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**SHATTERED FAMILIES, SHATTERED
SERVICE: TAKING MILITARY DOMESTIC
VIOLENCE OUT OF THE SHADOWS**

HEARING

BEFORE THE

SUBCOMMITTEE ON MILITARY PERSONNEL

OF THE

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CONTENTS

	Page
STATEMENTS PRESENTED BY MEMBERS OF CONGRESS	
Kelly, Hon. Trent, a Representative from Mississippi, Ranking Member, Subcommittee on Military Personnel	3
Speier, Hon. Jackie, a Representative from California, Chairwoman, Subcommittee on Military Personnel	1
WITNESSES	
Clubb, Brian, Coordinator, Military & Veterans Advocacy Program, Battered Women's Justice Program	13
Hughes, Rohini, Survivor and Advocate	7
Johnston, A.T., Deputy Assistant Secretary of Defense for Military and Community and Family Policy Department of Defense; and Kenneth Noyes, Associate Director, DOD Family Advocacy Program (Military Family Readiness Policy), Department of Defense	28
Lee, David S., Director of Prevention Services, PreventConnect	12
Olszewski, Leah, Survivor and Advocate	6
Ranta, Kate, Survivor and Advocate	4
Vassell, Arlene, Vice President of Programs, Prevention, and Social Change, National Resource Center on Domestic Violence	10
APPENDIX	
PREPARED STATEMENTS:	
Clubb, Brian	109
Hughes, Rohini	67
Johnston, A.T., joint with Kenneth Noyes	117
Lee, David S.	95
Olszewski, Leah	53
Ranta, Kate	43
Speier, Hon. Jackie	41
Vassell, Arlene	81
DOCUMENTS SUBMITTED FOR THE RECORD:	
[There were no Documents submitted.]	
WITNESS RESPONSES TO QUESTIONS ASKED DURING THE HEARING:	
[There were no Questions submitted during the hearing.]	
QUESTIONS SUBMITTED BY MEMBERS POST HEARING:	
[There were no Questions submitted post hearing.]	

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HOUSE OF REPRESENTATIVES,
COMMITTEE ON ARMED SERVICES,
SUBCOMMITTEE ON MILITARY PERSONNEL,
Washington, DC, Wednesday, September 18, 2019.

The subcommittee met, pursuant to call, at 2:07 p.m., in room 2118, Rayburn House Office Building, Hon. Jackie Speier (chairwoman of the subcommittee) presiding.

OPENING STATEMENT OF HON. JACKIE SPEIER, A REPRESENTATIVE FROM CALIFORNIA, CHAIRWOMAN, SUBCOMMITTEE ON MILITARY PERSONNEL

Ms. SPEIER. Good afternoon. This hearing will come to order. I want to welcome everyone to this hearing of the Military Personnel Subcommittee on domestic violence in the military.

We are here today because domestic violence has become a forgotten crisis in our military. It has been 15 years since the DOD [Department of Defense] task force analyzed domestic violence within the military, yet we have seen unsettling warning signs since. Within the last few months, DOD reports have highlighted concerning failures in our services' domestic violence prevention systems. The DOD has not responded urgently.

Today, we will hear from three survivors of domestic violence in the military who are bravely coming forward to share their experiences in the hopes that others may be helped. Their stories are riveting, they are painful, and they are real. Because we lack data that is recent, plentiful, or granular, we must rely on survivors, advocates, and experts to help us understand the unique challenges of dealing with this crisis within the military.

Major Leah Olszewski is still on the run from a violent abuser. Air Force officials at every level refused to help her despite knowing of past incidents.

Kate Ranta found justice in the civilian—not military—court system but only after her violent ex-husband, who was allowed to go free and retire from the Air Force, shot her and her father.

Rohini Hughes and her son Jay were verbally and physically abused by her husband, who as a JAG [judge advocate general], used his knowledge of the system against her.

These incidents impact victims, families, communities. The DOD must learn to believe survivors and take action based on their claims and evidence. Denial, favoritism, and a complex bureaucracy cannot shield dangerous perpetrators.

Domestic violence is not unique to the military. According to the CDC [Centers for Disease Control and Prevention], 1 in 4 women

and nearly 1 in 10 men have experienced intimate partner violence in their lifetimes. And, as with civilian domestic violence, there is no, quote, typical, unquote, military domestic violence case. That means policy must account for and address a wide range of potential aggravating factors.

Adverse childhood experiences may create a propensity for domestic violence. Poor role models can make it hard to peacefully resolve conflicts. Law enforcement providing access to child care and early education, military leadership, Congress, and the criminal justice system all have roles to play.

But we must also mitigate the factors of military life that can exacerbate the risks of domestic violence. Families cope with new responsibilities, frequent moves, and tough challenges. Service members may be consumed by military duties and struggling with post-traumatic or other stresses and a thirst for high-risk behaviors after multiple deployments.

Military spouses are often isolated, underemployed, and struggling to make ends meet, living far from friends or family, and unfamiliar with local resources. It is, unfortunately, easy to see how these conditions can make domestic violence possible, more dangerous, and persistent.

When young men and women join the military, they become our responsibility as one of our Nation's most precious resources. We are equally responsible for military families who sacrifice along with the service member. And we are responsible for military children because exposure to domestic violence has long-term effects and because military children are disproportionately likely to join the military themselves.

I believe the military takes this problem seriously, but it is clear that leadership needs to address this threat with renewed urgency. Commanders at every level need to make combating domestic violence a personal—and I underscore that—a personal priority.

In recent years, Congress has added a UCMJ [Uniform Code of Military Justice] domestic violence criminal article, required new reporting on DOD's prevention and response systems, and explored expanding special victims' attorneys to cover domestic violence. There is far more to be done, and I hope to learn about some of these options today.

Today, we will be joined by two panels. The first will consist of military domestic violence survivors and experts. On the second, we will have DOD officials responsible for designing and implementing relevant policies.

We will focus on three main questions during today's hearing. First, are we taking the crime of domestic violence seriously enough? Who does it effect, and what happens to them? Second, how should we prevent domestic violence, reach out to and care for survivors, and deal with perpetrators? Third, what do current DOD programs look like? What are their strengths, and how can we further improve them?

Before I introduce our first panel, I would like to offer Ranking Member Kelly an opportunity to make opening remarks.

[The prepared statement of Ms. Speier can be found in the Appendix on page 41.]

**STATEMENT OF HON. TRENT KELLY, A REPRESENTATIVE
FROM MISSISSIPPI, RANKING MEMBER, SUBCOMMITTEE ON
MILITARY PERSONNEL**

Mr. KELLY. Thank you, Chairwoman Speier, for having this very important hearing today. And this is an issue that I have been engaged in since I was a city prosecutor in 1999 at the misdemeanor level and later as a district attorney at the felony level, and I know of no more serious issue than domestic violence and what it does to families and lives and all those around who surround.

I wish to welcome both of our panels to today's hearing. I particularly want to thank you three survivors of domestic abuse and for your bravery and your willingness to share your stories here today and the issues in your story.

Domestic abuse is a serious national issue. On average, nearly 20 people a minute in the United States are physically abused by a partner. Unfortunately, the military is not immune to this national problem. Domestic violence in the military has lasting negative effects on not just the family in which it occurs but also in the military community as a whole.

It is imperative that the Department of Defense have a comprehensive prevention and response program to ensure that military families have the resources needed to identify and prevent domestic abuse and that survivors of domestic abuse have the legal, medical, and behavioral health resources needed to rebuild their lives and those affected by these acts.

As a former district attorney and city prosecutor, I prosecuted domestic violence crimes and have put domestic abusers behind bars. I am a firm believer in education and transparency in order to prevent domestic violence situations.

And when I say "education," it is not just for the victims. It is for peers. It is for the abusers. It is for the chain of command. It is understanding what domestic violence is and is not, understanding what the solutions are, how to get to credible solutions. And it is very important and it is a long-term process to educate all those involved so that we know exactly how to deal with this problem because it is not acceptable that it stays even. We want it to get better.

I know firsthand how difficult these cases can be to prosecute and how traumatic the process can be for the whole family. Many times they use power of separation from friends and associates and families to keep them from having a help line to reach out for. They use financial resources and lack that the victims have. They threaten that "I am the only breadwinner." I understand all these unique situations, which many people in America just quite frankly don't understand, and it is an education process that commanders at all levels need to understand.

From ongoing counseling to financial insecurity, it is imperative that the family receive the support they need after the criminal case has concluded, not just during but after. No matter how many resources we provide survivors, however, our primary goal should be to prevent domestic violence to begin with.

I am encouraged that the Department has a new prevention plan of action, which is a comprehensive approach to prevention, including a focus on awareness and early intervention. I am also encour-

aged that the domestic violence response program leverages the entire scope of community-based resources.

I look forward to hearing from our witnesses who are survivors of domestic violence about their experiences and what can be done to improve the process from your point of view.

I am also interested to hear from the other witnesses on the first panel, some of whom have partnered with the Department of Defense to ensure their comprehensive prevention and response programs benefit from civilian best practices.

Finally, I look forward to hearing from the Department of Defense on the current program and any new initiatives that may improve the domestic abuse prevention and response program.

Thank you, Madam Chairman, and I yield back.

Ms. SPEIER. Thank you, Mr. Kelly.

Each witness will have the opportunity to present his or her testimony, and each member will have an opportunity to question the witnesses for 5 minutes. We respectfully ask the witnesses to summarize their testimony in 5 minutes if at all possible. Some of your stories are riveting, and we will be somewhat lenient in that regard.

Your written comments and statements will be made part of the hearing record. Ms. Kate Ranta, survivor and advocate; Ms. Leah Olszewski, survivor; Mrs. Rohini Hughes, survivor and advocate; Ms. Arlene Vassell, vice president of program prevention and social change, the National Resource Center on Domestic Violence; Mr. David S. Lee, director of prevention services, PreventConnect; Mr. Brian Clubb, coordinator, military, and veterans advocacy program, Battered Women's Justice Program.

Thank you all for being here.

Ms. Ranta, would you like to begin?

STATEMENT OF KATE RANTA, SURVIVOR AND ADVOCATE

Ms. RANTA. My name is Kate Ranta, and I am a survivor of domestic and gun violence. My former spouse, Thomas Maffei, was a major in the Air Force. In 2009, we were living in officer housing on Fort Belvoir. It was there that he began to show increasingly abusive behavior toward the children and me. He controlled every aspect of our lives.

During this time, Thomas was also pushing to retire. We were moving to Florida when the retirement came through. But as the time approached to close on the house we bought there, he still wasn't retired. So he said that he would forge orders and give them to those responsible for arranging PCS [permanent change of station] moves. He said they wouldn't even question it, and he was right.

We moved into our new home in early September 2010. Thomas' behavior became erratic. On January 2, 2011, he took it to another level. He picked a fight with me, then locked me out of our bedroom. I heard the sound of a gun chambering. Terrified, I dialed 911 and ran out of the house. Then I heard the garage door open and out he came holding our toddler, who was only two.

He got into the car, and I jumped in with them. He raised his fist at me, his eyes were black, and he told me to get out of the

expletive car or he would punch me in my expletive face. I jumped out, and he sped off around the corner.

When I ran back to the house the police were there and so was Thomas. He was giving his military coins to the officers, telling them that he was a veteran—he wasn't; he was still Active Duty—and that he had survived a Humvee explosion in Iraq. He didn't. He had never deployed. To them, he was a hero, and I was the hysterical wife.

The next day I got a temporary restraining order, a civilian one, and he was served. I called his commander at Andrews Air Force Base, Colonel Timothy Applegate, and told him about the domestic violence incident, about the restraining order, about his soldier not being in Virginia but in Florida, and about the fake moving orders. He was quick to get me off the phone. He knew he was in trouble too. He had had no idea that Thomas wasn't even in Virginia for those past 4 months.

Thomas also knew he had to get back to Virginia, which was what he did. In the meantime, I was connected with OSI [Air Force Office of Special Investigations] and reported the situation to them as well. As a result of that, Thomas was moved out from under Colonel Applegate and placed with a new commander, Lieutenant Colonel Michelle Ryan at Bolling Air Force Base, as OSI began its investigation. He was serving on Bolling with check-in time so they knew he had not left the base.

During the months he was held at Bolling, Thomas went AWOL [absent without leave] two different times. Both times, I got calls from Lieutenant Colonel Ryan that he had not checked in as he was required to do, that they could not make contact with him, that my family and I should go somewhere where he couldn't find us, as she couldn't guarantee that he wasn't on his way to Florida. Both times they found him a day or two later, but she gave excuses about his whereabouts.

OSI completed its investigation in mid-March. They were looking into spousal abuse as well as fraud. I was contacted by an investigator who let me know that they had found him guilty of both and would be recommending court-martial. I was relieved. That was until he told me that Thomas' punishment could actually be up to his command and that there was a chance that nothing would happen to him.

Shortly after OSI closed the case, Lieutenant Colonel Ryan called me. She said that they had handled it administratively and that Thomas would be retired at the end of March. I literally begged her to reconsider. She said he had served 25 years, and charging him would cause him to lose his pension. The military lifted the restraining order they put on him, and he was released out into society.

A year and a half later, after months and months of civilian court hearings, Thomas showed up with a .9-millimeter Beretta, ambushed me at my apartment, and shot through the front door. My father and I were standing inside the door pushing against it trying to keep him out. My son, William, was standing just behind us.

Thomas pushed his way in and shot some more. A bullet went through my right hand. He shot my dad point-blank in his left side,

and I thought my dad had died. A bullet also went through my left breast just missing my heart. Another bullet went into my dad's left arm, leaving it paralyzed.

Thomas did this in front of William, his own son, who was only 4, his own son who screamed, "Don't do it, Daddy. Don't shoot Mommy." By some miracle, we all lived. The three of us got out of the apartment, and Thomas surrendered at the scene. He spent almost 5 years in jail before we had the civilian trial where he was found guilty of premeditated attempted first-degree murder and sentenced to 60 years in prison. So we saw justice on the civilian side, not the military side.

All of this was avoidable. I hold his command fully responsible. They knew he was dangerous, but, instead, they chose not to do a thing about it. Domestic violence in the military is rampant. There are tons of Thomas Maffeis in their ranks. I hope this committee will be as appalled as I am about what happened to us and will take steps to change this "take care of our own" culture in the military at the expense of women and children whose lives are at stake.

Thank you.

[The prepared statement of Ms. Ranta can be found in the Appendix on page 43.]

Ms. SPEIER. Thank you for that very compelling testimony.

Ms. Olszewski.

Ms. OLSZEWSKI. Yes, ma'am.

Ms. SPEIER. Pronounce it for us so we——

Ms. OLSZEWSKI. Olszewski.

Ms. SPEIER. Olszewski.

STATEMENT OF LEAH OLSZEWSKI, SURVIVOR AND ADVOCATE

Ms. OLSZEWSKI. Good afternoon. My name is Leah Olszewski. I am a major in the Army National Guard, entrepreneur, daughter, sister, and one-time intimate partner of an Air Force Senior Master Sergeant Erik Cardin. Senior Master Sergeant Cardin misled me from day one.

Initially under the impression he was still at Air Force Special Operations Command, I later learned he had been fired and kicked out of the unit 2 years earlier in 2014 for violence and abuse on service members, abuse that, according to several airmen, should have gotten him kicked out of the Air Force entirely.

The Air Force then sent Senior Master Sergeant Cardin to Afghanistan for a year, where his commander told him if he did not stop his behavior, he was going to end up in jail. In 2016, Senior Master Sergeant Cardin was rewarded with a leadership role at Travis Air Force Base, California. One of his fellow noncommissioned officers warned Travis leaders of the senior master sergeant's history but was dismissed. They said they knew.

Within 9 months of being at his Travis Air Force Base unit, Senior Master Sergeant Cardin was fired and kicked out again, this time for three significant acts of violence on service members. Once again, he was shuffled and made someone else's problem—no counseling, no court-martial, no consequences.

A month after being fired, Senior Master Sergeant Cardin and I moved in together, and the severe abuse, emotional and physical,

began. Over the next 6 months, I was a slut or a whore just like other women, should know my place as a woman. He isolated me, was jealous, enraged, and explosive. He constantly threatened me to break my neck and bust my teeth out.

There were five physical assaults, including strangulation. Then, on October 11, 2017, my world came to an end when, preceded by 3 days of emotional abuse, he kicked me in the abdomen with both of his feet. Among other things, he knew I was pregnant. I called the police, and he ran from the house. Over the next 3 days, I miscarried.

When command learned of the physical abuse, they simply said: Run away, Leah. He is doing you a favor.

For the next 11 months and to this day, I have battled with the Air Force to do the right thing. Every entity on Travis Air Force Base, from command to family advocacy to security forces, failed me. They just waited on the senior master sergeant to retire.

I asked for help from command at Joint Base McGuire-Dix-Lakehurst, Scott Air Force Base, and directly from former Air Force Secretary Wilson, General Goldfein, and Chief Master Sergeant of the Air Force Wright, with no response or a minimal entirely ineffective response.

The Air Force Inspector General later dismissed several of my complaints. As they always had, the Air Force turned a blind eye, sometimes actually actively supporting Senior Master Sergeant Cardin instead of holding him accountable.

On September 1, 2018, the Air Force honorably retired Senior Master Sergeant Cardin—no demotion, no court-martial, no consequences. Now he laughs in court about the miscarriage, abuse, and my suffering, and has continued to terrorize me by skipping over 48 other States and moving down the road from me knowing I was here.

He had no friends, no job, no family, no clearance, no reason to be here. He violated his restraining order in April and is retaliating against me still by trying to ruin what is left of my Army career. I live in fear, heavily burdened every day.

The Air Force is responsible for enabling and emboldening Senior Master Sergeant Cardin over many years, for putting service members and communities at risk, and for all of my losses. If they will do this to me, they will do this to everyone and anyone.

If Air Force leaders won't even listen to its own members regarding Senior Master Sergeant Cardin, let alone me, and years of workplace and domestic violence equate to nothing in their eyes, how many others are there, and what does it take? What does it take?

Thank you for your time.

[The prepared statement of Ms. Olszewski can be found in the Appendix on page 53.]

Ms. SPEIER. Thank you so much, Ms. Olszewski.

Mrs. Hughes.

STATEMENT OF ROHINI HUGHES, SURVIVOR AND ADVOCATE

Mrs. HUGHES. Honorable members of the Armed Services Subcommittee, staff, respected experts, and witnesses present here today, as a former citizen of New Delhi, India, and now a U.S. cit-

izen, I am a proud military Air Force spouse, a former spouse. I humbly and thankfully submit my testimony while being grateful to you for this opportunity to share my story on behalf of countless military families, my family, and my son Jay Hughes, who is with me here today.

I am a patriotic military spouse who served as a Key Spouse program manager for various Air Force units, and I have been a proud stay-at-home mother for the last 20 years while serving our military, our community, and my family.

My former husband, Major Matthew "Matt" Ernest Hughes is a prior Navy reservist, a former Active Duty U.S. Air Force JAG Corps officer, an AFLOA [Air Force Legal Operations Agency], at Joint Base Andrews, and currently has a private practice in Rockville, Maryland, while still serving as an Active reservist at an unknown location. Major Hughes has had four tours of deployment.

On December 24, 2014, our world shook and was changed forever when my husband wiped out all our accounts, canceled our credit cards, and made stop payments on all outstanding checks. He followed these actions with an email to me stating erratic and controlling demands with a timeline attached for each demand.

These demands clearly defined us as slaves to be objectified and owned, not to be loved, not to be respected, and not to be honored. Examples of Major Hughes' behavior was repeatedly laughing while degrading, tormenting, enjoying his cruelty towards us. Major Hughes would twist our son's nipples while laughing, forcing his thumbs inside an open, bleeding wound on Jay's shaking knee, laughing and stating that it didn't hurt him. He did this repeatedly.

He neglected our unsupervised son while being intoxicated for several hours, which traumatized Jay, who believed his father was dead. On other abusive occasions, Jay would lock himself in a bathroom in fear for his life. Another instance Major Hughes dumped a large box of food on top of our sickly daughter's feverish body.

After years of abuse, we sought medical and mental health assistance. When he discovered this, he made us feel guilty and prohibited us from going to hospitals and doctors, even after our daughter's failed attempt of suicide. Then he demanded I pay rent for continued shelter in our home or accept his offer of \$200 per month for sex in exchange for shelter while he collected BAH [basic allowance for housing].

We were forced to perform all of the household duties while he leisurely worked on his body. He would continuously yell in our faces calling us losers and dumb and lazy, even when I miscarried or was giving birth to our children.

On December 31, 2014, I contacted Mr. Peter Katson at the Pentagon's legal assistance office, who encouraged me to contact the AFLOA commander, Colonel Thomas Zimmerman. My husband was reported to Child Protective Services in December 2014 for child neglect and abuse by our counselor, formerly at Meier Clinics, Fairfax, Virginia.

He has been reported again since 2015 by Walter Reed National Military Medical Clinic, Joint Base Andrews Family Advocacy Program, and Fort Belvoir Adolescent Inpatient Unit, and yet I am being falsely accused of parental alienation.

In March 2015, Major Pamela Blueford, at the Joint Base Andrews' Family Advocacy Program, FAP, began reviewing the complaints submitted by Dr. Comilang at Walter Reed and began treating me with hostility during an interrogation in front of Ms. Mary Young, the victim advocate at FAP present at that time.

She questioned my intentions and motives for seeking mental health assistance while repeatedly telling me these types of allegations could negatively affect my husband's career in the Air Force. Major Hughes' deputy in AFLOA told me my marriage would likely be headed towards divorce while stating that this was a civil matter, disregarding the reported evidence of abuse.

Additionally, she stated that as long as my husband was paying rent, even though we chose not to return to the home due to our fears of our safety, he was providing adequate support and would not be mandated to provide any money to us for food or lodging while we continued to be homeless.

In July 2015, Major Hughes separated from Active Duty in the Air Force to go to the Reserves. He utilized his separation orders to terminate our lease prematurely under the provisions of the Servicemember's Civil Relief Act, forcing my family into homelessness for almost 2 years.

There were many other documented events of abuse, none of which supposedly met the Joint Base Andrews FAP abuse criteria. However, it did meet DOD's abuse criteria by 100 percent. After each abusive episode, Major Hughes would drink, deny his abusive actions and behavior, words and events, grin, and laugh. This forced us to begin documenting series of abusive events. We learned new terms, such as narcissism, sociopath, gaslighting, and coercive control, and parental alienation, from our therapists concerning Major Hughes.

After several months of being ignored by my husband's command, AFLOA, interrogated and treated unprofessionally by FAP, Major Pamela Blueford continued to deny me the written documentation of the finding. I was informed by Ms. Mary Young at Joint Base Andrews FAP that this unprofessional behavior and aggression was a normal occurrence in the FAP office towards victims all the time.

I am sorry. May I just grab some water?

Ms. SPEIER. Sure. And then would you be able to sum up?

Mrs. HUGHES. Yes, ma'am.

This former JAG has also utilized his position in exploiting the Servicemember's Civil Relief Act in civil court in front of a former JAG judge, forcing me to pay almost \$30,000 in legal fees, which I cannot afford.

This is a black eye on our U.S. military. It is the invisible scars that forever haunt me and my children through the failed suicide attempt from my daughter and my son's suicidal ideations. Major Hughes prohibits him from seeking medical attention. I fear losing my son to suicide while he eliminates all his assistance that he desperately needs. It is through our faith in Christ that we are able to sustain and be here in front of you today.

Unfortunately, my story is not an isolated set of events or incidents. Many military spouses experience similar abuse, desertion,

abandonment but are afraid to come forward because they are groomed not to expose their abuse while they are being silenced.

Thank you for this opportunity today.

[The prepared statement of Mrs. Hughes can be found in the Appendix on page 67.]

Ms. SPEIER. Thank you very much, Mrs. Hughes.

Ms. Vassell.

STATEMENT OF ARLENE VASSELL, VICE PRESIDENT OF PROGRAMS, PREVENTION, AND SOCIAL CHANGE, NATIONAL RESOURCE CENTER ON DOMESTIC VIOLENCE

Ms. VASSELL. Good afternoon, Chairwoman Speier, Ranking Member Kelly, and distinguished members of the committee. Thank you for the opportunity to provide testimony on the importance of prevention. I thank the committee for holding this hearing to discuss lifesaving prevention practices and strategies.

As mentioned before, I am the vice president of programs, prevention, and social change at the National Resource Center on Domestic Violence [NRC DV], with over 20 years of experience responding to the needs of survivors across the Nation. Our mission at the National Resource Center is to strengthen and transform efforts to end domestic violence. Since its inception in 1993, NRC DV has played a key role in providing collaborative learning and resource development to end and prevent domestic violence.

The purpose of my testimony is to share strategies for prevention that could be implemented by the military. These strategies can help prevent domestic violence before it happens, benefiting not only military families but all our communities across the country. The prevalence data has been shared, but what I do want to emphasize is domestic violence causes profound and enduring health, economic, and other consequences across the lifespan. So it doesn't stop.

Additionally, studies focusing on children exposed to violence finds that one in five children witnessing parental assault also leads to increased risk of experiencing and/or perpetrating domestic violence as adults. I also want to emphasize that children are resilient—it is not a cliché—and can bounce back with the appropriate age development and culturally specific interventions.

Prevention is much more than education, and it goes beyond the individual. We must use a public health approach to prevent first-time victimization and perpetration from happening. Violence can be prevented and its impact reduced in the same way that public health efforts have prevented and reduced pregnancy-related complications, workplace injuries, infectious diseases, and illnesses resulting from contaminated food and water in many parts of the world.

Sexual violence and domestic violence are more complicated than other public health issues because of the intentionality of harm and the social stigmas associated with their occurrence. Primary prevention efforts though impact modifiable factors associated with domestic violence, such as reducing acceptance of violence, challenging social norms, practices, and policies that support or reinforce gender-based violence.

When violence occurs, there is a sense of urgency to intervene and support victims, hold abusers accountable. We know these things are necessary, but to stop violence before it ever happens, it is vital that we recognize that the connections among issues of health, safety, economic security, and other factors affecting well-being can increase public understanding of the complexity of the violence. This understanding, according to the CDC, the Centers for Disease Control and Prevention, will help inform primary prevention efforts.

Our approach at the National Resource Center on Domestic Violence is awareness plus action equals social change. We have seen success in using this formula and many organizations and communities have adapted this approach. Awareness, increased knowledge, action, we develop and disseminate resources and tools to proactively prevent first-time victimization and perpetration by interrupting the cultural rules, norms, and constructs that it supports.

Based on evidence, my expertise, and experience collaborating with various military communities throughout my career, my recommendations for the military are as follows, some already mentioned: develop and implement a comprehensive domestic violence response and prevention plan; create and foster a culture of equity, dignity, and respect, promoting health and safety; create policies and practices that support survivors, always believe survivors, and hold abusers accountable so that all service members know that domestic violence is not acceptable and will not be tolerated; develop and maintain collaborative relationships with community-based practitioners, social justice organizations, local domestic violence agencies, and State coalitions. Collaboration is key in ending and preventing domestic violence. No single agency can do this alone.

Equip service members, all levels, with tools to recognize warning signs and encourage safe and effective bystander interventions to reduce or prevent violence and assault.

As we continue to enhance responses and offer survivors and their families services that are survivor-centered and trauma-informed and lifesaving, we must continue to hold abusers accountable while also creating an accessible pathway for healing.

And, most importantly, we must commit resources to addressing the root causes of violence and prevent perpetration and victimization from ever happening in the first place. As mentioned before, effective prevention programs require cross-discipline and multi-sector collaborations.

Thank you for your support and interest in prevention efforts, strategies, and evidence-based practices. Preventing violence means changing our society and its institutions, eliminating attitudes, beliefs, behaviors, environments, and policies that contribute to violence and promoting those that create thriving communities for individuals to live, play, work, and worship.

Thank you.

[The prepared statement of Ms. Vassell can be found in the Appendix on page 81.]

Ms. SPEIER. Thank you, Ms. Vassell.

Mr. Lee.

**STATEMENT OF DAVID S. LEE, DIRECTOR OF PREVENTION
SERVICES, PREVENTCONNECT**

Mr. LEE. Good afternoon, Chairwoman Speier, Ranking Member Kelly, and members of the committee.

I also want to thank the survivor panelists for their courage to speak and really highlight the importance of the need of changing the culture in our society, changing the culture in our armed services so we no longer accept domestic violence and make those changes that can create a place where people can live their lives to their full potential.

I am the director of prevention at PreventConnect, a national resource center dedicated to advancing the prevention of domestic violence and sexual assault. Through my experience, we have been able to see many ways that prevention does work and can be able to make a difference.

I am pleased today that we are addressing both survivor perspectives and prevention strategies for our Nation's armed services. It is necessary to be informed by survivor experiences to be able to define how we are going to go ahead in being able to create the changes we need to do.

It is essential to respond to the needs of survivors in a trauma-informed manner, to assert the dignity of all people, and to hold those who have committed abuse accountable. However, those responses after violence has occurred are not sufficient to prevent such forms of violence from happening in the first place, nor are they sufficient to prevent them from happening in the future.

Only with an intentional investment in prevention will you be able to change the culture that creates the condition which allows domestic violence and other forms of violence to continue. Prevention requires much more than awareness. Prevention is about creating a culture that challenges violence and the behaviors and the attitudes which contribute to it.

We can learn from several other efforts that have been taking place. In the Department of Defense's 2018 Annual Report on Sexual Assault in the Military, the report noted that historically activities aimed at preventing sexual assault have primarily centered on raising awareness about the crime. These approaches have likely contributed to increases in victim reporting and use of support services, but civilian-sector research suggests that awareness programming does not translate in the kinds of long-term behavior change required to prevent sexual violence in the organizational level. This is also true for domestic violence.

In order to do this, we must invest in prevention in the armed services to build a prevention infrastructure. There are many elements this should include. We need to have committed leadership for not just addressing domestic violence but its prevention, a commitment to be able to look at creating that change of culture that is going to name the problem and take action and be willing to be able to prevent it.

It is going to require staff who receive good training in prevention, in understanding the issue, and having staff that are dedicated to prevention beyond just responding to the needs of those who have experienced domestic violence. It is going to require collaborative and engaging partnerships with other prevention efforts.

We have to look at issues of domestic violence as we are also looking at sexual assault, sexual harassment, and other mental health issues.

And it requires collaboration with local, State, and national civilian domestic violence prevention efforts to build cohesive prevention messages and programs that are going to work off each other and build off each other.

There are many prevention strategies that can be able to make a difference or have an impact that we can see, and we have been dedicating our work and seeing the work that is taking place. Not much has been taking place within the military itself, but we have worked with families, workplaces, schools, and colleges, and sport, where we are seeing the beginnings of the potential for change.

And there is several opportunities. Part of it, for example, in the Blue Shield of California's 2019 report "A Life Course Framework for Preventing Domestic Violence," they talk about we have to mitigate and reduce childhood exposure to domestic violence by investing in prevention approaches aimed at improving the outcomes for parents and their children.

In the Centers for Disease Control's 2017 publication "Preventing Intimate Partner Violence Across the Lifespan: A Technical Package of Programs, Policies, and Practices" highlights strategies that can be able to prevent domestic violence. This involves engaging influential adults and peers, in particular, doing work with engaging men to be able to re-examine masculinity so we can create a new form of manhood that is dedicated towards promoting gender equity, not male dominance.

For the armed services, we should look at the lessons learned in sports and fraternities, for example, where we have been able to make changes. We need to create protective environments and that the armed services can take efforts informed by school-based and workplace initiatives to make shifts in their culture to enhance safety, promote healthy relationships and respectful boundaries. And we can strengthen economic supports for families. Efforts that strengthen the household financial security and work supports are part of a comprehensive way to be able to prevent domestic violence.

Domestic violence shatters lives and families and adversely affects the capacity of the armed services. With an investment in prevention, we can make a difference in the lives of service members, their families, and the community. As we continue this journey towards prevention, we build healthy relationships, healthy families, and healthy communities.

[The prepared statement of Mr. Lee can be found in the Appendix on page 95.]

Ms. SPEIER. Thank you, Mr. Lee.

Mr. Clubb.

STATEMENT OF BRIAN CLUBB, COORDINATOR, MILITARY AND VETERANS ADVOCACY PROGRAM, BATTERED WOMEN'S JUSTICE PROGRAM

Mr. CLUBB. I would like to thank you, Chairwoman Speier, Ranking Member Kelly, and the members of this committee for the opportunity to speak on this important topic. I am the coordinator

of the Military and Veterans Advocacy Program for the Battered Women's Justice Project. I am also an attorney and a retired Marine officer.

My program is funded by a grant from the U.S. Department of Justice Office on Violence Against Women. And through our work in the field, there are a number of issues we have identified that straddle the prevention of and response to domestic violence in the military and impact safety. And in the interest of time, I would like to summarize a number of issues that I have identified in my prepared testimony.

The Armed Forces Domestic Security Act requires that civilian protection orders, or CPOs, be given the same force and effect on military installations as they have in the jurisdiction in which they are issued. However, it is difficult to enforce a CPO if key personnel on the military installation do not know of its existence.

Registration procedures for CPOs can ensure that installation commanders and military law enforcement know about them, and that knowledge is crucial to enforcement. But despite the fact that the DOD policy permits such procedures, my experience is that it is rare the installations have them.

Commanding officers also have the authority to issue military protection orders, or MPOs, to any service member under the command and have wide discretion as whether or not to do so. Commanding officers sometimes issue only verbal orders that do not provide protected parties with a written copy nor placement in the service member's record book, which are both required under DOD policy for written MPOs.

In addition, this policy avoids the DOD requirement to submit MPOs to the National Criminal Information Center. This requirement was instituted in response to Federal law which mandates that commanding officers notify appropriate civilian authorities when any party to an MPO does not live on a military installation.

Unfortunately, the recent DOD IG [Inspector General] report did not look at this particular issue, let alone the service's compliance with the actual Federal law and what it directs the military to do.

Another concern about MPOs is expiration dates. Federal law states the MPOs shall remain in effect, quote, until such time as a military commander terminates the order or issues a replacement order, unquote.

Several years ago the Department of Defense began a process to revise the standard MPO form. However, that process has stalled. In an interim, DOD has not issued any guidance regarding the issue of expiration dates. Arguably, as a result, commanding officers violate Federal law every time they sign an MPO with an expiration date.

There is also the issue of firearms. Much research exists on the use of firearms in domestic violence homicides, and firearms are the most common manner of death in civilian as well as military domestic homicides. Federal law and many State laws restrict the possession of firearms by those that are subject to CPOs.

However, we have no data as to how or if the military is enforcing personal firearms restrictions against service members or against civilians who are on military property and subject to those

orders or whether commanding officers include firearms restrictions when they issue military protection orders.

One issue that is not in my prepared testimony that I think has been raised by the testimony of the survivors here today is deferential treatment to senior service members. I oftentimes hear from individuals, to include some of the members on this panel today, in which it appears as if commanding officers and the whole military response is much more deferential to individuals of senior rank as well as those individuals who are coming close to retirement.

The last issue I would like to address is collaboration between military installations and the local communities in which they are located. Collaboration is crucial as military-related victims and their abusers are often navigating two different and sometimes conflicting systems. These two systems must actively work together, effectively share information, and evaluate their processes in order to ensure that negative consequences don't occur and to increase safety for victims and others.

DOD policy does direct collaboration between military officials and civilian counterparts. But beyond military FAP programs and their civilian counterparts, my experience is that the levels of collaboration between military installations and local communities as a whole is, at best, spotty. Collaboration takes a willingness of all parties, and DOD policy by itself cannot enforce those in civilian communities to do so.

Our organization previously partnered with the National Center on Domestic and Sexual Violence and DOD on a multiyear project to create a Military-Civilian Coordinated Community Response Model. That work identified the difficulties in establishing and maintaining military civilian collaboration, to include jurisdictional issues, different reporting systems, confidentiality, and, of course, cost.

I look forward to answering any questions that you or the committee members may have. Thank you.

[The prepared statement of Mr. Clubb can be found in the Appendix on page 109.]

Ms. SPEIER. Thank you, Mr. Clubb.

Thank you all for your outstanding testimony and to the survivors. Such extraordinary courage and such painful memories that you had to live through once again, but in so doing you have provided us with a great deal of understanding of how ubiquitous this issue is. And, as Mr. Clubb said, for those who are senior service members or are near retirement, you are poster survivors of what happens under those circumstances.

Let me just start, Mr. Clubb, you referenced the use of firearms. If someone in civilian life now has been convicted of domestic violence, or even if they have been charged but not convicted, there is a means by which you can take their firearms away for a period of time, red flag laws being one of the examples.

Does it not have a negative impact on the service member if they can't use a firearm in the course of their duties and, therefore, makes the commander less likely to want to impose an MPO?

Mr. CLUBB. Chairwoman, there are two specific Federal domestic violence statutes or substatutes within the Federal Gun Control

Act. There is the Lautenberg Amendment, which requires—provides a prohibition for ammunition and firearms for anyone who is convicted of a misdemeanor crime of domestic violence.

There is also a provision which restricts both possession and ownership of firearms and ammunition if an individual is subject to a qualifying court order specifically in which there is a domestic relationship, intimate partners, due process, et cetera.

The Lautenberg Amendment does prohibit individuals, lifetime. There is no exemption for that. So, if an individual is convicted of a misdemeanor crime of domestic violence and they serve in the military, they eventually will be processed out because of their inability to carry a firearm.

The qualifying court order prohibition does not have that same response and—or it does not require through DOD policy any sort of eventual discharge for that reason. There is also the official use exemption that allows government employees, to include military service members, who have to carry a firearm for the performance of their duties in order to do that and not violate Federal law.

It has not been my personal experience that—and most of that is hearing from victims and survivors and from attorneys and advocates that are working on these issues directly—direct cases in which there is a—commanding officers not wanting to issue military protection orders for that reason. But at the same time, I think there is a lack of knowledge among commanding officers in general.

Ms. SPEIER. Thank you.

To each of you extraordinary women, if you had one thing that you would like to have seen changed in your set of circumstances that would have improved your ability to deal with the trauma of domestic violence or one thing as you look to speaking out on behalf of domestic violence victims who come after you, what would that be?

Ms. RANTA. Well, for myself and my family, I think the pivotal moment was when OSI closed the case, and I was told that it would be up to his command whether to do anything about it or not. I was naive. I am not from a military family. I had no idea how to navigate this system, and it made no sense to me.

But as I said at the end of my statement, I do hold his command fully accountable for the eventual outcome because I had done everything right. I had reported. I had gotten the protection order. I, you know—

Ms. SPEIER. And OSI had recommended to commanding—

Ms. RANTA. Right. And OSI had recommended a court-martial for him, and I do believe that, had he been held accountable and had the military taken care of things on their end, you know, the lethality that eventually happened on our end—almost death—could have absolutely been avoided.

So just the idea that, okay, well, he served 25 years and his pension would be affected to me was, like, outrageous, and he should have absolutely been held accountable. Being found guilty of fraud and spousal abuse and court-martial recommendation should have absolutely happened, and I really do believe that we may have avoided near death.

Ms. SPEIER. Thank you.

Ms. OLSZEWSKI. Likewise, on the command issue specifically, because going back many years command failed to do anything with him previously. I think my goal is still to have him court-martialed, which can be done, from what I understand, without bringing him back to Active Duty. And, again, that goes back to the failure to court-martial him years ago really stems from command more than anything.

Now, I had multiple issues with security force investigators never investigating, OSI not knowing for, you know, 7 or more months, just a wide variety of failures. But in the end, it was command going back many years that failed to do something that could have prevented me from ever meeting him potentially or could have mitigated or completely prevented his abuse of me.

Ms. SPEIER. Mrs. Hughes.

Mrs. HUGHES. I would have to agree with my other colleagues. In addition to the command definitely being held responsible, the failure of their role in stepping forward and recognizing the reported abuse, the evidence of abuse, in addition to FAP's failure in stepping forward and implementing and executing the DOD's abuse criteria.

I don't believe that that was done in my case, and that seems to be the main common thread among many other military spouses who are groomed to, first of all, not bring the abuse forward because this fear is instilled in us, and we are groomed to believe that it will destroy the service member's career.

But then, when we do come forward, it is completely screened out by concluding that it didn't meet the abuse criteria, shutting down each and every resource that we could possibly obtain in seeking justice or protection for ourselves.

Thank you, ma'am.

Ms. SPEIER. Thank you.

Mr. Kelly, 5 minutes.

Mr. KELLY. Thank you, Chairwoman, again.

And first of all, you know, I want to talk—we talked about strangulation. And when I was a district attorney [DA] in Mississippi, I was very helpful in trying to get the law changed so that it became a felony in Mississippi because that is one of the most controlling behaviors that a domestic abuser can have, is strangulation.

And so I guess my question to you guys—if you know the answer. If not, I hope DOD is listening. I will ask it later—is strangulation a felony domestic violence in the military?

Mr. CLUBB. Congressman, I know that, with the addition of UCMJ article—I believe it is 128(b)—that establishes domestic violence assault, I believe that strangulation is included in that. But, of course, it depends on how it is prosecuted in the military. Clearly, if it is non-judicial punishment, that is not a conviction and—

Mr. KELLY. Thank you. I want to get to some more. But number one is we have got to make sure strangulation at least has the ability to be prosecuted as a felony.

And second, I want to give—my wife is a victim assistance coordinator back home for the DA's office, and so we are very involved and engaged in this. And one of the things that Mississippi also passed a law on while I was district attorney that—is, if you are

charged with domestic violence, misdemeanor or felony, you are not allowed to plead that down to some other violation that does not include domestic violence. So you can't plead to something that is not domestic violence so that the Lautenberg Amendment does kick in. Because it is very important that when someone has committed a domestic violence act and they have been convicted of that, that they lose their ability to carry a firearm and then—and part of the problem is, quite frankly, ATF [Bureau of Alcohol, Tobacco, Firearms and Explosives] would not prosecute or do anything with those things when reported when I was a prosecutor. ATF would not come take the guns away when I would call them and say, "This guy is a convicted domestic violence guy that has a firearm," and they would not come take it.

And we have got to enforce the laws that we have. Rather than looking for new laws, let's enforce the laws that we have also. Because I think that is helpful to enforce Lautenberg to not be able to carry a firearm forever once you are convicted of a felony or of domestic violence.

How helpful would it have been to you survivors had the military—when you talk about pensions for senior—if they would have said, if convicted of domestic violence, whatever degree of pension you have earned to this point as a senior service member goes to your spouse and children to take care of them, but you don't get it. How helpful would that have been to you three?

Ms. RANTA. Yeah, so extremely helpful. So, like I said, I am not—I don't know really the ins and outs of the military. I was only married to him for 3 years. My understanding was that, as the spouse, I was not really entitled to any of his pension because we had to be married for 10 years. But we did have—we do have a child together, and, you know, my child hasn't seen a dime of his precious pension that they so wanted him to keep. So, yeah, it would have been extremely helpful if that had been an option.

Mr. KELLY. Because that financial instability or the ability to pay your bills and take care of and have a place to live—I heard your story—to have a place to live—that he has to look for a place, not you. He has to look for a place, not your kids. He has to look for a place to live.

And those are—so we need to make sure that we are educating folks so they know that, if someone leaves, it is not the victim; it is the abuser who has to leave. And now if they are found innocent and those things, then that is a whole different ball game.

But until that point, once the accusation is made, we need to take care of our victims and make sure that they have a place to live, that they [have] healthcare, and that their pay continues, whether that be through whatever. With those type of policies, that DOD helps you as a victim until resolved in finality, and then also not being able to plead down to something less than domestic violence, would that be helpful?

Ms. OLSZEWSKI. So I know for me, sir, it is a little bit different, but luckily there is the California Victims Compensation Program, which I have been able to get some assistance from. So, for me, it is a little different, obviously, but I did incur—I went into huge debt leaving out of California and things of that nature.

I don't know that I am actually really eligible for anything, but—so, for me, it doesn't really apply so, I just wanted to—

Mr. KELLY. And then the final thing, and I guess I just got time for a comment, but I want to make sure that we understand how to get either civilian protection orders and military protection orders. There needs to be a policy of who in the chain of command gets those and to be a validation that they have to be and they are required by the violator to turn those over to the chain of command, which becomes a crime if they don't do so.

And, with that, I yield back, Chairwoman.

Ms. SPEIER. Thank you, Mr. Kelly.

To your point, 70 percent of our service members live off base. So the likelihood of a CPO being identified by the perpetrator and reporting it to the command is somewhat, I think, challenging. It seems like we need to put something in place where there is a sharing of that data between the two, the civilian and the military.

Mr. CLUBB. Chairwoman, there is a DOD policy that requires service members to reveal or tell their command when they are not eligible, but whether or not, especially younger service members, really understand that if they have a protection order against them is debatable.

Ms. SPEIER. Right. Right.

Mrs. Davis for 5 minutes.

Mrs. DAVIS. Thank you. Thank you, Madam Chair.

Thank you all. I really appreciate your testimony.

I wanted to just start with Ms. Vassell for a second, because you listed a number of best practices, resources. And as I am sitting here listening to those, I am wondering whether our survivors are sort of thinking about those too and then feeling so frustrated because none of those things seem to be there for them.

And so where is the connection? You know, we often talk about best practices. We want to change the culture. We want people to be able to go for help when they need it and maybe even if they are not sure they need it, but they have a sense that something is wrong in their situation.

And I know it was mentioned that, you know, we need to connect some of the training, the culture. And yet we are talking about this, and it has been a long time that we have been talking about this, and that is my frustration. So the question that the chairwoman asked about pointing to one thing that would have made a difference, could you point to a systemic problem that we could fix that would prevent this from happening to anyone else? Do you feel you answered that question, or is there something else in this that is just amiss?

Mrs. HUGHES. Ma'am, I believe, as Mr. Kelly mentioned, we currently have excellent provisions in the legislation. We currently have an incredible DOD abuse criteria. I don't believe that it needs to be improved. I believe it needs to be executed. I think there is a major impediment in gaps that we need to recognize today, that, unfortunately, the commanders, either through the lack of knowledge or the lack of desire or the lack of—I say this respectfully—their arrogance, they are not executing what Congress and the military has already put in place.

So, even though I appreciate the best practices from my colleague, I think it is imperative that we look at the Servicemembers Civil Relief Act. It is an incredible Federal law placed and set to serve the military families, yet it is being exploited by the service members. So what can we do to tighten it?

So I don't believe that new practices are going to be necessarily a negative; they would certainly help. But I think focusing on what we currently already have and executing it and holding individuals and commanders accountable is where the key is, because I think one common thread amongst all three of us is the commanders' failure to act and hold the service member responsible.

Thank you, ma'am.

Mrs. DAVIS. How would you communicate that? As a spouse, I know that one of the issues is the fear of somehow interrupting a spouse's career or a partner's career, whatever that may be, and somehow that being such a wholly negative and fearful thing to do. What would you change?

Ms. RANTA. So I personally was not very afraid of the possibility of something happening to his career. I really felt like he needed to be held responsible. He had done this to me. He had done this to my children. I was in the right, in the sense that I had done the things that I was supposed to do, and he wasn't being held accountable.

And I think the frustration comes with, as we have said, you know, going to the commander, nothing happening, but then where do you go from there? And not knowing how to navigate. And it is just incredibly frustrating and you feel very, very helpless. And it is just an entire cultural shift that has to happen. And other than speaking out and telling my story anywhere and everywhere, I don't know how to do that.

Ms. OLSZEWSKI. If I could quickly touch on that. So, in my case, I was concerned about protecting him—that is often the case with domestic violence victims—but I also thought about my own career with the military and how to tell my commander, "Hey, this is what is going on." And it all came down very, you know—it was just difficult for me. So I think domestic violence victims that are service members have their own set of issues on top of being a spouse.

Mrs. DAVIS. Do we need better help lines for fear of—that is not—but being able to identify someone higher up? You don't feel that that is a resource either?

Ms. OLSZEWSKI. Well, so I made phone calls. I relied on friends that were Air Force service members who cared about what I had been through to contact and get email addresses for the next chain of command, the next chain of command, the next chain of command, although they did nothing as well.

So I think it is a good idea to know where you can go, but if different entities aren't really sharing that information because they have something to cover up or—

Mrs. DAVIS. And you think had this been only in the civilian sector, where would you have gone in that case?

Ms. OLSZEWSKI. Right. I am not sure. I never had—been a domestic violence victim, so I wouldn't say that I had clarity on that

as well, but surely within the military, which they are supposed to have higher standards, I would have expected more.

Mrs. DAVIS. Thank you. I know my time is up. Maybe we will come back.

Mrs. HUGHES. Ma'am, just, lastly, I would like to answer your question.

Ms. SPEIER. Mrs. Hughes, we are going to come back to you.

Mrs. HUGHES. Thank you.

Ms. SPEIER. Mr. Mitchell for 5 minutes.

Mr. MITCHELL. Thanks very much, Madam Chair.

We owe spouses and children of service members a great deal of gratitude and attention for the sacrifice they go through while people serve. People like the individuals you described today, they are not effective service members either. Let's be honest about it. We do not want those people serving in our military.

They are dangerous. They don't represent our military well. They don't represent our Nation well. So the idea that somehow we are protecting their career, they shouldn't have one. That is, in my opinion, something we need to address in terms of policy discussions with the Pentagon, if need be, legislatively. If you are a domestic violence perpetrator, you would do that to other people, and that is a violation of our morals. So I don't care about their career.

Let me ask you a question. It seems to me there is a system in place, you went through the process, but it just flat out didn't work. Is that a correct assessment, ladies? Go ahead.

Mrs. HUGHES. Sir, just this is an answer in conjunction to answering Mrs. Davis'. When I contacted the federally regulated domestic violence hotline to discover and seek out any sort of resource that the military had failed to provide me, because they only referred me to calling 211 when we were going into homelessness, I was told that, as a DV [domestic violence] victim, I would be deferred back to the military installation's FAP for further assistance, which had already turned me down. It told me that they were not going to be able to do anything. The only thing that they offered for assistance was counseling, which I had already been receiving from Walter Reed, sir.

Mr. MITCHELL. Let me ask each of you, have you gotten any information that any of the commanding officers that you contacted through the process in any manner were held accountable or questioned about this at all by their senior commanding officers?

Ms. RANTA. Yeah, I will answer for my case. Like I said, he was retired. To my knowledge, Colonel Applegate is retired and retired in 2013. Nothing ever happened to him. As far as I know, it got swept under the rug that he was made aware that Thomas Maffei was AWOL and not even living in Virginia and had gone to Florida. And then Lieutenant Colonel Michelle Ryan, my understanding is she works at the Pentagon, and I think she also retired too. Nothing ever happened.

After we were shot, I sent his mugshot and media links to both of his commanders and sarcastically thanked them for, you know, protecting their soldier instead of the soldier's wife and children, as I had warned. And I received no response.

Ms. OLSZEWSKI. If I could say also, I actually filed—so SECAF [Secretary of the Air Force] office, Lieutenant Colonel Tyler Lewis,

told me in September 2018, after I found out they had honorably retired Senior Master Sergeant Cardin, that I would have to show all the failures of the Air Force before they would relook him.

So I filed a Security Forces/OSI and a command complaint, which the command complaint alone was about 60 pages. Initially, the Air Force IG, staff IG had said that they were concerned for my safety and wanted me to file a complaint. Well, within 2 months of filing that command complaint, they basically dismissed it, and they said: This case is closed. We consider this case closed.

And they would not look at any of the commanders who had failed years before during my time and thereafter, going all the way up to the SECAF office.

Mr. CLUBB. Congressman, many of the issues that these survivors have addressed I think goes back to commander discretion. And we understandably give military commanders a wide range of discretion on many issues. Regarding domestic violence, that discretion, in many cases, involves lack of prosecution, concern about ruining the service member's career, et cetera, some of the things that we have discussed today.

Mr. MITCHELL. Let me stop you a second, sir, and I appreciate that. You don't have discretion. They should not have discretion when it comes to abusing your spouse or your children. What the hell is that discretion?

And I think, Madam Chair, we should have the ranking members from the Pentagon come over here and have a conversation of how they are holding their commanding officers accountable for failure to deal with this because there is a system there. We have money in the system. We have policies in place. But they don't want to damage someone's career. They don't want to damage their own career.

They are damaging our military. They are damaging families. It is unacceptable. And if they don't like that criteria, we can find other officers that want to have an Army or armed services that is respected in the world and in our own Nation.

But to abuse your spouse—and my time is up, I apologize—to abuse your spouse or children because you have a psychological issue or whatever other reason you may justify it is unacceptable in our military, is unacceptable in our society. But we are sure not going to tolerate it. So we need to have them come over here and explain to me what they are going to do to hold them accountable because it disgusts me.

And I appreciate you all coming. Thank you.

Ms. SPEIER. Mr. Mitchell, thank you for your comments. What has played out here is really abuse of command discretion. And in all of your cases, a determination was made that the service member should be protected over the family member and the children.

So, much like we have done with sexual assault, we may want to take these cases up to a higher level so that you don't have that just inherent conflict of interest that exists because the commander knows the service member. If it goes up to another level, that might—

Mr. MITCHELL. Madam Chair, in my opinion, until we have that higher level command and we hold a commander accountable for their career for failing to manage their forces, we are never going

to get there. I agree with you, and it needs to be something that, if you won't manage your own personnel, then you don't belong being a colonel or whatever other—and you go.

As soon as someone is held—a few people are held accountable in the system—and you understand this, Mr. Kelly. As soon as some people are held accountable, then, in fact, they will take it seriously. And we need to insist that they are going to be, or we will simply find some other officers to lead our military. It is disgusting.

Thank you for your deference.

Ms. SPEIER. Thank you.

In addition to holding some of the DOD officials accountable, I think what we also need to do is bring the inspector general in, because the inspector general for DOD has already identified a number of failings in each of the services, in terms of complying with DOD regulations on appropriately identifying, fingerprinting, handling these cases in a manner that is appropriate.

Yes. Now to our colleague Mr. Cisneros, for 5 minutes.

Mr. CISNEROS. Thank you, Madam Chairwoman.

Thank you all for sharing your story today.

Mr. Clubb, I just kind of want to follow up on this, the same thing about the commanding officer discretion. And you had mentioned something earlier. But non-judicial punishment [NJP], how likely are the commanding officers, you know, going to deal with this through NJP rather than kind of actually reporting or trying to do it through a court-martial?

Mr. CLUBB. I have not seen duty statistics or service statistics on this the way you—the statistics that we have seen on sexual assault, for example, that may have been cited to this committee in the past.

I think part of the reason for that is that, until just last year, there wasn't a domestic violence article in the UCMJ, and I believe there is difficulty in tracking. I have not served as a judge advocate in the Marine Corps, but it is my understanding, talking to those that are serving within the services, that there are ways of flagging cases as they go through the system even before there is a domestic violence article, identify who the victims are and identifying cases as falling under this criteria.

But not seeing those statistics from which cases are going to court-martial, which cases are going to NJP or declining prosecution or any action, I can only speculate on that.

Mr. CISNEROS. Does the commanding officer have any responsibility? Like we said, 70 percent of, you know, military personnel are likely to live off base, so this domestic violence is likely to happen off base out of the commanding officer's jurisdiction, you know, with civilian authorities.

When those individuals are brought to the command, what responsibility does a commanding officer have to take action on that?

Mr. CLUBB. Well, commanders can prosecute cases that happen off installation. And I think part of what I referenced earlier about military-civilian coordinated community response is the coordination, collaboration, sharing of information, and determining who is going to take cases in which either the civilian authorities could

prosecute, military authorities, or potentially both, and deciding the best place to handle a case judiciously and effectively.

Mr. CISNEROS. Mrs. Hughes, I want to follow up on something you had said earlier too, right? You said, as a military spouse, you are kind of groomed, you know, not to come forward and not to report domestic violence, to not really say anything.

And I think this is part of that culture that is I guess instilled in you, right, that we all agree that it needs to be changed, but who is this, you know, that is instilling this in you and says, "No, don't come forward"? I mean, is it other spouses? Is it, you know, Air Force personnel? Is it Air Force service members? Who is really coming—who is this culture that is doing this, that is telling you not to say anything?

Mrs. HUGHES. Sir, thank you for asking that question, because I think it is a very pertinent question. I am the former Key Spouse for the Air Force in addition to the Key Spouse program manager. I worked very closely with the first sergeants and the commanders and the wing commanders, and I saw time and time again that as we collaborated in the Key Spouse program manager, the culture there seems to stem from the military personnel that are grooming these Key Spouses to ensure that the victims of domestic abuse do not come forward, do not share the information with the first sergeant or the commander, because it is going to ruin the career. And then the first sergeants are coming alongside the victim and reiterating that information, saying, that: Now, if you report this, let me remind you what the consequences will be. You are not going to get any BAH. You are not going to get any type of housing assistance either. You will be kicked off base.

So these are the kind of fear tactics that are being instilled in the victims that are the military spouses and children as well. Thank you.

Mr. CISNEROS. And I think I have time for one last question, but, hopefully, I don't butcher it too bad, but Ms. Olszewski.

Ms. OLSZEWSKI. Olszewski.

Mr. CISNEROS. Olszewski. Sorry.

Ms. OLSZEWSKI. Good enough.

Mr. CISNEROS. So you weren't married to the master sergeant, correct? Right?

Ms. OLSZEWSKI. No. We lived together. We had shared bank accounts, shared lease.

Mr. CISNEROS. So just one thing, and I know this is something that we have talked about a lot, you know, throughout Congress, and we talked about the boyfriend loophole, being that you weren't married. Did you ever come to a situation where they were saying that, "Hey, well, you are not married, this isn't really domestic violence," and can you talk about that a little bit?

Ms. OLSZEWSKI. Right. I think that was the thing, and that is why the commander said to me that day, "Hey, just run away, Leah, he is doing you a favor," because he thought, "Oh, this is so simple; they are just boyfriend-girlfriend living together."

So I did feel that the Air Force really looked at us solely as intimate partners. I guess, according to Family Advocacy, that is what we were. And then they feel, once an intimate partner, always an intimate partner. But, again, I didn't really get any benefit of being

a service member, in terms of even special victims' counsel, which is primarily for sexual assault, which is great.

But—so there were issues with that. It was really challenging. But now, of course, that he has filed, you know, a bogus IG complaint on me because I was an O-4, he is saying that I—now he has filed an IG complaint in the past few months saying conduct unbecoming of an officer because I am an O-4, and he was an E-8 at the time. So he had no problem back then. SOCOM [U.S. Special Operations Command] commander had no problem back then with any of this. And now it is being filed, and my rank is now being used against me to a degree. So, when it is convenient, we are just intimate partners and boyfriend-girlfriend; and when it is not, suddenly military service comes into play.

Mr. CISNEROS. My time is expired. Thank you very much.

Ms. SPEIER. Thank you, Mr. Cisneros.

I have one question before we go on to Ms. Escobar. The Family Assistance Program—the Family Advocacy Program, excuse me, is going to be testifying next. Each of you had interactions with the Family Advocacy Program. So, after you answer Ms. Escobar's question, I would like for you to think about what didn't work for you in the F-A-P, or FAP.

Ms. ESCOBAR for 5 minutes.

Ms. ESCOBAR. Thank you, Madam Chairwoman.

And thank you for your continued focus on issues that need to be brought to light and that need transparency. And many thanks to our witnesses, especially for your courage and for your willingness to tell your story and to help us address an issue that very badly needs to be addressed and as best we can.

Because of your experience, I am wondering if you could share—and this is open, actually, for all of you, any of you who would like to answer this question. Where have we failed you? Where are some specific instances where we could have and should have done better so that we can look to rectify this in the future so that, wherever it was that we failed you, we can try to fix it? And it is open to any of you, anyone who would like to go first.

Ms. OLSZEWSKI. Okay. I will touch on it really quickly because I know everyone else has something to say too. So I kind of believe in what Mr. Mitchell had mentioned about bringing the leadership, calling them out. I believe that does matter because it seems like a lot of things that go on are from the top down, and, really, it needs to be from the bottom up. So something like the Air Force really needs to involve victims, in terms of changing things.

So I don't think that a lot of, quote/unquote, leaders will do anything until they are actually called out, and I think that is a huge thing to start with that process and then purge them from the military system, as he mentioned.

Ms. ESCOBAR. Thank you.

Ms. RANTA. Yeah. In my situation, I was basically frozen out. I had no resources. I had no way of knowing how to navigate, you know, what to do next. I was just fortunate that I had military wives that helped me, you know, point me in different directions on who to report to and what to do.

I mean, I had no guidance at all from his commander. His commander just wanted, you know, to sweep it under the rug. So, I

mean, they just wanted to make it go away, and that was a humongous failure.

Mrs. HUGHES. Ma'am, as far as I am concerned, I see it as a major command failure because I believe that the command can hold FAP responsible to upholding the DOD's abuse criteria, because the commander has an enormous amount of influence in these CRB [Central Registry Board] hearings that are taking place under the FAP umbrella, which, unfortunately, is failing the system.

So I say this very humbly and respectfully. If we are going to put service members in command positions that are leadership positions, as Mr. Mitchell mentioned, can we please ensure that these individuals have the moral ground to uphold and lead such critical issues, such as sexual assault and domestic violence and domestic abuse. And if they don't or if they choose not to, then I humbly request this subcommittee to assign an oversight committee which oversees these commanders and holds them responsible. And that committee would be under your subcommittee that would work collaboratively with these commanders at each military installation.

Thank you, ma'am.

Ms. ESCOBAR. Thank you.

Ms. VASSELL. And just hearing from the survivors today and throughout my career—and, again, thank you all so much for your ongoing courage—the best practices that I had mentioned earlier were more focused on prevention, right? Preventing the violence from even happening in the first place and creating a culture within the military installations with, like, zero tolerance, and it will not happen. Perpetration will not happen. Victimization will not happen.

But hearing from the survivors and survivors that I have continuously heard from, what I would say is policies, practices, day-to-day practices need to match policies. Abusers need to be held accountable, regardless of their rank, like Mr. Mitchell had mentioned earlier. Responses to survivors, if we are going to talk about, you know, what happens after an incident occurs, should be survivor-centered, should be trauma-informed.

The survivors that are sharing with us today, this should be an ongoing process. Whatever is being enforced or developed should be informed by survivors throughout the entire process, not after the fact to say, well, would this work? So I think engaging survivors throughout the process, listening to survivors about what works, what doesn't work, and with enhanced responses and prevention, collaboration with practitioners, with preventionists, with domestic violence programs, I think would be another best practice that I would talk about.

I have coordinated projects that included installations and domestic violence agencies that resulted in a toolkit for installations and for civilians. So just talking about collaboration, collaboration. It sounds like it is not helpful, but it works, both for prevention and for intervention. So being survivor-centered, being trauma-informed, and hold perpetrators/abusers accountable.

Ms. ESCOBAR. Thank you.

Unfortunately, my time has expired. Thank you.

Ms. SPEIER. So the question on FAP, can you give us 30 seconds of what FAP did or did not do for you?

Ms. RANTA. I didn't even know about it. Actually, in your office today was the first time I had even heard of FAP. So that is a failure. Again, I had no navigation. I had no resources. I had no idea where to turn. So I can't even say that they failed me because I didn't even know about it. So, obviously, there is something—there is some link missing there. I am sure there are people that are like me.

Ms. SPEIER. Ms. Olszewski.

Ms. OLSZEWSKI. Yes. So I actually filed a Family Advocacy complaint with AMCIG [Air Mobility Command Inspector General], and they found five of six failures to have occurred. So I did not learn of FAP either through anybody other than my own efforts, through the VA [Department of Veterans Affairs], actually, on Travis Air Force Base. And Family Advocacy failed to include evidence. They ignored the strangulation, miscarriage, you name it. They never reported to the commanders or shared their information. That unrestricted aspect didn't even occur. So I find Family Advocacy to be kind of a—I don't want to say a joke, but it is bad.

Ms. SPEIER. Mrs. Hughes.

Mrs. HUGHES. Ma'am, in my particular case, my cases of abuse in 2015 were never opened. I didn't discover this until I contacted someone at Lackland Air Force Base. And then, finally, the abuse cases were opened in 2019, only to come to the same conclusion, that it didn't meet the abuse criteria.

To me, I am being told repeatedly that FAP is not an entity to adjudicate; it is just an entity to provide resources. However, I disagree. From my experience, that that is exactly what is taking place.

Ms. SPEIER. They adjudicated and didn't provide services?

Mrs. HUGHES. That is correct, ma'am.

Ms. SPEIER. Mr. Lee, you had said in your testimony that holding days of recollection or weeks of domestic violence awareness is, in part, what we tend to do as opposed to actually drill down and provide the prevention. I want to give you the last word for the panel.

Mr. LEE. Right. So every October we declare Domestic Violence Awareness Month. And, indeed, many places will have a proclamation, and there will be an announcement that goes out.

What we need to be able to do is it is about making that investment in prevention and being able to look at that 12 months a year, about how leadership is going to be involved, about how we are going to not just educate but be able to change the structure and look at how we can use military culture to be able to say that this is not acceptable.

When we see a culture that—and we heard so many stories of denial and not being able to—and not about accountability. The values of the military are about the values that are aligned with saying that we stand with each other to make sure that we are going to be stronger together and not a way that is going to be sacrificing people in the greater mission.

So we need to find a way to use those messages. And there are prevention programs that we can do that I have described in my testimony that we can be able to do, that we have been doing in

college campuses, that we have been doing with high schools, that we have been doing with sports, that we need to be able to start looking at how we can implement that in military settings, so we can be able to change that culture from the lowest rank to the highest officers to be able to make that change.

Ms. SPEIER. Right. Thank you very much. You have been outstanding witnesses. We are now going to take a couple minutes' recess so we can reset for the next panel. Thank you again.

[Recess.]

Ms. SPEIER. Now we are moving on to our second panel. And I would like to welcome Mrs. A.T. Johnston, the Deputy Assistant Secretary of Defense for Military Community and Family Policy at the Department of Defense; and Mr. Kenneth Noyes, Associate Director for the DOD Family Advocacy Program, Department of Defense.

Mrs. Johnston, I think you have a statement.

STATEMENT OF A.T. JOHNSTON, DEPUTY ASSISTANT SECRETARY OF DEFENSE FOR MILITARY AND COMMUNITY AND FAMILY POLICY DEPARTMENT OF DEFENSE; AND KENNETH NOYES, ASSOCIATE DIRECTOR, DOD FAMILY ADVOCACY PROGRAM (MILITARY FAMILY READINESS POLICY), DEPARTMENT OF DEFENSE

Mrs. JOHNSTON. Yes, ma'am. Thank you.

On behalf of Mr. James Stewart and the cadre of dedicated and expert professionals in the Family Advocacy Program, thank you, Madam Chair, Ranking Member Kelly, and members of this distinguished subcommittee for your unfailing support of quality of life programs that keep our service members and their families strong and resilient.

Ensuring the continued welfare and well-being of service members and their families is a responsibility the Department of Defense takes very seriously, as family readiness is imperative to readiness of the force. I appreciate the opportunity to appear before you today to discuss the Department's efforts in addressing the serious issue of domestic abuse within the military community.

Joining me today is Mr. Ken Noyes, Associate Director from the Office of Military Family Readiness Policy, which is the policy proponent for the Family Advocacy Program.

Before moving on, I would like to thank the witnesses on the first panel who shared their personal experiences. Each of you has taken a traumatic, heartbreaking event in your life and turned it into a call to action. We hear you, and we will continue to improve our programs and services. You and all other victims of domestic violence deserve nothing less.

We consider our prevention and response actions to be comprehensive. However, we recognize that domestic abuse presents human factor challenges that require continual training, education, and improvement in the effectiveness and responsiveness of our system. We cannot do it alone. We must and we will continue to work with our community and Federal partners as well as with leading experts in academia.

While we continue to make significant progress in our efforts to effectively address and prevent domestic abuse within the military

community, the Department is acutely aware that there is still much work to be done. We remain committed to the safety and welfare of our service members and their families and can never forget that our families, unfortunately, are not immune from the serious national public health issue that is domestic abuse.

We need and we welcome the continued interest and support of this committee and Congress in advancing this critical work. And, with that, we look forward to your questions.

[The joint prepared statement of Mrs. Johnston and Mr. Noyes can be found in the Appendix on page 117.]

Ms. SPEIER. Mr. Noyes, do you have any—do you have a statement?

Mr. NOYES. No.

Ms. SPEIER. You do not.

I guess my first question, Mrs. Johnston, is, based on what you heard in the last panel, what steps are you going to take?

Mrs. JOHNSTON. First of all, all the testimony was absolutely heartbreaking, but what that does is that is a call to action to us. In these particular cases, I don't know the specifics, so, in that regard, I would have to refer them back to the services for action.

Ms. SPEIER. Well, first of all, two of the people, two of the victims didn't even know that FAP exists. So wouldn't that suggest to you that you have a job to do in terms of making sure that all families know the services that are available at FAP?

Mrs. JOHNSTON. Yes, ma'am. We have the overarching policy in the Department, and then, again, we work with the services to make sure that all resources are known. Unfortunately, it is not a perfect system, and we will continue to work it.

Ms. SPEIER. Okay. That really doesn't answer the question at all. Just because you are the overarching authority and that the services all have to perform their function doesn't mean that you don't have a responsibility to demand of them that they do a better job of providing information, education. And maybe some of these survivors could be of some value to you in trying to determine how better you can make that available to victims.

It would seem to me that one of the questions that was raised is, is FAP there to provide resources or to somehow make a determination as to whether or not a case should move forward or not?

Mrs. JOHNSTON. Yes, ma'am. FAP is absolutely there to provide resources, but that is also the function to do a determination.

And, with that, I am going to let Mr. Noyes address that issue.

Mr. NOYES. Thank you, ma'am.

Chairwoman Speier, I just want to address your question about outreach and the awareness of FAP. Certainly, we know that we have more work to do. Domestic violence is a scourge, and the work that we all have to do together as a community and as the DOD means that the best way forward is to ensure that prevention and response are coordinated efforts, because we know that 70 percent of our families live off installation.

In terms of how we make service members and their families aware of FAP, we have multifaceted awareness campaigns that happen in October. And, of course, we understand that that is a limited way in which we reach out. It is one way in which we reach out.

We also work with the Department of Defense school system to ensure that they are aware of our services. And, in fact, they work with families every day and make referrals to FAP every day. We have child, youth, and family programs under the umbrella of Military Community and Family Policy, who also help us in our outreach to families so that they are aware of the services that we provide.

We also work with law enforcement, with command, and with the entire Coordinated Community Response, which is the core of how we address domestic abuse on the installations. And we work together to provide the awareness and the outreach to the community to understand the services that we provide and where we can be found.

And, again, we know that there is more to be done. Our services often come with some of the things that the victims talked about, and that is stigma, not being supported to move forward, and certainly that gets attached to FAP at times. And we have a lot of work to do to overcome the stigma for people approaching Family Advocacy Program, along with our intersecting and other components that have the same challenges with people coming forward.

In terms of your other question about accountability and whether we are a program that focuses on response, interventions, clinical services, support groups and advocacy, that is, indeed, our mission. It is separate, as a parallel process to the work that command, law enforcement, judges do in order to hold offenders accountable.

We must ensure that FAP is seen as a social service provider that protects families working in tandem with the Coordinated Community Response that supports them so that law enforcement, command, and the court, the military court system can hold them accountable for domestic abuse, child abuse and neglect, and the other intervening forms of violence and harm—

Ms. SPEIER. All right. Mr. Noyes, my time is almost expired. Let me just say this: Two out of the three victims today didn't even know you existed. We have made trips to bases around the country, talked to spouses. Oftentimes, they don't know you exist.

So you have got to look at another way of communicating with families because the existence of your resource is there; it is being underutilized or not utilized at all. And I think that we need you to show greater accountability. I might also add that I think that when there is domestic violence, to bring counseling together for the two parents and try and keep the family together may not be the best strategy, and that appears to be one of the efforts that you continue to pursue. And I think that will be discussed at another time, but my time is expired.

Mr. Kelly for 5 minutes.

Mr. KELLY. I am going to go back to the chairwoman's point. What additional resources, if any, are necessary by you guys to make sure that everyone knows that FAP is available? I mean, is there something we can give you or what is a plan of action to make sure that at least they have knowledge that you exist? Is there a plan of action or can we provide more resources that make that so that the majority of—I mean, some people will never know, but the majority of people will know that FAP exists and what it exists for?

Mrs. JOHNSTON. To be honest, I was not aware that people were not aware. I know that commanders know of FAP. Therefore, I think that part of the strategy is a reminder of the programs. When there is a FAP case, the commander actually oversees the Incident Determination Committee. Would you like to—

Mr. NOYES. Certainly.

Mr. KELLY. Quickly, because I have got other things I want to get to.

Mr. NOYES. Yes, sir. We have a comprehensive prevention plan that expired in 2018, and we are working now to move forward to create that new prevention plan, based upon the CDC socio-ecological model that other witnesses spoke about earlier. Part of that is a comprehensive communications plan, working with the intersecting components that work against violence, so SAPRO [Sexual Assault Prevention and Response Office], Sexual Assault and Harassment, the Office of Diversity, Equity, and Inclusion. Looking at—

Mr. KELLY. That is long enough, but here is the bottom line: If they don't know about it, it doesn't exist. And so figure it out. If you need more resources, let us know. But if they don't know about it, it does not exist.

Going back, can you describe the community-based approach to domestic violence prevention and response, and what resources do you leverage to do that?

Mrs. JOHNSTON. Yes, sir. The community-based response is we work with those folks outside the gate, who also have programs. In some cases, there would be a memorandum of understanding; in other cases, a memorandum of agreement. But our programs allow us to make sure that both on the base and off the base that we are able to offer our services.

Mr. KELLY. And just as a suggestion, and whether or not—you may already do it and I hope that you do, but every base, Active Duty base, okay, has a local law enforcement and local community there. We need to be plugged in at the hip with their victim assistance coordinator, whether that be at the county or district level or city level, whatever that is, but we ought to be plugged into the hip so that nobody gets the gaps.

You know, in the military, we always have to protect the boundaries. That is where the enemy always likes to attack, because nobody is looking. And we need to do the same thing with our communities, our cities or counties, whatever the case may be. We need to be plugged in with their law enforcement and their victim assistance coordinators, to make sure that they are not—we ought to be talking. And so, if we are not, at least let's make sure we got a plan to talk to communities.

Mr. NOYES. Thank you, sir. I just want to add that, in terms of our connection to the civilian community and the partnerships that we have in order to protect domestic abuse victims and their families, the domestic violence—I am sorry—the domestic abuse victim advocates that are funded through OSD [Office of the Secretary of Defense] funding work very closely to help support the needs of victims and their families. And they work really closely with community-based programs to ensure that they have the intersecting supports that, should the DAVAs [domestic abuse victim advocates]

not be able to provide, because of potential overwhelming need or wherever there may be a small installation that is isolated that really needs the use of community resources to help serve people, that they are constantly working and reaching out, going to court, helping them get MPOs and CPOs.

Mr. KELLY. I have only got a minute left, so I want to get to the next point. I understand that those who have been violent in one context are likely to be violent in another. So people who mistreat soldiers or airmen or sailors are also likely to be the same ones who are mistreating their spouse.

So what are we doing to identify and address violent behaviors at work that may carry over or that translate into domestic violence? What are we doing to train our commanders so that they see this bullying at work probably translates into bullying at home or domestic violence at home. What are we doing to inform and teach commanders and soldiers?

Mrs. JOHNSTON. I will need to take that back for the record. That is not an area that FAP has oversight in.

Mr. KELLY. And, with that, you know, we have got a long way to go. There is nothing more important. But I am going to tell you, it all comes down to emphasis. And I would just say, whether or not—we can always have more education, but it is about transparency, it is about knowledge, and it is about educating.

And so we have got some work to do to make sure that we educate the spouses and children to make sure that they know about the program and what resources are available.

And, with that, Chairwoman, I yield back.

Ms. SPEIER. Thank you, Mr. Kelly.

Not to beat a dead horse, but in meetings at the various bases, what we heard about FAP was that they showed up at the hearing with the survivor, and that was about the extent of it. So, while you referenced that just now, I think it is so much more than that, and I think you are hearing that from all of us here today.

Do you have any funding for research in your offices?

Mr. NOYES. We actually do fund research. The services use our funding to also fund research that they identify, based upon trends and gaps that they see in their communities. We work with multiple—

Ms. SPEIER. All right. Mr. Noyes, what I think we want then is where that money has been spent and what has it been spent on because I think we need to know more about when the domestic violence occurs.

I have read one study that suggests it happens upon returning from deployment, and if that is the case, then we need to make sure there are the appropriate resources available to families at those particular junctions.

Mrs. Davis.

Mrs. DAVIS. Thank you. Thank you both for being here.

Mrs. Johnston, you said to the survivors: We hear you. And I think the question often that they are wondering is, do you believe us?

And I am wondering if you have any thoughts or, Mr. Noyes, about the extent to which we are talking I would hope about perhaps a relatively small number of commands that seem predis-

posed not to believe what survivors bring to them. Can you discuss that? Why would that be the case, if you think it might be the case?

Mrs. JOHNSTON. I can't speak to an individual commander and what they would be thinking. What I can say is that there is a process by which folks come into command, and I would be hopeful through that process in most cases we will weed out these kinds of issues, but that would be where I would think that that would be the place that we would see that.

Mr. NOYES. In terms of FAP's connection to command and the way that they work with command, it is very focused on when a victim is being served, either clinically or through a domestic abuse victim advocate, assuming that it is an unrestricted report, that the FAP manager or other personnel in FAP will tell the command, based upon what they have learned in the case, about the high risk or safety issues.

And in that way, that is the way that FAP is working both with command and law enforcement is to ensure that they understand the gravity of both risk and of safety to ensure that appropriate measures can be taken on the command or law enforcement side.

And that is where, in terms of thinking about the difference between FAP and the law enforcement and command system, where we support victims in sharing what is happening to them and the risk attached to that so that then command and law enforcement and staff judge advocates will take it from there to hold the offender accountable.

Mrs. DAVIS. So you have a responsibility then to share that information that you receive that could bring the behavior of a commander, for example, into question, to follow that through. Is that correct or—

Mr. NOYES. In terms of command response and responsibility, it is the services' responsibility to hold them accountable. Our role is to ensure that they understand what is happening with the victim and the offender in unrestricted cases, and I would have to defer to the services otherwise.

Mrs. DAVIS. I think we are familiar, obviously, with sexual assault in the military, in terms of restricted and unrestricted. But in terms of that responsibility to provide that information to the command, you are saying that you have that responsibility only if it is unrestricted?

Mr. NOYES. We have a responsibility at FAP first and foremost to the victim, being victim-centered and trauma-informed. If a victim has chosen a restricted report, she or he, they have made that decision for themselves. Our responsibility is to ensure that the services and, therefore, the services in monitoring the installations follow DOD policy as it relates to restricted reports, and that is to provide services without informing command and law enforcement, because the victim chose that route.

Mrs. DAVIS. Chose to do that, okay. And that may be something that we should—perhaps in domestic violence, we should look at that as it relates to sexual assault as well.

But my question also is, how do you get feedback? Because it seems that perhaps there could be a better way, like what we do in commands when we get the climate, you know, every year, every

few years, right? I don't know whether families would necessarily fill out evaluation forms. Maybe that is better for research, the RAND Corporation, whoever.

But how do you know? I mean, could you even say, 10 percent of our families, 35 percent of our families have no idea what we do versus—how do you go about understanding the extent to which people know when they could use your services and that they are there so that somebody, you know, even first off when—I think, actually, even when people are getting married, for example. Because it is the services, it is an important thing for people to know, what is available to me? What can I count on? How do people do that? What do you know about? Do you know how they feel about that?

Mr. NOYES. So I would say that, in terms of educating, which is I believe what you are asking, educating spouses and intimate partners about what is available to them, it is back to ensuring the Coordinated Community Response is working in tandem with us in each piece of their area of work, so mental health, hospitals, child and youth programs, education.

We work together to ensure that each of us shares what we know about the other programs as well and have a referral mechanism, information and referral mechanism in place so that we can make sure that families and—

Ms. DAVIS. I think my time is up. I am sorry. I mean, Military OneSource is one avenue, perhaps, but—

Mrs. JOHNSTON. Also, the annual—not annual but biannual spouse surveys, where we actually do survey the spouses on a variety of topics. So, just this past year, not on the Active Duty but in the Reserve, we actually asked the question: Do you know FAP? Have you used FAP? Do you know about the New Parent Support Program? Have you used the New Parent Support Program? So we should be getting those results, and we will be able to better tell of the awareness of those.

Ms. SPEIER. So, when those results come in, would you present them to the committee?

Mrs. JOHNSTON. Yes, ma'am.

Ms. SPEIER. Mr. Kelly.

Mr. KELLY. I just wanted to follow up on Mrs. Davis'. She is talking about a command climate survey which they do every time they have a new commander, near the end of that. And so we need to look at something so that they at least have the opportunity to fill that out so that we get some data on what they know and if what they know is true. So I don't know how we look at that, but that would be very helpful.

Ms. SPEIER. Ms. Escobar for 5 minutes.

Ms. ESCOBAR. Thank you, Madam Chair.

So you sat through the first panel and you heard the survivors basically say that they had—two of the three—that they had no idea that you existed. You heard one of the survivors say she had access to zero resources.

So, having taken that information in and having heard some of the questions from some of my colleagues, what, in your mind, do you need to do to make this better?

Mr. NOYES. Family Advocacy Program at DOD has the responsibility to monitor compliance with policy at the service level. I am

committed, and I know Mrs. Johnston is committed as well, that in our oversight, we meet with the services regularly. We bring issues to them. They bring issues to us. We look at challenges and how we might better inform policy or practice, what other research might we be doing together.

And this is a place where, as we are developing a revised oversight framework, that quarterly, when we meet with them, these issues will be on our agenda so that we begin to figure out how better to, one, reach people so that they understand these services are available, but also then coordinate on planning on where we place priorities moving forward.

Ms. ESCOBAR. And tell me, if you could, how often do you update your outreach plan? Is there an annual strategic planning process? Is there a review of where you have been most successful, where you have not been most successful? What research informs that plan, and who is a part of building that plan?

Mr. NOYES. We work very closely with Military Community Outreach, which is partially Military OneSource but also Public Affairs, and not only our awareness campaigns but in looking back at our prevention plan, both primary, secondary, and tertiary prevention, to include communications and outreach.

It is all part and parcel of a comprehensive planning that takes place with the services and with the other components that we are involved with under the umbrella of Military Community and Family Policy. And all of that work is happening now. We expect that, in the prevention work that we are doing at the DOD level with other components that address violence and harmful behaviors, that comprehensive communication strategies and outreach strategies certainly will have to be a part of prevention.

So that work is continuing, and I expect that, within the next year or so, we would have a comprehensive plan that speaks to communications, outreach, and using the CDC's socio-ecological model to address primary prevention.

Ms. ESCOBAR. So the plan that you say will be ready in about a year or two, are you updating an existing plan?

Mr. NOYES. Part of that work is to update an existing plan. That plan was in place 2014 to 2018. We continue to use components of it moving forward as we plan either for new policy, new practice and standards, or for a strategic plan.

Ms. ESCOBAR. So am I understanding you update it every 4 years? Is that what you are saying?

Mr. NOYES. To my knowledge, the prevention plan was for 5 years. And now we are looking at making decisions about whether we will do another one for 5 years, whether that timeframe needs to be different, or whether we need to change our strategy and look at creating a prevention policy, including communications and outreach, or whether that would need to be standards that are brought into DOD policy as well.

Ms. ESCOBAR. Do you know, in the existing plan as well as the plan that you are now proactively working on, what role do survivors play in informing that plan?

Mr. NOYES. Based upon my knowledge, that is some significant work that remains to be done. I know that, at the service level, they have held focus groups to understand better about what sur-

vivors and families need in order to address domestic abuse. Again, that is done installation to installation. It is not policy that DOD imposes on them.

Ms. ESCOBAR. My time is about to expire. I would offer a recommendation. The recommendation is that this process, this planning be survivor-centric. That means their voices have to be predominant in the planning phase. That means their experiences need to be heard so that you all are able to more adequately be a presence there for them. They need you. They need the services that you provide. They need the outreach. And the only way we are going to fix this is if you listen to them.

Mrs. JOHNSTON. Thank you. We will take that back.

Ms. ESCOBAR. Thank you. My time is expired.

Ms. SPEIER. Thank you, Ms. Escobar.

Mr. Kelly.

Mr. KELLY. Just one further suggestion. Exit surveys, whether it is through separation, divorce, separation from service, I think you could gain a lot of information if you did exit surveys with spouses and children when they leave the service, especially when they do it separate from the service member. I think you could get a lot of helpful information.

And, with that, I yield back, Madam Chair.

Ms. SPEIER. Thank you, Mr. Kelly.

Mrs. Johnston, Mr. Noyes, thank you very much for participating in this hearing. I think you have heard loud and clear that there is a lot of work that needs to be done. I realize that you are an umbrella entity, but you do meet quarterly with each of the services.

I am, frankly, sick and tired that we have each service having a different set of standards and ways of providing services to their service members and families. I think there should be some consistency across all the services. But, having said that, as you meet with them, I think it is going to be important for you to ask them to do a comprehensive drill down on what the needs are as it relates to domestic violence. I understand that you provide all kinds of other services under FAP, but specifically as it relates to domestic violence.

One of the things we heard was that service members will often-times isolate their spouse and not offer their emails for communication purposes. We have got to find a way around that. You have got to be able to use email or Facebook or any number of other opportunities that exist on these various bases to communicate with these families. And certainly your FAP programs at each of the services can identify how to do that, but that has got to be one of the first steps that I think you undertake in order to be able to communicate better and give more information to the community that exists.

So, with that, we will stand adjourned. Thank you.

[Whereupon, at 4:08 p.m., the subcommittee was adjourned.]

A P P E N D I X

SEPTEMBER 18, 2019

PREPARED STATEMENTS SUBMITTED FOR THE RECORD

SEPTEMBER 18, 2019

**Statement of
Representative Jackie Speier
Shattered Families, Shattered Services: Taking Military Domestic Violence
Out of the Shadows
September 18, 2019**

The hearing will now come to order. I want to welcome everyone to this hearing of the Military Personnel subcommittee on domestic violence in the military.

We are here today because domestic violence has become a forgotten crisis in our military. It has been 15 years since a DOD task force analyzed domestic violence within the military, yet we have seen unsettling warning signs since. Within the last few months, DOD reports have highlighted concerning failures in our services' domestic violence systems. The DOD has not responded urgently.

Today, we will hear from two survivors of domestic violence in the military who are bravely coming forward to share their experiences in the hope that others may be helped. Because we lack data that is recent, plentiful, or granular, we must rely on survivors, advocates and experts to help us understand the unique challenges of dealing with this crisis within the military.

Major Leah Olszewski is still on the run from a violent abuser. Air Force officials at every level refused to help her, despite knowing of past incidents. Kate Ranta found justice in the civilian—not military—system, but only after her violent ex-husband—who was allowed to go free and retire by the Air Force—shot her and her father. These incidents impact families, communities, and have sidetracked the victims' careers.

The DOD must learn to believe survivors and take action based on their claims and evidence. Favoritism and a complex bureaucracy cannot shield dangerous perpetrators.

Domestic violence is not unique to the military. According to the CDC, one in four women and nearly one in ten men have experienced intimate partner violence in their lifetimes. And, as with civilian domestic violence, there is no “typical” military domestic violence case. That means policy must account for and address a wide range of potential aggravating factors. Adverse childhood experiences may create a propensity for domestic violence. Poor role models can make it hard to peacefully resolve conflicts. Law enforcement, providing access to child care and early education, military leadership, Congress, and the criminal justice process all have roles to play.

But we must also mitigate the factors of military life that can exacerbate the risks of domestic violence. Families cope with new responsibilities, frequent moves, and tough challenges. Servicemembers may be consumed by military duties – and struggling with post-traumatic or other stresses and a thirst for high-risk behaviors after multiple deployments. Military spouses are often isolated, underemployed and struggling to make ends meet, living far from friends or family

and unfamiliar with local resources. It's unfortunately easy to see how these conditions can make domestic violence possible, more dangerous, and persistent.

When young men and women join the military, they become our responsibility as one of our nation's most precious resources. We are equally responsible for military families, who sacrifice along with their servicemember. And we are responsible for military children—because exposure to domestic violence has long-term effects and because military children are disproportionately likely to join the military themselves.

I believe that the military takes this problem seriously, but it's clear that leadership needs to address this threat with renewed urgency. Commanders, at every level, need to make combating domestic violence a personal priority.

In recent years, Congress has added a UCMJ domestic violence criminal article, required new reporting on DOD's prevention and response systems, and explored expanding special victim attorneys to cover domestic violence. There is far more to be done, however, and I hope to learn about some options today.

Today we will be joined by two panels. The first will consist of military domestic violence survivors and experts. On the second, we'll have DOD officials responsible for designing and implementing relevant policies.

We will focus on three main questions during today's hearing:

First, why does domestic violence in the military matter? Who does it affect and what happens to them?

Second, how should we prevent domestic violence, reach out to and care for survivors, and deal with perpetrators?

Third, what do current DOD programs look like? What are their strengths and how can we further improve them?

**Kate Ranta – Statement for Armed Services Committee’s Hearing on Domestic Violence
September, 18, 2019**

My name is Kate Ranta and I am a survivor of domestic and gun violence. I want to first thank Congresswoman Speier for inviting me to provide testimony today on this important issue, domestic violence in the military. Sadly, my abusive ex-husband’s military command failed to protect us, and it almost cost my father, my son and me, our lives.

My former spouse, Thomas Maffei, was a major in the Air Force. In 2009, we were living in officer housing on Ft. Belvoir. It was there that he began to show increasingly abusive behavior toward the children and me – he controlled every aspect of our lives. On Christmas Eve that year, we had what I call the first altercation that truly scared me. I’d decided to take a photo of my two sons in front of the Christmas tree. Henry was 5 and William was 3 months old. I sat Henry down on the carpeted floor and placed William in his arms, then walked around the corner to grab my camera. All of a sudden I heard the baby crying, Henry crying, and Thomas yelling. I ran into the room to see William on the floor and Thomas pointing and hollering at Henry. Apparently William had spit up on Henry’s arm, which surprised him, and he released his arms and William rolled onto the floor. I scooped up the baby to check him, and he was fine, so I turned my attention to Henry to console him. Of course it was an accident.

Not according to Thomas. He grabbed William from me and took him into the bathroom, dramatically examining his head and claiming there was a mark (there wasn’t) and screaming at me to stop consoling Henry, that he did it on purpose, that he was going to harm the baby. He turned his rage on me, accusing me of favoring one child over the other, saying if Henry harmed William he’d kill him. He then grabbed the car seat and started to put William in it, saying he was leaving and taking the baby and going to the barracks for the night. As he walked away, I begged him not to go, to give me the baby. He did give him over, and I took Henry and ran upstairs to the bedroom and locked the door. About 5 minutes later, he used the key on the door frame to come in after us and told me he’d called the MPs and that I’d be going to jail that night. In front of the children. On Christmas Eve.

The MPs did not come that night, however. He must have been just trying to scare me. It worked. I vividly remember this a decade later because it was so traumatizing.

During this time, Thomas was also pushing to retire after putting in 25 years – he said it was a long process with lots of paperwork. He said he was meeting with people on Andrews to get it done. My parents and my brother and his family were living in Florida, and I wanted to be near them, so we planned to move there when the retirement came through. We bought a plot of land in 2009, in a new community that was going up a mile from my parents’ house. It would take about a year or so for the house to be completed, which he said would be enough time for the retirement process. As time went by and the house was getting closer to completion, we learned that our closing would be in September 2010. But his retirement still hadn’t happened. As the time approached for us to leave for Florida, but he was still active duty and still based at Andrews, he said that he could forge orders to give to those responsible for arranging PCS

moves – that he'd doctor a PDF and give it to them and they'd not even question it. He was right. They took the fake orders and our move was scheduled.

Of course I told him that it was illegal, but he had no fear and definitely didn't care. Of course I knew it was wrong, but there was no stopping Thomas.

The movers came, packed up our belongings and our cars, and we flew to Florida. Keep in mind, Thomas was active duty. And had not been in the office for months and months. And had no accountability. And was AWOL when we left Virginia.

We moved into our new home in early September 2010. Thomas's behavior became erratic, basically as soon as we moved in. I was walking on eggshells. He would control how often we saw my family, and when we did, he would cause a scene and make everyone uncomfortable. One night, he almost overdosed on Ambien – he was stumbling around the house, bouncing off walls, fell into the bathtub and had a bloody nose. I called 911 and he was taken to the hospital. I didn't even go. I was nearing my wit's end.

On Jan. 2, 2011, he took it to another level. He picked a fight with me, then locked me out of our bedroom. I knocked on the door, crying, asking him to let me in, when I heard the sound of a gun chambering. He had many guns in the home. Terrified, I dialed 911 and ran to the front of the house and out the door. I gave the operator the address and told her that my husband was angry and had a gun and I was scared. Then I heard the garage door open and out he came holding our toddler, who was only 2. He got into the car with William on his lap. By instinct, I jumped into the car with them. He sped off up the street, then came to an abrupt stop. He raised his fist at me, his eyes black, and told me to get out of the (expletive) car or he'd punch me in my (expletive) face. I believed him. I jumped out and he sped off around the corner. I ran through the streets, screaming for help, that he had my baby. Nobody came outside, so I decided to run back to the house, thinking the police would be there. They were. And so was Thomas. He'd gotten back before the police arrived, put William back in his crib, and was outside giving his military coins to the officers – telling them he was a veteran (he wasn't, he was active duty) and had survived a Humvee explosion in Iraq (he didn't, he'd never deployed). To them he was a hero and I was a hysterical wife.

I was forced to leave the home with my children and he was allowed to stay. But I was terrified and traumatized and didn't want to see him again. I was scared for our lives.

The next day, I got a temporary restraining order and he was served. I called his commander, Col. Timothy Applegate, at Andrews and told him about the domestic violence incident, about the restraining order, about his soldier not being in Virginia but in Florida, about the fake moving orders. He was quick to get me off the phone, but not before calling me hysterical, and certainly to contact Thomas and find out what was going on. He knew he was in trouble, too. He'd had no idea that Thomas wasn't even in Virginia for 4 months, was AWOL, and knew that this would affect him and his military career as well. He did ask me to send him the fraudulent orders if I had access to them. I did, and I emailed them.

Thomas knew he needed to get back to Virginia, which was what he did. In the meantime, one of the military wives I'd befriended on Ft. Belvoir was JAG, and connected me with OSI in order to report the situation to them as well. As a result of that, and likely to make this go away for Col. Applegate, Thomas was moved out from under him and placed with a new commander, Lt. Col. Michelle Ryan, at Bolling Air Force Base, as OSI began its investigation. He was to remain on Bolling, with check in times so they knew he had not left the base. OSI investigators came to my home in Florida and seized our computer as part of the investigation. I had faith in this process, as Thomas had not only abused me and needed to be held accountable by the military for that, but also had committed fraud.

During the months he was held at Bolling, Thomas went AWOL two different times. Both times, I got calls from Lt. Col. Ryan that he had not checked in as he was required to, that they could not make contact with him, and that my family and I should go somewhere where he couldn't find us, as she couldn't guarantee he wasn't on his way to Florida. Both times, they did find him a day or two later, and she gave excuses about his whereabouts. Meanwhile, my family and I were hiding in a hotel for several days, with no compensation and also missing work, scared out of our minds. Those in charge of him obviously did not have that tight of a leash on him, as he slipped them more than once.

OSI had begun its investigation in January 2011 and completed it in mid-March. They were looking into spousal abuse as well as fraud. When it was coming to a close, I was contacted by an investigator, who let me know that they'd found him guilty of both and would be recommending court martial. I was relieved – until he then told me that Thomas's punishment would actually be up to his command and that there was a chance that nothing would happen to him. I was floored. How could the Office of Special Investigations find a soldier guilty but not have any control over whether he'd be punished or not? But I still held onto the hope that I was in the right, that I'd taken the steps to keep myself and my family safe, and that his command would protect us.

I was wrong. Shortly after OSI closed the case, Lt. Col. Ryan called me. It was another very short conversation. She said they'd handled it "administratively" and that Thomas would be retired at the end of March. I literally begged her to reconsider. I said he's dangerous. I said I was afraid he'd try to kill us, especially me, given that I'd reported him. She said he'd served 25 years and charging him would cause him to lose his pension. The call ended after that. I knew there was nothing I could do. The military lifted the restraining order they'd put on him, and he was released into society.

A year and a half later, after months and months of civilian court hearings, after months and months of cyberstalking, stalking, vandalism of our cars, fear, and danger, Thomas showed up with a .9mm Beretta, ambushed me at my new apartment and shot through the front door. My father and I were standing inside the door, pushing against it, trying to keep him out. My son William was standing just behind us. After the bullets came through the door, any of which could have hit his child, he pushed his way in and shot some more. A bullet went through my

right hand. He shot my dad point blank in his left side. Another bullet went through my left breast, just missing my heart. Another bullet went into my dad's left arm, leaving it paralyzed. Thomas did this in front of our then 4-year-old son, William. His own son, who screamed "Don't do it Daddy, don't shoot Mommy."

By some miracle, we all lived. The three of us got out of the apartment and Thomas surrendered at the scene. He spent almost 5 years in jail before we had a civilian trial, where he was found guilty for premeditated attempted first degree murder and sentenced to 60 years in prison. Thomas lied to his defense attorney, continuing to pedal his false claim of PTSD due to his military service, when in fact he'd never stepped foot in Iraq or Afghanistan, had never seen combat once in his 25 years of service. They tried to use this fabricated narrative as a defense for his attempted murder. The jury and the judge didn't buy it. We found justice in the civilian court system, not the military.

All of this was avoidable. I hold his command fully responsible. They knew he was dangerous. But instead they chose to not do a thing about it. His pension and 25 years behind a desk were more important than our safety. After the shooting, I emailed his mug shot and media links about the shooting to both Col. Applegate and Lt. Col. Ryan and sarcastically thanked them for looking out for their soldier instead of the soldier's wife and children. I never got a response.

Domestic violence in the military is rampant. There are tons of Thomas Maffei's in their ranks. It's beyond time for victims to be believed by commanders and by the military system in general that is supposed to help families, and for the abusive behavior of service members – particularly officers, who seem to get special treatment – to no longer be swept under the rug. I hope this committee will be as appalled as I am about what happened to us, and will take steps to change this "take care of our own" culture in our military, at the expense of women and children whose lives are at stake.

Thank you.

Kate Ranta

Kate Ranta is a public figure in the gun reform and violence against women movements. Kate has elevated her story in documentaries, television, online media and print publications, has spoken out publicly at rallies and at the Capitol, and has participated on numerous national panels. As a survivor, she is aligned with many national and local grassroots gun violence prevention groups. Her book, "Killing Kate: A Story of Turning Abuse and Tragedy into Transformation and Triumph," comes out October 1, 2019, for Domestic Violence Awareness Month.

**DISCLOSURE FORM FOR WITNESSES
COMMITTEE ON ARMED SERVICES
U.S. HOUSE OF REPRESENTATIVES**

INSTRUCTION TO WITNESSES: Rule 11, clause 2(g)(5), of the Rules of the U.S. House of Representatives for the 116th Congress requires nongovernmental witnesses appearing before House committees to include in their written statements a curriculum vitae and a disclosure of the amount and source of any federal contracts or grants (including subcontracts and subgrants), or contracts or payments originating with a foreign government, received during the current and two previous calendar years either by the witness or by an entity represented by the witness and related to the subject matter of the hearing. As a matter of committee policy, the House Committee on Armed Services further requires nongovernmental witnesses to disclose whether they are a fiduciary (including, but not limited to, directors, officers, advisors, or resident agents) of any organization or entity that may have an interest in the subject matter of the hearing. Committee policy also requires nongovernmental witnesses to disclose the amount and source of any contracts or grants (including subcontracts and subgrants), or payments originating with any organization or entity, whether public or private, that has a material interest in the subject matter of the hearing, received during the current and two previous calendar years either by the witness or by an entity represented by the witness.

Please note that a copy of these statements, with appropriate redactions to protect the witness's personal privacy (including home address and phone number), will be made publicly available in electronic form not later than one day after the witness's appearance before the committee. Witnesses may list additional grants, contracts, or payments on additional sheets, if necessary. Please complete this form electronically.

Hearing Date: Wednesday, September 18th

Hearing Subject:

Domestic Violence: Survivor Perspectives and Prevention Strategies

Witness name: Katherine Ranta

Position/Title: Domestic and Gun Violence Survivor

Capacity in which appearing: (check one)



Individual



Representative

If appearing in a representative capacity, name of the organization or entity represented:

n/a

Federal Contract or Grant Information: If you or the entity you represent before the Committee on Armed Services has contracts (including subcontracts) or grants (including subgrants) with the federal government, received during the current and two previous calendar years and related to the subject matter of the hearing, please provide the following information:

2019

Federal grant/ contract	Federal agency	Dollar value	Subject of contract or grant
n/a			

2018

Federal grant/ contract	Federal agency	Dollar value	Subject of contract or grant
n/a			

2017

Federal grant/ contract	Federal agency	Dollar value	Subject of contract or grant
n/a			

Foreign Government Contract or Payment Information: If you or the entity you represent before the Committee on Armed Services has contracts (including subcontracts or subgrants) or payments originating from a foreign government, received during the current and two previous calendar years and related to the subject matter of the hearing, please provide the following information:

2019

Foreign contract/ payment	Foreign government	Dollar value	Subject of contract or payment
n/a			

2018

Foreign contract/ payment	Foreign government	Dollar value	Subject of contract or payment
n/a			

2017

Foreign contract/ payment	Foreign government	Dollar value	Subject of contract or payment
n/a			

Fiduciary Relationships: If you are a fiduciary of any organization or entity that may have an interest in the subject matter of the hearing, please provide the following information:

Organization or entity	Brief description of the fiduciary relationship
n/a	

Organization or Entity Contract, Grant or Payment Information: If you or the entity you represent before the Committee on Armed Services has contracts or grants (including subcontracts or subgrants) or payments originating from an organization or entity, whether public or private, that has a material interest in the subject matter of the hearing, received during the current and two previous calendar years, please provide the following information:

2019

Contract/grant/ payment	Entity	Dollar value	Subject of contract, grant or payment
n/a			

2018

Contract/grant/ payment	Entity	Dollar value	Subject of contract, grant or payment
n/a			

2017

Contract/grant/ payment n/a	Entity	Dollar value	Subject of contract, grant or payment

Statement by Leah Olszewski, Survivor and Advocate

***For the House Armed Services Committee Hearing on Domestic Violence
September 18, 2019***

I am appearing as an individual and have provided, as requested, a copy of my curriculum vitae.

My name is Leah Olszewski. I am a Major (MAJ) in the US Army National Guard having worked in special operations over many years. I am a business owner, entrepreneur, daughter, sister, aunt and a one-time intimate partner to an active duty Air Force E8, SMSgt (RET) Erik Cardin, with whom I lived outside Travis AFB, California. I once was someone else - tough, on the move in every way, super loving, trusting. I had a magnificent spark in me, the world at my fingertips. That is, until I met and later moved in with SMSgt (RET) Cardin in April 2017.

The abuse started small in the Fall of 2016. He would tell me he loved me one minute and then explode in rage - privately and publicly - stating he was glad I didn't fight back (because he had been in physical altercations with women in the past), apologizing, then begging me not to leave him.

The nine months we dated exclusively between August 2016 and March 2017, I saw the beginnings of who SMSgt (RET) Cardin really is. But, that's not all that was going on. During this time, the SMSgt would also be fired and kicked out of his unit, the 571st Mobility Support Advisory Squadron (MSAS) at Travis Air Force Base (AFB), California (CA) after 3 significant incidents of violence (including on a LtCol/O5 and a MSgt/E7) and daily abuse on service members who, to this day, say "He's going to kill someone.", "He's going to come for you Leah", "You don't even have to tell me about all the abuse, he's capable of all of it" and "He has slipped through the cracks for years". I later learned this to be even more true than anyone could imagine. When I met SMSgt (RET) Cardin in June 2016 near Hurlburt Field, Florida, he led me to believe he was with Air Force Special Operations Command (AFSOC). Little did I know then that AFSOC had fired and kicked him out 2 years prior, in 2014, for abuse on service members including - per SMSgt (RET) Cardin's own words - being emotionally involved in another service member's suicide. I also did not know that SMSgt (RET) Cardin had recently returned from a year in Afghanistan, during which his Commander (with whom I have spoken since) and his unit there experienced this same violence and abusive behavior under the SMSgt. The Air Force, once again, never directed him to counseling, nor reprimanded him. Instead, it rewarded SMSgt (RET) Cardin with a leadership role at Travis AFB, CA. While the SMSgt was en route to this new assignment in August 2016, another Air Force Non-Commissioned Officer (NCO) at Travis AFB, who knew SMSgt (RET) Cardin from their time at AFSOC in similar roles, warned Travis Command of the SMSgt's violent history. Command said it knew and did nothing. This is the same thing they would do - nothing - regarding SMSgt (RET) Cardin and their own service members, even when service members complained of the SMSgt's behavior and of being afraid, between August 2016 and September 2018.

And, this is the same thing they would do - nothing - after learning in the Fall of 2017 that SMSgt (RET) Cardin had assaulted me 5 times, including strangulation in July of that year,

constantly threatened me, including to break neck (and only hadn't done so yet, according to the SMSgt "because God is with me", and bust my front teeth out for stepping to him like a man (which is on recording). The 571MSAS Commander said "We know he hurts people and will always blame others and not take responsibility." and "Leah, run away. He's doing you a favor". That's it. Their answer to his violence over many years on many people was to not send him to counseling, was to not court martial him, but to just push him off to be someone else's problem. That someone else was other service members - who the Air Force put at risk - and me.

In April 2017, SMSgt (RET) Cardin and I moved in together and the severe verbal and emotional abuse began. I was a slut, a whore, a hooker, cheating with Navy SEAL friends and Special Forces co-workers. Other women, especially female service members, were the same and "just want trains done on them". He isolated me, took my communication devices, left me in dangerous places at night, forced me into physically dangerous situations. He would tell me he loved me and wanted children with me already one minute and the next, become enraged because I walked wrong, needed water or asked a question. He said he would always win, I would always lose, and I was a woman, so should know my place. Then he would ask me not to abandon him as others had. My life with him was a roller coaster and terrorizing.

On October 11, 2017 SMSgt (RET) Cardin committed the worst assault on me yet. Knowing I was pregnant this evening he, among other things, pulled back both of his legs and kicked me with the full force of both of his feet in the abdomen, so hard I flew off our bed and into closet doors, knocking them off their tracks. He then grabbed and pulled my hair, not allowing me to leave, took my phone, and then grabbed and pushed me down at the top of stairs as he often did. And then, in his usual unremorseful way, he walked right over me as though nothing had happened. I called the police and, in doing so, he said I crossed the line and he left the house. Over the next three days I miscarried.

And what was the Air Force answer when they learned of this? "He's doing you a favor".

Every Air Force entity on Travis AFB with a duty to hold SMSgt (RET) Cardin accountable failed me. Command never engaged me after learning of the physical abuse, except to ask when I was leaving. They never provided me one resource nor reported the abuse to law enforcement. They sent SMSgt (RET) Cardin on Temporary Duty (TDY), something he loved, instead of to the FAP Offender's course, they ignored my complaint of his financial retaliation on me, they supported his claims - a known offender turning the tables on the victim (as offenders often do) - at the Family Advocacy Program (FAP) Central Registry Board (CRB). This was just the beginning of their failures. Later, Command hesitated on a no contact order (even after other airmen said they believed SMSgt (RET) Cardin was going to show up at a classroom where I was teaching on Travis AFB and hurt me and students), they obstructed the service of court paperwork, they failed to maintain control or accountability of him while was reportedly restricted to the local area over the Summer of 2018 and more.

Not only did Command fail me, but Family Advocacy failed me. On FAP intake, the counselor said "SMSgt (RET) Cardin told me you were pregnant and miscarried." I said "Yes.". Yet, knowing this - and of the strangulation and threats - FAP CRB decided SMSgt (RET) Cardin did nothing wrong and then supported his retaliatory claim that I emotionally abused him (for which

he had no evidence). Air Mobility Command (AMC) IG investigated FAP and the CRB for wrong doing, the only true investigation into any entity, and found 5 of the 6 assertions I made in the IG complaint to be substantiated. But to this day, no decisions or information have been remedied, as far as anyone knows, and SMSgt (RET) Cardin uses the initial CRB results in court against me. It's no wonder that he laughs and smiles in court, has no remorse, continues to lie and blames others – the Air Force has fueled him and taught him well.

When I filed an Inspector General (IG) complaint with the Travis AFB IG office initially regarding FAP and CRB failures, the IG dismissed my claims of wrong doing. That IG office is led by the same person, the Vice Wing Commander, that leads the FAP CRB. Why would he sign off on anything that admitted to his own failures? The conflict of interest at Travis AFB is immense. When I later said to a Non-Commissioned Officer who had worked at the Travis AFB IG office the year prior that “Everyone is in bed together.”, he responded “Hell yes they are.” I would see this lack of impartiality and protection of self at all costs (to others) again and again at Travis AFB, Scott AFB and the Pentagon.

Neither Command nor Family Advocacy reported the physical abuse to or provided me information on Security Forces or the Office of Special Investigations (OSI). In January 2018, when I did learn, through my own efforts, to report to the two entities, they both swept the miscarriage under the carpet - along with the other violence and his history of deceit and abuse (which, according to the Air Force itself, are national security issues). Even after indicating via email and phone calls with me and other Air Force organizations, that they (Security Force Investigators) were investigating, no investigation took place. No witnesses were contacted, no evidence was collected, nothing.

In April 2018, on hearing Security Forces never conducted an investigation, I contacted the Secretary of the Air Force's (SECAF) office, asked for help from (former) Secretary Heather Wilson and provided evidence of SMSgt (RET) Cardin's history and his abuse on me. Only then did someone at SECAF contact OSI to speak with me. Seven months after SMSgt (RET) Cardin kicked me in the stomach, OSI told me “Everyone has had their hands on your stuff and no one has done anything so we're going to be challenged from the start.” I found that to be the case - OSI never contacted witnesses, missed evidence and more. As with the Legal team at Travis AFB, Travis OSI made promises they didn't keep. For safety, for every reason, I had a right to now, yet I was always last to know. This, after the agent at Travis AFB had brushed aside the miscarriage in January 2018.

In the Spring 2018, I was in touch [again, due to my own efforts to have SMSgt (RET) Cardin held responsible] with the Travis Legal office. A number of Legal personnel sent me in circles, delayed responses, took back several promises, conflicted themselves and couldn't keep track of dates and evidence. I later learned that the Staff Judge Advocate on base was known to not be well versed or effective in dealing with criminal evidence and cases.

At the same time, because the 821st Contingency Response Support Squadron (CRSS) Commander was not holding SMSgt (RET) Cardin responsible and was enabling him further, as the 571st MSAS Commander had, I also asked for help from the higher Command at Joint Base Maguire Dix Lakehurst, NJ. When those requests fell on deaf ears, I directly asked the AMC

Commander, a 3-Star General, and several others at AMC, including Security Forces and Staff Judge Advocate Commanders, for help. They did nothing and would later say that Travis AFB Commanders should make the decision on the SMSgt. These are the same Commanders who had let SMSgt (RET) Cardin go for every act of violence before.

On September 1, 2018, the Air Force honorably retired SMSgt (RET) Cardin - no demotion, no reprimand, no court martial. For anything.

A 2018 Tennessee Air National Guard hand puppet re-enlistment gets a leader demoted and immediately retired. But years of workplace violence and domestic violence are rewarded over several years and ultimately through an honorable retirement. Instead of doing the right thing, Commanders got rid of him and place the burden further on me and the community in which SMSgt (RET) Cardin lives.

Eligible for numerous UCMJ articles over many years, I did not know of the Air Force's decision to not hold him accountable until 3 days after SMSgt (RET) Cardin was discharged from the service. By then, it was too late. And then, it was not until September 12, 2018 that I knew the Air Force had not just retired him on September 1st, but had *honorably* retired him.

An NCO at Travis AFB with whom I am friends - one of many who deserve so much more from the Air Force - provided me email addresses for Air Force Chief of Staff General David Goldfein, Chief Master Sergeant of the Air Force Kaleth Wright and the (former) Secretary of the Air Force Heather Wilson. The Secretary of the Air Force had been aware of SMSgt (RET) Cardin's behavior and Command and other system failures since April 2018. Still, on learning SMSgt (RET) Cardin slipped through the cracks, again, and was rewarded for his behavior, again, I immediately emailed CMSAF Wright, General Goldfein and (former) Secretary Wilson directly, providing evidence of abuse, his history and stating that the Air Force had just let a violent man go with no consequences. I never received a response from any of them. As the Air Force wished, the SMSgt was not its problem anymore.

SMSgt (RET) Cardin took my child. He depleted my mental and emotional health and I temporarily lost the will to live. My business, which had received funding in March 2017, fell apart. And money I did have was spent on getting away from him and court travel to acquire and maintain a protective order. My opportunity at a TV show was squandered by the trauma. My status with my own unit - which had groomed me for big things prior to my life with SMSgt (RET) Cardin - faded away. To this day, my relationship with the Alabama Army National Guard remains strained and uncomfortable, as I have received no support from them and particularly as they have allowed for SMSgt (RET) Cardin to retaliate again and file an IG report on me in which he claims conduct unbecoming, failure to maintain good order and discipline because I was a MAJ/O4, an Officer, while he was a SMSgt/E8, Enlisted, while we were dating and living together.

This is my life today.

While I've struggled, the Air Force has taken the easy road and through enabling and emboldening SMSgt (RET) Cardin since at least 2013 and outright support of him later, further

violated and traumatized me in the process. SECAF found no time to talk to me after SMSgt (RET) Cardin was retired and, in the few minutes the office gave me, specifically stated that, in order to get him relooked, I would have to show all of the Air Force failures. To address this, I then filed multiple Inspector General (IG) complaints including one that focused on Commanders pre-2016, Commanders at Travis AFB and those up through the chain of command at JBMDL, NJ, Scott AFB, IL and the Pentagon [to include those I had reached out to directly for help – Chief Master Sergeant of the Air Force, Kaleth Wright, Air Force Chief of Staff, General David Goldfein, and the (former) Secretary of the Air Force, Secretary Heather Wilson]. In October 2018, SMSgt (RET) Cardin's former Afghanistan Commander, knowing how violent the SMSgt is through personal experience and concerned for my safety, spoke to the Secretary of the Air Force Inspector General (SAFIG), MG Harris, on my behalf. The SAFIG stated then that she knew the system was not perfect. Yet, not long after I filed my Command complaint in February 2019, she rejected it. The OSI complaint was never addressed and the Security Forces complaint was sent to a Travis AFB Commander, where – per many stationed at Travis – conflict of interest is rampant. The Travis AFB Commander, not surprisingly, decided there was no wrong doing on the part of Security Forces.

To this day, you will find no shortage of airmen and others who know SMSgt (RET) Cardin to be violent, retaliatory, unremorseful, and have volunteered to speak honestly about his mishandling, the “most epic failure they’ve seen in the Air Force”, because he is just that dangerous. Then and still.

Now, communities remain at risk and I remain at high risk.

SMSgt (RET) Cardin continues to threaten me, retaliate, and follow me with no consequence while I continue to live in fear and spend time, money and energy to stay safe and get away from him.

He decided to apply to and attend a university with which I am very heavily engaged. The moment his lease was up in California, knowing I was in the Washington D.C. area, he broke federal stalking laws, skipped over 48 other states and the rest of the world to move down the street from me, to the last town in which I lived, with no job here, no clearance, no family here, no friends here. On April 30, 2019, he violated the California restraining order currently on him by appearing within 100 yards of me at an event. He also is now trying to destroy what's left of my military career by filing an Army IG complaint as noted above. I cannot run down the Mt. Vernon trail or even walk to work in peace. He continues to threaten me and I live in fear every day.

The Air Force is ultimately responsible for my losses and allowing SMSgt (RET) Cardin to continue as he has, in my life and anyone else's, for so many years.

It is well known that violent offenders, if not held responsible, will expand their limits, what few they have, as SMSgt (RET) Cardin continues to do. *If he's already comfortable with killing his own child, lying and not taking responsibility, laughing at what he's done and my suffering, and continuing to terrorize me as he follows me from state to state, exactly what does it take for the Air Force to take domestic violence seriously?*

Highlights:

1. I am not a spouse. I am an intimate partner (shared lease/shared bank accounts) and an Army Officer. If the Air Force will do this to me - as an honorable and honest person and Officer – the Air Force do it to everyone and anyone.
2. Prior to my abuse, SMSgt (Ret) Cardin had a long history of violence in the Air Force with no consequences. In fact, the Air Force often actively supported and rewarded him for his behavior. Air Force Commanders and other Air Force entities could have mitigated or completely prevented his violence on me and are responsible for what SMSgt (RET) Cardin did to and took from me.
3. After my abuse, Commanders all the way up to the Secretary of the Air Force knew of his violence. Yet, there were still no consequences and this has enabled and emboldened him to continue threatening me, retaliating against me and following me to this day.

My Goals/Desires:

1. Immediate safety
2. Court martial SMSgt (RET) Erik Cardin
3. Reprimand those with a duty to protect and support service members and victims, investigate, discipline offenders, and properly handle cases of violence:
 - a. Air Force Commanders from SMSgt Cardin's time in service between 2013-2017
 - b. Air Force Commanders/Leaders, Security Force Investigators, Office of Special Investigation, Legal, and Family Advocacy Program from SMSgt Cardin's time in service between 2017-2018
 - c. Army entities who have provided no support to me and a voice for SMSgt (RET) Cardin
4. Change policy, legislation:
 - a. Create an organization focused on violence (workplace, domestic) detached from Air Force Commanders, IG, FAP, Security Forces, OSI, Legal with access, ability, authority to review processes/procedures, investigate system failures, report failures, implement immediate changes (baseline being current legislation with the goal being more meaningful legislation) and receive immediate and timely support from higher.
 - b. Repeal Feres Doctrine: Domestic (and workplace) violence victims who are service members (or former service members) who are placed at risk (of being a victim of a criminal/offender) or are physically harmed and failed through negligence, violations in Air Force policy/instructions, failures to use UCMJ, or mishandling of violent personnel by Commanders, Legal, Law Enforcement, and those Entities such as Family Advocacy should be permitted to file tort suits against the military.
 - c. Create and enforce policy that requires Commanders utilize UCMJ on service members who commit violence
 - d. If victim is service member, he/she should not be penalized by their commands (reprimanded for taking care of themselves physically, emotionally, financially; released from the unit/service; the recipient of bad evaluations, etc.) for speaking up and being a victim

- e. Domestic violence offenders should not be permitted the space/time/attention by a military unit or other organization working in support of the military to retaliate on victims and turn the tables on their victims [by filing complaints (ie: IG), reports (ie: to FAP), requests for no contact orders, etc.]
- f. Violent service members should be immediately restricted and directed to intense, long term counseling
- g. Domestic violence victims should be permitted Special Victims Counsel as Sexual Assault victims are
- h. Where domestic violence is the topic, Family Advocacy Central Registry Board should only be made up of domestic violence experts (not Commanders who took a one day class or others who have done computer based training, for example)
- i. Victims, if service members, should be permitted their own Command representation at a CRB and any benefits also offered to the offender
- j. No Contact orders should be enduring for the life of service (not just one week, one month)
- k. Weapons should be taken from the service member while he or she undergoes investigations by the military or civilian law enforcement, even if there is no standing protective order
- l. Service members should not be permitted to go on Temporary Duty or Terminal Leave while under investigation by civilian or military law enforcement or other entities
- m. There should be significant reprimands for Commanders and military law enforcement personnel who do not follow AFI 1-1 (in the case of the Air Force) or proper procedures and processes in supporting victims and reporting, investigating, managing violent offenders and cases of violence (in the case of all branches).

I sincerely thank you for your time and for caring about domestic violence in the military.

Respectfully,

Leah Olszewski

Leah Olszewski
Arlington, VA

LEAH M. OLSZEWSKI

EXECUTIVE / MANAGEMENT CONSULTING • BUSINESS DEVELOPMENT • BUSINESS ANALYSIS

SUMMARY

Accomplished senior leader with more than 20 years within large and diverse organizations. Breadth of experience in leadership and advisory roles, business operations, and design led project and program management. Additional experience in management consulting, government contracting, military, technology/information systems, education and business development. A natural communicator, effectively liaising at all levels to lead teams toward a common goal. Responsible for human resources management, financial leadership, and management of assets valued over \$40M. Achievements are a result of application of lessons learned analysis and use of industry best practices, successfully managing risk, improving processes, and ensuring compliance.

Open to leadership / consulting role with an organization seeking a passionate, service-minded leader committed to ethical practices, life-long learning, performance excellence, and total customer satisfaction.

AREAS OF EXPERTISE

Executive Consulting
Business Analysis
Intelligence / Fraud
Team Leadership
Entrepreneurship

Management Consulting
Project Management
Training & Development
Finance / Accounting
Product Development

Business Development/Sales
Program Management
Information Technology
Human Resources
Coaching/Mentorship

CAREER HISTORY

SENIOR CONSULTANT, ADVISORY

DELOITTE & TOUCHE, LLP – CRYSTAL CITY, VA

2019 - PRESENT

- Consult on Advisory, Risk and Financial Advisory/Federal Business Risk at DTRA RD-TT Requirements
- Lead and/or support communications, projects, and process and procedural improvement in strategy, integration, prioritization, innovation, budget, tech, requirements related to warfighter and higher-level requirements
- Assess and optimize Deloitte business processes, corporate strategy and development
- Current additional roles: NDIA SO/LIC Board Member (Vice Chair of Symposium), C-uAS Company Outreach Lead, PMP Bootcamp, BunkerLabs Entrepreneurship rep, Deloitte SOF employee rep

CO-FOUNDER

FEMTAC, LLC / ADAPTIV, LLC – FLORIDA

2013 – PRESENT

Small business owner / consultant

- Winner of 5 national start-up/innovation/influencer awards & highlighted in various national media
- Design, develop, and commercialize women's professional field apparel & equipment
- Have built and continue to grow relationships among multiple producers, suppliers, customers in commercial and government design, tech, textile industries
- Structure and lead national cross functional and project teams to increased performance
- Create and implement marketing strategies to educate stakeholders on brand and ensure continuous engagement, increasing a company's followership by 28% every two weeks
- Consult small businesses in Business Development, Project Management, Risk & Systems

SENIOR RECRUITER, K2 – REMOTE

2016 – 2017

Identify and develop relationships with applicants and outside organizations in support of K2 strategic staffing and hiring initiatives

- Collaborated and assisted with business development on intelligence and operations related contract requirements for diverse, qualified candidates and reviewing / assisting in proposal development
- Conducted full life cycle recruiting, ensuring recruiting and HR digital footprint alignment with fair employment, recruiting practices and negotiated salary, benefits
- Enhanced applicant tracking system / metrics to ensure ease of use, access, and compliance
- Assisted in workforce planning and resource management initiatives

"Leah's knowledge and experience is without equal."

RECRUITER, QUIET PROFESSIONALS, LLC – TAMPA, FL (REMOTE) 2015 – 2016
Developed and maintained extensive and effective networks, within professional associations and the community, to ensure a continuous flow of candidates

- Identified and researched new innovative and creative sourcing methods
- Reduced operational risk through understanding and execution of diversity and quality requirements

ASSISTANT DIRECTOR OF TRAINING & EDUCATION / ANALYTICAL MENTOR, BOEING – ELKRIDGE, MD 2009 – 2010
Provided onboarding and TAC program training to 130+ Boeing employees within a 'Train the Trainer' program

- Conducted individual and group training to Law Enforcement and Special Operations clients
- Developed employee metrics and produced status reports for internal / external stakeholders
- Evaluated and provided system feedback to engineers, and developed and revised relevant curriculum

SENIOR INSTRUCTOR / SENIOR INTELLIGENCE ANALYST, SAIC – FORT BRAGG, NC AND IRAQ 2006 – 2007

- Created and implemented technical training programs and metrics for Intelligence and Law Enforcement professionals*
- Advised Army senior stakeholders, with direct responsibility for 200+ Army and government personnel
 - Conducted testing and system development per mission strategy and client requirements
 - Received company-wide recognition for Excellence as Mentor/Instructor, 2007

MILITARY CAREER HISTORY

**SENIOR INTELLIGENCE OFFICER/GROUP S2
 U.S. ARMY ALABAMA NATIONAL GUARD, 20TH SPECIAL FORCES GROUP – BIRMINGHAM, AL 2013 – 2018**

Manage and develop diverse group of Intelligence soldiers, processes, and systems.

- Group senior leader with responsibility for all Intelligence and related HR efforts for over 400 personnel
- Manage and train diverse group of Intelligence officers and soldiers, processes, and technical systems at primary and subordinate locations over 7 states
- Build and lead teams of Special Operations enablers in challenging, time sensitive environments
- Develop, analyze and apply data driven intelligence in support of the Commander's intent
- Evaluate, manage, plan Intelligence resources and ensure S2 Section compliance with Alabama National Guard and Army policies, procedures, budget, and administrative policies
- Review and analyze education and training, programs, and intelligence operations methods and provide recommendations to Staff and subordinates for continuous improvement

INTELLIGENCE OFFICER, JOINT SPECIAL OPERATIONS COMMAND

U.S. ARMY – FORT BRAGG, NC AND AFGHANISTAN 2005 – 2006

- Coordinated with and provided support to partner nations and U.S. intelligence agencies
- Collaborated with JSOC Commander and senior leaders formally or ad hoc on Intelligence personnel, processes, regulations, and system development for predictive analysis

EARLY CAREER POSITIONS

MILITARY INTELLIGENCE & PSYCHOLOGICAL OPERATIONS OFFICER – KNOXVILLE, TN 2010 – 2011
CITP AND BIOMETRICS ANALYST, ATHENA INNOVATIVE SOLUTIONS, INC. – CHARLOTTESVILLE, VA 2005, 2006
MILITARY INTELLIGENCE & PSYOP OFFICER – CHARLOTTE, NC/UPPER MARLBORO, MD 2003 – 2005
TEACHER, SPANISH, RICHMOND PUBLIC SCHOOLS – RICHMOND, VA 2002 – 2004
ADMINISTRATIVE SPECIALIST, ARMY ACTIVE DUTY, ARMY RESERVE – VARIOUS LOCATIONS 1997 – 2003

EDUCATION • CERTIFICATION • PROFESSIONAL DEVELOPMENT

MBA – Troy University 2011
BA, Spanish and International Relations – University of Alabama 1996
PMP, Project Management Professional Certification, PMI 2017
CFE, Certified Fraud Examiner, ACFE 2010

Military Leadership / Training: Intermediate Level Education (ILE) in Progress; U.S. Army Military Intelligence Captain's Career Course; Intelligence Officer's Basic Course; Psychological Operations Qualification Course; Survival Evasion Resistance Escape (SERE) – C; Personnel Recovery Execution, Plans & Operations, Non-conventional Assisted Recovery

Membership: Alabama A Club (Collegiate Athlete/Letterman), Military Officer's Association of America (MOAA), Association of Certified Fraud Examiners (ACFE); Project Management Institute (PMI)

Volunteer: NDIA SO/LIC Board Member/Vice Chair of Symposium; As Executive VP, SE Region for 10-33 Foundation [501(c)(3)]; The Honor Foundation

"Leah is an expert strategist...she is reliable and competent...she has my highest recommendation."

**DISCLOSURE FORM FOR WITNESSES
COMMITTEE ON ARMED SERVICES
U.S. HOUSE OF REPRESENTATIVES**

INSTRUCTION TO WITNESSES: Rule 11, clause 2(g)(5), of the Rules of the U.S. House of Representatives for the 116th Congress requires nongovernmental witnesses appearing before House committees to include in their written statements a curriculum vitae and a disclosure of the amount and source of any federal contracts or grants (including subcontracts and subgrants), or contracts or payments originating with a foreign government, received during the current and two previous calendar years either by the witness or by an entity represented by the witness and related to the subject matter of the hearing. As a matter of committee policy, the House Committee on Armed Services further requires nongovernmental witnesses to disclose whether they are a fiduciary (including, but not limited to, directors, officers, advisors, or resident agents) of any organization or entity that may have an interest in the subject matter of the hearing. Committee policy also requires nongovernmental witnesses to disclose the amount and source of any contracts or grants (including subcontracts and subgrants), or payments originating with any organization or entity, whether public or private, that has a material interest in the subject matter of the hearing, received during the current and two previous calendar years either by the witness or by an entity represented by the witness.

Please note that a copy of these statements, with appropriate redactions to protect the witness's personal privacy (including home address and phone number), will be made publicly available in electronic form not later than one day after the witness's appearance before the committee. Witnesses may list additional grants, contracts, or payments on additional sheets, if necessary. Please complete this form electronically.

Hearing Date: Wednesday, September 18th

Hearing Subject:

Domestic Violence: Survivor Perspectives and Prevention Strategies

Witness name: Leah Olszewski

Position/Title: Survivor & Advocate

Capacity in which appearing: (check one)



Individual



Representative

If appearing in a representative capacity, name of the organization or entity represented:

Federal Contract or Grant Information: If you or the entity you represent before the Committee on Armed Services has contracts (including subcontracts) or grants (including subgrants) with the federal government, received during the current and two previous calendar years and related to the subject matter of the hearing, please provide the following information:

2019

Federal grant/ contract	Federal agency	Dollar value	Subject of contract or grant

2018

Federal grant/ contract	Federal agency	Dollar value	Subject of contract or grant

2017

Federal grant/ contract	Federal agency	Dollar value	Subject of contract or grant

Foreign Government Contract or Payment Information: If you or the entity you represent before the Committee on Armed Services has contracts (including subcontracts or subgrants) or payments originating from a foreign government, received during the current and two previous calendar years and related to the subject matter of the hearing, please provide the following information:

2019

Foreign contract/ payment	Foreign government	Dollar value	Subject of contract or payment

2018

Foreign contract/ payment	Foreign government	Dollar value	Subject of contract or payment

2017

Foreign contract/ payment	Foreign government	Dollar value	Subject of contract or payment

Fiduciary Relationships: If you are a fiduciary of any organization or entity that may have an interest in the subject matter of the hearing, please provide the following information:

Organization or entity	Brief description of the fiduciary relationship

Organization or Entity Contract, Grant or Payment Information: If you or the entity you represent before the Committee on Armed Services has contracts or grants (including subcontracts or subgrants) or payments originating from an organization or entity, whether public or private, that has a material interest in the subject matter of the hearing, received during the current and two previous calendar years, please provide the following information:

2019

Contract/grant/ payment	Entity	Dollar value	Subject of contract, grant or payment

2018

Contract/grant/ payment	Entity	Dollar value	Subject of contract, grant or payment

2017

Contract/grant/ payment	Entity	Dollar value	Subject of contract, grant or payment

ROHINI HUGHES

September 18, 2019

Honorable Members of The Armed Services Subcommittee, Staff, respected Experts, and Witnesses,

As a former citizen of New Delhi, India, and a now a U.S. Citizen and proud Military Air Force Spouse, I humbly and thankfully submit my testimony while being grateful to you for this opportunity to share my story on behalf of countless military families, my mother and my son Jay Hughes who is with me today.

I am a patriotic military spouse who served as a Key Spouse Program Manager for various Air Force units, and I have been a proud stay at home mother for the last 20 years while serving our military, my community, and my family. Major Matthew (Matt) Ernest Hughes is a prior Navy Reservist, a former active duty U.S Air Force JAG Corps officer (AFLOA), and currently has a private practice in Rockville, MD while still serving as an Active Reservist. Maj Hughes has had four tours of deployment.

On December 24, 2014, our world shook and was changed forever when my husband wiped out all our accounts, canceled the credit card and made 'stop payments' on all outstanding checks. He followed these actions with an email to me from overseas, stating erratic and controlling demands with a timeline attached for each demand. These demands clearly defined us as slaves to be objectified and owned; not to be loved, respected or honored. This was his way to retaliate our countless pleas for mercy against his abusive actions and behaviors. Upon reading his email, I realized we had already been subjected to so many demands of coercive control and various forms of abuse; this was later confirmed by several medical professionals. Examples of Maj Hughes' behavior was repeatedly laughing while degrading, tormenting, and enjoying his cruelty towards us. Maj Hughes would twist our young son's nipples while laughing; forcing his thumbs inside an open bleeding wound on while shaking our son's knee; laughing and stating that it did not hurt. He neglected our unsupervised son while being intoxicated for several hours, which traumatized Jay who believed his father was dead. On other abusive occasions, Jay would lock himself in a

ROHINI HUGHES

bathroom in fear for his life. Another instance, Maj Hughes dumped a large box of food on top of our sickly daughter's feverish body. After years of abuse, we sought medical and mental health assistance. When he discovered this, he made us feel guilty and prohibited us from going to hospitals and Doctors even after our daughter's failed suicide attempt. Then, he demanded I pay rent for continued shelter in our home or accept his offer of \$200/month for sex in exchange for shelter. We were forced to perform all of the household duties while he leisurely worked on body-building. He would continuously yell in our faces claiming we were losers, dumb, and lazy; even when I miscarried or was giving birth to our children.

My children and I feared for our safety, and after years of abuse, and now the e-mail with 'slave-like' demands; I told Maj Hughes we could not continue to live this way. We were homeless for 7 weeks without any genuine inquiry or concern from Maj Hughes. Dr. Savithri Veluri, my PCM at Ft. Meyer Army Base, VA advised me to contact the legal office for further assistance. On December 31, 2014, I contacted Mr. Peter Katson at the Pentagon's legal assistance office and began a formal complaint by submitting a letter to Maj Hughes' commander, Col. Thomas Zimmerman [via Col. Heather Lobue and Mr. Peter Katson].

My husband was reported to Child Protective Services in December 2014 for child neglect and abuse by our counselor Mr. James Alexander, formerly at Meier Clinic, Fairfax, VA. He has been reported again since 2015, by Walter Reed National Military Medical Clinic, Joint Base Andrews Family Advocacy Program and Ft Belvoir Adolescent Inpatient Unit.

In January 2015, upon a recommendation from Mr. Peter Katson, I involved CDR Russell Carr, MD, Chief of Psychiatry at Walter Reed National Military Medical Center for further assistance with my husband's abusive, erratic, abusive behaviors, and escalation of Matt's aggression. Dr. Carr assumed he may be suffering from PTSD or a mental disorder. I was discouraged by AFLOA leadership from reporting the abuse to FAP, as I was repeatedly reminded it would permanently ruin my husband's career. Due to the fear of further retaliation and abuse while still trying to salvage my marriage, I chose not to report the abuse. In March of 2015, at my first session with my Psychologist at Walter Reed National FAP failed to follow protocol while interviewing our children. Since FAP had a professional relationship with Maj Hughes, I was interrogated and harassed by the

ROHINI HUGHES

very agency that was established to assist and protect my family. They interrogated me and blamed me.

In March 2015, Maj. Pamela Blueford, at the Joint Base Andrews' Family Advocacy (FAP) began reviewing the complaint submitted by Dr. Comilang and treated me with hostility during an interrogation in front of Ms. Mary Young, the victim advocate at FAP. She questioned my intentions and motives for seeking mental health assistance while repeatedly telling me these types of allegations could negatively affect my husband's career in the U.S. Air Force. Maj Hughes' deputy in AFLOA told me my marriage would likely be headed towards divorce while stating that this was a civil matter, disregarding the reported evidence of abuse. Additionally, she stated that as long as my husband was paying the rent, even though we chose not to return to our home in fear, he was providing adequate support.

In July 2015, Maj Hughes separated from active duty in the Air Force to go to the Reserves. Maj Hughes eventually moved out of our home while only paying the rent until July 2015, when as retaliation, he utilized his separation order to terminate our lease prematurely under the provisions of the Servicemember's Civil Relief Act (SCRA) forcing my family into homelessness for almost 2 years.

In October 2015, the new FAP officer at Joint Base Andrews admitted in an email that FAP had failed to abide by one part of the process, which was requesting to interview the children.

There were many other documented events of abuse, none of which supposedly met the Joint Base Andrews FAP's abuse criteria. However, it met DOD's abuse criteria by 100%. We needed desperate and urgent assistance and I begged his AFLOA Command at Joint Base Andrews to order him a mental health evaluation, however I was told they could not do this unless he was expressing concerning behavior at his workplace, had a DUI, or an arrest. After each abusive episode, Maj Hughes would drink, deny his abusive actions and behavior, words, and events, grin, and laugh. This forced us to begin documenting series of abusive events. We learned new terms, such as narcissism, sociopath, gaslighting, and coercive control from our therapists concerning Maj Hughes.

ROHINI HUGHES

After several months of being ignored by my husband's command, interrogated, and treated unprofessionally by the Family Advocacy officer, Maj Pamela Blueford, I filed a formal complaint to the Inspector General at Joint Base Andrews. I was informed by Ms. Mary Young this unprofessional behavior and aggression was a normal occurrence in the FAP office toward victims.

Later, I received a telephone call saying the Central Board Registry did not find the submitted report and that the evidence of abuse did not meet the Military's emotional abuse criteria. I repeatedly requested this finding in writing so I could submit an appeal. My request was never complied with, and they have stalled my requests since 2015.

Finally, I received the Military's abuse criteria through an IG inquiry and submitted my appeal to Joint Base Andrews' Medical Group Commander only to be further ignored and silenced. I requested my case be transferred to another military installation for a reconsideration as it was apparent there was a conflict of interest. In my appeal, I was able to clearly identify the facts of abuse and directly correlate each event to the Military's abuse criteria. There is clear evidence of abuse in all the documents submitted to FAP: over 150 emails, and letters from two mental health professionals confirming the abuse with their diagnosis. I submitted my appeal numerous times to FAP, only to be informed by Maj Hughes' previous Commander LtCol Jeffrey Green at Hurlburt Field that the Statute of Limitations had expired. Then, he stated this was now a civil matter and the Air Force could not step in for any further assistance. Later, I discovered that our case had never been opened in 2015; there was no case number assigned to any of the documents. Clearly, Maj Hughes' professional interactions with Family Advocacy impaired my family's ability to receive a fair hearing.

If abusers are not interrogated and the victims are made to feel like criminals, what is the point in bringing any issues or complaints to the Command, FAP, or Inspector General's attention?

I submitted numerous emails and letters with extensive documented evidence of abuse since December 31, 2014 to Maj Hughes' Commanders, and IGs. I discovered in 2018 that Maj Pamela Blueford never opened the cases of abuse and the CRB never heard our cases of abuse. The only case opened in 2015 entailed the 'adequate support' issue. Maj Hughes' Commanders concluded that

ROHINI HUGHES

even though he was residing in the house and paying the rent, he would not be mandated to provide any funds for food, lodging or children's needs.

Our cases of abuse were finally heard in January 2019 through an intervention from Ms. Pamela Collins at Lakeland AFB, who informed me that the original cases of abuse had never been opened. Once again, CRB concluded our case did not meet the emotional maltreatment criteria of the Air Force. My son, Jay Hughes was finally interviewed and FAP reported the abuse to OSI and CPS, as they also showed concern for his suicidal and homicidal tendencies as a result of the abuse and control from Maj Hughes. Jay Hughes also submitted a voicemail from 2014 as evidence only to be told that it did not meet abuse criteria either. As a young 16 yr old teenager, he has lost faith in our justice and military system as he watches his abusive father be enabled and empowered by our military and civil courts.

Since 2015, I have been forced into Pro Se litigation as I have been unable to afford legal representation and rejected by pro bono legal agencies. I have advocated for myself and my son in Fairfax County Juvenile and Circuit Courts.

While having to fight the Family Advocacy Program, I also had to deal with civil matters for the survival of my children and me. Since Maj Hughes was a JAG officer, he understood and exploited the SCRA by using it to stonewall discovery requests, and his appearances in Fairfax County courts. Additionally, he would deliberately file motions simultaneously in 2 courts on different floors, and he failed to comply with court orders to provide his military orders and physical address for service of process.

A former JAG officer heard our civil case in Fairfax County Circuit Court which further re victimized us through his bias. Though our son has been diagnosed as suicidal due to the abuse he experienced from Matt, the Judge ordered him to have forced visitations with his abusive father. The Judge reduced our monthly support which has forced us to apply for state welfare, borrow funds, receive church's financial assistance, and has ordered me to pay close to \$30K in one year to Maj Hughes for legal fees. The former JAG officer Judge decided since FAP and CPS did not conclude Maj Hughes abused his family, all the evidence and mention of abuse was thrown out. The Judge further informed me I will face consequences for contacting Congressman Gerry Connolly

ROHINI HUGHES

and Virginia Attorney General's office for an investigation into the abuse and collusion at Joint Base Andrews. He did not hold Maj Hughes accountable for lying under oath as Matt stated he financially supported us during the 7 months of abandonment, even though I had evidence that this was untrue. We were even denied a protective order due to Maj Hughes status as a JAG officer. Fortunately, we were approved to keep our physical address confidential under the Domestic Abuse Address Confidentiality program which Maj Hughes is currently attempting to revoke through Fairfax County Circuit Court as he continues to stalk us, threaten us with his appearances, and has a history of appearing at our door step at odd hours just to intimidate us by proving that he still controls us.

I am bringing all this to your attention because other military spouses and children are facing identical or similar challenges and trials. My children and I are willing to share our story to assist other military families who are struggling to survive as we have no advocate. I discovered the federally regulated Domestic Violence hotlines are referring the Military Spouses who are victims of Domestic Violence back to their spouses' Military installation and FAP; they too are being further silenced, shunned, and crippled through collusion.

The SCRA is commonly exploited by irresponsible servicemembers who use the very law designed to protect military members to abuse and destroy their families. This must stop and this Federal law must be amended; the local Judicial system needs to be educated on Domestic Violence and Military laws and provide protection for their military families.

The military family is expected to make sacrifices, support, and serve our country by supporting the military member, they must not be abandoned in their hour of greatest need. The military system clearly does not ensure adequate support for our families and it fails to protect them. This is a black eye on our U.S Military. It is the invisible scars that will forever haunt me and my children, through the failed suicide attempt from my daughter and my son's suicidal ideations and his fears of repeating the abuse to others because of what his father did to him, while Maj Hughes prohibits him from seeking medical and mental health assistance. We can no longer trust anyone but the few that have assisted us, we fear Maj Hughes harming us, I fear losing my son to suicide, as Maj Hughes has eliminated all of his Therapists to keep him from speaking about the abuse. This is not about

ROHINI HUGHES

the financial abuse, although it has been scary not to be able to put a roof over my children's head. What I care about most is that I could not get the assistance that my children desperately needed in order to protect their innocent and precious bodies, hearts and mind from being abused by their father in the most vile of ways because our military/FAP and civilian courts cared more about protecting his good name and status than the innocence of my children.

Unfortunately, my story is not an isolated set of event. Many military spouses experience similar abuse, desertion, and abandonment but are afraid to come forward and fight. The few military spouses that do come forward are discouraged, insulted and further ignored by the chain of command for bringing the abuse to military's attention. As military spouses, this is *NOT* what we signed up for as our spouse signs up to serve our nation. The spouses and children serve next to the military service member during frequent moves, deployments, temporary duty and remote assignments. Inadequate financial support for the family, bias decisions by the service member's commander in regards to abuse, fraudulent use of housing and food allowance, misuse of the SCRA, and ignoring mental health concerns as consequences of deployments are few of the many issues that our military families endure.

I strongly believe this case should never have been heard at Joint Base Andrews due to a conflict of interest and personal biases from the CRB's Committee Members who had a close working relationship with Major Hughes. This preexisting relationship gives the appearance of collusion to protect a Chief of Military Justice. This bias directly contributed to the reasons why an official investigation was never initiated, and all the abuse cases reported by Walter Reed National Military Medical Clinic were left unopened, not investigated, and failed to be submitted to the Central Registry Board (CRB). A civilian Judge used the findings, or lack of findings, of the military to determine the outcome of our civil case. Obviously, actions of the military are far reaching. The results are that I, with only a High School education and no work experience, have been ordered to pay thousands of dollars to Matt Hughes who has a Legal Degree and is a lawyer with great potential for a nice annual income while my son and I have nothing. My family received no justice because the military did not do their due diligence.

This is a *silent* epidemic and it needs to be fixed immediately. The Military Spouses and Children humbly request each one the Committee members to take a hard and close look at the impediments and gaps identified through my

ROHINI HUGHES

testimony and consider working with my new Advocacy team in resolving these issues to strengthen the Military families in hopes of saving their life and future. Thank you for your time and consideration.

Respectfully Submitted,

//signed//

Rohini Hughes

Rohini Hughes

Rohini Hughes is a successful management/leadership professional with an extensive cross-functional background and a reputation for meeting and exceeding challenging and rigorous organizational goals and objectives. Specific experience includes project management, marketing, and banking as well as volunteer work in the community. Ms. Hughes extensive experience with client focused marketing includes identifying the unique needs for high level clients and meeting those need with superior results. Additionally, Ms. Hughes has actively and passionately served her family, the military and the community for the past 18 years. She had the privilege and honor to work closely with high level base leadership as she served as the lead manager for numerous U.S. Air Force Key Spouse Programs. In this capacity she served as a liaison between military leaders and families of deployed military personnel.

Ms. Hughes' work was recognized and awarded as the Civilian Volunteer of the Quarter by 28th Bomb Wing for Excellence in kick-starting the "Key Spouse" program by U. S. Air Force, Ellsworth AFB. She was also recognized and awarded for outstanding leadership and pioneering skills by the Air Force Material Command, Logistic Center Command and The Family Support Center by U. S. Air Force, Hill AFB.

**DISCLOSURE FORM FOR WITNESSES
COMMITTEE ON ARMED SERVICES
U.S. HOUSE OF REPRESENTATIVES**

INSTRUCTION TO WITNESSES: Rule 11, clause 2(g)(5), of the Rules of the U.S. House of Representatives for the 116th Congress requires nongovernmental witnesses appearing before House committees to include in their written statements a curriculum vitae and a disclosure of the amount and source of any federal contracts or grants (including subcontracts and subgrants), or contracts or payments originating with a foreign government, received during the current and two previous calendar years either by the witness or by an entity represented by the witness and related to the subject matter of the hearing. As a matter of committee policy, the House Committee on Armed Services further requires nongovernmental witnesses to disclose whether they are a fiduciary (including, but not limited to, directors, officers, advisors, or resident agents) of any organization or entity that may have an interest in the subject matter of the hearing. Committee policy also requires nongovernmental witnesses to disclose the amount and source of any contracts or grants (including subcontracts and subgrants), or payments originating with any organization or entity, whether public or private, that has a material interest in the subject matter of the hearing, received during the current and two previous calendar years either by the witness or by an entity represented by the witness.

Please note that a copy of these statements, with appropriate redactions to protect the witness's personal privacy (including home address and phone number), will be made publicly available in electronic form not later than one day after the witness's appearance before the committee. Witnesses may list additional grants, contracts, or payments on additional sheets, if necessary. Please complete this form electronically.

Hearing Date: Wednesday, September 18th

Hearing Subject:

Domestic Violence: Survivor Perspectives and Prevention Strategies

Witness name: ROHINI K. HUGHES

Position/Title: CO-FOUNDER & VICE PRESIDENT

Capacity in which appearing: (check one)



Individual



Representative

If appearing in a representative capacity, name of the organization or entity represented:

National Military Family Advocacy Organization-NMFAO
National Military Spouse Advocacy Organization-NMSAO

Federal Contract or Grant Information: If you or the entity you represent before the Committee on Armed Services has contracts (including subcontracts) or grants (including subgrants) with the federal government, received during the current and two previous calendar years and related to the subject matter of the hearing, please provide the following information:

2019

Federal grant/ contract	Federal agency	Dollar value	Subject of contract or grant

2018

Federal grant/ contract	Federal agency	Dollar value	Subject of contract or grant

2017

Federal grant/ contract	Federal agency	Dollar value	Subject of contract or grant

Foreign Government Contract or Payment Information: If you or the entity you represent before the Committee on Armed Services has contracts (including subcontracts or subgrants) or payments originating from a foreign government, received during the current and two previous calendar years and related to the subject matter of the hearing, please provide the following information:

2019

Foreign contract/ payment	Foreign government	Dollar value	Subject of contract or payment

2018

Foreign contract/ payment	Foreign government	Dollar value	Subject of contract or payment

2017

Foreign contract/ payment	Foreign government	Dollar value	Subject of contract or payment

Fiduciary Relationships: If you are a fiduciary of any organization or entity that may have an interest in the subject matter of the hearing, please provide the following information:

Organization or entity	Brief description of the fiduciary relationship
National Military Family Advocacy Organization-NMFAO	Chairperson of 501(c3) geared toward spouses, children, family assistance who are domestic abuse, violence, neglect, abandonment victims.
National Military Spouse Advocacy Organization-NMSAO	Fiduciary duty is to represent the organizations interest and fulfillment of the mission.

Organization or Entity Contract, Grant or Payment Information: If you or the entity you represent before the Committee on Armed Services has contracts or grants (including subcontracts or subgrants) or payments originating from an organization or entity, whether public or private, that has a material interest in the subject matter of the hearing, received during the current and two previous calendar years, please provide the following information:

2019

Contract/grant/ payment	Entity	Dollar value	Subject of contract, grant or payment

2018

Contract/grant/ payment	Entity	Dollar value	Subject of contract, grant or payment

2017

Contract/grant/ payment	Entity	Dollar value	Subject of contract, grant or payment

**Testimony for the House Committee on Armed Services
Subcommittee on Military Personnel
United States House of Representatives
Arlene Vassell, Vice President of Programs, Prevention, and Social Change (NRCDV)**

**Regarding the Hearing “Shattered Families, Shattered Service: Taking Military Domestic
Violence Out of the Shadows.”
September 18, 2019**

Chairwoman Speier, Ranking Member Kelly, and distinguished members of the Committee, thank you for this opportunity to provide testimony on the importance of prevention. I sincerely thank the Committee for its support for holding a hearing to discuss lifesaving prevention practices and strategies. I am the Vice President of Programs, Prevention, and Social change at the National Resource Center on Domestic Violence (NRCDV). Our mission is to strengthen and transform efforts to end domestic violence. Since its inception in 1993, NRCDV has played a key role in promoting collaborative learning and resource development. NRCDV utilizes four key strategies to advance domestic violence intervention and prevention – *public awareness and resource development; technical assistance (TA) and training; public policy and systems engagement; and research and evaluation*. Collaboration, coordination of effort, and accountability to the field are essential elements of all NRCDV’s activities, as is centering survivors’ experiences and promoting trauma-informed, culturally responsive and accessible responses.

NRCDV’s overarching goals and objectives are to:

- Strengthen the capacity of domestic violence programs, allied professionals, and individuals and organizations serving survivors and their children to promote and advance comprehensive services that are trauma-informed, survivor-defined, empowering, and culturally responsive.
- Promote public policy, institutional responses, and research that enhance the safety and well-being of survivors and advance gender, social, racial, and economic justice.
- Enhance the capacity of social change agents to support the development of healthy systems, communities, families, and individuals through community-led, collaborative multi-sector and cross-movement approaches to prevent gender-based violence.

The purpose of this testimony is to share the impact of domestic violence across the nation, share that prevention is possible, share critical prevention resources, and share strategies for prevention that could be implemented by the military. These strategies can help prevent domestic violence before it happens, benefiting not only the military, but all our communities across the country.

The impact of domestic violence is significant

Research confirms that domestic violence negatively impacts every community in the United States, affecting one in three women and one in four men, with profound and enduring health, economic and other consequences across the lifespan.¹ Studies focusing on children’s exposure

¹ Breiding, M.J., Chen J., & Black, M.C. (2014). Intimate Partner Violence in the United States- 2010. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

to violence find that one in five children witnesses parental assault, leading to increased risk of experiencing or perpetrating domestic violence as adults and underscoring the need and opportunity for early intervention,² including promoting protective factors within the family and community that help develop resiliency among children and teens. The American Journal of Preventive Medicine recently published the staggering costs of this violence in *Lifetime Economic Burden of Intimate Partner Violence Among U.S. Adults*, which found “estimated lifetime costs of \$103,767 per female victim and \$23,414 per male victim or a population economic burden of nearly \$3.6 trillion (2014 US\$) over victims’ lifetimes, based on 43 million U.S. adults with victimization history.”³

Preventing domestic violence is possible

The public health approach provides a vision of success for the primary prevention of sexual violence and intimate partner violence. “Violence can be prevented, and its impact reduced, in the same way that public health efforts have prevented and reduced pregnancy-related complications, workplace injuries, infectious diseases, and illness resulting from contaminated food and water in many parts of the world. The factors that contribute to [violence]...can be changed.”⁴ Sexual violence and intimate partner violence are perhaps more complicated than other public health issues because of the intentionality of harm and social stigmas associated with their occurrence. But just as public health’s systematic approaches have helped mitigate a range of threats to our wellbeing once thought to be completely intractable, they can also assist us in significantly reducing the prevalence of sexual violence and intimate partner violence.⁵ Primary prevention of Intimate Partner Violence (IPV), including Teen Dating Violence (TDV), means preventing IPV before it begins. The negative consequences associated with IPV underscore the importance of stopping it before it occurs. Primary prevention strategies are key to ending partner violence in adolescence and adulthood and protecting people from its effect.⁶ Primary prevention efforts impact modifiable factors associated with IPV such as reducing acceptance of violence, challenging social norms, practices and policies that support or reinforce gender-based violence.

CDC’s National Center on Injury Prevention and Control has documented effective strategies and approaches in its *Preventing Intimate Partner Violence Across the Lifespan: A Technical Package of Programs, Policies, and Practices* (2017). This comprehensive technical package shared evidence-based practices ranging from teaching healthy relationship skills, to creating protective environments, to strengthening economic support. A recent Blue Shield of California report, *Breaking the Cycle: A life course framework for preventing domestic violence* (2019) also

² Hamby, S., Finkelhor, D., Turner, H., & Ormrod, R. (2011) “Children’s exposure to intimate partner violence and other family violence” U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention, National Survey of Children’s Exposure to Violence Series, Bulletin.

³ Lifetime Economic Burden of Intimate Partner Violence Among U.S. Adults, Peterson, Cora et al. American Journal of Preventive Medicine, Volume 55, Issue 4, 433-444

⁴ Dahlberg, L., and Krug, E. (2002). Violence. A global public health problem. In E. Krug, L. Dahlberg, J. Mercy, A. B. Zwi, and R. Lozano (eds.), *World Report on Violence and Health*. Geneva: World Health Organization, pp. 1-21.

⁵ Guidelines for the Primary Prevention of Sexual Violence & Intimate Partner Violence. Virginia Sexual and Domestic Violence Action Alliance, 2007.

⁶ Nolon, P.H., Kearns, M., Dills, J., Rambo, K., Irving, S., Armstead, T., Gilbert, L. (2017). *Preventing Intimate Partner Violence Across the Lifespan: A Technical Package of Programs, Policies, and Practices*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

provides further guidance to the field on how to invest prevention resources wisely and with greatest impact.

Preventing Multiple Forms of Violence

The different forms of violence—child abuse and neglect, youth violence, intimate partner violence, sexual violence, elder abuse, and suicidal behavior—are strongly connected to each other in many important ways. Understanding and addressing the interconnections among these forms of violence is the central tenet of a 5-year vision to prevent violence developed by the Division of Violence Prevention (DVP).

Violence prevention efforts have historically centered on particular forms of violence. The seminal work of Dr. C. Henry Kempe in the early 1960s exposed the realities of child abuse and neglect. His work helped to launch, and shape decades of prevention, treatment, advocacy, and education geared toward protecting children. Explicit recognition of other forms of violence, such as intimate partner and sexual violence against women, gained widespread attention in the late 1960s and 1970s as the Women’s Movement drew attention to these problems and the need for services, care, and prevention. As suicide and homicide rose in the ranks as leading causes of death in the 1980s (particularly among youth and young adults), concerns about these problems also led to numerous calls for effective solutions. Several decades of research, prevention, and services have revealed a lot about the different forms of violence and how to prevent and respond to them. One fact clearly emerging from this body of work is that the different forms of violence are strongly interconnected.

Previous research indicates:

- **Those who are victims of one form of violence are likely to experience other forms of violence.** There is evidence to suggest that experiencing one type of victimization can lead to a doubling or tripling of the risk for another type of victimization.
- **Those who have been violent in one context are likely to be violent in another context.** Youth who are violent toward peers, for example, are also more likely to be violent toward their dating partners. Adults who are violent toward their partners are also more likely to abuse their children.
- **The different forms of violence share common consequences.** Beyond physical injuries and deaths these include a broad range of mental, emotional and physical health, and social problems that have effects across the lifespan. Exposure to violence increases the risk of depression, post-traumatic stress disorder (PTSD), anxiety, sleep and eating disorders, and suicide and suicide attempts. There is also a strong association between violence and infectious diseases, especially HIV and other sexually transmitted infections. Multiple studies also document a number of reproductive consequences from exposure to violence, including unintended pregnancy and teen pregnancy, as well as associated risk behaviors, such as multiple partners and early initiation of sexual activity. Many of the leading causes of death—such as cancer, cardiovascular disease, lung disease, and diabetes—are linked to experiences of violence through the adoption of harmful alcohol use, tobacco use, and physical inactivity, and impacts on the brain, cardiovascular, immune and other biological systems. Beyond the chronic health effects, serious psychosocial effects of childhood

violence are observed decades later, including severe problems with finances, family, jobs, anger, and stress.

- **The evidence also clearly shows that the different forms of violence share common risk and protective factors.** These factors can start in early childhood and continue across the lifespan. Many of the behavioral factors associated with perpetrating violence are evident well before 10 years of age, with signs of early physical aggression being one of the strongest predictors for later involvement in violent behavior, including violence against intimate partners. Early onset of sexual aggression is also one of the strongest predictors of subsequent sexual violence perpetration. Those who have been exposed to violence in the home are at increased risk for several forms of violence. Growing up and living in impoverished environments with limited social, educational, and economic opportunities and confronting the daily stresses of violence, racism, and instability at home or in the community also increases the risk of multiple forms of violence. Societal influences such as norms about violence, gender, and race/ethnicity, which are often rooted in customs, institutional practices and policies, impact health and opportunities and are associated with risk for multiple forms of violence. Connectedness, on the other hand, is protective across multiple forms of violence. Those who have stable connections to caring adults, affiliations with pro-social peers, and a strong connection to school and community are at lower risk for violence.⁷

NRCDV's Strategic Focus

Facilitate the identification, implementation, and scaling up of approaches that have cross-cutting impact

There are also a number of policy-oriented approaches that have the potential to impact multiple forms of violence by addressing gender, racial, and socioeconomic inequalities, social and cultural norms, and other community and societal risks (e.g., economic supports for children and families, economic empowerment and development schemes, urban upgrading, equal pay and other employment-based policies to improve opportunities and economic stability for women). Prioritizing the implementation and adoption of these approaches is critical to reducing the risks that are common across multiple forms of violence.⁸

Promote a community of practice around cross-cutting prevention efforts

Collaboration is one of the cornerstones of public health. Identifying ways to efficiently and effectively exchange information and facilitate learning is essential to maximizing the impact of our efforts. To prevent multiple forms of violence, we need to create opportunities for violence prevention practitioners to develop relationships and learn from one another in a more effective, systematic way. A community of practice is one approach to providing a context for relationship-building and to share critical information. With regular exchange of information among partners working on the different forms of violence, we gain: 1) a broader range of expertise and a more extensive network of professionals; 2) additional opportunities for sharing data and using data for action; 3) expanded knowledge of other resources and networks; and 4) increased options for

⁷ *Preventing Multiple Forms of Violence: A Strategic Vision for Connecting the Dots.* Atlanta, GA: Division of Violence Prevention, National Center for Injury Prevention and Control, Center for Disease Control and Prevention, 2016.

⁸ *Id.*

the field to more quickly learn about innovations, which could increase uptake and maximize impact.⁹

PreventIPV tools for social change: *A unified national voice.* NRCDV provides leadership and support to the Intimate Partner Violence (IPV) Prevention Council Steering Committee, comprised of diverse consultants, to advance a national prevention agenda. The IPV Prevention Council represents a unified national effort committed to enhancing the capacity of state/territory domestic violence coalitions and community-based domestic violence programs to advance a comprehensive national prevention agenda and broaden support for its full implementation at the national, state, territory and local levels.

NRCDV's Domestic Violence Awareness Project (DVAP) is committed to promoting efforts to shift the cultural rules, norms and constructs that support gender-based violence and support the health and well-being of individuals, families, communities and institutions. The DVAP Advisory Board is a diverse and unique partnership of national, state, and local organizations, as well as individual advocates. The DVAP collaborates to collect, develop and distribute resources and ideas relevant to advocates' *ongoing public and prevention awareness and education efforts*, not only in preparation for Domestic Violence Awareness Month (observed annually in the U.S. in October) but also throughout the year.

Integration of awareness and prevention: NRCDV embraces the idea that Awareness + Action = Social Change.

- **Awareness:** Raising awareness involves efforts to increase knowledge or reshape cultural norms or false perceptions about gender-based violence. This includes educating ourselves and those in our communities about healthy relationships, the dynamics of abuse, and the root causes of gender-based violence.
- **Action:** Preventing gender-based violence involves proactive efforts to stop violence and abuse from happening in the first place by interrupting the cultural rules, norms, and constructs that support it. These strategies are implemented to shift attitudes, beliefs, behaviors, environments and policies to positively impact the health and well-being of individuals, families, communities, and institutions.
- **Social Change:** When equipped with a heightened level of awareness and an understanding of the concrete actions necessary to get there, social change can occur. This transformation becomes possible when individuals, families, communities, and institutions have access to both knowledge and tools.

Recommendations for the Military:

- Develop and implement a comprehensive IPV response and prevention plan.
- Create and foster a culture of equity, dignity and respect.
- Create policies and practices that support survivors and hold perpetrators accountable, so that all service members know that IPV is not acceptable and will not be tolerated.

⁹ *Id.*

- Develop and maintain collaborative relationships with community-based preventionist, social justice organizations, local domestic violence agencies and state coalitions
- Increase awareness and knowledge about the prevalence of IPV and the impact on individuals, families, communities and society.
- Equip all service members with tools to recognize warning signs and encourage safe and effective bystander interventions to reduce or prevent violence and assault.

Below are resources and tools compiled by NRC DV to support prevention strategies and approaches, to engage influential adults and peers, outlined in [Preventing Intimate Partner Violence Across the Lifespan: A Technical Package of Programs, Policies, and Practices](#) (CDC, 2017).

Bystander empowerment and education

- Prevention Tool: [Where do you stand?](#) (Men Can Stop Rape)
- Prevention Tool: [Hasta Aqui No Mas/Draw the Line](#) (Mujer)
- Prevention Tool: [See the Signs & Speak Out](#) (Avon Foundation for Women)

Men and boys as allies in prevention

- Special Collection: [Men and Boys: Preventing Sexual and Intimate Partner Violence](#)
- Prevention Tool: [Current Practices and Challenges with Engaging Men on Campus](#) (Men Can Stop Rape)
- Prevention Tool: [White Ribbon Campaign](#)
- Prevention Tool: [Coaching Boys Into Men](#) (Futures Without Violence)
- Prevention Tool: [Te Invito](#) (National Latin@ Network for Healthy Families and Communities)

Additional Resource

Violence Education Tools Online (VetoViolence)

<http://vetoviolence.cdc.gov>

Thank you for your support and interest in prevention efforts, strategies, and evidence-based practices. An investment to stop intimate partner and sexual violence before they occur will protect and promote the well-being and development of individuals, families and societies.¹⁰ Preventing violence means changing our society and its institutions-eliminating attitudes, beliefs, behaviors, environments and policies that contribute to violence and promoting those that create thriving communities for individuals to live, play, work and worship.

¹⁰ World Health Organization/London School of Hygiene and Tropical Medicine. (2010) *Preventing intimate partner and sexual violence against women: taking action and generating evidence*. Geneva: World Health Organization.

ARLENE VASSELL, Vice President of Programs, Prevention & Social Change
National Resource Center on Domestic Violence
1012 14th Street, NW, Suite 209, Washington DC 20005

PROFESSIONAL SUMMARY:

- More than 20 years of non-profit management experience, primarily working for those impacted by domestic violence, sexual assault, stalking, homelessness, substance use, poverty and other life altering situations
- Recognized social change agent and advocate in the domestic violence movement;
- Significant experience developing, implementing and managing federally-funded projects and initiatives funded by The Center for Disease Control and Prevention (CDC), U.S. Department of Justice, Office on Violence Against Women (OVW), and the U.S. Department of Health and Human Services, Family Violence Prevention and Services Program;
- Over 10 years of experience developing and implementing state and national prevention initiatives;
- Proven history of conducting comprehensive training and technical assistance on domestic violence, sexual assault, stalking, homelessness, poverty and complex issues interconnected to domestic violence and sexual assault to local domestic violence programs, community-based organizations, social service organizations, government agencies, and the general public;
- Over 20 years of experience developing culturally relevant resources, innovative trainings and effective technical assistance strategies for domestic violence programs, social services organizations, community-based organizations and government agencies with the goal of strengthening community response and enhancing services for individuals that have experienced trauma;
- Notable experience in the areas of program development, program evaluation, budget management, policy development, grants management and strategic planning;
- Successful history of supervising multiple staff, volunteers and interns;
- Excellent interpersonal skills and strong diplomacy and negotiations skills;
- Outstanding speaking, communication and facilitation skills, excellent critical thinking skills.

PROFESSIONAL EXPERIENCE:

National Resource Center on Domestic Violence

2015-Present

- Supervises NRCDV's Programs & Prevention and Communications Teams and oversees several key initiatives, including the Domestic Violence Awareness Project and PreventItPV, working collaboratively with Advisors, partners and consultants to collect, develop and distribute resources and ideas relevant to ongoing public and prevention awareness and education efforts.
- Manage the provision of high quality information and referral, technical assistance, and training and training support to domestic violence programs, state coalitions, federal, state, tribal and local governmental agencies, representatives of the media, researchers, students, professionals, and members of the general public on the full range of domestic violence intervention and prevention issues.
- Provide overall leadership and oversight to creation and implementation of NRCDV's Communications Plan, with a particular focus on its online communication.
- Provide national leadership on prevention, integrated gender and racial justice advocacy and organizing, including working collaboratively with Advisors, partners and constituents to strengthen alliances with public health professionals and other social justice movements.
- Work in collaboration with the Family Violence Prevention Services Act Program to raise awareness of domestic violence and promote ongoing education of the intersection of issues and best practices related to intervention and prevention efforts throughout the Federal government and to the broader domestic violence services network across the U.S.
- Work in close coordination with the Senior Leadership Team to promote coordinated, consistent management practices within NRCDV and to develop and implement a thoroughly integrated approach to achieving the NRCDV's goals and objectives.

Florida Coalition Against Domestic Violence (FCADV)**2012-2015***Director of Training and Technical Assistance 2014-2015*

- Responsible for the successful execution of state and federal grant programs. Oversaw all activities of Florida's Primary Prevention Initiative and the Domestic Violence Prevention Enhancement and Leadership Through Alliances Focusing on Outcomes for Communities United with States (DELTA FOCUS) project.
- Developed and provided comprehensive training, technical assistance and consultation to domestic violence programs, government agencies, social services organizations and the general public.
- Established and maintained relationships on a local, state and national level with key individuals and agencies that address issues related to the unique needs of survivors of domestic violence, sexual assault, stalking, and their children. Served as a resource for FCADV regional committees, leadership teams, management team and an effective collaborator on special projects and events.
- Organized FCADV's Annual Biennial Training Institute with a focus on trauma informed services for survivors and their children.

Traumatic Brain Injury and Domestic Violence Project Coordinator 2012-2014

- Managed the planning and implementation of the Peace of Mind Florida (POM FL) Project aimed at improving services for survivors of domestic violence living with disabilities as a result of a traumatic brain injury.
- Provided leadership and support for all interdisciplinary team activities, including arranging and facilitating collaborative team meetings. Liaison between all collaborative partners.
- Developed policies and procedures related to creating a safe, welcoming and accessible environment for staff and individuals who access training and technical assistance from collaborative partners.
- Provided training on topics related to the intersection of domestic violence and traumatic brain injury, how to engage community partners in a meaningful way and best practices when convening multidisciplinary workgroups.

ACV Consulting Services**2012***Independent Consultant*

- Provided training, technical assistance and consultation focusing on domestic violence issues, cultural diversity, service delivery model, enhanced services for traditionally marginalized communities, leadership development, community engagement and non-profit management. Clients include: Futures Without Violence, Virginia Sexual and Domestic Violence Action Alliance, Virginia Department of Criminal Justice Services, Louisiana Coalition Against Domestic Violence, World Pediatric Project of Virginia, YWCA of Lynchburg and Chesterfield Domestic and Sexual Violence Task Force.

Virginia Sexual and Domestic Violence Action Alliance**2006-2012***Child and Youth Advocacy Manager/Prevention Team Leader 2006-2012*

- Co-managed the Coalition's Primary Prevention Projects and supervised the Prevention Team to develop, implement and evaluate Virginia's intimate partner violence and sexual violence prevention plans. Successfully co-managed implementation and evaluation of the Coalition's DELTA project and managed the Rape Prevention Education (RPE) project.
- Coordinated and managed the military and domestic violence collaborative project.
- Coordinated all project activities to develop comprehensive services for children, youth and their non-abusing parents, whose lives have been impacted by violence in the home.
- Convened the first statewide Child and Youth Advocacy Task Force, made up of a multidisciplinary group of child advocates.
- Provided leadership to several statewide workgroups addressing racial identity and development of social media campaigns.
- Coordinated, managed and evaluated the Coalition's statewide Immigration Technical Assistance Project.

Hotline Manager 2007-2008

- Managed daily operations of the statewide family violence and sexual assault hotline. Recruited, supervised and managed staff volunteers and interns.

YWCA Women's Advocacy Program**1997-2006***Roles included: Cas Manager, Hotline Specialist and lastly Director of Domestic Violence Shelter*

- Administration of an emergency shelter, monitoring budgets, donations, staff supervision, training and volunteer management.
 - Provided case management, support group facilitation, crisis intervention and service referral.
-

INTERNATIONAL ADVOCACY:

By invitation, member of the United States Delegation that traveled to China for an exchange of domestic violence response and prevention information with the All China Women's Federation (2016).

EDUCATION:

Completed 109 credits towards required 120 credits for B.S., Psychology, Virginia Commonwealth University.

OTHER RELEVANT PROFESSIONAL AFFILIATIONS:

National Resource Center on Domestic Violence Board Member to Vice Chair (2011-2015); Futures Without Violence National Leadership Committee: Expanding Services for Children and Youth Exposed to Domestic Violence (2012, 2018, Present); NO MORE Steering Committee Member (2018); Virginia Governor's Domestic Violence Prevention and Response Advisory Board Improving Services to Children and Youth Subcommittee (2011-2012); Virginia Attorney General's Safe in Our Communities Initiative Workgroup Member (2008-2012); Virginia Department of Criminal Justice Services Victim Services State Planning Team Member (2007-2012).

**DISCLOSURE FORM FOR WITNESSES
COMMITTEE ON ARMED SERVICES
U.S. HOUSE OF REPRESENTATIVES**

INSTRUCTION TO WITNESSES: Rule 11, clause 2(g)(5), of the Rules of the U.S. House of Representatives for the 116th Congress requires nongovernmental witnesses appearing before House committees to include in their written statements a curriculum vitae and a disclosure of the amount and source of any federal contracts or grants (including subcontracts and subgrants), or contracts or payments originating with a foreign government, received during the current and two previous calendar years either by the witness or by an entity represented by the witness and related to the subject matter of the hearing. As a matter of committee policy, the House Committee on Armed Services further requires nongovernmental witnesses to disclose whether they are a fiduciary (including, but not limited to, directors, officers, advisors, or resident agents) of any organization or entity that may have an interest in the subject matter of the hearing. Committee policy also requires nongovernmental witnesses to disclose the amount and source of any contracts or grants (including subcontracts and subgrants), or payments originating with any organization or entity, whether public or private, that has a material interest in the subject matter of the hearing, received during the current and two previous calendar years either by the witness or by an entity represented by the witness.

Please note that a copy of these statements, with appropriate redactions to protect the witness's personal privacy (including home address and phone number), will be made publicly available in electronic form not later than one day after the witness's appearance before the committee. Witnesses may list additional grants, contracts, or payments on additional sheets, if necessary. Please complete this form electronically.

Hearing Date: Wednesday, September 18th

Hearing Subject:

Domestic Violence: Survivor Perspectives and Prevention Strategies

Witness name: Arlene Vassell- As Representative

Position/Title: Vice President of Programs, Prevention & Social Change

Capacity in which appearing: (check one)



Individual



Representative

If appearing in a representative capacity, name of the organization or entity represented:

National Resource Center on Domestic Violence

Federal Contract or Grant Information: If you or the entity you represent before the Committee on Armed Services has contracts (including subcontracts) or grants (including subgrants) with the federal government, received during the current and two previous calendar years and related to the subject matter of the hearing, please provide the following information:

2019

Federal grant/ contract	Federal agency	Dollar value	Subject of contract or grant
90EV0428 03	Administrator for Children & Families - HHS	\$1,586,000	Core & Prevention
90EV0451 03	ACYF - Family and Youth Services Bureau	\$500,000	Housing
90EV0451 03A	ACYF - Family and Youth Services Bureau	\$500,000	Housing Supplemental

2018

Federal grant/ contract	Federal agency	Dollar value	Subject of contract or grant
90EV0428 02	Administrator for Children & Families - HHS	\$1,586,000	Core & Prevention
90EV0451 02	ACYF - Family and Youth Services Bureau	\$500,000	Housing

2017

Federal grant/ contract	Federal agency	Dollar value	Subject of contract or grant
90EV0428 01	Administrator for Children & Families - HHS	\$1,686,000	Core & Prevention
90EV0451 01	ACYF - Family and Youth Services Bureau	\$500,000	Housing

Foreign Government Contract or Payment Information: If you or the entity you represent before the Committee on Armed Services has contracts (including subcontracts or subgrants) or payments originating from a foreign government, received during the current and two previous calendar years and related to the subject matter of the hearing, please provide the following information:

2019

Foreign contract/ payment	Foreign government	Dollar value	Subject of contract or payment

2018

Foreign contract/ payment	Foreign government	Dollar value	Subject of contract or payment

2017

Foreign contract/ payment	Foreign government	Dollar value	Subject of contract or payment

Fiduciary Relationships: If you are a fiduciary of any organization or entity that may have an interest in the subject matter of the hearing, please provide the following information:

Organization or entity	Brief description of the fiduciary relationship

Organization or Entity Contract, Grant or Payment Information: If you or the entity you represent before the Committee on Armed Services has contracts or grants (including subcontracts or subgrants) or payments originating from an organization or entity, whether public or private, that has a material interest in the subject matter of the hearing, received during the current and two previous calendar years, please provide the following information:

2019

Contract/grant/ payment	Entity	Dollar value	Subject of contract, grant or payment

2018

Contract/grant/ payment	Entity	Dollar value	Subject of contract, grant or payment

2017

Contract/grant/ payment	Entity	Dollar value	Subject of contract, grant or payment



David S. Lee
 Testimony to the
 House Committee on Armed Services Subcommittee on Military Personnel
 Hearing on
 Shattered Families, Shattered Service:
 Taking Military Domestic Violence Out of the Shadows
 September 18, 2019

Good Afternoon, Madame Chair and Members of the Committee,

My name is David Lee, the Director of Prevention at [PreventConnect](#) – a national online resource center dedicated to advancing prevention of domestic violence, sexual violence and teen dating violence. PreventConnect is a national project of the California Coalition Against Sexual Assault (CALCASA). Since 2005, with funding from the Centers for Disease Control and Prevention, PreventConnect has led national efforts to build comprehensive prevention strategies that focus on preventing domestic and sexual violence before they take place. It is essential to respond to the needs of survivors in a trauma-informed manner, assert the dignity of all people, and to hold those who have committed abuse accountable. However, those responses *after* violence has occurred are not sufficient to prevent such forms of violence from happening in the first place, nor are they sufficient to prevent them from happening in the future. Only with an intentional investment in prevention, will we be able to change the culture that creates the conditions which allow domestic violence, and other forms of violence, to continue, to a culture that is free from domestic violence and other forms of violence.

Domestic violence is a significant and widespread problem in our society. About 1 in 4 women (25.1% or 30.0 million) and 1 in 10 men (10.9% or 12.1 million) in the U.S. experienced contact sexual violence, physical violence, and/or stalking by an intimate partner during their lifetime and reported some form of intimate partner violence-related impact.¹ When addressing domestic violence, it is crucial to note the impacts such as being fearful, concerned for safety, injury, need for medical care, needed help from law enforcement, missed work, missed school, any post-traumatic stress disorder symptoms, need for housing services, need for victim advocate services, need for legal services and contacting a crisis hotline.

In a 2013 CDC study of data collected in 2010, 28.4% of active duty women and 26.9% of wives of active duty men experienced lifetime physical violence by an intimate partner. Active duty women who

¹ Smith, S.G., Zhang, X., Basile, K.C., Merrick, M.T., Wang, J., Kresnow, M., Chen, J. (2018). The National Intimate Partner and Sexual Violence Survey (NISVS): 2015 Data Brief – Updated Release. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

were deployed during the three years prior to the survey were significantly more likely to experience lifetime physical violence by an intimate partner compared to active duty women who were not deployed during the three years prior to the survey.² In FY18, there were a total of 8,039 incidents of domestic abuse reported to Family Advocacy Program.³ This number reflects only those cases that were reported to FAP and met the criteria for domestic violence. This is an undercount of the actual level of domestic violence as typically, most domestic violence is not reported.⁴ In many incidents of domestic violence, sexual assault has also taken place. The root causes of domestic violence, sexual assault and sexual harassment are similar, so it is valuable to understand all of these forms of gender-based violence in the armed services. In FY18, there were 6053 reported cases of sexual assault among service members. In addition, using an anonymous survey, the Department of Defense estimated 20,500 service members experienced sexual assault.⁵ This data underscores the need to take action regarding gender-based violence in the armed services.

I am pleased that today we are addressing both survivor perspectives and prevention strategies for our nation's armed services. These are essential to move forward and create the change that is necessary to build a nation, including its armed services, free from domestic violence. Advancing prevention cannot be done alone; it requires a community to learn with each other and from each other. It also requires much more than mere awareness: prevention is about creating a culture that challenges violence and the behaviors and attitudes which contribute to it. As an example, we could not prevent sexual violence without also preventing sexual harassment and the associated attitudes that sustain gender inequity.

Domestic violence is not an armed services problem; it is a societal problem that takes place in all of our nation's institutions, including the armed services. All institutions, including education, faith communities, sport, business, and military must address the role they can play in supporting domestic violence prevention. In CALCASA's 2015 report *Reciprocal Advancement: Building Linkages Between Domestic Violence & Sexual Assault*⁶, we use the term "linked, yet distinct" to describe the relationship between domestic violence and sexual violence. Domestic violence, sexual violence, and sexual harassment all share many common risk and protective factors.⁷ While the response after each takes

² Black, MC, Merrick, MY (2013) Technical Report Prevalence of Intimate Partner Violence, Sexual Violence, and Stalking among Active Duty Women and Wives of Active Duty Men— Comparisons with Women in the U.S. General Population, 2010. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control.

³ Department of Defense, Report on Child Abuse and Neglect and Domestic Abuse in the Military for Fiscal Year 2018 (ND) <https://download.militaryonesource.mil/12038/MOS/Reports/fap-fy18-dod-report.pdf>

⁴ Reaves, Brian A. (2017). Police Response to Domestic Violence, 2006-2015. U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. https://www.bjs.gov/index.cfm?ty=pbdetail&iid=5907&utm_source=juststats&utm_medium=email&utm_content=prdv0615_report_detail_page&utm_campaign=prdv0615&ed2f26df2d9c416fbddddd2330a778c6=lohfkfgkz-iktztldoo

⁵ Department of Defense, Annual Report on Sexual Assault in the Military, Fiscal Year 2018 (2019) https://www.sapr.mil/sites/default/files/DoD_Annual_Report_on_Sexual_Assault_in_the_Military.pdf

⁶ Aldridge, L. Reciprocal Advancement: Building Linkages Between Domestic Violence & Sexual Assault (2015) Sacramento, CA: California Coalition Against Sexual Assault. http://www.calcasa.org/wp-content/uploads/2015/03/CALCASA-BSU-FieldsRep_FINAL.pdf

⁷ Wilkins, N., Tsao, B., Hertz, M., Davis, R., Kleven, J. (2014). Connecting the Dots: An Overview of the Links Among Multiple Forms of Violence. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention Oakland, CA: Prevention Institute.

place will differ, prevention efforts for all of these forms of gender based violence are linked and should be aligned to maximize their impact.

The armed services with all of its branches provide both opportunities and challenges for preventing domestic violence. The armed services are value-based entities – they are dedicated to building a common culture dedicated to fulfilling their mission. While this culture can reinforce norms that support domestic violence (such as male domination, rewarding physical aggression and using unit cohesion to fail to address sexual violence), the armed services have the opportunity to create a culture in which domestic violence is not tolerated, where bystanders speak up to support their fellow armed service members in preventing violence and harassment (not in colluding).

For over 25 years, my work in preventing sexual violence and domestic violence has included work with the armed services. I have seen a shift as Congress has prioritized addressing these forms of violence, as the public and the military has acknowledged the problem of gender-based violence, and as leadership can increase its commitment. Yet, the problem is still pervasive and it is time to dedicate focus to go beyond responding to violence, and move toward an institutional commitment to prevention. We cannot limit prevention efforts to posters and Domestic Violence Awareness Month events in October.

The Department of Defense’s 2018 Annual Report on Sexual Assault in the Military describes the current state of sexual assault prevention in the military as “[h]istorically, activities aimed at preventing sexual assault have primarily centered on raising awareness about the crime. These approaches have likely contributed to increases in victim reporting and use of support services, but civilian sector research suggests awareness programming does not translate into the kinds of long-term behavior changes required to prevent sexual violence at the organizational level.”

While headlines covering the DOD’s 2018 report focused on a 37% increase of some kind of sexual violence as compared to 2016, the Department also released its Prevention Plan of Action for 2019-2023.⁸ The Prevention Plan of Action recognizes the limitations of existing prevention efforts in the military, and provides a framework to increase its investment in prevention. Naturally, the success of the military in reducing sexual violence depends on how well they are able to prevent it, and these prevention strategies can also extend to the prevention of domestic violence.

The Prevention Plan of Action has established many goals to create the human resources, infrastructure and processes necessary for effective prevention efforts. First, it describes the importance of a committed and invested leadership team that can oversee, implement and set the ground-work for the organization in regards to preventing violence. This is crucial as it is a means of equipping oversight and leadership for the remainder of the workforce with prevention and response responsibilities -- building on a greater sense of communal strength and responsibility. The system also encourages collaborative and engaging partnerships with prevention efforts on other topics. In addition, sexual violence prevention efforts can be strengthened by collaborating with local, state and national civilian sexual violence prevention efforts to build cohesive prevention messages and programs that will reinforce each other.

⁸ Department of Defense, Sexual Assault Prevention and Response Office, Prevention Plan of Action 2019-2023, <https://www.sapr.mil/sites/default/files/PPoA%20Final.pdf>

Infrastructure data and resources are crucial to know what is working and what is not having an impact. A sustainable program of research is needed to better understand factors that contribute to sexual assault and domestic violence, methods to identify prevention factors that mitigate those factors and prevention metrics. Regarding domestic violence response, those efforts are reflected in reporting on the Department of Defense's Family Advocacy Program, which tracks the number of incidents of domestic abuse reported, but does not offer a path forward for prevention. Thus, it is important to learn lessons from the work of sexual violence prevention, both in military and non-military settings, in order to gather a strong understanding of what can work.

Since sexual violence and domestic violence share many risk and protective factors, the armed services prevention efforts need to be aligned. Sexual Assault Prevention and Response Offices and Family Advocacy Program, as well of those responsible to preventing sexual harassment must plan and coordinate how their prevention efforts will share a common language and complement each other.

Preventing gender-based violence requires partnership between the armed services and civilian efforts. Over the last 14 years, PreventConnect is an online gathering of prevention practitioners where we have learned much about the science and practice of prevention. Thousands of people share their experiences doing prevention work, learn about the newest prevention resources and research, and strengthen their collective knowledge of how prevention works. The armed services can learn from other prevention efforts, such as those on college campuses and with youth. PreventConnect will continue to share resources and lessons learned in the practice of domestic violence sexual violence prevention. We welcome those working to prevent violence in all settings, including the military, to participate in PreventConnect activities in order to develop, implement, evaluate and strengthen their prevention practices.

We are also proud of our ability to forge new opportunities in prevention work by connecting with organizations and entities with a greater capacity to influence change. One such group in the world of domestic violence prevention is the Blue Shield Foundation of California, whom we have partnered with for several years now. Blue Shield Foundation of California's 2019 report *A Life Course Framework for Preventing Domestic Violence*⁹ describes strategies to interrupt the intergenerational cycle of family violence. This report highlights the drivers of domestic violence: Situational factors (immediate or near-immediate causes of violent events), Life course and developmental factors (the ecological contexts, experiences, outcomes, and individual factors across the lifespan that increase or decrease the chances that a person will engage in abuse toward intimate partners); and Structural and cultural factors (that explain domestic violence at the social and cultural levels and are reflections of cultural norms.) Prevention efforts should address these drivers of domestic violence.

Life course analyses demonstrate how health is a consequence of multiple determinants and contexts that change as a person develops. The timing and sequence of biological, psychological, cultural, and

⁹ Blue Shield of California Foundation, Report: A Life Course Framework for Preventing Domestic Violence (2019) San Francisco, CA: Blue Shield of California Foundation
<https://blueshieldcafoundation.org/sites/default/files/publications/downloadable/BreakingtheCycleLifeCourseFramework.pdf>

historical events and experiences influence the health and development of both individuals and populations. Through a life course analysis, we can begin to better understand the points in a person's life at which we can most effectively break the cycle of domestic violence. The synthesis of this work reinforces some of what is known from public health research and what is emergent in child trauma and brain development science fields. It also uncovers many important insights:

- Domestic violence is far too common in the lives of men and women, and far too many children witness violent assaults between their parents.
- Serious negative health and developmental consequences for children and teens follow in the wake of exposure to domestic violence incidents.
- Children below the ages of five are disproportionately exposed to trauma of various kinds compared to older children.
- Teenagers who have experienced violence in the home in the past or concurrent with exposure to violence in teen dating relationships are at an elevated risk for a variety of negative health and social outcomes.
- Intergenerational framing for understanding and promoting practice innovation is a promising approach for future efforts to end domestic violence.

Intergenerational poverty, housing insecurity, overreliance on punitive solutions, family separation, and anti-immigrant discrimination are structural factors that perpetuate the cycle of violence and often silence many vulnerable children, families, and communities.

The Centers for Disease Control and Prevention's 2017 publication *Preventing Intimate Partner Violence Across the Lifespan: A Technical Package of Programs, Policies, and Practices*¹⁰ highlights strategies and approaches that have demonstrated evidence of preventing domestic violence, reducing risk factors and increasing protective factors associated with domestic violence. (See table labelled Preventing IPV for a summary.) I will highlight several key strategies:

- **Engage Influential Adults and Peers:** The CDC highlighted prevention programs that "encourage men and boys to support actual and potential victims by intervening and speaking out, but also teach skills and promote social norms that reduce their own risk for

Preventing IPV	
Strategy	Approach
Teach safe and healthy relationship skills	<ul style="list-style-type: none"> • Social-emotional learning programs for youth • Healthy relationship programs for couples
Engage influential adults and peers	<ul style="list-style-type: none"> • Men and boys as allies in prevention • Bystander empowerment and education • Family-based programs
Disrupt the developmental pathways toward partner violence	<ul style="list-style-type: none"> • Early childhood home visitation • Preschool enrichment with family engagement • Parenting skill and family relationship programs • Treatment for at-risk children, youth and families
Create protective environments	<ul style="list-style-type: none"> • Improve school climate and safety • Improve organizational policies and workplace climate • Modify the physical and social environments of neighborhoods
Strengthen economic supports for families	<ul style="list-style-type: none"> • Strengthen household financial security • Strengthen work-family supports
Support survivors to increase safety and lessen harms	<ul style="list-style-type: none"> • Victim-centered services • Housing programs • First responder and civil legal protections • Patient-centered approaches • Treatment and support for survivors of IPV, including TDV

¹⁰ Niolon, P. H., Kearns, M., Dills, J., Rambo, K., Irving, S., Armstead, T., & Gilbert, L. (2017). Preventing Intimate Partner Violence Across the Lifespan: A Technical Package of Programs, Policies, and Practices. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

future perpetration.” We must reexamine masculinity to create manhood that is dedicated toward promoting gender equity, not dominance. For the armed services, we should draw upon the lessons learned in prevention efforts in sport and fraternities for examples of prevention efforts. Bystander empowerment and intervention “promote social norms that are protective against violence and empower and encourage people to intervene to prevent violence when they see it.” These programs have begun to be implemented in colleges, high schools and in the armed services.

- **Disrupt the Developmental Pathways Toward Partner Violence:** These strategies and approaches are aligned with the recommendations from Blue Shield Foundation of California’s *A Life Course Framework for Preventing Domestic Violence* described above. The armed services can explore how its Family Advocacy Program efforts to work with the entire family.
- **Create Protective Environments:** Several of the recommendations focus on improving the climate and physical environment of schools and workplaces. The armed services can take efforts informed by school-based and workplace-based initiatives to make shifts to its culture to enhance safety and feelings of safety, promotes healthy relationships and respectful boundaries, and reduces tolerance for violence among military personnel and officers.
- **Strengthen Economic Supports for Families:** The CDC report said that “Evidence suggests that poverty, financial stress, and low income can increase risk for IPV. Reducing financial stress may decrease potential for relationship conflict and dissatisfaction, which are strong predictors of IPV.” Efforts that strengthen household financial security and family work supports (such as family leave) are part of a comprehensive effort to prevent domestic violence.

Domestic violence shatters family and adversely affects the capacity of the armed services. With an investment in prevention, we can make a difference in the lives of service members, their families and the community. As we continue the journey toward prevention, we hope to engage with all our partners to create conversations that generate new pathways, partnerships, and innovations to advance a long-term vision for a world that is not just free from violence, but also abundant in opportunity for healthy relationships, healthy families, and healthy communities.

Equipped with an expanded capacity for understanding the risk and protective factors associated with domestic violence, we are moving closer towards a world where we can prevent domestic violence and related forms of violence. PreventConnect will continue the critical work of identifying emerging prevention strategies and connecting key players in the world of preventing violence with each other. This kind of network is crucial to preserving knowledge and maintaining positive momentum towards building our collective capacity on prevention, and what we’ve found works outside the world of the military can yield important lessons for within it.

Thank you.

David S. Lee, MPH
 Director of Prevention
 PreventConnect: A National Project of the California Coalition Against Sexual Assault (CALCASA)
david@calcasa.org
www.PreventConnect.org

David S. Lee, MPH
 Director of Prevention Services
 California Coalition Against Sexual Assault
 1215 K Street, Suite 1850
 Sacramento, CA 95814

David S. Lee, MPH, is the Director of Prevention at the California Coalition Against Sexual Assault (CALCASA) and the national partnership RALIANCE. David manages PreventConnect, the nation's leading online community to advance primary prevention of violence against women. With funding from the US Centers for Disease Control and Prevention (CDC), PreventConnect uses online technologies to collect, discuss and disseminate a wide range of public health and community-driven approaches to primary prevention of sexual violence and domestic violence. With funding from the National Football League and Uber, David oversees the prevention activities including RALIANCE's Sport + Prevention Center.



Mr. Lee has been involved in the movement to end sexual assault and domestic violence since 1982 working with a variety of local sexual assault and domestic violence prevention agencies. His work focuses on prevention and the development of community responses to end violence against women. Highlights of his work include the use of social marketing to prevent sexual violence, sport as part of the solution to end sexual and domestic violence, peer education programming for youth, school-based education, faith community engagement in violence prevention and engaging men to prevent violence against women. From 2005-2010, he managed MyStrength, CALCASA's statewide social marketing campaign to engage young men to prevent sexual violence. David managed the #PowerInPrevention Ending Child Sexual Abuse web conference series for Ms Foundation for Women from 2012-2016 and was the first host for a conference series in partnership with the National Immigrant Women's Advocacy Project.

Mr. Lee speaks at conferences and provides training throughout the country on the prevention of violence against for many audiences including educators, health care professionals, colleges and universities, law enforcement, clergy, faith leaders, business leaders, military, social workers, therapists, welfare workers, substance abuse treatment providers, youth, men's groups, and community organizations. In 2015 David was selected by the NoVo Foundation as a "Movement Maker" for its Move to End Violence initiative. In 2011, David was awarded for Excellence in Public Service by the Injury Control and Emergency Health Services Section of the American Public Health Association. David is featured as an expert in the Center for Disease Control and Prevention's online resource Understanding Evidence.

Mr. Lee completed his Masters in Public Health at University of California Berkeley in Community Health Education focusing on violence prevention. Mr. Lee completed his Masters in Public Health at University of California Berkeley in Community Health Education focusing on violence prevention. David is the co-author of the CALCASA study "[Costs and Consequences of Sexual Violence in California](#)" (2018), the RALIANCE reports [Sport and Sexual Violence Prevention: Recommendations for Next Steps in Research and Evaluation](#) (2018) and [How Sport Can End Sexual Violence in One Generation](#) (2017), [PreventConnect's Sexual Assault Prevention on U.S. College Campuses: A National Scan](#) (2016), [Sexual Violence Prevention in the American College Health Association's *Shifting the Paradigm: Primary Prevention of Sexual Violence*](#) (2008) and the article "[Sexual Violence Prevention](#)" (2007) in *The Prevention Researcher*.

DAVID S. LEE, MPH

Director of Prevention Services
California Coalition Against Sexual Assault
1215 K Street, Suite 1850
Sacramento, CA 95814

EDUCATION:

School of Public Health, University of California, Berkeley, MPH, 1995
Major: Community Health Education. Focus on Violence as a Public Health Issue.

Yale University, New Haven, Connecticut, BA, 1984

Major: American Studies. Concentration: Women's Studies and Social Sciences.

WORK EXPERIENCE:

California Coalition Against Sexual Assault, Sacramento, CA. Director of Prevention (2005- present).

Manage PreventConnect, a national online interactive resource center to advance primary prevention of sexual violence, domestic violence and teen dating violence. Manage training and technical assistance to sexual violence prevention practitioners for California's Rape Prevention and Education Program. Manage #PowerInPrevention Ending Child Sexual Abuse Web Conference series with support from Ms. Foundation for Women. Managed statewide social marketing campaign, MyStrength, a comprehensive sexual violence primary prevention targeting teen males. Oversee management of National Sexual Assault Conference in 2010, 2013, 2015 and 2018. Lead in coordination with Division of Violence Prevention, Centers for Disease Control and Prevention and California Department of Public Health.

RALIANCE, Washington DC. Director of Prevention (2014-present).

Oversees RALIANCE's prevention activities, including development of the Sport + Prevention Center and ongoing research projects. Responsible for development of web site.

STAND! Against Domestic Violence, Concord, CA. Central County Regional Director (2003 - 2005)

Direct agency services including prevention, training, clinical services, crisis line, shelter and legal services. Oversee regional budget of \$1.1 million and staff of 20 FTEs. Responsible for reporting to funders and participating in collaborations with local community based organizations and government.

STAND! Against Domestic Violence, Concord, CA. Director, Prevention & Community Empowerment / Employment and Training. (2001-2003)

Direct training and technical assistance programs to governmental and community organizations. Direct prevention programs and community mobilization efforts. Facilitate collaboration with CalWORKs, child protection, elder abuse, substance abuse treatment, schools, faith communities and healthcare systems. Supervise and train staff.

Support Network for Battered Women, Mountain View, CA. Director of Community Education. (1995-2001)

Direct community education and outreach activities. Coordinate Teen Dating Violence Prevention program in high schools. Provide training to police, clergy, health care professionals, peer counselors and social workers on domestic violence. Supervise and train staff, interns, community education volunteers and teen peer educators. Develop and maintain agency web site. Chair county-wide Community Education Committee and annual

county-wide domestic violence conferences. Coordinate Interfaith domestic violence organizing efforts including Power to Change Conference.

Battered Women's Alternatives / Youth Education and Support Services, Concord, CA. Education Coordinator. (1992-1995)

Coordinate violence prevention programming for teens in schools and community-at-large. Topics include dating and relationship violence, community violence, conflict mediation, sexual harassment, sex role stereotypes and ending oppression. Train professionals and volunteers, including teens, to set up programs and to provide workshops.

Trauma Foundation/ Pacific Center for Violence Prevention, San Francisco, CA. Intern. (1994)

Developed evaluation tool for Family Violence Prevention Fund's pilot domestic violence training for emergency department staff. Researched collection of information about violence prevention legislation via Internet. Wrote brief on impact of "Three Strikes" legislation.

Men Overcoming Violence, San Francisco, CA. Community Educator. (1984-94)

Provided workshops and presentations on ending male violence. Previously worked as Counselor, Volunteer Coordinator, and member of Steering Committee and Gay Domestic Violence Task Group. Facilitated counseling groups for men who batter, recruited and trained volunteers.

Children's Self-Help Center, San Francisco, CA. Program Director. (1988-92)

Supervised program staff and coordinated national training program for child sexual violence prevention program. Recruited and supervised volunteers, and conducted workshops for school staff, parents and students. Coordinated TEEN PEP (Peer Education Program) training high school students to lead child abuse prevention workshops to their peers. Provided training on topics including child sexual abuse, date rape, male violence, sexual harassment, adolescence, and training teens.

East Bay Activity Center, Oakland, CA. Mental Health Counselor. (1986-88)

Counseled severely emotionally disturbed children, ages 5-12, in day treatment center. Coordinated play groups.

National Clearinghouse on Marital Rape, Berkeley, CA. Clearinghouse Coordinator. (1984-86)

Collected and filed information on marital rape and date rape. Provided technical assistance for researchers, students, legislators and activists.

Men Against Domestic Violence, New Haven, CT. Intern, Volunteer. (1982-84)

Organized and managed office, coordinated training program, developed phone staffing program for volunteers, and conducted intake interviews with men who batter.

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COMMITTEE ON ARMED SERVICES
U.S. HOUSE OF REPRESENTATIVES**

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Hearing Date: Wednesday, September 18th

Hearing Subject:

Domestic Violence: Survivor Perspectives and Prevention Strategies

Witness name: David Lee

Position/Title: Director of Prevention Services

Capacity in which appearing: (check one)



Individual



Representative

If appearing in a representative capacity, name of the organization or entity represented:

PreventConnect
c/o California Coalition Against Sexual Assault

Federal Contract or Grant Information: If you or the entity you represent before the Committee on Armed Services has contracts (including subcontracts) or grants (including subgrants) with the federal government, received during the current and two previous calendar years and related to the subject matter of the hearing, please provide the following information:

2019

Federal grant/ contract	Federal agency	Dollar value	Subject of contract or grant
18-10017	CDC HHS - California Dept of Public Health	\$500,000 over 2 years	Sexual Violence Primary Prevention Technical Assistance and Training
1NU1VCE002205-01-02	CDC HHS - Center for Disease Control and Prevention	\$345,000	Prevention of Sexual Violence and Intimate Partner Violence

2018

Federal grant/ contract	Federal agency	Dollar value	Subject of contract or grant
1NU1VCE002205-05-02	CDC HHS - Center for Disease Control and Prevention	\$402,550	Prevention of Sexual Violence and Intimate Partner Violence

2017

Federal grant/ contract	Federal agency	Dollar value	Subject of contract or grant
1NU1VCE002205-05-01	CDC HHS - Center for Disease Control and Prevention	\$402,550	Prevention of Sexual Violence and Intimate Partner Violence

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Prepared Testimony of Brian Clubb, J.D., USMCR (Ret.), Military & Veterans Advocacy Program, Battered Women's Justice Project

I would to thank Chairwomen Speier, Ranking Member Kelly, and the members of this subcommittee for the opportunity to speak on this important topic.

I am the coordinator of the Military & Veterans Advocacy Program for the Battered Women's Justice Project. The Battered Women's Justice Project is a national, non-profit organization that provides technical assistance and training on the subject of domestic violence. We develop and promote innovations in policy and practice that improve the response to domestic violence by the civil, criminal, and military justice systems.

My program, funded through a grant from U.S. Department of Justice's Office on Violence Against Women (OVW), focuses on how military and veteran-related domestic violence should be handled in the criminal and civil justice systems, how those systems and the military response intersect with each other, and helps victims and survivors navigate these systems and connect with assistance. Prior to obtaining this grant in 2010, our organization participated in the DoD Task Force on Domestic Violence in the 2000s and assisted the Marine Corps in developing its Service policy on domestic violence in the 1990s.

There are notably positive aspects to both the military's prevention of and response to domestic violence – many of them the result of recommendations made by the DoD Task Force. In addition, I am often told by military-related victims about their positive interactions with and assistance provided by Family Advocacy Program victim advocates. However, the recent DoD Inspector General report on military law enforcement identified numerous areas where the Services are falling short. Based on hundreds of contacts with military-related victims and survivors, as well as the advocates and attorneys that assist them, there are number of issues we have identified that straddle prevention and response and impact victim safety.

Several involve civilian protection orders (CPOs). *10 U.S.C 1561a*, known as the Armed Forces Domestic Security Act, requires that CPOs be given the same force and effect on military installations as they have in the jurisdiction in which they were issued. This law has been incorporated into DoD policy through Department of Defense Instruction 6400.6 and one tool the instruction gives installation commanders is the authority to establish CPO registration procedures. I commonly hear from victims that they either do not know who to notify on military installations that they have a CPO or that they have only given a copy to a command representative of the restrained servicemember. While the latter is a recommended action, installation commanders, more so than individual unit commanders, and military law enforcement who work for installation commanders, have broader authority to enforce CPOs. Registration procedures can ensure that installation commanders and military law enforcement know about CPOs and that knowledge aids them in enforcement. While I have not done a survey of all DoD and Service installations, I am only aware of one installation that has such procedures.

Commanding officers also have the authority to issue military protection orders (MPOs) to any servicemember under their command and have wide discretion as to whether or not to do so. My experience is that the exercise of this discretion ranges from issuing MPOs on any allegation of domestic violence in a "better safe than sorry" approach or issuing none at all. Commanding officers sometimes issues verbal orders, which while they have the authority to do so, does not provide protected parties

with a written copy nor the placement of a copy in the servicemember's record book, as required under DoD policy for MPOs, plus it avoids that requirement to submit MPOs to the National Criminal Investigative Center under certain circumstances. This latter requirement was in response to *10 U.S.C § 1567a* which mandated that commanding officers notify appropriate civilian authorities when any party to an MPO does not live on a military installation. Unfortunately, the recent DoD IG report did not look at the Services compliance with this policy. Whether this policy complies with § 1567a's direction to report MPOs to "appropriate civilian authorities" is debatable.

Another concern about MPOs is expiration dates. *10 U.S.C § 1567*, states that MPOs shall remain in effect *"until such time as the military commander terminates the order or issues a replacement order."* Several years ago, DoD began a process to revise the standard MPO form in part to eliminate expiration dates. However, that process has stalled and in the interim, DoD has not issued any guidance regarding this subject. Arguably, commanding officers violate federal law every time they sign an MPO that includes an expiration date on the existing form.

Regarding both CPOs and MPOs, there is the issue of firearms. There is much research that establishes the use of firearms in domestic violence homicides and we know that firearms are the most common manner of death in civilian as well as military domestic homicides. As a result, federal law and many state laws restrict the possession of firearms by those who are subject to CPOs. However, we have no data as to how or if the military is enforcing personal firearm restrictions against servicemembers or against civilians on military property nor whether commanding officers include firearms restrictions when they issue MPOs.

The last topic I would like to address is collaboration between military installations and the local communities in which they are located. Collaboration is crucial as military-related victims and their abusers are often navigating two, different and sometimes conflicting systems. When these two systems do not actively work together, effectively share information, and evaluate their processes, there can be many negative consequences to include decreased safety of the victim and others. DoD policy is that commanders, military law enforcement, victim advocates, and others who are part of the military response should collaborate with their civilian counterparts, but while military FAP programs and their civilian counterparts generally work very well together, my experience is that the levels of collaboration between military installations and local communities, as a whole is, at best spotty. Admittedly, collaboration takes a willingness of all parties and regardless of DoD policy directing collaboration, commanders and those that work for them, cannot force those in civilian communities to do so. Our organization previously partnered with the National Center on Domestic and Sexual Violence and DoD on a multi-year project to create a military-civilian coordinated response model. That work identified the difficulties in establishing and maintaining military-civilian collaboration to include jurisdictional issues, different reporting systems, confidentiality, and, of course, cost. If we are again awarded the grant that funds our program, our plan is to work more in this area and attempt to re-energize interest in this subject.

CHARLES BRIAN CLUBB, J.D.

Major - USMCR (Ret.)

EDUCATION

JURIS DOCTOR, *University of San Diego School of Law*, San Diego, CA (2000)**BACHELOR OF ARTS - POLITICAL SCIENCE**, *University of North Carolina*, Chapel Hill, NC (1986)**EXPERIENCE**

COORDINATOR, MILITARY & VETERANS ADVOCACY PROGRAM, *Battered Women's Justice Project*, Stafford, VA (2014 - Present)

Manage a special project to develop a model coordinated community response to intimate partner violence (IPV) where perpetrators have co-occurring combat-related conditions, such as post-traumatic stress disorder and/or traumatic brain injury • Responsible for enhancing and maintaining a network of subject matter experts to serve as resources for victim advocates • Monitor legal, military, veteran, and public policy developments that affect civil and criminal justice responses to intimate partner violence

INTELLIGENCE PLANNER / SENIOR INTELLIGENCE ANALYST, *Six 3 Systems*, Kandahar Airfield, AFG (2012 - 2014)

Identified and collected information on enemy, foreign intelligence, and criminal threats posed by vendors contracting with United States and Coalition forces • Coordinated with attorneys, law enforcement, and auditors in order to determine legal and military actions • Researched, prepared, and presented intelligence products using classified, open source, and financial information

PROJECT DIRECTOR, *National Association of Drug Court Professionals*, Alexandria, VA (2010 - 2012)

Oversaw national initiative to develop diversionary court programs for military veterans in the civilian criminal justice system • Managed \$750,000 in federal grant funding used for national trainings and mentor court programs • Organized and supervised planning seminars for over 400 criminal justice professionals and veteran advocates

INTELLIGENCE OFFICER, *United States Marine Corps Reserve* (1995 - 2010)

Served in numerous billets at military commands and law enforcement agencies while on active duty and reserve orders • Supervised personnel in the collection, analysis, and production of classified intelligence and operational plans • Prepared and delivered intelligence briefings to commanders and staff on enemy threats, intentions, and intelligence efforts • Created criminal intelligence reports and target packages for federal, state, and local law enforcement personnel

CRIMINAL DEFENSE ATTORNEY, *Law Office of C. Brian Clubb*, San Jose, CA (2005 - 2008)

Handled all phases of criminal legal proceedings to include plea negotiations, motions, trials, sentencings, and appeals • Prepared expert and non-expert witnesses for direct and cross examination • Conducted and directed investigations to challenge prosecution witnesses and evidence • Managed budgeting, advertising, and client development for a solo law practice

DEPUTY PUBLIC DEFENDER, *Santa Clara County Public Defender Office*, San Jose, CA (2001 - 2004)

Provided legal representation to indigent and low-income clients charged with criminal offenses • Researched, wrote and successfully argued a wide-range of pre and post-trial legal motions • Served as lead counsel for twenty-five jury trials

INTELLIGENCE OFFICER, *United States Marine Corps*, Kaneohe, HI (1991 - 1995)

Oversaw mission accomplishment, training, and morale of intelligence and scout-sniper sections • Managed command's intelligence, reconnaissance, and information security programs • Conducted liaison and coordination with foreign military personnel

LICENSES

STATE BAR OF CALIFORNIA, Member No. 211105 (2000)

**DISCLOSURE FORM FOR WITNESSES
COMMITTEE ON ARMED SERVICES
U.S. HOUSE OF REPRESENTATIVES**

INSTRUCTION TO WITNESSES: Rule 11, clause 2(g)(5), of the Rules of the U.S. House of Representatives for the 116th Congress requires nongovernmental witnesses appearing before House committees to include in their written statements a curriculum vitae and a disclosure of the amount and source of any federal contracts or grants (including subcontracts and subgrants), or contracts or payments originating with a foreign government, received during the current and two previous calendar years either by the witness or by an entity represented by the witness and related to the subject matter of the hearing. As a matter of committee policy, the House Committee on Armed Services further requires nongovernmental witnesses to disclose whether they are a fiduciary (including, but not limited to, directors, officers, advisors, or resident agents) of any organization or entity that may have an interest in the subject matter of the hearing. Committee policy also requires nongovernmental witnesses to disclose the amount and source of any contracts or grants (including subcontracts and subgrants), or payments originating with any organization or entity, whether public or private, that has a material interest in the subject matter of the hearing, received during the current and two previous calendar years either by the witness or by an entity represented by the witness.

Please note that a copy of these statements, with appropriate redactions to protect the witness's personal privacy (including home address and phone number), will be made publicly available in electronic form not later than one day after the witness's appearance before the committee. Witnesses may list additional grants, contracts, or payments on additional sheets, if necessary. Please complete this form electronically.

Hearing Date: Wednesday, September 18th

Hearing Subject:

Domestic Violence: Survivor Perspectives and Prevention Strategies

Witness name: Brian Clubb, JD, USMCR (Ret)

Position/Title: Coordinator, Military & Veterans Advocacy Project

Capacity in which appearing: (check one)

☒ Individual ☐ Representative

If appearing in a representative capacity, name of the organization or entity represented:

Battered Women's Justice Project

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2017

Federal grant/ contract	Federal agency	Dollar value	Subject of contract or grant
2015-TA-AX-K058	Office on Violence Against Women, USDOJ	\$375,000	Military & Veteran-related Domestic Violence

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STATEMENT OF

MRS. ANN THOMAS (A.T.) JOHNSTON
DEPUTY ASSISTANT SECRETARY OF DEFENSE,
MILITARY COMMUNITY & FAMILY POLICY

&

MR. KENNETH NOYES, ASSOCIATE DIRECTOR, OFFICE OF MILITARY
FAMILY READINESS POLICY, FAMILY ADVOCACY PROGRAM

BEFORE THE
HOUSE ARMED SERVICES COMMITTEE
SUBCOMMITTEE ON MILITARY PERSONNEL

SHATTERED FAMILIES, SHATTERED SERVICE: TAKING MILITARY
DOMESTIC VIOLENCE OUT OF THE SHADOWS

SEPTEMBER 18, 2019

Chairman Speier, Ranking Member Kelly, and members of this distinguished Subcommittee, the Department of Defense (DoD) is committed to preventing and responding to domestic abuse/intimate partner violence, child abuse and neglect, and problematic sexual behavior in children and youth in the military community. On behalf of Mr. James Stewart, Performing the Duties of the Under Secretary of Defense for Personnel and Readiness, and the cadre of dedicated and expert professionals who comprise the DoD Family Advocacy Program (FAP) team, I appreciate the opportunity to appear before you today to highlight the Department's efforts to keep our families and children safe and healthy. I am pleased to be joined by Mr. Ken Noyes, Associate Director, Office of Military Family Readiness Policy, Family Advocacy Program, who is a pivotal member of my staff on all FAP matters. Our sincere thanks to you for your continued, stalwart support of programs that help our Service members and their families stay strong and resilient.

Although domestic abuse, child abuse and neglect, and problematic sexual behavior in children and youth are serious national public health issues, the Department is committed to a military culture in which abuse and maltreatment of any kind are not tolerated, condoned, or ignored. The welfare and well-being of our Service members and their families is imperative to the readiness of our force. To address domestic abuse, child abuse and neglect, and problematic sexual behavior in children and youth, we use a comprehensive approach that promotes awareness, highlights prevention, emphasizes early intervention, mandates timely reporting, and utilizes evidenced-based and informed tools to support response and treatment.

Overview of the Department's Approach - A Coordinated Community Response

Central to the DoD strategy for addressing the multi-dimensional and complex nature of domestic abuse and child maltreatment is the coordinated community prevention and response model, a best practice adopted from the civilian sector. This model employs the comprehensive resources of a Service member's command, medical, military law enforcement, legal, the chaplaincy, civilian child protective services (CPS), and other community-based resources to prevent, identify, and respond to family violence, and within that framework, domestic abuse, specifically. This dynamic approach recognizes that, depending on the circumstances, multiple, simultaneous responses to an incident are necessary and beneficial. Each component of the coordinated community response contributes to the shared mission of ensuring the safety and

welfare of Service members and their families. At the same time, each component is charged with executing its own unique, but equally important mission. Any element of the coordinated community response network may receive a report of an incident of domestic abuse, and receipt of such a report “lights up the system,” initiating reciprocal reporting to other members of the coordinated community response and signaling each member to respond to the report as appropriate according to its unique mission and functions. For example, when a domestic abuse allegation is received by FAP, victim safety and risk assessment are the priorities. Victim advocacy services are offered to address safety planning, a clinical assessment is conducted, and an intervention plan developed, as appropriate. The victim is referred for medical services, as needed, and may elect a “restricted report” where no notifications are required outside of FAP. The Service member’s command and military law enforcement are notified if the victim elects to share the information, and therefore, elects an “unrestricted report.” Medical services, clinical counseling, and victim advocacy support are available with both a restricted and an unrestricted report. The alleged offender is also notified of the allegation, and he or she is assessed and a treatment plan is developed, as appropriate. If the victim files an unrestricted report, involvement by the Service member’s command may necessitate consultation with the military Staff Judge Advocate or other legal counsel and could result in criminal prosecution or other disciplinary or adverse administrative action. With an unrestricted report, an investigation by military law enforcement occurs separate from FAP’s assessment process. The command, in collaboration with FAP, determines how to best support the family. In addition, the command, in coordination with law enforcement and legal counsel, determines what actions should be taken to hold the offender accountable.

Coordinated community response partners work together through parallel, but distinct processes and functions. We believe that when each partner focuses on fulfilling its own critical mission, the Department achieves a holistic system of prevention and support. For example, while FAP is providing treatment and support to a domestic abuse victim, law enforcement is working to investigate the matter if the victim files an unrestricted report. This separation of both functions and lines of effort ensures that FAP can maintain its primary focus on ensuring victim safety; provide clinical services to reduce and mitigate victim trauma; and support family re-stabilization, as appropriate. Meanwhile, law enforcement and legal personnel engage and apply their expertise to investigate criminal allegations and prosecute offenders, as warranted.

The Family Advocacy Program

The keystone of the Department of Defense's response to domestic abuse and child maltreatment is the Family Advocacy Program. The Department's FAP is designed solely to prevent and address domestic abuse, child abuse and neglect, and problematic sexual behavior in children and youth in military families. The Department of Defense FAP office is the policy proponent for prevention and response to domestic abuse, child abuse and neglect, and problematic sexual behavior in children and youth. FAP services are provided through the Military Service FAPs, which foster awareness of the program across their Service; train leaders, Service members, and their families; and implement initiatives geared toward preventing and responding to domestic abuse, the specific issue to be addressed today. Each Military Service FAP coordinates with multiple partners and stakeholders to ensure adult and child victim safety, provide victim advocacy and support, and manage the Incident Determination Committee (IDC) process for determining if an incident meets the clinical threshold for more intensive intervention services and for recording in the FAP Central Registry—a database for tracking trends across DoD.

FAP Oversight

To ensure consistency in the implementation of the FAP across the Military Services, DoD FAP provides oversight of Service FAP programs, policies, and procedures through a comprehensive FAP Oversight Framework. The objective of the FAP Oversight Framework is to ensure that all three Military Departments and the four Military Services implement and execute a comprehensive FAP across the domains of prevention, response, reporting, intervention, treatment, advocacy, risk management, and safety planning. The goals of the framework are twofold: compliance - to ensure the Military Services are fulfilling applicable law, regulatory, and policy requirements; and evaluation - to confirm that Service FAP programs and efforts meet the high standards established by Congress, DoD, and the Service-specific regulations and policies. Oversight also includes standardization of processes and procedures (where appropriate), management of research activities, evaluation of the research results, implementation of evidence-based programs, and to the extent possible, emphasis on the utilization of metrics as the basis for program compliance and evaluation.

The framework is designed to allow for some customization by each Service where appropriate to address unique, Service-specific factors and to align with the respective Service identity and culture. Most importantly, the FAP Oversight Framework ensures that prevention efforts are focused on identified risk and protective factors; that clinical assessment and treatment protocols utilizes the best, evidence-based and -informed models; that awareness and education campaigns are military-specific; and that victim advocacy is guided by the most current best practices in addressing victim safety and risk reduction.

FAP Domestic Abuse Response Process

In general, the FAP reporting and response process begins when FAP receives an allegation that an incident of domestic abuse has occurred. The report may go to FAP directly (such as from the victim or neighbor who may have observed the incident) or may be forwarded to FAP from another coordinated community response partner (such as law enforcement, the chain of command, or a medical care provider). If physical injury is involved, FAP makes a referral for medical assessment and treatment as well. A FAP clinician responds and performs an assessment to ensure the safety of the victim and all other family members and to gather clinical information to determine any immediate support needs. Concurrently, unless the victim has elected a restricted report, the member's command and military law enforcement are informed and execute their respective processes.

Within 30 days of the incident report, the Service FAP IDC will meet and employ a rigorous and quantifiable evidence-based tool, called the Decision Tree Algorithm, to determine if the incident meets the clinical threshold for abuse. If the IDC determines that an incident "meets criteria," the case is referred to a clinical case review team which develops an intervention plan. Even if the IDC determines that the incident does not meet the clinical threshold for abuse, but that risk factors for potential abuse are present, appropriate intervention services will be offered to the Service member and family.

When an allegation of domestic or intimate partner abuse is received, the victim is immediately offered the services of a Domestic Abuse Victim Advocate. If a victim of domestic and intimate partner abuse elects to file a restricted report, the command and law enforcement are not notified, but all other medical and victim advocacy support services are provided.

Domestic Abuse

In order to assist the Department in improving its response to domestic violence, section 591 of the National Defense Authorization Act for FY 2000 required the Secretary of Defense to establish the Defense Task Force on Domestic Violence. From 2000-2003, the Task Force conducted a comprehensive review of the Department's efforts to address domestic violence and generated recommendations that today remain embedded in prevention and response processes across the coordinated community response. A key enhancement to the Family Advocacy Program was the addition of Domestic Abuse Victim Advocates to provide early engagement and support of domestic abuse victims in a confidential environment.

A victim's decision to report domestic abuse can be a complicated and traumatic choice, as some victims of domestic abuse may elect to stay in the relationship with the offender. The Department has long acknowledged that the stigma and victim re-traumatization often associated with law enforcement and command involvement in responding to domestic abuse are powerful disincentives to reporting, yet a victim who declined to report had little hope of receiving necessary treatment, care, and support. With a view to resolving this conundrum in favor of caring for victims, the Department introduced the restricted reporting option for adult victims of domestic abuse.

The restricted report option is for adult victims who ***do not*** want an official investigation of the incident. Victims of domestic abuse who desire to make a restricted report must report the abuse to one of the following specified personnel: a victim advocate, a healthcare provider, or a FAP clinician or supervisor. Restricted reporting ensures that every victim has access to medical care, clinical counseling, support, and victim advocacy services, even if that victim does not wish to pursue law enforcement or command actions against the offender. The victim always retains the option to change the report to unrestricted status, at which time law enforcement and the command would be engaged. Restricted reporting gives adult victims additional time to consider reporting the domestic abuse incident to law enforcement or the command, while benefiting from receiving relevant information, treatment, and support. DoD policy requires a response that is respectful of the victim's personal relationship decisions and choice of reporting options.

FAP Support

The Department is committed to providing services that address victim safety, respect victim rights, and support stabilizing the family as a unit, when appropriate. Department policy, updated in April of 2017, addresses standards of competence for all victim assistance personnel and standards of service—all of which are consistent with national victim assistance standards, while remaining cognizant of the unique needs of the military community. Although many partners in the coordinated community response model employ victim advocates, Service FAP clinicians and FAP Domestic Abuse Victim Advocates are assigned specifically to respond to victims of domestic abuse at the installation level. FAP clinicians are licensed clinical providers who offer services and support to domestic abuse victims and to offenders as well as to children affected by domestic abuse. Clinicians conduct psycho-social assessments, risk assessments, and safety planning; develop treatment plans; and provide clinical services. Clinical treatment aims to support the victim, mitigate the impact of the abuse, and assist the offender in ending the abusive behavior. FAP Domestic Abuse Victim Advocates are available 24-hours a day and work directly with victims, provide ongoing safety assessments, and when needed, accompany victims to court to secure civil protective orders, all with a view to reducing the risk of re-offense and promoting victim and family safety and empowerment. Victim advocacy services are offered to victims with the goal of ensuring that victims are actively involved in all aspects of their safety and service plans. FAP clinicians and domestic abuse victim advocates assess risk and safety on a continual basis while providing services to victims, to include any safety planning and referrals to civilian resources or Veterans Affairs if a victim leaves the military system. The Department is committed to ensuring an appropriate and timely response to victims and has initiated the development of a staffing tool to ensure that an adequate number of trained FAP clinicians and victim advocates are always available for these purposes.

FAP is designed to be both preventive and rehabilitative in nature and to facilitate clinical treatment for both victims and offenders. FAP clinical cases are closed as either “resolved” or “unresolved” based on FAP assessment of victim safety and security and FAP determinations of the likelihood of offender recidivism. It is important to note that under the coordinated community response model, FAP **does not** conduct criminal investigations of domestic abuse or neglect, has **no role** in disciplinary action against Service members found to have engaged in criminal or inappropriate conduct, and **does not** track adjudication of cases by law enforcement,

the command, or the judicial system. Under the coordinated community response model, these other processes are the sole responsibility of Military Service law enforcement and Military Criminal Investigative Organizations, lawyers, the commander, and duly-empowered judges. Under the coordinated community response model, these other processes are separate from FAP, although law enforcement investigations, command-imposed discipline, and criminal prosecutions may be conducted in parallel to FAP processes.

The important distinctions between FAP and these other processes notwithstanding, FAP clinicians and victim advocates work regularly with the chain of command to provide information about what the commander can do to protect and assist victims of abuse. FAP also works with Staff Judge Advocates and other legal counsel to refer victims who qualify for assistance through the Special Victim Investigation and Prosecution Counsel services.

The Department places specific emphasis on primary and targeted prevention activities, to include promoting awareness of signs, symptoms, and risk factors associated with domestic abuse, as well as the treatment and rehabilitative services that FAP provides. Department policy requires Service FAPs at the installation level to promote public awareness of the FAP program and provide training and education about domestic abuse and the services and support available through FAP to commanders, senior enlisted advisors, Service members and their families, DoD civilian employees, and contractors. The Department also endeavors to strengthen family functioning and resilience by promoting the protective factors that serve as buffers to abuse, including building and sustaining safe, stable, and nurturing family relationships. Training activities in this vein include information and classes to assist Service members and their families in strengthening their relationships, building parenting skills, and adapting successfully to military life.

Data Collection/Reporting and Trends in Domestic Abuse and Child Abuse and Neglect

Data collection is critical to the Department's efforts to track, identify, and understand domestic abuse and child abuse and neglect trends, with a view to informing future prevention and response actions and initiatives. The FAP Central Registry captures demographic and FAP-specific clinical data on domestic abuse and child abuse and neglect incidents that "meet criteria" for abuse or maltreatment, as determined by a Service FAP Incident Determination Committee.

It is important to note that measures of accountability (such as command action), law enforcement data, and legal dispositions related to domestic abuse and child maltreatment cases are tracked via mechanisms *separate from* the FAP Central Registry. The Department believes that co-mingling accountability, law enforcement, and legal disposition data with FAP clinical data could have significant adverse consequences and unintended second- and third-order effects. If every report or referral to FAP is perceived to require a follow-on investigative, legal, or command disciplinary action, it is likely that there would be a decrease in self-reporting and participation in treatment for both victims and offenders, as well as a decline in command referrals for preventive intervention. If a victim of domestic abuse chooses to stay in the relationship with the offender, the perception that seeking help through FAP would by itself invoke command or legal action that could threaten family integrity or adversely affect an offender's military career could very well make the victim reluctant to seek help through FAP and thus deprive that victim of necessary care, support, and advocacy services.

Domestic Abuse Defined

The Department defines domestic abuse, which includes domestic violence, as "a pattern of behavior resulting in emotional/psychological abuse, economic control, and/or interference with personal liberty that is directed toward a person who is a current or former spouse; a person with whom the abuser shares a child in common; or a current or former intimate partner with whom the abuser shares or has shared a common domicile." DoD policy distinguishes two types of adult victims under the category of domestic abuse: spouses and intimate partners. Spouse abuse involves an incident in which either the victim or offender may be an active duty Service member or the civilian spouse of an active duty Service member. Intimate partner abuse is defined as an incident in which either the victim or offender may be an active duty Service member or civilian partner who is "a former spouse, a person with whom the victim shares a child in common, or a current or former intimate partner with whom the victim shares or has shared a common domicile." Individuals who experience sexual assault and who fall outside of the definition of intimate partner receive services through the Department's Sexual Assault Prevention and Response program.

In FY 2018, FAP received 15,242 reports of suspected spouse abuse. Approximately half of those incidents (7,015) met the DoD criteria for domestic abuse. These "met criteria" incidents involved 5,550 unique spouse victims. The FY 2018 rates of spouse abuse reporting

and “met criteria” incidents do not indicate significant increases when compared to the past decade. In FY 2018, there were 1,670 incidents of “met criteria” intimate partner abuse, involving 1,024 unique victims. Unlike child abuse and neglect, for which there exist federal definitions and standards and which are tracked nationwide through the Department of Health and Human Services, there is no standard or centralized mechanism in the civilian sector to track civilian rates of domestic abuse for comparison to the military population. This is due, in part, to the fact that each state has different laws and definitions of domestic abuse, which makes tracking, aggregation, and comparison of incidents difficult, if not impossible.

Initiatives and Programs

Although the Department considers our prevention and response actions to be comprehensive, we recognize that, much like sexual assault and suicide, domestic abuse presents human factor challenges that require continuous and persistent efforts to train and educate our leaders, Service members, and families in order to improve the effectiveness and responsiveness of our system.

Notably, DoD is partnering with the University of California, Los Angeles (UCLA)/Duke and the National Child Traumatic Stress Network to train FAP clinicians and home visitors on trauma-informed care in the military setting. DoD FAP is also collaborating with the National Center on Shaken Baby Syndrome to deliver standardized training to new parents to cope with periods of inconsolable infant crying. Additionally, we collaborate across all four Services and leverage the resources of Military OneSource, the Department’s 24/7/365 virtual family support information and referral service, to sustain standardized public awareness messages and provide direct access to resources that encourage Service members and families to seek help early and often.

Further, DoD is leading several ongoing initiatives to strengthen our FAP processes. The scope and breadth of these ongoing initiatives are significant: once brought to fruition, they will affect policies and processes both internal and external to the DoD. For example, we are working with expert academic partners to develop cutting-edge clinical tools to aid FAP clinicians in risk assessment and safety planning, and we are engaging in concerted efforts to inform state lawmakers of the benefits of requiring reciprocal reporting to FAP by their state civilian CPS agencies of child abuse and neglect allegations involving military families. The

Department is also sponsoring numerous research projects to develop new evidence-based tools and processes that will enable FAP to better determine risk and protective factors associated with domestic abuse and to enhance the effectiveness of abuse prevention and response training for commanders, leaders, and first responders. A brief discussion of some of the Department's major initiatives and programs follows:

Child Abuse and Neglect and Domestic Abuse Integrated Project Team

In 2013, the Undersecretary of Defense for Personnel and Readiness directed a comprehensive review of all components of the coordinated community response regarding domestic abuse and child maltreatment. Two Rapid Improvement Events resulted in the identification of 37 recommendations that warranted focused attention. An Integrated Project Team of senior executives and leaders tracked the assessment of these issues. As of 2018, all 37 of the recommendations have been addressed or implemented, resulting in improvements across all elements of the coordinated community response system.

Incident Determination Committee (IDC)/ Decision Tree Algorithm (DTA)

The purpose of the IDC, an evidence-based approach designed by researchers from New York University (NYU) with sponsorship by the Department of the Air Force, is to determine whether reports of suspected domestic abuse (or child abuse and neglect) meet the DoD definitions of abuse, and therefore must be documented in the FAP Central Registry. This decision is known as the Incident Status Determination (ISD). All incidents of alleged abuse or neglect must be presented to the IDC.

The IDC uses a DTA, also developed by NYU, which was developed and rigorously tested prior to its implementation DoD-wide. The DTA process provides the IDC with clear and consistent descriptors of the acts and the impact on the victim, which determines whether the incident meets criteria for abuse or neglect. In child sexual abuse and domestic abuse-related sexual assault, the determination as to whether an incident meets criteria is based solely on the act. The DTA provides a consistent, Department-wide process and criteria for assessing incidents of both domestic abuse and child abuse and neglect.

Incident Severity Scale

The Incident Severity Scale is an evidence-based algorithm developed by researchers at NYU to accurately determine the level of severity of an incident of domestic abuse or child abuse or neglect. Historically, abuse and maltreatment incident severity ratings were based on the FAP clinician's individual clinical judgment. Given the potentially significant effects of abuse on victims and the implications regarding an offender's rehabilitation, DoD FAP committed to ensuring that its evaluations of incident severity were evidence-based and implemented the Incident Severity Scale's proven algorithm to enhance the accuracy and consistency of its assessments. Continued monitoring by DoD and Service FAPs, supplemented by implementation support provided by the Penn State University's Clearinghouse for Military Family Readiness through the Department's partnership with the United States Department of Agriculture, ensures that the Incident Severity Scale accurately reflects the severity of "met criteria" domestic abuse (and child maltreatment cases).

Intimate Partner Physical Injury Risk Assessment Tool

The Intimate Partner Physical Injury-Risk Assessment Tool (IPPI-RAT), developed by researchers from Kansas State University and Northern Illinois University, is an evidence-based tool used to predict and manage the risk of domestic and intimate partner violence ***with physical injury*** among individuals (both males and females) who have already experienced any incident of domestic or intimate partner violence, whether or not the initial incident involved physical abuse or injury. The IPPI-RAT was developed through extensive research funded by the DoD and Service FAPs and has been rolled out for use DoD-wide. This tool was designed specifically for use by FAP clinical providers as part of the comprehensive clinical assessment completed when an incident of domestic or intimate partner violence is reported. The IPPI-RAT is military-specific and has been determined to be as accurate as the best available civilian-sector instruments using similar risk measures. Standardized training on the application of the IPPI-RAT is available, and the tool is supplemented by a field-tested user's manual.

New Parent Support Program (NPSP)

The NPSP is a prevention program used across DoD to provide intensive, voluntary home visitation and support services to expectant and new parents of children from birth to age three.

Families may self-refer or may be referred by military or civilian service providers for voluntary screening, assessment, and services. NPSP services include: (1) screening for risk and protective factors associated with child abuse and neglect; (2) parent education and support targeted to the developmental needs of the infant or young child; (3) promoting nurturing and attachment to support the social and emotional development of children; (4) strengthening formal and informal social support; (5) referrals to concrete services and resources during times of need; and (6) building coping skills and strategies to strengthen family resilience. Currently, DoD is exploring strategies to enhance home visitors' identification of domestic abuse within the home and to promote collaboration with Domestic Abuse Victim Advocates to better support victims participating in the NPSP.

Collaboration with Federal and External Civilian Agencies

Service members and their families belong to a unique military community, but they are also citizens of the larger society. In addition to efforts internal to the Department, FAP endeavors to address domestic abuse and child abuse and neglect through extensive active engagement and collaboration with our federal partners and other civilian agencies with experience in addressing similar challenges. These partners and agencies include:

- The Department Of Health and Human Services Office on Child Abuse and Neglect
- The Department of Veterans Affairs
- The National Domestic Violence Hotline
- The Department of State Family Advocacy Program
- The Department of Justice
- The Federal Interagency Working Group on Violence Against Women
- The Federal Interagency Working Group on Child Abuse and Neglect
- The Federal Committee on Women and Trauma

Fatality Reviews

Family violence fatalities reflect the most serious breakdown in family well-being. In an effort to understand and learn from the circumstances involved in domestic and child abuse fatalities, the Department has directed the Military Departments to establish fatality review

teams, conduct annual fatality reviews, and provide the summarized results of their reviews to the DoD. An annual DoD Fatality Review Summit is subsequently convened to review and discuss the findings and recommendations of the Military Department fatality review teams.

DoD FAP invites federal partners and experts on domestic abuse and child abuse from the Department of Health and Human Services, the Department of Justice, the National Resource Center on Domestic Violence, and the Defense Centers of Excellence Violence Prevention and Resilience Directorate, and the DoD Suicide Prevention Office to participate in these heart-wrenching but necessary Fatality Review Summits. This critical collaboration provides invaluable information on military and civilian sector trends and promotes an exchange of ideas on strategies to improve the quality of fatality reviews and identify best practices in the review process. Most importantly, the collaboration seeks to identify areas of focus that will meaningfully contribute to the reduction and elimination of abuse-related fatalities. The *Period of PURPLE Crying* initiative directly resulted from observations generated through the fatality review process.

Conclusion

The Department of Defense is committed to continuing its efforts to seek, develop, and implement processes and practices that provide the highest caliber of support for families impacted by domestic abuse and child abuse and neglect. Through our Family Advocacy Program, we will continue to focus on prevention and rehabilitation to help ensure a military community that fosters safe, healthy, and resilient relationships. We are acutely aware that there is much more work to be done, and we pledge our unflagging efforts to effectively prevent and respond to domestic abuse and child abuse and neglect in the military. We need and welcome the continued interest and support of this Subcommittee and the Congress in advancing this essential work.

Ann Thomas (A.T.) Johnston
Deputy Assistant Secretary of Defense for Military Community and Family Policy

Mrs. Ann Thomas (“A.T.”) Johnston assumed the duties as Deputy Assistant Secretary of Defense for Military Community and Family Policy on February 26, 2018.

In this capacity, Mrs. Johnston is responsible for a broad portfolio that includes policy, advocacy, and oversight of all community support to service members and their families, including quality of life issues; Defense-state liaison initiatives; family, child, and youth programs; Military OneSource program and non-medical counseling resources; military spouse career advancement; morale, welfare, and recreation; defense resale policy for commissaries and exchanges; and family advocacy programs. Her oversight also includes casualty and mortuary affairs, and military funeral honors.

Prior to joining Military Community and Family Policy, Mrs. Johnston served as senior policy advisor to the House Energy and Commerce Committee and for Chairman Emeritus Joe Barton of Texas. Before joining the Committee, she served as Deputy Chief of Staff and Policy Director for Congressman Lee Terry of Nebraska.

Mrs. Johnston previously served in the White House as a Special Assistant to President George W. Bush in the Office of Legislative Affairs, overseeing coordination with the Senate, including the Energy and Natural Resources Committee, Environment and Public Works Committee, and the Commerce Science and Transportation Committee.

She was appointed Deputy Assistant Secretary at the Department of Energy in 2001, serving as the conduit for the Secretary of Energy to the Congress.

Prior to joining the Bush Administration, Mrs. Johnston worked for then Congressman Richard Burr managing a diverse portfolio of issues. Mrs. Johnston also worked in the private sector for two Fortune 200 Companies and two government affairs consulting firms.

Mrs. Johnston is from Wilson, North Carolina, and is a graduate of Wake Forest University.

Kenneth E. Noyes, J.D.

*Associate Director, Military Readiness and Family Policy
Family Advocacy Program Manager
Office of the Secretary of Defense*

For more than 24 years, Ken Noyes has been an advocate for the rights of domestic violence survivors and abused and neglected children. His law practice, established in 1994 specialized in child abuse/neglect and family law matters. In 1996 his work led to co-founding the Children's Law Center (CLC) in Washington, D.C., a legal advocacy non-profit organization that today has over 100 employees focused on representing children and families in the D.C. child welfare system. Ken is a current member of CLC's Emeritus Board.

In 1998, Ken joined the D.C. Coalition Against Domestic Violence (Coalition) and served in a few different roles until 2010, having begun his tenure as Operations Director of the Domestic Violence Intake Center, D.C. Superior Court. In 2000, he was promoted to Deputy Director of the Coalition and was the Executive Director from 2005 until 2010.

From April, 2010 to August, 2016 Ken served as a Senior Program Specialist in the Family Violence Prevention and Services Program, Administration for Children and Families, U.S. Department of Health and Human Services. His responsibilities included policy and systems change as well as federal interagency collaborations that addressed the intersections of domestic violence, child support, child abuse/neglect, housing, and LGBTQ populations. Ken also served as a member of the White House Working Group on HIV/AIDS, Violence Against Women, and Gender-related Health Disparities and was a member of the Federal Interagency Work Group on Violence Against Women, led by the Office of the Vice President. He was the team leader of a portfolio of formula grants with total annual appropriations in excess of \$150 million. He also led the development and implementation of the National LGBTQ Capacity-building Learning Center on Domestic Violence and worked closely with the Office of General Counsel on legal and legislative issues. Ken is a principal author of the Family Violence Prevention and Services regulations published in January, 2017.

From August, 2016 through February, 2018, Ken served as the Chief Operating Officer of the National Domestic Violence Hotline (Hotline) in Austin, TX. In that position, he managed all staff responsible for organizational operations, with principal oversight of programs and services for both the Hotline and LoveisRespect, the national teen dating violence helpline.

On June 27, 2018, Ken joined the Department of Defense in the Office of Military Family Readiness Policy as Associate Director/Family Advocacy Program Manager. He oversees child abuse and domestic abuse program and policy initiatives focused on prevention, intervention and rehabilitation supporting military members and their families. Ken is excited to be a member of this dynamic and passionate team. He considers this step in his career to be a return to his roots having begun his professional life in the United States Air Force in 1984 where he honorably served until 1988.