BY ORDER OF THE SECRETARY OF THE AIR FORCE

AIR FORCE INSTRUCTION 36-6001

29 SEPTEMBER 2008

Personnel

SEXUAL ASSAULT PREVENTION AND RESPONSE (SAPR) PROGRAM

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This instruction implements Air Force Policy Directive (AFPD) 36-60, 28 March 2008, *Sexual Assault Prevention and Response (SAPR) Program*, and Department of Defense Instruction (DoDI) 6495.02, 23 June 2006, *Sexual Assault Prevention and Response (SAPR) Program Procedures*. It assigns responsibility for the prevention of and response to sexual assault and establishes command relationships, authorities and responsibilities in support of the policy. This instruction applies to all levels of command and all Air Force organizations including the Active Duty, Air Force government civilian employees, Air Force Academy, and Air National Guard and Air Force Reserve components while in Federal service. It addresses the requirements of the Ronald W. Reagan National Defense Authorization Act for fiscal year 2005, P.L. 108-375, as amended and supplemented, 28 October 2004, Section 577(e). Failure to observe the prohibitions and mandatory provisions of this instruction in paragraphs **2.12.1.**, regarding the requirement to report sexual assaults, and paragraph **3.1.9.**, and its sub paragraphs regarding safeguarding covered communications, is a violation of Article 92, *Uniform Code of Military Justice* (UCMJ). Violations may result in administrative disciplinary action without regard to otherwise applicable criminal or civil sanctions for violations of related laws. Violations by civilian employees may result in administrative disciplinary action without regard to otherwise applicable criminal or civil sanctions for violations of related laws. Violations by contactor personnel will be handled according to local laws and the terms of the contract.

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Chapter 1

OVERVIEW AND FUNCTIONAL RESPONSIBILITIES

Section 1A—General Information

1.1. Program Purpose. The Sexual Assault Prevention and Response (SAPR) Program reinforces the Air Force's commitment to eliminate sexual assaults through awareness and prevention training, education, victim advocacy, response, reporting, and accountability. The Air Force promotes sensitive care and confidential reporting for victims of sexual assault and accountability for those who commit these crimes.

1.2. Applicability and Scope. Supersedes all regulatory and policy guidance within the Air Force not expressly mandated by law that is inconsistent with this Instruction.

1.3. Definitions. Terms used in this Instruction are defined in **Attachment 1**.

1.4. Policy. The United States Air Force does not tolerate sexual assault. Sexual assault is criminal conduct that falls well short of the standards America expects of its men and women in uniform. It violates Air Force Core Values. Inherent in the Air Force Core Values of Integrity First, Service Before Self and Excellence in All We Do, is respect: self-respect, mutual respect, and respect for the Air Force as an institution. It is Air Force policy to:

1.4.1. Eliminate sexual assault within the Department of the Air Force by fostering a culture of prevention, providing education and training, response capability, victim support, reporting procedures, and accountability that enhances the safety and well-being of all its members.

1.4.2. Provide an immediate, trained response capability for each report of sexual assault and ensure victims are protected and treated with dignity and respect, and receive timely access to appropriate treatment and services.

1.4.3. Ensure strong commander-focused prevention and response programs, as well as law enforcement, investigative, and criminal justice policies and procedures that address victim safety and hold assailants accountable for their actions to the fullest extent of the law.

1.4.4. Encourage prompt, complete, unrestricted reporting of sexual assault allegations to activate victim services and accountability responses. Victims should be appropriately encouraged to make unrestricted reports.

1.4.5. Provide a restricted reporting option that allows a Service member who is sexually assaulted to confidentially disclose information about the assault to specified individuals and receive medical treatment, counseling, and advocacy without automatically triggering an official investigative process.

1.4.6. Prohibit the enlistment or commissioning of personnel in the active duty Air Force, Air National Guard, or Air Force Reserve components when the person has a qualifying conviction (see **Attachment 1**) for a crime of sexual assault.

Section 1B—Functional Responsibilities

1.5. Air Force Headquarters.

1.5.1. The Assistant Secretary of the Air Force for Manpower and Reserve Affairs (SAF/MR) serves as an agent of the Secretary and provides guidance, direction, and oversight for all matters pertaining to the formulation, review, and execution of plans, policies, programs, and budgets addressing sexual assault.

1.5.2. The Inspector General (SAF/IG) is responsible for oversight of criminal investigations performed by the Air Force Office of Special Investigations (AFOSI) and for other investigations and matters under his or her authority as Inspector General. SAF/IG is responsible for ensuring proper training of AFOSI personnel in sexual assault policy and related matters, and ensures all unrestricted reports of sexual assault received by AFOSI are tracked and reported regardless of who conducts the investigation. Maintains effective liaison with HQ USAF/A7S for all matters related to sexual assault reporting and investigations.

1.5.3. The Air Force General Counsel (SAF/GC) establishes legal policy and provides legal oversight and guidance for all aspects of sexual assault policy, and other matters related to sexual assault as needed, except those matters directly related to the administration of military justice.

1.5.4. The Deputy Chief of Staff for Manpower, Personnel and Services (HQ USAF/A1) is the primary HAF Focal Point (FP) for activities related to this Instruction to include resourcing of the program and reporting on program accomplishment. HQ USAF/A1 develops Air Force Instructions (AFI) implementing AFPD 36-60, making maximum use of goals, objectives, and performance-based measures that address sexual assault issues during peacetime, contingencies, hostilities, and war.

1.5.4.1. The Air Force Sexual Assault Prevention and Response (SAPR) Program Manager (HQ USAF/A1SF) develops and implements SAPR policy. HQ USAF/A1SF is also responsible for development and approval of required training for Air Force Sexual Assault Response Coordinators (SARCs) and Air Force Victim Advocates (VAs) compliant with DoDI 6495.02, *Sexual Assault Prevention and Response (SAPR) Program Procedures.*

1.5.4.2. Air Force Personnel Center (AFPC/DPSIAP) oversees the development, implementation, and management of SAPR program operations to support Major Command (MAJCOM) and installation level SARCs in executing established policies.

1.5.5. The Judge Advocate General (HQ USAF/JA) is the HAF FP for military justice activities related to this Instruction and assists in developing, coordinating, and executing legal policy and essential procedural guidance for the management of sexual assault issues. HQ USAF/JA is responsible for ensuring required training of Staff Judge Advocates (SJA) and trial counsel in sexual assault policy and related matters, and is responsible for administering the Victim and Witness Assistance Program (VWAP).

1.5.6. The Surgeon General (HQ USAF/SG) is the HAF FP for healthcare policies, clinical practice guidelines, related procedures, and standards governing Air Force healthcare programs for victims of sexual assault. HQ USAF/SG is responsible for ensuring required training of Healthcare Personnel in sexual assault policy and related matters and appropriate management of medical records.

1.5.7. The Chief of Chaplains (HQ USAF/HC) is the HAF FP for Chaplain Service policies and procedural guidance for matters related to sexual assault. HQ USAF/HC is responsible for ensuring required training of members of the Chaplain Service in sexual assault policy and related matters.

1.5.8. The Director, Security Forces (HQ USAF/A7S) is the HAF FP for security and law enforcement guidelines and related procedures addressing indecent exposure, sexual misconduct, and voyeurism IAW AFI 31-206, *Security Forces Investigations Program.* HQ USAF/A7S is responsible for ensuring Security Forces personnel are trained in sexual assault policy and related matters, and ensures all received unrestricted reports of sexual assault are provided to AFOSI for tracking and reporting purposes. Maintains effective liaison with AFOSI for all matters related to sexual assault reporting and investigations.

1.5.9. The Chief of Air Force Reserve (HQ USAF/RE) implements sexual assault prevention and response programs for Air Force Reserve Command (AFRC) that comply with this Instruction and ensures the training of Reserve personnel in sexual assault policy and related matters.

1.5.10. The Chief of the National Guard Bureau (NGB) implements sexual assault prevention and response program for all National Guard members. The Director of the Air National Guard (NGB/CF) implements sexual assault prevention and response programs for Air National Guard (ANG) personnel who are in a federal status consistent with this AFI and NGB policies. The Director of the ANG ensures the training of ANG personnel in sexual assault policy and related matters.

1.6. Major Command (MAJCOM) and Organizations Above Wing Level.

1.6.1. **MAJCOM Commanders implement sexual assault prevention and response programs consistent with these policies and procedures. The MAJCOM Vice Commander or equivalent is designated as the responsible official to act for the MAJCOM Commander. The MAJCOM Director of Manpower and Personnel (A1) provides functional oversight for the program; the AFRC/SG provides functional oversight for Air Force Reserves. See Chapter 2 for detailed responsibilities for MAJCOM SARCs.**

1.6.2. **HQ Air Education and Training Command (AETC) develops and distributes, in coordination with HQ USAF/A1, appropriate sexual assault educational materials for all levels of accession, technical training, and professional military education sources.**

1.6.3. Commanders or Directors of Direct Reporting Units (DRU), Field Operating Agencies (FOAs), or other similar above-wing organizations implement sexual assault prevention and response programs consistent with these policies and procedures. The Commander or Director may designate a vice or deputy to act on his or her behalf.

1.7. Commander Air Force Forces (COMAFFOR).

1.7.1. The COMAFFOR is responsible for implementing AF SAPR policy in the commander's area of responsibility (AOR). See **Chapter 4.**

1.7.2. The COMAFFOR's A1 will provide functional oversight for the SAPR program in their AOR. See **Chapter 4.**

1.8. Installation Level.

1.8.1. The installation Wing Commander (WG/CC), or equivalent, implements local sexual assault prevention and response programs ensuring that an immediate, trained response capability exists to support victims of sexual assault. The installation Wing Vice Commander (WG/CV), or equivalent (see **Attachment 1**), is designated as the responsible official to act for the WG/CC and supervises the

installation SARC—supervision will not be further delegated. The WG/CV ensures the SARC is resourced and provided appropriate office space, office furnishings, and supplies.

1.8.2. **Installation SARCs implement and manage the installation level sexual assault prevention and response programs. See Chapter 2 for detailed responsibilities related to program execution.**

Chapter 2

PROGRAM EXECUTION

Section 2A—Principal Stakeholders and Responsibilities for Execution

2.1. Offices Primarily Responsible for Program Execution. **MAJCOM and installation-level SARCs are responsible for executing the SAPR Program. First Responders (see Attachment 1), commanders, supervisors, and leaders (those not covered by prior categories such as Superintendents, First Sergeants, and Chief Master Sergeants) are also responsible for the effectiveness of the SAPR Program throughout their organizations and installation.**

2.2. MAJCOM SARC.

2.2.1. The MAJCOM SARC is responsible for administering the Sexual Assault Prevention and Response program within that MAJCOM and provides functional oversight and guidance for installation SARCs to ensure compliance with this Instruction and other applicable authority.

2.2.2. The MAJCOM SARC provides professional supervision and assistance for the installation SARC on matters such as policy interpretation, execution of duties, and other matters as warranted. When determined by the MAJCOM SARC, this assistance may require discussions with the installation SARC or VAs regarding restricted reporting communications from victims in order to assist the SARC in the performance of his or her duties. Such discussions may include personal identifying information for effective oversight.

2.3. Installation SARC.

2.3.1. Reporting directly to the installation WG/CV or equivalent, the SARC executes the Air Force's Sexual Assault Prevention and Response program at the installation level.

2.3.1.1. Because of the potential for legal, professional, or community conflicts of interest, the following military members cannot serve as SARCs, Alternate SARCs, or VAs: individuals on G-series orders, first sergeants, chief master sergeants, individuals associated with law enforcement or investigations, individuals assigned to the Office of the SJA, MTF personnel working in clinical roles with whom assault victims may come in contact, individuals assigned to Equal Opportunity (EO) offices, individuals assigned to the Office of the Installation Staff Chaplain, or individuals assigned to the wing's Inspector General staff.

2.3.2. The SARC serves as the installation's single point of contact for integrating and coordinating sexual assault victim care services. Services may begin at the initial report of sexual assault and continue through disposition and resolution of issues related to the victim's health and well-being. The SARC shall assist unit commanders as necessary to ensure victims of sexual assault receive the appropriate responsive care.

2.3.2.1. The SARC will track the status of sexual assault cases in his or her designated area of responsibility and provide regular updates to the WG/CV. For restricted reports, only non-identifying environmental information, as defined in paragraph **3.1.10.1.** of this AFI, will be provided to command authorities.

2.3.3. Eligibility to be a SARC. SARCs can be either an Air Force officer or DoD civilian employee.

2.3.3.1. Military SARCs must be in the grade of captain or above, designated as deployable resources, and support the Air Force's commitment to expeditionary missions, ensuring that SAPR capability is transferable to the battlefield (real or exercise).

2.3.3.1.1. Due to readiness commitments and AF-level deployment planning, military SARC positions cannot be converted to civilian positions without the approval of HQ USAF/A1.

2.3.3.1.2. SARC responsibilities are part of the 38F (Force Support) core competencies. Other officers or civilians, except those noted in paragraph **2.3.1.1.**, may serve as SARCs provided they are released by their career field program manager, successfully complete requisite training identified in paragraph **2.8.**, and are approved by AFPC Assignments Branch.

2.3.3.2. Installation civilian SARCs must be GS-12 or NSPS equivalent and are governed by the mandatory SARC Standard Civilian Position Description.

2.3.3.2.1. Civilian SARCs may volunteer to deploy contingent upon meeting required prerequisites (i.e., security clearance, weapons qualification, etc.) and subject to commander's approval.

2.3.3.2.2. At installations where there is a civilian and a military SARC, the civilian will hold the position of SARC and the military SARC will serve as the deputy.

2.3.3.3. Special Considerations for the Reserves.

2.3.3.3.1. Civilian Reserve SARC positions are graded at GS-12 or NSPS equivalent and are governed by the mandatory Reserve SARC Standard Civilian Position Description.

2.3.3.3.2. Civilian Reserve SARCs may volunteer to deploy contingent upon meeting required prerequisites (i.e., security clearance, weapons qualification, etc.) and subject to wing commander and HQ AFRC SAPR Program Manager approval.

2.3.3.3.3. Each co-located reserve wing will have a Reserve SARC Liaison (RSL) who will serve as the primary reserve POC to the active duty SARC. The RSL should be a member of the reserve unit's Physical Examination Package and have the ability to facilitate a Line of Duty (LOD) determination. They will assist the active duty SARC in scheduling delivery of training to reserve personnel and managing of any reserve victim LOD issues.

2.3.4. WG/CV will ensure that appropriate and qualified personnel are identified, trained, and available to serve as Alternate SARCs in the event of the primary SARC's absence due to leave, TDY, illness, etc.

2.3.4.1. An officer or civilian equivalent who has completed the VA/SARC course and has performed SARC or VA duties under SARC supervision may serve as an Alternate SARC for duties of a short duration, usually not to exceed 7 days at a time.

2.3.4.2. For periods exceeding 7 days, the Alternate SARC must meet the eligibility requirements of paragraph **2.3.3.** Exceptions to grade requirements may only be made under extenuating circumstances and require the WG/CV's approval in writing.

2.3.4.3. Installation SARCs, or the WG/CV if the SARC is unavailable, will coordinate all initial appointments of Alternate SARCs with the MAJCOM SARC, to include personal data and qualifications of the appointee.

2.3.5. SARC duties and responsibilities. The primary focus of the SARC is on victims (see **Attachment 1**) of sexual assault.

2.3.5.1. The SARC is responsible for ensuring a victim support system exists capable of responding to all reported sexual assaults, 24 hours a day-7 days a week, occurring on or off the installation within his or her area of responsibility to include geographically separated units (GSUs) attached to or supported by the installation. See paragraph **2.3.5.8.** detailing off-installation collaboration efforts.

2.3.5.1.1. The SARC must provide clear, accurate information on the available avenues for reporting sexual assault throughout his or her area of responsibility.

2.3.5.1.2. Where appropriate, memoranda of understanding (MOU) with other military installations may be used to ensure sexual assault response capability.

2.3.5.2. Upon notification the SARC will, unless services are declined by the victim, assign a VA as soon as possible (see paragraph **2.5.** for VA duties). The VA should not be from the same unit as the victim.

2.3.5.3. The SARC is responsible for facilitating continuity of care and case management in the event the victim has a permanent change of station, is deployed or redeployed. Continuity of care and case management transfer is contingent upon victim's concurrence. SARCs must counsel the victim and document the victim's election. When a case transfer is authorized, the SARC will contact the SARC at the new location. For ANG, if the victim is returning to his or her ANG unit and concurs with case transfer, SARCs will contact the state Joint Force Headquarters (JFHQ) SARC who will coordinate transfer to the victim's Wing SARC.

2.3.5.4. Support services will continue until the victim indicates support is no longer required, or the SARC makes this determination based on the victim's response to offers of assistance. The SARC will continue to monitor the victim's health and well being through final disposition and/or resolution of the case.

2.3.5.5. Transporting victims. WG/CVs are responsible for providing government transportation as required to transport victims to receive medical assistance following their initial call to report a sexual assault. The requirement includes transport to both on- and off-installation medical facilities as necessary for immediate medical attention and any follow-on forensic examination.

2.3.5.6. As a key advisor for commanders, the SARC will:

2.3.5.6.1. Assist commanders to meet annual SAPR training requirements, provide orientation briefings for newly assigned personnel, and help publicize available SAPR services. For more information on annual and other training requirements, see paragraphs **2.10.** and **2.11.**

2.3.5.6.2. Provide information and statistical data to assist commanders and key leaders in promoting institutional and cultural change.

2.3.5.6.3. Within 24 hours of a report of sexual assault, provide the WG/CV with non-identifying personal information of a restricted report, and a more thorough summary of any unrestricted report.

2.3.5.7. Prevention is a full-time endeavor involving many individuals. Education, training, awareness, and community involvement make up the foundation of the SAPR Program's prevention efforts. The SARC should:

2.3.5.7.1. Establish and maintain a positive and proactive presence among Airmen on the installation. Consistently convey Wingman tenets, the need for Airmen to look out for one another, and to intervene in ways that impact the outcome positively.

2.3.5.7.2. Establish and maintain a positive and proactive network in the surrounding community to increase awareness of trends, upcoming events, and potential changes in levels of safety. Communicate those findings with the installation population through leadership channels and public awareness campaigns, to include planning local events for Sexual Assault Awareness Month which is nationally observed during the month of April.

2.3.5.7.3. Continue educating self and others on sexual assault trends, local and national initiatives, and ways to improve support to victims. Share this information with commanders and key leaders at appropriate venues such as staff meetings, conferences, and luncheons. Integrate findings with the installation's Community Action Information Board (CAIB) programs and Integrated Delivery System (IDS).

2.3.5.7.4. Ensure appropriate emphasis during potentially problematic periods such as holidays and 3-day weekends.

2.3.5.8. Collaboration with off-installation service providers. The SARC, working with appropriate installation agencies, will pursue MOU with appropriate authorities and community service providers addressing the coordination of support and adequate standard of care for Air Force personnel who seek support off the installation. Such arrangements are beneficial in order to:

2.3.5.8.1. Provide medical and counseling services related to care for victims of sexual assault that may not be available on their installation, but are available in the civilian community.

2.3.5.8.2. Enhance the sharing of information concerning investigations, arrests, and prosecutions of reported sexual assault cases, as well as sexual assault care and forensic examinations involving military personnel.

2.3.5.8.3. Enhance training through collaboration with local community crisis counseling centers.

2.3.5.9. Collaboration with on-installation agencies, if available, is essential for sexual assault victim support.

2.3.5.9.1. Medical Treatment Facilities. Establish procedures for notifying the SARC for all incidents of reported sexual assault. Provide training on the various duties of Healthcare Personnel, SARCs, and VAs as they relate to supporting victims of sexual assault.

2.3.5.9.2. Family Advocacy Program (FAP). SARCs who receive reports that involve domestic abuse will contact the Family Advocacy Officer (FAO) who will ensure an immediate assessment of the victim's safety, determine eligibility for Domestic Violence Restricted Reporting, and coordinate victim advocacy services through the FAP. Normally, the FAO will assume the lead role in domestic violence cases involving sexual assault.

2.4. Installation SARC Administrative Assistants.

2.4.1. Reporting directly to the installation SARC, the Administrative Assistant performs clerical duties to directly support the SARC and the installation's SAPR program. Generally, as a minimum, they will:

2.4.1.1. Complete VA training and be trained prior to being granted access to covered communications.

2.4.1.2. Track services and training provided, maintain VA on-call schedule, record meeting minutes, provide administrative support for VAs, schedule SARC appointments and follow-ups, and perform other duties as required.

2.4.1.3. Manage the program's budget to include Government Purchase Card management and purchasing.

2.4.1.4. Use office automation software to produce a range of documents. Produce and distribute monthly and quarterly reports.

2.5. VAs.

2.5.1. The VA provides essential support, liaison services and care to victims of sexual assault. The VA ensures victims continue to receive the necessary care and support until the victim states or SARC determines that support is no longer needed. The Air Force relies on volunteers to fill this critical function.

2.5.1.1. Only active duty military personnel, Reserve or National Guard personnel in active status, and DoD civilian employees may serve as VAs. Reserve Personnel assigned to the MTF may serve as VAs only if they are assigned to a reserve medical squadron and have no patient-related duties. See paragraph **2.3.1.1.** regarding conflicts of interest precluding some military members from serving as SARCs—these individuals are likewise precluded from serving as VAs. The SARC will determine if any VA has or develops a conflict of interest and will reassign accordingly.

2.5.1.1.1. In order to ensure continuity of care for the Reserve Component, victim advocacy may continue through changes in duty status at the discretion of the victim's Reserve or National Guard unit.

2.5.1.2. Eligible personnel volunteer by submitting a Commander's or Agency Head's Statement of Understanding (**Attachment 3**), Volunteer's Statement of Understanding (**Attachment 4**), and Volunteer Victim Advocate Application (**Attachment 6**) that will be used to facilitate the SARC's interview with the prospective volunteer. By signing the volunteer application, the volunteer agrees to submit to a criminal background check. SARCs will submit the volunteer application to the AFOSI detachment that provides support to the installation for consideration of a background check, in accordance with AFOSI Manual 71-122, *Criminal Investigations*.

2.5.1.2.1. Supervision. The SARC recruits, screens, interviews, selects, and supervises the installation VAs while they are providing support to sexual assault victims. When a VA is performing advocacy duties, he or she reports directly to the installation SARC; however, no change of rater is initiated.

2.5.1.2.2. The SARC has sole discretion to decide whether an individual will serve or continue to serve as a VA.

2.5.1.2.3. To the extent required to ensure sexual assault response capability at GSUs or deployed locations, military personnel may be detailed by the WG/CV or deployed commander to serve as VAs. Appointed individuals must meet experience or training requirements to perform VA duties.

2.5.1.3. VAs' responsibilities include providing crisis intervention, referral and ongoing non-clinical support, including providing information on available options and resources to assist the victim in making informed decisions about the case. VAs do not provide counseling or other professional services. See **Attachment 5**, Victim Advocate Sexual Assault Response Protocols Checklist.

2.5.1.4. The assigned VA will meet with the victim as soon as possible and provide the victim information on the sexual assault response process, unrestricted reporting and the option of restricted reporting if not already accomplished by the SARC. The VA will inform the victim of the availability of healthcare to include the option of a forensic medical examination and the collection of evidence.

2.5.1.5. VAs may accompany the victim, at the victim's request, during investigative interviews and medical examinations, including, but not limited to interviews with medical personnel, law enforcement, investigators, trial counsel and defense counsel. However, VAs and the victims that they accompany must be made aware that the VA's presence at an interview could later result in the VA being called as a witness in court-martial or administrative proceedings. VAs should also understand that the investigative interview process is controlled by the interviewing official. To the greatest extent possible, concerns about an interview should be resolved before or after the interview.

2.5.1.6. Civilian VAs should have their supervisors document their volunteer status and duties in their personnel files consistent with current procedures managed by the Civilian Personnel Office.

2.6. Medical.

2.6.1. Healthcare Personnel must ensure that, at a minimum, the following medical care is made available to a victim (see **Attachment 1**) of sexual assault:

2.6.1.1. Complete physical assessment, examination, and treatment of injuries including immediate life-saving interventions with follow-up and referral care as needed.

2.6.1.2. Once clinically stable, Healthcare Personnel shall consult with the victim regarding further healthcare options which shall include, but are not limited to:

2.6.1.2.1. Testing, prophylactic treatment options, and follow-up care for possible exposure to human immunodeficiency virus (HIV) and other sexually transmitted infections or diseases.

2.6.1.2.2. Assessment of the risk of pregnancy, options for emergency contraception, and any necessary follow-up care and/or referral services.

2.6.1.2.3. Assessment of the need for behavioral health services and providing a referral, if necessary and/or requested by the victim.

2.6.1.3. Healthcare Personnel must advise the victim of the availability of an optional Sexual Assault Forensic Examination (SAFE). Healthcare Personnel must maintain adequate supply of SAFE kits.

2.6.1.4. The Medical Group Commander, or equivalent, must designate someone from the medical group to serve as the MTF's primary point of contact (POC) on medical matters as they relate to DoD and AF SAPR policy.

2.7. Case Management Group.

2.7.1. DoD Directive requires the establishment of a multi-disciplinary case management group, chaired by the SARC, to meet monthly to review unrestricted cases, improve reporting, facilitate monthly victim updates, and to discuss process improvement to ensure system accountability and victim access to quality services.

2.7.1.1. For unrestricted cases, the case management group includes the SARC, VA, AFOSI, SF, Healthcare Personnel, HC, JA and the reporting victim's commander.

2.7.1.2. For restricted cases, the group membership is limited to the SARC, assigned VA and Healthcare Personnel representative.

2.7.2. The case management group will review sexual assault trends for the area of responsibility, including environmental information provided to the WG/CV under restricted reporting. The group will provide a report to the WG/CV no less than quarterly, including recommendations.

Section 2B—Training

2.8. SARC Initial and Recurring Training.

2.8.1. All newly assigned SARCs will attend the next available Air Force SARC Course, and will coordinate case actions with MAJCOM or AFPC SARCs until training is completed. (*Exception*: Air National Guard SARCs will be trained by appropriate National Guard Bureau course that covers mandatory requirements in DODI 6495.02, Enclosure 6).

2.8.1.1. Both active duty military and civilian SARCs will receive a training code of "QBX" upon completion of formal training. Military SARCs will have their record updated to reflect proper Special Experience Identifier (SEI) code.

2.8.2. SARCs will attend the annual SARC workshop to satisfy the DoD annual training requirement.

2.8.3. SARCs are encouraged to attend other conferences, at their installation's expense, to maintain proficiency and stay current in national level initiatives that address sexual assault.

2.9. VA Training.

2.9.1. SARCs shall ensure that VAs satisfactorily complete the mandatory Air Force VA training before being assigned to work with a victim.

2.9.2. Following successful completion of training, military VAs will have their record updated to reflect the proper SEI (0V for officers or 003 for enlisted). Training may be documented on AF Form 2096 or letter signed by the unit commander.

2.9.2.1. SARCs will coordinate with the VA's commander should there be a reason to remove the VA from duties. When appropriate, commanders will initiate action to remove the individual's SEI.

2.10. Annual and Predeployment Training Requirements.

2.10.1. SARCs, in coordination with Unit Training Managers, are responsible for ensuring their supported population receives annual training compliant with DoDI 6495.02, *Sexual Assault Prevention and Response (SAPR) Program Procedures*. The AF SAPR Program Manager will ensure guidance,

training materials, and suspense for completion are disseminated through the SAPR channels to the installation level.

2.10.2. Deploying personnel must receive predeployment SAPR training prior to departure in accordance with paragraph **4.2.**

2.11. First Responder Training.

2.11.1. First Responders will be trained by their functional communities to meet the requirements outlined in Enclosure 6 to DoDI 6495.02. Refresher training will be conducted no less than annually.

2.11.2. SARCs are responsible for ensuring SAPR policy updates and program changes are disseminated to First Responders and commanders, and may conduct training on an as-needed basis to ensure the functional community stays current.

2.11.3. Air Staff functionals will review current and future training opportunities to ensure their communities are prepared.

Section 2C—Reporting Requirements and Data Management

2.12. Requirement to Report Sexual Assault.

2.12.1. Any AF military member or civilian employee, other than those personnel authorized to receive confidential communications or otherwise exempted by operation of law, regulation, or policy, who receives a report of a sexual assault incident about a subordinate in the individual's supervisory chain, shall, as soon as possible, report the matter to the AFOSI. Failure to report as specified is a violation of Article 92, UCMJ, for military members and AF civilian employees may be subject to administrative disciplinary action. Other military members or civilian employees who become aware of a sexual assault incident are strongly encouraged to report the incident to AFOSI.

2.12.1.1. If a report cannot be made to the AFOSI, the report will be made to the Security Forces who will then notify the AFOSI.

2.12.1.2. A SARC, VA, or Healthcare Personnel, who receives a report of a sexual assault incident about an individual who is eligible to make a restricted report and who is a subordinate in either the SARCs', VAs' or Healthcare Personnel's supervisory chain, is not required to comply with the reporting requirement of paragraph **2.12.1.**

2.12.2. If an individual does not elect to make a restricted report or is otherwise not eligible to make a restricted report, the SARC will notify the AFOSI of the report.

2.13. Data Collection, Reports, and Record Keeping.

2.13.1. SARCs will collect data on restricted reports, unrestricted reports, training completion, and other information requested by the AF SAPR Program Manager and communicated through HQ AFPC/DPSIAP and MAJCOM SARCs.

2.13.1.1. The majority of data collection will result from the SARC's responsibilities outlined in paragraphs **2.3.2.** and **2.3.5.**

2.13.1.2. SARCs may also collect information, prepare reports, and create records on other program activities such as training, prevention efforts, and meetings with supporting agencies and individuals.

2.13.2. Quarterly Reports.

2.13.2.1. Installation SARCs are responsible for collecting data on restricted reporting and training completion, and submitting the data to their respective MAJCOM SARC in the required format by the suspense date.

2.13.2.2. MAJCOM SARCs will review and compile installation data ensuring correct data is forwarded to HQ USAF/A1 SAPR Program Manager, through AFPC/DPSIAP, in proper format and by required suspense.

2.13.2.3. AFPC/DPSIAP will review the reports submitted by the MAJCOM SARCs, resolve any inconsistencies, and forward to HQ USAF/A1 SAPR Program Manager by the required suspense.

2.13.2.4. HQ USAF/A1 SAPR Program Manager will collect and compile the data for the restricted reports and prepare the quarterly report for submission to DoD by the required suspense.

2.13.2.5. AFLOA/JAJM, in conjunction with SAF/IG, will collect and compile the data for the unrestricted reports and prepare the quarterly report in the format specified by DoD, and forward to the HQ USAF/A1 SAPR Program Manager for consolidation.

2.13.3. Annual Reports will be accomplished as directed by DoD. HQ USAF/A1 SAPR Program Manager will notify all parties of the data requirements and suspense dates.

2.13.4. Other reports or requests for program information, data, or status may be initiated by HQ USAF/A1 SAPR Program Manager and submitted to AFPC/DPSIA for execution.

2.13.5. Record keeping and the use and disclosure of information will be governed and protected in accordance with AFI 33-322, *Records Management Program*, and other guidance contained in this Instruction.

2.13.5.1. SARC records will consist of information recorded for victim support and care, program operating and functioning, training, and other completed forms or notes required for daily activities. Records may be either electronic or paper. Ensure electronic storage is password protected if on a shared drive.

2.13.5.2. All SARC/VA records may be subject to review in legal proceedings.

2.13.5.3. Victim care records may consist of restricted or unrestricted reports.

2.13.5.3.1. Case files will be prepared and maintained for restricted and unrestricted reports based on victim's reporting selection, provided the report is not covered under exceptions listed in this Instruction.

2.13.5.3.2. All restricted reports will be assigned a Restricted Report Control Number (RRCN). The RRCN will be developed using a two-digit year, two-digit month, the first four letters of the installation name, a three-digit numerical sequence, and followed by the letter "R". For example, "0709RAND001R" represents the incident occurred in 2007, during September, at Randolph AFB, is the first report of this sequence, and is a restricted report.

2.13.5.3.3. Restricted and unrestricted reports will be kept in a locked file cabinet when not in use. Restricted reports will only be available to SARCs, Alternate SARCs, VAs, or Healthcare

Personnel trained in handling restricted reports and need access to the information to provide and manage services to a victim. Unrestricted reports will only be available to appropriate individuals with an official need to know. Those who have an official need to know in the Air Force routinely include law enforcement, the commanders and first sergeants of the victim and the alleged assailant, legal personnel, the SARC, the VA, and Healthcare Personnel as required to perform their respective duties.

2.13.5.3.4. When receiving transferred cases from other installations, SARCs will create and maintain an appropriate record based on the type of report. For restricted reports, add a "T" to the end of the RRCN and ensure transferred cases are not counted as new cases.

Section 2D—Finance and Logistics Considerations

2.14. Budget.

2.14.1. Installation and MAJCOM SARCs must budget for prevention materials, office supplies, training, and travel (to include travel expenses related to the annual SARC Workshop noted in paragraph **2.8.2.**).

2.14.2. SARCs are encouraged to purchase small advertising/marketing materials and products (i.e., pens, stress balls, magnets, etc.) in support of outreach and awareness support programs. These expenditures are considered authorized as long as they comply with the micro-purchase threshold requirements of AFI 64-117, *Air Force Government-Wide Purchase Card (GPC) Program,* paragraph 2.1.2.

2.15. Facilities.

2.15.1. The SARC office should be in an easily accessible area of the installation while still providing for confidential visits.

2.15.2. SARC facilities will present a professional setting and must include:

2.15.2.1. Private consultation area to facilitate personal discussions without being overheard.

2.15.2.2. Lockable working space that affords privacy to staff and victims. Also required are lockable filing cabinet(s) for securing victim case files (UNCLASSIFIED).

2.15.2.3. Communication equipment and services that permit coverage 24 hours a day-7 days a week, to include office telephones with instant long distance capability and government-funded cellular phones for emergency response/contact, computers, printer(s), fax, and copier.

2.15.2.3.1. SARCs should ensure installation agencies, such as the Command Post and Installation Operators, add the SARC contact phone numbers to phone listings and/or rosters for emergency contact. SARCs and VAs should not provide victims with their personal home or personal cellular phone numbers.

Chapter 3

REPORTING OPTIONS

3.1. Restricted Reporting and Confidentiality.

3.1.1. The Department of Defense and the Air Force are committed to ensuring that victims of sexual assault are protected, treated with dignity and respect, and provided support, advocacy and care. To achieve these objectives, we recommend prompt, complete, unrestricted reporting of sexual assault allegations to activate victim services and accountability responses.

3.1.2. While the Air Force makes every effort to treat victims with respect and dignity, and to respect their privacy to the maximum extent of the law, commanders and leaders need to be aware of the concerns that may deter a victim from making an unrestricted report. The most common concerns are:

3.1.2.1. Lack of privacy and confidentiality;

3.1.2.2. Stigma and shame based on the nature of the crime;

3.1.2.3. Fear of being reduced in the eyes of one's commander or colleagues;

3.1.2.4. Fear of disciplinary action due to possible own misconduct;

3.1.2.5. Fear of re-victimization;

3.1.2.6. Fear of operational impacts on training status, security clearance, and deployment; and

3.1.2.7. Fear of adverse impact on the unit or mission.

3.1.3. The Department of Defense has directed the implementation of confidentiality in the form of a restricted reporting option that enables military members to report allegations of sexual assault to specified personnel, without triggering an investigation. This reporting option is intended to remove barriers to medical care and support while giving the victim additional time and increased control over the release and management of personal information.

3.1.4. Eligibility for Restricted Reporting. Sexual assault restricted reporting is available only to victims who are Service members and must concern a sexual assault made against them. Service member, for restricted reports, is defined to include:

3.1.4.1. Air Force members on active duty;

3.1.4.2. Members of the Air Force Reserve or the Air National Guard performing active or inactive duty training as defined in 10 United States Code 101(d)(3);

3.1.4.3. Members of the Army, Navy or Marine Corps in comparable status to paragraphs **3.1.4.1.** or **3.1.4.2.**;

3.1.4.4. Members of the Coast Guard when operating as a service of the Department of the Navy; and

3.1.4.5. A victim who was in a status described by paragraphs **3.1.4.1.** through **3.1.4.4.** at the time of the assault and who remains a member of the Air Reserve Component or its equivalent.

3.1.5. Any individual who does not meet the requirements of paragraph **3.1.4.** is not eligible to make restricted reports. These include:

3.1.5.1. Retired members of any component;

3.1.5.2. Military Family Members;

3.1.5.3. DoD civilian employees; and

3.1.5.4. Civilians.

3.1.6. Allegations of assault that do not constitute sexual assault as defined in **Attachment 1** are not governed by this AFI.

3.1.6.1. If a report contains an allegation of sexual assault and qualifies for restricted reporting, any other offenses revealed by the victim are considered covered communications and will not be disclosed except as authorized in paragraph **3.1.9.2.** See paragraph **3.1.12.** regarding limits to covered communications.

3.1.6.2. Consult with the SJA as required for clarification and guidance concerning whether a report concerns an allegation of sexual assault.

3.1.7. Who may receive a restricted report. Only SARCs, VAs, and Healthcare Personnel may receive restricted reports of sexual assault. The requirement of AFI 44-102, *Medical Care Management*, paragraph 17.4.1., to report incidents of sexual assault to the AFOSI or other authorities as appropriate is expressly waived for restricted reports.

3.1.7.1. A VA who is contacted by a victim wishing to make a restricted report but who has not been assigned by the SARC to serve as the VA for that individual, will not enter into a discussion of the circumstances but will immediately refer the victim to the SARC. The VA is not required to report the initial contact to command or law enforcement officials.

3.1.7.2. VAs must ensure they do not discuss covered communications with a victim until they have been appointed by the SARC to act as the VA for that individual.

3.1.7.3. A report may be made to a chaplain; however, while communications with chaplains or other individuals may be entitled to privileged status under the Military Rules of Evidence (Mil.R.Evid) or other statutes and regulations, such communications are not restricted reports. Before such a communication can be considered a restricted report, it must be reported or forwarded to a SARC for determination of eligibility.

3.1.7.4. If a victim tells Healthcare Personnel that a sexual assault has occurred, the Healthcare Personnel will notify the SARC. Per DoD 6025.18-R, "DoD Health Information Privacy Regulation," pertinent protected health information from the victim's medical records may be released to the SARC without the consent of the victim. Such release, however, requires appropriate accounting in accordance with Chapter 13 of the regulation.

3.1.8. If a report is made to a SARC, VA, or Healthcare Personnel, and it cannot reasonably be ascertained whether the report is intended to be restricted, such a report (or visit to the MTF) will be treated as restricted, to the greatest extent possible, until the SARC can ascertain the victim's eligibility and intentions.

3.1.9. Effect of a Restricted Report. Failure to protect restricted reports and specified confidentiality is a violation of Article 92, UCMJ, for military members and AF civilian employees may be subject to administrative disciplinary action.

3.1.9.1. A SARC, VA, or Healthcare Personnel who has received covered communications as part of a restricted report is prohibited from disclosing those communications to any law enforcement official, command authority, or other entity not authorized to receive restricted reports except as provided in paragraph **3.1.9.2.**

3.1.9.2. Disclosure of covered communications. Covered communications may only be disclosed under the following circumstances:

3.1.9.2.1. To command and law enforcement when disclosure is authorized by the victim in writing;

3.1.9.2.2. To command and law enforcement when disclosure is necessary to prevent or lessen a serious and imminent threat to the health or safety of the victim or another person;

3.1.9.2.3. To Disability Retirement Boards and officials when disclosure by a Healthcare Personnel is required for fitness for duty for disability retirement determinations;

3.1.9.2.4. To a SARC, VA, or Healthcare Personnel when disclosure is required for the supervision and/or coordination of direct victim treatment or services;

3.1.9.2.5. To a military or civilian court of competent jurisdiction when disclosure is ordered by a Military, Federal, or State judge; or

3.1.9.2.6. To officials or entities as required by a Federal or State statute or applicable U.S. international agreement.

3.1.9.3. With the exception of paragraph **3.1.9.2.1.**, disclosure will be limited to only the information necessary to satisfy the basis for disclosure.

3.1.9.4. The SARC will make the determination as to whether disclosure is appropriate. The SARC may consult their MAJCOM SARC for guidance as to whether disclosure is appropriate under this policy. If disclosure is contemplated under other than paragraph **3.1.9.2.1.**, the SARC should consult with the servicing SJA, using non-identifying personal information, to determine whether the exception applies. When there is uncertainty or disagreement on whether disclosure is appropriate, the matter shall be brought to the attention of the WG/CV for decision.

3.1.9.4.1. Until those determinations are made, only non-identifying information should be provided to individuals not authorized to receive covered communications.

3.1.9.5. Medical records related to a restricted report must be kept so as to ensure that the existence of a restricted report or the contents of covered communications are not disclosed to unauthorized personnel. HQ USAF/SG will issue guidance.

3.1.9.6. Unauthorized disclosure of a covered communication, improper release of medical information, and other violations of this AFI may result in administrative action, including loss of medical credentials, or action under the UCMJ.

3.1.9.6.1. If a VA, or Healthcare Personnel makes an inadvertent, unauthorized disclosure of a covered communication, the SARC will be notified. The SARC will notify the victim of the inadvertent disclosure and review the process or circumstance that led to the unauthorized disclosure. As noted above, the unauthorized disclosure of a covered communication may result in disciplinary action.

3.1.9.7. Healthcare Personnel may also convey to command any possible adverse duty impact related to the victim's medical condition and prognosis in accordance with DoD 6025.18-R, as well as any applicable Air Force Instructions. Such circumstances, however, do not otherwise warrant an exception to this policy and, therefore, the covered communication related to the sexual assault may not be disclosed. Any disclosure by Healthcare Personnel made under this provision should include only the minimum necessary relevant information regarding the medical situation and should not disclose any covered communication.

3.1.9.7.1. Personnel Reliability Program (PRP). Victims on PRP status are not disqualified from making a restricted report. Only medical information regarding the condition and/or treatment is releasable to commanders under PRP. The MTF is obligated to protect the underlying cause (sexual assault) as covered communication incident to a restricted report.

3.1.9.8. Independent Reports. In the event that information about a sexual assault is disclosed to command from a source independent of restricted reporting avenues or to law enforcement from other sources, and an investigation into an allegation of sexual assault is initiated, the SARC, VA, and Healthcare Personnel will not disclose covered communications, including the existence of a restricted report or prior contact with the victim, unless the victim authorizes the disclosure in writing or another exception applies.

3.1.9.8.1. When the SARC or VA learns that an official investigation has been initiated based on independently-acquired information, the SARC should notify the victim as soon as possible.

3.1.9.8.2. SARCs and VAs should also notify victims that any disclosure of information about their sexual assault to individuals other than the SARC, VA or Healthcare Personnel may result in the initiation of an official investigation regarding the allegations that the victim disclosed.

3.1.9.9. The victim will acknowledge his or her understanding of the restricted reporting process; i.e., that restricted reporting necessarily limits, in an effort to protect the victim's privacy, the ability of the Air Force to investigate and take action. Victims should be made aware of protections available when making unrestricted reports. Use DD Form 2910; see paragraph **3.1.8.** for incidents where a victim may not be in a condition to make an election; see paragraph **3.2.2.** for incidents where a victim refuses to complete the DD Form 2910.

3.1.10. Notification to Command of a Restricted Report. Within 24 hours of receipt of a restricted report of an alleged sexual assault, the SARC will notify the WG/CV that a restricted report has been made.

3.1.10.1. The SARC will only provide the following information while ensuring that the information is not sufficient to identify the victim or incident:

3.1.10.1.1. When the assault occurred, using one of the following three categories:

3.1.10.1.1.1. While the victim was in military service and within the last 30 days;

3.1.10.1.1.2. While the victim was in military service and more than 30 days ago; or

3.1.10.1.1.3. Prior to military service.

3.1.10.1.2. Whether the assault occurred during the night (1800 – 0559) or day (0600 – 1759);

3.1.10.1.3. General information as to location (on or off installation);

3.1.10.1.4. Number of alleged assailants;

3.1.10.1.5. Number of alleged victims; and

3.1.10.1.6. Nature of assault (rape, forcible sodomy, indecent assault, etc.).

3.1.10.2. Non-identifying information under the restricted reporting option is intended to provide commanders with general environmental information about the number and types of sexual assaults on the installation and is to be used to provide a better understanding of incidents of sexual assault. Neither commanders nor law enforcement officials may initiate investigations based on information about restricted reports provided by SARCs.

3.1.10.3. Commanders, however, may use the information to enhance preventive measures, to enhance the education and training of their personnel, and to more closely scrutinize their organization's climate and culture for contributing factors, but they may not use the information for investigative purposes or in a manner that is likely to discover, disclose, or reveal the identities being protected.

3.1.11. The restricted reporting process does not affect any privilege recognized under the Mil.R.Evid.

3.1.12. The confidentiality policy does not create an actionable right in the alleged assailant or the victim and does not constitute a grant of immunity for any actionable conduct by the assailant or victim. Any covered communication that has been disclosed, whether disclosure was authorized or unauthorized, may be used as the basis for disciplinary action against the assailant or victim as appropriate. However, disposition authorities should take these circumstances into account in determining what, if any, action may be appropriate regarding the victim.

3.2. Unrestricted Reporting. Any report of a sexual assault made through normal reporting channels, including the victim's chain of command, law enforcement, and the AFOSI or other criminal investigative service is considered an unrestricted report. Any report of sexual assault made through SARC, VA, or Healthcare Personnel by individuals who are not eligible for restricted reporting will be treated as an unrestricted report and forwarded to the AFOSI.

3.2.1. The individual to whom the report was made will notify the SARC who will assign a VA to the individual.

3.2.2. Victims who are eligible for and elect restricted reporting must do so using the DD Form 2910. If a victim refuses to complete the DD Form 2910, the SARC will consult with Healthcare Personnel to ascertain the victim's capacity for making the decision. The Health Care personnel may advise a reasonable delay to ensure the victim's capacity to respond. If, after consultation, the SARC and the Health Care Personnel determine the victim is stable enough or capable of personal judgment to make a decision and the victim still refuses to complete the DD Form 2910, the SARC will advise the victim that the report will be registered as unrestricted and the AFOSI will be notified. The local SJA should also be consulted, with the case presented as a hypothetical situation, if the SARC has concerns or discovers that fear of an alleged offender's retaliation or reprisal may be influencing the decision of the victim. Depending on the circumstances presented, the SARC may refer to exceptions to restricted reporting identified in **3.1.9.2.**

3.3. Nonmilitary Victims Under the Age of 18.

3.3.1. Victims who qualify as dependents, other than spouses of military members, or who are otherwise entitled to DoD medical care, will be referred to the FAO.

3.3.2. Victims who are not dependents will be referred to the appropriate civilian agency. The SARC and FAO will coordinate as to the appropriate referral and will ensure procedures are in place to address this contingency.

Chapter 4

PREVENTION AND RESPONSE FOR THE DEPLOYED ENVIRONMENT

4.1. Presence in the Area of Responsibility (AOR). The Air Force will identify trained military SARCs (and/or trained civilian SARCs who volunteer) for Air Expeditionary Force (AEF) rotational support for global contingency operations consistent with requirements established by a Commander of Air Force forces (COMAFFOR). Normally, each Air Expeditionary Wing (AEW) will warrant at least one SARC requirement. For deployments smaller than an AEF, deployed commanders must provide a sexual assault response capability consistent with the requirements of this AFI.

4.1.1. For emerging operations, when practicable, the Air Component A1 should coordinate development of any SARC requirements with the SARC Functional Area Manager (FAM) at AFPC/DPSIAP. The Air Component A1 and the FAM should keep in mind the COMAFFOR's responsibility to ensure theater-wide support to Airmen in smaller units at potentially isolated sites, and determine if central or regional management can be effective.

4.1.2. During transition to sustained operations, the Air Component A1 planner must account for future rotations and coordinate those requirements with the SARC FAM. Ensure line remarks and overlap considerations are reviewed to ensure seamless exchange between outgoing and incoming SARCs.

4.1.3. For sustained operations, the Air Component A1 provides the functional oversight to ensure a continued response capability exists to support their AOR. This includes, but is not limited to:

4.1.3.1. Designating locations that require a SARC, and ensuring that those locations are sufficient to support the AOR throughout mission fluctuations.

4.1.3.2. Identifying VAs in theater and resolving with local commanders any gaps in this critical element of support.

4.1.3.3. Coordinating with SARC FAM and HQ USAF/A1 SAPR Program Manager on all issues needing resolution.

4.2. Training. Home station unit commanders must ensure Service members are trained on sexual assault issues prior to any deployment. The SARC assists commanders with this responsibility and coordinates these efforts with the Personnel Readiness Function (PRF).

Chapter 5

COLLECTION AND PRESERVATION OF EVIDENCE

5.1. Collection and Proper Handling of Evidence.

5.1.1. In accordance with AFOSI Manual 71-124, *Crime Scene Handbook*, AFOSI is designated as the Office of Primary Responsibility (OPR) for evidence collection during sexual assault investigations.

5.1.2. Medical services offered to victims of sexual assault include the ability to request a sexual assault forensic examination (SAFE). The SAFE is an examination of a sexual assault victim by Healthcare Personnel who, ideally, have specialized education and clinical experience in the collection of forensic evidence and treatment of sexual assault victims.

5.2. Collection and Preservation of Evidence in Restricted Reports.

5.2.1. SARCs or VAs have no responsibility for the collection of evidence when a restricted report is made. SARCs or VAs will not collect or receive evidence of a sexual assault from a victim.

5.2.2. When the SARC receives a restricted report of a sexual assault, the SARC or VA will inform the victim of the option of a SAFE and of any state or local sexual assault reporting requirements that may affect restricted reporting.

5.2.3. Where possible, a SAFE will be conducted by Healthcare Personnel at an MTF. SAFEs conducted at the MTF will be performed in accordance with the current version of the United States Department of Justice National Protocol for Sexual Assault Medical Forensic Examinations.

5.2.4. Installations that do not have a SAFE capability are responsible for transporting the victim to a military facility or an off-installation, non-military facility that has a SAFE capability. If off-installation, non-military facilities are used, MOUs should be completed establishing procedures for conducting SAFEs.

5.2.5. If a SAFE is completed, the SARC or VA will assign a unique Restricted Report Control Number (RRCN) in accordance with paragraph **2.13.5.3.2.**, to be used in lieu of personal identifying information. Upon completion of the SAFE, Healthcare Personnel will package, seal, and label the evidence containers with the RRCN.

5.2.6. The local AFOSI detachment is responsible for taking custody of the evidence from Healthcare Personnel and will log, store and preserve the SAFE, in accordance with AFOSI procedures, for a period of at least one year.

5.2.7. If, prior to the one-year anniversary date, a victim changes the reporting preference to an unrestricted report, the SARC shall notify the AFOSI, who shall then process the SAFE as evidence in accordance with AFOSI procedures.

5.2.8. AFOSI will notify SARCs 30 days prior to the expiration of the one-year evidence storage period. The SARC or VA will then notify the victim of the upcoming anniversary and that the evidence will be destroyed unless the victim decides to make an unrestricted report.

5.2.9. The SARC will notify the AFOSI to destroy the SAFE kit after the one-year anniversary date if:

5.2.9.1. The victim does not elect to make an unrestricted report;

5.2.9.2. The victim does not request the return of any personal effects or clothing maintained in the SAFE;

5.2.9.3. The victim does not advise the SARC of his or her decision after being notified of the upcoming one-year anniversary; or

5.2.9.4. The victim cannot be located.

5.2.10. The SARC will appropriately document the efforts to obtain a decision from the victim or efforts to locate the victim. The SARC is authorized to complete any documentation required from AFOSI for destruction on behalf of the victim.

Chapter 6

COMMAND ACTIONS IN RESPONSE TO SEXUAL ASSAULT

6.1. Commander's Response to Allegations of Sexual Assault.

6.1.1. Commanders notified of a sexual assault must take immediate steps to ensure the victim's physical safety, emotional security, and medical treatment needs are met, and that the AFOSI or appropriate criminal investigative agency and SARC are notified. The appropriate commanders should determine whether temporary reassignment or relocation of the victim or alleged assailant is appropriate.

6.1.2. Commanders should consider whether no contact orders or Military Protective Orders (DD Form 2873) are required. See **Attachment 2** for a checklist of other important considerations for commanders.

6.2. Keeping the Victim Informed and Use of Information.

6.2.1. The victim's unit commander is responsible for ensuring the victim receives, at a minimum, a monthly update on the current status of all investigative, medical, legal, and command proceedings pertaining to the unrestricted case, until final disposition of the sexual assault case. Information provided will be consistent with any applicable directives governing release of information and should be coordinated with the SARC to ensure the victim's case file is updated.

6.2.1.1. For purposes of this Instruction, final disposition means the conclusion of the latter of any judicial, nonjudicial, or administrative action (including administrative separation actions) taken in response to the allegation of sexual assault. These requirements are independent of other requirements of notification established by law or regulation.

6.2.2. In unrestricted reports of sexual assault or in cases in which information is disclosed through an independent source, details of the allegation will be provided only to those personnel who have an official need to know.

6.2.2.1. Commanders should examine all procedures involved in the use of sexual assault information to ensure that the goals of this AFI are met.

6.2.2.2. All disclosures must comply with the provisions of AFI 33-332, *Privacy Act Program.*

6.3. Victim Collateral Misconduct.

6.3.1. An investigation into the facts and circumstances surrounding an alleged sexual assault may produce evidence that the victim engaged in misconduct.

6.3.2. In accordance with the UCMJ, the Manual for Courts-Martial, and Air Force Instructions, commanders are responsible for addressing misconduct in a manner that is consistent and appropriate to the circumstances.

6.3.3. Commanders have the authority to determine the appropriate disposition of alleged victim misconduct, to include deferring disciplinary action until after disposition of the sexual assault case. When considering what corrective actions may be appropriate, commanders must balance the objectives of holding members accountable for their own misconduct with the intent to avoid unnecessary additional trauma to sexual assault victims and the goal of encouraging reporting of sexual assaults.

The gravity of any collateral misconduct by the victim, and its impact on good order and discipline, should be carefully considered in deciding what, if any, corrective action is appropriate. Commanders should consult with the servicing SJA prior to taking any action regarding collateral misconduct.

6.4. Sexual Assault Case Disposition Authority.

6.4.1. Disposition of investigations involving allegations of sexual assault is a responsibility of command. In accordance with the Manual for Courts-Martial, reports of investigations will normally be forwarded as soon as practicable to the immediate commander of the alleged assailant for appropriate action.

6.4.1.1. Authority to dispose of cases resulting from an allegation of sexual assault is withheld from squadron section commanders and is reserved for commanders of squadrons and above. Further, to ensure consistent and appropriate level of command attention, group commanders or higher will sign the commander's report of disposition to the investigating agency detailing the action taken. Any commander authorized to dispose of cases involving an allegation of sexual assault may do so only after receiving the advice of the servicing SJA.

6.4.2. Failure to comply with this disposition policy does not create any independent rights in an individual who has made an allegation of sexual assault or an individual who is accused of committing a sexual assault.

6.5. Separation Actions Involving Victims of Sexual Assault.

6.5.1. Separation actions involving victims of sexual assaults will be processed in accordance with the applicable AFI.

6.5.2. When a commander recommending administrative or medical separation action is aware, or is made aware by the respondent or others, that the respondent is alleging or has alleged that he or she was the victim of a sexual assault, the commander shall notify the separation authority that the discharge proceeding involves a victim of sexual assault.

6.5.2.1. The following statement should be included in the recommendation for discharge memorandum: "The respondent, (grade and name), reported being a past victim of sexual assault."

6.5.2.2. The commander recommending administrative or medical separation must provide sufficient information to the separation authority concerning the alleged assault and the respondent's status to ensure a full and fair consideration of the victim's military service and particular situation. Commanders should consult with AFOSI and the servicing SJA for guidance on the level of information that may be applicable.

6.6. Personnel Actions. Commanders, SARCs, and VAs should be aware of the array of personnel actions that are available and may be appropriate in specific cases. These actions may include, among others, alternative duty locations, hours, or assignments within a unit, permanent change of assignment on the installation, and permanent change of station, including humanitarian reassignment. Consult with the Military Personnel Flight and applicable AFIs for guidance and eligibility criteria.

6.7. Coercion, Discrimination, or Reprisals. WG/CCs must establish procedures to protect SARCs, Alternate SARCs, and VAs from coercion, discrimination, or reprisals related to their execution of their SAPR duties and responsibilities.

Chapter 7

INFORMATION COLLECTION, RECORDS, AND FORMS

7.1. Information Collection, Records, and Forms

7.2. Information Collections. No information collections are created by this publication.

7.3. Records. The program records created as a result of the processes prescribed in this publication are maintained in accordance with AFMAN 33-363 and disposed of in accordance with the AFRIMS RDS located at **https://www.my.af.mil/gcss-af61a/afrims/afrims/**.

7.4. Forms (Adopted and Prescribed).

7.4.1. Adopted Forms. AF Form 673, *Air Force Publication/Form Action Request*, AF IMT 847, *Recommendation for Change of Publication*, AF IMT 2096, *Classification/On-the-Job Training Action*, DD Form 2873, *Military Protective Order (MPO)*, DD Form 2910, *Victim Reporting Preference Statement*, and DD Form 2911, *Forensic Medical Report: Sexual Assault Examination*

7.4.2. Prescribed Forms. No prescribed forms are implemented by this publication.

RICHARD Y. NEWTON III, Lt Gen, USAF
Deputy Chief of Staff, Manpower, Personnel and Services

Attachment 1

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

References

AFPD 36-60, *Sexual Assault Prevention & Response (SAPR) Program*, 28 March 2008

AFI 31-206, *Security Forces Investigations Program*, 1 August 2001

AFI 33-332, *Privacy Act Program*, 29 January 2004

AFI 44-102, *Medical Care Management*, 1 May 2006

AFI 44-109, *Mental Health, Confidentiality, and Military Law*, 1 March 2000

AFI 64-117, *Air Force Government-Wide Purchase Card (GPC) Program*, 31 January 2006

AFMAN 33-363, *Management of Records*, 1 March 2008

AFOSIMAN 71.122, *Criminal Investigations*, 27 February 2006

AFOSIMAN 71-124, *Crime Scene Handbook*, 30 September 2003

AFRIMS RDS, **https://www.my.af.mil/gcss-af61a/afrims/afrims/**

DoD Regulation 5210.42-R, *Nuclear Weapons Personnel Reliability Program (PRP) Regulation*, 30 June 2006

DoD Regulation 6025.18-R, *DOD Health Information Privacy Regulation*, 24 January 2003

DoD Directive 6495.01, *Sexual Assault Prevention and Response (SAPR) Program*, 6 October 2005

DoD Instruction 6495.02, *Sexual Assault Prevention & Response Program Procedures*, 23 June 2006

Manual for Courts-Martial United States, 2008 edition

Abbreviations and Acronyms

ADLS—Advanced Distributed Learning System

AEF—Air Expeditionary Forces

AEW—Air Expeditionary Wing

AF—Air Force

AFI—Air Force Instruction

AFOSI—Air Force Office of Special Investigations

AFPC/DPSIAP—Air Force Personnel Center, Sexual Assault Prevention and Response Program

AFPD—Air Force Policy Directive

ANG—Air National Guard

AOR—Area of Responsibility

CAIB—Community Action Information Board

DoD—Department of Defense

DoDD—Department of Defense Directive

DoDI—Department of Defense Instruction

EO—Equal Opportunity

FAO—Family Advocacy Officer

FAP—Family Advocacy Program

FAM—Functional Area Manager

FP—Headquarters Air Force Focal Point

GS—General Schedule

GSU—Geographically Separated Unit

HAF—Headquarters Air Force

HHQ—Higher Headquarters

HQ AETC—Headquarters, Air Education & Training Command

HQ USAF/A1—Air Force Deputy Chief of Staff, Manpower, Personnel and Services

HQ USAF/A1SF—Air Force Sexual Assault Prevention and Response Program

HQ USAF/HC—Air Force Chief of Chaplains

HQ USAF/JA—Air Force Judge Advocate General

HQ USAF/JAJM—Military Justice Division, Air Force Legal Operations Agency

HQ USAF/SG—Air Force Surgeon General

IDS—Integrated Delivery System

MAJCOM—Major Command

MCIO—Military Criminal Investigation Organization

Mil.R.Evid—Military Rule of Evidence

MOU—Memorandum of Understanding

MPO—Military Protective Order

MTF—Medical Treatment Facility

NGB/CF—Director, Air National Guard

OPR—Office of Primary Responsibility

ROTC—Reserve Officer Training Corps

RRCN—Restricted Report Control Number

SAFE—Sexual Assault Forensic Examination

SAF/IG—Inspector General

SAF/GC—Air Force General Counsel

SAF/MR—Assistant Secretary of the Air Force for Manpower and Reserve Affairs

SAPR—Sexual Assault Prevention & Response

SARC—Sexual Assault Response Coordinator

SART—Sexual Assault Response Team

SEI—Special Experience Identifier

SJA—Staff Judge Advocate

UCMJ—Uniform Code of Military Justice

VA—Victim Advocate

VWAP—Victim and Witness Assistance Program

WG/CC—Wing Commander

WG/CV—Wing Vice Commander

Terms

Air Reserve Component—The Air National Guard of the United States (ANGUS), the Air National Guard (ANG) while in the service of the United States, and the Air Force Reserve.

Covered Communication—Verbal, written, or electronic communications of personally identifiable information concerning a sexual assault victim or alleged assailant provided by the victim to the Sexual Assault Response Coordinator (SARC), Victim Advocate (VA), or Healthcare Personnel related to his or her sexual assault.

Final Disposition—The conclusion of any command action, including judicial, nonjudicial, and administrative action, to include separation action taken in response to the offense, whichever is later in time, or a no action determination.

First Responders—Individuals from functional communities who are normally the first to respond to a sexual assault or are involved in the investigation and disposition of a sexual assault allegation. For the purposes of this AFI, they include: SARCs, Victim Advocates (VAs), Security Forces, AFOSI, and Healthcare Personnel. The SARC should establish a Sexual Assault Response Team (SART), comprised of certain First Responders, to ensure efficient and timely integrated response to sexual assault victims.

Healthcare Personnel—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.

Identifying Personal Information—This term applies to the alleged victim or alleged assailant in a sexual assault, and is that information which would disclose or have a tendency to disclose the person's identity. Identifying personal information includes the person's name or a particularly identifying description (e.g., physical characteristics or identity by position, rank, or organization), or other information about the person or the facts and circumstances involved that could reasonably be understood

to identify the person (e.g., a female in a particular squadron or barracks when there is only one female assigned).

Non-identifying Personal Information—Includes those facts and circumstances surrounding the sexual assault incident or information about the individual that enables the identity of the victim or alleged assailant to remain anonymous.

Other Sex Related Offenses—All other sexual acts or acts in violation of the Uniform Code of Military Justice that do not meet the definition of sexual assault in this Instruction or the definition of sexual harassment contained in AFI 36-2706, Military Equal Opportunity (MEO) Program. Examples of other sex-related offenses could include indecent acts with another and adultery.

Qualifying Conviction—For the purposes of this Instruction, a State or Federal conviction for a felony crime of sexual assault or any general or special court-martial conviction for a UCMJ offense which otherwise meets the elements of a crime of sexual assault, even though not classified as a felony or misdemeanor.

Reprisal—Taking or threatening to take an unfavorable personnel action, or withholding or threatening to withhold a favorable personnel action, or any other act of retaliation, against a DoD member for making, preparing, or receiving a covered communication.

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.

Sexual Assault—The following definition of sexual assault has been directed by DoD and is for training and educational purposes only. This definition does not affect in any way the definition of any offense under the Uniform Code of Military Justice. Commanders are encouraged to consult with their Staff Judge Advocate for complete understanding of this definition in relation to the UCMJ.

Sexual assault is a crime. Sexual assault is defined as intentional sexual contact, characterized by use of force, physical threat or abuse of authority or when the victim does not or cannot consent. Sexual assault includes rape, nonconsensual sodomy (oral or anal sex), indecent assault (unwanted, inappropriate sexual contact or fondling), or attempts to commit these acts. Sexual assault can occur without regard to gender or spousal relationship or age of victim.

"Consent" shall not be deemed or construed to mean the failure by the victim to offer physical resistance. Consent is not given when a person uses force, threat of force, coercion or when the victim is asleep, incapacitated, or unconscious.

Sexual Assault Response Coordinator (SARC)—An Air Force civilian employee or Air Force officer reporting to the Wing Vice Commander (WG/CV), who serves as the commander's central point of contact at installation level or within a geographic area to ensure appropriate care is coordinated and provided to victims of sexual assault and tracks the services provided to a victim from the initial report through final disposition and resolution. Ensures the implementation of prevention programs, to include sexual assault awareness, prevention and response training.

Unrestricted Reporting—A process a Service member 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 reportable to law enforcement and may be used to initiate the official investigation process.

Victim—For the purpose of this Instruction, a victim is a person who alleges direct physical, emotional, or pecuniary harm as a result of the commission of a sexual assault and who has a connection with the installation. If the victim is incompetent or incapacitated, the term "victim" includes one of the following (in order of preference): spouse, legal guardian, parent, child, sibling, another family member, or another person designated by a court. Victims will be eligible for and provided services by the Air Force consistent with their legal status. The services contemplated range from referral to the appropriate civilian or foreign agency to the provision of all services available to an active duty member. Nothing in this policy shall be constructed to authorize or require the provision of specific services (such as medical care or therapeutic counseling) unless the victim has an independent entitlement to such services under relevant statutes or Department of Defense directives. The restricted reporting option is only available to those sexual assault victims who are service members.

Victim Advocate (VA)—Military and DoD civilian employee volunteers, selected and trained by the SARC, who provide essential support, liaison services and care to victims.

Victim and Witness Assistance Program (VWAP)—The program to mitigate the physical, psychological, and financial hardships suffered by victims and witnesses of offenses investigated by U.S. Air Force authorities; foster cooperation between victims, witnesses, and the military justice system; and ensure best efforts are extended to protect the rights of victims and witnesses.

WG/CV—Wing Vice Commander, or for the purposes of this AFI, the civilian equivalent where no military vice is present. This term is used throughout this AFI and in each case it will represent the level of authority directly subordinate to the installation Wing Commander, responsible as the vice or deputy. This does not include Directors of Staff or other staff officers in wings or similar organizations.

Attachment 2

COMMANDER'S CHECKLIST FOR UNRESTRICTED REPORTS OF SEXUAL ASSAULT

VICTIM'S COMMANDER

( ) Ensure the physical safety of the victim--determine if the alleged assailant is still nearby and if the victim desires or needs protection.

( ) Determine if the victim desires or needs any emergency medical care.

( ) Ensure the SARC is notified immediately.

( ) Notify the Military Criminal Investigation Organization (MCIO) concerned, as soon as the victim's immediate safety is assured, and medical treatment procedures elected by the victim are initiated.

( ) To the extent practicable, strictly limit knowledge of the facts or details regarding the incident to only those personnel who have an official need to know.

( ) Take action to safeguard the victim from any formal or informal investigative interviews or inquiries, except those conducted by authorities who have an official need to know.

( ) Collect only the necessary information (e.g., victim's identity, location, and time of the incident, name and/or description of assailant(s)). DO NOT ASK DETAILED QUESTIONS AND/OR PRESSURE THE VICTIM FOR RESPONSES OR INFORMATION ABOUT THE INCIDENT.

( ) Advise the victim of the need to preserve evidence (by not bathing, showering, having anything by mouth, voiding bladder, or washing garments) while waiting for the arrival of representatives of the military criminal investigative organization.

( ) If needed, assist with or provide immediate transportation for the victim to the hospital or other appropriate medical treatment facility.

( ) Ensure the victim understands the availability of victim advocacy and the benefits of accepting advocacy and support.

( ) Ask if the victim needs a support person, who can be a personal friend or family member, to immediately join him or her. Be sure to advise the victim this support person could later be called to testify as a witness if the case goes to trial.

( ) Ask if the victim would like a chaplain to be notified and notify accordingly.

( ) Throughout the investigation, consult with the victim, and listen/engage in quiet support, as needed, and provide the victim appropriate emotional support resources. To the extent practicable, accommodate the victim's desires regarding safety, health, and security, as long as neither a critical mission nor a full and complete investigation is compromised.

( ) Continue to monitor the victim's well-being, particularly if there are any indications of suicidal ideation, and ensure appropriate intervention occurs as needed.

( ) If needed, confer with victim's Healthcare Personnel and consider the need for convalescent leave or other administrative leave options as Military Service policy permits.

( )Determine if the victim desires or needs a "no contact' order or a DD Form 2873, "Military Protective Order (MPO)," to be issued, particularly if the victim and the alleged assailant are assigned to the same command, unit, duty location, or living quarters. Coordination with other commanders may be necessary if the alleged assailant is assigned to a different commander.

( ) Determine the need for temporary reassignment to another unit, duty location, or living quarters on the installation of the victim or the alleged assailant being investigated, working with the alleged assailant's commander if different than the victim's commander, until there is a final legal disposition of the sexual assault allegation, and/or the victim is no longer in danger. To the extent practicable, consider the desires of the victim when making any reassignment determinations.

( ) Ensure the victim understands the availability of other referral organizations staffed with personnel who can explain the medical, investigative, and legal processes and advise the victim of his or her victim support rights.

( ) Emphasize to the victim the availability of additional avenues of support; refer to available counseling groups and other victim services.

( ) Attend the monthly case management meeting as appropriate.

( ) Ensure the victim receives monthly reports regarding the status of the sexual assault investigation from the date the investigation was initiated until there is a final disposition of the case.

( ) Consult with servicing SJA, as needed, to determine when and how best to dispose of the victim's collateral misconduct, if any.

( ) Absent extenuating or overriding considerations which, in the commander's judgment, make it inappropriate to delay taking action, the commander should consider deferring discipline for such victim misconduct until all investigations are completed and the sexual assault allegation has been resolved. Keep in mind the implications of this decision on speedy trial and/or statute of limitations.

( ) When practicable, consult with the servicing SJA, MCIO, and notify the assigned VA or SARC prior to taking any administrative or disciplinary action affecting the victim.

( ) Avoid automatic suspension or revocation of a security clearance and/or Personnel Reliability Program (PRP) access, understanding that the victim may be satisfactorily treated for his/her related trauma without compromising his/her security clearance or PRP status. Consider the negative impact that suspension of a victim's security clearance or PRP may have on building a climate of trust and confidence in the Military Service's sexual assault reporting system, but make final determination based upon established national security standards. (See DoD 5210.42-R, Chapter 5 for specific requirements.)

ALLEGED ASSAILANT'S COMMANDER

( ) Notify the appropriate MCIO as soon as possible after receiving a report of a sexual assault incident.

( ) Avoid questioning about the sexual assault allegation with the alleged assailant, to the extent possible, since doing so may jeopardize the criminal investigation.

( ) Any contact with a Service member suspected of an offense under the UCMJ may involve rules and procedures, that ensure due process of law and are unique to the military criminal justice system. Therefore, before questioning or discussing the case with the alleged assailant, commanders and other command representatives should first contact the servicing SJA for guidance.

( ) However, if questioning does occur, advise the Service member suspected of committing a UCMJ offense of his or her rights under Article 31, UCMJ.

( ) Safeguard the alleged assailant's rights and preserve the integrity of a full and complete investigation, to include limitations on any formal or informal investigative interviews or inquiries by personnel other than those by personnel with an official need to know.

( ) Strictly limit information pertinent to an investigation to those who have an official need to know.

( ) Ensure procedures are in place to inform the alleged assailant, as appropriate, about the investigative and legal processes that may be involved.

( ) Ensure procedures are in place to inform the alleged assailant about available counseling support. As appropriate, refer the alleged assailant to available counseling groups and other services.

( ) With the benefit of the SARC, VA, legal, and/or investigative advice, determine the need for a "no contact" order, or the issuance of an MPO, DD Form 2873.

( ) Monitor the well-being of the alleged assailant, particularly for any indications of suicide ideation, and ensure appropriate intervention occurs if indicated.

UNIT COMMANDER OF VICTIM AND/OR ALLEGED ASSAILANT

PREVENTION

( ) Establish a command climate of prevention that is predicated on mutual respect and trust, that recognizes and embraces diversity, and that values the contributions of all its members.

( ) Emphasize that sexual assault violates the core values of what being a professional in the Armed Forces is all about and is something that ultimately destroys unit cohesion and the trust that is essential for mission success.

( ) Emphasize DoD and Military Service policies on sexual assault and the potential legal consequences for those who commit such crimes.

( ) Keep a "finger on the pulse" of the organization's climate and respond with appropriate action toward any negative trends that may emerge.

IN THE EVENT OF A SEXUAL ASSAULT

( ) Discourage members from participating in "barracks gossip" or grapevine speculation about the case or investigation. Remind everyone to wait until all the facts are known and final disposition of the allegation has occurred before reaching conclusions.

( ) Remind members that discussion of a possible sexual assault incident might compromise an ensuing investigation.

( ) Emphasize that the alleged assailant is presumed innocent until proven guilty.

( ) Advise those who may have knowledge of the events leading up to or surrounding the incident to fully cooperate with any investigation involved.

( ) Consider some form of unit refresher training; or have an outside expert address the unit regarding preventive measures, as well as some of the emotional or psychological feelings that may manifest themselves, affect the unit, and require the unit's response during the course of the investigation.

( ) Continuously monitor the unit's overall climate to ensure neither the victim and/or the alleged assailant is being ostracized and prevent organizational splintering.

Attachment 3

COMMANDER'S OR AGENCY HEAD'S STATEMENT OF UNDERSTANDING

VICTIM ADVOCATE VOLUNTEER

1. I know _____ has volunteered to serve as a victim advocate (VA).

2. The Sexual Assault Response Coordinator (SARC) has briefed me on the roles and responsibilities of a VA.

3. I understand the VA position may involve or require a significant amount of time for training and performance of VA duties when assigned to a victim. These duties may include accompanying a victim to various referral appointments, interviews, and judicial proceedings. This time will be in addition to regular duties, and may occur after normal duty hours.

4. I understand a VA will be periodically on call to perform VA duties. While on call, the VA must be available to respond within a reasonable period of the notification to report.

5. I understand that while a VA is performing duties as a victim advocate, the VA reports directly to the Sexual Assault Response Coordinator (SARC).

6. I understand I will be informed of any absences from the work center as soon as possible, and if the mission dictates the VA must report to work for normal duty hours they will be given compensatory time as soon as possible after the event.

7. I and the supervisor will not interfere with, or otherwise attempt to negatively influence, a VA's sexual assault victim advocacy duties. If there is a conflict between a VA's primary duty and advocacy responsibilities, the SARC and I will discuss to resolve the conflict.

8. I will advise the SARC if my volunteer develops any negative quality indicators, and will discuss options regarding continued service as a VA.

9. I understand the VA will not report any details of the case to me nor will I ask them for any details.

10. If I should encounter any problems or concerns, I will contact the SARC or the VA Coordinator.

11. I understand the responsibilities of the VA and am willing to support them.

12. I have reviewed the volunteer's Personal Information File (PIF), evaluations history, and PRP (if applicable) and have found no factors that would disqualify this volunteer.

_____ _____

(Signature of Commander or Agency Head) (Date)

_____ _____

(Signature of Victim Advocate) (Date)

Attachment 4

VICTIM ADVOCATE VOLUNTEER STATEMENT OF UNDERSTANDING

VICTIM ADVOCATE ROLES AND RESPONSIBILITIES

I volunteer to serve as a victim advocate. My commander or agency head has agreed to make me available to act as a volunteer victim advocate. As such, I understand:

- My duties will be to provide essential support, liaison services and care to a victim. My responsibilities will include providing crisis intervention, referral and ongoing non-clinical support, including information on available options and resources to assist the victim in making informed decisions about the case.
- VA services will continue until the victim states support is no longer needed or the SARC makes this determination based on the victim's response to offers of assistance. I understand that my duties do not include providing counseling or therapeutic services to victims of sexual assault.
- My status as a volunteer VA may be terminated at any time at the discretion of, the Vice Wing Commander or the Sexual Assault Response Coordinator.
- I must successfully complete the entire mandatory 40 hours of training before I perform duties as a VA and that continuing education and training will be required.
- This position may involve or require a significant amount of my time for training and performance of victim advocate duties (when assigned to a victim).
- I will be periodically on call to perform VA duties and this time will be in addition to my regular duties. While I am on call, I must be available to respond within a reasonable period of the notification to report.
- While I am performing duties as a victim advocate, I report directly to the Sexual Assault Response Coordinator (SARC) and I must let my supervisor know when I am absent due to VA duties.
- I have no victim advocate responsibilities or authority regarding a victim unless I am specifically assigned to a victim by a SARC.
- I understand the need to treat all information, restricted or unrestricted, as sensitive personal information warranting limited access and effective controls.

Covered Communications Under Restricted Reporting

I understand

- While performing my duties as a VA, I will be told and have access to covered communications (confidential personal information under restricted reporting).
- Covered communications include any oral, written or electronic communication of personally identifiable information made by the victim to the SARC, assigned VA or a Healthcare Personnel or by and between the individual, SARC, assigned VA and Healthcare Personnel related to the sexual assault or alleged assailant.

- Personal identifying information includes information from and about a victim or alleged assailant in a sexual assault that would disclose or have a tendency to disclose a victim's or alleged assailant's identity. This personal identifying information might include the person's name or particularly identifying description (e.g., physical characteristics or identity by position, rank, or organization), or other information about the person or the facts and circumstances involved that could reasonably be understood to identify the person (e.g., a female in a particular squadron or dormitory when there is only one female assigned). In contrast, non-identifying personal information includes those facts and circumstances surrounding the sexual assault incident or individuals that generally describe the incident and individuals without tending to disclose an individuals' identity.
- I may not reveal personal or other identifying information without the express written consent of the victim or a determination that one of the exceptions to the AFI and Guidance on Sexual Assault Prevention and Response applies. Unless circumstances clearly warrant otherwise, I will disclose this information only after receiving permission from the SARC.

Acknowledgements

- I acknowledge that unauthorized disclosure of a covered communication, improper release of medical information and other violations of this directive may result in administrative action or action under the Uniform Code of Military Justice.
- I acknowledge that I have read and received a copy of the AFI and guidance on Sexual Assault Prevention and Response.

_____ _____

(Signature of Victim Advocate) (Date)

_____ _____

(Signature of Witness) (Date)

_____ _____

(Signature of Installation SARC) (Date)

Attachment 5

VICTIM ADVOCATE SEXUAL ASSAULT RESPONSE PROTOCOLS CHECKLIST

INITIAL RESPONSE

( ) Ensure that the victim understands that speaking with the VA is voluntary.

( ) Assess for imminent danger of life-threatening or physical harm to the victim by herself or himself (suicidal), by another (homicidal), or to another (homicidal).

( ) Seek immediate consultation from appropriate Healthcare Personnel for professional assessment when there is an imminent danger of life-threatening or physical harm to the victim or another person.

( ) If the victim has requested restricted reporting and the Healthcare Personnel determines there is an imminent danger, advise the victim of the exception to the Confidential Reporting Policy and notify the SARC.

( ) The SARC shall validate the exception and notify command and/or law enforcement as appropriate, disclosing only the details necessary to satisfy the exception.

( ) Ascertain the victim's immediate needs.

( ) Encourage the victim to seek medical consultation/examination.

( ) Ensure the victim is aware of the actions available to promote his or her safety.

( ) As appropriate, thoroughly explain to the victim each of the reporting options available to her or him, including the exceptions and/or limitations on use applicable to each.

( ) Review the DD Form 2910 if the victim is eligible to elect the restricted reporting option and it has been determined that none of the exceptions are applicable:

( ) Ensure the victim acknowledges his or her understanding of the explanation of each item by initialing on the space provided by each item.

( ) Ensure the victim indicates the reporting option that he or she elects by initialing in the space which corresponds to his or her selection. Remind the victim that failing to elect a reporting option and initial and sign the VRPS shall automatically result in an unrestricted report and notifications to the command and appropriate military criminal investigative organization.

( ) If the victim elects the "restricted reporting option," reiterate the availability of the option to change to "unrestricted reporting" at any time, which will result in the notification of command and law enforcement for possible initiation of an investigation.

( ) Ensure signature and date by the VA and the victim in the designated spaces.

( ) Provide a copy to the victim for his or her personal safekeeping, and give the original to the SARC as soon as practicable.

( ) Offer the information, as appropriate, regarding local resources for immediate safety and long-term protection and support, workplace safety, housing, childcare, legal services, clinical resources, medical services, chaplain resources, transitional compensation, and other military and civilian support services.

( ) Facilitate victim's contact with military and civilian resources, as requested by the victim.

( ) Advise victim of availability to provide ongoing advocacy services for as long as desired.

( ) Consult with the SARC on immediate assistance provided.

ONGOING ASSISTANCE RELATED TO RECOVERY FROM SEXUAL ASSAULT

( ) Serve as a member of the case management group and attend all Sexual Assault Case Management Group meetings involving the victim's case in order to represent the victim and to ensure the victim's needs are met.

( ) Maintain follow-up contact with the victim as requested by the victim.

( ) Support the victim in decision-making by providing relevant information and discussing available options.

( ) Assist the victim with prioritizing actions and establishing short- and long-term goals related to recovery from sexual assault.

( ) Support the victim in advocating on his or her own behalf.

( ) Provide the victim comprehensive information and referral on relevant local military and civilian resources and Military One Source.

( ) Assist the victim in gaining access to service providers and victim support resources that can help the victim explore future options and prioritize actions.

( ) Assist the victim in contacting appropriate military and civilian legal offices for personal legal advice and assistance specific to the victim's circumstances or case, including the filing for civilian or military protective orders. The VA shall not provide legal advice, but may provide general information on the civil or criminal legal process.

( ) Consult and work with the assigned Victim/Witness Liaison as applicable.

( ) Advise the victim of sexual assault clinical resources.

( ) Advise the victim of the impact of sexual assault on family members and offer referral information for family members.

( ) Accompany the victim to appointments and civilian and military court proceedings, as appropriate and when requested by the victim.

( ) Consult regularly with the SARC on ongoing assistance provided.

Attachment 6

VOLUNTEER VICTIM ADVOCATE APPLICATION

Name _____

Address _____

City/State/Zip _____

Organization _____

Home Phone _____ Duty Phone _____

1. Describe why you are interested in becoming a volunteer victim advocate?

2. What skills, education, or life experience do you have that you believe would help you serve effectively as a volunteer victim advocate?

3. In what ways do you think you would benefit personally from your training and service as a volunteer victim advocate?

4. Based on your current understanding of the responsibilities of a volunteer victim advocate, what do you think would be difficult or challenging aspects of this role for you?

5. Are you willing to commit to the mandatory training and on and off-duty time that may be required to assist a victim?

6. What other volunteer activities are you engaged with?

7. Do you have any current significant stressors in your work or personal life?

8. How do you manage the resultant stress?

9. Have you, or has anyone close to you, experienced a significant personal trauma?
Yes ___ No ____

If yes, the SARC will speak with you in private about this so that he or she can better understand its significance in your life and service to others.

(Note: A great many victim advocates or caregivers have been made stronger in their service to others by the care they themselves have received, including care from mental health professionals. This program affirms the work of mental health professionals, who have helped many individuals to experience growth and healing. A response to this question is requested in order that the SARC who will supervise and assign victim advocates can most effectively match victim advocates with victims.)

10. Have you ever been charged with a crime? Yes_____ No_____

If yes, please explain the nature of the charges and subsequent disposition.

11. Please provide two references who are not family members

a. Name _____

Address _____

Relationship _____

Phone number _____

b. Name _____

Address _____

Relationship _____

Phone number _____

The information I have provided in this application is true and complete to the best of my knowledge. I agree to serve as a volunteer victim advocate and to function within the boundaries of AF policy and assigned responsibilities. I give permission for the SARC to call my references, secure a criminal background check on me, and if deemed necessary, to consult with any treating physician or health care professionals regarding my ability to perform these responsibilities.

Signature _____ Date _____

Attachment 7

AFI 36-6001 FUNCTIONAL INSPECTION GUIDE

Note: During the course of inspections or inspection preparations, information relating to restricted reports must be protected as to not reveal personal data of any victim. Inspectors will support the goals of this instruction as they relate to a victim's right to privacy through restricted reporting. Any conflict arising from this guidance should be referred to the SJA and WG/CV for review, and possible elevation to the MAJCOM if necessary.

AFI 36-6001 FUNCTIONAL INSPECTION GUIDE, DD MMM YY				
ITEM NUMBER	**ITEM**	**REFERENCE(S)**	**COMMENTS**	**RESULTS**
1.	General			
1.1.	Does the SARC report to the WG/CV or equivalent, and implement and manage the installation level sexual assault prevention and response programs?	1.8.1. 2.3.1.		
2.	Program Execution			
2.1.	Does the SARC track the status of sexual assault cases in his or her designated area of responsibility and provide regular updates to the WG/CV?	2.3.2.1.		
2.2.	Are military SARCs graded at captain or above and designated as deployable resources?	2.3.3.1.		
2.3.	Are civilian SARCs graded at GS-12 or NSPS equivalent and governed by the mandatory SARC Standard Civilian Position Description?	2.3.3.2.		
2.4.	Are appropriate and qualified personnel available to serve as Alternate SARCs in the event of the primary SARC's absence due to leave, TDY, illness, etc.?	2.3.4.		

AFI 36-6001 FUNCTIONAL INSPECTION GUIDE, DD MMM YY				
ITEM NUMBER	ITEM	REFERENCE(S)	COMMENTS	RESULTS
2.5.	Does the SARC or the WG/CV if the SARC is unavailable, coordinate all appointments of Alternate SARCs with the MAJCOM?	2.3.4.3.		
2.6.	Does the SARC, upon notification, assign a VA to the victim as soon as possible?	2.3.5.2.		
2.7.	Does the SARC provide the WG/CV non-identifying personal information within 24 hours of a restricted report of sexual assault?	2.3.5.6.3.		
2.8.	Does the SARC work with appropriate installation agencies, if available, to ensure optimum support to victims of sexual assault?	2.3.5.9.		
2.9.	Does the appropriate unit commander or agency head concur in writing before a volunteer is selected as a VA, and does the volunteer acknowledge their understanding of their roles and responsibilities?	2.5.1.2.		
2.10.	Has the WG/CC or WG/CV established a Case Management Group with the SARC as the chair?	2.7.1.		
2.11.	For restricted cases, is the Case Management Group membership limited to the SARC, assigned VA, and Healthcare Personnel?	2.7.1.2.		

AFI 36-6001 FUNCTIONAL INSPECTION GUIDE, DD MMM YY				
ITEM NUMBER	ITEM	REFERENCE(S)	COMMENTS	RESULTS
2.12	Has the SARC been trained by the AF SARC course? (*Exception*: Air National Guard SARCs will be trained by appropriate National Guard Bureau course that covers mandatory requirements in DODI 6495.02, Enclosure 6).	2.8.1.		
2.13.	Does the SARC ensure that VAs complete mandatory AF VA training before being assigned to work with a victim, and has that successful training been documented with appropriate SEI code?	2.9.1. 2.9.2.		
2.14	Does the SARC ensure their supported population receives annual training?	2.10.1.		
2.15	Do deploying personnel receive predeployment SAPR training prior to departure?	2.10.2. 4.2.		
2.16	Does the SARC collect data on restricted reports and training completion, and submit to the MAJCOM SARC quarterly and annually by the suspense dates?	2.13.2.1. 2.13.3.		
2.17	Does the SARC generate an alpha-numeric RRCN, unique to each incident, to be used in lieu of personal-identifying information?	2.13.5.3.2.		
2.18.	Does the SARC budget for expenses to include, but not limited to, prevention materials, office supplies, and travel expenses?	2.14.1.		

AFI 36-6001 FUNCTIONAL INSPECTION GUIDE, DD MMM YY				
ITEM NUMBER	ITEM	REFERENCE(S)	COMMENTS	RESULTS
2.19.	Does the SARC office include a private consultation area and lockable working space with lockable file cabinet(s)?	2.15.2.1. 2.15.2.2.		
3.	Reporting Options			
3.1.	Is the DD Form 2910 used to document the victim's understanding of reporting options and subsequent preference?	3.1.9.9.		
4.	Collection and Preservation of Evidence			
4.1.	Does the SARC or VA notify the victim prior to the expiration of the one-year storage anniversary that the evidence will be destroyed unless the victim makes an unrestricted report?	5.2.8.		
5.	Command Actions in Response to Sexual Assault			
5.1.	Is the authority to dispose of cases resulting from an allegation of sexual assault only being exercised by squadron commanders or higher, and is the group commander the minimum to sign the final report of disposition?	6.4.1.1.		

Greetings! In the wake of this year's highly successful Freedom Award ceremony, I want to thank all of our great volunteers and support staff for your efforts in this program. Annually, the selection of Freedom Award recipients begins with the FCs and we cannot honor America's most deserving employers without you!

In discussions with service members, employers and reinforced by FC Chair examples, I feel we need to stress that our services are in deed free. I am requesting that each of you encourage your committee members when they are conducting briefings and at any time they have an opportunity to emphasize that ESGR services are provided by volunteers at no charge.

The October update will include the following:

1. **Freedom Award**
2. **Budget**
3. **Regional Leadership Conferences (RLC)**
4. **Planning, Execution, and Performance Reporting System (PEPRS)**
5. **Volunteer Management Training Program (VMTP)**
6. **Training**
7. **ESGR Flag/Banners in Army Reserve Centers**
8. **Reserve Component Member Direct Mail**
9. **Ombudsman Cases**
10. **Policy/Procedure Instructions**

Freedom Award: It was so great to see so many of you during the Freedom Award ceremony on September 18. This program begins with the work all of you do each and every day in encouraging and recognizing employer support, and it culminates in what has come to be the signature event of our Nation's capital. Once again, we have raised the bar to a new level, and you can see news stories, photos and videos from the event at www.freedomaward.mil, the official DoD website for the Freedom Award. I encourage you to bookmark this site as the 2009 nomination process will also take place through this site, beginning 3 November, 2008.

Budget: As we come to the close of another Fiscal Year, thanks to all who have assisted ESGR in the execution of activities. Remember that the FY-08 4th Quarter finance report is due to the RDDs by October 15. We are happy to report that we are not under a Continuing Resolution Authority (CRA)! RM is working FY-09 budget and allocations under the approved DOD authorizations. If you have any approved October events, please work closely with your USPFO to make sure funding is available.

Regional Leadership Conferences (RLC): As announced in early summer, we are renaming our RTC as leadership conferences, to better clarify the differences between these conferences and the continuing volunteer management training. Once again I want to thank all of the FC chairs who volunteered to host the 2009 RLCs. The FY-09 schedule is as follows:
Southeast Region: January 28-30, 2009 in Nashville, TN

Central Region: February 18-20, 2009 in Dallas, TX
West Region: March 11-13, 2009 in Phoenix, AZ
Northeast Region: April 1-3, 2009 in Newport, RI

We are working an attendance decision and the program agenda for the conferences. Look for more information to be published NLT 31 Oct 08.

Planning, Execution, and Performance Reporting System (PEPRS): The objective of PEPRS at the field level is to show how FCs are expending their funding and to provide a sensible, accurate means of transferring that information up the accountability chain of command to OSD/RA. We have been discussing this data collection process for some time and working toward replacing the existing Budget & Execution and Statement of Support reporting system for several months. On 16 Sep 2008 the FC user's guide for the Planning, Execution, and Performance Reporting System (PEPRS) was sent to all FC Executive Directors. PEPRS will allow you to collect key information and electronically transfer this data effortlessly to NCESGR. PEPRS was designed to eliminate cumbersome reporting requirements and formats used by FCs. We appreciate your feedback through your RDD's as we implement this new system.

Volunteer Management Training Program (VMTP): We have completed our first year of this program and enjoyed a tremendous success! I thank all of you that supported and took part in this training. We completed training for 465 volunteer leaders, over 85% of our targeted population. Field Chairs, Executive Directors, Area Chairs, Military and Employer Outreach Directors all took part in the training and walked away from it energized to go forth and accomplish great things in support of our mission. We will continue the program in FY09 with an additional 252 volunteers being trained in the following functional areas: Training Directors, Public Affairs Directors, Ombudsman Directors (please do not confuse this with our Basic Ombudsman Course), and Area Chairs. We will also capture those who missed the Field Chair and Executive Director training from our first round of the VMTP and also train some of our emerging volunteer leaders. We will schedule nine sessions, two for each of the functional areas and three for our Area Chairs. As soon as we deconflict our FY09 schedule, we will announce the VMTP training dates and locations for the entire year. There will be 28 seats available per session so please take advantage of this wonderful opportunity to improve our overall effectiveness! For further information with regard to our VMTP, you may contact the NCESGR Training Administrator, Jeff Graber at 1-800-336-4590 x572.

ESGR Flag/Banners in Army Reserve Centers: The U.S. Army Reserve Command at Ft McPherson, GA published Operations Order 08-158 to its subordinate commands, which directs commanders or facility managers to coordinate with their respective State ESGR committee to arrange for the delivery of ESGR flag(s). CSO is actively working the ESGR flag order process and 500 flags have been ordered. We are also working with USAR leadership to clarify logistic details before sending an announcement to the FC's.

Reserve Component Member Direct Mail: The Outreach Subcommittee and the NOP staff have produced another piece of outreach collateral designed to inform and educate one of our main customers: the RC member. Please be on the look out for the new RC direct mail brochure. Exhibit Arts will mail each FC 50 brochures prior to the mailing to the service members. Every RC member who has been deployed in the past 24 months (approximately 164,000) will receive the direct mail piece in early October.

Ombudsman Cases: The Ombudsman Directorate has noticed an increase in the number of subpoenas, Freedom of Information Act (FOIA) requests, and inquiries from Members of Congress and the media concerning ombudsman cases. Should you receive these requests, please notify the NCESGR Ombudsman Directorate immediately. Do not attempt to respond or answer these requests for information. Forward all information to the attention of the Ombudsman Director, via email, fax or mail. You may acknowledge receipt of the request but notify the requesting party that NCESGR will provide a formal response. We will work with our lawyers to ensure an appropriate legal response to their request is submitted.

Policy/Procedure Instructions: As you all know, we have a series of Instructions that specify our policies and procedures for our activities. To make sure we are positioned to continuously transform our organization to become more relevant, effective, and efficient, we have completed an intensive review and update of all our Instructions. These have been added to ESGRNet on 1 Oct. Each also has a one-page synopsis of major changes. Please review and make sure you and your respective FC are using these new guidelines for all your operations. This link will take you to the site: http://www.esgrnet.com/Library/library.asp?area=ESGRInstructions