

FINAL – INFORMATION PAPER

4 March 2024

PURPOSE: To provide a response to the Defense Advisory Committee on Women in the Services (DACOWITS) Related to the Request for Information on the 2019 Domestic Abuse Recommendations

THRU: Military Community and Family Policy (MC&FP), Military Community Advocacy (MCA)

Background: In accordance with DACOWITS' Terms of Reference, the Well-Being and Treatment (WB&T) Subcommittee will assess updates to the DoD Instruction 6400.06, "*Domestic Abuse Involving DoD Military and Certain Affiliated Personnel*," dated May 16, 2023, and determine whether the DACOWITS' 2019 recommendations related to domestic abuse were implemented. In addition, the WB&T Subcommittee will examine the status, increase, or decrease in domestic abuse incidents; the effectiveness of current DoD and Military Services' policies; and evaluate whether there are additional policy inconsistencies that need to be remedied (e.g., definition of intimate partner).

MCA is pleased to respond to with the following questions:

a. MCA: What is the implementation status of Congressionally mandated central database and identify what data will be collected, to include the proposed data fields? Identify whether there will be any data identifying how many of the "unique" abusers are repeat offenders and number of different incidents? What accountability measures have been imposed (e.g., NJP, court-martial, MPO, other), and what risk factors have been identified? Will restricted report numbers and other non-confidential data be reported/collected?

RESPONSE:

The Department is designing and gaining CCR consensus on an approved workflow for data collection and building out requirements for development, to include resourcing needs. Development of a comprehensive database must include the capacity to identify repeat offenders across incidents and track an incident of abuse from report through final disposition. This includes abuser accountability through punitive action and/or treatment and rehabilitation participation. Ultimately, data collection will allow the Department to identify and address gaps and missteps that can support both prevention efforts and improvement of the coordinated community response. The database will include the capacity to track and protect data on restricted reports, to include which restricted reports are converted to unrestricted reports.

b. MCA: The 2023 RAND Corporation report on Domestic Abuse in the Armed Forces Improving Prevention and Outreach presents a series of prevention and other strategies to address IPV/DA. What actions is DoD considering for implementation or for enhancing existing programs? Describe intended actions.

REPOSENSE:

Section 549C of the Fiscal Year (FY) 2021 National Defense Authorization Act (NDAA) required an independent analysis and recommendations on issues related to domestic violence in the Armed Forces. This study is being conducted in three phases. Phase I is complete with recommendations. In phase I, RAND conducted a systematic scoping literature review and subject matter expert panels on domestic abuse (DA) prevention, outreach to individuals with risk factors for DA, and corresponding prevention activity metrics and measures. RAND also developed a confidential survey of military couples to assess

risk factors for DA, barriers to accessing resources, anonymous initial entry points to services, and potential outcomes. RAND researched the risk of DA at different points of the military career lifecycle to determine when risk of DA is highest. RAND also looked at strategies to prevent DA through training and education and assessed whether prevention would be enhanced by raising the disposition authority for domestic violence offenses.

The completed phase I report provided 17 recommendations, 13 of which were actionable and 4 that were already implemented. The RAND report noted that “Since the strategies, as presented in this report, are preliminary, we do not recommend that oversight authorities move forward to implement recommendations solely on the basis of this report”; this is because the recommendations have not been validated in a current military environment. Personnel and Readiness (P&R) did not agree with the assessment and considers the recommendations as actionable because they are founded in the best practices across the field. Many of the recommendations also align with the Centers for Disease Control (CDC):

RECOMMENDATION 1: *Implemented.* Develop and deliver a military-specific domestic abuse prevention education and training curriculum for Service members and their spouses/partners. This recommendation aligns with the category “Teach Safe and Healthy Relationship Skills” from the CDC.

- Family Advocacy Program (FAP) completed two updates to current training material for leaders since this recommendation and published changes on the Joint Knowledge Online platform, which allows improved access from Service members into the course. The training addresses prevention and response to DA.
- MCAD conducted an environmental scan in August of 2022 and evaluated opportunities to develop more targeted training for Service members and their spouses/partners.
- MC&FP is collaborating with the Office of Force Resiliency (OFR) following the report from the Suicide Prevention and Response Independent Review Committee (SPRIRC) and has continued efforts to address this recommendation. The Defense Suicide Prevention Office has been invited to be a regular participant on the annual MCA fatality review summit.

RECOMMENDATION 2: *Implemented.* Expand the types of services available to support individuals and couples struggling with relationship and parenting issues. This recommendation aligns with the category “Teach Safe and Healthy Relationship Skills” from the CDC.

- New Parent Support Program, non-medical counseling, chaplains, and the FAP provide expanded services to support individuals and couples struggling with relationship and parenting issues.

RECOMMENDATION 3: Address abusive leadership behaviors in the workplace and provide guidance on military-appropriate leadership skills that are not well-suited to the home. This recommendation aligns with the category “Teach Safe and Healthy Relationship Skills” from the CDC.

- MC&FP will explore the opportunity to guide and implement additional training to commanders to address abusive leadership in collaboration with OFR based on the SPRIRC report.

RECOMMENDATION 4: *Implemented.* Prepare military leaders to actively participate in prevention activities and convey the expectation that they will participate. This recommendation aligns with the category “Engage Influential Community Members” from the CDC.

- DoD Instruction (DoDI) 6400.06, “DoD Coordinated Community Response to Domestic Abuse Involving DoD Military and Certain Affiliated Personnel,” published in December of 2021 expanded DA training to all Service members. DoDI 6400.06 clearly defines the roles of Military Personnel in preventing and responding to DA.

- MCAD has paired with OFR to participate on the Onsite Installation Evaluations (OSIE) to evaluate the implementation of integrated prevention throughout the military Departments.

RECOMMENDATION 5: *Implemented.* Engage peers and survivors in planning, implementing, and assessing domestic abuse prevention education, training, and information awareness campaigns. This recommendation aligns with the category “Engage Influential Community Members” from the CDC.

- FAP conducted interviews with military spouses from different communities to include LGBTQ+, the National Guard, and Hispanic military spouses. The information collected is currently used in new products in prevention education, training, and information awareness campaigns.

RECOMMENDATION 6: Focus on spouse and partner supports and community integration to counter isolation and dependency risk factors. This recommendation aligns with the category “Create Protective Environments” from the CDC.

- MC&FP met a Congressional mandate to conduct an initial entry study to determine by December of 2022 where Service members, family, and intimate partners were first learning about resources to prevent and respond to DA.
- MC&FP is evaluating opportunities to better integrate messaging off-installation in communities where military families reside.

RECOMMENDATION 7: Improve prevention by increasing efforts to hold perpetrators convicted of the crime of domestic violence and their leaders accountable for their actions. This recommendation aligns with the category “Create Protective Environments” from the CDC.

- MC&FP is working to establish a DA database in order to understand the applicability of command action. MC&FP will finalize a database development plan by the end of FY 2023.

RECOMMENDATION 8: Coordinate and promote efforts to help relieve family financial stressors that can be risk factors for domestic abuse. This recommendation aligns with the category “Strengthen Economic Supports for Families” from the CDC.

- FAP produced and disseminated an updated version of FAP for Service Providers training in November of 2022 on the MilLife learning platform. We are currently completing the next iteration of updates.. The training is geared for non-FAP personnel, such as financial counselors, to understand how to respond to DA.
- The MCA continues to work with the Services to train and educate on what services are currently available to reduce financial stressors, which may be a risk factor for DA.

RECOMMENDATION 9: Partner with community organizations to facilitate outreach and avenues for assistance. This recommendation aligns with the category “Support Survivors to Increase Safety and Lessen Harm” from the CDC.

- FAP will continue to encourage local-level memorandums of understanding (MOUs) between a Service FAP and community agencies where they are needed. Ongoing discussions about MOU best practices and agreements will continue to take place in OSD FAP Quarterly meetings and CCR meetings.

RECOMMENDATION 10: In military messaging, outreach, and interactions, include language that can reduce stigma, normalize experiences, and encourage help-seeking. This recommendation aligns with the category “Support Survivors to Increase Safety and Lessen Harm” from the CDC.

- FAP has started to take action on this recommendation by updating language in policy and materials. FAP has included language that is inclusive in policy revisions, engaged Service Headquarters staff in discussions on use of language and word choice, and is actively

updating materials that are published on webpages in Military OneSource, briefings, and other materials disseminated to the Services.

RECOMMENDATION 11: Confidentially screen for risk factors for domestic abuse and offer confidential assistance and intervention planning to prevent abuse from occurring. This recommendation aligns with the category “Support Survivors to Increase Safety and Lessen Harm” from the CDC.

- FAP will evaluate opportunities for additional screenings and intervention. Auburn State University completed a literature review of risk assessment tools, which is being used to inform future tools.
- MCA has contracted with National Organization for Victim Advocacy (NOVA) and is exploring options for risk assessment tools.

RECOMMENDATION 12: Improve efforts to help those with risk factors who are concerned about their safety. This recommendation aligns with the category “Support Survivors to Increase Safety and Lessen Harm” from the CDC.

- The Under Secretary of Defense for Personnel and Readiness created a Coordinated Community Response (CCR) Executive Steering Committee (ESC) in February of 2022 to increase safety and improve response to DA.
- The CCR ESC is actively engaged in implementing activities to improve the coordinated community response to DA. One area of focus is on victim safety to include standardizing risk and lethality assessment in FAP and law enforcement response and improving information sharing and communications.
- MCA has contracted with NOVA and is exploring options for risk assessment tools.

RECOMMENDATION 13: Increase the number of prevention and education specialists and providers to increase capacity to focus on prevention before domestic abuse occurs. This recommendation aligns with the category “Strengthen the Prevention System” from RAND.

- FAP is in the process of finalizing a staffing tool to better right-size FAP personnel at the installation-level with expected full implementation of the tool in 2025.
- FAP has re-evaluated minimum job requirements to ensure that the most appropriate and educated prevention staff are hired across the military departments.

RECOMMENDATION 14: Integrate domestic abuse prevention activities within other violence prevention programs and other efforts to reduce risk factors. This recommendation aligns with the category “Strengthen the Prevention System” from RAND.

- FAP regularly collaborates and coordinates with other violence prevention programs within the Department and will actively be involved in collaborations resulting from the SPRIRC report.

RECOMMENDATION 15: Collect and use data on domestic abuse prevention activities and resources and potential impacts. This recommendation aligns with the category “Measuring, Monitoring and Evaluating Prevention Strategies” from RAND.

- The Department is in the process of creating a DA database and is working closely with the new primary integrated prevention workforce.

RECOMMENDATION 16: Conduct population surveys with Service members and spouses or partners. This recommendation aligns with the category “Measuring, Monitoring and Evaluating Prevention Strategies” from RAND.

- FAP will evaluate how it might conduct population surveys in the future following Phase II of this Independent Review Analysis.

RECOMMENDATION 17: Conduct surveys or interviews with users of domestic abuse prevention resources. This recommendation aligns with the category “Measuring, Monitoring and Evaluating Prevention Strategies” from RAND.

- FAP continues to work with RAND on this Independent Review Analysis aimed at understanding experiences of members of the military community around DA.

c. MCA and Military Services: Provide copies of the annual fatality reports required by DoDI 6400.06 from FY12-FY22. Provide information (from FY12-FY22) on what action was taken, and the result, against those abusers believed to be criminally responsible for a victim’s death? How many fatalities were of undetermined cause?

RESPONSE:

The Coordinated Community Response Executive Steering Committee identified Fatality Review as one of the five lines of effort on the logic model guiding activities aimed at improving the Department’s response to domestic violence (see attached CCR Logic Model). Current policy on conducting Fatality Reviews, found in Chapter 8 of DoDI 6400.06, lacks sufficient guidance on standardizing Fatality Review Boards, does not require comprehensive coordinated community response member participation at the DoD Fatality Review Summit, and does not incorporate a process for systematically addressing recommendations that result from the Fatality Review Board findings.

Military Community Advocacy is currently building a plan of action and milestones (POAM) to restructure the Fatality Review process, using best practices from the civilian domestic violence field, and rewrite policy, with the goal of rolling out a new process beginning fiscal year 2027.

DoD’s contract with the NOVA includes customized support for improvements to risk and lethality assessment and fatality prevention across the CCR, which includes fatality review, and efforts to connect with state coalitions that excel in this work are already underway.

d. MCA and Military Services: Provide data regarding participation in the CATCH program outlined in DoDI 6400.06. How long has that program been in effect and how many alleged serial offenders involved in IPV/DA have been identified/entered into the system since inception of that program?

RESPONSE:

Military Community Advocacy published the Department of Defense Instruction 6400.06, “DoD Coordinated Community Response to Domestic Abuse Involving DoD Military and Certain Affiliated Personnel” change one in December 2021 and added parameters for the military Departments to use the CATCH Program. The MCA team worked on CATCH guidelines and supplemental materials specific for the Family Advocacy Program (FAP) staff and disseminated it to the Services. MCAD conducted a series of six trainings between November and December 2022 and provided the Service Headquarters training slides to use when they provided future CATCH trainings to newly identified CATCH Report Managers or Admins. One additional training was completed by MCA upon request in September 2023.

As of February 2024, there were a total of 22 requests for a CATCH password and 9 entries submitted across all Services. There were zero CATCH matches.

e. MCA and Military Services: Have you conducted any surveys addressing the topic/soliciting information about the incidence of IPA/DA? If so, provide dates and findings of those surveys.

RESPONSE:

In March 2023, the Department published “Prevalence and Characteristics of Intimate Partner-Related Sexual Violence in the Active Component” based on the 2021 Workplace and Gender Relations (WGR) Survey of Military Members. As noted in the report title, this analysis was limited to estimating the prevalence of sexual violence in intimate partner relationships. Prevalence of the broader scope of intimate partner abuse/violence was not estimated. The estimated rate of past year intimate partner-related unwanted sexual contact was 0.9% for women and 0.1% for men in the Active component. Intimate partner incidents accounted for 11% and 9% of all unwanted sexual contacts experienced by women and men, respectively, which means that approximately 1 in 10 unwanted sexual contacts experienced by Active component members involve an intimate partner (as defined by DoDI 6400.06).

Collectively, findings suggest the experience of intimate partner-related unwanted sexual contact, though rare overall, is persistent when it occurs, spanning multiple incidents and involving multiple harms, which is consistent with the pattern of behaviors constituting domestic abuse. As such, active duty component women who experience intimate partner-related unwanted sexual contact may be at higher risk for a variety of negative outcomes, which may warrant additional examination of policies, procedures, and support services to ensure military members who experience unwanted sexual contact at the hands of an intimate partner get the support they need to stop the abuse and heal so they can continue to serve in the military to the highest extent that their interests and abilities warrant.

In December 2021, the Centers for Disease Control and Prevention published “Prevalence of Intimate Partner Violence, Stalking, and Sexual Violence Among Active-Duty Women and Men and Wives of Active-Duty Men—Comparisons with the U.S. General Population, 2016/2017.” This study estimated prevalence of a broader scope of intimate partner violence than the study from the WGR. However, both studies excluded non-married civilian partners who may make reports of intimate partner abuse to the Family Advocacy Program and receive a warm hand-off to civilian services. Key findings include:

- Overall, lifetime and 12-month prevalence estimate of IPV, SV, and stalking were similar or lower in the military sample than in the general U.S. population. Overall, lifetime and 12-month prevalence estimate of IPV, SV, and stalking were similar or lower in the military sample than in the general U.S. population.
- Nearly sixty percent (58.8%) of women in the general population aged 18 to 59 years experienced lifetime contact sexual violence, compared to 53.7% of active-duty women and 52.2% of wives of active-duty men.
- Over half (55.6%) of women in the general population aged 18 to 59 years have experienced psychological aggression by an intimate partner during their lifetime, compared to 45.0% of active-duty women and 46.3% of wives of active-duty men.
- Approximately half (50.6%) of women in the general population aged 18 to 59 years have experienced lifetime contact sexual violence, physical violence, or stalking by an intimate partner, compared to 39.8% of active-duty women and 41.2% of wives of active-duty men.
- Among the few comparisons that were significantly different, active duty women and wives of active duty men were less likely to experience some forms of IPV in the past 12-months compared to the general population of women.
- Active-duty women and wives of active duty men were also less likely to experience stalking by a non-intimate compared to the general population of women, but there were few additional differences.
- Approximately one-third (34.4%) of men in the general population and 18.6% of active duty men aged 18 to 59 years experienced contact sexual violence during their lifetime.

- Approximately half (50.6%) of men in the general population aged 18 to 59 years have experienced psychological aggression by an intimate partner during their lifetime, compared to 32.9% of active-duty men.
- Nearly half (47.1%) of men in the general population and 34.3% of active duty men aged 18 to 59 years have experienced lifetime contact sexual violence, physical violence, or stalking by an intimate partner.

Currently RAND is analyzing survey results to estimate the prevalence of domestic partner abuse in the military, in accordance with requirements in section 549C of the NDAA of FY 2021.

f. MCA and Military Services: Provide the number of restricted reports received in the years FY12 through FY22, in the same format and with all the same categories reported for unrestricted reports in the December 2023 QBM meeting. If you do not have all that data available, provide as complete a report as possible and identify where you lack specific data fields. At minimum, local installation FAPs should have these numbers even though DoD collects only unrestricted report data. If your Service does not have a complete data set of restricted reports, explain why that data is not collected and what efforts may be underway to collect and analyze it.

RESPONSE:

Beginning in FY 2020, OSD began collecting the aggregate number of restricted reports of domestic abuse received per fiscal year. MCA is unable to disaggregate the total number of restricted reports by abuse type. It is important to note that some restricted reports are subsequently converted to unrestricted reports. Those restricted reports of domestic abuse that were converted to unrestricted reports were included in the unrestricted counts previously provided.

Prior to FY 2020, OSD collected the number of domestic abuse victims who made restricted reports to clinicians and the number of domestic abuse victims who made restricted reports to DAVAs, as two separate metrics. The pre-FY 2020 metric counted victims but did not count individual reports. An additional limitation of the pre-FY 2020 metric is that victims could be counted in both categories (i.e., reports to clinicians and reports to DAVAs) depending on the number of restricted reports of domestic abuse made to FAP, overall. Given these limitations, MCA is providing restricted reports of domestic abuse from FY 2020-FY 2022.

	FY 2020	FY 2021	FY 2022
Number of Restricted Reports Made to FAP in the FY	1,345	1,228	1,473
Number of Restricted Reports Made to FAP That Were Converted to Unrestricted Reports in the FY	162	255	281

g. Military Services: Is information regarding restricted reports, types of allegations involved, and the assessed threat level reported to the installation Incident Determination Committee (IDC) (or other group-define) and relevant command authorities (recognizing identifying information is confidential) to assure awareness and enhance outreach/training/other community prevention efforts?

No MCA Response

h. Military Services: How many nonjudicial punishment or court-martial actions have been taken against military Service members for:

- i. Violations of UCMJ Article 128B or its previously equivalent predecessor articles for domestic or IPV violence from FY12-FY22; and**
- ii. MPO or CPO violations from FY12-FY22?**

No MCA Response

i. MCA and Military Services: How many reported abuse/violence incidents have resulted in an imminent danger assessment from FY12-FY22 (as defined in DoDI 6400.06)? Identify by gender the abuser and victim, category of abuse/violence, and whether incident involves intimate partners or spouses.

RESPONSE:

Neither “imminent danger” nor “imminent danger assessment” are defined in DoDI 6400.06. Rather, the term refers to the existence of risk factors enumerated in Paragraph 3.1.d, which are currently assessed by Family Advocacy using risk and lethality assessment tools for designated staff. In addition, some Services employ a high risk for violence response team model, whereby they rapidly convene the CCR members to discuss risk factors and any actions various entities can employ to support safety planning for the victim. The Department is deeply engaged in robust work to improve risk and lethality assessment and safety planning actions to support victims. Section 549(c)(1)(H) of the Fiscal Year 2022 NDAA mandates that “The Secretary of Defense, in consultation with the Secretaries of the military departments, shall issue guidance that (i) identifies the risk assessment tools that must be used by Family Advocacy Program personnel to assess reports of domestic abuse; and (ii) establishes minimum qualifications for the personnel responsible for using such tools.”

The Department recognizes that to support a high-functioning, coherent, uniform CCR risk and lethality assessment must be conducted not just by Family Advocacy but by multiple entities within the CCR with whom a victim may interact. Additionally, information on risk factors must be shared appropriately across the CCR in order to mitigate danger. DoD is under contract with the NOVA, and one of the content areas is to identify appropriate risk and lethality assessment tools that DoD can implement not only within FAP, but across the CCR entities that share collective responsibility for responding to incidents of domestic abuse. NOVA will provide information, research, and consultation to support the development of a standard protocol for risk and lethality assessment across the DoD CCR, to include the use of appropriate tools by different components of the DoD CCR. To support the protocol, NOVA will develop online training modules, host customized multi-disciplinary trainings, and facilitate connections between military installations and civilian communities who are also implementing domestic violence homicide prevention initiatives.

j. MCA and Military Services: Although the metrics collected represent only unique victims and abusers, do you have data identifying how many abusers are repeat offenders (i.e., are identified as the abuser in more than one incident)? If so, please provide that data for FY12-FY22 or for as many of those years as possible.

RESPONSE: From FY 2012-FY 2022, there were a total of 71,351 unique abusers involved in met criteria incidents of domestic abuse. Among those 71,351 unique abusers, 7,599 were involved in a subsequent met criteria incident of domestic abuse during that same time period. Note that for data provided by fiscal year, counts of unique abusers appear in the *first year* in which re-abuse occurred regardless of the number of subsequent met criteria incidents of domestic abuse in which an abuser was involved. This method ensures that re-abusers are counted only once.

See attached DACOWITS_RFI_DA_Re-abusers document.

k. MCA and Military Services: What is your Service's progress on implementing a coordinated community response process IAW DoDI 6400.06? Outline the process, agencies involved, and their respective responsibilities. How often does the group meet and do they undertake analysis of incidents to identify trends, repeat offenders, or other important indicators? Are commanders tasked, and how, to identify actions taken to hold abusers accountable via administrative or disciplinary action when circumstances warrant such actions?

RESPONSE:

Military Community Advocacy formally stood up a Coordinated Community Response function in March 2023. The team is comprised of 3 personnel with the mission of bringing together all entities across the Department of Defense and within the Military Departments that have equity in an incident of domestic abuse and child abuse and neglect, to improve interagency coordination in delivering a coherent, uniform process that enhances victim safety and holds abusers accountable. CCR is designed to serve as a sustained, coordinating function that collaborates and supports each component in fulfilling its role in the process.

The standard components that comprise the military CCR are law enforcement (military police and criminal investigative organizations), legal (Offices of Special Trial Counsel and Service TJAGs), the Family Advocacy Program, medical, command, Chaplains, and civilian partners and organizations. The OSD CCR team supports the Coordinated Community Response Executive Steering Committee, established by USD P&R in February 2022, which is comprised of senior executives from all entities within the CCR. The CCR ESC focuses on governance of DoD activities dealing with the awareness, prevention of, and response to domestic abuse and child abuse and neglect in the military. The ESC approved the attached logic model to guide priority activities in October 2022, and is in the process of ratifying a charter.

l. Military Services: What are the challenges your Service faces in providing adequate victim services access and coverage, particularly at OCONUS and remote locations? For example, what is the personnel staffing situation in regard to the number of DAVAs, clinical providers and special victims counsel? Are you adequately staffed and funded to provide required victim services access and coverage at military installations? What is the situation at your OCONUS and remote installations?

No MCA Response.

m. MCA and Military Services: The most recent change to DoDI 6400.06, para 4.1, enables the Military Departments to implement mandatory training at a frequency determined by the Military Services instead of annually. Provide information on the number, types, and titles of training your Service conducts, the target audiences for each, the training's frequency, and copies of that training.

RESPONSE:

OSD CCR is engaged with the Military Departments to explore joint development of force-wide education on healthy relationships and healthy conflict resolution that will accessibly integrate required training on domestic abuse awareness and resources. Ultimately OSD CCR seeks to collaborate with other programs within the Office of Force Resiliency to create integrated, engaging education that seeks to address the root causes and shared risk factors of harmful behaviors while equipping military members with life skills that support their holistic wellness and interpersonal relationships at all levels.