

Coalition Chronicles



A newsletter of the
Wisconsin Coalition Against Domestic Violence
Volume 32 Issue 1

TO HONOR AND PROTECT

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From the Director

By Patti Seger

Collectively, we constantly search for trends and patterns that might provide insights and help us keep victims and children safe.

In recent months, six domestic violence related homicides in Wisconsin were committed by military veterans. What could have been done to prevent those homicides? Our men and women in service commit themselves to protecting all of us. What happens when they stop protecting those closest to them: their own families?

Let's be clear: most men and women who serve in the military will never be violent when they return home. Yet, there is also a growing body of information to suggest certain aspects of military and combat experience may exacerbate the dynamics of domestic violence. Additionally, mental health conditions such as post traumatic stress disorder and traumatic brain injury, which are seen among individuals who have been in combat, may independently explain some violent behavior. The relationships between military service and domestic violence are multifaceted and vary from cases to case. And, more research is needed.

However, as always, the lack of clear answers does not stop us from asking important questions, utilizing the information available and applying core principles of advocacy to provide the best possible services for victims.

(Continued on page 2)

FROM THE DIRECTOR... continued

This Coalition Chronicles explores the complex relationship between the military and domestic violence. As the two wars that have occupied the U.S. for more than 10 years wind down and more veterans return, we need to be prepared for what may come. We want to both honor the heroes who made sacrifices for our country, while preserving the safety of the families who supported them while there.

In peace,



Editor's Note:

We found content that we believe is meaningful and useful to those who assist victims of domestic violence and their families. We recognized that men and women of color were represented in numbers disproportionate to those of Caucasian men and women, both in the military in general, and among the victims and perpetrators of domestic violence homicide committed in Wisconsin by veterans.

We hoped to find thoughtful discussion of the intersections of race, class, gender and sexual orientation related to domestic violence in the military, and what this might mean for our readers. In the end, our research yielded very little guidance about what might be done to specifically address the needs of people from underserved communities who were military-involved victims or perpetrators. One notable exception is the Tribal Veterans Service Offices and individual tribal programs. (See page 13.)

- Colleen Cox

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The life of the dead is placed in the memory of the living.¹

Victims of 2012 & 2013
Wisconsin domestic violence homicide

By Tracy Shoberg

Zina Haughton (age 42)

Zina Haughton, of Milwaukee County, was killed in a domestic violence homicide involving a firearm on October 21, 2012. The perpetrator of this homicide was Radcliffe Haughton, her husband and former Marine, who opened fire at her workplace, the Azana Salon and Spa in Brookfield. Zina had recently obtained a restraining order with firearm restriction against him, but Haughton was able to purchase a gun from a private seller. Zina's co-workers said she was a hero the day of the shooting. They said she will be remembered as a wonderful mother and friend. Radcliffe Haughton committed suicide at the Azana Salon and Spa.

¹Marcus Tullius Cicero

²Information about these homicides has been gathered from news reports, uniform crime reports, publicly available information, such as criminal complaints, and information from local domestic violence victim service providers.

Victims of 2012 & 2013 Wisconsin DV Homicides Committed by Veterans ...continued

Maelyn Lind (age 38)

Maelyn Lind, of Waukesha County, was a co-worker of Zina Haughton's who was killed by Marine veteran Radcliffe Haughton at the Azana Salon and Spa in Brookfield on October 21, 2012. Lind is survived by her husband and children.

Cary Robuck (age 35)

Cary Robuck, of Racine County, was another co-worker of Zina Haughton's at the Azana Salon and Spa. Her life was also taken by Radcliffe Haughton on October 21, 2012. She is survived by her daughter, parents, brother, step-sister, and grandparents.

Traci Moyer (age 46)

Traci Moyer, of Rock County, was killed in a domestic violence (DV) homicide on December 8, 2012 by her estranged husband and former Marine, Krystofer Carlisle. Moyer had filed for divorce in early November. Her daughter reported her missing to the police; she is quoted saying Moyer was a wonderful mother and will be missed. Carlisle was found guilty of first-degree intentional homicide and was sentenced to one life term in state prison.

Jennifer Sebens (age 30)

Jennifer Sebens, of Milwaukee County, was killed on December 24, 2012 in a DV homicide involving a firearm. The perpetrator of this homicide was Benjamin Sebens, her husband and former Marine who recently served two tours in Iraq and was honorably discharged in 2005. Jennifer worked as a police officer in the Milwaukee area. Sebens allegedly stalked his wife for a few days before ambushing her on Christmas Eve. Jennifer was shot in the head while on duty and patrolling alone. The chief of police said she will be remembered as energetic, intelligent, and as a great police officer. Benjamin Sebens is charged with first-degree intentional homicide. The jury trial is set to begin in July of 2013.

Jennifer Boyce (age 31)

Jennifer Boyce, of Dane County, was killed on January 23, 2013 by her estranged husband and former member of the Coast Guard, Bernard Grosso, who then committed suicide with a firearm. Boyce and Grosso were due in court the following day to finalize their divorce. The couple had separated in March 2012 and had no record of domestic abuse in the past.

Anita Brooks (age 27)

Anita Brooks, of Milwaukee County, was killed in a DV homicide involving a firearm on January 27, 2013. The perpetrator of this homicide was Keith Brooks, her estranged husband and Army veteran who was discharged in October of 2005. On the morning of the homicide, the couple was involved in a verbal argument. The argument escalated into a physical fight and Keith shot Anita with a pistol. The couple had a three-year-old daughter and a fund has been set up for her under the name "Anita Brooks." Keith is being charged with first-degree intentional homicide and battery. The jury trial is set to begin in July of 2013.

Victims of 2012 & 2013 Wisconsin DV Homicides Committed by Veterans
...continued

Toni Voss (age 27)

Toni Voss, of Adams County, was killed in a DV homicide involving a firearm on March 2, 2013 by Coleman Dybul, her boyfriend and former Marine who served for four years on several tours in Afghanistan. During the

night, Dybul reportedly woke up because he heard a noise and thought he saw a silhouette of a person outside his bedroom window. Dybul said he screamed, causing Voss to scream as well. Dybul says he believed someone was choking Voss and picked up the loaded shotgun he kept next to the bed and shot the person he believed to be attacking her. Dybul turned the lights on and found Voss shot in the chest. He immediately called 911. Dybul reportedly suffers from PTSD. Dybul is charged with first-degree reckless homicide.

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Domestic Violence in the Military: an Overview

by Sara Krall

We broach the subject of military-related domestic violence during a particularly sensitive time. In Wisconsin, since October 2012:

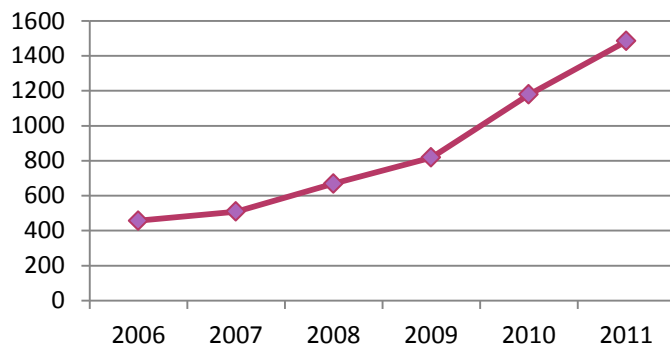
- Fourteen (14) lethal domestic violence homicide incidents have occurred, six (43%) of which were perpetrated by veterans.
- These 6 domestic violence homicide incidents resulted in 10 deaths: 8 victims were murdered and 2 of the perpetrators committed suicide.

(See "The Life of the Dead is Placed in the Memory of the Living", pages 2-3.)

Domestic Violence in the Military: an Overview... continued

When domestic violence (DV) or intimate partner violence (IPV) occurs among military families, seeking safety and protection becomes more complex for victims and those who assist them. There were nearly 400,000 veterans living in Wisconsin in 2012, which is roughly 7% of the state's entire population.³ As more troops are

Military Calls Documented



In the last 6 years, the annual number of military calls to the National Domestic Violence Hotline has *more than tripled*. Military calls have increased by over 25% in just the last year alone.

Source: Battered Women's Justice Project, National Domestic Violence Hotline Military calls Accessed 3/19/13

http://www.bwjp.org/files/bwjp/files/NDVH_Military_Calls_2006_through_2011.pdf

scheduled to return home from recent deployments overseas, we anticipate that this number will increase. Victim services providers and other systems must be prepared for an influx of people affected by violence related to military involvement.

Victim Advocate Guide: Intimate Partner Violence (IPV) with Military-Related Victims

What is the relationship between the effects of war and IPV? Does having been in combat cause IPV?

There is no one answer to this question. While most returning military personnel have readjustment and stress issues, most do not become abusive to their partners and/or families. However, in some relationships where there was a history of controlling behavior and/or physical violence prior to deployment to the war, there are reports of increased violence upon return. And, in some relationships in which there was no history of violence prior to deployment, there are reports of psychological and/or physical violence upon return from the war.

The Battered Women's Justice Project (BWJP) has explored the many issues related to domestic violence in the military as they have emerged in recent years.

This section has been excerpted from the BWJP *Victim Advocate Guide: Intimate Partner Violence (IPV) with Military-Related Victims*. To view the document in its entirety, go to: http://www.bwjp.org/files/bwjp/files/Victim_Advocate_Guide.pdf

****How does combat experience affect personal relationships?***

Military members, including active duty military, Reserve, and National Guard personnel, learn combat skills and function in a battle mindset to survive in the combat zone, but this mindset and the accompanying combat skills may create problems when transitioning home. It can be difficult to change back to a "civilian" mindset upon returning home.

- Most people coming from war zones will have stress reactions and will need to readjust to being home. This can be especially intense during the first months at home. These common stress reactions are a normal part of readjustment. Anger, anxiety, fear, aggression, and/or withdrawal are common war zone stress reactions. Even minor incidents can lead to over-reactions.

³ Wisconsin Department of Veterans Affairs, Veteran Population Data Accessed 3/19/13
<http://dva.state.wi.us/PA-VeteransData.asp#Data>

Domestic Violence in the Military: an Overview... continued

- Most will successfully readjust to life back home.
- Stress reactions and problems that last for months can affect relationships, work, and overall well-being, if not treated. A person may be coping with stress by drinking, doing drugs, withdrawing, isolating, and/or he/she may be having sudden emotional outbursts.

- Many combat veterans experiencing combat-related mental health problems (e.g., post-traumatic stress disorder) do not seek treatment either when they are active duty or when they become veterans.
- Increasing numbers of psychologically-injured active duty service members and veterans are surfacing in the criminal justice system accused of a variety of crimes, including but not limited to IPV.

What is Post-Traumatic Stress Disorder?

- Many of the common reactions to experience in the war are also symptoms of more serious problems such as post-traumatic stress disorder (PTSD). PTSD is a serious but treatable condition that can occur after experiencing a traumatic event(s) that involved death or injury to self or others. Symptoms include:
 - Experiencing intrusive, bad memories of a traumatic event.
 - Avoiding things that might trigger memories of the traumatic event, such as crowded places, loud noises, etc.
 - Shutting down emotionally to prevent feeling pain, fear, or anger.
 - Operating on “high-alert” at all times, having very short fuses, and/or startling easily.
 - Experiencing sleep problems, irritability, anger, or fear.

Did you know?

Military Protection Orders (MPOs) are treated differently than protection orders issued by states, tribes, or territories. MPOs are enforced only on the base on which it was issued. These orders do not meet the due process requirements for full faith and credit as the abuser is not given notice or opportunity to be heard by command staff that issued the MPO. However, state, tribal, and territorial orders are given full faith and credit on military installations. (Armed Forces Domestic Security Act 10 U.S.C. §1561 a(a)(c))
<http://www.vaw.umn.edu/document/s/fullfaithcreditadvocatesguide/fullfaithcreditadvocatesguidepdf.pdf>

- In PTSD, symptoms are much more intense and troubling and don't go away. If these symptoms don't decrease over a few months, they can cause problems in daily life and relationships. PTSD can make someone hard to be with.
- Some combat veterans with PTSD may be violent and some may not. When IPV is also present, PTSD may aggravate the IPV behaviors or vice versa.

Domestic Violence in the Military: an Overview... continued

What other health/mental health issues might be related to military experience in a combat zone?

Traumatic Brain Injury (TBI)

- Explosions that produce dangerous waves of high pressure rattle a person’s brain inside the skull and can cause a mild TBI. Helmets cannot protect against this type of impact. Some people have had these experiences while deployed but are unaware that some of their problems may be a result of a mild TBI.
- Some symptoms of mild TBI are similar to those of PTSD such as sleep problems, poor memory, anxiety, depression, irritability, impatience, anger, poor impulse control and/ or increased verbal/physical aggression. There can also be headaches, dizziness, fatigue, blurred vision, and intolerance to noise and light.
- The presence of a TBI may aggravate PTSD stress reactions and vice versa.
- Some veterans with TBI may be violent and some may not. When IPV is also present, TBI may aggravate the IPV behaviors and vice versa.

Substance Abuse

Some combat veterans “self-medicate.” They drink or abuse drugs to numb out the difficult thoughts, feelings, and memories related to their war zone experiences. Warning signs of a problem include:

- frequent, excessive drinking or drug use;
- having thoughts they should cut down;
- feeling guilty or bad about drinking or using drugs;
- others becoming annoyed or criticizing how much the person is drinking or using drugs;
- problems with work, family, or other regular activities caused by drinking or drug use.

Some combat veterans with substance abuse problems may be violent and some may not. When IPV is present, the substance abuse may aggravate the IPV behaviors and vice versa. Research indicates that chronic substance abuse by the IPV perpetrator poses an increased risk for dangerous/lethal violence.

Depression and Suicide

- War experiences and combat stress reactions can lead a depressed person to think about hurting or killing themselves. If your partner is feeling this way, take it seriously and seek help.
- Combat exposure, PTSD, depression, substance abuse, and/or TBI increase the risk of suicide.
- A common emotional reaction to combat is to feel guilty, blame oneself, or feel shame. Combat-related guilt is strongly related to suicidal behavior.

Did you know?

Federal Statute 18 U.S.C. § 922 (g) (6) states that a dishonorable discharge (DD) can only be handed down to an enlisted member by a general court-martial.

Dishonorable discharges are handed down for what the military considers the most reprehensible conduct. US federal law prohibits ownership of firearms by those who have been dishonorably discharged per the Gun Control Act of 1968.

Domestic Violence in the Military: an Overview... continued

- Male combat veterans are twice as likely to die from suicide as their civilian counterparts. Suicidal thinking and behaviors are risk factors for lethal IPV. Homicide-suicide accounts for 27-32% of deadly IPV incidents in the general population.

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Understanding Military Structure and Response to Domestic Violence¹

Adapted by Juanita Davis

The stressors of combat and military service can increase risk factors for domestic violence among military families. Military life and culture, with its powerful control over the lives of service members, make families and individuals with connections to the military particularly vulnerable when domestic violence occurs. The regular rotation of service members and their families, often to locations with unfamiliar cultures, may isolate victims from familiar support systems. Further, victims connected to the military fear that if abuse is reported, the batterer will lose his job or otherwise face adverse career consequences, possibly leaving the victim and her children impoverished and without access to housing or health care.

The remainder of this section is designed to provide civilian advocates with a brief overview of the military's basic structure and its response to domestic violence when it occurs among current service members and their families. While this section provides a broad overview, it cannot begin to describe all the differences in policy and practice among the different branches of the armed services or among different military installations in different states or countries. Nor does this section offer a detailed explanation of the complex matrix involved in assisting veterans to access service through the Department of Veterans Affairs.²

The Commanding Officer (CO)

The CO has the overall responsibility for the response to domestic violence on the installation, including the Family Advocacy Program (FAP), any military law enforcement, housing issues, etc. In many ways, an installation CO is similar to the mayor of a city or town – the buck stops with him or her!

For advocates, the only sure way to become an effective advocate for military victims is to get to know your local military installation and how it operates, building relationships and creating allies within the system.

¹ This article was adapted by Juanita Davis specifically for the current issue of the Chronicles, from the manual *Understanding the Military Response to Domestic Violence: Tools for Civilian Advocates*, written by Judith E. Beals (2003), updated by Patricia Erwin, PhD (2007), and published by the Battered Women's Justice Project. The complete manual can be viewed at: www.bwjp.org/files/bwjp/articles/Appendix%2007_Understanding%20the%20Military%20Response%20to%20Domestic%20Violence_Part1.pdf

² For more information on the types of assistance that might be available to veterans through the Department of Veterans Affairs, visit the department's website at <http://www.va.gov/>.

Understanding Military Structure and Response to Domestic Violence...continued

The Four Branches of the Military

The United States Armed Forces are comprised of four services branches: the Air Force, Army, Marine Corps, and Navy. The U.S. Coast Guard is also a part of the Armed Forces, though it operates under the supervision of the U.S. Department of Homeland Security. Military service members can be either Active Duty or part of the Reserves (including National Guard) for a particular branch.³ All branches of the military are organized through the United States Department of Defense (DoD).

Since 2001, the DoD has issued several memoranda for all branches of the military in regard to the appropriate response to incidents of domestic violence committed by or against active-duty service members or their family members, as well as protocol for training key interveners and suggested collaborations between military and civilian communities. Each service branch has developed its own specific implementing instructions related to these directives, but there are some basic tenets of response which all military branches must follow. In addition, because the military is a very hierarchical institution, the military response to domestic violence in a particular instance is guided by the Installation Commander.

In general, the U.S. military is built upon the foundation of the Commanding Officer's "need to know" everything about the safety and well-being of military personnel and their family members in order to continually assess the service member's fitness for duty and any potential impact on "mission readiness". However, the (DoD) has recently made a critical exception to this "need to know" for domestic violence victims, giving each individual the option of either making a "restricted" or "unrestricted" report of domestic violence.

³ Notably, member of the National Guard and the Reserves of any branch are not subject to military domestic violence response systems unless they have been called into active duty.

Understanding Military Structure and Response to Domestic Violence...continued

The Family Advocacy Program (FAP)

At each installation, FAP is tasked with preventing, identifying, assessing, and treating domestic abuse. In most cases, military victim advocates are housed within the FAP offices. Other FAP staff may include clinical social workers as well as prevention and outreach specialists.

Did you know?

Federal law regarding firearms prohibition applies to military personnel.

Federal law [18 U.S.C. § 922(g)(9)] prohibits individuals convicted of certain misdemeanor crimes of domestic violence from possessing firearms, ammunition, or explosives. This prohibition applies without exception to military personnel. Therefore, a qualifying domestic violence conviction will likely result in a military serviceperson's discharge, and this consequence may factor into a victim's decision to report abuse to law enforcement or participate in a criminal prosecution.

The Unrestricted versus Restricted Reporting Policy in the Military

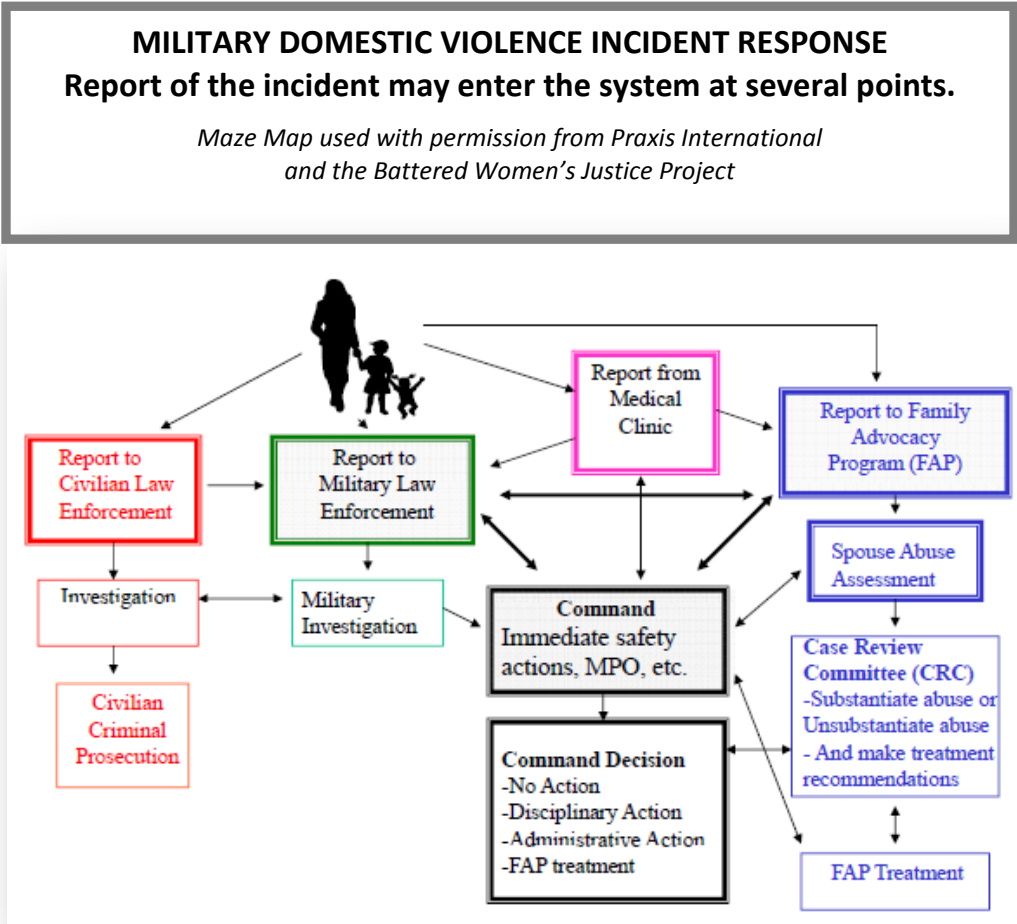
Restricted Report

When a victim of domestic violence decides to make what the military refers to as a restricted report of domestic violence, the victim of abuse is allowed to report to specific individuals on the military installation, including the victim advocate, victim advocate supervisor, or a health care provider (e.g. Family Advocacy Program (FAP) clinical social workers or OB/GYNs). A victim advocate will do safety planning with the victim and discuss the victim’s immediate and long-term needs.

Under this policy, the victim can report details of the abuse without the person having to report it further. There are exceptions to this policy that do not grant the military victim advocate the same level of confidentiality that many civilian advocates have. For example, if a restricted report comes to be known to the commander of a service person by a source other than the restricted report, it will be fully investigated as if it were an unrestricted report (see below). Also, if a victim makes a restricted report and it becomes known to a mandated reporter such as law enforcement, the report automatically becomes an unrestricted report.

Unrestricted Report

An unrestricted report of domestic violence can originate through military or civilian law enforcement, victim advocates, medical personnel housed on military bases, FAP, the victim or offender, command or others such as coworkers, neighbors, friends, etc. When an unrestricted report is made, the military chain-of-command is made aware of an incident and an investigation of the incident is conducted by law enforcement, the FAP,



Understanding Military Structure and Response to Domestic Violence...continued

and the military commander. Whoever receives the unrestricted report first is supposed to forward the report to the other above-named interveners.⁴

During this stage, a military victim advocate will work with the identified victim to ascertain immediate safety issues. As part of this step, the advocate will also work with the command to determine the need for a Military Protective Order (MPO) in the case. MPOs cannot be enforced by civilian law enforcement, but they do apply to the active-duty member wherever he or she is; it is a violation of a command order to violate the MPO, and the active-duty member can be disciplined under the Uniform Code of Military Justice for such violation.⁵ Once an unrestricted report of domestic violence is made, military law enforcement will conduct any follow-up investigation that is necessary. This may be done by the police, military investigators or military command. Concurrently, FAP staff is tasked with conducting a clinical assessment of both the alleged offender and the victim regarding the history and the reported incident of domestic violence. The active-duty member is usually required to participate in the assessment process by his/her command; however, civilians (both victims and abusers) have the option of whether or not to participate. If a victim does not want to talk to a counselor, she can relay information through the victim advocate as an alternative.

Once the investigation and assessments are complete, the information gathered is presented to a review board. In most of the military branches, the command convenes a multi-disciplinary FAP committee, which may include law enforcement personnel, command representatives, FAP representatives and legal representatives. Victim advocates and counselors may attend based on service and installation policies.

The goal of the FAP committee is to determine if abuse happened in the incident reported. In substantiated cases, the committee will make a recommendation to the service member's command for clinical follow-up services. Depending on the severity of abuse and danger to the victim, this can include possible continuation of the MPO, relocation of the victim, monetary support, or other services and treatment for both victim and offender (such as military-based batterer intervention program for the offender).

Understanding Military Structure and Response to Domestic Violence...continued

Jurisdictional Issues

⁴ Increasingly, civilian communities located near military installations either have, or are developing, Memoranda of Understanding (MOUs) with the installation for responding to domestic violence incidents involving military personnel. These agreements generally cover law enforcement response, prosecution, protective orders, shelter, and information sharing. These reporting agreements also generally cover how to handle civilians who are abusive on-installation and reports of domestic violence that originate off-installation which involve active-duty members.

⁵ Please note that even if a Military Protective Order (MPO) has been issued in a domestic violence case, a victim should always consider pursuing a civil protection order (CPO) in the civilian jurisdiction. A CPO is enforceable both on and off the installation, as well as in all 50 U.S. states. Furthermore, a CPO may last longer than an MPO and can often include orders concerning custody and financial support.

Questions of jurisdiction in the context of domestic violence and the military can be confusing. Some installations are under exclusive federal jurisdiction while others have both local and federal jurisdiction (concurrent). For civilian advocates working with victims who have relationships with the military, it is advisable to find out which type of jurisdiction governs the installation with which you may be working. A key person to help you in your understanding of jurisdictional issues will be the judge advocate general (JAG) officer (an attorney) for the base.⁶

⁶ Notably, under the Soldiers and Sailors Civil Relief Act (SSCRA), service members can sometimes avoid responding to criminal charges and civil lawsuits (including divorce and custody actions as well as domestic violence protective order actions) if they are deployed or if the proceeding is not in the state where the installation is located. If questions arise regarding this Act, or any other legal questions related to domestic violence in the military context, it may be advisable legal advice.

Native American Veterans and Domestic Violence

Native American women and men have a historic place in the annals of the United States military. Six thousand native people served in WWI when tribal people were not yet acknowledged as citizens of the U.S. Today more native women serve (per capita) than all other people of color combined.¹ Native people who serve also suffer most from post-service trauma, including post-traumatic stress disorder (PTSD) and Complex PTSD. It's been acknowledged that veterans are at a higher risk to become batterers and victims of domestic violence.² Many native women enlist to escape a domestic violence relationship. Help may be found by contacting a representative of the Wisconsin Department of Veterans Affairs Tribal Veterans Service Offices at <http://dva.state.wi.us/CVSO-tvso.asp> or checking with the individual tribal programs closest to you. Many tribes use a supportive, person-centered approach that includes cognitive behavioral and cultural healing to aid their veterans.

¹ US Census Bureau, American Community Survey, Public Use Microdata Sample, 2010. Prepared by the National Center for Veteran Analysis and Statistics.

² US Department of Veteran Affairs, Information on Trauma and PTSD, Public Section.



As more knowledge emerges about the connections between military experiences and domestic violence, experts are encouraging victim service providers to screen clients for military service. Knowing about a victim's or perpetrator's military history can help advocates: know what other questions to ask and areas to explore; identify risk factors associated with military service or combat experience; identify other support services that are available to military members, veterans, and their family members; and respond to victims in ways that are sensitive to their experiences and to military culture.

Screening for military service is a matter of asking the right questions. For example, simply asking, "are you a veteran?" may not elicit the desired information because many women who were formerly in military service do not self-identify as veterans. Additionally, current service personnel, individuals who were not in combat and reservists may not identify as veterans.

The following questions were developed to elicit the most pertinent information from clients. The questions allow advocates to quickly determine whether military service is in the client's background and what deployment and combat experiences might be relevant to the case.¹

Expanded Screening Questions

Tony Gibart and Juanita Davis

1. Have you (or your partner) ever served on active duty in the Army, Navy, Air Force, Marines or Coast Guard or in the National Guard or Reserves?
→ If yes, ask: Which Service? When?
2. If active duty, what is your rank? What is your partner's rank? Do you (and your partner) live in military housing? How long have you been in the service? (How long has your partner been in the service?)
3. Have you (or your partner) ever deployed to a war zone?
→ If yes, ask: How many times? To where? When?
4. Are there any upcoming deployments or returns from deployment?
5. Do you (or your partner) have combat experience?
→ If yes, ask: Where? When?
6. When were you (or your partner) discharged? What type of discharge did you (or your partner) receive?

Tools for advocates...continued

7. Have you reported the abuse to anyone at the installation? What exactly did you report? To whom? What happened?

¹ Military service information can be tracked in *Alice* (the software used by most Wisconsin domestic violence programs to assist with reporting aggregate service data) to help programs understand the proportion of the population they are serving that has a military background.

Safety at Home – Intimate Partner Violence, Military Personnel, and Veterans

The **Battered Women’s Justice Project** has an e-learning course that provides advocates with a solid foundation to assist victims of domestic violence in military-related families.

Currently, four modules of the training are offered:

- *Context of Violence;*
- *Risk and Danger;*
- *Combat Stress; and*
- *Co-occurring Conditions and Intimate Partner Violence.*

Some of the material in the first modules may seem basic for domestic violence advocates; however, the training allows you to go at your own pace. The later sections do a very good job of introducing conceptual tools for understanding the nuances and compounding risk-factors that can be present when domestic violence occurs in military-related families. In particular, the training assists advocates in assessing if and how perpetrators’ combat-related experiences and conditions, such as post traumatic stress disorder, traumatic brain injury and alcohol and drug abuse, influence the dynamics of domestic violence cases.

Additional modules, building off of the four currently available, will be posted when they are completed.

Future modules will include:

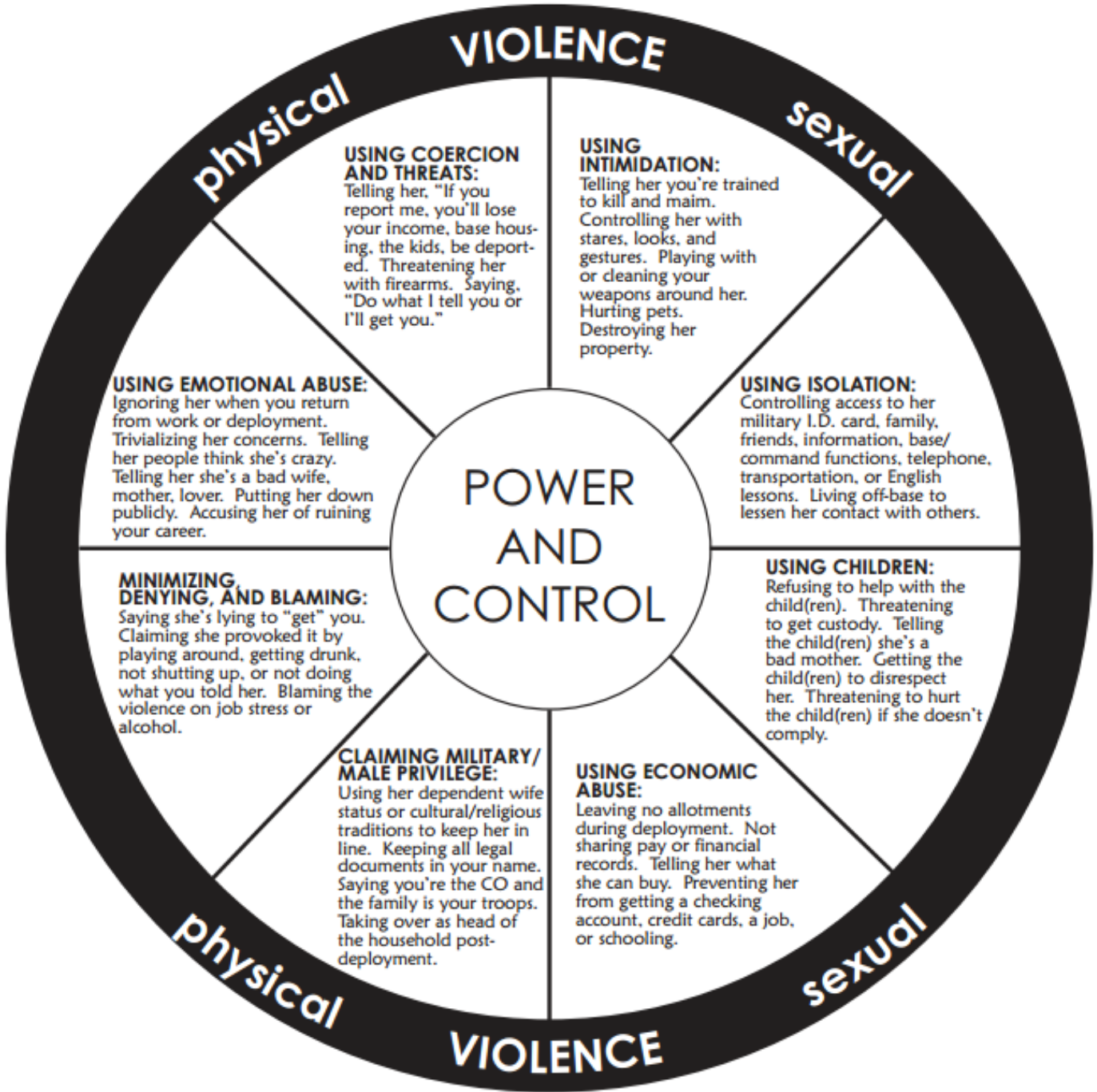
- *Military and Veteran Cultural Competence;*
- *Department of Defense Response to Intimate Partner Violence;*
- *National Guard, Reserves, and Department of Veterans Affairs Response to Intimate Partner Violence;*
and
- *Collaboration, Memoranda of Understanding, and Jurisdiction.*

To access the training go to: http://www.bwjp.org/elearning_course.aspx

Military Power & Control Wheel

The following page shows an adaptation of the Duluth Domestic Violence Intervention Project’s Power & Control Wheel, produced by the National Center on Domestic and Sexual Violence. It can be found online at www.ncdsv.org/images/MilitarycontrolwheelNOSHADING.pdf

MILITARY POWER AND CONTROL WHEEL



Produced and distributed by:

Developed from:
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Creating a Military-Civilian CCR¹

Adapted by Sara Krall

The idea of a coordinated community response (CCR) to domestic abuse emerged in the late 1970s as advocates working in programs for battered women began to identify ways in which the criminal justice system response could change to better protect victims of battering, strengthen safety planning, and focus attention on holding perpetrators accountable for the harm they caused. The emphasis was on a united interagency response with common goals of safety and accountability. Prior to the military-civilian demonstration initiative launched in 2004, the idea of a CCR developed primarily in the civilian sector. In an initiative funded by the Office of Violence Against Women, staff at the Battered Women’s Justice Project and the National Center on Domestic and Sexual Violence coordinated pilot projects in two military-civilian communities, in an attempt to illustrate how this partnership could come to be a success.

Coordinated Community Response (CCR) teams can be a helpful tool for building a comprehensive response to domestic violence across military-civilian lines. Relationships of trust are essential to a sound CCR. Without this foundation, participants will be unwilling to examine their individual and collective practices and negotiate meaningful agreements across military and civilian jurisdictions. While certain issues may be specific to local circumstances, challenges related to defining the scope of intimate partner violence (IPV), building relationships of trust, and defining military-civilian roles may cause some friction in the group.

Elements of a CCR

The experiences of dozens of CCR teams across the country have made it possible to identify eight core activities that are essential to the criminal legal system’s intervention in domestic violence cases. How these activities are carried out in a particular community will vary, as will the emphasis on different aspects at different points in the development and implementation of a coordinated response.

¹ This has been excerpted from “Collaborating for Safety: Coordinating the Military and Civilian Response to Domestic Violence Elements and Tools” authored by Jane Sadusky. The military-civilian coordinated community response (CCR) demonstration projects discussed in this guide were launched in 2004, and made possible with federal grant funds.

A comparable collaboration may be beyond the scope of most Wisconsin CCRs. However, the guide contains information about the approach, priorities, implementation and lessons learned through these demonstration projects, which may be very valuable to local communities as we grapple with the emerging problems of domestic abuse among military-involved families.

For the complete guide, **Collaborating for Safety: Coordinating the Military and Civilian Response to Domestic Violence Elements and Tools** (Jane Sadusky & BWJP) go to: www.bwjp.org/military_civilian_ccr.aspx

Creating a Military-Civilian CCR...continued

Briefly, they include the following steps:

- Identify shared underlying assumptions and build a shared framework to guide practitioners who intervene in domestic violence cases.
- Assist intervening agencies in developing and implementing policies and operating procedures that reflect the shared framework.
- Monitor and track cases from initial contact through case closure in order to ensure accountability for both offender and agency.
- Coordinate the exchange of information and interagency communication and decision-making related to domestic violence cases.
- Ensure that victims and other at-risk family members have access to resources and services that offer safety and protection.
- Utilize a combination of sanctions, restrictions, and rehabilitation services to hold offenders accountable and to protect victims from further abuse.
- Undo the harm caused to children by the abusive actions of one parent toward the other parent and the children themselves.
- Evaluate the coordinated community response from the standpoint of victim safety.

As participants in military-civilian CCR demonstration projects observed, it requires attentive planning and persevering in spite of doubts and uncertainty, as well as celebrating accomplishments. Each demonstration site anchored its work in “mapping” each point of intervention in domestic violence cases.

This detailed examination of the steps in case processing helped each CCR build and strengthen partnerships and overall collaboration as participants came to better understand each other’s roles and functions in responding to domestic abuse. It also reinforced the interdisciplinary foundation of a coordinated community response and introduced military and civilian interveners to new ways of working together. Finally, mapping helped identify issues and problematic practices for the CCR to address in its ongoing work.



RECOMMENDED RESOURCES

Free, archived webinars, including the topics “Custody Issues and Military Families”; “Military Justice and the Legal Assistance Program”; “Women Veterans and Trauma”; and many more can be accessed at any time on the **BWJP** webpage:

www.bwjp.org/webinar_recordings_military.aspx

The **BWJP** webpage also provides technical assistance related to military domestic violence issues. They moderate a listserv which allows both military and civilian victim advocates to network, share information, and request consultation from experts in working with military members, veterans, and their families. A variety of advocate resource guides and data on DV from the Department of Defense can be found at this same location:

www.bwjp.org/spotlight_on_military.aspx

The **National Center on Domestic and Sexual Violence** offers articles and reports related to military fatality reviews and legal challenges that arise between the disjointed military-civilian domestic violence response systems.

www.ncdsv.org/ncd_military_tools.html

*As WCADV staff worked on this issue of the Coalition Chronicles, we turned again and again to the **Battered Women’s Justice Project (BWJP)** for information and assistance. Just before our publication date, **Glenna Tinney**, BWJP Military Advocacy Program Coordinator, was honored on March 19 by the White House as one of 14 Women Veteran Champions of Change. Read her post on the Whitehouse blog here:*

www.whitehouse.gov/blog/2013/03/21/honor-courage-and-commitment

Resources from Battered Women’s Justice Project highlighted in this issue:

Below are selected resources and the page numbers on which they are discussed in this issue of the Coalition Chronicles.

Victim Advocate Guide: Intimate Partner Violence (IPV) with Military-Related Victims

(See pages 5-8.) http://www.bwjp.org/files/bwjp/files/Victim_Advocate_Guide.pdf

Understanding the Military Response to Domestic Violence: Tools for Civilian Advocates

(See pages 8-12.)

www.bwjp.org/files/bwjp/articles/Appendix%2007_Understanding%20the%20Military%20Response%20to%20Domestic%20Violence_Part1.pdf

Safety at Home – Intimate Partner Violence, Military Personnel, and Veterans

(See page 14.)

http://www.bwjp.org/elearning_course.aspx

Collaborating for Safety: Coordinating the Military and Civilian Response to Domestic Violence Elements and Tools

(See pages 16-17.)

www.bwjp.org/files/bwjp/articles/Collaborating_for_Safety.pdf



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