

DEPARTMENT OF THE NAVY  
Office of the Chief of Naval Operations  
Washington DC 20350-2000

OPNAVINST 1752.2A  
Pers-06/6  
17 July 1996

OPNAV INSTRUCTION 1752.2A

**From:** Chief of Naval Operations  
**To:** All Ships and Stations (less Marine Corps field addressees not having Navy personnel attached)

**Subj:** FAMILY ADVOCACY PROGRAM

**Ref:** (a) DOD Directive 6400.1 of 23 Jun 92 (NOTAL)  
(b) SECNAVINST 1752.3A  
(c) DOD Directive 6400.2 of 10 Jul 87 (NOTAL)  
(d) Public Law 101-647, Crime Control Act of 1990 (NOTAL)  
(e) 10 U.S.C. Section 1058  
(f) DOD 6400.1-M of Aug 92 (NOTAL)  
(g) SECNAVINST 1910.4B (NOTAL)  
(h) SECNAVINST 1920.6A  
(i) DOD Instruction 1030.2 of 23 Dec 94 (NOTAL)  
(j) SECNAVINST 5800.11A  
(k) SECNAVINST 5211.5D  
(l) SECNAVINST 5720.42E  
(m) DOD Instruction 1402.5 of 19 Jan 93 (NOTAL)

**Encl:** (1) Definitions  
(2) Preventing Abuse and Revictimization: Guidelines on Prevention and Victim Information  
(3) Guidance Regarding Rights under Article 31b, Uniform Code of Military Justice  
(4) Initial Reporting Requirements and Command Notification  
(5) Guidance for Law Enforcement and other First Responders in Spouse Abuse Cases  
(6) Military Protective Orders  
(7) Family Advocacy Case Review Committee Guidelines  
(8) Management of Child Sexual Abuse Cases  
(9) Procedures for Review of CRC Decisions  
(10) Guidance for Maintenance of FAP Records

(11) Guidance for Overseas and Isolated Areas  
(12) Training for Key Responders

1. **Purpose.** To revise the policy and program guidance for the Family Advocacy Program (FAP). This instruction is a complete revision and should be reviewed in its entirety.

2. **Cancellation.** OPNAVINST 1752.2.

3. **Definitions.** Terms relating to the FAP and used in this instruction are defined in enclosure (1). For purposes of this instruction, the term child abuse encompasses child neglect.

4. **Policy.** This instruction implements the policies set forth in references (a) and (b), and is in consonance with references (c) through (m).

a. Spouse and child abuse has a negative effect upon military readiness, effectiveness, and good order and discipline. Accordingly, response to spouse and child abuse is a leadership issue. Commanding officers will undertake a continuous effort to reduce and eliminate child and spouse abuse at every level of the command. When suspected child or spouse abuse by a servicemember comes to the attention of the member's commanding officer, he or she will take prompt action to include holding the member accountable for his or her behavior. Additionally, commanding officers shall undertake measures to prevent further violence to the victim(s), and promote victim safety.

b. The five primary goals of the FAP are: prevention; victim safety and protection; offender accountability; rehabilitative education and counseling; and community accountability/responsibility for a consistent and appropriate response. Prevention guidelines are found at enclosure (2). (See also, enclosures (5), (6), and (11).)

c. This instruction provides only internal guidance to protect and assist actual or alleged



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victims of child and spouse abuse. It is not intended to and does not create any rights, substantive or procedural, enforceable at law by any victim, witness, suspect, accused, or any other person, in any matter civil or criminal. No limitations are placed on the lawful prerogative of the Navy or its officials.

**5. Program Guidance**

**a. Program Components.** The FAP is a line-managed, multi-disciplinary program. The commanding officer of each installation shall appoint a Family Advocacy Officer (FAO) and ensure a Case Review Committee (CRC) and a Family Advocacy Committee (FAC) are established. Where available, FAP Regional Coordinators are responsible for developing (in partnership with the local FAOs) a comprehensive community-based approach to family violence, and overseeing the technical and clinical aspects of the program in their regions. Another program component is the Family Advocacy Representative (FAR), who is responsible for the intervention/rehabilitation aspects of the program. Each command will designate a point of contact who will coordinate with the FAR, and monitor the status of each case. A Headquarters Review Team (HRT), a Child Sexual Abuse Review Board (CSARB), and Regional Child Sexual Abuse Response Teams (RCSART) shall provide technical assistance, monitoring, and review of FAP cases as necessary. (Enclosure (1) provides clarification of these terms.)

**b. Self-Referral.** Early intervention can be achieved by encouraging offenders and potential offenders to seek assistance. At the command and installation level, members may voluntarily refer themselves to a FAR, medical officer, or FAP/Family Service Center (FSC) counselor. Self-referral for abusive behavior does not insulate a member from initiation of disciplinary and administrative action, and does not limit the use of a member's statements in such proceedings. [Enclosure (3) provides guidance on advisement of Article 31b, Uniform Code of Military Justice

(UCMJ), rights]. Statements made by a member under self-referral are not privileged or protected from use as evidence, except when made to a chaplain, if such communication is made either as a formal act of religion or as a matter of conscience, or to an attorney when the attorney-client privilege applies. Commanding officers may consider voluntary self-referral and acceptance of responsibility as factors in mitigation when determining appropriate case disposition.

**c. Reporting Requirements and Command Notification.** Incidents involving child and spouse abuse must be reported under references (b), (c), (d), and (e). Enclosure (4) provides detailed guidance on reporting requirements and command notification. Additionally, military members are required by Navy Regulations to report offenses that come under their observation, except when such persons are themselves already criminally involved in such offenses. This instruction does not modify or alter that duty.

**d. Suspected Criminal Conduct**

(1) Commands and/or the FAR must notify Naval Criminal Investigative Service (NCIS) in all cases of child sexual abuse and base security/police in cases of child or spouse abuse in which there is a major physical injury or indication of a propensity or intent by an individual to inflict major physical injury as defined in enclosure (1). In such cases, interviews of suspected offenders shall not be conducted without the knowledge and consent of NCIS. NCIS will provide pertinent investigative information to the appropriate commanding officer and the FAR as soon as circumstances reasonably permit, and will assist in obtaining reports of child and spouse abuse incidents, and investigative information from other geographic areas or jurisdictions. Such information should be provided to the FAR as early as possible.

(2) In child and spouse abuse incidents arising on Navy installations with exclusive Federal or concurrent Federal and State jurisdiction, Navy law enforcement officials shall respond immediately

to reports involving imminent danger. When Navy law enforcement officials respond to calls involving allegations of spouse abuse, they should follow the guidance contained in enclosure (5). NCIS is designated as the principal liaison with civilian law enforcement agencies. Law enforcement agents will assist commanding officers in obtaining copies of documents relating to civil convictions involving child and spouse abuse, so that appropriate service-record entries and a decision as to administrative processing may be made.

**e. Case Management.** When allegations of child and spouse abuse come to the attention of the command, the FAR shall be notified. Similarly, when the FAR is apprised of allegations from any source involving abuse, the FAR shall inform the member's command and law enforcement officials in accordance with enclosure (4).

**(1) Victim Safety and Protection.** Upon discovery of allegations of child or spouse abuse, and throughout the processing of FAP cases and any associated disciplinary actions, commands shall take reasonable steps to ensure the safety of alleged victims and witnesses. Responsive actions could include working with the FAR to develop a safety plan for the victim(s), issuing orders barring persons from Navy installations, and providing other appropriate assistance to the victim(s), e.g., referral to a Victim Services Specialist (VSS). A list of measures to prevent re-abuse, promote victim safety, available victim benefits, and a sample victim information sheet is found in enclosure (2). Such assistance may include providing access to shelters or safe houses, medical assessment and care as appropriate, provision of counseling services, and issuance of military protective orders (MPO). A sample MPO is found at enclosure (6).

**(2) CRC.** All incidents of child and spouse abuse which result in the initiation of a FAP case will be reviewed by the local multi-disciplinary CRC. Composition of the CRC and guidelines for CRC determinations are found at enclosure (7). If abuse is substantiated by the CRC, an individual

case intervention plan for the offender will be developed in accordance with reference (f). The FAR or designated case manager will ensure that victim safety planning and protection issues are available prior to the command's determination as to appropriate disciplinary/administrative action, and will inform the member's command of the CRC findings and recommendations. The installation CRC in conjunction with the FAR shall be responsible for monitoring all family violence cases to ensure victim safety, and shall keep the member's command and the victim apprised of progress. Once the case has been determined to be either substantiated or unsubstantiated, the FAR shall submit the Child and Spouse Abuse Incident Report (DD 2486) to the Navy Central Registry. If the allegations are unsubstantiated, the case shall be closed. All findings and recommendations made by the CRC should be made in a timely manner, i.e., not to exceed 90 days from receipt of the allegation, unless unusual circumstances exist (e.g., child sexual abuse allegations, or member and/or victim are deployed).

**(3) Disciplinary/Administrative Action.** Offenders must be held accountable for their actions, as appropriate. The decision to proceed with disciplinary action is a matter within the sole discretion of the member's commanding officer. In making this determination, commanding officers should consider victim safety and protection issues, risk assessment, and CRC recommendations, if available. Disciplinary or administrative proceedings need not be delayed pending such recommendations. The command must, at a minimum, ensure that allegations are properly investigated and documented. Commands must make a determination as to appropriate disciplinary action and administrative separation processing no later than 30 days from receipt of the CRC's recommendations, unless unusual circumstances exist (e.g., child sexual abuse cases, or member and/or victim are deployed). If disciplinary or administrative action is warranted or required (e.g., child sexual abuse cases or spouse/child abuse incidents that either resulted in, or had the potential to result in death, or serious bodily harm) the FAR

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or other knowledgeable subject matter specialist may be called as a witness, when reasonably available, to provide expert testimony concerning the type and nature of the abuse in question.

**(4) Rehabilitation/Behavioral Education and Counseling.** In all cases of family violence the FAR or case worker will recommend intervention options to the command. The commanding officer will offer interim FAP rehabilitation, education, and counseling services to suspected or substantiated offenders; however, provision of such services shall not delay, limit, or preclude appropriate disciplinary and administrative action. This includes action taken with respect to unrelated misconduct or any administrative separation authorized by references (g) or (h). Long-term rehabilitation, education, and counseling (services requiring 6 months or more of counseling) should primarily be made available to those members who have demonstrated a desire to end their abusive behavior and have definite potential for future productive service. Access to rehabilitation, education, and counseling for offenders is not a right or a requirement.

**(a) Intervention Options.** Family violence is a generic term which encompasses several specific types of abuse, e. g., child physical, sexual and emotional abuse; and spousal physical, psychological, and sexual abuse. Appropriate intervention options must be tailored to address each identified type of abuse for offenders, victims, and involved family members. These options should be based on the assessed severity of abuse and risk of reoccurrence.

**1.** Victim intervention should focus on: crisis intervention and referral to available community support resources which help ensure victim safety; counseling, support services, medical care, and compensation benefits to promote healing; and the development of strategies to minimize the risk of future victimization.

**2.** Offender intervention should focus on: helping the offender to immediately stop

the abuse by changing his/her behavior through administrative and legal actions; education and counseling to address destructive attitudes and learned behaviors; and furthering the protection of victims by helping to change relevant situational factors (e. g., alcohol use, lack of child care, firearms in the home, and financial problems).

**3.** Involved family member intervention should focus on: crisis intervention and safety planning; provision of information regarding available community support resources; and individual assessment to determine appropriate level of services to be provided.

**(b) Child Physical Abuse and Spouse Abuse.** The CRC shall make recommendations to the member's command concerning interventions for victim and family member safety, education and support; and appropriate rehabilitation, education, and counseling for the offender. Offenders who are determined by their commanding officers to be eligible for rehabilitation may be offered appropriate FAP services (interim or long-term education and counseling). Factors to be considered when making decisions about retention and the provision of rehabilitation, education, and counseling services include: military performance and definite potential for productive future service; prognosis for successful completion of rehabilitation, education, and counseling programs, as determined by a provider with expertise in family violence issues; the extent to which the alleged offender accepts responsibility for his or her behavior; the extent and seriousness of the abuse(s); and other factors deemed appropriate by the commanding officer.

**(c) Child Sexual Abuse**

**1.** Commands shall immediately report allegations involving either incest or extra-familial child sexual abuse to base security/police and NCIS, and to the Bureau of Naval Personnel (BUPERS) (Pers-8 and Pers-6). Victims and other family members will be provided crisis intervention and appropriate victim advocacy

services by FAP personnel. Commands will keep Pers-8 apprised of the status of the case and the investigation. Additionally, commands are encouraged to request assistance and guidance on victim safety issues from Pers-6. Enclosure (8) provides additional guidance.

2. Suspected child sexual abuse offenders may not be interviewed by FAP personnel without the express consent of NCIS and prior consultation with the member's commanding officer. Interim rehabilitation, education, and counseling services and specialized sexual offender assessment will be offered to the alleged offender after the FAR consults with the member's commanding officer. Alleged offenders may participate in interim rehabilitation, education, and counseling; however, participation in such programs may not delay completion of appropriate disciplinary/administrative action. (See enclosure (3) for guidance on advisement of Article 31b, UCMJ, rights, and the use of information obtained from the alleged offender.) The CRC will review all allegations of child sexual abuse and report their findings and recommendations to the member's commanding officer who will take appropriate action.

3. Members convicted of allegations involving child sexual abuse by a civil or military court or found to have committed the offense(s) at nonjudicial punishment (NJP) shall be administratively processed for separation. If disciplinary proceedings are not initiated by the command, Pers-8 will review the case and direct administrative processing in substantiated cases.

4. Only those child sexual abuse offenders retained on active duty at the conclusion of all appropriate disciplinary/administrative action shall be eligible for long-term rehabilitation, education, and counseling (to exceed 6 months). Acceptance into a long-term rehabilitation program will be determined by the Chief of Naval Personnel (CHNAVPERS) or his designee. Long-term rehabilitation, education, and counseling for offenders confined as a result of court-martial is limited to those services available in their designated places of

confinement. No additional rehabilitation services will be provided to confinees without the prior approval of CHNAVPERS or his designee.

5. Cases involving child sexual abuse alleged to have occurred in Department of Defense (DOD)-sanctioned out-of-home care settings, such as child care centers, schools, recreation programs, or family home day care, must be reported in accordance with enclosure (4). In cases involving DOD-sanctioned out-of-home care settings, commands are encouraged to use, if available, the RCSARTs (as defined in enclosure (1)).

(5) Rehabilitation Failure and Administrative Processing. Commanding officers should review each case in accordance with the criteria outlined in paragraph 5e(4)(b), unless the allegations involve child sexual abuse (see, paragraph 5e(4)(c)), prior to the provision of counseling services. If the member does not meet these criteria, the member should be processed for separation in accordance with reference (g) or (h). Additionally, members who have admitted to the offenses, or whose cases have been substantiated, or who have been found to have committed the offenses at NJP, or who have been found guilty at a criminal trial and thereafter refuse to cooperate with or complete counseling programs, or who do not cease their abusive behavior during or after a counseling program, or who fail to meet the conditions of court orders or probation, shall normally be processed for separation. Members who have been afforded rehabilitation/counseling services and thereafter do not cease their abusive behavior shall normally be processed as a rehabilitation failure (as defined in enclosure (1)). Nothing in this paragraph limits the right of the commanding officer to take appropriate measures under the UCMJ.

f. Rights of Alleged Offenders. FAP participants will ensure that the legal and administrative rights of offenders and alleged offenders are observed. This includes the right of a member to be notified by the CRC when his/her case will be reviewed. Such notification will be in writing and via the member's commanding officer. The

notification will be given at least 1 week in advance, and will inform the member of the right to present written information to the CRC and to have command representation at the CRC meeting where the member's case will be discussed. Additionally, alleged offenders may, under certain circumstances, request review of CRC determinations to substantiate child/spouse abuse allegations. Procedures for review of CRC decisions are outlined in enclosure (9).

**g. Victim and Witness Assistance.** Victims of abuse must be notified of the services available to them in accordance with references (i) and (j). Victim services shall be coordinated under the Victim and Witness Assistance Program at each installation. Other assistance may include advice on the transitional compensation program, which is managed by Pers-661. Some costs associated with civilian services may be partially reimbursable through State agencies, the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS), TRICARE, or supplemental care funds for active-duty servicemembers. (See also, enclosure (2) for a list of victim benefits.) Victims shall also be notified by the CRC of the date when their cases will be presented to the CRC. They will also be informed of the procedures for requesting review of CRC determinations to unsubstantiate the allegations. Enclosure (9) provides additional guidance.

**h. Privacy Considerations.** FAP records are covered by the Privacy Act and are identified under Family Advocacy Program Systems Notice #N06320-2. FAP records shall be maintained in accordance with this system notice and released only in accordance with references (k) and (1). Further guidance on the administration of FAP records and the systems notice are found at enclosure (10).

**i. Overseas and Remote Locations.** FAP cases arising in overseas and remote locations may require transfer of the member and his or her family to CONUS. Additional guidance for overseas and remote locations, including a sample

Military Child Removal Order, is found at enclosure (11).

**j. Personnel Selection.** Personnel involved in the rehabilitation, education, and counseling of individuals as part of the FAP shall meet DOD-approved standards as defined in reference (f), and Department of the Navy guidance regarding clinical counseling credentials and privileging. In accordance with reference (m), a criminal history background check is required for all FAP staff whose responsibilities include contact with children.

**k. Education and Training.** Personnel involved in the FAP shall be appropriately trained. Such training should focus on how community members, leaders, and agencies can assist in the prevention and reduction of family violence. Enclosure (12) provides additional guidance.

## 6. Action

**a. Chief of Naval Personnel (CHNAVPERS)** shall:

(1) Designate a FAP Manager at the BUPERS-level who will perform the duties and functions listed in reference (b).

(2) Manage, monitor, and coordinate implementation of the FAP policy and guidance, to include distribution of a risk assessment system and a matrix of response options.

(3) Ensure the FAP addresses the various forms of spouse and child abuse as defined in references (a), (c), and (f). Ensure appropriate intervention options are provided for each identified type of abuse.

(4) Identify personnel resources necessary to implement the FAP.

(5) Through Pers-6, provide guidance on education, prevention, and policy and training for personnel administering the FAP. Such guidance will focus on the multi-disciplinary approach and

creation of a comprehensive, coordinated community response to family violence.

(6) Through Pers-8, manage all cases involving allegations of child sexual abuse. Pers-6 will intake information and maintain informational files, and provide consultation on clinical and safety issues. CHNAVPERS or his designee will approve long-term rehabilitation, education, and counseling services in these cases. Pers-6 will be consulted on all cases involving child sexual abuse allegations reportedly occurring in DOD-sanctioned out-of-care settings, (e.g., Child Development Centers, youth activities, family home day care), and will manage those cases involving alleged perpetrators who are non-military.

(7) Issue changes in regard to administrative separation processing for all substantiated child sexual abuse offenders. Additionally, issue changes for rehabilitation/ counseling failure for child and spouse abuse offenders.

(8) Establish standardized criteria for the selection and certification of personnel who educate and counsel individuals as part of FAP.

(9) Prepare annual reports in accordance with references (a) and (c).

(10) Ensure the operation of an automated Central Registry system for collecting and analyzing data on child and spouse abuse, per reference (c).

(11) Implement guidelines for assembling complete case information, managing cases and monitoring the FAP, including policy enforcement, case recommendations, dispositions, outcomes, recidivism, and victim needs.

(12) Develop guidelines for coordination of FAP services with local commands and civilian agencies to ensure a comprehensive and consistent regional response to address child and spouse abuse. At a minimum, these

military/civilian efforts should include the prevention strategies outlined in enclosure (2).

b. Chief, Bureau of Medicine and Surgery shall:

(1) Provide the resources, professional services, and technical assistance to support the medical aspects of FAP.

(2) Ensure the development of eligibility criteria and procedures for FAP client referral for supplemental care.

c. The Judge Advocate General of the Navy shall:

(1) Ensure judge advocates who participate in installation FACs and CRCs receive training in family violence risk factors and abuse dynamics, basic community information and referral, safety planning, and appropriate legal responses.

(2) Ensure judge advocates are made available to the maximum extent possible to be appointed as recorders in all administrative separation boards for child and spouse abuse cases.

d. Regional coordinators shall assist installation commanders in developing Memorandums of Understanding with the appropriate civilian authorities as may be necessary to provide for cooperation and reciprocal reporting of information and development of a community-based approach to family violence. They will ensure the establishment of a RCSART, and the appointment of a FAP Regional Coordinator, as defined in enclosure (1).

e. Installation commanders shall:

(1) In collaboration with the commanding officer of the medical treatment facility (MTF), appoint in writing the CRC members.

(2) Appoint a FAR in realigned sites and a FAO, who will coordinate local efforts to establish a comprehensive, coordinated community response to family violence. The role of the FAO is defined in enclosure (1). The role of the FAR is outlined in paragraph 6f(3).

(3) Establish a FAC, which will be co-chaired by a line officer (O-4 or above), and which will operate in accordance with the following guidance:

(a) Membership of the FAC includes, at a minimum, a clinically privileged member of the MTF staff who will act as the co-chairperson, a judge advocate, FAR, FAO, representatives from base security/shore patrol and NCIS, a chaplain, FSC Director or representative, Naval Drug and Alcohol counselors, a victim advocate, and/or child care and youth services provider.

(b) The area FAC will provide recommendations for FAP policy and procedures; coordinate military and civilian interface and social services delivery; identify long-range, intermediate, and immediate victim, witness, and FAP needs and initiate action for their implementation; and provide an ongoing needs assessment and evaluation of the FAP.

(4) Ensure FAC and CRC participants receive annual training to include family violence risk factors, abuse dynamics, basic community information and referral, safety planning, and FAP's response to family violence.

(5) Ensure base security and/or shore patrol members receive training on family violence. Develop and implement a standard operating procedure (SOP) for responding to calls involving allegations of spouse abuse, using enclosure (5).

f. Commanding officers of MTFs shall:

(1) Collaborate with the installation commander to establish a multi-disciplinary FAC and at least one CRC to manage and review individual cases.

(2) Recommend a clinically privileged member of the MTF staff to represent the MTF as co-chairperson of the FAC, and to act as chairperson of the CRC(s).

(3) For non-realigned sites, appoint a FAR who will implement and manage the rehabilitation/intervention aspects of the installation FAP to include:

(a) Receiving all reports of suspected or known child and spouse abuse, and assisting the command in ensuring appropriate safety measures are taken in regard to victims and witnesses.

(b) Ensuring notification of appropriate civilian and military authorities.

(c) Ensuring completion of clinical assessments and coordinating all aspects of case management.

(d) Referring all cases to the appropriate CRC and providing the member's commanding officer with CRC case determinations and recommendations in writing.

(e) Ensuring provision of rehabilitation, education, and counseling, when appropriate.

(f) Serving as a point of contact for commanding officers concerning FAP intervention/rehabilitation matters.

g. Commanding officers shall:

(1) Take appropriate actions to reasonably ensure the safety of victims.



(2) Ensure command members are trained on identification and prevention of family violence, reporting requirements, and command, community, and FAP's response to family violence. Incorporate FAP awareness as regular professional development training.

(3) In all administrative separation processing boards involving allegations of child sexual abuse, ensure that a judge advocate is assigned as recorder unless compelling reasons dictate otherwise. In cases of spouse abuse and other types of child abuse, assign judge advocates as recorders if they are reasonably available.

(4) Ensure that offenders involved in family violence incidents are held accountable for their actions (if active duty members), and that such incidents are promptly reported to the FAR and civilian community authorities as appropriate.

(5) Facilitate appropriate intervention, rehabilitation education, counseling and support services for the servicemember and family.

(6) Designate a command point of contact to work with the FAR, and monitor the status of each case.

## 7. Reports and Forms

a. Symbol DD-P&R(W)1738 (1752) is assigned to the reporting requirement contained in paragraph 5e(2), and is approved for 3 years from the date of this directive.

b. DD-2486 (Jul 86), "Child/Spouse Abuse Incident Report" (DD 2486) is available in the Navy supply system and may be ordered from CD ROM NAVSUP-PUB-600 (NLL).

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DEFINITIONS

The following definitions are intended solely for the administration of the Family Advocacy Program.

1. Case. A case refers to a single victim who may be involved in one or multiple abuse incidents. Individual cases of members of the same family shall be linked in some manner for cross-referencing purposes.

2. Case Manager. A person who assesses the needs of the client and the client's family and arranges, coordinates, monitors, evaluates, and advocates for a package of multiple services to meet the specific needs of the client. In the Family Advocacy Program (FAP), this includes being the point of contact for the sponsor's command, providing ongoing assessment, identifying and assisting clients in meeting concrete needs (i.e., applying for food stamps), monitoring treatment compliance and progress, presenting cases to the Case Review Committee (CRC), and maintaining case documentation.

3. Case Review Committee (CRC). The multi-disciplinary team responsible for reviewing and approving case assessments, determining the status of a case, and monitoring case progress. The CRC acts as an advisory body for the Family Advocacy Committee (FAC).

4. Case Status. The status of the case at the time of the report. Possible determinations include substantiated, unsubstantiated, and suspected as follows:

a. Substantiated. A case that has been investigated and the preponderance of available information indicates that abuse has occurred. This means that the information that supports the occurrence of abuse is of greater weight, or more convincing than the information that indicates that the abuse and/or neglect did not occur. (This includes cases where abuse is substantiated, however, the offender is unknown.)

b. Unsubstantiated. A case that has been investigated and the available information is insufficient to support the allegation of child abuse and/or neglect or spouse abuse.

(1) Unsubstantiated, Did Not Occur. A case is ruled unsubstantiated, did not occur, that has been investigated and the allegation of abuse and/or neglect is unsupported. The family needs no family advocacy services.

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(2) Unsubstantiated, Unresolved. A case is ruled unsubstantiated, unresolved, that has been investigated and the available information is insufficient to support the allegation of abuse and/or neglect. Referral to family support services may occur.

c. Suspected. A case determination is pending further investigation. Duration for a case to be "suspected" and under investigation should not exceed 60 days from the first report of abuse or neglect.

5. Central Registry. A central management information system maintained by the Navy for identifying and recording information on child and spouse abuse incidents. The Central Registry receives all DD 2486s which are retained for 3 years after data entry. The Central Registry is an aid for screening applicants for family daycare providers and child care providers.

6. Child. The term "child" shall include the natural (birth) child, adopted (legally finalized) child, stepchild, foster child, or ward who is a dependent of a military member and is under the age of 18. The terms shall include an individual of any age who is incapable of self-support because of mental or physical incapacity and for whom treatment in a military medical treatment facility (MTF) has been authorized.

7. Child Abuse/Neglect. The physical injury, sexual abuse, emotional abuse, deprivation of necessities, or other abuse of a child by a parent, guardian, employee of a residential facility, or any person providing out-of-home care, who is responsible for the child's welfare, under circumstances that indicate the child's welfare is harmed or threatened. The term encompasses both acts and omissions on the part of such a responsible person. This term includes offenders whose relationship is outside the family and includes, but is not limited to, individuals known to the child and living or visiting in the same residence who are unrelated to the victim by blood or marriage, and individuals unknown to the victim. Specific types of abuse/neglect are:

a. Physical abuse. A type of abuse to include, but not limited to, acts resulting in: death, brain damage or skull fracture; subdural hemorrhage or hematoma; bone fracture; dislocation or sprain; internal injury; poisoning; burn or scald; severe cut or laceration; other physical injury that seriously impairs the health or physical well-being of the child victim; or other minor injury which includes minor bruises, or welts, or cuts, or twisting or shaking which do not constitute a substantial risk to the life or well-being of the victim.

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b. Sexual abuse. Actions including, but not limited to, the employment, use, inducement, enticement, or coercion of any child to engage in, or having a child assist any other person to engage in, any sexually explicit conduct (or any simulation of such conduct). This includes but is not limited to rape, molestation, prostitution, or other sexual activity between the offender or a third party and a child, when the offender is in a position of power over the child. Sexual abuse also includes exploitation to include forcing or allowing a child to look at the offender's genitals, forcing or allowing a child to observe an offender's or another's masturbatory activities, exposing of a child's genitals for sexual gratification of the offender(s), talking to a child in a sexually explicit manner, surreptitious viewing of a child while undressed for the offender's sexual gratification, or involving a child in sexual activity such as pornography or prostitution in which the offender does not have direct physical contact with the child.

c. Emotional abuse. Actions including, but not limited to, active, intentional berating, disparaging, or other behavior towards the victim that adversely affects the psychological well-being of the victim.

d. Neglect. Actions or omissions by a parent, guardian, or caretaker, which includes, but is not limited to, deliberate or negligent withholding or deprivation of necessities (nourishment, shelter, clothing, and health care), lack of adequate supervision, emotional or educational neglect, and abandonment. For more specific definitions see enclosure (2) of reference (c).

8. Clergy-Penitent Relationship. A person has the privilege to refuse to disclose and to prevent another from disclosing a confidential communication by the person to a clergyperson or to a clergyperson's assistant, if such communication was made either as a formal action of religion or as a matter of conscience.

9. Clinical Privileging. The process whereby a health care practitioner is granted the permission and responsibility to independently provide specific medical or dental care within the scope of his or her license, certification, or registration. Clinical privileges define the scope and limits of practice for individual practitioners.

10. Extra-familial Child Abuse. Includes child abuse by strangers, persons in loco parentis, and child-to-child abuse.

11. Family Advocacy Committee (FAC). The policy-making, coordinating, recommending, and overseeing body for the

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installation FAP. Generally includes representatives from victim/witness services, family support programs, medical, law enforcement, legal, chaplains, youth and child services, shelters, installation and tenant commands.

12. Family Advocacy Officer (FAO). A designated official who is responsible for administrative management and implementation of the installation FAP. The installation FAO shall facilitate the development, oversight, coordination, administration, and evaluation of the FAP in accordance with installation and service directives. The FAO shall be responsible for maintaining clear lines of authority and accountability in the FAP to ensure coordination of the FAP functions and the integration of services. This includes drafting installation instructions, coordinating Memoranda Of Understanding (MOUs) with civilian agencies, and ensuring there are written case protocols. A FAO does not decide clinical issues but might, for example, ensure that CRC's meet regularly. He or she does not become involved in case intervention plans.

13. Family Advocacy Program (FAP). A program designed to address prevention, identification, evaluation, rehabilitation, education, and counseling, rehabilitation, followup, and reporting of family violence. FAPs consist of coordinated efforts designed to prevent and intervene in cases of family distress, and to promote healthy family life.

14. Family Advocacy Program Regional Coordinator. An individual who provides technical and clinical oversight to FAP-related programs at both medical treatment facilities (MTF) and FSCs; provides consultation and assistance to local FAOs and FARs, and installation and MTF commanding officers. Regional coordinators monitor the expenditure of FAP funds for their region; develop and coordinate regional staffing plans in concert with their Echelon 2 Commander; submit, via their Echelon 2 Commander, regional funding requests to the Bureau of Naval Personnel (BUPERS); and develop/coordinate model program proposals. The regional coordinator ensures effective coordination, cooperation and collaboration between medical and line agencies as well as other command and community partners in their regional area. The regional coordinators work with local installation personnel to develop strategies to support and strengthen the FAP as a leadership issue and a line-managed program. Regional managers are frequently tasked to represent their area and assist in development of Navy-wide FAP policy, programs and special projects. They report to the regional coordinator, who in turn reports to the appropriate Echelon 2 Commander.

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15. Family Advocacy Representative (FAR). A person, usually a credentialed social worker or other clinical counselor, eligible for independent provider status who is responsible for implementing and managing the intervention/rehabilitation aspects of the installation FAP.

16. Flag. The term "flag" refers to the indicator placed on a member's file to let detailing personnel know they will have to get clearance before they can write permanent change of station orders on an individual. The flagging process is intended to prevent further stress on the service member and family members and to prevent re-abuse, and to ensure assignment to a geographic location which has adequate services available. Flagging is also used to ensure the availability of the service member or family members for case disposition and rehabilitation, education, and counseling.

a. BUMED Assignment Control Flag: Placed by recommendation of the CRC on spouse abuse and child physical abuse and neglect cases. This is a temporary flag which is normally removed within a year from the date the flag was set by the CRC.

b. BUPERS Assignment Control Flag: A flag which is put in the personnel data system by Pers-8 for all suspected child sexual abuse cases. This flag may restrict transfers, reenlistments, advancements and/or promotions until case resolution. A member is notified of these restrictions by BUPERS via his/her commanding officer after the case has been reported. The flag is lifted by BUPERS at case resolution and there are no further restrictions.

17. Incest. Sexually explicit activity between a parent/step-parent and a child, a sibling, or another relative too closely related to be permitted by applicable law to marry.

18. Incident. An occurrence that may include one or more types of abuse. Involves one victim and one occurrence. A DD 2486 must be completed on each incident.

19. Juvenile Sex Offender. Any person under 18 years of age who has sexually abused or molested another juvenile. Sexual abuse differs from what would be considered age appropriate peer play between children, in that there is an inequality between participants including: presence of exploitation, coercion and control, manipulation, abuse of power or position of authority, and the sexual behavior itself. Sexually oriented behaviors which do not involve physical contact (such as peeping, exhibiting, obscene phone calls, etc.) may be considered as some evidence of a tendency toward sexually abusive behavior.

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20. Lawyer-Client Privilege. A client has the privilege to refuse to disclose and to prevent any other person from disclosing confidential communications made for the purpose of facilitating the rendition of professional legal services to the client, (a) between the client or the client's representative and the lawyer or the lawyer's representative, (b) between the lawyer and the lawyer's representative, (c) by the client or the client's lawyer to a lawyer representing another in a matter of common interest, (d) between representatives of the client or between the client and a representative of the client, or (e) between lawyers representing the client.

21. Major Criminal Offense. An offense punishable under the Uniform Code of Military Justice (UCMJ) by confinement of a term of more than 1 year, or similarly framed federal statutes, state, local or foreign laws or regulations.

22. Major Physical Injury. This includes brain damage, skull fracture, subdural hemorrhage or hematoma, bone fracture, dislocations, sprain, internal injury, poisoning, burn, scald, severe cut, laceration, bruise, welt, or any combination thereof, which constitutes a substantial risk to the life or well-being of the victim. For more specific definitions see enclosure (2) to reference (c).

23. Offender. See also Primary Aggressor. Any person who allegedly caused the abuse of a child or spouse, or whose act, or failure to act, substantially impaired the health or well-being of the abuse victim.

24. Primary Aggressor. The person who maintains power and control in an abusive incident regardless of which party started the physical or verbal action, the party who continued the dispute, or the party who "provoked" the event. This eliminates the terms "co-battering," "mutual battering," or "mutual spouse abuse" in most cases.

25. Regional Child Sexual Abuse Response Team. Multi-disciplinary team from a designated installation or area, which has received specialized training concerning the intervention process for complex and/or multiple victim cases of child sexual abuse. Teams normally consist of a judge advocate, Naval Criminal Investigative Service (NCIS) special agent, FAR, pediatrician and social service professional from the Family Service Center (FSC). These teams are available for consultation in their regional areas.

26. Rehabilitation/Counseling Failure. An offender is deemed to be a rehabilitation/counseling failure when he or she has been

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found guilty at a criminal trial, or found to have committed the offenses at nonjudicial punishment, or have admitted to the offense, or the allegations are substantiated against him or her and thereafter:

- a. does not cease his or her abusive behavior before, during, or after participation in counseling services; or
- b. refuses to cooperate or complete counseling programs; or
- c. fails to meet the conditions of court orders or probation; or
- d. fails to make adequate progress in rehabilitation, education, and counseling as determined by an expert in the rehabilitation, education, and counseling of child or spouse abuse offenders.

27. Spouse. A partner in a lawful marriage where one or both of the partners are employed by, or are military members in the Department of the Navy (DON) and are eligible for medical treatment from the DON. A married person under 18 years of age shall be included in this category.

28. Spouse Abuse. Spouse abuse includes, but is not limited to, assault, battery, threat to injure or kill, or any another act of force, violence, or emotional abuse, or undue physical or psychological trauma, or fear of physical injury. This includes physical injury, sexual assault, intentional destruction of property, psychological abuse and stalking.

29. Stalking. Actions of a person, performed in a repeatedly harassing manner, including but not limited to following another person in a manner to induce, in a reasonable person, fear of sexual battery, bodily injury, or death of that person or that person's immediate family.

30. Victim: An individual who is the subject of abuse, or whose welfare is harmed or threatened by acts of omission or commission by another individual or individuals.

31. Victim Services Specialist (VSS). A supportive resource and advocate for the expressed interests of the victim. This person need not be a legal or mental health professional but must be able to assist the victim in contacting, accessing or using established military and civilian victim assistance services to support the victim's needs and to keep the victim informed of official DON action. The VSS serves as a consulting member of the CRC to represent the victim's needs and interests.



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PREVENTING ABUSE AND REVICTIMIZATION: GUIDELINES ON  
PREVENTION AND VICTIM ASSISTANCE

1. Since the risks associated with child and spouse abuse will be different at each installation, a prevention program should be tailored for each naval installation. Program developers should explicitly identify risk variables. Evaluation procedures and available local civilian resources should be identified prior to the commencement of any child/spouse abuse prevention effort. The measurement of program effectiveness can then be determined by a reassessment of risk variables.

2. The objectives of abuse prevention programs are to develop skills, attributes, and the community support needed to reduce the level of risk. The FAP case manager normally assesses the risk in a case of reported abuse. However, risk factors can also be used as a guide in developing prevention programs. Prevention efforts should focus on reducing the level of risk for those variables that are most clearly related to abuse.

3. The following prevention activities are widely accepted as effective in reducing abuse:

a. Education and support for new parents. For optimal impact, these services, along with a home visit, should begin by the second trimester of pregnancy.

b. Home visitor or parent-aide services for families expecting a new baby. The home visitor may be a nurse, social worker, social services assistant, or carefully trained and supervised volunteer.

c. Parent education programs targeted for stressed parents. This includes programs designed to help parents understand and handle the typical behavior of toddlers and programs aimed at the specific challenges presented by teens (e.g., Tough Love).

d. Community service campaigns and announcements that target specific high risk situations and behaviors associated with particular developmental stages. Targeted behaviors might include shaking babies, adolescents' abuse of substances, and parental reactions to report cards. April and October are excellent months to initiate such campaigns to coincide with the Month of the Military Child (and Child Abuse Prevention Month) and Domestic Violence Awareness Month, respectively.

Enclosure (2)

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e. Assessment, education, and counseling services for all child victims including children who have witnessed abusive behavior between their parents and/or have grown up in violent homes.

f. Respite care for children whose parents are experiencing extreme stress and need a break from parenting.

g. Support groups for adults molested as children and other categories of experiences resulting from earlier trauma.

h. Community campaigns and command education programs emphasizing acceptable and unacceptable behavior between spouses and between family members as well as appropriate responses to abusive acts by family members.

i. Life education programs for preschool and school-aged children emphasizing conflict resolution/negotiation, communication and relationship skills, dating relationships, and programs that emphasize safe touch.

j. Ongoing parenting information and family violence prevention campaigns which make parenting and domestic violence pamphlets available at all local commissary stores, exchanges, medical and dental treatment facilities, and military billeting and housing offices.

k. Ongoing FAP identification and prevention training in the form of General Military Training (GMT) lectures, indoctrination presentations, and command briefings with emphasis on the underlying causes and patterns of family violence, appropriate responses, community resources, safety planning, and reporting requirements.

l. Education, support, and skill building programs for young adults which focus on building healthy dating relationships, marriages, and families.

m. Programs such as the Navy's PREVENT which addresses various aspects of rigid gender expectations, the interrelationship of violence and sexual aggression, and the utilization of power and control in relationships.

n. Level-one treatment options as outlined in the FAP program standards (reference (f)), including educationally-based programs and support services for couples involved in low level violence. These options should not encompass any form of victim blaming or further endanger victims or witnesses.

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o. Support and educational services available for the victim (e. g., legal assistance, and clergy and faith group support) to include outreach services by the Victim Services Specialist, if available, and/or civilian resources and referrals.

p. Ensure victim safety through military protective orders (MPO), restriction of possession of firearms, and provision of shelter for victims when unable to remove offender from the residence.

q. FAP informational briefs at all command indoctrination programs (particularly at overseas and isolated areas) which clarify non-tolerance of abuse, command responses, community resources, and services available for problem resolution.

r. Public affairs offices, newspaper articles, and electronic media which provide information about family violence to include community resources, safety planning, and initiatives which promote prevention of family violence.

s. Pre-deployment and return and reunion briefs which include education on preventing violence.

t. Information to clients regarding services available to address relocation, transition, and spousal employment programs, personal financial management, and safety issues.

4. Informing victims of their rights in accordance with references (i) and (j), may prevent further victimization. In addition to those rights, FAP will provide services which include: intervention options; counseling services, and safety planning (e. g., MPO, shelters/safe houses, barmment of civilian offenders from the installation, and early return from overseas installation). The case manager will notify the victim of his/her right to present a statement and have a representative present at the Case Review Committee (CRC) meetings. The victim will also be notified of his/her right to request in writing review of the CRC decision to unsubstantiate the allegations. A sample victim information sheet is attached to this enclosure.

5. Additionally, Pers-661 will provide assistance on the following types of victim assistance if the sponsor is discharged from the Navy for abusing a family member.

a. Transitional Compensation: monthly payments to spouse/children which begin when letter of notification for the administrative separation board is received by the member or the convening authority takes action on the court-martial sentence. The payments are dependent upon the servicemember's expiration of

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obligated service (EAOS). However, payments will last no less than 12 months and no longer than 36 months. The amount of payment is based on the rate in effect for dependency and indemnity compensation. The payments will terminate if the spouse/children reside with the offender or the spouse remarries.

b. Victim/Spouse of Member Losing Right to Retired Pay: when an active duty offender is retirement eligible (based on years of service) and is convicted of abuse related charges at a court-martial and is awarded a punitive discharge, he or she forfeits retirement pay. The victim/spouse may be entitled to receive a portion of the retired pay and all retirement benefits if the following conditions are met: the spouse was married to the member for at least 10 years; the spouse obtains a divorce from the member; and the divorce decree awards a portion of the disposable retired pay to the spouse. Applications are approved by the Defense Finance and Accounting Service in Cleveland, Ohio. Requests for applications and questions can be answered by calling (216) 522-5404 or (DSN) 580-5404. If the spouse remarries or the member dies, payments and benefits are terminated.

6. Secretary of the Navy (SECNAV) Designee: if the active duty offender has been discharged from the Navy, the abused family members are eligible to apply for SECNAV Designee status. SECNAV Designees are eligible to receive treatment through a Navy medical treatment facility (MTF) only. Application should be made through the Patient Administration Department at the closest Navy MTF. The application is endorsed by the commanding officer of the MTF and then forwarded to the Bureau of Medicine and Surgery (BUMED). BUMED provides an endorsement and forwards the application to SECNAV who has approval authority. SECNAV Designees may be eligible to receive CHAMPUS benefits for one year from the time of discharge of the service member, if the member has been convicted of the abuse at a court-martial or is given a bad conduct discharge.

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## SAMPLE VICTIM INFORMATION SHEET

1. You have been identified as a potential victim of (child or spouse abuse), and the allegations involving you have been referred to the Family Advocacy Program (FAP). The FAP is designed to assist active duty members and their family members who are experiencing difficulties as a result of alleged child or spouse abuse incident(s).

2. The FAP point of contact in your case is (name), he/she may be reached at (telephone number). The FAP is located at (address). (Name-FAP POC) can assist you by providing the following services: shelter or a safe house, if needed; counseling services; and safety planning, which could include the issuing a military protective order (MPO) or obtaining a civilian temporary restraining order. A MPO is similar to a restraining order in that the command issues an order to the alleged active duty offender that directs him/her to not contact you, and to stay away from the home, your place of employment, and other appropriate places. (Name-FAP POC) can also provide information and referral to a victim services specialist, and community resources.

3. (Name-FAP POC) will notify you of the date the allegations involving you will be reviewed by the FAP Case Review Committee (CRC). The membership of the CRC includes a judge advocate, physician, mental health care provider, the Family Advocacy Representative, a line officer, base security/Naval Criminal Investigative Service representative, and other appropriate individuals. They will review all the relevant information regarding the allegations and make recommendations as to whether the abuse occurred, and if so, what services are needed by the family. You may provide a written statement and other information to (Name-FAP POC) who will provide it to the CRC. Additionally, you will be informed of the CRC's recommendations in your case, and your right to request review of the CRC's recommendations.

4. Additional assistance is available at the Navy Legal Service Office, which is located at (address). You may set up an appointment with a legal assistance attorney by calling (telephone number).

5. The Bureau of Naval Personnel, Family Advocacy Division is responsible for information regarding Transitional Compensation and Victim/Spouse Compensation. These are two forms of monetary assistance programs which may be available to victims when the active duty member is discharged from the Navy for abusing a family member. For details regarding these programs and other potential victim benefits, the point of contact is (name) at (703) 614-5892/5898.

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GUIDANCE REGARDING RIGHTS UNDER ARTICLE 31b,  
UNIFORM CODE OF MILITARY JUSTICE

1. The following is provided as guidance based on legal decisions that interpret when Article 31b, Uniform Code of Military Justice (UCMJ) warnings must be given. This information is not intended to create any additional rights or expand any existing rights.

2. Family Advocacy Program (FAP) counselors are not required to provide Article 31b, UCMJ warnings when interviewing a service member for the purpose of diagnosis or treatment. If on the other hand, a FAP counselor questions a service member for the sole purpose of gathering incriminating statements to advance a criminal investigation (i.e., when there is not medical/clinical reason to ask the question) then the counselor is not acting for the purposes of diagnosis or treatment and should therefore provide the suspect with the attached Article 31b, UCMJ warnings prior to questioning the service member. If the counselor advises the member of his/her Article 31b, UCMJ rights, then the completed statement shall be maintained in the member's FAP file.

3. In those instances in which a counselor either believes that an Article 31b, UCMJ rights warning should be given or is unsure, the counselor should obtain legal advice prior to conducting the interview.

Enclosure (3)

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SUSPECTED OFFENDER'S RIGHTS AND ACKNOWLEDGEMENT/STATEMENT

\_\_\_\_\_  
FULL NAME OF SUSPECTED OFFENDER

\_\_\_\_\_  
SSN

\_\_\_\_\_  
RATE/RANK AND BRANCH  
OF SERVICE

\_\_\_\_\_  
DATE OF BIRTH

\_\_\_\_\_  
ACTIVITY/DUTY STATION/UNIT

\_\_\_\_\_  
FULL NAME OF INTERVIEWER

\_\_\_\_\_  
SSN

\_\_\_\_\_  
RATE/RANK AND BRANCH  
OF SERVICE

\_\_\_\_\_  
DATE OF BIRTH

\_\_\_\_\_  
ORGANIZATION

\_\_\_\_\_  
BILLET

\_\_\_\_\_  
LOCATION OF INTERVIEW

\_\_\_\_\_  
DATE AND TIME

RIGHTS

I certify and acknowledge by my signature and initials set forth below that, before the interviewer requested a statement from me, he/she warned me that:

(1) I am suspected of having committed the following offenses: \_\_\_\_\_

\_\_\_\_\_  
initials

(2) I have the right to remain silent; and

\_\_\_\_\_  
initials

(3) Any statement I do make may be used as evidence against me in a trial by court-martial.

\_\_\_\_\_  
initials

(4) I have the right to consult with lawyer counsel prior to any questioning. This lawyer counsel may be a civilian retained

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by me at my own expense, a military lawyer appointed to act as my counsel without cost to me, or both, and

initials

(5) I have the right to have such retained civilian lawyer and/or appointed military lawyer present during this interview.

initials

WAIVER OF RIGHTS

I further certify and acknowledge that I have read the above statement of my rights and fully understand them, and that,

initials

(1) I expressly desire to waive my right to remain silent;

initials

(2) I expressly desire to make a statement;

initials

(3) I expressly do not desire to consult with either a civilian lawyer retained by me or a military lawyer appointed as my counsel without cost to me prior to any questioning;

initials

(4) I expressly do not desire to have such a lawyer present with me during this interview; and

initials

(5) This acknowledgement and waiver of rights is made freely and voluntarily by me, and without any promises or threats having been made to me or pressure or coercion of any kind having been used against me.

initials

\_\_\_\_\_  
SIGNATURE OF SUSPECTED OFFENDER

\_\_\_\_\_  
DATE AND TIME

\_\_\_\_\_  
SIGNATURE OF INTERVIEWER

\_\_\_\_\_  
DATE AND TIME

\_\_\_\_\_  
SIGNATURE OF WITNESS

\_\_\_\_\_  
DATE AND TIME



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INITIAL REPORTING REQUIREMENTS AND COMMAND NOTIFICATION

1. Spouse Abuse. Spouse abuse is the most frequently reported type of family violence in the Navy and frequently co-exists with child abuse (physical and sexual). Physical assaults occurring within the family merit the same concern and level of intervention as any physical assault between unrelated persons.

a. If a spouse abuse report involving physical injury or the use of a dangerous or deadly weapon is received by the installation law enforcement/security department, verbal notification will be made immediately to the Family Advocacy Representative (FAR) and to the service member's command. A written and/or verbal report shall be made to the member's command and the FAR within 24 hours.

b. If a victim of alleged spouse abuse comes to a military treatment facility (MTF) seeking treatment for injuries related to abuse, the case shall be referred to the FAR immediately. In the case of major physical injury or indication of a propensity or intent by the alleged offender to inflict major physical injury, the appropriate law enforcement/security department officials shall be notified. In such cases, the FAR will notify the member's command as soon as possible to ensure victim protection and safety and shall assist victims with risk assessment, safety planning, and access to shelter/safe housing as needed. The Family Advocacy Program (FAP) standards in reference (f) provide additional guidance.

c. If a victim of alleged spouse abuse comes voluntarily to a Family Service Center (FSC) or MTF seeking counseling and there are no current injuries requiring medical attention, and the spouse is responsive, is capable of responding to any renewed threat of abuse, and previous injuries are not "major" physical abuse, the provider is not required to report the incident if in the provider's professional opinion the victim's safety is not an immediate issue and he/she does not want the incident reported. The provider should, however, encourage the spouse to report the incident to the proper law enforcement officials.

(1) At a minimum, a risk assessment should be completed, a safety plan should be done, and the FAR should be consulted.

(2) If at any time while working with the victim the provider comes to believe that the life and/or health of the victim is in imminent danger, the provider is required to report the situation to the FAR and the appropriate command, and should take necessary actions to promote the safety of the victim. In

Enclosure (4)

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such cases, document with the victim the reports being made and actions taken for his/her protection.

(3) If a victim of spouse abuse comes voluntarily to the FSC seeking counseling and there are current injuries due to alleged spouse abuse, the victim shall be referred to the MTF. The FAR and the appropriate law enforcement personnel shall be notified immediately.

2. Child Abuse. All Department of the Navy personnel must report any incident or suspected incident of child abuse occurring on a military installation or involving persons eligible for FAP services to the local FAR. (Exceptions are described in paragraph 3.) Depending on the outcome of the initial assessment of the report, the FAR will notify the member's command and, consistent with applicable laws and Memoranda of Understanding, the appropriate state and civilian agency having child protective service functions. In cases of major physical injury or an indication of an offender's propensity or intent to inflict major physical injury, the FAR shall also notify appropriate law enforcement/security department personnel. For overseas installations, notification will be made in accordance with applicable treaties or Status of Forces Agreements (SOFA). In the absence of a FAR, incidents shall be reported directly to the civilian agency having child protective service functions and to military law enforcement/security department officials in the case of imminent danger to the child. The FAP standards in reference (f) provide additional guidance.

a. Child Sexual Abuse. In addition to the above, incidents or suspected incidents of child sexual abuse (incest or extra-familial) must be reported to Naval Criminal Investigative Service (NCIS). Appropriate reports to BUPERS (Pers-6 and 8) in accordance with reference (b), or higher authority, and in accordance with the OPREP-3 reporting system, should be made. The FAR must report, within 5 working days, all cases to BUPERS (Pers-661). The FAP standards in reference (f) provide additional guidance.

b. Out-of-home Child Sexual Abuse. In addition to the above, cases of child sexual abuse alleged to have occurred in DOD-sanctioned, out-of-home care settings, such as child care centers, schools, recreation programs, or family child care, must be reported immediately to the cognizant installation commanding officer, NCIS, the FAR, and FAO. Within 24 hours of the initial report, the command will report by message to BUPERS (Pers-65, 66, and 8). The message, with information copies to the chain of command, should include the following:

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- (1) Date of alleged incident (YY/MM/DD);
- (2) Date case reported (YY/MM/DD);
- (3) Date incident reported to Child Protective Services (CPS) (YY/MM/DD);
- (4) Installation location;
- (5) Activity where alleged abuse occurred;
- (6) Alleged offender's employment position within activity;
- (7) Alleged victim's age, DOB (YY/MM/DD), and sex;
- (8) Agencies, both military and civilian, involved in conducting the investigation;
- (9) Brief incident description;
- (10) Current status of the case;
  - (a) Family Advocacy status:
  - (b) Police/NCIS status:
  - (c) Legal Status:
- (11) Current status of alleged offender within the activity (e.g., removed from position pending investigation);
- (12) Military point of contact name and telephone number (DSN);
- (13) NCIS Case Control Number (CCN), and telephone number of the Special Agent in Charge.

c. A written closeout report is required by DOD, under reference (b), after all investigations have been completed (command initiated, law enforcement, grand jury). The submission of a closeout report should not be delayed by pending related judicial or administrative proceedings or appellate reviews. The closeout report should be forwarded to Pers-8, 65, and 66, and include the following information:

- (1) A summary of all investigative findings and recommendations;

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- (2) The determination and recommendation of the FAP CRC;
- (3) A summary of command, administrative, and discharge proceedings, and legal actions;
- (4) Lessons learned, including recommendations for policy changes;
- (5) A list of corrective actions (planned and completed).

3. A reporting exception for all types of abuse is made for privileged communications between a person and a clergyperson or clergyperson's assistant when such communication is made either as a formal act of religion or as a matter of conscience. A like exception is made for privileged communications to an attorney when the lawyer-client privilege applies. As part of victim protection and restitution, chaplains are strongly encouraged to recommend to offenders that they voluntarily self-refer to the FAP so that appropriate educational, counseling, and behavioral rehabilitation can commence immediately and planning for victim safety can be initiated. Likewise, when they believe it to be in the interests of their clients, attorneys are strongly encouraged to advise offenders that self-referral to the FAP is an option that can help prevent future assaults, end the cycle of escalating abuse and eliminate other criminal acts that destroy families and careers. Additionally, victims should be advised by chaplains and attorneys, as appropriate, regarding available support resources; legal options in military and civilian judicial and administrative proceedings; and transitional compensation and other benefits that may be available should the offending servicemember be separated from military service for reason of family violence.

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GUIDANCE FOR LAW ENFORCEMENT AND OTHER FIRST RESPONDERS  
IN SPOUSE ABUSE CASES

1. When a Navy law enforcement official, other than a Naval Criminal Investigative Service (NCIS) agent (who will follow NCIS regulations), responds to a report of spouse abuse and has jurisdiction in the case, the following guidelines apply:

a. The alleged offender and victim should be immediately separated and a safety assessment done. Law enforcement personnel should then interview them separately. Sworn statements should be obtained from both the offender and the victim. Before law enforcement officers interview the alleged active duty offender, he or she should be apprised of his or her Article 31b, Uniform Code of Military Justice, rights, if applicable. (Enclosure (3) contains a sample rights advisement statement.) An initial safety assessment should be done to determine, as far as possible, the presence or absence of the risk factors in paragraph 2.

b. Any children should be interviewed separately, both as potential witnesses of domestic violence and to determine if they have been abused or are at risk for abuse. Any non-familial witnesses should also be interviewed separately. Again it is important to obtain sworn statements of all relevant witnesses.

c. Both the alleged victim and the children should be assessed regarding the need for medical attention.

d. Law enforcement officers need to specifically question the alleged victim, alleged offender, and witnesses as to the presence or absence of weapons (e.g., guns) in the home. When weapons are found in the home, the alleged offender shall be returned to his or her command with a recommendation that the command issue a Military Protective Order (MPO), or the command may request removal of the weapons from the home.

e. If the law enforcement officer on the scene feels the alleged victim is in imminent danger, immediate action should be taken to promote the safety of the alleged victim and reduce the potential for violence (factors listed in paragraph 2 may be used to assess imminent danger). These actions may include immediate notification of command/NCIS, apprehension and incarceration, recommendations concerning desired command actions, (i.e., removing from the home, issuance of a MPO), and provision of shelter information.

f. The incident shall be reported to the Family Advocacy Program (FAP) staff and command in accordance with enclosure (4).

Enclosure (5)

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2. The purpose of this initial safety assessment is to obtain the victim's perception of the situation and to address protection issues. The initial safety assessment is an estimate, based on an interview with the victim and a review of available information, of how dangerous the alleged offender is as determined by the presence or absence of the following high-risk factors:

- a. Dangerous acts committed, imminent danger, or offender is violent, aggressive or out of control;
- b. Alleged use of a weapon or object used as weapon;
- c. Threats of serious harm to self or others by the offender;
- d. Significant abuse-related harm;
- e. Isolation of victim so that basic needs (food, clothing, shelter, etc.) cannot be met;
- f. Victim particularly vulnerable (due to pregnancy, age, disability, etc.);
- g. Alleged offender has previously abused the victim and the severity of the abuse or the offender's response to the incident suggests that safety may be an immediate concern;
- h. Substantial impairment due to alcohol/drug abuse of either victim or alleged offender or both;
- i. Alleged offender's obsession with abused victim;
- j. Victim's own assessment of potential for serious injury or death;
- k. Prior FAP report;
- l. Victim's fear of offender.

3. In addition to taking sworn statements of the alleged victims, witnesses, and alleged offender, law enforcement officials shall undertake the collection of evidence which should include:

- a. Photographs of injuries;
- b. Photographs of the location where the incident occurred to include property damage;

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- c. Obtaining 911 tapes, if possible;
- d. Obtaining copies of medical records/reports, if possible;
- e. Liaison with state or local law enforcement agents to obtain copies of police reports, when possible.

4. Domestic violence incidents can involve a member who is not married but is cohabiting. In all cases of domestic violence, regardless of marital status, first responders will do a risk assessment and safety plan, and refer the case to FAP staff who will open a case. Only active duty personnel and family member beneficiaries are entitled to specific Navy services (i.e., medical treatment, counseling, offender treatment, etc.). Persons who are not beneficiaries will be referred to appropriate community services.

5. Law enforcement officials will ensure their reports are forwarded to the offender's command and the FAP staff. Additionally, they will make every effort to assist commands in obtaining copies of civilian convictions, if applicable, so that appropriate service record entries may be made.

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MILITARY PROTECTIVE ORDERS

1. A Military Protective Order (MPO) is similar to a Temporary Restraining Order issued by a civil court. It can be issued after hearing only one side of the story (ex parte). An MPO can be issued if the cognizant officer determines it necessary to ensure the safety and protection of persons for whom it is issued. If ex parte, MPO's should be of short duration, normally not more than 10 days. If a longer duration is required, victim(s) and the suspected offender should be given an opportunity to be heard and to respond to allegations. In cases not requiring ex parte determinations, both persons (victim and offender) should be given the opportunity to be heard and to respond before issuance of an MPO. Formal hearings, however, are not required.

2. MPO's are aimed at stabilizing the situation and providing additional time for investigation, while taking into account any hardship that may be imposed on both victims and offenders. The greater the need to protect potential victims, the more reason that an MPO should be issued. As a crisis abates, and as the actual facts surrounding a domestic crisis are determined, a final decision regarding the continuation of an MPO should be made by the commanding officer, with input from the Family Advocacy Representative, if available.

3. MPO's are administrative rather than punitive in nature, and their imposition does not preclude disciplinary action under the Uniform Code Military Justice. Care should be taken in preparing the terms of the MPO to tailor them to the specific facts surrounding the case. Avoid overly harsh provisions which could be construed as punitive or as a form of pre-trial restriction.

4. MPO's shall relate to matters involving the alleged abuse and may include but are not limited to:

a. Direction to stay away from designated person(s);

b. Direction to stay out of and away from designated areas or places, including military housing, the family home, schools, place of employment and day care centers. Direction to leave a public place if the victim and offender find themselves in the same location or facility (normally the military person is required to leave);

c. Direction to refrain from contacting, harassing, stalking or touching certain named persons. This can include restrictions

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of phone conversations, third party communications, and orders to remain outside a geographical location;

d. Direction to do or refrain from doing certain activities pending further direction;

e. Direction to provide adequate financial support for family members per pertinent regulations; and

f. Explanation of the consequences of failure to follow the orders contained in the MPO.

5. Directives to civilians must necessarily be limited to orders commensurate with the commanding officer's authority to maintain security and to control the activities of employees, residents, and guests on naval installations. Options available include orders barring civilians from the installation, employer directives, and housing area directives. Correspondingly, orders may be given to civilians aimed at assuring their safety.

6. Orders to military persons are preferred. An MPO is designed to control a situation in order to protect the safety of the victim, not to punish the member. Commanding officers' orders to civilians are less manageable and are difficult to enforce.

7. MPO's shall:

a. State their military purpose (i.e., safety of victims, and ensuring good order and discipline);

b. Be specific in controlling certain behaviors; and

c. Be comprehensive to prevent misunderstandings (e.g., an order to not have telephone contact with the victim can be contravened by the use of electronic mail).

8. MPO's shall be in writing and their receipt recorded in order to ensure enforceability if violated. Verbal orders given to control an immediate situation shall be reduced to writing and acknowledged by the member. Prior to issuing an MPO commands should consult a judge advocate. The following is a sample format for drafting orders.

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SAMPLE MPO

From: \_\_\_\_\_  
(Commanding Officer and Name of Command)

To: \_\_\_\_\_  
(Name, Rank/Rate, and SSN of Alleged Offender)

Via: \_\_\_\_\_  
(Use only if applicable)

Subj: MILITARY PROTECTIVE ORDER ISSUED TO Name of Alleged Offender CONCERNING ALLEGATIONS OF CHILD/SPOUSE ABUSE

Ref: (a) OPNAVINST 1752.2A

1. You are hereby ordered to abide by and obey the following Military Protective Order, issued per reference (a). Violation of this order may result in administrative or disciplinary action under the Uniform Code of Military Justice.

2. This is a lawful order taken to promote good order and discipline and ensure the safety and protection of the person(s) listed below. It is also intended to protect you from further allegations concerning child or spouse abuse while the order is in effect. The issuance of this order is not a form of disciplinary action against you, nor does it mean that you will or will not be punished for any actions taken before or after this order.

3. This order is issued concerning your association and contact with the following person(s):

(Name suspected victims of abuse)

4. You are directed to:

(State conditions of MPO)

5. This order shall remain in effect until \_\_\_\_\_ unless sooner canceled by me (by \_\_\_\_\_), or by higher authority.

6. You may submit to me written matters concerning this order.

Signature

Copy to:  
Victim  
Legal Officer/Navy Law Enforcement Officials

OPNAVINST 1752.2A

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FIRST ENDORSEMENT

From: \_\_\_\_\_  
(Name, Rank/Rate, and SSN of Alleged Offender)

To: Commanding Officer, \_\_\_\_\_  
(Name of Alleged Offender's Command)

Via: \_\_\_\_\_  
(Use only if applicable)

1. I have read the above military protective order and understand its contents. I acknowledge that administrative or disciplinary action may be taken against me if I fail to follow this order.

\_\_\_\_\_  
Signature of Alleged Offender/Date

\_\_\_\_\_  
Signature of Witness/Date

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FAMILY ADVOCACY CASE REVIEW COMMITTEE GUIDELINES

1. Purpose: To establish the functions of Case Review Committees (CRCs). Several levels of decision making occur in most substantiation discussions and follow-up case planning. In cases involving crimes also being investigated by the Naval Criminal Investigative Service (NCIS), the CRC and NCIS must coordinate so that neither the criminal investigation nor FAP intervention and rehabilitation efforts are prejudiced or compromised.

2. Membership/Responsibilities:

a. The CRC should normally be limited to not more than eight permanent members, with consultants for specific cases appearing as appropriate. At larger installations there should be one CRC for child abuse cases and another for spouse abuse cases. In fleet concentrated areas such as Norfolk, San Diego, Everett, Pearl Harbor and Yokusuka, Japan, an additional CRC to address child sexual abuse may be appropriate. Permanent members shall be appointed in writing by the commanding officer of the installation in collaboration with the commanding officer of the medical treatment facility (MTF). At a minimum the following permanent members or their alternates must be present in order to conduct a CRC meeting: a line officer (O-4 or above who is not the Family Advocacy Officer and who is not senior in the chain of command to any other permanent member of the CRC), a physician, the FAR, a psychologist, psychiatrist, or clinically privileged mental health care provider, and a judge advocate. Other permanent members may include a MTF social worker(s) or other clinical counselor eligible for independent provider status, Family Service Center counselor(s), child protective worker, shelter representative, pediatrician, pediatric and/or emergency room nurse, other physicians as appropriate, NCIS special agent (a non-voting member), and base security/law enforcement agent. Others who may be invited as consultants in a specific case could be the community health nurse, security officer, drug and alcohol counseling personnel, base chaplain, Child Development Center Director or representative, and Department of Defense Dependent Schools counselor or nurse. A service member's commanding officer or command representative shall be invited to attend the CRC during the time the member's case is being discussed. Consultants and commanding officers or their representatives are not permanent members and do not take part in the case status decision. Appropriate action must be taken to ensure privacy rights are maintained when others outside of Department of Defense attend these meetings.

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b. The CRC or its designee will notify the alleged offender in writing via his/her commanding officer at least 7 days in advance of the CRC's review of the alleged offender's case. The notification will inform the alleged offender that he/she has the right to present a written statement, present other relevant written statements, and may have a command representative attend the CRC meeting. The case manager will inform the alleged victim of the same rights and under the same guidance as above.

3. Training. New CRC members must receive a minimum of 16 hours of FAP focused training on the topic of either child or spouse abuse, as applicable, within 6 months of their appointment to the CRC. All members of the CRC will obtain a minimum of 24 hours of applicable professional training annually.

4. Determinations To Be Made By The CRC

a. The first CRC determination is whether abuse occurred. This is essentially a judgment that a child/spouse has been abused or injured in a non-accidental fashion. Necessary inputs are from medical, social service, and law enforcement professionals who have assessed or examined the victim(s) and circumstances of the abuse. Medical records, police reports, and other relevant documentation shall be reviewed. The CRC must make all reasonable attempts to obtain all relevant information.

b. The second CRC determination is to decide the identity of the offender. The decision as to who committed the abuse is a combination of clinical and legal information. Input is necessary from the victim, family members, witnesses, the alleged offender, NCIS or police reports, command, CPS, and Family Court (when rulings are available). When the victim and alleged offender have been interviewed together in either child abuse or spouse abuse cases, their statements should be considered, however, they must be assessed for reliability (e.g., victim's fear of the alleged offender).

c. The third CRC determination is to decide what interventions are needed in the case. The issues to be addressed are: what treatment or counseling is needed for offenders, victims and family members; what other assessment is needed; what other support services are needed; and what actions may further diminish risk factors. It may be necessary to send/return member and family to a different location for assessment or treatment.

(1) Review of information from clinical (medical, social service, etc.), law enforcement and legal reports is required. Input from member's command is important at this level as is review of member's service record.

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(2) A risk assessment shall be available to the CRC. Risk assessment shall be used to assess level of severity and risk of imminent and future harm, the immediacy and intensity of response required, degree of safety planning needed, and interventions recommended. Defined risk factors should be the basis for determining what specific interventions are needed. (These factors will also determine if a Navy sponsor's service record will be flagged per enclosure (1)).

d. The input of CRC members/consultants need not be given equal weight during the various phases of CRC discussions. CRC permanent members may speak out authoritatively concerning areas in which they are a subject matter "expert," (i.e., a pediatrician concerning medical examinations of children, or a psychologist concerning a mental status examination) or if they are reporting information which they have gathered or observed first-hand (i.e., a base security person who interviewed the victim of abuse). Command representatives should be provided all relevant information, and should participate in all discussions especially if they have relevant information (e.g., the member was restricted to the ship the night the abuse allegedly occurred). However, command representatives are not involved in determining whether abuse has occurred.

e. The CRC will create a written record/minutes of each case that is reviewed. The record will contain the names of the alleged offender and victim(s), the disciplines who were present and how the disciplines voted to include any dissenting opinions, what information was considered, and what was the basis for the CRC's findings (e.g., the allegations of abuse were substantiated based on the member's admission and/or the victim's statement), and CRC recommendations. This record will be forwarded to the Bureau of Naval Personnel (Pers-661) should the member, or victim, or command request review of the CRC decision.

#### 5. Case Status Determination

a. Before making a status determination, the CRC shall ensure that at least 7 days prior to the CRC meeting, they notify alleged offender and his or her command of the general nature of the allegations. The notification will inform the alleged offender that he/she may prepare a written statement which will be presented by the case manager to the CRC for consideration, and that the commanding officer or command representative may be present at the CRC meeting. The case manager will present all available information to the CRC. The alleged offender will be provided written information concerning the FAP, the process of handling a child/spouse or sexual abuse case, and the possible

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consequences. Options for the suspected offender and family shall be clearly explained.

b. The case status determinations are to either substantiate or unsubstantiate the case, and if substantiated, identify the offender. In some cases (e.g., a pre-verbal child), the identity of the offender cannot be determined. In such cases, abuse may be substantiated, but the offender remains unknown.

(1) A substantiated case is one that has been investigated and the preponderance of available information indicates that abuse has occurred. This means that the information that supports the occurrence of abuse is of greater weight, or more convincing than information that indicates abuse did not occur.

(2) When a case is not classified as "substantiated," the CRC shall decide if it is "unsubstantiated" or "suspected." Suspected cases are those for which a case determination is pending further investigation. Duration for a case to be "suspected" and under investigation should not exceed 60 days from the date of the first report of abuse or neglect. Unsubstantiated cases are those cases that have been investigated and the available information is insufficient to support the claim that child abuse and/or neglect or spouse abuse did occur. Unsubstantiated cases are further divided into the categories of "unsubstantiated, did not occur" and "unsubstantiated, unresolved." Definitions of these terms are found in enclosure (1).

(3) The case status determination should be reached after discussion and careful consideration of all information. The fact that an alleged offender was not brought to trial, or was not found guilty, or was convicted of a lesser charge, may not in and of itself, be reason to judge a case as unsubstantiated. The CRC may consider any prior decision by the local Child Protective Service, however, they are not bound by that determination. In these cases, the CRC must obtain all reasonably available information and make its own independent decision.

(4) The case status determination should be made by a simple majority of the permanent members of the CRC. Information from others with personal knowledge of the alleged offender and family should be considered. Dissenting opinions should be reflected in the minutes of the meetings.

(5) When determining the offender in spouse abuse cases, the term "mutual abuse" should not be used. Even though both parties may have used violence in a given incident, a primary

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aggressor (as defined in enclosure (1)) can usually be identified. CRCs should evaluate the context within which the abuse took place by looking at the relevant factors such as the pattern of ongoing abusive behavior, motivation for the abuse including self-defense, and the balance of power in the relationship. If the CRC determines, after evaluating these factors, that both parties are violent, then two offenders and two victims should be identified.

#### 6. Forms and Notification

a. Once the case has been determined to be either substantiated or unsubstantiated, the DD 2486, (Child and Spouse Abuse Incident Report), should be submitted by the FAR to the Central Registry (reference (c) refers). The Navy member/sponsor should be placed on administrative hold (case to be flagged) to prevent permanent change of station (PCS) orders for severe child or spouse abuse, for a series of moderate child or spouse abuse incidents which indicate a pattern of abuse, and for all juvenile family member sex offenders. Flagging is defined in enclosure (1).

b. If a spouse or child fatality has occurred, the CRC will review the case to determine if the death was a result of abuse. If so, a DD 2486 (Child and Spouse Abuse Incident Report) should be filed. Surviving family members (especially young children) should be assessed and considered at risk. CRC review of the case may not interfere with any NCIS investigation.

#### 7. Recommendations for Intervention

a. The CRC must address victim safety issues through a risk assessment process as a primary concern, and recommend appropriate interventions to the responsible commanding officer throughout the life of the case.

b. The CRC must address assessment of the alleged offender for rehabilitation potential to include stopping the abusive behavior, and other immediate interventions with the alleged offender.

c. The member's commanding officer shall be advised, in writing, of the case status and given clear written recommendations concerning the nature of command action needed to protect victim and family. This may include continuation of the military protective order, or extension of removal of the alleged offender from the home. In addition, the command shall be provided with a written report of the CRC decision. This report will include the names of the alleged offender and alleged



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victim(s), disciplines and positions of CRC members present and participating, a synopsis of the information/documents considered in the decision process, and the findings and recommendations of the CRC. (This report is also discussed in paragraph 2 of enclosure 9.)

d. Actions recommended to the responsible commanding officer by the CRC should address both immediate and follow-on actions to include:

- (1) No need for further intervention: case closed, monitored, etc.
- (2) Counseling/rehabilitation needed.
- (3) Counseling/rehabilitation needed but not available:
  - (a) PCS move recommended;
  - (b) Early return of family to the continental United States (CONUS) recommended;
  - (c) Evaluation/assessment needed but not locally available;
  - (d) Transport member/family to other medical treatment facility;
  - (e) Early return of member to CONUS recommended;
  - (f) Member needs to rotate to shore duty or CONUS to participate in recommended program.
- (4) Administrative action is needed, such as:
  - (a) Military Protective Order;
  - (b) Removal of child victim from home;
  - (c) Debarment of offender from base;
  - (d) Revocation of overseas screening.
- (5) Member needs to be referred to other services (e.g., Drug and Alcohol Counseling)
- (6) Member not eligible for program.

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(7) Member's potential for successful completion of counseling, education, and rehabilitation programs.

e. If the recommendation is for early return of victim and/or family to CONUS from overseas or an isolated site, all decisions must be documented and mailed to receiving FAR and FSC. Written documentation is essential for state assumption of jurisdiction. Enclosure (11) provides amplification for isolated and overseas areas.

8. Incidents of alleged child abuse occurring in Department of Defense-sanctioned child or youth care activities or family child care shall be reviewed by the CRC and recommendations provided.

9. Decision: When Is The Case Closed? The criteria for closing a case should be determined as part of risk assessment and must be addressed in the rehabilitation plan. A case is usually closed when identified risk factors are reduced or eliminated, or rehabilitation, education, and counseling is completed, or the offender is determined to be a rehabilitation failure, or the offender is no longer available.

10. All CRC determinations and recommendations, other than tracking cases and flagging records, are forwarded to the responsible commanding officer. All administrative and/or disciplinary actions are taken by the responsible commanding officer.

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MANAGEMENT OF CHILD SEXUAL ABUSE CASES

1. In all cases involving allegations of child sexual abuse, commands will promptly notify Naval Criminal Investigative Service (NCIS), the Bureau of Naval Personnel (BUPERS) (Pers-6 and Pers-8), and the Family Advocacy Representative (FAR). The notification to Pers-8 shall state the substance of the allegations, current status of the alleged offender, and any pending disposition of the case. If a decision as to appropriate disciplinary action is not made within 90 days of the allegation, the command will send a status report to Pers-8. Such status reports will continue every 14 days until resolution of the case.

a. Upon receipt of notification, Pers-8 will temporarily flag the member's record to preclude transfer, reenlistment, or promotion of the member pending resolution of the case.

b. Pers-8 will exercise primary control over the monitoring, evaluation, and disposition of the case, including communications with the parent command. Pers-6 will intake information and maintain informational files, and provide consultation on clinical and safety issues. BUPERS oversight and management of the case will be exercised by Pers-8.

c. Pers-8 will receive information in these cases and will promptly notify the suspected offender via his/her commanding officer of the allegation and the possible outcomes if the allegation is substantiated. The notification will be sent within 10 days of receipt of the allegation and shall discuss:

(1) The requirement to take prompt appropriate disciplinary action and to hold the member accountable for his or her actions, and plan for the safety of family members;

(2) BUPERS temporary flagging procedures and the circumstances under which the flag will be removed;

(3) The member's inability to reenlist, transfer out of the immediate area, or be advanced/promoted pending resolution of the case;

(4) Unless the member has been acquitted at a criminal proceeding, Pers-8, will review the case and direct mandatory administrative separation processing for substantiated allegations;

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(5) If the member's case is substantiated for child sexual abuse, the information will be forwarded to the Navy Central Registry;

(6) The functions of the local Case Review Committee (CRC) and the importance of the member's, victim's (or adult acting on behalf of the child victim), and the command's right to communicate about the case. Decision making by the CRC is of primary importance, however, BUPERS will also review the case; and

(7) Pers-8 must be kept informed of the status of the case, including the disposition of any disciplinary action and whether the allegations are substantiated or unsubstantiated by the CRC.

d. Commands are responsible for taking steps to ensure victim safety, including reviewing the CRC's recommendations in regard to safety planning, and the issuing of a Military Protective Order, if appropriate. Victim(s) and other family members will be provided intervention options by Family Advocacy Program (FAP) personnel.

e. Suspected offenders may not be interviewed by FAP personnel without the express consent of NCIS and prior consultation with the member's commanding officer. The local CRC will review the allegations and inform the member's command and the victim (or an adult acting on behalf of a child victim) of its findings and recommendations. All alleged incest offenders will be afforded the opportunity to request specialized clinical assessment of their suitability for incest offender rehabilitation, education, and counseling. However, this evaluation may not delay appropriate disciplinary and/or administrative action. The member may receive interim rehabilitation, education, and counseling, however, no long term rehabilitation, education, and counseling services will be provided to the suspected offender without the express consent of the Chief of Naval Personnel (CHNAVPERS) or his designee.

2. Substantiated Allegations. In all cases in which the allegations are substantiated, the member will be held accountable, as appropriate, and victim safety issues will be fully addressed. If disciplinary proceedings are not initiated by the command, Pers-8 will review the case and direct administrative processing. The FAR or other knowledgeable subject matter specialist may be called to provide expert testimony concerning the type and nature of the abuse in question.

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a. Extra-familial Child Sexual Abuse. Cases involving allegations of both incest and extra-familial child sexual abuse will be treated as extra-familial cases. Offenders who reside with the child's parent, but are not married to the child's parent are considered extra-familial offenders for purposes of the Navy's rehabilitation, education, and counseling program.

(1) Administrative processing is mandatory, unless the member has been acquitted at a criminal proceeding (including a civilian trial). If the member has been acquitted, BUPERS involvement in the case may be terminated. Extra-familial offenders are ineligible for the Navy's rehabilitation, education, and counseling program.

(2) If the facts of the case warrant administrative separation processing, but the command recommendation is that the member not be processed for separation, Pers-8 may forward the case to the Child Sexual Abuse Review Board (CSARB) for a decision. The recommendation of the first flag officer in the chain of command will be a valuable data point in deciding on an ultimate course of action. If the member is ultimately retained on active duty, the temporary flag will be removed. In appropriate cases (after review by the CSARB), where the member is retained on active duty, Pers-8 may direct that the member be separated at the end of his/her obligated service. An RE-4 reenlistment code will be assigned.

b. Incest

(1) Administrative processing is mandatory, unless the member has been acquitted at a criminal proceeding. If the facts of the case warrant administrative separation processing, but the command recommendation is that the member not be processed for separation, Pers-8 may forward the case to the CSARB for a decision. The recommendation of the first flag officer in the chain of command will be a valuable data point in deciding on an ultimate course of action. If the member is ultimately retained on active duty, the temporary flag will be removed. In appropriate cases (after review by the CSARB), where the member is retained on active duty, Pers-8 may direct that the member be separated at the end of his/her obligated service. An RE-4 reenlistment code will be assigned.

(2) Those members who are ultimately retained on active duty, after completion of appropriate administrative/disciplinary action may be evaluated for the Navy's rehabilitation, education, and counseling program for incest offenders. Commands have the option to recommend long term education and counseling for eligible offenders who accept responsibility for their abusive

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behavior and have been assessed as good FAP program candidates. Rehabilitation, education, and counseling for screened incest offenders, after accountability, can result in a positive outcome for victims, family, and the community. Pers-8 will promptly inform Pers-661 of members who are retained on active duty. Pers-661 will then contact the member's command and request the command forward a disposition package within 30 days of completion of the administrative separation processing. This package will include a recommendation by the command as to the member's potential for future worthwhile and productive service, and a recommendation as to acceptance into the Navy's rehabilitation, education, and counseling program. The member will be evaluated for acceptance into the rehabilitation program, utilizing the following criteria:

- (a) Be recommended by his/her commanding officer for retention and this recommendation is endorsed by the first flag officer in the chain of command;
- (b) Be determined to be suitable for rehabilitation, education, and counseling by a licensed therapist who specializes in the rehabilitation, education, and counseling of child sexual abuse offenders;
- (c) Have demonstrated a sincere motivation to be rehabilitated;
- (d) Have a record of positive performance; and
- (e) Have definite potential for future productive and worthwhile service.

(3) Pers-661 will provide a written recommendation to Pers-6 who will then provide a written recommendation to CHNAVPERS. The final decision as to acceptance into the Navy's rehabilitation program for incest offenders will be made by CHNAVPERS or his designee. Disciplinary action notwithstanding, if the member is not accepted into the rehabilitation program, in appropriate cases (after CSARB review) Pers-8 may direct that the member be discharged at his/her expiration of active obligated service. An RE-4 reenlistment code will be assigned.

(4) Members who are accepted into the Navy's rehabilitation program will be notified of said acceptance in writing. The member will agree to provide copies of rehabilitation progress to the local FAR and Pers-661. Pers-661 will monitor the member's progress in rehabilitation, education, and counseling. The local FAR and Pers-661 will take reasonable steps to ensure victim safety. Once the member has successfully

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completed the rehabilitation program, the temporary flag will be removed from his/her record. Should the member fail to make adequate progress within 6 months of acceptance into the rehabilitation program or be deemed a rehabilitation failure as defined in enclosure (1), Pers-661 will then inform Pers-8 who will, in appropriate cases, direct that the member be administratively processed as a rehabilitation failure.

3. Unsubstantiated Allegations. When a CRC determines that allegations of incest and/or extra-familial child sexual abuse are unsubstantiated, normally the case will be closed and the temporary flag will be removed from the member's record. If either Pers-8 or Pers-661 believes that the local CRC reached an incorrect decision and the case should be substantiated, then either Pers-6 or Pers-8 may refer the case to the Navy Headquarters Review Team (HRT) for a clinical opinion. The CRC decision is not incorrect when it considers all available relevant information, but other reviewers may disagree with its conclusions.

4. Headquarters Review Team (HRT). The HRT serves a dual function by acting as the reviewing authority for all FAP cases where the member, victim, or command requests review of the CRC's substantiation decision (see enclosure (9)). In child sexual abuse cases the HRT serves as an advisory group which presents clinical recommendations to Pers-6 and Pers-8. Pers-6 will appoint the chair of the HRT. The HRT will be made up of representatives of various disciplines using the prescribed membership of local CRC's as a model. At a minimum, a law enforcement and legal representative, a psychologist, psychiatrist or clinically privileged health care provider, a pediatrician, a social worker familiar with the case, and a line officer (O-4 or above) from Pers-8 will be present.

a. The HRT will review those cases forwarded to it by either Pers-8 or Pers-661, or under the review procedures outlined in enclosure (9). The HRT shall obtain all relevant information, including any information that the complainant (alleged victim or offender) wishes to provide. The members will attempt to reach a unanimous decision, however, if a unanimous decision cannot be reached, then each discipline represented will have one vote.

b. A written report of each case reviewed will be forwarded to Pers-6. The report shall contain a summary and analysis of the facts of the case, the names of members who were present, the HRT's recommendation, and a detailed explanation of the recommendation. If members dissent from the majority decision, the dissent and the reason for it will be stated in the report. Pers-6 may take final action on the case or refer it to the

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CSARB. Results of HRT meetings will not be final until Pers-6 reviews them and authorizes release.

5. Child Sexual Abuse Review Board (CSARB)

a. The CSARB is a flag level review board under the purview of Pers-6. It is comprised of principals from Pers-6, -2, -4, -8, and -06, who shall normally be present for all meetings. The CSARB will review those cases referred for a decision by CHNAVPERS or his designee, Pers-6, Pers-2, Pers-4, Pers-8 and the HRT. The CSARB may also consider cases where the member requests further review after a HRT recommendation when a personnel action (other than entry of the member's name in the Central Registry) is pending or has been executed (e.g., the member will not be allowed to reenlist). The CSARB reviews the HRT recommendation to ensure that all available relevant information was considered, to ensure the HRT did not reach an incorrect decision, and to determine what, if any, administrative action should be taken.

b. Prior to CSARB review of a case the alleged active duty offender will be notified in writing via his/her chain of command at least 30 days prior to the meeting. The notification will provide a synopsis of the information to be considered, any potential adverse personnel action, and advise the member that he or she has the right to present a written statement to the CSARB and any other relevant information including witness statements. The decision of the CSARB is final, and the member shall be notified via his/her command of this decision in writing. The command will notify the victim and family members of all available assistance. A written report of the CSARB meeting will be maintained by Pers-6.

6. Forced Conversion

a. Pers-2 will identify those ratings which may require a forced conversion to a different rating if the member's case is substantiated for child sexual abuse. Pers-8 and Pers-661 will forward those substantiated cases to Pers-2 where a forced conversion is contemplated. Pers-2 will normally decide whether the member should be required to convert to a different rating.

b. Pers-2 should obtain an opinion from BUPERS Legal Counsel (Pers-06) before his or her decision. If Pers-2 concludes that a member should be forced to convert from one rating to another, then the member will be notified in writing and advised of his/her right to forward any additional information to Pers-2. In unusual cases, Pers-2 may refer the case to the CSARB for a decision and ultimate approval by the CHNAVPERS or his designee.



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PROCEDURES FOR REVIEW OF CRC DECISIONS

1. General. Case Review Committee (CRC) decisions are, subject to the formal review process set out below, final as to all cases arising under the Navy's Family Advocacy Program (FAP). CRC decisions to substantiate or unsubstantiate the allegations in cases involving child sexual abuse are reviewed in accordance with enclosure (8). Under the conditions set forth below the CRC decision to substantiate or unsubstantiate allegations may be reviewed by the Headquarters Review Team (HRT). The HRT will review all available relevant information, and make a recommendation to the Assistant Chief of Naval Personnel, Personal Readiness and Community Support (Pers-6) as to whether the CRC decision should be upheld or overturned. The review will not consider the propriety of any actions taken by a commanding officer as a result of the CRC's findings. A service member who considers himself or herself wronged by the actions of his/her commanding officer may seek redress through other means, to include Request Mast procedures or filing a complaint under Article 138, Uniform Code of Military Justice (UCMJ).

2. Review Process Procedures

a. Once the CRC has made a determination as to whether the allegations are substantiated or unsubstantiated, the Family Advocacy Representative (FAR) will forward a report of the CRC's decision to the alleged military offender and/or victim's commanding officer. Commands will take appropriate steps to ensure the CRC determination is forwarded to alleged civilian offenders and victims. The report shall contain the following information:

- (1) The names of the parties involved in the case;
- (2) The CRC decision and recommendation;
- (3) The positions/disciplines that were present and participated in the decision and recommendations;
- (4) A synopsis of the information/documents considered and the information relied upon;
- (5) A Statement of Rights letter (attached at the end of this enclosure) for the alleged offender or victim, as appropriate.

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b. Upon receipt of the CRC report and recommendations, the alleged offender, victim or sponsor's commanding officer or his/her designee will:

(1) Review and discuss the case summary with the alleged offender, or victim, or sponsor as appropriate. The commanding officer will exercise his/her discretion as to whether the commanding officer's intended response to the CRC's recommendations are to be discussed.

(2) Have the alleged offender, victim or sponsor review and complete the Statement of Rights which outlines his/her right to request review.

c. The following individuals may request review of the CRC determination to substantiate/unsubstantiate the allegations of abuse:

(1) Alleged Military Offender. The installation CRC must have substantiated abuse on the part of the military offender submitting a request.

(2) Alleged Civilian Offender. The installation CRC must have substantiated abuse on the part of the civilian offender submitting a request.

(3) Alleged Victim (military or civilian). The installation CRC must have unsubstantiated abuse in an incident the alleged victim was directly involved in. If the victim is a minor child, his or her non-offending parent or other responsible adult may submit a request for review.

(4) Commanding Officer. The commanding officer of the alleged offender or victim, or the commanding officer of the sponsor of the alleged offender or victim may request the local CRC reconsider its decision in an individual case.

d. Requests for review must be in writing, submitted within 30 days of receipt of the CRC's report, and based on one or more of the following grounds.

(1) Newly discovered information. The petitioner must demonstrate that:

(a) The information was discovered within 30 days of the date the petitioner was notified of the CRC's decision.

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(b) The new information is not such that it would have been discovered by the petitioner at the time of CRC case disposition in the exercise of due diligence; and

(c) The newly discovered information, if considered by the installation CRC, would probably produce a substantially more favorable result for the petitioner.

(2) Fraud on the installation CRC. The petitioner must demonstrate that the fraud substantially influenced the CRC decision. Examples of fraud on the installation CRC which may warrant granting a request for review are:

(a) Confessed or proved perjury in statements or forgery of documentary evidence which substantially influenced the CRC decision.

(b) Willful concealment of information by one or more of the CRC members which was favorable to the alleged offender/victim and petitioner can demonstrate a substantial likelihood that knowledge of the information may have resulted in a different finding by the CRC.

(3) Voting member was absent. If a voting member was absent and such absence negatively impacted upon a finding that the abuse was or was not substantiated. For purposes of this section identified voting members are the judge advocate, a physician, psychologist, psychiatrist, or clinically mental health care provider, the line officer, and the FAR. The petitioner must affirmatively demonstrate a substantial likelihood that the voting member's presence may have changed the outcome of the installation CRC case disposition. CRC attendance by a designated representative of the absent voting member will negate HRT review on this ground.

(4) Not guilty/guilty finding after a military or civilian full trial on the merits. The alleged offender/victim must demonstrate that new or additional evidence was considered during the trial. The following limitations apply:

(a) The charge(s) decided upon during the trial on the merits must be directly related to the incident which formed the basis of substantiated/unsubstantiated abuse findings at the installation CRC case disposition, and;

(b) The petitioner demonstrates a substantial likelihood that the evidence in question, if considered by the installation CRC may have produced a substantially more favorable

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result for the petitioner, or the evidence in question directly impacted upon the finding of not guilty/guilty.

(5) The decision of the CRC was based upon plain legal or factual error. An examination of the record establishes that the decision was based upon a plain error. An example of plain legal error is refusal to substantiate the allegations solely because the criminal statute of limitations has run. An example of plain factual error is the alleged offender was in confinement on the date the alleged assault took place at the victim's home.

### 3. Format of request for review

a. Requests must be made in writing, state the basis for the request for review, and made within 30 days of receipt of the report of the CRC's decision. Alleged offenders and victims may file a formal written request for review to either the installation CRC or the HRT. There is no requirement to request installation CRC reconsideration before forwarding a request to the HRT, however, the request shall be forwarded via the responsible commanding officer. The responsible commanding officer will request input from the CRC prior to forwarding the request to the HRT. The CRC will forward their input within 15 days of the commanding officer's request.

b. The CRC must reconsider any case within 30 days of receipt of the request. The FAR shall provide a final opinion to the requester, which follows the same format as the report of the CRC decision. If the requester then elects to file a request for review with the HRT, the FAR will forward the written report of the CRC decision, and copies of all documents relied upon to make that decision to the Bureau of Naval Personnel (BUPERS) (Pers-661) for disposition.

c. Regardless of any intent to request review, Central Registry submissions shall not be delayed pending review by the installation CRC or the HRT.

### 4. Time limits

a. Installation CRC reconsideration. A formal written request for reconsideration of the CRC determination must be filed within 30 days of receipt of the report of the CRC's decision. If the basis for the request is a not guilty/guilty finding, during a full trial on the merits, the request must be submitted within 30 days of the trial's conclusion. The CRC must consider the case within 30 days of receipt of the request for reconsideration.

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b. HRT review. A formal written request for HRT to review the decision of a local CRC must be forwarded to BUPERS (Pers-661) within 30 days of receipt of the report of the CRC decision or within 30 days of receipt of the CRC's reconsideration decision. If the basis for the request is a not guilty/guilty finding, after a full trial on the merits, the request must be submitted within 30 days of the trial's conclusion. Time between a formal request for reconsideration by the installation CRC and the CRC's decision on such a request will not be counted for the purposes of this period. The HRT must review the case within 30 days of receipt of all available information.

5. Headquarters Review Team (HRT) Procedures. The composition of the HRT is similar to the installation CRC (see enclosure (8)). The purpose of HRT review will be to ensure that the CRC considered all the available relevant facts/information and, in so doing, made the appropriate case determination or reconsideration. The HRT serves a dual function in that it may review cases it receives under this enclosure, and it may provide clinical recommendations in cases involving allegations of child sexual abuse.

a. In cases where the grounds for review have not been met, or where the person who has filed the request does not meet the criteria in paragraph 2c, the HRT shall return the request to the petitioner via the cognizant unit commander without addressing the merits of the request. In such cases, the HRT will prepare an endorsement stating the reasons the request was returned.

b. The HRT shall make its decision based upon the record provided by the FAR, any information contained in the unit commander's endorsement, as well as any information provided by the petitioner. Requests which lack the required documentation shall be returned to the petitioner, via the cognizant unit commanding officer, without addressing the merits of the requests. In such cases, the HRT will prepare an endorsement stating the reasons the request was returned.

c. The HRT will prepare a written decision in each case. In cases where the HRT recommends the request be granted, the HRT's report shall cite the portion of the record which supports the decision. In cases where the request has been denied, the HRT's report shall state the reason the grounds for review were deemed to be insufficient. All recommendations shall be forwarded to Pers-6 for final decision after a review of the entire record. Final decisions by Pers-6 shall be sent to the petitioner via the endorsing unit or installation commanding officer. Copies of all such decisions shall also be provided to the installation CRC.

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d. A majority or a consensus voting system will be utilized to determine whether to recommend that an request be granted. Abuse findings contained in the Navy Central Registry shall be amended immediately after a request has been granted by Pers-6.

e. The decision of Pers-6 on any request for reconsideration resolved on the merits shall be final.

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STATEMENT OF RIGHTS

1. The following persons may request review of the Case Review Committee's (CRC) determination to substantiate/unsubstantiate the allegations of abuse.

a. Alleged Military Offender when the CRC has substantiated allegations of abuse by the alleged military offender.

b. Alleged Civilian Offender when the installation CRC has substantiated abuse on the part of the civilian offender submitting a request.

c. Alleged Victim (military or civilian) when the installation CRC has unsubstantiated abuse in an incident in which the alleged victim was directly involved. If the victim is a minor child, his or her non-offending parent or other responsible adult may submit a request for review.

d. Commanding Officer of the alleged offender or victim, or the commanding officer of the sponsor of the alleged offender or victim may request the installation CRC reconsider its decision in an individual case.

2. If you are one of the individuals outlined above; you may submit a written request for review based on the presence of one or more of the following grounds for review.

a. Newly discovered information. You must demonstrate that:

(1) The information was discovered within 30 days of the date you were notified of the report of the CRC's decision.

(2) The new information is not such that it would have been discovered by you at the time of CRC case disposition in the exercise of due diligence; and

(3) The newly discovered information, if considered by the installation CRC, would probably produce a substantially more favorable result for you.

b. Fraud on the installation CRC. You must demonstrate that the fraud substantially influenced the CRC. Examples of fraud on the installation CRC which may warrant granting of review are:

(1) Confessed or proved perjury in statements or forgery of documentary evidence which substantially influenced the CRC.

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(2) Willful concealment of information by one or more of the CRC members, which was favorable to the alleged offender/victim and you can demonstrate a substantial likelihood that knowledge of the information may have resulted in a different finding by the CRC.

c. Voting member was absent. If a voting member was absent and such absence negatively impacted upon a finding that the abuse was or was not substantiated. Identified voting members are the judge advocate, the physician, the psychologist, psychiatrist or clinically privileged mental health care provider, the line officer, and the FAR. You must demonstrate a substantial likelihood that the voting member's presence may have changed the outcome of the installation CRC case disposition. CRC attendance by a designated representative of the absent voting member will negate review on this ground.

d. Not guilty/guilty finding after a full trial on the merits. You must demonstrate that new or additional evidence was considered during the trial. The following limitations apply:

(1) The charge(s) decided upon during the trial on the merits must be directly related to the incident which formed the basis of substantiated/unsubstantiated abuse findings at the installation CRC case disposition, and;

(2) You demonstrate a substantial likelihood that the evidence in question, if considered by the installation CRC, may have produced a substantially more favorable result for alleged offender/victim, or the evidence directly impacted upon the finding of not guilty/guilty.

e. The decision of the CRC was based on plain legal or factual error. A review of the record establishes that the decision was based on plain error. An example of plain legal error is refusal to substantiate the allegations because the criminal statute of limitations has run. An example of plain factual error is that alleged offender was in confinement on the date the alleged assault took place at the victim's home.

3. You may submit a written request for review via your commanding officer or your sponsor's commanding officer to either the installation CRC or the Bureau of Naval Personnel (BUPERS) (Pers-6), Navy Annex, Washington, DC 20370-5000. Your request must be made within 30 days from today. If your request is denied by the CRC, you have an additional 30 days from receipt of the CRC reconsideration to request review by BUPERS (Pers-6).



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However, requests for review will not be granted unless you are one of the individuals listed in paragraph 1 above, and your request is based upon one of the grounds set forth in paragraph 2.

I have read and understand the rights above.

I do/do not elect to request reconsideration by the CRC of their decision to substantiate/unsubstantiate the allegations in my case.

I do/do not elect to request review of the CRC decision by the Headquarters Review Team.

\_\_\_\_\_  
COMMAND REPRESENTATIVE

\_\_\_\_\_  
ALLEGED OFFENDER/VICTIM

\_\_\_\_\_  
DATE OF RECEIPT BY ALLEGED  
OFFENDER OR VICTIM, OR COMMAND

Copy to:  
FAR  
CRC

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GUIDANCE FOR MAINTENANCE OF FAP RECORDS

1. Family Advocacy Program (FAP) records are covered by the Privacy Act and are listed under the N06320-2 systems notice (see appendix A to this enclosure). All FAP records must be maintained in accordance with this systems notice, i.e., they must be maintained in various filing equipment in specified monitored or controlled access rooms or areas. Public access is not permitted. Records are accessible only to authorized personnel who are properly screened and trained, and on a need-to-know basis. Some examples of authorized routine users who have a need-to-know are: the member's commanding officer; the command legal officer; the recorder in an administrative separation board; and Naval Criminal Investigative Service (NCIS) investigators.

2. Generally if the record is retrievable by the individual's name or personal identifier, and that individual makes a request for his or her own record, a copy of the entire record should be provided to the individual, unless one of the exemptions included in the attached appendix applies. Requests for NCIS reports will be forwarded to Department of the Navy, Headquarters, Naval Criminal Investigative Service (Code 00JF), Washington Navy Yard, Building 111, 901 M Street SE, Washington, DC 20388-5380, for release. Placing copies of NCIS reports or law enforcement reports in the FAP record is strictly prohibited.

3. If the command wants to deny release of the FAP record in whole or in part, the request with a copy of the record along with an explanation as to why the record should be denied should be forwarded to the General Court-Martial Convening Authority who is an Initial Denial Authority, or to Chief, Bureau of Medicine and Surgery, Medico-Legal Affairs, Code 00L, 2300 E Street NW, Washington, DC 20372-5000, or Bureau of Naval Personnel (Pers-661), 2 Navy Annex, Washington, DC 20370-6610, as appropriate.

4. All other requests by third parties, (e.g., anyone whose personnel identifier or name is not used to retrieve the FAP

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file) should be handled in accordance with the Freedom of Information Act (reference (1)). Prior to any release of a FAP record, the FAP counselor should consult with the installation staff judge advocate or the nearest Naval Legal Service Office.

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N06320-2

**System name:**

Family Advocacy Program System

**System location:**

Case files: Family Service Center, Family Advocacy Center, and/or Medical Treatment Facilities at the local naval activity that services the local beneficiaries. Official mailing addresses for naval activities are published as an appendix to the Navy's compilation of systems of records' notices.

Central Registry: Commanding Officer, Naval Medical Management Information Center, 8901 Wisconsin Avenue, Bethesda, MD 20889-5066.

Centralized Child Sexual Abuse Case files: Chief of Naval Personnel (Pers-661), 2 Navy Annex, Washington, DC 20370-6610.

**Categories of individuals covered by the system:**

All beneficiaries entitled to care at Navy medical and dental facilities whose abuse or neglect is brought to the attention of appropriate authorities, and all beneficiaries reported for abusing or neglecting such victims.

**Categories of records in the system:**

The Central Registry consists of information extracted from DD Form 2486, entitled Child/Spouse Abuse Incident Report.

Individual case files are maintained on the victim and alleged offender who qualify as beneficiaries.

Victim's file: consists of in-take data, photographs, audio tapes, risk assessment, case notes, committee reports, correspondence and other supporting data assembled relevant to abuse or neglect and generated by the Family Advocacy Program staff that are specific to the victim.

Offender's file: consists of in-take data, photographs, audio tapes, risk assessment, case notes, committee reports, correspondence and other supporting data assembled relevant to abuse or neglect and generated by the Family Advocacy Program staff that are specific to the offender.

Other non-permanent records generated outside of the Family Advocacy Program (i.e., NCIS investigative reports, local police

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reports, base security incident complaint reports, psychiatric and substance abuse evaluations, treatment reports, copies of pertinent medical record entries, child protective services reports, shelter reports, etc.), are maintained in a separate folder. The documents are retrieved by case number only.

**Authority for maintenance of the system:**

5 U.S.C. 301, Departmental Regulations; E.O. 9397; DOD Directives 6400.1, 6400.1-M, 6400.2; SECNAVINST 1752.3; OPNAVINST 1752.2; and NAVMEDCOMINST 6320.22.

**Purpose(s):**

To collect information pertaining to the identification, prevention, evaluation, intervention, treatment and rehabilitation of beneficiaries involved in abuse or neglect. To notify and provide pertinent information to DOD and DON officials responsible for intervening in abuse and/or neglect incidents.

To provide headquarters centralized case management of child sexual abuse incidents.

**Routine uses of records maintained in the system, including categories of users and the purposes of such uses:**

In addition to those disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act, these records or information contained therein may specifically be disclosed outside the DoD as a routine use pursuant to 5 U.S.C. 552a(b)(3) as follows:

To the Executive Branch of government in the performance of their official duties relating to the coordination of family advocacy programs, medical care, and research concerning family member abuse or neglect.

To federal, state or local government agencies when it is deemed appropriate to utilize civilian resources in the counseling and treatment of individuals or families involved in abuse or neglect or when it is deemed appropriate or necessary to refer a case to civilian authorities for civil or criminal law enforcement.

To authorized officials and employees of the National Academy of Sciences, and private and public organizations and individuals for authorized health research in the interest of the federal

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government and the public. When not considered mandatory, patient identification data shall be eliminated from records used for research studies.

To officials and employees of federal, state, and local governments and agencies when required by law and/or regulation in furtherance of local communicable disease control, family abuse prevention programs, preventive medicine and safety programs, and other public health and welfare programs.

To officials and employees of local and state governments and agencies in the performance of their official duties relating to professional certification, licensing, and accreditation of health care providers.

To law enforcement officials to protect the life and welfare of third parties. This release will be limited to necessary information. Consultation with the hospital or regional judge advocate is advised.

The 'Blanket Routine Uses' that appear at the beginning of the Navy's compilation of systems notices also apply to this system.

Note: Records of identity, diagnosis, prognosis or treatment of any patient which are maintained in connection with the performance of any program or activity relating to substance abuse education, prevention, training, treatment, rehabilitation, or research, which is conducted, regulated or directly or indirectly assisted by any department or agency of the United States shall, except as provided in 42 U.S.C. 290dd-2(e), be confidential and be disclosed only for the purposes and under the circumstances expressly authorized in 42 U.S.C. 290dd-2(b). These statutes take precedence over the Privacy Act of 1974 in regard to accessibility of such records except to the individual to whom the record pertains. The 'Blanket Routine Uses' do not apply to these types of records.

**Policies and practices for storing, retrieving, accessing, retaining, and disposing of records in the system:**

**Storage:**

Records may be stored in file folders, microfilm, magnetic tape, machine lists, discs, and other computerized or machine readable media.

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**Retrievability:**

Victim's file is retrieved by name of victim, case number, their Social Security Number, and/or year of incident.

Alleged offenders' file are retrieved by alleged offenders' name, case number, their Social Security Number and/or year of incident.

Central registry data is retrieved by any identifying data element on the DD Form 2486.

**Safeguards:**

These files are highly sensitive and must be protected from unauthorized disclosure. While records may be maintained in various kinds of filing equipment, specific emphasis is given to ensuring that the equipment areas are monitored or have controlled access. Records are accessible only to authorized personnel who are properly screened and trained and/or have a need-to-know consistent with the purpose for which the information was collected.

Information maintained on a computer requires password protection. Computer terminals are located in supervised areas with access controlled system.

Family Advocacy Program Staff will ensure that the in-take assessment and clinical notes are not duplicated and placed in both the victim and alleged offender's files.

**Retention and disposal:**

Family Advocacy Program case records are maintained at the activity 4 years after the last entry in the file. If there is no subsequent activity 4 years after closure, the records are transferred to the National Personnel Records Center, 9600 Page Boulevard, St. Louis, MO 63132-5100, where they are retained for 50 years and then destroyed.

Central Registry data base is retained permanently at the Naval Medical Information Management Center. Paper copies are maintained for 3 years and then destroyed.

**System manager(s) and address:**

Central Registry: Chief, Bureau of Medicine and Surgery, 2300 E Street, NW, Washington, DC 20372-5120.

Program Manager for Child Sexual Abuse Files: Chief of Naval Personnel (Pers-661), 2 Navy Annex, Washington, DC 20370-6610.

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Case Files: Commanding officers of installations with Family Service Centers, Medical Treatment Facilities, or Family Advocacy Centers at naval activities. Official mailing addresses are published as an appendix to the Navy's compilation of systems of records notices.

**Notification procedure:**

Individuals seeking to determine whether this system of records contains information about themselves should address written inquiries to the commanding officer of the naval activity from which they received treatment. Official mailing addresses are published as an appendix to the Navy's compilation of systems of records.

Request should contain the full name, Social Security Number of the individual, and/or year of the incident.

Individuals seeking to determine whether this system of records contains information in the Central Registry about themselves should address written inquiries to the Chief, Bureau of Medicine and Surgery, 2300 E Street, NW, Washington, DC 20372-5120.

Requests should contain the full name and Social Security Number of the individual.

Individuals seeking to determine whether this system of records contains information in the centralized Child Sexual Abuse files about themselves should address written inquiries to the Chief of Naval Personnel (Pers-661) 2 Navy Annex, Washington, DC 20370-6610.

Requests should contain the full name and Social Security Number of the individual.

**Record access procedures:**

Individuals seeking to access records about themselves in the case files should address written inquiries to the commanding officer of the naval activity from which they received treatment.

Official mailing addresses are published as an appendix to the Navy's compilation of systems of records.

Request should contain the full name, Social Security Number of the individual and/or year of the incident.

Individuals seeking to access records about themselves that are contained in the Central Registry about themselves should address

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written inquiries to the Chief, Bureau of Medicine and Surgery, 2300 E Street, NW, Washington, DC 20372-5120.

Requests should contain the full name and Social Security Number of the individual.

Individuals seeking to access records about themselves contained in the centralized Child Sexual Abuse files about themselves should address written inquiries to the Chief of Naval Personnel (Pers-661) 2 Navy Annex, Washington, DC 20370-6610.

Requests should contain the full name and Social Security Number of the individual.

**Contesting record procedures:**

The Navy's rules for accessing records, and for contesting contents and appealing initial agency determinations are published in Secretary of the Navy Instruction 5211.5; 32 CFR part 701; or may be obtained from the system manager.

**Record source categories:**

Victim; offender; medical and dental records; educational institutions; medical institutions; private practitioners; law enforcement agencies; public and private health and welfare agencies; and witnesses.

**Exemptions claimed for the system:**

Part of this system may be exempt under 5 U.S.C. 552a(k)(2) and (k)(5), as applicable.

An exemption rule for this system has been promulgated in accordance with requirements of 5 U.S.C. 553(b)(1), (2), and (3), (c) and (e) and published in 32 CFR part 701, subpart G. For additional information contact the system manager.

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GUIDANCE FOR OVERSEAS AND ISOLATED AREAS

1. Accompanied service in overseas and isolated duty stations presents unique challenges. One of those challenges can be fashioning an appropriate response to family advocacy-related situations which does not conflict with the Status of Forces Agreement (SOFA) or other international agreements, and the jurisdiction which may be entertained by the cognizant foreign court. In isolated sites within U.S. control, unique challenges may exist because there is a lack of trained personnel on site but expeditious transfer to a location where services are available is not practical. Commanders are strongly advised to immediately consult the installation Staff Judge Advocate (SJA) to ensure legal considerations are managed in a manner which does not inappropriately conflict with victim safety. The following guidance is provided to assist commanders faced with these situations.

2. In any case of alleged child abuse, the safety of the victim shall be the primary concern and shall be assessed immediately by the Family Advocacy Representative (FAR), command, and law enforcement personnel. The FAR may request other professional input but shall have the situation reviewed by the relevant Case Review Committee (CRC) on an emergency basis. The FAR will advise the member's unit commander and the installation commander and recommend appropriate action as necessary. These actions may include:

a. Interview of the child by a trained interviewer, skilled in age-appropriate techniques.

(1) The interviewer may be the installation FAR, Naval Criminal Investigative Service (NCIS) special agent, physician, and/or mental health professional. If there is an ongoing NCIS investigation the interviewer should consult with NCIS prior to speaking to the child, unless the questioning occurs during the provision of medical care.

(2) The installation commander may order such an interview without the parents' consent if he or she determines that the interview is required to protect the health and safety of the child and civilian authorities are not reasonably available to direct such an interview.

(3) Commanders should expect the interviewer to take into consideration the following factors when arranging for the interview of a child: age of child; physical, mental, or emotional limitations of child; and parental concerns over child's comfort and well-being.

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b. Temporary removal of the child from the home, by order of the installation commander.

(1) The authority of commanders to remove children from their homes without parental consent is limited to situations where there is substantial reason to believe the life and/or health of the child is in real and present danger. It is also appropriate when there is no protecting and responsible adult in the home and the child is located in an overseas location, an isolated site, or in an area under the sole jurisdiction of U.S. military forces.

(2) Use of the commander's inherent authority in this regard may be limited by local law, agreements, or treaties. Commanders should consult with an SJA before issuing any such order unless the delay occasioned by such consultation is, in the opinion of the commander, likely to result in death or serious bodily harm to the child.

(3) Commanders shall consider the following factors before making a decision regarding removal of a child:

(a) Removal of a child from the home is a drastic action that could be challenged by the parents and, as a result, must be documented completely.

(b) Whether the facts pertinent to the child's situation are fully known and whether alternatives to removal may exist. In this regard, input should be obtained from the installation FAR, CRC, and SJA. The Bureau of Naval Personnel (BUPERS) (Pers-661) is available to provide advice as needed.

(c) Removal decisions should be based, when possible, on legal advice that takes into account all relevant facts, local laws, and, in overseas locations, applicable treaties, SOFAs, and whether the host nation expressed an interest in the case or relinquished jurisdiction.

(d) The consent of the parent allowing removal of the child for treatment and care should be requested and, if possible, obtained, prior to removal. They may consent for the good of the child.

(e) When not inconsistent with the safety and welfare of the child, afford notice and opportunity for the parents to present their side of the story before removal.

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(f) If the commander determines removal from the parent/guardian is indicated, a written Child Removal Order (CRO) should be used. A sample CRO is found at the end of this enclosure.

(4) If the installation commander determines a child is in physical danger, and the parents are unavailable or uncooperative, the commander of the medical treatment facility (MTF) may admit the child to an MTF or provide required medical care without parental authorization. Involvement of a parent or sponsor in the treatment process should always be sought to increase understanding and reduce resistance to medical care; however this consideration should not be permitted to inappropriately conflict with identified victim safety concerns.

(5) If the commander determines removal from the parent/guardian is indicated, a written CRO should be used and an appropriate factual record of the decision and supporting information should be compiled. The FAR in conjunction with the sponsor's command and the CRC is responsible for developing and implementing a safety plan.

(6) The commander's authority to remove the child is temporary. It continues only until:

(a) The immediate threat has passed;

(b) Local civilian authorities assume responsibility for the case; or

(c) Return of the family to the continental United States (CONUS) and local civilian authorities assume responsibility for the case.

3. When medically identified diagnostic or treatment needs are critical, but cannot be met by local resources, temporary transportation of the victim, service member, or family to a location having the required services may be recommended by the local FAR.

a. In cases where diagnostic or treatment needs are expected to be prolonged, the commander may consider other solutions consistent with victim safety, command resources, and mission.

b. Alternatives to temporary transportation include revocation of command sponsorship, directing early return of family members, or recommending permanent change of station (PCS) orders for the sponsor service member.

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4. If it is determined that long-term foster care and treatment is required, return the child (and preferably the parents) to CONUS. Specific guidance regarding early returns is provided in the officer and enlisted transfer manuals. In overseas locations, use the FAR to assist in making arrangements. Decisions to return families or family members should be made only after a thorough assessment, investigation, and review by the CRC. Early return decisions may be made in crisis situations requiring urgent action. It may be necessary to use telephonic contacts and ad hoc committee meetings to make rapid case determinations. The transfer process is outlined below:

a. In overseas locations the FAR will be responsible for the following:

(1) Coordinating with the FAR at the receiving location and providing complete case information.

(2) Sending a letter to the gaining command explaining the case and recommending the command contact the local FAR.

(3) Arranging escorts for minors if safety of the minors is a concern.

(4) Requesting follow up reports from the gaining command, FAR, and CPS if a member is not transferred with the family.

(5) Enrolling the child victim in need of treatment in the Exceptional Family Member Program (EFMP).

b. The receiving FAR is responsible for the following:

(1) Reviewing the case with the local CRC to ensure safety of all members and determining how the family's needs will be met by local resources.

(2) Reporting child abuse cases to the local CPS. State social agencies have differing policies regarding acceptance of cases originating outside their jurisdiction.

(3) Assuming normal FAP case management duties.

(4) Providing case updates to the overseas FAR or isolated command if a member did not transfer with the family.

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5. The FAR and command will keep the child's interest paramount. They shall use all available resources in making informed decisions, and documenting the removal decision and subsequent actions.

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SAMPLE MILITARY CHILD REMOVAL ORDER

From: Commanding Officer, \_\_\_\_\_  
(Name of Command)

To: \_\_\_\_\_  
(e.g., duty officer, security officer, FAR)

(Via): \_\_\_\_\_  
(Use only if applicable, i.e., regional coordinator)

Subj: MILITARY CHILD REMOVAL ORDER IN THE CASE OF \_\_\_\_\_

Ref: (a) OPNAVINST 1752.2A

1. You are hereby directed to remove \_\_\_\_\_  
son(s)/daughter(s) of \_\_\_\_\_ (and \_\_\_\_\_  
\_\_\_\_\_) from (the family home at \_\_\_\_\_  
\_\_\_\_\_) (other location \_\_\_\_\_).

Unless otherwise directed by me or my designee, the above  
child(ren) will be returned to the home not later than \_\_\_\_\_,  
\_\_\_\_\_ 19 \_\_\_\_.

2. I am directing this action because I have substantial reason  
to believe that an emergency situation exists and that the above  
child(ren) may be in imminent danger of serious mental,  
emotional, and/or physical harm. Among the facts supporting this  
determination are (state facts that bear on the decision to  
remove).

a.

b.

3. During the period of removal you are directed to ensure the  
above child(ren) is/are placed in care of persons who are  
reliable and trustworthy and can provide a safe and secure  
environment.

4. You are directed to (state additional requirements, e.g. make  
contact with the parents/guardians of \_\_\_\_\_ as soon as  
possible and inform me when this has been accomplished):

5. This order shall remain in effect until \_\_\_\_\_  
unless sooner canceled by me, (by \_\_\_\_\_), or by higher  
authority.

Signature

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FIRST ENDORSEMENT

From: \_\_\_\_\_  
(Child's military parent or guardian)

To: Commanding Officer, \_\_\_\_\_  
(Name of Command)

(Via: Use only if applicable)

1. I have read the above military child removal order and understand its contents. I understand that I must peaceably comply with this order. I also understand that failure to comply with this order may subject me to disciplinary and/or administrative action.

\_\_\_\_\_  
SIGNATURE OF WITNESS/  
DATE

\_\_\_\_\_  
SIGNATURE OF PARENT OR  
GUARDIAN/DATE



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TRAINING FOR KEY RESPONDERS

1. Training is a key function of the Family Advocacy Program (FAP) and is the responsibility of the Bureau of Naval Personnel (BUPERS), the FAP Manager, the Family Advocacy Officer (FAO) at the installation level and the FAP Regional Coordinators. Training is required for the "key responders" including members of the Case Review Committee (CRC), members of Regional Child Sexual Abuse Response Teams (RCSARTs), members of the Headquarters Review Team (HRT), members of the Family Advocacy Committee (FAC), the FAO, counselors and other professional staff who are involved in the assessment, investigation and resolution of child or spouse abuse cases, i.e., BUPERS personnel, chaplains, child care personnel, commanding officers, chief petty officers, and leading petty officers.

2. All FAP training shall have a multi-disciplinary focus, and the following specific requirements apply:

a. BUPERS shall provide regular and ongoing training for the following:

(1) Members of RCSART, the HRT, and BUPERS personnel who participate in the management of child and spouse abuse cases. Such training shall include: the underlying causes, patterns, and dynamics of child and spouse abuse; case management procedures for child sexual abuse cases; offender-related issues; victim needs and safety issues; rehabilitation options; legal and administrative options; complex/multiple victim case issues; and the multi-disciplinary team approach.

(2) FAO and FAP Regional Coordinators. Such training shall include: the underlying causes, patterns, and dynamics of child and spouse abuse; risk assessment; Navy policy and procedures; resource planning; staffing issues; program management and oversight; prevention and training strategies; and planning for a coordinated community approach to family violence.

b. The Judge Advocate General and BUPERS shall coordinate to provide regular ongoing training for staff judge advocates assigned to participate as members of installation CRC's, or otherwise substantively involved in FAP case decision making, and for legal assistance attorneys. Family advocacy-focused training for judge advocates shall include interdisciplinary issues and program specific challenges which face judge advocates whose practice includes family advocacy. It is intended to bring judge advocates up to date on current legal issues as well as recent developments in the disciplines of medicine, victim advocacy, and social work as these relate to the attendee's family advocacy

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duties. This interdisciplinary training is intended to be in addition to prosecution or defense related legal courses or seminars offered by commercial or professional organizations.

c. Medical treatment facilities (MTFs) shall establish specific crisis intervention and referral protocols for cases of child and spouse abuse. Personnel in emergency and ambulatory care units shall be trained to follow these protocols which will include: the underlying causes, patterns, and dynamics of abuse; screening procedures for child and spouse abuse; sensitive and protective patient interviewing; military and civilian reporting requirements; proper collection and transfer of evidence; referral and/or provision of victim advocacy services; provision of basic family violence information; safety planning and specialized family violence discharge planning.

d. Law enforcement officials shall establish and follow clear and consistent guidelines for the investigation, collection of evidence, documentation and reporting of child and spouse abuse incidents. Law enforcement personnel, including base security police and Naval Criminal Investigative Service special agents shall participate in regular training which includes: the underlying causes, patterns, and dynamics of child and spouse abuse; risk factors; sensitive victim interviewing; basic community information and referral; safety planning; and appropriate law enforcement/investigatory responses.

e. The Chief of Chaplains shall ensure the provision of regular ongoing training for chaplains. Such training shall include: underlying causes, patterns, and dynamics of child and spouse abuse; military and civilian reporting requirements, clerical privilege and its limits; safety planning for victims; community referral information; and appropriate pastoral care for families where child and spouse abuse is occurring.

f. Installation commanding officers and FAOs, in coordination with the commanding officer of the MTF, shall ensure members of the CRC receive, at a minimum, 16 hours of child and spouse abuse training within 6 months of their appointment to the committee and 24 hours of FAP-related training on an annual basis. Such training shall include: underlying causes, patterns, and dynamics of child and spouse abuse; risk factors for each specific type of abuse; case management procedures; rehabilitation and support services options; community referral options; risk assessment procedures; Navy policies and procedures; and the multi-disciplinary team approach.

g. Installation commanding officers and FAOs shall ensure that appropriate installation personnel, including child care

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providers, youth activities staff, Department of Defense Dependent Schools (DODDS) staff members, FAC members, unit commanders and military supervisors (senior enlisted personnel), and unit FAP points of contact receive appropriate awareness training on a regular and ongoing basis. Such training shall include: underlying causes, patterns, and dynamics of child and spouse abuse; military and civilian reporting requirements; identification and referral procedures; description of the local FAP; prevention strategies; appropriate command and individual responses to abuse; and planning for a coordinated community approach to family violence.