



Sexual Assault Prevention and Response

Sexual Assault Prevention and Response Program Manager

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Overview

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- **Definition of Sexual Assault**
 - **Trauma Informed Care**
 - **Consent**
 - **Restricted/Unrestricted Reporting Options**
 - Expedited Transfer
 - Protective Orders
 - **Military Resources**
 - **Safety Planning**



Sexual Assault

- Intentional sexual contact characterize by use of force, threats, intimidation, or abuse of authority, or when the victim does not or cannot consent. The term includes a broad category of sexual offenses consisting of the following specific UCMJ offenses: rape, sexual assault, aggravated sexual contact, abusive sexual contact, forcible sodomy (forced oral or anal sex), or attempts to commit any of these acts.



Trauma Informed Care

- An approach to engage people with histories of trauma that recognizes the presence of trauma symptoms and acknowledges the role that trauma has played in their lives. Trauma-informed services are based on an understanding of the vulnerabilities or triggers of trauma survivors that traditional service delivery approaches may exacerbate, so that these services and programs can be more supportive and avoid re-traumatization.



Consent

What is Consent:

- Words or overt acts indicating a freely given agreement to the sexual conduct at issue by a competent person.



What is **NOT** Consent:

- When expression through words or conduct that there is NO consent.
- Lack of verbal or physical resistance or submission resulting from the accused use of force, threat of force, or placing another person in fear does NOT constitute consent.
- A current or previous dating relationship does NOT constitute consent.
- Dress of the person involved does NOT constitute consent.



Reporting Options

Restricted Reporting:

- A process used by a Service member to report or disclose that he or she is the victim of a sexual assault to specified officials on a requested confidential basis. Under these circumstances, the victim's report and any details provided to the SARC, Healthcare Personnel, or a VA will not be reported to law enforcement to initiate an official investigation unless the victim consents or an established exception is exercised under DoDD 6495.01. (SAPR restricted reports require a signed DD Form 2910)

Unrestricted Reporting:

- A process that an individual covered by this policy uses to disclose, without requesting confidentiality or restricted reporting, that he or she is the victim of a sexual assault. Under these circumstances, the victim's report and any details provided to the SARC, Healthcare Personnel, a VA, command authorities, or other persons are reported to law enforcement and may be used to initiate the official investigation process. (SAPR unrestricted reports require a signed DD Form 2910)



Restricted Reporting

- Who may make a restricted report:
 - Active duty military personnel of the Armed Forces.
 - Members of Reserve or members of the National Guard in “Active Service”, Title 10 or Title 32 status.
 - It includes AGR, AT, IDT, ST, and ADSW for over 30 days. Does not include State AD.
 - Must be military.
- Criteria for restricted reporting. Victim must first report to one of these individuals:
 - SARC, VVA, or HCP:
 - HCPs will refer you to the SARC.
 - Chaplain:
 - Refer to SARC to make unrestricted/restricted report.



Restricted Reporting

Advantages:

- Privacy protected.
- Chain of Command is NOT notified.
- Medical care, counseling, and victim advocacy services offered.
- Collateral misconduct may not be discovered.

Disadvantages:

- No investigation.
- Perpetrator will not be prosecuted.
- No Contact, Temporary Protection, or Military Protection/Restraining Orders can be issued.



Unrestricted Reporting

- Report made to SARC, VA, or healthcare provider when the individual does not elect restricted reporting.
- Sexual assault reported through normal channels:
 - Chain of command
 - Law enforcement
 - AFOSI



Unrestricted Reporting

Advantages:

- Assistance from law enforcement including investigation.
- Assistance from command.
- Perpetrator may be caught and prosecuted.
- Medical care, counseling and victim advocacy services are provided.

Disadvantages:

- Lack of privacy.
- May or may not be punished for collateral misconduct after the conclusion of the assault case.
- Victims **CANNOT** change to restricted reporting.



Expedited Transfer

- An Expedited Transfer (ET) provides victims who file an unrestricted report of sexual assault the option of a permanent change of station (PCS) or a temporary or permanent change of assignment (PCA) to a location that will assist with the immediate and future welfare of the victim, while also allowing them to move to locations that can offer additional support to assist with healing, recovery, and rehabilitation.
- Members will only be eligible to receive one facilitated ET for an unrestricted report of sexual assault.
- ET is available to active (to include non-prior service Airmen performing initial skills training), guard, and reserve component Airmen who file an unrestricted report of sexual assault or other offense listed in UCMJ Articles 120, 120a, 120c or 125.
- The installation or host wing commander considers potential transfer of the alleged offender instead of the victim if appropriate. At a minimum, the installation or host wing commander will control, as appropriate, the alleged offender's access to the victim who made the unrestricted report.



Military/Civilian Protective Order

- Military Protective Order (MPO) may be issued by the victim's immediate commander.
- Security Forces personnel shall enforce MPOs issued by military commanders and Civilian Protective Orders issued to or on behalf of Air Force personnel by civilian courts.



Protection Order

- Sexual Assault Protection Order can be for 30 days, extended to 1 year.
- Apply at Reno/Sparks Justice or Family Court
- Who can apply: Victim (if age 18+) or Parent/Guardian of child victim.
- (1) That the suspect stay away from the victim's home, school, business, place of employment, or any place the victim/children go regularly;
- (2) That the suspect refrain from contacting (including through electronic means or through 3rd parties), intimidating, threatening, harassing, injuring, or otherwise interfering with the victim, children, pets and any other person including, a member of the family or household of the victim specifically named by the Court. *Other provisions as ordered by the court may apply.*



Military Resources

- Sexual Assault Response Coordinator (SARC)
- Volunteer Victim Advocate (VVA)
- Health Care Provider (HCP)
- Chaplain
- Special Victims Council



Sexual Assault Response Coordinator

- Sexual Assault Response Coordinator (SARC)
 - The single point of contact at an installation or within a geographic area who oversees sexual assault awareness, prevention, and response training; coordinates medical treatment, including emergency care for sexual assault victims covered under Air Force Instruction (AFI) 90-6001; and tracks the services provided to a victim of sexual assault, covered under AFI 90-6001, from the initial report through final disposition and resolution.



Volunteer Victim Advocate

- Volunteer Victim Advocate (VVA)
 - A person who, as a victim advocate, shall provide non-clinical crisis intervention, referral, and ongoing non-clinical support to adult sexual assault victims. Support will include providing information on available options and resources to victims. The SAPR VA, on behalf of the sexual assault victim, provides liaison assistance with other organizations and agencies on victim care matters and reports directly to the SARC when performing victim advocacy duties.



Healthcare Personnel

- Healthcare Provider (HCP)
- Includes those individuals who are employed or assigned as healthcare professionals, or are credentialed to provide healthcare services, at a medical or dental treatment facility or who are providing such care elsewhere at a deployed location or otherwise in an official capacity. The term also includes individuals assigned to the Military Treatment Facility (MTF) who are directed by or assigned to assist or otherwise support healthcare professionals in providing healthcare services. Personnel who otherwise fall under this definition may perform duties that are not healthcare related such as command or supervisory duties. When doing so, they are not “Healthcare Personnel” for the purposes of receiving a restricted report unless a victim notifies them he or she intends to make a restricted report to them as a provider not a member of their chain of command. Healthcare providers may include, but are not limited to:
 - Licensed physicians practicing in the MHS with clinical privileges in obstetrics and gynecology, emergency medicine, family practice, internal medicine, pediatrics, urology, general medical officer, flight surgeon, psychiatrists, or those having clinical privileges to perform pelvic examinations or treat mental health conditions.
 - Licensed advanced practice registered nurses practicing in the MHS with clinical privileges in adult health, family health, midwifery, women’s health, mental health, or those having clinical privileges to perform pelvic examinations.
 - Licensed physician assistants practicing in the MHS with clinical privileges in adult, family, women’s health, or those having clinical privileges to perform pelvic examinations.
 - Licensed registered nurses practicing in the MHS who meet the requirements for performing a SAFE as determined by the local privileging authority. This additional capability shall be noted as a competency, not as a credential or privilege.
- A psychologist, social worker or psychotherapist licensed and privileged to provide mental health care or other counseling services in a DoD or DoD-sponsored facility.



Chaplain

- Chaplain (Ch)
 - Chaplains have *privileged* communication that allows them to maintain confidentiality with the member, but does not allow the initiation of Restricted/Unrestricted reporting options for victim.
 - Chaplains will not breach confidential communications, but if the member would like a restricted/unrestricted case option, they must speak with the SARC or VVA.





Special Victims Council

- Special Victims Council (SVC)
- Attorneys who are assigned to provide legal assistance to sexual assault victims through independent representation; builds and sustains victim resiliency; empowers victims; increases the level of legal assistance provided to victims.
- Legal representation and advocacy on issues related to the criminal or administrative disposition of the sexual assault (e.g., attending interviews with military investigators and military trial/defense counsels, drafting victim impact statement, etc.)
- Referral to Trial Defense Service or Area Defense Counsel for collateral misconduct, if necessary.
- Advice to client on personal civil legal affairs that have a direct nexus to the sexual assault.
- Assisting client in filing an expedited transfer request, military/civilian protection order and obtaining records related to the sexual assault investigation or case disposition.
- Traditional legal assistance services.



Resources

- **Sexual Assault Support Reno:**
 - Sexual Assault Support Services 24/7: 775-221-7600
- **Crisis Support Services:**
 - Crisis Call Center 24/7 Crisis Hotline: 800-273-8255 or 775-784-8090
 - Text: "ANSWER" to 839863
- **DOD Safe Help Line:**
 - <https://www.safehelpline.org/>
 - 877-995-5247
- **Victim's Witness Assistance Center Reno:**
 - 775-328-3210
- **Reno Police Department Victim Advocate:**
 - 775-657-4519
- **Communities United to End Sex Trafficking (AWAKEN) Reno:**
 - AWAKEN: 775-393-9183
- **Veterans Administration (VA) Reno:**
 - Military Sexual Trauma Coordinator:
 - 775-326-2920



Safety Assessment

- There will be a safety assessment capability for the purposes of ensuring the victim, and possibly other persons, are not in physical jeopardy.
- A safety assessment will be available to all Service members, adult military dependents, and civilians who are eligible for SAPR services, even if the victim is not physically located on the installation.
- The installation commander or the deputy installation commander will identify installation personnel who have been trained and are able to perform a safety assessment of each sexual assault victim, regardless of whether he or she filed a Restricted or Unrestricted Report.
- Individuals tasked to conduct safety assessments must occupy positions that do not compromise the victim's reporting options.
- The safety assessment will be conducted as soon as possible, understanding that any delay may impact the safety of the victim.





Questions?

