence Prevention Conceptual Model**

- Primary Prevention
  - Separate from Military and/or Disciplinary Action As Appropriate
  - Urgent Danger Assessment & Safety Planning
- Secondary Prevention
  - Risk & Danger Assessment
  - Victim Advocacy
  - FAP Assessment
  - Offender Intervention Program
  - Administrative and/or Disciplinary Action As Appropriate
  - Child Witness Program
  - First Offense Programs
- Tertiary Prevention
  - Couples Counseling
  - Targeted Programs
  - New Parent Support
  - Child Witness Programs
  - Health Care Screening

**Toolkit**

- Command Climate of Non-Tolerance
- New Accession DV Training
- Public Service Campaigns
- Dating Violence Prevention Programs in DoD Middle & High Schools
- Health Care Screening
- Education and Training
- New Parent Support
SECTION II

Background, Organization, and Activities
SECTION II
Background, Organization, and Activities

BACKGROUND

In order to assist the Department of Defense (DoD) in improving its response to domestic violence, Congress, in the National Defense Authorization Act for Fiscal Year 2000, Public Law 106-65, Section 591, required the Secretary of Defense to establish the Defense Task Force on Domestic Violence (DTFDV). The DTFDV was established to study the issue of domestic violence in the military and to make recommendations for measures to improve the DoD response to the problem in the following areas:

- Ongoing victim safety programs
- Offender accountability
- Climate for effective prevention of domestic violence
- Coordination and collaboration among all military organizations with responsibility or jurisdiction with respect to domestic violence
- Coordination between military and civilian communities with respect to domestic violence
- Research priorities
- Data collection
- Curricula and training for military commanding officers
- Prevention and response to domestic violence at overseas military installations
- Other issues identified by the Task Force relating to domestic violence within the military

Section 591 (e) of Public Law 106-65, requires that the findings and recommendations of the Task Force be submitted to the Secretary of Defense in an annual report. This report fulfills the requirement of that section of the statute. Further, within 90 days of receipt, the law requires that the Secretary of Defense forward a copy of this report along with his evaluation to the Committees on Armed Services of the Senate and the House of Representatives.

The Task Force is composed of 24 members who were appointed in March 2000 by then Secretary of Defense William Cohen. Twelve members were appointed from the Military Services (Army, Navy, Air Force, and Marine Corps) and an equal number from outside the DoD. Non-DoD members are all subject matter experts and were appointed from other federal departments and agencies, from state and local agencies, and from the private sector.

The overall goal of the Task Force is to provide the Secretary of Defense with recommendations that will be useful in enhancing existing programs for preventing and responding to domestic violence, and, where appropriate, to suggest new approaches to addressing the issue.
In accomplishing its goal, the Task Force hopes to help make the DoD’s Family Advocacy Programs and the entire military community response to domestic violence even better than it is today.

In fulfilling the Congressional mandate, the Task Force is looking at the entire spectrum of domestic violence issues, including not only the Family Advocacy Program, but also the roles of and responses from command, law enforcement, legal, medical, and chaplains. The Task Force is taking a snapshot of what currently exists, both in terms of domestic violence policy at the headquarters level as well as domestic violence prevention and intervention practices at various installations.

The Task Force believes that domestic violence is best dealt with by having a consistent, coordinated community response. This approach clearly communicates to potential offenders, as well as to those who have already offended, that domestic violence is not acceptable, will not be tolerated, and that there are consequences for such behavior. This consistent, coordinated approach seems to fit perfectly into the military community. In order to be most effective, however, every element of the response system, from law enforcement to medical to the command, must be “singing off the same sheet of music.” It is important for everyone associated with the military to know what domestic violence is, the dynamics of domestic violence including risk factors, the effects on victims, or children who witness acts of domestic violence, and the consequences for offenders.

The Task Force hopes that the end result of its efforts will be better prevention of domestic violence incidents and the increased safety of victims when violence does occur or is threatened.

\section*{Review of Second Year Report}

Section 591 (e), P.L. 106-65 requires that “The task force shall submit to the Secretary [of Defense] an annual report on its activities and on the activities of the military departments to respond to domestic violence in the military.” The statute further states, “…the Secretary [of Defense] shall submit the [Task Force] report and the Secretary’s evaluation of the report to the Committees on Armed Services of the Senate and House of Representatives.”

In the letter of transmittal of his evaluation of the Second Year Report of the DTFDV, the Assistant Secretary of Defense (Force Management Policy) (ASD (FMP)) expressed support for the vast majority of the 86 recommendations contained in the report. The DTFDV was encouraged by the positive comments of the ASD (FMP).

In an effort to again reach the widest possible audience and to tap into all sources of information on “best practices” in dealing with domestic violence, the Task Force sent out copies of the Second Year Report to over 180 groups around the country known for their expertise in various aspects of domestic violence. In his cover letter to the heads of these groups, the Executive Director wrote, “We continue to seek input from a variety of knowledgeable sources that will ultimately facilitate the accomplishment of our charge from Congress. To that end, I am asking if you would review our report and provide me any specific additions, deletions, or further recommendations that we should consider. Our intent remains to provide the Secretary of Defense with recommendations that, when
implemented, will increase victim safety and access to support as well as hold offenders accountable for their actions.” This year, we will furnish copies of our Third Year Report to the same groups.

In this Third Year Report, issues that were carried forward from the Initial and Second Year Reports, and further developed or expanded, are clearly identified and are cross-referenced back to the previous reports.

**ORGANIZATION**

During the third year of operation, Task Force members decided to alter the organizational structure of the group. Rather than remain organized in the traditional workgroups of the first two years – Community Collaboration, Education and Training, Offender Accountability, and Victim Safety – they decided to organize functionally along subject matter lines that corresponded with the protocols and other issues that were to be developed. Thus, the workgroups for the third year were as follows:

- Victim Advocate Protocol Workgroup
- Commanding Officer’s Protocol/Guidelines Workgroup
- Law Enforcement Protocol Workgroup
- Offender Intervention Protocol Workgroup
- Prevention Workgroup
- Intervention Process Model Workgroup

Thus, the organizational structure, and workgroup membership and staffing of the DTFDV is as shown on the next chart. Following the chart is a complete listing of the members and staff of the DTFDV for the third year.

**ACTIVITIES**

The Defense Task Force on Domestic Violence (DTFDV) met as a group five times for a total of 14 days during its third year. Due to the geographic dispersion of its members, the Task Force met at the locations shown.

- March 11-13, 2002, San Diego, California
- June 18-20, 2002, Austin, Texas
- September 4-6, 2002, Chicago, Illinois
- November 19-21, 2002, Arlington, Virginia
- January 22-24, 2003, Arlington, Virginia
Members of Defense Task Force on Domestic Violence

Co-Chairs:

Lieutenant General Garry L. Parks, USMC, Deputy Commandant for Manpower and Reserve Affairs, Headquarters, U.S. Marine Corps, Washington, DC
Ms. Deborah D. Tucker, Executive Director, National Center on Domestic and Sexual Violence, Austin, TX

Ms. Judith Beals, Jane Doe Inc., Massachusetts Coalition Against Sexual Assault and Domestic Violence, Boston, MA
Rear Admiral Annette E. Brown, USN, Commander, Navy Region Southeast, Jacksonville, FL
Jacquelyn C. Campbell, PhD, RN, FAAN, Anna D. Wolf Endowed Professor and Associate Dean for Faculty Affairs, Johns Hopkins University School of Nursing, Baltimore, MD
Ms. Vickii P. Coffey, President, Vickii Coffey and Associates, Inc. Olympia Fields, IL
Brigadier General Joseph Composto, USMC, Commanding General, U.S. Marine Corps Base, Quantico, VA
Ms. Elizabeth T. Corliss, Federal Executive Institute, Charlottesville, VA
Brigadier General Jan D. Eakle, USAF, Vice Commander, Ogden Air Logistics Center, Hill Air Force Base, UT
Reverend (Dr.) Marie M. Fortune, Center for the Prevention of Sexual and Domestic Violence, Seattle, WA
Mr. Casey G. Gwinn, City Attorney, San Diego, CA
Brigadier General Leif H. Hendrickson, USMC, Office of the Deputy Commandant for Manpower and Reserve Affairs, Quantico, VA
Mr. Jackson T. Katz, President, MVP Strategies, Long Beach, CA
Mr. Michael P. LaRiviere, Police Department, Salem, MA
Honorable Peter C. Macdonald, District Judge, 3rd Judicial District of the Commonwealth of Kentucky, Hopkinsville, KY
Ms. Beckie U. Masaki, Asian Women’s Shelter, San Francisco, CA
Mr. John F. McEleny, Deputy Director, Naval Criminal Investigative Service, Washington, DC
Sergeant Major Alford L. McMichael, USMC, Sergeant Major of the Marine Corps, Washington, DC
Captain James B. Norman, USN, Commanding Officer, Naval Legal Service Office, North Central, Washington, DC
Ms. Catherine Pierce, Office on Violence Against Women, U.S. Department of Justice, Washington, DC
Mr. William D. Riley, Administration for Children and Families, U.S. Department of Health and Human Services, Washington, DC
Major General Thomas J. Romig, USA, The Judge Advocate General, U.S. Army, Washington, DC
Ms. Connie Sponsler-Garcia, Battered Women’s Justice Project, Minneapolis, MN
Major General Antonio M. Taguba, USA, Acting Director of the Army Staff, Washington, DC

Staff of Defense Task Force on Domestic Violence

Mr. Robert L. Stein II, Executive Director
Captain Glenna L. Tinney, USN, Deputy Executive Director

Sergeant First Class Teresa Beauchamp, USA, Administrative Noncommissioned Officer
Ms. Valinda Bolton, Consultant
Ms. Joan M. Byrd, Administrative Assistant
Lieutenant Colonel James N. Jackson, USA, Workgroup Leader
Lieutenant Colonel Sarah Elizabeth Moore, USAF, Workgroup Leader
Mr. Bernard R. Robinson, Management Support Officer
Mr. Michael J. Shane, Senior Consultant
Chief Master Sergeant Earl Taylor, USAF, Senior Enlisted Advisor and Assistant Workgroup Leader
Major Michael Zeliff, USMC, Workgroup Leader
In addition to five meetings for the entire Task Force, individual workgroups and support staff were involved in various meetings and activities to gather and analyze information for consideration by the full Task Force.

**March 2002 Meeting**
At this meeting, the Task Force concentrated on four major issues:

- **Offender Intervention** – Members of the Task Force met with an offender intervention panel composed of several subject matter experts. The panel participants were Mr. Oliver Williams, Mr. Ulester Douglas, LtCol Dari Tritt, Ms. Jacqueline Kaplowitz, and Mr. Allain Frank. Each panel member gave a brief presentation regarding offender intervention programs with which they were associated. Following the presentations, there was general discussion of the issue with Task Force members. The following points were made during the discussion:
  - There needs to be a confrontation of the offender and sanctions applied to facilitate change.
  - There must be a blend of justice and treatment approaches.
  - There has to be evidence in the system that domestic violence is not acceptable.
  - Offenders look to the system to see what they can get away with.
  - The whole system has to truly believe that domestic violence is not acceptable, act accordingly, and apply sanctions equally to all regardless of rank.
  - DoD must have more sanctions that communicate domestic violence is a crime.
  - Implications for the victim must always be considered.
  - Confidentiality for victims is a must.
  - Must consider how to deal with female offenders.

- **Nondisclosure Policy** – Ms. Judy Beals and BGens Joseph Composto briefed the recommendation for the draft of a nondisclosure policy. The Task Force members agreed that the next step in moving forward with the nondisclosure policy recommendation was for the staff to coordinate with the DoD and Service Family Advocacy Program Managers (FAPM) and then the DoD General Counsel.

- **Intervention Process Model** – CAPT Tinney reviewed the draft Intervention Process Model in preparation for workgroup meetings. The current draft reflected the model with the changes made after the January 2002 meeting. The workgroups were advised to continue working on their protocols and to identify issues where their work intersects with that of other workgroups.

- **Year One and Two Unfinished Recommendations** – During the January 2002 meeting, the Task Force members requested an opportunity to discuss any unfinished recommendations
from the first two reports in order to make decisions about further actions needed on these recommendations. To facilitate the discussion, two handouts were provided to the members. The first was a list of unfinished recommendations by workgroup that defined what decisions still needed to be made. Members were also provided a handout of slides that listed verbatim the specific unfinished recommendations from the first and second year reports.

**June 2002 Meeting**

At this meeting, the Task Force concentrated on several major issues:

- **Multi-Cultural and Cross-Cultural Collaborations Discussion** – Ms. Vickii Coffey briefed other Task Force members on the actions that have been taken to date on this issue, the current status of the issue, and she identified the remaining questions that need to be answered to determine future direction for the Task Force on this issue.

- **Meeting with DoD and Service FAPMs** – The purpose of this session was to exchange ideas and think together. No decision or agreement was expected to come from this session. Each of the FAPMs briefed the Task Force defining what Task Force work had been helpful so far, areas of disagreement/concern, and their views of opportunities or gaps for remaining Task Force work. Following the briefings, there was an interactive discussion between the FAPMs and Task Force members.

- **Case Review Committee (CRC) Discussion with FAPMs** – Mr. David Lloyd, DoD FAPM, provided an Options Paper that formed the beginning point for the discussion. It was emphasized that the Intervention Process Model and the CRC issue had not yet been finalized. It was decided to have the FAPMs work with a small group of Task Force members and staff to look at the pros and cons of the options presented prior to the next meeting of the Task Force. The strategy to pursue this issue was agreed upon as follows:
  - The Task Force Co-chairs will appoint a small group of Task Force members to meet with the FAPMs and will articulate the tasking for the group.
  - The small group will use some of the DoD proposed options and the Intervention Process Model as a starting point for discussion.
  - The small group will identify one or two options with the pros and cons of each and implications for the Intervention Process Model.
  - The small group will bring the proposal back to the Task Force at its September meeting.

- **Workgroup Meetings** – The task of the workgroups was to continue their work on the protocols. Workgroups were told to be watchful for where multi-cultural and cross-cultural issues fit into each protocol. Workgroups were also told that they should keep in mind that
the decision about a CRC has not yet been made, but each group should think about the intervention, criminal, and command aspects of domestic violence and how these fit into the protocols with and without a CRC as presently configured.

Remaining Issues – Task Force members identified the following remaining issues:

– Multi-cultural and cross-cultural issues
– Mission, vision, and core principles
– CRC/FAP
– Prevention model
– Severity issue
– Intervention Process Model
– Intersection of child abuse and domestic violence/children who witness domestic violence
– FAP role in intervention
– Resources/funding to implement recommendations of the Task Force
– Sexual violence
– Marketing victim advocates
– Trafficking in persons
– Task Force role in supporting DoD when mission is completed

Plan of Action and Milestones – A matrix of all recommendations from the first and second Task Force reports was provided to members. The matrix pulls together all of the recommendations, the DoD response, and the status of the action. The matrix provides a way for DoD to track how they are doing on implementing Task Force recommendations with which they agree. This matrix will appear in the Third Year Report of the Task Force.

September 2002 Meeting
At this meeting, the Task Force concentrated on several major issues:

Fort Bragg Update – There was a discussion of the recent Fort Bragg domestic violence homicide and homicide/suicide cases, and update information was provided by the Executive Director and some members of the Task Force.

Core Principles – The core principles were adapted from a version developed by the Battered Women’s Justice Project. The following key points were made:

– Domestic violence is a systemic issue rather than an individual one.
– There needs to be a consistent, system-wide response.
– Multi/cross-cultural issues were integrated as part of the core principles.
– Core principles will set a framework that can be institutionalized.
– The principles apply to the DoD and are a foundation for everything the Task Force has done.

At the end of the meeting, the Task Force came to agreement on the Core Principles that are included in this report.

− *Nondisclosure Policy Update* — A Task Force working group and several senior legal personnel from the DoD have worked out a nondisclosure policy recommendation that is included in this report.

− *Identification of Key Points for Third Year Report* — Task Force members were reminded that at the June 2002 meeting, Task Force Co-chairs suggested that it is important to hone in on what the Task Force wants to clearly articulate as the most important things for DoD to do to improve the prevention of and response to domestic violence in the military. After much discussion, Task Force members agreed on the nine key points that are highlighted to the Secretary of Defense in this report.

− *Commanding Officer’s Protocol Discussion* — Members of the Command Protocol Workgroup briefed other Task Force members on the work they have done on the Commanding Officer’s Protocol/Guidelines since the June 2002 meeting.

− *CRC/Intervention Process Model Discussion with FAPMs* — The session began with a briefing to Task Force members and FAPMs on the outcome of the CRC crafting team meeting held in August 2002. Following the briefing, information was provided that clarified the difference between danger, risk, safety, and lethality assessments.

− *Fatality Review Discussion with the FAPMs* — The Executive Director provided an introduction to this session. He stated that the DoD is looking at having a team to examine all or some of the domestic violence homicides on either an annual or semi-annual basis. Each Service FAPM provided information about the process they currently use for reviewing domestic violence homicides.

− *Task Force CRC/Intervention Process Model/Protocols Discussion*

  − *Fatality Review*. This session began with a follow-up to the previous fatality review discussion. The focus was on the Task Force recommendation on this issue. Although the first two reports have included a great deal of information on fatality reviews, a specific recommendation has not been made. It was decided that staff would take all the information gathered here and draft a proposed recommendation that would be sent out to Task Force members with the meeting summary.
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— **CRC.** The Task Force was in agreement with the CRC crafting team recommendations to be included in the Third Year Report. A recommendation to call the new body the Domestic Violence Assessment and Intervention Team (DVAIT) was agreed to by the Task Force members.

— **Third Year Report.** The proposed outline for the third year report was reviewed and approved by the members present.

**November 2002 Meeting**

The primary purpose of this meeting was to review and finalize the Task Force’s Third Year Report.

**Meeting with Family Advocacy Program Managers**

The meeting started with a final session with the DoD Service FAPMs. The purpose of this session was to provide a forum for further discussion of the following outstanding issues: 1) placement of victim advocates, 2) commanding officer accountability, 3) risk assessment, and 4) implementation of Task Force recommendations.

**Review of Draft of Third Year Report**

Task Force members discussed the first draft of the Third Year Report that had been sent to them in late October. The following sections were discussed with the results shown:

- **Victim Advocate Protocol** — Specific changes were recommended throughout the protocol. Discussion of this section centered on the following issues: (1) Minimum qualification standards, and (2) Placement of victim advocates.

- **Commanding Officer’s Protocol/Guidelines** — Specific changes were recommended throughout the protocol. The primary issue discussed in this section was commanding officer accountability. Staff will continue to work with the workgroup members to strengthen the language addressing system and command accountability.

- **Law Enforcement Protocol** — Minor changes were recommended to this section.

- **Offender Intervention Protocol** — The discussion of this section highlighted the following points: (1) it was suggested that the protocol be more gender neutral. Language used in DoJ reports to address this issue will be provided for consideration for inclusion in the final report. (2) It was suggested the protocol should provide guidelines for female offenders emphasizing the importance of the context of the violence and screening for self-defense, predominant aggressor, etc. (3) The protocol should make clear that domestic violence is not a mental health or individual pathology issue. (4) There should be a link to the Commanding Officer’s Protocol/Guidelines that reflects command receiving monthly progress reports from offender intervention staff. (5) There should be a link back to the
research recommendations in the initial Task Force report that focused on offender intervention. (6) The protocol should spell out the elements of a good fatherhood program.

- **Case Review Committee** – The main recommendation for this section focused on the need to elaborate more on the role of the Domestic Violence Assessment and Intervention Team (DVAIT).

- **Nondisclosure Policy** – It was suggested that there should be some mention of the Personnel Reliability Program (PRP) since it is a separate consideration from fitness for duty evaluations.

- **Prevention of Domestic Violence** – Specific recommendations for changes to the chapter were made.

- **Severity of Abuse** – Specific recommendations for changes to the chapter were made. It was agreed that additional language would be added to this section to differentiate what the Task Force means by danger/lethality, safety, and risk assessments, who should do them, and for what purpose.

- **Fatality Review** – The primary discussion on this section focused on whether there needed to be fatality review teams at multiple levels in the system and the purpose of each team. It was agreed that this section would be reworked to provide more background and detail regarding the functioning of the team(s). In addition, specific recommendations for changes to the chapter were made.

- **Commanding Officer and Senior Enlisted Training** – The primary discussion on this section focused on the need to provide more than just computer based training. The face-to-face interaction/dialogue with an instructor and peers is an important part of education and training on a topic such as domestic violence. Specific recommendations for changes to the chapter were made.

- **Chaplain Training Update** – Just prior to the Task Force meeting, representatives from the Service’s Chief of Chaplains offices met with civilian subject matter experts to discuss a standardized curriculum for training chaplains across DoD on domestic violence. The chaplains recommended one curriculum for all of the Services would be best. They also opined that DoD should encourage more joint Service chaplain trainings. Collaboration with communities surrounding military installations is vital. All agreed that chaplains need more training to deal with domestic violence. The plan is for the final Task Force report to include an outline of essential subject areas for chaplains similar to the one in the Second Year Report for COs/SNCOs.

In all cases where changes to the report were required, staff noted the changes and will make them for inclusion in the next draft of the report that will be sent to Task Force members in early December with the meeting summary.
Ft. Bragg Briefings

Task Force members were provided the following briefings regarding last summer’s domestic violence homicides at Ft. Bragg:

- An Epidemiological Consultation (EPICON) Brief – A summary of the findings of the EPICON Team that spent three weeks at Ft. Bragg collecting data following the domestic violence homicides.
- A Ft. Bragg command perspective briefing including lessons learned from the recent domestic violence homicides and resulting changes.

January 2003 Meeting

The Defense Task Force on Domestic Violence met in Arlington, Virginia on January 22 and 23, 2003. The purpose of the meeting was to approve the recommendations contained in the Third Year Report. Each recommendation was discussed in detail and all were approved for submission as they appear herein. A reception was held following the final meeting of the Task Force at which Dr. David S.C. Chu, Under Secretary of Defense for Personnel and Readiness thanked the Task Force members for their hard work and commended them for delivering an excellent product.

Individual Workgroup and Staff Activities

In addition to meetings of the full Task Force, the workgroups and assigned professional staff conducted individual fact-finding and analysis activities and participated in various forums dealing with the issue of domestic violence.

- In January, the Deputy Executive Director presented a briefing on the DTFDV in San Diego, CA at the Uniformed Services Social Work Conference.
- In late January/early February, the Executive Director participated in a conference sponsored by the Domestic Violence Enhanced Response Team entitled, “Setting the Sail and Staying the Course”. The conference was held in Colorado Springs, CO and was designed to help navigate the world of multidisciplinary responses to domestic violence.
- In March, the Executive Director attended the quarterly meeting of the DoD and Service Family Advocacy Program Managers (FAPMs) to update them on the progress of the Task Force.
- In April, the Deputy Executive Director conducted a video-teleconference with the DoD and Service FAPMs to discuss the proposed nondisclosure policy and other outstanding issues to solicit their input.
In May, several Task Force members and staff attended the DoD Symposium on Domestic Violence Prevention Research. Nationally recognized researchers on domestic violence participated in the symposium. The goal of the symposium was to develop research recommendations for DoD for preventing domestic violence.

Also in May, a Task Force staff member provided a briefing on the DTFDV to the DoD Victim Witness Assistance Regional Training Conference in San Antonio, Texas and again in October to the Regional Training Conference held in Arlington, Virginia. Representatives from all the Military Services attended these conferences.

In June, several Task Force members and the Deputy Executive Director met with attorneys from the DoD General Counsel Office and Office of Legal Policy to discuss the proposed nondisclosure policy.

In August, the Deputy Executive Director presented a briefing on the DTFDV in Washington, DC at the Navy Counseling, Advocacy, and Prevention Biennial Conference.

In August, the Executive Director attended a National Domestic Violence Fatality Review Conference in Phoenix, AZ.

In September, the Deputy Executive Director presented a briefing on the DTFDV in Norfolk, VA at the “Supporting Military Families” Conference sponsored by the Navy Family Advocacy Program and Norfolk State University.

In October, the Deputy Executive Director and Task Force member, Mr. Casey Gwinn, presented a briefing on the DTFDV in San Diego, CA at the “Partners in Peace” Conference sponsored by the San Diego Domestic Violence Council.

In October, several members and staff met with the DoD and Service Family Advocacy Program Managers to discuss the DoD response to the DTFDV Second Year Report. The purpose of this meeting was to provide a forum for further discussion and clarification of areas where there had been disagreement.

In October, the Deputy Executive Director participated as a panel member at the Department of Justice event announcing the appointment of members to the National Domestic Violence Advisory Council.

In October, the Executive Director, along with Task Force member, CAPT James Norman, attended the National Association of Attorney’s General meeting and participated on a panel dealing with Multidisciplinary Response to Family Violence.

In late October, the Executive Director, along with Task Force Co-chair, Ms. Deborah Tucker, attended the National Conference of District Attorney’s and updated them on the work of the DTFDV.
Task Force member, Judge Peter Macdonald and Task Force staff member, LTC James Jackson were appointed to the advisory board of the National Domestic Violence Fatality Review Initiative (NDVFRI). The project is funded by the Office on Violence Against Women, U.S. Department of Justice (DoJ) and represents a first ever clearinghouse and resource center dedicated solely to domestic violence fatality reviews. Byron Johnson, PhD, the University of Pennsylvania and Neil Websdale, PhD, Northern Arizona University are leading the project. Two conference calls (March and August 2002), involving most of the 19 board members were conducted to finalize preparations for a two-day conference held in August 2002, designed to address the following topics:

- The latest research on domestic violence related deaths.
- The latest research on domestic violence fatality reviews.
- Establishing and maintaining fatality review teams.
- Links between fatality review, safety audit, and coordinated community response.
- Legislation, confidentiality, and review activity.
- Team philosophies and team building.
- Promising practices from selected death review teams.
- Mock case reviews of domestic violence homicides.

An advisory board meeting was held in Philadelphia, PA on November 15, 2002 to review lessons learned from the August conference and to begin planning for the future in terms of holding future conferences, providing technical assistance, publishing a quarterly bulletin, upgrading the project’s Website (www4.nau.edu/sbs/ndvfri), and scheduling future advisory board meetings and conference calls.

The DTFDV Executive Director and staff have met with the DoD and Service Family Advocacy Program Managers quarterly. The primary focus of these meetings has been the updating of the FAPMs on the activities of the Task Force and on progress with the ongoing development of the Task Force recommendations contained in the Second Year Report. Collaboration with the FAPMs has provided valuable input in the evolution of issues and recommendations contained in the Third Year Report.
SECTION III

Task Force Recommendations
SECTION III

TASK FORCE RECOMMENDATIONS OVERVIEW

Section (e) (3) (C) of the National Defense Authorization Act for 2000, Public Law 106-65, requires the Defense Task Force on Domestic Violence (DTFDV), in each of its three annual reports, to include “any recommendations for actions to improve the responses of the Armed Forces to domestic violence in the Armed Forces that the task force considers appropriate.”

In fulfillment of the statutory requirement, and to amplify our previous recommendations, in this third report, the DTFDV makes specific recommendations in the following areas:

- **CHAPTER 1 – Domestic Violence Intervention Process Model**
  - Issue 1.A – Victim Advocate Protocol
  - Issue 1.B – Commanding Officer’s Protocol/Guidelines
  - Issue 1.C – Law Enforcement Protocol
  - Issue 1.D – Offender Intervention Protocol

- **CHAPTER 2 – Case Review Committee**

- **CHAPTER 3 – Nondisclosure Policy**

- **CHAPTER 4 – Prevention of Domestic Violence**

- **CHAPTER 5 – Severity of Abuse**

- **CHAPTER 6 – Fatality Reviews**

- **CHAPTER 7 – Commanding Officer/Senior Noncommissioned Officer Training**

- **CHAPTER 8 – Chaplain Training**

It should be noted that the issues and recommendations in each chapter were developed by sub-working groups of the Task Force. The findings and recommendations presented, however, reflect the collective consensus of the entire Task Force.
SECTION III, CHAPTER 1

Domestic Violence Intervention Process Model

OVERVIEW

The paramount goal of any group that deals with the issue of domestic violence must be the prevention and ultimate elimination of this scourge from our society. In his annual proclamation for National Domestic Violence Awareness Month in October 2002, President George W. Bush said, “Domestic violence in America is intolerable and must be stopped.”

Stopping domestic violence in the military has been an overarching goal of the Defense Task Force on Domestic Violence. It is our fervent hope that by implementing the recommendations contained in our three annual reports, the Department of Defense will ultimately make military communities models of peaceful homes and relationships for the rest of our society to emulate.

However, being realistic, we know that this goal will not be reached easily or as soon as we would like. Therefore, we have attempted to develop a model for the Department of Defense, showing what we believe to be an effective process with which to intervene once an act of domestic violence has occurred. Using the attached Domestic Violence Intervention Process Model, we believe, will help ensure maximum safety for victims, hold offenders appropriately accountable, and aid in achieving the ultimate goal of eliminating domestic violence from our military communities.

The attached model is not designed as a flow chart. It is intended only to show the interrelationships between the various elements of the military community that are involved in responding to an incident of domestic violence. Shown immediately under the “DV Incident” are three critical protocols that, depending on how the incident is reported/discovered, may be activated independently or simultaneously. Because we feel that the three elements critical to providing an effective and appropriate response to an incident of domestic violence are victim advocacy, command action, and law enforcement intervention, we have developed detailed protocols in each of these areas for consideration by the Department of Defense. Additionally, since we believe that the most effective method of preventing offenders from committing follow-on acts of domestic violence is to hold them appropriately accountable right from the start, we have included a fourth protocol for offender intervention. Implementation of this protocol will help achieve the dual goals of maintaining victim safety while at the same time effecting meaningful and positive change in offender behavior.
It is with this overview that we present our proposed Intervention Process Model and the four specific protocols that amplify the model:

- Victim Advocate Protocol
- Commanding Officer’s Protocol/Guidelines
- Law Enforcement Protocol
- Offender Intervention Protocol

While we believe that implementation of the four protocols above is critical to improving the DoD’s response to domestic violence in the military, by no means do we believe that they are all inclusive. For example, Family Advocacy Program (FAP) personnel have a critical role in assessing and intervening when a domestic violence incident occurs. Therefore, the FAP needs a comprehensive protocol that addresses assessment and intervention in cases where there is co-occurrence of domestic violence and child abuse, assessment and intervention with children who witness domestic violence, assessment and intervention with female offenders, and assessment and services for victims who choose to report to FAP, etc. There are several other professions that are likely to come into contact with both victims and offenders, and the DoD should ensure that each of these entities develop domestic violence intervention protocols. Groups such as chaplains, medical personnel, legal personnel, etc. all have a crucial role to play in ensuring a successful response to an incident of domestic violence. In areas where protocols already exist, they should be refined with the latest “best practices” available.

**Note:** One block in the Intervention Process Model makes reference to the Domestic Violence Assessment and Intervention Team (DVAIT). The Task Force recommends replacing that portion of the Case Review Committee (CRC) that deals with adult domestic violence with the DVAIT. While there is no formal protocol for the DVAIT, specifics about this recommendation and the DVAIT can be found in Chapter 2, Case Review Committee, page 113.
Domestic Violence Intervention Process Model

DV Incident
Report may come from one/more sources (victim, FAP, chaplain, medical, civilian law enforcement, 3rd party, etc.) and may enter model through one/more protocol(s) below.

Victim Advocate Protocol

Command Protocol

Law Enforcement Protocol

Initial Command Investigation

Victim

Victim (Safety-related/Immediate Needs)

Command Immediate Action Options

DVAIT Assessment and Recommendations

Investigation and Information Gathering

FAP Assessment and Clinical Services

Victim Advocacy Services
  - On Installation
  - Off Installation
  - Combination of On and Off Installation

FAP Assessment and Clinical Services for Children

Offender MPO, Confine, etc.*

Ongoing Action Options

Investigation and Information Gathering

Command Decision and Action*

Offender**

UCMJ Action/No UCMJ Action

Refer to FAP for Intervention

Admin Action/No Admin Action

Offender Intervention Protocol

* Take into consideration information and assessment from FAP, law enforcement, SJA, victim advocate, medical, clergy, etc., as appropriate

** Multiple options may be chosen and some/all actions may occur simultaneously

--- Dotted line connotes transfer of information only if nondisclosure is waived

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Color Key

- **Victim**
- **Command**
- **Offender**
ISSUE 1.A – VICTIM ADVOCATE PROTOCOL

Discussion

This is a continuation of Issue 4.D, Services to Victims of Domestic Violence, from the Second Year Report of the Defense Task Force on Domestic Violence (DTFDV).

Background

In the DTFDV Second Year Report, Issue 4.D, page 105, the Task Force recommended that DoD mandate each Military Service provide and emphasize a specific Victim Advocate Program. This chapter continues that issue and will address three areas: implementing a Victim Advocate Program in the Military Services; victim advocate recruiting and training; and the Victim Advocate Protocol.

Implementing a Victim Advocate Program in the Military Services

For a Victim Advocate Program to be successful, it is imperative for the Military Services to assure victim advocates have institutional support, sufficient stature, autonomy, direct access to commanding officers, supervision of adequate stature and a forum at a level where institutional practices and policies that create barriers to victim safety can be addressed and rectified expeditiously.

Sufficient stature is needed so the initiative does not get lost in the bureaucracy. Throughout the DoD, domestic violence needs high-level interest and support. The placement of the Victim Advocate Program should carefully consider a location where it will have visibility and the ability to address problems without getting lost in a stovepipe process.

Direct access to commanding officers and supervision of sufficient stature are critical. Victim advocates need close collaboration with commanding officers to assure safety plans are coordinated and the needs of victims are met. If victim advocates do not have the ability to directly interact with commanding officers, victims may be put in positions of increased risk.

Commanding officers need to have information and consultation with victim advocates to assist in their plan for holding offenders accountable. There will be times when commanding officers are not advised of domestic violence incidents when victims choose nondisclosure.

The supervision of victim advocates requires a level where issues can be resolved expeditiously due to safety concerns. If victim advocates are buried in a system where it takes multiple levels of coordination in order to talk with commanding officers, law enforcement and staff judge advocates, victims are put in potentially dangerous situations.
The Services have numerous installation-level forums that address the needs of the military family. These span from health and wellness to quality of life and family readiness committees. Each installation requires a forum where systemic issues for domestic violence related to victim matters can be discussed and rectified. This forum should serve as a policy and review body where domestic violence issues, concerns, and problems, to include community collaboration efforts, are addressed and resolved.

The overarching considerations in establishing a Victim Advocate Program include the following areas: victim advocates require confidentiality; victim advocates should work in a program with an appropriate level of authority; they need protection from liability; and who they report to in the chain-of-command should be well thought out. The Task Force recognizes the preference for multiple options for the Military Services to establish the Victim Advocate Program. Our recommendation reflects alternative approaches that should be considered for the Services and installations.

The vision of the Task Force is a Victim Advocate Program that has autonomy and functions in an environment that understands the need for their independent functioning. Their independent functioning is critical to the need for a program specifically addressing victims’ needs. Programs that combine victim and offender services do not give victims the clear message their concerns and needs are being heard.

Domestic violence victims trust victim advocates when they have confidentiality. The nondisclosure policy (see Chapter 3 of this report, page 121) should be clearly understood by victims, supervisors, and commanders. Victims require unfettered access to victim advocates. The Military Services should ensure placement of the victim advocate is not in a location where institutional practices limit access to the victim advocate, e.g., if the victim advocate is working in a location where there’s a receptionist and the victim has to be screened before seeing the victim advocate. The Military Services and installation commanders should make an extensive effort to educate all personnel and their families on the Victim Advocate Program.

Victim Advocate Recruiting and Training

The Task Force recognizes the importance of the stature of this position, and also acknowledges the best qualified individual may not be the applicant with the highest educational degree, but the one with years of victim advocacy experience with adults.

Previous experience working with adult domestic violence victims is invaluable as is work experience with the military. Victim advocates should be skilled in crisis intervention, case management and safety planning. Victim advocates should have language fluency with the majority of the clients they serve. In the civilian community, victim advocates’ educational and work experience vary greatly. As an example, the paraprofessional qualification standard may involve victim advocates with a high school diploma and several years of domestic violence work experience. Some victim advocates have advanced degrees.
Potential victim advocate candidates are individuals that will demonstrate their qualifications through having a degree with relevant curriculum in domestic violence, or curriculum and practicums in domestic violence, or substantive experience in working with victims of domestic violence and documented domestic violence training.

The history of domestic violence work experience and domestic violence training cannot be emphasized enough. There may be situations where an individual with a high school diploma and a number of years of domestic violence work experience is the most qualified candidate in a pool of degreed applicants.

The Military Services will need to decide whether to implement the program with contract victim advocates or hire civil servants. The Office of Personnel Management governs the civil service system and determines the series for potential civil service positions as well as sets qualification standards. Additionally, the installation civilian personnel office may formulate criteria for best qualified personnel.

If the Military Services choose to hire victim advocates via the civil service system, they should consider a developmental position as a way to attract those individuals who do not have the full complement of qualifications, but are motivated through the promotion system to gain the needed credentials for full qualifications.

The key to successful victim advocacy services is a training and certification program. The Illinois Certified Domestic Violence Professionals Board, Inc. has created a certification program for victim advocates that requires 40 hours of training and an exam. DoD should create a similar training and certification program.

**Recommendations**

That the DoD –

- Adopt and widely disseminate the attached Victim Advocate Protocol.
- Follow victim advocate recruiting and training guidance outlined above.
- Once implemented, DoD should establish a victim advocate certification program.
- Establish a mechanism for domestic violence victims and/or victim advocates to use when they feel the local installation cannot meet their concerns or there is fear of repercussions for voicing a concern at the local level.
- Implement a Victim Advocate Program based on the examples below:
  - **Installation Based**
    
    Victim advocates hired to work on the installation may be in general schedule (GS) or contractor positions. The implementation of the attached Victim Advocate Protocol is suggested for installation based programs.
The Military Services should assess their respective programs to determine the most appropriate placement of victim advocates. To assist in determining placement, the Military Services should assure victim advocates serve under supervisors who clearly understand the nondisclosure policy. Additionally, the Military Services need to address supervision (chain-of-command) and victim advocate record-keeping. The Military Services and installation commanders should ensure extensive system-wide and installation-wide awareness and training programs on the victim advocate roles and responsibilities and collaboration with other staff.

Placement of the Victim Advocate Program on an installation, especially for newly formed programs, is critical to long-term success and effectiveness leading to maximum safety for victims.

Geographic placement: Victim advocates must be placed in a neutral space emphasizing victim safety, anonymity, and access – possibly the installation medical treatment facility, exchange, or staff judge advocate office.

Organizational placement: While all the program elements necessary for success discussed above are important, an appropriate level of autonomy for the victim advocate is the most critical. Appropriate autonomy means that victim advocates must have prompt and direct access to whatever level of command is necessary to ensure the safety of the victim and/or the resolution of any systemic or response problems encountered. We urge that the victim advocate be placed to ensure appropriate autonomy as defined above. There are various organizational elements currently existing on some installations where the Victim Advocate Program can be placed to ensure appropriate autonomy as defined above, such as the Inspector General office, the Staff Judge Advocate office, the Provost Marshal office, etc. In some cases, in order to ensure the initial success of a newly formed Victim Advocate Program, consideration should be given to placing the senior victim advocate in a position with direct access to the installation commanding officer. The Victim Advocate Program should only be placed under the supervision of the installation Family Advocacy Program (FAP) when there is absolute certainty that the appropriate level of autonomy can be achieved and maintained.

Community Based Victim Advocate Services (Off installation)

The Military Services may choose to seek a MOA or contract with a local battered women’s shelter or other domestic violence program already in existence to provide
victim advocacy services. This arrangement requires a contract addressing the nature of the liaison between the installation and the shelter to include how and what services are available to victims. For cases initially identified on the installation, the law enforcement, medical, and/or FAP staff are responsible for informing the victim of the community based victim advocate services.

— Joint Installation/Community Based Victim Advocate Services

This option involves contracting with a local shelter or domestic violence program for a specific employee to work exclusively with DoD beneficiaries through the local shelter. As an example, Fort Eustis, VA serves as the contract manager for a successful Victim Advocacy Program that serves victims at Fort Eustis, Fort Monroe, and Fort Story.

These potential options come with strengths and concerns. The overarching strength is the implementation of a Victim Advocate Program in the Department of Defense. Victims will have an exclusive voice for their concerns, an option of nondisclosure, and autonomy in making decisions for their situations.
Victim Advocate Protocol

Background

The cornerstone of domestic violence intervention and prevention is threefold: victim safety, victim autonomy, and offender accountability. This protocol focuses on victim safety and victim autonomy. Establishing and maintaining victim safety is critical to domestic violence intervention and prevention in the Department of Defense. Victims of domestic violence in military communities may live on or off installations, in or outside the United States, and at locations that have widely differing military and civilian response and support resources. It is imperative that victims, regardless of their location, be offered adequate resources to assure their immediate safety and support.

Victim autonomy and integrity form the foundation for victim safety and advocacy. Victim autonomy is critical to the process of intervening in domestic violence situations, as victims should ultimately make their own decisions whether to stay with or leave an offending partner. Victims’ rights, benefits, and entitlements are other critical areas that must be appropriately addressed with all victims. Victims benefit from advocates working on their behalf. The victim should make decisions regarding disclosure of the information concerning her/his situation to others, i.e., law enforcement, judicial, command, etc., within the limits set by the nondisclosure policy found in Chapter 3 of this report, page 121.

Victim autonomy means that victims inherently have and retain the right to make decisions regarding their safety and welfare. They have the right to refuse services. The philosophical framework for the concept of victim autonomy includes:

- Victims are not responsible for offenses against them. Attempts to limit their ability to make decisions imply guilt and responsibility on their part for their own victimization. Victims of other crimes are rarely held responsible for the actions of offenders.

- Examples of violation of a victim’s autonomy include, the failure to inform victims about publicly releasable decisions (legal, etc.) that affect their well-being or denial of the opportunity for a victim to make ordinary life affecting decisions.

Victim advocacy must be case specific, to include services offered in a multicultural context. No “one-size-fits-all” mode of intervention is appropriate. Victim advocates must support victim autonomy and integrity, especially the victim’s ability to make informed decisions. Due to the chronic nature of domestic violence, safety planning and risk assessments should be ongoing. To meet this responsibility, victims must be informed of all the reasonably available options to support their choices. The Military Services should assure mechanisms exist to assess and respond to imminent harm.

Victims may choose to use either installation or community advocacy services (where available). The installation victim advocate should assure victims are advised
of all appropriate services on and off the installation, to include housing, financial
assistance, legal, Family Advocacy Program (FAP) clinical services, child care, transitional
compensation, clergy and other support services.

Community Interaction with the Victim Advocate

Victim Advocate (VA) General Roles

► 24-hour service availability (minimum – by telephone).
► Work on behalf of victims to ensure they are aware of their rights and privileges.
► Offer victims resources for immediate safety, long-term protection, and support.
► Conduct safety assessments and develop safety plans, updating as needed.
► Conduct danger/lethality assessments as part of ongoing safety planning processes.
► Assure intervention with victims focuses on integrity and autonomy of the victim
  being supported.
► Help remove obstacles to victim safety and independent decision-making.
► Assure compliance with the DoD nondisclosure policy.
► Collaborate with commanders, senior non-commissioned officers (SNCO), medical
treatment facility (MTF) personnel, FAP, law enforcement personnel, and local civilian
victim advocate services.
► Closely collaborate with FAP to assure safety plans are coordinated.
► Advise victims of FAP clinical resources.
► Maintain familiarity with local military and civilian legal systems and availability of
legal services, to include working contact with Staff Judge Advocate (SJA) attorneys
and civilian prosecuting attorneys, personnel within the judicial system, probation
office personnel and victim assistance program personnel.
► Collaborate with prevention staff for providing education/training/briefings on victim
advocacy and domestic violence, to include review of actions that may impact victim safety.
► When requested, accompany the victim to appointments and court proceedings.

Command (see also Commanding Officer’s Protocol/Guidelines, Section III, Chapter 1,
Issue 1.B, page 51)

► Refer victims to the victim advocate.
► Assure the victim advocate has immediate access to command.
Understand the victim advocate’s roles and responsibilities.

Complete appropriate training on intervening with victims, to include information on the Transitional Compensation Program and local community domestic violence resources.

Work with the victim advocate and victim to assure victim safety and support the victim’s decisions about remaining or leaving the relationship.

Be knowledgeable about rehabilitative, disciplinary and administrative options for managing domestic violence offenders.

Consult with the SJA concerning use of military protective orders.

**Family Advocacy Program (FAP)**

- Refer victims to the victim advocate.
- Understand the victim advocate’s roles and responsibilities.
- Provide assessment and intervention to domestic violence victims and their children when victims choose to be seen in FAP.
- Provide clinical information and assessment support to victim advocates concerned about the mental health or substance abuse of a victim.

**Law Enforcement (see also Law Enforcement Protocol, Section III, Chapter 1, Issue 1.C, page 73)**

- Assure the victim receives immediate information about the victim advocate and is given the phone number of how to access the Victim Advocate Program.
- Refer all cases of domestic violence to the Victim Advocate Program.
- Conduct interviews of the victim separately from the offender.
- Complete an initial danger/lethality assessment. This critical step will provide the victim’s perception of the situation and facilitate the assessment of the immediate safety needs.
- Assure thorough documentation of the physical and emotional conditions of both the victim and offender. Also, document the condition of the crime scene.
- Encourage victims to obtain medical assessment, no matter what the apparent injury (injuries are often not obvious, even to the victim). Facilitate transporting the victim to the MTF where needed.
- In consultation with appropriate authorities, assure the safety of the victim and the victim’s children.
Medical Treatment Facility (MTF)

- Refer victims to the victim advocate.
- Be familiar with Victim Advocate Program and other domestic violence resources in order to make appropriate referrals.
- Be trained on the dynamics of domestic violence with special emphasis on victim safety.
- Be prepared to provide care for victims on a routine and emergency basis.
- Determine the type of screening to be used (universal or indicator-based).
- Publish a facility-wide protocol with recommended action should a victim disclose a history of abuse during a routine healthcare visit.
- Assess healthcare needs related to domestic violence.

Staff Judge Advocate (SJA)

- Refer victims to the victim advocate.
- Ensure staff are trained on the dynamics of domestic violence with a special emphasis on nondisclosure of victim information, offender accountability, and intervention.
- Provide consultation to victim advocates considering an exception to the nondisclosure policy.
- Assist command to evaluate evidence of criminal activity and determine intervention and accountability measures.
- Ensure staff are trained on the domestic violence response options and legal issues, local legal resources, the Transitional Compensation Program, safety planning, the Violence Against Women Act with specific focus on immigration issues related to domestic violence incidents and appropriate legal consultation with victims.
- Establish and maintain liaison with local judicial and legal offices involved in domestic violence case disposition.

Installation Billeting Facilities

- In appropriate cases, provide safe housing for victims of domestic violence.
- Work with installation commanders, FAP, law enforcement personnel, and victim advocates to meet victims’ safety needs, to include pre-established procedures for providing safe housing.
Chaplain

- Refer victims to the victim advocate.
- Be trained on the dynamics of domestic violence with special emphasis on victim safety.
- Ensure chaplains have a clear understanding of the Military Services’ policies on confidentiality and how they relate to incidents of domestic violence and chaplain intervention with victims.
- Be familiar with on and off installation resources for victims.
- Support command in holding offenders accountable.

Victim Advocate Procedures

Initial Response

- Note phone number of caller, if a display phone is in use.
- If returning a prior call,
  - Ask victim if he/she is safe before proceeding with the call.
  - Verify number and name of caller before calling.
  - After placing the call, inquire who you are talking to – could be the victim, military police, MTF, etc.
- After verifying caller’s identity,
  - Identify yourself as the victim advocate.
  - Ask the name of the victim.
  - Ascertain the status of the current situation.
- If the MTF, military police or family advocacy staff request the advocate’s presence, advise anticipated response time.
- Offer to meet with the victim, arrange a safe place and time to do so.
- When returning a call to a victim or calling a victim for the first time,
  - do not leave messages on phone answering systems.
  - ask the victim if he/she is safe before proceeding with the call.
  - do not identify yourself as the victim advocate until you verify that you are talking with the victim.
**Initial Victim Assistance**

- Inform the victim regarding:
  - Nondisclosure policy.
  - Nondisclosure rules and exceptions.
  - Fact that victim is not required to reveal information to the victim advocate.

- Ascertain victim’s immediate needs.
  - Be supportive, non-judgmental, and calm.
  - Encourage the victim to seek medical consultation/examination.
  - Assess for imminent harm.

  * The Military Services should assure victim advocates assess all domestic violence victims for imminent harm to the victim by the offender, and homicidal and suicidal concerns for the victim. Victims may share concerns with victim advocates that necessitate immediate action for potential life-threatening situations to both victim and offender. If the victim shares such information and does not waive the nondisclosure policy, the victim advocate will follow the DoD domestic violence nondisclosure policy, Exceptions paragraph (Chapter 3 of this report, page 126), “A victim advocate may disclose a covered communication only if and to the extent that: The victim advocate reasonably believes that the victim or another is in imminent danger of life-threatening physical harm.” The victim advocate must immediately seek supervision when the victim or another is in imminent danger of life-threatening physical harm for facilitation of further assessment and continued safety planning. In addition, the victim advocate will follow procedures in the victim notification paragraph of the nondisclosure policy (Chapter 3 of this report, page 126.)

- As appropriate for the circumstances, victims should be provided information regarding:
  - Local resources available to provide for victim safety and shelter.
    * Availability of legal consultation.
    * Housing needs.
    * Child care needs.
    * Workplace safety issues.
    * Transitional compensation.
    * Medical (physical and mental health) consultation and follow-up.
* Chaplain resources.
* Other appropriate supportive services.
  - FAP clinical services.
  - Safety Plan (Attachment 1, page 41).

As appropriate for the circumstances, facilitate victim contact with interveners and/or helping agencies. Seek command assistance as required and permitted by the DoD domestic violence nondisclosure policy. Encourage the victim to call any time he/she feels in danger or needs support.

**Ongoing Victim Assistance**

**Individual Advocacy (Intervention with the victim)**

▸ Initiate follow-up contact with the victim as appropriate and needed.
▸ Assist the victim with establishing short and long-term goals.
▸ Support the victim to advocate on her or his own behalf.
▸ Assist the victim in gaining access to interveners and other support resources.
  - Make available up-to-date, comprehensive information and referral on military and civilian resources, including:
    * Shelter and advocacy services.
    * Housing.
    * Financial assistance.
    * Legal assistance and representation.
    * Relocation assistance.
    * Resources in new community.
    * Service relief society.
    * Transitional Compensation Program.
    * Victim/Witness Assistance Program.
    * Employment and education.

▸ Provide and/or review with the victim written informational materials prepared by the SJA regarding:
– Military legal rights, respective Military Service policies and regulations.
– Civilian legal rights, the civil and criminal legal system procedures, civil protection orders, and legal assistance programs.

▸ Assist the victim in contacting appropriate legal offices for provision of personal legal advice specific to the victim’s circumstances or case. Where needed, clarify for the victim that the victim advocate cannot provide legal advice and is not an attorney, but provides general information on rights and the legal system.

▸ Assist the victim in contacting appropriate legal or judicial offices for legal advocacy assistance or court services, including filing of civilian or military protective orders.

▸ Accompany the victim to meetings, as needed and appropriate.

Record-keeping

▸ Assure maintenance of records in accordance with the respective Military Service’s policy.

▸ Do not write anything in a victim’s file that cannot be said directly to the victim or in court.

Ongoing Safety Planning

▸ Complete a safety plan and review it periodically with the victim.

▸ Support the victim in decision-making, but do not make decisions for victims.

▸ Assist the victim in exploring options and prioritizing actions.

▸ Provide referral assistance whenever civilian protection orders are needed.

▸ Contact the victim prior to closure of the victim advocacy case file to assess the need for additional or ongoing safety measures.

▸ Refer children for assessment of physical and mental health.

System Advocacy (Advocating for the victim through collaboration with other installation and local agencies.)

▸ Complete a regular assessment of the consistency and effectiveness of victim advocacy services using a variety of means such as:

– Provide anonymous mechanisms for victims and others that provide feedback to the system, such as post cards, public surveys at the commissary, exchange, etc.

– Survey victims or conduct periodic surveys.
Seek feedback from shelters on what victims report regarding strengths and weaknesses of services.

Interact with interveners to improve system response/support of victims.

Meet regularly with law enforcement, MTF and other interveners to review procedures and solve problems.

Consult the SJA on legal advocacy matters.

Advocate that law enforcement investigations and FAP assessments reflect victims’ experiences.

Inform the chain-of-command when actions/inactions by interveners place a victim at risk.

Identify ineffective or inconsistent policies/procedures to the chain-of-command.

Collaboration and Advocacy with Law Enforcement/Criminal Investigative Services (CID, OSI, NCIS) and Civilian Law Enforcement

Establish liaison/POC, protocol and procedures with law enforcement and criminal investigative units to ensure:

- 24-hour notification of a victim advocate in all incidents of suspected or reported domestic violence occurring on-base and off-base.

- Home/site visits by a victim advocate with law enforcement accompaniment.

- Collaboration on danger/lethality assessment and safety measures.

- Periodic ride-alongs.

- Regular meetings with law enforcement operations officers to provide ongoing feedback and problem-solving on law enforcement response and reports.

Assist in educating/training military and civilian law enforcement personnel on the victim advocate role.

Collaboration and Advocacy with MTF/Dental Treatment Facility (DTF)

Establish liaison/POC, protocol and procedures with the MTF/DTF to ensure:

- 24-hour notification of a victim advocate in all incidents of suspected or reported domestic violence.

- Educating/training of medical/dental facility personnel on the victim advocate role.

- Encourage and facilitate physical health assessment.
Collaboration and Advocacy with Command

- Establish liaison/POC with commanders and senior non-commissioned officers.
- Follow appropriate chain-of-command in all communications with command.
- Advocate on behalf of the victim with command when requested by the victim.
- Consult with appropriate chain-of-command prior to communications with commanders when intervening on behalf of the victim.
- Assist in educating command personnel on domestic violence and the victim advocate role.

Collaboration with Family Advocacy Program (FAP)

- Seek collaboration with FAP intervention and prevention staff.
- Advise the victim that children should be seen by FAP for evaluation.
- Refer victims to FAP when there is a need for intervention services beyond the scope of the victim advocate (when the victim agrees to the referral).

Collaboration and Advocacy with Other Agencies

- Serve on installation/civilian domestic violence coordinating committees.
- Assist in educating civilian interveners about military victim rights, resources and services.
- Establish liaison/POC with civilian victim resources.
  - Shelter/advocacy services.
  - Civil and criminal legal systems, i.e., prosecutors, law enforcement officers, courts, legal assistance providers.
  - Child protection services.
  - Social services.
  - Immigration.
  - Interpreters.
  - Hospitals.
Family Advocacy Committee (FAC)

- Attend all FAC meetings as a permanent advisory member.
- Participate in the development and evaluation of:
  - Installation regulations or orders.
  - MOUs and Inter-Service Support Agreements.
  - Installation/civilian domestic violence coordinating committees.
  - Briefing and educational program on domestic violence.

Domestic Violence Assessment and Intervention Team (DVAIT)*

- Attend all DVAIT meetings representing the needs of the victim.
- Seek collaboration with team members to ensure the victim's needs are met.

Education/Training

- Assist with educating installation personnel on domestic violence and victim advocate services.
- Provide briefs to service members.
- Assist in training military first responders including law enforcement and MTF personnel, commands, and chaplains.
- Assist in training civilian interveners.
- Participate in development and collaboration of public awareness campaigns on victim rights and advocacy services.
- Assist in planning events for Domestic Violence Awareness Month.

Victim advocates should receive appropriate annual training. The Military Services should consider working with military and civilian domestic violence experts hosting a DoD-wide training every other year and on alternate years Service specific training. In addition to didactics on policy and procedures, time should be allotted for group discussion to address concerns from the field and ways to resolve these issues.

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*The Task Force recommends replacing that portion of the Case Review Committee (CRC) that deals with adult domestic violence with the Domestic Violence Assessment and Intervention Team (DVAIT). Specifics about the DVAIT can be found in Chapter 2 of this report, page 113.
Personalized Safety Plan

The following steps represent my plan for increasing my safety and preparing in advance for the possibility for further violence. Although I do not have control over my partner’s violence, I do have a choice about how to respond to him/her and how to best get my children and myself to safety.

The two MOST IMPORTANT things I can do are:

Step 1: If I am planning to leave, I should do so without telling my partner face-to-face. If I have to leave quickly (during an incident), JUST LEAVE. Do not talk with my partner about it. If I am going to leave at another time, leave when my partner is not home and talk with my partner later by phone (be mindful of “caller ID”) or letter from a safe place.

Step 2: Safety during a violent incident. One cannot always avoid violent incidents. In order to increase safety, battered persons may use a variety of strategies.

I can use some or all of the following strategies:

A. If I decide to leave, I will __________________________. (Practice how to get out safely. What doors, windows, elevators, stairwells or fire escapes would you use?)

B. I can keep my personal belongings (purse, car keys, etc.) ready and put them (place) __________________________ in order to leave quickly.

C. I can tell __________________________ about the violence and request they call the police if they hear suspicious noises coming from my house. I can also tell __________________________ about the violence and request they call the police if they hear suspicious noises coming from my house.

D. I can teach my children how to use the telephone to contact the police and the fire department.

E. I will use __________________________ as my code word with my children or my friends so they can call for help.

F. If I have to leave my home, I will go __________________________ (Decide this even if you don’t think there will be a next time.) If I cannot go to the location above, then I can go to __________________________ or __________________________.
G. I can also teach some of these strategies to some/all of my children.

H. When I expect we are going to have an incident, I will try to move to a space that is lowest risk, such as __________________________.  
   (Try to avoid incidents in the bathroom, garage, and kitchen, near weapons or in rooms without access to an outside door.)

I. I will use my judgment and intuition. If the situation is very serious, I can give my partner what he/she wants to calm him/her down. I have to protect myself until I/we are out of danger.

**Step 3: Safety when preparing to leave.** Battered persons frequently leave the residence they share with the battering partner. Leaving must be done with a careful plan in order to increase safety. Batterers often strike back when they believe that a battered partner is leaving the relationship.

I can use some or all of the following safety strategies:

A. I will leave money and an extra set of keys with ___________________________ so I can leave quickly.

B. I will keep copies of important documents or keys at ___________________________.

C. I will open a savings account by (date) ________________ , to increase my independence.

D. Other things I can do to increase my independence include: ____________________________

E. The domestic violence program's hotline number is ___________________________.
   I can seek shelter by calling this hotline.

F. I can keep change for phone calls on me at all times. I understand that if I use my telephone credit card, the following month the telephone bill will tell my batterer those numbers that I called before or after I left. To keep my telephone communication confidential, I must either use coins or a pre-paid phone card or I might get a friend to permit me to use their telephone credit card for a limited time when I first leave.

G. I will check with ___________________________ and ___________________________ to see who would be able to let me stay with them or lend me some money.

H. I can leave extra clothes with ___________________________.

I. I will not tell my partner I am leaving face-to-face, or I will leave without talking with my partner. If my partner has access to a gun, I can lock it up or ask the commanding officer or military police to take it.
J. I will sit down and review my safety plan every __________________________ in order to plan the safest way to leave the residence. (Domestic violence advocate or friend) ______________________________ has agreed to help me review this plan.

K. I will rehearse my escape plan and, as appropriate, practice it with my children.

Step 4: Safety in my own residence. There are many things that a person can do to increase his/her safety in his/her own residence. It may be impossible to do everything at once, but safety measures can be added step by step.

Safety measures I can use include:

A. I can change the locks on my doors and windows as soon as possible.

B. I can replace wooden doors with steel/metal doors.

C. I can install security systems including additional locks, window bars, poles to wedge against doors, an electronic system, etc.

D. I can purchase rope ladders to be used for escape from second floor windows.

E. I can install smoke detectors and purchase fire extinguishers for each floor in my house/apartment.

F. I can install an outside lighting system that lights up when a person is coming close to my house.

G. I will teach my children how to use the telephone to make a collect call to me and to ________________________ friend/clergy person/other) in the event that my partner takes the children.

H. I will tell people who take care of my children which people have permission to pick up my children and that my partner is not permitted to do so. The people I will inform about pick-up permission include: ________________________ (school), ________________________ (day care staff), ________________________ (babysitter), ________________________ (Sunday School Teacher), ________________________ (Teacher), and ________________________ (Others)

I. I can inform ________________________ (neighbor), ________________________ (clergy person), and ________________________ (friend) that my partner no longer resides with me and they should call the police if he/she is observed near my residence.
Step 5: Safety with a protection order. Many batterers obey protection orders, but one can never be sure which violent partner will obey and which will violate protection orders. I recognize that I may need to ask the police, the courts, and the military commanding officer to enforce my protection order.

The following are some steps that I can take to help the enforcement of my protection order:

A. I will keep my protection order (location) ____________________________ .

B. Always keep protection order on or near your person. If you change purses/wallets, that’s the first thing that should go in.

C. I will give a copy of my protection order to police departments in the community where I work, in those communities where I usually visit family or friends, and in the community where I live.

D. There may be a county registry of protection orders that all police departments can call to confirm a protection order. I can check to make sure that my order is in the registry. The telephone number for the county registry of protection orders is ________________ .

E. For further safety, if I often visit other counties, I might file my protection order with the court in those counties. I will register my protection order in the following counties: __________________________, __________________________, and __________________________.

F. I can call the domestic violence program if I am not sure about B., C., or D. above or if I have some problem with my protection order.

G. I will inform my employer, my clergy person, my closest friends, and ________________ that I have a protection order in effect.

H. If my partner destroys my protection order, I can get another copy by going to __________________________ located at __________________________.

If my partner violates my protection order, I can call the police and report a violation, contact my attorney, call my advocate, and/or advise the court of the violation.

I. If law enforcement does not help, I can contact my advocate or attorney and will file a complaint with the chief of the department.

J. I can also file a private civil complaint in the jurisdiction where the violation occurred. I can charge my battering partner with a violation of the protection order. (Some jurisdictions also permit the filing of private criminal complaints.) I can call the domestic violence advocate to help me with this.
Step 6: Safety on the job and in public. Each battered person must decide if and when he/she will tell others that his/her partner has battered him/her and that he/she may be at continued risk. Friends, family and co-workers can all offer protection. Each person should consider carefully which people to invite to help secure his/her safety.

I might do any or all of the following:

A. I can inform my boss, the security supervisor, military commanding officer, senior enlisted advisor, and __________________ at work of my situation.

B. I can ask __________________________ to help screen my telephone calls at work.

C. When leaving work, I can __________________________.

D. When driving home, if problems occur, I can __________________________.

E. If I use public transit, I can __________________________.

F. I can use different grocery stores and shopping malls to conduct my business and shop at hours that are different than those when I was residing with my battering partner.

G. I can use a different bank and take care of my banking at hours different from those I used when residing with my battering partner.

H. I can also __________________________.

Step 7: Safety and drug or alcohol use. Many people use alcohol. Many use mood-altering drugs. Much of this use is legal and some is not. The legal outcomes of using illegal drugs can be very hard on a battered person, may hurt his/her relationship with his/her children and put him/her at a disadvantage in other legal actions with the battering partner. Therefore, abused people should carefully consider the potential cost of the use of illegal drugs. But beyond this, the use of any alcohol or other drugs can reduce a person’s awareness and ability to act quickly to protect him/herself from the battering partner. Furthermore, the use of alcohol or other drugs by the batterer may give him/her an excuse to use violence. Therefore, in the context of drug or alcohol use, a person needs to make specific safety plans.

If drug or alcohol use has occurred in my relationship with the battering partner, I can enhance my safety by some or all of the following:

A. If I am going to use alcohol, I can do so in a safe place and with people who understand the risk of violence and are committed to my safety.

B. I can also __________________________.
C. If my partner is using, I can

D. I might also

E. To safeguard my children, I might and

Step 8: Safety and my emotional health. The experience of being battered and verbally degraded by partners is usually exhausting and emotionally draining. The process of building a new life for myself takes much courage and incredible energy.

To conserve my emotional energy and resources and to avoid hard emotional times, I can do some of the following:

A. If I feel down and ready to return to a potentially abusive situation, I can

B. When I have to communicate with my partner in person or by telephone, I can

C. I can try to use “I can…” statements with myself and to be assertive with others.

D. I can tell myself:

“ ” whenever I feel others are trying to control or abuse me.

E. I can read to help me feel stronger.

F. I can call and as other resources to be of support to me.

G. Other things I can do to help me feel stronger are

H. I can attend workshops and support groups at the domestic violence program or to gain support and strengthen my relationships with other people.
Step 9: Items to take when leaving. When abused persons leave partners, it is important to take certain items with them. Beyond this, abused persons sometimes give an extra copy of papers and an extra set of clothing to a friend just in case they have to leave quickly. Items with triangles on the following list are the most important to take, if there is time. The other items may be taken or stored outside the home.

These items might best be placed in one location, so that if we have to leave in a hurry, I can grab them quickly. When I leave, I should take:

- Identification for myself
- Children’s birth certificates
- My birth certificate
- Passports
- Social Security cards
- Money
- Checkbook, ATM (Automatic Teller Machine) card
- Credit cards
- Keys – house/car/office
- Driver’s license and registration
- Medications
- Work permits
- Green card
- Welfare identification
- Divorce papers/custody papers
- Medical records
- Lease/rental agreements, mortgage payment book
- Bank books
- School and vaccination records
- Insurance papers
- Small saleable items (not batterer’s property)
- Address book
- Pictures
- Jewelry
- Children’s favorite toys and/or blankets

You should not keep this plan. You should discuss with your victim advocate where and with whom this plan will be kept.
YOU SHOULD DETACH THE PHONE LISTING BELOW AT THE DOTTED LINE AND KEEP IT WITH YOU.

Credits and Notes


Adapted from “Personalized Safety Plan,” Office of the City Attorney, City of San Diego, California, April 1990.

Edited by DTFDV staff to make “gender neutral.”

Phone List

Detach at Dotted Line and Keep with You at All Times

Telephone numbers I need to know:

- Domestic Violence Program/Advocate
- National Domestic Violence Hotline – 1-800-799-SAFE
- Police Department – home
- Police Department – school
- Police Department – work
- Military Police
- Commanding Officer/Senior Enlisted Advisor
- Family Advocacy Program Office
- Chaplain
- Domestic Violence Hotline
- County Registry of Protective Orders
- Work Number
- Supervisor’s home number
- Clergy person
- Attorney
- School/Daycare
- Doctor
- Friend
- Family Member
- Other
System Accountability

The Military Services should assure qualitative evaluation systems are in place to assess meeting the needs of victims; the effectiveness of victim advocates; and the effectiveness of the entire system for assuring the needs of victims based on this protocol.

Assessment of the Victim Advocate Program can be done in a variety of ways. (These include input from victims, integration into current satisfaction surveys, etc.) Programs should prepare for an increase in the number of domestic violence cases; however, the level should be less severe due to prevention and early intervention with a decrease in the serious cases and reduction in homicides.

The processes, activities and measures for Victim Advocacy Programs that contribute to system accountability include input from victims, i.e., client satisfaction surveys and the establishment of a mechanism for victims and/or victim advocates to reach out beyond the installation based resources when they feel the local installation resources are not meeting their needs.

DoD should have a mechanism for addressing concerns of domestic violence victims when they cannot get what they need at the installation level and do not want to contact the DoD Inspector General. DoD has hotlines for reporting concerns related to fraud, waste, abuse of authority and management, and child abuse safety and violation. In the military system, individuals are encouraged to attempt resolution of concerns and personal complaints at the lowest level possible. However, for the areas noted above, DoD has direct hotlines where individuals do not have to use the local chain-of-command for these concerns. Civilian hotlines such as the National Domestic Violence Hotline cannot intervene in situations where a victim’s concerns need installation level advocacy and resources to address the concern.

Victims of domestic violence and victim advocates may fear repercussion if they voice concerns or complaints at the local level. During the tenure of the Task Force, numerous inquiries were received from victims of domestic violence concerning questions related to their situation. Most all emails were linked from the Task Force’s website. Domestic violence victims were also referred from national domestic violence organizations to the Task Force.

DoD should have a mechanism for addressing concerns of domestic violence victims when they cannot get what they need at the installation level...
ISSUE 1.B – COMMANDING OFFICER’S PROTOCOL/GUIDELINES

Discussion

The Defense Task Force on Domestic Violence (DTFDV) made several recommendations in its two previous reports concerning the commanding officer’s response to domestic violence.

Background

The Task Force recommended that the Department of Defense (DoD) do the following to increase victim safety and hold offenders accountable:

- Amend DoDD 6400.1 to require installation/regional commanders to seek MOUs with local communities to address responses to domestic violence. (Issue 1.A, Community Collaboration Policies, Initial Report, page 21)

- Amend DoDD 6400.1 to require mandatory initial training for commanding officers (below general/flag officer grade) within 90 days of assumption of command and annual follow-up training. (Issue 2.A, Improve Commanding Officer Training, Initial Report, page 31)

- Amend DoDD 6400.1 to require mandatory training for senior enlisted personnel (E-7 thru E-9) in billets designated as senior enlisted advisors to commanding officers, and to do so within 90 days of assignment to such positions with provisions for annual follow-up training. (Issue 2.B, Standardize Education and Training Programs for Senior Noncommissioned Officers, Initial Report, page 34)

- Require the investigation of every reported incident of domestic violence to determine whether a crime has been committed. (Issue 3.A, Criminality, Initial Report, page 51)

- Train law enforcement, legal, and command personnel to collaborate effectively in making the determination of whether a crime was committed, and taking the necessary follow-on actions appropriate to their specific roles. (Issue 3.A, Criminality, Initial Report)

- Develop standard guidelines on the factors for commanders to consider when seeking to substantiate allegations of domestic violence by a person subject to the Uniform Code of Military Justice and when determining appropriate action for such allegations that are substantiated. (Issue 3.A, Criminality, Initial Report)

- Incorporate factors that legal officers and commanding officers should consider in responding to domestic violence as a crime into appropriate command education offerings. (Issue 3.A, Criminality, Initial Report)

- Establish policy to formally evaluate for continued service those personnel labeled either repeat offenders or treatment failures. (Issue 3.B, Case Management, Second Year Report, page 79)
Develop guidance to ensure that when a service member is separated as a result of a dependent-abuse offense, the commanding officer is knowledgeable and informed regarding the requirement for the victim and the offense to be clearly specified in the separation documentation in order to establish the basis for transitional compensation. (Issue 4.G, Transitional Compensation, Second Year Report, page 123)

Ensure access to billeting or sheltering services or the existence of a memorandum of understanding with a civilian sheltering organization off-site at CONUS installations. (Issue 4.H, Provisions for Safe Shelter for Victims of Domestic Violence, Second Year Report, page 127)

Ensure access to billeting or sheltering services within a reasonable geographic proximity of all OCONUS installations. (Issue 4.H, Provisions for Safe Shelter for Victims of Domestic Violence, Second Year Report)

As a result of these recommendations, the DTFDV has created a Commanding Officer’s Protocol/Guidelines. The attached protocol has been created to assist DoD commanding officers in responding to incidents of domestic violence. This document may be tailored to accommodate different issues and organizations specific for each Service.

**Recommendation**

That the DoD –
Adopt and widely disseminate the attached Commanding Officer’s Protocol/Guidelines.
Commanding Officer’s Protocol/Guidelines

Background

1. For two decades, commanding officers within the Department of Defense (DoD) have relied on the Family Advocacy Program (FAP) as the central resource for identification, assessment, and intervention in cases of domestic violence. Increased recognition of the adverse impact of domestic violence on mission readiness and quality of life for military members and their family members mandates that commanding officers take a more active role in identifying and addressing domestic violence.

2. Commanding officers should be advised that domestic violence is a very complex issue with potentially lethal outcomes. Any intervention by commanding officers may increase the risk to the victim. Therefore, commanding officers should make every effort to consult with available experts before taking any action.

3. Domestic violence often involves assault, battery, a threat to kill, and other acts of force or violence, all of which are violations of the punitive articles of the Uniformed Code of Military Justice (UCMJ) and therefore are punishable as crimes.

4. Commanding officers have a responsibility to address allegations of misconduct in a timely manner at the lowest appropriate level of administrative or punitive action. In this regard, when deciding the appropriate level of disposition, the unique dynamics of domestic violence cases and the experience level of subordinate commanding officers should be considered. Commanding officers should dispose of such cases at a level of command that ensures mature and informed action.

5. Commanding officers must ensure that the institution, not the victim, is responsible for holding the offender accountable. Where possible and appropriate, the focus should be on changing the behavior of the offender to prevent future acts of domestic violence. However, offenders must be held accountable for all criminal conduct through punishment, deterrence, and when possible, rehabilitation.

6. Commanding officers must consider the context of the violence and provide a measured response to ensure that the victim’s need for protection from further harm and the need to hold offenders accountable determine the intensity and direction of the commanding officer’s response to domestic violence.

7. Definitions: When approved, the DoD definition of domestic violence should be inserted here.

Commanding Officer

1. The commanding officer is responsible for all aspects of the command’s response to a domestic violence incident.
2. The following information is provided to assist the commanding officer in preparing for and responding to incidents of domestic violence.

A. Pre-Incident

- Promote a climate in which domestic violence will not be tolerated.
  - The DoD and senior leaders from each of the Military Services have issued policy statements with the message that domestic violence will not be tolerated in the DoD (see attachments 1-5, pages 62-68). Commanding officers at all levels should disseminate and reinforce this message at every opportunity (see example of a Commanding Officer's letter, attachment 6, page 69).
  - The tools for responding to domestic violence and its prevention are constantly evolving. Commanding officers, with the support of victim advocates and FAP personnel, need to update their prevention efforts as required.
  - Commanding officers shall attend training on the commanding officer's protocol within 90 days of assumption of command.

B. Post-Incident

- Refer complaints of non-criminal, pre-domestic violence incidents or patterns of abusive behavior to the FAP and the Victim Advocate Program as appropriate.

- All alleged incidents of domestic violence should be referred to the Domestic Violence Assessment and Intervention Team (DVAIT). The DVAIT will provide a written report to the commanding officer within 48 hours of notice of the incident. The report will focus on the victim's and, if applicable, the children's safety and needs and will provide the results of an immediate danger/lethality assessment.*

- Report all incidents that involve a suspected violation of the UCMJ to appropriate law enforcement officials for investigation unless notified of the incident by law enforcement.
  - It is critical that any incident of domestic violence that involves a suspected violation of the UCMJ is reported and thoroughly investigated by law enforcement officials.
  - The following articles may be used to charge domestic violence related offenses under the UCMJ. Before using these articles, consult with a staff judge advocate.
    1) Simple assault—Article 128: An attempt or threat to injure another person. No physical contact is necessary. It is sufficient that an unlawful demonstration of force frightens a victim.

*Note: A more complete discussion of the DVAIT may be found in Chapter 2, Case Review Committee, Page 113.
2) **Assault consummated by a battery**—Article 128: A battery is the infliction of that harm. Any harmful or offensive touching will suffice, even if the physical contact inflicts no pain and leaves no marks.

3) **Aggravated assault**—Article 128: The crime is considered more severe than other forms of assault due to the fact that a weapon or other force likely to result in death or grievous bodily harm is used, or that grievous bodily harm has been deliberately inflicted.

4) **Maiming**—Article 124: Intentionally inflicting injury upon another, which seriously disfigures the person.

5) **Communication of a threat**—Can be charged under General Article 134.

6) **Indecent language**—Can be charged under General Article 134.

7) **Provoking speech or gesture**—Article 117 (If incident involves two service members)

8) **Firearm, discharging—willfully, under such circumstances as to endanger human life**—Can be charged under General Article 134.

9) **Kidnapping**—Can be charged under General Article 134.

10) **Drunk and disorderly conduct**—Can be charged under General Article 134.

11) **Obstructing justice**—Can be charged under General Article 134.

12) **Unlawful entry**—Can be charged under General Article 134.

13) **Failure to support family member**—Most often charged under Article 92.

14) **Rape/marital rape**—Article 120

15) **Assault with intent to commit rape**—Can be charged under General Article 134.

16) **Assault with intent to commit voluntary manslaughter, robbery, sodomy, arson, or burglary**—Can be charged under General Article 134.

17) **Assault with intent to commit housebreaking**—Can be charged under General Article 134.

18) **Violation of a Military Protective Order (MPO)**—failure to obey order or regulation—Article 92

19) **Damaging military property**—Article 108—Sale, loss, damage, destruction or wrongful disposition of military property.

20) **Damaging private property**—Article 109.

21) **Stalking**—Can be charged under General Article 134.
Law enforcement officials shall gather evidence and submit a written report of the investigation to the commanding officer, in accordance with an established DoD Domestic Violence Law Enforcement Protocol. This process shall capture all relevant evidence for the commanding officer to use in determining the appropriate action.

Domestic violence witnessed by, or involving children, may require notification to a local child protective service agency. In this case, victims of domestic violence and their children shall be referred to FAP.

In all instances of alleged domestic violence, commanding officers shall take immediate and ongoing steps to protect the victim. The commanding officer shall consult with the following, as appropriate: victim advocates, FAP staff, law enforcement personnel, the victim and the SJA. Examples of steps that may be taken to protect the victim include:

- Refer victim to a victim advocate and other appropriate services.
- Provide opportunity for alternative, safe housing.
- Issuance of a Military Protective Order (MPO) (see MPO form at attachment 7, page 70).
- Instituting security procedures that include a comprehensive threat assessment and monitoring of victim safety that may include:
  1) Handling of harassing telephone calls.
  2) Escort for victim when entering and leaving the workplace.
  3) Developing a workplace safety action plan with the victim and security personnel.
  4) Awareness, understanding and sensitivity toward a service member victim’s need for time away from the duty section to handle matters related to the domestic violence such as court appearances, medical, FAP appointments, and accommodating these needs within a reasonable standard.

In all instances of alleged domestic violence, commanding officers shall take immediate and ongoing steps directed at the alleged offender. The commanding officer shall choose a course of action in consultation with the following, as appropriate: law enforcement personnel (DoD and local), FAP staff, victim advocates, the victim, and the SJA. Example of steps that may be directed against the alleged offender include:

- Issuance of an MPO against the alleged offender. The purpose of the MPO is to:
  1) Protect the victim;
2) Allow the victim time to obtain a restraining order from a civilian court;
3) Stabilize the situation;
4) Allow time for follow-up investigation;
5) Maintain good order and discipline and safety of base community.
   a) Forward copies of MPOs to law enforcement, FAP, victim advocate, and victim within 24 hours of issuing MPO against the military member.
   b) The existence of a civilian court order does not preclude a commanding officer from issuing an MPO. In all cases more protection is afforded to the victim when there is both a civilian protection order and an MPO in place.

- Pretrial restraint: Consider the appropriateness and necessity for pretrial restriction or confinement of the alleged offender.
- Removal from military housing: If the alleged offender is a service member residing in military family housing with the victim, alternate billeting should be provided for the alleged offender and the alleged offender should be ordered to stay away from the victim or the residence until the following actions have been completed:
  1) Law enforcement officials have completed their initial investigation;
  2) The need for an MPO has been assessed, and, if necessary issued.
     (see MPO form at attachment 7, page 70)
  3) Alleged offender has been assessed by FAP for an initial danger/risk assessment.
     (see Offender Intervention Protocol, Section III, Chapter 1, Issue 1.D, page 105)
  4) A service member who is a victim should not be removed from military housing unless it is her/his preference or there is a risk to the victim should he/she remain in the quarters,
     a) Under no circumstances should an active duty victim be removed from housing, as opposed to the civilian offender, simply as a matter of expediency.
     b) Children should never be left in the care of an alleged offender.
        (Cases involving children shall be referred to FAP.)

Caution: Permanent removal of the military member from military family housing may affect the eligibility of the spouse/family members to remain in the quarters. Eviction from housing is a serious deterrent to victims seeking help or reporting abuse.
- Direct alleged offender to FAP for a danger/risk assessment.
- Take disciplinary, administrative, or other action(s) as deemed appropriate.
1) Disciplinary actions include non-judicial punishment pursuant to Article 15, UCMJ, or trial by court-martial.

2) As an issue of either mitigation or aggravation, it is recommended that commanding officers consider the severity of the incident, prior incidents of domestic violence, and the impact to the victim/family in determination of the punishment. A court-martial conviction may subject a service member to the provisions of the Lautenberg Amendment to the Gun Control Act, 18 U.S.C. 922 (g)(9) (Federal firearms prohibition) which prohibits any firearm or ammunition from being transferred to or received by a person convicted in any court of a misdemeanor crime of domestic violence. Consult with SJA to determine whether a service member is subject to the requirements of that law.

3) Administrative procedures: May include processing for administrative separation of service members whose unacceptable conduct adversely affects military duty. Repeat offenders or treatment failures must be evaluated for continued service.

4) Disciplinary/administrative action taken on an active duty service member offender may pose an immediate threat to victim safety. Commanding officers shall make every effort to notify FAP and the victim advocate of command actions to avoid potential retaliation based on disciplinary/administrative actions.

5) If the alleged offender is a civilian, jurisdiction will belong to local, state, federal and/or foreign authorities charged with enforcing the law. Memoranda of Understanding (MOU) with local authorities help to ensure a more effective response to the civilian offender. Commanding officers shall consult with their SJA regarding appropriate disposition of such matters.

- Direct offender to FAP intervention program and during the intervention, provide close monitoring and supervision. FAP offender intervention does not preclude timely and appropriate administrative or disciplinary action by the command. FAP offender intervention can be coupled with administrative/disciplinary actions for maximum effectiveness.

1) Maintain liaison with FAP. Ensure service member complies with offender intervention programs, evaluate those service members unfavorably terminated from offender intervention programs for administrative separation, and take appropriate action for noncompliance or re-offense.

2) Consult with personnel officials to cancel or delay Permanent Change of Station (PCS) orders that would interfere with service member’s completion of an offender intervention program.

3) If the alleged offender is a civilian, consider a request for debarment from the installation. This action falls under the authority of the installation commanding
officer. Civilians (including family members and retirees) may be barred from occupying military housing in order to protect a victim.

4) If the alleged offender is a civil service employee, commanding officers shall contact the servicing civilian personnel office. The individual may be subject to appropriate disciplinary action.

5) Document command actions and submit for inclusion into Defense Incident Based Reporting System (DIBRS).

6) Determine the eligibility of the service member family for transitional compensation.

**The Installation Commanding Officer (or equivalent)**

- Establishes, oversees, and is the ultimate authority for the installation FAP to include prevention, reporting, and intervention in family violence.

- Appoints an installation FAP Manager (Family Advocacy Representative, Family Advocacy Program Officer, or Family Advocacy Officer) for overall administration of the program.

- Ensures that a 24-hour a day, 7 days a week, 365 days a year, emergency procedure and reporting protocol exists to report domestic violence.

- Requires the investigation of every reported incident of domestic violence to determine whether a crime has been committed.

- Ensures access to on base billeting and/or off base sheltering services. If sheltering services are provided by other agencies, ensure the existence of a Memorandum of Understanding (MOU)/Memorandum of Agreement (MOA).

- Ensures access to billeting or sheltering services within a reasonable geographic proximity of all overseas installations.

- Ensures that each agency with a role in responding to domestic violence has protocols and procedures in place to clearly define its tasks, as well as the specialty training in its respective functional areas in order to perform its responsibilities. (see Victim Advocate and Law Enforcement Protocols, Section III, Chapter 1, Issues 1.A, page 25 and 1.C, page 73)

- Ensures law enforcement and legal have the necessary training on domestic violence investigation/prosecution to enhance the unit commanding officer’s ability to make the appropriate decisions regarding actions taken against the offender.

- Ensures/encourages the medical treatment facility (MTF) commanding officer to implement forensic training for health care personnel in the first responder role to include documentation of domestic violence related injuries to support any actions that may be taken against the offender.
Institutes and participates in the Family Advocacy Committee (FAC) and ensures victim advocate involvement and review of systemic domestic violence issues.

Provides training on the commanding officer’s protocol for all unit commanding officers (below general/flag officer grade) and key-billeted senior enlisted personnel in billets who serve as advisors to commanding officers, to be briefed within 90 days of assuming command/duties and annual follow-up training.

Provides domestic violence prevention/awareness education in all newcomers’ orientation briefings.

Ensures each of the personnel with DIBRS reporting requirements completes all reports and forwards to DIBRS database on a quarterly basis.

Establishes intervention programs for service members involved in domestic violence and for civilians in overseas commands who are entitled to care in MTF/Family Support/Service Centers (FSC).

Directs the development of and seeks an MOA/MOU with local law enforcement, courts and other agencies as appropriate, in the civilian jurisdiction(s) adjoining the installation, and directs appropriate personnel to establish and maintain liaison with these agencies.

**Civilian Court Protective/Restraining Orders**

If a civilian judge issues a protective or restraining order, the command should take the following actions:

- The Armed Forces Domestic Security Act (P.L. 107-311) declares that a civilian order of protection (any court order issued for the purpose of preventing violent or threatening acts or harassment against, or contact or communication with or physical proximity to another person) shall have the same force and effect on a military installation as such order has within the jurisdiction of the court that issued the order.

- Coordinate with law enforcement department to obtain a copy of the order.

- If the order has not yet been served on the alleged offender, the command shall arrange to make the alleged offender available to be served with the order.

- The commanding officer should review the order and consult with an SJA to determine how it may impact the command or members of the command.

  * Issuance of a civilian order of protection may trigger federal firearms restrictions. (18 USC 922 (g)(8))

- The existence of a civilian court order does not preclude a commanding officer from issuing an MPO. Care should be taken to ensure the MPO does not conflict with the
terms and conditions of a civilian order. Uncertainty or potential conflict should be resolved with the assistance of a SJA before the MPO is issued.

- Commanding officers must be aware that as a result of civilian court criminal proceedings, a domestic violence related misdemeanor conviction might trigger Lautenberg Amendment consequences. Commanding officers should consult the SJA to address Lautenberg Amendment consequences.

- Commanding officers are reminded that civilian judicial actions are independent of commanding officer's actions. There is no requirement to wait for civilian judicial actions to conclude if the commanding officer chooses to proceed.

**System Accountability**

- Within the commanding officer's protocol/guidelines, commanding officers are required to submit a summary of commanding officers' actions for submission into the DIBRS.

- Quarterly, commanding officers at the Special Court Martial Convening Authority level are required to monitor open cases, including offender intervention, involving service members within their command and report the same to the next higher level in the chain-of-command. Open cases are defined as any case pending punitive/administrative action or until FAP intervention is complete.

- Installation commanding officers will meet quarterly with victim advocates and applicable tenant or subordinate commanding officers to ensure system accountability.

- General Court Martial Convening Authorities shall establish a procedure for periodic review of domestic violence programs/cases/responses within their subordinate commands. Because of the unique structure of each Service, this procedure may differ. Examples include, but are not limited to, inclusion into each Service or Installation Inspector General's checklist, the establishment of an additional reporting requirement or an internal command quarterly review.

- DIBRS is an important factor in accountability. DIBRS, or some equivalent system must track domestic violence incidents, apprehensions, and disciplinary/administrative actions.

- Because of the often urgent need for commanding officer's actions to safeguard victims, victim advocates and victims must be encouraged to exercise the military chain-of-command in cases where the commanding officer's response to instances of domestic violence is inconsistent with established guidelines. Specifically, victim advocates and victims must be encouraged to seek recourse with the next higher level of the chain-of-command. Commanding officers are reminded that if all appropriate resources have been employed, this process will help educate all parties involved of the resources available. However, if the response is less than appropriate, this measure will address the deficiency and be one more step to ensure victim safety.
MEMORANDUM FOR SECRETARIES OF THE MILITARY DEPARTMENTS
CHAIRMAN OF THE JOINT CHIEFS OF STAFF
UNDER SECRETARIES OF DEFENSE
DIRECTOR, DEFENSE RESEARCH AND ENGINEERING
ASSISTANT SECRETARIES OF DEFENSE
GENERAL COUNSEL OF THE DEPARTMENT
OF DEFENSE
INSPECTOR GENERAL OF THE DEPARTMENT
OF DEFENSE
DIRECTOR, OPERATIONAL TEST AND EVALUATION
ASSISTANTS TO THE SECRETARY OF DEFENSE
DIRECTOR, ADMINISTRATION AND MANAGEMENT
DIRECTORS OF THE DEFENSE AGENCIES
DIRECTORS OF THE DOD FIELD ACTIVITIES

SUBJECT: Domestic Violence

Domestic Violence will not be tolerated in the Department of Defense (DoD). In Fiscal Year 2000, more than 10,500 physical and/or sexual assaults of a spouse were substantiated in the DoD Family Advocacy Program, with more than 5,200 active duty personnel identified as the alleged perpetrators.

Domestic violence is an offense against the institutional values of the Military Services of the United States of America. Commanders at every level have a duty to take appropriate steps to prevent domestic violence, protect victims, and hold those who commit it accountable.

Therefore, I call upon the leaders at all levels in the Department of Defense to make every effort to:
• provide timely information to new personnel and family members, to include lists of locally available military and civilian resources to prevent domestic violence, procedures for responses to reports of domestic violence, and information about the DoD Transitional Compensation Program;
• improve coordination between military and civilian community agencies that provide the first response to domestic violence issues and incidents, especially through negotiated agreements;
• increase protection to victims through coordinated enforcement of civilian orders of protection affecting military personnel on DoD installations and military protective orders issued by commanding officers; and

• update and standardize education and training programs on domestic violence for commanding officers, senior noncommissioned officers, and personnel with law enforcement, health care, and legal responsibilities, to ensure those programs contain information on how to prevent domestic violence, how to recognize when it has occurred, and how to take action to protect victims and to hold offenders accountable as appropriate.

[Signature]
MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Reporting Family Advocacy Program (FAP) Incidents by Commanders and Senior Noncommissioned Officers

1. Domestic violence continues to be a serious concern to the Department of Defense and Congress. For the past several years FAP has experienced a noticeable decline in incidence reporting. We believe this reduction may be partly attributed to fears of an adverse impact on career progression and underreporting by Commanders and Senior Noncommissioned Officers. The Army Surgeon General and a recent Cornell University FAP Case Review Committee Practices and Procedures Study have raised evidence of this problem.

2. Commanders and Senior Noncommissioned Officers at all levels are key in ensuring that incidents of domestic violence are reported lest we put families and soldiers in danger. In accordance with AR 608-18, para I -7(4) unit commanders will report suspected spouse and child abuse to the Reporting Point of Contact on the installation and provide relevant information to those investigating the report. Installation FAP managers are available to provide regulatory training and guidance to commanders in accordance with AR 608-18.

JOHN M. KEANE
General, U.S. Army
Vice Chief of Staff

DISTRIBUTION:
COMMANDER
U. S. ARMY EUROPE AND SEVENTH ARMY
U. S. ARMY FORCES COMMAND
U. S. ARMY TRAINING AND DOCTRINE COMMAND
U. S. ARMY MATERIEL COMMAND
U. S. ARMY MILITARY DISTRICT OF WASHINGTON
U. S. ARMY INTELLIGENCE AND SECURITY COMMAND
U. S. ARMY MEDICAL COMMAND
U. S. ARMY TEST AND EVALUATION COMMAND
U. S. ARMY CORPS OF ENGINEERS
ATTACHMENT 3

NAVADMIN 112/02

MSGID/GENADMIN/CNO WASHINGTON DC//

SUBJ/PREVENTION OF DOMESTIC VIOLENCE IN THE NAVY//

REF/A/GENADMIN/CNO WASHINGTON DC/311247ZAUG2001//

AMPN/REF A IS NAVADMIN 231/01.//

RMKS/1. THIS NAVADMIN PROVIDES GENERAL INFORMATION AND REITERATES TO COMMANDERS THEIR RESPONSIBILITIES WITH REGARD TO THE PREVENTION OF DOMESTIC VIOLENCE IN THE NAVY.

2. DOMESTIC VIOLENCE IS INCOMPATIBLE WITH NAVY CORE VALUES AND OUR HIGH STANDARDS OF PROFESSIONAL AND PERSONAL DISCIPLINE. YET IN FY-00, OF THE MORE THAN 4,100 REPORTED INCIDENTS OF DOMESTIC VIOLENCE, 67 PERCENT WERE SUBSTANTIATED BY THE NAVY FAMILY ADVOCACY PROGRAM (FAP).

3. DOMESTIC VIOLENCE IS, IN MOST CASES, A CRIMINAL OFFENSE THAT HARMS INDIVIDUALS, RUINS FAMILIES, WEAKENS COMMUNITIES, AND UNDERMINES FLEET READINESS. ACCORDINGLY, NAVY LEADERSHIP AT EVERY LEVEL MUST CONTINUE TO TAKE STEPS TO PREVENT DOMESTIC VIOLENCE, PROTECT VICTIMS OF DOMESTIC VIOLENCE, AND HOLD OFFENDERS ACCOUNTABLE.

4. DID YOU KNOW:
   A. NOT ALL INCIDENTS INVOLVE PHYSICAL VIOLENCE. DOMESTIC VIOLENCE PERPETRATORS USE A VARIETY OF TACTICS – EMOTIONAL/PSYCHOLOGICAL ABUSE, ECONOMIC CONTROL AND INTERFERENCE WITH PERSONAL LIBERTY – TO INSTILL FEAR, INTIMIDATE, MANIPULATE AND CONTROL THEIR VICTIMS.
   B. SEPARATION/DIVORCE MAY NOT END THE VIOLENCE. IN SOME CASES, RISK OF LETHAL DOMESTIC VIOLENCE INCREASES WHEN VICTIMS ARE LEAVING OR HAVE LEFT THE RELATIONSHIP. LIKewise, NOT ALL ACTS OF VIOLENCE INVOLVE HIGH RISK, LETHAL ACTS. IN LOW RISK CASES THE NAVY OFFERS EARLY INTERVENTION FOR FAMILIES IN NEED OF SERVICES (FINS). SAILORS INVOLVED IN FINS CASES ARE DIVERTED FROM THE NORMAL FAP PROCESS AND OFFERED ASSISTANCE ON A VOLUNTARY BASIS TO HELP PREVENT FUTURE VIOLENCE.
   C. DOMESTIC VIOLENCE IS NOT CAUSED OR EXCUSED BY ALCOHOL, STRESS, DEPLOYMENT OR THE VICTIM’S BEHAVIOR.
   D. EXPOSURE TO DOMESTIC VIOLENCE NEGATIVELY IMPACTS CHILDREN, IMMEDIATELY AND FOR YEARS TO COME.

5. LEADERS CAN CONTINUE ADDRESSING DOMESTIC VIOLENCE BY:
   A. SENDING THE CLEAR MESSAGE THAT THERE IS NO EXCUSE FOR DOMESTIC VIOLENCE BY ISSUING WRITTEN COMMAND POLICY STATEMENTS EMPHASIZING DOMESTIC VIOLENCE WILL NOT BE TOLERATED.
B. REQUESTING Training/Advice FROM your local fleet and family support center ON how TO recognize domestic violence when it has occurred, how TO contact local military and civilian resources which can help prevent domestic violence, how TO choose appropriate command actions to protect alleged victims and how TO interact most productively with local FAP case review committees (CRC).

C. Publicizing widely the national domestic violence hotline (1-800-799-SAFE) as a confidential resource for domestic violence victims seeking information in CONUS.

D. Increasing protection to victims through coordinated enforcement of civilian orders of protection affecting military personnel and military protective orders (MPOS), issuing MPOS in writing, and ensuring identified victims receive a copy of all MPOS.

E. Ensuring all domestic violence incidents are investigated by civilian or military law enforcement.

F. Taking appropriate action to hold offenders accountable when there is reason to believe that a violation of uniformed code of military justice has occurred.

G. Understanding that DoD’s transitional compensation program provides basic benefits to families victimized by service members when their abuse contributes to the member’s discharge from the service. Abused family members will be more likely to avoid revictimization if they have financial resources to assist them in a transition. See Ref A for more details.

H. Participating actively in CRC proceedings by appointing a command representative and CRC members, when requested, and by ensuring they receive required training.

6. In the recent past, by virtue of your personal attention to the social ills which we had imported from our society at large – drug and alcohol abuse in particular – we have significantly improved the quality of service of our sailors and their families. Additionally, we have improved the readiness of our fleet to fight and win. We, as the Navy leadership, need to continue to attack the source of domestic violence by communicating through our actions that domestic violence will not be tolerated in the Navy.

7. Point of contact is Ms. Jena Wathen, Navperscom (PERS-661), at (901) 874-4360/DSN 882, or e-mail: P661G6@BUPERS.NAVY.MIL

8. Released by VADM Norb Ryan, Jr., N1.//

BT
NNNN
MEMORANDUM FOR ALMAJCOMICCC

FROM: HQ USAF/CC
    1670 Air Force Pentagon
    Washington, DC 20330-1670

SUBJECT: Domestic Violence

The men and women of America’s Air Force are renowned for exemplifying the highest of values and principles. The vast majority of our personnel live by these standards each and every day. Unfortunately, there are a few among us who, by their unacceptable actions, fail to live up to those standards. Domestic violence is one such example, which has no place in our Air Force and will not be tolerated.

We must all be watchful for the signs of domestic violence and act to end this blight on our community. Leaders at all levels are responsible for protecting victims, initiating investigations, assessing criminality, and holding offenders accountable. The Family Advocacy Program is the commander’s primary resource to prevent, intervene, and treat abusive behavior within Air Force families. I expect commanders to take appropriate action on offenders who commit domestic violence.

It is critical that all Air Force installations strengthen their coordinated community response to domestic violence. All active duty and family members must be aware of local military and civilian resources for preventing family violence, procedures for responding to it, and the support services available to those in need. At the base level, our professionals work together as a team to address family violence and other quality of life issues through our Integrated Delivery System (IDS) model. The IDS will be instrumental in getting the word out.

Each of us must ensure all of our members understand that domestic violence is inconsistent with Air Force values and will not be tolerated. This policy is essential to the well being of our Air Force families and our overall mission readiness.

JOHN P. JUMPER
General, USAF
Chief of Staff
Date signed: 02/12/2002 ALMAR Number: 008/02

R 120845Z FEB 02 ZYW
FM CMC WASHINGTON DC
TO ALMAR
BT
UNCLAS
ALMAR 008/02
MSGID/GENADMIN/CMC WASHINGTON DC/MRM//
SUBJ/DOMESTIC VIOLENCE//
RMKS/1. DURING FISCAL YEAR 2001, THE MARINE CORPS EXPERIENCED 1,700
SUBSTANTIATED INCIDENTS OF DOMESTIC VIOLENCE (1,062 INCIDENTS OF SPOUSE
ABUSE AND 638 INCIDENTS OF CHILD ABUSE). SIMPLY STATED, DOMESTIC VIOLENCE
WILL NOT BE TOLERATED WITHIN THE MARINE CORPS! SUCH BEHAVIOR IS AN
OFFENSE TO OUR CORE VALUES. ACCORDINGLY, LEADERS AT ALL LEVELS ARE CHARGED
TO AGGRESSIVELY TAKE THE APPROPRIATE STEPS TO PREVENT DOMESTIC VIOLENCE,
PROTECT VICTIMS, AND HOLD THOSE WHO COMMIT DOMESTIC VIOLENCE ACCOUNTABLE.
2. COMMANDERS SHALL, IN APPROPRIATE ABUSE CASES, INITIATE ADMINISTRATIVE OR
DISCIPLINARY PROCEEDINGS TO HOLD OFFENDERS ACCOUNTABLE FOR THEIR ACTIONS.
FURTHER, ALL INCIDENTS OF ABUSIVE BEHAVIOR SHALL BE REPORTED TO THE FAMILY
ADVOCACY PROGRAM. IF AN OFFENDER IS CONSIDERED NOT TO HAVE POTENTIAL FOR
FURTHER MILITARY SERVICE, COMMANDERS SHOULD INITIATE SEPARATION PROCEDURES.
3. THE FAMILY ADVOCACY PROGRAM IS THE COMMANDER'S PRIMARY TOOL TO PREVENT,
INTERVENE, AND TREAT ABUSIVE BEHAVIOR WITHIN FAMILIES. EARLY INTERVENTION
IS CRITICAL. COMMANDING OFFICERS WILL ENSURE THAT EVERY REPORT OF FAMILY
VIOLENCE IS INVESTIGATED, AND THAT VICTIMS ARE AFFORDED A SAFE ENVIRONMENT.
4. TO MEET THESE CRITICAL GOALS, WE MUST CONTINUE TO IMPROVE OUR
COORDINATED COMMUNITY RESPONSE. ALL MARINES AND FAMILY MEMBERS MUST
BE MADE AWARE OF LOCALLY AVAILABLE RESOURCES FOR THE PREVENTION OF
FAMILY VIOLENCE, PROCEDURES FOR RESPONDING TO DOMESTIC VIOLENCE, AND
THE SUPPORT SERVICES PROVIDED THROUGH FAMILY ADVOCACY. INCLUSION OF
THIS INFORMATION IN BASE WELCOME ABOARD BRIEFS, ON COMMAND CABLE,
AND THROUGH THE TROOP INFORMATION PROGRAM IS NEEDED.
5. POINTS OF CONTACT ARE YOUR LOCAL INSTALLATION MARINE CORPS COMMUNITY
SERVICES (MCCS) FAMILY ADVOCACY PROGRAMS, AS WELL AS THE MCCS WEB SITE,
WWW.USMC-MCCS.ORG.
6. SEMPER FIDELIS, J. L. JONES, GENERAL, U.S. MARINE CORPS, COMMANDANT OF
THE MARINE CORPS.
//
BT
Command Policy Letter

From: Commanding Officer
To: Distribution List
Subj: Domestic Violence

Ref: (a) Department of Defense Memorandum
subject: Domestic Violence, dated November 19, 2001
(b) Chief of Service Letter/Memorandum/Message

1. Background. Reference (a) states that domestic violence will not be tolerated in the Department of Defense. Reference (b) states (paraphrase). Therefore, simply stated, domestic violence will not be tolerated within this unit/battalion. Such behavior is an offense to our core values. Accordingly, leaders at all levels are charged to aggressively take the appropriate steps to prevent domestic violence, protect victims, and hold those who commit domestic violence accountable.

2. Commanding officers shall, in appropriate abuse cases, initiate administrative or disciplinary proceedings to hold offenders accountable for their actions. Further, all incidents or abusive behavior shall be reported to the Family Advocacy Program (FAP). If an offender is considered not to have potential for further military service, commanding officers should initiate separation procedures.

3. The FAP and the victim advocates are our primary tools to intervene with offenders to stop the violence. FAP and the victim advocate provide support for victims. Early intervention is critical. Commanding officers will ensure that every report of domestic violence is investigated, and that victims are afforded a safe environment.

4. To meet these critical goals, we must continue to improve our coordinated community response. All service members and family members must be made aware of locally available resources for the prevention of domestic violence, procedures for responding to domestic violence, and the support services provided through family advocacy. Inclusion of this information through family newsletters, welcome aboard briefs and troop information programs is needed.

John Doe
Commanding
Military Protective Order
[Name of Military Installation]

Service Member: Rank     Last     First     MI

Protected Person: Last     First     MI

SSN               Date of Birth

SSN               Date of Birth

Current Residence

Current Residence

[ ] Weapon involved

[ ] Divorce/custody/visitation case pending

As the Commanding Officer with jurisdiction over this service member, I find that there is sufficient evidence to conclude that the issuance of an order is warranted.

It is hereby ordered (initial applicable portions):

[ ] That the above-named service member is restrained from any contact or communication with the above-named protected person. For purposes of this order, “communication” includes, but is not limited to, contact in person or through a third party, by telephone, in writing, by data fax, or electronic mail.

[ ] Exceptions to this order will be granted only after an advance request is made to me and approved by me. The following exception(s) to these restrictions on visitation are hereby noted: _______________________________________________________

[ ] That the above-named service member shall remain at all times and places at least ______ feet away from the above-named protected person and members of the protected person’s family or household including, but not limited to, residences and workplaces.

[ ] That the above-named service member is restrained from disposing of, or damaging, any property of the protected parties.

Exceptions: _______________________________________________________

[ ] That the above-named service member vacate the military residence shared by the parties located at _______________________________________________________.

(Specific address)
Until further notified, the above-named member will be provided temporary military quarters at:

That the above-named service member will attend the following counseling

That the above-named service member surrender [his] [her] government weapons custody card at the time of issuance of this order.

That the above-named service member surrender or dispose of [his] [her] personal weapon at the time of issuance of this order.

Other specific provisions of this order:

DURATION: The terms of this order shall be effective until ___________ , __________, unless sooner rescinded, modified, or extended (standard period 72 hours) in writing by me.

ENFORCEABILITY: Violation of this order shall constitute a violation of Article 92 of the Uniform Code of Military Justice.

Commanding Officer  Date  

I hereby acknowledge receipt of a copy of this order and attest that I understand the terms and limitations it imposes upon me.

Military Member  Date  

This order is enforceable under the Uniform Code of Military Justice only. The protected person is encouraged to request a civil protective order for protection in all jurisdictions by all law enforcement agencies.

Distribution List: Service member’s immediate command, service member, protected person, installation provost marshal/security officer, staff judge advocate, Family Advocacy Program (FAP) office, victim advocate, installation medical treatment facility, local civilian law enforcement agency, and, if applicable, appropriate authorities at the DoDEA school (if a student is named as a protected person).
ISSUE 1.C – LAW ENFORCEMENT PROTOCOL

Discussion

The Defense Task Force on Domestic Violence (DTFDV) made several recommendations in its two previous reports regarding the response of law enforcement to domestic violence within the Department of Defense (DoD).

Background

The DTFDV previously found the initial law enforcement response to domestic violence and subsequent criminal investigation flawed and recommended improving the quality of domestic violence incident investigations. (Issue 3.A, Criminality, in both the Initial Report, page 51 and the Second Year Report, page 75)

Several recommendations were made in the two previous reports concerning the law enforcement response to domestic violence incidents. The Task Force recommended that the Department of Defense (DoD) do the following to improve the training and education of law enforcement personnel. (Issue 2.C, Military Criminal Justice Training, Initial Report, page 37)

- Develop, in collaboration with the Military Services and the DTFDV, standardized domestic violence training for military police to be included in their initial training.

- Ensure that local military police patrol officers receive specialized relevant training within 90 days of being assigned duties that would typically require them to respond to domestic violence incidents.

- Create, in collaboration with the Military Services and the DTFDV, mobile training teams to expedite delivery of domestic violence training to military police patrol officers at the installation level.

- Develop, in collaboration with the Military Services and the DTFDV, a comprehensive list of state-of-the-art equipment necessary to conduct a proper investigation of an alleged domestic violence incident.

- Initiate, in collaboration with the Military Services and the DTFDV, an evidence-based prosecution training module for Staff Judge Advocates.

In the process of designing a suggested domestic violence curriculum for law enforcement personnel to improve the quality of their investigations, the DTFDV examined investigative protocols from around the country for purposes of identifying best practices.
Most salient among these practices were the following:

- Interview victim, suspect, children, and any witnesses separately and privately.
- Determine whether injuries are the result of self-defense.
- Determine the predominant/primary aggressor.
- Conduct a lethality assessment.
- Take photos of the victim (with or without injury), alleged offender (with or without injury), any children (with or without injury), damaged property, bloody clothing, weapons, and the crime scene.
- Record what everyone knows about any prior history of domestic violence between victim and alleged offender.

Further, the DTFDV previously recommended that DoD establish a law enforcement protocol for domestic violence investigations that incorporates the best practices outlined above and distribute as a laminated pocket guide. (Issue 3.A, Criminality, Second Year Report)

As a result of these recommendations, the DTFDV has created a law enforcement protocol for domestic violence incidents and investigations.

- Although this protocol offers a standardized method of operation when responding to domestic violence incidents, it is not intended to regulate the conduct of law enforcement personnel in a manner that could jeopardize their safety.
- This document may be tailored to accommodate local requirements and differences in the structure of military law enforcement agencies and their investigative authority.
- This protocol has been created to assist DoD law enforcement personnel to respond to domestic violence incidents in areas where they have jurisdiction. DoD law enforcement personnel need to continue to work with state and local agencies to gather information for commanders to use when incidents occur off base or in areas where they do not have jurisdiction.

**Recommendation**

That the DoD –

Adopt and widely disseminate the attached Law Enforcement Domestic Violence Protocol as a model for the Services to use for installation level procedures.
Law Enforcement Domestic Violence Protocol

Background

- The mission of law enforcement is to respond to requests for information, provide assistance to individuals involved in criminal incidents, protect lives and property, and complete investigations that are referred to appropriate authorities for dispositions of identified alleged offenders.

- The role of law enforcement in domestic violence is often misunderstood. The law enforcement first responder has to intervene in a situation in which violence is likely to have occurred and law enforcement intervention is not welcomed by the alleged offender.

- Proper training for law enforcement personnel reduces injuries to themselves and additional harm to victims, provides assigned personnel specific skills and methods for responding, and increases the ability of law enforcement to gather evidence and determine if a crime has been committed. As such, training and policies that will enable law enforcement personnel to effectively and safely intervene in domestic violence are critical. Factors favoring the law enforcement intervention role are:
  
  - Ability to respond 24 hours a day.
  - Capability of immediate response.
  - Acts of domestic violence may constitute a crime under the UCMJ.
  - Availability of communication and transportation systems.
  - Authority to physically intervene and apprehend, if necessary.
  - Command structure that considers domestic violence a serious offense and expects intervention to stop violence.

- Installation law enforcement departments are the central point for receiving and distributing domestic violence incident information. Installation law enforcement departments should engage in collaborative relationships to facilitate the exchange of domestic violence incident information with federal, state and local agencies. The goal of these relationships should be to improve command awareness of domestic violence incidents on and off installation.

- When responding to a domestic disturbance, law enforcement personnel must be both alert and impartial and must be concerned with the needs of victims where domestic violence is apparent or alleged. Situations which appear minor at first glance can mask a much more serious condition.
Whenever possible, at least two law enforcement personnel should be assigned to
a domestic violence situation, unless immediate intervention is necessary to prevent
serious physical harm.

Uniformed Code of Military Justice (UCMJ)

When law enforcement personnel assess the scene of a domestic violence incident,
it is important that they address and document suspected violations of the UCMJ.

Offenses chargeable under the UCMJ related to domestic violence include:

* Simple assault—Article 128: An attempt or threat to injure another person.
  No physical contact is necessary. It is sufficient that an unlawful demonstration of
  force frightens a victim.

* Assault consummated by a battery—Article 128: A battery is the infliction of that
  harm. Any harmful or offensive touching will suffice, even if the physical
  contact inflicts no pain and leaves no marks.

* Aggravated assault—Article 128: The crime is considered more severe than other
  forms of assault due to the fact that a weapon or other force likely to result in
  death or grievous bodily harm is used, or that grievous bodily harm has been
  deliberately inflicted.

* Maiming—Article 124: Intentionally inflicting injury upon another, which seriously disfigures the person.

* Communication of a threat—Article 134.

* Indecent language—Can be charged under General Article 134.

* Provoking speech or gesture—Article 117 (If incident involves two service members).

* Firearm, discharging—willfully, under such circumstances as to endanger human life—
  Can be charged under General Article 134.

* Kidnapping—Can be charged under General Article 134.

* Drunk and disorderly conduct—Can be charged under General Article 134.

* Obstructing justice—Can be charged under General Article 134.

* Unlawful entry—Can be charged under General Article 134.

* Failure to support family members—Most often charged under Article 92.

* Rape/marital rape—Article 120.

* Assault with intent to commit rape—Can be charged under General Article 134.
• **Assault with intent to commit voluntary manslaughter, robbery, sodomy, arson, or burglary**—Can be charged under General Article 134.

• **Assault with intent to commit housebreaking**—Can be charged under General Article 134.

• **Violation of a Military Protective Order (MPO)**—Failure to obey order or regulation—Article 92.

• **Damaging military property**—Article 108—Sale, loss, damage, destruction or wrongful disposition of military property.

• **Damaging private property**—Article 109.

• **Stalking**—Can be charged under General Article 134.

  — **Definition:** *When approved, the DoD definition of domestic violence should be inserted here.*

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**Dispatchers**

- The high risk of injury associated with domestic violence situations requires that dispatchers consider the risk of injury as a factor when prioritizing law enforcement personnel responses. When it is determined that this is the priority call, law enforcement personnel should immediately proceed to the place of the incident.

- Whenever possible, two law enforcement personnel should be dispatched to the scene.

- Law enforcement personnel should request and be provided with the following information, when dispatched to a suspected domestic call:
  - If applicable, the criminal history of the alleged offender.
  - If applicable, the existence of any protective orders against either/both parties.
  - Any other relevant information the installation is aware of, especially with regards to a history of incidents involving the particular address or the parties, and the likelihood of firearms being present; and,
  - If applicable, a record of weapons custody cards issued to service member or resident. Note that much of this information will not be available until parties are identified on the scene.

- During the initial call for assistance, the call taker should ask these questions:
  - Where is the emergency? Dispatchers should determine the special needs of the victim, i.e., disability, translation, etc.
  - Has anyone been injured? Is an ambulance needed? What are the injuries?
– Are weapons involved? If yes, what kind? Where are they located?
– If possible, keep caller on the line until law enforcement personnel arrive.
  • If the alleged offender is at the residence and a weapon is involved, the dispatcher should consider the risk to the victim when assessing the priority of the response.
  • If medical attention is required, notify the appropriate service provider and inform responding law enforcement personnel.
– What has happened?
– With whom am I speaking?
– Are you the victim? If no, are you a witness?
– Who is the alleged offender?
– Is the alleged offender present?
– Describe the alleged offender.
– If the alleged offender is not present, do you know where he/she may be?
– Can you give a description of the vehicle and direction of travel?
– Is the alleged offender under the influence of drugs or alcohol? If yes, what substance?
– Are children present?
– Have the police been to the address before? If yes, how many times? Why?
– Is there a military or civilian protective order? (Against either/both parties)

First Responders

Probable cause standard

– Responders should keep in mind that the same standard for probable cause for apprehension or search and seizure applies to domestic violence offenses as for any other crime.

Initial Observations

• Upon approach, law enforcement personnel shall make observations of the scene and listen for sounds or evidence of a disturbance. It is important that responding law enforcement personnel are prepared prior to arrival at the scene. The partners should discuss anticipated actions to approach the scene, obtain control of the
scene, separate the parties and coordinate their efforts. Information from the dispatcher should be noted. If possible, contact with the person who reported the incident would be appropriate to help clarify the situation. However, the approach to the scene should be such that the first notice to the parties that law enforcement personnel are on the scene is the knock on the door. Circumstances and judgment will dictate the method of approach.

- Overhead lights or siren, slamming the car doors, noisy vehicle radios or loud talking may give warning of the arrival of law enforcement personnel and seriously compromise law enforcement personnel and victim safety. The first minute of response to a scene of domestic violence is the most dangerous time for law enforcement, and law enforcement personnel should be mindful of this during their approach to the scene.

- In some instances, the presence of law enforcement personnel will be the first sign to a domestic violence alleged offender that the law enforcement office has been called. There is a danger that the victim may be assaulted between the time law enforcement personnel arrive at the scene and obtain control of the situation.

- Windows and doors should be visually checked for unusual movements or objects during the approach.

- When approaching a dwelling at night, flashlights should not be shined in windows to avoid giving warning of law enforcement personnel arrival.

- During the approach, law enforcement personnel should scan the area for signs of witnesses, children (toys, swing sets) and the possibility of a fleeing alleged offender.

– Search and seizure

- **Person (on/off base):** With probable cause, a commanding officer or officer in charge (CO/OIC) can authorize the search of persons under his/her command. Searches shall be, whenever possible, conducted by or in the presence of a service member of the same sex.

- **On base property:** With probable cause, a CO/OIC can authorize the search or seizure of property under his/her immediate control.

- **Off base property in the United States:** A CO/OIC may not authorize a search of off base property in the United States. They must work through the specific Service’s criminal investigative arm and state or local agencies to obtain authority to conduct an off base search.
* Off base property outside the United States: The CO/OIC with probable cause may authorize a search of the military members’ property. Note that some Status of Forces Agreements (SOFAs) limit or prohibit such off base searches.

* A CO/OIC authorizing a search must be neutral and detached: If a CO/OIC was the victim of an offense or has become involved in the investigation, refer any search authorization requests to a superior in the chain-of-command.

* Cannot delegate authority: Only the CO/OIC can issue a search authorization. A CO/OIC must personally make the probable cause determination.

* Major criminal offenses: Do not conduct a search before referring the case to the Service’s criminal investigative arm unless the search is necessary to protect life or property, or to prevent the destruction of evidence.

* Search authorizations must be based on probable cause:
  – A reasonable belief that a crime has been committed and that evidence of the crime will be located at the place to be searched.
  – The reasonable belief must be supported by a factual basis and information must be reliable and credible.

* Quest for evidence: If looking (searching) for evidence, do not order or conduct a “health and readiness inspection” in the area where the evidence may be located.
  – Courts may throw out the evidence seized in a search disguised as an inspection. Factors the courts will consider to evaluate whether an inspection is really an illegal search are (1) if the inspection was not previously scheduled; (2) if it followed the report of an offense; (3) if it targeted specific individuals; or (4) if it subjected specific individuals to a greater degree of scrutiny than others.

* Common areas: May be searched anytime without a search authorization. Drug dogs may be used in passageways, workspaces, or common areas at any time. Drug dog alert from within a common area may establish probable cause to order a search of private property (e.g., private room or locker).

* Use of forms: Anyone providing information to support the request to search should be sworn and under oath.
• **Specificity on the form:** When authorizing a search, the CO/OIC must describe the place to be searched and the items to be seized. The list of items to be seized should include every item of evidence that may be expected to be found and any parts/pieces/components thereof.

• **Always ask for consent:** Before actually conducting a search, the owner of the property should be asked for consent to search. Document consent in writing.

• **Law enforcement personnel shall remain on the scene** where the abuse occurred or was in danger of occurring as long as law enforcement personnel have reason to believe that at least one of the parties involved would be in immediate physical danger without the presence of law enforcement personnel.

– **Law enforcement personnel demeanor**
  
  • The initial contact by the responding law enforcement personnel should convey a professionally calm, polite and helpful attitude.

  • The law enforcement personnel shall state their reason for being present.

  • Include children when explaining law enforcement personnel’s presence, particularly if an apprehension is being made.

  • Law enforcement personnel should strive to be considerate and attentive toward all parties and their problems regardless of law enforcement personnel’s own views or personal reactions toward the matter or parties involved.

  • Upon entering, law enforcement personnel shall prevent the physical movement of the parties as much as possible and control their access to any potential weapons such as glasses or eating utensils.

  • Law enforcement personnel should be mindful that persons who are under the influence of drugs or alcohol, or who suffer from mental illness, might pose a safety risk to themselves or others at the scene.

– **Law enforcement personnel roles at the scene**
  
  • The responding law enforcement personnel must take immediate control of the situation and should separate the parties to prevent any violent action and to interview them independently. However, if there are two law enforcement personnel present at the scene, they should, if practical, remain within view of each other to enhance law enforcement personnel safety and to avoid any subsequent allegations of mistreatment. In attempting to ascertain the facts
in the dispute, law enforcement personnel should allow each party to present his or her story individually, avoiding any unnecessary interruptions by the other party. Separating the parties also allows each the opportunity to relay matters to law enforcement personnel without being overheard, influenced or intimidated by the other party.

- Law enforcement personnel should determine if cultural differences necessitate an adaptive response (translators).
- Law enforcement personnel shall determine whether the situation requires coordination with emergency medical services or the Service’s criminal investigative organization as set forth in Service specific regulations.

- Civilian alleged offenders
  - Law Enforcement Civilian Jurisdiction
    - **Base integrity and security are paramount**: The installation commander, under the Internal Security Act of 1950, retains ultimate authority to protect his/her installation from any threat, no matter what type of jurisdiction is present.
    - **Three types of jurisdiction (some installations will have different types in different areas)**:
      1) **Exclusive**: Federal government has exclusive authority to make and enforce local laws.
      2) **Concurrent**: State has equal authority to make and enforce local laws.
      3) **Proprietary**: Federal government is merely a tenant on the land and retains no power to make or enforce local laws.

- Jurisdiction does not affect enforcement of UCMJ over military personnel. The UCMJ is applicable in all places and at all times to all active duty.

- Civilian misconduct:
  - **Exclusive areas**: Civilian misconduct may be prosecuted in Federal District Court or Federal Magistrate’s Court. Local military attorneys and law enforcement personnel must coordinate with the appropriate U.S. Attorney’s office Staff Judge Advocate (SJA).
  - **Concurrent areas**: State law applies with equal force as federal law. Service or civilian law enforcement may respond and either may pursue prosecution. Agencies must have a memorandum of understanding with civilian law enforcement on these issues.
Proprietary areas: State law controls. State law enforcement normally makes all arrests and prosecution will be in state courts. Active duty may also be prosecuted in state court for traffic violations and other crimes but will not necessarily preclude punishment under the UCMJ for same offense.

Detention of civilian for delivery to civilian authorities: Regardless of the type of jurisdiction, civilians may not be confined, but may be “detained” for a reasonable time until civilian law enforcement assumes physical custody of the individual. Notify the Service’s criminal investigative arm immediately.

Barring of civilians: Civilians who commit misconduct and/or present a threat to good order and discipline on the base, may be barred by the base CO from entering the installation. The CO must issue a written order barring the individual from the installation. Those who violate the order may be tried in federal court, fined and/or imprisoned.

Preliminary Investigation

Law enforcement personnel responding to domestic violence calls should ensure thorough investigations:

- Interview witnesses.
- Attempt to identify and interview the party who called the police, neighbors, children and other potential witnesses. Be mindful of their concerns regarding retaliation.
- Ask about knowledge of prior incidents.

Information from the scene

- Treat the scene as if it were a crime scene, investigate thoroughly and gather all evidence necessary to support a prosecution.
- Evidence checklist can include:
  - Photographs of the victim’s injuries.
  - Photographs of the alleged offender’s injuries.
  - Photographs of the crime scene.
  - Statements by the victim.
  - Statements by the alleged offender.
  - Statements by any witnesses.
– Collection of evidentiary items such as bloody cloths, damaged phone, broken articles.

– Information from dispatcher or emergency call tapes.

– Document excited utterance and emotional demeanor of victim and alleged offender.

– When interviewing victims or alleged offenders, ask open-ended questions and draw out details.

– Phrase questions in non-judgmental, non-threatening language.

– Document spontaneous admission of guilt or minimization.

– Obtain signed medical release for follow-up with medical records.

– Attempt to obtain the following information at the scene or if that is not possible, it should be included in the follow-up investigation.

– Determine the relationships of all parties, including children, at the scene. If children are not immediately observed, ask if there are children present in the household. If children are present, record their names and dates of birth.

– Obtain information about the alleged offender’s ownership of, presence of, or access to firearms, and their location.

– Officers should provide information regarding an alleged offender’s dangerousness to the command. Therefore, gather information regarding the suspect’s: criminal history; history of abusing the current victim; history of abusing other victims; possession of weapons; use of weapons in prior abuse of the victim; past threats against or abuse of pets; past attempts or threats to kill; past attempts or threats to commit suicide.

• Ascertain if there is a history of such disputes and whether there are any military or civilian protective orders currently in effect, against either/both parties, including those held against the alleged offender by someone other than this victim.

• Document allegations of prior abuse, including expired protective orders.

• Document past use of weapons in prior domestic abuse incidents.

• Seek appropriate criminal action for prior incidents.

• Determine, when possible, who has lawful custody of any minors, and whether court approved visitation rights are being violated.
• Keep in mind that the child’s safety is paramount. Standard procedures such as Child Protective Services or Family Advocacy Program (FAP) personnel notification, when appropriate, should be followed for ensuring safety.

➤ Liaison with the Victim or Child Advocate

  – A victim advocate shall be contacted at the time of any domestic violence apprehension.
  
  – If it is determined that Child Protective Services are required, law enforcement personnel shall contact service providers in accordance with Service standard operating procedures.
  
  – If the situation does not require a victim advocate to respond to the scene, obtain the phone number of the victim’s residence and include in the incident report so the victim advocate can make contact. Also, discretely provide the victim with victim advocate contact information.
  
  – If the victim will be seeking to hide from the alleged offender, keep a separate record of the address and phone number and make note in the incident report where the victim advocate can locate said information.

➤ Information Documentation

  – Properly document important information, i.e., spontaneous utterances (direct quotes) by the victim, the alleged offender, children, and other witnesses.
  
  – In collecting evidence of domestic violence, law enforcement personnel are strongly encouraged to use photographs to document injuries sustained by the victim and the condition of the crime scene. Contemporaneous records of injuries and crime scene condition are critical to the prosecution of alleged abusers.
  
  – Photographs of children at the scene are powerful evidence.
  
  – When documenting the scene photographically, law enforcement personnel are reminded to take both close-up and full scene pictures.
  
  – If a victim has difficulty speaking as a result of being strangled, consider recording victim’s voice to document the episode. This should be considered even when no visible marks appear on victim’s neck area.

➤ Final Actions

  – If there is probable cause that a violation of the UCMJ has occurred, law enforcement officials shall apprehend the offending party. It is inappropriate for an officer to fail to make an apprehension based on the victim’s desire not to press charges or prosecute. The decision to apprehend shall be made by the officer, not the victim of the crime.
– The decision to apprehend must be based on whether probable cause exists that the crime occurred, not on whether the victim requests it or wishes to testify at a future date. Also verbal assurances violence will stop, the fact that the alleged offender does not live on the premises, denial by either party that abuse has occurred or personal belief that reconciliation is preferable to arrest are all factors that should not be considered when probable cause exists that a crime has occurred.

– The safety of the victim and any involved children shall be paramount in any decision to apprehend and in the timing of the apprehension.

– As in other types of criminal investigations, uncorroborated statements by a victim can constitute probable cause that the crime occurred.

– Apprehension Decision

* When responding to a violent disturbance, immediately intervene to separate the parties, including children. Law enforcement personnel should concern themselves with their own safety as well as that of the parties present. In separating the persons involved, they should make a visual search for objects that could be used as weapons. If any party cannot be calmed, apprehension and removal may be necessary. Take into custody the party who appears to have been the alleged offender if there is physical evidence of assault. Very few instances of domestic violence are mutual. Military police will make every effort to identify the predominant aggressor in every instance. (see Self-defense/Predominant Aggressor Guide, Attachment 1, page 101)

* Officers should be aware that a person might be justified in his/her use of force for self-defense and need to be aware of the difference between offensive and defensive injuries. Dual apprehensions are strongly discouraged because they trivialize the seriousness of domestic abuse and increase the danger to victims and make prosecution extremely difficult. In the majority of cases, an effective investigation will reveal the predominant aggressor. Dual or mutual apprehensions should only be made when it’s impossible to determine from observation, statements of the parties, including children, witnesses or other available information that one party is the predominant aggressor. Predominant aggressor does not mean whoever may have started a discussion leading to a disagreement. It may not even be the first party to use force or violence. The predominant aggressor is the person determined to be using violence to control the other party and place that person in fear of further harm. (see Self-defense/Predominant Aggressor Guide, Attachment 1)
• Officers investigating an incident of domestic violence shall not threaten, suggest, or otherwise indicate the arrest of all parties for the purpose of discouraging requests for law enforcement intervention by any party.

– Substance Abuse/Mental Health Issues

• When assessing credibility in order to establish probable cause, law enforcement personnel should remember that a victim who is under the influence of drugs or alcohol, or who suffers from mental illness, is not an inherently unreliable witness.

• An alleged offender who is under the influence of drugs or alcohol, or who suffers from certain mental illnesses, may pose a greater risk to the safety of the victim, law enforcement personnel, the children, and himself or herself.

• Officers should also remember that it is not unusual for an alleged offender to display a calm demeanor following a violent assault while the victim may be hysterical, unruly or display a “flat affect.”

– When an apprehension has occurred, law enforcement personnel should be certain the victim of violence and any children or other household members present understand what that means. Be truthful that the alleged offender may not continue to be confined and may be released shortly. Providing immediate access to a victim advocate, either on installation or through contact with a local domestic violence agency, is a must to provide the victim access to information and support.

– A full written report of the investigation should be promptly prepared. Any evidence collected at the scene should be properly labeled and stored for later use in any criminal proceeding that may arise from the incident.

– In cases resulting in apprehension of the military sponsor, the command may issue a military protective order requiring the military member to stay away from his/her quarters/family for the safety of the spouse/children. Provide information to the victim about how to request a military protective order.

– When no apprehension has occurred, law enforcement personnel shall provide the involved parties with information concerning the Victim Advocate Program and procedures for the issuance of a military protective order.
– Children

* If children are present, but not involved in the dispute, law enforcement personnel should remove them from the rooms in which adults are being interviewed. Parents will often claim that children did not witness incidents of domestic violence when in fact they saw or perhaps heard the attack. Children can be an important source of information about the disturbance and whether or not any assaults or threats occurred. Interviewing children requires patience and sensitivity to their fears and confusion. Get down to their level; do not intimidate the child by your size, voice or manner of questioning. Inform them that your responsibility is to find out what happened and to help make sure further incidents do not occur.

* In some cases, child welfare organizations, victim advocates, relatives, or friends may be asked to assist with the children.

– Even if emergency medical services are not required or injury obvious, first responders need to strongly encourage victims to be assessed by medical authorities.

**Investigators**

➤ Law enforcement supervisors working with command shall:

– Determine whether a follow-up investigation is needed. For instance, if the report indicates a history of abuse, or if information is missing from the initial investigation, it is likely additional investigation should be pursued.

– If so indicated, the command shall request that a follow-up investigation be conducted.

– Where defined by Service specific regulations, appropriate military criminal investigative organization (MCIOs) should be notified.

– If available, gather records of emergency calls for assistance via 911 and other methods, medical reports, and copies of relevant phone records, emails, faxes or letters.

➤ Follow-up investigations by command investigators or the MCIOs should consist of the following steps:

– Review patrol reports and determine whether all steps outlined in the above protocol were completed.
• If the law enforcement personnel failed to complete any of the above, investigators will refer back to the first responder to make sure the work is completed.

If required, re-interview the victim, witnesses and children.

– Additional follow-up investigations do not simply “confirm” what is in the law enforcement personnel’s report.

– Interview the victim or witness in detail and document the information received in your follow-up report. Understand that the victim may either recant or minimize the incident.

– Whenever possible, interview the victim in person.

– Obtain subsequent photographs of the victim even if the law enforcement personnel took photographs at the time of the incident. Injuries may become more visible with time.

– Obtain copies of medical reports if available.

– Locate and interview other corroborating witnesses (such as neighbors) who may have heard the incident, yet had not been involved. These “ear-witnesses” can be invaluable during prosecution.

– Inform the victim and witnesses of the status of the case and the intended referral to the command.

– Record the names, addresses and telephone numbers of two close friends or relatives of the victim who will know of her/his whereabouts at all times during and after the investigation.

– Conduct a complete criminal history of the alleged offender and the victim and attach it to the investigator’s report.

– Obtain copies of prior incident reports.

– Interview the alleged offender unless he/she has invoked the privilege to remain silent.

If a report of domestic violence comes from an agency off installation, investigators shall review the information, follow-up on missing or ambiguous information, and forward the report as appropriate.
**Law Enforcement Personnel Domestic Violence**

- This protocol acknowledges that some law enforcement personnel commit domestic violence against their intimate partners.

- Law enforcement supervisors shall be cognizant of and document all behavior, on or off duty, where a service member or civilian, serving in a DoD law enforcement capacity may be exhibiting signs of possible domestic violence-related problems; including increased use of force during apprehensions, increase in controlling behaviors, stalking activity, and inappropriate aggression toward animals.

- Law enforcement supervisors shall immediately make their ranking supervisor aware of any and all such behaviors.

- A service member or civilian serving in a DoD law enforcement capacity who is subject to a civil protective order or military protective order shall have his/her access to his/her service weapon suspended.

- A service member or civilian serving in a DoD law enforcement capacity who is found guilty of a violation of the UCMJ or civilian criminal laws (municipal/county/state/federal) that constitutes an act of domestic violence shall have his/her police powers permanently revoked.

**System Accountability**

- The attached “First Responders” form must be completed by the responding law enforcement personnel and certified correct by the watch chief or Staff Non-Commissioned Officer in Charge (SNCOIC) within 24 hours of the incident.

- At the end of every shift the watch chief or SNCOIC must reference the daily log to match domestic violence reports to dispatched calls to insure that all calls were documented appropriately.

- The follow-up investigation must be completed, attached to the initial report and the package must be delivered to the responsible command within 5 working days.

- On a weekly basis, law enforcement officials must review forwarding procedures of reports to commanding officer, FAP, and victim advocates.

- On a quarterly basis, law enforcements officials conduct a quality assurance meeting with victim advocates and FAP staff members to review responses to domestic violence calls and ensure quality of law enforcement response.
On a quarterly basis, law enforcement officials conduct quality assurance meetings with commanding officers to review quality of reports and ensure that commanding officers are getting the information they need to support command actions.

These daily, weekly and quarterly collaborative efforts should be items inspected during the normal law enforcement unit inspections.

Investigative reports should not be considered “closed” until the service member’s command has provided notification of final judicial or administrative action.

**Dispatchers’ Checklist**

The high risk of injury associated with domestic violence situations requires that law enforcement personnel immediately proceed to the place of the incident. Whenever possible, two law enforcement personnel should be dispatched to the scene.

Officers should request and be provided with the following information, when dispatched to a suspected domestic call:

- If available, the criminal history of the alleged offender – check through NCIC;
- If available, the existence of any protective orders against either/both parties
- Any other relevant information the installation is aware of, especially with regards to a history of incidents involving the particular address or the parties, and the likelihood of firearms being present; and
- If available, record of weapons custody cards issued to service member or resident.

During the initial call for assistance, the call taker should ask these questions (not necessarily in this order): (If the alleged offender is present and a weapon is involved risk increases)

- Where is the emergency? What address? What apartment number?
- Are weapons involved? If yes, what kind? Where are they located?
  - Are any present in the home?
- Has anyone been injured? Is an ambulance needed? What are the injuries?
- What has happened?
- With whom am I speaking?
- Are you the victim? If no, are you a witness?
- Is the alleged offender present? Who is the alleged offender?
  - Describe the alleged offender.
☐ If the alleged offender is not present, do you know where he/she may be?
☐ Can you give a description of the vehicle and direction of travel?
☐ Is the alleged offender under the influence of drugs or alcohol?
  If yes, what substance?
☐ Are children present?
☐ Have the police been to the address before? If yes, how many times? Why?
☐ Do you have a protective order? (against either or both parties)
☐ If possible keep caller on the line until law enforcement personnel arrive.
First Responder

DOD Domestic Violence Supplemental Page 1 of 8

*(Information to be gathered in addition to routine incident report.)*

Activation Date: ____________ Time:__________ Time of arrival on scene:__________

Victim’s Name (L, F, M) Date of Birth: SSN:

Age: Rank: Unit: Address:

Ht: Wt: Hair: Eyes: Sex:

Alleged Offender’s Name (L, F, M) Date of Birth: SSN:

Age: Rank: Unit: Address:

Ht: Wt: Hair: Eyes: Sex:

I responded to a call of ______________________ at __________________.
I found the victim ____________________________.

Source of police referral

☐ 911 call from residence ☐ Other source
☐ 911 call from elsewhere ☐ Caller’s name

Victim

☐ Angry ☐ Comp of pain
☐ Apologetic ☐ Bruise(s)
☐ Crying ☐ Abrasion(s)
☐ Fearful ☐ Minor cut(s)
☐ Hysterical ☐ Laceration(s)
☐ Calm ☐ Fracture(s)
☐ Afraid ☐ Concussion(s)
☐ Irrational ☐ Other Explain
☐ Nervous
☐ Threatening

Alleged offender

☐ Angry ☐ Comp of pain
☐ Apologetic ☐ Bruise(s)
☐ Crying ☐ Abrasion(s)
☐ Fearful ☐ Minor cut(s)
☐ Hysterical ☐ Laceration(s)
☐ Calm ☐ Fracture(s)
☐ Afraid ☐ Concussion(s)
☐ Irrational ☐ Other Explain
☐ Nervous
☐ Threatening

The victim displayed the following emotional and physical conditions:

Describe all conditions observed.
Physical:

Victim:

Emotional:

Crime Scene:

Reporting law enforcement personnel Rank SSN Date & Time Signature
### Relationship between Victim and Alleged Offender

Mark all that apply
- Spouse
- Former spouse
- Cohabitants
- Former cohabitants
- Dating/Engaged
- Former dating
- Parent of child from relationship

Prior history of domestic violence?
- Yes
- No

Length of Relationship

Prior history of violence documented?
- Yes
- No

Ye s
No

Number of prior incidents:

Ye s
No

Years(s) Month(s)

Case number(s)

Investigating agency:

Medical Treatment

- None
- Will seek own doctor
- First aid
- Paramedics
- Hospital
- Refused medical aid

Paramedics at scene:
- Yes
- No

Unit number:

Attending Physician(s):

Hospital:

Refused medical aid

Alleged offender under the influence of:
- Alcohol
- Drugs
- N/A

Date and Time of Offense:

Place of Offense (Address):

Location of Offense (Room, etc.):

Details of Incident (Officers notes):

Officer's comments:

To all health care providers:
Having been advised of my right to refuse, I hereby consent to the release of my medical records to law enforcement.

Signature______________________________

Reporting law enforcement personnel

Rank

SSN

Date & Time

Signature
### Evidence Collected

From:  
- Crime Scene
- Hospital
- Other: Explain

Photos:  
- 35 mm
- Polaroid

Taken by:  
- [ ] Yes
- [ ] No

Video:  
- [ ] Yes
- [ ] No

Audio:  
- [ ] Yes
- [ ] No

Describe all photographs:

Photos of victim’s injuries:  
- [ ] Yes
- [ ] No

Photos of alleged offender’s injuries:  
- [ ] Yes
- [ ] No

Weapon used during incident:  
- [ ] Yes
- [ ] No

Type of weapon used:  
- [ ] Yes
- [ ] No

Weapon(s) impounded:  
- [ ] Yes
- [ ] No

Firearm(s) impounded for safety:  
- [ ] Yes
- [ ] No

Property tag number:  
- [ ] Yes
- [ ] No

Witnesses present during domestic violence?  
- [ ] Yes
- [ ] No

Statement(s) taken?  
- [ ] Yes
- [ ] No

Children present during domestic violence?  
- [ ] Yes
- [ ] No

Names, ages and DOB of all children present:

Statement(s) taken?  
- [ ] Yes
- [ ] No

Witness info listed on other forms?  
- [ ] Yes
- [ ] No

Restraining orders:  
- [ ] Civilian
- [ ] Yes
- [ ] No
- [ ] Military
- [ ] Yes
- [ ] No
- [ ] Current
- [ ] Expired

Type:  
- [ ] Emergency
- [ ] Temporary
- [ ] Permanent

Issuing Court:  
- [ ] Yes
- [ ] No

Order Number:  
- [ ] Yes
- [ ] No

Victim Given:  
- [ ] Domestic Violence information sheet
- [ ] Crime case number
- [ ] Victim Advocate phone number

Victim Advocate respond to the scene?  
- [ ] Yes
- [ ] No

Victim will be at a temporary address?  
- [ ] Yes, memo attached
- [ ] No

### Witnesses/children

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>___ Apologies</td>
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<tr>
<td>___ Afraid</td>
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<tr>
<td>___ Calmed Down</td>
<td>___ Calmed Down</td>
<td>___ Calmed Down</td>
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<tr>
<td>___ Tearful/Crying</td>
<td>___ Tearful/Crying</td>
<td>___ Tearful/Crying</td>
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<tr>
<td>___ Irrational</td>
<td>___ Irrational</td>
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<td>___ Nervous</td>
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<td>___ Upset</td>
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<td>___ Upset</td>
</tr>
<tr>
<td>___ Threatening</td>
<td>___ Threatening</td>
<td>___ Threatening</td>
</tr>
<tr>
<td>___ Other, Explain</td>
<td>___ Other, Explain</td>
<td>___ Other, Explain</td>
</tr>
</tbody>
</table>

---

**Describe all evidence and disposition**

Include excited utterance (direct quotes from victim about this incident, while victim is in an excited state – crying, etc. – best option is to tape the victim on audio or video):

---

**Domestic Violence Intervention Process Model**
Body Diagram

Strangulation symptoms

- Neck pain
- Tiny red spots within whites of eyes
- Raspy voice
- Neck swelling
- Nausea or vomiting
- Personality changes
- Sore throat
- Red linear marks or bruising
- Difficulty swallowing
- Light headed
- Loss of bodily function
- Scratch marks
- Rope or cord burns
- Ears ringing
- Fainting or unconsciousness
- Miscarriage

Reporting law enforcement personnel

<table>
<thead>
<tr>
<th>Reporting law enforcement personnel</th>
<th>Rank</th>
<th>SSN</th>
<th>Date &amp; Time</th>
<th>Signature</th>
</tr>
</thead>
</table>

Please draw on diagram(s) the location of any injuries.
Victim Statement

Date and Time of Offense: ________________________________
Place of Offense (Address): ________________________________
Location of Offense (Room, etc.): ________________________________
Details of Incident: __________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Officer’s comments: __________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

To all health care providers:
Having been advised of my right to refuse, I hereby consent to the release of my medical records to law enforcement.

Signature __________________________________________

Reporting law enforcement personnel  Rank  SSN  Date & Time  Signature
Alleged Offender’s Statement

Date and Time of Offense: ________________________________
Place of Offense (Address): ________________________________
Location of Offense (Room, etc.): ________________________________
Details of Incident: ________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
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________________________________________________________________________________________
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Officer’s comments: ________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

To all health care providers:
Having been advised of my right to refuse, I hereby consent to the release of my medical records to law enforcement.

Signature____________________________________

Reporting law enforcement personnel Rank SSN Date & Time Signature
### Witness Statement

<table>
<thead>
<tr>
<th>Date and Time of Offense:</th>
<th>Place of Offense (Address):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location of Offense (Room, etc.):</td>
<td></td>
</tr>
<tr>
<td>Details of Incident:</td>
<td></td>
</tr>
</tbody>
</table>

**Officer’s comments:**

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<table>
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<tr>
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<th>Rank</th>
<th>SSN</th>
<th>Date &amp; Time</th>
<th>Signature</th>
</tr>
</thead>
</table>
Law Enforcement Lethality Assessment/Risk Factors

Risk Factors and Lethality Assessment should be used together to determine Law Enforcement/Command actions.

When was the first time something like this happened (get exact date if possible)? __________________________

How often has this happened? _______________________________________________________________

What was the worst incident? ________________________________________________________________

When did it occur? _______________________________________________________________________

When was the last assault before this one? _______________________________________________________

If the last assault was within the last week or visible injuries still exist from a prior assault, get detailed information about that assault. ___________________________________________________________ __________

Has the alleged offender ever used a weapon against you? [ ] Yes [ ] No If yes, what weapon? ___________________

Has the alleged offender ever been arrested for assaulting you or another household or family member? [ ] Yes [ ] No When? __________ Where? ________________________________

Have you ever been treated by a doctor or hospitalized for injuries inflicted by this alleged offender? [ ] Yes [ ] No

Has the alleged offender been following, calling or threatening (stalking) you? [ ] Yes [ ] No

Does the victim have a Personal Protection Order against the alleged offender? [ ] Yes [ ] No

Risk Factors

In the course of the investigation, attempt to identify any of the following risk factors. Check the corresponding block(s) and give a detailed explanation in the narrative.

[ ] Gun present in the home or accessible to suspect
[ ] Alleged offender abuses alcohol
[ ] Alleged offender is violent outside the relationship
[ ] Alleged offender has accused the victim of cheating
[ ] Alleged offender thought about, threatened or tried suicide
[ ] Alleged offender has been violent toward pregnant partner
[ ] Alleged offender has used or threatened to use a weapon
[ ] Alleged offender uses illegal drugs or abuses legal drugs
[ ] Alleged offender has destroyed cherished or personal items
[ ] Alleged offender has said “If I can’t have you, no one can”
[ ] Alleged offender has injured or killed pets
[ ] Alleged offender has forced victim to have sex when victim did not agree
[ ] Victim is currently pregnant
[ ] Parties had a recent separation or threatened one
[ ] Increase in frequency or severity of violence
[ ] Alleged offender is jealous or attempts to control the victim
[ ] Alleged offender threatens to kill
[ ] Victim thought about, or tried suicide
[ ] Violence is escalating in severity
[ ] Alleged offender has prior history of abuse (check NCIC)
[ ] Victim expresses fear of alleged offender

Reporting law enforcement personnel

Rank SSN Date & Time Signature

Watch chief certification:

Watch chief

Rank SSN Date & Time Signature
Self-defense/Predominant Aggressor Guide

*Mutual Complaints*

- If both parties have injuries, often one party has acted in self-defense
- Inappropriate charging/arrest
- Lessen the ability to hold the true alleged offender accountable
- Victims are further victimized
- Decreases chances victim will seek out further help
- Possible eventual homicide by the alleged offender
- Increases liability

*Definition of Self-defense*

- A person’s justifiable use of force against another person when such force is necessary to defend themselves or a third party from what they reasonably believe to be the use, or imminent use of unlawful physical force.

*Elements of Self-defense*

- Person using force had a reasonable belief that s/he was at risk of bodily harm.
- Risk of harm was actual or imminent.
- The force used was that force reasonably necessary to prevent or stop the infliction of bodily harm.
- When responding to domestic violence incidents where mutual complaints exist, law enforcement personnel shall conduct a thorough investigation prior to charging both parties.
- Officers shall assess if there are defensive injuries, indicating one party acted in self-defense.
- Arrest is preferred response only with respect to the predominant aggressor.
- Officers should be aware that alleged offenders use cross complaints to punish victims.
Red Flags of Self-defense (Defendant)

- Scratches
- Bite marks on arm or hands
- Bite marks on chest
- Bite marks on ankles or legs
- Injuries to the genital area
- Stab mark on back or shoulder
- Scratch marks on webbing between thumb
- Knuckles scraped

Red Flags of Self-defense (Victim)

- Bruises on backs of arms or legs, buttocks and back (fetal position)
- Sexual assault injuries

Determining Predominant Aggressor

- Existence of offensive and defensive wounds
- Prior history of violence/abuse
- Size, strength and bulk of the parties
- Relative severity and extent of injuries
- Likelihood of future injury to each party
- Relative fear of each party to the other
- Intent of policy/law to protect victims
- Other evidence
- Has self-defense been eliminated
Military Law Enforcement Options When Both Parties Use Violence

One party illegal
Other party self-defense

No

Is one predominant aggressor?

Yes

Predominant Aggressor Charged

No

Single Charge

Dual Charge
Investigator

Follow-up Investigation Checklist

Officers and/or command shall:

- Review patrol reports and determine whether all steps outlined in the above protocol were completed.
  - If patrol reports are incomplete, investigators refer back to the certifying official and first responder to make sure the work is completed.

- If required, re-interview the victim, witnesses and children.
  - Additional follow-up investigations do not simply “confirm” what is in the law enforcement personnel’s report.
  - Interview the victim or witness in detail and document the information received in your follow-up report. Understand that the victim may either recant or minimize the incident.
  - Whenever possible, interview the victim in person.

- Obtain subsequent photographs of the victim even if the law enforcement personnel took photographs at the time of the incident, injuries may become more visible with time.

- Obtain copies of medical reports if available.

- Locate and interview other corroborating witnesses (such as neighbors) who may have heard the incident, yet had not been involved. These “ear-witnesses” can be invaluable during prosecution.

- Inform the victim and witnesses of the status of the case and the intended referral to the command.

- Record the names, addresses and telephone numbers of two close friends or relatives of the victim who will know of her/his whereabouts at all times during and after the investigation.

- Conduct a complete NCIC history of the alleged offender and the victim and attach it to the investigator’s report.

- Obtain copies of prior incident reports.

- Interview the alleged offender unless he has invoked privilege.

- Deliver domestic violence investigations to service member’s commanding officer and the installation commander within 24 hours of the event. If the investigation is ongoing, available information shall be provided via the MCIOs on an established periodic reporting basis (30, 60 days, etc.).
Discussion

The Defense Task Force on Domestic Violence (DTFDV) previously recommended that the Department of Defense (DoD) require comprehensive and effective intervention for service members who commit acts of domestic violence and remain on active duty (Issue 3.D, Case Management, Initial Report, page 55).

Background

Since its Initial Report, the DTFDV has conducted a review of the literature on offender intervention, consulted with numerous experts in the field, and developed a proposed offender intervention protocol that is intended to standardize intervention methodology throughout the DoD. The primary advantages of a standardized approach are that questionable practices (e.g., overemphasizing the importance of stress and anger management, limiting program duration in terms of what the mission is perceived as able to bear, and failing to regularly monitor behavioral change outcomes) can be quickly brought under control. Additionally, the disruptive impact personnel moves typically have on intervention efforts can be eliminated via a standard offender intervention program that is universally accessible.

The proposed protocol targets male offenders because they constitute the overwhelming majority of offenders, and because there is a large body of literature to draw from that addresses the issue of how to intervene with male offenders that does not exist for female offenders. Estimates from the most recent (1998) National Crime Victimization Survey, published by the Bureau of Justice Statistics, U.S. Department of Justice (DoJ), indicate that women were nearly 75% of the victims of the 1,830 murders attributed to intimate partners (current or former spouses, boyfriends, or girlfriends), and 88% of the victims of the nearly one million non-lethal violent crimes attributed to intimate partners. Similarly, DoD Family Advocacy Program (FAP) statistics indicate that women were nearly 65% of the victims of domestic violence in each of the previous three years. Therefore, most of the literature on offender intervention is about working with male offenders.

The proposed protocol requires the development of standards for evaluating the effectiveness of its intended methodology. Once agreement is reached on what to measure and how to measure it, a determination must be made about the kind of agents needed to perform evaluations of offender intervention programs, e.g., the Inspector General.
Recommendations

That the DoD –

- Adopt and widely disseminate the attached Offender Intervention Protocol.
- Establish a standard culturally competent offender intervention curriculum grounded in victim safety and offender accountability to support the protocol and train intervention staff in its execution.
- Develop evaluation standards for offender intervention.
- Direct the Services to conduct ongoing evaluations of their offender intervention programs in terms of assuring victim safety and achieving positive behavioral outcomes with offenders.
- Collaborate with DoJ to support the testing of new models of intervention or combinations of interventions and offender type specific interventions as they show promise for improving victim safety.
- Examine the needs of female offenders and develop a protocol and standard intervention curriculum for them as well.
Offender Intervention Protocol*

**Critical Components of the Program**

- Recognize that the use of violence and other tactics of power and control by offenders is based upon attitudes and values of entitlement and is often rewarded with a privileged position that they are unwilling, not unable, to relinquish. Attachment 1, Power and Control Wheel, provides more detail regarding power and control tactics.

- Have as the goal of the intervention the reeducation of male offenders in their use of power, male privilege, and male entitlement in their relationships with women.

- View domestic violence as a matter of choice, not a mental health problem.

- Hold male offenders fully accountable for their behavior, and in so doing, remove the stigma from women of having caused or contributed to the violence.

- Confront male offenders consistently on their denial of abuse, their minimization of the severity of its effects, their rationalizations about how they were provoked, and their blame of external factors (e.g., stress) for their behavior.

- Employ cognitive-behavioral approaches that address male beliefs, attitudes, and behaviors in a culturally competent manner.

- Maintain a transparent accountability loop that is victim-centered, and includes monitoring of interventions by both advocates and command in accordance with their respective protocols.

- Institute a case management system to insure communication about offenders to command and to victims through advocates, and to facilitate regular voluntary communication from victims through advocates to offender intervention program staff.

- Insure proper supervision of offender intervention program staff.

- Provide services via government employees, contract, or combination that are framed in the context of the military.

- Explore local possibilities of conducting a residential program for male offenders.

- Program development should acknowledge faith-based interventions, conducted in accordance with the authorized DoD curriculum, as potential service extenders.

*Note: The Task Force recommends replacing that portion of the Case Review Committee (CRC) that deals with adult domestic violence with the Domestic Violence Assessment and Intervention Team (DVAIT). If the DVAIT is accepted and implemented by the DoD, the role of the DVAIT in offender intervention should be incorporated into this protocol. Specifics about the DVAIT can be found in Chapter 2, Case Review Committee, page 113.
**Intervention Assessment and Group Guidelines**

- Intervention staff will conduct an intervention assessment to determine an offender’s suitability for participation in an intervention group. A mental health evaluation may be utilized, and the results may or may not preclude involvement in the group as co-occurring issues (e.g., depression, substance abuse) can be treated simultaneously with intervention.
  
  * The assessment will seek to collect data that would identify any impediments to success in the program.
  
  * The assessment will include specific behavioral details of the offender’s pattern of coercive and violent behaviors.
  
  * The assessment will include information from law enforcement (if available) and from the victim (through the victim advocate). Victims will be informed of any limits to confidentiality in providing this information before it is gathered from the victim and/or advocate.
  
  * The assessment will include a danger assessment to determine if the offender poses a danger to himself or others, and to what degree.

- Intervention groups shall consist of no more than 12 members, and shall, at a minimum, occur in 16 two-hour weekly sessions over a period of 16 weeks.

- Male and female co-leaders are the preferred facilitator pairing for intervention groups. They have the advantages of dual perspectives and being able to model positive male-female interactions and none of the disadvantages faced by two males (e.g., the temptation to collude) or two females (e.g., lightening rods for male anger and defensiveness). However, skill and expertise in working with domestic violence perpetrators is more important than the gender of the group leaders.

  * A contract will be made with the offender in which the offender must stipulate and acknowledge his violent and/or coercive behavior, his motivation for being in the group, and his understanding that he will not be afforded any confidentiality regarding his behavior.

- Offenders will be terminated from intervention for renewed acts of physical or sexual violence, threats, stalking, severe or repeated psychological abuse, violation of visitation/parenting plans, violation of protection orders, severe or repeated disruptive or threatening behavior in group, repeated failure to comply with reasonable standards regarding attendance and lateness, and failure to actively participate in group.
— If the offender is terminated from the group, command will be notified immediately. Command must then examine its options and determine an appropriate response among the possibilities of ordering the offender back to group with a new attitude, administrative action including discharge, non-judicial punishment, and judicial action. Termination of the offender from the group is often a dangerous time for the victim since the offender usually blames her/him.

— Command shall receive monthly reports from intervention staff, and shall provide close monitoring and supervision of the offender in accordance with the command protocol.

— Whenever the intervention staff determines that an offender presents a serious danger to a victim, they incur an obligation to make a reasonable effort to protect the victim. Staff must warn the victim directly, contact the advocate or someone who would warn the victim, notify the commander, alert law enforcement, or take other reasonable steps to protect the victim.

— Exit criteria shall include successful completion of the intervention program that is defined as behavioral change rather than mere attendance at sessions, and some objective means of ensuring continued victim safety (e.g., victim input through victim advocate, continued monitoring by command, periodic check-ins with the intervention staff).

Military Specific Curriculum

— The core curriculum should be tailored specifically to the military community both in content and format.

— Utilize expert consultation and explore possibility of a DoD/DoJ collaboration.

— Ensure that curriculum is based on prevailing best practices and incorporates the following critical points:

  * Utilize basic cognitive-behavioral/psycho-educational format to teach the fundamentals of power and control, issues of contempt for and devaluation of women, respect between partners, and cognitive-behavioral skills, including the power and control wheel (see Attachment 1, page 111) and equality wheel (see Attachment 2, page 112).

  * The core curriculum should address issues such as defining and recognizing violence and abuse; alternatives to the use of violence; aspiring to be a better man; managing feelings; understanding the effects of violence on victims; developing empathy; recognizing one’s partner as a separate and distinct person; separation, divorce, and letting go; respectful listening skills; healthy sexuality; intimacy; egalitarian relationships; and parenthood.
• The core curriculum should be culturally competent with a goal of helping men identify and distinguish between aspects of gender roles within their own cultures (e.g., military, race, ethnicity, class) that contribute to their violence against their partners.

• Gender specific groups should be maintained. Male and female offenders should under no circumstances attend the same group.

**Minimum Requirements for Intervention Staff**

a) Pre-employment
   – Licensed social worker (at least one of the co-leaders).
   – Two years experience in domestic violence work with adult intimate partners.
   – Group work and facilitation skills.
   – Clear motivation to do the work.
   – Must have a sense of ownership for the program.
   – Ability to assess how one’s own attitudes and behaviors impact the work with male offenders.

b) Post-employment
   – Trained and certified to use the standard military curriculum.
   – Victim advocacy training.
Domestic Violence Intervention Process Model

- **Using Coercion and Threats**: Making and/or carrying out threats to do something to hurt her • threatening to leave her, to commit suicide, to report her to welfare • making her drop charges • making her do illegal things.

- **Using Economic Abuse**: Preventing her from getting or keeping a job • making her ask for money • giving her an allowance • taking her money • not letting her know about or have access to family income.

- **Using Male Privilege**: Treating her like a servant • making all the big decisions • acting like the "master of the castle" • being the one to define men’s and women’s roles.

- **Using Children**: Making her feel guilty about the children • using the children to relay messages • using visitation to harass her • threatening to take the children away.

- **Using Intimidation**: Making her afraid by using looks, actions, gestures • smashing things • destroying her property • abusing pets • displaying weapons.

- **Using Emotional Abuse**: Putting her down • making her feel bad about herself • calling her names • making her think she’s crazy • playing mind games • humiliating her • making her feel guilty.

- **Using Isolation**: Controlling what she does, who she sees and talks to, what she reads, where she goes • limiting her outside involvement • using jealousy to justify actions.

- **Minimizing, Denying, and Blaming**: Making light of the abuse and not taking her concerns about it seriously • saying the abuse didn’t happen • shifting responsibility for abusive behavior • saying she caused it.
NONVIOLENCE

NEGOTIATION AND FAIRNESS
Seeking mutually satisfying resolutions to conflict
• accepting change
• being willing to compromise.

ECONOMIC PARTNERSHIP
Making money decisions together • making sure both partners benefit from financial arrangements.

SHARED RESPONSIBILITY
Mutually agreeing on a fair distribution of work • making family decisions together.

RESPONSIBLE PARENTING
Sharing parental responsibilities
• being a positive non-violent role model for the children.

NON-THREATENING BEHAVIOR
Talking and acting so that she feels safe and comfortable expressing herself and doing things.

RESPECT
Listening to her non-judgmentally
• being emotionally affirming and understanding
• valuing opinions.

TRUST AND SUPPORT
Supporting her goals in life • respecting her right to her own feelings, friends, activities and opinions.

HONESTY AND ACCOUNTABILITY
Accepting responsibility for self • acknowledging past use of violence • admitting being wrong • communicating openly and truthfully.

NONVIOLENCE

ATTACHMENT 2
SECTION III, CHAPTER 2

Case Review Committee

Discussion

This is a continuation of Issue 5.C, Case Review Committee (CRC), page 140 from the Second Year Report of the Defense Task Force on Domestic Violence (DTFDV).

Background

The current Department of Defense and each Service Family Advocacy Program directive require the establishment of the CRC. Task Force members expressed concern about whether or not the CRC process adequately addresses victim safety and offender intervention in domestic violence cases, how such a process assists or hinders the commanding officer’s role in offender accountability, and if the CRC is the appropriate mechanism to determine both substantiation of incidents of domestic violence and intervention. By its charter, the CRC must serve as both an adjudicative and clinical body – these purposes are inconsistent with each other.

The CRC was originally intended to be a case management body focused on clinical intervention in abuse cases. The lines between clinical intervention and command judicial action are blurred. Some commanding officers defer to the CRC case status decision (substantiation or unsubstantiation) to determine administrative action and referral for clinical intervention. The CRC is often viewed as a quasi-legal body. Victims feel they do not have a voice in the system due to being assisted by the same case manager that assessed the offender, and likewise, accused offenders feel they are being denied due process.

The DTFDV addressed the CRC issue with the DoD Family Advocacy Program (FAP) Manager and the Military Services’ FAP Managers. A Crafting Team and Review Team were formed to further address the issue and bring recommendations to the DTFDV. The CRC Crafting Team met with the DOD FAP Manager and Military Services’ FAP Managers in August 2002. The Crafting Team submitted their recommendations to the Review Team, and subsequently to the entire DTFDV.

The CRC Crafting Team recommended the current CRC be replaced to include its title and function. The Task Force recommends the replaced CRC be termed the Domestic Violence Assessment and Intervention Team (DVAIT). The DVAIT should be managed by FAP, and one of the first and most critical functions of the revised team is to ensure that the immediate danger/lethality assessment is conducted with the victim and children in the family.
The DVAIT should provide verbal and written feedback to the commanding officer, within 48 hours of notice of the incident, on the victim and children's safety and the results of an immediate danger/lethality assessment. The feedback should include at minimum information on assuring the victim's safety and any needs of the children. This should include a review of overall safety including recommendations regarding the need for a military protective order, housing, financial assistance, and child care. As soon as possible, the commanding officer should be informed of the alleged offender’s suitability for intervention and an intervention plan to include recommendations on types of action and/or interventions. The victim advocate should be the case manager for the victim’s safety plan. FAP personnel will assess all children and provide recommendations for intervention. The Task Force recommended an example of a safety plan for use with victims in the Second Year Report (pages 113-120). The safety plan is also provided on page 41 of this report.

DVAIT composition should include an interdisciplinary group including at a minimum FAP clinicians, a victim advocate and a medical representative. Mandatory reporters (i.e., command, medical personnel, etc.) are expected to continue to refer all cases however minor they appear to FAP. The DVAIT should provide case management until the offender and victim (when they choose FAP clinical services) complete FAP services or the offender (if active duty) is discharged from the Military Service.

The Commanding Officer’s Protocol/Guidelines shown as Issue 1.B in Section III, Chapter 1, page 51 of this report provides commanding officers sound guidelines for managing cases without the CRC case status determination.

The DVAIT should be used to address safety and intervention needs of the offender, victim and children in the family.

Findings

- Originally, the CRC was intended to be a case management body focused on clinical intervention in abuse cases. Over time the lines between clinical intervention and command judicial action have become blurred.

- The portions of the system responsible for holding offenders accountable sometimes defer to the outcome of the CRC where a decision is made whether or not to substantiate abuse. Substantiation is often equated with a finding of guilt or innocence, so the CRC is too often incorrectly viewed as a “legal body.” This has resulted in issues being raised about due process for offenders, the need to appear before the CRC to “defend” oneself, the need to have an attorney, etc. The role of the CRC as strictly a clinical body has been compromised.

- A case manager – in presenting a case to the CRC – is required to do the initial assessment and provide services to victims and offenders as well as be the liaison with the command. This requires the case manager to maintain a precarious balance
as the multiple, and sometimes conflicting roles, can leave victims feeling that there is no one in the system who is advocating for them and representing their best interests. This can lead them to be distrustful and have the perception that the system only cares about the offender.

- Discussions with service providers during site visits confirmed that this is often an untenable position for them and does not adequately address both victim safety and offender accountability.

- Sometimes information presented by case managers is unrelated to whether or not abuse occurred. The information presented to the CRC is influenced by the philosophy of the case manager and/or Service about what domestic violence is and what causes it. For example, information regarding victim behavior such as mental health diagnoses, infidelity, etc., is presented to be considered in relation to whether or not abuse occurred. Presentation of this information can result in shifting the focus from the violence and the behavior of the offender to examining the victim, which can negatively impact the decision. This experience reinforces the perception of victims that there is no one advocating for them.

- In the few locations where there are victim advocates, the Task Force did not find them to be “voting” members of the CRC. Their role is limited to only providing information, and they do not actively participate in the decision-making regarding case intervention. However, the perception is often that command representatives – who view their role as “representing” the offender (when the offender is active duty) – do actively participate in the decision-making process and in at least one Service are “voting” members of the CRC while the victim advocate is not. This reinforces the belief that the system only cares about the offender.

- Task Force observation of the CRC process revealed a great deal of resources and time being devoted to a process that often results in nearly the same recommendation for every case regardless of the level of risk or severity – a “one-size-fits-all” approach based more on what is available than what is needed for the intervention. This raises the question whether this is the most efficient use of limited resources.

**Recommendations**

That the DoD –

- Replace the CRC in adult domestic violence cases with a Domestic Violence Assessment and Intervention Team (DVAIT) (see Attachment 1, page 116).

- Develop a standard DoD form for use by DVAITs in all the Military Services for providing written feedback to the commanding officer (see sample at Attachment 2, page 118).
DOMESTIC VIOLENCE ASSESSMENT AND INTERVENTION TEAM (DVAIT)

Purpose
The DVAIT’s purpose is to provide verbal and written feedback to the service member’s commanding officer regarding victim safety and offender intervention.

Background
The DVAIT is a multidisciplinary team that should be managed by the Family Advocacy Program (FAP). This team does not make determinations concerning if an incident occurred or not. The team’s focus is on assisting the victim advocate with a safety plan for the victim, discussing the offender’s suitability for intervention, and recommending an intervention plan for the offender to include types of action and/or interventions needed. In assisting victims, the focus should be on the victim’s current and future needs, e.g., medical needs, safe housing, financial assistance, child care, legal consultation, and support services.

The information presented to the DVAIT is influenced by the philosophy of the presenter about what domestic violence is and what causes it. The DVAIT should assure the focus of the meetings do not in any way shift away from the violence and behavior of the offender. The victim’s personal history should only be discussed when there is a need for intervention beyond the services of the victim advocate; this information is needed for making a referral, and the victim must have given written permission for the disclosure of this information.

Team Composition
The DVAIT should be comprised of the following representatives: FAP clinician, victim advocate and a medical representative. Other representatives may be invited to attend if their expertise is needed.

Meeting Frequency
The DVAIT should consult weekly or more frequently if necessary. The team should keep the focus on providing feedback to the commanding officer within 48 hours following the notification of the incident.

Case Management Functions
- Monitor offender’s intervention progress and report at least monthly to the commanding officer on the offender’s attendance and progress.
Monitor victim’s needs and assure all resources are available to implement the victim’s safety plan. Advise the commanding officer of the safety needs with which the commanding officer can assist.

**Feedback to the Commanding Officer**

The DVAIT form should be used to provide written feedback to the commanding officer. The commanding officer should return this form to the DVAIT with information on his/her actions concerning the incident. The DVAIT representative should contact the commanding officer by phone for an initial verbal briefing on the DVAIT’s recommendations, then deliver the form to the commanding officer in a secure fashion that maintains confidentiality.
Domestic Violence Assessment and Intervention Team (DVAIT) Report (Example)

_____Initial Report _____Updated Report (x as applicable)

1. Date of Incident (YYMMDD):

2. Date DVAIT Initially Convened (YYMMDD):

3. Verbal Feedback Provided To Active Duty Member's Commander (YYMMDD):

4. Offender Last Name, First Name, MI:

5. Offender's Rank (If Active Duty):

6. Offender’s Military Organization (If Active Duty):

7. Offender's Installation (If Active Duty):

8. Victim's Last Name, First Name, MI:

9. Victim’s Rank (If Active Duty):

10. Victim’s Military Organization (If Active Duty):

11. Victim's Installation (If Active Duty):

12. Offender Intervention (x as Applicable):

  Offender is candidate for group offender intervention: Yes______ No______
  ▶ Group will convene (yymmdd) ________; time________; place ________________
    for ____weeks

  Offender requires further evaluation: Yes______ No______
  a. Mental Health __________________________
  b. Substance Abuse _______________________
  c. Other ________________________________

13. Victim Needs (x as applicable):

  ▶ Military Protective Order __________________
  ▶ Financial assistance_____________________
  ▶ Child care assistance_____________________
  ▶ Legal consultation_______________________
  ▶ Housing assistance_______________________
  ▶ Other _________________________________
  ▶ Relocation assistance____________________
  ▶ Transitional Compensation Program briefing ___
14. Children’s Needs: (DVAIT will summarize any needs for the children requiring commanding officer assistance)

15. Danger/Lethality Assessment: DVAIT will summarize critical danger assessment issues involving the offender and victim that require the commanding officer’s immediate attention. This information should be verbally communicated to the commanding officer first, then the form delivered in a secure fashion to maintain confidentiality.

16. Pertinent history and context of the violence (includes intent of violence; impact on the victim; and the victim’s level of fear).

17. Date Form Completed (YYMMDD):

18. DVAIT Member’s Printed Names, Titles, and Signatures:

19. DVAIT report delivered to commanding officer (YYMMDD):

20. Command Actions: As appropriate, commanding officer annotates actions taken regarding this incident and returns form to Family Advocacy Program.

21. Commanding Officer’s Name, Rank, and Organization:
SECTION III, CHAPTER 3

Nondisclosure Policy

DISCUSSION

This is a continuation of Issue 5.B, Confidentiality, from the Second Year Report, page 137 of the Defense Task Force on Domestic Violence (DTFDV).

Background

Lack of confidentiality for victims of domestic violence in the DoD and its impact on their willingness to seek assistance has been a concern of the Task Force from the initial meeting in April 2000. In the DTFDV Second Year Report, the Task Force recommended that DoD “in collaboration with the DTFDV and the Military Services, proceed with creating a policy that will provide confidentiality to victims of domestic violence who seek to receive support, information, options, and resources to address the violence in their lives.”

The Task Force continued to work on the creation of a nondisclosure policy using both the workgroup process and discussion at Task Force meetings. The Task Force approved a nondisclosure policy at the March 2002 meeting. The Task Force also decided that it was important to collaborate with the groups within DoD who would be instrumental in implementing the policy to make sure that there was as much agreement as possible on the content of the policy with the hope that this would smooth the way for implementation across the DoD.

In keeping with this goal, the nondisclosure policy was briefed to the DoD and Service Family Advocacy Program Managers (FAPMs) in April 2002. Their concerns were addressed by the workgroup and led to some minor changes to the policy.

In August 2002, members of the workgroup met with attorneys from the DoD General Counsel’s Office and the Office of Legal Policy. Their concerns were addressed by the workgroup and led to additional minor changes to the policy. Both groups expressed support for the policy, but wanted to ensure that the DTFDV clearly articulate in the third year report the pros and cons of having such a policy and the resulting risks.

Analysis

The importance of limiting disclosure of communications between a counselor/advocate and a victim of domestic violence or sexual assault is recognized by 34 states and the District of Columbia. Each of these jurisdictions has statutory privileges, which, subject
to various exceptions, enable a victim of domestic violence to seek assistance in a confidential setting. Similarly, the nondisclosure policy proposed by the Task Force provides victims of domestic violence an opportunity to obtain assistance with the confidence of knowing that communications will not be reported to the command of the service member(s) involved unless the victim chooses to authorize disclosure or unless the situation meets one of a limited number of exceptions. The proposed nondisclosure policy does not provide absolute confidentiality; nor does it unilaterally establish a judicially recognized privilege. Nondisclosure is limited to communications between a victim of domestic violence and a victim advocate, addresses only domestic violence involving adult intimate partners, and does not change the mandatory reporting requirement for child abuse/neglect. However, on balance, the proposed policy effectively addresses a variety of concerns and competing interests.

A major consideration in the development of this policy was the competing interests of ensuring victim safety and autonomy and holding offenders accountable. How can a commanding officer hold a domestic violence offender accountable if the incident is not reported to command? One argument is that nondisclosure increases the possibility that there will be no command action as a result of insufficient information and evidence.

The reality is that currently victims choose not to report to the military system because they fear mandatory reporting will result in negative consequences to the service member’s career (whether they are the victim or the offender). Therefore, many victims of domestic violence do not seek assistance and live with violence in their lives. One objective of the nondisclosure policy is to encourage victims to come forward and seek available services and assistance. This will enhance victim safety and will encourage voluntary reporting of incidents of domestic violence that may not otherwise be reported.

The Task Force certainly wants domestic violence offenders to be held accountable for their behavior and believes that implementation of the nondisclosure policy will ultimately increase the number of reports made to command and therefore enhance offender accountability. However, if a choice has to be made, it is the Task Force position that victim safety overrides offender accountability.

Another consideration is the impact that the nondisclosure policy will have on fitness for duty evaluations for active duty victims in situations that may pose a risk to others, e.g., a victim who does maintenance on aircraft. The Task Force feels very strongly that active duty victims of domestic violence MUST have the same right to nondisclosure as civilian victims and therefore made a conscious decision not to include fitness for duty evaluations as an exception to the nondisclosure policy. Such an exception would be a huge deterrent to active duty victims having confidence that they can talk to a victim advocate without compromising her/his job. Active duty victims need the safety of the victim advocate to determine their best course of action to end the abuse. They do not need to fear that if they approach a victim advocate to assist them, there will be an impact on their fitness for duty.¹

¹ The application of the nondisclosure policy will require special consideration as it relates to active duty members in the Personnel Reliability Program (PRP).
Many active duty victims told the Task Force they wish they had never disclosed their abuse because the disclosure damaged their military careers. It is the Task Force position that there is no need for disclosure by the victim advocate for purposes of a fitness for duty evaluation. If a command has concern about a service member’s performance or mental health, a fitness for duty evaluation can be done quite adequately without breaching confidentiality.

The Task Force understands that the nondisclosure policy creates a risk that commanding officers and victim advocates will be faulted if a victim suffers severe harm or death while the victim advocate was in possession of relevant but undisclosed information before the event. This mirrors the situation that currently exists in the relationship between military mental health providers and their patients. The Task Force believes this risk is justified by the merits of the philosophy underlying the creation of this policy, which supports the long-term goal of encouraging earlier reporting by victims which will provide more information to commanding officers and result in fewer and less severe instances of domestic violence. Higher level commanding officers and policy makers will need to support installation level commanding officers and victim advocates in those instances where, despite the intention behind the nondisclosure policy, a domestic violence incident occurs.

Concern has been expressed regarding the need to limit the number of sessions a victim of domestic violence can have with a victim advocate before a report is made to the Family Advocacy Program (FAP) and command. It is important not to compromise the ability of victim advocates to provide information and support by setting an arbitrary number of events or sessions that undermines the effectiveness of the nondisclosure policy. It is the Task Force position that the issue isn’t “how many times” but is there consent or is there imminent danger? The exceptions to nondisclosure are outlined in the policy. Therefore, there is no need for an arbitrary number of events or visits to trigger disclosure by a victim advocate. The number of visits by the victim is irrelevant to the issue of disclosure.

Findings

The Task Force specifically discussed where nondisclosure should be provided in the system and decided that victim advocates were the logical choice since they are the only ones in the system who work specifically for the best interests of the victims. There was discussion about the possibility of expanding the nondisclosure policy to include other groups such as FAP clinicians and medical. The Task Force made a very conscious decision to limit nondisclosure to victim advocates because it felt it was better to initially limit...
nondisclosure and evaluate the outcome of this change in the system before expanding it to include other groups. It is important to identify and address any unintended consequences before expanding the policy.

The effectiveness of the nondisclosure policy hinges on the effectiveness of victim advocates. Currently, there are a limited number of victim advocates throughout the DoD. The Task Force has heard concern about the capability of victim advocates to assess imminent danger and make decisions about when a situation fits one of the exceptions to nondisclosure. The Task Force has had many discussions regarding the educational level, supervision, training, and status and location of victim advocates.

Ultimately, it is the Task Force position that the most important thing is for the DoD to ensure that the Services have a Victim Advocate Program that is clearly defined, well resourced, and has a nondisclosure policy that will lend credibility to DoD’s wishes to better protect and serve victims of domestic violence. Details of how a Victim Advocate Program should work are provided in Section III, Chapter 1, Issue 1.A, Victim Advocate Protocol, page 25 of this report. In addition, the Victim Advocate Protocol elaborates on the roles and responsibilities of the victim advocate.

There are a number of Privacy Act considerations that need to be addressed such as record keeping, third party access to records, electronic records, etc. These are clearly issues that need to be resolved but do not need to be reflected in the policy itself. In addition, institutional administrative procedures need to be addressed to ensure anonymous access as intended by the nondisclosure policy. For example, if a victim is required to fill out paperwork with identifying data prior to receiving services as is currently the procedure, then that negates the intent of nondisclosure. These are the kind of details that need to be worked out in the implementation of the policy.

**Recommendations**

That the DoD –

- Adopt and widely disseminate the attached nondisclosure policy.
- Develop policy guidance on victim advocate record-keeping.
- Address Privacy Act issues in the implementation process.
Domestic Violence Nondisclosure Policy

1 General: Domestic violence is a pervasive problem. It destroys individuals, ruins families, and weakens communities. In doing so, it weakens individual and unit readiness and is detrimental to mission accomplishment. Prevention of domestic violence is in the best interest of the Department of Defense and the individuals involved. Encouraging victims to come forward for assistance will result in early intervention.

2 Objective: The objective of this policy, protecting communications between a victim of domestic violence and a victim advocate, is to encourage victims to come forward and seek available services and assistance. This will enhance victim safety and will encourage voluntary reporting of incidents of domestic violence that may not otherwise be reported.

3 Definitions
   a Domestic Violence is:
      
      When approved, the DoD definition of domestic violence should be inserted here.

   b Victim Advocate: An employee of the Department of Defense, or a contracted civilian working for the Department of Defense whose assigned role is to assist victims of domestic violence in securing crisis and long-term services and assistance.

   c Covered Communication: Any oral or written communication between a victim advocate and a person who may be a victim of domestic violence that relates to conduct that may constitute domestic violence. Covered communications include both actual communications and records relating to such communications (including statements, notations or reports) but do not include statistical data with no identifying information.

   d Reasonable Belief. A belief is reasonable if, based on the totality of circumstances, it would cause a reasonable person in the same or similar position to hold the same belief.

4 Policy
   a Nondisclosure of Covered Communications: In order to ensure victim awareness and safety, and to encourage reporting of domestic violence, a victim advocate, subject to the exceptions enumerated in section 4(b), may not disclose covered communications to any individual, agency or entity, either within or outside the Department of Defense. All other personnel are prohibited from requesting such information from a victim advocate.
b Exceptions: A victim advocate may disclose a covered communication only if, and to the extent that:

i The victim approves release of the covered communication.

ii The victim advocate reasonably believes that the victim or another is in imminent danger of life-threatening physical harm.

iii Disclosure is made to the victim advocate’s immediate supervisor in the context of supervision, as long as no identifying information is provided.

iv Disclosure is ordered by a military court in connection with the adjudication of the offense that is the subject of the covered communication.

v Disclosure is ordered by a court of competent jurisdiction, or is required by applicable federal or state statute.

c Victim Notification: A victim must be provided a written explanation of the parameters of the nondisclosure policy and must sign a statement of acknowledgement. If the victim elects to waive the nondisclosure policy, the waiver must be in writing, describing the information that may be released by the victim advocate. If the victim advocate determines that disclosure is warranted pursuant to one of the other exceptions to the nondisclosure policy, the victim advocate must, to the greatest extent possible, provide the victim advance notice of an intention to disclose a covered communication, with a description of the information to be disclosed and the individual, group or agency to whom it will be disclosed.

5 Legal Effect

a Violations of nondisclosure policy: Improper disclosure of covered communications and other violations of this policy may result in loss of credentials, discipline pursuant to the Uniform Code of Military Justice, or adverse personnel actions.

b Impact on domestic violence offender and victim: This policy does not create any actionable rights in the alleged offender or the victim, or constitute a grant of immunity for any actionable conduct by the offender. Covered communications that have been disclosed may be used in disciplinary proceedings against the offender, even if such communications were improperly disclosed.

c Interpretation: All situations that may arise in applying this policy cannot be foreseen. Situations that require the interpretation of the policy should be resolved in a manner that is consistent with the objectives of the policy after consulting with servicing legal counsel.
SECTION III, CHAPTER 4
Prevention of Domestic Violence

DISCUSSION

The Department of Defense (DoD) should address the prevention of domestic violence in a more aggressive manner.

Background

In its first two reports, the recommendations made by the Defense Task Force on Domestic Violence (DTFDV) have focused primarily on intervention after an incident of domestic violence has occurred. Most of the recommendations related to prevention of domestic violence have addressed education and training, both general awareness of domestic violence for the total population and specialized training for various groups in the system who come into contact with both victims and offenders. This training of the total population is considered primary prevention (prevention of a problem before it begins) and thus, those recommendations should be seen as an important part of the prevention recommendations.

The Task Force has made recommendations regarding education and training in the following areas and with the following groups:

Initial Report (February 28, 2001)

- Commanding Officer and Senior Noncommissioned Officer Training (Issues 2.A and 2.B, page 31 and 34)
- Military Justice Training (Issue 2.C, page 37)
- Awareness of the Lautenberg Amendment (Issue 2.D, page 41)
- Healthcare Personnel Response to Domestic Violence (Issue 2.E, page 43)
- New Parent Support Program Nurses (Issue 2.E)
- Setting the Climate for the Effective Prevention of Domestic Violence (Issue 2.F, page 45)
- Transitional Compensation Program Awareness (Issue 2.G, page 47)

Second Report (February 2002): In the second report, the Task Force elaborated on many of the above recommendations and added the following education and training recommendations:

- Setting the Climate for the Effective Prevention of Domestic Violence Through a General Awareness Campaign (Issue 2.C, page 58)
- Standardize Education and Training Programs for Chaplains (Issue 2.D, page 63)
- Forensic Medical Training on Domestic Violence for Healthcare Personnel in the First Responder Role (Issue 2.E, page 69)
Prevention of domestic violence is a critical component of any domestic violence program with specific resources committed to this goal. The Services provide a variety of programs aimed at preventing domestic violence, many focusing on enhancing the healthy functioning of couples and families. Other programs provide home visitation and intervention for situations considered to be high risk for domestic violence. There are also efforts to provide some level of domestic violence education and training to commanders, senior enlisted personnel, legal personnel, chaplains, and first responders such as law enforcement and medical. It is important to teach domestic violence prevention strategies to all professionals throughout the DoD system.

Although prevention of domestic violence is a very worthwhile goal, there is little data in either the civilian or military literature to answer the question what really works to prevent domestic violence. The DoD sponsored a Symposium on Domestic Violence Prevention Research in May 2002 to develop research recommendations for the DoD that would perhaps provide data that will help to answer that question. Several DTFDV members attended that symposium along with nationally recognized researchers on domestic violence.

The Symposium identified multiple research recommendations but narrowed it down to the following top three research recommendations:

▸ A general education campaign and evaluation study to find effective ways to engage military men in preventing domestic violence and to evaluate the effectiveness of that campaign.

▸ A longitudinal study of screening and intervention in the medical setting as a secondary prevention strategy (intervention for risk factors or with at risk groups for the healthcare problem or when the problem first begins and prevention of escalation). This study will evaluate outcomes for women experiencing domestic violence who receive intervention in medical settings versus the usual medical care only. No clinical trial data currently exist to show that identification and intervention in the medical setting is effective in the prevention of domestic violence, although there are many other indications that this strategy could be effective.

▸ A study to determine if prevention and intervention programs that target risk factors for partner violence can decrease partner violence. The rationale of this study is to help determine how existing programs (e.g., parent education, substance abuse, mental health, stress management, communication, financial management, etc.) impact domestic violence, especially if components that specifically address domestic violence are added.

The entire report for the Symposium can be found at the following web site: http://mfrc.calib.com/domestic_violence. From the home page, simply click on the “DoD Messages” link to access the files.
Analysis

In the absence of a body of definitive data regarding prevention of domestic violence, what makes sense for the DoD to do in terms of committing resources to prevention versus intervention? What is known about prevention in general?

The public health model is one well-known and accepted method of addressing prevention that can be applied to a variety of areas impacting people’s lives. This model includes primary, secondary, and tertiary prevention. Primary prevention targets the general population and includes such efforts as public education campaigns. The goal of primary prevention is to reduce the incidence of the problem before it occurs. Another goal is to affect attitudes, beliefs, and behavior through individual, societal/cultural, and institutional change, which can in turn prevent the health problem.

Secondary prevention focuses on decreasing the prevalence or preventing escalation after early signs of the problem are evident and targets both the general population and high-risk groups. Early identification and intervention are aspects of secondary prevention.

Tertiary prevention provides intervention once the problem is already clearly evident and is causing harm and focuses on preventing reoccurrence, preventing death, disability and more serious harm from the problem, and decreasing severity.

The public health model can easily be applied to domestic violence given that there is a continuum of risk and identifiable target populations just as there are with other public health concerns.

Findings

Following the Symposium on Domestic Violence Prevention Research in May 2002, the Task Force developed the attached Domestic Violence Prevention Conceptual Model. This model is based on the public health prevention model but is focused on domestic violence. It is intended as a graphic representation of the continuum of risk, examples of target populations, and examples of possible tools to be used to prevent domestic violence. It is not intended to be an all-inclusive list of tools, actions, and programs to prevent domestic violence.

Primary prevention in the Conceptual Model focuses on the general population and includes tools designed to prevent domestic violence before it occurs the first time. There must be ongoing statements from top DoD and Service leaders communicating domestic violence will not be tolerated in the military. These statements should also come from commanding officers, instructors, and cadet/midshipmen leaders at the Military Academies, as well as in the Reserve Officer Training Corps (ROTC) program. These public statements significantly impact the tolerance of domestic violence in our military communities. The toolkit for primary prevention includes such activities as dating violence prevention programs in DoD schools and public service campaigns.
In addition, in Issue 2.C, page 58 of the Second Year Report, “Setting the Climate for Effective Prevention of Domestic Violence Through a General Awareness Campaign,” the Task Force provided a comprehensive list of recommendations that would ensure and institutionalize an ongoing primary prevention mechanism for increasing awareness and prevention of domestic violence with a multitude of populations throughout the DoD.

This general awareness campaign should also include marketing of victim advocates to ensure that everyone knows that victim advocates are available and defines the services that they provide.

In the Conceptual Model, secondary prevention focuses on groups considered to be at risk for domestic violence victimization and/or perpetration. The tools in this section are targeted to address the needs of these at risk populations and include such things as routine screening for domestic violence in healthcare settings, New Parent Support Programs (NPSP) with screening for and specific content on domestic violence, programs for children who witness violence, and couples counseling. A word of caution is necessary in relation to using couples counseling with these groups. It is not recommended that couples counseling be used when an incident of violence has already occurred or when the dynamics are such that it would be unsafe for either party.

Within the secondary prevention section of the Conceptual Model, a red line denotes a line of demarcation where there is a dividing line between at risk situations where no violence has yet occurred and situations where there has been a first incident of violence. This crosses over into situations where there is low risk for reoccurrence and lethality and low dangerousness. The Task Force feels very strongly that there must be a way to provide services in these low risk situations that does not over-react or under-react but provides a measured response based on the elements of a particular case.

As an example, the Navy has a case category called Family in Need of Service (FINS). These are not opened as Family Advocacy Program (FAP) cases. A FINS case is one that may include very minor bruising and superficial scratches, but is more likely a situation where there is no visible injury and no threats of serious harm. For example, an incident occurs and there was no dangerous act, no imminent risk of harm, no weapon, no threats of harm, no significant abuse related harm, no failure to meet basic needs and no other safety factors of note; however, visible minor injuries are present or there has been some physical violence (e.g., pushing or shoving) where no injury resulted. This situation requires a response but may, in some circumstances, be a suitable case for the FINS category. In addition to the above criteria, the use of power and control tactics should be considered in determining if a case is appropriate for a FINS determination. A description of power and control tactics can be found on the Power and Control Wheel, Attachment 1 to the Offender Intervention Protocol, Section III, Chapter 1, Issue 1.D, page 111 of this report.

In the Navy, some level of risk assessment is done and if the overall level of risk is determined to be moderately low (or preferably even lower), and a clinical/administrative decision is made not to open the case, a FINS classification may be made. The Case Review
Committee reviews each FINS determination for quality assurance. In FINS cases, services are offered, but participation is voluntary. Some cases may be referred several times for alleged abuse and be classified as FINS. The Navy has no formula to determine how many incidents previously categorized as FINS cases equal a FAP case. The worker must consider all available information (type of information contained in the report, patterns of abuse present, history of abuse etc.) with each new referral and apply professional judgment to determine the best approach for the case. The Task Force would rather see some ceiling placed on the number of times a FINS determination can be made before a FAP cases is opened.

In the Conceptual Model, First Offense Programs included in the toolkit under secondary prevention are intended to capture cases like the Navy FINS.

The Conceptual Model moves upward into low, moderate, and high risk for reoccurrence and lethality and dangerousness. As this gradation increases, the model moves into tertiary prevention where the goal is to prevent reoccurrence, decrease severity, prevent domestic violence homicides, prevent chronic health problems as a result of domestic violence, and prevent problems in children who witness domestic violence.

The toolkit to address increasing risk includes a continuum of interventions aimed at assessing risk and danger, safety planning, victim advocacy, offender intervention and accountability and intervention with children who witness domestic violence. As risk increases, command actions to hold offenders accountable increase in severity with the ultimate action being to separate an offender from the military.

**Recommendations**

That the DoD –

- Adopt the attached Domestic Violence Prevention Conceptual Model, page 132, for developing a continuum of domestic violence prevention services that emphasizes strong and healthy families and relationships.

- Develop a joint Service effort for standardizing a DoD Domestic Violence Prevention Program that includes a commitment of specific resources.

- Develop a policy for handling low risk for violence cases similar to the Navy FINS category.

- Partner with civilian agencies such as the National Institute of Justice and the Centers for Disease Control and Prevention and ensure joint Service involvement in pursuing the research recommendations from the 2002 DoD Symposium on Domestic Violence Prevention Research.

- Encourage commanding officers at every level of command to assert and reinforce, in briefings, public addresses to service members, and other opportune times in an ongoing fashion, that domestic violence hurts morale, negatively impacts readiness, and is inconsistent with the core values of the U.S. Military.

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1 Bureau of Naval Personnel ltr 1752 Ser 661/00718 of Aug 5, 1997, Guidance for Family in Need of Service (FINS) Cases
Defense Task Force on Domestic Violence
– 2003 Third Year Report

Groups at Risk

High Risk**
- Substance Abuse
- Couples with Problems
- Child Abuse History
- Pregnant Women
- History of Violence Against Anyone

Moderate Risk**
- ADM w/PTSD
- Child Witnesses
- Immigrant Spouses
- Controlling Spouses

Low Risk**
- Couples Counseling
- Targeted Programs
- New Parent Support
- Child Witness Programs
- Health Care Screening

Primary Prevention

Secondary Prevention

Tertiary Prevention

Everyone

Toolkit*

- Separate from Military and/or Disciplinary Action As Appropriate
- Urgent Danger Assessment & Safety Planning

- Risk & Danger Assessment
- Safety Planning
- Victim Advocacy
- FAP Assessment
- Offender Intervention Program
- Administrative and/or Disciplinary Action As Appropriate
- Child Witness Program

- First Offense Programs

* Not all inclusive

** Risk for reoccurrence and danger/lethality
SECTION III, CHAPTER 5

Severity of Abuse

DISCUSSION

The Department of Defense (DoD) should discontinue collecting and reporting severity level data.

Background

The DoD and each of the Service Family Advocacy Program (FAP) directives define the levels of severity to be reported to the Central Registry.

The DoD FAP issued a policy memorandum in August 1997 that defined the levels of severity as part of the “Definitions of Terms for Child and Spouse Abuse Incident Reports.”

- **Severe** physical abuse is defined as, “Major physical injury requiring inpatient medical treatment or causing temporary or permanent disability or disfigurement. Moderate or severe emotional effects that require long-term mental health treatment. May require placement in an alternative environment to protect the physical safety or other welfare of the victim.”

- **Moderate** physical abuse is defined as, “Minor or moderate physical injury requiring one or more outpatient visits for treatment. Minor or moderate emotional effects requiring short-term mental health treatment may be indicated.”

- **Mild** physical abuse is defined as, “Minor physical injury, but no readily apparent physical or emotional harm. Outpatient medical examination and/or mental health assessment may be indicated but no treatment is required.”

The Army uses the DoD definitions for reporting incidents to the Central Registry. In addition, the Army Regulation 608-18 supplements the DoD definitions as follows:

- **Severe** physical abuse is defined as any injury during pregnancy; spouse choked or strangled, severely beaten (hit, kicked, etc., numerous times), threatened with knife or gun, cut with knife or shot at; battered spouse syndrome (to include emotional abuse and intimidation); spouse threatened or hit with a motor vehicle; spouse sexually abused; major physical injury or long-term medical treatment, inpatient care or move to alternate environment for the safety of the spouse.

- **Moderate** physical abuse is defined as something thrown at spouse, pushed, grabbed or shoved, slapped, kicked, bit or hit with a fist (once or twice), and minor or major physical injury; short-term medical treatment (one visit) may be indicated.

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1 DoD Policy Memorandum, Aug 97
Mild spouse abuse is when a spouse is verbally threatened and mild physical injury or no medical treatment indicated.\textsuperscript{2}

The Navy uses the DoD definitions for reporting incidents to the Central Registry. In addition, the DoD severity definitions are reiterated in Navy FAP policy guidance.\textsuperscript{3}

The Air Force uses the DoD definitions for reporting incidents to the Central Registry. In addition, the Air Force FAP Standards include a table of Severity of Maltreatment. The definitions included in this table are an abbreviated version of the DoD severity definitions.\textsuperscript{4}

The Marine Corps uses the DoD definitions for reporting incidents to the Central Registry. However, the Marine Corps also has a matrix that is used by the Case Review Committee (CRC) to determine level of risk for each case they review. This matrix has 5 levels. Each level defines in detail the abuse, levels of response or command intervention, levels of rehabilitation, and intent of command action and rehabilitation. In terms of severity, levels 1 and 2 are mild, level 3 is moderate, and levels 4 and 5 are severe.\textsuperscript{5}

The Task Force visited installations in both the continental United States (CONUS) and overseas (OCONUS) and observed CRC meetings conducted by each of the Services. In addition, staff reviewed case records at visited installations. It was apparent that numerous case determinations were defined as mild or moderate because the victim did not require medical care and/or was not hospitalized. This concerned Task Force members and staff because the level of severity assigned to a case impacts the level of intervention and command response. If a case is viewed as mild or moderate, the violence is minimized and the perception is that the threat of future harm or lethality is lower.

Based on staff review of records, observations of CRC sessions, and discussions with various personnel involved in responding to domestic violence, Task Force members concluded that the severity of DoD domestic violence cases is often misrepresented in the statistics based on the current severity definitions used for reporting.

Analysis

Best practice in the civilian community focuses on risk assessment and whether a crime has been committed at the misdemeanor or felony level. Labeling the level of severity of a domestic violence incident is not a common practice outside of DoD. The clinical and support agencies that provide services for victims and treatment for offenders do not label an incident to be mild, moderate, or severe. They do risk assessments to determine risk for future abuse and lethality assessments to determine the probability that the abuse could result in death.

\textsuperscript{2}Army Regulation (AR) 608-18, p.40, Section VIII, Sep 95
\textsuperscript{3}Navy Personnel Command, NPC-66 Policy Memo, 18 Nov 98
\textsuperscript{4}Air Force Family Advocacy Program Standard, M-12, Jul 98
\textsuperscript{5}Marine Corps Spouse Abuse Matrix, NAVMC 2930
The danger/lethality assessment must be conducted immediately. It assesses risk for something catastrophic to happen. The best source of information is the victim, but information is also obtained from the offender and children. The danger/lethality assessment is done by law enforcement to guide law enforcement and command action. This information should be shared with the victim advocate. Victim advocates do a danger/lethality assessment to develop a safety plan. The FAP personnel do a danger/lethality assessment to develop a safety plan and guide intervention decisions. Offender intervention personnel do a danger/lethality assessment to guide intervention decisions.

A risk assessment takes place over time and is ongoing. It helps determine risk for reoccurrence and provides a complete picture. Information is obtained from the victim, offender, and children. However, it also includes a background check for prior offenses and addresses the offender’s mental status. A risk assessment is done with the offender upon referral to FAP. It will help determine the risk for re-assault. FAP staff can conduct risk assessment with the victim if the victim chooses to be seen at FAP.

A safety assessment is done with the victim immediately and is frequently updated. It is done by the victim advocate to develop a safety plan. It helps the victim identify a plan that enhances safety factors. It is done by FAP personnel (if the victim chooses to be seen at FAP) to develop a safety plan and inform intervention decisions.

In the DoD, the assignment of a severity level is primarily for reporting to the central registry database. Although the Services have matrices that provide guidelines for the CRC case disposition and intervention recommendations in domestic violence cases, the level of severity often does not seem to make a difference in the intervention recommended or actions taken by command. This practice unintentionally enables DoD to minimize the gravity of domestic violence.

Findings

- There are relatively few severe cases reported to the Central Registry. Statistics reported by the DoD FAP for FY 1999 reflect that the majority of the domestic violence cases in the DoD are mild (69%) and only 6% are severe.

- The DoD severity definitions are inconsistent with commonly held characterizations of domestic violence. A DoD prerequisite to be categorized as a severe physical abuse is major physical injury requiring inpatient medical treatment or causing temporary or permanent disability or disfigurement. A strangulation case in the civilian community is considered very dangerous whereas in DoD it might be defined to be mild or moderate abuse.

- The assignment of a severity level using current DoD definitions skew the data in the Central Registry making it appear that the DoD has few severe cases. This is misleading and contributes to the minimization of domestic violence in the DoD.
The assignment of a severity level does not appear to make a difference in the level of intervention recommended or in the level of command response.

The lack of clear differentiation between the levels of abuse is potentially dangerous, compromises victim safety, and interferes with holding offenders accountable.

Risk assessment data is much more valuable than is the severity level data. It is important that the DoD have a single risk assessment grid that could be revised as additional evidence about risk assessment is gathered. The grid would be used for determining a risk assessment score or level that would be easily communicated and could be used for records such as those kept in the Central Registry. The Navy has a risk assessment model that is currently being evaluated.

**Recommendations**

That the DoD—

- Ensure that commanding officers scrutinize all reported domestic violence incidents to determine if there was a violation of the UCMJ.
- Ensure that the Services conduct timely risk and lethality assessments, separate from the criminal investigation, that are used to determine the appropriate level of intervention and command response in every incident of domestic violence.
- Ensure that there is one single DoD risk assessment grid.
- Ensure that the Services establish a mechanism for tracking and easily retrieving risk assessment data pre and post intervention services.
- Discontinue collecting and reporting severity level data.
SECTION III, CHAPTER 6

FATALITY REVIEWS

Discussion


Background

The DTFDV discovered in its first year that the Department of Defense (DoD) does not routinely review domestic violence fatalities as part of its overall strategy for responding to domestic violence. The DoD has yet to embrace this relatively new concept of distilling teaching points and lessons learned from reviews of domestic violence homicides and suicides as a means of decreasing the risks of future fatal outcomes.

Fatality reviews are considered an efficient mechanism for periodically reviewing domestic violence policies and case management practices that may inadvertently contribute to the death of a victim, family member, other third party, or offender. They are typically conducted after the relevant investigations and court trials have ended, thus enabling them to be informed by those events. Lag times can sometimes stretch to two years or more, however, 12-18 months is more often the norm. The concept involves a team of individuals or representatives from agencies that routinely deal with domestic violence meeting regularly to confidentially review victim and offender homicides and suicides for purposes of:

- Formulating lessons learned from agency and/or system failures without blaming participating agencies.
- Identifying trends and patterns that assist in developing policy recommendations for earlier and more effective intervention.
- Fostering better communication and cooperation among participating agencies.

The DTFDV previously recommended that the DoD develop guidance for establishing formal and informal fatality reviews, and produced sample documents intended to make a domestic violence fatality review team operational within the DoD. As part of its preparation for the current report, the DTFDV examined varying approaches to implementing fatality reviews...
reviews in consultation with the National Domestic Violence Fatality Review Initiative, a project of the Office on Violence Against Women, Department of Justice.

Final DTFDV recommendations reflect a desire for proportional sharing of different aspects of the fatality review process among installations, Service headquarters elements, and the DoD. Fifty domestic violence deaths a year in the DoD do not justify every military installation standing up its own team, nor do they justify having the Services cede control of their reviews to the DoD. That said, Service control should not preclude reciprocal arrangements between installations and their neighboring civilian jurisdictions, nor should it preclude DoD from taking the lead in addressing system policy changes that are not generic to any particular Service.

**Recommendations**

That the DoD –

- Institute an annual DoD domestic violence fatality review summit to address system change recommendations that will increase victim safety and decrease domestic homicides.

- Instruct the Services to establish, train, and maintain on-call multidisciplinary headquarters level domestic violence fatality review teams that conduct reviews and provide technical assistance as needed.

- Instruct military installation commanding officers to include domestic violence fatality review provisions in their domestic violence memoranda of agreement with neighboring civilian jurisdictions that call for reciprocal participation in reviews as cases warrant.

- Conduct fatality reviews in accordance with guidance provided in the DTFDV Initial Report, pages 57-58 and in the Second Year Report, pages 82-88. To the extent possible, teams should be composed of individuals and representatives of relevant agencies that routinely encounter domestic violence victims and offenders (i.e., prevention/intervention service providers, advocates, prosecutors, law enforcement personnel, judges, probation/parole officers, forensic experts, medical/mental health personnel, shelter personnel, intimate partner homicide experts, etc.).
SECTION III, CHAPTER 7

Commanding Officer and Senior Enlisted Training

DISCUSSION

This is a continuation of Issue 2.A, Improve Commanding Officer and Senior Noncommissioned Officer Training, from the Second Year Report, page 50 of the Defense Task Force on Domestic Violence (DTFDV).

Background

In the Second Year Report, the Education and Training Workgroup provided a recommended domestic violence training outline for commanding officers and key-billeted senior noncommissioned officers (SNCOs). The intent of the outline was to provide DoD the essential subject areas to use to develop a standard state-of-the-art curriculum for commanding officers and key-billeted SNCOs.

In an effort to continue to move this issue forward, the DTFDV hosted a joint Service workshop of curriculum developers and family advocacy subject matter experts. The goals of this meeting were to prioritize/sequence essential subject areas, identify parameters for training development, and provide a recommended training development action plan for DoD.

Analysis

The workshop participants reviewed the training outline from the Second Year Report for the purposes of prioritization and sequencing of essential subject areas. The suggested prioritization and sequencing is as follows:

- DoD/Service Policy
- Dynamics of Domestic Violence
- Roles and Responsibilities of Commanding Officers/Key-Billeted SNCOs
- Family Advocacy Program Overview
- Transitional Compensation
- Resources on the Installation and in the Local Community
- Accountability

The participants agreed that it is critical for commanding officers to understand the impact of domestic violence on readiness in order to get buy-in that domestic violence training is a mission essential task. The participants agreed with the essential subject areas
from the Second Year Report. However, they did recommend integrating *Victim Safety* and *Initial Response* into one topic entitled the *Roles and Responsibilities of the Commanding Officer/Key-Billeted SNCOs*. It was felt that this change makes it very clear that the commanding officer is actively involved in the initial response to domestic violence that includes taking actions to ensure the safety of the victim and emphasizes command accountability for both action and inaction.

Commanding officers and key-billeted SNCOs are felt to be in excellent positions to encourage subordinates and families to seek information and assistance at the earliest indication of need. There was consensus that commanding officers at all levels of command would benefit from domestic violence training as command responsibilities vary at different levels. For example, the participants felt the training should target unit-level commanding officers who are most directly involved with service members. However, they feel that installation commanding officers must also receive domestic violence training since housing, law enforcement, the Family Advocacy Program (FAP), prevention programs, etc. usually come under their purview. They are also responsible for ensuring that there is collaboration among military agencies/programs as well as between the military and civilian communities. Installation commanding officers are key players in both preventing domestic violence as well as ensuring a timely and effective response to domestic violence when an incident does occur.

The participants also agreed that commanding officers do not need to become domestic violence subject matter experts. However, commanding officers and key senior enlisted leaders do need to have a basic understanding of what domestic violence is, what their roles and responsibilities are in responding to domestic violence, and what resources are available to them both on and off the installation.

With the commanding officer having such a pivotal role in responding to domestic violence in the DoD, the participants emphasized the importance of identifying appropriate competencies of knowledge, skills and personal mastery based on level of command. Commanding officers and key senior enlisted advisors normally seek the input of subject matter experts such as legal, law enforcement or family advocacy, but may not always be aware of the risks to command for failing to respond appropriately to cases of domestic violence.

There was also discussion concerning the definition of training. Should the training be military training or military education? Navy publication, *Naval Post Graduate Journal*, defined military training as “a learning activity of a relatively narrow, technical, and immediately utilitarian nature which is uniformly undertaken by large numbers of individuals or groups.” This definition differs from designing training under a military education platform. Military education is defined as “a learning activity in recognized fields of academic endeavor, at some level of abstraction, engaged in by individuals in a formal manner, and not necessarily designed for direct and immediate utility.”

Commanding Officer and Senior Enlisted Training

experts indicated that they use both methods of training when introducing new commanding officers to the FAP and the complex criminal and socially damaging behavior of child abuse and domestic violence.

The curriculum developers cited within DoD's training community that there are required training development elements for both institutional and installation training. Although, DoD Directive 1322.18 establishes common elements and procedures for training development, the workshop participants confirmed that each Service implements DoD Directive 1322.18 to meet their unique training requirements.2

Most participants would like to see Computer Based Training (CBT) as one platform for training. DoD Directive 1322.18 encourages CBT for three reasons:

- Cost efficient
- Content standardized
- Minimal portals to make upgrades/changes

However, it is important to have more than one platform for training. Instructor based training provides an opportunity for face-to-face interaction and dialogue with peers. Initial training should be face-to-face and interactive. Computer based training (CBT) works well for follow-on training.

It is important to note that all Service regulations, as well as DoD Instruction 1322.18 require terminal learning objectives be identified before instructional programs can be generated. Terminal learning objectives will describe what level of measurable knowledge the commanding officer/senior enlisted leaders must have in order to perform a specific task.

The participants, especially the curriculum developers, voiced concern that DoD needs to provide written direction to each Service training/education command directing domestic violence training for commanding officers and key senior enlisted. All agreed Service training/education commands need specific guidance to establish curriculums.

Findings

- There is no current use of Computer Based Training as prescribed in DoD Instruction 1322.18 for domestic violence training.
- There needs to be standardization of instruction for institutional and on-the-job training.
- The original outline from the DTFDV Second Year Report reflected “Victim Safety” as a stand-alone subject that was not linked to the roles and responsibilities of the commander.

2 DoD Directive 1322.18, 9 Jan 1987, “Military Training”
Commanding officers and key senior enlisted advisors are not always aware of the risks to command for failing to respond appropriately to cases of domestic violence.

Service FAP units currently develop and present domestic violence training as military education.

Service implementation of DoD Directive 1322.18 varies to meet unique training requirements.

Service regulations, as well as DoD Instruction 1322.18, require terminal learning objectives be identified before instructional programs can be generated.

Service training/education commands have no specific guidance to establish domestic violence curriculums.

Commanding officers at various levels of command receive domestic violence training from the local FAP.

**Recommendations**

That the DoD –

- Ensure the Services provide written guidance to their respective training/education commands requiring that domestic violence be added to commanding officer and senior enlisted training curriculums at institutional and on-the-job training settings.

- Select, in collaboration with Military Service training/education communities, standardized delivery models (face-to-face/interactive for initial training with CBT for follow-on instruction) for commanding officer and key-billeted SNCO training.

- Seek partnerships among organizations with experience in developing domestic violence prevention and education programs, OSD FAP staff, Service Family Advocacy Program Managers, victim advocates, and Service curriculum developers to develop a state-of-the-art training curriculum for commanding officer and key senior enlisted at institutional and on-the-job training settings using the outline of essential subject areas provided by the DTFDV on pages 53-55 of DTFDV Second Year Report.
SECTION III, CHAPTER 8
Chaplain Training

DISCUSSION

This is a continuation of Issue 2.D, Standardize Education and Training Programs for Chaplains, from the Second Year Report, page 63 of the Defense Task Force on Domestic Violence (DTFDV).

Background

In the Second Year Report, the Task Force recommended that the DoD (1) develop a DoD policy on clergy confidentiality and (2) in collaboration with the Military Services’ chaplain working group and the DTFDV develop a standardized template of essential domestic violence training to be included in all chaplain basic officer courses. In its response to the Second Year Report, the DoD agreed with both recommendations.

In order to facilitate implementation of these recommendations, a meeting was held with Task Force Members, military chaplains, and civilian clergy to identify and shape the basic framework of a curriculum outline and recommend this outline to DoD for curriculum development.

Findings

There is a need for improved and specialized training to help chaplains identify signs of domestic violence and understand their role in supporting the victim and holding the offender accountable. The chaplain working group supported increased domestic violence training for chaplains and the standardization of curriculum and joint Service training. This would allow for collaboration between the Services and DoD for training development and allocation of resources, both money and manpower.

Recommendations

That the DoD –

- Develop a standard DoD policy on clergy confidentiality, especially as it pertains to domestic violence. The Armed Forces Chaplain Board (AFCB) should be engaged to develop this policy.

- Develop, in cooperation with Military Services chaplains’ working group, the AFCB, and private sector subject matter experts, a standardized domestic violence curriculum for chaplain training using the attached outline. Training should be conducted at chaplain officer basic courses and at all continuing professional military education opportunities. Initially, DoD should consider the formation of a joint Service mobile training team(s) to conduct regional, train-the-trainer type instruction to promulgate the training to all active duty chaplains as quickly as possible.
Domestic Violence Training Outline for Chaplains

I. Dynamics of Domestic Violence
   A. What is domestic violence?
   B. Patterns of behaviors
      – Physical
      – Sexual
      – Psychological
   C. Tactics of abusers
      – Economics
      – Children
      – Coercion and threats
      – Intimidation and Isolation
   D. Cultural issues of domestic violence

II. DoD/Service Policy

III. Victim Safety
   A. Needs of victims
   B. Victim safety plan
   C. Victim advocates
   D. Commanding officer responsibilities
   E. Chaplain responsibilities
   F. Transitional compensation
   G. Particular needs of immigrant victims

IV. Effective Offender Intervention
   A. Intervention specialists’ responsibilities
   B. Commanding officer responsibilities
   C. Chaplain responsibilities

V. Family Advocacy Program Overview
   A. Collaborative role

VI. Privilege and Confidentiality

VII. Spirituality and Domestic Violence

VIII. Resource Support
   A. Handouts
      – Listing of chaplains with expertise in dealing with domestic violence
      – Listing of supportive clergy in local area

IX. Statistics (for reference purposes only)
APPENDIX A

Report Recommendations/Response/Status Matrix
APENDIX A

Report Recommendations/Response/Status Matrix

OVERVIEW

At Enclosure 1 is a matrix, page 148, that shows the recommendations of the Task Force from all three annual reports. It also contains the DoD response to the recommendations from the Initial Report and the Second Year Report as well as the status of implementation of each recommendation as known by the Task Force at the time of publication of this report. The matrix is divided into three sections, one for each annual report and is organized in sequential order by issue number. Each recommendation block is numbered for identification purposes and most blocks contain multiple recommendations.

At Enclosure 2, page 170, is a listing of each Key Point and Core Principle of Intervention from the Strategic Plan as described in Section I, Executive Summary, of this report. Since each recommendation contributes to the overall efficacy of the Strategic Plan, the list at Enclosure 2 places each recommendation (by matrix number) under the appropriate Key Point and Core Principle. In some cases, recommendations appear under two or more Key Points and Core Principles.

Using the CD Rom:

- In the matrix at Enclosure 1, simply click in the recommendation block and you will be linked directly to the complete issue/recommendation as it appears in the Initial, Second, or Third Year Report.

- In the listing at Enclosure 2, simply click on the recommendation number and you will be linked directly to the appropriate location in the recommendation matrix. From there, you can further link to the complete issue/recommendation as it appears in the Initial, Second, or Third Year Report.
**Defense Task Force on Domestic Violence (DTFDV)**

**Summary of Annual Reports Recommendation/Response/Status Matrix**

<table>
<thead>
<tr>
<th>Recommendations</th>
<th>Location</th>
<th>DoD Response</th>
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<tbody>
<tr>
<td><strong>Initial Report – February 2001</strong></td>
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<tr>
<td>1. Issue 1.A – Community Collaboration Policies:</td>
<td>Initial Report, Page 21</td>
<td>DoD agrees with these recommendations, and requests that the DTFDV develop examples of such MOUs and guidance in cooperation with OSD and Service personnel. DoD proposes to amend DoDD 6400.1 to incorporate such MOUs and to require the DoD and Service IGs to make DV MOUs with local communities an item of special interest.</td>
<td>Continued in Second Year Report where we outlined essential items to be included in the MOUs. Provided copies of sample MOUs to OSD FAP.</td>
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<tr>
<td>Recommend DoD</td>
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<tr>
<td>(1) Amend DoDD 6400.1 to require installation/regional commanders to seek MOUs with local communities to address responses to DV;</td>
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<td>(2) Create an enclosure to DoDD 6400.1 that provides examples of MOUs and guidance in negotiating the creation and implementation of such memoranda;</td>
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<td>(3) Make DV MOUs with local communities an item of special interest for the DoD and Service IGs.</td>
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<td>2. Issue 1.B – Liaison with Civilian Community:</td>
<td>Initial Report, Page 23</td>
<td>DoD agreed that coordination of installations’ responses to DV should include local civilian community, noted that DoD would study the cost of establishing the position on major installations, and requested that the TF provide additional info on tasks and skills.</td>
<td>In Second Year Report on page 28, DTFDV provided a listing of suggested duties for the position of DV Response Coordinator.</td>
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<td>Recommend DoD</td>
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<td>establish and fund a DV Response Coordinator position at each major installation.</td>
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<td>Recommend DoD</td>
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<td>make violations of a valid civilian order of protection by a military member an offense under UCMJ and recommend Congress enact legislation making it a crime to disobey a civilian order of protection on federal property.</td>
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### Recommendations

#### 4. Issue 1.D – Military Protective Orders:

- **Recommend DoD**
  - (1) Use standard MPO;
  - (2) Require written MPO;
  - (3) Require copy to victim within 24 hours of issuance;
  - (4) Centrally record & track MPO;
  - (5) Require copies to FAP and installation MPs.

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<tr>
<td>4. Issue 1.D – Military Protective Orders: <strong>Recommend DoD</strong></td>
<td>Initial Report, Page 26</td>
<td>DoD concurred with first three and the last recommendation and agreed to amend DoDD 6400.1 accordingly. DoD asked to study the fourth recommendation further in coordination with the TF.</td>
<td>In Second Year Report on page 32, DTFDV provided a recommended standard MPO.</td>
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#### 5. Issue 2.A – Improve Commanding Officer Training:

- **Recommend DoD**
  - (1) Require initial training for commanding officers with annual refreshers;
  - (2) With DTFDV, develop standardized curricula.

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<tr>
<td>5. Issue 2.A – Improve Commanding Officer Training: <strong>Recommend DoD</strong></td>
<td>Initial Report, Page 31</td>
<td>DoD concurred with both recommendations and agreed to amend DoDD 6400.1 to include training content issues developed by DTFDV.</td>
<td>Consolidated with Issue 2.B from Initial Report. In Second Year Report on page 53, DTFDV provided a detailed outline of essential subject areas to be included in training.</td>
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#### 6. Issue 2.B – Standardize Education and Training Programs for Senior Noncommissioned Officers:

- **Recommend DoD**
  - (1) Require initial DV training for SNCOs in key billets with annual refreshers;
  - (2) With DTFDV, develop standardized curricula.

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<tr>
<td>6. Issue 2.B – Standardize Education and Training Programs for Senior Noncommissioned Officers: <strong>Recommend DoD</strong></td>
<td>Initial Report, Page 34</td>
<td>DoD concurred with both recommendations and agreed to amend DoDD 6400.1 to include training content issues developed by DTFDV.</td>
<td>Incorporated into Issue 2.A in Second Year Report. In Second Year Report on page 53, DTFDV provided a detailed outline of essential subject areas to be included in training.</td>
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#### 7. Issue 2.C – Military Criminal Justice Training:

- **Recommend DoD**
  - (1) Develop DV instruction for initial training of military police;
  - (2) Ensure local military police patrol officers receive DV training;
  - (3) Create DV mobile training teams for military police;
  - (4) Develop list of state-of-the-art DV equipment for military police;
  - (5) Initiate DV evidence-based training for SJAs.

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<tr>
<td>7. Issue 2.C – Military Criminal Justice Training: <strong>Recommend DoD</strong></td>
<td>Initial Report, Page 37</td>
<td>DoD concurred with first two recommendations and agreed to amend DoDD 6400.1 to include training content issues developed by DTFDV. DoD agreed to study cost of implementing third recommendation. DoD agreed to review existing investigative equipment requirements and prosecution training for SJA and to implement changes as appropriate.</td>
<td>Continued in Second Year Report as Issue 2.B</td>
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<td><strong>8. Issue 2.D – Awareness of Lautenberg Amendment:</strong> Recommend DoD, (1) Conduct Lautenberg awareness campaign; (2) Require annual Lautenberg awareness education.</td>
<td>Initial Report, Page 41</td>
<td>DoD concurred with both recommendations and agreed to amend DoDD 6400.1.</td>
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<td><strong>9. Issue 2.E – Healthcare Personnel Response to Domestic Violence:</strong> Recommend DoD, (1) With DTFDV develop DV awareness education for all healthcare staff; (2) Study adoption of indicator-based screening for DV; (3) Require initial DV training for NPSP nurses; (4) Request Congress fully fund NPSP.</td>
<td>Initial Report, Page 43</td>
<td>DoD concurred with first three recommendations and agreed to amend DoDD 6400.1 to include requiring initial DV training for all NPSP personnel not just nurses. DoD took no position on last recommendation.</td>
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<td><strong>10. Issue 2.F – Setting the Climate for Effective Prevention of Domestic Violence:</strong> Recommend DoD issue a policy memorandum regarding DV and with DTFDV, develop DV training for chaplains.</td>
<td>Initial Report, Page 45</td>
<td>DoD agreed to review current awareness and education training for chaplains and agreed to amend DoDD 6400.1 accordingly.</td>
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<td><strong>11. Issue 2.G – Transitional Compensation Program Awareness:</strong> Recommend DoD mandate TC awareness education for spouses. DTFDV Victim Safety Workgroup to continue to investigate the issue of TC.</td>
<td>Initial Report, Page 47</td>
<td>DoD concurred with recommendation as it pertained to the Department and agreed to amend DoDI 1342.24 and DoDD 6400.1 accordingly.</td>
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<td>12. Issue 3.A – Criminality: Recommend DoD, (1) Investigate every DV incident to determine if crime was committed; (2) Train law enforcement, legal, and command to collaborate on DV crime determination; (3) Develop guidelines for commanding officers in DV substantiation determinations.</td>
<td>Initial Report, Page 51</td>
<td>DoD agreed with first recommendation as it pertained to law enforcement first responders. DoD agreed to review current training in implementation of second recommendation and to amend DoDD 6400.1 accordingly. DoD agreed with third recommendation and pledged to implement consistent with UCMJ and MCM.</td>
<td>Continued in Second Year Report</td>
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<td>15. Issue 3.D – Case Management: Recommend DoD, (1) Require comprehensive, effective batterer intervention; (2) Develop criteria for differing interventions; (3) Develop criteria for risk/lethality assessments; (4) Develop criteria for success in offender behavior after intervention.</td>
<td>Initial Report, Page 55</td>
<td>DoD stated that it wanted to develop batterer invention and other intervention strategies and develop criteria for success with DTFDV. DoD stated that it wanted to review Service risk assessment procedures with the DTFDV.</td>
<td>Continued in Second Year Report as Issue 3.B</td>
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<td>16. Issue 3.E – Fatality Reviews: Recommend DoD, (1) Develop guidance for formal and informal fatality reviews; (2) Require results/system change recommendations to be done in timely manner.</td>
<td>Initial Report, Page 57</td>
<td>DoD concurred with recommendations and stated that guidance for fatality reviews should be developed through coordination with civilian agencies and incorporated into MOUs with them and that DoDD 6400.1 would be amended accordingly.</td>
<td>Continued in Second Year Report as Issue 3.C. In Second Year Report on page 84, DTFDV provided detailed information on various components of fatality reviews for DoD's consideration.</td>
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### Recommendations

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| 17. Issue 3.F – Tracking and Data Collection: *Recommend DoD,*  
(1) Develop guidance to capture data required by § 594, PL 106-65;  
(2) Study whether DIBRS should replace FAP central registry;  
(3) Expand FAP database to comply with § 594 requirements if DIBRS delayed;  
(4) Evaluate data collection methods. | Initial Report, Page 59 | DoD agreed with first and fourth recommendations and stated that DoDD 7730.47M is already being amended. DoD did not agree with second and third recommendations and stated that DIBRS and the FAP central registry serve fundamentally different purposes: law enforcement and clinical treatment, respectively. | Continued in Second Year Report as Issue 3.D. In response to DoD, DTFDV stated it believes access to DV data in DIBRS important to DV goals and recommended full implementation of DIBRS at earliest possible date. |
(1) Require DV program evaluation;  
(2) Establish advisory committee to oversee program evaluation;  
(3) Establish protocol for evaluating field-based DV programs;  
(4) Use regional oversight and monitoring visits. | Initial Report, Page 61 | DoD concurred with the goal of strengthening the Services’ program evaluations and agreed to amend DoDD 6400.1 accordingly. DoD requested to work with DTFDV to clarify expectations and strengthen procedures for program evaluations and expressed view that advisory committee may be unnecessary. | |
(1) With Services and DTFDV, review impact of mandatory reporting on various factors;  
(2) Develop evaluation criteria to measure effectiveness of mandatory reporting on various factors. | Initial Report, Page 65 | DoD agreed with recommendations and requested to work with DTFDV on second recommendation. | |
| 20. Issue 4.B – Removal of Service Member Victim from Housing Following a Domestic Violence Incident: *Recommend DoD*  
develop policy on who should be removed from military housing following DV incident. Ensure first responder law enforcement personnel receive specialized training in identifying primary aggressor. | Initial Report, Page 69 | DoD concurred with first recommendation and agreed to amend DoDD 6400.1 accordingly. DoD agreed with recommendation that law enforcement first responders receive DV training, but disagreed that first responders should identify a primary aggressor. | Continued in Second Year Report. In response to DoD, DTFDV reiterated its belief that victim safety is enhanced by identification of primary aggressor and recommended that DoD reconsider its response. |
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<td>Issue 4.C – Confidential Resource for Military Victims:</td>
<td>Initial Report, Page 71</td>
<td>DoD concurred with all recommendations.</td>
<td>On page 103 of Second Year Report, DTFDV stated no pilot program is now needed. DoD FAP manager and NDVH personnel from DHHS exploring development of and training on a military-related template to be used by NDVH. Template will be distributed to installations through Military Family Resource Center. DTFDV to monitor during third year.</td>
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<td>Recommend DoD, (1) Working with Services and DTFDV, expand availability of National DV Hotline: Seek partnership with DoJ and DHHS to pilot a program to provide confidential community services to victims who are military spouses/partners; (2) Explore options to create system of confidential services for victims.</td>
<td>Initial Report, Page 71</td>
<td>DoD agreed with all recommendations and committed to begin implementation.</td>
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<td>Issue 4.D – Educating New Family Member Spouses About Their Options Regarding Services for Domestic Violence:</td>
<td>Initial Report, Page 77</td>
<td>DoD agreed with all recommendations and committed to begin implementation.</td>
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<td>Recommend DoD, (1) Include in installation “welcome packets” info on DV; (2) Issue statement from SecDef on victim safety; (3) Issue specific info on FAP services; (4) Issue specific info on NDVH and local community DV services.</td>
<td>Initial Report, Page 77</td>
<td>DoD agreed with all recommendations and committed to begin implementation.</td>
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<td>Issue 5.A – Definition: In the Initial Report, the DTFDV developed a definition of DV to be used as a working definition in accomplishing its statutory mission.</td>
<td>Initial Report, Page 80</td>
<td>While no specific recommendation for action by DoD was recommended, DoD agreed to study the DTFDV definition for its suitability for use in DoD policy.</td>
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<td>Issue 5.B – Confidentiality: There were no recommendations for DoD in this section of the Initial Report. Recommendations dealing with confidentiality were contained in Issue 4.C on page 71 of Initial Report.</td>
<td>Initial Report, Page 83</td>
<td>Not applicable</td>
<td>Continued in Second Year Report</td>
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<td><strong>25. Recommend DoD,</strong> (1) Partner with National Institute of Justice and the Centers for Disease Control and Prevention to further articulate research agenda and organize scientific community-wide requests for applications and peer review process of proposals; (2) Facilitate and encourage publication in peer reviewed journals completed military DV research; (3) This research agenda should not preclude funding of research into causes, consequences, and interventions of DV in the military through other Services’ research funding mechanisms. Recommend the following research priorities in the following areas: (1) Reliable differentiation of different types of abusers and abusive situations; (2) What interventions work best for both offenders and victims; (3) Clarify how well military specific approach to DV is working and where it should be modified; (4) Determine actual versus reported prevalence of DV; (5) Determine which approaches to DV prevention work and for whom; (6) Evaluate knowledge and consistency of key players; (7) Determine efficacy of marital type counseling for low-level DV cases; study men’s and women’s use of violence; study impact of lack of confidentiality on disclosure and victim safety.</td>
<td>Initial Report, Page 97</td>
<td>DoD funds research into health and other issues that affect active duty service members. DoD agrees that such research should be guided by these recommendations and the research agenda, as appropriate. DoD agrees that DV research examining issues affecting family members of active duty service members that is funded by other federal agencies should be guided by the research agenda, as appropriate.</td>
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| **26. Issue 1.A – Community Collaboration Policies:  
Recommend DoD** | Second Year Report, Page 25 | DoD agrees with this recommendation. | |
| issue official instructions as follows: Military installation officials should seek to establish relationships which foster collaboration with community based services for victims of DV; local law enforcement departments; local prosecutor’s office(s); and local criminal, civil, and DV court(s). The ultimate goal being the improvement of command awareness of DV issues, improvement of the delivery of services to and safety of victims, and increased accountability of offenders. | | | |
| **27. Issue 1.B – Liaison with Civilian Community:** | Second Year Report, Page 27 | DoD agreed to study the recommendations. | |
| Provided a list of suggested duties for DV Response Coordinator and again recommended establishment of such positions at installation level. | | | |
| **28. Issue 1.C – Civilian Orders of Protection:** | Second Year Report, Page 29 | DoD deferred to DoJ on this recommendation. | On December 2, 2002, PL107-311, Armed Forces Domestic Security Act was signed into law making it a federal crime to violate a civilian protective order on a military installation. |
| TF provided DoD with proposed language to send to Congress to amend §103, title 18 to make it a crime to violate a civilian order of protection on federal property. | | | |
| **29. Issue 1.D – Military Protective Orders:** | Second Year Report, Page 31 | **RECOMMENDATION ONE:** DoD agreed and stated that it would prepare a DoD form.  
**RECOMMENDATION TWO:** DoD agreed with the intent, had some concerns, and agreed to study.  
**RECOMMENDATION THREE:** DoD agreed. | |
| **Recommend DoD,**  
(1) Adopt the standard MPO provided;  
(2) Adopt policy that commanding officers remove and bar civilian DV offenders from installations;  
(3) Train commanding officers on MPOs | | | |
### Recommendations

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<td>30.</td>
<td>1.E – Collaboration Between Military Organizations: Recommend DoD, (1) Reconstitute DoD-level FAC; (2) Require quarterly meetings of DoD-level FAC; (3) Require Service-level FACs; (4) Require installation-level FACs; (5) Charter DoD-level FAC to collaborate among Services to improve services, victim safety, and offender accountability</td>
<td>Second Year Report, Page 34</td>
<td>RECOMMENDATION ONE: DoD agreed with goal, but will use other means (currently existing FAP Managers Working Group) to achieve. RECOMMENDATION TWO: DoD considers moot based on 1 above. RECOMMENDATION THREE: DoD considers moot and states that Services already have such a group. RECOMMENDATION FOUR: DoD considers moot and states installation-level FACs already required. RECOMMENDATION FIVE: DoD stated their FAP Managers Working Group would do this.</td>
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<td>31.</td>
<td>1.F – Policies for Joint Service Management of DV Incidents: Recommend DoD require notification to gaining commander of pending transfer of service member with open FAP (DV) case to ensure needed services are available at new duty station.</td>
<td>Second Year Report, Page 36</td>
<td>DoD agreed with intent of recommendation and added that if FAP case opened within 60 days of transfer, then transfer should be delayed. Also, stated that FAPM at gaining installation should make a recommendation to gaining commanding officer on whether or not services are available.</td>
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<td>32.</td>
<td>1.G – Collaboration Among Military Criminal Investigation Organizations: Recommend DoD, (1) Request DEW group create sub-working group of DCIOs to address DV issues; (2) Forward law enforcement DV issues to JSCC.</td>
<td>Second Year Report, Page 37</td>
<td>DoD agreed with both recommendations, and stated that Department will ensure that the DCIOs regularly address domestic violence issues.</td>
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<td><strong>33. Issue 1.H – Review Unique Overseas Requirements and Pre-Assignment Screening Procedures:</strong> Recommend DoD, (1) Not assign overseas service/family members undergoing DV program unless services available in gaining command; (2) Not assign overseas service/family members pending court action for DV offense.</td>
<td>Second Year Report, Page 38</td>
<td>RECOMMENDATION ONE: DoD agreed with intent, but will study implementation with DTFFDV since each Service’s personnel center would receive notification that a service member should not be transferred or that family members should not be sponsored for overseas movement under such circumstances. RECOMMENDATION TWO: DoD agreed.</td>
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<td><strong>34. Issue 1.I – Return of Service/Family Members as a Result of an Overseas DV Incident:</strong> Recommend DoD establish procedures for returning service/family members to CONUS following DV incident depending on severity and availability of services.</td>
<td>Second Year Report, Page 40</td>
<td>DoD agreed with intent, but will study implementation to ensure that it will not foster manipulation of the assignment process.</td>
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<td><strong>35. Issue 1.J – Multi-Cultural and Cross-Cultural Collaborations:</strong> Recommend DoD, (1) Provide promotion materials that advertise family services that portray total community; (2) Provide promotional materials in language of population served; (3) Encourage installation reps to coordinate with local, diverse organizations; (4) Encourage input of foreign-born spouses in design of outreach materials on DV.</td>
<td>Second Year Report, Page 42</td>
<td>DoD agreed with all recommendations.</td>
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<td>37. Issue 1.L – Incentives to Encourage Civilian Law Enforcement/Judicial Agencies to Establish Partnerships with Military Installations: Recommend DoD create with DoJ an initiatives, including financial incentives, to encourage collaborative agreements between civilian law enforcement/judicial agencies and military installations in the areas of information sharing, training material and opportunities, programs, and other DV resources.</td>
<td>Second Year Report, Page 44</td>
<td>DoD responded that this recommendation should be directed to DoJ and agreed to cooperate fully with such an initiative.</td>
<td>Note: DTFDV was charged by Congress to make recommendations to the Secretary of Defense. Based on its response, DoD should coordinate this action with DoJ</td>
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<td>38. Issue 2.A – Improve Commanding Officer and Senior Noncommissioned Officer Training: Recommend DoD, (1) Develop a standard, state-of-the-art curriculum for all commanding officers and key-billeted SNCOs; (2) Explore use of state-of-the-art training platforms such as WEB-based training.</td>
<td>Second Year Report, Page 50</td>
<td>DoD agreed that commanding officers and key billeted noncommissioned officers should be trained with the same curriculum and agreed that furnished outline was a useful starting point for developing such a curriculum.</td>
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<td>39. Issue 2.B – Military Criminal Justice Training: Recommend DoD, (1) Provide law enforcement first providers with audio-visual equipment; (2) Provide training on use of such equipment.</td>
<td>Second Year Report, Page 56</td>
<td>DoD agreed with both recommendations.</td>
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<td>40. Issue 2.E – Forensic Medical Training on Domestic Violence for Healthcare Personnel in the First Responder Role: Recommend DoD, (1) Implement standardized medical forensic training for healthcare providers in first responder roles; (2) Explore state-of-the-art training platforms such as WEB-based training for forensic medical training.</td>
<td>Second Year Report, Page 69</td>
<td>DoD agreed with both recommendations.</td>
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<td><strong>41. Issue 2.C – Setting the Climate for Effective Prevention of Domestic Violence Through a General Awareness Campaign:</strong> Recommend DoD, (1) With organizations experienced in DV prevention programs, develop an ongoing DV awareness campaign; (2) Highlight senior leadership policy on non-tolerance of DV; (3) Include DV awareness education in basic officer/enlisted schools; (4) Include DV awareness education in PME, local training, etc; (5) Target a program of DV education to grades E1-E4; (6) Emphasize need to reach spouses residing off-installation; (7) With DoDEA, incorporate DV awareness into dependent schools; (8) Ensure cultural diversity education for those overseas.</td>
<td>Second Year Report, Page 58</td>
<td>DoD agreed with recommendations one through six and eight and agreed to study recommendation seven.</td>
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<td><strong>42. Issue 2.D – Standardize Education and Training Programs for Chaplains:</strong> Recommend DoD, (1) Develop policy on clergy confidentiality; (2) With Chaplain Working Group and DTFDV, develop DV training for Chaplains’ Basic Courses and ensure training for those overseas.</td>
<td>Second Year Report, Page 63</td>
<td>DoD agreed with both recommendations.</td>
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<td><strong>43. Issue 3.A – Criminality:</strong> Recommend DoD, (1) Establish law enforcement protocol for DV investigations; (2) Incorporate into education programs factors for legal and commanding officers to consider in responding to DV as a crime.</td>
<td>Second Year Report, Page 75</td>
<td>DoD agreed with both recommendations.</td>
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<td><strong>44. Issue 3.B – Case Management:</strong> Recommend DoD, (1) Incorporate criteria provided by DTFDV into policy update for DV case management; (2) Formally evaluate repeat offenders/treatment failures for continued service.</td>
<td>Second Year Report, Page 79</td>
<td>DoD agreed with both recommendations.</td>
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<td><strong>45. Issue 3.C – Fatality Reviews:</strong> DTFDV made no specific recommendations, but pledged to continue researching issue in conjunction with DoD with goal of implementing DV fatality reviews.</td>
<td>Second Year Report, Page 82</td>
<td>NA since no specific recommendation was made by the DTFDV.</td>
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<td><strong>46. Issue 3.D – Tracking and Data Collection:</strong> Recommend DoD fully implement DIBRS at earliest possible date.</td>
<td>Second Year Report, Page 89</td>
<td>DoD agreed.</td>
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<td><strong>47. Issue 3.E – Civilian Offenders:</strong> Recommend DoD, (1) Seek to improve civil-military cooperation to foster victim safety; (2) Work with DoJ to implement Military Extraterritorial Jurisdiction Act of 2000 to ensure proper emphasis for DV.</td>
<td>Second Year Report, Page 92</td>
<td>DoD agreed with both recommendations.</td>
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<td><strong>48. Issue 4.A – Provisions for Legal Consultation and Referral for Victims of Domestic Violence:</strong> Recommend DoD, (1) Direct Services to advise DV victims of legal resources; (2) Document that info on legal resources was provided; (3) Direct Services to train legal assistance personnel on VAWA, specifically immigration issues arising from DV; (4) Direct Services to train legal assistance personnel on TC.</td>
<td>Second Year Report, Page 99</td>
<td>DoD agreed with all recommendations.</td>
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<td>49. Issue 4.B – Removal of Service Member Victim from Housing Following a Domestic Violence Incident: <strong>Recommend DoD,</strong> (1) Include specific language provided by DTFDV in DoDD on this subject; (2) Ensure appropriate regulations on this issue are changed and consider policy memos from Service Secretaries.</td>
<td>Second Year Report, Page 101</td>
<td><strong>Recommendation one:</strong> DoD agreed with intent and said it would draft policy language, but noted that policy should include consideration of the victim’s input as to whether the victim should remain in the military family housing. <strong>Recommendation two:</strong> DoD agreed.</td>
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<td>50. Issue 4.C – Confidential Resource for Victims: <strong>Recommend DoD,</strong> (1) Collaborate with NDVH in assessing materials to expand awareness and use of hotline; (2) Pursue funding for outreach; (3) Explore hotlines overseas; (4) Collaborate with civilian victim agencies potentially impacted by military use.</td>
<td>Second Year Report, Page 103</td>
<td>DoD agreed with recommendations one, three, and four and agreed to study recommendation two.</td>
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<td>51. Issue 4.D – Services to Victims of Domestic Violence: <strong>Recommend DoD</strong> mandate that each Service provide and emphasize a Victim Advocate Program. DTFDV committed to addressing models and funding in Third Year Report.</td>
<td>Second Year Report, Page 105</td>
<td>DoD agreed to study feasibility of victim advocate models proposed by the DTFDV in its third year report.</td>
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<td>52. Issue 4.E – Partial Entitlement for Travel and Shipment of Household Goods for Victims of Domestic Violence: <strong>Recommend DoD,</strong> (1) Seek statutory authority for payment of travel expenses and shipment of HHG (and POV when overseas) for victims when warranted. (2) Specified certain minimum stipulations on authority.</td>
<td>Second Year Report, Page 108</td>
<td>DoD agreed with first recommendation and agreed to study the second.</td>
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<td>53. Issue 4.F – Victim Safety Planning: Recommend DoD,</td>
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<td>RECOMMENDATION ONE and TWO: DoD agreed.</td>
<td>In Second Year Report on page 113, DTFDV provided a detailed safety plan for victims that should be incorporated into any education program for new family member spouses about their options regarding services for DV.</td>
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<td>(1) Develop policy for safety plans by Services;</td>
<td>Second Year Report,</td>
<td>RECOMMENDATION THREE: DoD did not agree to adopt a particular risk assessment tool at this time, but will consider doing so in the future since they are currently studying the issue.</td>
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<td>(2) Adopt safety plan provided by DTFDV;</td>
<td>Page 110</td>
<td>RECOMMENDATION FOUR: DoD agreed to study.</td>
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<td>(3) Adopt risk assessment tool provided by DTFDV;</td>
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<td>(4) Ensure availability of victim advocates to aid in safety planning/risk assessments.</td>
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<td>54. Issue 4.G – Transitional Compensation: Recommend DoD,</td>
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<td>RECOMMENDATION ONE: DoD took no position since it sees this as a recommendation to the Congress.</td>
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<td>(1) Recommend legislative changes to require starting TC 14 days after UCMJ discharge sentencing or initiation of admin separation action and authorize TC payments for 36 months for everyone;</td>
<td>Second Year Report,</td>
<td>RECOMMENDATION TWO, THREE, and FIVE: DoD agreed.</td>
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<td>(2) Develop guidance for commanding officers on TC pertaining to proper documentation in separation papers;</td>
<td>Page 123</td>
<td>RECOMMENDATION FOUR: DoD agreed with intent, but suggests that the Congress must provide specific statutory authority for the Secretaries to waive the requirements of the statute for good cause.</td>
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<td>(3) Require Services to monitor disposition of separation cases due to DV so that they are properly documented;</td>
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<td>(4) Expand guidance to give Service Secretaries authority to grant TC in cases of extenuating circumstances consistent with the law;</td>
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<td>(5) Initiate public affairs campaign on TC.</td>
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Recommend DoD,
(1) Ensure access to either on- or off-installation sheltering services;
(2) Ensure access to sheltering services within reasonable distance at overseas locations;
(3) Establish policy to provide military sponsored shelter for up to 72 hours with no mandatory reporting;
(4) Ensure dissemination of shelter info;
(5) Develop policy emphasizing self-determination in safety planning;
(6) Ensure all CONUS FAP staff know about local shelters;
(7) Ensure adequate funding for military shelters;
(8) Seek alternative methods of funding for military shelters.

DoD agreed with recommendations one, two, and four through seven. DoD agreed to study recommendations three and eight.

56. Issue 5.A – Definition:
Recommend DoD incorporate the definition provided into DoD policy and programs.
A minority opinion was provided
(Second Year Report, Page 135)

DoD disagreed with both the majority and minority definitions proposed and stated that it will propose an alternative definition of its own that will address the conduct covered in the DTFDV definition.

In Second Year Report on page 134, the DTFDV provided a final recommended DV definition to DoD.

57. Issue 5.B – Confidentiality:
Recommend DoD, working with Services and DTFDV, create a policy to provide confidentiality to victims of DV.

DoD agreed.
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<td>58. Issue 5.C – Case Review Committee:</td>
<td>Second Year Report, Page 140</td>
<td>DoD agreed with the recommendation and agreed to study the FAP case review process and to make changes as appropriate.</td>
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<td>Recommend DoD, working with DTFDV and the Services, develop a new intervention process model.</td>
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<td>Recommend DoD, ensure overseas employment contracts explain eligibility for family advocacy services on a space available/fee for service basis.</td>
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<td>60. Recommend DoD, explore all options for hiring and maintaining providers necessary to assess/intervene in DV overseas.</td>
<td>Second Year Report, Page 153</td>
<td>DoD agreed.</td>
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<td>61. Recommend DoD, ensure maximum use of treatment/intervention resources in civilian communities overseas when available and appropriate.</td>
<td>Second Year Report, Page 153</td>
<td>DoD agreed.</td>
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### Recommendations

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<td>62. Recommend DoD ensure foreign language ability and cultural competence are included in job qualification standards of personnel providing DV services overseas.</td>
<td>Second Year Report, Page 154</td>
<td>DoD stated that it wants DV providers at all installations to have proficiency in some foreign language and some understanding of another culture. DoD went on to say that the recommendation would significantly impede DoD in carrying out its mission for the following reasons: (1) Since some DV services are provided by military personnel, a requirement for combined foreign language proficiency and cultural competence may conflict with both mission requirements and assignment policies; (2) Even if civil service qualifications for overseas positions that provide DV services could include foreign language and cultural competence, civilian personnel policies require rotation from OCONUS locations to CONUS locations after five years. Such requirements could impair DoD’s ability to fill the ensuing vacancy and thus to maintain “the mix of providers necessary to assess and intervene in DV incidents overseas”; (3) Any tests of cultural competence that should be required of applicants for positions that provide DV services would need to be reviewed for feasibility.</td>
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<td>63. Recommend DoD ensure that Services have ongoing cultural competence training programs for all personnel overseas.</td>
<td>Second Year Report, Page 154</td>
<td>DoD agreed that all personnel who provide services to DV victims OCONUS should undergo cultural competence training, but disagreed that such training must be provided for all personnel OCONUS.</td>
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<td><strong>Third Year Report – February 2003</strong></td>
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<td>64. <em>Recommend DoD</em></td>
<td>Third Year Report, Page xv</td>
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<td>identify, evaluate, and prioritize all resources for domestic violence programs.</td>
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<td>65. Within 2 years of receipt of Third Year Report, recommend DoD convene a small, independent group with characteristics similar to DTFDV to review and assess progress of implementation.</td>
<td>Third Year Report, Page xv</td>
<td>Pending</td>
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<td>66. Issue 1.A – Victim Advocate Protocol: <em>Recommend DoD,</em> (1) Adopt and widely disseminate Victim Advocate Protocol provided; (2) Follow victim advocate recruiting and training guidance provided; (3) Implement Victim Advocate Program as recommended; (4) Establish victim advocate certification program; (5) Establish “appeal-type” mechanism for victims/advocates.</td>
<td>Third Year Report, Page 27</td>
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<td><strong>68. Issue 1.C – Law Enforcement Protocol:</strong></td>
<td>Third Year Report, Page 74</td>
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<td>Recommend DoD</td>
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<td>adopt and widely disseminate Law Enforcement Protocol provided.</td>
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<td><strong>69. Issue 1.D – Offender Intervention Protocol:</strong></td>
<td>Third Year Report, Page 106</td>
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<td>Recommend DoD,</td>
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<td>(1) Adopt and widely disseminate Offender Intervention Protocol provided;</td>
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<td>(2) Establish standard offender intervention curriculum and train intervention staff;</td>
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<td>(3) Develop evaluation standards;</td>
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<td>(4) Direct Services to conduct ongoing evaluations of offender intervention programs;</td>
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<td>(5) Collaborate with DoJ to support testing of new models of intervention;</td>
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<td>(6) Examine needs of female offenders and develop protocol and standard intervention curriculum for them.</td>
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<td><strong>70. Chapter 2 – Case Review Committee (CRC):</strong></td>
<td>Third Year Report, Page 115</td>
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<td>Recommend DoD,</td>
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<td>(1) Replace CRC, in adult DV cases, with Domestic Violence Assessment and Intervention Team (DVAIT);</td>
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<td>(2) Develop DoD DVAIT form.</td>
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| 71. Chapter 3 – Nondisclosure Policy: Recommend DoD,  
(1) Adopt and widely disseminate nondisclosure policy provided;  
(2) Develop policy guidance on victim advocate record-keeping;  
(3) Address Privacy Act issues. | Third Year Report, Page 124 | Pending |         |
| 72. Chapter 4 – Prevention of Domestic Violence: Recommend DoD,  
(1) Adopt and widely disseminate Domestic Violence Conceptual Model provided;  
(2) Develop joint Service effort for standardizing DoD Domestic Violence Program;  
(3) Develop policy for handling low-risk cases;  
(4) Partner with civilian agencies and ensure joint Service involvement in pursuing research recommendations;  
(5) Encourage commanding officers to discuss issues relating to DV. | Third Year Report, Page 131 | Pending |         |
| 73. Chapter 5 – Severity of Abuse: Recommend DoD,  
(1) Ensure commanding officers scrutinize DV incidents to determine if UCMJ violated;  
(2) Ensure Service conduct timely risk/lethality assessments to determine appropriate intervention and command response;  
(3) Ensure one DoD risk assessment grid;  
(4) Ensure Services establish tracking mechanism;  
(5) Discontinue collecting and reporting severity level data. | Third Year Report, Page 136 | Pending |         |
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| **74. Chapter 6 – Fatality Reviews:** Recommend DoD,  
(1) Institute annual DV fatality review summit;  
(2) Instruct Services to establish, train, and maintain on-call HQ-level DV fatality review teams;  
(3) Instruct installations to include DV fatality review provisions in the DV MOAs with civilian jurisdictions.  
(4) Conduct DV fatality reviews as recommended in prior reports and compose teams as recommended. | Third Year Report, Page 138     | Pending      |        |
| **75. Chapter 7 – Commanding Officer and Senior Enlisted Training:** Recommend DoD,  
(1) Ensure Services provide written guidance to training/education commands for DV training;  
(2) Select standardized delivery models as specified for training;  
(3) Seek partnerships to develop DV prevention and education programs. | Third Year Report, Page 142     | Pending      |        |
| **76. Chapter 8 – Chaplain Training:** Recommend DoD,  
(1) Develop standard DoD policy on clergy confidentiality;  
(2) Develop standardized DV training curriculum for chaplains using outline provided. | Third Year Report, Page 143     | Pending      |        |
Key Points from the Reports of the DTFDV

- Demand a Culture Shift That …
  - Does Not Tolerate Domestic Violence
  - Moves from Victims Holding Offenders Accountable to the System Holding Offenders Accountable
  - Punishes Criminal Behavior
- Establish a Victim Advocate Program with Provisions for Nondisclosure
- Implement Proposed Intervention Process Model with Following Protocols:
  - Victim Advocate Protocol
  - Commanding Officer’s Protocol/Guidelines
  - Law Enforcement Protocol
  - Offender Intervention Protocol
- Replace Case Review Committee (CRC) with Domestic Violence Assessment and Intervention Team (DVAIT)
- Enhance System and Command Accountability and Include a Fatality Review Process
- Implement DoD-Wide Training and Prevention Programs
- Hold Offenders Accountable
- Strengthen Local Military and Civilian Community Collaboration
- Evaluate Results of Domestic Violence Prevention and Intervention Efforts

Core Principles of Domestic Violence Intervention

- Respond to the Needs of Victims and Provide for Their Safety
- Hold Offenders Accountable
- Consider Multi-cultural and Cross-cultural Factors
- Consider the Context of the Violence and Provide a Measured Response
- Coordinate Military and Civilian Response
- Involve Victims in Monitoring Domestic Violence Services
- Provide Early Intervention
Key Points and Core Principles of Intervention and the Recommendation(s) That Support Each

**KEY POINT**
Demand a Culture Shift That …

- Does Not Tolerate Domestic Violence
- Moves from Victims Holding Offenders Accountable to the System Holding Offenders Accountable
- Punishes Criminal Behavior

*All Recommendations Support This Goal*

**CORE PRINCIPLE**
Establish a Victim Advocate Program with Provisions for Nondisclosure

Respond to the Needs of Victims and Provide for Their Safety/
Involves Victims in Monitoring Domestic Violence Services

*Recommendation Numbers*

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**KEY POINT**
Hold Offenders Accountable

**CORE PRINCIPLE**
Hold Offenders Accountable

*Recommendation Numbers*

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**KEY POINT**  Implement Proposed Intervention Process Model with Following Protocols:

- Victim Advocate
- Commanding Officer’s Protocol/Guidelines
- Law Enforcement
- Offender Intervention

*Recommendation Numbers*

43
51
53
58
66
67
68
69

**KEY POINT**  Replace Case Review Committee (CRC) with Domestic Violence Assessment and Intervention Team (DVAIT)

*Recommendation Numbers*

58
70

**KEY POINT**  Enhance System and Command Accountability and Include a Fatality Review Process

*Recommendation Numbers*

12
13
16
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31
44
45
46
74
### KEY POINT
Implement DoD-Wide Training and Prevention Programs

**Recommendation Numbers**

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### KEY POINT
Strengthen Local Military and Civilian Community Collaboration

### CORE PRINCIPLE
Coordinate Military and Civilian Response

**Recommendation Numbers**

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### KEY POINT
Evaluate Results of Domestic Violence Prevention and Intervention Efforts

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</tbody>
</table>
CORE PRINCIPLE  Consider Multi-Cultural and Cross-Cultural Factors

Recommendation Numbers
35
41
60
61
62
63

CORE PRINCIPLE  Consider the Context of the Violence and Provide a Measured Response

Recommendation Numbers
15
20
34
49
73

CORE PRINCIPLE  Provide Early Intervention

Recommendation Number
72
APPENDIX B

Resource List

OVERVIEW

Attached is a list of various organizations, groups, and activities that deal with the issue of domestic violence. The list is broken down as follows:

- State Domestic Violence Resources
- National Domestic Violence Resources
- Domestic Violence Resource Network
- DoD and Military Service Domestic Violence Resources

The listing of any organization, group, or activity in this publication does not constitute an endorsement by the Defense Task Force on Domestic Violence. The list is provided for information purposes and should be disseminated to Family Advocacy Program Managers for their use as appropriate.
State Domestic Violence Resources

Alabama Coalition to End Domestic Violence
P.O. Box 4762
Montgomery, AL 36101
Phone: 334-832-4842
1-800-650-6522 (Alabama 24-hour domestic violence hotline)
www.acadv.org

Alaska Network on Domestic Violence and Sexual Assault
130 Seward Street, Room 209
Juneau, AK 99801
Phone: 907-586-3650
Fax: 907-463-4493
www.andvs.org

Arizona Coalition Against Domestic Violence
100 West Camelback Road, Suite 109
Phoenix, AZ 85013
Phone: 602-279-2900
Fax: 602-279-2980
Toll-Free: 1-800-782-6400
www.azcadv.org

Arkansas Coalition Against Domestic Violence
1401 West Capitol Avenue, Suite 170
Little Rock AR 72201
Phone: 501-907-5612
Fax: 501-907-5618
Toll-Free: 800-269-4668

Coalition to End Domestic and Sexual Violence
2064 Eastman Avenue, Suite 104
Ventura, CA 93003
Phone: 805-983-6014
Fax: 805-983-6240
24-Hour Hotline: 805-656-1111
Spanish Hotline: 800-300-2181
TDD: 805-656-4439
http://www.thecoalition.org

Statewide California Coalition for Battered Women
3711 Long Beach Boulevard, Suite 718
Long Beach CA 90807
Toll-Free: 888-722-2952
Phone: 562-981-1202
Fax: 562-981-3202
www.sccbw.org

San Diego Family Justice Center
707 Broadway, Suite 700
San Diego, CA 92101
Phone: 619-533-6000
www.familyjusticecenter.org

Colorado Coalition Against Domestic Violence
P.O. Box 18902
Denver, CO 80218
Toll-Free: 888-778-7091
Phone: 303-831-9632
Fax: 303-832-7067
www.ccadv.org
D.C. Coalition Against Domestic Violence
1718 P Street, NW, Suite T-6
Washington, DC 20036
Phone: 202-299-1181
Fax: 202-299-1193
www.dccadv.org

Delaware Coalition Against Domestic Violence
100 West 10th Street, Suite 703
Wilmington, DE 19801
Phone: 302-658-2958
Fax: 302-658-5049
www.dcadv.org

Florida Coalition Against Domestic Violence
425 Office Plaza Drive
Tallahassee, FL 32301
Toll-Free Hotline: 800-500-1119
Phone: 850-425-2749
Fax: 850-425-3091
www.fcadv.org

Georgia Advocates for Battered Women and Children
Toll-Free Hotline: 800-334-2836

Hawaii State Coalition Against Domestic Violence
716 Umi Street, Unit 210
Honolulu, HI 96819
Phone: 808-832-9316
Fax: 808-841-6028

Iowa Coalition Against Domestic Violence
2603 Bell Avenue, Suite 100
Des Moines, IA 50321
Toll-Free Hotline: 800-942-0333
Phone: 515-244-8028
Fax: 515-244-7417
www.icadv.org

Idaho Coalition Against Sexual and Domestic Violence
815 Park Boulevard, Suite 140
Boise, ID 83712
Toll-Free Hotline: 888-293-6118
Phone: 208-384-0419
Fax: 208-331-0687
www.idvsa.org

Illinois Coalition Against Domestic Violence
801 South 11th Street
Springfield, IL 62703
Phone: 217-789-2830
Fax: 217-789-1939
www.ilcadv.org

Indiana Coalition Against Domestic Violence
1915 West 18th Street
Indianapolis, IN 46202
Toll-Free Hotline: 800-332-7385
Phone: 317-917-3685
Fax: 317-917-3695
www.violenceresource.org

Kansas Coalition Against Sexual and Domestic Violence
220 SW 33rd Street, Suite 100
Topeka, KS 66611
Toll-Free Hotline: 888-363-2273
Phone: 785-232-9784
Fax: 785-266-1874
www.kcsdv.org

Kentucky Domestic Violence Association
P.O. Box 356
Frankfort, KY 40602-0356
Phone: 502-695-2444
Fax: 502-695-2488
www.kdva.org
Louisiana Coalition Against Domestic Violence  
P.O. Box 77308  
Baton Rouge, LA 70879-7308  
Toll-Free Hotline: 888-411-1333  
Phone: 225-752-1296  
Fax: 225-751-8927  
www.lcadv.org

Maine Coalition to End Domestic Violence  
170 Park Street  
Bangor, ME 04401  
Phone: 207-941-1194  
Fax: 207-941-2327  
www.mcedv.org

Maryland Network Against Domestic Violence  
6911 Laurel Bowie Road, Suite 309  
Bowie, MD 20715  
Toll-Free Hotline: 800-634-3577  
Phone: 301-352-4574  
www.mnadv.org

Jane Doe Inc./Massachusetts Coalition Against Sexual Assault and Domestic Violence  
14 Beacon Street, Suite 507  
Boston, MA 02108  
Phone: 617-248-0922  
Fax: 617-248-0902  
www.janedoe.org

Michigan Coalition Against Sexual and Domestic Violence  
3893 Okemos Road  
Okemos, MI 48864  
24-Hour Crisis Line: 517-265-6776  
Phone: 513-347-7000  
Fax: 513-347-1377

Minnesota Coalition for Battered Women  
1821 University Avenue West, Suite 2-112  
St. Paul, MN 55104  
Metro-Area Hotline: 651-646-0994  
Phone: 651-646-6177  
Fax: 651-646-1527

Missouri Coalition Against Domestic Violence  
415 East McCarty Street  
Jefferson City, MO 65101  
Phone: 573-634-4161  
Fax: 573-636-3728  
http://mova.missouri.org/members/mcadv.htm

Mississippi State Coalition Against Domestic Violence  
P.O. Box 4703  
Jackson, MS 39296-4703  
Toll-Free: 800-898-3234  
Phone: 601-981-9196  
Fax: 601-981-2501

Montana Coalition Against Domestic and Sexual Violence  
P.O. Box 633  
Helena, MT 59624  
Toll-Free Hotline: 888-587-0199  
Phone: 406-443-7794  
Fax: 406-443-7818  
www.mcadsv.com

Nebraska Domestic Violence and Sexual Assault Coalition  
825 M Street, Suite 404  
Lincoln, NE 68508-2253  
Toll-Free: 800-876-6238  
Phone: 402-476-6256  
Fax: 402-476-6806  
http://www.ndvsac.org/
Nevada Network Against Domestic Violence
100 West Grove, Suite 315
Reno, NV 89509
Toll-Free: 800-500-1556
Phone: 775-828-1115
Fax: 775-828-9991

New Hampshire Coalition Against Domestic and Sexual Violence
P.O. Box 353
Concord, NH 03302-0353
Toll-Free: 800-852-3388
(in New Hampshire)
Help-Line: 603-225-9000
(outside of New Hampshire)
Phone: 603-224-8893
Fax: 603-228-6096
www.nhcadsv.org

New Jersey Coalition for Battered Women
2620 Whitehorse/Hamilton Square Road
Trenton, NJ 08690
Phone: 609-584-8107
Fax: 609-584-9750
TTY: 609-584-0027
(9am-5pm, then into message service)
http://www.njcbw.org/

New Mexico State Coalition Against Domestic Violence
200 Oak NE, Suite 4
Albuquerque, NM 87106
Toll-Free: 800-773-3645
(in New Mexico Only)
Legal Help-Line: 800-209-3854
Phone: 505-246-9240
Fax: 505-246-9434

New York State Coalition Against Domestic Violence
79 Central Avenue
Albany, NY 12206
Toll-Free: 800-942-6906
Phone: 518-432-4864
Fax: 518-463-3155

North Carolina Coalition Against Domestic Violence
115 Market Street, Suite 400
Durham, NC 27701
Phone: 919-956-9124
Fax: 919-682-1449
http://www.nccadv.org

North Dakota Council on Abused Women's Services
418 East Rosser Avenue, Suite 320
Bismarck, ND 58501
Toll-Free: 800-472-2911 (In ND Only)
Phone: 701-255-6240
Fax: 701-255-1904

Ohio Domestic Violence Network
4807 Evanswood Drive, Suite 201
Columbus, OH 43229
614-781-9651
Toll-Free: 800-934-9840
Fax: 614-781-9652
TTY: 614-781-9654
http://www.ohiodvnetwork.org/

Oklahoma Coalition Against Domestic Violence and Sexual Assault
2525 NW Expressway, Suite 101
Oklahoma City, OK 73112
Toll-Free: 800-522-9054
Phone: 405-848-1815
Fax: 405-848-3469
http://www.ocadvsa.org/
Oregon Coalition Against Domestic and Sexual Violence  
115 Mission Street, SE, Suite 100  
Salem, OR 97302  
Toll-Free: 800-622-3782  
Phone: 503-365-9644  
Fax: 503-566-7870  
Info@ocadsv.com  
http://www.ocadsv.com/

Pennsylvania Coalition Against Domestic Violence  
6440 Flank Drive, Suite 1300  
Harrisburg, PA 17112-2778  
Toll-Free: 800-932-4632  
Phone: 717-545-6400  
Fax: 717-545-9456  
www.pcar.org/home.htm/

Coordinadora Par para la Mujer  
P.O. Box 23136 UPR Station  
Rio Piedros, PR 00931  
Phone: 787-281-7579  
Fax: 787-767-6843

Rhode Island Coalition Against Domestic Violence  
422 Post Road, Suite 202  
Warwick, RI 02888  
Toll-Free: 800-494-8100  
Phone: 401-467-9940  
Fax: 401-467-9943  
http://www.ricadv.org/

South Carolina Coalition Against Domestic Violence & Sexual Assault  
P.O. Box 7776  
Columbia, SC 29202-7776  
Toll-Free: 800-260-9293  
Phone: 803-256-2900  
Fax: 803-256-1030  
http://www.sccadvasa.org

South Dakota Coalition Against Domestic Violence and Sexual Assault  
P.O. Box 141  
Pierre, SD 57501  
Toll-Free: 800-572-9196  
Phone: 605-945-0869  
Fax: 605-945-0870

South Dakota Network Against Family Violence and Sexual Assault  
1-800-430-SAFE

Resource Center of Aberdeen  
24-Hour Crisis Line: 605-226-1212  
Toll-Free: 888-290-2935

Tennessee Coalition Against Domestic and Sexual Violence  
P.O. Box 120972  
Nashville, TN 37212  
Toll-Free: 800-356-6767  
Phone: 615-386-9406  
Fax: 615-383-2967  
http://tcadsv.citysearch.com/

Texas Council on Family Violence  
P.O. Box 161810  
Austin, TX 78716  
Toll-Free: 800-525-1978  
Phone: 512-794-1133  
Fax: 512-794-1199  
www.tcfv.org  
www.ndvh.org (National Domestic Violence Hotline)

Utah Domestic Violence Advisory Council  
120 North 200 West, Suite 319  
Salt Lake City, UT 84103  
Toll-Free: 800-897-5465  
Phone: 801-538-4635  
Fax: 801-538-4016
Vermont Network Against Domestic Violence and Sexual Assault
P.O. Box 405
Montpelier, VT 05601
Phone: 802-223-1302
Fax: 802-223-6943
www.vnadvsa.together.com

Virginians Against Domestic Violence
2850 Sandy Bay Road, Suite 101
Williamsburg, VA 23185
Toll-Free: 800-838-8238
Phone: 757-221-0990
Fax: 757-229-1553
http://www.vadv.org

Washington State Coalition Against Domestic Violence
8645 Martin Way, NE
Lacy, WA 98516
Toll-Free: 800-562-6025
Phone: 360-586-1022
Fax: 360-586-1024
TTY: 360-586-1029
http://www.wscadv.org

West Virginia Coalition Against Domestic Violence
Elk Office Center
4710 Chimney Drive, Suite A
Charleston, WV 25302
Phone: 304-965-3552
Fax: 304-965-3572
http://www.wvcadv.org

Wisconsin Coalition Against Domestic Violence
307 South Paterson, Suite 1
Phone: 608-255-0539
Fax: 608-255-3560

Wyoming Coalition Against Domestic Violence and Sexual Assault
P.O. Box 236
Laramie, WY 82070
Toll-Free: 800-990-3877
Phone: 307-755-5481
Fax: 307-755-5482
http://www.users.qwest.net/~wyomingcoalition/index.htm

National Domestic Violence Resources
National Domestic Violence Hotline
1-800-799-SAFE (7233)
1-800-787-3244 (TTY)

National Sexual Assault Hotline
1-800-656-HOPE (4673)

American Bar Association
Commission on Domestic Violence
740 15th Street, NW
Washington, D.C. 20005
Phone: 202-662-8673
Fax: 202-662-1032
www.abanet.org/domviol

American Indian Law Center
P.O. Box 4456 – Station A
Albuquerque, NM 87196
Phone: 505-277-5462
Fax: 505-277-1035
grossman@libra.unm.edu

American Prosecutors Research Institute
99 Canal Center, Suite 510
Alexandria, VA 22314
Phone: 703-549-4253
Fax: 703-836-3195
www.ndaa-apri.org
Asian & Pacific Islander Institute on Domestic Violence
942 Market Street, Suite 200
San Francisco, California 94102
Phone 415-954-9964
Fax 415-954-9999
http://www.apiahf.org/programs/DV.html

Battered Women’s Justice Project
2104 4th Avenue South, Suite B
Minneapolis, MN 55404
- Criminal Justice Issues, Military
  Domestic Violence Issues
  800-903-0111 Ext. 1
- Civil Justice Issues
  800-903-0111 Ext. 2
- Defense Issues
  800-903-0111 Ext. 3
www.bwjp.org

Center for the Prevention of Sexual and Domestic Violence
2400 North 45th Street, Suite 10
Seattle, WA 98103
Phone: 206-634-1903
Fax: 206-634-0115
http://www.cpsdv.org

Corporate Alliance to End Partner Violence
2416 East Washington Street, Suite E
Bloomington, IL 61704
Phone: 309-664-0667
Fax: 309-664-0747
www.caepv.org

Domestic Violence Resource Network
- National Resource Center on Domestic Violence
  Pennsylvania Coalition Against Domestic Violence
  6400 Flank Drive, Suite 1300
  Harrisburg, PA 17112
  Phone: 800-537-2238
  Fax: 717-545-9456

- Health Resource Center on Domestic Violence
  Family Violence Prevention Fund
  383 Rhode Island Street, Suite 304
  San Francisco, CA 94103-5133
  Phone: 800-313-1310
  Fax: 415-252-8991

- Resource Center on Domestic Violence: Child Protection, and Custody
  Family Violence Department
  National Council on Juvenile and Family Court Judges
  P.O. Box 8970
  Reno, NV 89507
  Phone: 800-527-3223
  Fax: 775-784-6160
  http://www.dvlawsearch.com

- National Resource Center to End Violence Against Native Women
  Cangleska, Inc./Sacred Circle
  722 St. Joseph Street
  Rapid City, SC 57701
  Phone: 605-341-2050
  877-733-37623
  Fax: 605-341-2472
  Scircle@sacred-circle.com
Family Violence Prevention Fund
383 Rhode Island Street, Suite 304
San Francisco, CA 94103-5133
Phone: 415-252-8900
Fax: 415-252-8991
www.endabuse.org

Federal Law Enforcement Training Center
National Center for State and Local Law Enforcement Training
Department of the Treasury
Building 67/OSL
Glynco, GA 31524
Phone: 800-743-5382 est. 3669
Fax: 912-267-2894
www.treas.gov/osl

Institute on Domestic Violence in the African American Community
University of Minnesota
School of Social Work
290 Peters Hall
1404 Gortner Avenue
St. Paul, MN 55108-6142
Phone: 877-NIDVAC (643-8222)
Fax: 612-624-9201

International Association of Chiefs of Police
Police Response to Violence Against Women Project
515 North Washington Street
Alexandria, VA 22314
Phone: 800-The-IACP (842-4227)
Fax: 703:836-4543
www.theiACP.org

National Clearinghouse for the Defense of Battered Women
125 South 9th Street, Suite 302
Philadelphia, PA 19107
Phone: 215-351-0010
Fax: 215-351-0779

National Coalition Against Domestic Violence
P.O. Box 18749
Denver, CO 80218
Phone: 303-839-1852
Fax: 303-831-9251
http://www.ncadv.org

National Coalition Against Domestic Violence Policy Office
P.O. Box 1532 16th Street, NW
Washington, DC 20036
Phone: 202-745-1211
Fax: 202-745-0088

National Council of Juvenile and Family Court Judges
P.O. Box 8970
Reno, NV 89507
Phone: 775-784-6012
Fax: 775-784-6628
admin@ncjcj.unr.edu

National Battered Women’s Law Project
275 7th Avenue, Suite 1206
New York, NY 10001
Phone: 212-741-9480
Fax: 212-741-6438
National Network to End Violence Against Immigrant Women
c/o Family Violence Prevention Fund
383 Rhode Island Street, Suite 304
San Francisco, CA 94103
Phone: 415-252-8900
Fax: 415-252-8991
www.endabuse.org

National Center on Domestic and Sexual Violence
2300 Pasadena Drive
Austin, Texas 78757
Phone: 512-407-9020
Fax: 512-407-9022
www.ntcdsv.org

National Clearinghouse on Marital and Date Rape
2325 Oak Street
Berkeley, CA 94708
Phone: 510-524-1582
Fax: 510-524-1582
http://members.aol.com/ncmdr/index.html

National Latino Alliance for the Elimination of Domestic Violence
P.O. Box 322086
Ft. Washington Station
New York, NY 10032
Phone: 646-672-1404
800-342-9908
Fax: 800-216-2404

National Center for State Courts
Research Division
300 Newport Avenue (23185)
P.O. Box 8798
Williamsburg, VA 23187-8789
Phone: 757-253-2000
Fax: 757-220-0449
www.ncsc.org

National Center for Victims of Crime
Stalking Resource Center
2111 Wilson Boulevard, Suite 300
Arlington, VA 22201
Phone: 703-276-2880, ext. 114
Fax: 703-276-2889
www.ncvc.org

National Clearinghouse on Abuse in Later Life
Wisconsin Coalition Against Domestic Violence
307 South Paterson Street, Suite 1
Madison, WI 53703-3041
Phone: 608-255-0539
Fax: 608-255-3560

National Network to End Domestic Violence
660 Pennsylvania Avenue SE, Suite 303
Washington, DC 20003
Phone: 202-543-5566
Fax: 202-543-5626
http://www.nnedv.org/

National Women’s Health Information Center – Violence Against Women
Office of Women’s Health, U.S. Department of Health and Human Services
Phone: 800-994-WOMAN
TDD: 888-220-5446
www.4woman.gov/violence/index.cfm

National Violence Against Women Prevention Research Center
Centers for Disease Control and Prevention
Phone: 843-792-2945
Fax: 843-792-3388
http://www.vawprevention.org/index.html
Resource List

NOW Legal Defense and Education Fund
Battered Immigrant Women’s Program
1522 K Street, NW, Suite 550
Washington, DC 20005
Phone: 202-326-0040
Fax: 202-589-0511
www.nowldef.org

Minnesota Center Against Violence and Abuse
Violence Against Women On-Line Resources
School of Social Work, University of Minnesota
105 Peters Hall, 1404 Gortner Avenue
St. Paul, MN 55108-6142
Phone: 612-624-0721
Fax: 612-625-4288
www.vaw.unm.edu

Mending the Sacred Hoop
Minnesota Program Development, Inc. (MPDI)
202 East Superior Street
Duluth, MN 55802
Phone: 888-305-1650
Fax: 218-722-0779
www.duluth-model.org

Pennsylvania Coalition Against Domestic Violence
Full Faith and Credit Project
Legal Assistance Providers Technical Assistance Outreach Project (LAPTOP)
1600 Connecticut Avenue, NW, Suite 700
Washington, D.C. 20009
Phone: 202-256-0967
800-256-5883
Fax: 202-265-5083
www.pcadv.org

Office on Violence Against Women
U.S. Department of Justice
Office of Justice Programs
810 7th Street, NW
Washington, DC 20531
Phone: 202-307-6026
Fax: 202-307-3911
TTY: 202-307-2277
http://www.ojp.usdoj.gov/vawo

Women Helping Battered Women
Phone: 802-658-1996
Toll-Free: 1-800-228-7395

DoD and Military Services Domestic Violence Resources

Department of Defense
Family Advocacy Program
1745 Jefferson Davis Highway
Crystal Square 4, Suite 302
Arlington, VA 22202
Phone: 703-602-4990
DSN: 332-4990

Military Family Resource Center
4040 North Fairfax Drive, Room 420
Arlington, VA 22203-1635
Phone: 703-696-9053
DSN: 426-9053

US Army Family Advocacy Program
HQ DA, CFSC-FP
Department of the Army
4700 King Street, 4th Floor
Alexandria, VA 22302-4418
Phone: 703-681-7396/93
US Navy Family Advocacy Program
Naval Personnel Command P661
Department of the Navy
5720 Integrity Drive
Millington, TN 38055-6610
Phone: 901-874-4355
DSN: 882-4355

US Air Force Family Advocacy Program
AFMOA/SGZF
2664 Flight Nurse, Building 801
Brooks AFB, TX 78235-5135
Phone: 210-536-2031/32
DSN: 240-2031/32

US Marine Corps
HQMC M&RA (MRO)
3280 Russell Road
Quantico, VA 22134-5009
Phone: 703-784-9546
DSN: 278-9546