



#### Army Family Advocacy Program



### **New Parent Support Program**

#### Home Visitation Model

- Developed specifically for first time expectant parents and parents with children from birth to 3 years of age who have been assessed to be at risk for child maltreatment and/or domestic abuse
- Family Needs Screener empirically validated screener to assess for risk
  Intake Assessment completed by HV
  Intensive home visitation by licensed nurses,
- clinical social workers or marriage and family
- Encourages father/intimate partners early
  - involvement

    Develops a Family Service Plan incorporating unique needs of each family

  - Role modeling and mentoring
     Educational focus on health and child development



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**Army Family Advocacy Program** 



## **Restricted Reporting Policy for Incidents of Domestic Abuse**

- Prepared ALARACT Msg provides the framework for implementing confidential restricted reporting for victims of domestic abuse (effective date: 22 April 06)
  - Limited to adult victims of domestic abuse eligible to receive military medical treatment, including civilians and contractors eligible to receive military healthcare outside CONUS on a reimbursable basis
  - Must report to specified individuals: victim advocate (VA), VA supervisor or healthcare provider (includes FAP clinical social workers)

  - Six exceptions to restricted reporting outlined in DoD Memo When disclosure is warranted, VA or healthcare provider must consult with their supervisor and servicing legal office prior to disclosure.
  - When there is uncertainty on whether the exception applies, matter will be brought to Garrison Commander for decision



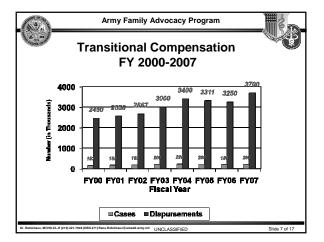
Army Family Advocacy Program



## **Transitional Compensation**

- FY94 National Defense Authorization Act (Public Law 103-160)
  - Provides monetary compensation and benefits for dependents of military personnel on active duty who are separated or sentenced to total forfeiture of pay and allowances for a dependent-abuse offense
  - Monthly monetary compensation IAW DIC rates -
    - \$1091 for spouse
    - \$271 for each eligible child
    - \$462 for child only

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#### Army Family Advocacy Program



Army Fatality Review – Allows the Army to identify systemic problems and formulate lessons learned

FY03	FY04	FY05	FY06	Significant Findings – Child Abuse
6/18	3/13	8/18	2/12	# of child abuse fatalities that occurred while the Soldier was deployed
56 %	54%	39%	67%	% of adults involved in child abuse fatalities who had active substance abuse/ mental health issues
76%	62%	83%	83%	% of all child deaths when children were under the age of four
FY03	FY04	FY05	FY06	Significant Findings - Spouse Abuse

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none	none	none	none	There was no <u>direct</u> evidence that domestic violence fatalities occurred as a result of deployment**
N/A	80%	63%	40%	% of domestic violence fatalities where the couples were separated as a result of severe marital discord
2/8	3/5	4/16	6/15	# of domestic violence fatalities where there was no indication of risk or involvement with the FAP

\*\* Note: Army Criteria: Soldier deployed, re-deployed OIF/OEF within 6 months prior to fatality

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# FATALITY REVIEW FY 03-07 CHILD DEATHS(civ.rates vs. actual)

- 7485(.01)=75 fatalities: actual 17 (FY 03)
- 7654(.01)=77 fatalities: actual 13 (FY 04)
- 6462(.01)=65 fatalities: actual 18 (FY 05)
- 6456(.01)=65 fatalities: actual 12 (FY 06)
- 7727(.01)=77 fatalities: actual 14 (FY 07)
- \* Fatalities in Texas represent 1% of all investigated cases and 50% of all fatalities had previously been investigated

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## Army Family Advocacy Program



## **Keys to Success**

- Ensure the safety of victims is paramount
   Issue and enforce protection orders
   Grant FAPM accessibility on high risk cases
   Ensure program is adequately staffed
   Utilize the Family Advocacy Committee to analyze issues, trends and recommend solutions
   Fully implement the ACS Accreditation standards
   Target high risk populations with effective prevention and education programs

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